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ANNUAL REPORT

ON THE

HEALTH

OF THE

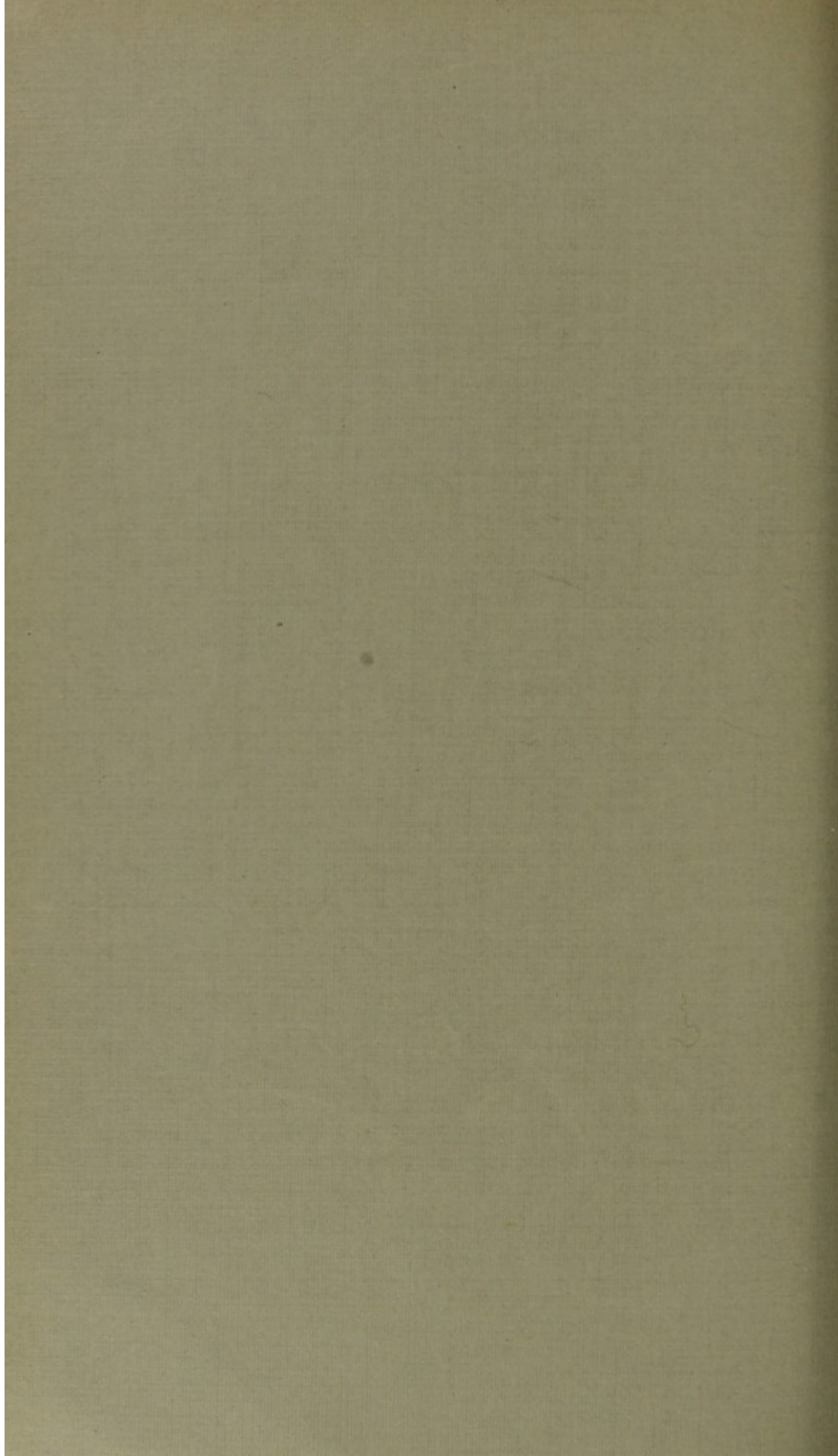
County Borough of Darlington,

For the Year 1936.

DARLINGTON:

THE SKERNE PRINTING CO. (1927) LTD., GARDEN STREET.

1937.





County Borough of Darlington.

ANNUAL REPORT

UPON THE

Health of Darlington,

For the Year 1936.

G. A. DAWSON, M.D., D.P.H.,

Medical Officer of Health,

Public Assistance Medical Officer,

Medical Superintendent of the Borough Hospitals,
for Infectious Diseases, and the Maternity Hospital,

School Medical Officer,

Tuberculosis Medical Officer,

Medical Certifier under M.D. Acts,

Medical Examiner for Corporation Employees.

County Borough of Darlington

ANNUAL REPORT

1907-1908

Health of Darlington

For the Year 1908

G. A. DAWSON, M.D., D.P.H.

Medical Officer of Health

Public Assistance Medical Officer

Medical Superintendent of the Darlington Hospital

for Infectious Diseases and the Darlington Dispensary

Sanitary Medical Officer

Tuberculosis Medical Officer

Medical Officer in Charge M.D. Area

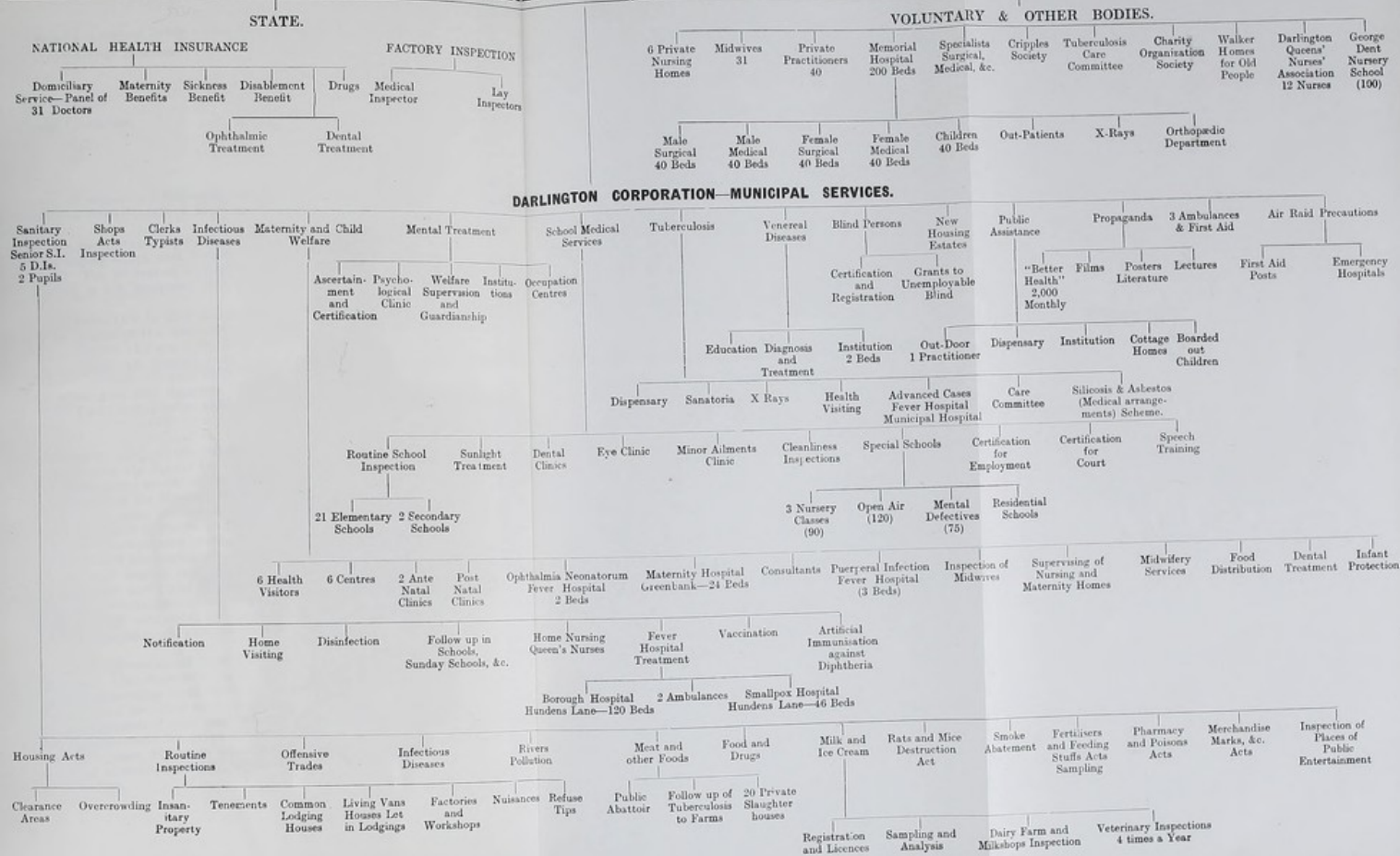
Medical Assistant in Charge Sanitary Engineering

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MEDICAL AND HEALTH SERVICES IN DARLINGTON COUNTY BOROUGH.



"Health is won by a way of living rather than a bottle of Medicine".—*Sir George Newman.*

*To the Chairman and Members
of the Health Committee.*

GENTLEMEN,

I have the honour to submit my Eleventh Annual Report on the work of the Health and Medical Departments of the Corporation.

The population has risen from 75,300 to 75,500, and the number of inhabited houses including shops and licensed premises from 21,610 to 22,119 during the year. The estimated number of families is 20,000. The average size of the family is 3.8, compared with 4.4 in 1921.

The birth rate rose from 14.8 to 15.5 and though growing it is still far below even the lowest figures of the war years, in 1916. The death rate shows an increase from 12.2 to 12.7 per 1,000, but this is largely due to the heavy mortality in the older age groups from such inevitable causes as senility and degenerative cardiac disease. The infantile mortality rate has remained at a very satisfactory low figure of 58 per 1,000 considering our conditions in the North East, and is below that for England and Wales as a whole.

The maternal mortality rate, which caused concern in Darlington in 1933, has now been well below the figures for the country as a whole for the past three years, reflecting every credit on our general scheme for maternal welfare. The recent Report of the Ministry of Health on the investigations on this subject has borne out what we already knew in Darlington regarding the difficulty of overcoming such obstacles as the frequency of abortions and the lack of co-operation of expectant mothers, in refusing to carry out instructions. The causes and the means of prevention of these deaths are not so simply ascertained as was at first imagined. Every step has been taken to bring our Maternity and Child Welfare Scheme up to the highest pitch of efficiency by the co-ordination of our increased institutional accommodation at Greenbank, with ante-natal and post-natal clinics, specialists, home helps, provision of nourishment, and education in mothercraft.

The wave of scarlet fever continued from 1935 and somewhat taxed our hospital accommodation. Unfortunately, at the same time, there was a similar outbreak in the surrounding rural areas of North Riding and Durham from which we receive cases, provided accommodation is available. It was decided to restrict the admission of rural cases and mild cases locally so that the maximum of attention could be given to those cases of more severe degree. Of 466 notified cases, 322 were admitted to Hospital and there were only two deaths—a mortality of 0.43% markedly in contrast with that of 5% twenty-five years ago.

As emphasized in 1935, diphtheria is the disease most to be feared. There were no less than 174 cases and 18 deaths in Darlington and the tragedy lies in the fact that these deaths could have been so easily prevented, if only immunisation had been carried out. For three years, 1932-1934, we had not had a single death and my repeated warnings regarding future protection against the dread disease received very scant attention from the public. It required a tragedy and 18 innocent lives to drive home the lesson. In December 15,000 leaflets were circulated in the schools and clinics urging the measure, particularly in children under 10 years of age when the mortality is highest, and offering free service by the Department's medical officers. Only 2,000 accepted. These have been protected, without the least personal inconvenience or disturbance to their work or play, but there are still at least 8,000 children running needless risk.

Special action has been taken by public lectures, posters and leaflets to arouse public interest in the prevention of ill-health and the importance of early consultation and early treatment in all defects great or small. The following items have received special attention :—

The further co-ordination of Services at Greenbank Health Centre.

Malnutrition.

Cancer Research.

The Mental Deficiency and Psychological Clinic.

The Public Assistance Medical Service.

Extension of accommodation at the Infectious Diseases Hospital and Municipal Institution.

Joint Sanatorium Scheme at Nunthorpe.

The salaried Midwifery Service.

Air Raid Precautions.

Shops Act Administration.

Physical Recreation.

Verminous Premises.

Slum Clearance and Overcrowding.

Milk, Meat and Food Inspection.

I wish to take this opportunity to express my thanks to you, as Chairman and members of the Health Committee, to my colleagues in other Departments, to the General Practitioners and to my entire staff, office, outdoor, and hospital, for their continued co-operation and support.

G. A. DAWSON,

Medical Officer of Health.

MEMBERS OF HEALTH COMMITTEE.

Alderman A. J. BEST, J.P. (*Chairman*).

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Alderman T. E. B. BATES, O.B.E., J.P., Councillors H. P. BELL, J.P., PEARSON HARRISON, T. E. HUDSON, B. JACKSON, J. W. RICHARDSON, A. TREES, J. WATERS, Mrs. L. L. LEACH, J.P., Mrs. M. A. FLEETHAM, Mrs. SMITH, Miss L. TRINHAM.

HOSPITAL VISITING ROTA SUB-COMMITTEES.

November, December, January, May, June, July.

Alderman A. J. BEST, J.P. (*Chairman*).

Councillors H. P. BELL, J.P., PEARSON HARRISON, B. JACKSON, J. W. RICHARDSON, A. TREES.

February, March, April, August, September, October.

Alderman A. J. BEST, J.P. (*Chairman*).

Alderman T. E. B. BATES, O.B.E., J.P., Councillors M. GALLAGHER, T. E. HUDSON, J. H. TAYLOR, J. WATERS.

MEDICAL AND NURSING SERVICES SPECIAL COMMITTEE.

Alderman T. E. B. BATES, O.B.E., J.P. (*Chairman*).

Aldermen A. J. BEST, J.P., C. H. LEACH, M.B.E., M.A., Councillors W. G. CHANDLER, M.B.E., J.P., J. WATERS.

TUBERCULOSIS SUB-COMMITTEE.

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Alderman T. E. B. BATES, O.B.E., J.P., Councillors T. E. HUDSON, J. WATERS.

COMMITTEE FOR PROMOTING THE WELFARE OF AFFLICTED PERSONS.

Alderman C. H. LEACH, M.B.E., M.A. (*Chairman*).

Alderman T. E. B. BATES, O.B.E., J.P., Councillors H. P. BELL, J.P., W. G. CHANDLER, M.B.E., J.P., T. E. DOUGILL, W. T. GRIFFITHS, J. H. TAYLOR, M.C., F.R.C.V.S., C. J. TODD, J. WATERS, Mrs. J. D. HINKS, Mrs. R. JOHNSON, Mrs. H. MAW.

HOUSING AND TOWN PLANNING COMMITTEE.

Councillor W. HESLOP, J.P. (*Chairman*).

Councillors J. BLUMER, J. CLAYTON, F.R.I.B.A., B. DODD, A. HILDRETH, J. W. RICHARDSON, G. RITCHIE, J.P., T. RODGERS, J.P., R. F. SCOTT, W. G. TODD, A. TREES.

AIR-RAID PRECAUTIONS SUB-COMMITTEE.

His Worship the Mayor, Councillor R. LUCK, J.P. (*Chairman*).

Councillors J. Blumer, R. F. Scott, W. G. Todd, and J. Waters, M.P.S.

STAFF.

Medical Officer of Health, School Medical Officer, Chief Tuberculosis Medical Officer, Medical Certifier under Mental Deficiency Acts, Medical Examiner of Corporation Employees	GEORGE A. DAWSON, M.D., D.P.H., F.R.San.I.
Deputy Medical Officer of Health, Venereal Diseases Medical Officer, Assistant School Medical Officer	WILLIAM HARTSTON, M.D., M.R.C.P., D.P.H. (till 19th Sept., 1936) WILLIAM E. ORCHARD, M.D., Ch.B., D.P.H. (From 14th December, 1936)
Resident Assistant Medical Officer for Maternity and Child Welfare, Supervisor of Midwives, Public Vaccinator	ELIZABETH S. WALKER, M.B., Ch.B., D.P.H., M.M.S.A. (till 14th August, 1936) JANET M. DONE, M.D., B.S., D.P.H. (From 10th October, 1936)
Assistant Medical Officer for Tuberculosis and Public Assistance	HERBERT STANLEY DAVIES, M.R.C.S., L.R.C.P., D.P.H.
Assistant Medical Officer, Municipal Institution and District Medical Officer (part-time)	THOS. L. WORMALD, M.D., D.P.H.
School and Maternity and Child Welfare Dental Officer	J. L. LIDDELL, L.D.S.
Veterinary Inspector, Milk and Dairies Orders (part-time)	C. G. HILL, M.R.C.V.S.
Public Analyst (part-time)....	C. J. H. STOCK, B.Sc., F.I.C.
Senior Sanitary Inspector	A. E. WADE ^{1 2}
Deputy Senior Sanitary Inspector	A. W. R. TURNBULL ^{2 3 4}
Assistant Sanitary Inspectors	G. V. PENN ^{2 3} (till 3rd February, 1936) T. NICHOLSON ^{2 3 4} D. C. NICOL ^{1 0 1 1} (from 16th March, 1936) E. CANHAM ^{2 3} A. STOCKILL ³

Shops Inspector	....	....	....	H. R. KIRK
Senior Health Visitor	....	....	....	MISS K. W. BISHOP ^{1 5 7 8}
District Health Visitors	....	....	....	MISS A. M. MCILWAINE ^{8 9c} MISS E. H. FLEETHAM ^{6 8 9c} MISS E. ROBINSON ^{6 8 9c} MISS M. MILESTONE ^{6 8 9c} MISS V. W. PATTISON ^{6 8 9c} (from 18th May, 1936)

- 1 *Certificate of Royal Sanitary Institute for Sanitary Inspectors.*
- 2 *Certificate of Royal Sanitary Institute for Meat and Food Inspectors.*
- 3 *Certificate of Royal Sanitary Institute and Sanitary Inspector's Joint Board.*
- 4 *Associate of the Royal Sanitary Institute.*
- 5 *Certificate of Royal Sanitary Institute for Health Visitors and School Nurses.*
- 6 *New Health Visitor's Certificate of the Royal Sanitary Institute for Health Visitors and School Nurses.*
- 7 *Certificate of Royal Sanitary Institute for Maternity and Child Welfare.*
- 8 *State Certified Midwife.*
- 9 *State Registered Nurse :—(a) Sick Children ; (b) Fever ; (c) General.*
- 10 *Certificate of Royal Sanitary Association of Scotland for Sanitary Inspectors.*
- 11 *Certificate of Royal Sanitary Association of Scotland for Meat and Food Inspectors.*

Clerical and Office Staff	....	....	....	E. C. STAINSBY (Chief Clerk) MISS F. E. GIBBON I. BURNLEY MISS D. HUTTON MISS L. PHILLIPS MISS D. A. ASHTON S. DALEY D. G. WARDE
Vaccination Officer, Registrar of Births, &c.				J. O. TOMLIN
Venereal Diseases Orderly	....	....	....	J. T. H. LITTON
Disinfector (part-time)	....	....	....	R. JOHNSON
Rat Catcher (part-time)	....	....	....	R. BURNSIDE
M. and C.W. Home Help (full-time temp.) also Rota of Part-time Temporary Home Helps				MISS A. BROCKHILL
Home Visitor for the Blind	....	....	....	C. F. COOKE
Matron, Infectious Diseases and Smallpox Hospitals				MISS FLORA KINNEAR, A.R.R.C., S.R.N. (General and Fever)
Matron Maternity Hospital....	....	....	....	MISS KATE ISOBEL KEMP, S.R.N. (General), Certified Midwife
Superintendent Nurse, Municipal Hospital				MISS A. MORAN, S.R.N. (General), Certified Midwife
Mental Welfare Supervisor, &c.	....	....	....	MISS L. I. HOLMES, B.Litt.
Infant Protection Visitor, Female Relieving Officer (part-time)	....	....	....	MISS V. I. SMILES
Dispenser (part-time)	....	....	....	MISS MARY C. WHYTE (till 7th Nov., 1936)
Dispenser (full-time)	....	....	....	MISS EDITH BEST (from 14th Dec., 1936)

SECTION A.

SUMMARY OF STATISTICS.

Height above sea level, 100-240 feet.

Area of Borough in acres, 6,463.

Resident Population (1931 Census), 72,093. Families 18,309.

„ „ (R. G's. estimate 1936), 75,500.

Density of Population per acre, 11.

Inhabited houses (at 31 March, 1937)—

Dwelling Houses ....	....	21,215
Dwelling Houses and Shops ....	....	777
Licensed Premises ....	....	127
		22,119

	1921 Census	1931 Census
Average size of dwelling	4.41	4.41
Average size of family	4.39	3.82
Families per dwelling	1.06	1.05
Persons per room	0.94	0.91
More than 2 per room density	17.2%....	9.7% population.
Rateable value, £524,716.		
Sum represented by Penny Rate. £2,000		at 1 April, 1937.

	1935	1936
Registered Unemployed (December)	4,604	3,063
Poor Law Relief Cases (December)	1,927	1,743
Birth Rate per 1,000 population	14.8	15.5
Death Rate per 1,000 population	12.2	12.7
Natural Increase	201	210
Infant Mortality Rate per 1,000 births	59	58
Still Birth Rate per 1,000 births	42.0	50.2
Deaths from Measles	4	2
„ „ Whooping Cough	7	0
„ „ Diarrhoea (under 2 years)	0	1.
„ „ Scarlet Fever	2	2
„ „ Diphtheria	13	18
„ „ Typhoid	0	0
„ „ Influenza	11	4
„ „ Pulmonary Tuberculosis	45	63
„ „ Non-Pulmonary Tuberculosis	16	8
„ „ Cancer	112	94
„ „ Circulatory Diseases	281	320
Deaths under 4 weeks....	41	48
Deaths 65 years and over	428	446
Maternal Deaths	3	3

SOCIAL CONDITIONS OF THE AREA.

The town is pleasantly situated, close to the River Tees, ranging from 100 to 240 feet above sea-level. Protected on all sides by high ground the climate is mild, conducing to a profusion of vegetation, which is demonstrated to advantage in the open spaces and parks of which there is ample provision in all parts to the extent of 240 acres. While it is the natural hub of the railways and a marketing centre of a rich agricultural area, of South Durham and North Riding, its inhabitants are principally occupied in highly skilled trades connected with railway engineering, bridge building, heavy castings, wool spinning, and more recently the Imperial Chemical Industries at Billingham and Chemical Insulating Company at Cockerton. The improvement in the Unemployment figures is mainly due to the revival in the Engineering Trade, including the re-opening of the Darlington Forge (figures kindly given me by Mr. Hommert, Manager, Employment Exchange): men 2,562, boys 78, women 217, girls 206.

Poor Law Relief.—I am indebted to Mr. A. J. Shaw, Public Assistance Officer for the following figures:—

The number of persons in receipt of relief on the 1st January, 1937, was 164 in Institutions, 1,016 widows, sick and disabled persons, and 563 unemployed, total 1,743, compared with 1,927 last year, and 2,937 in 1924, which was our peak year.

Influence on Health.—The town prides itself in its reputation for cleanliness, wide well-paved streets, and highly skilled artisan population. The health statistics have characteristics usually associated with residential southern towns rather than the industrial north. No particular occupation is exercising its influence in lowering the public health.

Births and Deaths.—

Live Births:—	Total	M.	F.	
Legitimate	1,117	537	580	B.R. per 1,000 population, 15.5.
Illegitimate	55	18	37	
Still Births	62	34	28	Rate per 1,000 total (live and still) births, 50.2.
Deaths	962	512	450	D.R. per 1,000 population, 12.7.

Crude Death-rate, 12.7.

Death-rate adjusted with comparability factor of 1.05 supplied by the Registrar-General = 13.3.

Deaths from puerperal causes; from sepsis, 1; other causes, 2. Rate per 1,000 total births; sepsis, 0.81; other causes, 1.62.

Death rate of Infants under one year:—

All Infants per 1,000 live births	58.0
Legitimate Infants per 1,000 legitimate live births	59.0
Illegitimate Infants per 1,000 illegitimate live births	36.3

CORONER'S INQUESTS.

There were 51 inquests on Darlington residents, 10 of which were held outside Darlington. Eleven inquests were held in Darlington on deaths transferable to other areas. Post mortems were held in 35 cases including 6 outward transfers. Eleven deaths were suicidal, 9 men and 2 women choosing this method of deliberately leaving this life. Street accidents and other violence accounted for 38 deaths compared with 32 last year.

DEATHS IN INSTITUTIONS.

	Residents.	Others	Total.
Municipal Institution	113	8	121
Memorial Hospital	147	67	214
Greenbank Maternity Hospital	10	0	10
Infectious Diseases Hospital	25	10	35
Nursing Homes	10	5	15
Totals	305	90	395
In other Institutions	26	—	26

Proportion in Institutions (331) to total deaths of Darlington residents (962) 34.4%.

Comparative Table of Vital Statistics, 1921-1936.

Year.	Estimated Population.	Birth-Rate.		Death-Rate.		Infant Mortality.	
		Darlington.	England & Wales.	Darlington.	England & Wales.	Darlington.	England & Wales.
1921	66,400	23.9	22.4	12.3	12.1	98	83
1922	66,710	22.6	20.6	14.1	12.9	98	77
1923	67,390	21.5	19.7	11.9	11.6	67	69
1924	68,690	20.2	18.8	12.7	12.2	94	75
1925	69,130	18.6	18.3	12.7	12.2	106	75
1926	70,700	17.9	17.8	11.9	11.6	91	70
1927	71,430	16.1	16.7	11.6	12.3	67	69
1928	71,560	15.9	16.7	10.4	11.7	59	65
1929	71,790	16.8	16.3	13.1	13.4	81	74
1930	72,380	16.8	16.3	11.5	11.4	76	60
1931	72,750	15.3	15.8	12.5	12.3	73	66
1932	72,820	15.6	15.3	11.2	12.0	67	65
1933	73,340	13.8	14.4	12.0	12.3	67	64
1934	74,550	14.8	14.6	10.8	11.8	60	59
1935	75,300	14.8	14.7	12.2	11.7	59	57
1936	75,500	15.5	14.8	12.7	12.1	58	59

LEGISLATION DURING 1936.

