

**[Report of the Medical Officer of Health for West Ham].**

**Contributors**

West Ham (London, England). County Borough.

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County Borough of West Ham.

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**ANNUAL REPORT**  
of the  
**Medical Officer of Health**  
and  
**School Medical Officer**  
for the Year  
1930.

Including his Report as Administrative Officer  
under the Mental Deficiency Acts.

**F. GARLAND COLLINS,**

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



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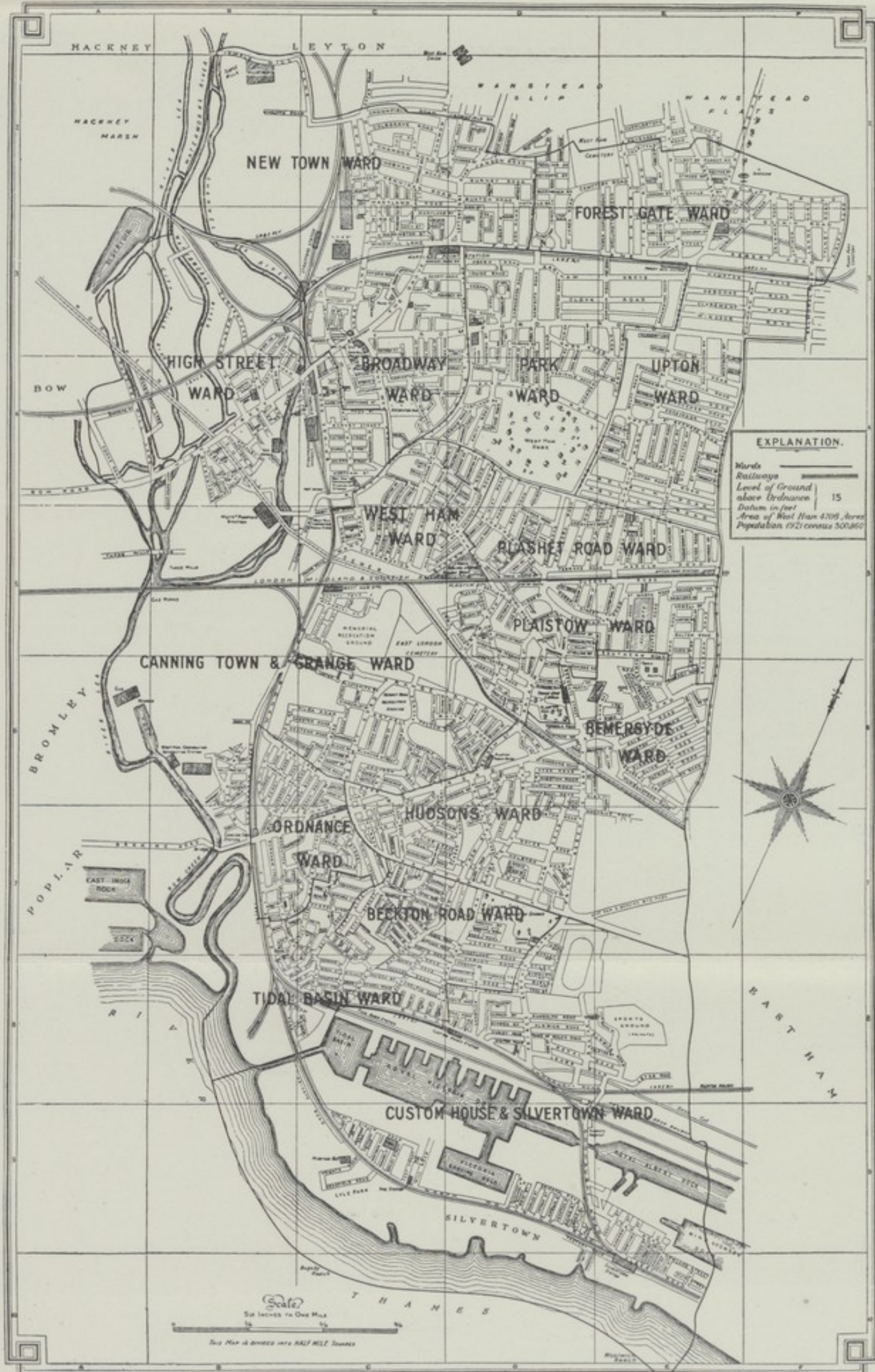
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West Ham in 1855.





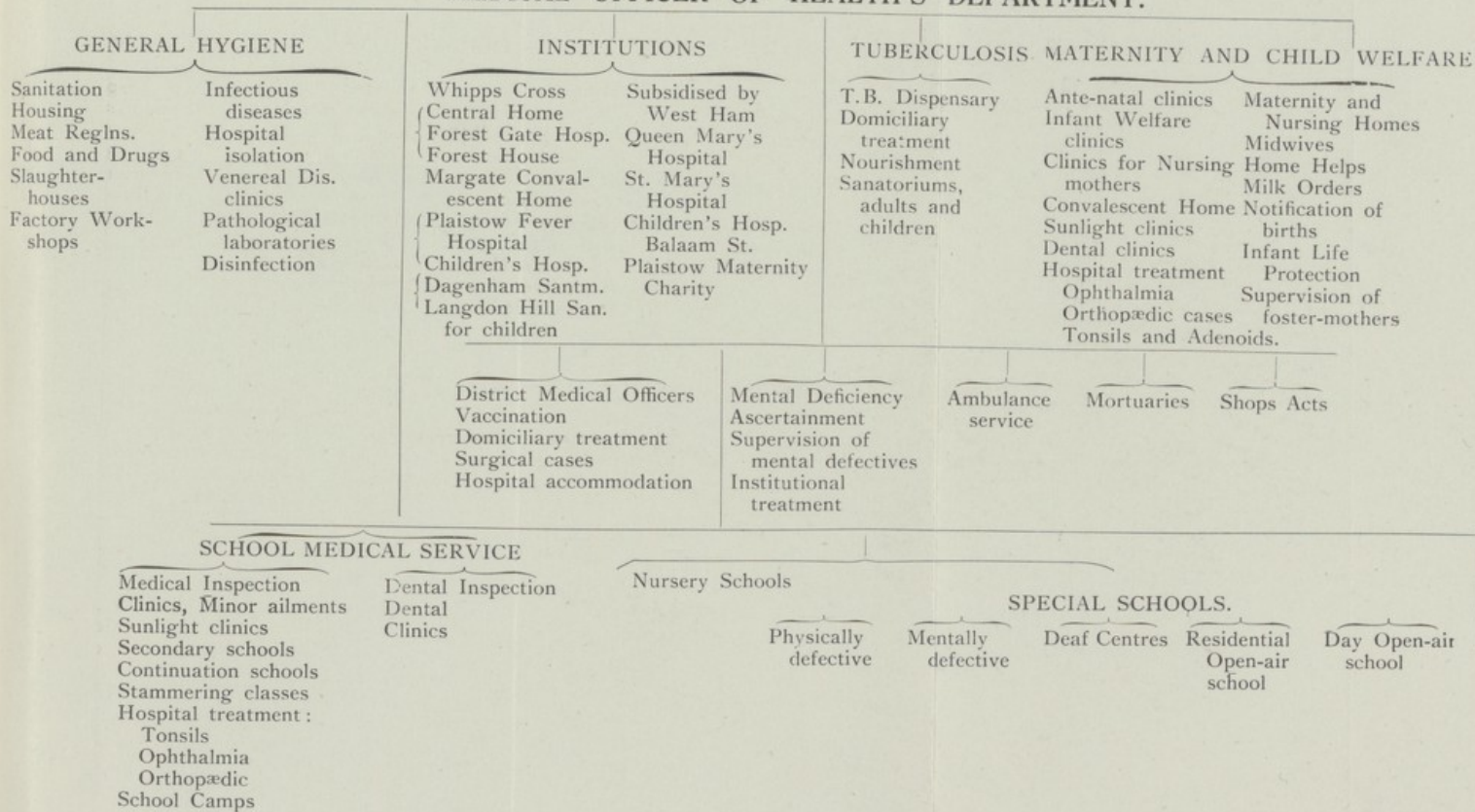


West Ham To-day.





## MEDICAL OFFICER OF HEALTH'S DEPARTMENT.





# *Introduction.*

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## **To The Mayor, Aldermen and Councillors of the County Borough of West Ham.**

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present to you my annual report for the year 1930. In accordance with the instructions issued by the Ministry of Health in circular 1119 dated 18th June, 1930, I have set out the increased services and the new services initiated during the past five years, these may be found in summary on pages 28 and 30.

One of the most outstanding features has been the great increase in the facilities for advice and treatment afforded to infants and mothers.

The work in connection with the transfer of the Poor Law administration to the Council has been intricate and arduous and though much still remains to be accomplished to attain the full fusion of the work with the municipal health services, the task of co-ordination is progressing satisfactorily. I should like, here, to express my appreciation of the valuable help given to me by Mr. Ellis, the Public Assistance Officer.

The great overcrowding of patients at the transferred Central Home necessitated immediate action. The Ministry of Health were approached in the matter and speedily gave sanction for the erection of a hospital to accommodate two hundred patients. This hospital was built on the site of the present Forest Gate Hospital and two hundred patients were transferred from the Central Home to this new building in February last.

A new hospital with accommodation for one hundred and sixteen patients has been erected on the site of the Convalescent Home, Harold Wood, and was opened in October last by Councillor Mrs. Parsons. This hospital is for infectious cases and will enable children suffering from measles or from whooping cough to be admitted to the Fever Hospital for treatment.

The Minister of Health (The Right Honourable Arthur Greenwood, M.P.) opened a new Maternity and Child Welfare Clinic at Grange Road in October, 1930. Since then two further Maternity and Child Welfare Clinics have been opened, one in Forest Street by Councillor Mrs. Thomas and the other in Maybury Road by Councillor Mrs. Gregory.

Two\* schemes of great public health importance, the erection of slipper baths at Plaistow, and the building of large comprehensive public baths at Romford Road, have now received official sanction and will soon be in operation.



The most vigorous attempts completely to stamp out smallpox in the Borough have been unsuccessful. This is little to be wondered at when due regard is given to the fact that the present epidemic is of such an extraordinarily mild type, so mild indeed that people actually suffering from smallpox not infrequently neglect to report any illness, either to their own doctor or to the Local Authority. In one instance a barber continued to ply his trade for a week whilst so suffering and was only discovered by the fact that his child arrived at school with the disease. No person vaccinated within ten years before contact with the disease, contracted it.

The Housing Act, 1930, should have far-reaching effects upon the grossly overcrowded and unhygienic conditions of many of the homes and upon the general sanitation of the district. In any scheme for additional housing accommodation due regard must be paid to the necessity of reserving sufficient open spaces for recreation.

As a frontispiece to this report will be found two maps, the one depicting West Ham as it was in 1855 and the other as it is to-day. These clearly indicate the astounding growth of the Borough and the lack of sufficient space for any further extension of an extensive character. The growth of the population in the areas contingent to this Borough has also been rapid and extensive.

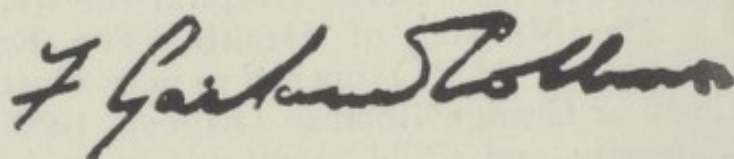
The vital statistics for the year are most satisfactory and serve to show that in spite of many adverse economical and environmental circumstances West Ham is an exceptionally healthy Borough.

Dr. F. B. Skerrett died in September last year after twenty-two years faithful service to this Authority. His loss is deeply felt by his former colleagues and his long experience and sound judgment will be sadly missed.

Dr. Hill began his duties as Deputy Medical Officer of Health in December.

I desire to express grateful thanks to all my staff for their willing and valuable assistance, to welcome all new members of my department and to wish those who have retired under the Superannuation Act during the year a long and happy retirement.

Your obedient Servant,



Town Hall,  
West Ham.

June, 1931.



ANNUAL REPORT  
OF THE  
MEDICAL OFFICER  
OF HEALTH  
FOR THE YEAR 1930.

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Natural and Social Conditions.



THE County Borough of West Ham is situated in the south western portion of the County of Essex. It measures four miles from north to south and some two miles from east to west, and comprises an area of seven and a half square miles. It is bounded on the east by the Borough of East Ham, on the north by the Borough of Leyton and Wanstead U.D.C. and on the west by the administrative County of London, from which it is separated by the River Lea and Bow Creek. The southern boundary is formed by the River Thames from the junction of the River Lee eastward for about  $2\frac{1}{4}$  miles until it joins East Ham.

West Ham is a densely populated industrial town, having 67 people to the acre. It contains numerous large factories which, among other things, manufacture glue, leather, rubber, sugar, glass, soap, fertilisers and chemicals. There are extensive docks within its area, where ships with merchandise from all parts of the world discharge and embark their cargoes. There is a large number of casual labourers near the docks, and the Borough is a dwelling-place for a large number of the populace who work in London and district.



## Summary of General Statistics.

Area (acres) 4,706.

Population—

Census, 1921, 300,860.

Estimated, 1929, 307,600, as per Memorandum from  
Ministry of Health dated 28/1/1931.

Number of inhabited houses (1921). 47,995.

Number of families or separate occupiers (1921), 68,569.

Average Rateable Value—

General Rate, £1,381,901.

Sum represented by a Penny Rate—General District Rate, £5,758.

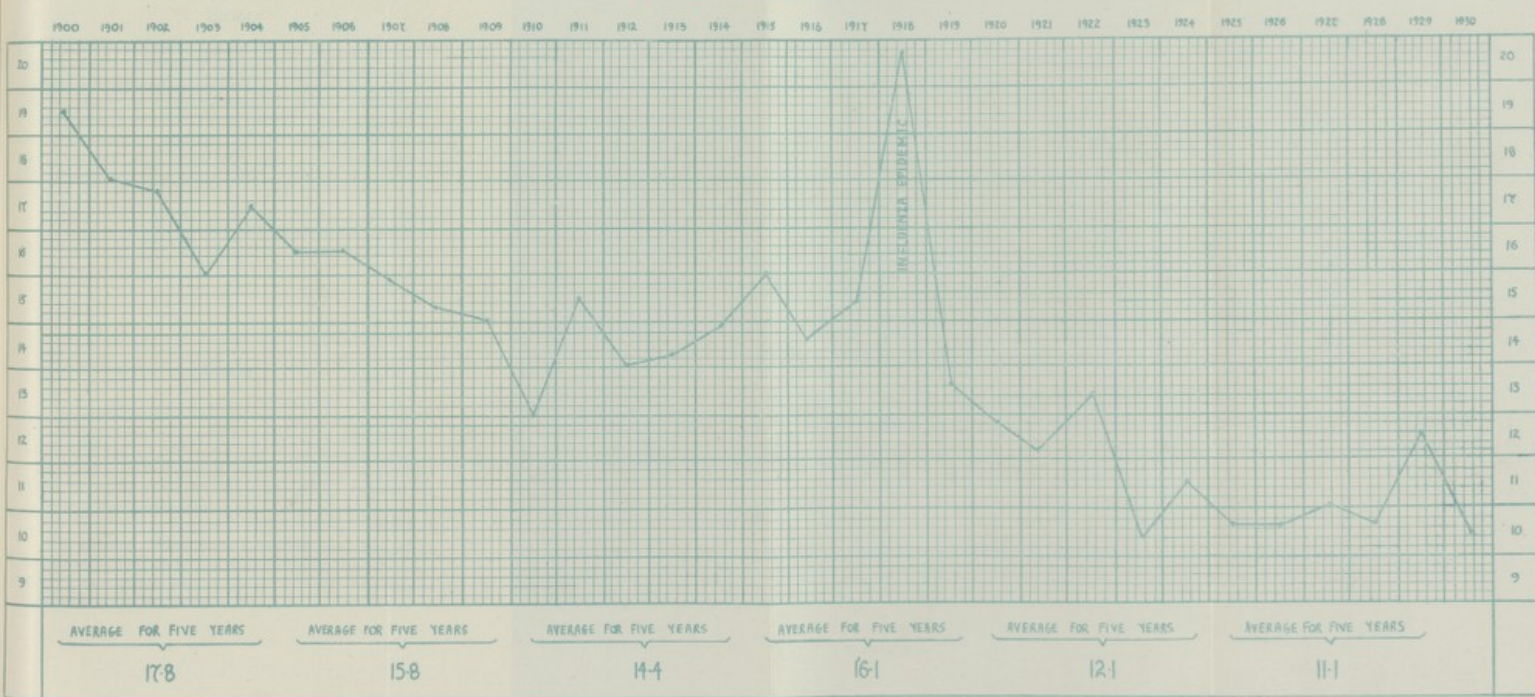
## Vital Statistics.

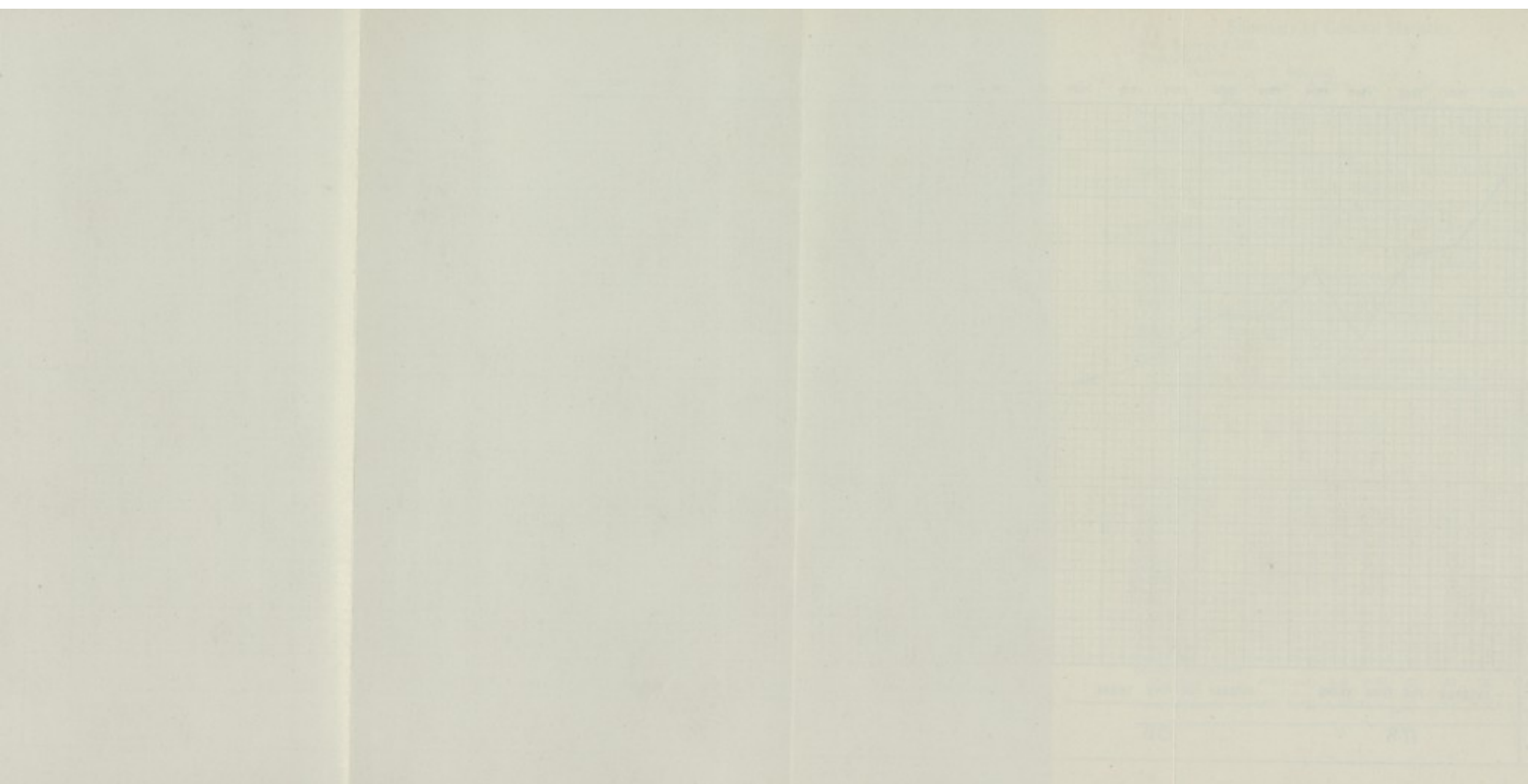
	Total	Male	Female	
Live Births { Legitimate	5472	2834	2638	} Birth Rate 18.2.
{ Illegitimate	134	63	71	
Still Births, 190 ... ..				Rate per 1,000 total births, 3.3
Deaths, 3,263 ... ..				Death Rate, 10.6
Percentage of total deaths occurring in public institutions ...				42.0
Maternal Mortality Rate ... ..				2.8
Death Rate of Infants under one year per 1,000 live births:—				
Legitimate, 62.1; Illegitimate, 97.0. Total, 62.9.				
Deaths from Measles (all ages) ... ..				78
Deaths from Whooping Cough (all ages) ... ..				19
Deaths from Diarrhoea (under 2 years of age) ... ..				41

Vital Statistics of the Wards of the Borough, 1930.

WARDS.	Births	Birth Rate	Deaths	Death Rate	Infant Deaths	Infant Mortality per 1,000 births	Natural increase Births over Deaths	Estimated population middle of 1929.
New Town ... ..	319	16.80	204	10.74	12	37	115	18,984
Forest Gate ... ..	288	14.70	218	11.12	8	27	70	19,590
High Street ... ..	359	19.24	189	10.12	29	80	170	18,658
Broadway ... ..	277	18.08	169	11.03	15	54	108	15,312
Park ... ..	256	16.37	163	10.42	12	46	93	15,630
Upton ... ..	250	14.11	165	9.31	9	36	85	17,717
Plashet Road ... ..	258	16.22	169	10.63	19	73	89	15,897
West Ham ... ..	256	14.36	178	9.98	15	58	78	17,819
Plaistow ... ..	349	16.03	222	10.20	22	63	127	21,762
Bemersyde ... ..	205	13.78	150	10.08	13	63	55	14,873
Canning Town and Grange ... ..	551	22.24	261	10.54	33	59	290	24,770
Hudsons ... ..	313	15.08	234	11.28	23	73	79	20,743
Ordnance ... ..	421	20.31	211	10.18	31	73	210	20,726
Beckton Road ... ..	448	21.75	204	9.90	29	64	244	20,597
Tidal Basin ... ..	627	27.77	310	13.73	56	89	317	22,575
Custom House and Silvertown ... ..	429	19.54	216	9.84	27	62	213	21,947
County Borough ...	5,606	18.22	3,263	10.6	353	62.9	2,343	307,600

GENERAL DEATH RATE.







## **Births.**

The number of births registered in the Borough during the year was 6453 (3338 Males and 3115 females; but of this total 1106 were children of non-residents, who came to be confined in one or other of the Maternity Hospitals, or were confined while visiting relatives or friends; while 259 West Ham women were confined outside the Borough. Suitable adjustment makes the net West Ham Births 5,606 (2,897 Males and 2,709 Females); 134 of these (63 Males and 71 Females) were illegitimate.

Calculated on the Registrar General's estimate of the population of the Borough at the middle of 1929, viz. 307,600, the Birth Rate for the year was 18.2, the lowest ever recorded for West Ham.

## **Deaths.**

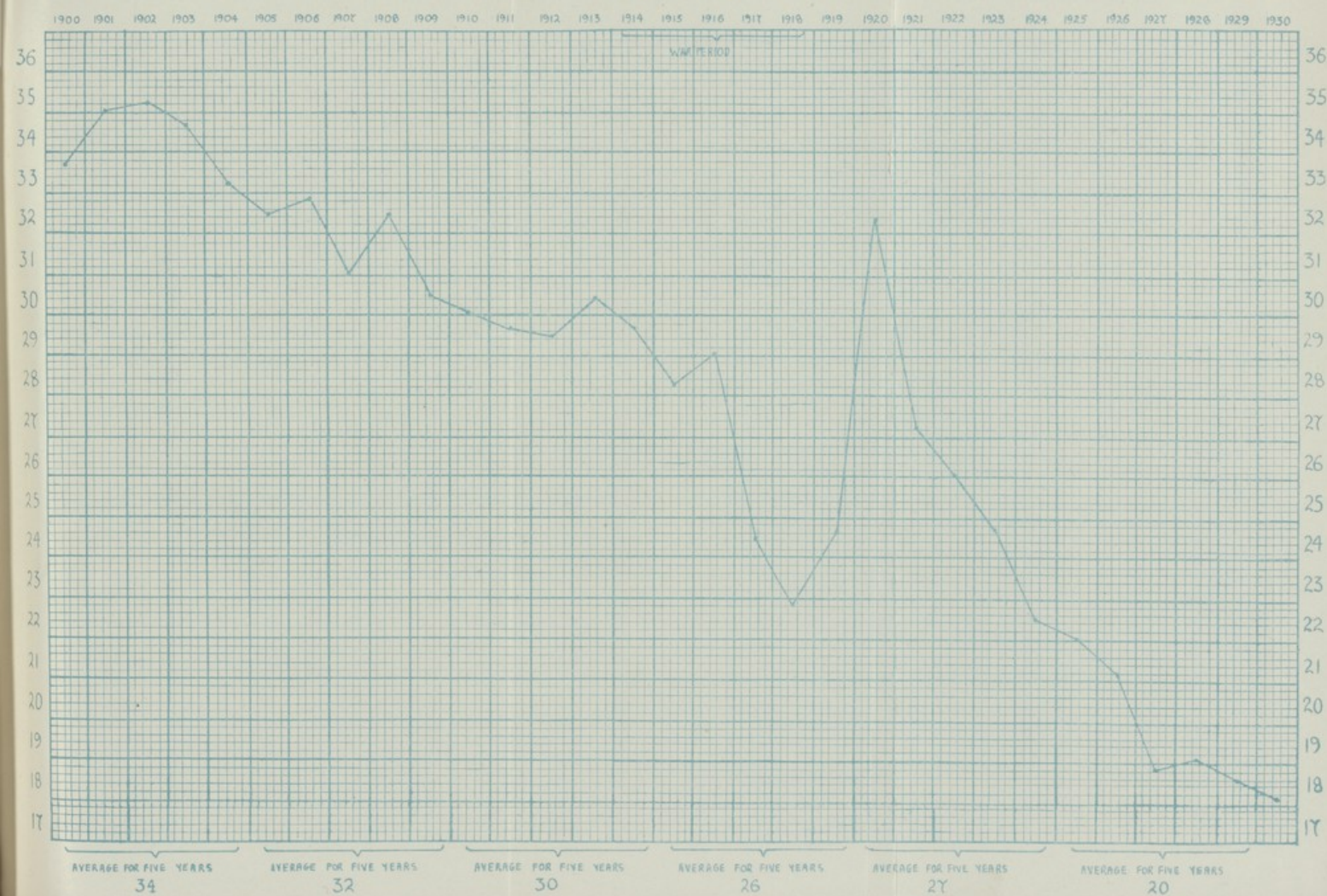
The number of death registered during the year was 2,070, but of these 179 occurred in persons not belonging to the Borough, while the deaths of 1,372 residents of West Ham occurred in various institutions and districts elsewhere, making the total net deaths attributable to the Borough number 3,263, of which 1,745 were males and 1,518 females.

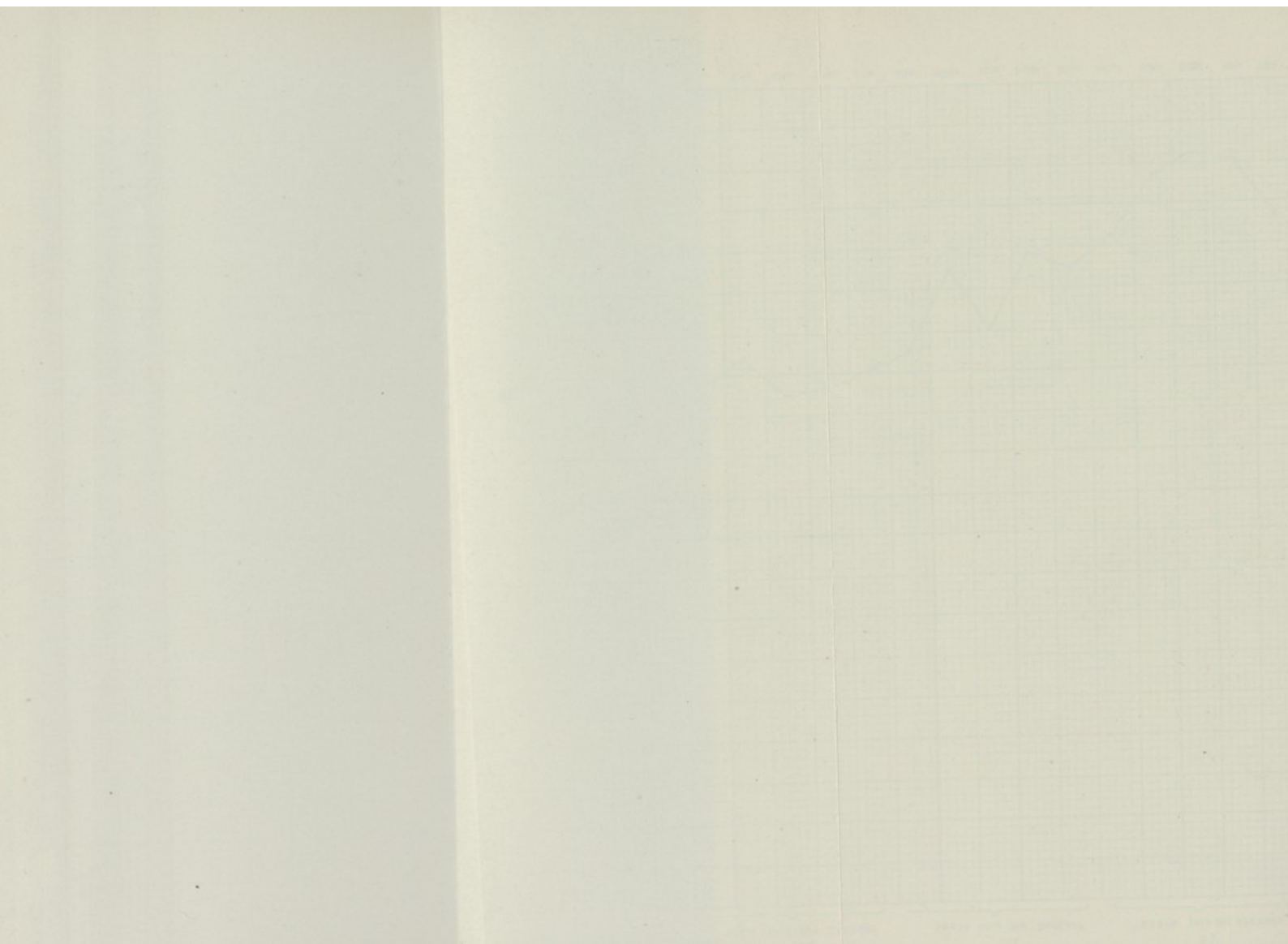
The allocation of these deaths to their different causes will be found later in this report, but the grand total from all causes gives an annual Death Rate of 10.6 per 1,000 of the estimated population.





# BIRTH RATE.







## Deaths in Public Institutions.

The great use made of the facilities for Institutional treatment is shown by the subjoined table. The larger Institutions serving the Borough, such as Whipps Cross Hospital and the Central Home of the late Board of Guardians, and the Borough Mental Hospital, are situated outside the Borough boundary, while in addition many West Ham residents are received into the London Hospitals and Institutions elsewhere. Similarly the Public Institutions within the Borough (Queen Mary's Hospital for the East End, St. Mary's Hospital, Plaistow Maternity Hospital, the Children's Hospital, Balaam Street, Royal Albert Dock Hospital, and Forest Gate Hospital), receiving patients from the surrounding districts whose deaths are registered in the district, but have to be excluded from tabulation as transferable from West Ham.

It will be noted that in the former group (outside Institutions) 102 infants and 1,362 persons over the age of one year died during the year, and in the latter group (inside Institutions) 96 infants and 224 elders died, of which numbers 179 were non-residents of the Borough. The net deaths of West Ham residents in Public Institutions were 147 infants and 1,458 persons of one year and upwards, making a total of 1,605 Institutional Deaths as compared with 1,658 deaths in private residences, i.e., over 46 per cent. of the deaths during the year occurred in Public Institutions.

	Under 1 year	1 year & upwards
Deaths in Outside Institutions :—		
Whipps Cross Hospital ... ..	36	479
Central Home ... ..	—	458
Dagenham Sanatorium ... ..	—	61
West Ham Mental Hospital ... ..	—	49
Residents dying in London Institutions, etc.	66	315
Langdon Hill Sanatorium for Children	—	—

Deaths in Inside Institutions :—

Plaistow Fever Hospital ... ..	2	50
Queen Mary's Hospital for East End ...	24	96
St. Mary's Hospital ... ..	17	29
Plaistow Maternity Charity ... ..	27	8
Royal Albert Dock Hospital ... ..	1	19
Children's Hospital, Balaam Street ...	18	1
Forest Gate Hospital ... ..	7	19
Other Places, e.g., Docks, etc. ... ..	—	2
	<hr/>	<hr/>
	198	1586
Non-residents dying in Inside Institutions	51	128
	<hr/>	<hr/>
	147	1458

Net West Ham Deaths in Institutions ... 1605



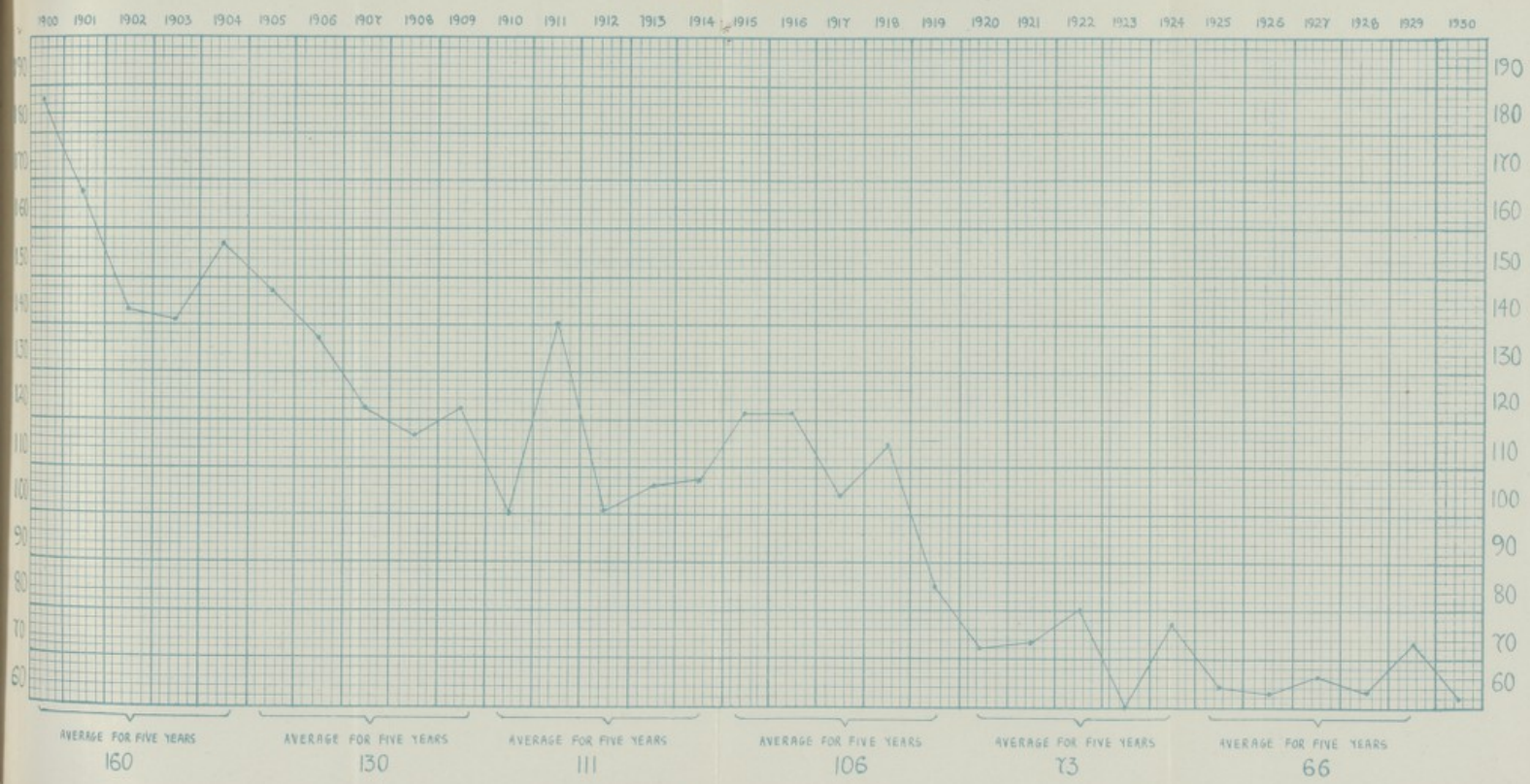
# Causes of Death at Different Periods of Life in the County Borough of West Ham during 1930.

CAUSES OF DEATH.				Sex.	All Ages	0—	1—	2—	5—	15—	25—	45—	65—	75—
ALL CAUSES	...	...	...	M	1,745	204	54	42	50	79	205	494	360	257
				F	1,518	149	44	45	52	101	177	361	270	319
1 Enteric Fever	...	...	...	M	1	...	...	...	...	...	...	1	...	...
				F	...	...	...	...	...	...	...	...	...	...
2 Small-pox	...	...	...	M	...	...	...	...	...	...	...	...	...	...
				F	...	...	...	...	...	...	...	...	...	...
3 Measles	...	...	...	M	41	10	21	9	1	...	...	...	...	...
				F	37	6	16	14	1	...	...	...	...	...
4 Scarlet Fever	...	...	...	M	2	1	1	...	...	...	...	...	...	...
				F	2	...	...	...	2	...	...	...	...	...
5 Whooping Cough	...	...	...	M	9	4	2	3	...	...	...	...	...	...
				F	10	2	2	4	1	1	...	...	...	...
6 Diphtheria	...	...	...	M	13	3	1	5	3	1	...	...	...	...
				F	21	...	6	7	8	...	...	...	...	...
7 Influenza	...	...	...	M	10	...	...	...	...	...	2	6	2	...
				F	5	1	...	...	...	...	...	3	1	...
8 Encephalitis Lethargica	...	...	...	M	...	...	...	...	...	...	...	...	...	...
				F	...	...	...	...	...	...	...	...	...	...
9 Meningococcal Meningitis	...	...	...	M	8	3	2	...	2	1	...	...	...	...
				F	3	2	...	...	...	...	...	1	...	...
10 Tuberculosis of Respiratory System	...	...	...	M	167	1	...	2	1	29	74	57	3	...
				F	143	2	...	...	1	50	54	35	1	...
11 Other Tuberculous Diseases	...	...	...	M	25	4	2	5	4	6	...	2	2	...
				F	21	4	...	1	5	4	5	2	...	...
12 Cancer, Malignant Disease	...	...	...	M	221	...	...	1	...	1	16	98	77	28
				F	183	...	...	...	2	2	16	87	45	31
13 Rheumatic Fever	...	...	...	M	15	...	...	1	8	1	3	1	...	1
				F	8	...	...	...	3	...	3	1	...	1
14 Diabetes	...	...	...	M	10	...	...	...	...	1	...	4	4	1
				F	22	...	...	...	...	...	3	10	7	2
15 Cerebral Haemorrhage, etc.	...	...	...	M	84	...	...	...	...	...	2	30	34	18
				F	92	...	...	...	...	...	2	35	33	22
16 Heart Disease	...	...	...	M	280	...	...	1	4	10	15	88	105	57
				F	295	...	...	...	3	11	25	69	82	105
17 Arterio-sclerosis	...	...	...	M	39	...	...	...	...	...	1	8	11	19
				F	30	...	...	...	...	...	...	5	12	13
18 Bronchitis	...	...	...	M	87	6	...	...	...	...	...	30	22	29
				F	71	4	4	...	...	1	2	8	15	37
19 Pneumonia, all forms	...	...	...	M	134	35	19	4	2	1	13	33	15	12
				F	116	36	12	6	2	5	5	15	18	17
20 Other Respiratory Diseases	...	...	...	M	13	...	...	1	1	2	2	4	2	1
				F	6	...	...	...	...	...	...	3	2	1
21 Ulcer of Stomach, or Duodenum	...	...	...	M	24	...	...	...	...	...	8	11	5	...
				F	9	...	...	...	...	...	3	5	...	1
22 Diarrhoea, &c.	...	...	...	M	34	30	1	...	...	...	...	1	1	1
				F	14	9	1	...	1	...	2	...	...	1
23 Appendicitis and Typhlitis...	...	...	...	M	15	...	...	2	4	3	4	2	...	...
				F	8	...	...	...	1	2	3	...	2	...
24 Cirrhosis of Liver	...	...	...	M	8	...	...	...	...	...	2	2	2	2
				F	6	2	...	...	...	...	1	3	...	...
25 Acute and Chronic Nephritis	...	...	...	M	35	...	...	1	1	1	6	12	12	2
				F	41	...	...	1	2	3	5	11	12	7
26 Puerperal Sepsis	...	...	...	M	...	...	...	...	...	...	...	...	...	...
				F	9	...	...	...	...	3	6	...	...	...
27 Other Accidents and Diseases of Pregnancy and Parturition	...	...	...	M	...	...	...	...	...	...	7	...	...	...
				F	7	...	...	...	...	...	...	...	...	...
28 Congenital Debility and Malformation, Premature Birth	...	...	...	M	76	76	...	...	...	...	...	...	...	...
				F	70	67	1	...	1	...	...	1	...	...
29 Suicide	...	...	...	M	24	...	...	...	...	2	7	12	2	1
				F	17	...	...	...	...	2	7	6	2	...
30 Other Deaths from Violence	...	...	...	M	82	2	1	3	12	14	19	19	8	4
				F	32	...	...	3	6	3	2	7	5	6
31 Other defined Diseases	...	...	...	M	286	29	3	4	7	6	31	72	53	81
				F	240	14	2	9	13	14	26	54	33	75
32 Causes ill-defined or unknown	...	...	...	M	2	...	1	...	...	...	...	1	...	...
				F	...	...	...	...	...	...	...	...	...	...





INFANTILE MORTALITY RATE.







# Chief Vital Statistics since 1877.

Year.	Population.	Births.	Birth Rate.	Deaths.	Death Rate.	Infant Deaths.	Infant Mortality Rate.
1877	112,541	4,149	36·8	1,817	16·1	530	128
1878	115,144	4,491	39·0	2,147	18·6	733	163
1879	120,747	4,862	40·2	2,113	17·5	688	141
1880	124,350	5,164	41·5	2,371	19·0	793	153
1881	128,953	5,488	42·5	2,409	19·4	745	136
1882	136,548	5,907	43·2	2,586	18·9	874	148
1883	144,143	6,014	41·7	2,693	18·6	897	149
1884	151,737	6,563	43·2	3,057	20·1	1,035	157
1885	159,334	6,547	41·0	3,503	21·9	1,070	163
1886	166,936	7,075	41·7	3,151	18·8	1,060	149
1887	174,523	6,865	39·1	3,286	18·7	723	105
1888	182,118	6,867	38·5	2,848	18·0	905	131
1889	189,713	6,947	38·5	2,883	18·0	907	130
1890	197,308	7,063	38·5	3,977	21·7	1,142	161
1891	206,463	7,911	38·2	3,952	19·1	1,191	150
1892	212,703	8,013	36·9	4,019	18·6	1,225	158
1893	218,942	8,026	35·3	4,565	20·0	1,387	172
1894	225,184	8,089	33·9	4,026	18·2	1,123	139
1895	231,426	8,591	35·9	4,656	20·9	1,452	169
1896	237,665	8,519	35·4	4,395	18·9	1,395	163
1897	243,908	8,761	35·8	4,486	18·3	1,535	175
1898	250,145	8,750	34·9	4,594	18·3	1,525	174
1899	256,386	8,779	34·2	5,213	20·3	1,770	201
1900	262,627	8,885	33·8	5,156	19·6	1,671	188
1901	268,868	9,434	35·0	4,910	18·2	1,589	168
1902	270,076	9,553	35·3	4,858	17·9	1,382	144
1903	272,250	9,478	34·8	4,394	16·1	1,344	142
1904	274,424	9,276	33·3	4,836	17·6	1,467	158
1905	276,598	9,018	32·5	4,574	16·5	1,341	148
1906	278,772	9,193	32·9	4,610	16·5	1,270	138
1907	280,946	8,759	31·1	4,412	15·7	1,078	123
1908	283,121	9,214	32·5	4,364	15·4	1,089	118
1909	285,471	8,730	30·6	4,435	15·1	1,087	123
1910	287,471	8,646	30·0	3,773	13·1	866	100
1911	289,646	8,642	29·8	4,561	15·7	1,223	141
1912	291,900	8,642	29·6	4,146	14·2	889	102
1913	294,223	9,125	30·5	4,312	14·4	984	107
1914	296,570	8,848	29·8	4,425	14·9	957	108
1915	294,396	8,380	28·4	4,744	16·1	940	112
1916	287,969	8,377	29·1	4,233	14·7	828	112
1917	271,934	6,701	24·6	4,203	15·4	707	105
1918	262,858	6,021	22·9	5,492	20·8	700	116
1919	287,966	7,132	24·7	3,946	13·7	619	86
1920	299,440	9,723	32·4	3,888	12·9	716	73
1921	300,903	8,242	27·3	3,712	12·3	615	74
1922	304,738	7,959	26·1	4,124	13·5	641	80
1923	314,400	7,803	24·8	3,331	10·5	466	59
1924	317,400	7,202	22·6	3,652	11·5	564	78
1925	318,500	7,017	22·0	3,428	10·7	463	65
1926	315,900	6,710	21·2	3,405	10·7	418	62
1927	315,400	5,991	18·9	3,481	11·0	404	67
1928	306,900	5,913	19·2	3,340	10·8	380	64
1929	307,600	5,766	18·7	3,926	12·7	427	74
1930	*307,600	5,606	18·2	3,263	10·6	353	62

\* Estimated figure, middle 1929, as per Memorandum from Ministry of Health, 28/1/31.



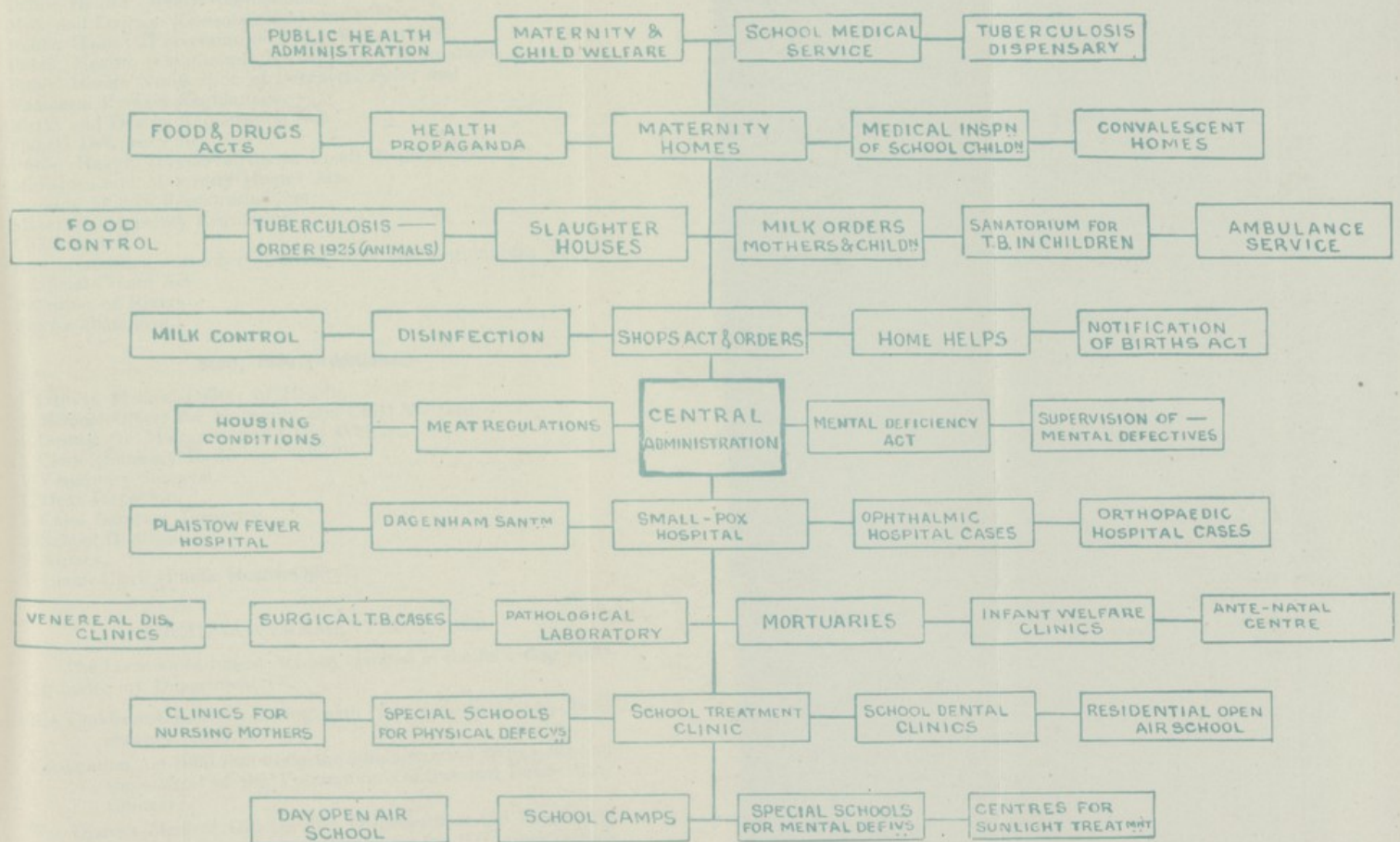
## **General Provision of Health Services.**

### **ADDITIONAL SERVICES SINCE 1925.**

- Four Maternity and Child Welfare Centres.
- Additional ante-natal session at Silvertown Clinic.
- Lectures to midwives and mothers.
- Investigation of all maternal deaths, premature births and infant deaths.
- Inspection of Nursing Homes and subsidized clinics.
- Dental treatment for children under five years.
- Twenty-two additional hospital beds for babies.
- Orthopaedic clinic for crippled children.
- Sunlight clinics.
- Additional convalescent treatment for children.
- Sanatorium for tuberculous children under 16 years (40 beds).
- Additional (45) beds at Dagenham Sanatorium for adults.
- Sun-ray installation at Dagenham.
- Increased facilities for treatment of surgical T.B.
- Special wards at Plaistow Hospital for measles and whooping-cough.
- Installation for artificial sunlight at Plaistow Hospital.
- Additional facilities for bacteriological tests.
- Augmented ambulance service.
- Special investigations and restrictions in regard to Dairies and milk vendors.
- Special inspection of all places where food is prepared and sold.
- Inspection of all animals slaughtered and of all meat offered for sale.
- Examination of all cows and cow sheds.
- Skilled bacteriological and chemical examination of various food-stuffs and other suspected material.
- Four additional hospital blocks for infectious cases at Harold Wood.
- Systematic visits and reports upon all mentally deficient cases.
- Arrangements for placing cases under guardianship.
- Revised methods of ascertainment.  
(Proposed Colony for 750 cases at Ockenden.)
- Residential Open-air School for Boys (80 beds).
- Residential Open-air School for Girls (60 beds).
- Open-air Day School.
- Stammering Class.
- Orthopaedic beds.
- Two additional clinics (Dental and Minor ailments).
- Augmented ophthalmic sessions.
- Following-up of all out-of-school cases and of all Special School cases.
- In-patient hospital treatment for tonsils and adenoids operation cases.
- Consulting Aural Surgeon for deaf children.
- Holiday camps.
- Two Nursery Schools.



DIAGRAM ILLUSTRATING THE ACTIVITIES AND CO-ORDINATION OF THE HEALTH SERVICES.







### **Additional Legislation since 1925.**

Public Health Act.  
Tuberculosis Order.  
Housing Act.  
Public Health (Meat) Regulations.  
Milk and Dairies (Consolidation) Act.  
Public Health (Prevention of T.B.) Regulations.  
Public Health (Ophthalmia Neonatorum) Regulations.  
Public Health Notification of Puerperal Fever and  
Puerperal Pyrexia Regulations.  
Births and Deaths Registration Act.  
Mental Deficiency Act.  
Public Health (Preservatives in Food) Regulations.  
Midwives and Maternity Homes Act.  
Nursing Homes Registration Act.  
Maternity Mortality Regulations.  
Children Act.  
And in addition a number of minor Acts and Regulations, i.e.,  
Artificial Cream Act.  
Pollution of Rivers.  
Smoke abatement.

### **Staff, 1930 (Additional).**

- 1 Deputy Medical Officer of Health.
- 1 Medical Officer for Maternity and Child Welfare.
- 1 Dentist for Maternity and Child Welfare.
- 1 Clerk (Sanitary Inspectors' Office).
- 1 Veterinary Surgeon.
- 1 Meat Inspector.
- 1 Chief Sanitary Inspector.
- 2 School Dentists.
- 2 Nurses.
- 1 Junior Clerk (Public Health Office).

### **LOCAL GOVERNMENT ACT, 1929.**

The Local Government Act has resulted in the following coming under my Department :—

The Children Act 1908 (dealing with foster-mothers and their charges, etc.).

Vaccination Act 1930 (imposing the administration of this Act and the control of the Vaccination Officers and Public Vaccinators).

The District Medical Officers and Dispensers at the Relief Stations are directly responsible to me for their work, which has been linked up recently with the work of the other health centres of the Borough.

Margate Convalescent Home is now directly under my administration, and I am responsible for the general administration of Whipps Cross Hospital, The Central Home, and The Forest Gate Hospital. Periodical returns from each of these institutions are received in my Department, and there carefully tabulated.

In addition to the responsibility for the sanitation, the food supplies, the prevention of disease and the general well-being of the citizens, this Act has placed upon my Department the enormous responsibility of seeing that all the sick and infirm of this Borough are properly provided for, and of advising the Council as to the best and most expeditious way in which this can be accomplished—in itself an intricate and a difficult problem. See page 162, Appendix No. 1.

## HOSPITALS.

### Infectious Diseases.

(1) The Plaistow Fever Hospital contains 210 beds, originally allocated for the reception of scarlet fever, diphtheria and enteric fever cases, with isolation beds for mixed or staff cases. The slight incidence of enteric fever in recent years has enabled the Medical Superintendent to receive and treat certain other infectious cases as well as to admit special cases for teaching purposes, including severe Measles, Tubercular peritonitis, and Encephalitis Lethargica. Cases of Puerperal Pyrexia and Puerperal Fever can now be admitted and treated at this Hospital.

(2) The Grange Convalescent Home consists of a residential Institution with 7 acres of grounds, together with 61 acres of land situated at Harold Wood, about 9 miles from the Borough. It was opened on 22nd February, 1909, for the reception of scarlet fever convalescents, and is capable of accommodating 60 patients.

Additional accommodation has now been provided for 56 beds, making the total accommodation 116 beds.

These buildings consist of two blocks, each block containing two wards, one of 14 beds and one of 12 beds.

The wards are divided by a duty room, with observation wards overlooking each ward, and at each side of the duty room is a single ward containing one bed. Leading off from the centre of each ward is a sanitary spur.

