

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

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Borough of Wimbledon

Annual Report

OF THE

MEDICAL OFFICER
OF HEALTH

AND

SCHOOL MEDICAL
OFFICER

For the Year 1938



Borough of Wimbledon.

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

Year ended 31st December, 1938

Public Health Committee

Chairman:

Councillor E. FIELDER.

Vice-Chairman:

Councillor Miss D. H. CARVER.

Members:

The MAYOR (Alderman E. J. MULLINS, J.P.), <i>ex-officio</i> .	
Alderman A. W. HICKMOTT	Councillor A. R. KELLY
Councillor A. E. BAXTER,	„ W. A. LINES
„ O.B.E., J.P.	„ J. E. G. McSHEEHY
„ G. D. CHAMBERS	„ LADY RONEY, J.P.
„ A. A. DRAKE, J.P.	„ J. P. C. WATSON
„ N. C. EDWARDS	

Maternity and Child Welfare Committee

Chairman:

Councillor LADY RONEY, J.P.

Vice-Chairman:

Councillor T. E. JENNER.

Members:

The MAYOR (Alderman E. J. MULLINS, J.P.), <i>ex-officio</i> .	
Alderman T. R. DANIEL	Councillor A. A. DRAKE, J.P.
„ A. W. HICKMOTT	„ N. C. EDWARDS
Councillor Miss D. H. CARVER	„ E. FIELDER
	„ W. B. JAMES, J.P.
Mrs. DANIEL	
„ FIELDER	
„ JAMES	
„ SHEERMAN.	

STAFF

Whole-Time:

*Medical Officer of Health; School Medical Officer;
Medical Superintendent of the Infectious Diseases Hospital;
Maternity and Child Welfare Officer:*

‡ * HAROLD ELLIS, M.B., B.S.(Lond.), M.R.C.S.,
L.R.C.P., D.P.H.

*Assistant Medical Officer of Health, Assistant School Medical
Officer:*

‡ EFFIE M. D. CRAIG, M.B., Ch.B.

Senior Sanitary Inspector:

* R. T. AVIS, M.R.San.I., M.S.I.A., (c), (e), (f).

Sanitary Inspectors:

* D. F. S. FLYNN, (e), (f).

* L. E. TRIGG, (e), (f) (resigned 28th May, 1938).

* C. J. CATTELL, (e) (f) (resigned 31st December, 1938).

* H. R. FRY, (e) (appointed 1st June, 1938).

Health Visitors—School Nurses:

MISS V. B. WOODROFF, (b), (c), (g).

MISS A. THOMPSON, (a), (b), (d) (resigned 31st January, 1938).

MISS P. N. NASH, (a), (b), (d).

MISS J. C. MOFFAT, (a), (b), (d), (h).

MISS D. E. MARCHANT, (a), (b), (d), (h) (appointed 17th
January, 1938).

MISS E. S. G. DAVIES, (a), (b), (d), (h) (appointed 1st February,
1938).

Matron of Infectious Diseases Hospital:

MISS L. McCRORY.

Matron of Day Nursery:

MISS I. CUTLER.

Senior Clerk:

A. L. TAYLOR.

Clerks:

R. E. SHAW (appointed 19th July, 1938).

J. E. FIELD.

Clerk to the Maternity and Child Welfare Department:

A. L. TAYLOR.

Part-Time:

LESLIE H. W. WILLIAMS, F.R.C.S., F.C.O.G., *Obstetric Consultant.*

JOCELYN A. M. MOORE, F.R.C.S., M.C.O.G., *Medical Officer to Ante-natal Clinic.*

MARY M. TULLOCH, M.B., B.S., *Medical Officer to Maternity and Child Welfare Centres.*

W. L. GALVIN, M.B., B.Ch., *Deputy Medical Attendant Infectious Diseases Hospital.*

ARTHUR MILLER, F.R.C.S., *Consulting Oto-Laryngologist to Infectious Diseases Hospital.*

R. J. FURLONG, F.R.C.S., *Orthopædic Surgeon.*

R. J. CANN, M.S., *Surgeon to Aural Clinic.*

A. McALLISTER, F.R.C.S., *Consulting Obstetrician under Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926.*

COL. E. MIDDLETON PERRY, C.B.E., F.R.C.V.S., *Veterinary Inspector.*

J. H. JOHNSTON, M.Sc., L.S.A., *Bacteriologist.*

* Salary contribution under Public Health Acts.

† by Exchequer Grants.

a. S.R.N.

b. S.C.M.

c. Certificate Sanitary Inspectors Examination Board (London).

d. New Health Visitor's Certificate, Royal Sanitary Institute.

e. Certificate Royal Sanitary Institute for Inspector of Nuisances.

f. Certificate Royal Sanitary Institute for Inspector of Meat & Other Foods.

g. Diploma Board of Education (Health Visitors' Training) Regulations, 1919.

h. Certificate of Fever Training.

Borough of Wimbledon

Public Health Department

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

Year ended 31st December, 1938

To the Mayor, Aldermen, and Councillors
of the Borough of Wimbledon.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Annual Report on the work of the Public Health Department for the year ending 31st December, 1938. The Report for 1938 is an ordinary Report, set out on the lines suggested in Circular 1728 of the Ministry of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (in acres—Census, 1931) ...	...	3,221
Population (Census, 1931) ...	...	59,524
Population (Estimated, 1938, R.G.) ...	...	58,680

Number of inhabited houses :—

1921 (Census) ...	...	11,926
1931 (Census) ...	...	13,325
1938 (According to Rate Books) ...	...	16,300

Number of families or separate occupiers :—

1921 (Census) ...	...	13,998
1931 (Census) ...	...	15,883

Rateable Value :—£804,402.

Sum represented by a penny rate :—£3,351.

Social Conditions.—During recent years a large number of flats have been erected, particularly north of the railway. Many of the residents of the Borough are engaged in professional and commercial occupations.

In the southern part of the Borough there are a number of factories, three hundred and twenty-six premises being registered under the Factories Act 1937. Most of these premises are small. They include eighteen laundries which employ a large number of women. In addition, there are leather works, gas mantle works, tool and file works, and railway stock and repair depôts, which also employ a considerable number of people.

The nature of the work carried on in these factories and workshops does not exert any influence on the public health of the town.

The figures for unemployment amongst Wimbledon residents registered at the Employment Exchange at the end

of the year show an increase of three hundred and eighty-nine as compared with those at the same date in 1937. The following table shows the position with regard to unemployment for the past eight years:—

31st December	Classification				Total
	Male Adults	Male Juveniles	Female Adults	Female Juveniles	
1931	1,266	34	253	36	1,589
1932	1,434	78	273	56	1,841
1933	1,248	23	230	7	1,508
1934	1,088	24	330	19	1,461
1935	810	17	225	24	1,076
1936	600	10	130	15	755
1937	750	16	14	11	922
1938	1,008	23	0	20	1,311

Extracts from Vital Statistics of the Year 1938.

(Registrar-General's Figures).

			Total.	M.	F.	
Live Births	{	Legitimate	666	320	346	
		Illegitimate	32	19	13	
		Total	698	339	359	
Birth Rate per 1,000 of the estimated resident population 11.89						
			Total.	M.	F.	
Stillbirths	{	Legitimate	22	17	5	
		Illegitimate	2	1	1	
		Total	24	18	6	
Rate per 1,000 total (live and still) births 33.24						

Deaths	...	...	...	...	Total.	M.	F.
					703	314	389
Death Rate per 1,000 of the estimated resident population	...	...	...	...	...	...	10.78

Percentage of Total Deaths occurring in Hospitals and similar Institutions 49.79

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

	Deaths.	Rate per 1,000 total (live & still) births.
No. 29. Puerperal sepsis	2	2.77
No. 30. Other puerperal causes	—	—
Total	2	2.77

Death Rate of Infants under one year of age :—

All infants per 1,000 live births	...	45.84
Legitimate infants per 1,000 legitimate live births	...	43.54
Illegitimate infants per 1,000 illegitimate live births	...	93.75
Deaths from Cancer (all ages)	...	119
„ „ Measles (all ages)	...	4
„ „ Whooping Cough (all ages)	...	1
„ „ Diarrhœa (under 2 years of age)	...	3

Birth Rates, Death Rates, Analysis of Mortality, Maternal Death Rates, and Case Rates for Certain Infectious Diseases in the Year 1938.

(Provisional Figures based on Weekly and Quarterly Returns).

	Wimbledon	England and Wales	126 County Boroughs and Great Towns including London	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	London Administrative County
Rates per 1,000 Population					
Births:					
Live	11.89	15.1	15.0	15.4	13.4
Still	0.40	0.60	0.65	0.60	0.48
Deaths:					
All Causes	10.78	11.6	11.7	11.0	11.4
Typhoid and Paratyphoid Fevers ...	0.00	0.00	0.00	0.00	0.00
Smallpox	—	0.00	—	0.00	—
Measles	0.06	0.04	0.05	0.03	0.06
Scarlet Fever	0.00	0.01	0.01	0.01	0.01
Whooping Cough	0.01	0.03	0.03	0.02	0.03
Diphtheria	0.03	0.07	0.07	0.06	0.05
Influenza	0.15	0.11	0.10	0.11	0.06
Violence	0.64	*	*	*	*
Notifications:					
Smallpox	—	0.00	0.00	0.00	—
Scarlet Fever	0.93	2.41	2.60	2.58	2.05
Diphtheria	0.63	1.58	1.85	1.53	1.90
Enteric Fever	0.01	0.03	0.03	0.04	0.05
Erysipelas	0.39	0.40	0.46	0.39	0.46
Pneumonia	0.35	1.10	1.28	0.98	0.98
Rates per 1,000 Live Births					
Infant Mortality:					
Deaths under 1 year of age	45	53	57	51	57
Deaths from Diarrhoea and Enteritis (under two years of age)	4.29	5.5	7.8	3.6	13.1
Maternal Mortality:					
Puerperal Sepsis	2.86	0.89	}	*	*
Others	0.00	2.19			
Total	2.86	3.08			
Rates per 1,000 Total Births (i.e., Live and Still)					
Maternal Mortality:					
Puerperal Sepsis	2.77	0.86	}	*	*
Others	0.00	2.11			
Total	2.77	2.97			
Notifications:					
Puerperal Fever	15.23	14.42	18.08	12.51	3.53
Puerperal Pyrexia					15.46

* Not available.

Population, Birth, and Death Rates for each Ward in 1938.

WARD.	Popula- tion.	Birth Rate.	Death Rate.
St. Mary's	6,678	9.73	15.12
St. John's	5,092	10.60	14.33
Cottenham Park	7,477	10.16	13.37
Wimbledon Park	4,406	10.66	12.02
North Wimbledon	23,653	10.23	13.82
Dundonald	7,813	11.77	11.77
Trinity	11,552	11.85	9.86
South Park	8,430	13.16	10.91
Haydon Park	7,232	12.44	10.78
South Wimbledon	35,027	12.27	10.78
WHOLE DISTRICT	58,680	11.89	10.78

Births.—The statistics supplied by the Registrar-General show that during 1938 the total number of registered live births belonging to Wimbledon amounted to six hundred and ninety-eight (three hundred and thirty-nine males and three hundred and fifty-nine females). This gives a birth rate equal to 11.89 per thousand of the population. Thirty-two (or 4.58 per cent.) of the births were illegitimate. Of this number, nineteen were males and thirteen females. In addition, twenty-four stillbirths (eighteen males and six females) were registered.

The following table gives the birth rates in Wimbledon since 1922 together with the comparative figures for England and Wales. In 1923, the birth rate in Wimbledon was 14.9. Since that year the figure has been steadily falling, although during 1935 and 1936 a slight increase in the rate is to be noted. The rate for 1938 is the highest in the present decade.

Year	Wimbledon		Birth Rate for England & Wales
	Number of Births	Birth Rate	
1922	868	14.0	20.6
1923	868	14.9	19.7
1924	814	14.01	18.8
1925	760	13.06	18.3
1926	807	13.9	17.8
1927	717	12.3	16.7
1928	691	11.6	16.7
1929	759	12.7	16.3
1930	766	12.9	16.3
1931	642	10.9	15.8
1932	667	11.2	15.3
1933	602	10.2	14.4
1934	590	10.09	14.8
1935	600	10.29	14.7
1936	630	10.78	14.8
1937	608	10.40	14.9
1938	698	11.89	15.1

Public Health Act, 1936—Notification of Births.

During the year, seven hundred and forty-nine births were notified by the following persons:—

Parents	...	...	...	...	6
Midwives	...	...	...	...	259
Doctors	...	...	...	...	26
Other persons	...	...	...	...	458
				Total	749

Sixteen of these notifications were in respect of stillbirths.

Of the seven hundred and forty-nine notifications, three hundred and thirty were received from Medical Officers of Health of outside areas, and related to births which had occurred to Wimbledon residents confined outside the Borough. Similarly, eighty-eight confinements occurred in Wimbledon amongst women whose homes were situated in other districts. The net number of notified births belonging to Wimbledon is therefore six hundred and sixty-one.

Deaths.—The total number of deaths registered in the district was four hundred and eighty-four (two hundred and four males and two hundred and eighty females), equal to a death rate of 8.24 per thousand of the population.

The deaths occurring outside the district, of persons belonging to this Borough, were two hundred and ninety-six, namely:—

Kingston and District Hospital	...	98
Nelson Hospital, Merton	... ..	28
S.C.C. Sanatorium	... ..	2
St. Thomas's Hospital	... ..	2
Richmond Institution	... ..	12
Brookwood Mental Hospital	... ..	9
Others	... ..	155
		<hr/>
Total	...	296
		<hr/>

The deaths occurring within the district, of persons not belonging thereto were seventy-seven, namely:—

Wimbledon Hospital	... ..	33
Infectious Diseases Hospital	... ..	4
Atkinson Morley Hospital	... ..	1
Private Nursing Homes	... ..	24
Others	... ..	15
		<hr/>
Total	...	77
		<hr/>

Taking these figures into consideration, the total number of deaths properly belonging to Wimbledon is seven hundred and three and the crude death rate 11.98 per thousand of the population. The rate for England and Wales for the same period was 11.6 per thousand.

The crude death rate shows a decrease on the figure for the previous year but is slightly higher than that for England and Wales.

The following table gives the crude death rate in Wimbledon since 1922, together with the figures for England and Wales:—

Year	Wimbledon			Death Rate for England & Wales
	Number of Deaths	Crude Death Rate	Adjusted Death Rate	
1922	616	9.9	8.91	12.9
1923	547	9.4	8.46	11.6
1924	645	11.1	9.99	12.2
1925	639	10.9	9.81	12.2
1926	579	9.9	8.91	11.6
1927	620	10.6	9.54	12.3
1928	634	10.7	9.63	11.7
1929	774	13.03	11.72	13.4
1930	648	10.9	9.81	11.4
1931	724	12.3	11.07	12.3
1932	713	11.9	10.71	12.0
1933	636	10.8	9.72	12.3
1934	673	11.5	10.36	11.8
1935	662	11.3	10.22	11.7
1936	667	11.4	10.26	12.1
1937	754	12.9	11.61	12.4
1938	703	11.9	10.78	11.6

The crude death rate for Wimbledon is, strictly speaking, not comparable with the figure for England and Wales. In order to provide for this the Registrar-General has introduced a comparability factor. This factor, for Wimbledon,

is 0.90. The adjusted death rate for Wimbledon for 1938 is consequently 10.78 per thousand of the population as compared with a figure of 11.6 per thousand for England and Wales.

Graph showing Birth Rates and Death Rates per thousand of the population for Wimbledon and England and Wales.

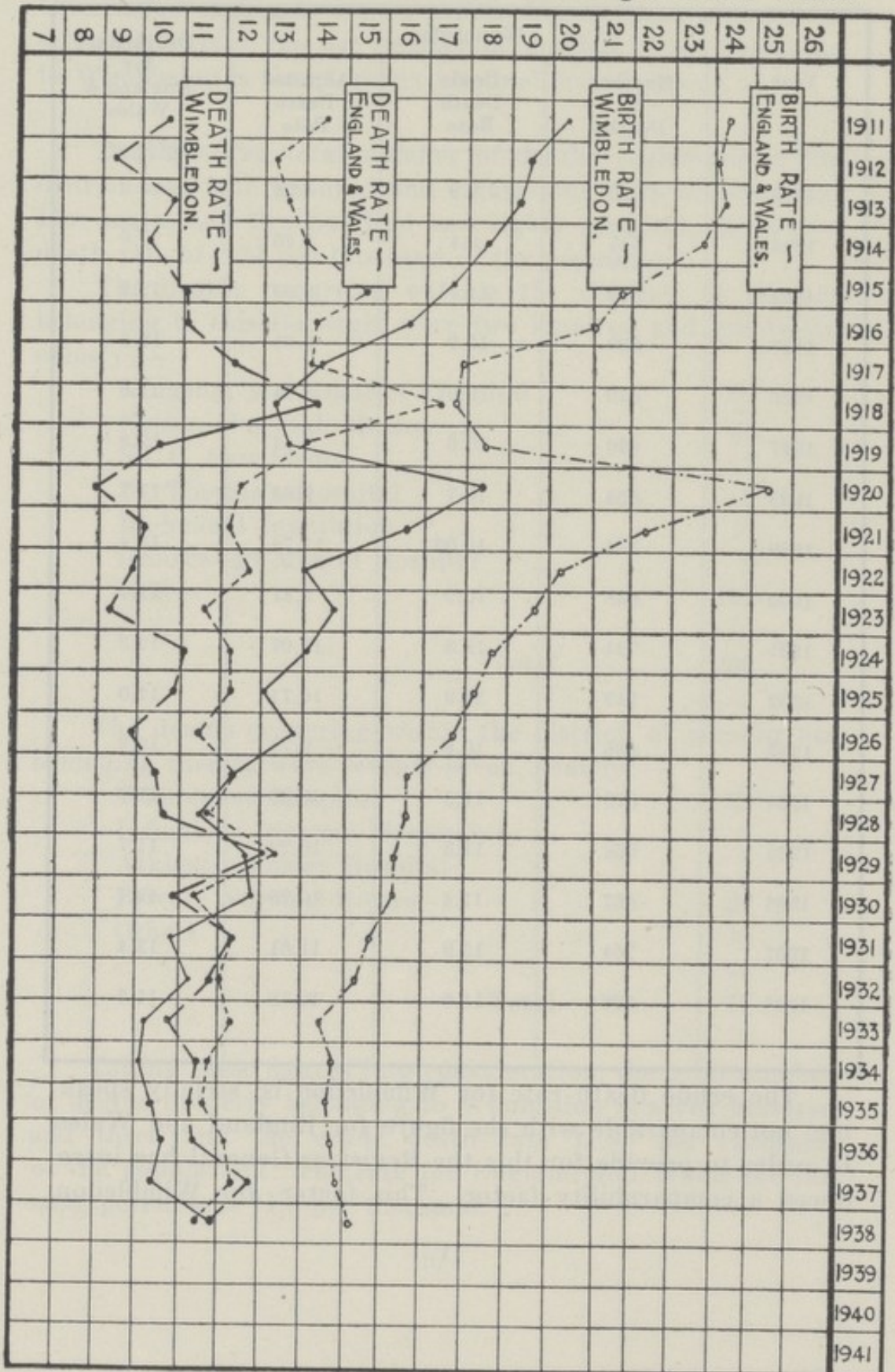


Table II gives the causes of, and ages at, death during 1938. Deaths due to notifiable infectious diseases are given on page 87. The principal causes of death (excluding zymotic diseases) were as follows:—

Cancer	...	...	...	...	119	
Heart Disease	...	...	...	176	}	260
Cerebral Hæmorrhage	...	...	...	33		
Aneurysm	...	...	...	4		
Other Circulatory Diseases	...	...	...	47		
Pneumonia	...	...	...	43	}	73
Bronchitis	...	...	...	19		
Other Respiratory Diseases	...	...	...	11		
Influenza	...	...	...	...	9	
Tuberculosis (Respiratory)	...	...	...	...	25	

Over half the total deaths which occurred amongst Wimbledon residents in 1938 were due to cancer and diseases of the heart and circulation. Owing to the falling birth rate the mean age of the population is steadily rising. For this reason it is unlikely that the deaths from cancer and heart disease etc., will show any diminution during the coming years.

Cancer.

Cancer and malignant disease were responsible for one hundred and nineteen deaths or 16.92 per cent. of the total deaths recorded.

The following table gives the percentage figures since 1922 :—

Year	Total Deaths	Deaths from Cancer	Percentage
1922	616	91	14.77
1923	546	68	12.45
1924	645	86	13.33
1925	638	90	14.10
1926	579	104	17.96
1927	620	75	12.09
1928	632	84	13.29
1929	774	103	13.30
1930	648	106	16.35
1931	724	103	14.22
1932	713	104	14.58
1933	636	92	14.46
1934	673	92	13.67
1935	662	116	17.52
1936	667	84	12.61
1937	754	130	17.24
1938	703	119	16.92

Diseases of the Heart and Circulation.

One hundred and seventy-six deaths were due to heart disease. In addition there were thirty-three deaths from cerebral hæmorrhage, four from aneurysm and forty-seven from other circulatory diseases. Thus, two hundred and sixty deaths occurred from diseases of the heart and circulation. This figure represents 36.98 per cent. of the total number of deaths recorded.

The following table, which gives the figures since 1922, indicates that diseases of the heart and circulation are very important factors in the causation of death in Wimbledon.

YEAR	TOTAL DEATHS	DEATHS FROM HEART AND CIRCULATORY DISEASES	PERCENTAGE
1922	616	133	21.59
1923	546	142	26.00
1924	645	171	26.51
1925	638	193	30.02
1926	579	143	24.69
1927	620	171	27.58
1928	632	179	28.32
1929	774	208	26.87
1930	648	188	29.01
1931	724	243	33.56
1932	713	219	30.71
1933	636	208	32.70
1934	673	249	36.99
1935	662	213	32.17
1936	667	259	38.88
1937	754	286	37.93
1938	703	260	36.98

Bronchitis, Pneumonia, and Other Respiratory Diseases.

Nineteen deaths were due to bronchitis, forty-three to pneumonia and eleven to other respiratory diseases. This gives a total figure of seventy-three, or 10.38 per cent. of the total deaths occurring amongst residents of the Borough during 1938.

The following table gives the figures for these diseases for each year since 1922:—

YEAR	TOTAL DEATHS	DEATHS FROM BRONCHITIS, PNEUMONIA, AND OTHER RESPIRA- TORY DISEASES	PERCENTAGE
1922	616	102	16.56
1923	546	84	15.38
1924	645	101	17.20
1925	638	98	15.36
1926	579	102	17.61
1927	620	89	14.35
1928	632	81	12.81
1929	774	117	15.11
1930	648	79	12.19
1931	724	80	11.04
1932	713	88	12.34
1933	636	69	10.84
1934	673	72	10.69
1935	662	68	10.27
1936	667	63	9.46
1937	754	73	9.68
1938	703	73	10.38

Deaths due to Violence.

The figures set out below give an indication of the manner in which twenty-eight Wimbledon residents died as the result of violence. It will be noted that seven of the deaths, equal to 0.99 per cent. of the total deaths occurring amongst Wimbledon residents, were due to traffic accidents. Five of these occurred outside the Borough. Nine of the other deaths from violence were caused by fractures due to falls, occurring for the most part in elderly people.

Traffic deaths	7
Fractures due to falls	9
Other causes	12
	—
Total	28

Five persons living outside the Borough were killed in Wimbledon as the result of traffic accidents.

In addition to the above, ten cases of suicide occurred amongst Wimbledon residents during 1938.

Infantile Mortality.

There were thirty-two infant deaths (including transferable deaths) giving an Infantile Mortality Rate of forty-five per thousand live births. In 1937 the figure was sixty-five per thousand. During 1938 the Infantile Mortality Rate for England and Wales was fifty-three.

The following table gives the Infantile Death Rate in Wimbledon since 1922, together with the comparative figures for England and Wales:—

YEAR	WIMBLEDON		INFANTILE DEATH RATE FOR ENGLAND AND WALES
	NUMBER OF INFANTILE DEATHS	INFANTILE DEATH RATE PER 1,000 BIRTHS)	
1922	50	58	77
1923	38	44	69
1924	59	70	75
1925	46	60	75
1926	27	33	70
1927	37	50	69
1928	38	55	65
1929	35	46	74
1930	38	49	60
1931	45	70	66
1932	45	67	65
1933	30	49	64
1934	32	54	59
1935	33	55	57
1936	32	50	59
1937	40	65	58
1938	32	45	53

Of the thirty-two children under one year who died, the cause of death in eleven cases was prematurity and debility. Three died as the result of congenital defects. One death was due to measles, two to pneumonia, eight to broncho-pneumonia. Infantile diarrhœa was responsible for three deaths.

The Infantile Death Rate for illegitimate children in Wimbledon was 93.75 per thousand illegitimate live births.

The following table shows the causes of death, and ages at death, of infants under one year:—

Infantile Mortality during the Year 1938.