Public Health Act, 1936 ; Midwives' Act, 1936 ; Housing Act, 1936 ; The Housing Acts (Forms of Orders and Notices) Regulations, 1936 ; Housing, Public Rights of Way, S.R. & O., 1936, No. 740 ; Housing—Equalisation Account, S.R. & O., No. 741 ; The Housing Acts (Overcrowding and Miscellaneous Forms) Regulations, 1936 ; The Housing Act (Forms of Orders and Notices) Regulations, 1937 ; The Housing Act (Extinguishment of Public Right of Way) Regulations, 1937 ; The Housing Act (Overcrowding and Miscellaneous Forms) Regulations, 1937 ; Housing—Bridge Street Confirmation Order, 1935 ; The Housing Act, 1935 (Operation of Overcrowding Provisions) Order (No. 4), 1936 (reappointed Days) ; The Housing Act, 1935 (Operation of Overcrowding Provisions) Order, 1936 (Re entries in rent books and offences in relation to overcrowding) ; Retail Meat Dealers' Shops (Sunday Closing) Act, 1936 ; Shops Act, 1936 (re Lending Libraries) ; Shops (Sunday Trading Restriction) Act, 1936 ; The Public Health (Meat) Amendment Regulations, 1935 ; Regulations prescribing new Grade Designations for eggs and definitions of quality under Agricultural Produce (Grading and Marking) Act, 1928 ; The National Health Insurance (Medical Benefit) Regulations, 1936 ; The Poole Joint Sanatorium Order, 1936 ; The Medical Practitioners (Fees) Regulations, 1936.

Ministry of Health Circular 1539—overcrowding provisions—Appointed Days ; Circ. 1560, Overcrowding, entries in rent books ; Circ. 1591, Overcrowding, action to be taken by Local Authorities ; Memo. 197/Foods under Sale of Milk under Special Designations ; Circ. 1580, under Milk (Special Designations) Order, 1936 ; Memo. 139 (Foods), Bacteriological Tests for Graded Milk ; Circ. 1544, advising discontinuance of use of "Orthodichlorobenzene" for disinfestation of inhabited houses infested with bugs ; Circ. 1461 under The Public Health (Meat) Regulations, 1935 ; Circ. 1586 and Memo. 166/Med. (Revised) on Acute Poliomyelitis ; Circ. 1563 and Memo. 199/Med. under Therapeutic Substances Regulations, 1921, re Sterilized Surgical Catgut ; Circ. 1550 (England), Supervision of Health of children under School age ; Circ. 1574, Supervision and registration of Nursing Homes ; Circ. 1582, re Fees of Medical Practitioners called in by Midwives ; Home Office Memo. Poisons No. 3 (Practitioners and Hospitals) under Pharmacy and Poisons Act, 1933 ; Circ. 577, 163/24 under Retail Meat Dealers' Shops (Sunday Closing) Act, 1936 ; Circ. 694, 628/3 under Shops Act, 1936 ; Board of Education Circ. 1450, Clothing and Shoes for Physical Training.

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

All the Municipal Medical Services are co-ordinated under the Medical Officer of Health.

LABORATORY FACILITIES.

The work at Armstrong College included the examination of 114 specimens for Tuberculosis, 64 for Diphtheria, 50 for the Enteric Group, 241 for Wassermann Tests and 22 for other Tests of Syphilis. In our own

Department in Darlington there were examined 1,180 specimens microscopically in connection with the Venereal Diseases Clinic and 137 specimens in connection with the Tuberculosis Dispensary. The analysis of clinical material is carried out at the Clinics and Hospitals as far as possible. X-Ray examinations are made by Dr. Crichton Fothergill at his own residence in Trinity Road.

AMBULANCE FACILITIES.

Two ambulances for Infectious Diseases and three for accidents are available.

NURSING IN THE HOME.

This work was done by the Queen's Nurses' Association as before.

The extent of the work will be realised from the following figures :—

Visits to expectant mothers 603, puerperal infection 12, ophthalmia neonatorum 18, post natal cases 186, measles and pneumonia 55, whooping cough and pneumonia 15, acute primary pneumonia 609, sick children under 5 years of age 1,082—a total of 2,580 visits, carried out by a complement of 12 nurses.

PUBLIC ASSISTANCE MEDICAL SERVICE.

This is now part of our co-ordinated scheme of Public Health. The Medical Officer, who is also Assistant Medical Officer of Health and Assistant Tuberculosis Officer, is responsible to the Medical Officer of Health for all duties under the Public Assistance Order, 1930, except for domiciliary visiting which is undertaken by Dr. Wormald who is a general practitioner in the town.

Out-patient Dispensary.—An out-patient Dispensary is held every morning at 9-0 a.m., and the following types of case attend :—

- (1) Applicants for relief who are unable to work on grounds of illness, requiring certificates to bring before the Public Assistance Committee.
- (2) Persons in receipt of relief applying for medical treatment and medical extras. These may come direct to the Dispensary or they may be referred from the Tuberculosis Clinic, the Maternity and Child Welfare Centres, the School Clinic, or the Venereal Diseases Clinic.
- (3) Persons who are not in receipt of relief but who cannot afford a private practitioner, or persons who are not entitled to National Health Insurance treatment, or have run out of benefit and need medical treatment and medical extras.
- (4) Persons referred by medical practitioners on clubs or panel, for medical extras,

- (5) Applicants for medical treatment and relief, who are unemployed persons, 65-70 years old, not entitled to pensions but who are too old for employment.
- (6) Widows and old age pensioners not in receipt of relief, who are applicants for medical treatment and medical extras.
- (7) Men on Test work applying for medical treatment and to be excused from Test work on grounds of illness.

Except for the examination and certification which is peculiar to the Public Assistance work, the type of medical treatment undertaken is similar to that in general practice. Special examinations, however, minor operations, injections, immunisations, etc. are done by the Public Assistance Medical Officer at a Special Clinic at the Municipal Hospital.

The number of attendances at the Dispensary is approximately the same as in the previous year.

The appointment of a whole time Clerk-Dispenser has resulted in an increase in the efficiency of the Dispensary and the Medical Officer has been able to spend more time in examining the patients.

Municipal Hospital.—The amenities of this Institution have been increased, and more use has been made of the facilities provided. As indicated above, a Special Clinic has been instituted in which minor operations are performed and special treatment given, including phenyl-ethyl-hydno-carbate injections for lupus, arsenical injections for syphilis, injections for varicose veins, aspiration of cold abscesses, aspiration of pleural effusions, injection of gold salts and tuberculin for tuberculosis.

The sanatorium department is referred to in the Report on Tuberculosis.

Venereal diseases are treated in consultation with the Venereal Diseases Officer, and the most modern treatment is carried out.

Besides a large number of chronic and senile cases, acute medical cases have been treated, more especially diseases of the cardio-vascular system, respiratory system, feeding disorders of infancy, and skin diseases. Palliative treatment is also provided for cancer cases which have already received the appropriate surgical or radiological treatment in other Institutions.

The work of rebuilding and modernising the Hospital is now well in hand and we have every reason to hope that full use will be made of it in the future.

The special children's department has already been used for cases of juvenile rheumatism requiring prolonged rest in bed and there is ample accommodation for this type of case in connection with the School Medical Service.

MEDICAL EXAMINATION OF CORPORATION EMPLOYEES.

	1935	1936
Tramways and Transport Department	74	66
Borough Surveyor's Department	26	10
Education Department	11	11
Borough Treasurer's Department	17	11
Gas Department	1	5
Electricity Department	9	17
Borough Fever Hospital....	5	2
Public Assistance Department	5	1
Health Department	15	6
Public Library	1	3
Fire Station	3	1
Town Clerk's Department	1	4
Markets' Department	1	—
Total	169	137

MENTAL DEFICIENCY.

The following Institutions were occupied as shown on 1st January, 1937 :

Prudhoe Hall Colony	48
Municipal Institution, Darlington	2
Rampton State Institution, Retford	2
Royal Albert Institution, Lancaster	2
Monckton Hall, Jarrow	1
Pield Health House, Hillingdon	1

A Local Voluntary Committee of the Mental Welfare Association (Secretary, Miss L. I. Holmes, B.Litt.) undertakes the supervision and organisation of the Occupation Centres for low grade and such suitable cases, at the Kendrew Street School, and the Municipal Institution.

PARTICULARS OF MENTAL DEFECTIVES AS ON 1st JANUARY, 1937 :—

(A.) "Subject to be dealt with" by the Local Authority.

(B.) Who may become "subject to be dealt with" by the Local Authority.

A.—NUMBER OF MENTAL DEFECTIVES ASCERTAINED TO BE "SUBJECT TO BE DEALT WITH" :—

1. Under "Order" :—		M.	F.	T.
(a) (1) In Institutions (excl. cases on Licence) ...	Under 16 years of age ...	2	5	7
	Aged 16 years and over ...	28	21	49
(2) On Licence from Institutions	Under 16 years of age ...	—	—	—
	Aged 16 years and over ...	3	3	6
(b) (1) Under Guardianship (excl. cases on Licence) ...	Under 16 years of age ...	—	—	—
	Aged 16 years and over ...	—	1	1
(2) On Licence from Guardianship ...	Under 16 years of age ...	—	—	—
	Aged 16 years and over ...	—	—	—
2. In "places of safety" ...	Under 16 years of age ...	—	—	—
	Aged 16 years and over ...	—	—	—
3. Under Statutory Supervision ...		26	23	49
Of whom :—				
Awaiting removal to an Institution ...		2	—	2

BLIND PERSONS.

The supervision of blind persons is entirely under the Local Authority. Every case is certified by an Ophthalmic Surgeon and then registered and supervised under the Committee for Promoting the Welfare of Afflicted Persons.

Registered and classified by age as at the 31st March, 1937 :—

0-5 yrs.	5-16	16-21	21-40	40-50	50-65	65-70	70	Total.
0	2	0	11	7	26	14	31	91

Age at which blindness occurred :—

0-1 yr.	1-5	5-10	10-20	20-30	30-40	40-50	50-60	60-70	70
10	1	3	3	7	6	12	18	15	16

At the age of 16 and upwards two are employed in workshops, three as home workers and eight in other ways, while 76 are unemployable. Five are physically defective, and two are deaf.

Grants are made to the unemployable blind, and to the partially employed according to their individual means, up to £1-7-6 per week, subject to quarterly review.

NATIONAL HEALTH INSURANCE.

The total number of Insured Persons in Darlington on 31 Doctors' Lists was 28,829, the prescriptions issued 102,458, and the total cost of the drugs £3,243 10s. 8d.

HOSPITALS.

MUNICIPAL INSTITUTION.

Classification of Wards	Number of Wards.	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total	
		Pro-vided	Occu-pied	Pro-vided	Occu-pied	Pro-vided	Occu-pied	Pro-vided	Occu-pied
*1. Medical ...	6	45	33	31	30	...	...	76	63
*2. Surgical ...									
*3. Chronic Sick ...									
4. Children ...	3	...	...	...	...	20	1	20	1
5. Venereal ...	...	...	...	...	...	...	...	...	...
6. Tuberculosis ...	2	9	7	9	1	4	1	22	9
7. Isolation ...	3	8	...	4	...	...	...	12	...
8. Maternity ...	1	...	...	9	2	...	...	9	2
9. Mental ...	2	5	...	4	...	...	...	9	...
*(a) Lunacy Act, 1890 (Long Stay)	...	...	...	1	1	...	...	1	1
(b) Mental Treatment Act, 1930	...	...	...	...	...	...	...	...	...
*10. Mental Defectives ...	...	1	1	2	2	...	...	3	3
11. Other ...	...	...	...	...	...	...	...	...	...
Total ...	17	68	41	60	36	24	2	152	79

*In General Medical and Surgical Ward.

Statistics relating to the Year ended 31st December, 1936.

In-Patients.

1.	Total number of admissions (including infants born in Hospital)	544
2.	Number of women confined in Hospital	20
3.	Number of live births	20
4.	Number of Still-Births	—
5.	Number of deaths among the newly born (i.e., under four weeks of age)	—
6.	Total number of deaths among children under one year (including those given under 5)	3
7.	Number of Maternal deaths among women admitted to Hospital for confinement	—
8.	Total number of deaths	121
9.	Total number of discharges (including infants born in Hospital)	426
10.	Duration of stay of Patients included in 8 and 9 above—	
	Number of cases whose total stay was for the following periods:—	
	(a) Under four weeks	295
	(b) Four weeks and under thirteen weeks	111
	(c) Thirteen weeks or more	20
11.	Number of Beds occupied (excluding cots in maternity wards):—	
	(a) Average during the year	80
	(b) Highest (26th March, 1936)	98
	(c) Lowest (24th December, 1936)	68
12.	Number of surgical operations under general anæsthetic (excluding dental operations)	5
13.	Number of abdominal sections	—

Classification of In-Patients who were discharged from or who died in the Municipal Institution during the Year ended 31st December, 1936.

DISEASE GROUPS	Children (under 16 years of age).		Men and Women.	
	Dis- charged	Died	Dis- charged	Died
Acute Infectious Disease	3	—	3	1
Influenza	—	—	—	—
Tuberculosis—				
Pulmonary	2	—	33	12
Non-Pulmonary	2	—	1	—
Malignant Disease	—	—	1	8
Rheumatism—				
(1) Acute Rheumatism (Rheumatic Fever) together with sub-acute Rheumatism and Chorea	3	—	—	—
(2) Non-articular manifestations of so- called "Rheumatism" (Muscular Rheumatism, Fibrositis, Lumbago and Sciatica)	—	—	4	—
(3) Chronic Arthritis	—	—	6	1
Venereal Disease	1	—	3	—
Puerperal Pyrexia	—	—	1	—
Puerperal Fever { (a) Women confined in the Hospital	—	—	1	—
(b) Other Cases	—	—	—	—
Other Diseases and Accidents connected with Pregnancy and Child-Birth	—	—	1	—
Mental Diseases { (a) Senile Dementia	—	—	9	—
(b) Other	—	—	40	—
Senile Decay	—	—	31	45
Accidental Injury and Violence	5	—	14	2

In respect of Cases not included above.

						Dis- charged	Died	Dis- charged	Died
Disease of the Nervous System and Sense									
	Organs	....	....	....	....	2	1	20	—
"	"	Respiratory System	....	....	....	20	2	28	8
"	"	Circulatory	"	....	....	2	—	42	36
"	"	Digestive	"	....	....	10	—	18	1
"	"	Genito-Urinary	"	....	....	1	—	7	1
"	"	Skin	....	....	....	24	—	27	—
Other Diseases						9	—	13	3
Mothers and Infants discharged from Maternity Wards and not included in above figures									
						Mothers		20	—
						Infants		19	—
Totals						103	3	323	118

SUMMARY OF INSTITUTIONAL ACCOMMODATION.

				Men	Women	Children	Total
General, Medical and Surgical	}	Municipal P. A. Institution	....	16	14	20	50
		Memorial Hospital	....	80	80	40	200
Maternity	....	Greenbank Hospital	....	—	18	—	18
		Municipal P.A. Institution	....	—	2	—	2
Venereal Diseases	....	Memorial Hospital	....	1	1	—	2
Tuberculosis	....	Municipal P.A. Institution	....	9	9	4	22
		Durham County Council	....	15	15	5	35
		Stannington Sanatorium	....	—	—	10	10
		Borough Isolation Hospital	....	—	9	—	9
Chronic Sick	....	Municipal P.A. Institution	....	30	20	—	50
Mental	....	Durham County Council, Sedgfield Mental Hospital	....	70	70	—	140
		Municipal P.A. Institution	....	—	—	—	—
Mental Deficiency		Prudhoe Hall Colony	....	20	18	—	38
		Municipal P.A. Institution	....	6	6	—	12
Isolation	....	Municipal P.A. Institution	....	8	4	—	12
		Borough Hospital:—					
		General Infections	....	—	—	—	106
		Smallpox	....	—	—	—	46
Orthopaedic, Eye, Ear, Nose and Throat, &c. Included in above.							
Puerperal Fever, &c.		Borough Isolation Hospital		—	2	—	2
Mothers and Children		Municipal Institution	....	—	12	12	24
		C. U. Peat Convalescent Home, Wycliffe.	....	—	6	6	12

MIDWIFERY AND MATERNITY SERVICES.

	Greenbank Maternity Hospital	Municipal Institution
Beds	18	2
Cases admitted	212	20
Average duration of stay	12 days	14 days
Cases delivered by—		
(a) Midwives	161	19
(b) Doctors	18	1
Medical assistance sought	30	11
Cases of Puerperal Fever	0	1
Cases of Puerperal Pyrexia	8	1
Pemphigus	0	0
Infants not breast fed	8	1
Ophthalmia Neonatorum	3	0
Maternal Deaths	2	0
Foetal Deaths—		
Still-born	20	0
Within 10 days	7	0

CLINICS AND TREATMENT CENTRES.

SUMMARY.

Medical Officer of Health, Health Department, Greenbank, Darlington.
(Telephone 2290).

Municipal Maternity and Child Welfare Centres.—Mothers and children under 5 :—

Greenbank Health Centre	Monday	2-0 p.m.
Albert Road Schoolhouse	Tuesday	10 a.m. and 2-0 p.m.
Dodmire, Falmer Road	Wednesday	2-0 p.m.
Paradise Sunday School, Coniscliffe Road	Thursday	10-30 a.m. and 2-0 p.m.
Cockerton Methodist Sunday School	Friday	2-0 p.m.
Haughton-le-Skerne Church Hall	Friday	2-0 p.m.
Expectant Mothers' Clinic, Albert Road Schoolhouse	{ Wednesday } { Thursday }	10-0 a.m. to 12-0 noon
Dental Clinic for Mothers and Children under 5	By arrangement through Centres, on Saturday, 10 a.m.	

A Lady Doctor and Health Visitor are in attendance.

Maternity Home Help Service.—Applications to be made to the Health Visitors, Health Department.

Municipal Maternity Hospital, Health Department, Greenbank, Darlington.—18 beds. (Tel. 2290).

Ante-Natal Clinic, Wednesday, 2-3 p.m. Thursday, 11-0 a.m.—12 noon

Public Vaccinator.—Dr. Janet M. Done, Health Department, Greenbank.

Vaccination Officer.—Mr. J. O. Tomlin, 161 Northgate.

Voluntary Ante-Natal Clinic, Darlington Queen's Nurses' Association, Woodland Road, by arrangement, when booking a Queen's Nurse. (Tel. 2595.)

District Nursing and Midwifery.—Darlington Queen's Nurses' Association, Woodland Road. Tel. 2595.

Venereal Diseases.—Health Department, Greenbank. (Tel. 2290).

Women and Children	....	Monday, Tuesday, Friday	....	2—4 p.m.
Men	....	Tuesday, Friday	....	5-30—7 p.m.
Men	....	Tuesday	....	10 a.m.—12 noon.
Women	....	Wednesday	....	5 p.m.

Tuberculosis Dispensary.—Health Department, Greenbank. (Tel 2290).

Women and Children	....	Friday	....	At 9-30 a.m.
Men and Boys	....	Wednesday	....	At 9-30 a.m.

Tuberculosis Care Committee.—Hon. Secretary, Dr. G. A. Dawson, Health Department, Greenbank. Meetings held monthly on the third Tuesday. (Tel. 2290).

School Medical Services.—Inspection in Schools and at School Clinic, Greenbank, where Doctor, Dental Surgeons and Nurses are in attendance daily. Minor Ailments, Eye, Dental and Sunlight Clinic. (Tel. 2290).

Special Schools.—George Dent Nursery School 100 places ; Barnard Special School (M.D.) 80 places ; Open-Air School 134 places.

Infectious Diseases Hospitals.—Hundens Lane. 152 beds. (Tel. 2425).

Mental Treatment Clinic.—Health Department, Greenbank, Thursday, 2-30 p.m. (Tel. 2290).—Dr. G. S. Wilson, Superintendent Durham C.C. Mental Hospital.

Mental Deficiency.—Occupation Centres : Supervisor, Miss L. I. Holmes, B.Litt., Education Office. (Tel. 2295).

Blind Persons.—Home Visitor and Teacher, Mr. C. F. Cooke, Health Department, Greenbank.

Public Assistance.—Out-patient Clinic, Public Assistance Offices, East Street, at 10 a.m. daily. (Tel. 3470).

Municipal Hospital, 108 Yarm Road.—120 beds for all types of disease. (Tel. 2421).

Infant Life Protection.—Miss V. I. Smiles, Infant Protection Visitor, Public Assistance Offices, East Street. (Tel. 3470).

MATERNITY AND CHILD WELFARE.

The work was continued as before with the headquarters at Greenbank in the Maternity Hospital and Clinic, while the district work was distributed over the centres at Albert Road, Paradise, Dodmire, Cockerton and Haughton. This ensures that no mother has to walk an excessive distance to her nearest centre. There were 298 sessions, and 16,268 attendances, a reduction of 699 compared with last year. The average attendance per session was 55 compared with 58 in 1935. In addition 302 attendances were made by 63 mothers from outside the Borough. In these cases extra nourishment is paid for by the County authority.

The Average Attendances of Mothers with Babies at Maternity Centres during the year was:—Albert Road 99.8, Dodmire 49.8, Paradise 84.9, Greenbank 24.3, Cockerton 43.8, Haughton 23.9.

Ante-Natal Clinics.—At Albert Road Clinic there were 104 sessions, 203 new cases, and 912 attendances, compared with 105, 202 and 908 respectively last year. It is disappointing that with increased facilities and sessions, the attendances have not been greater and also, that the midwives do not appear to be using this clinic as much as they should for their difficult cases. Many of the mothers only desire free milk rather than the all important advice which is the true purpose of the clinic.

At the Maternity Hospital clinic, 185 expectant mothers made 911 attendances, and 102 mothers 132 attendances at the Queen's Nurses' Clinic. In addition the Queen's Nurses paid 603 home visits to 203 expectant mothers and 186 post-natal visits.

The total number of mothers receiving ante-natal care from the clinics and Queen's Nurses was 529—44.4% of the total births. A very high standard of general ante-natal care is now given by the general practitioners of the town following circular letters on the subject of Maternal Mortality.

Midwives' Acts.—Of the 36 midwives notifying their intention to practise 31 were still in practice at the end of the year, of which 9 were Queen's Nurses, 5 were in the Municipal Institution, and 4 at the Greenbank Maternity Hospital.

Midwives attended 987 births alone and 278 under the supervision of medical practitioners. Medical assistance was sought in 225 instances, including 35 cases in the Maternity Hospital. The Council paid £203 to doctors and recovered £159 for these services.

In 37 necessitous cases not in receipt of Maternity Benefits the Health Committee guaranteed the midwife's fee (30s. 0d.) and recovered according to circumstances.

Midwives' Act, 1936.—A survey of the needs of the town indicates that nine wholtime midwives should be sufficient to undertake the district work. Statutory notices have been sent to all practising midwives and it is hoped the scheme will be in full operation by July 30th, 1937.

In the preparation of the scheme, meetings have been held with the British Medical Association, the Queen's Nurses' Association and the voluntary institutions. Two of the midwives will be supplied by the Queen's Nurses' Association.

PROPOSALS OF THE DARLINGTON COUNTY BOROUGH COUNCIL FOR THE ESTABLISHMENT OF A SALARIED MIDWIVES SERVICE.

1. It is estimated that the number of domiciliary confinements which are likely to be attended in the County Borough of Darlington each year (a) by midwives, will be 700, and (b) by medical practitioners, will be 200.

2. The Local Supervising Authority (hereinafter called "the Council") have consulted the Darlington Branch of the British Medical Association and the Queen's Nurses' Association, and have considered representations made by the Darlington Branch of the Midwives' Institute.

3. On the basis of the figures set out in paragraph 1, after allowing for a possible diminution in the number of cases confined in hospital and for a reduction for those women who besides engaging a medical practitioner normally employ also a resident maternity nurse, it is proposed:—

(a) To make arrangements with the Darlington Queen's Nurses' Association (a voluntary organisation) for securing that the Association will always have available for service in the County Borough two certified midwives,

(b) That the Council shall themselves appoint seven full-time certified midwives, two of whom shall be resident at the Greenbank Health Centre, Darlington,

and that the midwives so employed shall be available in the County Borough for attendance on women as midwives or as maternity nurses.

4. (1) The proposed conditions of service of the seven midwives to be employed by the Council are as follows:—

(i) *Midwives resident at Greenbank.*

(a) Salary £110 per annum ;

(b) Board and lodgings, uniform and laundry, £70 per annum ;

(c) Travelling expenses, £4 per annum ;

(d) 21 days' leave per annum.

(ii) *Other Midwives.*

(a) Salary £180 per annum ;

(b) Allowance for travelling, uniform and laundry, £20 per annum ;

(c) 21 days' leave per annum.

(2) The Council's requirements as to age limits for appointments and the retirement of female employees on marriage shall not be applicable to these appointments.

5. It is proposed to enter into an Agreement with the Darlington Queen's Nurses' Association, securing—

- (a) That the Association will always have available for service in the County Borough two certified midwives ;
- (b) That the Council shall pay to the Association the sum of £400 per annum, this sum to be adjusted in conformity with the number of cases treated by the Association per annum ; and
- (c) That the Association shall collect the fees from patients treated by them (including a booking fee of 5s. 0d.) and account to the Council therefor.

6. The fees to be charged to patients shall be as follows :—

	<i>For services as midwife</i>	<i>For services as maternity nurse</i>
(i) Where the family income exceeds the scale set out below	£2	£2
(ii) Where the family income does not exceed the scale set out below	£1	£1

such fees to include a booking fee of 5s. 0d.

