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Contributors

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Pauf . Welson



County Borough of Bournemouth

Annual Report

OF THE

MEDICAL OFFICER of HEALTH

AND

SCHOOL MEDICAL OFFICER for the Year 1936.

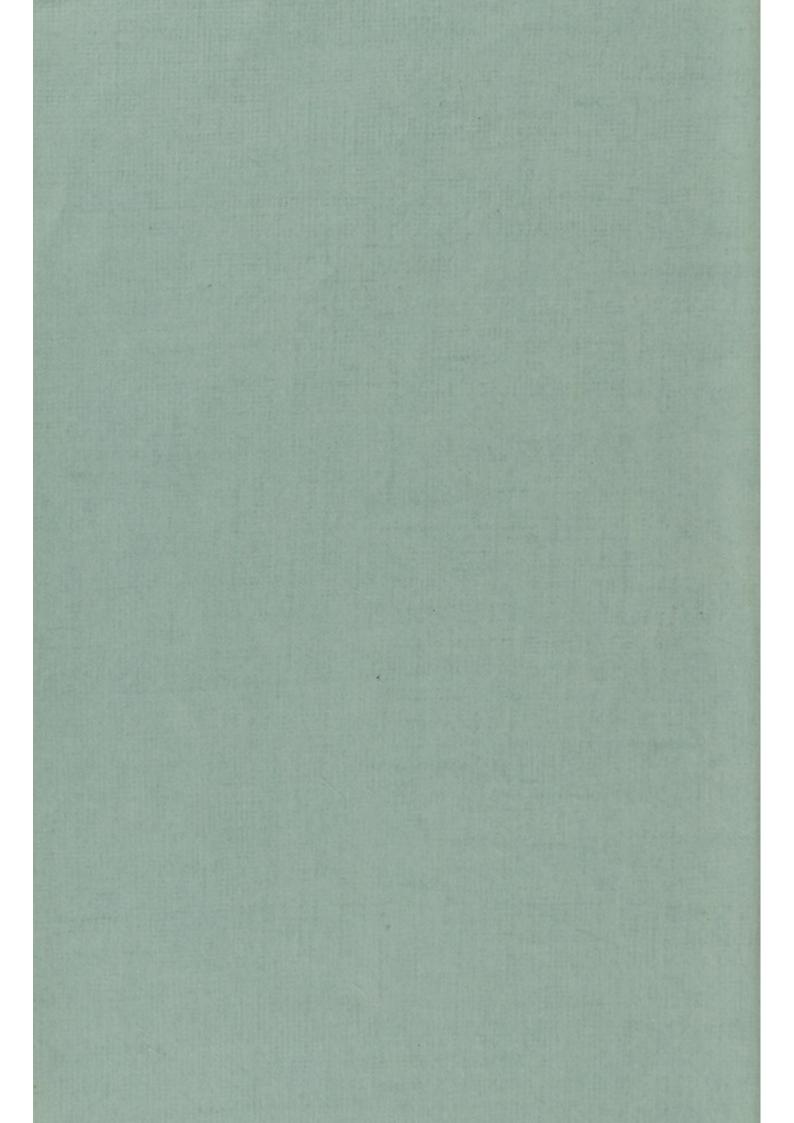
HEALTH DEPARTMENT,

TOWN HALL,

BOURNEMOUTH.

May, 1937.

BOURNEMOUTH:
PRINTED BY A. SUTTON & Co., Ltd.





County Borough of Bournemouth

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ROPICAL D

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1936.

HEALTH DEPARTMENT, TOWN HALL,

BOURNEMOUTH.

May, 1937.

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY BOROUGH OF BOURNEMOUTH.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my annual report on the state of the Public Health in Bournemouth and of the activities of the associated services in 1936.

There are certain prominent features. In 1935, the rate of infantile mortality was the lowest ever recorded in Bournemouth, but during the year under consideration an even lower figure has resulted. This will not surprise those who are acquainted with the work that has been done for several years in the Maternity and Child Welfare Section.

Housing necessitated a special survey of Working class houses. This revealed even less overcrowding than had been anticipated—a very small amount. As regards Tuberculosis a great deal has been suddenly

achieved. Several attempts have been made to find a site on which to erect a sanatorium-hospital but difficulties have been constantly encountered. By good fortune an existing institution has been acquired. This is to be found in an ideal position at Linford, near Ringwood. Patients will be accommodated in the various buildings until a Sanatorium-hospital has materialised, which it is hoped will occur shortly.

Infectious diseases have been responsible for much anxiety. Outbreaks of Measles and Whooping-cough have caused several deaths. But far more serious was the epidemic of Typhoid which affected Bournemouth, Poole and Christchurch simultaneously. As explained in the body of the Report this originated in the County of Dorset and could not have been prevented, for it was an accident which might have happened within the area of any local authority.

In Bournemouth there are those who anticipate and take for granted the remarkably good results that are recorded, as they find it difficult to associate disease with such a pleasing environment. Consequently, the outbreak which began at the height of the holiday season came as a rude shock to residents and visitors.

I trust that the details which follow will cause critics to alter their views and even persuade them to express appreciation of what was done.

In conclusion I would thank those members of the Council and many other individuals who have given encouragement to the staff of the Health Department during a very anxious period.

I have the honour to be,
Your obedient servant,
H. GORDON SMITH.

COMPOSITION OF COMMITTEES AND STAFF On 31st December, 1936.

HEALTH COMMITTEE.

The Mayor (Councillor T. V. Rebbeck, J.P.)
Alderman W. Asten, M.D. (Chairman).
Councillor J. H. Turner (Vice-Chairman).

Alderman J. J. Empson, J.P.

Councillor R. A. Lyster, M.D., D.P.H

W. Jones.

" A. J. Playdon.

F. B. Summerbee.

" R. J. Raggett.

Councillor J. B. C. Beale, J.P.

, J. Richards.

, Mrs. F. E. Boyce, J.P.

" Mrs. A. Tiller, J.P.

Mrs. E. L. A. Hockey.

" W. Wilkinson, J.P.

GENERAL SUB-COMMITTEE FOR HOSPITAL AND GENERAL PURPOSES.

The Chairman. The Vice-Chairman.

Aldermen Empson and Summerbee, Councillors Lyster, Playdon & Wilkinson

MATERNITY AND CHILD WELFARE ACT, 1918, COMMITTEE.

Chairman - Alderman W. Asten, M.D. Vice-Chairman - Councillor Mrs. A. Tiller.

Alderman Empson; Councillors Mrs. F. E. Boyce, Mrs. E. L. A. Hockey, Lyster, Playdon, Turner, Miss M. M. Whitehead, Wilkinson; also Mrs. E. Bizby and Mrs. E. Wilkinson.

PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health and School Medical Officer H. Gordon Smith, M.D. (State Medicine), B.S. (London), M.R.C.S., L.R.C.P., D.P.H.

Assistant Medical Officer of Health Assistant School Medical Officer and Clinical Tuberculosis Officer. C. F. Pedley, B.A., (Camb.), M.R.C.S., L.R.C.P., D.P.H.

Assistant Medical Officer of Health (Maternity and Child Welfare) Grace H. Wood, M.B., Ch.B., B.Sc., D.P.H.

Assistant Medical Officer of Health, Assistant School Medical Officer and Resident Medical Officer of the Isolation Hospital ...

K. J. Grant, M.A., M.B., Ch.B., D.P.H.

Senior Sanitary Inspector

A. J. Paillips, M.S.I.A.

District Sanitary Inspectors ...

D. J. Mortimore, W. Vincent Morris C. T. Newlyn, S. Powell, J. Randall, E. Smith, S. Tweedie (all certified Royal Sanitary Institute).

Food Inspectors and Certified Meat Inspectors ... M. Guthrie, O. Stewart.

...

...

Cleansing Inspector

G. H. Woodlands.

Matron, Municipal Hospital	L. H. Lane								
Clerk, Municipal Hospital	D. L. Young.								
Health Visitors	M. I. J. Abraham, P. M. Carey, M. G. Cornish, A. M. Crisp, S. Dakin, M. S. Gibbs, M. Harwin F. D. McDonald, F. E. A. Richard- son, All certified Midwives. Also School Nurses.								
School Nurse	A. M. Blakemore.								
Chief Clerk and Vaccination Officer	A. W. Hurley.								
Clerks	R. A. Billen, W. G. Clarkson, E. H. Davis, P.D.E. Dominey, R.S. Jerrett, W. J. Manning, B. C. Mallaband, J. W. Peake. J. W. Roberts, G. O. Willis.								
Superintendent of Public Conveniences and Mortuary	T. H. Bailey.								
Disinfectors and Drain Testers	F. J. Baker, F. Chick, W. C. Feltham, R. E. Gerault, A. Lockyer, W. J. Back								
Corporation Rat Catchers	W. J. Roe. J. Burridge, F. J. Smith.								
PART-TIME OFFICERS.									
PART-TIME	Officers.								
Part-Time Public Analyst	R. Pendrill Charles, M.D., F.I.C.,								
	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng.,								
Public Analyst	R. Pendrill Charles, M.D., F.I.C., F.C.S								
Public Analyst Public Vaccinator	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng., L.S.A.								
Public Analyst Public Vaccinator Bacteriologist	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng., L.S.A. A. C. Ingram, M.D., M.R.C.P., D.P.H.								
Public Analyst Public Vaccinator Bacteriologist Veterinary Surgeon	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng., L.S.A. A. C. Ingram, M.D., M.R.C.P., D.P.H. J. Stewart Wood, M.R.C.V.S.								
Public Analyst Public Vaccinator Bacteriologist Veterinary Surgeon Meteorologist	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng., I.S.A. A. C. Ingram, M.D., M.R.C.P., D.P.H. J. Stewart Wood, M.R.C.V.S. C. Dales, F.R. Met. Soc.								
Public Analyst Public Vaccinator Bacteriologist Veterinary Surgeon Meteorologist Borough Dentist	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng., I.S.A. A. C. Ingram, M.D., M.R.C.P., D.P.H. J. Stewart Wood, M.R.C.V.S. C. Dales, F.R. Met. Soc. E. Samson, I.D.S., R.C.S., Eng. W. S. Richardson, M.D., F.R.C.S. C. Heygate Vernon, M.A., M.B.,								
Public Analyst Public Vaccinator Bacteriologist Veterinary Surgeon Meteorologist Borough Dentist Consultant Obstetrician	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng., I.S.A. A. C. Ingram, M.D., M.R.C.P., D.P.H. J. Stewart Wood, M.R.C.V.S. C. Dales, F.R. Met. Soc. E. Samson, I.D.S., R.C.S., Eng. W. S. Richardson, M.D., F.R.C.S. C. Heygate Vernon, M.A., M.B., F.R.C.S. R. V. Facey, B.A., M.B., Ch.B.,								
Public Analyst Public Vaccinator Bacteriologist Veterinary Surgeon Meteorologist Borough Dentist Consultant Obstetrician Deputy Consultant Obstetrician Medical Officer of V.D. Treatment	R. Pendrill Charles, M.D., F.I.C., F.C.S A. G. S. Mahomed, M.R.C.S., Eng., I.S.A. A. C. Ingram, M.D., M.R.C.P., D.P.H. J. Stewart Wood, M.R.C.V.S. C. Dales, F.R. Met. Soc. E. Samson, I.D.S., R.C.S., Eng. W. S. Richardson, M.D., F.R.C.S. C. Heygate Vernon, M.A., M.B., F.R.C.S.								

GENERAL STATISTICS.

Area of the County Borough ... 11,627 acres.

Population: Census 1931 ... 116,797.

Estimated 1936 ... 129,200.

Estimated at mid-year 1936

by Registrar-General ... 119,400.

Number of inhabited houses ... 32,300.

Rateable Value, 1936 ... £1,809,203.

Sum represented by a penny rate ... £7,200.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Total M. F.
Live Births { Legitimate 1294 659 635 | Birth-rate 10.78 | Illegitimate 99 41 58 (R.G. 11.66)

Still Births 51. Rate per 1,000 total births 35,32

Deaths, 1,562. Death-rate—Crude, 13.09 Adjusted, 9.82

Percentage of total deaths occuring in Public Institutions, 36.65.

Deaths of infants under one year of age per 1,000 live births:— 39.48 (Legitimate, 40.18. Illegitimate, 30.30).

Number of women dying in, or in consequence of, childbirth:—
From sepsis, 2. Other causes, 5. Rate per 1,000 total births, 4.85.

Deaths from Measles (all ages), 8; Whooping Cough, 3; Diarrhoea (under 2 years of age) 2.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF BOURNEMOUTH DURING THE YEAR 1936.

Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.

		wit	thout	the	Disti	ict.						
Causes of Death.	All Ages	0_	1-	2—	5—	15—	25—	35—	45—	55—	65—	75—
All Causes	1562	55	11	9	27	35	49	59	123	233	440	521
1—Typhoid and	1225			3			289					
paratyphoid	29			1	5	8	-	1	2	4	2	1
fevers 2—Measles	8		3	1 2			133			4		
3—Scarlet fever					1000							
4—Whooping		100		1			2203					
cough	3	1	1	10000				1 200				
5—Diphtheria 6—Influenza	2 12				2	1		10000		1 366	4	7
7—Encephalitis					•••							
lethargica	2											2
8—Cerebro-spinal						,						
fever 9—Tuberculosis	1					1	***					***
of respiratory		1						193	180			
system	67		1			7	15	12	17	7	6	2
10—Other tuber-	0				0	33					1	2
culous diseases 11—Syphilis	9			1	1000	3.61	1900		1	1	1	2
12—General paraly-	1											
sis of the insane,		1		1				1				
tabes dorsalis	4						1		1	2		
13—Cancer, malig- nant disease	259	1			1		2	6	23	60	90	77
14—Diabetes	0.0	1		1000	1000	1			0		20.4	
15—Cerebral	1								1		1	
haemorrhage, etc.	98											
16—Heart disease 17—Aneurysm	368	•••				1	1000		1	0		146
17—Aneurysm	0	***				1	1		***	-	-	-
tory diseases	105										35	
19—Bronchitis	45		2						3	4	11	25
20—Pneumonia (all forms)	70	9	2	2 1	2	2	2	2 5	10	7	15	15
21—Other respira-	10		1		1	1 -	1		10		10	13
tory diseases	11	1000		1		1				. 2	2 5	2
22—Peptic ulcer		1						. 3	1	2	8	4
23—Diarrhoea, etc. 24—Appendicitis	8	2						2 3	1 2		3	2
25Cirrhosis of	10			1	1		1		1		3	
liver	. 8									2	2 4	2
26—Other diseases	1											0
of liver, etc 27—Other diges-	11							. 3	• • • • •	2	2 4	2
tive diseases	. 35	1 3	2		1		. 1	1 1	9	4	1 6	10
28—Acute and		100	1									1
chronic nephritis	68	1						: 2	2 8	3 11	20	26
29—Puerperal sepsis 30—Other puerpera							1	2				
causes	. 5					. 1	1 4	1				
31—Congenital de-												-
bility, premature												
birth, malforma- tions, etc	35	3	1	1	1							
32—Senility	00										. 1	29
33—Suicide	4.4					. 1	1 3	3 2	2 2	2 2	2 3	1
34—Other	00									2	1 8	9
violence 35—Other defined	. 36	1		1	. 3	3 5	1	1	1 3	1	1 8	9
diseases	. 138	1	5		. 4	1 3	3	5 8	3 10	1	4 41	48
36—Causes ill-			1					1				
defined, or un-							1		1	1	1	
known										1	1	
			1	1		1	1000					

VITAL STATISTICS DURING 1936 AND PREVIOUS YEARS.

			Bir	ths	d			deaths			let death to the	e belo Distri	
	Popula- tion esti-	ted		Net	1	registered in the District		s not	Un	der I of age			
Year	mated to middle of each Year	Uncorrected	No.	Rate	No.	Rate	Of Non-resi registered in District	Of Residents not registered in the District	No	Rate per 1000 Net Births	No.	Rate	
1	2	3	4	5	6	7	8	9	10	11	12	13	
1917	†78395 †70327 (†83227	967	979	†12.49	1175	†16.70	251	132	82	83.72	1056	†15.01	
1918	1 +74279	1093	1031	†12.38	1140	†15.34	219	144	59	57.2	1065	†14.33	
1919	†6073 †82627					†14.63	207	127		87.08		†13.66	
1920	1 185919			†16.34		†11.89	177	109		45.39		†11.10	
1921	91770 81200	1280	1251	15.40	1133	13.95	179	130	94	75.13	1084	{ 11.81 13.34	
1922	93770	1168	1129	12.04	1181	12.59	174	135	64	56.68	1142	12.17	
1923	95600	-		(11.19	1192	12.46	207	135	6 4	59.81	1120	11.71 13.62	
1924	97000 84450			11.46	1225	12.62	187	132		44.96	1170	12.06	
1925	98000 85840			11.79	1222	12.46	173	128	0.0525	52.76	1183	(12.07	
1926	100000			(11.10	1291	12.91	206	135		57.65	1220	12.20	
1927	102500 92650			(10.49	1338	13.05	231	139		52.04	1246	12.15	
1928	105000		-	(10.55		13.30						12.49	
1929	96580	1		9.54	1397 1543	14.46	258	163		55.05	1312	13.58	
1930	97360 111000			10.58		15.84	261	192		46.55	1473	15.12	
*1931	114060	1231	2000	10.36	1346	10.20s	240	149		46.21	1257	9.81s	
	106380			11.11	1552		261	201			1492	10.51s	
1932	113200	1433		11.29	1712	11.34s	246	221			1687	11.17s 9.86s	
1933	115200	1428		11.14	1646	10.71s 9.66s	227	199			1618	10.53s 9.36s	
1934	116650	1479		10.67	1611	10.36s 9.60s	248	198			1561	10.03s	
1935	1118200	1497		11.05	1620	10.27s	235	186	52		1570	9.96s	
1936	129200 119400	1535	1393	{10.78 11.66	1678	$ \begin{cases} 9.73s \\ 10.53s \end{cases} $	250	232	55	39.48	1562	$ \begin{cases} 9.06s \\ 9.82s \end{cases} $	

[†] Estimated on new civil population figures supplied by Registrar-General.

^{*} Special estimates by reason of extension of the Borough.

⁵ Rates as adjusted by new comparability factor supplied by Registrar-General.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

(a) Laboratory facilities.

The facilities are usually ample, but in the summer the Bacteriologist found it necessary to extend his laboratory and obtain extra assistance in order to cope with the large number of specimens submitted during the Typhoid outbreak.

