[Report 1932] / Medical Officer of Health and School Medical Officer of Health, Derbyshire County Council.

Contributors

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1932

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Derbyshire County Council.

ANNUAL REPORTS

OF THE

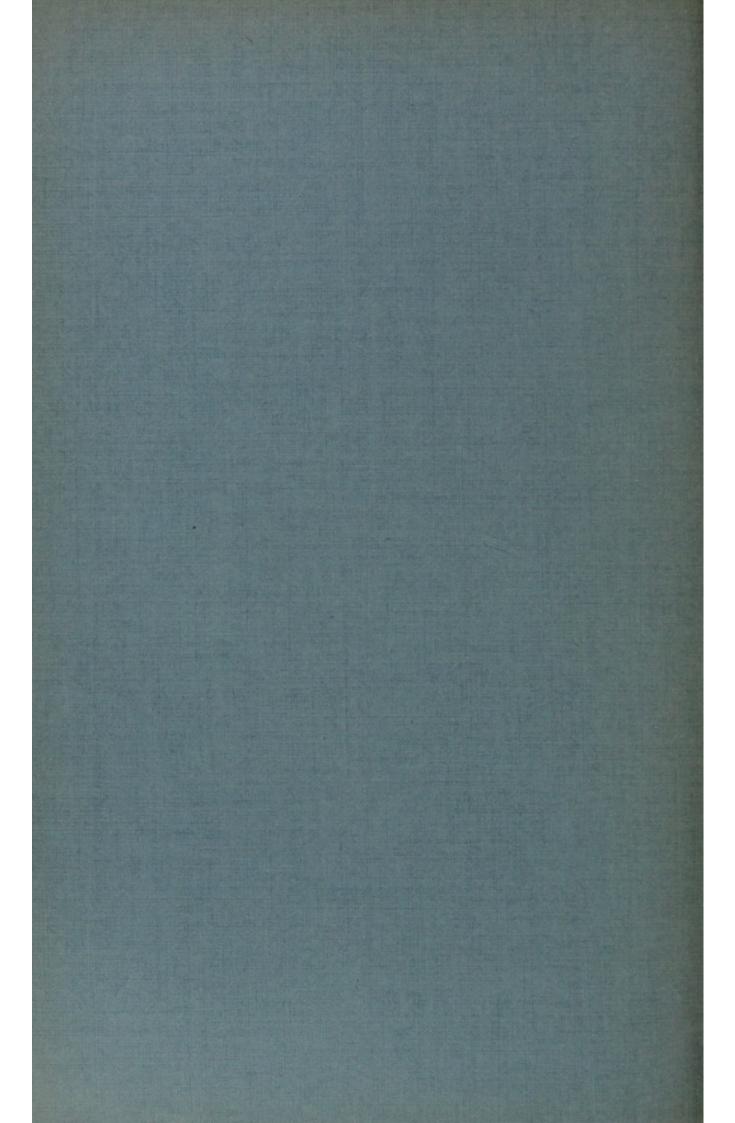
COUNTY MEDICAL OFFICER OF HEALTH AND SCHOOL MEDICAL OFFICER,

For the Year 1932,

BY

W. M. ASH, m.b., b.s. (lond.), f.r.c.s. (ed.), d.p.h. (vict.), county medical officer of health and school medical officer.

> DERBY : J. W. SIMPSON AND SONS, FRINTERS, FRIAR GATE.





Derbyshire County Council.

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

For the Year 1932,

BY

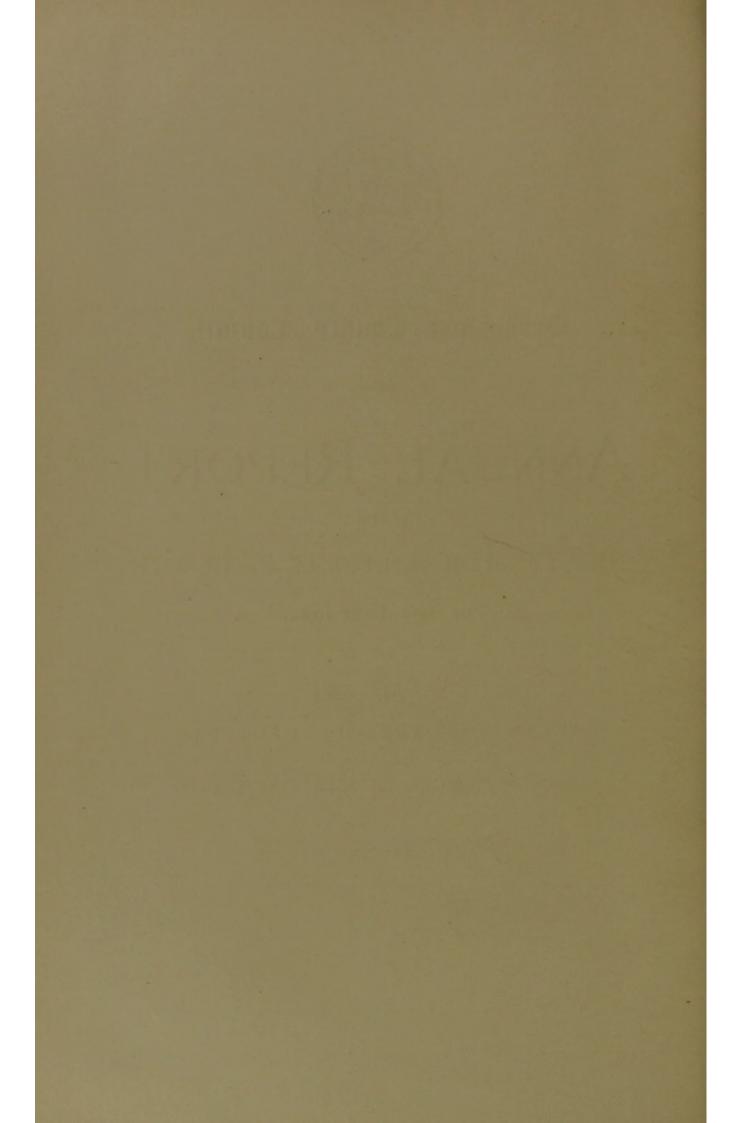
W. M. ASH,

M.B., B.S. (LOND.), F.R.C.S. (ED.), D.P.H. (VICT.),

COUNTY MEDICAL OFFICER OF HEALTH.

DERBY:

J. W. SIMPSON AND SONS, PRINTERS, FRIAR GATE.



To the Chairman and Members of the Derbyshire County Council.

MY LORD, LADIES AND GENTLEMEN,

I have the honour to present to you the Forty-third Annual Report on the health of the County of Derby.

The Report this year is the second of a series of four Interim Reports of a five-yearly period. The Report for 1930 was a "Survey" Report and was of a comprehensive nature, set out in the form of a book of reference to the County Health Services, and it will be noted that in this Report I have, generally speaking, only added alterations or extensions to the Services which have taken place during the year under review.

I would like to acknowledge the help and consideration I have received from the Chairmen and Members of my Committees, both collectively and individually, during the past year.

I am,

Your obedient Servant,

W. M. ASH, County Medical Officer of Health.

New County Offices, St. Mary's Gate, Derby. June, 1933.

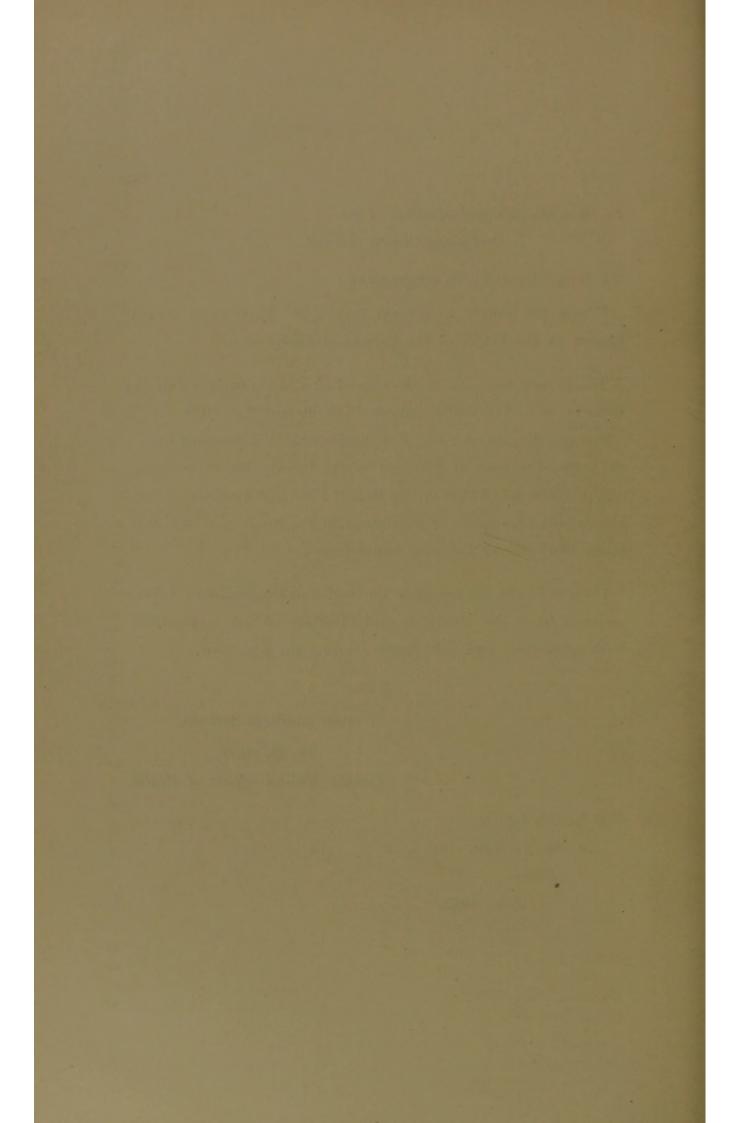


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PUBLIC HEALTH STAFF.

COUNTY MEDICAL OFFICER OF HEALTH: W. M. Ash, M.B., B.S., F.R.C.S., D.P.H.

DEPUTY COUNTY MEDICAL OFFICER R. N. Curnow, M.B., B.S., M.R.C.S., D.P.H.

TUBERCULOSIS OFFICERS:

B. S. Nicholson, M.D., D.P.H.

P. Heffernan, B.A., M.D., B.Ch., B.A.O. C. Kingston, M.R.C.S., L.R.C.P., D.P.H.

BACTERIOLOGIST:

Sheila M. Ross, M.D., B.Ch., D.P.H.

VENEREAL DISEASES OFFICER:

H. R. M. Richards, M.B., B.Ch. (part-time).

MEDICAL SUPERINTENDENT AT WALTON SANATORIUM:

A. N. Robertson, M.R.C.P., M.D., D.P.H.

ASSISTANT RESIDENT MEDICAL OFFICER AT WALTON SANATORIUM :

Vida Stark, M.B., Ch.B.

CONSULTING SURGEON, WALTON SANATORIUM: F. J. Milward, M.A., F.R.C.S.

CONSULTING SURGEON, BRETBY ORTHOPÆDIC HOSPITAL: Naughton Dunn, M.B., Ch.B.

MEDICAL SUPERINTENDENT, BRETBY ORTHOPÆDIC HOSPITAL: G. A. Q. Lennane, M.A., M.B., B.Ch.

ASSISTANT RESIDENT MEDICAL OFFICER, BRETBY ORTHOPÆDIC HOSPITAL:

Elizabeth Grierson, M.B., Ch.B.

HON. CONSULTING RADIOLOGIST AND ELECTROLOGIST:

A. R. Laurie, M.B., Ch.B., D.M.R.E.

MATERNITY AND CHILD WELFARE OFFICER:

Nellie Wilkes, M.B., Ch.B., M.C.O.G., E. Joyce Newton, M.D., M.M. (commenced 22/11/32),

CONSULTING OBSTETRICIANS :

N. L. Edwards, F.R.C.S., Derby.
H. T. Hicks, F.R.C.S., Derby.
W. W. King, F.R.C.S., Sheffield.
F. H. Lacey, M.D., Manchester.
C. D. Lochrane, F.R.C.S., Derby.
M. H. Phillips, F.R.C.S., Sheffield.
C. E. Potter, M.D., Derby. ASSISTANT SCHOOL MEDICAL AND M. AND C. W. OFFICERS:

H. S. Bryan, M.R.C.S., L.R.C.P.,
F. J. Burke, M.D., Ch.B.,
Wilhelmina W. Hendry, M.B., B.Ch., D.P.H.,
A. Macmillan, M.B., B.Ch., D.P.H. (resigned 31/1/33),
Ethel W. Morris, M.R.C.S., L.R.C.P., D.P.H.,
W. J. Pierce, M.B., Ch.B.,
H N. Popham, M.B., Ch.B., B.S.,
J. V. Walker, M.B., Ch.B., M.R.C.S., L.R.C.P., M.R.C.P. (commenced 20/2/22)

20/2/33),

OPHTHALMIC SURGEON (School Medical & M.C.W.):

T. E. A. Carr, M.B., B.S.

Public Health Staff—continued.

EAR, NOSE & THROAT SURGEON (School Medical & M.C.W.):

Margaret S. Purce, M.B., B.Ch., F.R.C.S.

COUNTY ANALYST:

John White, F.I.C.

SENIOR DENTAL OFFICER (School Medical & M.C.W.): H. P. Sutcliffe, L.D.S.

DENTAL OFFICERS:

M. Lewis, L.D.S., C. L. Noble, L.D.S., Elizabeth E. Grant, L.D.S., Doris M. Thomson, L.D.S., Christine B. Calder, L.D.S. (resigned 28/2/33), Cicely Jefferson, L.D.S., Flora M. Grant, L.D.S., Josephine Dolan., Mary Llewellyn, L.D.S. (commenced 1/3/33), Also giv Dontal Attendants and three Dontal Ch

Also six Dental Attendants and three Dental Clerks.

ORGANISER OF INFANT WELFARE:

Miss E. Gray.

REGIONAL INSPECTORS OF MIDWIVES.

Miss Sleigh, Miss Shand (commenced 1/8/32), Miss Culleton (resigned 12/7/32), Miss Wilson, Miss Woodford.

ORTHOPÆDIC NURSES:

Miss E. Garratt, C.S.M. & M.G. Miss E. Taylor.

COUNTY SANITARY INSPECTORS:

H. Dickinson, Cert.R.S.I., Cert. Meat Inspector.

H. Mallinson, Cert. R.S.I., Cert. Meat Inspector.

FOOD & DRUGS SAMPLING OFFICER: W. Etchells.

ASSISTANT BACTERIOLOGIST:

C. F. Peckham.

LABORATORY ASSISTANTS:

A. Morley, Cert. B.L.A., A. Yeomans, C. Robertson, C. H. Humphreys (*Temporary*).

RADIOGRAPHER:

H. A. Wainscott, M.S.R.

CHIEF CLERK

T. O. Morrell.

CLERKS:

H. R. Pedley, H. Richardson, F. Beeston, Cert. S.I.B., H. Littlewood, H. Haddock, E. L. Eyre, E. J. Arnot, L. A. Buttling, Miss Alexander (resigned 31/3/33), Miss Waller, Miss Booth, Miss Allsop (died 11/2/32), Miss Facer (commenced 16/2/32), Miss Greensmith (commenced 18/7/32).

There are six part-time Officers in charge of Infant Welfare Centres. Details of these will be found in Table XXII.

There are 81 Public Vaccinators (including nine at Institutions) and 75 Poor Law District Medical Officers. All are engaged in private practice. There are also 19 Vaccination Officers.

There are eight subsidised midwives.

		H	EALTH						Date commenced
Name.			Qualifie	ation I	Referen	ce No.	•		duty.
Gomm, G. E.	3,	4,	5, 6,	7					1/9/08
Harvey, A	2,	3,	5	*					1/9/13
Spetch, R	2,	3							27/4/13
Fisher, D	3,	4,	5, 6						1/5/14
Rodgers, M	3,	5,	6, 7						1/2/15
McNulty, A	7		spensary					•••	16/6/15
Wilson, M	3,	4,	and the second se	Region	ial Insp	o, of Mi	idwives)		12/7/15
Liddle, A. L	3,	4,	5						27/9/15
Fisher, C. H	3,	4,	5, 6	e					21/12/15
Siddons, B	1,	3,	4, 5,	6					10/8/16
Orpin, C. A	2,	3,	4, 6						5/2/17
Hughes, D. C.	3,	4,	5						27/2/17
Rose, J	3,	3							3/3/17
Blood, W. S.	2,	3							1/9/17
Stevens, A. L. Webb F		4							21/9/17
Webb, E		3,	5, 6						21/9/17
Field, C	0	3							$\frac{1/10/17}{1/10/17}$
Major, C. B	2,	3,	4, 6						29/6/18
Stevens, L Martin, E	0	5,	7						10/9/18
Smith, M. L.		3.							1/1/19
Clarkson, A. L.	1.	3.	4, 5,	6, 7					18/3/19
Spencer, E. A.	2,	3,	5, 6						17/3/19
Woodford, D.	2.	3,	and the second s	ional L	nsp. of	Midwin	ves)		8/12/19
Booth, E	3.	4.	5						16/8/20
Sleigh, F	2,	3,			-		idwives)		6/9/20
Beardmore, B.	2.	3							25/10/20
Quinn, E	2.	3.	5						20/10/20
Priestley, M	2,	3							17/2/21
Nuttall, J	3.	4							1/3/21
Agutter, M	1,	3,	4						22/8/21
Brewster, C	2		nic Nurse						1/9/21
Sterling, E. M.	3,	5							1/9/21
Millington, H.	2,	3,	5						29/5/22
Latham, B. A.	2,	3,	5 (Clin	ie Nur	se)				9/10/22
Hinchliffe, M. I.	2,	3							21/3/23
Wood, Irene M.	2,	3,	7						19/2/24
Watson, E	2,	3							27/3/24
Sheldon, F	1								5/1/25
Dennis, S	2,	3							23/3/25
Webster, E	2,	3							3/9/28
Fitzmaurice, M. M.	2,	3							4/2/29
Hitchcock, M.	2,	3							8/5/29
Avery, Florence	1,	2,	3						27/1/30
Easton, Alice A.	2,	3							17/2/30
Reid, Gladys M.	1,	2,	3				***		3/3/30
Macfarlane, A. T.	2,	3		•••		•••			10/12/30
McGaw, J	2,	3,	5						10/12/30
Simmons, B. M.	1,	2,	3						16/3/31
Parkin, D. A.	1,	2,	3, 7						11/5/31
Allford, A. M. D.	1,	2,	3, 7						16/11/31
Whimster, Eliz. W		2,	3			•••			17/10/32
Jackson, Millicent		2,	3						17/10/32
Hewett, Alice M.	1,	2,	3	***			***		-24/10/32

With the exceptions indicated, all the Health Visitors act as Visitors under the M. & C. W. and Tuberculosis schemes, as Mental Deficiency Act Visitors and as School Nurses in the area of the County allocated to them. In addition, certain Health Visitors take duty at Tonsil and Adenoid, Ear, and Dental Clinics, and also Tuberculosis Dispensaries.
*1. H. V. Cert. (Approved Ministry of Health).
2. Trained Nurse.
3. Certificate of the Central Midwives Board.
4. Sanitary Inspector.
5. H. V. Cert. of Royal Sanitary Institute.
6. Maternity and Child Welfare Work Certificate, Royal Sanitary Institute, 7. Fever Nursing or other special training.

7. Fever Nursing or other special training.

Birth Rate and Death Rate from the Seven Principal Zymotic Diseases and all Causes TABLE I. ¢ When I a nd Infantila Montality in th

Small Pox. Scarlatina Membranous Croup. Typhoidal Fevers. Measles. .028 .16 .17 .16 .43 .028 .16 .17 .16 .43 .012 .15 .27 .18 .39 .012 .10 .16 .03 .39 .016 .10 .16 .08 .26 .004 .10 .17 .10 .39 .016 .10 .17 .10 .39 .004 .10 .17 .10 .30 .000 .04 .14 .03 .27 .000 .02 .03 .27 .30						DEATH RA	DEATH RATES PER 1,000 OF		POPULATION.			Death		Infautile
WHOLE COUNTY .028 .16 .17 .16 England and Wales .012 .15 .27 .18 WHOLE COUNTY .012 .15 .27 .18 WHOLE COUNTY .004 .10 .16 .08 WHOLE COUNTY .006 .10 .17 .10 WHOLE COUNTY .016 .10	÷		02	mall Pox.	Scarlatina	Diphtheria & Membranous Croup.	Typhoidal Fevers.	and the second se	Whooping Cough.	Diarrhea	Seven Principal Zymotics	Rate from all Causes.	Birth Rate.	Mortality per 1,000 Births.
England and Wales 012 $.15$ $.27$ $.18$ WHOLE COUNTY 004 $.10$ $.16$ $.08$ 10 WHOLE COUNTY $.016$ $.10$ $.17$ $.06$ 10 WHOLE COUNTY $.016$ $.10$ $.17$ $.10$ 10 WHOLE COUNTY $.000$ $.04$ $.16$ $.08$ 10 WHOLE COUNTY $.000$ $.04$ $.16$ $.03$ 10 WHOLE COUNTY $.000$ $.04$ $.01$ $.03$ 14 $.03$ WHOLE COUNTY $.000$ $.02$ $.07$ $.01$ $.03$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.01$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.01$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.01$ WHOLE COUNTY $.00$ $.02$ $.01$ $.01$	-	WHOLE COUNTY	:	.028	.16	11.	.16	.43	.30	.58	1.87	17.1	33.7	147
WHOLE COUNTY .004 .10 .16 .08 . England and Wales $.016$ $.10$ $.17$ $.10$ $.17$ $.08$ WHOLE COUNTY $.016$ $.04$ $.10$ $.17$ $.10$ WHOLE COUNTY $.000$ $.04$ $.16$ $.03$ WHOLE COUNTY $.000$ $.04$ $.14$ $.03$ WHOLE COUNTY $.000$ $.04$ $.14$ $.03$ WHOLE COUNTY $.000$ $.04$ $.14$ $.03$ WHOLE COUNTY $.000$ $.02$ $.07$ $.01$ WHOLE COUNTY $.00$ $.02$ $.06$ $.01$ WHOLE COUNTY $.00$ $.02$ $.06$ $.01$	0	England and Wales		.012	.15	.27	.18	.39	.36	12.	2.14	18.3	29.9	153
England and Wales 016 .10 .17 .10 WHOLE COUNTY $ 04$ 16 03 $-$ WHOLE COUNTY $ 04$ 16 03 $-$ England and Wales $.000$ $.04$ $.14$ $.03$ $-$ WHOLE COUNTY $.000$ $.02$ $.07$ $.03$ $-$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.03$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.03$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.01$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.01$ WHOLE COUNTY $.00$ $.02$ $.07$ $.01$ $.01$ WHOLE COUNTY $.00$ $.02$ $.06$ $.01$ $.01$ WHOLE COUNTY $.00$ $.02$ $.06$ $.01$ $.01$	-	WHOLE COUNTY	:	.004	.10	.16	80.	.26	.24	*.58	1.58	14.1	28.5	126
WHOLE COUNTY $-$.04 .16 .03 England and Wales .000 .04 .14 .03 WHOLE COUNTY .000 .04 .14 .03 WHOLE COUNTY .000 .02 .07 .03 WHOLE COUNTY .00 .02 .07 .01 WHOLE COUNTY .00 .02 .07 .01 WHOLE COUNTY .00 .02 .08 .01 WHOLE COUNTY .00 .02 .08 .01 WHOLE COUNTY .00 .02 .08 .01 WHOLE COUNTY .00 .02 .06 .01 WHOLE COUNTY	0	England and Wales	:	.016	01.	71.	01.	.30	.27	77.	1.50	15.3	27.1	128
England and Wales $.000$ $.04$ $.14$ $.03$ WHOLE COUNTY .00 .02 .07 .01 WHOLE COUNTY .00 .02 .07 .01 England and Wales .00 .02 .07 .01 WHOLE COUNTY .00 .02 .08 .01 WHOLE COUNTY .00 .02 .06 .01 WHOLE COUNTY .00 .02 .06 .01 Wholes .00 .02 .06 .01 Wholestricts	-	WHOLE COUNTY	:	1	.04	.16	-03	-24	.16	.40	1.03	12.66	24.07	66
WHOLE COUNTY .00 .02 .07 .01 England and Wales .00 .02 .07 .01 WHOLE COUNTY .00 .02 .08 .01 WHOLE COUNTY .00 .01 .08 .01 WHOLE COUNTY .00 .01 .04 .01 WHOLE COUNTY .00 .01 .04 .01 WHOLE COUNTY .00 .01 .04 .01 WHOLE COUNTY .00 .02 .04 .01 WhoLE COUNTY .00 .02 .06 .01 WhoLE COUNTY .00 .02 .06 .01 WhoLE COUNTY .00 .07 .01 WhoLE COUNTY .01 .06 .01 WhoLE COUNTY .02 .06 .01 WhoLE COUNTY .03 .06 .01 WhoLE COUNTY	0	England and Wales	•••	000	.04	.14	.03	.27	.18	.51	1.17	13.85	21.90	100
England and Wales .00 .02 .08 .01 WHOLE COUNTY .00 .01 .04 .01 WHOLE COUNTY .00 .01 .04 .01 England and Wales .00 .02 .06 .01 Urban Districts .03 .04 .01 Urban Districts .03 .04 .01	-	WHOLE COUNTY	:	00.	.02	70.	.01	.07	.10	†.12	.39	10.92	19.73	7.07
WHOLE COUNTY .00 .01 .04 .01 England and Wales .00 .02 .06 .01 Urban Districts Urban Districts	0	England and Wales		00.	.02	.08	10:	II.	II.	†.15	.48	12.14	18.36	2.1.2
England and Wales .00 .02 .06 .01 Urban Districts - - .04 .01 Rural Districts - - .03 .04 .01	-	WHOLE COUNTY	:	00.	10.	.04	.01	.04	90.	.08	.24	11.08	16.72	67.4
Urban Districts04 .01 Rural Districts03 .07 .00		England and Wales		00	.02	90.	10.	.03	20.	.09	.28	12.3	15.8	66.0
	0	Urban Districts Rural Districts	::	11	-03	-04 -07	÷9	-13	-05 -08	20 . 90:	-24 -38	11-26 11-22	16-09 16-63	60.9
WHOLE COUNTY -01 .06 -00 ·11 England and Wales .00 .01 .07 .00 ·11	-	WHOLE COUNTY England and Wales	::	I Ş	10. 10	20.	<u>8</u> 8	FF	90.	-07 10	.31	11-24 12-0	16-35	65-0

Report on the Health of Derbyshire for the Year 1932.

STATISTICS AND SOCIAL CONDITIONS.

AREA.

The Administrative County of Derby comprises 40 Sanitary Districts, four of which are Municipal Boroughs, 21 Urban Districts and 15 Rural Districts. According to the Census Return for 1931 the County has a total area of 640,701 acres, 92,588 in the Boroughs and Urban Districts and 548,113 in the Rural Districts.

POPULATION.

The population of the Administrative County at the time of the 1931 Census was 614,926, 316,440 in Borough and Urban Districts and 298,486 in Rural Districts. The Registrar-General's estimate of the population to the middle of 1932, on which the various calculations in this Report are based, is 619,200, *i.e.* 317,200 in Boroughs and Urban Districts and 302,000 in Rural Districts.

The Census and estimated populations of each District are given in Tables II. and IIa.

INHABITED HOUSES.

The estimated number of houses in the County at the end of 1932 was 155,419 of which 78,775 are in the Boroughs and Urban Districts and 76,644 in the Rural Districts.

During 1932, 3,068 new houses were erected.

RATEABLE VALUE.

The Rateable Value of the Administrative County of Derby in April, 1932, for County Rate purposes was $\pounds 2,698,853$, and a Penny Rate over the whole County represents the sum of $\pounds 10,426$.

PHYSICAL FEATURES AND CHIEF OCCUPATIONS.

The main industries which give the people of this county occupation, are coal mining carried on in the East and North-East and in a small area in the South-Western portion of the county, and agriculture, particularly in the Western and Central parts of the county. The staple industries in the extreme North-Western area of the county adjoining Lancashire are those connected with the cotton trade, whilst in the South-Eastern area adjoining Nottinghamshire the lace trade provides the chief occupation. In this area, too, artificial silk manufactories absorb an appreciable portion of the population. In the Northern and North-Central areas the chief industries are quarrying, limestone crushing and lime burning, working and dressing millstone grit, and silica brick making. A number of these industries come under the heading of "Refractories Industries," some of which are known to be pre-disposed to pulmonary disease. As was pointed out in a Special Report on Silicosis appended to my Annual Report for 1926, the death rate from phthisis amongst workers in the refractories industries has been considerably reduced in this County.

In the extreme South-Western portion of the county, pottery manufacture is one of the prominent industries.

VITAL STATISTICS.

The Vital Statistics relating to each District in the County for the year under review are given in Tables II. and II(a). and the following are extracts from them, given in a form required by the Ministry of Health :—

Live (Legitimate			<i>Total.</i> 9,774	Males. 5,037	Females. 4,737
				171	182
Birth Rate per 1,000 of					16.35
Still Births					484
Rate per 1,000 (still and	l live) l	oirths			45.6
Deaths					6,961
Death rate per 1,000 of	the est	imated	populatio	on	11.24

Deaths from Puerperal Causes :---

Puerperal Sepsis	 No. of Deaths. 14	Rate per 1,000 (Still and live) Births. 1.32
Other Puerperal Causes	 28	2.64
Total	 42	3.96

Death Rate of Infants under 1 year of age :---

All infants	(per 1,000	live births)		 63.39
Legitimate	infants (per	r 1,000 legi	timate b	irths)	 60.57
Illegitimate					141.64

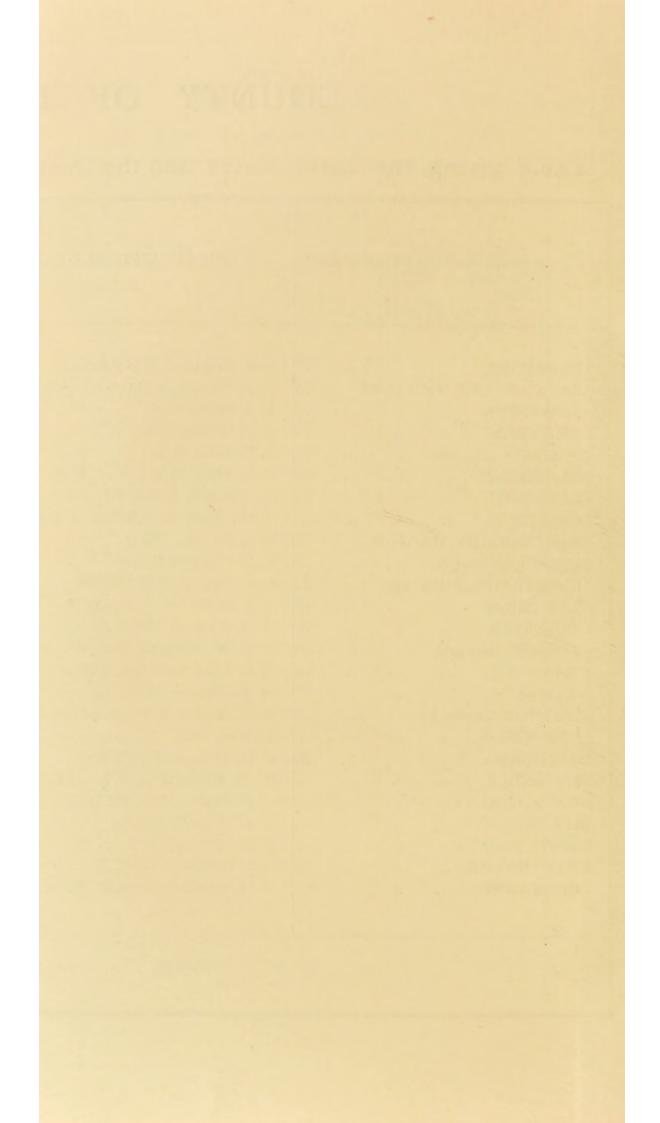
Deaths from :—	No. of deaths.	Rate per 1,000 of estimated
Measles	 65	population. ·10
Whooping Cough	 40	.06
Diarrhœa (under 2 years)	 42	.07

COUNTY OF DERBY. Year ending December 31st, 1932.

Table II.

Table giving the Birth Rates and the Death Rates from several causes, in each of the URBAN Sanitary Districts of the County.

		Acres Water).			POPUL	ATION					A	nnual Rates	s per 1,00	0 of Estimated	Populatio	D .	-1
URBAN SANITARY DISTRICT.	MEDICAL OFFICER OF HEALTH.	AREA in ac Land and Wa	Census. 1911	Census. 1921	Census. 1931	Censal In or Dec 1931- (Perce Increase	rease. -1931. ntage)	Estimated Population 1932.	BIRTHS.	DEATHS.	Birth Rate.	Death Rate.	Zymotic Death Rate.	Death Rate from continued Fever and Discasses (under 2 years)	Phthisis Death Rate.	Respiratory Death Rate.	Infantile
					21,234	3.7											
LFRETON			19,046	20,472	3,280	108-2		21,330	381	237	17.86	11-11	-32	-09	-28	1-26	
LVASTON AND BOULTON			1,398	1,575	4,506	6.7		3,851	90	31	23 37	8.04	.21	-25	-51	.77	
SHBOURNE			4,059	4,220	0.05020703			4,525	55	64	12.15	14.14	-22		'66	·66	
BAKEWELL		24,000,000	3,078	3,064	3,028		1.1	3,051	30	33	9.83	10 81			-98	-65	1
BASLOW		5 (10 (10))) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10) (10	858	866	854		1.4	857	11	11	12.83	12.83					
BELPER	R. C. Allen, M.R.C.S., D.P.H	3,183	11,640	12,324	13,024	5.7		13,170	211	141	16.02	10.70			-53	-75	
BOLSOVER	W. Stratton, L.R.C.P.I	4,955	11,214	11,475	11,811	2.9		11,800	237	109	20.08	9.23	.25	·08	-42	·84	
BONSALL	C. W. Sparkes, M.R.C.S., L.R.C.P	2,447	1,248	1,167	1,173	0.2		1,179	14	16	11.87	13.57				2.54	
BRAMPTON AND WALTON	R. A. McCren, M.B	9,002	2,059	2,316	2,323	0.3		2,408	33	34	13.70	14.12			·83	2.49	
BUXTON (Borough)	T. B. Flint, M.R.C.S	3,111	13,760	15,641	15,349		1.8	15,100	244	177	16.16	11.72			-16	•99	1
HESTERFIELD (Borough)	J. A. Stirling, M.B., D.P.H	8,472	55,309	61,232	64,160	4.8		64,390	1,127	749	17:50	11 63	-37	-04	-59	1.63	
LAY CROSS	A. F. R. Pooler, M.B., Ch.B	1,467	8,365	8,686	8,497		2.2	8,462	158	106	18.67	12.52	·47		-12	1.89	
DRONFIELD	O. H. Hudson, M.R.C.S	1,045	3,943	4,434	4,530	2.1		4,520	64	41	14.16	9.06	1.10	-22		-44	E.
LOSSOP (Borough)	E. H. M. Milligan, M.D., D.P.H.	3,052	21,688	20,531	19,509		4.9	19,320	211	268	10.92	13.87			-36	77	E.
HEAGE	R. C. Allen, M.R.C.S., D.P.H	2,367	3,474	3,740	4,054	8.4		3,964	80	35	20.18	8.83			1.00	1.51	
HEANOR			19,851	21,436	22,381	4.4		22,380	390	230	17.42	10.28	-17	-08	-44	1.20	
LKESTON (Borough)		2,526	31,657	32,266	32,813	1.7		32,690	534	350	16.33	10 71	-24	-21	-58	1.22	
LONG EATON		3,323	19,207	22,149	22,345	0.9		22,930	326	235	14.22	10 25	-04	-04	.30	1.09	
MATLOCKS			10,343	10.545	10,599	0-5		10,060	145	158	14.41	15.70	-09	-09	-49	1.29	
NEW MILLS		1	8,998	8,490	8,551	0.7		8,514	107	113	12 00	13.27	-28		-35	1.52	
NORTH DARLEY		5,142	3,317	3,264	4.093	25.4		4.354	58	39	13-32	8 95	-45		-45	-22	
RIPLEY		2,815	11.848	13,292	13,413	0.9		13,410	207	135	15.43	10.07	.07		-22	1.49	
SOUTH DARLEY		2.008	809	740	731		1.2	740	12	10	16-21	13.51					
SWADLINCOTE		3,670	18,674	20,012	20.308	1.4		20,320	316	200	15.55	9.84	-44	-05	-24	1.03	
WIRKSWORTH		3,026	3,888	3,610	3,910	8-3		3,875	62	49	16.00	12.64	.51	.51	.25	1.80	
																	L
	TOTAL	92,588	289,731	307,547	316,475	2.9		317,200	5,103	3,571	16.09	11-26	-23	-07	-44	1.22	



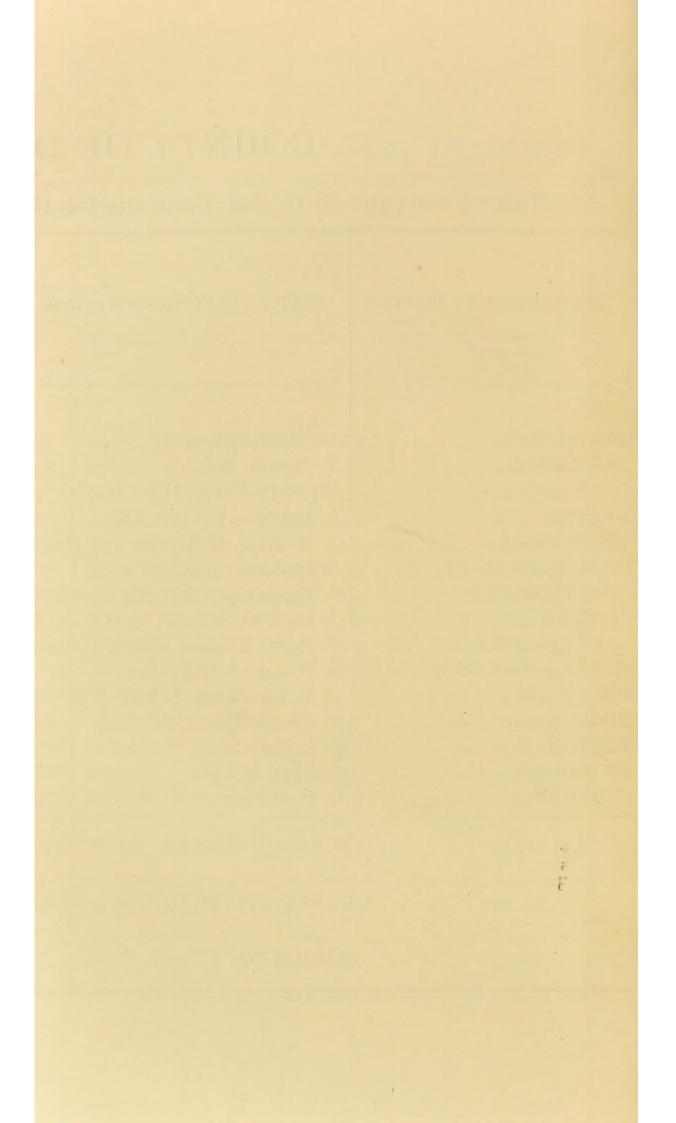
COUNTY OF DERBY.

Year ending December 31st, 1932.

Table IIa.

Table giving the Birth Rates and the Death Rates from several causes, in each of the RURAL Sanitary Districts of the County.

											ANN	UAL RATES	PER 1,00	0 OF ESTI	ATED POI	ULATION.	440
RURAL SANITARY DISTRICT.	MEDICAL OFFICER OF HEALTH.	AREA in Acres			POPU	LATION.			RTHS.	DEATHS.	tate.	Rate.	otic Rate.	from con- vers and Diseases 2 yrs.	sis tate.	tory ate.	le Death
-		(Land and Water).	Census 1911.	Census 1921.	Census 1931.		ntage)	Pop'lation	BI	DEA	Birth Rate	Death Rate	Zymotic Death Rate.	DeathRate fr tinued Feve Diarrhoral I (under 3	Phthisis Death ftate.	Respiratory Death Rate.	Infantile Rate nor
ASHBOURNE	H. H. Hollick, M.R.C.S		10,294	10,291	10,348	0.5		10,230	164	139	16.03	13.59	19	-09	.78	.78	3
BAKEWELL		81,053	18,461	18,655	18,418		1.2	18,300	261	208	14.26	11.37	.21	·05	.38	1.04	4
BASFORD	W. H. Parkinson, M.D., D.P.H.	3,569	1,450	1,481	1,864	25.8		1,815	26	24	14.32	13.22	-55	·55	1.10	1.10	114
BELPER	R. Morrison, L.R.C.P. & S	50,152	23,586	23,441	24,973	6.5		25,610	359	279	14.02	10.89	.15	·04	-54	.81	50
BLACKWELL	A. H. Wear, M.B., B.S., D.P.H.	21,239	39,306	41,880	42,686	1.9		42,900	809	449	18.86	10.47	•51	.11	.58	1.56	8
DHAPEL EN-LE-FRITH	G. Cochrane, M.B., D.P.H		16,935	16,144	17,760	10.1		17,730	264	179	14.89	10.09	.16	.11	.28	·62	4
CHESTERFIELD	J. R. Graham, M.B., Ch.B., D.P.H		71,653	76,143	82,546	8.4		82,650	1,520	967	18.38	11.70	.76	.12	.30	1.73	9
CLOWNE	A. H. Wear, M.B., B.S., D.P.H		17,844	17,506	17,720	1.2		17,760	349	185	19.65	10.41	.17	-06	.62	1.52	5
GLOSSOP DALE	E. H. M. Milligan, M.D., D.P.H.	17,891	4,009	3,780	3,966	4.9		3,919	32	62	8.16	15.82				2.04	93
HARTSHORNE AND SEALS	and any many many in the	., 11,479	7,939	8,598	8,601	0.0		8,654	145	100	16.75	11.55				1.38	5
HAYFIELD	G. B. Pemberton, M.B., D.P.H.	. 10,282	5,170	4,520	4,305		4.7	4,263	43	61	10.08	14.31			1.17	1.40	9
NORTON	D. Green, M.B., F.R.C.S	. 7,298	3,919	4,622	6,586	42.5		7,406	88	102	11.88	13.77			-40	1.35	40
REPTON		. 54,275	16,133	16,500	18,176	10.1		18,660	307	176	16.45	9.43	.16		.26	1.23	42
SHARDLOW		. 41,758	30,900	29,638	38,086	28.5		39,540	621	422	15.70	10.67	.25	-02	.58	-88	46
SUDBURY	G. H. Herbert, M.R.C.S	17,297	2,683	2,537	2,460		3.0	2,563	36	37	14.04	14.44			.78	1.17	
	RURAL DISTRICTS	. 548,113	270,282	275,736	298,495	8.2		302,000	5,024	3,390	16-63	11.22	·38	·07	•44	1.30	65
	URBAN DISTRICTS	. 92,588	289,731	307,547	316,476	2.9		317,200	5,103	3,571	16.09	11.26	·23	·07	•44	1.22	60
	WHOLE COUNTY	. 640,701	560,013	583,283	614,971	5.4		619,200	10,127	6,961	16.35	11.24	·31	-07	•44	1.26	63



Infantile Mortality.—The Infantile Mortality rate for the year under review was 63.4 per 1,000 births, as compared with 67.4, the rate for the previous year, whilst the rate for England and Wales has only been reduced from 66 in 1931 to 65 in 1932.

The reduction of the infantile mortality rate, not only in this County but in the Country as a whole, is a matter of which I suggest we can, with all modesty, be proud, but it is impossible to refrain from commenting on the high infantile mortality rate amongst illegitimate children. This year it has reached 141.64 per thousand, the highest figure, certainly during the last seven years—I have not traced the records further back than that. The following Table, showing the infantile death rate amongst the whole population of the County and amongst legitimate and illegitimate births, is worthy of some consideration, and, roughly speaking, we find that almost persistently the mortality rate amongst illegitimate infants is double that amongst legitimate infants : this year it is even more so :—

Year.	Amongst legitimate births.	Amongst illegitimate births.	Amongst all births.
1926	 69.0	123.5	$71 \cdot 1$
1927	 69.8	108.2	71.3
1928	 58.9	134.3	63.0
1929	 66.1	102.4	67.6
1930	 57.2	104.7	61.4
1931	 66.5	91.1	67.4
1932	 60.5	141.6	63.4

INFANTILE DEATH RATE.

What is the meaning of this ? From our point of view as health officers, it is a matter of no concern whether a child is legitimate or illegitimate-it is a child and every means at our disposal for protecting its life should be applied. Is it congenital disease over which we have no control ? Is it environmental circumstances ? If so, what are they ?-Insanitary conditions, poverty, ignorance, or i. it wilful neglect ? The Chief Medical Officer of the Ministry of Health commented on this difference between the infantile mortality rate amongst legitimate and illegitimate children of the Country as a whole in his Annual Report for 1931 and pointed out that whereas 78 per million of legitimate children died from violence and lack of care, the corresponding ratio in illegitimate children was 6,266. In the category 'lack of care' where there was no violence, the respective rates were 74 and 4,413 per million, whilst 27 out of 28 cases of homicide recorded were of illegitimate children.

Whilst illegitimacy is to be discouraged by all reasonable means, I think it is desirable that those who consider it reasonable to stigmatise both the parent and the off-spring of an illegitimate birth, should consider whether this cannot be overdone and whether this attitude is not to some extent responsible for the high illegitimate infant death rate. There are both societies and individuals who are doing their utmost to alleviate the undoubted punishments which society inflicts chiefly upon the mother and still, I regret to say, to some extent upon the innocent child. They are doing good work.

How far poverty, or the fear of it, or the fear of unemployment on the part of the mother leads to death as returned by the Registrar under the heading of "Violence and lack of care" I cannot say, but I suspect that this also is a potent factor. It is not a simple matter to decide how it can be overcome without relieving the mother of responsibilities which should be hers—but I might add only partially hers, for it is all too common that the father escapes.

The whole matter is one bristling with difficulties, but I think to a great extent these could be overcome, though possibly only at the expense both of our money and our prejudices.

Births.—The Birth Rate for the year—16.35 per 1,000 of the population—is the lowest on record and compares with 16.72, the rate for the previous year. The numbers of registered live and still births amongst males and females, showing legitimate and illegitimate separately, are as follows :—

Legitimate Illegitimate	 	Live Males. 5,037 171	Births. Females. 4,737 182		Births. Females. 206 7
Totals	 	5,208	4,919	271	213
		10),127	4	.84

Deaths.—6,961 deaths occurred during the year, giving a death rate of 11.24 per 1,000 of the population as compared with 11.08, the rate for the previous year.

Zymotic Diseases.—The Zymotic Death Rate for the year was 0.31 per 1,000 of the population as compared with 0.24, the rate for 1931.

HEALTH EDUCATION.

Health Week.—Health Week for Derbyshire was held from October 2nd to 8th, 1932, and the whole of the Authorities and Organisations interested in health services were again associated with and represented on the Derbyshire Health Week Committee. Special addresses were given by the Teachers, Medical Practitioners, School Doctors, School Dentists, Health Visitors and other qualified speakers. In addition about 35,000 children from 274 schools attended Picture Houses where special films were displayed. Lectures were also arranged by the Red Cross Society, and others were given by myself and the Medical Superintendent of Bretby Orthopaedic Hospital. A considerable quantity of literature was distributed to the schools, Women's Institutes, etc.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

LOCAL GOVERNMENT ACT, 1929.

Section 5 (1).—No alterations have been made in the administration of the services of Poor Law Medical Relief during the year.

Section 13.—There has been no further development since my Report for 1931 in which I reported on a meeting between a Committee of the County Council and a representative Committee of the Voluntary Hospitals.

PUBLIC ASSISTANCE INSTITUTIONS.

The following Table gives information regarding the accommodation provided at the Public Assistance Institutions within the County and the extent to which they were used during 1932 :---

TABLE III.

	Total			Die	Deaths	Duration of Stay.						
Name of Institution.	No. of beds.	beds oc- cupied.	sions.	Dis- charges	Deaths.	4 weeks or less.	4—13 weeks.	over 13 weeks.				
Ashbourne	37	31	65	43	17	34	10	16				
Bakewell	81	50	222	168	56	163	36	25				
Belper	135	107	193	103	51	50	39	65				
Chapel	75	63	122	98	31	80	28	21				
Chesterfield	207	126	858	703	187	451	365	74				
Glossop	114	90	77	46	25	17	32	22				
Hayfield	37	33	45	37	13	20	13	17				
Shardlow	95	66	183	161	87	6	6	236				
Total	781	566	1765	1359 .	467	821	529	476				

PUBLIC ASSISTANCE INSTITUTIONS.

* Excluding cots in maternity wards.

Hayfield Institution.—It has been decided that the Hayfield Institution shall be set apart for the accommodation of patients of the senile dementia type. This has necessitated considerable structural alteration which is now nearing completion. It is hoped by this means to considerably improve the amenities of the ward at the Glossop and Chapel Institutions.

