

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

Contributors

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County Borough of West Ham.

ANNUAL REPORT
of the
Medical Officer of Health
and
School Medical Officer
for the Year
1931.

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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Introduction.

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

Mr. Mayor, Aldermen and Councillors,

I have to present to you my annual report upon the health services of West Ham for the year 1931.

The work and extent of the department continues to grow, as also does the number of citizens who make use of the excellent facilities provided for them by the Town Council.

In several previous reports I have mentioned the proposed erection of a Colony for Mental Defectives at Ockendon. The first section of this Colony, with accommodation for one hundred and thirty-four patients, was opened by His Worship the Mayor (Alderman J. T. Scoulding, J.P.), in May of this year. It is hoped that further accommodation will be added gradually until the full complement of seven hundred and fifty beds is provided. The accommodation at this Colony, by agreement with the County Borough of East Ham, will be shared by patients from that area.

Under the Housing Act, 1930, all the bad or indifferent property in the Borough has been re-inspected and scheduled. Certain areas have been considered suitable as "clearance areas," others as "improvement areas"; also a large number of properties have been repaired extensively by their respective landlords, under Section 17 of the Act. A number of houses fit only for demolition have had to be allowed to remain owing to the impracticability of getting other accommodation for those tenants who would have had to have been displaced. This applies also in greater measure to "clearance areas."

A scheme for the erection of a large number of new houses is now before the Ministry of Health.

The carrying out of work in connection with the new road to the Docks has meant the demolition of a large number of houses and the re-housing of the tenants on the site at Prince Regent Lane: this has very materially altered the balance of the population as assigned to the various clinics, schools, and District Medical Officers.

The work in connection with the clearance of the back waters of the River Lee has resulted in the shutting down of most of those factories on the City Mills site, which I have mentioned in my previous reports as the only unsewered portion of the Borough, with the exception of a few cottages at Temple Mills, which continue to drain into cesspools. It is hoped that these cottages will be dealt with shortly under the Housing Act.

Slipper Baths were recently opened in Plaistow Road by Mr. Councillor Rumsey, and a large Public Bath, with all modern facilities, is being built in the Romford Road.

An additional Ambulance Station was opened at Silvertown in June. The factory owners of the district have agreed, by arrangement, to defray a portion of the upkeep of this service.

The work of the Maternity and Child Welfare Department has increased greatly, and a number of fresh appointments have had to be made, viz., six additional Health Visitors, a Dental Nurse, a full-time Dental Surgeon, and a Junior Assistant Medical Officer. In addition to the Clinic opened in October, 1930, two further Maternity and Child Welfare Clinics were opened in May, 1931, viz., at Forest Gate and at Maybury Road. The opening ceremony at the former was performed by Councillor Mrs. M. E. Thomas, and at the latter by Councillor Mrs. Gregory. The duties connected with the Children Act transferred to this Department by the Local Government Act, 1929, have proved to be greater and more exacting than was anticipated.

The work under the Local Government Act, 1929, continues. Each of the Poor Law Institutions transferred under that Act is overcrowded, and there is a shortage of beds, more especially for chronic sick cases. This matter, which is at present receiving the attention of the Council, is very involved, owing to the existing agreements between this Council and the County of Essex and the County Borough of East Ham, and is intimately bound up in the future programmes of each of these authorities.

A survey of the whole of the work carried on by my Department was made during the year by Officers from the Ministry of Health. I should like to record here my appreciation of the courteous and considerate manner in which the investigation was conducted, and, further, to record my appreciation also of the great help rendered to me from time to time by the officials from the Ministry of Health.

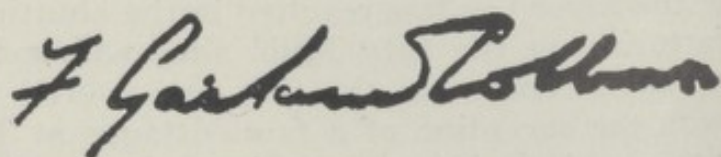
In connection with the Mental Treatment Act, a Psychological Clinic to deal with cases of early mental aberration will be opened in the Borough shortly.

The vital statistics for the year 1931 are again favourable, in spite of adverse economic and social conditions which affect this Borough so intimately.

Mr. Charles Smith, Sanitary Inspector, retired under the Superannuation Act after many years' loyal service in the Borough, and Mr. H. G. Avril was appointed in his place.

I am grateful to all members of my Staff who have contributed their share to the work of the Department.

Your obedient Servant,



Municipal Health Offices,
Romford Road,
Stratford.

July, 1932.

List of Members of the Council.

The Worshipful the Mayor (Alderman J. T. Scoulding, J.P.)

The Deputy-Mayor (Councillor Mrs. D. Parsons).

Aldermen :—

W. G. Bell; G. Croot, J.P.; D. J. Davis, J.P.; W. Devenay, J.P.; B. W. Gardner, J.P.; W. Godbold; J. H. Hollins, J.P.; J. T. Husband, J.P.; J. Jones, M.P.; Edith Kerrison, J.P.; E. J. Reed; W. J. Reed, J.P.; M. Streimer; W. J. Thorne, C.B.E., J.P., M.P.; T. Wooder.

Councillors :—

H. D. Clark; T. Groves, J.P., M.P.; P. Hearn; A. E. Cresswell; E. W. Wordley, J.P.; Mrs. E. E. Wybrew; E. F. Bradley; J. Foster; F. A. Warner; F. E. Mansford; H. R. Nicholls, W. A. T. Torrington; S. Bulling; G. J. Stokes; E. W. White, J.P.; W. H. Luscombe; W. C. Ridgwell; C. H. W. Ward, J.P.; E. C. Cannon; D. H. A. Hanley; L. F. W. White; J. N. Osbourn; H. Parker; H. J. Rumsey; G. R. Blaker; W. T. Nichols; A. J. Walker; C. St. Clair Collins; D. W. Hall; A. W. Wells; Mrs. E. C. Cook; A. E. Killip; H. J. Manners; Mrs. A. A. Barnes; C. A. Bennett; Mrs. M. E. Thomas; G. Doherty; T. Kirk; D. H. Smith; S. M. Edwards; Mrs. P. Harris; Mrs. E. Bock; Mrs. E. J. Gregory; H. F. Willig; J. Doherty; Mrs. J. A. Hollins; Mrs. F. A. Wood.

List of Committees.

directly dealing with health questions.

His Worship the Mayor (Alderman J. T. Scoulding, J.P.),
Ex-officio member of Committees.

Public Health Committee.

Chairman: Councillor Rumsey.

Aldermen Husband, Edith Kerrison, E. J. Reed, and Streimer.
Councillors Bradley, Clark, Collins, Foster, Mrs. Gregory,
Hanley, Hearn, Killip, Mrs. Thomas and Mrs. Wybrew.

Maternity and Child Welfare Committee.

Chairman: Councillor Mrs. Gregory.

Aldermen Husband, Edith Kerrison, E. J. Reed, and Streimer.

Councillors Bradley, Clark, Collins, Foster, Hanley, Hearn, Killip, Mrs. Thomas, and Mrs. Wybrew.

Mrs. E. M. Kirk, Mrs. E. Lawrance, Mrs. E. M. Warner, Miss A. Davies, A. G. Gay, Esq., J.P., and Dr. P. I. Watkin.

Housing Committee.

Chairman: Alderman E. J. Reed.

The Deputy Mayor (Councillor Mrs. D. Parsons).

Alderman Devenay.

Councillors Mrs. Bock, Bradley, Clark, Mrs. Cook, Mrs. Harris, W. T. Nichols, Rumsey, Stokes, Mrs. Thomas, Walker, E. W. White, and Wordley.

Education Committee.

Chairman: Councillor Bennett.

The Mayor (Alderman Scoulding).

The Deputy Mayor (Councillor Mrs. Parsons).

Aldermen Bell, Davis, Gardner, Godbold, J. H. Hollins, Edith Kerrison, and E. J. Reed.

Councillors Blaker, Mrs. Bock, Bulling, Collins, G. Doherty, Mrs. Gregory, Groves, Mrs. Hollins, Luscombe, H. R. Nicholls, Walker, Ward, Warner, and L. F. W. White.

Miss R. H. Cheetham, Mrs. J. Jardine, and Mrs. E. V. Parker.

The Revs. C. Carless, R. Kowntree Clifford, and A. W. W. Wallace.

Dr. A. H. Ferguson, H. Madden and F. G. Reynolds, Esquires.

Special Schools and Welfare Sub-Committee.

Chairman: Councillor Mrs. Bock.

The Deputy Mayor (Councillor Mrs. Parsons).

Aldermen Godbold, Edith Kerrison, and E. J. Reed.

Councillors Bulling, Collins, Mrs. Gregory, Mrs. Hollins, and Luscombe.

Miss R. H. Cheetham, Mrs. L. Jardine.

H. Madden, Esq.

The Hospitals Committee.

Chairman: Councillor Killip.

The Deputy Mayor (Councillor Mrs. Parsons).

Aldermen Croot, Edith Kerrison, and Streimer.

Councillors Mrs. Barnes, Mrs. Bock, Hall, Mrs. Hollins, Rumsey, Mrs. Thomas, Walker, Ward, Mrs. Wood, and Wordley.

The Public Assistance Committee.

Chairman: Alderman Wooder.

The Deputy Mayor (Councillor Mrs. Parsons).

Councillors Mrs. Barnes, Mrs. Bock, Bulling, Mrs. Cook, G. Doherty, Mrs. Gregory, Mrs. Harris, Mrs. Hollins, Killip, Manners, Mansford, Ridgwell, and Mrs. Thomas; together with Alderman J. H. Hollins and Councillors J. Doherty, Edwards, Hearn, Kirk, Rumsey, Smith, E. W. White, Mrs. Wood, and Mrs. Wybrew for facilitating the performance of the duties conferred or imposed on the Council by the Unemployment Insurance (National Economy) (No. 2) Order, 1931, and Regulation No. 8 of the Unemployment Insurance (Transitional Payments) Regulation, 1931.

The Committee for the Care of the Mentally Defective.

Chairman: The Mayor.

The whole Council, Miss N. Hoare, and Mrs. Bulling.

The Executive Committee for the Care of the Mentally Defective.

Chairman: The Mayor (Alderman J. T. Scoulding).

The Deputy Mayor (Councillor Mrs. Parsons).

Aldermen Bell, Croot, Davis, Devenay, Godbold, J. H. Hollins, Husband, Edith Kerrison, W. J. Reed, and Streimer.

Councillors Mrs. Bock, Kirk, Ridgwell, Mrs. Thomas, and Wordley; and Miss N. Hoare and Mrs. Bulling.

Whipps Cross Hospital and Forest House Sub-Committee.

Chairman: Councillor Mrs. Hollins.

Plus rota of members of Public Assistance Committee.

Forest Gate Hospital Sub-Committee.

Chairman: Councillor Mrs. Gregory.

Plus rota of members of Public Assistance Committee.

Central Home Sub-Committee.

Chairman: The Deputy Mayor (Councillor Mrs. Parsons).

Plus rota of members of Public Assistance Committee.

Children's and Margate Convalescent Home Sub-Committee.

Chairman: Councillor Mrs. Thomas.

Plus rota of members of Public Assistance Committee.

County Borough of West Ham.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1931.

Natural and Social Conditions.



THE COUNTY BOROUGH OF WEST HAM is classified the tenth largest of the 118 Great Towns of England and Wales. Situated geographically within the County of Essex, it comprises an area of seven and a half square miles. In elevation it is almost flat, varying from less than 5ft. to 45ft. above ordnance datum.

The Charter of Incorporation was granted to West Ham in 1886.

It is bounded on the West by the Administrative County of London, on the East by the County Borough of East Ham, on the North by the Borough of Leyton, and on the South by the River Thames. The River Lee forms a natural boundary between West Ham and the Metropolis.

There are over 128 miles of dedicated roads in the Borough, and 123 acres of waterways.

The County Borough is an important industrial centre. In addition to a number of factories in the North, there are in the South of the Borough some of the largest and most important factories in or near London. These factories manufacture various articles such as rubber, soap, sugar, and glass.

By rail it is only about 5 miles from the City of London, hence a large number of the populace work in London and district.

The whole of the Royal Victoria Dock and the new King George the Fifth Dock, as well as the locomotive and other works of the London and North Eastern Railway Company, and the carriage works of the Midland Railway Company (London, Tilbury, and Southend Section) are within the district. Naturally where there are extensive docks, one finds a large number of casual labourers.

West Ham is a densely populated town, having 62 people to the acre.

There is still a great shortage of houses in the district, and even with the addition of new houses erected by the Council and private enterprise, there is still a very long list of persons requiring increased or improved housing accommodation. In this connection there is a dearth of building sites in the Borough.

The growth of the district can be gauged from the fact that in 1762 the number of houses in the Borough was 700, and in 1931 the number was 47,995.

Summary of General Statistics.

Area (acres) 4,706.

Population—

Census, 1931, 294,086 (preliminary report).

Estimated population to the middle of 1931, 296,700.

Number of inhabited houses (1921), 47,995; (figures for 1931 not yet available.)

Number of families or separate occupiers (1921), 68,569; (figures for 1931 not yet available.)

Average Rateable Value—

General Rate, £1,400,105.

Sum represented by a Penny Rate—General District Rate, £5,834.

Vital Statistics.

		Total	Male	Female		
Live Births	Legitimate	5143	2631	2512	} Birth Rate	17.77
	Illegitimate	123	64	59		
Still Births, 187	...	...	...	...	Rate per 1,000 total births,	35
Deaths, 3,384	...	...	...	...	Death Rate,	11.4
Deaths from diseases and accidents of pregnancy and child birth	...	...	from sepsis	...	...	7
	...	...	from other causes	...	...	9
Maternal Mortality Rate	...	...	...	...	...	3.0
Death Rate of Infants under one year of age—						
All Infants per 1,000 live births						62.6
Legitimate infants per 1,000 legitimate births...						60.8
Illegitimate infants per 1,000 illegitimate births...						138.1
Deaths from Measles (all ages)						3
Deaths from Whooping Cough (all ages)						35
Deaths from Diarrhoea, etc. (under 2 years of age)						33

In the case of the Great Towns the Birth Rate was 16.0, the Death Rate 12.3, and the Infant Mortality Rate 71.0, whereas the Maternal Mortality Rate for England and Wales was 4.1.

Vital Statistics of the Wards of the Borough, 1931.

WARDS.	Births	Birth Rate	Deaths	Death Rate	Infant Deaths	Infant Mortality per 1,000 births	Natural increase Births over Deaths	Estimated resident population middle of 1931
New Town ...	284	16.09	219	12.41	19	66	65	17,645
Forest Gate ...	360	15.91	221	11.72	21	70	79	18,851
High Street...	309	17.43	182	10.26	18	57	127	17,725
Broadway ...	228	15.54	174	11.86	16	70	54	14,665
Park ...	266	16.91	169	10.74	18	67	97	15,728
Upton ...	205	12.03	208	12.21	9	43	*	17,029
Plasbet Road ...	227	15.37	169	11.44	14	61	58	14,766
West Ham ...	274	16.13	178	10.98	18	65	96	16,200
Plaistow ...	337	16.83	235	11.73	20	59	102	20,020
Bemersyde ...	172	12.61	131	9.60	9	52	41	13,639
Canning Town and Grange ...	542	20.00	279	10.29	30	55	263	27,100
Hudsons ...	367	17.80	230	11.16	14	38	137	20,607
Ordnance ...	384	19.87	246	12.73	26	67	138	19,324
Beckton Road ...	405	20.42	248	12.50	28	69	157	19,829
Tidal Basin ...	582	25.34	265	11.53	46	79	317	22,965
Custom House and Silvertown ...	384	18.63	230	11.16	24	62	154	20,607
County Borough ...	5,266	17.77	3,384	11.4	330	62.6	1,885	296,700

* Decrease of three births

Measles.

There was an unusual number of cases of this disease towards the end of the year, and it was considered advisable to warn the populace of the consequent dangers resulting from neglect of treatment.

The following poster containing advice to parents, and also offering hospital treatment for cases considered suitable, was exhibited on hoardings all over the Borough:—

MEASLES!

MEASLES is dangerous and very infectious: immediate treatment is most essential.

There is at present an unusual number of cases of this disease. Arrangements for removal of patients to hospital can be made in cases so recommended by a medical practitioner.

The first sign of Measles is a Feverish Cold, with sneezing and running from the eyes and nose. The Rash appears on the fourth day.

The DANGEROUS STAGE of Measles is DURING CONVALESCENCE. It is then that COMPLICATIONS develop which are liable to PROVE FATAL.

Take the UTMOST CARE DURING THE SECOND WEEK of illness, and do not allow the child out of doors until at least ten days from the onset of the RASH. DON'T FORGET the younger the child the greater the danger.

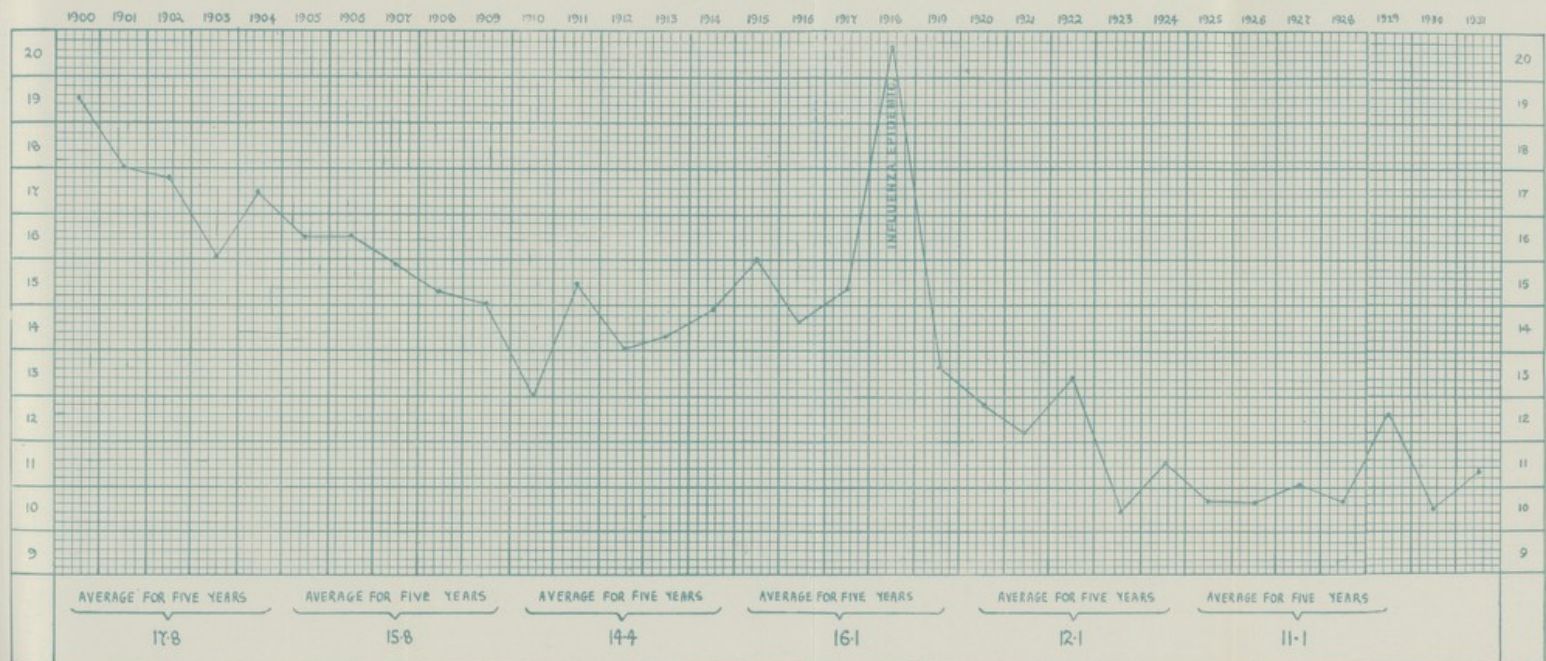
IMMEDIATELY MEASLES OCCURS IN YOUR FAMILY you should inform the Head Teacher of the School attended by your children, or the Health Visitor at the Infant Welfare Centre, and send word to the Medical Officer of Health at the Town Hall.

Town Hall,
West Ham.

F. GARLAND COLLINS,
Medical Officer of Health.

Two schools were particularly affected, and a supply of leaflets setting out the early symptoms, after-effects, and rules for the prevention of the disease, were sent to them, for distribution amongst the Infants' Departments.

GENERAL DEATH RATE.



Births.

The number of births registered in the Borough during the year was 6233 (3157 Males and 3076 females) ; but of this total 1221 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 254 West Ham women were confined outside the Borough. Suitable adjustment makes the net West Ham Births 5266 (2695 Males and 2571 Females) ; 123 of these (64 Males and 59 Females) were illegitimate.

Calculated on the Registrar General's estimate of the population of the Borough at the middle of 1931, viz. 296,700, the Birth Rate for the year was 17.7, the lowest ever recorded for West Ham. The Birth Rate for the Great Towns was 16.0.

Deaths.

The number of deaths registered during the year was 2126, but of these 214 occurred in persons not belonging to the Borough, while the deaths of 1472 residents of West Ham occurred in various institutions and districts elsewhere, making the total net deaths attributable to the Borough number 3384, of which 1794 were males and 1590 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 11.4 per 1,000 of the estimated population. The Death Rate for the Great Towns was 12.3.

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.

Deaths in Council's Institutions.

					Under 1 year	1 year & upwards	
Whipps Cross Hospital	...	...	...	...	48	...	539
Central Home	...	...	...	...	1	...	407
Dagenham Sanatorium	...	...	...	...	—	...	55
West Ham Mental Hospital	...	...	...	...	—	...	59
Plaistow Fever Hospital	...	...	...	...	20	...	43
Forest Gate Hospital	...	...	...	...	11	...	40

Deaths in Other West Ham Institutions.

Queen Mary's Hospital for East End	...	30	...	79
St. Mary's Hospital	...	13	...	22
Plaistow Maternity Hospital	...	13	...	2
Royal Albert Dock Hospital	...	—	...	24
Children's Hospital, Balaam Street	...	19	...	2
Other Places, e.g., Docks, etc.	...	—	...	3
Residents dying in London Institutions		51	...	312
		—	—	—
		206	...	1587
Non-residents dying in West Ham Institutions		59	...	155
		—	—	—
		147	...	1432

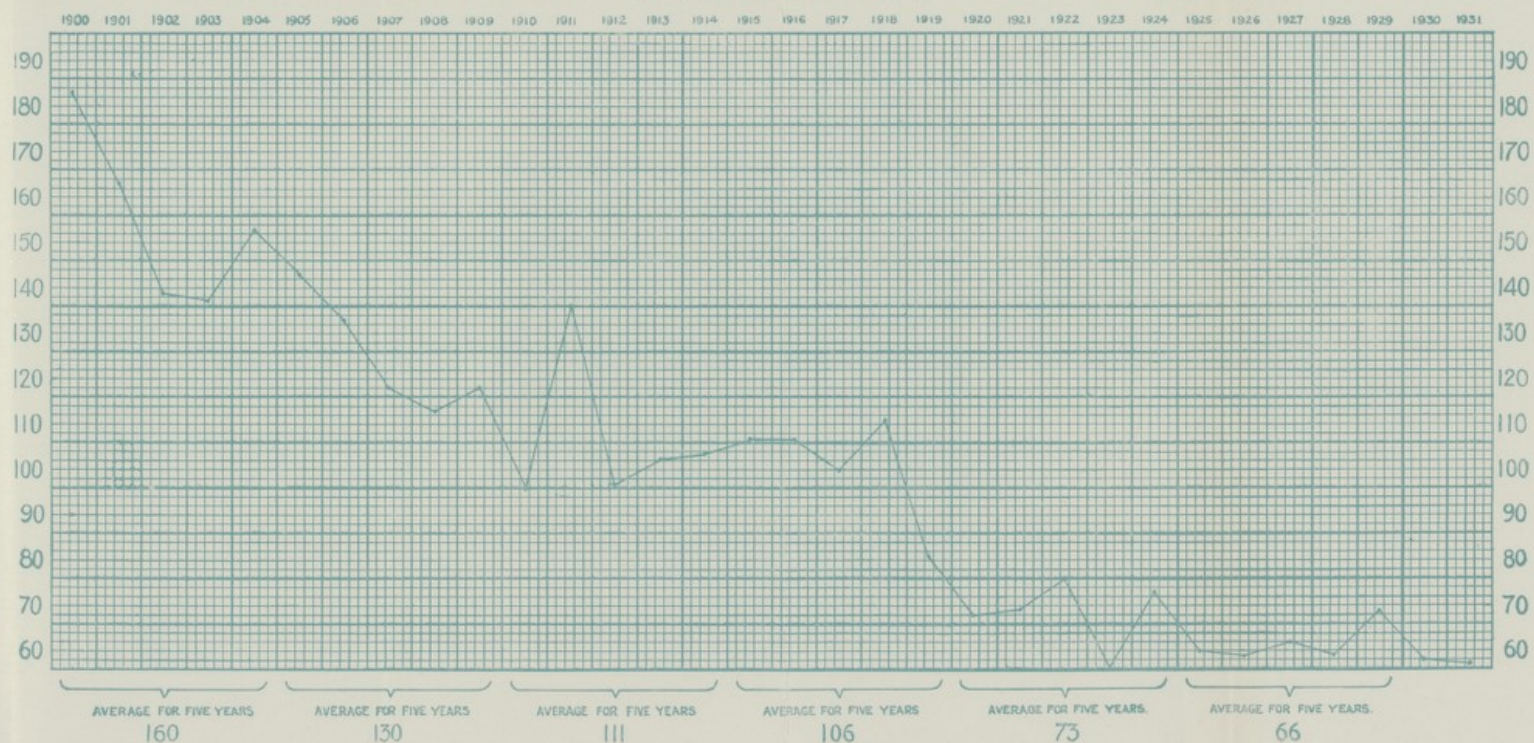
Net West Ham Deaths occurring in Institutions 1579

**Causes of Death at Different Periods of Life in the
County Borough of West Ham (Civilians only) during
1931.**

Causes of Death.		Sex	All	Ages 0—	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—
ALL CAUSES	...	M.	1794	194	35	24	43	79	91	111	219	334	383	281
		F.	1590	136	35	31	37	78	79	93	140	244	339	378
1. Typhoid and Paratyphoid Fevers	...	M.	—	—	—	—	—	—	—	—	—	—	—	—
		F.	1	—	—	—	—	—	—	1	—	—	—	—
2. Measles	...	M.	1	1	—	—	—	—	—	—	—	—	—	—
		F.	2	—	—	1	1	—	—	—	—	—	—	—
3. Scarlet Fever	...	M.	1	—	—	—	—	—	1	—	—	—	—	—
		F.	4	2	—	2	2	—	—	—	—	—	—	—
4. Whooping Cough	...	M.	16	8	5	3	—	—	—	—	—	—	—	—
		F.	19	9	5	5	—	—	—	—	—	—	—	—
5. Diphtheria	...	M.	4	—	—	3	1	—	—	—	—	—	—	—
		F.	7	—	—	4	3	—	—	—	—	—	—	—
6. Influenza	...	M.	45	—	—	—	1	—	3	8	2	7	15	9
		F.	52	1	1	1	—	2	1	1	7	9	15	14
7. Encephalitis Lethargica	...	M.	1	—	—	—	—	—	1	—	—	—	—	—
		F.	3	—	—	—	—	1	1	1	—	—	—	—
8. Cerebro-spinal Fever	...	M.	5	3	—	1	—	—	1	—	—	—	—	—
		F.	4	3	1	—	—	—	—	—	—	—	—	—
9. Tuberculosis of Respiratory System	...	M.	157	—	—	—	1	38	32	30	31	23	2	—
		F.	97	1	—	1	2	35	27	12	8	8	2	1
10. Other Tuberculous Diseases	...	M.	30	5	4	4	6	3	2	4	—	2	—	—
		F.	12	3	—	2	2	3	2	—	—	—	—	—
11. Syphilis	...	M.	4	1	—	—	—	—	—	1	1	1	—	—
		F.	3	1	—	—	—	—	—	1	—	1	—	—
12. General Paralysis of the Insane, Tabes Dorsalis	...	M.	13	—	—	—	—	—	—	3	5	4	1	—
		F.	2	—	—	—	—	—	—	—	—	—	2	—
13. Cancer, Malignant Disease	...	M.	215	—	—	—	—	1	3	6	34	67	79	25
		F.	193	—	—	—	—	1	5	18	27	51	60	31
14. Diabetes	...	M.	11	—	—	—	—	1	2	1	—	5	—	2
		F.	18	—	—	—	—	—	1	1	2	3	9	2
15. Cerebral Haemorrhage, etc.	...	M.	74	—	—	—	—	—	1	2	7	16	27	21
		F.	95	—	—	—	—	—	1	—	13	25	32	24
16. Heart Disease	...	M.	340	—	—	—	6	5	9	7	40	71	116	86
		F.	375	—	—	—	3	16	14	18	37	62	101	124
17. Aneurysm	...	M.	9	—	—	—	—	—	—	—	2	3	4	—
		F.	4	—	—	—	—	—	—	—	—	2	2	—
18. Other Circulatory Diseases	...	M.	33	—	—	—	—	—	—	1	2	8	12	10
		F.	34	—	—	—	—	—	1	—	3	2	12	16
19. Bronchitis	...	M.	147	12	1	1	1	2	3	6	11	26	40	44
		F.	110	7	1	—	—	2	2	1	3	8	29	57
20. Pneumonia (all forms)	...	M.	161	41	17	6	4	2	5	9	26	30	10	11
		F.	142	33	15	5	4	4	4	9	8	24	17	19
21. Other Respiratory Diseases	...	M.	25	3	—	—	1	—	3	4	5	2	5	2
		F.	11	—	1	—	—	—	1	2	1	2	2	2
22. Peptic Ulcer	...	M.	21	—	—	—	—	—	1	1	5	8	2	4
		F.	9	—	—	—	—	—	—	1	—	4	3	1
23. Diarrhoea, etc.	...	M.	26	20	2	—	—	—	—	—	—	1	2	1
		F.	22	13	6	—	—	1	—	—	—	—	1	1
24. Appendicitis	...	M.	12	—	—	—	1	1	2	4	1	2	1	—
		F.	4	—	—	—	1	—	—	—	—	1	1	1
25. Cirrhosis of Liver	...	M.	5	—	—	—	—	—	—	2	1	—	2	—
		F.	1	—	—	—	—	—	—	—	—	—	—	1
26. Other Diseases of Liver, etc.	...	M.	2	—	—	—	—	—	—	—	—	1	1	—
		F.	11	—	—	—	—	1	2	—	1	2	3	2
27. Other Digestive Diseases	...	M.	39	4	3	1	—	1	2	2	6	8	9	3
		F.	21	—	1	3	—	—	1	1	5	3	5	2
28. Acute and Chronic Nephritis	...	M.	52	—	—	—	2	—	4	2	6	14	13	11
		F.	51	—	1	—	2	1	1	5	14	10	12	5
29. Puerperal Sepsis	...	F.	7	—	—	—	—	—	3	4	—	—	—	—
30. Other Puerperal Causes	...	F.	9	—	—	—	—	2	4	3	—	—	—	—
31. Congenital Debility, Premature Birth, Malformations, etc.	...	M.	78	78	—	—	—	—	—	—	—	—	—	—
		F.	55	54	—	—	1	—	—	—	—	—	—	—
32. Senility	...	M.	28	—	—	—	—	—	—	—	—	—	4	24
		F.	68	—	—	—	—	—	—	—	—	1	8	59
33. Suicide	...	M.	29	—	—	—	—	2	1	3	11	7	2	3
		F.	8	—	—	—	—	2	2	3	1	—	—	—
34. Other Violence	...	M.	78	2	1	3	12	12	8	7	5	10	10	8
		F.	27	1	1	5	—	1	2	1	3	5	3	5
35. Other Defined Diseases	...	M.	132	16	2	2	7	11	7	8	18	18	26	17
		F.	107	8	2	4	16	6	4	10	7	20	19	11
36. Causes Ill-defined, or Unknown	...	M.	—	—	—	—	—	—	—	—	—	—	—	—
		F.	2	—	—	—	—	—	—	—	—	1	1	—



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
1931	296,700	5,266	17.7	3,384	11.4	330	62

General Provision of Health Services.

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, Whooping Cough, Pneumonia, 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. This Home is used for scarlet fever convalescents, and is capable of accommodating 116 patients. There is an isolation ward containing 4 beds.

Smallpox.

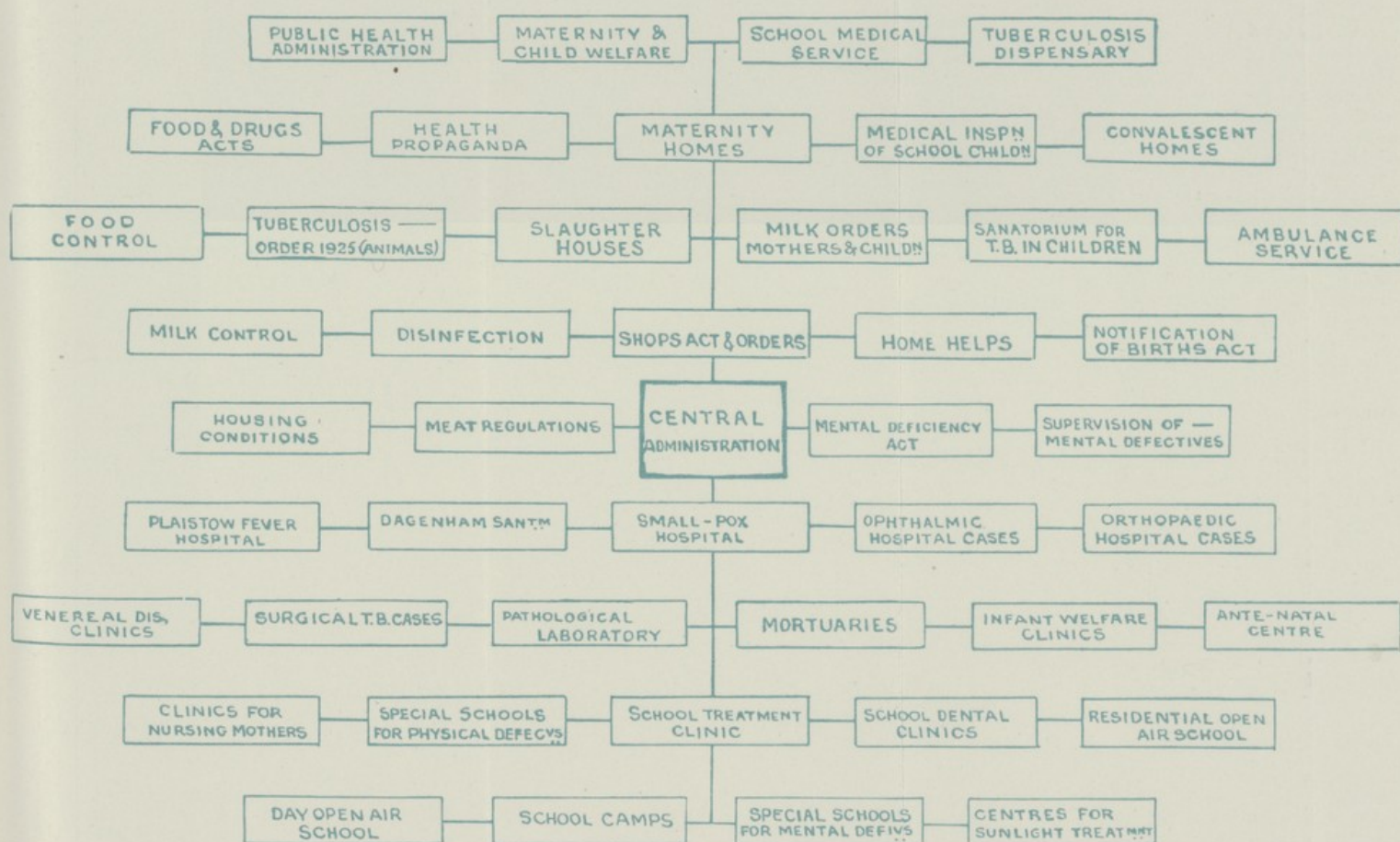
(3) Dagenham Smallpox Hospital, situated about 9 miles from the Borough, occupies a site of $6\frac{1}{2}$ acres, adjoining Rookery Farm which comprises 119 acres owned by the Council; the Fever Hospital and Sanatorium are supplied with milk therefrom. It consists of permanent buildings, capable of accommodating 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 thirteen other authorities for the removal of smallpox cases from their respective areas expires in March, 1932.

The London County Council has received practically all the smallpox cases which have occurred during the year.

Negotiations with the London County Council with regard to the accommodation of smallpox cases from West Ham have now been brought to fruition. Cases from this district are to be received into the hospitals of the London County Council until the end of 1932.

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



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.

Only a very few of the cases of smallpox which occurred during the year could be received at the Orsett Hospital, but the London County Council continued to receive a large number of cases, thereby greatly assisting the Council, and I should like to place on record this kindly action. In view of the foregoing, it was not necessary to re-open Dagenham for the reception of smallpox cases.

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

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. 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 situated within the Borough of Leyton, and is owned by the Council.

The registered accommodation of 741 beds is for acute cases; a few shelters for male tuberculosis cases are also available. As mentioned in my report for 1930, this institution is still very much overcrowded.

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 is owned by the Council. The hospital has 700 beds to accommodate maternity patients, mental cases, and chronic sick.

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

Although an additional 200 beds were provided in 1930, this institution is still seriously overcrowded.

Central Home.

This home is situated within the Borough of Leyton, and is owned by the Council.

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 situated at Northdown Road, Margate, and is owned by the Council. It has accommodation for 110 children, who are sent from West Ham, Walthamstow, Leyton, and East Ham.

Other Institutions.

(6) The Council have an agreement with Queen Mary's Hospital and Plaistow Maternity Hospital for the institutional treatment of maternity cases. (See page 156).

Orthopaedic treatment is carried out at the Children's Hospital, Balaam Street, and at the Brookfield Hospital, Walthamstow. (See page 157).

Cases of Ophthalmia Neonatorum are treated at the Royal London Ophthalmic Hospital and at St. Margaret's Hospital. (See pages 161 and 162).

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.

No changes have taken place during the year in the hospital services.

Vaccination Acts, 1867 to 1898.

The following is a summary of the work carried out under the above mentioned Acts during the year 1931.

No. of Cases in Birth Lists received during the year	...	6241
No. of Certificates of Vaccination received	... ..	2242
No. of Certificates of Postponement owing to—		
Health of Child	... ..	340
Condition of House	... ..	—
Prevalence of Infectious Disease	... ..	6
No. of Certificates under Section 2 of Vaccination Act, 1898, and No. of Statutory Declarations under Section 1 of the Vaccination Act, 1907	...	3152
No. of Certificates of Insusceptibility or of having had Smallpox	... ..	12
No of Cases—		
Parents removed out of District	... ..	795
Otherwise not found	... ..	261
No. of Entries in Lists sent to Public Vaccinator	...	1942

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 or destruction.

