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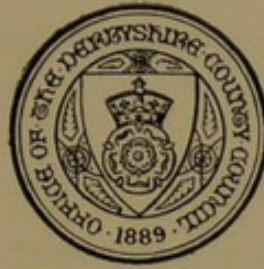
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Derbyshire County Council.

ANNUAL REPORT

OF THE
COUNTY MEDICAL OFFICER OF HEALTH

For the Year 1935,

BY

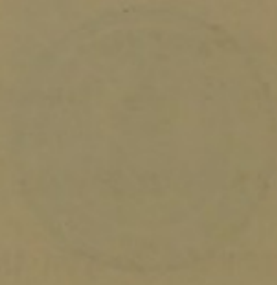
W. M. ASH,

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, LTD., PRINTERS, FRIAR GATE,



Herbert J. ...

ANNUAL REPORT

OF THE

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*To the Chairman and Members of the
Derbyshire County Council.*

MY LORD DUKE, LADIES AND GENTLEMEN,

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

This Report would in ordinary circumstances have been a 'Survey' Report but the Ministry of Health did not require a 'Survey' Report this year. I have, however, under certain of the headings, written the Report in somewhat of a 'Survey' style for the purposes of comparison and reference with other five-year groups.

Perhaps I should draw your attention to the state of vaccination in this county. You will see that 73·8 per cent. of the children born in the Administrative County are the subject of statutory declarations of conscientious objection to vaccination—yet we still speak of compulsory vaccination. We must revise our understanding of the word 'compulsory,' or, more rationally, dispense with the word in this connection : so used it is misused and merely acts as an irritant.

I am,

Your obedient Servant,

W. M. ASH,

County Medical Officer of Health.

*New County Offices,
St. Mary's Gate,
Derby.*

September, 1936.

THE HISTORY OF THE

REPUBLIC OF THE UNITED STATES

The history of the Republic of the United States is a story of the growth of a great nation from a small colony of English settlers. The first settlers came to the New World in search of a better life, and they found it in the freedom and opportunity of the American continent. They built a nation that was founded on the principles of liberty and justice for all, and they have made it a great power in the world.

The history of the United States is a story of the struggle for freedom and the pursuit of the American dream. It is a story of the brave men and women who have fought for the rights of the oppressed and the freedom of the individual. It is a story of the great achievements of the American people, and it is a story of the challenges that they have faced and overcome.

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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., D.P.H.

ASSISTANT COUNTY MEDICAL OFFICER:

W. J. Pierce, M.B., Ch.B., D.P.H.

TUBERCULOSIS OFFICERS:

C. Kingston, M.R.C.S., L.R.C.P., D.P.H.

P. Heffernan, B.A., M.D., B.Ch., B.A.O. (*resigned 16/7/35*).

W. H. Morton, M.B., Ch.B., M.R.C.P.(Edin.), D.P.H. (*commenced 11/1/36*).

BACTERIOLOGIST:

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

VENEREAL DISEASES OFFICER:

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

CONSULTING SURGEON, WALTON SANATORIUM:

F. J. Milward, M.A., F.R.C.S.

MEDICAL SUPERINTENDENT, WALTON SANATORIUM:

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

ASSISTANT RESIDENT MEDICAL OFFICERS AT WALTON SANATORIUM:

A. R. Williams, M.B., Ch.B. (*commenced 1/5/35*).

F. R. Glover, M.R.C.S., L.R.C.P. (*commenced 21/1/35*).
(*resigned 12/10/35*).

D. C. Waddy, M.B., Ch.B. (*commenced 14/10/35*).

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 OFFICERS:

Bessie Goodson, M.D., M.B., Ch.B.

Constance M. Hoare, M.B., B.S., M.R.C.S. (*resigned 22/4/35*).

Eleanor M. Carless, M.B., D.P.H. (*commenced 20/5/35*).

CONSULTING OBSTETRICIANS:

N. L. Edwards, F.R.C.S., Derby.

H. T. Hicks, F.R.C.S., Derby.

J. Eric Stacey, 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., B.Ch.,

Wilhelmina W. Hendry, M.B., Ch.B., D.P.H.,

Ethel W. Morris, M.R.C.S., L.R.C.P., D.P.H.,

H. N. Popham, M.B., B.S.

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

K. N. Flint, M.B., Ch.B.

Also seven part-time School Medical Officers.

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

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

COUNTY ANALYST:

R. W. Sutton, B.Sc., F.I.C.

Public Health Staff—continued.

SENIOR DENTAL OFFICER (School Medical & M.C.W.)

H. P. Sutcliffe, L.D.S.

DENTAL OFFICERS:

S. T. J. Abell, L.D.S. (*commenced* 2/9/35).

J. L. Thomas, L.D.S. (*resigned* 26/8/35).

C. L. Noble, L.D.S.,

Elizabeth E. Grant, L.D.S.,

Doris M. Thomson, L.D.S.,

Cicely Jefferson, L.D.S.,

Flora M. Grant, L.D.S.,

Josephine Dolan.,

C. E. Godfrey, L.D.S.

Also seven Dental Attendants and two Dental Clerks.

COUNTY VETERINARY OFFICER:

H. Burrow, M.R.C.V.S., D.V.S.M. (*commenced* 1/10/35).

ASSISTANT VETERINARY OFFICERS:

J. King Shaw, M.R.C.V.S. (*resigned* 23/9/35).

G. B. Brook, D.Sc., M.R.C.V.S. (*commenced* 14/6/35, *resigned* 24/10/35).

J. Birtwistle, M.R.C.V.S., D.V.S.M. (*commenced* 1/10/35).

T. P. Briscoe, M.R.C.V.S. (*commenced* 1/10/35).

G. J. G. Halford, M.R.C.V.S., D.V.S.M. (*commenced* 1/10/35).

T. Y. Littler, M.R.C.V.S. (*commenced* 1/10/35, *resigned* 31/12/35).

J. M. McLinden, M.R.C.V.S. (*commenced* 28/10/35, *resigned* 31/3/36).

J. T. Turney, M.R.C.V.S. (*commenced* 28/10/35).

J. Stewart, M.R.C.V.S. (*commenced* 1/3/36).

J. Steven, M.R.C.V.S. (*commenced* 23/4/36).

ORGANISER OF INFANT WELFARE:

Miss E. Gray.

REGIONAL INSPECTORS OF MIDWIVES.

Miss Shand,

Miss Sleigh (*resigned* June 22nd, 1935).

Miss Wilson,

Miss Woodford.

ORTHOPÆDIC NURSES:

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

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

COUNTY SANITARY INSPECTORS:

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

H. Mallinson, Cert.R.S.I., Cert. Meat Inspector (*resigned* 5/10/35).

W. Shaw, Cert.R.S.I., Cert. Meat Inspector (*commenced* 1/2/36).

G. D. Aspin, Cert.S.I.B. (*commenced* 1/2/36).

A. H. Moseley, Cert.S.I.B., Cert. Meat Inspector (*commenced* 1/2/36).

FOOD & DRUGS SAMPLING OFFICER:

W. Etchells.

ASSISTANT BACTERIOLOGIST:

C. F. Peckham.

LABORATORY ASSISTANTS:

A. Morley, Cert. B.L.A., A. Yeomans.

C. H. Humphreys (*Temporary*).

Miss I. M. Moore.

RADIOGRAPHER:

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

CLERKS:

(26, including eight engaged in the School Medical Service).

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

There are 79 Public Vaccinators (including 9 at Institutions) and 72 Poor Law District Medical Officers. All are engaged in private practice. There are also 18 Vaccination Officers.

There were seven subsidised midwives at the end of 1935.

HEALTH VISITORS.

Name.	Qualification	Reference No.*	Date commenced duty.
Spetch, R. ...	... 2, 3 ...	...	21/4/13
Harvey, A. ...	... 2, 3, 5 ...	...	1/9/13
Fisher, D. ...	... 3, 4, 5, 6 ...	...	1/5/14
Rodgers, M. ...	... 3, 5, 6, 7 ...	...	1/2/15
McNulty, A. ...	... 7 (Dispensary Nurse) ...	...	16/6/15
Wilson, M. ...	... 3, 4, 6, 7 ...	...	12/7/15
Liddle, A. L. ...	... 3, 4, 5 ...	...	27/9/15
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, 4 ...	...	3/3/17
Stevens, A. L. ...	... 2, 3 ...	...	21/9/17
Webb, E. ...	... 3, 4, 6 ...	...	21/9/17
Field, C. ...	... 2, 3, 5, 6 ...	...	1/10/17
Major, C. B. ...	... 2, 3 ...	...	1/10/17
Stevens, L. ...	... 2, 3, 4, 6 ...	...	29/6/18
Martin, E. ...	... 3, 5, 7 ...	...	10/9/18
Smith, M. L. ...	... 2, 3, 5 ...	...	1/1/19
Clarkson, A. L. ...	... 1, 3, 4, 5, 6, 7 ...	...	18/3/19
Woodford, D. ...	... 2, 3, 5 ...	...	8/12/19
Booth, E. ...	... 3, 4, 5 ...	...	16/8/20
Beardmore, B. ...	... 2, 3 ...	...	25/10/20
Priestley, M. ...	... 2, 3 ...	...	17/2/21
Agutter, M. ...	... 1, 3, 4 ...	...	22/8/21
Brewster, C. ...	... 2 ...	...	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 ...	...	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, L. ...	... 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. ...	... 1, 2, 3 ...	...	17/10/32
Jackson, Millicent D. ...	... 1, 2, 3 ...	...	17/10/32
Hewett, Alice M. ...	... 1, 2, 3 ...	...	24/10/32
Wilson, Olive L. ...	... 1, 2, 3 ...	...	8/5/33
Hardy, Doris M. ...	... 1, 2, 3 ...	...	14/8/33
Blatchley, Margaret Eliz. ...	... 1, 2, 3, 7 ...	...	24/1/35
Noble, Eliz. H. ...	... 1, 2, 3 ...	...	7/10/35
Wright, Ellen G. ...	... 1, 2, 3 ...	...	1/10/35
Walch, Ruth ...	... 1, 2, 3 ...	...	2/11/35

With the exception 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.