(b) Ambulance facilities.

There is no change to record and the arrangements are adequate.

- (c) Nursing in the Home.

 There have been no modifications of the services.
- (d) Clinics and Treatment Centres.
 No alterations have occurred.

(e) Hospitals.

At the Ashley Road branch of the Royal Victoria and West Hants Hospital new wards have been provided for Maternity cases, otherwise there are no changes to report.

LOCAL GOVERNMENT ACT, 1929.

The institutional medical services transferred from the late Board of Guardians are administered entirely by the Public Assistance Committee.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

The Defectives placed in various institutions have been gradually transferred to the Colonies at Cold East and Tatchbury Mount, which are shared with the County of Hampshire and the County Borough of Southampton. Arrangements have also been made with he County of Dorset for a limited number of defectives to be received in an occupation centre at Branksome.

Consideration is being given to the provision of a similar centre in Bournemouth.

BACTERIOLOGIST'S REPORT.

Bacteriological Examinations made during the year ended 31st Dec., 1936-

In connection with the Municipal Hospitals.

Swabs for Dipht	heria	 		 434
Faeces cultures		 		 693
Urine		 		 203
Widal reactions		 		 83
Blood cultures		 		 2
Ulcer swab-? or	ganisms	 		 1
Sputa-? T.B.		 		 2
Sputum culture		 		 1
Swab—? G.C.		 		 1
Cerebro spinal flu				 3
Pus cultures		 	/	 3
Blood counts		 		 2
Urine-microscop				 3
culture				1
2 bile and				 1
,, f blie and	r pus	 		

In connection with the Health Department.

Swabs for Diphtheria—			
For the Medical Officer of Health			165
For Fairmile House, Christchurch			5
For Private Practitioners			377
Chatter for Talanastale			
Sputum for Tuberculosis—			100
For the Municipal Dispensary	***		190
For Private Practitioners	•••		136
Various Examinations—			
Faeces cultures for Private Practitioner	S	***	68
Urine ,, ,, ,, ,,			20
Widal reaction ,, ,, ,,			75
Blood cultures ,, ,, ,,			9
Sputum—? T.B			1
Examinations of food—? food poisoning			2
Hairs for tinea			4
Bacteriological examination of water from	n River Bo	arne	1
Milk Samples for tuberculosis			52
Milk samples for general examination			52
Ice cream samples	***		15

In connection with the Borough Engineer's Department.

Chemical and	bacterio	ological	examination	of	sewage	
effluents						15

A large proportion of the increase of work was due to the outbreak of Typhoid. To deal with the stools and urine of convalescents an additional laboratory was fitted up and extra staff engaged. This work commenced on October 2nd and the results were as follows:—

		Specimen	is	Positive			
	Faeces	Urine	Total	Faeces	Urine	Total	
October	 367	108	475	30	2	32	
November	 263	94	357	48	8	56	
December	 80	16	96	36	-	36	
	710	218	928	104	10	114	
	710			104	_		

The increasing proportion of positive results was due to the inclusion of convalescent cases in their earlier stages and to the repeated examination of carriers.

A. C. INGRAM, M.D.

SANITARY CIRCUMSTANCES OF THE AREA. Water.

There are still a few houses on the outskirts of the Borough deriving water from a well. The two water companies extend their mains constantly to serve the new roads that are being developed. Arrangements are made every month to take a sample from the supply of each company. This is examined chemically and bacteriologically by the Borough Analyst. Samples are also submitted simultaneously on behalf of the Water Company to an independent Analyst and the reports are exchanged. The following are typical results obtained by the Borough Analyst:—

CERTIFICATE OF ANALYSIS.

21st August, 1936.

Of a specimen of water marked Bournemouth Gas and Water Co., Ltd., received from the Medical Officer of Health, Bournemouth, on 18th August, 1936, contained in a glass stoppered bottle. Particulars of source, standpipe, St. Stephen's Road, 18th August, 9.30 a.m.

I hereby certify that I have examined the abovementioned sample with the following results:—

DETERMINATION.			P	ARTS PER 100,000.
Free Ammonia				0.0005
Albuminoid Ammonia				0.0070
Oxygen absorbed at 37	7°C. in 3	minutes		0.0381
,, ,,		hours		0.1067
Nitrites				Trace
Nitric Nitrogen in Nitr	rates			0.25
Hardness, Temporary				17.5
" Permanent				2.0
" Total				19.5
Chlorine				1.9
Total Solids, dried at	180°C.			27.2
Free Chlorine				0.013
Free Carbonic Acid				Nil
Metals (Lead, Copper,	Zinc, Iro	n)		v. slight trace iron
pH reaction				7.4
Appearance				Slightly yellow,
				clear
				None
Number of Organisms		g on Agai	r in	
24 hours at 37°C.				8
Number of Organisms of	levelopin	g on Agai	rin	
3 days at 22°C.				10
				Absent in 100 c c.
B. Enteritidis Sporogen	es			,
Streptococci				**

Remarks.

This is a clear bright water, free from any deposit on standing. It is of a high standard of purity, both chemically and bacteriologically, and in my opinion may be safely used for drinking and domestic purposes.

(Signed) R. PENDRILL CHARLES.

CERTIFICATE OF ANALYSIS.

Of a sample of water marked West Hants Water Co., Ltd., Christchurch, received from the Medical Officer of Health, Bournemouth, on 18th August, 1936, contained in a glass stoppered bottle. Particulars of source—final water chamber, 10.30 a.m., 18th August, 1936.

I hereby certify that I have examined the abovementioned sample with the following results:—

DETERMINATION		PARTS PER 100,000.
Free Ammonia		0.0050
Albuminoid Ammonia		0.0055
Oxygen absorbed at 37°C. in	3 minutes	0.0411
" " "	4 hours	0.1235
Nitrites		Nil
Nitric Nitrogen in Nitrates		0.20

DETERMINATION.				PARTS PER 100,000
Hardness, Temporary				21.5
,, Permanent				2.5
,, Total				24.0
Chlorine				1.7
Total Solids, dried at	180°C.			26.8
Free Chlorine				0.005
Free Carbonic Acid				Nil
Metals (lead, copper,	zinc, iron	n)		Slight trace iron
pH reaction				7.2
Appearance				Colourless
Odour				None
Number of Organisms	developi	ng on Ag	gar in	
24 hours at 37°C.				6
Number of Organisms	developi	ing on A	gar in	
3 days at 22°C.				9
Bacillus Coli				Absent in 100 c.c.
Streptococci				,,
B. Enteritidis Sporoge	nes			"

Remarks.

This is a clear and bright water of normal colour and free from any deposit on standing. It does not contain any metals apart from a slight trace of iron. Both chemically and bacteriologically the water is of a high standard of purity and in my opinion may be safely used for drinking and domestic purposes.

(Signed) R. PENDRILL CHARLES.

Drainage and Sewerage.

There have been provided five and a half miles of new sewers. These are not available for all the houses recently erected, some of which are connected with cesspools. On the other hand the number of these is being steadily reduced in the Kinson area.

Cesspool Drainage.

Compose Diamage.	No. of premises draining to other unsatisfactory outfalls, and drained to cesspools cesspools drained to cesspools	34 32 2 - 34	12 7 5 9 3	"	16 7 9 2 14	97	2 2	05 309 96 228 177	2 2 - 2	1 - 1	95 468 227 243 452
30		34	12	11	16	212	23	405	2	1	695
	District	Wick	Tuckton	lford	Strouden	Holdenhurst and Throop	Winton	Kinson	Westbourne	East Cliff	Totals

Public Cleansing.

There have been no alterations in the methods adopted.

SANITARY INSPECTION OF THE AREA.

I am indebted to the Senior Sanitary Inspector for the following statement:—

1 - N					
1.—Nuis	SANCES.				
Complaints received and attended to					1111
General inspections of districts					271
Number of nuisances detected					955
Number of nuisances abated					932
Number of nuisances outstanding, 1st	January	7, 1936			61
Ditto, 31st December, 1936				***	84
Visits re abatement of nuisances		***			3843
Number of notices served—Informal		***			279
Statutory	····				19
Number of notices complied with-In					187
	atutory				18
Visits to piggeries					97
2.—Infection	US DISEA	SES.			
Enquiries made					553
Total number of visits					747
				10000	
3.—New B	UILDINGS				
					1055
Water tests					1955
Number of re-tests			***		214
Smoke tests					1261
Number of re-tests				***	147
Total visits	a defeate	accept ai	mad		4000
Reports made to Building Inspector r	e defects	ascerta	пеа		214
4 Postumo I	· vanstauva	***			
4.—Private I	NSPECTIO	NS.			
Premises inspected and tested					98
Subsequent water tests					65
Subsequent smoke tests					59
Visits re supervision of works					450
Total visits					625
5.—DISIN	NECTIONS	3.			
Number of rooms after notifiable dise	ase				648
Number of books					305
Number of rooms after non-notifiable	disease				199
Number of rooms for vermin					236
Disinfection of places of entertainmen	t				76
Number of articles disinfected or dest					8375
	Contract of the Contract of th			1000	

1Inspect	tion of Dwelling-houses during the Year—	
(1) (a)	Total number of dwelling houses inspected for housing	
	defects (under Public Health or Housing Acts)	516
(b)	Number of inspections made for the purpose	1002
(2) (a)	Number of dwelling-houses (included under sub-head (1)	
	above) which were inspected and recorded under the	110
(1-)	Housing Consolidated Regulations, 1925	116
(b)	Number of inspections made for the purpose	143
(3)	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human	
	habitation .	Nil
(4)	Number of dwelling-houses (exclusive of those referred to	MII
(4)	under the preceding sub-head) found not to be in all respects	
	reasonably fit for human habitation	248
0		
z.—Remea	y of Defects during the Year without Service of Formal No	tices.
	Number of defective dwelling-houses rendered fit in conse-	
	quence of informal action by the Local Authority or their officers	187
2 2 %		101
3.—Action	under Statutory Powers during the Year:	
	A. Proceedings under Sections 17, 18 and 23 of the Ho	nusing
(1)	Act, 1930:—	
(1)	Number of dwelling-houses in respect of which notices	,
(9)	were served requiring repairs	1
(2)	service of formal notices:—	
	(a) Dec	Nil
	(a) By owners (b) By Local Authority in default of owners	1
	B. Proceedings under Public Health Acts.	
(1)	Number of dwelling-houses in respect of which notices	
(-)	were served requiring defects to be remedied	Nil
(2)	Number of dwelling-houses in which defects were remedied	
	after service of formal notices :-	
	(a) By owners	Nil
	(b) By Local Authority in default of owners	Nil
	C. Proceedings under Sections 19 and 21 of the Housing	Act,
	1930 :—	
(1)	Number of dwelling-houses in respect of which demolition	
101	orders were made	Nil
(2)	Number of dwelling-houses demolished in pursuance of	2711
	Demolition Orders	Nil
711		30 :—
(1)	Number of separate tenements or underground rooms in	Nil
(2)	respect of which closing orders were made Number of separate tenements or underground rooms in	INI
(2)	respect of which Closing Orders were determined, the	
	tenement or room having been rendered fit	Nil
A 17		
	ng Act, 1935—Overcrowding.	9
	Number of dwellings overcrowded at the end of the year Number of families dwelling therein	9
	37 1 6 1 111 41	73
(b)	Number of persons dwelling therein	
(0)	year	Nil
(c) (i)	Number of cases of overcrowding relieved during the year	40
(ii)	Number of persons concerned in such cases	297
(d)	Particulars of any cases in which dwelling-houses have	
	again become overcrowded after the Local Authority have	
	taken steps for the abatement of overcrowding	Ni
(e)	Any other particulars with respect to overcrowding con-	
	ditions upon which the Medical Officer of Health may	
	consider it desirable to report.	

During the first three months of the year a survey was made of all working-class houses. These duties were performed by seven men temporarily engaged who worked under the supervision of the District Sanitary Inspectors.

The total number of dwellings visited was 18,752.

The total number of rooms measured was 842.

As a result of the survey overcrowding was detected in 49 instances, giving a percentage of .26 for the whole of the County Borough. In 12 cases the overcrowding occurred in Council houses.

All families considered suitable were offered Council houses with the result that only nine families were responsible for overcrowding at the end of the year.

During the survey it was found that 624 workingclass houses were unoccupied.

Building.

There continues to be considerable activity in the building industry and premises of various designs are being erected.

Flats appear to be increasing in popularity and are being provided for all sections of the community.

Eighty-four Council houses have been built at East Howe on a site occupying high ground so that the total number is 764.

The following figures are of interest:-

No. of applications on housing register (31/12/36) 202 No. of applications made during the year ... 210 No. of applicants provided with accommodation 139

Rivers and Streams.

No serious pollution has been detected within the Borough boundaries but attention is still being given to the Bourne where occasional contamination has been observed. The exact origin of this has not yet been ascertained.

Swimming Baths and Pools.

- (a) Public Baths. The Corporation provides two swimming baths, viz., at Stokewood Road and the Pier Approach. These are equipped with up-to-date plant, enabling filtration and chlorination to be carried out. Samples are submitted periodically to the Analyst who always reports favourably.
- (b) There is also one privately owned swimming bath open to the public. This, too, is provided with a modern and efficient purifying plant.

Smoke abatement.

Bournemouth has so very few industries that smoke rarely amounts to a nuisance. Recently, however, certain laundries (together with a few other premises) have caused complaints. Those responsible for the conditions have received advice and effected improvements.

Eradication of bed-bugs.

During the year 114 houses, including eight Council houses, were found to be infested with bed-bugs.

In all cases where considered necessary the walls of the infected rooms were stripped, the skirtings and architraves around doors and windows removed, and the houses sprayed with insecticide.

This work is done by the staff of the Health Department, working whenever possible in co-operation with the builders employed by the owners or occupiers of the premises concerned.

Applicants for Council houses are visited in their homes by the Housing Superintendent, who makes a point of examining the conditions under which they are living, but in no case during the year has it been found necessary to disinfect the belongings of any tenant before moving into a Council house.

RATS AND MICE (DESTRUCTION) ACT, 1919.

No charge is made for the services of the two rat-catchers who have carried out their duties as follows:—

Number of applications for the services of r	at-	
catchers		828
Occasions when dogs and ferrets were used		129
Occasions when poison baits were applied		691
Occasions when gas was used		27
Number of visits for supervision		313
Occasions when no action was taken		90
Number of rats destroyed		2404

FACTORY AND WORKSHOPS ACT.

The number of workshops and workplaces registered is 627. They are supervised by the District Sanitary Inspectors.

Trade.	Premises Registered.	Rooms
D 1 1 1 1000	104	134
Tailors	 60	78
Blacksmiths	 6	7
Bootmakers and Saddlers	 47	53
Laundries	 7	12
Carpenters and Builders	 55	71
Cabinet Makers and Upholsterers	 36	56
Coach Builders and Motor Works	12	16
		27
Watchmakers and Jewellers	 22	
Metal Workers	 11	12
Cycle Builders and Motor Works	 54	66
Miscellaneous	 44	68
Bakehouses	 86	94
Kitchens of Hotels and Restaurants	83	86
Kitchens of Hotels and Restaurants	 00	00
	627	780

INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

1.	Number of			
Premises.	Inspections.	Written Notices.	Occupiers prosecuted.	
Factories	169	5		
(Including Factory Laundries) Workshops	215	9	-	
(Including Workshop Laundries) Workplaces (Other than Outworkers' premises)	61	7	-	
Total	445	14		

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS and WORKPLACES.

		Number of Defects.				
Particulars.	Found.	Remedied.	Referred to H.M. Inspector.	offences in respect of which Prose- cutions were instituted,		
Nuisances under the						
Public Health Acts*						
Want of cleanliness	3	3	-	_		
Want of ventilation	2	2	-	-		
Overcrowding	-	-	-	-		
Want of drainage						
of floors	-	-	-	_		
Other nuisances	1	1	_	-		
Sanitary accommoda-						
tion—			1			
Insufficient Unsuitable or		1	1	_		
defective	6	6				
Not separate for	0	0		_		
COTTOE						
Offences under the		MA PROPERTY OF				
Factory & Workshop	4.7	1000				
Acts:—						
Illegal occupation of			18 90			
underground bake-	St. St. O'LL					
house (s. 101)	1	1	_	_		
Other offences†	7	7	_	_		
Total	21	21	_	-		
		1				

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

[†]Excluding offences relating to outwork and offences under the sections mentioned in the chedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.

Homework.

During the year 38 lists containing the addresses of 82 out-workers have been received. In each case an inspection was made, but in one instance only was it found necessary to serve a notice requiring works to be executed.

Registries for Female and Domestic Servants.

The number of premises on the register at the end of the year was 15. Regular visits were paid to these for the purpose of enforcing the bye-laws. Shops Acts, 1912-1934.

In the following instances notices were not found affixed as required by the Acts:—

Exempted trade n	otice under t	he Secon	ıd
Schedule			61
Assistants' weekly	half-holiday	notice	155
Notice as to the	employment	of your	ng
persons under	Section 2		99
Early closing day	notice .		38

It was found necessary to serve two notices to provide and maintain adequate ventilation.

In seven instances seats for female assistants were required.

One hundred and fifty-nine special inspections have been made with regard to the sale of non-exempted goods after half-day and evening closing. In 26 cases verbal warnings were given; explanatory letters to the Health Department in response to these were accepted.

Periodical inspections under the Hairdressers' and Barbers' Shops (Sunday Closing) Act, 1930, have been made and no contravention of the Act was found.

SUMMARY OF SHOPS ON REGISTER, 31st December, 1936.

BUSINESS.	No. of Shops on Register			y cro	_			No. which do Not Close
Grocery & Provision Dealers Greengrocers, Fruiterers & Florists Bootsellers and Repairers Tailors and Outfitters Butchers Drapers, Milliners & Dressmakers Furniture Dealers Toys, Newspapers, Tobacco & Sweet Traders Bakers Dairies Motor and Cycle Dealers Fish and Poultry Dealers Jewellers and Watchmakers Refreshment Dealers Sweets and Confectionery Photographers Chemists Hairdressers Fancy Dealers Saddlers and Trunkmakers Booksellers and Stationers Ironmongers Coal and Corn Dealers Glass and China Dealers Glass and China Dealers Off License Houses Miscellaneous Traders Number of Shops on Register Empty Shops in Borough	299 185 151 115 142 250 91 309 67 47 105 69 55 101 99 21 79 133 39 13 72 74 38 13 14 60 234 2875 212	30 7 - 8 - 11 8 - - - - - - - - - - - - -	Tue 10 1 1 9 1 2 1 1 27 1	Wed 224 101 131 98 126 194 74 70 27 39 61 40 36 3 27 15 73 108 28 11 60 55 26 12 13 16 145 1813	12 4 2 	Fri	Sat 6 4 18 16 8 55 16 1 10 18 - 125 11 2 8 19 12 1 1 2 53 - 293 -	17 69 1 212 31 5 4 23 - 87 63 1 5 41 31 620 -
Total No. of Shops in Borough	3087							

Rag Flock Acts, 1911 and 1928.