In addition to the 56 beds there is an Isolation Ward containing 4 beds.



A verandah has been provided on the south side of these buildings.

The buildings are treated externally with red brick base and rough cast, and tiled roof.

The official opening ceremony of this extension was performed by the Chairman of the Hospitals Committee on the 30th October, 1930.

### **Smallpox.**

(3) Dagenham Smallpox Hospital, situated about 9 miles from the Borough, occupies a site of  $6\frac{1}{2}$  acres, adjoining Rookery Farm which comprises 119 acres owned by the Council; the Fever Hospital and Sanatorium are supplied with milk therefrom. It consists of permanent buildings, capable of accommodating 50 patients with the administrative staff required for their care, together with temporary iron buildings sufficient for a further 150 cases.

The agreement of West Ham with the Authorities named below to provide accommodation for cases of Smallpox arising in their respective areas expires in March, 1932. In view of the vastly altered circumstances since the original agreement was made in regard to the accommodation at Dagenham, the now unsuitable environment of the hospital for smallpox, the modification in the mode of transport, and the enhanced difficulty of checking the spread of the present type of smallpox, great attention should be paid to every relevant factor before another agreement is entered into to accommodate smallpox cases from other areas.

The following authorities participate in the agreement mentioned above: Barking, East Ham, Romford Joint Hospital Board, Ilford, Wanstead, Waltham Joint Hospital Board, Brentwood, Billericay, Loughton, Epping Urban, Epping Rural, Ongar Rural, and Leyton.

The London County Council has received the greater part of the smallpox cases which have occurred during the year.

The arrangement for the reception of West Ham cases has been graciously extended until the end of 1931.

At the time of writing negotiations are taking place between the West Ham Council and the London County Council in regard to the accommodation of cases of smallpox occurring in this Borough.



## **Tuberculosis.**

### **Dagenham Sanatorium.**

(4) Under the Tuberculosis Scheme formulated after the passing of the National Health Insurance Act, the Council were permitted to use Dagenham Hospital as a Temporary Sanatorium for Adults with Pulmonary Tuberculosis but, owing to an outbreak of smallpox at Easter, 1920, the Hospital had to be promptly cleared of consumptive patients and revert to its primary use; a costly and very inconvenient undertaking, as only 30 smallpox cases were admitted. Fortunately, in 1922 the Council was enabled to enter into an agreement with the Orsett Joint Hospital Board, whereby the latter authority will admit sporadic cases of smallpox, up to 22 in number, sent to their Hospital by West Ham, thus enabling the Council to continue using Dagenham Hospital for the reception of Tuberculosis until the increasing pressure on the accommodation of the Orsett Hospital compels the Council to arrange for further accommodation.

The total number of beds available for tuberculosis cases at Dagenham Sanatorium is now 128.

The outbreak of smallpox continued throughout the year, but in view of the very considerate action of the London County Council in receiving cases into their Institutions from the West Ham District, the question of the re-opening of Dagenham for the reception of cases of smallpox has not arisen.

### **Langdon Hills Sanatorium for Children.**

(5) This Sanatorium has accommodation for 40 children suffering from Pulmonary Tuberculosis and is situated at the Council's Langdon Hills site. This site was purchased in 1914 with the object of erecting upon it a Sanatorium for adults suffering from Tuberculosis, but for many reasons it has so far been found impracticable to carry out this proposal. The site comprises 100 acres, and is situated in one of the highest parts of Essex, overlooking the mouth of the Thames. It is about 20 miles distant from West Ham, and 270 feet above sea level.

Cases suffering from Surgical Tuberculosis, by arrangement with other authorities, are treated at the Alexandra Hospital, Swanley, Kent, and at various London Voluntary Hospitals.

## Whipps Cross Hospital.

This hospital is one of the institutions transferred from the late West Ham Board of Guardians, under the Local Government Act 1929 (see page 174). It is situated within the Borough of Leyton.

The registered accommodation of 741 beds is for acute cases, a few shelters for male tuberculous cases are also available.

On the same site there is Forest House, with 396 beds, for aged men and mental cases, also Forest House Cottages with 90 beds, for aged married couples, at present occupied by aged women.

## Forest Gate Hospital.

This institution is situated in the County Borough of West Ham, and was transferred from the late West Ham Board of Guardians, under the Local Government Act 1929. The certified accommodation is 500 beds, to accommodate maternity patients, mental cases, and chronic sick. Additional accommodation for 200 beds has recently been provided.

The new buildings are of a temporary character, built with steel frame work, and brick filling, rendered outside with rough cast, and plastered inside; the ceilings are of asbestos.

There are four wards containing 48 beds each, and 4 isolation wards each containing 2 beds. All these beds are being used for chronic sick cases.

The administrative block is comprised of kitchen, scullery, nurses' dining and recreation room, office and cloak rooms.

The Institution is approved by the Board of Control for 75 mental defectives, as under:—

Adult Males ... ..	20
Adult Females ... ..	30
Males under 16 years...	10
Females under 16 years	15



## Central Home.

This home was transferred from the late West Ham Board of Guardians, under the Local Government Act 1929. It is situated within the Borough of Leyton.

It is registered for 1,807 chronic sick and able-bodied persons, about 900 consisting of chronic sick cases.

## Margate Convalescent Home.

This convalescent home is also owned by the Council, having been transferred under the Local Government Act 1929, and has accommodation for 110 convalescent children. The home is situated at Northdown Road, Margate. There are ten wards, with necessary dining and day rooms.

## Maternity.

(6) The Council have an agreement with Queen Mary's Hospital and Plaistow Maternity Charity for the institutional treatment of maternity cases. (See page 143.)

Orthopaedic treatment is carried out at the Children's Hospital, Balaam Street, and at the Brookfield Hospital, Walthamstow. (See page 143.)

Cases of Ophthalmia Neonatorum are treated at the Royal London Ophthalmic Hospital and at St. Margaret's Hospital. (See page 147.)

## Open Air Schools.

There are two Open Air Schools, one at Fyfield (Residential), near Ongar, to accommodate 80 boys and 60 girls, and one within the Borough at Crosby Road (Day), to accommodate 60 girls.

# HOSPITALS.

Name of Hospital or Institution	Situation of Hospital or Institution	No. of beds (Men, women and children)	If used by residents outside the area—in what proportion	Nature of cases dealt with	Management	Medical Staff	Nursing Staff	Arrangements for Consultants
Plaistow Fever Hospital.	Samson Street, Plaistow, E.13.	210 (70 Men, 70 Women, 70 Children)	No.	Infectious cases, Scarlet Fever, Diphtheria, Enteric Fever, Puerperal Fever, Puerperal Pyrexia, Measles, Whooping Cough, Pneumonia.	West Ham County Borough Council.	1 Med. Supt. 2 R.M.O.'s.	1 Matron, 1 Asst. Matron, 1 Sister Tutor, 1 Night Sister, 8 Day Sisters, 5 Staff Nurses, 57 Probationers.	—
West Ham Children's Hospital, Harold Wood.	Harold Wood, Essex.	116 (Children)	No.	Scarlet Fever & various infectious diseases, depending upon pressure of beds at Plaistow Fever Hospital.	do.	Visits from Plaistow Fever Hospital.	1 Matron, 3 Sisters, 15 Nurses.	—
Dagenham Sanatorium for Adults.	Dagenham, Essex.	128 (89 Men, 48 Women)	No.	Adult Cases of Pulmonary Tuberculosis.	do.	Med. Supt. Asst. R.M.O.	Matron, Asst. Matron & Sister Tutor, 3 Sisters, 1 Nurse-Housekeeper, 6 Asst. Nurses, 14 Probationers.	—
Langdon Hills Sanatorium for Children.	Langdon Hills, Essex.	40 (20 Boys, 20 Girls)	No.	Cases of Pulmonary Tuberculosis.	do.	Med. Supt. Visits from Dagenham Sanatorium.	Matron, 2 Sisters, 2 Asst. Nurses, 5 Probationers.	—
Whipps Cross Hospital.	Whipps Cross Road, Leytonstone, E.11.	741 (Cert.) 800 (approx. occupied) Variously allocated according to the demand made upon the Institution by orders of admission. 321 Men, 308 Women, 112 Children	Yes. At present: West Ham, 50% East Ham, 16% Essex, 34%	Acute Surgical and Fractures. Chronic Med. and Surg. Cases, Gynaecological, Children's Diseases, Tuberculosis, Mixed Cases.	do.	Med. Supt. 6 R.M.O.'s.	Matron, Asst. Matron, 11 Sisters, 52 Nurses (Wards), 4 Nurses other duties, 111 Probationers, 11 Male Nurses.	8 including Gynaecological, Orthopaedic Surgeon, Urologist, Ear, Nose, and Throat Surgeon, Neurologist, Ophthalmic Surgeon, Anaesthetist, Light Specialist.
Central Home.	Union Road, Leytonstone, E.11.	1807 (cert.) including 1,000 (approx.) able-bodied, 410 Men, 564 Women 4 Children.	Yes. At present: West Ham, 50% East Ham, 16% Essex, 34%	Chronic Sick (Med. and Surg.) including aged and infirm and mental patients (epileptics) mostly adults	do.	Med. Supt. 2 R.M.O.'s. 2 Dispensers.	1 Matron, 1 Asst. Matron, 1 Supt. Nurse, 1 Senr. Ward Sister, 12 Ward Sisters, 1 Charge Nurse, 128 Asst. Nurses.	—
Forest House.	Whipps Cross Road, Leytonstone, E.11.	306 Men.	Yes. At present: West Ham, 50% East Ham, 16% Essex, 34%	Mental Cases and old men.	do.	Visited by Med. Supt. from Central Home.	8 Male, 4 Female Attendants.	—
Forest Gate Hospital.	Forest Lane, Forest Gate, E.7.	500 (cert.), 570 (approx.). Additional accommodation for 200 patients in course of erection—133 Men, 302 Women, 118 Children.	Yes. At present: West Ham, 50% East Ham, 16% Essex, 34%	Chronic Sick (Med. and Surg.), 70 beds. Mental Defectives & Epileptics, 436 beds. Maternity Cases, 64 beds.	do.	Med. Supt. 2 R.M.O.'s. 1 Dispenser.	Matron, Asst. Matron, 1 Home Sister, 1 Night Sister, 107 Nurses, 7 Midwives.	—
Margate Convalescent Home.	25 Northdown Road, Margate, Kent.	110 Children.	Yes. At present: West Ham, 50% East Ham, 16% Essex, 34%	Convalescent children between 2—14 years, excluding certain forms of disease.	do.	Part-time M.O. visits daily.	Matron, 1 Ward Sister, 9 Children's Attendants.	—
Queen Mary's Hospital.	West Ham Lane, Stratford, E.15.	216 (including 50 Maternity Beds), 60 Men, 111 Women, 45 Children.	No.	Maternity Cases—Gynaecological, General Medical and Surgical Cases.	Voluntary. Council subsidizes 10 Maternity Beds.	7	105 (including 19 Sisters, 86 Nurses).	—
Plaistow Maternity Hospital.	Balaam Street, Plaistow, E.13.	60 of which 48 are used by West Ham Patients.	No.	Maternity Cases.	Voluntary. Subsidized by the Council.	Visiting Staff (non-resident).	Matron, 1 Senr. Sister, 10 Staff Midwives, 3 Staff Nurses	—
Fyfield Open-Air School.	Fyfield, Ongar, Essex.	140 (80 Boys, 60 Girls).	No.	Delicate Children.	West Ham County Borough Education Committee.	Visiting by School Medical Officer. Urgent cases seen by local Doctor.	Matron, Sister, Matron's Help.	—
Albert Dock Hospital.	Connaught Road, Custom House, E.16	53 Men, 23 Med., 24 Surg., & 6 for V.D.	No.	General Diseases & Venereal Diseases.	Voluntary.	Med. Supt. 2 R.M.O.'s.	20	8 Consultants.
St. Mary's Hospital.	London Road, Plaistow, E.13.	71 26 Med., 45 Surg. (31 Women, 40 Children).	No.	Med. and Surg. Ear, Nose & Throat conditions, Gynaecological	do. Subsidized by the Council.	2 R.M.O.'s. 4 Physicians. 5 Surgeons. 1 Dental Surgeon. 1 X-Ray Surgeon. 1 Pathologist. 2 Anaesthetists.	39 including Radiographer and Masseuse.	—
Children's Hospital.	Balaam Street, Plaistow, E.13.	28 Children. Med. and Surg. Cases, 8 Tonsils & Adenoids, 4 Orthopaedic Cases.	No.	Operations for Tonsils & Adenoids, Med. & Surg. Cases, Infants and Young Children.	do. Subsidized by the Council.	8 including 3 Aural Surgeons. 1 Orthopaedic Surg. 2 Anaesthetists. 1 Surgeon. 1 Physician.	13.	—
Orsett Joint Hospital Board.	Grays, Essex.	22	Used by 11 other districts under Agreement—West Ham being the governing Authority.	Smallpox.	Owned by Orsett Joint Hospital Board	1 Part-time M.O.	Matron, 3 Staff Nurses, 1 Probationer.	—

The treatment of Venereal Diseases is carried out by the London County Council under a Joint Scheme. A list of Hospitals will be found on page 125. Cases of Ophthalmia Neonatorum are treated at the Royal London Ophthalmic Hospital, St. Margaret's Hospital, and Whipps Cross Hospital. Cases of Puerperal Pyrexia and Puerperal Fever, besides being treated at Plaistow Hospital, are occasionally treated at the Voluntary Hospitals. A report by the Medical Officer of Health upon Institutional and other Accommodation in regard to the Local Government Act, 1929, will be found as an Appendix No. 2, page 107 of this Report.





## AMBULANCE SERVICE.

The Council has three motor ambulances for the removal of infectious patients to hospital, and three ambulances for removing bedding, clothing, or other infected material to the Isolation Hospital for disinfection.

In addition there are two motor ambulances for use in the transference of non-infectious and accident cases to and from institutions. In this connection 2,088 journeys were made during the year. In 1,103 cases persons were removed from one address to another within the Borough, and in 985 cases from an address within the Borough to an institution outside, or vice versa. Arrangements are made for a Nurse to accompany the patient, and during the inclement weather hot water bottles are supplied. A third ambulance is only used for the removal of small-pox cases.

Reciprocal arrangements are in existence between West Ham, the County Borough of East Ham, and the district of Barking for the use of ambulances on call in emergency cases, should the ambulance of one or other Authority be unavailable, and 48 journeys were made under this agreement during 1930.

Transparencies are displayed on all West Ham cars setting out the facilities for obtaining the use of the ambulance through Tram Conductors and the Police. Notices conveying the same information are also exhibited in all the Council Conveniences, Fire Stations, Schools, and other public buildings.

In cases requiring urgent hospital treatment the ambulance may be commissioned, provided a medical certificate is supplied, and also for any street accident. Patients requiring out-patient treatment are not allowed the use of the ambulance.

Owing to the very heavy demand upon the ambulance service, it has been considered advisable to extend this service. The matter has been discussed on various occasions, but at the time of going to press no definite plan has been decided upon.

The following table sets out the nature of the cases removed, as stated on ambulance removal forms :—



Abdominal Trouble	...	18	Fistula	...	...	1
Abscess	...	7	Fits	...	...	107
Accidents	...	702	Gallstones	...	...	2
Appendicitis	...	123	Gangrene of Foot	...	...	1
Assault	...	23	Gastric Ulcers, etc.	...	...	18
Bladder Trouble	...	7	Haemoptysis	...	...	2
Bowel Obstruction	...	1	Haemostasis	...	...	1
Brain Trouble	...	9	Haemorrhoids	...	...	1
Bronchitis	...	5	Haemorrhage	...	...	24
Burns and Scalds	...	7	Heart Trouble	...	...	50
Cancer	...	15	Hernia	...	...	7
Chest Trouble	...	5	Hip Trouble	...	...	2
Chorea	...	1	Illness in Street	...	...	98
Colic	...	3	Immersion	...	...	4
Collapse	...	132	Internal Trouble	...	...	65
Concussion	...	13	Intussusception	...	...	2
Congestion of Lungs	...	2	Jaundice	...	...	1
Convalescence	...	5	Kidney Trouble	...	...	9
Diabetes	...	3	Leg Trouble	...	...	9
Dog Bite	...	2	Loss of Memory	...	...	3
Nervous Disorder	...	1	Lung Trouble	...	...	2
Observation or Examination	...	69	Malaria	...	...	2
Obstruction	...	6	Mastoid Disease	...	...	4
Operation	...	64	Massage	...	...	1
Orthopaedic Treatment	...	4	Maternity	...	...	127
Osteomyelitis	...	1	Meningitis	...	...	5
Paralysis	...	6	Nephritis	...	...	6
Pelvis, Inflammation, etc.	...	1	Rib (Fracture)	...	...	1
Peritonitis	...	3	Rupture	...	...	2
Phlebitis	...	2	Septicaemia	...	...	1
Pleurisy	...	10	Gastric Cases	...	...	4
Pneumonia	...	59	Shock	...	...	8
Poisoning, Accidental, etc.	...	1	Spine (Injury)	...	...	1
Purpura	...	1	Stroke	...	...	9
Pyonephrosis	...	2	St. Vitus Dance	...	...	3
Retention of Urine	...	2	Suicide and Attempted	...	...	
Rheumatism	...	11	Suicide	...	...	24
Rheumatic Fever	...	7	Throat Trouble	...	...	2
Rheumatoid Arthritis	...	1	Tonsillitis	...	...	2
Ear Trouble	...	1	Transference of Patients	...	...	
Eclampsia	...	1	from one Hospital to	...	...	
Electrocution	...	1	another, & one address	...	...	
Empyema	...	5	to another	...	...	35
Epilepsy	...	1	Tuberculosis	...	...	83
Erysipelas	...	2	Tumour	...	...	2
Exhaustion after operation	...	1	Ulcerated Stomach, etc.	...	...	2
Eye Trouble	...	3	Unconsciousness	...	...	3
			Varicose Veins	...	...	2



## School Clinics† and Treatment Centres.

Stratford Clinic, 84 West Ham Lane, E.	2 Dental Clinics.* 1 Minor Ailment Clinic. 1 Ophthalmic Clinic.
Balaam Street Clinic, Plaistow, E.	1 Minor Ailment Clinic. 1 Ophthalmic Clinic. 1 Dental Clinic.
Rosetta Road Clinic, Custom House, E.	1 Minor Ailment Clinic. 1 Dental Clinic.*
Swanscombe Street Clinic, Canning Town, E.16.	1 Minor Ailment Clinic. 1 Dental Clinic.*

\* Also used as Dental Clinics under Maternity and Child Welfare Scheme.

All Clinics are used as Inspection Clinics, and are provided by the Local Education Authority.

Children's Hospital, Orthopaedic, and Sunlight Clinics.  
Balaam Street, E.13.

## Tuberculosis Dispensary.

Balaam Street, Plaistow. (See pages 107-115.)

## Maternity and Child Welfare Clinics.

Silvertown Municipal Centre, Westwood Road, E.16.  
West Ham Lane Municipal Centre, West Ham Lane,  
Stratford, E.15.  
Grange Road Municipal Centre, Grange Road, E.13.  
Chesterton House, Balaam Street, E.13.  
St. Luke's Square, Tidal Basin, E.16.  
Martin Street, Stratford, E.15.  
South West Ham Health Society, Barking Road, E.16.  
Trinity Mission, Oxford Road, Stratford, E.15.  
Women's League of Service, Welfare Rd., Stratford, E.15.  
Given Wilson Institute, Pelly Road, Plaistow, E.13.  
Orthopaedic Clinic at Children's Hospital, Balaam St., E.13  
Sunlight Clinic at Welfare Road, E.15.  
Forest Gate Municipal Centre, Forest Street, E.7.  
Maybury Road Municipal Centre, Maybury Road, E.13.  
Venereal Disease Hospitals. (See pages 122-127.)

† See Ministry of Health Circular



# Public Health Staff.\*

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Dr. F. Garland Collins	M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.	Medical Officer of Health, Chief Administrative Tu- berculosis Officer and School Medical Officer.
Dr. T. W. Hill	M.D., (Glasgow), D.P.H. (Cantab.)	Deputy Medical Officer of Health.
*Dr. F. B. Skerrett	M.B., B.Sc. (London), B.Sc. (Vict.), M.R.C.S., L.R.C.P., D.P.H.	Assistant Medical Officer of Health and Senior Assistant School Medic- al Officer.
Dr. D. MacIntyre	M.D. (Glasgow), D.P.H.	Medical Superintendent Plaistow Fever Hospital
Dr. G. M. Mayberry	L.A.H. (Dublin), L.R.C.P. (Ireland)	Medical Superintendent Dagenham Sanatorium
Dr. P. A. Galpin	M.D., D.P.H.	Tuberculosis Officer
Dr. W. R. Kilgour	M.R.C.S.(Eng.), L.R.C.P. (Lond.)	Assistant Tuberculosis Officer
Dr. Helen Campbell	M.B., Ch.B. (Edin.), D.P.H.	Assistant Medical Officer Maternity and Child Welfare
Dr. Dorothy L. M. Keats	M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.	Assistant Resident Medical Officer Dagenham Sana- torium
Dr. J. S. Crawford	M.B., Ch.B.	Resident Medical Officer Plaistow Fever Hospital
Dr. G. McKinnon	M.B., Ch.B.	Assistant Resident Medical Officer Plaistow Fever Hospital. Annual ap- pointment.
Dr. J. C. Muir	M.D.	Med. Supt., Whipps Cross Hospital.
Mr. O. R. M. Kelly	F.R.C.S. (Eng.)	Dept. Med. Supt., Whipps Cross Hospital
Dr. D. G. Sharp	M.R.C.S., L.R.C.P.	First Asst. Med. Officer, Whipps Cross Hospital
Dr. W. E. Joseph	M.R.C.S., L.R.C.P.	Second Asst. Med. Officer Whipps Cross Hospital
Dr. M. Bryer	M.R.C.S., L.R.C.P.	Asst. Med. Officer, Whipps Cross Hospital
Dr. N. H. Skelton-Browne	M.R.C.S., L.R.C.P.	Do.
Dr. J. J. Henderson	M.B., B.S.	Do.
Dr. W. J. O'Donovan	M.D. M.B. B.S. M.R.C.P. M.R.C.S., L.R.C.P.	Part time Consultant

\* Now deceased.



NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Mr. Burt-White	F.R.C.S. (Eng.), M.R.C.S.	Part time Consultant
Mr. Alan Todd	F.R.C.S. (Eng.), M.R.C.S.	Do.
Mr. Clifford Morson	F.R.C.S., M.R.C.S.	Do.
Mr. Archer-Ryland	F.R.C.S., M.R.C.S.	Do.
Dr. J. P. Martin	F.R.C.P., M.D.	Do.
Dr. Lewis Slavin	M.R.C.S., L.R.C.P.	Do.
Dr. J. Barton	L.M.S.A.A.	Do.
Dr. de Lacy Walker	L.M.S.A.A.	Do.
Dr. J. S. Greig	M.B., C.M.	Medical Supt. Forest Gate Hospital and Central Home, Union Road
Dr. I. B. McCann	M.R.C.S., L.R.C.P.	Resident Medical Officer, Central Home.
Dr. D. A. Lubbock	M.R.C.S., L.R.C.P.	Do.
Dr. L. D. Phillips	M.R.C.S., L.R.C.P., M.B. B.S., D.P.H.	Asst. Med. Officer, Forest Gate Hospital and Cen- tral Home, Union Road
Dr. J. S. Coleman	M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.	Do.
Dr. T. Dolan	L., L.M. 1918, R.C.P. Ire- land; L., L.M. 1918 R.C.S. Ireland.	District Med. Officer and Public Vaccinator
Dr. C. E. Conran	L.R.C.P., L.R.C.S., L.F. P.S.	Do.
Dr. A. E. Kennedy	M.R.C.S., L.R.C.P., L.S.A.	District Med. Officer (part time)
Dr. P. G. S. Kennedy	M.R.C.S., L.R.C.P.	Public Vaccinator
Dr. J. F. Begley	M.B., B.S.	District Med. Officer (part time)
Dr. W. E. Passmore	L.S.A. Lond.) L.M.S.S.A. (Lond.)	Public Vaccinator
Dr. P. Nichol	M.R.C.S., L.R.C.P.	Medical Officer (part time) Margate Convalescent Home
Mr. H. H. King		Vaccination Officer
Mr. W. C. Young	F.I.C.	Public Analyst (part time)
Mr. H. E. Bywater	M.R.C.V.S.	Veterinary Officer
Miss Esmée K. Wilson	L.D.S.	Dentist Maternity and Child Welfare
Miss R. Alefs	General Nursing, C.M.B., Fever Nursing Certifi- cate	Health Visitor
Miss B. H. Clipstone	General Nursing, C.M.B.	Do.
Miss A. Connolly	General Nursing, Health Visitor's Certificate	Do.

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Miss M. Cross	General Nursing, C.M.B.,	Health Visitor
Mrs. N. C. Gibbins	General Nursing, C.M.B., Health Visitor's and Fever Nursing Certifi- cates	Do.
Miss M. Grierson	General Nursing, C.M.B.	Health Visitor.
Miss F. B. E. Groub-Tong	General Nursing, C.M.B., Children's Nursing	Do.
Miss A. E. Lunn	General Nursing, C.M.B.	Do.
Miss L. Martin	General Nursing, C.M.B., Board of Education Di- ploma	Do.
Miss M. B. Wallace	General Nursing, C.M.B.	Do.
Miss E. B. Welch	General Nursing, C.M.B., Board of Education Di- ploma	Do.
Miss D. M. White	General Nursing, C.M.B., Health Visitor's Certifi- cate Royal San. Inst.	Do.
Mr. H. G. Clinch M.I.F.E.E. F.S.I.A.	San. Inspr. Cert. R. San. Inst., Meat and Food Inspr. R. San. Inst., Smoke Inspr. R. San. Inst., San. Inspr. Joint San. Insprs. Exam. Board, Exam. in ad- vanced knowledge of practical and adminis- trative duties of Inspr.	Chief San. Inspr.
Miss A. S. Billing	Cert. San. Inspr. Royal San. Inst., Advanced Physiology and Hygiene, Science and Art, Ken- sington, St. John Ambu- lance Nursing and First Aid	Sanitary Inspector Superannuated (ill health), April, 1930
Miss V. M. Busby M.S.I.A.	Cert. San. Inspr. Royal San. Inst., Royal San. Inst. and San. Insprs. Examn. Joint Board.	Sanitary Inspector



NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Miss B. M. Keogh	San. Insp. Cert. London Exam Board, Health Visitor's Cert. Sanitary Inst.	Sanitary Inspector
Miss M. Monkhouse A.R.S.I.	Certificate General Nursing, and Certificate of Q.V.J.I. as Nurse and as Superintendent of Queen's Nurses,*San. Insp. Royal San. Institute, San. Insp., San. Inspectors' Association. *Registered Nurse and Member of the College of Nursing	Do. Superannuated, Feb. 1930.
Miss G. Briggs, M.S.I.A.	San. Insps. Examn. Joint Board	Sanitary Inspector
Miss A. Maughan, M.S.I.A.	San. Insp. Royal San. Inst.	Do.
Mr. B. G. Bannington M.S.I.A.	San. Insp. Cert. R. San. Inst., Cert. of London School of Economics (Lond. University) for Social Science and Administration; Honoursman and Gilchrist Medallist (Lond. University Extension) for Public Administration.	Sanitary Inspector, Insp. under Rag Flock Act
Mr. B. J. Driscoll M.S.I.A.	Cert. San. Inspectors' Examn. Board London	Sanitary Inspector
Mr. J. Dyke	Cert. San. Insp. Royal San. Inst., Cert. Plumbing, Cert. Building Constn. West Ham Technical Institute.	Sanitary Inspector, Insp. under Rag Flock Act Superannuated, March, 1930.
Mr. T. R. Harris M.S.I.A., A.R.S.I.	Cert. San. Insp., Meat Insp. Royal San. Inst. Cert. San. Insp., Meat Insp., San. Inspectors' Board, London. Cert. San. Science, 1st Class, Battersea Polytechnic. Diploma in Bacteriology of the Battersea Polytechnic.	Sanitary Inspector, Meat Inspector

NAME	QUALIFICATIONS	OFFICES HELD (Wholtime appointments except where otherwise stated)
Mr. E. F. Hughes M.S.I.A., A.R.S.I.	Cert. San. Instr. Royal San. Inst.	Sanitary Inspector, Inspector under Food and Drugs Acts, and Official Sampler and Inspector under the Fertilisers and Feeding Stuffs Act, 1926
Mr. John F. Mules M.S.I.A., F.F.A.S., A.M.I.S.E.	Cert. San. Instr., Meat Instr. Royal San. Inst.	Sanitary Inspector.
Mr. H. E. Parker M.S.I.A.	Cert. San. Instr. Royal San. Inst.	Sanitary Inspector, Instr. under Rag Flock Act (Superannuated, December 1930)
Mr. A. T. Plackett M.S.I.A.	Cert. San. Instr. Royal San. Inst.	Do. Do.
Mr. W. H. Roberts M.S.I.A.	Cert. San. Instr. (1892) Royal San. Inst. Prizeman Building Const. (Honours) Prizeman Civil Engineering (Survey Sec.) West Ham Tech. Inst.	Do. Do.
Mr. C. F. Riley	Cert. San. Instr., Meat Instr. Royal San. Inst.	Sanitary Inspector.
Mr. Chas. Smith M.S.I.A.	Cert. San. Instr. (1894) Royal San. Inst. Cert. Building Const. (Adv.) Science and Art Dept., South Kensington.	Do. Do. Inspector under Rag Flock Act
Mr. H. A. Smith M.S.I.A.	Cert. San. Instr. Royal San. Inst.	Sanitary Inspector
Mr. E. G. Simmons M.S.I.A.	Cert. San. Instr. (1912) Royal San. Inst.	Sanitary Inspector, Instr. under Rag Flock Act
Mr. E. J. Cromwell, M.S.I.A.	San. Instr. Examn. Joint Board.	Sanitary Inspector
Mr. H. G. Avril, M.S.I.A., A.R.S.I.	San. Instr. Examn. Joint Board.	Do.
Mr. J. Dawson, M.S.I.A.	San. Instr. R.S.I., Meat Instr. R.S.I.	Do.
Mr. E. J. Ferrier Miss C. Aitken	General Nursing, Fever Nursing Cert.	Inspr. under Shops Acts Supervising Nurse under Mental Deficiency Act.



## Public Health Office Administrative Staff†

Mr. J. A. Cheatle .....	Chief Clerk
„ F. W. Bromley .....	Senior Clerk
„ H. R. Cole .....	Clerk
„ F. H. Barker .....	do.
„ J. Sabin .....	do.
„ A. Clark .....	do.
„ D. Thompson .....	do.
Miss M. Sparrow .....	do.
„ A. E. Durand .....	do.
„ H. O. Williams .....	do.
Mr. J. W. McCarthy .....	Investigator

### TUBERCULOSIS DISPENSARY.

Nurses.	Clerks.
Mrs. E. Siggins, Sister-in-Charge.	Mr. W. Pike.
Miss E. J. Egerton, Nurse.	Miss M. F. Bush.
Mrs. Z. Griffin do.	„ G. Williams.
Miss E. K. Pottinger do.	

### PLAISTOW HOSPITAL.

Matron.	Chief Steward.	Clerks.
Miss M. Drakard.	Mr. W. Liddall.	Mr. S. Strachan.
		Mr. C. Poyser.

### DAGENHAM SANATORIUM.

Matron.	Chief Steward.	Assistant Steward.
Miss M. Duguid.	Mr. W. Liddall.	Mr. H. Bromley.

### LANGDON HILL SANATORIUM.

Matron.	Chief Steward.	Assistant Steward.
Miss F. M. Noble.	Mr. W. Liddall.	Mr. H. Bromley.

### DISINFECTORS.

Mr. J. Jones.	Mr. C. Cornish.
„ H. J. Murty.	„ W. Hubbard.

### MORTUARY KEEPERS.

Mr. E. Heisterman.	Mr. H. B. West.
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The Staff of the School Medical Officer consists of 6 Medical Officers, 5 Dental Surgeons, 28 Nurses, 9 Clerks, together with 2 Consulting Oculists and a Consulting Aural Surgeon, all of whom work in the closest possible co-operation with the Public Health Department.

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† A detailed list of the Staff is included in this Report by the request of the Minister of Health in Circular No. 1,119.

## Shops Acts.

The Shops Acts are carried out under the supervision of the Medical Officer of Health, and the following Table shows the work performed in connection therewith:—

List of Shops Visited during the Year 1930.

Class of Shop.	Visited.	No half-holiday form exhibited.	Warned verbally.	Warning Notice sent.	Refused to serve.	Summonses attended.
Bakers ... ..	135	1	8	2	9	...
Boot repairers, etc. ... ..	48	1	...	2	3	...
Butchers ... ..	402	18	82	2	65	1
Caterers ... ..	22	1	...	...	...	...
Carpets and rugs ... ..	23	...	4	...	1	...
Chemists and druggists ... ..	78	...	1	1	5	...
China and glassware ... ..	125	7	26	4	22	...
Clothiers ... ..	215	6	7	...	16	...
Confectionery and tobacco ... ..	683	22	185	46	239	9
Corn merchants ... ..	43	3	1	...	...	...
Cycle Dealers ... ..	45	...	1	...	...	...
Drapers, Milliners and Mantle Dealers ... ..	572	30	185	14	82	...
Fishmongers ... ..	501	13	92	2	55	...
Fruiterers and Greengrocers ... ..	733	24	184	36	147	5
Furniture Dealers ... ..	86	1	3	...	...	...
Furriers ... ..	9	...	...	...	...	...
Grocers and General ... ..	635	35	100	50	184	9
Hairdressers and Barbers ... ..	360	4	37	2	15	...
Hosiers and Hatters ... ..	139	...	9	9	10	...
Ironmongers ... ..	23	...	...	...	...	...
Leather and Grindery ... ..	84	...	2	...	5	...
Mixed ... ..	442	18	78	11	114	...
Music ... ..	84	...	3	...	8	...
Picture Frames ... ..	33	1	1	...	...	...
Public Houses ... ..	85	4	7	...	...	...
Tailors ... ..	164	3	9	...	13	...
Toy and Fancy Goods ... ..	112	1	8	4	10	...
Watchmakers, Jewellers and Pawnbrokers ... ..	28	...	2	1	2	...
Wireless ... ..	63	...	5	...	5	...
Totals ... ..	5,972	193	1,040	186	1,010	24

For results of Police Court Proceedings, see page 63.



# **List of Local Acts, Adoptive Acts, Bye-Laws and Local Regulations relating to Public Health in force in West Ham.**

The Public Health Act, 1890, Part III.—Adopted 13/1/1891.

The Public Health Acts Amendment Act, 1907—

Sections 16, 20, 22, 29, 33. Part II.

Sections 38, 50. Part III.

Sections 53, 62, 63, 64. Part IV.

Section 81 (part of). Part VII.

Section 95. Part X.

Adopted 10th April, 1909.

The Public Health Acts, 1925—

Sections 36, 37, 38, 39, 40, 41, 42, 43, and 44. Part III.

Sections 45, 46, 47, 48, 49, 50. Part IV.

Sections 51, 52, 53, 54, 55. Part V.

Adopted 22nd June, 1926.

West Ham Corporation Acts, 1888, 1893, 1898, 1900, 1902.

## **BYE-LAWS.**

Good Rule and Government (Tent Dwellers, Squatters, etc.).

Adopted 22nd October, 1889.

\*Removal of House Refuse. Adopted 28th December, 1892.

Common Lodging Houses. Adopted 26th July, 1892.

Knackers' Yards. Adopted 28th December, 1892.

Offensive Trades. Adopted 1st November, 1892.

(Dealing with the following trades:—Size Maker, Glue Maker, Tripe Boiler, Fat Melter or Fat Extractor, Tallow Melter, Leather Dresser, Tanner, Fellmonger, Bone Boiler, Blood Drier, Soap Boiler, Gut Scraper.)

Nuisances. Adopted 1st November, 1892.

Houses Let in Lodgings. Adopted 1st November, 1892.

Slaughter Houses. Adopted 1st April, 1921.

Nuisances in connection with the removal of offensive or noxious matter. Adopted 22nd August, 1907.

Trading in Streets by Licensed Traders. Adopted 22nd June, 1926.

\* Transferred to Borough Engineer's Department, 1st June, 1925.

## LOCAL REGULATIONS.

Nil.

The Bye-Laws are enforced, where necessary, by the Public Health Committee, acting through their Medical Officer of Health.

## Professional Nursing in the Home.

There is no municipal staff for professional nursing in the homes. There are, however, several voluntary Associations employing a large number of efficient nurses who carry out invaluable work in nursing necessitous cases in their homes. As mentioned elsewhere, the co-operation between these Societies and the Local Authority is of the closest possible nature, both in respect to home nursing and health visiting. The Forest Gate section of this Borough is supplied with home-nurses by the Essex County Nursing Association from their branch in Beechcroft Road, Leytonstone. The Silvertown area is similarly supplied through the Tate Nurses (Queen's Nurses), Nurses' Home, Saville Road, Silvertown. By far the largest amount of nursing in the homes, however, is carried out by the Plaistow Maternity Charity, who serve all local areas.

No arrangements are in force for the nursing of Infectious Diseases in the home. Cases requiring hospital treatment are removed to the Council's Isolation Hospitals.

## Maternity and Nursing Homes.

There are three registered homes in the Borough. (See page 146.) For Maternal Mortality. (See pages 147-151.)



# Particulars of Bodies Received into the Mortuaries during 1930.

18

MONTH.	STRATFORD MORTUARY.											CANNING TOWN MORTUARY.										
	Number received.	No. of bodies remaining in & viewed at Queen Mary's Hospital	Males	Females	Over 5 yrs.	Under 5 yrs.	Sent in by Coroner.	Sent in by Police.	Sent in on Sanitary grounds.	Number of Post-mortems.	Number of Inquests.	Number received.	Males	Females	Over 5 yrs.	Under 5 yrs.	Sent in by Coroner.	Sent in by Police.	Sent in on Sanitary grounds.	Number of Post-mortems.	No. of Inquests.	
January ...	20	4	10	14	19	5	16	8	...	13	14	1	...	1	1	...	1	...	...	1	...	
February ...	20	3	17	6	18	5	17	6	...	14	10	7	6	1	4	3	4	3	...	7	3	
March ...	6	2	6	2	8	...	4	4	...	4	4	6	3	3	5	1	4	1	1	5	...	
April ...	8	1	3	6	7	2	5	4	...	2	7	5	2	3	2	3	4	1	...	4	1	
May ...	19	3	17	5	20	2	16	6	...	11	13	6	1	5	5	1	2	2	2	3	1	
June ...	11	4	10	5	12	3	9	6	...	2	14	4	4	...	2	2	2	2	...	4	2	
July ...	12	5	12	5	15	2	12	5	...	8	12	4	4	...	3	1	...	2	2	2	...	
August ...	12	2	4	10	14	...	8	6	...	9	8	1	1	...	1	...	...	1	...	1	1	
September...	10	1	11	...	10	1	9	2	...	5	7	6	4	2	4	2	4	2	...	5	1	
October ...	12	3	11	4	10	5	11	4	...	5	11	...	...	...	...	...	...	...	...	...	...	
November...	8	2	6	4	10	...	7	3	...	4	6	1	1	...	1	...	...	1	...	1	...	
December ...	13	1	8	6	11	3	11	3	...	10	7	6	4	2	6	...	...	6	...	2	4	
Total ...	151	31	115	67	154	28	125	57	...	87	113	47	30	17	34	13	21	21	5	35	13	
Grand Total	182		182		182		182						47		47		47					

Number of Days Bodies remained in Mortuaries:—

65 remained 1 Day in Stratford Mortuary.

43	„	2	Days	„	„	„
24	„	3	„	„	„	„
10	„	4	„	„	„	„
5	„	5	„	„	„	„
3	„	6	„	„	„	„
1	„	7	„	„	„	„

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Total 151

7 remained 1 Day in Canning Town Mortuary.

10	„	2	Days	„	„	„	„
6	„	3	„	„	„	„	„
12	„	4	„	„	„	„	„
7	„	5	„	„	„	„	„
3	„	6	„	„	„	„	„
1	„	7	„	„	„	„	„
1	„	10	„	„	„	„	„

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Total 47

1 Doctor performed 8 Post-Mortem Examinations

1	„	„	7	„	„	„
2	Doctors	„	6	„	„	each
2	„	„	4	„	„	„
5	„	„	3	„	„	„
15	„	„	2	„	„	„
42	„	„	1	„	„	„

Total: 122 Examinations.



## Summary of Work of Sanitary Inspectors.

No. of Complaints Received and Investigated .....	6983
No. of Inspections—	
Dwelling Houses .....	11776
Newly-infected Houses .....	2803
Common Lodging Houses .....	72
Slaughter Houses .....	124
Bakehouses .....	252
Dairies .....	934
Cowsheds .....	22
Retail Shops (e.g., Eel Pie Shops, Ice Cream Shops, Butchers, Grocers, Fish Shops, etc.) .....	10206
Schools .....	184
Cooked Food Premises (Cafés and Restaurant Kitchens, etc.) .....	282
Offensive Trades .....	185
Factories (including Food Factories) .....	408
Workshops .....	238
Laundries .....	80
Work Places (not included above) .....	443
Miscellaneous (e.g., Smoke Abatement, Offensive Accumulations, Drain Tests, etc.) .....	24762
Outworkers' Visits .....	737
Re-inspections .....	36891
No. of Notices served—	
On Offender .....	8
On Owner .....	*8332
On Occupier .....	149
No. of Notices complied with—	
By Offender .....	1
By Owner .....	*8518
By Occupier .....	56
Total Nuisances found .....	42988
Total Nuisances abated .....	44109

\*Apparent discrepancies caused by a number of notices not being complied with at the end of previous year. There would normally be a number of notices not fully complied with at any date during the year.

## Abatement of Nuisances.

The following table shows the number of Inspections and Sanitary Notices served in respect of, in the sixteen Wards of the Borough, during the year 1930:—

Ward	Inspections	Notices served in respect of
New Town .....	710	... 494
Forest Gate .....	668	... 387
High Street .....	1168	... 938
Broadway .....	801	... 520
Park .....	523	... 308
Upton .....	449	... 249
West Ham .....	556	... 332
Plashet Road .....	294	... 181
Plaistow .....	703	... 507
Canning Town and Grange .....	1241	... 935
Ordnance .....	953	... 783
Hudsons .....	494	... 291
Bemersyde .....	300	... 197
Tidal Basin .....	1114	... 926
Beckton Road .....	806	... 699
Custom House and Silvertown .....	999	... 701
Totals ...	11779	... 8448

In this connection, 938 summonses have been issued during the year.

### Defects for the Abatement of which Notices were Served.

Drains and Soil Pipes—	Stack-pipes and Rain-water Gutters—
Cleansed ... .. 11	Repaired ... .. 2016
Repaired ... .. 695	New provided ... .. 2
W.C. Pans or Traps—	Water Fittings and Cisterns—
Cleansed ... .. 5	Repaired ... .. 512
Repaired ... .. 354	New provided ... .. 1
New provided ... .. 246	
Surface Gullies—	Flushing Apparatus—
Repaired ... .. 8	Repaired ... .. 551
Sinks and Sink Pipes—	New provided ... .. 28
Repaired ... .. 605	Water Supply provided ... .. 44
New provided ... .. 57	



Yard Paving—				Animals improperly kept	15
Repaired ... ..	897			Offensive Accumulations	117
Defects remedied in				Over-crowding ...	51
Roofs ... ..	4320			Smoke Nuisance ...	118
Floors ... ..	1438			Dust Receptacles pro	
Staircases ... ..	527			vided ... ..	1333
Windows ... ..	2324			Rooms disinfected ...	3280
Doors ... ..	481			Premises unfit for	
Fireplaces ... ..	1228			human habitation ...	1
Walls and Ceilings	16281			Premises infested with	
Coppers—				Rats ... ..	11
Cleansed ... ..	1				
Repaired ... ..	828				
Ditches, Urinals, etc.—					
Cleansed ... ..	1				

It frequently happens that a single sanitary notice specifies many defects needing abatement.

## Sanitary Circumstances of the Area.

### WATER.

Several large factories have private wells for drawing water from the chalk, but practically the whole of the Borough is supplied with water by the Metropolitan Water Board. The supply is constant, and in every case it is conveyed directly to the house. A number of houses have storage tanks in the roof which need periodical cleansing. The cleaning of these tanks is often difficult owing to some of them being built into the roof with no facilities for access.

Samples of water were taken from the Balaam Street Baths, and proved to be satisfactory.

The supply of water for domestic purposes has been satisfactory.

### RIVERS AND STREAMS.

The ditches are under the control of the Town Council as successors to the Dagenham Commissioners, as also are the river banks for the prevention of floods. The Lee and the Thames are both tidal rivers. The Thames and part of the river Lee are under the control of the Port of London Authority. The remainder of the Lee and its backwaters are under the Lee Conservancy.



There are two great sources of pollution of the rivers before they enter West Ham. The two neighbouring Boroughs of Leyton and Walthamstow have now connected up their sewers with the L.C.C. Hackney Sewer, and only discharge into the rivers in the case of heavy storms, the consequence being that the condition of the water from the River Lee reaching West Ham is greatly improved.

The Council, with the Lee Conservancy, have obtained Parliamentary Powers for dealing with all the back waters of the River Lee.

### DRAINAGE AND SEWERAGE.

The water carriage system of sewage removal is almost universal throughout the whole Borough. With very few exceptions, houses are provided with properly flushed modern water closets, discharging by modern drainage into the Public Sewers which also convey the surface water. The part of the Borough lying South of the Victoria and Albert Docks drains into the two main sewers, just touching East Ham and discharging into the L.C.C. Sewer at North Woolwich.

With the exception of about 200 acres on the North side of the Borough, the whole of the sewage is waterborne. A scheme is being considered to deal with this part of the Borough under the Town Planning Act.

Excepting this comparatively small area, the whole district North of the Victoria and Albert Docks is drained by gravitating sewers to the Corporation Pumping Stations at Abbey Mills, where the dry weather flow is pumped into the Northern outfall sewer, which crosses the Borough obliquely to the London outfall at Barking. There are certain other storm sewers provided which discharge into the rivers.

### CLOSET ACCOMMODATION.

Seal Wharf is an area of about 56 acres, which is converted into an island by the back waters of the River Lee. It is entirely given over to factories of varying size. This piece of land is so peculiarly placed that an elaborate and costly system of sewerage would have to be laid down to effectively carry the sewage either under or over the river. There are closets of the pail type on the site. The lessee of the land is directly responsible for keeping these in a sanitary and efficient state. The Sanitary Inspector for the district inspects this area at very frequent intervals to see that no nuisance arises.

### SCAVENGING.

This work is carried out under the supervision of the Borough Engineer's Department.

The more important roads are dealt with by the use of two "Karrier" motor sweepers, whilst the rest of the thoroughfares are swept by hand brooms.



## REFUSE DISPOSAL.

The system of refuse disposal as a whole is one of far-reaching public health importance. The amount of refuse necessitating collection in West Ham averages about 250 tons daily, and is, at present, dealt with by three different methods; that from the Northern part of the Borough being carted away and dumped at Temple Mills; that in the Southern part being barged away under contract from Quadrant Street Wharf, and a quantity from both districts being dealt with at the Council's Controlled Tipping Dump at Woodside Road.

There are at present three Pagefield sets in commission, and an early delivery of a fourth is anticipated. Each set comprises one motor lorry, with four horse-drawn containers.

An experiment with a two-ton Thornycroft Tipping Lorry is being carried out. In the case of this type of lorry the tipping is done direct from the lorry. In the Pagefield system the containers, which are horse-drawn during the collection of refuse, are picked up by the lorry, which first of all deposits an empty container and then gathers the full one, and proceeds to the dump.

## Common Lodging Houses.

There are twelve Common Lodging Houses in the Borough, four in the North and eight in the South. All of these, with one exception, were originally constructed and used for other purposes, such as private dwelling-houses, and have been adapted to meet the requirements of the Bye Laws governing Common Lodging Houses. The total number of beds at these houses is 688.

Periodical visits are made by the Sanitary Inspectors, and during the year 72 inspections were carried out. Three notices were duly served for various defects, and these were complied with.

One application was received for registration, and this was granted, the premises being to the satisfaction of the Medical Officer of Health.

There are a number of premises used as Seamen's Lodgings in the South of the Borough. These are under constant supervision of the Sanitary Inspectors. Two statutory notices were served, and both complied with. In addition, one warning letter was sent.

One of the Common Lodging Houses situated in the South of the Borough will eventually be pulled down in connection with the Royal Victoria and other Docks Approaches (Improvement) Act, 1929.



## Rag Flock Acts 1911 and 1928.

There are four premises where rag flock is being dealt with. Fifteen samples were taken during the year, and two inspections of premises were made. All samples were up to the standard, and no legal action was taken.

### Offensive Trades.

There are thirty premises where statutory offensive trades are carried on in the Borough. The following table sets out the nature of these trades :—

Nature of Offensive Trade.	No. of Premises licenced for.
Fat Melters and Bone Boilers ... ..	21
Chemical Manure Manufacturers ... ..	1
Degreasing Bones and Glue-making Con- tractors ... ..	1
Soap Boilers ... ..	3
Gut Scrapers ... ..	1
Fish Waste Collectors and Fish Meal Manu- facturers ... ..	2
Tripe Dressers ... ..	1

An application was granted for the extension of the business of Bone Boiling and Fat Melting at Barbers Road, Stratford. This business had been carried on for many years. Plans have been approved by the Council, and the buildings are being erected.

The licence was granted for a period of twelve months, subject to the requirements of the Medical Officer of Health being carried out, an application then to be made for renewal.

This firm has given an assurance that all raw material will be dealt with on the same day as received, that no storage will be necessary, and that the plant will be of the latest principle.

Application was made for permission to manufacture soap by a cold process at City Mills, High Street, Stratford. This is not an offensive trade within the meaning of the Public Health Act.

These premises were considered suitable, and no objection was raised to the carrying on of the business, provided that no fat melting took place.

In one instance the Fat Melting Licence already held by a firm was transferred to another firm.

A Schedule of Offensive Trades will be found on page 49.

Bye-Laws are in force in respect of the time and manner of conveyance of offensive material through the streets. Particulars of action taken will be found on page 63.



## Schools.

The Public Elementary Schools consist of 46 Council Schools, 13 Non-Provided Schools, 2 Higher Elementary Schools, and 2 Secondary Schools, affording, in the aggregate, 67,968 scholars.

In addition, there are two Schools for Mentally and Physically Defective Children, two Centres for the Deaf, one Open-Air Day School, one Residential Open-Air School, and two Nursery Schools, each to accommodate 120 children.

The School Medical Service is administered by the Chief School Medical Officer (who is also the Medical Officer of Health) with a whole-time staff of 6 Medical Officers, 5 Dental Surgeons, 28 Nurses, and 9 Clerks.

The Schools are, with several notable exceptions, fairly modern, substantially built buildings adequately supplied with water, and provided with sufficient surrounding air space, moreover their general cleanliness is satisfactory. Cloak-room accommodation is very limited in some Schools, and more efficient heating is desirable, and several latrines need re-modelling.

With a view to checking the spread of epidemic disease it has been the practice for many years for the Medical Officer of Health, on receiving information of the occurrence of infectious disease in the family of a scholar, to send a red-coloured Notice to the Head Teacher of the School attended (Day School and Sunday School) recommending the exclusion of children coming from the infected home. The 'Red Notice' is subsequently followed by a 'White Notice' freeing the family from quarantine on the completion of the necessary isolation and the official disinfection of the premises. Each school is provided with a supply of disinfectants for general or special use by the Education Authority.

It was not found necessary to order the closure of any School, or part of a School, on account of infectious disease, or for any other reason.

The water supply at all the Schools is taken from the mains of the Metropolitan Water Board, and no complaint has been received as to the quality of the water.



## **Smoke Abatement.**

### **Public Health Act, 1875.**

#### **Public Health (Smoke Abatement) Act, 1926.**

Six Statutory Notices were served during the year in respect of Black Smoke.

No prosecutions occurred, but proceedings were pending at the year end in respect of smoke offences at a large confectionery factory.

Fourteen Notices of Offence were served in respect of observed offences; in most cases the necessary improvement followed, rendering a formal report to the Committee unnecessary.

The large waste product factory referred to in the last Annual Report is still being conducted on model lines, and the method of dealing with the fumes from digesters and cookers has proved highly satisfactory.

One large firm of imitation leather makers was granted an exemption from action in respect of smoke whilst extensive load tests were carried out, and again later whilst high pressure steel boilers were substituted for those of older pattern.

There is one pulverised fuel-fired plant in the district, but no trouble has yet been experienced from emissions of grit.

The Chief Sanitary Inspector has delivered two instructional lectures to meetings of railway drivers and firemen during the year. Both of these were followed by lengthy technical discussions.

Local manufacturers are gradually gaining confidence, and now frequently 'phone the Inspector when, through mechanical breakdown, smoke production is temporarily unavoidable. This co-operation of the Department in their difficulties appears to be appreciated by manufacturers.

## **Places of Public Amusement.**

### **Ministry of Health Circular 120, of 1920.**

One hundred and twenty-three visits have been made to places of public amusements, and in two cases representations were made to the Licensing Committee, and the licences refused until conditions were made satisfactory.



## Housing.

Increase of Rent and Mortgage Interest Restriction Act, 1920.

The total number of certificates granted by the Authority under the above Act during the year was 27.

Number of New Houses erected during the year :—

- (a) Total (including numbers given separately under
  - (b) ... .. 12 houses and 18 flats
  - (1) By the Local Authority ... .. 12 flats
  - (2) By other Local Authorities ... .. —
  - (3) By other bodies and persons ... 12 houses and 6 flats
- (b) With State Assistance under the Housing Acts :
  - (1) By the Local Authority—
    - (a) For the purpose of Part II. of the Act of 1925 ... .. Nil
    - (b) For the purpose of Part III. of the Act of 1925 ... .. Nil
    - (c) For other purposes ... .. Nil
  - (2) By other bodies or persons ... .. Nil

1. Inspection of Dwelling-houses during the year :—

- (1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... .. 11776
- The number of inspections made ... .. 36891
- (2) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ... .. 2031
- The number of inspections made ... .. 8500
- (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... .. 8
- (4) Number of dwelling-houses (exclusive of those referred to under preceding sub-head) found not to be in all respects reasonably fit for human habitation ... .. 8489

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 ... ..

A certain number of defective Dwelling Houses are rendered fit as a result of interviews between Officials and Owners.

### 3. Action under Statutory Powers during the year :—

#### A. Proceedings under Section 3 of the Housing Act, 1925 :—

(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	...	...	...	All notices dealt with under Public Health Acts and West Ham Corporation Acts.	
(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
(3)	Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close							Nil

#### B. Proceedings under Public Health Acts :—

(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	...	8489
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :						
	(a) By Owners	...	...	...	...	...	8575
	(b) By Local Authority in default of Owners						Nil

#### C. Proceedings under Sections 11, 14, and 15 of the Housing Act, 1925 :—

(1)	Number of representations made with a view to the making of Closing Orders	...	...	...	...	8
(2)	Number of dwelling-houses in respect of which Closing Orders were made	...	...	...	...	8
(3)	Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	...	...	...	...	Nil
(4)	Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	...	2
(5)	Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	2

#### 4. Number of houses owned by the Local Authority ... 1019

Distinguishing those built in the last two years ... 18  
Under :

(1)	Part III. of the Housing Act, 1925	...	...	...	Nil
(2)	Part II. of the Housing Act, 1925	...	...	...	Nil
(3)	Other Powers (Housing Act, 1924)	...	...	...	18



## Prosecutions, 1930.

### Nuisances (Public Health Act)—

799 Summons. 457 Summonses withdrawn. 2 Summonses adjourned sine die. 1 Summons dismissed, ownership not proved. 1 Summons dismissed, tenant would not allow Builder entry.