In addition there are two motor ambulances for use in the transference of non-infectious and accident cases to and from institutions. In 951 cases persons were removed from one address to another within the Borough, and in 1,130 cases from an address within the Borough to an institution outside, or vice versa. A Nurse accompanies the patient. During the bad weather hot water bottles are supplied. A third ambulance is only used for the removal of smallpox cases.

A new Du Cros Ambulance has been provided in the Silvertown area, mainly for the use of the factories in the Southern portion of the Borough. This ambulance is available for calls between the hours of 7 a.m. and 11 p.m. In this connection it is interesting to record that certain Silvertown Manufacturers have agreed to pay between them an annual contribution towards the maintenance of the ambulance.

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 20 journeys were made under this agreement during 1931.

For cases requiring hospital treatment the ambulance may be requisitioned, 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.

School Clinics† and Treatment Centres.

Stratford Clinic,	2 Dental Clinics.*
84 West Ham Lane, E.	1 Minor Ailment Clinic.
	1 Ophthalmic Clinic.
Balaam Street Clinic,	1 Minor Ailment Clinic.
Plaistow, E.	1 Dental Clinic.
Rosetta Road Clinic,	1 Minor Ailment Clinic.
Custom House, E.	1 Dental Clinic.*
Swanscombe Street Clinic,	1 Minor Ailment Clinic.
Canning Town, E.16.	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 109—130).

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 136—141).

† See Ministry of Health Circular 1216.

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. 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.	Senior Assistant Medical Officer Maternity and Child Welfare
Dr. Janetta J. Powrie,	M.B., Ch.B., 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. S. C. S. Cooke	M.R.C.S., L.R.C.P.	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

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. L. 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. R. V. Brews,	L., L.M., R.C.P. (Ireland) L., L.M., R.C.S. (Ire- land)	Do.
Dr. W. E. Passmore	L.S.A. Lond.) L.M.S.S.A. (Lond.)	Public Vaccinator
Dr. A. S. Paterson	M.B., Ch.B.	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., R.C.S. (Edin.)	Dental Surgeon Maternity and Child Welfare
Miss R. Alefs	General Nursing, C.M.B., Fever Nursing Certifi- cate	Health Visitor

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Miss C. H. Banks	General Nursing, C.M.B., Queen's Nurse, Health Visitors' Cert., Royal San. Inst.	Do.
Miss B. H. Clipstone	General Nursing, C.M.B.	Do.
Miss A. Connolly	General Nursing, Health Visitor's Certificate	Do.
Miss M. Cross	General Nursing, C.M.B.,	Health Visitor
Miss B. de Rochfort	San. Insprs. Cert. Royal San. Inst., Health Visi- tor's Cert. Royal San. Inst., C.M.B., Apothe- cary Hall Dispensing Cert.	Do.
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 Health Visitor's Cert. Royal San. Inst., San. Inspector's Examn. Board	Do.
Miss A. E. Lunn	General Nursing, C.M.B.	Do.
Miss L. Martin	General Nursing, C.M.B., Board of Education Di- ploma, Mat. and Child Welfare Cert.	Do.
Miss M. McKenzie	General Nursing, C.M.B., Health Visitor's Cert. Royal San. Inst.	Do.
Miss F. Moore	General Nursing, C.M.B.,	Do.
Miss C. Norrie	General Nursing Cert & Children's Cert., C.M.B., Board of Edu- cation Diploma, San. Insprs. Cert. Royal San. Inst.	Do.
Miss B. C. Prager	General Nursing Cert., C.M.B., T.B. Cert. Health Visitor's Cert. Royal San. Inst.	Do.
Miss M. B. Wallace	General Nursing, C.M.B.	Do.

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
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.
Miss H. Welham	General Nursing, Fever Cert., C.M.B.	Dental Nurse
Mr. H. G. Clinch M.I.F.E.E. F.S.I.A.	San. Insp. Cert. R. San. Inst., Meat and Food Insp. R. San. Inst., Smoke Insp. R. San. Inst., San. Insp. Joint San. Insprs. Exam. Board, Exam. in ad- vanced knowledge of practical and adminis- trative duties of Insp.	Chief San. Insp.
Miss V. M. Busby M.S.I.A.	San. Insprs. Cert. Royal San. Inst., Royal San. Inst. and San. Insprs. Examn. Board	Sanitary Inspector
Miss B. M. Keogh	San. Insprs. Cert. London Exam. Board, Health Visitor's Cert. Sanitary Inst.	Sanitary Inspector
Miss G. Briggs, M.S.I.A.	San. Insprs. Examn. Joint Board	Sanitary Inspector
Miss A. Maughan, M.S.I.A.	San. Insprs. Cert. Royal San. Inst.	Do.
Mr. B. G. Bannington M.S.I.A.	San. Insprs. Cert. Royal San. Inst., Cert of Lon- don School of Economics (Lond. University) for Social Science and Ad- ministration; Honours- man and Gilchrist Med- allist (Lond. University Extension) for Public Administration.	Sanitary Inspector, Insp. under Rag Flock Acts
Mr. B. J. Driscoll M.S.I.A.	Cert. San. Inspectors' Ex- amn. Board London	Sanitary Inspector
Mr. T. R. Harris M.S.I.A., A.R.San.I.	San. Insprs. Cert., Meat Insp., Royal San. Inst. San. Insprs. Cert., Meat Insp. San. Inspectors' Board, London San. Science Cert. 1st Class, Battersea Poly- technic Diploma in Bacteriology of the Battersea Poly- technic.	Sanitary Inspector, Meat Inspector

NAME	QUALIFICATIONS	OFFICES HELD (Wholtime appointments except where otherwise stated)
Mr. E. F. Hughes M.S.I.A., A.R.San.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.	San. Instrs. Cert., Meat and Food Instr. Royal San. Inst.	Sanitary Inspector.
Mr. A. T. Plackett M.S.I.A.	San. Instrs. Cert. Royal San. Inst.	Sanitary Inspector, Inspector under Rag Flock Acts
Mr. W. H. Roberts M.S.I.A.	San. Instrs. Cert. (1892) Royal San. Inst. Prizeman Building Const. (Honours) Prizeman Civil Engineering (Survey Sec.) West Ham Tech. Inst.	Do. Do.
Mr. C. F. Riley	San. Instrs. Cert., Meat and Food Instr. Royal San. Inst.	Sanitary Inspector.
Mr. Chas. Smith M.S.I.A.	San. Instrs. Cert. (1894) Royal San. Inst. Cert. Building Const. (Adv.) Science and Art Dept., South Kensington.	Do. Do. Inspector under Rag Flock Acts Superannuated February, 1931
Mr. H. A. Smith M.S.I.A.	San. Instrs. Cert. Royal San. Inst.	Sanitary Inspector
Mr. E. G. Simmons M.S.I.A.	San. Instrs. Cert. (1912) Royal San. Inst.	Sanitary Inspector, Instr. under Rag Flock Acts
Mr. E. J. Cromwell, M.S.I.A.	San. Instr. Examn. Joint Board, Meat and Food Inspector Royal San. Inst.	Sanitary Inspector
Mr. H. G. Avril, M.S.I.A., A.R.San.I.	San. Instr. Examn. Joint Board.	Do.
Mr. J. A. Dawson, M.S.I.A.	San. Instr. R.S.I., Meat and Food Instr. R.S.I.	Do.
Mr. E. J. Ferrier		Inspr. under Shops Acts
Miss C. Aitken	General Nursing, Fever Nursing Cert.	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. Clarke	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.

WHIPPS CROSS HOSPITAL.

Matron :	Chief Steward :	Clerks :
Miss E. Downs.	Mr. P. G. Eastman	Mr. C. Samuel.
	(died 2/5/1932)	Mr. J. Lis.
	Assistant Steward :	Mr. J. Jenkins.
	Mr. B. S. Lawrence.	Mr. V. J. Stebbings.
		Mr. D. Jones.
		Mr. R. Adams.
		Mr. F. Shirley.

CENTRAL HOME.

Matron :	Master :	Clerks :
Mrs. M. E. Lambert.	Mr. S. P. Lambert.	Mr. H. Wiggins.
		Mr. H. W. Latter.
		Mr. A. J. Martin.
		Mr. H. W. Hagger.
		Mr. H. W. Quicke.
		Mr. E. C. Steggel.

FOREST GATE HOSPITAL.

Matron :	Steward :	Clerks :
Mrs. E. M. Usherwood.	Mr. E. J. Miles.	Mr. R. F. Sizer.
	Assistant Steward :	Mr. C. P. Chapman.
	Mr. A. J. Fillmore.	Mr. J. W. Barr.
		Mr. A. W. Sawyer.

MARGATE HOME.

Matron :	Clerk & Store Keeper :
Miss G. B. Oddy.	Mr. J. W. Rowe.

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 is set out on page 185.

† A detailed list of the Staff is included in this Report by the request of the Minister of Health in Circular No. 1216.

Shops Acts.

The provisions of the Shops Acts are carried out by Mr. Ferrier 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 1931.

Class of Shop.	Visited.	No half-holiday form exhibited.	Warned verbally.	Warning Notice sent.	Refused to serve.	Summonses attended.
Bakers	203	9	6	...	10	1
Boot repairers, etc.	30	...	1	...	2	...
Butchers	502	25	82	3	76	...
Caterers	50	...	...	...	...	...
Carpets and rugs	21	...	...	...	1	...
Chemists and druggists	85	1	5	...	5	...
China and glassware	100	2	12	5	13	...
Clothiers	217	6	20	1	16	...
Confectionery and tobacco	688	24	117	37	224	4
Corn merchants	35	...	...	...	1	...
Cycle Dealers	37	...	1	...	2	...
Drapers, Milliners and Mantle Dealers	682	36	148	20	96	...
Fishmongers	458	16	74	9	64	...
Fruiterers and Greengrocers	735	26	160	47	155	10
Furniture Dealers	116	1	1	...	4	...
Furriers	12	...	...	...	...	...
Grocers and General	831	35	135	35	188	7
Hairdressers and Barbers	311	3	32	...	20	...
Hosiery and Hatters	179	6	17	3	10	2
Ironmongers	34	...	1	...	1	...
Leather and Grindery	56	...	3	...	6	...
Mixed	598	19	80	7	151	...
Music	87	6	7	...	9	...
Picture Frames	36	...	1	...	1	...
Public Houses	54	2	1	...	...	...
Tailors	176	5	24	...	14	...
Toy and Fancy Goods	92	1	7	...	6	...
Watchmakers, Jewellers and Pawnbrokers	23	...	1	...	...	...
Wireless	86	2	11	...	4	1
Totals	6,534	225	947	167	1,069	25

For results of Police Court Proceedings, see page 61.

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 Hospital, 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 pages 158 and 159. For Maternal Mortality. (See pages 162—169).

Particulars of Bodies Received into the Mortuaries during 1931.

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MONTH.	STRATFORD MORTUARY.											CANNING TOWN MORTUARY.										
	Number received.	No. of bodies in Queen Mary's Hospital. Morty inquests held.	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 ...	15	2	9	8	13	4	13	4	...	10	8	4	3	1	4	...	4	...	...	4	...
February ...	16	3	13	6	19	...	18	1	...	10	11	8	5	3	7	1	7	1	...	8	1	
March ...	19	1	13	7	17	3	20	...	...	12	11	4	2	2	3	1	4	...	...	4	...
April ...	11	4	13	2	12	3	14	1	...	4	11	2	2	...	2	...	1	1	...	2	...	
May ...	10	1	8	3	8	3	10	1	...	6	6	1	1	...	1	...	1	...	...	1	...
June ...	10	2	9	3	11	1	6	6	...	6	7	6	5	1	6	...	2	1	3	2	1	
July ...	5	2	7	...	7	...	4	3	...	3	4	2	1	1	1	1	1	1	...	2	1	
August ...	13	2	9	6	11	4	8	7	...	8	9	3	2	1	2	1	2	1	...	3	...	
September...	11	2	10	3	13	...	9	4	...	5	9	1	...	1	1	...	1	...	...	1	...
October ...	13	...	10	3	12	1	10	3	...	8	6	3	2	1	1	2	1	2	...	2	2	
November...	8	...	4	4	6	2	5	3	...	5	4	3	2	1	3	...	3	...	...	3	...
December ...	10	2	7	5	11	1	8	4	...	8	6	5	2	3	4	1	4	1	...	4	...	
Total ...	141	21	112	50	140	22	125	37	...	85	92	42	27	15	35	7	31	8	3	36	5	
Grand Total	162		162		162		162					42	42		42		42					

Number of Days Bodies remained in Mortuaries :—

58 remained 1 Day in Stratford Mortuary.

30	„	2	Days	„	„	„
31	„	3	„	„	„	„
10	„	4	„	„	„	„
2	„	5	„	„	„	„
4	„	6	„	„	„	„
3	„	7	„	„	„	„
2	„	8	„	„	„	„
1	„	9	„	„	„	„

8 remained 1 Day in Canning Town Mortuary.

13	„	2	Days	„	„	„	„
11	„	3	„	„	„	„	„
5	„	4	„	„	„	„	„
2	„	5	„	„	„	„	„
3	„	8	„	„	„	„	„

2 Doctors performed 6 Post-Mortem Examinations each

4	„	„	5	„	„	„	„
3	„	„	4	„	„	„	„
3	„	„	3	„	„	„	„
11	„	„	2	„	„	„	„
46	„	„	1	„	„	„	„

Sanitary Circumstances of the Area.

WATER.

Practically the whole of the Borough is supplied with water by the Metropolitan Water Board, but a few large factories have private wells for drawing water from the chalk. The supply is constant, and in every case it is conveyed directly to the house.

With regard to the water supply for domestic purposes, a complaint of the peculiar taste of the water was received from a householder in the north of the Borough. Samples were taken from the main service pipe, and submitted for chemical and bacteriological examinations. The result of these examinations proved that the water contained a trace of contaminating materials. The matter was taken up with the Metropolitan Water Board, who thoroughly flushed out the main, with the result that the water supply has since been satisfactory.

RIVERS AND STREAMS.

The Thames and the Lee are both tidal rivers. Part of the Lee and the whole of the Thames abutting on the Borough are under the control of the Port of London Authority. The remainder of the River Lee and the Back Rivers connecting therewith which pass through the Borough come under the control of the Lee Conservancy and the newly created River Lee Catchment Board.

The Council have hitherto been responsible for the maintenance of the river banks under powers which have devolved upon them as successors to the Dagenham Commissioners, but the Land Drainage Act, 1930, has transferred certain of these powers to the River Lee and River Roding Catchment Boards.

The Council are carrying out, in conjunction with the Lee Conservancy Board a large scheme for the improvement of the Back Rivers of the Borough under the provisions of the River Lee (Flood Relief, etc.) Act, 1930.

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 a main sewer which passes through portions of East Ham and North Woolwich, and discharges into the London County Council's sewer at North Woolwich.

With the exception of a few isolated cottages 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.

SCAVENGING.

This work is carried out by the Borough Surveyor's Department.

The main roads are cleansed nightly, and the remainder of the thoroughfares either daily or two or three times a week, according to circumstances.

Two "Karrier" motor sweepers are utilised to assist in this work.

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 the following methods:—

1. By controlled tipping.

The larger proportion of the refuse collected is shot on controlled tipping dump at Beckton Road, and East Ham Tip at Barking Road.

2. Crude Dumping.

A small quantity which is collected by horse carts in the Northern district is dumped at Temple Mills.

Common Lodging Houses.

There are ten Common Lodging Houses in the Borough, four in the North and six in the South. These were, with one exception, originally constructed and used for other purposes, such as private dwelling houses, but have been adapted to meet the Bye Laws governing Common Lodging Houses.

The total number of beds at these houses is 561.

Two common lodging houses were demolished in connection with the Royal Victoria and other Docks Approaches (Improvement) Act, 1929.

The Sanitary Inspectors keep these premises under constant surveillance. During the year 56 inspections were carried out, but it was not necessary to serve any statutory notices, or issue any letters of warning.

No applications were received for registration of new premises, or for increased accommodation at the existing houses.

In the South of the Borough there are a number of premises used as Seamen's Lodgings. Constant visits are paid to these by the Sanitary Inspectors. Twenty-five inspections were made; three notices were served and complied with, and five warning letters were issued.

Rag Flock Acts 1911 and 1928.

There are four makers of Rag Flock in the Borough. Their premises are under constant supervision both by the Sanitary Inspectors and by H.M. Factory Inspectors. Fifteen samples of Rag Flock were taken for analysis, two samples were certified by the Public Analyst to contain soluble chlorine in excess of the 30 parts per 100,000 permitted by the Rag Flock Regulations, 1912. Proceedings were instituted, and in each case the summons was dismissed, without costs, owing to the defence disputing the accuracy of the analysis, and it being impossible in the absence of a third portion of each sample to bring further proof.

Offensive Trades.

There are twenty-eight 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	18
Chemical Manure Manufacturers	1
Soap Boilers	3
Gut Scrapers	2
Fish Waste Collectors and Fish Meal Manu- facturers	2
Tripe Dressers	1
Animal Charcoal making	1

An application was received for permission to manufacture soap powder at premises at the rear of Neville Road, Upton Park. The premises were visited and inspected, and full investigations made. The process to be employed was considered to constitute soap boiling within the meaning of Section 112 of the Public Health Act, 1875, and permission was not granted by the Council as asked for.

Application was received for sanction to carry on the business of Fat and Bone Boiling at premises recently occupied at Hunt's Lane, Stratford. These premises were originally licensed by the Local Board for carrying out the trade of Bone Boiling only. It was contended by the applicants that Fat and Bone Boiling was carried on before the coming into force of the Public Health Act, 1875, and had been continuous to date, and therefore the licence was not affected by any legislation.

The matter was considered by the Council, who, after hearing all the facts of the case, decided not to grant permission for the establishment of Fat Boiling.

An application was also received for the manufacture of Animal Charcoal and the treatment of all bye-products yielded in the process, at Bow Bridge Works, Stratford. In this connection it was found that the process consisted of the treatment of various types of bones sent to the factory by collectors from Butchers and from overseas, the treatment of carcasses to obtain bones, the recovery of all fats, carbonising of the fat-free bones, and the recovery of oil and ammonia as bye-products. This business definitely constituted an offensive trade of the nature of fat and bone boiling, and the Council were unable to grant such application.

A schedule of offensive trades will be found on page 44.

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 a Chief Assistant School Medical Officer, 6 Assistant 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.

In this connection improvements were carried out in the buildings at seven schools, and these schools have since been removed from the "Black List" of the Board of Education.

The remodelling of latrines took place at five of the Council's Schools, and improvements were carried out at three schools.

Hot water systems have also been installed in several schools.

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.

Places of Public Amusement.

Ministry of Health Circular 120 of 1920.

One hundred and forty-four visits have been made to places of public amusement. Conditions generally in such places are improving, but the ventilation of certain cinemas still leaves room for improvement.

Smoke Abatement.

Public Health Act, 1875.

Public Health (Smoke Abatement) Act, 1926.

One prosecution was initiated in respect of a large confectionery factory resulting in an Order to Abate. The firm concerned made various improvements to their boiler plant, and no further action has been necessary.

Eighteen Notices of Offence were served in respect of observed offences, and in most cases improvement followed.

One Statutory Notice was served by authority of the Council; this concerned an electrical generating plant, and the necessary improvement followed.

Forty-one observations of factory chimneys were taken, one hundred and twenty-nine visits to boiler plants were made, mostly of an instructional nature.

The large waste food product factory dealing with fish waste, etc., referred to in the last Annual Report continues to be run on very efficient lines. The method of dealing with fumes from digesters and cookers still proves highly satisfactory.

Stoves—their possible cause of a nuisance.

Stoves of the slow combustion and water heating type are becoming very popular and are being installed in existing buildings without provision for the efficient discharge of the products of combustion. This often gives rise to a nuisance due to offensive and noxious odours.

The usual method of installation is simply to stand the unit on a floor and carry off a flue pipe, generally made of iron or asbestos composition, to the roof. In a very short time this pipe becomes a miniature coal tar distillery. The practice of carrying off flue gases in such a manner is undesirable, since a stack of such description must of necessity remain comparatively cold.

A consideration of combustion at this part will explain the reasoning.

Coal burns to CO₂, and during the process other gases are evolved from what are known technically as volatile matters. They are many, but our interest is centred in the compound "Ammonium Sulphide," a condensate easily obtained and possessing a characteristic pungent odour. This substance condenses on the sides of the flue and trickles down to the base and under certain conditions is again volatilized, producing a noxious odour. The conversion back to gas of these liquors is intermittent and the odour is sometimes wrongly associated with foul drains.

In future legislation, regard might be given to this matter.

Railway Clauses Consolidation Act, 1845.

Regulation of Railways Act, 1868.

Two Railway Companies were warned in respect of excessive emissions of smoke from certain of their locomotives. In each case considerable improvement followed.

Housing of the Working Classes Act, 1885.

Public Health Act, 1925.

Bye-laws under Municipal Corporations Act, 1882.

Tents, Vans and Sheds.

During the autumn, conditions at an encampment of van dwellers reached a state of overcrowding such that official notice became necessary, and the owner of the land was informed that he would not be permitted to let vans for habitation except under suitable conditions. At the year end, action was being taken by him to obtain orders for possession of the vans.

Various van dwellers staying temporarily at a Fair Ground in the Stratford Area, were the source of trouble through carelessness in failing to keep surface gullies clear with consequent discharge of offensive liquids on to a public roadway adjoining. Following instructions by the proprietor the trouble ceased.

Summary of Work of Sanitary Inspectors.

Houses visited in connection with Infectious Diseases	...	2444
Houses, Factories, and any other premises visited in connection with smallpox	... ..	13895
Visits to Factories	... ..	409
,, Workshops	... ..	689
,, Outworkers	... ..	475
,, Bakehouses	... ..	300
,, Dairies	... ..	552
,, Common Lodging Houses	... ..	64
,, Houses Let in Lodgings	... ..	1
,, Cellar Dwellings, Underground Rooms, etc.	... ..	11
,, Slaughterhouses	... ..	80
,, Fish Friers	... ..	139
,, Knackers' Yards	... ..	15
,, Cafe and Restaurant Kitchens, etc., P.H.A. 1925	...	557
,, Ice Cream Makers or Dealers, W.H.C.A.	...	452
,, Other Food Purveyors	... ..	3585
Visits re Burial Act 1857, Section 25, Exhumation of Human Remains	... ..	1
,, Private Houses to investigate complaints	...	6265
,, Offensive Trades	... ..	155
,, Other Noxious Trades	... ..	102
,, Canal Boats	... ..	1
,, Imported Food (Labelling) Order, 1921	...	225
,, Drainage Inspections	... ..	5076
,, Rats and Mice Destruction Act	... ..	73
,, Increase of Rent Restriction, etc., Acts	... ..	5
,, Bye-Laws—Tents, Vans, Sheds	... ..	20
Houses Inspected under the Housing Act, 1930	... ..	1926
Other Houses Inspected—House-to-House	... ..	2738
Smoke Observations—half-hour	... ..	41
Visits to Factories re Smoke	... ..	127
,, Steam Whistles Act, 1872	... ..	2
Visits to Places of Public Amusement, Theatres, Music Halls, Cinemas, etc.	... ..	144
Other Visits	... ..	1165
Re-inspections	... ..	30659
Total Visits		72,422

Samples purchased under Rag Flock Acts	15
Samples of Domestic Water supplies taken for analysis or bacteriological examination	2
Total Notices served	*7525
Warning Letters sent re matters not dealt with by notice...	165
Defective Houses dealt with	6809
Other Defective or Insanitary Conditions dealt with ...	375
Drain Tests carried out	416
Certificates granted under the Rent Restriction, etc. Act...	3
No. of notices complied with—(1) By owner	*6900
(2) By occupier	57
Summonses issued	646

*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 1931:—

Ward	Inspections	Notices served in respect of
New Town	605	483
Forest Gate	527	396
High Street	670	529
Broadway	395	311
Park	457	377
Upton	435	283
West Ham	423	331
Plashet Road	340	240
Plaistow	638	519
Canning Town and Grange	1515	1036
Ordnance	515	391
Hudsons	433	278
Bemersyde	211	147
Tidal Basin	989	739
Beckton Road	745	536
Custom House and Silvertown	726	524
Totals ...	9624	7120

In this connection, 643 summonses have been issued during the year.

Defects for the Abatement of which Notices were Served.

Drains and Soil Pipes—				Yard Paving—			
Cleansed	...	...	14	Repaired	...	...	661
Repaired	...	...	633	Defects remedied in			
W.C. Pans or Traps—				Roofs	...	...	2772
Cleansed	...	...	1	Floors	...	...	1037
Repaired	...	...	485	Staircases	...	...	339
New provided	...	...	258	Windows	...	...	1916
Surface Gullies—				Doors	...	...	390
Repaired	...	...	1	Fireplaces	...	...	1159
Sinks and Sink Pipes—				Walls and Ceilings	...	...	12256
Repaired	...	...	500	Coppers—			
New provided	...	...	72	Repaired	...	...	664
Stack-pipes and Rain-water Gutters—				Animals improperly kept	...	...	9
Repaired	...	...	1193	Offensive Accumulations	...	...	79
Water Fittings and Cisterns—				Overcrowding	...	...	38
Repaired	...	...	449	Smoke Nuisance	...	...	97
Flushing Apparatus—				Dust receptacles provided	...	...	1159
Repaired	...	...	389	Rooms disinfected	...	...	2663
New Provided	...	...	6	Premises infested with rats	...	...	23
Water supply provided	...	...	20				

A single sanitary notice often specifies more than one defect needing abatement.

Housing.

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

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	10929
The number of inspections made	30659
(2) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	9624
The number of inspections made	27312
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	27
(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	7525

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 Sections 17, 18 and 23 of the Housing Act, 1930 :—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ...	459
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By Owners	172
(b) By Local Authority in default of Owners	Nil

B. Proceedings under Public Health Acts :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	7066
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :	
(a) By Owners	6957
(b) By Local Authority in default of Owners	Nil

C. Proceedings under Sections 19 and 21 of the Housing Act, 1930 :—

- | | |
|---|---|
| (1) Number of dwelling-houses in respect of which Demolition Orders were made. (Undertakings were accepted to make fit in respect of 15, and in 5 cases undertakings were given not to let houses for human habitation) ... | 7 |
| (2) Number of dwelling-houses demolished in pursuance of Demolition Orders | 2 |

D. Proceedings under Section 20 of the Housing Act, 1930 :—

- | | |
|--|-----|
| (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made | Nil |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit | Nil |

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

- | | |
|--|-----|
| (1) Number of dwelling-houses in respect of which notices were served requiring repairs ... | Nil |
| (2) Number of dwelling-houses which were rendered fit after service of formal notices :— | |
| (a) By owners | Nil |
| (b) By local authority in default of owners... | Nil |
| (3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close | Nil |

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

- | | |
|---|-----|
| (1) Number of dwelling-houses in respect of which Closing Orders were made | Nil |
| (2) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit | Nil |

(3) Number of dwelling-houses in respect of which Demolition Orders were made	5
(4) Number of dwelling-houses demolished in pur- suance of Demolition Orders	2

The shortage of houses in this area is still very acute, and this naturally aggravates to a great extent overcrowding. Although a number of houses have been erected during the past few years by the Council and private enterprise, the number has not been nearly sufficient to alleviate to any extent the prevailing overcrowding. Daily requests are received for increased or better housing accommodation. A great handicap in the provision of new houses is the dearth of building sites in the borough. There are approximately 3,000 houses where overcrowding exists.

In most cases the houses in this district are of the terrace type, but the standard varies considerably. Some of the property (averaging 50-70 years old) is in such a bad condition that it is well nigh impossible to put the houses into a reasonably habitable condition. There are approximately 33,500 houses in a reasonable state of repair, 15,000 houses require considerable repair, and 300 houses in bad repair.

Housing Act, 1930.

Following on the completion of the survey preparatory to the formulation of the five years programme for submission to the Ministry, it became necessary thoroughly to examine in detail 689 selected houses and to take a census of their occupants in order that action under Part 1 or Part 2 of the Housing Act, 1930 could be decided upon. This work involved the expenditure of a considerable amount of time, and certain dislocation of the inspectorate from their ordinary duties, and has not yet, of course, produced visible results. A scheme for the clearance of a large area comprising nearly 200 houses was under the consideration of the Council at the year end.

On the completion of the work preparatory to action under Part 1, it was decided to deal with certain types of working class dwellings under Part 2 of the Housing Act, 1930, in order to achieve their more thorough structural repair.

Some of the worst properties in the Borough were selected and by the year end, 459 Notices had been served under Section 17, most of which called for very extensive repairs and in many cases for partial reconstruction. The question of reasonable cost has loomed large on the horizon and a number of cases of threatened appeal have been smoothed out by meetings on the properties concerned between the Chief Inspector and owners with their contractors. It is very difficult in practice, for instance, to specify exactly to what extent a wall is to be pulled down and re-built, but when an owner is on the property and his contractor cuts into a reputed 9 inch wall which has a 4 inch bulge out of plumb, and then finds that it is built of stretchers and bats and is in a highly dangerous condition, such owner is convinced of the need for the expenditure of his money. It is a remarkable fact, taking into account the type of property involved, that up to the time of writing this Report, no appeals have been brought against Notices under Section 17.

Twenty-five official representations have been made under Section 19 of the Act in respect of houses which were unfit for human habitation and could not be rendered so fit at a reasonable expense, and one in respect of a part of a building let separately as a dwelling. Owners or their representatives appeared in respect of 21 houses but in no case was it suggested that the houses concerned could be made fit at a reasonable cost.

Offers to make fit were accepted in respect of fourteen houses, undertakings not to use for human habitation were accepted in respect of five. Demolition orders were made affecting seven, and two had been demolished at the year end, the others being held up pending the provision of alternative accommodation for the occupiers. The part of a building dealt with under Section 20 has been made fit.

There can be no doubt that many more houses could be dealt with under Section 19, if houses were available for persons displaced in those cases where owners fail to make satisfactory offers to make fit.

No appeals of any description were made during the year.

Prosecutions, 1931.

Nuisances (Public Health Act)—

509 Summonses. 293 Summonses withdrawn. 1 Summons dismissed—nuisance not proved.

Failure to Comply with Magistrate's Orders—

118 Summonses. 74 Summonses withdrawn.

Shops (Hours of Closing) Act, 1928—

17 Summonses. 10 Summonses dismissed on payment of costs.

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

7 Summonses. 4 Summonses dismissed on payment of costs.

West Ham Bakers' Half-Holiday Order, 1913—

1 Summons.

Public Health Act, 1875, and Public Health (Smoke Abatement) Act, 1926—

1 Summons.

West Ham Corporation Acts, 1893 and 1898—

16 Summonses. 5 Summonses withdrawn. 12 Summonses adjourned sine die.

Rag Flock Acts, 1911 and 1928—

2 Summonses. 2 Summonses dismissed.

Adulterated Milk—

4 Summonses. 1 Summons dismissed on payment of costs.

Adulterated Vinegar—

1 Summons. 1 Summons dismissed on payment of costs.

Selling Sausages adulterated with sulphur di-oxide—

1 Summons.

Selling Sausages containing preservative, without labelling the same—

1 Summons.

Selling Meat adulterated with sulphur di-oxide—

1 Summons.

For carrying on the trade of a dairyman without being registered—

2 Summonses.

For using premises as a Dairy without same being registered—

2 Summonses.

1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
Factories (Including Factory Laundries)	381	2	...
Workshops (Including Workshop Laundries)	677	14	...
Workplaces (Other than Outworkers' premises)	74	...	...
Total	1132	16	...

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 ...	33	33	...	...
Want of ventilation ...	...	...	...	...
Overcrowding ... ..	...	...	...	...
Want of drainage of floors	...	...	...	...
Other Nuisances	3	3	...	...
Sanitary Accommodation—				
Insufficient	2	2	...	...
Unsuitable or defective...	8	8	...	...
Not separate for sexes ...	...	...	...	...
Offences under the Factory and Workshop Acts :				
Illegal occupation of underground bakehouse (s. 101) ... ..	...	...	...	...
Other Offences ... ..	...	...	...	...
(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	46	46	...	...

* 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.....			
Lampshades.....			
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.

Four hundred and fifty-two inspections of dairies and milk purveyors' premises were made during the year. Three applications for registration of retail purveyors were refused on account of unsuitability of premises. An appeal was made to the Court in respect of one which was dismissed. A further appeal to Quarter Sessions was pending at the year end.

Twenty-one persons were registered as purveyors of bottled milk only, 7 new dairies were registered and the occupiers registered as dairymen, 7 dairies were removed from the register, two dairymen occupying premises without the Borough were registered as purveyors within the Borough, and transfers were registered in respect of 10 dairies and 6 purveyors of bottled milk only. There are now 140 premises registered as dairies and their occupiers as dairymen, and 655 persons registered as purveyors of bottled milk only.

A considerable improvement is being effected in the conditions under which milk is prepared and stored for sale.

Examination of Milk.

Animal Inoculation.

Thirty-two samples of milk were taken from producers and 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	Council School (3rd pt. bt.)	No evidence of T.B. Infection
2	Council School (3rd pt. bt.)	No evidence of T.B. Infection
3	Council School (3rd pt. bt.)	No evidence of T.B. Infection
4	Council School (3rd pt. bt.)	No evidence of T.B. Infection
5	Council School (3rd pt. bt.)	No evidence of T.B. Infection

- 6 Purveyor (Milk pram) ... No evidence of T.B. Infection
- 7 Council School (3rd pt. bt.) No evidence of T.B. Infection
- 8 Cowkeeper (Pail in dairy) ... 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 Cowkeeper (Counter Pan) ... No evidence of T.B. Infection
- 12 Purveyor (Churn in dairy) No evidence of T.B. Infection
- 13 Purveyor (Milk pram) ... No evidence of T.B. Infection
- 14 Council School (3rd pt. bt.) No evidence of T.B. Infection
- 15 Cowkeeper (Counter pan) ... No evidence of T.B. Infection
- 16 Purveyor (Bottle in shop) ... No evidence of T.B. Infection
- 17 Cowkeeper (Pail in dairy) ... No evidence of T.B. Infection
- 18 Purveyor (Bottle in shop) ... No evidence of T.B. Infection
- 19 Cowkeeper (Counter pan) .. No evidence of T.B. Infection
- 20 Purveyor (Counter pan) ... No evidence of T.B. Infection
- 21 Purveyor (Counter pan) ... No evidence of T.B. Infection
- 22 Purveyor (Hand can, in dairy) No evidence of T.B. Infection
- 23 Purveyor Churn in dairy) No evidence of T.B. Infection
- 24 Purveyor (Churn in dairy) No evidence of T.B. Infection
- 25 Cowkeeper (Pail in Dairy) No evidence of T.B. Infection
- 26 Purveyor (Milk pram) ... No evidence of T.B. Infection
- 27 Council School (3rd pt. bt.) No evidence of T.B. Infection
- 28 Purveyor (Bottle in shop) ... No evidence of T.B. Infection
- 29 Cowkeeper (Pail in dairy) ... No evidence of T.B. Infection
- 30* Cowkeeper (Pail in dairy) ... Evidence of T.B. Infection
- 31 Purveyor (Churn in dairy) ... No evidence of T.B. Infection
- 32 Purveyor (Bottle in shop) ... No evidence of T.B. Infection

No. 10. With reference to this sample the matter was immediately reported to the Medical Officer of Health of the producing area concerned, who caused samples of milk to be taken from the farm. These proved negative to the animal inoculation test. A subsequent sample from this producer was taken in this area, which proved satisfactory.

No. 30. In this case the milk having been produced in this area the Council's Veterinary Surgeon visited the producer's premises. The result of the examination revealed one animal suffering from tuberculosis, which was dealt with under the Tuberculosis Order, 1925 (see page 90). Subsequent samples were taken for animal inoculation, and these proved satisfactory.

Condensed Milk Regulations.

Thirty-eight samples of condensed milk were taken as follows :—

Condensed Full Cream Milk Sweetened	12
--	----

Of these, seven samples were purchased for the purpose of testing the equivalent.

Condensed Full Cream Milk Unsweetened	3
--	---

Of this number, two samples were purchased for the purpose of testing the equivalent.

Condensed Machine-Skimmed Milk Sweetened	23
---	----

Of these, twelve samples were purchased for the purpose of testing the equivalent.

The particulars as to labelling conformed to the requirements of the regulations.

BACTERIOLOGICAL EXAMINATIONS.

Thirty-four samples of milk were taken for bacteriological examination from producers and purveyors (counter pans, churns, bottles and pails), with the following results :—

- 1* Council School (3rd pint bottle) ... B. Coli present in 1 c.c.
- 1a Council School (3rd pint bottle) ... Satisfactory
- 2 Council School (3rd pint bottle) ... Satisfactory
- 3 Council School (3rd pint bottle) ... Satisfactory
- 4 Council School (3rd pint bottle) ... Satisfactory
- 5* Council School (3rd pint bottle) ... Excessive bacteria
- 6* Council School (3rd pint bottle) ... Excessive bacteria
- 7 Council School (3rd pint bottle) ... Satisfactory
- 8 Council School (3rd pint bottle) ... Satisfactory
- 9 Council School (3rd pint bottle) ... Satisfactory
- 10 Council School (3rd pint bottle) ... Satisfactory
- 11 Council School (3rd pint bottle) ... Satisfactory
- 12 Council School (3rd pint bottle) ... Satisfactory
- 13* Council School (3rd pint bottle) ... Excessive bacteria
- 14 Producer (Churn in dairy) ... Satisfactory
- 15 Purveyor (Pail in dairy) ... Satisfactory
- 16 Producer (Pail in dairy) ... Satisfactory
- 17 Council School (3rd pint bottle) ... Satisfactory

18	Purveyor (hand can in dairy) ...	Satisfactory
19	Purveyor (Pram in street) ...	Satisfactory
20	Purveyor (Churn in dairy) ...	Satisfactory
21	Purveyor (Churn in dairy) ...	Satisfactory
22	Producer (Pail in dairy) ...	Satisfactory
23	Purveyor (Pram in street) ...	Satisfactory
24	Purveyor (Pram in street) ...	Satisfactory
25	Purveyor (Counter pan) ...	Satisfactory
26	Council School (3rd pint bottle)...	Satisfactory
27	Council School (3rd pint bottle)...	Satisfactory
28	Purveyor (Bottle in shop) ...	Satisfactory
29	Council School (3rd pint bottle)...	Satisfactory
30	Producer (Pail in dairy) ...	Satisfactory
31	Producer (Pail in shop) ...	Satisfactory
32	Purveyor (Churn in dairy) ...	Satisfactory
33	Purveyor (Bottle in shop) ...	Satisfactory

With reference to sample No. 1, a subsequent sample, No. 3, proved satisfactory.