Birth Rate & Death Rate from the Seven Principal Zymotic Diseases & all Causes
and Infantile Mortality in the Whole County during the last Forty-five Years.

TABLE I.

Year.		DEATH RATES PER 1,000 OF POPULATION.							Death Rate from all Causes.	Birth Rate.	Infantile Mortality per 1,000 Births.
		Small Pox.	Scarlatina	Diphtheria & Membranous Croup.	Typhoidal Fevers.	Measles.	Whooping Cough.	Diarrhoea	Seven Principal Zymotics		
1891 to 1900	WHOLE COUNTY England and Wales	.028 .012	.16 .15	.17 .27	.16 .18	.43 .39	.30 .36	.58 .71	1.87 2.14	33.7 29.9	147 153
1901 to 1910	WHOLE COUNTY England and Wales	.004 .016	.10 .10	.16 .17	.08 .10	.26 .30	.24 .27	*.58 .77	1.58 1.50	28.5 27.1	126 128
1911 to 1920	WHOLE COUNTY England and Wales	— .000	.04 .04	.16 .14	.03 .03	.24 .27	.16 .18	.40 .51	1.03 1.17	24.07 21.90	99 100
1921 to 1930	WHOLE COUNTY England and Wales	.00 .00	.02 .02	.07 .08	.01 .01	.07 .11	.10 .11	†.12 †.15	.39 .48	19.73 18.36	70.7 71.7
1931	WHOLE COUNTY England and Wales	.00 .00	.01 .02	.04 .06	.01 .01	.04 .03	.06 .07	.08 .09	.24 .28	16.72 15.8	67.4 66.0
1932	WHOLE COUNTY England and Wales	— .00	.01 .01	.06 .07	.00 .00	.11 .11	.06 .08	.07 .10	.31 .37	16.35 15.3	63.4 65.0
1933	WHOLE COUNTY England and Wales	— .00	.01 .02	.04 .06	.01 .01	.03 .05	.06 .05	.06 .10	.21 .29	15.29 14.4	62.2 64
1934	WHOLE COUNTY England and Wales	.00 .00	.005 .02	.049 .10	.003 .00	.045 .09	.031 .05	.042 .08	.175 .34	15.28 14.8	53.00 59.0
1935	Urban Districts	—	.01	.09	—	.03	.01	.06	.20	14.70	59.8
	Rural Districts	—	.01	.04	.01	.01	.03	.04	.14	15.85	53.3
1935	WHOLE COUNTY	—	.01	.07	.00	.02	.02	.05	.17	15.23	56.6
	England and Wales	—	.01	.08	.00	.03	.04	.08	.24	14.7	57.0

* 1891-1900 the Deaths from Enteritis, etc. are included.

† Deaths from Diarrhoea under 2 years of age only.

Report on the Health of Derbyshire for the Year 1935.



STATISTICS AND SOCIAL CONDITIONS.

AREA AND POPULATION.

The area of the Administrative County of Derby at the time of the Census of 1931 was 640,701 acres and the population 614,926. A Census Volume which has recently been published gives the area and population for 1931 of the districts in Derbyshire as they exist on April 1st, 1935, as 634,260 and the population as 608,311. The Inquiry into the revision of that portion of the County boundary in the North-Western area has been held, and the Ministry of Health have made an Order giving effect to the proposals of the Derbyshire and Cheshire County Councils. Among these proposals, Derbyshire takes from Cheshire parts of Disley, Kettleshulme, Yeardsley-cum-Whaley, and Taxal with an area of 5,210 acres and a population of 3,193, and on the other hand Cheshire takes from Derbyshire the parishes of Mellor and Ludworth and a small portion of the New Mills Urban District, with a total area of 4,016 acres and a population of 3,638. The net result is a gain to Derbyshire of 1,194 acres and a loss of 445 population. The proposals also include the formation of a new district, namely, the Whaley Bridge Urban District. The scheme comes into operation on April 1st, 1936, and there will then be four Boroughs, 16 Urban Districts and nine Rural Districts in the Administrative County.

The Districts, therefore, as they exist on April 1st, 1936, together with their acreage and population, are given in the following Table :—

<i>District.</i>	<i>Area in Acres.</i>	<i>Census Population, 1931.</i>
Urban.		
Alfreton	5,176	22,262
Ashbourne	1,070	4,708
Bakewell	3,061	3,028
Belper	4,294	14,205
Bolsover	4,526	9,808
Buxton (Borough)	6,337	16,884
Chesterfield (Borough)	8,472	64,160
Clay Cross	2,349	8,781
Dronfield	3,452	6,388
Glossop (Borough)	3,323	20,001
Heanor	4,417	22,482
Ilkeston (Borough)	3,017	33,164
Long Eaton	3,559	23,321
Matlock	16,599	16,596
New Mills	5,209	8,551
Ripley	5,415	17,713
Staveley	6,504	17,845
Swadlincote	3,755	20,604
Whaley Bridge	3,487	4,789
Wirksworth	4,016	4,855
	98,038	340,145
Rural.		
Ashbourne	86,188	11,661
Bakewell	85,643	19,272
Belper	48,074	23,106
Blackwell	21,668	44,689
Chapel-en-le-Frith	103,418	18,770
Chesterfield	69,139	64,968
Clown	13,429	17,720
Repton	65,653	26,438
Shardlow	44,204	41,097
	537,416	267,721
WHOLE COUNTY ...	635,454	607,866

INHABITED HOUSES.

The estimated number of houses in the County at the end of 1935, according to the information supplied by the Local Medical Officers of Health was 166,796, of which 87,979 are in the Boroughs and Urban Districts and 78,817 in Rural Districts.

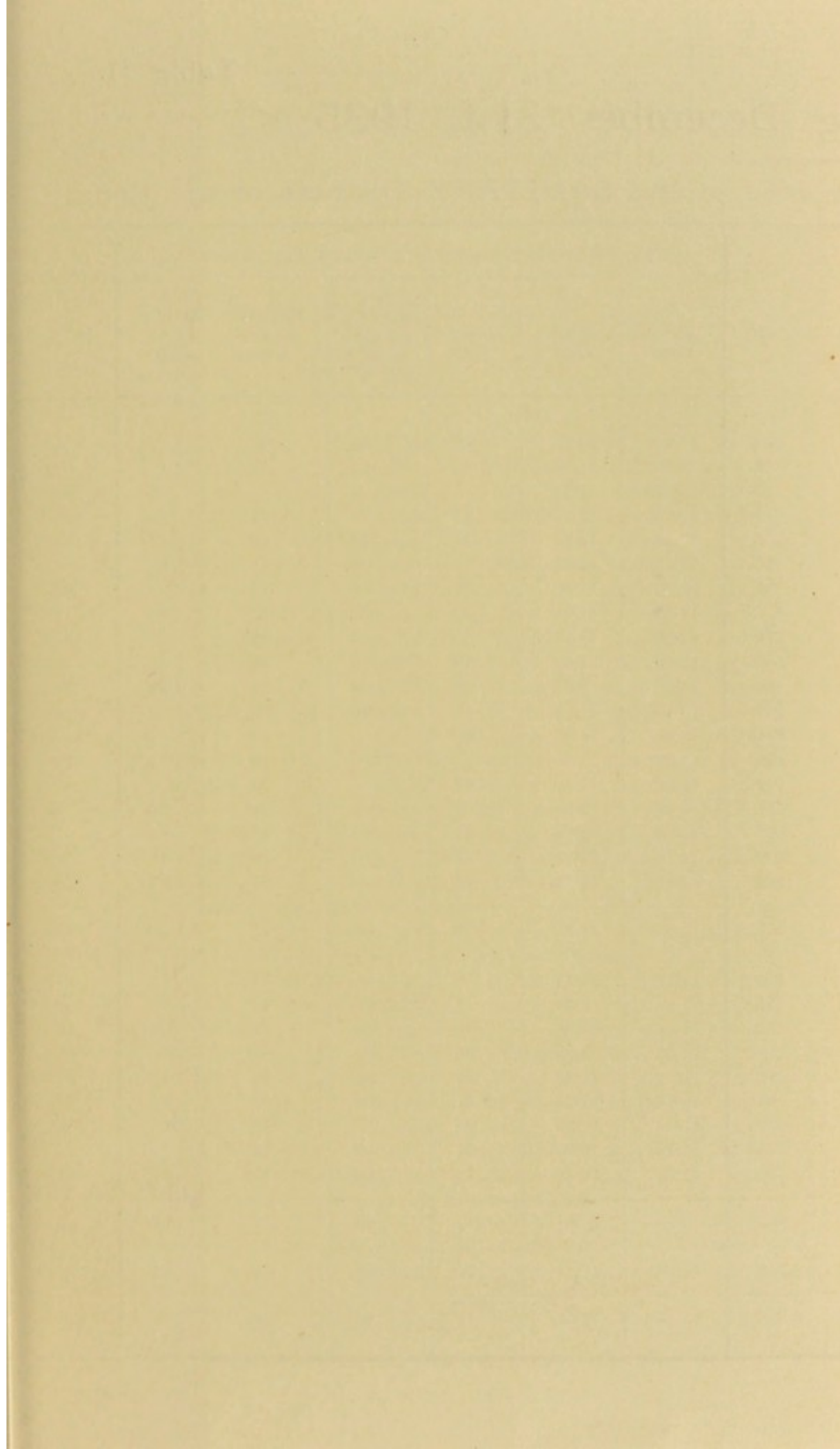


Table II.