No samples have been taken.

The Fertilisers and Feeding Stuffs Act, 1926.

No applications for samples to be analysed have been received, but six unofficial samples of fertilisers and seven of feeding stuffs were taken.

The Analyst stated that a sample of meat and bone meal contained an excess of 4.96 per cent. of oil and 11.8 per cent. of phosphoric acid, together with a deficiency of 5.06 per cent. of albuminoids. An official sample from the same source proved satisfactory.

SUPERVISION OF FOOD.

Milk and Dairies Order, 1926. Number of producers (residing outside the Borough) registered to sell wholesale and/or retail in the Borough ... 9 Number of producers (residing in the Borough) registered to sell wholesale 16 Number of producers (residing in the Borough) registered to sell by retail 8 Number of retailers (residing outside the Borough) registered to sell by retail within the Borough 6 Number of dairy and shop proprietors registered as retail purveyors 345

Inspections.

Visits	to	dairies	 541
Visits	to	milkshops	 309
Visits	to	cowsheds	323

During the year large improvements have been carried out on the milk producing farms in the Borough.

A new cowshed and dairy washhouse were erected at one farm, and cowshed reconstruction was carried out at five others.

One prosecution was instituted against a producerretailer, living outside the Borough, for selling milk without being registered within the Borough. A fine of 10/- was imposed by the Justices.

Milk (Special Designations) Order, 1923.

The following samples were submitted to bacteriological examination and found to be up to standard:—

Certified milk	 	3	samples
Grade A milk		10	,,
Pasteurised milk	 	6	1)

The Milk (Special Designations) Order, 1936.

This order came into operation on June 1st, revoking the Milk (Special Designations) Orders of 1923 and 1934, and prescribing the following special designations for milk:—

Tuberculin tested Accredited Pasteurised.

Ninety samples have been examined, viz:-

	Sai	tisfactory	Unsatisfactory
Tuberculin tested		9	
Accredited		5	3
Pasteurised		53	20

The unsatisfactory samples of accredited milk were followed up and advice was given as to the methods of production. Subsequent samples satisfied the bacteriological tests.

In consequence of the unfavourable reports on pasteurised milk, attention was given to the pasteurising plants, with the result that further samples complied with the conditions laid down in the Order.

Examination of milk for the presence of tubercle bacilli.

Ten samples of milk were submitted for biological examination for the presence of tubercle bacilli. These were mixed milks coming into Bournemouth from farms outside the Borough. In no case were tubercle bacilli detected.

In addition fifty-two samples of non-graded milk were examined microscopically for the presence of dirt and tubercle bacilli. These organisms were not found in any of the samples, 51 of which had attained a satisfactory standard of cleanliness.

There are four registered and seven licensed slaughter-houses; there are also nine wholesale meat-

stores.

The number of animals slaughtered was :—

Beasts 545

Sheep 7681

Calves 2765

Pigs 8812

In consequence the Inspectors recorded 2692 visits.

Other Food Premises Controlled.

These include 89 fish-shops, 35 of which sell fried fish:—

			Visits
Butchers			2336
Fishmongers and	Poulter	ers	692
Greengrocers			1316
Grocers			1557
Ice-Cream Vendo	rs		122
Hawkers' carts			199
Restaurants and	cafes		61
Stalls			23

6306

The amount of food surrendered and destroyed as diseased or unsound.

Predoteren.			
			1bs.
Butchers' meat	(diseased)		9080
Butchers' meat	(unsound)		3065
Fish			1501
Fruit			27
Tinned food			3170
Poultry			393
Rabbits			153
Eggs			20
Liquid eggs			11
Egg whites			44
Celery			9856
		_	
			27320
		-	-1

Bakehouses.

There are 89 registered, one being an underground bakehouse.

They have been limewashed or painted as required and kept in a satisfactory state. 174 visits have been paid.

Ice-Cream Premises.

The registration of premises used for the manufacture or sale of ice-cream is required by the Bournemouth Corporation Act, 1930. There are on the register 178 retail and 48 manufacturers and retail premises.

Prepared Meat Premises.

Registration of these is also required by the Bournemouth Corporation Act. 163 are registered.

Merchandise Marks Act. 1926.

Constant supervision is exercised by the Food Inspectors. It has been found that these orders are being complied with by the numerous tradespeople in the town in a satisfactory manner, although occasional infringements have been detected. One prosecution was instituted against a retailer for selling imported turkeys not bearing an indication of origin. This vendor was fined £2 and 10/- costs.

FOOD AND DRUGS (ADULTERATION) ACT, 1928 AND THE PUBLIC HEALTH (PRESERVATIVES, ETC. IN FOOD) REGULATIONS, 1925-1927.

In the following tables is given the nature and degree of adulteration together with the action taken.

ADULTERATED OFFICIAL SAMPLES.

No.				Nature of Adulteration				Action taken
433								Vendor warned.
456				101	,,			T C 1
								accepted. Vendor warned
473	,,			1.6%	, ,,	,,		Vendor warned.
481	,,			2%				Vendor warned.
482				1.1%	D ":			Vendor warned.
417	Malt	Vines	ar	14%	Deficient	in Acc	etic	
				Ac				Vendor warned.
566	Milk							Taken in course of delivery. Producer was fined £2 and 10/- costs.
584				5%	extraneous	water		Vendor warned.
591) ,,			Taken in course of delivery.
592	,,			20/	, ,,	",		
002	,,			- /0	"	"		Producer warned.
657	,,			4%	,,	,,		Producer fined 10/
695				20%	fat deficie	nt		Vendor warned.

ADULTERATED UNOFFICIAL SAMPLES.

1	Tinned Sild	Contained 3.1 grains of tin per lb. Consignment surrendered and destroyed.
2	, ,	Contained 3.5 grains of tin per lb. Consignment surrendered and destroyed.
44	Milk	5% fat deficient. This was taken as a preliminary to sample No. 566.
61	"	2% extraneous water. Further sample taken—proved satisfactory.
67	,	10% fat deficient. Official sample taken—proved satisfactory.
85	Tinned Sild	2.3 grains of tin per lb. Consignment surrendered and destroyed.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

It will be noticed that there have been relatively few notifications and a small number of deaths recorded in respect of the common infectious diseases.

In August, however, misfortune in the form of Typhoid Fever fell upon Bournemouth and the adjoining boroughs of Christchurch and Poole. The lastnamed and the County of Dorset were actually the foci of infection but as the County Borough was most affected the outbreak has been referred to ineptly as the Bournemouth epidemic. Concerning the origin and the methods of control that were adopted much has been said by individuals competent or otherwise to express an opinion, but there is an outstanding feature that the outbreak was quietly and steadily brought to a standstill in the course of a few weeks and the district thereby saved from disaster. It will perhaps be instructive if I record my impressions briefly in the form of a narrative as other and doubtless more detailed reports will be available shortly. So far as Bournemouth was concerned, the onset was insidious. In July there had been brought to my notice what appeared to be isolated cases of food-poisoning though the diagnosis was not confirmed in the laboratory. I had also heard unofficially of people outside Bournemouth who were having gastro-intestinal symptoms associated with slight pyrexia of brief duration. Consequently, it appeared probable that there would be individuals similarly affected in the County Borough.

In the first week of August, I commenced my annual vacation, leaving in charge of the Health Department Dr. Pedley, Deputy Medical Officer of Health. The latter communicated with me on August 20th as he had been asked on August 13th to see in consultation two or three patients whose symptoms suggested food-poisoning; since that date other cases had been brought to his notice. Dr. Pedley told me of the action which he was taking and received my

approval. The day following he heard from Dr. Maule Horne, Medical Officer of Health of Poole, that there were in that borough several individuals who were possibly suffering from Enteric Fever. Dr. Maule Horne and Dr. Pedley decided to inform the Ministry of Health immediately. In consequence, Dr. Vernon Shaw, a Medical Officer of the Ministry, visited the district in the morning of August 22nd. A conference was held in Poole. There were present Dr. Shaw, Dr. Maule Horne, Dr. Pedley and certain practitioners who were in attendance on the patients. In addition there was Mr. X, the Managing Director of a large dairy which had a depot in Poole deriving its milk from farms in Dorset. Attention had been directed to this dairy as it was noted that most of the patients had consumed milk from that source. As the result of the conference it was decided that the outbreak was one of Enteric, possibly Para-typhoid, and that this was due to infected milk. Mr. X was asked to pasteurise all milk which passed through his hands and this he undertook to do as from August 22nd.

He was therefore allowed to continue the retail distribution of the milk.

Dr. Shaw considered that the medical practitioners in the district should be at once advised of the circumstances and that every case notified should be removed to an Isolation Hospital. Dr. Pedley sent the same day a circular letter to all doctors who were known to be practising in Bournemouth and informed me likewise what had taken place.

I therefore returned to duty on August 24th and found that notifications chiefly of Para-typhoid were being received rapidly. Many patients had already been admitted to hospital, and others were waiting to be removed. It was apparent that the number of beds available would be quite inadequate and that further accommodation should be provided without delay. For several years, I have contemplated the

possibility of an epidemic in Bournemouth and have advised the Council that a new Isolation Hospital should be built. It was unfortunate that as a result of complications this institution was not in existence when the emergency occurred. A special sub-committee of the Council having been appointed, various means of obtaining additional accommodation were considered. Attention was given to Fairmile House in Christchurch, formerly a Poor Law Institution, but now under the administration of the Public Assistance Committee of the County Borough. The Chairman of this Committee co-operated actively as he did on subsequent occasions with the result that the wards on the ground floor of the Women's Infirmary were lent to the Health Committee for the use of Enteric patients. The Master and Matron of the Institution gave valuable assistance and Dr. Shaw and Mr. Norman, an Inspector of the Ministry, did much to expedite the arrangements. The Medical and Nursing staff at Fairmile were provided by the Health Committee. By this time, it had been established that most, if not all, of the patients were suffering from Typhoid and not Para-typhoid; several were already dangerously ill. A few days after the first patients had been admitted to Fairmile Infirmary it was obvious that still more beds would be needed.

The Chairman of the Public Assistance Committee mentioned Haddon Hill, a large house then unoccupied, in a secluded part of Bournemouth. With his help possession was obtained and work commenced. In the course of three days the house had been adapted as a hospital and patients were being admitted. Simultaneously, temporary buildings were erected in the grounds. Yet another hospital was supplied by the Governors of the Royal Victoria and West Hants Hospital, which lent the Poole Road Hospital together with the staff.

By this means it was possible to accommodate all the patients who required admission. During the first week of the outbreak there was unavoidable delay in providing the beds so urgently needed and it was natural that this should cause a certain amount of criticism. There was also difficulty in obtaining an adequate number of efficient nurses.

Hospital accommodation was one of the many problems which had to be dealt with during the outbreak for the Health Department was the scene of extraordinary activity. Doctors were calling or telephoning to give details as to cases—some definite, many suspected, asking for a diagnosis to be made or confirmed relatives of patients, hotel proprietors, principals of schools and representatives of the Press were among those clamouring for information or advice. Nevertheless the work was tackled by all members of the staff who laboured constantly and ungrudgingly. The usual routine associated with a notifiable disease was observed. When a case was notified the house was at once visited by an inspector who made the necessary inquiries and arranged for the removal of the patient to be followed by disinfection of the premises. So far as practicable a list of "contacts" was obtained, due recognition being given to the fact that the infection had apparently originated late in July. The information received was forwarded in respect of visitors to the Medical Officer of Health concerned. Very soon details were being supplied from other areas of visitors who had become ill after returning home. The facts collected from all sources were very interesting and there was no doubt that milk from the suspected dairy was responsible for the outbreak. 254 of the 284 patients who were proved to have the disease had consumed the milk in question. The remainder were believed to have done so as meals had been taken on various premises, e.g., restaurants. With this knowledge it was easy to be hopeful and to anticipate the progress of the epidemic. Assuming that the milk was a source of danger up to August 22nd, when pasteurisation was first carried out, it was legitimate to expect that there would be a marked drop in the number of notifications in the first week of September and this actually occurred.

Although optimism prevailed in the Health Department, there was in certain directions a lack of restraint. Some people talked of carriers and the need of universal inoculation, others doubted the origin of the outbreak and criticised the methods that were being adopted, especially those relating to publicity. It is appropriate therefore to say that throughout the critical period constant touch was maintained with the Ministry's officials, particularly with Dr. Shaw, who gave advice and approval on many occasions.

In Bournemouth an attempt was made to deal with every case on its merits so that removal to hospital was not invariably required. Thirty-seven patients were nursed in their own homes or in nursing establishments. This was permitted when it was considered that effective nursing and isolation could be arranged or when removal might be harmful to the patient. In the same way the circumstances of each contact were considered, especial attention being given to those who were likely to handle food. Elementary school children who were contacts were excluded from school in order to satisfy public opinion rather than to serve any useful purpose.

When reviewing the past it would seem that after the initial difficulties had been overcome the methods practised were productive of good results. It is true that 31 of the 284 patients nursed in Bournemouth died, but several of these had been ill for some time before the nature of the illness was suspected. It has also been ascertained that 138 individuals (and perhaps others) were infected in Bournemouth before they returned home and became ill but the majority of these had already left the district when the outbreak was discovered.

The recovery of a patient is not the only result hoped for; an aspect of great importance to the convalescent is his freedom from infection. As is well known, there are individuals who may or may not have suffered from Enteric that are capable of harbouring for an indefinite period the germs of the disease. These are passed in the faeces or urine or in both. Before a patient was discharged from hospital every effort was made to satisfy the requirements of the Bacteriologist who adopted the most recent and exacting methods in examining the specimens. It was found impossible to obtain negative results from seven individuals who have become carriers. It is not practicable to keep such persons in hospital indefinitely and they have therefore returned home provided with advice as to their future conduct. One of them, a woman, insisted upon taking her discharge directly she felt well, with the result that she apparently infected her child soon after reaching home.

This is the only known instance in Bournemouth of infection by a carrier since the outbreak began.

There are several lessons which can be learnt from the epidemic and some consolation to be obtained for in many towns the size of Bournemouth the consequences would have been much more serious.

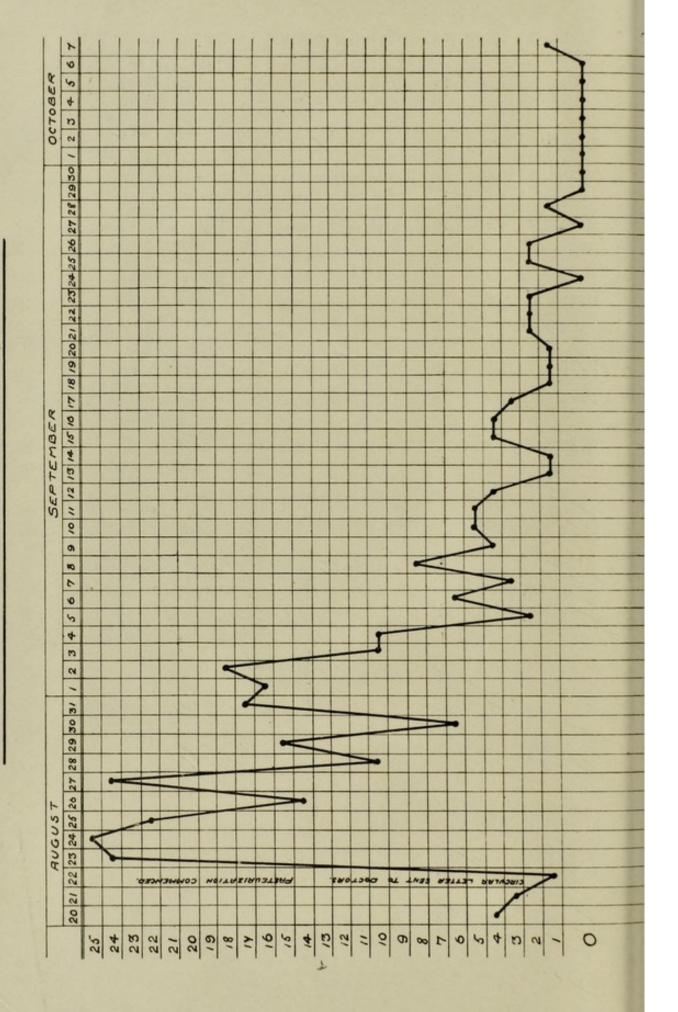
TYPHOID FEVER.

Certified Causes of Death in respect of Local Cases.

Initials of Patients	Sex	Age	Date of Death 1936	Certified cause of death
B. F. M	(F)	16	29th August	 1a. Acute peritonitis. b. Typhoid fever. c. Acute appendicitis. 2. Appendicectomy. Aug. 20.
R.G. S	(M)	25	30th August	1a. Intestinal haemorrhage.b. Typhoid fever.
O. D. J	(M)	10	1st September	 1a. General peritonitis. b. Perforation of ileocaecal ulcer. c. Typhoid fever.
T. A. S	(M)	31	1st September	1a. Intestinal haemorrhage.b. Typhoid fever.
A. T. F	(M)	62	2nd September	1a. Typhoid fever.
G. P. D	200	4	2nd September	1a. Typhoid fever.

