

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

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OXFORD

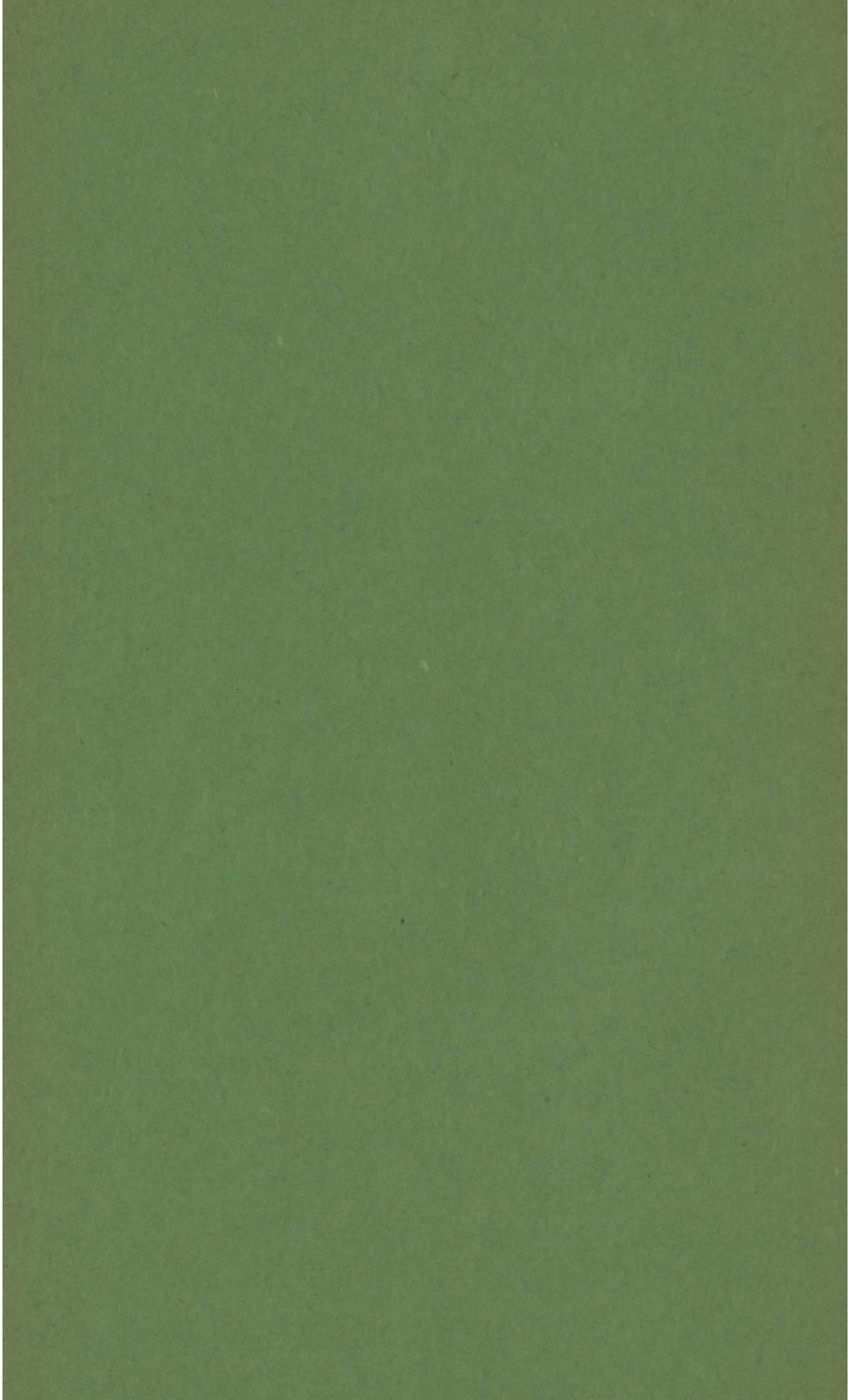
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BOROUGH OF TOTTENHAM

ANNUAL REPORT
ON THE
HEALTH OF THE BOROUGH
FOR THE YEAR
1947

G. HAMILTON HOG BEN
Medical Officer of Health
and School Medical Officer



INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

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THE DEPUTY MAYOR
(Councillor R. W. H. FORD)

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„ A. J. DAVIES.*	„ C. WISE.

* Members of the Health and Housing Committee.

Council's Representative on the Metropolitan Water Board.

Alderman The Rt. Hon. THE LORD MORRISON, J.P. (to May, 1947)

„ E. J. Field (appointed May, 1947).

Town Clerk:

M. LINDSAY TAYLOR, LL.B.

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Chairman:

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Vice-Chairman:

Councillor Mrs. E. M. A. MORRELL.

Members:

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Members:

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(Chairman, Special and Social Services Sub-Committee)	„ Mrs. A. F. REMINGTON.

County Councillor Mrs. A. L. HOLLINGSWORTH, J.P.

„ „ Mrs. J. D. LYNCH.

Mr. M. A. AMIAS.

Mr. W. T. RICHARDS.

Mr. E. COOPER.

Mr. A. L. YOUNGS, B.Sc.

Borough Education Officer:

C. F. STRONG, M.A., Ph.D.

PUBLIC HEALTH DEPARTMENT,
TOWN HALL, N.15.

September, 1948.

HIS WORSHIP THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE BOROUGH.

MR. MAYOR, MY LORD, MY LADY, LADIES AND GENTLEMEN,

I have the honour to submit my report on the state of the public health and sanitary circumstances of the Borough for the year ending the 31st December, 1947.

The Ministry of Health (Circular 13/47) again requires that this report, for reasons of economy in paper and labour, shall be in abridged form. Among the subjects of current interest which the Minister wishes to be included are tuberculosis, the progress of diphtheria immunisation, the care of premature infants and of illegitimate children; and the steps taken to combat infestation.

Reference must be made this year to the rapid changes now taking place in the structure and functions of local government. Hospitals, gas, electricity and public assistance, for example, are being transferred to the State; others such as school health, child welfare, ambulances and town planning, are to be transferred from county districts to county councils. In these changes the Borough of Tottenham, which has hitherto held a high record of achievement for progressive thought and action, must inevitably lose much of its individuality and authority. But with the knowledge that the first objective of local government, as of central government, is the well-being and health of the people, these changes will be accepted with grace and a determined effort to ensure that all services to be made available centrally, are speedily and efficiently adapted to local requirements. In this way new fields of social endeavour and new measures for the prevention of disease and promotion of health will remain ever a primary function of the Borough.

On the eve of the coming into operation of the National Health Service Act, 1946, which seeks to lay down solid foundations for the ultimate erection of a health service second to none in the world, it must be fully appreciated that success will depend very largely on the degree of co-operation given by each and every citizen

Difficulties there certainly will be, but none that are insurmountable by understanding and goodwill.

In subsequent pages of this report I have endeavoured to outline the foundations of a health service already laid under the permissive legislation of the past. That much has been achieved by the foresight of the Town Council is reflected in the fact that in this last year of the Council's autonomy in health matters, the lowest *infantile mortality rate* is recorded, namely 27, as compared with 41 for the whole country.

To the Chairman and members of the various committees associated with the personal health services which will cease to function in the coming year, I can only say how proud your staff has been to be associated with you in the work that you have carried out for so many years. To my colleagues in the Health Department and to the Chief Officers of the Corporation, I wish to offer my sincere thanks for their willing and valued co-operation.

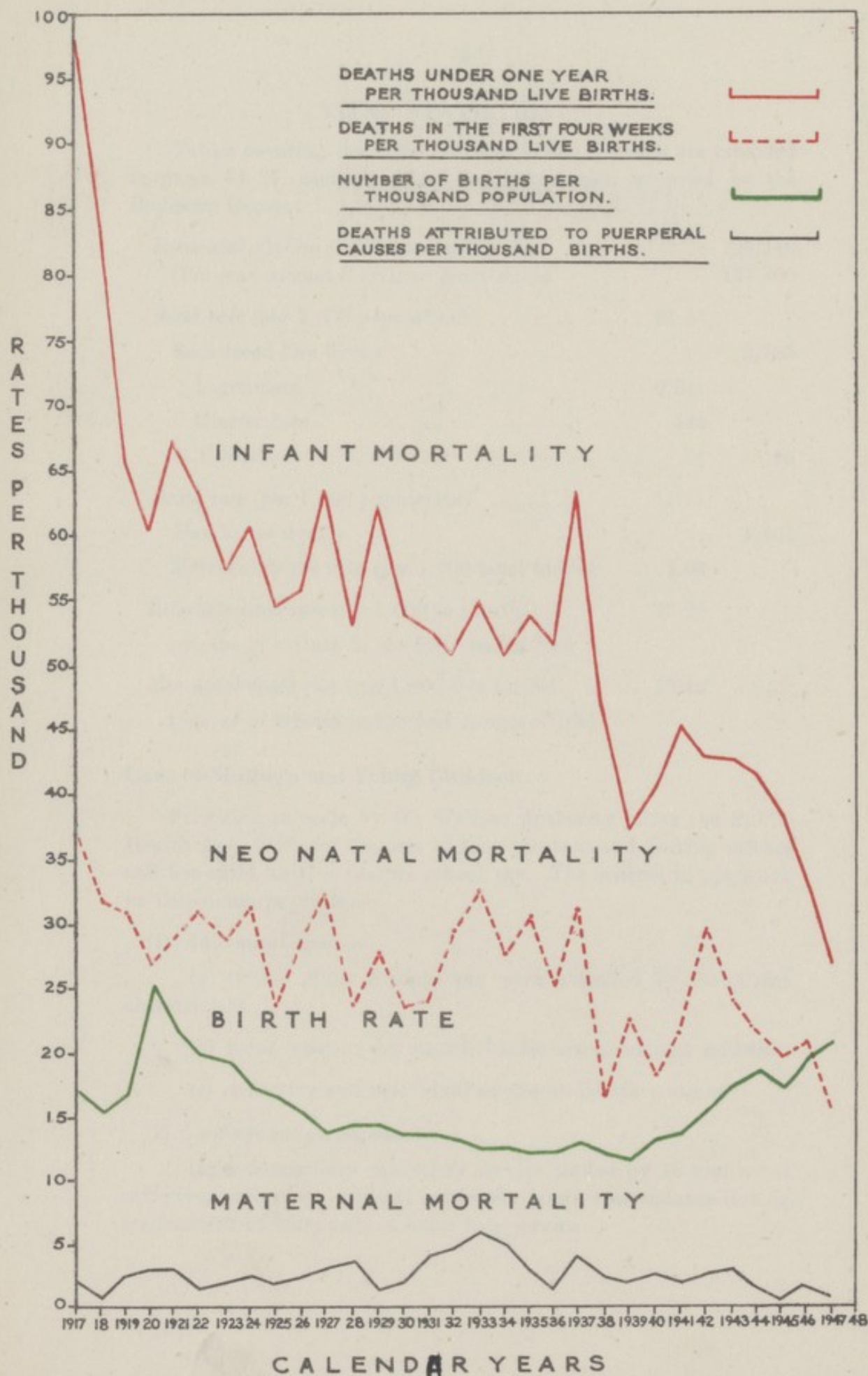
I am,

Your obedient Servant,

G. HAMILTON HOGBEN,

Medical Officer of Health.

PROGRESS IN MATERNITY AND CHILD WELFARE IN TOTTENHAM.



VITAL STATISTICS.

Tables covering the vital statistics of the Borough are included in pages 71-77, and are based on information supplied by the Registrar General.

<i>Estimated civilian population</i> (mid-year)	129,140
(Pre-war estimated civilian population)	144,400
<i>Birth rate</i> (per 1,000 population)	21.57
Registered live births	2,785
Legitimate	2,641
Illegitimate	144
Still births	66
<i>Death rate</i> (per 1,000 population)	11.31
Number of deaths	1,461
Maternal death rate (per 1,000 total births) ..	1.05
<i>Infantile death rate</i> (per 1,000 live births) ..	27.29
(deaths of infants in the first year of life)	
<i>Neo-natal death rate</i> (per 1,000 live births) ..	16.16
(deaths of infants in the first month of life)	

Care of Mothers and Young Children.

Provision is made by the Welfare Authority under the Public Health Act, 1936, for the care of the expectant and nursing mother and her child until it reaches school age. The scheme in operation in Tottenham provides:—

(1) *Ante-natal care*:—

(a) twelve clinic sessions per week attended by consultant obstetricians;

(b) home visiting by health visitor or municipal midwife;

(c) collective and individual advice on health matters.

(2) *Confinement arrangements*:—

(a) a domiciliary midwifery service staffed by 18 municipal midwives and a non-medical supervisor to give attendance during confinement at home; also a home help service;

(b) arrangements with maternity hospital for confinement in hospital where necessary;

(c) provision of three day nurseries and one residential nursery to relieve mothers of their young children during the lying-in period.

(3) *Post-natal care*:—

(a) clinics for examination after confinement;

(b) arrangements for hospital treatment where necessary;

(c) gynaecological clinic mainly for attendance after child-bearing period.

(4) *Child Welfare centres*:—

(a) provision of systematic advice on care of children up to school age at infant welfare clinics;

(b) toddler clinics for routine medical inspection of children under five years of age.

(5) *Arrangements for care of unmarried mother and child.*

(6) *Dental care for mothers and children.*

(7) *Day nurseries mainly for children of working mothers.*

(8) *Health visiting service.*

(9) *Health education.*

(1) **Ante-natal Care.**

Ante-natal clinics are rendering a very important service to expectant mothers, the majority of whom attend from early pregnancy at one of three health centres—the Chestnuts, Lordship Lane and Park Lane. During the past year ninety-two per cent. of the expectant mothers in the district attended the Authority's ante-natal clinics. Of the twelve sessions held each week, ten are under the supervision of Miss Esther Rickards, M.S., F.R.C.S., and two under Mr. Wynn-Williams, M.B., F.R.C.S., M.R.C.O.G.

Considerable care is taken to inform each mother of what arrangements can be made for her confinement either at home or in hospital; and there is good co-operation between hospital almoners and health visitors to ensure that those mothers who need hospital accommodation for confinement on health or social grounds secure

it, whilst others are advised on the preparations for confinement at home, provision if necessary of a home-help and the care of the family.

The preventive aspect of ante-natal care is stressed, and every expectant mother is advised on general health, hygiene, diet and clothing, and availability of priority rations of milk and vitamins; and where necessary how to obtain extra sheets for the home confinement.

Attendances at Ante-Natal Sessions.

Centre.	Sessions	Attend- ances.	Cases.	Post- Natal.
The Chestnuts	262	5,138	1,269	264
Lordship Lane	202	3,900	960	238
Park Lane	153	3,456	800	175
Total 1947	617	12,494	3,029	677
Total 1946	518	10,925	2,949	219

Arrangements are also made at the ante-natal clinic for any special examination, blood tests, X-Ray examination and in particular for treatment of the teeth and where necessary the fitting of artificial dentures by the dental surgeon whose clinic in each case is on the same premises.

The expectant mother is in continuous touch with her midwife and the health visitor, the latter assisting her particularly in the solution of family problems.

(2) Confinement arrangements.

The maternity and child welfare committee's scheme for a *domiciliary midwifery service* provides for eighteen midwives available for every expectant mother who desires or is advised by the doctor to have her baby at home. All midwives are provided by the Authority with a telephone at their residence, and are made a cycle allowance to facilitate their duties. The non-medical supervisor is provided with a car. All midwives have now completed a course in the administration of gas/air analgesia and after demon-

stration to the mother at the ante-natal clinic this service is now provided whenever asked for.

The provision of a *home-help service* for families unable to make their own arrangements is made from a panel of women who offer their services for this work and in the opinion of the health visitor are considered suitable for such employment. In Tottenham, where so many women are in full or part-time employment in occupations vital to the national effort, there has been difficulty in maintaining an adequate supply of home-helps for other than maternity cases. During the year, 113 requests were provided for, and full financial aid granted in 72 cases.

Arrangements for *maternity hospital beds* are made directly with the North Middlesex Hospital and The Mothers' Hospital, Clapton. Other cases are admitted to maternity hospitals within the London region; or under the "evacuation" scheme of the London County Council as a temporary extension of a war-time measure. The following table shows the distribution of hospital confinements during the year:—

The Mothers' Hospital, Clapton	..	268
The North Middlesex Hospital	..	469
Other London Hospitals	..	396
Under the "evacuation" scheme	..	58
		—
<i>Total hospital confinements</i>	..	1,191
		—

Owing to the general shortage of maternity bed accommodation, it was necessary in some cases to discharge women as early as the fourth day after confinement, in which cases the subsequent nursing for the remainder of the lying-in period was carried out by the municipal midwives in the home.

(3) **Post-natal care.**

The importance of *post-natal* care in the prevention of any serious disability arising from child-birth in later years, is a feature of the clinic service. Every mother is advised to attend for post-natal examination six weeks after the delivery of the child; and an appointment system is in operation to avoid unnecessary loss of time particularly important in the case of the mother who has

returned to work. On the whole the attendance of women at the post-natal clinic is disappointing, being less than fifty per cent of the number confined.

(4) Child Welfare Centres.