In the case of Nos. 5 and 6, subsequent samples (Nos. 14 and 31) proved satisfactory.

With reference to No. 13, subsequent sample, No. 15, proved satisfactory.

In all cases of unsatisfactory reports, vendors are cautioned, and the premises and utensils are examined.

Five samples of milk were taken from producers for examination as to the presence of para-typhoid, all of which proved satisfactory samples.

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

Nine samples of various foods were reported upon as being adulterated with preservatives as under:—

Sausages	Containing sulphur di-oxide	Official Warned
Meat	do.	Unofficial Same
Meat	Genuine	Official Retailer.
Meat	Genuine	Official

Meat	Containing sulphur di-oxide	Official	Same
Meat	do.	Official	Retailer.
			Prosecution followed.
Meat	do.	Official	Letter of
			Caution sent.
Meat	do.	Official	Letter of
Sausages	Containing sulphur di-oxide	Official	Caution sent.
Meat	Genuine	Official	Same
			Retailer.
Sausages	Containing sulphur di-oxide	Official	Prosecution
			followed.
Sausages	do.	Official	Letter of
			Caution sent.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

During the year 1931 the following licences were granted:—

Twelve to sell Grade "A" (Tuberculin Tested) Milk, including five supplementary licences; four to sell Certified Milk; one to produce, bottle and sell, and eight to sell Grade "A" milk, including five supplementary licences; one to pasteurise and sell, and eighteen to sell Pasteurised Milk, including fourteen supplementary licences.

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

Pasteurised—

Satisfactory, 61.

Unsatisfactory, 2 (Excessive Bacteria).

Grade "A" (Tuberculin Tested)—

Satisfactory, 8.

Unsatisfactory, 4 (B. Coli present in $\frac{1}{100}$ cc.)

Grade "A"—

Satisfactory, 22.

Unsatisfactory, 9 (1 Excessive Bacteria and 8 B. Coli present in $\frac{1}{100}$ cc.)

Certified—

Satisfactory, 6.

Unsatisfactory, 0.

Grade "A" Pasteurised—

Satisfactory, 1.

Unsatisfactory, 1 (B. Coli present in $\frac{1}{10}$ cc.)

With regard to all cases of designated milk failing to meet the requirements of the Order, special letters of caution were sent asking for immediate investigations to be made with a view to tracing the source of contamination and preventing a recurrence.

Other Foods.

All factories dealing with food of various kinds, also retail shops, bakehouses (there are 34 underground bakehouses), and other premises, are under the constant supervision of the District Sanitary Inspectors, and 5,585 inspections were made during the year.

The Inspector under the Food and Drugs Acts is also the Inspector and Official Sampler under the Fertilisers and Feeding Stuffs' Act, 1926.

Ice Cream.

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

- | | |
|---|---|
| 1. Satisfactory (from barrow in street) | — |
| 2. Bacterial Count heavy and B. Welchii present in 10 c.c. (from barrow in street) | Letter of caution sent, premises and utensils inspected. Sampled again; see No. 13. |
| 3. Satisfactory (from barrow outside Recreation Ground) | — |
| 4. Bacterial Count heavy, and streptococci present in 1 c.c. (from barrow in street) ... | Letter of caution sent, premises and utensils inspected. Sampled again; see No. 19. |
| 5. Satisfactory (from barrow outside school) | — |
| 6. Satisfactory (from barrow in street) | — |

7. Satisfactory bacterial count, but contained B. Coli in 1 c.c. (from Barrow outside Recreation Ground) ...	Letter of caution sent, premises and utensils inspected. Sampled again; see Nos. 15 and 24.
8. Satisfactory (from travelling cart) ...	—
9. Bacterial Count and Microscopical Examination satisfactory, but B. Welchii present in 10 c.c. (from barrow in street) ...	Letter of caution sent, premises and utensils inspected. Sampled again; see No. 20.
10. Bacterial Count and Microscopical Examination satisfactory, but B. Welchii present in 10 c.c. (from barrow in street) ...	Letter of caution sent, premises and utensils inspected.
11. Bacterial Count satisfactory, but contained pus cells, and an excess of streptococci (from barrow in street) ...	Letter of caution sent, premises and utensils inspected. Sampled again; see No. 23.
12. Satisfactory (from stall outside premises) ...	—
13. Satisfactory (from barrow in street) ...	—
14. Satisfactory (from barrow outside Recreation Ground) ...	—
15. Satisfactory (from barrow in street) ...	—
16. Satisfactory (from stall outside premises) ...	—
17. Satisfactory (from box tricycle) ...	—
18. Bacterial Count heavy (from barrow in street) ...	Letter of caution sent, premises and utensils inspected.
19. Satisfactory (from barrow in street) ...	—
20. Bacterial Count heavy, but B. Welchii present in 10 c.c. (Temp. High), (from barrow in street) ...	Premises and utensils inspected.
21. Bacterial Count heavy (Temp. High), (from barrow in street) ...	Premises and utensils inspected. See No. 27.
22. Bacterial Count heavy (Temp. High), (from stall outside premises) ...	Premises and utensils inspected.

- | | |
|--|---------------------------------------|
| 23. Bacterial Count heavy, but
B. Welchii present in 10 c.c.
(Temp. High), (from bar-
row in street) | Premises and utensils in-
spected. |
| 24. Excessive Bacteria (from
barrow outside Recreation
Ground) | Premises and utensils in-
spected. |
| 25. Satisfactory (from stall out-
side Recreation Ground) ... | — |
| 26. Satisfactory (from stall out-
side premises) | — |
| 27. Excessive Bacteria (from
barrow in street) | Premises and utensils in-
spected. |

UNSOUND FOOD CONDEMNED.

Bananas	30
Cherries	20 boats
Cod	10st.
Condensed Milk	1 Tin
Conger Eel	5st.
Dabs	5st.
Fresh Haddock	6lbs.
Grapes	14 barrels
Halibot	15st. 11lbs.
Ham	24lbs.
Lemon Soles	1 Box
Lobsters	7
Mushrooms	1 Basket
Oranges	22 Cases
Pears	24 Boxes and 5lbs.
Pigs' Heads	35lbs.
Potatoes	43cwts.
Rabbits	2
Shrimps	3qts.
Skate	8st.
Skate Wings	3 Boxes
Skates' Eyeballs	$\frac{1}{2}$ cwt.
Tomatoes	102 Boxes and 3 Trays
Veal	7lb. Tins
Winkles	4 $\frac{1}{2}$ Bags.

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 number of inspections of all foods exposed for sale was increased during the summer Saturday evenings, with beneficial results.

Food Premises and Factories.

Butchers', fish, fruit and vegetable shops, and sausage, meat pie, brawn and other preserved food makers' premises and factories received 3,180 visits of inspection. Certain of these premises are not yet satisfactory, and pressure is being brought to bear on the occupiers.

Samples Analysed by Borough Analyst, 1931.

Articles	Analysed		Genuine		Adulterated	
	Official	Unofficial	Official	Unofficial	Official	Unofficial
Milk	444	5	439	4	5	1
Condensed Milk	21	17	21	17	—	—
Dried Milk	24	3	24	3	—	—
Margarine	8	2	7	2	1	—
Cheese	2	1	2	1	—	—
Dripping	9	6	6	4	3	2
Butter	119	95	117	94	2	1
Lard	21	21	21	21	—	—
S.R. Flour	32	—	32	—	—	—
Arrowroot	5	5	5	5	—	—
Mustard	3	—	3	—	—	—
Vinegar	43	—	39	—	4	—
Cornflour	1	—	1	—	—	—
Mincemeat	3	5	3	5	—	—
Pepper	24	32	24	32	—	—
Rice	2	—	2	—	—	—
Peas	3	—	3	—	—	—
Orange Crush Syrup	1	—	1	—	—	—
Tea	41	—	41	—	—	—
Preserved Ginger	1	—	1	—	—	—
Cocoa	16	1	16	1	—	—
Cake	4	—	4	—	—	—
Whiskey	1	2	1	2	—	—
Suet	—	1	—	1	—	—
Meat	22	21	18	20	4	1
Honey	1	1	1	1	—	—
Sausages	17	2	13	2	4	—
Bacon	11	4	11	4	—	—
Seidlitz Powder	—	1	—	1	—	—
Cherry Brandy	1	—	1	—	—	—
Jam	14	9	14	9	—	—
Confectionery	24	2	24	2	—	—
Baking Powder	2	1	2	1	—	—
Gin	—	2	—	2	—	—

Continued at top of next page.

Samples Analysed by Borough Analyst, 1931.—*Contd.*

Articles	Analysed		Genuine		Adulterated	
	Official	Unofficial	Official	Unofficial	Official	Unofficial
Tapioca ...	2	1	2	1	—	—
Lemon Squash ...	1	—	1	—	—	—
Chicken and Ham Paste, etc.	4	1	4	1	—	—
Cream Buns ...	—	2	—	2	—	—
Beer ...	13	—	13	—	—	—
Ginger Wine ...	1	—	1	—	—	—
Boracic Powder ...	—	2	—	2	—	—
Fruit Wine ...	1	—	1	—	—	—
Sultanas ...	2	2	2	2	—	—
Dessicated Cocoanut	1	—	1	—	—	—
Marmalade ...	1	—	1	—	—	—
Fruit Salad ...	1	—	1	—	—	—
Borax ...	1	2	1	2	—	—
Bread ...	1	—	1	—	—	—
Mixed Peel ...	2	6	2	6	—	—
Slab Jellies ...	2	—	2	—	—	—
Tomatoes (Tinned) ..	1	—	1	—	—	—
Ground Almonds ...	1	2	1	2	—	—
Pearl Barley ...	5	4	5	4	—	—
Epsom Salts ...	1	3	1	3	—	—
Boracic Ointment ...	—	1	—	1	—	—
Veal Loaf ...	1	0	1	0	—	—
Camphorated Oil ...	1	3	1	3	—	—
Coffee ...	4	1	4	1	—	—
Ground Ginger ...	3	3	3	3	—	—
Sauce ...	1	—	1	—	—	—
Krusto Pastry Maker	1	—	1	—	—	—
Dried Mixed Fruit ...	4	3	4	3	—	—
Pickles ...	—	5	—	5	—	—
Pres. Sausage ...	3	—	3	—	—	—
Breakfast Sausage ..	—	1	—	1	—	—
Ointment ...	—	1	—	1	—	—
Brawn ...	3	—	3	—	—	—
Olive Oil ...	1	—	1	—	—	—
Flour ...	6	—	6	—	—	—
Raspberry Powder ..	1	—	1	—	—	—
Lemonade Powder ..	2	—	2	—	—	—
Sugar ...	2	1	2	1	—	—
Corned Beef ...	2	—	2	—	—	—
Cream ...	7	6	7	6	—	—
Lemon Curd ...	1	1	1	1	—	—
Lemonade ...	2	—	2	—	—	—
Totals ...	1066	290	983	285	23	5

For List of Prosecutions taken in connection with adulterated articles, see page 61.

Sale of Food (Labelling) Order, 1921.

Two hundred and seventy-two inspections of butchers' shops were made specially to ensure compliance with the above Order. There has been a great improvement in this respect, and imported meat is now being sold generally under appropriate labels, "Imported Meat" or notices bearing the country of origin.

Public Health Act, 1925. Section 72.

Considerable pressure was again brought to bear on the occupiers of cafes and eating houses; 525 inspections of the kitchens of these places were made, numerous verbal warnings and suggestions were given, and in twenty cases warning notices were sent.

Bakehouses.

Factory and Workshops Act, 1901.

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

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

Factories	...	...	...	64
Workshops	...	...	...	13
Domestic Bakehouses	...	...	...	8
Cellar Bakehouses	...	...	...	35

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

During the year the Sanitary Inspectors have made 295 visits to bakehouses, and appropriate action has been taken in all cases where necessary.

The Public Health (Meat) Regulations, 1924.

The 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:

In this report we review the work carried out under the Regulations during the year (excepting 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.

Several cases of notifiable disease were observed among the 4,448 animals which were inspected before slaughter, and were dealt with by the Veterinary Officer under the Diseases of Animals Acts, while a number were also noted for particular attention after slaughter. Among these were several cases of tuberculosis of the udder.

Post-Mortem Examinations.

The animals inspected after slaughter numbered 12,158, and of these 1,551, or 12.75 per cent., were diseased.

Bovines accounted for 2,133, and of this number 928, or 43.50 per cent., were affected with tuberculosis, while 269, or 12.61 per cent., were otherwise diseased. Swine numbered 1,909 and 133, or 6.96 per cent., were tubercular, and 73, or 3.82 per cent., were suffering with other diseases. 8,115 sheep were examined and 148, or 1.82 per cent., were found to be diseased.

In Table I. is given detailed information as to the numbers and percentages of animals diseased, and Tables II., III., and IV. give particulars of the meat found to be diseased 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 observed in bovines and swine is slightly higher than in previous years.

The presence of any degree of tuberculosis in an 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 a great deal of time was spent upon such examinations.

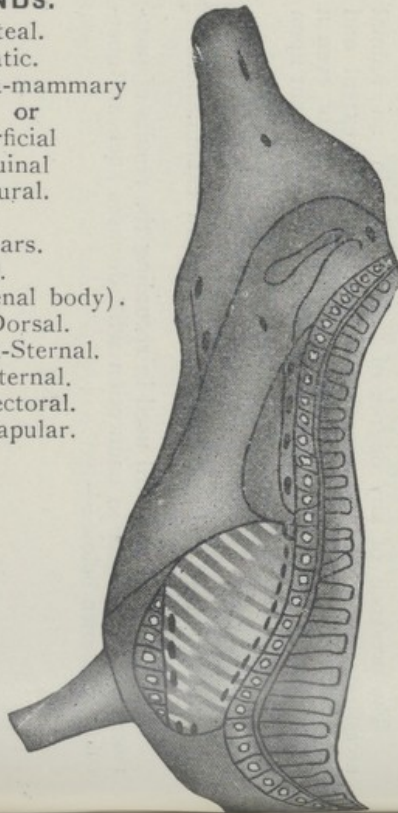
In Tables VI and VII details are given of the deposition of tubercular lesions observed during post-mortem examinations.

A specimen of the card used in recording the results of post-mortem examinations in connection with diseases such as tuberculosis is shown below :—

Front. COUNTY BOROUGH OF WEST HAM. SLAUGHTER HOUSE AT.....

Left Side.
GLANDS.

Popliteal.
Ischiatic.
Supra-mammary
or
Superficial
Inguinal
Precrural.
Iliac.
Lumbar.
Renal.
(Adrenal body).
Sub-Dorsal.
Supra-Sternal.
Pre-Sternal.
Prepectoral.
Prescapular.



Description of Animal.

Date.....

Owner.....

Sex..... Age.....

Breed..... Weight.....

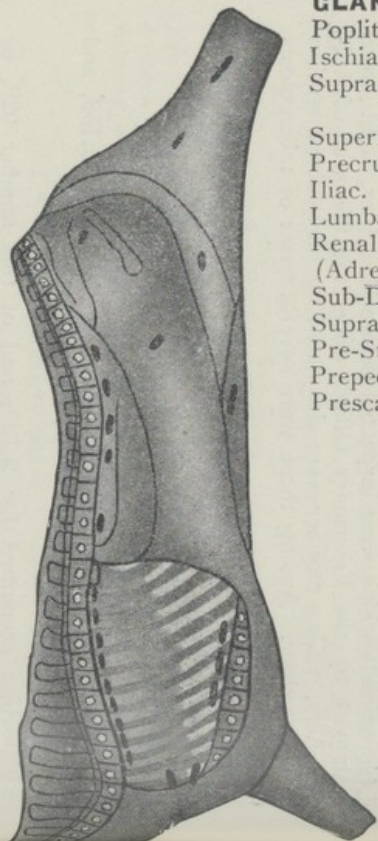
ORGANS.

Head and Tongue.
" " Glands, Parotid.
" " " Sub-maxillary.
" " " Retropharyngeal.
Lungs.
" Glands, Bronchial.
" " Mediastinal, Ant.
" " " Post.
Heart.
" Pericardium.
" Glands.
Stomach.
" Glands.
Spleen.
" Glands.
Liver.
" Glands.
Pancreas.
" Glands.
Mesentery.
" Glands.
Kidneys.
Mammary Gland.
Testicles.

Right Side.

GLANDS.

Popliteal.
Ischiatic.
Supra-mammary
or
Superficial Inguinal.
Precrural.
Iliac.
Lumbar.
Renal.
(Adrenal body).
Sub-Dorsal.
Supra-Sternal.
Pre-Sternal.
Prepectoral.
Prescapular.



Back.

DIRECTIONS TO INSPECTORS.

To show how the Serous Membranes are affected. Mark the extent of the affected area on the diagram of the side.

To show which Lymphatic Glands are affected. Draw pencil through the names of the glands affected on each side.

To show which organs are affected. Draw pencil through the names of the organs affected.

Special Observations and result of the Examination.

Detention of Carcases.

Where a carcase is detained a label bearing the words "Detained for further examination" or, if condemned, one with the word "Condemned" on it is usually attached to the carcase. This tends to prevent misunderstanding, particularly when dealing with large numbers of pigs.

Disposal of Diseased Meat.

Diseased 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 the food of man.

We are pleased to be able to record that we were again successful in effecting the voluntary surrender of all meat and offal found to be diseased.

Times of Slaughtering.

Slaughtering occurred in the Borough on all days of the week, including Sunday, and took place at all times during the twenty-four hours; as a result, the work of inspection often had to be continued until a late hour of the day, and also on Public Holidays and Sundays.

Sanitation of Slaughter-houses and Knackers'-yards.

The slaughter-houses and knackers'-yards have been kept generally in a satisfactory condition, and while structurally a number of them fall short of the ideal they must be considered, having regard to various circumstances, to conform to a reasonable standard.

The supervision of the sanitation of slaughter-houses and knackers'-yards has been incorporated during the year with the duties of the Meat Inspector.

Applications for Licences.

Twelve applications were received for renewal of slaughter-house licenses, all of which were granted.

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

Prosecutions.

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

Slaughter of Animals Bill.

This Bill introduced in the last Parliament, as we anticipated in our last report, did not become law. A new Bill, however, has been introduced in the present Parliament, and provides, *inter alia*, for the licensing of slaughtermen by local authorities, and for the humane slaughter of animals with mechanically operated instruments, but differs from the previous Bill in that pigs are excluded from its provisions, and there may, therefore, be less opposition to its passage through the House, should the Government provide time for it.

A provision relating to the use of a mechanically operated stunning instrument is incorporated in the Slaughter-house Bye-laws, so that whatever the fate of this Bill, the use of the "Humane killer" will continue to be compulsory for all animals, including pigs, slaughtered in this district.

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
Bovines—					
Bulls	9	4	44.44	1	11.11
Bullocks	592	35	5.91	61	10.30
Cows	1,339	863	64.45	193	14.41
Heifers	138	23	16.66	13	9.42
Calves	55	3	5.45	1	1.81
Swine—					
Boars	37	2	5.40	2	5.40
Sows	63	8	12.69	...	...
Porkers	1,809	123	6.79	71	3.92
Ovines—					
Sheep	4,791	...	...	141	2.94
Lambs	3,324	...	...	7	0.21
Caprines—					
Goats	1	...	...	...	...
Kids ... ..	...	...	...	...	...
TOTALS	121,58	1,061	8.72	490	4.03

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
Cattle	10	8	80.00	1	10.00
Swine	100	80	80.00	20	20.00
Sheep	100	80	80.00	20	20.00
Poultry	100	80	80.00	20	20.00
Other	10	8	80.00	2	20.00
Total	320	248	77.50	72	22.50
Cattle	10	8	80.00	2	20.00
Swine	100	80	80.00	20	20.00
Sheep	100	80	80.00	20	20.00
Poultry	100	80	80.00	20	20.00
Other	10	8	80.00	2	20.00
Total	320	248	77.50	72	22.50
Cattle	10	8	80.00	2	20.00
Swine	100	80	80.00	20	20.00
Sheep	100	80	80.00	20	20.00
Poultry	100	80	80.00	20	20.00
Other	10	8	80.00	2	20.00
Total	320	248	77.50	72	22.50

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.	Clods.	Stickings.	Chucks.	Briskets.	Ribs.	Flanks.	Loins.	Rumps.	Hearts.	Lungs.	Diaphragms.	Stomachs.	Omenta.	Intestines.	Mesenteries.	Livers.	Pancreas.	Spleens.	Kidneys.	Kidney Knobs.	Mammary Glands.	Top Pieces.
Tuberculosis ...	17	216	216	12	5	8	12	2	8½	9	8	2	2	12	84½	9	32	18	13	173	100	31	16	14	4	16	...
Actinomycosis & Actinobacillosis	6	16	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1	...	...	...	...
Haematoma	3	...	...	...	...	...	...	...	...	...	...	...	...
Emphysema	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Endocarditis	7	...	...	...	...	...	191	...	...	...	...	...	...
Distomatosis
Echinococcus Veterinorum
Cysts	4	...	...	...	...	...	...
Abscesses	1	...	...	...	...	...	32½	1	...	...	...	...	...
Fatty Splenitis	1	...	...	...	...
Cavernous Angioma	35	...	...	...	...	...	...
Emaciation
Bruises, Fractures
Cystic Cirrhosis	8	...	...	...	...	...	...
Oedema
Blood Aspiration	1	...	...	...	...	...	...
Hepatitis	3	...	...	...	...	...	...	...	...	...	...	...	...
Pleurisy
Nephritis	10	...	...	...
Mastitis	294	...
TOTALS ...	17	222	232	12	5	8	12	2	8½	9	8	2	2	13	857	9	32	18	13	173	372½	32	18	24	4	310	...

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	...	...	...	1	77	...	...	...	...	...	...	41	24	16	79	35	12	2	...
Swine Fever	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Splenitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	...	...	41	...	...	...	...	...	...	...
Septic Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Haemorrhagic	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bruises and Fractures	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Blood Aspiration	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fatty Degeneration	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Oedema	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Emaciation	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cirrhosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	29	...	...	...
Pleurisy	...	...	...	...	...	...	...	...	...	...	...	12	...	...	...	...	...	...	...
Pericarditis	...	...	...	...	...	...	...	...	...	...	18	...	...	...	...	...	...	...	...
Hepatitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nephritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
TOTALS...	...	...	...	4	77	...	...	...	...	...	18	94	24	16	79	64	18	4	...

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.	Chumps.	Lungs.	Legs.	Breasts.	Livers.	Omenta
Pneumonia	...	...	...	...	...	...	1	...	...	...	...
Distomatosis	...	...	...	...	...	...	...	...	...	93	...
Ecchinococcus Veterinorum Cysts	...	...	...	2	...	...	...	...	...	2	...
Tenuicollis Embryos and Cysts	...	...	...	...	...	...	...	...	...	36	1
Strongylosis	...	...	...	...	...	...	5	...	...	...	...
Abscesses	...	...	...	...	...	...	1	...	...	1	...
Pyrexia	...	...	...	...	...	...	...	...	...	...	...
Emaciation	...	...	...	...	...	...	...	...	...	...	...
Bruises and Fractures	...	...	...	...	...	2	...	...	...	...	...
Cirrhosis	...	...	...	...	...	...	...	...	...	1	...
Pleurisy	...	...	...	...	...	...	1	...	...	...	...
Pericarditis	...	...	...	...	...	...	...	...	...	...	...
Nephritis	...	...	...	...	...	...	...	...	...	...	...
TOTALS	...	...	...	2	—	2	8	—	—	133	1

TABLE V.

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

Bovines—

Entire Carcases and Viscera	...	17
Heads	... ..	222
Tongues	... ..	232
Forequarters	... ..	12
Shins	... ..	5
Clods	... ..	8
Stickings	... ..	12
Chucks	... ..	2
Briskets	... ..	8½
Flanks	... ..	8
Ribs	... ..	9
Loins	... ..	2
Rumps	... ..	2
Hearts	... ..	13
Lungs	... ..	857
Diaphragms	... ..	9
Stomachs	... ..	32
Omenta	... ..	18
Intestines	... ..	13
Mesenteries	... ..	173
Livers	... ..	372½
Pancreas	... ..	32
Spleens	... ..	18
Kidneys	... ..	24
Kidney Knobs	... ..	4
Mammary Glands	... ..	310

Swine—

Entire Carcases and Viscera	...	...	...	...	4
Heads and Collars	...	...	...	...	77
Hearts	...	...	...	...	18
Lungs	...	...	...	...	94
Stomachs	...	...	...	...	24
Intestines	...	...	...	...	16
Mesenteries	...	...	...	...	79
Livers	...	...	...	...	64
Spleens	...	...	...	...	18
Kidneys	...	...	...	...	4

Ovines—

Chumps	...	...	...	...	2
Lungs	...	...	...	...	8
Livers	...	...	...	...	133
Kidneys	...	...	...	...	2
Omenta	...	...	...	...	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.		Intes- tines.		Mesenteries (Surface).	Uteri & Ovaries.		
									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.	Testicles & Penis
Bovines—																													
Bulls	4	...	...	...	...	...	12	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bullocks	35	...	...	...	...	...	2	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cows	863	2	...	...	4	8	30	23	17	1	1	...	22	339	19	35	12	...	19	...	21	20	...	1	...	...	...	...	...
Heifers	23	...	...	...	...	...	3	2	3	...	...	...	3	8	2	2	1	...	2	...	2	2	...	...	...	...	...	...	...
Calves	3	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Swine—																													
Boars	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Sows	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Porkers	123	...	...	...	1	...	...	...	...	...	...	...	...	32	...	29	...	...	...	...	...	...	13	...	...	...	...	...	...

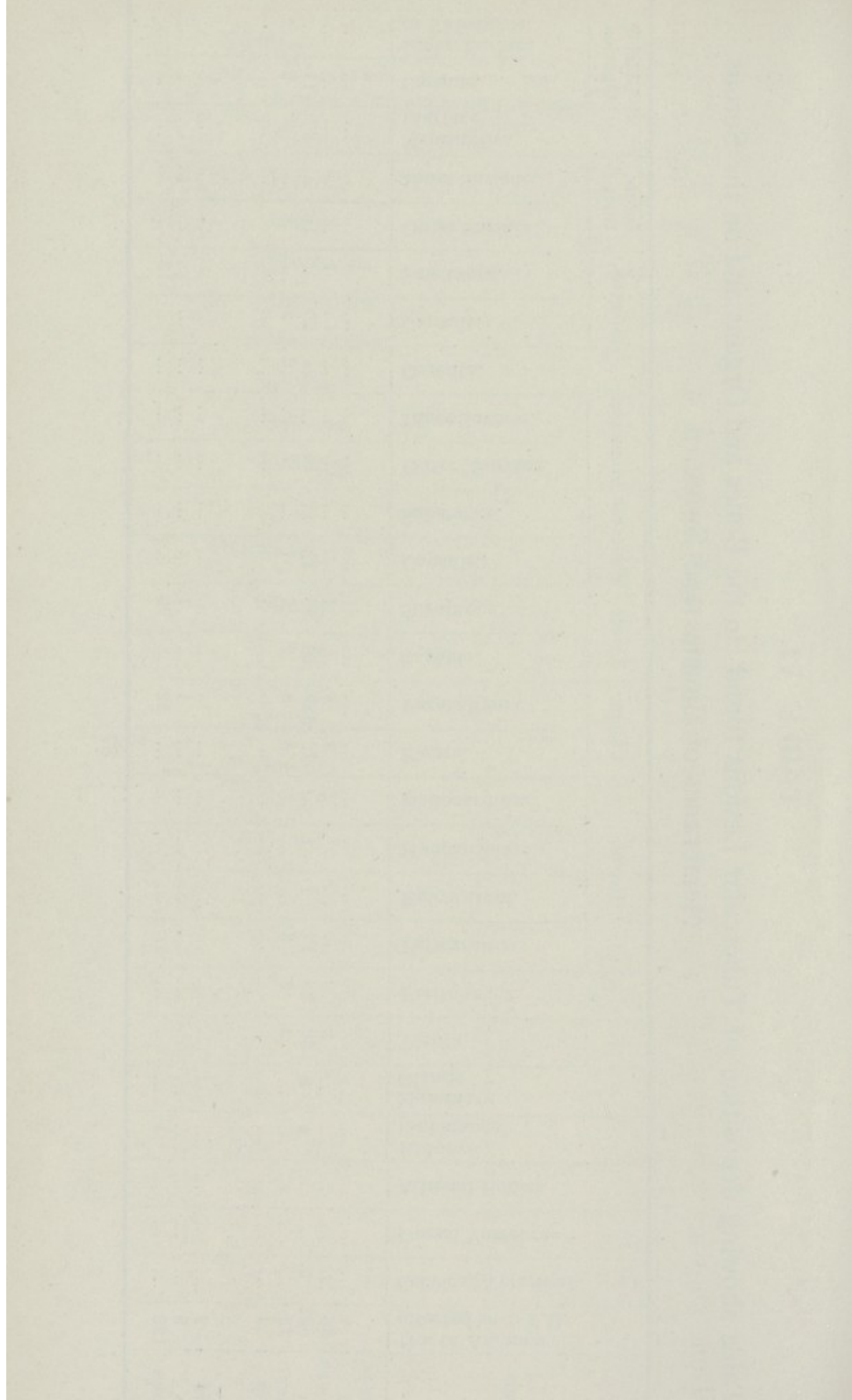


TABLE VII.

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.	Xiphoid.	Bronchial.	Anterior Mediastinal.	Posterior Mediastinal.	Gastric.	Splenic.	Hepatic.	Pancreatic.	Mesenteric.
Bovines—																										
Bulls	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	2	...	...	2	...	3
Bullocks	35	1	17	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	20	15	11	...	...	4	3	5
Cows	863	16	199	5	...	11	7	15	6	1	7	4	1	...	8	1	...	16	698	499	520	7	...	83	23	176
Heifers	23	...	5	...	...	...	1	2	1	1	...	...	...	...	...	...	...	1	11	11	12	1	...	2	2	4
Calves	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...
Swine—																										
Boars	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Sows	8	8	...	...	...	1	1	1	...	...	1	1	1	...	1	...	...	...	1	1	1	...	...	...	...	1
Porkers	123	70	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	30	3	4	23	...	27	...	76

Milk and Dairies (Consolidation) Act, 1915.

Milk and Dairies Order, 1926.

Milk (Special Designations) Order, 1923.

Tuberculosis Order of 1925.

THE REPORT OF THE VETERINARY OFFICER.

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

During the year, nine hundred and twenty-two (922) inspections of cattle were made, and where it appeared desirable, samples of milk, etc., were taken for microscopical examination. Twelve samples of milk and seven of sputum were thus taken and examined for the presence of tubercle bacilli. These measures resulted in the detection of four cows which came within the scope of the Tuberculosis Order, and in consequence these cattle were slaughtered. Two of these were cases of tuberculous infection of the udder, while two were active cases of pulmonary tuberculosis.

Post-mortem examinations (at which the owner, accompanied by his Veterinary Surgeon, is entitled to be present) were conducted to ascertain the correctness of the diagnosis and also to certify the extent of the infection. Should the animal not be affected with tuberculosis the owner is entitled to the full value of his animal plus one pound, but if affected the compensation is assessed at 75% of the valuation in non-advanced cases, and 25% in advanced cases as defined by the Order, with a minimum of thirty (30) shillings. (Prior to October 15th, 1931, the minimum amount payable was fixed at forty-five (45) shillings.)

Compensation amounting to £56 5s. was thus paid during the year, 75% of which was borne by the Ministry of Agriculture and Fisheries; but in no case was the disease so established that the minimum amount allowable was awarded. The carcasses of these animals were used, under supervision, for the manufacture of manures, etc.

The Tuberculosis Order was introduced to permit the destruction of any bovine animal suffering with tuberculosis in such a degree as to be a danger to other animals or a source of contamination to the milk supply. The percentage of milk cattle affected with tuberculosis is very high, but the majority do not come within the scope of the Order, although they must be regarded as a potential source of 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 ...	1	1	...
Biscuit Meal ...	3	1	2
Dry Mash ...	2	—	2
Feeding Fish Meal ...	3	—	3
Fish Meal ...	2	—	2
Fine Biscuit Meal ...	4	1	3
Green Bone Meal ...	3	3	—
Chic Rearing Meal ...	1	1	—
Complete Poultry Meal	1	1	—
Laying Meal ...	3	—	3
Linseed Meal ...	2	2	—
Meat and Bone Meal...	9	6	3
Middlings ...	2	1	1
White Feeding Fish Meal ...	2	1	1

FERTILISERS.

Article	No. of Samples taken	Analysis agrees	Analysis disagrees
Canary Guano ...	1	1	—
Clays Fertilisers ...	1	—	1
Dissolved Soluble Compound Guano ...	1	1	—
Fertility ...	1	1	—
Garden Bone Meal ...	3	1	2
Hop Manure ...	3	—	3
Kainit ...	2	2	—
Nitrate of Soda ...	2	1	1
Potato Manure ...	2	—	2
Pure Raw Guano ...	1	1	—
Special Potato Fertiliser	1	—	1
Sulphate of Ammonia...	2	1	1
Sulphate of Potash ...	2	2	—
Superphosphate ...	4	2	2
T— Manure ...	1	—	1

Infectious Diseases.

NOTIFIABLE DISEASES (Other than T.B.).

The following table shows the number of cases of notifiable diseases occurring during the year 1931, 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	786	786	...
Diphtheria	363	356	11
Scarlet Fever	664	551	5
Enteric Fever (including Paratyphoid) ...	10	9	1
Puerperal Fever	14	11	7
Pneumonia	580	197	303x
(Acute Primary and Acute Influenzal only notifiable)			
Cerebro Spinal Fever	3	3	9*
Acute Polio Myelitis	4	3	...
Acute Polio Encephalitis ... ..	...	...	...
Encephalitis Lethargica ... ..	...	...	...
Erysipelas	197	73	13
Ophthalmia Neonatorum	28	19	...
Malaria ... ..	...	...	...
Continued Fever	1	...	...
Dysentery ... ..	...	...	...
Puerperal Pyrexia	64	37	...

* Includes unnotified cases.

x Includes all forms.

Table indicating deaths during the past seven years from:—

Year	Scarlet Fever	Whooping Cough	Measles
1925	6	81	32
1926	7	20	78
1927	7	73	6
1928	5	26	69
1929	6	114	22
1930	4	19	78
1931	5	35	3
	—	—	—
	40	368	288
	—	—	—

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 551 admitted to Hospital 10, or 1.8 per cent., were associated with recurrent infections in this way, (see also report of Medical Superintendent of Plaistow Fever Hospital—pages 97—107).

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. This Officer is also the Analyst, under the Fertilisers and Feeding Stuffs Act, 1926.

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

Measles, including German Measles	247
Chicken Pox	945
Whooping Cough	534
Mumps	250
Tonsillitis	214
Other Diseases	1747

I am specially indebted to the School Attendance Officers for their valuable help.

Special Diseases Report.

Cerebro-Spinal Meningitis.

Three cases were notified—a female 1 year 2 months, a male 3 months, and a female 2 years. The first two cases died, but the latter case completely recovered after thirteen weeks illness, 8 weeks of which were spent in hospital.

Poliomyelitis.

Four cases were notified, all males, ranging from ten months to seventeen years. Two are still in hospital, one has been discharged, and one (17 years) is receiving electrical treatment; the last named is making good progress, although his right shoulder is not functioning properly and his left arm does not respond at all.

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	279	405	684
Diphtheria	147	296	443
Small Pox	157	596	753
Phthisis	186	273	459
Enteric Fever	4	6	10
Encephalitis Lethargica ...	1	—	1
Erysipelas	5	1	6
Pneumonia and Measles ...	—	3	3
Cancer	28	3	31
Schools	26	194	220
General	16	24	40
Disinfestations	24	15	39
			Total ... 2689

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

Summary of Notifications.