Initials of Patients	Sex	Age	Date of Death. 1936	Certified cause of death.
J. H. G I. D. B	(M) (F)	18 14	2nd September 4th September	1a. Typhoid fever. 1a. Cardiac failure.
				b. Intestinal haemorrhage.c. Typhoid fever.
D. M. F	(F)	29	7th September	1a. Lobar pneumonia.b. Typhoid fever.
M. F. L I. M	(F) (F)	16 21	9th September 9th September	1a. Typhoid fever. 1a. Toxaemia.
B. F. C. B.	(M)	28	11th September	b. Typhoid fever.1a. Peritonitis (operation).
C. A. M	(F)	60	12th September	b. Typhoid fever. 1a. Enteric fever.
H. D. H. G.	(M)	5	13th September	1a. Haemorrhage. b. Enteric fever.
D. E.B L. E. W	(F) (F)	40 74	13th September 13th September	1a. Typhoid. 1a. Peritonitis.
4. 4.			Total September	b. Perforation of ulcer of ileum c. Typhoid Fever.
F. M	(F)	59	14th September	1a. Typhoid fever. b. Broncho pneumonia.
P. F	(F)	6	14th September	1a. Perforation and general peritonitis.
FCO	(M)	0	15th Contombor	b. Enteric fever.
E. C. O A. E. E	(M) (M)	9 25	15th September 18th September	1a. Typhoid fever. 1a. Broncho pneumonia.
P. E. J	(F)	6	18th September	b. Enteric fever. 1a. General peritonitis.
H. A. B.	(M)	45	21st September	b. Typhoid fever. 1a. Broncho pneumonia.
	(2-5)			b. Enteric fever. 2. Multiple boils.
E. R	(M)	75	25th September	1a. Typhoid fever.2. Parkinson disease.
L.E.deL.S.	(F)	49	29th September	senility. 1a. Typhoid fever.
				2. Hypostatic congestion of lungs.
P. K. M. S.		16	30th September	1a. Toxaemia and exhaustion.b. Typhoid fever.
E. C	(F)	42	4th October	1a. Toxaemia due to chronic ulcerative colitis.
W. G. S	(M)	46	6th October	b. Enteric fever.1a. Subphrenic abscess and
				empyema. b. Perforated typhoid ulcer
				(opn. ulcer sutured 3/9/36).
M. O. F	(F)	18	17th October	
O. A. W. J. J		22 73	17th October 20th October	1a. Typhoid fever. 1a. Toxaemia and femoral
	,			thrombosis. b. Typhoid fever.
A. J. D	(F)	59	31st October	1a. Typhoid fever. 2. Obesity.

DAILY NUMBER OF TYPHOID CASES.



AGE AND SEX INCIDENCE OF CASES OF TYPHOID FEVER.

1 14	1 1	11	11	2	C1	3	-	4	3	1	2	-1	1	2	01	2	1	- 1	11	21	-
41- M. F.	1	1	1	1	1	1	1	-	1	1	1	-	1	1	1	1	1	1	-	61	1
40 F.	1	1	1	1	63	1	-	-	1	1	1	1	2	1	1	-	1	1	-	-	1
36-4 M.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1	1	1
-35 F.	-	1	1	1	1	8	3	1	E	1	-	1	1	1	T	1-	1	1	1	1	_
31-3 M.	1	i	1	1	1	1	-	1	1	1	1	1	1	1	1	1	1	1	1	-	1
26-30 M. F.	1	1	1	1	2	2	1	-	-	2	1	1	1	1	-	1	1	-	1	1	1
26 M.	F	1	1	2	1	-	-	3	1	-	1	1	1	-	1	1	1	-	1	1	1.
-25 F.	1	1	1	-	-	1-	1	1	2	-	1	1	2	1	2	-	1	1	1	1	1
21- M.	1	-	-	-	1	1	1	-	1	1	1	1	10	1	-	1	1	1	1	1	1
16-20 M. F.	1	1	1	-	2	3	-	2	-	1	-	1	-	2	1	-	1	1	1	1	1.
16 M.	-	1	1	-	1	-	1	1	1	2	1	1	1	1	1	1	-	1	1	1	1
11-15 M. F.	1	1	1	-	7	1	2	4	-	3	1	-	-	1	1	1	1	1	1	1	Î
I M	1	1	1	2	-	1	1	2	-	2	-	-	-	3	-	2	-	1	1	-	1
6-10 M. F.	-	1	1	2	-	-	3	3	1	2	1	3	3	1	-	-	1	1	-	1	-
M.	1	1	1	5	3	5	-	-	-	1	1	5	-	2	1	-	1	1	1	1	-
0-5 M. F.	1	1	1	4	-	-	1	-	1	-	1	-	-	4	1	1	1	1	1	-	1
× ×	1	1	1	3	8	2	1	1	1	1	-	-	3	2	-	-	L	1	1	1	1
	:	:	*	1:	:	:	:	:	:	1	:	:	:	1	1	:	:	:	:	;	:
10												1									
Total	4	3	-	24	25	22	15	24	10	15	9	17	16	18	10	10	2	9	3	8	4
Cases F.	8	-	1	=	18	13	=	16	œ	6	4	00	10	6	7	9	1	3	2	4	8
M.	-	2	-	13	7	6	4	œ	2	9	2	6	9	6	3	4	2	3	-	4	1
	:	1	:	1			1	:	:	:	-	:	:	:	1	:	:	:	1	:	:
															1			-			
	20th	21st	22nd	23rd	24th	25th	26th	27th	28th	29th	30th	31st	1st	2nd	3rd	4th	5th	6th	7th	8th	9th
Date	Aug. 20th	:	1	:	2	2	:			:	:	1	Sept.	:	1 2	1	1	1	1	1	-

6	-	-	-	11	11	11	-	-	1-1	11	11	11	11	11	11	-	11	11	11	1.1	11	111
41- M. F.	64	-	1	-	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1		-
Z																						
40 F.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	T	1	1	1	1
36-40 M. F.	1	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
				10,3																		
31–35 M. F.	1	1	1	1	1	1	1	1	1		1	1	1	1	1	1	I	1	1	1	1	I
E M	1	-	1	1			1	1	1	1		1	-	1	1	1	1	1	1	1	1	1
30 F.	1	1	1	1	1	1	1	1	1	1	1	1	_	1	1	1	1	1	1	1	1	1
26-30 M. F.	1	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	-	1	1	1
21-25 M. F.	1	1	-	1	-	1	-1	1	1	-	1	1	1	1	1	1	-	1	1	1	1	1
21 M.	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1	1	1	1	1	1	1	1
0 %	-	1	-	1	1		1	1	1	1	1	1	-	1	1	-	1	1	1	1	1	1
16-20 M. F.	1	1			,		;		1		-	1		1				1	1	1		1
11-15 M. F.	-	1	1	1	1	1	1	-	1	1	1	2	1-	1	1	1	1	1	1	1	1	1
K =	1	1	-	1	1	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
~															8.							
6-10 M. F.	1	-	1	1		-	1		1	1	1		1						1	1	-	
	1	1	1					1	1		1		1						1	1	181	
0-5 M. F.	1	1	1	1.	1	1	1	1	1	1.	1	1	1	1	1	1	1	1	1	1	1	1
o X	1	1.	1	1	1	1	1	-	-	1	1	1	1	1	1	1	1	1	1	1	1	1
	1	:	:	1	:	**	:	:	:	:	:	:		:	:	:	:	:	:	:	:	:
-	13																					
Total	S	5	4	-	-	4	4	3	-	1	-	2	2	2	1	2	-	1	-	1	1	-
																					1	
Cases F.	3	2	3	1	1	-	2	2	1.	-	1	2	1	-	1	2	1			1	1	
	-	~				-	-	1		1					1	1						
M.	2	3	-	1		3	2	200	1			1	-	1		1		1	1	1	1	
	:	:	:	:	:	:	:	:	:	:	:		:	:	:	:	:	:	:	:	:	:
	th	th	th	th	th	th	th	th	th	19th	th	st	22nd	rd	24th	th	th	th	th	th	th	7th
ite	10	11th	12th	13th	14th	15th	16th	17th	18th	19	20th	21st	22	23rd	24	25th	26th	27th	28th	29th	30th	
Date	Sept. 10th	:	:	:			:	:		:	:	:	:	:	:	"	"	:		"		Oct.
	l o		3				3	- 2			1			9					100		Day 1	01

NOTIFIABLE DISEASES (OTHER THAN TUBER-CULOSIS) DURING THE YEAR 1936.

Disease.	Total Cases Notified.	Total Cases Admitted to Hospital.	Total Deaths.
Smallpox	_	_	_
Scarlet Fever	78	54	_
Diphtheria	38	37	2
Enteric Fever (including Paraty-			
phoid)	289	233	31
Puerperal Fever	2	1*	1
Puerperal Pyrexia	4	3*	1
Pneumonia	36	5*	9
Erysipelas	22	6 (1*)	
Ophthalmia Neonatorum	4	1*	_
Encephalitis	333		
Lethargica	2	1*	2
Polio-myelitis	1	1	_
Dysentery	_	_	
†Chicken-pox	84	-	_
Cerebo-Spinal Meningitis	2	1	1

*General Hospital.

In addition to the 284 cases associated with the epidemic there were five other notifications of Enteric. Two were reported in January, both being Typhoid. One of these was a nurse who had been in attendance on the second case, a man who was by occupation a hawker, living on the outskirts of Bournemouth and Poole. The habits of this family were nomadic and probably insanitary so that when the summer outbreak occurred the man was considered as a possible cause but no connection could be traced. In July there were two notifications of Para-typhoid B. The patients had recently come from abroad and were not well when they landed. The fifth case was also one of Para-typhoid B notified in October. The source of infection was not traced.

IMMUNISATION AGAINST DIPHTHERIA.

Dr. Pedley continues to devote two sessions weekly to this work. He also undertakes the immunisation of the inmates at the Victoria Home for Crippled Children.

[†] Note.—Chicken-pox ceased to be notifiable on 1st February, 1936.

The number of children dealt with was as follows:

	ninary	Completely		Part		Fina	
Schic	k Test	Immunised		Immu	nised	Schick	Test
Negative	Positive		1	Injec- tion	2 Injections	Negative	Positive
10	2	689		127	155	233	3

CANCER.

There is an unusual proportion of aged inhabitants in the County Borough, so that the deaths from Cancer normally exceed those recorded in towns of approximately the same size as Bournemouth.

For chronic and incurable cases among the poor, beds are available in the wards of the Fairmile Infirmary, which is under the control of the Public Assistance Committee. Otherwise no beds or facilities are provided by the Council. The Royal Victoria and West Hants Hospital in its two branches, at Ashley Road and Poole Road, provides ample accommodation in public and private wards. There is an adequate and efficient out-patient department.

The Hospital has a private supply of Radium for treatment purposes. This has been of great value to the Institution as there are administrative difficulties in connection with the treatment of Bournemouth patients at the Regional Radium Centre at Southampton.

The Hospital authorities have had consultations with representatives of the Radium Commission in order to ascertain if it is practicable to establish a Radium Centre in Bournemouth which will also be of service to other areas in Wessex.

Owing to the somewhat peculiar circumstances prevailing in Bournemouth it has not been found feasible to undertake local investigations, nor from the preventive aspect for lectures to be given, nor printed announcements published on a large scale.

CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1936.

These figures do not coincide with those of the Registrar-General, which relate to the 53 weeks ending 2nd January, 1937.

branous Croup) 38 — 6 23 6 3 — — 27 27 97 65 63 27 10 65 63 27 10 65 63 27 10 65 63 27 10 65 63 27 10 65 63 27 10 65 65 63 27 10 65 65 65 65 65 65 65 65 65 65 65 65 65			NO	OF	CASE	ES NO	OTIFI	ED	
The standard of the standard		es			At A	ges-	rears		
branous Croup) 38 — 6 23 6 3 — — 27 27 97 65 63 27 10 6 6 7 9 1 — 6 7 97 97 97 97 97 97 97 97 97 97 97 97 9	NOTIFIABLE DISEASE	all	-		under	under	and under 5	100000	65 and upwards
CICUIO-CIDINGI MCIMINITALIS — — — — — — — — — — — — — — — — — — —	Erysipelas Scarlet Fever Enteric Fever (including Para-Typhoid) Ophthalmia Neonatorum Pneumonia Encephalitis Lethargica Puerperal Fever Puerperal Pyrexia	22 78 289 4 36 84 2 2	-4	10 27 7	1 43 97 - 3 61 - -	2 13 65 - 1 3 -	9 63 	1 27 - 3 -	10 —

Note.—Chicken Pox ceased to be notifiable on 1st February, 1936.

BLIND PERSONS.

The Bournemouth Blind Aid Society is responsible for the administration of the Council's scheme. The number of blind persons on the register was 169, 19 new cases having been added during the year.

BIRTH-RATES AND DEATH-RATES.

	Rate per 1,000 population		Annı	ual I	Death popu	Rat	e per	1,0	00		Rate 1,000 birt	live
	Live births Still-births	All causes	Typhoid and Para-typhoid	Small Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total deaths under 1 year
England and Wales Bournemouth	14.8 .61 11.66 .43	12.1 9.8	.01	.00	.07 .06	.01	.05	.07	.14	.52 .42	5.9 1.43	59 39

VACCINATION.

		Jan.	Feb.	March.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
No. of cases in Birth lists received	1	29 1	115	122	119	141	168	142	117	157	105	131	133	1579
No. of Certificates of Vaccination	1			1			100	112	,	107	100	101	100	107.
received		28	31	42	24	29	39	41	30	28	54	48	40	43
No. of Certificates of Vaccination		6		1000					-			10		
received of children born in other														
districts		1	2	3	1	4	3	4	_	2	4	3	3	30
No. of Certificates of postponement-														
Health of child		4	3	5	7	2	4	3	5	1	5	5	4	48
Condition of house		-	-	-	_	_	_	-	_	_		_	_	_
Prevalence of Infectious														
Disease		-	-	-	-	-	-		_	_	-	_	_	-
No. of Certificates under Section 1 of				-						1				
the Vaccination Act, 1907		85	77	78	74	90	76	84	90	93	79	60	74	960
No. of Certificates of Insusceptibility														
		-	-	-	-	1	-	-	-	-	-	-	_	1
		11	28	6		10		19		42		2	8	196
		-	1	3	2	-	2	2	5	-	3	2	-	20
No. of entries in lists sent to Public		-	1 2	100	1		200	1200	1023	1000	3			
Vaccinator		25	7	15	8	17	15	24	20	28	28	26	12	225

TUBERCULOSIS.

Public Health (Tuberculosis) Regulations, 1930.

Summary of notifications during the period from 1st January, 1936, to 31st December, 1936, in the County Borough of Bournemouth.

						FC	R	MA	L	N	OTIFIC	CATIO	NS
Age Periods			Pı	rim	ar	y n	oti	fic	ati	ons			
		to	to	to	to	to	to	to	to	to	65 & up- wards	Total (all ages)	Total notifications
Respiratory Males Females	7	2	1 2	2	2 3	3 7	17 13	12 8	11 5	10 7	4 5	64 50	65 53
Non-Respiratory Males Females		3	2	3	1	2 3	2	3				10 12	10 12

Particulars of new cases of Tuberculosis and of deaths from the disease of Bournemouth residents during 1936:—

		New	Cases			De	aths.	
	Respi	ratory		on- iratory	Respi	ratory	Non Respir	
	M.	F.	М.	F.	М.	F.	M.	F.
Under 1 year .	 -	_	_	-	_	_	_	-
1-5 years .	 2	-	-	3	1	_	-	1
5—15 ,,	 3	2	5	2		-	2	-
15—25	 6	15	3	4	2	5	-	-
25—35 ,,	 21	16	2	2	6	9	1	
35—45 ,,	 16	10	1	3	5	7	_	
45—55	 14	6	_	-	11	6	1	
55—65 ,,	 15	9	_	-	5	2	-	1
65 and upwards .	 5	5	-	2	3	5	1	2
Totals .	 82	63	11	16	33	34	5	4

Sixty-seven deaths from Tuberculosis of the Lungs give a death rate of .56 per thousand. In the previous year the deaths amounted to 62 and the death-rate was .52.

The previous table includes seven non-notifiable deaths. In three cases the death was certified after post-mortem examination.

The non-notified deaths accordingly numbered 4 or 5.26 per cent of the total of 76 deaths from Tuber-culosis.

The first intimation received concerning these cases was from the death returns, and the attention of the private practitioner concerned was called to his omission in each case.

Location of Non-Respiratory Tuberculosis in the patients of all ages who were notified:—

LOCATI	ION.		Male.	Female.	Total
Disease of Bones and Jo	oints	 	5	4	9
Disease of Genito-Urina	ry System	 	1	1	2
Abdominal Disease		 	1	1	2
Disease of Glands		 	1	5	6
Disease of other parts		 	2	1	3
Tot	als	 	10	12	22

TUBERCULOSIS DISPENSARY.

The Dispensary was open on 101 occasions, Monday afternoon being available for women and children, Wednesday afternoon for men. Four hundred patients and contacts recorded 969 attendances as follows, an average of 9.5 per session:—

Adults, male	 	457
Adults, female	 	430
Children, male	 	49
Children, female		33
		969

In 1935, 384 persons recorded 927 attendances.

SANATORIA AND OTHER INSTITUTIONS.

In previous reports reference has been made to a decision of the Council to establish a Sanatorium Hospital.

Much delay has been due to the fact that difficulties have been encountered in acquiring a suitable site. Towards the end of the year it was ascertained that Linford Sanatorium near Ringwood, a privately-owned Institution, was for sale.

Negotiations were commenced and concluded with the sanction of the Ministry which has recently given its approval to the purchase of the property. The site is a large one and the surroundings ideal.

At the time of writing this report patients have already been admitted to the existing buildings and plans for a modern Sanatorium are being prepared.

Public Health (Prevention of Tuberculosis) Regulations, 1925, and the Public Health Act, 1925, Section 62.

No action has been necessary under the above.

PATIENTS WHO RECEIVED TREATMENT DURING 1936.

DURING 1950.		
ADULTS.	Number of	
a	Patients.	
Cornelia Hospital, Poole	3	28
Firs Home, Bournemouth	24	4716
Holy Cross Sanatorium, Haslemere	1	173
King George's Sanatorium, Bramshott	1	366
Papworth Hall, Cambridge	3	545
Preston Hall, Aylesford	7	1362
"Rizwan," Broadstone	33	5665
Royal National Hospital, Ventnor	7	754
Royal National Sanatorium, Bourne-		
mouth	75	7225
Royal Sea-Bathing Hospital, Margate	5	464
Royal Victoria & West Hants Hospital,		
Bournemouth	9	455
"Thaxted," Parkstone	9	1008
CHILDREN.		
Children's Sanatorium, Harpenden	1	134
County Sanatorium, Havenstreet, Isle		101
of Wight	1	211
Lord Mayor Treloar Cripples' Hospital,		211
A 11	4	813
Royal Sea-Bathing Hospital, Margate	1	276
Royal Victoria & West Hants Hospital,		The same
Bournemouth	4	75
Victoria Cripples' Home, Bournemouth	1	46

MIDWIFERY AND MATERNITY SERVICES.

Forty midwives notified their intention to practise, none of these being employed or subsidised by the Corporation.