Poor Law Medical Out-Relief.—Since the publication of the Survey Report in 1930, where a complete list of the areas, districts,

parishes and District Medical Officers was given, the following changes have taken place :---

During 1931 :--

Area.	District.	Parishes.	District Medical Officer.
Mid-Derbyshire	No. 4	Alfreton	Dr. O. R. Allison, Greenhill Lane, Riddings, Alfreton (Vice Dr.W.A.Warters)
	No. 9	Denby Horsley Horsley Woodhouse Mapperley Morley Smalley	Dr. C. M. O'Brien, "Dunadea," Horsley Woodhouse (Vice Dr.F.R.Howse)
South-Eastern	No. 1	Ilkeston Shipley	Dr. F. B. Sudbury, Galtee House, Ilkeston (Vice Dr.W.R.Paton)
Scarsdale	No. 1	Beighton (Dr. A. R. Fordyce, 'The Beeches, Beighton Vice Dr. J. Fairbrother)
	No. 10	Clay Lane Egstow Stretton Woodthorpe	Dr. A. F. R. Pooler, Clay Cross (Vice Dr. T. F. Wilson)
	No. 16	Pilsley North Wing- field (part)	Dr. O. H. Bullock, Pilsley, Nr. Chesterfield (Vice Dr. J. Alexander)
During 1932 :			
South-Western	No. 9	Cubley Marston Montgomery Norbury and Roston	Dr. A. H. C. Hill, The Croft House, Rocester, Staffs, (Vice Dr. K. V. Smith)
Scarsdale	No. 5	Brampton Walton	Dr. K. B. McGlashan, Ash Lodge, Bramp- ton, Chesterfield. (Vice Dr. R. A. McCrea.
High Peak	No. 9	Tideswell Blackwell Grindlow Great Hucklow Litton Taddington Wardlow Wheston.	Dr. H. Brookes, Osborne House, Tideswell, Buxton. (Vice Dr. F. K. B. Quanborough)

Vaccination.—The following Table has been prepared from the annual returns of the Vaccination Officers to the Registrar General, and relates to births registered in the year 1931. The results as at 31st January, 1933, show that of 9,943 children whose births were registered in the County, 523 died unvaccinated. Of the remaining 9,420 children, only 1,916 (20.3%) were successfully vaccinated or were certified to be insusceptible to vaccination while statutory declarations of conscientious objection were received in respect of 6,467 (68.6)%.

A table has also been prepared showing the vaccinations performed by the Public Vaccinators and the Medical Officers of Public Assistance Institutions.

	v			
	Under 1 Year.	1 Year and upwards.	Totals.	Successful Re-Vaccinations.
By Public Vaccinators By Medical Officers of	1,450	303	1,753	102
Public Institutions	12	15	27	1
TOTALS	1,462	318	1,780	103

VACCINATIONS PERFORMED DURING 1932.

1 .		1	1
Number o Statutory Declara-	conscien- tious Ob- jection actually received during 1932.	$\begin{array}{c} 577\\ 577\\ 681\\ 169\\ 972\\ 972\\ 972\\ 972\\ 972\\ 92\\ 92\\ 92\\ 92\\ 92\\ 92\\ 92\\ 92\\ 161\\ 12\\ 12\\ 136\end{array}$	6,619
Number of Number of Certificates Statutory of success- Declara- tal Deimony		247 247 35 30 30 39 39 39 39 39 20 50 50 19 19 26 50 19 12 12 12 12 12	2,071
ber of ese ths ining Janu-	ary, tered in tered in Vaccina- tion Regi- ster nor temporar- ily accoun- ted for.	$1221 \\ 129 \\ 129 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128 \\ 128$	117
ths which 1933, re- in Vacci- ccount of :	Removal to places unknown and cases not found.	12 14 16 1 10 10 10 10 10 10 10 10 10 10 10 10 1	146
Number of these Births which on 31st January, 1933, re- mained unentered in Vacci- nation Register on account of:	Removal to other Districts.	$\begin{array}{c} 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\$	59
Number on 31st mained nation Re	Postpone- ment by Medical Certificate.	-11 :0 :40 : :0000 : :0000 :	55
entered	Died Unvacci- nated.	$\begin{array}{c} 32\\ 23\\ 215\\ 22\\ 25\\ 22\\ 23\\ 22\\ 25\\ 22\\ 25\\ 22\\ 22\\ 25\\ 22\\ 22\\ 22$	523
these Births duly entered uary, 1933, in Vaccination Register, <i>viz.</i> :	Statutory Declara- tions of Conscien- tious Objection.	$\begin{array}{c} 524\\ 698\\ 171\\ 931\\ 226\\ 114\\ 73\\ 73\\ 73\\ 73\\ 249\\ 98\\ 98\\ 86\\ 231\\ 269\\ 238\\ 269\\ 238\\ 269\\ 238\\ 167\\ 238\\ 167\\ 167\\ 167\\ 167\\ 167\\ 167\\ 167\\ 167$	6,467
of these January, Registe	Insuscep- tible to Vaccina- tion.	: : : : : : : : : : : : : : : : : : :	13
Number by 31st	Success- fully Vaccina- ted.	230 232 232 232 232 232 232 232 232 232	1,903
Number of Births	from 1st from 1st January to 31st Dec- ember, 1931.	$\begin{array}{c} 664\\ 1,033\\ 1,226\\ 1,226\\ 272\\ 283\\ 184\\ 408\\ 167\\ 408\\ 184\\ 489\\ 324\\ 166\\ 204\\ 363\\ 3234\\ 117\\ 297\\ 297\\ 297\\ 297\\ 297\\ 297\\ 297\\ 29$	9,943
	Vaccination Officer.	Mr. J. L. Kind Mr. T. H. Widdowson Mr. J. Spencer Mr. J. Spencer Mr. J. S. Wherrett Mr. J. S. Wherrett Mr. A. M. Turner Mr. J. Blosson Mr. J. Blosson Mr. J. Housley Mr. J. Housley Mr. J. H. Housley Mr. J. W. C. Payne Mr. J. W. C. Payne Mr. J. W. C. Payne Mr. J. W. C. Payne	Totals

INSTITUTIONAL -TREATMENT FOR THE CARE OF MENTAL DEFECTIVES

Full particulars were given in my Annual Report for 1930, page 51, as to the accommodation available in this connection.

The County Council have one small block in connection with the Glossop Public Assistance Institution, certified by the Board of Control for the Accommodation of nine males and twelve females, whilst the Chesterfield Public Assistance Institution is certified for the reception of one female case. This accommodation is always fully occupied. Apart from this, the County Council provide accommodation by contracting with certified institutions not belonging to the County Council, in which, at the end of 1932, there were accommodated for the Council 51 males and 142 females.

During 1931, the County Council decided to purchase Makeney House near Belper, as an Institution for 80 high-grade mentally defective females, whilst the Mental Deficiency Act Committee have decided to prepare a scheme for the erection of a colony in Bretby Park for the accommodation of some 340 cases of both sexes and all grades. The arrangements with regard to Makeney will, I hope, by the time this Report is published, have been approved by the Board of Control, whilst in the case of the Colony at Bretby, the Committee have provisionally approved the plans submitted to them.

NURSING IN THE HOME.

General.—General nursing in the homes of the people is carried out over the greater part of the County through the agencies of District Nursing Associations, the majority of which are affiliated with the Derby County Nursing Association. These affiliated Associations number 80 and employ 99 nurses (29 Queen's Nurses and 70 District Nurse Midwives). I have no accurate information as to the number of Associations not affiliated to the Derby County Nursing Association.

Under Section 101 of the Local Government Act, 1929, the County Nursing Association receives a Grant of £1,400 per annum for the financial year ended March, 1933. Under the new scheme, a Grant of £1,200 per annum will be paid as from April 1st, 1933, until March 31st, 1937, the reduction of £200 being agreed to consequent upon the reduction in the number of District Nursing Associations. The Grant is made with a recommendation that the County Nursing Association should allocate the money partly towards the administrative expenses of the County Nursing Association, partly for the training of midwives and providing postgraduate courses for them, and for the greater part as Grants to District Nursing Associations providing midwifery and maternity services, the object of the Grant largely being to assist in the maintenance of a midwife in districts where normally it would not be possible for a midwife to exist in private practice, such for instance as in sparsely populated agricultural rural areas.

The County Council has arrangements with the Derby County Nursing Association for the nursing of bedridden cases of tuberculosis in their own homes. During the year 1932, this service was provided in eleven instances.

Midwives.—During 1932, eight midwives received subsidies ranging from £15 to £50 per annum. On December 31st, 1932, the number of subsidised midwives was eight.

The total number of midwives practising in the area at the end of 1932 was 283. Further particulars of the midwifery service is given under the heading of Maternity and Child Welfare, on page 39 of this Report.

BACTERIOLOGICAL LABORATORY.

During the year, 17,347 bacteriological examinations were made at the County Laboratory, compared with 13,967 in the previous year. The following Table shows the origin of the specimens:—

TABLE IV.

Medical Practitioners	3,347
Hospitals	2,922
Venereal Diseases Scheme	3,876
Dispensary Staff	1 9 9 9
School Medical Staff	9 107
Waters taken by County M.O.H. Dept	55
Waters taken by Other Persons	19
Hairs for Ringworm (other than Schools)	100
Examinations under Superannuation Act	31
Local Authorities : Milk Inoculations. Tuberculosis Order Milk Inoculations. Ordinary Routine Sam Milk for Bacterial Count and Bacillus Co Milk, Direct Examinations, Tuber-	oli 606
culosis Order—Positive	69
Negative	$. \dots 338 - 407$
Waters	108
Outside Authorities : Milk Inoculations. Derby Borough Milk for Bacterial Count and	316
Bacillus Coli. Derby Borough	770
Miscellaneous. Derby City Hospital	197
Miscellaneous. Derby Borough	80
Miscellaneous. Other Sources	43
Total	17.347

The number of specimens sent in by Medical Practitioners from the Urban Districts was 4.94 per thousand of the population, and in the Rural Districts it was 5.89, the figure for the whole County being 5.40 per thousand of the population.

TABLE V.

Examination of Samples of Water.

			Taken by County M.O.H. Department.	Taken by Local Authorities.	Taken by Other Persons
Alfreton U				5	
Belper U				7	
Bolsover U				4	
Glossop Boro'				5	
Heage U			1		
Matlocks U			1	29	
Wirksworth U				1	
Ashbourne R			2		
Bakewell R			8	1	
Belper R			1		
Blackwell R				31	
Chapel-en-le-Frith	R		1	15	
Chesterfield R.				10	
Glossop Dale R.			3		
Repton R			6		
Shardlow R			12		
Ilkeston and Heano			20		
Swadlincote & Ashb	y Water	r Bd.			2
Derby Corporation					17
Totals			55	108	19

TABLE VI.

Specimens of Hairs for Ringworm. (Other than School).

	Distr	iet.		Positive.	Negative.
Buxton Boro'			 	 3	14
Chesterfield Bor	s'		 	 12	8
Heage U			 	 	1
likeston Boro'			 	 1	4
New Mills U.			 	 	1
Chesterfield R.			 	 	1
	Total	8	 	 16	29

		Ente	rica.					1		1			
Districts.	P'typ	hoid, boid, B,	Dyse		Dip		Phth	isis.	Mise		To	tal	Rate per 1,000 of
Districts.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Popula- tion
URBAN.			-							1			
Alfreton					9	33	3	11	2		14	44	2.71
Alvaston & Boulton		2		2	2	24		3			8	34	10.90
Ashbourne		::		.:	1	14	2	12			18	34	11.49
Bakewell	4	16	• •	4	••	5	4	7	A STREET	1	11	40 5	16.71 5.83
Baslow Belper	ï	21	3		2	1 8	2	4 45	4		12	86	7.44
Belper Bolsover	i	10		6	6	34		21	2		12	71	7.03
Bonsall						4		1		1		6	5.09
Brampton & Walton					1	1		3	2	3	4	7	4.56
Buxton (Boro')					1	18			2	4	6	40	3.04
Chesterfield (Boro')		15		11	6	65				1000	58	194	3.91
Clay Cross		6		4	2		and the second se			1	5	41	5.43
Dronfield		$\frac{3}{15}$		1 4	2	1 41		12 19			$1 \\ 10$	17 87	3.98
Glossop (Boro') Heage	4	10		-		41					3	9	3.02
Heage Heanor				ii	2					39	36	134	7.59
Ilkeston (Boro')					3	15					21	75	2.93
Long Eaton	1					32					18	98	5.05
Matlock					4	39		13			8	56	6.36
New Mills		2	1	1	5	44		16	2	5	8	68	8.92
North Darley						6		1			••	7	1.60
Ripley	••	2				••	4		100	3	6	22	2.08
South Darley Swadlincote	••		••			26		32		4	13	62	3.69
Winkamonth					2				8		13	46	15.22
wirksworth													
Urban Districts	14	116	12	53	53	448	97	513	109	153	285	1283	4.94
DUDAT						10							
RURAL.			and the second second	in the second	1	23	1	19	4	9	6	44	4.88
Bakewell	i	5	i	3	19					Ĩ	25	146	9.34
Basford									6.23				
Belper	3	12		9	4	48	7	43				127	6.17
Blackwell	2	25		13	19							264	7.36
Chapel-en-le-Frith	1	3		::	2							46	3.27
Chesterfield	1	25		12	8	94				A Contractor		242	3.33
Clowne	2			1	6		1.000	37			1. 1. 1. 1. 1.	97	6.25
Glossop Dale Hartshorne & Seals	••	•••	••	••		14						44	5.66
Hartshorne & Seals						3		8		2		13	3.04
Norton	1	1		2		9	2				3	23	3.51
Repton	2	5		4	13	64	5	56	22	58	42	187	.12.27
Shardlow		17		8	19				1.000		69	230	7.56
Sudbury			••		1	15		1	1	1	2	17	7.41
Rural Districts	13	96	13	52	92	651	65	524	112	161	295	1484	5.89
Urban Districts	14	116	12	53	53	448	97	513	109	153	285	1283	4-94
Whole County	27	212	25	105	145	1099	162	1037	221	314	580	2767	5.40

TABLE VII.—Specimens received from Medical Practitioners during 1932

Hospital.		Enterica. Typhoid, Gaertner, P'typhoid, Dysentery A & B. etc.			Diphtheria.		Phthisis		Miscel- laneous		Total.			
			Pos	Neg.	Pos.	Pos. Neg.	Pos.	Neg.	Pos.	Neg	Pos.	Neg.	Pos.	Neg.
Belper							77	569					77	569
Buxton		• •		2			2	16				1	2	19
North Derby		-				-		-					-	100
. Royal H	ospital		4	9	1	3		1				1	5	14
Draycott		• •					22	77					22	77
Dronfield			2	12	2	3	19	81			5	15	28	111
Etwall							5	66					5	66
Gamesley							3	151				4	3	155
High Peak							9	39					9	39
Haddon							35	164				11	35	175
Ilkeston Sana	torium				2		2	11		1		1	2	13
Langwith			3	4	1	3	24	121	-	11.1	3	7	31	135
Mastin Moor			2	7	i	3	68	337			ĩ	4	72	351
Morton			4	14	î	8	58	611			8	37	71	670
Penmore				3		1	29	129			4		33	133
To	tals		15	51	6	21	353	2373		1	21	81	395	2,527

TABLE VIII.-Specimens received from Hospitals, 1932.

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Venereal Diseases Specimens.

The following Table shows the number of specimens sent in under the V.D. Scheme for Examination during the year 1932 :---

TABLE IX.

				General itioners.	From V.D. Clinics,	Total.
Blood for	Wassermann	reactio	on	2,151	1,350	3,501
Pus for Ge	onococci			291	58	349
Serum for	Spirochætes			4	1	5
Cerebro-Sp	inal Fluid fo Anhydride		ie	1	_	1
do.	do.	Cell C	ount	3	6	9
do.	do.	Globul	in	1	9	10
Culture for	Gonococci			1	_	1
	Tota	als		2,452	1,424	3,876

TABLE X.

Specimens received from the Dispensaries and Sanatoria during 1932 :---

Dispensary or	Sp	uta.	Miscell	aneous.	Testal
Institution.	Pos.	Neg.	Pos,	Neg.	Total.
Ashbourne	7	19	2	3	31
Burton-on-Trent	18	141	3	3	165
Chesterfield	39	95	3	2	139
Chinley	17	66	26	4	113
Derby	16	57	4	3	80
Glossop	15	39	7	4	65
Ilkeston	44	200	6	3	253
Long Eaton	32	93	3	2	130
Matlocks	16	71	18	2	107
Penmore Pavilion	7	3			10
Derbyshire Sanatorium		4	51	60	115
Bretby Hall	1	4	31	63	99
Whitworth Hospital	11	3	1	1	16
Totals	223	795	155	150	1323

TABLE XI.

School Specimens received during the year 1932.

		Pos.	Neg.
Swabs for Diphtheria	 	19	 1759
Hair for Ringworm	 	80	 74
Miscellaneous	 	144	 121
		243	1954
		243	

Total 2197

Tubercle in Milk.

During the year 1321 samples of milk were examined for the presence of tubercle bacilli by animal inoculation. 124 samples, or 9.38 per cent. were found to contain tubercle bacilli. The 1321 samples included 316 from Derby Borough. It should be explained that some of these samples were taken in the process of detecting the offending animal in a herd from which a mixed milk had already been found to contain Tubercle Bacilli.

During 1932, 688 samples of milk were submitted for bacterial count. Of this number 555 came within the limits of Grade "A" milk.

			in the second second
TTA	T TTTTI		
.111	TABLE X		
		BAKEWELL AND	
PARTERINE	Woop's HASPITAL	DISTRICT WAR MEMORIAL COTTAGE	
Howe		HOSPITAL.	VICTORIA MEMORIAL)
19082	1888.	1923.	1904-12.
			an Lobard 1
MathuridaM	a, b, c, d, c, f, g.	a, b.	
			as b.
		8	
N. T. Market		6(+ 1 private)	4 (+2 private)
E STATE			â
C. C. C.		10	12
The second second			Plat
any.		Yes.	.897
2.0072	No.	No.	No.
Tarying an up th	Dr's recommend's.		Doctor's Recommen-
nocording to me	Varging payments more ding to means.	and payment from	inoilish as
		5/- per week upwards.	
	3, 6	2, 3	3
and the second s			
Entropy -	Town	Red Cross.	Ashbourne.
And the second			
test. Secondi ai	All Med. Pradition's	8 Doctors visit.	
1 Obstel, but,	1 Gen. Surg.	6 Consultants.	
C. Card	I Gynnoe. I Orbh. Surg.		
Carlos and	2 America		
	I Dental Surg.		
Par.	JUN	.livi	
E.M.			
		Nil.	Nil.
	a property of the second		
The second	e • · ·	4	

Robert Parth, Reserve

and a

The Wroden's Bayes,

						DISSECTION	· Danayonan						TABLE	XIII,
	DEBETSEIRE ROYAL ISPIDNARY, DEBET.	CRESTRETELD AND NORTH DERBYSHERE ROYAL HOSPITAL	DEVESSION HOSPITAL, BUETOS.	lagments.	BUXTON AND DOPTRICT HOSPITAL	WOMEN, DEEDY,	Hospital FOR Sick Children, DREET.	QUEEN VICTORIA MINOMIAL HOME OF REST.	HEAPOR, LANGLAY MELL AND DUSTRICT MENOMIAL HOSPITAL	WERROWMETH COTTAGE HISFITTAL.	ASREGGENE COTTAGE HOSTITAL (VECTORIA MENDRIK)	BARRWEIL AND DISTRICT WAR MENOMAL COTTAGE HOSTITAL.	Woso's Hospital	PARTINGTON HONE.
Buildings, etc. erected	Founded 1810. Rebuilt 1894-1924.	1830. Extended from time to time until 1931.		1834.	1912-24-29.	1928-29.	1882.	1929.	1919-23	1921	1904-12.	1922,	1888.	1906.
*Class of Case dealt with	a, b, c, d, r, f, g.	a, b, c, d, e, f, g	Rheumatic cases only.	a_{0},b_{1},d_{2},f_{1}	u, b, e, d, c, f.	a, d.	a, b, c, c, f.	Invarables.	a, b.	a, b.	a, b.	α, δ.	u, b, c, d, c, f, g.	Maternaty.
Beds available—M —P —C	136 144 47	108 84 28	145 185 	30 21 8	11 10 10 (+9 others)	54 6		8 27 	9 6 1 (+1 persate)	6 6 3 (+1 private)	4 4 (+2 private) 2			9
—Tetal	347	120	310		40 	<u>60</u>	<u>50</u>	35	17	16 	12	10	10	0
Paying Patients received	Yas.	No.	No.	Tes.	Yes,	Yes.	Yes, occasionally.	Tes,	Yes.	Yes.	Yes.	Yes.	Yes.	Yes.
Out-Patients' Department	Yes.	Yes.	· Yes.	Yos.	No.	Yes.	Yes.	No	Yes.	Yes.	No.	No.	No.	1 40,
Method of Admission	Sab's recommend's.	Sab's roommend'n.	Sub's resummend's or L.P. £5/5/~ per 3 weeks. 0.P.		Varying charges. No to 35/~ per week.	Recommends.	Sab's reconcerdin.	On application.	On Dector's recommendation,	Varying charges. Nd to £1 per ucch.	Doctor's Econamen- datica.	Sub's recommend's and payment from 5/- per week upwords.	Varying mayments	Verying perments according to mean
†Special Facilities	1, 2, 3, 4, 5, 6, 7, 8, 9	1, 2, 3, 4, 5, 6, 7.	21/11/6 per 3 weeks. 1, 2, 3, 5, 6, 7.	$1_{e} \ 2_{e} \ 3_{e} \ 5_{e} \ 5_{e} \ 7_{e}$	2, 3, å.	1, 2, 3, 4, 5.	2, 3, 5, 6, 7,	NiL	3, 7, 8.	3	3	2, 3	3, 6	3
Ambulance	Town and Red Cross.	Town and Colliering,	Town.	Yown and Collery.	Town,	Town and Red Cross	Town and Red Cross.	Town and Red Cross.	-	Matlock-searcest.	Ashbowns,	Red Cross.	Town,	Tuws.
Honoracy Staff	I Ortho, Sorg.	2 Phys. 4 Surg. 1 Ophth. 1 Aonal. 6 Anne. 2 Aort. do. 1 Park. 1 Radiologist. 1 Ophn. 1 Dental Burg.	 Phys. 1 Orth. Surg. 1 Ophth. 2 Dental Surgs. Ned. Beginizar. 		18		5 Phys. 2 Surgs 1 Acrah. 1 Ophth. 1 Anasth.		6 Phys. 3 Surg.	4 Dorton out.	4 Dectors visit.	 B. Dortors visit. 6. Costuliants. 	All Med. Practition's in Bierough visit, 1 Gen. Surg. 1 Gynaec. 1 Orth. Surg. 2 Angech. 1 Dental Surg.	All Med. Practition in Bereigh visit. 1 Obstet. Surg.
Rendent Staff (Medical)	4 Anzethetiste.	5	2	No.	NiL	1	2	Nil	Nit	N:1.	No.	No.	Nol.	NiL
Other paid Medical Staff		Nil	1 Patho. 1 Ess- chemist. 1 Radiologist.	NiL	Patient's own doctor attends,	Nil.	Nul.	NiL	Nil	801	Nø.	Nil.	Nd.	Nil
Nersing Staff	. 183	84	1 Massage Teacher. 37	14	12	21	34	11	5	5	4	4		4
					*-a-Modral. b-Surgiesl. c-Orthopacies d-Gynascolog a-Ophihalouis f-Eass, Throw g-Oilarn.	ical.	 *1-Bast. and 2-Post Mor 3-X-Ray. 4-Endirem. 6-Massary. 6-Orthopad 7-Electrical 	ia.						

7-Electrical. 8-Ultra Violet Baya. 9-Urological.

	Up to 10,000.	Over 10,000 and up to 20,000.	Over 20,000 and up to 50,000.	Over 50,000 and up to 100,000.	and up to	Over 200,000 and up to 1,000,000	Over 1,000,000.	Uncount- able,
No. of Tests (Total 688) Highest Bacterial Count Lowest Bacterial Count Average Bacterial Count	$133 \\10,000 \\270 \\6,188$	87 20,000 11,000 15,563	$180 \\ 50,000 \\ 21,000 \\ 33,068$	$94 \\100,000 \\51,000 \\69,755$	61 199,000 102,000 146,344	87 976,000 201,000 452,000	44 13,504,000 1,008,000 3,096,500	2

Limit of Bacterial Content for Grade "A" Milk.

MILK EXAMINED FOR BACILLUS COLI.

	1	Positive.	Negative.	Total.	Percentage
Dilution.					with B. Coli
0.01 c.c.		206	482	688	30

Grade "A" Milk must be produced and treated under such conditions that a sample taken at any time before delivery to the consumer shall not contain more than 200,000 bacteria $p \ r \ c.c.$, nor any B. Coli in $\frac{1}{100}$ c.c.

HOSPITALS.

VOLUNTARY HOSPITALS.

I am unaware of any important change in the hospital services within the County during the year 1932. The Table giving details with reference to the various voluntary hospitals in the County has been brought up to date, and is again included in this Report.

OTHER VOLUNTARY HOSPITALS OR MATERNITY HOMES IN THE COUNTY.

Name of Hospital.	No. of Beds.
Whitworth Hospital, Darley Dale	 14
Heanor Maternity Home	 8

HOSPITALS OUTSIDE THE COUNTY BOUNDARY, BUT AVAILABLE FOR DERBYSHIRE CASES.

> Sheffield Royal Infirmary. Sheffield Royal Hospital. Jessop Hospital for Women, Sheffield. Mansfield District Hospital. St. Mary's Hospital, Manchester. Royal Infirmary, Manchester. Stockport Infirmary. Burton upon Trent General Infirmary.

The hospital services for Derbyshire, whether situated within or without the County, were set out fully in the Annual Report for 1930.

ISOLATION HOSPITALS.

Statistical information relating to each of the Isolation Hospitals within the County is given in Tables XIV. and XV.

TABLE XIV.—Cases of Infectious Diseases notified within the following Hospital Districts and removed to Hospital.

		7 á	SMA PO		SCAI FEV	ER.	DIPI EB	ITH- IA.	ENTI FEV	CONTRACTOR OF A	TOT	ALS.
DISTRICT.		Estimated Population, 1932.	No. notified.	Removed to Hospital.	No. notified.	Removed to Hospital.	No. notified.	Removed to Hospital.	No. notified.	Removed to Hospital.	No. notified.	Removed to Hospital.
Bolsover U.		11800	1	1	21	20	8	7	1	1	31	29
Clay Cross U.		8462	-	-	8	8	9	9			17	17
Dronfield U.		4520	-	-	18	18	3	3	1	1	22	22
Blackwell R.		42900	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		56	48	37	34	13	13	106	95
Chesterfield R.		82650		-	192	150	171	169	7	7	370	326
Clowne R		17760	-		25	23	26	24	2		53	47
Norton R		7406	-	-	6	-	2	- 1	1	1	9	2
TOTALS		175498	1	1	326	267	256	247	25	23	608	538

North Derbyshire Hospital District.

Chesterfield Hospital District.

Brampton and Walton U Chesterfield (Boro')	2408 64390		11	$\frac{2}{85}$	<u></u>	$\frac{2}{28}$	$\begin{array}{c}1\\24\end{array}$		 4 114	1 88
TOTALS	66798	-	-	87	64	30	25	1	 118	89

Belper Hospital District.

Alfreton U	 21330		-	11	9	43	43	_	-	54	52
Belper U	 13170	_		2	1	2	1			4	2
Heage U	 3964	-	-	1	1	-	-	-		1	1
Ripley U	 13410	-	-	6	6	2	1	-		8	7
Wirksworth U.	 3875		-		-	3	3			3	3
Belper R	 25610	-	-	7	6	7	4	2	-	16	10
TOTALS	 81359		-	27	23	57	52	2		86	75

Ilkeston Hospital District.

Ilkeston Boro' 32690	-	-	22	15	9	7	-	-	31	22
						1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.				

TABLE XV.

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PLYING FOR A SRANT. LAIOSI OF OMITAL

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i. Ige.						H. L. E. G										C. H. J. Sp	go
	ğ	242		0	8	83			1 0	1	17:			0	0	393	
		ASH. HUNT.															

TABLE XV. STATISTICAL INFORMATION RELATING TO ISOLATION HOSPITAL COMMITTEES APPLYING FOR A GRANT. Year ended March 31st, 1932.

Name of Hospital.	Belper.	Penmore.	Dronfield.	Mastin Moor.	Morton.	Longwith.	High Peak	Shardlow.	Repton.	fikeston,	Haddon.
Total Number of Beds in Hospital	83	59	34	36	33	37	46	50	36	25	34
Number of beds on which Grant is based	18	45	18	18	18	24	14	27	10	10	16
Population of Hospital District	81,359	66,798		17	5,498		34,426	66.321	24,085	32,690	38,541
Cases Admitted during year ended March 31st, 1932 :-					t				24,000	34,000	90,041
Smallpox	50 48 12 1 3	97 23 10	60 22 5 14	134 87 2	62 95 3 3	62 40 15	41 25 2	106 32 	35 26	12 1 —	22 74 1
TOTALS	114	132	101	223	163	117	68	138			
Average number of patients in Hospital each day Permanent Staff needding in Hospital Non-resident Staff in addition to Clerk and Dootor Average number of days each case in Hospital	9-4 12 2 25	12.73 20 6 34.4	9- 10 1 32-5	17 10 1 323	10 14 2 20·4	12 11 1 34:9	8 7 3 40	133 200 1 31	61 	13 1-12 6 1 31-23	98 675 10 1 23-6
SUMMARY OF EXPENDITURE : 1. Provisions 2. Drogs and Medical Appliances 3. Farruitare, Lamen, &c. 4. Face 6. Administration 7. Renewals and Repairs 8. Loanu-Repayment and Interest 10. Mixediancous	Average patients Average patients § r. with set patients § r. with set patients § r. dispersion 601 I 4 72 2 1.1 526 I 1.6 7154 2.15.0 0.336 1.33 9	Average patients present patients g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g g <t< td=""><td>Arrenge patient Arrenge (Cot) Cot pr patient g μ r web 231 9 10 122 7 4 145 6 2 117 5 0 768 1.12 10 368 15 9 368 15 9 2.087 4 9 2 4 8</td><td>Cost. Cost per patient gatient gatient 335 7 186 4 149 3 146 3 177 17 251 5</td><td>$\begin{array}{c} \operatorname{Arenergy}\\ \operatorname{Cost}, & \operatorname{Cost} & \operatorname{pr}\\ \operatorname{polices}\\ g & \operatorname{pr} & \operatorname{reck}, \\ g & \operatorname{diss} & 13 & 9 \\ 168 & 6 & 6 \\ 275 & 10 & 7 \\ 275 & 10 & 7 \\ 161 & 6 & 2 \\ 0307 & 11 & 10 \\ 72 & 2 & 9 \\ 467 & 17 & 7 \\ 42 & 1 & 7 \\ - & - \\ 2,776 & 5 & 6 & 9 \\ \hline & 5 & 8 \end{array}$</td><td>Average patient Average patient £ 6 8 2866 12 4 2086 12 4 2086 12 4 2087 8 7 4 13 5 486 15 7 227 10 - - - 25,510 4 1 5 6 5 5 5</td><td>Cost. Cost paired per week. £ 5 4. 271 13 0 62 146 7 0 234 12. 1,031 2 9 6 312 15. 0 </td><td>$\begin{array}{cccc} {\rm Cost.} & {\rm Cost.} & {\rm Cost.} \\ {\rm pert \ seck.} \\ {\rm f} & {\rm f} & {\rm s} & {\rm d}, \\ {\rm s80} & {\rm I} & {\rm f} & {\rm 6} & {\rm d}, \\ {\rm 988} & {\rm 2} & {\rm 11} \\ {\rm 256} & {\rm 7} & {\rm 7} & {\rm 1}, \\ {\rm 493} & {\rm 14} & {\rm 7} \\ {\rm 1,412} & {\rm 2} & {\rm 1} & {\rm 0} & {\rm 6} \\ {\rm 10} & {\rm 4} & {\rm 891} & {\rm I} & {\rm 6} & {\rm 4} \\ {\rm 891} & {\rm I} & {\rm 6} & {\rm 4} & {\rm 6} \\ {\rm -} & {\rm -} & {\rm -} \end{array}$</td><td>Cost. Cost per per serie. £ £ 6 6. 265 17 3 0 178 12 0 10 7 635 2 210 10 206 14 0 105 11 2 387 1 6 1 1 — — — — — — — —</td><td>Accesses Cost, per weak \$\$\$ 200 6.10 \$\$\$\$ 200 6.10 \$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$</td><td>Coast. Contexp patients 6 & Accept 332 18 11 377 3 2 224 12 9 282 16 1 829 2 7 3 134 2 7 82 4 1,069 3 0 1 13 3,024 8 12 3 7 7</td></t<>	Arrenge patient Arrenge (Cot) Cot pr patient g μ r web 231 9 10 122 7 4 145 6 2 117 5 0 768 1.12 10 368 15 9 368 15 9 2.087 4 9 2 4 8	Cost. Cost per patient gatient gatient 335 7 186 4 149 3 146 3 177 17 251 5	$\begin{array}{c} \operatorname{Arenergy}\\ \operatorname{Cost}, & \operatorname{Cost} & \operatorname{pr}\\ \operatorname{polices}\\ g & \operatorname{pr} & \operatorname{reck}, \\ g & \operatorname{diss} & 13 & 9 \\ 168 & 6 & 6 \\ 275 & 10 & 7 \\ 275 & 10 & 7 \\ 161 & 6 & 2 \\ 0307 & 11 & 10 \\ 72 & 2 & 9 \\ 467 & 17 & 7 \\ 42 & 1 & 7 \\ - & - \\ 2,776 & 5 & 6 & 9 \\ \hline & 5 & 8 \end{array}$	Average patient Average patient £ 6 8 2866 12 4 2086 12 4 2086 12 4 2087 8 7 4 13 5 486 15 7 227 10 - - - 25,510 4 1 5 6 5 5 5	Cost. Cost paired per week. £ 5 4. 271 13 0 62 146 7 0 234 12. 1,031 2 9 6 312 15. 0	$\begin{array}{cccc} {\rm Cost.} & {\rm Cost.} & {\rm Cost.} \\ {\rm pert \ seck.} \\ {\rm f} & {\rm f} & {\rm s} & {\rm d}, \\ {\rm s80} & {\rm I} & {\rm f} & {\rm 6} & {\rm d}, \\ {\rm 988} & {\rm 2} & {\rm 11} \\ {\rm 256} & {\rm 7} & {\rm 7} & {\rm 1}, \\ {\rm 493} & {\rm 14} & {\rm 7} \\ {\rm 1,412} & {\rm 2} & {\rm 1} & {\rm 0} & {\rm 6} \\ {\rm 10} & {\rm 4} & {\rm 891} & {\rm I} & {\rm 6} & {\rm 4} \\ {\rm 891} & {\rm I} & {\rm 6} & {\rm 4} & {\rm 6} \\ {\rm -} & {\rm -} & {\rm -} \end{array}$	Cost. Cost per per serie. £ £ 6 6. 265 17 3 0 178 12 0 10 7 635 2 210 10 206 14 0 105 11 2 387 1 6 1 1 — — — — — — — —	Accesses Cost, per weak \$\$\$ 200 6.10 \$\$\$\$ 200 6.10 \$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	Coast. Contexp patients 6 & Accept 332 18 11 377 3 2 224 12 9 282 16 1 829 2 7 3 134 2 7 82 4 1,069 3 0 1 13 3,024 8 12 3 7 7
Name of Medical Superintendent	R. C. Allen G. Pym 287 2 0	J. A. Stirling. J. L. Feather. 428 3 9			t. Graham. Wakerley. 0 0		N. Kennedy W. B. Bunting 231 0 0	C. H. Latham J. Spencer 313 0 0	J. A. Watt H. S. Askow 173 11 0	H. L. Barker. E. Godfrey. 83 8 0	T. Fentem. B. G. Cadge. 242 5 0

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Shardlow Hospital District.

			SMA	LL X.		RLET VER.	DIPI	ITH-	V (2122	ERIC ER.	TOT	ALS.
DISTRICT.	Estimated Population, 1932,	No. notified.	Removed to Hospital.	No. notified.	Removed to Hospital.	No. notified.	Removid to Hospital.	No. notified.	Removed to Hospital.	No. notified.	Removed to Hospital.	
Alvaston and Boulton U. Long Eaton U. Shardlow R.		$3851 \\ 22930 \\ 39540$	111	111	4 80 71	3 75 55	4 1 19	$2 \\ 1 \\ 16$	111	111	8 81 90	5 76 71
TOTALS		66321	-	-	155	133	24	19	-	-	179	152

Repton Hospital District.

Ashbourne R. (certain Parishes) Repton R Sudbury R	2862 18660 2563	111	111	2 17 —	1 10 —	2 11 2	1 9 2	111	111	4 28 2	2 19 2
TOTALS	24085	-	-	19	11	15	12	-	_	34	23

Haddon Hospital District.

Bakewell U.	 3051	-	-	7	7	-	_	5	5	12	12
Baslow U	 857	-	-	-	-	-	-	-	-	-	
Bonsall U.	 1179	-		-		-	-	-	-		-
Matlocks U.	 10060		-	2	2	5	3			7	5
North Darley U.	 4354	-	-	11	6	-	-		-	11	6
South Darley U.	 740		-	-	-		-	-		1	
Bakewell R.	 18300	-	-	6	6	24	24	1	1	31	31
TOTALS	 38541	-		26	21	29	27	6	6	61	54

High Peak Hospital District.

New Mills U. Chapel R Glossop Dale R. Hayfield R.	 $\begin{array}{r} 8514 \\ 17730 \\ 3919 \\ 4263 \end{array}$	1111	1111	3 9 8 3	3 6 2 3	4 6 	4 6 	1	1111	$\begin{array}{c} 7\\16\\8\\3\end{array}$	7 12 2 3
TOTALS	 34426	-	-	23	14	10	10	1	-	34	24

Buxton Hospital District.

Buxton (Boro')	15100	-	-	6	6	11	10	1	1	18	17
----------------	-------	---	---	---	---	----	----	---	---	----	----

MATERNITY HOMES.

The County Council have provided a Maternity Home at Ashbourne and have contracted with the Chesterfield Corporation for the use of the Chesterfield Maternity Home for in-patient accommodation for County cases and for the use of the Ante-natal Clinic to be run under the clinical charge of the County Medical Staff for patients living in the County area surrounding Chesterfield and have an agreement with the Chesterfield Corporation embodying the following terms :—

1. The County Council to pay the Corporation an annual sum of $\pounds 225$ to include the use of the ante-natal clinic for one daily session per week; the County Council to pay to the Corporation the sum of $\pounds 1$ 1s. 0d. for each additional daily session over one per week; the Corporation to provide the nurses and equipment for the ante-natal clinic, and that the Council's Medical Officer be in charge when the session is used for County cases.

2. The County Council to pay to the Corporation £3 3s. 0d. per week for each County patient admitted to the Maternity Home.

3. The County Council to guarantee the Corporation a minimum receipt of $\pounds 945$ per annum under item (2), i.e., 150 patients per annum.

Ashbourne.—During the year 1932, 126 cases were admitted to this Home. Of these, 113 were delivered by midwives and 13 by doctors. Six cases were attended on the District by the Home Staff.

During the financial year ended March 31st, 1933, the number of patients admitted to this Home was 147, the percentage of beds occupied being 63.4. The gross cost during that year was $\pounds 1,682$ (including $\pounds 577$ for repayment of loan and interest and other capital charges). The sum of $\pounds 695$ was received as fees from patients, leaving a net cost to the County Council of $\pounds 987$.

Chesterfield.—During the year 1932, 233 cases were admitted to this Home from the County, of whom 71 were normal cases paying the full fee.

Heanor.—This Maternity Home of 7 beds is run by the Heanor Nursing Association. The building was erected by public subscription and is not supported by grant either from the County Council or the Local Authority. The County Council have no agreement for the use of beds at this Institution.

Ilkeston.—The Municipal Maternity Home in Park Avenue contains 9 beds. The Medical Officer of Health of Ilkeston is the Medical Superintendent: Dr. A. Dobson is the Physician. Practitioners may send in cases by arrangement. The staff consists of a Matron, Sister, and two Nurses, and the Home is recognised as a Training Centre by the Central Midwives Board. The Corporation is the Maternity and Child Welfare Authority for the area and the County Council have no agreement for the use of beds at this Institution.

Nightingale Home.—During the year 1932, 2 cases were admitted to this Home from the County area, under the Agreement between the County Council and the Authorities of the Home.

Women's Hospital, Derby.—During 1932, 10 cases were admitted, 3 of which were cases of Puerperal Fever.

Wirksworth Cottage Hospital.—55 cases were admitted to this Hospital during the calendar year 1932. During the year ended March 31st, 1933, 53 cases were admitted and 17 were treated in the District. Of the 53 cases in the hospital, 43 were delivered by midwives and 10 by doctors; of the other 17 cases, 12 were delivered by midwives and 5 by doctors. The cost to the County Council was £34 10s. 0d.

At **Ashbourne** and **Chesterfield**, accommodation is provided for unmarried mothers, but for the first confinement only. For subsequent confinements the unmarried mother can be provided with accommodation at most of the Public Assistance Institutions.

Public Assistance Institutions.

The following Table shews the number of beds at each of the Public Assistance Institutions and the number of cases accommodated in them during 1932 :—

		Cases	Average stay.	Case	s delivered.	Occasions Medical Aid
Institution.	Beds.	admitted.	(days).	Drs.	Midwives.	sought.
Ashbourne	2	3	46	_	3	_
Bakewell	3	24	14	4	18	9
Belper	3	6	21	1	5	1
Chapel-en-le-Frith	2	6	10	1	4	. 1
Chesterfield	24	42	14	5	37	12
Glossop	2	1	14	1		
Hayfield	0	1	21	1		
Shardlow	4	6	21	-	6	2
TOTALS	42	89	-	13	71	25

TUBERCULOSIS HOSPITALS.

Four hospitals for the accommodation of cases of tuberculosis are maintained by the County Council, namely :---

- 1. Walton Sanatorium.
- 2. Penmore Pavilion.
- 3. Bretby Hall Orthopædic Hospital.
- 4. Whitworth Hospital.

At Walton Sanatorium, accommodation is provided for 124 patients, *i.e.*, 74 beds for males and 50 for females, with an additional ten shelter beds for use during the summer time.

The Pavilion at Penmore provides accommodation for 14 females suffering from advanced pulmonary tuberculosis, with four additional shelter beds for use during the summer time.

Bretby Hall has 147 beds namely 65 for surgical tuberculosis in children, 32 for adult patients of both sexes suffering from surgical tuberculosis, and 50 for non-tuberculous cripples of both sexes.

Whitworth Hospital has a detached block of six beds for the accommodation of males suffering from advanced pulmonary tuberculosis.

Further information concerning the work at these Institutions during the year will be found on pages 97–127.

ORTHOPÆDIC HOSPITALS.

Reference to Table XIII. shows the Voluntary Hospitals in the County with orthopædic departments.

The County Council has its own Orthopædic Hospital at Bretby where, in addition to orthopædic cases of a tuberculous nature, there is accommodation for 50 orthopædic cases of non-tubercular origin.

Run in conjunction with Bretby Hall and functioning in the capacity of out-patient departments are nine orthopædic clinics, which are in charge of the resident medical superintendent at Bretby. A list of these is given on pages 52-53 of the Annual Report for 1930, and amendments since the publication of that Report are given on page 36 of this Report.

PUERPERAL FEVER AND PUERPERAL PYREXIA HOSPITAL ACCOMMODATION.

Full particulars of the County Council's arrangements under the Puerperal Fever and Puerperal Pyrexia Regulations, 1926, for the treatment of these conditions were set out in the Annual Report for 1930, pages 54 and 62-64.

OPHTHALMIA NEONATORUM HOSPITAL ACCOMMODATION.

Beds are available as required for the accommodation of the mother as well as the child at the Derbyshire Royal Infirmary, Derby.

AMBULANCE FACILITIES.

(a) FOR INFECTIOUS CASES.—Ambulances for the conveyance of patients suffering from infectious diseases are provided in connection with the isolation hospitals; details are given in the Annual Report for 1930, pages 38 and 39.

(b) FOR NON-INFECTIOUS AND ACCIDENT CASES.—The following Table gives the places at which ambulances are available in the County :—

Police Division.	Place where kept.	Telephone No.	Detailed Particulars of Ambulance.
Alfreton.	Morton.	Clay Cross 35,	Stonebroom and Morton Red Cross Ambulance is a Ford 22 H.P. 1927 model which will accommodate two stretchers.
	Alfreton, The Croft, King Street,	Alfreton 2 or 4	Alfreton U.D.C. Ambulance is a 23 H.P. model with accom- modation for 5 sitting patients and 2 stretchers.
ASHBOURNE.	Sudbury. The Hall Garage	Sudbury 1.	Sudbury Red Cross Ambu- lance is a Ford make, and has accommodation for two stret- chers.
	Ashbourne.	Ashbourne 58.	One 24 H.P. Ford to carry two patients.
BAREWELL AND MATLOCK.	Bakewell. Council Garage	Bakewell 4 or 70.	Bakewell Red Cross Am- bulance is a Ford make and has accommodation for two stret- chers.
	Matlock. Town Hall	Matlock 1 or 7.	Matlock Red Cross Ambulance is a Ford make. It is constructed to carry one stretcher case and attendants, and has every modern convenience.
BUXTON.	Buxton. Sanders Garage	Buxton 76.	Buxton Red Cross Ambulance is a 23 H.P. Austin, which has accommodation inside for two stretcher patients and two sitting patients in addition to the attendant. There is also room for a sitting patient beside the driver.
CHAPEL-EN-LE-FRITH.	New Mills. Hague Bar Road.	New Mills 154or 48.	New Mills Red Cross Am- bulance is a 25 H.P. Daimler, 1926 model which will accom- modate two stretcher cases and three sitting cases.
	Glossop.	Glossop 57.	Glossop Borough Police Am- bulance is a 20 H.P. Austin, 1924 model which will ac- commodate two stretcher cases

and four sitting cases.

TABLE XVI.

		34	
Police Division.	Place where kept.	Telephone No.	Detailed Particulars of Ambulance.
CHESTERFIELD.	Chesterfield.	Chesterfield 2222.	Chesterfield Borough Police Ambulance is a 21-H.P. Wol- seley and has accommodation for two stretcher cases, assist- ants and passengers. It is fitted
	Bolsover.	Bolsover 5.	with every modern convenience. The Bolsover Urban District Council Ambulance is a 15-H.P. Morris Commercial. It is fitted with two stretchers and has accommodation for assistant and passengers. This is an up-to-date ambulance.
DERBY AND BELPER.	Derby. Fire Station.	Derby 1.	Derby Borough Fire Station Ambulance is a 22-H.P Ford. which carries two stretcher
	Derby. 146 Burton Road	Derby 1361,	bulance is a 14.9 H.P. Morris Commercial which has accommodation for one stretcher patient, but could
	Long Eaton. Fire Station Tamworth Road	Long Eaton 21.	 carry two in an emergency. The Long Eaton Urban District Council Ambulances are (1) 20-H.P. Armstrong Siddeley with accommodation for two stretcher cases. (2) 22-H.P. Chevrolet which has accommodation for three stretcher cases.
	Spondon.	Spondon 2200.	The British Celanese Com- pany's Ambulance is a 22-H.P. Morris with accommodation for two stretcher cases.
	Nottingham.	Nottingham 41541	
Eckington.	Creswell. Institute Garage	Creswell 8.	Creswell Red Cross Ambulance is a 25-H.P. Ford with ac- commodation for one stretcher case, two sitting cases and attendant.
	Worksop.	Worksop 128.	The Worksop St. John ambulances are— (1) 24-H.P. Sunbeam which will accommodate two stretcher cases or eight sitting cases and attendant. (2) 22-H.P. Studebaker with similar accommodation to No. 1.
	Sheffleld.	Sheffield 23221.	No. 1. Sheffield Corporation have three 21-H.P.Morris Commercial Ambulances. Each ambulance has accommodation for two stretchers, or one stretcher and four sitting cases, or eight sitting cases.

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Police Division.	Place where kept.	Telephone No.	Detailed Particulars of Ambulance.
	Dronfield.	Dronfield 26 and 12.	Dronfield Urban District Council Ambulance is a 30-H.P. Hudson, with accommodation for one stretcher case and
	Creswell.	Creawell 14.	attendant or four sitting cases. Messrs. T. and A. Gilbert'. Ambulance is a 23-H.P. Over land which will accommodate two lying cases and attendant of one lying and two sitting cases with attendant.
LKESTON.	llkeston. Town Hall	Ilkeston 161. and 36	
	Ripley.		The Ripley Urban Distric
	Ripley.	Ripley 60.	Council Ambulance is horse drawn. Britain Colliery Ambulance is a 28-H.P. Buick with accom modation for two stretches
REPTON AND GRESLEY.	Swadlincote.	Swadlincote 7310.	cases, and is available when no required for colliery cases. The Swadlincote Urban District Council have a horse drawn ambulance which will accommodate four sitting and
	Gresley.	Swadlincote 7153.	two stretcher cases. Gresley Colliery Ambulance is a 20-H.P. G.M.C. with accommodation for eight sitting and four stretcher cases.
	Burton. Fire Station	Burton 2222.	Burton Corporation Am- bulance is an 18-H.P. Guy with accommodation for two stret- cher cases and four or five sitting cases. It is equipped with al modern appliances.

