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County Borough of Bournemouth.

Annual Report

OF THE

MEDICAL OFFICER OF HEALTH

AND

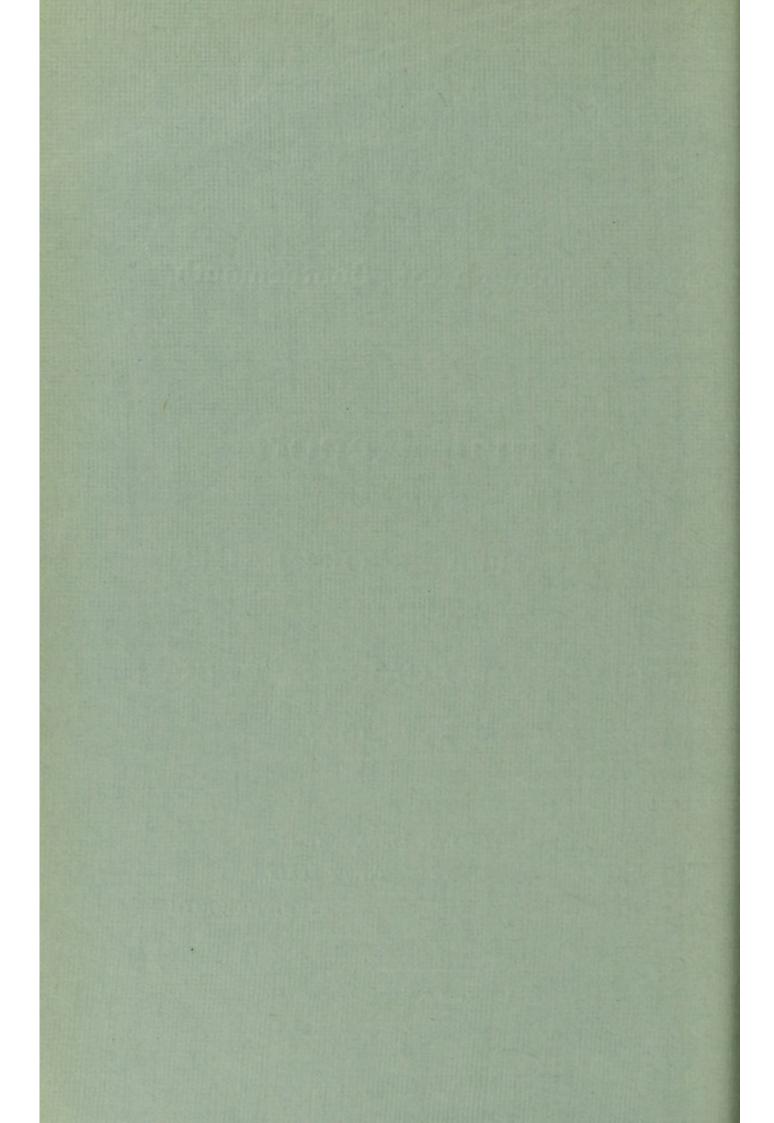
SCHOOL MEDICAL OFFICER for the Year 1938.

HEALTH DEPARTMENT,

TOWN HALL,

BOURNEMOUTH.

May, 1939.





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COUNTY BOROUGH OF BOURNEMOUTH.

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1938.

HEALTH DEPARTMENT,

TOWN HALL,

BOURNEMOUTH.

May, 1939.

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

MR. MAYOR, LADIES AND GENTLEMEN,

When presenting my annual report which is drawn up in accordance with the suggestions of the Ministry of Health, I would like to draw attention to matters of exceptional importance or interest. There has been no unexpected event in connection with Infectious Diseases which have been present for the most part in mild form and have caused few deaths.

The mortality from Tuberculosis has also been reduced, but there is a constant demand for more Sanatorium beds which are not available. The facilities provided in association with the Maternity and Child Welfare Scheme are becoming more and more popular. They appear, moreover, to be productive of good results as indicated by the low maternal and infantile mortality rates; the former is a remarkable figure.

Housing and general sanitation have provided much work for the Sanitary Inspectors whose duties are frequently added to by new legal enactments. Indeed, no effort has been spared in an endeavour to maintain Bournemouth as the premier Health and Pleasure resort of the South Coast.

Unfortunately, however, these attempts are handicapped by the tendency to place Pleasure first and relegate Health to the background. It is very disappointing, therefore, to see new municipal buildings arise, but none for the benefit of the Health Services. The latter cannot continue to produce good results unless some of the institutions visualised long ago materialise in the near future. Much confidence has been placed in the deliberations which have taken place during the year at a Conference which originated as follows:—

Arising out of the consideration by the Board of Management of the Royal Victoria and West Hants Hospital of the Report of the Voluntary Hospitals Commission, a Joint Committee of representatives of the Town Council and the Hospital Authorities was formed, and arranged a Conference of representatives of all organisations in the Borough interested in the health and hospital services.

The terms of reference of this Conference were to consider and survey the whole of the health and hospital services in the County Borough with a view to ascertaining:—

- (a) whether the existing provisions are adequate to the present needs of the sick, including preventive medicine:
- (b) whether there exist any inefficiencies or deficiencies in such services;
- (c) whether there are any gaps and omissions in the services and how these shall be remedied;

- (d) how best to arrange for such co-ordination and co-operation as shall make for economy and efficiency in these services, and
- (e) generally, to consider how these services may be brought to the highest state of efficiency and adequacy to meet the growing needs of the County Borough.

Matters of major and minor importance were discussed and various recommendations made. I trust that these will soon be accomplished so that Bournemouth may be a model town in all respects.

I am,

Yours faithfully,

H. GORDON SMITH.

COMPOSITION OF COMMITTEES AND STAFF On 31st December, 1938.

HEALTH COMMITTEE.

The Mayor (Alderman I. W. Dickinson). 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
"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.

MATERNITY AND CHILD WELFARE ACT, 1918, COMMITTEE.

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

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

PUBLIC HEALTH DEPARTMENT.

H. Gordon Smith, M.D. State Medi-Medical Officer of Health and School Medical Officer cine), B.S. (London), M.R.C.S., L.R.C.P., D.P.H. Deputy Medical Officer of Health, C. F. Pedley, B.A. (Camb.), M.R.C.S., Deputy School Medical Officer and I,.R.C.P., D.P.H. Clinical Tuberculosis Officer Assistant Medical Officer of Health Grace H. Wood, M.B., Ch.B., B.Sc., (Maternity and Child Welfare) ... D.P.H. Assistant Medical Officer of Health, K. J. Grant, M.A., M B., Ch.B., Assistant School Medical Officer D.P.H. and Resident Medical Officer of the Isolation Hospital C. R. A. Airey, L.D.S. School Dentist ... Senior Sanitary Inspector Wm. Riley* † † ¶ Deputy Senior Sanitary Inspector... E. Smith* District Sanitary Inspectors D. J. Mortimore*, W. Vincent Morris*, C. T. Newlyn*, S. Powell* ||, J. Rand J. Randall* † | S. Tweedie* † M. Guthrie* †, O. Stewart* † Food Inspectors

*Certificate of the R.San.I. for Sanitary Inspectors.

†Certificate of the R.San.I. for Meat Inspectors.

†Certificate of the R.San.I. for Smoke Inspectors.

*Certificate of the San. Inspectors Association late Examination Board,

*Certificate of the R.San.I. for Sanitary Science.

Resident Medical Officer (tem- porary), Linford Sanatorium	H. R. Paterson, M.A. (Camb)., M.R.C.S., L.R.C.P., D.P.H.
Matron, Linford Sanatorium	E. E. Dovey
Matron, Isolation Hospital	E. H. Wallace
Clerk, Isolation Hospital	D. L. Young
Health Visitors (and School Nurses)	M. I. J. Abraham, F. V. Burt, P. M. Carey, M. G. Cornish, A. M. Crisp, S. Dakin, M. S. Gibbs, G. Hammond, F. E. A. Richardson, F. Turner. All certified midwives.
School Nurse and Mental Deficiency Visitor	A. M. Blakemore
Municipal Midwives	I. H. a'Beckett, A. I. Barker, E. M.
Dental Attendant	Eccles, N. Mallender, M. H. Popham E. M. Sillis
Chief Clerk and Vaccination	
Officer	A. W. Hurley
Clerks	A. J. Billen, C. J. M. Bryon, W. G. Clarkson, E. H. Davis, P. D. E. Dominey, F. J. Goode, D. W. Hall, F. H. Lewis, E. P. Page, J. W. Peake, J. W. Roberts, G. O. Willis, G. H. Woodlands
Superintendent of Public Conveniences and Mortuary	T. H. Bailey
Disinfectors and Drain Testers	F. J. Baker, J. Burr, W. C. Feltham, R. E. Gerault, A. Lockyer, W. J. Roe.
Corporation Rat Catchers	J. Burridge, F. J. Smith
PART-T	'IME OFFICERS.
Public Analyst	R. Pendrill Charles, M.D., F.I.C.
Public Vaccinator	R. H. Robinson, M.B., B.Ch., B.A.O.
Bacteriologist	A. C. Ingram, M.D., M.R.C.P., D.P.H.
Meteorologist	A. C. Marsh, F.R.Met.Soc., F.B.O.A.
Dental Surgeon for M. and C.W.	E. Samson, L.D.S.
Consultant Obstetrician	W. S. Richardson, M.D., F.R.C.S.
Deputy Consultant Obstetrician	C. R. Heygate Vernon, M.A., M.B., F.R.C.S.
Medical Officer of V.D. Treatment Centre	R. V. Facey, B.A., M.B., Ch.B., M.R.C.S., I.R.C.P.
Assistant Medical Officer of V.D. Treatment Centre	J. L. Reeve, M.R.C.S., L.R.C.P.

GENERAL STATISTICS.

Area of the County Borough		11,627 acres
Population—Census 1931	·	116,797
Estimated 1938 Estimated at mid-year,	1938	133,000
by Registrar-General		122,100
Number of inhabited houses		34,200
Rateable Value, 1938		£1,909,831
Sum represented by a penny rate		£7,576 16s. 4d.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

		Total	M.	F.		
(Legitimate	1258	617	641		
Live Births \				Birth-rate	10.25	
	Illegitimate	106	65	41	(R.G.	11.17)

Still Births 48. Rate per 1,000 total births 33.99.

Deaths 1,708. Death-rate—crude 13.98, adjusted 10.48.

Deaths of infants under one year of age per 1,000 live births:— 44.72 (legitimate 42.13, illegitimate 75.47).

Number of women dying in, or in consequence of, childbirth:—
From Sepsis 1. Other causes 1. Rate per 1000 total births 1.41.

Deaths from Cancer 277 (all ages).

Deaths from Measles (all ages) 1; Whooping Cough (all ages) 2; Diarrhoea (under two years of age) 4.

SOCIAL CONDITIONS.

The population is steadily growing and it is likely that the estimate of 122,100 given by the Registrar-General is far from accurate. Since the County Borough was extended the proportion of working-class families has increased and many of these are large. The number of inhabited houses is stated to be 34,200 and a population exceeding 133,000 can be obtained by allotting less than four occupants to each dwelling. Some confirmation of this figure is supplied by the Air-Raid Wardens, who found that the inhabitants amounted to 125,785, but this census was made in July, August and September, when many residents would be away from home.

There is no obvious change in the social circumstances of the community as a whole. The building and allied trades continue to provide occupation for many though sometimes in uncertain manner. Bournemouth and the adjoining districts are becoming still more popular as pleasure resorts and catering for visitors directly or indirectly is the chief industry. Statistics relating to unemployment have been supplied by the Employment Exchange as follows:—

Persons over the age of 17 registered as unemployed during each of the quarter months:—-

	Men	Women
March	 1962	573
June	 1575	467
September	 1704	229
December	 2595	612

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF BOURNEMOUTH DURING THE YEAR 1938.

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

	District	wit	hout	the	Dist	rict.		1				
Causes of Death.	All Ages	0_	1-2	2-	5—	15—	25—	35—	45—	55—	65—	75—
All Causes	1708	61	8	0	14	28	41	74	126	256	422	660
1—Typhoid and	1700	01	0	9	14	20	41	14	120	200	422	003
paratyphoid							100					
fevers	1					1			In 1827			
2—Measles	1				1							
3-Scarlet fever												
4—Whooping		1	100	10	W. F.			37.6		175		
cough	2		1	1								
5—Diphtheria	3				2	1						
6—Influenza	22	1				1	***	2	3	3	4	8
7—Encephalitis	2		100				1600	1		1		
lethargica 8—Cerebro-spinal	-							1				
fever	1		1				1	10000		3000		
9—Tuberculosis	100										***	
of respiratory	1		10						-	1	1389	
system	53					6	10	11	12	9	5	
10—Other tuber-	A STATE OF	100	1			1 3 8	1				19.00	1300
culous diseases	14	2	1	1	2	1	1	2	1	2		1
11—Syphilis												
12—General paraly-	1		3		200	138	63/3	14001		1000	1000	1000
sis of the insane,	5	100	1			1000	1	130	3	1	1	1
tabes dorsalis 13—Cancer, malig-	3				***				0			100
nant disease	277	1 3		1		1	3	20	31	70	83	68
14—Diabetes	00					100	1	1	1		1 32	
15—Cerebral							1		100	13		
haemorrhage, etc.	115							. 2	7	10		
16—Heart disease	540			1	1					66	151	287
17—Aneurysm	9									. 3	2	4
18—Other circula-		0			13%		1	1	1		000	00
tory diseases	The second						1		21			
19—Bronchitis	36	****						1	1	6	12	16
20—Pneumonia (all forms)	56	11	3	1	130	1	1 9	1	5	7	4	20
21—Other respira-	30	1	0	33			1	1		28	100	-
tory diseases	18				1	1		. 1	3	3 1	8	3
22—Peptic ulcer		1					1	1		5		3
23—Diarrhoea, etc.	9	3	1			. 1			. 1		1	
24—Appendicitis	. 9		,				. 2	2 2	3	3 1	1	
25—Cirrhosis of			100		-	1	1	1				
liver	7								. 2	2 2		2
26—Other diseases	9	1	1		1	1	1	13 3	1 2	2 2	2 2	2
of liver, etc 27—Other diges-	9	1		•••					1	MAG	-	-
tive diseases	. 29	1	1		1			. 3	3 9	2 4	11	7
28—Acute and	1 20	9 700	1	1		1	F	1		1000	1	10000
chronic nephritis	54	1			1	ıj		. 2	2 4	1 10	15	22
29—Puerperal sepsis	s 1							1				
30-Other puerpera	1				1	1	100	1	1	1	1	1
causes	. 1						-	1				
31—Congenital de-	100				1					100	Fig.	
bility, premature		3		31	23	100			180			1733
birth, malforma- tions, etc	. 37	37		1-1	-	1	1		13%	133	1	1 34
32—Senility	20		1 30%	***	1	1	1				. 3	35
33—Suicide	00		1 800				il "		3	3	7	3
34—Other		1			10			ALC: Y	1		1	
violence	. 41	1		2	2 :	2 3	3	5 5	2 :	3 5	2 4	1 17
35—Other defined	100	1	133	1	13		100	1	1			
diseases	. 142	4	1	2	1	3 5	9	8 8	1	8 2	3	32
36—Causes ill-		1	1	1		1	18	4	1		189	1
defined, or un-	1	1	1	1			193		1	1	17 1	1
known				***						1	1	1
Charles of the Control of the Contro	1	1	1	1	1		1000	1	1	1	1000	

COMMENTS ON THE TABLE OF CAUSES OF DEATH.

669 of the 1708 deaths were of people over the age of 75.

Diseases of the circulatory system associated with old or middle age were the most common cause of death.

The next important cause was Cancer, with a high incidence after 45 years of age and a greater mortality in females. The death-rate has increased from 2.10 in 1937 to 2.26 in 1938.

Pneumonia was responsible for a number of deaths in the first year of life and also in the aged.

The death-rate from Tuberculosis when compared with that of other county boroughs was low.

Relatively few deaths were attributed to the common infectious diseases (excluding Influenza). None was caused by Scarlet Fever and only three were due to Diphtheria, two to Whooping-cough and one to Measles.

There were two deaths connected with Pregnancy or Parturition, an exceptionally small number.

22 deaths were certified as due to Suicide and 41 to other violence—road accidents, etc.

Alcoholism is not a rare condition, seven deaths having been attributed to Cirrhosis of the Liver.

A comparison can be made in relation to the deaths associated with systems of the body or with certain group diseases.

group diseases.	Total	Rate per 1,000
Circulatory system (including cerebral		population
haemorrhage)	778	6.37
Cancer and malignant disease	277	2.26
Respiratory system (excluding		
Tuberculosis)	110	.90
Digestive system (excluding Cancer		
and Tuberculosis)	73	.59
Tuberculosis (all forms)	67	.54
Suicide and violence	63	.51
Diseases of the Kidney	54	.44
Infectious Diseases (excluding Tuber-		
culosis but including Influenza)	32	.26

VITAL STATISTICS DURING 1938 AND PREVIOUS YEARS.

