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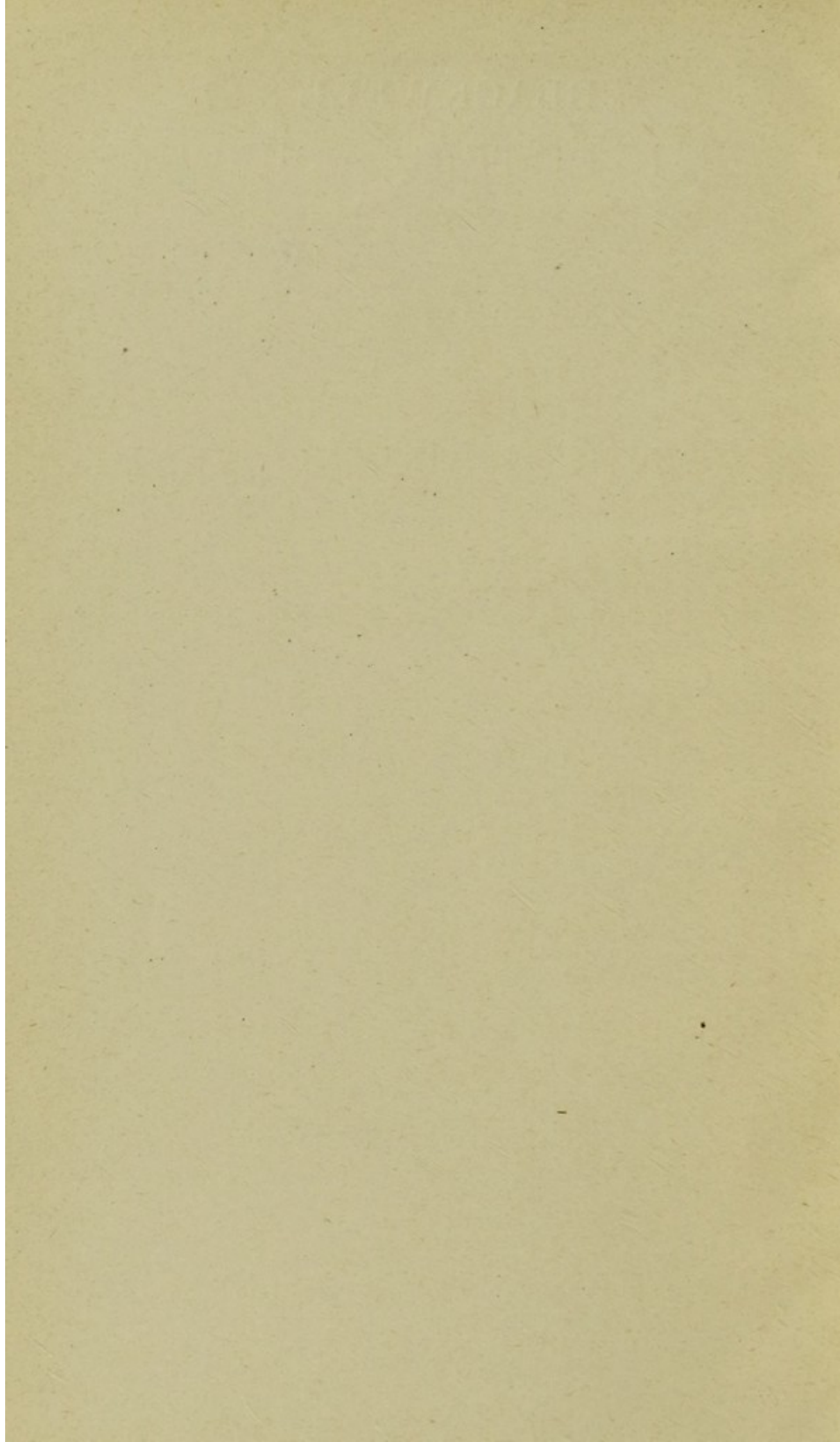
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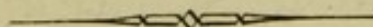


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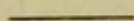
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## Rural District Council of Blackwell.



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MR. G. A. LONGDEN .. .. .	PLEASLEY



To the Chairman and Members  
OF  
The Blackwell Rural District Council.

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GENTLEMEN,

I have the honour to submit for your consideration my Annual Report on the General Sanitary Condition of your District for the year ending December 31st, 1908, being the seventeenth such report which I have prepared since I have acted as your Medical Officer of Health.

I particularly wish to draw your attention to that portion of this report which deals with the Medical Inspection of School Children, also to the article on Phthisis and Tuberculosis. On perusing the report it will be noticed that the death rate for the year was strikingly low, and that the amount of Typhoid Fever in the District was exceptionally small.

There are other matters of importance which it is not necessary for me to dwell upon now, but which I hope will be found interesting to the members to whose parishes they apply.

I am, Gentlemen,

Yours obediently,

JOHN O. LITTLEWOOD.

TABLE I.—Vital Statistics of Whole District during 1908 and previous years.

Year.	Population estimated to middle of each Year.	Births		Total Deaths Registered in the District.				Total Deaths in Public Institutions in the District.	Deaths of Non-residents registered in P. Insts. in District.	Deaths of Residents registered in Public Institutions beyond the District.	Net Deaths at all Ages belonging to the District.	
		Number.	Rate *	Deaths under One Year of Age.		Deaths at all Ages.					Number.	Rate *
				Number.	Rate per 1,000 Births Registered.	Number.	Rate.					
1	2	3	4	5	6	7	8	9	10	11	12	13
1898	24435	1044	42.7	177	169.5	383	15.7					
1899	25818	1099	42.5	189	171.9	430	16.6					
1900	27384	1155	42.2	186	159.5	481	17.5					
1901	28846	1230	42.6	230	188.5	475	16.4					
1902	31679	1407	44.4	208	147.8	468	14.7					
1903	33477	1327	39.6	235	177.0	523	15.6					
1904	34673	1326	38.2	213	160.6	480	13.8					
1905	25673	1324	37.1	187	141.2	446	12.6					
1906	36221	1290	35.6	171	132.5	427	11.8					
1907	37138	1373	36.73	220	159.8	569	15.3					
Average for years 1898-1907 30535		1257	40.2	201	160.8	468	15.0					
1908	38434	1415	36.8	212		502		..	..	5	507	
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\* Rates in Columns 4, 8 and 13 calculated per 1,000 of estimated population.

NOTE.—The deaths to be included in Column 7 of this Table are the whole of those registered during the year as having actually occurred within the district or division. The deaths to be included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public Institutions" to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses, and lunatic asylums. A list of the Institutions in respect of the deaths in which corrections have been made should be given on the back of this Table.



I. Institutions within the District receiving sick and infirm persons from outside the District.	II. Institutions outside the District receiving sick and infirm persons from the District.	III. Other Institutions, the deaths of which have been distributed among the several localities in the District.
Nil.	Penmore Isolation Hospital, Hasland. Spital Small Pox Hospital, Hasland. Morton Isolation Hospital. Mastin Moor Isolation Hospital, Staveley. Mansfield Union Workhouse. Mansfield Accident Hospital. Nottingham General Hospital. Chesterfield and North Derbyshire Hospital. Mickleover Asylum.	Nursing Home, St. George's, Hanover Square, London. Children's Hospital, Western Bank, Sheffield.
Is the Union Workhouse within the District ?		No.

TABLE II.

Vital Statistics of Separate Localities during 1908 and previous years.

Names of Localities.	S. NORMANTON.				BLACKWELL.				TIBSHELF.				PINXTON.				PLEASLEY.			
	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.
1898 ..	4897	217	81	39	3868	176	40	20	3220	122	56	19	2835	88	43	12	1512	59	24	10
1899 ..	4993	203	103	42	3969	176	51	22	3295	122	49	19	2892	92	40	11	1584	59	28	10
1900 ..	5088	231	80	33	4069	158	57	15	3371	134	50	16	2948	112	45	19	1727	64	28	13
1901 ..	5184	237	93	46	4170	158	71	24	3446	128	56	23	3005	128	45	22	1776	70	18	9
1902 ..	5431	253	98	39	4298	181	59	17	3668	132	45	19	3718	145	68	29	1776	83	21	8
1903 ..	5645	216	99	34	4388	179	60	22	3715	153	70	32	3881	133	52	18	1776	64	27	17
1904 ..	5948	252	95	45	4441	160	57	16	3768	137	47	21	4381	151	60	24	1786	61	24	7
1905 ..	6115	230	95	39	4473	140	53	18	3874	138	47	15	4396	161	55	25	1791	56	9	4
1906 ..	6141	221	74	36	4481	139	38	12	3890	126	38	9	4927	148	71	22	1791	56	20	6
1907 ..	6177	246	102	38	4516	141	49	14	3906	146	58	21	4983	156	79	25	1791	68	16	4
Averages of years 1898 to 1907.	5561	230	92	39	4267	160	53	18	3615	133	51	19	3796	131	55	20	1731	64	21	8
1908 ..	6281	254	117	48	4627	149	38	11	3922	129	42	18	5088	177	70	28	1953	68	21	6



TABLE II.—(Continued).

Names of Localities.	SHIREBROOK.				SCARCLIFFE.				AULT HUCKNALL.				LANGWITH.				GLAPWELL.			
	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.
1898 ..	3998	190	78	47	2149	119	39	24	1529	61	17	5	325	9	4	1	104	3	1	nil
1899 ..	4812	258	103	66	2286	127	34	16	1549	52	19	4	332	7	3	2	106	3	0	"
1900 ..	5742	292	144	61	2423	106	48	21	1568	58	25	8	339	8	4	0	109	3	0	"
1901 ..	6660	313	125	73	2560	143	36	23	1588	55	30	10	346	6	4	0	111	2	0	"
1902 ..	8056	373	108	74	2682	170	44	21	1593	54	16	nil	346	14	6	1	111	2	3	"
1903 ..	8798	393	125	75	2687	125	53	31	1836	51	25	3	640	9	12	2	111	2	0	"
1904 ..	9071	362	124	67	2687	132	51	23	1840	44	18	5	640	26	7	5	111	1	0	"
1905 ..	9231	392	126	65	2702	127	33	14	1840	56	19	6	640	22	6	1	111	2	3	"
1906 ..	9695	411	128	60	2702	125	38	19	1840	47	19	6	640	15	6	1	111	2	6	"
1907 ..	10449	397	179	88	2707	146	49	15	1840	51	36	11	663	21	11	4	111	4	0	"
Averages of years 1898 to 1907.	7651	338	124	67	2578	132	42	20	1702	52	22	5	490	13	6	1	109	2	1	0
1908 ..	10982	451	151	78	2718	113	33	12	2086	59	26	7	660	15	8	4	117	0	1	0



TABLE II.—(Continued).

Names of Localities.	S. NORMANTON.					BLACKWELL.					TIBSHELF.					PINXTON.					PLEASLEY.							
YEAR.	Population esti- mated to middle of each year.	Birth-rate, per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.		Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.		Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.		Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.		Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.				
1898 ..	4897	44.3	16.5	179.7	3868	45.6	10.3	113.6	3220	37.8	17.4	155.7	2835	31.0	15.1	136.3	2835	31.0	15.1	136.3	1512	39.0	15.9	169.5	1512	39.0	15.9	169.5
1899 ..	4993	40.6	20.6	206.9	3969	44.3	12.8	125.0	3295	37.0	14.8	155.7	2892	31.8	13.8	119.6	2892	31.8	13.8	119.6	1584	37.2	17.7	169.5	1584	37.2	17.7	169.5
1900 ..	5088	45.4	15.7	142.8	4069	38.8	14.0	94.9	3371	39.7	14.8	119.4	2948	38.0	15.2	169.6	2948	38.0	15.2	169.6	1727	37.0	16.2	203.1	1727	37.0	16.2	203.1
1901 ..	5184	45.7	17.9	194.1	4170	37.8	17.5	151.9	3446	34.2	16.2	194.9	3005	42.5	15.0	171.9	3005	42.5	15.0	171.9	1776	39.4	10.1	128.5	1776	39.4	10.1	128.5
1902 ..	5431	46.5	18.0	154.1	4298	42.1	13.7	93.9	3668	35.9	12.2	144.	3718	39.0	18.2	200.0	3718	39.0	18.2	200.0	1776	41.1	11.8	96.3	1776	41.1	11.8	96.3
1903 ..	5645	38.2	17.5	157.4	4388	40.8	13.7	123.0	3715	41.2	18.8	209.1	3881	34.3	13.4	135.3	3881	34.3	13.4	135.3	1776	36.0	15.2	265.5	1776	36.0	15.2	265.5
1904 ..	5948	42.4	16.0	178.5	4441	36.0	12.8	100.0	3768	35.0	12.4	153.3	4381	34.4	13.7	159.0	4381	34.4	13.7	159.0	1786	34.1	13.4	114.7	1786	34.1	13.4	114.7
1905 ..	6115	37.6	15.5	162.5	4473	31.2	11.8	128.5	3874	35.6	12.1	108.7	4896	32.8	11.2	155.2	4896	32.8	11.2	155.2	1791	31.2	5.0	71.4	1791	31.2	5.0	71.4
1906 ..	6141	35.9	12.4	162.9	4484	31.0	8.5	96.3	3890	32.3	4.7	71.4	4927	30.0	14.4	148.6	4927	30.0	14.4	148.6	1791	31.2	11.2	107.1	1791	31.2	11.2	107.1
1907 ..	6177	39.8	14.7	154.4	4516	31.2	11.9	99.2	3906	37.3	14.9	143.8	4983	31.3	15.8	160.2	4983	31.3	15.8	160.2	1791	37.9	8.9	58.8	1791	37.9	8.9	58.8
Averages of years 1898 to 1907	5561	41.6	16.4	170.0	4267	37.8	12.7	112.6	3625	36.6	14.8	145.6	3846	34.5	14.5	145.5	3846	34.5	14.5	145.5	1731	36.4	12.5	138.4	1731	36.4	12.5	138.4
1908 ..	6281	40.4	18.6	188.9	4627	32.2	8.2	73.8	3922	32.8	10.7	140.0	5088	34.8	13.7	158.2	5088	34.8	13.7	158.2	1953	34.8	10.7	88.2	1953	34.8	10.7	88.2



TABLE II.—(Continued).