COUNTY OF DERBY. Year ending December 31st, 1935.

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

SANITARY DISTRICT.	MEDICAL OFFICER OF HEALTH.	Areas in Acres (Land and Water)	POPULATION.			Births	Deaths	ANNUAL RATES PER 1,000 OF ESTIMATED POPULATION.							Infantile Death Rate per 1,000 Births
			Census 1921	Census 1931	Estimated 1935			Birth Rate	Death Date	Zymotic Death Rate	Death Rate from continued fever and diarrhoeal diseases (under 5 years)	Phthisis Death Rate	Respiratory Death Rate		
ALFRETON	S. O. Bingham, M.R.C.S.	5,176	21,201	22,262	22,220	321	243	14.44	10.93	.09	.09	.27	1.12	71.64	
ASHBOURNE	E. A. Sadler, M.D.	1,070	4,375	4,708	4,740	80	56	16.88	11.81	.42	.21	.42	.42	50.00	
BAKEWELL	S. S. Proctor, M.D., D.P.H.	3,061	3,064	3,028	3,089	41	30	13.27	9.71	—	—	—	.97	97.64	
BELPER	R. C. Allen, M.R.C.S., D.P.H.	4,294	13,474	14,205	14,880	221	149	15.05	10.15	.13	—	.27	.61	40.73	
BOLSOVER	W. Stratton, L.R.C.P.I.	4,526	10,146	9,808	9,910	202	122	20.38	12.31	.30	.30	.60	1.41	79.20	
BUXTON (Borough)	G. Cochrane, M.B., D.P.H.	6,337	16,863	16,884	16,770	227	216	13.53	12.88	.12	.06	.18	1.61	57.26	
CHESTERFIELD (Borough)	J. A. Stirling, M.B., D.P.H.	8,472	61,232	64,160	64,720	1,018	751	15.73	11.60	.26	.06	.75	1.39	72.70	
CLAY CROSS	J. R. Graham, M.B., Ch.B., D.P.H.	2,349	8,846	8,781	8,440	121	109	14.33	12.91	.47	.23	.23	.82	49.50	
DRONFIELD	J. R. Graham, M.B., Ch.B., D.P.H.	3,452	6,112	6,388	6,397	85	74	13.28	11.57	—	—	.31	.62	47.05	
GLOSSOP (Borough)	E. H. M. Milligan, M.D., D.P.H.	3,323	21,048	20,001	19,030	215	255	11.30	13.40	.10	.05	.26	1.20	41.86	
HEANOR	W. H. Turton, M.B.	4,417	21,558	22,482	22,550	351	222	15.56	9.84	.26	.09	.48	1.19	54.12	
ILKESTON (Borough)	H. L. Barker, M.D., M.R.C.S., D.P.H.	3,017	32,520	33,164	32,880	541	381	16.45	11.59	.18	.06	.60	1.64	62.84	
LONG EATON	J. Moir, M.B.	3,559	23,050	23,321	24,700	342	274	13.84	11.09	.40	—	.49	1.01	40.94	
MATLOCK	S. S. Proctor, M.D., D.P.H.	16,599	15,716	16,596	16,500	249	196	15.09	11.88	—	—	.36	1.21	44.17	
NEW MILLS	G. B. Pemberton, M.B., D.P.H.	5,204	8,490	8,551	8,292	100	102	12.06	12.30	.12	—	.60	1.56	90.90	
RIPLEY	R. A. Ryan, L.R.C.P.I.	5,415	17,192	17,713	17,520	267	174	15.24	9.93	.22	.05	.28	.62	59.92	
STAVELEY	J. R. Graham, M.B., Ch.B., D.P.H.	6,504	12,437	17,845	17,500	180	110	10.28	6.28	.22	.05	.17	.62	27.78	
SWADLINCOTE	S. T. Cochrane, M.D., D.P.H.	3,755	20,211	20,604	20,460	297	209	14.51	10.21	.15	—	.29	.78	50.49	
WIRKSWORTH	W. S. G. Christie, M.B., Ch.B.	4,016	4,521	4,855	4,732	69	84	14.58	17.75	.21	—	1.05	1.05	130.45	
URBAN DISTRICTS.		94,546	322,056	335,356	335,130	4,927	3,757	14.70	11.21	.20	.06	.45	1.15	59.67	
ASHBOURNE	H. H. Hollick, M.R.C.S.	86,188	11,762	11,661	11,360	184	133	16.19	11.71	—	—	.17	.70	38.05	
BAKEWELL	S. S. Proctor, M.D., D.P.H.	85,643	19,521	19,272	19,060	265	234	13.90	12.28	.16	.05	.47	1.52	52.82	
BELPER	R. C. Allen, M.R.C.S., D.P.H.	48,074	21,545	23,106	24,930	351	270	14.68	10.83	.12	.08	.28	.96	48.43	
BLACKWELL	A. H. Wear, M.B., B.S., D.P.H.	21,668	43,209	44,689	43,800	739	419	16.67	9.56	.06	.04	.68	1.11	67.12	
CHAPEL-EN-LE-FRITH	G. Cochrane, M.B., D.P.H.	105,716	22,705	24,004	24,140	295	284	12.22	11.77	.12	.04	.20	1.18	37.28	
CHESTERFIELD	J. R. Graham, M.B., Ch.B., D.P.H.	69,139	64,295	64,968	65,510	1,202	743	18.34	11.34	.21	.06	.25	1.11	59.07	
CLOWNE	A. H. Wear, M.B., B.S., D.P.H.	13,429	17,506	17,720	17,830	304	192	17.05	10.76	.05	—	.50	1.06	42.76	
REPTON	J. A. Watt, M.B., D.P.H.	65,653	24,899	26,438	27,650	386	274	13.96	9.90	.21	.07	.32	.79	46.63	
SHARDLOW	S. Hunt, M.R.C.S.	44,204	31,125	41,097	49,590	783	520	15.79	10.48	.14	.04	.42	.88	51.08	
RURAL DISTRICTS		539,714	256,567	272,955	283,870	4,599	3,069	15.85	10.81	.14	.04	.38	1.04	53.33	
URBAN DISTRICTS		94,546	322,056	335,356	335,130	4,927	3,756	14.70	11.21	.20	.06	.45	1.15	59.67	
WHOLE COUNTY		634,260	578,623	608,311	619,000	9,427	6,825	15.23	11.03	.17	.05	.41	1.10	56.64	

RATEABLE VALUE.

The Rateable Value of the Administrative County in April, 1935, for County Rate purposes was £3,016,472, and a Penny Rate over the whole County represents the sum of £11,402.

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 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. 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 Table II. and the following are extracts from them, given in a form required by the Ministry of Health:—

				<i>Males</i>	<i>Females</i>	<i>Total</i>
				<i>Total.</i>	<i>Males.</i>	<i>Females.</i>
Live Births	Legitimate	...	...	4 660	4,469	9,129
	Illegitimate	...	...	148	150	298
Total				4,808	4,619	9,427

Birth Rate per 1,000 of the estimated population	15.23
Number of Still Births	457
Rate per 1,000 (still and live) births	46.24
Number of Deaths	6,825
Death rate per 1,000 of the estimated population	11.03

Deaths and Death Rates from Puerperal Causes:—

		<i>No. of</i>	<i>Rate per 1,000</i>
		<i>Deaths.</i>	<i>live Births.</i>
Puerperal Sepsis	...	22	2.33
Other Puerperal Causes	...	20	2.12
Total	...	42	4.45

Death Rate of Infants under 1 year of age:—

All infants (per 1,000 live births)	56.64
Legitimate infants (per 1,000 legitimate births)	54.65
Illegitimate infants (per 1,000 illegitimate births)	117.46

	<i>No. of deaths.</i>	<i>Rate per 1,000 of estimated population.</i>
Deaths and Death Rate from :—		
Measles (all ages)	12	·02
Whooping Cough (all ages) ...	15	·02
Diarrhoea (under 2 years of age)	32	·05

Infantile Mortality. The Infantile mortality rate has risen from 53 in 1934 to 56·6 in 1935. The figure for 1934 was the lowest on record and was a remarkably low one. The figure for the present year is, however, quite satisfactory and is below the average for England and Wales as a whole.

The cause of the increase in the Infantile Mortality was chiefly amongst the respiratory group of diseases, with a much slighter rise in the diarrhoeal and congenital and development groups. As I pointed out last year, there is no longer any need to fear a dry hot summer because of its effect on infant mortality ; in fact our record of low infant mortality has been reached during a summer of continued hot weather. The increase in the respiratory group is probably due to the more inclement weather experienced during 1935.

TABLE III.
INFANTILE DEATH RATE.

<i>Year.</i>	<i>Amongst legitimate births.</i>	<i>Amongst illegitimate births.</i>	<i>Amongst all births.</i>
1926 ...	69·0	123·5	71·1
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
1933 ...	61·1	91·4	62·2
1934 ...	52·2	73·8	53·0
1935 ...	54·6	117·4	56·6

Births.—The Birth Rate for the year under review—15·23 per thousand of the estimated population—is the lowest on record. After a continuous fall during the ten years prior to 1930, the rate rose slightly in that year to 16·92, since when it has steadily fallen.