			Bir	ths		Total deaths		deaths			Net deaths belonging to the District							
	D 1	7		Net	1	registered in the		registered in the		registered in the		in the		not		der I	At all Ages	
Year	Popula- tion esti- mated to middle of	Uncorrected				istrict	70 0	Of Residents r registered in t District		Rate								
	each Year	ΣŽ	No.	Rate	No.	Rate	Of Non-resi	Of Regist Distri	No	Net Births	No.	Rate						
1	2	3	4	5	6	7	8	9	10	11	12	13						
1918	†83227 †74279 †6073	1093	1031	†12.38	1140	†15.34	219	144	59	57.2	1065	†14.33						
1919	1 +82627				1209	†14.63	207	127	89	87.08	1129	†13.66						
1920	†86288 †85919				200	†11.89	177	109		45.39	954	†11.10						
1921	91770 81200	1280	1251	13.95	1133	12.34	179	130	94	75.13	1084	11.81						
1922	93770	1168	1129	12.04	1181	12.59	174	135	64	56.68	1142	12.17						
1923	95600 82200	1897	100	(11.19	1192	12.46	207	135			1120	(11.71						
1924	97000			11.46	1225	12.62	187	132	7.0	1-1-10	1170	12.06						
1925	98000			111.79	1222	12.46	173	128	61	52.76	1183	12.07						
1926	100000 90100	00000		(11.10	1291	12.91	206	135	64	57.65	1220	12.20						
1927	102500 92650			(10.49	1338	13.05	231	139	56	52.04	1246	12.15						
1928	105000	1222	1108	10.55	1397	13.30	258	163	61	55.05	1312	12.49						
1929	108000 97360			9.54	1543	14.28	261	192	48	46.55	1473	13.63						
1930		1231	1082		1346		240	149	50	46.21	1257	11.26						
*1931	114 0 60 106380	1324	1182	10.36	1552	10.20s		201	74	2.60	1492	9.81s						
1932	1100000	100000	1279	10.65	1712	10.69s 11.34s		221	70	54.73	1687	10.54s						
1933	/ 102000	1428	1284	10.44	1646	10.03s 10.71s	227	199	69	53,73	1618	9.86s 10.53s						
1934	125000	1479	1245	9.96	1611	9.66s 10.36s	248	198	66	53.01	1561	9.36s 10.03s						
1935	126500	1497	1307	10.33	1620	9.60s 10.27s	235	-186	52	39.78	1570	9.30s 9.96s						
1936	129200 119400	1535	1393	{10.78 11.66	1678	9.73s 10.53s	250	232	55	39.48	1562	9.64s 10.43s						
1937	1120000	1594	1351	10.23	1777	10.09s 11.01s	255	241	62	45.89	1663	10.01s 10.92s						
1938	133000 122100	1630	1364	${10.25 \atop 11.17}$	1734	9.78s 10.65s	286	260	61	44.72	1708	9.638						

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

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

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

GENERAL PROVISION OF HEALTH SERVICES.

The Conference which considered the Health and Hospital Services of the County Borough dealt very fully with the following matters.

(a) Laboratory facilities.

It was decided that these are adequate and efficient for all kinds of investigations required for fee-paying patients, but that there are some deficiencies in respect of patients who are unable to pay a fee. It was recommended that the Borough Bacteriologist should be allowed considerable latitude in undertaking investigations of a public health nature for medical practitioners.

(b) Ambulance facilities.

No alterations have been made and apparently the service is efficient.

(c) Nursing in the home.

It has been indicated that there are gaps in district nursing inasmuch as the nurses employed by the Bournemouth District Nursing Association do not perform duties at night or on Sunday except in special circumstances, and the Kinson area is not completely covered. Moreover, infectious cases are excluded from the Scheme. The Conference hoped that these deficiencies would be adjusted and additions made to the nursing staff.

(d) Treatment Centres and Clinics.

It is uncertain when the much-needed Health Centres will be built. Meanwhile, certain services are being hindered. This applies especially to Maternity and Child Welfare work, which is frequently carried on in overcrowded premises.

It has been possible to establish an Orthopaedic Clinic in a municipal building and to arrange for the admission of suitable patients not exceeding 16 years of age to Lord Mayor Treloar's Hospital, Alton. At times the need of a Child Guidance Clinic and a Rheumatism Clinic is experienced. The Conference expressed the opinion that these should be available but it will be difficult for the Council to make direct provision and the Voluntary Hospital is not in a position to do so at present.

(e) Hospitals.

Consideration of the problem of hospital accommodation has emphasised the importance of co-operation between all the agencies concerned. While the voluntary hospitals are hampered by lack of funds, it is possible for the Local Authority to assume the initiative and produce all the beds that are needed. But attempts at rivalry between the Voluntary Hospitals and those established by the Council are to be deprecated. Extra accommodation for sub-acute and chronic cases has been much discussed during recent years and the provision of a maternity institution is also a debateable subject. There can be no question of overlapping where the Isolation Hospital is concerned although it is now permissible to admit patients suffering from diseases which are not usually regarded as infectious. It would appear that the erection of a new Infectious Diseases Hospital should be the first step in dealing with hospital accommodation as a whole, but although a site has been purchased, the Council has decided to proceed no further at present. As has been pointed out on several occasions, the present hospital might prove to be quite inadequate in the event of an epidemic which cannot be accurately predicted but is a likely contingency if it is realised that large numbers of children will be evacuated to Bournemouth in the event of war.

As regards chronic and sub-acute cases, there are three methods of solution :—

- (a) The appropriation of Fairmile House as a Public Health Hospital and its extension when necessary;
- (b) The adaptation of an existing hospital, e.g., the Isolation Hospital;
- (c) The erection of a new institution on a site to be acquired.

The appropriation of Fairmile House would undoubtedly be the most economical and probably in the long run the most satisfactory proposal. Moreover, with few dissentients, it was considered by the Conference to be desirable, but the Council contemplates the erection of a Municipal Hospital on a separate site within the County Borough. Whichever method be selected ultimately, it is imperative that means be taken soon to relieve the pressure on the beds in the voluntary hospitals.

1. The administration of the Institutional Medical Services transferred from the late Board of Guardians under the provisions of the Local Government Act, 1929.

There have been no changes nor developments.

- 2. Poor Law Medical Out-Relief.
 - (a) The number of Medical Relief Districts has been reduced from five to four and necessary adjustments have been made.
 - (b) The "open choice" system has been discussed by the Public Assistance Committee which decided not to adopt it.
 - (c) There is a medical officer for each of the four districts.
 - (d) The District Medical Officers are all private practitioners, one of them holding the appointment of Public Vaccinator.

3. Institutional provision for the care of Mental Defectives.

These are accommodated in the Colonies at Coldeast and Tatchbury Mount, which are shared with the County of Hampshire and the County Borough of Southampton.

SANITARY CIRCUMSTANCES OF THE AREA. Water.

The Bournemouth Gas & Water Company and the West Hants Water Company are able to provide an ample supply of water for all parts of the County Borough. The methods of purification that are adopted are very efficient, the results being checked frequently by analysts employed by the Companies and also by the Borough Analyst, to whom samples are submitted periodically by the Council's officials. The bacteriological findings always indicate a water of considerable purity and the chemical analyses vary but little.

Drainage and Sewerage.

There has been no important extension of sewerage and no alterations have been made in connection with sewage disposal.

Closet Accommodation.

During the year, 24 closets on the conservancy system (compared with 23 in 1937) were abolished in the semi-rural parts of the Borough, two being at premises awaiting demolition, while the remainder were converted into water closets, leaving 186 still in use. A proportion of these cannot be dealt with at present as no sewer is available, but when adequate drainage is provided, owners are pressed to abolish their cesspools, convert insanitary conveniences and connect their drains with the sewer.

In 1937, a total of 35 cesspools were abolished.

Public Cleansing.

No alterations have been made as regards refuse collection and disposal, cesspool cleansing, etc.

Rivers and Streams.

The River Stour for several miles forms a boundary of the County Borough. In this length there is normally no pollution of industrial origin or from sewage, but it was discovered that a sewer in the bed of the river belonging to a neighbouring authority had been broken during dredging operations and was causing a nuisance. Attention was directed to this defect which was remedied in due course.

Anxiety is still experienced in connection with the pollution of the river in the vicinity of Wimborne.

From time to time there have been indications of contamination of the Bourne Stream from more than one source. Surveys have been made most carefully but with little result until it was ascertained recently that the drains of two houses had been improperly connected with the surface water system which overflows into the stream. This matter was promptly adjusted. It is believed, however, that pollution occurs at intervals outside the Borough and the co-operation of the Council concerned has been invited.

SANITARY INSPECTION OF THE AREA.

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

1.—Nuis.	ANCES.				
Complaints received and attended to					835
General inspections of districts					261
Number of nuisances detected					547
Number of nuisances abated					470
Number of nuisances outstanding, 1st	January,	1938			101
Ditto, 31st December, 1938	***				47
Visits re abatement of nuisances					2569
Number of notices served—Informal	***			***	253
Statutory	in a	***		***	200
Number of notices complied with—Inf	atutory				220
Vicite to piggariae		***	***		120
visits to piggeties		***	***	111	120

	2	-Infectious	DISEA	SES.			
	made						229
Total nui	mber of visits					***	424
		3.—New Bu	ILDINGS				
Number		,					2692
Total vis				·			2968
Reports 1	made to Building	Inspector re	defects	ascert	ained		350
	4	-PRIVATE IN	SPECTIO	NS.			
Premises	inspected and tes						75
Total visi				3	1000		275
	5.—DISINF	ECTIONS AND	DISINI	ESTAT	ions.		
	of rooms after not	tifiable diseas	e				362
Number							107
	of rooms after nor		isease		77 7000		143 271
	of rooms for verm on of places of er			***	00000		93
	of articles disinfec						7479
and the same of	or artificial distance	tea or acour	,,,,	425			Aller.
		HOUSE	NC				
1.—Inspec	ction of Dwelling-l	houses during	the Ye	ear—			
(1) (a)	Total number of					using	
	defects (under P						835
(b)	Number of inspe						2857
(2) (a)	Number of dwel						
	above) which w						537
(b)	Housing Consolic Number of inspe						2003
(3)	Number of dwel						-000
(-)	dangerous or inju						
	habitation						6
(4)	Number of dwell						
	under the precedi				e in all res	pects	
	reasonably fit for	r human hab	oitation				414
2.—Reme	dy of Defects durin	ng the Year	without	Servi	ce of Form	nal No	tices.
	Number of defect	tive dwelling-	houses	render	ed fit in c	onse-	
	quence of inform	al action by	the Loc	al Aut	hority or	their	
	officers						206
3.—Action	under Statutory	Powers durin	g the Y	ear :-	- 27 E		
	A. Proceedin					he Ho	using
	Act, 1936						
(1)	Number of dwel			ect of	which no	otices	
(0)	were served requ				donad 61	-64	10
(2)	Number of dwell		men we	ere ren	dered ht	arter	
	service of formal						3
		ocal Authorit	y in de	fault o	of owners	F 19.15	Nil
							1
(1)	B. Proceeding					tions	
(1)	Number of dwel					rices	1

(2)	Number of dwelling-houses in which defects were remedied after service of formal notices:—
	(a) By owners 1 (b) By Local Authority in default of owners Nil
	C. Proceedings under Sections 11 and 13 of the Housing Act, 1936:—
(1)	Number of dwelling-houses in respect of which demolition orders were made *26
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders 4
	D. Proceedings under Section 12 of the Housing Act, 1936:-
(1)	Number of separate tenements or underground rooms in respect of which closing orders were made Nil
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit Nil
	tenement or room having been rendered fit Nil
4.—Housi	ng Act, 1936, Part IV-Overcrowding.
	Number of dwellings overcrowded at the end of the year Number of families dwelling therein 2
(b) (iii)	Number of persons dwelling therein 25 Number of new cases of overcrowding reported during the
	year 1
(i) (ii)	Number of cases of overcrowding relieved during the year Number of persons concerned in such cases 6
* 06	these 26 demolition orders 20 relate to corovers and buts at

* Of these 26 demolition orders, 20 relate to caravans and huts at East and West Howe.

Owing to the comparative freedom of the County Borough from notifiable disease it has been possible for the staff to devote more time to housing inspections. There has been a marked increase in the number of these and consequently many houses have been found which are not in all respects reasonably fit for human habitation.

For several years, problems have been encountered in the form of two colonies of migrants in the Kinson area. The individuals concerned are chiefly occupied in selling flowers, but at times certain of their number go away to pick hops, fruit, etc. The smaller colony at West Howe (Ringwood Road) has been satisfactorily dealt with.

Fourteen insanitary dwellings, comprising eight huts and six caravans, have been removed. Three of the families now live in bungalows erected on the site and the remainder have obtained houses elsewhere. Much progress has been made with the larger colony at East Howe (between Fernheath and Mount Roads). Several of the occupants have left the district and it is anticipated that the site will be completely cleared in 1939.

CAMPING SITES.

Two sites have been used for camping purposes, viz:—

- (1) The New Bridge Camp, Castle Lane, Iford, now abandoned, and
- (2) The "Cara Camp," Old Bridge Road, Iford.

An application for a licence under Section 269 of the Public Health Act, 1936, was made in connection with the latter. Conditions as to improvements, etc., in the sanitary and other arrangements in the camp were imposed and the required work is now in progress. During the summer season of 1938, it is estimated there was a maximum number of 350 campers in the area at one time.

SMOKE ABATEMENT.

Comparatively little pollution by smoke arises from Bournemouth's few industrial premises, chiefly laundries, bakehouses and two outlying brickworks. An alleged nuisance from grit discharged from one of the laundries has been investigated during the year. The firm concerned was cautioned and further observations are being made.

164 observations (each of 30 minutes' duration) were made of chimneys at industrial premises and in the few instances where smoke emissions were considered excessive, visits paid to the boiler house showed that the trouble invariably arose through faulty methods of stoking.

SWIMMING BATHS AND POOLS.

The Corporation Swimming Baths are closely supervised, samples being taken for submission to the

Analyst at monthly intervals. The results of analysis are now very satisfactory.

There is one privately owned Swimming Bath which has an efficient filtration plant, but there are no open-air pools within the County Borough.

ERADICATION OF BED BUGS.

In consequence of complaints, or as a result of inspections under the Housing Act, 1936, 83 premises (including nine Corporation houses) were found to harbour bed bugs in varying degrees. Some of the vermin had been imported into otherwise clean premises through the medium of visitors' luggage.

Except in two cases, the infested premises were dealt with by the Local Authority, either by sulphur dioxide or liquid insecticides; skirting boards, picture rails and architraves having previously been removed by the owner.

The two excepted cases referred to above were dealt with by a Contractor who disinfested one building by means of hydrocyanic acid gas and the infested portion of another by ethylene oxide.

The Housing Superintendent inspects the premises of applicants for Corporation houses, when he satisfies himself by enquiry and observation whether there is any likelihood of vermin being imported.

Tenants of infested and disinfested property are constantly advised by the Inspectors as to their responsibilities.

The insecticides chiefly used by the Department are Lowes' gassing solution and Zaldecide.

RATS AND MICE (DESTRUCTION) ACT, 1919.

The district is dealt with systematically and complaints as to the presence of rats are investigated promptly. The problem of "litter" is receiving special consideration and it is likely that measures adopted to reduce this nuisance will have an inhibitory effect on the presence of the rodents. The usual rat-week was held during the year.

Work carried out in 1938:

Number of applications for the services of r	at-	
catchers		634
Occasions when dogs and ferrets were used		11
Occasions when poison baits were applied		665
Occasions when gas was used		96
Number of visits for supervision		730
Occasions when no action was taken		27
Number of rats destroyed		1704

FACTORIES ACT, 1937.

The number of factories registered is 1149. They are supervised by the District Sanitary Inspectors.

		Premises	Rooms
Trade.	R	egistered.	Occupied.
Dressmakers and Milliners		125	157
Tailors		68	86
Bootmakers and Saddlers		115	118
Laundries		26	39
Carpenters and Builders		180	194
Cabinet Makers and Upholsterers		55	71
Coach Builders and Motor Works		17	22
Watchmakers and Jewellers		27	30
Metal Workers		48	49
Cycle Builders and Motor Works		93	90
Miscellaneous		245	268
Bakehouses		87	95
Kitchens of Hotels and Restaurants		63	86
		1149	1305

Outworkers.

During the year 53 lists containing the addresses of 118 outworkers have been received. In every case an inspection was made and in only one instance was it found necessary to serve a notice requiring works to be done.