*** The Scale referred to.**

Man and Wife £1 per week after deducting rent and rates.

Man, Wife and one Child £1 5s. per week „ „ „

Man, Wife and two Children £1 10s. per week „ „ „

plus 5s. 0d. per week in respect of each additional child.

7. The fees in accordance with paragraph 6 shall in the case of the midwives to be appointed by the Council be collected by the midwives from the patients and accounted for to the Council.

* This Scale is the one used by the Council in calculating the assistance to be given in necessitous cases.

**LIST OF MIDWIVES NOTIFYING THEIR INTENTION TO PRACTISE
IN THE COUNTY BOROUGH OF DARLINGTON DURING 1936.**

No. on Roll.	Date of Enrolment.	Name.	Address.
82840	27 February, 1932 ...	Barnes, Florence ...	Queen's Nurses' Association, Woodland Road
78715	16 August, 1930 ...	Bragg, Freda ...	Municipal Institution.
38129	16 June, 1913 ...	Bush, Beatrice ...	18 The Byway, Yarm Road.
78100	30 May, 1930 ...	Coates, Emma ...	Queen's Nurses' Association, Woodland Road
72015	24 November, 1927...	Cockcroft, Florence R.	Municipal Institution
88167	23 November, 1933	Davies, Winnie Girling	Queen's Nurses' Association, Woodland Road
74455	2 December, 1928 ...	Elliott, Dorothy ...	Queen's Nurses' Association, Woodland Road
43728	22 February, 1916 ...	Gait, Sarah Ann ...	12 Thornton Street.
67753	12 December, 1925 ...	Goodfellow, Violet Jane	26 Post House Wynd.
55344	11 October, 1921 ...	Hancock, Ellen ...	41 Yarm Road.
71551	13 August, 1927 ...	Harris, Elizabeth ...	89 Salisbury Terrace
90678	August, 1934 ...	Hellon, Clara Louisa	Queen's Nurses' Association, Woodland Road
50575	14 February, 1920 ...	Heslop, Frances ...	55 Surtees Street.
95321	15 November, 1936	Hindmoor, Elsie ...	Municipal Institution.
46105	11 August, 1917 ...	Hoskins, Sarah ...	120 Lansdowne Street.
58912	13 December, 1922	Jenkin, Jane ...	40 Willow Road.
57442	10 June, 1922 ...	Johnson, Bertha ...	Municipal Institution.
93030	25 May, 1936 ...	Johnston, Rose Ann...	Queen's Nurses' Association, Woodland Road
71612	13 August, 1927 ...	Kemp, Kate Isobel ...	Greenbank Maternity Hospital
60455	11 June, 1923 ...	Kirby, Ethel Mary ...	14 Rydal Road
96233	23 May, 1936 ...	Makin, Mary Eliz. ...	Greenbank Maternity Hospital
66938	15 August, 1925 ...	Moran, Anne ...	Municipal Institution.
45456	15 April, 1917 ...	Moran, Mary Agnes	Municipal Institution.
71657	13 August, 1927 ...	McLaughlin, Lily A.	Greenbank Maternity Hospital
73495	28 May, 1928 ...	Ogden, Alice ...	Queen's Nurses' Association, Woodland Road
87013	27 May, 1933 ...	Pattison, Evelyn ...	Queen's Nurses' Association, Woodland Road
90884	11 August, 1934 ...	Pratt, Mary Nelson ...	Greenbank Maternity Hospital
90395	10 August, 1934 ...	Ratcliffe, Ellen ...	Queen's Nurses Association, Woodland Road
64585	11 October, 1924 ...	Redhead, Isabel ...	49 Thompson Street West.
80497	23 February, 1931 ...	Senior, Mabel ...	96 Coniscliffe Road.
65529	9 February, 1925 ...	Smith, Annie ...	87 Gurney Street.
95646	February, 1936 ...	Stott, Bessie ...	Queen's Nurses' Association Woodland Road
17902	23 March, 1905 ...	Trinham, Louisa ...	Queen's Nurses' Association, Woodland Road
65116	8 December, 1924 ...	Watson, Ellen ...	32 Greenbank Road
71842	13 August, 1927 ...	Waugh, Lavinia ...	Municipal Institution
9115 (Scotland)	29 October, 1930 ...	Young, Helen Murray	Queen's Nurses' Association, Woodland Road

Midwives calls to Doctors.

Summary of the causes for sending for Medical help.

	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936
Mother :—											
Torn Perineum	18	32	15	33	27	31	38	30	33	47	35
Prolonged, Tedious or Difficult Labour	18	24	32	35	32	42	31	32	30	53	41
Faulty Presentations	7	10	7	5	9	13	15	10	6	11	17
Impactions	4	3	1	—	—	—	1	—	—	—	—
Hæmorrhages	4	10	17	10	11	8	14	10	9	13	9
Rise of Temperature	7	4	7	5	4	10	6	5	7	9	9
Adherent Placenta	8	1	5	4	5	—	1	4	2	5	4
Albuminuria	1	6	2	3	5	6	10	9	6	11	7
Phlebitis	1	1	2	—	—	—	—	—	—	1	—
Abortion	8	5	14	3	10	11	4	5	9	4	3
Contracted Pelvis	2	2	—	—	—	—	1	—	1	1	—
Eclampsia	3	—	—	—	1	2	1	—	1	1	—
Prolapse of Cord	2	—	1	1	—	—	—	—	1	—	—
Miscellaneous	11	10	12	8	17	14	16	18	19	16	17
Total	94	108	115	107	121	137	138	123	124	172	142
Child :—											
Discharging Eyes	8	13	8	8	6	5	4	1	5	4	8
Debility, Feebleness, etc.	2	1	5	4	5	5	9	9	5	7	4
Prematurity	5	10	4	2	7	9	1	9	6	9	6
Malformations	1	1	2	8	7	4	6	2	1	3	4
Convulsions and Fits	—	4	2	3	7	2	3	4	1	—	3
Suffocation	—	2	1	—	1	1	—	1	—	2	—
Miscellaneous }	12	5	8	6	11	2	7	5	10	6	3
Still-Births }	—	—	—	—	—	17	10	18	11	18	20
Total	28	36	30	31	44	45	40	49	39	49	48

The following Table shows how the charges for the above cases had been dealt with at the conclusion of each year :—

	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936
No Account received	43	40	43	40	52	42	38	34	39	51	20
Account received	79	104	102	98	113	140	140	138	124	170	170
Full Fee paid or charged	47	79	58	62	58	80	88	91	96	134	141
No Fee charged	24	21	37	32	44	40	29	34	21	23	24
Part Fee remitted and part charged	8	4	7	4	11	20	23	13	7	13	5
Amount paid to Doctors	£121	£143	£160	£145	£158	£208	£175	£198	£194	£219	£203
Amount recovered from Patients	£76	£105	£78	£82	£64	£85	£110	£81	£118	£174	£159
Cost to Council	£45	£38	£82	£63	£94	£123	£65	£117	£76	£45	£44

Milk Assistance Scheme.—Milk is granted free on the Clinic Medical Officer's recommendations to infants and to expectant and nursing mothers in necessitous cases.

During 1936, 1,405 pounds of dried milk were sold at cost price, 2,228 were given free, and 12,902 pints of fresh milk were given free at a total cost to the Health Committee of £294. The income in all cases is verified by reference to employers and others.

Home Helps.—One whole-time Home Help and a rota of part-time home helps carried out this work at £2 per week. Charges are made according to financial conditions. The charges vary from 9d. to 2s. 6d. per day according to means and family. Attendance was provided in 85 cases, for 1,256 days.

Maternity Bags.—These bags containing all the linen and other necessities to assist in an aseptic confinement, were applied for and lent in 7 cases. In each case the bag was returned in good condition and the usual deposit of 2s. 6d. paid in 6 cases was refunded. One poor mother was excused the deposit.

Training in Mothercraft.—Senior School girls and Students from the Ladies' Training College are admitted to our centres in order to be introduced to the practical side of sound mothercraft. This has been a most successful part of our work.

Nursery Schools and Classes.—A description of the work done at the Nursery School and Classes and the School Clinic will be found in the Report of the School Medical Officer.

Dental Scheme.—70 mothers and 37 children attended out of 141 cases recommended by the Medical Officer. There were 411 extractions.

Provision of dentures was instituted at the end of the year, and two mothers were supplied with a complete set at the nominal cost to each mother of £1.

Deaths under one month.—Though the death-rates of children under one year have fallen during the last 50 years from 160 to 58 per 1,000 births, no appreciable reduction has taken place in the case of babies under four weeks. Of the 68 deaths under one year, 48 occurred in infants under 4 weeks, mainly owing to prematurity and congenital weakness.

Puerperal Fever.—Ten cases were notified, and five were admitted to the Fever Hospital. One patient died in hospital.

Puerperal Pyrexia.—Twelve cases were notified and one was removed to the Fever Hospital. All recovered.

DEATHS ASSOCIATED WITH CHILD-BIRTH IN 1936.

Date of Death	Initials	Age	Borough or Rural	Confinement	Cause of Death	Ante-Natal Care given	Where Died
2/3/1936	E.W.	21	Borough	1st	I (a) Sudden Heart Failure and Shock. (b) Difficult delivery of a monster.	Midwife	Greenbank Maternity Hospital
7/4/1936	E.W.O.	21	Borough	1st	I (a) Puerperal Fever. (b) Nephritis and Stillborn premature child.	Midwife	Fever Hospital
27/4/1936	A.J.S.	27	Rural	1st	I (a) Cardiac Failure. (b) Uræmia. (c) Hyperemesis Gravidarum.	None	12 Davison Road
/6/1936	F.R.	29	Borough	1st	Toxaemia of pregnancy and eclampsia.	Midwife	At Home
17/6/1936	E.S.A.	29	Borough	1st	I (a) Chronic Nephritis II Parturition.	Midwife	Green bank Maternity Hospital
20/10/1936	D.M.S.	30	Rural	1st	I (a) Hyperemesis Gravidarum.	Unknown	Coniscliffe Nursing Home

WORK OF THE HEALTH VISITORS.

First visits to Infants under one year	....	....	1,076
Re-visits to Infants under one year	....	....	3,003
Children one to five years	....	....	5,840
Measles, one to five years	....	....	282
" over five years	....	....	8
Chickenpox	....	....	1
Whooping Cough	....	....	52
Ophthalmia Neonatorum	....	....	13
Poliomyelitis	....	....	1
Infant Deaths	....	....	52
Still-births	....	....	64
Diarrhœa	....	....	—
Puerperal Fever	....	....	8
Puerperal Pyrexia	....	....	5
Pneumonia	....	....	14
Expectant Mothers, first visits	....	....	400
" " re-visits	....	....	346
Pulmonary Tuberculosis, first visits	....	....	71
" " re-visits	....	....	608
Other forms of Tuberculosis, first visits	....	....	31
" " re-visits	....	....	356
Maternal Deaths	....	....	8
Miscellaneous Visits	....	....	668

Notified Births.				Live Births		Still-Births		Total	
				M.	F.	M.	F.	M.	F.
Legitimate	....	....	....	568	574	36	28	604	602
Illegitimate	....	....	....	9	23	1	1	10	24
Total				577	597	37	29	614	626
Transfers out (legitimate and illegitimate)				28	14	3	4	31	18
Net Darlington Births				549	583	34	25	583	608
Notified—				{ Gross		....	....	....	947
By Midwives				{ Nett		....	....	....	947
By Doctors				{ Gross		....	....	....	50
				{ Nett		....	....	....	44
By Midwives in Institutions				{ Gross		....	....	....	236
				{ Nett		....	....	....	195
By Doctors in Institutions				{ Gross		....	....	....	7
				{ Nett		....	....	....	5

WORK OF VOLUNTARY COMMITTEE.

This committee has continued to provide help and advice which cannot be given statutorily, and maintains the closest co-operation with this Department. The Committee's thanks are due to Mrs. C. H. Leach, J.P., and her excellent band of helpers in this important side of our activities.

CONVALESCENT HOME TREATMENT.

At the invitation of Miss Margaret Peat, patients under our Maternity and Child Welfare Scheme are admitted during the Winter Season to the Convalescent Home maintained by Miss Peat at Wycliffe. Thirteen mothers and 23 children were admitted under this arrangement.

BABY DAY CELEBRATIONS.

The Annual Celebrations organized by the Voluntary Maternity and Child Welfare Committee and financed by the Health Committee to the extent of £25 were held at Polam Hall, under ideal conditions on 29th and 30th July, 1936, by kind permission of Miss Pim. Over 400 mothers and their children attended.

An excellent Health Exhibition was organized by the Health Visitors, Competitions in mothercraft were also arranged and prizes were given for the best entries in these sections and a display of suitable foods for mothers and children.

Useful garments, given by members of the Voluntary Committee and friends, found ready sale. The proceeds provide a fund for special grants to needy mothers.

The social side of the work was carried off with its usual success in a well set out tea, with music and entertainment, provided by the Voluntary Committee. The prizes for the various entries were distributed at the close of the meetings by the Mayoress (Mrs. T. E. Hudson), the organization being ably undertaken by Mrs. C. H. Leach, J.P.

INFANT LIFE PROTECTION.

The number of nurse-children on the Register undertaken for reward at the beginning of the year as reported by Miss V. I. Smiles, Infant Protection Visitor, was 17, and at the end of the year 13. No proceedings were taken or orders obtained during the year under the various Sections.

During the year four children were adopted by their foster-parents without reward; 3 attained the age of nine years; 1 was transferred to another district and 4 new names were added to the Register, leaving 13 on the Register at the end of the year.

Seventy-five visits were made and all proved most satisfactory. Twenty-two newspaper advertisements were investigated, the necessary forms of registration being supplied in each case. Ninety-three interviews were granted relating to suitable homes, adoption, and such questions.

The children are all well cared for, and in remarkably good health.

Two points worthy of mention are (a) the number of applications received from young mothers for Homes or Institutions in which to place their babies for full adoption and desiring no further claim upon them, though the majority of these cases were not resident in Darlington, and (b) the falling number of new nurse-children due probably to the fact that girls with illegitimate children are given assistance by the Public Assistance Committee and other sources rendering it unnecessary for the babies to be placed with foster-parents.

The Infant Protection Visitor keeps in close touch with the local Inspector of the National Society for the Prevention of Cruelty to Children, and also with the representative of Dr. Barnardo's Homes.

ORTHOPÆDIC TREATMENT.

Ascertainment of orthopædic defects is kept up to date through the Health Department and the Cripples' Aid Committee of the Charity Organization Society. Cases requiring treatment are referred to the local Memorial Hospital where a well equipped clinic is held each Wednesday under Mr. H. C. Pearson, F.R.C.S., with a staff of masseuses.

Further progress has been made with the comprehensive scheme for Durham County at present being prepared by the Invalid Children's Aid Association. One of the clinics will be situated in Darlington.

MATERNITY AND NURSING HOMES.

These are periodically inspected by the Medical Officer of Health and his staff.

		General Beds.	Maternity Beds.
1.	Coniscliffe Nursing Home, Miss M. Potter	15	3
2.	Cleveland Nursing Home, Miss B. Miller	3	3
3.	Argyle Nursing Home, Mrs. J. L. Yates	12	4
4.	Miss J. Jenkin's Home, 40 Willow Road	0	2
5.	Mrs. S. A. Gait's Home, 12 Thornton Street	0	1
6.	Mrs. A. I. Piercy's Home, 23 Bloomfield Road	4	0

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA.**WATER SUPPLY.**

Water Engineer Mr. E. Minors, B.Sc., A.M.I.C.E.

The supply from the River Tees and the pressure filtration have been continued as described in last year's report.

Bacteriological analysis of the river, filtered and chlorinated water are made weekly by the Borough Analyst, whose reports during the past year have been consistently satisfactory.

Average analysis during the year 1936 :—

River Water.

Number of colonies on Nutrient Agar at 18°-20°C. after 72 hours. 127 per c.c. varying from 5 to 1,200 per c.c.

Presumptive B. Coli Test after 72 hours. Present in from 0.01 c.c. up to 1.0 c.c.

Filtered Water.

Number of colonies on Nutrient Agar at 18°-20°C. after 72 hours. 3 per c.c. varying from 0 to 42 per c.c.

Presumptive B. Coli Test after 72 hours. Present in from 0.01 c.c. Negative in 100 c.c.

Chlorinated Filtered Water.

Number of colonies on Nutrient Gelatin at 18°-20°C. after 72 hours. Averages for one year Less than 1 per c.c.

Presumptive B. Coli Test after 72 hours. Absent in 100 c.c. 83%.
Absent in 90 c.c. 11.3%.
Absent in 40 c.c. 3.8%.
Present in 10 c.c. 1.9%.

A typical analysis of tap water taken in the centre of the town :—

						Parts per 100,000.
Chlorines as Chlorides	....	....	....	....	....	1.0000
Nitrogen as Nitrates	....	....	....	....	....	.0298
Ammonia	....	....	....	....	....	.0012
Albuminoid Ammonia	....	....	....	....	....	.0090
Oxygen Absorption	....	....	....	....	....	.1336
Injurious Metals	....	....	....	....	....	None
Total solid matter dried at 100°C.	....	....	....	....	....	10.15
Temporary Hardness	....	....	0.10	parts	per 100,000	
Permanent Hardness	....	....	5.80	„	„	

Analysis of the total solid matter showed that the following constituents were present.

Calcium Oxide	....	....	....	....	2.77
Magnesium Oxide	....	....	....	....	0.45
Sodium Chloride	....	....	....	....	1.91
Alumina and Ferric Oxide	....	....	....	....	1.47
Sulphuric Anhydride	....	....	....	....	3.55
					10.15

For some time there has been evidence of pollution occurring in the Open Reservoir, and the Council have resolved, therefore, that a concrete cover should be placed over it. It is hoped that this work will be commenced in 1937.

RIVERS AND STREAMS.

The slow running River Skerne enters the town at its east boundary at Haughton, from whence it flows west and then south. It is crossed by 12 road bridges and is the natural channel for floodwater in the case of heavy rain.

Evidence of pollution is well marked before the river enters the town. Colliery washings produce a black mud which settles on the bed of the stream and has a very depressing effect on the appearance of the water way. Frequent analyses have been carried out and steps taken to inform the offending areas. With so many bridges there is temptation to use the proximity of the river as a convenient reason for unauthorised tipping.

SWIMMING BATHS.

The Public Swimming Baths are situated in Gladstone Street and consist of two large Pools. The First Class Bath is used largely in the summer and covered during the winter to form a spacious Public Hall accommodating an audience of over 1,500. The Second Class Pool is kept open during the greater part of the year.

The demand for facilities has greatly increased during recent years and in hot weather long queues may be seen waiting for admission. Provision has been made for mixed bathing. Every precaution is taken in Darlington by continuous filtration and chlorination to produce a clear, sparkling, attractive water free from germs of disease, and of a bacterial purity approximating to that of drinking water. The continuous treatment, completed every four hours, affords also important economies in heating and water supply. Accurate dosage of coagulant sodium aluminate and gaseous chlorine is ensured by routine checking with methyl orange and orthotolidine indicators.

SEWERAGE AND SEWAGE DISPOSAL.

The sewerage of the town is receiving the attention of the Council.

Storm water relief sewers are being constructed to relieve the older sewers, which were designed on the combined system.

From time to time the older sewers are being replaced with modern sewers. The more recently developed areas are being sewered on the separate system, the surface water being discharged into the Cocker Beck and River Skerne.

The whole of the sewage is at present being treated by broad irrigation on the Stressholme Sewage Farm. An experimental activated sludge plant has been in operation for a few years but it has not worked uniformly satisfactorily owing to the varying nature of the sewage from time to time.

The Council have now decided to construct sewage purification works, including detritus, sedimentation, humus and storm water tanks and percolating filters which will relieve the farm and enable the disposal of the sewage to be carried out more efficiently. It is expected that these works will be commenced in 1937.

DISPOSAL OF THE DEAD.

Three large Cemeteries all recently extended provide adequate places for disposal by earth burial for many years to come. They are all well placed from a sanitary point of view and do not interfere with the amenities of the neighbourhood. Public opinion is, however, growing on the subject of cremation as the most sanitary method of disposal of our dead. The Darlington Cremation Society has for a number of years, as a private body, equipped a modern Crematorium in the grounds of the West Cemetery, recently modernized by installation of a gas furnace.

SMOKE ABATEMENT.

Estimation of sulphur deposit is carried out at the Grammar School.

Following on periodic analysis of the sulphur content of the air in different parts of the town, I submitted the figures to the Department of Scientific and Industrial Research. Their report included the statement as follows.

"Darlington ranks as a clean station from the sulphur pollution point of view. It is about half the pollution of the majority of the stations. This may be regarded as very satisfactory".

In Darlington the following premises are protected under the 1875 Act as amended by the 1926 Act :—Cleveland Bridge Works; Denham's Foundry; Darlington Forge; L.N.E. Railway Works; Darlington Rolling Mills; Railway Plant and Engineering Company; L.N.E.R. Engines in station and yards; Teasdale's Foundry; Whessoe Foundry; and Four Blacksmiths' Forges.

Several of these plants deal with the largest castings in the world, *e.g.* Darlington Forge in the making of stern frames for ships.

It is I am informed most important to start the heating in a slow, black furnace which necessarily emits smoke.

AIR RAID PRECAUTIONS.

I beg to submit the following suggestions on the medical side. We require to make provision for the following :—

- (1) Mobile First Aid and Stretcher Squads.
- (2) First Aid Posts and Decontamination Centres.
- (3) Casualty Clearing Hospitals.
- (4) Base Hospitals.
- (5) Ambulances.
- (6) Laundry facilities.
- (7) Clerical Organisation.

Personnel for Casualty Services.—I have interviewed County Commissioner F. P. Wilson, J.P., Superintendent Fletcher, and Superintendent Gardner of the St. John Ambulance Brigade and Home Nursing Division.

Mobile First Aid and Stretcher Parties are being organized by their three local divisions. Three men and one woman should be allocated to each stretcher, one member being fully trained in anti-gas measures. At the moment forty men and twenty women are trained in the St. John Ambulance Brigade, and are available to take duties as Mobile Parties or in the First Aid Posts. I would suggest that the St. John Ambulance Brigade be asked to supplement these trained workers with volunteer untrained helpers to cover the staffing of the Mobile First Aid and Stretcher Squads and the First Aid Posts.

First Aid Posfs.—All gas and injured cases should, in the first place, attend a First Aid Post for decontamination before being sent on.

The Baths Hall equipped with cellars, practically splinter proof, hot and cold water, and a canteen, makes an ideal First Aid and Decontamination Centre and Laundry. The Gladstone Street and Technical Schools on the same site provide urgent Casualty Clearing accommodation. The following schools could make suitable district First Aid Centres—(1) Dodmire; (2) Eastbourne; (3) North Road; (4) Alderman Leach, and (5) The High School. These can be readily adapted, sectionalised and rendered as far as possible gas and splinter proof, and would form the Headquarters for each district for Stretcher and First Aid Parties.

Stretcher parties would work in eight hourly shifts with two stretcher parties at each Centre, therefore total Stretcher personnel at each Centre=24, requiring the following equipment

- 24 Protective Rubber Suits.
- 24 Heavy Service Gas Masks.
- 24 First Aid Pouches.
- 6 Surgical Haversacks.

Staff inside First Aid Posts—3 shifts, eight hours each.

Professional Staff—

Doctors—3.

Trained Nurses—9, one for each of the following Sections :—

- (a) Injured and uncontaminated.
- (b) Injured and contaminated.
- (c) Uninjured and contaminated.

Non-professional Staff—

Two trained supervisor-storemen per shift	....	6
Eight trained helpers, male	....	24
Eight trained helpers, female	....	24
Twelve untrained helpers, male	....	36
Twelve untrained helpers, female	....	36
Four clerks per shift	....	12
Two doorkeepers, per shift	....	6
Cleaners		

Equipment. Gas proofed, air locked premises, bleaching powder trays, shower baths, telephones, tables, forms, chairs, identity discs, bags for clothing and valuables, blankets, towels, splints. Twenty stretchers at each Centre. One hundred suits clothing male and female. One hundred and twenty heavy service gas masks. One motor ambulance at each Centre with spare driver and man fully protected.

Hospitals.—In Darlington the Casualty Clearing and the Base Hospitals may be incorporated together. It is estimated that the following provision should be made—

At onset	105 beds
After 7 days	210 beds.
After 14 days	385 beds.
After 28 days	595 beds.

Steps would have to be taken to remove as many patients as possible from the existing Memorial Hospital and Public Assistance Institution to relieve accommodation. Large houses or Institutions outside the town could be used for this purpose, and so relieve adequate accommodation to meet our needs as follows :—

Public Assistance Institution	....	400 beds.
Smallpox Hospital ....	....	50 beds.
Memorial Hospital and Reid Street School	....	220 beds.
Total	....	670 beds.

Schools would readily lend themselves to conversion. The Hospital Committee and the local division of the British Medical Association should be approached regarding the subject of rendering the hospital as far as possible gas and splinter proof and furnishing the necessary professional staff.

Reserve Accommodation.—It will be important to earmark reserve First Aid Posts and the following are suggested :—The Grammar School, Rise Carr School, Harrowgate Hill School, Corporation Road School, and Haughton School.

Laundry.—Most of the laundry work for the staff and personnel should be centralised in the Baths Hall, while the Lily Laundry and the new Laundry at Haughton Road could be commandeered if necessary.

I have collaborated with the Borough Surveyor in the co-ordination of First Aid Posts and Repair Depots, so that the work of the Police and Street Wardens can also be allocated in the five districts around the central organization in the Town Hall and the Baths Hall.

Discussions with surrounding local authorities have taken place as to pooling of action and accommodation.