Deaths.—6,825 deaths occurred during the year, giving a death rate of 11·03 per 1,000 of the population as compared with 10·57, the rate for the previous year.

Zymotic Diseases.—The Zymotic Death Rate for the year was 0·17 per 1,000 of the population, the same as that of the previous year.

HEALTH EDUCATION.

Health Week.—Health Week in Derbyshire was held from September 30th to October 5th, 1935, and the whole of the Authorities and Organisations interested in health services were again associated with and represented on the Derbyshire Health Week Committee. Lantern lectures were arranged and competitions were held at various centres in the County. The lectures and demonstrations were arranged and given by teachers, medical practitioners, health visitors, school dentists, district nurses and members of the staffs of the Agricultural and Education Departments. A considerable quantity of literature in the form of booklets, posters, etc., was distributed to the schools.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

LOCAL GOVERNMENT ACT, 1929.

Section 5 (1).—There have been no developments or alterations in the arrangements for the administration of institutional medical services under the Public Assistance Committee, nor in respect of Poor Law out-door medical relief.

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 1935 :—

TABLE IV.

Name of Institution.	Total No. of beds. *	Average no. of beds occupied.	Admissions.	Discharges.	Deaths.	Duration of Stay.		
						4 weeks or less.	4—13 weeks.	over 13 weeks.
Ashbourne	36	28	72	64	13	44	15	18
Bakewell	78	55	158	130	27	100	29	28
Belper	132	105	184	109	71	106	40	34
Chapel-en-le-Frith	78	67	114	85	25	74	23	13
Chesterfield	207	130	863	614	198	446	326	40
Glossop	111	88	85	44	32	42	15	19
Hayfield	50	24	25	3	5	2	3	3
Shardlow	99	61	206	70	80	40	35	75
Total	791	558	1707	1119	451	854	486	230

* Excluding cots in maternity wards.

Poor Law Medical Out-Relief.—A complete list of the areas, districts, parishes and district medical officers was given in the Survey Report for 1930. Since then, alterations only have been

given, and as these have been numerous I think it well in this Report to present another complete list :—

MEDICAL RELIEF DISTRICTS AND DISTRICT MEDICAL OFFICERS.

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
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NORTH-WESTERN GUARDIANS COMMITTEE AREA.

1	Hamlets of Glossop, Whitfield, Chunal, Simmondley ; part of Hamlet of Dint- ing and part of Charlesworth	*9709	13715*	Dr. J. Hadfield, Hollincross Lane, Glossop.
2	Hamlets of Hadfield, Padfield, and part Charlesworth Chisworth	*8723 865	7564* 271	Dr. R. W. Bollans, Station Road, Hadfield.
		9588	7835	
3	Hayfield New Mills Newtown	7920 5078 126	2593 7130 1421	Dr. G. B. Pemberton Red Gate, New Mills
		13124	11144	
4	Burbage Buxton Fairfield Green Fairfield Hartington Upper Quarter King Sterndale	2043 454 3108 1345 8312 1332	3523 7008 6583 215 349 210	Dr. G. Cochrane, Turnsteads, Burlington Rd., Buxton.
		16594	17888	
5	Chapel-en-le-Frith Chinley, etc. Fernilee Peak Forest Wormhill	9934 3831 2040 5299 4730	5826 2209 1687 403 1674	Dr. D. Cogan, High Street, Chapel-en-le- Frith.
		25834	11799	

* Estimated.

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Population, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
6	Aston	710	90	Dr. J. W. W. Baillie, Peveril House, Castleton.
	Bamford	1770	956	
	Brough and Shatton	1040	106	
	Castleton	2910	620	
	Derwent	4186	164	
	Edale	7043	422	
	Hope	2964	738	
	Hope Woodlands	20499	157	
	Thornhill	610	167	
		41732	3420	
7	Whaley Bridge	3487	4789	Dr. F. G. Allan, 3, Reservoir Road, Whaley Bridge.

HADDON GUARDIANS COMMITTEE AREA.

1	Ashford	2554	698	Dr. H. G. Watson, "Dagnall," Bakewell.
	Bakewell	3061	3028	
	Brushfield	653	32	
	Haddon, Nether	1499	28	
	Haddon, Over	1513	215	
	Hassop	1721	162	
	Longstone, Great	2576	538	
	Longstone, Little	1034	133	
	Pilsley	465	172	
	Rowland	303	40	
	Rowsley	583	229	
	Sheldon	1070	100	
		17032	5375	
2	Aldwarke	967	38	Dr. A. Menzies, Granby House, Youlgreave.
	Birchover	740	531	
	Elton	1464	462	
	Grange Mill	417	24	
	Gratton	910	25	
	Harthill	920	73	
	Middleton by Youlgreave	2956	222	
	Stanton	1949	399	
	Wensley and Snitterton	2008	731	
	Winster	1123	677	
	Youlgreave and Alport	2515	1368	
		15969	4550	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
3	Bradwell	2174	1313	Dr. G. P. Lafferty, Nether Cottage, Bradwell.
	Little Hucklow	584	160	
		2758	1473	
4	Cromford	1330	847	Dr. C. W. Sparks, Dale House, Matlock.
	Matlock Bath	335	1755	
		1665	2602	
5	Darley Dale	5142	4093	Dr. F. K. B. Quan- brough, Chesterfield Rd., Matlock.
	Matlock	4205	7151	
	Tansley	1137	846	
		10484	12090	
6	Tideswell	3494	1945	Dr. H. Brookes, Osborne House, Tideswell, Buxton.
	Blackwell	1083	44	
	Grindlow	296	49	
	Great Hucklow	1119	128	
	Litton	1640	823	
	Taddington and Priestcliffe	3008	446	
	Wardlow and Wardlow Miers	626	127	
	Wheston	1059	43	
		12325	3605	
7	Chelmorton	2028	349	Dr. J. A. Hendry, Broad Walk, Buxton.
	Flagg	1804	216	
	Hartington Middle Quarter	5050	434	
	Monyash	3146	347	
		12028	1346	
8	Baslow	5736	854	Dr. R. S. C. Edleston, Baslow.
	Beeley	3237	261	
	Calver	775	402	
	Chatsworth	1293	69	
	Curbar	1051	321	
	Edensor	2335	211	
	Froggatt	446	154	
	Nether Padley	329	225	
	Stony Middleton	1197	645	
	Stoke	512	69	
		16911	3211	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Population, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
9	Abney	1350	57	Dr. W. E. Houlbrook, Hathersage.
	Eyam	2665	933	
	Eyam Woodlands	1027	514	
	Foolow	833	140	
	Hathersage	2593	1366	
	Hazlebadge	822	48	
	Highlow	421	40	
	Offerton	621	18	
	Outseats	3391	355	
		13723	3471	

10	Bonsall	2447	1173	Dr. E. D. Broster, The Gables, Wirksworth.
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SCARSDALE GUARDIANS COMMITTEE AREA.

1	Beighton	3135	5553	Dr. H. H. Bradley, The Beeches, Beighton.
2	Eckington	7125	12016	Dr. G. S. Sinclair, Southgate House, Eckington.
3	Killamarsh	1661	4906	Dr. G. R. Lipp, Killamarsh.
4	Staveley	6872	16653	Dr. R. B. N. Smartt, Barrow Hill, Chesterfield.
5	Brampton	7398	1877	Dr. K. B. McGlashan, Brampton, Chesterfield.
	Walton	1604	446	
		9002	2323	
6	Chesterfield (part), comprising :—			
	West Ward	867	4462	Dr. T. R. Evans, Clarence Road, Chesterfield.
	Holme Brook Ward	137	5515	
	Trinity Ward	223	5927	
	Central Ward	220	4945	
	St. Helen's Ward	690	3156	
	St. Leonard's Ward	677	5178	
	Rother Ward (part)	—	—	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
7	Rother Ward (part)	—	—	Dr. W. Moyers, Hasland Green, Chesterfield.
	Hasland Ward	473	4678	
	Hasland	934	3339	
	Tupton	735	1948	
	Wingerworth	2958	775	
8	Ashover	9564	2419	Dr. S. E. Gordon, Ashover.
9	Brackenfield	1551	306	Dr. H. W. Pooler, Stonebroom.
	Shirland and Higham	2956	4406	
	Morton	1125	1388	
	Wessington	973	683	
		6605	6783	
10	Clay Lane	1326	7661	Dr. H. E. Pooler, Hill House, Clay Cross.
	Egston	141	836	
	Stretton	1574	717	
	Woodthorpe	1031	250	
		4072	9464	
11	Barlow	3932	967	Dr. J. T. Wilson, Dronfield.
	Coal Aston	2650	950	
	Dronfield	1045	4530	
	Dronfield Woodhouse	1543	976	
	Holmesfield	5446	619	
	Unstone	2003	2411	
		16619	10453	
12	Brimington	1283	5073	Dr. F. O'Daly, Sutton Lodge, Brimington.
	Calow	1267	1263	
		2550	6336	
13	Newbold Ward	2200	6555	Dr. L. E. Sutcliffe, Whittington Moor, Chesterfield.
	Old Whittington Ward	1454	4783	
	New do.	428	3534	
	Whittington Moor Ward	325	5894	
		4407	20766	
14	Bolsover	4955	11811	Dr. J. D. Gordon, Bolsover,

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
15	Heath	1676	2070	Dr. J. Graham, Holmwood, Chesterfield.
	North Wingfield (part)			
	Sutton-cum-Duck- manton	4369	3270	
	Temple Normanton	520	773	
16	Pilsley	1493	2821	Dr. O. H. Bullock Pilsley, Chesterfield.
	North Wingfield (part)			
17	Barlborough	3455	1980	Dr. R. B. Knowles, Clowne.
	Clowne	1913	5917	
		5368	7897	
18	Elmton and Creswell	2830	5399	Dr. G. K. Wood, 85, Elmton Road, Creswell.
19	Whitwell	5231	4424	Dr. W. W. J. Lawson, Whitwell.
20	Ault Hucknall	4428	2553	Dr. N. F. Graham, Tibshelf, Alfreton.
	Tibshelf and Newton	2372	3500	
		6800	6053	
21	Pinxton	1253	5285	Dr. S. T. Halpin, South Normanton, Alfreton.
	South Normanton	1934	6988	
	Blackwell (except Newton)	1738	4857	
		4925	17130	
22	Glapwell	775	319	Dr. C. J. Palmer, Mansfield Wood- house.
	Pleasley	1808	2638	
		2583	2957	
23	Shirebrook	1467	11091	Dr. F. Daly, Shirebrook, Mansfield.
	Upper Langwith	1510	2416	
		2977	13507	
24	Scarliffe	3954	3039	Dr. W. Stratton, Bolsover.