Eleven addresses were received of outworkers who resided outside the District. These addresses were forwarded to the Authorities concerned.

INSPECTION OF FACTORIES. FACTORIES ACT, 1937.

I.—INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH.

	Number of					
Premises (1)	Inspections (2)	Written Notices (3)	Occupiers Prosecuted (4)			
FACTORIES with mechanical power	269	134				
FACTORIES without mechanical power	328	77	-			
Other premises under the Act (including works of building and engineering construction but not including outworkers						
premises)	85	5				
TOTAL	682	216				

II.—DEFECTS FOUND.

	Nu	Number of offences in respect of		
Particulars (1)	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	which Prosecutions were instituted (5)
Want of Cleanliness	10	9	1	
Inadequate ventilation (S.4)	6	5	2	
Overcrowding (S.2)	1	1		
Want of drainage to floors		-	-	2500
Sanitary Accommodation—				CA TORREST
Insufficient	4	1	The state of the s	-
Unsuitable or Defective	17	16	-	
Not separate for sexes		-	A	
Other offences	8	6	3	-
TOTAL,	46	38	6	- 1

SUMMARY OF SHOPS ON REGISTER, 31st December, 1938.

BUSINESS	Number of shops on Register			y clo		200		Exempt or par- tially exempt
Greengrocers, Fruiterers & Florists Bootsellers and Repairers Tailors and Outfitters Butchers Drapers, Milliners & Dressmakers Furniture Dealers Toys, Newspapers, Tobacco & Sweet	363 183 171 120 142 230 90 306 72 49 125 64 50 100 83 22 78 135 33 13 65 57 37 27 14 58 248	37 5 4 -7 2 1 5 3 -7 -2 2 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7	9 - 2 1 7 - 3 1	268 114 142 102 127 167 70 61 18 34 63 37 37 11 14 17 62 114 26 12 54 47 24 27 13 8 130	17 3 5 — 2 1 6 1 — 1 5 — — — — 8	2 1	6 3 19 17 4 57 17 17 — 4 13 — 5 1 21 6 1 7 10 13 — 76	24 58 1 4 — 226 50 15 57 20 86 59 — — — — — 49 12
Number of Shops on Register Empty Shops in Borough	2935 218		23	1799	51	3	281	677
Total Number of Shops in Borough	3153							

SHOPS ACTS, 1912 TO 1936.

The Inspectors paid a total of 2,059 visits to shops in the Borough, carried out patrols on 60 evenings and on 56 Sundays for the purpose of administering the provisions of the above-named Acts.

379 contraventions were noted, chiefly due to failure to exhibit the required notices in shops or

because records of hours worked by shop assistants under the age of 18 years were not kept. In this connection, 170 notices were served and 181 verbal warnings were issued, with the desired effect, except in respect of one shopkeeper who, after repeated warnings, was prosecuted and fined a total of £15 15s. (including costs) for employing young persons for more than the approved period of 48 hours per week, for failing to grant a half-holiday and for not exhibiting a prescribed notice.

Special attention was also given to the provisions relating to health and comfort of persons employed about the business of wholesale and retail shops and warehouses. These deal with heating, lighting, ventilation, sanitary conveniences, washing accommodation, and, where meals are taken in the shop, facilities for taking meals.

28 of the contraventions were associated with the above; 15 of these were rectified, leaving 13 at the year end to be dealt with.

REGULATION OF THE CONDITIONS IN OFFICES.

No special action has been taken during the year.

RAG FLOCK ACT, 1911 AND 1928.

No samples of Rag Flock were taken during the vear 1938.

FERTILISERS AND FEEDING STUFFS ACT, 1926.

No applications for samples to be analysed have been received, but 18 unofficial samples of fertilisers and 12 of feeding stuffs were taken.

Twelve of the samples of fertilisers on analysis gave results which agreed with the statutory statement

after allowing for the limit of variation. The remaining six did not agree inasmuch as they contained an excess, not a deficiency, of some ingredient.

For this reason the sale was not to the prejudice of the purchaser and no action was taken.

As regards the Feeding Stuffs, three samples complied with the various statutory statements and nine did not do so. Four of the latter contained a slight deficiency of oil, but the others had an excess of certain ingredients and were consequently not sold to the prejudice of the purchaser.

THE PHARMACY AND POISONS ACT, 1933.

Twenty-two informal samples were taken as follows:

12 samples of Phenols

3 ,, Ammonia

5 ,, Hydrochloric Acid 2 ,, Sodium Hydroxide

22

All of these samples were found on analysis to be satisfactory.

INSPECTION AND SUPERVISION OF FOOD.

The inspection of food and the premises associated with storage and distribution is a task of some magnitude, especially during the holiday season. It is desirable that even more supervision should be given, as frequent visits are necessary in order to impress on some individuals the importance of elementary hygiene. On the whole the standard of cleanliness is being steadily raised and it is to be observed that shops employing refined methods do good business. Yet there is still to be seen much unnecessary handling of food. The demand for pasteurised milk and cream seems to be increasing and wrapped foods are also more popular.

Milk and Dairies Order, 1926.	
Number of producers, residing outside the Borough, registered to sell wholesale and/or	
retail in the Borough	3
Number of producers residing in the Borough registered to sell wholesale	15
Number of producers residing in the Borough	10
registered to sell by retail	5
Number of retailers residing outside the Borough registered to sell by retail within the	
Borough	3
Number of retail purveyors registered Number of visits to dairies	$\frac{354}{474}$
Number of winite to annul 1	258
Number of visits to cowsheds Number of visits to milkshops	292
Milk (Special Designations) Order, 1936.	
The following licences have been granted:	
Tuberculin Tested Milk—	
Bottlers' licences	1
Dealers' licences	6
Supplementary licence	1
Accredited Milk—	
Producers' licences	6
Pasteurised Milk—	
Pasteurising establishments	2
Dealers' licences	20
Supplementary licences	2
Samples were examined in order to ascertain milk attained the required bacteriological stand	ard :
Tuberculin tested milk 26	atisfactory
Accredited milk 28	
Pasteurised milk 21	4

Of the 25 samples of pasteurised milk four were either improperly pasteurised or contained a proportion of raw milk. These were followed up.

Examination of Milk for tubercle bacilli.

Forty-eight samples of bulk milk were examined for tubercle bacilli by means of animal inoculation. None of these would have been pasteurised or otherwise treated prior to consumption.

Forty-three samples gave negative results. Of the five found to contain tubercle bacilli, two were taken from one farm. Details as to these unsatisfactory samples follow —

Sample 1.

A sample taken from the bulk supply of this farm proved positive to tuberculosis. The County Authorities were notified on the 8th May, 1938, and took action, but clinical and laboratory examinations proved negative. On the 18th July, 1938, a calf from this farm was killed in one of the local slaughterhouses and found to be suffering from Miliary Tuberculosis; it was condemned. A further examination of this herd was made by the County Veterinary Officer. In consequence, on the 15th August, 1938, a crossbred cow was slaughtered and found to be suffering from advanced tuberculosis. A period of over three months had elapsed since the first sample was taken. This is an Accredited Farm.

Samples 2 and 3.

A bulk sample of milk from this farm proved positive to tuberculosis. The County Authorities were notified on 29th May, 1938, A further sample was taken in the County Borough and found to be infected. The farm was once more visited by the Veterinary Officers who took samples from three cows. These were found to be tubercular and were slaughtered on the 29th August, 1938. One was suffering from advanced tuberculosis and the other two from tuberculosis not advanced. A period of three months had elapsed from the time of notification.

Sample 4.

A bulk sample of milk from this farm was found to be infected with tuberculosis. The County Authorities were notified on the 2nd November, 1938. Subsequently a shorthorn cow was slaughtered and proved to be affected with tuberculosis. A period of eleven weeks had elapsed.

Sample 5.

A bulk sample from this farm contained tubercle bacilli. The County Authorities were notified, and a cow suffering from tuberculosis was slaughtered. This is a "tuberculin tested" herd.

Examination of Milk for general cleanliness.

Forty-nine samples of non-graded milk were examined for general cleanliness and all attained a reasonable standard of cleanliness.

Slaughter-houses.

There are four registered and five licensed slaughter-houses and eight wholesale meat stores. To these the Inspectors paid 2341 visits.

Carcases have been inspected at the time of or soon after slaughter with the following results:—

	AND DESCRIPTION OF THE PERSON NAMED IN	NAME OF TAXABLE PARTY.			Charles Inches
	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	300	2 2	2704	5031	7760
Number inspected		2	2652	4620	7710
All diseases except Tubercu-	Contract of				
losis—whole carcases con-				0	10
demned Carcases of which some part				2	10
or organ was condemned	19		5	16	104
Percentage of the number	F				
inspected affected with					200
disease other than Tuber-	The state of the state of the state of				7 2000
culosis	6.46%	-	0.22%	0.39%	1.48%
Tuberculosis only—					
Whole carcases condemned		-(0)	1	7	5
Carcases of which some part or organ was condemned			1	Grand H	. 170
Percentage of the number				1000	. 170
inspected affected with		1000		72000	
Tuberculosis	6.80%	-	0.07%	-	2.27%

Other food premises controlled.

These include 73 fish-shops, 34 of which sell fried fish:—

			Visits
Butchers			1997
Fishmongers and	Poulte	rers	616
Greengrocers			966
Grocers			1140
Ice-cream Vendor	rs	4	168
Hawkers' carts			111
Restaurants and	Cafes		74
Stalls			23
			5095

No food has been formally seized but the amount surrendered and destroyed as diseased or unsound was:

			lbs.
Butchers' meat	(diseased)		5349
,, ,,	(unsound)		2084
Fish			423
Tinned food			4269
Poultry			482
Rabbits			28
Liquid eggs			44
		100-	1000000
			12679

Bakehouses.

There are 88 registered, one being an underground bakehouse. The requirements as to limewashing or painting have been carried out and the premises satisfactorily maintained.

Number of visits by inspectors—246.

Ice-cream premises.

There are 258 shops at which ice-cream is sold and 47 premises on which it is manufactured and retailed.

Prepared meat premises. 175 are registered.

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

The following is a statement relating to the adulterated samples and shows the action taken:—

	Natur	e of	1	Adult	eration		
No.	Sam	ple		or d	eficiency		Remarks
1250	Milk		4%	fit d	eficiency		A warning letter sent.
1259	"		12.00 /				Taken in course of delivery. A warning letter sent.
1253			3%	"		,	Taken in course of delivery.
1262			10%	.,			Court proceedings resul-
1263			8%	"		***	ted in the case being dismissed.
1257			11%	,,			A warning letter sent.
1286	.,		9%	"			Taken in course of delivery. A warning letter sent.
1390	,,		7%)	
1396			5%		in cour	se of	The milk producer was in- structed to alter the milk-
				deli	very).		ing periods.
1397			5%	")	
				appea	l to cow s		
1395			7%				Sample taken from a milk bar pump which was found to be inefficient. After correction a further sample proved to be satis- factory.
1449			2%	10	,,		A warning letter sent.
1543	Malt Vi	inegar		defic	ient in	acetic	court proceedings resulted in a conviction with a fine of £2 and costs 10/6.

ADULTERATED UNOFFICIAL SAMPLES.

52	Milk	 7%	fat	deficiency.
53	,,	14%		.,

NUTRITION.

In this country there have been numerous investigations associated with undernourishment. This is usually most evident in industrial areas, but it has been ascertained that Bournemouth, regarded by most people as a prosperous town, is not immune. The working-classes are tending to increase, but their economic problems do not appear to decrease. Many families find much difficulty in making both ends meet

and are glad to avail themselves of the assistance provided by the Council and certain voluntary organisations. The Education Committee and the Maternity and Child Welfare Committee are supplying milk and other foods on a liberal scale and free meals are to be organised for necessitous school children. The diet will be carefully selected and the menus may be of educational value to parents and children. There is little demand for lectures on the subject of nutrition, but talks are given at the Welfare Centres and advice is offered to individual parents.

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

There has been no epidemic of any notifiable disease and no outbreak of importance. Conditions which are not notifiable, especially Measles, Mumps and Chicken-pox, and to a less extent, Influenza, have been prevalent. There were ten cases of mild Dysentery and doubtless many others not discovered and four of Enteric. As regards the latter, one of the patients was ill at the time he came from an Eastern County to stay at an hotel in Bournemouth. It was not possible to ascertain how the other three were infected.

Seven cases of Poliomyelitis occurred and it is likely that there were more individuals with indefinite signs of the disease who were missed. Six of those notified were under the age of 15, and in two instances only did there appear to have been any contact. This occurred in school, two children in the same class becoming ill almost simultaneously. One of these was very slightly affected, his condition becoming quite normal in a few days; the other had marked signs and symptoms. The school was kept under close observation and absentees were looked up in order to ascertain if one of them had introduced the infection. The search for mild and missed cases in such circumstances is certainly a measure of great importance, but

parents almost invariably, and teachers less frequently, continue to expect the ritual of "disinfection." A glance at the table which indicates the nature of the diseases that are notifiable and the number of cases notified may suggest that infection is under complete control, but this would not be a correct assumption. It should be understood, moreover, that though in respect of several diseases definite means of prevention are known it may not be practicable if desirable to introduce these rapidly when an epidemic has appeared.

As regards Diphtheria, a scheme of Immunisation has been in existence for several years, but it would not be justifiable to state that a large proportion of the children has been protected.

Scarlet Fever is probably less easily controlled; and it should be noted that there has not been an epidemic in Bournemouth for nearly ten years. Medical practitioners are very helpful in drawing attention to suspicious conditions and circumstances and frequent communications are exchanged with Medical Officers of Health of other Local Authorities but the visitor will always be an important factor whatever care is exercised.

In the event of war the social constitution of the County Borough will be greatly modified and from the point of view of infection an influx of refugees from various districts may readily create a serious problem.

In a health resort, where visitors are the main source of income to the residents, removal to hospital of a patient suffering from an infectious disease is frequently demanded. If his condition be serious, it is usually undesirable for him to remain at home as the Bournemouth District Nursing Association will not undertake the nursing of infectious cases and no provision is made by the Council for domiciliary nursing. Accordingly, a variety of conditions has been treated

in the Isolation Hospital, sometimes with difficulty, although the total number of admissions has been relatively small.

The less common diseases, such as Psittacosis or Anthrax, have not been encountered, but one case of Glandular Fever was reported in a hospital.

Undulant Fever is apparently a rare occurrence; in this connection it is to be remembered that nearly 90 per cent. of the milk consumed in the County Borough has been pasteurised.

IMMUNISATION AGAINST DIPHTHERIA.

	Completely immunised during 1938	Immunisation completed during 1938 i.e., commenced 1937	Immunisation commenced 1938
School children	652	44	99
Pre-school children	147	8	24

Included in these figures are those relating to the Victoria Home for Crippled Children, where immunisation has been a routine procedure for several years.

It has been customary to give at intervals of a fortnight three injections of Toxoid-Antitoxin- Flocules, but latterly two injections of Alum Precipitated Toxoid at intervals of five weeks have been substituted.

No special arrangements have been made in regard to the use of measles serum for prophylaxis or attenuation, but fortunately measles as it has been observed locally has not been of a serious type.

NOTIFIABLE DISEASES (OTHER THAN TUBER-CULOSIS) DURING THE YEAR 1938.

Disease.	Total Cases Notified	Total Cases Admitted to Hospital.	Total Deaths
Smallpox			_
Scarlet Fever	121	100 (1*)	_
Diphtheria	32	32 (2*)	4
Enteric Fever			
(including Paraty-			
phoid)	4	3 (2*)	
Puerperal Pyrexia	20	12 (11*)	
Pneumonia	53	7 (5*)	9
Erysipelas	22	11 (1*)	-
Ophthalmia Neonatorum	6	3*	1
Encephalitis Lethargica	1	1*	1
Polio-myelitis	7	5 (2*)	
Dysentery	10	5 (2*) 2 (1*)	1
Cerebro-Spinal Meningitis	1	1*	1

^{*}General Hospital

CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1938.

These figures do not coincide with those of the Registrar-General, which relate to the 52 weeks ended 31st December, 1938.

		NO	O. OF	CASI	ES NO	TIFI	ED	
	S			At A	ges-)	ears		
NOTIFIABLE DISEASE	At all Ages	Under I year	and under _	and under on	and under C	and under C	and under co	65 and upwards
Crysipelas Carlet Fever Carlet Fever (including Para-Typhoid) Cophthalmia Neonatorum Copysentery Carlet Fever (including Para-Typhoid) Cophthalmia Neonatorum Copysentery Carlet Fever Colomyelitis Lethargica Colomyelitis	32 22 121 4 6 53 10 1 20 7	- 1 - 6 4 - - -	3 28 - 9 - - 1	17 2 69 — 10 6 — 6	10 2 11 2 - 2 3 - 4 1	2 7 9 1 12 1 1 16 —	-7 3 1 -7 -	-4 - - 9 - -
	277	11	41	110	35	49	18	13

REPORT OF THE BACTERIOLOGIST.