CLINICS AND TREATMENT CENTRES.

SCHOOL CLINICS.

Full particulars of the School Clinics were given in my Annual Report for 1930, pages 75-78.

The following alterations were made in 1931 :---

(1). Minor Ailment Clinics.—An additional Minor Ailment Clinic was opened at Staveley Middlecroft School, on Wedresdays, at 2.0 p.m.

(2). Ear, Nose and Throat Clinic.—Chesterfield Clinic is used for operations on the first as well as the second, third and fourth Tuesdays in each month. At Chinley, the Clinic is opened on the second Wednesday in each month for operations instead of the first Tuesday. Derby Clinic has been discontinued on the second Wednesday in the month. (3). Dental Clinics.—The Dental Clinic at Bakewell Liberal Club has been discontinued. An extra Clinic at Matlock, held on the fourth Monday in each month, has taken its place.

(4). Orthopædic Clinics.—The Bakewell and Belper Clinics have been replaced by an Orthopædic Clinic at Matlock.

The following alterations were made in 1932 :---

(1). Minor Ailment Clinics.—An additional Minor Ailment Clinic has been opened at Derby from 9.30 a.m. to 12 noon on the first and third Saturdays in each month. The Long Eaton Minor Ailment Clinic is now held on the second and fourth Saturday mornings only.

(2). Orthopædic Clinics.—Owing to the decreased number of attendances at the Alfreton Clinic it was found desirable to open it only once weekly instead of twice.

(3). Ultra-Violet Light Clinics.—There is a small Ultra-Violet Light Clinic held at the Central Office, Derby. It has only been customary to use it during the winter months. During the current year it has not been used at all on account of alterations to the building.

TUBERCULOSIS DISPENSARIES.

A list of the Tuberculosis Dispensaries was given on page 79 of the Annual Report for 1930. The Derby Dispensary which was closed in June, 1931, when the premises were required for office accommodation by the Bridges and Highways Department, was opened again in December, 1932. After the premises were quitted by the Highways Department, they were re-decorated throughout and extended so as to house an up-to-date X-Ray installation, the old installation at the County Offices being scrapped.

VENEREAL DISEASES CLINICS.

The County Council maintain Venereal Diseases Clinics at the Chesterfield and North Derbyshire Royal Hospital and the Derbyshire Royal Infirmary, Derby. The number of beds provided for in-patient treatment of the disease at these two Institutions is as follows :—

	Male	.8	Females.	Total.
Chesterfield & North Derbyshi	re			
Royal Hospital		1	1 '	2
Derbyshire Royal Infirmary .		2	2	4

Clinics are held at these Institutions at the following times :---

TABLE XVII.

	Males.	Females.
Chesterfield & North	Tuesdays,	Tuesdays,
Derbyshire Royal	Hospital 4.30 to 6.30.	2.0 to 4.0.
	Fridays,	Fridays,
	2.30 to 4.30.	11.0 to 12.30.

Derbyshire Royal Infirmary

Mondays, 6.0 to 8.0. Wednesdays, 6.0 to 8.0. Saturdays, 11.30 a.m. to 1.30 p.m.

Suphilis Gonorrhea Soft Chancre Total

Mondays, 3.0 to 5.0. Thursdays, 6.0 tc 8.0.

The number of new cases attending the Venereal Diseases Centres during the year 1932 and the diseases for which they required treatment are as follows :—

TABLE XVIII.

		Sypreero.	crontor made.	soft oncentere.	T Ottav.
Burton		13	11		24
Chesterfield	·	94	103		197
Derby		90	118	. 1	209
Manchester		6	7		13
Mansfield		18	22	2	42
Nottingham		14	64		78
Salford			3		3
Sheffield		5	8		13
Stockport		6	1		7
Total		246	337	3	586
				The second second	

This total of 586 compares with 489 for last year, but includes Returns from 9 Centres instead of 5.

The details of the cost of the scheme are as follows :---

TABLE XIX.

Treatment.					£
Out-patients				 	 2,520
In-patients				 	 168
Salvarsan sul	ostitutes,	Drugs,	, etc.	 	 379
Travelling ex	penses-	Doctor		 	 36
Do.	_	Patient	s	 	 75
Printing, Pos	stages, et	c.		 	 17

							er Services.	Othe
93							Propaganda	
. 950					inations	Examin	Pathological	
4,238				Cost	Gross			
	other	for	done	work	hological	Patho	Receipts for	
421						ies	Authorit	
£3,817				ost	Net C			

The cost per attendance, including both in-patients and outpatients, at Chesterfield, Derby and Nottingham, worked out as follows :—

		s.	d.
Chesterfield	 	2	10
Derby	 	1	9
Nottingham	 	1	11

During 1932, the number of specimens submitted by the General Practitioners was 2,452, whilst in 1931, 1930, 1929, 1928 and 1927, the number of specimens submitted was respectively 1,709 1,613, 1,629, 1,545, and 1,423.

Details of the examinations made during 1932 are as follows :---

Origin of Specimen.	Spirochætes.		Wassermanns		Gonococci.		Other Examinations.		
	Pos.	Neg.	Pos.	Neg.	Doubt'l	Pos.	Neg.	Pos.	Neg.
Derbyshire Derby Borough Burton-on-Trent	3	1	326	1710	115	61	230	2	4

TABLE XX.

Thirteen medical practitioners possessing the necessary qualifications and experience are entitled to receive free supplies of salvarsan and salvarsan substitutes for use within the County. Four other medical practitioners with this qualification have left the County. These drugs are kept at the Central Office and issued

Doses.	Novarseno- billon.	Stabilarsan.	Bismostab.	Total.
0.15 gm.	 36			36
0.30 gm.	 69			69
0.45 gm.	 84	30		114
0.60 gm.	 72	10		82
0.75 gm.	 6			6
1 c.c.	 •••		15	15
Totals	 267	40	15	322

as required. During the year 1932 a total of 322 doses were supplied as follows :---

MATERNITY AND CHILD WELFARE.

MIDWIVES ACTS, 1902-1926.

NUMBER OF MIDWIVES.—At the end of 1932 there were 283 midwives on the County Roll. 252 were trained midwives and of these, 78 were District Nurse Midwives.

It will be noted that there has been a fall of 17 in the number of midwives on the Derbyshire Roll during 1932. In that this fall is entirely amongst untrained midwives it is all to the good, but it is very necessary, particularly in these days when many practitioners are showing no great anxiety to attend normal cases, that the supply of midwives shall be kept up and it was to be hoped that that supply would be kept up by recruitment of trained midwives, but that hope is not being fulfilled. Looking back through records as far as 1924, I find that the total number of midwives has fallen from 363 to 283, the fall being entirely in the number of untrained midwives, namely 111 to 31, whilst the number of trained midwives in 1932 is as it was in 1924, namely 252. However, in 1925, the number of trained midwives was 262 and rose in 1929 to 288, but since that time it has fallen to its 1924 level. Whether the failure to keep up the supply of trained midwives to the 1929 level is due to the increased duration of the training course now necessary, coupled with the lack of increased remuneration, or whether it is due to the change brought about by removing the powers of the Local Supervising Authority to train midwives for areas where they were needed is a question for consideration but to which at the moment I have no definite answer. although I think both factors are operating.

The following changes of midwives took place during the year :--

Deaths of Midwives	4
No. of trained midwives who have left the County, of	
whom 8 were District Nurse-Midwives	32
No. who have done temporary duty for District nurses	15
No. of new Midwives enrolled	23

Deaths following Child-Birth.—During 1932, information was received concerning 4i women who died following child-birth. The causes of death were as follows :—

Puerperal Fever		 	 6
Toxæmia		 	 8
Kidney Conditions		 	 2
Hæmorrhage		 	 5
Cardiac Conditions		 	 5
Pulmonary Embolis	m	 	 3
Respiratory Condition	ns	 	 6
Various		 	 6

these deaths, 22 occurred in hospitals or maternity homes.

Records Received.—The following Table gives the records received, the cases of Puerperal Fever and Puerperal Pyrexia in the practice of midwives only, and all cases of Ophthalmia Neonatorum, whether in the practice of doctors or midwives, with the corresponding figures for previous years :—

	1925	1926	1927	1928	1929	1930	1931	1932
Records received-								
Medical Help	1414	1565	1575	1675	1856	1918	1645	1716
Still Births	178	127	126	136	160	140	146	134
Deaths of Children	32	26	36	34	46	59	48	65
Deaths of Mothers	2	2	1	2	9	7	3	9
Laying-out the Dead	15	14	13	21	15	22	31	18
Liability to be a								-
source of infection	44	45	59	38	107	130	84	74
Notification of Artifi-				1				
cial Feeding (within					-		1000	
10 days)	85	96	73	80	84	116	126	109
to anyoy in the								
Puerperal Fever-								-
Midwives' cases	19	25	12	13	21	20	17	11
Puerperal Pyrexia—				1				
Midwives' cases		15	34	26	46	44	36	27
Ophthalmia Neonatorum			0-		1		0	
ALL Cases	47	53	66	57	56	65	46	57

The following is an analysis of the 1,716 Medical Help records received during 1932 :---

Records	pertaining to the mot	her :			
	Abortion or Miscarriag	e.		***	101
	Varicose Veins				6
	Ante-partum Hæmorrh	age .			65
	Deformed Pelvis				7
	Discharge during Preg	nancy			9
	Organic Disease				7
	Toxæmia				72
	Retarded Labour				373
	Abnormal Presentation	i .			131
	Retained Placenta				52
	Lacerated Perinæum				396
	Post-partum Hæmorrh	age .			39
	Rise of Temperature				53
	White Leg				3
	Inflammation of the H	Breast.			5
	Fits or Convulsions				3
	Puerperal Insanity				1
	Prolapse of Cord				8
	Prolapse of Uterus				3
	Still Births				27
Records	pertaining to the child :	_			
	Injuries or Malformati				33
	Dangerous feebleness				75
	Eyes, discharging, etc.				72
	Skin Eruption				7
	Navel				1
	Convulsions				13
	Miscellaneous				154
spections					
Inspectio	on Forms marked "Go			•••	781
"		isfact	10 C	•••	51
"		lifferen	nt	•••	3
"	,, ,, "Ba			•••	
	ther inspections and v			•••	285
NO. 01 1	Midwives out when visi				286
			Total		1,406
					-

In

	Midwives suspend	led from	practice f	or being	in cont	act with :-
--	-------------------------	----------	------------	----------	---------	-------------

Puerperal F	ever		 	 4
Puerperal P	yrexia		 	 20
Pemphigus 1	Neonat	torum	 	 1
Diphtheria			 	 2
Ophthalmia	Neona	atorum	 	 3
Phlegmasia	Alba]	Dolens	 	 1
Measles			 	 3
Mumps			 	 1
Septic finger	(self)		 	 1

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Special Letters of Warning.—Nine special letters of warning were sent to midwives in the County for breaking the rules of the Central Midwives Board.

One midwife, working in Nottinghamshire and Derbyshire, was, by agreement with this County Authority, brought before the Nottinghamshire Local Supervising Authority and severely censured by them for an offence committed in their County, and having committed a similar offence shortly afterwards in this County was, by agreement with the Nottinghamshire Authority, taken before the Central Midwives Board by Derbyshire. The case was found proved by the Board who severely censured her.

Puerperal Fever.—The following table shews the number of cases of Puerperal Fever which occurred in the practice of midwives during 1932 :—

	Number of Midwives.	Number of Confine- ments.	Puerperal Fever Cases.	Cases per 1,000 Births.
Bona-fide Midwives	31	748	1	1.33
Trained Midwives, including District Nurse-Midwives	252	5405	10	1.85
	283	6153		1.78

Puerperal Fever and Puerperal Pyrexia.—The following table shews the total number of cases of Puerperal Fever and Puerperal Pyrexia notified to me during the year 1932 and the case rate from each of these diseases per 1,000 births :---

Number of bir		ole County. 10,127	M.C.W 8,(. Area.)11	
	No. d	of Cases.	Case rate per 1,000 births.		
Disease.	Whole County.	M.C.W. Area.	Whole County.	M.C.W. Area.	
Puerperal Fever Puerperal Pyrexia	$\frac{28}{46}$	26 41	2.76 4.54	$3.24 \\ 5.11$	

The number of cases admitted to hospitals under the County Council Puerperal Fever and Puerperal Pyrexia Scheme during 1932 was as follows :---

Derbyshire Royal Infirmary	 10
Jessop Hospital for Women	 8
Burton upon Trent General Infirmary	 1
High Peak Isolation Hospital	
Victoria Hospital, Worksop	
Derbyshire Hospital for Women	 3

A Consultant's opinion was requested in 8 cases, and was immediately provided.

Consultants.—The names of the Consultants and the Centres from which they work appear at the beginning of this Report under the heading "Public Health Staff."

Ophthalmia Neonatorum.—The incidence of Ophthalmia Neonatorum during the year and the results o[°] treatment are set out in the following table :—

	Cases	Treated.		M.S. R. G.	Total	No.of
Notified.	At Home.	In Hospital.	Vision unimpaired	Vision impaired.	Blind- ness.	Deaths.
57	45	14	56	_		1

TABLE XXI.

NUMBER OF CALLS FOR MEDICAL AID AND AMOUNT PAID IN CLAIMS.

	9					0	0	0	9	0	0	0	0	3	0	3	6	0	0
Cost.	à	1	1	1	I	0	0	0	15	4	0	16	00	10	4	6	01	0	0
Net	3					211	154	201	266	271	228	249	614	663	769	1,138	899	796	1,087
i t	d.					0	0	0	9	9	0	0	0	~	6	0	0	0	0
ive		1	1	I	1	0	0	0	01	-	0	0	II	15	-	~	14	0	0
Amount Received	41		1	1	-	38	84	99	59	96	212	217	144	254	243	321	554	478	294
	d.	il.				0	0	0	0	9	0	0	3	9	6	3	6	0	- 0
unt id.	.8	1	1	1	1	0	0	0	18	2	0	16	14	10	2	12	16	0	0
Amount Paid.	3	-	1	-	-	249	238	267	325	366	440	466	758	918	1,012	1,459	1,453	1.274	1,381
Claims Paid.		1	1	1	1	131	138	141	181	233	265	281	486	572	642	947	920	737	868
Claims Received		1	1	1	1	1	1	1	202	250	286	301	518	610	619	986	953	776	912
f Medical calls.		69-9	8-07	8-37	8-51	9-34	10-20	11-40	12.10	12.50	14.70	15-03	19-42	20-93	21-22	27-73	27-86	26-94	27.88
Help o summoned		704	818	764	793	888	1,250	1,249	1,229	1,240	1,353	1,414	1,565	1,575	1,675	1,856	1,918	1,645	1,716
Cases attended by Midwives.		10.514	10,139	9,130	9,321	9,512	12,222	10,950	10,168	9,867	9,199	9,408	8,058	7,523	7,892	6,692	6,883	6,105	6,153
Births in whole County.		13.791	13,109	11,831	12,103	11,838	15,572	14,417	13,095	12,681	12,615	12,491	11,845	11.194	11,112	10,394	10,562	9,231	9,000
Year.		1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	*1930	1931	1932

*-In September, 1930, the Borough of Chesterfield became a Local Supervising Authority and after that year the figures do not include those for the Borough of Chesterfield.

N.B.—The figures on the left-hand side of the Table refer to the Calendar years ending December 31st, whilst the figures on the right-hand side refer to the financial years ending in the following March.

Maternal Mortality.—The maternal mortality rate for the County (excluding the Borough of Chesterfield) for the year 1932 was 4.00 per thousand births.

The following Table gives the Maternal Mortality rate in the County since 1916 :---

Year	Deaths from Puerperal Fever.	Rate per 1000 Births	Deaths from other acci- dents and Diseases of Pregnancy & Parturition	Rate per 1000 Births.	Total.	Rate per 1000 Births	No. of Births.
1916	19	1.45	45	3.43	64	4.88	13,109
1917	14	1.18	33	2.79	47	3.97	11,831
1918	10	.82	27	2.23	37	3.05	12,103
1919	15	1.26	40	3.38	55	4.64	11,838
1920	22	1.41	45	2.89	67	4.30	15,572
1921	12	83	-33	2.29	45 .	3.12	14,417
1922	17	1.30	35	2.67	52	3.97	13,095
1923	18	1.42	46	3.62	64	5.04	12,681
1924	17	1.34	32	2.23	49	3.87	12,615
1925	17	1.36	31	2.48	48	3.84	12,491
1926	18	1.52	36	3.04	54	4.56	11,845
1927	16	1.43	40	3.57	56	5.00	11,194
1928	21	1.89	27	2.43	48	4.32	11,112
1929	18	1.73	21	2.02	39	3.75	10,394
1930	18	1.70	. 26	2.46	44	4.16	10,562
1931	18	1.95	24	2.60	42	4.55	9,231
1932	13	1.44	23	2.56	36	4.00	9,000

TABLE XXII.

As the Corporation of Chesterfield became the Local Supervising Authority for their own area in 1930, the figures for this Borough are not included since then in this table but the total figures including Chesterfield are given under the heading 'Vital Statistics' on page 14.

Compensation to Midwives.—During the year 1932, five claims were received for compensation to midwives for loss of practice during suspension, and the amount paid was £15 6s. 6d.

Payment of Doctors' Fees under Section 14(1) of the Midwives Act.—During the financial year ended March 31st, 1933, 912 claims were received from medical practitioners. Of these, 868 were passed for payment amounting to $\pounds 1,381$, the remainder being disallowed as not complying with the conditions laid down by the Midwives' Acts and the Ministry of Health or being cancelled by doctors previous to payment. Amount refunded for the same period totalled $\pounds 294$.

Provision of Free Milk.—During the financial year ended March 31st, 1933, 163 applications for free milk were received. On these, 5 were not granted. The expenditure was £31–6s. 11d. for fresh milk and £16–14s. 5d. for dried milk.

NURSING HOMES REGISTRATION ACT.

During the year 1932, two applications for registration of premises were received. One was refused on account of unsuitability of premises, one was granted. The keeper of the one which was granted had applied for the registration of fresh premises.

At the end of 1932 there were 12 Homes on the County Register, as follows :----

General Nursing Homes	 3
Maternity Homes	 4
Mixed General and Maternity Homes	 5

MEDICAL TREATMENT OF CHILDREN UNDER FIVE YEARS OF AGE.

There is available for children coming within the scope of the Child Welfare Committee, the treatment of minor ailments, ear, nose and throat conditions, eye conditions, dental conditions and orthopædic treatment for both in-patients and out-patients—the in-patients being treated at Bretby Hall Orthopædic Hospital.

The number of children coming for such treatment during the year 1932 was as follows :---

Ear, nose and thro	 	129		
Eye conditions			 	25
Dental conditions			 	838
Orthopædic treatm	ient-	-		
In-Patients			 	41
Out-Patient	s		 	100

BOARDED-OUT CHILDREN.

The supervision of boarded-out children is being carried out on behalf of the Public Assistance Committee by the Maternity and Child Welfare staff. Except in the sparsely populated north-west area of the County, where the work is done by the Health Visitors, the service is in the hands of the Regional Inspectors of Midwives. In this connection, 1,019 visits have been paid to 108 children.

HEALTH VISITING IN THE HOMES.

A summary of the work done by the Health Visitors during 1932 will be found in Table XXXIX., pages 129–130.

INFANT WELFARE CENTRES.

The Maternity and Child Welfare area of the County comprises the whole of the Administrative County with the exception of the four boroughs, Buxton, Chesterfield, Glossop, and Ilkeston and at the end of 1932 there were 47 Centres, 17 in Urban Districts and 30 in Rural Districts. Most of the Centres are under the supervision of a doctor, and a health visitor is in attendance at each session.

Youlgreave and Ockbrook are Voluntary Centres which are attended by County Health Visitors.

INFANT WELFARE CENTRES.

	Frequency		Aver Attend per Se	ance	No. Atta for F	irst	Present arrangements for medical supervision.	
Address.	Frequency of Sessions.			Chil- dren.	Expect- ant Mothers.	Chil- dren.		
JRBAN DISTRICTS.					1. A.			
Wesleyan Church,	Fortnightly	2nd and 4th	Nil	65.81	Nil	71	Dr. Pooler,	
Somercotes School Clinic, Grange St., Alfreton	Weekly	Mons., 2—4.30 Tuesday, 2—5		35.64	Nil	136	Fortnightly Dr. Wilkes, Fortnightly	
Congregational Assem- bly Room, Riddings	Fortnightly	1st & 3rd Mons., 2-4	0.20	49.20	1	77	Dr. Pooler, Fortnightly	
St. John's Rooms	Weekly	Wednesday, 12-4	1.23	36.82	25	105	Dr. Pierce, Fortnightly	
BAKEWELL. The Square	Do.	Thursday, 2-4	0.08	16.88	1	25	Dr. Bryan, Fortnightly	
BELPEB. Green Hall	Do.	Thursday, 10.30—4	0.12	31.13	2	169	Dr. Newton, Weekly	
Bolsover. Bainbridge Hall, New Bolsover	Fortnightly	2nd & 4th Thurs., 2.30-5	0.04	19.61	1	35	Dr. Pooler, Fortnightly	
CLAY CROSS. The Vicarage	Weekly	Tuesday, 1.30—4	0.68	42.93	9	162	Dr. Pooler, Weekly	
DRONFIELD. Cong. Chapel	Do.	Monday, 1-4	0.04	28.54	2	72	Dr. Burke, Monthly (1st)	
HEANOR. School Clinic	Do.	Wednesday, 1-4	0.42	62.35	9	226	Dr. Newton, Weekly	
LONG EATON. 4, Notts. Road	Twice Weekly	Mon. & Thurs., 2.30-4	0.11	51.34	Nil	272	Dr. Newton, Mondays	
†Wes. Schoolroom, Vic- toria Street, Sawley	Fortnightly	2nd & 4th Tuesdays, 2-4	Nil	19.06	Nil	30	Weighing Centre	
MATLOCK. Dean Hill House	Weekly	Thursdays, 2-4.30	0.06	33.40	2	151	Dr. Wilkes, Fortnightly	
New Mills. St. James' Schoolroom	Do.	Thursdays, 2-4	Nil	30.32	Nil	62	Dr. Pemberton Fortnightly	
RIPLEY. Old Schools, Outram Street	Do.	Monday, 10-4	1.02	86.33	13	117	Dr. Macdonald, Weekly	
Bethel Chapel Marehay.	Do.	Thursdays, 10—12	1.24	54.56	8	75	Dr. Purce, 1st & 3rd	
SWADLINCOTE. A'exandra Road	Do.	Monday, 2—6	Nil	27.06	Nil	157	Dr. Cochrane, Monthly	
WIRKSWORTH. Parish Room	Do.	Thursday, 2-4.30	Nil	22.16	Nil	50	Dr. Purce, 1st & 3rd	

† Sawley, closed October, 1932.

	Emanunar	Dan and	Ave Attend per Se		No. Att for F Tim	irst	Present	
Address	Frequency of Sessions.	Day and time of Meeting.	Expect- ant Chil- Mothers dren.		Expect- ant Chil- Mothers dren.		arrangements for medical supervision.	
RURAL DISTRICTS.								
BAKEWELL. Tideswell Wesleyan Hall.	Fortnightly	1st & 3rd Thursdays,	1.13	22.82	8	30	Dr. Bryan, Fortnightly	
Youlgreave Village Hall.	Do.	1-5 2nd & 4th Wednesdays, 2-4	Nil	10.17	Nil	15	Weighing Centre	
BELPER. Duffield. Parish Room.	Weekly	Monday, 2—4	Nil	21.74	Nil	33	Dr. Purce, 2nd & 4th	
BLACKWELL. Shirebrook. Cliff House.	Do.	Wednesday, 2-4	Nil	$52 \cdot 66$	Nil	188	Dr. Wear,	
Pleasley. Primitive Methodist	Fortnightly	2nd & 4th Thursdays,	0.58	39.21	3	39	Weekly Dr. Wear, Fortnightly	
Chapel. Langwith.	Do,	2-4.30 1st & 3rd	1.39	64-43	6	65	Do.	
Miners' Institute. Tibshelf.	Do.	Mon., 3—5 1st & 3rd	Nil	29-83	Nil	32	Do.	
Church Room. Blackwell. Newton, Council School.	Do.	Ths., 2.30-4.30 1st & 3rd Mon., 1-3	0.04	33.32	1	43	Do.	
Hillstown.	Do.	2nd & 4th	0.04	47.68	Nil	65	Do.	
Miners' Welfare Inst. Pinxton. Prim. Meth. School,	Do.	Mon., 1-5 2nd and 4th Wednesdays	Nil	20.92	Nil	78	Do.	
South Normanton. Mount Tabor Chapel	Do.	11.0—1.0 2nd & 4th Tues. 1.30—4	Nil	27.66	Nil	98	Do,	
CHAPEL-EN-LE-FRITH. Chinley. *School Clinic	Do.	2nd & 4th Thursdays, 2-4	0.41	10.76	3	24	Weighing Centre	
CHESTERFIELD. Eckington. WesleyanSchoolroom	Weekly	Mon., 1 to 4	0.07	41.93	1	82	Dr. Morris, 1st & 3rd	
Barrowhill.	Do.	Wed., 2-4	0.61	42.32	4	95	Dr. Burke, 2nd	
Ebenezer Chapel Unstone.	Do	2nd & 4th	Nil	13.98	Nil	25	Weighing	
Wesleyan Church Staveley.	Do.	Tues., 2—4 Tuesday,	Nil	49.25	Nil	153	Dr. Wilkes,	
P.M. Chapel Heath. Holmwood Mission	Do.	1.30—4.30 Wednesday, 2.30—4.30	0.71	23.56	3	65	Fortnightly Dr. Pooler, Fortnightly	
Room Stonebroom. Church Institute	Do.	Monday, 10-12.30	0.02	26.64	1	67	Dr. Pooler, Weekly	
Grassmoor. P.M. School	Do.	Wednesday, 2-4	0.40	48.0 6	5	77	Dr. Pooler, Fortnightly	

* Opened Feb. 25th, 1932.

	E	Day and	Aver Attend per Se	lance	No. Att for F Tim	irst	Present	
Address.	of Sessions.	Frequency Day and f Sessions. time of Meeting.		Chil- dren.	Expect- ant Mothers	Chil- dren	arrangements for medical supervision.	
North Wingfield.	Weekly	Thursday, 2.30-4.30	0.45	49.29	7	95	Dr. Pooler,	
Miners' Welfare. Brimington.	Do.	Thursdays,	0.27	32.66	3	80	lst & 3rd Dr. Burke	
Church Hall Beighton.	Do.	2-4 Tuesday,	0.08	52.12	3	174	2nd & 4th Dr. Morris,	
C. of E. Schoolroom Killamarsh. Congregational Room	Do.	2—4 Wednesday, 2—4	0.27	46.96	2	104	2nd & 4th Dr. Morris, 1st & 3rd	
CLOWNE Clowne. P.M. Chapel.	Do.	Tuesday, 1.30—4	0.12	32.60	3	161	Dr. Wear, Fortnightly	
HAYFIELD. Hayfield. Wesleyan Methodist Church.	Fortnightly	2nd & 4th Tuesdays, 2-4	0.09	13.00	Nil	31	Dr. Lynch. Monthly.	
Norton. Dore. Abbeydale Hall	Do.	Wednesdays, 2-4.0	0.02	11.59	2	36	Dr. Morris, 2nd & 4th	
SHARDLOW. Sandiacre. Lenton Street School	Do.	2nd & 4th, Mondays, 2-4.15	Nil	52-23	Nil	100	Weighing Centre	
Draycott. Co-op. Stores Committee	Do.	2nd & 4th Wednesdays,	0.65	20.61	4	33	Weighing Centre	
Rooms Spondon. Wesleyan Chapel	Do.	1.30—4 1st & 3rd Tuesdays, 11—4.30	0.09	25.77	2	38	Dr. Hendry, lst & 3rd	
Melbourne. Cooks Institute.	Weekly	Wednesday, 10.15-5	0.28	27.65	1	39	Dr. Hendry, 1st & 3rd	

Maternity and Child Welfare Centres.—During the year a complete survey of the Infant Welfare Centres throughout the County was carried out and it was suggested that, according to the degree of adequacy of the accommodation and other circumstances, the scheme as a whole would function most effectively by grouping the Centres as "Primary," "Secondary," and "Weighing" Centres, defined as follows :—

1. PRIMARY CENTRES, where a full course of instruction in infant care should be given to mothers, and where medical advice on individual children should be available, and also where comprehensive courses of lectures can be given by the Medical and Nursing Staffs.

2. SECONDARY CENTRES, where Medical and Nursing Staff would be present, instruction being limited to occasional talks,

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where the facilities of the Centre permit it, and medical examination and individual consultations are available for each child.

3. WEIGHING CENTRES, which should be attended only by the Health Visitor. No medical examinations would be available and only very homely talks be given by the Health Visitors. Any child, however, attending a Weighing Centre should, if the Health Visitor so desired, be able to attend a "Primary" or "Secondary" Centre at which they could seek medical advice.

The suggestion was adopted and the Centres therefore classified as follows :----

- 1. PRIMARY CENTRES. Alfreton. Belper. Heanor.
- 2. SECONDARY CENTRES, Ashbourne, Bakewell; Barrow Hill, Beighton, Bolsover, Brimington, Dore, Eckington, Grassmoor, Hayfield, Heath, Hillstown, Killamarsh, Langwith,
- 3. WEIGHING CENTRES. Chinley. Clay Cross. Clowne. Draycott. Dronfield. Duffield. Melbourne.

Matlock. Shirebrook. Swadlincote.

Long Eaton. Marehay. New Houghton. New Mills. Newton. North Wingfield. Riddings. Sandiacre. Somercotes. South Normanton. Staveley. Tideswell. Wirksworth.

Ripley. Spondon. Stonebroom. Tibshelf. Unstone. Youlgreave. Pinxton.

It was recognised also that many of the Weighing Centres should, provided suitable accommodation were available, be changed to either "Primary" or "Secondary" Centres at the earliest possible moment.

The first thing that is apparent with regard to this grouping is that the six Primary Centres are not situated so that they can serve the whole County, for instance, there are none in the extreme north-east or north-west. The north-west part of the County is also lacking in the best type of Secondary Centre. Recognising also the difficulties of transport, I cannot at the moment see how to obtain a complete scheme of Primary, Secondary, and Weighing Centres in that area. However, an effort is being made to make New Mills a Primary Centre where at present there is no suitable accommodation. With regard to the north-east, here again it is necessary to have at least one, and if possible two Primary Centres —one should be at Staveley and the other at either Bolsover or Clowne.

The activities carried out at Primary Centres are as follows :--

- 1. Weighing of babies.
- 2. Advice from nurses.
- 3. Advice from doctors.
- 4. The treatment of a few minor ailments.
- 5. The sale of dried milk, cod liver oil emulsion and possibly a few simple remedies at low prices to poor mothers.
- 6. Group teaching—as health talks, lectures, etc.
- 7. Special classes, e.g., in sewing, cookery, home nursing, etc.
- 8. Special clinics, e.g., dental clinics, light clinics, remedial exercise clinics.
- 9. Ante-natal clinics.
- 10. Post-natal clinics.
- 11. Practical demonstration in making infants' clothes.
- 12. Lectures on the preparation and storage of food with demonstration of simple cooking with such apparatus as is usually found in the homes of the people.

Arrangements have also been made to give some of the lectures and demonstrations at evening sessions when the mothers will come without their babies.

The need for adequate accommodation for this will at once be recognised. It should also be recognised that at the moment it is impossible to contemplate a service of this sort except at Special Centres.

With regard to the staffing of a Primary Centre, it was considered essential that there should be a Medical Officer in charge with up-to-date knowledge of maternal and child welfare work and that she should be a full-time Officer who can not only attend the Clinics, but can follow up cases and see that what is taught at the Clinics is practised in the homes, and who should be available for giving lectures at whatever time it is found best to give them.

To enable this comprehensive programme to be carried out, a second full-time Woman Medical Officer was appointed with special qualifications in Maternity and Child Welfare work.

Voluntary Infant Welfare Centres.—During the financial year ended March 31st, 1933, 2 Voluntary Infant Welfare Centres received a Grant of £10 each from the County Council, namely :— Mickleover and Bradwell. Ante-Natal Scheme.—The following Table gives details as to the sessions and attendances at the various Ante-Natal Centres during 1932 :—

					Average	
	Clinic.	No. of Sessions.	First Visits	a Subsequent Visits.	ttendance of expectant mothers per Session.	Post Natal Visits.
Matlock		 23	67	95	7.05	19
*New Mills		 7	16	48	9.14	
Shirebrook	c	 38	243	419	17.42	16
Long Eat		 48	215	654	18.10	
Derby		 23	69	65	5.83	2
†Clay Cross	s	 7	44	67	15.85	3
Alfreton		 24	202	450	27.16	43
Swadlinco	te	 26	58	97	5.96	9
Staveley		 23	137	176	13.61	
Eckington		 23	54	49	4.48	9
Ashbourne		 15	135	174	20.60	
‡Chesterfiel	d	 38	202	297	13.13	8
		295	1442	2591	13.67	109

TABLE XXIV.

*Closed April, 1932. †Closed March, 1932. ‡Opened April, 1932.

The Ante-Natal Clinic at Ashbourne is run in connection with the Maternity Home.

A list of the days and times of holding the Ante-Natal Clinics will be found on page 74 of the Annual Report for 1930. To this should be added the following information regarding the Chesterfield Centre—Address, Maternity Home, Chesterfield, held weekly on Wednesdays from 10.0 a.m. to 3.0 p.m.

INFANT LIFE PROTECTION.

The Children and Young Persons Act, 1932, came into force on January 1st, 1933.

This Act empowers us, in addition to fixing the number of infants, "to impose conditions to be complied with." The Act also provides for the prior notification of the intention to admit infants and raises the age of children kept under supervision from 7 to 9. These provisions will be of considerable help, as they will enable us to prevent the admission to unsuitable homes of children received for reward. I still deplore the lack of similar powers to safeguard the infant received other than for reward.

During the year 1932 the Health Visitors paid 332 visits to 78 children cared for by foster-parents under the provisions of the Children Act, 1908. Visits were paid quarterly, and more frequently if necessary.

During the year no infant taken for reward died, nor had we by force of law to remove an infant from its foster-parent. In one instance the Committee exercised their power to limit the number of children who could be admitted.

Work under this Act becomes less spectacular as we gradually weed out the more unsatisfactory homes. Our principal difficulty now is the home that is not good and yet not sufficiently bad to warrant the issuing of an order by the County Council for the removal of the child. We have concentrated on such homes and in many instances have effected a considerable improvement. Sanitary defects have been referred to the Sanitary Authority and conditions improved in this way also.

Children found to be suffering from dental or other minor defects are referred for treatment to the School Medical Service.

The work under this Act has demonstrated the inadequacy of the arrangements for the care of orphan or unwanted children. It is sometimes possible to overcome these difficulties by cooperation with other officials. For instance, I have asked the Medical Officers in charge of Public Assistance Institutions to notify me of the removal from their Institution of any illegitimate child born there, and the address to which it is taken. In this way I am able to have the children supervised by the Health Visitors should they reside with relatives, and if in the care of foster-parents, no delay occurs in seeing that the legal notifications are forthcoming. Should any of these children be taken to an address outside the County, I notify the Medical Officer of Health of the area to which they have been removed. Despite the issue of notices, many people are still ignorant of the provisions of the law with regard to the reception of children for reward.

One difficulty is that of a child received into an unsuitable home but for whom no payment is made. We can do nothing here unless the case is sufficiently neglected to warrant the intervention of the N.S.P.C.C.

Another difficulty is the orphan child for whom a pension under the Insurance Acts is payable to a person who is not a relative. As far as I can ascertain, no provision is made for the supervision of these cases.

Home Helps.—During the year, arrangements were made with the Shirebrook and Langwith Junction Nursing Association to provide home helps for women during their confinement. The scheme was to extend not only to subscribing members of the Nursing Association, but also to non-members who had attended the County Council Ante-Natal Centres, on the basis of a weekly contribution.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLIES.

Details of the various water supplies in the County were given in the Annual Report for 1930 and alterations during 1931 were reported in that Report on pages 50-52. The following are the alterations and extensions which have taken place during 1932 :—

URBAN DISTRICTS.

Alfreton.—The Council have decided to develop the Lea Hall boring, particulars of which are given in my last report.

Ashbourne.—The average daily consumption during the year has been 118,800 gallons which equals an average per head per day of 26.36 gallons. The whole district is now supplied with water with the exception of six cottages on Old Derby Road.

The question of providing water-softening plant is being considered by the Council. Reference to numerous analyses of samples show the water to contain 26 to 28 parts of hardness per hundred thousand. I think, therefore, the District Council are taking the right steps to remedy this.

Bakewell.—An extension of the water main has been made at Stanton View for a distance of 135 yards.

Bolsover Urban and Chesterfield Borough.—The Chesterfield and Bolsover Water Act, 1932, received Royal Assent on the 12th July, 1932. This Act, which functions from April 1st, 1933, vests in a new Board (consisting of 8 members of Chesterfield Borough Council and 4 members of Bolsover U.D.C.) the water undertakings of the two authorities and authorises the Board to execute works and supply water.

Any other local authority may become a constituent authority of the Board with the approval of the Minister of Health.

Powers are given for the construction of pumping stations and a filtration and softening plant in the Urban District, a service reservoir in the Borough, together with pipe lines connecting up various existing mains and the reservoir and plant.

The limits of supply are the Borough, the Urban Districts of Bolsover, and Brampton and Walton, the parishes of Brimington and Hasland and part of Wingerworth parish (in Chesterfield Rural District) within an area immediately south of the Borough boundary 53 chains along Derby Road, 14 chains to the west and 6 chains to the east of such road.

If at any time it shall appear to the County Medical Officer of Health that any water supplied is plumbo-solvent and is liable to act upon lead in such a manner as to endanger the health of the consumer, the Board shall, upon request by the County Council, forthwith treat any water so supplied, to prevent such action. The rates for domestic supply shall not exceed $12\frac{1}{2}$ % on the gross value of the house according to the valuation list in force, with a minimum charge of 13/- per annum.

The rates	for supp	ply	by	meter	shall	not	exceed	:
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1s.	7d.	per	1,000	gallons	for	the	lst	25,000	gallons	per	quarter.
1s.	6d.		,,,	,,,	,,	,,	next	,,	,,	,,	,,
	5d.	,,		,,	,,	,,	,,	,,	,,	,,	,,
	4d.	,,	,,	,,	,,	,,	,,	,,	,,	,,	,,
	3d.	,,	,,	,,	,,	,,		150,000	,,	,,	,,
	2d.	,,	,,	,,	,,	,,		50,000	"	,,	,,
	1d.	,,	33	,,	,,	,,		500,000	"	,,	,,
1s.	0d.	,,	,,	,,	,,	any	qua	ntity ov			gallons
									pe	r qu	arter.

In cases where the supply to premises is by :---

	$1\frac{1}{2}''$		minimum	quantity	charged	per	annum	gallons. 60,000
Over	11" to		"	,,	,	.,	,,	100,000
,,	2" to 3	·" ,,	,,	,,	,,	,,	,,	200,000
22	3 .	,,	,,	,,,	,,	,,	,,	400,000

The supply of water to any caravan, shack, hut, tent or other like structure shall be by meter, and payment shall be such minimum annual sum as will give the Board reasonable return on the capital expenditure incurred.

The Board may, with the consent of the Chesterfield Rural District Council, supply any houses within the R.D. beyond the limits of supply, upon terms agreed upon between the Board and the owner or occupier.

The Board may	borro	w for	the fo	llowin	g purpos	ses :-	-	
Lands and easer	nents				£1,024	for	60	years
Construction of								
Act					£44,976	,,	40	,,
Provision of pur								
Machinery, fil								
softening								
Act							20	,,
Working capital					£10,000	,,	10	,,,

Further sums may be borrowed with the consent of the Minister.

The Board may make byelaws for the prevention of pollution of their water, subject to the approval of the Councils of the districts concerned.

Section 36 of the Chesterfield Corporation Act, 1923, is retained as to provision and maintenance of a compensation water gauge near Ramsley Reservoir (Rural District Council) and to deliver into the Blake Brook one gallon of water for every two gallons taken by the Corporation, and Section 51 is retained which provides that the Corporation shall efficiently filter all water supplied for domestic purposes from Linacre Reservoirs. **Buxton Borough.**—The mains in Macclesfield Old Road have been enlarged and extended to afford a more efficient service to a small area in the Chapel-en-leFrith district.

Glossop Borough.—The Council received sanction to loans for the improvement of the water supply to the Borough. A large portion of the work has been completed.

The works consist of a separating weir at the inlet to Hadfield Reservoirs, a filter house containing a 4-unit Bell's pressure filter, lime treatment plant at Swineshaw Reservoir and a boosting plant at Cornmill Bridge to improve the supply to Cliffe Road and Hague Street area.

Towards the end of the year some pollution of the Swineshaw source was found and promptly remedied by the Borough Council.

Heanor Urban.—The new reservoir at Codnor (near "Monument") was completed during the year, details of which were given in my Report for 1931.

Ilkeston Borough.—The construction of the new reservoir at Hassock Lane End on the Ilkeston-Heanor Road (particulars of which were given in my last Report) was in progress during the year.

Ilkeston and Heanor Water Board.—The official opening of the extension to the Board's Works took place on the 23rd November, 1932.

The extensions consist of (1) a duplicate 18" rising main from the works to Chadwick Nick Reservoir (23 miles); (2) a 15" duplicate gravitation main from the reservoir to Codnor Market Place so that both Ilkeston and Heanor now have a separate trunk main, spun iron pipes being used where pressure is not great, whilst steel pipes, having sleeve type spigot and socket joints have been used in areas liable to subsidence, and cast-iron pipes in normal areas of heavy pressure; (3) reinforced concrete valve-houses containing automatic cut-off valves, sluices, reflux and air valves, wastewater meters and pressure gauges, each valve-house being connected by land line to the waterworks to give warning in the event of a cut-off valve operating; (4) new boiler-house, containing two Lancashire boilers; (5) new engine-house containing engines, pumps, dynamos and motors, in duplicate, condensers and oil eliminating plant. A sump is formed under the engine-house floor to receive the raw water, from which it is pumped by the low-lift pumps for treatment in the works, whilst another sump receives. the treated water to be pumped to the reservoir by means of the high-lift pumps; (6) water-softening plant; (7) fourteen concrete circular filters, 15' high \times 10' in diameter of gravity type; (8) carbonating plant, and (9) lime-drying plant.

The scheme was designed and carried out by the Board's Engineer, Mr. Alfred E. Smith, Matlocks.—During the year a scheme was being prepared to improve the supply and storage of water and the prevention of possible pollution in connection with the Wolds Reservoir, Sunnyside Spring, Knab Hall Spring, Black Rocks Spring and Willow Well Spring.

The districts affected are Matlock Ward, Matlock Cliff, Tansley, Starkholmes and Cromford.

The Matlock Bath supply from the Upper Hackney Springs was found to be contaminated and immediate steps were taken to remedy this. A drain near the springs was reconstructed, the approaches to the spring chambers cleaned up, and a chlorinating plant installed at a cost of $\pounds 150$.

Wirksworth.—A scheme was sanctioned by the Ministry of Health for the sinking of a borehole at Wigwell Valley, near Wigwell Mill to augment the present supply which for some years has had to be cut off at certain hours of the day and night. The proposals are to provide an oil-engined pump with an automatic electric starter and a 6" rising main 2,700 yards long from the borehole to the existing reservoirs. To give Middleton-by-Wirksworth a better supply, a boosting plant would be necessary. The loan sanctioned is £574.

RURAL DISTRICTS.

Ashbourne.

Hartington.—The Town Well has been protected from pollution by the re-sewering of the surrounding property.

Bakewell.

Eyam.—In 1929 a reservoir of 750,000 gallons capacity was constructed, which later developed serious cracks owing to the foundations being unsatisfactory. An extra £3,700 was expended in attempting to remedy the defects, but the reservoir would not hold above 8 feet of water. In 1932, it was decided to abandon the reservoir and construct a new one of 225,000 gallon capacity on another site to the west of "Mompesson's Well," and a loan of £5,250 has been sanctioned by the Ministry of Health for this purpose.

The R.D.C. decided to share the expenses—two-thirds to the general fund of the district and one-third to Eyam Parish.

Belper.

Duffield.—There has been a shortage of water in Hazelwood Road, Duffield, during the periods of large drawing from the main from the Hazelwood Reservoir. The Council prepared a scheme for laying a duplicate main in Hazelwood Road to overcome this shortage. A loan of £3,000 was applied for in October, 1932, and a sum of £662 had been spent in anticipation of the loan in improving the source of supply in order to prevent pollution. The scheme has since been sanctioned by the Ministry of Health.

Blackwell.

The comprehensive scheme for water supply of the district from the Meden Valley Waterworks in the Dukeries area was completed in June, 1932. The agreement with certain outside Authorities for the supply of water then terminated. The private supplies to Dce Lea and Langwith Colliery (Sheepbridge Coal and Iron Company, Limited), Shirebrook Model Village (Shirebrook Colliery Company) and Upper Langwith Village (Chatsworth Estates Company) are being maintained as hitherto.

An average of 900,000 gallons per day is being pumped and distributed to the Blackwell and Skegby Rural districts and Warsop and Huthwaite Urban districts.

A 4" main has been laid to Ault Hucknall and the village of Stainsby. A 6" main has been laid from Upper Langwith along the Langwith Road as far as Langwith Drive in order to supply property formerly supplied from the mains of the Welbeck Estates Company. A 3" main has also been laid in Whaley Lane to serve properties where the supplies have been found to be contaminated.

Chapel-en-le-Frith.

Castleton.—The Rural District Council applied for a loan of $\pounds 2,500$ for the purchase of the water undertaking of the Castleton Water Works. Samples of the water at both east and west sources and also a sample taken in Castleton were examined bacteriologically in the County Laboratorv. I reported to the Medical Officer of Health of the District that they were unsatisfactory. The sanction of the Ministry has not yet been received.

Chesterfield.

Northern Area.—A loan of £45,749 was applied for by the R.D.C. in March, 1932, for a scheme to increase the storage capacity of the Barbrook Reservoir from 93,000,000 gallons to 143,000,000 gallons and to provide a water tower, a new main at Staveley and a length of new main at Barlow.

Southern Area.—At the same time as the application for a loan for the northern area scheme, a scheme for the Southern area was considered and a loan of £44,304 applied for. The scheme was to take 150,000 gallons per day from the Chadwick Nick Reservoir of the Ilkeston and Heanor Water Board and convey it by means of a 12" pipe line to a 500,000-gallons tank at Hardstoft, and to lay a new 12" main from Williamthorpe to the new tank at Hardstoft. The charge for water would be 11d. per 1,000 gallons up to 150,000 gallons per day, and 10d. per 1,000 gallons for quantities over that amount.

Clowne.

The pumping station at Hodthorpe has been enlarged by the addition of an extra engine and pumps.

Hayfield.

The Mellor water supply is mainly from Harry Moor through a high-level reservoir on Kinder Bank to Jordan Wall Nook reservoir (30,000 gallons). The latter is the service reservoir for Mellor.

Norton.

A portion of the spring supplying properties in Long Line has been piped to tanks below ground level, each tank supplying the particular property in the grounds of which it is situated. From the underground covered tanks the water is pumped into the dwellings. This is not a satisfactory arrangement.

Repton.

Bretby.—The South Staffordshire water mains, which already can supply a considerable number of properties in this Parish, have been extended along Bretby Lane where development is taking place.

Lullington.—A supply of water to this Parish is not urgently needed and the matter will probably be left over until the new works of the South Staffordshire Waterworks Company at Chilcote are completed.

Findern and Willington.—Mains have recently been laid through these Parishes and many of the houses are now connected.

Other Parishes.—The South Staffordshire Water Works Company have been approached to state terms upon which a supply of water can be offered to the following Parishes which were added to the Company's area by Act of Parliament in June of last year :—

Cauldwell.	Etwall.
Coton-in-the-Elms.	Rosliston.
Egginton.	Walton-on-Trent.

I understand that the terms have been received and are under consideration by the District Council at the time this Report is going to press.

RIVER POLLUTION AND SEWAGE PURIFICATION.

Full details of the conditions existing in 1930 were given in the Annual Report for that year on pages 107-114 and alterations during the following year were reported in the 1931 Report, pages 52-57. The following are the alterations and extensions which have taken place during 1932 :—

URBAN DISTRICTS.

Alfreton.

A small sewage works consisting of a covered tank and percolating filter has been constructed to deal with the sewage of new houses on Swanwick Hill.

Highfield sewage works.—A 3" 3 h.p. engine pump has been provided for lifting sludge from the Dortmund Tank. A fifth filter was completed and put into use during the year.

Alvaston and Boulton.

Shelton Lock.—A scheme was prepared for the provision of a pumping station to deal with the sewage of this low-lying area and sewers to connect up with the Chellaston sewers in the Shardlow Rural District. Application for a loan for carrying out this work was made to the Ministry of Health but was not approved. The area is one which is developing and cess-pools have to be provided for the drainage.

Bakewell.

The following sewer extensions have been made in this district :---

44 yards of 9" sewer in Yeld Road;

136 yards of 6" sewer at Stanton View.

The sewage of this Township of nearly 3,000 persons is discharged untreated into the River Wye. I have used every possible means of trying to get the Urban District Council to remedy this appalling state of affairs but without any success.