Names of Localities.	SHIREBROOK.					SCARCLIFFE.					AULT HUCKNALL.					LANGWITH.					GLAPWELL.				
	Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.	Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.	Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.	Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.	Population esti- mated to middle of each year.	Birth-rate per 1000 population.	Death-rate per 1000 population.	Infantile Death- rate per 1000 Births.					
1898 ..	3998	47.5	19.5	247.3	2149	55.3	18.1	201.7	1529	39.9	11.1	81.9	325	27.7	12.3	111.1	104	28.8	9.9	<i>nil</i>					
1899 ..	4812	53.6	21.4	255.8	2286	55.5	14.8	126.0	1549	33.5	12.2	76.9	332	21.1	9.0	285.7	106	28.3	9.6	"					
1900 ..	5742	50.8	25.1	208.9	2423	43.7	19.8	198.1	1568	36.9	15.9	137.9	339	23.6	11.8	<i>nil</i>	109	27.5	<i>nil</i>	"					
1901 ..	6660	47.0	18.7	236.4	2560	55.8	14.4	160.8	1588	34.6	18.8	181.8	346	17.3	11.5	<i>nil</i>	111	18.0	"	"					
1902 ..	8056	46.3	13.4	198.3	2682	63.3	16.4	123.5	1593	33.9	10.0	<i>nil</i>	346	40.4	17.3	71.3	111	18.0	"	"					
1903 ..	8798	44.7	14.2	190.5	2687	46.9	19.3	246.0	1836	27.7	13.6	58.8	640	14.0	18.7	222.2	111	27.0	"	"					
1904 ..	9071	40.0	13.6	185.1	2687	49.1	19.3	174.2	1840	23.9	9.8	113.6	640	40.6	11.0	192.3	111	9.0	<i>nil</i>	"					
1905 ..	9231	42.4	13.6	165.8	2702	47.0	12.2	110.2	1840	30.4	10.3	107.1	640	34.3	9.3	45.4	111	18.0	27.0	"					
1906 ..	9695	42.3	13.3	143.5	2702	46.2	14.8	151.1	1840	35.5	10.3	127.6	640	23.4	9.3	66.6	111	18.0	9.0	"					
1907 ..	10449	37.9	17.1	221.6	2707	53.9	18.1	102.7	1840	27.7	19.5	251.7	653	32.1	16.8	199.5	111	36.0	<i>nil</i>	"					
Averages of years 1898 to 1907.	7651	45.2	16.9	205.2	2558	51.6	16.7	159.4	1702	32.4	12.9	113.6	490	27.4	12.7	118.4	109	22.7	6.5	<i>nil</i>					
1908 ..	10982	41.0	13.7	172.9	2718	41.5	12.1	106.1	2086	28.2	12.4	118.6	660	22.7	12.1	266.6	117	<i>nil</i>	<i>nil</i>	<i>nil</i>					

Note that the statistics of Langwith and Glapwell are of no value, as they are based on too small a population.



TABLE III.

## Cases of infectious Disease notified during the Year 1908.

Notifiable Disease.	Cases notified in Whole District.						Total Cases Notified in each Locality.								* No. of Cases Removed to Hospital from each Locality.								Total Cases removed to Hospital.			
	At all Ages.	At Age†—Years.					Blackwell	S. Nornanton	Pinxton	Tibshelf	Shirebrook	Pleasley	Scarliffe	A. Hucknall	Langwith	Glapwell	Blackwell	S. Nornanton	Pinxton	Tibshelf	Shirebrook	Pleasley		Scarliffe	A. Hucknall	Langwith
		Under 1	1 to 5	5 to 15	15 to 25	25 to 65																				
Small-pox.....	16	..	3	11	1	1	..	1	..	..	5	6	4	..	..	..	..	..	..	..	..	..	..	..	..	..
Cholera.....	31	1	1	2	1	22	4	..	..	8	6	5	9	2	1	..	..	..	..	..	..	..	..	..	..	..
Diphtheria .....	132	3	40	72	11	6	..	25	11	1	14	1	66	3	..	..	..	..	..	..	..	..	..	..	..	..
Membranous croup	18	..	1	6	2	9	..	..	3	1	5	..	6	1	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas.....																										
Scarlet fever.....																										
Typhus Fever ....																										
Enteric fever ....																										
Relapsing fever ..																										
Continued fever ..																										
Puerperal Fever ..	1	..	..	..	..	1	..	..	..	1	..	..	6	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague .....																										
Totals.....	198	4	45	91	15	39	4	25	15	3	21	30	12	85	6	1	25	15	3	21	30	12	85	6	1	..

NOTES.—The localities adopted for this table should be the same as those in Tables II. and IV.

State in space below the name of the isolation hospital, if any, to which residents in the district, suffering from infectious disease, are usually sent. Mark (H) the locality in which it is situated, or if not within the district, state where it is situated, and in what district. The name of the authority by whom the hospital is provided should also be given. Mark (W) the locality in which a workhouse is situated.

\* This space may be used for record of other disease the notification (compulsory or voluntary) of which is in force in the district.

† These age columns for notifications should be filled up in all cases where the Medical Officer of Health, by enquiry or otherwise, has obtained the necessary information.

\*\* Column 8 should be filled up with the Totals of cases removed to Hospital, whether the District is divided into separate localities or consists of only one undivided area.

TABLE IV.—Causes of, and Ages

CAUSES OF DEATH.	Deaths at the subjoined Ages of Residents, whether occurring in or beyond the District						
	All Ages.	Undr 1 yr	1 and undr 5	5 & undr 15	15 & undr 25	25 & undr 65	65 & up-ward
1	2	3	4	5	6	7	8
Small Pox .. ..							
Measles .. ..	13	6	6	1	..	..	..
Scarlet Fever .. ..	1	..	1	..	..	..	..
Whooping Cough .. ..	10	5	5	..	..	..	..
Diphtheria & Mem. Croup ..	2	..	..	2	..	..	..
Croup .. ..							
Fever—Typhus .. ..							
„ Enteric .. ..	3		1	2	..	..	..
„ Other continued .. ..							
Epidemic Influenza .. ..	4	..	1	..	..	2	1
Cholera .. ..							
Plague .. ..							
Diarrhœa .. ..	37	30	5	..	..	..	2
Enteritis .. ..	3	2	..	..	..	1	..
Puerperal Fever .. ..							
Erysipelas .. ..							
Other septic diseases .. ..	1	..	..	..	..	1	..
Phthisis (Pulmonary Tuberculosis) .. ..	24	1	3	2	5	13	..
Other tubercular diseases .. ..	34	18	8	5	1	2	..
Cancer, malignant disease .. ..	27	..	..	..	5	15	7
Bronchitis .. ..	30	13	4	..	..	5	8
Pneumonia .. ..	67	29	21	1	4	8	4
Pleurisy .. ..	1	..	..	..	..	1	..
Other diseases of Respiratory organs .. ..	1	..	..	1	..	..	..
Alcoholism .. ..							
Cirrhosis of liver } .. ..	4	..	..	..	..	4	..
Venereal diseases .. ..							
Premature birth .. ..	27	27	..	..	..	..	..
Diseases and accidents of parturition .. ..	2	..	..	..	..	2	..
Heart diseases .. ..	39	1	..	2	3	22	11
Accidents .. ..	20	..	2	2	8	8	..
Suicides .. ..	2	..	..	..	..	2	..
Diseases of nervous system .. ..	1	..	..	..	..	1	..
Old Age .. ..	29	..	..	..	..	..	29
All other causes .. ..	125	80	13	4	3	18	7
All causes .. ..	507	212	70	22	29	105	69



at, Death during Year 1908.

Deaths at all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.										
Normanton	Tibshelf	Pinxton	Blackwell	Shirebrook	Pleasley	Scarliffe	Ault Hucknall	Langwith	Glapwell	Outside District.
9	10	11	12	13	14	15	16	17	18	19
9	..	..	..	4	..	1				
..	..	..	..	..	..	2				
1	..	..	..	5	2	2				
..	..	..	..	2						
..	..	..	..	1	..	1	1			
1	..	2	1							
4	1	3	3	22	1	2	1			
..	..	1	..	2						
1										
7	1	1	..	9	2	2	2			
6	2	2	1	15	..	4	3	1		
5	5	3	4	6	2	0	1	1		
3	5	1	2	15	1	1	..	1		
27	5	10	5	11	3	5	1		1	
..	..	..	..	1						
..	..	1								
..	..	1	..	2	..	1				
3	3	4	..	14	1	1	1			
..	..	2								
7	2	6	8	7	4	2	3			
3	2	3	..	1	2	3	4	2		
1	..	..	..	1						
..	..	..	1							
9	..	10	5	2	..	..	3			
30	16	20	8	31	3	8	6	3		
117	42	70	38	151	21	33	26	8	1	

## NOTES TO TABLES IV. AND V.

- (a) In Table IV. all deaths of "Residents" occurring in public institutions, whether within or without the district are to be included with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-15, to be *included* among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner to be *excluded* from columns 2-8 & 9-15 of Table IV.
- (b) See notes on Table I. as to the meaning of "Residents" and "Non-residents," and as to the "Public Institutions" to be taken into account for the purposes of these Tables. The "Localities" in Table IV. should be the same as those in Tables II. and III.
- (c) All deaths occurring in public institutions situated within the district, whether of "Residents" or "Non-residents" are, in addition to being dealt with as in note (a), to be entered in the last column of Table IV. The total number in this column should equal the figures for the year in column 9, Table I.
- (d) The total deaths in the several "Localities" in columns 9-15 of Table IV. should equal those for the year in the same localities in Table II., sub-columns c. The total deaths at all ages in column 2 of Table IV. should equal the gross total of columns 9-15, and the figures for the year in column 12 of Table I.
- \*(e) Under the heading of "Diarrhœa" are to be included deaths registered as due to Epidemic diarrhœa, Epidemic enteritis, Infective enteritis, Zymotic enteritis, Summer diarrhœa, Dysentery and Dysenteric diarrhœa, Choleraic diarrhœa, Cholera and Cholera Nostras.
- In addition, and as regards deaths of children *under one year of age*, under the heading "Diarrhœa," in column 3 (Table IV.) are to be included all deaths classified as "Diarrhœal diseases" in Table V.
- Under the heading of "Enteritis" in Table IV., are to be included only deaths *over one year of age* registered as due to Enteritis, Muco-enteritis, Gastro-enteritis, Gastric catarrh, Gastritis, and Gastro-intestinal catarrh, unless from information obtained by enquiry from the certifying practitioner or otherwise, the Medical Officer of Health should have reason for including such deaths, under the specific term "Diarrhœa." Deaths from diarrhœa secondary to some other well-defined disease should be included under the latter.
- f) Under the headings of "Cancer" and "Puerperal fever" should be included all registered deaths from causes comprised within these general terms. Thus: Under "Cancer" should be included deaths from Cancer, Carcinoma, Malignant disease, Scirrhus, Epithelioma, Sarcoma, Villous tumour, and Papilloma of bladder, Rodent ulcer. Under "Puerperal Fever" are to be included deaths from Pyæmia, Septicæmia, Sapræmia, Pelvic peritonitis, Peri- and Endro-Metritis occurring in the Puerperium.



- (g) Under " Congenital Defects " in Table V. are to be included deaths from Atelectasis, Icterus neonatorum, Navel hæmorrhage, Malformations, and Congenital hydrocephalus.
- (h) Under " Tuberculous Meningitis " are to be included deaths from Acute hydrocephalus.
- (i) Under " Other Tuberculous Diseases " are to be included deaths from Tuberculosis, Tuberculosis of bones, joints and other organs, Lupus and Scrofula.
- (j) All deaths certified by registered Medical Practitioners, and all Inquest cases are to be classed as " Certified ; " all other deaths are to be regarded as " Uncertified. "



TABLE V.—Infantile Mortality during the Year 1908.  
Deaths from stated Causes in Weeks and Months under One Year of Age.  
(See Notes at back of Table IV.)

CAUSE OF DEATH.		Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-2 months.	2-3 months.	3-4 months.	4-5 months.	5-6 months.	6-7 months.	7-8 months.	8-9 months.	9-10 months.	10-11 months.	11-12 months.	Total Deaths under 1 year.
All Causes.	Certified .. Uncertified ..																	
Common Infectious Diseases.	Small-pox ..																	
	Chicken-pox ..																	
	Measles ..														2	2	2	6
	Scarlet Fever ..																	
	Diphtheria (including Membranous Croup) ..																	
Diarrhoeal Diseases.	Whooping Cough ..							1		1	2						1	5
	Diarrhoea, all form ..						1	3	2		3	6	5	4	2	2	2	30
	Enteritis, Muco-enteritis, Gastro-enteritis ..							2										2
	Gastritis, Gastro-intestinal Catarrh ..									1								1
Wasting Diseases.	Premature Birth ..	19	3		2	24	1	2										27
	*Congenital Defects ..	8	1	1	1	11	1						1					13
	Injury at Birth ..	1				1												1
	Want of Breast-milk, Starvation ..																	
Tuberculous Diseases.	Atrophy, Debility, Marasmus ..	10	1	1	1	13	11	2	2	5	2		3				2	40
	*Tuberculous Meningitis ..									2							1	3
	" Peritonitis ..								2	1	1	1	1	1	2	1	2	12
	Tabes Mesenterica ..																	
Other Causes.	*Other Tuberculous Diseases ..							1			1	1						3
	Erysipelas ..																	
	Syphilis ..																	
	Rickets ..																	
	Meningitis (not Tuberculous) ..														1			1
	Convulsions ..	3	1	2		6	3	2		1	1		3	1	3	1	2	23
	Bronchitis ..						4	2	2		1				1	3		13
	Laryngitis ..																	
	Pneumonia ..			2		2	4	2	1	1	4	4	3	1	3	3	1	29
	Suffocation, overlaying ..	1				1	1							1				3
		42	6	6	4	58	26	16	10	11	14	14	16	8	14	12	13	212

Population (estimated to middle of 1908,) 38,434.

Births in the year { legitimate, 1375.  
illegitimate, 40.

Deaths from all Causes at all Ages, 508.



PHYSICAL FEATURES OF THE DISTRICT.

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A description of some of the chief physical features of a district must necessarily include some reference to its geological structure. Such an account may be an advantage to some, and cannot fail to interest all the members of the Council. To the geologist and antiquarian the County of Derby abounds in many treasures, but it is not to such treasures that I now wish specially to draw your attention.

The portion of the county in which you are more particularly interested is placed in the east, and forms a part of the Pennine chain, or back-bone of England. There are no hills of any great height, but the surface presents a somewhat irregular contour, very different from that found in the north-west, where high hills, deep ravines, and extensive dales are characteristic features. This great central or Pennine anticline throws off on the west the coal measures of Lancashire and North Staffordshire, and on the east the great coalfields of Yorkshire and Derbyshire.

For the convenience of description the district may be divided into two parts, viz. : north and south. The southern part embraces the parishes of Pinxton, South Normanton, Blackwell, and Tibshelf, which are situated on the upper coal measures.

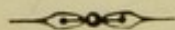
The depth at which coal is found varies in different parts. At Blackwell it appears on the surface, whilst in some of the adjacent parishes it is only found at considerable depths. As water-bearing strata, the upper coal measures are not satisfactory, the subsoil being too loose and shaly, and thus readily allowing of the free percolation of water. It is found that the range of rise and fall in some of the superficial wells exceeds many feet. The soil is heavy and loamy, and contains a large amount of moisture.

Passing on to the northern part of the district, which includes the parishes of Ault Hucknall, Glapwell, Scarcliffe, Langwith, Pleasley, and Shirebrook, we meet with the magnesian limestone as well as the coal measures. Portions of Ault Hucknall, Glapwell, and Scarcliffe are over-lapped by the former. It is quite obvious where one formation ends and the other begins: the line of demarcation is well marked by the escarpment which runs north and south, and is particularly well defined by the ridge which runs through Hardwick Park and skirts the hamlet of Palterton. Along the base of this escarpment numerous springs abound, and it is from these sources that Ault Hucknall (Doe Lea) derives its water supply.

The surface overlying the magnesian limestone differs from that of the coal measures in being more undulating in character. The subsoil is firmer, and the range of rise and fall in the wells is considerably less. The soil is drier, more sandy, and lighter in composition.