In addition to home visiting a considerable part of the supervision of the health of young children is undertaken at four welfare centres—The Chestnuts, Town Hall Annexe, Lordship Lane and Park Lane. In each case these centres are associated with the school health service, making available to children under five years of age all clinic services available to children of school age. By accommodating the Local Authority's medical activities in one building, continuity and an economic inter-changeability of staff is assured. With the establishment of health centres under the National Health Service Act it should be possible in all cases to make provision for group medical practice in the same building as that provided by the Local Health Authority for its preventive services.

The *infant welfare centres* are staffed by whole-time medical officers experienced in child health, and by the health visitors for the districts served. The following table shows the attendances of infants and children under five years of age:—

Centre.	Sess- ions.	Weigh- ings. Infant Attend- ances.	New Cases.	Weigh- ings. Over 1 year Attend- ances.	New Cases.	Exam- ined by Doctor.
Lordship Lane Muni- cipal Health Centre	251	8,376	727	1,903	50	1,660
The Chestnuts, St. Ann's Road ..	257	9,368	898	1,835	78	2,346
Park Lane Municipal Health Centre ..	109	6,039	529	754	5	1,706
Town Hall	50	1,574	185	193	3	—
Totals—1947 ..	667	25,357	2,339	4,685	136	5,712
Totals—1946 ..	708	19,427	1,927	4,886	162	4,931

Health education, individually and collectively, is carried out at these centres by 'talks' given by the doctor and health visitor. Free use is made of visual education methods by showing films, posters, exhibition material in show cases and black-board illustrations. Leaflets on various health topics mainly provided by the Central Council for Health Education are made available on request.

The centres also act as an agency for the distribution under the *National Milk and Vitamins Scheme* of dried milk, cod-liver oil and fruit juices.

I am indebted to the local food office for the following information of supplies of cod-liver oil and vitamin foods distributed in the area during the year under review:—

29,561 bottles of cod-liver oil
145,482 bottles of orange juice
90,663 tins of national dried milk
7,320 packets of cod-liver oil capsules.

Of this quantity 60 per cent was issued by the local food office, and the remaining 40 per cent through the four welfare centres.

In addition to the above numbers, the following were issued to the medical officer of health for distribution as follows:—

2,793 bottles of cod-liver oil	}	To Institutions and Schools.
9,767 bottles of orange juice		
950 tins of national dried milk		
803 bottles of cod-liver oil	}	To Nurseries.
2,721 bottles of orange juice		

Toddler clinics for children between two and five years of age are held regularly throughout the year. The object of these special clinics is to secure a routine health overhaul of children under five not in attendance at the infant welfare centres, nursery schools, nursery classes or day nurseries in the area. The children are seen by appointment at six-monthly or yearly intervals, and advice is given as to immunisation against diphtheria and whooping cough, the treatment of dental and other defects shown by examination.

Table of Attendances at Toddler Clinics.

Health Centre.	Sessions held	Appointments made.	Actual Attendances.		
			New.	Re-exams.	Total.
Lordship Lane ..	45	767	216	423	639
The Chestnuts ..	44	844	211	312	523
Park Lane ..	51	1,162	239	419	658
Totals ..	140	2,773	666	1,154	1,820

Arrangements with the school health service for children under five to attend the special clinics has continued during the year. The number of consultations was 727. Children referred for artificial sunlight numbered 53.

Specialist Clinic.	No. of Consultations.	No. of Treatments.
Minor Ailments	5	7
Dental	379	454
Orthopaedic	164	98
Ear, Nose and Throat	59	32
Ophthalmic	120	30

(5) Care of Unmarried Mother and Child.

The scheme of co-operation between the health visitors and the social welfare worker of the local moral welfare association has continued to work well. Case work is undertaken in the home and arrangements made where necessary for admission to hostels and training homes for the accommodation of mother and child. While in the majority of cases the infants remain with their mothers and can later be supervised by the district health visitor, there is evidence of an increasing number of mothers who cannot or will not take the baby with them. In certain cases suitable foster parents can be found, adoption arranged and in a limited number of cases accommodation found in the Authority's residential nursery at Bengoe, Herts.

Of the 144 illegitimate births registered during the year, action taken by the department was as follows:—

Care of Illegitimate Children (Circular 2866).

The number of cases sent to the moral welfare worker from Tottenham was 107, 46 of these being referred directly from the Maternity and Child Welfare Department.

Confinements in hospitals	31
Confinements at home	11
Sent to Maternity Homes	16
Sent to Hostels	16
Sent to mother and baby homes ..	5
Sent to Children's Homes	10
Sent to employment with child ..	1
Transferred	3
Waiting to go away for confinement ..	14
<hr/>	
Total	107
<hr/>	

Babies fostered	12
Babies who remained with the mother ..	31
Babies adopted	31
Babies stillborn	3

Child Life Protection.

The health visitors paid 68 visits as Infant Life Protection Visitors during the year to 21 foster mothers in respect of 22 foster children. The number remaining on the register at the end of the year was 15 foster mothers in respect of 16 foster children, 7 under 5 years of age and 9 over 5 years of age.

Adoption of Children (Regulation) Act, 1939 (Section 7).

168 visits were paid by Health Visitors and 35 adoptions were completed. Number under supervision at the end of the year, 11 children.

The care of *children apart from their parents* will, under the new Children's Act, become the responsibility of a special children's committee appointed by the Middlesex County Council.

(6) Dental Care of Mothers and Young Children.

Attention is focussed on the importance of the care of the teeth in the ante-natal period. At this time the mother's teeth are particularly liable to decay, and reference of all expectant mothers for dental supervision is necessary throughout pregnancy.

The dental service for mothers and young children is undertaken by co-operation with the school health service, four dental units being established, one at each of the welfare centres. The growth in recent years of the number of young children requiring conservative treatment and the increasing use made of this service raises the question of the adequacy in the number of dental officers appointed to deal with these priority classes in this area.

The number of expectant mothers found to require dental treatment during the year was **821**. A further **69** nursing mothers received treatment.

The number of children under the age of five years referred from infant welfare centres and nurseries was **221**.

The main classes of treatment undertaken were as follows:—

Extractions (expectant and nursing mothers)	..	1,216
Extractions (children under five)	.. ..	199
Fillings (expectant and nursing mothers)	.. ..	1,017
Fillings (children under five)	.. ..	126
Scalings—number of	.. ..	310
Artificial dentures supplied to mothers	.. ..	116

(7) Nursery Provision.

Three day nurseries are provided, accommodating 140 children whose mothers are working. The majority of mothers whose children have been accepted have no financial support except their earnings.

All who have seen the work carried out in these nurseries cannot fail to be impressed by the measures taken to ensure the happy, healthy routine of meals, play, cleanliness and rest, which takes up so much of the child's day.

Each nursery is approved by the Ministry of Health as a training school for Nursery Nurses who, under the guidance of the matrons and other trained staff, complete their practical work for the National Nursery Nurses' Examination Board certificate. Tottenham is fortunate in having a long tradition of nursery provision both under the Maternity and Child Welfare and Education Committees, with close co-operation and inter-changeability of staff. Theoretical work is undertaken by the student nurses at the Tottenham Technical College.

Parents' Club.—Each nursery runs a parents' club at which cultural and social activities are held. This provides occasions for the informal meeting of parents and nursery staff.

Residential Nursery. Bengoe House, Hertford, has accommodated many Tottenham children for short periods, and they have benefited very greatly from the high standard of child care which is maintained there.

The average daily attendance at Tottenham nurseries throughout the year was as follows:—

NURSERIES.	ATTENDANCES, 1947 (Whole days).						Total.	Days Open.	Av. Daily Attendance.
	January to March.	April to June	July to September.	October to December.	Total.				
					Under 2	Over 2			
<i>Day Nurseries.</i>									
Park Lane :									
Under 2 years	912	644	978	758	3,292	7,169	10,461	255	41.024
Over 2 years	1,809	1,753	1,661	1,946					
Lordship Lane :									
Under 2 years	539	891	646	447	2,523	6,633	9,156	241	37.992
Over 2 years	1,248	1,778	1,866	1,741					
Plevna Crescent :									
Under 2 years	989	1,000	874	1,301	4,164	7,310	11,474	255	44.996
Over 2 years	1,877	1,846	1,657	1,930					

Residential—BENGEO HOUSE, HERTFORD.

In residence 29.12.46=19.

Admitted during 1947=29.

Discharged=28.
Death=1.

In residence 31.12.47=19.

(8) General Hospital Treatment for Children under Five Years.

Children were referred to the Prince of Wales's Hospital or the North Middlesex Hospital for operative treatment of enlarged tonsils and adenoids.

Orthopaedic surgical appliances were supplied by arrangements with the National Orthopaedic Hospital, Stanmore, Middlesex.

Convalescent Home Treatment.

The Invalid Children's Aid Association has co-operated with the department in placing 29 children in convalescent homes for children under five years of age.

Number of children who stayed for 1 to 10 weeks	17
Number of children who stayed for 11 to 20 weeks	8
Number of children who stayed over 20 weeks	4
	—
	29
	—

Of this number, 4 cases were free, the other 25 paying varying amounts weekly towards the cost.

In addition three children were already away on the 1st January, 1947, and stayed during the year from 18 to 52 weeks.

Nature of defects for which convalescent treatment was advised:—

<i>Defect.</i>	<i>No. of Children.</i>
Bronchitis	7
Pneumonia	6
Malnutrition and Debility	5
Dislocated hip	1
Peritonitis	1
Tonsilitis	3
Post-Measles	1
Post-Whooping Cough	2
Mastoid	1
Abscess	1
Pink's Disease	1
	—
	29
	—

(9) The Health Visiting Service.

The Superintendent Health Visitor reports as follows:—

During 1947 five well-known members of the staff left: Miss Blanchard, Superintendent Health Visitor, retired; and also Miss Hockin and Miss Whitaker. Miss Finch married and Miss Parslow left to take up missionary work in Uganda.

Three new health visitors were appointed.

Miss Townsend was given leave of absence for 5 weeks in order to accept an invitation to see the public health services in Austria.

Miss Lennon was allowed leave of absence on exchange to America for one year.

Miss Driscall, American Public Health Nurse from Syracuse, New York State, was accepted in exchange, and joined the staff in September.

Miss Goodwin obtained the Diploma of the University of London in Social Studies.

Miss Townsend was appointed Superintendent Health Visitor on 8th December, 1947, and Miss Lennon was appointed as Deputy and will take up her appointment when she returns from America. In the meantime, Miss Sumpner is Acting Deputy Superintendent.

Student Health Visitors of the National Health Society attended two days weekly for practical training. College of Nursing post-graduate students visited Tottenham to see Tottenham health services.

Distinguished Visitors.—A large number of distinguished visitors and foreign students, and other interested persons came to Tottenham to see the health services during the year.

WORK OF HEALTH VISITORS

Health Visiting duties were mainly concerned with the general care of nursing and expectant mothers and children from birth to 5 years of age, including visiting and clinic duties and the visiting of foster-children and homes of applicants for adoption orders. The work of health visitors was maintained at its usual high level. The staff comprised eighteen health visitors. Health visitors maintained a friendly contact with day nurseries.

The department received active co-operation from Inspector Martin of the N.S.P.C.C., the Invalid Children's Aid Association, and Almoners of various hospitals.

Gifts of chocolate-flavoured milk were received from the Kinsmen's Clubs of Canada, and were distributed to the day and residential nurseries.

Ministry of Works Enquiry into Home Accidents.—During 1947, health visitors made a special investigation into home accidents for the Ministry of Works.

DETAILS OF HOME VISITING BY HEALTH VISITORS.

Expectant Mothers.		Children under 1 year.		Over 1 yr.	Totals.
First Visits.	Re-visits.	First Visits.	Re-visits.	Re-visits.	
2,235	2,011	2,629	6,922	11,716	25,513
<i>Other visits:</i> —Infantile Deaths					37
Still Births					90
Ophthalmia Neonatorum					5
Pneumonia					17
Infectious Diseases					979
Public Health Act, 1936: Infant Life Protection					68
Adoption of Children (Regulation) Act, 1939					168
Special visits:					
Mothers					831
Children					206
Total					27,774
					91
Dockets for Sheets—1,560 were given to expectant mothers.					

(10) Municipal Midwifery Service.

The number of midwives was increased during the year to 18, and the number of deliveries by them in the homes of the people was 1,528, an increase of nearly 200 over the previous year. Deliveries by midwives in private practice numbered 36.

The total number of nursing visits by municipal midwives was 22,186, the number of ante-natal visits being 2,105.

The Town Council, as the Local Supervising Authority and the Housing Authority, has given special consideration to the special requirements of midwives for *housing accommodation*. The irregular

hours of work, the necessity for facilities for interviewing patients and other matters incidental to a midwife's calling, makes it increasingly difficult for the midwife herself to arrange accommodation. The ideal is to provide every district midwife with a municipal house in close relation to the community she serves.

Maternal Mortality.

Puerperal sepsis	2
Other puerperal causes	1
<hr/>	
Total	3
<hr/>	

The maternal mortality rate was 1.05.

Puerperal Pyrexia.

The following table shows the final results in each of the 24 cases of puerperal pyrexia notified during the year:—

Domiciliary Confinements.	Occurred in Institutions outside District.	Total.	Final Results.	
			Recovered	Died.
9	15	24	24	Nil

Record of Municipal Midwifery Cases.

Number of deliveries	1,528
Number attended as maternity nurses	131
Primipara cases	504
Multipara cases	1,024
Ante-natal visits	2,105
Nursing visits	22,186
Deliveries by midwives in private practice	36

Ophthalmia Neonatorum.

The number of notifications of this disease was 8. One case removed from the district before result was known. Seven made a satisfactory recovery. There were 5 domiciliary confinements and 3 institutional confinements.

Care of the Premature Infant.

Number of Premature Infants.		Still-born.	Live Births.	Sets of Twins.	Alive after first month	Alive after 1 year.
Born in the District	56	6	50	2	46	46
Born in Hospitals	80	4	76	7	68	66
Totals ..	136	10	126	9	114	112

Causes of Death.

(1) Under one month—

At home Prematurity, 3; Pneumonia, 1; Total, 4.

In hospitals: Atelectasis, 2; Asphyxia, 1; Prematurity, 2; Pneumonia, 2; Marasmus, 1; Total, 8.

(2) Under one year:—

At home: Nil.

In hospitals: Broncho-pneumonia and Whooping Cough, 1; Accidental, following a fall, 1.

All municipal midwives are specially trained in the care of the premature infant, and on notification, the non-medical supervisor is consulted as to continuance of care in the home. Special cots are made available by the department for use in the home, or if considered necessary the premature infant is conveyed to hospital by special arrangements made with the North Middlesex Hospital.

Following up of premature infants is continued throughout the first year of life by home visits of the Health Visitor, and special attention given to maintenance of breast feeding.

(11) Home Nursing.

This work has been carried out with the utmost efficiency by the Queen's Institute of District Nursing, whose modern headquarters and nurses' home is situated in Bruce Grove. The resident staff comprises a Lady Superintendent and six nurses. Management is vested in a local committee which includes local authority representatives. The number of individual cases attended during the year was 976, with a total of 21,640 home visits.

WHEN BABY IS BORN AT HOME.

*The Midwife answers
a call.*



*Patient using the
Walton-Minnitt
Analgesia Apparatus.*



*Mother learns how
to bath her baby.*



(12) Immunisation against Diphtheria.

Four immunisation clinics were held each week, and every encouragement given by propaganda and individual advice to mothers by doctors, midwives and health visitors, to ensure that a high proportion of children receive protection.

The year under review shows a remarkable decline in the incidence of the disease, there being 22 cases of diphtheria notified to the department. *No death occurred from diphtheria.*

Attendances and Treatment given:

Centres.	Total Attendances.	Number of Schick Tests.	Number of Individual cases completed.		Totals.
			0—4 yrs.	4—15 yrs.	
Chestnuts ..	2,067	463	492	43	535
Town Hall ..	1,662	367	431	23	454
Lordship Lane	2,111	488	495	61	556
Park Lane ..	1,370	309	365	18	383
Totals ..	7,210	1,627	1,783	145	1,928
			1,928		

No information is available as to the number of children treated by their private doctors, but there have been very few requests for the prophylactic material for this purpose.

Immunisation in Relation to Child Population.

Number of Children who had completed a full course of Immunisation at any time up to 31st December, 1947.

Age at 31.12.47 i.e., Born in Year.	Under 1 1947	1 1946	2 1945	3 1944	4 1943	5 to 9 1938-42	10 to 14 1933-37	Total Under 15
Number Immunised	139	1,327	1,275	1,486	1,122	5,696	4,916	15,961
Estimated mid-year child Population 1947.	Children under five 10,700					Children 5—14 15,950		
Percentage	50					66.53		

Diphtheria Notifications and Deaths, in Relation to Immunisation.

Notifications.			Deaths.	
Age at date of Notification.	Number of Cases Notified.	Number of cases in preceding column in which the child had completed a full course of immunisation.	Age at date of Death.	Number of Deaths.
Under 1	Nil.	Nil.	Under 1	Nil.
1	2	1	1	Nil.
2	Nil.	Nil.	2	Nil.
3	2	2	3	Nil.
4	3	3	4	Nil.
5 to 9	8	6	5 to 9	Nil.
10 to 14	5	2	10 to 14	Nil.
Totals	20	14	Total	Nil.

Whooping Cough.