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
MID-DERBYSHIRE GUARDIANS COMMITTEE AREA.				
1	Alfreton (part Alfreton, Somerccotes, etc.) South Wingfield	3364	1560	Dr. R. A. P. Corkery, High Street, Alfreton.
2	Belper Heage Kilburn Holbrook Shottle and Postern	3183 2596 905 887 3808	13023 4364 1964 1236 357	Dr. R. C. Allen, Bridge Street, Belper.
		11379	20944	
3	Ripley Alfreton (Swanwick (Ward) Pentrich	2815 1256	13413 223	Dr. R. A. Ryan, Scarsdale House, Ripley.
4	Alfreton (part) (Riddings, Greenhill Lane, Pye Bridge, Leabrooks)			Dr. O. R. Allison, Greenhill Lane, Riddings.
5	Wirksworth Ashleyhay Alderwasley Idridgehay	3020 1393 3156 1552	3911 157 309 296	Dr. W. S. G. Christie, West End, Wirksworth.
		9121	4673	
6	Crich Dethick, Lea and Holloway	3302 2038	2783 1195	Dr. E. M. M. Macdonald, Crich.
		5340	3978	
7	Hazlewood Turnditch Windley Milford Duffield Weston Underwood Ravensdale Park Kedleston Quarndon	1232 812 1158 1111 2310 3178 635 959 803	386 238 173 1181 2485 333 35 96 404	Dr. R. G. Morrison, Duffield, Derby.
		12198	5331	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
8	Allestree	1388	1423	Dr. N. Glover, Brailsford, Derby.
	Kirk Langley	2552	484	
	Mackworth	2200	208	
	Darley Abbey	357	736	
		6497	2851	
9	Denby	2437	1989	Dr. W. M. Keys, Kincora, Horsley Woodhouse, Derby.
	Horsley	1296	527	
	Horsley Woodhouse	627	1503	
	Mapperley	982	435	
	Shipley	2062	430	
	Smalley	1642	994	
		9046	5878	
10	Ashbourne	1075	4735	Dr. A. E. Sadler, The Mansion, Ashbourne.
	Atlow	1277	90	
	Bentley, Fenny	1038	188	
	Biggin	643	84	
	Bradley	2423	256	
	Clifton	896	491	
	Edlaston and Wyaston	1379	191	
	Hulland	1080	195	
	Hulland Ward	2491	340	
	Kniveton	2077	253	
	Lea Hall	455	17	
	Mappleton	809	180	
	Newton Grange	1414	70	
	Offcote & Underwood	1999	220	
	Osmaston	1268	258	
	Snelston	2174	233	
	Thorpe	1125	182	
	Tissington	2307	250	
	Yeaveley	1378	172	
	Yeldersley	1505	218	
		28813	8623	
11	Alkmonton	715	60	Dr. N. Glover, Brailsford, Derby.
	Bentley, Hungry	1086	61	
	Brailsford	4366	736	
	Hollington	1034	187	
	Longford	3006	318	
	Mercaston	1158	87	
	Rodsley	820	102	
	Shirley	1630	246	
		13815	1797	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
12	Brassington	4222	645	Dr. E. D. Broster, The Gables, Wirksworth.
	Callow	1259	78	
	Carsington	1141	187	
	Hognaston	1410	231	
	Hopton	1450	83	
	Ible	424	40	
	Kirk Ireton	1952	415	
	Middleton	991	944	
		12849	2623	
13	Ballidon	1947	79	Dr. D. S. Twigg, Hartington, Buxton.
	Bradbourne	1445	155	
	Eaton and Alsop	1527	159	
	Hartington Town Quarter	3622	435	
	Hartington Nether Quarter	3670	437	
	Parwich	3264	549	
		15475	1814	
14	Boylestone	1361	191	Dr. J. D. Crerar, Sudbury, Derby.
	Somersal Herbert	673	83	
	Sudbury	3619	512	
	Doveridge	4483	708	
		10136	1494	
15	Cubley	2388	255	Dr. A. H. C. Hill, The Croft House, Rocester, Staffs.
	Marston Montgomery	2475	357	
	Norbury and Roston	2298	354	
		7161	966	
SOUTH-EASTERN GUARDIANS COMMITTEE AREA.				
1	Ilkeston	2821	33212	Dr. F. B. Sudbury, Galtee House, Ilkeston.
2	Heanor	1578	16696	Dr. W. C. Robey, The Old Manor House, Eastwood
	Codnor Park, portion of Codnor cum Loscoe Parish	1127	85	
		2705	16781	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
3	Codnor and Loscoe	1931	5690	Dr. Geo. Thomson, Fettercairn House, Codnor.
4	Alvaston and Boulton	1321	3280	Dr. H. L. Beckett, "Parkfields," London Road, Alvaston, Derby.
5	Breadsall	1925	1234	Dr. R. G. Morrison, Duffield, Derby.
	Little Eaton	1089	1471	
	Morley	1853	309	
		4867	3014	
6	Breaston, including Sawley New Sawley (part of Long Eaton)	1984	2036	Dr. C. H. Latham, New Sawley, Long Eaton.
7	Long Eaton (exclud- ing New Sawley)			Dr. J. P. Denny, Long Eaton.
8	Arleston and Sinfin	810	45	Dr. S. C. Clarke, Cleveland House, Pear Tree Road, Derby.
	Littleover	1559	3387	
	Sinfin Moor	1063	61	
		3432	3493	
9	Barrow	1204	248	Dr. A. W. P. Haine, Melbourne, Derby.
	Chellaston	851	1292	
	Derby Hills	323	52	
	Melbourne	3506	3714	
	Stanton-by-Bridge	1433	140	
	Swarkestone	996	138	
		8313	5584	
10	Risley	1152	369	Dr. C. S. Vartan, Sandiacre, Notts.
	Sandiacre	1125	4513	
	Stanton-by-Dale	1462	606	
		3739	5488	
11	Aston-on-Trent	1899	648	Dr. H. C. Bell, Shardlow, Derby.
	Elvaston	2654	469	
	Shardlow	1204	1012	
	Weston-on-Trent	1970	387	
		7727	2516	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
12	Chaddesden	1669	1985	Dr. J. W. Smith, Borrowash, Derby.
	Dale Abbey	2108	403	
	Draycott	1452	2339	
	Hopwell	617	85	
	Ockbrook	1854	2971	
	Stanley	1205	1892	
	Spondon	2688	4881	
	West Hallam	1360	1172	
		12953	15728	

SOUTH-WESTERN GUARDIANS COMMITTEE AREA.

1	Castle Gresley	633	1558	Dr. S. T. Cochrane, Swadlincote, Burton-on-Trent.
	Church Gresley	1221	9244	
	Linton	966	1791	
	Swadlincote, Stanton and Newhall	2533	11554	
		5353	24147	
2	Bretby	2287	611	Dr. E. V. Lindsey, Repton, Derby.
	Findern	1679	516	
	Foremark	1207	62	
	Ingleby	925	79	
	Newton Solney	1865	476	
	Repton	4042	1518	
	Twyford and Stenson	1770	178	
	Willington	1325	708	
		15100	4148	
3	Catton	1099	102	Dr. G. Gillies, 240, Branstone Rd., Burton-on-Trent.
	Walton-on-Trent	2377	353	
	Cauldwell	1055	119	
	Coton-in-the-Elms	1192	495	
	Drakelow	1884	162	
	Lullington	1822	182	
	Rosliston	1220	431	
		10649	1844	

<i>District No.</i>	<i>Parish.</i>	<i>Area. Acres.</i>	<i>Popula- tion, 1931.</i>	<i>Name and Address of District Medical Officer.</i>
4	Ash	703	66	Dr. A. Ramsay, The Grove, Etwall, Derby.
	Bearwardcote	463	29	
	Burnaston	979	196	
	Dalbury Lees	1192	158	
	Egginton	2406	383	
	Etwall	2081	744	
	Hilton	1835	817	
	Mickleover	2422	3685	
	Osleston & Thurstaston	1745	254	
	Radbourne	2183	185	
	Sutton-on-the-Hill	880	113	
	Trusley	1086	90	
		17975	6720	
5	Barton Blount	1201	69	Dr. J. N. Gale, Tutbury, Burton-on-Trent.
	Church Broughton	2239	466	
	Foston and Scropton	2850	577	
	Hatton	851	944	
	Hoon	789	28	
	Marston-on-Dove	1009	77	
		8939	2161	
6	Hartshorne	2541	965	Dr. W. G. Love, Moir Road, Woodville, Burton-on-Trent.
	Woodville	460	3049	
		3001	4014	
7	Calke	682	48	Dr. S. C. Davison, Ashby-de-la-Zouch.
	Smisby, including Boundary	1274	374	
	Ticknall	2639	702	
	Overseal	1182	2112	
	Netherseal	2612	756	
		8389	3992	

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 1934. The results as on 31st January, 1936, show that of 8,797 children whose births were registered in the County, 430 died unvaccinated. Of the remaining 8,367 children, only 1,554 (18·6%) were successfully vaccinated or were certified to be insusceptible to vaccination, while statutory declarations of conscientious objection were received in respect of 6,172 (73·8%).