One hundred and seventy-two records were received concerning the medical help called in by midwives. They have been classified as follows:—

PREGNANCY.		CONDITION OF INFANT.				
Miscarriage Haemorrhage Albuminuria Other reasons		3 4 5 3	Premature Birth 5 Condition of Baby 10 Discharge from Eyes 9 Malformation 9 Stillbirth 2			
Labour.						
Breech Cases Abnormal Presentation Delay in Labour Rupture of Perineum Retention of Placenta Haemorrhage Other reasons (Mother) Uterine Inertia Lying-in Period (Mor	 	9	OTHER NOTIFICATIONS RECEIVED FROM MIDWIVES. Substitution of artificial for breast feeding 25 Still birth 5 Possible source of infection 3 Death of child 5			
Rise of Temperature Other reasons		2 7	38			

Births.

One thousand five hundred and seventy-seven were registered, 233 of these being transferred by the Registrar-General to other districts. Forty-nine which occurred elsewhere were considered to belong to Bournemouth, the net births being 1393, giving a birth-rate of 11.66.

The birth-rate in Bournemouth for the past ten years has been as follows (calculated on the Registrar-General's estimate of the population):—

1930 1928 1931 1932 1933 1927 1929 1934 1935 1936 11.6 11.4 10.5 9.74 11.11 11.2 11.14 10.67 11.05 11.6

MATERNAL MORTALITY.

There were nine deaths associated with pregnancy or childbirth. Two of these were transferred by the Registrar-General to other areas. Of the seven remaining, two were due to sepsis.

The maternal mortality rate is therefore 4.85 per 1000 births (live and still) as compared with 2.93 in the previous year.

The cause of death in each case was as follows:-

um).	Eclampsia (post partur	23. (a)	Age	(1)
tuberculosis.	Advanced pulmonary	39. (a)	Age	(2)
		200		
ia.	Post partum eclampsia		Age	(3)
	Eclampsia.	34. (a)	Age	(3) (4)
		***	0	
		28. (a)	Age	(5)
lacenta.			-	
P			Age	(6)
				(7)
is				(-)
partum haemorrhage	Pregnancy. Shock. Manual removal of pla Anaemia due to post preparal pyaemia. Cerebral embolism. Malignant endocarditis	30. (a) 30. (a)		(5) (6) (7)

As in recent years the circumstances of these deaths were investigated and reports sent to the Ministry of Health.

(c) Septicaemia, miscarriage.

MATERNITY AND NURSING HOMES.

The following figures relate to 1936:-Number of applications for registration... 12 (1)Number of Homes registered (2) 12 Number of orders made refusing or can-(3)Nil celling registration Number of appeals made against such (4) orders Number of cases in which such orders have Nil (5)(a) Confirmed on appeal, and Nil (b) Disallowed ... Nil (6) Number of applications for exemption from registration 5 Number of cases in which exemption has (7)been :-(a) Granted 5 (b) Withdrawn Nil (c) Refused ... Nil

Total number of Homes registered

64

The results of inspection have generally been satisfactory, minor defects only having been encountered.

ANTE-NATAL AND POST-NATAL CLINICS.

One session is held each week at "Avebury."

There were 50 sessions during the year, 381 patients recording 505 attendances at the combined clinics.

CONTRACEPTIVE CLINIC.

In November, 1935, arrangements were made to give contraceptive advice in cases where further pregnancies would be detrimental to health. Special sessions are held at the Central Clinic and are conducted by Dr. Grace Wood, who supplies the following information:—

41 mothers attended during 1936; of these

13 have for various reasons discontinued attending,

2 of them being considered quite healthy and unsuitable for advice. Of the remainder, the following details may be of interest:—

AGES OF	PATIE	NTS.	
20-25			5
25-30			10
30-35			7
35-40			4
40-50			2

THE REASONS FOR GIVING ADVICE.

Chronic nephritis .							5
and the same of th							1
Fatty degeneration of he	eart						1
Profound anaemia .							1
Damage to organs (e.g., ch		thrombo	phlebiti	s, severe v	arice	ose	
veins, etc., from chi							8
Debility from too freque		ing (e.g.,	seven	children	in 8	81	
years, 11 children in	14 years)						12

The advice given varies according to circumstances. Sometimes it is of a temporary nature only, designed to give the mother a rest of a year or so between births. In other cases, e.g., chronic Nephritis, where a complete cessation of child-bearing is desirable, a more rigorous technique is taught. Some mothers, unfortunately, cannot acquire the simple technique but those who successfully apply it express gratitude for renewed health.

INSTITUTIONAL PROVISION FOR MOTHERS AND CHILDREN.

The Council does not provide maternity beds, but has an agreement with the Royal Victoria and West Hants Hospital. This Institution has recently provided improved and new accommodation in its Boscombe branch which admits all municipal cases including those sent from the Public Assistance Institution at Fairmile.

Ailing infants are also sent to Boscombe Hospital, four having been admitted during the year. Two others were sent to the Victoria Cripples' Home and to the War Memorial Children's Hospital, Swanage.

INFANTILE MORTALITY.

Fifty-five deaths of children under one year have occurred. This provides an infant mortality rate of 39.4, yet again the lowest ever recorded in Bournemouth.

In the following table is given the rate of Infantile Mortality for the past ten years:—

1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 52.0 55.0 46.5 46.2 62.6 54.7 53.7 53.0 39.4

PROVISION OF MILK TO MOTHERS AND CHILDREN.

There is a steady increase in the amount of milk supplied to mothers and infants. The cost was £1,476 as compared with £1,116 in 1935 and £859 in 1934. The total number of families was 631, the daily average being 265. These figures apply to ordinary milk only.

In addition, 6080 lbs. of dried milk were given at a cost of £450 approximately, and 1210 lbs. were sold at cost price.

INFANT DEATHS.

Cause of Death.	Under 1 wk.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under 3 mths	3-6 months	6-9 months.	9-12 months	Total Deaths under 1 year
Small-pox	_	-	_		_	-	-	_	-	_
Chicken-pox	-	-	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	-	-	-	-		-	-	-		1
Whooping Cough Diphtheria and Croup						1				1
Fryeinelae										
Tuberculous										
Meningitis	_	-		_	_	_	_	_	_	_
Abdominal										
Tuberculosis	-	-	-	-	-	-	-	-	-	-
Other Tuberculous		16.0					133	Sec.		
Diseases	-	-	-	-	-	-	-	-	-	_
Meningitis (not			181							
Tuberculous) Convulsions	1				1					1
Laryngitis	1		7						1	,
Bronchiti.		-								
Pneumonia (all forms)	_	_	_	_	_	2	3	3	1	9
Diarrhoea	_	_	_	_	_	_	1	_	_	1
Enteritis	_	_	_	-	_	-	-	1	_	1
Gastritis	-	-	-	-	-	-	1	-	-	1
Syphilis	-	-	-	-	-	-	-	-	-	-
Rickets	-	-	-	-	-	-	-	-	-	-
Suffocation, overlying	-	-	-	-	3	-	-	-	-	3
Injury at birth Atelectasis	3 4				4			7		4
Congenital Malforma-					*					7
tions	3	1	1	1	6	3	1	_	_	10
Premature Birth	13	_	_	_	13	2	_	_	_	15
Atrophy, Debility and										
Marasmus	-	1	-	-	1	1	-	-	-	2 7
Other Causes	1	1	-	1	3	1	1	2	-	7
TOTALS	25	3	1	2	31	10	7	6	1	55
Net Births) Legitimate in the year Illegitimate	129	94			Dea he y			gitim		52 3

INFANT LIFE PROTECTION.

Number of Registered Foster-mothers at	
January 1st, 1936	109
Number of Registered Foster-mothers at	
December 31st, 1936	95
Number of Foster-children with the above	
at January 1st, 1936	173
Number of Foster-children with the above	
at December 31st, 1936	166
Number of Foster-children who have died	
during the year	Nil

The children are kept under observation not only in their homes but also at the Welfare Centres and in school.

On the whole the results are satisfactory, minor offences only having been detected.

INFANT CARE TABLE I.

Births registered (incl	uding 49 t	ransfer	red to	
Bournemouth fro	0			
excluding 233 t				
Bournemouth)				1393
Births notified				1535
	notified 50	ctill b	irthe of	
There were also				

INFANT CARE TABLE II.

visits by the Health	VISICOIS	
Mothers and Infants	:	
First visits		 1194
Re-visits		 4793
Re-visits to child	ren over	
year of age		 8560
Expectant Mothers:		
First visits		 374
Re-visits		 126

Vicita by the Health Vicitors :

15047

INFANT CARE TABLE III. Work of the Eleven Centres, Year 1936.

No. of Clinic Attendances			Number of C		Attendances at Consultations			
Sessions held	Mothers	Babies	Other Children	Health Talks given.	Doctors	Mothers	Babies	Other Children
529	28722	16594	17338	231	444	2070	4204	3477

INFANT CARE TABLE IV. Comparison of Total Attendances.

YEAR.		T-1-		
I BAR.	Mothers.	Babies.	Other Children.	TOTAL
1917	3516	1757	2357	7630
1918	3942	1882	2855	8679
1919	4990	2352	3049	10391
1920	7680	4630	3841	16151
1921	9114	5607	4428	19149
1922	8818	4913	4807	18538
1923	9680	5020	6226	20926
1924	12210	5935	7924	26069
1925	12265	6061	7146	25472
1926	13717	6680	8335	28732
1927	14892	7650	8952	31494
1928	15962	8213	8955	33130
1929	17817	8897	10730	37444
1930	20525	10323	11727	42575
1931	22567	12326	12580	47473
1932	23926	13089	13251	50266
1933	22692	13295	12570	48557
1934	23888	14554	13691	52133
1935	28008	16193	14964	59165
1936	28722	16594	17338	62654

OPHTHALMIA NEONATORUM.

Cases.		Vision					
	Tre	eated	Unim- paired.	Vision Impaired	Total Blindness	Deaths	
Notified	At Home	In Hosp.	paired.	Impaired	midicis		
4	3	1	4	Nil	Nil	Nil	

TREATMENT AND PREVENTION OF VENEREAL DISEASES.

The following tables give statistics concerning the Municipal Clinic held at Boscombe Hospital, and the provision of bacteriological facilities for the diagnosis of Venereal Diseases in the County Borough of Bournemouth for the year ended 31st December, 1936.

Number of persons dealt with at, or in connection with, the Out-patient Clinic for the first time and found to be:—

10 bc .—			
	Males.	Females.	Total.
Suffering from Syphilis	33	21	54
Suffering from Gonorrhoea	66	29	95
Not suffering from Venereal			
Diseases	51	42	93
Soft Sore	-	- I	-
			240
			242
Number of patients dischargement Clinic after completion		from the	Out-
Treatment for Syphilis	8	11	19
Treatment for Gonorrhoea	36	18	54
			_
			73
			_
Number of patients who	ceased	to attend	1 the

Number of patients who ceased to attend the Out-patient Clinic without completing treatment, and who were suffering from:—

Syphilis	 	16	14	30
Gonorrhoea		23	12	35

65

Total attendances (excluding irrigations) a Out-patient Clinic for all persons who were :—	t the
Suffering from Syphilis 863 849	1712
Suffering from Gonorrhoea 869 475 Not found to be suffering from	
Venereal Diseases 123 159	282
Soft Sore — —	3/17
	3338
Aggregate number of "In-patient days" of ment given to persons:—	treat-
Suffering from Syphilis 85 118	203
Suffering from Gonorrhoea 145 125 Not found to be suffering from	270-
Venereal Diseases — 5	5
	478
Number of persons treated with Salvarsan substitute	75
in the Treatment Centre :— Approved 601	
Approved 601 Not Approved 359	
	960
EXAMINATION OF PATHOLOGICAL MATERIAL.	
Number of specimens which were examined	:
For persons attending at the Treatment Centres	:
For detection of Spirochetes For detection of Gonococci	$\frac{2}{1048}$
From persons attended by private medical	
titioners:—	prac-
For detection of Spirochetes For detection of Gonococci	prac- 1 9

Number of spe to an ind Reaction:	lependent	ich were laborat	e sent for ory for	examin Wasseri	ation nann
From persor from persor titioners	ns attend	ing Tre led by	atment (private	Centre prac-	544 700
Salvarsan app practitions Doses	ers:—		supplied		

Report of the Public Analyst

For the Year ended 31st December, 1936.

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY BOROUGH OF BOURNEMOUTH.

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in submitting for your consideration my Report on the samples of Food and Drugs sent to me for analysis during the year ending 31st December, 1936.

The total number of samples submitted under the Sale of Food and Drugs (Adulteration) Act, 1928, was 537, of which 384 were official samples and 153 were unofficial samples taken informally by your Inspectors.

The number of adulterated samples was 18, or 3.1 per cent.

The poor or doubtful samples number 29, or 5.4 per cent.

TABLE I.

Summary of Report for 1936. Three hundred and eighty-four official samples:—

Nature of S	Sample		Examined	Genuine	Poor or Doubtful	Coloured	Containing Preservative	Adulterated	Percentage of Samples Adulterated
Milk			178	152	15	_		11	6.18
Jam			18	18	_	_	_	_	_
Malt Vinegar			18	17			_	1	5.5
Sausages			15	15	_	_	-	_	_
Beer			13	13	_	_	_	_	_
Butter			12	12	-	-	-	-	-
Cream			12	12	-	-	/-	_	
Lard			12	12	-	-	-	-	-
Margarine			12	10	2	-	-	-	_
Coffee			8	8	-	-	-	-	-
Honey			8	8	-	-	-	-	-
Sponge Cakes			8	8 7	-	-	-	-	-
Currants			7	7	-	-	-	-	-
Bacon			6	6		-	-	-	-
Dripping			6	6	-	/	-	-	
Flour, self-rai	ising		6	6	_	-	-	-	_
Raisins			6	6	-	-	-	-	-
Sultanas			6	6	-	-	-	-	-
Brawn			6 5 5 5	6 5 5 5	-	-	-	-	-
Cocoa			5	5	-	-		-	-
Prunes, dried					-	-	-	-	-
Apricots, drie	d		4	4	-	-		-	-
Stout			4	4	-	-	_	-	-
Tea			4	4	-	-	-	-	-
Fruit Salad, o			3	3	_	-	-	-	-
Suet, shredde	ed		2	2	-	-		-	-
Ale			1	1	_	_			
		Total	384	355	17			12	3.1

TABLE II.

Summary of Report for 1936. One hundred and sixty-five unofficial samples:—

Nature of Sample		Examined	Genuine	Poor or Doubtful	Coloured	Containing Preservative	Adulterated	Percentage of Samples Adulterated
Milk		58	45	10	_	-	3	5.1
Meat, cooked		10	10	_	_		_	-
Sild, tinned		6	3	_	_	_	3	50.0
Mincemeat		6	6	_	-	_	_	-
Peas, tinned		5	5		-	_	-	-
Baking Powder		4	4	-		-	-	-
Cheese, wrapped		4	4	_	_	_	-	-
Cornflour		4	4		_	_	-	_
Custard Powder		4	4	_	-	_	_	_
Friar's Balsam		4	4	_	-	-	-	-
Ginger, ground		4	4	_	_	-	-	-
Lemon Curd		4	4	-	-	-	_	-
Pickles		4	4	_	_	_	_	_
Rice, ground		4	4	_	_	_	_	_
Suet, shredded		4	2	2	-	-	-	_
Tincture of Iodine		4	4	-	-	-	-	-
Proprietary Foods		3	3	_	_	-	-	-
Boracic Ointment		2	2	_	_		_	_
Camphorated Oil		2	2	_	_	-	_	_
Curry Powder		2	2 2 2	_	-	-	-	-
Malt Vinegar		2	2		-	_	_	-
Milk, condensed		2 2 2 2 2 2 2	2		-	-	_	-
Sweet Spirit of Nitre		2	2	-	-		_	_
Zinc Ointment		2	2	_	-		-	-
Almonds, ground		1	1	-	_	-	_	_
Cake, nut and honey		1	1	-	-	-	-	-
Milk, dried		1	1		-	-	-	-
Mineral Water		1	1	_	-	-	_	_
Mustard, compound		1	1	_	_	_	_	_
Orange, crush		1	1	_	_	-	_	_
Stuffing, egg and thym	ie	1	1	-	-	-	-	_
		153	135	12	=	=	6	3.9

TABLE III.

Adulterated official samples :-

Nature of	f Sample		Nature of Adulteration.
No. 433	Milk	 	2% Extraneous Water.
No. 456	,,	 	4% ,, ,,
No. 473	,,	 	1.6% ,, ,,
No. 481	,,	 	2% " " "
No. 482	,,	 	1.1% ,, ,,
No. 566	,,	 	6% Fat Deficient.
No. 584	,,	 	6% Fat Deficient. 5% Extranous Water.
No. 591	,,	 	1.8% ,, ,,
No. 592	,,	 	2% ,, ,,
No. 657	,,	 	4% ,, ,,
No. 695	- ,-	 	20% Fat Deficient.
No. 417	Vinegar	 	14% Deficient in Acetic Acid.

TABLE IV.

Adulterated unofficial samples:-

Nati	ure o	f Samtl	e		Nati	ere of A	dulteration	
No.	44	Milk		 	5%	Fat Def	icient.	
No.	61	,,		 			ous Water.	
No.	67	,,		 	10%	Fat Defi	cient.	
No.	1	Tinned	Sild	 	3.1	gms. tin	per lb.	
No.	2		,,	 	3.5	"	11	
No.	85		,,	 	2.3	.,	***	

MILK.

Excluding the 26 adulterated and poor samples the remaining official samples have yielded the following average proportions of fat and non-fatty solids:—

	No. of Samples	Fat	Non-fatty solids
1st quarter	44	3.64 per cent.	8.80 per cent.
2nd ,,	45	3.63 ,,	8.77 ,,
3rd ,,	29	3.86 ,,	8.79 ,,
4th ,,	34	3.99 ,,	8.90 ,,
Whole 12 mo		3.78 ,,	8.81 ,,

The average proportion of both fat and non-fatty solids were slightly below that given for 1934 and 1935.

REMARKS.

There has been a slight increase in the percentage of adulterated samples this year when compared with the figures given in my last annual report. This also applies to the percentage of poor, or doubtful samples.

The majority of these adulterated and poor samples were milks, and full details of the adulteration have already been given in the report.

The addition of preservatives to certain foods is permitted under the Public Health (Preservatives, etc., in Food) Regulations. One hundred and forty-three official and 39 unofficial samples, other than milk and cream, were examined under these regulations. In the cases where preservatives were detected they were present in quantities less than the permitted amount. In all other cases preservatives were absent.

Six unofficial samples of Tinned Sild were examined and in three cases tin was found to be present.