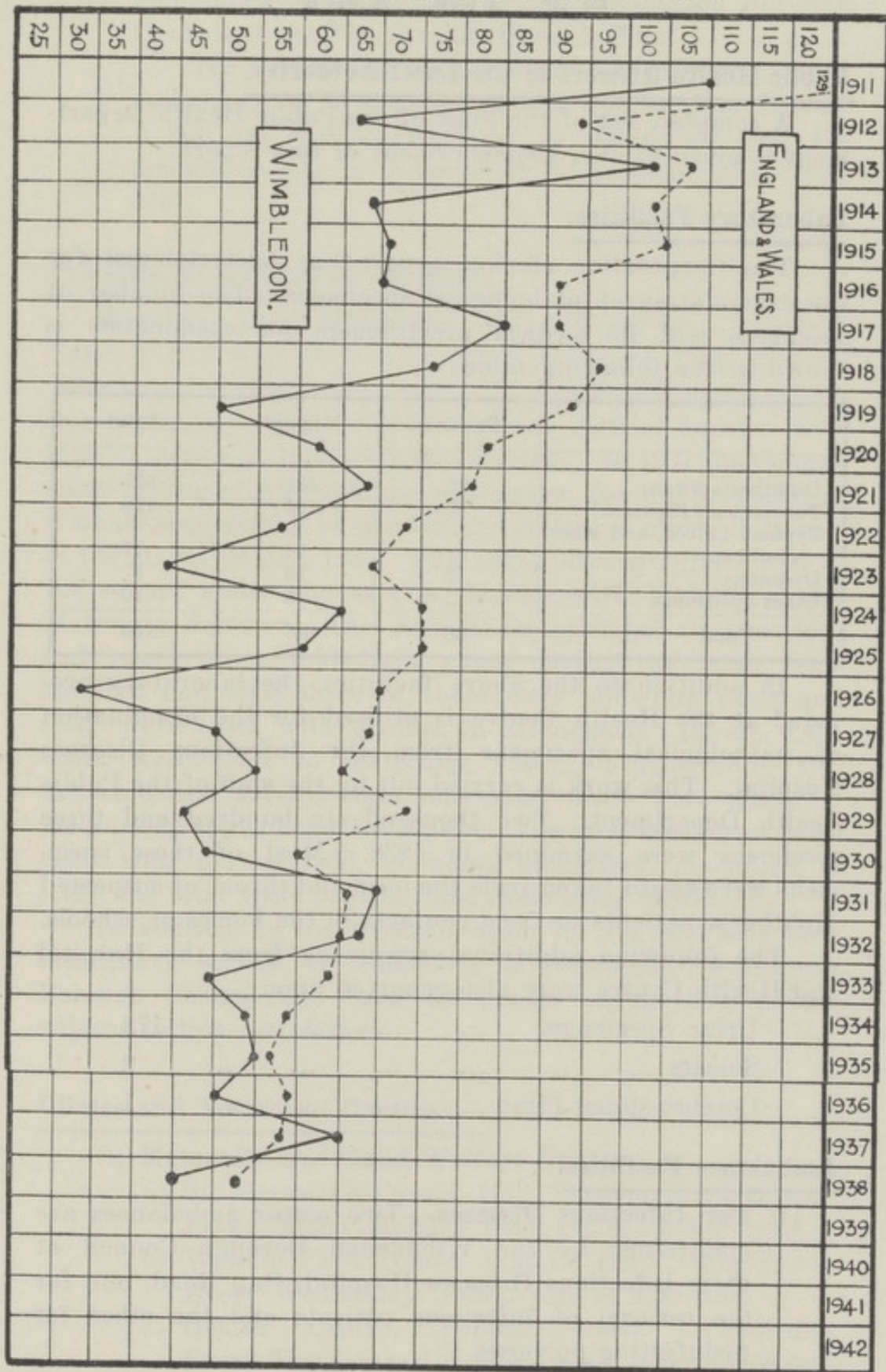
Causes of Death.	Under 1 week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 weeks.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under One Year.
	Measles	1		...	1
Pneumonia ... ..	...	...	...	1	1	1	...	...	...	2
Broncho-Pneumonia	1	...	...	...	1	3	3	...	1	8
Gastro-Enteritis	1	...	...	...	1	1	...	1	...	3
Pyloric Stenosis ... ..	...	...	...	1	1	...	...	...	...	1
Prematurity	9	1	...	...	10	...	...	...	...	10
Atelectasis	1	...	...	...	1	...	...	...	...	1
Malpresentation	2	...	...	...	2	...	...	...	...	2
Congenital Defects	1	1	...	...	2	...	...	1	...	3
Other Causes ... ..	...	...	...	1	1	...	...	...	...	1
TOTAL	15	2	...	3	20	5	3	3	1	32

Neo-natal Mortality.

Twenty deaths occurred amongst infants during the first four weeks of life. This is equal to a mortality rate of 28.65 per thousand total live births.

Eleven of these deaths were due to prematurity and debility, one to gastro-enteritis, two to congenital defects, two to malpresentation, and one to other causes.

Graph showing Infantile Mortality Rates per thousand births for Wimbledon and England and Wales.



GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Public Health Officers of the Local Authority.

A complete list of the Staff of the Public Health Department is given at the commencement of this report.

Laboratory Facilities.

The Corporation employ a part-time bacteriologist for the examination of pathological specimens. The number of specimens sent by medical practitioners for examination is shown in the following table:—

	Positive	Negative	Total
Diphtheria Swabs... ..	26	481	507
Tuberculosis (Sputum) ...	7	121	128
Typhoid (Blood, and other specimens) ... ..	...	21	21
Dysentery	3	34	37
Other Specimens ... ..	...	10	10
Total	36	667	703

In addition to the above facilities, the laboratory provided at the Health Centre is utilised for the examination of pathological specimens from the Infectious Diseases Hospital. This work is carried out by the staff of the Public Health Department. Two thousand six hundred and three specimens were examined in 1938. Most of these specimens were swabs taken from the nose and throat of suspected diphtheria patients or from contacts in the homes or schools.

The following additional specimens from the Hospital and Health Centre were also reported upon:—

Urine Specimens	173
Smears	2
Cerebro-spinal Fluid	1

Ambulance Facilities.

- (i) **For Infectious Diseases.**—Two motor ambulances are maintained by the Wimbledon Borough Council at their Infectious Diseases Hospital, Gap Road, one for the removal of infectious patients and the other for disinfecting purposes.

- (ii) **For Non-infectious Cases and Accidents.**—One motor ambulance is maintained by the Wimbledon Borough Council at the Fire Station, Queen's Road.

The British Red Cross Society also provide a motor ambulance for Wimbledon and the surrounding district. A full day and night service is maintained and the ambulance may be obtained by telephoning Wimbledon 4567.

Professional Nursing in the Home.

General and Midwifery.—The Wimbledon District Nursing and Midwifery Association, which is supported by voluntary contributions, has a staff of a Superintendent and eleven nurses. Seven of the staff are district nurses, three district midwives, and one a senior nurse. In 1937 the Council made arrangements with the Association for the provision of a whole-time service of domiciliary midwives under Section I of the Midwives Act, 1936. Full particulars are given later in the report under the section dealing with Midwifery and Maternity Services. The Association attended two hundred and twenty-three midwifery cases during the year. One hundred and sixty-three of these were midwives cases and sixty were cases with doctors in attendance. In all, 4,421 visits were paid to maternity cases. Furthermore, two thousand and seventy-eight ante-natal visits were made by the nursing staff of the Association. The total number of cases dealt with during 1938, including midwifery, amounted to 1,727, the total visits paid to these cases being 33,072.

In addition to the payment made for the provision of a domiciliary service of whole-time midwives the Wimbledon Borough Council also make an annual contribution of ten guineas to this Association.

Clinics and Treatment Centres :—

(i) **Maternity and Child Welfare Centres.**

- (a) St. Matthew's Church Hall, Spencer Road, Raynes Park. Every Monday from 2 p.m. to 4.30 p.m.
- (b) Wandle Park House, Wandle Bank, Wimbledon. Every Wednesday from 2 p.m. to 4.30 p.m.
- (c) Health Centre, Pelham Road, Wimbledon. Every Tuesday and Friday from 2 p.m. to 4.30 p.m.

(ii) **Ante-natal Clinic.**

- (a) Health Centre, Pelham Road, Wimbledon.
Every Monday from 2 p.m. to 4.30 p.m.
- (b) Wandle Park House, Wandle Bank, Wimbledon.
Every Thursday from 2 p.m. to 4.30 p.m.

(iii) **Mothercraft Classes.**

- (a) Health Centre, Pelham Road, Wimbledon.
Every Thursday from 3 p.m. to 4 p.m.
- (b) Wandle Park House, Wandle Bank, Wimbledon.
Every Thursday from 3 p.m. to 4 p.m.

(iv) **Dental Treatment Centre.**

Health Centre, Pelham Road, Wimbledon.
Daily (including Saturday) from 9.15 a.m.

(v) **School Clinic.**

Health Centre, Pelham Road, Wimbledon.

- (a) Minor Ailment Clinic. Every morning (including Saturday) from 9 a.m. to 12 noon.
- (b) Special Inspection Clinic. Every Wednesday from 9 a.m. to 12 noon.
- (c) Orthopædic Clinic. Second Wednesday in each month from 2 p.m. to 4 p.m.
- (d) Aural Clinic. Every fourth Wednesday from 2 p.m. to 4 p.m.
- (e) Ophthalmic Clinic. Every Monday from 2 p.m. to 4 p.m. (Additional Sessions on Wednesday afternoons as required).
- (f) Diphtheria Immunisation Clinic. Every Saturday from 10 a.m. to 11 a.m.

(vi) **Day Nursery.**

Hubert Road, Wimbledon.

The above are provided and maintained by the Wimbledon Borough Council.

(vii) **Tuberculosis Dispensary.**

30 Worple Road, Wimbledon, S.W.19. The Dispensary is provided and maintained by the Surrey County Council:—

Every Wednesday from 1.30 p.m. to 3.30 p.m.

Every Friday from 9.30 a.m. to 11.30 a.m.

First Tuesday in each month from 5.30 p.m. to 7.30 p.m.

(viii) **Venereal Diseases.**

Under the scheme of the Surrey County Council, facilities for treatment are available through the out-patient departments of the principal London Hospitals.

Hospitals.

- (i) **Tuberculosis.**—Most Wimbledon patients suffering from pulmonary tuberculosis are admitted to the Sanatorium at Milford which is under the administration of the Surrey County Council. The majority of the cases of surgical tuberculosis are sent to St. Anthony's Hospital, Cheam, or The Royal Sea Bathing Hospital, Margate, or similar institutions.
- (ii) **Maternity.**—The Maternity Block of the Nelson Hospital has accommodation for twenty beds, together with an Ante-natal Department. Although this hospital is situated just outside the boundary, one hundred and forty-four Wimbledon mothers were admitted for their confinements during 1938, an increase of four on the figure for the previous year. One hundred and fourteen of these were admitted to the general maternity ward and thirty to the private maternity wards. One hundred and thirty-four Wimbledon mothers were also admitted to the Maternity Department of the Kingston County Hospital for their confinements. This shows an increase of thirty-nine over the figure for 1937.
- (iii) **Children.**—There are no special Children's Hospitals in Wimbledon. The general hospitals in the area are available for the purpose. Many of the children in the Borough receive treatment from London hospitals such as Great Ormond Street and Tite Street.
- (iv) **Infectious Diseases.**—The Corporation's Infectious Diseases Hospital, at Gap Road, has accommodation for one hundred and six beds for the treatment of patients suffering from scarlet fever, diphtheria, enteric, erysipelas, meningitis, etc. Cases of measles and whooping cough are also

admitted when the home conditions render this desirable. In addition, treatment is provided for certain cases of puerperal sepsis. The Wimbledon Corporation admit to their Infectious Diseases Hospital all cases of scarlet fever and diphtheria requiring hospital treatment from the Royal Borough of Kingston-upon-Thames.

General Hospitals.

There is only one general hospital in the district, viz.: the Wimbledon Hospital, Thurstan Road, Copse Hill, which has accommodation for seventy-two bed cases. In addition there is the Nelson Hospital for Wimbledon, Merton and District, which is situated just outside the boundary. This hospital has sixty-two beds for medical and surgical cases and twenty beds for maternity patients. The Kingston County Hospital, which is at Norbiton, has five hundred beds. This hospital was administered by the Public Assistance Committee, and was appropriated by the Public Health Committee of the Surrey County Council as from 1st April, 1937.

Institutions for unmarried mothers.

The Southwark Diocesan Maternity Home at 56, Gap Road, has accommodation for twelve mothers.

Public Assistance.

The following information has been furnished by the Chief Public Assistance Officer concerning relief in this district:—

Amount paid in Out-door Public Assistance in 1938	£10,222
Average weekly number of persons in receipt of Domiciliary Assistance	491
Average weekly number of persons in receipt of Medical Relief only	6

MATERNITY AND CHILD WELFARE

The further development of the Maternity and Child Welfare Services made necessary an increase of staff and an additional Health Visitor was appointed early in 1938.

The total number of visits paid by the Health Visitors during 1938 amounted to 7,715, the figure for the previous year being 5,901.

Details of the home visits carried out are given below :—

Number of Infants visited—First visits	662
Number of Infants visited—Re-visits	1,363
Number of Toddlers visited	2,176
Ante-natal—First visits	341
Ante-natal—Revisits	196
Visits re Infant Deaths	10
" " Stillbirths	18
" " Ophthalmia Neonatorum ...	48
" " Puerperal Fever and Pyrexia	10
" " Non-notifiable Infectious	
Diseases	75
" " Milk Applications	82
" " Foster Children	317
" " Midwives	14
Miscellaneous	166
Total welfare visits	— 5,478
Visits—School Medical Service ...	935
Tuberculosis—Home visits	42
Visits to Nursing Homes	55
Other visits	21
Ineffectual visits	1,184
	— 2,237
	—
Total visits	7,715
Half-days at Schools	296
Half-days at Welfare Centres	663
Half-days at Clinics	645

The attendance of the children at the Centres has been most satisfactory. The additional sessions held every Tuesday afternoon at the Health Centre, Pelham Road, have been thoroughly justified and have resulted in the lowering of the average attendance from 122 in 1936 to 106 in 1938.

In October, an additional Welfare Centre was opened at St. Matthew's Church Hall, Spencer Road, Raynes Park, on Monday afternoons. The average attendance per session to the end of the year was 33.09.

The average attendance per session at the Wandle Park Centre was 80.46, an increase on the figure of 71.44 in 1937.

The Medical Officer reports that the health and progress of the children continued to be satisfactory.

During the early months of 1938 an epidemic of measles affected a large number of children in Wimbledon. One hundred and six of the children attending the Centres suffered from measles, whooping cough, chicken-pox, and other acute infections. Bronchitis again was the commonest illness, one hundred and fifty cases being seen during the year.

Digestive troubles, including feeding difficulties, gastro-enteritis, acidosis, and thread worms, affected eighty-six children. Eye defects were again very common, eighty-nine children suffered from these. All the cases of discharging eyes quickly cleared up after treatment at the Clinic. Children with strabismus were referred to the ophthalmic department and provided where necessary with glasses.

Fifty-five children and seventy mothers were referred to the dental surgeon for treatment. This is an unusually high number of mothers who needed treatment.

Twenty-nine children were found to be suffering from enlarged tonsils and adenoids. Arrangements were made for tonsillectomy where necessary under the Authority's scheme. Seventy-three cases of otitis media and externa were observed. Treatment was carried out mainly at the Clinic and obstinate cases were referred to the Ear, Nose and Throat Surgeon. Many cleared up entirely. Two children developed mastoiditis and were admitted to hospital for operation.

Seventy children were seen with orthopædic defects. The more severe of these were seen by the Orthopædic Surgeon. Twenty-six children were found to have congenital abnormalities. These included navi, talipes and spina bifida. Five mentally retarded children were kept under observation during the year.

Certain conditions which used to be commonly seen at Welfare Centres and out-patient departments are now becoming almost a rarity. Rickets, for instance, once quite common, was noticed in only two children during 1938. Marasmus and

marked under-nourishment were observed in only eight new cases. Better education of the parents and provision of free milk and cod liver oil in necessitous cases have contributed to this end. Assistance through the Invalid Children's Aid Association in getting children away to Convalescent Homes has benefited a number of these children and has cured others who were debilitated after acute illnesses.

Another encouraging factor is the increased number of breast-fed babies. Seventy per cent. of the infants were entirely or partly breast-fed. The provision of free milk for the mothers was of the greatest value in this respect.

Ante-natal Clinic.

For many years the Ante-natal Clinic was held at Wandle Park House on the second and fourth Thursday in the month. Towards the end of 1937 it was found necessary to hold a weekly session of this Clinic. Throughout the year the average attendance was 20.80 per session, as compared with 18.56 in 1937. It was felt that these numbers were too large for the patients to be adequately dealt with by the medical officer and on 7th November, 1938, an additional Ante-natal Clinic was established at the Health Centre, Pelham Road. This Clinic is held on Monday afternoons from 2 to 4.30. The average attendance to 31st December was 10.66.

The total number of expectant mothers who attended the Corporation's Ante-natal Clinics in 1938 was three hundred and twenty-seven. This figure is equal to 45.9 per cent. of the total number of live births and still-births notified. The percentage in 1937 was 27.60.

This gratifying increase in the attendances has fully justified the extension of the Corporation's Ante-natal Services.

Miss Jocelyn Moore, F.R.C.S., M.C.O.G., was in charge of both these Clinics.

Complicated cases of pregnancy are referred to the Maternity Department of the Nelson Hospital for X-ray examination or other investigations. Where necessary these patients are admitted for treatment.

Women attending the Ante-natal Clinic for post-natal examinations are referred, should the circumstances require, to the South London Hospital for Women for treatment.

Every encouragement is given for midwives to attend the Ante-natal Clinic with their patients.

It should be noted that in addition to the mothers who attended the above Ante-natal Clinics a considerable number also attended the Ante-natal Clinics at the Nelson and Kingston County Hospitals, where two hundred and seventy-eight women living in the Borough of Wimbledon were admitted for their confinements during 1938.

In 1934, the Corporation made arrangements whereby midwives are compensated for the loss of their patients when these are referred to hospital for their confinements after attendance at the Ante-natal Clinic. The rate of compensation paid to the midwives is ten shillings per case.

Lectures for Mothers.

Classes for mothers were held at Wandle Park House, Wandle Bank, and the Health Centre, Pelham Road. Home nursing, mothercraft, hygiene, and singing, were taught. The average attendance of mothers at the Pelham Centre was 26.04 and at the Wandle Park Centre 19.51.

Midwifery and Maternity Services—Midwives Act, 1936.

The Midwives Act, 1936, came into operation on 30th July, 1937. As stated in last year's Report the Council decided to enter into an agreement with the Wimbledon District Nursing and Midwifery Association for the provision of a service of whole-time domiciliary midwives. Three midwives were appointed at the commencement, provision being made for the appointment of a fourth midwife at a later date should this be found to be necessary.

The agreement provides for a payment of £400 per annum to the District Nursing Association by the Corporation. The fee for the services of a midwife acting either as a midwife or a maternity nurse is £2 in respect of a first confinement and thirty shillings in respect of a subsequent confinement. A scale is also in force for the purpose of determining what proportion of the full fee is to be paid by the patient or her husband or other person liable to maintain her. This is determined in accordance with the financial circumstances of the family. When the net weekly income per head of the family, after making the usual deductions, is below seven shillings no charge is made for the services of the midwife. This service is becoming more widely known and there is every indication that the public is making greater use of the facilities available under the Act.

A Joint Committee was formed consisting of three representatives of the Council's Maternity and Child Welfare Committee and three representatives of the Nursing Association. This Committee acts in an advisory capacity and forms a liaison between the two bodies concerned.

During 1938 the domiciliary midwives attended one hundred and thirty-seven cases, one hundred and seven as midwives and thirty as maternity nurses. In addition, fifty-eight cases had been booked for the early part of 1939.

No claims for compensation were received during the year from midwives surrendering their certificates voluntarily under Section 5 of the Act.

In 1937 the Council gave careful consideration to Circular 1622 of the Ministry of Health on the subject of Maternal Mortality. As the result of this, they decided to provide the services of an Obstetric Consultant who would be available to assist medical practitioners, undertaking domiciliary midwifery, in any case of doubt or difficulty arising during the ante-natal period, at the time of confinement, or during the puerperium. The Council, for a number of years, have had a scheme for the hospital treatment of complicated obstetric cases in the Maternity Department of the Nelson Hospital, which is under the charge of Leslie Williams, Esq., F.R.C.S., F.C.O.G. It was felt that the maternity services would be best co-ordinated if Mr. Williams acted as Obstetric Consultant for the Borough and arrangements were made accordingly. The fee for the Consultant's attendance at the patient's home is paid by the Council and relatives are required to contribute in accordance with their financial circumstances. A circular letter was addressed to the local medical practitioners in November, 1937, giving full details of the scheme and information of the procedure to be adopted in order to obtain the services of the Consultant.

Doctors desiring to get into touch with Mr. Williams between the hours of 9.30 a.m. and 5.30 p.m. should ring up his Secretary (Telephone No.: Welbeck 6174). Between 6 p.m. and 9 a.m. application should be made at Mr. Williams' private residence (Telephone No.: Western 6174).

These facilities were only utilised in one case during the year.

Negotiations were completed between the Council and representatives of the Nelson Hospital for the provision

of a suitable emergency unit. This will enable the services of one of the Honorary Obstetric Assistants at the hospital, together with a nurse and the necessary emergency equipment, to be available at short notice for the treatment in their own homes of patients whose condition is too grave to allow of their removal to hospital.

A scheme for the provision of Home Helps was approved by the Council in December, 1937. The difficulty experienced in obtaining suitable women to take up these duties was again very considerable. The payment made to Home Helps was at the rate of twenty-five shillings per week. Relatives are required to contribute towards the cost in accordance with their financial circumstances. Applicants for these appointments are interviewed by the Chairman of the Maternity and Child Welfare Committee and the Medical Officer of Health in order that their suitability for the work may be investigated.

Institutional Provision for Mothers or Children.

With the exception of the Day Nursery, which has accommodation during the day for fifty children under five years of age, the Corporation make no institutional provision for mothers or young children. Details of the work of the Day Nursery are given on page 40.

The Council, however, in certain cases, arrange convalescent treatment for children under school age. During 1938 twenty-eight children were sent to convalescent institutions for varying periods. The arrangements for convalescence are made through the local branch of the Invalid Children's Aid Association.

Midwives Acts, 1902-1926.

The Council is the Local Supervising Authority for the Midwives Acts in Wimbledon.

Seventeen midwives residing in the Borough notified their intention of practising during the year, together with five midwives resident in outside areas. Four of the former eventually removed to other districts, leaving eighteen practising midwives in Wimbledon at the end of 1938, five of whom were resident outside the Borough.

There are, in addition, a number of midwives acting purely as maternity nurses in the maternity homes.

Two hundred and eleven confinements were attended by midwives and sixty-four by maternity nurses.

Regular inspection of the midwives was carried out by the Assistant Medical Officer, who is the Inspector of Midwives for the Borough. These inspections showed that the records, bags, instruments, etc., were being maintained in a satisfactory manner. They also indicated that on the whole the Rules of the Central Midwives Board were being well complied with.

As stated earlier in the Report midwives are invited to attend with their patients at the Ante-natal Clinic, and provision is made for their compensation if patients referred by them are found to require hospital treatment. The compensation paid is at the rate of ten shillings per case.

No uncertified women living in Wimbledon were known to be attending confinements under the direction and supervision of registered medical practitioners.

During previous years the Surrey County Council arranged a course of lectures and demonstrations for the midwives in their area and through the courtesy of the County Medical Officer for Surrey the midwives in Wimbledon were invited to attend. Owing to the crisis in September it was found necessary to postpone this Course. It was eventually held in January, 1939, and a number availed themselves of the opportunity of attending.

The following notifications were received from midwives practising in the district:—

Stillbirths	...	...	...	...	3
Artificial Feeding	...	...	...	...	8
Liability to be a Source of Infection	...	...	...	...	29
Notification of Death	...	...	...	...	3
Laying out Dead Body	...	...	...	...	2
					—
				Total	45
					—

Medical Aid forms were received in one hundred and one instances, and the following table shows the conditions for which medical help was obtained:—

Albuminuria	...	...	...	...	8
Eclampsia	...	...	...	...	1
Ante-partum Hæmorrhage	...	...	...	...	4
Post Partum Hæmorrhage	...	...	...	...	4

Delayed Labour	...	...	...	...	10
Malpresentation	...	...	...	...	6
Retained Membranes	...	...	...	...	2
Ruptured perineum	...	...	...	...	22
Rise of Temperature	...	...	...	...	6
Prematurity, Congenital Defects, etc.	...	...	...	...	8
Discharging Eye	...	...	...	...	18
Other conditions	...	...	...	...	16

The total fees paid to doctors by the Corporation during the year under Section 14 (1) of the Midwives Act, 1918, amounted to £98 17s. 6d. The amount recovered from the patients' relatives was £32 9s. 9d.

Centres.—The work carried out at the Centres during 1938 is indicated in the following table:—

1938	COTTENHAM PARK *										PELHAM ROAD										WANDLE PARK																			
	Infant Welfare Consultations (Monday)					Infant Welfare Consultations (Tuesday)					Infant Welfare Consultations (Friday)					Ante-Natal Clinic (Monday)		Classes for Mothers			Infant Welfare Consultations (Wednesday)					Ante-Natal Clinic (Thursday)		Classes for Mothers												
	No. of Sessions	Children under 1 Year	Children 1-5 Years	TOTAL	Average Attendance	No. of New Cases	No. of Sessions	Children under 1 Year	Children from 1-5 Years	TOTAL	Average Attendance	No. of New Cases	No. of Sessions	Children under 1 Year	Children 1-5 Years	TOTAL	Average Attendance	No. of New Cases	No. of Sessions	Attendance	Average Attendance	No. of Sessions	Attendance	Average Attendance	No. of Sessions	Children under 1 Year	Children 1-5 Years	TOTAL	Average Attendance	No. of New Cases	No. of Sessions	Attendance	Average Attendance	No. of Sessions	Attendance	Average Attendance				
January	...	...	...	...	...	...	4	166	153	319	79.75	11	5	4	163	200	363	90.75	16	4	...	...	...	2	63	31.50	4	87	211	298	74.50	18	19	4	69	17.25	...	...	...
February	...	...	...	...	...	...	4	175	170	345	86.25	11	9	4	185	211	396	99.00	16	9	...	...	...	3	87	29.00	4	98	218	316	79.00	6	5	4	66	16.50	3	58	19.33
March	...	...	...	...	...	...	4	191	170	361	90.25	17	3	4	204	186	390	97.50	17	4	...	...	...	3	72	24.00	4	126	209	335	83.75	11	...	4	75	18.75	3	57	19.00
April	...	...	...	...	...	...	4	244	206	450	112.50	17	7	4	237	226	463	115.75	15	2	...	...	...	2	41	20.50	5	152	218	370	74.00	7	...	5	94	18.80	3	53	17.66
May	...	...	...	...	...	...	4	195	157	352	88.00	9	1	4	217	253	470	117.50	9	7	...	...	...	3	78	26.00	4	141	215	356	89.00	10	2	4	88	22.00	4	57	14.25
June	...	...	...	...	...	...	3	169	172	341	113.66	14	7	4	217	231	448	112.00	19	7	...	...	...	3	78	26.00	4	130	200	330	82.50	9	3	4	93	23.25	3	49	16.33
July	...	...	...	...	...	...	5	274	235	509	101.80	16	5	6	303	244	547	91.16	30	7	...	...	...	1	28	28.00	5	157	230	387	77.40	11	5	5	143	28.60	2	28	14.00
August	...	...	...	...	...	...	4	238	181	419	104.75	18	6	4	238	185	423	105.75	14	2	...	...	...	...	...	...	4	138	167	305	76.25	9	4	4	105	26.25	...	...	...
September	...	...	...	...	...	...	4	245	201	446	111.50	11	1	5	302	250	552	110.40	17	7	...	...	...	3	71	23.66	4	133	166	299	74.75	10	1	5	141	28.20	1	23	23.00
October	4	59	74	133	83.50	7	2	4	240	182	422	105.50	17	4	4	226	242	468	117.00	20	7	3	81	27.00	4	153	193	346	86.50	9	3	4	98	24.50	4	103	25.75
November	4	82	71	153	38.25	8	5	5	305	230	535	107.00	15	9	4	252	247	499	124.75	13	9	3	30	10.00	5	202	258	460	92.00	23	8	4	63	15.75	3	75	25.00
December	3	37	41	78	26.00	2	3	3	139	92	231	77.00	7	...	4	204	181	385	96.25	7	2	3	34	11.33	3	94	127	221	73.66	7	2	5	47	9.40	1	24	21.00
TOTALS	11	178	186	364	83.09	17	10	48	2581	2149	4730	98.54	163	57	51	3748	3656	5404	105.96	183	67	6	64	10.66	23	599	26.04	50	1611	2412	4023	80.46	130	52	52	1082	20.80	27	527	19.51

* Opened 10th October, 1938

‡ Opened 7th November, 1938

Public Health Act, 1936 (Child Life Protection); Children and Young Persons Act, 1932; Children Act, 1908 (Part 1).—The following figures relate to the administration of the above Acts in Wimbledon during 1938:—

(i) Number of foster-mothers on the Register—			
(a) At the beginning of the year	...	...	28
(b) At the end of the year	...	...	24
(ii) Number of children on the Register—			
(a) At the beginning of the year	...	...	50
(b) At the end of the year	...	...	57
(c) Who died during the year	...	...	—
(d) On whom inquests were held during the year	...	...	—

Every foster-child was visited regularly and if the conditions were not satisfactory, more frequent visits were paid. In all, three hundred and seventeen visits were made to the homes of foster-mothers.