## GENERAL VITAL STATISTICS OF THE DISTRICT.



**Area and Population.**—There has not been any alteration in the area of the District during the year, but the population has increased considerably. Most of the parishes have shewn an increase, but Shirebrook, Ault Hucknall, and Pleasley are the places where it is most marked. In the year 1907 the population stood at 37,133. It now stands at 38,434, showing an increase of 1,301 for the year 1908. The number of houses newly erected in the District during the year was 235 as against 160 for the year previous.

I am not aware that there is any great number of houses empty in the district, indeed there is reason to believe that in many instances two families are occupying the same house. The population has been estimated on the number of inhabited houses, the average number of inmates per house for the various parishes having been previously ascertained by the census.

Area in Acres.	Population.	Persons per Acre.
21,239	38,434	1.7

The following figures are given for the purpose of showing the actual increase which has taken place since the census of 1861

Census 1861.	Census 1871.	Census 1881.	Census 1891.	Census 1901.	Estimated Population 1908.
6,685	7,947	12,746	16,858	28,735	38,434

The houses in the district have increased in like proportion, as the following numbers show :—

1861	1871	1881	1891	1901	1908
1,302	1,575	2,410	3,077	5,514	7,096



**Table showing Acreage, Inhabited Houses  
Population, Births and Deaths of each Parish of the District.  
For the Year ending December 31st 1908.**

PARISHES.	Acres.	Inhabited Houses.	Populn	Births.	Deaths.	Deaths under 1 yr
Blackwell ... ..	1739	873	4627	149	38	11
Normanton ... ..	1934	1208	6281	254	117	48
Pinxton ... ..	1253	998	5088	177	70	28
Tibshelf ... ..	2371	740	3922	129	42	18
Pleasley ... ..	*1788	356	1953	68	21	6
Shirebrook ... ..	*1505	1890	10982	451	151	78
Scarcliffe ... ..	3954	533	2718	113	33	12
Ault-Hucknall ... ..	4429	373	2086	59	26	7
Langwith ... ..	1492	106	660	15	9	4
Glapwell ... ..	774	19	117	0	1	0

\*Estimated.

**Table showing the Number of New Houses Erected  
Annually since 1897.**

PARISHES.	1897.	1898.	1899.	1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.	1908.
Blackwell	5	16	4	11	16	27	17	10	6	2	6	21
Normantn	24	27	23	15	16	66	42	37	32	5	7	20
Tibshelf	22	10	10	8	18	37	34	10	20	3	3	3
Pinxton	9	8	4	2	123	55	32	100	99	6	11	21
Pleasley	24	11	13	26	9	0	0	2	1	0	0	30
Shirebr'k	102	258	148	169	167	151	135	47	24	80	130	92
Scarcliffe	4	33	31	33	23	6	1	0	3	0	1	2
Ault-Hck'l	0	0	0	1	1	1	47	1	0	0	0	44
Langwith	0	0	0	0	5	0	48	0	0	0	2	1
Glapwell	0	0	0	0	0	0	0	0	0	0	0	1
Total ...	190	363	233	265	378	343	356	207	185	96	160	235



**Births and Birth-rate.**—The total number of births registered during the year was 1,415, showing an increase of 39 on the corresponding period of 1907.

The Birth-rate for the year was 36·8 per 1,000 of estimated population. This figure is practically the same as that recorded for the year 1907.

The Birth-rate for England and Wales during the same period was 26·5 per 1,000 of population, and for Rural England and Wales 26·2 per 1,000.

Formerly it was my custom to divide the District into two parts, one comprising the parishes of Blackwell, Normanton, Tibshelf and Pinxton, and forming the Sub-district of Blackwell; the other consisting of the parishes of Pleasley, Shirebrook, Scarchiffe, Ault Hucknall, Langwith and Glapwell, and constituting the Sub-district of Pleasley. My reason for so doing was that the population of the former consisted largely of miners, whilst the latter contained relatively few. These distinctions now practically cease, owing to the development of the mining industry in a north-easterly direction.

Statistics show that the inhabitants in the more northern portions of the District are more prolific as evidenced by comparison of the birth-rate per 1,000 in the respective portions. The Pleasley Sub-district shows a rate of 38·1 per 1,000, as compared with 35·6 per 1,000 for the Blackwell Sub-district. This is not to be wondered at when it is borne in mind that it is the younger men who always migrate into districts offering more constant employment.

The Birth-rate for the country generally has been gradually declining for a number of years past. This is an unfortunate occurrence, particularly as the decline is most marked in the middle and upper classes, who usually make a more careful selection of partners in life than those who have inferior social advantages. If this state of things progresses indefinitely it will inevitably result in serious consequences.



**Deaths and Death Rate.**—The actual number of deaths of inhabitants belonging to the District was 507, but the number of deaths at all ages recorded by registration in the District was only 502, the remaining 5 having occurred beyond the District.

During the year previous 579 deaths were recorded. The Death-rate for 1908 works out at 13·14 as against 15·3 for the year previous.

The Death-rate for England and Wales during 1908 was 14·7 per 1,000, and for Rural England and Wales 13·8. It will therefore be observed that the rate for the District compares very favourably even with that of Rural England. As far as this District is concerned, the year under consideration compares even more favourably with the ten preceding years, which show an average Death-rate of 15 per 1,000.

The lowest Death-rate in the contributory parishes of the district occurred at Blackwell, where it stood 8·2 per 1,000; the highest was found in South Normanton, where it reached 18·6. This was due to an outbreak of Measles which occurred there, and which was directly responsible for 9 deaths, and indirectly, no doubt, for a very large number of the cases which were reported as Pneumonia, which is a fatal sequel of Measles. Practically all the parishes in the District show a decline, but perhaps Shirebrook furnishes the most encouraging instance, as the rate fell there from 17·1 in 1907 to 13·7 in 1908, with a population, be it borne in mind, bordering on 11,000.

Heart disease was responsible for 27 deaths during the year, Bronchitis for 30, Pneumonia for 67, Accidents for 30, and Old Age for 29.

**Infantile Mortality.**—During the year 1908, 212 children died before attaining the age of 1 year. This total is equal to a Death-



rate of 149·8 per 1,000 births. When considering the Infantile Death-rate for the various parishes of the District, it will be noticed that considerable variation occurs in the different localities. Why this should happen when the conditions appear to be so uniform is difficult to explain. The parish of Blackwell has a rate of only 73·8 per 1,000 births for the year, and for the ten preceding years an average of only 112·6. The adjoining parish of South Normanton, where the conditions are practically identical, has a rate for the year of 188·9, the average for the ten preceding years being 170·0.

Whilst the general death rate for England and Wales has been declining for many years past, it has been noticed that until 1901 the Infantile Death-rate shewed no decrease. For 50 years prior to that date it maintained a rate of something like 150 per 1,000 births, sometimes being slightly more and at other times a little less.

The year 1907 witnessed the lowest rate ever recorded, when it fell to 118 per 1,000 births. It has been computed that for the year we are now considering it reached 121. So long as that standard can be maintained for the country generally, there is no need for alarm. The Notification of Births Act for 1908 was introduced with the object of putting local authorities into touch with parturient women, so that where home surroundings are of an unhealthy kind, visiting nurses could call and give instructions to mothers how best to feed and protect their offspring. The passing of the Midwives Act of 1902 should have the effect of strengthening the hands of the Local Authorities, by ensuring that a more intelligent and better trained class of women be present during the time of confinement. This would tend to reduce infantile mortality by ensuring that prompt measures of resuscitation be performed when necessary, or that abnormalities be early detected, and suitable medical assistance obtained.



Statistics prove conclusively that the lower you get in the social scale, the higher the infantile mortality becomes, for it is in slum life that it reaches its maximum height. This evil might be considerably mitigated by the appointment of a nurse, whose duty it should be to follow up the management of all newly-born infants in quarters where parental neglect and mismanagement are conspicuously present. Provided that an infant can be steered through the first 12 months of its life, its prospect of gaining maturity is very considerably increased. The Right Honourable John Burns, now President of the Local Government Board, has made a statement to the effect that the Medical Inspectors of the Board are specially concerned in the question of food supplies for infants. The diseases which contribute most largely to Infantile Mortality are those arising from injudicious feeding, diarrhoea heading the list. I should like to take this opportunity of pointing out that convulsions, which occupies a prominent position in the category of diseases specially confined to children, is due to the absorption of products from the alimentary canal, arising from fermentative and other viscous processes. Diseases of the lungs, particularly broncho-pneumonia, are responsible for an immense number of deaths each year. No doubt many of these might be avoided if, during the colder months of the year, children were better housed and fed.

**Zymotic Diseases and Rates of Mortality.**—The number of notifiable infectious diseases occurring in a District varies considerably from year to year, and depends largely on the numbers of unprotected persons living in the localities. It must, however, be admitted that there are other causes at work specially influencing the spread of disease, about which at present we know very little. The year under consideration for instance is essentially a Diphtheria one, and Diphtheria is a disease of which the spread is to a considerable extent under control. In spite of every effort that is being made to limit its extension by the early injection of Anti-toxin, it still continues to be very prevalent in this and the adjacent localities.



Returns show that 198 cases of Infectious Disease have occurred during the year. These relate to Scarlet Fever, Diphtheria, Typhoid Fever, Erysipelas, and Puerperal Fever. It is gratifying to note that only on three occasions, since the adoption of the Notification Act in 1889, has that total been less.

In the absence of Notification there are no means of ascertaining to what extent Measles and Whooping Cough have prevailed. That an epidemic of Measles of considerable proportions occurred at South Normanton there can be no doubt, as the mortality from that disease in that parish amounted to 9 deaths.

Of the deaths from the seven principal Zymotic diseases on which the Death-rate is based, Measles contributed 13, Scarlet Fever 1, Whooping Cough 10, Diphtheria 2, Enteric Fever 3, and Diarrhoea 37, making a total in all of 66.

The Zymotic Death-rate per 1,000 of population for the whole of the District was 1.7, being the lowest but one recorded for the last 16 years. Although the rate is relatively low for this neighbourhood, the fact must not be lost sight of that when compared with the country generally and Rural England in particular it is still far too high. The rate for the whole of England and Wales for 1908 was 1.29 and for Rural England .99 per 1,000 of population. Until we are able to cope more effectually with such diseases as Diarrhoea, Measles, and Whooping Cough there is little hope of reducing this Death-rate. It has been ascertained that in a neighbouring locality 75% more children die through hand-feeding than when the child is wholly breast-fed, the majority succumbing to Diarrhoea.

## Deaths from the seven principal Zymotic Diseases.

		Number.		Rates of Mortality per 1,000 of Population.
1891	...	49	...	2.9
1892	...	55	...	3.1
1893	...	41	...	2.2
1894	...	35	...	1.8
1895	...	48	...	2.5
1896	...	93	...	4.3
1897	...	64	...	2.8
1898	...	62	...	2.5
1899	...	122	...	4.7
1900	...	102	...	3.7
1901	...	99	...	3.4
1902	...	63	...	1.9
1903	...	62	...	1.8
1904	...	61	...	1.75
1905	...	66	...	1.85
*1906	...	49	...	1.30
1907	...	97	...	2.6
1908	...	66	...	1.7

\*The lowest recorded for the last 15 years.



Table showing the Number of Cases Notified and Deaths from the principal Zymotic Diseases,  
for the year 1908 and ten preceding years.

DISEASES.	1908		1907		1906		1905		1904		1903		1902		1901		1900		1899		1898	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Notifiable.	..	..	0	0	0	0	2	0	21	3	5	0	12	0	..	..	..	..	..	..	..	..
	132	1	211	4	272	6	119	4	124	3	81	0	78	1	187	5	210	3	188	2	152	4
	16	2	40	7	42	6	19	1	48	3	177	12	105	23	22	7	23	4	10	9	16	1
	31	0	36	2	50	1	36	1	37	0	54	1	48	5	46	2	46	1	34	0	32	0
	1	0	3	0	7	5	5	0	2	0	5	2	3	3	0	4	2	3	1	0	7	1
Non-Notifiable.	18	3	21	1	63	6	50	2	29	4	32	1	14	2	52	3	82	7	147	12	127	10
	..	2	..	15	22	34	..	34	16	16	27	26	..	67	..	..	..	36	52	42	..	..
	..	13	..	40	4	16	..	16	14	14	11	4	..	6	..	..	..	31	44	1	..	..
	..	10	..	30	5	9	..	9	11	11	11	7	..	11	..	..	..	20	3	4	..	..
	..	4	..	4	3	5	..	5	4	4	3	6	..	5	..	..	..	7	6	6	..	..
PHthisis ..	..	24	..	26	8	13	..	13	28	28	24	13	..	19	..	..	..	24	13	23	..	..



## Cases of Infectious Diseases Notified during 1908.

The monthly distribution of cases was:—

	Small Pox.		Scarlet Fever.		Typhoid Fever.		Diphtheria.		Puerperal Fever.		Erysipelas.		Total.	
	1907	1908	1907	1908	1907	1908	1907	1908	1907	1908	1907	1908	1907	1908
January	0	0	15	12	1	1	5	3	1	0	8	2	30	18
February	0	0	38	7	3	0	2	3	0	0	2	0	45	10
March ...	0	0	18	12	2	4	3	0	1	1	0	4	24	21
April ...	0	0	18	10	1	0	3	2	0	0	2	2	24	14
May .....	0	0	11	15	5	1	7	1	0	0	3	1	26	18
June .....	0	0	11	12	0	0	4	3	0	0	5	0	20	15
July .....	0	0	11	3	0	1	5	1	1	0	1	4	18	9
August ...	0	0	15	14	0	1	1	0	0	0	2	3	18	18
Septembr	0	0	13	20	4	2	1	1	0	0	4	3	22	26
October	0	0	17	9	2	3	0	0	0	0	2	4	21	16
Novembr	0	0	23	13	1	3	6	1	0	0	4	5	34	22
Decembr	0	0	21	5	2	2	3	1	0	0	3	3	29	11
	0	0	211	132	21	18	40	16	3	1	36	31	311	198

The Infectious Diseases (Notification) Act was adopted at a meeting of the Council held on 7th November, 1889, but did not come into operation until January 1st, 1890. The cost of administering this Act in each complete year since its adoption was as follows:

Year.	Cases notified.		£	s.	d.
1890	...	276	38	5	0
1891	...	272	38	15	0
1892	...	135	16	12	6
1893	...	324	39	10	0
1894	..	116	18	15	0
1895	...	92	11	12	6
1896	...	314	38	10	0
1897	...	268	30	7	6
1898	...	334	41	5	0
1899	...	382	47	0	0
1900	...	363	44	10	0
1901	...	306	37	17	6
1902	...	260	32	10	0
1903	...	354	44	5	0
1904	...	261	32	12	6
1905	...	232	29	0	0
1906	...	434	54	5	0
1907	...	313	39	2	6
1908	...	198	24	15	0
			£669	10	0



**Form filled in in every case of Infectious Disease notified.**

Disease .....  
 Name of Patient..... Age.....  
 Address.....  
 Occupation..... Rent.....  
 Medical Attendant..... First called in.....  
 Notified.....  
 No. of Rooms—Living..... Sleeping.....  
 No. of Inmates—Adults..... Children..... Lodgers.....  
 Day School Attending..... Sunday.....  
 Milk Supply.....  
 Water Supply\*.....  
 How Isolated.....  
 Previous Illness of Patient.....  
 Illness in Locality—Diarrhoea, Sore-throat, etc.....  
 How long Resident in House.....  
 Recent visits to other Houses.....  
 Privy—Privy Midden..... Distance from Houses.....  
 Do.            do.            Condition..... Construction.....  
 Drainage.....  
 Nuisances—Hen-houses, Piggeries, Stables, Cowsheds, Ditches,  
                  Stagnant Water, Manure, etc., requiring removal.....  
 Probable Source of Infection.....  
 Remarks .....