### Failure to Comply with Magistrate's Orders—

139 Summonses. 71 Summonses withdrawn. 3 Summonses adjourned sine die. 1 Summons dismissed, ownership not proved.

### Shops (Hours of Closing) Act, 1928—

14 Summonses. 10 Summonses dismissed on payment of costs. 1 Summons dismissed, no corroboration. 3 Convictions.

### West Ham Grocers', etc., Closing Order, 1919—

9 Summonses. 4 Summonses dismissed on payment of costs. 1 Summons withdrawn, service not proved.

### West Ham Butchers' Closing Order, 1922—

1 Summons. 1 Conviction.

### Removal of Offensive Matter during Prohibited Hours—

2 Summonses. 1 Summons withdrawn. 1 Conviction.

### Removal of Offensive Matter not in a Proper Vehicle—

3 Summonses. 2 Summonses withdrawn. 1 Summons dismissed on payment of costs.

### Adulterated Milk—

5 Summonses. 1 Summons dismissed, warranty defence. 2 Summonses dismissed on payment of costs. 2 Convictions.

### Adulterated Whisky—

1 Summons. 1 Summons dismissed on payment of costs.

### Adulterated Pepper—

1 Summons. 1 Conviction.

### Adulterated Butter—

1 Summons. 1 Conviction.

### Bottling Milk in Street—

3 Summonses. 2 Summonses dismissed on payment of costs. 1 Conviction.

### Selling Sausages adulterated with Sulphur Di-oxide—

1 Summons. 1 Summons dismissed on payment of costs.

### Selling Margarine not in Proper Wrapper—

1 Summons. 1 Summons dismissed on payment of costs.

### For not having Pail at Premises containing Milk,

properly covered to prevent contamination—

1 Summons. 1 Summons dismissed on payment of costs.

### For not using all practicable precautions for preventing Milk

from being contaminated during conveyance and

distribution—

1 Summons. 1 Summons dismissed on payment of costs.

## 1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections Made by Sanitary Inspectors.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
Factories ... .. (Including Factory Laundries)	408	14	...
Workshops ... .. (Including Workshop Laundries)	238	6	...
Workplaces ... .. (Other than Outworkers' premises)	61	5	...
Total ... ..	707	25	...

## 2.—Defects found in Factories, Workshops and Workplaces.

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Acts* :—				
Want of cleanliness ...	10	10	...	1
Want of ventilation ...	...	...	...	...
Overcrowding ... ..	1	1	...	...
Want of drainage of floors	...	...	...	...
Other Nuisances ... ..	38	38	...	...
Sanitary Accommodation—				
Insufficient ... ..	7	7	...	...
Unsuitable or defective...	14	14	...	...
Not separate for sexes ...	1	1	...	...
Offences under the Factory and Workshop Acts :				
Illegal occupation of underground bakehouse (s. 101) ... ..	...	...	...	...
Other Offences ... ..	1	1	1	...
(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.)				
Total ... ..	72	72	1	1

\* Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.



## Outwork in Unwholesome Premises, Section 108.

Nature of Work (1)	Instances (2)	Notices served (3)	Prosecu- tions (4)
Wearing Apparel—			
Making, etc.....			
Cleaning and Washing.....			
Household linen.....			
Lace, lace curtains and nets.....			
Curtains and furniture hangings.....			
Furniture and upholstery.....			
Electro-plate.....			
File making.....			
Brass and brass articles.....			
Fur pulling.....			
Cables and chains.....			
Anchors and Grapnels.....			
Cart gear.....			
Locks, latches and keys.....			
Umbrellas, etc.....			
Artificial flowers.....			
Nets, other than wire nets.....			
Tents.....			
Sacks.....			
Racquet and tennis balls.....			
Paper, etc., boxes, paper bags.....			
Brush making.....			
Pea picking.....			
Feather sorting.....			
Carding, etc., of buttons, etc.....			
Stuffed toys.....			
Basket making.....			
Chocolates and sweetmeats.....			
Cosaques, Christmas crackers, Christmas stockings, etc.....			
Textile weaving.....			
Total.....	—	—	—

*No notices were served but many minor defects were remedied when pointed out by Sanitary Inspectors.*

# Inspection and Supervision of Food.

## Milk Shops and Dairies.

**Milk and Dairies (Consolidation) Act, 1915.**

**Milk and Dairies (Amendment) Act, 1922.**

**Milk and Dairies Order, 1926.**

Considerable progress has been made under the above Acts during the year. 934 visits of inspection were paid to dairies and milk purveyors' premises. 59 premises used as dairies were found to have become unsuitable for the purpose, and the occupiers were induced to apply for registration as purveyors of bottled milk only as an alternative to being called upon to show cause why registration of their premises should not be refused.

One retail purveyor was removed from the register of dairymen under the Act of 1922.

During the year, 502 persons were registered as purveyors of bottled milk only; one new dairy was registered, and the occupier registered as a dairyman; one purveyor occupying a dairy without the Borough was registered as a purveyor within the Borough, and six premises were transferred to new occupiers.

On December 31st, 1930, the number of registered dairies with occupiers registered as dairymen was 140, and in addition 641 persons appeared on the Register of Dairymen purveying milk only in the closed and unopened receptacles in which it is delivered to them, making a total of 781 persons registered as dairymen and 140 premises registered as dairies.

A comparison with 1925 will shew a decided increase in the number of registered dairies.

The number of persons selling bottled milk shows a large increase, due to the fact that a great number of small purveyors, who were selling from general shops, have substituted the sale of bottled milk for that of loose milk.

## Examination of Milk.

### Animal Inoculation.

Twenty-eight samples of milk were taken from milk purveyors (counter pans, churns and pails), and were submitted to the biological test for the presence of tubercle bacillus.

Particulars of the examinations are as under:—

No.	From where taken.	Result
1	Purveyor (Churn)	... No evidence of T.B. Infection
2	Purveyor (Counter Pan)	... No evidence of T.B. Infection
3	Cowkeeper (Counter Pan)	... No evidence of T.B. Infection



4	Council's Fever Hospital (Churn) ... ..	No evidence of T.B. Infection
5	Council's Fever Hospital (Churn) ... ..	No evidence of T.B. Infection
6	Council School (3rd pt. bt.)	No evidence of T.B. Infection
7	Purveyor (Counter Pan) ...	No evidence of T.B. Infection
8	Producer (Milk Pail) ...	No evidence of T.B. Infection
9	Council School (3rd pt. bt.)	No evidence of T.B. Infection
10*	Purveyor (Counter Pan) ...	Evidence of T.B. Infection
11	Purveyor (Hand Can) ...	No evidence of T.B. Infection
12	Purveyor (Counter Pan) ...	No evidence of T.B. Infection
13	Purveyor (Churn) ...	No evidence of T.B. Infection
14	Council School (3rd pt. bt.)	No evidence of T.B. Infection
15	Council School (3rd pt. bt.)	No evidence of T.B. Infection
16	Council School (3rd pt. bt.)	No evidence of T.B. Infection
17	Purveyor (Churn) ...	No evidence of T.B. Infection
18	Purveyor (Churn) ...	No evidence of T.B. Infection
19	Purveyor (Churn) ...	No evidence of T.B. Infection
20	Purveyor (Churn) ...	No evidence of T.B. Infection
21	Purveyor (Churn) ...	No evidence of T.B. Infection
22	Purveyor (Churn) ...	No evidence of T.B. Infection
23	Purveyor (Counter Pan) ...	No evidence of T.B. Infection
24*	Purveyor (Churn) ...	Evidence of T.B. Infection
25	Purveyor (Churn) ...	No evidence of T.B. Infection
26	Purveyor (Counter Pan) ...	No evidence of T.B. Infection
27	Council School (3rd pt. bt.)	No evidence of T.B. Infection
28	Council School (3rd pt. bt.)	No evidence of T.B. Infection

No. 10. The facts were immediately reported to the Medical Officer of Health of the area in which the milk was produced, whose Veterinary Inspector visited the farm, and took several samples of milk, all of which were submitted to the biological test for the presence of tubercle bacilli, with negative results in each case.

No. 24. Also in this case the facts were immediately reported to the Medical Officer of Health of the producing area, who caused investigation to be made by the Veterinary Inspector. All the cows were examined and, with the exception of one, no symptoms of disease were found. This animal was subjected to the Tuberculin Test, and having failed to re-act was deemed to be free from tuberculosis. A further sample was taken and found to be negative.



## Condensed Milk Regulations.

Twenty-one samples of condensed milk were taken as follows :—

Condensed Machine Skimmed Milk Sweetened ...	7
Condensed Sweetened Full Cream (one sample not genuine) ... ..	13
Condensed Unsweetened Full Cream ... ..	1

Of this number nineteen were purchased for the purpose of the equivalent test.

With regard to the sample reported upon as not being genuine, whilst the milk solids other than fat were deficient, the fat content proved to be in excess. A further sample of the same brand was taken for examination, also the equivalent test, which proved to meet the required standard.

Particulars as to labelling in each case conformed to the requirements of the regulations.

### MICROSCOPICAL EXAMINATION,

Sixteen samples of milk were taken for microscopical examination. Of these, eight proved satisfactory, six were reported upon as containing B.Coli, one excessive bacteria, and one contained excessive bacteria, B.Coli, and extraneous matter. In the case of the latter, a summons was issued under Article 14, Sub-Section 2, of the Milk and Dairies Order, 1926. For result of prosecution see page 63.

In cases where B.Coli or excessive bacteria were reported upon, letters of caution were sent, followed by the inspection of premises and utensils.

## Public Health (Preservatives, etc., in Food) Regulations.

Twenty-eight samples of various foods were reported upon as being adulterated with preservatives, as under :—

Pepper	Containing Sulphur di-oxide	Unofficial	} Prosecution followed.
Pepper	do.	Official	
Pepper	do.	Unofficial	} Letter of Caution sent.
Pepper	do.	Official	
Pepper	do.	Unofficial	} Same Retailer.
Pepper	Genuine	Unofficial	
Pepper	Containing Sulphur di-oxide	Unofficial	} Same Retailer.
Pepper	Genuine	Official	
Corned Beef	Containing Sulphur di-oxide	Official	Letter of Caution sent.



Confectionery	Containing Sulphur di-oxide	Unofficial	} Same Retailer. Letter of Caution sent.
Confectionery	do.	Official	
Confectionery	do.	Official	
Meat	do.	Unofficial	} Same Retailer. Prosecution followed.
Meat	Genuine	Official	
Sausages	Containing Sulphur di-oxide	Official	
Confectionery	do.	Unofficial	} Same Retailer. Letter of Caution sent.
Confectionery	do.	Unofficial	
Confectionery	do.	Official	
Meat	do.	Unofficial	} Same Retailer.
Meat	Genuine	Official	
Meat	Containing Sulphur di-oxide	Unofficial	} Same Retailer.
Meat	Genuine	Official	
Breakfast Sausage	Containing Sulphur di-oxide	Unofficial	} Same Retailer.
Breakfast Sausage	Genuine	Official	
Confectionery	do.	Unofficial	} Same Retailer. Letter of Caution sent.
Confectionery	do.	Official	
Confectionery	do.	Official	
Meat	do.	Unofficial	} Same Retailer. Letter of Caution sent.
Meat	do.	Official	
Meat	do.	Unofficial	} Same Retailer. Letter of Caution sent.
Meat	Genuine	Official	
Sausages	Containing Sulphur di-oxide	Official	
Meat	Containing Sulphur di-oxide	Unofficial	} Same Retailer.
Meat	Genuine	Official	
Meat	Containing Sulphur di-oxide	Unofficial	} Same Retailer.
Meat	Genuine	Official	
Beer	Containing Sulphur di-oxide	Official	Letter of Caution sent.

## MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

The following licences were granted during 1930 :—

Eight to sell Grade "A" (Tuberculin Tested) Milk including four supplementary licences; three to sell Certified Milk; one to pasteurise and sell, and eighteen to sell Pasteurised Milk, including fifteen supplementary licences; one to produce, bottle and sell, and six to sell Grade "A" milk, including five supplementary licences.

One hundred and two samples were submitted for Bacteriological Examination, the results being as follows :—

Grade "A"							
Pasteurized	(Tuberculin Tested)		Grade "A"		Certified		
Satisfactory	†Unsatisfactory	Satisfactory	Unsatisfactory	Satisfactory	†Unsatisfactory	Satisfactory	§Unsatisfactory
67	5	1	—	18	1	8	2

(†Excessive Bacteria).

(‡Bacterial Count satisfactory, but B. Coli present in 1/100th C.C.)

(§Two producers. 1, Satisfactory Count, but B. Coli in 1/10th C.C. 2, Excessive Bact. and B. Coli in 1/10th C.C.)

In all cases of milk failing to meet the requirements of the above-mentioned order, letters of caution were sent and investigations made with a view to tracing the source of contamination, and preventing a recurrence.

The improvement mentioned in my previous reports is still being maintained.

### Other Foods.

The state of all factories dealing with food of various kinds, together with the retail shops, bakehouses (there are 34 underground bakehouses) and other premises, is continually under the supervision of the District Sanitary Inspector, and 11,148 inspections were made during the year.

The Food and Drugs Inspector has also been appointed the Inspector and Official Sampler under the Fertilisers and Feeding Stuffs' Act, 1926.



## Ice Cream.

Seventeen samples of Ice Cream were taken from shops and itinerant vendors, and submitted for bacteriological examination, as under :—

- |  |   |
|--|---|
| 1. Satisfactory microbic count, but contained B.Coli in 1/10th c.c., also B.Welchii in 10th c.c. (from travelling cart) ... .. | Letter of caution sent; premises and utensils inspected.  |
| 2. Satisfactory (from stall) ...   |   |
| 3. Satisfactory microbic count, but contained B.Coli. in 1/10th c.c., also B.Welchii in 10th c.c. (from stall) ...             | Letter of caution sent; premises and utensils inspected. Sampled again; see No. 15.                             |
| 4. Bacterial count and B. Coli satisfactory, but contained B.Welchii in 10th c.c. (from travelling cart) ...                   | Warned; premises and utensils inspected.  |
| 5. Satisfactory (from stall) ...   | —   |
| 6. Satisfactory (from Box Tricycle) ... ..   | —   |
| 7. Satisfactory microbic count, but contained B.Welchii in 10th c.c. (from stall) ...  | Warned; premises and utensils inspected.  |
| 8. Satisfactory bacterial count, but contained B.Coli in 1/1000th c.c. and B.Welchii 10th c.c. (from stall) ...                | Letter of caution sent; premises and utensils inspected; sampled again, see No. 14.                             |
| 9. Bacterial count heavy and B. coli present in 1/10th c.c. (from stall) ... ..  | Letter of caution sent; premises and utensils inspected.  |
| 10. Bacterial count heavy and B. Coli present in 1/1000th c.c. (from barrow) ... ..  | Letter of caution sent; letter and copy of bacteriological report sent to M.O.H. of area in which manufactured. |
| 11. Bacterial count heavy and B. Coli present on 1/100th c.c. (from stall) ... ..  | Letter of caution sent; premises and utensils inspected; sampled again; see No. 13.                             |
| 12. Satisfactory (from barrow)   | —   |
| 13. Satisfactory (from stall) ...  | See No. 11.   |
| 14. Satisfactory (from stall) ...  | See No. 8.  |

15. Satisfactory (from stall) ... See No. 3.
16. Satisfactory (from barrow) —
17. Microbic count rather heavy Letter of caution.  
and B.Coli present in 1/10th  
c.c. ... ..

In addition, ninety-three visits were made to premises where-in ice cream is prepared for sale. The number of such premises appears to be decreasing rapidly owing to the sale by large manufacturers of ice cream prepared for sale and packed in cartons of varying sizes, which merely have to be kept at a low temperature until sold, and which are returnable if unsold.

### UNSOUND FOOD CONDEMNED.

Apples	19 boxes ; 1 barrel.
Bacon	4cwts. 104lbs.
Brussel Sprouts	73 bags ; 1 sack.
Cauliflowers	48 crates.
Cherries	9 boats.
Condensed Milk	233 tins.
Haddocks	11 stone ; 2 boxes.
Ham	53lbs. 15ozs. ; 6 tinned ; 4 boneless.
Meat Pie	1
Mussels	2 bags.
Oranges	14 cases.
Plums	68 crates.
Pork	4½lbs. ; 1 leg ; 1 loin.
Pork Tongues	8 1lb. tins ; 3lbs.
Potatoes	6cwt. ; 1 bag.
Rabbits	36.
Skate	1 box.
Skate Wings	6st.
Tomatoes	½ bundle.
Walnuts	17 bags.
Wet Fillets	12lbs.
Winkles	1 bag.

### West Ham Corporation Act, 1925.

Bye laws relating to Street Traders ; Protection of food against contamination.

All food stalls in the Borough are under constant inspection, and any infringements of the above bye-laws are immediately brought to the notice of the offender, and written warnings are sent where necessary. The inspection of all foods exposed for sale was increased during the summer Saturday evenings, with beneficial results.

One stall holder who retailed tinned foods of doubtful quality was warned off, and advised to discontinue his visits to West Ham.



# Samples Analysed by Borough Analyst, 1930.

Articles.	Analysed.		Genuine.		Adulterated.	
	Official.	Un-official.	Official.	Un-official.	Official.	Un-official.
Milk ...	345	12	335	9	10	3
Dried Milk ...	17	8	16	8	1	—
Condensed Milk ...	7	14	6	14	1	—
Butter ...	73	143	71	142	3	—
Lard ...	13	43	13	43	—	—
Margarine ...	3	7	3	7	—	—
Dripping ...	5	16	5	16	—	—
Meat ...	26	45	23	40	3	5
Tripe ...	—	5	—	5	—	—
Sausages ...	9	5	8	3	1	2
Brawn ...	—	1	—	1	—	—
Tea ...	13	7	13	7	—	—
Coffee ...	3	2	3	2	—	—
Cocoa ...	12	12	12	12	—	—
Pearl Barley ...	3	4	3	4	—	—
Flour ...	2	6	2	6	—	—
Corn Flour ...	—	3	—	3	—	—
Arrowroot ...	1	10	1	10	—	—
Peas ...	4	—	4	—	—	—
Cake ...	4	2	4	2	—	—
Jam ...	4	13	4	13	—	—
Baking Powder ...	2	8	2	8	—	—
S. R. Flour ...	16	2	16	2	—	—
Whiskey ...	5	16	3	15	2	—
Vinegar ...	25	3	24	3	2	—
Pepper ...	20	52	18	48	2	4
Ground Ginger ...	—	4	—	4	—	—
Epsom Salts ...	2	8	2	8	—	—
Seidlitz Powders ...	—	2	—	2	—	—
Liniment of Turpentine ...	1	3	1	3	—	—
Camphorated Oil ...	3	11	3	11	—	—
Cream ...	6	8	6	8	—	—
Corned Beef ...	2	2	1	2	1	—
Golden Syrup ...	—	1	—	1	—	—
Confectionery ...	17	17	12	13	5	4
Pickles ...	—	5	—	5	—	—
Sauce ...	—	1	—	1	—	—
Lime Water ...	1	1	1	1	—	—
Phosphate of Lime... ..	2	—	2	—	—	—
Lemonade Powder... ..	—	3	—	3	—	—
Gin ...	1	—	1	—	—	—
Beer ...	8	—	7	—	1	—
Cheese ...	1	3	1	3	—	—
Bacon ...	1	2	1	2	—	—
Citrate of Magnesia ...	1	—	—	—	1	—
Sherbet ...	1	—	1	—	—	—
Boracic Ointment ...	3	—	3	—	—	—
Champagne Cider ...	2	—	1	—	1	—
Sugar ...	6	2	6	2	—	—

*Continued at top of next page.*

## Samples Analysed by Borough Analyst, 1930.—Continued.

Mincemeat ...	5	7	5	7	—	—
Sultanas ...	3	1	3	1	—	—
Dried Mixed Fruit...	4	4	4	4	—	—
Mixed Peel ...	1	3	1	3	—	—
Ground Almonds ...	2	—	2	—	—	—
Fish Paste ...	1	—	1	—	—	—
Pearl Barley ...	—	2	—	2	—	—
Rice ...	—	2	—	2	—	—
Boracic Powder ...	4	—	4	—	—	—
Aniseed ...	1	—	1	—	—	—
Marmalade ...	—	1	—	1	—	—
Tapioca ...	—	1	—	1	—	—
Sago ...	—	1	—	1	—	—
Syrup of Figs ...	—	1	—	1	—	—
Totals ...	691	535	659	515	34	18

For list of prosecutions taken in connection with adulterated articles, see page 63.

### Sale of Food (Labelling) Order, 1921.

521 inspections of butchers' shops and stalls were made during the year in connection with the above, and in over 100 cases it was found that Imported Meat was exposed for sale by retail without being labelled "Imported Meat," or bearing a notice giving the country of origin. In all such cases the meat purveyor was called upon verbally to comply with the Order, and, if necessary, a letter of warning was sent in addition.

The Order is now observed generally throughout the Borough.

### Public Health Act, 1925. Section 72.

Considerable attention has been paid to the conditions under which food is prepared in cafe kitchens, restaurants, eating houses, coffee stalls. There are 188 such places in the Borough, and 255 visits have been paid to them during the year. Forty-two warning letters were sent, when the necessary improvements were made without recourse to the institution of proceedings.

One person was discovered to have been preparing and bottling ginger wine in stable premises. A warning letter was sent, whereupon the premises were immediately vacated.



Public Health (Meat) Regulations, 1924.

Slaughter House Bye Laws,  
and the Knackers' Yard Bye-Laws.

REPORT OF THE VETERINARY OFFICER  
(Mr. H. E. Bywater, M.R.C.V.S.)  
AND THE MEAT INSPECTOR (Mr. T. R. Harris).

**Scope of Report:**

This report covers the work carried out under the regulations during the year (with the exception of that relating to Stalls, Shops, Stores, etc.) ; and also that done in connection with the slaughter-house and knackers'-yard bye-laws.

**Ante Mortem Examinations.**

4,284 animals were examined before slaughter, and a number of these were noted for particular attention upon post-mortem. Several cases of notifiable disease were observed, and dealt with under the Diseases of Animals Acts.

**Post-Mortem Examinations.**

14,642 animals were examined after slaughter, and of this number 2,192, or 14.97 per cent., were diseased.

Of the 2,812 Bovines inspected, 1,097, or 39.01 per cent., were affected with tuberculosis, and 480, or 17.06 per cent., were otherwise diseased. Among the 2,674 Swine examined, 134, or 5.01 per cent., were found to be tubercular, while 164, or 6.13 per cent., were suffering with other diseases. Sheep numbered 9,155, and of these 317, or 3.46 per cent., were diseased.

Table I. gives detailed information as to the numbers and percentages of animals diseased, and in Tables II., III., and IV. particulars are given of the meat condemned and the diseases which rendered it unsound; while Table V. shows the total quantity of meat found to be unfit for human food.

**Tuberculosis.**

The incidence of tuberculosis in bovines and swine is slightly higher than in previous years.

The presence of any degree of tuberculosis in any animal necessitates a special examination to determine the extent and character of the infection prior to releasing any part of even a slightly affected carcase, and the examination of such carcasses after they have "set" has occupied much time.

In Tables VI. and VII. are set out details of the deposition of tuberculous lesions observed during post-mortem examinations.



### **Detention of Carcases.**

We have continued the practice, where a carcase is held over for re-inspection, of attaching a label to it bearing the words "Detained for further examination" or, if condemned, one with the word "Condemned" on it, and have found this useful in preventing misunderstanding.

### **Disposal of Condemned Meat.**

Condemned meat and offal is released, under supervision, for industrial purposes. Prior to release, a powerful dye or strong disinfectant is sprinkled over it to render it useless for human food.

We were successful in effecting the voluntary surrender of all meat and offal condemned by us.

### **Times of Slaughtering.**

Slaughtering occurs in the Borough on all days of the week, including Sunday, and may take place at any time during the twenty-four hours; as a result, the work of inspection often has to be continued until a late hour of the day, and also on Public Holidays and on Sundays.

### **Prosecutions.**

A number of infringements of the regulations and bye-laws were observed, but as these were remedied following verbal warnings, it was not deemed necessary to report any cases for legal proceedings.

### **Slaughter of Animals Bill.**

The object of this Bill, which passed its second reading in the House of Commons in December, is to ensure "that all animals slaughtered in slaughter-houses and knackers' yards in England, whether for human food or otherwise, shall be humanely killed," and provides, among other things, "that all animals shall be instantaneously killed or instantaneously stunned by a mechanically operated instrument," and "that all slaughtermen shall be licensed so that only competent and reliable men shall be engaged in the work." It is doubtful, however, whether this Bill will become law.

A provision relating to the use of a mechanically operated instrument was incorporated in the slaughter-house bye-laws by the Council in 1921, so that although this Bill may not become law the use of the "humane killer" will continue to be compulsory in slaughter-houses in this district.



## **Insurance against Tuberculosis.**

Butchers frequently experience heavy losses as a result of the condemnation by the Health Authorities of carcasses affected with tuberculosis, and in order to cover themselves against such losses they have been instrumental in starting insurance schemes at a number of the livestock markets.

Both the farmers and the butchers contribute so much per head in respect of each beast bought in the market, and from the fund so created the butchers are compensated when losses are sustained.

Such schemes benefit the farmers, as the butchers are usually willing to pay higher prices for insured as against uninsured beasts; while the butchers are protected against losses in cases of condemnation.

The promotion of such schemes is to be welcomed, and it would be of benefit if similar insurance schemes were in existence at all livestock markets.

Several butchers in this district now buy practically all their beasts at markets where insurance schemes are in operation.

## **Applications for Licences.**

Thirteen applications were received for the renewal of Slaughter-House licences. Twelve were granted, one being refused as the slaughter-house is used as a machine-room for the making of sausages, etc.

An application for the renewal of a Knacker's-Yard licence was also received and granted.

TABLE I.

Table showing Animals examined post-mortem and those found to be Diseased.

Class of Animals.	Number Inspected	Affected with T.B.		Affected with other Diseases.	
		No.	Percentage.	No.	Percentage
<b>Bovines—</b>					
Bulls ... ..	32	10	31.25	4	12.50
Bullocks ... ..	706	66	9.34	127	17.98
Cows ... ..	1,638	999	60.98	302	18.43
Heifers ... ..	232	20	8.62	45	19.39
Calves ... ..	204	2	0.98	2	0.98
<b>Swine—</b>					
Boars ... ..	15	...	...	1	6.66
Sows ... ..	36	3	8.33	6	16.66
Porkers ... ..	2,623	131	4.99	157	5.98
<b>Ovines—</b>					
Sheep ... ..	6,113	...	...	303	4.95
Lambs ... ..	3,042	...	...	14	0.46
<b>Caprines—</b>					
Goats ... ..	1	...	...	...	...
Kids ... ..	...	...	...	...	...
<b>TOTALS ... ..</b>	<b>14,642</b>	<b>1,231</b>	<b>8.40</b>	<b>961</b>	<b>6.56</b>



TABLE II.

Table showing Meat found to be Unfit for Human Food, and the Disease or Condition which required its Condemnation.

## BOVINES.

Disease or Condition.	Entire Carcases and Viscera	Heads.	Tongues.	Forequarters.	Shins.	Aitch Bones.	Clods.	Stickings.	Briskets.	Legs.	Flanks.	Loins.	Rumps.	Hearts.	Lungs.	Diaphragms.	Stomachs.	Omenta.	Intestines.	Mesenteries.	Livers.	Pancreas.	Spleens.	Kidneys.	Kidney Knobs.	Mammary Glands.	Top Pieces.
Tuberculosis ...	18	273	273	17	...	...	4	6	4	...	3	5	1	10	905	16	18	5	6	195	109	52	9	27	6	32	2
Actinomycosis & Actinobacillosis ...	...	16	31	...	...	...	...	...	...	...	...	...	...	...	7	...	...	...	...	...	1	...	...	...	...	...	...
Johne's Disease ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bacillary Necrosis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...
Pneumonia ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	16	...	...	...	...	...	...	...	...	...	...	...	...
Distomatosis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	52	...	...	...	...	...	367	...	...	...	...	...	...
Ecchinococcus Veterinorum	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cysts ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	43	...	...	...	...	...	28	...	...	1	...	...	...
Abscesses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	...	...	...	...	50	...	...	...	...	...	...
Fatty Degeneration ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...	...	...	...	...	...
Cavernous Angioma ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	34	...	...	...	...	...	...
Emaciation ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...
Bruises Fractures	...	...	...	...	1	4	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cystic	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...
Cirrhosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...
Oedema	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Blood Aspiration	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...
Hepatitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7	...	...	...	...	...	...	...	...	...	...	...	...
Pleurisy	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nephritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	13	...	...	...	...
Mastitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	306	...
TOTALS ...	20	289	304	17	1	4	4	6	4	4	3	5	1	10	1035	17	18	5	6	196	597½	52	9	43	6	338	2





TABLE III.

Table showing Meat found to be Unfit for Human Food, and the Disease or Condition which required its Condemnation.

## SWINE.

Disease or Condition.				Entire Carcases and Viscera.	Heads and Collars.	Hands and Springs.	Spare Ribs and Blade Bones.	Bellies.	Loins.	Legs.	Hearts.	Lungs.	Stomachs.	Intestines.	Mesenteries.	Livers.	Spleens.	Kidneys.	Omenta
Tuberculosis ...	...	...	...	4	60	3	...	3	3	...	1	39	9	5	77	34	13	3	...
Toxaemia ...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hydraemia ...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia ...	...	...	...	...	...	...	...	...	...	...	...	78	...	...	...	...	...	...	...
Septic Pneumonia ...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Haemorrhagic ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	5	...	...
Bruises and Fractures ...	...	...	...	...	...	...	...	...	1½	...	...	...	...	...	...	...	...	...	...
Blood Aspiration ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fatty Degeneration ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Oedema ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Emaciation ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cirrhosis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	44	...	...	...
Pleurisy ...	...	...	...	...	...	...	...	...	...	...	...	17	...	...	...	...	...	...	...
Pericarditis ...	...	...	...	...	...	...	...	...	...	...	6	...	...	...	...	...	...	...	...
Hepatitis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nephritis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTALS...	...	...	...	9	60	3	...	3	4½	...	7	134	9	5	77	79	18	3	...

TABLE IV.

Table showing Meat found to be Unfit for Human Food,  
and the Disease or Condition which required its  
Condemnation.

## OVINES.

Disease or Condition.	Kidneys	Entire Carcases and Viscera.	Hearts.	Lungs.	Legs.	Breasts.	Livers.	Shoulders
Pneumonia ... ..	...	...	...	2	...	...	...	...
Distomatosis ... ..	...	...	...	...	...	...	188½	...
Ecchinococcus Veterinorum Cysts	...	...	...	2	...	...	2	...
Tenuicollis Embryos ... ..	...	...	...	1	...	...	70½	...
Strongylosis ... ..	...	...	...	19	...	...	1	...
Abscesses ... ..	...	...	...	2	...	...	...	...
Pyrexia ... ..	...	...	...	...	...	...	...	...
Emaciation ... ..	...	2	...	...	...	...	...	...
Bruises and Fractures ... ..	...	...	...	...	...	...	...	...
Cirrhosis ... ..	...	...	...	...	...	...	1	...
Pleurisy ... ..	...	...	...	10	...	...	...	...
Pericarditis ... ..	...	...	2	...	...	...	...	...
Nephritis ... ..	1	...	...	...	...	...	...	...
TOTALS ... ..	1	2	2	36	—	—	263	—



# TABLE V.

Table showing Unsound Meat Condemned as a result of Post-Mortem Examinations.

## Bovines—

Entire Carcases and Viscera	...	20
Heads	...	289
Tongues	...	304
Forequarters	...	17
Shins	...	1
Clods	...	4
Stickings	...	6
Briskets	...	4
Flanks	...	3
Loins	...	5
Rumps	...	1
Aitch Bones	...	4
Top Pieces	...	2
Legs	...	4
Hearts	...	10
Lungs	...	1035
Diaphragms	...	17
Stomachs	...	18
Omenta	...	5
Intestines	...	6
Mesenteries	...	196
Livers	...	597½
Pancreas	...	52
Spleens	...	9
Kidneys	...	43
Kidney Knobs	...	6
Mammary Glands	...	338

## Swine—

Entire Carcases and Viscera	...	9
Heads and Collars	... ..	60
Hands and Springs	... ..	3
Bellies	... ..	3
Loins	... ..	4½
Hearts	... ..	7
Lungs	... ..	134
Stomachs	... ..	9
Intestines	... ..	5
Mesenteries	... ..	77
Livers	... ..	79
Spleens	... ..	18
Kidneys	... ..	3

## Ovines—

Entire Carcases and Viscera	...	2
Hearts	... ..	2
Lungs	... ..	36
Livers	... ..	263
Kidneys	... ..	1



TABLE VI.

Table showing deposition of Tubercular Lesions found in the Bones and Organs and on the Serous Membranes of Bovines and Swine.

Class of Animals	No. of Animals affected with T.B.	Cervical Vertebrae	Dorsal Vertebrae	Adrenal Bodies.	Kidneys. (Substance)	Mammary Glands	Pleura	Peritoneum.	Hearts.				Lungs.		Livers.		Pancreas		Stomachs		Omenta.	Spleens.		Intestines.		Mesenteries (Surface).	Uteri & Ovaries.		Testicles & Penis
									Pericardium	Epicardium.	Myocardium.	Endocardium.	Pleura.	Parenchyma.	Capsule.	Substance.	Capsule.	Substance.	Outer Surface.	Inner Surface.		Capsule.	Substance.	Outer Surface.	Inner Surface.		Capsule.	Inner Surface or Substance.	
Bovines—																													
Bulls	10	...	...	...	...	...	...	...	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bullocks	66	...	...	...	1	...	3	1	1	...	...	...	1	20	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...
Cows	999	1	12	12	11	7	38	21	17	2	1	...	19	433	13	36	8	1	11	...	14	17	...	...	...	...	...	...	...
Heifers	20	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	6	...	...
Calves	2	...	...	...	1	...	1	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...
Swine—																													
Boars	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Sows	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Porkers	131	...	...	...	1	...	3	1	1	...	...	...	1	26	1	26	...	...	...	...	...	...	12	...	...	...	...	...	...





TABLE VII.

Table showing deposition of Tubercular Lesions found in the Lymphatic Systems of Bovines and Swine

Class of Animals	No. of Animals affected with T.B.	Sub-Maxillary.	Retro-Pharyngeal	Parotid.	Atlantal	Pre-Scapula.	Pre-Pectoral.	Pre-Sternal.	Supra-Sternal.	Sub-Dorsal.	Renal.	Lumbar.	Iliacs.	Pre-Crural.	Supra-Mammary or Sup-Inguinal.	Ischiatic	Popliteal.	Pericardial.	Bronchial.	Anterior Mediastinal.	Posterior Mediastinal.	Gastric.	Splenic.	Hepatic.	Pancreatic.	Mesenteric.
Bovines—																										
Bulls	10	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10	5	7	...	...	...	...	1
Bullocks	66	6	17	...	...	...	...	1	1	...	1	1	...	...	...	...	...	37	28	23	...	...	8	2	12	
Cows	999	27	247	4	...	15	19	19	15	8	20	8	10	2	10	...	2	15	779	594	593	8	5	114	52	196
Heifers	20	1	6	1	...	...	...	...	...	...	...	...	1	...	...	...	1	...	15	13	11	...	...	5	3	6
Calves	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	...	...	...	...	...
Swine—																										
Boars	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Sows	3	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Porkers	1	57	...	1	...	1	1	1	...	...	1	1	1	1	1	...	1	...	16	1	1	10	...	12	...	80

**Milk and Dairies (Consolidation) Act, 1915.**

**Milk and Dairies Order, 1926.**

**Milk (Special Designations) Order, 1923.**

**Diseases of Animals Acts—**

**Tuberculosis Order of 1925.**

**THE REPORT OF THE VETERINARY OFFICER.**

Cowsheds and dairy cattle within the borough boundaries are inspected monthly under the provisions of the Milk Acts and Orders and as occasion demands under the Tuberculosis Order; at the same time the general hygienic conditions governing the production of milk are also supervised.

There were 1,730 inspections of cattle made during the year, and where it appeared desirable, samples of milk, etc., were taken for microscopical examination. Twenty-one samples of milk and four of sputum were thus taken, and in addition the tuberculin test was applied to two animals.

These measures resulted in the detection of five cows which were subject to be dealt with under the Tuberculosis Order, and in consequence these cattle were slaughtered. Three of these were cases of tubercular infection of the udder, while two were cases of lung infection, and were expelling tubercle bacilli.

Post mortem examinations were conducted, and the extent of the infection certified as advanced or non-advanced within the meaning of the order, and upon this was based the scale of compensation paid to the owners of the slaughtered cattle, i.e., 75% of the market value of the animal in non-advanced, and 25% of the value, or a minimum of forty-five shillings, in advanced cases.

If the diagnosis is not confirmed by post-mortem examination the full value of the animal, plus one pound, is payable.

Compensation amounting to £62 15s. was thus paid during the year; in one case only was the disease so established that the minimum amount allowable was awarded.

The carcasses of these animals are used for the manufacture of manures, etc., under supervision.

The Tuberculosis Order was introduced to permit of the destruction of any bovine animal suffering with tuberculosis in such a form as to contaminate the milk supply or to be a source of danger to other animals. The majority of cattle affected with the disease do not come within the scope of the Order, although they must be regarded as a source of potential infection.



# Fertilisers and Feeding Stuffs Act, 1926.

## FEEDING STUFFS.

The following table sets out samples taken under the above Act during the year:—

Article	No. of Samples taken	Analysis agrees	Analysis disagrees
Barley Meal ...	2	2	—
Biscuit Meal ...	3	3	—
Bran ...	1	1	—
Clover Cob Meal ...	1	1	—
Dried Yeast ...	1	1	—
Dry Mash ...	1	1	—
Fattening Meal ...	2	1	1
Feeding Fish Meal ...	2	2	—
Feeding Meat and Bone Meal ...	2	1	1
Fish Meal ...	2	1	1
Fine Biscuit Meal ...	2	—	2
Green Bone Meal ...	2	2	—
Ground Oats ...	1	1	—
Laying Meal ...	1	1	—
Linseed Meal ...	3	3	—
Maize Germ Meal ...	2	2	—
Meat and Bone Meal...	9	7	2
Meatine Poultry Food (Fine) ...	1	1	—
Meat Meal ...	1	—	1
Middlings ...	2	2	—
Rapid Fattening Cake- lettes ...	1	1	—
Special Laying Meal...	1	1	—
White Feeding Fish Meal ...	4	—	4

## FERTILISERS.

Article	No. of Samples taken		Analysis agrees		Analysis disagrees	
Basic Slag	...	2	...	2	...	—
Canary Guano	...	2	...	2	...	—
Complete Fertiliser	...	1	...	1	...	—
Dried Blood Manure	...	1	...	1	...	—
Fertility	...	3	...	3	...	—
Garden Bone Meal	...	1	...	1	...	—
Hop Manure	...	1	...	—	...	1
Kainit	...	1	...	1	...	—
Muriate of Potash	...	1	...	1	...	—
Nitrate of Soda	...	1	...	1	...	—
Peruvian Guano	...	1	...	1	...	—
Potato Manure	...	2	...	2	...	—
Raw Peruvian Guano...	...	1	...	1	...	—
Steamed Bone Flour...	...	1	...	1	...	—
Sulphate of Ammonia...	...	2	...	2	...	—
Superphosphate	...	1	...	1	...	—
Tomato Fertiliser	...	1	...	1	...	—
T—— Manure	...	1	...	—	...	1

## Factory and Workshops Act, 1901.

### Ministry of Health (Transfer of Powers) Order 1921.

**Bakehouses.** The number of bakehouses on the register is as follows :—

Factories	...	...	...	...	61
Domestic Factories	...	...	...	...	3
Workshops	...	...	...	...	8
Domestic Workshops	...	...	...	...	5
Domestic Bakehouses	...	...	...	...	8
Cellar Bakehouses	...	...	...	...	35
					120

The number of cellar bakehouses certified by the Council under the Factory and Workshop Act, 1901, was 43, but nine of these have lapsed.

During the year the sanitary inspectors have made 252 visits to bakehouses, and appropriate action has been taken in cases where conditions have not been considered satisfactory.



## Infectious Diseases.

### NOTIFIABLE DISEASES (Other than T.B.).

The following table shows the number of cases of notifiable diseases occurring during the year 1930, together with the number removed to hospitals and the total number of deaths from each disease.

Diseases.	Cases Notified.	Removed to Hospital	Total Deaths.
Smallpox ... ..	827	827	...
Diphtheria ... ..	858	806	34
Scarlet Fever ... ..	906	710	4
Enteric Fever (including Paratyphoid) ...	5	5	1
Puerperal Fever ... ..	20	9	9
Pneumonia (all forms) ... ..	355	95	250
Cerebro Spinal Fever ... ..	12	9	9*
Acute Polio Myelitis ... ..	5	1	1
Acute Polio Encephalitis ... ..	...	...	...
Encephalitis Lethargica ... ..	3	2	...
Erysipelas ... ..	225	41	...
Ophthalmia Neonatorum ... ..	22	15	...
Malaria ... ..	1	...	...
Continued Fever ... ..	4	1	...
Dysentery ... ..	...	...	...
Puerperal Pyrexia ... ..	66	41	...

\* Includes unnotified cases.

Table indicating deaths during the past seven years from:—

Year	Scarlet Fever	Whooping Cough	Measles
1922 .....	9	175	118
1923 .....	7	23	12
1924 .....	4	84	114
1925 .....	6	81	32
1926 .....	7	20	78
1927 .....	7	73	6
1928 .....	5	26	69
1929 .....	6	114	22
1930 .....	4	19	78
	— 55	— 615	— 529

### Scarlet Fever (Return Cases).

Cases occurring within the margin of one month from the discharge of a case from Hospital to the same house were regarded as "Return Cases." Of 710 admitted to Hospital 12, or 1.6 per cent., were associated with recurrent infections in this way, (see also report of Medical Superintendent of Plaistow Fever Hospital—pages 96-105).



## Laboratory Work.

Bacteriological Work is carried out at the various Municipal Institutions.

At Plaistow Fever Hospital, in addition to the routine bacteriological work of the Hospital, any medical practitioner may have a bacteriological report upon any case of suspected diphtheria, typhoid or cerebro-spinal fever.

Samples of Graded Milk, Ordinary Milk, and other articles are sent to Queen Mary's Hospital for bacteriological examination.

All specimens of sputum suspected to contain the tubercle bacillus are examined at the Tuberculosis Dispensary, Balaam Street, E.13.

Samples of water, milk, and food stuffs are analysed by a Public Analyst, who is a part-time Officer of the Council.

### CASES OF SICKNESS EXTRACTED FROM THE SUPERINTENDENT OF VISITORS' SCHOOL ATTENDANCE RETURNS.

Measles, including German Measles	2571
Chicken Pox .....	1220
Whooping Cough .....	440
Mumps .....	1115
Tonsillitis .....	283
Other Diseases .....	2173

On account of the continued prevalence of Smallpox, only cases of Chicken Pox were visited, whereas under ordinary circumstances all the cases of sickness mentioned above would have been visited.

## Special Diseases Report.

### Cerebro-Spinal Meningitis.

Nine cases were notified during 1930 (eight males, ranging from six months to nineteen years, and one female, 52 years). Only three of these cases recovered, being males of the ages of eight months, nine months and nineteen years respectively.

#### Meningitis.

One case notified, female of seven years, died from Tubercular Meningitis.

#### Meningococcal Meningitis.

One case, a male of four months, who died.

#### Poliomyelitis.

Four cases were notified (three males aged 1 year 2 months, 2 years, and 6 years, and one female aged 2 years 3 months). All are making satisfactory progress—three still attend Hospital for massage, and one is at a Convalescent Home.

#### Encephalitis Lethargica.

Two cases were notified; one (male 52 years) died, and the certified cause of death was Septic Meningitis. The other (female 29 years) is still being attended by her private doctor; she is now blind and partially paralysed.



# Summary of Notifications.

Week Ending 1930	Scarlet Fever	Diphtheria	Enteric Fever	Puerperal Fever	Small Pox	Typhus Fever	Cerebro Spinal Fever	Acute Poliomyelitis	Acute Polio Encephalitis	Encephalitis Lethargica	Erysipelas	Ophthalmia Neonatorum	Tuberculosis		Pneumonia	Malaria	Dysentery	Trench Fever	Relapsing Fever	Continued Fever	Puerperal Pyrexia
													Respiratory	Other Forms							
Jan. 4	33	24	—	—	20	—	1	—	—	—	12	—	6	1	10	—	—	—	—	—	2
" 11	35	17	—	—	38	—	1	1	—	—	13	1	10	1	11	—	—	—	—	—	—
" 18	33	18	—	—	35	—	—	—	—	1	8	—	12	2	9	—	—	—	—	1	1
" 25	27	29	—	1	36	—	—	—	—	—	6	1	2	—	11	1	—	—	—	—	—
Feb. 1	27	18	—	1	31	—	—	—	—	—	6	1	11	2	11	—	—	—	—	1	—
" 8	22	23	—	1	32	—	—	—	—	—	8	1	21	4	5	—	—	—	—	—	2
" 15	15	29	—	1	25	—	1	—	—	—	4	1	9	—	9	—	—	—	—	—	3
" 22	13	32	—	—	38	—	—	—	—	—	4	—	9	4	7	—	—	—	—	—	1
Mar. 1	22	28	—	1	11	—	1	—	—	1	5	—	5	3	11	—	—	—	—	—	4
" 8	13	27	—	—	27	—	—	—	—	—	4	—	10	1	20	—	—	—	—	—	2
" 15	20	21	—	2	28	—	2	—	—	—	7	—	7	2	7	—	—	—	—	—	1
" 22	12	21	—	—	11	—	—	—	—	—	5	—	11	—	14	—	—	—	—	—	1
" 29	18	20	1	1	27	—	—	—	—	—	4	1	9	3	11	—	—	—	—	—	1
April 5	26	15	—	—	27	—	1	—	—	—	9	—	7	2	15	—	—	—	—	—	2
" 12	9	16	—	1	12	—	—	—	—	—	7	1	13	4	9	—	—	—	—	—	1
" 19	15	20	—	—	15	—	—	—	—	—	1	2	9	1	12	—	—	—	—	—	3
" 26	14	9	—	—	18	—	—	—	—	—	3	—	8	—	3	—	—	—	—	—	1
May 3	16	21	—	—	12	—	—	—	—	—	2	1	11	6	5	—	—	—	—	—	3
" 10	20	17	1	—	21	—	2	—	—	—	5	1	10	2	9	—	—	—	—	—	2
" 17	16	12	1	—	10	—	—	—	—	—	2	2	8	4	11	—	—	—	—	—	1
" 24	18	17	—	1	12	—	1	—	—	—	7	1	15	2	1	—	—	—	—	—	2
" 31	11	16	—	—	26	—	—	—	—	—	5	—	12	6	3	—	—	—	—	—	—
June 7	19	14	—	—	18	—	—	—	—	—	1	—	14	5	4	—	—	—	—	—	2
" 14	11	7	—	1	28	—	1	—	—	—	4	—	13	2	5	—	—	—	—	1	—
" 21	6	15	—	—	15	—	—	—	—	—	2	—	12	2	1	—	—	—	—	—	5
" 28	10	14	—	—	14	—	—	—	—	—	3	—	12	1	3	—	—	—	—	—	1
July 5	8	19	—	—	10	—	—	—	—	—	2	—	10	2	5	—	—	—	—	—	1
" 12	17	18	—	—	6	—	—	—	—	—	—	1	11	1	6	—	—	—	—	—	2
" 19	22	16	1	—	2	—	—	—	—	1	4	—	11	4	2	—	—	—	—	—	—
" 26	23	7	1	1	—	—	—	—	—	—	4	—	9	3	6	—	—	—	—	—	2
Aug. 2	22	13	—	—	3	—	—	—	—	—	3	—	14	7	2	—	—	—	—	—	1
" 9	12	6	—	—	3	—	—	—	—	—	1	—	10	1	1	—	—	—	—	—	1
" 16	14	6	—	1	2	—	—	—	—	—	6	—	15	1	1	—	—	—	—	—	1
" 23	15	11	—	1	4	—	—	—	—	—	—	—	8	—	6	—	—	—	—	—	3
" 30	9	11	—	1	9	—	—	—	—	—	2	—	7	—	1	—	—	—	—	—	—
Sept. 6	6	8	—	—	6	—	—	1	—	—	3	—	18	5	2	—	—	—	—	—	1
" 13	23	10	—	—	2	—	—	—	—	—	2	1	7	3	2	—	—	—	—	—	—
" 20	14	4	—	—	5	—	—	—	—	—	4	—	11	—	1	—	—	—	—	—	—
" 27	25	9	—	—	4	—	—	1	—	—	5	—	8	1	3	—	—	—	—	—	—
Oct. 4	11	21	—	—	9	—	—	—	—	—	4	—	13	4	5	—	—	—	—	—	1
" 11	23	23	—	—	6	—	1	—	—	—	4	1	9	1	7	—	—	—	—	—	—
" 18	25	16	—	1	22	—	—	1	—	—	5	1	9	6	4	—	—	—	—	—	1
" 25	11	19	—	1	8	—	—	1	—	—	3	—	9	2	8	—	—	—	—	—	1
Nov. 1	28	10	—	—	15	—	—	—	—	—	4	—	7	1	8	—	—	—	—	—	5
" 8	5	22	—	—	10	—	—	—	—	—	4	—	10	—	9	—	—	—	—	—	1
" 15	26	17	—	1	5	—	—	—	—	—	5	—	7	3	5	—	—	—	—	—	—
" 22	22	22	—	1	24	—	—	—	—	—	4	1	10	2	9	—	—	—	—	—	—
" 29	18	18	—	—	19	—	—	—	—	—	4	1	9	2	8	—	—	—	—	—	1
Dec. 6	15	15	—	—	5	—	—	—	—	—	—	—	4	1	9	—	—	—	—	—	—
" 13	12	16	—	—	21	—	—	—	—	—	9	—	11	4	8	—	—	—	—	—	1
" 20	11	13	—	—	23	—	—	—	—	—	5	—	4	1	16	—	—	—	—	1	—
" 27	8	8	—	1	17	—	—	—	—	—	1	—	9	—	4	—	—	—	—	—	1
TOTALS	906	858	5	20	827	—	12	5	—	3	225	22	516	121	355	1	—	—	—	4	66





## Disinfection.

The following return sets out the diseases for which disinfection took place in the Northern and Southern parts of the Borough respectively :—

Disease	North	South	Totals
Scarlet Fever .....	418	502	920
Diphtheria .....	389	503	892
Tuberculosis .....	232	307	539
Enteric Fever .....	—	8	8
Cerebro-Spinal Fever ...	1	1	2
Erysipelas ... ..	5	2	7
Pneumonia and Measles	5	5	10
Cancer .....	20	4	24
Small Pox .....	122	705	827
Schools .....	78	173	251
General Disinfections .....	21	32	53
Disinfestations .....	42	25	67
Total ...			3600

In some instances more than one room was disinfected in respect of one notified case.

## PLAISTOW HOSPITAL.

### Report of Medical Superintendent.

(Dr. D. MacIntyre.)

The total number of cases under treatment during 1930 was 1,892. This compares with 2,190 in the previous year. The decrease in numbers was due mainly to a decline in the prevalence of scarlet fever. Diphtheria admissions also showed a slight falling off towards the end of the year. The total deaths numbered 52 as compared with 59 in the previous year.

Scarlet fever admissions fell to 670, as compared with 983 in 1929, and 916 in 1928. The type of disease continued mild; only one case proved fatal.

Diphtheria numbers were approximately the same as last year, but the type was somewhat milder. The deaths dropped to 24 as compared with 33 in 1929.

Measles of a severe type was prevalent during the first five months of the year, and with diphtheria it was responsible for 75 per cent. of the total deaths.

Whooping cough cases were few, and the type was not very severe.

Only 6 cases of typhoid fever were under treatment. All recovered.

The chief causes of death are briefly summarised as follows:

Diphtheria	.....	24 deaths.
Measles	.....	15 deaths.
Cerebro Spinal Fever	.....	3 deaths.
Scarlet Fever	.....	1 death.
Whooping Cough	.....	1 death.
Pneumonia	.....	1 death.
Erysipelas	.....	1 death.
Other Diseases	.....	6 deaths.

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52

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The fatality rate, calculated on all the cases admitted during the year, was 3.15 per cent.

At the beginning of the year there were 242 patients in residence, and 1,650 were admitted during the year, making a total of 1,892 cases under treatment. Of these, 1,669 were discharged as recovered, 52 died, and 171 remained under treatment at the end of the year.

Table I. shows the admissions and deaths for each month of the year, and in Table II. there is shown the annual admissions from the principal infectious diseases since the Hospital was opened.



TABLE II.

Year.	Scarlet Fever.		Diphtheria.		Typhoid Fever.		Measles.		Pneumonia.		Whooping Cough.		Erysipelas.	
	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.
1896 ...	170	8	114	23	...	...	...	...	...	...	...	...	...	...
1897 ...	188	6	163	21	...	...	...	...	...	...	...	...	...	...
1898 ...	206	4	249	42	...	...	...	...	...	...	...	...	...	...
1899 ...	192	2	309	49	...	...	...	...	...	...	...	...	...	...
1900 ...	177	4	269	36	...	...	...	...	...	...	...	...	...	...
1901 ...	203	16	310	66	47	4	...	...	...	...	...	...	...	...
1902 ...	257	12	431	72	138	30	...	...	...	...	...	...	...	...
1903 ...	370	10	334	48	84	17	...	...	...	...	...	...	...	...
1904 ...	679	29	351	31	95	15	...	...	...	...	...	...	...	...
1905 ...	747	18	438	53	62	14	...	...	...	...	...	...	...	...
1906 ...	806	18	421	70	127	18	...	...	...	...	...	...	...	...
1907 ...	667	29	422	82	68	12	...	...	...	...	...	...	...	...
1908 ...	665	26	373	47	73	12	...	...	...	...	...	...	...	...
1909 ...	990	32	337	35	34	5	...	...	...	...	...	...	...	...
1910 ...	655	17	260	45	71	14	...	...	...	...	...	...	...	...
1911 ...	491	13	295	52	79	15	...	...	...	...	...	...	...	...
1912 ...	562	17	291	35	49	10	...	...	...	...	...	...	...	...
1913 ...	782	13	333	24	42	6	...	...	...	...	...	...	...	...
1914 ...	699	10	380	43	36	7	...	...	...	...	...	...	...	...
1915 ...	575	8	403	60	40	11	...	...	...	...	...	...	...	...
1916 ...	310	7	533	64	23	2	...	...	...	...	...	...	...	...
1917 ...	304	8	559	67	27	4	...	...	...	...	...	...	...	...
1918 ...	213	4	464	70	25	...	...	...	...	...	...	...	...	...
1919 ...	373	3	601	57	15	2	18	2	5	2	...	...	...	...
1920 ...	748	6	769	62	14	3	11	...	2	2	...	...	1	...
1921 ...	1,119	10	560	32	7	...	1	...	2	2	...	...	...	...
1922 ...	592	8	611	40	3	1	15	...	5	1	21	4	1	...
1923 ...	412	7	671	23	10	...	33	...	12	6	...	...	10	...
1924 ...	317	4	713	27	2	1	100	19	24	7	44	15	8	...
1925 ...	412	4	719	18	5	1	81	6	24	2	22	8	14	1
1926 ...	899	6	647	13	7	...	85	17	25	5	5	2	15	2
1927 ...	1,250	3	816	34	12	2	19	1	17	5	13	5	5	...
1928 ...	916	3	901	29	7	...	60	9	16	3	13	4	17	1
1929 ...	983	5	741	33	4	...	20	2	19	5	17	9	15	1
1930 ...	670	1	719	24	5	...	86	15	11	1	12	1	14	1
...														