SHOPS ACTS, 1912—1934.**Report of the Shops Inspector.**

Number of Shops on 31st December, 1936	....	....	1,628
Number of Shops on 31st December, 1936, employing Assistants			823
Number of Assistants employed—Male 1,416, Female 1,846	....		3,262
Number of Young Persons employed—Male 476, Female 449 (included in above number of assistants)			925
Number of visits paid to Shops	....	....	3,002

Contraventions under the Shops Acts.

Assistants employed on weekly half holiday	....	....	14
Assistants weekly half holiday notice not exhibited		....	8
Non-observance of half closing day	....	....	15
Weekly half closing day notice not exhibited	....	....	12
Trading in street on half closing day	....	....	2
Trading after Hour of Closing	....	....	30
Employing Young Persons for more than the normal maximum working hours	....	....	1
Employing Young Persons after 10-0 p.m.	....	....	2
Failing to keep a record of hours of employment of Young Persons	....	....	12
Assistants not receiving proper meal hours	....	....	2
Means to maintain a suitable and sufficient temperature not provided	....	....	18
Suitable and sufficient sanitary conveniences not provided	....		7
Suitable and sufficient means of lighting not provided	....		1

One hundred and twenty of these persons in default were cautioned both verbally and by written intimation.

In four cases prosecutions were instituted, the defaulters being convicted, one was fined 20/- and 10/6 costs, one was fined 10/- including costs, one was ordered to pay 16/6 costs and one was ordered to pay 4/- costs.

The operation of the provisions of the Shops (Hours of Closing) Act, 1928, was suspended by order of the Home Secretary from the 18th December, 1936, to the 24th December, 1936, both days inclusive, and by order of the Town Council on New Year's Eve, 31st December, 1936.

There are three Compulsory Orders in operation affecting respectively shops in which is carried on the sale of Meat, shops in which is carried on the sale of Fruit, Vegetables or Flowers, and shops in which is carried on Men's Tailoring, Clothing, and Outfitting, and two Orders under the Shops Hours Act, 1904, affecting Chemists and Druggists, and Boot and Shoe Dealers.

SECTION D.

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

The year has been notable for much mild infectious disease including influenza, measles and scarlet fever, and a severe form of diphtheria. Owing to simultaneous outbreaks in the rural areas of Wensleydale and Teesdale as far west as Hawes, with whose authorities we have agreements to admit cases to our Infectious Diseases Hospital, provided there is accommodation available, it was considered advisable in the interest of the patients as well as the Hospital that only severe cases should be given the benefit of the institutional care. The erection of a twenty bedded cubicle block is about to be completed and will be a great asset.

Close co-operation with the Maternity and Child Welfare and School Medical Services has continued throughout the year by interchange of notifications and supervision of contacts.

Scarlet Fever.—Mild cases of scarlet fever can be quite safely and adequately treated at home. In fact it is not wise policy to admit a mild case into a ward already receiving cases of a septic type, because of the greater risk of complications arising, and also of the dangers of overcrowding increasing the incidence of mastoid inflammation during convalescence. There was only one death in the course of the year in 466 cases.

During 1936 there were 144 cases nursed at home, the majority being mild cases. There were 407 contacts of these; only four (.98%), of these contacts developed Scarlet Fever within seven days of isolation of the primary case, and only five (1.23%) developed the disease after an interval of longer than seven days but less than 28 days from the isolation at home of the primary case. These figures are appreciably lower than the usually recognised 5% "return" rate associated with hospital isolation.

Diphtheria.—This was of the "gravis" type and accounted for 174 cases and 18 deaths. It is a tragic fact that none of these cases should have died, had the parents only taken my advice to have artificial immunisation carried out last year. Propaganda by voice, pen and poster has been used throughout the year to impress on the public the seriousness of the situation in regard to all children especially under five years of age. All deaths from diphtheria can be prevented by this simple, safe, harmless method of injection which has been practised now beyond the experimental stage in all our hospitals and large institutions.

Over 1,900 children have already been immunised using Alum Toxoid but more remains to be done as there are about 14,000 children at risk.

Measles.—In 796 cases, there were only 2 deaths, and four admissions to hospital.

Erysipelas.—There were only four cases of such severity as to warrant admission to the Hospital out of 34 notifications.

Whooping Cough.—This was responsible for 65 notifications.

Pneumonia.—The notifications numbered 44 and the total deaths 44.

Ophthalmia Neonatorum.—Ten cases were notified, and in all the recovery was complete without any impairment of vision.

Cerebro-Spinal Fever.—Four military cases were treated, one of whom died. Owing to the experience we have of these cases from Catterick Camp, the staff is very competent, and has been highly complimented by the Military Authorities on the results.

Acute Anterior Poliomyelitis.—One case was notified and admitted to Hospital.

Encephalitis Lethargica, Malaria, Dysentery and Smallpox.—No cases were notified.

Typhoid and Para-Typhoid Fevers.—Thirteen cases were notified and 10 admitted to Hospital during the month of August.

Vaccination.—The Maternity and Child Welfare Officer acts as Public Vaccinator, as she is in close contact with the newly born children. The number of vaccinations has been gradually falling for the past 8 years, since the last Smallpox epidemic, as may be judged from the fact that whereas there were 75% of our infants vaccinated 20 years ago, today the figure is only 15%. Out of 1,203 registered births there were 180 successful vaccinations.

Summary of Work at Infectious Diseases Hospital.

Diseases	From Borough		Other Districts		Total	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
Smallpox	—	—	—	—	—	—
Scarlet Fever	322	1	94	1	416	2
Diphtheria	168	17	54	8	222	25
Typhoid and Para-Typhoid Fever	10	—	5	—	15	—
Erysipelas	4	—	—	—	4	—
Ophthalmia Neonatorum	4	—	—	—	4	—
Puerperal Fever	5	1	6	—	11	1
Puerperal Pyrexia	1	—	—	—	1	—
Pneumonia	—	—	—	—	—	—
Chickenpox	—	—	—	—	—	—
Measles and German Measles	4	1	2	—	6	1
Encephalitis Lethargica	—	—	—	—	—	—
Whooping Cough	1	—	—	—	1	—
Cerebro Spinal Meningitis	—	—	4	1	4	1
Other Conditions	10	4	5	—	15	4
Pulmonary Tuberculosis	4	1	—	—	4	1
Other Forms of Tuberculosis	—	—	—	—	—	—
Totals	533	25	170	10	703	35

Complications.—

- (a) *Scarlet Fever*.—Adenitis 60, Otorrhœa 33, Rhinorrhœa 47, Rheumatism 28, Albuminuria 19, Abscess 2, Quinsy 4, Chicken Pox 3, Enteritis 1, Pneumonia 2.
- (b) *Diphtheria*.—Albuminuria 6, Otorrhœa 5, Cardiac Paralysis 12, Soft Palate Paralysis 18, Hæmorrhage 3, Abscess 2, Myocarditis 1.
- (c) *Typhoid Fever*.—Hæmorrhage. 1

Operations Performed.—Mastoidectomy 2, Abscesses 4, Lumbar Punctures 9, Tracheotomy 4, Otitis Media 2, Curettage 1.

Artificial Sunlight Treatment.—69 patients, 175 exposures.

Staff Illness.—

- (a) *Nurses*—Tonsillitis 7, Scarlet Fever 1, Influenza 4.
- (b) *Domestic*—Influenza 4, Sprained Ankle 1, Tonsillitis 4, Rheumatism 1.

CANCER.

The facilities available in, and for the area of Darlington for the diagnosis and treatment of cancer include those provided by the Local Authority in our Public Assistance and general clinics, from which cases are usually referred to the new Memorial Hospital (220 beds). This hospital is fully equipped both for radium and surgical treatment. The surgical staff include the following :—

Mr. H. C. Pearson, F.R.C.S.
 Mr. G. G. Farquhar, F.R.C.S.
 Mr. S. W. Thacker Neville, M.D., F.R.C.S.
 Mr. F. C. Pridham, F.R.C.S.

acting under the direction and control of the Local Voluntary Hospital Committee but available for consultation when needed by me as Medical Officer of Health. The Royal Victoria Infirmary at Newcastle which, with the Armstrong College, is the radium centre of the North of England Council of the British Empire Cancer Campaign, to which Darlington subscribes, is also available for the treatment of cancer cases referred from Darlington.

The Local Authority's Municipal Hospital receives cancer cases, usually after the appropriate treatment, surgical or radiological, has been given at the Memorial Hospital. They are generally referred for palliative treatment and general nursing care. If, however, any cases are met with which would benefit from active surgical or radiological treatment they are immediately transferred to the Memorial Hospital or the Royal Victoria Infirmary at Newcastle.

There is active co-operation between the general practitioners and the nursing institutions in the town. Education concerning cancer is carried on as part of the general health propaganda in the various clinics under our co-ordinated scheme of public health rather than by giving special lectures on the subject. Special leaflets are distributed from the clinics and articles appear in the monthly publication "Better Health" (3,000 copies monthly). Lectures have been given by the Medical Officer of Health to the Co-operative Women's Guild, the Men's Guild, and the Trades Council. Every step is taken to emphasise the importance of seeking medical advice in the event of any deviation from normal health.

No special cancer clinics have been set up and I am satisfied that the cordial relationships between the Health Department, the Institutions, the Doctors, and the public are achieving the greatest possible efficiency in view of our present knowledge of the early signs and symptoms and the treatment of this disease.

A table is appended showing the sites, the sex distribution and age incidence of Cancer. Of the 94 cases, the majority (57) were of the bowel. The mortality rate was 1.25 per thousand compared with 1.62 for England and Wales.

PREVENTION OF BLINDNESS.

Blind persons come within the purview of the Committee for Promoting the Welfare of Afflicted Persons and are all certified by an Ophthalmologist. The prevention of blindness is a matter for the Health Committee and treatment and glasses are provided where necessary in necessitous cases.

VENEREAL DISEASES.

Report of the Venereal Diseases Officer on the work of the Darlington Clinic during 1936.

The Clinic continues to function satisfactorily. The establishment at the Health Centre has resulted in increased efficiency, and the centralisation of this with other departments facilitates co-operation between them.

The Clinic offers the following :—

1. A free diagnostic and treatment service.
2. Free consultation with private practitioners.
3. Free provision of arsphenamine drugs to approved private practitioners, for the treatment of their patients during the infective stages of syphilis.
4. Instruction to general practitioners and members of nursing associations in the practical management of Venereal Diseases.

It is gratifying to read that these measures have been made full use of by patients and those responsible for their treatment. The co-operation of private practitioners in particular has been of very great assistance.

There has been a diminution in the number of cases of gonorrhœa presenting themselves for the first time, but this has, unfortunately, not been due to a decrease in the incidence of the disease in Darlington. It cannot be too strongly urged that all persons having suspicious symptoms should avail themselves of the strictly confidential treatment provided by the Clinic.

A feature of the incidence of Venereal Disease has been the increase in the number of new cases of syphilis, particularly of cases of the disease in the early stages, but the remarks which have been made above with regard to gonorrhœa apply with equal force to this highly dangerous contagion.

It is gratifying to record an increase in the number of cases which sought advice but which were found to be non-venereal. The object of Social Hygiene propaganda is not to make people "V.D.-conscious" but rather to induce a state of "awareness", and the effect of this is reflected in the number of persons attending treatment centres in order to eliminate the possibility of having become infected. It shows a keen sense of citizenship in these people who have taken the trouble to make sure that they are not potential sources of danger to those around them.

**COMPARATIVE STATISTICS OF WORK DONE AT DARLINGTON VENEREAL DISEASES
CLINIC IN THE PAST TWELVE YEARS.**

YEAR.	1936	1935	1934	1933	1932	1931	1930	1929	1928	1927	1926	1925
Medical Consultations	6,839	7,895	6,876	7,571	8,322	7,857	7,762	8,671	8,059	5,434	2,778	2,697
New Patients—Syphilis	83	58	80	37	64	62	60	69	66	89	88	75
New Patients—Soft Sore	—	—	—	1	1	2	3	5	4	1	2	5
New Patients—Gonorrhoea	177	183	166	111	122	131	115	150	175	168	127	116
New Patients—Non-Venereal	118	99	134	139	116	128	134	115	92	62	103	57
TOTAL NEW PATIENTS	378	340	380	288	303	323	312	339	337	320	320	253
No. of Intravenous Injections given	1,158	1,433	1,734	939	1,073	1,059	881	555	413	399	564	540
Blood Tests Taken	241	239	316	456	452	443	365	240	263	218	203	153
Spinal Fluids Taken	22	9	12	4	1	—	—	—	—	—	—	—
Slides examined in Clinic	1,180	1,161	1,375	708	700	620	694	477	307	239	201	218

Details of Work at Darlington Treatment Centre, 1936 :—

New Cases	Darlington	Co. Durham	N.R. Yorks.	West- moreland	Total
Syphilis	62	7	5	—	74
Soft Chancre	—	—	—	—	—
Gonorrhoea	121	27	22	—	170
Conditions other than Venereal	104	7	7	—	118
Total	287	41	34	—	362
Total number of attendances of all Patients	8,275	1,108	1,129	18	10,530
In-Patient Days	32	—	65	—	97
Total Doses of Arsenobenzene Compounds given by injection	756	139	148	7	1,050

In addition to the above 9 cases of Syphilis and 7 of Gonorrhoea who had attended Clinics in other Districts were treated at the Darlington Clinic during the year for the first time.

26 doses to Darlington private practitioners, and 32 doses to private practitioners in the North Riding of Yorkshire under agreement, of approved arsenobenzene compounds were issued from the Darlington Clinic for the treatment of private cases.

TUBERCULOSIS.

It is now three years since the Tuberculosis Scheme was taken over from Durham County and worked by a specialist officer of the Darlington Corporation under the co-ordinated scheme of Public Health services. Our Tuberculosis Centre provides the following facilities :—

- (1) *Centre for Diagnosis.*—Patients are sent by the practitioners in the town for expert opinion.
- (2) *Centre for Observation.*—With the increased facilities for diagnosis, more especially x-rays and the tuberculin skin reactions, the number of cases which have had to attend over a period for observation is rapidly diminishing. The advantages of being able to make a definite diagnosis with as few visits as possible are obvious.
- (3) *Centre for Curative Treatment.*—As well as sanatorium treatment and accommodation in the Darlington Memorial Hospital, the Borough Isolation Hospital, and the Municipal Hospital, we have established at the latter Institution an out-patient Clinic for special treatment such as phenyl-ethyl-hydnocarpate injections for lupus, aspiration of tubercles, pleural effusions, tuberculin injections, gold therapy, etc.
- (4) *Centre for examination of Contacts.*—This is of the utmost importance in view of the fact that some 4,000 cases of tuberculosis are discovered annually in England by this method alone.

- (5) *Centre for After-Care.*—Perhaps it is not sufficiently realised that we in Darlington are particularly fortunate in having an active and generous Care Committee. Thanks to it, the granting of extra nourishment, clothes, footwear, bedding, etc. is a simple matter. Finding suitable employment for ex-tuberculous patients is a very different problem. Vacancies occasionally occur under the Village Settlement Scheme at Papworth and at Preston Hall, but this solution is costly to the Local Authority and can cater only for a small proportion of sufferers.
- (6) *Information Bureau and Educational Centre.*—This is furnished at Greenbank, full information being given to individual patients by personal instruction. At other places lectures are given and cinema films shown under the auspices of the National Society for the Prevention of Tuberculosis.
- (7) *Centre for Supervision of Domiciliary Cases.*—Cases not requiring sanatorium treatment who are under the care of general practitioners are kept under observation so that any changes in their condition may be noted and the appropriate steps immediately taken.
- (8) X-ray examinations are made when necessary.

The General Practitioner is the person most likely to see the tuberculous patient in the early stage of the disease, and upon him rests the duty of notification. He, too, is responsible for domiciliary treatment. The most cordial relations exist between the general practitioner and the Department. The general practitioners have availed themselves of the scheme to the full. Not only have they helped in sending early cases and doubtful cases for an expert opinion, but on many occasions in which the Tuberculosis Officer has failed to convince a patient of the necessity of going to a sanatorium, the family doctor has been successful. Many patients in the past year have had cause to thank their doctor for this service.

Sanatorium Treatment.—We have at our disposal an adequate number of sanatorium beds. Unfortunately, however, many patients refuse sanatorium treatment. This is especially true of married women whose prolonged absence from home necessitates difficult domestic adjustments. Although this is deplored, it is not considered wise to bring excessive pressure to bear in these cases as, if persuaded against their will, they make bad patients and frequently return too soon or allow personal anxiety to mitigate against their recovery.

Surgical Tuberculosis.—Cases requiring treatment for surgical tuberculosis are referred to the Memorial Hospital under our Tuberculosis Scheme, while some are sent to sanatoria. In view, however, of the somewhat disappointing results of surgical excision in cases of tuberculous glands of the neck, we are hoping in the future to make more use of the various methods of conservative treatment. Promising results have been obtained in a small series of lupus cases which have attended the Special Clinic at the Municipal Hospital for injection by phenyl-ethyl-hydncarpate.

Co-ordination.—The Medical Officer of Health is also Chief Clinical Tuberculosis Officer, School Medical Officer, and Chief Maternity and Child Welfare Medical Officer, thereby ensuring full and active co-operation in all departments. Furthermore, he is also in touch with all organisations having an interest in tuberculous persons.

The Assistant Tuberculosis Officer is also Public Assistance Medical Officer, and is, therefore, responsible for the care of tuberculous patients who are unable to afford a private medical attendant. In this way he is able to watch a section of the community, by reason of poverty especially liable to tuberculosis, and to assist the Committee in avoiding overlapping in grants for extra nourishment. His dual role also brings him into contact with the practitioners in the town. These contacts must result in mutual understanding and co-operation. Furthermore, he is Medical Officer to the Municipal Institution, where beds are available for diagnosis and preliminary treatment for cases awaiting sanatorium, and also for advanced cases requiring palliative treatment.

Thus we see that in Darlington there exists a comprehensive scheme for dealing with tuberculosis in every respect.

New Cases and Mortality during 1936.

Age-Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—	....	....	2	1	....	....	2	1
1—	....	....	2	1	....	....	1	....
5—	3	2	7	6	1	1	2	1
10—	2	2	2	4	1	3	....	....
15—	3	....	4	2	3	2	1	....
20—	5	5	....	1	6	3	....	....
25—	11	16	1	....	7	9	1	....
35—	16	8	2	3	10	7	1	....
45—	8	6	....	....	4	3	....	....
55—	5	4	1	1	2	4	....	....
65 and upwards	....	2	....	1	....	1	....	....
Totals	53	45	21	20	34	33	8	2

Of the above 77 deaths, 6 were cases which were not notified to the Medical Officer of Health under the Regulations. Letters were written to the Medical Practitioners concerned and satisfactory explanations were received. One death was an inward transfer and six deaths were certified as due to other causes than Tuberculosis.

PUBLIC HEALTH (Prevention of Tuberculosis) REGULATIONS, 1925, and PUBLIC HEALTH ACT, 1925 (Section 62).

No action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, relating to persons employed in the milk trade, as no instance arose. There were no compulsory removals to hospital as all cases willingly accepted the offer of institutional care.

SUMMARY OF THE YEAR'S WORK.

Institutional.—Total Patients in Institutions, 159; Days' treatment 15,693.

Dispensary.—

[illegible]

X-Ray examinations, 120; Ultra-Violet Ray treatment, 1 patient; Sputum Specimens examined, 137; Railway Warrants issued, 51; Railway Fares paid, 4.

Domiciliary.—

Queen's Nurses—Visits and Dressings, 521 to 21 patients.

Health Visitors—First Visits 102, Re-visits 964. Total visits 1,066.

SANATORIA AND HOSPITALS USED.

	Patients.		Total.	Days' Treatment.
	M.	F.		
Darlington Memorial Hospital	14	15	29	2,115
Hollywood Hall Sanatorium	31	—	31	3,391
Helmington Row Sanatorium	2	—	2	393
Seaham Hall Sanatorium	—	2	2	414
Douglas House, Bournemouth	1	—	1	43
Newcastle General Hospital	1	—	1	24
Stannington Sanatorium	10	5	15	2,134
Fever Hospital	3	1	4	102
Municipal Institution	31	27	58	4,877
Mundesley Sanatorium	1	—	1	133
Blencathra Sanatorium	2	6	8	1,624
Sunderland Rural District Hospital and Sanatorium	—	6	6	412
Royal Victoria Infirmary, Newcastle	1	—	1	31
Total	97	62	159	15,693

Three Shelters were in use by Darlington patients on the 1st of January, 1937.

**NOTIFICATIONS OF AND DEATHS FROM TUBERCULOSIS
(Pulmonary and Non-Pulmonary).**

<i>Year.</i>	<i>Pulmonary.</i>		<i>Non-Pulmonary.</i>	
	<i>Notified.</i>	<i>Deaths.</i>	<i>Notified.</i>	<i>Deaths.</i>
1921	124	66	32	17
1922	111	71	47	20
1923	135	69	80	15
1924	119	62	65	21
1925	134	58	56	24
1926	111	59	76	16
1927	119	68	59	19
1928	101	58	63	27
1929	102	63	54	14
1930	106	67	65	10
1931	105	75	50	16
1932	119	71	46	8
1933	96	62	36	8
1934	84	50	29	10
1935	77	45	29	16
1936	98	63	41	8

Number of Cases of Tuberculosis remaining on the Register of Notifications.

PULMONARY.			NON-PULMONARY.			Total Cases.
Males.	Females.	Total.	Males.	Females.	Total.	
252	189	441	152	174	326	767

REMOVALS FROM REGISTER OF NOTIFICATIONS.

	Pulmonary			Non-Pulmonary			Total Cases
	M.	F.	Total	M.	F.	Total	
Withdrawn	2	4	6	—	—	—	6
Recovery	7	5	12	9	12	21	33
Deaths	34	33	67	8	2	10	77
Left District	5	5	10	2	3	5	15

Of the above 77 deaths, 6 were classified to other causes than Tuberculosis.

SILICOSIS & ASBESTOSIS (Medical Arrangements) SCHEME, 1931.

Six examinations were carried out during the year under the arrangement entered into with the Silicosis and Asbestosis Medical Board,

VOLUNTARY CARE COMMITTEE.

The social work carried out by this Committee increases in importance year by year, in furthering the welfare of afflicted families by providing advice, better housing, additional clothing, nourishment or financial help.

Since 1919, 724 cases have been dealt with, and during the past year 32 new applications were entertained.

It is regrettable that so much of this help of a material form in eggs, milk, butter, meat, is rendered of less effect by the poor housing in which the families are financially obliged to live, or to which the patients must return when convalescent from sanatoria. Under the slum clearance schemes which are being pushed forward expeditiously a good many families have been re-housed from very bad conditions and it is important that the housing conditions of all our tuberculous families should be improved as far as reasonably practicable. I have always held the opinion that the direct tuberculosis schemes have not attained the success that was anticipated, but that our maternity and child welfare and school medical services, and open-air schools for the delicate, are much sounder financial propositions.

The removal of our early tuberculous cases to a colony, as has been so successfully done at Papworth, and Preston Hall, where treatment is combined with suitable work, is the ideal but initially expensive scheme. The next best is the re-housing and supervision of the infected families, if necessary by subsidy from the rates, in order to try to stop the passing of infection from parent to child. The most infectious cases in the last stages should be removed to the Infectious Diseases Hospital. It is estimated that a 16-bed pavilion would be the necessary addition to our present Fever Hospital accommodation for this purpose.

SECTION E.

HEALTH EDUCATION.

PROPAGANDA.

This ever-growing side of the Public Health Department is interwoven in all the daily routine. It often means the difficult task of teaching people who are very unwilling to improve their conditions. The visit of the Health Visitor, the Sanitary Inspector and the School Nurse is as much educational as the work of the School Teacher in the School, but the pupils are more difficult. The good name of the town is largely due to the work of these people in producing such a high standard of citizenship. Lectures have been given by members of the Staff to representative organisations in the town, such as the Women's Clubs, the Women's Guilds, the Men's Guilds, Toe H., League of Women Helpers, the Rotary Club, Church Meetings, College of Nursing, Midwives' Institute, Friendly Societies Council, Trades Council, Training College and Chamber of Trade. Posters, Leaflets, Press articles and

the monthly "Better Health" Magazine have been circulated with a view to rousing the health conscience of the citizens. Two thousand copies of this interesting Journal are distributed monthly in Schools and Clinics and are earnestly sought for by parents and children.

A propaganda campaign was held from November 30th to December 2nd, when the British Social Hygiene Council in conjunction with the Health Department, organised the following programme :—

	<i>Attended.</i>
<i>Public Meeting.</i> Address—Film "A Trial for Marriage"	600
<i>Railway Works.</i> Address to men	200
<i>Greenbank Health Centre.</i> Address to Nurses, Midwives, etc., Subject—"Medical and Social Aspects"—Film, "Social Hygiene for Women"	40
<i>Senior Mixed School.</i> —Parents' Conference—Film, "How to Tell"	300
<i>Mill.</i> Canteen talk to Women	30
<i>Senior Girls' School.</i> Address at Prize Giving	400
<i>Y.M.C.A.</i> Conference of Youth Leaders. Address on "Youth and Nation". Film "The Gift of Life"	150

All these meetings were addressed by the Medical Secretary of the British Social Hygiene Council.

The Committee co-operated with the National Baby Week Council on "Baby Sunday" in the National Baby Week when a special appeal was made to the clergy to include in their addresses to their congregations a special reference to child welfare.

The Baby Day Celebrations have already been mentioned on page 32, and the Dental Demonstrations on page 15 of the School Medical Officer's Report at the end hereof.

SECTION F.

HOUSING.

Following on the Slum Clearance programme instituted last year, five more areas were scheduled and made the subject of a Ministry of Health Inquiry during the year. The Minister has sanctioned the demolitions.

	Houses to be demolished	Displaced Persons	Houses to be Built
Green Street Area	78	295	62
Clifton Road Huts	5	19	4
Neasham Road Huts	2	6	2
Parkgate	8	6	2
The Green, Cockerton	6	10	6
Totals	99	336	76

Green Street Clearance Area.