There were 286 cases notified, 42 occurring under the age of one year. Cases removed to isolation hospital totalled 22, a substantial increase over the figure of 10 for 1946. Two deaths were recorded.

PREVENTION OF WHOOPING COUGH

Whooping Cough Vaccine Trials.

The special investigation referred to in my Annual Report for 1946 continued throughout the year, and Dr. Cockburn, of the Central Public Health Laboratory, Colindale, writes:—

Whooping cough is the most dangerous of the common infectious diseases of childhood, and for some time now reports have been received from the U.S.A. of the effect of vaccines in preventing or modifying the illness. In this country, however, the efficacy of vaccines is still unproved, the early reports having been unfavourable. In 1946 the Medical Research Council asked the Medical Officer of Health for Tottenham to take part in a large-scale investigation which might lead to whooping cough becoming a preventable disease in much the same way as diphtheria has been controlled by immunisation. The investigation was planned in such a way that the evidence obtained would be scientifically sound, and although this meant that not all the children in the trials were

to receive whooping cough vaccine, the response of parents with young children was very gratifying. Since October, 1946, 800 children have been inoculated and each child is now being visited monthly by special investigators who note all coughs and colds and who investigate any suspicions of whooping cough. These visits will continue for one year more, at the end of which time it will be possible to present conclusive evidence of the efficacy or otherwise of the vaccines used. The Medical Research Council are greatly encouraged by the attitude of parents in Tottenham to this new method of settling problems of preventive medicine by scientific observation of the children after inoculation, and hope that as a result of this collaboration of parents, doctors and scientists, one more infection will be added to the list of preventable diseases.

Ambulance Service.

The Health Committee of the local authority provides a twenty-four hour service to convey any person suffering from sickness or accident to hospital or clinics for treatment, or to their own homes. The ambulance service is also available (without prior notification) to convey expectant mothers to hospital for confinement.

This service is free to Tottenham residents in respect of any journey within the Metropolitan Police Area, but charges of 2s. 6d. and 5s. are made for return journeys from the North Middlesex Hospital and other hospitals in the Metropolitan Police Area respectively.

The accompanying statistics reveal a very heavy increase in ambulance work, both in respect of hospital removals and maternity cases, but administrative arrangements proved adequate and a high standard of efficiency was maintained.

A considerable increase in staff was necessary, however, in order to operate a revised duty rota providing for a 48-hour week in accordance with the Middlesex Joint Industrial Council's conditions of service which were adopted by the Council early in the year, and subsequently the rates of pay and conditions of service of the National Joint Council for Staffs of Hospitals and Allied Institutions. The staff now comprises a foreman, 12 drivers (including deputy foreman), and 12 attendants; an increase of 8 over the previous establishment.

A new Austin ambulance was delivered in February, 1948, replacing vehicle AMD 836, which had been in continuous service since 1933.

A new Bedford coach was added to the children's transport service for conveying children to the four Day Special Schools, and this service, together with the school meals service, has continued to operate in conjunction with the ambulance service, under the Public Health Department's administration.

Ambulance Statistics.

Month.	Mileage Ambulances	Mileage School Buses	Total.
January	4,097	1,582	5,679
February	4,294	1,591	5,885
March	4,484	1,518	6,002
April	3,688	1,153	4,841
May	4,174	1,634	5,808
June	4,274	1,977	6,251
July	4,882	1,429	6,311
August	3,134	265	3,399
September	3,883	1,699	5,582
October	4,568	1,970	6,538
November	3,784	1,836	5,620
December	4,073	1,290	5,363
Totals—1947 ..	49,335	17,944	67,279
Totals—1946 ..	44,600	18,116	62,716

	1947.	1946.
Accident and Hospital cases conveyed ..	8,173	6,443
Maternity cases conveyed	654	450
Special School Journeys	1,589	1,613

The oxygen resuscitator was used on 11 occasions, for the following cases:—

Collapse	4
Gas Poisoning	4
Maternity	1
Smoke Suffocation	1
Strangulation	1
	—
Total	11

Health Education.

Baby bathing and mothercraft demonstrations were given during the year to girl school leavers, at the Health Centres. Health Visitors undertook this type of education, ideal garments were exhibited and live babies were used as models. Talks on "The Health Services" were also given to school girls, and the girls concerned appeared to enjoy these practical means of training for mothercraft.

Show cases, posters, demonstration tables and blackboards are used at all health centres to give visual illustration to health teaching.

Talks and demonstrations were given by Health Visitors at all clinics on a large variety of health subjects, collectively and individually, during ante-natal clinics, baby weighing sessions and during the sale of infant foods and vitamins. On these occasions many questions were asked and answered; mothers took part in discussions, and by these various means obtained ideas and information on healthy living.

Cookery talks and demonstrations were given at Park Lane by Miss Cuthbertson.

Leaflets were available at Centres throughout the year, giving particular advice and information concerning the prevention of accidents, minor ailments, infections, and other matters of health interest to mothers.

Health Centres.

Under the National Health Service Act, 1946, it will be the duty of every Local Health Authority to provide *Health Centres*. On these centres will be based the services which are to include group medical, dental, pharmaceutical and ophthalmic services; together with those personal health and preventive services already, or to be, provided by the Local Health Authority.

With the improved amenities such centres are known to be capable of giving, early steps should be taken to provide a number of experimental health centres in an area such as Tottenham. This may be achieved even under the present building restrictions by:—

- (1) the erection of semi-permanent prefabricated units, capable of expansion or modification on lines justified by practical experience of their working;
- (2) the expansion and adaptation of existing modern and well-designed premises now used for school health and maternity and child welfare services, to include the new services of group medical practice, etc.

In this latter respect Tottenham has a special claim for early consideration in that a building programme of health centre development was commenced in the immediate pre-war years. Two modern and well-designed premises were completed at an approximate cost each of £20,000. The scheme provided for:—

- (1) *Neighbourhood health centres*, to serve units of 20,000 population, suitably spaced within convenient reach of the families to be served. Of this class the centre and day nursery in *Park Lane, Tottenham*, was completed in 1939.

A second centre of this type, but with a child guidance unit in the place of the day nursery, was to be built on a site acquired for the purpose in *Cornwall Road, Tottenham*. Though the plans had been accepted, this project had to be indefinitely postponed on the outbreak of war.

- (2) A *community health centre* providing premises similar to the neighbourhood health centre, but sited in relation to recreational, cultural and social activities as an integral part of the plan. With the Peckham Experiment in mind it was thought that here the public would be more likely to co-operate in periodic health overhauls, under conditions where each member of the family visits the community health centre for its social, educational and recreational attractions, irrespective of the benefits conferred by health inspections and advice on health matters.

Such a centre was erected at *Lordship Lane, Tottenham*, and opened to the public in 1938. On the same site is a large recreation ground which includes a specially designed

children's playground, paddling and boating pools and a model traffic centre. Also on the same site, adjacent to the health centre, is an open-air swimming pool with sun-bathing facilities and municipal restaurant. Youth community services in the evenings are provided in a secondary modern school, built in the same year (1938) and on the same site. The whole is contiguous with a housing estate comprising two thousand municipal houses.

- (3) A *central health centre* (or polyclinic) was proposed to be built in Tottenham in close association with the local general hospital. Staffed and equipped to provide a complete range of specialist diagnostic clinics, such a centre, linked to the smaller and less lavishly equipped neighbourhood or community health centres in the district would relieve much of the pressure of the hospital out-patient department; and provide physical contact between the family doctor, public health worker and the hospital specialist and auxiliary staff. Increasing scope would be given by such a central health centre (or polyclinic) for linking post-graduate teaching and special departments with medical and public health work at the periphery; and so encourage co-operative effort in organised and planned research into medical and social problems. This must result in an increased amount of available data, which, if properly correlated, can supply a more complete local audit of community health than has been possible in the past. For this purpose a statistical department is essential to the central health centre, equipped with all necessary modern mechanical aids for sorting the records and tabulating the results. This department would serve the hospital, family doctor and public health services of the district.

On the coming into operation of the National Health Service Act, early consideration should be given to the possibility of extending the premises at both of the new centres at Park Lane, and Lordship Lane to make provision for the additional services required by section 21 of the Act. To further improve the facilities at Lordship Lane, co-operation of the Local Education Authority may be considered for the erection of a Community Centre on the same site, in accordance with the provisions of the Education Act,

1944. It will further be necessary to explore the possibility of a new health centre on the site of the old adapted premises known as the Chestnuts Centre, St. Ann's Road, Tottenham; and to acquire at least two other sites within the borough for health centre development at some distant future. Finally, the project to build a central health centre should not be overlooked under the new legislation, and for this purpose it will be necessary to seek the co-operation of the North-East Metropolitan Hospital Regional Board as to the possibility of available land within the grounds of, or otherwise accessible to, the Prince of Wales's General Hospital, Tottenham.

The School Health Service.

Schools in the Borough.

<i>Schools.</i>		<i>Departments.</i>	<i>Children on Roll.</i>
<i>Primary</i>			
Junior	..	15	5,413
Infants	..	15	4,124
<i>Secondary</i>			
Modern	..	12	3,662
Grammar	..	3	1,714
<i>Technical</i>	..	2	390
<i>Specials</i>			
For the deaf		1	80
Physically handicapped		1	70
<i>Nursery Schools</i>		3	208
Church Schools		4	702
Roman Catholic		2	549
Private ..		3	350
Total school population ..			17,262

Co-ordination of Health Services.

The policy to co-ordinate as far as possible the work of the school health service with that of public health and maternity and child welfare, has been well maintained. All the nursing staff with the exception of the midwives is under the general supervision of the

CLINIC SERVICES

Clinic.	Address.	Monday.	Tuesday.	Wednesday.	Thursday.	Friday.	Saturday.
Ante-Natal	Chestnuts (St. Ann's Road). Park Lane Lordship Lane ..	9.0 a.m. 2.0 p.m. 2.0 p.m. —	— — 9.0 a.m. 2.0 p.m.	9.0 a.m. 2.0 p.m. 2.0 p.m. —	9.0 a.m. — — —	— 2.0 p.m. 9.0 a.m. 2.0 p.m.	— — — —
Infant Welfare	Chestnuts Park Lane Lordship Lane .. Town Hall	— — 2.0 p.m. D —	2.0 p.m. 9.0 a.m. 2.0 p.m. D — —	2.0 p.m. D — 9.0 a.m. D 2.0 p.m. 2.0 p.m.	2.0 p.m. D 2.0 p.m. D 9.0 a.m. 2.0 p.m. —	9.0 a.m. D 2.0 p.m. D — — —	— — — —
Toddlers (2-5 yrs.) ..	Chestnuts (St. Ann's Road). Park Lane Lordship Lane ..	— — —	— 9.0 a.m. D —	9.0 a.m. D — —	— — 2.0 p.m. D	— — —	— — —
Immunisation	Chestnuts (St. Ann's Road). Park Lane Lordship Lane .. Town Hall	2.0 p.m. — — —	— — — 2.0 p.m.	— — 2.0 p.m. —	— 2.0 p.m. — —	— — — —	— — — —
Minor Ailments	Park Lane Lordship Lane .. Cornwall Road ..	— 1.30 p.m. 1.30 p.m.	9.0 a.m. — —	— 1.30 p.m. 1.30 p.m.	9.0 a.m. — —	— 1.30 p.m. 1.30 p.m.	9.0 a.m. — —
Dental (by appointment)	Chestnuts (St. Ann's Road). Park Lane Lordship Lane .. Town Hall	9.0 a.m. 2.0 p.m. — —	9.0 a.m. 2.0 p.m. — —	9.0 a.m. 2.0 p.m. — —	9.0 a.m. 2.0 p.m. — —	9.0 a.m. 2.0 p.m. — —	— — — —
Ophthalmic (by appointment)	Lordship Lane ..	—	—	9.0 a.m. 1.30 p.m.	—	9.0 a.m.	—
Aural (by appointment)	Park Lane	—	—	2.0 p.m.	—	9.0 a.m.	—
Orthopaedic (by appointment)	Lordship Lane ..	—	2nd and 4th in the month 9.30 a.m.	—	—	—	—
Remedial Exercises .. (by appointment)	Lordship Lane .. Vale Road School for Physically Handicapped	2.0 p.m. 9.0 a.m.	9 a.m. and 2 p.m. —	9 a.m. and 2.0 p.m. —	2.0 p.m. 9.0 a.m.	9 a.m. and 2.0 p.m. —	9.0 a.m. —
Speech Therapy (by appointment)	Park Lane Lordship Lane .. Cornwall Road ..	2.0 p.m. 9.30 a.m. —	— 9.30 a.m. 2.0 p.m.	— — 9.30 a.m.	— 9.30 a.m. 2.0 p.m. —	2.0 p.m. — 9.30 a.m.	— — —
Rheumatism (by appointment)	Lordship Lane ..	—	2.0 p.m. monthly.	—	—	—	—
Ultra-Violet Light ..	Lordship Lane ..	2.0 p.m.	—	—	2.0 p.m.	—	—
Chiropody (by appointment)	Lordship Lane ..	—	9.30 a.m.	—	9.30 a.m.	—	—

Superintendent Health Visitor. All specialist clinic services are equally available to children under school age; and the dental service embraces full provision for the treatment of expectant and nursing mothers. All records made in connection with the supervision of young children are transferred on reaching school age and incorporated in a common folder retained with the school health records.

School Meals and Milk.

I am indebted to the Borough Education Officer for the following details with respect to meals and milk supplied in schools:—

Meals.—During the twelve months ended 31st December, 1947, 1,542,625 school meals were served, an increase of 210,321 over the previous year.

This increase appears to be accounted for—

- (a) by the raising of the school age from April, 1947;
- (b) by the steady maintenance throughout the year of the proportion (60 per cent.) of secondary school children having dinner at school, whereas in the previous year there had been a gradual increase from 45 to 60 per cent.; and
- (c) by the gradual increase from 40 to 50 per cent. in the proportion of primary school children having dinner.

No new kitchens have been erected or taken over during the year, but increased cooking space was made available at the end of March when the remaining British Restaurants at Devonshire Hill, Lancasterian, West Green, Page Green and Coleraine Park were closed. The kitchen at West Green was reduced in size in order to give more dining space and free the school hall for normal activities, but the equipment in all kitchens remained unaltered and has enabled the increased numbers to be catered for.

Milk.

(a) *Secondary Schools.*—In October, 1946, there were present in secondary schools 5,542 children, of whom 4,968 (89.7 per cent.) had one-third of a pint of milk daily, and in October, 1947, 5,946 children, of whom 4,534 (78 per cent.) had milk.

The proportion throughout the year has varied between 77 and 80 per cent. This is less than the peak figure of 89.65 per cent. for October, 1946, which was no doubt largely due to the fact that milk became free in August, 1946, when the number of secondary children taking milk immediately doubled. This immediate increase, however, has not been maintained. The following figures taken from the individual returns made to the Ministry illustrate this point:—

October, 1945	48.5 per cent.
February, 1946	45.39 ,,
June, 1946	45.22 ,,
October, 1946	89.65 ,,
(Milk became free in April.)	
February, 1947	77.28 per cent.
June, 1947	80.31 ,,
October, 1947	77.93 ,,

(b) *Primary Schools*.—The figure for primary schools in October, 1946, was 9,006 taking milk out of a possible 9,236 (97.5 per cent.), and in October, 1947, 9,066 out of a possible 9,403 (96.41 per cent.). The percentage figures have remained constant throughout the year.

The proportion of children in various types of school taking meals and milk in the final quarter of 1947, as shown in the return to the Ministry of Education, is as follows:—

Dinners.

Type of School.	Percentage of Roll.
Secondary ..	63.21
Primary ..	55.16
Nursery ..	100.00
Special ..	100.00

Milk.

Type of School.	Percentage of Roll.
Secondary ..	77.93
Primary ..	96.41
Nursery ..	100.00
Special ..	100.00

PHYSICAL EDUCATION IN SCHOOLS.

Organisation.

It is a pleasure to record a renewed vigour and enthusiasm for all forms of physical activity in the schools during 1947. This is in no small measure due to the influx of members of staff returned from the Forces and the addition of young teachers trained under the Emergency Training Scheme, particularly on the boys' side. Nevertheless, in spite of this, there is still a serious lack of trained specialist teachers in Physical Education. It is regarded as a minimum requirement that there should be at least one fully trained specialist teacher of Gymnastics, and one short-course specialist teacher in every secondary school. Before the war this establishment was almost general throughout the Borough in boys' schools. The war destroyed the plan and it will not be possible to regain that standard of staffing until the Physical Training Colleges have been able to put several years of students into the profession.

Experimental work on the use of new apparatus in Physical Education was begun in several infants' schools, with the installation of sets of 'Essex' Agility Apparatus. The two war-damaged gymnasia, Down Lane and Crowland, have been repaired during the year, and now all the Secondary Schools can work under the best of conditions and develop their gymnastics along modern lines.

The Tottenham Schools Sports Association maintained its fine record of enthusiastic work with the children in their out-of-school games. Athletics, football, cricket, swimming, rounders, and netball competitions were held, and despite the serious handicap of lack of good playing space, a marked increase in skill and technique was evident. Special mention should be made of the highly successful Swimming Gala and Athletic Sports held during the Summer Term, 1947. A special feature of the Sports was the visit of 50 Danish boys and girls, who, as guests of the Association, gave an excellent demonstration of the latest features of gymnastics and rhythmic work in Danish Schools.