1930	ADMISSIONS.											DEATHS.										
	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Measles.	Pneumonia	Erysipelas.	Chicken- pox.	Puerperal Fever.	Whooping Cough.	Other Diseases.	Total.	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Measles.	Pneumonia	Erysipelas.	Chicken- pox.	Puerperal Fever.	Whooping Cough.	Other Diseases.	Total.
January ...	74	60	...	6	...	1	...	...	...	2	143	...	2	...	3	...	...	...	...	...	...	5
February ...	54	72	...	23	...	...	...	...	1	13	163	...	1	...	2	...	...	...	...	...	...	3
March ...	48	78	...	22	3	1	...	...	1	8	161	...	5	...	3	...	...	...	...	1	1	10
April ...	43	61	...	17	...	1	...	...	3	9	134	...	4	...	4	...	...	...	...	...	1	9
May ...	70	68	...	12	1	1	...	...	1	12	165	...	3	...	3	...	...	...	...	...	2	8
June ...	51	61	...	3	2	...	...	...	2	8	127	...	1	...	...	1	...	...	...	...	...	2
July ...	58	53	...	1	...	...	...	...	1	16	129	...	1	...	...	...	...	...	...	...	2	3
August ...	42	30	...	...	...	1	...	...	1	14	88	...	...	...	...	...	...	...	...	...	...	...
September ...	47	28	...	1	...	2	...	...	1	8	87	...	1	...	...	...	...	...	...	...	...	...
October ...	97	90	...	...	1	3	...	...	1	22	214	...	4	...	...	...	...	...	...	...	2	6
November ...	36	54	...	1	1	3	...	...	...	9	104	...	...	...	...	...	...	...	...	...	...	...
December ...	50	64	...	...	3	1	...	...	...	17	135	1	2	...	...	...	1	...	...	...	1	5
Totals ...	670	719	...	86	11	14	...	...	12	138	1,650	1	24	...	15	1	1	...	...	1	9	52



## Scarlet Fever.

139 patients were under treatment at the beginning of 1930, and 694 cases, notified as scarlet fever, were admitted during the year. Of these, 24 cases were found on admission to be not suffering from the disease, and in 47 other cases the diagnosis remained doubtful. Six of the latter contracted the infection in the wards. Four patients whose diagnosis was confirmed on admission had a relapse during the third week of illness.

A scarlatiniform rash, of varying degrees of intensity, was present in 61 per cent. of the cases on admission, 9 per cent. were desquamating on admission, and 23 per cent. desquamated later, but in 7 per cent. no rash or desquamation was detected during residence. The average duration of illness of all cases on admission was 5.68 days.

During the year 723 cases were discharged recovered, 1 died, and 85 remained under treatment at the end of the year. The fatal case was a child, aged 1 year, who was suffering from the septic type of the disease. The fatality rate was .11 of the cases discharged. Scarlet fever antitoxin was administered to 27 cases; the average dose was 15 c.c.

In 44 of the cases discharged the disease was complicated by the presence of other infections as follows:—

Scarlet Fever with Nasal Diphtheria .....	15 cases.
"    "    "    Faucial Diphtheria .....	6    "
"    "    "    Measles .....	9    "
"    "    "    Mumps .....	2    "
"    "    "    Chickenpox .....	4    "
"    "    "    Erysipelas .....	2    "

The incidence of nasal diphtheria among the scarlet fever patients showed a definite decrease as compared with the previous year. This year 7 cases were suffering from nasal diphtheria on admission, and 8 developed rhinitis with positive swabs during convalescence, whereas last year 11 cases suffered from nasal diphtheria on admission, and 26 developed positive nasal swabs during convalescence. The decrease may have resulted from the immunisation of all the Schick positive cases which was carried on during the year, but, on the other hand, it might have been due to the fact that both diseases tended to become milder during the course of the year. Further experience is necessary on this matter.

Complications: Of the 723 cases discharged during the year, 226, or 31.25 per cent., suffered from complications as follows:—

Adenitis .....	38 cases or 5.25 per cent.
Albuminuria .....	44    "    "    6.08    "    "
Nephritis .....	9    "    "    1.24    "    "
Arthritis .....	16    "    "    2.21    "    "
Otorrhoea .....	49    "    "    6.77    "    "
Rhinitis .....	25    "    "    3.45    "    "



Vaginitis .....	4	„	„	0.55	„	„
Endocarditis .....	2	„	„	0.27	„	„
Transient cardiac murmurs .....	6	„	„	0.82	„	„
Septic Sores and Abscesses .....	33	„	„	4.56	„	„

Including the stay at the Convalescent Home, the average duration of residence of all cases was 47 days.

### **Diphtheria.**

At the beginning of 1930 there were 91 cases in residence, 817 cases, notified as diphtheria were admitted during the year, and 719 of these proved to be suffering from the disease, making a total of 810 cases under treatment. Of these, 707 were discharged recovered, 24 died, and 79 remained under treatment at the end of the year.

53 cases suffered from post diphtheritic paralysis. This was mild in 32 cases and severe in 21 cases.

Of 86 cases which had been notified as laryngeal diphtheria, 65 proved to be rightly diagnosed. Tracheotomy was performed in 32 of these cases, and 9 of them proved fatal, giving a fatality rate of 28.12 per cent. of the cases operated on, which compares with 32.25 per cent. in the previous year. Two of the fatal cases were complicated by measles, and one was complicated by whooping cough. The average age of the cases was  $4\frac{1}{2}$  years, and the average amount of antitoxin administered to them was 36,000 units.

Seventeen deaths occurred among the 666 proved faucial and nasal cases discharged, giving a fatality rate of 2.55 per cent., which compares with 3.38 per cent. in the previous year. The duration of illness of the fatal cases on admission averaged 4.36 days, and their average age was  $5\frac{1}{2}$  years. Excluding three cases which died from post diphtheritic paralysis, the average duration of residence was 6 days. The amount of antitoxin administered to the fatal cases averaged 74,000 units. The average amount of antitoxin given to all the cases was 22,000 units.

Corrected diagnosis:—98 cases notified as diphtheria proved to be wrongly diagnosed, and were found after admission to be suffering from the following complaints:—

Tonsillitis, 41; Laryngitis, 21; Measles, 6; No disease, 7; Rhinitis, 4; Quinsy, 4; Vincent's Angina, 3; Bronchitis, 3; Mumps, 1; Abscess of neck, 1; Pharyngitis, 2; Polio encephalitis, 1; Scarlet Fever, 1; Whooping Cough, 1; Meningitis, 1; Leukæmia, 1.

### **Typhoid Fever.**

One case was in residence at the beginning of the year, and five cases were admitted which proved to be suffering from the disease. All recovered. Three other cases which had been notified as typhoid fever proved to be suffering from gastro-enteritis.



## **Measles.**

A severe epidemic of this disease was present in the district at the beginning of the year. Of 14 cases which proved to be suffering from measles on admission, 6 had been notified as diphtheria, 7 as scarlet fever, and 1 as whooping cough. Three diphtheria patients and 3 scarlet fever patients were admitted incubating measles and developed the disease in the wards within a week of admission. From these cases, 8 diphtheria patients and 6 scarlet fever patients were infected in the wards.

Thirteen of the cases were notified as measles and laryngeal diphtheria. Tracheotomy was performed in 7 of these cases, and 3 of them proved fatal. Eleven other cases were complicated by nasal diphtheria.

Six cases were in residence at the beginning of 1930, and 86 were admitted during the year, making a total of 92 cases under treatment. Of these, 77 were discharged recovered, and 15 died, giving a fatality rate of 19.48 per cent.

The Encephalomyelitis of measles:—One case, a girl, A.S., aged 6 years, was admitted on the 31st January suffering from this rare complication of measles. Her illness had commenced two days previously with sleepiness. On admission a general intense morbiliform rash was present. The temperature was 98 degrees Fahr., pulse 108 and respirations 28. The tongue was dry and furred, the buccal mucous membrane was deeply congested, and Koplik's spots were present. There was no cough or catarrh, and the temperature did not rise above normal throughout the course of the illness.

The patient was deeply comatose on admission; there was slight rigidity of the limbs, but there was no head retraction. A lumbar puncture gave 18 c.c. of slightly turbid fluid under pressure. It contained a large number of lymphocytes and polymorphs but no micro-organisms were discovered. The lumbar punctures were repeated during the following days, and clear fluid under pressure was obtained for the first three days, but otherwise the examinations were negative. The patient continued extremely restless for the first eight days, constantly moaning and throwing her arms and legs aimlessly about. She then became very quiet, and lay in this comatose condition for about another three weeks. She was fed by nasal catheter for the first ten days, but was afterwards able to swallow food mechanically. After about six weeks the first signs of returning intelligence began to appear. She then continued to make steady progress, but she had complete aphasia for another six weeks. She, however, made a complete recovery, and when seen nine months later was perfectly normal.

## **Whooping Cough.**

This disease was not prevalent during the year. Thirteen cases were under treatment. Of these, 12 were discharged recovered, and one died. The fatal case was a child aged 17 months. In addition to these the disease was present as a complication in one case of diphtheria and in one case of measles.



### **Pneumonia.**

Cases of both lobar and broncho pneumonia are included in this group. Twelve cases were under treatment. Of these, 8 were discharged, one died, and 3 remained under treatment at the end of the year. The fatal case was a child aged one year.

### **Erysipelas.**

Sixteen cases were under treatment. Of these, 13 were discharged recovered, 2 died, and 1 remained under treatment at the end of the year. One of the fatal cases was a woman, aged 25 years, who was suffering from a very virulent attack. Although large doses of serum were administered, the inflammation spread over the greater portion of the body, and she succumbed to acute toxæmia. The other fatal case was a married woman, aged 33 years, suffering from a fairly mild attack of facial erysipelas, from which she made a good recovery. During convalescence she suddenly complained of faintness, and became pulseless, and died within two hours. On post mortem examination the abdominal cavity was found filled with blood from a ruptured ectopic gestation.

### **Other Diseases.**

The following are included under this group:—Mumps, 7; Chickenpox, 11; Meningitis, 4; Scabies, 1; Mastoid abscess, 1; Erythema, 1; Rheumatism, 1; Carcinoma, 1; Uraemia, 1; Urticaria, 1; Septic rash, 1; Otorrhoea, 1; No disease, 5.

Of these, 5 proved fatal, as follows:—

Cerebro spinal meningitis	...	...	3 cases.
Pneumococcal Meningitis	...	...	1 case.
Uraemia	...	...	1 case.

### **Cross Infection.**

In addition to the 8 cases of diphtheria and 6 cases of scarlet fever mentioned above, which contracted measles, 6 cases contracted mumps, 3 cases contracted chickenpox, and 3 contracted measles. All these cases were infected from patients who were incubating a second infection on admission, with the exception of 3 cases of measles and 1 case of chickenpox, which were infected in the bed-isolation ward.

### **Harold Wood Hospital.**

During the year the accommodation at the Convalescent Home at Harold Wood was extended. Four new ward blocks have been built, each containing 26 beds. There is also one small isolation block containing 4 single cubicles. Means are now available for isolating convalescent patients suffering from two separate infectious diseases.

During 1930 the Home was used for cases convalescent from scarlet fever. The total number of cases under treatment was 474. Of these, 437 were discharged, and 37 remained under treatment at the end of the year. The average duration of residence was 34.87 days.



### Staff Illness.

Two probationers suffered from mild attacks of diphtheria and 1 contracted mumps. 109 other nurses and maids were warded during the year for varying periods. Of these, 27 suffered from septic throat and 11 from influenza; 71 were off duty for short periods with minor ailments. All recovered.

### Active Immunisation against Scarlet Fever and Diphtheria.

During the year all scarlet fever patients under 14 years of age were Schick tested soon after admission, and those found positive were, with the parents' permission, immunised during convalescence with four weekly doses of T.A.M. Similarly, diphtheria patients were Dick tested and immunised against scarlet fever. The following is a record of the patients treated:—

#### Schick Test, 1930.

Number of patients tested	...	...	521
Number which proved positive	...	...	274
Rate per cent. of positives	...	...	52.59
Number immunised	...	...	263

No appreciable local or general reaction resulted from any of the inoculations.

#### Dick Test, 1930.

Number of patients tested	...	...	735
Number which proved positive	...	...	393
Rate per cent. of positives	...	...	53.46
Number immunised (4 weekly doses of Dick Toxin)	...	...	355

The dosage given was as follows:—

1st.	750	skin	test	doses.
2nd.	1,500	„	„	„
3rd.	4,000	„	„	„
4th.	10,000	„	„	„

The inoculations caused a reaction in 59 of the cases immunised (16 per cent.). In 23 cases it consisted of an area of redness at the site of injection. In 32 cases there was repeated vomiting with varying degrees of prostration and a rapid pulse about two hours after the injection, and lasting about two hours. In 4 cases a general scarlatiniform rash occurred about 12 to 24 hours after the injection and lasted about 4 hours.

All probationers are Schick and Dick tested within a few days of their arrival for duty, and those found positive are immunised:

### **\*Schick Test, 1930.**

Number of probationers tested	...	42
Number which proved positive	...	27
Rate per cent. of positives	...	64.28
Number immunised (4 weekly doses of T.A.M.)	...	26

Eighteen of these were re-tested after six months, and 3 of them were still faintly positive.

At the beginning of the year a brand of T.A.M. containing goat serum was used, but this caused such severe local reactions that its use was discontinued. With ordinary T.A.M. a local reaction occurred on two occasions only; no case suffered from any appreciable general reaction.

During the year one nurse developed a mild attack of faucial diphtheria seven months after immunisation. Another nurse, who was Schick positive, contracted diphtheria before immunisation was commenced.

### **Dick Test, 1930.**

Number of probationers tested	...	42
Number which proved positive	...	11
Rate per cent. of positives	...	26.19
Number immunised (4 weekly doses of Dick toxin)	...	9

Six of these were re-tested after six months, and all were negative. No probationer contracted scarlet fever during the year. A local reaction occurred from the immunisation in 2 cases only.

### **Gate Cases.**

The following is a record of cases suspected to be suffering from infectious disease which were brought direct to the Hospital for diagnosis :—

Number sent by medical practitioners	...	220	
Number of these admitted	...		64
Number brought by relatives	...	288	
Number of these admitted	...		47
Number from other hospitals	...	24	
Number of these admitted	...		6
Total number of cases examined	...	532	
Total number of cases admitted	...		117
Number of suspected cases of Smallpox visited	...		1480
Number which proved positive	...		542



## Bacteriological Work.

Swabs examined for diphtheria bacilli:—

Number sent by medical practitioners:—

					Positive Results
Faucial	...	...	...	2528	484
Nasal	...	...	...	219	53
Aural	...	...	...	12	7
Conjunctival	...	...	...	1	0
Total ...				2760	544

Number of Gate cases swabbed:—

Faucial	...	...	...	177	36
Nasal	...	...	...	60	12
Aural	...	...	...	4	0
Total ...				241	48

Number of swabs examined for the  
Invalid Children's Aid Association

Faucial	...	...	...	116	4
Nasal	...	...	...	119	11
Total ...				235	15

Number of swabs examined for the  
Invalid and Crippled Children's  
Society

Faucial	...	...	...	3	0
Nasal	...	...	...	1	0
Total ...				4	0

Widal Tests ... 7 3

Total number of examinations: 3247 610

## Disinfecting Station.

Number of articles removed from infected homes for disinfection	...	...	...	...	28136
Number of Hospital articles disinfected	...	...	...	...	12457
Number of articles from other institutions for disinfection	...	...	...	...	17794

Total .. 58387

## Tuberculosis.

The following table sets out the number of notified cases of Tuberculosis and the number of deaths during the year at certain age periods, distinguishing separately the pulmonary and non-pulmonary forms, males and females :—

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1 ... ..	0	2	4	4	1	2	4	4
1-4 ... ..	4	1	17	10	2	1	7	1
5-9 ... ..	13	16	19	14	1	...	3	5
10-14 ... ..	5	8	15	8	1	1	1	...
15-19 ... ..	32	38	6	7	16	26	4	2
20-24 ... ..	39	52	3	12	13	24	2	2
25-34 ... ..	74	70	8	6	45	35	2	3
35-44 ... ..	44	39	2	1	29	19	...	2
45-54 ... ..	55	22	...	...	35	23	...	1
55-64 ... ..	23	13	1	...	19	11	...	1
65 and upwards ...	3	4	...	1	5	1	2	...
TOTALS ...	292	265	75	63	167	143	25	21

Included in the above new cases are 22 pulmonary males, 19 pulmonary females, 8 non-pulmonary males, and 9 non-pulmonary females, which were unnotified, but were discovered from the returns of the Registrar of Births and Deaths, showing that 13.0 per cent. of the deaths registered as due to Tuberculosis had not been notified during life.

The following table sets out the percentage of deaths from tuberculosis (not notified during life) for the years 1923-1930 inclusive :—

1923 ...	17.0	1927 ...	12.03
1924 ...	10.5	1928 ...	7.1
1925 ...	11.2	1929 ...	8.0
1926 ...	12.8	1930 ...	13.0

In this connection many deaths notified as having been due to Tuberculosis are frequently so notified because the case had at some time or other suffered from this complaint, the actual cause of death often being due to some intercurrent disease.

The total number of fresh cases of Tuberculosis coming to my knowledge was 695, of which 557 were pulmonary cases. The deaths from all forms of Tuberculosis numbered 356, giving a death rate of 1.1 per 1,000.

The death rate from respiratory Phthisis being 1.0, and from other forms 0.1 per 1,000 of the population.

The reports of the Tuberculosis Officer and of the Medical Superintendent of Dagenham Sanatorium will be found on pages 107-120.



PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS)  
REGULATIONS, 1925.

No action taken.

PUBLIC HEALTH ACT, 1925. SECTION 62.

No action taken.

**Tuberculosis Dispensary.**  
**Annual Report of Tuberculosis Officer.**

(DR. P. A. GALPIN.)

The routine work of the Dispensary has been continued throughout the year. Schedules 1, 2 and 3, as required by the Ministry of Health showing the details of the work done, have been completed, and are attached.

**Comparison with the work done in previous years.**

Cases	1925	1926	1927	1928	1929	1930
Request	593	726	760	670	683	567
Notified	338	188	198	198	142	176
Definite	629	525	516	473	467	495

**Examination of Contacts.**

Number	1925	1926	1927	1928	1929	1930
Examined.	848	743	699	633	532	561
Positive	38	41	40	22	19	20
Percentage	4.48	5.1	5.7	3.5	3.7	3.5

**Tuberculosis of Lungs.**

**Diagnosis.** Clinical examination and observation with sputum tests are the chief means of establishing a diagnosis. In a certain number of cases presenting unusual difficulties, X-Ray examinations are made. At present, patients are sent to the London Hospital. Sixty-four examinations were made during the year.

There is a type of case where neither sputum tests nor X-Ray examinations can solve the problem of diagnosis, but only a careful and close study of the symptoms and of the whole history of the patient.

**Institutional Treatment.**

**Adults.** The Dagenham Sanatorium has been in full use for the greater part of the year with cases requiring General Medical and Sanatorium Treatment. Certain types of cases in need of special Surgical Treatment have been sent to the Brompton Hospital. Cases have been sent also to the Grosvenor and Maltings Farm Sanatoria. In determining treatment, the needs of each



individual case are carefully considered, and efforts are made to meet those needs. Certain selected cases have been sent to the Papworth Village Settlement, Preston Hall Colony, and Burrow Hill with the purpose of permanent settlement.

Admitted	Settled	Discharged
4	2	3*

\* including one admitted in 1928.

**Children.** The Children's Sanatorium has been in full use throughout the year. There has been a "Waiting List," chiefly of girls; this is due to the fact that there are seven cases with positive sputum which have had prolonged periods of treatment. Of these seven cases, six are girls.

**Domiciliary Treatment.** Insured persons, while awaiting admission to Institutions and after discharge, have been placed under domiciliary treatment under their Panel Practitioner. During the year, 974 reports in respect of such cases have been received. These reports are completed quarterly by the Panel Practitioner and sent to the Tuberculosis Officer who, in this way, keeps in touch both with the patient and the Medical Attendant. At the end of the year, 346 patients were under domiciliary treatment.

**Dispensary Treatment.** Children and non-insured persons have been treated at the Dispensary. At the end of the year, 533 cases were under treatment.

**Artificial Pneumothorax.** One afternoon session per fortnight has been devoted to this form of treatment. Eight patients have been in attendance, and 93 refills given.

#### **Non-Pulmonary Tuberculosis. Institutional Treatment.**

**Adults.** Some 12 beds have been in constant use at the Royal Sea-Bathing Hospital, Margate.

**Children.** The number of children receiving institutional Treatment at the end of the year was 45. Beds for these cases have been found in a dozen different Institutions.

#### **Out-Patient Treatment.**

**Tuberculosis of Skin.** These are treated at the London Hospital. During the year 35 patients have been under treatment by Finsen or Artificial Sunlight.

**Tuberculosis of Bones and Joints.** Some Orthopaedic cases are referred, on discharge from Hospital, to the Surgeon who originally diagnosed the case, or to the Surgeon treating the case in Institution, at his Out-Patient Clinic. Other cases are referred to the Balaam Street Children's Hospital.

**After-Care.** Extra Nourishment grants have been made as usual. At the end of the year there were 116 such cases.

**Visiting of Patients.** The Tuberculosis Nurses have made 4,463 visits to the homes of patients; this total is the highest number since 1922. The carrying out of prophylactic measures is considerably hindered by the lack of means and adequate housing accommodation.



## RESIDENTIAL INSTITUTIONS.

### (A) AVERAGE NUMBER OF BEDS AVAILABLE FOR PATIENTS DURING THE YEAR 1930.

		Observa- tion.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Total.
			"Sana- torium." Beds.	"Hospi- tal " Beds.	Disease of Bones and Joints.	Other Condi- tions.	
Adult Males ...	...	1	60	28	4	1	94
Adult Females	...	...	30	24	3	1	58
Children under 15	...	1	41	...	45	...	87
<b>TOTAL</b>	...	2	131	52	52	2	239

### (B) RETURN SHOWING THE EXTENT OF RESIDENTIAL TREAT- MENT DURING THE YEAR 1930.

	In Institu- tions on Jan. 1.	Admitted during the year.	Discharg- ed during the year.	Died in the Institu- tions.	In Institu- tions on Dec. 31.
<b>Number of Patients</b>					
Adults—Males ...	89	186	146	35	94
"    Female	51	140	114	28	49
Children—Males	47	33	34	...	46
"    Females	42	24	26	1	39
<b>Number of Obser- vation Cases</b>					
Adults—Males ...	...	2	2	...	...
"    Females	...	...	...	...	...
Children—Males	...	1	1	...	...
"    Females	...	1	1	...	...
<b>TOTAL</b> ...	229	387	324	64	228

# Return showing the work of the Dispensary during the year 1930.

DIAGNOSIS,	PULMONARY.				NON-PULMONARY.				TOTAL.			
	Adults.		Children.		Adults.		Children.		Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A.—NEW CASES examined during the year (excluding contacts) :												
(a) Definitely tuberculous ...	183	168	15	16	10	20	24	23	193	188	39	39
(b) Doubtfully tuberculous ...	—	—	—	—	—	—	—	—	86	105	98	90
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	84	71	64	48
B.—CONTACTS examined during the year :—												
(a) Definitely tuberculous ...	—	4	5	2	—	—	3	1	—	4	8	3
(b) Doubtfully tuberculous...	—	—	—	—	—	—	—	—	4	19	30	27
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	51	132	132	151
C.—CASES written off the Dispensary Register as												
(a) Cured ... ..	67	55	21	13	18	12	21	10	85	67	42	23
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error) ...	—	—	—	—	—	—	—	—	192	289	298	287
D.—NUMBER OF PERSONS on Dispensary Register on December 31 :												
(a) Diagnosis completed ...	737	800	306	264	67	94	156	103	804	894	462	367
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	27	22	32	23

N.B.—Eight of the cases discharged as "cured" have returned to the Dispensary and are included in Heading C. or D.



1. Number of persons on Dispensary Register on January 1st ... ..	3,026	8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for (a) "Light" treatment ... .. 2580 (b) Other special forms of treatment ... .. Nil.
2. Number of patients transferred from other areas and of "lost sight of" cases returned ... ..	72	9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary ... .. Nil.
3. Number of patients transferred to other areas and cases "lost sight of" ... ..	546	10. Number of consultations with medical practitioners :— (a) At Homes of Applicants ... .. 48 (b) Otherwise ... .. 455
4. Number of cases whose deaths have been ascertained during the year ... ..	304	11. Number of other visits by Tuberculosis Officers to Homes. ... .. 126
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months ... ..	194	12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes ... .. 4,463
6. Number of attendances at the Dispensary (including Contacts) ... ..	10,707	13. Number of (a) Specimens of sputum, etc., examined ... 681 (b) X-ray examinations made, ... .. 64 in connection with Dispensary work.
7. Number of attendances of non-pulmonary cases at Orthopaedic Out-stations for treatment or supervision ... ..	Nil.	14. Number of Insured Persons on Dispensary Register on the 31st December ... .. 929
		15. Number of Insured Persons under Domiciliary Treatment on the 31st December ... .. 346
		16. Number of reports received during the year in respect of Insured Persons :— (a) Form G.P. 17 ... .. — (b) Form G.P. 36 ... .. 974

Return showing the immediate results of treatment of patients  
and of observation of doubtful cases discharged from Residential  
Institutions during the year 1930.

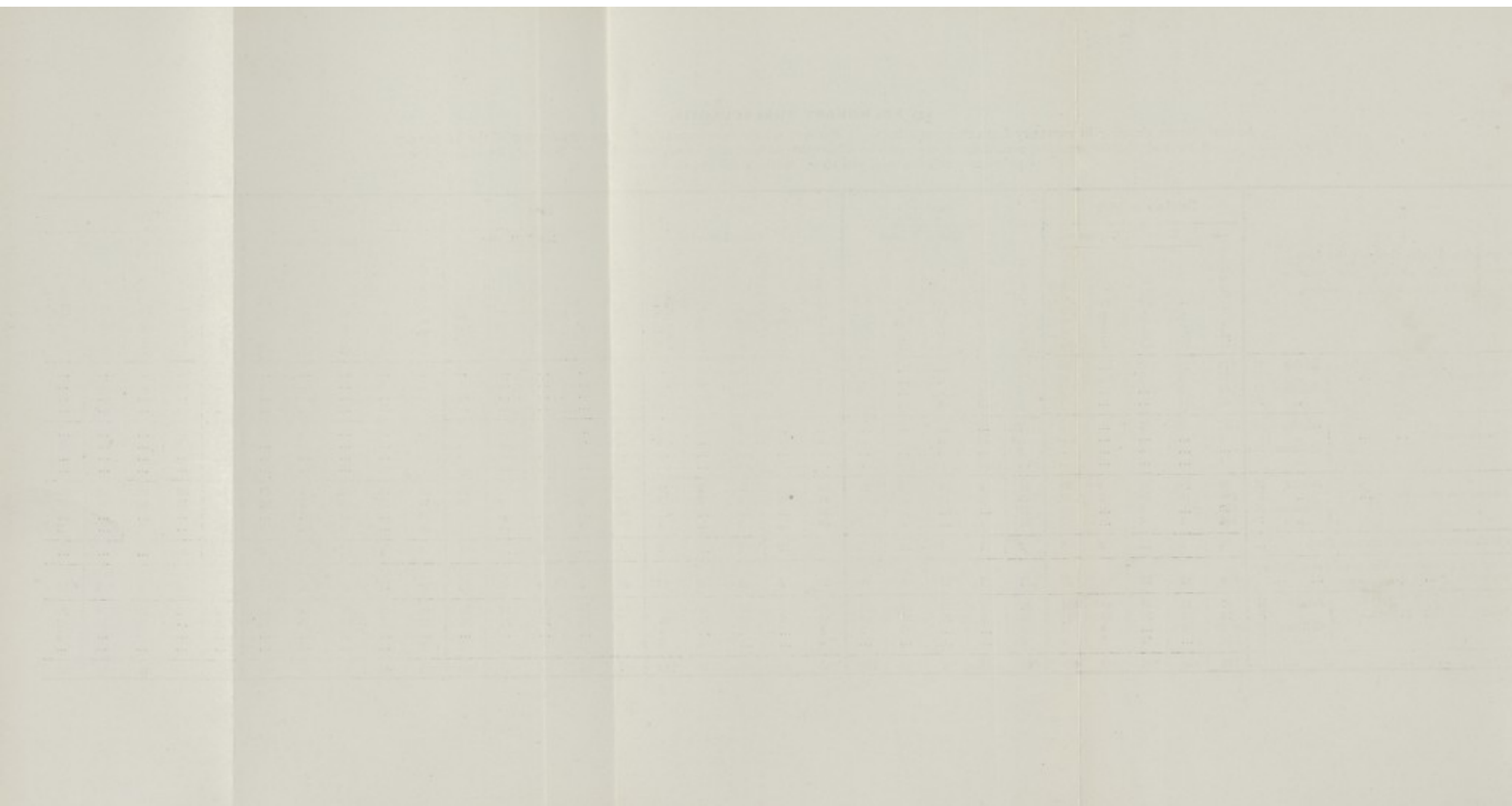
Condition at time of discharge				Duration of Residential Treatment in the Institution.												Total	
				Under 3 months			3-6 months			6-12 months			More than 12 months				
				M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.		
PULMONARY TUBERCULOSIS																	
Class T.B. minus.																	
Quiescent ... ..				7	9	...	14	8	10	2	...	11	...	...	5	66	
Improved ... ..				2	11	...	3	4	2	1	1	4	2	...	4	34	
No material improvement				2	2	...	...	...	...	...	...	...	...	...	...	4	
Died in Institution ...				2	1	...	1	...	...	...	...	...	...	...	...	4	
Class T.B. plus Group 1.																	
Quiescent ... ..				...	1	...	8	1	...	...	1	...	...	...	...	11	
Improved ... ..				...	3	...	6	1	...	3	1	...	...	...	...	14	
No material improvement				3	1	...	...	...	...	...	...	...	...	...	...	4	
Died in Institution ...				4	1	...	3	...	...	2	1	...	1	...	...	12	
Class T.B. plus. Group 2.																	
Quiescent ... ..				...	2	...	4	4	...	4	3	...	3	...	1	21	
Improved ... ..				15	11	...	17	7	...	8	5	...	5	1	1	70	
No material improvement				4	4	...	...	2	...	2	1	...	...	1	...	14	
Died in Institution ...				6	7	...	8	5	...	...	1	...	3	1	...	31	
Class T.B. plus. Group 3.																	
Quiescent ... ..				1	...	...	1	1	...	...	...	...	1	...	...	4	
Improved ... ..				1	3	...	6	1	...	3	4	...	1	...	...	19	
No material improvement				8	6	...	4	5	...	2	2	...	...	1	...	28	
Died in Institution ...				4	7	...	...	1	...	...	2	...	1	1	...	16	
NON-PULMONARY TUBERCULOSIS																	
Bones and Joints.																	
Quiescent or Arrested ...				...	...	...	...	1	1	...	...	1	2	...	1	8	14
Improved ... ..				...	...	1	...	...	1	...	...	...	1	...	2	...	5
No material improvement				...	...	...	...	...	1	...	...	1	...	...	...	...	2
Died in Institution ...				...	...	...	...	...	...	...	...	...	...	1	...	...	1
Abdominal. ... ..																	
Quiescent or Arrested ...				...	1	...	...	1	1	...	...	1	...	...	...	...	4
Improved ... ..				...	...	...	...	...	...	...	...	...	...	1	1	...	2
No material improvement				...	...	...	...	...	...	...	...	...	1	...	...	...	1
Died in Institution ...				...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Organs.																	
Quiescent or Arrested ...				...	...	...	...	...	...	...	...	1	...	...	...	...	1
Improved ... ..				...	...	...	...	...	...	...	...	...	...	...	...	...	...
No material improvement				...	...	...	...	...	...	...	...	...	...	...	...	...	...
Died in Institution ...				...	...	...	...	...	...	...	...	...	...	...	...	...	...
Peripheral Glands.																	
Quiescent or Arrested ...				...	...	...	...	...	1	...	...	...	...	...	...	...	1
Improved ... ..				...	...	...	...	...	...	...	...	...	...	...	...	...	...
No material improvement				...	...	...	...	...	...	...	...	...	...	...	...	...	...
Died in Institution ...				...	...	...	...	...	...	...	...	...	...	...	...	...	...
OBSERVATION FOR PURPOSE OF DIAGNOSIS.				Under 1 week			1-2 weeks.			2-4 weeks			More than 4 weeks.				
Tuberculous ... ..				...	...	...	...	...	...	...	...	...	...	...	...	...	...
Non-tuberculous ... ..				...	...	...	...	...	...	...	...	...	1	...	2	...	3
Doubtful ... ..				...	...	...	...	...	...	...	...	...	2	...	...	...	2
388																	



## (a) PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary at the end of 1930 arranged according to the years in which the patient first came under Public Medical Treatment for pulmonary tuberculosis, and their classification as shown on Form A.

Condition at the time of the last record made during the year to which the Return relates.				Previous to 1926					1926					1927					1928					1929					1930						
				Class T.B. minus				Class T.B. plus				Class T.B. minus				Class T.B. plus				Class T.B. minus				Class T.B. plus				Class T.B. minus				Class T.B. plus			
				Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)				
ALIVE	Discharged as cured	Adults	M	117	26	3	...	29	...	...	...	1	...	...	...	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
		Children	M	83	9	1	...	10	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
		"	F	45	1	...	...	3	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
	Disease arrested	Adults	M	17	3	2	...	5	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
		Children	M	5	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
		"	F	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
	Disease not arrested	Adults	M	96	26	34	8	63	31	4	14	6	21	33	9	14	2	29	43	16	15	7	38	58	18	26	3	47	67	30	47	10	87		
		Children	M	198	16	20	2	38	43	5	11	...	16	42	7	9	3	19	42	9	14	1	24	47	13	19	3	35	96	16	29	6	51		
		"	F	163	...	3	...	3	57	...	...	...	...	35	...	...	...	...	36	...	...	...	...	21	...	...	...	...	26	...	...	...	...	...	
	CONDITION NOT ASCERTAINED DURING THE YEAR				150	1	4	...	5	32	1	...	...	1	48	...	1	...	3	1	...	...	1	35	...	1	...	1	28	...	2	...	...	...	
LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER				70	5	...	2	7	8	1	1	...	2	9	2	1	...	3	7	...	1	...	1	5	1	...	1	...	...	...	...	...	...		
Dead	Adults	M	87	19	84	48	151	42	7	29	25	61	36	7	29	20	56	25	14	25	19	59	18	13	26	14	53	8	2	13	13	28			
	Children	M	72	9	35	34	78	43	1	20	20	41	32	2	20	13	35	17	12	23	21	56	22	7	13	16	36	15	...	6	11	17			
	"	F	10	...	1	3	4	2	...	...	...	1	1	...	...	...	1	1	...	1	...	...	...	...	...	...	...	...	...	...	1	...	1		
Totals				1735	160	205	103	468	398	27	86	53	166	293	36	93	43	172	262	59	89	52	200	239	64	95	36	195	254	54	104	43	201		





(b) NON-PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary at the end of 1930 arranged according to the years in which the patient first came under Public Medical Treatment, and their classification as shown on Form A.

Condition at the time of the last record made during the year to which the Return relates.				Previous to 1926					1926					1927					1928					1929					1930						
				Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total		
ALIVE	Discharged as cured	...	Adults	M	8	...	5	5	18	2	...	...	...	2	...	2	...	4	1	...	1	1	3	...	...	...	...	...	1	...	...	1	2		
			Children	M	7	1	3	8	19	1	...	1	1	5	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
			F	12	1	1	13	27	...	...	...	3	5	2	...	1	3	6	1	...	...	...	12	12	5	...	...	...	...	...	...	...	...		
	Disease arrested	...	...	Adults	M	5	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...		
				Children	M	1	...	...	...	3	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
				F	3	...	...	...	12	...	...	1	...	1	...	...	...	...	...	1	1	...	...	12	...	...	...	...	...	...	...	...	...	...	
	Disease not arrested	...	...	Adults	M	4	...	3	1	8	1	...	...	1	2	...	...	2	1	3	5	2	2	2	11	5	1	2	2	10	4	1	1	4	10
				Children	M	5	2	5	6	18	2	...	1	3	6	1	1	4	7	4	...	1	5	3	1	1	6	11	6	5	3	7	21	21	
				F	17	5	...	10	36	8	1	1	5	15	13	...	11	24	11	4	3	12	30	8	1	3	9	21	9	3	3	14	29		
	TRANSFERRED TO PULMONARY				3	...	...	3	6	...	...	...	...	...	2	2	1	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...		
	CONDITION NOT ASCERTAINED DURING THE YEAR				7	1	2	5	15	1	...	...	1	2	2	...	1	2	5	...	...	1	2	3	...	...	...	1	1	...	...	...	...	...	
	LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER				34	1	4	30	69	4	1	4	13	22	8	3	5	9	25	4	1	3	4	12	2	...	1	5	8	...	...	...	...	...	
Dead	...	...	Adults	M	5	1	4	...	10	1	...	1	...	2	1	...	...	1	2	...	...	...	...	...	...	1	1	...	2	...	...	...	...		
			Children	M	2	1	1	2	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
			F	3	1	...	...	4	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	1	...	1		
Totals				139	15	31	105	290	31	3	11	33	78	44	5	12	41	102	34	9	12	31	86	30	5	11	29	75	30	11	12	37	90		





**DAGENHAM SANATORIUM  
AND LANGDON HILLS SANATORIUM FOR CHILDREN.  
Annual Report of the Medical Superintendent  
(Dr. C. M. Mayberry).**

At the end of 1929 the number of patients remaining under treatment were:—

Males	...	...	...	79
Females	...	...	...	39—118

The total admissions during 1930 were:—

Males	...	...	...	161
Females	...	...	...	127—288

The number of deaths was:—

Males	...	...	...	34
Females	...	...	...	27—61

Discharges during the year totalled:—

Males	...	...	...	132
Females	...	...	...	102—234

Leaving under treatment at 31st December, 1930:—

Males	...	...	...	74
Females	...	...	...	37—111*

\*Including 20 Non-Insured persons.

Insured persons admitted during the year totalled 214, the remaining 74 being Non-Insured.

Sixty-two Ex-Servicemen were admitted to the Sanatorium during the same period.

The Death Rate (calculated on admissions) was 21.18 per cent.

In the case of males, the percentage was 21.11; and in the case of females, 21.26.

The Average Duration of Residence (both sexes) was 141.31 days.

The average for males was 152.70 days, and for females 126.58 days.

The grades of cases discharged and the results of treatment were as follows:—

	T.B. Minus	T.B. plus Grade I.	T.B. plus Grade II.	T.B. plus Grade III.	Total
Males .....	40	20	45	27	132
Females .....	36	7	37	22	102
<b>MALES.</b>					
Quiescent .....	23	16	10	3	
Improved .....	14	4	31	10	
No material improvement	3	—	4	14	
	—	—	—	—	
	40	20	45	27	
	—	—	—	—	

# FEMALES.

Quiescent	.....	24	2	8	—
Improved	.....	11	4	21	9
No material improvement		1	1	8	13
		—	—	—	—
		36	7	37	22
		—	—	—	—

During the past year the results of treatment are much the same as in past years. With some variation in the climatic conditions from year to year, and also much the same class of case coming under treatment, this is only to be expected.

The following figures shew the class of case discharged for the past three years:—

		T.B. Minus	Grade T.B. plus I.	Grade T.B. plus II.	Grade T.B. plus III.
1928	...	83	30	78	59
1929	...	82	34	77	46
1930	...	76	27	82	49

With few exceptions the early cases invariably do well, but unfortunately some will not remain sufficiently long and take full advantage of the treatment. This is one of the most disappointing factors in the treatment of patients in Sanatoria. In some cases it is difficult for them to remain with a family to support, and reasonably suitable work to return to, risks have to be taken fearing they may lose their livelihood. There is, however, another class of patient that will not remain, the case who has not worked for years and has little hope of suitable employment. To make matters worse, they are often highly infectious cases, the home conditions frequently appalling. The old slogan, "it's in the family," is not good enough, and even though undoubtedly some families are more prone to disease than others, it has to get there first. Housing and various home conditions are the cause, and until some marked advance can be made in these things to prevent infection, little progress can be made. In parts of America no open case of Tuberculosis is allowed to remain in a house where there is anyone under the age of fifteen years; this appears to be sound legislation. In Canada patients appear to settle down to Institutional treatment better than here, for the reason that if they discharge themselves there are no funds to fall back upon to maintain them at home.



The following table shews the comparison of rainfall for the past three years :—

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
1928	2.53	1.18	1.65	1.27	2.36	2.05	1.75	2.46	0.56	3.11	1.68	2.57
1929	0.90	0.34	0.05	1.18	1.23	0.67	1.77	1.60	0.15	2.26	4.20	3.10
1930	1.73	0.83	1.29	1.25	2.84	0.53	1.61	3.24	2.01	0.96	3.04	1.27

### **Light Treatment.**

Artificial light has been used during the winter months in thirty cases, with the same satisfactory results as in past years. Several cases of chilblains and two cases of peritonitis responded well to treatment.

### **Entertainment.**

There were frequent whist-drives and billiard handicaps during the year. The monthly concerts were greatly appreciated by the patients and Staff.

### **Heating.**

All the permanent Wards are now equipped with radiators, and both Recreation-rooms. A welcome change from the open fire, which cannot distribute the heat uniformly in large Wards.

### **Nursing Staff.**

During the year three Nurses passed the final examination for the Certificate of the Tuberculosis Association, and six passed Part 1.

### **Staff.**

#### **Medical—**

Medical Superintendent.  
Assistant Medical Officer.

#### **Office—**

Assistant Steward.

#### **Nursing—**

Matron.  
Assistant Matron and Sister Tutor.  
3 Sisters (one night).  
1 Nurse-Housekeeper.  
4 Assistant Nurses.  
16 Probationers.

# Domestic—

30 (including 6 laundry-maids and 1 sewing maid).

## Males—

- 1 Caretaker.
- 1 Handyman.
- 1 Stoker.
- 1 Gardener.
- 4 Porters.
- 1 Night Watchman.

## WEST HAM SANATORIUM FOR CHILDREN, LANGDON HILLS.

At the end of 1929 the number of patients remaining under treatment were:—

Males	...	...	...	20
Females	...	...	...	20—40

The total admissions during 1930 were:—

Males	...	...	...	25
Females	...	...	...	17—42

The number of deaths were:—

Males	...	...	...	Nil
Females	...	...	...	Nil—Nil

Discharges during the year totalled:—

Males	...	...	...	25
Females	...	...	...	17—42

Leaving under treatment at 31st December, 1930:—

Males	...	...	...	20
Females	...	...	...	20—40

The Average Duration of Residence (both sexes) was 321.69 days.

The average for males was 323.00 days and for females 319.76 days.

The results of treatment for those discharged are as follows:

		T.B. Plus.	T.B. Minus.	Quiescent.	Improved.	No material improvement.
Males	.....	Nil	25	18	7	Nil
Females	...	Nil	17	15	2	Nil



The results during the past year have again been extremely good, and with mostly early cases suffering from general debility it was only to be expected. A striking feature again has been the general improvement in health and mentality of the children. A few weeks (especially in the summer months) alone are sufficient to make the change apparent. Long treatment is much more hopeful than in the adult. The children are soon happy, and forget home, and with no worldly worries the majority of cases improve rapidly. The fact that there has been comparatively few re-admissions shews how beneficial the treatment is. I have also noticed that children who have been re-admitted generally respond to the treatment quicker than during their first term. It leads one to conclude that the previous period of treatment raised their resistive power. During the year fortunately no cases of infectious disease occurred.

The radiators, verandah, play-room, heating in Wards, and covered-way to Dining-room have all been completed during the year, and are certainly a great advantage.

Considerable headway has been made in the grounds, and with continued effort should add to the already pleasing surroundings of the Institution.

The following was the rainfall for the past 2 years in inches—

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
1929	1.41	0.20	—	1.04	0.91	0.79	1.54	2.03	0.40	2.04	4.50	3.31
1930	1.45	0.53	0.93	1.34	2.29	1.17	1.70	2.67	2.41	0.70	4.16	1.60

## Staff.

### Nursing—

Matron.

2 Sisters.

7 Probationers.

### Domestic—

8.

### Males—

1 Head Gardener and Caretaker.

1 Motor Driver and Engine Attendant.

1 Handyman.

## Venereal Diseases.

Under the Public Health (Venereal Diseases) Regulations, 1916, West Ham is included in the Joint Scheme approved for the Greater London Area, the participating authorities being the London County Council, the Counties of Middlesex, Essex, Hertford, Buckingham, Surrey and Kent, and the County Boroughs of West Ham, East Ham and Croydon. Under the Scheme free treatment can be obtained by anyone (who has acquired Venereal Disease) at any of the 24 Hospitals approved under the joint agreements. There are also seven Hostels, assisted by financial grants, where women suffering from either of these diseases can be accommodated, with a view to facilitating continued treatment. Provision is made for enabling Medical Practitioners to obtain laboratory reports on suspected material or specimens, and for the free supply of Salvarsan substitutes to practitioners who have obtained the necessary qualification to be placed on the approved list. In addition to paying its proportionate share of the cost of carrying out the Scheme, approximately one-twenty-fifth of the total expenses incurred, the Council makes a grant to the British Social Hygiene Council to further propaganda work throughout the whole area.

Posters and enamel plaques pointing out the dangers of Venereal Diseases, urging immediate treatment and giving a list of Hospitals where treatment may be obtained free of cost, are exhibited in many parts of the Borough including all public sanitary conveniences.

Local Medical Practitioners are fully conversant with the facilities for diagnosis and treatment of Venereal Disease, and have a printed circular setting out all relevant details in connection with the Scheme. There are twelve practitioners who are qualified to receive supplies of arseno-benzol compounds. The attached tables show the use made of the various centres by patients and practitioners.

The following tables show the summary of work done under the Scheme during last year, setting out for comparison the particulars relating solely to West Ham and those relating to the whole of the participating authorities.



### Venereal Diseases (L.C.C. Scheme).

Summary of work done by the Hospitals during the Year 1930.

	London.	Middle- sex.	Essex.	Surrey.	Kent.	Herts.	Bucks	East Ham.	West Ham.	Croy- don.	Total.	Other Places.	Grand Total.
New Patients :—													
Syphilis ...	3,527	413	233	165	110	41	17	35	117	13	4,671	554	5,225
Soft Chancre...	217	5	14	9	7	3	1	3	13	1	273	86	359
Gonorrhoea ...	7,997	943	338	318	166	143	46	63	224	56	10,294	829	11,123
Not venereal...	7,343	961	448	390	193	115	38	73	222	55	9,838	324	10,162
TOTAL ...	19,084	2,322	1,033	882	476	302	102	174	576	125	25,076	1,793	26,869
Total attendances ...	664,102	59,168	26,579	24,123	9,780	6,090	2,244	5,106	16,352	3,150	816,694	19,525	836,219
No. of in-patient days ...	30,956	2,588	1,210	2,574	1,708	411	201	137	219	158	40,162	11,054	51,216
Salvarsan Subs. doses	36,081	4,479	2,679	1,889	944	371	319	591	1,583	227	49,163	2,002	51,165
For or at Centres :—													
Spirochaetes ...	1,323	75	73	47	26	11	2	23	26	3	1,609	114	1,723
Gonococci ...	53,658	3,758	2,734	1,946	1,305	712	103	544	1,417	351	66,528	1,512	68,040
Wassermann ...	27,332	2,294	1,345	1,244	669	317	147	256	630	187	34,421	1,260	35,681
Others ...	15,170	704	991	745	647	240	54	184	400	174	19,309	424	19,733
TOTAL ...	97,483	6,831	5,143	3,982	2,647	1,280	306	1,007	2,473	715	121,867	3,310	125,177
For Practitioners :—													
Spirochaetes ...	51	1	...	1	...	...	1	...	...	...	54	...	54
Gonococci ...	4,196	192	185	1,226	14	32	19	43	31	1672	7,610	8	7,618
Wassermann ...	16,274	803	819	865	56	100	145	108	166	271	19,607	396	20,003
Others ...	4,420	106	257	378	16	24	16	22	33	254	5,526	108	5,634
TOTAL ...	24,941	1,102	1,261	2,470	86	156	181	173	230	2,197	32,797	512	33,309

## Venereal Diseases.

Summary of the work done at the London Clinics for all areas from 1917.

Year.	New Cases.						Total Venereal Cases.		Total Non-Venereal Cases.		Total Attendances		In-patient days.		Pathological Examinations for	
	Syphilis.		Soft Chancre.		Gonorrhoea.											
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Clinic.	Prac-tition-ers.
1917	4,427	3,351	199	11	3,830	1,207	8,456	4,569	1,192	1,168	120,659		63,923		13,988	3,649
1918	3,764	3,002	116	13	4,844	1,940	8,724	4,955	1,345	1,348	169,485		66,095		25,973	6,380
1919	6,394	3,391	463	18	10,441	2,440	17,298	5,849	3,418	1,700	201,626	106,096	24,025	49,186	51,554	10,464
1920	6,988	3,579	766	25	10,669	2,427	18,423	6,031	4,403	2,189	329,940	134,093	29,430	52,182	58,920	14,027
1921	5,088	3,100	458	13	8,573	2,136	14,119	5,249	3,696	2,354	357,503	138,706	30,272	49,420	66,134	18,472
1922	4,207	2,600	309	12	8,233	2,402	12,749	5,014	3,759	2,191	387,631	141,372	28,809	83,755	74,022	19,836
1923	4,497	2,631	311	4	9,043	2,520	13,851	5,155	4,167	2,477	412,915	142,594	29,661	77,001	69,784	24,403
1924	4,174	2,452	301	4	8,565	2,785	13,040	5,241	4,869	2,423	424,850	164,152	31,620	70,836	79,005	24,797
1925	3,556	2,346	268	11	8,464	2,857	12,288	5,214	5,726	2,954	459,011	187,120	29,313	73,141	106,064	26,346
1926	3,725	2,013	301	2	8,825	2,858	12,851	4,873	5,830	3,158	490,578	196,497	31,258	70,477	100,543	27,565
1927	3,886	2,209	203	7	9,637	2,859	13,726	5,075	6,799	3,365	554,171	213,107	21,268	91,145	107,512	27,046
1928	3,433	1,837	229	6	8,249	2,647	11,911	4,490	6,369	3,226	544,969	218,566	23,821	41,285	107,410	29,785
1929	3,303	1,628	276	4	8,271	2,503	11,850	4,135	5,656	3,145	557,747	211,125	23,121	28,399	114,840	32,605
1930	3,389	1,836	347	12	8,620	2,503	12,356	4,351	6,305	3,857	623,820	212,399	21,033	30,183	125,177	33,309



# Venereal Diseases (L.C.C. Scheme).

Return showing the extent to which the facilities have been utilised during the year ended 31st December, 1930.

HOSPITAL.	New Cases.					No. of Persons.		Total attendances.	No. of In-patient days.	Sal. Subs. doses given.	Pathological Examinations.								Total.
	Syp.	S.C.	Gon.	Not V.D.	Total.	Ceased to attend.	Dis-charged				Spiro.		Gon.		Wass.		Others.		
											(a)	(b)	(a)	(b)	(a)	(b)	(a)	(b)	
Albert Dock ...	223	74	439	245	981	158	344	13,852	2,391	1,547	84	2	499	20	602	172	...	...	1,379
Gt. Ormond Street ...	39	...	14	537	590	135	46	3,514	2,254	1,479	...	1	420	212	661	593	625	320	2,832
Guy's ...	513	63	876	845	2,297	284	754	64,880	2,338	4,843	479	...	9,514	756	3,838	2,475	7,305	1,744	26,111
King's College ...	184	2	129	171	486	166	202	14,253	904	969	10	13	2,630	147	1,227	2,694	82	...	6,803
L.C.C. Clinic (6 months)	298	31	676	522	1,527	293	86	76,183	...	4,051	379	...	6,612	284	2,743	1,320	3,076	1,236	15,650
London (6 months)	227	...	423	437	1,087	491	136	36,802	792	2,041	10	2	3,703	531	937	2,084	...	...	7,267
Metropolitan	61	24	152	117	354	98	60	11,539	13	1,161	29	...	504	58	433	252	14	73	1,363
Middlesex ...	152	4	420	82	658	258	135	29,556	580	1,507	28	3	3,188	186	696	1,221	20	252	5,594
Miller General ...	126	13	270	81	490	219	130	14,397	152	1,272	36	...	1,207	6	349	216	...	...	1,814
Royal Free ...	150	...	465	648	1,263	178	323	23,811	1,400	1,297	10	...	5,624	89	2,128	610	167	...	8,628
Royal London Oph. ...	193	...	40	...	233	96	134	3,136	802	1,278	1	...	80	...	663	...	7	...	751
Royal Northern ...	234	10	521	224	989	141	357	24,601	167	2,021	63	4	1,770	73	1,056	1,442	5	1	4,414
St. George's ...	167	15	494	217	893	68	767	30,916	297	1,860	...	15	422	360	1,289	214	...	...	2,300
St. John's (Lewisham)	81	2	136	245	464	64	166	9,353	878	1,262	13	...	297	86	901	648	920	222	3,087
St. Mary's ...	235	4	402	192	833	240	179	10,308	729	1,488	8	4	890	333	416	1,351	...	...	3,002
St. Paul's ...	260	1	1,148	1,182	2,591	229	932	131,516	1,859	4,196	275	...	9,023	1,642	2,954	426	155	67	14,542
St. Thomas' ...	830	70	2,006	2,789	5,695	1,097	1,558	178,299	3,488	9,490	...	...	10,206	2,179	9,659	1524	6,769	581	30,918
Seamen's ...	491	31	747	144	1,413	1,204	101	14,862	9,666	1,434	54	...	1,234	84	847	129	528	7	2,883
South London for Women	42	1	85	151	279	27	74	4,074	664	396	1 1	2	756	81	231	641	1	...	1,723
University ...	214	1	467	63	745	355	196	34,975	485	1,845	...	...	1,703	199	1,068	18	...	...	2,988
West London ...	404	7	804	945	2,160	204	543	74,377	1,718	4,535	212	2	3,062	258	2 074	674	9	43	6,334
Westminster...	71	6	176	24	277	87	107	19,257	117	1,157	18	6	960	34	480	1,299	50	1,088	3,935
S.A. Mothers' ...	24	...	170	301	495	176	4	11,758	...	36	3	...	3,736	...	429	...	...	...	4,168
Children's, Waddon...	6	...	63	...	69	...	60	...	12,835	...	...	...	...	...	...	...	...	...	...
TOTALS ...	5,225	359	11,123	10,162	26,869	6,268	7,394	836,219	51,216	51,165	1,723	54	68,040	7,618	35,681	20,003	19,733	5,634	158,486

(a) For Centre, 125,177.