The five Health Visitors hold appointments under Section 2 (2) of the principal Act. Each Health Visitor is responsible for the supervision of the foster-children in her area.

The standard of care devoted to the foster-children in Wimbledon was found to be very satisfactory.

Attention is paid to the provision of suitable fire-guards in the home of every foster-mother.

Where a foster-child was found not to be making satisfactory progress the foster-mother was informed that it was necessary for her either to obtain private medical attention or to take the child to the Health Centre.

In no case was it necessary for an order to be obtained from a Justice under Section 67 of the Act of 1932, or under Section 212 of the Public Health Act, 1936, with a view to the removal of a child from the home of a foster-mother.

It was not necessary to take any legal proceedings under the Act.

Orthopædic Treatment.—The orthopædic scheme of the Wimbledon Borough Council provides for the treatment of children below school age.

The Surgeon visited the Orthopædic Clinic at the Health Centre once every month. The Orthopædic Nurse, who supervises the remedial exercises and massage, attended two

sessions each week, except during the school holidays when the Orthopædic Clinic was closed.

No children from the Maternity and Child Welfare Centres required in-patient treatment at the Orthopædic Hospital at Pyrford.

The following table indicates the work carried out under the Maternity and Child Welfare section of the scheme:—

(1) Number of children on the list—

(a) At the beginning of the year	50
(b) At the end of the year	52
(c) Who died during the year	—
(d) On whom operations were held during the year	—

Every foster-child was visited regularly and if the conditions were not satisfactory, steps were taken to improve them. In all cases, however, the children were cared for in the homes of foster-parents.

The five Health Visitors hold appointments under Section 5 (2) of the Principal Act. Each Health Visitor is responsible for the supervision of the foster-children in her area.

The standard of care devoted to the foster-children in Wiltshire was found to be very satisfactory.

Attention is paid to the provision of suitable foster-homes in the home of every foster-parent.

Where a foster-child was found not to be making satisfactory progress the foster-mother was informed that it was necessary for her either to obtain private medical attention or to take the child to the Health Centre.

In no case was it necessary for an order to be obtained from a Justice under Section 67 of the Act of 1921, or under Section 212 of the Public Health Act, 1936, with a view to the removal of a child from the home of a foster-mother.

It was not necessary to take any legal proceedings under the Act.

Orthopædic Treatment.—The orthopædic section of the Wiltshire County Council provides for the treatment of children below school age.

The Surgeon visited the Orthopædic Clinic at the Health Centre once every month. The Orthopædic Nurse who supervises the remedial exercises and massage, attended two

No. of Children under 5 Years of Age.	1931	1932	1933	1934	1935	1936	1937	1938
Examined by the Surgeon—New Cases	3	9	10	11	8	10	12	29
—Old Cases ... ..	...	12	33	36	30	25	40	40
Referred to Pyrford for treatment	1	1	2	2	2	3	3	...
Referred to St. Thomas's Hospital for X-ray Examination	...	1	...	...	...	...	...	...
Referred to St. Thomas's Hospital for In-patient Treatment	...	...	...	1	...	...	1	1
Referred to St. Thomas's Hospital for Out-Patient Treatment	...	...	...	...	...	1	1	2
For whom Surgical Appliances or Special Boots were ordered	1	6	9	7	6	...	5	5
Referred for Remedial Exercises at the Health Centre ...	1	1	...	...	...	1	2	3
No. of Attendances made for Remedial Exercises	8	9	...	...	...	20	20	15

Ophthalmia Neonatorum.—The following table shows that eight cases of ophthalmia neonatorum were notified. Home nursing was provided through the Wimbledon District Nursing Association in five cases.

Of the three remaining cases one was admitted to hospital under the Council's scheme for the treatment of ophthalmia neonatorum. In the second case the mother was confined in a London hospital and the baby was transferred from there to the St. Margaret's (L.C.C.) Hospital for treatment. The third case was born in a nursing home in Wimbledon. As the condition of the eyes did not respond readily to treatment the infant was treated as an out-patient at the Moorfields Eye Hospital.

In none of the eight cases did any impairment of vision occur.

In 1937 the Council arranged for the admission of cases of ophthalmia neonatorum to their Infectious Diseases Hospital when cubicle accommodation is available, and also made provision for the services of an Ophthalmic Surgeon should this be required.

CASES.			Vision Unimpaired.	Vision Impaired.	Total Blindness.	Deaths.
Notified.	Treated.					
	At Home.	Hospital.				
8	6	2	8	...	...	...

Ophthalmic Treatment.—Seven new cases from the Maternity and Child Welfare Centres were seen by the Ophthalmic Surgeon at the refraction clinic during the year and glasses were prescribed for all of these. Seven children who were already wearing glasses were re-tested. In addition to the above, three expectant mothers were seen by the Surgeon and glasses were prescribed for two of these.

Treatment of Minor Ailments.—Eighty-two children below school age attended the Health Centre for treatment. These children made three hundred and eighty-four attendances.

The conditions treated consisted chiefly of septic sores, scabies, impetigo, running ears, conjunctivitis, burns, and miscellaneous skin conditions.

Treatment of Tonsils and Adenoids.—Arrangements were made for the operative treatment of tonsils and adenoids in twenty-nine cases under the Council's Maternity and Child Welfare scheme.

Ear Diseases and Defective Hearing.—Facilities are available at the Health Centre for the treatment of children below school age suffering from ear diseases and defective hearing.

As stated in the Report of the School Medical Officer an Aural Clinic was established in September, 1937, in charge of a consulting ear, nose and throat surgeon. Twelve children below school age were examined and made twenty-three attendances. Four of these cases were referred to Guy's Hospital, two for operative treatment for tonsils and adenoids, and two for mastoidectomy. Six others were referred for daily treatment at the Minor Ailment Clinic and two for observation.

Maternal Mortality.

There were two maternal deaths amongst Wimbledon mothers in 1938. Both occurred in hospitals, and in each case the mother was unmarried. The first was due to septic infection with retained membranes following incomplete abortion and hæmorrhage. In the second case the cause of death was puerperal septicæmia following confinement in a hospital outside the district.

These are the first deaths from puerperal sepsis amongst Wimbledon mothers since 1932. During 1936 no maternal death occurred.

The following table gives the maternal mortality rates for Wimbledon and also for England and Wales:—

1938	Puerperal Sepsis	Others	Total
Wimbledon:			
Per 1000 Live Births	2.86	0.00	2.86
Per 1000 Total Births	2.77	0.00	2.77
England and Wales:			
Per 1000 Live Births	0.89	2.19	3.08
Per 1000 Total Births	0.86	2.11	2.97

Hospital Treatment for Complicated Obstetric Cases.—

The Council have an arrangement with the Maternity Department of the Nelson Hospital for the treatment of complicated obstetric cases occurring in the Borough. The services of a consultant obstetrician are available together with facilities for any operative treatment that may be found necessary.

Patients admitted to hospital under this scheme are required to contribute towards the cost of their maintenance, whilst undergoing treatment, in accordance with a scale which has been adopted by the Council.

During 1938 twenty-one patients received treatment under this scheme for the following conditions:—

Threatened eclampsia	...	...	...	6
Albuminuria	...	...	...	1
Twin pregnancy with toxæmia	...	...	...	2
Contraction of pelvis	...	...	...	2
Contraction of pelvis — admitted for				
Cæsarian section	...	...	...	1
Breech presentation	...	...	...	1
Shock due to ante-partum hæmorrhage—				
Cæsarian section performed	...	...	...	1
Œdema—admitted for ante-natal treat-				
ment	...	...	...	1
Circulatory failure and collapse	...	...	...	1
Primary anæmia	...	...	...	1
Repeated stillbirths	...	...	...	1
Other conditions	...	...	...	1

These facilities appear to have been an important factor in reducing the number of maternal deaths occurring among Wimbledon mothers during past years.

In July the Council agreed to an increase in the payment from £2 17s. 0d. to £3 10s. 0d. per week for complicated obstetric cases admitted under their scheme to the Maternity Department of the Nelson Hospital.

The cost of maintenance and treatment of the above patients under this scheme amounted to £157 6s. 8d., of which £32 19s. 9d. was recovered from the relatives.

Supply of Milk to Expectant and Nursing Mothers and Infants.—There were one thousand five hundred and forty-three applications for supplies of free milk under the Maternity and Child Welfare Scheme from three hundred and

one families, compared with eight hundred and five applications from five hundred and eight families in the preceding year. One thousand four hundred and ninety of the applications were granted, an increase of seven hundred and sixty-nine on the figure for 1937.

The milk is granted on medical grounds and the circumstances of each case are carefully considered by the Subcommittee dealing with this question.

In 1937 the Council decided that the scale of family circumstances should be interpreted more generously and that milk should be available to expectant mothers at any stage of pregnancy. Cod liver oil and malt was also to be supplied where necessary for nursing and expectant mothers and children below school age.

Dental Treatment.

Dental treatment is available for children under school age and for nursing and expectant mothers. The Dental Surgeon devotes one session a week at the Health Centre to Maternity and Child Welfare cases. One hundred and twenty-four mothers and one hundred and thirteen children under school age attended for treatment. Two hundred and forty-three general anæsthetics and twenty-eight local anæsthetics were administered. Where necessary, nursing and expectant mothers are provided with dentures. Thirty-seven dentures were supplied to mothers through the Dental Clinic during 1938. In addition, five dentures were repaired.

A close co-operation has been established between the Dental Clinic at the Health Centre and the Ante-natal Departments of the Nelson and Kingston County Hospitals, who are referring an increasing number of expectant mothers for dental treatment.

The following table gives an indication of the work carried out by the Dental Surgeon in connection with the Maternity and Child Welfare Department:—

Mothers—attendances for treatment	...	...	486
„ teeth extracted	...	...	481
„ teeth filled	...	...	61
„ scalings	...	...	60
„ other operations	...	...	100
Mothers—dentures supplied	...	...	37
„ „ repaired	...	...	5

Children—attendances for treatment ...	206
„ teeth extracted	287
„ „ filled	—
„ other operations	3
Total number of fillings inserted ...	76
„ „ „ local anæsthetics ad- ministered ...	28
general do. do. ...	243

Voluntary Helpers.—I should again like to draw attention to the work which is being carried out by the voluntary helpers in the Maternity and Child Welfare movement in Wimbledon. These helpers give a great deal of their time to the Centres at Pelham Road, Wandle Park House, and St. Matthew's Church Hall. The work which they so unobtrusively carry out plays an important part in the success of Child Welfare work in this Borough.

Municipal Day Nursery.—The work at the Day Nursery at Hubert Road continued to be most satisfactory.

The total attendances made by children amounted to 10,562 whole days. The average daily attendance was 42.41. These children came from one hundred and five families, one family sending three children, fourteen families two children, and the remainder one child each. The number of children on the register on 31st December, 1938, was sixty-four.

Particulars with regard to the accommodation at the Nursery have been given in previous Reports. The dietary of the children includes marmite, honey, tomatoes, tripe, liver, etc. Babies over three months old now have beef and veal bone broth daily in bottles.

The number of small babies admitted during the year continued to be high. In several cases arrangements were made for the mothers to feed them morning and evening, bottles being given at the Nursery during the day.

Infants up to eighteen months are weighed weekly. Children from eighteen months to three years are weighed monthly. Toddlers from three to five years are weighed every three months unless under observation, when they are weighed more frequently. During 1938 one thousand two hundred and forty-three "weighings" were recorded.

All the clothing worn by the children at the Nursery is made by the staff.

A charge of sixpence per day is made for each child attending the Nursery. The revenue from this source amounted to £256 15s. 0d. during 1938.

The children at the Day Nursery were medically inspected three times during the year.

The Orthopædic Surgeon saw one child from the Day Nursery. Alterations to her shoes were prescribed and two attendances were made.

One child was seen by the Aural Surgeon. No defect was discovered and the patient was discharged.

No operative treatment was found to be necessary for the removal of tonsils and adenoids.

On the whole, the health of the children attending the Day Nursery continued to be excellent.

All toddlers were dentally inspected twice. The Dental Surgeon reports that the condition of the teeth was good. Nine children received treatment at the Dental Clinic. In no case was treatment refused and in many instances it was carried out at the request of the parents.

During the early part of the year the Nursery was closed for three weeks on account of measles. Seventeen cases occurred, and all returned fully recovered. Towards the end of the year it was necessary to close the Babies Ward because of whooping cough. There were ten cases, and all made good recoveries.

Thirteen children developed chicken-pox and three German measles. They were all excluded for the necessary period.

Three cases of German measles occurred amongst the staff.

Twenty-six children and seven members of the staff were immunised against diphtheria. Particulars of these cases are given in the section of the Report dealing with Infectious Disease. All members of the staff are Schick tested on coming to the Nursery and are immunised when necessary.

There is no doubt that the Nursery meets a very real need in South Wimbledon, and usually there is a waiting list for admission. The children attend very regularly and vacancies are few. No children residing outside the Borough are admitted although quite a number of applications are

received from such sources. Each application for admission is carefully considered. A child is only admitted when it is genuinely necessary for the mother to go out to work.

The Corporation now grant a Certificate to the Nursery Nurses who, after a two years' course of training, pass an examination in written and practical work in the theory and practice of nursery nursing. Four nurses were awarded Certificates during 1938. After they have completed their two years' training at the Day Nursery many of the nurses proceed to take their general and fever training.

Nursery Class.

A Nursery Class was established at the Dundonald Road Junior Girls' and Infants' School on 21st June, 1938. Accommodation is provided for forty children between three and five years of age, and the staff consists of an assistant teacher and a helper. The full accommodation of the class is utilised and there is a waiting list of children for admission. Detailed information relating to this class is given in the Report of the School Medical Officer.

Nursing Homes Registration Act, 1927. Public Health Act, 1936—Part VI.

The Wimbledon Borough Council is responsible for the supervision of nursing homes in Wimbledon. At the end of the year there were sixteen registered nursing homes, namely:—

Nursing Homes for Maternity Cases	...	1
Nursing Homes for Medical, Surgical, and Maternity Cases	... ..	3
Nursing Homes for Medical, Chronic, and Maternity Cases	... ..	1
Nursing Homes for General Medical and Chronic Cases	... ..	2
Nursing Homes for Chronic Cases	... ..	9
		—
	Total	16
		—

Certificates of registration were issued by the Council during 1938 in respect of a nursing home for general medical and chronic cases and two nursing homes for chronic cases. The two latter registrations were in respect of changes of address to other premises in the Borough.

In addition a nursing home for medical, chronic and maternity cases and a home for chronic cases only were re-registered.

The nursing homes were periodically inspected and supervised.

Eighty visits of inspection were made. Seventeen were in connection with applications for registration, forty were routine visits and seventeen special visits.

The nursing homes in Wimbledon were again found to be maintained and run in a satisfactory manner. Close supervision was paid during the visits to the way in which the records of the homes were kept, and in a few cases it was necessary to draw the attention of the proprietors concerned to the requirements of the Bye-laws.

Section 123 of the Surrey County Council Act, 1936, provides for the making of additional Bye-laws with regard to infectious diseases occurring in nursing homes. In 1937 the Council decided to utilise these powers and the Bye-laws which they made came into operation on 1st November, 1937. These Bye-laws require persons carrying on nursing homes to notify the Medical Officer of Health

- (a) within a period of twenty-four hours of infectious disease occurring in such a home;
- (b) forthwith, of a rise of temperature of any maternity patient to 100.4 degrees Fahrenheit for twenty-four hours or its recurrence within that period.

A copy of these Bye-laws was duly sent to every nursing home in the Borough.

Examination of Employees.

During the year 1938, one hundred and fifty-one employees were medically examined. In addition one hundred and thirty-six candidates were medically examined for superannuated posts under the Council.

Mortuary.

I am indebted to the Superintendent of the Cemetery for the figures regarding the use of the new mortuary during 1938.

One hundred and fifteen bodies were received into the mortuary and post-mortems were conducted on sixty of these. This figure is equivalent to 12.39 per cent. of the deaths registered as occurring in the Borough.

Local Acts, Special Local Orders, or General Adoptive Acts
in Force in the Borough.

Infectious Diseases (Prevention) Act, 1890—17th December, 1890.

Public Health Acts (Amendment) Act, 1890: Parts II, III and V—17th December, 1890.

Public Health Acts (Amendment) Act, 1907.

Part II (Streets, Buildings)—Sections 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 26, 28, 29, 31, 32, 33; and Sections 25, 27 and 30 with modifications.

Part III (Sanitary provisions)—Sections 34, 36, 37, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50 and 51, and Sections 35 and 38 with modifications.

Part IV (Infectious Diseases)—Sections 52, 53, 54, 55, 56, 57, 58, 60, 61, 62, 63, 64, 65, 67 and 68, and Section 59 with modifications.

Part V (Common Lodging Houses)—Sections 69, 70, 71, 72, 73, 74 and 75.

Part VI (Recreation Grounds)—Section 76 (with modifications), and Section 77.

Part VII (Police)—Sections 84, 85, 86, and Section 81 with modifications.

Part VIII (Fire Brigade)—Sections 87, 88, 89 and 90.

Part IX (Sky Signs)—Section 91.

Part X (Miscellaneous)—Sections 92, 93 and 95.

(All the preceding Sections of the 1907 Act, were adopted on 28th July, 1913, except those in Parts VII, VIII and IX, which became operative on 21st December, 1908).

The Wimbledon Corporation Act, 1914—7th August, 1914.

(Sections repealed:—46, 48, 49, 50, 51, 52, 53, 57, 58, 60, 75, 76, 80, 84, 91, 100, 101, 102, 104, 108, 109, 110).

Public Health Act, 1925.

Part II (Streets and Buildings)—Sections 13, 14, 15, 16, 17, 18, 19, 21, 23, 24, 25, 26, 27, 28, 30, 31, 32, 33, 34, 35, 38.

Part III (Sanitary Provisions)—Sections 41, 43, 44.

Part IV (Verminous Premises, etc.)—Sections 45, 46, 47, 48, 49, 50.

Part V (Watercourses, streams, etc.)—Sections 51, 52, 53, 54, 55.

(All the above Sections became operative from 1st January, 1928, except Section 38, which was adopted later and became operative from 1st February, 1929).

The Wimbledon Corporation Act, 1933—28th July, 1933.

Surrey County Council Act, 1925 : Parts II, III, V, VI, and VIII—7th August, 1925.

Surrey County Council Act, 1931 : Parts III, V, VI, and VII, and Part VIII as amended by the Town and Country Planning Act, 1932—31st July, 1931.

Surrey County Council Act, 1936 : Parts II, IV, V, VI, and X—31st July, 1936.

Bye-laws, Regulations, etc. :—

Bye-laws with respect to Houses let in Lodgings (Revised 1928)

do. do. Common Lodging Houses.

do. do. Slaughter-Houses (Revised 1934).

do. do. Nuisances.

do. do. Offensive Trades.

do. do. Nursing Homes.

do. do. Nursing Homes (Additional).

do. do. Hairdressers or Barbers' Premises.

Bye-laws with respect to Tents, Vans, Sheds and Similar Structures.

Bye-laws as to Employment Agencies.

Bye-laws with respect to the keeping of Water-closets supplied with sufficient water for flushing.

Bye-laws for the Management, Use and Regulation of Public Baths.

Bye-laws under Advertisements Regulations Act, 1907.

Bye-laws for Regulating the Employment of Children in the Borough.

Bye-laws for the Good Rule and Government of the Borough. Regulations as to the Movement of Sheep.

Regulations as to Underground Sleeping Places (Section 18 [i] Housing Act, 1925).

Provisional and other Orders affecting the Borough :—

Order of Local Government Board, under the Public Health Acts (Amendment) Act, 1907, declaring certain trades to be offensive. Dated 14th January, 1914.

Order of Town Council, under Shops Acts, 1912 and 1913, relating to Second-hand Clothes Dealers. Dated 5th November, 1913.

The Wimbledon General Half-Holiday Order, 1914. Dated 6th June, 1914.

- The Wimbledon Credit Drapers' Half-Holiday Order, 1914.
Dated 2nd July, 1914.
- The Wimbledon Barbers' and Hairdressers' Closing Order,
1919. Confirmed 27th October, 1919.
- The Wimbledon Fruiterers' and Greengrocers' Half-Holiday
Order, 1931. Confirmed 15th July, 1931.

SANITARY CIRCUMSTANCES OF THE AREA

Water.—The Metropolitan Water Board is responsible for the water supply of the Borough.

In a great number of houses the drinking water is obtained from a supply tank on the premises. Attention is paid to these tanks by the Inspectors during their house-to-house visits. The tanks require periodical cleansing, and in many cases it is found that this is not carried out as frequently as necessary. Only in a few instances are the occupiers of houses dependent on an outside water supply, which in each case is situated in the same curtilage.

The supply was withdrawn from seventy-seven houses during the year, as follows:—fifty-eight by request; eight owing to arrears of water rates; and eleven for other reasons.

In all cases the houses were inspected and, where found to be occupied, notices were served on the occupiers requesting that the water supply be restored within a reasonable time. In no case was it necessary to apply to the Magistrates for an Order to enforce compliance with the Notice.

Rainfall.—The following table gives details of the monthly rainfall in inches in Wimbledon during 1938, together with the mean for each month during the period from 1929 to 1932 inclusive. The rainfall in 1938 was below the average, and was the lowest recorded during the last five years.

YEAR.	RAINFALL IN INCHES.												TOTAL FOR YEAR.
	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov	Dec.	
Mean for four years 1929-1932 inclusive.	1.73	0.74	0.87	2.21	2.85	1.11	2.14	2.90	2.11	2.44	3.33	1.94	24.37
1933 ...	1.27	2.75	2.36	0.62	2.46	1.56	1.46	0.63	2.95	1.55	0.92	0.34	18.87
1934 ...	1.59	0.24	2.16	2.08	0.46	0.91	2.22	2.34	1.40	1.30	2.04	5.05	21.79
1935 ...	1.11	2.64	0.29	2.90	1.09	3.77	1.30	2.30	2.57	2.90	4.59	2.51	27.97
1936 ...	3.99	1.81	1.08	1.75	0.55	3.15	2.56	0.69	2.18	1.97	3.14	2.14	25.01
1937 ...	3.83	3.90	2.77	1.92	2.30	1.91	0.59	2.80	1.72	2.54	1.38	4.07	29.73
1938 ...	2.14	0.43	0.34	0.09	1.36	0.50	1.15	2.79	2.34	2.14	3.66	3.14	20.08

Drainage, Sewerage, and Refuse Collection.—I am indebted to the Borough Engineer and Surveyor for the following information:—

“The Sewage Disposal Works are still in course of modernisation, but progress has been hampered by pressure of other work due to the political situation.

Plans are now in an advanced state of preparation for the construction of all the remaining new filters required to deal with the whole population of the Borough and the first opportunity will be taken to obtain sanction for the necessary loan.

For the last three years regular analyses have been carried out and the daily results are recorded to secure the discharge of a satisfactory effluent into the River Wandle. The cleaning and repair of the sewerage system has been systematically pursued and further progress has been made in restoring old sewers to a proper condition.

The scheme for the installation of modern refuse disposal plant has had to be delayed but it is hoped that the matter may be revived in the near future.

Refuse collection is carried on by a fleet of covered motor vehicles and the collection of waste paper is incorporated with the collection of refuse with financially beneficial results. The vehicles are efficiently maintained and they are systematically replaced by new ones as soon as their economic life is expended.”

Sanitary Inspection of District.—The following is a statement showing the number and nature of inspections made for the year 1938:—

<i>Reason of Visit.</i>	<i>No.</i>
Infectious Diseases	545
House Inspections	4,899
Inspections under Housing Act, 1936 ...	337
House to House Inspections	3,341
Rent Act Inspections	14
Houses Let in Lodgings Inspections ...	86
Inspection of Factories, Workshops, Work-places and Out-workers' premises	528
Dairies and Cowsheds Inspections ...	265
Inspections under Shops Acts	269

<i>Reason for Visit.</i>	<i>No.</i>
Application of Tests to Drains	250
Inspections under Diseases of Animals Acts	—
Obtaining Samples of Foods and Drugs	—
Miscellaneous (including Inspections of food, slaughter-houses, mews, stables, caravans, Petroleum Acts, water supply, piggeries, mosquitoes, etc.)	1,428
Total ...	11,962

Notices Served.—One thousand four hundred and thirty-four preliminary notices or intimations were served in respect of one thousand four hundred and fifty-eight houses.

It was found necessary to serve two hundred and twelve Statutory Notices upon the owners or occupiers of two hundred and four houses. The necessary work was executed in all but ninety-three cases. In fifty of these the work was actually in hand at the close of the year.

In only one instance was it necessary for legal proceedings to be instituted.

In this case the owners of five houses failed to comply with Notices requiring the abatement of nuisances.

At the first hearing the magistrates accepted an undertaking given by the owners that they would complete the remedial works within fourteen days. At the adjourned hearing the summonses were withdrawn as the Notices had been satisfactorily complied with.

Six hundred and thirty-four enquiries received from the Town Clerk's Department were replied to regarding seven hundred and eighty-four properties where negotiations for sale were in progress.

House Drainage.—The drainage systems and sanitary arrangements of fifty-six houses were entirely reconstructed. Extensive alterations or repairs were carried out at eighty-one houses. At fifteen houses the drainage systems were made water-tight by the patent internal process.

Rent (Restrictions) Acts, 1920-1933.—Five applications for inspections under the provisions of these Acts were received.

In three cases certificates were issued. In the fourth case the owner carried out the necessary repairs before the matter could be brought to the notice of the Sanitary Authority, and in the other the issue of a certificate was not recommended.