Equipment and Clothing.

During the year, types of apparatus which had been unobtainable during the war came on the market again, though in many cases these were not of pre-war quality. The new capitation grant for

the purchase of physical training and organised games equipment is proving insufficient in view of the present high cost of such equipment, most of which is subject to purchase tax. It is hoped that the Board of Trade will make some concession in the near future on all sports and physical training equipment for schools.

The buying of all gymnastic and games shoes and clothing became the business of the new County Supplies Officer during 1947.

Tottenham received an allocation of shoes and clothing, but at the present rate it will be some years before it is possible to ensure a full supply of all items. Gymnastics and games shoes and clothing become worn out fairly quickly and the present rate of supply does little more than replace the wastage.

Storage cabinets of steel wire construction have now been ordered and should be installed in all schools needing them early in 1948.

Halls and Playgrounds.

The many uses to which school halls are now put, seriously handicaps the full implementation of the physical education programme. Particularly is this the case where the hall is used for school dinners. The setting up of tables and benches, the laying of the tables and the clearing away afterwards, seriously curtails the time available for physical training in the primary schools. This is doubly evident at the present time, since because of the bad conditions of the surfaces of many playgrounds, it is becoming increasingly necessary to conduct physical training lessons indoors. In addition, it is not possible to arrange for permanent markings for minor organised games as the crumbling nature of the surface destroys them almost at once.

Swimming.

The increased enthusiasm noted last year has been more than maintained during 1947. This is reflected in the high number of Middlesex County Swimming Certificates awarded for the year ending December 31st. The totals were—

elementary certificates	..	..	..	612
intermediate	..	..	..	101
advanced	..	..	..	12

In this connection, it should be stressed that a very high standard of style and technique is demanded by the examiners and therefore these results reflect great credit on the Swimming Instructors and Teachers concerned. The transport system inaugurated last year has been maintained and supplemented, so that only those schools situated very close to the Baths do not come into the Scheme. This has proved an added incentive to regular attendance. In fact, the position is such that it is impossible to find places in the Baths Time-table for all the children who would like to attend in the summer months. In the opinion of the Organisers of Physical Education there is a very urgent need for at least two instructional baths in this Borough.

Organised Games.

The facilities for Organised Games during the year have been very inadequate, though it has been possible to use part of the Marshes for girls' games, in addition to the part reserved for Cricket and Football. Only two schools have been able to make use of this piece of ground, owing to its inaccessibility.

It is pleasing to record that space at Down Lane Recreational Ground, Lordship Lane Recreation Ground, and Downhills Park, reconditioned since the war, are now almost ready for use, and it is anticipated that a considerably increased organised games scheme can be put into operation early in 1948.

Courses for teachers in the teaching of tennis were arranged in the County, in co-operation with the Lawn Tennis Association. It was possible to arrange for some of the girls in Secondary Modern Schools to have training in tennis and hockey. This was on a very limited scale and it is hoped with increased facilities a wider scheme can be introduced.

Recreative Physical Training.

Classes in gymnastics, keep fit, dancing, boxing, weight lifting and life-saving have been maintained in Youth Centres, Clubs and the Technical College.

Youth Netball, Cricket and Football leagues were organised and successfully completed. In order to raise the standard of play in Youth Organisations, netball, football and boxing training groups were held throughout the winter.

Lack of sufficiently qualified leaders in Physical Recreation has always prevented the full expansion of this side of the work, but during 1947 courses of training were organised for suitable young men and women to train for the new Middlesex Certificate in Recreative Physical Training. These courses are to extend over two years, and successful candidates will be eligible to give instruction in one or more branches of recreation in Clubs and Evening Institutes. The enthusiasm shown for this type of training has been very encouraging, and should result in raising the standard of work and in giving increased enjoyment in recreation to a great number of young people.

The two rehabilitation keep-fit classes for older women have had increased success during the year and their activities are now extended beyond physical recreation only. In fact, they might well form the basis of a Community Centre.

A further class for women has had a successful beginning in connection with a Parent-Teacher Association.

Special Day Schools for Handicapped Children.

(a) *Oak Lodge, Finchley—Educationally Sub-normal.*—This school continues to provide accommodation for educationally sub-normal children. The number of children on the register in 1947 was 69 (44 boys and 25 girls). Five boys and 2 girls were admitted, and 6 boys and 3 girls left during the year.

(b) *Vale Road School for Physically Handicapped Children.*—The number of pupils in attendance at this school during 1947 was 85 (47 boys and 38 girls), their ages ranging from 5 to 16 years. During the year 10 boys and 7 girls were admitted. Of these, 6 came from neighbouring boroughs.

(c) *School for Partially-sighted Children, Walthamstow.*—The number of pupils in attendance during 1947 was 11. During the year one pupil was admitted and one left.

(d) *Tottenham School for the Deaf.*—The Tottenham School for the Deaf serves all parts of Middlesex, and parts of Hertfordshire and Essex. Arrangements are made for certain groups to travel in charge of guides, other pupils being brought to school by ambulance. In certain cases, older children travel independently.

The number of pupils registered at December 31st, 1946, was 54. During the year 1947, 26 new pupils were registered and 19 left. With the final closure of the British Restaurant in March the school has been able to re-establish itself completely. The carpentry room has been restored. At Easter a nursery class was opened with great success, and the achievements of the pupils are most satisfactory. There is now in being a progressive parent-teacher association which is of particular value in enabling the parents to understand the methods employed in teaching the children and to maintain the progress of the children in their homes.

The new *School for Aphasics* opened at Oxted was visited by the School Medical Officer, an assistant Medical Officer, and the Head Teacher of the School for the Deaf. In the Spring, a film "The Education of the Deaf Child," was shown, and an address given by the Borough Education Officer on "The New Education Outlook."

Residential Special Schools.

Children certified by the School Medical Officer as in need of special educational treatment in residential schools:—

Educationally subnormal	Nil.
Blind	Nil.
Deaf	1 boy, 1 girl.
Epileptic	Nil.

Physically handicapped:—

	Boys.	Girls.
St. John's O.A. School, Woodford Bridge ..	4	—
Lord Mayor Treloar's Cripple Hospital, Alton ..	1	—
St. John's Home, Brighton	—	4
St. Vincent's Orthopaedic Hospital, Pinner ..	2	—
Royal National Orthopaedic Hospital, Stanmore	6	8
Children's Heart Home, Lancing	—	1
St. Patrick's O.A. School, Hayling Island ..	—	5
Oak Bank Open Air School, Sevenoaks	—	5
Hawkenbury Home, Tunbridge Wells	3	—
Queen Mary's Hospital, Carshalton	—	1
St. Catherine's Home, Ventnor	4	—
Pawling Home, Barnet	1	1
Victoria Home, Margate	—	1
Collington Manor, Bexhill-on-Sea	1	1
Metropolitan Convalescent Institution, Broadstairs	7	5
Metropolitan Convalescent Institution, Walton-on-Thames	1	1
St. Christopher's Home, Worthing	2	—
Brabazon Home, Redhill	—	1
Fairfield House O.A. School, Broadstairs ..	—	1
Suffolk Home, Felixstowe	—	2
St. Mary's, Haslemere	2	6
Children's Seaside Home, Exmouth	—	7
Cheyne Hospital, Sevenoaks	—	1

Physically handicapped:—

	<i>Boys.</i>	<i>Girls.</i>
Fairlight Home, Hayling Island	9	—
Wayside Convalescent Home, Rendlesham ..	—	1
Castleham Home, St. Leonards-on-Sea ..	—	2
Haldane House, Bexhill-on-Sea	1	—
Webery Home, Bideford	—	1
Anthony and Annie Miller Home	3	3
West Mersea Home	1	—
St. Michael's Home, Clacton-on-Sea	—	9
Crole Wyndenham Home	1	—
St. Peter's Home	—	1
Holiday Home, Windlesham	—	1
Omeron Home	1	1
Aston Clinton Home	—	2
St. Mary's Home, Broadstairs	—	2
Church Army Home	—	2
House of Bethany, Bournemouth	—	1
Burt Memorial Home, Bognor Regis	1	—
Sun Club, Kingsdown	1	—
St. Dominic's O.A. School, Godalming ..	1	—
Moor House	—	1
Princess Home	1	—
Hamilton House, Seaford	2	—
Totals ..	56	78

Convalescent Camp Schools.

The number of children recommended by the School Medical Officer as in need of short-term treatment during the year 1947 totalled 40, and arrangements were made for 23 of these children as follows:—

	<i>Boys.</i>	<i>Girls.</i>
West Mark School, Petersfield, Hants	3	—
Lordsfield School, Overton, Hants	8	7
Suntrap School, Hayling Island	2	3
Totals ..	13	10

Invalid Children's Aid Association.

The Association arranged during the year 1947 for 50 boys and 63 girls to receive convalescent home treatment.

Mental Deficiency Act (Statutory Notification).

During the year 1947, 4 boys and 2 girls have been notified to the Statutory Authority under the Mental Deficiency Act.

Transport.

At all Special Day Schools transport is provided, and the children are in charge of a guide.

Ear, Nose and Throat Clinic.

I am indebted to Dr. F. P. M. Clarke for the following report on the work of the Ear, Nose and Throat Department:—

The work of the Aural Clinic during the year 1947 has proceeded along the same lines as in previous years. The provision of the two "treatment clinics," at Lordship Lane and Cornwall Road, to carry out certain of the treatments prescribed has been found very satisfactory. These branch clinics are much more convenient for the children who live in these areas. There is less risk in their shorter travelling on busy roads and less time lost from school. We have found, too, during the year, that there has been a much more regular attendance amongst the school children, to complete their various treatments, no doubt due to the greater accessibility of the treatment clinics.

The most noticeable among those who "lapsed treatment" or failed to attend as requested are children under five. A probable reason is that the conditions found in this age group comprise chiefly nasal affections, such as catarrh, rhinitis, recurring colds, and mild attacks of ear-ache (without discharge), which affections, though very important to treat in their early stages, do not appear very noticeable to the parents, and as frequently happens when the child is improved after a few treatments, they then consider that he is "alright" and that he does not require any further treatment. Besides, the parent has always to attend with a child of this age and this is not always easy for the parent, so we get here a greater falling off in the completion of treatment than in the higher age groups.

We have in the past stressed the importance of treatment of any defects, particularly those of the ear or nose, in their early stages in the early school and pre-school groups, and we wish again to emphasise this advice. It will relieve a great deal of chronic affections later on.

We have employed Peters tonsil suction in a large number of cases during the year, and we are quite satisfied that this method affords a very excellent procedure for a very large number of "diseased tonsils" which are usually referred for operation. The wholesale removal of tonsils and adenoids for no other reason than they appear large, and even this becomes a matter of opinion

amongst the respective examiners, and perhaps a history of "cough" or "frequent colds," or the child "is not thriving" or he snores, needs only to be mentioned to be condemned.

A very valuable and instructive paper has just recently been published by Dr. J. Alison Glover, recently a senior medical officer, Board of Education, entitled, "The Paediatric Approach to Tonsillectomy" in the "archives of Disease in Childhood"—March, 1948. In this he covers the whole ground of tonsillectomy in children, and his able analyses and conclusions should be carefully studied by everybody who has to deal with this subject.

The audiometer is regularly employed to check up on all those cases attending the clinic who have had ear affections or are referred for deafness. The pure-tone audiometer is used at the Deaf School to determine audiograms of all those children attending, who can be tested. The gramophone audiometer is very useful in testing a number of children at the same time, to find out if there is any hearing deficiency and how much. The pure-tone machine, on the other hand, is a very specialised instrument and is qualitative as well as quantitative; it detects in what particular "frequencies" and to what extent, there is loss of hearing, but cases have to be examined separately.

Two special sessions were held at the School for the Deaf during the year, and all the children attending this school were examined for any ear, nose and throat defects; and where necessary, suitable treatment arranged for. A good deal of treatments are carried out at the school, such as diastolisation, nasal drops, certain ear treatment, etc.

We have treated during the summer season 5 cases of hay fever by nasal zinc ionisation. In all 5 cases the symptoms subsided and the patients were free of any further "attacks" of hay fever during the year. As a rule, we give a treatment once a week for four weeks, irrespective of any quiescence of symptoms following the first treatment. With careful technique, this method affords a valuable relief in hay fever, and is lasting, in a large number of instances.

The usual special Table of Returns is appended. These Tables we find very useful for a quick and accurate review of the different groups of cases; the various conditions present and the treatments carried out, and the results.

Ophthalmic Clinic.

Number of children and adolescents seen	1,452
Number who had left school	180
Errors of refraction (including squint)	1,258
Other defects or disease of the eye	46
Number of cases of Strabismus	260
Number of cases with no defect, or defect not requiring treatment	152
Number of pupils for whom spectacles were—	
(a) Prescribed	950
(b) Obtained	932

The work of the clinic has continued with increased popularity. The importance of ascertaining squint as early as possible is stressed, and in this connection special examination at Toddler Clinics has been started to discover early cases. This scheme is proving successful.

DENTAL SERVICE.

I am indebted to Mr. V. Sainty, L.D.S., Senior Dental Surgeon, for the following report:—

A comparison of this year's statistics with those of 1946 shows only minor changes; as the number of dental officers remains at four, and as there has been little change in the school population, this is as would be expected. Such differences as do occur are significant in that they show a definite improvement in the condition of the children's teeth, coupled with an increase in the acceptance rate. The following figures will confirm this statement :—

(1) Several hundred more children were inspected this year, but the percentage requiring treatment dropped from almost 60 to just over 50 per cent.

(2) The number of individual children actually treated was practically identical with that of 1946, but 1,100 more attendances were made; thus more children continued attending the clinics until completion of treatment, with consequently fewer broken appointments.

(3) The ratio of permanent teeth filled to extracted was nearly five to one as against four to one in 1946. The extraction figures include those teeth removed for orthodontic purposes.

(4) The percentage of those actually treated rose from 59.6 to 63.4 per cent. A second opportunity is always given to defaulters.

Orthodontic Cases.

Almost all are treated with appliances at the clinics, only a few difficult cases being referred to one of the dental hospitals.

General Anaesthesia.

747 administrations of nitrous oxide or trilene, mostly for infants and younger children.

In addition to the service provided for the school children, there is, of course, full inspection and treatment for all pre-school, ante-natal and nursing mothers in the Borough.

Orthopaedic Clinics.

Attendances.

Number of new cases dealt with during the year..	..	284
Total number of children treated during the year	..	420
Total number of treatments during the year	..	2,861
Total number of children examined by Orthopaedic Surgeon this year	.. .. .	305
Total number of examinations by the Orthopaedic Surgeon this year	.. .. .	611

Schedule of New Defects.

(1)* Congenital defects	.. .. .	28
(2)* Birth injuries	.. .. .	1
(3)* Rickety deformities	.. .. .	2
(4)* Knock-knees (non-rickety)	.. .. .	26
(5)* Postural defects of the spine	.. .. .	21
(6)* Structural curvature of the spine	.. .. .	6
(7)* Flat feet, footstrain, etc.	.. .. .	60
(8)* Infantile paralysis	.. .. .	7
(9)* Sequelae of acute fevers	.. .. .	1
(10)* Fractures and other injuries	.. .. .	5
(11)* T.B. joints	.. .. .	1

Schedule of New Defects.

(12)* Other bone or joint diseases (non-T.B.)	..	..	4
(13)* Osteomyelitis	..	..	1
(14)* Other conditions, including postural in-toeing	..	9	
(15)* Non-Orthopaedic	..	..	115
N.A.D.	..	..	6
<hr/>			
Total	..	..	293
<hr/>			

* R.N.O.H. Code of Defects.

Provision of Surgical Instruments.

Surgical appliances were supplied and repairs and replacements effected in 68 instances.

I am indebted to Mr. R. C. Baird, F.R.C.S., for the following report of the work of the Orthopaedic Clinic:—

The year has been notable for the epidemic of infantile paralysis, which affected a few children in this borough. The commoner defects of flat feet, knock-knee and postural deformities of the spine, have as in previous years, provided the bulk of the cases. They have responded well to treatment. This is due to the cases being referred in their early stages and also to the co-operation of the parents in bringing the children up for physiotherapy. In a few cases difficulty has arisen because of both parents being out at work and unable to bring the children for treatment, very little progress being possible in consequence. Fortunately, these cases are in a minority. I have been impressed by the good selection of cases which have been referred for orthopaedic treatment. This allows more time for examination and consideration of treatment.

The maintained low incidence of rickets and tuberculosis conditions is noteworthy, and reflects credit on the health service of the borough.

The Analysis of Orthopaedic Statistics for the past five years is as follows:—

ORTHOPAEDIC CLINIC.

New Cases dealt with at Clinic during year.	Total No. of children treated during year.	Total No. of treatments during year.	Schedule of New Defects.*															N A D
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
1943. 153	196	2,811	24	3	—	12	23	2	53	2	—	3	—	3	5	2	—	21
1944. 190	228	3,057	36	—	5	13	40	1	72	1	—	3	2	1	1	1	1	19
1945. 159	184	2,926	39	—	1	11	28	13	48	1	1	3	—	—	2	1	5	12
1946. 206	141	1,665	31	1	2	32	15	13	74	1	—	4	2	1	—	8	10	18
1947. 284	420	2,861	28	1	2	26	21	6	60	7	1	5	1	4	1	9	115	6

*R.N.O.H. Code of defects.