Two samples, ground almonds, and nut and honey cake, were submitted for special examination. In both cases the samples were found to be genuine and deleterious ingredients were found to be absent.

I am,

Mr. Mayor, Ladies and Gentlemen,
Your obedient Servant,
R. PENDRILL CHARLES,
M.D., F.I.C.

REPORT ON THE BACTERIOLOGICAL AND BIOLOGICAL EXAMINATION OF SAMPLES OF MILK SUBMITTED TO THE PUBLIC ANALYST

During the year ending 31st December, 1936.

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY BOROUGH OF BOURNEMOUTH.

MR. MAYOR, LADIES AND GENTLEMEN,

The following samples have been examined under the Milk (Special Designations) Orders, 1923 and 1936.

Certified milk		 	3
Tuberculin tested	milk	 	9
Grade A milk		 	10
Accredited milk		 	8
Pasteurised milk		 	11

The Milk (Special Designations) Order, 1936, which came into operation on the 1st June, 1936, provided a new grade of milk, "Tuberculin Tested" in the place of the grade "Certified" and "Grade A (T.T.)" and also a new grade Accredited milk in the place of "Grade A" milk.

All the certified and tuberculin tested milks were submitted on behalf of the Ministry of Health and were found to be satisfactory. The average number of organisms were as follows:—

	Pe	er millilitre
Certified milk	 	3,710
Tuberculin tested milk	 	13,265
This is very satisfactory.		

Of the Grade A milks, one contained 925,000 organisms per millilitre and failed to comply with the requirements of the Order.

Of the Accredited milks, three contained B. Coli and failed to comply with the Order.

The average number of organisms in the satisfactory milks of these grades were as follows:—

			Per millilitre		
Grade A milk				8,693	
Accredited				3,710	

All the 11 Pasteurised milks which were examined for bacterial content complied with the requirements, the average number of organisms being 18,341.

Ten samples of milk were examined for tubercle bacilli by means of animal inoculation. In every case T.B. were found to be absent.

Sixty-eight samples of Pasteurised milk were examined under the Milk and Dairies (Amendment) Act, 1932, and the Milk (Special Designations) Order, 1936, in order to ascertain whether the pasteurisation had been properly carried out.

Of the 68 samples, 20 were found to be either improperly pasteurised, or to contain a proportion of raw milk. The remainder were satisfactory.

I am, Mr. Mayor, Ladies and Gentlemen, Your obedient Servant,

R. PENDRILL CHARLES,

M.D., F.I.C.

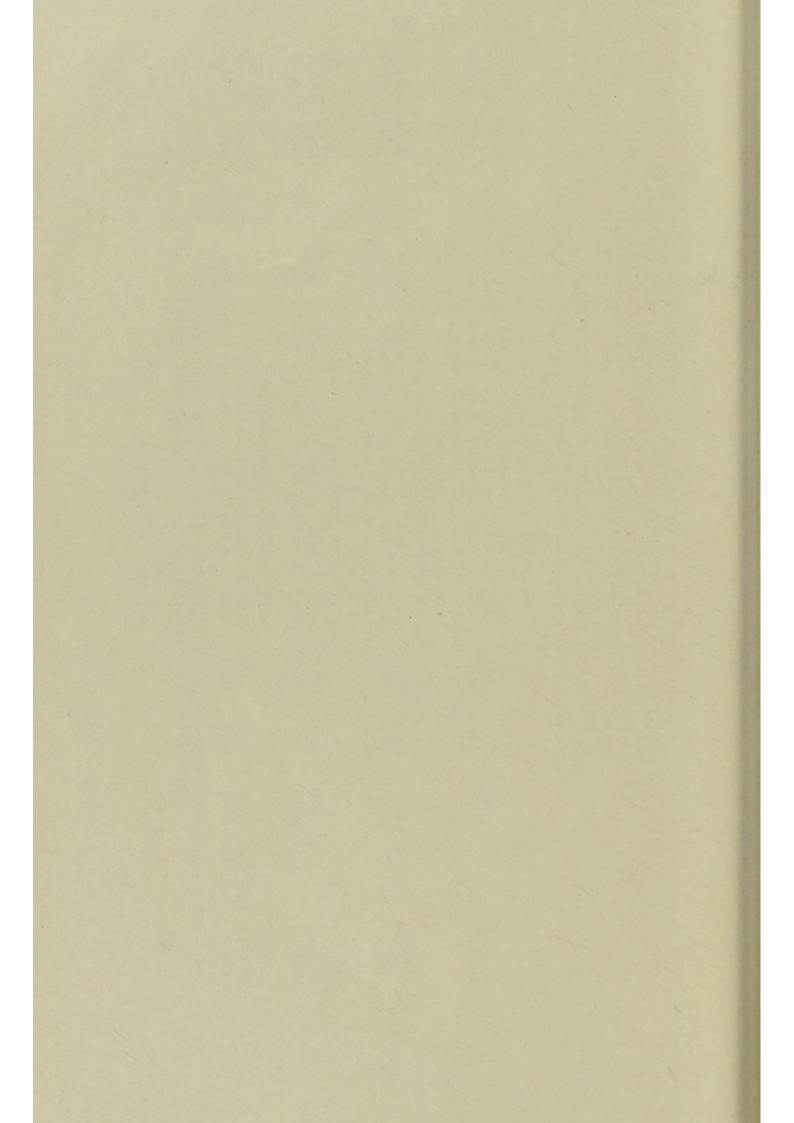
Meteorology.

RAINFALL, SUNSHINE, AND MEAN TEMPERATURES.

The first line gives the averages for 40 years, January, 1892, to December, 1931

	Dec. 4.08	3.04		66.2			43.0	42.6		39.9	41.9
	Nov. 3.45	3.30		90.1		.9 hours.	43.7	43.4		43.5	43.2
	0ct.	1.31		138.3			52.0	8.64	49.0	50.0	49.4
	Sept. 2.30	3.38		192.6	.9 hours.		58.0	59.7		57.2	6.66
	Aug. 2.70	0.19	at 50.55 s).	204.8	out 1,529		61.5	62.2		61.7	63.4
LL.	July 2.26	3.75	nd Tenth	229.8	3 works	ERATURE	61.7	60.3	RATURE.	62.7	62.2
RAINFAL	June 1.27	2	Hours at	237.0	ırs; 1936	OUTH MEAN TEMPERATURE	58.0	54.5	GREENWICH MEAN TEMPERATURE	59.4	62.0
NEMOUTH	May 1.70	0.70	NSHINE (236.5	310.4 hou	ourn ME	52.1	55.0	ICH MEA	56.1	24.8
BOUR	April 2.00	1.97	MOUTH SUNSHINE (Hours and Tenths).	160.5 236.5 237.0 229.8 204.8 192.6 155.7 237.0 204.4 170.9 224.2 108.8	k out 1,8	k out 1,8	47.8	44.8	GREENW	47.3	44.9
	Mar. 2.85	2.80	BOURNEM	126.0	6.3	I	45.0	45.2		41.9	46.0
	Feb. 2.57	2.95	Tue 4	85.3		The 40	41.4	39.3		39.5	37.2
	Jan. 3.06	5.48		63.8			41.2	45.6		38.6	40.6
	:	:		:			:	: :		:	:
	:	:					:	:		:	:
	40 vears	1936		40 years			40 years	1936		50 years	1936

It will be observed in the 40 years' averages, December is generally the wettest month. This year it was January, with 5.48 ins. In August this year only 0.19 was recorded, and in May 0.70 in.





County Borough of Bournemouth.

EDUCATION COMMITTEE

ANNUAL REPORT

OF THE

School Medical Officer

Year 1936.



To the Chairman and Members of the Education Committee.

I have the honour to report on the work of the School Medical Service in 1936.

There has been little change in the methods of conducting School Medical Inspection but there has been some modification of the routine. It may be remarked that fewer children have been dealt with than in the preceding year. This is attributable to two factors. In 1935 with an addition to the staff of a Medical Officer, it was possible to effect some tidying up and to carry out extra examinations. In 1936 there was in certain directions a slowing down of activities owing to the outbreak of Typhoid Fever in the latter weeks of August. This caused every member of the Medical and Nursing Staff to concentrate on the problem of Infection and methods of Prevention. In this connection, there are several points which should receive attention and cause satisfaction. It is possible to affirm that no child was infected in school and that a comparatively small number of the scholars suffered from the disease.

Moreover, there was little interference with the Educational programme as the schools re-opened at the beginning of the Autumn term on the date already fixed.

The general results of the year's work indicate progress and there is no matter of major importance to which attention should be directed. The opening of new schools is very helpful for it is difficult to raise the ideals of children who are placed in a depressing and unhygienic environment. The provision of special schools and new clinics is under consideration as the existing arrangements are inadequate and in some respects unsatisfactory.

More detailed information is given under the various headings.

I have the honour to be, Your obedient Servant,

H. GORDON SMITH.

March 1937.

SCHOOL MEDICAL SERVICE STAFF on 31st December, 1936.

School Medical Officer:

H. GORDON SMITH, M.D. (State Medicine), B.S., M.R.C.S., L.R.C.P., D.P.H.

Deputy School Medical Officer:

CHARLES F. PEDLEY, B.A., M.R.C.S., L.R.C.P., D.P.H.

Assistant School Medical Officers:

GRACE H. WOOD, M.B., Ch.B., B.Sc., D.P.H.

KENNETH J. GRANT, M.A., M.B., Ch.B., D.P.H.

Ear, Nose and Throat Surgeon:

A. R. N. MACGILLYCUDDY, M.R.C.S., L.R.C.P.

Anaesthetist to the above:

E. W. D. HARDY, M.R.C.S., L.R.C.P.

Dental Surgeon:

E. SAMSON, L.D.S., R.C.S., F.C.S.

Radiologist:

D. D. MALPAS, M.R.C.S., L.R.C.P.

School Nurses:

M. I. J. ABRAHAM	S. Dakin
A. M. BLAKEMORE	S. Gibbs
P. M. CAREY	M. HARWIN
M. G. CORNISH	F. D. McDonald
A. M. CRISP	F. E. A. RICHARDSON

With the exception of Miss Blakemore all of the above are part-time officers of the School Medical Service.

Clerks:

W. J. Manning, J. W. Peake, P. D. E. Dominey

COUNTY BOROUGH OF BOURNEMOUTH.

Area of Bournemouth (in acres)	 11,627
Population (estimate)	 129,200
Number of Elementary Schools	 24
Number of Departments	 42
Average attendance at Elementary Schools	 8,904
Average number on the School Registers	 9.987

HYGIENE OF THE SCHOOLS.

Some of the old schools are badly planned, often dark and depressing, with the minimum requirements. These are being slowly superseded. So far as practicable they are kept in good condition.

Consideration has been given by the appropriate Committee to two matters of some importance:

(a) The cleansing of floors in the schools.

It has been customary to wash these by hand. When carried out at long intervals as is usually the case, the procedure is laborious and of doubtful value. It has been decided once more to test certain of the chemical powders which can be used when sweeping the floors.

The method takes less time than washing and can therefore be employed more frequently. In general the results seem to be more satisfactory.

(b) Facilities for washing in the schools.

These are rarely, if ever, adequate. It is too much to expect of a normal child who is going to play games in school hours that he will keep clean. It is also absurd to hope that the few towels generally provided will be kept in a sanitary state if the children use them on all the occasions that they should. Indeed, with no hot water, and soap locked up, it is probable that the school towel becomes a serious menace.

The prevalence of Impetigo, Scabies and other skin diseases has directed attention to these matters. In consequence, as an experiment, paper towels are to be provided in some of the schools.

It is to be hoped that there will not be a reversion to the primitive roller-towel.

The following repairs and decorations have been carried out:—

Alma Road Council School.

Electric light installed in boys' and girls' departments.

Winton and Moordown Council School.

Electric light installed in boys' and girls' departments.

East Howe Council School.

Electric light installed. Playground made up, drained and tar-paved.

Malmesbury Park Council School.

Repainting of external wood and iron work, including fences.

Pokesdown Council School.

New floors to two classrooms.

Stourfield Council School.

Redecoration of two teachers' rooms in infants' department.

St. Clement's School.

Internal redecoration of two classrooms in mixed department.

St. Michael's School.

Repairs to slow combustion stoves.

Pokesdown C. of E. School.

New roof to mixed department.

Boscombe Holy Cross School.

Cycle shed in playground.

Talbot Village C. of E. School.

Repainting of external wood and iron work.

MEDICAL INSPECTION.

Routine inspection has been undertaken in respect of the usual three groups, viz :—

Entrants Intermediates (8 years old) Leavers (12 years old).

The examination takes place at the school, the parents receiving invitations to be present.

The attendance of parents is shewn herewith:-

		No.	
	No.		Percentage
Group	examined	present	of parents
Entrants	 931	524	56
Intermediates	 1314	708	54
Leavers	 981	175	18

In addition to the routine inspections special examinations are arranged, sometimes at the time of a routine visit, more usually at a Minor Ailment Clinic; occasionally at the Town Hall. The examination may be made at the request of a parent, teacher, School Attendance Committee, etc., and is frequently of great value.

The Minor Ailment Clinics, five in number, are freely used and serve as a clearing house.

FINDINGS OF MEDICAL INSPECTION.

It will be noted that 3,226 children were submitted to routine examination and that many of these had one or more defects, producing a total of 1,302. Of the latter number 200 were in need of treatment and the remaining 1,102 required to be kept under observation.

Some comment is needed in respect of certain defects found at routine and special inspections.

Diseases of the Skin.

In comparison with 1935 there has been some reduction in the number of these. Impetigo is the prevalent condition but Scabies is also in evidence. Both diseases account for a considerable amount of non-attendance as exclusion from school is frequently indicated. Elsewhere reference is made to the association of contagious diseases such as Impetigo with faulty hygiene.

Nose and Throat Defects.

The number is large, but a reduction is anticipated, as it has been possible during the year to overcome the long list of children awaiting operation.

Malnutrition.

When assessing the nutrition of a child it is necessary to place it in one of four groups, viz., excellent, normal, slightly sub-normal and bad. Obviously in making this classification, much depends on the opinion of the Medical Officer who carries out the examination. It is particularly in respect of the first two groups that inconsistent results are noticeable because it is difficult, if not impossible, to decide what is "normal nutrition."

For these reasons Medical Officers of areas less favourably situated than Bournemouth sometimes record more gratifying figures. Nevertheless the results in Bournemouth can be regarded as good.

It will be seen that among all the children of the routine groups 0.65 per cent. were badly nourished and 10.66 per cent. slightly sub-normal. It cannot be said, therefore, that malnutrition is present to any extent in the elementary school population and when found is not necessarily associated with lack of food. The possibility of a faulty diet is however deserving of consideration and it is of some interest that Rickets appears to be on the increase.

A TABLE SHOWING THE NUMBER AND NATURE OF THE DEFECTS FOUND DURING EXAMINATION OF THE THREE ROUTINE GROUPS (Excluding Uncleanliness and Dental Defects).

(Entrants Intermediates Leavers					ers
	Noo	ding	Need	ling	Need	ling
	Treat-	Observa-		Observa-	Treat-	Observa-
Defects.	ment.	tion.	ment.	tion.	ment.	tion.
Skin.						
Ringworm—Scalp		_	_	_	_	_
" Body	_	_	_	1	_	1
Scabies	-	-	-	-	-	1
Impetigo	-	-	_	1	-	1
Oth r diseases Non- Tubercular		6	The same of	9		10
Tubercular		0		9		10
Eye.						
Blepharitis		1	-	2	-	6
Conjunctivitis	100 000 000		-		-	The state of the s
Keratitis Corneal Opacities	_	_				
Defective Vision	8	17	33	124	60	73
Squint	_	3	4	9	_	_
Other Conditions	1	1	_	2	-	-
Ear.						
Defective Hearing			-	3	_	1
Otitis Media	2	1	_	4	_	2
Other Ear Diseases	_	1	-	1	-	1
N 1 ml 4			100			
Nose and Throat. Enlarged Tonsils					Winds and	
only	11	32	31	134	1	4
Adenoids only		4		12	2	1
Enlarged Tonsils	26					
and Adenoids Other Conditions	5	32	11	14	19	6
Enlarged Cervical	-	2		1		
Glands Non-					1865	
Tubercular		28	1	37	-	1 7
Defective Speech	-	11	-	9	-	7
Heart and			1		-	THE REAL PROPERTY.
Circulation.		No.	8. 14. 5. 5.	A STATE OF THE PARTY OF THE PAR		5819
Heart Disease—						
Organic	-	5	-	6	-	11
Heart Disease— Functional		10		0		20
Anaemia		10 14	1	9 7		10
		1				
Lungs.						
Bronchitis	. 2	31	1	14	-	4
Other Non- Tubercular	1		Total Control	23 11 5-1		
Disease		5	1	2	_	2
	1	1			11	

	Entrants		Intern	Intermediates		Leavers	
	Nee	eding	Nee	Needing		Needing	
1	Treat-	Observa-	Treat-	Observa-	Treat-	Observa-	
Defects.	ment.	tion.	ment.	tion.	ment.	tion.	
Samuel Total Inch							
Tuberculosis.							
Pulmonary—							
Definite Pulmonary—		_		-	-	_	
Suspected		_			B 200	1	
Non-Pulmonary—							
Glands	_	_	_	_	_	_	
Spine	_	_	_	_	_	_	
Hips	_	_	_	_	-	-	
Other Bones and	2000						
Joints	_	_	_	- //	_	_	
Skin Other Forms			_	7			
Other Forms						1000	
Nervous System.							
Epilepsy	-	-	-	_	_	1	
Chorea	-	1			_	_	
Other Conditions	-	6	-	4	-	2	
Deformittee			1 11 11 11 11				
Deformities. Rickets		10		48		17	
Spinal Curvature		6		15		7	
Other Forms	_	20	_	51	_	67	
Other Defects and							
Diseases	1	18	5	40	-	21	
Number of Defects	30	265	88	559	82	278	
Number of Children	Examined	931	15	314		981	

INFECTIOUS DISEASES.

The incidence of infectious diseases among elementary school children has not been excessive. There have been relatively few cases of Diphtheria or Scarlet Fever, but certain non-notifiable diseases, more particularly Measles and Whooping Cough, have been prevalent. The outbreak of Typhoid Fever which began in the third week of August affected seriously many of the private schools but did not influence to a marked extent those under the control of the Education Committee. The medium responsible was raw milk which apparently commenced to be infective in the last week of July. In Bournemouth it has been the invariable rule since the scheme for the provision of milk in schools has been in existence that all milk supplied shall have been pasteurised, so that even if the outbreak had originated during the school term the incidence of the disease among elementary school children would not have been greater.