Examinations made during the year ended 31st December, 1938.

In connection with the Mi	unicipai	Hospitai.		
				39
				3
				1

Pus culture				
In connection with the He	ealth De	partment.		
Swabs for Diphtheria—				
For the Medical Officer of Healt				30
For Fairmile House, Christchurch	1		***	13
For Private Practitioners				31
Sputum for Tuberculosis—				
For the Municipal Dispensary				13
For Fairmile House, Christchurch	1			
For Private Practitioners				17
Faeces cultures—? Typhoid				
Urine cultures—? Typhoid				
				2
Faeces cultures—? T.B				
Blood—Widal reaction				
Swab—? gonococci				
Food (salmon)? Food poisoning	13			
Food (pork pie)? Food poisoning				
For Fairmile House. Faeces-? Ty	phoid			
Samples hair—? Tinea				
Milk samples for Tuberculosis				
Milk samples for general examinat	ion	***		7.2
Ice cream samples				
In connection with the Borough	Engine	er's Depa	rtmer	ıt.
Chemical and bacteriological example	mination	of sew	age	
effluents			-	343

BLIND PERSONS ACT, 1920.

The Bournemouth Blind Aid Society acts as agents for the Bournemouth Borough Council.

The following are extracts from the Annual Report for 1938:—

"Since the publication of the last Report, the Blind Persons Act of 1938 has been passed. By that Act, the age at which a blind person may become qualified to receive a State Pension is lowered from 50 to 40 years; this provision does not benefit the blind as much as would at first sight appear—in the majority of cases, it merely transfers the burden of supporting blind people from one class of public funds to another.

Register.

The number of blind persons on our register on the 30th September, 1938, was 187. There have been 28 new cases during the year, four of whom have been transferred from the area of another Society; 14 have died during the year; four have left the district and have been, as a rule, transferred to the registers of other Societies.

Grants amounting to £2,747 8s. 8d. were made by the County Borough Council to necessitous blind persons under the provisions of the Blind Persons Act, 1920, and to seven approved Homeworkers under the Homeworkers Scheme, for the financial year to 31st March last. The Council's scheme is based on the principle that every blind person shall have a minimum income of 22/6 per week. Consequently, if a blind person's income from all sources is below this sum, assistance is given from funds granted by the Borough Council to bring his or her income up to this minimum.

Before financial assistance is given to blind persons, careful enquiries are made, and help is only granted

to those who are in real need. All cases in receipt of financial assistance are kept under constant review, and grants are made to correspond with any change in the circumstances of the recipient.

Allowances to Necessitous Blind Persons.

The Society granted weekly allowances to the blind out of its voluntary funds during the year ending 31st March last, at a total cost of £219. 0s. 2d. in addition to the grants made by the Borough Council. In addition to these sums, the Committee spent a considerable amount of money during the year on comforts for blind persons.

The Home for Blind Women and Social Centre were opened in October, 1937. The Home provides accommodation for seven residents and each has a separate room which is comfortably furnished, and wired for radio reception. Ample bathroom and lavatory accommodation is conveniently situated. There is also a large sitting room and dining room. A spacious kitchen, fitted with up-to-date improvements, adjoins the dining room. Central heating is installed throughout the building. The Home is so constructed that an extra floor can be added when funds are available.

The Social Centre is a large hall adjoining the Home, and is known as the Rooper Memorial Hall. It is very attractive and has seating accommodation for 200 people; it is complete with stage, dressing rooms, kitchen, cloak rooms and central heating.

CANCER.

It has been mentioned in previous reports that the local facilities for the treatment of this disease need to be added to. An appeal has been made successfully by the Royal Victoria and West Hants Hospital for funds to enable a Cancer Treatment department to be established in the hospital at Boscombe. This purpose has not yet been achieved.

There has been a greater number of deaths from Cancer in 1938 which cannot altogether be accounted for by the increased population.

Deaths from Cancer and Malignant Disease by Age Distribution among Bournemouth inhabitants in 1938:—

1000	A	ll ages	0	1	2	5	15	25	35	45	55	65	75
Male	 	109	_	-	1	_	1	1	8	11	27	31	29
Female		168	-	-	-	-	-	2	12	20	43	52	39

VACCINATION.

	Jan.	Feb.	March.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
No. of cases in Birth lists received	134	136		139	141	142	145	136	132	150	116	110	1626
No. of Certificates of Vaccination													TO NO
received	. 34	31	28	25	41	35	38	32	29	43	29	25	390
No. of Certificates of Vaccination	1		3.3				3	15.			100	W.	111111
received of children born in other								366	773	199			0
districts	. 3	1	1	1	1	-	-	-		1	2	-	9
No. of Certificates of postponement	10	-	3	2	11			0		7	,	-	59
Health of child Condition of house		1	3	2	11	1	4	6	1	/	1	9	-
Prevalence of Infectious					BEEN!								
Disease	100	-	1	2			300		1	20			1
No. of Certificates under Section 1 of		19	13					931	100		1	3.483	
the Vaccination Act, 1907	. 79	75	94	82	106	80	94	86	98	93	73	70	1030
No. of Certificates of Insusceptibility			100										
or of having had Small-pox		1		- 2	1	-	-		-	3	1	_	8
Parents removed out of district	. 33	14	19	7	29	22	14	13			21	22	244
Otherwise not found	. 4	3	1	5	6	5	-	6	3	3	4	4	44
No. of entries in lists sent to Public	1000	30	126	144	100	100	-	1000	1	1000	-	100	1232
Vaccinator	. 30	11	21	12	29	12	20	27	27	17	20	-	226
	1 00	1000	1	1/100	000				Table 1	1000	600	100	

TUBERCULOSIS.

Public Health (Tuberculosis) Regulations, 1930.

Summary of notifications during the period from 1st January, 1938, to 31st December, 1938, in the County Borough of Bournemouth.

	1					FC	R	MA	L	N	OTIFIC	CATIO	NS
Age Periods		Primary notifications											
	to	to	to	to	to	to	to	to	to	to	65 & up- wards	(all	Total notifications
Respiratory				_	-			-	-	-			50
Males Females	-	100	5	Z	2	0	14	10	8	9 7	2 5	54 65	56 65
Non-Respirator	v		-		0	3	13	1-	0	'	3	03	03
Males	2	4	4	2	_	2	2	1	1		_	18	19
Females	-	3	4	1	-		1	2	-		-	11	12

Particulars of new cases of Tuberculosis and of deaths from the disease of Bournemouth residents.

		New	Cases	Deaths.						
	Respi	ratory		on- iratory	Respi	ratory	Non- Respiratory			
	М.	F.	M.	F.	M.	F.	M.	F.		
Under 1 year	-	-	2	_	_	-	2	-		
1-5 years	-	-	4	3	-	_	1	1		
5-15 ,,	7	3	6	5	-2	-	1	1		
15—25	6	22	3	-	1	5	-	1		
25-35 ,,	22	20	2	4	8	2	-	1		
35—45 ,,	13	14	1	2	7	4	1	1		
45 – 55	11	7	1	_	11	1	1	-		
55-65	11	7	_	-	6	3	1	1		
65 and upwards	3	5	_	2	1	4	-	1		
Totals	73	78	19	16	34	19	7	7		

Fifty-three deaths from Tuberculosis of the Lungs give a death-rate of .43 per 1,000. In the previous year the deaths amounted to 76 and the death-rate was .62.

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

The non-notified deaths accordingly numbered 3 or 4.47 per cent. of the total of 67 deaths from Tuberculosis.

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

		New	cases	Dea	ths
			Non-		Non-
		Respiratory	Respiratory	Respiratory	Respiratory
1936	 	145	27	67	9
1937	 	109	21	76	14
1938	 	151	35	53	14

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

LOCAT	ION.		Male.	Female.	Total
Disease of Bones and J	oints		 7	4	11
Disease of Genito-Urin	ary Syste	em	 2	_	2
Abdominal Disease			 -	1	1
Disease of Glands			 4	4	8
Disease of other parts			 5	2	7
To	tals		 18	11	29

TUBERCULOSIS DISPENSARY.

The Dispensary was open on 98 occasions, Monday afternoon being available for women and children, Wednesday afternoon for men. 395 patients and contacts recorded 925 attendances as follows, an average of 9.44 per session:—

Adults, male	 	438
Adults, female	 	410
Children, male	 	50
Children, female		27
		925
		323

In 1937, 345 persons recorded 832 attendances.

It is desirable to extend the work of the Dispensary, but it will be difficult to do so until new premises have been provided and some modifications effected in the staffing. Undoubtedly, the institution would command greater respect and appeal to a larger number of individuals if all the facilities usually recognised as essential in an up-to-date scheme were available. In addition to the fact that the building is insignificant and cramped, there is no X-ray apparatus which is indispensable if accurate results are to be obtained. It is true that arrangements have been made with Boscombe Hospital for X-ray photographs to be taken of patients referred from the Dispensary, but drawbacks will be apparent. In addition to the special visit of the patient to the hospital, there is the important fact that the Tuberculosis Officer is not present when the radiographer endeavours to interpret his written request to demonstrate the presence and extent or the absence of a lesion.

Owing to the inadequate accommodation at the Dispensary, it is not feasible to induce Artificial Pneumothorax nor to undertake refills. If a patient is in need of these, he is sent to the Medica! Superintendent of the Royal National Sanatorium, who willingly co-operates.

An attempt is being made to overcome these difficulties and deficiencies by the production of a Health Centre in a locality readily accessible from all parts of the Borough. A Tuberculosis Dispensary and

Orthopaedic Clinic will be included and for the common use of these, an X-ray apparatus.

Unfortunately, delay has occurred in the preparation of the plans that are required before adaptations and additions are made to the selected building, a disused elementary school.

SANATORIA AND OTHER INSTITUTIONS.

Although approximately two years have elapsed since the first municipal patients were admitted to Linford Sanatorium, it is not possible to record the completion nor even the commencement of the building operations associated with a new institution.

It is to be regretted that some criticism has arisen in connection with the cost of maintenance of Tuberculosis patients in general and more particularly of those at Linford.

Once more an increased number of patients were admitted to various institutions and observers unacquainted with all the circumstances are apt to wonder why this should occur.

One factor is that patients formerly treated in Poor Law Institutions are now passed to the Tuberculosis Officer if they have ever been notified as suffering from Tuberculosis. Inasmuch as Bournemouth calls up a mental picture of healthy pleasing surroundings associated with hosts of visitors, it attracts also homeless persons, some of whom are unfit, but capable of performing light or seasonal work. Such an individual may subsequently demand medical treatment and on several occasions "tramps" just arrived in the district have required admission immediately to a Sanatorium or hospital. It is difficult to estimate the number of these "floating" patients, who will require accom-

modation in a particular year, as much depends obviously on the industrial situation throughout the country.

As regards Linford Sanatorium itself, it is not easy to imagine how this, as now constituted, can be administered at a low cost. Small institutions are notoriously expensive to maintain and the one under consideration is unusually so as it consists of several buildings possibly suitable for a private sanatorium, but not for the purposes of a local authority.

Undoubtedly the average cost per patient will be much reduced when the new Sanatorium has been completed and is working to full or nearly full capacity.

Pending ideal arrangements, as the existing Sanatorium is constantly full, it has been necessary to send patients to numerous institutions and to perform sundry manipulations to create vacant beds in those situated locally.

Public Health (Prevention of Tuberculosis)
Regulations, 1925—relating to Persons suffering
from Tuberculosis in the Milk Trade.

No action has been required.

SECTION 62 OF THE PUBLIC HEALTH ACT, 1925, AND SECTION 172 OF THE PUBLIC HEALTH ACT, 1936—
(RELATING TO THE COMPULSORY REMOVAL TO HOSPITAL OF PERSONS SUFFERING FROM TUBERCULOSIS).

No action has been taken.

PATIENTS WHO RECEIVED TREATMENT DURING 1938.

THERETS WHO RECEIVED TREATMENT	1	
	umber of	Number o Patient
Barrowmore Hall, near Chester	Patients 1	Days 194
Brompton Hall, London	2	107
a :: : :	ĩ	177
71 77 5		3709
King George's Sanatorium, Bramshott		437
T. 6 1 d	97	13271
	8	57
Isolation Hospital	6	1735
Papworth Hall, Cambridge	2	591
Preston Hall, Aylesford	36	4386
"Rizwan," Broadstone	VIL	
Royal National Hospital, Ventnor	1	54
Royal National Sanatorium, Bourne-		1010
mouth	12	1010
Royal Sea-Bathing Hospital, Margate	11	1933
Royal Victoria and West Hants	10	400
Hospital, Bournemouth	13	463
CHILDREN.		
Children's Hospital, Harpenden	21	3829
Cornelia Hospital, Poole	1	192
Linford Sanatorium, Ringwood	4	860
Lord Mayor Treloar Cripples Hospital,		
Alton	9	1272
Royal Victoria and West Hants		
Hospital, Bournemouth	6	138
	250	34415
	100	

MIDWIFERY AND MATERNITY SERVICES.

Twenty-seven midwives notified their intention to practice, five of these being employed by the Corporation. At first, the latter were not fully occupied, but the demand for their services is steadily increasing and it is likely that another midwife will need to be appointed shortly.

During the year the number of confinements attended by the five municipal midwives was:

As	Midwives		 196
As	Maternity	Nurses	 58
			254

There is only one midwife in the County Borough who is also engaged as a district nurse and it is hoped that she will soon cease to work in a dual capacity.

It will be observed that there are now fewer midwives practising, the number having decreased by 17 since 1937.

One hundred and eighty-four 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	 1 5 5 13	Premature Birth 2 Condition of Baby 19 Discharge from Eyes 11 Malformation 8 Stillbirth 1
LABOUR. Breech Cases Abnormal Presentation Delay in Labour Rupture of Perineum Retention of Placenta Haemorrhage Other reasons (Mother) Uterine Inertia	29 52 4 4 2 1	OTHER NOTIFICATIONS RECEIVED FROM MIDWIVES. Substitution of artificial for breast feeding 21 Still birth 5 Possible source of infection 7 Death of child 5
Lying-in Period (Moter Rise of Temperature Other reasons Sub-Involution of Uterus	 10	Having laid out a dead body 2 40 -

ANTE-NATAL AND POST-NATAL CLINICS.

There is a combined session at "Avebury" each week. 50 sessions were held, 308 women being responsible for 493 attendances. The municipal midwives take an active part in persuading women to attend the Clinic.

Obstetric Specialist.

General practitioners required the services of one of the Obstetric Specialists on four occasions.

CONTRACEPTIVE CLINIC.

This continues to serve a very useful purpose, but is probably not patronised as much as it should be. It is necessary, however, that the women who attend should have at least average intelligence and be willing to carry out implicitly the directions given at the Clinic.

Forty-six women attended during the year and were given advice for the following reasons:—

Nephritis					2
Tuberculosis					4
Heart disease					2
					1
(This woman	has five	children	1)		
Psychological cau					4
Husband chronic	invalid				3
Advancing age					3
(Women over	40 with	i big fan	nilies)		
Too rapid pregna	ncies				8
Ill health, e.g., A	naemia.	Nervous	Exhaust	ion	19

MATERNITY AND NURSING HOMES.

There are only a few maternity homes as Boscombe Hospital provides ample facilities for paying patients and for those who are helped by the Council. The number of nursing homes tends to decrease. These vary greatly in size and scope. Some are capacious, well-equipped institutions, capable of providing efficient treatment for almost any disease or complaint. Others are conducted in a humble manner and are intended for senile or infirm individuals who require a little extra care and attention. There has been little fault

to find with any nursing home and warnings have sufficed to produce adjustments required.

	The following figures relate to 1938 :	
(1)	Number of applications for registration	6
(2)	Number of Homes registered	6
(3)	Number of orders made refusing or can- celling registration	Nil
(4)	Number of appeals made against such orders	Nil
(5)	Number of cases in which such orders have been:— (a) Confirmed on appeal, and (b) Disallowed	Nil Nil
(6)	Number of applications for exemption from registration	5
(7)	(c) Refused	5 Nil Nil
	Total number of Homes registered	64

MATERNAL MORTALITY.

Various facilities are available which are intended to ensure a safe confinement and satisfactory recovery in every case and it does not appear that any modifications in or additions to the Council's Scheme are needed.

Nevertheless Circular 1705 of the Ministry relating to Maternal Mortality received the careful consideration of the Maternity Committee and consultations were held with representatives of the medical profession. The Ministry hopes to establish in every area a panel of medical practitioners who will be available in all cases in which a midwife is required under the rules

of the Central Midwives Board to call in a registered medical practitioner.