(b) For Practitioners, 33,309.





## Venereal Diseases.

### Utilisation of facilities at hostels, 1930.

Particulars of the work done on behalf of the participating authorities by the hostels in the scheme for the year ended 31st December, 1930. These institutions are as follows:—

Royal Free—20-22 Highbury Quadrant, N.  
 Royal Free—62 Regent's Park Road, N.W.  
 St. Thomas'—148 Lambeth Road, S.E.  
 Southwark Diocesan—80 Stockwell Park Road, S.W.  
 Salvation Army—122-4 Lower Clapton Road, E.  
 Salvation Army—126-8 Lower Clapton Road, E.  
 West London Mission—35 Parkhurst Road, N.

The following table shows the allocation of the patients received at these institutions, to the areas in the scheme:—

AREA.					No. of Patients.	Aggregate No. of days in residence.	Percentage (days).
London County	...	...	...	...	152	16,487	54.3
Surrey	...	...	...	...	18	2,176	7.2
Essex	...	...	...	...	18	2,601	8.6
Middlesex	...	...	...	...	25	2,985	9.8
Herts	...	...	...	...	20	1,930	6.3
Kent	...	...	...	...	27	2,766	9.1
West Ham	...	...	...	...	1	121	.4
Croydon	...	...	...	...	5	819	2.7
Bucks	...	...	...	...	4	267	.9
East Ham	...	...	...	...	2	210	.7
TOTALS	...	...	...	...	272	30,362	100.0

## MATERNITY AND CHILD WELFARE.

### Notification of Births.

The birth rate for 1930 was 18.2. There were 6,428 live births and 195 stillbirths (total births, 6,623) officially notified in accordance with the Notification of Births Act, 1907.

### Number of Births in the Borough in the last 5 years:—

1926	1927	1928	1929	1930
6710	5991	5913	5766	5606

*These figures represent the net number of births of West Ham residents.*

### Health Visiting.

All children born in the Borough are visited at intervals during infancy and up to 5 years of age, when the child passes over to the care of the School Medical Service. Summary cards are made out by the Health Visitors for all children when they enter School at 4—5 years of age, and are passed to the School Medical Officer: the notes on the cards regarding methods of feeding in infancy, physical and mental development of the child in its early years, any illnesses from which it has suffered, are of great service at the first and subsequent School Medical Inspections, and serve to link together these two branches of the Public Health Service.

On receiving a notification of birth, the Health Visitor of the district visits the mother and baby on the eleventh day, i.e., after the doctor or midwife has presumably ceased to attend. Thereafter visits are paid at quarterly intervals till 2 years of age, and every six months from 2—5 years of age. This is the minimum of visits paid; more frequent visits are paid to all necessitous cases, e.g. premature or ailing babies. Advice is given to the mother on the general care of infants and young children: on general hygiene, and on her own health, etc. In addition, the mothers are advised where they may obtain extra nourishment or help in necessitous cases. The work and aim of the Infant Welfare Clinics is explained, and the mothers are encouraged to attend the Centres with their children. Infant Welfare Centre work is based on home visiting, and much valuable information can be gained by the Medical Officer of the Clinic from the Health Visitors regarding home conditions of the families who attend the Clinic. The Health Visitors, in return, are kept in touch with the advice given to these mothers at the Centres, so that they may follow their cases up to see that the advice is being carried out, and to explain more fully the instructions given at the Clinics. In 1930, 79% of infants under one year of age were taken to the Infant Welfare Clinics in the Borough—a testimony to the work of the Health Visitors in their home visiting.



Systematic antenatal visiting is done by the Health Visitors ; advice is given to the expectant mothers regarding personal hygiene, cleanliness of the home, and the general preparation for confinement. Many expectant mothers are sent to the Antenatal Clinics.

Special visits and enquiries are made into the causes of all deaths up to 5 years of age, and into all cases of stillbirth. Weekly visits are paid as long as necessary to all cases of Puerperal Fever or Pyrexia, Ophthalmia Neonatorum, and Pemphigus Neonatorum in order to see that the patient is receiving efficient attention, and also that she is carrying out all instructions for her own health or the health of the infant.

**\* Visits paid by all Health Visitors during 1930 :**

	First Visits.	Total Visits.
(a) To expectant mothers.	7674	26338
(b) To children under 1 year of age.	9226	70981
(c) To children between the ages of 1 and 5 years.		82796
†(d) Infant Life Protection visits.	60	269
†Special visits (Home Helps, etc.) ...		8283
Total visits ...		<hr/> 188667 <hr/>

† Visits by Municipal Health Visitors only.

\* By all Health Visitors is meant 12 full-time, fully-trained Health Visitors employed by the Council, plus 40 Health Visitors employed by Voluntary Associations in the Borough, viz. 36 Nurses employed by the Plaistow District Nurses' Homes as Health Visitors, 2 by the South West Ham Health Society; and one each by the Stratford Day Nursing Centre and by the Trinity Mission Centre respectively. The Nurses employed by the three last-named Associations do not undertake routine visiting, but visit necessitous cases attending their Centres. Those Nurses in training at the Plaistow District Nurses' Home undertake the routine visiting of all infants attended at birth by that Association.



**Table shewing Method of Feeding, up to 6 months of age, in Infants born in 1930 and Visited by the Health Visitors.**

No. Visited	Completely Breast fed	Partially Breast fed	Complete Artificial Feeding
5183	3573 68.3%	884 17.5%	726 14.2%

### **Clinics.**

At the beginning of 1930 there were two Municipal and seven Voluntary Maternity and Child Welfare Clinics in the Borough; at all Clinics, sessions were held for infants and toddlers; antenatal sessions were held at both Municipal and at four of the Voluntary Clinics. A detailed report of the work of the Voluntary Infant Welfare Centre is of interest, showing the scope of the work at these Clinics subsidized by the Maternity and Child Welfare Committee.

### **Voluntary Infant Welfare Centres.**

There are seven Voluntary Infant Welfare Centres in the Borough of West Ham; three are conducted by the Plaistow Maternity Hospital and District Nurses' Home; a fourth, at Lees Hall, Barking Road, by the South West Ham Health Society; one at the Stratford Day Nursery, Welfare Road, under the auspices of the Women's League of Service; a sixth Voluntary Centre is conducted by Trinity Mission at Oxford Road, Stratford; and the remaining Centre is held at the Given Wilson Institute, Pelly Bridge, under the auspices of a private voluntary committee.

#### **A. Plaistow Maternity Hospital and District Nurses' Home.**

##### **(1) Chesterton House Centre, Balaam Street, E.13.**

This Centre is the largest of the P.M.C. Centres. It serves a large area of the Borough in the Plaistow district. The centre is in charge of a trained Sister, who is also a certified midwife, and it forms a training centre for the pupil-midwives and district nurses working at the Nurses' Home.

**Antenatal Work.** There are two antenatal sessions per week, a doctor being present at each session. The times of meeting are Monday mornings and Friday afternoons. All the mothers examined at these Clinics have booked the Plaistow Maternity Hospital midwives for confinement, either in the Hospital or at home. Individual mothers are not examined by the doctor at every visit.

**Infant Welfare Work.** There are four Infant Welfare Clinics each week, held on Wednesday and Thursday mornings and afternoons; a doctor is present at two sessions, viz. Wednesday morning and Thursday afternoon. At the other two sessions the mothers and children are seen by the Sister-in-charge: the children are weighed and advice given. Milk foods, cod liver oil preparations, and simple drugs are sold at a cheap rate to the mothers.



Any mother may attend the P.M.C. Centres with her baby, irrespective of whether she was confined by the P.M.C. midwives.

**Special Features of this Centre.** Health Talks are given during the Antenatal Clinics to the expectant mothers; these are given by a trained midwife. No other special classes are held.

### **(2) St. Luke's Centre, Tidal Basin.**

A new Centre has been built in this district recently; it is situated in one of the poorest and most congested areas of the Borough, where there is great need for infant welfare work.

It is conducted on similar lines to the Chesterton House Centre, being in charge of a trained nurse and midwife.

**Antenatal Work.** There is one antenatal session per week, on Friday afternoons, a doctor being in attendance weekly, and, here again, all the mothers who attend this Centre have booked the P.M.C. midwives for confinement.

**Infant Welfare Work.** The Centre is open daily from 9 a.m. to 6 p.m.; a doctor is present only on Tuesday afternoons each week to see the infants and toddlers. At the other sessions the mothers are interviewed by the Sister-in-charge or the trained Staff Nurses, and the infants and children can then be weighed.

**Health Talks.** A class for expectant mothers is held once weekly by one of the trained midwives.

### **(3) Martin Street Centre, Stratford.**

This Centre, situated in a poor and over-crowded area, is the smallest of the P.M.C. Centres. It is in charge of a trained Sister, who is also a midwife, and is conducted on similar lines to the two other Centres.

**Antenatal Work and Infant Welfare Work.** A combined Antenatal and Infant Welfare Clinic is held once a week, on Tuesday afternoons, a doctor being present weekly. Mothers and babies can be seen by the Sister-in-charge any morning from 9.30—10 a.m.

Foods and Simple Medicines are sold as at the other centres.

### **B. Lees Hall Infant Welfare Centre, Barking Road.**

This Centre is in charge of a Superintendent Nurse, who is now helped in her clinic work by one of the Municipal Health Visitors. They are assisted at the Clinics by the ladies of the Voluntary Committee.

**Antenatal Work.** An Antenatal Clinic is held on alternate Wednesday mornings at 10 a.m.; appointments are made by the Nurse-in-charge for the expectant mothers to be examined by the doctor, and a definite number of women is seen at each session,

**Infant Welfare Work.** Three sessions are held weekly—Tuesdays and Fridays at 1.30 p.m., when the infants and toddlers are weighed and advice given to the mothers by the Nurses. Wednesday, 1 p.m., a clinic is held for medical consultations (Dr. J. Lorimer Hawthorne).



Dried milk is the only food sold at this Clinic.

**Health Talks.** Mondays, 2.30 p.m., Prenatal Care—Nurse. Thursdays, 2.45 p.m., Infant Care—Nurse. Thursday, 2 p.m., Sewing Class. In addition, the Superintendent Nurse is in the office daily from 4—5 p.m. (except Saturdays), when she will advise any mother about herself or her baby.

#### **C. Stratford Day Nursery, Welfare Road.**

This Centre is in charge of a Superintendent Nurse.

**Antenatal Work.** No antenatal work is done.

**Infant Welfare Work.** Three sessions are held weekly: on Monday and Friday afternoons, at 1.30 p.m., the doctor (Dr. Dorothea Brooks) is present; on Wednesday afternoons, the Nurse-in-charge weighs the infants and children, and gives advice to the mothers.

Dried milk preparations are sold at a cheap rate.

Medicines sold at the Centre include cod liver oil preparations and certain simple drugs.

In addition there are three sessions per week for **Artificial Sunlight Treatment**—Monday, Wednesday, and Friday mornings—a doctor being present on Monday mornings (Dr. Eva Morton).

**Health Talks.** Health Talks are given to the Mothers on Thursday afternoons—a separate session—by the Nurse-in-charge (Miss Jermyn).

**Sewing Class.** The Sewing Class at this Centre is a special attraction: it is held on Tuesday afternoons, and is conducted by a qualified Sewing Teacher.

#### **D. Trinity Mission Infant Welfare Centre, Oxford Road.**

This Centre serves a congested, poor area of the Borough; it is in charge of a trained Children's Nurse (Miss Butterworth) with an assistant helper.

**Antenatal Work.** None.

**Infant Welfare Work.** Three sessions are held weekly: on Monday afternoons the babies and children under 5 years may be seen by the Superintendent Nurse for weighing. On Wednesday and Thursday afternoons a doctor is present for consultations from 1.30—4 p.m. (Dr. Jean Smith).

Foods and drugs sold at the Centre include, as at the other Centres, various dried milk and cod liver oil preparations.

The Centre is open daily (except Saturdays) for the sale of food, from 9.30—10.30 a.m.

**Health Talks.** Talks are given on Tuesdays from 2—4 p.m. by Lecturers from various Health and other Societies,

**Sewing Class,** Friday, 2—4 p.m.; a special teacher is present to conduct this Class.

**Home Nursing Classes** for mothers are occasionally given for short periods by Dr. Jean Smith.



### **E. Given-Wilson Institute Centre, Pelly Bridge.**

This is a small Centre, having one session only per week, at which one of the Municipal Health Visitors is present to weigh the babies and assist the doctor (Dr. Eva Morton). This session is held on Monday afternoons at 2 p.m., and a doctor is present at every session. No antenatal work is done.

Food and Drugs sold at the Centre include dried milk preparations, cod liver oil preparations, etc.

**Health Talks.** Talks are given to the mothers on alternate Tuesdays, at 3 p.m., by a trained nurse and midwife.

No Sewing Class is held.

**Home Visiting from the Voluntary Centres.** An arrangement has been made whereby those women who were attended at confinement by P.M.C. midwives are visited as a routine by nurses attached to the Home until the children reach school age. Home visiting is done by the Nurses or Superintendents from Lees Hall Centre, Stratford Day Nursery, and Trinity Mission Centres to weakly and ailing infants and children attending the Centre. These children are visited, in addition, by the Municipal Health Visitors in the course of their ordinary routine work.

**Each voluntary centre** is visited once a week by a Municipal Health Visitor in order that the Maternity and Child Welfare Department may be kept in touch with the advice given to the mothers attending the Centres with their children. The reports of medical examinations and advice given at the Centre is passed on to the Health Visitor of the district in which the child lives.

### **New Clinics.**

Taking into consideration the areas served by the two existing Municipal Centres and by the seven Voluntary Clinics, the Maternity and Child Welfare Committee decided that there were several districts of the Borough inaccessible to the existing Clinics, and therefore out of touch with the facilities offered by these Centres. Accordingly, schemes were proceeded with to provide this service for mothers and young children in every area of the Borough. As a result, the first permanent Municipal Welfare Centre was opened by the Minister of Health on the 30th October, 1930. This Centre is situated in Grange Road, in the centre of the Council's Housing Estate. It serves a large population, who already appreciate the work done at the Clinic, which is open on several sessions weekly for antenatal, infant welfare, and dental treatment. Two other permanent Welfare Centres have recently been opened. One centre is erected in Forest Street, Forest Gate, where it will prove of immense value to those mothers living in that district hitherto unserved by any existing Clinic by reason of inaccessibility. The third Clinic has been erected by the Council on the new Housing Estate in Maybury



Road, Plaistow. The houses there have been built to accommodate the population de-housed in connection with the Victoria Dock Road Scheme; but in addition the mothers already living in that area of the Borough have been unable to attend any Welfare Centre regularly owing to the far distance they have had to travel to reach a Clinic. Sessions are held at all these Clinics for infants and children up to 5 years of age; there are antenatal and post-natal sessions; also dental treatment for mothers and young children.

A second full-time Assistant Lady Medical Officer for Maternity and Child Welfare has recently been appointed to assist in the work.

This increase in clinic work has resulted also in the need for employment of additional Health Visitors; six additional fully-qualified Health Visitors have been appointed by the Council, making a total of eighteen full-time Municipal Health Visitors.

A Dental Nurse has also been found necessary, thereby relieving the Health Visitors of attendance at ordinary dental sessions.

The two Municipal Antenatal Clinics were well attended during 1930: the private midwives continue to use the facilities offered to them, and the majority of patients are referred to the Clinic by midwives, to whom a report is sent after each examination of their patients. Attendances of antenatal mothers have been very regular: the Health Visitors follow up all mothers who report at the Antenatal Clinics, to give advice regarding preparation for confinement at home. Absentees from the Antenatal Clinics are visited at once by a Health Visitor to ascertain the reason for non-attendance on the appointed date; in this way expectant mothers are kept under close supervision.

In addition to medical examination of every expectant mother at each visit, opportunity is taken to teach the mothers something of the early care of infants by instruction in breast hygiene and suitable diet with a view to breast feeding later. Model garments are displayed, and help given in the making of such garments. That this help is appreciated is borne out by the fact that mothers who attend an Antenatal Clinic generally adhere to a more regular routine in the management of their infants, refraining from giving the infants "dummies" to suck, and from other irregularities in management.

Prejudice against attending an Antenatal Clinic for examination and advice is fast dying out in this Borough: the majority of expectant mothers regard antenatal care as a natural and necessary supervision. One of the private midwives in practice in the Borough recently stated that nearly all her patients come to her asking for a letter of introduction and recommendation to the Antenatal Clinics.



**Centres and Clinics (Municipal and Subsidized by the Council) :**

Address Where Held.	No. of Sessions held weekly	Day and Time of Meeting.	Average per Session.				Arrangement for Medical Supervision.
			Centre Attendances.		Medical Consultations.		
			Expectant Mothers.	Children.	Expectant Mothers.	Children.	
Silvertown Municipal Centre ... ..	2	Wed., 10 a.m. and 2 p.m.	9.23	35.28	9.23	28.0	Dr. Helen Campbell.
West Ham Lane Municipal Centre ... ..	4	Mon., Tues., Thurs., 2 p.m. Tuesday, 10 a.m.	23.21	38.3	23.21	29.83	Dr. Helen Campbell.
Grange Road Municipal Centre ... ..	2	Wed., 10 a.m. and 2 p.m.	8.0	34.	8.0	34.	(Opened for work 10th Dec., 1930). Dr. Helen Campbell.
Chesterton House ...	6	Wed., Thurs., 11 a.m. and 2.30 p.m. Mon. and Fri., 1.30 p.m.	156.	87.	61.9	29.7	Dr. Flora Hogg & Dr. Peter Kennedy.
Docks Centre, Hoy Street	5	Daily, 2 p.m.	115.	77.	41.5	47.	Dr. Flora Hogg & Dr. Peter Kennedy.
Martin Street Centre ...	1	Thursday, 3.30 p.m.	32.8	32.8	13.3	9.7	Dr. Flora Hogg & Dr. Peter Kennedy.
South West Ham Health Society, Lees Hall ...	3	Tues., Wed., and Fri., 1.30 p.m.	15.1	68.8	5.6	18.9	Dr. J. Lorimer Hawthorne.
Trinity Mission Centre, Oxford Road ... ..	2	Wed. and Thurs., 1.30 p.m.	—	48.9	—	34.0	Dr. Jean Smith.
Stratford Day Nursery Welfare Centre ...	3	Mon., Wed., and Thurs., 1.30 p.m.	5.3	47.4	—	23.6	Dr. Dorothea Brook-
Given Wilson Institute	1	Mondays, 2 p.m.	—	17.48	—	16.32	Dr. Eva Morton.

## **Stratford Day Nursery.**

The work carried on at the Stratford Day Nursery continues to show excellent results. In this district many of the mothers are obliged to go to work daily; the provision of a Day Nursery, where their infants and young children can receive skilled care and attention has proved of inestimable value. There is provision at the Stratford Day Nursery for 50 children under 5 years of age, including infants.

### **Total number of Attendances of Children during 1930:**

- (1) Whole day, 6,454.
- (2) Average daily attendance, 28.
- (3) Average weekly attendance, 143.

A sum of 8d. per day is charged to the mothers.

## **Sunlight Clinic.**

Treatment for young children by artificial sunlight was first started in 1925 by the Women's League of Service for Motherhood at the Welfare Road Clinic, Stratford. In February, 1928, as the result of an arrangement made by the Maternity and Child Welfare Committee of the Borough and the Committee of the above League, two additional sessions per week were established for this treatment. Children under 5 years of age are referred to this Clinic from the Welfare Centres in the Borough, through the Medical Officer of Health. A Municipal Health Visitor attends at these two sessions. The treatment has proved of great value in many cases of Rachitic and weakly children.

### **Attendances at the Sunlight Clinic.**

- |                         |   |
|-------------------------|---|
| (1) Municipal Clinic.   | Number of new cases : 105.                      |
| (2 sessions per week)   | Number of attendances<br>for treatment : 2,695. |
| (2) Day Nursery Clinic. | Number of patients : 620.                       |
| (3 sessions per week)   | Number of attendances<br>for treatment : 5,045. |

## **Dental Scheme.**

In February, 1930, Miss E. K. Wilson, L.D.S., was appointed full-time Dental Officer. Eleven Dental Sessions have been held weekly throughout the year for children under 5 years of age. The work has been carried out at the West Ham Lane Infant Welfare Clinic and at the School Dental Clinics while the School Dentists are engaged at the Schools. With the establishment of the new Maternity and Child Welfare Clinics, dental work



will be performed in these premises, in specially equipped dental clinics. In January, 1931, dental treatment was begun for expectant and nursing mothers (up to 6 months after confinement). Every effort is made, in the dental treatment of the young children, to preserve the primary teeth; necessary extractions are done under nitrous oxide gas anaesthesia. Once a child has attended the Dental Clinic for treatment, subsequent appointments are made at regular intervals until the child enters school, to prevent the development of further dental caries.

As a result of this more intensive treatment, one finds that the number of extractions per child has been very considerably reduced, e.g. it was common two or three years ago at the "Gas Clinic" to find that most children required many extractions to clear the mouth of infected teeth. Now this is a much less common occurrence: the majority of children have previously attended for fillings. Extraction of two or three teeth, too decayed for conservative treatment, completes the treatment, after which the child is kept under observation.

#### **Attendances for Dental Treatment in 1930.**

No. of attendances for dental treatment	...	...	2470
Average attendance per child	...	...	4
No. of attendances for extraction	...	...	414
No of teeth extracted	...	...	1639
No. of attendances for fillings	...	...	1601
No. of teeth filled	...	...	1745
No. of attendances for examination (special dressings, silver nitrate dressing, etc.)	...	...	457
No. of new cases treated	...	...	747

#### **Distribution of Dried Milk to Expectant and Nursing Mothers, and to Children under 3 years of age, during the Year 1930.**

This branch of the Council's service has now been in operation for over ten years, and is carried out in accordance with Circular 185 of the Ministry of Health. Every care is exercised to see that only residents of the Borough entitled to supplies participate in the Council's scheme.

The Municipal Distributing Centres have not been altered since my last report, and are as follows:—

- 84 West Ham Lane, Stratford.
- Public Hall, Barking Road, Canning Town.
- Nurses' Home, Howards Road, Plaistow.
- Barnwood Road, Silvertown.

The milk powder is received in bulk in hermetically sealed canisters, and is packed into grease-proof bags enclosed in cartons on which printed directions are given. Only the estimated required quantity is packed daily in order to ensure, as far as possible, the milk being fresh when supplied to applicants.

The supplies delivered by the Contractors during the year have been tested both chemically and bacteriologically, and found to be satisfactory.

Since August, 1920, Dried Milk has been distributed under the Maternity and Child Welfare Scheme as follows:—

Year 1920—	18,247 packets:	8 tons	3 cwts.	
1921—	73,872 do.	33 tons		
1922—	127,934 do.	57 tons	2 cwts.	
1923—	221,114 do.	98 tons	14 cwts.	
1924—	237,963 do.	106 tons	4½ cwts.	
1925—	222,410 do.	99 tons	5 cwts.	90 lbs.
1926—	222,776 do.	99 tons	9 cwts.	8 lbs.
1927—	206,015 do.	91 tons	19 cwts.	47 lbs.
1928—	218,312 do.	97½ tons.		
1929—	195,910 do.	87 tons	9 cwts.	22 lbs.
1930—	195,250 do.	87 tons	3 cwts	34 lbs.

## DRIED MILK.

### What every Nursing Mother ought to know.

The Council are selling Full Cream Milk in a dried form suitable for infants and nursing mothers.

Dried Milk is a valuable food (not a patent manufactured food), being good cows' milk from which the moisture has been evaporated, and possesses certain special advantages. Liquid milk cannot be kept for any lengthened period without undergoing changes which render it unfit for food, but Dried Milk can undoubtedly be preserved for a considerable time with practically unimpaired food value.

Dried Milk is an excellent substitute—not for breast milk, but for much of the milk upon which infants are now fed. Under present conditions, and in view of the liability to bacterial changes in fresh milk when kept in the ordinary dwelling-house, especially in hot weather, it is often desirable to use dried milk in preference.

By its use waste is preventable: the exact quantity can be made up as and when occasion requires.



The processes used in drying milk largely reduce the number of bacteria present, and materially decrease the risk of conveyance of disease from tuberculous milk, a very common cause of tuberculosis in children.

Mortality figures showing comparison of death rate between children fed on Dried Milk and other hand-fed children are strikingly in favour of the use of Dried Milk.

Scurvy and Rickets are rare in infants fed on Dried Milk, and their occurrence is probably not attributable to this form of food.

Full Cream Dried Milk requires to be mixed with about seven parts by weight of water to give a mixture corresponding to ordinary milk. Therefore, 5 ozs. of Dried Milk should reconstitute to correspond to one quart of milk.

Dried Milk is cheaper than liquid milk, and it is sold by the Council at cost price for the safeguarding of the health of young children and nursing mothers.

Dried Milk can be obtained from the various distributing centres by Nursing and Expectant Mothers for their own consumption or for the use of children under three years of age in accordance with a Scale adopted by the Council. Dried Milk can also be obtained for the use of children between three and five years of age, but in such cases a medical certificate must be supplied in respect of each child.

Any nursing mother experiencing difficulty in preparing the milk should send a Post Card to the Medical Officer of Health at the Town Hall, Stratford, when a Health Visitor will call and give all the information necessary.

### **Home Helps.**

"Home Helps" is the name given to women who are employed by the Council to assist in the homes during the lying-in period of certain necessitous women. These women are visited and approved as suitable by the Health Visitors before they are allowed to undertake the work. As an aid to the selection of a suitable Home Help, a list of such available women is kept at the Town Hall. The work of these women is closely supervised by the Health Visitor, and only those women from homes clean and free from infectious disease are allowed to act as Home Helps. During the two weeks in which the Home Help attends at the patient's home, she is visited several times by the Health Visitor, in order to see that all duties are carried out as required. The duties of these women are set out in the following form, a copy of which is handed to each one on her accepting duty. In order that the Health Visitor may at once get into touch with the case, the Home Help is required to notify the Medical Officer of Health not later than the day following the confinement that she has commenced her duties.



## DUTIES OF HOME HELPS.

- 1.—To act under the direct supervision of the Health Visitor.
- 2.—To be at hand at the time of labour and confinement: to see that the patient's room is clean and everything in readiness for the arrival of the Doctor or Midwife. The Home Help is not responsible for the confinement itself, nor must she interfere in any way with the instructions of the Doctor or Midwife.
- 3.—After the confinement, to remove all soiled linen from the patient's room, and to care for her generally, especially as regards cleanliness and food.
- 4.—To see that the infant is properly fed and cared for, and, if possible, put to sleep in a separate cot.
- 5.—To wash and dry the labour clothes as soon as possible, and to keep the ordinary clothes washed in the usual way: to get meals and tidy the house as the patient would, were she not for the time laid aside.
- 6.—To care for any other children there may be, and see that school children attend punctually, and are clean and tidy.
- 7.—Should the Home Help in any way come into contact with a case of infectious disease, either in her own home, the home of the patient, or elsewhere, she must at once report the matter to the Medical Officer of Health.
- 8.—**On the day following the confinement**, the Home Help must notify the Medical Officer of Health (Town Hall, Stratford, E.15), that she has commenced her duties.
- 9.—Any conduct on the part of the Home Help which is contrary to the interests of the person she is helping, may lead to her name being removed from the list of Home Helps, and render her liable to forfeit the payment due to her.

F. GARLAND COLLINS,

Town Hall,

West Ham.

Medical Officer of Health.

To:

The Medical Officer of Health,

Town Hall, Stratford, E.15.

In accordance with my agreement to act as Home Help to  
Mrs. .... of .....

I hereby inform you that I began my duties on the.....  
day of ..... 193.....

Signed.....

Home Help's Address.....

(Detach this Slip and forward as directed above.)



Number of applications for Home Helps during 1930	...	1097
Eligible (under Council's Scale of Income)	...	930
Ineligible (under Council's Scale of Income)	...	154
Withdrawn	...	13
		<hr/>
	Total	1097
		<hr/>

The Home Help Scheme now allows the employment of a Home Help to look after the home and children of the lying-in woman whether she is confined at home or in hospital. The value of this service is in saving many mothers from getting up too soon after confinement to attend to household duties; it also ensures that the other children of the patient are not neglected in any way while the mother is laid up.

### Midwives.

Total number who notified their intention to practice in the Borough in 1930 was 103: all of whom are trained midwives.

Number of cases attended by midwives in 1930	...	3107
Number of cases in which medical help was summoned	...	763
Number of cases in which the midwife acted as a maternity nurse	...	266

Midwives practising for Associations or Privately	Number notifying intention to practise	No. of births attended	No. of Records of sending for Medical aid
Plaistow Maternity Charity	46	2027	535
Essex County Nursing Assn.	25	73	24
Salvation Army Nurses	4	118	76
Tate Nurses Institute	7	132	20
Queen Mary's Hospital (External)	10	146	14

### Private Practice:

Midwives residing within Borough—

a	...	1	97	24
b	...	1	2	0
c	...	1	0	0
d	...	1	170	34
e	...	1	1	0
f	...	1	66	4
g	...	1	6	0
h	...	1	137	20

Midwives residing without, but practising within the Borough

a	...	...	...	...	1	2	...	1
b	...	...	...	...	1	4	...	1
c	...	...	...	...	1	126	...	10
					—	—	—	—
					103	...	3107	...
					—	—	—	—
								763

### Midwives' Act, 1902 and 1918.

Analysis of records of sending for Medical Aid, 1930.

#### PREGNANCY—

Albuminuria .....	4
Miscarriage .....	22
Varicose Veins .....	5
Unsatisfactory General condition	5
—	
Total ...	36
—	

#### LABOUR—

Malpresentation .....	37
Prolapsed cord .....	7
Premature rupture of membranes ...	2
Prolonged labour .....	110
Torn Perineum .....	165
Haematoma of Vulva ...	1
Antepartum haemorrhage	33
Post partum haemorrhage...	34
Adherent Placenta .....	30
Retained membranes ...	6
Cardiac disease in mother ...	1
Unsatisfactory condition of mother ...	8
—	
Total ...	434
—	

#### PUERPERIUM—

Rise of temperature ...	81
Phlebitis .....	13
Mastitis .....	4
Suppression of urine ...	1
Mumps .....	1
Postpartum eclampsia ...	1
Retroverted Uterus ...	1
Unsatisfactory general condition ...	36
Unsatisfactory mental condition ...	2
—	
Total ...	140
—	

#### INFANT—

Prematurity: unsatisfactory condition ...	62
Watery blisters .....	7
Rash on body .....	5
Discharging eyes .....	36
Tongue tie .....	5
Malformation .....	8
Asphyxia .....	9
Cyanosis .....	7
Fits .....	2
Stillbirth .....	5
Icterus neonatorum .....	4
Birth injury .....	2
Haemorrhage from cord ...	1
—	
Total ...	153
—	



## Hospital Accommodation.

The Council does not possess a Municipal Maternity Home: a large maternity block is attached to the Forest Gate Hospital, under the Public Assistance Committee; agreements have been made whereby subsidies are granted to Queen Mary's Hospital, Stratford, and to the Plaistow Maternity Hospital for the reception of maternity cases.

Maternity Hospitals.	No. of beds	West Ham Residents	
		No. of cases	Weeks spent
(1) Queen Mary's Hospital .....	50	498	952
(2) Plaistow Maternity Hospital .....	56	892	1736
(3) Forest Gate Hospital .....	44	198	650

## Hospitals for Children under 5 years of age.

Arrangements have been made with St. Mary's Hospital, E.13, and with the Invalid and Crippled Children's Hospital, E.13, whereby infants and children under 5 years of age may be admitted for hospital treatment.

	No. of beds	West Ham Residents	
		No. of cases	Weeks spent
(1) St. Mary's Hospital, E.13 .....	10	231	690
(2) Children's Hospital, Balaam Street, E.13			
(a) Ailing Babies' Ward .....	16	155	792
(b) Orthopaedic Ward .....	4	11	29

List of complaints for which children under 5 years were treated at St. Mary's Hospital, and at the Children's Hospital, Balaam Street:—

### St. Mary's Hospital, Plaistow, E.13.

Abscess .....	7	Intussusception .....	4
Accidents .....	1	Laryngitis .....	1
Adenitis .....	6	Marasmus .....	1
Appendicitis .....	1	Cleft Palate .....	3
Bronchitis .....	11	Colitis .....	1
Cataract .....	1	Concussion .....	2
Cellulitis .....	3	Conjunctivitis .....	1
Chorea .....	1	Convulsions .....	6
Circumcision .....	1	Corneal Ulcer .....	5
Injury to:—		Cystitis .....	4
Face .....	1	Diarrhoea and Vomiting .....	2
Hip .....	2	Debility .....	1
Skull .....	2	Diphtheria .....	1
Leg .....	1	Ear Trouble .....	2
Head .....	3	Empyema .....	2

Enteritis .....	23	Otorrhoea .....	3
Fits .....	1	Periostitis of leg .....	1
Foreign body in nose ...	1	Pneumonia .....	29
Genu Varum .....	1	Poisoning .....	2
Glands of neck .....	5	Prematurity .....	1
„ „, groin .....	1	Ptosis .....	1
Haematuria .....	1	Pyelitis .....	1
Haemorrhage .....	1	Pyloric Stenosis .....	2
Heart Trouble .....	1	Pyrexia .....	1
Hernia .....	24	Scalds .....	7
Imperforate Anus .....	1	Septic cases .....	3
Mastoid .....	7	Sequestra Rt. arm .....	1
Measles .....	1	Shock .....	2
Meatotomy .....	1	Swallowed gramophone needle ...	1
Meningitis .....	5	Talipes .....	1
Mumps .....	1	Tonsils and Adenoids ...	6
Naevus .....	6	Tuberculosis .....	2
Nephritis .....	5		
Observation (for) .....	4		

### Children's Hospital, Balaam Street, E.13 (Orthopaedic).

Rickets .....	9	Osteoclasis .....	1
Plating of Femur .....	1		

### Complaints for which Child was admitted to

#### Babies' Ward, Balaam Street Hospital, Plaistow, E.13.

Disease	No. of Cases.	Disease	No. of Cases.
Malnutrition .....	42	Jaundice .....	1
Rickets .....	19	Abscess of face, of neck, of axilla ...	3
Bronchitis .....	15	Meningitis .....	1
Enteritis .....	12	Pyloric Stenosis .....	2
Marasmus .....	10	Pyelitis .....	1
Pneumonia .....	7	Nephritis .....	1
Anaemia .....	7	Colitis .....	1
For observation .....	6	Nervous debility .....	2
Indigestion .....	5	Congenital Laryngeal obstruction ...	1
Infantile eczema .....	4		
Diarrhoea .....	3		
Prematurity .....	4		
Congenital heart disease	3		
Unresolved pneumonia ...	3		
Conjunctivitis .....	2		
		Total ...	155



## **Convalescent Homes for Children.**

During 1930 sixty-eight children under 5 years of age were sent to convalescent homes at the expense of the Council, through the Invalid Children's Aid Association and the Invalid and Crippled Children's Society. The average length of stay per child was 9.2 weeks. These children are all examined by the Assistant Medical Officer for Maternity and Child Welfare, who gives a certificate stating the length of convalescent treatment necessary. In some cases convalescent treatment is required for these young children after an acute illness, most frequently broncho-pneumonia. Such a child is referred by the private doctor or from a hospital. Lengthy convalescence is required to restore these children to perfect health, and to prevent the little ones from developing chronic pulmonary disorders. But the greater number of children under 5 years of age are referred to the Convalescent Clinic because of malnutrition, anaemia, rickets, and general debility; many are recommended from the Infant Welfare Centres in the Borough. Again, a short holiday is of small benefit in such cases—a prolonged stay in healthy surroundings, with suitable diet and adequate rest, will produce wonderful and lasting benefit where all other methods of treatment have been tried with little or no success. At present the facilities for obtaining convalescent treatment for such young children are very inadequate, so that the Societies always have long lists of cases awaiting vacancies. As a result, children in urgent need of convalescent treatment may have to wait several weeks before they can be sent away.

### **Convalescent Home for Nursing Mothers and Infants,**

#### **St. Mary's Convalescent Home, Birchington-on-Sea, Kent.**

During 1930 the two beds rented by the Council at this Home were kept fully occupied. There is a great demand for this convalescent treatment; the care and attention received while at St. Mary's Home has been much appreciated by all the mothers who have spent a holiday there. The physical change is marked, but even more marked is the mental improvement. The mothers return with a happier, and brighter outlook, and as a result they feel ready to cope with the many difficulties at home.

The mothers are all examined prior to admission to the Home. They are chosen from those attending the Welfare Centres or are recommended as suitable cases by the Health Visitors.

Thirty-two mothers and thirty-one infants (under 6 months of age) were sent to the Home during 1930 for a three weeks' period of convalescence.



## **Maternity and Nursing Homes in the Borough.**

There were three registered Maternity Homes in the Borough during the year 1930: one of these being the Plaistow Maternity Hospital, where medical help is readily available, although there is no Resident Medical Officer. The other two Homes were Private Nursing Homes, having part of the accommodation reserved for a limited number of maternity cases, chronic medical cases being treated also in both homes. As a result of several visits paid to one of these Private Nursing Homes, conditions were found to be so unsatisfactory that action was taken in January, 1931, to cancel the registration of this Home for maternity and other cases. Accordingly, in March, 1931, no appeal having been made to the Council by the Matron against the order to close the premises as a Nursing Home, registration was cancelled, and the Home was closed.

There is one other Nursing Home in the Borough with accommodation for three chronic medical or senile cases.

These Homes are all registered under The Nursing Homes Registration Act, 1928, and are inspected periodically.

During 1930 no fresh applications for registration were received.

## **Children Act, 1908.**

On April 1st, 1930, the duties under this Act were transferred from the Board of Guardians to the Maternity and Child Welfare Committee. As a result, the supervision of the foster-children and of the homes of the foster-mothers is now carried out by the Municipal Health Visitors in their respective districts.

Forty-three cases were transferred to the Maternity and Child Welfare Department on 1st April, 1930.

### **Since 1st April, 1930—31st December, 1930:**

Number of applications for registration as foster-mothers...	22
Number of applications passed by the Committee ... ..	18
Number of applications refused by the Committee ... ..	2
Number of applications withdrawn ... ..	2
Number of visits paid to the Homes by the Health Visitor:	
(a) First visits ... ..	60
(b) Total visits ... ..	269

In this Borough the foster-mother is allowed to have one foster-child only. She is visited as a minimum every two months by the Municipal Health Visitor of that district.



## OPHTHALMIA NEONATORUM.

Twenty-two cases of Ophthalmia Neonatorum were notified to me as Medical Officer of Health during the year 1930. Formerly such cases were notified by the midwife, but as a result of the alteration of the rules of the Central Midwives' Board a midwife must now call in medical help for every case of "discharging" eyes, however slight," so that cases of Ophthalmia come under medical supervision at the earliest onset.

Arrangements are in force whereby any infant suffering from Ophthalmia Neonatorum can be admitted to hospital, if necessary, for immediate treatment.

Notified	Cases Treated		Vision		Total	Deaths
	At Home	In Hospital	Unimpaired	Impaired	Blindness	
*22	7	15	19	0	0	0

\* Of whom 3 were not resident in West Ham.

## PEMPHIGUS NEONATORUM.

There were two cases notified during the year, and six cases of "Watery Blisters," which were undoubtedly Pemphigus. All were mild in type; there was complete recovery in every case. The onset varied from the 3rd to the 18th day, the average day of onset being the 13th day after confinement. Thus, the condition was found in two of these cases by the Health Visitor on her first visit, having commenced after the midwife had discharged her duties.

One case of notified Pemphigus Neonatorum was followed 10 days later by a case of "watery blisters" in the practice of one midwife; there was no connection traceable between the other cases.

## Maternal Mortality.

Total number of notified births in the Borough in 1930 was 6,623. Of this number 5,606 were West Ham residents.

Number of deaths due to complication of pregnancy of childbirth, 18.

Maternal Mortality Rate, 2.8 per 1,000.

Number of deaths due to Sepsis, 9.

Number of deaths from other causes, 9.

Average age of mothers at death, 32.2 years.





Table I. History of Cases of Maternal Deaths due to Sepsis.

No.	Para.	Ante-natal care.				No ante-natal care.	Delivered.		Died.		Full-time or Premature.	Abortion.	Certified Cause of Death.
		Hos-pital.	Clinic.	Pri-vate Doctor	Mid-wife.		Home.	Hos-pital.	Home	Hos-pital.			
1	5	—	+	—	—	—	+	—	—	+	Full-time Complicated labour	—	Puerperal Septicaemia
2	4	+	—	—	—	—	+	—	—	+	Full-time Twins Complicated labour	—	Puerperal Septicaemia
3	1	+	—	—	—	—	—	+	—	+	Premature induction at 36 weeks for disproportion Forceps delivery		Puerperal Septicaemia
4	5	—	—	—	—	+	+	—	—	+	—	20 weeks Admitted to hospital 2 days after abortion	Puerperal septicaemia and miscarriage
5	2	—	+	—	—	—	+	—	+	—	Full-time Normal	—	Puerperal septicaemia
6	9	—	—	—	—	+ Refused	+	—	—	+	Premature 38 weeks Macerated foetus Illegitimate Concealed pregnancy	—	Pulmonary embolism Puerperal sepsis
7	8	—	—	—	—	+ Patient did not know she was pregnant	+	—	—	+	—	8 weeks Admitted to hospital 2 days after onset	Septicaemia Abortion
8	2	—	—	—	—	+	+	—	+	—	—	18 weeks Died suddenly few hours after onset of vaginal haemorrhage	Septicaemia and pneumonia following abortion. Natural causes
9	4	—	—	—	—	+	+	—	—	+	—	20 weeks. Uterine haemorrhage for 2 weeks before medical aid was called in. Temperature on admission	Septicaemia following abortion brought on by using a syringe





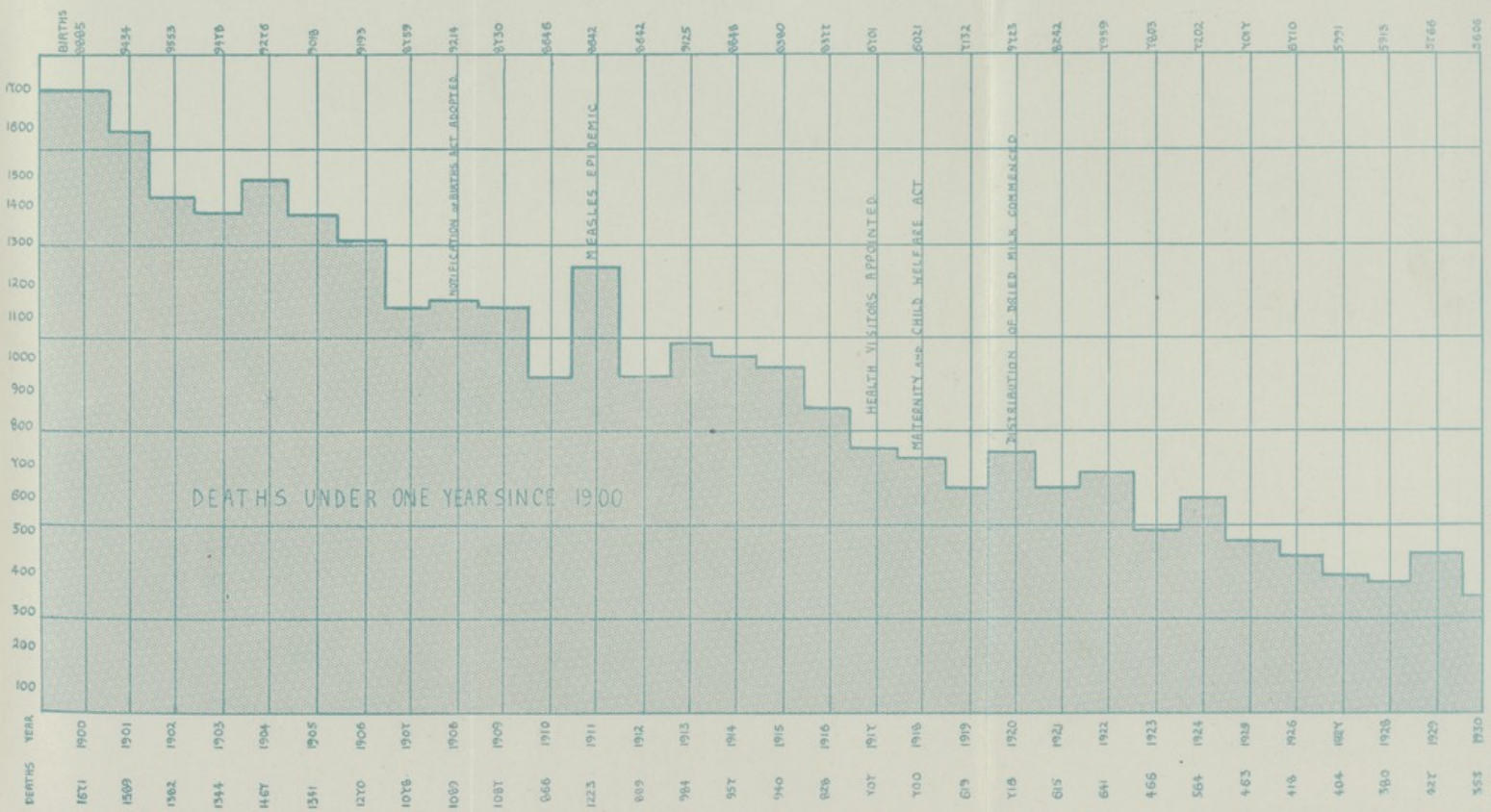
Table II. History of Cases of Maternal Deaths from Causes other than Sepsis.

No.	Para.	Ante-natal care.				No ante-natal care.	Delivered.		Died.		Full-time or Premature.	Abortion.	Certified Cause of Death.
		Hos-pital.	Clinic.	Pri-vate Doctor	Mid-wife.		Home.	Hos-pital.	Home.	Hos-pital.			
1	4	—	+	—	—	—	+	—	+	—	Full-time Transverse position, Long, difficult labour	—	Uterine hæ-morrhage and shock following obstetric version for transverse presentation
2	4	—	+	—	—	—	—	+	—	+	Full-time : Fibroid tumour of uterus	—	Shock following operation for Caesarian section
3	3	—	Re-fused to attend clinic	—	+	—	+	—	—	+	Full-time twins Normal delivery Post-par-tum ecl-ampsia	—	Toxaemia of pregnancy. Nephritis
4	7	—	—	—	—	+	+	—	—	+	—	14 weeks pregnancy Died 12 hours after attempt to induce abortion by means of a syringe	Felo-de-se Shock of attempted abortion on herself
5	8	—	+	—	—	—	—	+	—	+	Full-time 1 antepar-tum ecl-ampic fit. Refused to enter hos-pital at 34 weeks for treatment for toxic albumin-uria	—	Toxaemia of pregnancy Nephritis
6	2	—	—	—	—	Engaged midwife 2 days before death	+	—	+	—	Premature 32 weeks Placenta Praevia A.P.H. and P.P.H. Died soon after de-livery	—	Shock fol-lowing ante-par-tum hæ-morrhage
7	4	—	—	—	—	+	—	+	—	+	—	6-8 weeks	Intraperi-toneal hæ-morrhage Ruptured ectopic pregnancy
8	8	—	+	—	—	—	—	+	—	+	Premature	—	Secondary post-par-tum hæ-morrhage Placenta Praevia
9	1	—	—	—	—	+	—	+	—	+	Premature 36 weeks Macerated foetus	—	Hyperemesis gravidarum





# DEATHS OF INFANTS UNDER ONE YEAR SINCE 1900.







## Puerperal Fever and Puerperal Pyrexia.

### Number of cases notified in 1930 :

Puerperal Fever	...	...	...	20
Puerperal Pyrexia	...	...	...	66

A full enquiry is made by the Health Visitor in every case of puerperal fever or pyrexia occurring in a patient resident in the Borough. Of the 66 notified puerperal pyrexia cases, 10 occurred in patients confined in, but not ordinarily resident in West Ham.

### Treated for Puerperal Pyrexia at :

	Home.	Hospital.
Puerperal Fever	8 (1 death)	12 (5 deaths)
Puerperal Pyrexia	27 (1 death)	29 (2 deaths)

### RESULT.

Puerperal Fever	Recovery 14	Deaths 6
Puerperal Pyrexia	Recovery 53	Deaths 3

### Notified Cause of Death.

#### Puerperal Fever: 6.

- Puerperal Septicaemia, 3.
- Puerperal Septicaemia and Miscarriage, 1.
- Septicaemia following abortion, 2.

#### Puerperal Pyrexia: 3.

- Puerperal Septicaemia, 3.

### Attributed Cause of Fever and Pyrexia.

#### Puerperal Fever.

Pelvic Cellulitis	6
Incomplete abortion	4
Difficult labour with laceration of vagina and cervix	7
Torn perineum	2
Retained products	1
Total	20

#### Puerperal Pyrexia.

Pelvic Cellulitis	8
Incomplete abortion	2
Difficult labour with vaginal lacerations	9
Torn perineum	7
Retained products	8
Adherent placenta	4
Phlebitis	2
Acute Mastitis	3
Pleurisy and abortion	1
Anaemia and general debility	4
Temperature after vaccination on 14th day	1
Influenza	3
Pneumonia	2
Pulmonary Tuberculosis	1
Chronic nasal catarrh	1
Total	56

## INFANTILE MORTALITY.

The Infantile Mortality Rate for 1930 shews a considerable decrease as compared with the rate for 1929, viz. **62.9 per 1,000 births in 1930**; 74 per 1,000 births in 1929.

For 107 great towns of England and Wales this rate for 1930 is 64 per 1,000.

**Total number of deaths under one year of age in 1930** was 353, of which 204 occurred in male infants, and 149 in female infants. Of the total number 353, 340 were legitimate, and the remaining 13 illegitimate.

Rate per 1,000 births : Legitimate, 62.1 ; Illegitimate, 97.

### Deaths 1—5 Years.

Deaths in age period 1—2 years	...	...	...	98
Deaths in age period 2—5 years	...	...	...	87
Total 1—5 years				185

<b>Total deaths in 1930 under 5 years of age</b>	...	...	538
Total deaths in 1929 under 5 years of age	...	...	712

**Table showing Causes of Death under One Year.**

Cause	1930	1929	1928	1927	1926
Congenital Debility, Malformation and Prematurity	143	139	134	149	146
Pneumonia	71	113	88	106	74
Bronchitis	10	10	27	20	16
Other Respiratory Diseases	0	2	2	3	4
Diarrhoea, etc.	39	52	43	28	84
Measles	16	6	14	0	17
Scarlet Fever	1	1	0	1	2
Diphtheria	3	4	2	5	0
Whooping Cough	6	40	7	35	8
Influenza	1	1	0	2	4
Smallpox	0	1	0	0	0
Meningococcal Meningitis	5	4	0	0	0
Pulmonary Tuberculosis	3	1	0	0	0
Other forms of Tuberculosis	8	5	0	0	0
Deaths from Violence	2	4	2	2	6
Other Defined Diseases	45	44	61	53	57
Total	353	427	380	404	418



The chief reduction in the infantile mortality rate for 1930 may be attributed to the fact that there was less respiratory trouble among infants and young children in 1930 than in the preceding year, when there was a severe epidemic of whooping cough with its accompanying pulmonary complications. The number of deaths among infants and young children from measles in 1930 shews a considerable increase; again, in this illness, the development of respiratory trouble is the cause of death in the majority of cases. To combat these complications when they do arise, and to prevent the development of them, increased accommodation is now available in the Plaistow Fever Hospital for the reception and treatment of such diseases. This is particularly important in this Borough, where there is much overcrowding in some areas, and where home conditions are most unfavourable for the nursing and care of sick children.

The number of deaths among infants from Diarrhoea and other gastro-intestinal disorders compares very favourably with that number 5 years ago, viz. 39 in 1930 as compared with 81 in 1925. Certainly, climatic conditions in 1930 were not such as to favour the occurrence of acute epidemic enteritis—there was no prolonged spell of hot, dry, dusty weather. But climate alone is not responsible for this improved rate over the past 4 years; increased infant welfare clinic work and home visiting by Health Visitors must produce in the mothers a better knowledge of how to handle and manage their infants as regards general routine care, healthier home surroundings and more care in feeding, particularly where the infant is artificially fed. The provision of a clean, wholesome dried milk, easily obtainable by all mothers in the Borough, has also undoubtedly played a large share in keeping the death rate from Diarrhoea at a low level.

Unfortunately, emphasis must be laid on the number of deaths occurring in infants under 1 year of age from Prematurity and congenital debility. This number has maintained a steady rate over the last 5 years, and it is to this number that the infantile mortality rate is chiefly due.

Of the 353 deaths under 1 year of age, 118 occurred within the first 4 weeks of life—33%.

**Table shewing Cause of Death under 4 Weeks of age  
and Age at Death.**

Certified Cause.	1 week	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total.
Prematurity ... ..	42	8	5	—	55
Marasmus and prematurity ...	4	—	1	1	6
Asthenia and congenital debility ...	5	1	—	1	7
Congenital Syphilis ... ..	—	1	—	—	1
Maldevelopment { Spinabifida					
Anencephaly					
Hydrocephalus	4	3	—	1	8
Congenital atresia of colon ...	2	—	—	—	2
Congenital heart disease ...	3	—	—	—	3
Cerebral haemorrhage (difficult delivery) ...	3	—	—	—	3
Fractured skull (difficulty delivery) ...	2	—	—	—	2
Asphyxia neonatorum :					
Atelectasis ...	13	—	1	—	14
Icterus neonatorum ... ..	2	1	—	—	3
Melaena neonatorum ... ..	—	—	—	1	1
Gastro-enteritis ... ..	—	—	—	1	1
Convulsions ... ..	2	1	1	—	4
Bronchitis ... ..	1	—	—	1	2
Broncho pneumonia ... ..	—	4	1	—	5
Accidental suffocation ...	1	—	—	—	1
					<hr/> 118 <hr/>

### Deaths 1—5 Years.

Of the 185 deaths in the age period 1—5 years, no less than 60 were due to measles, and 41 to pneumonia, again emphasising the importance in these diseases of skilled nursing and attention in surroundings such as can only be found for many children in a suitable hospital ward.



## Mental Deficiency Acts, 1913—1927.

On the 31st December, 1930, there were 402 Mental Defectives on the register. Males, 227; Females, 175.

Number actually in Institutions—

Males, 87; Females, 66. Total, 153.

Number under Statutory Supervision—

Males, 140; Females, 103. Total, 243.

Number under guardianship under order—

Males, —; Females, 2. Total, 2.

Number on licence from Institutions—

Males, —; Females, 4. Total, 4.

Fifty-two new cases were dealt with during the year as follows:—

Recommended Institutional Care—

Males, 9; Females, 5. Total, 14.

Recommended Supervision at Home—

Males, 12; Females, 16. Total, 28.

No Action Necessary at present—

Males, 7; Females, 3. Total, 10.

Number of cases notified by the Local Education Authority under Sec. 2 (2).

Males, 20; Females, 16. Total, 36.

Number of cases admitted to Institutions during the year—

Males, 16; Females, 8. Total, 24.

During the year 33 Continuation Orders were received—

For 5 years. Males, 11; Females, 16. Total, 27.

For 1 year. Males, 2; Females, 4. Total, 6.

Fifteen cases were removed from the register for reasons as follows:—

Number Removed to other Areas—

Males, 4; Females, 2. Total, 6.

Number Died—

Males, 5; Females, 2. Total, 7.