Summary of evidence given at the Inquiry.

The general standard of working class property in the town as a whole has always been of a high degree, largely owing to the foresight of the town's administrators and the sense of citizenship of the skilled artisan population associated with the railways and engineering undertakings. The area in question is a part of old Darlington. Records of the past 100 years, show that houses in Green Street, Chancery Street, and Silver Street (described on the map as the Green Street Clearance Area) have always been notoriously insanitary in contrast with the North East Ward (of which it is a part) and the rest of the town.

The area is approximately 1.665 acres in extent and contains in 5 solid blocks the following 78 houses numbered serially :—

<i>Green Street</i>	Nos. 5, 7, 11, 13, 15, 17, 19, 21, 23, 25.	
28 feet wide	6, 8, 10, 12, 14, 16, 18, 20, 26, 28.	20 houses
<i>Studley Row</i>	Nos. 1, 2, 3.	3 houses
13 feet wide		
<i>Chancery Street</i>	Nos. 12, 14, 16, 18, 20, 22, 24, 26.	
24 feet wide	7, 9, 11.	11 houses
<i>Silver Street</i>	Nos. 2, 4R, 4L, 6, 8, 10, 12, 14, 16, 18,	
24 feet wide	20, 22, 24, 26, 28.	
	3B, 5A, 7, 9, 11, 13.	21 houses
<i>Union Place</i>	Nos. 1, 3, 5, 7, 9, 11, 13, 15.	
24 feet wide	2 and 4, 6, 8, 10, 12.	14 houses
<i>Silver Row</i>	Nos. 3, 5, 7.	3 houses
24 feet wide		
<i>Railway Terrace</i>	Nos. 4, 5, 6, 7, 8, 9.	6 houses
17 feet wide		
Total		78 houses
Density—houses per acre—48.		

The population of the 75 families inhabiting these 78 houses on the 23rd September, 1936, number 295, of whom 220 persons were over 10 years of age whilst 75 were below that age. The density of the population is 177 persons per acre.

The 78 houses consist of 227 rooms ; density of persons per room is 1.3. Average rooms per house—2.9.

COMPARATIVE STATISTICS.

	<i>Green Street Area.</i>	<i>North East Ward.</i>	<i>Darlington.</i>
Acreage	1.665	1,728	6,469
Total houses	78	2,000	20,000
Houses per acre	48	1.2	3.2
Rooms	227	8,000	89,000
Rooms per house	2.9	4.0	4.5
Families	75	1,900	18,309
Total Population	295	8,000	75,300
Persons per acre	177	4.0	12
Persons per room	1.3	1.0	0.85
Death Rate, 1931-36	15	12	11
Birth Rate	23	20	15
Infantile Mortality	112	70	58
Infectious Disease Notifications, 1935-36, including pneumonia and tuberculosis	45 15% of pop.	547 7% of pop.	4,378 5% of pop.

I have no hesitation in saying that Green Street Area is the worst laid, blackest, and most depressing portion of the North East Ward. The death rate (23), the infantile mortality (112), and the incidence of infectious disease have always been excessive in contrast with the figures for the town as a whole. Outbreaks of infectious disease such as diphtheria, scarlet fever, and measles have always hit it hard, and it is a sad but pertinent fact that at the present time the area is quarantined on account of a very virulent form of diphtheria which has caused at least a dozen cases and three deaths during the past three months. Tuberculosis and chest diseases have always reaped a heavy toll and are largely the outcome of the insanitary surroundings, the dark, cramped buildings, the lack of sunlight and the poor facilities for washing and cooking.

Forty-three of the houses have no sculleries and in the remainder the sculleries are dark and unsuitable. In 12 of the houses the only water supply is from a tap in the yard. In 15 instances there are no sinks provided. In 26 houses there are no foodstores of any sort provided. In 19, poorly ventilated cupboards, mostly under the stairs, are the only provision made.

In 49 of the houses there are no facilities for the boiling and washing of clothes, while in the remaining 39 houses the usual provision is a set-pot boiler placed in a scullery which lacks space, height and light. In the course of my inspections I mount the stairs with fear and trembling. Generally the stairs are dark, steep and dangerous. Floor joists have perished and ceilings are ready to fall.

There is only one bath in the area.

There are 63 water closets provided but most of these are collected together in common yards and inconveniently situated for decency, privacy, or emergency. Thirteen of the closets are used by two or more families.

Only 8 of the houses have access to a back street for the purpose of scavenging and refuse collection.

Practically every one of the 78 houses falls short of existing byelaw standards respecting damp proof courses, window areas, height of rooms, food storage, yard space or open areas at the rear. In the course of my many visits I have seen plenty of evidence of penetrating and rising dampness due in my opinion to porosity of the fabric and absence of a damp proof course.

The discomfort inside the houses due to dampness from decayed roofs and gutters is aggravated considerably by every storm. The drainage system is very deficient. There are only four inspection chambers present. The drains and sewers cannot be identified when there is any occasion to investigate a defect.

Finally, the rents are in most cases exorbitant (4/- to 8/- per week) and out of relation altogether to the poor accommodation provided.

Conclusion.

From my personal knowledge of the property, I am of the opinion that the dwellings included in the area fall very far short of the standards set up by the existing byelaws in the town, and also very far short of the general standards of working class property in the town as a whole.

The principal defects are :—

1. General bad design of the dwellings in the area.
2. The general disrepair and decay of the property through age and over use.
3. Narrow front streets.
4. Absence of back streets.
5. Inadequate air space, through high density of population and houses per acre.
6. Rising and penetrating dampness.
7. Inadequate and defective sanitation.
8. Inadequate natural lighting and ventilation.
9. Low ceilings and dangerous, steep stairs.
10. Inadequate food storage accommodation.
11. Inadequate washing facilities.
12. Inadequate drains, inspection chambers, and disconnecting traps.

I am further of the opinion that these dwelling-houses are by reason of their state of decay, disrepair and these sanitary defects unfit for human habitation. By reason of their bad arrangement, the narrowness and bad arrangement of the streets they are dangerous to the health of the inhabitants. The most satisfactory method of dealing with the condition is complete demolition.

Overcrowding.—It is estimated that 100 houses will be required in order to move some of the larger families living at present in overcrowded conditions. This would allow the shuffle to commence whereby smaller families could be moved into the vacated property. The Housing Committee have decided to provide these 100 houses by instalments, the first 28 of which are now in hand.

SECTION G

SANITARY INSPECTOR'S REPORT, 1936.

General Sanitary Work.—1,486 Inspections and 1,193 Re-inspections of houses were made under the Public Health and Housing Acts. 671 Informal Notices were served upon the owners of property in respect of 2,020 nuisances existing thereon, and in very many cases the nuisances were abated without further action being necessary. The remaining cases where the notices were not complied with, were included in the monthly reports submitted to you. Upon instructions of the Council 159 Statutory Notices for the abatement of 756 nuisances were served during the year. The total number of nuisances abated in compliance with notices served during the year was 1,850.

The following is a summary of the various headings under which such notices were served :—

	Number of Nuisances or Defects dealt with by Informal Notices	Number of Nuisances or Defects dealt with by Formal Notices by Order of the Council	Number of Nuisances or Defects abated or remedied after service of notices
Dwelling-houses:—			
Foul Conditions	33	2	35
Structural Defects	1,337	558	1,177
Water Supply to houses & Defective fittings	7	2	6
Absence of Foodstores	25	6	27
Absence of Sinks	24	12	21
Absence of Washing Accommodation	21	2	20
Overcrowding	1	—	1
Defective Yard Paving	70	24	63
Water Closet:—			
Drains stopped and Defective Fittings	101	29	112
Water Supplies to Water Closets	5	2	4
House Drainage:—			
Yard, Cellar Drains, Down-pipes stopped, Defective Drains and Traps	273	94	256
Filthy Yards	1	—	1
Animals and Poultry Improperly kept	3	—	3
Cowsheds	1	—	1
Offensive Trades	1	—	1
Ashpits, Privies and Ashbins	50	23	53
Deposits of Refuse and Manure	31	2	33
Stables	2	—	2
Rats (Premises infested)	9	—	9
Vermis	8	—	8
Bakehouses	8	—	8
Living Vans	3	—	3
Slaughterhouses	6	—	6
Totals for 1936	2,020	756	1,850

Analysis of Inspections, 1936.

Under Public Health and Housing Acts	....	....	....	....	5,423
Van Dwellings	....	....	....	....	113
Common Lodging Houses	....	....	....	....	25
Overcrowded Houses	....	....	....	....	762
Interviews with Owners and Builders	....	....	....	....	972
Yards and Courts	....	....	....	....	48
Back-to-back Houses	....	....	....	....	226
Total Inspections of Housing Conditions					7,569
Slaughterhouses	....	....	....	....	3,975
Emergency Slaughter	....	....	....	....	28
Bakehouses	....	....	....	....	173
Cowsheds	....	....	....	....	108
Milk Retailers	....	....	....	....	202
Ice Cream Premises	....	....	....	....	151
Fried Fish Shops and Offensive Trades	....	....	....	....	140
Fruit Warehouses	....	....	....	....	1
Markets	....	....	....	....	71
Food premises other than Bakehouses	....	....	....	....	90
Total Inspections with reference to Food					4,939
Pharmacy and Poisons Act, 1933	....	....	....	....	123
Visits after Infectious Disease	....	....	....	....	704
Factories, Workshops, etc.	....	....	....	....	431
Drain Testing	....	....	....	....	6
Rat Inspections	....	....	....	....	58
Piggeries	....	....	....	....	25
Investigation of Complaints	....	....	....	....	546
Shops Acts	....	....	....	....	7
Merchandise Marks Acts	....	....	....	....	2
Hairdressers' Sunday Closing	....	....	....	....	2
Sundry Inspections	....	....	....	....	316
Total of other Inspections					2,220
Total Inspections made during the year					14,728

DARLINGTON CORPORATION ACT, 1930—SECTION 166—LIVING VANS, TENTS AND SHEDS.

There are now five sites in use: Valley Street North, Archer Street, Lodge Street, Chesnut Street, and The Mill, Haughton. The Back Melland Street site was not used throughout the year.

All the sites were under constant observation by the Sanitary Inspectors. Three contraventions of the Act occurred.

In the Boyne Street Improvement Area, a wooden shed minus windows, proper floor, or ordinary amenities, was occupied by an old man contrary to the Act. A letter of warning was sent by the Town Clerk and the shed was subsequently vacated.

At Haughton, a tent which was used by an aged person as a sole means of habitation was removed and burned. The owner of the land on which the tent was situate was warned by the Town Clerk.

Near to Burdon Bridge a colony of nomadic hawkers took possession of a meadow without the owner's consent. After much trouble the owner caused them to be evicted subsequent to pressure from the Health Department.

HOUSING ACT, 1925—BYELAWS.

Houses Let-in Lodgings.—These byelaws apply to houses intended or used for occupation by the Working Classes and let in lodgings or occupied by members of more than one family in Darlington.

During the year, 47 houses were found occupied by more than two families and came under the byelaws. Seventy-four inspections were made. One informal notice was served and complied with. These houses present a very real difficulty, registration not being compulsory. Owners and occupiers allow houses to be tenanted by several families without our knowledge. When we apply the byelaws, the tenants are in many cases given notice to quit. Owing to the fact that the type of persons who occupy these houses, have, in many cases no fixed abode due to unemployment or poverty, the personnel is constantly changing.

Sanitary Condition of Theatres and Places of Entertainment.—By the Home Office Order, 25th August, 1920, the Secretary of State requires Sanitary Authorities to give special attention to premises holding a licence for Music and Dancing, special regard being given to lavatory accommodation, dressing rooms, ventilation and means of escape in case of fire.

These premises were kept under observation and no cause for complaint or need for action was found. The premises referred to consist of 11 Picture Halls, 5 Billiard Saloons, 12 Dance Halls, 1 Cafe and 1 Hotel.

Offensive Trades.—Applications for licences were made by 5 Fish Friers, 4 were refused and one granted subject to the building and equipment being satisfactorily completed.

The number of premises now used for offensive trades and duly licensed is 42, as follows :—

- 1 Gut Scraper.
- 34 Fish Friers.
- 1 Fellmonger.
- 1 Fat Rendering and Tripe Boiling.
- 3 Fat Rendering.
- 2 Rag and Bone Dealers.

There are also 29 Fried Fish Shops in the Borough not on the Licensed Register, having been established prior to the date of the Order under which they are scheduled as Offensive Trades.

The whole of the premises are under supervision, and are kept in a fairly satisfactory condition. One Informal Notice was served and complied with.

A Fat Refinery to the North West of the town has been the cause of numerous complaints and many visits have had to be made thereto. These premises were erected whilst the area was outside the Borough. Much has been done to minimise the offensive odours which are inseparable from such manufacture.

Factories, Workshops and Workplaces.—The number of Workshops, including Bakehouses, on the Register at the 31st December, 1936, was 444, and the number of Factories 220, total 664, in respect of which 431 inspections have been made.

Bakers and Confectioners	....	....	....	....	102
Dressmaking, Millinery, &c.	....	....	....	....	45
Boot Repairing	....	....	....	....	57
Joiners, Cabinetmakers, &c.	....	....	....	....	62
Tailors	....	....	....	....	33
Plumbers	....	....	....	....	17
Blacksmiths	....	....	....	....	11
Painters	....	....	....	....	19
Upholsterers	....	....	....	....	11
Other Workshops	....	....	....	....	307
Total					664

Defects.	Found	Remedied during 1936
Want of Cleanliness	18	16
Want of Ventilation	1	1
Other Nuisances	4	4
Sanitary Accommodation—		
Unsuitable or Defective	12	10
Not separate for Sexes	2	1
Offences under Factory and Workshops Acts :—		
Illegal occupation of underground Bakehouse (Section 101)	1	1
Total	38	33

Ten notices of defects to be dealt with under Public Health Acts were received from the Factory Inspector, and in each case the premises were inspected, notices served where necessary and the defects in all cases were remedied.

Outworkers.—Two lists containing the names of 2 Outworkers, were received, and 3 inspections of the premises of such Outworkers were made.

Rag Flock Acts, 1911-28.—There are no Manufacturers of Rag Flock in the Borough. No samples have been taken during the year.

HOUSING.

The following figures show the progress made in house building since 1917 :—

		By Private Enterprise		By Corporation		Total
		Without Subsidy	With Subsidy	Without Subsidy	With Subsidy	
1917	....	6	—	—	—	6
1918	....	2	—	—	—	2
1919	....	6	—	—	—	6
1920	....	17	—	—	—	17
1921	....	9	—	—	86	95
1922	....	187	—	—	152	339
1923	....	264	1	—	35*	300*
1924	....	103	208	—	18*	329*
1925	....	96	399	—	15	510
1926	....	81	256	—	50	387
1927	....	56	334	—	—	390
1928	....	58	274	—	—	332
1929	....	63	420	—	—	483
1930	....	264*	—	—	—	264*
1931	....	266	2	—	—	268
1932	....	311	—	6	8	325
1933	....	720	—	29	132	881
1934	....	1,013	—	—	40	1,053
1935	....	735	—	—	34	769
1936	....	551	—	—	116	667

* The boundary of the Borough was extended in 1930 and nine additional houses in 1923 and 26 in 1924, which were erected by the Corporation, and 27 houses which were erected by private enterprise in 1930, were built on land which is now part of the County Borough.

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

(1) (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	....	....	....	....	....	1,486
(b)	Number of inspections made for the purpose	....	....	....	....	....	2,679
(2) (a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925	....	....	....	....	....	237
(b)	Number of inspections made for the purpose	....	....	....	....	....	850

4. Housing Act, 1935—Overcrowding—

(a) (1)	Number of dwellings overcrowded at the end of year	....	....	....	....	....	....	503
(2)	Number of families dwelling therein	....	....	....	....	....	....	505
(3)	Number of persons dwelling therein	....	....	....	....	....	....	2,802
(b)	Number of new cases of overcrowding reported during the year	....	....	....	....	....	....	26
(c) (1)	Number of cases of overcrowding relieved during the year	....	....	....	....	....	....	120
	Number of persons concerned in latter cases	....	....	....	....	....	....	605

Overcrowding.—A survey of the town was carried out during the early part of the year. 18,720 houses were visited by the enumerators. Overcrowding was found to exist in 599 cases.

709 houses were measured for completion of Form B.

It is regrettable that the standard set by the Housing Act, 1935, is so low, living rooms being included for sleeping purposes. This is particularly bad in small houses, where often the only living room must be used for all purposes.

Fifty-two families living in houses owned by the Council were found to be overcrowded and of these 15 have been rehoused.

Verminous Houses—Eradication of Bed Bugs—Corporation Houses.—Upon each change of tenancy of council houses, inspections are made by the Sanitary Inspectors. During the year 108 inspections were made and six houses were found to be infested and were subsequently dealt with.

Other Houses.—Sixty-four houses found to be infested were dealt with by the Corporation. In all these cases, infestation was not severe. The methods employed are fumigation with Fumoids and subsequent spraying with Paraffin oil 1,000 parts, Oil of Mirbane 2 parts, Cresol 2 parts, Pyrethrum flowers (ground) 10 parts. A Blow-lamp was used in a few cases and in most cases the skirtings, mouldings, picture rails, etc., were removed and sprayed. When removing to a Council house, the prospective tenant's house is visited and thoroughly examined and all steps are taken to ensure that no bugs are transferred.

Increase of Rent and Mortgage Interest (Restrictions) Act, 1920.—Two applications were received for Certificates under Section 2(2) of the above Act. No certificates were granted as the necessary work was carried out by the owner before formal action was due.

INSPECTION AND SUPERVISION OF FOOD.

Food and Drugs.—During the year 194 samples were taken for analysis :

Article Taken	No. of Samples		Genuine	Adulterated or below Standard
	Formal	Informal		
Milk—				
Morning	96	3	} 90	28
Afternoon	18	1		—
Pasteurised	1	—	1	—
Skimmed	2	—	2	—
Sterilized	1	—	1	—
Cream	—	8	8	—
Condensed Machine Skimmed Milk	—	1	1	—
„ Milk, Full Cream	—	2	2	—
Butter	—	7	7	—
Margarine	—	3	3	—
Lard	—	6	6	—
Coffee	—	3	3	—
Ground Almonds	—	3	3	—
Cheese.... ..	—	2	2	—
Ground Rice	—	3	3	—
Flour	—	3	3	—
Bread Meal	—	2	2	—
Baking Powder	—	3	3	—
Raspberry Jam	—	2	2	—
Black Currant Jam	—	1	1	—
Glycerine	—	2	2	—
Olive Oil	—	3	3	—
Bacon	—	3	3	—
Pork Sausage.... ..	—	8	8	—
Beef Sausage.... ..	—	7	7	—
Total	118	76	166	28

Fourteen samples were taken from the dealer or producer in course of delivery to the purveyor. Seven “Appeal to Cow” samples were taken on my behalf by the Officers of the Durham County Council and the North Riding County Council at farms lying outside the boundary of the County Borough of Darlington.

Twenty-eight samples fell below the standard set by the Sale of Milk Regulations, 1901-1912. These included 9 taken in course of delivery from dealer or producer to the retailer, and 5 “Appeal to Cow” samples; the latter proved the deficiencies to be due to natural causes, which is explained by the following table. In two cases the deficiencies were found to have been caused by the mis-use of mechanical milking machines, the strippings which are richest in cream had not been properly apportioned to the yield. One case was due to accident.

In 4 cases warnings were given.

DETAILS OF MILK BELOW STANDARD.

Sample No.	N.F.S.	Fat	Freezing Point	Remarks and action taken
2	8.30%	4.20%	-0.537°C.	Deficient 2.30% N.F.S. Genuine although below standard
15	8.48%	2.75%	-0.546°C.	Deficient in fat 8.40% Sample from retail purveyor. See Nos. 34 to 43
34	8.61%	2.55%	-0.531°C.	Deficient in fat 15%. Taken from producer in course of delivery to purveyor.
35	8.95%	3.55%	-0.536°C.	Above standard. Taken from producer in course of delivery to purveyor.
36	8.47%	2.80%	-0.537°C.	Deficient in fat 8.70%. Taken from producer in course of delivery to purveyor.
37	8.60%	2.75%	-0.534°C.	Deficient in fat 8.40%. Taken from producer in course of delivery to purveyor.
41	8.57%	2.40%	-0.547°C.	Def. in fat 20% Def. in fat 6.67% Above standard Appeal to Cow samples taken in connection with samples 15, 34 to 37. Genuine but below standard.
42	8.64%	2.80%	-0.547°C.	
43	9.41%	3.30%	-0.547°C.	
20	8.34%	2.60%	-0.549°C.	Deficient in fat 13.3%, N.F.S. 2%. Sample from retailer, see Nos. 31, 33, 38 and 39.
31	8.52%	2.40%	—	Def. in fat 20% Def. in fat 20% Def. in fat 8.70% Def. in fat 13.3% Above standard Taken from producer in course of delivery to retailer. Appeal to Cow samples. Genuine although below standard.
33	8.65%	2.40%	—	
38	8.62%	2.80%	-0.550°C.	
39	8.61%	2.60%	-0.544°C.	Deficient in fat 1.66% 1% added water. Sample from retail purveyor. See Nos. 29 and 30.
40	8.70%	3.65%	—	
25	8.68%	2.95%	—	
27	8.40%	3.50%	-0.524°C.	1% added water. Sample from retail purveyor. See Nos. 29 and 30.
29	8.48%	3.40%	-0.532°C.	Taken from producer in course of delivery to retailer. Samples genuine although below standard.
30	8.47%	3.40%	-0.534°C.	Deficient in fat 6.67%. Taken from retailer.
45	8.70%	2.80%	—	Deficient in fat 6.67%. Taken from producer in course of delivery to retailer.
57	8.60%	2.80%	-0.542°C.	Informal. 4% added water. Taken from dealer.
51	8.40%	4.10%	-0.514°C.	Formal, see Nos. 58 & 61. 4% added water. Taken from dealer in course of delivery to retailer.
58	8.52%	3.92%	-0.518°C.	Above standard but Freezing Point represents 4% added water. Taken from producer in course of delivery to retailer.
61	8.56%	3.80%	-0.520°C.	Appeal to Cow. Abnormality of Nos. 51 and 61 due to accident. Warning given.
62	8.94%	3.95%	-0.547°C.	Deficient in N.F.S. 3.6% = 2% added water. Taken from Retailer. See Nos. 59 and 60.
52	8.19%	3.35%	-0.527°C.	Taken in course of delivery from producer to retailer.
59	8.20%	3.60%	-0.539°C.	Appeal to Cow sample. Abnormality due to natural causes.
60	8.34%	3.52%	-0.544°C.	5% deficient in fat. Warning given.
79	8.43%	2.85%	-0.551°C.	13.4% deficient in fat. Taken from retailer.
81	9.01%	2.60%	—	6.66% deficient in fat. Taken from retailer.
83	9.06%	2.80%	—	Taken in course of delivery from the producer to the retailers of samples 81 and 83. Deficiency due to the use of mechanical milking machines, stripping not evenly apportioned. Warning given.
84	8.99%	3.10%	—	Deficiency in fat 8.34%. Warning given.
85	9.10%	3.35%	—	Below standard but genuine.
53	8.69%	2.75%	—	16.7% deficient in fat. Warning given.
179	8.39%	5.70%	-0.541°C.	
193	8.97%	2.50%	—	

MILK (Special Designations) ORDERS, 1923—1936.

Sixteen licences were in force under the Order ; one "Certified" Supplementary, one "Grade A (T.T.)" Bottling, one "Pasteurised", six "Grade A (Accredited)" Producers, one "Grade A" Producer Retailer, four "Grade A Accredited" Bottling Licences, and two "Grade A" Supplementary.

Forty-one samples of "Accredited" or "Grade A" Milk were taken, of which 10 did not comply with the standard in respect of *Bacillus Coli*. Of these 10 samples, 5 gave a positive reaction in .001 c.c., whilst the total counts per 1 c.c. were 100, 36,600, 1,700, 27,900 and 161,400. The latter two samples were actually sold as ungraded milk, although from persons holding licences, the milk being accommodation milk bought from producers of "Accredited" milk.

Seven samples of Grade "A" (T.T.) Milk were taken. One did not comply in respect to *B. Coli*. This sample gave a positive reaction for the presence of *B. Coli* in two of three tubes in .01 c.c. with a total count of 1,250 per c.c.

One sample of "Certified" Milk was taken and did not comply. The total count in this case was only 40 per c.c., with a positive reaction for *B. Coli* in .10 c.c. The person selling this milk discontinued business soon after, consequently no further samples could be taken.

Of four samples of "Tuberculin Tested" (Certified) Milk taken, only one complied with the standard for *B. Coli*. Investigations made by the appropriate authority shewed the cause to be due to a defect in the mechanical milking plant.

Three samples of "Pasteurised" Milk all complied with the requirements of the Order.

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915.

MILK AND DAIRIES ORDER, 1926.

	Producers.	Retailers.	Cowsheds.
On Register 1st January, 1936	30	143	30
Discontinued during the year	1	7	1
Added during the year	2	4	2
Total at end of year	31	140	31

Cowsheds.—Mr. C. G. Hill, M.R.C.V.S., makes inspections of the whole of the milch cows in the Borough each 3 months and the following are the inspections made during the year :—

	No. of Cowsheds visited	No. of Cows examined	Cows added since last inspection	Percentage New Cows
First Inspection	30	359	48	13.37%
Second Inspection	30	336	32	9.53%
Third Inspection	23	222	40	18%

During inspection of the herds one cow was reported to be suffering from Tuberculosis, but upon examination it was found that the animal was suffering from Lightning Shock. One cow was isolated from a herd owing to acute mastitis.

Seven herds comprising 121 cows were also inspected at intervals of 3 months under the Milk (Special Designations) Order, 1936.

In addition to the above, 108 visits were made to cowsheds and 202 inspections were made of Milk Retailers' premises by the Sanitary Inspectors. One informal notice was served for various defects and complied with.