House-to-House Inspection. — House-to-house surveys were carried out at seven hundred and twenty-five houses. The following list shows the particular streets and the number of houses inspected in each:—

Amity Grove	...	...	...	...	95
Deburgh Road	...	...	...	...	110
Derby Road	...	...	...	...	12
Gilbert Road	...	...	...	...	21
Gladstone Road	...	...	...	...	122
Goodenough Road	...	...	...	...	31
Granville Road	...	...	...	...	12
Harcourt Road	...	...	...	...	12
Haydons Road (part)	...	...	...	...	68
Laburnum Road (part)	...	...	...	...	39
Leyton Road	...	...	...	...	78
Milton Road	...	...	...	...	57
South Road (part)	...	...	...	...	43
Tennyson Road	...	...	...	...	25
					—
					725
					—

House Inspection.—As the result of inspections made on complaint, or in consequence of the occurrence of infectious disease, or for other reasons, two thousand six hundred and thirty-three houses were visited. This figure shows an increase of one hundred and eighty-five as compared with 1937.

At twenty houses, from which cases of notifiable infectious disease had been reported, defective drains or other insanitary conditions were found to exist. All these were subsequently remedied under the supervision of the officers of the Department.

The following table gives a summary of the nuisances abated and the sanitary improvements carried out, together with the defects remedied, as the result of house-to-house inspection under the supervision of the Sanitary Inspectors:—

Accumulations removed	...	...	...	34
Cisterns provided	...	...	...	12
Cisterns repaired, cleansed or covered	...	...	...	22
Drains, new, provided	...	...	...	56
Drainage systems made water-tight by patent process	...	...	...	15
Drains, repaired or altered	...	...	...	66
Drains, stoppages removed	...	...	...	52
Dustbins provided	...	...	...	281
Flushing cisterns, new, provided	...	...	...	51
Flushing cisterns repaired	...	...	...	104
Manure receptacles provided	...	...	...	1
Rain-water pipes disconnected	...	...	...	9
Roofs repaired	...	...	...	334
Rooms stripped and cleansed	...	...	...	1,448
Verminous rooms cleansed	...	...	...	45
Soilpipes, new, provided	...	...	...	17
Soilpipes, repaired or altered	...	...	...	2
Vent pipes, new, provided	...	...	...	18
Vent pipes, repaired or altered	...	...	...	40
Waste pipes, new, provided	...	...	...	88
Waste pipes, repaired, disconnected or trapped	...	...	...	55
Water-closets, new, provided	...	...	...	118
Water-closets, repaired or ventilated	...	...	...	19
Water services restored	...	...	...	21
Yards paved	...	...	...	39
Yards repaired	...	...	...	108
Guttering repaired	...	...	...	176
Floors ventilated	...	...	...	48
Nuisances from damp walls abated	...	...	...	428
Water supply tap direct from main	...	...	...	5
Sinks provided	...	...	...	60
Rooms fumigated	...	...	...	468
Other nuisances	...	...	...	2,861
				—
			Total	7,101
				—

Houses-Let-in-Lodgings.—There are now sixty-nine of these houses on the register. Some of them require constant supervision by the Sanitary Inspectors and for this reason eighty-six visits of inspection were made to these premises

during 1938. In addition, during the periodical house-to-house inspection, a number of the houses-let-in-lodgings were inspected. These visits appear in the report on house-to-house inspection.

Common Lodging Houses.—There are now no premises in the Borough registered as common lodging houses.

Van Dwellings.—One hundred visits were paid to these van dwellings in South Wimbledon.

In January there were nine sites used by van dwellers, and these were situate in Trinity and Haydon Park Wards. As a result of action by the Local Authority six sites have been entirely cleared of these structures.

The remaining three sites are owned and occupied by travelling showmen who return to Wimbledon for the winter months.

On a portion of one of these plots of land the owner has erected three houses, reserving the rest of the site for the caravans of travelling showmen.

One other site, formerly occupied by two motor caravans, was vacant at the end of the year, but it is anticipated that the caravans will return there early in 1939.

In the third case one motor trailer was on the land at the end of December. This was occupied by a man and his wife.

The question of these moveable dwellings is still under consideration by the local authority.

The following table shows the position on 31st December, 1938.

SITE.	NO. OF DWELLINGS.	TYPE.	NO. OF FAMILIES.	OCCUPANTS.		
				A.	C.	TOTAL.
Adjoining 49, Deburgh Road ...	None	—	—	—	—	—
Between 84 & 86, Deburgh Road	1	1 motor trailer	1	2	—	2
Adjoining 39, South Road ...	4	1 bungalow 3 caravans	4	10	3	13
TOTALS	5		5	12	3	15

FACTORIES, WORKSHOPS AND WORKPLACES.

1. Inspections for purposes of provisions as to health.

Premises	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories with mechanical power ...	172	11	...
Factories without mechanical power	275	12	...
Other Premises under the Act (including works of building and engineering construction but not including outworkers' premises)	53	3	...
TOTAL	500	26	...

2. Defects found.

Particulars	Number of Defects.			Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
Want of Cleanliness (S.1) ...	33	33	...	...
Overcrowding (S.2) ... ..	...	...	...	...
Unreasonable temperature (S.3) ... ..	...	...	...	...
Inadequate ventilation (S.4)	2	2	...	...
Ineffective drainage of floors (S.6) ... ..	...	...	...	...
Sanitary Conveniences (S.7)				
Insufficient	4	4	...	...
Unsuitable or Defective ...	10	10	...	...
Not Separate for Sexes ...	...	...	...	...
Other Offences... ..	10	10	...	...
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937) ...				
TOTALS	59	59	...	...

Outwork in Unwholesome Premises—(Section 108).

Nature of Work	Instances	Notices Served	Prosecutions
Wearing Apparel — Making, Etc.
Others

Outwork in Infected Premises—Sections 109-110 ... Nil.

HOME WORK.

Lists received :—

Twice in the year	—
Number of Out-workers	—
Once in the year	1
Number of Out-workers	2
Number of Out-workers' premises on Register	39
Number of addresses received from other Councils	40
Number of addresses forwarded to other Councils	7
Notices served on occupiers as to keeping or sending Lists	—
Prosecutions — Failing to keep Out-workers' Lists	—
Prosecutions—Failing to furnish Lists	—
Inspections of Out-workers' premises	30
Number of unwholesome premises	—
Notices served to remedy	—

REGISTERED WORKSHOPS.

The following are the principal classes of workshops on the register at the end of the year :—

Bakehouses (including eight Factory Bakehouses)	27
Boot Repairing	54
Builders	24
Coach Builders	3
Cycles	6
Dining Rooms	20
Dressmaking	21

Furniture Repairers	...	...	...	...	8
Jewellers and Watch Repairers	...	...	...	...	11
Laundries	...	...	...	...	20
Millinery	...	...	...	...	3
Motors	...	...	...	...	29
Printing	...	...	...	...	7
Smiths	...	...	...	...	4
Tailoring	...	...	...	...	19
Woodworkers	...	...	...	...	19
Miscellaneous	...	...	...	...	99
					374
				Total	374

OTHER MATTERS.

Underground Bakehouses in use at the
end of the year 3

Matters notified to H.M. Inspector of Factories:—

Failure to affix Abstracts of Act	...	...	Nil	
Action taken in mat- ters referred by H.M. Inspector as remedial under the Public Health Acts.	}	Notified by H.M. Inspector	...	Nil
		Reports of action taken sent to H.M. Inspector		Nil

Offensive Trades.—There were sixteen fish-frying premises on the register. These were periodically inspected and found to be carried on without nuisance.

Disinfection.—The number of rooms disinfected was four hundred and sixty-eight, and the number of articles of bedding, wearing apparel, etc., 4,218.

Special attention was given to cases of tuberculosis. Whenever such patients were removed to sanatoria, or changed their home addresses, a special visit was paid at the earliest possible moment by one of the Sanitary Inspectors with a view to thorough disinfection of rooms, bedding and clothing being carried out.

A considerable amount of disinfection after cancer was also carried out at the request of relatives.

Eradication of Bed Bugs.—The number of houses dealt with under this heading was as follows:—

			<i>Infested.</i>	<i>Disinfested.</i>
(a) Council houses	...	...	10	10
(b) Other houses	...	...	65	65

In seventy cases the disinfestation was carried out by the Local Authority and in five cases the work was done by private persons under the supervision of the Sanitary Inspectors.

The procedure adopted is as follows. A careful inspection of the premises is made by one of the Sanitary Inspectors who gives the necessary advice to the occupiers or owners for the eradication of the vermin. After the skirtings, mouldings and picture rails have been eased from the walls or removed, and the floor coverings taken up, either sulphur dioxide or a reliable insecticide is used. When necessary, the paper is stripped from the walls and ceilings and burned.

Bedding and clothing are removed to the disinfecting station and treated with steam.

Occupiers are further advised to thoroughly cleanse the premises with disinfectant solution and to maintain a careful watch for any stray bugs.

Subsequent inspections are made by the Sanitary Inspectors and where necessary the disinfestation process is repeated.

When new tenants are to be moved into a Council house an inspection is first made of their premises, bedding and furniture. If evidence of vermin is discovered, disinfestation is carried out prior to the tenants removal.

No contractors are employed by the Local Authority for the purpose of disinfestation.

Mosquitoes.—As in previous years, the lakes, pools, ditches, and other known breeding places of mosquitoes were efficiently sprayed with paraffin on three occasions.

Stable Refuse.—In order to control as far as possible the nuisance arising from flies during the latter part of the summer special attention was paid to stable premises and to allotments where such refuse was being deposited prior to use. Occupiers of stables were warned as to the necessity for frequent removal. Allotment holders were persuaded either to cover accumulations with a layer of clean earth at least six inches deep, or to dig them into the ground as soon as possible. The

Inspectors found that the persons concerned were willing to co-operate and in only seven cases was the service of a Notice found to be necessary.

Diseases of Animals Acts.—No case of notifiable disease, within the meaning of these Acts, was reported to the Authority during the year. There were, however, a number of Orders made by the Ministry of Agriculture, particularly with regard to outbreaks of foot and mouth disease. A number of enquiries were dealt with by the Department. In a few instances licences for the movement of animals were issued.

Shops Acts, 1912-1934.—In addition to general surveys of the shops during holiday periods, and in connection with evening closing hours, two hundred and sixty-nine visits were made for the purpose of observing contraventions of the Acts, for advising shopkeepers regarding the Regulations in force, and for the investigation of complaints. In two cases, both "mixed" shops, legal proceedings were instituted, with the following results:—

- (a) For selling non-exempted articles after the statutory evening closing hour—Fined £1 and £1 1s. 0d. costs.
- (b) For selling non-exempted articles after the statutory evening closing hour—Fined 10/-.

It should be emphasised again that the type of offence most difficult to detect is that in connection with the "mixed" shop, where exempted and non-exempted goods are sold. Observations are kept over long periods without an offence being detected, whilst at the same time it is known that breaches of the Act are being committed. It is more in the nature of an accident that an offender is caught red-handed, and in such a case it is usually followed by a plea of a first offence.

The hawkers who come into the district on the weekly half-holiday continue to receive attention, and quite a number received written warnings from the Department that further contraventions would result in proceedings being taken against them.

Some difficulty was experienced in connection with canvassers making house to house calls for orders on the weekly half-holiday. In each case the canvasser was warned and a communication was afterwards sent to the employer, setting out details of the contravention.

The Shops Act, 1934, which came into operation on the 30th December, 1934, has added considerably to the work of the Local Authority, particularly in connection with the employment of "young persons."

An additional duty has been placed upon the Local Sanitary Authority by Section 10 which deals with the health and comfort of shop workers. This section requires the provision of sufficient and suitable sanitary conveniences, washing facilities, etc.

In order to comply with the Act it is necessary for a complete inspection to be made of all shops in the district. Every effort is being made to complete the survey as soon as possible.

On the 14th July, 1937, two additional Acts, the Shops Act, 1936, and the Retail Meat Dealers' Shops (Sunday Closing) Act, 1936, received the Royal Assent. The former provides for the application of the Shops Acts, 1912 to 1934 to premises and places where the business of lending books or periodicals is carried on for purposes of gain. The second Act provides, subject to certain exceptions, for the compulsory closing of retail meat trading shops and stalls on Sundays.

These Acts came into operation on the first day of January, 1937.

The Shops (Sunday Trading Restriction) Act, 1936, received the Royal Assent on 31st July, 1936. It became operative as from 1st May, 1937.

The Young Persons (Employment) Act, 1938, received the Royal Assent on 29th July, 1938, and came into operation on 1st January, 1939.

Part I of this Act contains provisions for regulating the hours of young persons employed in certain occupations which have not hitherto been subject to regulations of this kind. Part II contains certain amendments to the Shops Acts.

In the main this Act is to be administered by local Authorities, but in the case of certain occupations the duty is undertaken by H.M. Inspector of Factories and H.M. Inspector of Mines.

In consequence of these new Acts it has been necessary to completely revise our system of Records.

Many employers are experiencing difficulty in understanding the numerous provisions of the Acts, and consequently the advice of the Departments' Officers is frequently sought.

As in previous years, the Home Secretary made an Order suspending the operation of the general Early Closing Order from 19th to 24th December, inclusive. This did not, of course, relieve occupiers of the obligation to comply with the Weekly Half-holiday Order in force, and, as a consequence, a number of enquiries were dealt with by the Department.

Petroleum Acts.—Ninety-eight applications were granted for permission to keep petroleum, ninety-three of these being for the renewal of existing licences.

One hundred and fifteen inspections were made of the various premises in respect of which licences had been issued.

Fouling of Footways by Dogs.—Only six complaints were received regarding this matter during the year, and they were investigated immediately. As I have pointed out in previous Reports, a considerable amount of time is taken up by the Inspectors in these investigations as the complaints usually refer to a portion of the district without a definite road or place being mentioned. It must be clearly understood that the Bye-laws in force apply only to dogs on a lead. I would again emphasise that the closest co-operation on the part of the general public, and dog owners in particular, is needed if these Bye-laws are to be made really effective.

Employment Agencies.—Visits were paid, at irregular intervals, to the premises of the twelve licensed keepers. No breach of the Bye-laws was observed.

Employment of Children Bye-Laws.—In connection with the employment of children, observations were made during the year and ninety-three breaches reported to the Education Authority. Legal proceedings were instituted in twenty-two of these cases.

This work is done mainly outside office hours, on Sundays, and public holidays. Further details relating to this matter are given in the Report of the School Medical Officer.

Smoke Abatement.—Thirty complaints of nuisance from smoke were received.

It was found that improper stoking was the cause of the trouble.

Instructions were immediately given for proper attention to be paid to the fires, and occupiers were also warned of the provisions of the Act in force.

It is customary for the Sanitary Inspectors to observe, from time to time, the condition of any chimney likely to be the cause of a nuisance.

Rats and Mice (Destruction) Act, 1919.—Fifty-one complaints were received. In investigating a complaint it is invariably necessary for a number of premises to be inspected as it is rarely found that only one house or garden is concerned.

I am confident that as the matter is one which is now being dealt with by the Local Authority residents are more eager to seek advice. The usual procedure is for the Inspector to endeavour to ascertain the cause of the infestation and to give advice to the persons concerned as to the best method of dealing with the matter.

In a number of cases where it had been suggested that the services of a rat catcher should be obtained it was generally found that this advice was acted upon.

Hairdressers and Barbers.—Early in 1937 the Public Health Committee recommended the Council to make Bye-laws for the purpose of securing cleanliness of these premises and of instruments, towels, equipment and materials used in connection with the business. The Bye-laws were confirmed on 4th June, 1937, and became operative on 1st August, 1937.

A copy of the Bye-laws has been supplied to each of the fifty-six hairdressers and barbers in Wimbledon.

In several instances suitable receptacles for hair clippings, etc., had not been provided. The occupiers were requested to rectify this matter.

SCHOOLS.

Information concerning the sanitary condition of the schools, together with the means adopted to prevent the spread of infectious diseases among school children, is given in the section of the report dealing with the School Medical Service. All the Public Elementary Schools in the district were thoroughly disinfected during the year, the work being done during the Easter, Summer and Christmas Holidays.

HOUSING.

(a) HOUSING STATISTICS FOR THE YEAR 1938.

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) 2,446
 - (b) Number of inspections made for the purpose 9,466
 - (2) (a) Number of dwelling-houses (included under sub-head [1] above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 725
 - (b) Number of inspections made for the purpose 3,356
 - (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... Nil
 - (4) Number of dwelling-houses, exclusive of those referred to under the preceding sub-head found not to be in all respects reasonably fit for human habitation ... 1,458
2. Remedy of defects during the year without service of formal notices :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers ... 1,161
3. Action under Statutory Powers during the year :—
 - A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :—
 - (1) Number of dwelling-houses in respect of which notices were served requiring repairs Nil
 - (2) Number of dwelling-houses which were rendered fit after service of formal notices :
 - (a) By owners Nil
 - (b) By local authority in default of owners Nil
 - B.—Proceedings under Public Health Acts :—
 - (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 204

(2) Number of dwelling-houses in which defects were remedied after service of formal notices :	
(a) By owners	187
(b) By local authority in default of owners	Nil
C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936:—	
(1) Number of dwelling-houses in respect of which Demolition Orders were made ...	Nil
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	Nil
D.—Proceedings under Section 12 of the Housing Act, 1936:—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
4. Housing Act, 1936.—Part IV.—Overcrowding:—	
(a) (1) Number of dwellings overcrowded at the end of the year	83
(2) Number of families dwelling therein ...	135
(3) Number of persons dwelling therein ...	650
(b) Number of new cases of overcrowding reported during the year	2
(c) (1) Number of cases of overcrowding relieved during the year	7
(2) Number of persons concerned in such cases	46½
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the local authority have taken steps for the abatement of overcrowding	Nil

On 31st December, 1938, the two hundred and fourteen cases of overcrowding found at the original survey had been reduced to eighty-three. This was effected by overcrowded families obtaining additional accommodation in their present dwellings, by removing to available empty houses, or by the

Local Authority re-housing overcrowded families in Council houses whenever suitable vacancies occurred.

Of the eighty-three cases remaining at the end of the year, twenty-five families were overcrowded to the extent of only half a unit (child under ten years), and twenty-one others by only one unit.

Two new cases of overcrowding were reported during 1938. Both were abated before the end of the year.

The Minister of Health, by an Order dated 26th June, 1936, fixed the 1st July, 1936, as the "appointed day" for Wimbledon for the purposes of Section 62 of the Housing Act, 1936.

The effect of this was to require that by the 1st January, 1937, every rent book used in relation to a "dwelling house" should contain a summary in the prescribed form of certain provisions of the Act, and a statement of the permitted number of persons who could occupy the house without causing it to be overcrowded.

Overcrowding occurring after 1st January, 1937, with certain exceptions, thus becomes an offence.

Up to 31st December, 1938, three thousand seven hundred and sixty-eight certificates as to "permitted numbers" had been issued by the Department to owners or agents of properties in the Borough. Three hundred and seventy-three of these were issued during 1938, and necessitated measurements being carried out in one hundred and ninety-three houses.

Each applicant was also supplied with a summary of the provisions of the Act as to overcrowding. The provisions of the Act, and information as to the "appointed days," were widely published throughout the district and in the local press in 1936.

(b) HOUSING CONDITIONS.

Fifty-four houses and two hundred and ninety-nine flats were erected by private enterprise during 1938; in addition, seven houses were converted into nineteen flats.

According to the Registrar-General's estimate for the middle of 1938, the population in Wimbledon was 58,680 as compared with 58,440 in 1937.

As has been previously stated, there is an absence of suitable building sites in Wimbledon for the erection of houses for persons of smaller means.

No difficulties were experienced during the year in taking action under the Public Health Acts when dealing with housing conditions.

In several instances it was found more practicable to deal satisfactorily with properties by means of negotiations with the owners rather than by taking formal action under the Housing Acts.

In the Report for 1936, mention was made of the re-conditioning which was being carried out in a block of buildings comprising forty-eight self-contained flats. By the end of 1938 thirty-three of these flats had been dealt with. Considerable alterations have been made to the sanitary conveniences, additional windows have been provided, and the lighting of the rooms very much improved.

The owner has undertaken to complete the work for the whole of the flats within the time given by the Council.

In 1937 a block of five dwelling-houses, which were unfit for human habitation, had become empty, the owner having previously given an undertaking to the Council not to re-let them when vacancies occurred. The last remaining tenant was re-housed under arrangements made by the Council.

These dwelling-houses have been demolished and a portion of the site is now used as a garden.

This demolition made it possible for the small and crowded yards of four adjoining houses to be extended a further fourteen feet. This enabled the owner to re-build the waterclosets and wash-houses at a more desirable distance from the dwellings. In addition, dilapidated structures were removed and other general improvements effected.

The whole of this work was accomplished as the result of negotiations, without the service of a notice.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply.—Practically all the milk for retail sale is brought into the area from other districts. A few cows are kept by private individuals for milk, but such milk is not retailed.

Eleven applications were received from persons desirous of being registered under the Milk and Dairies Acts and Orders. Registration was granted in each case.

There were on the registers at 31st December, 1938, thirty-one dairymen, twenty-three dairymen and purveyors and twenty-seven retail purveyors.

Two hundred and sixty-five inspections were made of the premises of dairymen and purveyors of milk in the district. Conditions discovered requiring attention were promptly dealt with.

Continued attention was paid to the prevention of the bottling of milk in the streets.

No action was necessary with regard to tuberculous milk or cattle.

The number of licences granted under the Milk (Special Designations) Order, 1936, was as follows:—

Pasteuriser's Licence	1
Dealers Licences :	
Tuberculin Tested Milk	12
Accredited Milk	—
Pasteurised Milk	16
Supplementary Licences	11

Under the provisions of the Milk (Special Designations) Order, 1936, which came into operation on 1st June, 1936, the number of grades is reduced to three, namely, Tuberculin Tested, Accredited, and Pasteurised.

Bacteriological Examination.—Fifty-five samples of milk were taken for bacteriological examination under the Milk (Special Designations) Order; five were found not to comply wholly with the bacteriological standards laid down. In each case the dealer was informed of the result of the examination and advised to take adequate steps to comply with the conditions of the licence. Subsequent samples were taken with satisfactory results.

Slaughter of Animals Act, 1933.—This Act makes the licensing of slaughtermen compulsory. Two licences were renewed by the Corporation for a further period of twelve months.

Humane slaughtering has been compulsory under the Bye-laws in the Borough for a number of years.

Slaughter Houses.—There was one slaughter-house on the register at the end of the year. Very few animals are killed here. The requisite notices are received prior to slaughtering, thus making it possible for complete examination of the carcasses to be carried out.

Continued attention is being devoted to the Public Health (Meat) Regulations, 1924.

One hundred and thirty visits were made to the shops of butchers, fishmongers, fruiterers and other premises where food is stored, prepared, or exposed for sale.

Unsound Food.—A loaf of bread, sold by a local shopkeeper was found, on being cut, to contain foreign matter. An examination of the bakehouse and utensils was carried out, and the baker was questioned. It was ascertained that a cat was usually kept in the bakehouse and was probably the source of the trouble. The baker was warned that animals must not be allowed in the bakehouse in the future. Apart from this the bakery and shop were in a satisfactory condition.

A written warning was afterwards sent by the local Authority but no legal proceedings were instituted.

One complaint was received alleging that sour milk had been supplied by a local firm of Dairymen. After exhaustive enquiries it was decided that the case was one which did not warrant the taking of legal action. The Dairymen agreed to pay particular attention to their method of distribution and to take all possible precautions to prevent any further cause for complaint.

Another complaint referred to sausages purchased from a local shopkeeper. Subsequent examination shewed that the sausages were quite good and could not have been the cause of sickness complained of.

In another case, a tin of a well-known brand of evaporated milk was found to be sour. An immediate investigation was made at the shop premises and a number of similar tins were tried, and the remainder withdrawn from stock.

Later, in the presence of a representative of the Manufacturers, some of the tins were opened. Although the milk was

found not to be sour, it was not considered to be in good condition. The deterioration was regarded to be due to the length of time the milk had been in stock.

The unsold tins of milk were subsequently destroyed.

One box of golden cutlets (haddock) about 7 lbs. in weight was found to be decomposing and the trader voluntarily surrendered the fish as unsound.

Food and Drugs (Adulteration) Act, 1928.

The Public Analyst under the Food and Drugs Acts is appointed by the Surrey County Council. I am indebted to the County Medical Officer of Health for the information set out in the table below, which deals with the work carried out in Wimbledon during 1938.

ARTICLES	ANALYSED			ADULTERATED OR DETERIORATED			Prosecutions	Convictions
	Formal	Informal	Total	Formal	Informal	Total		
Milk ...	40	...	40	1	...	1	...	...
Cream ...	...	...	...	...	...	...	...	...
Artificial Cream ...	...	...	...	...	...	...	...	...
Butter ..	3	...	3	...	...	...	...	...
Cheese ...	3	...	3	...	...	...	...	...
Lard ...	1	...	1	...	...	...	...	...
Meat ...	2	...	2	...	...	...	...	...
Flour ...	2	...	2	...	...	...	...	...
Tea ...	...	...	...	...	...	...	...	...
Cocoa ...	...	...	...	...	...	...	...	...
Sugar ...	...	...	...	...	...	...	...	...
Sausages ...	2	...	2	...	...	...	...	...
Confectionery & Jam	...	1	1	...	...	...	...	...
Drugs ...	1	...	1	...	...	...	...	...
Orange Squash ...	...	...	...	...	...	...	...	...
Chocolate Roll ...	3	...	3	2	...	2	...	...
Cornish Cream Sandwich	...	...	...	...	...	...	...	...
Other Articles ...	2	...	2	...	...	...	...	...
Totals ...	59	1	60	3	...	3	...	...

PREVALENCE OF, AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

During 1938, two hundred and eight cases of infectious disease were notified. These were ninety-six more than in 1937. For several years the incidence of notifiable infectious disease in Wimbledon has been low.

Full enquiries were made by the Sanitary Inspectors into the circumstances of each case.

Scarlet Fever.—Fifty-five cases of scarlet fever were notified, the same number as in 1937. The attack rate was 0.93 per thousand of the population.

	Attack Rate.		Death Rate.	
1891-1895	... 4.80	...	0.02	} Per thousand of the Population.
1896-1900	... 3.30	...	0.04	
1901-1905	... 2.30	...	0.02	
1906-1910	... 4.07	...	0.05	
1911-1915	... 3.03	...	0.01	
1916-1920	... 1.80	...	0.01	
1921-1925	... 3.04	...	0.02	
1926-1930	... 2.44	...	0.003	
1931-1935	... 1.84	...	0.003	

In one house there were three cases, in three houses there were two cases, and in the remaining forty-six houses one case.

Fifty, or 90.90 per cent of the cases were treated in hospital.

The disease was in most cases of a mild character, and responded readily to treatment. There was no death from scarlet fever amongst Wimbledon residents.