**PRECAUTIONS ADOPTED.**

Patient Removed to Hospital.....  
 Schoolmaster Written to.....  
 Date of Disinfection.....  
 School Closed.....  
 Termination } Date of Recovery.....  
                  of case. } Date of Death.....

Inspector.

\*If from well, note depth, and nearest possible source of pollution.



Table showing Vital and other Statistics during 1908, per 1,000 of Population.

Parish.	Area in Acres.	Popula- tion.	Average Persons per House.	Number of Inhabited Houses.	Birth- rate.	Death- rate.	Infantile Death- rate.	Zymotic Death- rate.	Respi- ratory Diseases.	Phthisis Death rate.	Other Tubercu- lous Diseases.
Blackwell ...	1739	4627	5.3	873	32.2	8.2	73.8	.6	1.5	—	.2
Normanton ...	1934	6281	5.2	1208	40.4	18.6	188.9	2.2	4.7	1.1	.9
Pinxton ...	1253	5088	5.1	998	34.8	13.7	158.2	.5	2.3	.2	.3
Tibshelf ...	2371	3922	5.3	740	32.8	10.7	140.0	.2	2.5	.2	.5
Shirebrook ...	1438	10982	5.8	1890	41.0	13.7	172.9	3.2	2.4	.8	1.3
Scarcliffe ...	3954	2718	5.1	533	41.5	12.1	106.1	2.2	2.2	.3	1.4
Ault Hucknall	4429	2086	5.6	373	28.2	12.4	118.6	.95	.4	1.0	1.4
Pleasley ...	1721	1953	5.4	356	34.8	10.7	88.2	1.5	2.0	—	—
Langwith ...	1492	660	6.3	106	22.7	13.6	266.6	1.5	1.3	—	—
Glapwell ...	774	117	6.1	19	Nil.	8.5	Nil.	Nil.	Nil.	—	—



**SCARLET FEVER.**—The number of cases of Scarlet Fever brought under the notice of the Medical Officer during the year by notification was 132, as compared with 211 for 1907. Upper Langwith appears to have been the only parish to have escaped infection. This may appear rather strange at first sight when it is noticed that the adjoining parish of Scarcliffe had by far the greatest number of cases of any in the District, but the explanation is to be found by the fact that the inhabitants have little or no inter-communication. The four western parishes, viz: Pinxton, South Normanton, Blackwell and Tibshelf were only slightly involved. The prompt Hospital Isolation of all cases where infection was likely to occur no doubt had the effect of controlling the spread of the disease in those parishes. The Scarcliffe epidemic was so spontaneous in character that it became impossible to isolate the cases in hospital quickly enough. The disease was practically confined to two hamlets, viz.: Hillstown and Palterton. The origin could be distinctly traced to children attending the Bolsover Schools, which at that time were receiving infected children. The fact that we were able to prevent an epidemic occurring at Shirebrook with a population nearly 11,000, speaks well for Hospital Isolation, and to my mind fully justifies the action taken by the Derbyshire Joint Hospital Board in erecting an Isolation Hospital within a mile of that, the most populous parish in the District.

In considering the matter, the fact should not be overlooked that very strict measures were taken to secure very effective disinfection by the use of a high pressure steam disinfecter, which was used chiefly for dealing with infected bedding. In addition to these measures, every infected house was visited by the Inspector of Nuisances, and fumigated with the vapour of Formic Aldehyde, and at the same time printed instructions were left how best to prevent the spread. With the exception of steam disinfection, the same measures were adopted for the four western parishes. I should like to take this opportunity of again bringing under the notice of the Council the importance of providing an additional steam Disinfecter for the use of the four parishes referred to.



The following is introduced to show the number of cases notified in each of the contributory parishes of the District for the year, the case mortality and case rate per 1,000 of population.

	No. of Cases.	Deaths.	Case rate per 1,000 population.	Case mortality per cent.
South Normanton ...	11	0	1.7	Nil.
Tibshelf ...	11	0	2.8	Nil.
Pinxton ...	1	0	.2	Nil.
Blackwell ...	25	0	5.4	Nil.
Shirebrook ...	14	0	1.3	Nil.
Pleasley ...	1	0	.5	Nil.
Scarccliffe ...	66	1	24.2	1.5
Ault Hucknall ...	3	0	1.4	Nil.
Langwith ...	0	0	Nil.	Nil.
For the whole district	132	1	3.4	.7

**HOSPITAL TREATMENT.**—The prompt isolation of every Scarlet Fever case in the District in one of the Hospitals provided by the Joint Hospital Board, very largely removes at once the risks of infection to others. This, in a thickly populated locality, is of the greatest possible importance, and to my mind is practically the only means of preventing a wide-spread epidemic. The cost of carrying this out is undoubtedly great, but the benefits derived more than justify this policy. During the year a reduction from 2/- per case per day has been made to 1/6, as the Board are not allowed to make a profit. The attention the patients receive while in Hospital gives complete satisfaction, both to the patients and parents. When the Hospitals were first opened there was some difficulty in persuading parents to allow their children to be removed, but it no longer exists, as they almost invite the removal.

**SMALL POX.**—The fact that we have enjoyed freedom from this disease for a number of years past is not without some risk as to the



future, by encouraging a belief that vaccination may have lost some of its effacacy in preventing the spread of one of the most loathsome of infectious diseases.

Preventative measures other than that of vaccination undoubtedly play an important part in controlling the spread of Small Pox, and ought to be rigidly enforced by all Public Authorities on every possible occasion. But the more artificial immunity against disease is understood by the community generally, the fewer the opponents of vaccination will become. Bearing very closely on this subject is the fact that the injection of serum in Diphtheria has robbed it of its terrible fatality, whilst the injection of anti-streptococcus serum for the prevention and cure of Acne, Lupus and Erysipelas is the recognised course of procedure.

#### DIPHTHERIA :—

	1908.	1907.	1906.	Mean for 10 preceding years.
Number of Cases ...	16	40	42	50.2
Number of Deaths ...	2	7	2	7.3
Death rate per 1,000 ...	.05	.18	.16	2.3
Case rate per 1,000 ...	.41	1.07	1.15	1.6
Case mortality per 100	12.5	17.5	14.3	14.5

I have on a previous occasion in this report referred to the fact that certain years possess conditions which favour the spread of certain of the infectious diseases more than others, and about which we at present know very little. Diphtheria is one of the diseases which fall into this class.

Since the discovery of the micro-organism responsible for the cause and spread of Diphtheria, a great deal of very valuable information has been obtained, which may possibly have the effect of clearing up much of the ignorance I have referred to. Until quite recently the methods used for preventing the spread of Diphtheria could be summed up in the triple combination of notification, isolation and disinfection. Thanks to the science of Bacteriology,



we are now able to add an extra string to our bow, which consists in the injection of anti-toxic serum. In cases where this can be carried out early enough, recovery can almost be guaranteed, whilst as a preventative measure it is none the less powerful. Strange as it may seem, it is quite true that persons may contain the infection in their air passages without knowing it or ever showing the slightest symptom. These people may act as carriers, spreading the disease broad-cast. The sooner we get rid of the notion that it is spread through bad drains and insanitary conditions the better. These conditions may act as predisposing causes, but there is no very conclusive evidence even on that score. The fact that we have been able to control the disease in this District so very effectively, whilst our neighbours have suffered severely, is due, I have little doubt, to the practice of supplying anti-toxic serum free to medical men, and remunerating them for the trouble of injecting it.

It will be noticed on referring to the statistical data at the commencement of this subject, that the period under consideration compares very favourably with former years.

The parishes involved were Normanton 1, Shirebrook 5, Pleasley 6, and Scarcliffe 4.

### TYPHOID FEVER.

	1908.	1907.	1906.	Mean for 10 preceding years.
Number of Cases ...	18	19	63	62
Number of Deaths ...	3	1	6	4.8
Death rate per 1,000...	.07	.026	.16	.15
Case rate per 1,000 ...	.46	.51	1.7	2.0
Case mortality per cent.	16.6	5.2	9.5	7.7

It will be observed on perusing the above figures and comparing one year with another, that although the cases were not numerous, the case mortality was very high. I find on referring to my returns that all the three cases died before attaining the age of 15 years, which must be considered rather unusual, as enteric acquires its



highest fatality in middle life. The disease never at any time during the year assumed an epidemic character, and many of the cases were sporadic, caused by outside infection.

**Precautions taken to prevent the spread:**—Thirteen of the cases were removed to one of the Isolation Hospitals.

The cases were distributed as follows : Normanton 3, Pinxton 1, Tibshelf 2, Shirebrook 5, Scarccliffe 6, and Ault Hucknall 1. Of the 3 deaths, one occurred in Shirebrook, one in Scarccliffe, and one in Ault Hucknall.

Considering that the District has a population now bordering on 40,000, a case rate of only .46 cannot be considered otherwise than satisfactory. One of the causes affecting the spread of Typhoid Fever is infected dust, therefore it is of the highest importance that every possible means should be adopted for preventing its accumulation and allaying its distribution. This may be greatly facilitated by keeping the back yards and premises well paved, and in times of dry weather making free use of the watering can. Flies undoubtedly have an influence in determining the spread of Typhoid, by conveying infected material on to articles of food. Perhaps I ought to take this opportunity of pointing out that recent investigations have shown that quite a number of people may possess the power of infecting others with this disease who are themselves quite ignorant of the fact, not having apparent a single symptom of this disease about them. This fact goes a long way to explain small outbreaks in isolated districts where no possible history can be obtained of infection.

Every infected house was visited by one of the Inspectors, and in all cases where removal was not carried out, special Typhoid pails were provided for the reception of infected stools, and removed by the scavenger appointed. All infected bedding was subjected to high pressure steam disinfection, and the rooms, after careful cleansing, were fumigated with Formic Aldehyde Gas. Fourteen



houses were invaded, and in two instances two cases were notified simultaneously, so that there were only two cases due to secondary infection.

Printed instructions were left, and a liberal amount of disinfectants supplied.

**SUMMER DIARRHŒA.**—During the year no less than 37 persons succumbed to this disease, of whom 30 were children under 1 year of age. Regarding these 30 deaths, the following figures show the age distribution.

1—3 months.	3—6 months.	6—9 months.	9—12 months.
4	5	15	6

It is held by those most competent to judge, that feeding plays a most important part in the causation of this disease. Dividing infants into two classes, we have the breast-fed and the bottle-fed.

In breast-fed children Diarrhœa is usually due to the feeding, whilst in the bottle-fed it is due to the food. In the former instances the attacks are generally slight and readily yield to treatment, whilst in the latter class the attacks are often very severe, proving fatal in the course of a day or two, no matter how carefully nursed or properly treated. It will be noticed that during the first six months of life only 9 deaths occurred, but during the last six months 21 deaths took place.

It is a common custom amongst mothers of the working classes to allow their offspring, after about six months of age, to partake of practically everything that happens to be on the table, and this kind of dieting has a most prejudicial effect on the digestive organs of the child, setting up changes which result in the most intractable Diarrhœa. Statistics show that it is during the summer months when the ground has reached its highest temperature that the disease becomes most prevalent.



The contamination of food through the agency of flies is a factor to be considered, hence the importance of guarding against this evil by never allowing food to be exposed longer than possible to their access. The sterilization of milk by boiling before use is always advisable, but particularly so during the hot summer months.

Refuse of every description should never be allowed to accumulate for any length of time about premises. A very large amount can be got rid of at once by burning, instead of being allowed to wait for the scavenger.

The following particulars show the quarterly distribution of deaths.

Jan., Feb., Mar.	April, May, June.	July, Aug., Sept.	Oct., Nov., Dec.
0	0	22	15

The parishes in the District were involved as follows :—

	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908
Blackwell	2	0	1	3	1	2	1	1	2	6	1	0	0	2	0	0	3
Normntn	3	3	5	5	7	1	7	5	2	8	3	3	3	5	1	0	4
Tibshelf	1	0	2	3	0	1	4	5	0	5	0	2	1	1	1	1	1
Pinxton	0	3	0	2	2	2	4	1	1	3	2	2	6	11	5	3	3
Pleasley	0	2	2	1	2	2	3	1	2	3	0	0	0	2	0	0	1
Shirebr'k	0	0	0	5	12	14	16	27	27	33	18	18	5	12	14	11	22
Scarcliffe	3	6	1	3	2	0	4	3	4	8	2	2	0	0	0	0	2
Ault Huck	4	6	1	3	2	0	0	1	2	1	0	0	0	0	0	0	1
	13	20	12	25	28	22	39	44	40	67	26	27	15	33	21	15	37

At that season of the year when this disease becomes prevalent, handbills were distributed throughout the locality advising mothers how best to cope with this evil (vide end of report). In addition to the methods already adopted to prevent the spread of Summer Diarrhœa, some good might possibly accrue if a course of lectures were given to senior girls just before leaving school on general principles of Hygiene, which would, of course, include details how best to clothe and feed young children.



**MEASLES.**—It will be recollected that this disease was very prevalent throughout the District during the year 1907, causing 40 deaths. It is therefore not to be wondered at that the disease continued into the year under consideration. On examining the monthly distribution of deaths caused by Measles, it was found that two took place during the 1st quarter of the year, nine in the second quarter, one in the 3rd quarter, and one in the 4th, making a total in all of thirteen. A fact of considerable importance should not be lost sight of when considering the fatality of this disease, viz: that the mortality from Bronchitis is always greater during those years when Measles is most in evidence.

In the absence of notification we have no means of ascertaining the actual number of cases in any part of the District, but from information obtained through the school authorities and other sources, there is reason to believe that the whole of the District was implicated, though the parishes of South Normanton and Shirebrook were the only two in which any fatality was found. Regarding the closing of Schools for this disease, I am strongly of opinion that the only good likely to accrue from this measure is to be found in attacking the Infants' department. Unfortunately the disease has often gained a good footing before we are able to obtain any information of its existence.

**WHOOPING COUGH.**—The spread of this disease, like Measles, is due to the presence of a micro-organism, not yet satisfactorily isolated. Its habitat is confined to the nose and air passages, hence it is spread by close contact. At present I see no hope of either arresting or preventing the spread of this disease when once it is introduced into a school—short of isolation. Ten deaths occurred during the year as against 20 for 1907. Four parishes appear to have been involved, viz.: South Normanton, Shirebrook, Pleasley, and Scarccliffe. It is in the after effects in Whooping Cough and Measles that the great fatality lies, and as the only means of combating this is to be found in good nursing it is here that the appointment of Lady



Visitors would prove of great value, by giving suitable advice to mothers, and seeing, by frequent visitation, that that advice is carried out.