Belper.

The sewage disposal works have been recently enlarged and improved, the work being completed during the year. The works now consist of four settling tanks, two storm tanks, two detritus tanks with electrically-driven screening apparatus, seven filters two humus tanks, sludge drying beds, a flow recorder and pump to deal with the sludge, the tank top water and sludge bed drainage. The cost of these works, together with the sewerage of Shaw Lane and Belper Lane End areas was approximately £22,050.

Bolsover.

Extensions and improvements are in progress at the main sewage works. Details of the works will be given when the scheme is completed.

Buxton Borough.

New detritus tanks, mechanical screening apparatus and a flow recorder have been installed during the year. The sewer in Macclesfield Road has been extended to the Borough boundary.

Chesterfield Borough.

A fourth large bio-aeration unit, four new sludge digestion tanks, and numerous sludge drying beds have been provided and the works should now be able to cope with all the sewage coming to them. In the past, considerable trouble has been experienced on account of trade wastes which had a deleterious effect on the activated sludge process. The Works Chemist and Manager has, however, endeavoured to get this rendered harmless.

Heage.

This Urban District is somewhat difficult to sewer on account of its hilly nature. Consequently, the sewage from the area is disposed of at three main works. The Upper Heage and Nether Heage works were completed in 1930. During 1932, the third of the main outfall works for the drainage of the Saw Mills and Ambergate areas was completed. The works are situated well up the hillside, opposite the County Council's tar macadam works at Ambergate. The sewage from the higher parts of the Ambergate area are connected to a pumping station near Ambergate railway bridge, thence it is pumped to the works.

The sewage from the Saw Mills area is drained to a second pumping station near the brick works, and from there also it is pumped to the new works.

Storm-water tanks have been provided at both pumping stations for the treatment of three to six times the dry weather flow.

The new sewage works consist of two detritus tanks, two settling tanks a balancing tank, two circular filters, two humus tanks, six sludge beds and an improvised lagoon to receive sludge bed drainage and top water from the humus tanks.

The settling-tank liquor is taken to the dosing chamber by means of regulated floating-arm valves and any excess flow through the tanks, due to both pumping stations acting together, passes over the weirs of the settling tanks into the balancing tank, from which the delivery to the dosing chamber is also regulated by a floatingarm valve.

Heanor.

New sewage works at Langley Mill were completed and brought into use during the year. They consist of four detritus tanks, five settling tanks of the inverted pyramid type, two storm-water tanks, ten filters, two humus tanks of a similar type to the settling tanks, thirty-four sludge beds, a pump house and well for some of the sewage, top water and sludge bed drainage, and a flow recorder.

The old works at Loscoe have been scrapped; the works at Woodend are being used temporarily to deal with the trade waste from Morley's Hosiery Factory (the effluent being taken by sewer to Langley Mill), whilst the Commonside works have been converted into a pumping station, the old settling tank being used as a stormwater tank.

The loan for the work was £66,000.

Ilkeston Borough.

The relaying of sewers and the enlargement of the sewage works was nearing completion at the end of the year. When completed, it is estimated that the works will have cost approximately £47,000. The extensions to the works consist of a four-unit rectangular filter with mechanical distributor, the necessary motor power driving the distributor, and two additional humus tanks. In addition to this, the media of the eight existing filters is being renewed at a cost of £10,000.

Long Eaton.

The areas of Toton, Chilwell and Attenborough outside the County have been sewered and the sewage is treated by arrangement at the Long Eaton sewage works in this County. This necessitated extensions to the works and these were practically completed at the end of 1932. The extensions consisted of an additional detritus tank, a settling tank, two filters, two humus tanks and six sludge beds, making a total of four detritus tanks, four settling tanks, eight filters, five humus tanks and fourteen sludge beds. In addition two pumps—one for the humus tanks and one for the sludge bed drainage—and a flow recorder have been added to the works which can now deal with 400,000 gallons per day. The whole of the sewage is pumped to the works from four separate automatic electric pumping stations.

Matlocks.

Following my report to the Urban District Council pointing out various sources of pollution, both by drainage and by solid matter, the following work has been carried out :—

Railway Hotel, Matlock. Drains now connected to sewer.

Twigg's, Iron Merchants' Yard. Tipping on river bank stopped. Crown Square. Extra storm overflow provided reducing the

discharge from the storm overflow under the Railway Hotel.

Knowlestone Place pumping station now working more regularly.

Two houses at the foot of Tansley Road Hill connected to sewer.

Dale Road, near Railway Bridge. Defective main sewer repaired.

Rubbish behind Picture Palace, Dale Road. Removed.

Starkholmes sewer. New footbridge constructed carrying repaired sewer.

Public Lavatories, Memorial Ground. Connected to sewer.

Midland Hotel. Drains connected to sewer.

W.C's opposite the Pavilion. Scrapped.

The six almhouses, Tansley Road. Connected to sewer.

The Council had posters and handbills printed and distributed pointing out the offence of depositing solid matter in river or streams.

New Mills.

The responsible official here has been notified by me on two occasions that the practice of short-circuiting filters, passing the tank effluent to the river, is one which should not be allowed to continue.

North Darley.

The outlet of the Station Road sewer which is the Cartledge Culvert, was diverted from the Warney Brook direct to the River Derwent. This was apparently done by the U.D.C. to prevent complaints as to the fungus growing in the Warney Brook and to obtain a greater dilution. The sewage is still not treated, except by small grit tanks at two outfalls.

Ripley.

Northern Area.—The proposed scheme providing new sewage works for the northern area, including Hartshay, was not sanctioned by the Ministry of Health for the purposes of a loan.

The U.D.C. therefore improved the existing works, by constructing an additional settling tank, the improvement of the existing tanks, the renewal of the media of some of the filters, the provision of additional filters, humus tanks and sludge beds and a pump house to deal with storm-tank top water and sludge-bed drainage. The effluent has been piped across the canal to the brook. The loan for this work was $\pounds 4,740$.

The works now consist of two detritus tanks, four settling tanks, eight filters, four humus tanks, eleven sludge beds and two storm-water tanks.

RURAL DISTRICTS.

Ashbourne.

Brailsford.—The settling tank and detritus tank have been remodelled and the storm overflow arranged so that the storm water shall receive tank treatment before entering the brook.

Hognaston.—A small tank and irrigation trenches have been provided to deal with the sewage of this village.

Belper.

Birches Lane (South Wingfield Parish). A scheme for dealing with the sewage of this area came before the Ministry of Health in September, 1932. The proposals were to provide a detritus tank, two settling tanks, a filter and a humus tank. The scheme was not sanctioned and the Council were asked to prepare a further scheme.

Whatever the final proposals are I hope some arrangement will be made between the Chesterfield Rural and the Belper Rural District Councils to deal with the sewage from some 25 houses in Amber Row; this would however probably necessitate pumping.

Blackwell.

Doe Lea, Glapwell and Palterton.—A scheme has been prepared ior dealing with the sewage of this colliery village and the villages of Glapwell and Palterton at a joint works alongside the River Doe Lea at Stockley.

B. Winnings.--A scheme has been prepared for pumping sewage from the site of these works to the South Normanton Sewage Works.

Shirebrook.—A plan has been prepared for enlarging the existing works.

South Normanton.—A draft scheme has been prepared for additions to the present works.

Berristow Place.—Plans have been got out for new works on the existing site.

Chapel-en-le-Frith.

Bamford.—A pump well and pump house have been constructed here, to deal with the sludge from the settling tanks and humus tanks.

Hope.—The new sewage works were completed and brought into use. They consist of one screening chamber, two detritus tanks, two settling tanks, two storm tanks, two filters, two humus tanks, three sludge beds and a pump house for sludge. The cost was approximately $\pounds 14,000$.

Chesterfield.

Amber Row.-(See Belper Rural).

Coal Aston.—After the Inquiry held on December 14th, 1932, the Ministry of Health approved a loan for a scheme of sewerage and sewage disposal for this village. The existing treatment consists of a small tank only. It is proposed to provide a detritus tank, two settling tanks, a storm tank, a filter and two humus tanks with the necessary sludge beds. The sludge bed drainage will be pumped back for treatment. Estimated cost, £2,247.

New Tupton.—The old sewage works and two septic tanks have been scrapped and new works provided. The works consist of two detritus tanks, two settling tanks, two storm tanks, two filters, two humus tanks and six sludge beds with a pump house to lift the sludge to the beds and return the sludge bed drainage back for treatment. Loan, £6,585.

North Wingfield and Pilsley (Part).—New sewage works (known as Locko Brook works) completed during the year consist of two detritus tanks, three settling tanks, two storm tanks, three filters, two humus tanks, seven sludge beds and pump house for sludge lifting. The loan was £10,776.

The new works have allowed the old works at Hilly Fields, and the septic tanks at Seanor Lane and Church Row to be scrapped and certain other houses to be connected up.

The other portions of North Wingfield and Pilsley Parishes are dealt with by sewage works at Williamthorpe (two), Pilsley, Pilsley Station, and Pilsley Green (tank only).

Staveley.—Sewers have been laid in Mastin Moor, Worksop Road, Norbriggs and Woodthorpe; 9" sewers, 2,000 feet; 6" sewers, 1,854 feet. Loan, £1,595.

Heath.—The Council Schools have been connected to the Williamthorpe sewage works.

Hartshorne and Seals.

Hartshorne.—The Ministry's approval of the scheme for the disposal of the sewage of the village of Hartshorne and the Woodville Road area, has still not yet been received. I understand that the original plans were sent back by the Ministry of Health for amendment some considerable time ago.

Norton.

Totley.—The No. 2 scheme for sewering the south side of the main road at Totley was completed during the year, consequently the small sewage works at the "chemical yard," Totley Rise have since been scrapped. This scheme has removed the pollution of the Totley Brook by the sewage from the New Totley houses and has enabled two large building estates to be developed.

Bradway.—The sewage of Bradway at the top of Twentywellsick Lane formerly flowed in an open ditch parallel to the Lane. This ditch for a considerable portion of its length has been piped in as a temporary measure.

Beauchief.—The lower end of Bocking Lane has been sewered.

Norton.—The centre of the village of Greenhill has also been sewered. Both these sewers join up with the Sheffield Corporation system.

Repton.

Mickleover.—The new sewage works for the southern or lower portion of Mickleover were completed during the year. These works take the sewage from the County Mental Hospital which was connected up in March, 1933, and a few houses in and off Rykneld Street. They can also deal with Findern, Burnaston, and Findern Lane End. The works, situated near Findern, consist of two detritus tanks, two settling tanks, two storm tanks, three filters, two humus tanks, pump house for humus sludge, a pump house for settling tank sludge and top water and the necessary sludge drying beds.

Gresley (Station).—The present works are entirely unsatisfactory, consisting of tanks and land irrigation. I understand a scheme has been prepared which will dispense with the present works, but I have no particulars.

Shardlow.

Chaddesden.—Extension of these works and the provision of a sewer and pumping station for the Meadow Lane and low level area was in progress during the year and practically completed. The extensions consist of four detritus tanks, two settling tanks, two storm-water tanks, four filters, one humus tank, and 15 sludge beds. The loan applied for was $\pounds 17,200$.

Draycott and Breaston.—The enlargement of these works was completed during the year at a cost of approximately £9,300. The additions consist of a new air compressor station at Breaston to supply compressed air to the several ejectors, and a twin 100gallon ejector, two 56 feet diameter filters and a rectangular humus tank, five new sludge beds and the renovation of the existing sludge beds. The final effluent is now taken direct to the River Derwent instead of passing into the ditch alongside the road. Littleover.—Sewage works were constructed during the year, to deal with Littleover, Pastures Hill, Uttoxeter Road and Blagreaves Lane, also part of Normanton in Derby Borough. Formerly the sewage of Littleover was dealt with by Derby Corporation at a cost of £845 per annum.

The works will relieve the old sewer at Sunny Hill and tend to prevent unnecessary overflow at this point; they will also relieve the Borough sewer passing through Alvaston and across the River Derwent to their Spondon sewage works.

The works consist of two detritus tanks, two settling tanks, two storm tanks, four filters, two humus tanks and several sludgedrying beds together with a considerable length of sewerage. The loan applied for was $\pounds 37,230$.

Melbourne.—New sewage works, replacing old works, at Melbourne were constructed during 1932, for which a loan of £14,500 was obtained. The works consist of two detritus tanks, two settling tanks, three filters, two humus tanks, and nine sludgedrying beds. The two old settling tanks are being used as stormwater tanks. Two small electric pumping stations are provided, one near the Ticknall Road junction and the other at the lower end of Penn Lane. The storm overflow near the Gas Works has been altered to act at six times the dry weather flow.

Spondon.—The original works were put down in 1913-14 at a cost of $\pounds 10,681$. In 1928, an additional filter was constructed and other improvements (pump, etc.) carried out for $\pounds 1,800$. During 1932, further extensions were completed, consisting of two additional detritus tanks, a settling tank, two circular filters, a humus tank, and seven sludge beds. These extensions, together with sewers in Moor End, Dale Road, West Road, and surface water drains in Dale Road and Chapel Street, cost approximately $\pounds 10,000$, for which a loan was obtained. The complete sewage works now consist of four detritus tanks, three settling tanks, three storm-water tanks, five filters, two humus tanks, and thirteen sludge drying beds. The sewage is divided between the new and old portions of the works by means of a separating weir.

SEWAGE EFFLUENTS.

During the year 1932, 398 samples of sewage effluents were collected and analysed. The samples were classified as follows :---

Good		 	165
Satisfac	tory	 	123
Unsatist	factory	 	57
Bad		 	53

The results of the analyses are sent to the Engineer or Surveyor concerned, and, where necessary, special letters are sent pointing out defects existing at the works or making suggestions for effecting improvement in the condition of the final effluents.

SCAVENGING.

Reference to page 117 of the Annual Report for 1930 shows the arrangements for scavenging in the various Districts in the County, and alterations to these were reported in the Annual Report for 1931, page 57. From the Reports I have received up to date for the year 1932, I find the following alterations took place during that year :—

WIRKSWORTH URBAN.—At the end of September the Council dispensed with scavenging by direct labour and the work is now being done by contract.

BLACKWELL RURAL.—During the year, scavenging was carried out by the Council in the Parishes of Glapwell and Scarcliffe, the work being carried out by contract. At Tibshelf and Blackwell the work is done by direct labour.

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				Closets and Ashpits.	ts an	d Asl	pits.			Dra	Drainage.							Of	Other]	Defects.	te.							
District and Sanitary Inspector's Name.		Defective Privies, Pail Closets and Ashpits.	Conversion of Privies into W.C.'s.	Conversion of Pail Closets into W.C.'s.	Conversion of Privies into Pail Closets.	Defective W.C.'s.	Provision of additional W.C.'s.	Provision of Portable Ashbins.	Dirty Closets.	No disconnection of Waste Pipe.	Defective Waste Pipes, Traps, Inlets & Drains.	Drains obstructed. Paving of Courts	and Yards. Eaves Spouts,	and Down Spouts.	Inaufficient Venti-	lation.	Windows.	Water in Cellars.	Water Supply.	Overerowding.	Foul Condition of Houses. Offensive Accumu-	lations.	Animals improperly kept.	Pigsties.	Smoke Nuisances.	Urinala.	bediceqs ton secretarin'N	Totals
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Alvaston and Boulton R. C. Treadgold.	Inspections made Informal Notices served Legal Notices served Nuisances abated		::::	. 1 1 1 5	::::	:-			::::		8 5 11	 	14 14 6	66 : Ø	10 10 00 01	44	P.P. 14	999 : 69	i.u			:-			er er : :	:-	04 14	79 69 63 63
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Bakewell T. W. Baker.	Inspections made Informal Notices served Legal Notices served Nuisances abated	1 10	B 2: :	::::	::::	:- :-	=	14 14		:::-	19 - 01	12:	04 01 11 11 10				: : : 61	:::-				:- :-					1111	83 9 IS
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	Paving of Courts and Yards.	270 35 35	or: 00 Cr	1	::::
· ·	Drains obstructed.	45 45 45	131 27 131	12 5 	0101 :01
Drainage.	Defective Waste Pipes Traps, Inlets & Drains.	250 35 35	92 30 47	12 33	22 22 22
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nd Ashpit	Defective W.C.'s.	20 20 20	46 29 29		1 : : : :
and	Conversion of Privies into Pail Closets.	::::		56 10 	::::
Closets and Ashpits.	Conversion of Pail Closets into W.C.'s.	226 26 	23 77 117		
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	District and Sanitary Inspector's Name.	Belper J. A. Statham.	Bolsover E. Booth.	Bonsall A. Allsopp.	Brampton and Walton W. J. Nicholls.

URBAN DISTRICTS continued.

Table XXVI. continued.

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Buxton (Boro') W. O. Coates.	Inspections made Informal Notices served Legal Notices served Nuisances abated	80.40	1111	*: 30	::::	159 30 62	01: 4 38 01: 4 38	764 37 120 180	oi: 0: 46	4	411 5 31 8 93 2 93 2	526 1 58 7 209	16 1 15 1 24	37: 17	75 110 114	t ⁴ − − ∞	8 8 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5	48 10 44	9 : : : :	12	112 8 15 16	11: 12 ggg		102		52 cz : cz	294 14 36	4478 285 147 781
Chesterfield (B.) A. S. Carter.	Inspections made Informal Notices served Legal Notices served Nuisances abated	· · · ·	::::		::::	149 49 62	0 - 10 00	888 278 278 392	10: 10	1111	146 4 144 1 7 1 74 1	437 2 141 7 147	269 2 73 25 94 1	271 1 89 132 132	131 37 51	6 01 : 01 0	51 7 17 2 26 3	75 15 25 5 37 7	901 :4	2: 6 18 2: 6	78 26 24	83 :83	88 :88	a.a. :	144 8 8	∞ - i	213 71 118	3085 935 80 1246
Clay Cross W. A. T. Lynam	Inspections made Informal Notices served Legal Notices served Nuisances abated		4 1020 2 128 3 323		::::	25 19 24	° ; ;−	20 141 343			54 31 1 45 1	54 38 38 106	62 29 1 47	41 20 23	9 4 5 9	∞ 01 ;∞	25 7 25	8 14: 6 8 8 14: 6 8	49 17 56	60 <u>:</u> 60		1-4 :4	13 10 10	::::	i.u	:-	118 44 92 92	1553 512 14 1166
Dronfield W. H. Harrison.	Inspections made Informal Notices served Legal Notices served Nuisances abated	120 4 	120 62 47	::::		120	::::	120 89 86 66	6	120 14 14 14	120 17 17 17	26 26 26	32 18 18	45	86 11 ::I	45 33 33	4000	45 4 7 1 7 1 7 1	200 12 12	e : : :		111	17 1 1	11		12	13 13 13	$1305 \frac{1}{75}$ 269 269
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URBAN DISTRICTS-continued.

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District and Sanitary Inspector's Name.		Defective Privies, Pail Closets and Ashpits.	Conversion of Privies into W.C.'s.	Conversion of Pail Closets into W.C.'s.	Conversion of Privies into Pail Closets.	Defective W.C.'s.	Provision of additional W.C.'s.	Provision of Portsble Ashbins.	Dirty Closets.	No disconnection of Waste Pipe. Defective Waste Pipes.	Traps, Inlets & Drains.	Draing obstructed. Paving of Courts	and Yards. Eaves Spouts,	and Down Spouts.	-itnev tneioffusul	lation. Windows.	Dampness.	Water in Cellars.	Water Supply. Overcrowding.	Foul Condition of Houses.	Offensive Accumu- lations.	Animals improperly kept.	Pigsties.	Smoke Nuisances.	Urinals.	bedies and secured	.siatoT	
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Long Eaton J. Tominson.	Inspections made Informal Notices served Legal Notices served Nuisances abated	10 10			::::	58 25 36	39 39 14: 2	983 354 10 533	37: 11		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	157 38 130	37 17 21 4 22		5 50 5 50 5 50 5 50 5 50 5 50 5 50 5 50			84 39 10 3 5 1	8 19 19	24 24 24 24 24	21 23	13 13 24	2: 25	20 15 19	21 21	299 131 5 180	2237 723 21 1158	72
Matlocks J. D. Evans.	Inspections made Informal Notices served Legal Notices served Nuisances abated	43 4 · · 4	67 39 30	6 : : :	21	14 14 14	10 10 : 10	001010	:-	+ · · · · · · · · · · · · · · · · · · ·	411 171 	45: 45	108 108 9 9		108 5 5	8 108 5 14 14 14	:-	61 61 161	14	44 :4	:-	1111	:-	∞ : : :	00:00	12 6 6	992 348 312 312	
New Mills W. C. Sheard	Inspections made Informal Notices served Legal Notices served Nuisances abated	::::	:::1	: :- ~	::::	::::			:- :-		::44	101012			::	1111	1111		::		::	::::	::::			:	30 132 132	
Korth Darley F. B. Dickinson.	Inspections made Informal Notices served Legal Notices served Nuisances abated	21 21	32 12	1111		20: : 22	. : : : :	-: - 10	9 : : 9	:-	10: 530	45	14 14		5 :: 5	- : :-	1111	2 39 2 39								01-02	233 9 177	

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South Darley H. Crowder.	Inspections made 189 Informal Notices served Legal Notices served	189	1111	1111	1111	106 5 		::::	::::	10 00 ; 00	::::	1111		44 :4			1111	1:::		1111	1111	1111		1111	1111	N : : :		306 17 17
Swadlincote G. Pollard.	Inspections made Informal Notices served Legal Notices served Nuisances abated	12:::	21 : : :	-:::	1111	::::::	E: : :	814	1 : : !*		:::2	1 : : : : : :		···· [3::::	. : :≍ ∞: : :	14 30	1112	1111	: : :8		: : : 64	1111	1111	1111	1111	1 868		2038
Wirksworth A. E. Parry.	Inspections made Informal Notices served Nuisances abated	8: 13 IS	30 28: 30	0. FO - 01		17 8 15	1111	107 69 91			t= t= = =	18 1 5 18	4: 0.0 		10 10 101	<u> </u>	00-01	::::	2112	= : :=	- : :-	1111	884	1111		6 1 1	16 2 16 2 3 2 2 2 1 2	299 204 £2 220
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Ashbourne J. H. Wheeldon	Inspections made Informal Notices served Legal Notices served Nuisances abated	10 2 8	김 :임임	1111	1111	01 :01 01	1111	20: 50 20: 50 20: 50		r∞ ∞	26 26 26	લ :લલ		C1 00 00 00	0000	0010 0010	01 01 - 01	- :		9410	1111	84111 	- :	N . N N	1111			107 42 133 138
Bakewell W. J. Gallagher. A. Green.	Inspections made 155 Informal Notices served 10 Legal Notices served 54 Nuisances abated 54	. 155 48 10 54	34 34 34 34	no i i no	3: 37	6 6 13	32 32 24	23 23	13: 13 22	44 2 16 16	808 1 80 80 80	113 76 	100 133 130 130 130 130 130 130		13 19 8 12 1 12 7 12	2 11	47 15 11	010 :10	30 84 16 13 13	804 9 5 1	21 :- 15	 89: 39				6 107 2 23 2 45		978 518 36 556

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	te.	Foul Condition of Houses.	::::	or: 30	15 15 33	401 :01
	Defects.	Overcrowding.	∞ - : -	10 00 : 01	4 3 3 20	+ :- :
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		Insufficient Venti- lation.		12 9 9	92 6 17 28 5	59 1 338 38
		Sinka.	::::	31 20: 31	148 63 78 78	r :∞
-continuea		Roofs, Eaves Spouts, and Down Spouts.	::::	97 69 18 82	659 100 82 614	219 64 17 132
cont		Paving of Courts and Yards.		14 20 14 14	432 49 61 299 61	0000
2		Drains obstructed.		72 39 1 57	219 36 79	31 : 1 63
KIC	Drainage.	Defective Waste Pipes, Traps Inlets & Drains.		117 105 5 102	303 79 24 203	145 23 8 62 62
IST	Dra	No disconnection of Waste Pipe.	::::		10 10 101	14 1 6
		Dirty Closets.	::::	25 8 12	87 29 53	10 - : 01
RURAL		Provision of Portable Ashbins.		47 77 97	446 130 3 211	51 12 E
R0	npits.	Provision of additional W.C.'s.	::::	61 : 101	4 : :4	11: 15
	Ash I	.в. Э.W этітээіэd	::::	53 43 49	$^{+48}_{-23}$	8 19 8 19
	Closets and Ashpits.	Conversion of Privies into Pail Closets.	::::	co : : co		8 8
	loset	Conversion of Pail Closets into W.C.s.		114 46 5 45	40 	39 FO I
	-	Conversion of Privies into W.C.'s.	::::	22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	59 18	130 12 44
1		Defective Privies, Pail Closets and Ashpits.	4 : : 4	281 61 1 64	409 206	26 20 20
			ed.			ed
		- 1 23 - 1	ed	ed	Inspections made Informal Notices served Legal Notices served Nuisances abated	ed
		12113	de serv ed	de es serv	de es ed	de es serv
			ma otic	otio Ses	ma otic	ma otic ses tbat
			I N loti	ons loti	I N I Notio	ons oticites
			ection rms al Nal Nano	rms rms al N	rma rma al N	rma al N
-			Inspections made Informal Notices served Legal Notices served Nuisances abated	Inspections made Informal Notices served Legal Notices served Nuisances abated	Inspections made Informal Notices ser Legal Notices served Nuisances abated	Inspections made Informal Notices served Legal Notices served Nuisances abated
				and the second s		
	-	nd s	rd	Belper W. G. Cooper James Laycock	Blackwell I. N. Creear. S. Wilmot.	Chapel-en-le- Frith T. Dinsdale.
		strict a spector Name.	Basford . v. Yate	Belper G. Coc nes Lay	Cre	Frith Dinsd
		District and Inspector's Name.	Basford V. V. Yates	Be Be	Blackwell L. N. Crees S. Wilmot	Chapel-en-le Frith T. Dinsdale.
		H D	A	W Ja	H H SS	H. Ch

DIIDAI DISTDICTS

Table VVUI

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	524 258 258	42 21 21	3 3	12 12 15	1111	8 - 1-	467 165 104 361
	10 2 01	::::	::::	:-	::::	5 -: 10	23 9 : 4
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	12 9 : 9		: : : 5	:-	-: - 5	9 - :-	
	475 351 351	x 4 :4	33 4	25 19 35	::::	6: 26	182 40 134
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cont	35 15	22 12 12	1 4 4	28 31 36	23 19 19	25 1 1 1	157 56 4 62
24	485 293 293 293	41	5 m 3	400 :4	40-5	73 21 55	235 94 49 111
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	1886 552 	∞ 4 ∷4	16 4 13	21 20 61 4	74 14 14 11	103 17 59 42	137 52 14 56
	106 25 32 25	25 25 25	102 	ۍ <u>ن</u> ه	22 3 2 89 22 3 2 89	52 1 6 1 1	ed 110 37 111
	Inspections made Informal Notices served Legal Notices served Nuisances abated	Inspections made Informal Notices served Lezal Notices served Nuisances abated	Inspections made Informal Notices served Legal Notices served Nuisances abated				
	Chesterfield T. W. Binns J. Hutchinson D. Northway F. Waterfull	Clowne J. Bradley.	Glossop Dale c. E. Storey.	Hartshorne & Seals J. Crabtree	Hayfield E. Swift.	Norton E. J. Banner.	Repton F. W. Bullock G V. Peace.

			76
	Totals.	2459 785 28 968	50
	Nuisances not specified	31 16 15	- : :-
-	Urinala.	a a ; e	
	Smoke Nuisances.	:-	
	Pigsties.	4 01 :01	- : :-
	Animals improperly kept.	10 in 10 10 10 10 10 10 10 10 10 10 10 10 10	- : :-
	lations.	174 115 122	9:19
	Offensive Accumu-	5: 13	
Other Defects	Vererowding.	90-4	
L D	Water Supply.	254 76 3	
Othe	Water in Cellars.	104 i4	
-	Dampness.	25 25 30	
	.swobniW		
	lation.	9 28 2 5 11 11	
	-ifney finent		
	Sinks.	111 28 31 31	4 : 14
	Roots, Eaves Spouts, and Down Spouts,	76 34 52	∞ : :∞
	Paving of Courts and Yards.	89 16 24	1111
ge.	Drains obstructed.	83 83 90	··· : ···
Drainage.	Defective Waste Pipes, Trapa Inlets & Drains.	493 104 165	e : : 6
D	No disconnection of Waste Pipe.	10 6 4	
	Dirty Closets.	16 8 8 8	e : :e
	Provision of Portable Ashbins.	364 141 132	::::
npits.	Provision of additional W.C.'s.	24 4 14	::::
As I	Delective W.C.'s.	25 14 19	
8 an(Conversion of Privies into Pail Closets.	4 : : 4	::::
Closets and Ashpits.	Conversion of Pail Closets into W.C.'s.	213 17 62	::::
	Conversion of Privies into W.C.'s.	220 57 59	
	Defective Privies, Pail Closets and Ashpits.	30 27 27	9 : : 9
		Inspections made Informal Notices served Legal Notices served Nuisances abated	Inspections made Informal Notices served Legal Notices served Nuisances abated
	District and Inspector's Name.	Shardlow F. G. Forman.	Sudbury c. E. Ingham

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RURAL DISTRICTS—continued.

Table XXVI. continued.

TABLE XXV.

	Approx	imate numl	per of House	es with		ber of rsions.
Districts.	Privy Middens.	Pail Closeta	Water Closets	Trough and slop Water Closets	From Privy- middens to water Closets	From Pail- Closets to water Closets
URBAN.		0.774	0.000		1	0.0
Alfreton Alvaston & Boulton	75 5	2,574	3,238 1,200	41	$\frac{4}{1}$	22
Ashbourne	5	0	948	288	1	
Bakewell	168	51	532	3	10	
Baslow	116	4	231	_	-	
Belper	49	437	2,727	125	3	23
Bolsover	197	596	2,003	-	141	117
Bonsall	52	257	20	-		
Brampton & Walton	332	28	241	-	6	-
Buxton (Boro')	12	66	3,597	10	-	4
Chesterfield (Boro')	189	-	14,541	292	$\frac{1}{323}$	3
Clay Cross Dronfield	242 178	15	1,688 854	12	323 9	1
Glossop (Boro')	5	52	3,584	479	-	2
Heage	135	436	257	8		$\tilde{2}$
Heanor	140	1,291	4,628	_	130	376
Ilkeston (Boro')	8	207	7,605	309	2	9
Long Eaton	15	77	6,722	74	-	
Matlocks	359	357	2,007	2	30	
New Mills	69	19	1,051	532	18	6
North Darley	319	19	712	106	12	-
Ripley	98	1,014	2,294	-	54	8
South Darley Swadlincote	$ 133 \\ 50 $	$\frac{36}{11}$	52 4,589	76	15	1
Wirksworth	93	89	822	4	30	5
Urban Districts	3,044	7,639	66,143	2,375	745	579
RURAL.						
Ashbourne	1,038	1,020	375	13	8	-
Bakewell	2,039	1,202	998	-	34	5
Basford	8	254	169		-	
Belper	428	2,325	3,999	29	22	45
Blackwell	1,164	5,353	3,037	-	18	16
Chapel-en-le-Frith Chesterfield	1,280 8,026	502 683	2,967 10,515	5 43	44 737	$\frac{3}{45}$
Climan	1,833	1,404	1,027	40	3	40 3
Glossop Dale	239	129	522	12	13	4
Hartshorne & Seals	626	213	863	13	61	6
Hayfield	380	64	913	40	20	
Norton	212	107	1,881	-	42	
Repton	1,431	1,013	1,983	7	56	10
Shardlow Sudbury	830 503	3,309 59	7,328	56	55	68
				010		
Rural Districts	20,037	17,637	36,621	218	1,113	205
Urban Districts	3,044	7,639	66,143	2,375	745	579
Whole County	23,081	25,276	102764	2,593	1,858	784
and the second sec	the state of the s	the second second	A STATISTICS OF A			

CLOSET ACCOMMODATION.

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APPLICATIONS FOR LOANS

FOR PROVISION OF SEWERAGE AND SEWAGE DISPOSAL WORKS AND WATER SCHEMES DURING 1932.

District. Glossop Boro'	Date of Inquiry. May 24	Amoun of Loan £6,342		Result of Inquiry. £5,268 sanctioned
Wirksworth U.	Oct. 26	£600	Sinking of borehole at Wigwell Valley to augment present supply	Sanction received t Work to be proceeded with
Bakewell R.	Oct. 25	£5,250	New reservoir at Eyam	Scheme sanctioned
Belper R.	Oct. 18	£3,000	Duffield water supply	Scheme sanctioned
Belper R.	Sept. 2	£2,500	Sewerage and sewage disposal of Birches Lane, South Wingfield	Scheme not sanctioned Revised scheme suggested
Chapel R.	Oct. 12	£2,500	Castleton water	Not yet known.
Chesterfield R.	Dec. 14	£2,247	Sewerage and sewage disposal of Coal Aston	Scheme sanctioned Work in progress
Chesterfield R.	May 26	£1,595	Construction of sewers in Mastin Moor, Worksop Road, Norbriggs and Woodthorpe	Scheme sanctioned Work completed
Chesterfield R.	Mar. 10 :	£45,749	Water supply for the Northern area	Not yet known.
Chesterfield R.	Mar. 10 :	£44,304	Water supply for the Southern area	Not yet known

HOUSING.

Following a complaint as to the general housing conditions, the houses at the following villages in Shardlow Rural District, Ambaston, Elvaston, Thulston, Great Wilne and Shardlow were inspected by the County Sanitary Inspectors, and full details of the defects found in 67 of the houses have been sent to the M.O.H. of the district concerned.

		H	ouses.
(1)	Defective pointing		54
(2)	Dampness		40
(3)	Defective floors		33
(4)	No sink		33
(5)	No proper receptacle for ashes		31
(6)	Defective chimney stacks		30
(7)	Defective or perished brickwork		28
(8)	Defective yard or path paving		27
(9)	No back door		26
(10)	Defective roof		25
(11)	Defective eaves spouting or down spouting	g	25
(12)	Defective drainage		18
(13)	Unsatisfactory pantry		14
(14)	Defective range or boiler		11
(15)			8
(16)	Insufficient bedroom accommodation for pro	per	
	separation of the sexes	•••	7
(17)	No through ventilation	•••	7
(18)	Defective privies	•••	7
(19)	Accumulation of ashes	•••	5
(20)	Defective washhouse floor	•••	4
(21)	Defective water pump		4
(22)	Houses having defective sink	••••	4
(23)	", ", ", sink-waste pipe		3
(24)	", ", ", washhouse roof	•••	3
(25)	" " " closet pail …		3
(26)	", ", higher ground abutting		3
(27)	", ", defective stairs …		2
(28)	" " " wall or ceiling plas	ter	2
(29)	", ", ", door		2
(30)	", ", copper	••••	1
(31)	", ", no drain to sink …		1
(32)	" " defective pail closet …	•••	1
(33)	" " no closet accommodation	•••	1
(34)	,, ,, animals so kept as to be nuisance	a	1
(35)	no pantry		1
(00)	Houses overcrowded 13		
	not alaan 1		
	», not clean 1		

ί.,

The following is a summary of the defects at the 67 houses :-

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

Nine licences for the production of Grade "A" milk were issued during 1932 under the Milk and Dairies Amendment Act, 1922.

MILK & DAIRIES (CONSOLIDATION) ACT, 1915 AND TUBERCULOSIS ORDER, 1925.—The procedure set out in the Survey Report for 1925 has again been followed during the year. The work done during the year under the Act and Order is set out below :—

Animals slaughtered under the Tuber- culosis Order	375
No. with advanced tuberculosis	309
No. with tuberculosis, but not advanced	66
No. not tuberculous	0
Milk samples examined	1,390
" found positive on direct examination	69
", found positive on inoculation	124
", found negative on inoculation	1,197

DAIRY FARMS AND COWSHEDS.

The following summary shows the conditions found at various dairy farms in the county districts inspected by the County Sanitary Inspectors, who were, in nearly every case, accompanied by the local sanitary inspector concerned. Full details of the requirements at each farm have been furnished to the latter for his information and necessary action.

TABLE XXVII.

		Heage Urban.	Ashbourne Rural.	Belper Rural (South).	Belper Rural (North).	Repton Rural.	Shardlow Rural.	Sudbury Rural.
		100.000		CO	WSHEI	os.		
SHED LIGHTING.			2010	3100			1 1000	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Sufficient		 11	16	35	1 53	27	19	3
Insufficient		 30	56	102	36	57	97	4
None		 8	14	30	13	5	4	-
SHED VENTILATION	t.						-	
Satisfactory		 11	26	46	42	21	32	3
Unsatisfactory		 35	56	116	38	65	87	4
None		 3	4	5	2	3	1	-

Shind Drain Ade. 42 71 136 53 75 71 7 None 6 12 29 24 13 45 None 1 3 2 5 1 4 Satiafactory 38 56 101 48 57 74 5 Satiafactory 38 56 101 48 57 74 5 Satiafactory 40 54 118 60 67 74 5 Satiafactory 17 29 50 22 34 33 No 11 23 29 19 8 9 Yes, satiafactory 11 23 29 18 8 5 Lor Over Overse. 8 16 112 27 33 6								
Satisfactory		Heage Urban.	Ashbourne Rural.	Belper Rural (South).	Belper Rural (North.)	Repton Rural.	Shardlow Rural.	Sudbury Rural.
Defective 1 3 2 24 13 45 SNED PAVISG. 11 30 66 34 32 46 2 Defective 38 56 101 48 57 74 5 Satisfactory 38 56 101 48 57 74 5 Satisfactory 40 54 118 60 67 74 5 Satisfactory 32 57 117 60 55 87 7 Defective 11 23 29 19 8 9 Yes, suisfactory 11 23 29 18 8 5 Satisfactory 8 16 112 27 33 69 Yes, suisfactory 8 60 105 18<	SHED DRAINAGE,	1 40	-	1 100			1	14
None 1 3 2 5 1 4 Shins Paviso.	Defeating	0						7
SHED PAVING. J J JO 66 34 32 46 2 Defective <		10.						-
Statisfactory 11 30 66 34 32 46 2 Defective 38 56 101 48 57 74 5 Statisfactory 9 32 49 22 22 46 2 Defective 40 54 118 60 67 74 5 Statisfactory 32 57 117 60 55 87 7 Defective 11 23 29 19 8 9 - None 11 23 29 19 8 9 - Yes, satisfactory 10 15 29 18 8 5 - LINEWASHINO. 8 18 55 55 56 51 7 Rain water only 8 18 70 74 7 Rain water only	None	1	0	-	0	1	*	
Defective	SHED PAVING.							a sterne
Defective	Satisfactory		30		34			2
Satisfactory 9 32 49 22 22 22 46 2 Defective 40 54 118 60 67 74 5 FEEDING TROUGHS. 32 57 117 60 55 87 7 Defective </td <td>Defective</td> <td> 38</td> <td>56</td> <td>101</td> <td>48</td> <td>57</td> <td>74</td> <td>5</td>	Defective	38	56	101	48	57	74	5
Satisfactory 9 32 49 22 22 22 46 2 Defective 40 54 118 60 67 74 5 FEEDING TROUGHS. 32 57 117 60 55 87 7 Defective </td <td>STANDINGS PAVING.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	STANDINGS PAVING.							
Defective 40 54 118 60 67 74 5 Satisfactory 32 57 117 60 55 87 7 Defective 17 29 50 22 34 33 None 17 29 50 22 34 33 Lorr Over 28 48 109 45 73 106 7 Yes, unsatisfactory 11 23 29 18 8 5 Yes, unsatisfactory 41 68 112 27 33 69 Ves unsatisfactory 41 68 112 27 33 69 Public or piped 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 <td></td> <td>. 9</td> <td>32</td> <td>49</td> <td>22</td> <td>22</td> <td>46</td> <td>2</td>		. 9	32	49	22	22	46	2
FEEDING TROUGHS, Satisfactory		10						5
Satisfactory <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td>			-					
Defective	FEEDING TROUGHS.	1		in the second			and a	100
None </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>7</td>								7
LOFT OVER. 28 48 109 45 73 106 7 Yes, satisfactory 11 23 29 19 8 9 Yes, unsatisfactory 10 15 29 18 8 5 Satisfactory 41 68 112 27 33 69 Watter SUPPLX. Public or piped 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 11 23 31 10 18 28 2 Over 600 c.f. per cow 13 26 63 43 46 69 2 500-600 , <		17	29	50	22	34	33	
No 11 23 29 19 8 9 Yes, unsatisfactory 10 15 29 18 8 5 LIMEWASHING. Satisfactory 41 68 112 27 33 69 Satisfactory 41 68 112 27 33 69 Watter Suppring Well 41 68 112 27 33 69 Watter Suppring Well 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 11 23 31 10 18 28 2 Over 600 c.f. per cow 13 26 63 43 46 69 2 13 5 5 - 200-300 .	None		-	-		-	-	-
No 11 23 29 19 8 9 Yes, unsatisfactory 10 15 29 18 8 5 LIMEWASHING. Satisfactory 41 68 112 27 33 69 Satisfactory 41 68 112 27 33 69 Watter Suppring Well 41 68 112 27 33 69 Watter Suppring Well 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 11 23 31 10 18 28 2 Over 600 c.f. per cow 13 26 63 43 46 69 2 13 5 5 - 200-300 .	LOFT OVER.							Sales (
Yes, satisfactory 11 23 29 19 8 9 Yes, unsatisfactory 10 15 29 18 8 5 Satisfactory 8 18 55 55 56 51 7 Needed 41 68 112 27 33 69 WATER SUPPLX. Public or piped 41 25 59 64 19 45 Spring or Well 1 1 Am-SPACE according to the 11 23 31 10 18 28 2 400-500 11 23 31 10 18 28 2 200-300 4 3 6 4 2 1 100-200 </td <td></td> <td> 28</td> <td>48</td> <td>109</td> <td>45</td> <td>73</td> <td>106</td> <td>7</td>		28	48	109	45	73	106	7
Yes, unsatisfactory 10 15 29 18 8 5 LIMEWASHING. Satisfactory 8 18 55 55 56 51 7 Needed 41 68 112 27 33 69 WATER SUPPLY. Public or piped 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 7 1 7 7 7 Over 600 c.f. per cow 13 26 63 43 46 69 2 200-600 11 19 45 12 18 17 3 300-400 10 15 22 13 5 5 200-300 25 49 94 <th< td=""><td></td><td> 11</td><td>23</td><td>29</td><td>19</td><td>8</td><td>9</td><td>-</td></th<>		11	23	29	19	8	9	-
Satisfactory 8 18 55 55 56 51 7 Needed 41 68 112 27 33 69 WATER SUPPLX. Public or piped 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 9 660 108 18 70 74 7 Ams. Stace according to the number of standings : 0 11 23 31 10 18 28 2 400-500 n n n 11 19 45 12 18 17 3 300-400 n		10	15	29	18	8	5	-
Satisfactory 8 18 55 55 56 51 7 Needed 41 68 112 27 33 69 WATER SUPPLX. Public or piped 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 9 660 108 18 70 74 7 Ams. Stace according to the number of standings : 0 11 23 31 10 18 28 2 400-500 n n n 11 19 45 12 18 17 3 300-400 n	LIMPWASHING					5		
Needed 41 68 112 27 33 69 WATER SUPPLX. Public or piped 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 1 1 Air.Space according to the number of standings: 0 0 13 26 63 43 46 69 2 500-600 n n n 11 123 31 10 18 28 2 400-500 n n n n n 10 15 22 13 5 5 $-$ 200-300 n Manure Dume. Satisfactory $$ 25 49 94 38 58 47 7 <		. 8	18	55	55	56	51	7
WATER SUPPLY. Public or piped 411 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only 1 1 1 AIR-SPACE according to the number of standings: 0ver 600 c.f. per cow 13 26 63 43 46 69 2 300-600 , , , , , 11 19 45 12 18 17 3 300-400 , , , , , 10 15 22 13 5 5 - 200-300 , , , , , 44 3 6 4 2 1 - 100-200 , , , , ,								
Public or piped 41 25 59 64 19 45 Spring or Well 8 60 108 18 70 74 7 Rain water only - 1 - - - 1 - Alr.Space according to the number of standings: 0ver 600 c.f. per cow 13 26 63 43 46 69 2 400-500 , , , 11 19 45 12 18 17 3 300-400 , , , 4 3 6 4 2 1 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -			00			00	00	
Spring or Well 8 60 108 18 70 74 7 Rain water only $-$ 1 $ -$ <td></td> <td></td> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td></td>				1				
Rain water only - 1 - - 1 - - 1 - AIR-SPACE according to the number of standings := 13 26 63 43 46 69 2 Over 600 c.f. per cow 11 23 31 10 18 28 2 400-500 , , 11 19 45 12 18 17 3 300-400 , , 10 15 22 13 5 5 20-300 , 4 3 6 4 2 1 25 49 94 38 58 47 7 Manure Dume.								
AIR-SPACE according to the number of standings: 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 13 26 63 43 46 69 2 500-600 ","","","",""," 11 19 45 12 18 17 3 300-400 30 10 15 22 13 5 5 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -		8		108	18	70		7
number of standings : 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 11 12 13 10 18 28 2 400-500 """"""""""""""""""""""""""""""""""""	Rain water only		1	-			1	-
number of standings : 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 11 12 13 10 18 28 2 400-500 """"""""""""""""""""""""""""""""""""	AIR-SPACE according to the							
Over 600 c.f. per cow 13 26 63 43 46 69 2 500-600 ", ", ", ", ", ", ", ", ", ", ", ", ", "								
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		13	26	63	43	46	69	2
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	200 200			31				2
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								3
100-200 ,, , , , , , , , , , , , , , , , , ,		the second se						-
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Dirty 30 41 100 26 34 66 6 STOOLS. Clean 7 23 20 36 44 23 — Not clean 42 63 147 46 45 97 7				39	17	7	29	
Not clean 42 63 147 46 45 97 7		00	41	100	26	34	66	6
Not clean 42 63 147 46 45 97 7	Smooth Cli		00	00	20	11	00	
	Net diam							-
Number of cowsheds visited 49 86 167 82 89 120 7	Hot clean	42	05	147	40	40		
	Number of cowsheds visited	49	86	167	82	89	120	7

81 TABLE XXVII—continued.

		Heage Urban.	Ashbourne Rural.	Belper Rural (South.)	Belper Rural (North).	Repton Rural.	Shardlow Rural.	Sudbury Rural.
Dairy.	Satisfactory Unsatisfactory None	 3 14 7	12 17 7	1 16 41 11	FARMS.	10 23 11	7 34 17	1 1 -
Number of	farms visited	 24	36	68	41	44	58	2

TABLE XXVII—continued

The following Summary shows the work ascertained to have been carried out in improving the condition of dairy farms since the year 1932 :—

						83									
		Norton.	1	22	10	∞	11	10	67	9	~		27	1	20 20
	ICTIS	Hartshorne.	193	0	П	4	6 -1	=	61	1 2	1	1	106	14	5 0 0 E
	DISTRICTS	Dale. Uale.	8	111	1	111	11	11	1	01	1	1	1	1	3111
26.		Chapel-en-	488	3.6	13	37 6 21	25	42 37	27	38 53	~	-	37	н	334
r, 19	RURAL	Basford.	5	111	1	111	11	11	1	~	1	1	4	1	8111
Orde	RU	Ashbourne.	1400	15	16	1 12	15	15	1-	11	8	1	20	30	0 200
Dairies Order, 1926.		Wirksworth.	19	1.6.1	03	10 01 00	ee 4	10 10	1	3	4	67	10	8	3 00
d Da		Swadlincote.	41	0 00	9			13	1	9	1	1	9	1	E
lk and		Darley.	8	@	6	°	a	66	1	18	-	-	6	1	1 4 20
Milk		Ripley.	19	4 10	61	400	01	-	1	53.33	67	1	1	61	8-11
22.		New Mills.	1	111	1	111	11	11	1	11	-	1	1	1	2111
t, 19		Matlocks.	161	1 12 10	00	16	10	23	1	~	-	-	133	6	63 1 4 3 1
t) Ac		Long Eaton.	21		20		07	20	1	- 00	-	-	-	1	= - *
Imen		(Boro').		111	1	111	11	11	I	-	1	1	1-	L	
men	ICTS	Heanor.	35 55	N 2 N	16		es ro	40	1	01 KD	6	1		**	1 0 10 1
Milk and Dairies (Amendment) Act, 1922.	DISTRICTS	Неаде.	49	- 03	67	-11	11	4 01	67	=	-	1	1	1	27
table AA	DI-DA	(Boro').	88	00 00 00	1	01 01	11	1.1	T	19	40	61	00	I	14 -
and	URBAN	Clay Cross.	81		œ	-	- 10		1		1	1	1	ŀ	8 01
MIK	D	(Boro').	5	121	œ	o o	8 8	04	1-	~	1	1	8	1	6
		Buxton.	39	0 00	1	-	=	11	1		1	1	12	4	52 -
1915		Bonsall.	83	4 22	50	0. 19 33	91-	22	61	41	9	4	20	1	€ ∞ −
Act,		Bolsover.	4-	- 10	1	••	11	es	01	14	1	63	1	I	1 10 1 23
tion)		Belper.	39	1 12 75	16	=	11	9 X	1	20	1	1	П	~	1 8
olida		Bakewell.	1 28	16 4 21	00	4.01	01 00	- 3	-	6 1	~	1	20	67	0 01 01
Cons		Ashbourne.	- 00	04	1	-	11	11	ł	1.1	1	T	1	I	
ries		Alvaston &	11		67	711	.11	11	1	11	1	1	L	1	5 12
d Da		Alfreton.	70	~	~	~ -	~	- 00	~	- 00	1	1	~	1	8
Milk and Dairies (Consolidation) Act, 1915.			Cowsurens. Number in District New Cowsheds built	Sheds not now used for milk beast New shed floors laid Shed floors repaired	Feeding troughs re- paired or provided	Lighting and venti- lation improved Lofts removed Loft floors improved	Drain inlets removed to outside Drainage provided	Walls rendered in cement Standings paved	Sheds remodelled internally	Approach paving re- paired Sheds cleaned up	manure dump re- moved	proved	is completed	is in progress	FARMS. Number in District New dairies built Dairies improved Farms since given up
			Con	00 74 00	H 1			- 020	2	4 20 4	a .		4 ×	4	NNUH

DAIRIES, COWSHEDS, AND MILKSHOPS. DETAILS OF WORK DONE BY LOCAL SANITARY INSPECTORS. TABLE XXIX.