It is suggested that each authority shall set up an advisory Committee which will make recommendations for the purpose of securing and maintaining a high standard of obstetric practice on the part of the practitioners included on the list.

An appreciable number of doctors wished to be included on the panel and it seemed that the size of this, if established, would defeat the purpose of the Ministry. In consequence, the matter has been left in abeyance.

There were two deaths associated with pregnancy or childbirth, the cause of death being given as follows:

(1) Age 25.

1a Post Partum Haemorrhage.

b Retained Placenta.

2 Toxaemia of Pregnancy.

(2) Age 32.

1a General Peritonitis.

b Acute Salpingitis causing abortion.

The Maternal Mortality rate is therefore 1.41 per 1000 total births (i.e., live and still) as compared with 2.97 for England and Wales. This is a remarkably low figure, even for Bournemouth, and apparently creates a record.

The Maternal Mortality rate for the County Borough in 1937 was 2.8 and in 1936 4.8.

BIRTH RATE.

The birth rate in Bournemouth for the past ten years (calculated on the Registrar-General's estimate of the population) is shewn herewith:—

1929 1930 1931 1932 1933 1934 1935 1936 1937 1938 11.2 11.14 10.67 10.5 9.74 11.11 11.05 11.6 11.16 11.17

INSTITUTIONAL PROVISION FOR MOTHERS AND CHILDREN.

By arrangement with the Royal Victoria and West Hants Hospital, provision has been made for the reception of maternity cases in the Ashlev Road branch. These are admitted not only from their own homes but also from Fairmile Institution and certain voluntary homes. The cost of maintenance and treatment which is mainly borne by the Council has been appreciable, so attempts have been made to assist women to be confined at home whenever there is reasonable accommodation. The appointment of municipal midwives has helped in this direction, so that only 195 beds were occupied during the year as compared with 251 in 1937. The provision of Home-helps would probably reduce still more the number of applications for hospital beds, but in a health resort, it is especially difficult to find and keep women of the right type.

"Ailing" infants are also sent into Boscombe Hospital, but only one was admitted to this institution. Four others were received, however, by the Victoria Cripples' Home, Alumhurst Road.

INFANTILE MORTALITY.

Sixty-one children under one year of age have died, producing an infant mortality rate of 44.7, still a low figure. From the table it will be seen that apart from congenital conditions Pneumonia has been the most common cause of death. The corresponding figure for England and Wales is 53.

Rate of Infantile Mortality in Bournemouth for the past ten years:—

1929 1930 1931 1932 1933 1934 1935 1936 1938 1937 46.5 46.2 62.6 54.7 53.7 53.0 39.7 39.4 45.8 44.7

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		-	_			-	1	_	_	_
Chicken-pox		-	-	-	-	-	-	-	-	-
Measles		-	-	-	-	-	-	-	-	-
Scarlet Fever		-	-	-		-	-	-	-	-
Whooping Cough		-	-	-	-	-	-	-	-	-
Diphtheria and Croup		-	-	-			-	-	-	-
Erysipelas	-	-	-	-	770		1	1	-	1
Tuberculous		1 20	(200)		Ei		9	2	100	2
Meningitis		600					1030	-		-
Tuberculosis	1				1	_	1		_	_
Other Tuberculous		100	1	1900		400		7733		
Diseases		-	_	_	_	-		_	_	-
Meningitis (not										1
Tuberculous)		-	_	-	_	-	_	-	-	_
Convulsions		-	-	-		-	-	-	-	-
Laryngitis		-	-	-	-	-	-	-	-	-
Bronchitis		-	-	-	-	-	-	-	-	-
Pneumonia (all forms)	1	1	-	-	2	1	3	3	2	11
Diarrhoea		-	-	-	-	200	-	-	-	-
Enteritis		-	-	-	-		-	2	1	2
Gastritis		-	-		-				1	1
Syphilis		-	-			120		100		
Rickets	1 1 1 1 1 1 1 1	-	-		503		50	100		
Suffocation, overlying Injury at birth			1000			_	1	1		1
Atelectasis	0				3	1	-	1		4
Congenital Malforma-										
tions	. 5	3	-	4	12	4	-	4	-	16
Premature Birth	1 1 1	-	_	-	14	-	-	-	-	14
Atrophy, Debility and		1		7 7	1000	1		144	113	
Marasmus	. 1	-	_	-	1	1	-	1	-	3
Other Causes	. 3	1-	1	-	4	2	-	1	-	7
TOTALS	. 27	1 4	1	4	36	9	4	9	3	61
Net Births Legitimate in the year Illegitimate		258 106			the y			gitim		53 8

PROVISION OF MILK TO MOTHERS AND CHILDREN.

Once more there has been an increase in the amount of milk granted to mothers and infants. This is due partly to the increased attendances at the

Centres and also to the alteration of the scale, which is more favourable than formerly.

The cost was £3,251, as compared with £2,172 in 1937, and £1,476 in 1936. The total number of families supplied was 907, the daily average being 424. These figures apply to ordinary milk only, as in addition 6019 lbs. of dried milk were given at a cost of £326. 8,101 lbs. were sold at cost price.

CHILD LIFE PROTECTION.

There continue to be numerous minor offences, chiefly in connection with the notices that should be submitted by the Foster-Mothers. The efficient supervision of the conduct of the latter calls for much patience and tact on the part of the visitor who must be able to make an accurate estimate of character. It is questionable if the arrangements made in Bournemouth or elsewhere are really satisfactory.

Most women are prompted to take care of children because they wish to make money. Some of them seem to be successful, but others fail to obtain adequate or regular payments. A strain is then put on their good nature and unless they have an innate affection for children, those in their care are hable to suffer.

Many parents find difficulty in finding fosterparents and it would appear that the provision of a municipal institution dissociated from Public Assistance, is a remedy worthy of consideration.

Number of registered foster-mothers at 1st	
January, 1938	98
Number of registered foster-mothers at 31st	
December, 1938	81
Number of foster-children with the above at	
1st January, 1938	164

Number of foster-children with the above 31st December, 1938		134
Number of foster-children who have died dur the year	ring	1
Number of Inspections by Health Visitors		1062
INFANT CARE TABLE I.		
Total live births registered, including 32 tra- ferred to Bournemouth from other distr- and excluding 298 transferred from Bour	icts	
mouth		4
Total still-births registered, excluding 15 tra- ferred from Bournemouth and includin transferred to Bournemouth from ot	g 5	
districts		48
Live births notified		
Still births notified		57
INFANT CARE TABLE II.		
Visits by the Health Visitors :		
Mothers and Infants:		
First visits		1412
Re-visits		4858
Re-visits to children over one year of	age	7930
Expectant Mothers:		191
First visits Re-visits		421 388
re visits		
Tarresson Clares (Depart TIT		15009
INFANT CARE TABLE III.	130	
Work of the Eleven Centres, Year 19	30.	
No.of Clinic Sessions held Methers Rehice Other Talks Doctors Methers Rehice Other Talks Doctors Methers Rehice Rehice Other Talks Doctors Methers Rehice Rehi		Other
held Mothers Babies Children Talks given. Doctors Mothers Babies	abies	Children
521 32414 17924 20029 306 432 1747 3	717	3333

INFANT CARE TABLE IV.

Comparison of Total Attendances.

YEAR	A	ATTENDANCES.	ES.			
I Bak.	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		
1937	32481	18634	18224	69339		
1938	32414	17924	20029	70367		

OPHTHALMIA NEONATORUM.

	Cases		Vicion		Tak-1		D
Notified	Treated		Vision Unim-	Vision Impaired	Total Blind-	Deaths	Removed from
Notified	At Home	In Hosp.	paired	Impaired	ness		District
6	3	3	4	Nil	Nil	1	1

DENTAL TREATMENT.

Provision is made for expectant and nursing mothers and to a limited extent for children under school age. Pregnant women are encouraged to have their teeth put in order and if after extractions dentures are needed they are assisted to obtain these. Nursing mothers have similar facilities.

The arrangements made for children attending the Welfare Centres are not adequate as normally the dentist devotes one session weekly to Maternity and Infant Welfare work.

The restricted service is mainly due to lack of suitable premises but it is anticipated that when these have been provided there will be an extension of the scheme, including an increase of staff and a closer relationship with the School Medical Service.

ORTHOPAEDIC TREATMENT.

Children have been sent by the Education and Maternity and Child Welfare Committees to various institutions, some of the latter being far from Bournemouth. Special arrangements have also been required for non-pulmonary cases of Tuberculosis. A scheme centred on Boscombe Hospital was formulated but failed to mature chiefly on account of the cost. An alternative was found in connection with Lord Mayor Treloar's Hospital at Alton, which will accept Inpatients up to the age of 16 and provide a surgeon for a clinic to be held in Bournemouth. A Masseuse has also been appointed and it seems probable that the scheme will be very popular and comprehensive.

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, 1938.

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

Suffering from Syphilis	Males 23	Females 9	Total 32
Suffering from Gonorrhoea Not suffering from Venereal	62	35	97
Disease	59	57	116
Soft Sore	1	_	1
			246
Number of patients discharged patient clinic after completion of		from the	out-
Treatment for Syphilis		6	11
Treatment for Gonorrhoea		31	77
			88
Number of patients who	ceased	to attend	the
out-patient clinic without comp who were suffering from :			
Syphilis	22	12	34
Gonorrhoea	15	15	30
			64
Total attendances (excluding out-patient clinic for all persons	_		the
Suffering from Syphillis1			1800
Suffering from Gonorrhoea		523	1496
Not found to be suffering from	100	140	210
Venereal Diseases Soft Sore		148	310
Soft Sofe			
			3612
Aggregate number of "in-pa ment given to persons:—	atient	days" of t	reat-
Suffering from Syphilis	1	81	81
Suffering from Gonorrhoea		426	590
Not found to be suffering from	91	99	44
Venereal Diseases	21	23	44
			715

Number of persons treated with Salvarsan substitute 57
Number of doses of Salvarsan substitute used
in the Treatment Centre : Approved 557
Approved 557 Not approved 218
—— 775
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 1182
From persons attended by private medical practitioners:—
For detection of Spirochetes — For detection of Gonococci 8
Number of specimens which were sent for examination to an independent laboratory for Wassermann Reaction:—
to an independent laboratory for Wassermann
to an independent laboratory for Wassermann Reaction:—- From Treatment Centre 630

Report of the Meteorologist.

WEATHER OF 1938.

In Bournemouth the outstanding features of the year were the exceptionally low rainfall, the drought of April, the severe gales of June, and the mildness of November, the year ending with an unusually wintry touch in the snowfall at Christmas. The sunshine for the year totalled 1,677.6 hours, below the 40 years average of 1,810.4 hours, but 81.7 hours above 1937 and 148.6 hours above 1936. The sunniest month was June 225.0 hours, with April a good second, 221.8 hours. Sunshine was recorded on 323 days during the year.

The rainfall for the year was very low, the total being 24.56 inches, nearly eight inches below the 40 years average of 32.19 inches. With the exception of January and November, every month was below normal, the month of April being completely rainless, a drought of 36 days being broken on May 1st, the longest period without rain since records were taken. The greatest amount of rain was recorded in 1915, 43.23 inches and the lowest in 1921, 17.53 inches. The wettest month was November, 5.07 inches, and the driest, April nil. The largest amount registered within the period of 24 hours was 1.15 in. on November 25th.

The mean temperature for the year was slightly above the average, the figure being 51.6 degrees F. against the 40 years average of 50 degrees F., the month of November being exceptionally mild with a mean temperature of 50.3, nearly 7 degrees above the average for this month. August was the warmest month with a mean temperature of 63.1 degrees F. The maximum temperature of the year was 86.2 degrees F. recorded on August 3rd, and the minimum temperature was 20 degrees F. recorded on December 20th and 21st.

Oct.	52.0	52.8	64.0	-	36.0	25	11.4	83
Sept.	58.0	58.7	9.62	12	40.0	16	15.8	74
Aug.	61.5	63.1	86.2	3	43.4	31	17.0	79
Inly	61.7	60.3	76.0	31	43.6	-	13.9	77
Inne	.58.0	59.2	79.2	14	44.0	==	15.5	70
Mav	52.1	51.7	73.2	22	30.0	8	15.8	71
April	47.8	47.3	65.8	7	29.0	11	20.2	89
Mar.	45.0	48.6	63.8	92	27.8	9	16.5	75
Feb	41.4	41.8	54.4	12	0 66	15	101	35
Lan	41.9	43.9	53.6	19	30 0	4	06	
		:			:	:	:	%
	On or or or or or or	ogeans average	Declute movimum	Date of maximum	Jacob maximum	Date of minimum	foon round	Iumidity (saturation) 100%
	Feb Mar April May June July Aug. Sept. Oct.	Jan. Feb. Mar. April May June July Aug. Sept. Oct. 41.9 41.4 45.0 47.8 52.1 58.0 61.7 61.5 58.0 52.0	Jan. Feb. Mar. April May June July Aug. Sept. Oct. 41.2 41.4 45.0 47.8 52.1 58.0 61.7 61.5 58.0 52.0 43.9 41.8 48.6 47.3 51.7 59.2 60.3 63.1 58.7 52.8	Feb. Mar. April May June July Aug. Sept. Oct. 41.4 45.0 47.8 52.1 58.0 61.7 61.5 58.0 52.0 41.8 48.6 47.3 51.7 59.2 60.3 63.1 58.7 52.8 54.4 63.8 65.8 73.2 79.2 76.0 86.2 79.6 64.0	Jan. Feb. Mar. April May June July Aug. Sept. Oct. 41.2 41.4 45.0 47.8 52.1 58.0 61.7 61.5 58.0 52.0 52.0 41.8 48.6 47.3 51.7 59.2 60.3 63.1 58.7 52.8 m 53.6 54.4 63.8 65.8 73.2 79.2 76.0 86.2 79.6 64.0 1.2 1.2 1.2 1.2 1.2 1.3 1.2 1.2 1.3 1.2 1.3 1.2 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3	Jan. Feb. Mar. April May June July Aug. Sept. Oct. 41.2 41.4 45.0 47.8 52.1 58.0 61.5 58.0 52.0 43.9 41.8 48.6 47.3 51.7 59.2 60.3 63.1 58.7 52.8 53.6 54.4 63.8 65.8 73.2 79.2 76.0 86.2 79.6 64.0 12 12 22 7 22 14 31 3 12 1 30.0 29.0 27.8 29.0 30.0 44.0 43.6 43.4 40.0 36.0	verage Jan. Feb. Mar. April May June July Aug. Sept. Oct. naximum 41.2 41.4 45.0 47.8 52.1 58.0 61.7 61.5 58.0 52.0 naximum 53.6 54.4 63.8 65.8 73.2 79.2 76.0 86.2 79.6 64.0 naximum 12 12 22 7 22 14 31 3 12 1 ninimum 30.0 29.0 27.8 29.0 30.0 44.0 43.6 43.4 40.0 36.0 ninimum 4 15 6 11 8 11 1 31 16 25	40 years average Jan. Feb. Mar. April May June July Aug. Sept. Oct. Nov. 40 years average 41.2 41.4 45.0 47.8 52.1 58.0 61.5 58.0 52.0 43.7 1938 43.9 41.8 48.6 47.3 51.7 59.2 60.3 63.1 58.7 52.0 43.7 Absolute maximum 12 12 22 7 22 14 31 3 12 1 5 Absolute minimum 30.0 29.0 27.8 29.0 30.0 44.0 43.4 40.0 36.0 31.6 Absolute minimum 30.0 29.0 27.8 29.0 30.0 44.0 43.4 40.0 36.0 31.6 Absolute minimum 4 15 6 11 8 11 1 36.0 25 27 Absolute minimum 4 16.5 20.2 15.8

Dec. 43.0 43.0 411.2 55.2 12 20.0 8.4 95

Average mean temperature 40 years-50.4. 1938-51.6.

TABLE SHOWING AMOUNT OF BRIGHT SUNSHINE (IN HOURS AND TENTHS).

Dec. 66.2 53.2 1.7 1.7 6.5 24 24
Nov. 90.1 53.5 1.8 6.2 29 23
Oct. 138.3 124.5 4.0 9.0 21 27
Sept. 192.6 154.0 5.1 11.4 10 29 29 595.9.
Aug. 204.8 192.2 6.2 12.8 6 28 28
July 229.8 161.3 161.3 12.3 13 31
June 237.0 225.0 7.5 14.9 17 31
May 236.5 171.1 5.5 13.7 8 29 1938
April 160.5 221.8 221.8 7.4 12.8 30 17 1,810.4.
Mar. 126.0 179.8 5.8 10.4 13-14-19 30
Feb. 85.3 85.6 3.0 8.8 11 19 119 119
Jan. 63.8 55.6 1.8 27 22 22 22 22 22 22 22 22
1. one o
40 years average 1938 Average per day Highest amount in one day Date Days with sunshine Tota
age peest am
40 y 1938 Aver High Date Days

TABLE SHOWING AMOUNT OF RAINFALL IN INCHES.