Of the cases notified 60.00 per cent. were children of school age, five to fifteen years, and of these thirty-one attended the following schools:—

Wimbledon Park Junior Mixed School	...	1
All Saints Junior Mixed School	... ..	6
All Saints Girls' and Infants' School	... ..	1
Cottenham Park Mixed School	... ..	2
Cottenham Park Infants' School	... ..	2
Queen's Road Girls' School	... ..	1
Queen's Road Infants' School	... ..	5
Pelham Road Infants' School	... ..	3
Old Central School	... ..	1
Central School	... ..	2
St. Mary's R.C. School	... ..	2
Private Schools	... ..	3
Schools outside the Borough	... ..	2
Total		31

Diphtheria.—The number of cases of diphtheria showed a marked decrease, there being thirty-seven notifications in 1938 as compared with sixty in the previous year. The attack rate was 0.63 per thousand of the population.

	Attack Rate.	Death Rate.	
1891-1895 ...	1.06	0.312	} Per thousand of the Population.
1896-1900 ...	1.42	0.208	
1901-1905 ...	1.20	0.110	
1906-1910 ...	1.42	0.121	
1911-1915 ...	1.74	0.104	
1916-1920 ...	1.88	0.170	
1921-1925 ...	1.68	0.097	
1926-1930 ...	1.83	0.027	
1931-1935 ...	0.85	0.017	

In one house there were three cases, in two houses there were two cases, and in the remaining thirty houses, one case.

Thirty-five or 94.59 per cent. of the patients received hospital treatment.

Two deaths occurred, giving a death rate of 0.03 per thousand of the population.

Of the cases notified, 62.16 per cent. were children of school age, five to fifteen years, and of these twenty-two attended the following schools:—

Queen's Road Infants' School	...	...	2
All Saints Junior Mixed School	...	...	5
Dundonald Junior Girls' & Infants' School	...	...	1
Cottenham Park Infants' School	...	...	1
St. Mary's R.C. School	...	...	5
Pelham Road Infants' School	...	...	2
Private Schools	...	...	6
			—
	Total	...	22
			—

Careful investigation is carried out after each case of diphtheria has been notified. School children from infected houses are swabbed and not re-admitted to school until a negative result has been obtained.

Diphtheria Immunisation.—Sessions of the Immunisation Clinic were held every Saturday morning at the Health Centre.

A preliminary Schick test is carried out on all children over seven years of age. Immunisation is effected by means of three injections of T.A.F., with a week's interval between the first and second injection, and a fortnight's interval between the second and third.

In no case was any unpleasant reaction noted.

Twenty-six children and seven members of the Day Nursery staff were Schick tested. Twelve children and two of the staff were found to be positive and then immunised. In all, one hundred and twenty-six children, and two members of the Day Nursery staff, were immunised. Four hundred and ninety-two attendances were made for this purpose. Of the one hundred and twenty-eight persons immunised, fifty attended for a subsequent Schick test. In all cases they were found to be Schick negative.

More use should be made of this Immunisation Clinic. Advice regarding immunisation is given at all the Welfare Centres, and leaflets are also sent to the parents of all children to be medically examined in the Infants' Schools.

Smallpox.—There were no cases of smallpox in Wimbledon in 1938.

Enteric Fever.—One case of enteric fever was notified. The infection had been contracted abroad. This case terminated fatally early in 1939.

No death occurred from enteric fever amongst Wimbledon residents in 1938.

Food Poisoning.—One complaint was received of illness suspected to be due to food poisoning. It was thought that his illness might have been due to eating pork pie. Full bacteriological investigation was made. No organisms of the food poisoning group, however, were isolated.

Cerebro-Spinal Fever.—No case of this disease was notified during the year. One death occurred outside the Borough of a patient resident in Wimbledon.

Acute Poliomyelitis.—No case of poliomyelitis occurred.

Encephalitis Lethargica.—No case of encephalitis lethargica was notified.

Erysipelas.—Notifications were received in respect of twenty-three cases of erysipelas. In seventeen instances these were nursed at home. Two patients requiring removal were treated at the Kingston County Hospital, and three at the Infectious Diseases Hospital at Gap Road.

There was one death.

Influenza.—Very few cases of influenza occurred in 1938. Nine deaths (five males and four females) were due to this disease. Only two cases of influenzal pneumonia were notified during the year.

Ophthalmia Neonatorum.—Eight cases of ophthalmia neonatorum were notified. Six of these were treated at home, nursing being provided by the staff of the District Nursing Association in five instances.

Malaria, Dysentery, etc. No notification of malaria was received. One patient was notified as suffering from dysentery.

Puerperal Fever and Puerperal Pyrexia.—In accordance with the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926 and 1928, the Council have an arrangement with an obstetric physician who acts as consultant in this area. Facilities are also available for bacteriological diagnosis.

Hospital treatment is provided at the following institutions:—

- (i) Queen Charlotte's Maternity Hospital Isolation Block, Hammersmith;
- (ii) Borough of Wimbledon Infectious Diseases Hospital.

Eleven cases of puerperal pyrexia were notified. Six of these patients were removed to the Queen Charlotte's Maternity Hospital Isolation Block, Hammersmith. In addition, two were treated at the Infectious Diseases Hospital, Gap Road, and three were treated at home.

In 1937 there were two cases of puerperal fever and five cases of puerperal pyrexia notified to the Department.

There was no death from puerperal sepsis amongst the eleven patients notified under the Regulations.

The cost to the Council in respect of the patients treated in the Queen Charlotte's Maternity Hospital Isolation Block was £50 18s. 6d., of which amount £36 19s. 3d. was recovered from the patients or their relatives.

Under the provisions of the Public Health Act, 1936, cases of puerperal fever are now notifiable as puerperal pyrexia.

Non-notifiable Diseases.—The deaths from the non-notifiable infectious diseases during the past nine years have been as follows:—

Disease	1930	1931	1932	1933	1934	1935	1936	1937	1938
Measles	10	...	4	1	3	...	4	...	4
Whooping Cough...	2	4	...	3	3	1	...	4	1
Diarrhoea (under 2 years)	2	5	4	2	2	3	8	3	3
Total ...	14	9	8	6	8	4	12	7	8

Measles.—Measles was prevalent during the early part of the year. Three hundred and forty-six cases came to the notice of the Public Health Department. There were four deaths.

In 1937 information was received of seven cases, and no deaths were registered as being due to this disease.

Whooping Cough.—Only seventeen cases of whooping cough were notified to the Public Health Department by the Head Teachers of the Public Elementary Schools. One death occurred.

Diarrhoea (under two years).—Three deaths occurred from this cause. Two of these children died in institutions outside the district. The ages at death are given in the Infantile Mortality Table.

TABLE A.—NOTIFIABLE DISEASES DURING 1938.

DISEASE	Number of Cases Notified in Various Age Groups													Total Cases Notified	Total Cases Removed to Hospital
	Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over.			
Smallpox
Scarlet Fever	1	2	3	3	25	8	4	7	2	...	...	55	50	
Diphtheria (including Membranous Croup)	1	1	2	...	18	5	2	3	2	3	...	37	35	
Enteric Fever (including Paratyphoid)	1	...	1	...	
Puerperal Fever	
Puerperal Pyrexia	10	1	...	...	11	8	
Acute Primary Pneumonia	2	...	...	2	4	8	3	19	3	
Acute Influenzal Pneumonia	1	1	2	...	
Cerebro-Spinal Fever	
Acute Poliomyelitis	
Acute Polio-encephalitis	
Encephalitis Lethargica	
Dysentery	1	...	1	...	
Malaria	
Ophthalmia Neonatorum	8	...	...	...	...	...	...	...	...	...	...	...	8	2
Erysipelas	1	...	...	...	...	1	2	1	2	13	3	23	6	
Tuberculosis (all forms)	1	...	...	...	4	...	4	26	7	7	2	51	36	
TOTALS	8	4	3	5	3	49	14	12	49	18	34	9	208	140	

Table showing Ages at Death from Notifiable Infectious Diseases.

DISEASE.	AGES AT DEATH.													TOTAL DEATHS
	Under 1 Year	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over		
Smallpox	
Scarlet Fever	
Diphtheria(including Membranous Croup)	2	...	...	...	...	...	...	2	
Enteric Fever (including Paratyphoid)	
Puerperal Fever	
Puerperal Pyrexia	
Acute Primary Pneumonia	2	...	...	...	...	...	...	...	2	7	9	20	
Acute Influenzal Pneumonia	3	1	4		
Cerebro Spinal Fever	1	...	...	...	...	...	...	...	...	...	...	...	1
Acute Poliomyelitis	
Acute Polio-encephalitis	
Encephalitis Lethargica	
Malaria	
Dysentery	
Ophthalmia Neonatorum	
Erysipelas	1	1	
Tuberculosis (all forms)	1	10	11	5	4	31	
TOTALS	3	...	...	...	...	2	...	1	10	13	15	15	59

The figures given in this table are those obtained after correction by inward and outward transfers of deaths.

Table showing Zymotic Death Rate, the Death Rates from Zymotic Diseases, and Death Rate from Tuberculous Diseases.

YEAR.	DEATH RATE PER 1,000 POPULATION								
	Zymotic Death-rate.	Smallpox	Scarlet Fever.	Diphtheria.	*Enteric Fever.	Whooping Cough.	Measles.	Diarrhoea.	Phthisis and other Tuberc'los Diseases.
1925	1.01	0.00	0.03	0.01	0.00	0.10	0.00	0.08	0.77
1926	0.70	0.00	0.00	0.00	0.00	0.00	0.10	0.00	0.60
1927	0.94	0.00	0.01	0.03	0.00	0.05	0.00	0.03	0.80
1928	1.10	0.00	0.00	0.10	0.00	0.08	0.11	0.03	0.70
1929	1.06	0.01	0.00	0.10	0.00	0.08	0.00	0.05	0.80
1930	0.99	0.00	0.00	0.06	0.00	0.03	0.16	0.03	0.69
1931	0.15	0.00	0.00	0.00	0.00	0.06	0.00	0.08	0.90
1932	0.16	0.00	0.00	0.01	0.01	0.00	0.06	0.06	0.80
1933	0.13	0.00	0.00	0.03	0.00	0.05	0.01	0.03	0.71
1934	0.17	0.00	0.01	0.01	0.00	0.05	0.05	0.03	0.77
1935	0.10	0.00	0.00	0.01	0.01	0.01	0.00	0.05	0.51
1936	0.28	0.00	0.00	0.03	0.00	0.00	0.06	0.18	0.54
1937	0.17	0.00	0.00	0.05	0.00	0.06	0.00	0.05	0.56
1938	0.17	0.00	0.00	0.03	0.00	0.01	0.06	0.05	0.52

* Including Paratyphoid.

The figures given in this Table are those obtained after correction by exclusion of "Non-Residents" and the inclusion of "Residents" beyond the district.

Table showing Ward Distribution of Infectious Cases in 1938.

DISEASE.	Cases Notified at All Ages.	Cases Notified in each Ward.								Total Cases removed to Hospital.	
		St. Mary's	St. John's	Cottenham Park	Wimbledon Park	Dundonald	Trinity	South Park	Haydon Park		
Smallpox
Scarlet Fever	55	4	3	13	2	3	14	6	10	50	
Diphtheria (including Membranous croup)	37	5	1	3	...	7	6	8	7	35	
Enteric Fever (including Paratyphoid)	1	...	...	1	...	...	...	...	...	...
Puerperal Fever ... ..	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia	11	1	...	3	...	1	3	1	2	8	
Acute Primary Pneumonia	19	1	...	2	2	5	2	5	2	3	
Acute Influenzal Pneumonia	2	...	...	...	...	...	2	...	...	...
Cerebro-spinal Fever ... ..	...	...	...	...	...	...	...	...	...	...
Acute Poliomyelitis ... ..	...	...	...	...	...	...	...	...	...	...
Acute Polio-encephalitis ... ..	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica ... ..	...	...	...	...	...	...	...	...	...	...
Malaria ... ..	...	...	...	...	...	...	...	...	...	...
Dysentery	1	...	1	...	...	...	...	...	...	...
Ophthalmia Neonatorum	8	...	1	...	...	1	...	3	3	2
Erysipelas	23	1	3	3	2	5	3	4	2	6	
Pulmonary Tuberculosis	43	5	6	3	3	4	4	11	7	34	
Non-pulmonary Tuberculosis	8	...	...	2	...	1	1	1	3	2
TOTALS	208	17	15	30	9	27	35	39	36	140	

Table showing Number of Cases of Infectious Diseases
Notified during each year from 1926 to 1938.

DISEASE	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Smallpox ... ..	...	1	...	2	2	1	...	3	...	...	...	...	...
Scarlet Fever	165	169	126	131	127	75	126	126	130	87	105	55	55
Diphtheria (including Membranous Croup) ...	26	52	170	150	140	74	64	21	47	45	49	60	37
Enteric Fever	4	4	4	7	...	1	...	...	...	...	...	1	1
Paratyphoid Fever ... ..	...	7	6	...	2	1	2	1	...	2	2	3	...
Puerperal Fever	3	1	2	2	4	4	3	2	2	1	2	2	...
Puerperal Pyrexia ... ..	...	9	6	12	9	3	7	5	3	3	7	5	11
Acute Primary Pneumonia	39	42	32	39	23	21	28	22	22	11	21	26	19
Acute Influenzal Pneumonia	1	9	3	9	1	7	33	20	5	...	6	20	2
Cerebro-spinal Fever	1	2	1	2	2	1	1	2	...	...	...	...	...
Acute Poliomyelitis	4	...	1	...	...	...	...	1	1	1	...	1	...
Acute Polio-encephalitis	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica ...	3	2	1	...	1	...	1	...	...	...	1	1	...
Malaria ... ..	...	...	2	...	...	...	1	...	...	...	1	...	...
Dysentery ... ..	...	...	...	...	...	...	1	...	...	3	1	20	1
Ophthalmia Neonatorum ...	3	4	3	1	3	4	7	3	2	1	5	3	8
Erysipelas	17	24	19	33	29	29	18	29	25	20	22	17	23
Pulmonary Tuberculosis ...	48	56	65	56	56	67	81	70	58	56	53	75	43
Non-pulmonary Tuberculosis	6	19	14	13	5	13	8	7	16	11	11	15	8
Totals	320	401	455	457	404	301	381	312	311	241	286	304	208

TUBERCULOSIS.

Fifty-one cases of tuberculosis were notified. This figure shows a decrease of thirty-nine on the number for the previous year.

The deaths from tuberculosis were two less than in 1937, the total figure being thirty-one.

Of the twenty-five deaths from pulmonary tuberculosis, twelve died outside the district (seven males and five females). These deaths were transferred to Wimbledon by the Registrar-General.

There were six non-pulmonary deaths (four males and two females). Two males and one female died outside the district. The causes of death in these cases were as follows:—

Tuberculous right knee joint	1
Intestinal and Peritoneal Tuberculosis ...	1
Tuberculosis of the Kidneys	1

At the end of the year there were three hundred and seventy-three cases remaining on the tuberculosis register, two

hundred and seventy-five being cases of pulmonary, and ninety-eight cases of non-pulmonary tuberculosis. The register is revised quarterly as the result of information given by the Tuberculosis Officer of cases in attendance at the Dispensary.

An inspection of the home conditions and sanitary environment of every tuberculous patient is carried out by the staff of the Public Health Department as soon as the notification is received.

As the result of the large number of visits which are paid by the members of the sanitary and nursing staff much is done to improve insanitary conditions.

Where possible arrangements are made for patients to sleep in separate bedrooms. Disinfectants are supplied free of charge and sputum flasks are available on application at the Public Health Department.

Leaflets giving advice as to what precautions should be taken by the patient are also left in the home. Subsequently routine visits are paid by the Health Visitor attached to the Tuberculosis Dispensary, from whom regular reports on the home conditions are received.

Information concerning home contacts in attendance at the public elementary schools is forwarded to the School Medical Department, where arrangements are made for their special observation. Similar information concerning contacts under school age is passed to the Health Visitor of the district concerned, in order that special efforts may be made to persuade parents to attend with them at the Child Welfare Centres. In a certain number of cases convalescent treatment is arranged for children who are contacts of the disease.

The Surrey County Council make all arrangements for the provision of sanatorium and hospital treatment.

During 1938, thirty-six Wimbledon patients were admitted to sanatoria or hospitals.

Public Health (Prevention of Tuberculosis) Regulations, 1925.—No action was necessary in regard to tuberculous employees in the milk trade.

Public Health Act, 1925 (Section 62).—No action was required under this section of the Public Health Act, 1925.

TUBERCULOSIS.—The following table shows the number of new cases added to the register during the year, and the number of deaths from this disease.

AGE GROUPS	NEW CASES												DEATHS			
	Primary Notifications (Form A)				New Cases discovered otherwise than by Notification				Total New Cases							
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
Under 1 year ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1—5 " ... ..	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...
5—10 " ... ..	...	...	2	1	1	...	...	...	...	2	1	...	...	...	...	...
10—15 " ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
15—20 "	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20—25 "	2	5	1	1	3	1	...	...	1	2	1	1	1	...	...	...
25—35 "	4	4	...	1	3	1	...	...	5	6	1	1	3	3	...	...
35—45 "	2	4	...	...	...	...	...	...	7	5	...	1	5	2	1	1
45—55 "	1	5	...	...	...	...	...	...	2	5	...	...	5	5	1	...
55—65 " ... ..	...	1	...	...	...	...	...	...	1	5	...	...	1	...	2	...
65 and over	1	1	...	...	...	...	...	...	1	1	...	...	...	2	...	...
	11	22	4	4	7	3	...	...	18	25	4	4	11	14	4	2
	33		8		10		...	...	43		8		25		6	
TOTALS ...	41				10				51				31			
	51															

Wimbledon Infectious Diseases Hospital

DISEASE	CASES ADMITTED			DEATHS		
	Under 5 Years	Over 5 Years	Total	Under 5 Years	Over 5 Years	Total
<i>Brought forward from 1937</i>						
Scarlet Fever	3	11	14	...	...	...
Diphtheria	2	14	16	...	...	...
Paratyphoid Fever ...	...	1	1	...	...	...
Measles ... ..	...	1	1	...	...	...
Dysentery	1	1	2	...	...	...
CASES ADMITTED IN 1938						
<i>From Wimbledon—</i>						
Scarlet Fever	10	45	55	...	...	...
Scarlet Fever and Chicken-pox	1	...	1	...	...	...
Diphtheria	4	32	36	...	1	1
Typhoid Fever ... ..	...	1	1	...	...	...
Puerperal Pyrexia ...	...	1	1	...	...	...
Puerperal Sepsis ...	...	1	1	...	...	...
Puerperal Sepsis (Baby) ...	1	...	1	...	...	...
Cerebro-Spinal Fever (Carrier) ... ..	...	1	1	...	...	...
Erysipelas ... ..	...	3	3	...	...	...
Measles	11	9	20	1	...	1
Measles and Broncho-pneumonia	1	...	1	...	...	...
German Measles ... ..	...	1	1	...	...	...
Whooping Cough	1	...	1	...	...	...
Enteritis	1	...	1	...	...	...
Scabies ... ..	...	1	1	...	...	...
Scabies (Baby)	1	...	1	...	...	...
<i>From Kingston—</i>						
Scarlet Fever	10	41	51	...	...	...
Diphtheria	12	59	71	...	3	3
Typhoid Fever ... ..	...	1	1	...	1	1
Acute Poliomyelitis ...	...	2	2	...	...	...
Dysentery	17	7	24	...	...	...
Measles	10	5	15	...	...	...
Chicken-pox	1	1	2	...	...	...
Totals	87	239	326	1	5	6
Daily Average Number of Cases in Hospital 26						
Average Number of Days in Hospital (per Case) 34						
Total Number of Kingston Cases treated 183						

The revenue derived from the admission of patients from outside areas since 1919 now exceeds £39,000.

Two hundred and ninety-two cases were admitted to the Infectious Diseases Hospital during 1938. As there were thirty-four cases in hospital at the end of 1937, the total number of cases under treatment during the year amounted to three hundred and twenty-six. One hundred and forty-three of these

cases were from Wimbledon, and one hundred and eighty-three from Kingston. There were thus eighty-three more cases treated in the Hospital in 1938 as compared with the previous year.

Scarlet Fever.—One hundred and six patients were admitted to hospital suffering from scarlet fever during the year, together with one patient who was found to be suffering from scarlet fever and chicken pox.

The following complications were noted amongst the cases under treatment:—

Rhinorrhœa	...	...	...	...	...	8
Acute Otitis Media	...	...	...	...	...	5
Otorrhœa	...	...	...	...	...	4
Mastoiditis	...	...	...	...	...	1
Adenitis	...	...	...	...	...	9
Sub-mental abscess	...	...	...	...	...	1
Acute Nephritis	...	...	...	...	...	3
Rheumatism	...	...	...	...	...	5
Whitlows	...	...	...	...	...	1

One of the frequent complications noted was rheumatism. In the majority of cases the rheumatism was slight, and no cardiac complications occurred.

Paracentesis was performed when necessary. In all patients with ear complications the discharge had ceased before they left hospital, and in no case had any apparent deafness resulted.

One patient developed acute nephritis which necessitated a prolonged stay in hospital before complete recovery had taken place.

As in previous years, anti-scarlatinal serum was used fairly extensively. Nearly all patients, except those who had the disease in a mild form, received an injection of serum on admission. In most of the cases sulphonamide preparations were also given, either in conjunction with anti-scarlatinal serum or alone. The results were very gratifying. In a few cases sulph-hæmoglobinæmia developed. These symptoms, however, were mild, and rapidly passed off when the sulphonamide preparations were discontinued.

There were no deaths from scarlet fever. One "return" case occurred. This amounted to 0.89% of the patients discharged.

Diphtheria.—One hundred and seven patients were admitted as cases of diphtheria. This was an increase of nineteen on the figure for 1937. Of the one hundred and seven admissions, only sixty-two proved to be suffering from true clinical diphtheria. These latter cases included three children with laryngeal diphtheria. Fourteen patients were admitted as the result of positive swabs. They were found to be harbouring bacilli in the nose or throat, but not actually suffering from the disease. Twelve other patients on admission were found to be suffering from non-diphtheritic infections of the throat.

Amongst the sixty-two clinical cases of diphtheria, paralysis occurred as a complication in twelve patients. The symptoms of paralysis noted amongst these latter cases were as follows:—

Palatal paralysis	...	...	...	...	6
Ciliary paralysis	...	...	...	...	3
Paresis of legs	...	...	...	...	3

The other complications noted amongst the patients admitted to hospital as cases of diphtheria were as follows:—

Otorrhœa	...	...	...	...	3
Myocarditis	...	...	...	...	3
Mastoiditis	...	...	...	...	1
Nephritis	...	...	...	...	1

Four deaths occurred amongst the one hundred and seven patients admitted to hospital as suffering from diphtheria. Three of the deaths from diphtheria occurred in patients admitted from outside the Borough. It will thus be noted that one Wimbledon patient died from this disease during 1938.

As in previous years, three negative swabs were obtained from the nose and throat of all patients prior to discharge.

No "return" cases of diphtheria were reported during the year.

Enteric Fever.—Two patients were admitted as cases of typhoid fever. In one case the diagnosis of typhoid fever was not confirmed. The remaining patient was an old case of diabetes with cirrhosis of the liver. This case terminated fatally.

Dysentery.—Twenty-four patients suffering from Sonne dysentery were admitted from outside the Borough. The dysentery was of a mild type, and the patients made rapid recoveries.

Erysipelas.—Three cases of erysipelas were under treatment. One of these was a case of erysipelas of the face. All the patients made complete recoveries.

Puerperal Pyrexia.—Two patients suffering from puerperal pyrexia were admitted to the hospital. They responded well to treatment and made complete recoveries.

Non-Notifiable Diseases.—Two cases of chicken pox, one of whooping cough, and one of enteritis were also under treatment. Thirty-six other patients were admitted as cases of measles.

Twenty-one patients remained in hospital at the end of 1938. Eight of these were suffering from scarlet fever, eleven from diphtheria, one from acute poliomyelitis and one from whooping cough.

Hospital Staff.—The health of the staff, on the whole, continued to be satisfactory. There were two cases of German measles, three cases of tonsillitis, one case of jaundice, one of pyelitis and one of appendicitis. This latter case was transferred to the Nelson Hospital for operative treatment. All made good recoveries.

Eight nurses were Schick tested on joining the staff. Four were found to be positive and were immunised.

In concluding this report I should like to express my deep appreciation to the Chairman and members of the Public Health and Maternity and Child Welfare Committees for the consideration and courtesy which they have again shown me during 1938.

It is also a pleasure to draw attention to the help and co-operation which I have received from all members of the staff. My thanks are due to Dr. Craig, the Assistant Medical Officer, and Mr. Avis, the Senior Sanitary Inspector. I am indebted to Mr. Taylor, the Senior Clerk, for his assistance in the preparation of this report. From my colleagues in other Departments I have at all times received the most ready assistance and co-operation.

I have the honour to be

Your obedient servant,

HAROLD ELLIS.

TABLE I.—Vital Statistics of Whole District during 1938 and Previous Years.