	Number on	Inspections	Notices	Nuisances
Urban Districts.	Register.	made.	served.	abated.
Alfreton	84	315	2	2
Alvaston & Boulton	16	29	1	4
Ashbourne	31	62	20	30
Bakewell		101	2	2
Baslow		2		_
Belper		87	4	3
Bolsover		107	5	17
Bonsall	40	157	8	104
Brampton & Walton		135		13
Buxton (Boro')	67	429	9	9
Chesterfield (Boro')	288	301	7	8
Clay Cross	32	10	3	8
Dronfield	9	4	_	_
Glossop (Boro')	00	580	25	25
Heage	07	39	27	6
Heanor	200	73	35	35
Ilkeston (Boro')	170	130	2	2
Long Eaton	37	120	10	10
Matlocks	161	143	3	139
New Mills	0.4	46	_	-
North Darley	10	60		12
Ripley	52	58	3	3
South Darley	00	19		
Swadlincote	0.2	163	3	3
Wirksworth	45	46	46	46
Rural Districts.	1651	3216	215	481
Allhamma	690	300	150	80
D 1 11			150	339
Bakewell Basford	500	764	65	
	27	34	3	3 38
Belper	380	390	39	
Blackwell	366	470	19	27
Chapel-en-le-Frith	334	296	64	316
Chesterfield	514	246	155	299
Clowne	87 69	198	3	3.
Glossop Dale	62	101	2	20
Hartshorne & Seals	116	63	35	29
Hayfield	59	99	1	18
Norton	90	75		32
Repton	242	587	75	324
Shardlow	391	91	49	52
Sudbury	202	219	-	-
Rural Districts	4060	3933	660	1560
Urban Districts	1651	3216	215	481
Whole County	5711	7149	875	2041

CLEAN MILK COMPETITIONS.

During the past ten years the Agricultural Institute has devoted special attention to educating milk producers in the principles of clean milk production. Lectures and the circulation of printed publications on the subject have been followed by competitions in which the efficiency of performance has been assessed by bacteriological tests of milk samples taken on the farms, and these competitions have afforded opportunities of observing the results of working under different conditions and have enabled the advisory staff to determine the relative importance of the various factors concerned.

In the 1932 contests, 170 surprise samples of milk were tested from 31 competing farms. These samples were taken during the months May—August, when bacterial counts are prone to be high, when milk sours most readily, and when the differences due to defective or improved technique are greatest.

Of the 170 samples, tested at the age of 24 hours, 66% proved to be of "certified" quality and a further 13% were up to Grade A standard. Of the samples taken from competitors who have previously attained a satisfactory standard, 76% were of certified quality. It may fairly be stated therefore, that the methods and equipment necessary for clean milk production are understood and can be translated into farm practice.

The following memorandum and rules which summarise the conclusions arrived at as a result of the above work, have recently been distributed as a guide to farmers desiring to improve their milk supply :—

SEVEN RULES FOR CLEAN MILK PRODUCTION.

The laboratory tests for cleanliness measure the quantity of germ life present. Germs pass through the closest filter pad as easily as flies go through wire netting. Aim to need no "syle" or filter by the following precautions :—

- 1. Keep the cows' flanks and udders clean and free from dust. Clipping the hair saves labour in this respect. Dirty udders should be washed and dried.
- 2. Make no dust at milking time—no feeding of hay or mucking out just before milking. If cows have been out, allow air to settle before milking begins.
- 3. Milk without "bell-pulling"—pressure only. Covered pails prevent sediment dropping into the mouth of the can—off udder, flanks and clothes of milkers. If muslin covers are used, do not milk on to the muslin but through a space left. Milk with clean hands and wear clean overalls.
- 4. Do not leave milk uncovered in the cow shed or carry it across the yard in open pails.

5. Protect the milk when passing over the cooler. Where there is no milk house, cooling should be done by standing the churns in water. Hanging the cooler outside is a means of contaminating milk with germ-laden dust from the yard. Even where the cooler is fixed inside a dairy, it is advisable to protect the milk with a muslin-covered frame. Metalcovered coolers are now obtainable.

Milk may be free from sediment yet heavily germ-laden and liable to sour quickly. The origin of these souring germs is the udder or the utensils.

Milk left in the udder is 12 hours old at next milking time and, having been kept at blood heat, becomes heavily charged with germs. Thorough milking and stripping is therefore important, but even then it is

- 6. Desirable to reject the first two squirts from each teat when beginning to milk a cow.
- 7. Utensils should be kept sterile by steaming or boiling after washing. In summer, twice a day boiling is necessary to keep them sterile. Do not rinse with cold water just before use: scald and allow to cool if you like, but above all never permit the use of a wet cloth to wipe out utensils after sterilising. Cloths are a great harbour for germs and few samples of water are germ free.

The seven rules then are :--

- 1. Clean udders and flanks.
- 2. No dust at milking time.
- 3. Skilful and thorough milking.
- 4. Protection after milking.
- 5. Covered cooling.
- 6. Reject the foremilk.
- 7. Sterile utensils and receptacles.

While the clean milk contests as hitherto carried out have served a useful purpose, the merits of a different kind of competition are now being tested. The former type of contest served to train a limited number of farmers to certified milk standard, for which quality of milk the demand is very small indeed. The work now in hand however, aims at a lower standard of attainment in the individual producer but in an improvement that extends to a larger number of dairies. A beginning has been made with 103 farmers in a district near Derby. Monthly samples have been taken during the past quarter and there is no doubt whatever that the scheme is succeeding.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Mr. John White, F.I.C., the County Analyst, reports on the work carried out under the Act, as follows :---

The collection of samples for analysis under the above Act is made by Sampling Officer William Etchells, who is a whole-time Officer, duly appointed by the County Council under the Food and Drugs (Adulteration) Act. In addition, he acts as Official Sampler and Inspector under the Fertilisers and Feeding Stuffs Act, 1926. His work is supervised by me as County Analyst and Agricultural Analyst, and he collects the samples day by day throughout the year. Arrangements are made whereby the County is covered as systematically as possible.

The following is a summary of the work done during the year 1932 :---

Total samples	Percentage	Milk	Percentage
analysed.	adulterated.	samples.	adulterated.
2083	1.2	803	3.4

The average composition of the milk samples was as follows :---

Non-fatty		Total
solids.	Fat.	solids.
8.74	3.62	12.36

THE PUBLIC HEALTH (PRESERVATIVES IN FOOD) REGULATIONS.

Under these regulations, the only preservative substances permitted to be added to foodstuffs are Sulphur Dioxide and Benzoic Acid, the addition being controlled by a Schedule stating the maximum amount of each which may be added to certain specified articles of food. Any article of food not included in the Schedule must be sold free from preservatives.

Sausages, Coffee Extract, Pickles and Sauces may contain Preservatives as provided in the Schedule, but information of their presence is to be given to the purchaser, either by a label on the goods or a notice displayed in the shop.

The whole of the samples of milk, butter, cream, and margarine were free from preservatives.

In addition to the articles named in the last paragraph, 418 samples of various materials were specially examined for the presence of preservatives.

The provisions of these Regulations appear to be well observed by traders in the County, and no serious infringement of these Regulations was found during the year, with the exception of two samples of sausages. One contained 60 parts per million of Sulphor Dioxide, and was sold without either label or notice, and the vendor was accordingly formally cautioned. The other contained 590 parts per million of Sulphur Dioxide, and as this amount exceeds the maximum of 450 parts per million prescribed by the Regulations, proceedings were instituted against the vendor, who was ordered to pay $\pounds 3$ 17s. 6d. costs.

Thirteen specimens of various kinds of "Crustless Cheese" were specially examined for the presence of Tin, and all were found to be free from this metal. No evidence of the presence of Arsenicwas found in any of the samples of Cocoa and Sweets.

Water.—The Urban and Rural District Councils in the County submit for analysis samples of water, under an arrangement made by the Public Health Committee, whereby they are analysed at nominal fees.

The number of samples received during 1932 was 196.

Samples of water, sewage effluents, etc., are periodically sub mitted to me on behalf of the Public Health Committee, and general chemical work is undertaken for the various Committees of the County Council, as required.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

Notifiable Diseases.—The following Table, prepared from information given by the Local Medical Officers of Health and compiled at the request of the Ministry of Health, shews the incidence of notifiable diseases in the County during the year 1932 :—

		Total Cases Notified.	Cases admitted to Hospital.	Deaths.
Smallpox		 3	3	_
Scarlet Fever		 794	609	7
Diphtheria		 459	416	34
Enteric Fever		 47	31	3
Puerperal Fever		 31	16	14
Puerperal Pyrexia		 52	8	28
Pneumonia		 951	36	435
Cerebro-spinal Feve	r	 99	97	43
Erysipelas		 214	3	_*
Ophthalmia Neonat	orum	 60	7	_*
Encephalitis Lethar		 4	1	
Measles		 *	_*	65
Chickenpox		 *	*	

TABLE XXX.

* No information available.

TABLE XXXI.

Analysis in Age Groups of Cases of Notifiable Diseases during 1932.

	Small- pox.	Scarlet Fever.	Diphth- eria.	Typhoid Fever.	Puerperal Fever.	Puerperal Pyrexia.	Pneu- monia,	Erysi- pelas.
Under 1 year	-	3	3	-	-	-	60	1
1 "	-	13	9	2	-	-	61	2
2	-	30	17	-	-	-	49	3
3 ,,	-	50	18	3	-	-	49	-
4	-	57	32	-	-		37	2
5 ,,	-	301	160	5	-	-	125	4
10 ,,	-	206	94	4	-	-	59	4
15 "	-	65 .	37	7	-	1	54	5
20 ,,	1	56	62	11	23	40	111	28
35 "	1	10	18	7	8	8	106	40
45 ,,	-	3	9	6	-	3	157	75
5 and over	1	-		2	-	-	83	50
Total	3	794	459	47	31	52	951	214

TABLE XXXII.

Cases of Notifiable Diseases notified during 1932

as reported by the Local Medical Officers of Health.

	Tuber	culosis.	Small-	Scarlet	Diph-	Enteric	Puer-	Puer-	bro-	Ery-	Onhth	Enceph.
Urban Districts	Pulm-	lau	Pox.	Fever.	theria.	Fever.	perai	peral	Quincl	sipelas.	Neon.	Letharg
	onary.	Other			and the second sec		Fever.	Pyrexia	Fever.			
Alfreton		9		11	43		2	2	3	5	3	
Alvast'n & Boult'n	5			4	4					1		
Ashbourne	1 1	2		1	2					1		
Bakewell	4	2		7	1	5	1	1		1	1	
Baslow	1											
Belper	1.0	4		2	2		1	i	2	4	2	
Bolsover	0	11	1	21	8	1	2	-	10	3	ĩ	
								••			100	
Bonsall		i		2	2		••	••		••		
Brampt'n&Walt'n				6	11	1	••				1	
Buxton (Boro')	9	4	••			1	**	3	11	2		••
Chesterfield (Boro')	53	24	••	85	28	1	3	7	14	34	2	
Clay Cross	5	1		8	9		1		10	2		
Dronfield		::		18	3	1	•••	••	1	1	1	
Glossop (Boro')		10		58		1	2	1			3	
Heage	2	1		1	••	••		1				
Heanor	15	7	2	11	5	4		2		10		
Ilkeston (Boro')	23	5		22	9			1	2	3		
Long Eaton	20	6		80	1	4	2	2		3	1	
Matlocks	3	3		2	5					2	1	
New Mills	2	6		3	4			1		2	1	
North Darley	6	2		11						1		
Ripley	5	3		6	2				1	5	2	
Paul Dala												
Class 311	<u>i9</u>	14		25	8			2	ï	14	3	••
TTP-1. (1	3	3			3		2	ĩ		4	-1	
Wirksworth			••			••	-				-	1
The District	020	118	3	384	149	18	16	25		98	23	
Urban Districts	230	110	0.	0.04	140	10	10	20	44	2425		1
	and the second se							1.11			40	
											20	
	Tuberc	ulosis							Cere			
	Tuberc	or other designation of the local division o		Scarlet	Diph-	Enteric	Puer- peral	Puer- peral	Cere- bro-	Ery	Ophth.	Enceph.
Rural Districts.	Pulm-	ulosis' Other.	Small Pox.		Diph- theria.	Enteric Fever.	Puer-	Puer-	Cere- bro- Spinal		Ophth.	Enceph.
Rural Districts.		or other designation of the local division o		Scarlet			Puer- peral	Puer- peral	Cere- bro-	Ery	Ophth.	Enceph.
	Pulm-	Other.		Scarlet			Puer- peral	Puer- peral	Cere- bro- Spinal	Ery	Ophth.	Enceph. Letharg
Ashbourne	Pulm- onary 5	or other designation of the local division o	Pox.	Scarlet Fover.	theria.	Fever.	Puer- perai Fever.	Puer- peral Pyrexia 1	Cere- bro- Spinal Fever.	Ery sipelas. 9	Ophth. Neon.	Enceph. Letharg
Ashbourne Bakewell	Pulm- onary 5 10	Other.	Pox.	Scarlet Fover.	theria.	Fever.	Puer- peral Fever.	Puer- peral Pyrexia 1	Cere- bro- Spinal Fever.	Ery sipelas. 9 5	Ophth. Neon.	Enceph. Letharg
Ashbourne Bakewell Basford	Pulm- onary 5 10 3	Other. 3 4 1	Pox.	Scarlet Fover.	theria. 2 24 1	Fever.	Puer- peral Fever.	Puer- peral Pyrexia 1	Cere- bro- Spinal Fever.	Ery sipelas. 9 5 	Ophth. Neon.	Enceph. Lethsrg
Ashbourne Bakewell Basford Belper	Pulm- onary 5 10 3 14	Other. 3 4 1 5	Pox.	Scarlet Fover. 2 6 7	theria. 2 24 1 7	Fever.	Puer- peral Fever.	Puer- peral Pyrexia 1 1	Cere- bro- Spinal Fover.	Ery sipelas. 9 5 4	Ophth. Neon.	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell	Pulm- onary 5 10 3 14 28	Other. 3 4 1 5 22	Pox.	Scarlet Fever. 2 6 7 56	2 24 1 7 37	Fever. 1 1 1 2 13	Puer- perai Fever.	Puer- peral Pyrexia 1 1 5	Cere- bro- Spinal Fever. 1 17	Ery sipelas. 9 5 4 15	Ophth. Neon. 1 2 6	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith	Pulm- onary 5 10 3 14 28 10	Other. 3 4 1 5 22 7	Pox.	Scarlet Fever. 2 6 7 56 9	theria. 2 24 1 7 37 6	Fever. 1 1 2 13 1	Puer- peral Fever.	Puer- peral Pyrexia 1 1 5 2	Cere- bro- Spinal Fover. 1 17	Ery sipelas. 9 5 4 15 3	Ophth. Neon. 1 2 6 2	Enceph. Lethsrg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield	Pulm- onary 5 10 3 14 28 10 55	Other. 3 4 1 5 22 7 31	Pox.	Scarlet Fever. 2 6 7 56 9 192	theria. 2 24 1 7 37 6 171	Fever. 1 1 2 13 1 7	Puer- peral Fever.	Puer- peral Pyrexia 1 1 5 2 11	Cere- bro- Spinal Fever. 1 17 23	Ery sipelas. 9 5 4 15 3 48	Ophth. Neon. 1 2 6 2 19	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne	Pulm- onary 5 10 3 14 28 10 55 15	Other. 3 4 1 5 22 7 31 3 1 3	Pox.	Scarlet Fever. 2 6 7 56 9 192 25	2 24 1 7 37 6 171 26	Fever. 1 1 2 13 1 7 2	Puer- peral Fever. 1 3 3	Puer- peral Pyrexia 1 1 5 2	Cere- bro- Spinal Fever. 1 17 23 12	Ery sipelas. 9 5 4 15 3 48 7	Ophth. Neon. 1 2 6 2	Enceph. Lethsrg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale	Pulm- onary 5 10 3 14 28 10 55 15 5 5	Other. 3 4 1 5 22 7 31 3 1 3 1	Pox.	Scarlet Fever. 2 6 7 56 9 192 25 8	2 24 1 7 37 6 171 26 	Fever. 1 1 2 13 1 7 2 	Puer- peral Fever. 1 3 3 	Puer- peral Pyrexia 1 1 5 2 11	Cere- bro- Spinal Fever. 1 17 23 12 	Ery sipelas. 9 5 4 15 3 48 7 	Ophth. Neon. 1 2 6 2 19	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne &Seals	Pulm- onary 5 10 3 14 28 10 55 15 5 6	Other. 3 4 1 5 22 7 31 3 1 6	Pox.	Scarlet Fever. 2 6 7 56 9 192 25 8 8	2 24 1 7 37 6 171 26	Fever. 1 1 2 13 1 7 2	Puer- peral Fever. 1 3 3 	Puer- peral Pyrexia 1 1 5 2 11 	Cere- bro- Spinal Fever. 1 17 23 12	Ery sipelas. 9 5 4 15 3 48 7 2	Ophth. Neon. 1 2 6 2 19 	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne &Seals Hayfield	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7	Other. 3 4 1 5 22 7 31 3 1 3 1	Pox.	Scarlet Fever. 2 6 7 56 9 192 25 8 8 3	theria. 2 24 1 7 37 6 171 26 2 	Fever. 1 1 2 13 1 7 2 	Puer- peral Fever. 1 3 3 	Puer- peral Pyrexia 1 1 5 2 11 	Cere- bro- Spinal Fever. 1 17 23 12 	Ery sipelas. 9 5 4 15 3 48 7 2 4	Ophth. Neon. 1 2 6 2 19 	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne &Seals Hayfield Norton	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7 4	Other. 3 4 1 5 22 7 31 3 1 6 1 ···	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 8 3 6	theria. 2 24 1 7 37 6 171 26 2 2	Fever. 1 1 2 13 1 7 2 	Puer- perai Fever. 2 	Puer- peral Pyrexia 1 1 5 2 11 2 	Cere- bro- Spinal Fever. 1 17 23 12 1	Ery sipelas. 9 5 4 15 3 48 7 2 4 6	Ophth. Neon. 1 2 6 2 19 	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne &Seals Hayfield Norton Repton	Pulm- onary 5 10 3 14 28 10 55 15 5 6 7 4 10	Other. 3 4 1 5 22 7 31 3 1 6 1 6	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 8 3 6 17	theria. 2 24 1 7 37 6 171 26 2 2 11	Fever. 1 1 2 13 1 7 2 	Puer- perai Fever. 3 3 2 2	Puer- peral Pyrexia 1 1 5 2 11 2 2 2	Cere- bro- Spinal Fever. 1 17 23 12 1 	Ery sipelas. 9 5 4 15 3 48 7 2 4 6 4	Ophth. Neon. 1 2 6 2 19 2	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne &Seals Hayfield Norton Repton Shardlow	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7 4	Other. 3 4 1 5 22 7 31 3 1 6 1 ···	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 8 3 6	theria. 2 24 1 7 37 6 171 26 2 2 11 19	Fever. 1 1 2 13 1 7 2 1	Puer- perai Fever. 2 	Puer- peral Pyrexia 1 1 5 2 11 2 	Cere- bro- Spinal Fever. 1 17 23 12 1 	Ery sipelas. 9 5 4 15 3 48 7 2 4 6	Ophth. Neon. 1 2 6 2 19 	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne &Seals Hayfield Norton Repton	Pulm- onary 5 10 3 14 28 10 55 15 5 6 7 4 10	Other. 3 4 1 5 22 7 31 3 1 6 1 6	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 8 3 6 17	theria. 2 24 1 7 37 6 171 26 2 2 11	Fever. 1 1 2 13 1 7 2 1 	Puer- perai Fever. 3 3 2 2	Puer- peral Pyrexia 1 1 5 2 11 2 2 2	Cere- bro- Spinal Fever. 1 17 23 12 1 	Ery sipelas. 9 5 4 15 3 48 7 2 4 6 4	Ophth. Neon. 1 2 6 2 19 2	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne & Seals Hayfield Norton Repton Shardlow Sudbury	$\begin{array}{r} \hline Pnlm-onary \\ 5\\ 10\\ 3\\ 14\\ 28\\ 10\\ 55\\ 15\\ 5\\ 6\\ 7\\ 4\\ 10\\ 29 \\ \end{array}$	Other. 3 4 1 5 22 7 31 3 1 6 1 6 9	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 8 3 6 17 71 	theria. 2 24 1 7 37 6 171 26 2 11 19 2	Fever. 1 1 2 13 1 7 2 1 	Puer- perai Fever. 1 3 3 2 2 4	Puer- peral Pyrexia 1 1 5 2 11 2 11 2 11 2 3	Cere- bro- Spinal Fever. 1 17 23 12 1 1 1	Ery sipelas. 9 5 4 15 3 48 7 2 4 6 4 9 	Ophth. Neon. 1 2 6 2 19 2 19 2 5	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne &Seals Hayfield Norton Repton Shardlow	$\begin{array}{r} \hline Pnlm-onary \\ 5\\ 10\\ 3\\ 14\\ 28\\ 10\\ 55\\ 15\\ 5\\ 6\\ 7\\ 4\\ 10\\ 29 \\ \end{array}$	Other. 3 4 1 5 22 7 31 3 1 6 1 6 9	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 3 6 17 71	theria. 2 24 1 7 37 6 171 26 2 2 11 19	Fever. 1 1 2 13 1 7 2 1 	Puer- perai Fever. 1 3 3 2 2 4	Puer- peral Pyrexia 1 1 5 2 11 2 11 2 11 2 3	Cere- bro- Spinal Fever. 1 17 23 12 1 1 1	Ery sipelas. 9 5 4 15 3 48 7 2 4 6 4 9	Ophth. Neon. 1 2 6 2 19 2 19 2 5	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne & Seals Hayfield Norton Repton Shardlow Sudbury	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7 4 10 29 	Other. 3 4 1 5 22 7 31 3 1 6 1 6 9 	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 8 3 6 17 71 	theria. 2 24 1 7 37 6 171 26 2 11 19 2	Fever. 1 1 2 13 1 7 2 1 	Puer- perai Fever. 2 2 4 	Puer- peral Pyrexia 1 1 5 2 11 2 11 2 2 3 	Cere- bro- Spinal Fever. 1 17 23 12 1 1 1 	Ery sipelas. 9 5 4 15 3 48 7 2 4 6 4 9 	Ophth. Neon. 1 2 6 2 19 2 5 	Enceph. Letharg
AshbourneBakewellBasfordBelperBlackwellChapel-en-le-FrithChesterfieldClowneGlossop DaleHartshorne & SealsHayfieldNortonReptonShardlowSudburyRural Districts	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7 4 10 29 201	Other. 3 4 1 5 22 7 31 3 1 6 1 6 9 99	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 3 6 17 71 410	theria. 2 24 1 7 37 6 171 26 2 11 19 2 310	Fever. 1 1 2 13 1 7 2 1 	Puer- perai Fever. 2 2 4 	Puer- peral Pyrexia 1 1 5 2 11 2 11 2 2 3 	Cere- bro- Spinal Fever. 1 17 23 12 1 1 1 	Ery sipelas, 9 5 4 15 3 48 7 2 4 6 4 9 116	Ophth. Neon. 1 2 6 2 19 2 5 37	Enceph. Letharg
Ashbourne Bakewell Basford Belper Blackwell Chapel-en-le-Frith Chesterfield Clowne Glossop Dale Hartshorne & Seals Hayfield Norton Repton Shardlow Sudbury	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7 4 10 29 	Other. 3 4 1 5 22 7 31 3 1 6 1 6 9 	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 8 3 6 17 71 	theria. 2 24 1 7 37 6 171 26 2 11 19 2	Fever. 1 1 1 2 13 1 7 2 1 2 9	Puer- peral Fever. 2 4 15	Puer- peral Pyrexia 1 1 5 2 11 2 11 2 3 27	Cere- bro- Spinal Fever. 1 17 23 12 1 1 55	Ery sipelas. 9 5 4 15 3 48 7 2 4 6 4 9 	Ophth. Neon. 1 2 6 2 19 2 5 	Enceph. Letharg
AshbourneBakewellBasfordBelperBlackwellChapel-en-le-FrithChesterfieldClowneGlossop DaleHartshorne & SealsHayfieldNortonReptonShardlowSudburyRural DistrictsUrban Districts	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7 4 10 29 201 230	Other. 3 4 1 5 22 7 31 3 1 6 1 6 9 99 118	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 3 6 17 71 410 384	theria. 2 24 1 7 37 6 171 26 2 11 19 2 310 149	Fever. 1 1 1 2 13 1 7 2 1 2 9 18	Puer- peral Fever. 1 3 3 2 4 15 16	Puer- peral Pyrexia 1 2 11 2 11 2 3 27 25	Cere- bro- Spinal Fever. 11 17 23 12 12 1 55 44	Ery sipelas, 9 5 4 15 3 48 7 2 4 6 4 9 116 98	Ophth. Neon. 1 2 6 2 19 2 5 37 23	Enceph. Letharg
AshbourneBakewellBasfordBelperBlackwellChapel-en-le-FrithChesterfieldClowneGlossop DaleHartshorne & SealsHayfieldNortonReptonShardlowSudburyRural Districts	Pnlm- onary 5 10 3 14 28 10 55 15 5 6 7 4 10 29 201	Other. 3 4 1 5 22 7 31 3 1 6 1 6 9 99	Pox.	Scarlet Fover. 2 6 7 56 9 192 25 8 8 3 6 17 71 410	theria. 2 24 1 7 37 6 171 26 2 11 19 2 310	Fever. 1 1 1 2 13 1 7 2 1 2 9	Puer- peral Fever. 2 4 15	Puer- peral Pyrexia 1 1 5 2 11 2 11 2 3 27	Cere- bro- Spinal Fever. 1 17 23 12 1 1 55	Ery sipelas, 9 5 4 15 3 48 7 2 4 6 4 9 116	Ophth. Neon. 1 2 6 2 19 2 5 37	Enceph. Letharg

TABLE XXXIII. Shewing the number of Cases, and the number of Deaths given by Registrar-General, the case rate per 1,000 of population and the case mortality per cent from Smallpox, Scarlatina, Diphtheria and Typhoid Fever.

-	Scarlatina, Diphtheria and Typhold Fever.															
		SMAL	LPOX		5	SCARI	ATIN	A.				CROUP.	1	урно	ID FEV	ER.
JURBAN DISTRICTS.	No. of Cases.	No. of Deaths.	Case rate per 1,000 of population.	Case mortality per cent.	No. of Cases.	No. of Deaths.	Case rate per 1,000 of population.	Case mortality per cent.	No. of Cases.	No. of Deaths.	Case rate per 1,000 of population.	Case mortality per cent.	No. of Cases.	No of Deaths.	Case rate per 1,000' of population.	Case mortality per cent.
Alfreton Alvaston & Boulton Ashbourne Bakewell Baslow Belper Bolsover Bonsall Brampton & Walton Buxton (Boro') Chesterfield (Boro') Clay Cross Dronfield Glossop (Boro') Heage Heanor Ilkeston (Boro') Long Eaton Matlocks New Mills North Darley South Darley Swadlincote	···· ···		···· ···· ·09 ··· ··· ··· ··· ··· ···		$\begin{array}{c} 11\\ 3\\ 1\\ 7\\\\ 2\\ 21\\\\ 2\\ 6\\ 85\\ 9\\ 18\\ 58\\ 1\\ 11\\ 22\\ 80\\ 2\\ 3\\ 11\\ 5\\\\ 25\\ \end{array}$	···· ···· ···· ···· ···· ···· ···· ···· ····	*51 •77 •22 2·29 •15 1·78 *83 •39 1·32 1·06 3.98 3·00 •25 49 •67 3·48 •19 •35 2·52 *37 1·23	···· ···· ···· ···· ···· ····	$\begin{array}{c} 42\\ 3\\ 2\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\$	5 1 1 1 4 	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	11-90 33-33 50-00 14-28 14-28 14-28 14-28 	 5 1 1 1 4 4 4 	···· ··· ··· ··· ··· ··· ··· ··· ··· ·	 1·63 ·09 ·01 ·01 ·17 ·17 ·17 ·17 	···· ··· ··· 100·00 ··· 100·00
Wirksworth Urban Districts			····		383		1.20		2	12	·51 -45	 8·33		2	····	
RURAL DISTRICTS.		SMAL	LPOX.		s	CARL	ATIN	•			TERIA TOUS C		т	YPHOI	D FEV	ER.
AshbourneBakewellBasfordBelperBlackwellChapel-en-le-FrithChesterfieldClowneClossop DaleHartshorne & SealsHayfieldNortonShardlowSudburyRural DistrictsUrban Districts			··· ··· ··· ··· ··· ··· ··· ··· ··· ··		$ \begin{array}{c} 2 \\ 6 \\ \\ 8 \\ 55 \\ 9 \\ 188 \\ 25 \\ 8 \\ 9 \\ 2 \\ 6 \\ 18 \\ 71 \\ \\ 407 \\ 383 \end{array} $	··· ··· ··· ··· ··· ··· ··· ···	·19 ·32 ·31 1·28 ·50 2·27 1·40 2·04 1·04 1·04 1·04 ·47 ·83 ·96 1·79 ··· 1·34 1·20	 1·81 1·59 4·00 2·81 1·72	2 19 7 37 6 174 26 1 1 19 2 306 144	2 1 3 15 15 	-19 1-03 -27 -86 -33 2-10 1-46 -11 -27 -59 -48 -78 -78 1-01 -45	10.52 14.28 8.10 8.62 5.26 7.18 8.33	1 1 2 13 1 7 2 1 1 29 17		·09 ·05 ·55 ·07 ·30 ·05 ·08 ·11 ··· ·14 ··· ·09 ·05	··· 7·69 ··· ··· ··· ··· ··· ··· ··· ··· ···
WILL CL.	3		-00		790		1.20	····		34	-40	7.55	46	3	.05	6.52
Whole County			001		100 1		1.21	00	400	04	12	1 00 1	40	3	07	0.52

Smallpox.—During the year, only three cases of smallpox were notified. This is a remarkable drop and compares with 696, 131, and 244 cases for the preceding three years. Of the three cases in 1932, one occurred in Bolsover and two in Heanor. None of them was vaccinated.

Diphtheria.—The number of cases of Diphtheria notified during the year, as given by the Registrar-General is 450, compared with 472 in 1931, whilst the number of deaths was 34 as against 24 in 1931. The case mortality in 1932 was 7.55 as compared with 5.08 in 1931.

All the District Councils in the Administrative County supply diphtheria antitoxin free of charge where necessary.

The numbers of specimens received at the County Bacteriological Laboratory for examination for the diphtheria bacillus during the past eight years are as follows :—

1925	 5,802
1926	 5,102
1927	 4,154
1928	 3,976
1929	 4,695
1930	 8,407
1931	 4,664
1932	 5,748

Following consideration of Memo. 107, recently received from the Ministry of Health, the Public Health Committee instructed me to circularise all medical practitioners within the County reminding them of the possibilities of producing artificial immunity against diphtheria, the simplicity of the procedure, the good results which may be expected to follow its adoption on a large scale, and, with the adoption of the usual precautions, the absence of disturbing local or general reactions in the patient. The letter set out in some detail the steps to be adopted in producing active immunisation, a description of the Schick test, its significance, how to read it and how to carry it out. Detailed instructions as to the method of producing artificial immunisation and the possibility of calculating the efficacy of the immunisation were also given and medical practitioners were urged to do their utmost to persuade those with whom they came into contact to submit to immunisation.

Scarlet Fever.—During the year, 790 cases are stated by the Registrar-General to have been notified, of which seven proved fatal, compared with 951 cases and four deaths in 1931. The figures for 1932 give a case mortality of \cdot 88, compared with \cdot 42 the rate for the previous year.

Whooping Cough. 40 deaths occurred during the year from this disease, as compared with 34 in 1931. The figures for 1932 give a death rate of $\cdot 06$ per thousand of the population.

Measles. Sixty-five deaths occurred from this disease in 1932, compared with 27 in 1931.

Polio-Myelitis. During the year, 20 cases of this disease were notified. Three of these were investigated by the Orthopædic Surgeon.

TABLE XXXIV.-Cancer.

Death Rate per annum in England and Wales and Derbyshire, and number of Deaths in Derbyshire, since 1901.

		ath R	lates.		No. of
Year.	England and Wales	3.	Derbyshire	2.	Deaths in Derbyshire.
1901-1910	 0.89		0.667		346 average
1911	 0.99		0.730		410
1912	 1.10		0.728		414
1913	 0.98		0.822		472
1914	 0.98		0.872		507
1915	 0.96		0.830		460
1916	 0.98		0.951		513
1917	 0.99		0.929		489
1918	 0.99		1.022		532
1919	 1.17		0.871		481
1920	 1.16		0.988		559
1921	 1.21		0.990		586
1922	 1.22		0.980		585
1923	 1.26		1.010		606
1924	 1.29		0.990		605
1925	 1.33		0.987		604
1926	 1.36		1.153		710
1927	 1.37		1.246		774
1928	 1.42		1.190		743
1929	 1.43		1.148		717
1930	 1.45		1.155		721
1931	 1.48		1.238		766
1932	 		1.351		837

TABLE XXXV.

Table shewing	incidence of death	hs from Cancer	among	Males and
	Females at	varying ages.		

	1				AGES.				1		Grand
Year.	and the second second	der 25	25-	-45	45-	-65	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and /er.	То	tals.	Total.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1916	6	5	21	38	101	143	96	103	224	289	513
1917	3	5	10	35	102	143	90	101	205	284	489
1918	3	6	13	38	112	153	98	109	226	306	532
1919	5	5	12	37	101	129	85	107	203	278	481
1920	5	2	21	36	114	149	120	112	260	299	559
1921	4	1	24	32	103	152	130	140	261	325	586
1922	3	5	19	34	122	178	105	119	249	336	585
1923	3	3	11	36	126	177	121	129	261	345	606
1924	3	4	15	32	126	149	141	135	285	320	605
1925	2	5	16	29	132	146	139	135	289	315	604
1926	5	5	12	40	148	182	152	166	317	393	710
1927	5	3	23	41	166	209	156	171	350	424	774
1928	2	6	20	38	150	187	177	161	349	394	743
1929	6	1	22	24	147	157	167	193	342	375	717
1930	5	4	12	27	157	169	179	168	353	368	721
1931	4	2	13	37	163	176	203	168	383	383	766
1932	3	2	19	43	178	194	191	207	391	446	837

Enteric Fever. 46 cases of this disease occurred during the year, with three deaths, giving a case mortality of 6.52, compared with 17.14, for the previous year. The following table gives the case mortality per cent., the death rate per 1,000 of population and the case rate per 1,000 of population for the last thirty-three years:—

Year.	Cases.	Case Mortality per cent.	Death Rate per 1,000 pop.	Case rate per 1,000 of population.
1900	678	14.8	-203	1.36
1901	495	15.5	.16	.98
1902	262	17.5	•09	.52
1903	340	10.5	-07	.67
1904	352	15.0	-11	.68
1905	263	17.11	-09	.50
1906	333	15.0	-09	.62
1907	194	18.56	-07	.35
1908	238	15.55	-07	•43
1909	157	15.27	•05	.27
1910	143	12.59	-03	.25
1911	189	15.34	-05	.33
1912	116	21.55	-04	-20
1913	120	20.83	-04	-21
1914	59	13.56	.01	.10
1915	88	22.7	.03	.16
1916	74	22.98	.03	.13
1917	52	19-24	.02	09
1918	58	25.86	.02	.11
1919	123	12.20	02	.22
1920	58	13.79	-01	•10
1921	63	12.70	-01	•10
1922	25	8.0	.003	.04
1923	42	16.66	.01	.07
1924	52	7.69	.01	.08
1925	37	· 8·10	.005	•06
1926	26	15.39	.006	-04
1927 -	47	12.76	•009	.07
1928	23	17.39	.01	.04
1929	26	23.07	.01	-04
1930	26	19.23	.008	.04
1931	35	17.14	.009	.05
1932	46	6.52	.002	•07

TABLE XXXVI.-Enteric or Typhoid Fever.

Encephalitis Lethargica.—The number of cases of this disease notified is steadily falling. During 1932, four cases only were notified—one in the Urban District of Wirksworth and one each in the Rural Districts of Belper, Chapel-en-le-Frith, and Shardlow.

SCHOOLS CLOSED ON ACCOUNT OF INFECTIOUS DISEASES.

The number of schools closed during the year on account of infectious diseases is given in the following Table. One school was closed by the School Medical Officer and 20 by the Local Sanitary Authority.

	No. of Schools		No. Closed			REASC	REASON FOR CLOSURE.	CLOSU	IRE.		
Year.	part- ments closed.	by School Med. Officer.	Sanitary Author- ity.	In- fluenza.	Measles.	Whoop- ing Cough.	Chicken Pox.	Scarlet Fever.	Diph- theria.	Mumps.	Other Causes,
1921	69	19	40	39	6	T	I	4	9	1	1
1922	44	27	17	n	22	5	1	2	1	1	3
1923	42	23	19	2	21	9	1	5	T	2	2
1924	32	14	18	3	17	67	1	2	1	1	2
1925	52	10	42	11	33	9	1	1	1	1	1
1926	14	1	13	1	80	3	I	63	I	1	1
1927	128	16	112	100	14	63	1	1	1	5	7
1928	19	3	16	1	15	1	1	63	1	1	1
1929	14	53	12	L	1	-	I	~	-	J	-
1930	22	67	20	5	11	-	1	5	1	1	63
1931	22	1	21	5	9	4	1	1	2	1	-
1932	21	1	20	9	9	4	1	I	5	1	1

TABLE XXXVII.

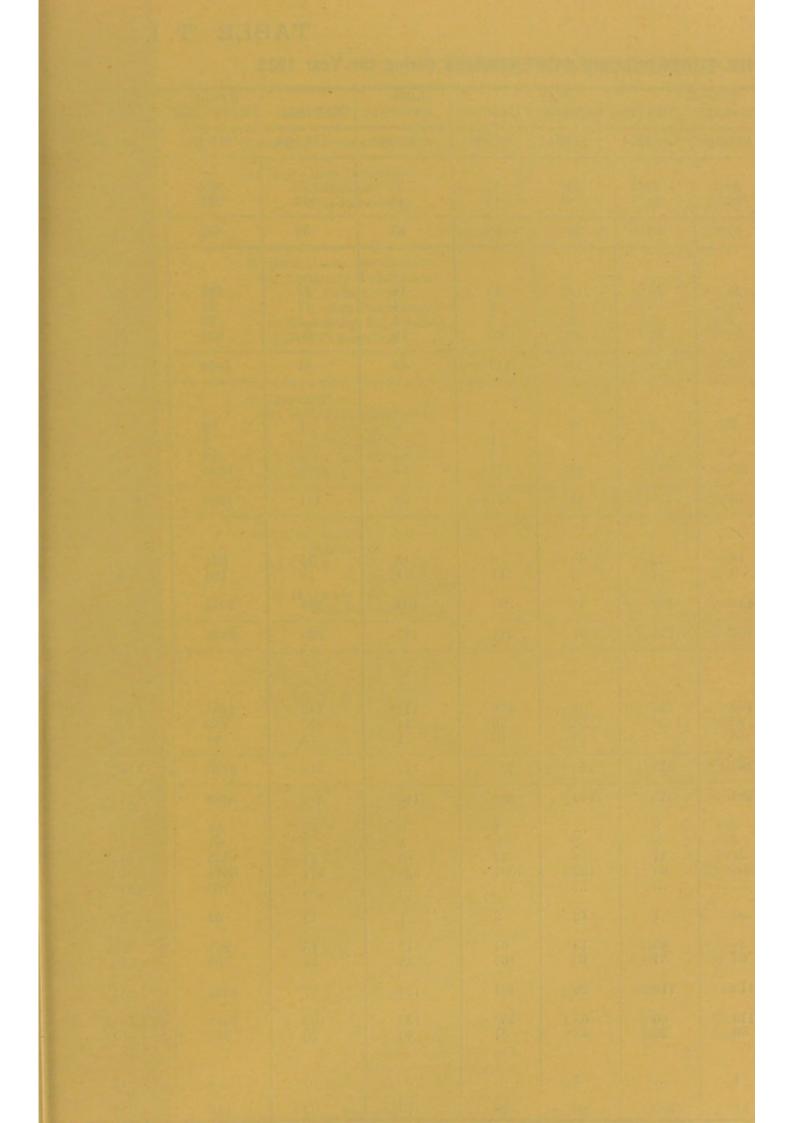


TABLE T.I.

A state state of the state and property strength and the state of the			A		Carmonan					LONG	10000	WHOLE	WHOLE
DISPENSARIES.			ASH- BOURNE.	BURTON.	CHESTER- FIELD.	CHINLEY.	DERBY.	GLOSSOP.	ILKESTON	EATON.	MATLOCK.	County 1932.	County 1931
Estimated Population, 1932			14,890	35,230	268,480	45,930	100,530	25,680	65,260	30,040	33,160	619,200	618,500
A. New Cases reported— Pulmonary Non-Pulmonary			8 4	22 19	179 102	$\begin{array}{c} 33\\24 \end{array}$	$\begin{array}{c} 62\\ 24\end{array}$	24 8	$\begin{array}{c} 42\\ 13 \end{array}$	31 14	23 13	424 221	511 252
	Total		12	41	281	57	86	32	55	45	36	645	763
 B. NEW CASES ATTENDING— (a) Definitely Tuberculous Pulmonary Non-Pulmonary (b) Doubtfully Tuberculous Non-Tuberculous 			5 1 5	17 11 1 64	111 43 15 272	24 11 2 56	45 3 5 53	12 4 2 36 54	33 8 7 65 113	18 4 1 19 42	22 7 2 50 81	287 91 26 620 1024	350 120 34 643 1,147
	Fotal		11	93	431	93	106			4.0			
C. CONTACTS- (a) Definitely Tuberculous: i. Pulmonary ii. Non-Pulmonary (b) Doubtfully Tuberculous (c) Non-Tuberculous			 34	 1 110	9 543	2 8 65	1 2 169	2 20	$\begin{array}{c}1\\1\\2222\end{array}$	2 83	1 1 109	18 2 18 1355	21 3 22 1,821
	Total		34	112	555	75	172	22	227	85	111	1393	1,867
D. CASES WRITTEN OFF DIS REGISTERS. (a) Cured. i. Pulmonary ii. Non-Pulmon (b) Diagnosis not confirme Non-Tuberculous	 ary		3 1 45 49	21 10 176 207	59 46 829 934	19 9 133 161	33 4 236 273	30 6 58 94	6 11 297 314	13 1 103 117	41 18 166 225	225 106 2043 2374	185 95 2,539 2,819
E. NUMBER ON REGISTERS DECEMBER 31st, 1932 (a) Diagnosis completed. i. Pulmonary ii. Non-Pulmonary (b) Diagnosis not completed	ол d		69 20 1 90	84 47 2 133	428 213 8 649	190 89 10 289	222 50 7 279	81 37 2 120	156 59 10 225	112 34 1 147	142 73 3 218	1484 622 44 2150	1,659 668 56 2,383
9. Total Number of visits	sight of die Clin comicilia 1932 ical Pra d by T.C	of" ics ry i.'s		149 4 9 9 431 1 45 118	704 20 26 101 2023 3 75 310	305 4 6 21 506 20 28 63 119	315 8 41 62 1 43 51 719	149 3 8 492 12 13 40 29	238 1 6 34 1067 2 61 169 304	145 3 8 520 1 12 48 186	275 2 5 21 477 12 16 74 97	$\begin{array}{c} 2383 \\ 44 \\ 67 \\ 253 \\ 5679 \\ 786 \\ 62 \\ 281 \\ 880 \\ 2322 \end{array}$	2,451 47 93 217 6,340 613 83 266 859 2,251
to Patients' Homes. 10. Number of :	minatio ns es restor and inc	ns ed	31 13	203 165 33 1	622 139 392	113 113 89	80 99	65 43 2	253 51	130 40 	107 26 	1083 786 4	1,180 1,010 1
12. No. of "T.B." plus cases	on Dian						109	49	98	75	67	846	939

REPORT SHOWING THE WORK OF THE TUBERCULOSIS DISPENSARIES during the Year 1932.

TUBERCULOSIS SCHEME.

This scheme consists of two main units, viz., Dispensary and Institutional.

DISPENSARY UNIT.

This unit consists of nine dispensaries geographically situated to serve the whole of the administrative County. There are three whole-time Tuberculosis Officers between whom the County is divided.

Derby Dispensary.-In July, 1930, the Tuberculosis Dispensary situated at the New County Offices was taken over by the County Surveyor's Department to provide additional accommodation for Clerical Staff, and one room on the second floor of the New County Offices was used in its place. This room was subsequently found to be unsuitable for use as a Tuberculosis Dispensary, and in June, 1931 it was found advisable to close it altogether. During the year under review, alternative accommodation for the County Surveyor's Staff was provided, and in December the Dispensary was re-opened in the original building. The walls and ceilings have been rendered with an impermeable material to withstand constant washing and disinfection, as, subject to the approval of the Ministry of Health, it is proposed also to use the building as an Orthopaedic Clinic. Further, the Ultra-violet lamps have been removed from the room in the County Offices and installed in the waiting room of the Dispensary.

Adjoining the Dispensary building, an additional room has been provided at a cost of £240 for the housing of a modern X-ray apparatus to replace the old one in the County Office building which had become unreliable in results and unsafe to use. The new apparatus is a 10 kilo-volts actual transformer set with screening stand and Potter-Bucky couch, it being desirable that an apparatus of this power should be situated centrally in Derby, in order to deal with both chest and orthopædic cases. The inclusive cost of the apparatus was £624 17s. 3d.

Matlock Dispensary.—In July, the Ministry of Health signified their formal approval of the use of Dean Hill House, Matlock, as a Tuberculosis Dispensary.

Dispensary Statistics.—Details of the work done at or in connection with the County Dispensaries are given in Table T I. The Ministry of Health require to be furnished each year with a return showing in summary form the condition of the dispensary patients at the end of the year, classified according to the stage of the disease, and arranged according to the year in which they first came under Public Medical Treatment. In previous years a copy of this return has been given in full in the annual report, but for reasons of economy, only the total figures and percentages are given this year, and appear in Table T. II., which gives very useful information as to the efficacy of the Tuberculosis Scheme in general. Since the inception of Public Medical Treatment for tuberculosis, 11,632

persons who were originally diagnosed as suffering from the disease (9,300 pulmonary and 2,332 non-pulmonary) have been dealt with at the Dispensaries. These figures do not include persons who were examined but who were found to be not suffering from tuberculosis. 27.26% of the pulmonary cases have been written off as recovered, whilst 46.92% of the non-pulmonary cases have been so removed. 38.79% of the pulmonary cases have died, as compared with 7.80% of the non-pulmonary cases. At the end of 1932, there were 2,106 definite cases of tuberculosis on the Dispensary registers, 1,484 being pulmonary and 622 being nonpulmonary. Of the pulmonary cases, 57.0% were positive sputum cases. The percentage of cases on the Dispensary registers, as compared with the total number of cases on the registers of the District Medical Officers as given in Table T X., is 60.5%. It is quite likely, however, that this percentage is considerably higher, as from time to time, certain of the registers of the District Medical Officers of Health have been revised by the County Staff and it has been found, in the majority of cases, that the registers contained a large number of persons whose names should have been written off for various reasons. A number of registers still require to be revised, so that the figure of 60.5% is hardly a true indication.

The percentage of new cases attending the Dispensaries during the year compared with the number of new cases coming to my knowledge was 61.7%. If the number of persons who died before coming to my knowledge, or within 14 days of notification, are excluded, the percentage is increased to 71.8%. Taking only pulmonary cases, 71.93% of the new cases coming to my knowledge attended at the dispensaries, and again, excluding those who died before I heard of them, or within 14 days of notification, the figure is 80.26%.