Bacteriological Examination.—18 samples of ordinary or ungraded milk were taken and submitted for Bacteriological Examination. In all cases the total counts were below the maximum for Grade A or Accredited standard (200,000 organisms per m.l.), the highest being 126,000 the lowest 750.

In 10 cases the reaction for the presence of Coliform Bacilli was very good, in 4 cases the reaction was not so good whilst in 4 cases the reaction in .001 c.c. showed lack of care in production.

The sale of loose milk is and always will be a source of danger. All milk should be bottled at a dairy and not ladled out in streets, under all weather conditions.

Tuberculosis Order, 1925.—Under this Order notifications in 4 cases of Tuberculosis in cows slaughtered in the Borough were sent to the Authorities from which the animals came prior to slaughter.

In several cases, the origin of the animals could not be traced owing to inability to identify through change of ownership from market to market by cattle dealers.

Drainage and Sewerage.—The sewage of the town is conveyed by gravitation to the Sewage Farm in Skerne Valley about a mile to the south of the town. Storm overflows are provided at convenient points in the lower parts of the town in the neighbourhood of the River Skerne.

No serious flooding occurred through storms during the year.

Sanitary Conveniences.—Eight privy ashpits, 2 privy pans, and 2 privy middens have been removed and no water closets substituted. One privy ashpit has been converted into a water closet.

The following is a list of the various forms of sanitary conveniences in use in the Borough:—

Water Closets	....	....	....	23,346
Privy-ashpits	....	....	....	18
Privy-pans	....	....	....	2
Old Privy Middens	....	....	....	6
Total				23,372

The privies are at premises situate on the extreme borders of the Borough, in rural surroundings.

Scavenging and Tips.—The scavenging of the town is undertaken and carried out by the Borough Surveyor's Department.

Household refuse is collected in portable, covered, galvanized, iron refuse bins where no back streets exist, but where premises abut upon back streets tipping bins are used.

Household refuse is collected weekly by horse drawn and motor vehicles. At certain hotels and schools collection takes place twice and sometimes thrice per week. The material is dealt with by controlled tipping. The tips in use during 1936 were at Neasham Road, Harrowgate Hill, and the South Park.

A small Destructor is in use at Borough Road Yard where trade refuse and combustible materials are dealt with.

Artificial Cream Act, 1929.—No applications for registration were received during the year. Persons who manufacture Artificial Cream come within the exemptions enumerated in Section 2(1) of the Act regarding registration of premises.

Public Health (Preservatives in Food) Regulations, 1927.—122 samples of milk and 72 samples of provisions were examined for the presence of prohibited preservatives, injurious substances, or excess of any allowed preservatives. No samples were found to contravene the Regulations.

Inspection of Meat and Other Foods.—The total number of animals inspected at the time of slaughter or immediately afterwards was 44,588, which is about 99% of the bovines and pigs and 95% of sheep slaughtered in the Borough.

This number is made up of 2,989 bovines, 589 calves, 9,637 sheep and 4,524 pigs which were killed at the Abattoir, and 4,012 bovines, 1,239 calves, 13,732 sheep and 7,866 pigs which were killed in the private slaughterhouses.

There were 32 cases of emergency slaughter of which 5 were killed at the Abattoir, 22 outside the Borough and the remaining 5 in the private slaughterhouses. This number involved 5 cows, 3 bullocks, 2 heifers, 7 calves, 8 sheep, and 7 pigs, and as a result of inspection, the carcasses and all organs of 1 bullock, 3 calves, 1 sheep and portions only of the carcasses and organs of 1 sheep, 1 pig, 2 cows and 2 calves, were condemned and destroyed.

The total weight of food condemned and destroyed during the year was 16 tons, 18 cwts., 6 stones 4 lbs. of which 11 tons 18 cwts. 6 stones 1 lb. were on account of tuberculosis. All the above was surrendered voluntarily. 345 tins of machine skimmed milk was destroyed under a Magistrates Order.

Details of Whole Carcasses Condemned and Destroyed.

		Tons Cwts. Sts. Lbs.			
13 Cows	Generalized Tuberculosis	....	....	....	3 18 2 —
3 Heifers	"	....	....	....	— 17 5 —
3 Bullocks	"	....	....	....	— 16 3 —
1 Bull	"	....	....	....	— 8 1 —
6 Pigs	"	....	....	....	— 8 1 1
2 Cows	Tuberculosis and Emaciation	....	....	....	— 8 5 —
2 Cows	Johne's Disease with Emaciation	....	....	....	— 8 6 —
1 Bullock	" " " "	....	....	....	— 4 6 —
1 Cow	Johne's Disease	....	....	....	— 3 6 —
1 Cow	Septicaemia	....	....	....	— 5 — —
1 Heifer	Septic Metritis	....	....	....	— 5 5 —
1 Bullock	Quarter Ill	....	....	....	— 3 1 —
1 Calf	"	....	....	....	— 2 4 —
1 Bullock	Asphyxiation	....	....	....	— 8 1 —

							Tons	Cwts.	Sts.	Lbs.
2	Heifers	Moribund	....	....	....	....	—	2	2	—
1	Sheep	"	....	....	....	....	—	—	6	—
1	Calf	" and Septic Pneumonia	....	....	....	....	—	1	6	7
2	Sheep	Natural Death	....	....	....	....	—	—	5	7
1	Pig	" "	....	....	....	....	—	—	6	—
1	Calf	" "	....	....	....	....	—	—	3	—
1	Calf	Septic Pneumonia	....	....	....	....	—	1	2	—
1	Calf	White Scour	....	....	....	....	—	1	—	3
6	Sheep	Emaciation	....	....	....	....	—	1	4	7
1	Pig	Fevered	....	....	....	....	—	—	7	—
1	Pig	Rickets and Emaciation	....	....	....	....	—	—	2	—
2	Calves	Immaturity	....	....	....	....	—	—	6	7
2	Calves	Unborn	....	....	....	....	—	—	7	—
59	Total					....	9	12	—	4

Summary of all Food Condemned.

							Tons	Cwts.	Stones	Lbs.
59	Carcases	....	....	....	....	....	9	12	—	4
343	Lungs	....	....	....	....	....	2	1	—	6
213	Livers	....	....	....	....	....	1	—	1	5
81	Plucks	....	....	....	....	....	—	5	5	8
34	Stomachs	....	....	....	....	....	—	7	6	—
142	Mesenteries (Intestines)	....	....	....	....	....	1	5	1	13
9	Hearts	....	....	....	....	....	—	—	2	3
146	Heads and Tongues	....	....	....	....	....	—	19	6	3
16	Heads (Less Tongues)	....	....	....	....	....	—	2	5	1
2	Tongues	....	....	....	....	....	—	—	—	10
13½	Pairs of Kidneys	....	....	....	....	....	—	—	3	7
17	Briskets	....	....	....	....	....	—	2	3	11
16	Skirts	....	....	....	....	....	—	—	4	10
46	Udders	....	....	....	....	....	—	6	6	5
9	Trimmings	....	....	....	....	....	—	—	5	3
8	Mesenteric Fat	....	....	....	....	....	—	—	4	3
16	Omentum Fat	....	....	....	....	....	—	1	7	4
20	Portions	....	....	....	....	....	—	4	—	12
1	Rabbit	....	....	....	....	....	—	—	—	3
610	Tins Condensed Skimmed Milk	....	....	....	....	....	—	2	5	11
69	Tins Oranges	....	....	....	....	....	—	—	1	8
4	Tins Fruit Salad	....	....	....	....	....	—	—	—	2
1	Tin of Grapefruit	....	....	....	....	....	—	—	—	1½
18	Tins Pineapple	....	....	....	....	....	—	—	—	13½
1	Tin Prawns	....	....	....	....	....	—	—	—	7
4	Baskets Mushrooms	....	....	....	....	....	—	—	1	6
8	Boxes Apricots	....	....	....	....	....	—	1	1	—
3	Boxes Peaches	....	....	....	....	....	—	—	3	9
2	Boxes Cod Fillets	....	....	....	....	....	—	1	4	—
1	Gammon Bacon	....	....	....	....	....	—	—	—	10
1	Collar Bacon	....	....	....	....	....	—	—	—	8
Total						....	16	18	6	4

Slaughterhouses.—There are 20 privately owned licensed slaughterhouses within the Borough in addition to the Municipal Abattoir. One slaughterhouse outside the Borough is used by 4 butchers having business premises within the Borough. This slaughterhouse is regularly inspected by our Inspectors under arrangements with the Darlington Rural District Council.

Fifty-six butchers within the Borough and 6 butchers outside the Borough during 1936 used the Abattoir regularly. Five butchers outside the Borough and 4 allotment holders killed there occasionally. Six informal notices were served and complied with.

3,975 inspections were made in connection with the private slaughterhouses and the abattoir.

Public Health (Meat) Regulations, 1924.—There were no breaches of these Regulations during 1936.

Slaughter of Animals Act, 1933.—During the year 64 persons applied for licences to slaughter animals ; all were investigated and recommended.

Darlington Corporation Act, 1930—Section 160—Ice Cream.—

Manufacturers and Vendors on register	....	....	66
Vendors only	....	....	46
Inspections	....	....	151

Premises were maintained in a clean and satisfactory condition.

Shops Act, 1934—Section 10.—Seventeen cases were reported by the Shops Inspector of premises at which no proper heating arrangements were in use and 7 cases where sanitary conveniences were insufficient or unsuitable. The defects were remedied by informal action except in one case where formal proceedings were instituted.

Pharmacy and Poisons Act, 1933.—This Act came into force on May 1st, 1936, and required all persons selling poisons listed in Part 2 of the Act to be registered with the Local Authority. The Act deals with storage, labelling and transport of certain articles mentioned in the schedules. During the year 32 licences were granted ; 123 inspections of these premises were made and no contraventions were found.

Merchandise Marks Act, 1926.—The Orders under this Act now in force apply to the following imported goods.

1. Fresh Apples.
2. Raw Tomatoes.
3. Eggs in shell (*i.e.*, hen and duck eggs).
4. Dried Eggs.
5. Currants, sultanas, and raisins.
6. Oat products (*i.e.*, oatmeal, rolled oats, oat flour and groats).
7. Honey.
8. Frozen or chilled salmon and sea trout.
9. Imported Butter.
10. Dead Poultry.
11. Bacon and Ham.

Rats and Mice (Destruction) Act, 1919.

The total number of rats killed by the Rat Catcher during the year was 1,354 but these figures do not include the rats that were poisoned.

The following are the principal places at which the rats have been destroyed :—

West Auckland Road Tip	....	....	....	37
Harrowgate Hill Tip	....	....	....	448
Neasham Road Tip	....	....	....	176
Snipe Tip	....	....	....	327
North Road Tip	....	....	....	32
Springfield Stables	....	....	....	97
Sundry Premises	....	....	....	237
				1,354

Nine Informal Notices were served and complied with.

Fertilisers and Feeding Stuffs Act, 1926.—Officially one sample of Pure White Fish Meal was taken and submitted for analysis. The report stated that although there was an excess of Oil, the sample did not differ materially in other respects from the details contained in the statutory statements.

Infectious Diseases.—The following are particulars of the fumigation of houses and other buildings, and the disinfection of bedding, clothing, etc.

	Fumigations				Lots of Bedding and Clothing Disinfected
	Hos- pitals	Houses	Schools and other Buildings	Rooms	
Infectious Disease other than Tuberculosis, Cancer, etc.	9	530	17	690	589
Tuberculosis	—	41	—	45	41
Cancer	—	3	—	4	4
Measles, etc.	—	2	—	2	2
Totals	9	576	17	741	636

Common Lodging-Houses.—There are 3 Common Lodging-houses on the Register with accommodation for 360 lodgers.

The lodging-houses are regularly and frequently inspected, and are kept in a satisfactory condition.

During the year 115 days were lost owing to illness and changes amongst the Inspectors.

This loss of time allowed arrears of work to accumulate, but I am sure that progress has been made, and I am grateful to all the staff for their help toward this end.

I am,

Yours respectfully,

ALBERT EDW. WADE,

Senior Sanitary Inspector.

SECTION H.

APPENDIX.

STATISTICAL TABLES. TABLE 1.

BIRTH-RATES, DEATH-RATES and ANALYSIS of MORTALITY during the Year 1936.

Registrar-General's figures.

	RATE		ANNUAL DEATH-RATE PER 1,000 POPULATION.										DEATH RATE PER 1,000 LIVE BIRTHS		PERCENTAGE OF TOTAL DEATHS			
	Per 1000		All Causes	Typhoid & Paratyphoid	Smallpox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under One Year	Certified by Registered Medical Practitioners	Inquest Cases	Certified by Coroner After P.M.	No Inquest	Uncertified Causes of Death
	Live Births	Still Births																
England and Wales	14.8	0.61	12.1	0.01	—	0.07	0.01	0.05	0.08	0.15	0.65	5.7	59	90.4	6.2	2.4	1.0	1.0
122 County Boroughs & Great Towns including London	14.9	0.59	12.3	0.01	—	0.10	0.01	0.06	0.09	0.13	0.54	7.8	63	90.9	5.6	3.0	0.5	0.5
143 Smaller Towns (Estimated Resident Populations 25,000—50,000 at Census 1931)	15.0	0.64	11.6	0.01	—	0.05	0.01	0.04	0.07	0.16	0.54	4.6	56	92.0	5.0	1.9	1.1	1.1
London	13.6	0.45	12.3	0.01	—	0.14	0.01	0.07	0.05	0.13	0.56	14.5	66	87.9	5.9	6.1	0.1	0.1
Durham County †	17.3	0.81	11.9	0.01	—	0.06	0.05	0.09	0.22	0.14	0.54	7.09	71	90.1	6.05	—	3.82	—
DARLINGTON †	15.5	0.82	12.7	—	—	0.03	0.03	—	0.24	0.06	0.66	42.9	58	90.0	5.3	0.7	4.0	4.0

† Local Figures.

† Local Figures.											
MATERNAL MORTALITY—England and Wales {											
per 1,000 Live Births											
per 1,000 Total Births											
Durham County {											
per 1,000 Live Births											
per 1,000 Total Births											
Darlington {											
per 1,000 Live Births											
per 1,000 Total Births											
Puerperal Sepsis.											
Others											
Total											
3.81											
2.41											
3.65											
6.76											
3.80											
6.46											
2.96											
2.83											
0.85											
1.70											
2.55											
2.43											
1.62											
0.81											

TABLE II.

Annual Summary of Registrar General for 1936.

TOWNS.	Estimated Resident Population Mid. 1936.	Live-Births.	Still-Births.	Deaths (excluding Still-Births).	Deaths of Infants under 1 year of age.	Rate per 1,000 Living.		Death-rate per 1,000 living.					Death-rate per 1,000 Live Births.	
						Live Births.	Deaths (excluding Still-Births).	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Diarrhoea and Enteritis (under 2 years).	Infants under 1 year.
122 Great Towns	20,937,128	312,072	12,394	256,711	19,678	14.9	12.3	0.10	0.01	0.06	0.09	0.13	7.8	63
Middlesbrough C.B.	140,000	2,589	124	1,712	188	18.5	12.2	0.14	0.02	0.02	0.07	0.14	5.8	73
Stockton-on-Tees M.B.	66,680	1,309	43	753	61	19.6	11.3	0.07	0.03	0.12	0.15	0.16	3.8	47
West Hartlepool C.B.	70,720	1,304	48	903	70	18.4	12.8	0.14	—	0.04	0.34	0.13	3.1	54
Sunderland C.B. ...	184,179	3,606	150	2,363	261	19.6	12.8	0.01	0.02	0.06	0.16	0.17	17.2	72
South Shields C.B.	111,800	1,878	74	1,467	163	16.9	13.2	0.07	0.05	0.03	0.07	0.16	11.7	87
Gateshead C.B. ...	119,034	2,050	103	1,578	188	17.2	13.3	0.19	0.01	0.17	0.07	0.08	14.6	92
Newcastle-on-Tyne C.B.	290,400	4,537	190	3,826	405	15.6	13.2	0.06	0.03	0.03	0.12	0.13	21.4	89
Tynemouth C.B.	66,800	1,190	53	779	79	17.8	11.7	0.12	0.01	0.03	—	0.15	15.1	66
DARLINGTON C.B.	75,500	1,172	62	966	68	15.5	12.8	0.03	0.03	—	0.25	0.07	0.9	58

TABLE III.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN DARLINGTON, 1936,
(Figures supplied by the Registrar General).

CAUSES OF DEATH	Sex	All Ages	0—	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—	Deaths in Darlington Institutions and Non-Residents	Deaths in other Institutions
All causes	M. F.	508 458	34 34	6 7	9 10	17 16	17 12	22 25	23 26	57 38	100 70	128 101	95 119	...	...
Uncertified	M. F.	26 13	1 1	...	...	1 ...	...	1	...	5 3	6 3	5 3	6 2	...	...
1. Typhoid and Paratyphoid Fevers	M. F.	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2. Measles	M. F.	1 1	...	1	...	...	...	...	...	...	...	...	...	1	...
3. Scarlet Fever	M. F.	1 1	...	...	1	...	...	...	...	1	...	...	...	1	...
4. Whooping Cough	M. F.	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5. Diphtheria	M. F.	9 10	...	...	1 4	7 5	1 1	...	...	...	...	...	...	15 10	...
6. Influenza	M. F.	3 2	...	1	...	...	...	...	1	1	...	1	1	1	...
7. Encephalitis Lethargica	M. F.	...	...	...	...	...	...	...	...	...	...	...	...	...	...
8. Cerebro-Spinal Fever	M. F.	...	...	...	...	...	...	...	...	...	...	...	...	1	...
9. Tuberculosis of Respiratory System	M. F.	31 30	...	...	...	1 2	7 2	7 13	5 7	8 2	3 3	...	...	9 9	1 3
10. Other Tuberculous Diseases	M. F.	7 3	2 1	1 ...	...	1 2	1 ...	1 ...	1 ...	...	...	...	...	4 1	...
11. Syphilis	M. F.	2 ...	...	...	...	...	...	...	...	1	...	1	...	1	...
12. General Paralysis of the Insane, Tabes Dorsalis	M. F.	2 ...	...	...	...	...	...	...	...	...	2	...	...	1	...
13. Cancer, Malignant Disease	M. F.	47 52	...	...	...	...	...	...	...	9 7	12 16	19 18	7 7	23 20	...
14. Diabetes	M. F.	6 3	...	...	...	...	1	...	1	...	1	3	1	3	...
15. Cerebral Haemorrhage, etc.	M. F.	27 28	...	...	...	...	...	...	...	1 4	8 5	10 9	8 10	3 4	...
16. Heart Disease	M. F.	130 104	...	...	...	2 1	...	2 5	3 4	16 8	34 20	37 34	36 30	14 11	2 ...

TABLE IV.

INFANT MORTALITY.

1936. NET DEATHS FROM STATED CAUSES AT VARIOUS
AGES UNDER ONE YEAR OF AGE.

CAUSES OF DEATH					Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 weeks	4 Weeks—3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 1 Year
All causes	{ Certified Uncertified	...	...	33	6	4	3	46	9	5	5	1	66	
		...	...	1	...	1	...	2	...	...	...	...	2	
{ Chickenpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Influenza	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Tuberculous Meningitis	...	...	...	...	...	...	...	...	2	...	...	...	...	2
{ Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Tuberculous Diseases	...	...	...	1	...	...	...	1	...	...	...	...	...	1
{ Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Convulsions	...	...	...	2	...	1	...	3	1	1	1	...	...	6
{ Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Bronchitis	...	...	...	...	...	...	...	...	...	2	...	...	...	2
{ Pneumonia (all forms)	...	...	...	...	...	...	...	...	4	...	2	1	...	7
{ Diarrhoea	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Enteritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Gastro-enteritis	...	...	...	...	...	2	...	2	...	1	...	...	...	3
{ Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Injury at birth	...	...	...	4	1	...	1	6	...	...	...	...	...	6
{ Atelectasis	...	...	...	1	...	1	...	2	...	...	...	...	...	2
{ Congenital Malformations	...	...	...	3	...	...	...	3	2	1	1	...	...	7
{ Premature Birth	...	...	...	20	3	...	...	23	...	...	...	...	...	23
{ Atrophy, Debility and Marasmus	...	...	...	1	1	1	2	5	...	...	1	...	...	6
{ Other causes	...	...	...	2	1	...	...	3	...	...	...	...	...	3
Totals					34	6	5	3	48	9	5	5	1	68

Net Live Births in the year—Legitimate, 1,117 ; illegitimate, 55.

Net Deaths in the year—Legitimate Infants, 66 : males, 34 ; females, 32.

Illegitimate Infants, 2 : males, 0 ; females, 2.

TABLE V.
NOTIFIABLE DISEASES DURING 1936. (Deaths in Brackets).

[illegible]

INFECTIOUS DISEASES.

TABLE VI.

The following table shows the number of cases of **Infectious Disease** notified each month during 1936

	Cerebro Spinal Fever	Smallpox	Scarlet Fever	Diphtheria and Membranous Croup	Enteric Fever	Pulmonary Tuberculosis	Other forms of Tuberculosis	Puerperal Fever	Puerperal Pyrexia	Erysipelas	Ophthalmia Neonatorum	Measles and German Measles	Acute Anterior Poliomyelitis	Acute Encephalitis Lethargica	Acute Pneumonia	Malaria	Whooping Cough	Totals
January	...	...	70	21	1	6	4	1	1	7	1	209	...	...	4	...	8	333
February	...	...	38	25	...	5	...	2	2	1	3	188	...	...	8	...	4	274
March	...	...	62	22	...	10	3	...	...	5	...	199	...	...	4	...	1	308
April	...	...	45	19	...	15	5	1	...	2	...	101	...	...	3	...	4	195
May	...	...	41	12	...	6	4	2	...	2	...	28	...	...	2	...	...	97
June	...	...	18	6	...	12	1	...	2	1	1	16	...	...	3	...	6	66
July	...	...	16	9	2	2	3	...	2	1	1	28	1	...	1	...	3	67
August	...	...	11	4	8	7	6	1	...	2	2	14	...	...	3	...	3	62
September	...	...	44	4	1	6	3	1	1	3	...	3	...	...	4	...	9	79
October	...	...	36	4	1	9	4	...	4	3	1	3	...	...	3	...	6	74
November	...	...	48	21	...	8	2	1	...	5	...	4	...	...	5	...	12	106
December	...	...	37	27	...	12	6	1	1	2	1	3	...	...	4	...	9	103
Totals for 1936	...	...	466	174	13	98	41	10	12	34	10	796	1	...	44	...	65	1764
Totals for 1935	1	...	529	96	...	77	29	10	7	43	4	1458	3	...	82	...	192	2531

TABLE VII.
1936 CANCER DEATHS—PARTS OF BODY AFFECTED.

PARTS AFFECTED	Under 35		35-45		45-55		55-65		65-75		75 & over		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Mouth and Throat ...	...	...	...	...	2	...	1	...	3	...	1	...	7	...
Gastro Intestinal ...	...	...	...	1	6	2	9	7	12	12	5	3	32	25
Genito Urinary...	...	...	...	...	...	2	...	3	2	2	...	...	2	7
Breast ...	...	...	...	2	...	3	...	2	...	2	...	1	...	10
Bones ...	...	...	...	...	...	...	...	...	1	...	1	...	...	2
Glands ...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
Thorax ...	...	...	...	1	1	...	1	...	...	...	1	1	3	2
Skin ...	...	...	...	...	...	...	1	...	1	...	1	...	3	...
Brain ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals ...	...	...	...	4	9	7	12	13	18	17	8	6	47	47

TABLE VIII.
INFECTIOUS DISEASES IN WARDS, 1936.

Disease	Harrowgate Hill	North Road	Cockerton	Northgate	Pierremont	Central	North-East	Eastbourne	West	South	Total
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	35	49	42	35	46	32	50	72	55	50	466
Diphtheria ...	8	14	12	23	16	25	16	19	24	17	174
Enteric Fever ...	2	1	1	—	1	1	1	4	1	1	13
Pulmonary Tuberculosis ...	16	16	7	12	6	12	11	7	7	4	98
Other forms of Tuberculosis ...	5	8	4	2	3	1	3	12	—	3	41
Puerperal Fever ...	2	1	3	—	—	—	2	—	1	1	10
Puerperal Pyrexia ...	—	1	1	1	3	3	2	—	—	1	12
Erysipelas ...	2	4	3	2	4	7	3	4	2	3	34
Ophthalmia Neonatorum ...	2	—	1	2	1	1	—	2	—	1	10
Acute Anterior Poliomyelitis ...	—	—	1	—	—	—	—	—	—	—	1
Acute Encephalitis Lethargica ...	—	—	—	—	—	—	—	—	—	—	—
Acute Pneumonia ...	7	7	4	4	3	3	7	5	3	1	44
Malaria ...	—	—	—	—	—	—	—	—	—	—	—
Measles and German Measles ...	23	44	155	42	49	102	104	129	57	91	796
Whooping Cough ...	8	20	4	3	2	6	7	8	1	6	65
Cerebro Spinal Fever ...	—	—	—	—	—	—	—	—	—	—	—
Total ...	110	165	238	126	134	193	206	262	151	179	1764

TABLE IX.