TABLE V.

Vaccination Officer.	Number of Births registered from 1st January to 31st December, 1934.	Number of these Births duly entered by 31st January, 1936, in Vaccination Register, viz. :—				Number of these Births which on 31st January, 1936, remained unentered in Vaccination Register on account of :			Number of these Births remaining on 31 January, 1936, neither entered in Vaccination Register nor temporarily accounted for.	Number of Certificates of successful Primary Vaccinations of children under 14 received during 1935.	Number of Statutory Declarations of Conscientious Objection actually received during 1935.
		Successfully Vaccinated.	Insusceptible to Vaccination.	Statutory Declarations of Conscientious Objection.	Died Unvaccinated.	Postponement by Medical Certificate.	Removal to other Districts.	Removal to places to which unknown and cases not found.			
Mr. J. Binge ...	292	51	...	226	14	...	...	1	...	45	228
Mr. T. T. Charlton ...	326	15	...	243	12	1	...	2	53	13	218
Mr. E. Edson ...	379	15	...	307	17	...	2	1	37	21	312
Mr. F. Fuller ...	1,074	146	1	806	45	2	4	12	58	117	803
Mr. G. W. Hobson ...	169	54	1	102	5	2	...	1	4	42	86
Mr. J. H. Housley ...	165	17	...	130	6	1	2	2	7	30	168
Mr. F. Howard ...	23	17	...	5	1	...	...	...	...	19	8
Mr. J. L. Kind ...	604	100	...	467	36	...	...	1	...	140	454
Mr. J. E. Maddocks ...	388	41	...	264	15	10	...	4	54	146	274
Mr. H. Moorhouse ...	2,825	577	1	1,998	180	...	7	28	34	627	2,114
Mr. J. M. Nesbit ...	181	20	...	108	8	1	11	...	33	13	112
Mr. J. W. C. Payne ...	93	36	...	47	3	...	2	3	2	42	53
Mrs. B. A. Sprigg ...	166	61	1	77	7	3	3	5	9	42	68
Mr. A. Hugh Thomas ...	264	112	3	141	6	...	2	...	...	117	151
Mr. T. Turner ...	382	10	...	235	17	...	...	...	120	79	234
Mr. J. S. Wherrett ...	299	80	...	136	10	11	17	...	27	145	141
Mr. T. H. Widdowson ...	920	154	...	695	40	8	9	12	2	139	727
Miss C. Winterbottom	247	40	1	185	8	2	5	4	2	53	196
Totals ...	8,797	1,546	8	6,172	430	41	64	94	442	1,830	6,347

The following table has also been prepared showing the vaccinations performed by the Public Vaccinators and the Medical Officers of Public Assistance Institutions :—

TABLE VI.

	VACCINATIONS.			Successful Re-Vaccinations
	Under 1 Year.	1 Year and upwards.	Totals.	
By Public Vaccinators	1,183	593	1,776	71
By Medical Officers of Public Institutions	10	8	18	...
TOTALS ...	1,193	601	1,794	71

INSTITUTIONAL ACCOMMODATION FOR THE CARE OF MENTALLY DEFECTIVES.

In addition to Makeney House, a report on which is given hereafter, 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 9 males and 12 females. The arrangement with the Chesterfield Public Assistance Institution which was certified for the reception of 1 female ceased on March 31st, 1935. The County Council also provide accommodation for mentally defectives by contract with certified institutions not belonging to the County Council, in which, at the end of 1935, there were accommodated for the Council 101 males and 125 females.

MAKENEY HOUSE CERTIFIED INSTITUTION.

Institution.—This large country house, with ten acres of grounds was bought for £4,250, plus legal costs £44, and adapted for use as an Institution for Mental Defectives at a cost of £2,750. The furniture and equipment amounted to £1,728. The Institution was licensed by the Board of Control on 18th January, 1935, for 80 high-grade females over 16 years of age, the first patients being admitted on 21st January, 1935.

Admissions.—79 patients were admitted during the year, 48 being transferred from other institutions and 31 under new orders. Three patients have been transferred to other institutions, 1 has died, and 1 has been allowed out on licence, leaving on the register of the Institution on 31st December, 1935, 75 patients (including 1 out on licence).

Staff.—The Staff consists of a Matron-Superintendent, Charge Nurse, Cook, Laundress, Seamstress, 4 Attendants, a Gardener and Handyman.

The Medical Officer visits at least once per week.

One of the Attendants is a cripple with one leg. Through the good offices of Mrs. Burden, I was able to provide for her a short training at Whittington Hall. I recommended that she should be employed at Makeney House with the fullest confidence, and that confidence has not been misplaced, for the Commissioner of the Board of Control has specially reported that she "has a good hold on the girls." Both the Matron and myself are highly satisfied that she is a capable Attendant, able to carry out her duties to our complete satisfaction.

I make this special note with the hope that it will meet the eye of those—and there are many of them—who cannot believe that a large number of cripples are quite competent to carry out satisfactorily the work of normal persons if given the opportunity.

Employment.—The girls are employed in the sewing rooms making garments, etc., also making stockings with a knitting machine. Others work in the laundry, where all the work is done by hand. A group work in the gardens with an Attendant, under the direction of the Gardener, and others are employed in the kitchen, where all the bread for the Institution is baked. Patients with an aptitude for it are taught to cook, and one girl has won a prize in a local competition with a cake baked by herself.

Good Conduct Money.—Good conduct money is given to the girls which they can spend practically as they please.

Recreations.—Special attention has been given to outdoor exercises and walks. A Girl Guide troupe has been formed, and members of the local ladies' cricket club have successfully taught many of the girls to play quite a good game.

Amusements.—Extensive indoor amusements have been provided, with dancing to the wireless or gramophone most evenings, also table tennis and other indoor games. The visit to the local Cinema every week is eagerly looked forward to by the girls. A number also attend the weekly concerts at the Belper Public Assistance Institution.

Outings.—Special outings during the year have been :—Easter Monday, when all the patients were taken to a Fete at the Belper River Gardens ; Whit-Monday some went to Belle Vue, Manchester, others to the River Gardens ; 13th July, all the patients attended the Duffield Carnival, a number taking part in the tableau, cake-making competitions, etc. ; and on 9th October, 14 patients were taken to the Blackpool Illuminations.

Christmas Festivities.—Special arrangements were made at Christmas-time, and patients invited parents and friends to a Tea and Social on 28th December.

Dietary.—Special attention has been given to the dietary to make it varied and appetising.

Religious Services.—Patients attend places of worship every Sunday morning, and prayers are read in the Home each evening.

Dental Treatment.—A thorough dental overhaul has been carried out by the County Dental Staff and dentures provided where necessary. The large amount of work done is shown in the following table :—

Fillings	...	...	...	168
Extractions	...	...	...	353
Attendances	...	...	...	234
Dentures	...	...	...	26
Repairs	...	...	...	5
General Anæsthetics	...	...	...	30

General Physical and Mental Condition.—When the girls were admitted in January, 1935, several of them were rather pale. This was remarked by the Commissioner of the Board of Control in February, 1935. During the year there has been a marked improvement in their physical condition and weights have increased. There has been an average gain of 5·4 lbs. per patient.

There has been a marked improvement in the patients' posture and carriage, and this is in no small measure due to the physical exercises which are carried out under direction for a short time each evening in the open when the weather permits.

There has been little illness of note during the year. There have been two cases of sore throats, one patient had swollen glands, and there have been very few colds. There have been no accidents of note. One girl was treated for having swallowed foreign bodies. It was found by X-Rays that she had swallowed some 15 or 16 pins and needles. All the foreign bodies were recovered without untoward effect.

The patients are regularly inspected, and, when necessary, treated by the County Dental staff. Several patients have been examined by the County Ophthalmic Surgeon and, where necessary, spectacles have been provided.

The patients are bright, cheerful and responsive. During the year, 8 girls who had never used an electric iron, have been taught to use them in the laundry, some 18 girls have been taught plain sewing and darning, whilst 11 girls have learnt to use the sewing machine. There is a knitting machine for knitting stockings for the patients at the Institution and two girls have been taught to work this machine. 6 girls have been taught cooking, including bread-making.

Short classes have been held in the evenings for reading and writing but little progress has been made in these subjects. However, classes have been held for teaching "telling the time" and several girls who could not tell the time can now do so.

Cost.—As shewn in the following table, the cost per week per patient for the year ending 31st March, 1936, was 23/10 which included 9d. in respect of capital out of revenue.

MAKENEY HOUSE CERTIFIED INSTITUTION.

Comparative Statement of Cost.

YEAR ENDED MARCH 31ST, 1936.