Condition at the time of the last record made during the year.	Pul- monary.	Per- centage.	Non- Pul- monary.	Per- centage.	Grand Total.	Per- centage.
Disease arrested	650	6.99	342	14.66	992	8.53
Disease not arrested	768	8.25	249	10.68	1,017	8.74
Condition not ascertained	66	0.71	31	1.33	97	0.83
Total on Dispensary Registers, 31/12/32	1,484	15.95	622	26.67	2,106	18.10
Discharged, recovered	2,535	27.26	1,094	46.92	3,629	31.20
Lost sight of, or other- wise removed from Dispensary Registers	1,674	18.00	434	18.61	2,108	18.12
Dead	3,607	38.79	182	7.80	3,789	32.58
Total written off Dis- pensary Registers	7,816	84.05	1,710	73-33	9,526	81.90
GRAND TOTALS	9,300	100.00	2,332	100.00	11,632	100.00

TABLE T. II.

INSTITUTIONAL UNIT.

The following Table gives particulars of the institutional accommodation for the treatment of tuberculosis provided by the County Council :—

and a second		Pul- Y Cases,		FOR NON-PUL- MONARY CASES.		
NAME OF INSTITUTION.	Adults.	Children under 15	Adults.	Children under 15	Тотлі	
Derbyshire Sanatorium An additional 10 shelter beds are available during the summer time.	104	20	-	-	124	
Penmore Hospital An additional 4 shelter beds are available during the summer time.	14	-	-	-	14	
Whitworth Hospital Bretby Hall Orthopædic Hospital An additional 4 shelter beds are available during the summer time.	<u>6</u> 	-	32	65	6 97*	
Poor Law Institutions. Ashbourne Bakewell Belper Chapel-en-le-Frith Chesterfield Glossop Hayfield (no beds specially pro- vided for the treatment of	2 1 8 4 7 —		 1 2		$2 \\ 1 \\ 8 \\ 4 \\ 11 \\ 2$	
tuberculosis) Shardlow		1	4		$\overline{10}$	
Total	150	22	39	68	279	

TABLE T. III.

* Six beds on the average are occupied by patients from other Authorities.

TABLE T.IV.

Return showing the extent of residential treatment and observation during the year in Institutions (other than Poor Law Institutions) approved for the treatment of Tuberculosis.

		In Institu- tions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institu- tions.	In Institu- tions on Dec. 31st
	Adult males	1	22	18	-	5
Number of doubtfully tuberculous cases ad- mitted for observation.	Adult females	1	12	12	-	1
	Children	4	16	15	-	5
	Total	6	50	45	-	11
	(Adult males	87	169	158	16	82
Number of definitely	Adult females	65	144	142	16	51
tuberculous patients admitted for treat-	Children	75	63	66	2	70
ment.	Total	227	376	366	34	203
GRAND TOTAL		233	426	411	34	214

TABLE T V.

Return showing the immediate results of treatments of definitely tuberculosis patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

	uo u			Du	ratio	on o	f Re	side	ntia	l Tr	eatr	nent	in	Inst	itut	ion	s.	
	Classification on admission to the Institution	Condition at time		nder		3—6 months		6—12 months		More than 12 months			Totals.			Grand Totals.		
	Class on 5 Ins	of discharge.	M.	F.	Ch.	М.	F.	Ch	M	F.	Ch.	M.	F.	Ch.	м.	F.	Ch.	
8	Class TB. minus	Quiescent Not quiescent Died in Institution	8 10 -	2 12 -	-2	3 10 -	3 5 -	7 12 -		3 2 -	3 6 -	1 -	111	- 1 -	12 23 -	8 19 -	10 21 -	30 63 -
Pulmonary Tuberculosis	Class TB. plus Group 1	Quiescent Not quiescent Died in Institution	-2	-2	1 1 1	1 2 -	1 1 1	1 1 1		11 1	1 1 1	1 1 1	11 1	111	1 5 -	- 2	1 1 1	1 7 -
Pulmonary	Class TB. plus Group 2	Quiescent Not quiescent Died in Institution		1 16 -	1 1 1	27	21	- -	10 -	1 11 -	- 1 -	- 5 -	111	- 1 -	66 1	2 48 -	-3-	2 117 1
-	Class TB. plus Group 3	Quiescent Not quiescent Died in Institution	17 11	16 11	11 1	13 2		111		10 -	- - 1	- 2	$\frac{-}{1}$	111	-46 14	- 41 15	- - 1	87 30
Sis	Bones and Joints	Quiescent Not quiescent Died in Institution	- - 1	111	1	1	1 2 -	3	11 1	3 - -	3	3 1 -	$\frac{10}{2}$	21 - 1	4 1 1	14 4 1	28 - 1	46 5 3
y Tubercule	Abdom- inal	Quiescent Not quiescent Died in Institution	11 1	1 	1 1 1	1.1 1	1 1 1	1 1 1	1 1 1	1	111	1 1 1	1 1 1	1 1 1	111	2 -	1 1 1	2 - -
Non-Pulmonary Tuberculosis	Other Organs	Quiescent Not quiescent Died in Institution	1 1 1	1 1 1	1 1 1	11 1	111	11 1	11 1	11 1	11 1	11 1	111	11 1	11 1	1 1 1	11 1	
Not	Periphe- ral Glands	Quiescent Not quiescent Died in Institution		-2	2	111	1 1 1	2 -	111	1 1 1	1 1 1	111	1 1 1	11 1	1 1 1	-2	4	4 2 -

101

Return showing the results of observation of doubtfully tuberculosis cases discharged during the year from Institutions approved for the treatment of Tuberculosis.

Diagnasia an		For Pulmonary Tuberculosis.						For Non-Pulmonary Tuberculosis							
Diagnosis on discharge from observation	Stay under 4 weeks			Stay over 4 weeks		Stay under 4 weeks		Stay over 4 weeks			Totals				
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous	1	-	-	6	4	2	-	-	-	-	-	-	7	4	2
Non-tuberculous	2	-	-	6	3	3	-	-	1	1	1	8	9	4	12
Doubtful	1	2	-	1	2	1	-	-	-	-	1	-	2	4	1
Totals	4	2	I	13	9	6	-	1	1	1	1	8	18	12	15

WALTON SANATORIUM.

Accommodation is provided for 124 patients, 74 beds for males and 50 for females. An additional four shelter beds for males and six for females are available for use during the summer time.

The Medical Superintendent of the Institution, Dr. A. Niven Robertson, reports on the work at this Institution during 1932, as follows :—

Statistics,

	Males.	Females.	Children.	Total.
Admissions	 154	99	33	286
Discharges	 161	101	38	300

Average number of beds occupied-120.9.

Average length of stay of the patients-132 days.

Patients Discharged.

Contraction of the second		1. 114	1	М.	F.	C,	TOTAL.
PULMONARY							
1. CLASS T.B. MINUS				35	27	31	93
2. CLASS T.B. PLUS							
Group I				6	2		8
Group II				65	49	3	117
Group III				45	16		61
Totals				151	94	34	279
NON-PULMONARY							
Bones and Joints							
Abdominal							
Other Organs							
Peripheral Glands							
NON-TUBERCULOUS				8	3	3	14
UNDIAGNOSED	••			2	4	1	7
Total				161	101	38	300

MINISTRY OF HEALTH CLASSIFICATION.

CLASSIFICATION OF SOCIETY OF SUPERINTENDENTS.

TABLE D.S. II

TABLE D.S. 1.

	With	hout TE Sputum			With TB. in Sputum				
	M.	F.	C.	M.	F.	C.	12.00		
STAGE 1.				1					
Grade A		11	4	8	1		44		
" B			1				4		
" C		1					1		
STAGE II.	-			-					
Grade A	. 9	* 6	1	14	7	1	38		
" B		3		5	16		24		
" C.	1						1		
STAGE III.		1 100		1 101					
Grade A	. 2	4	2	32	15	1	56		
" B		1		34	21	1	57		
" C.		1		23	7		31		
HILUS CASES.	1	1.1			1. 392	10,000			
Grade A			20				20		
,, B			3				3		
" C									
Total	35	27	31	116	67	3	279		

\mathbf{n}	D	
υ.	h	
-	1	

General Results of Treatment.

Quiescent		 33
Improved		 205
No Material Improv	ement	 24
Died in Institution	···	 17
		279

Average weight gained by patients, 9 lbs. 7 ozs.

Cases admitted for Diagnosis.—Thirty-four such cases were discharged during the year with the following results :—

- 13 found to be suffering from tuberculosis.
- 3 stayed so short a period that the diagnosis could not be completed.
- 5 cases of empyema.
- 3 suffering trom bronchiectasis.
- 1 silicosis.
- 1 mediastinal tumour.
- 1 abscess of the lung.
- 1 doubtful case of spirochætosis of the lungs.
- 1 asthma.
- 1 nervous disease.
- 4 doubtful cases.

The Mantoux test, which is regarded by many observers as more reliable, has been substituted for the Quanti Von Pirquet test.

Laboratory Work.

1,536 sputums and 2,276 urines were examined in the year. The latter examinations were greatly increased this year owing to the increasing use of gold salts in the treatment of tuberculosis, and to the admission of a case of diabetes. 374 blood sugar tests were done in the control of the diabetic case. In diagnosis cases, 28 blood sedimentation tests, 28 blood precipitation tests and 28 Arneth blood counts were performed. 11 differential blood counts were done in the year. Pleural effusions are sent for examination to the County Laboratory.

X-Ray Work.

A new X-ray apparatus was installed at this Institution during the year to replace an apparatus which had been in use since 1915 and which had become obsolete and dangerous to operate. The new apparatus is a 5 Kilo Volt Actual Single Valve unit with screening stand, etc. and cost £478 1s. 3d. The replacement of the old apparatus was hastened by the fact that the Chesterfield Corporation, who supply electricity to the Sanatorium, changed the supply from direct to alternating current, and as the old apparatus could not be worked with the former, the Corporation made a grant of £35 towards the cost of the new apparatus.

475 X-ray photographs were taken in the year and 878 screenings were done in artificial pneumothorax cases. Each A.P. case is screened before each refill, and for safe A.P. work a good X-ray apparatus is essential.

TABLE D.S. III.

- And the sea	No. of Cases.		Much Improved	Improved	I.S.Q.	Worse.
Hilus Tubercle	 19	_	3	16	1	
Pul. Tub.	 11		3	8	-	-
Lupus	 2	1	1			-
Bronchiectasis	 1		-		1	_
Tub. Glands	 1	-	1		-	
Rodent Ulcer	 1	-	-	-	1	-
Total	 35	1	8	24	2	

Ultra-Violet Light Treatment.

Owing to the change over to alternating current, as mentioned above, a •new ultra-violet lamp was required this year in the Solarium. An evacuated burner type of Quartz mercury vapour lamp was installed similar to its predecessor, but of a more modern design. The quartz lamp is the cheapest to run, has the greatest amount of the shortest waves, and is the most effective source of artificial ultra-violet light. A new portable A.C. ultra-violet quartz lamp is also in use on the wards in suitable cases.

Treatment.

(a) Medical.—General treatment has been carried out on the usual routine lines of fresh air, generous diet, and graduated work and exercise.

Various newly recommended remedies have been tried :---

Dr. Jacobson's Solution.—This is a Benzyl Cinnamic Ester given subcutaneously. It was thoroughly tried in half a dozen cases but I found it quite ineffective, so it was discarded.

Biocholine.—This drug is also given subcutaneously, and is supposed by causing an increase of the cholesterin in the blood, to produce increased resistance to tuberculosis. This also has been discarded as ineffective. **Catalsan.**—This is prepared from old Tuberculin by a special process devised by L. W. Tomarkin. It was regarded by some experimenters as causing a diminution of the toxaemia when given by injection, but after efficient trial I have given up its use as being of no benefit. If one could discover a substance which could counteract the fatal toxaemia of this disease, it would be a great step towards its cure.

Gold Compounds.—Allochrysine has been used as in 1931 and I find that it is extraordinarily effective in some cases, but not always. I think there is a hope of considerable success with various gold preparations now that experience has taught us a better technique. In addition, I am now using Solganal B and Oleo-Sanocrysin. These gold compounds appear to be useful in A.P. cases where the good lung is tending to become active.

Haemoptysis.—In bilateral disease reliance is placed on Coagulen Ciba and Calcium Sandoz. Tetanol, which is an even stronger preparation of calcium is also used. Collosol calcium was of no use. Clauden, a new internal styptic was ineffective. In unilateral cases the best of all treatments is artificial pneumothorax.

(b) Surgical.—Artificial Pneumothorax.—Seventeen new cases (14 males, 3 females) were commenced on this treatment and twentynine old cases (17 males, 12 females) were continued. There were 687 refill operations, 35 gas replacements, 7 depneumothorax operations and 7 pressure readings performed in the year. There were 143 more refill operations and 30 more gas replacements done than in the year before. There were 348 outpatient attendances for refills of A.P. cases who have left the Sanatorium and are attending the Clinics. This is practically a hundred more than last year, and will get more and more. The most suitable case for A.P., and one in which the most brilliant result is obtained, is the fairly acute unilateral case of exudative type in which the lung is still soft and compressible and in which adhesions have not yet formed. It is much less effective in old chronic fibroid cases, and where a cavity is present in these cases, it is often dangerous to perform an A.P.

The chief risk of an artificial pneumothorax is not pleural shock or gas embolism, but spontaneous pneumothorax into the A.P. space due to spread of the disease into an unsupported pleura, or due to rupture of adhesions from disease or faulty technique. This form of spontaneous pneumothorax is rarely recovered from.

Gelatinothorax.—This form of treatment was used in one case of pyopneumothorax following spontaneous rupture into an A.P. As the patient died rather rapidly from toxaemia, the effect of this treatment could not be judged by this one case.

Phrenic Evulsion.—This operation was performed by Mr. Milward in three cases. In the first case this operation was recommended alone as the disease was almost entirely confined to the base of one side, but as it had no effect on the condition, it was followed up by an A.P., which was very effective. In the second case, the operation was done to arrest a slight recrudescence in an old fibroid case who had an A.P. done here ten years ago and had kept well since. In the last case, no benefit occurred as the phrenic nerve was abnormal and could not be found.

Lipiodol.—This was injected into the bronchial tubes through the crico-thyroid membrane in two cases. It completed the diagnosis already suspected of bronchiectasis and bronchielectasis.

The use of lipiodol is injurious in definite Pulmonary Tuberculosis.

Thoracoplasty.—No case was recommended to Hospital for this operation. Cases suitable for it are few.

By the increase in surgical treatment an increasing demand is made on one's time, but there is no doubt that in many cases it is well worth the trouble and time, and often the only thing worth doing to cure the case.

Meteorological Data for 1932.

Highest Wind	22.82	Dec. 17th.
Highest Dry Kata	44.0	April 7th.
Highest Wet Kata	82.1	April 6th.
Lowest Dry Kata	3.2	Aug. 19th.
Lowest Wet Kata	15.9	Aug. 18th.
Highest Outdoor Temp.	88°	Aug. 19th.
Lowest Outdoor Temp.	29°	Jan. 28th & Feb. 10th.
Highest Radiant Heat	138.2	June 17th.
Greatest amount of Ul		
violet Light	5.5	June 14th & 17th.
Highest Rainfall	\dots 2.07 ins.	May 21st & July 13th.
Highest Maximum Temp	p 89°	Aug. 19th.
Highest Minimum Temp	20°	March 2nd.
Day of Maximum Hours Sunshine		. June 17th.
Total Rainfall for Year	29.96 ins.	

January had the highest cooling power (Dry Kata average 25.9), and the highest cooling power by evaporation (Wet Kata average 52.2). April had the highest average for wind 9.34 miles per hour. June had the greatest sunshine, average 6 hours daily, and the most ultra-violet light, but in August there was the greatest radiant heat 87.6° . November lived up to its reputation for fog and had the highest average relative humidity of 81.9%, and the 'merry' month of May excelled the others in rain with a fall for the month of 6.37 inches. August was the warmest month, the average temperature being 68.3° . The greatest barometric pressure was in February. TABLE D.S. IV.

Condition of Patients discharged from the Derbyshire Sanatorium, Chesterfield, from 1915-1931 inclusive.

			10							
	Total.	No. cent.		223 27-93	446 10-19	7-03	-68	768 17-54	1604 36.63	00.00
	To	No.		1223	446	308	30	768	1604	1379
	1931.	Per cent.		1	8.79	54-58	-37	8-05	28.21	100.00 4379 100.00
		No.		1	24	149	1	22	11	273
	1930.	Per cent.		1.06	23.32	22.61	1.41	18.38	33-22	100-00
	31	No.		3	99	64	4	52	94	283
IUM.	1929.	Per cent.		2.85	29-20	11-11	2.22	13-97	40.65	315 100.00 283 100.00 273
TOR	-	No.		6	92	35	P	44	128	315
I SANA	1928.	Per cent.		4.93	32.96	4.55	1-51	15-15	40-90	264 100.00
FROM	-	No.		13	87	12	4	40	108	264
YEAR OF DISCHARGE FROM SANATORIUM.	1927.	Per cent.		22.37	16-44	5-02	16	17-81	37.45	219 100-00
ISCH	19	No.		49	36	11.	5	39	82	219
0F D)	1926.	Per cent.		28-76	15.72	4-68	£9:	14.39	35.78	299 100·00
TEAR	19	No.		86	47	14	52	43	107	299
1	1925.	Per cent.		35.80	6-81	68.	62.	15.98	40.23	338 100-00
		No.		121	33	33	1	54	136	338
	1915-1924.	Per cent.		39.45	2.97	-84	·38	19.85	36-51	2388 100.00
	191	No.		942	Ľ	20	6	474	872	2388
	Condition in	1932		ч … р	sted	Not arrested	Condition not ascertain'd			Total
				Cured	Arrested	Not	Cond		Dead	

TABLE D.S. V.

DERBYSHIRE SANATORIUM.

Comparative Statement of Cost.

			Year ending March 31st.	nding	Mar	ch 3.	lst.								-
	1	1929.	-	19	1930.		I	1931.	-	1	1932.		-	1933.	
Average daily number of			-						-						
Patients	12	120.3	-	121	ī.		11	122.1	-	12	124.4		-	119.4	
do. do. Staff	3	37-9	-	37-9	6.			6.18	-		9.1			37.8	-
		Cost p	per	-	Cost	per		Cost	per		Cost per	per .		Cost	per
	Total	week 1	-	[otal	week per	per	Total	week per	per	Total	week per	t per	Total	week per	per
the second se	Cost.	Patien	_	Cost.	Patient.	ent.	Cost.	Patient.	nt.	Cost.	Patient.	ent.	Cost.	Patient	ient.
	43	£ 8. d.	d. l	3	£ 8.	d.	Ŧ	£ 8	d.	મ	8 3	. d.	भ	4	. d.
Salaries and Wages	4,351	0 13 1		4,534	0 14	43	4,860	0 15	3	4,629	0 14	3	4,741	0 1	5
	4,102	0 13	1 4.	090	0 12	103	4,095	0 12	10	3,886	0 12	0		0 1	H
Medical Applia	489	0 1	_	419	0 1	4	475	0 1	9	472	0	51	-	0	H
Fuel. Light and Water	1.133	0 3	_	147	0 3	*1	1,127	0 3	5	1,234	0	3 10		•	3 4
	673	0 2		636	0 2	0	661	0 2	9	511	0	1		•	1 10
	589	0 1 1	103	593	0 1	101	340	0 1	1	256	0	92	-	•	1 5
	556	0 1		189	0 1	64	512	0 1	-	589	0	1 10	_	•	1 B
and Insuran	668	0 2		597	0 1	101	580	0 1	10	638	0	2 0		•	II
Loan Repayment and Interest	897	0 2		896	0 2	10	896	0 2	10	896	0		894	•	2 10
Capital Expenditure out of															
Revenue (garage)	14			1		-	1	1		1		+	1		1
Gross Totals	13.472	2 2	113 13.371	371	2 2	4	13,684	2 3	0	13,111	5	9 0	13,144	5	2 1
arm Acc	_	0 0	35	144	0 0	9	11	0 0	~	17	0	0 01	-	•	0 52
Deduct other Income		0 0	57	51	0 0	67	76	0 0	~	55	0	0 2	93	•	0 3
Net Cost	13,326	2 2	6 13,176	176	2 1	8	13,537	2 2	6	13,039	5	0 32	12,907	5	1 4
Food per person per week		9/11d	Ι.		P46/6	₫q.		9/10d	0d.		9/2d	d.		6	-

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PENMORE PAVILION.

During the year this pavilion has continued to be used for the treatment of advanced female patients, under the clinical charge of Dr. B. S. Nicholson, the Tuberculosis Officer for the Chesterfield area.

The following admissions and discharges have taken place during the year :—

TABLE P.I.

Patients in the Pavilion	n on th	e 1st Ja	anuary	, 1932		
Admissions						
Discharges						
Patients in the Pavilion	n on th	e 31st]	Decem	ber, 193	32	
Condition of patients	on dise	charge :	_			
Improved					16	
No material i	mprov	ement			14	
	in the second				- 74 - 14	

Died in the Institution

Total		
1 Otto		100
1 1 1 1 2 1 1	 	-
		-

...

11

...

14 beds are provided in the Pavilion and 4 additional shelter beds are available for use when necessary and when climatic conditions permit. During the year it was found necessary to use only 2 of the shelter beds and these were available from May to September. The daily average number of beds available for the whole year was therefore 14.83, and the number of beds occupied, 12.85 or 86.85 per cent. of the available capacity. The average duration of stay of the 41 patients discharged or who died in the Institution was 122.8 days. The average gain in weight of the 16 patients discharged as improved was 9 lbs., the largest individual gain being 24 lbs. during a stay of 115 days.

Further improvements to the lawn and garden have been carried out during the year.

The cost per patient per day for the year ended March 31st, 1933, was 6s. 11d.

WHITWORTH HOSPITAL.

In June, 1929, a detached self-contained block of six beds at this Hospital was leased from the Trustees for the treatment of male pulmonary cases. During the year the lease expired, but in view of the useful purpose served by this block, the County Council renewed the lease for a further period of three years on the existing terms. Cases of the "hospital" type are accommodated and are under the clinical charge of Dr. P. Heffernan, the Tuberculosis Officer for the north-western area of the County. The following admissions and discharges have taken place during the year :---

TABLE W.I.

Patients in the Hospital	on	January 1	lst,	1932	 6
Admissions					 14
Discharges					 14
Patients in the Hospital	on	December	318	st. 1932	 6

Condition of patients on discharge :---

 	4
 	8
 	2
	14

As a result of treatment in the Hospital, the working capacity of 3 patients was restored.

The average duration of stay of the 14 patients discharged during the year was 132.6 days, and the average number of beds occupied was 5.7 or 98 per cent. of the full capacity. The cost per patient per day for the year ended March 31st, 1933, was 7s. 1d.

BRETBY HALL ORTHOPÆDIC HOSPITAL.

One hundred and forty-seven beds are available at this hospital and, apart from periods extending over a few days, they have been in constant occupation. The waiting list .s now shorter than it has been since the hospital was opened in 1926.

Dr. E. Grierson, Assistant Medical Officer and Acting Medical Superintendent, reports as follows :---

Statistics compare favourably with the previous year. The average length of stay of non-T.B. patients has been reduced and, as a result, the number of admissions has been 193 instead of 174.

In all but a few cases, the results of treatment have been very satisfactory and less difficulty has been experienced in persuading parents to agree to hospital treatment for their children.

PATIENTS IN HOSPITAL at Dec. 31, 1931-	midn	ight,	Males.	Females.	Total.
Tubercular			51	43	94
Non-Tubercular			24	23	47
			75	66	141
Admissions during 1932-			_		-
Tubercular			45	29	74
Non-Tubercular			65	54	119
			110	83	193
				-	

13 patients did not accept offer of treatment at the Hospital. Number of patients treated in 1932—

Tubercular			96	72	168
Non-Tubercular			89	77	166
			185	149	334
				-	
Number of patients dis- during 1932—	charge	d			
Tubercular			33	39	72
Non-Tubercular			56	62	118
Tota	ıl		89	101	190

TABLE B.II.

Cases admitted Tuberculosis tr					Cases of Non-Tu Diseases treated da			2.
Site of Lesio	n.	М.	F.	Total	Disease.	M.	F.	Total.
Spine		32	28	60	Rickets	13	10	23
Hip		28	26	54	Talipes	16	8	24
Knee		16	6	22	Infantile Paralysis	19	18	37
Other Joints		11	9	20	Spastic Paraplegia	7	11	18
Abdomen		1	3	4	Torticollis	.1	2	3
Glands		7	1	8	Pes Cavus	1	2	3
					Scoliosis	4	13	17
				-	Miscellaneous	25	15	41
Totals		95	73	168	Total	87	79	166

TABLE B.I.

There were four deaths during the year, as shewn in the following table :---

Lesion.	Cause of Death.	М.	F.	Total.
T.B. Hip T.B. Spine T.B. Spine	Amyloid Disease		1	1.1
Painful ampu-	Tuberculosis Cerebral Embolism fol-	-	1	1
tation stump Rt. arm	lowing operation	-	1	1
	Total	1	3	4

TABLE B.III

The following table shows the location of disease of the patients discharged :—

TABLE B.IV.

(a) Tubercular.

Site of Lesic	Site of Lesion.			Discharged.		Die	Died.			
Sinc of Look		М.	F.	М.	F.	М.	F.	- Total.		
Spine		1	2	8	15	1	1	28		
Hip		3	2	5	8	-	1	19		
Knee		2		5	3	-		10		
Other Joints			1	6	3	-		10		
Abdomen					2	-		2		
Glands			-	3	3	-	-	6		
Total		6	5	27	34	1	2	75.		

Diama	Disc	harged.	Died.			
Disease.	М.	F.	<i>M</i> .	F.	- Tota	
Rickets	8	6	-		14	
Talipes	14	9	-	-	23	
Daliamonalitin	8	9			17	
Spastic Paraplegia.	5	9			14	
Ponticallin	1	2		-	3	
Pes Cavus	2	3		-	5	
Scoliosis	4	12		-	16	
Miscellaneous .	14	11	-	1	26	
Total .	56	61	_	1	118	

(b) Non-Tubercular.

Average length of stay of patients :---

Tubercular Cases	 521	days.
Non-tubercular Cases	 136	
All Cases	 287	,,

During the year 1932 the following operations were performed :---

mg the year room the rono mig op	stutions	5 more	por
Stabilisation of foot			9
Open elongation of Tendo Ac	hilles		3
Plantar Fasciotomy and Wren	nching		11
Stoeffe ¹ 's Operation			12
Wrenching alone			3
Tenotomy alone			12
Transplantation of tendon			7
Osteotomy			16
Manipulation			9
Osteoclasis			6
Excision of nerve bulbs			1
Arthrodesis of thumb			1
Sequestrectomy			3
Resection of Rib			2
Reduction of dislocated hip			1
Amputations (1 foot; 1 fore-a	arm)		2
Open correction of club foot			4
Exploration of sinus			1
Excision of cervical glands			1
Incision of abscesses			4
Excision of knee			1
Tenotomy of sterno mastoid			1
Curettage of abscesses			3
Tonsillectomy and adenectomy	7		38
Removal of nasal Polipi			2
Midtarsal resection			2
Tenodesis			1
Soutter's Fasciotomy			1
Steindler's Operation			1
Others			4
Total			169

Total ... 162

Massage, exercises, electro- and actino-therapy were carried out whenever necessary.

415 cases were X-rayed during the year. This number includes a few patients referred for X-ray from Swadlincote clinic and from the Tuberculosis Dispensary at Burton.

Dental Work.—103 patients were seen and treated by the County Dental Staff.

Ophthalmic Work.—Periodic visits are paid by the County Ophthalmic Surgeon so that cases of refraction and other diseases of the eye may be treated.

Consulting Surgeon.—Mr. Naughton Dunn, the Consulting Surgeon, visited the hospital on 12 occasions and performed 33 operations.

Infectious Diseases.—Four cases of chickenpox, three of whooping cough, three of mumps, two of scabies, and one of ringworm occurred during the year.

Splints.—A list of 918 splints made and repaired in the workshop is given below. The staff of the plaster room still continue to make celluloid splints which are proving to be most satisfactory.

HOSPITAL.

Callipers			 39
Thomas's Bed Splints			 7
Thomas's Walking Splints			 16
Pattens			 20
Spinal Frames			 20
Boots raised			 11
Other alterations to Boots			 87
Crutches-(pairs)			 3
K.K., Side, and Double Iron	08		 30
Other Metal Splints			 26
Stirrups for Extension			 5
Repairs and Alterations to	Splint	s	 158
Plaster Boots-(pairs)			 21
Back supports			 22
Rotation shoes			 12
Miscellaneous			 61
			538

CLINICS.

Callipers			 21
Thomas's Bed Splints			 3
Thomas's Walking Spl	ints		 5
Pattens			 10
Boots raised			 77
Other Alterations to Bo	ots		 73
K.K., Side, and Double	Irons		 37
Other Metal Splints			 8
Repairs and Alteration	s to Splint	s	 96
Back supports			 5
Miscellaneous			 45
			380

CELLULOID SPLINTS.

Head Pieces			 		7
Hip Spicas			 		10
Knee Splints			 		5
Artificial Hand	1		 	•;•	1
		Total	 		23

Education.—The teaching staff is again reduced to three. The student teacher resigned in August and no new appointment has been made.

Orthopædic Clinics.—With one exception attendances at all the clinics have been satisfactory throughout the year. The numbers attending at Alfreton showed a decrease and it was found desirable to open Alfreton clinic once weekly instead of twice weekly. This arrangement has been in existence since June and allows the Orthopaedic Nurse one day in the week free for home visiting The following tables show the attendances at the clinics and the home visits made by the Orthopædic Nurses :—

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TABLE BV.

(a) Tubercular Cases.

Situation of Lesion.	Alfreton.	Matlock.	Chesterfield.	Chinley.	Derby.	Heanor.	Long Eaton.	Shirebrook.	Swadlincote.	TOTAL.
Spine Hip Knee Other Joints Abdomen Periph'alGlands Other Organs			$ \begin{array}{r} 17 \\ 10 \\ 8 \\ 6 \\ 2 \\ 5 \\ \end{array} $	9544 4 3	7 5 4 7 1	7 4 3 5 1	9 1 3 1 1	$ \begin{array}{r} 3 \\ 4 \\ 4 \\ 1 \\ - 2 \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ - \\ $	$ \begin{array}{c} 2 \\ 6 \\ 4 \\ 3 \\ 1 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ $	
Total	17	2	48	25	24	20	15	14	16	181

(b) Non-Tubercular Cases.

Lesion.	Alfreton.	Matlock.	Chesterfield.	Chinley.	Derby.	Heanor.	Long Eaton.	Shirebrook.	Swadlineote.	TOTAL.
Rickets	16	12	26	2	16	14	17	15	21	139
Inf. Paralysis		8	34	11	29	8	10	11	8	135
Spastic Para-							1		1	
plegia	8	5	15	4	15	6	4	2	3	62
Scoliosis	12	11	20	6	17	6	8	5	24	109
Cong. Deformity	12	5	10	14	28	15	11	6	16	117
Unclassified	6	6	10	11	26	4	7	8	23	101
Others	31	10	26	-	-	-	-	14		81
Total	101	57	141	48	131	53	57	61	95	744
Total Attend- ances No. of Plasters	715	395	857	301	786	587	562	415	969	5587
Applied	33	9	50	12	58	34	6	4	37	243

Home Visits :---(Miss Garratt) ... 363 " " " (Miss Taylor) ... 162

TABLE B. VI.

BRETBY HALL ORTHOPÆDIC HOSPITAL. **Comparative Statement of Costs.**

Year ending March 31st.

per week 3 3 patient. 8 Cost per 4 8 - 5 61 10 0 - 6 å 9 20 1933 142.4 6.09 2 61 01 Total 1,968 Cost. 5,434 3,047 654 1,439 755 290 382 3,460 17,429 487 16,942 41 5 per week 96870194 4 01 I patient. Cost per 4 8 - 0 0 4 0 ŝ 6 20 4 1932 145-2 60-8 4 5/11 01 61 Total 695 943 450 5,335 3.182 358 377 Cost. 1,001 3,429 17,123 16,673 43 per week 0100100 patient. 10 2 4 4 Cost per 1000 œ 0 01 6 00 4 6/8 1931 135-8 50-4 01 0 10 Total 4,146 3,216 3,322 Cost. 983 480 885 1,605 378 564 15,403 14,923 43 4 per week patient. 0 00 60991939 9 00 Cost per . 400 4 m 9 -2 16 2 18 14 -7/4 1930 71.8 29.4 42 Total 1,949 377 802 700 Cost. 2,660 ,133 288 2.672 10,865 314 0 10,551 284 41 per week patient. 0000 40 01 01 01 10 = = Cost per 2 11 121151423 1013 s 13 7/8 1929 63.5 43 51 Total 8,447 8,806 359 1,765 Cost. 2,264 340 170 196 2,056 814 314 43 Food per person per week : : Drugs and Medical Appliances... Fuel, Light and Water : : : :: : : ÷ Rates, Taxes and Insurance Average Daily No. of Patients Loan Repayment and Interest Staff ... •••• Domestic and Laundry Renewals and Repairs Gross Totals Nett Totals Salaries, and Wages Deduct Rents, etc. do. Miscellaneous Provisions

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OTHER INSTITUTIONS.

With the institutional accommodation now provided by the County Council for the treatment of tuberculosis, only in exceptional cases is it necessary to admit patients to institutions not belonging to the County Council.

Three such cases were admitted during the year on account of their being urgently in need of treatment, two to the Manchester Royal Infirmary and one to the New Hall Sanatorium, Southport, the latter being a Derbyshire case who was taken suddenly ill whilst on a short stay in Southport, and died before he could be transferred to a Derbyshire institution.

The following shows the admissions and discharges that have taken place during the year :---

Patients in the Instituti	ions	s on Janua	ry 1st	, 1932	 2
Patients Admitted					 3
Patients Discharged					 5
Patients in Institutions	on	December	31st,	1932	 -

Condition of patients on discharge :---

Improved	 	 	 3
Died in the institution		 	 1
Not tuberculous .	 	 	 1

The two patients who were in institutions on January 1st, 1932, were admitted to the East Lancashire Tuberculosis Colony with a view to their becoming permanent colonists, but after a stay of nearly nine months, they were discharged as not being suitable.

POOR LAW INSTITUTIONS.

The number of beds available, on December 31st, 1932, in Poor Law Institutions belonging to the County Council for the treatment of tuberculosis is given in Table T.III, and the following return shows the number of persons suffering from tuberculosis who were treated in these Institutions during the year, and who were chargeable to the County Council.

TABLE T.VI.

		In Institu- tions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institu- tions.	In Institutions on Dec. 31st.
	Adult males	4	12	8	6	2
Number of patients suffering from pul- monary tuberculosis	Adult females	4	6	2	4	4
	Children	2	-	1	-	1
admitted for treatment.	Total	10	18	11	10	7
	Adult males	4	7	3	2	* 6
Number of patients	Adult females	2	4	. 3	2	1
suffering from non- pulmonary tuberculosis	Children	1	7	3	4	1
admitted for treatment.	Total	7	18	9	8	8
GRAND TOTAL		17	36	20	18	15

Return showing the extent of Residential Treatment provided during the year in Poor Law Institutions for persons chargeable to the Council.

Treatment of Lupus.—Three patients, particulars of which are given below, have been referred to the Derbyshire Royal Infirmary with a view to receiving diathermy treatment.

1 case of lupus of the face was treated by diathermy and the condition is reported to be much improved. Further treatment by Kromayer lamp is being given.

I case of lupus of the face, right arm and left heel, was found to be unsuitable for diathermy, but at the time of writing, slight improvement is being obtained by Kromayer lamp treatment.

1 doubtful case of lupus of the left hand has been treated by diathermy and Kromayer lamp without showing any improvement. The diagnosis however is still doubtful but it is thought to be a dermatitis artefacta self-induced by scratching.

NOTIFICATION OF TUBERCULOSIS.

During the year there were 583 primary notifications of all forms of tuberculosis and a further 62 new cases came to my knowledge otherwise than by notification, making a total of 645, 424 being pulmonary and 221 being non-pulmonary. This is the lowest number of new cases reported in any one year since the inception of compulsory notification; the numbers of new cases reported each year since 1915 are given in Table T. XI. Details of the new cases notified, and cases coming to my knowledge otherwise than by notification, are given in Table T. VII. and T. VIII respectively. The case rate per 1,000 of population for the year was 1.04. It is pleasing to notice that the number of cases coming to my knowledge otherwise than by notification is decreasing considerably, the figure being reduced from 141 in 1929 to 62 in 1932.

H	
2	
100	
H	
62	
3	
8	
4	
H	

		Total Notifica- tions.	213	196	96	16	596
		65 and Primary up- wards. cations.	209	189	46	16	583
		65 and up- wards.	œ	ŝ	-	1	13
IONS.		5-10 10-15 15-20 20-25 25-35 35-45 45-55 55-65	16	6	1	-	27
NOTIFICATIONS.	NS.	4555	28	14	-	-	44
	NUMBER OF PRIMARY NOTIFICATIONS	35-45	32	- 23	5	53	19
TUBERCULOSIS	X Nor	25-35	46	50	4	12	112
BERCU	Рвімав	20-25	42	41	-1	Ξ	101
TUT	ER OF	15—20	24	25	œ	13	20
	EMUN.	10—15	63	18	11	15	52
		5—10	œ		83	17	60
		15	53	1	18	16	36
		-0	-	1	4	63	-
		Age Periods	Pulmonary— Males	Females	Non-Pulmonary— Males	Females	TOTALS

	MEDICAL OFFICER OF HEALTH DURING THE YEAR	A ON FORM A.
TABLE T VIII.	ICAL OFFICER OF HEALT	1932, OTHERWISE THAN BY NOTIFICATION ON FORM A.

Total Cases.	17	6	18	18	62
65 and upwards	e	1	1	1	4
55-65 65 and upwards	4	1	1	1	9
35-45 45-55	5	2	1	1	5
	1	1	I	2	ũ
25-35	60	1	1	2	7
20-25	1	1	1	3	4
10—15 15—20	1	61	63	1	4
10-15	5	1	1	I	22
5-10	1	1	I	4	5
1-5	-	1	Ŀ	4	12
ī	1	i	8	1	5
AGE PERIODS	Pulmonary- Males	Females	Non-Pulmonary- Males	Females	TOTALS

THE SOURCE OR SOURCES FROM WHICH INFORMATION AS TO THE ABOVE-MENTIONED CASES WAS OBTAINED :---

CASES	Non-Pulmonary.	5 12	16	1	2	1
NO. OF CASES	Pulmonary.	6	13	2	2	-
-		::	:	:	:	ds
		::	:	:		Inwar
		General	:	:	Deaths	Transfer Inwards.
and and a second	WOLLOW.	n Registra	:	:	-	• • •
an on Tunor	SOURCE OF INFORMATION.	Registrars Deaths from Registrar-General	:	:	Officers' Qu	
Count	DAUDG	[From Local] Transferable	ions	ter areas	l Medical	-
		Death Returns { T	Posthumous Notifications	"Transfers" from other areas	Other Sources-Local Medical Officers' Quarterly	Summaries

DEATHS FROM TUBERCULOSIS.

There has been a slight increase in the number of deaths from tuberculosis during the year, the number recorded by the Registrar General being 348 as compared with 336 during 1931. As against the 348 recorded by the Registrar General, 359 deaths of persons suffering from tuberculosis came to my knowledge during the year, but it should be borne in mind that tuberculosis may not have been the cause of death in all these cases. The following Table shows the source of information from which the 359 deaths were received, the number of which were notified under the Public Health (Tuberculosis) Regulations and the percentage so notified.

Source of information.	Number of Deaths.	Number Notified. before death	Percentage notified before death
Local Registrars Further deaths recorded on the Quarterly Summaries fur- nished under the Public Health (Tuberculosis) Regu- lations, 1924, by the Local		229	87.07
Medical Officers Transferable Deaths reported	66	60	90.91
by Registrar General	30	13	43.43
Total	359	302	84.12

It is pleasing to notice that during the last few years there has been a considerable improvement in the percentage of cases notified before death; the figure for 1929 was 73.3 per cent., whilst that for 1932 was 84.12 per cent.

Table T. IX. shows the period which elapsed between the date of receipt of the notifications and the date of death :---

TABLE T.IX.

	deaths reported in 1932.	Percentages
Cases not notified	28	7.80
Notified after death	31	8.63
Notified less than 1 week before death	21	5.85
1-2 weeks before death	11	3.02
2-3 weeks before death	14	3.00
3-4 weeks before death	8	2.23
1-2 months before death	21	5.85
2-3 " " "	11	3.02
3—12 ,, ,, ,,	69	19.22
Over 1 year ,, ,,	145	40 38

This Table refers to all deaths of persons suffering from tuberculosis coming to my knowledge during the year from whatever source, whilst the corresponding Table on page 121 of last year's annual report refers only to cases reported to me by the district registrars.

Of the 28 cases not notified, as shown in the above table, 10 came to my knowledge from the Registrar General as transferable deaths, 4 were given on the quarterly summaries received from the District Medical Officers and 14 from the district registrars. As is usual, enquiries were made as to why the last mentioned cases had not been the subject of notification and the following information was elicited :—

	Pulmonary.	Non- Pulmonary.	Total.
Complicated cases presenting difficult diagnosis (includ- ing meningitis cases) Attended by more than one doctor. Thought to have	1	6	. 7
been notified by doctor first attending			2
Doctor not called in until shortly before death	3	-	3
Disease discovered after post- mortem	2	-	2
Contractor of The Long	8	6	14

It was impracticable to enquire into the reason for non-notification in respect of the 10 transferable deaths and the four cases reported on the quarterly summaries from the District Medical Officers, mentioned above.

	HOIIIICAI	TOTIFICATIONS AND DEATHS,						
	Notific	cations.	Death	18.				
Year.	Pulmonary.	All Forms.	Pulmonary.	All Forms				
1915	727	990	414	557				
1916	878	1,098	410	552				
1917	893	1,146	405	621				
1918	829	1,123	489	667				
1919	919	1,176	392	525				
1920	787	1,052	334	461				
1921	611	830	344	464				
1922	671	882	354	481				
1923	805	1,082	345	454				
1924	829	1,167	359	476				
1925	790	1,057	364	481				
1926	719	1,092	337	467				
1927	602	943	323	439				
1928	643	947	321	452				
1929	563	843	340	442				
1930	525	816	265	368				
1931	511	763	258	336				
1932	424	645	273	348				

NOTIFICATIONS AND DEATHS.*

*(Registrar General's figures).

[†]The figures for 1923 and subsequent years include fresh cases coming to the knowledge of the Medical Officer of Health otherwise than by notification.

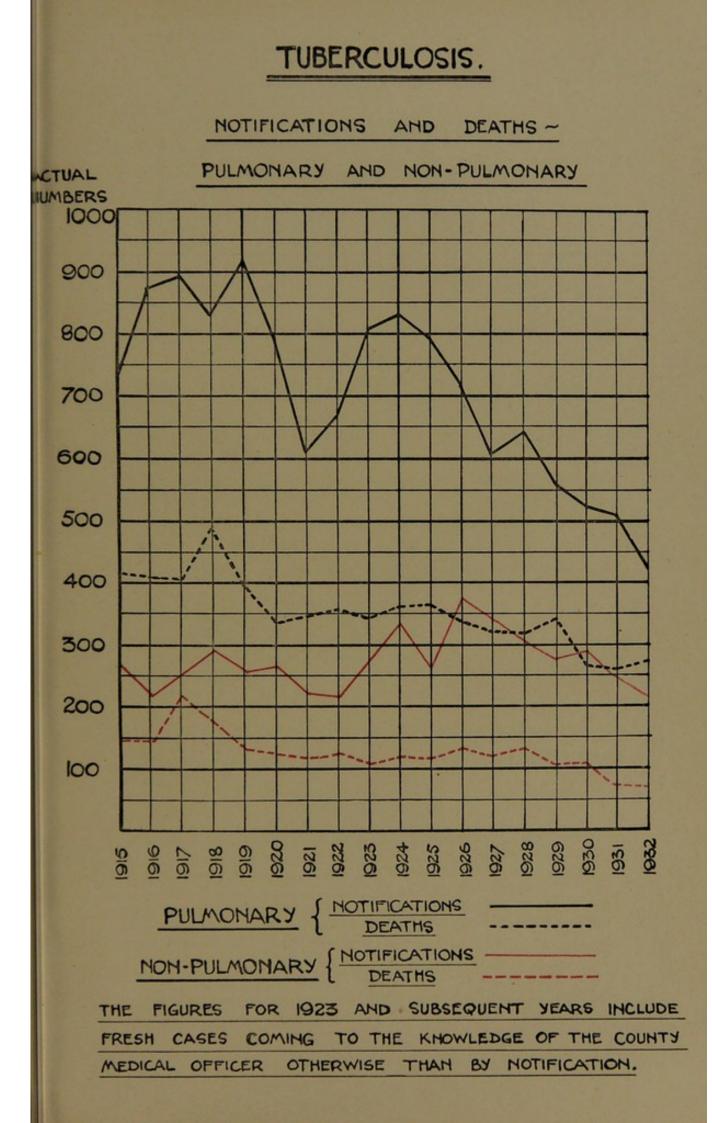
The Death Rates per 1,000 of population from pulmonary and other forms of tuberculosis since 1891, for Derbyshire and all England and Wales, are as follows :—

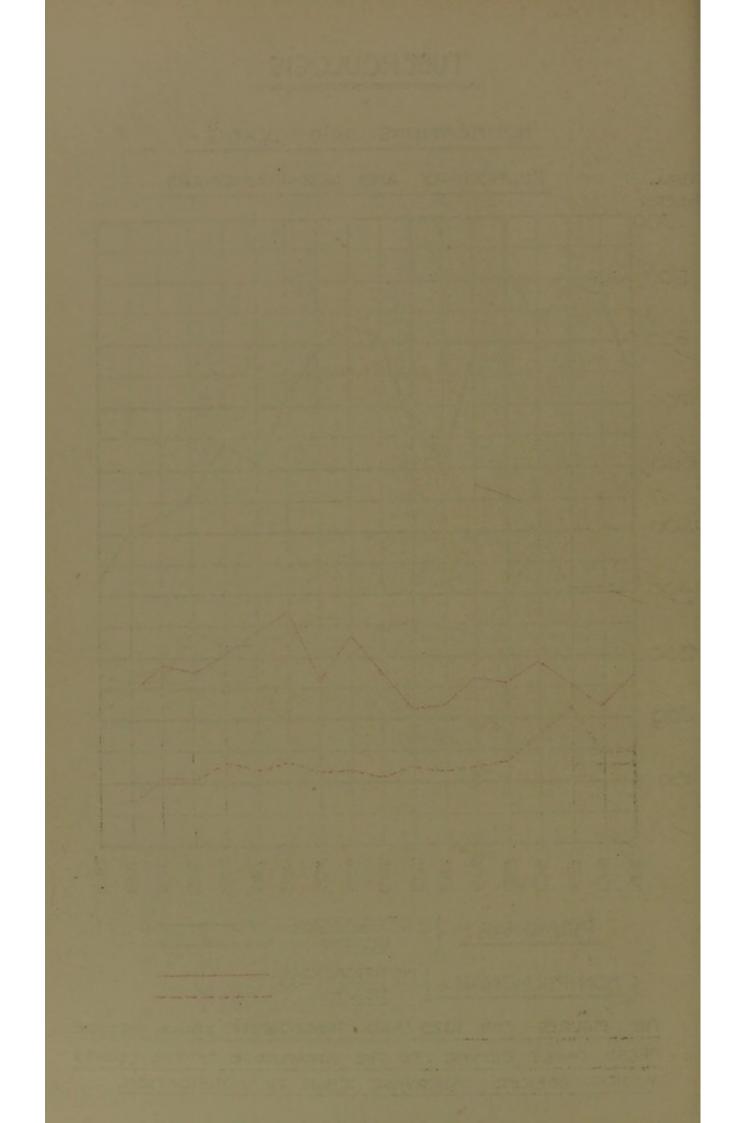
	PULMONARY.		Non-Pulm	ONARY.	TOTAL.	
Years.	Derbyshire.	England & Wales	Derbyshire.	England & Wales	Derbyshire.	England & Wales
1891-1900	1.08	1.37	_	_	_	-
1901-1910	.81	1.16	.49	-49	1.30	1.65
1911-1920	.71	1.07	.32	.35	1.03	1.42
1921-1930	.54	.81	.19	.20	.73	1.01
1931	.42	.74	.12	.15	.54	.89
1932	•44	- 1	.12		.56	-

TABLE T. XI.

The accompanying Diagram shows the number of cases of Pulmonary and Non-pulmonary Tuberculosis and the number of Deaths from these diseases from 1915-1932.

The following table shows the number of persons suffering from tuberculosis on the registers of the district Medical Officers of Health on 31st December of each year shown. Reference has already been made to this Table under the heading of Dispensary Statistics.





100	-	
		-

Year.	PULMONARY.		Non				
	Males.	Females.	Total.	Males.	Females.	Total.	TOTAL
1928	1519	1260	2779	691	614	1305	4084
1929	1498	1283	2781	744	632	1376	4157
1930	1380	1238	2618	720	628	1348	3966
1931	1296	1172	2468	660	600	1260	3728
1932	1164	1055	2219	682	577	1259	3478

TABLE T. XII.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

During the year, five persons suffering from tuberculosis of the respiratory tract and in an infectious state, who were connected with the milk trade, were reported to me. The District Medical Officers concerned were informed of these cases and the following is an outline of the action taken :—

One person was found not to be actually employed in the handling or production of milk.

One person was too ill to work and died shortly after the case came to my knowledge.

One case gave an assurance not to take part in the handling of milk.

One case was afforded sanatorium treatment and was still in an institution at the end of the year.