Number transferred to Mental Hospitals under the Lunacy Acts—

Males, 1; Females, 1. Total, 2.

Two cases (both males) were discharged from Detention Orders to the care of their parents.

### Ascertainment.

During the year, fifty-two new cases were dealt with. Thirty-six were notified by the Local Education Authority, and the remainder came to my notice through various channels, namely, Health Visitors, Sanitary Inspectors, Relieving Officers and Voluntary Organisations.

Ten of the cases were deemed to be of too high a grade mentally to be certified as mentally defective. Although these ten patients were not actually certified, they are not entirely forgotten.



Periodical friendly visits are paid to them by the Supervising Nurse, and if at any future time any of them show signs of deterioration they will be re-examined and certified if necessary.

### **Supervision.**

On the 31st December, 1930, there were 402 Mental Defectives on the register, of which number 243 (140 Males and 103 Females) were under Statutory Supervision in their own homes. Supervision is carried out by a specially trained Nurse, who has had very considerable experience in this kind of work. All of these cases are visited at intervals of from one to three months, according to the circumstances of the individual case. Unfortunately a number of these patients are only under supervision because no institutional accommodation is available for them, and it is in such cases that supervision is not very satisfactory. The parents of such defectives are usually very anxious that they should be admitted into an institution, and as no assistance is afforded them it is not unnatural that the nurse's visits are not welcome, and that information regarding the defective is sometimes withheld. As regards the remainder, supervision is a simple and inexpensive method of dealing with well-behaved defectives living in good homes.

### **Occupation Centres.**

A mentally defective person is, by reason of his instability, a menace and a burden to society, especially when he is untrained and uncontrolled, and while it would appear that institutional care is a very efficient remedy, it is a very expensive one. Institutions must be provided, of course, but many defectives can be given suitable training and occupation while remaining under supervision at home. It is agreed that even defectives living in really good homes are liable to deteriorate without suitable occupation and training, and if these can be provided for that class of defective the eventual need for institutional accommodation for them would be obviated.

In addition to providing the necessary training for defectives under supervision, the establishment of these centres would have the effect of partly relieving the parents or guardians of their very onerous and trying duties in so far that the defectives would be away from home for part of the day. Moreover, it is generally admitted that mental defectives are more contented and more easily controlled when engaged in some suitable occupation.

### **Colony Accommodation.**

With the coming into operation of the Local Government Act, 1929, the Forest Gate Hospital (one of the late West Ham Guardians' institutions) comes under the control of the Council. This hospital has been approved by the Board of Control for the reception of seventy-five certified mental defectives, as follows: Twenty adult males; thirty adult females; ten males under 16 years of age; and fifteen females under 16 years of age.



Much progress has been made during the year regarding the provision of a colony for mental defectives at South Ockenden. Approval has been obtained to proceed immediately to erect sufficient accommodation for 120 cases in order to provide room for the West Ham and East Ham defectives who are at present detained in the London County Council's institutions, and for the more urgent cases awaiting institutional care.

These patients will be accommodated in two blocks, which will be part of the complete colony. A third block, ultimately intended for patients, is to be erected and adapted for use temporarily as an administrative block.

I need hardly mention the exceptional urgency for speedy completion of the whole colony. A tremendous amount of time is spent in endeavouring to secure suitable vacancies in institutions for defectives, and it is becoming almost impossible to place fresh cases. Practically all institutions are not only full, but have long waiting lists, and all except a very few refuse even to place names on their lists of waiting cases.

### **Guardianship.**

There are two cases at present in the care of guardians under Order, both females; one in the care of her mother, and the other her sister. The girl under the guardianship of her sister is becoming rather difficult to manage at home, and endeavours are being made to arrange her admission into a suitable institution. The other girl is well behaved, and is being properly cared for.

In addition to these two cases, there are two females on licence from institutions. Both of these patients are progressing very well, and are much happier than before being granted leave. These girls were placed with the assistance of the Central Association for Mental Welfare. This Association has had a scheme for some years whereby defectives are placed out under suitable persons, and cases so placed are kept under supervision by a special Guardianship Officer.

It will be readily understood that only the best type of defectives can be selected for this scheme, and that the greatest care is necessary in the selection of suitable guardians.

### **Prevention of Mental Deficiency.**

Mental Deficiency is a condition, the prevention of which is a very involved subject. One of the most discussed methods at present is Sterilization, by means of which it is hoped to prevent mental defectives from procreating. There can be no two opinions as to the desirability of allowing persons who have been certified as being unable to manage their own affairs becoming parents. To give such persons the control of helpless children would be unwise to a degree.

Sterilization would, of course, prevent defectives from producing children, but it is very doubtful how far it would reduce the incidence of mental defectiveness. Investigation shows that only a small proportion of defectives come from defective parents.



## APPENDIX I.

### **FURTHER MEMORANDUM BY THE MEDICAL OFFICER OF HEALTH ON LOCAL GOVERNMENT ACT 1929, IN REGARD TO THE PUBLIC HEALTH SERVICES.**

In November, 1929, I issued a preliminary memorandum concerning the Local Government Act as it affects the Public Health Services. Since that time a lot of work has been done, and as a result of many meetings and conferences, an agreement has been arrived at between the County of Essex, County Borough of East Ham, and the County Borough of West Ham in regard to the ownership of the institutions belonging to the West Ham Guardians, whereby the West Ham Council are to take over and have complete control of all the institutions, with the exception of the Aldersbrook and Scattered Homes, which are being taken over by the County Borough of East Ham. By the terms of agreement, which extends over a period of twenty-five years, the County of Essex and the County Borough of East Ham are to send their percentage of patients on a user basis to the various institutions taken over by West Ham; a similar proviso for West Ham and Essex applies to the Aldersbrook Homes.

It will be well at this juncture to set out here a complete list of the various institutions for dealing with the sick and infirm of West Ham which, on April 1st next, will be attached to the Public Health Department of this Borough, many of them being owned by the West Ham Council, and a number of others subsidised by them.

The following are institutions owned by the West Ham Council :—

- Whipps Cross Hospital.
- Forest House.
- Forest House Cottages.
- Central Home.
- Forest Gate Sick Home.
- Margate Convalescent Home.
- Dagenham Sanatorium for Adults.
- Langdon Hills Sanatorium for Children.
- Plaistow Fever Hospital.
- Harold Wood Convalescent Home.
- Fyfield Residential Open-air School.

The following are institutions subsidised by the Council, and into which cases are sent and returns received by the M.O.H., though not under his actual supervision :—

- Queen Mary's Hospital, Stratford.
- St. Mary's Hospital, Plaistow.
- Plaistow Maternity Hospital.
- Invalid Crippled Children's Hospital, Balaam Street, E.13.
- Sunshine Home, Shoeburyness.



Convalescent Home for Mothers and Babies, Birchington.  
 Alexandra Hospital, ) for surgical  
 Royal Sea Bathing Hospital, Margate, ) Tuberculosis.  
 Stoke Park Colony.  
 Brentry Colony and other institutions under the M.D. Acts.  
 Royal Albert Dock Hospital and various hospitals under the  
 V.D. Scheme.

In addition to the above-named residential institutions, there are in the Borough some twenty clinics, including clinics for tuberculosis, for artificial sunlight, for massage—as well as special schools for crippled children, etc. Formidable though this list appears, it is incomplete, inasmuch as it does not include many institutions to which patients are sent intermittently through the Public Health Department, e.g., London Hospital, Brookfield Orthopaedic Hospital, St. Margaret's Hospital for the Blind, Great Ormond Street Hospital, and various convalescent homes.

Schemes already passed by the Council, but not yet functioning, include:—

(1) A colony to be built at Ockendon, Essex, to accommodate seven hundred and fifty mental defectives of various grades.

(2) The extension of hospital accommodation at Harold Wood, Essex, for infectious disease.

(3) The extension of Fyfield Residential Open-air School to accommodate sixty delicate girls, in addition to the eighty boys already resident there. (This building is now complete.)

(4) The erection of two nursery schools, one at Abbey Road and one at Rosetta Road, each school to accommodate 120 children.

(5) The erection of three additional maternity and child welfare clinics, including dental clinics.

In dealing with such a large and varied number of institutions, some well-ordered method obviously is essential. At present cases are admitted to institutions and returns made to me through the various sub-departments, e.g., Tuberculosis, Infectious Diseases, School Medical and Maternity and Child Welfare. No arrangement for admissions or periodical returns have hitherto been in force between the institutions of the Poor Law Guardians and the Public Health Department, with the inevitable result that a not inconsiderable amount of overlapping has occurred, inasmuch as a large percentage of the cases of illness in the Borough are treated in these Poor Law institutions.

Under the new Act I am confident that this overlapping will disappear, and also that more valuable use will be able to be made of some of the existing facilities. The agreement with the County of Essex and with the County Borough of East Ham specify that cases which are sent from those Authorities for admission to West Ham institutions need not necessarily be treated in any one particular institution.



Further careful thought and much time will need to be given to the problem before the question can be finally settled as to the best manner in which the beds at the various institutions should be allocated. (An arrangement to prevent cases being driven from one institution to another unsuccessfully seeking admission, needs prompt settlement.) The ultimate object to be aimed at would appear to be a complete scheme worked in an economical and efficient manner, and which should entail:—

(a) That every man, woman and child in the Borough may obtain prompt and efficient treatment, institutional or otherwise, for any sickness or disability, and that necessary treatment should not remain unavailable to any person on account of economical, social or environmental reasons.

(b) That all proved methods for the prevention of disease and ill-health (including general hygiene, protection of food supplies, etc.), shall be practised.

(c) That measures be taken to ensure that any relevant material accruing from such a scheme be made available to a recognised Authority in research work.

Important points which might well be provisionally considered in conjunction with Sections 5† and 13† of the Act are:—

### **Maternity and Child Welfare.**

(1) The advantage or otherwise of building a maternity hospital rather than having beds, as now, scattered in several separate and different institutions.

(2) The need of a convalescent home for babies and children.

(3) The necessity for a trained midwife to be in attendance on every case of confinement.

### **Tuberculosis.**

(1) The policy as to the advisability of all suitable adult cases of Tuberculosis being treated in one institution (at Dagenham or preferably Langdon), thus relieving some eighty beds at Whipps Cross Hospital for acute hospital cases.

(2) The practicability of boarding-out very young children of Tuberculous patients during their time of most liable susceptibility to infection from the parent (this plan has been successfully carried out in some parts of France).

(3) The difficulty of those tuberculous parents who are unable to enter a Sanatorium for treatment owing to not being in a position to arrange proper provision for the welfare of their children during their absence.

(4) The value of day colonies or some definite after-care scheme for post-sanatorium cases.

(5) The establishment of a hospital block or wards for cases of surgical Tuberculosis.



## **Cancer.**

The question of special provision for the accommodation and treatment of cancer cases, and for the early diagnosis of this disease.

## **General.**

(1) Special facilities for treating sleepy sickness and other diseases of the nervous system, including border-line mental cases.

(2) The provision of further institutional accommodation for sick children to prevent the necessity of their being treated, as now, in wards with adults.

(3) Special accommodation, training and other facilities for promoting the welfare of epileptics, of the deaf and of the blind.

(4) Additional residential accommodation for nurses.

(5) The provision of further facilities for home nursing.

(6) The importance of one or more fully equipped out-patient departments to work in co-ordination with the general practitioners, and with all the health services of the Borough, voluntary or otherwise.

I have not overlooked the financial side of these suggestions, but this is an aspect of the various schemes which can be placed before you in detail by your financial officer, if and when the principle is adopted, though I have no doubt whatever that the ultimate result of the schemes outlined would be one of a valuable asset to the Borough, not only from a standpoint of health but also financially, having regard to the enormous amount of destitution arising from sickness and invalidity.

The dovetailing of the work of the transferred institutions and the work of the District Medical Officers into that of the work of the various clinics—of the general hygiene of the Borough and other municipal and voluntary activities—the carrying out of the provisions of the Children Act and of the Vaccination Act, are matters of an administrative nature receiving concentrated thought and entailing much detailed work, and which, though worthy of mention, need not be enlarged upon in a memorandum only meant to outline matters which will in due course need the careful deliberation of the Council.

Obviously, however, owing to the extent of the schemes suggested, a very considerable time must elapse before the fruition of the proposals, if adopted, can be attained in its entirety.

F. GARLAND COLLINS.

March, 1930.



**† Section 5 of Local Government Act, 1929.**

5.—(1) “A council in preparing an administrative scheme shall have regard to the desirability of securing that, as soon as circumstances permit, all assistance which can lawfully be provided otherwise than by way of poor relief shall be so provided, and accordingly any such scheme may declare that any assistance which could, after the appointed day, be provided either by way of poor relief or by virtue of any of the following Acts as amended by any subsequent enactment including this Act (that is to say)—

- (a) The Public Health Act, 1875 :
- (b) The Local Government Act, 1888 :
- (c) The Mental Deficiency Act, 1913 :
- (d) The Maternity and Child Welfare Act, 1918 :
- (e) The Blind Persons Act, 1920 :
- (f) The Public Health (Tuberculosis) Act, 1921 :
- (g) The Education Act, 1921 :

shall be provided exclusively by virtue of the appropriate Act, and not by way of poor relief, but nothing in this sub-section, or in any scheme, shall diminish or otherwise affect the duty of a Council under section thirty-four of the Poor Law Act, 1927, to provide relief for the poor.

For the purposes of this sub-section, the expression “assistance” includes maintenance and treatment at hospitals and other places, the education of children, and any other services which could, after the appointed day, be provided either by way of poor relief or by virtue of any of the above-mentioned Acts.”

**† Section 13 of Local Government Act, 1929.**

“The council of every county and county borough shall, when making provision for hospital accommodation in discharge of the functions transferred to them under this Part of this Act, consult such committee or other body as they consider to represent both the governing bodies and the medical and surgical staffs of the voluntary hospitals providing services in or for the benefit of the county or county borough as to the accommodation to be provided and as to the purposes for which it is to be used.”



## APPENDIX II.

### REPORT BY THE MEDICAL OFFICER OF HEALTH UPON INSTITUTIONAL AND OTHER ACCOMMODATION IN REGARD TO THE LOCAL GOVERNMENT ACT, 1929.

Under the Local Government Act, 1929, Local Authorities are required to make a survey of all the available accommodation in their areas, and, if necessary, to supplement it so as to provide for all the medical needs of its inhabitants. A further object of the Act is to arrange as far as practicable that institutional medical services shall be provided otherwise than under the Poor Law. It is manifestly impossible to put forward any scheme which would meet every contingency likely to arise within the next twenty years; moreover, each Authority has its own peculiar problems to face, and what is possible in one area may be quite impracticable in another area.

In two previous Memoranda I have set out at some length a broad outline upon which a careful and detailed consideration of the future of the Health Services of the Borough should be based.

I now submit for your information a further report showing:

- (1) The hospital accommodation at present available, both voluntary and municipal, and how it is variously allocated to different diseases or type of disability.
- (2) The situation, type and function of the various clinics in the Borough.
- (3) Work of the District Medical Officers.
- (4) The extent of the specialist medical services.
- (5) (a) Number of insured population under the National Insurance Act.  
(b) Number of Panel doctors.  
(c) Number on Relief.  
(d) Total population.  
(e) Population under five years of age.  
(f) School population.  
(g) Number of West Ham residents dying in institutions not within or belonging to the Borough.  
(h) Hospitals in East Ham, Leyton, Walthamstow.
- (6) Summary.
- (7) Small-pox.

A careful study of the information set out under the various headings of this report will reveal the fact that the same type of disability is being treated in more than one separate hospital. This seems inevitable at present where hospitals are scattered, are both of the voluntary and of the Municipal type, and when all institutions are unable to meet the demands upon them for beds.

All the Voluntary Hospitals have long waiting lists, and the institutions taken over from the Guardians are grossly overcrowded.



There is usually a waiting list for the Dagenham Sanatorium and for the Children's Sanatorium at Langdon Hills.

At present there are some vacant beds at the Fever Hospital, but obviously these can only be used for infectious cases, and it is exceptional that they are not fully occupied.

There are some 140 chronic sick cases boarded out at institutions in London by the Public Assistance Committee, and the fact that these cases have had to be boarded out over a period of several years shows that the present lack of accommodation is not of recent origin.

In view of the above statements, any re-arrangement of beds or transfer of cases could not to an appreciable degree lessen the need for the provision of further institutional accommodation.

Many of the cases of Pulmonary Tuberculosis being treated at Whipps Cross Hospital should be dealt with at Dagenham Sanatorium, but insufficient accommodation at the latter institution renders this impracticable.

Children are being treated in the same wards as adults, but the lack of sufficient accommodation for children makes this unavoidable.

It must be borne in mind that each of the Voluntary Hospitals in this area accept cases not only from West Ham but from all the neighbouring districts, and that the number of beds available for West Ham cases does not exceed an average of 60 per cent.

In regard to the institutions transferred under the Local Government Act only 50 per cent. of the accommodation is available for West Ham cases. The cases from Essex occupy 34 per cent., and from East Ham 16 per cent.

The agreements between the West Ham County Borough Council, the Essex County Council and the East Ham County Borough Council provide for the admission of cases to the transferred institutions from the three Authorities concerned on the above-named approximate percentage, and the agreements extend over a period of twenty-five years.

The amount of extra institutional accommodation necessary to be provided by this Authority is therefore to a large extent independent of the amount of increased accommodation which may be provided by one or more of the participating Authorities; it is, however, affected by any scheme for extension of the Voluntary Hospitals.

A further important feature is the extent to which the large Voluntary Hospitals of London are used by West Ham patients. It will be seen on page 187 that some 10 per cent. of West Ham deaths occur in such institutions; it is clear, therefore, that a very considerable number of sick people make use of these hospitals; that this is so I can confirm from my personal communications with the Authorities of the various London Hospitals on cases from West Ham.



Any agreement which might conceivably be come to between the London County Council and the Voluntary Hospitals of London which would limit the beds available for patients outside the London area would tend materially to increase the number of cases seeking treatment in our own institutions.

In any case it is likely that many persons who formerly would have attended at a London Hospital will now seek treatment under their own Local Authority.

There are other factors—more or less of a minor degree—affecting this difficult and intricate problem. Whatever is done or is not done by other Authorities, it is obvious that extra accommodation will need to be provided as soon as practicable by this Authority.

In May of last year I suggested that to treat adequately all cases of sickness which may arise and for which this Council are responsible, one thousand additional beds would be required. Since that time wards containing two hundred beds have been built at the Forest Gate Hospital.

After full and mature consideration of all the facts, I am of opinion that to meet the situation a further nine hundred beds will need to be provided. Obviously it is not practicable to state exactly how many beds are to be used for any specific disability, particularly having regard to the variable incidence and virulence of certain complaints.

The modern hospital accommodation needed for one class of ordinary disability differs very little from that of another, and it would at any time, if necessary, be easy to re-organise the staff for the treatment of any particular disease or combination of diseases.

I set out, however, a rough estimate of the amount of accommodation required for various disabilities:—

(1) Chronic sick	...	...	...	...	...	500
(2) Beds for border-line Mental and nervous diseases	...	...	...	...	...	50
(3) Children's block	...	...	...	...	...	200*
(4) Babies' Convalescent Home	...	...	...	...	...	50
(5) Beds for Pulmonary T.B.	...	...	...	...	...	100
						<hr/> 900

\* including 40 for surgical Tuberculosis.

If these suggestions were accepted it would relieve the congestion at Whipps Cross Hospital and make available there some hundred beds for the reception of acute cases.

The transfer of the suitable mentally defective cases from Forest Gate Hospital to the Colony for mental defectives at Ockendon, when built, would eliminate the present overcrowded state of that Hospital.

The majority of the wards at both the Central Home and the Forest Gate Hospital are out-of-date and very unsuitable for the modern treatment of the sick.

At present the Council have some forty beds for maternity



cases distributed between the Forest Gate Hospital, Queen Mary's Hospital and the Maternity Hospital, Balaam Street. It is a matter for consideration whether the present arrangements should be continued or whether a new municipal maternity home should be built.

The policy of the closing of the Dagenham Sanatorium and the building of a new sanatorium for adults suffering from Pulmonary Tuberculosis on the Council's site at Langdon Hills is one already under the consideration of this Authority.

The accommodation for nurses and for maids at several of the institutions is insufficient.

The Mental Deficiency Committee are at present considering the question of Day Occupation and Training Centres for mental defectives under Statutory Supervision.

It is probable that the advisability of establishing a Rheumatic Clinic will be considered soon.

The amount of extra accommodation stated above to be necessary is estimated on the assumption that about sixty per cent. of the beds in the local voluntary hospitals will continue to be occupied by West Ham patients and that full use will be made of the present accommodation.

An essential feature of any co-ordination of grouping of institutional accommodation is a comprehensive out-patient department (with specialised clinics) from where cases can be drafted to various appropriate institutions and to which cases can be referred, if necessary, on being discharged from institutions. This establishment might be directly attached to one of the large hospitals. The Medical staff might be drawn from the various institutions.

It is a matter for consideration and collaboration as to whether the existing institutions under the Public Assistance Committee should be designated as municipal hospitals and administered by one Committee and also as to whether the necessary increased accommodation (a) should be provided (for the most part) in one or in various institutions, (b) should be built on separate sites, or (c) should form an extension of one or more existing institutions either voluntary or municipal.

In order that the fullest possible use may be made of all hospital accommodation provided, very careful thought will need to be given to the problem of the amount to be charged, and the mode of recovery from the patients of the expenses incurred in their maintenance and treatment, as laid down under Section 16 of the Local Government Act, 1929.

In the foregoing report I have set out all the essential points (from a medical aspect) that it is necessary for this Authority to consider in regard to the provision of institutional accommodation. I am unable, at present, to envisage any development likely to occur which would necessitate further accommodation of any appreciable magnitude.

The detailed administration of any accommodation provided is a matter for further reports after the broad principles have been settled.

F. GARLAND COLLINS.

26th January, 1931.



- I. The hospital accommodation at present available, both voluntary and municipal, and how it is variously allocated to different diseases or type of disability.
- II. The situation, type and function of the various clinics in the Borough.
- III. Work of the District Medical Officers.
- IV. The extent of the specialist medical services.
- V. (a) Number of insured population under the National Insurance Act.  
 (b) Number of Panel doctors.  
 (c) Number on Relief.  
 (d) Total population.  
 (e) Population under five years of age.  
 (f) School population.  
 (g) Number of West Ham residents dying in institutions not within or belonging to the Borough.  
 (h) Hospitals in East Ham, Leyton, Walthamstow.
- VI. Summary.
- VII. Small-pox.

# 1.—THE HOSPITAL ACCOMMODATION AT PRESENT AVAILABLE, VOLUNTARY, MUNICIPAL, AND PUBLIC ASSISTANCE, AND HOW IT IS VARIOUSLY ALLOCATED TO DIFFERENT DISEASES OR TYPE OF DISABILITY.

## Municipal :

- Plaistow Fever Hospital.
- West Ham Children's Hospital, Harold Wood.
- Dagenham Sanatorium (Adults suffering from Pulmonary Tuberculosis).
- Langdon Hills Sanatorium (Children suffering from Pulmonary Tuberculosis).

## Public Assistance :

- Whipps Cross Hospital.
- Central Home.
- Forest Gate Hospital.
- Forest House.
- Margate Convalescent Home.

## Voluntary :

- Plaistow Maternity Hospital.
- Queen Mary's Hospital.
- St. Mary's Hospital.
- Children's Hospital, Balaam Street.
- Albert Dock Hospital.

## PLAISTOW FEVER HOSPITAL.

### Description.

Plaistow Hospital is a brick built modern hospital situated in Samson Street, Plaistow, E.13. Immediately opposite it, in Samson Street, is a plot of land belonging to the West Ham Council and comprising  $4\frac{1}{2}$  acres. This plot is very suitable for extending the hospital or for a possible out-patient department.

The disinfection of articles collected throughout the Borough is carried out on the hospital premises; there are two large disinfectors and one small one used for this purpose—special disinfection vans being used to collect and return the material.

### *No. of Beds.*

210.

### *No. of Wards.*

13 for patients, 1 for sick staff.

### *No. of Beds for Medical Cases.*

210.

### *No. of Beds for Surgical Cases.*

Nil.

### *No. of Staff.*

155.

### *Medical Staff.*

1 Med. Supt., 2 Resident M.O.'s.

### *Nursing Staff.*

1 Matron, 1 Asst. Matron, 1 Sister Tutor, 1 Night Supt., 8 day Sisters, 5 Staff Nurses, 57 Probationers.

### *Domestic Staff.*

45 females, 30 males (including Engineer, Caretaker, Porters).

### *Administrative Staff.*

Steward, 2 Clerks.

### *Diseases Treated.*

Scarlet Fever, Diphtheria, Enteric Fever, Puerperal Fever, Puerperal Pyrexia, Measles, Whooping Cough, Pneumonia.

## THE CHILDREN'S HOSPITAL, HAROLD WOOD.

### Description.

This institution has been used since 1907 as a Convalescent Home for cases recovering from Scarlet Fever or from Diphtheria according to the type of disease most prevalent. It is situated at Harold Wood, Essex, about nine miles from West Ham, and is comprised within a curtilage of some sixty-eight acres. Recently four new blocks have been added and some of the old wards converted into accommodation for the nursing staff. Previously accommodating sixty children, it is now able to admit one hundred and sixteen patients.



*No. of Beds.*

116.

*No. of Wards.*

12 (including 8 large and 4 single wards).

*No. of Beds for Medical Cases.*

116.

*No. of Beds for Surgical Cases.*

Nil.

*No. of Staff.*

56.

*Medical Staff.*

Medical Officer visits from Plaistow Fever Hospital.

*Nursing Staff.*

1 Matron, 3 Sisters, 15 Nurses.

*Domestic Staff.*

17 females, 9 males (including 1 Caretaker, 5 Porters, 4 Gardeners).

*Administrative Staff.*

Steward.

*Diseases Treated.*

Scarlet Fever and various infectious diseases depending upon the pressure of beds at Plaistow Hospital.

N.B.—4 Blocks, each with 2 wards of 12 and 14 beds respectively = 104. Each block has 2 extra beds for special cases = 112. One Isolation block with 4 single wards = 116.

## DAGENHAM SANATORIUM FOR ADULTS.

*Description.*

This institution is situated about nine miles from the Borough and occupies a site of  $6\frac{1}{2}$  acres. It was built in 1899 for the admission of Smallpox cases, but has been used for the treatment of adult cases of Pulmonary Tuberculosis since 1912. Only West Ham cases are dealt with.

*No. of Beds.*

128.

*No. of Wards.*

Isolation Block for 8 persons, 1 shelter with 12 beds.

*No. of Beds for Medical Cases.*

128.

*No. of Beds for Surgical Cases.*

—.

*No. of Staff.*

57.

*Medical Staff.*

Medical Superintendent, Asst. R.M.O.

*Nursing Staff.*

Matron, Asst. Matron and Sister Tutor, 3 Sisters, 1 Nurse-Housekeeper, 6 Asst. Nurses, 14 Probationers.

*Domestic Staff.*

28 females (including 6 Laundry Maids, 1 Sewing Maid), 9 males (including 1 Caretaker, 1 Handyman, 1 Stoker, 1 Gardener, 4 Porters, 1 Night-Watchman).

*Administrative Staff.*

Asst. Steward.

*Diseases Treated.*

Pulmonary Tuberculosis in Adults.

## LANGDON HILLS SANATORIUM FOR CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.

*Description.*

This Institution is situated in the County of Essex, about 20 miles distant from West Ham. The site comprises 100 acres. The Sanatorium was opened for the reception of children in 1927. Only West Ham residents are dealt with.

*No. of Beds.*

40.

*No. of Wards.*

2 large 6—2 bedded cubicles, 2 Isolation blocks (beds not counted).

*No. of Beds for Medical Cases.*

40 (20 boys and 20 girls).

*No. of Beds for Surgical Cases.*

—

*No. of Staff.*

22.

*Medical Staff.*

Medical Superintendent visits from Dagenham Sanatorium.

*Nursing Staff.*

Matron, 2 Sisters, 2 Asst. Nurses, 5 Probationers.

*Domestic Staff.*

8 females, 3 males (including 1 Head Gardener and Caretaker, 1 Motor Driver and Engine Attendant, 1 Handyman).

*Administrative Staff.*

Assistant Steward, 1 Teacher.

*Diseases Treated.*

Pulmonary Tuberculosis in Children.

## WHIPPS CROSS HOSPITAL.

*Description.*

This institution was built in 1903, and is comprised within a curtilage of 44½ acres. It is in all respects a modern general hospital with all the most up-to-date equipment. Though built to accommodate 741 patients it is rarely, if ever, that the number of patients falls below eight hundred, and often reaches nine hundred.



*No. of Beds.*

741 (certified), 800 (approx. occupied).

*No. of Wards.*

24.

*No. of Beds for Medical Cases.*

Variously allocated according to the demand made upon the Institution by orders for admission.

*No. of Beds for Surgical Cases.*

Variously allocated according to the demand made upon the Institution by orders for admission.

*No. of Staff.*

493.

*Medical Staff.*

Medical Superintendent, 6 Resident M.O.'s, 8 Consultants (including Gynæcologist, Orthopædic Surgeon, Urologist, Ear, Eyes and Throat Surgeon, Neurologist, Ophthalmic Surgeon, Anæsthetist, Light Specialist).

*Nursing Staff.*

Matron, Asst. Matron, 11 Sisters, 52 Nurses (wards), 4 Nurses (other duties), 111 Probationers, 11 Male Nurses.

*Domestic Staff.*

50 females (resident), 85 males (including Steward-non-resident), 24 Orderlies, 25 Ward Maids, 18 Half-day Ward Maids).

*Administrative Staff.*

Stewards, Engineers, Clerks, Storekeepers, Mechanics, etc., 85.

*Diseases Treated.*

Acute surgical and fractures, Chronic medical and surgical cases, Gynæcological, Children's Diseases, Tuberculosis, mixed cases.

## CENTRAL HOME.

*Description.*

The Central Home is situated at Union Road, Leyton, and is comprised within an area of some eleven acres, and was built in 1840. It consists of a series of blocks of buildings, some separate and some adjoining each other, which are used as administrative buildings and for housing chronic sick, mental and able-bodied persons, and most of the wards are unsuitable for the purpose of treating chronic sick cases.

*No. of Beds.*

1,807 (cert.), including 1,000 (approx.) able-bodied.

*No. of Wards.*

14 Blocks.

*No. of Beds for Medical Cases.*

*No. of Beds for Surgical Cases.*

1,000 (approx.).

*No. of Staff.*

442.

*Medical Staff.*

Medical Superintendent, 2 R.M.O.'s, 2 Dispensers.

*Nursing Staff.*

Matron, 1 Asst. Matron, 1 Supt. Nurse, 1 Senior Ward Sister, 12 Ward Sisters, 1 Charge Nurse, 128 Assistant Nurses.

{ *Domestic Staff.*

{ *Administrative Staff.*

Domestic and Administrative Staff comprising Master, Clerks, Storekeepers, Laundry Hands, Mechanics, including staff dealing with able-bodied inmates—293.

*Diseases Treated.*

Chronic sick (medical and surgical), including aged and infirm and Mental patients (epileptics), mostly adults.

## FOREST HOUSE.

*Description.*

Forest House is situated on the same grounds as, though railed off from, Whipps Cross Hospital. It comprises a series of out-buildings and a large central building which was originally an old mansion.

*No. of Beds.*

396.

*No. of Wards.*

13

{ *No. of Beds for Medical Cases.*

{ *No. of Beds for Surgical Cases.*

Old men only and mental cases, 26 Epileptics, 13 cases under Sec. 24 of Lunacy Act.

*No. of Staff.*

23.

*Medical Staff.*

Visited by Medical Superintendent from Central Home.

*Nursing Staff.*

8 Male, 4 Female Attendants.

*Domestic Staff.*

9 Cooks, Cleaners, etc.

*Administrative Staff.*

Master and Assistant Master.

*Diseases Treated.*

Mental cases and old men.

## FOREST GATE HOSPITAL.

*Description.*

This institution is comprised within a curtilage of 11 acres. The building is comparatively old, and for the most part quite unsuitable for the adequate treatment of sick people. Additional wards and administrative blocks with accommodation for two hundred patients are now in course of erection on this site and will be open for the reception of patients within a few weeks.



*No. of Beds.*

500 (certified), 570 (approx.).

*No. of Wards.*

29.

{ *No. of Beds for Medical Cases.*

{ *No. of Beds for Surgical Cases.*

Maternity—64. M.D.'s and Epileptics—436. Chronic sick—70.

*No. of Staff.*

264.

*Medical Staff.*

Medical Superintendent, 2 Resident Medical Officers, 1 Dispenser.

*Nursing Staff.*

Matron, Asst. Matron, 1 Home Sister, 1 Night Sister, 107 Nurses, 7 Midwives.

*Domestic Staff.*

Maids, Cleaners, Laundry, Needlewomen, and others—73.

*Administrative Staff.*

Stewards, Assistant Steward, Clerks, Storekeeper, Assistant Storekeeper, Instructresses in Arts and Crafts, etc.—55.

*Diseases Treated.*

Chronic sick (medical and surgical), Mental and Epileptic, Maternity cases.

## MARGATE CONVALESCENT HOME.

*Description.*

This institution is situated in Northdown Road, Margate, and was originally two private houses. The wards are scattered and out of date. The building as a whole is not very suitable for a convalescent home.

*No. of Beds.*

110.

*No. of Wards.*

10.

{ *No. of Beds for Medical Cases.*

{ *No. of Beds for Surgical Cases.*

15 beds for 2—5 years' children, 95 beds for 5—14 years' children.

*No. of Staff.*

26.

*Medical Staff.*

Part time M.O. visits daily.

*Nursing Staff.*

Matron, 1 Ward Sister, 9 Children's attendants.

*Domestic Staff.*

9 (including 2 Handymen, 2 Gatekeepers).

*Administrative Staff.*

1 Clerk, 1 Storekeeper.

*Diseases Treated.*

Convalescent children between 2—14 years, excluding certain forms of disease.

## QUEEN MARY'S HOSPITAL.

### Description.

This institution, previously named West Ham Hospital, is a Voluntary General Hospital situated in West Ham Lane. In addition to the details given, the Hospital has a big out-patient department and a Solarium. Patients are dealt with from all parts of West Ham and neighbouring parts of Essex. The Hospital is subsidised by the West Ham Council. There is room for extension.

### *No. of Beds.*

216 (including 50 maternity beds), (10 maternity beds are subsidized by Council).

### *No. of Wards.*

9 (including Lyle Maternity Wing).

### *No. of Beds for Medical Cases.*

72 (6 private beds medical and surgical), 2 observation beds (medical and surgical).

### *No. of Beds for Surgical Cases.*

88 (6 private beds (medical and surgical), 2 observation beds (medical and surgical).

### *No. of Staff.*

182

### *Medical Staff.*

7

### *Nursing Staff.*

105 (including 19 Sisters, 86 Nurses).

### *Domestic Staff.*

56 (including 36 Maids, 20 Porters).

### *Administrative Staff.*

14.

### *Diseases Treated.*

Maternity cases, Gynæcological, General Medical and Surgical cases.

## PLAISTOW MATERNITY HOSPITAL.

### Description.

This Hospital, situated in Balaam Street, Plaistow, belongs to the Plaistow Maternity Charity, and is subsidised by the West Ham Council. Recently new wards have been opened of modern construction, and there is room for a further extension of some fifty beds.

### *No. of Beds.*

60, of which 48 are used by West Ham patients.

### *No. of Wards.*

10.

{ *No. of Beds for Medical Cases.*

{ *No. of Beds for Surgical Cases.*

60

### *No. of Staff.*

22



*Medical Staff.*

Visiting Staff (non-resident).

*Nursing Staff.*

Matron, 1 Senior Sister, 10 Staff Midwives, 3 Staff Nurses.

*Domestic Staff.*

4 Maids, 3 Scrubbers.

*Administrative Staff.*

At Headquarters.

*Diseases Treated.*

Maternity cases.

## FYFIELD OPEN-AIR SCHOOL.

*Description.*

Fyfield Open-air School for delicate children belongs to the West Ham Education Committee. It is situated at Fyfield, Ongar, Essex, and provides accommodation for eighty boys from seven to sixteen years of age and for sixty girls of the same age limit. There is room for further extension if necessary.

Only delicate children not suffering from any specific disease are admitted.

*No. of Beds.*

80 (boys), 60 (girls).

*No. of Dormitories.*

3 (boys), 1 (girls).

*Staff.*

26.

*Medical.*

Visiting by S.M.O., urgent cases seen by local doctor, who is paid a retaining fee for this purpose.

*Nursing.*

Matron, Sister, Matron's Help.

*Domestic.*

1 Cook, 10 Maids, 4 Gardeners, 2 Handymen.

*Administrative.*

Superintendent, 5 Teachers.

## ALBERT DOCK HOSPITAL.

*Description.*

This institution is situated in the Borough in Connaught Road at the entrance to the Albert Dock. It is one of the participating hospitals under the London County Council Scheme for the treatment of venereal diseases, and West Ham is one of the contributing authorities. Only men patients are treated.

*No. of Beds.*

53.

*No. of Wards.*

5

*No. of Beds for Medical Cases.*

23, and 6 for V.D.

*No. of Beds for Surgical Cases.*

24

*No. of Staff.*

37

*Medical Staff.*

Medical Superintendent, 2 R.M.O.'s, 8 Consultants.

*Nursing Staff.*

20

*Domestic Staff.*

5

*Administrative Staff.*

1 Clerk.

*Diseases Treated.*

General Diseases.

## ST. MARY'S HOSPITAL.

### Description.

This well-equipped Voluntary Hospital for Women and Children only, is situated in London Road, Plaistow. It is subsidised by the West Ham Council, and has a large out-patient department.

*No. of Beds.*

71

*No. of Wards.*

8

*No. of Beds for Medical Cases.*

26

*No. of Beds for Surgical Cases.*

45

*No. of Staff.*

85

*Medical Staff.*

16 (including 4 Physicians, 5 Surgeons, 1 Dental Surgeon, 1 X-Ray Surgeon, 1 Pathologist, 2 Anæsthetists, 2 Resident M.O.'s).

*Nursing Staff.*

39 (including Radiographer and Masseuse).

*Domestic Staff.*

26

*Administrative Staff.*

4 (including Secretary, Asst. Secretary, 2 Dispensers).

*Diseases Treated.*

Medical, Surgical, Ear, nose and throat conditions, Gynæcological.



## CHILDREN'S HOSPITAL, BALAAM STREET.

### Description.

This Hospital is situated in Balaam Street, Plaistow, and treats babies and children only. It is subsidised by the West Ham Council. It has a fairly large out-patient practice mainly in regard to orthopædic treatment. A Sunlight clinic is also attached to this hospital. There is room on the site for considerable extension.

#### *No. of Beds.*

28

#### *No. of Wards.*

—

#### *No. of Beds for Medical Cases.*

16 cots for medical and surgical cases.

#### *No. of Beds for Surgical Cases.*

8 (tons. and ads. operations), 4 orthopædic cases.

#### *No. of Staff.*

29

#### *Medical Staff.*

8 (including 3 Aural surgeons, 1 Orthopædic Surgeon, 2 Anæsthetists, 1 Surgeon, 1 Physician).

#### *Nursing Staff.*

13

#### *Domestic Staff.*

7

#### *Administrative Staff.*

1

#### *Diseases Treated.*

Operations for Tonsils and Adenoids, Medical and Surgical cases in infants and young children.

## MENTAL DEFECTIVES.

Total number on register 402, classified as follows:—

### MALE.

Feeble-minded, 97. Imbeciles, 117. Idiots, 3. Moral Defectives, 10.

### FEMALES.

Feeble-minded, 78. Imbeciles, 90. Idiots, 6. Moral Defectives, 1.

Of these cases the following are detained in institutions :—

	MALE.				FEMALE.				Total
	F.M.	Imb.	Idiots.	Moral Def.	F.M.	Imb.	Idiots.	Moral Def.	
Brentry Colony.....	16	3	—	2	—	—	—	—	21
Stoke Park Colony.....	2	9	—	—	7	10	—	—	28
Whittington Hall.....	—	—	—	—	1	2	—	—	3
Darenth Training Colony.....	3	2	—	—	3	3	—	—	11
Caterham Mental Hospital.....	2	5	—	—	1	1	1	—	10
Leavesden Mental Hospital.....	—	2	—	—	—	—	—	—	2
Fountain Mental Hospital.....	—	—	—	—	—	1	—	—	1
Princess Christian's Farm Colony.	1	—	—	—	—	—	—	1	2
Helping Hand Home.....	—	—	—	—	1	1	—	—	2
Etloe House.....	—	—	—	—	1	1	—	—	2
Pield Heath House.....	—	—	—	—	—	1	—	—	1
Hillside, Buntingford.....	1	—	—	—	—	—	—	—	1
Monkton Hall.....	2	—	—	—	—	—	—	—	2
Besford Court.....	1	—	—	—	—	—	—	—	1
Ellen Terry Home.....	—	—	—	—	1	—	—	—	1
Forest Gate Hospital.....	14	10	1	2	11	15	1	—	54
Royal Fort Home, Bristol.....	—	—	—	—	1	—	—	—	1
Rampton State Institution.....	6	1	—	2	1	—	—	—	10
Total ... ..									153

### Proposed New Institution.

The proposed new institution for mental defectives is situated in the parish of South Ockendon and the Rural District of Orsett, in the County of Essex, about three-quarters of a mile from South Ockendon Station, and comprises about 204 acres. This institution is to accommodate 750 patients as follows :—

Female adults ... ..	240
Male adults ... ..	180
Children, males ... ..	100
Children, females ... ..	100
Lowest grade, males and females ...	58
Hospital—General ... ..	60
Hospital—Cases of tuberculosis ...	12
<hr/>	
	750
<hr/>	

The layout consists of villas for male and female patients, school with classrooms, recreation hall, kitchen block, including bakery, laundry and boiler house, mortuary, staff quarters, workshops for male and female patients, hospital blocks for general treatment, and for cases of tuberculosis, houses for Medical Superintendent, Steward, Chief Engineer, and Chief Attendant, Nurses' Home, and male nurses' quarters, maids' quarters, farm buildings, also attendants' and labourers' cottages.



In addition to the foregoing cases, a number of persons suffering from mental disorder are detained under Section 24 of the Lunacy Act, 1890, in West Ham institutions, as follows:—

Central Home	...	...	...	33
Forest House	...	...	...	13
Forest Gate Hospital	...	...	...	97
				<hr/>
				143
				<hr/>

## MUNICIPAL CLINICS IN WEST HAM.

### **Stratford Clinic, 84 West Ham Lane, E.15.**

School Clinic—	Inspection and treatment of dental defects in school children; inspection and treatment of minor ailments in school children; inspection and treatment of defective vision and external eye diseases in school children.
2 Dental Clinics.	
1 Minor Ailments Clinic.	
1 Ophthalmic Clinic.	

### **Balaam Street Clinic, Plaistow, E.13.**

School Clinic—	Inspection and treatment of dental defects and minor ailments in school children. Refraction done by Ophthalmic Surgeon. Glasses provided at reduced rates or free.
1 Dental Clinic.	
1 Minor Ailments Clinic.	
1 Ophthalmic Clinic.	

### **Rosetta Road Clinic, Custom House, E.16.**

School Clinic—	Inspection and treatment of dental defects and minor ailments in school children; also Maternity and Child Welfare Dental Clinic.
1 Dental Clinic.	
1 Minor Ailments Clinic.	

### **Swanscombe Street Clinic, Canning Town, E.16.**

School Clinic—	Inspection and treatment of dental defects and minor ailments in school children; also Maternity and Child Welfare Dental Clinic.
1 Dental Clinic.	
1 Minor Ailments Clinic.	

### **Children's Hospital, Balaam Street, E.13.**

1 Orthopædic Clinic.	Treatment of crippled debilitated children referred mainly through School Medical Department and M. & C.W. Department.
1 Sunlight Clinic.	

### **Balaam Street, Plaistow.**

Tuberculosis Dispensary.	Examination and treatment of notified tuberculous persons. Examination and treatment of contacts and doubtful cases. Central Centre for all tuberculous cases.
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**Silvertown Municipal Centre, Westwood Road, E.16.**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years.

**Grange Road Municipal Centre.**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years; also dental treatment.

**West Ham Lane Municipal Centre.**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years; also dental treatment for toddlers and expectant mothers.

**Forest Gate Municipal Centre (near completion).**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years; also dental treatment.

**Prince Regent Lane Municipal Centre (near completion).**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years; also dental treatment.

**VOLUNTARY CLINICS SUBSIDISED BY THE  
WEST HAM COUNCIL.**

**Chesterton House, Balaam Street.**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years; also dental clinic.

**St. Luke's Square, Tidal Basin.**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years.

**Martin Street, Stratford, E.15.**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years.

**South West Ham Health Society, Barking Road, E.16.**

Maternity and Child Welfare Centre. Advice and treatment to expectant and nursing mothers and children under five years.

**Trinity Mission Society, Oxford Road, E.15.**

Maternity and Child Welfare Centre. Child Welfare Clinic, no ante-natal treatment.



**Given Wilson Institute, Pelly Road, E.**

Maternity and Child Welfare Centre. Advice and treatment to nursing mothers and children under five years

**Welfare Road Clinic, Stratford, E.15.**

Maternity and Child Welfare Centre. Artificial Sunlight treatment (Cases sent through M.O.H. by all M. & C.W. Clinics throughout the Borough), also Child Welfare Clinic.

**Stratford Day Nursery, E.15.**

Infant Welfare. Care of infants and toddlers during absence of mothers.

**WORK OF THE DISTRICT MEDICAL OFFICERS.**

There are five District Medical Officers, two of these are full-time officials and three are part-time officers.

Their main duties consist in attending all necessitous sick persons either in the homes, or at their surgeries, or at the Relief Stations.

They also see all cases referred to them by the various Relieving Officers or Relief Sub-Committees. Suitable cases are drafted by them into the various institutions.

The District Medical Officers are assisted in their duties by two whole-time trained nurses.

There is a doctor's consulting room and a dispensary with a dispenser attached at the Relief Stations at Cumberland Road and West Ham Lane.

**SPECIALIST MEDICAL SERVICES.**

In addition to the modern equipment and treatment provided in most of the residential institutions for the sick, facilities are provided under the Public Health Services of the Borough for the treatment of special disabilities, and also arrangements are in force whereby the services of specialists in various diseases are available in institutions, at the clinics and in the homes.

Mentally defective children who are educable are provided for by two special schools situated respectively at Knox Road, Forest Gate, and at Grange Road, Plaistow; these schools accommodate some two hundred mentally defective children.

Physically defective children are likewise provided for by two special schools situated on the same sites and run in conjunction with the Schools for Mentally Defective Children. Accommodation is available for some one hundred and sixty physically defective children. There is usually a waiting list for both these sections of the special schools.



At Crosby Road, Forest Gate, a Day Open-air School is situated on the same site as, but separated from, the Knox Road School. This open-air school has accommodation for sixty delicate girls. The Residential Open-air School at Fyfield, Ongar, is mentioned on page 36.

There are two special centres for deaf children. A Consulting Aural Surgeon examines and reports upon the cases from time to time. In addition for the school children there are two part-time Ophthalmic specialists available. Artificial sunlight is provided at two Sunlight Clinics, one at Welfare Road, for children under five years of age under the Maternity and Child Welfare Scheme, and the other for school children is attached to the Balaam Street Hospital. Special electrical and other treatment for orthopædic cases is provided at the Children's Hospital, Balaam Street.

One Nursery School is situated at Rosetta Road (the Edith Kerrison), and another at Village Street (the Rebecca Cheetham). Each of these schools can accommodate one hundred and twenty children between the ages of two and five years.

A panel of three eminent specialists is available to any general practitioner who desires a second opinion on any difficult case of confinement. Maternity hospital beds are also available for such cases, in addition to beds for cases of fever following confinements.

Treatment by radium is obtainable at Whipps Cross Hospital and at Queen Mary's Hospital.

Cases of surgical tuberculosis are drafted by the Tuberculosis Officer to various General and Special Hospitals in London and district. The average number of cases under treatment is fifty. A number of adults attend Voluntary Hospitals for treatment independent of the Council's scheme.

## CONVALESCENCE.

Two beds are reserved at the St. Mary's Convalescent Home, Birchington, for those mothers with their babies needing convalescence after confinement.

Ordinary convalescence for children (other than those going to the Margate Home) is arranged by the Council through the Invalid Crippled Children's Society and the Invalid Children's Aid Association. The former have a Convalescent Home at Shoeburyness and also, as well as the latter, send cases to different convalescent homes throughout the country. On an average there are 60 children in convalescent homes through the Council's scheme.

In addition to the above, there are several Voluntary organisations by means of which a number of children are sent to various institutions for convalescent treatment.



# MISCELLANEOUS DATA.

Number of insured population under the National Insurance Act	130,966
Number of panel doctors	126
Number on relief (week ended 27/12/30)	9,378
Number of old age pensioners (31/12/30)	5,616
Estimated total population	307,600
Estimated population under five years of age	30,000
Estimated School population	68,000
Number of West Ham residents dying in institutions not within or belonging to this Borough in 1929 (including 51 under 1 year and 322, 1 year and upwards)	373
Total deaths in 1929 (assigned to West Ham)	3,926
Total deaths in all institutions	*1,661

\* 42 per cent.

Hospitals in East Ham, Leyton and Walthamstow:

East Ham ... East Ham Memorial Hospital (100 beds).  
Aldersbrook Home for Children.

Walthamstow Connaught Hospital, Orford Road (100 beds).

## SUMMARY OF NUMBER OF BEDS, ALSO MEDICAL STAFF AND NURSING STAFF, IN RELATION TO TOTAL POPULATION AS REGARDS INFECTIOUS DISEASES AND ORDINARY SICKNESS AND ACCIDENTS.

Name of Institution.	Men.	Women.	Children.	Medical Staff.	Nursing Staff
Plaistow Fever Hospital	70	70	70	3	74
Children's Hospital, Harold Wood	—	—	116 from Plaistow Hospital		19
Dagenham Sanatorium	80	48	—	2	26
Langdon Hills Sanatorium for Children	—	—	40 from Dagenham Sanatorium		10
Whipps Cross Hospital	321	308	112	7, and 8 Consultants	191
Central Home	410	564	4 from Forest Gate Hospital		145
Forest House	396	—	— from Central Home		12†
*Forest Gate Hospital	133	302	118	3	118
Margate Convalescent Home	—	—	110 1 part time		11
Queen Mary's Hospital	60	111	45	7	105
Plaistow Maternity Charity	—	60	— Visiting staff		55
Fyfield Open-air School	—	—	140 1 part time		2
Albert Dock Hospital	53	—	— 3, and 8 Consultants		20
St. Mary's Hospital	—	31	40 2 R.M.O.'s and 14 Consultants		39
Balaam Street Hospital	—	—	28 8 part time		13
	1524	1494	823	67	840

† attendants.

\* Cases under Sec. 24 of the Lunacy Act not included as no provision was made when this Institution was originally built.



Total population of the late West Ham Guardians Area,  
Registrar-General's estimate, 1929—748,740.

Total number of beds for—

	Forest Gate Hospital.	Forest House.	Central Home.	Whipps Cross Hospital.
Mental Deficiency cases ...	197	15	—	—
Sec. 24 cases (Lunacy) ...	97	13	33	—
Epileptics ...	138	26	—	—
Chronic sick ...	70	55	1000	} 800
Acute sick ...	—	—	—	
Tuberculosis ...	...128 Dagenham Sanatorium and 40 Langdon Hill Sanatorium for Children and 90 Whipps Cross Hospital.			
Infectious cases ...	...210 at Plaistow Fever Hospital + 116 at Children's Hospital, Harold Wood.			

**Small-pox.**—The Council's hospital at Dagenham was originally intended for the treatment of Small-pox patients, but owing to the general immunity from this disease in and around London, which extended over several years, the Council considered it expedient to use the buildings as a Sanatorium for Tuberculosis. Arrangements were subsequently made with the Orsett Joint Hospital Board to treat not only Sporadic cases of Small-pox from West Ham, but those occurring in certain South-West Essex districts.

In 1897 agreements with West Ham were ultimately entered into for seven years for the treatment of Small-pox with ten neighbouring Authorities—having a total population (including West Ham) of 572,642. The agreements have from time to time been renewed, and in addition representations have since been made to include eleven other districts.

The Authorities at present under agreement represent a total population (including West Ham) of 1,031,797.

The only hospital accommodation in South-West Essex for the treatment of Small-pox being that provided by the Orsett Joint Hospital Board, who have a building capable of accommodating twenty-two patients.

The agreements specify that in the event of the Orsett Hospital having at any time its full complement of Small-pox patients, the Council shall, upon notice thereof from the Board, provide accommodation at the Council's Hospital at Dagenham.



During the present outbreak of Small-pox it soon became evident that Orsett Hospital could not cope with the number of cases, and it was necessary to approach the Metropolitan Asylums Board (now the London County Council) to receive cases from West Ham and the out-lying districts. This, fortunately, was agreed to, and obviated the removal of Tuberculous patients from Dagenham Hospital.

In a recent report on Small-pox accommodation I have pointed out the advisability of not continuing the existing agreements with the various out-lying districts, which agreements expire in March, 1932, and further, that owing to considerable alterations to the buildings at Dagenham Hospital whereby certain portions previously used as wards have been converted into rest-rooms, day-rooms and mess-rooms, the total available number of beds which could be used for Small-pox cases has been greatly reduced. The immediate environment of the Hospital has completely altered in character since it was originally opened for Small-pox. Roads and houses now abound within a short distance, and a dense population has sprung up in the vicinity.

Although the London County Council have agreed to receive Small-pox patients from West Ham and the out-lying districts until December, 1931, there is at present no guarantee that this will be continued after that date, and this opens up the very important subject of considering Hospital accommodation for Small-pox cases.

## APPENDIX III.

### LOCAL GOVERNMENT ACT, 1929.

The following statistics are in respect of the Forest Gate Hospital, Whipps Cross Hospital, Central Home, and Forest House, also of the District Medical Officers:—

#### District Medical Officers.

(These figures are in respect of the period April—December, 1930 inclusive).

	Number of Men.	Number of Women.	Number of Children.
New cases seen ... ..	857	2194	1321
Total No. of cases seen ...	3745	12532	3646
No. referred by Relief Sub-Committee ... ..	235	243	109
Attendances at Surgery ...	3686	8524	3221
Sent to Institutions:—			
Voluntary Hospitals ...	—	1	2
Whipps Cross Hospital ...	107	149	122
Mental ... ..	—	1	—
Otherwise ... ..	2	9	10
Central Homes ... ..	59	59	6
Forest House ... ..	14	16	—
Forest Gate Hospital ...	3	36	3
Discharged as no longer in need of treatment ...	329	638	771
New cases seen at Domiciliary visit ... ..	191	523	440
Fresh cases transferred from Institutions (a) ...	2	—	4
(b) General Practitioner ...	5	5	3
Total No. of Domiciliary visits paid ... ..	669	2861	1263
Visits paid by District Nurse ...	616	3612	1675
Deaths ... ..	7	20	4
Total No. now on register as receiving treatment from D.M.O. ... ..	1433	4639	1997
Prescriptions made up ...	3884	13777	2941



# WHIPPS CROSS HOSPITAL.

(These figures are in respect of the period April—December, 1930, inclusive).