Week Ending	Scarlet Fever	Diphtheria	Enteric Fever	Puerperal Fever	Small Pox	Typhus Fever	Cerebro Spinal Fever	Acute Polymyositis	Acute Polio Encephalitis	Encephalitis Lethargica	Erysipelas	Ophthalmia Neonatorum	Tuberculosis		Pneumonia	Malaria	Typhentery	Trench Fever	Relapsing Fever	Continued Fever	Puerperal Pyrexia
													Respiratory	Other Forms							
1931																					
Jan. 3	10	7	—	—	25	—	—	—	—	—	4	—	5	—	16	—	—	—	—	—	1
" 10	11	13	1	2	28	—	—	—	—	—	2	—	7	1	9	—	—	—	—	—	2
" 17	14	10	—	—	15	—	—	—	—	—	3	—	17	3	15	—	—	—	—	—	—
" 24	7	10	—	1	28	—	1	—	—	—	4	—	3	1	11	—	—	—	—	—	—
" 31	13	12	—	—	44	—	—	—	—	1	5	2	5	3	15	—	—	—	—	—	1
Feb. 7	4	5	—	—	25	—	—	—	—	—	8	—	15	2	24	—	—	—	—	—	2
" 14	11	6	—	—	28	—	—	—	—	—	3	—	7	2	34	—	—	—	—	—	—
" 21	6	5	—	—	33	—	—	—	—	—	4	—	22	5	28	—	—	—	—	—	—
" 28	14	7	—	—	42	—	—	—	—	—	4	1	5	1	16	—	—	—	—	—	2
Mar. 7	4	6	—	—	32	—	—	—	—	—	5	1	8	1	7	—	—	—	—	—	—
" 14	6	10	1	—	23	—	1	—	—	—	5	—	14	2	5	—	—	—	—	—	1
" 21	1	10	1	2	33	—	—	—	—	—	3	—	7	2	8	—	—	—	—	—	5
" 28	7	6	1	—	43	—	—	—	—	—	—	—	22	4	11	—	—	—	—	—	2
April 4	9	4	—	—	25	—	—	—	—	—	1	—	12	3	11	—	—	—	—	—	4
" 11	7	4	—	—	29	—	—	—	—	—	2	—	9	—	7	—	—	—	—	—	2
" 18	6	7	—	1	28	—	—	—	—	—	4	1	5	5	5	—	—	—	—	—	2
May 2	7	2	1	1	17	—	—	—	—	—	3	—	4	3	9	—	—	—	—	—	1
" 9	8	6	—	—	20	—	—	—	—	—	2	—	7	1	6	—	—	—	—	—	4
" 16	8	7	—	—	28	—	—	—	—	—	4	1	4	3	9	—	—	—	—	—	1
" 23	12	7	—	—	12	—	—	—	—	—	5	1	21	1	6	—	—	—	—	—	1
" 30	9	6	—	1	7	—	—	—	—	—	3	1	6	2	16	—	—	—	—	—	—
June 6	14	10	—	—	14	—	—	—	—	—	2	—	5	2	2	—	—	—	—	—	—
" 13	11	5	—	—	8	—	—	—	—	—	—	—	7	3	8	—	—	—	—	—	2
" 20	9	6	—	—	6	—	1	—	—	—	3	1	9	1	4	—	—	—	—	—	—
" 27	9	4	—	—	4	—	—	—	—	—	2	2	8	6	5	—	—	—	—	—	—
July 4	12	2	—	—	7	—	—	—	—	—	2	2	7	3	4	—	—	—	—	—	—
" 11	17	8	—	—	6	—	—	—	—	—	2	3	10	2	9	—	—	—	—	—	1
" 18	15	8	1	1	7	—	—	—	—	—	6	1	12	4	8	—	—	—	—	—	1
" 25	13	6	1	—	5	—	—	—	—	—	1	—	9	—	9	—	—	—	—	1	1
Aug. 1	15	6	—	—	7	—	—	—	—	—	2	—	13	1	—	—	—	—	—	—	1
" 8	10	3	—	—	2	—	—	—	—	—	5	2	4	1	7	—	—	—	—	—	—
" 15	18	6	—	—	4	—	—	—	—	—	—	1	4	1	4	—	—	—	—	—	—
" 22	12	5	—	—	3	—	—	—	—	—	3	1	10	—	4	—	—	—	—	—	5
" 29	19	5	—	—	3	—	—	—	—	—	4	1	9	4	2	—	—	—	—	—	2
Sept. 5	15	7	1	—	6	—	—	—	—	—	5	—	2	—	2	—	—	—	—	—	1
" 12	10	6	2	—	—	—	—	—	—	—	6	1	13	5	9	—	—	—	—	—	2
" 19	24	7	—	1	6	—	—	—	—	—	8	2	8	1	6	—	—	—	—	—	3
" 26	21	5	—	—	13	—	—	—	—	—	8	—	10	2	5	—	—	—	—	—	2
Oct. 3	16	3	—	—	9	—	—	—	—	—	5	—	7	5	5	—	—	—	—	—	1
" 10	30	5	—	1	3	—	—	—	—	—	7	—	8	2	8	—	—	—	—	—	2
" 17	27	5	—	2	10	—	—	—	—	—	3	—	5	1	2	—	—	—	—	—	1
" 24	15	16	—	—	2	—	—	2	—	—	5	—	11	3	4	—	—	—	—	—	1
" 31	16	9	—	—	8	—	—	—	—	—	6	—	8	2	2	—	—	—	—	—	1
Nov. 7	17	9	—	—	7	—	—	—	—	—	7	1	5	1	8	—	—	—	—	—	1
" 14	18	9	—	—	17	—	—	1	—	—	4	—	10	—	13	—	—	—	—	—	—
" 21	15	9	—	—	8	—	—	—	—	—	1	—	9	3	17	—	—	—	—	—	—
" 28	14	8	—	1	11	—	—	—	—	—	7	—	6	—	15	—	—	—	—	—	—
Dec. 5	12	11	—	—	14	—	—	—	—	—	3	2	4	1	18	—	—	—	—	—	1
" 12	14	10	—	—	7	—	—	—	—	—	8	—	13	1	32	—	—	—	—	—	—
" 19	20	4	—	—	3	—	—	—	—	—	1	2	6	1	24	—	—	—	—	—	—
" 26	7	2	—	—	5	—	—	1	—	—	2	—	6	1	24	—	—	—	—	—	—
Jan. 2	14	4	—	—	8	—	—	—	—	—	3	—	7	1	47	—	—	—	—	—	2
TOTALS	664	363	10	14	786	—	3	4	—	1	197	28	460	106	580	—	—	—	—	1	64

PLAISTOW HOSPITAL.

Report of Medical Superintendent.

(Dr. D. MacIntyre.)

An outstanding feature of the year 1931 was the marked decline in the prevalence of diphtheria. The total admissions of cases of this disease fell from 719 in 1930 to 327 in 1931, and the deaths, which numbered 10, were the lowest yet recorded for one year. The disease, on the whole, had become milder and the clinical appearance of the faucial exudate also showed a distinct change. It was rarely extensive, and in the majority of the cases it was soft and pultaceous; in only a few of the cases was the typical leathery membrane present.

Another feature of the year was the complete absence of typhoid fever. The incidence of this disease has been steadily diminishing in recent years, but this is the first time it can be recorded that a year passed without a single case of the disease being under treatment in this Hospital.

The admissions of scarlet fever cases fell to 540 from 670 in the previous year, and 983 in 1929. The type of disease continues to be very mild.

Whooping cough was unusually prevalent in the district during the first half of the year, and accommodation was provided for the severe and complicated cases. More deaths resulted from this disease than from any of the other infections.

Very few cases of measles were under treatment until near the end of the year, when an epidemic started in the district. The first few cases were of a mild type, but as the epidemic progressed broncho-pneumonia became a common complication.

Erysipelas was unusually prevalent during the year. All ages were attacked, and the cases were of varying severity.

Towards the end of the year an epidemic of broncho-pneumonia set in suddenly among infants, and the accommodation available in the diphtheria wards was used for these cases.

The total number of cases under treatment during 1931 was 1,514. This compares with 1,892 in the previous year and 2,190 in 1929. The total deaths numbered 63, as compared with 62 in the previous year.

The chief causes of death during the year are briefly summarised as follows:—

Scarlet Fever	4 deaths
Diphtheria	10 „
Whooping Cough	13 „
Measles	2 „
Pneumonia	12 „
Erysipelas	8 „
Other Diseases	14 „
	<hr/>
	63
	<hr/>

At the beginning of the year there were 171 patients in residence, 1,343 were admitted during the year, making a total of 1,514 under treatment. Of these, 1,269 were discharged as recovered, 63 died, and 182 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 and deaths from the principal infectious diseases since the Hospital was opened.

Scarlet Fever.

The total number of cases under treatment was 625. Of these, 535 were discharged recovered, 4 died, and 86 remained under treatment at the end of the year.

The majority of the cases were very mild, and many of them had passed the acute stage of the illness when they came into Hospital. The average duration of illness of all the cases on admission was 4.3 days. In 75 cases, 14 per cent. of the admissions, there was no sign of a rash on the day of admission, and 29 of these showed no desquamation during their period of residence. The diagnosis in these cases remained doubtful, and 3 of them contracted the infection in the wards. Three other patients, who had a rash on admission and desquamated, suffered a relapse during their fourth week of illness.

No desquamation was detected in 52 cases in which the diagnosis was confirmed on admission by the presence of a definite scarlatiniform rash and other typical signs of the disease. These cases ran a mild uncomplicated course. They did not receive antitoxin.

Eighty-five of the more severe cases which were admitted within the first three days of illness received an intramuscular injection of scarlatinal antitoxin. The dosage varied from 10 c.c. to 30 c.c., the average being 16 c.c. The antitoxin did not protect these cases from complications. The incidence of such affections as otorrhoea, adenitis, albuminuria and nephritis was as high among these patients as among the untreated cases.

TABLE I.

1931	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 ...	26	39	...	...	3	3	...	...	8	12	91	1	1	...	...	1	1	...	...	1	...	5
February ...	30	26	...	...	4	2	...	...	20	32	114	...	2	...	...	2	1	...	...	2	3	10
March ...	32	29	...	...	2	2	...	...	15	17	97	...	1	...	...	1	...	...	...	4	4	10
April ...	12	10	...	...	...	2	...	...	7	12	43	...	...	...	...	...	...	...	...	1	...	1
May ...	31	27	...	1	4	5	...	...	18	29	115	1	1	...	...	1	1	...	...	2	...	6
June ...	39	28	...	1	...	1	...	...	8	19	96	...	2	...	...	1	...	...	...	...	1	4
July ...	57	27	...	...	3	3	...	...	12	14	116	...	...	...	...	...	1	...	...	2	1	4
August ...	45	19	...	2	1	3	...	...	4	13	87	1	...	...	...	1	...	...	...	...	2	4
September ...	61	24	...	...	...	3	...	...	3	9	100	1	...	...	...	...	1	...	...	...	1	3
October ...	99	39	...	6	2	18	...	...	3	21	188	...	1	...	...	1	1	...	...	...	...	3
November ...	42	27	...	7	1	2	...	...	2	16	97	...	...	...	...	...	1	...	...	...	...	1
December ...	66	32	...	16	42	7	...	...	8	28	199	...	2	...	2	4	1	...	...	1	2	12
Totals ...	540	327	...	33	62	51	...	...	108	222	1,343	4	10	...	2	12	8	...	...	13	14	63

TABLE II.

Year	Scarlet Fever.		Diphtheria.		Typhoid Fever.		Measles.		Pneumonia.		Whooping Cough.		Erysipelas.		Other Diseases.		Total	
	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.
1896	170	8	114	23	...	...	...	...	...	...	...	...	...	...	...	...	284	31
1897	188	6	163	21	...	...	...	...	...	...	...	...	...	...	...	...	351	27
1898	206	4	249	42	...	...	...	...	...	...	...	...	...	...	...	...	455	46
1899	192	2	309	49	...	...	...	...	...	...	...	...	...	...	...	...	501	51
1900	177	4	269	36	...	...	...	...	...	...	...	...	...	...	...	...	446	40
1901	203	16	310	66	47	4	...	...	...	...	...	...	...	...	...	...	560	86
1902	257	12	431	72	138	30	...	...	...	...	...	...	...	...	...	...	826	114
1903	370	10	334	48	84	17	...	...	...	...	...	...	...	...	...	...	788	75
1904	679	29	351	31	95	15	...	...	...	...	...	...	...	...	...	...	1126	75
1905	747	18	438	53	62	14	...	...	...	...	...	...	...	...	...	...	1247	85
1906	806	18	421	70	127	18	...	...	...	...	...	...	...	...	...	...	1354	106
1907	667	29	422	82	68	12	...	...	...	...	...	...	...	...	...	...	1157	123
1908	665	26	373	47	73	12	...	...	...	...	...	...	...	...	...	...	1111	85
1909	990	32	337	35	34	5	...	...	...	...	...	...	...	...	...	...	1361	72
1910	655	17	260	45	71	14	...	...	...	...	...	...	...	...	...	...	986	76
1911	491	13	295	52	70	15	...	...	...	...	...	...	...	...	...	...	856	80
1912	562	17	291	35	49	10	...	...	...	...	...	...	...	...	...	...	902	62
1913	782	13	333	24	42	6	...	...	...	...	...	...	...	...	...	...	1157	43
1914	699	10	380	43	36	7	...	...	...	...	...	...	...	...	...	...	1115	60
1915	575	8	403	60	40	11	...	...	...	...	...	...	...	...	...	...	1018	79
1916	310	7	533	64	23	2	...	...	...	...	...	...	...	...	...	...	866	73
1917	304	8	559	67	27	4	...	...	...	...	...	...	...	...	...	...	890	79
1918	213	4	464	70	25	...	...	...	...	...	...	...	...	...	...	...	702	74
1919	373	3	601	57	15	2	18	2	5	2	...	...	...	...	24	3	1036	69
1920	748	6	769	62	14	3	11	...	2	2	...	...	1	...	25	5	1570	78
1921	1,119	10	560	32	7	...	1	...	2	2	...	...	...	...	21	11	1710	55
1922	592	8	611	40	3	1	15	...	5	1	21	4	1	...	23	9	1271	63
1923	412	7	671	23	10	...	33	...	12	6	...	...	10	...	34	7	1182	43
1924	317	4	713	27	2	1	100	19	24	7	44	15	8	...	137	7	1345	80
1925	412	4	719	18	5	1	81	6	24	2	22	8	14	1	150	9	1427	49
1926	899	6	647	13	7	...	85	17	25	5	5	2	15	2	189	11	1872	56
1927	1250	3	816	34	12	2	19	1	17	5	13	5	5	...	96	7	2228	57
1928	916	3	901	29	7	...	60	9	16	3	13	4	17	1	122	9	2052	58
1929	983	5	741	33	4	...	20	2	19	5	17	9	15	1	150	4	1949	59
1930	670	1	719	24	5	...	86	15	11	1	12	1	14	1	133	9	1650	52
1931	540	4	327	10	...	...	33	2	62	12	108	13	51	8	222	14	1343	63

Corrected diagnosis:—36 cases, notified as scarlet fever, proved to be wrongly diagnosed, and were found on admission to be suffering from the following complaints:—Dermatitis 3; Tonsillitis 4; Urticaria 3; Measles 5; Diphtheria 2; Impetigo 1; No disease 6; Pneumonia 2; Septic rash 1; Toxic rash 4; Drug rash 1; Quinsy 1; Adenitis 2; Bronchitis 1.

In 39 of the cases discharged the disease was complicated by the presence of other infections as follows:—

Scarlet Fever with Nasal Diphtheria	9 cases
" " " Faucial Diphtheria	4 "
" " " Chickenpox	17 "
" " " Whooping Cough	6 "
" " " Mumps	3 "

Complications:—Of the 535 cases discharged during the year, 173, or 32.33 per cent., suffered from complications as follows:—

Adenitis	35 cases or 6.54 per cent.
Albuminuria	38 " " 7.10 " "
Arthritis	12 " " 2.24 " "
Cardiac affections..	10 " " 1.86 " "
Nephritis	6 " " 1.12 " "
Otorrhoea	37 " " 6.91 " "
Rhinitis	22 " " 4.11 " "
Abscesses	11 " " 2.56 " "
Vaginitis	2 " " 0.37 " "

Fatality rate:—4 deaths occurred among the 540 cases admitted during the year, giving a fatality rate of .74. Of the fatal cases, 2 were girls aged 9 and 10 years respectively, who died from septic meningitis following otitis media. The third was an infant aged 11 months who was suffering from marasmus on admission; she had septic scarlet fever and died within 4 days. The fourth case was a man aged 33 years who was admitted in the third week of disease suffering from acute nephritis. He developed uraemia and died nine days after admission.

Diphtheria.

Seventy-nine patients were in residence at the beginning of 1931, and 447 cases, notified as diphtheria, were admitted during the year. Three hundred and twenty-seven of these proved to be suffering from the disease, making a total of 406 cases under treatment. Of these, 355 were discharged recovered, 10 died, and 41 remained under treatment at the end of the year.

Of the 355 cases discharged, 38 had laryngeal diphtheria, 43 suffered only from nasal diphtheria, and 5 were cases of otorrhoea with positive swabs.

The majority of the faucial cases were of a mild type. Nineteen of them suffered from post-diphtheritic paralysis. This was mild in 12 cases and severe in 7 cases.

Laryngeal diphtheria:—75 cases were admitted as laryngeal diphtheria, but 37 of these proved to be wrongly diagnosed. Of the 38 true cases, 11 required tracheotomy and 5 of these proved fatal, giving a fatality rate of 45.45 of the cases operated on.

Fatality rate:—5 deaths occurred among the faucial cases. This gives a fatality rate of 1.82 of the cases discharged. The average duration of illness of these cases on admission was 4 days, and their ages averaged 6 years. Three of them were moribund on admission, and died within four hours. The average amount of antitoxin administered to them was 84,000 units.

The laryngeal cases which proved fatal were all complicated by broncho-pneumonia; 2 of them had both faucial and laryngeal diphtheria. Their average age was two years, and the duration of illness on admission averaged 3 days.

The average amount of antitoxin administered to all the cases was 16,000 units.

Corrected diagnosis:—120 cases, notified as diphtheria, proved to be wrongly diagnosed, and were found after admission to be suffering from the following complaints:—

Tonsillitis 51; Laryngitis 24; Quinsy 6; Nephritis 1; Adenitis 2; Epistaxis 1; Septic Meningitis 1; Tubercular Meningitis 1; Rhinitis 2; Vincent's Angina 5; Bronchitis 6; Pharyngitis 6; Alveolar Abscess 1; Otorrhoea 1; Scarlet Fever 3; Marasmus 1; Leukaemia 1; Broncho Pneumonia 4; Septicaemia 1; Whooping Cough 2.

Of these, 8 proved fatal as follows:—Ulcerative Laryngitis 1; Broncho Pneumonia 2; Tubercular Meningitis 1; Septic Meningitis 1; Pharyngitis 1; Leukaemia 1; Septicaemia 1.

Whooping Cough.

One hundred and eight cases were admitted during the year. Of these, 89 were discharged recovered, 13 died, and 6 remained under treatment at the end of the year. The disease was associated with scarlet fever in 6 cases, and 2 cases, admitted as laryngeal diphtheria, proved to be whooping cough. The cases were sent into hospital on account of their severity, and nearly all of them were complicated by broncho pneumonia. The fatal cases were all infants under 2 years of age. In the recovery cases exposure to artificial sunlight in the later stage of the disease had a beneficial effect.

Measles.

Few cases of this disease were in hospital until near the end of the year, when the admissions rose rapidly. The number under treatment was 33. Of these, 23 were discharged recovered, 2 died, and 8 remained under treatment at the end of the year. Of the 2 fatal cases, one aged 4 years was complicated by broncho pneumonia; the other, aged 3 months, was suffering from marasmus.

Pneumonia.

The total number of cases under treatment was 65. Of these, 22 were discharged recovered, 12 died, and 31 remained under treatment at the end of the year. Included in the group are 7 adults who were suffering from lobar pneumonia. One of these died—a man aged 63 years. The other cases were all young children suffering from broncho pneumonia. Eleven of these died; all of them were under 3 years of age; 5 other cases which were admitted as broncho pneumonia proved to be suffering from whooping cough.

Erysipelas.

Fifty-two cases were under treatment. Of these, 41 were discharged recovered, 8 died, and 3 remained under treatment at the end of the year. The face and scalp were the parts affected in 39 of the cases. The trunk and limbs were involved in 13 cases. The attack was mild in 14 cases, moderately severe in 20 cases, and severe in 18 cases. Erysipelas antitoxin and polyvalent anti-streptococcal serum were administered to the moderate and severe cases. The dosage averaged 35 c.cs. The results of the antitoxin treatment were not very satisfactory. The injection of the serum was not followed by any marked improvement in the majority of the cases. The majority of the cases were adults, and both sexes were about equally affected. The ages of all the cases ranged from 14 days to 81 years. Of the 8 fatal cases, 2 were aged 62 and 74 years respectively. The ages of the other 6 ranged from 14 days to 14 months.

Cerebro-Spinal Meningitis.

Five cases were notified, but only one of them proved to be suffering from the disease. This was a male, aged 24 years, who had a comparatively mild attack, and made a satisfactory recovery. The other 4 cases, 3 of whom proved fatal, were suffering from the following complaints: Tubercular Meningitis 1; Streptococcal Meningitis 1; Gastro-enteritis 1; Influenza 1.

Other Diseases.

In addition to the cases of revised diagnosis which have been mentioned under Scarlet Fever and Diphtheria, the following diseases are included under this group:—

Influenza 4; Mumps 4; Puerperal Fever 3; Smallpox 3; Chickenpox 28; Rubella 2; Tuberculosis 1; Pemphigus 1; Tubercular Peritonitis 1; Enteritis 1; Rheumatic Fever 2; Malignant Endocarditis 1; Septicaemia 1; Cellulitis 3.

Of these, 4 proved fatal as follows:—Septicaemia 1; Malignant Endocarditis 1; Enteritis 1; Cellulitis 1.

Cross Infection.

An outbreak of chickenpox occurred among the patients at the Convalescent Hospital at Harold Wood, and 14 cases were infected. Six diphtheria patients and 2 scarlet fever patients contracted this disease at Plaistow Hospital. One other scarlet fever patient contracted whooping cough during the year.

Operations.

In addition to the cases of tracheotomy already mentioned, the following operations were performed during the year:—Removal of tonsils and adenoids 18; Empyema, resection of rib, 2; Radical Mastoid 2; Ischio-rectal abscess 1.

Harold Wood Hospital.

The building and equipment of the new Convalescent Hospital at Harold Wood were completed by the beginning of the year, and the patients were transferred in February to the new wards, but owing to the diminished prevalence of both scarlet fever and diphtheria the total accommodation was not fully occupied. During the year 421 cases were under treatment. These included 393 scarlet fever convalescents and 28 diphtheria convalescents. Of these, 361 were discharged recovered, and 60 remained under treatment at the end of the year. The cases selected for transfer from Plaistow were patients between the ages of 4 and 14 years. If free from complications the scarlet fever patients were transferred at the end of the second week of illness and the diphtheria patients at the end of the fourth week of illness. The average duration of residence of all the cases was 42.03 days.

The kitchen gardens kept the Hospital supplied with vegetables and a quantity of fruit, and during the year 7,900 eggs were obtained from the poultry.

Active Immunisation Against Scarlet Fever and Diphtheria.

Schick Test, 1931.

Number of patients tested	...	...	575
Number which proved positive	...	...	283
Rate per cent. of positives	...	...	49.2
Number immunised	...	...	240
Number of cases in which permission for immunisation was refused	...	...	38
Rate per cent. of cases tested for whom permission for immunisation was refused	...	...	6.6

Dick Test, 1931.

Number of patients tested	...	...	503
Number which proved positive	...	...	291
Rate per cent. of positives	...	...	57.85
Number immunised (4 weekly doses of Dick Toxin)	...	...	232
Number of cases in which permission for immunisation was refused	...	...	42
Rate per cent. of cases tested for whom permission for immunisation was refused	...	...	8.3

Staff Illness.

During the year 3 nurses contracted Whooping Cough and 1 contracted Chicken-pox. Thirteen nurses and maids were warded with Influenza, and 18 with Septic Throat. Fifty-six others were off duty for short periods with minor ailments. All recovered.

Schick Test, 1931.

Number of probationers tested	...	...	41
Number which proved positive	...	...	24
Rate per cent. of positives	...	...	58
Number immunised	...	...	23

Dick Test, 1931.

Number of probationers tested	...	41
Number which proved positive	...	8
Rate per cent. of positives	... ..	19
Number immunised	... ..	7

No probationer contracted Scarlet Fever or Diphtheria during the year.

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	...	111	
Number of these admitted	... ..		60
Number brought by relatives	... ..	188	
Number of these admitted	... ..		48
Number from other hospitals	... ..	190	
Number of these admitted	... ..		15
Total number of cases examined	...	489	
Total number of cases admitted	...		123
Number of suspected cases of Smallpox visited	... ..		646
Number which proved positive	...		322

Bacteriological Work.

Swabs examined for diphtheria bacilli :—

Number sent by medical practitioners :—

				Positive Results
Faucial	...	...	1542	147
Nasal	...	...	121	25
Aural	...	...	16	9
			<hr/>	<hr/>
		Total	1679	181
			<hr/>	<hr/>

Number of Gate cases swabbed :—					Positive Results.
Faucial	...	...	...	59	5
Nasal	...	...	...	23	3
Total ...				82	8

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

Faucial	...	...	...	136	3
Nasal	...	...	...	136	8
Total ...				272	11

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

Faucial	...	...	...	17	1
Nasal	15	2
Total ...				32	3
Widal Tests	7	0

Total number of examinations:	2072	203
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Disinfecting Station.

Number of articles removed from infected homes for disinfection	18987
Number of Hospital articles disinfected	...	...	...	...	7859
Number of articles from other Institutions for disinfection	...	...	...	...	50
Total ..					26896

Tuberculosis.

The following table sets out the number of cases of Tuberculosis and the number of deaths during the year at certain age periods.

AGE PERIODS.			NEW CASES.				DEATHS.			
			Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
			M.	F.	M.	F.	M.	F.	M.	F.
0-1	...	...	1	...	6	3	...	1	5	3
1-4	...	...	3	1	14	11	1	1	7	1
5-9	...	...	16	11	15	13	1	...	4	2
10-14	...	...	9	13	6	5	1	3	3	1
15-19	...	...	33	44	9	6	14	14	3	3
20-24	...	...	35	45	11	3	23	20	2	2
25-34	...	...	64	43	9	4	32	27	4	...
35-44	...	...	48	26	7	1	30	12	...	...
45-54	...	...	39	16	2	...	30	8	2	...
55-64	...	...	24	12	...	...	23	8	...	...
65 and upwards	...	...	7	3	1	...	2	3	...	...
TOTALS	...	...	279	214	80	46	157	97	30	12

Included in the above new cases are 16 pulmonary males, 12 pulmonary females, and 14 non-pulmonary males, and 12 non-pulmonary females, which were unnotified, but were discovered from the returns of the Registrar of Births and Deaths, showing that 18 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 1924--1931, inclusive :—

1924	...	10.5	1928	...	7.1
1925	...	11.2	1929	...	8.0
1926	...	12.8	1930	...	13.0
1927	...	12.03	1931	...	18.0

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 619, of which 493 were pulmonary cases. The deaths from all forms of Tuberculosis numbered 296, giving a death rate of 0.99 per 1,000.

The death rate from respiratory Phthisis being 0.85, and from other forms 0.14 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 131—133.

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. The First and Third Schedules, showing the details of the work done, have been completed as required by the Ministry of Health.

Comparison with work done in previous years.

Year	1926	1927	1928	1929	1930	1931
Request Cases	726	760	670	683	567	592
Notified Cases	188	198	198	142	176	130
Definite Cases	525	516	473	467	495	413

Examination of Contacts.

Year	1926	1927	1928	1929	1930	1931
No. Examined	743	699	633	532	561	448
Positive	41	40	22	19	20	12
Percentage	5.1	5.7	3.5	3.7	3.7	2.6

Tuberculosis of Lungs.

Diagnosis. A close study of the history of illness, clinical examination and observation with sputum tests are the chief means of establishing a diagnosis. X-Ray examination is not a routine measure, but is reserved for certain cases presenting unusual features. Fifty-five examinations were made either at the London Hospital or by Dr. Leggatt, of Romford Road, Forest Gate.

Institutional Treatment.

Adults. The Dagenham Hospital and Sanatorium have been in full use throughout the year.

Certain number of cases requiring special Surgical Treatment have been sent to the Brompton Hospital. A few cases have been sent to the Grosvenor and Maltings Farm Sanatoria.

Several youths, under 18 years of age, have been sent to the Sanatorium organised by the National Association for the Prevention of Tuberculosis at Burrow Hill. There are now five receiving treatment and training in general clerical work or gardening.

Certain selected cases have been sent to the Papworth Village Settlement and the Preston Hall Colony.

Total number admitted during the year ...	8
Total number discharged during the year ...	4
Total number settled during the year ...	Nil
Remaining ...	6

Children. The Children's Sanatorium has been in full use; the "Waiting List" has been short.

Domiciliary Treatment. Insured persons, while awaiting admission to Institutions and after discharge, have been placed on Domiciliary Treatment under their Panel Practitioners. During the year 836 reports have been received; 317 patients were under treatment at the end of the year.

Dispensary Treatment. Children and non-insured persons have been treated at the Dispensary. At the end of the year 609 cases were under treatment.

Artificial Pneumothorax. One afternoon session per fortnight has been set aside for this form of treatment. Ten cases have been under treatment, and 120 refills have been given.

Non-Pulmonary Tuberculosis.

Institutional Treatment. Adult cases have been treated at the Royal Sea-Bathing Hospital, Margate.

Children. The number of children in Institutions at the end of the year was 38. These are scattered over 16 Institutions, the majority are at the Lord Mayor Treloar Cripples' Hospital, Alton.

Out-Patient Treatment.

Tuberculosis of Skin. Twenty-four cases have been under Finsen Light or Artificial Sunlight Treatment at the London Hospital.

Tuberculosis of Bones and Joints. These cases are kept under general supervision at the Dispensary and referred, when necessary, to appropriate Orthopaedic Surgeons.

After-Care. Grants of Extra Nourishments have been made as usual. At the end of the year, 143 cases were in receipt of this grant; this number is 27 greater than last year.

Visiting of Patients. The Tuberculosis Nurses have made 4,425 visits during the year.

The Prevention of Tuberculosis. In reports of past years, attention has been drawn to the importance of Milk and Green Vegetables in maintaining health and preventing Tuberculosis and to the fact that the necessity of making these articles of food part of the daily diet of children and young adults is not realised by individuals.

A study of seven cases of children with Tuberculosis of the Lungs (with positive sputum) supplies evidence that the lack of Green Vegetables in the regular diet of these children has played a part in the manifestation of the disease.

Of these seven cases, three had regularly refused to eat Green Vegetables, three had habitually left them, and only one child, who had been a patient for 10 years from the age of 4 years, was reported to eat them. With one exception the diet of other children in the family and the parents has been normal.

In these cases the deficiency of the diet was not due to poverty but rather to the lack of understanding on the part of the parent of the needs of the child and of the right method of management. In other cases, however, deficiency of Green Vegetables has been due to poverty of the parents. In only one instance was there another case of Tuberculosis in the family, and in only one case could one say that the home was overcrowded. A study of cases among adolescents confirms these findings.

Summary. It would appear that individuals whose diet is deficient in Green Vegetables are particularly liable to develop Tuberculosis of the Lungs and, possibly, other diseases. They should be regarded as the susceptible soil, and might be described as the Pre-Tuberculous and, possibly, Pre-Rheumatic or Pre-Catarrhal.

The Prevention of Tuberculosis requires education of parents in the principle of right feeding and wise child guidance.

Tuberculosis Nurses have been instructed to search among the contacts and persuade them to attend the Dispensary, not only for medical examination, but also for instruction and education, so that with the co-operation of their parents they will learn to accept such food as part of their daily diet.

At School Meal Centres, it is suggested that Green Vegetables be provided as part of the daily ration instead of, or in addition, to Potatoes.

(A) Return showing the work of the Dispensary during the year 1931.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				Grand 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 ...	179	138	12	17	16	9	13	11	195	147	25	28	395	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	60	61	44	58	223	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	116	133	114	85	448	
														1066
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous ...	—	5	5	1	—	1	—	—	—	6	5	1	12	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	1	—	4	3	8	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	29	126	146	127	428	
														448
C.—CASES written off the Dispensary Register as :—														
(a) Recovered	44	61	18	4	5	10	10	6	49	71	28	10	158	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	167	276	285	234	962	
														1120
D.—NUMBER OF CASES on Dispensary Register on December 31st:														
(a) Definitely tuberculous ...	730	776	268	231	80	92	136	95	810	868	404	326	2408	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	33	28	40	47	148	
														2556

1. Number of cases on Dispensary Register on January 1st	2631	8. Number of visits by Tuberculosis Officers to homes (including personal consultations)	172
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	59	9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	4425
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	318	10. Number of :—	
4. Cases written off during the year as Dead (all causes)	210	(a) Specimens of sputum, etc. examined	1006
5. Number of attendances at the Dispensary (including Contacts)	10278	(b) X-ray examinations made in connexion with Dispensary work	55
6. Number of Insured Persons under Domiciliary Treatment on 31st December	317	11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above	7
7. Number of consultations with medical practitioners :—		12. Number of "T.B. plus" cases on Dispensary Register on December 31st ...	514
(a) Personal	22		
(b) Other	474		

(B) Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment).

Provided by the Council	1	Provided by Voluntary Bodies	Nil
--------------------------------	---	-------------------------------------	-----

(C) Number of beds available for the treatment of Tuberculosis on the 31st December in Institutions belonging to the Council.

Name of Institution.	For Pulmonary Cases.		For Non-Pulmonary Cases.		Total
	Adults	Children under 15.	Adults	Children under 15.	
Dagenham Sanatorium ...	128	—	—	—	128
Langdon Hills Sanatorium ...	—	40	—	—	40
Poor Law Institution : Whipps Cross Hospital ...	92*		No beds specially allotted.		

* None specially allotted to children.

(D) Return showing the extent of Residential Treatment and Observation during the year in Institutions (other than Poor Law Institutions) approved for the Treatment of Tuberculosis.

	In Institu- tions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institu- tions.	In Institu- tions on Dec. 31st.
Number of doubtfully tuberculous cases admitted for observation.					
Adult males ...	—	2	2	—	—
Adult females ...	—	3	2	1	—
Children ...	—	3	3	—	—
Total ...	—	8	7	1	—
Number of definitely tuberculous patients admitted for treatment.					
Adult males ...	94	186	126	41	113
Adult females ...	49	134	116	19	48
Children ...	85	70	77	—	78
Total ...	228	390	319	60	239
Grand Total ...	228	398	326	61	239

(E) Return showing the extent of Residential Treatment provided during the year 1931 in Poor Law Institutions for persons chargeable to the Council.

		In Institu- tions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institu- tions.	In Institu- tions on Dec. 31st.
Number of patients suffering from pulmonary tuberculosis admitted for treatment						
Adult males	...	54	179	99	89	45
Adult females	...	28	118	77	44	25
Children	...	4	9	5	6	2
Total	...	86	306	181	139	72
Number of patients suffering from non-pulmonary tuberculosis admitted for treatment.						
Adult males	...	20	19	21	13	5
Adult females	...	20	10	21	5	4
Children	...	27	20	27	19	1
Total	...	67	49	69	37	10
Grand Total	...	153	355	250	176	82

(F) Return showing the results of observation of doubtfully tuberculous cases discharged during the year from Institutions approved for the treatment of Tuberculosis.

Diagnosis on discharge from observation.	For Pulmonary Tuberculosis.						For Non- Pulmonary Tuberculosis.						Totals.		
	Stay under 4 weeks.			Stay over 4 weeks.			Stay under 4 weeks.			Stay over 4 weeks.					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous	—	—	—	1	1	—	—	—	—	—	—	—	1	1	—
Non-tuberculous	—	—	—	—	1	—	—	—	—	1	—	3	1	1	3
Doubtful	—	—	—	—	*1	—	—	—	—	—	—	—	—	1	—
Totals	—	—	—	1	3	—	—	—	—	1	—	3	2	3	3

* Died in Institution—"Lympho-Sarcoma at root of lung."

(C) Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

PULMONARY TUBERCULOSIS.																		
Classification on admission to the Institution.	Condition at time of discharge	Duration of Residential Treatment in the Institution.																
		Under 3 months			3-6 months			6-12 months			More than 12 months			Totals			Grand Totals	
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.		
Class T.B. minus																		
	Quiescent	...	2	11	1	8	14	3	4	6	17	2	—	6	16	31	27	74
	Not Quiescent	...	6	14	3	4	1	2	3	3	1	1	—	2	14	18	8	40
	Died in Institution		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Class T.B. plus. Group 1.																		
	Quiescent	...	—	1	—	5	3	—	4	1	1	—	—	1	9	5	2	16
	Not Quiescent	...	5	2	—	2	3	2	7	2	—	3	—	—	17	7	2	26
	Died in Institution		2	2	—	3	—	—	1	1	—	2	1	—	8	4	—	12
Class T.B. plus. Group 2.																		
	Quiescent	...	1	4	—	6	6	—	3	4	—	—	—	1	10	14	1	25
	Not Quiescent	...	15	12	—	11	9	1	12	5	1	6	—	3	44	26	5	75
	Died in Institution		8	3	—	5	4	—	9	2	—	3	—	—	25	9	—	34
Class T.B. plus. Group 3.																		
	Quiescent	...	—	—	—	—	2	—	1	—	—	—	1	—	1	3	—	4
	Not Quiescent	...	3	3	—	3	2	—	1	—	—	3	—	—	10	5	—	15
	Died in Institution		4	1	—	—	2	—	2	2	—	—	—	—	6	5	—	11
NON-PULMONARY TUBERCULOSIS.																		
Bones and Joints																		
	Quiescent	...	—	—	—	—	—	—	1	—	3	1	2	18	2	2	21	25
	Not Quiescent	...	—	—	2	—	—	—	—	—	—	1	—	1	1	—	3	4
	Died in Institution		—	—	—	—	—	—	1	—	—	1	—	—	2	—	—	2
Abdominal																		
	Quiescent	...	—	—	—	1	1	—	—	2	1	—	—	—	1	3	1	5
	Not Quiescent	...	—	—	—	1	1	—	—	—	1	—	—	—	1	1	1	3
	Died in Institution		—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Other Organs																		
	Quiescent	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Not Quiescent	...	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
	Died in Institution		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Peripheral Glands																		
	Quiescent	...	—	—	—	—	1	3	—	—	1	—	—	1	—	1	5	6
	Not Quiescent	...	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	1
	Died in Institution		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (a) the condition at the end of 1931 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of pulmonary tuberculosis, and their classification at that time.

Previous to 1926.