Average daily number of Patients	...	...	67·6
" " " Staff	...	...	8·1
	Total Cost.	Cost per week per Patient.	
	£	s.	d.
Salaries and Wages	833	4	8½
Provisions	1,065	6	0
Clothing	130	0	9
Drugs and Medical Appliances ...	20	0	11½
Fuel, Light, Water, Laundry ...	533	3	0
Domestic Renewals	223	1	3
Structural Renewals*	221	1	3
Transport	51	0	3½
Loss on Garden	87	0	6
Printing, Stationery & Miscellaneous	149	0	10
Rates, Taxes and Insurance ...	186	1	0½
Loan Charges	749	4	3
GROSS TOTAL	4,247	24	0
Deduct Income (Superannuation Contributions, etc.)	31	0	2
NET COST	4,216	23	10
Food per person per week	...	5s.	4½d.

* Including 9d. capital out of revenue.

Commissioners' Reports.—The following are extracts from the reports of the Commissioners of the Board of Control :—

"I formed the impression that this Institution has started and is now developing in a desirable and happy way. The girls express their views and feelings about things in a way which indicates that they are not unduly repressed, and expect to be treated reasonably. The presence of several difficult girls who are not really suited to the type of girl and discipline in vogue here has made these opening months very difficult, but I feel that Miss Martin and her staff are to be congratulated on the success of the first year's work."

“A well-arranged dietary has been compiled. The girls are evidently pleased with it. The dinner to-day was appetising and well served.”

"It was very pleasant to see the care and thought given to promoting the welfare and happiness of the patients here."

Conclusion.—Although there are obvious difficulties in the running of a small Institution of 80 beds, the aim has been to provide for these girls a happy and contented home-life, with good food, employment in useful work, together with ample recreations and amusements, all as economically as possible. The few essential restrictions are made almost unnoticeable, and the fact that Makeney is an Institution is forgotten in the general homeliness of the house and the beauty of the gardens. In short, the girls are provided with a real home-life under proper control, the lack of which has been the chief reason why many of them have ever had to be certified under the Mental Deficiency Acts.

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 to the Derby County Nursing Association. These affiliated Associations number 83 and employ 101 nurses (27 Queen's Nurses and 74 District Nurse Midwives). I have no accurate information as to the number of Associations not affiliated to the Derby County Nursing Association.

A grant of £1,200 is paid to the Derby County Nursing Association with a recommendation that the County Nursing Association shall allocate the money partly towards the administrative expenses of the County Nursing Association, partly for the training of midwives and providing post-graduate 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 midwives in districts where normally it would not be possible for them to exist in private practice, such, for instance, as in sparsely populated agricultural rural areas. This arrangement will be continued until March 31st, 1937, when it will be the subject of revision.

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 1935 this service was provided in nine instances.

Midwives.—During 1935, seven midwives received subsidies ranging from £20 to £50. On December 31st, 1935, the number of subsidised midwives was six.

The total number of midwives practising in the area at the end of 1935 was 279, of whom 259 are trained midwives holding the certificate of the Central Midwives' Board, and 20 *bona-fide* midwives. Further particulars of the midwifery service is given under the heading of Maternity and Child Welfare, on pages 57-68 of this Report.

BACTERIOLOGICAL LABORATORY.

During the year, 25,898 bacteriological examinations were made at the County Laboratory, compared with 25,363 in the previous year. The following Table shows the origin of the specimens :—

TABLE VII.

Medical Practitioners	...	...	...	...	4,812
Hospitals	...	...	...	...	5,290
Venereal Diseases Scheme	...	...	...	...	4,709
Dispensary Staff	...	...	...	...	1,817
School Medical Staff	...	...	...	...	2,076
Waters taken by County M.O.H. Dept.	...	...	...	...	3
Waters taken by Local Authorities	...	...	...	...	164
Waters taken by Other Persons	...	...	...	...	56
Hairs for Ringworm (other than Schools)	...	...	...	...	54
Examinations under Superannuation Act	...	...	...	...	84
Milk Inoculations :—					
Tuberculosis Order	...	...	...	...	576
Milk and Dairies Act	...	...	...	...	721
Routine Samples	...	...	...	...	475
Milk for Bacterial Count and Bacillus Coli :—					
Accredited Milk Scheme	...	...	...	...	2,402
Routine Samples	...	...	...	...	646
Milk, Direct Examinations :—				<i>Pos.</i>	<i>Neg.</i>
Tuberculosis Order	...	...	...	59	295
Milk and Dairies Act	...	...	...	39	459
				98	754
					852
Miscellaneous Examinations, Milk and Dairies Act					190
Outside Authorities :—					
Milk Inoculations. Derby Borough	...	...	...	...	225
Milk for Bacterial Count and Bacillus Coli.					
Derby Borough...	...	...	...	...	394
Miscellaneous. Derby Borough	...	...	...	...	225
Miscellaneous. Derby City Hospital	...	...	...	...	99
Miscellaneous. Other Sources	...	...	...	...	28
Total					25,898

The number of specimens sent in by Medical Practitioners from the Urban Districts was 9·03 per thousand of the population, and in the Rural Districts it was 6·28, the figure for the whole County being 7·77 per thousand of the population.

TABLE VIII.—Specimens received from Medical Practitioners during 1935.

Districts.	Enterica.				Diphtheria.		Phthisis.		Miscellaneous.		Total		Rate per 1,000 of Population
	Typhoid, P. typhoid, A & B.		Gaertner, Dysentery, etc.										
	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	
URBAN.													
Alfreton	..	6	2	7	2	33	4	28	8	4	16	78	4.23
Ashbourne	..	..	..	..	2	14	4	9	9	22	15	45	12.66
Bakewell	1	4	..	8	2	13	..	4	4	4	7	33	12.95
Belper	..	8	..	9	..	11	4	28	2	4	6	60	4.49
Bolsover	3	8	1	12	2	32	2	5	2	8	10	65	7.57
Buxton (Boro') ..	..	4	1	4	..	73	3	29	4	3	8	113	7.21
Chesterfield (Boro') ..	4	10	1	19	18	481	15	84	20	39	58	633	10.68
Clay Cross	..	..	..	..	4	19	3	18	..	1	7	38	5.33
Dronfield	..	..	..	..	6	8	2	11	1	..	9	19	4.37
Glossop (Boro') ..	..	1	..	1	21	371	4	16	2	10	27	399	22.38
Heanor	..	5	..	6	2	22	7	43	4	5	13	81	4.16
Ilkeston (Boro') ..	1	1	..	3	24	68	12	30	8	1	45	103	4.50
Long Eaton	..	..	..	..	35	464	6	47	7	4	48	515	22.79
Matlock	..	2	..	3	..	35	..	15	5	9	5	64	4.18
New Mills	..	..	..	..	5	42	4	11	..	..	9	53	7.47
Ripley	..	..	..	..	..	5	2	16	3	3	5	24	1.65
Staveley	..	2	..	3	5	18	7	17	..	..	12	40	2.97
Swadlincote	..	4	..	6	52	219	5	37	2	1	59	267	15.93
Wirksworth	..	..	..	..	3	14	5	14	1	3	9	31	8.45
Urban Districts													
	9	55	5	81	183	1942	89	462	82	121	368	2661	9.03
RURAL.													
Ashbourne	..	..	..	..	1	31	3	13	2	3	6	47	4.66
Bakewell	..	2	1	2	..	34	3	14	2	7	6	59	3.41
Belper	..	3	..	6	7	38	21	51	10	9	38	107	5.81
Blackwell	9	36	4	53	8	89	17	88	4	16	42	282	7.39
Chapel-en-le-Frith ..	..	4	..	4	..	27	5	38	4	4	9	77	3.56
Chesterfield	..	9	1	7	24	151	13	71	2	10	40	248	4.39
Clowne	..	1	..	2	13	119	6	36	1	4	20	162	10.21
Repton	..	4	3	4	15	126	5	67	4	4	27	205	8.39
Shardlow	2	4	1	8	37	240	8	75	23	10	71	337	8.22
Rural Districts ..													
	11	63	10	86	105	855	81	453	52	67	259	1524	6.28
Urban Districts ..													
	9	55	5	81	183	1942	89	462	82	121	368	2661	9.03
Whole County ..													
	20	118	15	167	288	2797	170	915	134	188	627	4185	7.77

TABLE IX.

Specimens received from Hospitals, 1935.

Hospital.			Enterica.				Diphtheria.		Phthisis		Miscel- laneous		Total.		
			Typhoid, Ptyphoid, A & B		Gaertner, Dysentery etc.										
			Pos	Neg.	Pos.	Neg.	Pos	Neg.	Pos.	Neg.	Pos	Neg.	Pos.	Neg.	
Belper	..	..	..	..	..	..	43	269	..	1	..	..	43	270	
Buxton	..	..	1	1	..	3	26	245	..	..	..	4	27	253	
North Derbyshire															
Royal Hospital	...	..	13	5	19	..	..	..	..	1	4	6	36		
County Mental Hosp'l		10	29	10	33	..	11	4	15	15	26	39	114		
Draycott	..	..	..	..	..	113	1180	..	..	..	2	113	1,182		
Dronfield	..	..	..	..	..	16	139	..	..	1	4	17	143		
Etwall	..	..	..	..	..	31	409	..	..	1	1	32	410		
Gamesley	..	..	..	2	1	4	35	551	..	..	2	5	38	562	
High Peak	..	..	..	..	..	16	91	..	1	..	..	16	92		
Haddon	..	..	..	..	..	8	50	..	..	2	10	10	60		
Ilkeston Sanatorium	..	..	..	..	..	17	105	..	..	..	1	17	106		
Langwith	..	..	..	..	..	6	87	..	..	2	5	8	92		
Mastin Moor	..	..	3	3	1	8	64	334	..	1	33	81	101	427	
Morton	..	..	1	3	..	4	77	668	..	..	1	12	79	687	
Penmore	..	..	..	..	..	..	36	258	..	1	1	14	37	273	
Totals			..	15	51	17	71	488	4397	4	19	59	169	583	4,707

Venereal Diseases Specimens.