## RURAL SANITARY DISTRICT OF BLACKWELL.

# ANNUAL REPORT.

### GENERAL STATISTICS.

#### AREA IN ACRES:—

Land, 21,219 acres.      Water, 20 acres.      Total, 21,239 acres.

	Census, 1891.	Census, 1901.	Estimated, 1908.
Population ...	16,858	28,735	38,434
Inhabited Houses	3,077	5,514	7,096

New Houses erected during the year, 230.

Rateable Value, £160,557.      Assessable Value, £152,026.

General Expenses of Council, 9½d. in the £.

### VITAL STATISTICS.

Birth Rate.	Infantile Mortality.
36.8	149.8

#### Death Rates per 1,000.

All Causes	Epidemic Diseases.	Enteric Fever and Diarrhoea.	Phthisis.
13.4	1.7	1.04	.62

Has Infectious Diseases Prevention Act, 1890, been adopted? Yes.

Has Public Health Acts Amendment Act, 1890, been adopted? Yes.

Has District Council been recommended to adopt Notification of Births Act, 1907? Yes.



Has Public Health Acts Amendment Act, 1907, been adopted ? Still before the Local Government Board.

If so, what Sections ?

## REPORT.

1.—OCCUPATION of inhabitants and influence of any particular occupation on health, especially lead poisoning.	Mining, Agriculture, Railway work.
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### 2.—HOUSE ACCOMMODATION.

Its adequacy and fitness for habitation.	Supply meets demand.
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Houses closed during the year.	Three.
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Date of Building Bye Laws.	May, 1896.
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### 3.—SEWERAGE AND SEWAGE DISPOSAL.

Works constructed during the year and works still required.	For particulars see report of Medical Officer of Health, 1908.
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### 4.—EXCREMENT DISPOSAL.

Approximate number of houses on			
Privy Middens	Pail Closets	Water Closets	Slop Water Closets
3,380.	3,200.	236.	56.

No. of houses converted from privy middens to water closets.	No. of defective privies improved.
39.	401.

### SCAVENGING.—

Population for which there is public scavenging.	28,226.
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If done by servants of District Council, under contract, or by occupiers of houses.

Part by Contract and part from District Council.

Costs of scavenging and cost per house per annum in the several parts of the District. (N.B.—If you can compare cost of scavenging houses on W.C. system with houses with privies, please do so).

	s.	d.
Shirebrook ...	8	7
Pleasley . . .	7	7½
Tibshelf ...	8	8½
S. Normanton	5	6
Pinxton ...	5	6

Details of scavenging. State how often refuse is removed and give details of methods of scavenging.

Privy pails emptied once, twice and thrice weekly, ash-bins weekly, ash-pits when necessary.

In Rural Districts state contributory places in which Urban powers are in force with regard to scavenging.

Shirebrook.  
Pleasley.  
Tibshelf.  
South Normanton.  
Pinxton.

#### 5.—WATER SUPPLY of District and its several parts.

No. of houses supplied with public supply.

6,425.

Nature of such supply, sufficiency and freedom from pollution of same.

From the Bunter beds and Magnesian limestone.

No. of houses with no supply within 100 yards.

None.

No. of houses supplied from surface wells.

661.



No. of houses supplied from springs	10.
Particulars of any supplies which are liable to pollution.	Doe Lea Cottages.

6.—Action taken with regard to places over which Council have supervision. State if Bye-laws and Regulations have been adopted, and give dates of same.

Lodging-houses.	Yes.	Sept. 23rd, 1897.
Slaughter-houses.	Yes.	Feb. 11th, 1908.
Dairies and Cowsheds.	Yes.	Feb. 16th, 1888.
Bakehouses.	No.	
Offensive Trades.	Yes.	Feb. 5th, 1903.
Factories and Workshops.	No.	

7.—SCHOOLS.

Sanitary condition and action taken with regard thereto.	The privies at Scarccliffe Schools brought up to more modern requirements.
Action taken with regard to prevention of Infectious Disease.	Children kept away in infected houses and teachers notified.
Number closed on account of Infectious Disease.	None.

8.—NUISANCES.

Any special nuisances requiring abatement.	The conversion of Privies and Pail Closets into W.C.s., and paving of Back Yards.
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## 9.—INFECTIOUS DISEASES.

Details of action taken after Notification to prevent spread of disease.

	Small Pox.	Scarlet Fever.	Diphtheria.	Enteric Fever.	Puerperal Fever.	Erysipelas.
No. of cases notified :—	0	132	16	18	1	31
No. of cases removed to Hospital.	0	66	0	13	0	0
Return cases	0	4	0	0	0	0

Suggestions for diminishing risk of return cases.

Additional precautions with respect to running ears, and discharging noses.

Is Antitoxin provided free of charge for persons who cannot afford to pay for it ?

Yes.

Details of methods of disinfection and disinfectants used. State if disinfection is carried out by Inspector.

Rooms fumigated with Formic Aldehyde, bedding disinfected in steam disinfectant.

No. of articles disinfected by steam.

*Vide Inspector's returns at end of report.*

## 10.—FURTHER REQUIREMENTS OF DISTRICT.

An additional High Steam Pressure Disinfectant for Southern District.

The adoption of Notification of Births Act, 1907.

The General Notification of Phthisis.



RURAL SANITARY DISTRICT OF BLACKWELL.

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## ANNUAL REPORT.

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SCHOOL MEDICAL OFFICER, 1908.

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NUMBER OF CHILDREN INSPECTED.

				AGE.	MALES.	FEMALES.
Entrants ...	...	...		4-5	404	349
Leaving ...	...	...		12-13	107	133
Others ...	...	...		4-5	5	3
TOTAL ...					516	485

NUMBER OF CHILDREN IN RESPECT OF WHOM DIRECTIONS WERE GIVEN  
FOR TREATMENT OF DEFECTS.

No. Examined.	Vermineous.	Ringworm.	Other Skin Diseases.	Defective Vision.	Defective Hearing.	Nasal obstructions from enlarged tonsils and adenoids.	Heart Disease.	Tuberculosis.		Deformities.	St. Vitus' Dance.	Paralysis.	Mental Condition.		Epilepsy.
								Phthisis.	Other.				Dull and backward.	Mentally deficient.	
1001	220	12	28	33	23	60	45	5	—	8	2	1	57	10	1

45

AVERAGE HEIGHTS AND WEIGHTS.

	Age.	Feet.	Inches.	Pounds.	Number Examined.
BOYS	4-5	3	4.3	38.4	404
"	12-13	4	7.8	73.7	107
GIRLS	4-5	3	4.3	37.	349
"	12-13	4	8.5	77.	141
					1001



**MEDICAL INSPECTION OF SCHOOL CHILDREN.**—During the year 1907 certain provisions of the Education Act were passed, authorising County Councils and Municipal Boroughs to make provision for the Medical Examination of children attending Elementary Schools.

Important memoranda have been issued by the Board of Education for the guidance of the bodies responsible for the carrying out of the Educational Provisions.

Medical inspection of school children is the natural outcome of a system of public education.

As a nation, England is very conservative in these matters compared with other countries. As far back as 1878 Sweden insisted upon an examination being made of each child at the commencement of its school career.

Brussels commenced the medical examination of school children even at an earlier date, as the year 1874 witnessed the inauguration of this system. For the last 30 years certain cities in Germany have adopted a similar course. Switzerland, Scandinavia, France and America have been engaged in examining children for many years past, so that England is practically the last nation to realise the great importance of this work.

The aims of Medical Inspection are three-fold :—

1. “ To advise alterations in curriculum adapted to the special needs of the child ; exclusion from school altogether ; admission to special classes ; exemption from special subjects ; the allotment of special positions in class ; and to indicate harm already done to a particular child by school methods in vogue.”

2. “ To obtain treatment or amelioration of defects after demonstrating their existence.”

3. “ To collect statistics for national use, showing how different environments act upon growing organisms ; to compare town and county, town and town, and especially decade with decade.”



The County Council of Derbyshire have appointed as School Medical Officers a large number of the Medical Officers of Health of the District. This is a course which I think must lend itself to the approval of most persons, as the work is one which appears to harmonise with the duties of the Medical Officer of Health of the District. There are many matters touching the fringe of his work, which he has power to deal with under one or other of the Public Health Acts, and over which an outsider has no jurisdiction.

**PRESENCE OF PARENTS.**—Parents are allowed to be present whilst the examination is being made, and in very many instances they have taken advantage of this privilege. In many cases it is a decided advantage to have them there, as they are able to furnish particulars of heredity and previous infectious and other diseases.

Before leaving this subject I should like to say what a very important part is played by the teachers during the examinations. At the best it is arduous work, but the task is very considerably lightened by the courtesy and consideration so plentifully and graciously shown by them on every possible occasion.

**CONDITION OF SCHOOLS.**—One of the chief duties of the School Medical Officer is to pay particular attention to the manner in which the lighting, ventilation and heating of schools are carried out.

In many of the recently constructed schools, the architect has succeeded in fulfilling all reasonable demands as to lighting, ventilation, heating and sanitation generally. Special facilities have also been afforded the teacher for the convenient demonstration of natural history subjects, such as the substitution of drawing slates up to a certain height for the colour-washed wall. There are others, however, throughout the county, of a very obsolete character, where light, heat and ventilation are the last things to be thought about.



As far as your district is concerned, I have been at considerable trouble to ascertain certain data, which I now present for your consideration in tabulated form.

The Medical examination of school children has revealed many matters of interest and importance, and perhaps the two which have struck me most have been the large number of verminous heads found, particularly in girls. The other feature has reference to the condition of the throat. It is a rare thing to find a thoroughly normal throat. The degree of mischief varies considerably in different schools, and appears to be confined more particularly to the Infants' Department.

In most of the modern Schools, ample cloak room accommodation has been provided, but in some of the older Schools the provision that has been made is very inadequate. In some instances the passages have to serve the purpose, whilst in others a dark ill-ventilated room has to suffice. A better system of warming and ventilating cloak-rooms is much needed, particularly as some children have long distances to walk, and in wet weather their outer clothing gets very wet. I have noticed in some instances that the hat-pegs are insufficient and placed too near together, and until some radical change is accomplished in this particular, we are bound to have at all times some verminous heads present in almost every school. A gradual improvement is being made in the condition of the play-grounds, but there are still some left which are little short of a disgrace. It is obvious that in cold, wet weather this must have a very prejudicial influence amongst the very young, particularly where the foot-gear is defective. There is great need for reform both in the heating and ventilating of Schools. In too many instances the schools are either too hot or too cold. There is a marked want of care in effecting a more uniform temperature. I have known the temperature of certain schools on commencing morning work not to stand higher than 45 degrees Fahrenheit; this is a matter which can be readily corrected, and ought never to be allowed to happen. Unfortunately there is not sufficient attention paid to the selection



of caretakers. In some instances I know, the wife or one of the other members of the family is delegated to discharge the duties. If the temperature is to be kept fairly uniform, a little art is required in regulating the firing, as is well known to all greenhouse keepers. In using a little more judgment and care, I am quite sure the cost of coal might be lessened.

Good ventilation consists in securing a frequent change of atmosphere in every part of the room without producing obvious draught. As it is at present carried out, in too many instances certain parts of the room are quite unfit to sit in, owing to the manner in which the windows are constructed. It is obvious that where the sash and swing frames are used, there must of necessity be a direct current.

**DUSTY SCHOOL-ROOMS.**—We are badly in need of some better method of keeping down dust.

The practice of allowing schools to be used for purposes other than education is not a good one, as it leads to a general disorganization of the room, as well as the carrying of material, which, when dried, gets diffused in every part of the building in the form of dust, sometimes of a most objectionable character. The replacement of school furniture after these meetings is usually delayed until next morning, when it necessarily creates a dust, which has not time to settle before the children assemble. The lighting of the rooms is in many instances insufficient through want of more window space and the ridiculous manner in which the windows are situated. The more frequent cleaning of windows would be a very great improvement in almost all instances.

It is impossible to over-estimate the value of the work done by the nurse. This is not so obvious at first sight, and it is not until a second and third visit has been paid to a School that her work can be fully appreciated. The improvement in the condition of heads, the clothing, and the general state of the skin was remarkable.



This improvement was especially noticed by the teachers, who have not failed to express on many occasions their appreciation of the nurse's work. I may say it is now quite an uncommon thing to find a child insufficiently clothed, and rare to find one whose clothing is so unclean as to call for more than a slight reprimand. The nurse informs me that the reception she has met with in many of the homes she has visited is most encouraging, and mothers have shown their willingness to carry out the instructions she has given to them.

### PHTHISIS AND TUBERCULOSIS.

Death rate of Phthisis in the District	...	.62	per 1,000 population
„ „ other Tubercular diseases	...	.88	„ „
„ „ Phthisis and other Tuberculous diseases combined	}	1.50	„ „

A disease capable of claiming 60,000 victims annually, and costing the country ten millions per annum, is worthy of more than a passing consideration. Particularly so, as it is held by those who know that the mortality from Phthisis is able to be lessened very materially.

Sir Shirley Murphy was able to show that over-crowding and a high Phthisis death-rate go hand-in-hand. The three interim reports of the Royal Commission on Tuberculosis show that the commissioners are quite satisfied that the bacilli of tubercule may be present in fœces of tuberculous cows. This being so, it is of the utmost importance that a much more careful watch should be kept on milk supplies than has ever before been done.

The administration of the Dairies, Cowsheds and Milkshops Order needs to be very stringently observed. Unfortunately in the past it has been more or less a dead letter, but the time of awaking has now arrived, and any sluggishness in this matter now becomes almost a crime. Any kind of a shanty has been considered good enough for the housing of a milch-cow, in which light, ventilation, and drainage were the exception rather than the rule.



A microscopic examination of the deposit found at the bottom of some of the tins which convey milk from the country to the large centres of population, shows them to contain foreign matter, not infrequently including the germs which inhabit the intestines of the animal.

Disgusting as this may seem, it is none the less true, and until our authorities grapple earnestly with this matter by putting into force the powers they have, little good will ever accrue. The time for the general notification of Phthisis is now ripe. As a move in this direction, an Order was issued by the Local Government Board dated December 18th, 1908, authorising the notification of this disease by all District Medical Officers, Medical Officers of Poor Law Institutions, and Superintending Officers of such Institutions.

In some Urban and Rural Districts a system of voluntary notification has been secured, but this has only been found to be partially successful. When it is borne in mind that Tuberculosis is a preventable disease, and can be arrested in its early stages by carrying out a certain line of treatment, the importance of having an official list of every case in the District is very great.

The diminution of over-crowding and the influence of improved sanitation assist in combating this disease by increasing the resistance of the population to infection.

At present it is quite impossible to carry out Sanatorium treatment in every case, but where it can be obtained the opportunity ought not to be lost. One of the greatest advantages secured by this method of treatment is of an educational character. Patients seldom leave the Institution perfectly cured, but during their temporary stay they have learned by very rigid discipline how best to regulate their mode of living in the future.

The earlier the disease is discovered the better the chances are of out-door treatment.