SUNSHINE, RAINFALL AND MEAN TEMPERATURES.

	Dec. 66.2 53.2	
	Nov. 90.1 53.5	
	Oct. 138.3 124.5	3 hours.
	Sept. 192.6 154.0	-1,677.0
	Aug. 204.8 192.2	1938
	July 229.8 161.3	hours.
Tenths).	June 237.0 225.0	1,595.9
s and	May 236.5 171.1	1937
E (Hour	April 160.5 221.8	iours.
SUNSHIN	Mar. 126.0 179.8	1,810.4 h
55	Feb. 85.3 85.6	200 100
	Jan. 63.8 55.6	40 years' average-
		40 ye
	::	
	11	
	40 years 1938	

						KA	KAINFALL	(inches).							
11	!!		11	3.06	2.57	2.85	2.00 Nil	1.70	1.27	2.26	2.70	2.30	3.91	3.45	3.85
		40	vears'	s' avera	average-32.19in.	19in.	1937	40.98in.	1938	18-24.56in	6in.				

						MEAN		TEMPERATURE	E.						
40 years 1938	::	-11	11	41.2	41.4	45.0	47.8	52.1	58.0	61.7	61.5	58.0	52.0	43.7	43.
				4(years'	average	-50.4.	1937	-51.0.	1938	-51.6.				

43.5 39.9 49.4 39.5	
50.0	
57.2 60.7	
61.7	
62.7	
56.1 59.4 53.5 62.0	
56.1	
47.3	
5 41.9	
39.5	
38.6	
::	
!!	
::	
50 years 1938	

Report of the Public Analyst

FOR THE YEAR ENDED 31ST DECEMBER, 1938.

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 the 31st December, 1938.

The total number of samples submitted under the Sale of Food and Drugs (Adulteration) Act, 1928, was 604 samples, of which 404 were official samples and 200 were unofficial samples taken informally by your Food and Drug Inspectors.

The number of adulterated samples was 15, representing a percentage adulteration of 2.4 per cent.

This figure shows an increase when compared with the figure for the previous year, but is well below the figure for the whole of the country.

Table I.

Summary of Report for 1938. Four hundred and four official samples.

Nature of Sample.	Examined	Genuine	Harmful Colouring Matter	Containing	Adulterated	Percentage of Samples Adulterated
Bacon	 9	9	-	-		
Beer	 12	12	-	-	-	-
Butter	 17	17		-	-	-
Candied Peel	 4	4	-		-	-
Coffee	 10	10	-	-	00-00	100
Cream	 12	12	-	-	-	-
Dripping	 9	9	-	-	-	-
Flour, self-raising	 6	6	-	-	-	-
Fruit, dried	 19	19	-	-	S-1-1	1000
Lard	 8	8	-	-	-	-
Margarine	 12	12		-	-	-
Milk	 230	218	-	7-110	12	5.2
Rice	 6	6	-	-	-	-
Sausage	 12	12	-	A + 00	-	-
Sausage, preserved	 4	4	-	-	-	-
Sponge cake	 10	10	-		-	-
Stout	 6	6	-	-11-00	-	-
Vinegar	 2	2	1-7	V + 350	-	-
Vinegar, Malt	 16	15	-	-	1	6.2
	-		-	-		
	404	391	-	-	13	3.2
	-		-		-	

TABLE II.

Summary of Report for 1938. Two hundred unofficial samples:—

Nature of Sample		Examined	Genuine	Harmful Colouring Matter	Containing	Adulterated	Percentage of Sample Adulterated
Almonds, ground		4	4		- 1	-	4 4 19
Beans, tinned		2 4 2	2	-	1 - 16	4	-
Beef Suet, shredded		4	4	-	-	-	-
Blanc Mange powder			2	-	-		-
Brandy Bread		6	6	47.75 - 13.	-	-	-
Bristlings		4	4			P VAT	
Cheese		4	4	STATE	3.3		
Cheese, wrapped		2					
Condensed milk		2 2	2 2				
Cooked meats		10	10		200	-	
Custard powder		2		-	12/6	7 12 00	
Egg substitute		2	2	-	-	-	-
Flavourings		8	8	10 / -	-	-	-
Flour		2	2	- 11	-	-	-
Fruit drinks		6 5 2 2	2 2 8 2 6 5 2 2	-		-	
Fruit, tinned Gin	***	0	5		7		
Gravy powder		5	2			T. T.	
Ice cream		12	12				3
Jam		11	11				
Jelly		6	6		1	-	
Lemon curd		3	. 3		-	-	-
Lemonade powder		4	4		-	- 1	- 1992
Marmalade		1	1	-	7 - 1	-	-
Milk		7	5	-	-	2	28.5
Mincemeat		7 8 2 3	8		-	-	-
Mustard, compound		2	2 3	7	-	-	-
Peas, tinned		2	2	-		-	-
Pepper, white Pickles, mixed		4	4		1275	-	
Pickled onions		2	2				
Sardines		1	ī				DR. DO
Sauce		4	4		-	_	
Sausage		1	1		-		1
Sausage, preserved		1	1	-	-	-	10/5-
Silds		2	$\frac{2}{2}$		-	-	- 1
Soup powder		2	2	7	-	-	-
Spinach, tinned		6	6		-	-	-
Tea Whisky		4.	4		5	-	-
Bicarbonate of soda		8 3	8 3			VA (-	-
Boracic ointment		2	2				
Compound liquorice	•••	-					
powder		2	2		_	_	37 345 63
Epsom salts		2	2 4	2	-	-	2
Eucalyptus oil		4		Manual - 17	-		-
Friars Balsam		5	5	-	-	-	1
Glaubers salts		2	2	-	-	-	-
Glycerine		2 2 2	5 2 2 2	-	-	-	-
Gregory powder		1	2	130 M 70 00	-	-	-
Magnesia tablete		1	1	CONTRACTOR OF THE PARTY OF THE	500	-	-
Magnesia tablets Olive oil		2	2	NO STATE		-	-
Sulphur tablets	***	2	2				
Tartaric acid		2	2 2 2	STATE STATE			
Zinc ointment		4	4	- 1	15-16	16	- 3 3 3 5
The Party of the P		-		-	-	-	
		200	198	-	-	2	1.0

TABLE III.

Adulterated official samples:

Sample Adulteration No. 1250 Milk 4% fat deficient 1253 Milk 3% fat deficient	
1250 Milk 4% fat deficient	
70	
1253 Milk 3% fat deficient	
1257 Milk 11% fat deficient	
1259 Milk 6% fat deficient	
1262 Milk 10% fat deficient	
1263 Milk 8% fat deficient	
1286 Milk 9% fat deficient	
1390 Milk 7% fat deficient	
1395 Milk 7% fat deficient	
1396 Milk 5% fat deficient	
1397 Milk 5% fat deficient	
1449 Milk 2% fat deficient	
1543 Vinegar, Malt 66% deficient in acetic ac	d

TABLE IV.

Adulterated unofficial samples :--

NO.					
52	Milk	 	7%	fat	deficient
53	Milk	 			deficient

MILK.

Excluding the 12 adulterated samples the remaining official samples have yielded the average proportions of fatty and non-fatty solids.

		No. of Samples	Fat	Non-fatty solids
1st quarte	er	45	3.53 per cent.	8.91 per cent.
2nd "		45	3.38 ,,	8.88 ,,
3rd "		52	3.50 ,,	8.81 ,,
4th ,,		54	3.72 ,,	8.86 ,,
Whole 12		196	3.53 ,,	8.86 ,,

The average proportion of both fat and non-fatty solids shown above is good, and compares favourably with the figures given for the previous year.

Remarks.

There has been a slight increase in the percentage of adulterated official samples this year when compared with the figure given in my last annual report, but the figure for the unofficial samples shows a satisfactory decrease.

Sixty-three official and eighty-eight unofficial samples other than milk were examined for the addition of preservatives or harmful colouring matter under the Public Health (Preservatives, etc., in Food) Regulations. In all cases where preservative was found it was below the legal limit, and all the samples examined were free from the addition of harmful colouring matter.

Twelve samples of ice cream were examined during the year, and the fat content varied from 2.65 per cent. to 14.94 per cent., a very wide variation. The Ice Cream Manufacturers' Association is attempting to have definite standards fixed for ice cream, a first quality standard "A" containing over 8 per cent. of fat, and standard "B" containing less than the above figure; uniformity in this matter would certainly raise the general level of ice creams.

All the drugs examined during the year were found to be genuine and complied with the requirements of the British Pharmacopoeia.

The general quality of the Food and Drugs submitted continues to be of a high standard.

I am.

Mr. Mayor, Ladies and Gentlemen, Your obedient servant,

R. PENDRILL CHARLES,

M.D., F.I.C.





County Borough of Bournemouth

EDUCATION COMMITTEE

ANNUAL REPORT

OF THE

School Medical Officer

Year 1938



To the Chairman and Members of the Education Committee.

I beg to submit my annual report for 1938 from which it will be seen that once more a large amount of routine work has been carried out, together with a number of special investigations, These relate, *inter alia*, to children regarded as undernourished. those described as delicate and others with some defect of speech.

These special examinations of children, whether considered in groups or as individuals, demand much patience and expert knowledge, and sometimes seem to be fruitless. As the school population is small in proportion to the total number of inhabitants and also to the area of the County Borough certain facilities are lacking which are found in other districts so that it is occasionally difficult to make a recommendation as to the disposal of a child.

Reference has frequently been made to Open Air School accommodation and to the class for retarded children. More recently consideration has been given to a Rheumatism Clinic, a Child Guidance Clinic and to a class for children with speech defects. A gratifying achievement has been the initiation during the year of a Municipal Orthopaedic Clinic with arrangements for remedial exercises. On the other hand, it is to be regretted that certain essential premises anticipated long ago are non-existent.

New Health Centres are badly needed and the delay in erecting the building at East Howe is particularly unfortunate. A centre in this locality is necessary for various reasons, but chiefly for the use of an additional dentist to relieve the solitary officer who is so embarrassed in his efforts.

I trust that there will be a speeding up in 1939 and wish to thank the Committee for the support that has been forthcoming on numerous occasions.

I have the honour to be,

Your obedient Servant,

H. GORDON SMITH.

SCHOOL MEDICAL SERVICE STAFF on 31st December, 1938.

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: C. R. A. AIREY, L.D.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
E. V. Burt	G. Hammond
P. M. CAREY	F. E. A. RICHARDSON
M. G. CORNISH	E. TURNER
A M Coren	

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

Clerks:

F. J. GOODE, J. W. PEAKE, W. G. CLARKSON

Dental Attendant:

E. M. SILLIS

Number of Elementary Schools	in Bourne	mouth	
on 31/12/38			24
Number of Departments			40
Average attendance			8,750
Average number on School Regi	sters		10.143

HYGIENE OF THE SCHOOLS.

The re-organisation of Schools has continued and new buildings are in course of erection. The existing premises have received necessary attention and are kept as well as possible, having regard to the fact that some of the older schools do not conform to modern ideas and need to be replaced.

In previous reports it has been mentioned that the cleansing of floors by the use of a chemical dusting powder has proved a more suitable method than washing by hand and this is now compulsory in all schools.

The insanitary communal towels have been replaced by paper towels which are supplied to each department, and this measure has, without doubt, helped to reduce the incidence of skin diseases.

The following repairs and decorations have been carried out :-

East Howe Council Infants' and Junior School.

Repainting of external wood and ironwork of main building and annexe.

Internal painting of main building and annexe.

Malmesbury Park Council Infants' School.

Repainting of external wood and ironwork.

Pokesdown Council School.

Internal redecorations.

Pokesdown C. of E. School.
Internal redecorations.

Stourfield Council School.

External painting of wood and ironwork of Infant and Junior Departments.

Winton and Moordown Council School.

Repainting of external wood and ironwork.

Alma Road Council School.

Repainting of external wood and ironwork.

Holdenhurst Council School.

Playground made up and tar paved.

Southbourne St. Katharine's School. Electric light installed.

MEDICAL INSPECTION.

The usual three groups of children were inspected, viz:— Entrants.

Intermediates (8 years old).

Leavers (12 years old and those children not examined since attaining the age of 12).

In addition to the routine inspections special examinations and re-examinations have been carried out. These are made at the request of parents, teachers, school nurses, etc., and by comparison with the previous year indicate a considerable increase.

Findings of Medical Inspection.

At routine medical inspections, 2,997 children were examined and a total of 1,655 defects was noted. Of this figure, 447 required treatment and 1,208 to be kept under observation. The proportion of defects approximates closely to that of the year 1937. Many of the conditions were dealt with at the minor ailments clinics.

It is interesting to note that of the total of 447 no less than 164 were accounted for by enlarged tonsils and adenoids and 127 by defective vision and squint.

Nutrition.

There is no reliable standard of nutrition and the results of assessment depend greatly on the observer, but as regards the year under consideration, the figures do not vary appreciably from those obtained in recent years.

It is customary to place children in one of the following categories:—

- A. Excellent.
- B. Normal.
- C. Slightly subnormal.
- D. Bad.

If all the children submitted to routine examination be grouped together 13.5 per cent of them are described as excellent, 74 per cent. normal, 12 per cent. slightly subnormal and .36 per cent. bad.

As usual the intermediate group contained a larger proportion of children in categories C and D. 13.63 and .58 respectively.

Faulty nutrition may be attributed to one or several causes, so that a child who is subnormal is not necessarily underfed.

In Bournemouth it is frequently ascertained that the district has been selected for a home owing to the ill-health of one or more members of the family.

When a parent is primarily concerned unemployment may become an important factor so that a child derived from poor stock perhaps requiring a little extra consideration is prevented from obtaining all that it needs to keep it fit.

There is however a certain amount of poverty either constant, occurring in large or thriftless families, or seasonal; it will be realised that after the busy holiday season, waiters, transport workers and others become superfluous and are likely to experience hardships.

Uncleanliness.

The standard of cleanliness is being steadily raised, so that it is unusual for verminous children to be discovered at routine examinations. In the schools surveys are carried out periodically by the nurses and persistent offenders are referred for special examination at the clinics when a doctor is in attendance.

Skin.

Among the three groups only 11 conditions of the skin were considered to be in need of immediate treatment, but as a result of special examination in the schools or at clinics 347 were recommended for attention.

Nose and Throat.

The number of abnormal conditions of the nose and throat is once more considerable. At routine examinations 173 required treatment and 533 to be kept under observation.

In addition 365 defects needing treatment were found during special examinations.

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

(Excitating Choiceaniness and Dental Delects).							
	Entr	ants	Interm	ediates	Lea	vers	
	Nee	ding	Nee	ding	Nee	ding	
		Obser-		Obser-		Obser-	
Defects	ment	vation	ment	vation	ment	vation	
Skin.	THE REAL PROPERTY.			1500000		307	
Ringworm—Scalp	1		1918 <u>20</u> 18		A Same		
,, Body	-	$\frac{-}{3}$		1			
Scabies	1	-	$\frac{-}{1}$	2 4	100	-	
Impetigo	1	3	1		3	1	
Other Diseases Non-Tubercular	5	11	_	10		5	
Fue		1997	7/45/5	THE STATE OF	30000	100 A 100	
Eye. Blepharitis	3	3	8	2	1	3	
Conjunctivitis	1		LA PARTICIPATION DE			1	
Keratitis	(10 <u>10 18</u>		Ξ	_	1000000	1	
Corneal Opacites					200	_	
Defective Vision		15	51	81	46	61	
Squint	11	1	11		-	1	
Other Conditions	100 to 10			-		1	
Ear.						32333	
Defeative Heaving	William Street	1	PRESIDE	2	1	1	
Otitis Media	2		88 <u>13</u> 04				
Other Ear Diseases	1	1	2		5	3	
Nose and Throat.	100000				38		
Enlarged Tonsils only	66	163	45	199	21	126	
Adenoids only	4	8	1 0	2 2	1	6 3	
Enlarged Tonsils and Adenoids Other Conditions	14	11 10	8 3	1	6	2	
Enlarged Cervical Glands, Non-		10			B 1977	100	
Tubercular	1	38	10000	4	3	5	
Defective Speech	1	6		3		5 4	
	ALC: NO.			F-1375			
Heart and Circulation.							
Heart Disease—Organic	1	7	-	2	3	6	
,, Functional	2 2	1	3	6	4 4	11 5	
Anaemia	2	1	3		*	-	
Lungs.		100 4850			THE REAL PROPERTY.		
Bronchitis	7	28	2	8	2	2 3	
Other Non-Tubercular Disease	4	11	1	4	1	3	
Tuberculosis.		1 THE R. P. LEWIS CO.	MACONE S				
Pulmonary—Definite			Marine Control		Or The Land		
,, Suspected Non-Pulmonary—Glands					275	1000	
Non-Pulmonary—Glands Spine	100						
,, Hips				1	_	-	
Other Bones and Joints	-	10-10		_	-	-	
Skin	F ()	-	-	-	-	-	
Other Forms	-	-	-	-	-	-	

	Enti	Entrants		Intermediates		vers
Defects	Nee Treat- ment	ding Obser- vation		ding Obser- vation		ding Obser- vation
Chorea	: =	<u>-</u>	<u>-</u>	- 1 2	=	<u>-</u>
Spinal Curvature	 4 7	9 10 61	- 4 2	2 35 58	11 6	6 53 38
Other Defects and Diseases .	13	2	8	5	9	10
Number of Defects	163	413	153	437	131	358
Number of children examined	9	18	12	03	87	76

INFECTIOUS DISEASES.