Hospital Treatment.

With the rapid development of medical science, there is an increasing need for special investigation which can only be carried out at hospitals. Tottenham is particularly fortunate in being within easy access of all the main London Hospitals and also in having within its boundary the Prince of Wales's General Hospital. From the point of view of the school child it is pleasant to record our gratitude to the Paediatric department at the Prince of Wales's General Hospital, whose close co-operation with the school health service has rendered invaluable assistance.

Speech Therapy.

We were unfortunate in losing the services of our speech therapist, Mrs. R. L. Heineman, in January. Difficulty has been experienced in filling this vacancy, but it is now likely that the clinic will open early in the new year. In the meantime severe cases have been seen at the speech clinic at the Prince of Wales's Hospital.

Infectious Diseases.

A number of children were affected by the outbreak of infantile paralysis. There were 6 confirmed cases among school children during the year, and at the time of the report 4 cases had made complete recovery, and the two cases remaining under treatment at the orthopaedic clinic, Lordship Lane, were progressing well, their remaining defects being of little consequence.

Rheumatism Clinic.

This clinic exists in order to facilitate the investigation and treatment of children suffering from rheumatic conditions, whether suspect or confirmed. It is our object to observe confirmed cases as long as may be necessary, extending to them, during the varying course of their disease, the varied resources of the school health service and of allied organisations. It is our hope that, in individual cases, we may supply guidance and assistance towards the achievement of good health, suitable environment, education and employment. Upon a more general plane we seek to elicit and correlate such information as will enable us to combine with all interested persons in formulating plans for the better prevention and cure of the rheumatic condition.

Attendances.

Number of children attending rheumatism clinic ..	66
New cases examined during 1947	22
Cases brought forward from 1946	44
Total attendances of 66 children under review ..	116

Environmental Conditions of 66 Children in Attendance.

Unsatisfactory home conditions (material and/or emotional)	19
Children sharing a bed	23
Marked dampness in the home	13

It is considered that no deductions may be based upon those environmental conditions in view of the widespread prevalence of unsatisfactory housing at this time, and because emotionally unsatisfactory home conditions are so often related to unavoidable material conditions of housing.

Diagnosis of 66 Children in Attendance.

Sub-acute rheumatic fever	26
Chorea (St. Vitus Dance)	7
Established mitral stenosis (rheumatic heart) ..	6
Functional heart disorder (heart symptoms without any heart disease whatever)	3
Personality affected by emotional disturbances ..	15
No abnormality found	9
<hr/>	
Total	66
<hr/>	

Confirmed cases in regular attendance, which have shown no rheumatic activity over a period of 6 months ..	5
Other confirmed cases in regular attendance, which have shown no rheumatic activity over a period of 12 months	6

Facilities Provided at Various Times during 1947 for 66 Children of Varied Diagnosis.

Medicinal treatment	31
Ultra-violet light	5
Advice only required	23
Resident open-air school	5
School for physically handicapped (Vale Road) ..	1

*Facilities Provided at Various Times during 1947 for 66
Children of Varied Diagnosis (Contd.)*

Referred to Prince of Wales's Hospital	3
Referred to schools E.N. and T. Department	1
Referred to schools physiotherapy department	1
Referred to schools dental department	3
Referred to schools minor ailments clinics	2
Referred to own doctor	2

Of the 66 children in attendance, 39 were having dinners at school, and 53 were having milk at school.

During 1947, 2 children were medically discharged, requiring no further review, and 8 children voluntarily discontinued their attendance despite invitation, based upon medical opinion, so that this attendance might continue.

As in 1946, this clinic has not been as fully supervisory as one could have wished. This must mainly be attributed to a deficiency in the provision of trained workers. The part-time services of a children's medical consultant are not yet available, the assistant school medical officers are occupied upon statutory duties which leave little time for the regular performance of this interesting and important rheumatic work. The existing school health visitors are engaged to capacity upon their established duties. An increased provision of workers, the provision of a 'hospital school' scheme, such as the Authority's provision at Hayling Island prior to the 1944 Education Act, the introduction of notification by all local doctors of acute rheumatism, might do much to increase efficiency in combating this crippling disease. Withal, however, one cannot do more than scratch the surface of the rheumatic question while present adverse home environment continues. The cure of the rheumatic condition may be mainly a medical problem, but the prevention of the rheumatic condition is as much an educational problem as it is a medical one.

Chiropodist.

For some time it has been considered that a chiropody service would be of great value both on the maternity and child welfare side and for the school children. As the result of discussion with the various departments concerned, a chiropody service will be introduced in the New Year.

Minor Ailment Clinics.

These clinics continue in their popularity and hardly deserve the name "minor." Children attend with all and every sort of complaint, both physical and mental. They are referred for opinion by school teachers or are brought by their parents for consultation. The attendance of parents with them is as excellent as it is invaluable to the doctor in giving advice, and provides an opportunity for health educational instruction. Some parents who are in employment find difficulty in obtaining leave to attend the clinics with their children, and it is thought that the attendance card which every child possesses might be used with value by the parent to dispel any anxiety of defaulting which may arise in managerial minds. Whereas the urgency of our production drive is only too painfully manifest, it must be realised that a parent's first responsibility is to the health of its offspring.

Another valuable aspect of the larger attendances at these clinics is that a fair proportion of children in all age groups are seen during the year, thus augmenting the statutory school inspections.

The result of penicillin cream in shortening the period of disability and infection in impetigo is paramount.

Health Education.

During the year courses have been held at the clinics for school leavers, consisting of lecture demonstrations in the care of babies and the principles of child health. By arrangement with the schools, some of the girls in their final year have been enabled to attend the Borough day nurseries on Saturday mornings, thereby gaining valuable experience in the care and management of the young child.

At all the clinics every opportunity is taken by the medical staff to inculcate knowledge aimed at improving the health standard of our community. Talks by health visitors and school nurses and the provision of pamphlets have played their part in the dissemination of the ways and means of preventing disease and maintaining good health. The value of the friendly advice given in the homes of the people by the health visitors and school nurses in the course of their duties cannot be overestimated.

Mothers have attended lecture demonstrations at Park Lane on cooking and dietary, including the hygienic storage and preparation of foods.

Next year it is hoped to provide a series of films on matters of health educational interest.

School Medical and Dental Staff.

TABLE VI.—SCHOOL MEDICAL AND DENTAL STAFF.

Name of Officer.	Proportion of whole time devoted to	
	School Medical Service.	Public Health.
School Medical Officer:— Dr. G. Hamilton Hogben	Administrative	—
Deputy School Medical Officer:— Dr. B. Broadbent (left December, 1947)	1/6th	5/6ths
Senior Assistant Medical Officer:— Dr. S. Leff (left May, 1947)	Whole-time	—
Assistant School Medical Officers:— Dr. Nora A. M. Webster Dr. J. Crammond Dr. P. A. Tyser	Whole-time " " " "	— — —

Senior Dentist:—V. Sainty, L.D.S.

Dentists:—A. E. Fisher, B.D.S.

Miss M. C. Dixon, L.D.S.

Miss E. M. McRaith, L.D.S.

NOTE.—2/3rds of the services of one Dental Unit is apportioned to The Maternity and Child Welfare Committee.

School Nursing Staff.

(Excluding Specialist Nurses such as Orthopaedic Nurses).

	Number of Officers.	Aggregate of time given to S.M.S. work in terms of whole-time Officers.
School Nurses ..	9	Whole-time
District Nurses ..	—	—
Nursing Assistants*	—	—
Dental Attendants	4	See Note above under Dentists.

*This term refers to untrained assistants described in paragraph 3 of Circular 1604.

TABLE I.—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS.

A.—*Periodic Medical Inspections.*

Number of Inspections in the prescribed Groups:

Entrants.. .. .	1,467
Second Age Group	1,691
Third Age Group	1,008
Total	4,166
Number of other Periodic Inspections	1,874
GRAND TOTAL	6,040

B.—*Other Inspections.*

Number of Special Inspections	4,777
Number of Re-Inspections	14,799
TOTAL	19,576

C.—*Pupils Found to Require Treatment.*

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION
TO REQUIRE TREATMENT (excluding Dental Diseases and Infestation
with Vermin).

Group (1)	For defective vision (excluding squint). (2)	For any of the other conditions recorded in Table IIA. (3)	Total individual pupils. (4)
Entrants	8	169	172
Second Age Group	117	164	263
Third Age Group	72	85	124
Total (prescribed groups)	197	418	559
Other Periodic In- spections.. .. .	46	218	244
GRAND TOTAL	243	636	803

TABLE II.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31ST DECEMBER, 1947.

Defect Code No.	Defect or Disease	Periodic Inspections		Special Inspections	
		No. of defects		No. of defects	
		Requiring treatment	Requiring to be kept under ob- servation, but not requiring treatment	Requiring treatment	Requiring to be kept under ob- servation, but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin...	32	—	865	2
5	Eyes—				
	a. Vision ..	243	31	38	—
	b. Squint ..	20	1	13	—
	c. Other ..	19	—	226	—
6	Ears—				
	a. Hearing ..	18	—	31	—
	b. Otitis Media..	28	5	147	—
	c. Other ..	31	1	109	—
7	Nose or Throat ..	203	55	734	2
8	Speech ..	7	4	16	—
9	Cervical Glands ..	5	—	32	—
10	Heart & Circulation	26	22	130	—
11	Lungs ..	29	16	220	16
12	Developmental—				
	a. Hernia ..	1	2	—	—
	b. Other ..	—	—	—	—
13	Orthopaedic—				
	a. Posture ..	31	19	23	—
	b. Flat foot ..	49	17	35	—
	c. Other ..	26	8	12	1
14	Nervous system—				
	a. Epilepsy ..	—	1	9	1
	b. Other ..	8	1	44	1
15	Psychological—				
	a. Development..	—	—	29	—
	b. Stability ..	2	—	243	1
16	Other ..	91	33	1638	4

B.—CLASSIFICATION OF THE GENERAL CONDITIONS OF PUPILS
INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups	Number of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants..	1,467	99	6.8	1,300	88.6	68	4.6
Second Age Group	1,691	121	7.2	1,493	88.3	77	4.5
Third Age Group	1,008	148	14.6	822	81.7	38	3.7
Other Periodic Inspections ..	1,874	150	8.0	1,681	89.7	43	2.3
Total ..	6,040	518	8.6	5,296	87.7	226	3.7

Group V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY.

No. of children treated (a) under Child Guidance arrangements ..	16
(b) under Speech Therapy arrangements ..	4

TABLE IV.—DENTAL INSPECTION AND TREATMENT.

(1) No. of children inspected by Dental Officers:	
(a) Periodic Age Groups	15,513
(b) Specials	1,282
(c) Total (Periodic and Specials)	16,795
(2) No. found to require treatment	8,916
(3) No. actually treated	5,650
(4) Attendances made by Children for treatment	11,107
(5) Half-days devoted to:—	
(a) Inspection	94
(b) Treatment	1,351
TOTAL (a) and (b)	1,445
(6) Fillings:— ..	
Permanent Teeth	3,714
Temporary Teeth	978
TOTAL	4,692
(7) Extractions:—	
Permanent Teeth	825
Temporary Teeth	6,364
TOTAL	7,189
(8) Administrations of general Anaesthetics for Extractions ..	747
(9) Other Operations:—	
(a) Permanent Teeth	1,112
(b) Temporary Teeth	1,240
TOTAL (a) and (b)	2,352

TABLE V.—INFESTATION WITH VERMIN.

(1) Total number of examinations of children in the Schools by School Nurses or other authorised persons	71,251
(2) No. of individual children found unclean	1,274
(3) No. of individual children in respect of whom cleansing notices were issued (Sec. 54(2) Education Act, 1944) ..	170
(4) No. of individual children in respect of whom cleansing orders were issued (Sec. 54(3) Education Act, 1944) ..	16

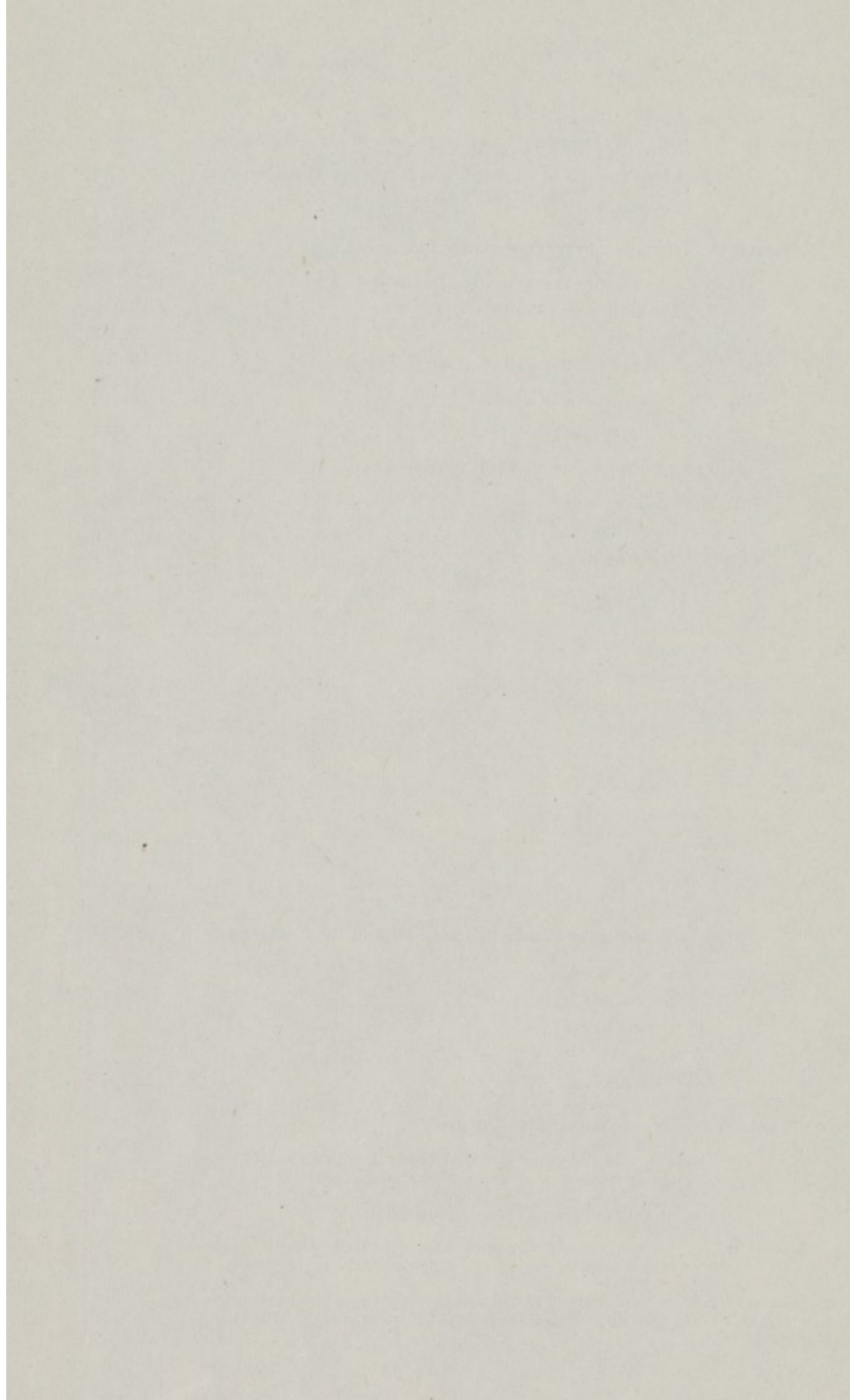


TABLE "A"

ACUTE OTITIS MEDIA.
SCHOOL CHILDREN.

DIAGNOSIS.	Total (Ears).	Tonsils and Adenoids.		TREATMENT.				RESULTS.					
				Zinc Ionisation.	Antiseptic Treatment.	Tonsils & Adenoids Treatment: Nasal Treatment, etc.	Tonsils & Adenoids Operation.	Cured.	Improved.	Still under Treatment or Observation.	Left School or Treat- ment Lapsed.	Referred to Hospital for Operation.	Did not Attend or Declined Treatment.
	A	B		C	D	E	F	G	H	I	J	K	L
Acute Non-Suppurative Otitis Media ..	17	5	Operation before Clinic	—	5	—	—	5	—	—	—	—	—
		12	No Operation	—	12	—	—	12	—	—	—	—	—
Acute Non-Suppurative Otitis Media with Nasal Conditions: Enlarged Tonsils and Adenoids.	3	0	Operation before Clinic	—	—	—	—	—	—	—	—	—	—
		3	No Operation	—	3	2	—	2	—	—	1	—	—
Acute Suppurative Otitis Media	37 (2)	6	Operation before Clinic	2	6	—	—	6	—	—	—	—	—
		31	No Operation	3	30	—	—	30	—	—	—	—	1
Acute Suppurative Otitis Media with Nasal conditions: Enlarged Tonsils and Adenoids	16 (1)	—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—
		16	No Operation	2	16	11	1	14	—	1	—	—	1
TOTALS	73			7	72	13	1	69	—	1	1	—	2

PRE-SCHOOL CHILDREN.