The Nottinghamshire Association for the Prevention of Con-



sumption has issued the following instructions which appear to embody most of the points a consumptive ought to observe :

## INSTRUCTIONS TO CONSUMPTIVES.

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Your three chief wants are Fresh Air, Rest, and Good Food.

**1. FRESH AIR.**—You cannot have too much fresh air, and should try to spend at least eight hours a day out of doors.

When indoors, keep the bed and sitting rooms as nearly like the outside air as possible, by keeping the windows wide open. Never sleep with the windows shut, however cold may be the weather. A draught is much less dangerous than a stuffy room ; indeed some draught or current of air is necessary to good ventilation. Avoid all crowded rooms, such as theatres, concerts, and public meetings.

**2. REST.**—One great danger to persons with, or recovering from, consumption, is the tendency to take too violent exercise. At first it is best to spend several hours of the day sitting or lying out of doors, well wrapped up in cold weather and sheltered from the wind. Later on, gentle walks may be taken, and the distance walked gradually increased week by week. If your temperature goes up, you are exerting yourself too much. If it goes above 100 degrees you should spend most of the day resting. If your temperature remains normal and your weight increases, you may gradually increase your exercise.

Running, jumping, and all heavy or dusty work are forbidden. Always rest for an hour before and after meals.

**3. TEMPERATURE.**—Take your temperature in the mouth three times a day, before breakfast, after dinner and at bed time,



and record it in your diary. Wash the thermometer in cold water immediately after using it, and keep it in a jar of disinfectant\*.

**4. WEIGHT.**—Weigh yourself, if possible, once a week, and keep a record of your weights.

**5. FOOD.**—The ordinary full meals of a healthy man should be taken. Eat slowly, and try to finish your meal, even if you do not feel hungry. Drink two or three pints of boiled milk daily, and avoid alcoholic stimulants, unless specially ordered by the doctor.

Milk is a complete food, but there is no real nourishment in wine, spirits, beer, or stout.

*\*Disinfectant Solution may be made of Izal, 2 teaspoonfuls to a pint of water, or Carbolic Acid, 2 tablespoonfuls to a pint of water.*

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## PRECAUTIONS AGAINST INFECTION.

**PHLEGM.**—The phlegm contains the **germs of consumption**, and must never be allowed to dry and get into the dust of the house.

When indoors spit into a mug, and when out of doors into a pocket-spittoon. Empty the mug and spittoon into the fire, and rinse well with hot water. Keep a little disinfectant\* in the mug and spittoon.

After coughing, the lips may be wiped with pieces of rag, which should be burnt at once, or with a handkerchief kept in a linen bag, and not loose in the pocket, or under the pillow. Used handkerchiefs should be boiled daily, and the bag once a week.

Consumptives must not be kissed on the lips.

If these precautions are taken, and the room kept airy, light, and clean, there is not much risk of infection. Another person may share such a room, but not the same bed.



Cups, spoons, and other feeding utensils must be kept separate and scalded after using.

**SCAVENGING.**—A sum of £1,748 5s. 4d. was spent in scavenging 5,192 houses during the year. This does not by any means represent the whole of the work done, as the Blackwell Colliery Co., the Sheepbridge Coal & Iron Co., and the Midland Railway Co. undertake the scavenging of their own houses, which are equal to a total of something like 600.

The following details are of interest as showing the amount expended in each parish per annum, and the cost per house per annum.

Parish.	Contractor.	Cost per Year.			Cost per House per Annum.	
		£	s.	d.	s.	d.
Pinxton ...	A. Mott ...	266	2	0	5	6
S. Normanton ...	R. W. Lomas...	226	13	4	3	10½
Tibshelf (upper)	F. Clarke ...	215	0	0	} 8	8½
Tibshelf (lower)	F. Richards ...	105	10	0		
Pleasley ...	S. H. Downs...	130	0	0	7	7½
Shirebrook ...	H. Woods ...	695	0	0	8	7
Langwith ...	By Council ...	100	0	0		
(Emptying of Cesspools)						
Scarscliffe ...	By Council ...	10	0	0		
(Emptying of Cesspools)						

I have maintained for some years past, and still maintain, that the work could be done more economically and satisfactorily if the Council were to undertake it themselves. Regarding the manner in which the work has been done during the year, from information I have received, some improvement might be effected. Many complaints have been made from time to time that the ash-pits were only partially emptied, and that the contents of the privy pails were slopped about in a very reckless manner. If the Council had the personal management of this work, these evils could be easily remedied, but as it is, the contractors feel that if the work is to pay it must be done at almost a break-neck speed. The 26 cesspools at Upper Langwith (Langwith Junction) are costing the Council over



£100 per annum for emptying. The completion of the scheme now under consideration for sewerage this part of the parish will do away with this cost. Public Authorities throughout the country are finding that it is to their advantage to put in water-closets wherever practicable. The extra cost incurred in doing so is so small, and the advantages so great, that it seems difficult to realize why builders of property should hesitate in adopting the water-carriage system. The fact that the council no longer charge for water supplied to w.c's. should be an additional inducement. Dr. Boobyer, Medical Officer of Health for Nottingham, has been able to show from statistics he has been able to obtain, that Typhoid Fever and Summer Diarrhœa are less prevalent amongst the inmates of houses where w.c's. have been provided, than where privy middens or pail closets exist. Any factor capable of reducing the cost of scavenging, and at the same time improving the general sanitation of the District, is worthy of your consideration. This, I am convinced, applies in adopting a water-carriage system.

**REFUSE DESTROYER.**—The difficulty of finding suitable places for the deposit of house refuse has forced upon the Council the advisability of considering the construction of Refuse Destroyers in the most populous parts of the District. At a meeting of the Council held late on in the year, a committee was formed to consider the matter, especially as to cost and the best kind to adopt. The committee were empowered to visit such places as the Surveyor considered would be likely to assist them in forming a decision.

**SEWERAGE AND SEWAGE DISPOSAL.**—The large amount of money which is expended annually in the purification of Sewage makes this subject one of very great importance. In taking a retrospective view of this matter, many members of the Council will recollect the various systems introduced from time to time, many of which are now considered obsolete. Judging from present results, we appear now to have got beyond the experimental stage, and are



on a much more firm basis. By the methods now in vogue it is possible to purify sewage to any extent, but there is no advantage whatever in carrying the process beyond the point which admits of it being discharged into a river or water-course without causing detriment to fish and cattle, or otherwise producing a nuisance. Many of the outfall works in your District are now achieving this object. The old idea that sewage was capable of purifying itself without the assistance of manual labour is now given up, and all authorities realize that a certain annual expenditure is necessary.

The Royal Commission which is now sitting has not yet issued its final report, but from the interim reports which have been published from time to time, we have been able to glean the trend of events, and construct our new outfall works accordingly.

It will be recollected that the year 1907 witnessed a very large amount of work done by the Surveyor in all parts of the District. Portions of the work inaugurated in 1907 remained at the end of the year incomplete, and were therefore carried into the period we are now considering. For the guidance of the members of the Council, I have endeavoured to systematise the work by showing what has been done for each parish.

BLACKWELL.—The existing outfall works in the parish are :—

1. Primrose Hill.
2. Newton Green.
3. West Houses (a).
4. West Houses (b).

There is still a portion of this parish known as Hilcote and B. Winning which is without a sewage scheme. The sewage at the present time is being dealt with by means of cesspools, which, if properly emptied, are very expensive, and if not properly attended to are quite useless. To meet with this difficulty, a scheme has been prepared by the Surveyor at an estimated cost of £1,222. The adjoining parish of South Normanton is similarly placed, and it



has been suggested that it should unite with Blackwell in supporting a common scheme. For some time past, considerable attention has been given to this matter by the members of the two parishes, and Blackwell agreed to accept the scheme, whilst South Normanton are still considering the question. It is very important that this matter be dealt with without delay, as considerable pollution of the stream is taking place. In the month of January the 9" sewer at Newton Green was extended at a cost of £25. In the months of March and April there was an extension of the 3" water main in Alfreton Road and Mount Pleasant, Newton, at a cost of £49 5s. 6d.

Near West Houses Station a considerable leakage of water was discovered to be taking place in the old main, and to remedy this defect a new 3" water main was laid.

The question of forming Parochial Committees has for some time been exercising the attention of the Council, but the members have not all been of one mind on the subject. Blackwell happens to be one of the parishes to lead the way, and has obtained the requisite permission for putting into force the delegated powers.

#### SOUTH NORMANTON.—OUTFALL WORKS—

- (a) Main Works.
- (b) Birchwood Lane.

The completion of the Main Outfall works is urgently needed. It will be recollected that in my last report I dealt at considerable length with this subject, and, after consulting with the Surveyor, we agreed upon what we considered it advisable to have done for the completion of these Outfall Works. I am not aware that any of the suggestions then made have been put into practice. I strongly urge that this work be no longer postponed, as considerable pollution of the river adjoining the outfall works is taking place. By the expenditure of a comparatively small sum, a very efficient Sewage Scheme could be provided, and one in which current expenses would be unusually low, as we depend on a very large amount of automatic



action. I have already referred under the heading of Blackwell to a scheme for dealing with the sewage of certain houses at B. Winning, situated in this parish. During the year no less than three schemes have been prepared for dealing with the sewage of Berrister Row, and submitted to the Parish Council for their consideration, but up to now nothing has been done. In July the Surveyor presented a report, showing how a better supply of water could be given to the Alfreton Road end of the parish at an estimated cost of £360. Tenders were invited and duly received, but the matter is still in abeyance. A 2" main has been laid in the road leading to Jacques' brickyard, at a cost of £10.

#### PINXTON.—OUTFALL WORKS—

- (a) Main Works.
- (b) Pinxton Green.
- (c) Broomhill Lane.
- (d) Old Outfall Works.

(a) MAIN OUTFALLS. I am pleased to be able to report that the Sewage at these Works is being satisfactorily treated, and that the nuisances arising therefrom have been largely abated. According to the County Council's Report of the effluent obtained, the sewage is being very efficiently dealt with.

(b) PINXTON GREEN. The scheme for dealing with the sewage from Pinxton Green foreshadowed in my Report for 1907 has been carried out at a cost of £441. Now that this work has been done, the parish as a whole is very completely sewered.

I have nothing to add with regard to the other outfall works beyond what I expressed in my report of last year.

#### SHIREBROOK.—OUTFALL WORKS—

Negotiations respecting the treatment of the sewage from Langwith Junction have been under consideration during the year,



and several meetings have been held on the subject for the purpose of deciding a site on which to treat the sewage. This matter has added a special interest to Shirebrook, as it has been felt all along that the only suitable outlet was on the Shirebrook Outfall Works. Pending future arrangements, the completion of the Outfall Works at Shirebrook have remained in abeyance. There is still a good deal of work to be done to make this scheme thoroughly efficient. Additional filter-beds require to be laid down to be able to deal with all tank effluent.

**SURFACE DRAINAGE.** Certain parts of this parish require an extension of the surface drains, and until this is done the benefits which ought to accrue from the work which has already been done in the lower parts of the parish are very largely discounted. It should be borne in mind that Shirebrook has a very irregular surface, some parts attaining quite a considerable altitude. In times of storm the surface water from the higher localities rushes at random along lines of least resistance, instead of being conducted in properly constructed channels.

The erection of two new houses in Station road has necessitated an extension of the sewer at a cost of £36.

#### PLEASLEY—

The contract for carrying out the scheme for dealing with the sewage of this parish, as prepared by Messrs. Vallance & Westwick, was let to Messrs. Lane Bros., at a cost of £2,100 7s. 6d. At the end of the year the work was approaching completion, but until the plant has been in working order for some time it is quite impossible to give any satisfactory report as to results. A very detailed report of the proposed work was given in my Annual Report of last year, but I may say, for your guidance, that the sewage is first treated in duplicate settling tanks, capable of dealing with 20,000 gallons of sewage per day. It is then delivered on to two circular percolating filters, each having a diameter of 46 feet and 6 feet in depth. An



arrangement has been made for the construction of a third filter on this site if the necessity should arise. The distribution of the sewage is effected by means of circulating iron arms.

#### TIBSHELF—

No additions or alterations have been made at the outfall works during the year. The sewage continues to be dealt with on lines as described in my previous Reports, and as no complaints have been received during the year, it is only fair to presume that the work has been done satisfactorily.

#### SCARCLIFFE—

A new sludge lagoon has been constructed at Hillstown for the purpose of relieving the two already in existence, which were incapable of dealing with the contents of the settling tank at the time of emptying.

The following is the Memorandum prepared by Mr. F. P. Cook, A.M.I.C.E., of Mansfield, for dealing with the sewerage of Langwith Junction.

The intended works are within the Parish of Upper Langwith, excepting a length of sewer between the southern limit of Upper Langwith Parish and the existing 9" sewer in Shirebrook parish.

It is intended to convey the whole of the sewage from the area proposed to be dealt with to the adjoining sewerage system of Shirebrook parish, and to treat the same upon the existing disposal works belonging to Shirebrook.

Shirebrook parish is within the Blackwell Rural District Council's area.

The sewers will all be laid upon the "separate" system; the surface water arising from the streets being dealt with, as at present, by independent means.



The present number of houses erected within the area to be dealt with is 72.

Taking the number of inhabitants per house at 6, gives a total to be dealt with of 432 persons.

The estimated amount of water used by the inhabitants is 12 gallons per head per diem, or for the whole of the existing population 5,184—say 5,000 gallons per diem, which may be taken as the dry weather flow.

On account of the variation in the parish levels it is not possible to deal with the sewage of the area now under consideration upon land within the parish of Upper Langwith.

Careful levels and other information have been obtained with a view to carrying out a pumping scheme and putting down disposal works within the area, but the cost is so great as compared with a connection to the Shirebrook sewage system, that it is thought desirable to drain the new sewer into the Shirebrook system.

Formal sanction was given by the Local Government Board for the Shirebrook Scheme on March 18th, 1902.

Arrangements have been made by the Upper Langwith Authority with the Shirebrook Parish Council for taking the sewage to the Shirebrook disposal works, which are ample for every requirement.

All sewers will be of best stoneware, jointed in approved Portland cement and clean sharp sand (2 sand to 1 cement).

A flushing chamber of 1,500 gallons capacity will be built at the head of the sewer, worked by a penstock arrangement, and the water will be taken from the local supply, having  $1\frac{1}{2}$ " stop-cock for charging the tank as occasion requires.

Six inch Ventilating shafts will be erected at high points along the line of sewer, 25 feet out of the ground.



The complete scheme is illustrated on 4 sheets of Drawings accompanying this application, and details of the estimated cost are set out upon the Local Government Board forms, shewing an estimate of £1,222 1s. 0d., the amount likely to be required for satisfactorily carrying out the works.

FRANK COOK,

Mansfield,

Assoc. M. Inst. C. E.

August, 1908.

**WATER SUPPLY.**—The amount of water consumed in the under-mentioned parishes as indicated by meter readings is as follows :—

**BLACKWELL—**

		1908.	1907.
1st Quarter	...	3,471,000	3,609,000
2nd „	...	3,747,000	3,619,000
3rd „	...	3,878,000	4,173,000
4th „	...	3,815,000	3,703,000
		<hr/>	<hr/>
Total gallons		14,911,000	15,104,000
Which equals 9 gallons per head per day.			