It is therefore very gratifying to be able to record that no child was infected in school. It was decided that the schools should re-open after the summer vacation on the date already fixed, viz., 31st August.

Some of the parents who had been alarmed unduly were at first unwilling to send their children back to school but soon decided to do so. In order to minimise the risks of infection and to ensure that no case of Typhoid should escape detection, special precautions were adopted. Extra attention was given by the Sanitary Staff to the cleansing and disinfection of the conveniences in the schools and following up of absentees and suspects was actively carried out by the Nurses. The exclusion of contacts who had been in intimate contact with the patient was also enforced though this measure seemed to be of doubtful value. No attempt was made to introduce inoculation of the scholars but vaccine could be obtained in the Health Department free of charge by any medical practitioner who wished to use it. Great help was given throughout the outbreak by Teachers and Attendance Officers, who co-operated freely.

NOTIFICATIONS OF, AND DEATHS DUE TO, CERTAIN INFECTIOUS DISEASES.

Disease	Total cases notified	Total deaths	Cases who were elemen- tary school children	Deaths of elementary school children
Scarlet Fever Diphtheria Erysipelas	38		27 16	
Encephalitis Lethargica	2	î	_	_
Poliomyelitis Cerebro-spinal	1	-	-	-
Meningitis	2	-	-	_
Typhoid	289	31	36	2

IMMUNISATION AGAINST DIPHTHERIA.

Dr. Pedley continues to carry out this work. Facilities are provided for elementary school children, those under school age and for inmates, including the staff, of the Victoria Home for Crippled Children.

The following information relates to school children only.

IMMUNISATION OF SCHOOL CHILDREN AGAINST DIPHTHERIA.

Primary Se	y Schick Test. Im		ary Schick Test. Immur		Immunised.		ick Test.
Number Negative.	Number Positive.	Completely.	Partially.	Number Negative	Number Positive.		
10	-	535	216	190			

BOARD OF EDUCATION GRANT REGULATIONS.

School Certificates given for epidemic illness:—

Alma Road Infants—			
Week ending 7th February			Measles
,, ,, 14th ,,			,,
,, ,, 21st ,,			,,
Boscombe Council Infants—			
Week ending 14th February			Measles
Boscombe St. John's Girls' and Infa-	nts'—		
Week ending 14th February			Measles
East Howe Council Infants'—			
Week ending 31st January			Measles
,, ,, 7th February ,, ,, 14th ,,			,,
14th			"
Malmesbury Park Council Infants'-			
Week ending 31st January			Measles
,, ,, 14th February			,,
Pokesdown Church of England Infan			. "
Week ending 28th February			Measles
,, ,, 6th March			,,
,, ,, 13th ,,			"
St. Clement's Infants—			"
Week ending 7th February			Measles
14th			
,, ,, 14th ,, 21st			"
,, ,, 21st ,, 6th March			,,
,, ,, 6th March			,,
;; ;; 21st ;; 6th March ;; 13th ;; 20th ;; ;; 27th ;; 8th April			,,
,, ,, 20th ,, 27th			,,
,, ,, 27th ,, ,, 8th April			,,
St. Andrew's Infants'—		***	,,
			Measles
Week ending 14th February			
,, ,, 21st ,, Southbourne St. Katharine's—			,,
			Mossles
Week ending 24th April			Measles
,, ,, lst May			"

PARENTS' PAYMENTS.

No charge is made to parents of children who attend the Minor Ailments Clinics, nor for a "refraction" undertaken for defective vision.

In respect of other forms of treatment a charge is made whenever the family circumstances permit.

Contributions received during the year were as follows:-

- (a) For Tonsils and Adenoids Operations ... 42 18 6
- (b) For Dental Treatment ... 70 1 0
- (c) In respect of defective children maintained at various residential institutions ... 108 6 2

Tonsils and Adenoids operations are carried out at the Boscombe Hospital, the fee paid by the Local Authority being usually £3 10s. 0d. per child.

ARRANGEMENTS FOR TREATMENT.

Most of the defects found are attended to at Clinics provided by or on behalf of the Education Authority. Some of the premises used are unsatisfactory either on account of position or inadequate accommodation. This criticism applies to the Minor Ailments Clinics for which entirely new premises are needed, though it must be admitted that a large amount of work is carried out with gratifying results. The Special Clinics are more favourably situated. At "Avebury" "refractions" are undertaken by Dr. Wood, who averaging one session per week is able to cope with the numbers presented for examination. A pleasing achievement has been a reduction in the number of children waiting for Tonsils and Adenoids operations. These have been dealt with until recently by means of a weekly session at Boscombe Hospital. The number of beds available proved to be inadequate so that a long waiting-list had resulted. The hospital authorities arranged for extra sessions and the waiting list is now of brief duration.

The Dental scheme has received very careful consideration as it is realised that the services of the Dentist have not been utilised as they should be. In Bournemouth the Education in Dental Hygiene of children and parents proceeds very slowly, at least so far as the Elementary Schools are concerned. The appointment of a whole-time School Dentist will possibly lead to an increase in the number of children treated as it is expected that the officer recently appointed will be able to devote more time to the educational aspect.

There are no other clinics provided by the Education Committee, but when special treatment is needed, it is usually possible to arrange for this to be given at Boscombe Hospital.

FOLLOWING UP.

There are nine Health Visitors who perform duties in connection with Maternity and Child Welfare, Infant Life Protection, Tuberculosis and the School Medical Service. There

is also another nurse who is chiefly occupied at the Central Clinic where she assists the Dentist. Together they are equivalent to $3\frac{3}{4}$ School Nurses.

Each of the Health Visitors has a district wherein she does all the visiting required in connection with the services referred to above. As a school nurse she assists at routine Medical and Dental Inspections, carries out cleanliness surveys in the schools and pays visits to the homes in order to follow up the defects that have been discovered. In addition she may give at a Minor Ailments Clinic the treatment ordered by one of the Medical Officers.

The following up of defects by a nurse is an arduous task and the staff on account of the large area of the County Borough is fully occupied. Much work may result from a cleanliness inspection in school as this usually necessitates visits to the homes of children found unclean. Chronic offenders are often requested to attend a Minor Ailments Clinic where they are examined by a Medical Officer. Legal proceedings have not been instituted in respect of any child, as exclusion from school generally brings about the cleaning up required. Nevertheless there are certain families which are a constant source of annoyance.

The nature and number of the visits recorded by the nurses is as follows:—

Nature of Visit			Number
Uncleanliness .			 230
Ear, Nose and Throat	t		 821
Eye Cases			 321
Dental Cases			 479
Control of Infection .			 569
Miscellaneous .			 664
		Total	 3084

THE PROVISION OF MEALS.

As in recent years extra nourishment has been provided when recommended by a Medical Officer.

Usually milk or halibut oil and malt is given; less frequently dinners are arranged.

Children who are helped in this way are re-examined from time to time and their general progress recorded. The nature and amount of food supplied was as follows:—

Halibut Oil and Malt.

Clinic		Children	1bs.
Winton		 16	211
Malmesbury Park		 30	37
Pokesdown		 68	106
Kinson		 62	$84\frac{1}{2}$
Charminster		 92	171
	Total	 268	420
Milk.			
Number of children		 	217
Number of bottles ($\frac{1}{3}$ -p	int)	 	33,465
Dinners.			
Number of children		 	20
Number of meals		 	2,025

Until recently the schools have been supplied with considerable quantities of milk which the children have purchased, but since the outbreak of Typhoid Fever there has been a marked reduction of the amount consumed as will be seen in the accompanying table.

TABLE SHOWING THE AMOUNT OF MILK CONSUMED IN THE SCHOOLS.

Name of School		Chil	. of dren Reg. 1st Oct., 1936		of Milk d daily 1st
Alma Road Council	В.	 316	305	184	87
	G.	 305	296	107	54
,, ,,	I.	 238	235	105	90
Boscombe Council	В.	 149	146	62	25
,, ,, ,,, ,,,	G.	 149	159	73	28
" "	I.	 136	111	85	56
Boscombe Holy Cross R.C	M.	 165	157	53	36
Boscombe St. John's C. of E.	G. & I.	 189	180	137	60
,, ,, ,,	В.	 110	117	37	31
Charminster Council	S.M.	 412	429	151	90
,, ,, ,, ,,,	J.M.	 338	317	202	135
East Howe Council	S.M.	 530	432	231	107
	J.M.	 171	437	82	157
Hill View Road Council	J.M.	 518	453	283	170
Kinson Council	J.M.	 234	251	90	120
Holdenhurst Council	M.	 80	85	60	50
Malmesbury Park Council	M.	 416	382	136	57
	I.	 177	179	110	78
Moordown C. of E	G. & I.	 331	334	136	92
Pokesdown Council	M.	 184	203	56	38
	I.	 125	109	104	51
Pokesdown C. of E	M.	 188	184	46	22
	I.	 129	100	84	43
St. Andrew's	G.	 100	92	70	38
Ot 01"	I.	 112	116	86	16
St. Clement's	M.	 253	247	96	70
Ct T 1 -/	I.	 98	78	86	52
St. Luke's	В.	 172	160	45	12
Ct Michael's C of T	I.	 117	81	70	43
St. Michael's C. of E	M.	 217	221	151	116 34
St. Paul's C. of E	M.	 233	211	61 158	95
St. Walburga's R.C	M.	 282	263	158	93
Southbourne St. Katharine's	M 9- T	94	72	42	27
C. of E J. Stourfield Council	S.M.	 238	310	40	25
	J.M.	 385	365	187	94
" "	I.	 363	351	183	138
Talbot Village C. of E	M.	 207	233	147	123
	I.	 133	115	125	90
*** (3	M.	 105	97	65	31
Winton & Moordown Council	В.	 423	467	162	110
	G.	 357	363	158	76
" "	I.	 407	398	220	163
" "		 			
Totals for Bo	orough	 9886	9871	4766	3030

CAUSES OF EXCLUSION FROM SCHOOL.

Bronchitis					8
Cardiac Debili	tv				1
Chicken Pox					14
Debility					12
Epilepsy					2
External Eye			***		4
Eczema				• • • • • • • • • • • • • • • • • • • •	î
Impetigo, Sore		•••			36
	es, etc.	***			1
Jaundice		***			1000
Mumps					13
Otorrhoea					3
Post T. & A.	Operation	on			16
Rheumatism					6
Ringworm					5
Scabies					27
Scarlet Fever					1
Sore Throat					32
Uncleanliness					66
Whooping Cou	1.000				14
	_				72
Miscellaneous					12
				-	
					334
				-	

JUVENILE EMPLOYMENT.

Certificates were granted as follows:-

0		
Newsboys	 	234
Newsgirls	 	20
Errand Boys	 	70
Delivery of Bread	 	20
Delivery of Meat	 	18
Van boys	 	7
Miscellaneous	 	2
		371
		911

Five other children failed to pass the examination and certificates were refused.

Thirteen children were also granted certificates to enable them to take part in an entertainment.

PHYSICAL TRAINING.

During 1936 there has not been an organiser of Physical Training but many of the teachers are enthusiastic and efficient instructors.

For organised games, provision is made in the parks and playing fields. Arrangements are made for the older children to learn swimming in the Corporation Baths. It is expected that they will subsequently attend voluntarily. Latterly the number of attendances has decreased, probably on account of the outbreak of Typhoid Fever.

The following remarks are extracted from a report of the Manager of the Stokewood Road Baths.

"830 scholars were on the time table for attendance during school hours this season, and made a total number of attendances of 8,951, which represents an average of 10 attendances per scholar. Last season, 8,142 attendances were made.

Of this number of scholars (830) 623 (316 boys and 307 girls) have learned to swim this year. 192 children are able to swim across the bath, and 431 are able to swim the length of the bath—a distance of 25 yards. The teachers have instructions from the Education Department to discontinue sending children when they are able to swim this distance.

These 431 children were tested and swam the length in the presence of members of the Baths Committee and myself on various dates during the season. The total number includes 206 boys and 225 girls. Last year there were 248 boys and 267 girls, making a total of 515 scholars who so qualified.

The scheme for the award of an advanced certificate was adopted by your Committee on my suggestion in November, 1934. The requirements for the award are as follows: Dive neatly; swim 75 yards by breast stroke; swim 25 yards by back stroke without the use of arms. I give below the number of scholars who have been successful in obtaining an award.

Boys ... 74 Girls ... 59

The advanced certificate is an excellent preliminary to the examinations of the Royal Life Saving Society."

OPEN-AIR EDUCATION.

There is no open-air school in Bournemouth maintained by the Education Authority so that delicate children have to be sent to residential institutions in other localities. The number thus dealt with is relatively small for there is in most instances a long waiting period prior to admission. Moreover, parents do not like the idea of sending a child to a distant institution which they are unable to visit owing to the expense incurred. A day-school in Bournemouth would be a great asset, for there are constantly being discovered children who are suitable for such an institution. At the same time there is no doubt that a small residential school in the proximity of Bournemouth could be steadily supplied and would in my opinion prove to be economical.

SCHOOL CAMPS.

As in previous years children were sent in July and August to holiday camps in Dorset. They are maintained by funds derived from voluntary sources under the auspices of the Mayor.

The girls went in two groups—20 at a time—to Corfe Castle, where they were accommodated in cottages in the village. The boys, forty in number, went in one group to a camp near Swanage.

The children who are selected on account of indifferent health or poor home conditions usually improve to a marked extent during the fortnight that they are away. Each child was weighed and measured before and after the holiday, increases being shown as follows:—

GAINS IN WEIGHT AND HEIGHT (GIRLS).

First	Party—
-------	--------

			1
and 4 lbs.			1
and 3 lbs.			3
and 2 lbs.			4
nder			11
			_
			20
			_
			1
			2
			2
			2
	11171000 112		ī
			î
			3
			3
			12
	and 4 lbs. and 3 lbs. and 2 lbs. nder	and 4 lbs and 3 lbs and 2 lbs nder	and 4 lbs and 3 lbs

	A 19			
Second Party—				
Weight:				
Over 4 lbs.				3
Between 3 and 4	1hs			3
Between 2 and 3				2
0.11				2
Between 1 and 2				3 2 2 5 2
1 lb. and under				2
I III. tille tille				_
				17
				_
Height:				
l inch				1
7 inch				
1 inch				5
3 inch			•••	3
3 inch 1 inch		•••		3
1 inch		•••		1 5 3 3 2
g inch			****	_
				15
				-
GAINS IN WEIGHT, HEI	GHT AND	CHEST	MEAS	UREMENT
		CHEST	MEAS	UREMENT
	GHT AND (BOYS).	CHEST	MEAS	UREMENT
		CHEST	MEAS	
Weight:	(Boys).	CHEST		3 3
Weight: Over 5 lbs.	(Boys).		MEAS	UREMENT 3 3 3
Weight: Over 5 lbs. Between 4 and 5	(Boys).			3 3
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4	(Boys). lbs. lbs			3 3 3
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs	(Boys). 1bs 1bs			3 3 3 1
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs. Between 2 and 3	(Boys). 1bs 1bs			3 3 3 1 13 1 8
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs	(Boys). 1bs 1bs			3 3 1 13 1
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs. Between 2 and 3 2 lbs. Between 1 and 2	(Boys). lbs lbs lbs.			3 3 3 1 13 1 8
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs. Between 2 and 3 2 lbs. Between 1 and 2	(Boys). lbs lbs lbs.			3 3 3 1 13 1 8
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs. Between 2 and 3 2 lbs. Between 1 and 2	(Boys). lbs lbs lbs.			3 3 1 13 1 8 8
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs Between 1 and 2 1 lb. and under	(Boys). lbs lbs lbs.			3 3 1 13 1 8 8
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs Between 1 and 2 1 lb. and under Height:	(Boys). lbs lbs lbs.			3 3 1 13 1 8 8
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs Between 1 and 2 1 lb. and under Height:	(Boys). lbs lbs lbs.			3 3 3 1 13 1 8 8 - 40
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs Between 1 and 2 1 lb. and under Height:	(Boys). lbs lbs lbs.			3 3 3 1 13 1 8 8 - 40
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs Between 1 and 2 1 lb. and under Height:	(Boys). lbs lbs lbs.			3 3 1 13 1 8 8 - 40 - 1 2 3 8
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs Between 1 and 2 1 lb. and under Height:	(Boys). lbs lbs lbs.			3 3 1 13 1 8 8 - 40 - 1 2 3 8 6
Weight: Over 5 lbs. Between 4 and 5 Between 3 and 4 3 lbs Between 2 and 3 2 lbs Between 1 and 2 1 lb. and under Height: inch inch inch inch inch inch inch inc	(Boys). lbs lbs lbs.			3 3 1 13 1 8 8 - 40 - 1 2 3 8

31

			inch	Chest
13		 	inch	1
18				

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

As will be seen in Table III of the Tables required by the Board of Education, there are only a few Blind or Deaf children who are maintained in the following Institutions:—

Swiss Cottage School for the Blind;
East London House and School for Blind Children;
West of England Institution for the Blind, Exeter;
West of England Institution for the Deaf and Dumb,
Exeter.

The number of deformities ascertained tends to increase and it is questionable whether sufficient attention is being given to the correction of these. Major defects are treated in residential institutions, e.g., Treloar's Home for Crippled Children, but very little is done for children suffering from flat-foot and minor degrees of spinal curvature. A centre where remedial exercises could be arranged under expert supervision will probably prove to be a necessity in the near future.

The class for "retarded" children at the Charminster Council School has proved to be very useful. Further accommodation is needed, but the number of such children does not justify the provision of another class.

There are certain defectives, e.g., those suffering from multiple defects who are very difficult to accommodate as it is frequently impossible to obtain vacancies in residential institutions. This applies particularly to children who are mentally defective and epileptic.

MEDICAL INSPECTION RETURNS Year ended 31st December, 1936.

TABLE I.

A-ROUTINE MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups :-

Entrants				 931
Second Age Grou	p			 1314
Third Age Group				 981
		Total		 3226
Number of other Routine	Inspections			 Nil
number of other Routine	rispections.			
		Gr	and Total	 3226
	B-OTHER	INSPECTIO	NS.	
Number of Special Inspec	ctions			 2345
Number of Re-inspections				 878
				_
		Tota	1	 3223

C-CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Medical Inspection to require treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Group	For Defective Vision (excluding Squint)	For all other conditions recorded in Table IIA	Total
Entrants Second Age Group Third Age Group	8 33 60	22 53 22	30 83 73
Total (Prescribed Groups) Other Routine Inspections	101	97	186
Grand Total	101	97	186

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1936.