Acute Non-Suppurative Otitis Media ..	12 (1)	1	Operation before Clinic	—	1	—	—	1	—	—	—	—	—
		11	No Operation	—	11	4	—	11	—	—	—	—	—
Acute Suppurative Otitis Media	11 (2)	—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—
		11	No Operation	—	10	—	—	10	—	—	—	1	—
Acute Suppurative Otitis Media with Nasal Conditions: Enlarged Tonsils and Adenoids	—	—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—
		—	No Operation	—	—	—	—	—	—	—	—	—	—
TOTALS	23			—	22	4	—	22	—	—	—	1	—
GRAND TOTALS	96			7	94	17	1	91	—	1	1	1	2

The figures in brackets indicate the number of cases with Bi-lateral Otorrhoea.

TABLE "A"

No.	Name	Age	Sex	Religion	Marital Status	Occupation	Education	Income	Assets	Liabilities	Net Worth	Comments
1	John Doe	35	M	Protestant	Married	Teacher	High School	\$12,000	\$15,000	\$5,000	\$10,000	
2	Jane Smith	28	F	Catholic	Single	Nurse	College	\$8,000	\$10,000	\$2,000	\$8,000	
3	Robert Johnson	45	M	Jewish	Married	Engineer	University	\$18,000	\$25,000	\$7,000	\$18,000	
4	Mary White	52	F	Methodist	Widowed	Homemaker	High School	\$6,000	\$8,000	\$2,000	\$6,000	
5	William Brown	30	M	Buddhist	Single	Software Developer	College	\$15,000	\$20,000	\$5,000	\$15,000	
6	Elizabeth Green	40	F	Anglican	Married	Librarian	University	\$10,000	\$12,000	\$2,000	\$10,000	
7	James Black	25	M	Muslim	Single	Student	College	\$4,000	\$5,000	\$1,000	\$4,000	
8	Sarah Lee	38	F	Hindu	Married	Accountant	High School	\$9,000	\$11,000	\$2,000	\$9,000	
9	Michael King	42	M	Sikh	Married	Manager	College	\$11,000	\$13,000	\$2,000	\$11,000	
10	Patricia Hall	55	F	Orthodox	Widowed	Retired	High School	\$7,000	\$9,000	\$2,000	\$7,000	

TABLE "B" CHRONIC SUPPURATIVE OTITIS MEDIA. SCHOOL CHILDREN.

DIAGNOSIS.			Totals (Ears).	DIAGNOSIS.						Tonsils and Adenoids.	TREATMENT.					RESULTS.					
Chronic Tympanic Sepsis, Complicated by:—				Granulations: Simple Polypi.	Mastoid Disease.		Enlarged Tonsils and Adenoids.	Nasal Catarrh: Rhinitis: Sinusitis.	External Otitis, Eczema.		Primary (Ear).			Collateral (Nose and Throat).		Cured.	Improved.	Still under Treatment: Observation.	Left School or Treatment Lapsed.	Referred to Hospital for Operation.	Did not attend or Declined Treatment.
					Old Operation.	No Operation.					Ionisation.	Antiseptic Treat- ment. Cautery, etc.	Mastoid Operation.	Tonsils/Adenoids. Conservative Treat- ment. Nasal Treatm.	Tonsils and Adenoids Operation.						
				A	B	C	D	E		F	G	H	I	J	K	L	M	N	O	P	
SCHOOL.	A	Granulations: Simple Polypi ..	7 (1)	2	3	—	—	—	Operation before Clinic	4	3	—	—	—	2	—	2	—	1	—	
				1	—	—	—	1	No Operation	1	—	—	—	—	—	—	1	—	—	1	
	B	Mastoid Disease	12 (3)	—	5	3	—	—	Operation before Clinic	7	7	—	1	—	2	2	1	—	3	—	
				—	—	4	—	—	No Operation	4	3	—	—	—	—	1	1	—	2	—	
	C	Enlarged Tonsils and Adenoids ..	2	—	—	—	—	—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	
				—	—	—	2	—	No Operation	1	—	—	1	—	1	—	—	—	1	—	
	D	Nasal Catarrh: Rhinitis: Sinusitis ..	7 (1)	—	—	—	—	2	Operation before Clinic	2	—	—	—	2	—	2	—	—	—	—	
				—	—	—	—	5	No Operation	4	1	—	—	2	—	3	—	1	—	1	
	E	External Otitis: Eczema	—	—	—	—	—	—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	
				—	—	—	—	—	No Operation	—	—	—	—	—	—	—	—	—	—	—	
Chronic Suppurative Otitis Media, solely ..		20 (6)							10	Operation before Clinic	9	—	—	—	—	9	—	—	—	1	
									10	No Operation	8	—	—	—	—	8	—	1	—	1	
TOTALS (SCHOOL)			48	3	8	7	2	8	—		40	14	—	6	—	27	3	7	—	7	4
PRE-SCHOOL CHILDREN.																					
PRE-SCHOOL.	Chronic Suppurative Otitis Media, solely ..		1							—	Operation before Clinic	—	—	—	—	—	—	—	—	—	
										1	No Operation	—	1	—	—	—	1	—	—	—	—
	Chronic Suppurative Otitis Media, with Nasal Conditions: Tonsils/Adenoids ..		2 (1)	—	—	—	—	—	—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—
				2	—	—	—	—	2	No Operation	—	2	—	—	—	2	—	—	—	—	—
	TOTALS		3	2	—	—	—	—	—		—	3	—	—	—	3	—	—	—	—	—
GRAND TOTALS			51	5	8	7	2	8	—		40	17	—	6	—	30	3	7	—	7	4

Figures in Brackets—Cases of Bi-Lateral Otorrhoea or Mastoid.

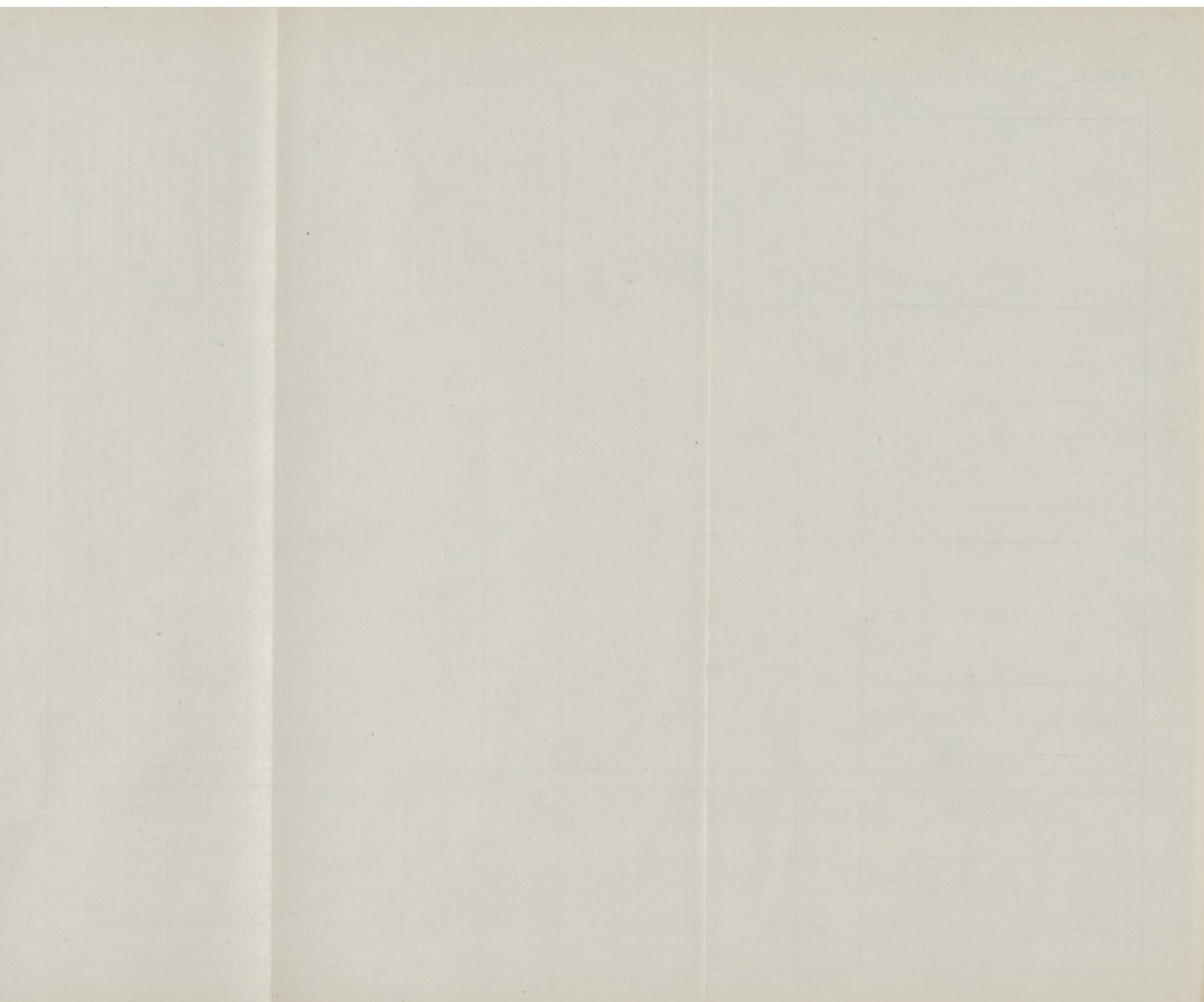


TABLE "C"

NOSE AND THROAT CONDITIONS.
SCHOOL CHILDREN.

DIAGNOSIS. Primary Conditions.	Totals.	Tonsils and Adenoids.		SECONDARY CONDITIONS.				TREATMENT.				RESULTS.						
				Otitis Media.	Deafness.	Nasal Catarrh, etc.	Enlarged Tonsils and Adenoids.	Diastolisation.	Antiseptic Treatment.	Proetz Displacement.	Tonsils and Adenoids.		Cured.	Improved.	Still under Treat- ment or Observation.	Left school or Treatment Lapsed.	Referred Hospital for Operation.	Did not attend or Declined Treatment.
											Conservative Treatment.	Operative Treatment.						
A	B	C		D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
Sinusitis: Rhinitis	57	Operation before Clinic	8	1	1	—	—	4	5	7	—	—	6	—	—	1	—	1
		No Operation	49	—	2	—	6	12	34	40	6	—	34	3	4	4	2	2
Nasal Obstruction: Rhinitis ..	142	Operation before Clinic	24	2	4	—	—	21	8	—	—	—	16	1	1	2	—	4
		No Operation	118	5	8	—	18	62	61	7	14	—	56	16	2	33	1	10
Nasal Catarrh	156	Operation before Clinic	34	1	6	—	—	27	6	—	—	—	21	2	2	8	—	1
		No Operation	122	3	12	—	14	78	38	—	11	—	59	15	7	28	—	13
Enlarged Tonsils and Adenoids ..	71	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		No Operation	71	2	1	16	—	5	11	—	41	1	27	5	6	4	24	5
TOTALS (school)	426			14	34	16	38	209	163	54	72	1	219	42	22	80	27	36

PRE-SCHOOL CHILDREN.

Nasal Conditions: Sinusitis: Rhinitis.	27	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		No Operation	27	—	—	—	5	1	26	—	5	—	14	5	—	8	—	—
Enlarged Tonsils and Adenoids ..	12	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		No Operation	12	—	—	—	—	—	—	—	12	—	6	1	—	1	4	—
Enlarged Tonsils and Adenoids with Nasal Conditions	4	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		No Operation	4	1	—	—	—	3	—	3	—	1	—	—	1	—	—	—
TOTALS (Pre-school)	43		1	—	—	5	1	29	—	20	—	21	6	—	10	6	—	—
GRAND TOTALS	469		15	34	16	43	210	192	54	92	1	240	48	22	90	33	36	—

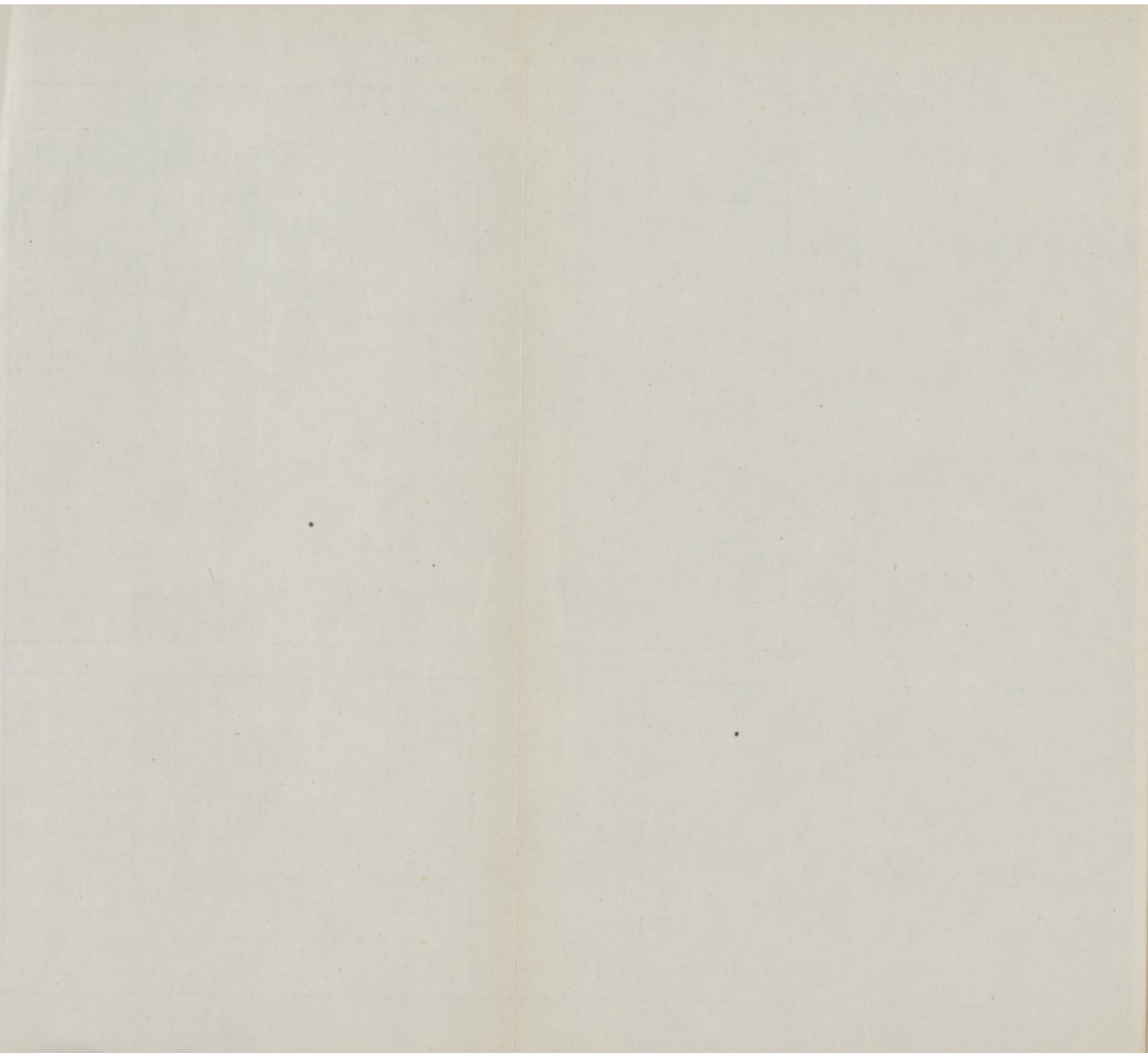


TABLE "D" MISCELLANEOUS.

Conditions.	Total	Tonsils/ Adenoids previously removed.	Pre- school	
Examined for:— Affections of the ear, nose, throat: special cases of deaf- ness for admission to special classes, or Deaf School: re- examination: observation of cases previously treated: colds and other conditions	116	18	11	Advised: recommendations and reports made: clinic treatment not required.
Epistaxis	16	5	—	Treated.
Furuncle of ear	5	1	—	Treated.
Wax in ears	9	—	—	Removed.
Hay Fever	6	1	—	Nasal Zinc Ionisation.
Eczema of ears	3	—	—	Treated.
Totals	155	25	11	

SUMMARY.

Total number of cases seen in 1947	771
School	690
Pre-school	81

"A" and "B" Ear cases:—

School	121
Pre-school	26

"C" Nose and Throat:—

School	426
Pre-School	43

"D" Miscellaneous:—

School	144
Pre-school	11

PUBLIC HEALTH AND SANITARY CIRCUMSTANCES.

General Provisions of Health Services.

Hospitals.

General hospital services are provided at the Prince of Wales's Hospital, which is centrally situated within the borough and to which the Council contribute annually an amount equal to a $\frac{1}{2}$ d. rate. Provision is also made at the North Middlesex County Hospital, in the adjoining Borough of Edmonton, and a short distance beyond the northern boundary of Tottenham.

The Teaching and Specialist Hospitals of London are within easy access.

Diabetes.

Insulin is supplied to necessitous persons suffering from Diabetes in accordance with the authority contained in Ministry of Health Circular 2734 (1943).

Number of cases supplied	..	..	..	39
Cost to local authority	..	..	..	£187 14s. 6d.

It is interesting to note that in 1942, when the Ministry's approval had to be obtained annually, and before greater publicity was given to the scheme after receipt of Circular 2734, only 11 patients were supplied with Insulin, at a cost of £52 12s. 8d.