**SOUTH NORMANTON—**

		1908.	1907.
1st Quarter	...	5,450,000	5,001,000
2nd „	...	5,337,000	4,744,000
3rd „	...	5,517,000	4,880,000
4th „	...	4,989,000	5,222,000
		<hr/>	<hr/>
Total gallons		21,293,000	19,857,000
Which equals 9 gallons per head per day.			

**PINXTON—**

		1908.	1907.
1st Quarter	...	997,000	2,243,000
2nd „	...	1,077,500	884,000
3rd „	...	1,054,000	968,000
4th „	...	1,863,000	716,000
		<hr/>	<hr/>
Total gallons		4,991,500	4,811,000
Which equals 7 gallons per head per day.			

## TIBSHELF—

		1908.	1907.
1st Quarter	...	3,180,000	3,139,000
2nd	„ ...	3,452,000	3,306,000
3rd	„ ..	3,227,000	3,428,000
4th	„ ...	3,268,000	3,060,000
Total Gallons		13,127,000	12,933,000

Which equals 9 gallons per head per day.

## SHIREBROOK—

		1908.	1907.
1st Quarter	...	7,400,000	8,420,000
2nd	„ ...	6,100,000	9,093,000
3rd	„ ...	6,310,000	9,963,000
4th	„ ...	6,340,000	8,976,000
Total Gallons		26,158,000	36,452,000

Which equals  $6\frac{1}{4}$  gallons per head per day.

## PLEASLEY—

		1908.	1907.
1st Quarter	...	1,523,000	2,109,000
2nd	„ ...	1,265,000	1,769,000
3rd	„ ...	1,373,000	1,992,000
4th	„ ..	1,332,000	1,717,000
Total gallons		5,493,000	7,587,000

Which equals 8 gallons per head per day, for the houses supplied from the public supply.

Numerous analyses of water have been taken during the year, including samples taken from the public supplies and other sources. In every instance the results were satisfactory as regards the public supplies, but some taken from local wells showed signs of pollution, and were deemed quite unsuitable for drinking and domestic purposes.



The following analysis represents the quality of the water as supplied to the parishes of South Normanton, Blackwell, Tibshelf, and Pleasley.

In parts per 100,000 :

Total Solids	...	...	12
Free Ammonia	...	...	.001
Organic Ammonia	...	...	.002
Nitrogen (as Nitrites & Nitrates)			.38
Chlorides	...	...	1.00

The above data show that the water is of exceptional purity, leaving nothing to be desired. It should be borne in mind that many samples of water may be quite free from organic pollution, but at the same time the water may possess qualities rendering it of doubtful suitability for both drinking and domestic purposes.

The Shirebrook public supply is obtained from an entirely different geological formation from the above, and is considerably harder in character, but its purity is beyond question. This difficulty is got over by the use of a softening process (known as Clarke's) and worked by the Colliery Company, who have agreed that the water shall not exceed 10 degrees of hardness. The number of local wells in the District is now reduced to a negligible quantity. There is not a single parish in the District which has to depend for its supply on local wells, the only cases where such a supply has to be relied upon are in the outlying districts not reached by the public mains.

It is as well to bear in mind when considering the water supply of your district, that the sources on which we must depend are rendered somewhat precarious by coal-mining, and it may be necessary at some future date to obtain a supply from the Derwent Valley Water Board. This scheme, which has been in progress for a number of years, is approaching completion, and so far as your

district is concerned a point has already been reached where the main supply could be tapped. The quality of the water as supplied from this source is represented by the following analysis, which shows the state in parts per 100,000 :

Total Solids	...	...	5.0
Free Ammonia	...	...	.002
Albuminoid Ammonia	...	...	.005
Total Hardness	...	...	2.0
Chlorine	...	...	1.0
Nitrogen	...	...	Nil.

The quality of the water from this source is exceptionally good, perhaps even better than that obtained from the bunter beds, out of which the Mansfield and Sutton Councils obtain their supply.

**Table showing in detail Houses supplied by Public Services.**

Name of Parish.	No. of Houses.	Per centage supplied.	Gals. $\frac{1}{2}$ per day.	Gals. $\frac{1}{2}$ head per day.	Source of Supply
Ault Hucknall	329	62	Unlimited.	Unlimited.	Sheepbridge Coal & Iron Co.
Blackwell ...	873	94	48	9	{ Sutton Urban Council & Mansfield Corporation.
Glapwell ...	18	0	0	0	Local wells only.
Pinxton ...	998	91	35	7	Basford R. D. Council.
Pleasley ...	356	97	43	8	{ Mansfield Corporation, The Duke of Devonshire, and Mr. Verney's supply.
Shirebrook	1880	96	38	6 $\frac{1}{2}$	Shirebr'k Colliery Co. supply
Scarccliffe	531	55	Un-known.	Un-known.	The Bolsover Water Co.
S. Normantn	1208	97	47	9	Sutton Urban Council.
Tibshelf ...	740	99	48	9.3	Mansfield Corporation.
U. Langwith	106	67	Un-limited.	Un-limited.	{ Duke of Devonshire and Mr. Birkitt's (Polterwell).



**DISINFECTION.**—The amount of money spent in disinfectants during the year was £38 0s. 0d. The disinfectants in general use are Izal and Formalin. The various scavengers in the District were provided with a stock of Izal Powder with instruction to use it liberally in their work. In every infected house in the District, one of the forms of Izal is used for disinfecting drains, privies, and clothing, and the vapour of Formic Aldehyde used in fumigating infected rooms.

A high-pressure steam disinfector, which at present is stationed at Shirebrook, is used for dealing with bedding and other wearing apparel.

**BACK YARDS.**—The Inspectors of Nuisances are paying special attention to the paving of the back yards in their Districts. It is quite impossible to remedy all the defects in one year, but the work is progressing quite satisfactorily, indeed, at the present time, one of the Inspectors has 99 back yards under repair.

**FACTORIES AND WORKSHOPS.**—There are two factories in the District, situated in Pleasley Vale, owned by Messrs. Wm. Hollins & Co., Ltd., these have been visited periodically during the year, when attention was given to the closet accommodation, ventilation, and means of escape in case of fire.

The following is a list of the workshops found in each parish of the District, and classified according to the various trades :—

		Ault Hucknall	Blackwell	Glapwell	Pinxton	Pleasley	Shirebrook	Scarliffe	S. Normanton	U. Langwith	Tibshelf	Total
Aerated Waters ..	..	..	..	..	..	..	1	..	..	..	..	1
Bakehouses ..	..	..	..	..	1	..	3	..	4	1	2	11
Boot Repairing ..	..	..	2	..	4	1	8	3	3	..	3	24
Blacksmith ..	..	1	1	1	3	1	1	2	2	..	1	13
Brick Making ..	..	1	..	..	..	..	1	..	3	..	..	5
Cycle Repairing ..	..	..	..	..	1	..	4	..	1	..	1	7
Dressmaking ..	..	1	..	..	4	2	16	2	2	..	11	38
Engine Cleaning ..	..	..	1	..	..	..	..	..	..	1	..	2
Gas Works ..	..	1	1	..	1	1	1	..	..	..	1	6
Hosiery Finishing ..	..	..	..	..	..	..	..	..	2	..	2	4
Joinery ..	..	..	1	..	2	..	3	1	3	..	2	12
Millinery ..	..	..	..	..	2	..	7	1	4	..	4	18
Malting ..	..	..	..	..	..	..	..	..	..	1	..	1
Printing ..	..	..	..	..	1	..	1	..	1	..	..	3
Saddlery ..	..	..	..	..	..	..	2	..	1	..	..	3
Saw Milling ..	..	1	1	..	3	1	1	1	1	..	2	11
Tailoring ..	..	..	..	..	..	..	1	..	1	..	..	2
Waggon Repairing ..	..	..	..	..	..	..	..	..	..	1	..	1
		5	7	1	22	6	50	10	28	4	29	162



Annual Report of the Medical Officer of Health for the year 1908,  
for the Blackwell Rural District Council, on the administration  
of the Factory and Workshop Act, 1901, in connection with  
FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES,  
AND HOME-WORK.

I.—INSPECTION.

	Inspec- tions.	Written Notices.	Prose- cutions.
Factories, (including Factory Laundries) ...	7	0	0
Workshops (including Workshop Laundries) ...	299	4	0
Workplaces (other than out-workers' premises) included in Part III. of this Report ...	80	3	0

II.—DEFECTS.

Nuisances under the Public Health Acts—

	Found.	Reme- died.
Want of Cleanliness ... ..	1	1
Other Nuisances ... ..	3	3

III.—HOME WORK.

Outworkers' Lists, Section 107—

	Lists.	Out- workers
Lace, lace curtains and nets—		
Lists received from employers twice in the year	4	8
Ditto ditto once in the year	3	3
Number of Addresses of Outworkers received from other Councils ... ..		8
Number of Inspections of Outworkers' Premises ...		49
Outwork in Unwholesome Premises, Section 108—		
Notices served ... ..		1
Outwork in Infected Premises, Sections 109, 110—		
Instances ... ..		1
Orders made (Sec. 110) ... ..		0

## IV.—REGISTERED WORKSHOPS.

Bakehouses	...	...	...	...	...	...	...	11
Boot Repairing	...	...	...	...	...	...	...	24
Dressmaking	...	...	...	...	...	...	...	38
Millinery	...	...	...	...	...	...	...	18
Others	...	...	...	...	...	...	...	28
Workplaces	...	...	...	...	...	...	...	43
Total number of Workshops on Register								162

JOHN O. LITTLEWOOD,

*Medical Officer of Health.*

31st December, 1908.

**SLAUGHTER HOUSES.**—On February 11th, 1908, the sanction of the Local Government Board's bye-laws with respect to slaughter houses was signed. The adoption of the bye-laws has considerably strengthened the hands of the Council in securing premises properly equipped for the slaughter of cattle, and at the same time enabling the officers of the Council to deal with defects in existing structures over which previously they had no jurisdiction. Great improvements have already been effected, and before the year 1909 is out every slaughter house will have been put into a satisfactory condition.

In several instances licenses for the erection of new premises have been refused.

**BAKEHOUSES.**—There are 11 registered in the District, some of which are underground, all of which have been visited from time to time by the Inspector of Nuisances. It has been found necessary for two notices to be served, authorising the owners to provide better drainage. They have all been lime-washed from time to time during the year.

**OFFENSIVE TRADES.**—The only trade coming under this designation in the District is tripe-boiling. There are three now on the Register, at one of which an entirely new floor has been put down.



**COWSHEDS, DAIRIES AND MILKSHOPS.**—It was felt by some of the members of the Council that the orders with respect to cowsheds, dairies and milkshops were somewhat obsolete in character, and the time was ripe for reconstructing them, so as to meet all modern requirements. Information regarding the spread of Tuberculosis through the agency of infected milk, which has been brought to light quite recently, and embodied in certain recommendations made by conferences to discuss the spread of Tuberculosis, have directed public attention to this important problem.

Early in the year a committee was formed to consider the revision of the Cowsheds, Dairies, and Milkshops Orders. The officers of the Council especially interested in the subject, met on several occasions and carefully went through the existing orders. After considering each order individually, they reported the result to the sub-committee, which, after receiving the consideration of the Council, was forwarded to the Local Government Board for approval. The matter is in abeyance awaiting their sanction. For further information see remarks under Phthisis and Tuberculosis (page 50).

At the end of the year there were 168 cowsheds, dairies, and purveyors of milk registered in the District. The Inspectors of Nuisances have been busy during the year visiting these places, as shown by the fact that no less than 490 inspections have been made, and 27 notices served with regard to cleansing, drainage, and ventilation.

**ISOLATION HOSPITALS.**—During the year a new Isolation Hospital has been erected and opened at Upper Langwith, capable of dealing with 22 Scarlet Fever, and 6 Typhoid Fever cases. It has not been found advisable to admit Diphtheria cases on account of extra convenience required for isolation. This Hospital, situated as it is, in the centre of a large population, cannot fail to have a powerful influence in preventing the spread of disease. There are four other Isolation Hospitals available for use in this District, more particularly for patients living on the western border. The number of cases admitted for isolation in one or other of these institutions during the year was 79. The cases consisted of 66 Scarlet Fever, at a cost of £264 2s. 6d. which equals £4 per case, and 13 Typhoid Fever at a gross cost of £44 3s. 6d., which equals £3 13s. 7½d. per case.



# ANNUAL REPORT OF SANITARY INSPECTOR.

BLACKWELL (NORTHERN) SANITARY DISTRICT.

Name of Inspector, WILLIAM HILL.

Area of District 13,808.

Estimated No. of Houses 3,277.

New Houses erected 1908, 170.

	Informal Notices Served by Sanitary Inspector.	Legal Notices Served by Local Authority.	Nuisances Abated.
<b>DWELLING HOUSES—</b>			
Repaired .. .. .	54	—	81
Closed as Unfit for Habitation ..	—	—	—
Infected Houses Disinfected ..	80	—	—
<b>DRAINAGE—</b>			
No Disconnection of Waste Pipe ..	6	1	6
Defective Traps, Inlets, and Drains	49	16	49
Drains Obstructed .. .. .	84	4	84
<b>CLOSETS AND ASHPITS—</b>			
Insanitary Privies and Ashpits ..	204	15	317
Insufficient Closet Accommodation	23	13	23
Conversion of Privies into W.C.'s	13	—	—
Defective Water Closets .. ..	7	—	7
<b>OTHER DEFECTS—</b>			
Surfaces of Courts and Yards ..	72	5	371
Eaves-Spouts and Down-Spouts ..	43	4	140
Urinals Defective .. .. .	5	1	5
Water Supply .. .. .	4	1	5
Offensive Accumulations .. ..	173	17	401
Animals Improperly Kept .. ..	33	—	33
Pigsties .. .. .	19	—	19
Smoke Nuisances .. .. .	—	—	—
Overcrowding .. .. .	6	2	5
Foul Condition of Houses .. ..	7	3	6
<b>Totals</b> ..	<b>882</b>	<b>82</b>	<b>1552</b>
	Number on Register.	Inspections Made.	Notices Served.
Dairies, Cowsheds, and Milkshops ..	85	231	7
Bakehouses .. .. .	4	39	2
Slaughterhouses .. .. .	14	316	9
Offensive Trades .. .. .	2	40	—
Common Lodging-houses .. ..	—	—	—
<b>Totals</b> ..	<b>105</b>	<b>626</b>	<b>18</b>

Action taken by Inspector against spread of Infectious Disease—  
 36 Patients removed to Hospital, [gas.  
 Rooms fumigated with Formic Aldehyde  
 Bedding of Typhoid cases steam disinfected.

Samples of Water submitted for Analysis 4

Other Action taken—Weekly Inspection of Market at Shirebrook, and Slaughter-houses.

Signed, WILLIAM HILL.



# ANNUAL REPORT OF SANITARY INSPECTOR.

BLACKWELL (SOUTHERN) SANITARY DISTRICT.

Name of Inspector, S. WILMOT, Cert. R. San. I.

Area of District 7,297.

Estimated No. of Houses, 3,965.

New Houses erected 1908, 65.