YEAR.	Population estimated to middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
		Uncorrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 year of Age		At all Ages.	
			Number.	Rate.					Number.	Rate per 1000 Net Births.	Number.	Crude Rate.
1924	58,090	763	814	14.01	495	8.5	49	199	59	70	645	11.1
1925	58,170	712	760	13.06	524	9.0	85	199	46	60	638	10.9
1926	58,030	722	807	13.90	479	8.2	83	183	27	33	579	9.9
1927	58,150	671	717	12.30	494	8.4	93	219	37	50	620	10.6
1928	59,070	637	691	11.60	476	8.05	84	240	38	55	632	10.7
1929	59,379	705	759	12.70	573	9.6	81	282	35	46	774	13.03
1930	59,370	691	766	12.90	444	7.4	57	261	38	49	648	10.9
1931	58,840	600	642	10.90	524	8.9	80	280	45	70	724	12.3
1932	59,440	519	667	11.22	506	8.5	68	275	45	67	713	11.9
1933	58,770	389	602	10.24	466	7.9	62	232	30	49	636	10.8
1934	58,450	383	590	10.09	490	8.38	72	255	32	54	673	11.5
1935	58,270	388	600	10.29	482	8.27	67	247	33	55	662	11.3
1936	58,390	393	630	10.78	492	8.42	78	253	32	50	667	11.4
1937	58,440	409	608	10.40	527	9.01	73	300	40	65	754	12.9
1938	58,680	422	698	11.89	484	8.24	77	296	32	45	703	11.9

TABLE II.—Causes of, and Ages at, Deaths during the year 1938

CAUSES OF DEATH.	ALL AGES	Net Deaths at the subjoined ages of "Residents" whether occurring within or without the District.													TOTAL DEATHS WHETHER OF 'RESIDENTS' OR 'NON-RESIDENTS' IN INSTITUTIONS IN THE DISTRICT.
		Under 1 year.	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 and over.		
		All Causes { Certified 703	34	1	2	1	...	4	3	6	29	46	146	420		145
{ Uncertified ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1. Typhoid and Paratyphoid Fevers ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2. Measles	4	1	...	...	...	1	...	...	1	...	...	...	...	...
3. Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
4. Whooping Cough	1	1	...	...	...	...	...	...	...	...	...	...	...	...
5. Diphtheria	2	...	...	...	...	2	...	...	...	...	...	...	...	4
6. Influenza	9	...	...	...	...	...	...	...	...	...	6	3	5	...
7. Encephalitis Lethargica ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
8. Cerebro-spinal Fever	1	1	...	...	...	...	...	...	...	...	...	...	...	...
9. Tuberculosis of respiratory system	25	...	...	...	...	...	...	1	8	10	3	3	1	...
10. Other Tuberculous diseases	6	...	...	...	...	...	...	...	2	1	2	1	4	...
11. Syphilis	3	...	...	...	...	...	...	...	...	1	...	2	...	...
12. General paralysis of the insane, tabes dorsalis	1	...	...	...	...	...	...	...	...	...	1	...	...	...
13. Cancer, malignant disease	119	...	...	...	...	...	...	...	3	5	42	69	31	...
14. Diabetes	7	...	...	...	...	...	...	1	...	...	2	4	2	...
15. Cerebral Hæmorrhage	33	...	...	...	...	...	...	...	...	...	11	22	7	...
16. Heart Disease	176	...	...	...	...	...	...	1	...	4	21	150	19	...
17. Aneurysm	4	...	...	...	...	...	...	...	1	1	...	2	...	...
18. Other Circulatory Diseases	47	...	...	...	...	...	...	...	...	2	4	41	16	...
19. Bronchitis	19	...	...	...	...	...	...	...	...	2	1	16	2	...
20. Pneumonia (all forms)	43	10	...	...	...	...	...	...	...	3	8	12	7	...

TABLE II.—continued

CAUSES OF DEATH.	ALL AGES	Net Deaths at the subjoined ages of "Residents" whether occurring within or without the District.												TOTAL DEATHS WHETHER OF 'RESIDENTS' OR 'NON-RESIDENTS' IN INSTITUTIONS IN THE DISTRICT.
		Under 1 year.	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over.	
21. Other Respiratory Diseases ...	11	...	...	...	...	...	...	...	...	...	...	...	11	1
22. Peptic Ulcer ...	10	...	...	...	...	...	...	...	...	...	2	4	4	3
23. Diarrhœa, etc. (under 2 years) ...	3	3	...	...	...	...	...	...	...	...	...	...	...	...
24. Appendicitis ...	8	...	...	...	...	...	...	...	1	2	1	2	2	2
25. Cirrhosis of Liver ...	3	...	...	...	...	...	...	...	...	...	1	1	1	1
26. Other Diseases of Liver, etc. ...	4	...	...	...	...	...	...	...	...	...	...	1	3	1
27. Other Digestive Diseases ...	16	1	...	...	1	...	1	1	...	1	2	3	6	5
28. Acute and Chronic Nephritis ...	19	...	...	...	...	...	...	...	...	1	1	6	11	3
29. Puerperal Sepsis ...	2	...	...	...	...	...	...	...	...	2	...	...	...	1
30. Other Puerperal Causes ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
31. Congenital Debility, Premature Birth, Malformations, etc. ...	17	17	...	...	...	...	...	...	...	...	...	...	...	3
32. Senility ...	11	...	...	...	...	...	...	...	...	...	...	...	11	5
33. Suicide ...	10	...	...	...	...	...	...	...	...	3	2	3	2	...
34. Other Violence ...	28	...	...	1	...	...	...	...	1	2	4	6	14	8
35. Other Defined Diseases ...	60	1	...	1	...	...	...	2	1	3	4	19	29	14
36. Causes ill-defined or unknown ...	1	...	...	...	...	...	...	...	...	...	...	...	1	...
TOTALS ...	703	34	1	2	1	...	4	3	6	29	46	146	420	145
Special Causes (included in No. 35 above).														
Smallpox
Poliomyelitis
Polioccephalitis

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Borough of **Wimbledon.**

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

FOR THE

Year ended 31st December, 1938

Education Committee

Chairman:

Alderman J. M. BATHGATE, J.P.

Vice-Chairman:

E. TRIM, Esq., J.P.

Members:

Alderman A. W. HICKMOTT	Councillor J. P. C. WATSON
Councillor A. E. BAXTER, O.B.E., J.P.	Mrs. H. A. CROWE
Councillor G. D. CHAMBERS	Mrs. D. PEATTIE
Councillor A. A. DRAKE, J.P.	C. H. BRAZIER, Esq. (appointed 25th May, 1938)
Councillor E. FIELDER	E. R. H. DICKEN, Esq. (resigned 25th May, 1938)
Councillor W. E. HAMLIN	BERNARD ELY, Esq.
Councillor W. B. JAMES, J.P.	A. McIVOR, Esq.
Councillor W. A. LINES	Rev. A. M. PATERSON
Councillor J. E. G. McSHEEHY	Rev. Canon A. H. PHELIPS
Councillor LADY RONEY, J.P.	

STAFF

(a) Whole-time Officers:

School Medical Officer:

- * † HAROLD ELLIS, M.B., B.S. (Lond.), M.R.C.S.,
L.R.C.P., D.P.H.

Assistant School Medical Officer:

- * † EFFIE M. D. CRAIG, M.B., Ch.B.

School Dental Surgeon:

- * A. MACGREGOR WHYTE, L.D.S., R.F.P.S.G.

Health Visitor—School Nurses:

- * (b), (d), (f). MISS V. B. WOODROFF
* (a), (b), (e). MISS A. THOMPSON
(resigned 31st January, 1938).
* (a), (b), (e). MISS P. N. NASH
* (a), (b), (c), (e). MISS J. C. MOFFAT
* (a), (b), (c), (e). MISS D. E. MARCHANT
(appointed 17th January, 1938).
* (a), (b), (c), (e). MISS E. S. G. DAVIES
(appointed 1st February, 1938).

Senior Clerk Public Health Department:

- * † A. L. TAYLOR.

School Medical Clerk:

MISS C. COYSH.

Dental Attendant:

MISS C. O'HARA.

(b) Part-time Officers:

Orthopædic Surgeon:

R. J. FURLONG, F.R.C.S.

Surgeon to Aural Clinic:

R. J. CANN, M.S.

Oculist:

A. D. BELLIOS, M.B., M.R.C.S., D.P.H.

Anæsthetist to Dental Clinic:

S. TAYLOR HARRIS, M.R.C.S., L.R.C.P.

-
- * Maternity and Child Welfare Officers.
† Public Health Officers.
(a) S.R.N.
(b) S.C.M.
(c) Certificate of Fever Training.
(d) Certificate San. Inspect.
(e) New Health Visitors Certificate R.S.I.
(f) Diploma Board of Education (Health Visitors' Training)
Regulations, 1919.

Borough of Wimbledon.

Education Committee.

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

FOR THE

Year ended 31st December, 1938.

To the Chairman and Members of the
Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit my Annual Report for the year 1938 on the work of the School Medical Department.

There are sixteen public elementary schools under the control of the Local Education Authority, providing accommodation for 5,702 children. This figure includes the accommodation for fifty children at the Special School, Queen's Road.

The average number of children on the school registers during the year ended 31st March, 1938, was 4,616. The average number in attendance was 4,056. This gives an average attendance of 87.87 per cent.

1. STAFF.

Full particulars of the staff of the School Medical Service are given at the commencement of this report.

A fifth school nurse-health visitor having been found necessary, Miss D. E. Marchant was appointed to fill the post and commenced duty on 17th January, 1938.

Miss A. Thompson resigned on the 31st January, to take up an appointment with a neighbouring Authority. Miss E. S. G. Davies was appointed to fill the vacancy.

2. CO-ORDINATION.

There are now five school nurse health visitors on the staff, each devoting one half of her time to the School Medical Service. The schools are divided amongst them as follows:—

MISS WOODROFF—

Wimbledon Park Junior Mixed School.
Holy Trinity Senior Mixed School.

MISS MOFFAT—

Queen's Road Senior Boys' School.
Queen's Road Senior Girls' School.
Queen's Road Infants' School.
Queen's Road Special School.

MISS NASH—

All Saints Junior Girls' and Infants' School.
All Saints Junior Mixed School.

MISS MARCHANT—

Central Boys' School.
Central Girls' School.
Pelham Infants' School.

MISS DAVIES—

Dundonald Junior Boys' School.
Dundonald Junior Girls' and Infants' School.
Dundonald Nursery Class.
Cottenham Park Junior Mixed School.
Cottenham Park Infants' School.
St. Mary's R.C. School.
Old Central Junior Mixed School.

Their districts for health visiting are arranged so as to include, as far as possible, the schools for which they are responsible as school nurses. At present the arrangements for health visiting are drawn up on the following lines:—

MISS WOODROFF—

Wimbledon Park Ward.
Haydon Park Ward.

MISS MOFFAT—

St. Mary's Ward.
South Park Ward.

MISS NASH—

Trinity Ward.

MISS MARCHANT—

St. John's Ward.

MISS DAVIES—

Cottenham Park Ward.
Dundonald Ward.

This has ensured a close co-operation between the School Medical Service and the Maternity and Child Welfare Department.

The School Medical Department with its Ophthalmic, Dental, Minor Ailment, and Orthopædic Clinics is centralised in the Health Centre at Pelham Road, and one of the three Maternity and Child Welfare Centres in the Borough is conducted in this same building.

When any of the children attending the Maternity and Child Welfare Centres or the Day Nursery attain the age of five years, their medical records are forwarded to the office of the School Medical Department in order that they may be incorporated with their school medical inspection cards.

The School Medical Service in Relation to Public Elementary Schools.

3. SCHOOL HYGIENE.

The sanitary condition of the Public Elementary Schools in Wimbledon continues to be satisfactory.

The periodical inspection of the drains at the schools is carried out by the Borough Surveyor's Department.

Repairs have been carried out to the playgrounds, and the surfaces improved, at the Central, Pelham Road, Dundonald Road, Queen's Road, and Wimbledon Park Schools.

Step-flooring has been removed, and the floors relaid in the classrooms in All Saints Junior Mixed, All Saints Junior Girls' and Infants', and Holy Trinity Senior Mixed Schools.

An additional drinking water tap, drawn from the main water supply, has been provided at the All Saints Junior Mixed School.

At the Dundonald Road Schools an electric fire alarm system has been installed at a cost of £10 13s. 0d. This displaces the use of an outside bell previously used for this purpose.

Arrangements have now been made for improving the electric lighting in all the schools in the Borough.

The following painting work was carried out during the summer holidays: external painting at Central and Pelham Road Schools, internal painting at Pelham Road Infants' School, and internal and external painting at Wimbledon Park School.

Wall boards have been provided for two classrooms at Dundonald Road Junior Girls' and Infants' School, and two classrooms at Wimbledon Park School in place of the portable blackboards and easels formerly in use.

Dundonald Road Junior Girls' and Infants' School, Wimbledon Park School, and All Saints Junior Mixed School have each been supplied with twenty-five dual table desks and fifty chairs for use with these desks. The seating of the All Saints Junior Mixed School has been improved further by the transfer of the desks thus displaced from the Dundonald Road and Wimbledon Park Schools.

4. MEDICAL INSPECTION.

(a) The children medically examined were those in the three groups prescribed in the Board of Education (Special Services) Regulations, 1925. These include:—

- (i) Entrants: i.e., those children admitted to school for the first time since the last routine medical inspection.
- (ii) Second Age Group: i.e., those children who have attained their eighth birthday since the last routine medical inspection, or who will be nine years of age during the current year.
- (iii) Third Age Group: i.e., those children who have attained their twelfth birthday since the last routine medical inspection, or who will be thirteen years of age during the current year.

In 1937 arrangements were made for an additional Age Group to be medically inspected in the Boys' and Girls' Central School. The children in this Age Group were scholars who had attained the age of fourteen years during the year under review.

Entrants to the new Nursery Class at the Dundonald Road School were also medically examined at each of the two visits paid to the school by the school medical inspector.

There were medically inspected in the schools during the year 1938:—

Entrants	...	...	...	...	533
Second Age Group			...	...	533
Third Age Group			...	...	450
Fourth Age Group			...	...	119
			Total	...	<u>1,635</u>

In addition there were one hundred and twenty-nine other routine inspections in the schools, including thirty-nine in the Dundonald Nursery Class, making a total of 1,764.

Apart from these routine inspections there were 3,187 special inspections and 7,822 re-inspections carried out at the Health Centre.

The total number of routine and non-routine medical inspections during the year, excluding the 7,822 re-inspections, amounted to 4,951.

The number of children examined at the routine inspections in the schools shows a decrease of forty-eight as compared with the figure for the previous year.

As in previous years it was again necessary to check off from the school registers all children due to be examined in the second and third age groups. This ensured that no child who was due to be examined was missed at the routine inspections. This has been found advisable owing to the transfer of scholars which takes place every year as the result of the re-organisation of the schools.

The number of special inspections and re-inspections at the Health Centre shows an increase of two thousand and forty-four.

(b) The Board of Education (Special Services) Regulations, 1925, with reference to the medical inspection of school children, have been adhered to in every respect.

(c) Medical inspection causes a certain amount of disturbance, especially in the older type of schools. The re-organisation of the schools has resulted in improved facilities for inspection. Whereas in former years it has been necessary in some instances to carry out this work in premises situated near at hand, it is now possible for the medical inspections to take place in those schools. The only exception is St. Mary's R.C. Mixed and Infants School at Russell Road. As this school is quite near the Pelham Road Health Centre, the medical inspection of these scholars is carried out there. The head teacher's room is utilised for this purpose in twelve of the schools, staff rooms in two others, and in the two remaining schools a classroom is available.

5. FINDINGS OF MEDICAL INSPECTION.

In Table II_A (which is given in the Appendix) a list of all defects found during medical inspection, whether routine or non-routine, is shown. Table I_c gives the number of individual children found at the routine medical inspections to require treatment, excluding defects of nutrition, uncleanness and dental diseases.

There were 1,764 children examined at the routine medical inspections. Two hundred and thirty-seven, or 13.43% were found to be suffering from defects (excluding defects of nutrition, uncleanness and dental diseases) requiring treatment. The figures relating to the number of defects found in the various age groups are given in Table I_c in the Appendix.

Among the 3,187 children specially examined there were found 1,875 defects requiring treatment and one hundred and thirty-nine requiring to be kept under observation.

Although the character of the defects ascertained varies somewhat from year to year, on the whole, the health of the school children in Wimbledon showed no apparent change as compared with 1937.

(a) **Malnutrition.** The question of malnutrition amongst school children again received attention during 1938 when a special survey was devoted to this subject. All the schools were visited by the assistant medical officer during the survey and the collaboration of the head teachers and class teachers obtained.

Table II_B gives a classification of the nutrition of those inspected in the routine age groups. Of the 1,764 children examined as routines the nutrition was found to be bad in two cases, or 1.13 per thousand of those inspected. The nutrition was slightly subnormal in fifty-three children, or 30.04 per thousand of those examined as routines.

These figures are based on the lines laid down in Administrative Memorandum No. 124 dated 31st December, 1934. The numbers dealt with are small but the figures would appear to indicate an improvement in the nutritional condition of the children inspected as routines.

The following table indicates the extent of malnutrition discovered at the routine inspections.

Age Groups.	Number of Children Inspected	Classification.			
		C (Slightly Subnormal)		D (Bad)	
		Number Found	%	Number Found	%
Entrants	533	21	3.94	2	0.38
Second Age Group ...	533	22	4.13	...	...
Third Age Group ..	450	7	1.56	...	...
Other Routine Inspections	248	3	1.21	...	...
Total ...	1764	53	3.00	2	0.11

(b) **Uncleanliness.** Since 1933 a record of every unclean child found by the nurses in their inspections has been kept, no matter how slight or trivial the degree of uncleanliness. At present, the standard in Wimbledon is undoubtedly high. At the routine medical inspections no child was found to be unclean. During 1937, three children, or 0.16% of those examined as routines required to be excluded from school on account of uncleanliness.

The school nurse-health visitors continued to carry out the systematic inspection of all the scholars in their schools three times a year, i.e., after the Christmas, Easter, and Mid-Summer holidays. This inspection reveals not only unclean children, but also children suffering from defective vision, minor ailments, anaemia, malnutrition, etc. These latter children are referred either to their own doctors or to the Health Centre where they are seen by one of the school medical staff.

The number of examinations of children carried out in the schools by the school nurses amounted to 12,595. On an average, the nurses paid seven visits to each school.

The total number of individual unclean children found by the nurses during their systematic inspections of the schools during 1938 amounted to two hundred and seventy-three. This is a decrease of eighty-eight on the figure for 1937 when the number was three hundred and sixty-one.

Clothing and Footgear. The standard of clothing and footgear of the children on the whole continued to be satisfactory. Boots and shoes, together with garments suitable for school children, which were no longer considered serviceable at the Infectious Diseases Hospital were again passed over to the Attendance Department after thorough disinfection had been carried out. These were then distributed to the most needy families. Assistance of this nature was also granted by the local branch of the Invalid Children's Aid Association.

(c) **Minor Ailments and Diseases of the Skin.** The minor ailments found at the routine and special inspections are indicated in Table II.

Ringworm of the body, scabies, impetigo, other skin diseases, minor injuries, diseases of the ears and eyes (including otorrhœa and blepharitis) together with miscellaneous conditions such as sores and chilblains were the common ailments detected.

Of the children examined as routine cases in the schools, 0.39% were found to be suffering from skin diseases. One was suffering from scabies, three were suffering from impetigo and three from other minor skin ailments.

Three hundred and sixty, or 11.29% of the special cases examined at the Health Centre were discovered to be suffering from diseases of the skin. There were fifteen cases of ringworm of the body, thirty cases of scabies, one hundred and fourteen of impetigo, and two hundred and one of other skin conditions.

Ringworm of the scalp is not of frequent occurrence amongst school children in Wimbledon.

(d) **Visual Defects and External Eye Disease.** There were twelve cases of external eye disease amongst the 1,764 routine children examined. This gives a figure of 0.68%. All these cases were due to blepharitis.

At the special inspections there were seventy cases or 2.19% due to external eye disease. Forty-four were due to blepharitis, twenty-five to conjunctivitis, and one to interstitial keratitis.

Serious conditions such as keratitis and corneal opacities are fortunately not common amongst the school children in Wimbledon.

Defective vision is one of the most important defects discovered. At the routine medical inspections, fifty-seven children with defective vision and eight with squint were found to require treatment. This makes a total of sixty-five cases requiring treatment or 3.68% of the children examined. The figure for the previous year was 3.75%. The actual incidence of defective vision requiring treatment is, however, higher than 3.68%. Of the 1,764 children examined as routine cases five hundred and thirty-three were entrants and in the majority of these it was impossible to carry out subjective visual tests on account of their age. In addition, one hundred and eight children with slighter degrees of defective vision were found at school. These cases did not require treatment and were kept under observation.

Of the children examined as special cases at the Health Centre there were fifty-five with defective vision and six with squint requiring treatment, and three with defective vision or squint requiring to be kept under observation. The cases which are kept under observation and not referred for immediate treatment are those with minor defects of vision.

These children are re-examined by the medical officer when the school is next visited. If necessary, they are then referred to the Refraction Clinic for examination by the ophthalmic surgeon.

(e) **Nose and Throat Defects.** At the routine medical inspections there were twenty-nine cases of enlarged tonsils, one case of adenoids, sixteen cases of adenoids with enlarged tonsils, and thirteen cases with other conditions of the nose and throat requiring treatment. Thus out of 1,764 children examined in the routine way, fifty-nine or approximately 3.34% were found to need surgical or other treatment. In addition, there were sixty-three other children or 3.57% with defects of the nasopharynx. Most of these were suffering from enlarged tonsils requiring to be kept under observation. At the Health Centre eighty children with enlarged tonsils and twenty-one with enlarged tonsils and adenoids were found at the special inspections to require surgical treatment.

(f) **Ear Diseases and Defective Hearing.** At the routine inspections six children were found to be suffering from defective hearing, six from otitis media, and five from other ear disease, all requiring treatment. There were also five children with defective hearing, and two with otitis media

requiring to be kept under observation. In other words, 1.36% of the children examined in the schools were found to be suffering from defective hearing or from discharging ears. Furthermore, thirteen children with defective hearing, fifty-nine with otitis media, and seventy-seven with other ear diseases, all requiring treatment, were examined as special cases at the Health Centre.

(g) **Dental Defects.** At the routine inspections by the medical officer two hundred and four children, or 11.56% of the children examined, were found to have dental caries to such an extent as to require treatment. During the year 1937 the percentage was 10.48.

Amongst the 3,187 children who attended the Health Centre as special cases, thirty-one were found to be suffering from dental defects requiring treatment.

(h) **Orthopædic and Postural Defects.** At the routine inspections eleven cases of deformity due to previous rickets were discovered. Three of these cases required treatment and eight required to be kept under observation. In addition there were three cases of spinal curvature requiring to be kept under observation. There were also thirty-two other cases of orthopædic and postural defects, twenty-one of which required treatment and eleven required to be kept under observation.

At the special inspections at the Health Centre one case of deformity due to previous rickets and two cases of spinal curvature were detected, all requiring treatment. Twenty-six other cases of orthopædic and postural defects were found at these inspections, twenty-five of which were referred to the Orthopædic Clinic and one kept under observation.

The conditions found at the routine and special inspections, and classified under "other deformities," were due to flat foot, knock knee, congenital deformities, deformities due to old injuries, etc.

(i) **Heart Disease and Rheumatism.** Particulars regarding children suffering from heart defects at the routine and special inspections are shown in Table II.

Among the routines, ten children with organic disease of the heart requiring treatment and one child in which the condition was quiescent and required to be kept under observation, were found. There were two children with chorea, one requiring treatment and one requiring to be kept under observation. Ten children with functional heart disease were

also discovered. Two of these were found to require treatment and eight required to be kept under observation.

At the special inspections three of the children examined were found to have organic disease of the heart, and two functional heart disease. In addition, three children were found to be suffering from chorea. These cases required treatment.

Most of the cases of organic disease of the heart occurring amongst school children are of rheumatic origin. A few are due to congenital heart disease.

Special attention was again devoted to the incidence of rheumatism.

The figures given below do not accurately indicate the incidence of rheumatism amongst school children. In the routine inspections, unless the parents are present, and in the absence of any abnormality of the heart, it is obvious that the mildest and most insidious forms of rheumatism are easily missed unless the child itself complains to the doctor of "growing pains" or symptoms of a similar nature.

Amongst the 1,764 children examined as routines, five, or 0.28% were found to be suffering from rheumatism in its milder and sub-acute forms. In the case of the 3,187 special inspections there were twenty-nine children, or 0.91% with symptoms of rheumatic disease.

(j) **Tuberculosis.** Cases of tuberculosis are not frequently found amongst school children in Wimbledon. At the routine inspections in 1938, one child was found to require treatment for tuberculosis affecting the bones and joints and one required to be kept under observation on account of abdominal tuberculosis.

All suspected cases are referred to the tuberculosis physician between whom and the school medical staff a close co-operation exists.

(k) **Other Defects and Diseases.** A considerable number of children were found at the routine and special inspections to be suffering from conditions not designated as specific defects in Table II. These conditions are shown in the Table under the heading "Other defects and diseases." Many of these conditions were due to colds, influenza, and infectious diseases. There were also many children found to be suffering from debility, gastro-intestinal disturbances, slight accidents, chilblains, and other minor ailments.

Additional Age Group at Central School.

The Education Committee decided in 1937 to provide for the routine medical inspection of an additional age group in the Boys' and Girls' Central School.

As stated earlier in the Report, the children examined were those who had attained their fourteenth birthday during the year. The total number inspected in this group amounted to one hundred and nineteen.

The defects found amongst these scholars were as follows:—

			Requiring Treatment.	Requiring Observation.
Malnutrition	...	...	1	—
Blepharitis	...	...	1	1
Defective vision	...	...	2	4
Other eye conditions	...	...	—	1
Defective hearing	...	...	1	—
Enlarged tonsils	...	...	1	—
Dental defects	...	...	2	—
Minor orthopædic defects	...	...	—	2
Other defects and diseases	...	...	2	—
			—	—
	Total	...	10	8
			—	—

These defects are included in the figures shown in Table II. It would appear that the routine medical inspection of this additional age group has been amply justified.

6. FOLLOWING UP.

The procedure for following up defects discovered during the routine medical inspection in 1938 was as follows:—

Parents were informed of the defects detected in their children during the routine medical inspections in the schools. Where the defects were of a minor nature they were informed verbally. In the case of more important defects the parents received a printed notice advising them of the nature of the trouble and of the need for obtaining treatment. A re-examination card was made out for each such child. As soon as possible after the inspection of the school had finished the nurse returned to the school with the re-examination cards of those children whose defects required special attention. When necessary, home visits were also paid to such cases and the parents interviewed.

The medical officer visited each school in the district twice during the year in order to carry out the routine medical

inspections and twice to conduct the re-inspection of children who had been previously found to be suffering from defects. Six hundred and fifty-four of these latter re-inspections were undertaken in 1938, special re-examination cards being utilised for this purpose.

At the routine, and also at the special inspections at the Health Centre, when a child is found to be suffering from defective vision requiring treatment, particulars are entered up on a special eye card. These cards are also taken to the school at each re-visit of the medical inspector. In all four hundred and forty-one re-inspections of such children were carried out. In all cases where the necessary spectacles have not been obtained, home visits by the school nurse are arranged.

A special record is kept of all delicate children, whether discovered at the routine or special medical inspections. These are children suffering from heart disease, rheumatism, suspected tuberculosis, orthopædic defects and similar conditions. They are also re-examined during the medical officer's re-visits to the schools. During 1938 two hundred and sixty-two such re-inspections were conducted.

7. ARRANGEMENTS FOR TREATMENT.

(a) **Malnutrition.** As in 1937, a survey was carried out in the schools with a view to detecting further cases of malnutrition amongst the children. All the schools in the Borough were visited by the assistant medical officer. The co-operation of the head teachers and class teachers was readily given. Special attention was also paid to the nutrition of the children during the routine inspections and also during the special inspections at the Health Centre.

As the result of this inquiry one hundred and twelve new cases were provided with free milk in school by the Education Committee after full investigation of the family circumstances had been carried out. In addition, one hundred and forty-five other children, who had been selected the previous year, were still in receipt of free milk under this scheme. The total number receiving free milk in school during 1938 amounted to two hundred and fifty-seven. All these children received milk during both the morning and afternoon sessions. They are re-examined every six months when their weights are recorded and entered up on special cards provided for the purpose. The milk, in the first instance, is granted for a period of six months

but in the majority of cases it was extended for a further period during the year. Only pasteurised milk was supplied in the schools.