Chicken Pox and Measles have been prevalent and to a less extent Mumps and Influenza. As regards notifiable diseases, it is very gratifying to note the diminished incidence of Diphtheria. There were thirty-three elementary school children affected in 1937, but only ten last year.

In connection with the recent outbreak of Poliomyelitis in various parts of the country, it is to be observed that seven cases were notified, four of these being elementary school children.

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

Disease	Total cases notified	Total deaths	Cases who were elementary school children	Deaths of elementary school children
Diphtheria	 32	4	10	2
Erysipelas	 22	Ferri	_	1
Scarlet Fever	 121		55	- 700
Enteric	 4			
Encephalitis Lethargica	 1	1	/	-
Poliomyelitis	 7		4	_
Cerebro-spinal Meningitis	 1	1		-

IMMUNISATION AGAINST DIPHTHERIA.

Unless the number of Medical Officers be increased it is not practicable to undertake more than a small amount of work in connection with immunisation—usually one session weekly. It is customary to select in turn various districts in the County Borough and to invite scholars from the several schools as well as younger children known at the Infant Welfare Centres. By this means steady though slow results are being obtained. Until recently three injections at fortnightly intervals have been given, but now only two so that a larger number of children will be dealt with.

The following statement relates to children attending school: Cases commenced in 1937, completed in 1938 44
Cases completed during 1938 652
Cases commenced in 1938 (not completed) 99

BOARD OF EDUCATION GRANT REGULATIONS.

School Certificates given for epidemic illness:-

Pokesdown Council Infants'-Week ending 11th February ... Mumps, Influenza and Colds Mumps and Measles 18th ... Southbourne St. Katharines C. of E.-Week ending 25th March Chicken Pox 1st April ... 8th ,, Alma Road Council Infants'— Week ending 22nd July Measles and Chicken Pox 28th ,, Measles

ARRANGEMENTS FOR TREATMENT.

The Minor Ailments Clinics have continued to satisfy the needs of families who are unable to obtain appropriate advice and treatment by other means.

The definition of a minor ailment is however carefully observed so that there is no interference with the practice of local doctors.

The facilities available have not been altered, pending the provision of new Health Centres which will have greater scope.

A Health Visitor attends each session but a doctor only once a week.

The existing clinics as	re :-	-	Wee	
Charminster Clinic		East Way		2
East Howe Clinic		Moorlea, Caroline Road		3
Malmesbury Park Clinic		35, Shelbourne Road		3
Pokesdown Clinic		Hannington Road		3
Winton Clinic		Somerley Road		3

The premises at Charminster are very small and the number of children and attendances increasing so that it may become necessary to provide an additional weekly session.

The attendances were as follows:-

Charminster		 2139
East Howe		 3642
Malmesbury	Park	 1813
Pokesdown		 2386
Winton		 2245
	Total	 12225

This total is higher by 2051 than the one for the previous year so that occasionally it has been difficult to accommodate the children. These remarks apply not only to Charminster but more especially to East Howe, where the building is inadequate and generally unworthy of the County Borough.

THE EYE CLINIC.

Sessions have been held every Monday morning and afternoon.

240 of the 461 children examined were ordered spectacles. 53 of them were supplied at the cost of the authority and 179 obtained them privately. 2 of those remaining have left school, 2 are awaiting delivery and 4 are outstanding.

In many instances it is found that spectacles are not required immediately. The children are, however, kept under observation and if necessary re-examined.

Numerous defects were treated by the Ophthalmologist at the Royal Victoria and West Hants Hospital.

Of the 148 children referred to this institution 116 had errors of refraction or squint; the remainder comprised a variety of conditions.

THE TONSILS AND ADENOIDS CLINIC.

Children needing operative treatment are admitted to the Royal Victoria and West Hants Hospital with which institution the Authority has an agreement. Weekly sessions used to be held, but latterly owing to the long waiting list it has been necessary to hold them more frequently. It is customary for the children to be admitted the day before operation and to come out the day following. During the year there were 60 sessions and 307 children attended. 264 of these were operated upon, but in 43 instances treatment was postponed, usually on account of a temperature.

ORTHOPAEDICS.

Children have been sent to various residential institutions, particularly those of the Shaftesbury Society, others referred to the Royal Victoria and West Hants Hospital, where they obtained treatment without charge—except in respect of splints and other appliances—to their parents or to the Education Authority. The latter at the same time as other Committees of the Council was approached by the Hospital Authorities, who pointed out that the Municipality has profited at the expense of voluntary funds and suggested that a scheme on a paying basis should be considered. The terms proposed to the Council were not acceptable with the result that arrangements have been made with the Lord Mayor Treloar Cripples' Hospital, Alton. In-patients will be received and out-patients seen by a surgeon from Alton at a monthly clinic to be held at Bournemouth on municipal premises. The scheme will include all orthopaedic cases up to the age of 16 and provides for a part-time masseuse.

THE DENTAL SERVICE.

This is the first complete year in which a whole-time school dentist has been employed. The percentage of children referred for treatment is approximately 72 and the acceptance rate 50 per cent. In consequence the dentist is not able to inspect the children

as frequently as they should be nor to give treatment in a reasonable time.

The appointment of another dentist can be easily justified but must be postponed as the proposed Health Centre at East Howe has not been erected.

The existing arrangements cannot be regarded as satisfactory as children who have waited for a long period are sometimes taken to a private dentist or brought to the Clinic for immediate treatment on account of pain. These casualty cases have a "hindering" effect on the smooth running of the scheme.

PARENTS' PAYMENTS.

No charge is made to parents of children attending the Minor Ailments Clinics, nor for a "refraction" undertaken for defective vision at the Eve Clinic.

The collection of contributions for dental treatment remains unchanged, also the scale of charges for the treatment of enlarged Tonsils and Adenoids. The latter is as follows:—

- (a) Free treatment where the income per head in the family is under 10/- per week;
- (b) A contribution of 5/- to 15/- when the income per head is 10/- or over per week.

Parents of children maintained in special institutions are expected to subscribe whenever possible, the circumstances of each family being considered.

Amounts received during the year were as follows:—

(a) For Tonsils and Adenoids Operations ... 47 4 6

(b) For Dental Treatment ... 4 1 2

(c) In respect of children maintained at various

... 148 15 2

FOLLOWING UP.

Residential Institutions

Parents of children found to have defects in need of treatment are informed either verbally or by written notice and are supplied with details of the facilities available. When the child is marked for observation only it may be unnecessary, even undesirable, to notify the parents, but periodical re-examinations are arranged. Usually attention is given to defects within a reasonable time, though the school nurses have been responsible for much following up at home or in school,

In a few instances only has it been necessary to appeal to the Inspector of the N.S.P.C.C. for his active assistance.

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

Reason for visit		Number		
Uncleanliness			441	
Ear, Nose and	Throat		1407	
Eye defects			479	
Dental defects			175	
Miscellaneous			1566	
	Total		4668	
			-	

THE PROVISION OF MEALS.

Milk.

A free supply of milk is provided in schools for certain children recommended by the Medical Officers. The latter are influenced as they should be by the teachers whose observations of the children in school and knowledge of home circumstances are invaluable. The number of children receiving free milk has steadily increased as the following table which shows the total at the end of each month indicates:—

Jan. Feb. March April May June July Aug. Sept. Oct. Nov. Dec. 420 441 504 534 536 559 554 511 550 578 609 657

As a comparison it is worthy of note that in January, 1937, the number was 172.

For several years the number of children receiving free milk has been expanding as will be seen from the figures quoted:—

1934	1935	1936	1937	1938
47	142	217	521	722

Naturally there has been an increased number of bottles of milk provided.

In 1938 the figure was 103,970.

In 1937 ,, ,, 56,490.

It is hoped to increase the amount supplied to two-thirds pint; one-third pint to be given in the morning and another one-third pint in the afternoon. All the children concerned are re-examined periodically, so that very much time and attention is devoted to the subject of nutrition by the Medical Officers.

In certain circumstances Cod Liver Oil and Halibut Oil and Malt are given on a medical recommendation at a school clinic.

The amount supplied was as follows:-

			No. of
		No. of	lbs.
Clinic	C.	hildren	of food
Winton	 	36	63
Pokesdown	 	62	150
Malmesbury Park	 	34	60
East Howe	 	97	196
Charminster	 	114	249
		343	718

Free Dinners.

The provision of extra nourishment in the form of dinners has been undertaken in a small way by a Voluntary Children's Care Committee which has found it a problem to deal with the increasing number of recommendations.

Difficulty has been experienced also in selecting suitable premises for the meals and in ensuring that the latter are appropriately constituted.

During 1938, 47 children received 5,517 meals.

It is hoped to formulate an improved and more extensive scheme as it appears to be permissible and desirable to make provision for children who are only slightly undernourished.

Milk in Schools Scheme.

It is possible for any child to purchase one-third pint of pasteurised milk at a charge of ½d. for consumption during the morning session. Approximately 60 per cent. of the children avail themselves of the facilities.

6,009 bottles were supplied daily in 1938 and 5,239 in 1937.

TABLE SHOWING THE AMOUNT OF MILK CONSUMED IN THE SCHOOLS.

		SCHOOLS					
Name of School				Chil	of dren Reg. 1st		of Milk d daily 1st
				Oct., 1937	Oct., 1938	Oct., 1937	Oct., 1938
Alma Road Council		В.		343	325	163	215
,, ,,		G.		321	319	130	155
Possembe Council		I.		258	254	147	170
Boscombe Council		В.		145	152	49	58
		G.		149	139	57	80
n " , w," a na		I		123	126	75	77
Boscombe Holy Cross R.C.		M.		147	153	71	98
Boscombe St. John's C. of	E.			187	169	141	98
Chaminster Council		B.		101	104	172	57
Charminster Council		S.M. .M. & I.		512 352	486 357	173 230	230 235
East Howe Council	,	В.		284	330	119	167
		G.		287	299	132	180
				1	258	-	135
		I.		529	275	256	173
				463	480	313	348
Kinson Council		.M. & I.		283	282	160	213
Holdenhurst Council		M.		53	57	50	71
Malmesbury Park Council		M.		370	359	144	150
		I.		156	151	97	108
Moordown C. of E. "		G. & I.		322	308	210	156
Pokesdown Council		M. & I.		293	296	182	195
Pokesdown C. of E.		M.		188	187	49	50
,,		I.		128	124	69	96
St. Andrew's		G. & I.		193	182	97	120
St. Clement's		M.		231	234	103	127
,,		I.		78	75	60	63
St. Luke's	J	.M. & I.		140	168	85	105
St. Michael's C. of E.		M.&I.		211	215	143	175
St. Paul's C. of E.		M. & I.		213	205	137	120
St. Walburga's R.C.		M. & I.		257	254	147	160
Southbourne St. Katharine	's				-		4
C. of E	J	. M. & I.		73	65	54	34
Stourfield Council		S.M.		355	364	64	81
" "		Į.		354	368	178	200
m " " " " " " " " " " " " " " " " " " "				393	377	247	310
Talbot Village C. of E.		.M. & I.		257	261 83	225 48	219 74
Westbourne Council		M. & I.		91 499	529	165	331
Winton & Moordown Coun	CII	B.		384	367	181	145
" " "		G. I.		364	341	264	227
" " "		1.		304	041	201	
Totals fo	r B	orough	1	0077 1	0078	5239	6009

PROVISION OF BOOTS AND SHOES.

The Voluntary Children's Care Committee, in addition to supplying dinners, has continued to provide boots or shoes to many necessitous cases.

The British Legion Relief Committee have also made similar provision under one of their schemes.

Particulars as to cases dealt with are as follows:-

		N	No. of	pairs of
		bo	oots an	d shoes
Children's Care Committee:			provi	ided
District—			1938	1937
A. (Westbourne and Central)		1	3	2
B. (Winton and Moordown)			145	128
C. (Malmesbury Park and Spring	gbourne)		29	59
D. (Boscombe and Southbourne)			82	45
E. (Kinson and Holdenhurst)			114	115
			1	
	Totals		373	349
			-	
British Legion Relief Committee			96	94
Gra	and Totals		469	443
			-	

CAUSES OF EXCLUSION FROM SCHOOL.

Describition			=
Bronchitis		 	5
Chicken Pox		 	12
Debility		 	3
External Eye Dise	ase	 	5
Impetigo, Sores, et	te.	 	93
Measles		 N	1
Mumps		 	11
Otorrhoea		 	7
Post T. and A. O	peration	 	3
Rheumatism		 1	2
Ringworm		 	4
Scabies		 	38
Sore Throat		 	25
Uncleanliness			123
Whooping Cough			3
Enuresis		 	1
Miscellaneous		 	33

369

EMPLOYMENT OF SCHOOL CHILDREN.

Certificates were granted as follows:-

Newsboys		 	265
Newsgirls		 44	8
Errand Boys		 	94
Errand Girl		 	1
Shop Boys		 	2
Van Boys	2.4. 34	 19	6
Domestic Servant		 	1
			377

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

Thirty-three children also were granted certificates to enable them to take part in public entertainments.

MISCELLANEOUS EXAMINATIONS.

These included :-

- (a) Thirty teachers appointed to vacancies on the staff.
- (b) Sixteen applicants who wished to become Royal Air Force apprentices.
- (c) Nineteen juvenile delinquents referred by the Magistrates.

SPEECH DEFECTS.

There are no special facilities for children with defective speech. Attention having been directed to the subject by Head Teachers, the latter were requested by the Director of Education to submit lists of children with such defects.

Arrangements were made for medical examination and over 100 children were considered to be suitable for a special class. Most of these exhibited lisping or lalling; others were stammerers, and a few had defective palates.

It is hoped that special arrangements will be made for these children and the matter is due for further consideration.

PHYSICAL TRAINING.

Three Assistant Organisers of physical training (one man and two women) have been appointed since the original arrangements were made in 1937.

The allocation of employment of the Chief Organisers (a man and woman) and the three assistants is as follows:—

Bournemout	th		 20/120ths
Hampshire			 78/120ths
Aldershot			 5/120ths
Gosport			 12/120ths
Winchester		A	 5/120ths

Before the appointment of the assistants the time devoted to Bournemouth was the equivalent of approximately 70 days. This has now been increased to approximately 175 days.

The Head Teachers and their staffs give every assistance, and the arrangements seem very satisfactory.

SWIMMING.

The Stokewood Road Baths were reserved for the use of the schools during school hours. It was therefore possible to accommodate a far larger number of classes and, as a result, there has been a great increase in the attendances.

Unfortunately at the end of September the Baths were utilised for Air Raid Precautions purposes and the season was somewhat curtailed. Nevertheless 1,035 scholars were taught to swim during the year.

The attendances were as follows:-

			No	. able to s	swim
		No. of	100	25	12
		attendances	yds.	yds.	yds.
Boys	 	13,388	153	237	260
Girls	 	13,028	116	273	265

The total of 26,416 attendances is an increase of 16,968 over the total for 1937.

All children who were 10 years 9 months of age at the beginning of the school year attended the swimming classes, with the exception of 690 who were exempted for various reasons.

OPEN-AIR EDUCATION.

The Medical Officers frequently find children for the most part attending irregularly ordinary elementary schools who should be receiving instruction in special institutions whether residential or otherwise. An attempt has been made to classify these children accurately in order to ascertain whether the provision of an open-air school in Bournemouth can be justified.

The figures obtained do not warrant the establishment of a residential institution and the obstacles particularly in connection with transport are appreciable when a day school is being considered.

For the time being therefore arrangements have to be effected with authorities possessing schools in other districts. Very beneficial results are secured, but there is often a difficulty in persuading parents to allow their children to go far from home.

In one institution four beds are retained for girls aged 9-14. For other children accepted as suitable there may be a long wait before admission actually takes place.

SCHOOL CAMPS.

It has been customary for several years through the generosity of the Bournemouth Rotary Club and numerous private subscribers to send during June and July a group of girls to Corfe Castle and a similar number of boys to Swanage. The former are accommodated in houses in the village, the latter in a camp.