Condition at the time of the last record made during the year to which the return relates		Class T.B. minus	Group 1	Class T.B. plus		Total (Class T.B. plus)
				Group 2	Group 3	
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested					
	Adults M.	9	2	3	—	5
	" F.	2	—	—	—	—
	Children	1	—	—	—	—
	Disease not Arrested					
	Adults M.	73	19	26	9	54
	" F.	156	10	14	1	25
	Children	215	1	10	—	11
	Condition not ascertained during the year	74	6	2	—	8
	Total on Dispensary Register at 31st December	530	38	55	10	103
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered					
	Adults M.	139	31	3	—	34
	" F.	150	12	1	—	13
	Children	193	2	—	—	2
	Lost sight of, or otherwise removed from Dispensary Register	541	45	23	5	73
	Dead					
	Adults M.	91	19	92	48	159
	" F.	78	11	39	36	86
	Children	13	2	1	4	7
	Total written off Dispensary Register	1205	122	159	93	374
Grand Totals		1735	160	214	103	477

Condition at the time of the last record made during the year to which the return relates			Class T.B. minus	Group 1	Group 2	Class T.B. plus Group 3	Total (Class T.B. plus)
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested						
	Adults	M.	1	—	—	—	—
	"	F.	1	—	—	—	—
	Children		2	—	—	—	—
	Disease not Arrested						
	Adults	M.	20	3	9	4	16
	"	F.	37	4	7	1	12
(b) Not now on Dispensary Register and reasons for removal therefrom.	Children		76	1	—	—	1
	Condition not ascertained during the year ...		14	1	—	—	1
	Total on Dispensary Register at 31st December ...		151	9	16	5	30
	Discharged as Recovered ...						
	Adults	M.	9	—	—	—	—
	"	F.	4	—	1	—	1
	Children		9	1	—	—	1
(b) Not now on Dispensary Register and reasons for removal therefrom.	Lost sight of, or otherwise removed from Dispensary Register ...		131	8	12	—	20
	Dead						
	Adults	M.	46	8	34	27	69
	"	F.	43	1	23	20	44
	Children		5	—	—	1	1
	Total written off Dispensary Register .		247	18	70	48	136
	Grand Totals ...		398	27	86	53	166

Condition at the time of the last record made during the year to which the return relates		Class T.B. minus	Group 1	Class T.B. plus Group 2	Group 3	Total (Class T.B. plus)
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested					
	Adults M.	—	—	2	—	2
	„ F.	—	—	—	—	—
	Children	2	—	—	—	—
	Disease not Arrested					
	Adults M.	24	8	13	2	23
	„ F.	34	6	10	1	17
	Children	80	—	1	—	1
	Condition not ascertained during the year ...	10	2	1	—	3
	Total on Dispensary Register at 31st December ...	150	16	27	3	46
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered ...					
	Adults M.	—	—	—	—	—
	„ F.	—	—	—	—	—
	Children	—	—	—	—	—
	Lost sight of, or otherwise removed from Dispensary Register ...	63	10	15	3	28
	Dead					
	Adults M.	36	8	32	21	61
	„ F.	34	2	20	15	37
	Children	5	—	1	1	2
	Total written off Dispensary Register .	138	20	68	40	128
Grand Totals ...		288	36	95	43	174

Condition at the time of the last record made during the year to which the return relates		Class T.B. minus	Group 1	Class T.B. plus		Total (Class T.B. plus)
				Group 2	Group 3	
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested					
	Adults M.	4	—	—	—	—
	„ F.	—	—	—	—	—
	Children	1	—	—	—	—
	Disease not Arrested					
	Adults M.	39	14	14	5	33
	„ F.	36	7	8	—	15
	Children	69	2	—	—	2
	Condition not ascertained during the year ...	5	1	—	—	1
	Total on Dispensary Register at 31st December ...	154	24	22	5	51
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered ...					
	Adults M.	—	—	—	—	—
	„ F.	—	—	—	—	—
	Children	—	—	—	—	—
	Lost sight of, or otherwise removed from Dispensary Register ...	48	8	13	3	24
	Dead					
	Adults M.	26	16	27	21	64
	„ F.	18	14	26	22	62
	Children	7	1	1	1	3
	Total written off Dispensary Register .	99	39	67	47	153
Grand Totals ...		253	63	89	52	204

Condition at the time of the last record made during the year to which the return relates			Class T.B. minus	Group 1	Class T.B. plus Group 2	Group 3	Total (Class T.B. plus)
Disease Arrested							
(a) Remaining on Dispensary Register on 31st December.	Adults	M.	—	—	—	—	—
	„	F.	1	—	—	—	—
	Children		—	—	—	—	—
Disease not Arrested							
	Adults	M.	46	11	18	2	31
	„	F.	36	12	11	2	25
	Children		56	1	1	—	2
Condition not ascertained during the year							
	...	...	7	1	1	—	2
Total on Dispensary Register at 31st December							
	...	...	146	25	31	4	60
Discharged as Recovered							
(b) Not now on Dispensary Register and reasons for removal therefrom.	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
Lost sight of, or otherwise removed from Dispensary Register							
	...	...	42	14	15	—	29
Dead							
	Adults	M.	21	17	31	15	63
	„	F.	25	8	20	18	46
	Children		2	—	—	—	—
Total written off Dispensary Register							
			90	39	66	33	138
Grand Totals							
	...	...	236	64	97	37	198

Condition at the time of the last record made during the year to which the return relates			Class T.B. minus	Group 1	Class T.B. plus			Total (Class T.B. plus)
					Group 2	Group 3		
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested							
	Adults	M.	—	—	—	—	—	—
	„	F.	—	—	—	—	—	—
	Children		—	—	—	—	—	—
	Disease not Arrested							
	Adults	M.	42	26	36	4	66	
	„	F.	80	14	22	3	39	
	Children		46	1	2	—	3	
	Condition not ascertained during the year		1	—	—	—	—	
	Total on Dispensary Register at 31st December		169	41	60	7	108	
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered							
	Adults	M.	—	—	—	—	—	—
	„	F.	—	—	—	—	—	—
	Children		—	—	—	—	—	—
	Lost sight of, or otherwise removed from Dispensary Register		26	9	6	4	19	
	Dead							
	Adults	M.	16	8	34	19	61	
	„	F.	21	3	15	15	33	
	Children		—	1	1	—	2	
	Total written off Dispensary Register		63	21	56	38	115	
Grand Totals		232	62	116	45	223		

Condition at the time of the last record made during the year to which the return relates			Class T.B. minus	Group 1	Class T.B. plus Group 2	Group 3	Total (Class T.B. plus)
Disease Arrested							
(a) Remaining on Dispensary Register on 31st December.	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
Disease not Arrested							
	Adults	M.	80	18	45	7	70
	„	F.	75	9	34	—	43
	Children		35	2	1	1	4
Condition not ascertained during the year			—	—	—	—	—
Total on Dispensary Register at 31st December			190	29	80	8	117
Discharged as Recovered							
(b) Not now on Dispensary Register and reasons for removal therefrom.	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
Lost sight of, or otherwise removed from Dispensary Register			9	2	4	2	8
Dead							
	Adults	M.	5	—	19	4	23
	„	F.	7	—	9	4	13
	Children		—	—	—	1	1
Total written off Dispensary Register			21	2	32	11	45
Grand Totals			211	31	112	19	162

NON-PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (a) the condition at the end of 1931 of all patients remaining on the Dispensary Registers; and (b) the reasons for the removal of all cases written off the Register.

Previous to 1926.

Condition at the time of the last record made during the year to which the return relates		Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Totals
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested					
	Adults M.	1	—	—	—	1
	„ F.	—	—	—	1	1
	Children	4	—	—	—	4
	Disease not Arrested					
	Adults M.	2	—	3	—	5
	„ F.	5	1	4	6	16
	Children	33	5	2	18	58
	Condition not ascertained during the year ...	3	2	1	6	12
	Total on Dispensary Register at 31st December ...	48	8	10	31	97
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered ...					
	Adults M.	9	—	5	7	21
	„ F.	9	1	3	9	22
	Children	25	2	2	24	53
	Lost sight of, or otherwise removed from Dispensary Register ...	37	1	6	29	73
	Dead					
	Adults M.	6	1	4	—	11
	„ F.	2	1	1	2	6
	Children	4	1	—	—	5
	Total written off Dispensary Register .	92	7	21	71	191
Grand Totals ...		140	15	31	102	288

Condition at the time of the last record made during the year to which the return relates			Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Totals
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested						
	Adults	M.	—	—	1	—	1
	„	F.	—	—	—	1	1
	Children		1	—	1	—	2
	Disease not Arrested						
	Adults	M.	1	—	—	1	2
	„	F.	2	—	1	1	4
	Children		9	2	1	5	17
	Condition not ascertained during the year						
	...	...	1	—	—	1	2
Total on Dispensary Register at 31st December			14	2	4	9	29
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered						
	Adults	M.	2	—	—	—	2
	„	F.	1	—	1	2	4
	Children		8	—	2	6	16
	Lost sight of, or otherwise removed from Dispensary Register						
	...	...	4	1	3	16	24
	Dead						
	Adults	M.	1	—	1	—	2
	„	F.	—	—	—	—	—
	Children		1	—	—	—	1
Total written off Dispensary Register .			17	1	7	24	49
Grand Totals			31	3	11	33	78

Condition at the time of the last record made during the year to which the return relates			Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Totals
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested						
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		2	—	—	—	2
	Disease not Arrested						
	Adults	M.	—	—	2	2	4
	„	F.	2	1	1	4	8
	Children		20	—	—	13	33
	Condition not ascertained during the year ...		—	1	—	—	1
	Total on Dispensary Register at 31st December ...		24	2	3	19	48
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered ...						
	Adults	M.	2	—	3	—	5
	„	F.	—	—	—	2	2
	Children		4	—	1	8	13
	Lost sight of, or otherwise removed from Dispensary Register ...		11	3	5	9	28
	Dead						
	Adults	M.	1	—	—	1	2
	„	F.	1	—	—	—	1
	Children		1	—	—	—	1
	Total written off Dispensary Register .		20	3	9	20	52
Grand Totals ...		44	5	12	39	100	

Condition at the time of the last record made during the year to which the return relates			Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Totals
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested						
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		1	1	—	—	2
	Disease not Arrested						
	Adults	M.	2	—	3	1	6
	„	F.	2	—	1	—	3
	Children		10	5	3	17	35
	Condition not ascertained during the year ...		1	1	—	2	4
	Total on Dispensary Register at 31st December ...		16	7	7	20	50
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered ...						
	Adults	M.	1	—	1	1	3
	„	F.	1	—	—	2	3
	Children		4	—	—	3	7
	Lost sight of, or otherwise removed from Dispensary Register ...		7	2	3	5	17
	Dead						
	Adults	M.	2	—	—	—	2
	„	F.	—	—	—	—	—
	Children		1	—	—	—	1
	Total written off Dispensary Register .		16	2	4	11	33
Grand Totals ...		32	9	11	31	83	

Condition at the time of the last record made during the year to which the return relates			Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Totals
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested						
	Adults	M.	—	—	1	—	1
	„	F.	—	1	1	—	2
	Children		—	—	1	1	2
	Disease not Arrested						
	Adults	M.	3	—	2	2	7
	„	F.	3	1	1	4	9
	Children		15	1	2	11	29
	Condition not ascertained during the year		3	—	—	1	4
	Total on Dispensary Register at 31st December		24	3	8	19	54
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered						
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
	Lost sight of, or otherwise removed from Dispensary Register		5	1	1	8	15
	Dead						
	Adults	M.	—	1	1	—	2
	„	F.	—	—	—	1	1
	Children		—	—	1	—	1
	Total written off Dispensary Register		5	2	3	9	19
Grand Totals		29	5	11	28	73	

Condition at the time of the last record made during the year to which the return relates			Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Totals
Disease Arrested							
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		1	—	—	—	1
Disease not Arrested							
	Adults	M.	3	1	1	4	9
	„	F.	3	3	3	7	16
	Children		16	5	5	22	48
Condition not ascertained during the year ...			1	—	—	—	1
<hr/>							
Total on Dispensary Register at 31st December ...			24	9	9	33	75
<hr/>							
Discharged as Recovered ...							
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
Lost sight of, or otherwise removed from Dispensary Register ...							
			4	—	1	3	8
Dead							
	Adults	M.	1	—	—	—	1
	„	F.	—	1	1	—	2
	Children		—	—	1	—	1
<hr/>							
Total written off Dispensary Register .			5	1	3	3	12
<hr/>							
Grand Totals ...			29	10	12	36	87

Condition at the time of the last record made during the year to which the return relates			Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Totals
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested						
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
	Disease not Arrested						
	Adults	M.	6	1	5	3	15
	„	F.	2	2	1	6	11
	Children		17	—	2	5	24
	Condition not ascertained during the year ...		—	—	—	—	—
	Total on Dispensary Register at 31st December ...		25	3	8	14	50
(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered ...						
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
	Lost sight of, or otherwise removed from Dispensary Register ...		—	1	—	1	2
	Dead						
	Adults	M.	—	—	—	—	—
	„	F.	—	—	—	—	—
	Children		—	—	—	—	—
	Total written off Dispensary Register .		—	1	—	1	2
Grand Totals ...		25	4	8	15	52	

DAGENHAM SANATORIUM AND LANGDON HILLS SANATORIUM FOR CHILDREN.

Annual Report of the Medical Superintendent (Dr. G. M. Mayberry).

At the end of 1930 the number of patients remaining under treatment were:—

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

The total admissions during 1931 were:—

Males	...	...	...	140
Females	...	...	...	122—262

The number of deaths was:—

Males	...	...	...	35
Females	...	...	...	20—55

Discharges during the year totalled:—

Males	...	...	...	101
Females	...	...	...	101—202

Leaving under treatment at 31st December, 1931:—

Males	...	...	...	78
Females	...	...	...	38—116*

* Including 17 Non-Insured Persons.

Insured persons admitted during the year totalled 194, the remaining 68 being Non-Insured.

Forty-one Ex-Service men were admitted to the Sanatorium during the same period.

The Death Rate (calculated on admissions) was 20.99 per cent. In the case of males the percentage was 25.00, and in the case of females 16.39.

The Average Duration of Residence (both sexes) was 169.29 days. The average for males was 216.40 days, and for females 122.17 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	29	13	41	18	101
Females	46	7	31	17	101
MALES.					
Quiescent	19	8	10	1	
Improved	8	5	27	5	
No material improvement	2	—	4	12	
	—	—	—	—	
	29	13	41	18	
	—	—	—	—	

FEMALES.

Quiescent	30	5	13	5
Improved	11	1	16	5
No material improvement	5	1	2	7
	—	—	—	—
	46	7	31	17
	—	—	—	—

The results of treatment during the past year do not differ from previous years to any marked extent. One hundred and one male cases and one hundred and one female cases were discharged compared with one hundred and thirty-two and one hundred and two respectively in the previous year.

The duration of stay for male cases has been exceptionally high compared with other years, viz. 216 days per patient, and is due to the prolonged stay of a limited number, the average period of treatment for which was 896 days for five patients. A number of patients who died in the Institution also had been under treatment for a considerable time, seven cases averaged 607 days.

The acute cases often termed "galloping consumption" are now fortunately extremely rare. Many cases, however, reach the Institution in the last stages of the disease due to remaining at work too long and not taking advantage of the opportunities afforded to them for diagnosis and treatment. Many of these cases could have been saved or their lives prolonged. The between cases—Class T.B. plus 11, which usually are the predominant cases, require protracted treatment, short periods being of little use. If this class of patient is amenable to treatment, and is able and willing to remain as long as recommended, the result is often highly satisfactory. The outlook is much brighter for a patient with these attributes, as the person who carries out his or her treatment conscientiously in an Institution can generally be relied upon to make the best of his or her home conditions. Unfortunately, the number of patients who took their discharge against advice for various reasons during the past year was very high.

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.
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
1931	1.31	1.41	0.24	3.06	2.17	1.19	2.18	3.20	1.13	0.48	1.99	0.44

Entertainment.

During the year the usual Whist Drives and Billiard Handicaps took place, winning competitors receiving prizes. The monthly Concerts were again greatly appreciated by the patients and Staff.

Nursing Staff.

Seven Nurses passed the final examination for the Certificate of the Tuberculosis Association during the past twelve months, five being from Dagenham and two from Langdon Hill Sanatoria. Also four were successful in passing Part 1, two from the former and two from the latter Institution.

Staff.

Medical—

Medical Superintendent.
Assistant Medical Officer.

Office—

Assistant Steward.

Nursing—

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

Domestic—

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

Males—

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

WEST HAM SANATORIUM FOR CHILDREN, LANGDON HILLS.

At the end of 1930 the number of patients remaining under treatment was :—

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

The total admissions during 1931 were :—

Males	...	...	...	19
Females	...	...	...	31—50

The number of deaths were :—

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

Discharges during the year totalled :—

Males	...	...	...	21
Females	...	...	...	29—50

Leaving under treatment at 31st December, 1931 :—

Males	...	...	...	18
Females	...	...	...	22—40

The Average Duration of Residence (both sexes) was 290.72 days. The average for males was 309.33 days, and for females 277.24 days. The results of treatment for those discharged are as follows :—

	T.B. Minus	T.B. plus Grade I.	T.B. plus Grade II.	T.B. plus Grade III.	Total
Males.....	19	1	—	1	21
Females.....	23	—	4	2	29

MALES.

Quiescent.....	15	1	—	—	
Improved.....	3	—	—	—	
No material improvement	1	—	—	1	
	—	—	—	—	
	19	1	—	1	
	—	—	—	—	

FEMALES.

Quiescent.....	17	—	3	1	
Improved.....	4	—	1	1	
No material improvement	2	—	—	—	
	—	—	—	—	
	23	—	4	2	
	—	—	—	—	

In the past year the results of treatment were again entirely satisfactory. Several cases of the more advanced type were treated, and with few exceptions responded to treatment extremely well, one case has been at work many months.

The observation made last year that children re-admitted do rather better than during their first term has been substantiated. Though the results of treatment are much more encouraging than in the case of adults there is one side that is very disquieting and that is the home conditions in many cases. In the case of adults they return home fully aware of these. Children after a long stay often forget and do not appreciate what home is like, and have a rude awakening when they return after living under ideal conditions. In the majority of cases there seems only one alternative, and that is to send the children, where it is expedient, from the Sanatorium to a Colony such as Burrow Hill, Frimley, where they can remain and be trained until they are old enough to work and plan out their future, which would be a very different one from what it would be if they returned home. Unfortunately, there are very few Colonies of this description, and one feels that much more satisfactory results could be obtained with children than in the case of adults.

Only one infectious case occurred during the year, namely, chicken-pox, which fortunately did not spread.

The following was the rainfall for the past three 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
1931	0.99	1.37	—	4.08	2.57	0.88	3.33	4.48	0.91	—	1.87	0.38

Staff.

Nursing—

Matron.

2 Sisters.

7 Probationers.

Domestic—

8.

Males—

1 Head Gardener and Caretaker.

1 Motor Driver and Engine Attendant.

1 Handyman and Porter.

2 Assistant Gardeners.

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 23 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 1931.

	London.	Middle- sex.	Essex.	Surrey.	Kent.	Herts.	Bucks	East Ham.	West Ham.	Croy- don.	Total.	Other Places.	Grand Total.
New Patients :—													
Syphilis ...	3,158	412	168	166	92	58	19	49	73	24	4,219	311	4,530
Soft Chancre ...	235	5	21	5	3	3	...	3	12	1	288	50	338
Gonorrhoea ...	7,052	881	446	301	150	110	51	104	195	28	9,318	655	9,973
Not venereal ...	7,860	1,079	473	468	237	86	42	112	236	86	10,679	427	11,106
TOTAL ...	18,305	2,377	1,108	940	482	257	112	268	516	139	24,504	1,443	25,947
Total attendances ...	736,311	62,044	37,879	26,261	9,409	6,824	2,326	8,234	21,154	2,384	912,826	17,522	930,348
No. of in-patient days ...	32,940	3,618	2,062	2,012	1,602	937	276	569	712	380	45,108	11,433	56,541
Salvarsan Subs. doses	45,535	5,555	3,933	2,008	1,230	744	284	960	1,980	260	62,499	1,856	64,355
For or at Centres :—													
Spirochaetes ...	1,528	123	136	30	18	14	1	33	73	5	1,961	64	2,025
Gonococci ...	64,682	5,120	5,416	2,668	1,456	838	222	1,050	2,808	372	84,632	2,113	86,745
Wassermann ...	30,234	2,888	1,901	1,558	657	420	194	282	781	236	39,151	1,299	40,450
Others ...	22,313	872	3,211	1,011	575	171	95	889	1,543	216	30,896	976	31,872
TOTAL ...	118,757	9,003	10,664	5,267	2,706	1,443	512	2,254	5,205	829	156,640	4,452	161,092
For Practitioners :—													
Spirochaetes ...	88	1	...	...	...	...	...	...	...	...	89	...	89
Gonococci ...	4,329	130	187	251	22	53	17	4	4	2579	7,576	8	7,584
Wassermann ...	17,670	774	727	884	89	54	52	34	5	326	20,615	374	20,989
Others ...	5,338	97	545	395	33	41	9	30	3	293	6,784	52	6,836
TOTAL ...	27,425	1,002	1,459	1,530	144	148	78	68	12	3,198	35,064	434	35,498

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.	Practitioners.
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
1931	3,009	1,521	326	12	7,713	2,260	11,048	3,793	6,853	4,253	699,752	230,596	23,408	33,133	161,092	35,498

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

Return showing the extent to which the facilities have been utilised during the year ended 31st December, 1931.

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	81	44	342	280	747	41	33	13,438	2,104	1,143	39	...	456	26	584	38	434	28	1,605
Gt. Ormond Street	63	...	10	526	599	16	653	3,194	2,264	1,038	2	...	356	41	1,048	202	654	27	2,330
Guy's	435	64	699	1,070	2,268	29	1,645	61,270	2,505	7,450	346	...	13,322	970	3,793	2,826	4,499	1,090	26,541
King's College	175	5	117	229	526	134	364	13,598	834	896	9	9	1,190	139	1,343	2,665	25	...	5,380
L.C.C. Clinic (Whitechapel)	547	63	1,520	1,415	3,545	843	1,778	215,445	2,565	14,716	800	...	23,851	523	6,052	3,165	13,778	3,388	51,717
Metropolitan	84	19	162	121	386	80	195	21,939	190	1,319	32	1	776	65	490	263	156	74	1,857
Middlesex	142	...	413	99	654	474	255	30,376	962	2,356	41	3	3,328	241	762	1,255	20	426	6,076
Miller General	107	3	196	74	385	214	236	14,602	137	1,132	31	...	1,208	17	290	547	...	1	2,094
Royal Free	148	...	351	785	1,284	319	1,128	27,833	2,727	1,921	18	...	6,287	247	2,497	1,114	383	...	10,546
Royal London Oph.	176	...	44	20	240	99	...	3,457	601	1,140	2	...	107	...	578	...	10	...	697
Royal Northern	251	13	491	304	1,049	203	821	26,251	329	2,448	53	4	1,844	59	1,072	1,552	1	3	4,588
St. George's	237	13	552	275	1,077	287	537	33,683	489	2,255	...	61	461	322	1,723	190	...	...	2,757
St. John's (Lewisham)	68	3	127	213	411	18	334	10,622	876	895	11	...	246	78	769	450	585	135	2,274
St. Mary's	217	4	389	165	775	278	275	11,242	274	1,995	10	3	809	449	426	1,749	...	...	3,446
St. Paul's	249	7	874	1,130	2,260	188	1,685	122,253	2,942	4,841	271	2	9,375	1,738	3,046	467	165	48	15,112
St. Thomas'	628	73	1,666	2,700	5,067	1,316	3,803	159,842	5,143	8,454	...	...	10,743	2,024	9,901	1,869	10,403	560	35,500
Seamen's	263	26	551	165	1,010	1,017	27	14,751	9,422	1,332	71	...	1,425	80	798	133	645	7	3,152
South London for Women	8	1	75	147	231	40	199	4,005	668	204	4	...	772	87	247	583	...	...	1,693
University	199	2	352	44	597	329	152	36,133	694	2,311	24	...	1,422	206	1,015	21	...	...	2,688
West London	353	1	639	1,057	2,050	391	1,595	77,337	2,292	5,221	235	6	4,978	223	3,098	654	25	66	9,285
Westminster	70	2	173	29	274	109	184	20,463	305	1,235	19	...	993	49	507	1,246	89	830	3,733
S.A. Mothers'	16	...	176	257	449	188	241	8,614	5,835	53	12	...	3,096	...	411	...	...	...	3,519
Children's, Waddon	8	...	5	1	63	...	62	...	12,383	...	...	...	...	...	...	...	...	...	...
TOTALS	4,530	338	9,973	11,106	25,947	6,874	16,199	930,348	56,541	64,355	2,025	89	86,745	7,584	40,450	20,989	31,872	6,836	196,590

(a) For Centre, 161,092.

(b) For Practitioners, 35,498.

Venereal Diseases.

Utilisation of facilities at Hostels, 1931.

Particulars of the work done on behalf of the participating authorities by the hostels in the scheme for the year ended 31st December, 1931. 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.7.

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	...	...	...	...	134	13,794	51.3
Surrey	...	...	...	...	22	2,291	8.5
Essex	...	...	...	...	19	2,416	9.0
Middlesex	...	...	...	...	23	2,740	10.2
Herts	...	...	...	...	17	1,501	5.6
Kent	...	...	...	...	15	1,704	6.3
West Ham	...	...	...	...	4	528	2.0
Croydon	...	...	...	...	4	485	1.8
Bucks	...	...	...	...	10	1,275	4.7
East Ham	...	...	...	...	2	164	.6
TOTALS	...	...	...	...	250	26,898	100.0

MATERNITY AND CHILD WELFARE.

Report of the Senior Assistant Medical Officer for Maternity and Child Welfare (Dr. Helen Campbell).

Notification of Births.

The birth rate for 1931 was 17.7. There were 6,194 live births and 190 stillbirths (total births, 6,384) officially notified in accordance with the Notification of Births Act, 1907. By this Act the birth of an infant should be notified to the Medical Officer of Health by the doctor, nurse, friend, or relative of the patient within 36 hours of the birth. Unfortunately, in certain cases, this notification is forgotten by the attendants, or, the doctor relies on the nurse or vice versa. The result is that the existence of an infant may not be revealed to the public health authorities until about six weeks after birth, when the birth must be registered.

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

1927	1928	1929	1930	1931
5991	5913	5766	5606	5266

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

Health Visiting.

In April, 1931, six additional fully-trained Health Visitors were added to the existing staff of twelve, making a total of eighteen municipal full-time Health Visitors. For some time prior to this date there was difficulty in maintaining satisfactory and adequate home visiting of infants and more particularly of children from 2—5 years of age. This was due to the rapid extension in a comparatively short space of four years of the clinic work, necessitating the attendance at clinics of the Health Visitors. Home visiting of expectant mothers, etc., had increased with the commencement of new antenatal clinics.

In addition to the eighteen Health Visitors (full time) already mentioned, there are thirty-four nurses attached to the Plaistow Maternity Hospital who undertake the routine health visiting of a large number of the infants attended at birth by the midwives from that training school. The Voluntary Infant Welfare Centres employ a nurse or nurses who do not do routine home visiting, but who may visit such infants attending these Centres, about or for whom the Medical Officer requires a special report or supervision.

The routine adopted by the eighteen Municipal Health Visitors may be set out as follows:—

Age period.	Minimum number of visits per year
0—1 years 	4—at intervals of 3 months
1—2 years 	4—at intervals of 3 months
2—5 years 	2—at intervals of 6 months

(or till admitted to School)

In the case of Premature Infants, a visit is made once monthly till the child is one year old. The Health Visitor also visits a weakly, delicate infant, or young child at more frequent intervals than the prescribed routine number.

Many children in this Borough enter the Infant Department of the Elementary Schools at four years of age, when the child is transferred to the School Medical Service. Notes of the progress of each child from birth, also of the illnesses from which the child has suffered, are sent to the School Medical Officer immediately the child enters school, where they are available for reference by the School Doctor when the first school medical inspection takes place. A similar transfer takes place if a young toddler (2—5 years) enters one of the Council's Nursery Schools. But in this case, should the child leave that school before he is old enough to be admitted to an ordinary Infant Department, supervision of his health is then resumed by the Maternity and Child Welfare Department. In this way it is felt that a close and constant watch is being kept on the health of the infants and young children before reaching school age. With the increased number of Health Visitors, it has been found possible to subdivide the Borough into districts of a size more compatible with the requirements regarding number and adequacy of home visits by each Health Visitor. The results are already evident by the increased attendances at clinics of toddlers from 2—4 or 5 years. The Health Visitors are kept in touch with the advice given at the Welfare Centres regarding infants and children, so that they may follow up their cases to see that the advice is being carried out, and that any treatment ordered is being arranged and undertaken. A very high percentage of infants under one year of age were taken to the clinics during 1931—viz., 88.9%. It is through the efforts at the visits to the homes by the Health Visitors that such a gratifying result is obtained.

Antenatal Visiting. Systematic home visiting of expectant mothers is undertaken by the Health Visitors, resulting again in increased attendances at Antenatal Clinics. Through these visits

the mother is informed where she may obtain the services of a Home Help or receive extra nourishment (in the form of dried milk) in necessitous cases; she also receives valuable information regarding preparation of her home for confinement, personal hygiene, and other relevant advice.

Special visits and enquiries are made into the causes of all deaths up to 5 years of age, and into all cases of stillbirth. During 1931 the system of visiting was begun of every case of stillbirth after an interval of six months: this has proved worth while in that a proportion of these mothers are found to be pregnant again, and can thus be supervised from the early months to prevent such a recurrence. Weekly visits are paid as long as necessary to all cases of Puerperal Fever or Pyrexia, Ophthalmia Neonatorum, Pemphigus Neonatorum in order to see that the patient is receiving efficient care and is carrying out all advice for her own health or the health of the infant.

Visits paid by all Health Visitors during 1931.

	First Visits.	Total Visits.
(a) To expectant mothers.	6470	23065
(b) To children under 1 year of age.	7422	51528
(c) To children between the ages of 1 and 5 years.	2249	62628
† (d) Infant Life Protection visits.		473
† (e) Special visits (Home Helps, etc.)		12857
		<hr/>
Total visits ...		150551
		<hr/>

† Visits by Municipal Health Visitors only.

The figures under headings (a) (b) and (c) include all visits paid by the eighteen (from April, 1931), full-time Health Visitors employed by the Council, plus the Health Visiting Staff employed by the various voluntary associations in the Borough.

**Table shewing Method of Feeding, up to 6 months of age, in
Infants born in 1931.**

No. Visited	Completely Breast fed	Partially Breast fed	Complete Artificial Feeding
4868	3249 66.7%	980 20.1%	639 13.2%

Clinics.

At the beginning of 1931 there were three Municipal Clinics, including the recently opened Grange Road Clinic, and seven Voluntary Maternity and Child Welfare Clinics. At the end of April, 1931, two other Municipal Clinics were officially opened, the first sessions for work being held in the middle of May. These three new Clinics supply districts at some considerable distance from the already existing Clinics: two of them—Grange Road and Maybury Road Clinics—have been erected in the centre of two of the Council's housing estates. They were urgently required, and already have proved of great value to the mothers with young children living in the districts surrounding the Clinics. At each of the five Municipal Clinics, antenatal and infant welfare sessions are held weekly; dental treatment for expectant and nursing mothers and for young children is arranged through the Clinics and carried out at the three new Clinics, each of which has a well-equipped dental department. Antenatal sessions are held at four of the Voluntary Clinics, and dental treatment is also carried out at the Plaistow Maternity Hospital for mothers and children attending their Clinics. One or more infant welfare sessions are held weekly at all Voluntary Clinics.

Postnatal Clinics. It has not been found possible with the existing Municipal staff to establish separate postnatal sessions at the Municipal Clinics, but mothers are encouraged to report for such advice at the antenatal sessions.

Clinics for the Pre-School Child. The toddler is examined at the ordinary infant welfare session, when it is pointed out to the mother the importance of keeping a young child under regular medical supervision till it enters school, in order to prevent the development of defects and minor maladies or to obtain early treatment if such are detected.

The second full-time Assistant Medical Officer for Maternity and Child Welfare commenced work on 1st September, 1931; six additional Health Visitors and a full-time Dental Nurse began work in April, 1931.

Dental Scheme.

In January, 1931, dental treatment was begun for expectant mothers and for nursing mothers (within six months of confinement). Additional sessions for mothers were established when Forest Gate and Maybury Road Clinics were opened for work in May, 1931. The work is carried out by the Dental Surgeon, Miss Esmée K. Wilson, whose report is attached :—

“The attendance last year proved to be very satisfactory. It is particularly pleasing to note the regular three-monthly attendance of 75% of the children, and as a result, the number of extractions per child is very markedly less than it was three or four years ago. I find that the parents, as a whole, take a pride and interest in their children's teeth, although there are still a number who will not bother ‘because they are only milk teeth.’ This is now, in almost every case, the only reason for wholesale extraction.

“During the year 1931, expectant and nursing mothers have been included in the dental schemes, also with very satisfactory results. The treatment at present consists of conservative work and extractions. The old prejudice against dental treatment during pregnancy is fast dying out, as is evidenced by the fact that there is an ever-increasing waiting list, which now numbers about 120 mothers. Assistance is urgently required in this work to bring about any noticeable improvement in the general condition of these mothers.”

(Signed) Esmée K. Wilson.

Dental treatment for children is carried out at the Council's new Maternity and Child Welfare Clinics ; four sessions are held weekly at two of the School Dental Clinics in order to supply areas not easily accessible to the new Clinics.

Attendances for Dental Treatment in 1931.

Children under five years of age :

Total No. of attendances for dental treatment	...	...	...	3493
No. of attendances for extraction	...	...	...	756
No of teeth extracted	...	...	...	2694
No. of attendances for fillings	...	...	...	1775
No. of teeth filled	...	...	...	2083
No. of attendances for examination (special dressings, silver nitrate dressing, etc.)	...	...	...	1448
Total No. of new cases treated	...	...	...	903

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

Address Where Held.	Number of Sessions held weekly (excluding Dental Sessions)	Day and Time of Meeting.	Average per Session.				Arrangements for Medical Supervision.
			Centre Attendances.		Medical Consultations.		
			Expectant Mothers.	Children.	Expectant Mothers.	Children.	
West Ham Lane Municipal Centre	4	Mon., Tues., Thurs., 2 p.m. Tuesday, 9.30 a.m.	21.	40.9	21.	32.	Dr. Helen Campbell.
*Forest Gate Municipal Clinic, Forest Street ...	3	Tuesday, 9.30 a.m. Tuesday, Thursday, 2 p.m.	7.9	50.	7.9	37.6	Dr. Janetta Powrie
*Grange Road Municipal Clinic	3	Wednesday, Friday, 2 p.m. Wednesday, 9.30 a.m.	11.2	36.5	11.	28.8	Dr. Helen Campbell.
*Maybury Road Municipal Clinic	3	Monday, 9.30 a.m., 2 p.m. Friday, 9.30 a.m.	11.2	36.5	11.2	25.0	Dr. Janetta Powrie
Silvertown Municipal Clinic	2	Wed., 10 a.m. and 2 p.m.	6.26	31.	6.	18.5	Dr. Janetta Powrie
Chesterton House Centre	6	Wed., Thur., 11 a.m. & 2.30 p.m. Mon., Fri., 1.30 p.m.	176.3	94.7	67.7	34.7	} Dr. Flora Hogg & Dr. Peter Kennedy.
Docks Centre, Hoy Street	5	Daily, 2 p.m.	111.6	79.6	41.9	55.0	
Martin Street Clinic ...	1	Thursday, 3.30 p.m.	29.4	30.8	11.5	8.0	
South West Ham Health Society Clinic, Lees Hall	3	Tues., Wed., and Fri., 1.30 p.m.	25.0 fortnightly	38.7	11.6 fortnightly	23.8	Dr. J. Lorimer Hawthorne.
Trinity Mission Centre, Oxford Road	2	Wed. and Thurs., 1.30 p.m.	—	44.8	—	28.2	Dr. Jean Smith.
Stratford Day Nursery Centre, Welfare Road...	3	Mon., Wed., and Thurs., 1.30 p.m.	—	44.3	—	22.9	Dr. Dorothea Brooks
Given Wilson Institute, Pelly Bridge	1	Mondays, 2 p.m.	—	27.0	—	23.7	Dr. Eva Morton.

* The first Session for work was held at Forest Gate and Maybury Road Clinics in May, 1931. An additional weekly Infant Welfare Session was begun at Forest Gate and Grange Road Clinics in September, 1931, and at Maybury Road Clinic in November, 1931.

o Dental treatment for mothers, and children under 5 years, is given at these Clinics.

Expectant and Nursing Mothers.

Total number of attendances for treatment	647
Number of attendances for extraction (under local anaesthetic)	404
Number of teeth extracted	948
Number of attendances for filling	65
Number of teeth filled	80
Number of attendances for special treatment	171
Number of new cases treated	214

Stratford Day Nursery.

During 1931 the work at the Stratford Day Nursery was carried on with the usual satisfactory results. It is of great service to the mothers of this district who are obliged to go out daily to work, and also of inestimable benefit to the young children who receive the care and attention there.

Total number of attendances of children during 1931 :

(1) Whole day	7304
(2) Average daily attendance	28
(3) Average weekly attendance	162

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

Sunlight Treatment for Children under 5 years of age.

Arrangements are in force whereby children under 5 years of age are referred for this treatment to the Sunlight Clinic at the Stratford Day Nursery Welfare Centre. This special Clinic was first opened in 1925 by the Women's League of Service for Motherhood at the Stratford Day Nursery Clinic in Welfare Road. In February, 1928, two additional sessions were established weekly by an arrangement made between the Maternity and Child Welfare Committee of the Borough and the Committee of the above League. The children 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. Greater use is being made of these facilities since the opening of the new Clinics, owing to the fact that more children are now brought in touch with the work of the Child Welfare Scheme.

Attendances at the Sunlight Clinic.

(1) Municipal Clinic. (2 sessions per week)	Number of new cases : 114. Number of attendances for treatment : 2,084
(2) Day Nursery Clinic. (3 sessions per week)	Number of new cases : 644. Number of attendances for treatment : 5,485

Distribution of Dried Milk to Nursing and Expectant Mothers and to Children under 3 years of age during 1931.

DRIED MILK.

Distribution of Dried Milk to Nursing and Expectant Mothers and Children under three years of age.

The demand for Full Cream Dried Milk continues, and indeed would appear to be on the increase. From the table shown below it will be seen that during the year 1931 there was an increase of over 14 tons as compared with the year 1930.

The supplies delivered by the Contractors during the year have been quite satisfactory, and no inconvenience has been experienced as a result of strikes, weather conditions and other circumstances calculated to cause a stoppage.

Circular 185 of the Ministry of Health is carefully followed, and the number of persons who endeavoured to obtain Dried Milk by false statements during the year was negligible.

During the year 1931, 101 tons, 5 cwts, 46 lbs. of Full Cream Dried Milk were distributed in 1 lb. greaseproof bags enclosed in carton packets with printed directions clearly set out as to use, to eligible persons residing in the Borough from the undermentioned Centres:—

84 West Ham Lane, Stratford.

Public Hall, Barking Road, Canning Town.

Nurses' Home, Howards Road, Plaistow.

Maternity Centre, Barnwood Road, Silvertown.

This branch of the Council's service has been in operation since August, 1920, and it is interesting to note how an average of nearly 100 tons per annum has been maintained since the year 1923:—

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.	97 tons	10 cwts.	
1929—	195,910 do.	87 tons	9 cwts.	22 lbs.
1930—	195,250 do.	87 tons	3 cwts	34 lbs.
1931—	226,846 do.	101 tons	5 cwts	46 lbs.

The milk powder is received in bulk in hermetically sealed canisters, is packed by the Council's own staff, and only the estimated required quantity is weighed up daily so as to ensure as far as possible, the Milk being fresh when supplied to applicants.

Samples from each consignment have been submitted for chemical analysis and bacteriological examination, and found to be satisfactory. Stock books, authorised vouchers, showing receipts and issues are kept, and monthly stocktakings are carried out.

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 Municipal Health Offices, Romford Road, Stratford, when a Health Visitor will call and give all the information necessary.

Home Helps.

The Home Help Scheme continues to be fully utilised and appreciated. A Home Help is a woman, approved as suitable by the Health Visitor, who is employed by the Council to assist in the Homes during the lying-in period of certain necessitous women. The Home Help attends daily for fourteen days, and is present in the home during the confinement to obtain anything required by doctor or nurse, but it is impressed on these women that they must not in any way undertake the nursing of the patient or be responsible for the confinement. In October, 1931, a rule was established that the Council would not grant a Home Help to any woman unless she had engaged a trained midwife to attend her at the confinement, or unless a trained maternity nurse was present with the doctor. Previously it was found in a certain small number of cases that the Home Help was a "handywoman" who attended cases with a doctor, and, with the apparent approval of the doctor, conducted in an unsatisfactory and incompetent way, all the duties of a skilled midwife or nurse. Until the medical practitioner himself refuses to employ these untrained women as maternity nurses, and further, while a certain number of doctors definitely encourage their patients to engage such women as nurses, it is extremely difficult to convince the mothers that they are not being attended satisfactorily. Not only do the mothers receive incompetent treatment, but the lack of training of the newborn infants attended by untrained women is evident to the Health Visitors, who find on their first visit many faults in the care of the infants, in its management, training, and feeding.