Tuberculosis.

There was a decrease in the incidence of Tuberculosis, 189 new cases being recorded as compared with 222 the previous year. Notification of pulmonary cases totalled 171, and non-pulmonary 18.

There were 975 cases on the department's register on the 31st December, 1947, 808 being pulmonary and 167 non-pulmonary.

Death from pulmonary tuberculosis occurred in 62 cases, in the proportion of 39 males to 23 females; and in the case of non-pulmonary tuberculosis, 9 deaths were notified, 3 being males and 6 females.

The death rate from all forms of tuberculosis was 0.55 per 1,000 population, which is slightly lower than the corresponding figures of 0.79 for 1945 and 0.68 for 1946.

Summary of Tuberculosis Cases.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	Males	Females	Males	Females	Males	Females	Males	Females
Under 1 year	—	—	—	—	—	—	—	—
1 to 5 years	3	1	2	1	1	—	—	2
5 to 15 „	11	3	3	—	—	—	1	1
15 to 25 „	29	27	3	3	3	5	1	3
25 to 35 „	28	15	4	—	11	7	1	—
35 to 45 „	13	13	—	1	4	3	—	—
45 to 55 „	7	1	—	—	9	2	—	—
55 to 65 „	11	1	—	—	6	4	—	—
65 years and upwards ..	7	1	—	1	5	2	—	—
Totals ..	109	62	12	6	39	23	3	6

Non-pulmonary cases affecting:—

	Male.	Female.	Total.
Genito-urinary system	5	1	6
Spine	1	3	4
Hip Joint	2	—	2
Leg	1	—	1
Peritoneum	1	—	1
Cervical glands	1	—	1
Meninges	—	2	2
Mediastinal glands.. ..	1	—	1
	—	—	—
	12	6	18
	—	—	—

Diphtheria.

Notifications of Diphtheria totalled 22, all but two being children under 15 years of age. Hospital treatment was afforded in every case, and for the second year in succession *no death* occurred from this disease.

Scarlet Fever.

Fewer cases of Scarlet Fever were notified than in the previous year, the figures being:—

1946	323
1947	272

Home treatment of Scarlet Fever continued satisfactorily, and less than 50 per cent. of the cases notified were removed to hospital.

Measles.

There was no diminution in the incidence of Measles, and hospital treatment is becoming necessary for an increasing number of complicated cases. In 1947, 73 cases were treated in isolation hospital, compared with 31 the previous year. Notifications totalled 1,227.

Scabies.

There was a marked decrease in the incidence of Scabies, as compared with preceding years since 1944, when compulsory notification (commenced in December, 1943) made it possible to exercise greater control over this disease.

The comparative figures are:—

1944	697 cases
1945	709 ,,
1946	591 ,,
1947	189 ,,

Cleansing facilities were afforded at the Public Cleansing Station, Markfield Road, and the Municipal Health Centres.

1947—Age and sex distribution	Males	Females	Total.
Under 15 years of age	42	50	92
Over 15 years of age	45	52	97
Totals	87	102	189

Laboratory Facilities.

Facilities for Public Health Bacteriology are now provided by the National Laboratory Service, and all bacteriological specimens received at the Tottenham Public Health Department are examined at The Central Public Health Laboratory, Colindale, Hendon.

Specimens are collected daily at 3.30 p.m., from Monday to Friday, and at 11.30 a.m. on Saturday. There is no collection on Sunday, and a reduced service operates over the bank holiday periods.

Record of Examinations.

<i>Throat/Nose Swabs</i> : Total Specimens	1,131
Diphtheria Bacilli	15
Haemolytic Streptococci	302
Vincent's Angina	16
Negative	808
<i>Faeces</i> : Total Specimens	39
Shigella	—
Salmonella	8
Protozoa	3
Negative	28
<i>Sputum</i> : Total Specimens	44
T.B. Smear	9
Other Organisms	1
Negative	34
<i>Pertussis</i> : Total Specimens	73
Cough Plate	—
Post-nasal Swab	9
Negative	64
<i>Milk</i> : Total Specimens	28
Pasteurised	2
Other	3
Ice Cream	23
<i>Water</i> : Total Specimens	14
Domestic Supplies, etc.	2
Swimming Pools	5
Miscellaneous	7
Total number of Specimens	1,329

In addition, 4 samples of water from The Lido Swimming Pool were submitted to the County Analyst for chemical examination. The result was satisfactory in each case.

Disinfection and Disinfestation.

Disinfection of bedding after infectious disease is carried out in the steam disinfector at the Council's Cleansing and Disinfecting Station, situated at Markfield Road; whilst the infected rooms at the houses affected are sprayed with formaldehyde fluid.

Bedding is also disinfected before removal to houses on the Council's Estates.

The use of D.D.T. for disinfesting verminous rooms continues to give satisfactory results.

Disinfection Work.

Number of rooms disinfected after Diphtheria, Scarlet Fever, etc.	475 rooms.	
Number of houses where bedding was disinfected	After Infectious Disease 415	Before Removal to Council Houses 41
	456 houses	
Hospital Wards and/or schools disinfected ..	19	
Verminous rooms cleansed (including disinfestation with D.D.T.)	Private Houses 723	Council Houses 109
	832 rooms	
Library Books disinfected	157	

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.

The Borough water supply is obtained from the Metropolitan Water Board, and continues to be satisfactory. There are also several deep and shallow wells situated on factory premises, and these are kept under regular observation. The water is tested when necessary.

Drainage and Sewerage.

The district is drained on the dual system of soil and surface water. Soil sewage is pumped into the London County Council system from the sewage works situated at the south-east end of the district. Surface water flows into various streams and then to the River Lee. Complaints regarding pollution of the Lee through these streams have been dealt with in collaboration with the Borough Engineer's Department.

Closet Accommodation.

Closet accommodation in the Borough is on the water carriage system, but it is of some concern that adequate provision is not always made at the numerous small factory or industrial premises which seem almost to "spring up over night." In many such cases closet accommodation is non-existent, and it is to be hoped that more effective action can be taken under Town Planning powers, to prevent this mushroom growth.

Sanitary Administration.

The development of legislation dealing with the environmental life of the community, has been a gradual process. Commencing in 1848, the Public Health Act of that year has been regarded as the genesis of modern public health legislation, continuing by way of new Acts and amendments until 1936. The most notable legislation prior to 1936, was the Act so often described as the "Great Charter of Public Health," viz., The Public Health Act, 1875.

Between the years 1875 to 1936, various Acts and amendments were passed, but in 1936, Royal assent was given to the Public Health Act, 1936, and this Act continues to be the basis of the work carried out by the department in relation to general public health matters.

Legislation dealing with specific subjects also provides a basis for work in connection with housing, food and food premises, and factories. These Acts include the Housing Act, 1936, Food and Drugs Act, 1938, Factories Act, 1937, together with subordinate legislation too numerous to mention, but all aimed at securing improvement in the environmental conditions of the public.

In each and every annual report for this borough, statistics have shown that improvements have taken place and progress maintained.

Each year we have looked forward—not without justification for our optimism—to advancement to even higher standards of public health. But with the outbreak of World War II in 1939, we experienced a set-back which, in terms of public health endeavour, will take some considerable time to overcome. The war period, whilst providing facilities for scientific advancement, particularly in the field of curative medicine, brought to a halt much of the progress associated with environmental hygiene. Endeavours in this direction were directed to other purposes more appropriate to the material need of the time.

Since the end of the war, efforts have become choked by considerations of national economy, particularly in terms of labour and material.

No statistical presentation can convey the unhappiness and feelings of frustration arising from inadequate housing, and in whatever direction the department's activities were concentrated, restrictions to progress had to be contended with. Demands for repairs, improvements or other desirable changes, are impeded by shortage of labour, difficulty in obtaining materials required, and restrictive licensing regulations. Any efforts to bring about improvement in atmospheric pollution too are met with objections, such as the difficulty arising from coal shortages and the consequent use of substitute fuel of inferior quality.

The administration of the sanitary services has kept abreast of legislative changes. This new legislation has increased the duties imposed on local authorities, with the inevitable increase of staff over the years. Nevertheless, the record of work in regard to sanitary administration for the year under review, presented in these pages, in no way indicates the full efforts necessary to accomplish such results.

The increased activities of the technical officers are reflected in the volume of work produced in the office, and a comparison of the statistical information of this report and those for previous years, will clearly indicate the measure of this increase.

Dissemination of public health knowledge, and information regarding the departmental activities, have been carried out by means of talks to various organisations.

Housing.

In my Annual Reports for the last few years I have continued to stress the magnitude of the housing question. The housing problems confronting the department have continued to increase, and in re-iterating the statement contained in my 1946 Report, that "the problem is assuming greater importance each succeeding year," I must add that not only is it greater in importance but greater in proportion. The task of providing housing for the hundreds of families created and extended since the war, referred to in my Report for the year 1942 as the main housing problem, has been pursued with diligence, but the hardships having to be endured by these small families in the meantime is a cause of very great anxiety to the Council.

Licensing restrictions continue to operate, preventing a great deal of work being done voluntarily by property owners. Justifiable tribute can be paid to the forbearance of many tenants who are deserving of better-maintained dwellings.

Housing Act, 1936, Section 11.

During the year Demolition Orders were made with respect to the following 5 dwelling-houses, namely:—

- No. 92, Church Road.
- No. 8, Railway Terrace, Arthur Road.
- No. 12, Railway Terrace, Arthur Road.
- No. 14, Railway Terrace, Arthur Road.
- No. 136, High Cross Road.

In addition, the local authority accepted undertakings that the following premises would cease to be used for human habitation, namely:—

- No. 21, Hale Gardens.
- No. 23, Hale Gardens.
- No. 25, Hale Gardens.

One other property was represented for demolition, but the owners were successful in an appeal to the County Court, the Judge quashing the Order. The premises concerned were No. 86, High Cross Road.

In view of the acute housing shortage, there is considerable reluctance in making representations under these powers. I am bound to point out, however, that there are many more houses, the majority of them occupied, which are rapidly deteriorating into a condition that will render demolition order procedure inevitable at no distant date.

Housing Act, 1936, Sections 9 and 10.

Reference to statistics will show that there has been no diminution in the energy which is being applied to securing the repair of insanitary houses. It is unfortunate that the results in no way compensate for the effort expended. The Government have adhered to their policy that new houses must come first, and that works of repair, however badly needed, must continue to be deferred. This policy is emphasised by the restrictions on the availability of materials and the reduction of the "monetary quota" available to local authorities for licensing building works.

It will also be seen that there has again been a substantial increase in the value of work done by the Council in owners' default, through the medium of private builders. The reason for this may not at first sight be manifestly clear. But notwithstanding licensing restrictions, all licensing applications in respect of work required by statutory notices issued from the Public Health Department receive immediate priority. It may well be, therefore, that knowing the difficulty in obtaining labour and materials, owners are content to leave this problem to the officers of the local authority, with the result that the work is carried out in default and supervised by the Sanitary Inspectors at no extra cost to the owners.

Public Health Act, 1936, Sections 92-4.

There has been a noticeable increase in the number of notices served for the abatement of nuisances under the appropriate provisions of the Public Health Act. Procedure under this part of the Act has generally been followed where the particular properties are situated in areas where future action is contemplated under the Town and Country Planning Act, or Part III of the Housing Act. A Magistrate's Order has been obtained in all cases where legal proceedings have been necessary to secure compliance with nuisance notices.

Inspections Carried out by the Sanitary Inspectors, and Defects Remedied.

House-to-House Inspections	15
Infectious Disease	296
Complaints Investigated	6,285
Re-inspections	6,304
Factories	361
Workplaces	60
Dairies, etc.	114
Slaughter-houses	24
Bakehouses	67
Public House Urinals	74
Stables and Mews	43
Fruiterers, etc.	111
Fish Shops	78
Butchers Shops	241
Other Food Premises	711
Outworkers	226
Small Dwellings Acquisition Acts	15
Appointments and Interviews	939
Other Visits	1,411
Drains tested	232
Drains defective	142
Drains reconstructed	44
Drains repaired	237
Drains cleared	261
W.C. cisterns repaired or renewed	394
W.C. pans renewed	493
W.C. pans cleansed	63
Waste-pipes repaired or renewed	268
Rain-water pipes repaired or renewed	827
Roofs repaired or renewed	1,746
Eaves gutters repaired or renewed	1,225
Drinking-water cisterns renewed	51
Drinking-water cisterns covered	29
Water service pipes repaired	189
Water supply reinstated	72
Yards repaired or reconstructed	200
Sinks renewed or provided	144
Floors repaired or renewed	834
Floors ventilated	325

Inspections carried out, etc.—*contd.*

Dampness remedied—

by insertion of damp-proof courses	317	
by pointing brickwork	279	
by internal rendering	586	
by miscellaneous remedies	163	1,345
Window frames and sashes repaired or renewed or painted	850	
Coppers repaired or renewed, or provided	64	
Fireplaces, stoves and ovens repaired or renewed ..	756	
Flues and chimney-stacks repaired	211	
Brickwork of walls repaired and walls rebuilt ..	182	
Ventilated food stores provided	20	
Rooms cleansed	2,202	
Staircases, passages and landings cleansed	290	
Staircases, balconies and steps repaired or renewed ..	168	
Noxious accumulations removed	31	
Nuisances from animals abated	19	
Miscellaneous defects remedied	1,148	
Wall plaster repaired	1,593	
Ceiling plaster repaired	1,605	

Notices Served.

Informal 3,974

Statutory—

Housing Act, 1936, Section 9 1,355

Public Health Act, 1936—

Section 39 49

Section 24 18

Section 93 169

Section 45 30

Section 79 8

Tottenham Urban District Council Act, 1900,
Section 48 9

Total 1,638

Repair of Houses by the Council.

Work carried out in default and by agreement in respect
of orders given to builders in 1947:—

	£.	s.	d.
Section 9, Housing Act, 1936 — 241 premises:	14,272.	16.	9
Section 39, Public Health Act, 1936.. .. — 16 premises:	287.	14.	7
Section 45, Public Health Act, 1936.. .. — 9 premises:	95.	7.	2
Section 93, Public Health Act, 1936.. .. — 2 premises:	265.	10.	1
Section 79, Public Health Act, 1936.. .. — 11 premises:	5.	0.	3
Section 48, Tottenham Urban District Council Act, 1900— 36 premises:	57.	16.	9
Work carried out for mainten- ance of public sewers (Sec- tion 24, Public Health Act, 1936) — 41 premises:	798.	16.	1
	<hr/> £15,783. 1. 8 <hr/>		

RODENT CONTROL.

The Chief Sanitary Inspector reports as follows:—

Block Control Treatment.

The ‘‘Block Control’’ treatment of the Borough, carried out in accordance with Ministry Circular N.S.12, was completed in July. This treatment, which was commenced in October, 1946, was described fully in my 1946 Report, but I am now able to publish the following statistical summary of the results:—

Number of Premises circularised with questionnaire as to rat infestation	25,333	
Number of replies received complaining of rat infestation	2,620	
Number of points pre-baited	Houses 6,456	Factory Premises 1,383 7,839
Estimated number of rats killed	Houses 15,286	Factory Premises 7,377 22,663

The sixth treatment of sewers was carried out during June and July, with the following results:—

Number of Treatments.			
Manholes with small poison takes	..	..	226
Manholes with good poison takes	..	..	161
Manholes with complete poison takes	..	..	60
Manholes with no poison take	..	..	666
Total number of manholes baited	..	..	1,113
Estimated number of rats killed	..	..	3,558

DWELLING-HOUSES AND BUSINESS PREMISES TREATED APART FROM THE SPECIAL SCHEME.

(1) Dwelling-houses	..	..	645
(2) Business and Factory Premises	..	..	94
(3) Total charges for (2) above	..	..	£61 15s. 4½d.

Housing Lettings.

Departmental responsibility for housing lettings ceased mid-way through the year, with the appointment of an independent housing manager under the administration of the Town Clerk's Department.

Applications for the three and four-bedroomed type houses being erected on the Asplins and Allington Estates were then being investigated, and applicants interviewed by the lettings Committee.

The Public Health Department continues to investigate and report upon housing applications made by Tottenham residents to other local authorities, at the request of such authorities (mainly the London County Council), with particular reference to overcrowding.

HOUSING PROGRESS.

New Houses and Flats provided under Housing Legislation, since 1919.

	Houses.	Flats.	Total.
Housing Act, 1919	428	—	428
Housing Act, 1924	362	25	387
Housing Act, 1930 (Slum Clearance)	316	40*	356
Housing Act, 1936 (Slum Clearance)	36	—	36
	1,142	65	1,207

HOUSING PROGRESS—*contd.*

Houses completed on the Asplins Estate during 1947	28	—	28
Houses completed on the Allington Estate during 1947	14	—	14
	1,184	65	1,249

*Flats for old people.

In addition, 315 temporary houses were provided on scattered sites throughout the borough during 1945-46, and to date 1,206 premises have been requisitioned by the Council.

Food Premises.

There is still considerable difficulty in obtaining improved conditions in dairies and other food premises. Applications for building licences in these cases are dealt with by the Ministry of Works, but no particular priority is given.

One outstanding example can be quoted of a dairyman who, having purchased new equipment, has been refused a licence to make the alterations necessary to his premises in order to house the plant under proper conditions.