**Incidence of NOTIFIABLE DISEASES, DEATHS and ADMISSIONS TO ISOLATION HOSPITAL
during the past eight years.**

DISEASE	1929			1930			1931			1932			1933			1934			1935			1936		
	Notifications.	Deaths.	Admitted to Hospital.	Notifications.	Deaths.	Admitted to Hospital.	Notifications.	Deaths.	Admitted to Hospital.	Notifications.	Deaths.	Admitted to Hospital.	Notifications.	Deaths.	Admitted to Hospital.	Notifications.	Deaths.	Admitted to Hospital.	Notifications.	Deaths.	Admitted to Hospital.	Notifications.	Deaths.	Admitted to Hospital.
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	158	...	153	135	1	131	219	1	203	115	...	101	221	...	187	440	4	380	529	2	403	466	2	322
Diphtheria	138	8	134	158	5	154	65	3	65	45	...	43	39	...	38	54	...	54	96	13	90	174	18	168
Typhoid and Paratyphoid Fevers	6	2	6	3	...	3	4	...	3	1	...	1	5	1	4	4	...	4	...	...	...	13	...	10
Puerperal Fever	1	1	...	3	3	...	11	4	6	9	4	5	10	3	6	6	3	6	10	1	9	10	1	5
Puerperal Pyrexia	15	2	4	16	...	1	14	...	...	6	...	1	13	...	1	15	...	4	7	1	1	12	...	1
Pneumonia (all forms)	195	109	24	138	56	10	172	70	16	80	46	11	105	56	22	76	38	11	82	60	2	44	44	...
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	1	2	1	1	1	...	2	2	...	...	...	...	2	1	1	1	4	...	...	2	...	...	...	...
Erysipelas	27	1	5	31	...	1	52	...	7	20	...	1	41	3	16	37	1	5	43	...	9	34	1	4
Measles and German Measles	1109	4	2	1,274	25	8	484	4	11	325	5	5	917	8	10	908	8	11	1,458	4	12	796	2	4
*Chickenpox	279	...	...	382	...	...	517	...	...	492	...	...	347	...	...	517	...	...	163	...	1	...	...	...
Ophthalmia Neonatorum	12	...	...	7	...	...	8	...	...	5	...	1	2	...	...	9	...	...	4	...	1	10	...	4
Cerebro-Spinal Fever	...	...	...	...	...	...	1	...	1	4	1	4	3	1	3	1	...	...	1	1	1	...	...	...
Acute Anterior Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...	...	3	...	...	1	...	1
Whooping Cough	146	11	...	41	...	...	158	8	3	181	2	...	121	8	1	76	2	...	192	7	1	65	...	1

* Ceased to be Compulsorily Notifiable from 27th March, 1935.

TABLE X.

TUBERCULOSIS.

RETURN SHOWING THE WORK OF THE DISPENSARY, 1936.

DIAGNOSIS.		Pulmonary.				Non-Pulmonary.				TOTAL.				GRAND TOTAL.
		Adults.		Children.		Adults.		Children.		Adults.		Children.		
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts):														
(a)	Definitely tuberculous	...	...	...	...	...	...	...	...	...	...	...	...	6
*(b)	Diagnosis not completed	...	...	...	...	...	...	...	...	...	...	...	...	152
(c)	Non-tuberculous	...	...	...	...	...	...	...	...	...	...	...	...	85
B.—Contacts examined during the year:—														
(a)	Definitely tuberculous	...	...	...	...	...	...	...	...	...	...	...	...	26
*(b)	Diagnosis not completed	...	...	...	...	...	...	...	...	...	...	...	...	97
(c)	Non-tuberculous	...	...	...	...	...	...	...	...	...	...	...	...	71
C.—Cases written off the Dispensary Register as:—														
(a)	Recovered	...	...	...	...	...	...	...	...	...	...	...	...	31
(b)	Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	...	...	...	...	...	...	...	...	...	...	...	...	194
D.—Number of Cases on Dispensary Register on December 31, 1936														
(a)	Definitely tuberculous	...	...	...	...	...	...	...	...	...	...	...	...	379
(b)	Diagnosis not completed	...	...	...	...	...	...	...	...	...	...	...	...	—
1. Number of cases on Dispensary Register on January 1st, 1936		...	...	...	...	...	...	...	...	...	...	...	...	7
		447												50
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"		...	...	...	...	...	...	...	...	...	...	...	...	—
		80												—
5. Number of attendances at the Dispensary (including Contacts)		...	...	...	...	...	...	...	...	...	...	...	...	12
		1,561												—
7. Number of consultations with medical practitioners:—		...	...	...	...	...	...	...	...	...	...	...	...	42
(a)	Personal	...	...	...	...	...	...	...	...	...	...	...	...	—
(b)	Other...	...	...	...	...	...	...	...	...	...	...	...	...	—
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes...		...	...	...	...	...	...	...	...	...	...	...	...	193
		1,064												120
10. Number of:—		...	...	...	...	...	...	...	...	...	...	...	...	—
(a)	Specimens of sputum, etc., examined	...	...	...	...	...	...	...	...	...	...	...	...	87
(b)	X-Ray examinations made in connection with Dispensary work	...	...	...	...	...	...	...	...	...	...	...	...	—
12. Number of "T.B. plus" cases on Dispensary Register on December 31st, 1936		...	...	...	...	...	...	...	...	...	...	...	...	—
		—												—

• i.e., remaining undiagnosed on 31st December, 1936.

TABLE XI.

SUMMARY OF METEOROLOGICAL OBSERVATIONS, 1936, TAKEN DAILY AT
THE SOUTH PARK, DARLINGTON.

Month	Barometer Reading (Inches)		Temperature Registered (Degrees Fahr.)		Total Rainfall (in inches)	Greatest Rainfall in any 24 hours. Depth (in inches)	Date of Greatest Fall	Number of days on which rain fell .01 inches or more
	Highest	Lowest	Highest	Lowest				
January ...	30.7	28.8	46	17	2.96	0.56	9	20
February ...	30.5	28.8	54	16	3.09	0.84	29	14
March ...	30.1	28.9	64	28	2.02	0.75	25	17
April ...	30.3	29.3	62	26	1.17	0.26	12	12
May ...	30.3	29.6	68	31	1.94	0.83	24	14
June ...	30.2	29.5	78	36	4.25	1.04	3	16
July ...	29.9	29.3	76	45	3.76	1.21	9	24
August ...	30.3	29.2	84	44	2.06	0.61	6	11
September ...	30.3	28.9	61	36	3.90	1.47	14	11
October ...	30.3	28.8	70	28	1.38	0.30	31	16
November... ..	30.5	28.4	60	20	2.47	0.85	11	22
December ...	30.5	28.3	58	26	1.56	0.65	14	15
Totals ...	...	...	...	...	30.56	...	...	192
Averages...	...	...	...	...	2.55	...	...	16

The average rainfall for the past 5 years is 26.17 inches.

8th January, 1937.

T. J. MORRISON, Superintendent of Parks.



County Borough of Darlington.

ANNUAL REPORT

OF THE

School Medical Officer,

G. A. DAWSON, M.D., D.P.H., F.R.San.I.,

FOR THE

Year ending 31st December, 1936.

DARLINGTON:

THE SKERNE PRINTING CO. (1927) LTD., GARDEN STREET.

County Borough of Darlington.

*To the Chairman and Members
of the Education Committee.*

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit my Eleventh Annual Report on the School Medical Services.

Routine inspections have been carried out in all the schools according to schedule. There are 10,127 children on our elementary school registers and 3,291 were examined in the three routine inspections. The total number of individual defective children was 614 excluding uncleanliness and dental diseases. There were 9,697 other inspections for defects and also monthly or even more frequent visits to the Open-air, Barnard and Nursery Schools.

The average attendance throughout the year varied from 85—92% in the various schools. Parents were present in 75% entrants' examinations, but only in 53% in second age group and 27% in the third or 12 year old group. It is important that parents and head teachers should be present at medical inspections as often as possible in order that advice can be clearly given and understood.

Nutritional surveys have been carried out with the co-operation of the head teachers. Every child suspected of malnutrition is referred for medical inspection and free milk if necessitous. The scheme includes the distribution of milk free and at cost price twice daily in the schools. At the end of the year 656 children were having it free and 5,428 at cost price. The provision of free milk to necessitous children suffering from malnutrition has achieved excellent results. As milk is a perfect food, containing all the necessary proteins, sugars, fats and minerals, one hopes to see a general increased consumption. As a race we drink less than half the amount per head which the Scandinavians drink. Anyone who has travelled in these northern countries must have been struck by the fine physique of the inhabitants.

The subject continually before us this year was the important one of co-ordination of nutrition with mental and physical training. The pursuit of physical fitness along with that of mental fitness should commence in the earliest years of life. All our new schools are built on the open-air plan so that theory and practice can go hand in hand. Instead of the old storied building on a cramped site, we have today single story structures with playing fields, gymnasias, baths, assembly halls, kitchens and domestic centres and even laboratories for the study of biology and hygiene. Hand in hand with the theoretical training, there is thus the opportunity of practising good personal habits in cleanliness, diet, exercise and fresh air. In the latest publication of the Board of Education on Suggestions for Teachers, physical fitness takes first place.

In order that the foundations of education may be well and truly laid, I would again urge the importance of establishing and increasing nursery schools and classes for children under five years. One quarter of the children entering our infant departments are suffering from remediable defects which could have been dealt with much more economically had the children been treated in nursery schools and brought under medical supervision. The excellent work of the George Dent Nursery School for 100 children deserves to be copied in Rise Carr and Eastbourne areas.

A report by Dr. Brown on rheumatism carries with it a suggestion which I endorse that the Sherborne School Camp at Saltburn might be used for children suffering from subacute forms of this trouble. The open-air school is not quite a suitable place for these cases.

The work of the School Clinic at Greenbank has continued to grow in the part it plays in our co-ordinated service. A second dentist—Miss Wignall, has been appointed on the basis of one for 5,000 children as recommended in Circular 1444 from the Board of Education, and additional accommodation has been provided for this service.

The speech training class under Miss Joan Livock has justified its institution and the results warrant a continuation of the work. A speech defect causes incalculable inferiority complex in school life and afterwards.

I note with pride the increasing attention given to physical training and the general raising of the standard of the instruction of both organizers and scholars. The new school at Eastbourne, opened in September, by the President of the Board of Education is, as he described it, probably one of the finest if not the finest in the country with its gymnasium, playing fields, bath, central hall with stage, biological laboratories, its domestic centre and fully furnished bungalow for the practical side of housewifery.

Finally, I wish to record my grateful thanks, first of all to you Alderman Leach, now about to complete 40 years service, for the spirit of advancement you have shown in this work at all times, then to the Committee as a whole, to Mr. Whalley, to the head teachers, and the medical, nursing and clerical staff for their faithful help during the year.

G. A. DAWSON,

School Medical Officer.

MEMBERS OF THE EDUCATION COMMITTEE.

HIS WORSHIP THE MAYOR, COUNCILLOR R. LUCK, (*Vice Chairman*).

ALDERMAN C. H. LEACH, Barrister-at-Law, M.B.E., M.A. (*Chairman*).

ALD. A. J. BEST, J.P.

ALD. S. HARDWICK, J.P.

COUN. J. BANKS

COUN. H. P. BELL, J.P.

COUN. R. F. SCOTT

COUN. M. GALLAGHER, M.Sc., A.I.C.

COUN. J. D. HINKS, J.P.

COUN. P. HARRISON

COUN. A. HILDRETH

COUN. W. HESLOP, J.P.

COUN. J. CLAYTON, F.R.I.B.A.

COUN. W. G. CHANDLER, M.B.E., J.P.

COUN. T. E. HUDSON

COUN. J. WATERS.

MRS. J. E. HODGKIN

LADY STARMER

STAFF OF SCHOOL MEDICAL SERVICE.

School Medical Officer—

G. A. DAWSON, M.D., D.P.H., F.R.San.I.

Assistant School Medical Officers—

ISOBEL C. BROWN, M.B., Ch.B., D.P.H.

WILLIAM HARTSTON, M.D., M.R.C.P., D.P.H., (Resigned 19/9/36).

WILLIAM E. ORCHARD, M.D., D.P.H., (Commenced 14/12/36).

Ophthalmic Surgeon—

A. T. PATERSON, M.D., F.R.C.S.Ed., D.P.H. (Part-time)

School Dental Officer—

J. L. LIDDELL, L.D.S.

Nurses—

AGNES GARDNER (Senior Nurse).

CATHERINE GARDNER.

GLADYS M. WHITTAKER.

Clerks—

ETHEL WESTMARLAND (Senior Clerk).

AUDREY SMITH.

ENID LANE.

JEANNE LEWIS.

ELEMENTARY SCHOOLS, 1936.

NO. OF CHILDREN EXAMINED AT ROUTINE MEDICAL
INSPECTION.

	ENTRANTS		2nd AGE GROUP		3rd AGE GROUP		TOTAL		OTHER ROUTINE INSPECTIONS		No. on the Books Dec. 1936
	No. ex- amined	Parents present	No. ex- amined	Parents present	No. ex- amined	Parents present	No. ex- amined	Parents present	No. ex- amined	Parents present	
Albert Road ...	—	—	—	—	115	22	115	22	65	3	354
Beaumont Street ...	51	32	14	11	116	28	181	71	38	7	507
Bondgate ...	7	4	19	4	—	—	26	8	—	—	—
Borough Road ...	55	36	31	10	—	—	86	46	2	—	372
Corporation Road	106	81	92	66	—	—	198	147	16	14	820
Dodmire ...	156	122	110	41	—	—	266	163	18	12	1,031
Eastbourne ...	—	—	—	—	40	25	40	25	1	—	633
Gurney Pease ...	35	27	51	24	—	—	86	51	—	—	305
Harrowgate Hill ...	104	83	91	59	—	—	195	142	21	13	655
Gladstone St. ...	—	—	—	—	179	23	179	23	30	3	443
Reid Street... ..	84	68	73	56	111	56	268	180	10	2	602
Rise Carr ...	52	40	64	17	—	—	116	57	4	3	499
North Road ...	82	61	88	36	210	40	380	137	12	6	895
Alderman Leach ...	53	35	60	35	—	—	113	70	1	1	380
Cockerton ...	15	10	12	2	5	3	32	15	1	—	269
Holy Trinity ...	24	22	20	13	19	13	63	48	3	3	262
Arthur Pease ...	40	37	24	13	—	—	64	50	9	7	195
St. Augustine's ...	51	32	48	26	88	25	187	83	10	—	714
Holy Family ...	12	9	22	14	—	—	34	23	2	—	151
St. John's ...	73	56	46	24	45	2	164	82	4	4	423
St. William's ...	39	21	62	35	—	—	101	56	5	3	353
Haughton ...	42	39	35	28	59	30	136	97	9	8	264
TOTALS ...	1,081	815	962	514	987	267	3,030	1,596	261	89	10,127

Average % Attendance throughout the Year:—

January	February	March	April	May	June	July
86.0	85.0	87.8	89.4	92.0	92.1	91.2
	September	October	November	December		
	90.4	89.9	88.4	87.9		

Parents present:—Entrants or 1st Age Group 75.4% 2nd Age Group 53.4%
3rd Age Group 27%

MEDICAL INSPECTION.

There were 10,127 elementary children on roll in 21 schools.

Routine Medical Inspection provides for the examination of the elementary school child three times during school life.

- (1) As an entrant—usually at the age of five years.
- (2) As an intermediate or 2nd Age Group—between the age of eight and nine years.
- (3) As a leaver or 3rd Age Group—at the age of 12 years or over.

All children found at routine examinations to be suffering from any form of defect were examined at regular intervals by the Medical Officers. The School Nurses followed up this work by visits to the homes. During the year 3,291 routine examinations were carried out, 4,802 defective children were re-examined and 4,895 children were brought forward for special examination at the instance of teacher or parent.

Parents were present in 75.4% of entrants', in 53.4% of the 2nd Age Group, and in 27% of the 3rd Age Group inspections.

Nutrition.—During the year every child certified in need of extra nourishment was allowed one third of a pint of milk twice daily. The scheme is now, of course, fully established and we are grateful for the help and full co-operation given us by the Head teachers in this work, as we realise that it is only in this way that all children in need of help are brought to our notice. Every child is examined by a Medical Officer and it is only on medical certification that such grants are made.

There is no doubt that the scheme for the provision of free milk fully justifies itself. The children, on subsequent examinations, show not only, in the large majority of cases, an increase in weight, but also an improved condition of general well-being, manifesting itself in a brighter appearance and a more responsive and alert attitude in work at school. Perhaps the most marked results of improvement are seen in children in the backward classes where the proportion of children in receipt of free milk is greater than in any other class and teachers are generous in their praise of the results shown in the improvement in the childrens' work. This finding is of course to be expected because the correlation between the physical and mental well-being is very close.

Of the total number of children examined, 25.19% were classified as of excellent nutrition, 56.49% as normal, 17.74% as slightly subnormal and only 0.58% as bad.

Few cases were due to actual lack of food. Wrong feeding, lack of sufficient rest, sunshine and ventilation, were more usual reasons for the defects.

The number of children found to be subnormal is slightly higher than for the year 1935. This might be accounted for by the fact that although unemployment, therefore poverty, has not increased, yet a contributory cause of subnormal nutrition is lack of sun. The year 1936 has been noticeably lacking in sunshine in Darlington and the effect upon the children is being remarked upon by all types of people carrying out social work.

At the beginning of the year the average number of bottles of milk supplied per day to school children, was as follows :—

Free 831, in respect of 476 children ; paid for 4,081, in respect of 5,680 children.

The figures at the end of the year were :—

Free 1,186, in respect of 656 children ; paid for 4,253, in respect of 5,428 children.

Uncleanliness.—Nurses paid 275 surprise visits to 23 schools and 567 home visits making 12,707 inspections. Nits were found in 513 cases and at the end of the year this figure had fallen to 144—the lowest recorded. Legal proceedings were taken in one case and the threat of similar proceedings with some of the persistently dirty families has produced general improvement.

Skin Diseases.—There has been a noticeable decrease in the number suffering from skin diseases. Cases of ringworm of the body and scalp only numbered sixteen—the lowest figure on record—while cases of Impetigo (345) and Scabies (27) were also less in incidence and severity, proving that parents are recognising the importance of cleanliness in the prevention and treatment of these conditions.

Ear Diseases.—Discharging ears are now regarded with more respect than formerly, because it is appreciated that persistence ultimately leads to deafness and other serious handicaps. 190 cases received treatment during the year. The earlier and more thorough treatment of diseases of the nose and throat is largely responsible for the improvement. Whereas in 1924 we had 17 children requiring special education at Institutions for the deaf, today we have only 5.

Rheumatism.—Special attention has been given to children suffering from rheumatism. Detailed records have been kept and the children examined at regular intervals both at the School Clinic and at Routine Inspections in the Schools.

122 children (90 girls and 32 boys) were found to be suffering from some form of rheumatism. Of these, 21 had cardiac involvement necessitating prolonged absence from school ; 27 cases (22 girls and 5 boys) were diagnosed as chorea, and the remaining cases gave a history of acute or subacute attacks of rheumatism of varying degrees.

Mention has frequently been made in previous reports of the difficulty arising in the treatment of cases of rheumatism, particularly cases convalescent from chorea and cases showing cardiac involvement which have been discharged from hospital. These require rest, nourishment and fresh air—preferably a change of air altogether, and if more institutional treatment were readily available, the majority of such cases attending the Clinic would have been recommended for it. Under the present economic conditions, it appears almost impossible for the parents of some of these unfortunate children to offer all that is necessary to hasten their recovery. Some of our cases have been sent to the Open Air School and good results have been observed, but in others the strain of even a modified school curriculum has proved too much and the child has had to be withdrawn. I would draw attention to the report of the Chief School Medical Officer of the Board of Education for the year 1935, in which he states “there can be no doubt that further provision of the Special institutional type of treatment necessary for the rheumatic child is required especially in the Midlands and the North”.

Dr. Brown suggests that some use might be made of the Sherborne Camp during the winter months to provide accommodation for these cases. The number is not large, but the need is urgent.

Tonsils and Adenoids.—3.5% of the children examined at routine inspections were found to require operation, and 12.2% were kept under observation. The 261 cases requiring operation received treatment at the Memorial Hospital. 118 cases received other forms of treatment.

Non-Pulmonary Tuberculosis.—A detailed inquiry was made during the year so that we might have a complete register of past and present cases. Eighteen cases (glands, spine, bone, skin and other forms) were reported among our elementary school children, and 8 were in attendance at the open-air school.

Follow-up Work.—As a sequence to the medical and dental inspections, special home visits were paid in 1,776 instances.

Medical Examinations of Staff.—Examination and certification of 23 teachers, caretakers and others were completed, either on appointment or return to duty after illness.

Employment of School Children, &c.—81 children were certified fit for employment while of school age, and 7 for institutions, maintenance grants and other reasons.

INFECTIOUS DISEASES AND DEATHS AMONGST SCHOOL CHILDREN.

						Cases.	Deaths.
Scarlet Fever	....	....	....	....	....	488	—
Diphtheria	....	....	....	....	....	97	12
Enteric Fever	....	....	....	....	....	2	—
Measles and German Measles	....	....	....	....	....	32	—
Pneumonia	....	....	....	....	....	2	2
Whooping Cough	....	....	....	....	....	4	—
Tuberculosis	....	....	....	....	....	3	3
Total						628	17

REPORT OF DENTAL OFFICER.

Mr. J. L. Liddell, L.D.S.

Owing to absence for five weeks, due to illness, the figures for 1936 are less than those of previous years, but the average amount of work per month is approximately the same as for 1935.

There is an increase of 4% of those accepting treatment, and a drop of 46 special, or casual cases. There is a great tendency to defer treatment until the onset of pain.

250 children, from different parts of the town, whose parents stated they would consult private practitioners, were followed up, and an effort made to find out if the work had been done. Only 21 of these were found to have had their mouths completely overhauled and put in order, 32 had visited a dentist when toothache occurred, and the offending tooth had been removed, but no other work, if necessary, had been done, and 42 presented themselves at the clinic, with toothache, later in the year. In the case of the remaining 155, nothing had been done, and, of course, their mouths were much worse than at the previous inspection; in many cases permanent teeth, which should have been saved, had to be extracted.

The reasons given for refusing the offer of treatment were:—"I did not think there was anything wrong with his teeth", "I looked into his mouth and could not see any decayed teeth", "I thought they would come out themselves", "He was not having toothache", etc., etc.

The conclusion at which one arrives is that indifference is largely the reason for the state of affairs, and that there is great need for the education of parents in dental care of children.

477 Children in secondary and special schools were inspected, and 127 treated out of 223 found to require treatment.

The totals were:—Inspected 7,020, requiring treatment 4171, treated 2,496.

THE SCHOOL CLINIC.

In the beginning of 1936 when the Greenbank Hospital was taken over as a centre for the work of the Public Health Department, part of one wing was allotted to the School Medical Service and extensive alterations were carried out.

As was to be expected with the removal to new premises the number of attendances at first decreased considerably but parents are now accustoming themselves to the new conditions and during the latter part of the year the attendances were again on the increase.

The number of separate attendances during the year was 12,926, of which 9,848 were for treatment and 3,078 for advice.

EXCEPTIONAL CHILDREN.

Table III. in the Appendix sets out all children in the area suffering from Blindness, Deafness, Mental Deficiency, Epilepsy, Tuberculosis or other incapacitation.

Certification is completed before any child is sent to the Open-air or Special M.D. School, the total number at the former being 141, and at the latter 76. Seven children were notified under the Mental Deficiency (Notification of Children) Regulations, 1928, to the Statutory Committee.

Institutional Education.

Approved Schools.

St. Vincent's R.C., Dartford	....	....	....	2
Red House Farm School, Buxton	....	....	....	1
Axwell Park, Blaydon	....	....	....	2
Blackbrook House, St. Helens	....	....	....	1
Holy Trinity, Liverpool	....	....	....	1
Barnes Home, Manchester	....	....	....	2
Hightown, Liverpool	....	....	....	1
St. Joseph's, Manchester	....	....	....	1
Shawbury School, Shustoke	....	....	....	1

Residential Special Schools.

Royal Victoria School for the Blind	....	....	....	2
Prudhoe Hall Colony (M.D.) School	....	....	....	1
Liverpool R.C. Blind School	....	....	....	1
The Heritage Craft School, Chailey	....	....	....	1
Northern Counties Institute for Deaf and Dumb, Newcastle	....	....	....	1
Stockton School (day) for Deaf	....	....	....	4

CHILDREN WITH ORTHOPÆDIC DEFECTS.

Of 41 children showing marked orthopædic defects, 15 were due to infantile paralysis, 19 to congenital defects and the remaining 7 to injury at or after birth, or as a result of an acute infection. All cases have received and some are still receiving Hospital treatment, while cases of postural defects are examined from time to time and advice given regarding the carrying out of remedial exercises.

We have once again to express our indebtedness to the Crippled Children's Aid Society for their help. This Society concerns itself with the welfare of the crippled child and makes special allowances for extra nourishment and surgical appliances in necessitous cases and very often defrays expenses where further specialist advice is required.

One boy received treatment in a residential school at the cost of the Authority.

Unfortunately, probably owing to the prevalence of various epidemics and severe weather conditions during the latter part of the year, the attendance has not been good. Head Teachers are asked to make an effort to co-operate in this work by drawing attention as early as possible to cases of defective speech and by encouraging regular attendance at the classes.

ULTRA VIOLET RAY TREATMENT.

Those recommended for treatment were classed under five headings :—

The most marked improvement was seen in children treated for malnutrition and rheumatism. The beneficial results manifest themselves in an increase of energy, a decrease in the frequency of the vague abdominal pains and headaches so frequently found in children suffering from rheumatism, and a lessening in the feeling of lassitude and irritability.

There is no doubt that the installation of the Mercury Vapour Lamp at the School Clinic has proved a valuable aid to the treatment of many of our children.

REPORT OF OPHTHALMOLOGIST.

Dr. A. T. Paterson, M.D., F.R.C.S. (Ed.), D.P.H.

The work of the Ophthalmic Department of the School Clinic has progressed smoothly during the year, and the accommodation provided in the new Clinic is satisfactory.

In my last report I mentioned that there was no noticeable increase in the cases of minor eye diseases treated, and the same remark applies to the past year. There is still a fairly high number of cases of Squint and no doubt this number would be reduced if these cases were dealt with before they come under the notice of the School Medical Officer.