The work of the Home Help is closely supervised by the Health Visitor, who visits the patient's home several times during the lying-in period in order to see that all duties are being 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 for 14 days following the confinement.

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. Payment will not be granted to a Home Help if she undertakes in any way the duties of a maternity nurse.

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, either in actual attendance on the patient or engaged to attend her at a later date, 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 (Municipal Health Offices, Stratford, E.15), that she has commenced her duties. She is also required to notify the Medical Officer of Health at once if she is unable to continue her duties, stating the reason for this inability.

9.—Any conduct on the part of the Home Help which is contrary to the interests of the person she is helping, or any failure to comply with the above rules, 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,

Municipal Health Offices,

Medical Officer of Health.

Romford Road, Stratford, E.15.

To:

The Medical Officer of Health,
Municipal Health Offices, 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 1931	...	1344
Eligible (under Council's Scale of Income)	... ..	1064
Ineligible (under Council's Scale of Income)	... ..	251
Withdrawn	... ..	29
		<hr/>
	Total	1344
		<hr/>

Home Help 1.

Home Help Application Form.

COUNTY BOROUGH OF WEST HAM.

**Application for the Payment of One Pound One Shilling per week
to the undermentioned Home Help during my wife's Confinement.**

Name of Applicant.....

Name of Applicant's Wife.....

Address.....

Names and Ages of all Applicant's Children.....

Date of expected Confinement.....

Name and Address of Home
Help proposed to be engaged

(The employment as Home Help of any relative to the patient or
applicant is not allowed, and no payment will be granted
to such a person).

Where is Applicant employed.....

Name of Employer.....

Total Weekly earnings of Applicant.....
Total Weekly earnings of other members of family living with
Applicant.....

This form, accurately completed, must be returned before the
confinement.

I, the undersigned, declare the above statement to be true.

Signed.....

Date.....

Home Help II.

Form of application for payment.

COUNTY BOROUGH OF WEST HAM.

Medical Officer of Health's Department.

I Certify that I acted as Home Help to:

Mrs.....

of.....

from the day of to the day

of and apply to the Council of the County Borough

of West Ham for the sum of being at the rate of

£1 1s. 0d. per week.

Signed.....

Address.....

.....

Date.....

The above-named Home Help acted as stated.

.....Health Visitor.

Certified.....

By the employment of a Home Help the mother is enabled to
obtain a longer rest after confinement than would otherwise be
possible; her physical condition improves, and much after ill-
health is prevented; also, she benefits mentally: she is freed from
the worries and anxieties that the other children might suffer
while she is confined to bed, in the knowledge that the Home Help
is undertaking all the duties and management of the home and
children.

Midwives.

The work of the midwives practising in the Borough is supervised by the Senior Assistant Medical Officer for Maternity and Child Welfare.

The total number who notified their intention to practise in the Borough in 1931 was 98, all of whom are trained midwives.

Number of cases attended by midwives in 1931	...	...	2925
Number of cases in which medical aid was summoned	...	...	623
Number of cases in which the midwife acted as a Maternity Nurse	...	...	240

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 Hospital (District) ...	52	1884	437
Queen Mary's Hospital (District) ...	7	129	0
Essex County Nursing Association ...	18	60	19
Tate Nurse's Home ...	6	104	15
Salvation Army Nurses ...	5	196	54

Private Practice :

Midwives residing in Borough—

(a) ...	1	90	31
(b) ...	1	191	40
(c) ...	1	106	7
(d) ...	1	8	2
(e) ...	1	57	7
(f) ...	1	0	0
(g) ...	1	2	0
(h) ...	1	3	1

Midwives residing outside the Borough—

(a) ...	1	95	10
(b) ...	1	0	0
Total ...	98	2925	623

The Council of this Borough does not employ or subsidise directly any midwife practising in the Borough. A large number of the women, confined in their own homes, are attended by district midwives attached to and practising from the several training schools for pupil midwives in the district, viz. Plaistow Maternity Hospital, Queen Mary's Hospital, and the Essex County Nursing Association Branch in Leytonstone.

Midwives' Acts, 1902 and 1918.

Analysis of records of sending for Medical Aid, 1931. Total 623.

PREGNANCY—	
Abortion	6
Unsatisfactory general condition of patient ...	30
Total ...	36

LABOUR—	
Malpresentation	22
Prolapsed cord	5
Prolonged labour	103
Torn perineum	120
Placenta Praevia	1
Antepartum haemorrhage	29
Postpartum haemorrhage	18
Adherent placenta	8
Retained membranes.....	2
Unsatisfactory condition of mothers	19
Total ...	327

PUERPERIUM—	
Rise of temperature	67
Phlebitis	8
Postpartum eclampsia ...	1
Unsatisfactory condition of mothers	24
Total ...	100

INFANT—	
Prematurity and unsatisfactory condition of infant	86
Tongue tie	6
Watery blisters	4
Rash on body	9
Discharging eyes	34
Malformation: congenital defect	7
Asphyxia and Cyanosis...	5
Stillbirth	6
Macerated foetus	2
Birth injury	1
Total ...	160

Hospital Accommodation.

There has been no change during 1931 in the arrangements previously in force for the admission of expectant mothers to hospital for confinement. Subsidies are granted to Queen Mary's Hospital and to the Plaistow Maternity Hospital, while the Forest Gate Hospital, under the Public Assistance Committee, admits a number of women to its Maternity Wards.

Maternity Hospitals.

	No. of beds	No. of cases admitted	West Ham Residents	
			No. Confined	No. of weeks spent
(1) Queen Mary's Hospital	44	415	391	795
(2) Plaistow Maternity Hospital ...	56	954	851	1911
(3) Forest Gate Hospital	40	237	217	609

Hospitals for Children under 5 years of age.

Arrangements are in force with St. Mary's Hospital, E.13, and with the Invalid and Crippled Children's Hospital, E.13, for the admission of infants and young children requiring in-patient hospital treatment. The cases admitted to St. Mary's Hospital vary in type, being both acute and chronic medical or surgical cases. At the Invalid and Crippled Children's Hospital, a Ward of 16 cots is set aside for the treatment of infants and young children suffering mainly from disorders due to dietetic errors and faulty hygiene. Such children are generally admitted direct from the Infant Welfare Clinics in the Borough. In addition there are four beds for the surgical treatment of orthopaedic cases.

	West Ham Residents		
	No. of beds	No. of cases admitted	No. of weeks spent
(1) St. Mary's Hospital, E.13	10	212	735.4
(2) Children's Hospital, Balaam Street, E.13			
(a) Babies' Ward	16	183	795
(b) Orthopaedic Ward	4	22	57.6

Convalescent Homes for Children.

The Council has no convalescent home for children under five years of age, but arrangements are made through the Invalid Children's Aid Association and the Invalid and Crippled Children's Society to send young children to various suitable homes. During 1931 it has been possible to send away ninety-seven children. These children are all examined before being sent away, by the Senior Assistant Medical Officer for Maternity and Child Welfare, who recommends the period of convalescence necessary. This usually varies from four to eight weeks, and in special cases an extension is granted when applied for by the Medical Officer of the Home.

A very large percentage of the children are recommended by the Medical Officers of the various Infant Welfare Centres in the Borough, for such conditions as malnutrition, general or nervous debility, rickets and chronic bronchitis. Others are referred for convalescent treatment after acute illnesses such as pneumonia, and the infectious illnesses. The results of a period of convalescence under skilled supervision and in healthy surroundings are remarkable, producing lasting and often permanent benefit in the health of these young children.

Convalescence for Nursing Mothers and Infants,

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

As in 1930, the Council again rented two beds at this Home; full advantage was taken throughout the year of this arrangement, so that it was possible to send thirty-three mothers and thirty-one infants (under 6 months of age) to the Home, each for a period of three weeks. Letters are frequently received from these mothers while they are away, full of expressions of gratitude for the care and kind attention given to them by the Matron and her staff. To many of these women a holiday seems an impossibility and absolutely unattainable: the complete change from an over-crowded house and district to an airy Home in healthy, beautiful surroundings, plus the freedom from home worries, with often inadequate diet, soon brings back a sense of well-being and health to these women. The mothers are recommended by the Medical Officers of the Clinics or by the Health Visitors: each mother and infant is examined immediately before being sent to the Home by the Medical Officer for Maternity and Child Welfare.

In August and September of 1931, as a result of the very kind invitation of Miss Knowles, of Spilsill Court, Staplehurst, Kent, four mothers with their infants were sent, each for a holiday of three weeks, as her guests at the Lodge of Spilsill Court. The kindness shewn to these mothers was gratefully appreciated not only by the patients, but by all the members of the Maternity and Child Welfare Committee.

Maternity and Nursing Homes in the Borough.

There were three registered Maternity Homes in the Borough at the beginning of 1931, 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 had accommodation for other types of patients in addition to maternity cases. As reported in the Annual Report of 1930, in March, 1931, it was found necessary to cancel the registration of one of these Homes, owing to the unsatisfactory conditions prevailing there. This Home was accordingly closed in March, 1931, for maternity and other cases. There is one other small Nursing Home in the Borough, with accommodation for four chronic medical or senile cases.

These Homes are all registered under the Nursing Homes' Registration Act, 1927, and are inspected periodically.

During 1931 there were no fresh applications for registration of premises as Nursing Homes.

	Nursing Home (including Maternity Cases)	Maternity Home only
(1) No. of applications for Registration	3	Nil
(2) No. of Homes registered	3	Nil
(3) No. of Orders refusing or cancelling registration ...	1	Nil
(4) No. of appeals against such orders...	Nil	Nil
(5) No. of applications for exemption from registration ...	Nil	Nil

Children Act, 1908.

Under Part I. of this Act, the supervision of foster-children and of the homes of the foster-mothers is carried out by the Municipal Health Visitors in their respective districts. Application for registration as a foster-mother under the Act is made to the Maternity and Child Welfare Committee; registration is sanctioned by the County Borough Council on the recommendation of this Committee.

This Act is particularly difficult to administer efficiently. The applicant for registration as a foster-mother has already received and taken charge of the child before she is required to apply for registration. Until her application is placed before the Committee there is no power to remove the child from the care of the applicant, even if she, or the home, is definitely undesirable. Delay is unavoidable, under present conditions, before the application is passed or rejected.

But the greatest difficulty arises in those cases where registration is refused or cancelled; the practice adopted in this Borough is to request the parent to remove the child forthwith from the care of the foster mother. It has been found in several instances that the foster-mother has not received the payment promised, and that the parent or parents have disappeared, so that it is impossible in such circumstances to get into touch with the parents. An order for removal of the child to a Public Assistance institution is then given, in which case the child becomes wholly chargeable to the Public Assistance Committee until the

parents can be traced. All this procedure inevitably means delay ; in one case within recent months, the foster-mother disappeared in the interval of enquiry, taking the child with her. She was traced in another Borough after several weeks had elapsed, and then only after exhaustive enquiry.

Again, registration was cancelled in a recent case owing to the fact that the foster-mother persistently refused to conform to the rules laid down by the Council ; in the interval which elapsed the mother removed the child (who was an illegitimate child), leaving no address, hence it has been impossible to trace this particular case.

Method adopted in visiting.

The Health Visitor makes the necessary detailed enquiry immediately on receipt of the application from a woman for registration. She informs the foster-mother of the rules of the Council, amongst which a separate cot or bed for the child, also a fire-guard, must be provided, and it is the duty of the Health Visitor to see that such rules are complied with. A foster-mother with a young child must attend an Infant Welfare Centre regularly. Where registration has been sanctioned the Health Visitor must visit, and keep a record of her visit, as a minimum every two months.

Reference is made in every case of application to the Tuberculosis register, in order to prevent a young child being accepted into a home where such infection exists : it is also a rule that the foster-mother is allowed to have one foster-child only.

During the year 1931 :—

Number of applications for registration as foster-mothers...	45
Number of applications passed by the Council	36
Number of applications refused by the Council	4
Number of applications withdrawn	5
Number of visits paid to the Homes by the Health Visitor :	
(a) First visits	45
(b) Total visits	473

Notification.

	Children
(1) Number of foster-parents on the Register :	
(a) At the beginning of 1931 50	50
(b) At the end of 1931 55	55
(2) Number of foster-children who died during 1931	Nil

Legal proceedings were not taken in any case; in one case only the foster-mother refused on several occasions to allow the Health Visitor admission to her home. She was warned, at an interview with the Medical Officer of Health, that legal proceedings would be taken if she persisted in her actions; as a result of the interview, it has been found unnecessary to take further steps.

Registration was cancelled in one case (as stated previously) owing to the persistent refusal of the foster-mother to conform to the rules of the Council for the administration of the Act.

OPHTHALMIA NEONATORUM.

Twenty-eight cases of ophthalmia neonatorum were notified to the Medical Officer of Health during 1931. Of these cases, nineteen were treated in hospital: eleven as in-patients in the institutions in which they were born, three transferred to other hospitals, five treated as out-patients at a hospital. Arrangements are in force whereby any infant suffering from ophthalmia neonatorum can be admitted to hospital immediately if such treatment is considered necessary.

Number Notified	Cases Treated		Vision		Total	
	At Home	In Hospital	Unimpaired	Impaired	Blindness	Deaths
*28	9	19	18	4	0	0

* Of whom six were not resident in West Ham, but born in institutions in the Borough. In these cases the Health Visitors of this Borough cannot visit the homes (as is the rule for all such infants residing in West Ham) who are visited weekly till satisfactory; but the Medical Officer of the Borough or district in which the infant resides is notified.

In four cases there is permanent impairment of vision of a varying degree. All these infants were born in hospital, and therefore received treatment at the earliest appearance of the eye condition.

Case	Onset	Where treated		Result
		Hospital where born	Special Eye Hospital	
A.	3rd day after birth	Yes	—	Loss of sight in left eye. Right eye satisfactory.
B.	8th day after birth	—	Transferred on 15th day after birth	Scarring of both cornea with some impairment of vision.
C.	8th day after birth	—	Transferred on 24th day after birth	Impaired vision with scarring of left cornea. Right eye satisfactory.
D.	10th day after birth	Yes	—	Loss of sight in right eye. Left eye satisfactory.

Maternal Mortality.

Total number of notified births in the Borough in 1931 was 6384. Of this number 5266 were West Ham residents.

Number of deaths due to complications of pregnancy or childbirth, 16, seven of these being due to Sepsis, the remaining nine from other causes.

Maternal Mortality Rate for 1931, 3.0 per 1000, compared with 2.8 per 1000 in 1930.

Average age at death, 33 years.

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

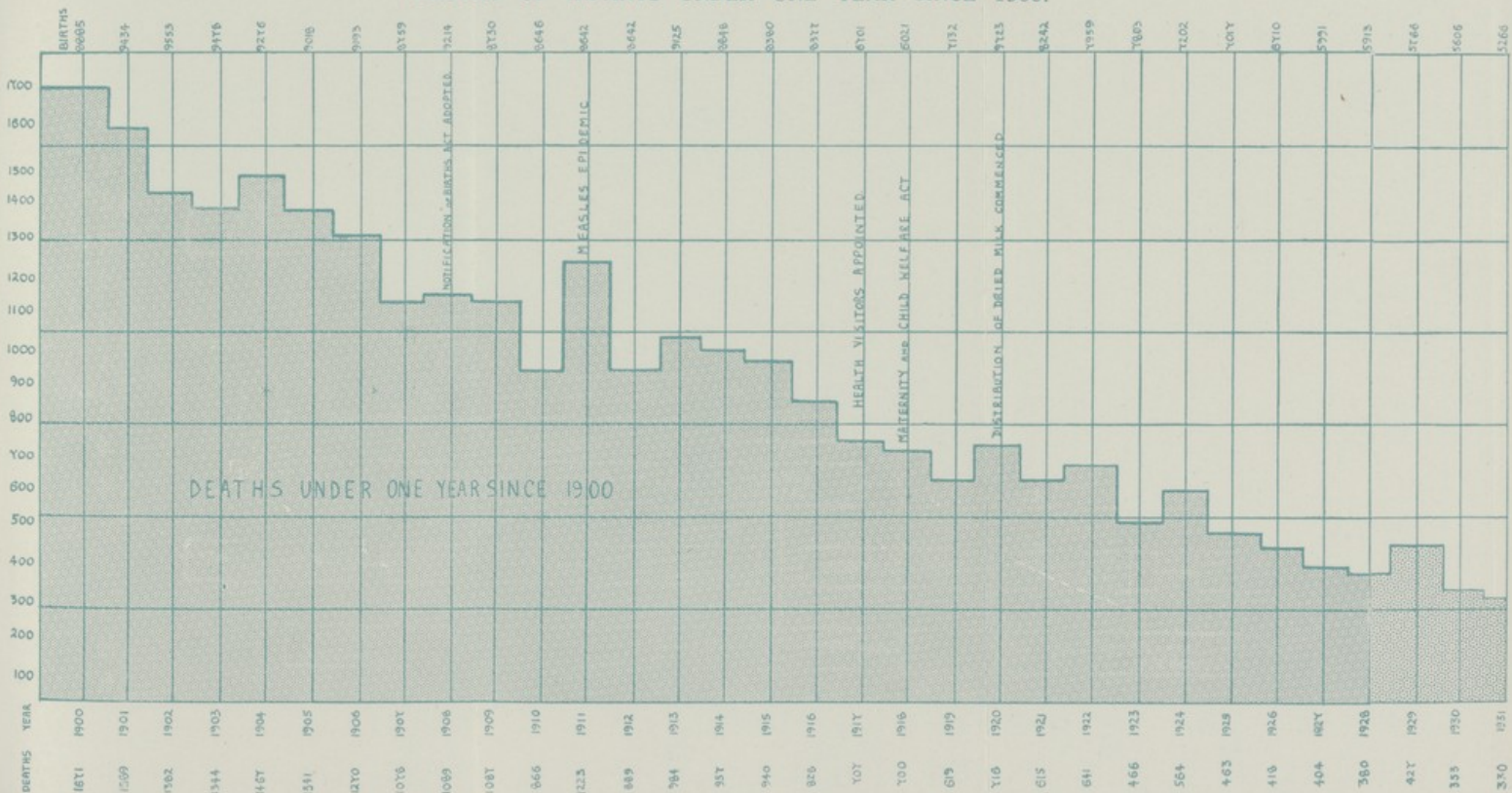
Case No.	Para.	Ante-natal supervision.				No ante-natal supervision.	Delivered.		Died.		Abortion.	Labour.	Certified Cause of Death.
		Hos-pital.	Clinic.	Pri-vate Doctor	Mid-wife.		Home.	Hos-pital.	Home	Hos-pital.			
1	9	—	—	—	—	+	+	—	—	+	Self-induced abortion	—	Septicaemia : self-induced miscarriage
2	8	—	+	—	—	—	+	—	—	+		Normal : patient had septic finger incised 2 days later	Puerperal Septicaemia Septic endometritis child birth
3	11	—	—	+	—	—	+	—	—	+	—	Difficult instrument at delivery : phlebitis on 12th day	Puerperal Septicaemia
4	4	—	—	—	—	Concealed pregnancy	+	—	—	+	Abortion at 12 weeks	—	Septicaemia and Abortion
5	4	—	—	—	—	Patient did not know she was pregnant	+	—	—	+	Abortion due to fall	—	Toxaemia following Abortion
6	1	—	—	—	—	+	+	—	—	+	Abortion due to fall Illegitimate		Toxaemia after Abortion due to accidental fall downstairs—Inquest
7	12	—	+	—	—	—	+	—	—	+	Foetus died in utero at 6th month labour induced difficult delivery of 6/12 foetus	—	Septic Endometritis miscarriage

The outstanding feature of the above table is the fact that five out of the seven deaths from puerperal sepsis resulted after abortion, in one of which, at least, there is a definite history of the condition being self-induced. In four of the cases of abortion, medical aid was not summoned at the time of the miscarriage, but at a period varying from two to several days after the onset of the abortion, owing to persistent haemorrhage due to retention of products in the uterus. Earlier intervention of medical help might have averted the fatal results.

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

Case No.	Para.	Ante-natal supervision.				No ante-natal supervision.	Delivered.		Died.		Abortion.	Labour.	Certified Cause of Death.
		Hos-pital.	Clinic.	Private Doctor	Mid-wife.		Home.	Hos-pital.	Home.	Hos-pital.			
1	2	+	—	—	—	—	+	+	—	+	—	Normal—developed pneumonia on 3rd day	Pneumonia Child birth
2	6	—	—	—	—	+	—	+	—	+	Abortion at 6/12 secondary to acute lobar pneumonia	—	Lobar pneumonia Pregnancy Abortion
3	1	—	+	—	—	—	Undelivered		—	+	—	—	Acute heart failure mitral stenosis Acute oedema of the lungs 6/12 pregnant
4	5	—	+	—	—	—	—	+	—	+	—	Albuminuria at 7/12. Fits developed at onset of labour. Forceps delivery. Died shortly after delivery. Patient failed to re-attend clinic or to carry out treatment advised	Heart Failure Eclampsia
5	15	+	both +	—	—	—	Undelivered		+	—	—	2½ weeks before death—i.e., at 7½ months of pregnancy, patient had slight fit: blood pressure raised: no albuminuria. Admitted to hospital and treated for 2 days: discharged much improved at own request: condition remained satisfactory till 8/12 when patient had sudden fit, causing coma followed by death shortly after.	Convulsions Eclampsia Pregnancy 8/12
6	1	+	—	—	—	—	Undelivered		—	+	28 weeks pregnant	Admitted to hospital for treatment for slight albuminuria, which persisted in spite of treatment. 3 weeks after admission to hospital had 3 Eclamptic fits causing death within a few hours	Eclampsia Pregnancy
7	6	—	+	—	—	—	—	+	—	+	—	37 wks. pregnant severe ante-partum haemorrhage first onset of haemorrhage with labour pains infant still born mother died in labour	Ante-partum haemorrhage—accidental
8	1	+	—	—	—	—	—	+	—	+	—	32 wks. pregnant admitted to hospital one week before death with symptoms of Toxaemia of pregnancy. Had fit on admission albuminuria present. Remained drowsy in spite of treatment infant still born mother died 2 days after delivery	Toxaemia of Pregnancy Pericarditis Oedema of Lungs
9	11	—	+	—	—	—	+	—	+	—	—	Full term normal delivery died suddenly 18 hours after delivery	Syncope Pulmonary Embolism

DEATHS OF INFANTS UNDER ONE YEAR SINCE 1900.



From the facts set out in Table No. II. it is a matter for grave consideration that in spite of antenatal supervision the "toxæmias of pregnancy" play a very considerable part in maintaining the persistently high maternal mortality rate. The amount of antenatal supervision varies in the four cases quoted above, and in one case the patient herself failed to carry out instructions. Case No. 6 is an example of one which is frequently met with in antenatal work, and which is necessarily a source of great anxiety to those responsible for the welfare of the patient; this particular case was apparently of the fulminating type, with a sudden "flare" of toxic symptoms in spite of treatment. But if antenatal work is to bring about a reduction in the maternal mortality rate, there must be more beds available for the reception and treatment, under continuous and skilled observation, of the many cases that arise in Clinics of persistent slight albuminuria with raised blood pressure.

Investigation of maternal deaths is undertaken by the Senior Assistant Medical Officer (Maternity and Child Welfare), who collects the details relative to each case from those who were in attendance on the patient during her pregnancy, labour or immediately prior to death.

Particulars of all cases notified as suffering from Puerperal Fever or Puerperal Pyrexia are obtained in detail by the Health Visitors, whose duty it is to visit each case weekly till the condition is satisfactory. Hospital facilities are available, beds being reserved at the Plaistow Fever Hospital and at Whipps Cross Hospital for the reception and treatment of such cases. Specialist advice can be obtained on notification to the Medical Officer of Health by the doctor in charge of the case, the Council having arranged for the services, when required, of a rota of three obstetric surgeons. Similarly, an arrangement is in force whereby any bacteriological examination may be obtained if required by the doctor for the diagnosis and treatment of the case.

Home nursing of cases of puerperal fever and pyrexia is undertaken by the Nurses from the several district Nursing Associations working in the Borough.

INFANTILE MORTALITY.

The infantile mortality rate for 1931 is 62.6 per 1,000 births, a decrease of .3 compared with that rate in 1930. For the great towns this rate is 71.0, and for England and Wales 66.0 per 1,000 births.

The total number of deaths under one year of age in 1931 was 330, of which 194 occurred in male infants and 136 in female infants. Of the total number of deaths at this age period, 313 were amongst legitimate infants, and the remaining 17 illegitimate.

Rate per 1,000 births: Legitimate, 60.8; Illegitimate, 138.1.

Deaths 1—5 Years.

Total number of deaths in age period 1—2 years ...	70
Total number of deaths in age period 2—5 years ...	55
<hr/>	
Total 1—5 years ...	125
<hr/>	
1931: Total deaths under 5 years of age ...	455
1930: Total deaths under 5 years of age ...	538

Table showing Causes of Death under One Year of age during the last five years.

Cause	1931	1930	1929	1928	1927
Congenital Debility, Malformation and Prematurity ...	132	143	139	134	149
Pneumonia	74	71	113	88	106
Bronchitis	19	10	10	27	20
Other Respiratory Diseases	3	0	2	2	3
Diarrhoea, etc.	33	39	52	43	28
Measles	1	16	6	14	0
Whooping Cough	17	6	40	7	35
Scarlet Fever	2	1	1	0	1
Diphtheria	0	3	4	2	5
Influenza	1	1	1	0	2
Syphilis	2	0	0	0	0
Meningococcal Meningitis ...	6	5	4	0	0
Pulmonary Tuberculosis ...	1	3	1	0	0
Other forms of Tuberculosis	8	8	5	0	0
Deaths from Violence	3	2	4	2	2
Other Defined Diseases ...	28	45	44	61	53
<hr/>					
Total ...	330	353	427	380	404
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Causes of Death in Age Periods 1—5 years.

Cause	1-2 years	2-5 years
Measles	0	1
Whooping cough	10	8
Diphtheria	0	7
Influenza	1	1
Cerebro spinal meningitis	1	1
Pulmonary Tuberculosis	0	1
Other forms of Tuberculosis	4	6
Pneumonia (all forms)	32	11
Bronchitis	2	1
Other respiratory diseases	1	0
Diarrhoea, etc.	8	0
Deaths from violence	2	8
Other defined diseases	9	10
	<hr/>	<hr/>
Total ...	70	55
	<hr/>	<hr/>

The infantile mortality rate compares favourably with that of the Great Towns, particularly when one takes into consideration the very poor home conditions and low standard of living in parts of the Borough. Prematurity and congenital debility cause 40% of the infantile deaths—investigation and further research into antenatal conditions is required to reduce this rate, many deaths from prematurity occurring within a few hours after birth. Economic social conditions must be considered in addition to or even more than questions pertaining solely to the health of the expectant mother if the number of infant deaths from prematurity is to be further materially reduced.

Mental Deficiency Acts, 1913—1927.

On the 31st December, 1931, there were 498 Mental Defectives on the register. Males, 261; Females, 237.

Number actually in Institutions—

Males, 81; Females, 71. Total, 152.

Number under Statutory Supervision—

Males, 179; Females, 162. Total, 341.

Number under guardianship under order—

Males, —; Females, 1. Total, 1.

Number on licence from Institutions—

Males, 1; Females, 3. Total, 4.

During the year, 111 new cases were dealt with as follows:—

Recommended Institutional Care—

Males, 5; Females, 10. Total, 15.

Recommended Supervision at Home—

Males, 35; Females, 53. Total, 88.

No Action Necessary at present—

Males, 5; Females, 3. Total, 8.

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

Males, 16; Females, 17. Total, 33.

Number of cases admitted to Institutions during the year—

Males, 7; Females, 16. Total, 23.

During the year 29 Continuation Orders were received:—

For 5 years: Males, 10; Females, 10. Total, 20.

For 1 year: Males, 7; Females, 2. Total, 9.

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, 4; Females, 4. Total, 8.

Number dealt with under the Lunacy Acts—

Males, 1; Females, —. Total, 1.

One case, a boy of 11 years of age, was discharged from Institution to the care of his parents, and the Order for Detention allowed to lapse.

During the year 111 suspected cases of mental deficiency were dealt with, eight of whom were deemed to be of too high a grade to be certified as mentally defective. These eight cases are kept in touch with by the Supervising Nurse and their progress noted.

Of the total number of cases on the register, 341 are under Statutory Supervision in their own home. These cases are visited at frequent intervals by the Nurse, and any change in their circumstances reported to me for any action that may be deemed necessary.

Only one case is under Guardianship under Order, but two others on licence from institutions in the care of Guardians (all of whom are girls). These latter two cases have been under this care for some considerable time—one since April, 1928, and the other since January, 1929. Both are doing quite well.

The first portion of the Colony at South Ockendon, namely 3 villa blocks to accommodate approximately 135 patients and the necessary staff, has matured during the year. It was originally intended that two of these villas should be utilised for patients (60 in each block), and the third to accommodate the staff. This arrangement however was not approved by the Board of Control on the grounds that such methods would not allow sufficient scope for proper classification of sexes and age. It was finally agreed that one block should be used for 44 male adults and the male nursing staff, another block for 40 juvenile males, and the third for 30 adult females and 20 juvenile females. The female nursing staff and domestic staff will also be accommodated in these last two villas. The accommodation provided is intended to allow the West Ham and East Ham cases who are already detained in the London County Council institutions to be removed, and for the urgent cases awaiting vacancies to be admitted. It is hoped that there may be sufficient beds available to ease to some extent the appalling overcrowding in the Forest Gate Hospital.

The buildings were commenced in April, 1930, and construction sufficiently advanced by the end of March, 1932, for furniture and equipment to be put in hand. The official opening of these villas was held on the 5th May, 1932, and the necessary formalities regarding the transfer of patients commenced.

APPENDIX I.

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.

	Number of Men.	Number of Women.	Number of Children.
New cases seen	1186	3130	2799
Total No. of cases seen	4952	19246	7549
No. referred by Relief Sub-Committee	494	559	430
Attendances at Surgery	4349	16266	5757
Sent to Institutions:—			
Voluntary Hospitals	1	6	4
Whipps Cross Hospital	203	271	249
Mental	5	11	1
Otherwise	1	3	53
Central Home	117	116	4
Forest House	—	—	—
Forest Gate Hospital	3	30	2
Aldersbrook Home	—	—	1
Discharged as no longer in need of treatment	842	1856	1994
New cases seen at Domiciliary visit	312	887	1053
Fresh cases transferred from			
(a) Institutions	1	—	3
(b) General Practitioner	4	1	—
Total No. of Domiciliary visits paid	1052	4234	2685
Visits paid by District Nurse	511	5053	2674
Deaths	18	32	2
Total No. now on register as receiving treatment from D.M.O.	2133	8505	3452
Prescriptions made up	6495	22927	7129
Total No. of vaccinations or re-vaccinations	577		1402

WHIPPS CROSS HOSPITAL.

	MEN			WOMEN			CHILDREN			Total
	Acute	Sub-acute	Chronic	Acute	Sub-acute	Chronic	Acute	Sub-acute	Chronic	
Admitted	3271	—	57	3348	—	38	2010	—	9	8733
Discharged	2647	—	63	2951	—	53	1793	—	5	7512
Seen as out-patients	355	—	158	82	—	1	30	—	—	626
Not Admitted	375	—	44	134	—	28	128	—	4	713
Admitted by means of Relieving Officer and District Med. Officer Gen. Practitioner and Relieving Officer M.O.H. Otherwise Transferred from other institutions, Police (not accidents) Accidents Med. Superintendent No. of infectious cases Transferred to other institutions Deaths Total No. being treated in Hospital on 2/1/32	MEN			WOMEN			CHILDREN			
	285			294			302			881
	2572			2780			1451			6803
	—			—			—			—
	6			7			5			18
	166			187			182			535
	68			46			9			123
	159			78			56			293
	34			14			6			54
	294			239			133			666
	221			224			236			681
	622			439			213			1274
	320			266			249			835
No. of cases seen by Consultants...	3050	Gynaecologist	...	20	No. of cases allocated to:	X-ray				
Ophthalmic	296	Surgeon	...	215	West Ham	...	1713	West Ham	...	1175
Aural	504	Neurologist	...	228	Essex	...	945	Essex	...	1157
Light	1008	Dentist	...	400	East Ham	...	394	East Ham	...	356
		Urologist	...	177						

CENTRAL HOME.

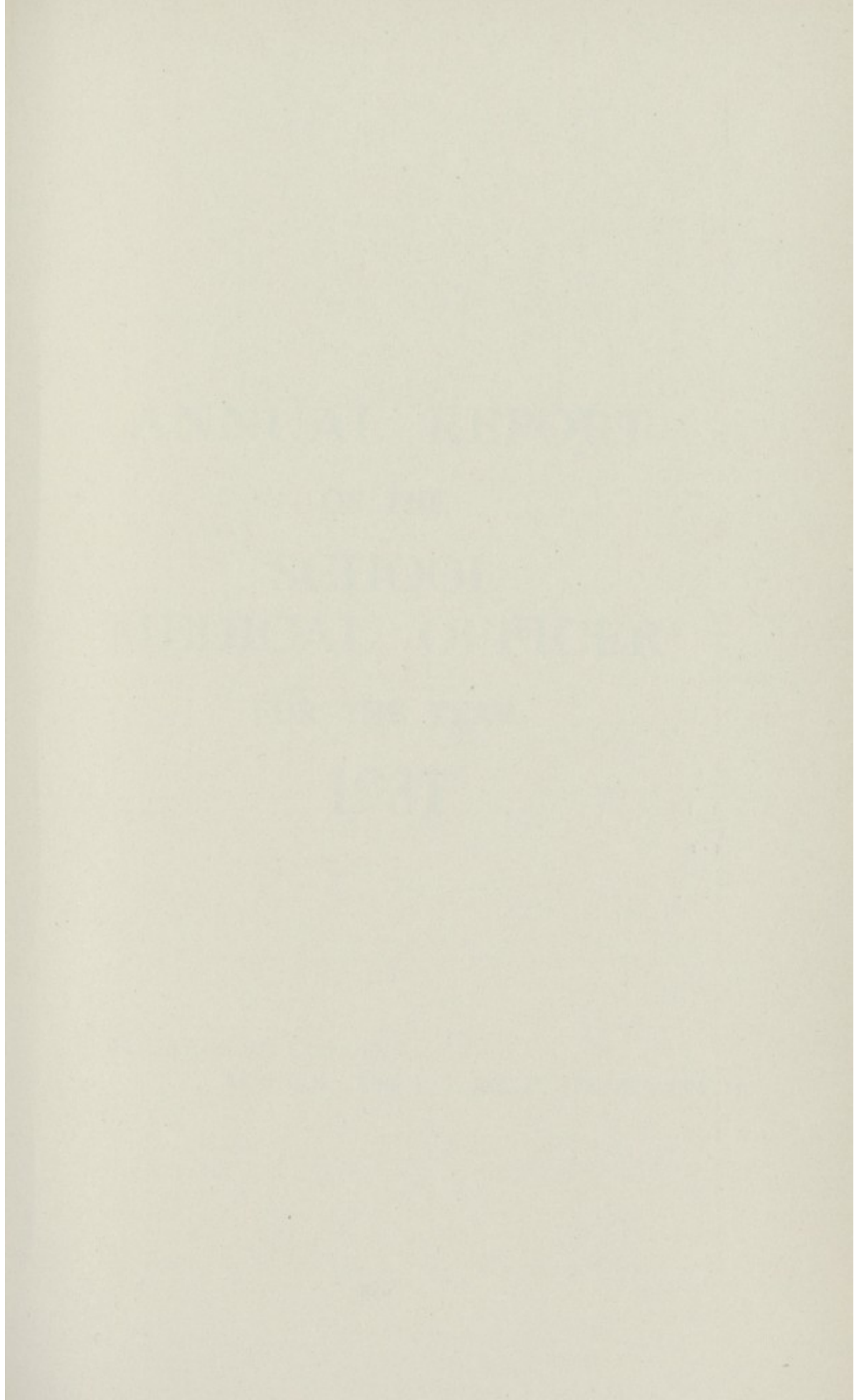
	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	875	10	13	984	7	13	1	2	1	1906
Discharged	822	10	12	1025	7	13	1	2	1	1893
Refused Admission	—	—	—	—	—	—	—	—	—	—
Admitted by means of Relieving Officer and District Med. Officer	MEN			WOMEN			CHILDREN			
Gen. Practitioner and Relieving Officer	140			186			—			326
Gen. Practitioner and District Med. Officer	410			471			1			882
M.O.H.	—			1			—			1
Otherwise	107			125			2			234
Transferred from other institutions,	242			211			1			454
Med. Superintendent	—			—			—			—
No. of infectious cases	7			2			16			25
Transferred to other institutions	105			353			4			462
Deaths	500			456			1			957
Total No. of sick cases in the Home on 2/1/32	464			462			4			930
Total number of Able-bodied in the Home on 2/1/32	472			356			1			829
No. of Vacant Beds if any on 2/1/32	16			15			—			31

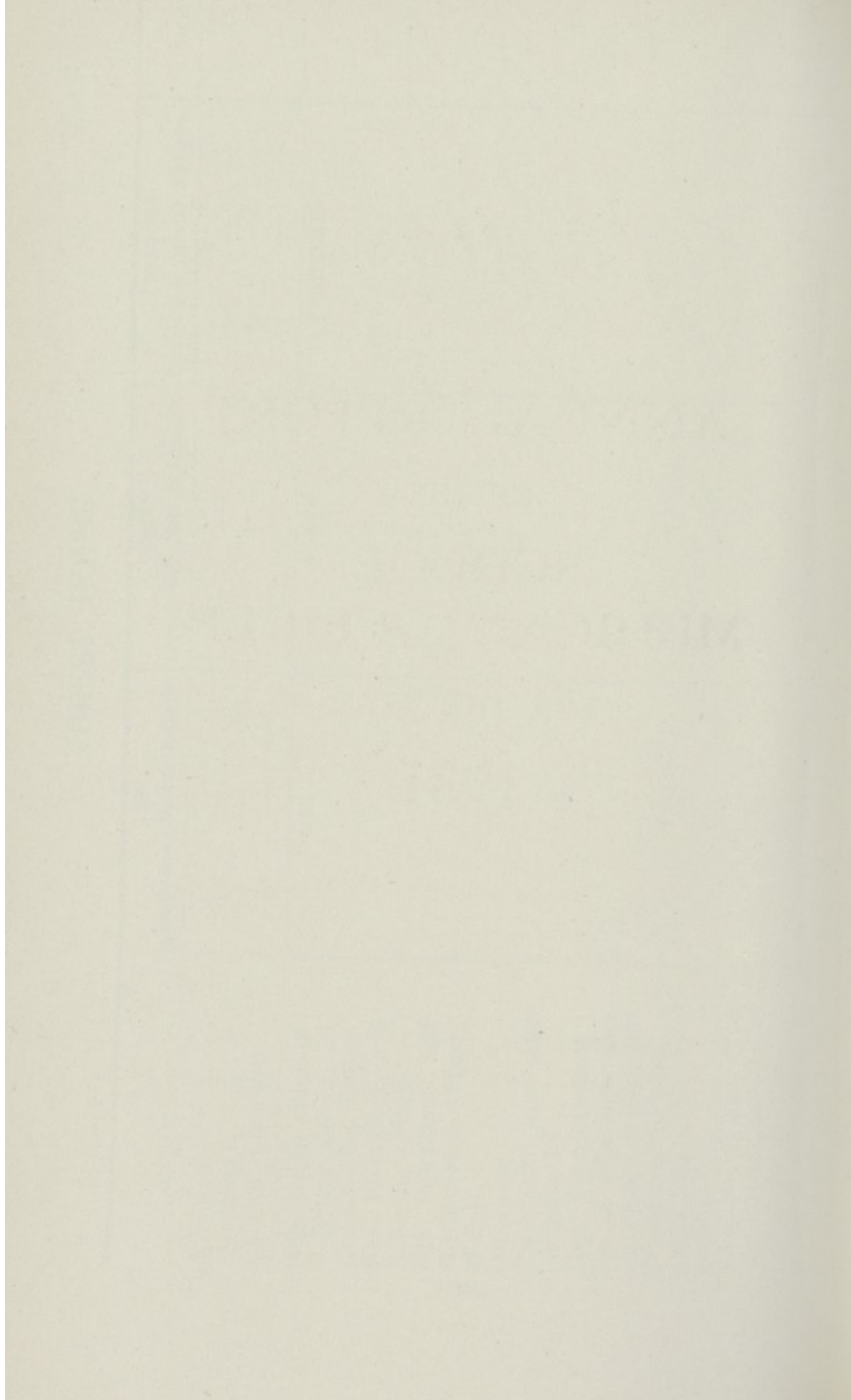
FOREST GATE HOSPITAL.