The children are in the care of a teacher who establishes a routine for a holiday of fourteen days duration. The boys went in one group of 40, the girls in two groups of 20.

The holiday is greatly appreciated and the children who are selected by those having a knowledge of home conditions almost invariably derive benefit.

Each child is medically examined before going away and on the day of return, height and weight being carefully recorded.

The number of children found to have increased in height, weight or chest measurement is indicated herewith:—

Increased Heigh	nt—	Boys	Girls
1½ inches		 -	1
$\frac{3}{4}$ inch		 2	4
½ inch		 4	13
inch inch		 1	
1 inch		 9	11
1 inch		 3	1

Increased Weight-			Boys	Girls
Between 5 and 6 lbs.			3	2
Between 4 and 5 lbs.			2	2
Between 3 and 4 lbs.			4	7
Between 2 and 3 lbs			5	9
Between 1 and 2 lbs				7
1 lb. and under			10	9
Increased Chest Measureme	nt (Boys	onl	y)—	
			7	
½ inch ¼ inch			10	

MEDICAL INSPECTION RETURNS Year ended 31st December, 1938.

TABLE I.

A-ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :-

Entrants					918
Second Age Group					1203
Third Age Group					876
		Total			2997
N-1					2711
Number of other Routine I	nspections.	***			Nil
		C+	and Total		2997
		GI	and Total		2001
В	-OTHER	INSPECTIO	INS.		
Number of Special Inspection	ons				4120
Number of Re-inspections				****	1298
		Tota	1		=110
		Tota			5418

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 51 46	137 97 76	143 138 119
Total (Prescribed Groups) Other Routine Inspections	105	310	400
Grand Total	105	310	400

TABLE II.

A.—RETURN OF DEFECTS FOUND AT MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1938.

ERDED SIST DECEMBER, 1900.								
	Rout	tine ctions.	Spec					
	No. of	Defects	No. of	Defects				
DEFECT OR DISEASE.	Requiring treatment	Requiring to be kept under ob- servation but not requiring treatment	Requiring treatment	Requiring to be kept under ob- servation but not requiring treatment				
Ringworm : Scalp Body Scabies Impetigo Other Diseases (Non-Tuberculous)	— 1 5 5	- 2 8 26	1 10 58 104 174					
Blepharitis Conjunctivitis Keratitis Corneal Opacities Other conditions (excluding Defective	12 1 —	8 1 -	15 27 —					
Vision and Squint) Defective Vision (excluding Squint) Squint	105 22	1 157 2	45 65 12	4 7 1				
Ear { Defective Hearing Otitis Media Other Ear Diseases	1 6 8	4 4	2 42 87	$\frac{2}{2}$				
Nose and Throat Chronic Tonsillitis only Adenoids only Chronic Tonsillitis and Adenoids Other conditions	132 6 28 7	488 16 16 16	106 4 208 47	55 4 105 6				
Enlarged Cervical Glands (Non-Tuberculous)	4	47	63	3				
Defective Speech	1	13	4	1				
	A RECEIPT							

A 24

TABLE II.—continued.

THE RESIDENCE OF THE PARTY OF T	Concession of the second				
	(Heart Disease:				1200
Heart and	Organic	4	10	7	2
Circulation	Functional	6	24	5	3 -
	Anaemia	9	7	15	
		31/20/20	NAME OF THE PARTY OF	400000000000000000000000000000000000000	
	(Bronchitis	11	38	38	11
Lungs	Other Non-Tubercu-			00	
	lous Diseases	6	18	53	3
	C rous riscuses		,0	33	
	(Pulmonary:				
	Definite	508402			
	Cuanaatad	0 38 80 8			1
	Suspected				The state of
Lubercu-	Non Dulmonous		ZOLEKO TEKNI		250
losis	Non-Pulmonary:				
	Glands	The state of	STATE OF THE PARTY	A STATE OF THE PARTY OF THE PAR	300000
	Bones and Joints	Maria Carlo	1		- Contract
	Skin	S 4-		-	-
	Other forms	-			-
	(Epilepsy		0.852.00	3	
Nervous	Chorea	100 515	1	2	11
System	Other conditions	3	14	15	1
	Cotner conditions		13	10	
	(Rickets	193 <u>1</u> 33	17		1
Defor-		19	98	2	i
mities	Spinal Curvature Other forms	15	157	45	5
	(Other forms	10	107	10	
	cts and Diseases (excluding				
Defects	of Nutrition, Unclean-				1
liness an	d Dental Diseases)	30	17	525	29
Tota	1 Number of Defects	447	1208	1786	238

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

Age-groups	No. of Children Inspected	A (Excellent)				Excellent) (Normal) (SI		C (Slightly sub- normal)		D (Bad)	
	Inspected	No.	%	No.	%	No.	%	No.	%		
Entrants Second Age-group Third Age-group Other Routine Inspections	918 1203 876	110 122 174	11.98 10.14 19.86	910	77.78 75.64 68.03	93 164 103	10.13 13.63 11.75		0.11 0.58 0.34		
Total	, 2997	406	13.54	2220	74.07	360	12.01	11	0.36		

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
2	_	_	-	2

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		2	_	_	4

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	_	_	_	2

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 and Partially Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total
1	-	_	_	1

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.
4	26	-	-	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	2	-	_	3

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
6	-	-	1	7

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.
3	3	1	2	9

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.
20	81	3	-	104

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	
6	22	1	1	30	

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.
4 <	1	-	_	5

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 Defects	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

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DEC., 1938.

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

		Number of under treats	Defects tre	the yea
DISEASE OR DEFECT.		Under the Authority's Scheme.	Otherwise.	Total.
SKIN :—				
Ringworm—Scalp— (i) X-Ray Treatment		_		
(ii) Other		1	-	1
Ringworm—Body		17 90		17 90
Scabies Impetigo		534		534
Other Skin Diseases		707	-	707
linor Eye Defects:—				
(External and other, but exc cases falling in Group II.)	luding	167	23	190
finor Ear Defects		200	_	200
		S MOST L		
IISCELLANEOUS (e.g., Minor injuries, bruises, sores,		9		1
chilblains, etc.)		1210	-	1210
Total		2926	23	2949

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

	No of Defe	cts dealt with	
	Under the Authority's Scheme	Otherwise	Total
Errors of Refraction (including squint) Other Defect or Disease of the Eyes (exclud- ing those recorded in Group I)	461	116	577
Total	461	125	586
	Under the Authority's Scheme	Otherwise	Total
No. of children for whom spectacles were (a) Prescribed (b) Obtained	240 53	113 292	353 345

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	1	_	1		1
Adenoids only Tonsils and adenoids	263	8	271	-	272
Other defects of nose and throat					

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

	Under th	Under the Authority's Scheme.	s Scheme.		Otherwise.		
	Residential treatment with education	Residential treatment without education	Residential Residential Non-residential Residential treatment treatment with with education education clinic.	Residential treatment with education	Residential treatment without education	Non-residential treatment at an orthopaedic clinic.	Total number treated
Number of children treated	Ξ	1	1	1	10	25	36

TABLE V.—Dental Inspection and Treatment.

(1) Number of Children who were :-

Inspected by the Dentist :-

(a) Routine Age Groups	9	267	-	3588
(b) Spec	ials	***		1131
	Grand Total			4739
(2) Found to require treatment				3764
(3) Actually treated				2246
(4) Attendances made by children for	treatment			4879
(5) Half-Days devoted to Inspection, ,, ,, Treatment		$\left\{ egin{array}{c} 22 \\ 375 \end{array} ight\}$ Total		397
6) Fillings Permanent T Temporary T		$2682 \atop 133$ Total		2815
(7) Extractions Permanent T Temporary T		$\begin{bmatrix} 1310 \\ 5798 \end{bmatrix}$ Total		7108
(8) Administrations of general anaesth	netics for extractions			1957
(9) Other operations Permanent T Temporary T		2192 Total		2246

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	32	2601
(iii) Number of individual Children found unclean		581
(iv) Number of individual Children cleansed under Section 87 (2) and (3) of the Education Act, 1921		
(v) Number of cases in which legal proceedings were tak	en :	
(a) Under the Education Act, 1921		_
(b) Under School Attendance Byelaws		-

SECONDARY SCHOOLS.

The medical inspection of all the scholars in the Secondary Schools—the Bournemouth School and the Bournemouth School for Girls—was carried out as susual.

It has not been possible to initiate routine dental inspection as the one school dentist is not able to do justice to the elementary school children.

The treatment of defects discovered is available under the Council's scheme for special place pupils only, other scholars being referred to their own medical or dental attendant. It would seem that some extension of the Council's scheme is desirable.

The total number of defects found compares favourably with that for the year 1937—423 as against 523. Defective vision and enlarged tonsils accounted for more than half of these.

The new Bournemouth School is steadily nearing completion. Modern buildings in proximity to extensive playing fields will doubtless have an effect on the health of the boys.

SECONDARY SCHOOLS.

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

Boys Girls	 			552 414
		Tota	al	 966

TABLE II.

A. Return of Defects found by Medical Inspection in the year ended 31st December, 1938.

					Routin	e Inspections.
					No.	of Defects.
		DEFECT OR DISEA	SE.		Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
		CDimension				
		Ringworm:				
		Body			1000	
Skin		Scabies			_	
		Impetigo			21112	
		Other Diseases (Non				
		(Tuberculous)			1	20
		Blepharitis			1	1
		Conjunctivitis			-	
		Keratitis			_	
Eye	-	Corneal Opacities			-	
		Defective Vision	(exclud		77	109
		Squint)			"	109
		Squint Other conditions				1
		(Other conditions				
		Defective Hearing			_	
Ear		Otitis Media			3	1
		Other Ear Diseases			-	-
Vose		Chronic Tonsillitis or	ıly		3	36
nd		Adenoids only			-	1
Chroat		Chronic Tonsillitis &	Adenoid	s		1
		Other conditions			2	

TABLE II-Continued.

Enlarged Cervical Glands (Non-Tuberculous)	_	4
Defective Speech	-	-
Heart Disease: Organic Circulation Heart Disease: Organic Functional Anaemia	1 2	7
Lungs { Bronchitis Other Non-Tuberculous Diseases	1 1	5
Tuber- culosis Pulmonary: Definite Suspected Non-Pulmonary: Glands Bones and Joints Skin	11 11	=
Other forms Nervous (Epilepsy	=	=
System Chorea Other conditions	=	1
Deformities { Rickets Other forms	3 6 54	16 3 58
Other Defects and Diseases (excluding Uncleanliness and Dental Diseases)	3	1
Total	158	265

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.	77	67	138



CONTENTS OF MEDICAL OFFICER OF HEALTH'S REPORT.

						P	age
Ailing Infants' Beds							50
Ambulance Facilities	***		***				13 46
Ante-Natal Clinic				1			40
Bacteriologist's Repo	rt						36
Bacteriological and I		al Evam	inations		26 27 2	8, 29, 31,	0000
Bakehouses	···						30
Bed-bugs							21
Births							53
Birth Rates						12 and	49
Blind Persons							37
Camping Sites							20
Cancer							38
Committees							6
Contraceptive Clinic							47
Clinics						13 and	53
Closet Accommodation							16
Child Life Protection	1						52
Death, Causes of	***		***			10,	
Death Rates	***						12
Drainage and Sewera	ige				•••		16
Dental Treatment	***						54
T	1-4					00 1	00
Factory and Worksh			***			22 and	23
Fertilisers and Feedi		Act				96 90	25
Food Supply, Contro	1 01				***	26, 30,	31
Health Commisses							12
Health Services							13
Hospitals				***	***		13
Housing Home Nursing	•••		***		•••		18
Home Helps				***			50
Trome Treips				***			00
Ice Cream Premises							30
Immunisation				***	***		34
Infantile Mortality			***				50
Infant Deaths, Cause				/			51
Infant Welfare Centr						***	
	Co					53.	OH:
						53,	
Infectious Disease						32,	35
	 Iospital						35 33
Infectious Disease Infectious Diseases H	 Iospital Services,	··· Public	 Assistance	e		32,	35
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision	 Iospital Services, on for Mo	··· Public	 Assistance	e		32,	35 33 15
Infectious Diseases I Institutional Medical	 Iospital Services, on for Mo	··· Public	 Assistance	e		32,	35 33 15
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities	 Iospital Services, on for Mo	Public and	 Assistance	n		32,	35 33 15 50
Infectious Disease Infectious Diseases F Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds	Hospital Services, on for Mo	Public and	 Assistance	n		32,	35 33 15 50 13
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds Homes	Hospital Services, on for Mo	Public A	Assistance d Childre	 e n		32,	35 33 15 50 13 50 47
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds Homes Maternal Mortality	Hospital Services, on for Mo	Public and	Assistance Childre	n		32,	35 33 15 50 13 50 47 48
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds Homes Maternal Mortality Mental Defectives, In	Hospital Services, on for Mo	Public and	Assistance Childre ion for	 e n		32,	35 33 15 50 13 50 47 48 16
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds , Homes Maternal Mortality Mental Defectives, In Meteorological Data	Hospital Services, on for Mo	Public Athers and	Assistance d Childre ion for	 e n		32,	35 33 15 50 13 50 47 48 16 58
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds , Homes Maternal Mortality Mental Defectives, In Meteorological Data Midwifery and Mater	Hospital Services, on for Mo nstitutions	Public Athers and al Provis rices	Assistance d Childre	 e n 		32,	35 33 15 50 13 50 47 48 16 58 45
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds ,, Homes Maternal Mortality Mental Defectives, In Meteorological Data Midwifery and Mater Milk Assistance Sche	Jospital Services, on for Mo	Public and thers and al Provis ices	Assistance d Childre ion for	 e n		32,	35 33 15 50 13 50 47 48 16 58 45 51
Infectious Disease Infectious Diseases H Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds ,, Homes Maternal Mortality Mental Defectives, In Meteorological Data Midwifery and Mater Milk Assistance Sche Milk and Dairies Ord	Inspital Services, on for Mo	Public and thers and al Provis ices	Assistance d Childre ion for	 e n		32,	35 33 15 50 13 50 47 48 16 58 45 51 27
Infectious Disease Infectious Diseases I Institutional Medical Institutional Provision Laboratory Facilities Maternity Beds Homes Maternal Mortality Mental Defectives, In Meteorological Data Midwifery and Mater Milk Assistance Sche Milk and Dairies Ord	Inspital Services, on for Mo	Public and thers and al Provis	Assistance d Childre ion for	 e n		32,	35 33 15 50 13 50 47 48 16 58 45 51

						F	age
Nutrition			4				31
Notifiable Diseases							35
Nursing Homes							47
Nursing in the Home	•						13
Obstetric Specialist							47
Ophthalmia Neonator	um						54
Orthopaedic Treatme	nt						55
Office, Regulation of	the Con-	ditions					25
Poor Law Medical O	ut-Relief						15
Population							8
Post-Natal Clinic							46
Prepared Meat Premi							30
Public Analyst, Repo							61
Dublia Classina							17
Pharmacy and Poison							26
Poliomyelitis					13		32
1 onomy chees							
Rag Flock							25
Rats and Mice Destr	nction A	ct					21
Rivers and Streams	action 1						17
Rivers and Bucams	***			20000	100000		100
Sanatoria							43
					- "		24
Shops Deta	ile of						17
Sanitary Work, Deta				4778 TO AT		3.00	29
Slaughter-houses							20
Smoke Abatement			•••			***	6
Staff	***		***				8
Statistical Summary	D1-				***		
Swimming Baths and	Pools			***			20
Social Conditions				•••			9
							10
Treatment Centres ar	id Clinic	S					13
Tuberculosis						40	, 44
Tuberculosis Dispensa	ary						41
Typhoid Fever				-			31
Vaccination				***	***	***	39
Venereal Diseases							55
Visits by Health Visi	itors						53
Vital Statistics						8 and	12
XX. 4							10
Water							16

CONTENTS OF SCHOOL MEDICAL OFFICER'S REPORT.

Arrangements for Tre	atment						Page All
Arrangements for Tre	atment	***		***			AII
Exclusion from School	1						A17
Findings of Medical I	Inspection	n :—					
Skin Disease Nose and Throat	Defeate						A7
Malnutrition							A6
Following-up				***			A13
Tollowing-up			***	***			AIO
Hygiene of the School	ols						A5
Immunisation							А10
Infectious Disease							A9
Low Attendance Certi	ificates						A10
Medical Inspection							А6
Open Air Education							A20
Parents' Payments							A13
Physical Training							A19
Provision of Meals							A14
School Camps							A20
Secondary Schools: S	tatistical	Tables			.,.		A33
							A4
Statistical Tables :-							
							A22
,, 2		***					A23
							A25
",							A29
C						***	A32
6	•••						A02