I would again stress my opinion that free glasses should be more liberally provided to necessitous children, especially as the contract price of the spectacles is so very low. If the Education Authority provides free books, pens and pencils, it does seem reasonable that they should supply free spectacles to enable the children to obtain the benefit of money spent on their education. These remarks might with equal force be applied to the provision free of charge, of milk and possibly meals to many children who come under my notice.

CO-OPERATION.

There is complete co-ordination between the School Medical and Public Health Departments under the single administration of the Medical Officer of Health. All records are readily at hand for either the Maternity and Child Welfare, the Tuberculosis, Venereal Diseases or Mental Deficiency Services, and the staffs work intimately together in the new centralized scheme at Greenbank.

Co-operation of Parents.—Parents are invited to attend at Routine Inspections in schools and at the School Clinic. Their presence gives the Medical Officer the opportunity of giving personal help and advice and of offering suggestions for the remedy of existing defects and for the prevention of future ill-health.

Teachers.—All the head teachers have taken a very lively interest in the medical state of their scholars, and have assisted the Medical Officers and Nurses in arranging inspections, in bringing forward special cases, in following up defects with the parents, and in organising the milk scheme which has been largely dependent on their sympathetic and energetic support. Notifications are received at the Health Office of all absentees suspected of suffering from infectious diseases.

Darlington Training College for Lady Teachers.—For the past ten years parties of the student teachers have attended the School Clinic and the Special Schools in order to get a more intimate and practical knowledge of the School Medical Services, of common ailments and their treatment. Lectures at the Training College were given by the School Medical Officer on Hygiene and the co-ordination of services.

Co-operation of School Attendance Officers.

School Attendance.

(1) Certificates from private practitioners forwarded to the Clinic	730
(2) Details of transfers, new admissions and leavers supplied to the Clinic	Weekly
(3) Notices received from the Clinic of children fit to attend school	Daily
(4) Medical records of migrants forwarded to or received from other authorities	Weekly

Children and Young Persons Act.

(1) Submitted for examination for purposes of Employment Byelaws	81
(2) Submitted for examination for entry to Approved Schools	7

Voluntary Bodies.—The Memorial Hospital, the Cripples' Society, and the National Society for the Prevention of Cruelty to Children have given valuable help during the year in a number of cases.

Medical Practitioners.—The General Practitioner is a very necessary link in the School Medical Scheme, and cordial relations have always been a feature of our work in Darlington. The parent is referred in the first place to the medical attendant in all serious defects.

The School Medical Officer is also Medical Officer of Health, so that transfer of records from the Maternity and Child Welfare Service to the School Medical Service and then on to the other branches is facilitated. Further, the Dental Surgeon and Assistant School Medical Officers take their part in Nursery Schools, Maternity and Child Welfare and other Clinics.

REPORT ON PHYSICAL TRAINING.

This year has been devoted to consolidating the changes which took place in 1934. The new syllabus in Physical Training issued in 1933 followed by a special course for teachers, has produced a new outlook in the teaching of this subject. The children derive greater benefit and enjoyment from the new courses, and are entering with zest into this part of their education. Increasing attention is being given to right posture and general physical development.

The time devoted to the subject has been increased. All classes receive at least three lessons during the morning sessions and one in the afternoons, in addition to other physical activities, such as games and swimming.

At this time when the Government and the country are urging progress in Physical Training, it is pleasing to note that the Darlington Education Authority have made advances in two directions. Firstly, all the Council Senior Schools are equipped with gymnastic apparatus of the latest type, and the teachers have had special courses to supplement their efficiency. The new Senior School at Eastbourne, which possesses probably the best fitted school gymnasium in the country, is not only the pride of the Authority, but has aroused the envy and enthusiasm of other Education Authorities. The school is also fitted with well-equipped shower baths. Secondly, the Education Authority have made a bold and successful experiment by opening a Youth's Institute at Harrowgate Hill where boys between 14 and 18 years of age have the privilege of receiving physical training of a recreative type. The Institute has enrolled about 80 youths who all eagerly take their part in physical activity.

Organised games continue to be a regular feature of school work in all senior and many junior departments. In addition to the playing fields already available at the Grammar, High, North Road Senior Girls' and Salters Lane Open Air Schools, 6½ acres of playing ground have been added at the new Eastbourne Senior School. Children also use the playing field adjoining the Alderman Leach Council School; Hundens playing fields, and (3) the public parks,

Co-operation is maintained with the Schools' Athletic Association, who arrange school leagues and competitions in football, cricket, netball, athletic sports and swimming.

Swimming instruction was continued at the Public Baths during the summer season, the same teaching staff being employed as formerly, viz., two men and two women part-time instructors, assisted by the teachers who accompany the classes. The part-time instructors were employed for periods of six hours per week each from May to September, except when the schools were closed for holidays.

The scholars attend in groups of about 60 once a week, and certificates are awarded to those who can swim one length. The arrangements enable 720 boys and 720 girls to be dealt with each week.

The average weekly attendance was :—

Boys	453
Girls	483

The total number of attendances made during the season was :—

Boys	7,781
Girls	8,216

During the season 326 boys and 260 girls qualified for certificates of distances varying from 1 length to 114 lengths.

SANITARY CONDITION OF THE SCHOOLS.

Darlington has 21 elementary schools and of these all except six are modern, well ventilated, well lighted buildings. One school, Bondgate, which has been on the list for closure for some time was vacated during the year and the pupils transferred to Beaumont Street School. Structural alterations have been carried out in St. John's School and in place of the old dark class rooms there are light airy rooms with modern heating and lighting arrangements; extra cloak room accommodation and a large assembly hall have been provided.

As this report goes to print, plans are being considered for improvements and additions to the Gurney Pease Infants' School. There are still two requiring attention—The Cockerton Church of England School (old building) and Holy Trinity School.

This year has marked the opening of Eastbourne School for Senior Boys and Girls and it is no exaggeration to say that this school is probably the finest in the country. A two storey building of the open air type, the school is fitted with the most modern type of equipment—a large gymnasium, stage, spray bath, playing fields, library, wood and metal workshops for the boys and domestic service departments for the girls.

HEALTH EDUCATION.

During the year, by an arrangement with the Dental Board of the United Kingdom, a series of talks and demonstrations was given in all the elementary schools. The dangers of dental caries were emphasized and the need for early and conservative treatment pointed out. Leaflets were distributed and lessons were given by the teachers in follow-up work.

The issue of "Better Health" a monthly publication by the Medical Officer of Health was continued free of cost to the Council through local advertisement. 2,000 copies were distributed through the senior schools and clinics. The articles included such subjects as "Fresh Air and Sunshine", "Exercise", "Sleep", "Noise", "Skin Diseases", "Medical Inspection", and similar contributions full of sound instruction and without any morbid associations.

Leaflets and posters have been distributed and exhibited in schools and on Empire Marketing Board frames depicting the advantages of cleanliness, sound teeth, fresh air and protection against diphtheria.

A campaign of immunisation against diphtheria was launched by distributing 15,000 leaflets and exhibiting posters. Over 1,100 parents have accepted the offer of free inoculation but more remains to be done on this propaganda.

SPECIAL SCHOOLS.

OPEN AIR SCHOOL.

The value of this school continued to show itself throughout the year. Those children who, while not so physically defective as to be unable to attend school and who are yet too weakly to derive full benefit from the ordinary Elementary School, are given those advantages of personal attention and a healthy environment so that they may continue to receive education.

The delicate children exposed to bad environmental conditions, the contacts of acute and chronic tuberculous disease, the timid, sometimes under-nourished child with poor muscular tone and a pallid, lethargic appearance but in whom physical signs of disease are not evident, are the types who derive most benefit from this school.

The co-ordination of the School Medical Service with the other departments of the Public Health Service has resulted in a grouping of the medical attention provided, with consequent prevention in overlapping and wastage of time. The treatment of defects found in the routine medical inspections has been put in hand with the least possible amount of delay, with the result that a high degree of efficiency has been attained.

THE BARNARD SCHOOL (Mental Deficiency).

76 children are in attendance at the Barnard School who have been certified under the Education Acts.

This school provides training for the educable mental defective in all types of handwork. Gardening, cobbling and joinery are some of the subjects taught and many of the boys show a particular aptitude for this work. The boys also take their turn with the girls in the kitchen work, helping with the preparation and serving of the mid-day meals for the scholars.

In the arrangement of the school curriculum for both boys and girls it is recognised that the wage earning capacity of the pupils is the most important factor to be kept in view and the aim and object of the school is to provide them with a sound training towards this end.

During the year 9 children were admitted and 4 boys and 7 girls left on attaining 16 years of age. 2 boys under 16 years of age were granted special permission to leave as permanent work had been obtained for them. Seven were reported to the Statutory Committee for supervision afterwards.

THE GEORGE DENT NURSERY SCHOOL.

Weekly visits were paid to the George Dent Nursery School by the Assistant School Medical Officer. At these visits routine examinations were made of each new child admitted and of every child in attendance at the school. 59 children were immunised against diphtheria.

The majority of the children admitted were found to be suffering from some defect, e.g. malnutrition, rickets, enlargement of tonsils and adenoids, squint or a general pre-tubercular condition of chest and glands.

During the fine weather the children live almost entirely out of doors, even meals being taken in the open air. Special cases showing marked rachitic deformity and other allied deficiencies are given Ultra Violet Ray treatment at the School Clinic and children found to be suffering from defective vision and decayed teeth have the opportunity of treatment at the School Clinic.

122 children were subjected to a full routine examination and 40 children were examined as special cases. 2 children were provided with glasses under the Authority's scheme.

All minor ailments were treated at the school.

Out of 100 children on the School roll there was an average attendance of 91%.

NURSERY CLASSES.

Nursery Classes continue to be run successfully at Rise Carr Infants', at Gurney Pease and at St. William's Schools.

All these classes are doing excellent work and fill a much needed want. Mention has been made in another part of the report of the extensions to the premises at Gurney Pease School.

Once again I wish to press the necessity for the establishment of a Nursery School in the Rise Carr area. When one sees the work of such a school as the George Dent Nursery School and realizes that this school, with accommodation for 100 children has a waiting list and is the only one in

Darlington, one realizes that it is only a very small unit in a town with a population of 3,000 children, two to five years of age.

At Rise Carr there are 30 children on the roll and a successful Mothers' Club continues to be run by the Head Mistress and Staff, meetings being held once a fortnight.

Gurney Pease School has 30 on the roll with an average attendance of 93%, and St. Williams has 28 on the roll with an average attendance of 86%.

SECONDARY SCHOOLS UNDER THE LOCAL AUTHORITY.

	<i>On Register</i>	<i>Total Inspections</i>	<i>Parents Present</i>
Grammar School for Boys	607	693	83
High School for Girls	436	698	206
St. Mary's Grammar School (free place holders)	44	43	15
Immaculate Conception School (free place holders)	39	33	22
	<u>1,126</u>	<u>1,467</u>	<u>326</u>

THE GRAMMAR SCHOOL.

The general standard of health and fitness continues to remain high. Defects found on medical examination and pointed out to the parents are as a rule remedied early. It is extremely helpful to the School Doctor to have the parents present at the medical examinations. Not enough advantage of this is taken by the parents and it is hoped that this aspect will be improved.

The chief causes of absenteeism during the year were as in previous years, common colds, acute infectious diseases and tonsillitis in that order. Closer attention to the hygiene of the throat and to diet would result in an appreciable diminution in sickness and consequent loss of school time.

THE HIGH SCHOOL FOR GIRLS.

The usual Routine Medical Inspection was carried out at the High School for Girls and the pupils were examined as entrants, at 12 years of age, and in each subsequent year.

It was found that, while the great majority of defects were those coming under the headings of defective vision and defective teeth, yet signs of early chorea, anæmia and the general nervous and physical disorders which frequently accompany adolescence were too often observed. As many of the pupils come from poor homes and are unlikely to seek medical advice unless for the more acute conditions it is considered important that such frequent examinations should be offered at school.

The general physical condition of the pupils was found to be excellent. Organised games and physical exercises play an important part in the school curriculum and the Headmistress and staff show an exceptionally keen interest in the well being of the pupils.

During the year 488 pupils were subjected to full routine examinations and 210 were examined as special cases or at re-inspections.

APPENDIX—TABLES.

Table I.—Return of Medical Inspections, 1936.**A.—ROUTINE MEDICAL INSPECTIONS.**

Number of Inspections in the prescribed Groups—

Entrants	....	....	....	....	1,081
Second Age Group					962
Third Age Group					987
Total					3,030

Number of other Routine Inspections			261
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Grand Total		3,291
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B.—OTHER INSPECTIONS.

Number of Special Inspections			4,895
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Number of Re-Inspections			4,802
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Total		9,697
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SPECIAL SCHOOLS.**OPEN AIR SCHOOL.**

Number of Routine Inspections			168
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Number of Re-Inspections and Specials			417
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Total		585
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BARNARD SCHOOL. (M.D.)

Number of Routine Inspections			76
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Number of Re-Inspections and Specials			141
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Number of Mental Tests			76
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Total		293
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NURSERY SCHOOL AND CLASSES.

Number of Routine Inspections			381
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Number of Re-Inspections and Specials			36
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Total		417
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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
(1)	(2)	(3)	(4)
PRESCRIBED GROUPS :—			
Entrants	1	245	246
Second Age Group	36	154	188
Third Age Group	49	101	140
Total (Prescribed Groups)	86	500	574
Other Routine Inspections	13	30	40
TOTAL	99	530	614

TABLE II.—A. Return of Defects found by Medical Inspection in the Year ended 31st December, 1936.

DEFECT OR DISEASE		ROUTINE INSPECTIONS								SPECIAL INSPECTIONS							
		No. of Defects								No. of Defects							
		Requiring Treatment				Requiring to be kept under observation but not requiring Treatment				Requiring Treatment				Requiring to be kept under observation but not requiring Treatment			
		(2)				(3)				(4)				(5)			
(1)		Ele.	Spe.	Sec.	Nur.	Ele.	Spe.	Sec.	Nur.	Ele.	Spe.	Sec.	Nur.	Ele.	Spe.	Sec.	Nur.
Skin	1 Ringworm :																
	Scalp ...	—	—	—	—	—	—	—	—	7	—	—	—	—	—	—	—
	2 Body ...	2	—	—	—	—	—	—	—	7	—	—	—	—	—	—	—
	3 Scabies ...	—	—	—	—	—	—	—	—	27	—	—	—	—	—	—	—
	4 Impetigo ...	6	2	—	—	—	—	—	—	339	11	3	6	—	—	—	—
	5 Other Diseases (Non-Tuberculous)	24	4	16	—	1	—	4	1	73	4	6	—	2	—	2	—
	Total (Heads 1 to 5)	32	6	16	—	1	—	4	1	453	15	9	6	2	—	2	—
Eye	6 Blepharitis ...	8	3	5	—	—	—	—	—	28	—	1	—	1	—	1	—
	7 Conjunctivitis	3	—	—	—	—	—	—	—	59	3	—	—	—	—	—	—
	8 Keratitis ...	1	1	—	—	—	—	—	—	2	—	—	—	—	—	—	—
	9 Corneal Opacities	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—
	10 Other Conditions	2	—	—	—	2	—	—	—	69	2	—	—	2	—	1	—
	Total (Heads 6 to 10)	14	4	5	—	2	1	—	—	158	5	1	—	3	—	2	—
	11 Defective Vision (excluding Squint)	99	4	47	—	52	7	17	—	101	—	8	—	54	—	3	—
	12 Squint ...	36	3	3	3	9	1	1	1	13	—	—	—	4	—	—	—
Ear	13 Defective Hearing	4	—	1	—	15	3	3	—	21	1	—	—	13	—	—	—
	14 Otitis Media	3	1	1	—	—	—	1	—	61	1	—	9	—	—	—	—
	15 Other Ear Diseases	13	1	2	4	4	—	3	—	122	6	2	—	10	—	1	—
Nose and Throat	16 Chronic Tonsillitis only ...	57	—	6	—	305	—	40	18	188	2	1	3	446	—	14	1
	17 Adenoids only	13	—	—	—	22	—	3	—	13	—	—	—	24	—	2	—
	18 Chronic Tonsillitis & Adenoids ...	39	—	1	1	62	—	4	4	52	—	1	1	62	—	—	—
	19 Other Conditions	8	—	1	—	13	—	8	—	16	—	—	—	8	—	2	—
	20 Enlarged Cervical Glands (Non-Tuberculous)	21	2	2	1	5	4	1	34	35	1	—	—	15	—	—	—
	21 Defective Speech	11	9	2	—	14	3	1	3	23	—	—	—	18	—	—	—
Heart and Circulation	Heart Disease :																
	22 Organic ...	2	4	—	—	5	—	1	—	6	—	—	—	10	—	—	—
	23 Functional ...	1	—	3	—	10	2	8	—	6	—	—	—	8	—	3	—
	24 Anæmia ...	44	—	33	—	20	3	14	1	50	—	7	—	39	—	1	—
Lungs	25 Bronchitis...	168	5	5	12	73	17	4	25	132	—	1	11	84	—	2	3
	26 Other Non-Tuberculous Diseases	8	—	—	1	25	—	5	17	25	—	—	—	40	—	1	—

Ele.—Elementary. Spe.—Special. Sec.—Secondary. Nur.—Nursery.

TABLE II.—A. *continued.*

DEFECT OR DISEASE	ROUTINE INSPECTIONS								SPECIAL INSPECTIONS							
	No. of Defects								No. of Defects							
	Requiring Treatment				Requiring to be kept under observation but not requiring Treatment				Requiring Treatment				Requiring to be kept under observation but not requiring Treatment			
	Ele.	Spe.	Sec.	Nur.	Ele.	Spe.	Sec.	Nur.	Ele.	Spe.	Sec.	Nur.	Ele.	Spe.	Sec.	Nur.
Tuberculosis	Pulmonary :															
	27	Definite	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	28	Suspected	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Non-Pulmonary :															
	29	Glands...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	30	Bones, Joints	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nervous System	31	Skin	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	32	Other Forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	TOTAL	(heads 29—32)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	33	Epilepsy	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	34	Chorea...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	35	Other Conditions	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Deformities	36	Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	37	Spinal Curvature	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	38	Other Forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	39	Other Defects & Diseases (excluding defects of nutrition, uncleanliness and dental diseases)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL																

Ele.—Elementary. Spe.—Special. Sec.—Secondary. Nur.—Nursery.

TABLE II.—B. Classification of Nutrition of Children in Routine Age Groups.

ELEMENTARY SCHOOLS.

Age Groups				Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly Subnormal)		D (Bad)	
					No.	%	No.	%	No.	%	No.	%
Entrants	...	...	...	1,081	400	37.00	483	44.68	188	17.39	10	0.93
Second Age Group	...	...	...	962	199	20.69	555	57.69	202	21.00	6	0.62
Third Age Group	...	...	...	987	183	18.54	644	65.25	158	16.01	2	0.2
Other Routine Inspections	...	...	...	261	47	18.01	177	67.82	36	13.79	1	0.38
Total	...	...	...	3,291	829	25.19	1859	56.49	584	17.74	19	0.58

HIGH SCHOOL—Girls.

Total	...	...	...	488	64	13.1	358	73.4	65	13.3	1	0.2
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GRAMMAR SCHOOL—Boys.

Total	...	...	...	583	59	10.1	478	82.0	45	7.7	1	0.2
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TABLE III.—Return of all Exceptional Children in the Area.—1936,
BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	—	—	—	1

PARTIALLY SIGHTED CHILDREN.

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

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	—	—	—	2

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	—	—	—	—	3

MENTALLY DEFECTIVE CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
70	—	—	—	70

MENTALLY DEFECTIVE CHILDREN.

Notified to the Local Control Authority during the Year.

Feeble-minded.	Unable to Benefit from Attendance in a Special School	Imbeciles.	Idiots.	Total.
5	—	2	—	7

"Special Circumstances" Case approved by Board
Mental Deficiency with Blindness or Deafness... ..

TABLE III.—continued.**EPILEPTIC CHILDREN.**

Children suffering from severe Epilepsy.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	—	—	1	2

PHYSICALLY DEFECTIVE CHILDREN.**A. Tuberculous Children.**

I. Children suffering from Pulmonary Tuberculosis.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	1	—	1	5

II. Children suffering from Non-Pulmonary Tuberculosis.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
8	4	1	4	17

B. Delicate Children.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
113	20	—	4	137

PHYSICALLY DEFECTIVE CHILDREN.**C. Crippled Children.**

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
5	17	—	3	25

TABLE III.—continued.**D. Children with Heart Disease.**

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
9	8	—	3	20

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Mentally defective epileptics at Certified Special Schools	...	3
" " cripples at Certified Special Schools	...	4
" " and crippled at no School or Institution	...	1
	Total	8

TABLE IV.—Returns of Defects Treated during the Year ended 31st Dec., 1936.**TREATMENT TABLE.****GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Table VI.)**

DISEASE OR DEFECT (1)	Number of Defects treated or under treatment during the year		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
SKIN—			
Ringworm—Scalp	7	—	7
Ringworm—Body	9	—	9
Scabies	26	1	27
Impetigo	342	3	345
Other Skin Disease	96	1	97
MINOR EYE DEFECTS			
(External and other, but excluding cases falling in Group II.)	159	13	172
MINOR EAR DEFECTS			
	190	9	199
MISCELLANEOUS			
(e.g., minor injuries, bruises, sores, chilblains, etc.)	735	31	766
Total	1,564	58	1,622

TABLE IV.—continued.

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.)

DISEASE OR DEFECT	No. of Defects dealt with.		
	Under the Authority's Scheme	Otherwise	Total
(1)	(2)	(3)	(4)
Errors of Refraction (including Squint)	592	14	606
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	26	—	26
Total	618	14	632

Total number of children for whom spectacles were prescribed— Total

(a) Under the Authority's Scheme, 425. (b) Otherwise, 14. 439

Total number of children who obtained or received spectacles—

(a) Under the Authority's Scheme, 395. (b) Otherwise, 14. 409

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS

Received Operative Treatment.												Received other forms of Treatment	Total number Treated
Under the Authority's Scheme, in Clinic or Hospital				By Private Practitioner or Hospital, apart from the Authority's Scheme				Total					
(1)				(2)				(3)				(4)	(5)
(i.)	(ii.)	(iii.)	(iv.)	(i.)	(ii.)	(iii.)	(iv.)	(i.)	(ii.)	(iii.)	(iv.)	118	381
144	24	92	1	2	—	—	—	146	24	92	1		

(i.) Tonsils only. (ii.) Adenoids only. (iii.) Tonsils and Adenoids. (iv.) Other defects of Nose and Throat.

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

No. of Children treated.	Under the Authority's Scheme. (1)			Otherwise. (2)			Total number treated.
	Residential treatment with education (i)	Residential treatment without education (ii)	Non-Residential treatment at an Orthopaedic Clinic (iii)	Residential treatment with education (i)	Residential treatment without education (ii)	Non-Residential treatment at an Orthopaedic Clinic (iii)	
	1	—	—	1	—	14	

TABLE V.—DENTAL INSPECTION AND TREATMENT.

- (1) Number of children who were—
 (a) Inspected by the Dentist :
 Aged :

Routine Age Groups	5	196
	6	490
	7	855
	8	899
	9	795
	10	44
	11	817
	12	913
	13	1009
14	81	

 Total 6099
 Specials 444
 Grand Total 6543
- (2) Found to require treatment 4171
 (3) Actually treated 2496
 (4) Attendances made by children for treatment, 3,332.
- (5) Half-days devoted to :—
 Inspection, 54 ; Treatment, 339.
 Total, 393.
- (6) Fillings :—
 Permanent Teeth, 877 ; Temporary Teeth, —.
 Total, 877.
- (7) Extractions :—
 Permanent Teeth, 868 ; Temporary Teeth, 2757.
 Total, 3625.
- (8) Administrations of general anæsthetics for extractions,—.
- (9) Other operations :—
 Permanent Teeth, 311 ; Temporary Teeth, 309.
 Total, 620.

SCHOOL	No. of Children examined			No. requiring treatment			No. of children treated	Percentage
	Boys	Girls	Total	Boys	Girls	Total		
Albert Road	292	—	292	158	—	158	92	58.2
Alderman Leach	127	125	252	81	75	156	87	55.7
Arthur Pease	62	73	135	12	49	61	14	22.9
Beaumont Street	233	340	573	138	204	342	182	53.2
Bondgate	101	71	172	68	48	116	66	56.8
Borough Road	124	110	234	82	49	131	52	39.6
Cockerton	90	94	184	56	55	111	75	67.5
Corporation Road	274	230	504	162	157	319	173	54.2
Dodmire	218	207	425	123	118	241	130	53.9
Gladstone Street	419	—	419	193	—	193	114	59.0
Gurney Pease	62	59	121	46	34	80	45	56.2
Harrowgate Hill	218	157	375	138	102	240	145	60.4
Haughton...	54	57	111	17	20	37	24	64.8
Holy Family	35	54	89	21	35	56	42	75.0
Holy Trinity	63	86	149	30	46	76	32	42.1
North Road	101	508	609	67	296	363	204	56.1
Reid Street	66	390	456	42	215	257	146	56.8
Rise Carr	67	88	155	40	54	94	61	64.8
St. Augustine's	244	260	504	143	146	289	140	48.4
St. John's	131	118	249	61	59	120	68	56.6
St. William's	43	48	91	32	32	64	33	51.5
Grammar	68	—	68	39	—	39	25	64.1
High	—	148	148	—	96	96	47	48.9
Salter's Lane	67	43	110	27	19	46	30	65.2
Barnard	34	24	58	11	6	17	11	64.7
Nursery	48	45	93	10	15	25	14	56.0
Total	3241	3335	6576	1797	1930	3727	2052	55.0

TABLE VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

- (i.) Average number of visits per school made during the year by the School Nurses, 13.
 - (ii.) Total number of examinations of children in the Schools by School Nurses, 12,173.
 - (iii.) Number of individual children found unclean, 513.
 - (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 taken :
 - (a) Under the Education Act, 1921, 1.
 - (b) Under School Attendance Bye-Laws, —.
-