	Informal Notices Served by Sanitary Inspector.	Legal Notices Served by Local Authority.	Nuisances Abated.
DWELLING HOUSES—			
Repaired .. .. .	28	—	44
Closed as Unfit for Habitation ..	1	4	3
Infected Houses Disinfected ..	—	—	55
DRAINAGE—			
No Disconnection of Waste Pipe ..	4	3	8
Defective Traps, Inlets, and Drains	26	7	44
Drains Obstructed .. .. .	76	—	99
CLOSETS AND ASHPITS—			
Insanitary Privies and Ashpits ..	41	—	84
Insufficient Closet Accommodation	3	—	10
Conversion of Privies into W.C.'s	4	—	26
Defective Water Closets .. ..	11	3	33
OTHER DEFECTS—			
Surfaces of Courts and Yards ..	25	1	46
Eaves-Spouts and Down-Spouts ..	6	1	16
Urinals Defective .. .. .	1	—	1
Water Supply .. .. .	14	1	15
Offensive Accumulations .. ..	51	4	102
Animals improperly kept .. ..	14	8	15
Pigsties .. .. .	11	2	111
Smoke Nuisances .. .. .	—	—	—
Overcrowding .. .. .	3	2	3
Foul Condition of Houses .. ..	3	2	3
Totals ..	322	38	718
	Number on Register.	Inspections Made.	Notices Served.
Dairies, Cowsheds, and Milkshops ..	83	259	20
Bakehouses .. .. .	7	84	—
Slaughterhouses .. .. .	23	400	5
Offensive Trades .. .. .	—	—	—
Common Lodging houses .. ..	—	—	—
Totals ..	113	743	25

Action taken by Inspector against } 41 cases removed to Isolation Hospital, bed-  
spread of Infectious Disease— } ding and rooms disinfected.

Samples of Water submitted for Analysis 13.

Other Action taken.—Scavenging Superintendent at South Normanton, Tibshelf, and Pinxton.

Signed, S. WILMOT, C.R.S.I.

MANSFIELD METEOROLOGICAL REPORT FOR  
THE YEAR 1908.

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**SUMMARY.**

**JANUARY.**—Atmospheric pressure fairly even, a sudden fall on the 8th with much wind. Temperature very changeable. Mean temperature 34.4, minimum 14.5, maximum 40.1. Rainfall 1.13 on 15 days. Skating 2nd to 5th. Gales 6th, 7th, 8th, 9th, and rough winds during last week. Fogs 17th to 25th. Winds chiefly W.

**FEBRUARY.**—A steady barometer and pleasant weather until the 22nd. On that date the barometer suddenly fell, and at three o'clock in the afternoon a tremendous gale swept across the country, with hail, rain, snow, thunder and lightning, doing much damage. Wind was N.W. Mean temperature 39.5, mean maximum 44.5, lowest reading 25.0. Much sunshine, average 72.2. S.W. and N.W. winds predominated.

**MARCH.**—Barometer low and uneven until the middle of the month, then high until the 22nd, afterwards unsettled. Mean temperature 38.8, mean maximum 44.3, lowest reading 21.6. A cold, unsettled month with snow 14th to 18th. Cold easterly winds. Gales 29th and 30th.

**APRIL.**—A cold, backward April. Snow on ten days, hail on three days. Easterly winds. Spells of bright sunshine, cold nights, the mean minimum 31.2 is very low. Mean temperature 42.6, mean maximum 49.1. Lowest reading 25.6 on the 23rd.

**MAY.**—Atmospheric pressure fairly even throughout. Mean temperature about the average. Mean maximum 64.5. No frost.



Much bright sunshine with westerly winds. Rainfall 2.52 on 18 days.

JUNE.—A high barometer throughout a beautiful month. The mean maximum 67.6 is about the average. Nights cold from the 18th to the 24th. Mean temperature 56.8. Lowest reading 35.0 Slight ground frost on the 19th and 20th. Severe thunderstorm on the night of the 3rd. Total rainfall 2.74 on 11 days. Easterly and N.E. winds predominated.

JULY.—Atmospheric pressure regular, except from 12th to 18th. Mean temperature 54.6. Lowest reading on the 7th, 40.5. Mean maximum 69.4. Thunderstorms pretty frequent from the 5th to the 18th. The last fortnight beautiful. The Auroral display on the 1st was a grand sight. Winds the first week E., afterwards N. and W.

AUGUST.—Barometer fairly high and even until the 24th, then a sudden fall. Mean temperature 57.0 below the average. Cold nights on the 10th, 11th, 17th, 30th. Fine, with plenty of sunshine until the 20th. Mean maximum 65.1. Prevailing winds E.N.E. and W.

SEPTEMBER.—A warm pleasant month, mean temperature above the average, last few days exceptionally warm with much sunshine. The mean temperature is the highest since 1895. The mean maximum 62.6, the highest reading 81.4 on the 24th, the lowest reading 34.0 on the 11th. Rainfall slightly above the average, 2.68 on 20 days. Winds S. and S.W.

OCTOBER.—Atmospheric pressure fairly high and even. The heat which marked September continued into October. Bright and sunny, the warmest October yet recorded. Mean temperature 52.5. Mean maximum 59.7. Lowest reading on the 24th, 30.0. Rainfall .91 on 17 days. Predominating winds S., S.W. and Westerly.

NOVEMBER.—A high barometer until the 8th, then a slight fall, high again on the 14th until the 22nd, then a sudden drop, high again on the 24th to the close. Mean temperature 34.7. Mean maximum 49.1. Lowest reading on the 9th, 20.0. Rainfall, 1.47 fell on 15 days. Frost on .9 nights. Predominating winds W. and S.W.

DECEMBER.—A mild month until the 24th, then a severe week with heavy snow and frost. Mean temperature 37.1. Mean maximum 44.1. Lowest reading on the 29th, 7.0 and on the grass 3.3. Rainfall 2.83 on 21 days.

Total rainfall during the year 29.35 inches.

PHILIP J. SHACKLOCK.



*Form sent to every case of Typhoid Fever notified.*

BLACKWELL RURAL DISTRICT.

## TYPHOID FEVER.

### NOTICE TO OCCUPIERS OF INFECTED HOUSES.

*It has been brought under my notice that Typhoid Fever is present in your house. You are enjoined by the Public Health Act, 1875, (a) not to allow any person so suffering to leave your premises, (b) or allow any article of clothing worn by the patient to be removed therefrom without previous disinfection.*

*The penalty imposed for each offence being £5.*

### Rules for Preventing Spread of Typhoid Fever.

1. The patient should be confined to one room, and no one but the person in attendance should be allowed to enter the room.
2. Curtains, bedhangings, and carpets, and all other articles of dress and unnecessary furniture should be removed before the patient is allowed to enter.
3. Bedclothes and soiled linen worn by the patient, and all such articles as cups, glasses, and spoons must not be removed from the room until they have been well disinfected.
4. Ventilation. This should be secured by opening the windows, and if there be a grate in the room, a fire should be lit.
5. No article of food should be kept in the sick room, and all unconsumed food at once destroyed. The hands of the nurse should be well washed, and the nail-brush freely used after attending to the patient, and before taking food. Food should never be eaten in the sick room.
6. Note well that infection is the same in all cases, whether mild or severe.

### Directions for Disinfection.

The infection of Typhoid Fever is chiefly conveyed through the discharges given off by the bowels and bladder, it is, therefore, of the first importance to see that these excretions are properly disinfected as soon as passed.

This may be done by placing Carbolic Acid Powder or Chloride of Lime in the utensils before use, and afterwards freely powdering the discharges with the same disinfectants.

The motions should never be thrown into a privy or on to an ashpit, and if not scavenged by the Local Authority, should be buried some distance from the house with a liberal supply of Chloride of Lime added.

During the progress of the case all soiled linen should be removed from the bed and immediately placed in a vessel of water, to which a large handful of common washing soda has been added. It should be allowed to stand a few hours and afterwards well boiled in the copper.

Cups, glasses, and spoons used in the sick room should be boiled in strong soda and water before they are allowed to be removed from the room.

Special care should be exercised when removing the excretions so as not to permit any portion to fall on the floor, or contaminate any article of clothing.

JOHN O. LITTLEWOOD,

*Mansfield.*

MEDICAL OFFICER OF HEALTH.



## BLACKWELL RURAL DISTRICT COUNCIL.

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OUTBREAK OF SCARLET FEVER.

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Owing to the prevalence of Scarlet Fever throughout the District, it is thought advisable to recommend that your Schools be thoroughly cleansed and disinfected before re-opening after the summer holidays.

The following suggestions are likely to prove of some value in carrying out the work :—

1. That all woodwork be thoroughly washed with soap and water, and the floors scoured with strong soda and water.
2. That all ceilings be limewashed.
3. That the slates be boiled in strong soda and water.
4. That the offices be thoroughly cleansed and limewashed, and the urinals and drains disinfected and freely flushed.
5. That during the holidays all windows and doors be left open so as to secure through ventilation.

That in addition to the above recommendations, special fumigation be undertaken by the Inspector of Nuisances in such schools where Scarlet Fever has been specially prevalent.

JOHN O. LITTLEWOOD, D.P.H.,

*Mansfield.*

Medical Officer of Health.



*Form sent to every case of Scarlet Fever notified.*

BLACKWELL RURAL DISTRICT.

# SCARLET FEVER.

## NOTICE TO OCCUPIERS OF INFECTED HOUSES.

*It has been brought under my notice that Scarlet Fever is present in your house. You are enjoined by the Public Health Act of 1875 (1) not to allow any person so suffering to leave your premises, (2) or allow any clothing to be removed therefrom without previous disinfection.*

*The penalty imposed for each offence being £5.*

## Rules to be observed for preventing spread of infection.

1. A Patient suffering from Scarlet Fever should, where practicable, be confined to one room, preferably at the top of the house, and into which none but the person in attendance should enter.
2. Curtains, Bedhangings, and Carpets, and all other articles of Dress and unnecessary furniture should be removed before the patient is allowed to enter.
3. The room should be well ventilated by opening the upper sash of the window. The communication through the chimney should be maintained.
4. Sputum, vomit, urine, and fæces should be received into vessels containing some disinfectant (a large tablespoonful of Chlorinated Lime to  $\frac{3}{4}$ -pint of water), before being removed from room.
5. Discharges from the nose, mouth, and throat should be received into pieces of rag and immediately burnt.
6. All such articles as cups, glasses, and spoons used in the sick room should be placed in strong soda and water, and subsequently boiled before leaving the room if possible.
7. All soiled linen should be plunged into a vessel of water containing a large handful of common washing soda. It should be allowed to stand for a few hours and afterwards well boiled either in a copper or large iron pot.
8. No article of food should be allowed to remain in sick room, and any unconsumed food should first be disinfected and then destroyed, by burning if possible.
9. The skin of the patient should be kept scrupulously clean.
10. The attendance on the patient should be confined to one person *only*, who when compelled to leave the sick room should avoid mixing with the other members of the household. The hands should be washed with 20% Carbolic Soap.
11. Visitors should not be allowed to the house for at least seven weeks from the commencement of the disease, and then only by the permission of the Medical Attendant.
12. During the last week of convalescence, it is advisable to subject the entire body to a good soaping once daily.

JOHN O. LITTLEWOOD,

Medical Officer of Health.

*Mansfield.*



*Form of Handbill to be distributed in the District.*

BLACKWELL DISTRICT COUNCIL.

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## SCARLET FEVER.

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Scarlet Fever is extremely catching, particularly in the early stages, whilst the Fever is high and the Throat sore, and the danger of infection is the same in all cases, whether mild or severe.

### PRECAUTIONS TO PREVENT SPREAD:—

Every child suffering from Scarlet Fever must be separated from all other children for at least 7 weeks after the appearance of the rash.

All the Children in the infected house should be kept from School, and from playing or going about with other children.

The inmates of an infected house should not go to Church or Chapel or attend any public gathering whatever.

“Neighbouring” should be strictly prohibited, and no person should be allowed to visit an infected house until after the peeling of the patient has completely ceased, and the disinfection of the house has been carried out.

As infection exists in the peeling of the skin, the patient must not appear on the public highway until the peeling has entirely ceased.

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TAKE NOTICE *that the exposure of infectious persons in public is punishable by law. The Public Health Act, 1875, imposes a penalty of £5 for each offence, and the penalty for such exposure will be enforced.*

JOHN O. LITTLEWOOD,

Medical Officer of Health.



*Form of Handbill distributed in the District.*

BLACKWELL DISTRICT COUNCIL.

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# MEASLES.

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Measles is a dangerous disease, and is extremely catching.

EARLY SYMPTOMS: Severe cold in the head for 72 hours, before the blotchy rash appears.

Consider every severe Influenza cold as possibly Measles.

## PRECAUTIONS TO PREVENT SPREAD :—

Every child suffering from Measles *must* be separated from all other Children for at least 3 weeks after the appearance of the rash.

All the Children in the infected house should be kept from School for a period not less than 3 weeks after the commencement of the last case.

“Neighbouring” should be strictly prohibited, and no person should be allowed to visit an infected house until 3 weeks have elapsed since the last case first commenced.

You should in every case call in a Medical Man.

TAKE NOTICE *that the exposure of infectious persons in public is punishable by law. The Public Health Act, 1875, imposes a penalty of £5 for each offence, and the penalty for such exposure will be enforced.*

JOHN O. LITTLEWOOD,

Medical Officer of Health.



*Form of Handbill which has been distributed in the District.*

BLACKWELL DISTRICT COUNCIL.

## PREVENTION OF SUMMER DIARRHŒA.

This disease only occurs after a prolonged period of heat, and is in a great measure avoidable by the exercise of ordinary care and attention.

The disease is caused by a germ entering the body through bad air, impure water, and contaminated food.

The necessary precautions to be observed are :

1. See that all parts of the house are well ventilated night and day.
2. Decomposing refuse of all kinds should be removed from the house and its immediate neighbourhood.
3. The gullies in connection with the house drains should be frequently flushed during the day, and any faulty drains from which a stench is noticed to arise should be at once reported to Mr. Hill, Inspector of Nuisances, Sutton-in-Ashfield.
4. Food during hot weather rapidly undergoes decomposition, and the greatest care should be observed in the selection only of such as is perfectly fresh and sound, and should never be allowed to remain an unnecessary time in occupied rooms.
5. It is highly essential that food should be thoroughly cooked, animal as well as vegetable, and that the milk should be boiled as soon as received from the hands of the milkman, covered over, and subsequently placed in a cool cellar or larder free from dust.
6. Unripe or over-ripe fruit should be strictly avoided.
7. Children under nine months of age should receive nothing except milk or milk and water, well boiled, except when the milk is obtained from the mother's breast.
8. Feeding-bottles, food-utensils, and any receptacle used for the storage of milk and food should be kept scrupulously clean, and well scalded before use.
9. It is wise to call in Medical aid early, before the disease has had time to make itself seriously felt, and no resort should be made to quack remedies.
10. The above remarks are intended to serve as a guide for the prevention of Summer Diarrhœa in Adults as well as in Infants.

JOHN O. LITTLEWOOD,

Medical Officer of Health.



THE HISTORY OF THE  
REPUBLIC OF THE UNITED STATES

OF THE  
UNITED STATES OF AMERICA

BY  
JAMES M. SMITH

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