One case disposed of his milk round to a relative. He subsequently applied for compensation, but as he was not a licensed retailer of milk, his claim was not considered.

PUBLIC HEALTH ACT, 1925 (SECTION 62).

It was not found necessary to take any action under this Section during the year.

AFTER-CARE.

There are five After-Care Committees functioning in the County, viz., Chesterfield Borough, Glossop Borough, Ilkeston Borough, Long Eaton, and Ripley. Three of these Committees administer, on behalf of the County Council, the scheme for the provision of extra nourishment in their areas. Apart from this, the work of these Committees is purely of a voluntary nature—they raise money locally for the assistance of necessitous cases.

OTHER SERVICES.

Arrangements for the home visiting of tuberculous patients by the County Health Visitors, the provision of shelters, the granting of extra nourishment and the home nursing of bed-ridden cases of tuberculosis by District Nurses have been described in previous reports. The work done under these services is tabulated below :—

Homes visited by Health Visitors-

Dispensary Ca	ses		 6,172
Other Cases		•••	 1,617
	Т	otal	 7,789

Shelters.

Number sold during the year	 12
Number in use at the end of the year	 70
Number in store at the end of the year	 23
Sets of bed and bedding supplied	 21
Shelters supplied but not in use	 19
Shelters available for use at Institutions	 16

Extra Nourishment.

Number of patients to whom milk was granted... 104 Cost for financial year ended March 31st, 1933...£308

Nursing of Bed-ridden Cases.

Number referred to District Nurses	11	
Number of visits paid by District Nurses	127	

X-Rays.

The following Table gives details of the X-Ray work done at the Council's Institutions and Dispensaries :---

Dispensary Are	a.		N	o. of Patients.
Ashbourne				13
Burton				33
Chesterfield				392
Chinley				89
Derby				99
Glossop				43
Ilkeston				51
Long Eaton				40
Matlock				26
				786
Derbyshire S	anator	rium		1,353
Bretby Hall			Iospita	
				2,874

In April of last year it was found necessary to discontinue the use of the X-ray apparatus in the New County Offices, Derby, which, on account of its age, had become unreliable in results and unsafe to use. A new apparatus, briefly described under the heading of Derby Dispensary, was installed there in December and in the meantime, Dr. A. R. Laurie of Derby, carried out any necessary radiographic work for patients in the Derby area.

A new X-ray apparatus was also installed at the Derbyshire Sanatorium, Chesterfield, and a short description is given in the section of this report dealing with that institution.

SILICOSIS AND ASBESTOSIS (MEDICAL ARRANGEMENTS) SCHEME, 1931.

The County Council, at the request of the Home Office, allow their Tuberculosis Officers to carry out initial medical examinations of new employees in industries which come within the provisions of this scheme. During the year, 20 persons were examined, and of these, 19 were found to be fit for employment and 1 was referred to the Medical Board for further investigation. 13 of the workers examined were employees in the Refractories Industries and 7 in the Sandstone Industry.

Bacteriological Examination of Sputa.—The following Table shows the number of examinations of sputa for tubercle bacilli made in the County Laboratory during the year :—

TABLE T. XIII.

From Medical Pra From Dispensaries		 oria	Pos. 162 223	Neg. 1,037 795	Total. 1,199 1,018
From Hospitals	 			1	1
Total	 		385	1,833	2,218

Specimens examined by the Ellerman and Erlandsen method	Specimens	examined	by	the	Ellerman	and	Erlandsen	method
---------------------------------------------------------	-----------	----------	----	-----	----------	-----	-----------	--------

Up 10	to years	11-	-20	21 &	over	Tot	tals
Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.
1	109	18	279	30	456	49	844

BLIND PERSONS ACT, 1920.

At the end of 1932 there were 788 Blind Persons (410 males and 378 females) on the Register. Of these, 351 were in receipt of County relief at a total cost of £8,264 per annum. The average amount of relief per case was 9s. 1d. per week. The arrangements made in 1931 for the domiciliary medical relief of necessitous blind persons have been continued during the year under review.

MENTAL DEFICIENCY ACTS, 1913 and 1927.

The Mental Deficiency Acts are administered in this County by the Mental Deficiency Act Committee. The number of cases dealt with and the action taken up to the end of 1932 are shown in the following table :—

TABLE XXXVIII.

		Males.	Females.	Total.
A	-Number of Cases " subject to be dealt with " :			
1.	Under " Order ":			
	(a) (1) In Institutions (excluding cases on Licence)	51	137	188
	(2) On Licence from Institution	ls 5	4	9
	(b) (1) Under Guardianship (ex- cluding cases on Licence)	2	4	6
	(2) On Licence from Guardian- ship	-	_	-
2.	In " places of safety "	-	7	7
3.	Under Statutory Supervision of whom :—	164	126	290
	(a) Attending Occupation Centres		_	_
	(b) Awaiting removal to an Institution	49	46	95
4.	Action not yet taken under any one of the above headings	_		
	(a) Notified by Local Education Authorities, Sec. 2(2)	on 5	1	6
	(b) Mental Defectives in receip of Poor Law Relief :—	t		
	(1) Indoor Relief	62	72	134
	(2) Outdoor Relief	26	33	59
	(c) Otherwise " ascertained "	2	4	6

BNUMBER OF CASES WHO MAY BECOME	
" SUBJECT TO BE DEALT WITH " :	
1. In Institutions or under Guardian- ship dealt with under Sec. 3 :—	
(a) In regard to whom the Local Authority contributes un- der its permissive powers — 5	5
(b) Maintained wholly by parents, relatives or others 5 1	6
2. Reported to the Local Authority from any reliable source but as to whom no action has been taken 245 242	487
3. Under Voluntary Supervision (Supervised by Visitors	
Of whom, attending Occupa- tion Centres — —	-
TABLE XXXIX.	

SUMMARY OF WORK DONE BY HEALTH VISITORS

DURING 1932.

1. MATERNITY AND CHILD WELFARE.

(a) Ante-Natal-

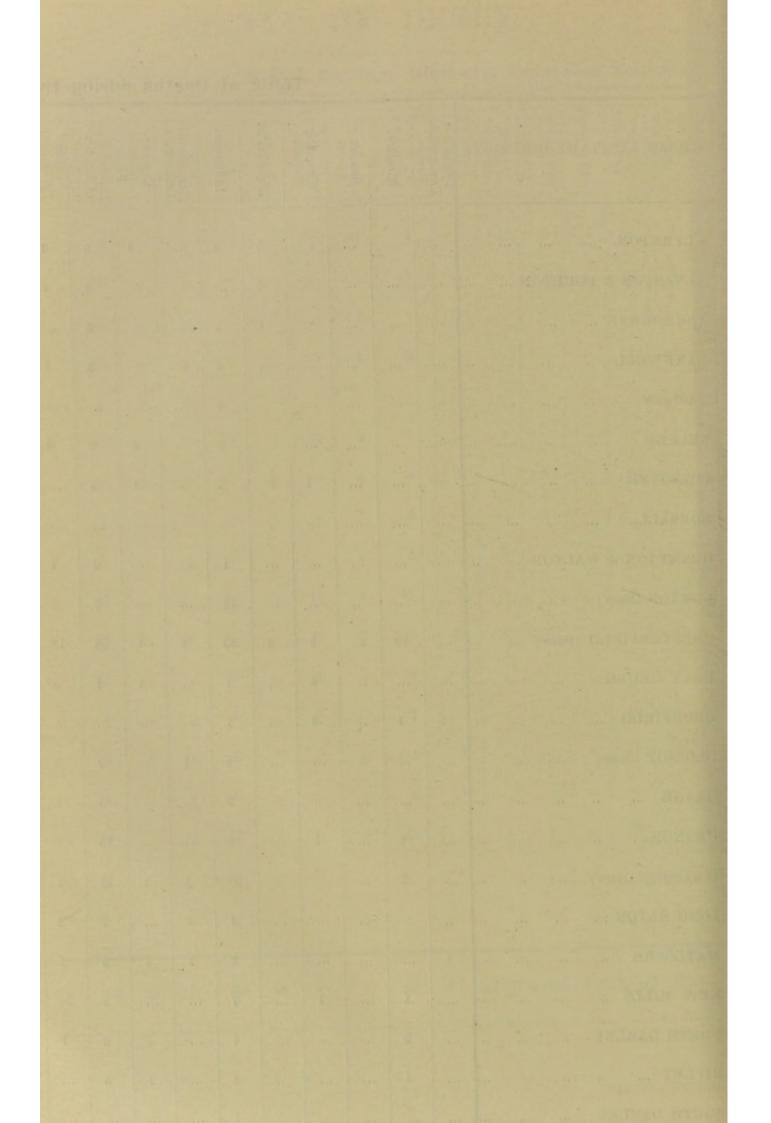
•

N	Number of Sessions			 	290
А	ttendances:				
	Ante-Natal			 4,033	
	Post-Natal			 109	
					4,142
Visits	to homes-				
	First visits			 1,393	
	Subsequent v	isits		 941	
					2,334

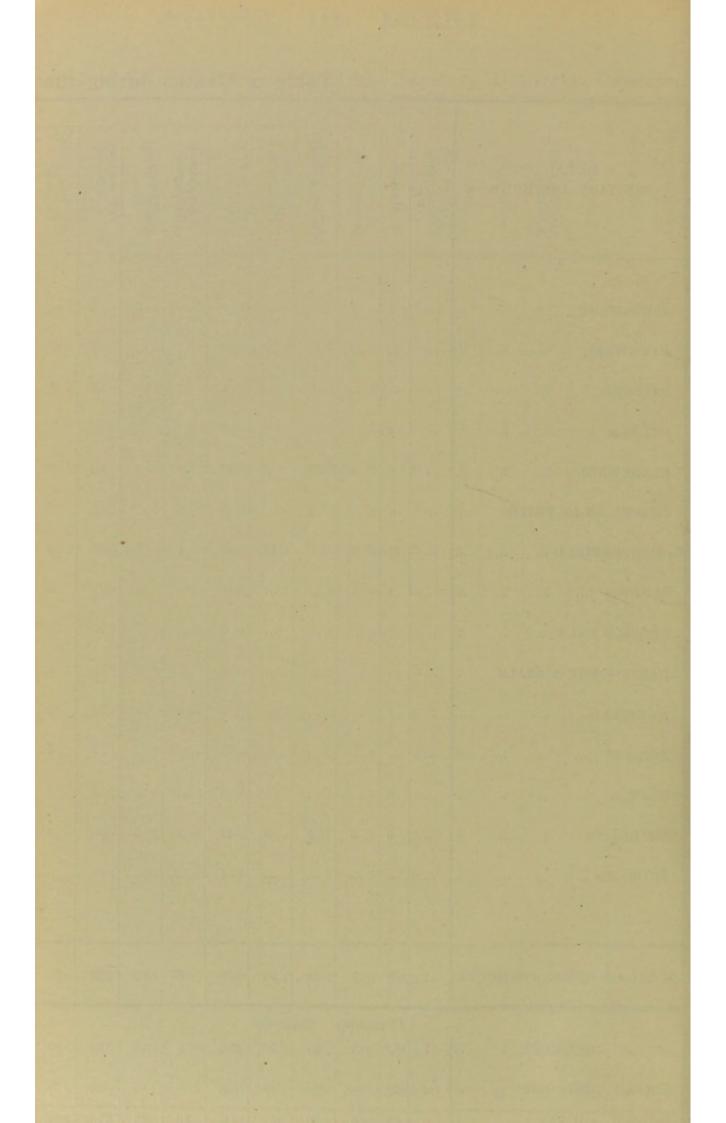
(b) Infant Welfare—		
First visits to infants	8,925	
Other visits (under 1 year)	33,380	
Visits to children 1-5 years	55,998	
		98,303

(c) Attendances at Infant Welfare Centres—	
Number of Sessions 1,854	
Expectant mothers (at Centres) 521	
Infants under 1 year 38,428	
Children over 1 year 30,998	
69,947	
2. TUBERCULOSIS-	
No. of Dimensions attended 720	
No. of Dispensary sessions attended 729	
No. of visits to homes 7,789	
3. School Medical Inspection—	
Number of Inspections :	
Elementary 35,254	
Secondary 2,214	
Verminous conditions 163,340	
Other Inspections 20,704	
Home visits to school children 11,621	
233,133	
Clinic sessions attended—	
Tonsil and Adenoid operations 474	
Ear 300	
Eye 500	
Destal sensitive 199	
Dental anæsthetic 188 — 1,402	
1,102	
4. Mental Deficiency-	
Visit to homes 1,969	
Visit to homes 1,969	
Visit to homes 1,969 5. BLIND PERSONS ACT—	
Visit to homes 1,969	
Visit to homes 1,969 5. BLIND PERSONS ACT— Visit to homes 55	
Visit to homes 1,969 5. BLIND PERSONS ACT—	
Visit to homes1,9695. BLIND PERSONS ACT— Visit to homes556. Infant Life Protection Visits332	
Visit to homes 1,969 5. BLIND PERSONS ACT— Visit to homes 55	
Visit to homes1,9695. BLIND PERSONS ACT— Visit to homes556. Infant Life Protection Visits332	

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URBAN SANITARY DISTRICT.	Typhoid & Paratyphoid Fevers.	Measles.	Searlet Fover.	Whooping Congh.	Diphtheria.	Influenza.	shalltis argica.	whree simal wer.	renlosis espira- System	Tubercalous Diseases.	year	Oeneral Paradysia of the flexade, Taken Derealis.	Malignant Disease.	Diabetes.	Hamorr phage.	Disease.	E ST	Circulatory of Diseases. 2	-	Pnesmonia (all forms).	Mory Aor.	ptic cer.	Diarrheea, efc. efc. (umder 2 yrs)	Appendicitie	Cirrhosis of Liver.	Other Dis- eases of Liver, etc.	Digestive Diseases.	Acuto and Chronic Nephritia.	Poerperal Sepaia.	Other Puerperal Caunea	Concentral Debuilty, Fre- mature Birth. Maltermation,	Senility.	Suicides.	Other Violence.	Other Defined Diseases	Causes ill-defined or unknown.	Smallpox.	Polio- myelitis.	Polis- encephalitie.	TOTALS
LFRETON					5	2		4	6	8	1		32	4	10	46	3	10	15	8	4	5	2			9	10	9		ı	12	10	4	13	14	2			-	21
LVASTON & BOULTON					1				2	1			3		3	3			1	2			1			1	2				3	2		3	3					
SHBOURNE					1	1			8	***			10	1	3	7			1	1	1			1			3	2		1	5	16	1	2	4					1
AKEWELL						u u			з	1			6		2	3		1	1	1					1		1	2			3	1			4	1				
ASLOW						2			***				1	1	2	3		1														1	1							1
ELPER						2		2	7	2			21	1	10	26	2	10	2	7	1	2				1	з	à			12	7	3	4	11					10
IOLSOVER				1	1	3		3	5				9	2	5	18		4	4	4	2	1	1					3	3		8	12	1	12	10	2				10
ONSALL													1	1	1	4			1	8							1				ĸ	1			2				·	1
BRAMPTON & WALTON						1			2	1			7		1	6			1	5		1					2					3		1	3		***			3
UXTON (Bero')						12			7	3	1	1	17		10	30		15	3	11	1				1	2		8		2	4		5	7	27	4				17
HESTERFIELD (Bore')		12		5	- 6	30	1	4	38	14	3	1	92	10	46	132		29	40	55	10	3	3	2	3	4	27	11	1	ð	45	21	6	23	49	8				74
CLAY CROSS				4		1		4	1	3	1	1	11	1	6	19		6	1	18	2			1			3	2			9	4		3	9	1				10
DRONFIELD	. 1	1	ng:	3		1							4		2	7		6		2					***		1	8			1			1	6	3			and.	4
LOSSOP (Boro')						4	1		7	4	1		43	3	14	37	1	14	9	5	1			2	2	2	7	10			11	20	3	4	39	4				24
IEAGE						2			4	1			2		2	5		2	1	3	2						2	4			2				3					3
BEANOR		1		1		6			10	4	1	1	33	1	19	32	1	11	8	15	4	3	2		2		9	4		1	10	16	1	7	27				-	28
ILKESTON (Boro')		1				10	3	1	19	1	1	2	45	6	24	66		27	23	15	2		7	1	1		7	8	1	1	80	20	2	11	15					35
LONG EATON						3	1		7	2	1	2	32	5	13	30		12	8	16	1	2	1.			2	3	.6			14	35	4	•	25	1				23
MATLOCES	. 1					4	1	1	8	1			17	4	13	45		7	6	5	2					2	4	2			۵	2		12	18	3			11	158
NEW MILLS		1		1		7			3				14	3	12	15		6	6	6	1	2				2	1	4	1	1	4	6	5	4	τ	1				113
NORTH DARLEY		2				1		1	2	1			1		2	12		1	1						***			1	1		1	1		6	4	1				31
RIPLEY		1				4		1	3		1		18	1	7	19		8	9	11		1			1	1	7	2		1	4	15	2	6	12				-	180
SOUTH DARLEY						1							1			4												1					1		1	1				10
SWADLINCOTE		7		1		4			5	2		1	19	7	16	37		2	5	11	5		1	2	1	1	4	6		8	9	20	4	8	20					200
WIRESWORTH						1			1				6		2	11		2	2	5		3	2			1	1	1			3	3	1	2	5				-	49
TOTAL OF URBAN DISTRICT	8 2	26		6	12	102	7	21	140	44	11	9	445	51	237	631	7	174	148	203	39	25	20	9	12	21	98	94	7	15	195	224	44	137	813	31				3571



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				Tat	ole o	of De	ath	s du	ring	the	yea	r 19	82	in e	ach	of th	e R	UR	AL	Sani	tary	Dis	trict	s, Cl	assi	ified	acc	ordir	ng t	o Di	seas	es.								
	1						-	-										PROM F																						
RURAL SANITARY DISTRICTS.	Typhoid and Paratyphoid	Ferer. Measles.	Scarlet Fords.	Whosping Cough	Diphtheria.	Influenza.	Eucophalitis Lethargica.	Cerebro Spinal Fever.	Tuberculosis of Respiratory System.	Other Tuberculous Diseases.	Syphilia.	General Paralysis of the insame, takes dorsalis,	Cancer, Malignant Disease.	Diabetes.	Cerebral Hæmorrhage.	Heart Disease.	Aneurysm.	Other Circulatory Diseases.	Bronchitis.	Pneumenia (all forms).	Other Respiratory Diseases.	Peptie Ulcer.	Diarrhora, etc. (under 2 years)	Appendicitis.	Cirrhosis of Liver.	Other Diseases of the Liver, etc.	Other Digestive Diseases.	Acute and Chronic Nephritis.	Puerperal Sepsis.	Other Peerperal Causes.	Congreital Debility, Presoature Steffs, Mailorrantiona, etc.	Senility.	Suicides.	Other Violence.	Other defined Diseases.	Causes ill-defined or unknown.	Smallpox.	Poliomyelitis.	Polio- encephalitis	
SHBOURNE		1				5			8			1	16	3	14	23		5		8		1	1			1	2	3			2	27	1	6	9	1	***	1		
AKEWELL				1	2	5			7			2	24	3	10	39	2	17	9	8	2	2	1	2	2	2	4	6			8	11	2	16	18	3				
ASFORD						1			2	1			1		3	5		1	2				1					1		1	1	1		1	2					l
ELPER		2			1	4		2	14	1	1	1	36	2	16	61		22	5	12	4	3	1	4	1	1	11	11		1	14	17	5	8	18					
LACKWELL	1	3	1	10	3	10		6	23	6	1	3	49	3	28	88		8	25	38	4	3	4	3	1	2	8	12	2	3	24	27	4	18	31	4				
HAPEL-EN-LE-FRITH				1		6	1		5	3			20	2	18	44		.8	4	7		1	2	1		2	6	10			8	10	2	8	9	-1				
HESTERFIELD		26	3	9	15	29	1	8	25	13	4	4	96	11	51	202	1	32	40	97	6	3	10	2	2	6	14	34	4	2	61	12	9	34	91	10				
LOWNE		. 1	1			11	1	5	11	1			18	4	15	22	1	5	13	12	2	3	1	2	1		2	5		1	9	12	4	10	11			1		
LOSSOP DALE						2							9	1	2	16		6	2	4	2						2	3			2	2		1	8					
LARTSHORNE & SEALS						3		1		1		1	16	3	7	18		2	6	6				1		1	2	3		2	8	9	2	3	10					
HAYFIELD						a			1.	1			8	1	4	10		2	1	5						2	2			1	2	6	2	1	5					
										1			21	1		24		1				2				1	1	7				4		1	9					
NORTON										1									-			1		2		1	6	5				n	0		20					
REFTON		. 3				2			0	1			19		13	36		9		14	2									8										
SHARDLOW		. 3	2	3	1	16	3	2	23	2	1		53	7	34	72		17	15	15	5	5	1	2	3		11	13	1		18	46	3	11	83	2				
SUDBURY						1			2				6	1	1	0		1	1	2							1	1				5		2	4					
OTAL OF RURAL DISTRICT	8	1 37	7	24	22	100	6	22	133	31	7	12	103	44	216	663	4	139	130	232	33	24	22	19	10	20	72	114	1	13	163	198	39	124	278	22		2	1	36
																	ино		COUN																					Ĩ
BURAL DISTRICTS		1 31	7	24	22	100	6	22	183	31	7	12	392	-44	216	669	4	139	130	232	33	24	22	.19	10	30	72	114	7	13	163	198	39	124	278	22				
UBBAN DISTRICTS		2 20		16	12	102	7	21	140	44	11	9	445	51	237	631	7	174	149	203	39	25	20	9	12	21	95	91	7	15	196	224	44		313	31		-	-	
WHOLE COUNTY		3 63	1 7	40	34	202	13	43	273	75	18	21	837	95	453	1300	11	313	278	435	72	49	42	28	22	41	150	208	14	28	359	422	.83	261	591	53		2		69



DERBYSHIRE EDUCATION COMMITTEE.

REPORT

OF THE

School Medical Officer

ON THE

Medical Inspection of School Children

Year ended 31st December, 1932.

W. M. ASH, M.B., B.S., F.R.C.S., D.P.H., School Medical Officer.

SIMPSONS' LTD., DEREY.

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SCHOOL MEDICAL STAFF.

COUNTY SCHOOL MEDICAL OFFICER-W. M. ASH, M.B., B.S., F.R.C.S., D.P.H.

DEPUTY SCHOOL MEDICAL OFFICER-R. N. CURNOW, M.B., B.S., D.P.H.

ASSISTANT SCHOOL MEDICAL OFFICERS-

H. S. BRYAN, M.R.C.S., L.R.C.P.
F. J. BURKE, M.D., B.Ch.
WILHELMINA W. HENDRY, M.B., Ch.B., D.P.H.
A. MACMILLAN, M.B., Ch.B., D.P.H.
ETHEL W. MORRIS, M.R.C.S., L.R.C.P., D.P.H.
W. J. PIERCE, M.B., Ch.B., D.P.H.
H. N. POPHAM, M.B., B.S.
Also 7 Part-time School Medical Officers.

OPHTHALMIC SURGEON-T. E. A. CARR, M.B., B.S.

EAR, NOSE AND THROAT SURGEON-MARGARET S. PURCE, M.B., B.Ch., F.R.C.S.

> ORTHOPÆDIC SURGEON— G. A. Q. LENNANE, M.B., B.Ch.

> > SENIOR DENTAL OFFICER-H. P. SUTCLIFFE, L.D.S.

DENTAL OFFICERS— CHRISTINE B. CALDER, L.D.S. JOSÉPHINE DOLAN. ELIZABETH GRANT, L.D.S. FLORA GRANT, L.D.S. CICELY JEFFERSON, L.D.S. MEREDITH LEWIS, L.D.S. C. L. NOBLE, L.D.S. DORIS M. THOMSON, L.D.S. Also 6 Dental Attendants and 3 Dental Clerks.

> ORTHOPÆDIC NURSES-Miss M. E. GARRATT. Miss E. TAYLOR.

SCHOOL NURSES-53 School Nurses are employed.

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER, 1932.

To the Chairman and Members of the Derbyshire Education Committee.

LADIES AND GENTLEMEN,

I have the honour to present the Twenty-sixth Annual Report on the work of the School Medical Service in Derbyshire.

The general arrangements of the Service have been continued during the year on the same lines as previously.

It will be seen from the body of the Report that the nutrition of the school children has been receiving particular attention by the School Medical Staff, and as a result of these investigations there does not appear to be any marked increase in malnutrition due to underfeeding. However, I would like to make it quite clear that this is not to be interpreted that I am satisfied that the children are getting plenty. There are many instances of poverty where the bare necessities alone are being provided.

In conclusion, I would like to express my thanks to the Committee and the Director of Education for the assistance I have received from them during the year, and I would also express my indebtedness to my Deputy, Dr. Curnow, who is largely responsible for the compilation of this Report.

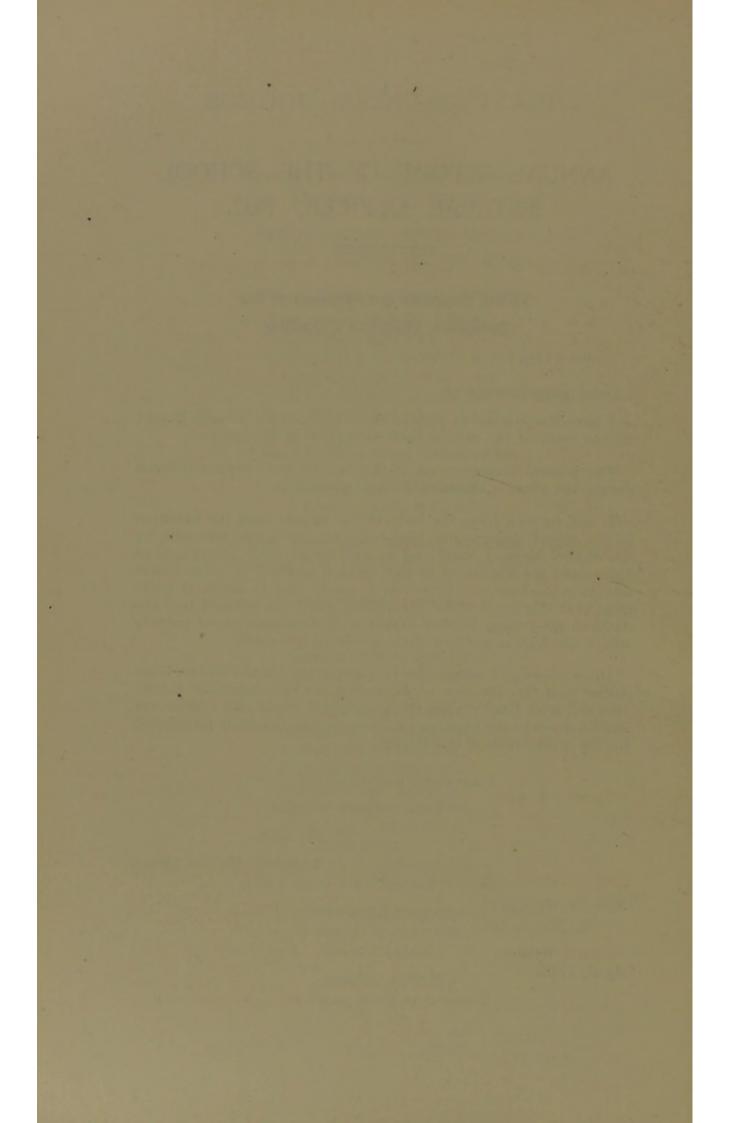
I have the honour to be,

Your obedient Servant,

W. M. ASH,

School Medical Officer.

New County Offices, St. Mary's Gate, Derby. April, 1933.



SECTION I.

NUMBER OF SCHOOLS AND ENROLMENTS.

The Derbyshire Education Committee is the Local Education Authority for the whole of the administrative County with the exception of the Boroughs of Buxton, Chesterfield, Glossop and Ilkeston, which are autonomous for elementary education.

The schools and enrolments are as follows :---

Urban Districts	 Schools. 95	Enrolments. 28,621
Rural Districts	 284	46,790
	379	75,411

New Schools.

Two new schools were completed during 1932 :---Somercotes Central Council Senior Mixed School, and Spondon Springfield Council Junior Mixed School.

CO-ORDINATION.

Co-ordination between the various medical services in the County continues on the lines indicated in previous reports.

Nursery Schools. The Education Committee has provided no Nursery Schools in the County area.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

School Hygiene.—As in previous years, each Assistant School Medical Officer, on completion of the medical inspection of the children in the schools in his area, makes a survey of the premises and reports on any defects found. During the year 487 departments

were inspected, and details of the conditions found are given in Table A below :—

				Good.	Insufficient.	Defective and needs attention.
Cleanliness			 	485	1	1
Heating			 	483	2	2
Lighting			 	485	_	2
Ventilation			 	481	3	2
Water Supply			 	474	10	3
Washing Arrang	emente	3	 	460	25	2 .
Cloak Room Ari	angen	ents	 	481	5	1
Sanitary Arrange			 	442	4	41
Playgrounds			 	445	-	42
Buildings			 	480	-	7

TABLE A

The serious defects in the sanitary condition of any department are at once referred to the County Architect. The following Table Table B) shows the work done by the County Architect during the last five years, part of which was undertaken as a result of the reports of the medical inspectors :—

TABLE B.

TYPE OF WORK.	1928	1929	1930	1931	1932	Total.
		1	-			
Improvements to heating apparatus	6	18	61	75	46	206
Heating improved by stoves, etc		4	12	17	14	54
Conveniences converted		9	2	2	15	32
Drainage improved	4	6	14	16	14	54
Ventilation improved	0	. 7	12	22	22	66
Electric light installed	19	17	12	14	13	68
New floors	10	10	28	34	32	114
Supplied with Cookery Centre	0	2	1	1		10
Supplied with Manual Rooms	0	3	-			12
General repairs carried out	291	232	275	124	405	1,327

Medical Inspection.—The work of medical inspection is continued in the manner described in previous reports, and set out in detail in the Report of 1930. Each school is visited for the purpose of routine medical inspection and, as far as possible, a second visit for re-inspection of children found to be defective is paid later in the year. In addition to the visits of the Assistant School Medical Officer, the School Nurse attends each school from time to time to examine the children for personal cleanliness and verminous conditions. During 1932, each school received on an average 4.7 such visits.

(a) The Age Groups inspected were those prescribed by the Board of Education (Special Services) Regulations, 1925. Statistical particulars of these routine inspections, together with particulars of special inspections and re-inspections, are given in Table I. appended to this Report.

(b) Extent to which the Board's Schedule of Medical Inspection has been followed.—All inspection has been carried out in accordance with the Schedule of Medical Inspection of the Board of Education.

FINDINGS OF MEDICAL INSPECTION AND MEDICAL TREATMENT.

Appended to this Report will be found the Tables prescribed by the Board of Education showing defects found at Medical Inspections during 1932 (Table II., Section A.); number of children found to require treatment (Table II., Section B.); whilst Group IV. of Table IV. shows the dental defects found, and Group V. of Table IV. relates to uncleanliness and verminous conditions.

(a) **Uncleanliness.** During the year, 163,340 inspections and re-inspections for this condition were made compared with 155,270 in 1931—69,605 of boys and 93,735 of girls. 2,001 individual children were found to be verminous; of these, 208 were boys and 1,793 were girls. 0.54% of boys were verminous and 4.80% of girls. This figure does not include children found to have one or two nits on one occasion only.

(b) Minor Ailments. Detailed returns of the incidence of defects found are set out under their respective headings in Table II., Table IV. (Group I.) shows a total of 3 996 minor ailments treated. Of these, 3,425 were treated under the Authority's scheme, and 571 otherwise.

(c) **Tonsils and Adenoids.** During the year, 4,060 children were found to be suffering from enlarged tonsils or adenoids, 588 of them being referred for treatment. 841 cases of enlarged tonsils or adenoids were operated on by the Aural Surgeon, 346 received their operations elsewhere, making a total of 1,187 for the year.

The system of conservative treatment, commenced in May, 1931, and described in some detail in my annual report for that year, was extended in March, 1932, to include all children suffering from enlarged tonsils and adenoids, so that no child may be referred for operative treatment for this condition unless he has been treated on conservative lines for a period of at least six months and the condition has failed to improve. The effect of this system is shewn in the following tables, the first of which shews the fall in the proportion of children referred for operative treatment ; and the second, the increased number of children who have been referred for observation, with a diminution of the number referred for operation.

TABLE C.

T

(Incident	ce per	1,000 Routine	Inspections.)
		Derbyshire.	England and Wales.
1927		113.8	60.9
1928		118.7	63.0
1929		143.7	66.8
1930		140.2	66.5
1931		83.1	64.6
1932		16.2	

TABLE D.

		Total No. foun	d Defective.
		Referred for Treatment.	Referred for Observation.
1928	 	3,724	1,986
1929	 	4,108	1,584
1930	 	4,336	1,862
1931	 	2,876	2,805
1932	 	588	3,472

In spite of the large number of children awaiting operation at the beginning of the year, the number of children actually operated on has fallen considerably, as is shewn in the following table, which gives the number of operations performed in each of the last five years.

TABLE E.

RECEIVED OPERATIVE TREATMENT.

	By the	County Surgeon.	Total (including Hospital, etc.).
1928		1,466	2,043
1929		1,716	2,240
1930		1,742	2,316
1931		1,970	2,626
1932		841	1,187

The following table, which is an analysis of 639 cases treated under this new system during the year, shews that the reason for the fall in the number of operations is a two-fold one :—

(1) The association between dental defects and enlargement of tonsils and adenoids has long been recognised, and it is not surprising to find that a large proportion of the children detected as suffering from enlarged tonsils and adenoids have persistently refused routine dental treatment. Some of these accepted dental treatment as a preliminary to the treatment of enlarged tonsils and adenoids, but rather more than one-third still refused, and their names were not placed on the waiting list for operation.

(2) Of the remaining 60.1% who accepted dental treatment and co-operated in the course of conservative treatment, 21.9% recovered without operation, 17.8% were still under observation at the end of the year, while the remaining 20.4% were referred for operation.

		Refused Dental Treatment.	Accept	ed Dental	Treatment.
	Total No.		Improved	Under Obser- vation.	For Operation.
No. of cases Percentage	639 100	$\begin{array}{r}255\\39.9\end{array}$	$\begin{array}{c}140\\21\cdot9\end{array}$	$\frac{114}{17\cdot 8}$	$\frac{130}{20\cdot 4}$

TABLE F.

From this table it is clear that only one-third of the children who accept conservative forms of treatment are referred for operation at the end of the period of six months' treatment.

TABLE G.

Area			New Cases.	Old Cases.	Re-examinations
Ashbourne			35	115	89
Alfreton]	170	199	156
Belper			77	127	40
Bretby Orth	opæd	ic			
	Iospi		25	65	27
Chinley			91	134	125
Clay Cross			18	195	41
Chesterfield			303	741	277
Derby			92	245	60
Heanor			31	79	64
Long Eaton			29	91	37
Matlock			52	157	53
Shirebrook			66	258	136
Swadlincote			96	199	104
Total No. of	Case	s	1,085	2,605	1,209

EAR, NOSE, AND THROAT CASES EXAMINED.

Total number of Examinations ... 4,899, *i.e.*, 4,770 Education Cases, 129 M. & C.W. Cases.

TABLE H.

Area.	Education. cases.	M. & C.W. cases.	Secondary School cases.	Others.	Totals.
Alfreton	122	12	1	-	135
Ashbourne	30	5	-	3 Staffs.C.C.	38
Bretby	45	-			$4\dot{5}$
Chesterfield	273	27	2	_	302
Chinley	48	10	3 .	37 Buxton Borough Cases.	98
Derby	203	16	1 -	-	220
Shirebrook	73	4	1- 1 min	-	77
Totals	794	74	7	40	915

OPERATIONS PERFORMED FOR ENLARGED TONSILS AND ADENOIDS.

POST OPERATIVE COMPLICATIONS.

Secondary Tonsil	lar Hæ	morrha	age	3	23
Secondary Nasal	Hæmo	rrhage			7
Cervical Adenitis					5
Acidosis					7
Pneumonia					7
Bronchitis					3
Pleurisy					2
Chorea					2
Parotitis					1
Acute Otitis					2
Mastoiditis					1

(d) **Tuberculosis.** In the course of School Medical Inspection, cases of tuberculosis or suspected tuberculosis amongst children are referred to the Tuberculosis Department, where the necessary treatment is carried out.

PULMONARY			1932	1931
Definite	 	 	22	24
Suspected	 	 	43	73

NON-PULM	ONARY.				1932	1931
Gland	5			 	84	63
Spine				 	. 9	5
Hip .				 	8	3
Other	Bones	and	Joints	 	11	12
Skin				 	4	3
Other	forms			 	26	22.

The following Table shows the notification of school children aged 5 to 15 for the past ten years :---

Veen	PULMONARY.		and the second se	ON- ONARY.	Total	
Year.	М.	F.	М.	F.	- Notifications Ages 5-13	
1923	64	62	55	41	222	
1924	65	58	82	63	268	
1925	71	82	64	31	248	
1926	63	43	78	52	236	
1927	37	33	77	53	200	
1928	33	39	59	62	193	
1929	27	. 32	61	48	168	
1930	23	22	54	52	151	
1931	24	25	55	42	146	
1932	10	25	45	32	112	

TABLE J.

Assistant School Medical Officers in this County are instructed that as a general rule, before notifying school children as suffering from pulmonary tuberculosis, diagnosis should be confirmed by one of the Council's Tuberculosis Officers.

School children requiring institutional treatment for Pulmonary Tuberculosis are accommodated at the County Council's Sanatorium at Walton, where 20 beds are available for children. Cases of surgical tuberculosis are accommodated at the County Council's Orthopædic Hospital, Bretby, where there are 55 beds allotted for children under 16 years of age suffering from non-pulmonary tuberculosis.

The number of children receiving treatment in the County Sanatorium during the year is shewn in the following tables :---

		Males.	Females.	Total.
Children in Sanatorium,				
1st January, 1932	 	9	9	18
Admissions during 1932	 	13	20	33
Discharges during 1932	 	16	22	38 .
Children in Sanatorium, 31st December, 1932	 	6	7	13

Condition of patients on discharge :---

Condition.	Class T.B. Minus.	Group +I	Group +II.	Group +III.	Total.
Quiescent Not Quiescent Died in the Institution Not Tuberculous Doubtfully Tuberculous	10 21 — —	11111	3	11411	$ \begin{array}{c} 10\\ 24\\ -\\ 3\\ 1 \end{array} $

(e) **Skin Diseases.** Ringworm of the Body. Assistant School Medical Officers, at Routine Medical Inspection, found 30 children suffering from ringworm of the body, as compared with 20 last year. Of these, 28 were treated at the School Clinics and two received treatment elsewhere.

Ringworm of the Scalp. During the year, 49 cases of ringworm of the scalp were found at routine medical inspection and nine otherwise, making a total of 58 children discovered to be suffering from this disease, 52 of whom were treated under the Authority's scheme and 6 otherwise.

The Education Committee has two centres of its own for X-ray treatment of ringworm, one being at the County Offices, Derby, and the other at the County Council Clinic at Chesterfield. The work done at these clinics during the year is as follows :—

DERBY.	Total number of cases Number of ringworm cases tro factorily by X-rays	eated	satis	-
	Number treated by other mea was not in a fit condition	ns as	scal	0
CHESTERFIELD.	Total number of cases Number treated by X-rays			
	Number treated by other mean			2

Scabies. 40 cases of scabies were discovered during the year at school medical inspection, 30 of whom were treated under the Authority's scheme.

Impetigo. During the year, 190 cases of Impetigo were found at School Medical Inspection, 503 being discovered otherwise, making a total of 693, of whom 682 were treated under the Authority's scheme, and 11 received their treatment elsewhere. Other Skin Diseases. 334 cases were found at medical inspection to require treatment, 127 of whom were treated under the Authority's scheme.

(f) **External Eye Disease.** 286 cases of external eye diseases were discovered during the course of medical inspection. Of these, 164 were found to be suffering from blepharitis; 203 cases were referred for treatment. A considerable number of such cases are also referred to the Minor Ailment Clinics by the Teachers, Health Visitors, and Attendance Officers. 371 cases were treated under the Authority's scheme and 42 otherwise.

(g) Vision. In the course of routine medical inspection, 2,723 children were found to be suffering from defective vision, excluding squint, 1,778 of whom required treatment. 2,144 cases from all sources were referred to the Ophthalmic Surgeon for defective vision, including squint, 1,968 of these being treated under the Authority's scheme.

The statistical details of the work of the Ophthalmic Department are given in Tables "K" and "L"; other statistics are given in Tables III. and IV. at the end of this report.

TABLE K.

No abnormal	lity							135
Hypermetrop	ia and hy	perme	tropic	astign	atism			1121
Myopia, myo	pic astign	natism	and	mixed	astigm	atism		674
Disturbances	of muscle	e balar	100 :	_				
	Squint, c							297
	,, d	liverge	nt					17
	Other dis				e			16
Affections of	the lids :	_						
	Blepharit							41
	Other aff							17
Affections of	the Conj	unctiva	a					35
Affections of	the Corn	eaCo	orneal	Ulcers				10
		K	eratiti	s				6
		Co	orneal	Opacit	ies			42
				ffection		he Corr	iea	6
,,	, Lach	rymal	appa	ratus				2
	, Iris							9
	, Lens							22
		lus oct	uli					56
Other affecti		e eve						35
Affections of				system				32
Symptoms d								15
Examination								29

The figures relating to the several Clinics are as follows :---

Ormuna		New (CASES.	OLD C	- Total.	
CLINIC.		Re- fraction.	Treat- ment.	Re- fraction.	Treat- ment.	- Totai
Ir. T. E. A. CAR	R.	-				
Alfreton		225	5	65	4	299
Bakewell		14		-		14
Belper		88		21		109
Chinley		180	3	23	1	207
Chesterfield		409	5	149	7	570
Derby		306	12	154	18	490
Heanor		174	4	33	3	214
Long Eaton		115		13		128
Matlock		100	6	18	2	126
Swadlincote and Bretby		130	15	21	5	171
Wirksworth		10	-	-	-	10
		1751	50	497	40	2338
Dr. E. W. MORRIS	s.	-				
Bolsover	·	54	3	29	12	98
Clowne		39	5	56	. 4	104
Dronfield		69	6	67	10	152
Eckington		39	2	61	32	134
Killamarsh		43	7	33	7.	90
Shirebrook		47	15	107	50	219
		291	38	353	115	797

TABLE L.

(h) Ear Diseases. During the course of medical inspection, 266 children were found to be suffering from discharging ears, 230 from defective hearing, and 148 from other ear diseases. Further statistical details of the Ear, Nose and Throat Department have been tabulated under the heading of Tonsils and Adenoids.

Ionisation.

In addition to the ordinary routine treatment of discharging ears, which has been carried out in the school clinics for many years, a series of special sessions has been held, during which the County Ear, Nose and Throat Surgeon has treated these cases by means of ionisation.

She has submitted a full and interesting report on this form of treatment, and while the figures are somewhat too small as yet to assess its value, the following precis of her report is of interest.

She states that cases suitable for treatment have to be carefully selected, due attention being paid to the associated conditions of the Nose and Throat, the size and position of the perforations in the drum, and the presence of aural complications.

The treatment consists of filling the ear, after it has been carefully cleaned, with a 5% solution of zinc sulphate; the positive electrode of a battery is then inserted into the ear, while the negative electrode is attached to some other part of the body. An electric current is slowly turned on and increased up to 2-3 milliamps, the strength depending upon the re-action of the patient. After a few minutes the current is slowly turned off and the ear dried. Instructions as to after-treatment are given, and, whenever possible, the patient attends again in two or three days time and a further course of treatment is carried out.

During the year, 70 cases were treated by this method. 23 cases were cured—17 after one application, 5 after two applications, and 1 after three applications; 26 cases were improved, the discharge becoming less in quantity and not so objectionable.

In 6 cases with double ear discharge, one ear was cured and the other improved.

In 15 cases there was no change.

All these cases are being kept under observation for a further period before the result of this form of treatment is finally noted.

(i) **Dental Defects.** Of the 54,166 children inspected by the Dental Officers during 352 sessions, 45,291 required treatment, 15,040 were actually treated and 8,116 re-treated. 26,104 attendances were made, 25,549 temporary teeth and 5,624 permanent teeth were extracted and 32,227 fillings inserted during the 3,392 sessions devoted to treatment.

These figures shew a slight reduction as compared with those of last year, largely owing to illness among the School Dental Officers.

There is, however, one unique feature in this year's figures, which has been pointed out by the senior Dental Officer in his Annual Report, namely, that for the first time there have been more filling operations than extractions. This is the goal that has been aimed at for many years, and the accomplishment of the last twelve months marks an advance in preventive as compared with curative dentistry.

Of the number of teeth extracted, 5,624 were of the permanent dentition. The senior Dental Officer points out that this number is largely due to the regrettable refusal of treatment at routine dental inspection, the caries present not being apparent to the parent.

He looks forward to closer co-operation with the Infant Welfare Services in an endeavour to reduce the amount of treatment necessary amongst entrants, and steps have already been taken this year to attain this very desirable end.

(j) **Crippling Defects.** The Orthopædic Scheme consisting of the Central Orthopædic Hospital at Bretby and clinics functioning as out-patient departments in various parts of the County continues to work satisfactorily. Full details were given in my report of 1930.

TABLE M. School Age. Under Boys. Girls. Grand Total. Sch. Age. Total. Total. Attending Clinic or County Inst. Attending other Institutions Attending Clinic or County Inst. Attending other Institutions Boys. Girls. Tuberculosis-Abdominal Glands Spine Hip Knee Foot ... _ ... Elbow Hand Paralyses-Poliomyelitis ... Spastic Pseudo-Hypertrophic ... Rickets-Scoliosis **Kyphosis** ... Torticollis ... Bow legs, etc. ... Congenital Defects Injuries Others . . .

TABLE N.

NUMBER OF CHILDREN OF SCHOOL AGE (5-16) IN HOSPITAL DURING THE YEAR 1932.

	Non. T.B. Cases.	NON. PULM. T.B. CASES.
Children in Hospital on Jan. 1st, 1932	40	55
Admitted during 1932	91	38
Discharged during 1932	94	40
Children in Hospital on Dec. 31st, 1932	37	53

BRETBY HALL ORTHPÆDIC HOSPITAL SCHOOL.

Bretby is an approved Special School under Part V. of the Education Act, 1921. The approval of the Board of Education dates from November 19th, 1928, when it was permitted to accommodate 40 children of school age for the purpose of giving active hospital treatment whilst their education received attention at the same time. There is a head teacher and 2 assistant teachers to attend to the educational side of the work of the special school where instruction is limited to children between the ages of 5 and 16 years. There are two sessions daily, the morning session beginning at 9.30 and ending at 11.30; the afternoon session being from 1.30 to 3.30 p.m. Registers of admissions and attendances are kept. The Timetables, as approved by the Board of Education, and details of the work, were set out fully in my Annual Report for 1930.

Number of children on Admission Register on January 1st, 1932	84
Number of children on Admission Register on December 31st, 1932	85
Number of children who have passed through the School during 1932	206
Average number of scholars on Admission Register during 1932	88.8
Number of times School was opened during the School year Jan. 1st, 1932—Dec. 31st, 1932	456

The head teacher reports as follows :---

It is gratifying to find in the list of successful candidates for Minor Scholarships the names of scholars who have spent some time in hospital at Bretby.

One old scholar this year won a Major Scholarship to Nottingham University.

Our thanks are due to the County Librarian, who gives such kind attention to our special demands. A Supplementary School Library has been started to provide for the younger patients.

SCHOOL CLINICS.

Full particulars of the School Clinics were given in my Annual Report for 1930. The following alterations were made during 1931:

(1) Minor Ailment Clinics.

An additional Minor Ailment Clinic was opened at Staveley Middlecroft School, on Wednesdays, at 2 p.m.

(2) Ear, Nose and Throat Clinic.

Chesterfield Clinic is used for operations on the first as well as the second, third, and fourth Tuesdays each month. At Chinley, the Clinic is opened on the second Wednesday in each month for operations instead of the first Tuesday, and Derby Clinic has been discontinued on the second Wednesday in the month.

(3) Dental Clinics.

The Dental Clinic at Bakewell Liberal Club has been discontinued. An extra Clinic at Matlock, held on the fourth Monday in each month, has taken its place.

(4) Orthopædic Clinics.

The Bakewell and Belper Clinics have been replaced by an Orthopædic Clinic at Matlock.

The following alterations were made during 1932 :--

(1) Minor Ailment Clinics.

An additional Minor Ailment Clinic has been opened at Derby from 9.30 a.m. to 12 noon on the first and third Saturdays in each month.

The Long Eaton Minor Ailment Clinic is now held on the second and fourth Saturday mornings only.

VACCINATION.

The following Table shews the vaccinal conditions of the children examined at medical inspection, of whom an enormous percentage are unvaccinated.

TABLE 0.