	MEN			WOMEN			CHILDREN			Total
	Acute	Sub-acute	Chronic	Acute	Sub-acute	Chronic	Acute	Sub-acute	Chronic	
Admitted	1869	—	86	1869	—	89	1031	—	17	4961
Discharged	1581	—	67	1704	—	86	972	—	8	4418
Seen as out-patients for after treatment	270	—	70	31	—	2	14	—	2	389
Not Admitted	339	—	29	82	—	10	64	—	—	524
Admitted by means of Relieving Officer and District Med. Officer Gen. Practitioner and Relieving Officer M.O.H.	MEN			WOMEN			CHILDREN			
Otherwise	228			263			147			638
Transferred from other institutions,	1431			1484			771			3686
Police (not accidents)	—			2			—			2
Accidents	5			—			1			6
Med. Superintendent	83			103			101			287
No. of infectious cases	50			28			—			78
Transferred to other institutions	115			53			40			208
Deaths	34			18			5			57
Total No. being treated in Hospital on 31/12/30	109			124			58			291
	142			154			130			426
	327			204			93			624
	321			256			213			790
No. of cases seen by Consultants...	1489	Gynaecologist	...	23	No. of cases allocated to:	X-ray				
Ophthalmic	78	Surgeon	...	127	West Ham	...	712	West Ham	...	616
Aural	242	Neurologist	...	181	Essex	...	569	Essex	...	697
Light	572	Dentist	...	167	East Ham	...	208	East Ham	...	182
		Urologist	...	99						

# CENTRAL HOME.

(These figures are in respect of the period April—December, 1930, inclusive).

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	625	6	4	614	11	5	5	8	—	1278
Discharged	624	4	4	558	9	3	9	5	—	1216
Refused Admission	—	—	—	—	—	—	—	—	—	—
Admitted by means of	MEN			WOMEN			CHILDREN			
Relieving Officer and										
District Med. Officer	190			221			2			413
Gen. Practitioner and										
Relieving Officer	186			169			1			356
Gen. Practitioner and										
District Med. Officer	6			5			—			11
M.O.H.	—			—			—			—
Otherwise	125			116			3			244
Transferred from other										
institutions,	128			120			7			255
Med. Superintendent	—			—			—			—
No. of infectious cases	—			—			3			3
Transferred to other										
institutions	57			76			10			143
Deaths	351			327			1			679
Total No. of sick cases										
in the Home on 31/12/30	415			566			5			986



# FOREST GATE HOSPITAL.

(These figures are in respect of the period September—December, 1930, inclusive).

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	—	8	9	—	1	6	—	14	2	40
Discharged	—	6	6	—	8	1	—	3	2	26
Refused Admission	—	—	—	—	—	—	—	—	—	—
Admitted by means of	MEN			WOMEN			CHILDREN			
Relieving Officer and										
District Med. Officer		1			44			1		46
Gen. Practitioner and										
Relieving Officer		1			17			—		18
Gen. Practitioner and										
District Med. Officer		—			—			—		—
M.O.H.		1			46			4		51
Otherwise		4			35			3		42
Transferred from other										
institutions		14			28			20		62
Med. Superintendent		—			—			—		—
No. of infectious cases		—			4			1		5
Transferred to other										
institutions		14			33			23		70
Deaths		1			9			4		14
Total No. of sick cases										
receiving treatment										
on 31/12/30		127			302			118		547
Total No. of maternity										
patients being treated in										
the Home on 31/12/30		—			40			—		40

## FOREST HOUSE.

(These figures are in respect of the period April—December, 1930, inclusive).

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	—	2	—	1	—	—	—	—	—	3
Discharged	15	—	—	2	—	—	—	—	—	17
Refused Admission	—	—	—	—	—	—	—	—	—	—
Admitted by means of	MEN			WOMEN			CHILDREN			
Relieving Officer and										
District Med. Officer	—			—			—			—
Gen. Practitioner and	—			—			—			—
Relieving Officer	—			—			—			—
Gen. Practitioner and	—			—			—			—
District Med. Officer	—			—			—			—
M.O.H.	—			—			—			—
Otherwise	—			—			—			—
Transferred from other										
institutions	9			2			—			11
Med. Superintendent	—			—			—			—
No. of infectious cases	—			—			—			—
Transferred to other										
institutions and where	14			6			—			20
Deaths	—			1			—			1
Total No. of sick cases										
in the Home on 31/12/30	55			—			—			55



## APPENDIX IV.

### FLOODING JUNE 18th, 1930.

In connection with the severe rain storm which occurred in the afternoon of Wednesday, June 18th, basement and other houses were flooded in every part of the Borough.

In most cases the water drained away very soon after the storm ceased—very little remaining six hours later.

The inconvenience caused to tenants was worse in basement houses and those where the floors are below the level of the adjoining street.

In a few cases floors which were defective have been made worse.

The means of carrying off the water from many roofs especially those of the "valley" type, proved inadequate in the abnormal circumstances.

Complaints to the number of thirty-one have been received and investigated, and in addition to these my Inspectors directed their enquiries to areas most likely to suffer from the heavy rainfall.

About three hundred and seventy houses have been visited; occupiers have been advised as to cleansing and ventilation.

Disinfectants have been supplied to over seven hundred and thirty applicants, and seventy notices served upon owners up to date. Doubtless these numbers will be added to during the next few days.

The houses visited have been mainly in the following streets :

Alice Street	Frederick Road	Randolph Road
Ascot Street	Godsell Road	Rivett Street
Alfred Street	George Street	Sidney Street
Barking Road	Hermit Road	Shepherd Street
Blake Road	Hill Street	Star Lane
Beaconsfield Road	Hearn Street	St. George's Road
Broad Street	Hack Road	Ship Street
Bidder Street	Hoy Street	Shipwright Street
Burnham Street	Huntingdon Street	Smith Street
Butchers Road	Junction Street	Sabberton Street
Carlton Street	Kempton Street	Tyas Road
Carpenters Road	Liverpool Road	Victoria Dock Road
Caxton Street	Leslie Road	Vicarage Lane
Carnarvon Road	Martindale Road	Vincent Street
Chestnut Avenue	Malmesbury Road	Walter Street
Chandos Road	Maud Road	Wingfield Road
Cecil Road	Mona Street	Wellington Place
Chandler Road	Merton Street	Wightman Street
Durham Road	Mary Street	Woodgrange Road
Fen Street	Ordnance Road	Young Street
Fox Street	Rendel Road	



## FLOODING AFTER RAINFALL ON 18th JUNE, 1930.

Supplementary to my previous report of the 24th instant, 5 further complaints have been received, and 135 additional houses have been visited, and occupiers advised as to cleansing and ventilation.

Disinfectants have been supplied to 357 applicants.

Re-inspections have taken place in most of the houses affected, and there is every appearance that the conditions are now becoming normal. The notices served upon owners to execute repairs are being put in hand.

The Council's Inspectors and Sewermen have worked hard in their endeavour to minimise as far as possible the discomforts caused to occupiers in the various areas.

The total figures to date are as follows :

Complaints received	...	...	...	36
Houses visited	...	...	...	505
Notices served	...	...	...	151
Disinfectants supplied	...	...	...	1087

F. GARLAND COLLINS.

June 28th, 1930.

## APPENDIX V.

### AMBULANCE SERVICE.

The ambulance arrangements in West Ham for conveying persons requiring immediate operation in hospitals, street accidents, etc., have been carried out by Messrs. Perry and Son, of Grafton Road, Plaistow, since the year 1918, on the following terms:—To house at Grafton Road, Plaistow, supply petrol, oil, maintain in running order (not supplying tyres) for a payment of 25s. weekly for each vehicle, and the charge of 7s. 6d. for the removal of a patient within the Borough, and 15s. to institutions outside—exceptional long distances quoted for at the rate of 1s. 3d. per mile.

There are at present three ambulances in commission:—

\*1 Vulcan purchased in 1918.

1 Morris purchased in 1927.

1 Austin purchased in 1927.

\* Used for Small-pox cases only.

During the year 1929 two thousand and seventeen patients were removed to hospital within and outside the Borough arising from the following causes:—Illness in streets, accidents, operations, maternity, suicides.



**The Public Assistance Committee.** Five ambulances are housed and maintained at Whipps Cross Hospital, and are used exclusively by the institution. Eight men are engaged on these vehicles, and work on the shift system.

**Plaistow Hospital.** Two ambulances are housed here, and are worked from the hospital. Two men being engaged.

**"The Grange," Harold Wood.** One ambulance and one driver, who also acts as caretaker to the institution.

**Education Committee.** Two ambulances are employed for conveying delicate children to and from Knox Road and Grange Road Special Schools. Two drivers from the Transport Department and one woman attendant attached to each ambulance.

The Committee at the last meeting decided that the existing ambulance arrangements at the following institutions remain unaltered for the present:—

Whipps Cross Hospital.

Plaistow Hospital.

"The Grange," Harold Wood, and  
the Special Schools.

Also any scheme of re-organisation of the service for the removal of Small-pox patients be carried out by a special ambulance from the Plaistow Hospital.

I have discussed the matter with the Superintendent of the Fire Brigade, and after considering the various aspects arising out of the termination of the present arrangements with Messrs. Perry and Son, have come to the conclusion that two alternative methods remain for the Committee's consideration, viz. :

- (1) That a separate ambulance service be established under the supervision of the Fire Superintendent (not on Fire Brigade premises) ; and
- (2) That the ambulances be a section of the Motor Transport Department stationed at a site or sites to be decided upon.

If it is agreed to provide a Station for the Silvertown district, a new ambulance will be required, and I am given to understand that the old Fire Station at Emma Street would be available for the purpose.

F. GARLAND COLLINS.

December 4th, 1930.

Since writing this report an additional ambulance station and ambulance have been provided for the Silvertown area.

The Public Assistance Committee, a five members, are  
and maintained at Hippis-Cross Hospital, and are used  
by the institution. Eight men are engaged on these  
and work on the shift system.  
Plinston Hospital. Two ambulances are based here, and  
worked from the hospital. Two men being engaged.  
The Garage, Harold Wood. One ambulance and one  
man, who also acts as caretaker in the institution.

Education Committee. Two ambulances are employed for  
carrying children to and from Kew-Hill and Garage  
and Special Schools. Two drivers from the Transport Department  
and one woman attendant attached to the institution.  
The Committee at the last meeting decided that the existing  
arrangements at the following institutions remain un-  
changed for the present:—

- Hippis-Cross Hospital.
- Plinston Hospital.
- The Garage, Harold Wood, and  
the Special Schools.

An act scheme of re-organisation of the service for the removal  
of Special patients be carried out by a special ambulance from  
Plinston Hospital.  
I have discussed the matter with the Superintendent of the  
Fire Brigade, and after considering the various aspects arising  
out of the re-organisation of the present arrangements with Messrs.  
Bry and Son, have come to the conclusion that two alternative  
methods remain for the Committee's consideration, viz.:

- 1) That a separate ambulance service be established under the  
superintendence of the Fire Superintendent, four on Fire Brigade  
premises, and  
2) That the ambulances be a section of the Motor Transport  
Department stationed at a site or sites to be decided upon.  
It is suggested to provide a station for the Stretton's district  
and ambulance will be required, and I am given to understand  
that the Fire Station at Farnham Street would be available for the  
purpose.

### FARNHAM COLLEGE

At the meeting of 1930, the Committee decided to provide  
a station for the Farnham College.

Since then, this report an additional ambulance station and  
ambulance have been provided for the Stretton area.

At the meeting of 1931, the Committee decided to provide  
a station for the Farnham College.

At the meeting of 1932, the Committee decided to provide  
a station for the Farnham College.



ANNUAL REPORT  
OF THE  
SCHOOL  
MEDICAL OFFICER  
FOR THE YEAR  
1930

F. GARLAND COLLINS,  
M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.

ANNUAL REPORT  
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TO THE CHAIRMAN AND MEMBERS OF THE  
EDUCATION COMMITTEE.

**Mr. Chairman, Ladies and Gentlemen,**

I beg to submit to you my Annual Report upon the School Medical Service for the Year 1930.

The death in September of Dr. Frank B. Skerrett, who had worked with enthusiasm and ability in this Department since its inception in 1908, is much regretted, and his loss will be greatly felt by the members of the Committee and his former colleagues.

Two Nursery Schools were opened in August of this year; the Edith Kerrison Nursery School at Rosetta Road and the Rebecca Cheetham Nursery School at Village Street. Each of these schools is built to accommodate 120 children between the age of two and five years. Further details will be found on page 233.

The passing of the Local Government Act has transferred to Education Authorities certain responsibilities in regard to boarded out school children previously under the care of the Board of Guardians.

The question of re-modelling the Crosby Road Day Open-Air School is now under consideration. Although the building itself is not satisfactory, the school has been the means of improving the health of many debilitated girls.

Miss Hewitt, the Head Mistress of the Knox Road Special School for Mentally and Physically Defective Children, has recently retired. I wish to express my gratitude to her for the valuable help she has rendered to my Department in regard to children attending her school.

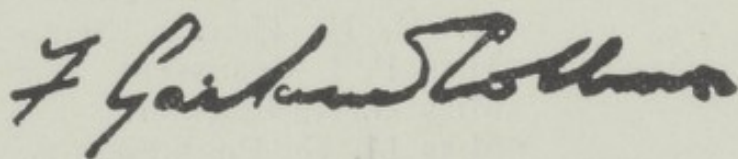
It is proposed to appoint a whole-time Officer for refraction work in place of the two present part-time Ophthalmic Surgeons.

The percentage of children suffering from dental defects is still very high, and adequately to deal with this condition further Dental Surgeons are required.

There has not been an abnormal number of children absent from school, and the general health of the school population has remained good.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,



School Medical Officer.

Town Hall,  
West Ham, E.15.

June, 1931.

## (1) Staff.

The staff consists of the following Officers:—

**Chief School Medical Officer**—F. Garland Collins, M.R.C.S. (Eng.). L.R.C.P. (Lond.), D.P.H. (Also Medical Officer of Health.)

**Chief Assistant School Medical Officer**—Frank B. Skerrett, M.B., B.Sc. (Lond.), B.Sc. (Vict.), M.R.C.S. (Eng), L.R.C.P. (Lond.), D.P.H. (Also Assistant Medical Officer of Health.) (Deceased.)

**Assistant School Medical Officers (full time)**—

A. C. Lupton, M.B., C.M.

W. J. Thomas, M.R.C.S., L.R.C.P., D.P.H.

H. McD. Borland, M.B., Ch.B.

Janetta J. Powrie, M.B., Ch.B., D.P.H.

A. Furniss, L.R.C.P., L.R.C.S., L.R.F.P.S. \*(Glas.),  
D.P.H., L.D.S.

**Dental Officers (full time)**—

L. K. Percy, L.D.S. (Eng.).

J. S. Dick, L.D.S. (Eng.).

Miss H. M. Gubb, L.D.S. (Eng.).

Miss S. Glasstone, L.D.S. (Eng.). (Resigned.)

O. B. Heywood, L.D.S. (Eng.).

Miss D. Marsden, L.D.S. (Eng.). (Temporary.)

**Ophthalmic Surgeons (part time)**—

G. A. Troup, M.D. (Edin.).

E. C. Arnold, F.R.C.S. (temporary).

**Consultant Aural Surgeon (part time)**—

F. Stoker, F.R.C.S.

## CLERICAL STAFF.

Mr. F. W. England, Chief Clerk.

Mr. R. H. Thomas, Senior Clerk.

Miss P. I. Geaussent.

Miss G. A. Blackler.

Miss M. G. England.

Miss E. W. Wood.

Mr. T. P. Swatts.

Mr. S. A. Lemmon.

Miss I. M. Parsons.



## NURSING STAFF.

Miss O. S. Vincent (Matron, Fyfield Residential Open Air School)

Miss E. Adams.	Miss M. James (Nurse, Fyfield Residential Open-Air School).
Miss E. Alford.	Miss E. Large.
Miss D. S. Ayton.	Miss A. K. McCormack.
Miss A. Burrows.	Miss M. Mackenzie.
Miss E. M. Bussell.	Miss I. B. B. Mann.
Miss A. J. Costain.	Miss L. F. Manning.
Miss M. M. Empson.	Miss F. Moore.
Mrs. E. G. Eyton.	Miss F. R. Pritchard.
Miss E. Fraser.	Miss M. H. Rose.
Miss L. C. Glover.	Miss C. K. Starling.
Mrs. C. B. Halls.	Miss E. R. Tanner.
Miss E. D. Harris.	Miss M. E. Tanner.
Miss F. G. Hobbs.	Miss M. A. Van Ryssen.
Miss C. E. Hutton.	Mrs. S. Wilderspin.
Miss E. K. Jack.	

## (2) Co-ordination of Departments.

The School Medical Officer is also Medical Officer of Health, and there is the closest co-operation between all the Departments under his control.

(a) Co-ordination between the School Medical Service and the Maternity and Child Welfare Department is secured by the transfer of the Health Visitors' following-up cards to the School Medical Department. These cards are allocated to the child's School Medical Dossier when it becomes of school age, and so are available for the School Medical Inspection at the first examination.

(b) Care of Debilitated Children requiring Convalescent Treatment.—These children are brought to the notice of the Medical Officer of Health by such voluntary agencies as the Invalid and Crippled Children's Society, the Invalid Children's Aid Association, and the various Hospitals. The examination of these children is at present undertaken by Dr. Helen Campbell, the Assistant Medical Officer for Maternity and Child Welfare.

(c) The Bye-Laws Department daily notifies the Medical Officer of Health of absentees from school on medical grounds.

(d) The Tuberculosis Officer is constantly in touch with the School Medical Department, reporting on children referred to him by the Assistant School Medical Officers, and who have been sent away for Institutional treatment.



## THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

### (3) School Hygiene.

Insanitary conditions arising within the School precincts or its immediate environment are reported to the School Medical Officer by Head Teachers as they arise. Structural defects relating to heating, light and ventilation are referred to the Committee's Architect, Mr. J. H. Jacques.

"The Architect reports that during the year improvements were made at a number of Schools to bring them up to modern requirements, and remove them from the Board of Education's Black List, as follows:—Colegrave Road, Custom House, Denmark Street, Godwin Road, Maryland Point, Carpenter's Road. The improvements generally were to obviate two Classes being taught in one room, going through one room to get to another, additional natural and artificial lighting and ventilation, and doing away with back lighting. Improvements and additions were also made in connection with the Re-organization Scheme at Credon Road, Three Mills, Harold Road, Balaam Street, and Stock Street Schools. Domestic Centres were built at Harold Road, Credon Road, and Shipman Road Schools, and the Handicraft Centres at Park School and Shipman Road School.

"The Latrines at five Schools were modernized in accordance with the programme, which is now nearly completed, the work consisting of fitting each W.C. with a separate pan and separate flushing apparatus. The installation of Central Heating to Schools was continued, and one more school dealt with.

"The Girls' and Infants' Departments of the old South Halls-ville School, built in 1873, have been pulled down, and the Boys' Department converted into a modern Infants' Department. Hot water has been provided here for the children's lavatories, also a drying room for wet clothes, whilst the Babies' Room has a W.C. and Lavatory basin attached to the room. A 'Medical Inspection' room is also provided.

"The windows in four classrooms at the new South Halls-ville School have been glazed with Vita Glass, but no positive results from its use have been noted."

The desks in use are of the modern dual type, and as opportunity arises box desks are being gradually substituted for the older children, and chairs and tables for the younger ones. The schools, classrooms, and cloakrooms are cleansed by an efficient staff of cleaners, under the direction of the School Caretakers. Head Teachers attend to the drying of children's clothes as required.



The question of meals at Schools hardly arises, as with few exceptions most children live near the Schools, and go home mid-day. In the two Special Schools, however, and in the Day Open-Air School at Crosby Road, the provision of a hot meal at a very low cost is arranged for, but many cases are on the free meal list.

There are ten School Dining Centres distributed in various parts of the Borough, in charge of a Lady Superintendent, which are visited periodically by the School Medical Officer.

The experiment of supplying Horlick's Malted Milk to Infant children attending two Schools has been continued. The Committee have also sanctioned the extension of this Scheme to three other Infant Departments.

Head Teachers have been informed generally that no objection will be raised to voluntary arrangements being made for the supply of ordinary milk to school children, provided that the proposed arrangements are submitted for approval, that no expense is incurred to the Education Committee, and that any such arrangements would be subject to termination, or such alterations, as the Committee deem necessary in the event of an Official Scheme being adopted. Many Head Teachers have availed themselves of the opportunity of supplying ordinary milk to school children, and the Committee are considering reports on the result of these experiments. The milk is generally supplied in sealed bottles containing about one-third of a pint, at a cost to parents of a penny per bottle, and only retailers whose premises are satisfactory to the Medical Officer of Health are allowed to supply milk.

#### **(4) Medical Inspection.**

For the purposes of administration, the whole Borough is divided into five sub-areas, each served by a School Clinic, an Assistant School Medical Officer and Nurses. The schools in each area are visited in rotation. The Head Teachers send out notices to parents informing them of the time to attend the inspection, according to an arranged programme.

At the end of the Inspection of a School a written list is handed or sent to the Head Teachers informing them confidentially of any defects which are liable to interfere with a child's educational career.

Arrangements have been made for those scholars who are absent from Inspection to be examined at a later special visit to the school.

(a) The "age groups" inspected throughout the schools are as follows:—

- (1) Children admitted to school for the first time during the year (Entrants).



- (2) Children of 8 years of age (Intermediates).
- (3) Children expected to leave, and who have not been previously inspected since reaching the age of 12 years. (Leavers).

Besides the above statutory routine examinations, a considerable number of other children have also been medically inspected—classified as follows:—

- (1) "Specials"—selected by Head Teachers and examined at School at the time of the Doctor's visit.
- (2) "Specials" sent by Teachers to the Clinics for treatment of minor ailments.
- (3) A number of non-ailing children are examined as to fitness for (1) sport; (2) employment; (3) camp life; (4) employment in entertainments. All these comprise "other routines."
- (4) All other children referred in any way to the School Medical Officer for examination, advice or treatment.
- (5) A census and medical examination of all exceptional children in the Schools for the purpose of Table III. of the Report.

(b) There has been no important departure made in the Board's Schedule of Medical Inspection.

Owing to exceptional circumstances the following schools, with the Board's sanction, were examined on other than school premises, viz. at the places indicated:—

Hallsville Clarkson Street St. Margaret's Holy Trinity Canning Town	}	The Public Hall, Canning Town.
St. Luke's		The Boyd Institute.
St. Patrick's Carpenters Road	}	The Old Vicarage, Christ Church.
Salway Place St. Francis'	}	The Wesleyan Hall.
St. Paul's. Colegrave Road	}	The Mechanics' Institute (L.N.E.R.)
The Rosetta Junr.		The Bancroft Hall.
St. James'.		Hanford Memorial Hall, Forest Lane.
West Ham Church Boys.		Stratford School Clinic.
Frederick Road.		South Hallsville School, Medical Room (temporary).



## SCOPE OF THE SCHOOL MEDICAL SERVICE.

The School Medical Service now comprises the following activities :—

- (1) Medical Inspection in Elementary Schools (Routine and Specials).
- (2) "Following up" of children found defective.
- (3) Cleanliness Surveys (Five Special Duty Nurses engaged).
- (4) Treatment of Minor Ailments (four Clinics).
- (5) Dental Inspection and Scheme of Treatment (five full-time Dental Surgeons, four Clinics).
- (6) Treatment of Visual Defects (two part-time Ophthalmic Surgeons; five sessions per week).
- (7) Operative Treatment of Tonsils and Adenoids by arrangement with three local Hospitals.
- (8) X-Ray Treatment of Ringworm (1) by local Radiologist; (2) by arrangement with the London Hospital.
- (9) Provision of meals to necessitous children.
- (10) Provision of Surgical Instruments and Appliances for Crippled Children.
- (11) Orthopædic Treatment. Remedial Clinic in-patient and out-patient treatment at Orthopædic Hospitals.
- (12) Convalescent treatment for debilitated children.
- (13) Juvenile Employment.
- (14) Open Air Education. (1) Residential Open Air School for 80 Boys and 60 Girls at Fyfield. (2) Day Open Air School, Crosby Road, for 60 Girls. (3) Ten allocated beds for Girls at the Ogilvie School of Recovery, Clacton-on-Sea. (4) Two Holiday Camps (Boys and Girls) during the Summer Vacation at the Seaside.
- (15) Artificial Sunlight Treatment at the Balaam Street Children's Hospital.
- (16) Class for Stammering Children.
- (17) Medical Inspection of Special Defective Children at the two Special Schools and two Deaf Centres.
- (18) Medical Inspection of Scholarship Children at the two Higher Elementary Schools.
- (19) Medical Inspection of Pupils, Bursars, and Scholars at the two Secondary Schools.
- (20) Medical Inspection of Junior Technical and Art Classes at the Municipal College.
- (21) Medical Inspection of St. Angela's High School for Girls.



- (22) Medical Inspection of Pupils at the West Ham High School for Girls.
- (23) Examination of Children attending Centres for the Deaf by Specialist Aural Surgeon.
- (24) Examination of Referred Pupils from Continuation Schools and Juvenile Unemployment Centres.
- (25) Work in conjunction with N.S.P.C.C. as occasion arises.

## (5) The Findings of Medical Inspection.

### (a) UNCLEANLINESS.

To each of the five areas into which the Borough has been divided for the purpose of administration as before mentioned, is attached a Special Duty Nurse, who concentrates on cleanliness surveys in each school, in rota. The dirty and verminous children are followed up at their homes until clean. A certain number, with the parents' consent, are cleansed at the Clinics.

The following figures give a brief resumé of the work done and the findings:—

Number Examined	Ova	Ova and Pediculi	Body Pediculi	Head and Body Pediculi	Sores	Dirty
60616	3696	888	64	29	201	165

The percentages for head and body vermin are respectively 1.46 per cent. and .105 per cent.

Number of Home Visits ... .. 2599

Number of Children visited at School ... 7381

Conditions remedied during the year under Cleanliness scheme:—

Defective Clothing	...	...	...	22
Unclean Heads	...	...	...	971
Unclean Bodies	...	...	...	84
Skin Diseases	...	...	...	19

No children were cleansed under Section 122 of the Children Act, but 109 heads were cleansed at the School Clinics by the Nurses.

### (b) MINOR AILMENTS

Various minor affections common in school children are included under this heading, such as Impetigo, various Skin Diseases, Sore Eyes, Discharging Ears, and minor first aid cases. A few of these are discovered at School Medical Inspection, but by far the greater number are brought forward by the teachers, and sent to the Minor Ailments Clinic.

Columns 2 and 4 of Table II. in the Appendix give the findings among the Routines and Specials respectively.



(c) ENLARGED TONSILS AND ADENOIDS.

At Routine Inspection 1,135 cases were referred for operative treatment, and 524 among the Specials.

(d) TUBERCULOSIS.

Routine and Specials, Pulmonary—with definite signs ...	44
Suspected ... ..	85
Other Forms of Tuberculosis ...	24

(e) SKIN DISEASES.

Excluding Ringworm there were 179 cases among the "routines" requiring treatment and 3,918 among the "specials." There were 54 cases of Tinea Tonsurans (Head Ringworm) and 160 on the body, requiring treatment.

(f) EXTERNAL EYE DISEASE.

This type of disease includes Blepharitis, Conjunctivitis, Corneal Ulcers, etc. They usually connote eye-strain and debility (i.e. Blepharitis) or unhygienic surroundings. Table II. gives the findings, which in the case of routines amount to 124, or .7 per cent.

(g) VISION AND SQUINT.

At Routine Inspection 1,235 cases were referred for refraction and 222 for Squint, which amounts to 8.3 defective vision not already adequately provided for. In addition there were 953 specially selected cases.

(h) EAR DISEASE AND DEAFNESS.

The testing of hearing is part of the routine examination of every child. There were 62 deaf children among the routines and 99 among the Specials.

(i) DENTAL DEFECTS.

The teeth are examined by the School Doctors as a matter of routine, and all defects referred for treatment. 242 Routines and 24 Specials were so referred.

A special Dental Inspection is made of all children recommended for the Open Air Schools at Fyfield, and Crosby Road, and the Ogilvie School of Recovery, Clacton. Defective teeth are put in order before admission.

### (i) CRIPPLING DEFECTS.

Marked crippling defects are seldom found among the Elementary School children, having been previously segregated out at the Special Schools. This may be done before school life, on first admission to school life, or at the examination of Exceptional children, which occurs annually.

Quarterly medical examinations are carried out at the Special Schools for the admission of crippled children. Certain children already on the roll are examined at the same time re fitness for continued attendance or return to elementary schools.

There are, at present, many cases awaiting admission to the Special Schools, for which there is no accommodation.

The following Table gives an analytical classification of all the children who were due for presentation at the four Admission examinations at the two Special Schools during the year 1930.

#### Cases Recommended for Admission to Special Schools.

	Boys	Girls
Mental Defectives ... ..	33	19
Physical Defectives ... ..	16	15
	—	—
	49	34
	—	—

#### Cases not Admitted to Special Schools.

	Boys	Girls
Unfit for School, M.D. ... ..	1	—
Unfit for School, P.D. ... ..	4	4
Recommended for Open Air School ... ..	2	—
To continue, return or have trial at Elementary School ... ..	19	19
Recommended for Deaf Centre ... ..	2	—
Postponed for further examination ... ..	12	16
*Absentees from Medical Examinations ... ..	30	25
Notified to Local Authority (through admission examination) ... ..	11	6
	81	70
	151	

\* Every absentee is followed up by a special Nurse. Absence is often due to the fact that the parent objects to any examination being made in regard to mental defect.



(k) NUTRITION.

There is a considerable reduction in the number of badly nourished children in the Borough. The free meals and the supply of the morning drink of milk at the schools is coping admirably with the question of under-nourishment, and although quite common in the earliest years of medical inspection, really bad cases are now practically unknown.

Table II. shows 272 cases requiring treatment and 21 cases under observation, giving a percentage of 1.6 for Routines.

**AVERAGE HEIGHT AND WEIGHT, 1927—1930.**

		HEIGHT.					
		1927.		1930.			
Age	Number Examined	Average Height in inches.		Number Examined		Average Height in inches.	
Boys							
5	1554	...	41.3	...	1387	...	40.9
8	2166	...	47.5	...	2744	...	47.9
12	2278	...	55.0	...	1718	...	55.3
Girls							
5	1525	...	41.1	...	1455	...	41.2
8	1976	...	47.3	...	2581	...	47.7
12	2214	...	55.7	...	1611	...	55.9

		WEIGHT.					
		1927.		1930.			
Age	Number Examined	Average Weight in lbs.		Number Examined		Average Weight in lbs.	
Boys							
5	1544	...	41.1	...	1387	...	40.2
8	2166	...	52.0	...	2744	...	54.1
12	2278	...	75.7	...	1718	...	76.7
Girls							
5	1525	...	38.9	...	1455	...	38.9
8	1976	...	51.0	...	2581	...	53.3
12	2214	...	76.2	...	1611	...	78.9

**(6) Infectious Disease.**

There has been no school closure during the year from infectious diseases.

The following Table gives an analysis of the cases entered in the School Diseases Register during the year:—

**Exclusions during 1930:**

Impetigo	...	...	...	...	52
Scabies	...	...	...	...	97
Other Skin Diseases	...	...	...	...	42
Conjunctivitis	...	...	...	...	5
Verminous	...	...	...	...	60

Blepharitis	...	...	...	...	...	5
Mumps	...	...	...	...	...	32
Chorea	...	...	...	...	...	3
Enlarged Glands	...	...	...	...	...	12
Chicken Pox	...	...	...	...	...	11
Tonsillitis	...	...	...	...	...	2
Scarlet Fever	...	...	...	...	...	1
Diphtheria	...	...	...	...	...	1
Tuberculosis	...	...	...	...	...	119
Tinea Tonsurans—						
Treated by X-Rays	...	...	...	...	...	28
Treated at Clinic	...	...	...	...	...	19
Tinea (Body)	...	...	...	...	...	3
Other Defects and Diseases	...	...	...	...	...	14
Total						506

Total number of children involved : 473.

Exclusions on account of Small Pox were dealt with through the Public Health Department.

### (7) Following-Up.

At the time of Medical Inspection a following-up card is made out for all children requiring treatment for any defects found. If the case is not one requiring Clinic or Hospital treatment the child is followed-up by home visits made by one of the School Nurses.

If the treatment required is beyond the scope of domestic measures the family Doctor or Hospital is advised. Both home and school visits are made in the course of following-up and the case is not relinquished until adequate improvement is obtained.

Children requiring new glasses are followed up by one of the School Nurses attached to the area, until glasses are obtained, and these are re-inspected by the Doctor within three months.

Cases of recovery from Ringworm treated by X-Rays are re-inspected at the Clinics.

All cases recommended for treatment, and those recommended for observation only, form the basis of the Doctor's re-inspection which takes place at a subsequent visit to the school.

The following Table gives a summary of work of the Nurses, in the process of following-up during the year:—

Total number of children visited at home or school	...	21478
Total number of hours spent by Nurses in visiting	...	3757
Number of Re-inspections by School Doctors of		
Elementary school children	... ..	7966



## (8) Medical Treatment.

### (a) MINOR AILMENTS.

There are a good many minor ailments among school children for which the poor parents in this Borough will not seek medical aid from a private Doctor or Hospital. For such, the Clinics are provided and Head Teachers are empowered to send all such children who fall into this category to the School Clinics by means of the Clinic attendance cards which are provided for the purpose.

These minor ailments include such conditions as sores, slight skin affections, impetigo, eczema, scabies, sore eyes and minor cuts and bruises, also slight ear trouble and ringworm.

Table IV., group 1, gives the amount of treatment undertaken at the School Clinics, as compared with that undertaken privately.

### (b) TONSILS AND ADENOIDS.

Arrangements have been made for the operative treatment of these conditions with the following Institutions:—

- (1) Queen Mary's Hospital, Stratford.
- (2) St. Mary's Hospital, Plaistow.
- (3) The Children's Hospital, Balaam Street, Plaistow.

All cases are previously examined and recommended by one of the Assistant School Medical Officers, and a voucher is given on the appropriate Hospital. The child is also re-inspected after operation.

During the year 1,243 operations were performed under the Authority's scheme and 58 by private practitioner or otherwise. One hundred and twenty-two cases received non-operative treatment, making a total of 1,423.

The parent's consent is always obtained before an operation is undertaken.

### (c) TUBERCULOSIS.

Treatment of this condition is not undertaken by the Education Committee, but cases are notified, on discovery, to the Medical Officer of Health, and then dealt with under the Council's scheme for the treatment of Tuberculosis. The School Doctors refer suspicious cases to the Tuberculosis Officer by a special card, for examination and report. By this means pre-tuberculous cases are kept under observation, and can receive any requisite preventive treatment.

The number of cases so referred to the Tuberculosis Officer during the year was 47.

Provision is made for Institutional treatment of tuberculous children unfit for school life under the above-mentioned scheme of the Council.



## **Tuberculous Children (out of school) having Institutional Treatment.**

Langdon Hills Children's Sanatorium	...	...	40
Whipps Cross Hospital	...	...	2
Heritage Craft Schools, Chailey	...	...	5
Sir William Treloar's Home, Alton	...	...	7
Seven Oaks Hospital for Hip Diseases	...	...	5
Alexandra Hospital	...	...	7
Princess Mary's Home, Margate	...	...	4
Royal National Orthopædic Hospital, Stanmore	...	...	1
St. Vincent's Cripple Home, Pinner	...	...	4
St. John's Home, Clewer	...	...	1
Children's Hospital, Cold Ash, Newbury	...	...	1
Victoria Homes, Margate	...	...	1
New Royal Bathing Hospital, Margate	...	...	1
St. Helen's Convalescent Home, Hastings	...	...	1
Child's Home and Sanatorium, Harpenden	...	...	1
Sunshine Home, Shoeburyness	...	...	1
Cripple Hospital, Brockley Hill	...	...	1
Shaftesbury Homes, Hastings	...	...	3
Warwickshire Orthopaedic Hospital	...	...	1
St. Martin's Hospital, Pyrford, Surrey	...	...	2

In addition there were 23 Tuberculous out-of-school cases at the end of December, 1930.

### **(d) SKIN DISEASES.**

The majority of skin diseases have already been included under the term "minor ailments," and their treatment falls under the arrangements as set out under that heading. There is one skin disease however which requires special mention, and that is Ringworm of the scalp. This condition is dealt with by arrangement of the Local Education Authority with (1) Dr. A. E. Kennedy (2) The London Hospital. The cases are seen first by one of the medical staff and, after treatment, are re-inspected before re-admission to school.

Naked eye diagnosis of this condition is not always reliable, so that as a rule the hair is examined microscopically before the diagnosis is confirmed.

During the year 28 cases of Tinea Tonsurans (Head Ringworm) out of 53 were treated by X-rays, and 151 cases of Ringworm of the body, were treated at the Clinics.

A total of 119 cases of Scabies were also treated at the Clinics.

### **(e) EXTERNAL EYE DISEASES.**

These comprise sore eyes, blepharitis, slight conjunctivitis, styes, corneal ulcers. Table IV (1) shows that 1,028 such defects were treated at the Clinics, 45 being treated by private endeavour.



#### (f) DEFECTIVE VISION.

This is an important defect and its adequate correction calls for skilled treatment. The Authority have arrangements with (1) Dr. G. A. Troup (2) Mr. E. C. Arnold, F.R.C.S. to undertake this work.

Cases of Defective vision are discovered at Medical Inspection, by teachers, by parents, and at the Clinics. In the first place they are all examined by one of the Medical Staff and then referred for refraction. All cases are re-inspected within three months to see if the glasses are suitable. There is a scheme whereby glasses are provided at a reduced rate, or free, in cases of necessity.

The following figures set out the work of the Ophthalmic Surgeons for the year :—

Cases referred to Ophthalmic Surgeons...	3433
Number attended ... ..	2901
Percentage attendance ... ..	84.5
Glasses ordered ... ..	2795
Number of Clinic Days ... ..	179

Table IV, Group II, gives the figures for the Elementary Schools.

#### (g) EAR DISEASE AND DEAFNESS.

These diseases are usually treated at the Clinics as minor ailments. Parents will not as a rule take their children to have the ears syringed for wax, and running ears involve long and expensive treatment for poor parents.

Minor ear defects to the number of 844 were treated at the Clinics, and 64 treated privately. See Table IV, Group I.

The educational treatment of deaf children is provided for at the two Deaf Centres—Water Lane and Frederick Road, with places for 40 and 44 deaf mutes respectively. Arrangements have been made for the pupils at these Centres to be examined annually by an expert Aural Surgeon.

#### (h) DENTAL DEFECTS.

Dental defects found at Medical Inspection, such as caries and septic gums, are referred to the School Dentists as special cases, if falling within the scope of the Authority's dental scheme, otherwise, with a few exceptional cases, they are referred for Hospital or private treatment.



The Dental scheme as approved by the Board at present comprises the examination and treatment of all children of the 6—8 year period, inclusive. "Specials" of an urgent nature are also treated.

All candidates for the Open Air School at Crosby Road or at Fyfield, or the Ogilvie School at Clacton have their teeth attended to and mouths put in order before entering the School, as also do children now due to go to the Summer Holiday Camps.

There are two Clinics at Stratford (Mr. Dick and Miss Gubb), one at Rosetta Road (Miss Marsden), one at Swanscombe Street (Mr. Percy), and one at Balaam Street (Mr. Heywood).

Miss Marsden and Mr. Heywood have each been allotted an area of schools in which to inspect and treat children of all ages, as suggested by the Board of Education.

The following figures for the year show the amount of work done :—

22883 children inspected.  
3706 "Specials."  
12700 found to require treatment.  
10101 given treatment.

The following remarks and comments are abstracted from the individual reports of the Dental Surgeons :—

Mr. Percy reports—

Owing to the number of Special cases sent from the Schools, also the Fyfield and Crosby Road children, it has not been possible to treat all those that I selected for treatment at the Routine Inspection. The Head Teachers naturally must obtain relief for those suffering pain, for no child can study in that condition. However, now that more Dental Surgeons have been appointed this matter can better be coped with.

At several schools it has not been possible to be accommodated with a suitable room, and the Head Teacher's private room has had to be used, and this has caused much inconvenience, especially as the light has been poor for this kind of work. At one school only is there a special room for the inspection of the children.

The Head Teachers have again given me every help and support, often at great inconvenience to themselves, and I thank them accordingly.

Mr. Dick reports—

In reviewing the work for the year there is little variation from the previous records. The amount and class of work found necessary appears to be much the same.



I would point out that the incidence of cleft palate is not now so frequent, and one ventures to suggest that the conditions prevalent during the late war were directly responsible for a marked increase in the occurrence of this oral malformation.

The percentage attendance at the Clinic as the result of routine inspection during 1930 shows a slight decrease, but still remains good.

The parents on the whole show an appreciation of the work done in that they attend well with the children for treatment as the result of re-inspection.

Special cases continue to cause inconvenience by interrupting routine work, and I would urge Head Teachers to send as few as possible, in fact only those which they deem to be really urgent.

I have again to thank the Head Teachers for their kindly co-operation, which greatly facilitates the work of inspection in the Schools.

#### Miss Gubb reports—

The Dental treatment during the year 1930 has been carried out as in previous years. The annual routine inspection of each School being followed up by treatment at the Clinic, if required.

The average attendance has been well maintained, and every effort has been made to re-inspect and where necessary re-treat all children who have been previously seen and treated, as well as taking in a new six year old group each year.

Many of the parents are beginning to realise and appreciate the benefits of regular inspection and treatment, and show a good deal of interest in the Dental condition of their children.

On the whole there is a slight improvement in the general oral conditions, but only very slight.

Some few cases have been referred to the Royal Dental Hospital for regulation work and appliances, with satisfactory results.

The valuable help and co-operation of the Head Teachers is of great assistance, and I would like to take this occasion of thanking them for their very kind help during the year.

#### Mr. Heywood reports—

In reviewing the attendances at the Clinic during the past twelve months it is necessary to separate those who needed treatment by extraction from those children with saveable teeth.

In the former case the percentage of attendance has been, on the whole, good, though even here I have found some body of opinion among the parents that "the first teeth do not matter at all"—an impression extremely difficult for the dentists to remove.



But it has been with those children who needed conservative treatment that the parents have shown reluctance to accept the treatment offered, especially when the saving of the second temporary molars has been concerned, while it has not been infrequent for consent to be refused for the filling of the permanent molars.

I am, however, hopeful that the Clinic will, in time, carry out its own propaganda, and that eventually conservative treatment will be eagerly accepted.

I wish to take this opportunity of thanking Head Teachers who have shown me so much kindness and courtesy.

Miss Marsden reports—

In reviewing the work for the year, approximately the same number of children have accepted dental treatment as in 1929.

There is a great amount of treatment required, and many parents are not willing for their children to have extensive treatment (especially the younger children of age 4—6 years), tending to bring them only when they have toothache.

Although quite a good percentage of conservative treatment has been done as compared with last year, there is a great deal of prejudice against it to be overcome—parents preferring extractions.

Many of the Head Teachers have been very good in talking to the children and persuading them to accept dental treatment.

## SUMMARY OF WORK AT THE SCHOOL CLINICS.

The four School Clinics serving the Borough, are as follows:—

- (1) Stratford Clinic, 84 West Ham Lane,  
Drs. \*Skerrett and Thomas.
- (2) Balaam Street Clinic, Plaistow—serving two areas.  
Drs. Lupton and Borland.
- (3) Swanscombe Street Clinic, Canning Town.  
Dr. Powrie.
- (4) Rosetta Road Clinic, Custom House.  
Dr. Furniss.

\* Deceased.

Each Clinic serves a special area of the Borough, and a Nurse is always in attendance during school sessions. The Doctors attend two or three sessions per week, as required.



Certain defects found at routine inspection are referred to the Clinics for treatment or for further examination or observation. The Clinic at Stratford includes two Dental Clinics, and those at Balaam Street, Rosetta Road, and Swanscombe Street each have one Dental Clinic.

Following is a summation of the Medical cases attending the four Clinics during 1930:—

New Cases Admitted	Total Attendance	Total Discharged
15919	60945	15225

The above figures do not include the work of the Ophthalmic Clinic, which appears separately. Each Clinic also acts as an Inspection Clinic, where cases are seen for further examination or kept under observation.

## (9) Open Air Education.

(a) Opportunity is sometimes taken when weather permits of holding classes in the playground. Physical exercises, drill and games are taken in the open air whenever possible.

(b) School journeys to places of educational interest are undertaken during the Summer months.

(c) School Holiday Camps during the Mid-summer Holiday are now an established institution. Their value continues to be increasingly manifest. During 1930, 266 boys attended a School Holiday Camp at Shoeburyness for a fortnight, and at Dymchurch Camp 218 girls attended for a similar period. The selected children were all previously medically inspected and dentally examined by the staff, special regard being paid to cleanliness, suitability and freedom from contagion. The Camps were visited by a special Committee and one of the School Medical Staff.

Extracts from Reports by Mr. T. Taylorson and Miss L. P. Wise in connection with the School Camps held at Shoeburyness and Dymchurch during the Summer vacation, 1930, will be found in the Appendix to this Report.

(d) Four schools hold classes during the warmer months in the open air on the flat roofs provided, and certain schools hold classes in the neighbouring parks and recreation grounds.

(e) There is one Day Open Air School at Crosby Road for 60 girls from the age of 7 years upwards. The cases are recommended by the School Medical Staff from their findings at Medical Inspection. During the year 37 girls were admitted and 50 discharged.



The children are re-examined prior to admission. The scholars are also periodically examined, and many of them attend a neighbouring Clinic. A long period of attendance is usually required, as the home influences very often detract from the benefit that would otherwise accrue. The children have the advantage of good meals, morning milk, and plenty of rest, as well as lessons in an open air environment. They also benefit by spray baths, breathing exercises and handkerchief and tooth-brush drill.

There were 67 cases that attended the Clinic for advice, treatment or observation, making 105 attendances in all.

To Miss Howship, who is very zealous in the interests of the children, I am indebted for the following report on the School:—

The year 1930 has been an encouraging one, notwithstanding some changes and difficulties. Almost every child has benefited to a remarkable extent for being here. Good food, rest and freedom from worry have all played their useful part in changing feeble children into girls who can take a healthy share in the work around them.

The parents are really grateful for the improvement, and it is felt that the insistence on cleanly habits and a cheerful outlook may have an influence even wider than the school itself, spreading to the homes to which the children return daily.

In previous years the entire absence of heating in the school has been severely felt in the depth of winter. This year we have four large "Ferranti" Radiators in the Hall. These when in use raise the temperature of the room from 4 to 10 degrees. The variation is accounted for by the varying severity of the wind. The glowing effect of these radiators has a definitely cheering effect in the otherwise dull room. On foggy and intensely cold days it is possible to accommodate all the scholars in this room for varied occupations.

The Garden, as before, plays a most important part in restoring the girls to normal health. It gives not only healthy exercise, but a sense of power and self-respect. This is most valuable to girls whose frequent absence from ordinary school has placed them at a disadvantage among their stronger companions.

The Old Students' Reunion early in July was very successful. Eighty-three guests, old scholars and their friends,, enjoyed a garden party. The girls have not only maintained their healthy appearance, but in the majority of cases have continued to improve.

In October our Crockery needed replenishing. Coloured cups, saucers and plates were provided instead of white. These have been a source of joy and cheer all through the Winter.

We have felt very keenly the loss of our genial Medical Officer, Dr. Frank Skerrett. He was a friend to children and staff for five years, and his memory will always be an inspiration to kindness and sympathy.

The Head Teacher was ill from the end of October, and unfortunately absent for the rest of the year.



### Some Cases dealt with during the Year.

- A. Aged 7. A very small girl for her age. At first this girl wept at every meal. The sight of food really sickened her. She was patiently fed with tiny portions. As strength increased, smiles came instead of tears, and now she can eat without persuasion a moderate meal.
- B. Aged 8. A frightened child, who would not come to school without her mother, nor answer when spoken to. In three weeks she ventured to say "Hullo!" Then she began to play with other children. In four months' time she was sufficiently recovered to return to the ordinary school.
- C. Aged 13. This girl has digestive trouble.. When first she came she could not play with other children nor eat without weeping. She can now, after four months, answer questions intelligently, and play in a normal fashion. She goes about cheerfully, and is much improved in general health.
- D. Aged 13. One of the most helpless children we have had in the school. Her nerves were so weak that dental treatment had to be deferred. A year ago she had to be brought in by her mother every morning. This girl is now a prefect. Dental treatment is completed. She helps the younger children very nicely. She can take messages, and generally conducts herself like an ordinary schoolgirl.
- E. Aged 8. This child walked very badly, and was found to have flat feet. She was sent for treatment to the Children's Hospital, Balaam Street, and practised remedial exercises at school. Her feet are now cured. She continues the exercises and walks quite well.

(f) The Local Authority retains ten beds at the Ogilvie School of Recovery, Clacton-on-Sea. The selected cases are delicate girls found at Medical Inspection, or notified by the Head Teacher to the School Medical Officer. The children are examined prior to admission, and periodic reports are received from the school. During the year three girls were admitted and eight returned, all considerably benefited.

The Authority has a Residential School for 80 Boys and 60 Girls, situated at Fyfield, Ongar, Essex. This School provides all the essentials for out-door education, comprising fresh air, abundant food, ample rest, physical exercises and games in the open. The children are selected by the School Medical Staff, and examined before admission. They are also visited by an Assistant School Medical Officer once a fortnight, when all the boys and girls are re-inspected, and height and weight noted.



During the year 154 boys and 97 girls were admitted, and 165 boys and 48 girls discharged. The discharged cases are re-inspected a few months after leaving the Institution, to see if the improvement is maintained. All candidates for Fyfield have their teeth put in order, and any necessary operation on the throat performed prior to admission.

Improvement as a rule shows itself soon after admission, owing no doubt to a better régime of hygiene obtaining than exists at their homes. A local practitioner, Dr. David, is called in for emergencies or sudden illness, when they arise.

Out of 201 cases sent for re-inspection following their discharge from Fyfield, 40 did not attend owing to various reasons. Out of the 161 examined, 129 showed continued improvement, whereas 32 had had inter-current ailments, and their present condition was not considered so satisfactory.

The following is a brief account of the daily routine at the School :—

The children rise at 7 a.m., wash, clean boots, and are served with breakfast at 8. Then comes inspection, and any necessary attention by the nursing staff. From 9.10 to 11.50 a.m., and from 2.40 to 4.35 p.m. the children attend classes under properly qualified teachers, conducted in classrooms specially constructed for open-air school work. These classrooms are capable of being opened to the air on three sides, and are fitted with a hot water heating system for use in very cold weather. Under suitable conditions classes are often held outside in a meadow or under the shelter of some trees.

Dinner is served at 12, and this is followed by the "Rest" of 1½ hours, which is taken on a special chair in the large open-sided rest-room, under the supervision of one of the nurses. The children are bathed twice a week, and great attention is given to the cleanliness of the teeth and personal hygiene generally.

The food served is ample in quantity and of the best quality, and includes fruit and fresh vegetables brought daily from the school gardens.

On arrival at the School each child is well and comfortably clothed, the outfit including good boots or shoes, woollen under-clothing, woollen jumpers, flannel suits for boys and blue gym frocks for girls, and, for winter use, heavy reefer overcoats.

There is a large playing field where cricket, football, netball, and other games are played; while on winter evenings entertainments are given, and indoor games and a good library are made use of.

After a light supper the children retire to the dormitories about 8 p.m. and, as a result of a busy day under healthy conditions, are soon sleeping soundly.



## WEEKLY MENU.

	<b>Breakfast.</b>	<b>Lunch.</b>	<b>Dinner.</b>	<b>Tea.</b>	<b>Supper.</b>
Monday	Tea, Bread and Butter, Jam.	Cocoa	Cold Meat, Potatoes, Suet Pudding.	Tea, Bread and Butter, Dripping. (Lettuce in season.)	Cocoa or Milk
Tuesday	Cocoa, Porridge, Bread, Marmalade.	Milk	Irish Stew, Stewed Fruit or Rhubarb, and Custard.	Tea, Bread and Butter, Jam.	Lemonade
Wednesday	Tea, Egg (boiled or scrambled) Bread, Jam.	Lemonade	Meat Pudding, Cabbage, Milk Pudding.	Tea, Bread and Butter, Banana or other Fruit.	Cocoa
Thursday	Cocoa, Fresh Herrings, Bread, Marmalade.	Cocoa	Stewed Steak, Onions, Potatoes, Jam Roll.	Tea, Bread and Butter, Bun.	Lemonade
Friday	Tea, Porridge, Bread, Jam.	Milk	Boiled Fish, Potatoes, Boiled Pudding.	Tea, Bread and Butter, Jam.	Cocoa or Milk
Saturday	Cocoa, Porridge, Bread, Marmalade.	Lemonade	Lentil Soup, Suet Dumplings Potatoes, Milk Pudding.	Tea, Bread and Butter, Egg or Sardines.	Cocoa or Milk
Sunday	Cocoa, Bread, Jam.	—	Joint, Cabbage, Potatoes, Stewed Fruit and Custard.	Tea, Bread and Butter, Cake.	Lemonade

Grape nuts are substituted for porridge in warm weather.

Bread and butter supplied at supper each evening.

Breakfast and tea frequently supplemented by apple, orange, etc.,  
or fresh fruit from school gardens.

All milk used is Grade "A".



## (10) Physical Training.

There is no organiser of physical training for the Elementary Schools, but drill and games and physical exercises are supervised by individual teachers in various schools.

There is a well organised Sports Association, composed of members of the Education Committee and Teachers, who organise and superintend various sections of games, such as swimming, football, boxing, netball, and cricket.

Scholars for whom an opinion is required as to fitness to participate are referred for examination. During the year some 153 boys were examined, four being found unfit for various reasons.

## (11) Provision of Meals.

West Ham being largely a necessitous area, the Authority have always regarded the provision of meals to needy and under-fed children as one of their most important duties. The scheme has now been in operation several years, and is continued over the school holidays. At present there are ten Dining Centres under the superintendence of Miss Anderson. The Centres are clean and well managed; they have been provided with First Aid boxes, and paper handkerchiefs are supplied for children attending the Centres.

The Menus, which are arranged by the Superintendent and approved by the School Medical Officer, are drawn up on dietetic principles. Full advantage is taken of each season's supply of fresh fruit and vegetables, this giving the children every possible variety. Special attention is given to the very young children attending the School Dining Centres, and the requirements of the children at the Knox and Grange Road Special Schools, and the Crosby Road Open-air Day School are fully studied.

The following figures summarise the extent of the undertaking for the year under consideration:—

	Breakfasts	Dinners
School Dining Centres ... ..	252,147	469,543
Average number of children fed per week: 1,709.		

## (12) School Baths.

School baths are provided at two Elementary Schools, Gainsborough Road and Rosetta Road. Spray baths are provided at the Special School at Knox Road, the Fyfield Open Air School, and the new South Hallsville School.

Selected children, with the consent of parents, are conducted in rota to the Corporation Baths at Balaam Street, Jupp Road, Fen Street, and Silvertown. This takes place in school hours.

Facilities are also afforded for swimming instruction at the Beckton Road Open Air Bath. Men and women instructors are engaged for training and supervision.