		Rout	tine ctions.	Spec	
	No. of	Defects	No. of Defects		
DEFECT OR DISEASE.		Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Skin Ringwo Scalp Body Scabies Impetig				1 7 26 71	2 1 —
	reulous)	-	25	175	1
Other c	ctivitis	= =	9 =	25 16 1 2	<u>2</u> <u>-</u>
Vision Defecti	and Squint) ve Vision ding Squint)	1 101 4	3 214 12	42 91 19	2 13 3
Ear Defecti	ve Hearing Media Car Diseases	<u>-</u>	4 7 3	14 36 45	6 4
Nose and Throat Chronic and	ds only Tonsillitis Adenoids	43 2 35	170 17 52 3	71 10 227 72	53 2 52 5
Enlarged Cervical Tuberculous)	Glands (Non	1	66	37	5
Defective Speech		-	27	2	2

TABLE II .- continued.

	Heart Disease :	15-11			
Heart and	Organic		22	17	4
Circulation	Functional	1	39	4	1
	Anaemia	-	31	40	-
	Bronchitis	3	49	67	1
Lungs	Other Non-Tubercu-	100			
	lous Diseases	1	9	14	1
	Pulmonary				
	Definite	_	_		_
	Suspected	_	1	_	_
Tubercu-	Non-Pulmonary:				
losis	Glands	_	_	_	_
100000	Bones and Joints	_	- //	_	_
	Skin	_	_	_	_
	Other forms	_	_	_	-
Nervous	(Epilepsy	_	1	3	_
System	Chorea	_	1	3 5	_
-,	Other conditions	_	12	27	7
	(0.000 00000000000000000000000000000000				
Defor-	(Rickets	200	75	3	_
mities	Spinal Curvature	_	28	1	
milities	Other forms	_	138	41	3
	(Other rolling		100	100	
Other Defect	ts and Diseases (excluding				
	of Nutrition Unclean-			0.0	1
liness and	Dental Diseases)	6	79	813	29
Total	Number of Defects	200	1102	2025	199
Total	rumber of Defects	200	1102	2020	133
			The second secon		

B.—Classification of the Nutrition of Children Inspected during the Year in the Routine Age Groups.

Age-groups	No. of Children Inspected	(Exce	ellent)	(Nor	mal)	(Slig su norr	b-	(Ba	
	Inspected	No.	%	No.	%	No.	%	No.	%
Entrants Second Age-group Third Age-group Other Routine	931 1314 981	83 215 62	8.91 16.36 6.32	700000000000000000000000000000000000000	80.02 68.64 87.06	183	10.53 13.93 6.42	14	0.54 1.07 0.20
Inspections	Nil	-	-	-	-	-	-	_	-
Total	3226	360	11.16	2501	77.53	344	10.66	21	0.65

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

(No child is entered under more than one heading in this Table.)

BLIND CHILDREN.

A blind child is defined by Section 69 of the Education Act, 1921, as one who is "too blind to be able to read the ordinary school books used by children." This definition covers some children who are totally, or almost totally, blind and can only be appropriately taught in a school for blind children, and others who have partial sight and can be appropriately taught in a school for partially sighted children. Only the first class is included in this section.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution,	Total
1	_	_	-	1

PARTIALLY SIGHTED CHILDREN.

Entered in this section are only children, who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially sighted.

Children who are able by means of suitable glasses to read the ordinary school books used by children, without fatigue or injury to their vision are not included in this table.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	-	_	_	1	3

TABLE III .- continued.

DEAF CHILDREN.

A deaf child is defined by Section 69 of the Education Act, 1921, as one who is "too deaf to be taught in a class of hearing children in an elementary school." This definition covers some children who are totally, or almost totally, deaf and can only be appropriately taught in a school for deaf children, and others who have partial hearing and can be appropriately taught in a school for partially deaf children. Only the first class is included in this section.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	-	_	1	3

PARTIALLY DEAF CHILDREN.

Entered in this section are children who can appropriately be taught only in a school for the partially deaf.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution,	Total
-	_	_	-	_	Nil.

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

Mentally Defective children are children who, not being imbecile and not being merely dull or backward, are incapable by reason of mental defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for mentally defective children.

The following Table includes all such children except those who have been notified to the Local Authority under the Mental Deficiency Act in accordance with Article 3 of the Mental Deficiency (Notification of Children) Regulations, 1928.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	23	-	5	30

TABLE III.—continued.

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

In this part of the table only those children are included who are epileptic within the meaning of the Act, i.e., children who, not being idiots or imbeciles, are unfit by reason of severe epilepsy to attend the ordinary Public Elementary Schools.

For practical purposes the Board are of opinion that children who are subject to attacks of major epilepsy in school should be recorded as "severe" cases and excluded from ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
1	-	_	1	2

PHYSICALLY DEFECTIVE CHILDREN.

A .- TUBERCULOUS CHILDREN.

Only children diagnosed as tuberculous and requiring treatment for tuberculosis at a sanatorium, a dispensary, or elsewhere are recorded in this category. Children suffering from crippling due to tuberculosis which is regarded as being no longer in need of treatment are recorded as crippled children, provided that the degree of crippling conforms to the description of a crippled child given at the head of Section C below. All other tuberculous children who are regarded as being no longer in need of treatment are recorded as delicate children.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS. (Including pleura and intra-thoracic glands).

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total
2	5	_	1	8

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS. (This category includes tuberculosis of all sites other than those shown in (I.) above).

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	7	ſ	1	10

TABLE III .- continued.

B .- DELICATE CHILDREN.

This section is confined to children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School. Such children are included irrespective of the actual provision of Open Air Schools in the area, or of the practicability in present circumstances of sending the children to Residential Schools. Children are not regarded as suitable for admission to an Open Air School unless the Medical Officer is prepared to certify that they are incapable by reason of physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	10	_	_	12

C .- CRIPPLED CHILDREN.

This section is confined to children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, i.e., children who generally speaking are unable to take part, in any complete sense, in physical exercises or games or such activities of the School curriculum as gardening or forms of handwork usually engaged in by other children.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution,	Total
7	15	-	3	25

D .- CHILDREN WITH HEART DISEASE.

This Section is confined to children in whose case the Medical Officer is prepared to certify that they are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
-	-	-	2	2

TABLE III .- continued

CHILDREN SUFFERING FROM MULTIPLE DEFECTS. Children suffering from any combination of the following types of defect :-

Blindness (excluding partially sighted children). Deafness (excluding partially deaf children). Mental Defect (Feeble-minded).

Severe Epilepsy. Active Tuberculosis.

Crippling (as defined in Section C above).

Heart Disease.

Combination of Defect	At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
Blind and Feeble-minded Epileptic and Feeble-minded	1 —	_	_		1 2

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DEC., 1936

TREATMENT TABLES. Group I.-Minor Ailments (excluding Uncleanliness, for which see Table VI.)

			Number of under treats		
DISEASE OR DEFECT.			Under the Authority's Scheme.	Otherwise.	Total.
SKIN:— Ringworm—Scalp— (i.) X-Ray Treatment (ii.) Other Ringworm—Body Scabies Impetigo Other Skin Diseases			1 2 10 35 185 403	111111	1 2 10 35 185 403
MINOR EYE DEFECTS:— (External and other, becases falling in Group		iding	130	_	130
MINOR EAR DEFECTS			73	-	73
MISCELLANEOUS (e.g., Minor injuries, bruises chilblains, etc.)	s, sores,		1623	_	1623
	Total		2462	_	2462

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments, Group I.)

	No of	No of Defects dealt with			No. of children for whom spectacles were			
DEFECT OR DISEASE	Under the Author- ity's Scheme	wise	Total	Under the Author- ity's Scheme		Under the Author- ity's Scheme		
Errors of Refraction (including squint) Other Defect or Disease of the Eyes (excluding those recorded in Group I)	326	63	389	234	40	59	205	
Total	326	63	389					

Group III.—Treatment of Defects of Nose and Throat.

	Nu	mber of Defects.			
Recei	ved operative	Treatment.			
	Under the Authority's Scheme in Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total	Received other forms of Treatment.	Total number treated.
Tonsils only Adenoids only Tonsils and adenoids Other defects of nose and throat		- 1 -	299	-	299

TABLE IV.—continued.
GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Total number treated	38
	Non-residential treatment at an orthopaedic clinic.	29
Otherwise.	Residential treatment without education	67
	Residential treatment with education	1
s Scheme.	Residential Residential Non-residential Residential treatment treatment at an with education education clinic.	1
Under the Authority's Scheme.	Residential treatment without education	ı
Under th	Residential treatment with education	7
		:
		hildren
		Number of children treated

TABLE V.-Dental Inspection and Treatment.

- 1) Number of Children who were :-
 - (i) Inspected by the Dentist :-

(i) Inspected by the Dentist:—	
Routine Age Groups. Aged: 5	7207
Specials	801
Grand Total	8008
(ii) Found to require treatment (iii) Actually treated	5593 1790
(2) Half-Days devoted to Inspection 37 Treatment 37 Total	281
(3) Attendances made by children for treatment	3593
(4) Fillings Permanent Teeth 1724 Temporary Teeth 586	2310
(5) Extractions Permanent Teeth 1016 Temporary Teeth 2935 Total	3951
(6) Administrations of general anaesthetics for extractions (7) Other operations	1662
TABLE VI.—Uncleanliness and Verminous Conditions.	
(i) Average number of visits per school made during the year by the School Nurses	3
(ii) Total number of examinations of Children in the Schools by School Nurses	27616
(iii) Number of individual Children found unclean	483
(iv) Number of Children cleansed under arrangements made by the Local Education Authority	Nil.
(v) Number of cases in which legal proceedings were tak (a) Under the Education Act, 1921 (b) Under School Attendance Byelaws	en :— Nil. Nil.

SECONDARY SCHOOLS.

TABLE I.—Return of Medical Inspections. NUMBER OF INSPECTIONS.

Boys	 			566
Girls	 •••			432
		Tot	al	 998

TABLE II.

A. Return of Defects found by Medical Inspection in the year ended 31st December, 1936.

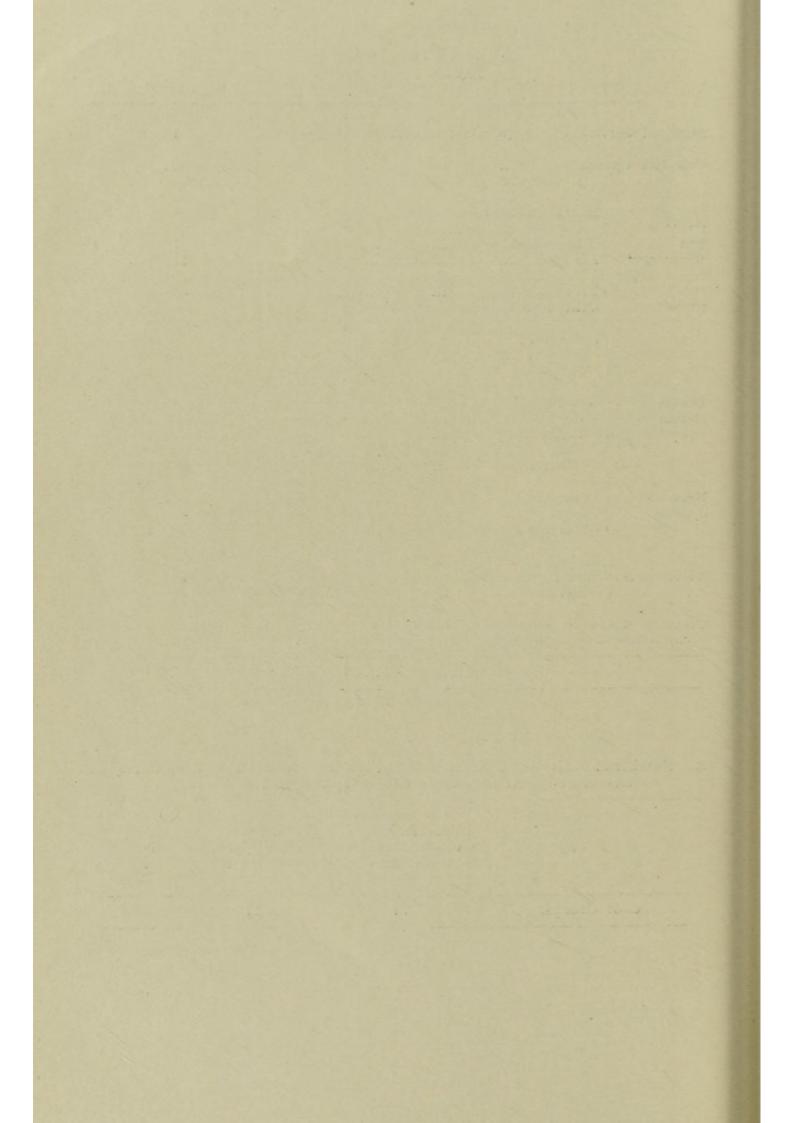
				Routin	e Inspections.
				No.	of Defects.
	DEFECT OR DISEAS	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.		
	Ringworm:				
	Conte			_	_
	D-1-			-	_
Skin				-	-
				-	-
	Other Diseases (Non-			0	10
	Tuberculous)			2	13
	Blepharitis .			_	2
	10 1 11 11			-	_
	Keratitis			-	-
Eye				-	-
		(exclu	ding	1	
	1			37	95
				1	3
	Other conditions			1	
	(Defective Hearing			_	1
Ear	04141- 35-31-			1	1
	Other Ear Diseases			-	1
Nose	Chronic Tonsillitis on	lv		1	37
and	Adenoids only				1
Throat	Chronic Tonsillitis &	Adenoi		_	
	011 111			2	1
					BING THE RESERVE

TABLE II-Continued.

Enlarged Cer	vical Glands (Non-Tu	bercul	ous)	-	1
Defective Sp	eech			_	5
	Heart Disease :				
Heart	Organic				6
ind	Functional		- !!!	_	1
Circulation	Anaemia			1	11
and the second	(Bronchitis			_	
Lungs	Other Non-Tubercu	lous Di	iseases	1	_
				1333 94	
	, Pulmonary :			1/4	
	Definite				-
	Suspected			-	-
Tuber-	Non-Pulmonary:				
culosis	Glands			-	-
	Bones and Joints			_	_
	Skin			-	_
	Other forms			-	_
Nervous	/ Philana				
System	Epilepsy Chorea				
system	Other conditions			1	
	(Other conditions	***			
	(Rickets				
Deformities				1	15
octor mireres	Spinal Curvature Other forms			4	29
	(other forms	•••		2 2 2 6	
Other Defec	ts and Diseases (exc	cluding	Un-		
	and Dental Diseases			1	12
	Total			54	235

B. Number of Individual Children found at Routine Medical Inspection to require treatment (excluding uncleanliness and dental diseases).

Group	For Defective Vision (excluding Squint).	For all other conditions recorded in Table IIA.	Total	
Code Groups.	37	17	53	



CONTENTS OF

MEDICAL OFFICER OF HEALTH'S REPORT.

						P	age
Ailing Infants' Beds							49
Ambulance Facilities							10
Ante-Natal Clinic							48
Bacteriologist's Repor							11
Bacteriological and P	athologica	al Exam	inations	11, 25,	28, 54,	56, and	61
Bakehouses	***			***			27
Bed-bugs						10 1	19
Births Birth Rates						46 and	51
Blind Persons	***					41 and	46
D. 21 32							18
Building				***			10
Cancer					d		40
Committees							5
Contraceptive Clinic							48
Continueparia							
Death, Causes of							8
Death Rates							41
Drainage and Sewera	ige					14	-15
Factory and Worksh	op Act			***			20
Fertiliser and Feedin	g Stuffs .	Act					23
Food Supply, Contro	ol of				24	, 26 and	1 27
Health Services				***	***		10
Hospitals							10
Housing						17	7-18
							0=
Ice Cream Premises	***						27
Immunisation			***			***	39
Infantile Mortality			***				49
Infant Deaths, Cause			***	***			50
Infant Life Protection							51 52
Infant Welfare Cent Infectious Disease							9-41
Institutional Medical	Corrigos	Dublio	Accietane				10
institutional Medical	Services,	Fublic	Assistant	·C			10
Laboratory Facilities	2						10
Laboratory Facilities	,	•••	***				10
Maternity Beds							49
Maternity Homes							47
Maternal Mortality							46
Mental Defectives, I					*		10
Merchandise Marks							27
Meteorological Data							63
Midwifery and Mate				***	***		46
Milk Assistance Scho							49
Milk and Dairies Or			***				24
3 5 111 23						2	5-26
Milk (Special Design							25
Notifiable Diseases		***	***	***			39
Nursing Homes			***				47
Nursing in the Hon	1e						10

		4-14		12.7			Page
Ophthalmia Neonator	um				•••		52
Population					3		7
Post-Natal Clinic							48
Prepared Meat Premi							27
Public Analyst, Repo							56
Public Cleansing							16
					1000	-	
Rag Flock							23
Rats and Mice Destri							20
Rivers and Streams							18

Sanitary Work, Detail	ils of						16
Slaughter-houses							26
Smoke Abatement							19
Staff							5
Statistical Summary							7
Swimming Baths and	Poole		***				19
Swimming Baths and	10015		***			***	10
Tuberculosis							42
							29
Typhoid Fever					***		25
Massination							42
Vaccination		***					53
Venereal Diseases					***		
Visits by Health Visi	tors		•••				51
Vital Statistics						1	and 9
***				4			10
Water							12

CONTENTS OF SCHOOL MEDICAL OFFICER'S REPORT.

						Page
Arrangements for Tr	eatment				 	A12
Blind, Deaf, Defective	ve and E	pileptic (Children		 	A20
Exclusion from Scho	ool				 	А16
Findings of Medical	Inspectio	on :—				
Skin Disease					 	A7
Nose and Throa	t Defects	3			 	A7
Malnutrition					 	A7
Following-up					 ***	A12
Hygiene of the Scho	ools			/	 	А5
••						
Immunisation					 	A10
Infectious Disease					 	А9
Low Attendance Cer	tificates				 	A11
Medical Inspection					 	А6
Open Air Education					 	A17
Parents Payments						A11
Physical Training					 	A16
Provision of Meals					 	A13
Trovision of Means		•••			 	Alo
School Camps						A18
Secondary Schools:		al Tables			 	A32
Staff					 	A4
Statistical Tables:					 	
Table 1					 	A21
,, 2					 	A22
,, 3					 	A24
,, 4					 	A28
" 5					 	A31
,,				The state of the s		