Disisten on L District	Number	N7 1	Unva	cinated.
Division and District.	Number Examined.	Number Vaccinated	Number	Percentage
NORTH-EAST DERBYSHIRE	2.			1
Chesterfield Rural	7,682	1,463	6,219	81.0
Blackwell Rural	3,020	664	2,356	78.0
Clowne Rural	1,245	348	897	72.0
Norton Rural	212	97	115	54.2
Dalasses Tishan	1,763	268	1,495	84.8
Description & III II and The	172	27	145	84.3
Class Cross Unhan	1,302	248	1,054	81.0
Dave Calif Unham	4.0.9	54	349	86.6
Alf the TT-1	1.000	276	1,624	85.5
IT-see The	1 9 1 9	311		
			1,002	76.3
Ripley Urban	. 1,176	136	1,040	88.4
, Total .	20,188	3,892	16,296	80.7
WEST DERBYSHIRE.				
Bakewell Rural	1,802	312	1,490	82.7
Dalamall Hahan	146	66	80	54.8
Baslow Urban	46	9	37	80.4
Descell II. The	188	17	171	91.0
36 41 1 72.1	761	66	695	91.3
March The Las The	447	54	393	87.9
C	100	9	93	. 91.2
A.L.L. Dural	710	242	468	65.9
	286	70	216	.75.5
	1,681	378	1,303	77.5
	1,240	432	808	65.2
Sudbury Rural	220	122	98	44.5
Total .	7,629	1,777	5,852	76.7
SOUTH-EAST DERBYSHIRE.				· ·
Basford Rural	114	20	94	82.5
Dalaras Danal	1,793	310	1,483	82.7
Dalara II.han	823	88	735	89.3
II. The II.	451	51	400	88.7
Winksmuch II.	909	28	265	90.4
Chandler Donal	906	539	1,767	76.6
Long Faton Urban	1 413	196	1,217	86.1
Almoston & Deuline Thiles	1,415	50	. 197	79.8
. Total .	7,440	1,282	6,158	82.8
NORTH-WEST DERBYSHIR	R.	DATE		
Hayfield Rural	303	64	239	78.9
Oleman David	009	36	167	82.3
Man Mill, The	512	158	354	69.1
Total .	1,018	258	760	74.7
SOUTH DERBYSHIRE.	The second	TOR PROPERTY		
	630	145	485	77-0
	1 000	145	1,127	87-6
Swadlineote Urban	1,286	109	1,101	0.0
Total	1,916	304	1,612	84.1
THE WHOLE COUNTY	38,191	7,513	30,678	80.3

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INFECTIOUS DISEASES.

The arrangements for the detection and prevention of infectious disease continued to work satisfactorily. The present system of notification by the Head teacher to the Medical Officer of Health of the district and to the Central Office serves three purposes :—

- 1. Early knowledge of an outbreak of infectious disease in a School enables the Assistant School Medical Officer to investigate the epidemic and take steps to control it.
- 2. Information is obtained by which it is possible to certify that low attendance at the school is due to the prevalence of infectious disease, thus exempting that period of low attendance from the calculation on which the grant by the Board of Education is based.
- 3. When the question of school closure arises, it is possible to decide whether the school is the source of infection or whether the cause of the outbreak is to be found elsewhere, and whether school closure is likely to accomplish any check in the progress of the epidemic.

In the absence of accurate and prompt notification of infectious disease from the schools these three purposes cannot be fulfilled.

During the year 135 investigations into outbreaks of infectious disease were carried out by Assistant School Medical Officers. The following table shows the number of children examined by them in this connection :--

Chicken Po	X		 191
Diphtheria			 1,670
Measles			 142
Mumps			 28
Scarlet Fev	er		 109
Whooping (Cough		 18
Sore Throa	ts		 25
Scabies	•••		 5
	Tota	1	 2,188

SCHOOL CLOSURE.

The number of schools closed by the School Medical Officer and by the Local Sanitary Authority on account of infectious disease is shown in Table P.

So many requests for school closure were received during the year that it is considered advisable to quote again the principles laid down jointly by the Ministry of Health and the Board of Education.

"It may be safely laid down as a general principle that if the power to exclude individual children be used to the best advantage, it is only in special and quite exceptional cases that it will be necessary to close a school in the interests of public health. School closure may generally be regarded as an indication either of failure to make proper use of the more discriminating and scientific method of excluding individual children, or of inadequate co-operation between the Public Health and the School Authorities. It interferes seriously and unjustifiably, with the education of the scholars, and it deprives the Medical Officer of Health and the School Medical Officer of information respecting attacks in their early stage or illness of a doubtful nature which would be obtainable if the schools were kept open."

Judged by this sound standard it is rarely found that an outbreak of infectious disease warrants the closure of a school.

			~~~										
•	Other Causes.	1	60	0	20	1	1	L	1	1	2	-	1
RE.	Mumps.	1	1	63	I	1	1	62	1	I	1	1	1
	Diph- theria.	9	1	1	1	1	I	1	1	1	1	10	2
CLOSURE.	Scarlet Fever.	4	2	5	2	1	2	1	2	33	2	1	1
REASON FOR	Chicken Pox.	1	1	1	1	1	1	1	I	1	I	1	1
REASO	Whoop- ing Cough.	4	2	9	5	9	~	2	1	1	1	4	4
	Measles.	61	22	21	ΓI	33		14	15	1	п	9	9
	In- fluenza.	39	II	2	3	II	1	100	I	7	5	2	9
No. Closed	Sanitary Author- ity.	0†	17	19	18	42	13	112	16	12	20	21	20
No. Closed by	School Med. Officer.	19	27	23	14	10	1	16	~	63	63	1	1
No. of Schools or De-	part- ments closed.	69	44	42	32	52	14	128	19	14	22	22	21
	Year.	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932

## TABLE P. SCHOOL CLOSURE.

#### **EXCLUSIONS FROM SCHOOL.**

The number of temporary exclusions of individual children during the year is given in the following Table :—

### TABLE Q.

## CHILDREN TEMPORARILY EXCLUDED FROM SCHOOL ON MEDICAL GROUNDS.

(Excluding Verminous conditions).

Tuberculcus Conditions		 77	Debility				68
Pre-Tuberculous Condit	ions	 4					
Skin Diseases.							
Eczema		 2					
Impetigo		 39	Nervous Diseases				
Ringworm		 21	Asthma				13
Scabies		 17	Chorea				31
Other Skin Diseases		 5					
Infectious Diseases.							
Cerebro-spinal Fever		 11	· · ·				
Contacte		 26					
Chicken Pox		 79	Blood and Heart	Dise	ases.		
Contacts		 61	Anæmia	2000			50
Diphtheria		 129	Heart Disease				1
Comions		 4					100
Contacta		 276					
Tuduquad		 7					
Magalan		 55					
Measles							
", Contacts		 3	out n'				
Mumps		 13	Other Diseases.				14
Scarlet Fever		 202	Adenitis	•••			9
", Contacts		 268	Bronchitis				65
Tonsilitis		 28	Catarrh				8
Typhoid Fever		 6	Epilepsy				9
" Contacts		 18	Gastritis				7
Whooping Cough		 6	Glands ·				6
", Contacts		 1	Otitis Media				9
Other Diseases		 9	Pyrexia				6
			Rickets				6
Eye Diseases.			Other condition	ns			51
Asthenopia		 1					
Blepharîtis		 2					
Cataract		 1					
Conjunctivitis		 4	Tonsil and Ade	noid	Operati	ons	801
Corneal Opacities		 î		202025	C. L. C. C.	10020	and the second
" Ulcers		 2					
Defective Vision		 5					
Keratitis		1					-
Magania		 i	Tota	1		9	566
		 41	1008	6 M (			
Squint		 AL				-	1000000

The number of children permanently excluded from school during the year is shown in Table R. No child is permanently excluded from school until full particulars of the case have been placed before the Education Committee.

#### TABLE R.

#### Eye Diseases. Congenital Blindness ... .... Progressive Myopia ... 1 Nervous and Mental Diseases Epilepsy 2 Mental Deficiency 5 Imbecility ... 2 Idiocy ... 2 Paralysis 3 Other Diseases Hæmophilia 1 ... Myositis Ossificans 1 **Pulmonary Tuberculosis** 2 .... Total 20 ... ...

#### PERMANENT EXCLUSIONS.

## OTHER WORK BY THE ASSISTANT SCHOOL MEDICAL OFFICERS.

**Special Visits to Schools.** It has been found necessary from time to time to ask the Assistant School Medical Officers to visit schools to make investigations quite apart from the usual routine medical inspections and investigations into infectious diseases. The following Table shows the reasons for which such special investigations were made and the number of children examined :—

Malnutrition			613
Mental Tests			29
Special defects			619
Camping party	examine	d	71
			1,332

**Other Visits and Inspections.** During the year the following inspections and visits were made by the Assistant School Medical Officers in addition to their work in the schools and clinics :—

Home visits to Defective Children		878
Blind Persons Examined		142
Mental Defectives Examined (M.D. Act)		47
Child Guidance Examinations		26
Examinations under Superannuation Schen	ne	29
Compensation Examinations		1
Miscellaneous		86
		1 209

## MEDICAL EXAMINATION OF PUPIL TEACHER CANDIDATES.

There were 193 intending pupil teachers examined during 1932, 79 boys and 114 girls, with the following results :---

accepted							
					2	1	3
					-	1	1
					79	114	193
	deferred for defects	deferred for the defects	deferred for the remedy defects	deferred for the remedy of va defects	deferred for the remedy of various	accepted           77           deferred for the remedy of various          2           defects           2           Rejected            2	defects $2$ 1Rejected $2$ 1

#### FOLLOWING UP.

The method of following up children found to be defective at routine medical inspection was fully described in my 1930 Annual Report. The change then inaugurated has developed into a very satisfactory system. Every defective child is followed up by a Health Visitor, and, if necessary, by an Assistant School Medical Officer. The number of home visits to School Children by Health Visitors amounted to 11,621 during the year.

The names of children not excluded from school for any reason yet absent for long periods are sent to the Attendance Officers, who are asked to arrange to have these children brought before the Assistant School Medical Officers for medical examination, following which the school nurse pays a special visit to the house of the child. If this is unavailing, or if for any other reason it is desirable, the Assistant School Medical Officer visits the home.

#### **OPEN-AIR SCHOOLS.**

**Day Open-Air Schools.** The type of school at present being built in Derbyshire, of which there are already 14 in existence, is constructed on open-air principles. A detailed report on the construction of these schools was included in my Report for 1929.

**Playground Classes, etc.** No comprehensive arrangements have been made for playground classes, school journeys, or open-air classes in Elementary Schools. Classes are, however, held outside in a good number of schools when the weather is suitable, but arrangements for these are in the hands of Head Teachers.

Further details on open-air recreation and camping are given by Mr. Hobson, the Organiser of Physical Training, in his report on pages 28-31.

#### **PROVISION OF MEALS.**

No meals were provided during 1932.

#### MALNUTRITION.

In the present economic circumstances, the state of nutrition of school children in the County has been receiving considerable attention. As long ago as November, 1930, I wrote to the Assistant School Medical Officers asking them to pay particular attention to the state of nourishment of the children in each school they visited, asking the teachers to prepare a list of all children suspected by them to be suffering from malnutrition. The Assistant School Medical Officers were to classify the children examined as either

- (1) Suffering from malnutrition,
- (2) Border line cases, or
- (3) Not suffering from malnutrition.

After mentioning various characteristics common to children suffering from malnutrition, I suggested that the well-known Quetelet factor—whilst admittedly not a precise index—might be used as some guide to the state of the nutrition of children of different ages. The survey was intended to be as extensive as possible within the short space of time available. A total of 24,107 children passed under survey. Amongst these, the teachers selected 617 for examination by the Assistant School Medical Officers ; 204, or 0.84%, of the total were found to be suffering from malnutrition, and 192, or 0.79%, were border line cases. These figures, as far as they are comparable, compare favourably with the findings of malnutrition during the course of routine medical inspection throughout England and Wales, where, during approximately the same period, 1.12% of children were found to be suffering from malnutrition.

Since that time a careful watch has been kept for the occurrence of malnutrition in school children.

In October, 1932, another review of the whole county was made in order to determine whether or not there had been any marked deterioration in the condition of school children since the review two years previously. The reports were re-assuring. Some of the medical officers reported an absence of malnutrition, due to poverty and underfeeding, in their areas, while one who noted its presence commented with surprise upon the fewness of the cases in view of the financial circumstances of the parents. Reports stated that there was poverty, but that the children were not being allowed to suffer ; that in some areas the parents had enough money to buy food but had difficulty in keeping their children adequately clothed and shod; that malnutrition appeared as a result of constitutional defects ; and elsewhere that it was due to bad or unsuitable diets rather than to sheer poverty itself. The amount of malnutrition due to underfeeding does not seem to have increased markedly in any particular district-in fact, the school children seem to be faring better than one would have anticipated in the present industrial depression. A careful watch will continue to be kept on the nutrition of school children, but at the moment no area is suffering to an extent such as to cause undue anxiety.

#### PHYSICAL TRAINING.

The report of Mr. Hobson, Organiser of Physical Training, for the year 1932 is as follows :—

The regular and systematic visits of inspection and help to each of the schools in the County over a period of years have provided a strong stimulus and produced highly satisfactory results in most of the schools. The opportunities for intensive help to those schools in which the work has not progressed so satisfactorily have, however, been somewhat limited.

During the year under review, therefore, effort has been concentrated upon bringing the physical training of all the schools up to the general standard as outlined in the sections" Physical Exercises " and " Organised Games " of the report for the year 1931.

Series of visits have been paid to the schools in need of additional stimulus and help. The special class demonstrations, talks to the teachers, individually and collectively, and advice on the preparation and carrying out of schemes of general activities, of playground games and of organised games played on the playing fields have produced very satisfactory results.

#### Organised Games.

The organisers have always encouraged the use of the period for organised games so that the greatest number of children may obtain the greatest good, and it is satisfactory to note that the tendency to use school-time for the coaching of the school team only, to the disadvantage of the average pupil, has almost disappeared.

The number of schools taking part in inter-school competitions in football, net-ball, cricket, stool-ball, rounders, athletics and swimming has increased considerably during the year. In areas not catered for by a local schools' sports association, friendly matches have been arranged with neighbouring schools.

In supporting and encouraging all these activities, the organisers are assisting in the provision of the fullest opportunities for play for each and every child in opposition to the practice of catering only for the select few.

Instances have been noted of all the senior scholars of two neighbouring schools being opposed in a variety of games simultaneously, and of school sports arranged so that every child competes for its team or house. Only when this practice has become general will the fullest value be derived from the games and athletic training given in the schools.

**Playing Fields.** The number of playing fields available shews an increase of one. The hire of two fields has been discontinued and three new fields have been secured.

**Dancing.** Miss Hyden reports that " interest in this branch of the work continues to be keen, but more elasticity might be shewn in the formation of the dances. Demonstration lessons have been given to emphasise the importance of the spirit of the dance."

In many of the mixed schools the boys have been encouraged to join in the dancing, and it has been pleasing to note the increased number of mixed teams which have taken part in the many folkdance competitions during the year.

Swimming. Owing to the economic position, the course of swimming lessons has been reduced from 17 to 15. The number of swimming baths used during the year has been 18, an increase of one.

For the first time since the commencement of organised instruction in swimming in Derbyshire, the number of children taught to swim in one season has exceeded the 2,000 mark, the actual figure being 2,212—an increase of 218 over the figure for last year. The numbers of certificates gained have also shown satisfactory increases, viz., 3rd Class, 126; 2nd Class, 105; and 1st Class, 51.

The following tables shew how the figures for the year 1932 compare with those of previous years :---

#### NUMBER OF SCHOOLS, PUPILS AND ATTENDANCES.

	N	o. of Schools	Ne	o. of Pup	ils.	No.	of Attenda	inces.
Year.	usi	ng the Baths.	Boys.	Girls.	Totals.	Boys.	Girls.	Totals.
1930		99	3,370	2,969	6,339	36,939	34,213	71,152
1931		114	3,522	3,060	6,582	41,544	36,626	78,170
1932		120	3,328	2,877	6,205	36,677	31,704	68,381

#### CHILDREN WHO LEARNT TO SWIM AND PARTICULARS OF CERTIFICATES GAINED.

	1930.				1931.			· 1932.		
	Boys.	Girls.	Totals.	Boys.	Girls.1	Cotals.	Boys.	Girls.	Cotals.	
No. of Learners .	 .1125	818	1,943	1,084	910	1,994	1,292	920	2,212	
3rd Class Certificat	. 766		1,336	731		1,372			1,498	
2nd	 . 365		685	369	284	653	433	325	758	
Lat	233	214	447	185	151	336	223	164	387	
Endorsements for										
	. 92	91	183	42	55	97	· 62	61	123	
R.L.S.S. Awards	 . 25	39	68	53	29	82	24	22	46	

Of the 6,205 children who received instruction, 4,415 were unable to swim at the beginning of the season. To teach 2,212 (50.1 per cent.) of these to swim within the short space of 15 lessons is a fine achievement upon which the teachers and the part-time instructors (13 men and 13 women) are to be heartily congratulated.

The percentages of non-swimmers who have been taught to swim during the past four years have been :---

 $1929 - 41 \cdot 2$ ,  $1930 - 39 \cdot 8$ ,  $1931 - 41 \cdot 8$ ,  $1932 - 50 \cdot 1$ .

The total cost of the instruction has been £1,104 7s. 3d., giving an average cost of 9s. 11.8d. for each child taught to swim. This is a reduction of 2s. 5d. in the average cost as compared with the previous year.

RESULTS REPORTED FROM THREE SECONDAR	Y SCHOOLS	5.
--------------------------------------	-----------	----

Boys	Atte	Total endances 2,310	No. of Pupils. 345	No. of Learners. 47	3rd. 44	Certificates. 2nd. 24	1st. 20	Endorse- ments. 14
Girls		-	_	-	11	4	5	6

**Camps.** The Derbyshire Education Committee have granted assistance to 507 needy children to enable them to attend school camps during the year. Assistance has also been given to 48 rural pupil teachers to enable them to attend a camp at Borth, near Aberystwyth.

#### Voluntary Organisations.

1. The Derbyshire Schools' Camping Association has continued to extend its very useful work. Supported by the Education Committees of Buxton, Chesterfield, Derbyshire, and Ilkeston, by the Rotary Clubs of Ilkeston, Long Eaton, and Matlock, and by many head and assistant teachers, the association has held composite and individual school camps which have provided a week's camping holiday for 784 boys and girls and 48 rural pupil teachers.

2. The English Folk Dance and Song Society (Derbyshire Branch) has helped considerably in raising the standard of folk dancing in the schools. Upwards of 30 courses of instruction have been held during the year, and as more than 80% of the members of these classes have been teachers it may be assumed that the instruction of the scholars has been improved.

New centres and classes have been formed at Ambergate and Crich with approximately 30 members in each.

The third Annual Children's Folk Dance Festival, held in the Ripley Council School in June, attracted 118 school teams, comprising over 800 dancers.

3. The Derbyshire Elementary Schools' Swimming Association has carried out its customary programme of activities with enthusiasm and success. In addition to the County Championship Gala, local swimming competitions have been held at Belper, Bolsover, Burton, Butterley, Clay Cross, Creswell, Darley Dale, Langley Mill, Marple, and Tibshelf. Members of the association conducted the majority of the tests for the certificates awarded by the Education Committee and examined a number of children for the awards of the Royal Life Saving Society.

4. The Derbyshire Schools' Sports Association has organised competitions in football, net-ball, and athletics during the year, and these have stimulated interest in these branches of sport. Fourteen local associations have taken part in the activities arranged by the county organisation. The representative football team has performed creditably against neighbouring county teams, and the small team of athletes which represented Derbyshire for the first time at the Inter-County Championships of the Schools' Athletic Association acquitted itself sufficiently well to merit a letter of congratulation from one of the national officials.

In addition to rendering very valuable social service through these voluntary organisations, the teachers have given considerable assistance to the Organiser of Physical Training, for which he is deeply grateful.

In concluding this report, the Organiser wishes again to record his thanks to the Education Committee and the Director of Education for their considerable assistance, and to Miss Hyden and the teachers for their loyal co-operation.

#### CAMP FOR DEBILITATED CHILDREN.

Through the kind offices of the Derbyshire Rural Community Council, an Open-air Camp was arranged by the British Red Cross Society in the grounds of Chatsworth Park by Mrs. Burke and members of the local Voluntary Aid Detachment. Twelve debilitated schoolgirls specially selected by the Assistant School Medical Officers on account of their poor physical condition were taken to the camp by car from various parts of the County on July 20th. One had to return home on July 23rd owing to indisposition, and her place was taken by another child on July 26th.

The children slept under canvas on camp beds, and were cared for by members of the Voluntary Aid Detachment, and kept under medical supervision by Dr. Edlestone. A proper water supply and sanitary conveniences were arranged, and a kitchen constructed at one end of the field in a shed equipped with a kitchen range. All children were provided with overalls and straw hats by day and sets of pyjamas by night. Bathing accommodation was provided at the institute. At the end of the period, each child was taken home again by car.

The improvement in the physical condition of those who attended the camp was striking, arriving as a group of pale and listless children; they left strong, sunburnt and healthy. They had spent their days going for walks in the country and being entertained in the grounds of houses in the district.

A register showing the medical particulars of each child was carefully kept, and showed that with the exception of the child sent home on July 23rd none of the children suffered from anything more serious than minor ailments.

No part of the expense of equipping or maintaining the camp and clothing and feeding the children fell on the County funds, nor was any charge made to the parents of the children. The kindness and generosity of those responsible for the camp was much appreciated by the Committee and by the parents of the children concerned. The camp was visited from time to time by myself and periodically by my Deputy, who remarked upon the steady improvement in the condition of the children.

I hope it may be possible to have a similar or larger camp again this year.

#### **CO-OPERATION OF PARENTS.**

All parents are invited to be present at Medical Inspections and during the year 14,162 or 34% of parents invited, attended. The attendance of parents at Medical Inspection is encouraged not only on account of the valuable aid which it gives to the School Medical Officer by information received from the parent regarding the child, but because he can give advice as to treatment, etc. direct to the parent, explain his reasons for giving such advice and dispel any doubts which the parent may have. Nothing but good can result from the meetings of School Medical Inspectors and parents, and such meetings have done much to add to the popularity of the service by giving it the necessary personal touch.

#### **CO-OPERATION OF TEACHERS.**

The co-operation of the teaching staffs of schools is very much appreciated by myself and the Assistant School Medical Officers. They help us very considerably in preparing for medical inspections, bringing forward special cases and following up cases recommended for treatment.

#### **CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.**

The closest co-operation continues to exist between School Attendance Officers and the School Medical Department, considerable help being given by the former in bringing cases of prolonged absenteeism due to ill health to the notice of the School Medical Officer. I would again like to thank Mr. Barnes, the chief School Attendance Officer, for the valuable help he has given me and my staff on so many occasions.

#### **CO-OPERATION OF VOLUNTARY BODIES.**

We continue to receive very valuable aid from The National Society for the Prevention of Cruelty to Children in bringing forward cases for medical inspection and in seeing that treatment is carried out where the home circumstances are unsatisfactory. The following cases were referred to this Society during the year :--

reported neglected		neglected medical	 5	
treatment			1	

#### BLIND, DEAF, DEFECTIVE & EPILEPTIC CHILDREN.

As I have pointed out in previous reports, the lack of institutional accommodation for Mental Defectives and Epileptics in the County is acute. Of 329 feeble-minded children, only 24 are in Certified Schools or other Institutions, and of 113 Epileptic Children, only 3 are in Certified Institutions.

Of 15 totally blind children, 3 are neither at school nor in an institution. Usually this is on account of the parents refusing to allow the children to leave home, at the same time undertaking to see that their education is attended to at home. In some cases, however, there are other defects apart from blindness, and as is usual in the case of combined defects, there is great difficulty in finding suitable accommodation.

With regard to the 25 deaf and dumb children, all were attending a school or institution.

#### SECONDARY SCHOOLS.

Inspection of Secondary School children was carried out as in previous years. The number of children inspected is shewn in Table IA, while the results of the Medical Inspection are set out in Table IIA, at the end of this report. The chief defects found are again defective vision, defective teeth, and enlargement of the tonsils.

The inspection was carried out as shewn in my Annual Report for 1931, with the exception that Staveley, Netherthorpe Grammar School was added to the schools which are submitted to a full medical inspection annually.

#### **EMPLOYMENT OF CHILDREN & YOUNG PERSONS.**

The following Table gives particulars of the medical inspections under the Employment of Children Bye-laws.

Applications.	No. Disallowed.	No. Allowed.	Delivery of Newspapers	Delivery of Milk.	Errand Boy.	Agricultural Work.
123	1	122	107	8	6	1

#### SURGICAL APPLIANCE FUND.

An annual collection is made each year in December at the various schools in the County, and the proceeds distributed amongst the various voluntary hospitals in or near the County or paid into the Fund for the provision of surgical appliances and spectacles for necessitous cases. For the year 1931-32, £482 18s. 7d. was collected, as compared with £529 9s. 10d. for 1930-31, and distributed as follows :—

			£	8.	d.
Surgical Appliance Fund		 	208	8	2
Derbyshire Royal Infirmary		 	75	16	7.
CI CIID IT SI		 	31	5	10
Derbyshire Children's Hospital		 	36	19	10
Burton-on-Trent Infirmary		 	22	6	3
Mansfield and District Hospital		 	22	0	6
Miscellaneous (less than $\pm 10$ eac	h)	 	86	1	5
			£482	18	. 7

Cost of glasses	and the second se	 	 223		9 4
			£378	7	1

Nature of Surgical Appliances supplied during the year :----Calipers, iron and aluminium, Double Irons, Knock-knee Irons, Straight Frames and Saddles, Cock-up Splints, Block Leather Spicas, Back Supports, Leather and Celluloid Jackets, Boots raised with cork and Boots tubed and heeled, Abduction Frames, Walking Thomas Splint, Invalid Chair, and repairs to Artificial Limbs.

#### BACTERIOLOGICAL EXAMINATIONS.

During the year ending December 31st, 1932, 2,197 specimens from school children were examined in the County Bacteriological Laboratory. Details of these are as follows :—

			Positive.	Negative.
Swabs for Diphth	eria	 	19	1,759
Hairs for Ringwo			· 80	74
Urine for Albumi			7	45
Urine for Sugar				53
Tonsils and Ade		opical		
examination)	the second s		35	. 9
Tonsils and Ad				
amination)			86	2
Tonsils and Ade				
Bacilli)		 	-	6
Eye Cultures		 	3	
Eye Smear			. 1	
Miscellaneous		 	12	6
	Totals	 	243	1,954

# SCHOOL NURSING SERVICE.

Below is a summary of the work done by the School Nurses during the year :--

Medical Inspections (Elementary School Medical Inspections (Secondary Schools)	35,254 2,214	
areactin inspections (secondary serious)	 2,214	37,468
Verminous Inspections	 	163,340
Other Inspections	 	20,704
Visits to Homes following up cases	 	11,621
Visits to Mentally Deficient Persons	 	1,969
Visits to Blind Persons	 	55
		235,157

#### CHILD GUIDANCE.

The following is an extract from Dr. Bryan's report on this branch of the work :---

#### CASES SEEN DURING THE YEAR 1932.

At Matlock Clinic	 New Cases. 44	Old Cases. 7	Attendances. 99
At Chinley Clinic	 6		11
Elsewhere	 16	10	
	-		
	66	17	110
		and the second s	and the second se

#### Home-visits-44.

#### NEW CASES DEALT WITH.

Disorders of S Digestive Diso						
Neurotic Cond		er uour .		 	 	
Fits (Epileptic		therwis	e)	 	 	
Chorea and A				 	 	
Speech Defect				 	 	
Mal-adjustmer	1t			 	 	
Undesirable H				 	 	
Overstrain				 	 	
Mental Deficie	ency			 	 	
Delinquency-						
Stealing				 	 	
Truancy				 	 	
Attempte		le		 	 	
General M				 	 	

#### OLD CASES.

Digestive Disor	ders	 	 	 	2
Neurotic Condi	tions	 	 	 	1
Speech Defects		 	 	 	1
Mal-adjustment		 	 	 	3
Mental Deficier	ney	 	 	 	2
Undesirable Ha	bits	 	 	 	1
Delinquency-					
Stealing		 	 	 	6
Truancy		 	 	 	1

#### RESULTS OF TREATMENT.

New Cases—				
Apparently Cured	 		 	11
Greatly Improved	 		 	8
Progress Satisfactory	 		 	11
Appropriate Action Taken	 		 	9
Still under Treatment	 	111	 	14
No Recent Information	 		 	8
Co-operation not Established	 		 	5
Old Cases—				
Progress Satisfactory	 		 	12
Progress not Satisfactory	 		 	2
Still under Treatment	 		 	2
Treatment Discontinued	 		 	1

The work of Child Guidance has shown a steady increase during the past year, 83 cases having been dealt with as compared with 58 in 1931.

Distance has remained the great difficulty in maintaining adequate contact with each case. The majority of cases have been seen at the Matlock clinic, but almost half of them have had to be visited in their own localities, either because they themselves were unable to make the journey or because a study of local conditions has been necessary to complete the investigation.

It is not easy to complete statistics with regard to Child Guidance, but, judged symptomatically, the results of the year's work may be considered satisfactory.

Of the 66 new cases, 30 are either apparently cured or have shown satisfactory improvement. In nine cases appropriate action has been taken, such as admission to an Institution; 14 cases are still under treatment; and in eight cases I have no recent information; co-operation was not established in five cases. Of the 17 old cases, 12 are making satisfactory progress. A wide variety of conditions have again been investigated, some comparatively trivial and soon dealt with, others very complicated and occupying many hours. In some cases diagnosis is easier than treatment, the latter depending to such a large extent on the degree of co-operation one is able to establish with the parents. As I have no Mental Social Worker to follow up the cases, I do not attempt to deal with cases at a distance in which I cannot establish satisfactory co-operation with the parents. In several instances I have received very valuable help from school teachers. The work of Child Guidance often consists in explaining the apparently abnormal behaviour of a child to those in charge of it.

The following cases will serve to illustrate this :—A little girl of six was brought to my notice for bullying other children and violent conduct generally. There was a movement on foot to exclude her from the village school. On investigation it transpired that there was a feud between the child's mother and some neighbours; they were ill-using and abusing the child who was passing it on to their children—an understandable, though not a desirable state of affairs.

A child of eleven was in the hands of the police for housebreaking, but investigation shewed that the stolen things had been taken from an empty house, that the child thought that they had been discarded, and that some of them had actually been promised to her by the previous owner. It may be argued that it ought not to require a psychologist to elucidate a case like this, but the fact remains that it did. It suggests that it would be safer for all young delinquents to pass to the Children's Court via the Child Guidance Clinic.

A little adopted girl of eight was accused of immorality by her foster-mother because she was continually slipping out to sit with a night watchman in his box on the road; the child was also said to be quite unmanageable, and the foster-mother wanted her sent to a Home. With regard to the first charge, the child had heard the talk of sending her away, and, feeling she was not wanted, seized every opportunity of slipping out to someone who, by reason of his loneliness, was always glad to have a visitor. There was not the slightest evidence of anything improper. Why then was the charge made? The house was over-crowded, the child often tiresome, the foster-mother in poor health, and, though apparently fond of the child, unconsciously desired to be rid of her ; to that end she had to find an excuse that would satisfy not only the neighbours, but also her own conscience-immorality exactly fitted the picture. It was pointed out to her that, even if the child were sent to a Home, she would have to contribute to her maintenance, and also that, as she was the only one who found the child unmanageable-the school teachers found her exemplary-it was much more likely that the fault lay in the management of the child than in the child herself. She eventually accepted this point of view, and there is now a considerable improvement in the situation.

I recently saw it stated by a School Oculist that a number of cases which are referred to the Ophthalmic Clinic are really cases for the Child Guidance Clinic—a statement with which I entirely agree. One not infrequently comes across children at school medical inspection whose vision is as poor as 6/60 with both eyes, but who are found by the oculist to have no error of refraction and no abnormal ocular condition. In my opinion most of these cases are due to overstrain or some mental stress which calls for psychological investigation.

A case of this kind was recently referred to me by Dr. Carr. The child was 12 years old, and her vision (6/60 in each eye) was seriously interfering with her school work. Neither she nor her people could believe it when told by Dr. Carr that she did not require glasses. On investigation, I found that the vision had begun to fail shortly after her mother had run away with a man, and she and her little brothers and sisters were living with a woman who brutally ill-treated them. The girl told me that she often had to stand by and see her little brothers—of whom she was very fond—cruelly beaten. I treated her by suggestion, reinforced by a pair of almost plain glasses, and the girl now has perfect vision.

All schools of psychology are agreed that it is in the first few years that the mental pattern is laid down which shapes a life's whole course, and it is during this time that the seeds of neurosis, psychosis and delinquency are sown. Thus, if we are to do any real preventive work in mental health, as in physical health, we have to start in pre-school days, and educate the mother to seek advice for apparently trivial behaviour disorders in her child as readily as she now seeks it for digestive or respiratory disorders.

# SECTION II.

#### TABLES OF THE BOARD OF EDUCATION.

#### TABLE 1.

#### **RETURN OF MEDICAL INSPECTIONS.**

A.-ROUTINE MEDICAL INSPECTIONS.

Number	of Code	e Gro	oup In	spectio	ns	
Entran	ts					 8,083
Interm	ediates					 8,153
Leavers				2	 8,358	
			т	otal		 24 594

#### B.-OTHER INSPECTIONS.

	Special Inspections Re-Inspections	  	$5,124 \\ 11,993$
	Total	 	17,117

# TABLE 1a (SECONDARY SCHOOLS).

A.-ROUTINE INSPECTIONS.

Boys Girls	   	 	 	 	  $2,108 \\ 2,097$
		:	Fotal		 4,205
	B.—S	PECIAI	INSPE	CTIONS	
Boys	 				 22
Girls	 				 3
			Total		 25
	C	-RE-I	NSPECT	IONS.	
Boys	 				 96
Girls	 				 114
		-	Total		 210

	-	Inspec		Spe	cials.
DEFECT OR DISEASE.		Requiring treatment	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
Malnutrition		99	225	14	. 167
Uncleanliness		299	25	20	-
Skin Skin Skin Scabies Impetigo Other Diseases(non-tuberculo	  	$37 \\ 24 \\ 29 \\ 135 \\ 189$	$\begin{array}{c}1\\4\\2\\13\\70\end{array}$	$\begin{array}{c}11\\2\\9\\42\\63\end{array}$	
Blepharitis* Conjunctivitis Keratitis Corneal Opacities & C'neal Ulo Defective Vision (excl'd'g Squi Squint Other Conditions	 cers int)	$87 \\ 43 \\ \\ 111 \\ 1350 \\ 188 \\ 50$	38 20 2 8 723 77 33	$32 \\ 18 \\ 4 \\ 8 \\ 428 \\ 49 \\ 33$	$     \begin{array}{r}       7 \\       4 \\       -4 \\       222 \\       20 \\       9     \end{array} $
Ear Offective Hearing Otitis Media Other Ear Diseases		$106 \\ 158 \\ 34$	65 49 90	$39 \\ 52 \\ 15$	20 7 9
Nose and Second Entarged Tonsils only Throat Enlarged Tonsils and Adend Other Conditions		$129 \\ 28 \\ 241 \\ 120$	$1387 \\ 109 \\ 1133 \\ 174$	$50 \\ 11 \\ 129 \\ 42$	$520 \\ 51 \\ 272 \\ 38$
Enlarged Cervical Glands (Non-Tuberculous)		93	672	35	51
Defective Speech		41	59	. 2	14
Teeth Dental Diseases		2715	252	336	5
Heart and Circulation Heart Disease- Organic Functional Anæmia		9 27 68	$127 \\ 219 \\ 73$	7 3 19	$\begin{array}{c} 61\\ 32\\ 45\end{array}$
Lungs Bronchitis Other Non-Tuberculous Dises		145 17	$\begin{array}{c} 247 \\ 46 \end{array}$	33 8	29 20
Pulmonary— Definite Suspected Non-Pulmonary—		2 8	4 19	2 4	14 12
Tubercu- losis       Glands          Ibsis       Spine          Hip           Other Bones and Joints       Skin          Other Forms		$     \begin{array}{r}       13 \\       2 \\       1 \\       2 \\       5     \end{array} $		$     \frac{10}{-1}     \frac{-}{-3} $	
Nervous System Epilepsy Chorea Other Conditions		14 9 24	$\begin{array}{r} 23\\22\\118\end{array}$	7 3 11	$\begin{array}{c} 16\\11\\47\end{array}$
Deformities Rickets Spinal Curvature Other Forms		$     \begin{array}{r}       19 \\       28 \\       75     \end{array} $	$\begin{array}{r}125\\66\\117\end{array}$	2 6 41	9 15 39
(Other Forms					

# TABLE II.

# B.—Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).

			Number of	of Children.	Percentage of Children
GROUP. (1)		Inspected. (2)	Found to require Treatment. (3)	found to require Treatment. (4)	
CODR GROUPS : Entrants		 	8083	944	11.68
Intermediates		 	8153	1257	15.03
Leavers		 	8358	1125 '	13.46
Total (Code Group	s)	 	24594	3326	13.52

#### TABLE II. A (continued).

### SECONDARY SCHOOLS.

### Return of Defects found in the course of Medical Inspection during 1932.

Enrolment-Boys 2073, Girls 2263, Total 4336.

DEFECT OR DISEASE.		nber ed for ment.	Number requiring to be kept under observation, but not referred for treatment.		
	Boys.	Girls.	Boys.	Girls.	
Malnutrition	1	-	16.	-	
Uncleanliness	-	11	-	7	
Skin Ringworm— Scalp Body Scabies Impetigo OtherDiseases(Non-Tuberculous)	  4 13	$\frac{-}{1}$ $\frac{1}{12}$	   9	 1	
Eye Blepharitis Conjunctivitis Keratitis Corneal Opacities DefectiveVision, excluding Squint Squint Other Conditions			$2 \\ 2 \\ -1 \\ 166 \\ 5 \\ 43$		
Ear Defective Hearing Otitis Media Other Ear Diseases	1 9 3	$\begin{array}{c}2\\6\\.4\end{array}$	4 4 5	2 2 2 2	
Nose and Throat (Enlarged Tonsils only Adenoids only Enlarged Tonsils & Adenoids Other Conditions	$     \frac{1}{2}     12 $	$\begin{array}{r}2\\1\\12\\10\end{array}$	$     \begin{array}{r}       101 \\       3 \\       15 \\       5     \end{array} $	28 2 25 7	
Enlarged Cervical Glands (Non-Tuberculous)	• 1	1	29	16	
Defective Speech	-	3	4	2	
Teeth Dental Diseases	95	244	15	4	
Heart and Circulation Heart Disease : Organic Functional Anæmia	3 1 2		8 38 6	13 25 7	
Lungs {Bronchitis Other non-tuberculous Disease	2 .	2 1	12 3	3 2	

# TABLE II A-continued.

#### SECONDARY SCHOOLS-continued.

# Return of Defects found in the course of Medical Inspection.

Defect of Disease.			referre	nber ed for ment.	Number requiring to be kept under observation, but not referred for treatment		
				Boys.	Girls.	Boys.	Girls.
Tubercu- losis.	Suspected Non-Pulmonary- Glands Spine Hip Other Bones	·· ···	····	1	2 		
Nervous System.	Oberen	·· ··· ·· ··· 8 ···		1	 1 1		$\begin{array}{c} 2\\ 1\\ 3\end{array}$
Deformities	Spinal Curvatur			2 $8$ $13$	$\begin{array}{r}2\\17\\39\end{array}$	$\begin{array}{r} 4\\16\\32\end{array}$	1 $8$ $62$
Other Defe	ts and Diseases .			15	. 13	34	32

#### 44 TABLE III.

#### Total. Girls. Boys Children suffering from the following types of Multiple Defect, *i.e.*, any com- bination of Total Blindness, Total Deafness, Mental Defect, Epilepsy, Active Tuberculosis, Crippling, or Heart Disease ... 29 11 40 At Certified Schools for the Blind .. Blind (including partially blind)-10 5 5 At Public Elementary Schools 2 2 At other Institutions ... (i.) Suitable for training in a School for the totally blind. At no School or Institution ... 1 2 3 At Certified Schools for the Blind or (ii.) Suitable for training in a Partially Blind 2 3 5 School for the partially blind. At Public Elementary Schools 24 17 41 At other Institutions ... ... 7 8 15 At no School or Institution ... Deaf (including deaf and dumb and partially Deaf)— At Certified Schools for the Deaf 11 13 24 .... At Public Elementary Schools 1 1 ... (i.) Suitable for training in a School At other Institutions ... ... for the totally deaf or deaf At no School or Institution ... ... and dumb. At Certified Schools for the Deaf or (ii.) Suitable for training in a School Partially Deaf 7 11 At Public Elementary Schools for the partially deaf. 9 20 11 ... At other Institutions ... ... At no School or Institution ... 2 2 Mentally Defective-At Certified Schools for Mentally Defective Children 12 24 12 Feebleminded (cases not notifiable At Public Elementary Schools 127 95 222 to the Local Control At other Institutions ... ... 9 2 4 At no School or Institution ... Authority). 79 49 30 Notified to the Local Mental Defi-Feebleminded ... See figures in ... ... ciency Authority during the Imbeciles following Table .... .... .... ... year. Idiots .... IIIA. .... ... Epileptics-At Certified Schools for Epileptics ... 2 1 3 At Certified Residential Open-air Schools .... At Certified Day Open-air Schools ... Suffering from severe epilepsy. At Public Elementary Schools 4 8 4 At other Institutions .... At no School or Institution 10 10 20 ... At Public Elementary Schools Suffering from epilepsy which is not 69 37 32 At no School or Institution ... severe. 6 13 7 Physically Defective-At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ... . 6 6 12 At Certified Residential Open-air Active pulmonary tuberculosis (including pleura and intra-Schools At Certified Day Open-air Schools ... thoracic glands). At Public Elementary Schools 2 3 5 ... At other Institutions ... ... At no School or Institution .... 7 8 15 At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ... . 2 2 At Certified Residential Open-air Quiescent or arrested pulmonary tuberculosis (including pleura Schools At Certified Day Open-air Schools ... and intrathoracic glands). At Public Elementary Schools 48 38 86 At other Institutions ... 2 2 At no School or Institution ... 11 8 19

#### Return of all Exceptional Children in the Area, December 31st, 1932.

|--|

		Boys.	Girls.	Total.
Physically Defective— Tuberculosis of the peripheral glands	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open-air Schools At Certified Day Open-air Schools At Public Elementary Schools At other Institutions At no School or Institution	3 		3  97 1 16
Abdominal tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open-air Schools At Certified Day Open-Air Schools At Public Elementary Schools At other Institutions At no School or Institution			  26 2 7
Tuberculosis of bones and joints (not including deformities due to old tuberculosis).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board At Public Elementary Schools At other Institutions At no School or Institution	23 32 2 13		43 52 2 21
Tuberculosis of other organs (skin, etc.).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board At Public Elementary Schools At other Institutions At no School or Institution		1 3 	1 5 -4
Delicate Children, i.e., all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open-air School.	At Certified Residential Cripple Schools At Certified Day Cripple Schools At Certified Residential Open-air Schools At Certified Day Open-air Schools At Certified Day Open-air Schools At Public Elementary Schools At other Institutions At no School or Institution		- 2 - 50 1 26	
Crippled Children (other than those with active tuberculosis disease) who are suffering from a degree of crippling sufficiently severe to inter- fere materially with a child's normal mode of life.	At Certified Hospital Schools At Certified Residential Cripple Schools At Certified Day Cripple Schools At Certified Residential Open-air Schools At Certified Day Open-air Schools At Certified Day Open-air Schools At Public Elementary Schools At other Institutions At no School or Institution	17 2 	11   154 39	28 2  339(0) 3(0) 81(1)
Children with heart disease, i.e., children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public elementary school.	At Certified Hospital Schools At Certified Residential Cripple Schools At Certified Day Cripple Schools At Certified Residential Open-air Schools At Certified Day Open-air Schools At Certified Day Open-air Schools At Public Elementary Schools At other Institutions At no School or Institution		$-$ 1 $\frac{1}{35}$ $\frac{1}{15}$	

	Во	xs.	GIRI	.s.	TOTAL.		
	At Elemen- tary School.	Not at School.	At Elemen- tary School.	Not at School.	At Elemen- tary School.	Not at School.	
Epileptic and Cripple Feeble-minded and	-	-	-	1	-	1	
Cripple	9	4	3	2	12	6	
Feeble-minded, Cripple and Epileptic	-	2	-	-	-	2	
Feeble-minded and Totally Deaf	1†	-	-	in	1†	-	
Cripple and Tuberculosis Blind and Cripple	2	-	_	_	2	-1	
Cripple & Heart Disease Epileptic and	1	-	-	-	1	-	
Feeble-minded	5	3	1	3	6	6	
Feeble-minded and Blind	-	-	-	1	-	1	
Feeble-minded and Tuberculosis	-	1	-	-	-	I	
Total	18	11	4	7	22	18	
	2	29	ĩ	1	40		
	-	4	i0	-			

1

# *Children Suffering from Multiple Defects.

†In Deaf and Dumb School.

#### TABLE III. A

## Statement of the Number of Children notified during the year ended December 31st, 1932, by the Local Education Authority to the Local Mental Deficiency Authority.

#### Total number of Children notified, 26

#### ANALYSIS OF THE ABOVE TOTAL.

	DIAGNOSIS,	Boys.	GIRLS.
1.	<ul> <li>(i.) Children incapable of receiving benefit or further benefit from instruction in a Special School— <ul> <li>(a) Idiots</li> <li>(b) Imbeciles</li> <li>(c) Others</li> </ul> </li> </ul>	3 13 —	23
	<ul> <li>(ii.) Children unable to be instructed in a Special School without detriment to the interests of other children <ul> <li>(a) Moral Defectives</li> <li>(b) Others</li> <li>(c) (c) (c) (c) (c) (c) (c) (c) (c) (c)</li></ul></li></ul>	1	=
2,	Feeble-minded children notified on leaving a Special School on or before attaining the age of 16	1	1
3.	Feeble-minded children notified under Article 3 of the 1928 Regulations, i.e., "special circumstances" cases	1	-
4.	Children who in addition to being mentally defective were blind or deaf	1	-
	Grand Total	20	6

# TABLE IV.

# Return of Defects treated during the year 1932. Treatment.

# Group I.—Minor Ailments (excluding Uncleanliness, for which see Group V.).

Disease of Dr					Defects trea eatment durin year.	
Disease or De	Under the Authority's Scheme.	Otherwise.	Total.			
Skin :						
Ringworm Scalp				52	6	58
Ringworm Body				28	2	30
Scabies				30	15	45
Impetigo				682	11	693
Other Skin Disease				127	10	137
Minor Eye Defects				371	42	413
(External and other, bu falling in Group II.)		ading c	ases			
Minor Ear Defects				349	86	435
Miscellaneous				1786	399	2185
(e.g., minor injuries, br blains, etc.)	uises,	sores, c	hil-			
Total				3425	571	3996

	Number of Defects dealt with.						
Defect or Disease.	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at hospital apart from the Authority's Scheme.	Otherwise	Total.			
Errors of Refraction (including Squint) Other Defect or Disease of the	1968	176	-	2144			
Eyes (excluding those re- corded in Group I.)	150	22	-	172			
Total	2118	198	-	2316			

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

Total number of children for whom spectacles were prescribed

(a)	Under the	Authority's	Sche	me	 	 1206
(b)	Otherwise				 	 176

Total number of children who obtained or received spectacles

(a) Under the	Authority'	s Sch	eme	 	 948
(b) Otherwise				 	 242

### Group III.-Treatment of Defects of Nose and Throat.

				Number of De	efects.			
Received Operative Treatment.					1 1 1 1 1			
Under the Authority's Scheme, in Clinic or Hospital.		By Private Practitioner		Received	Total			
Tonsils only.	Adenoids only.	Tonsils & Adenoids	Other Defects.	or Hospital, apart from the Authority's Scheme.	Total.	forms of treatment.	treated.	
14	4	813	10	346	1187	70	1257	

841

(1) Number of Children who were :--

(a) Inspected by the Dentist:

	Aged :				
Routine Age Groups	$ \left(\begin{array}{c} 5\\ 6\\ 7\\ 8\\ 9\\ 10\\ 11\\ 12\\ 13\\ 14\\ \end{array}\right) $	$\begin{array}{c} 5039\\ 5334\\ 5744\\ 5629\\ 5980\\ 6111\\ 6413\\ 5901\\ 4361\\ 652\end{array}$			Total 51164
Specials					3002
Grand Tot	al				54166
(b) Found to require treatm	ent				45291
(c) Actually treated					15054
(2) Half-days devoted to-					
Inspection Treatment	352 3392	T	otal	3744	
(3) Attendances made by children fo	r treatm	nent			26104
(4) Fillings— Permanent Teeth Temporary Teeth	30200 2027	Т	otal 3	2227	
(5) Extractions Permanent Teeth Temporary Teeth	5624 25549	Т	otal 3	1173	
(6) Administrations of General anæsthetics for extractions :	2648				
(7) Other Operations Permanent Teeth Temporary Teeth	$2024 \\ 12150$				
		Te	otal 1	4174	

# Group V.-Uncleanliness and Verminous Conditions.

Average number of visits per school made durin Nurses	g the	year by	the S	chool	4.7
Total number of examinations of children in the	Scho	ols by S	chool	Nurses	163340
Number of individual children found unclean					2001
Number of children cleansed under arrangeme Education Authority	nts n 	ade by	the 1	Local	1
Number of cases in which legal proceedings were	take	n :—			
(a) Under the Education Act, 1921					Nil
(b) Under School Attendance Byelaws					Nil