The number of children who attended the School Baths under the Committee's scheme during the year is as follows:—

	Boys	Girls
Balaam Street ... ..	4796	4572
Jupp Road ... ..	5291	2773
Silvertown ... ..	1494	1289
Fen Street ... ..	3851	2548
	<hr/>	<hr/>
	15432	11182
	<hr/>	<hr/>

### (13) Co-operation of Parents.

The co-operation of parents continues to be an essential factor in the success of the School Medical Service. Without such co-operation and interest a good deal of work would be futile. It is becoming increasingly recognised that the good work of the Education Committee is purely in the interest and welfare of the child, and advantage is largely taken of it by parents generally. There were a few objections this year; the following schools show cases where parents for various reasons objected:—

School	Boys	Girls	Infants
Balaam Street ... ..	2	—	1
Bridge Road ... ..	—	—	1
Cave Road ... ..	—	—	1
Credon Road ... ..	—	1	5
Elmhurst Road ... ..	—	—	3
Frederick Road ... ..	1	—	—
Gainsboro' Road ... ..	1	—	1
Godwin Road ... ..	—	4	3
The Harold Senior ... ..	—	3	—
Holborn Road ... ..	2	—	—
Holy Trinity ... ..	2	—	—
Napier Road ... ..	—	1	—
Odessa Road ... ..	2	4	2
Regents Lane ... ..	—	1	—
Stock Street ... ..	—	1	—
Silvertown ... ..	—	—	2
St. Andrew's Senior			
Mixed ... ..	—	1	—
St. Antony's ... ..	2	—	—
St. James ... ..	—	1	1
St. Paul's ... ..	—	—	1
Upton Cross ... ..	—	—	2
Upton Lane ... ..	1	—	1
Water Lane ... ..	—	1	1
West Ham Park ... ..	1	1	9
Whitehall Place ... ..			
Junior Mixed ... ..	—	—	4

The total number of parents or guardians present at the Elementary School Examinations (Routine and Special) was as follows :—

6,891 for Boys, 6,862 for Girls, making a combined percentage attendance of 71.1.

### (14) Co-operation of Teachers.

The continued co-operation of the Head Teachers is a great factor in the School Medical Service. The teachers help in several ways. They prepare the lists for examination and select "specials" to be examined. They urge the attendance of parents, and render many services in connection with the Nurses' visits in the process of following-up. They also draft special cases to the Clinics for minor ailments, and interview many parents on the subject.

Their scope in treatment is of course limited to seeing that a child attends regularly the examination and Clinic, and urging parents to persist in treatment, or otherwise obtain treatment where advised.

They also put into action those special recommendations of the Doctor after his visit of routine examination.

In many matters connected with the School Medical Service valuable co-operation has been given by the Committee's Inspectors, Mr. E. W. Hodges and Miss C. M. Bott.

The following list gives defects or recommendations notified to Head Teachers, which have a bearing on the educational career of the child :—

Vision, 1,608	Deformities, 12
Physical Exercises, 58	Teeth, 2
Defective Hearing, 73	Mental Condition, 3
Breathing Exercises, 2	Nervous System, 8
Heart (Physical	Skin Disease,
Overstrain), 132	(Verminous, etc.), 6
Speech, 2	Other Defects, etc., 33

### (15) Co-operation of School Attendance Officers.

There is a complete co-ordination between the School Medical Service and the School Attendance Bye-Laws Department, supervised by Mr. G. F. Crane.

The cases concerned involve school attendance, cleanliness, unfitness for school or for employment, and out of school cases.

The School Attendance Officer makes a daily return of all children out of school on medical grounds, and cases of infectious disease are visited by Lady Sanitary Inspectors.



The cases brought to the notice of the Public Health Department by the School Attendance Officer during the year were as follows :—

Measles, 2,571  
Whooping Cough, 440  
Tonsillitis, 283

Chicken Pox, 1,220  
Mumps, 1,115  
Other Diseases, 2,173

## **(16) Co-operation of Voluntary Bodies.**

The following Societies or Associations are in constant touch with the School Medical Department re the welfare of individual children.

- (1) Invalid Children's Aid Association.
- (2) Invalid and Crippled Children's Society.
- (3) Central Association for Mental Welfare.
- (4) National Society for the Prevention of Cruelty to Children.
- (5) The Almoners of a large number of voluntary hospitals.

The first two Societies notify the School Medical Officer of such children coming under their notice who require convalescence or new or altered surgical instruments. The Education Committee assists in the purchase of instruments, or alteration of same.

During the year, 258 school children were sent away for varying periods of convalescence.

During the same period, 33 children were examined, and the parents assisted in the purchase of new Surgical Instruments or alterations to same.

Occasionally the Local Officer of the N.S.P.C.C. renders help in the case of recalcitrant or neglectful parents or guardians.

The Central Association for Mental Welfare interests itself in children of school age who are mentally defective, and also in their after-school welfare.

## **(17) Blind, Deaf, Defective and Epileptic Children.**

(a) The returns of these children are obtained from two sources. The School Attendance Department has a complete list of all out-of-school cases, and of those already placed in various institutions. These cases are notified to the School Medical Officer as they arrive, and are followed up by a Special Nurse. They are also examined (by the Chief Assistant School Medical Officer) to ascertain their fitness for school or otherwise. Some go back to the Elementary Schools, many go to the Special Schools, but the majority are found unfit for school.



The permanent "out-of-school cases" are provided with a special card, and are vouched for from time to time by a Nurse detailed for the purpose. Any changes in their condition justifying re-examination are then brought to light.

Besides the above, an annual census is taken at the end of the year of all exceptional children submitted by Head Teachers. These are examined by the Medical Staff, and cases unfit for the ordinary school are referred for further consideration, i.e. re attendance at Special School.

(b) A Special Nurse is employed following up all mentally defective children who are not in the schools. Briefly, all out of school cases are periodically examined at the four annual examinations to ascertain their fitness for the Special Schools, and followed up at home to urge any treatment advised.

The two After-Care Committees sit to consider the welfare of the children who have recently left the Special Schools or the Deaf Centres.

The following reports have been received regarding children who have left during the year:—

## KNOX ROAD SPECIAL SCHOOL.

### Physically Defective.

- One at home, too crippled to work.
- One working at Picture Frame making.
- One working at Biscuit Factory.
- One working with father (plumber).
- One working at a Laundry.
- One left at age limit (occupation not known).
- One left at age limit (parents moved into country for land work).
- One admitted to Lord Mayor Treloar's Training College (leather work).
- One admitted to Swiss Cottage (blind training).

### Mentally Defective—

- One living at Forest Gate Hospital (working in store).
- One working at Paper Merchants.
- One working at Galvanising Factory.
- One working at Furniture Shop.
- One killed at work (Builder's).
- One a van boy at Sweet Factory.
- Three working at home (helping mother).
- One a Packer at Cornflour Factory.
- One working at Factory (Tin Toys).
- One a Packer at Chocolate Factory.
- One doing daily domestic work.



## GRANGE ROAD SPECIAL SCHOOL.

### Physically Defective—

- Two helping at home.
- Two in and out of jobs.
- One working at Factory.
- One a Messenger at a Cable Works.
- One a "Teaboy" on Housing Estate.
- One Assistant in Drapery Business.
- Two taking one year course in Shoemaking.
- One attending a Continuation School for Drawing and Music
- One selling wood.

### Mentally Defective.

- Three at home.
- Two in and out of jobs.
- Three in Factories.
- One selling wood.
- One helping invalid mother.
- One "washer-up."

The provision at the Special Schools, Grange Road and Knox Road, is as follows:—

			Mentally Def.	Physically Def.
Grange Road	...	...	121	95
Knox Road	...	...	93	83

The places are filled, and many children have to await vacancies. There is certainly room for another Special School in the Borough. Entrance examinations are held quarterly, and cases are seen as they arise, instead of awaiting the next fixed examination.

Work in connection with After-Care Committees consists of

- (1) Interviews with parents and children by Head Teachers.
- (2) Investigations by two After-Care Committees in each half of the Borough.
- (3) Visits of Mr. Tarr, the Juvenile Employment Officer and Secretary of the After-Care Committee.

### BLIND CHILDREN.

The Authority itself has no provision for the education of blind or semi-blind children—a few of the latter attend the Special Schools. The question of Myopic Classes is still under consideration.

The following is a list of Institutions where West Ham children are boarded :—

Ellen Terry Home for Blind M.D. Children, Reigate	1 girl.
Barclay Home for Blind, Brighton	6 girls
Brighton School for Blind Boys	6 boys
East London School for Blind	4 boys, 1 girl
Swiss Cottage for Blind	2 boys
Fountain Mental Hospital	1 girl (M.D.)
Forest Gate Sick Home	1 boy (M.D.)
White Oak School, Swanley	1 boy, 1 girl (defective sight)

Seven blind or partially blind children are not placed.

## DEAF CHILDREN.

The Authority has Deaf Centres at Water Lane and Frederick Road with places for 40 and 44 deaf mutes respectively. These schools are visited annually by an Assistant School Medical Officer, and arrangements have been completed for an annual examination by a Specialist Aural Surgeon.

A few of the cases belong to the partially deaf class, and one or two are aphasic cases. Children from outside areas are admitted by arrangement with the Local Education Authority, when vacant places permit.

### Institutional cases :—

Royal School for Deaf and Dumb, Margate, 3 girls.  
St. John's Institution, Boston Spa, 1 boy.

### After Care Committee Reports of Leavers during 1930 :—

#### Water Lane Deaf Centre.

Three boys, Tailor's Pressers.  
One girl, Waterproof-making.  
One girl, at home owing to ill health.  
Two girls, unemployed.  
One boy, unemployed.

#### Frederick Road Deaf Centre.

One boy, working at Carpentry and Joinery Works.  
One boy, working in Mattress Factory.  
One boy, obtained post in Hardware Stores.  
One boy, at present unemployed.  
One girl at present unemployed.



## EPILEPSY.

Table III. (d) gives a summary of the epileptics found among school children during 1930. Only the severe cases are excluded from school. A number of West Ham epileptic children are boarded out at Institutions as follows:—

St. Elizabeth's School for Epileptics, Much Hadam—1 girl.

Lingfield Colony for Epileptics—1 girl.

Forest Gate Sick Home—3 boys, 3 girls.

Fountain Mental Hospital, Tooting—1 boy.

There are three cases of severe epilepsy out of school (2 boys, 1 girl).

## STAMMERERS.

Throughout the year special classes of six weeks' duration have been carried on at Silvertown, Napier Road, Rosetta Road, and North Street Schools.

The number in each class is about ten, and a continuous waiting list is available from the findings of the annual census of exceptional children.

The classes, which are under the supervision of Mrs. Wardhaugh, have been very successful, and the results have been promising. There were thirteen cases where sufficient improvement was not made during the first Course; these were recommended for repeat Courses.

The children are medically examined before and at the end of the course. During the year 30 boys and 12 girls attended the 1st classes for stammering children, six boys and three girls were taking the 2nd course, one boy and one girl a 3rd course, and one boy and one girl a 4th course.

## (18) Nursery Schools.

The Education Committee erected two Nursery Schools during the year, one in the North and one in the South of the Borough, on sites adjoining Abbey and Rosetta Road Schools. These Schools were opened on August 29th, 1930.

The following are the details of organisation:—

### **Ages of Admission.**

Children are admitted between the ages of 2 and 5 years, in order of application.



### **Hours of Attendance.**

The Schools are open on each school day from 8.30 a.m. to 4.45 p.m.

### **Holidays.**

The holidays are the same as for Elementary Schools.

### **Meals.**

Milk and biscuits are provided during each morning, in addition to a mid-day meal, at an inclusive charge of 1s. 8d. per week, subject to reduction or exemption in accordance with the Council's scale in the case of necessitous children.

The supply of meals is under the direction of the Superintendent of the School Dining Centres.

### **Medical Inspection.**

The children are medically examined on admission, or as soon after as possible. A School Nurse visits at frequent intervals, or daily when necessary. An Assistant School Medical Officer undertakes a monthly medical inspection of all children.

### **Medical Treatment.**

No charge is made for the treatment of minor ailments.

A Blanket is supplied to each child.

The Committee have engaged the services of a Needlewoman to make the children's overalls and other necessary articles.

### **Description of the Buildings.**

The Committee's Architect (Mr. J. H. Jacques) has kindly supplied the following particulars:—

"THE EDITH KERRISON Nursery School is built on what was the School Gardens, at the rear of the Rosetta Road Infants' School; the site adjoins the Beckton Road Recreation Ground, and is secluded and yet easy of access.

"The buildings consist of three large rooms, facing South, to accommodate 40 children each. At the rear of these rooms is a corridor with a Bathroom, two Cloak-rooms and two Offices, easy of access from the main rooms. At right angles to the main rooms are the Head Teacher's Room, the Main Entrance, Kitchen, Store Rooms, Staff Room, and Isolation Room. Around the buildings is a paved space for playground in any weather, with a sandpit, and in front of the buildings, at a lower level than the paved playground, is a grassed playing space. Trees have been planted along the South and East boundaries.



"The buildings are constructed with a steel framework on a concrete base, filled in with studding and weather boarded on the outside, and covered with asbestos sheeting on the inside, the roof being covered with rough boarding and asbestos slabs. The front of the Main Rooms is filled in with glazed framing, most of which can be thrown open, as is also the rear of the rooms backing on the Corridor. The Bathroom has tiled walls, with asphalted floor and is fitted with a small bath and four sink baths, also four lavatory basins. There are also two lavatory basins in each Cloak-room.

"The Domestic Hot Water Supply and Heating are from the basement in the adjoining School Clinic buildings; the Cooking is by gas, and the Lighting by electricity.

"THE REBECCA CHEETHAM Nursery School is built on a site at the rear of the Abbey School, at the end of Village Street, leading off Marcus Street, and is practically the same as the Edith Kerrison School, except that the whole of the Heating, Lighting, and Cooking are done by Electricity."

Medical Inspection is carried out, and the same facilities provided, as in the Elementary Schools.

The following reports have been received from the Assistant School Medical Officers on the medical examination:—

### THE EDITH KERRISON NURSERY SCHOOL.

This School was opened towards the end of August, 1930, and medical inspection was begun the following month. A medical report on this school may conveniently be divided into two sections:

- (1) The examinations at the School.
- (2) The Clinic work.

#### (1) The School Examinations.

The children attending this School have been medically examined each month, and to the end of the year have been seen four times. The numbers so examined and those found to be defective being as follows:

	Number examined		Number defective	
September ...	...	56	...	13
October ...	...	76	...	15
November ...	...	70	...	10
December ...	...	67	...	15

The number of parents present at the examinations was 55, 61, 55, and 53 respectively for the four monthly examinations, the percentage being 84.



### Chief Defects Found to Require Treatment and Observation.

Defect.	Treatment	Observation
Ringworm body ... ..	2	—
Impetigo ... ..	4	—
Other skin diseases ... ..	6	—
Squint ... ..	3	—
Otitis Media ... ..	3	—
Enlarged tonsils ... ..	4	8
Adenoids ... ..	1	—
Enlarged tonsils and adenoids ...	10	—
Oral Sepsis ... ..	24	—
Anaemia ... ..	1	—
Bronchitis ... ..	16	—
Nervous condition ... ..	1	—
Rickets ... ..	2	—
Other Defects ... ..	2	1

**Treatment.** The children found with minor ailments are sent to the Rosetta Road School Clinic (a matter of only a few yards distance).

Cases requiring special treatment are dealt with as in the case of children attending Elementary School.

Thus, certain children are sent for Artificial Sunlight Treatment to the Balaam Street Hospital. Tonsils and Adenoids cases for operation are drafted to any of the three local hospitals. Children requiring dental treatment are sent to the School Dental Clinic at Rosetta Road. Cases of squint are dealt with by the Committee's Ophthalmic Surgeons. Children in need of orthopaedic treatment are sent to the Balaam Street Hospital Orthopaedic Clinic.

All the above facilities have been made use of.

Up to the present the following defects found at the school examinations have been remedied:—

Ringworm body ... ..	1
Impetigo ... ..	4
Other Skin Diseases ... ..	5
Squint ... ..	2
Enlarged Tonsils and Adenoids ...	4
Oral Sepsis ... ..	8
Other Defects ... ..	2

It can be mentioned at this stage that 12 of the children had had their Tonsils and Adenoids removed before they were admitted to the School.

With regard to conditions such as Bronchitis, Threadworms, Anaemia and the like, where special treatment cannot be arranged, suitable advice for home treatment is given to the parent.

There is complete co-ordination between the Headmistress, Miss J. E. Cass and the Clinic Staff, and any child requiring attention is sent to the Clinic, where it is dealt with at once.



A Nurse visits the School once a week for the purpose of seeing that the children are clean and free from infection.

The School has been particularly free from infectious disease. Only four cases, viz. one of Scarlet Fever, one of Diphtheria, and two of Whooping Cough having been reported. This is a good record in view of the fact that at this time of the year infectious diseases are most prevalent, and these children are of the age (2 to 5 years) most liable to contract such diseases.

## (2) The Clinic Work.

The cases treated and those in attendance are as follows:—

Disease.	Treated (Cured)		In Attendance	
Ringworm body ...	...	2	...	2
Impetigo (slight) ...	...	12	...	3
Other Skin Disease ...	...	10	...	5
Blepharitis ...	...	2	...	1
Otitis Media ...	...	3	...	2
Other Ear Disease ...	...	1	...	—
Other Defects and Diseases	12	...	...	4

The "Treated" cases consisted of 34 children with 42 defects. They made 191 attendances, or 5.6 attendances per case.

The "In-attendance" cases consist of 14 children with 17 defects. So far they have made 101 attendances, or an average of 7.2 attendances per case. Several of these cases are almost ready for discharge. From the comparatively large number of cases dealt with, it must not be assumed that the children are in a poor condition. Most of these cases are of a "minor" nature only, the object being to prevent them passing into a more severe or chronic type.

In all this work Miss J. E. Cass has been most keen and helpful, and the medical arrangements seem to be quite satisfactory.

## REBECCA CHEETHAM NURSERY SCHOOL.

The Rebecca Cheetham Nursery School was opened on August 23rd, 1930. Three visits of inspection were made during the remaining part of the year.

### First Inspection.

Number of children examined	...	...	...	40
Number of parents present	...	...	...	35
Percentage of children found defective	...	...	...	10

### Defects Referred for Treatment or Observation.

	Treatment.				Observation.
Unclean body ...	...	1	...	...	—
Malnutrition ...	...	1	...	...	—
Functional heart ...	...	—	...	...	4
Enlarged tonsils ...	...	2	...	...	—
Deformity legs ...	...	1	...	...	—
Other defects ...	...	—	...	...	2

### Second Inspection.

Number of children examined ...	...	...	...	55
Number of parents present ...	...	...	...	50
Percentage of children found defective ...	...	...	...	24

### Defects Referred for Treatment or Observation.

	Treatment.				Observation.
Malnutrition ...	...	—	...	...	4
Unclean head ...	...	3	...	...	—
Impetigo ...	...	1	...	...	—
Otitis Media ...	...	1	...	...	—
Enlarged tonsils ...	...	—	...	...	2
Other throat conditions ...	...	1	...	...	—
Teeth ...	...	—	...	...	14*
Functional heart disease...	...	—	...	...	4
Bronchitis ...	...	1	...	...	—
Deformity legs ...	...	1	...	...	—
Other defects and diseases	...	2	...	...	3

\* Mainly slight dental caries.

### Third Inspection.

Number of children examined ...	...	...	...	38
Number of parents present ...	...	...	...	36
Percentage of children found defective ...	...	...	...	29

### Defects Referred for Treatment or Observation.

	Treatment.				Observation.
Unclean head ...	...	1	...	...	—
Malnutrition ...	...	—	...	...	4
Enlarged tonsils ...	...	2	...	...	—
Enlarged tonsils and adenoids ...	...	4	...	...	—
Otorrhoea ...	...	1	...	...	—
Functional heart ...	...	—	...	...	1



During this period it was arranged that a Nurse was to visit the School once weekly to inspect the children re cleanliness, freedom from infection, etc., and a weekly visit has been made accordingly ever since. It was also arranged that the children of this School should attend the School Dentist for treatment of teeth, the School Clinic for treatment of minor ailments, the School Oculist for treatment of errors of refraction, and that forms be given for the Local Hospitals for operative treatment of enlarged tonsils and adenoids. In this way all treatment available to the Elementary School children was extended to the children of this School.

The general condition of the children was good at the end of the year, although the percentage found "defective" was still high. This was largely due to the number of children who required an operation for removal of tonsils and adenoids. The weather at the end of the year was particularly bad, and the mothers all wished to delay the operation until the better weather. Most of the children have since been satisfactorily operated on.

By the end of the term the organisation had been completed, and was running efficiently, all services being made use of with satisfactory results, which will be embodied in the 1931 report.

I must thank Miss Whittingham for her kind co-operation, which greatly facilitated the work of medical inspection at the School.

There are also two Voluntary Nursery Schools in the Borough which have applied to the Board of Education for recognition, and this is supported by the Education Committee.

Up to the present no statutory medical examinations have taken place in the Schools, but children under 5 years of age for whom operative treatment of tonsils and adenoids is required are referred for the treatment by the Maternity and Child Welfare Department.

## (19) Higher Educational Institutions.

The Institutions referred to here comprise—

- (1) The Municipal College.
- (2) The West Ham Secondary School.
- (3) St. Angela's High School for Girls (Ursuline Convent).
- (4) The Plaistow Secondary School.
- (5) The West Ham High School for Girls.

### MUNICIPAL COLLEGE.

During the year, two examinations were conducted, one for boys and one for girls; at the same time, re-inspection was carried out of those found with defects during the previous year.

Generally speaking, the standard of Physique was quite good, and the chief defect that of vision.

The total sent for medical examination was as follows:—

	Examined	Defects found	Defective Vision
Boys ...	118	45	25
Girls ...	74	30	12
	<hr/>	<hr/>	<hr/>
Totals ...	192	75	37
	<hr/>	<hr/>	<hr/>

Of the above defects, it will be seen that defective vision was the principal factor, and an analysis of the other conditions found shows the remainder to be made up as set out in the following table:—

Skin Disease .....	1	Otitis media .....	1
Defective Hearing .....	1	Enlarged Tonsils .....	8
Other Ear Disease .....	1	Other Throat Conditions...	3
Adenoids .....	1	Heart Conditions .....	5
Defective Speech .....	3	Tubercle of Lung .....	1
Anaemia .....	4	Other Defects .....	5
Deformities .....	2		<hr/>
Blepharitis .....	2		Total ... 38
			<hr/>

Thirty-five students were re-inspected and found to be making satisfactory progress, and all the vision cases (with one exception) to have obtained glasses.

## WEST HAM SECONDARY SCHOOL.

The School is medically inspected twice annually, when Entrants and Leavers are examined. The total number examined during the period of 1930 were 437 Routines and 82 Special cases.

	Boys	Girls	Total
Routines ...	253	184	437

The findings of medical inspection (Chief Defects referred for Treatment) :—

Requiring Treatment, 82.                      Referred for Observation, 9.



The following were the conditions found :—

Skin diseases .....	4	Chronic Otitis Media ...	1
Convergent Strabismus ...	2	Enlarged Tonsils .....	17
Defective Hearing .....	2	Oral Sepsis .....	14
Other conditions (Nose		Bronchitis .....	1
and Throat) ...	4	Other Diseases (not T.B.)	1
Valvular Disease of Heart	1	Other Defects and	
T.B. Lungs (suspected)...	1	Diseases ...	4
Deformities .....	2		—
Defective Vision (chiefly		Total ...	91
Myopia) ...	37		—

Following up takes place by the Nurses, Home and School Visits, and re-inspection carried out by the Doctor.

Instruction in personal hygiene and temperance, physical and breathing exercises are carried out in accordance with the Hand-Book of Suggestions on Health Education (1928).

Medical inspection of the majority of all pupils in Secondary Schools is now a statutory obligation.

Physical Drill for Boys is conducted by Sergeant Pritchard, and for Girls by Miss Newmarch, who give special attention to minor spinal and postural deformities. On the whole, the teeth of the pupils are satisfactory, and show evidence of attention.

Dr. Burness, the Principal, renders all possible help in seeking the physical welfare of all the students.

## PLAISTOW SECONDARY SCHOOL.

This school is now in its fifth year. All the scholars are examined annually.

### Age Distribution of Examinees.

Age	Boys	Girls
10 ...	22	11
11 ...	50	39
12 ...	53	38
13 ...	36	27
14 ...	33	23
15 ...	31	30
16 ...	10	3
	<hr/>	<hr/>
Totals	235	171
	<hr/>	<hr/>
Parents present ...	169	137 = 80%
	= 71.9%	

## Chief Defects referred for Treatment and Observation.

				BOYS.		GIRLS.	
				Treatment.	Observation.	Treatment.	Observation.
Malnutrition	...	...	...	1	—	—	—
Impetigo	...	...	...	1	—	—	—
Other Skin Diseases (Acne)				4	—	3	—
Corneal Opacities	...	...	...	—	1	—	—
Defective Vision	...	...	...	27	6	35	1
Defective Hearing	...	...	...	—	1	—	—
Otitis Media	...	...	...	2	—	1	—
Other Ear Disease	...	...	...	1	—	—	—
Enlarged Tonsils	...	...	...	5	5	6	—
Oral Sepsis	...	...	...	38	—	31	—
Heart Disease (Organic)	...	...	...	1	3	—	3
Anaemia	...	...	...	2	—	7	—
Other Chest Disease							
(not T.B.)	...	...	...	—	1	—	—
Suspected T.B. (Non-							
Pulmonary)	...	...	...	—	—	1	—
Spinal Curvature	...	...	...	7	—	11	—
Other forms of Deformity	...	...	...	3	—	1	—
Other Defects	...	...	...	10	2	2	—

Number of Individual Children referred for treatment: 60 Boys, 57 Girls (excluding Dental Disease).

### Following-up and Treatment.

The same facilities are provided as in the other schools. The Nurse, after Medical Inspection, follows up the cases at the homes or school and the Doctor re-inspects at the school.

Visits by Nurse, 66. Re-inspections : 98 boys ; 90 girls.

#### Treatment.

				Boys	Girls
Nose and Throat (operations)	...	...	...	2	3
Teeth	...	...	...	6	8
Lupus	...	...	...	—	1
Vision	...	...	...	28	34
Scoliosis	...	...	...	7	11
Other Conditions	...	...	...	10	2

Three girls under observation for Vision were at re-inspection referred for treatment.

Mr. Cook and Miss Hobson take the physical drill for boys and girls in this school.

Mr. J. W. Hand, the Principal, takes a great interest in the Medical Inspection, and usually selects special cases for report and advice.



## WEST HAM HIGH SCHOOL FOR GIRLS.

The Medical Inspection in this school is confined to the pupils who reside in West Ham, and does not extend to pupils in the Preparatory Department.

During the year two visits of inspection were made. At the first inspection all new admissions, all children aged 12 years, and a few "Special" children were examined in full. The other children under the age of 15 years were partially examined. At the second inspection all the children were inspected in full.

### Age Distribution of Examinees. (Full Inspection.)

Age					No. Examined
10	...	...	...	...	6
11	...	...	...	...	40
12	...	...	...	...	63
13	...	...	...	...	51 + 2 specials
14	...	...	...	...	37 + 2 specials
15	...	...	...	...	25
16	...	...	...	...	11
17	...	...	...	...	9
18	...	...	...	...	— 1 special

Attendance of parents = 73%

Number of children found defective = 52.

### Age Distribution of Examinees. (Partial Inspection.)

Age					No. Examined
13	...	...	...	...	27
14	...	...	...	...	28

Number of children found defective (vision, enlarged tonsils and carious teeth) = 11.

### Chief Defects Referred for Treatment.

Other Ear conditions, 2.	Uncleanliness (head), 1.
Enlarged Tonsils and Adenoids, 10.	Skin Diseases, 4.
Other Nasal conditions, 1.	Conjunctivitis, 2.
Dental Caries, 23.	Defective Vision, 26.
Other conditions, 10.	Defective Hearing, 4.

The children found defective at the previous inspection were re-inspected at each inspection.

### Treatment.

The same medical services are available for the scholars of this school as for those in the Elementary schools. Vision is treated mainly by the Committee's Oculist, but a few parents prefer to obtain treatment privately. Other defects are treated almost entirely privately in accordance with the desire of the parents.

Recommendations were left with the Principal, Dr. Florence Barnett, re the following conditions :—

Vision, 26.	Physical Exercises
Heart, 3.	(flat foot, etc.), 47.

Dr. Barnett takes a keen interest in the Medical Inspection, and endeavours to get the parents to attend during the examination, and to carry out instructions given.

Special attention is given by Miss Davidge, the Drill Mistress, to children requiring special exercises for slight deformities.

### ST. ANGELA'S HIGH SCHOOL FOR GIRLS.

This School is inspected annually, the inspection, as far as this Authority is concerned, being confined to West Ham scholars, and does not extend to pupils in the Preparatory School.

#### Age Distribution of Examinees.

Age	No. of Girls Examined		
10	...	...	2
11	...	...	15
12	...	...	26
13	...	...	20
14	...	...	23
15	...	...	25
16	...	...	13
17	...	...	8
18	...	...	5
19	...	...	1
			<hr/>
			138
			<hr/>

Parents present, 86.

#### Chief Defects referred for Treatment.

Defective Vision	...	...	...	...	18
Defective Hearing	...	...	...	...	1
Otorrhœa	...	...	...	...	1
Pyorrhœa	...	...	...	...	1
Dental Caries	...	...	...	...	8
Anaemia	...	...	...	...	4
Chorea	...	...	...	...	1
Scoliosis	...	...	...	...	1
Other Deformities	...	...	...	...	3
Other Defects	...	...	...	...	6
					<hr/>
					44
					<hr/>



The same Medical Services are available for Scholars of this School as for those in the Elementary Schools. Vision is treated mainly by the Committee's Oculist. Fourteen of those found defective attended the Clinic, and four having attention privately.

Recommendations and advice were left with the Principal and Drill Mistress with reference to the following :—

Defective Vision	...	...	...	...	18
Special Exercises, for Flat Foot, etc.	...				24
Heart Disease	...	...	...	...	1

Mother Mary Angela takes the keenest interest in the Welfare of the Scholars, and urges the parents to carry out the recommendations given. Miss Barrington, the Drill Mistress, is present at the inspection, and gives special exercises to those scholars who require them.

## (20) Continuation Schools.

There are three Continuation Schools in the Borough: (1) The Shakespeare Institute; (2) The Livingstone Institute; (3) The Faraday Institute.

Scholars are not examined at the schools on account of the practical difficulties, but the Heads of these Institutes are empowered to refer cases to the School Medical Officer.

## (21) Employment of Children and Young Persons.

The employment of school children out of school hours is subject to certain restrictions governed by Bye-Laws under Section 9 of the Education Act, 1921. These restrictions limit the age at which a child can commence such work, and the hours of employment. The child must also be medically examined and a certificate given that the work will not injure the child's health or prejudice its education.

The greater part of the work undertaken by children in this Borough consists of newspaper delivery and other errand rounds connected with provision stores.

The Bye-Laws under the Education Act, 1921, relating to the employment of children have been revised and adopted by the Council. In the main they give greater elasticity to child employment without essentially altering the hours of employment or encroaching on the conditions. Moreover they bring the conditions more into line with those of the London County Council and neighbouring Boroughs. During 1930, 207 children were examined; four certificates were not granted and seven temporarily postponed.

During the same period a certificate of fitness under the Employment of Children in Entertainments Rules (Sec. 101, Education Act, 1921), was granted in respect of one girl.



## (23) Miscellaneous.

All scholarship children are medically examined soon after taking up their scholarships. The schools at which such scholarships are held are :

- |  |                              |
|--|------------------------------|
| (1) The Grove School   | } Higher Elementary Schools. |
| (2) The Russell School                                       |                              |
| (3) The West Ham Secondary School.                           |                              |
| (4) The Plaistow Secondary School.                           |                              |
| (5) St. Angela's High School for Girls.                      |                              |
| (6) West Ham High School for Girls.                          |                              |
| (7) A few boys hold their scholarships at St. Bonaventure's. |                              |

Nos. 3, 4, 5, and 6 have been dealt with in separate reports.

### The Grove School.

All the pupils at the Grove School are scholarship children from the Elementary Schools. The School is visited twice annually, when Entrants and Leavers are examined.

The numbers examined were as follows:—

Boys, 59.      Girls, 123.      Total, 182.

The chief defects found and referred for treatment were as follows:—

Skin Conditions .....	2	Defective Vision .....	9
Oral Sepsis .....	7	Deafness degree 2/20 ...	1
Chronic Otitis Media .....	1	Enlarged Tonsils .....	2
			—
Total ...			22
			—

Defects requiring Observations:—

Heart Disease .....	1	Disordered action of heart	1
Anaemia .....	1	Enlarged Tonsils .....	1
Oral Sepsis .....	1	Enlarged Cervical Glands	1
Scoliosis .....	1		—
Total ...			7
			—

All the children found defective are followed up by the Nurses and re-inspected by the Doctor at the School Clinic or the following examination at the School. Mr. Madden, the Head Master, takes a great interest in the welfare of all the scholars, and his kind co-operation during the visits of the Doctor to the School is much appreciated.

### The Russell School.

A visit of Inspection was made in July, 1930, when the "Leavers" were examined—54 boys and 32 girls. The pupils commenced their training at the School in August, 1927, and were then medically examined. The present examination shows that the pupils, almost without exception, have done splendidly, the physique and general fitness in many cases being exceptional.



Attendance of Parents : 5 with boys, 26 with girls (combined, percentage 29.7).

### Chief Defects referred for Treatment.

	Boys	Girls
Defective Vision	3	5
Teeth	3	1
Anaemia	—	1
Nose and Throat	1	—
Epilepsy	—	1
Spinal Curvature	1	2
Other Conditions	3	—

Recommendations and advice re individual scholars left with the Head Teacher as follows:—

Vision, 8. Epilepsy, 1.  
Spinal Curvature, 3. Defective Colour Vision, 2 (boys).

### Re-inspection.

**Vision.** Two boys and two girls were prescribed glasses, and all obtained them. Four pupils failed to attend the Eye Clinic.

**Teeth.** Three boys obtained dental treatment.

**Spinal Curvature.** Treatment continued in the three cases, all improved.

**Other Conditions.** Referred for treatment were remedied privately.

The Entrants were examined in October, 1930, the numbers examined and those found to be defective being as follows:—

BOYS.		GIRLS.	
No. Examined.	No. Defective.	No. Examined.	No. Defective.
76	25	38	18
Parents present :		Parents present :	
59		33	

The chief defects requiring treatment and observation were :

	BOYS.		GIRLS.	
	Treatment.	Observation.	Treatment.	Observation.
Malnutrition	1	3	—	—
Defective Vision	11	1	9	—
Enlarged Tonsils	5	3	2	2
Defective Speech	—	2	—	—
Oral Sepsis	4	—	5	—
Organic Heart Disease	1	—	1	—
Bronchitis	1	—	—	—
Non Pul. T.B. (glands)	1	—	—	—
Deformity	1	—	—	—
Other Defects	3	—	2	—
Acne	—	—	3	—
Blepharitis	—	—	1	—
Anaemia	—	—	1	—
Spinal Curvature	—	—	5	—



### Following up and Treatment.

The same facilities are provided as in the other Schools. The Nurse, after the Medical Inspection, follows up the cases at the homes and School, and the Doctor re-inspects at the School. Minor ailments are dealt with at the Rosetta Road School Clinic.

Re-inspections : 36 Boys ; 25 Girls.

Treatment.				BOYS.	GIRLS.
Malnutrition	...	...	...	3	—
Acne	...	...	...	—	2
Blepharitis	...	...	...	—	1
Teeth	...	...	...	1	1
Non Pul. T.B. (Glands)	...	...	...	1	—
Deformity	...	...	...	1	—
Scoliosis	...	...	...	—	5

Mr. C. W. Truelove takes a very keen interest in the Medical Inspection, and everything is done to encourage both the attendance of the parents and their continued interest in "following up" and carrying out the advice given. Much keenness is shown in the Physical Training, Folk Dancing, and Sports activities of the School, every effort being made to enable the greatest possible number of children to benefit by the latter.

### Artificial Sunlight Treatment

The following is a report received from Dr. Eva Morton on West Ham School Children treated at the Sunlight Clinic at the Children's Hospital, Balaam Street, Plaistow, on behalf of the Education Committee :

The results of treatment among the children of school age has again been most encouraging. More than half the patients are referred to the Clinic for Anaemia and for Debility, and possibly it is among this group that most striking results are seen. The haemoglobin percentage which is taken as a routine in all cases on first starting the treatment, is found in practically every case after twelve or more exposures to the carbon arc lamp to have risen from its initial reading of 75 or 80 to a reading of 90 or 95. The improvement both as regards physique and general alertness in many of the children is most marked, and is frequently the occasion of a spontaneous tribute from the mother.

A progressive gain in weight is usually observed, and where this is not the case, some other factor has usually been present, such as faulty hygiene, insufficient rest, or the presence of enlarged tonsils and adenoids. Sub-acute rheumatism is the diagnosis in another large group of children referred to the Clinic for treatment, and here too the results have usually been excellent. The usual period of treatment is three months, but in some cases, including children suffering from tuberculous glands in the neck or from various chronic skin diseases, a more prolonged course is given. Two or three cases of alopecia have done very well, as also have a large number of children suffering from various catarrhal conditions.



On the whole the attendance of those referred for treatment has been satisfactory, and this no doubt has conduced towards the results noted.

### Blind Persons' Act.

During the year two men and one woman were examined and reported on as being suitable for training under the above Act.

### Pathological Work.

The microscopical examination of sputum for the presence of the tubercle bacillus is undertaken by the Tuberculosis Officer.

Throat swabs are taken by the School Medical staff as required, and sent to the Superintendent of the Plaistow Fever Hospital for cultivation and report.

The microscopic diagnosis of ringworm of the head is undertaken by the School Medical staff in the Laboratory provided for that purpose. During the year under consideration 19 hair specimens were examined, and 18 found to be positive.

### Cheap Tram Fares.

I am indebted to Mr. Slattery (Tramways Manager) for the following Table which shows the number of children carried at halfpenny fares in all West Ham and London County Council No. 8 Service cars during school holidays in 1928, 1929, and 1930, and the advantage taken by the children of the facilities granted.

Holiday Period	1930.		1929.		1928.	
	No. of days in operation	Number carried	No. of days in operation	Number carried	No. of days in operation	Number carried
Easter ...	10	147,976	10	150,847	10	146,753
Whitsun ...	8	124,950	8	130,863	8	126,592
Summer ...	31	384,906	31	404,545	32	396,429
Christmas ...	15	207,087	15	202,776	15	192,150
Totals ...	64	864,919	64	889,031	65	861,924
Av. per day	—	13,514	—	13,891	—	13,260

### CONCLUSION.

The teachers in the Infants' Departments have been relieved of the duty of making out the cards on admission of a pupil, and these dossiers, as well as those of children up to 8 years, are now kept in my office instead of at the school as formerly. In course of time this will result in the medical dossiers of every school child being filed in my Department. Head Teachers can, of course, obtain any information concerning the child's medical history and condition upon application.



# APPENDIX I.

## SHOEBURYNESSE HOLIDAY CAMP.

### Extracts from Report by Mr. T. Taylorson.

It is with much gratification that I present my report on the sixth holiday camp for boys organised by your Committee.

In many respects this was the most successful of the series, and some 266 West Ham boys will be able to look back on the Summer of 1930 with reminiscent joy.

The site, as in past years, was the seaward meadow of South Shoebury Hall Farm, but this year it had the added advantage of being completely fenced, so we were able to enjoy that measure of privacy which is often so desirable.

As in previous years, the boys slept nine or ten to a tent, of which there were eighteen, arranged in a big quadrangle. They were provided with a ground-sheet, two blankets and a straw-filled sack, whilst meals and communal gatherings were indulged in in the big marquee. The menu was substantially the same as heretofore, the aim being to provide each boy with a sufficiency of nourishing and palatable food.

The outstanding features of the camp were two innovations which were entirely due to the good wishes and kindly acts of generous friends. On Wednesday, 30th July, through the kindness of Mr. Cecil Jones, a hundred and ten boys left camp at 5.30 a.m., and went by motor boat to Sheerness, where they spent at least two hours on the "Repulse," then on up the Medway to Chatham Dockhead; to Rochester Castle, and so home, having spent a memorable and enjoyable day.

Perhaps the most noteworthy and outstanding feature of camp was due to the enterprise of Alderman E. J. Reed, the Chairman of your Committee, and the kindness of Mr. J. Fretwell, of Plaistow. This was the provision and installation of a complete system of hot-spray baths. Needless to say, this was an innovation which, though at first viewed with grave suspicion, became one of the most popular institutions of camp; in fact, it became almost necessary to mount a guard to prevent some of the young enthusiasts from having more than three baths a day. As a result of this installation we had always copious supplies of hot water for washing up.

The health of the camp was generally good, no cases of serious accident or illness having to be reported amongst the boys, although Mr. G. W. Pannell, at the very outset of camp, sustained a serious knee injury, which has since necessitated an operation.

The equipment was satisfactory, with the exception of the main marquee, which is now showing manifest signs of wear.



## DYMCHURCH HOLIDAY CAMP.

### Extracts from Report by Miss L. P. Wise.

I have much pleasure in presenting the Fifth Annual Report of the Girls' Camp, held at Dymchurch from 27th July to 10th August, 1930.

The party numbered 218 girls, and a staff of 11. Of these, 147 were assisted cases, and the rest paid the full cost of the holiday.

The travelling arrangements made by the Committee were excellent. We travelled, as usual, by the District Railway to Cannon Street, and there found awaiting us a corridor train long enough for every girl to enjoy a corner seat for the two and a half hours' journey to New Romney.

The delightfully pleasant journey over, we settled down to a meal to which we all did justice, and then preparations for the fortnight began in earnest. As usual, we first arranged ourselves into sections with colours; one member of the staff attaching herself to each group, an arrangement which we find soon makes the girls feel at home, as friends can be accommodated in the same group.

From the dining hall we trooped along to the dormitories. This year we had three, all situated in the Berkshire Block. As the dining hall is under the same roof, we avoided the risk of getting wet going to and from meals.

Naturally, much of the fortnight is spent on the sea shore. Bathing was organised three times every day, so that at least one dip per day was possible for everyone. Bathing was always most carefully supervised, although the bathing on that beach is absolutely safe. It is surprising how many good swimmers were in the party.

Games, as usual, were an important item in the programme, the girls entering with zest into hockey on the beach, net-ball, cricket, rounders, etc., in the grounds, and last, but by no means least, ludo and halma in the dormitories during the showers. Not only did we play matches amongst ourselves, but we challenged other parties there, and put out teams in response to their invitations.

Outings were arranged to suit everyone, from those with very little pocket money to the most affluent. A charabanc trip to Canterbury was enjoyed by about 80 of the girls. The usual outings to Folkstone, Hythe, New Romney, and the Marshes were undertaken, and one of the most enjoyable excursions was the visit to Dungeness Lighthouse.

Competitions were, as usual, very popular, especially the annual shell hunt. On this occasion the competitors were ably assisted by the Mayor and Mayoress and Alderman and Mrs. Jones.

Concerts, too, had their day or night, and the staff rose nobly to the occasion in a Review entitled "Day in Camp."

The weather was fickle, though some fine periods were experienced every day. The health of the party was excellent, although one girl developed scarlet fever on the second day. A 'phone message to the Offices brought down the Borough Ambulance, and the girl was removed to Samson Street in a few hours.

Only one accident occurred—a broken bottle on the beach was the cause, and five stitches in a foot the result.

A great point about such a holiday is that the children see their teachers in a new light, and, carrying home their accounts of the holiday, help to foster the growing spirit of friendliness between parents and teachers.



# APPENDIX II

## STATISTICAL TABLES, SCHOOL MEDICAL OFFICER'S ANNUAL REPORT.

1939.





# APPENDIX II.

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## STATISTICAL TABLES, SCHOOL MEDICAL OFFICER'S ANNUAL REPORT, 1930.

## APPENDIX II.

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### STATISTICAL TABLES,

SCHOOL MEDICAL OFFICER'S

ANNUAL REPORT,

1930.



**TABLE 1.—RETURN OF MEDICAL INSPECTIONS.**

**A. Routine Medical Inspections.**

Number of Code Group Inspections:—

Entrants	...	...	...	...	...	6094
Intermediates	...	...	...	...	...	5601
Leavers	...	...	...	...	...	4483
						<hr/>
Total						16178
						<hr/>

Number of Other Routine Inspections ... 1338

**B. Other Inspections.**

Number of Special Inspections	...	...	...	...	15508
Number of Re-Inspections	...	...	...	...	7966
					<hr/>
Total					23474
					<hr/>

**C. Higher Educational Institutions.**

Number of Routine Examinations	...	...	...	...	1480
Number of other Routine Inspections	...	...	...	...	—
Specials	...	...	...	...	8
Re-Inspections	...	...	...	...	251
					<hr/>
Total					1739
					<hr/>

**D. Continuation Schools.**

Number of Special Inspections	...	...	...	...	5
					<hr/>
Total					5
					<hr/>

TABLE II.  
A.—Return of Defects found by Medical Inspection in the Year  
ended 31st December, 1930.

Disease or Defect	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)
Malnutrition ... ..	228	18	44	3
Unclean Head ... ..	41	5	92	—
„ Body ... ..	15	2	1	—
SKIN—				
Ringworm—Head ... ..	2	—	52	—
„ Body ... ..	10	—	150	—
Scabies ... ..	17	1	112	—
Impetigo ... ..	43	1	1,127	—
Other Skin Dis. (not T.B.)...	119	16	2,679	1
EYE—				
Blepharitis ... ..	63	7	248	—
Conjunctivitis ... ..	42	1	564	—
Keratitis ... ..	2	1	10	1
Corneal Ulcer ... ..	4	2	27	—
Corneal Opacities ... ..	2	—	—	—
Defective Vision ... ..	1235	119	814	15
Squint ... ..	222	3	139	1
Other Conditions ... ..	11	5	241	4
EAR—				
Defective Hearing ... ..	53	9	92	7
Otitis Media ... ..	164	19	652	1
Other Ear Diseases ... ..	20	8	200	—
NOSE AND THROAT—				
Enlarged Tonsils only ... ..	488	237	130	3
Adenoids only ... ..	73	31	77	3
Enlarged Tons. and Ads. ... ..	574	39	317	5
Other Conditions ... ..	60	7	109	1
Enlarged Cervical Glands (not T.B.) ... ..	14	3	204	3
Defective Speech ... ..	16	16	33	9
Teeth—Oral Sepsis ... ..	242	16	24	1
HEART AND CIRCULATION—				
Heart Disease—Organic ... ..	23	76	23	16
„ „ Functional ... ..	16	56	12	3
Anaemia ... ..	150	40	105	10
LUNGS—				
Bronchitis ... ..	84	78	22	6
Other Dis. (not T.B.) ... ..	5	10	6	—



TABLE II.—(Continued)

Disease or Defect  (1)	Routine Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment (2)	Requiring to be kept under observation, but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation, but not requiring treatment (5)
<b>TUBERCULOSIS—</b>				
Pulmonary :				
Definite ... ..	10	19	14	1
Suspected ... ..	8	45	22	10
Non-Pulmonary :				
Glands ... ..	4	3	6	3
Spine ... ..	—	—	2	—
Hip ... ..	—	1	—	—
Other Bones and Joints	—	1	2	—
Skin ... ..	2	—	—	—
Other Forms ... ..	—	—	—	—
<b>NERVOUS SYSTEM—</b>				
Epilepsy ... ..	6	3	13	5
Chorea ... ..	15	8	23	3
Other Conditions ... ..	22	36	16	25
<b>DEFORMITIES—</b>				
Rickets ... ..	3	2	1	—
Spinal Curvature ... ..	31	2	—	—
Other Forms ... ..	20	9	13	1
Other Defects and Diseases ...	354	132	5,462	59

B.—Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases) :—

**Elementary.**

Group  (1)	Number of Children		Percentage of Children found to require treatment (4)
	Inspected (2)	Found to require treatment (3)	
<b>CODE GROUPS—</b>	*		
Entrants ... ..	6,094	1,608	26.4
Intermediates ... ..	5,601	1,585	28.3
Leavers ... ..	4,483	1,110	24.7
Total (Code Groups) ... ..	16,178	4,303	26.6
Other routine Inspections ... ..	1338	70	5.

\* Same as in Table I (A).

**Higher Educational Institutions.**

Routines (all ages) ...	1480	328	22.1
Other Routines ...	—	—	—

TABLE III.

Numerical Return of all Exceptional Children in the Area in 1930.  
Public Elementary School Children.

		Boys Girls Total			
A.					
Blind (including partially blind)	Suitable for training in a School or Class for the totally blind.	(1) Attending Certified Schools or Classes for Blind ... ..	13	9	22
		(2) Attending Public Elem. Schools	—	—	—
		(3) At other Institutions ...	—	—	—
		(4) At no School or Institution ...	2	5	7
	Suitable for training in a School or Class for the partially blind.	(5) Attending Certified Schools or Classes for the Blind ...	3	7	10
		(6) Attending Public Elem. Schools	—	3	3
		(7) At other Institutions ...	1	1	2
		(8) At no School or Institution ...	—	—	—
B.					
Deaf (including Deaf and Dumb and partially Deaf)	Suitable for training in a School or Class for the totally Deaf or Deaf and Dumb.	(1) Attending Certified Schools or Classes for Deaf ... ..	33	33	66
		(2) Attending Public Elem. Schools	—	—	—
		(3) At other Institutions ...	—	—	—
		(4) At no School or Institution ...	—	—	—
	Suitable for training in a School or Class for the partially Deaf.	(5) Attending Certified Schools or Classes for Deaf ... ..	1	—	1
		(6) Attending Public Elem. Schools	—	3	3
		(7) At other Institutions ...	—	—	—
		(8) At no School or Institution ...	—	—	—
C.					
Mentally Defective	Feeble-minded (cases not notifiable to the Local Control Authority).	(1) Attending Certified Schools for Mentally Defective Children	121	65	186
		(2) Attending Public Elem. Schools	20	32	52
		(3) At other Institutions ...	—	1	1
		(4) At no School or Institution ...	9	9	18
	Notified to the Local Control Authority during the year.	(5) Feeble-minded ... ..	8	9	17
		(6) Imbeciles ... ..	13	9	22
		(7) Idiots ... ..	—	—	—
		(8) Moral Defectives ... ..	—	—	—
D.					
Epilep- tics	Suffering from severe Epilepsy.	(1) Attending Certified Special Schools for Epileptics ...	—	—	—
		(2) In Institutions other than Certified Special Schools ...	4	5	9
		(3) Attending Public Elem. Schools	—	—	—
		(4) At no School or Institution ...	2	2	4
	Suffering from Epilepsy which is not severe	(5) Attending Public Elem. Schools	3	9	12
		(6) At no School or Institution ...	—	1	1



TABLE III.—Continued.

Boys Girls Total

E.	Infectious pulmonary and glandular tuberculosis.	(1) At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ... ..	21	20	41
		(2) At other Institutions ...	—	—	—
		(3) At no School or Institution ...	2	2	4
	Non - infectious but active pulmonary and glandular tuberculosis.	(4) At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ... ..	—	—	—
		(5) At Certified Residential Open Air Schools ... ..	—	1	1
		(6) At Certified Day Open Air Schools ... ..	—	—	—
		(7) At Public Elem. Schools ...	—	—	—
		(8) At other Institutions ...	—	—	—
		(9) At no School or Institution ...	11	14	25
Physically Defective	Delicate children ( <i>e.g.</i> , pre- or latent tuberculosis, malnutrition, debility, anaemia, etc.)	(10) At Certified Residential Open Air Schools ... ..	80	68	148
		(11) At Certified Day Open Air Schools ... ..	—	69	69
		(12) At Public Elem. Schools ...	18	24	42
		(13) At other Institutions ...	—	2	2
		(14) At no School or Institution ...	—	2	2
	Active non-pulmonary tuberculosis.	(15) At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board ... ..	27	17	44
		(16) At Public Elem. Schools ...	—	—	—
		(17) At other Institutions ...	4	—	4
		(18) At no School or Institution ..	2	2	4
	Crippled Children (other than those with active tuberculous disease) <i>e.g.</i> , children suffering from paralysis, etc., and including those with severe heart disease.	(19) At Certified Hospital Schools	3	1	4
		(20) At Certified Residential Cripple Schools ... ..	—	1	1
		(21) At Certified Day Cripple Schools ... ..	76	61	137
		(22) At Public Elem. Schools ...	6	2	8
		(23) At other Institutions ...	4	8	12
		(24) At no School or Institution ...	14	18	32

N.B.—This Table is not a full census of defects in the child population of the Borough, but only of defects of such a degree as in the opinion of the Medical Officers to disqualify the child more or less permanently for education in the Elementary Schools. (This note, however, does not apply to Epilepsy of a slight degree.)

**TABLE IV. SUMMARY**  
Return of Defects Treated during the Year ended 31st Dec., 1930.

**Treatment Table.**

**Group I.—Minor Ailments (excluding Uncleanliness).**

Disease or Defect.  (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Skin—			
Ringworm, Scalp ... ..	53		53
"    Body ... ..	150	1	151
Scabies ... ..	117	2	119
Impetigo ... ..	1,134	8	1,142
Other Skin Diseases ... ..	2,686	39	2,725
Minor Eye Defects—			
External ... ..	1,028	45	1,073
Minor Ear Defects ... ..	814	64	908
Miscellaneous (minor injuries, etc.)	5,869	373	6,242
Totals ... ..	11,881	532	12,413

**Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group 1).**

Disease. or Defect  (1)	Number of Defects dealt with.			
	Under the Authority's Scheme. (2)	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme (3)	Otherwise. (4)	Total. (5)
Errors of Refraction (including Squint)	2,904	43	12	2,959
Other Defect or Disease of the eyes (excluding those recorded in Group 1) ... ..	20	5	—	25
Total ... ..	2,924	48	12	2,984



TABLE IV.—Continued.

Total number of Children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme .....	2795
(b) Otherwise .....	55

Total Number of Children who obtained or received spectacles :—

* (a) Under the Authority's Scheme .....	2462
* (b) Otherwise .....	55

\*At time of compilation of Table.

**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)
1,243	58	1,301	122	1,423

**Group IV.—Dental Defects.**

(1) Number of Children who were :—

(a) Inspected by the Dentist :

Aged :			
Routine Age Groups	4	...	576
	5	...	1224
	6	...	6053
	7	...	6206
	8	...	3591
	9	...	1333
	10	...	1356
	11	...	832
	12	...	721
	13	...	842
	14	...	149
			Total ... 22883
Specials .....			3706

Grand Total ... 26589

TABLE IV.—Continued.

(b)	Found to require treatment	...	...	12706	
(c)	Actually treated	...	...	10101	
(d)	Re-treated during the year as the result of periodical examination	...	...	1146	
(2)	Half-days devoted to—				
	Inspection	...	...	276	
	Treatment	...	...	1923	
	Total	...	—		2199
(3)	Attendances made by children for treatment			17360	
(4)	Fillings—				
	Permanent teeth	...	...	2224	
	Temporary teeth	...	...	789	
	Total	...	—		3013
(5)	Extractions—				
	Permanent teeth	...	...	792	
	Temporary teeth	...	...	17686	
	Total	...	—		18478
(6)	Administrations of general anæsthetics for extractions	...	...		Nil
(7)	Other Operations—				
	Permanent teeth	...	...	1314	
	Temporary teeth	...	...	668	
	Total	...	—		1982

**Group V.—Uncleanliness and Verminous Conditions.**

(i)	Average number of visits per school made during the year by the School Nurses. (Sessional Visits for primary Inspections.)	8.9
(ii)	Total number of examinations of children in the Schools by the School Nurses	60616
(iii)	Number of individual children found unclean	888
(iv)	(a) Number of children cleansed under arrangements made by the Local Education Authority	Nil
	(b) Non-Statutory Cleansings at Clinic	109
(v)	Number of cases in which Legal proceedings were taken :—	
	(a) Under the Education Act	Nil
	(b) Under School Attendance Bye-laws	Nil



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