Where the special Sub-Committee dealing with these cases was of opinion that the financial circumstances of the families were such that they were able to provide the milk for the children themselves, letters were sent out requesting the parents to make the necessary provision. These cases were also followed up in the schools by the school nurses and a considerable number of home visits paid. In some instances the excuse was given that the children were not able to take milk. On the whole, however, the scheme has worked well and the majority of the children showed a satisfactory gain in weight.

(b) **Uncleanliness.** The Education Committee have, for a number of years, made arrangements for the cleansing of children with unclean heads at the Health Centre. A cleansing room has been equipped with all the necessary facilities for this work, which is carried out by the nursing staff.

During 1938, thirty-five children were cleansed at the Health Centre. This represents a decrease on the figure of seventy-two for the previous year.

It is felt that no child should be cleansed at the Health Centre unless the mother, on account of illness or other bona fide reasons, is unable to carry this out herself. Many cases, however, have been dealt with at the Health Centre in order to minimise the long absence from school which is often caused by this trouble.

No legal proceedings under the Education Act, 1921, or the Attendance Byelaws, were taken against the parents of such children during 1938. Thirty-nine warning letters, however, were sent and these produced the desired effect.

(c) **Minor Ailments and Diseases of the Skin.** The work of the Minor Ailment Clinic at the Health Centre is shown in Table IV. This Clinic is well attended. The number of defects dealt with was nine hundred and seventy-seven, an increase of twelve as compared with the figure for the previous year. A school nurse is in attendance at this Clinic daily, including Saturdays, from 9 to 11 a.m.

The Committee have made arrangements for the treatment of children with ringworm of the head by means of X-rays at the St. John's Hospital at a cost of £1 10s. 0d. per

case. The parents are required to contribute according to their circumstances. No child required X-ray treatment on account of ringworm of the scalp in 1938.

Fifteen children with ringworm of the body, thirty with scabies, one hundred and fifteen with impetigo and one hundred and ninety-four with other diseases of the skin received treatment at the Minor Ailment Clinic.

(d) **Visual Defects and External Eye Disease.** Details of the work of the Refraction Clinic are given in Table IV, Group II.

This Clinic was formerly held every Monday afternoon. In November the day was altered to Thursday afternoon in order to allow of the establishment of a weekly session of the Ante-natal Clinic at the Health Centre.

The Refraction Clinic continued to be well attended and the table given hereunder shows the number of children who received treatment:—

New Cases (examined for the first time) ...	99
Old Cases (re-examinations)	165
Re-attendances	170
Total ...	<u>434</u>

In 1936 alterations were made in the arrangements for following up cases of defective vision. Prior to that date they were re-examined by the oculist at the Refraction Clinic. Now, however, as stated in section six of the Report, children for whom glasses have been prescribed are followed up by the school medical inspector at her periodical visits to the schools. Arrangements are then made for children whose vision with spectacles is no longer satisfactory to be re-examined at the Refraction Clinic. The alteration has resulted in the number of attendances at this Clinic falling from five hundred and eighteen in 1936 to four hundred and thirty-four in 1938. The congestion which formerly occurred has been remedied and a considerable saving in expenditure effected without loss of efficiency.

Glasses were prescribed in one hundred and ninety-seven cases, and the following table indicates the errors of refraction found.

Hypermetropia	18
Hypermetropia and Astigmatism	61
Hypermetropic Astigmatism	14

Myopia	...	...	...	...	...	39
Myopia and Astigmatism	...	...	...	...	...	40
Myopic Astigmatism	...	...	...	...	...	3
Mixed Astigmatism	...	...	...	...	...	22

Included in the above table are eighteen children whose degree of myopia was found to be greater than minus four dioptries. Where necessary, instructions were sent to the head teachers of the schools which these children attended, modifying the curriculum with a view to preventing the condition becoming more marked. Similar advice was also given to the parents. Children suffering from myopia are re-examined at the clinic on an average twice a year.

In the case of children with high myopia, arrangements are made for them to attend a myope or sight-saving school when the degree of short sight is found to be increasing. One such child was admitted to a myope school during 1938.

Two children suffering from squint were referred from the Refraction Clinic to hospital for orthoptic treatment. Doyne's shields were prescribed for six children suffering from squint.

Little difficulty is experienced in getting parents to provide the necessary spectacles for their children. In a few cases the co-operation of the N.S.P.C.C. was obtained with satisfactory results. Where parents are unable to afford the cost of spectacles these are supplied free after full particulars of the financial circumstances have been considered by the Committee. A revised price list was obtained from the dispensing opticians during the early part of the year. This showed a diminution in the cost of all the kinds of spectacles prescribed at the Clinic and represented an appreciable reduction in the contract price which the parents are required to pay.

One hundred and three children with external eye disease received treatment at the Minor Ailment Clinic at the Health Centre. A few of the more serious cases were referred to the oculist at the Refraction Clinic.

The Education Committee have an arrangement with the Nelson Hospital whereby school children suffering from eye disease are admitted for in-patient treatment at a cost of three shillings per day.

No child of school age was referred for treatment under this arrangement in 1938.

(e) **Nose and Throat Defects.** One child was operated on for enlarged tonsils, one for adenoids, and seventy-seven

for enlarged tonsils and adenoids during 1938 at the Nelson and Wimbledon Hospitals under the Education Committee's scheme. These patients remain in hospital overnight after their operations. The children are examined by the medical officer at the Health Centre before they return to school. In addition, five children with enlarged tonsils and one child with enlarged tonsils and adenoids were operated on privately. This makes a total of eighty-five children who received surgical treatment. It will thus be seen that twenty-seven more children were submitted to operation for the removal of tonsils and adenoids during 1938 as compared with the previous year.

Where children are operated on under the Education Committee's Scheme the cost to the Local Authority is £1 6s. 0d. for each case. This includes the operation, the anaesthetist's fee, and one night in hospital. In a number of cases it has been found necessary to keep the children in hospital for a longer period. Under such circumstances the Committee has made a payment of 2/6 for each additional day. In all, twenty-three children have been maintained in hospital for ninety-six additional days at a cost of £12. The parents contribute towards the cost in accordance with their financial circumstances.

Full details are outlined in Table IV., Group III.

(f) **Ear Diseases and Defective Hearing.** In 1937, the Education Committee, in conjunction with the Maternity and Child Welfare Committee, established an Aural Clinic at the Health Centre. The ear, nose, and throat surgeon appointed was Mr. R. J. Cann, from the staff of Guy's Hospital. The fee paid to the surgeon is three guineas a session. This Clinic is held at the Health Centre every fourth Wednesday from 2 to 4 p.m.

The following table gives an indication of the work carried out at the Aural Clinic during 1938:—

Total number of sessions	11
Average number of children attending per session	16
Total number of individual children seen	114
Total number of attendances made ...	176
Number of individual children referred for treatment to Minor Ailment Clinic ...	24
Number of individual children referred to hospital for operative or other treatment	33

Amongst the cases referred to hospital for treatment, the following operations were carried out:—

Mastoidectomy	...	...	...	...	4
Removal of tonsils and adenoids	...	...	...	...	25
Removal of adenoids	...	...	...	...	1
Radiant heat treatment	...	...	...	...	1

The total number of children with minor ear defects treated at the Health Centre amounted to one hundred and twenty.

Particulars regarding the children below school age are given in the report of the Medical Officer of Health.

(g) Dental Defects. The routine dental inspections include all the children attending the public elementary schools.

In 1938 there were 4,088 children dentally inspected in the routine age groups. A further six hundred and six children were inspected as special cases. The total number of children thus examined amounted to 4,694. This represents an increase of one hundred and nine on the figure for 1937. There were 3,332, or 70.98%, found to require treatment and their parents were notified accordingly. During the previous year the figure was 72.25%.

The number of children actually treated was 1,867, or 56.03% of those found to require treatment. It is still difficult to obtain consent for treatment in a considerable number of cases. During 1938 it was decided that notices to the parents advising them of dental defects requiring treatment should be sent through the post and not delivered by the scholars themselves as in previous years. This has resulted in an increase in the number of consent forms which have been returned. When appointments are not kept visits are paid to the homes by the school nurses. Every effort is made to get the parents to attend with their children at the Dental Clinic.

The Saturday morning sessions continue to show a good average attendance.

Forty-three half days were devoted to dental inspection in the schools and three hundred and seventy half days to treatment at the Health Centre.

The number of attendances made by children for treatment amounted to 3,937. This is one hundred and eleven more than the figure for the previous year. The average number of children attending for treatment per session was 10.64, a slight increase as compared with the figure of 10.51 for 1937.

The total number of fillings amounted to 2,394 or one hundred and forty-seven less than during the previous year. The number of teeth extracted shows an increase of three hundred and twelve, the total figure for the year being 3,291. Eight hundred and thirteen general anæsthetics were administered for dental extractions, an increase of sixty-four as compared with the figure for 1937.

It will be noticed that very little time is now devoted to the filling of temporary teeth, only twelve being filled during the year. It is considered essential to devote as much of the available time as possible to the preservation of permanent teeth.

(h) **Orthopædic and Postural Defects.** Sessions of the Orthopædic Clinic were held on the afternoon of the second Wednesday in each month, with the exception of August.

Fifty-four new cases were seen and one hundred and seventy-one re-examinations were carried out. The average number of children seen by the orthopædic surgeon per session was twenty. During the previous year the figure was twenty-three.

The following table shows the nature of the defects from which the children were suffering.

Infantile Paralysis	...	...	...	...	1
Spastic Hemiplegia	...	...	...	...	1
Spastic Paraplegia	...	...	...	...	1
Birth Palsy	...	...	...	...	2
Trauma	...	...	...	...	10
Deformities due to previous Rickets	...	...	...	...	5
Spinal Curvature	...	...	...	...	3
Flat foot, knock-knee, pes cavus, etc.	...	...	...	...	32
Postural defects	...	...	...	...	43
Hallux Valgus	...	...	...	...	1
Internal derangement of knee joint	...	...	...	...	1
Tuberculous joints (arrested)	...	...	...	...	1
Arthritis of knee	...	...	...	...	2
Enlarged Bursa	...	...	...	...	1
Torticollis	...	...	...	...	2
Exostosis	...	...	...	...	1
Congenital defects	...	...	...	...	3
Other defects	...	...	...	...	15
					<hr/>
			Total	...	125
					<hr/>

An indication of the treatment carried out through this Clinic is given hereunder:—

Number of children referred for in-patient treatment at Pyrford	—
Number of children referred to St. Thomas's Hospital for in-patient treatment	2
Number of children referred to St. Thomas's Hospital for out-patient treatment	5
Number of children referred to St. Thomas's Hospital for X-ray examination	2
Number of children transferred to P.D. Schools ...	—
Number of children referred for alterations to surgical boots, etc.	19
Number of children referred for exercises and massage at the Health Centre	39
	—
Total ...	67
	—

The orthopædic nurse attended seventy-seven sessions at the Health Centre in order to carry out the remedial exercises and massage. Thirty-nine children were referred by the orthopædic surgeon for such treatment. Five hundred and four attendances were made. The average number of children attending at each session for exercise and massage was 6.5.

The volume of work at the Orthopædic Clinic has remained about the same as in previous years.

Cases requiring prolonged treatment are sent to Pyrford. No new cases were sent into this institution during 1938. Two children, however, remained under treatment, having been admitted the previous year. One of these was a girl suffering from septic osteomyelitis of the femur. The other case was a girl with severe spinal curvature. Both received extensive surgical treatment. This latter patient had made sufficient progress to allow of her discharge home in November. She attained the age of sixteen years the following month and was referred to the Surrey Voluntary Association for the Care of Cripples.

Children who only require a short period in hospital for operative treatment are referred to St. Thomas's Hospital. Two boys were referred from the Orthopædic Clinic for in-patient treatment at this hospital, one with congenital torticollis and the other with trigger thumb. In addition, five

children were referred to St. Thomas's Hospital for out-patient treatment with the following conditions:—

Infantile paralysis.

Spastic hemiplegia.

Pseudo-hypertrophic muscular dystrophy.

Wart on sole of foot.

Torticollis.

Two other children were referred to St. Thomas's Hospital for X-ray investigation.

Nineteen children were referred from the Orthopædic Clinic for alterations to surgical boots or wedging of their shoes, etc. Thirty-nine children were referred to the Exercises Clinic at the Health Centre, which is attended by the orthopædic nurse two sessions each week. Most of these children were suffering from flat foot, postural defects, etc. Faradic treatment was provided in two cases. The children attending the Exercises Clinic are examined from time to time by the orthopædic surgeon. The attendances at this Clinic, on the whole, have been good.

The Orthopædic Clinic is used mainly as a consultative centre and many of the children are referred by the school medical staff for diagnosis. This ensures early treatment being secured. There is no doubt that there are fewer severe cases of crippling amongst school children in Wimbledon now when compared with previous years.

When a physically defective child attains the age of sixteen years the orthopædic surgeon makes a full report on the case with special reference to the capacity for work. This is forwarded to the Surrey Voluntary Association for the Care of Cripples. Two physically defective children who attained the age of sixteen years in 1938 were found suitable employment by this Association.

The work relating to children below school age is indicated in the section of the Annual Report dealing with the Maternity and Child Welfare Department.

(i) **Heart Disease and Rheumatism.** Children suffering from heart disease and rheumatism are sent to Certified Special Schools for treatment when necessary.

Three children suffering from rheumatism were sent to the following institutions during the year by the Education Committee:—

St. John's Open-Air School, Woodford Bridge 1

Heart Home, West Wickham	1
Hawkenbury Convalescent Home, Tunbridge Wells	1

During 1938 two children suffering from heart disease were discharged from the undermentioned Homes:—

Heart Home, West Wickham	1
Children's Heart Home, Lancing	1

A third child died from rheumatic carditis in the Heart Home, West Wickham.

One boy with severe congenital heart disease is a day scholar at the Frogmore Road School for Physically Defective Children. He is conveyed to and from the school daily by ambulance.

Many of these children with heart disease require to be away for several months before their convalescence is sufficiently established for them to be returned home with any degree of safety. They are then kept under periodical observation by the school medical staff and suitable instructions are sent to the head teachers of the schools which they attend, advising any necessary modifications in their school lives. Children who had previously received institutional treatment were also kept under continuous observation.

(j) **Tuberculosis.** The Surrey County Council is the authority responsible for the treatment of tuberculosis in Wimbledon.

A boy suffering from pulmonary tuberculosis was admitted to the Highwood Sanatorium, Brentwood, in January, 1938 and discharged in December. A girl with pulmonary tuberculosis was admitted in January, 1938 to the Holy Cross Sanatorium, Haslemere. She was discharged in April.

Three children suffering from surgical tuberculosis were admitted to the following institutions:—

Royal Sea Bathing Hospital, Margate ...	2
Heatherwood Hospital, Ascot	1

The two children admitted to Margate were suffering from tuberculous glands of the neck and abdominal tuberculosis respectively. The child admitted to Heatherwood Hospital, Ascot, was suffering from a tuberculous right hip.

During 1938 one boy was discharged from the Heatherwood Hospital, Ascot, where he had been under treatment for tuberculosis of the right knee. A second boy was discharged from the Royal Sea Bathing Hospital, Margate, in April after treatment for tuberculous glands of the neck.

Four children with non-pulmonary tuberculosis in whom the disease was arrested were in attendance at public elementary schools. These children were under the care of the tuberculosis physician and attended periodically at the Dispensary.

The Tuberculosis Dispensary at 30, Worple Road, is in a central position and readily accessible to parents attending with school children.

(k) **Other Defects and Diseases.** Children suffering from defects other than those indicated above obtain treatment either through private practitioners or at the out-patient departments of the local or big London hospitals.

Very little difficulty is experienced in getting parents to obtain the necessary treatment as there are so many facilities available in this area.

Artificial Light Treatment. The Education Committee have an arrangement with the Nelson Hospital whereby children referred from the School Medical Department may receive ultra-violet ray treatment at that institution. The charge made by the Hospital is one shilling for each attendance. As a rule the course of treatment is found to require twelve attendances.

Thirteen children were referred for treatment from the School Medical Department during 1938. Ten of these were suffering from rheumatism.

SPEECH CLINIC.

The following table shows the number of Wimbledon Children treated at the Speech Clinic:—

Defect.	Number attending at commencement of year.	Number admitted during the year.	Number discharged during the year.	Number attending at end of year.
Stammerers ...	10	6	3	13
Defective Speech	9	5	8	6
Total	19	11	11	19

Since 1936, Surrey children living near the Wimbledon boundary, who are suffering from speech defects, are admitted to the Speech Clinic at Pelham Road, a charge being made to the Surrey Education Committee for each attendance made.

The following table shows the number of Surrey children dealt with:—

Defect.	Number attending at commencement of year.	Number admitted during the year.	Number discharged during the year.	Number attending at end of year.
Stammerers ...	3	4	2	5
Defective Speech	...	3	1	2
Total	3	7	3	7

Stammerers attend two classes each week. The average number attending these classes was six.

Children with defective speech attend twice a week and are dealt with by the teacher individually.

The Speech Clinic is under the charge of Miss Sinclair. The work during 1938 has been very satisfactory. At the end of each term reports are received from the head teachers of the schools which the children attend. These reports have been very helpful. In a great majority of cases some improvement has been noted and in many the improvement has been very marked. The co-operation of the teachers and parents is a most important side of the work.

Relaxation, together with rhythmic movements with the help of the gramophone, are important features of the treatment carried out for the stammerers. On the whole the parents have co-operated quite well. Difficulty was experienced with the attendance of some of the Surrey children owing to the distances which they had to come.

As in previous years every effort has been made to obtain the co-operation of the parents in overcoming these defects of speech. It is essential that the principles laid down in the Speech Clinic should, as far as possible, be carried out in the homes.

8. INFECTIOUS DISEASES.

The means adopted to prevent the spread of infectious diseases among school children are:—

- (a) The exclusion of children suffering from infectious diseases or coming from infected houses;
- (b) Closure of schools or departments;
- (c) Disinfection of schools.

(a) To-day, the first procedure is the one which is almost entirely relied upon. As soon as a case of infectious disease is notified a visit is paid to the house by one of the members of the sanitary staff. Home contacts are excluded from school until the end of the necessary quarantine period. Notices to this effect are sent out from the Public Health Department to the head teachers concerned and also to the School Attendance Department.

(b) School closure is rarely resorted to to-day and on no occasion was it found necessary to recommend this during the year under review.

When the attendance, however, falls below 60%, certificates may be supplied by the school medical officer to that effect as outlined in Paragraph 15 (ii) of Administrative Memorandum No. 51, 1927. No certificates in accordance with this Rule were issued during 1938.

(c) During the holidays the disinfection of each school was carried out as in previous years. Disinfection of classrooms was also carried out periodically as the necessity arose. Much less reliance is now placed in the efficacy of this procedure for the control of infectious diseases.

Frequent visits were paid to the schools after children had been removed to the Infectious Diseases Hospital suffering from diphtheria or scarlet fever. Class contacts were carefully examined and in a number of instances swabs were taken for bacteriological examination. Carriers detected in this manner are promptly excluded. Visits were also paid to the schools by the school nurses when the weekly returns from the head teachers showed that any of the non-notifiable infectious diseases were prevalent. Suspicious cases are then excluded and every effort is made to space out the children in the classrooms to the maximum extent with a view to obviating, as far as possible, droplet infection.

Under Article 22 of the Education Code it was found necessary to exclude one hundred and forty-three children from school for the following reasons:—

Suffering from Scarlet Fever	31
Scarlet Fever contacts	49
Suffering from Diphtheria	23
Diphtheria contacts	40
Total	<u>143</u>

Further particulars of these cases are given in the Report of the Medical Officer of Health.

No case of smallpox occurred amongst school children in Wimbledon during the year.

Valuable information is obtained from the weekly returns of absences due to infectious diseases furnished by the head teachers. The numbers of cases of non-notifiable infectious diseases reported from the schools during 1938 were as follows:—

Measles	...	...	...	...	...	...	346
German Measles	...	...	...	...	...	...	75
Whooping Cough	...	...	...	...	...	...	17
Mumps	...	...	...	...	...	...	98
Chicken-pox	...	...	...	...	...	...	104

Measles, chicken-pox and mumps were the principal infectious diseases noted amongst the school children during 1938.

Measles was prevalent during the early part of the year. The schools chiefly affected were Wimbledon Park, Pelham Infants', Dundonald Girls' and Infants', All Saints Girls' and Infants', Cottenham Park Infants' and Queen's Road Infants'. On the whole, the disease was not of a severe type but the attendances, especially in the Infants' Departments, suffered severely. In no case, however, did the attendance fall below 60% for this reason. Eight children of school age suffering from measles and one suffering from rubella were admitted to the Infectious Diseases Hospital for treatment, as satisfactory isolation could not be carried out at home. All these children made satisfactory progress.

In addition to measles, chicken-pox, mumps and rubella were also more prevalent during 1938.

In accordance with Article 20(b) of the Education Code, one hundred and fifty children were excluded from school during 1938 for the following conditions:—

Ringworm (skin)	...	...	...	...	...	2
Conjunctivitis	...	...	...	...	...	2
Scabies	...	...	...	...	...	31
Impetigo	...	...	...	...	...	7
Mumps	...	...	...	...	...	48
Chicken-pox	...	...	...	...	...	10
Measles	...	...	...	...	...	2
German Measles	...	...	...	...	...	15

Whooping Cough	...	...	...	...	12
Other contagious or infectious conditions	...				21
					—
			Total	...	150
					—

9. OPEN-AIR EDUCATION.

There are no Day Open-Air Schools nor Residential Open-Air Schools in Wimbledon. Where circumstances permit, in the summer months some of the classes in the schools are conducted in the open air.

Another holiday camp was arranged during the year by the Wimbledon Rotary Club. Twenty-two boys from various elementary schools in the district were selected and sent away to Swanage for two weeks during August. The children were medically examined at the Health Centre before leaving Wimbledon. Most of them came from poor homes and it is doubtful whether the parents could have provided them with a holiday at the seaside had it not been for the activities of the Rotary Club. These holidays are greatly appreciated by the boys, who invariably benefit considerably in health as the result.

Arrangements were made through the School Journey Association for a party of sixty-four girls of twelve and thirteen years of age from the Girls' Central School to visit Sandown, Isle of Wight, for a period of two weeks during May. All these children were medically examined at the Health Centre before leaving Wimbledon. They were accompanied by three members of the staff and an additional helper. The party had excellent accommodation at a large hotel on the sea front. Some of the girls had bedrooms to themselves and others shared in twos or threes. All the bedrooms were supplied with hot and cold water and baths were arranged so that each girl had at least four hot baths in the fortnight. The food was good, plain, and sufficient. Extra fruit was given daily. Arrangements were made for all the girls to receive milk twice daily under the scheme of the National Milk Publicity Council.

Ample time was allowed for physical exercises, team games, and sports on the beach. Whole day excursions were arranged, so that the children visited most of the interesting places on the Island. Many pleasant walks inland and on the surrounding cliffs were undertaken. The head teacher reports

that at first it was noticeable that the girls were easily tired. This effect passed off during the course of the fortnight's holiday and really long walks were then greatly enjoyed. No casualties were reported and the children returned to Wimbledon with a marked improvement in their physique and general well-being.

10. PHYSICAL TRAINING.

Physical exercises and organised games are carried out in all the schools, the instruction being given by the class teachers on the lines laid down in the syllabus issued by the Board of Education.

Arrangements have been made with the Surrey Education Committee for a man and a woman physical training organiser, employed by that Committee, to be available one day each month to visit the elementary schools in the Borough and advise as to physical training instruction.

Two teachers attended, for a period of one month, a physical training course arranged by the Surrey Education Committee.

A great deal of physical training apparatus has been supplied to the schools in order that the syllabus of the Board of Education may be carried out.

Swimming instruction is given at the Wimbledon Corporation Baths to children over ten years of age. The children attend once a week and the instruction is given by the class teachers. The cost of admission to the Baths is three halfpence for each child and this is paid by the Education Committee. Under this arrangement 37,000 attendances were made. This represents a large increase as compared with 1937 when the attendances numbered 22,487. Where swimming is considered inadvisable for a child on medical grounds, such as disease of the ears or heart, the head teacher is notified accordingly by the School Medical Department.

11. PROVISION OF MEALS.

Meals are provided mid-day by the Education Committee for the children attending the Special School. Particulars of the meals supplied are given under the section of this report dealing with the Special School.

No meals were provided during the year for children attending the other schools. The Education Committee, however, supplied two hundred and fifty-seven children suffering

from subnormal nutrition with milk in school, an increase of one hundred and fifty-five on the figure for the previous year. These cases were selected by the school medical inspector during the periodical surveys which were held. These grants of free milk are made after the financial circumstances of the family have been investigated by a Sub-Committee specially appointed for the purpose.

The milk is supplied during the morning and afternoon sessions for a period of six months. The children are weighed at the commencement and then re-inspected and re-weighed at the end of this period. The Committee interpret their scale on wide and generous lines. In some cases cod liver oil and malt is also supplied free in school when recommended on medical grounds.

Arrangements are available in all the schools for scholars to receive milk daily, at the cost of the parents, under the scheme of the National Milk Publicity Council. Only pasteurised milk is supplied and this is contained in sealed bottles holding one-third of a pint. The cost to the parents is one half-penny.

It is still a matter of regret that many more parents do not avail themselves of the opportunity of providing their children with milk in school every day. It has been conclusively demonstrated that by so doing the children benefit greatly in health. In a very few cases, it is true, children are not able to take this milk. There appears, however, to be no adequate reason for the fact that only about fifty or sixty per cent. of the children in Wimbledon are receiving milk in school regularly under the scheme.

12. CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS, AND VOLUNTARY BODIES.

Co-operation of Parents. Parents are invited to be present at the school during the routine inspection of their children. Out of 1,764 children examined at the routine inspections, one thousand and thirty-two, or 58.50% were accompanied by one or other parent.

The percentage of parents attending these inspections in the schools is lower than that desired but is not due to any real lack of interest on the part of the parents in the health of their children. Many of the mothers go out to work and are consequently unable to spare the necessary time to attend.

There is a great advantage in obtaining the co-operation of the parents as it enables the school medical inspector to give detailed advice in the case of children found to be suffering from defects.

A large number of parents also attended at the special examinations at the Health Centre.

Co-operation of Teachers. I have again to acknowledge the valuable assistance which the teachers have rendered to the School Medical Department during the year. They have facilitated the medical inspection work in the schools, and given every assistance to the school nurses during the routine cleansing examinations, and when following up cases found to be defective.

They have also co-operated, as in the past, by bringing to the notice of the school medical staff those children who, in their opinion, are likely to benefit by receiving free milk in school, and by arranging for their attendance at the Health Centre.

Co-operation of School Attendance Officers. A close co-operation has been maintained between the School Medical Department and the school attendance officers.