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	—	27	30	611	27	38	290	32	4	1059
Discharged	1	23	34	476	21	20	306	14	3	898
Refused Admission	—	—	1	—	—	—	—	—	—	1
Admitted by means of Relieving Officer and District Med. Officer	MEN			WOMEN			CHILDREN			
Gen. Practitioner and Relieving Officer		3			145			5		153
Gen. Practitioner and District Med. Officer		2			88			3		93
M.O.H.	—	—	—	—	—	—	—	—	—	—
Otherwise		8			33			10		43
Transferred from other institutions		37			243			88		339
Med. Superintendent		—			133			56		226
No. of infectious cases		1			—			70		70
Transferred to other institutions		34			—			31		32
Deaths		2			108			76		218
Total No. of sick cases receiving treatment on 2/1/32		74			108			24		100
Total No. of maternity patients in the Home on 2/1/32		149			468			124		741
No. of Vacant Beds if any on 2/1/32		—			53			—		53
		—			9			—		9

FOREST HOUSE.

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	—	—	1	—	—	—	—	—	—	1
Discharged	—	—	1	—	—	—	—	—	—	1
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		16			—			—		16
institutions		—			—			—		—
Med. Superintendent		—			—			—		—
No. of infectious cases		—			—			—		—
and nature of infection		—			—			—		—
Transferred to other		13			—			—		13
institutions		—			—			—		—
Deaths		—			—			—		—
Total No. of sick cases		54			—			—		54
in the Home on 2/1/32		1			—			—		1
No. of Vacant Beds		—			—			—		—
if any on 2/1/32		—			—			—		—





ANNUAL REPORT
OF THE
SCHOOL
MEDICAL OFFICER
FOR THE YEAR
1931

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

ANNUAL REPORT
OF THE
SCHOOL
MEDICAL OFFICER
FOR THE YEAR
1931

W. CARLTON COLLINS
MEDICAL OFFICER, U.S. ARMY

TO THE CHAIRMAN AND MEMBERS OF THE
EDUCATION COMMITTEE.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit herewith the Annual Report on the School Medical Service for the year 1931.

There has been no material extension of the work of this Department since last year, though the need for additional Dental Surgeons still remains, whilst the question of Myopic Classes in the Borough is one that should be again considered.

As regards the personnel, Dr. Troup and Mr. Arnold retired from their positions as part-time Ophthalmic Surgeons in August, and Dr. W. J. Thomas (who was already in your service as Assistant School Medical Officer) was appointed in their place as a whole-time Oculist. Dr. Janetta J. Powrie resigned her post as Assistant School Medical Officer in August, in order to take up a position under the Maternity and Child Welfare Committee.

The two posts thus rendered vacant were filled by the appointment of Dr. Jessie H. Fitchet and Dr. A. Muriel Ison.

Miss O. S. Vincent retired from her position as Matron at Fyfield Open Air School in September, and was succeeded by Miss W. M. Barnes.

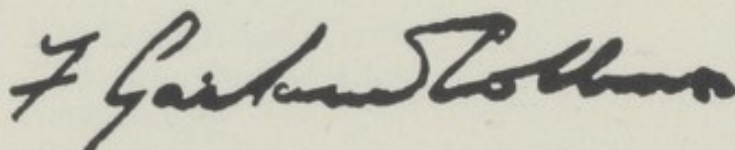
Dr. R. J. Reid was appointed as Chief Assistant School Medical Officer in June, 1931, to fill the vacancy caused by the death of Dr. F. B. Skerrett.

The practice of serving milk during the morning break to children in the schools has extended, and there are now comparatively few schools where this excellent facility is not available.

The Table given on page 195 is of value, as it shows that even during the past four years the stature, and more particularly the weight of the school children as a whole, has increased. A glance at my Report for 1927 will show how great was the increase of height and weight in school children between the years 1914 and 1927.

Some research work on the posture of children attending schools in this area was carried out during the year by Medical Officers of the Board of Education. A report on the results of their investigations has not yet been issued.

Your obedient Servant,



School Medical Officer.

Municipal Health Offices,
Romford Road,
Stratford, E.15.

July, 1932.

TO THE PRESIDENT AND MEMBERS OF THE
EDUCATION COMMITTEE

Dear Sirs, I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the subject of the proposed amendment to the charter of the University of the State of New York, and in reply to inform you that the same has been forwarded to the proper authorities for their consideration. I am, Sir, very respectfully,
Your obedient servant,
J. J. [Signature]

School Medical Officer

(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—Robert J. Reid, M.B., Ch.B (Edin.), D.P.H. (Edin. Univ.). Since June, 1931.

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. Appointed School Oculist, September, 1931.

H. McD. Borland, M.B., Ch.B.

Janetta J. Powrie, M.B., Ch.B., D.P.H. (Resigned August, 1931).

A. Furniss, L.R.C.P., L.R.C.S., L.R.F.P.S. (Glas.),
D.P.H., L.D.S.

A. Muriel Ison, M.D., D.P.H. (Since August, 1931).

Jessie H. Fitchet, M.B., Ch.B., D.P.H. (Since August, 1931).

Dental Officers (full time)—

L. K. Percy, L.D.S. (Eng.).

J. S. Dick, L.D.S. (Eng.).

Hélène M. Gubb, L.D.S. (Eng.).

O. B. Heywood, L.D.S. (Eng.).

Dorothy Marsden, L.D.S. (Eng.). (Temporary.)

Ophthalmic Surgeons (part time)—

G. A. Troup, M.D. (Edin.).

E. C. Arnold, F.R.C.S. (temporary). } To August, 1931.

School Oculist (full time).

W. J. Thomas, M.R.C.S., L.R.C.P., D.P.H.

(Since September, 1931).

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.

Miss I. M. Parsons.

Mr. R. Huxtable.

NURSING STAFF.

Miss O. S. Vincent (Matron, Fyfield Residential Open Air School)
Resigned September, 1931.
Miss W. M. Barnes (Matron, Fyfield Residential Open Air School)
Since October, 1931.

Miss E. Adams.	Miss C. H. Jones.
Miss E. Alford.	Miss E. Large.
Miss D. S. Ayton.	Miss A. K. McCormack.
Miss A. Burrows.	Mrs. M. Mace.
Miss E. M. Bussell.	Miss I. B. B. Mann.
Miss A. J. Costain.	Miss L. F. Manning.
Miss M. M. Empson.	Miss F. R. Pritchard.
Mrs. E. G. Eyton.	Miss M. H. Rose.
Miss E. Fraser.	Miss C. K. Starling
Miss L. C. Glover.	(Resigned October, 1931)
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.	Miss D. Wright (Temporary).
Miss M. James (Nurse, Fyfield Residential Open-Air School).	

(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. Two of the School Dental Clinics are also used for children under 5 years by the Dentist of the Maternity and Child Welfare Committee.

(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, or 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 the latrines were remodelled at West Ham Park, Holbrook Road, Abbey, Silver-town Infants', and Drew Road Boys' Schools, and fitted with the most modern sanitary appliances.

The long classrooms at the east end of Manor Road School were divided, thus obviating the teaching of two classes in one room.

Central heating was installed at Harold Road School.

New Handicraft rooms were constructed at Carpenters Road School.

In both the Nursery Schools the arrangements for cooking are working satisfactorily, and the buildings, which are of an experimental character, seem to be well adapted for the purpose. In future Nursery Schools however, it will be well to consider giving sanitary and cloakroom accommodation for each room separately, also a large room should be provided, or sliding and folding partitions, so that two rooms can be made into one, for assembly or other purposes; also more store room accommodation for toys, beds, etc., should be provided.

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 Infants' 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.

The following Memorandum has been sent to Head Teachers :

"It is now an established fact that a little milk (about one-third of a pint) consumed by children during the morning session is in every way advantageous to their general health, and that their capacity for resisting disease is enhanced thereby.

"The source of supply, as well as the quality of the milk delivered to the Schools is supervised by the Medical Officer of Health.

"The milk is best contained in bottles, with straws for drinking, or in sealed containers.

"It must be remembered that on no account should the milk be warmed in any way, as this not only detracts from its value, but is apt to render it anything but innocuous in regard to the germ content.

F. GARLAND COLLINS,
Chief School Medical Officer."

(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 are in force whereby those scholars who were absent from Inspection are examined at a later special visit to the school by the Medical Officer.

(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, The Grove, Stratford
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).
St. Antony's, St. Antony's Hall.		
St. Andrew's. St. Andrew's Vestry.		

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.
- (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
57136	3899	628	33	9	263	151

The percentages for head and body vermin are respectively 1.11 per cent. and .073 per cent.

Number of Home Visits 2297

Number of Children visited at School ... 7291.

Conditions remedied during the year under Cleanliness scheme:—

Defective Clothing	...	...	...	65
Unclean Heads	...	...	...	1074
Unclean Bodies	...	...	...	54
Skin Diseases	...	...	...	27

No children were cleansed under Section 122 of the Children Act, but 89 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 1,627 cases were referred for operative treatment, and 614 among the Specials.

(d) TUBERCULOSIS.

Routine and Specials, Pulmonary—with definite signs	13
Suspected	99
Other Forms of Tuberculosis	67

(e) SKIN DISEASES.

Excluding Ringworm there were 262 cases among the "routines" requiring treatment and 3,290 among the "specials." There were 44 cases of Tinea Tonsurans (Head Ringworm) and 141 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 130, or .7 per cent.

(g) VISION AND SQUINT.

At Routine Inspection 1,398 cases were referred for refraction and 202 for Squint, which amounts to 8.5% defective vision not already adequately provided for. In addition there were 841 specially selected cases.

(h) EAR DISEASE AND DEAFNESS.

The testing of hearing is part of the routine examination of every child. There were 96 deaf children among the routines and 38 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. 190 Routines and 23 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.

(j) 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 as regards fitness for continued attendance or return to elementary schools.

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 1931.

Cases Recommended for Admission to Special Schools.

	Boys	Girls
Mental Defectives	24	16
Physical Defectives	19	25
	—	—
	43	41
	—	—

Cases not Admitted to Special Schools.

	Boys	Girls
Unfit for School, M.D.	4	4
Unfit for School, P.D.	10	5
Recommended for Open Air School ...	8	9
To continue, return or have trial at Elementary School	34	48
Recommended for Deaf Centre	1	—
*Absentees from Medical Examinations	1	5
Notified to Local Authority (through admission examination)	6	3
	—	—
	64	74
	—	—
	138	

* 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 still a 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. (page 240) shows 414 cases requiring treatment and 32 cases under observation, giving a percentage of 2.3 for Routines.

AVERAGE HEIGHT AND WEIGHT, 1927—1931.

HEIGHT.							
1927.				1931.			
Age	Number Examined		Average Height in inches.		Number Examined		Average Height in inches.
Boys							
5	1554	...	41.3	...	1410	...	41.6
8	2166	...	47.5	...	2596	...	48.1
12	2278	...	55.0	...	1627	...	55.3
Girls							
5	1525	...	41.1	...	1372	...	41.4
8	1976	...	47.3	...	2536	...	47.3
12	2214	...	55.7	...	1459	...	56.3

WEIGHT.							
Age	Number Examined		Average Weight in lbs.		Number Examined		Average Weight in lbs.
Boys							
5	1544	...	41.1	...	1410	...	40.0
8	2166	...	52.0	...	2596	...	54.8
12	2278	...	75.7	...	1627	...	77.4
Girls							
5	1525	...	38.9	...	1372	...	39.0
8	1976	...	51.0	...	2536	...	52.2
12	2214	...	76.2	...	1459	...	79.5

(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 1931:

Impetigo	...	...	...	...	45
Scabies	...	...	...	...	127
Other Skin Diseases	...	...	...	...	30
Conjunctivitis	...	...	...	...	12
Verminous	...	...	...	...	18
Blepharitis	...	...	...	...	3
Mumps	...	...	...	...	11
Chorea	...	...	...	...	4
Enlarged Glands	...	...	...	...	6
Chicken Pox	...	...	...	...	5
Tonsillitis	...	...	...	...	1
Diphtheria	...	...	...	...	5
Small Pox	...	...	...	...	3
Tuberculosis	...	...	...	...	123

Tinea Tonsurans—				
Treated by X-Rays	...	...	...	28
Treated at Clinic	...	...	...	18
Tinea (Body)	...	...	...	2
Other Defects and Diseases	...	...	...	21
Total				462

Total number of children involved : 446

Exclusions on account of Small Pox were dealt with chiefly by the Medical Officer's 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 children and their glasses 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	...	18486
Total number of hours spent by Nurses in visiting	...	3678
Number of Re-inspections by School Doctors of		
Elementary school children	...	9825

(8) Medical Treatment.

(a) MINOR AILMENTS.

There are many minor ailments amongst 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 available 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 (page 244), 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, 1302 operations were performed under the Authority's scheme and 54 by private practitioner, or otherwise. 57 cases received non-operative treatment, making a total of 1413.

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 87.

Provision is made for Institutional treatment of tuberculous children unfit for school life under the above-mentioned scheme of the Council, as follows:—

Tuberculous Children (out of school) having Institutional Treatment.

Langdon Hills Children's Sanatorium	...	...	40
Whipps Cross Hospital	...	...	2
Heritage Craft Schools, Chailey	...	...	7
Sir William Treloar's Home, Alton	...	...	8
Seven Oaks Hospital for Hip Diseases			5
Alexandra Hospital, Swanley	...	...	1
Alexander Hospital, East Clandon	...	...	1
Princess Mary's Home, Margate	...	...	2
Royal National Orthopædic Hospital, Stanmore	...	...	2
St. Vincent's Cripple Home, Pinner	...	...	5
St. John's Home, Clewer	...	...	1
Children's Hospital, Cold Ash, Newbury	...	...	1
Victoria Homes, Margate	...	...	1
Child's Home and Sanatorium, Harpenden	...	...	1
Shaftesbury Homes, Hastings	...	...	2
Warwickshire Orthopaedic Hospital	...	...	1
St. Martin's Hospital, Pyrford, Surrey	...	...	1
Ascot Cripple Home	...	...	1
Kettlewell Home, Swanley	...	...	1
Hayling Island, Convalescent Home	...	...	1

In addition there were 31 Tuberculous out-of-school cases at the end of December, 1931.

(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.

During the year 27 cases of Tinea Tonsurans (Head Ringworm) out of 46 were treated by X-rays, and 142 cases of Ringworm of the body, were treated at the Clinics.

A total of 164 cases of Scabies were also treated at the Clinics.

(e) EXTERNAL EYE DISEASES.

These comprise sore eyes, blepharitis, slight conjunctivitis, styes, corneal ulcers, etc. Table IV (1) shows that 1,160 such defects were treated at the Clinics, 31 being treated by private endeavour.

(f) DEFECTIVE VISION.

This is an important defect and its adequate correction calls for skilled treatment.

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 in force whereby glasses are provided at a reduced rate, or free, in cases of necessity.

The following figures set out the work of the Ophthalmic Clinics for the year:—

Cases referred to Ophthalmic Surgeons	3568
Number attended	2974
Percentage attendance	83.3
Glasses ordered	2768
Number of Clinic Sessions	255

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 958 were treated at the Clinics, and 48 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 (Mr. Stoker, F.R.C.S.).

(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 undermentioned Schools come under this Scheme:—

Credon Road Infants'
and Ravenhill Senior.
New City Road.
Ravenhill Junior.
Balaam Street Infants'
and Burke Senior.
North Street.
Stock Street Infants'
and Burke Junior.
St. Andrew's.

Rosetta Road Infants'
and Rosetta Senior.
Russell Road.
Holborn Road.
Shipman Road.
Regents Lane.
St. Joachim's.
Custom House Infants'
and Rosetta Junior.

The following figures for the year show the amount of work done:—

21105 children inspected.
3551 "Specials."
14668 found to require treatment.
10401 given treatment.

The following remarks and comments are abstracted from the individual reports of the Dental Surgeons:—

Mr. Percy reports—

I find nothing much to add to what has already been said in past years. In this district, which is a poor one, any refusals for treatment are almost in all cases due to the charge of one shilling, or the fear of it.

The attendance, however, still continues to be good and the treatment appreciated. One can definitely state that the children's mouths are in a very much healthier condition.

Mr. Dick reports—

The work for the year shows little variation from previous years. It is still to be regretted that the number of extractions required leaves little time for much conservative work that is necessary.

Parents on the whole are most appreciative of the work done and are, I think, beginning to realise that conservative work is beneficial. Cases of refusals to have fillings done are rare.

The number of "Specials" sent up by Head Teachers continues to remain a high figure. An appreciable number of these are not really "Specials" and I would ask Heads of departments only to send urgent cases.

The co-operation of Head Teachers is gratefully recognised, being most helpful at all times, but especially during routine examination at the school.

Miss Gubb reports:—

The work for the year has been carried out on similar lines to the preceding years, consisting of the Annual Inspections, treatment and re-treatment of the children between the ages of 6-8 years inclusive, and exceptional cases of all ages.

There is very little variation from year to year. The attendance remains at practically the same average for each year, with perhaps a slight tendency to improve with the better understanding of the parents of the meaning of Dental treatment.

There are still quite a large number of parents who consider conservative work of both temporary and permanent dentition unnecessary and would consider extractions preferable in all cases, unless continual explanation of the importance of conservative work in the mouth is pointed out to them.

Several children have been referred to the Royal Dental Hospital for Orthodontic work (regulation of teeth) with very satisfactory results to both parents and children.

It would seem that perhaps from some few children who have been found to ask at school for a "Clinic Card" to attend the Clinic without seeking relief for some gross defect or severe toothache, that the children themselves are perhaps beginning to take an intelligent interest in the condition of their teeth, but on the other hand this hope has been frequently dashed to the ground by elucidating the fact from the child that it is seeking to escape some uncongenial task and is choosing the lesser of two evils.

I wish again to express my thanks to the Head Teachers who have assisted in every way by their kind help and co-operation.

Miss Marsden reports—

During 1931 all the schools allotted to this area were inspected, and treatment given as far as possible.

The Edith Kerrison Nursery School was also inspected and the children were all completely treated once.

The percentage of carious mouths is still very high, approximately 80 per cent. of the children requiring some treatment.

It is very difficult to make the parents understand that the children must attend regularly and not spasmodically—they still tend to put off the evil day, until tormented with toothache. There is still the same tendency too, for parents to prefer extractions rather than conservative treatment. They state “Well, after all the teeth have to come out in the end.”

I should like to thank all the Head Teachers and the teachers for their help and co-operation during the year.

Mr. Heywood reports—

In reviewing the work accomplished at the Clinic during 1931 it will be better to deal firstly with the least encouraging aspect—those children whose parents have refused to accept dental treatment. There is room here for enormous improvement. The same children appear time after time at routine school inspections suffering from progressive dental sepsis, and, in not a few cases, chronic abscesses. Home visits do very little to dispel the idea which all these parents firmly hold that dental attention is quite unnecessary for children who do not suffer from toothache. It has seemed to me that the lectures organised by the Dental Board of the United Kingdom especially for school children, on the whole of this subject of dental sepsis and oral hygiene, might very usefully be given an experimental trial in our schools.

To deal, secondly, with those parents who have accepted dental treatment—the work shows an increase over the figures for 1930, and a great deal has been achieved towards the eradication of dental trouble. Many of these parents have shown marked enthusiasm for both dental treatment and advice for their children.

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. Thomas and Ison.
- (2) Balaam Street Clinic, Plaistow—serving two areas.
Drs. Lupton and Borland.
- (3) Swanscombe Street Clinic, Canning Town.
Dr. Fitchet.
- (4) Rosetta Road Clinic, Custom House.
Dr. Furniss.

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 Clinics during 1931 :—

New Cases Admitted	Total Attendance	Total Discharged
16193	60293	14823

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 1931, 297 boys attended a School Holiday Camp at Shoeburyness for a fortnight, and at Dymchurch Camp 214 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, 1931, 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 79 girls were admitted and 68 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 90 cases that attended the Clinic for advice, treatment or observation, making 420 attendances in all.

To Miss Davies I am indebted for the following report on the School :—

The year 1931 began with 53 girls on roll, and ended with 63. In the case of almost every child there was a marked improvement in health and general tone. During the year 45 girls returned to the ordinary Elementary School, having, in the opinion of the School Medical Officer, benefited sufficiently to be able to resume their ordinary school studies. Ten girls have been transferred to the Fyfield Residential Open Air School.

It is the aim of the School, not only to promote the physical well-being of each child, but also to improve her mental outlook. It is very encouraging to see these children, whom ill-health and repeated absences from School have necessarily made dull and backward, respond to good food, freedom from worry and daily and regular rest.

The girls are encouraged to take part in the ordinary activities of the normal child, and enjoy outdoor games and sports of the less strenuous kind. Dancing, singing, music and dramatic work all play their part.

A great factor in bracing up the mental tone, and fostering independence of thought and action, is the individual garden, which each child possesses.

The girls are to a great extent self-governed, and they work loyally under the Captain and Officers elected by themselves.

The classrooms and dining hall have been much improved by the introduction of casement windows on the east side. This, with the bright painting of the walls and ceiling, has a very cheering effect, especially in the dark days of winter.

The comfort of the children has been further considered by the installation of hot running water.

Co-operation with parents is sought after, and by means of Old Students' Re-unions we are kept in touch with girls who have left the School.

Mr. J. H. Jacques, the Committee's Architect, reports on improvements carried out during the year at the school as follows:—

"The Open Air School was re-decorated internally with bright colours, giving a much more cheerful appearance to the rooms, glazed folding windows were fixed on the west sides of the classrooms and rest room in lieu of wood shutters, and an additional washing trough with hot water to the spray tap was fixed. Part of the garden paths were paved, and generally the buildings have now a much more cheerful and attractive appearance."

(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 seven girls were admitted and five 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 the Chief Assistant School Medical Officer once a fortnight, when all the boys and girls are re-inspected, and height and weight noted.

During the year 166 boys and 139 girls were admitted, and 160 boys and 142 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 289 cases sent for re-inspection following their discharge from Fyfield, 44 did not attend owing to various reasons. Out of the 245 examined, 230 showed continued improvement, whereas 15 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 once 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.

	Breakfast.	Lunch.	Dinner.	Tea.	Supper.
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 in these games are referred for examination. During the year some 260 boys were examined, one being found unfit.

(11) Provision of Meals.

West Ham being largely a necessitous area, the Authority have always regarded the provision of meals to needy and underfed 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	354,564	673,245
Average number of children fed per week:	2,477.	

(12) School Baths.

School baths are provided at two Elementary Schools, viz:—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 was as follows:—

			Boys		Girls
Balaam Street	...	...	4954	...	4409
Jupp Road	...	...	5445	...	2837
Silvertown	...	...	1407	...	1327
Fen Street	...	...	3597	...	2532
			15403	...	11105

(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
Abbey	—	2	—
Beckton Road	—	—	1
Burke Senior	—	1	—
Canning Town	1	3	—
Colegrave Road	—	4	—
Credon Road	—	—	1
Drew Road	1	—	—
Hallsville	—	1	—
Holborn Road	—	—	1
Holy Trinity	—	1	—
Manor Road	1	—	—
Maryland Point	—	1	—
New City Road	—	—	1
Odessa Road	—	3	—
Ravenhill Junior	—	1	—
Regents Lane	—	—	1
Russell Road	—	—	1
Salway Place	—	—	1
St. Antony's	—	1	—
St. James'	—	2	1
St. Joachim's Mixed	—	1	—
St. Margaret's	—	2	—
St. Paul's	—	1	—
West Ham Church	1	—	—
West Ham High	—	2	—
West Ham Park	—	—	2
Whitehall Place			
Junior Mixed	—	1	—

The total number of parents or guardians present at the Elementary School Examinations (Routine and Special) was 81 per cent.

(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 many 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. T. Wall 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, 1,760	Deformities, 11
Physical Exercises, 49	Mental Condition, 7
Defective Hearing, 57.	Nervous System, 3
Breathing Exercises, 31	Skin Disease,
Heart (Physical	(Verminous, etc.), 9
Overstrain), 110	Other Defects, etc., 36
Defective Speech, 1.	

(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 Sanitary Inspectors.

I consider the work done by the School Attendance Officers in connection with the Health Services of the Borough to be of great value. They have helped very materially in stemming the outbreak of Small Pox.

The cases brought to the notice of the Public Health Department by the School Attendance Officer during the year were as follows :—

Measles, 247
Whooping Cough, 534
Tonsillitis, 214.

Chicken Pox, 945
Mumps, 250
Other Diseases, 1,747

(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, 36 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.

(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.

Two voluntary 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.

Two working at Factory.
One Shoemaking.
One Milk round.
One Errand boy.
One Barber's Assistant.
One Dressmaking.
Eight Returned to Ordinary School.
Two left District.
Four Excluded as unfit.
One Deceased.

Mentally Defective—

One at Rubber Factory.
One Shop boy.
One Errand boy.
One at Bag Makers.
Two working at Factory.
One in School for Blind.
Six Excluded as unfit.
Five left District.
Five Returned to Ordinary School.

GRANGE ROAD SPECIAL SCHOOL.

	Mentally Defective	Physically Defective
Returned to Elementary School ...	9	12
Left at Age Limit	11	1
Permission granted at 14 + years to take up work ...	8	7
Excluded	7	5
Removed from Area	5	1
To be tried at Centre for Deaf ...	1	1
In Convalescent and other Homes	3	6
Deceased	1	—
In Institution for Epileptics ...	1	—
At Continuation School	1	—

None of the mentally defective children who left at the age limit of 16 years are really working, but the physically defective boy has a paper round. Whilst, with the exception of two mentally defective boys, all those children who were given permission to leave at 14 + years to take up work are working steadily and showing good promise.

The children who returned to Ordinary Schools report themselves joyfully at intervals, and seem to be going well ahead amongst normal children.

Of old scholars who have visited us during the year are some who left in 1920, 1922, 1923, 1924, 1926, and later. Some have married and are successfully keeping their families by their own efforts. Some are in businesses of their own—principally that of shoemaking, confectionery, and wood selling. Several girls are in service and kitchen work. Two mentally defective boys visited us whilst on leave from their ships. Three physically defective children are making successful clerks, and one boy is still a Dentist's assistant, having been at the same position since 1926. One physically defective girl who left in 1924 is teaching Music, and others are in machinery factories and working successfully on power machines. The physically defective boys who have been trained in shoe repairing by the Shaftesbury Society are making good headway, and in most cases have easily obtained openings for their work.

The provision at the Special Schools, Grange Road and Knox Road, is as follows:—

	Mentally Defective	Physically Defective
Grange Road	90	60
Knox Road	93	83

There is certainly room for another Special School in the Borough. Entrance examinations are held, and cases are seen as they arise.

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:—

Barclay Home for Blind, Brighton	5 girls
Brighton School for Blind Boys	7 boys
East London School for Blind	4 boys, 1 girl
Swiss Cottage for Blind	3 boys
Caterham Mental Hospital	1 girl (M.D.)
Forest Gate Sick Home	1 boy (M.D.)
White Oak School, Swanley	1 girl
Eight 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 made 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 West Ham Leavers during 1931 :—

Water Lane Deaf Centre :

One boy obtained employment at Leatherwork, but now unemployed.

One boy unemployed.

One boy lives at home with parents (Mentally unfit).

One girl employed at Waterproof Making (Doing well).

One girl obtained employment at Domestic Work, but now unemployed.

One girl helps at home.

One girl continuing her education at a private school for the Deaf.

Frederick Road Deaf Centre :

One boy working in Mattress factory.

One boy Driller and Smith's mate.

One boy unemployed.

One girl unemployed.

EPILEPSY.

Table III. (d) gives a summary of the epileptics found among school children during 1931. 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—3 girls.

Lingfield Colony for Epileptics—2 girls.

Forest Gate Sick Home—2 boys, 3 girls.

Fountain Mental Hospital, Tooting—1 boy.

There are two cases of severe epilepsy out of school.

STAMMERERS.

Throughout the year special classes of six weeks' duration have been carried on at North Street School.

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 sixteen 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 40 boys and 6 girls attended the first classes for stammering children, 10 boys and 3 girls were taking the second course, 2 boys a third course, and one girl a fifth course.

(18) Nursery Schools.

The Authority have two Nursery Schools, one in the North and one in the South of the Borough on sites adjoining Abbey and Rosetta Road Schools.

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.

MENU (DINNERS).

First Week.

MONDAY.

Irish stew, Greens.

Rice or Tapioca Pudding and Jam.

TUESDAY.

Gravy soup, containing vegetables, celery, etc. Rusks.
Steamed Marmalade Pudding and Sauce.

WEDNESDAY.

Minced roast mutton, Potatoes, mashed turnips or Parsnips.

Stewed Apples and Custard.

THURSDAY.

Lentil and Potato Pie, Baked Tomatoes or Tomato Sauce.

Chocolate Blanc Mange.

FRIDAY.

Steamed or Baked Fish, Parsley Sauce, Mashed Potatoes.
Steamed Treacle Pudding.

Second Week.

MONDAY.

Minced roast beef, Potatoes, greens.
Baked Apples and Custard.

TUESDAY.

Shepherd's Pie, Braised Carrots.
Steamed Suet Roll and golden syrup.

WEDNESDAY.

Lentil soup.
Baked Custard and stewed prunes.

THURSDAY.

Veal broth with mixed vegetables. Rusks.
Baked sponge pudding, Jam sauce.

FRIDAY.

Fish pie.
Steamed Raisin pudding.

In addition fresh fruit is given every day after the children have had their afternoon rest.

A milk pudding is provided for the tiny ones when suet pudding is on the Menu.

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 quarterly 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."

In both these Schools, the arrangements for cooking are working satisfactorily, and the buildings, which are of an experimental character, seem to be well adapted for the purpose. In future Nursery Schools, however, it will be well to consider giving sanitary and cloak room accommodation for each room separately, also a large room should be provided, or sliding and folding partitions, so that two rooms can be made into one, for assembly or other purposes, also more store room accommodation for toys, beds, etc., should be provided.

Medical Inspection is carried out, and the same facilities provided, as in the Elementary Schools.

The following reports have been received on the Medical and Dental examinations:—

THE EDITH KERRISON NURSERY SCHOOL.

This School has now completed its first full year. During the year 1931, eight medical inspections were carried out—six monthly inspections until June and two quarterly inspections in September and December. The following table shows at a glance the results of the examinations.

Month	Boys examined	Girls examined	Total	Parents present	Number Defective	Percentage of Defects
January ...	41	34	75	66	20	26.6
February ...	45	42	87	71	22	25.
March ...	58	49	107	91	27	25.2
April ...	56	50	106	89	14	13.2
May ...	60	54	114	82	21	18.4
June ...	59	48	107	76	19	17.7
September ...	56	49	105	82	21	20.
December ...	48	53	101	87	21	21.2

The chief defects found at a Nursery School examination are enlarged tonsils and adenoids, bronchitis, and oral sepsis—conditions which are all closely associated.

Treatment. The same facilities are provided as in the elementary schools. Thus, certain children are sent for artificial sunlight treatment to the Balaam Street Children's Hospital, tonsil and adenoid cases requiring operation are drafted to any of the three local hospitals. Dental cases are sent to the School Dental Clinic at Rosetta Road. Cases of defective vision and squint are dealt with by the Committee's School Oculist. Children in need of orthopaedic treatment are sent to the Orthopaedic Clinic at the Balaam Street Hospital. All the above facilities have been made use of.

It is noteworthy that the school has been particularly free from the usual infectious ailments.

There is complete co-ordination between the Headmistress, Miss J. E. Cass, and the School Staff, and any child requiring attention is sent to the Clinic (Rosetta Road) where it is dealt with at once.

Miss Marsden reports on the Dental Inspection and treatment at this School as follows:—

Odd cases have been sent from the school for dental treatment since its opening. In October the school was inspected throughout and treatment gradually given to all the children.

It is very sad to see the great number of cases that require treatment in these children of 2 to 4.

They attended for treatment very well, owing to the very great efforts of Miss Cass, the Headmistress, and I should like to take this opportunity of thanking her and her staff for the assistance given me.

REBECCA CHEETHAM NURSERY SCHOOL.

Seven Inspections were made at this school during the year under review. The average number inspected at each inspection was 78 (45 boys and 33 girls), whilst the parents present averaged 51. The average number of defects referred for treatment or observation each month was 40, the actual number of children involved being 20 (approximately 26 per cent.)

The defects found consisted chiefly of Malnutrition, Dental Caries, Uncleanliness, and Enlarged Tonsils and Adenoids. This last defect, in fact, accounted for 21 per cent. of the total defects.

Miss Gubb reports on the Dental Examination and Treatment at this Nursery School as follows:—

The first Dental Inspection of children at the Rebecca Cheetham Nursery School was carried out at the end of October, 1931.

98 children between the ages of 2 and 4 years out of the 120 on the roll were examined. Out of this number 33 were found to require some treatment, mostly the filling of the second milk molars. A few children required one or several extractions for septic teeth and septic conditions of the mouth, but on the whole the children had very clean mouths and functional teeth. With the exception of a few children all had well developed jaws and the normally erupted dentition for their respective ages.

It was very satisfactory to see that the children were given a sufficient quantity of hard food in their diet to give their jaws and teeth the necessary stimulus for growth, and the mid-day meal completed with fruit, acted as a self cleanser to the mouth and teeth.

The parents of these very young children are not yet aware of the importance of conservative work in the Temporary Dentition, and would favour extraction as the only treatment, but this is not to be surprised at as the parents of the elementary school age children are still in many cases adverse to conservative work in the mouth.

I should like to take this opportunity of thanking Miss Whittingham for her kind help and co-operation in carrying out the inspection.

(19) Higher Educational Institutions.

The Institutions referred to here comprise—

- (1) The Municipal College (Provided by the Authority).
- (2) The West Ham Secondary School (Provided by the Authority).
- (3) St. Angela's High School for Girls (Ursuline Convent) (Aided by the Authority).
- (4) The Plaistow Secondary School (Provided by the Authority).
- (5) The West Ham High School for Girls (Aided by the Authority).

MUNICIPAL COLLEGE.

The Local Authority undertakes the Medical Inspection of certain students in attendance at this College, provided by them. The students examined are (1) Junior Courses Engineering, first and second year (2) Trade School for Girls (a) Preparatory (b) Dressmaking, first and second year (c) Cookery, first and second year (3) Junior Art Trade School for Boys and Girls.

Two visits are made during the year, in April and September, and re-inspections are made of examinees from each previous medical inspection.

The examinations are fuller in detail than obtained in the Elementary Schools, colour vision, head and chest measurements, and other enquiries incidental to the age period being noted.

The procedure of following-up by Nurses' visits and re-inspection by the Assistant School Medical Officer is the same as in the Elementary Schools. The School Clinic and Hospital arrangements for the operative treatment of Tonsils and Adenoids, the School Oculist and the X-Ray Specialist are available if required.

The arrangements for recovering the cost of treatment from parents is undertaken by the School Attendance Department, the scale of charges being in accordance with the schedule of income adopted by the Authority.

Two separate inspections were carried out during the past year, with the following results, viz. :—

Total number inspected (121 boys, 85 girls)	...	...	206
Total number of defects found	...	...	52
Total number of re-inspections	...	...	114

The majority of the above defects were visual, and includes those either requiring glasses or change or renewal of glasses, the remainder being made up as under :—

Defects of Vision	...	...	34
Enlarged Tonsils	...	...	5
Cardiac conditions	...	...	3
Defects of Speech	...	...	3
Other defects (minor)	...	...	7
			—
Total			52
			—

The general health and stamina of the pupils was very satisfactory, the majority being well grown and well developed.

My thanks are due to the Principal and Staff of the College for their kind and efficient co-operation during the Medical Inspections.

SECONDARY SCHOOLS.

With regard to the West Ham Secondary, and also the Plaistow Secondary, Schools, all the scholars are submitted to a full examination annually, in addition to which the School Doctor makes one visit a year for the purpose of re-inspection. The Nurse makes visits both to the Schools and to the pupils' homes to ascertain if recommendations are carried out.

Every facility provided by the Authority for the treatment of children is available for these pupils. Many of the pupils, however, have their defects remedied privately. This treatment is obtainable by all the scholars, i.e. scholarship holders and fee-payers.

The Department responsible for recovering the cost of treatment from the parents is the Bye-Laws Department of the Education Officer, and the work is entrusted to the Attendance Officers through the Superintendent of Visitors. The Education Committee have drawn up a scale of charges to be applied in accordance with a scale of income.

WEST HAM SECONDARY SCHOOL.

There were two examinations at this School during the year, and the following is a resumé of the results found:—

Number Examined		Number Defective	
Boys	Girls	Boys	Girls
367	222	58	65
<hr/> 589		<hr/> 123	

Chief Defects referred for Treatment and Observation.

Skin Diseases	15	Other Defects and Dis-	
Defective Vision	68	eases	15
Enlarged Tonsils	9	Organic Heart Disease ...	7
Enlarged Tonsils and		Functional Heart Disease	2
Adenoids	3	Anaemia	7
Enlarged Cervical Glands	2	Bronchitis	2
Oral Sepsis	31	Nervous Conditions	4
		Deformities	5

PLAISTOW SECONDARY SCHOOL.