Food Condemned.

The following articles of food were condemned, namely:—

	Tins.	Pounds.	Ozs.	Packets	Bottles.	Jars.
Milk	5,655	—	—	—	—	—
Beans	1,207	—	—	—	—	—
Peas	994	112	—	—	—	—
Jam	370	—	—	—	—	12
Marmalade	72	—	—	—	—	—
Fish	726	2,156	—	—	—	—
Vegetables	783	—	—	—	—	—
Butter Beans	—	378	—	—	—	—
Fruit	1,870	2,934	—	—	2	—
Potatoes	—	11,872	—	—	—	—
Tinned Meat	2,097	39	8	—	—	—
Meat	—	1,763	10	—	—	1
Bacon	27	147	3	—	—	—
Sausages	263	15	—	—	—	—
Carried forward	14,064	19,416	21	—	2	13

Brought forward	14,064	19,416	21	—	2	13
Sausage Meat ..	43	15	—	—	—	—
Stew	59	—	—	—	—	—
Broth	20	—	—	—	—	—
Soup	549	—	—	—	—	—
Biscuits	21	1,673	4	—	—	—
Pickles	10	—	—	—	55	22
Fish Paste ..	186	—	—	—	—	4
Dried Egg ..	12	—	—	3	—	—
Dried Milk Cocoa	—	150	—	—	—	—
Confectionery ..	—	191	—	—	—	—
Butter	—	10	4	—	—	—
Margarine ..	—	19	4	—	—	—
Lard	—	48	—	—	—	—
Cheese	—	107	10	—	—	—
Flour	—	2,927	—	—	—	—
Tea	—	30	12	—	—	—
Sugar	—	1,277	—	—	—	—
Desiccated Coconut	—	260	—	—	—	—
Salt	1	—	—	36	—	—
Cereals	—	156	—	79	—	—
Miscellaneous ..	117	—	—	132	2	2
TOTALS ..	15,082	26,282	7	250	59	41

Various.

103 barrels of fruit juice; 1 crate oranges; 6 boxes pears; 3 cases prawns; 5 boxes herring roes; 1 barrel of pig's feet; 30 rabbits; 7 chickens; 1 leg pork; 1 leg mutton; 863 lollipops; 139 bars chocolate; 10 trays crumpets; 700 crumpets; 1 pot jam; 1 bottle coffee; 2 bottles vinegar; 1 pot mustard cream; 3 lbs. icing sugar; 10 lbs. soap flakes; 4 table jellies; 3 apple puddings; 4 gals. cooked minced meat.

Prosecutions.

There were three prosecutions under the Food and Drugs Act, 1938, namely:—

Case (1). Dirty milk bottle .. Fine of £5 in respect of each of three summonses, with £3 3s. costs.

Case (2). Cigarette in loaf of bread. Fine of £5, with £1 1s. costs.

Case (3). Dead mouse in loaf of bread. Fine of £5, with £3 3s. costs.

Milk (Special Designations) Orders, 1936 and 1938.

Licences granted:—

Pasteurised Milk:

Pasteurisers' Licences	4
Dealers' Licences	17
Supplementary Licences	3

Tuberculin Tested Milk:

Bottlers' Licences	1
Dealers' Licences	12
Supplementary Licences	3

Factories.

Systematic and routine inspection of factories has been carried out, and close collaboration maintained with H.M. Inspector of Factories.

The question of sanitary accommodation has been referred to elsewhere in this report, but emphasis must be given to the need for close liaison between the two departments of the Corporation concerned—the Borough Engineer's Department and the Public Health Department. This can be achieved by adoption of the principle that all plans deposited with the Corporation, where factories, etc., are concerned, should have the approval of the Health Department.

Factories Act, 1937.

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

Premises. (1)	Number on Register. (2)	Number of		
		Inspection. (3)	Written notices. (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	55	60	5	—
(ii) Factories not included in (i) to which Section 7 applies:				
(a) Subject to the Local Authorities (Transfer of Enforcement) Order, 1938 ..	513	361	26	—
(b) Others	—	—	—	—
(iii) Other Premises under the Act (excluding out-workers' premises)	—	—	—	—
TOTAL	568	421	31	—

2.—Cases in which Defects were found.

Particulars. (1)	Number of cases in which defects were found.				Number of cases in which prosecutions were instituted. (6)
	Found. (2)	Remedied (3)	Referred To H. M. Inspec- tor. (4)	By H. M. Inspec- tor. (5)	
Want of cleanliness (S.1)	4	4	—	—	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable tempera- ture (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7):					
(a) Insufficient ..	1	1	—	—	—
(b) Unsuitable or de- fective ..	25	25	—	—	—
(c) Not separate for sexes	3	3	—	—	—
Other offences (not in- cluding offences re- lating to Homework)	1	1	—	—	—
TOTAL ..	34	34	—	—	—

OUTWORK (Sections 110 and 111).

Nature of Work (1)	SECTION 110			SECTION III		
	No. of out-workers in August list required by Section 110(1)(c) (3)	No. of cases of default in sending lists to the Council. (4)	No. of prosecutions for failure to supply lists. (5)	No. of instances of work in unwholesome premises. (6)	Notices served. (7)	Prosecutions. (8)
Wearing Apparel ..	417	—	—	—	—	—
Household Linen ..	73	—	—	—	—	—
Brass and Brass articles	69	—	—	—	—	—
Artificial Flowers ..	19	—	—	—	—	—
Paper Bags	5	—	—	—	—	—
The making of Boxes or other receptacles or parts thereof made wholly or partially of paper	139	—	—	—	—	—
Carding, etc. of buttons, etc.	5	—	—	—	—	—
Stuffed Toys ..	269	—	—	—	—	—
TOTAL ..	996	—	—	—	—	—

Shops Acts, 1912—1938.

Effective administration of the Shops Acts is secured by the systematic visitation of shops by the Shops Acts Inspectors, and an up-to-date register of shop premises maintained.

A total of 4,753 inspections were made during the year in the general administration of the Shops Acts, and only minor contraventions, necessitating 329 verbal warnings and notices, have been recorded.

Close supervision is exercised in order to ensure that the weekly half-holiday is correctly observed, 251 visits being made for this purpose.

The Shops (Hours of Closing) Act, 1928, as amended by Defence (General) Regulation 60 A.B.

For the period of the winter months, 2nd November, 1947, to 6th March, 1948, an Order was made for the later closing of hair-dressers' and barbers' shops, i.e., 6.30 p.m.

Shops Act, 1934, and Young Persons Employment Act, 1938.

It is gratifying to note that the conditions of employment of young persons and shop workers generally have improved, both with respect to working hours and health and comfort arrangements.

Special visits made under these Acts totalled 384.

The provisions of the Shops Acts generally have been well observed.

STATISTICAL SUMMARY.

Year ended 31st December, 1947.

Area of the District in acres	..	..	..	..	3,014
Pre-War Population	..	..	..	..	144,400
Registrar-General's estimate of the <i>Civilian</i> Population					
Mid-year 1947	..	..	..	..	129,140
31st December, 1947	..	..	..	..	130,990
Rateable Value	..	..	..	..	£1,011,034
Sum represented by a penny rate	..	..	..	..	£4,000

STATISTICAL SUMMARY—*contd.**Births and Deaths.*

Registered live births:—					Total.	Males.	Females.
Legitimate	..	..	..	..	2,641	1,363	1,278
Illegitimate	..	..	..	..	144	78	66
					<hr/> 2,785 <hr/>	<hr/> 1,441 <hr/>	<hr/> 1,344 <hr/>

Birth Rate (per 1,000 estimated population) 21.57

<i>Stillbirths</i>					Total.	Males.	Females.
Legitimate	..	..	..	..	63	35	28
Illegitimate	..	..	..	..	3	1	2
					<hr/> 66 <hr/>	<hr/> 36 <hr/>	<hr/> 30 <hr/>

Stillbirth Rate per 1,000 total (live and still) births .. 23.7

<i>Deaths</i>	..	..	..	..	Males .. 759		
					Females .. 702	Total ..	1,461

Death Rate (per 1,000 estimated population) ..	..	..	11.31
Deaths from Cancer—Males, 121; Females, 102	..	..	223
Deaths from Diphtheria .. ..	..	..	—
Deaths from Measles .. ..	..	..	5
Deaths from Whooping Cough .. ..	..	..	2
Deaths from Diarrhoea (under 2 years) .. ..	..	..	7

Maternal Deaths:—

Puerperal Sepsis	..	..	..	2
Other Puerperal Causes	..	..	..	1
				—
Total	..	..	..	3

Maternal Death Rate (per 1,000 total live and still births) .. 1.05

<i>Deaths of Infants under 1 year of Age:</i>					Total.	Males.	Females.
Legitimate	..	..	..	..	71	40	31
Illegitimate	..	..	..	..	5	4	1
					—	—	—
					76	44	32
					—	—	—

Infantile Death Rate (all infants per 1,000 live births)	..	27.29
Legitimate Infants per 1,000 legitimate live births	..	26.88
Illegitimate Infants per 1,000 illegitimate live births		34.72

The population which, in 1938, was 144,400, shows an increase of 4,310 over the figure of 124,830 for 1946.

The birth-rate 21.57 compared with 20.67 in 1946 and 13.1 in 1938.

Registered live births totalled 2,785, compared with 2,580 in 1946, the proportion of males to females being 1,441 boys and 1,344 girls.

The infantile death-rate of 27.29 was lower than the rate for 1946—34.11.

Deaths in the first 4 weeks of life caused a neo-natal mortality of 16.16 per 1,000 live births, as compared with 20.93 in 1946.

The maternal death-rate was 1.052, as compared with 1.499 in 1946.

The general death rate of the whole population showed a reduction over the previous year—11.31 compared with 11.94.

Table 1 STATISTICS OF TOTTENHAM FOR THE LAST TWENTY YEARS.

Year	Population	Deaths	Death Rate	Births	Birth Rate	Infant- tile Deaths	Infant Death Rate	Number of Cases.				
								Puerperal Fever and Pyrexia	Scarlet Fever	Diph- theria	Typhoid Fever	Small- Pox
1928	165,000	1,540	9.3	2,478	15.0	133	53.7	19	594	328	1	—
1929	168,000	1,839	10.9	2,561	15.2	162	63.2	19	536	562	5	6
1930	170,000	1,569	9.2	2,510	14.8	137	54.6	22	574	541	6	131
1931	159,300	1,621	10.2	2,345	14.7	124	52.9	19	571	220	6	7
1932	156,800	1,591	10.1	2,214	14.2	114	51.4	37	452	149	4	5
1933	154,700	1,618	10.5	2,138	13.8	118	55.2	35	551	194	5	4
1934	152,694	1,572	10.3	2,091	13.7	108	51.6	34	628	300	1	—
1935	150,310	1,456	9.7	1,969	13.1	108	54.8	41	577	286	3	—
1936	148,600	1,600	10.8	1,931	13.0	100	51.8	37	430	227	5	—
1937	146,200	1,617	11.1	1,973	13.5	126	63.9	36	306	236	7	—
1938	144,400	1,512	10.5	1,893	13.1	89	47.0	23	186	221	—	—
1939	{ 142,400* 136,000	{ 1,406 1,703	{ 10.3 14.26	{ 1,776* 1,739	{ 12.5 13.95	{ 66 64	{ 37.95 41.05	{ 15 20	{ 335 103	{ 60 28	{ — 5	{ — —
1940	119,400	1,418	13.43	{ 1,666* 1,559	{ 13.95 14.77	{ 61 79	{ 46.35 43.43	{ 13 12	{ 103 295	{ 73 75	{ 4 1	{ — —
1941	105,620	1,349	12.25	{ 1,560* 1,316	{ 16.52 17.85	{ 86 87	{ 43.65 42.11	{ 9 13	{ 340 206	{ 107 44	{ — —	{ — —
1942	110,100	1,513	13.71	1,819	16.52	78	39.24	14	214	47	—	—
1943	110,350	1,356	12.53	1,970	17.85	88	34.11	13	323	83	—	—
1944	108,180	1,371	12.40	2,066	19.09	76	27.29	24	272	22	1	—
1945	110,600	1,491	11.94	1,988	17.97	76	27.29	24	272	22	1	—
1946	124,830	1,461	11.31	2,580	20.67	76	27.29	24	272	22	1	—
1947	129,140	1,461	11.31	2,785	21.57	76	27.29	24	272	22	1	—

*For the years 1939—1941 alternative birth figures were given by the Registrar-General:—
(a) for calculation of birth rates; and
(b) for calculation of death rates or the incidence of notifiable diseases.

Likewise for the year 1939 only, two population figures were given:—

(a) for calculation of birth rates; and (b) for calculation of death rates, etc.

*Table II Deaths during the year 1947 in the Borough of Tottenham
classified according to Diseases.*

Cause of Death	Males	Females	Totals
Typhoid and Paratyphoid Fevers ..	—	—	—
Measles	3	2	5
Scarlet Fever	—	—	—
Whooping Cough	—	2	2
Diphtheria	—	—	—
Influenza	7	4	11
Encephalitis Lethargica	1	2	3
Cerebro-Spinal Fever	2	—	2
Tuberculosis of Respiratory System ..	39	23	62
Other Tuberculous Diseases	3	6	9
Syphilis	6	1	7
General Paralysis of the Insane Tabes Dorsalis	—	—	—
Cancer, Malignant Disease	121	102	223
Diabetes	—	5	5
Cerebral Haemorrhage, etc.	68	95	163
Heart Diseases	191	193	384
Other Circulatory Diseases	34	22	56
Bronchitis	84	64	148
Pneumonia (all forms)	34	36	70
Other Respiratory Diseases	14	10	24
Peptic Ulcer	15	1	16
Diarrhoea (under 2 years)	4	3	7
Appendicitis	2	1	3
Other Digestive Diseases	13	18	31
Acute and Chronic Nephritis	7	17	24
Puerperal Sepsis	—	2	2
Other Puerperal Causes	—	1	1
Congenital Debility, Premature Birth, malformations	31	20	51
Road Traffic Accidents	12	3	15
Other Violent Causes	11	5	16
Suicide	10	7	17
All other Causes	47	57	104
	759	702	1,461

Table III

Infantile Deaths in Ages and Sexes during the year 1947

CAUSE OF DEATH.	Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	Total under 4 weeks.	1—3 months.	3—6 months.	6—9 months.	9—12 months.	Total deaths under 1 year.	Males.	Females.
Bronchitis	—	—	—	—	—	2	2	1	—	5	4	1
Diarrhoea and Enteritis	—	—	1	—	1	3	1	—	—	5	3	2
Measles	—	—	—	—	—	1	—	1	—	2	2	—
Pneumonia	—	1	—	—	1	2	4	—	1	8	3	5
Premature Births, Con- genital Malformations, etc.	36	3	1	1	41	5	2	2	1	51	31	20
Miliary Tuberculosis	—	—	—	—	—	—	—	—	—	—	—	—
T.B. Meningitis ..	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ..	—	—	—	—	—	—	—	1	1	2	—	2
Other Causes	—	—	1	—	1	2	—	—	—	3	1	2
Totals	36	4	3	1	44	15	9	5	3	76	44	32

Table IV

Table of Cases of Infectious Disease coming to the knowledge of the Medical Officer of Health during the year 1947 in the Borough of Tottenham, classified according to Diseases and Ages.

NOTIFIABLE DISEASE.	Males.	Females	Under one.	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 & over.	Total Cases Removed to Hospital by Council
Scarlet Fever	121	151	1	2	12	26	28	129	42	16	14	2	—	—	139
Diphtheria	11	11	—	2	—	2	3	8	5	—	—	1	1	—	22
Pneumonia	35	42	1	1	5	1	4	5	2	1	6	7	31	13	4
Erysipelas	14	26	—	—	—	—	—	2	—	1	4	10	15	8	17
Puerperal Pyrexia ..	—	24	—	—	—	—	—	—	—	1	21	2	—	—	6
Dysentery	8	3	1	3	1	3	1	—	—	—	2	—	—	—	7
Ophthalmia Neonatorum	2	5	7	—	—	—	—	—	—	—	—	—	—	—	1
Meningitis	10	8	1	2	1	—	2	4	2	1	2	2	—	1	14
Malaria	2	—	—	—	—	—	—	—	—	—	2	—	—	—	—
Scabies	87	102	4	4	5	3	7	36	33	14	55	9	17	2	—
Enteritis	8	6	8	3	—	2	—	—	—	—	—	—	1	—	13
Food Poisoning	2	1	—	—	—	—	—	—	—	—	2	—	1	—	—
Whooping Cough ..	138	148	42	31	42	34	61	75	1	—	—	—	—	—	22
Measles	625	602	47	126	170	204	220	416	26	6	8	2	1	1	73
Pulmonary Tuberculosis ..	109	62	—	—	1	3	—	5	9	29	70	26	20	8	—
Other forms of Tuberculosis	12	6	—	—	2	—	1	—	3	3	7	1	—	1	—
Poliomyelitis	11	6	—	1	1	4	—	3	2	2	2	2	—	—	16
Encephalitis Lethargica ..	—	2	—	—	—	—	—	1	—	—	—	—	—	1	1
Typhoid Fever	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—
Totals ..	1,195	1,206	112	175	240	282	327	685	125	74	195	64	87	35	335

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