As in previous years a considerable number of children have been medically examined at the request of the Attendance Department on account of prolonged absence from school through ill-health.

As the result of these examinations many children were returned to school considerably earlier than would otherwise have been the case.

Co-operation of Voluntary Bodies. The Invalid Children's Aid Association is the principal voluntary organisation dealing with school children and children below school age in Wimbledon. As in previous years it continued to render invaluable service during 1938. Convalescent treatment was provided for seventy-five Wimbledon school children during the year under review, twenty of these having been referred from the School Medical Department. These were chiefly cases of debility following pneumonia, bronchitis, rheumatism and chorea. There were also a number of children recommended for convalescence following measles.

Education is nearly always provided for the children whilst they are away.

In addition, the Invalid Children's Aid Association made the necessary arrangements for the admission of five children to special hospital schools, the Education Committee undertaking the cost of maintenance and treatment.

Surgical appliances and special boots were provided in ten cases. Eight children who were being sent to convalescent homes were supplied with clothes. In one case, extra nourishment at home was provided at the request of the School Medical Department.

The approximate number of children who were on their books, and being visited, in 1938, was four hundred and twenty. It is pleasant to record that in every case in which the assistance of the Invalid Children's Aid Association was requested by the School Medical Department it was most readily and freely given. The Education Committee makes a contribution of ten guineas per annum to the Invalid Children's Aid Association.

The local representative of the National Society for the Prevention of Cruelty to Children has always been ready to co-operate in every way. In a few cases, difficulty is experienced from time to time in persuading parents of the necessity of providing their children with suitable spectacles. In such instances the services of the National Society for the Prevention of Cruelty to Children have been found most helpful. Other cases in which their officer was asked to interest himself were those in which the home conditions and care were found to be unsatisfactory and repeated visits by the nursing staff had failed to effect the desired improvement.

A contribution of two guineas is made annually to the National Society for the Prevention of Cruelty to Children.

13. BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

A special register is kept in the School Medical Department of all defective children. Information regarding new cases is furnished by the head teachers, school attendance officers, and school nurse-health visitors. Sometimes such cases are referred by family doctors.

The school medical inspector devotes on an average two sessions per week to visiting the schools for the purpose of ascertaining and examining suspected cases of mental deficiency. Communications are also addressed periodically to

the head teachers of the schools asking them to forward lists of all children considered to be defective within the meaning of Part V of the Education Act, 1921. As the result of these measures one hundred and fifty-nine such special examinations or re-examinations were carried out in 1938.

Children requiring education in Myope or Sight-saving Schools are referred by the oculist from the Refraction Clinic, whilst physically defective children in need of education in Special Schools are brought forward from the Orthopædic Clinic.

Every six months head teachers are asked to forward lists of scholars attending their schools who are suffering from speech defects or defects of hearing. The children with speech defects are then examined at the Health Centre by the assistant medical officer and referred to the speech training teacher. Arrangements are then made for their admission either to the classes for stammering children or to the classes for those suffering from defective speech.

Children with impaired hearing are specially examined by the ear, nose, and throat consultant in charge of the Aural Clinic who decides as to the advisability of their admission to schools for the deaf or partially deaf. Where children with impaired hearing are already attending the out-patient departments of hospitals in London, special reports are requested from the surgeons under whose care they have been and in every case their assistance is most readily forthcoming.

Lastly, the school nurses visit the schools after each of the three principal holidays of the year to carry out their cleansing surveys. At such times inquiries are made from the head teachers and class teachers with regard to any defective children who may have been recently admitted to the schools.

Blind and Partially Sighted Children. There was only one blind child on the register at the end of 1938. This boy was in attendance at the Linden Lodge (L.C.C.) School for the Blind, Wandsworth Common. He is a child suffering from optic atrophy following a fracture of the skull.

One boy and two girls were in attendance at the Stonhouse School for the Partially Sighted (L.C.C.) at Clapham, and one boy was at the Kingwood Road (L.C.C.) School for the Partially Sighted, Fulham. These were all cases of high myopia.

Deaf and Partially Deaf Children. One deaf girl was in attendance at the Royal School for the Deaf and Dumb, at Margate. There were, in addition, two deaf girls attending Special Schools during 1938, one girl being at the Oak Lodge (L.C.C.) School for the Deaf, Clapham Common, and one girl at the Ackmar Road (L.C.C.) Deaf School, Fulham.

Epileptic Children. One girl, suffering from severe epilepsy requiring institutional treatment, was at the Chalfont Colony, Bucks. One boy suffering from severe epilepsy was discharged from the Maghull Home, Liverpool, in April, having attained the age of sixteen years.

PHYSICALLY DEFECTIVE CHILDREN.

(a) **Tuberculous Children.** The Surrey County Council is the Authority responsible for the treatment of tuberculosis in Wimbledon. One boy suffering from pulmonary tuberculosis was admitted to the Highwood Sanatorium, Brentwood, in 1938. One girl and two boys suffering from non-pulmonary tuberculosis were also at certified Special Schools at the end of the year. These included one girl with tuberculous glands of the neck and one boy with abdominal tuberculosis. They were both sent to the Royal Sea Bathing Hospital, Margate. A boy with a tuberculous hip was at the Heatherwood Hospital, Ascot. A further boy, who had been under treatment at this hospital for tuberculous disease of the knee joint, was discharged in September and was at no school or institution at the end of the year.

There were four boys with arrested non-pulmonary tuberculosis attending public elementary schools in Wimbledon.

(b) **Delicate Children.** Two delicate children (one boy and one girl) were at the undermentioned Certified Special Schools at the end of the year:—

White Oak Hospital, Swanley	1
Hamilton House, Seaford	1

Four other delicate children were discharged from similar institutions during the course of 1938 and subsequently attended ordinary elementary schools.

Twenty-nine delicate children attending public elementary schools were under the observation of the school medical staff. In many instances these were home contacts of notified cases of pulmonary tuberculosis. Other children were suffering

from recurring attacks of asthma, whilst a number showed evidence of malnutrition which justified their being classified in Group D.

(c) **Crippled Children.** At the end of December, there were four crippled children at Certified Special Schools, seven attending public elementary schools, and one at no school or institution.

The four cases at Certified Special Schools were at the following institutions:—

St. Nicholas' and St. Martin's Orthopædic Hospital and Special School, Pyrford ...	1
Frogmore Road (L.C.C.) P.D. School ...	1
Heritage Craft Schools, Chailey	2

Two children who had been undergoing orthopædic treatment were discharged during 1938, one from the St. Nicholas' and St. Martin's Orthopædic Hospital and Special School, Pyrford, and one from St. Vincent's Orthopædic Hospital, Pinner.

Six of the seven crippled children in the public elementary schools attended the Orthopædic Clinic and were periodically examined by the surgeon.

In 1935, arrangements were made, with the approval of the Board of Education, for a physically defective child suffering from a large meningocele to be educated in his own home by a teacher provided by the Education Committee. This boy, on account of his physical condition, is unsuitable for attendance at either a day or residential special school. During 1938 his general condition showed improvement and it was found that he was deriving considerable benefit from the education he is receiving.

(d) **Children with Heart Disease.** At the end of 1938, two boys, one with rheumatic heart disease and the other with a severe congenital heart, were at the following institutions:—

Frogmore Road (L.C.C.) Special School ...	1
St. John's Open Air School, Woodford Bridge	1

Two other children, suffering from rheumatism or chorea with cardiac complications, were discharged from Certified Special Schools during the course of the year. One of these was discharged from the Children's Heart Home, Lancing, and the other from the Children's Heart Home, West

Wickham. A third child with severe rheumatic heart disease died whilst under treatment at the Children's Heart Home, West Wickham.

Fourteen children with heart disease were in attendance at public elementary schools at the end of December. They were kept under observation periodically and the school curriculum was modified in a manner suitable to their requirements.

SPECIAL SCHOOL.

The Education Committee has its own Special School with accommodation for fifty children.

At the end of 1938 there were twenty-seven children (thirteen boys and fourteen girls) in attendance.

The number of children attending the Special School at the end of 1937 was thirty.

Four boys and one girl were admitted during 1938.

Four boys and four girls left the school during the year. Of these, three boys left because their parents removed from the district, two girls attained the age of sixteen years, and one boy and one girl had made such progress as to justify their leaving before the age of sixteen. One girl left to attend a Convent School. In addition to the foregoing, one girl attending the school died.

Every child attending the school is examined once a year in addition to the routine medical inspections. The medical officer visited the school, on an average, once a week for this purpose.

Ten children were examined in the routine way in the following prescribed groups:—

Second Age Group	...	...	...	...	3
Third Age Group	...	...	...	...	7

The following defects were found:—

		Requiring Treatment.	Requiring Observation.
Orthopaedic Defects	...	1	—
Defective Vision	...	—	3

In addition there were sixteen special inspections and thirty-three re-inspections at the Health Centre of children attending this school. Eight children were referred from the special inspections for treatment at the Minor Ailment Clinic, with the undermentioned defects:—

Psoriasis	...	...	...	...	...	2
Defective hearing	...	...	...	...	...	1
Otorrhœa	...	...	...	...	...	1
Other conditions	...	...	...	...	...	3

Three children were re-tested by the oculist at the Refraction Clinic. New spectacles were prescribed in two instances.

One new case attended the Orthopædic Clinic. Two other children, suffering from a deformity of the chest and spastic diplegia respectively, who had previously been examined by the surgeon, were kept under observation.

A child suffering from otorrhœa was seen at the Aural Clinic and referred by the surgeon for treatment at the Health Centre. A second child was referred for operative treatment on account of tonsils and adenoids.

At the routine dental inspections twenty-nine children were examined. Twenty-three of these were found to require treatment. Seven of the children were actually treated and made sixteen attendances at the Dental Clinic. Seven temporary teeth and six permanent teeth were extracted. Four general anæsthetics were administered. Four permanent teeth were filled and four scalings and nine other operations were carried out.

The school nurse paid twelve visits to the school. Two hundred and forty-nine inspections were carried out. It was not found necessary to exclude any child during these visits.

A cooked mid-day meal of excellent quality is served at the school. On an average, eighteen children stayed for this meal for which a charge of threepence is made. In six cases it was found necessary to forego the amount owing to the financial circumstances of the parents. One child was given cod liver oil and malt in school free of charge. Fifteen of the children received milk in school daily under the scheme of the National Milk Publicity Council.

In addition to the routine class teaching, special attention is paid to handicraft instruction. Carpentry, gardening, cookery, and laundry-work are taught.

A list is kept of all retarded school children in the district. These children are examined by the school medical

inspector on an average every six months in order to ascertain their suitability for transference to the Special School. The head teachers are also requested twice a year to forward lists of all retarded children in attendance at their schools.

Children who leave the Special School on attaining the age of sixteen and who are in need of supervision and care are notified to the Local Authority under the Act of 1913, as amended. In certain cases, where the school report is satisfactory, the home influence good, and the prospect of employment favourable, the names are passed on instead to the Committee of the Guild of Social Welfare which acts in Wimbledon as the Local Committee of the Surrey Voluntary Association for Mental and Physical Welfare.

One girl who left on attaining the age of sixteen years was notified as in need of supervision. A second girl, who was not suitable for admission to the school was notified to the Local Authority under Article 2 of the Mental Deficiency (Notification of Children) Regulations, 1928.

Children leaving the Special School after attaining the age of sixteen years in nearly all cases succeed in obtaining employment. The boys take up work in the local factories, or on milk and paper rounds, or acting as carriers for local business houses. The girls are generally employed in factories, laundries, in indoor service or doing daily work.

14. FULL-TIME COURSES OF HIGHER EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

The Surrey County Council is the Authority responsible for Higher Education for blind, deaf, defective, and epileptic children. Recommendations are sent to the Surrey County Council by the Wimbledon Education Authority, in suitable cases, where Higher Education for such defective children is considered desirable.

15. NURSERY SCHOOLS.

No Nursery Schools have been established in Wimbledon. The question of providing Nursery Classes was considered by the Education Committee in 1937. The Committee decided to establish a Nursery Class in the Dundonald Road Junior Girls' and Infants' School and this was opened on 21st June, 1938. This class has accommodation for forty children between three

and five years of age. The staff consists of an assistant teacher and a helper. The classroom is light and airy, and leads out to a part of the playground which has been specially set aside for these children. During the summer months they can be taken straight out into the public recreation ground adjoining the school. The ablution room has been provided with eight wash-hand basins and there are also facilities for any of the children to receive a warm bath. Each child is provided with a separate numbered tooth brush, mug, face cloth, and towel. Adequate lavatory accommodation has also been installed. The morning session is from 9 to 12 noon, and the afternoon session is from 2 to 4 o'clock. During the mornings each child is supplied with hot milk and biscuits. In the afternoon the children have a rest period, during which they sleep on special stretcher beds which have been provided. Suitable apparatus for play and games is available. The full accommodation of the class is utilised and there is a waiting list of children for admission. The school nurse visits the class, on an average, once a fortnight. Routine medical and dental inspections are also carried out. During 1938 thirty-nine children were examined as routines. The following table shows the result of these inspections:—

Nature of Defect.	Requiring Treatment.	Requiring Observation.
Malnutrition	1	—
Enlarged Tonsils and Adenoids	1	1
Enlarged Tonsils	—	3
Bronchitis	—	1
Rickets	—	1
Dental Defects	5	—
Other Defects	—	1
Total ...	7	7

In addition, the Municipal Day Nursery has accommodation for thirty toddlers under five years of age. Particulars of the medical and dental inspection of these children are given in the Maternity and Child Welfare Section of the Medical Officer of Health's Report. The medical record cards of these children follow them when they enter the elementary schools on attaining the age of five years.

16. SECONDARY SCHOOLS AND OTHER INSTITUTIONS OF HIGHER EDUCATION.

The medical inspection of Secondary Schools in Wimbledon is under the control of the Surrey County Education Authority.

17. PARENTS' PAYMENTS.

The parents of children attending public elementary schools are required to contribute towards the cost of treatment in accordance with approved scales adopted by the Education Committee. Contributions from parents are required in respect of treatment given at the Minor Ailment and Dental Clinics, operative treatment for tonsils and adenoids, and hospital treatment under the orthopædic scheme. No charge is made for the examination of children at the Refraction Clinic but the parents are required to pay the cost of the spectacles which are obtained for their children at a contract price. At the beginning of 1938 the opticians supplying the spectacles under the Education Committee's scheme were approached, and reduced appreciably the prices in their contract. In exceptional cases of financial difficulty the Committee, after considering all the circumstances, provide the spectacles free of charge.

Where children are receiving residential treatment for other conditions under arrangements made by the Education Committee, the financial circumstances of the parents are considered in each case and their contributions assessed accordingly. These latter cases include children suffering from rheumatism and heart disease, delicate children, etc.

18. HEALTH EDUCATION.

The National Health Campaign, inaugurated in October, 1937, was continued until the end of March. Meetings were held on 20th January, 17th February, and 10th March, 1938. The mornings were devoted to displays of films dealing with health matters in one of the local cinemas. Senior scholars from the elementary schools were present and were accompanied by teachers. In addition, parties of senior scholars gave physical training demonstrations at one of the evening meetings in the Town Hall.

The theme of the February health day dealt solely with the School Health Services.

Posters and leaflets dealing with each month's subject were supplied to all the schools for display and distribution.

The National Milk Publicity Council arranged for a number of lectures to be given in the schools during 1938, pointing out the benefit to health derived from an increased consumption of milk.

19. SPECIAL INQUIRIES.

No special inquiries were undertaken by the School Medical Department during 1938.

20. MISCELLANEOUS.

Every candidate appointed as a teacher under the Education Committee is required, as a condition of the appointment, to pass a satisfactory medical examination. Nine such examinations were carried out by the school medical staff during the year.

Employment of Children and Young Persons. The Bye-laws made in 1935 under the Children and Young Persons Act, 1933, make it obligatory for every school child over the age of twelve years seeking employment to be medically examined by the school medical officer before an employment card is issued.

Employment in or in connection with any racing course or track or other place where any like sport is carried on, or as an assistant in any business conducted therein, is prohibited.

One hundred and ninety-six employment cards were issued to school children.

One hundred and forty-six children were medically examined for employment during the year. With the exception of one boy all were granted medical certificates of fitness for delivering newspapers and for work in connection with milk rounds. Employment cards were issued to a number of children who lived outside the district but were employed in the Borough. In these cases medical certificates were issued by the School Medical Departments of the Authorities of the areas concerned.

Legal proceedings were instituted against thirteen employers for twenty-four contraventions of the Bye-laws. In six of the twenty-four cases the summonses were dismissed, after the cases had been proved, on the payment of costs.

Another case was dismissed with a caution, and in the remaining cases fines, ranging from 2/6d. to £1, and costs were imposed. Warnings were issued to thirteen employers. Full particulars of the observations made are given below:—

Number of boys questioned	533
Number of boys warned	3
Number of employers warned	13
Number of cases reported to Education Authority	93
Number of employers against whom legal proceedings were instituted	13

During the routine visits of the nurses to the schools after the three principal holidays, special inquiries are made with regard to the number of children in the senior schools who are employed out of school hours. Full particulars of these cases are forwarded to the Education Department in order that they may be checked off with the employment cards that have been issued.

The Bye-laws made under the Education Act, 1921, with regard to street trading by young persons between fourteen and sixteen years of age have now been repealed, and new Bye-laws relating to this matter have been made under the Children and Young Persons Act, 1933. The Surrey County Council is the Authority for the administration of this part of the Act. The duties of supervising these Bye-laws concerning street trading in Wimbledon are undertaken by the Wimbledon Corporation on behalf of the Surrey County Council. The necessary work of supervision is carried out by the officers of the Public Health Department.

I desire to take this opportunity of again expressing my appreciation of the co-operation which I have received from the members of the staff during the year under review.

I am,

Your obedient servant,

HAROLD ELLIS.

Wimbledon Education Authority.

MEDICAL INSPECTION RETURNS.

Year ended 31st December, 1938.

TABLE I.

**MEDICAL INSPECTIONS OF CHILDREN ATTENDING
PUBLIC ELEMENTARY SCHOOLS.**

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups:—

Entrants	...	...	...	...	533
Second Age Group	...	...	...	...	533
Third Age Group	...	...	...	...	450
				Total	...

1,516

Number of other Routine Inspections 248

Grand Total 1,764

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	3,187
Number of Re-inspections	...	...	7,822
		Total	...

11,009

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

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

NOTES.—(1) Children found at Routine Medical Inspection to require treatment for a defect are not excluded from this return by reason of the fact that they are already under treatment for that defect.
 (2) No individual child is counted more than once in any column of this Table; for example, a child suffering from defective vision and from adenoids appears once in Column 2, once in Column 3 and *once only* in Column 4. Similarly a child suffering from two defects other than defective vision appears once only in Column 3 and once in Column 4.

Group.	For defective vision(excluding Squint)	For all other conditions recorded in Table II A.	Total.
(1)	(2)	(3)	(4)
ENTRANTS	1	83	84
SECOND AGE GROUP	25	55	72
THIRD AGE GROUP	20	34	51
TOTAL (PRESCRIBED GROUPS)	46	172	207
OTHER ROUTINE INSPECTIONS	11	19	30
GRAND TOTAL	57	191	237

TABLE II

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

DEFECT OR DISEASE	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.		
	No. of Defects.		No. of Defects.		
	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	
(1)	(2)	(3)	(4)	(5)	
Skin	(1) Ringworm—Scalp ...	...	...	...	...
	(2) " Body ...	...	...	15	...
	(3) Scabies ...	1	...	30	...
	(4) Impetigo ...	3	...	114	...
	(5) Other Diseases (Non-Tuberculous) ...	3	...	201	...
	TOTAL (Heads 1 to 5)	7	...	360	...
Eye	(6) Blepharitis ...	12	1	44	...
	(7) Conjunctivitis ...	...	...	25	...
	(8) Keratitis ...	...	...	1	...
	(9) Corneal Opacities ...	...	...	...	...
	(10) Other Conditions (excluding Defective Vision and Squint)	5	...	127	4
	TOTAL (Heads 6 to 10)	17	1	197	4
Ear	(11) Defective Vision (excluding Squint) ...	57	94	55	3
	(12) Squint ...	8	14	6	...
	(13) Defective Hearing ...	6	5	13	...
	(14) Otitis Media ...	6	2	59	...
	(15) Other Ear Diseases ...	5	...	77	...
Nose and Throat	(16) Chronic Tonsillitis only ...	29	52	80	...
	(17) Adenoids only ...	1	3	...	...
	(18) Chronic Tonsillitis and Adenoids ...	16	5	21	1
	(19) Other Conditions ...	13	3	121	5

TABLE II.—continued.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)	(2)	(3)	(4)	(5)
(20) Enlarged Cervical Glands (Non-Tuberculous)	7	9	16	...
(21) Defective Speech	1	13	11	9
Heart and Circulation { Heart Disease :				
(22) Organic	10	1	8	...
(23) Functional	2	8	2	...
(24) Anæmia	2	1	1	...
Lungs { (25) Bronchitis	11	7	37	...
(26) Other Non-Tuberculous Diseases	11	2	27	...
Tuberculosis { Pulmonary :—	(27) Definite ... ..	...	...	...
	(28) Suspected ... ..	...	...	...
	Non-Pulmonary :			
	(29) Glands ... ..	...	...	...
	(30) Bones and Joints	1	...	...
	(31) Skin ... ..	...	...	...
	(32) Other Forms ... ..	..	1	...
TOTAL (Heads 29 to 32)	1	1	...	..
Nervous System { (33) Epilepsy ... ..	...	1	...	...
	(34) Chorea	1	1	3
	(35) Other Conditions	4	3	3
Deformities { (36) Rickets	3	8	1	..
	(37) Spinal Curvature ... ..	...	3	2
	(38) Other Forms	21	11	25
(39) Other Defects and Diseases (excluding Defects of Nutrition, Uncleanliness and Dental Diseases)	33	13	755	116
Total number of defects	272	261	1875	139

TABLE II. - continued.

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

AGE-GROUPS	No. of Children inspected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	533	114	21·39	396	74·30	21	3·94	2	0·38
Second Age group ...	533	102	19·14	409	76·74	22	4·13	...	...
Third Age-group ...	450	88	19·56	355	78·88	7	1·56	...	...
Other Routine Inspections ...	248	47	18·95	198	79·84	3	1·21	...	...
Total ...	1764	351	19·89	1358	76·98	53	3·00	2	0·11

TABLE III

Return of all Exceptional Children in the Area

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
1	1

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...	5	2	...	...	7

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
3	3

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...

TABLE III—continued.

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
26	2	...	...	28

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
1	1

PHYSICALLY DEFECTIVE CHILDREN.

A.—TUBERCULOUS CHILDREN.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.
(Including pleura and intra-thoracic glands).

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
1	1

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

(This category includes tuberculosis of all sites other than those shown in (I) above).

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
3	4	...	1	8

TABLE III—continued

B.—DELICATE CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	29	1	1	33

C.—CRIPPLED CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
4	7	...	1	12

D.—CHILDREN WITH HEART DISEASE.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	14	...	...	16

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Children suffering from any combination of the following types of defect:—

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

Combina- tion of Defect.	At Certified Special Schools.	At Public Element- ary Schools.	At other Institu- tions.	At no School or Institu- tion.	Total.
Crippled and Mentally Defective	1	...	...	...	1

TABLE IV.

TREATMENT TABLES.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Table VI.).

DISEASE OR DEFECT.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme	Otherwise.	Total.
(1)	(2)	(3)	(4)
<i>Skin—</i>			
Ringworm—Scalp.			
(i) X-Ray Treatment ...	...	...	...
(ii) Other ..	...	...	...
Ringworm Body ...	15	...	15
Scabies	30	...	30
Impetigo	115	...	115
Other skin disease ...	194	10	204
<i>Minor Eye Defects—</i> ...	103	6	109
(External and other, but excluding cases falling in Group II.)			
<i>Minor Ear Defects</i>	120	6	126
<i>Miscellaneous</i>			
(e.g., minor injuries, bruises, sores, chilblains, etc.) ..	400	46	446
Total ...	977	68	1,045

TABLE IV.—*continued.*

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

	Number of Defects dealt with.		
	Under the Authority's Scheme	Otherwise.	Total.
ERRORS OF REFRACTION (including squint)	239	48	287
Other defect or disease of the eyes (excluding those recorded in Group I)	25	19	44
Total	264	67	331
	Under the Authority's Scheme	Otherwise.	Total.
No. of Children for whom spectacles were			
(a) Prescribed	197	35	232
(b) Obtained	192	35	227

TABLE IV.—continued.

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

NUMBER OF DEFECTS.													
Received Operative Treatment.											Received other forms of Treatment.	Total number Treated.	
Under the Authority's Scheme, in Clinic or Hospital.				By Private Practitioner or Hospital, apart from the Authority's Scheme.				Total.					
(1)				(2)				(3)			(4)	(5)	
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
1	1	77	...	5	...	1	...	6	1	78	...	174	259

(i) Tonsils only.

(ii) Adenoids only.

(iii) Tonsils and Adenoids.

(iv) Other defects of the nose and throat.

TABLE IV.—*continued.*
 GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS

	Under the Authority's Scheme (1)			Otherwise (2)			Total Number Treated
	Residential treatment with education (i)	Residential treatment without education (ii)	Non-residential treatment at an orthopedic clinic (iii)	Residential treatment with education (i)	Residential treatment without education (ii)	Non-residential treatment at an orthopedic clinic (iii)	
Number of Children Treated	5	2	70	...	...	11	86

TABLE V.—DENTAL INSPECTION AND TREATMENT.

1. Number of children inspected by the Dentist

a. Routine age-groups*

AGE	5	6	7	8	9	10	11	12	13	14	15*	16*	TOTAL
Number	171	406	434	514	440	414	456	468	402	282	85	16	4088

* Central School

b. Specials 606

c. TOTAL (Routine and Specials) 4694

2. Number found to require Treatment 3332

3. Number actually Treated 1867

4. Attendances made by children for treatment 3937

5. Half-days devoted to :—

Inspection	43
Treatment	370
Total	<u>413</u>

7. Extractions :—

Permanent Teeth	659
Temporary Teeth	2632
Total	<u>3291</u>

8. Administrations of general anaesthetics for extractions 813

6 Fillings :—

Permanent Teeth	2382
Temporary Teeth	12
Total	<u>2394</u>

9. Other Operations :—

Permanent Teeth	2268
Temporary Teeth	615
Total	<u>2883</u>

TABLE VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

1. Average number of visits per School made during the year by School Nurses	7
2. Total number of examinations of children in the Schools by School Nurses	12,595
3. Number of <i>individual</i> children found unclean ...	273
4. Number of <i>individual</i> children cleansed under Section 87 (2) and (3) of the Education Act, 1921	35
5. Number of cases in which legal proceedings were taken:—	
(a) Under the Education Act, 1921
(b) Under School Attendance Bye-laws



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