At this School there was a complete Medical Inspection of all the scholars during the year, and following are the details and findings of the examinations:—

Number Examined		Number Defective	
Boys	Girls	Boys	Girls
260	189	57	51
<hr/> 449		<hr/> 108	

Chief Defects referred for Treatment and Observation.

Skin Diseases	4	Enlarged Tonsils	7
Blepharitis	3	Adenoids	4
Defective Vision	78	Enlarged Tonsils and	
Defective Hearing	2	Adenoids ...	8
Otitis Media	5	Other Throat Conditions...	2
Heart Disease	2	Oral Sepsis	15
Nervous Conditions	4	Anaemia	7
Other Defects and		Deformities	4
Diseases ...	9		

As on previous occasions I again wish to emphasise the great interest taken by the Principals of the Secondary Schools, viz., Dr. Churchill and Mr. J. W. Hand, in the work of Medical Inspection, and my sincere appreciation for the assistance they and their staffs render.

WEST HAM HIGH SCHOOL FOR GIRLS AND ST. ANGELA'S HIGH SCHOOL.

On the request of the respective Governors, the Authority provides for the Medical Inspection of West Ham scholars in these Schools, with the exception of the Preparatory Schools. These Schools are visited each year by a Lady Doctor, and the same Medical Services are available for the scholars as for those children in the Elementary Schools. Vision is mainly treated by the School Oculist, but a few parents prefer to obtain treatment privately.

All other defects are treated almost entirely privately.

WEST HAM HIGH SCHOOL FOR GIRLS.

An inspection of the West Ham pupils attending this school was made, excepting those in the Preparatory Department.

The general state of health was most satisfactory, only 23% showed any defect. Errors of Vision occurred most frequently.

The keen and active interest of Dr. Florence Barnett, the Principal, in the welfare of the pupils under her care was largely responsible for the high standard of health found in the school.

Age Distribution of Examinees.

Age	No. Examined
9	2
10	10
11	45
12	34
13	22
14	37
15	28
16	13
17	8
18	1
Total	200

Attendance of parents = 77%

Number of children found defective = 46 (23%)

Chief Defects Referred for Treatment.

Deformities	1	Other Eye Conditions	1
Other Ear Conditions	2	Chorea	1
Enlarged Tonsils	1	Skin Diseases	4
Other Nasal Conditions	2	Defective Vision	29
Dental Caries	39	Anaemia	4
Other Conditions	3		

Recommendations were left with the Principal re the following conditions :—

Defective Vision, 29.	Physical Exercises
Dental Caries, 39.	(flat foot, etc.), 31.

The remedial exercises for slight deformities are carried out by the Drill Mistress.

ST. ANGELA'S HIGH SCHOOL FOR GIRLS.

This School is medically 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	24
12	28
13	25
14	21
15	21
16	15
17	2
18	4
			<hr/>
			142
			<hr/>

Parents present, 122 = 86%

Number of Children Defective, 30 = 42%

Chief Defects referred for Treatment.

Defective Vision	...	...	...	...	23
Defective Hearing	...	...	...	...	2
Otorrhœa	...	...	...	...	1
Other Ear Diseases	...	...	...	...	1
Dental Caries	...	...	...	...	22
Anaemia	...	...	...	...	2
Skin Diseases	...	...	...	...	1
Other Defects	...	...	...	...	1
					<hr/>
					53
					<hr/>

Recommendations and advice were left with the Principal re the following conditions:—

Defective Vision	...	...	...	...	23
Defective Hearing	...	...	...	...	2
Special Exercises, for Flat Foot, etc.	...	...	...	...	26
Dental Caries	...	...	...	...	22

Mother Mary Angela takes a great interest in the Inspection and endeavours to get the parents to carry out the recommendations given. The Drill Mistress undertakes the special exercises for slight deformities.

(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 1931, 164 children were examined; two certificates were not granted and three 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 ten girls.

(22) Special Enquiries.

During the year the Board of Education conducted an investigation into postural defects among school children in certain selected areas. West Ham was one of the areas selected and an investigation was carried out by Dr. Muriel Bywaters, one of the Board's Medical Officers, assisted by Dr. Dorothy Wood.

These Medical Officers visited six schools in this area, and examined 201 boys and 200 girls of the 12+ age group.

In addition to the actual examination, the Medical Officers made an investigation into physical training, also the lighting and ventilation of classrooms, and the type of desks used.

There have been no special enquiries during the year by the Assistant School Medical Officers, their time being fully occupied with essential duties.

(23) Miscellaneous.

All scholarship children are medically examined soon after taking up their scholarships. The schools at which such scholarships are held are :

Provided by the Authority :

- | | |
|------------------------------------|------------------------------|
| (1) The Grove School | } Higher Elementary Schools. |
| (2) The Russell School | |
| (3) The West Ham Secondary School. | |
| (4) The Plaistow Secondary School. | |

Aided by the Authority :

- (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.

SCHEME OF MEDICAL INSPECTION AT HIGHER ELEMENTARY SCHOOLS PROVIDED BY THE AUTHORITY.

At the present time there are two examinations in the year, one in September at which all newly entered scholarship children are inspected. The second examination takes place during the second quarter of the year, and comprises all scholars who are in their third year and due to leave at midsummer. At either of these examinations it is open for the Headmasters to submit as "specials" any scholars not due for examination where retarded progress or some definite ailment or condition makes it appear advisable. The Head may also consult with the School Medical Officer between school visits on any case where it is not deemed advisable to await for the next medical inspection.

The same routine procedure of following up by Nurse's visits and re-inspection by the Assistant School Medical Officer, obtain as in the case of the Elementary Schools. The Committee's Oculist, X-Ray Specialist, School Clinic and Hospital arrangements for the operative treatment of Tonsils and Adenoids are available for cases needing it.

The arrangements for the recovering of cost of treatment from parents is undertaken by the Education Officer's Department, the scale of charges is in accordance with the schedule of income adopted by the Authority.

The Grove School.

Two Inspections were held in this school during the year, in June and September, with the following results :—

June Examination (Leavers)

Number Examined. Boys, 60; Girls, 35. Total, 95.

Chief Defects found to require Treatment or Observation.

Skin Conditions	2	Defective Vision	7
Oral Sepsis	1	Enlarged Tonsils	3
Ånaemia	4	Conjunctivitis	1
Other Defects	4		

September Examination (Entrants)

Number Examined. Boys, 68; Girls, 34. Total, 102.

Chief Defects found to require Treatment or Observation.

Skin Conditions	1	Other Defects	7
Oral Sepsis	7	Defective Vision	25
Enlarged Tonsils	4	Otitis Media	1
Enlarged Tonsils and Adenoids	1	Blepharitis	1
		Defective Hygiene	2

A noticeable feature of the examinations was the cleanliness of the children, there being only two cases where defective Hygiene was detected.

Practically the whole of the Defective Vision cases were children who were already wearing glasses, but were considered to be in need of a further examination by the Committee's Oculist.

Mr. Madden, the Headmaster, 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.

The leavers were examined in July, 1931.

These pupils commenced their studies at this school in August, 1928, and during this period they have done remarkably well. The following is a resumé of the medical inspection:—

Pupils Examined.

Age in years.	Boys	Girls
15	31	65
Parents present	8	53
Combined percentage 63.		

Chief Defects referred for Treatment.

Acne	1
Defective Vision	4
Enlarged Tonsils	1
Oral Sepsis	3
Anaemia	1
Scoliosis	2

Re-inspection.

Vision : Two pupils were prescribed glasses and obtained them.
 Two pupils failed to attend the Eye Clinic.
 Teeth : Three pupils obtained dental treatment.
 Scoliosis : One case recovered ; one improved.
 Other Conditions : Three cases received private treatment, all were improved.

Fifteen home visits were made by the School Nurse.

The entrants were examined in October, 1931, the numbers found to be defective being as follows :—

BOYS.		GIRLS.	
No. Examined.	No. Defective.	No. Examined.	No. Defective.
36	11	75	21
Parents present. Boys, 23; Girls, 66.			
Combined percentage, 80.9.			

The chief defects requiring treatment and observation were :

	BOYS.		GIRLS.	
	Treatment.	Observation.	Treatment.	Observation.
Skin Diseases ...	—	—	1	—
Conjunctivitis ...	1	—	1	—
Blepharitis ...	—	—	1	—
Defective Vision ...	10	2	12	3
Enlarged Tonsils ...	1	1	4	1
Other Throat conditions	—	—	1	—
Heart Disease ...	—	—	1	—
Anaemia ...	—	—	1	—
Scoliosis ...	—	—	2	—
Other Defects ...	—	1	1	—

Following up and Treatment.

Vision : Ten boys and twelve girls were prescribed glasses, and at the time of writing this report, nine boys and eleven girls had obtained their glasses. Two of the observation cases were referred for treatment.

Enlarged Tonsils : In the five cases under consideration, no operative treatment has been carried out. Two of the cases are under their own doctor.

Scoliosis : The two cases (girls) were showing much improvement, and the remedial exercises which they were having, were recommended to be continued.

- Heart Disease: The one case under review was in statu quo.
- Other Defects: An operation for Hernia was pressed in the case of a child previously referred for treatment. The remaining conditions were remedied.

The Headmaster, Mr. C. W. Truelove, is very keen in co-operating in every way in connection with the Medical Inspection of the pupils of the Russell School, with the result that a very good percentage of parents attend the two inspections each year for the "entrants" and the "leavers," and the following up of cases is most satisfactory.

At present there are special instructors in Physical Training, both for the boys and the girls, and the School achieved particular success during the past year in Country Dancing and Swimming. All look forward to entering the new school on the Carter Road site, where a Sports ground will be available next to the School, giving the opportunity for organised games to be taken as part of the curriculum.

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:

During 1931 over 160 School Children received Ultra-Violet light treatment at the West Ham Clinic for School Children. The large majority of these were suffering from debility, usually associated with Anaemia. Catarrhal conditions formed another large group, rheumatism coming third in frequency. In these three groups, as well as in a smaller group of children suffering from enlarged glands of the neck, marked improvement was noted in practically all the cases who attended with sufficient regularity over a long enough period. A few asthma cases were improved—one or two to a very considerable degree, but not every case appears to respond to the treatment.

The most striking results were seen in the Debility group, the improvement being shown in a variety of ways, including increase in weight, improved muscular tone and greater energy and cheerfulness.

In the cases of anaemia the haemoglobin test showed, almost without exception, a rise to nearly normal with two or three months' treatment. Although space does not permit of a more

detailed report here, the year's experience amply confirms the conclusions arrived at previously as to the undoubted value of ultra violet radiation in a large number of morbid conditions which could probably in no other way have been so effectively dealt with.

Blind Persons' Act.

During the year two women 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.

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 1929, 1930, and 1931, and the advantage taken by the children of the facilities granted.

Holiday Period	1931.		1930.		1929.	
	No. of days in operation	Number carried	No. of days in operation	Number carried	No. of days in operation	Number carried
Easter ...	10	143,915	10	147,976	10	150,847
Whitsun ...	8	126,689	8	124,950	8	130,863
Summer ...	31	392,404	31	384,906	31	404,545
Christmas ...	14	186,152	15	207,087	15	202,776
Totals ...	63	849,160	64	864,919	64	889,031
Av. per day	—	13,260	—	13,514	—	13,891

APPENDIX I.

SHOEBURYNESSE HOLIDAY CAMP.

Extracts from Report by Mr. T. Taylorson.

It is with considerable pleasure that I submit my report on the seventh Holiday Camp carried on under your auspices.

For the sixth time we went to familiar ground and the latter part of July, 1931 saw our temporary canvas home erected on the seaward pasture of South Shoebury Hall Farm. The Owner, Commander H. Townend, did his utmost to make things easy and pleasant for us, and to him I am most grateful.

A large and enthusiastic band of Teachers went down to Shoeburyness after School on Friday, July 17th, and when they went home on Sunday evening, all canvas had been pitched, the bath house, ablution shed and latrines had been built, and large drainage pits dug. It may be recalled that at the previous Camp a hot water shower bath had been put into operation in a very hastily constructed shed. This amenity had been of such service and was so much appreciated, that it was felt desirable to increase the scope of its usefulness. By kindly advice and valuable assistance, a sectional bath house was constructed and erected. On an average, 130 boys used the bath each day.

The boys, as in previous years, went down in two batches, each staying for one fortnight, and all appeared to enjoy their holiday, whilst as to its beneficial effect on their general health and well-being there can be no doubt. The feeding arrangements were not altered from those we had found so satisfactory in the past.

The general health was good; minor accidents and ailments were effectively coped with. In only one instance had outside aid to be summoned, one youth developing a temperature and an ominous rash. Visions of Scarlet Fever presented themselves before me, but were speedily allayed when it was found that an over indulgence in succulent bivalves and ice cream was the cause of the trouble.

The weather was not kind, and bade fair to rival that of our first camp which was held at Laindon in 1925. Nothing, however, could dampen the enthusiasm of youthful guests and whilst storms raged outside the marquee, all was jollity and good humour within. The new canvas did its work splendidly and not one boy suffered through damp bedding. In this connection, however, I must report that a new section is needed to complete the re-roofing of the marquee.

I feel that this report would not be complete without reference to our transport problem. The vehicles provided by the Highways Department are not suitable for transport of camp equipment, as they are designed to carry weight and not bulk. Year by year it becomes increasingly difficult to pack our goods into the space provided, and it is invariably found that owing to the inherently light

nature of camp equipment, the lorries are packed far beyond their safe carrying capacity, although the weight borne is not a quarter of that which they normally carry. I earnestly recommend that this problem be seriously considered and that transport of a more suitable nature be provided.

The success of the Camp is entirely due to the disinterested help given by all who had its welfare at heart. This was exemplified by the handsome gift of a bread cutting machine by the Committee of the Forest Gate Hospital and the provision of towels by the Baths Superintendent.

DYMCHURCH HOLIDAY CAMP.

Extracts from Report by Miss L. P. Wise.

It is with very great pleasure that I present this report on the Girls' Camp held at Dymchurch from August 7th to August 21st, 1931.

In all, 214 girls (145 "assisted" and 69 paying the full cost) spent an enjoyable fortnight, and the Staff, including myself, numbered eleven.

The arrangements made for the journey were as usual, excellent, the special train provided was much appreciated and the ride on the miniature railway caused the usual surprised excitement.

On arrival we immediately set to work to make the most of the fine weather which greeted us. As in former years we adopted the "House" or "Team" system, and before the end of half an hour all sorting out was done, all camp kit (which in most cases consisted of jersey and shorts) put on and all sat down to enjoy the good meal provided.

The days were spent in a variety of ways, outings were arranged for those who wished to go. Hythe and Folkestone by Char-a-banc were as popular as ever. Long walks, this year known as "hikes," and picnic excursions were entered into with zest.

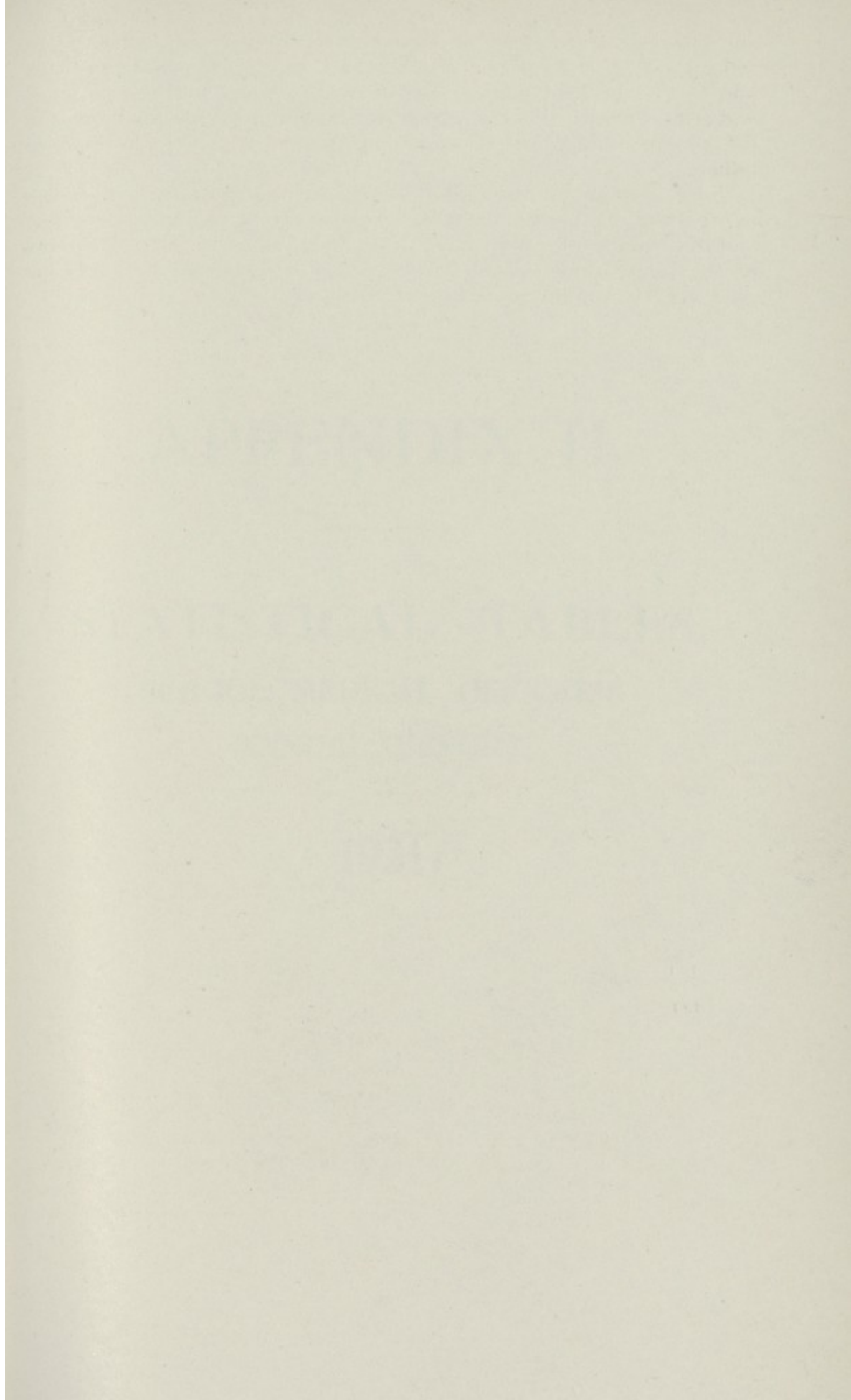
There was the never failing call of the sea and parties for bathing were escorted to the water at all hours of the day. Many hardy campers found this an enjoyable way of spending the showery periods.

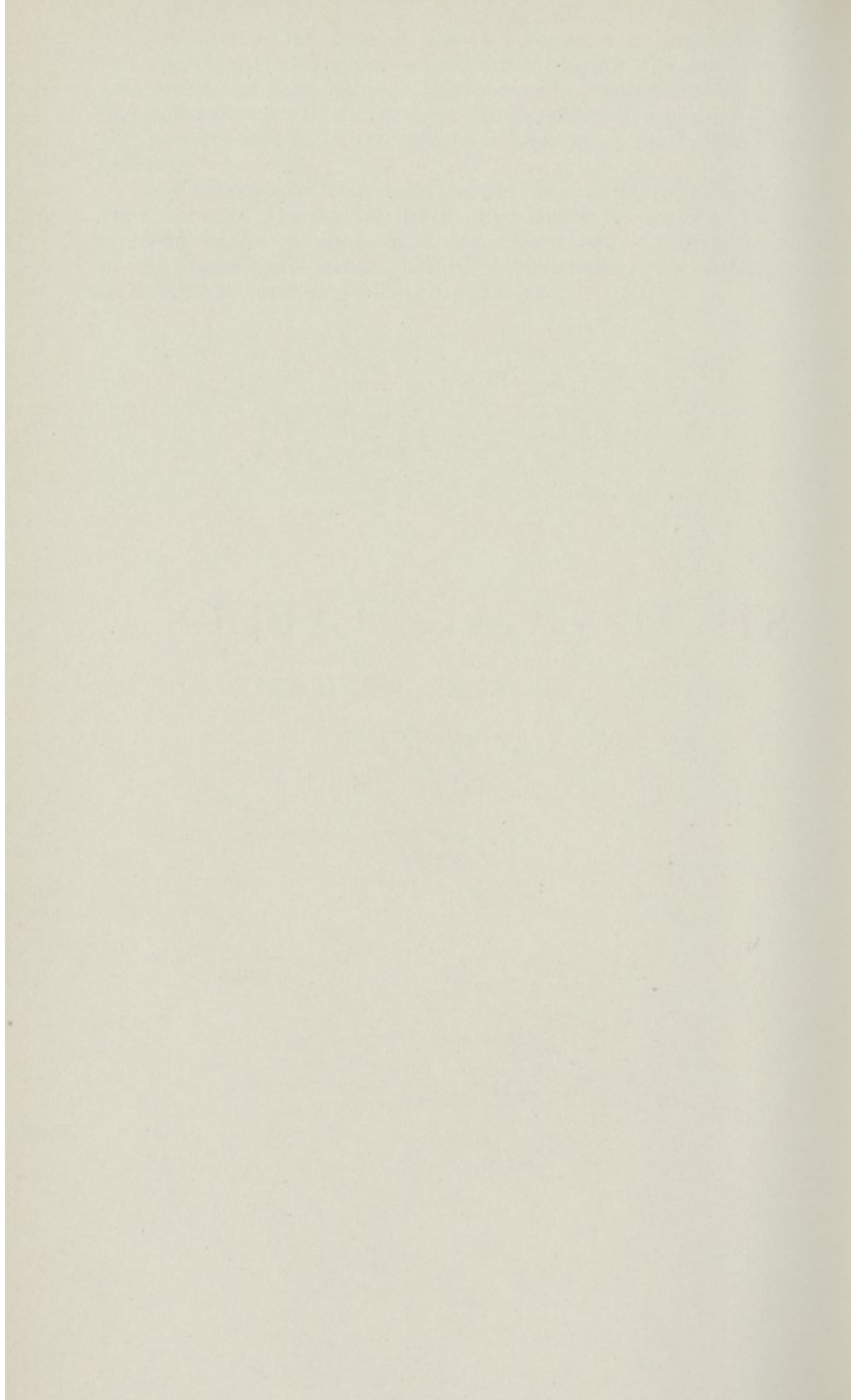
Games, netball, rounders, sand hockey, and cricket rivalled each other out of doors and the many indoor games which filled up wet periods were played no less keenly.

The Staff were expert in devising amusements for the evenings when the weather forced us in early. Concerts, competitions, community singing, and pictures, were all thoroughly enjoyed. Once more the Staff made a "hit" with their concert, which this year consisted of a potted pantomime, "Aladdin." The health of the party was excellent and no accidents of any kind marred

our pleasure. One case of illness I regret very much having to report. A girl developed chicken pox during the first few days and had to be sent home. It afterwards transpired that a sister had suffered with this complaint during the previous fortnight and the parents had failed to call in a Doctor or notify the Medical Officer.

No report of this kind would be complete without some expression of thanks to those who make it possible for these children, many of whom have never been away from their parents or the home environment before, to experience the unfailing joy of a REAL summer holiday by the sea.





APPENDIX II.

STATISTICAL TABLES,

SCHOOL MEDICAL OFFICER'S

ANNUAL REPORT,

1931.

APPENDIX II.

STATISTICAL TABLE.

GENERAL MEDICAL OFFICERS.

THOMAS J. HARRIS.

1891.

TABLE I.
RETURN OF MEDICAL INSPECTIONS.

A.—Routine Medical Inspections.

Number of Code Group Inspections :

Entrants	...	...	...	...	...	5902
Intermediates	...	...	...	...	...	5288
Leavers	...	...	...	...	...	4179
Total						<hr/> 15369 <hr/>

Number of other Routine Inspections 3438

B.—Other Inspections.

Number of Special Inspections	...	...	...	...	9843
Number of Re-Inspections	...	...	...	...	9825
Total					<hr/> 19668 <hr/>

TABLE II.
A.—Return of Defects found by Medical Inspection in the Year
ended 31st December, 1931.

Defect or Disease.	Routine Inspections.		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
(1)	(2)	(3)	(4)	(5)
Malnutrition	414	32	119	35
Uncleanliness (See Table IV., Group V.)	—	—	—	—
SKIN—				
Ringworm—Scalp	2	—	42	—
Body	5	—	136	—
Scabies	18	1	163	—
Impetigo	53	—	1,168	1
Other Diseases (Non-Tuberculous)	191	24	1,959	—
EYE—				
Blepharitis	76	7	256	—
Conjunctivitis	41	3	291	—
Keratitis	—	1	23	4
Corneal Opacities	1	3	11	3
Defective Vision (Excluding Squint)	1398	260	708	15
Squint	202	23	133	—
Other Conditions	12	10	117	4
EAR—				
Defective Hearing	57	39	34	4
Otitis Media	139	24	563	4
Other Ear Diseases	30	5	144	2
NOSE AND THROAT—				
Enlarged Tonsils only	912	379	140	6
Adenoids only	65	56	40	3
Enlarged Tons. and Ads.	650	53	434	1
Other Conditions	97	11	54	—
Enlarged Cervical Glands (Non-Tuberculous)	16	65	136	1
Defective Speech	14	49	79	11
Teeth—Dental Diseases (See Table IV., Group IV.)	190	23	23	1
HEART AND CIRCULATION—				
Heart Disease—Organic	25	131	31	32
" Functional	4	88	8	11
Anaemia	138	46	61	7
LUNGS—				
Bronchitis	139	92	55	10
Other Diseases (Non-Tuberculous)	9	31	9	1

TABLE II.—(Continued)

Defect or Disease. (1)	Routine Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment (2)	Requiring to be kept under observation, but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation, but not requiring treatment (5)
TUBERCULOSIS—				
Pulmonary :				
Definite	—	9	4	—
Suspected	28	40	28	3
Non-Pulmonary :				
Glands	4	9	4	—
Spine	—	12	—	9
Hip	—	5	—	5
Other Bones and Joints	—	14	2	1
Skin	1	—	—	—
Other Forms	—	1	—	—
NERVOUS SYSTEM—				
Epilepsy	9	12	12	9
Chorea	29	47	16	3
Other Conditions	37	88	28	13
DEFORMITIES—				
Rickets	5	14	1	5
Spinal Curvature	25	6	10	1
Other Forms	27	12	13	31
Other Defects and Diseases ...	393	240	6,377	153

B.—Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases) :—

Group (1)	Number of Children		Percentage of Children found to require treatment (4)
	Inspected (2)	Found to require treatment (3)	
CODE GROUPS—			
Entrants	5,902	1,608	27.2
Intermediates	5,288	1,517	28.7
Leavers	4,179	1,055	25.2
Total (Code Groups)	15,369	4,180	27.2
Other routine Inspections	3,438	677	19.7

TABLE III.

Return of all Exceptional Children in the Area.

Children suffering from the following types of Multiple Defect, i.e., any combination of Total Blindness, Total Deafness, Mental Defect, Epilepsy, Active Tuberculosis, Crippling (as defined in penultimate category of the Table), or Heart Disease				Boys.	Girls.	Total.
				3	5	8
Blind (including partially blind)	(i) Suitable for training in a School for the totally blind.	At Certified Schools for the Blind ..	..	5	2	7
		At Public Elementary Schools ..	..	—	—	—
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	—	1	1
	(ii) Suitable for training in a School for the partially blind.	At Certified Schools for the Blind or Partially Blind .. ..	..	10	5	15
		At Public Elementary Schools ..	..	3	2	5
		At other Institutions .. ..	..	—	1	1
		At no School or Institution .. ..	..	2	5	7
Deaf (including deaf and dumb and partially deaf)	(i) Suitable for training in a School for the totally deaf or deaf and dumb.	At Certified Schools for the Deaf ..	..	35	33	68
		At Public Elementary Schools ..	..	—	1	1
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	—	—	—
	(ii) Suitable for training in a School for the partially deaf.	At Certified Schools for the Deaf or Partially Deaf .. ..	..	—	—	—
		At Public Elementary Schools ..	..	4	1	5
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	—	—	—
Mentally Defective	Feeble-minded.	At Certified Schools for Mentally Defective Children .. ..	..	101	65	166
		At Public Elementary Schools ..	..	39	26	65
		At other Institutions .. ..	..	—	1	1
		At no School or Institution .. ..	..	9	11	20
	Notified to the Local Mental Deficiency Authority during the year.	—	—	13	14	27
Epileptics.	Suffering from severe epilepsy.	At Certified Schools for Epileptics ..	..	1	4	5
		At Certified Residential Open Air Schools .. ..	..	—	—	—
		At Certified Day Open Air Schools ..	..	—	—	—
		At Public Elementary Schools ..	..	—	2	2
	Suffering from epilepsy which is not severe.	At other Institutions .. ..	..	2	3	5
		At no School or Institution .. ..	..	3	2	5
		At Public Elementary Schools ..	..	6	8	14
		At no School or Institution .. ..	..	—	—	—
Physically Defective	Active pulmonary tuberculosis (including pleura and intrathoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board .. ..	..	18	24	42
		At Certified Residential Open Air Schools .. ..	..	—	—	—
		At Certified Day Open Air Schools ..	..	—	—	—
		At Public Elementary Schools ..	..	—	—	—
	Quiescent or arrested pulmonary tuberculosis (including pleura and intrathoracic glands).	At other Institutions .. ..	..	1	—	1
		At no School or Institution .. ..	..	—	2	2
		At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board .. ..	..	—	—	—
		At Certified Residential Open Air Schools .. ..	..	—	—	—
		At Certified Day Open Air Schools ..	..	5	8	13
		At Public Elementary Schools ..	..	2	1	3
		At other Institutions .. ..	..	—	1	1
		At no School or Institution .. ..	..	—	—	—

TABLE III.—Continued.

Physically Defective (continued)	Tuberculosis of the peripheral glands.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ..	5	3	8
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Abdominal tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ..	—	—	—
		At Public Elementary Schools ..	2	1	3
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Tuberculosis of bones and joints (not including deform- ities due to old tuberculosis).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	25	15	40
		At Public Elementary Schools	1	—	1
		At other Institutions	1	—	1
		At no School or Institution	1	3	4
	Tuberculosis of other organs (skin, etc.)	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	—	—
		At Public Elementary Schools	1	1	2
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Delicate children, i.e. all children (except those included in other groups) whose general health ren- ders it desirable that they should be specially selected for admission to an Open Air School.	At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools ..	—	—	—
		At Certified Residential Open Air Schools	80	70	150
		At Certified Day Open Air Schools ..	—	62	62
		At Public Elementary Schools	22	38	60
		At other Institutions	—	—	—
		At no School or Institution	6	6	12
		At no School or Institution	6	6	12
	Crippled Children (other than those with active tuber- culous disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's nor- mal mode of life.	At Certified Hospital Schools	4	7	11
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools ..	59	59	118
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ..	—	—	—
		At Public Elementary Schools	12	5	17 (4)
		At other Institutions	5	2	7 (7)
		At no School or Institution	15	9	24 (6)
	Children with heart disease, i.e., children whose defect is so severe as to neces- sitate the provision of educational facil- ities other than those of the public elementary school.	At Certified Hospital Schools	4	4	8
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools ..	9	13	22
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ..	—	—	—
		At Public Elementary Schools	6	6	12
		At other Institutions	1	—	1
		At no School or Institution	8	11	19

TABLE IV.

Return of Defects Treated during the Year ended 31st Dec., 1931.

Treatment Table.**Group I.—Minor Ailments**

(excluding Uncleanliness for which see Group V.)

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	46	2	48
" Body	142	—	142
Scabies	164	1	165
Impetigo	1,169	5	1,174
Other Skin Disease	2,062	25	2,087
Minor Eye Defects— (External and other, but excluding cases falling in Group II.)	1,160	31	1,191
Minor Ear Defects	958	48	1,006
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, etc.)	6,793	361	7,154
Totals	1,2494	473	12,967

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group 1).

Defect or Disease. (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)	2,974	35	7	3,016
Other Defect or Disease of the eyes (excluding those recorded in Group I)	—	—	—	—
Total	2,974	35	7	3,016

TABLE IV.—Continued.

Total number of Children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme	2768
(b) Otherwise	41

Total Number of Children who obtained or received spectacles:—

(a) Under the Authority's Scheme	2591
(b) Otherwise	41

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)
1,302	54	1,356	57	1,413

Group IV.—Dental Defects.

(1) Number of Children who were:—

(a) Inspected by the Dentist:

	Aged:				
Routine Age Groups	{	4	...	396	}
		5	...	851	
		6	...	5812	
		7	...	5576	
		8	...	3343	
		9	...	1011	
		10	...	1009	
		11	...	1333	
		12	...	855	
		13	...	790	
		14	...	129	
				Total	21105
Specials				3551

Grand Total 24656

TABLE IV.—Continued.

(b) Found to require treatment	...	...	14668	
(c) Actually treated	...	...	10401	
(2) Half-days devoted to—				
Inspection	...	...	255	
Treatment	...	...	1988	
		Total	...	2243
(3) Attendances made by children for treatment			18419	
(4) Fillings—				
Permanent teeth	...	...	1955	
Temporary teeth	...	...	907	
		Total	...	2862
(5) Extractions—				
Permanent teeth	...	...	1175	
Temporary teeth	...	...	19402	
		Total	...	20577
(6) Administrations of general anæsthetics for extractions	...	...	...	Nil
(7) Other Operations—				
Permanent teeth	...	...	1626	
Temporary teeth	...	...	490	
		Total	...	2116

Group V.—Uncleanliness and Verminous Conditions.

(i) Average number of visits per school made during the year by the School Nurses.	10.1
(ii) Total number of examinations of children in the Schools by the School Nurses	57136
(iii) Number of individual children found unclean	670
(iv) Number of children cleansed under arrangements made by the Local Education Authority	Nil
(v) Number of cases in which Legal proceedings were taken :—	
(a) Under the Education Act, 1921	Nil
(b) Under School Attendance Bye-laws	Nil

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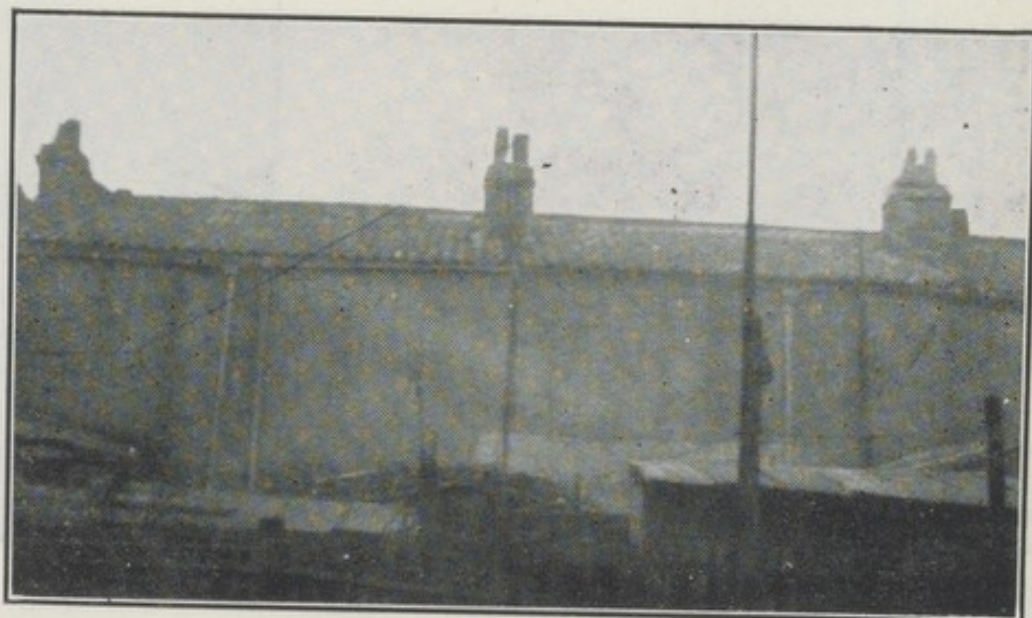
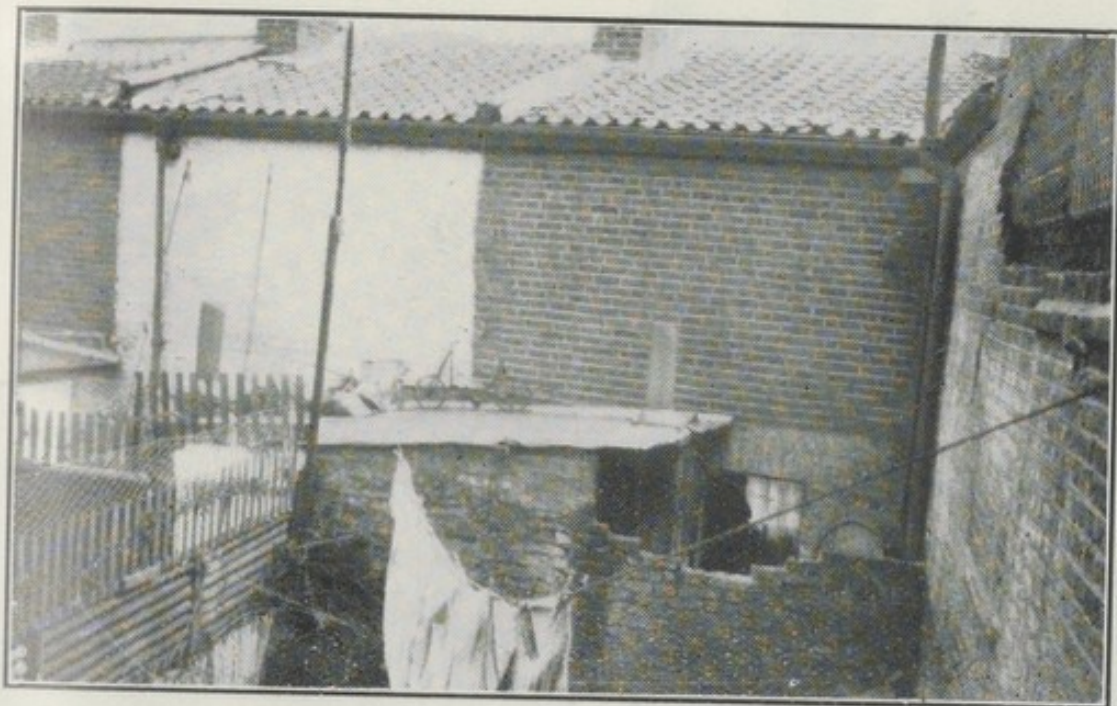
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SLUM PROPERTIES IN WEST HAM.

Scheduled to be dealt with under a Clearance Order.



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