The following Table shows the number of specimens sent in under the V.D. Scheme for Examination during the year 1935 :—

TABLE X.

	From General Practitioners.	From V.D. Clinics.	Total.
Blood for Wassermann reaction	2,452	1,638	4,090
Pus for Gonococci	290	160	450
Serum for Spirochætes	5	1	6
Cerebro-Spinal Fluid for Cell Count	43	10	53
do. do. Globulin...	46	9	55
do. Lange's Gold Test	51	3	54
Serum for Complement Deviation			
Test for Gonococci	1		1
Totals	2,888	1,821	4,709

TABLE XI.

Specimens received from the Dispensaries and Sanatoria during 1935 :—

Dispensary or Institution.	Sputa.		Miscellaneous.		Total.
	Pos.	Neg.	Pos.	Neg.	
Alfreton	16	30	—	—	46
Ashbourne	10	13	1	—	24
Burton-on-Trent ..	15	121	3	9	148
Chesterfield	65	291	3	1	360
Chinley	25	55	6	2	88
Derby	64	199	9	7	279
Glossop	15	25	2	2	44
Ilkeston	60	189	6	4	259
Long Eaton	35	69	1	—	105
Matlock	20	81	3	—	104
Penmore Pavilion ..	15	2	—	2	19
Derbyshire Sanatorium	..	2	34	52	88
Bretby Hall	1	3	41	187	232
Whitworth Hospital ..	15	6	..	—	21
Totals	356	1086	109	266	1817

TABLE XII.

School Specimens received during the year 1935.

	Pos.	Neg
Swabs for Diphtheria	40	1904
Hair for Ringworm	55	59
Miscellaneous	8	10
	103	1973
Total	..	2076

TABLE XIII.

Examination of Samples of Water.

Authority.	Taken by County M.O.H. Department.	Taken by Local Authorities.	Taken by Other Persons.
Belper U.	...	8	...
Bolsover U.	...	2	...
Buxton Boro'	...	...	4
Glossop Boro'	...	8	...
Long Eaton U.	...	1	...
Matlock U.	...	9	...
Ashbourne R.	1	8	1
Bakewell R.	...	6	...
Belper R.	...	1	...
Blackwell R.	...	85	...
Chapel-en-le-Frith R. ...	...	8	...
Chesterfield R.	...	13	...
Clowne R.	...	1	...
Repton R.	2	12	2
Shardlow R.	...	2	...
Ilkeston and Heanor Water Bd.	...	...	20
Derby Corporation	...	...	29
Totals	3	164	56

Tubercle in Milk.

During the year, 1997 samples of milk were examined for the presence of tubercle bacilli by animal inoculation. 174 samples, or 8.71 per cent. were found to contain tubercle bacilli. The samples included 225 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 1935, 1721 samples of milk were submitted for bacterial count. Of this number 1563 came within the limits of Grade "A" milk.

The percentage of samples containing tubercle bacilli has risen from 7.98 in 1934 to 8.71 in 1935, whilst the percentage coming within Grade "A" limits has risen from 78.3 to 90.8.

The following Table gives details of the examinations :—

TABLE XIV.

	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.	Over 100,000 and up to 200,000.	Over 200,000 and up to 1,000,000.	Over 1,000,000.	Uncount- able.
<i>Accredited Milk Scheme</i>								
No. of Tests (Total 1201)	699	138	157	68	44	58	18	19
Average Bacterial Count	3,853	14,615	32,452	70,250	139,750	493,034	1,804,444	—
<i>Routine Samples</i>								
No. of Tests (Total 520)	159	90	116	52	40	48	14	1
Average Bacterial Count	5,166	15,233	33,033	73,431	144,425	450,375	2,040,428	—

Limit of Bacterial Content for Grade "A" Milk.

The highest bacterial count under the Accredited Milk Scheme was 5,120,000, and under Routine Samples 4,000,000.

MILK EXAMINED FOR BACILLUS COLI.

					Percentage
	<i>Dilution.</i>	<i>Positive.</i>	<i>Negative.</i>	<i>Total.</i>	<i>with B. Coli.</i>
Accredited Milk					
Scheme ...	... 0.01 c.c.	125	1,076	1,201	10
Routine Samples ...	... 0.01 c.c.	91	429	520	17
Total	...	216	1,505	1,721	12

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 per c.c., nor any B. Coli in $\frac{1}{100}$ c.c.

HOSPITALS.

In the Annual Report for 1932, I submitted a Table shewing the facilities at the Voluntary Hospitals in the County, and I am unaware of any important changes since then.

VOLUNTARY HOSPITALS OR MATERNITY HOMES IN THE COUNTY.

<i>Name of Hospital.</i>	<i>No. of Beds.</i>
Derbyshire Royal Infirmary	362
Chesterfield & North Derbyshire Royal Hospital ...	220
Devonshire Hospital, Buxton	310
Ilkeston Hospital	60
Buxton and District Hospital	40
Derbyshire Hospital for Women, Derby ...	60
Derbyshire Hospital for Sick Children, Derby ...	80
Queen Victoria Memorial Home of Rest, Derby ...	35
Heanor, Langley Mill and District Memorial Hospital	17
Heanor Maternity Home	6
Wirksworth Cottage Hospital	16
Ashbourne Cottage Hospital (Victoria Memorial) ...	12
Bakewell and District War Memorial Cottage Hospital	13
Wood's Hospital, Glossop	20
Partington Home, Glossop	8
Whitworth Hospital, Darley Dale	14

HOSPITALS OUTSIDE THE COUNTY BUT AVAILABLE FOR COUNTY 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-on-Trent General Infirmary.

ISOLATION HOSPITALS.

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

North Derbyshire Hospital District.

DISTRICT.	Estimated Population, 1925.	SMALL-POX.		SCARLET FEVER.		DIPHTHERIA.		ENTERIC FEVER.		TOTALS.	
		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. ...	9910	—	—	31	29	4	3	5	5	40	37
Clay Cross U. ...	8440	—	—	8	7	20	20	1	1	29	28
Dronfield U. ...	6397	—	—	18	14	15	13	—	—	33	27
Staveley U. ...	17500	—	—	45	36	49	46	—	—	94	82
Blackwell R. ...	43800	—	—	118	114	15	15	9	9	142	138
Chesterfield R. ...	65510	—	—	224	195	136	134	1	1	361	330
Clowne R. ...	17830	—	—	181	166	18	18	—	—	199	184
TOTALS	169387	—	—	625	561	257	249	16	16	898	826

Chesterfield Hospital District.

Chesterfield (Boro')	64720	—	—	192	148	45	42	5	4	242	194
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Belper Hospital District.

Alfreton U....	22220	—	—	53	51	7	7	—	—	60	58
Belper U. ...	14680	—	—	43	41	1	1	1	1	45	43
Ripley U. ...	17520	—	—	35	24	6	5	—	—	41	29
Wirksworth U. ...	4732	—	—	46	45	1	1	—	—	47	46
Belper R. ...	24930	—	—	60	49	8	7	—	—	68	56
TOTALS	84082	—	—	237	210	23	21	1	1	261	232

Ilkeston Hospital District.

Ilkeston Boro'	32880	—	—	—	—	22	10	43	38	65	48
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Shardlow Hospital District.

Long Eaton U. ...	24700	—	—	88	74	98	98	—	—	186	172
Shardlow R. ...	49590	—	—	140	98	43	40	2	2	185	140
TOTALS	74290	—	—	228	172	141	138	2	2	371	312

STATISTICAL INFORMATION RELATING TO ISOLATION HOSPITAL COMMITTEES APPLYING FOR A GRANT.
Year ended March 31st, 1935.

TABLE XV.

Name of Hospital.	Belper.	Penmore.	Dronfield.	Mastin Moor.	Morton.	Langwith.	High Peak	Shardlow.	Repton.	Ilkeston.	Haddon.	
Total Number of Beds in Hospital ...	83	59	28	28	38	36	46	50	36	25	35	
Number of Beds on basis of 1 for every 144 square feet ...	33	50	18	18	18	24	18	33	18	10	16	
Number of beds on which Grant is based † ...	18	45	18	18	18	24	14	27	15	10	16	
Population of Hospital District ...	84,082	64,720	160,387				32,432	74,290	39,010	32,880	38,649	
Cases Admitted during year ended March 31st, 1935:—												
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	
Scarlet Fever ...	245	73	88	83	44	76	56	122	79	23	51	
Diphtheria ...	30	54	31	99	83	44	44	186	46	23	29	
Typhoid Fever ...	—	3	6	8	3	2	1	8	2	—	1	
Other Diseases ...	2	24	1	4	1	—	3	—	—	1	7	
TOTALS ...	277	154	126	194	131	122	104	316	127	47	88	
Average number of patients in Hospital each day ...	31.46	12.26	10.31	18.92	7.28	11.41	9	36	10.28	4.85	8.2	
Permanent Staff residing in Hospital ...	16	20	10	12	14	12	9	20	8	6	10	
Non-resident Staff in addition to Clerk and Doctor ...	3	6	1	1	1	2	3	1	2	1	1	
Average number of days each case in Hospital ...	41.06	30.89	30.96	40.45	21.64	35.11	34	32	28.19	38.68	30.26	
SUMMARY OF EXPENDITURE:—												
	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1. Provisions ...	867	10 7	397	12 6	355	13 3	422	8 7	425	1 2 6	331	11 2
2. Drugs and Medical Appliances ...	138	1 8	76	2 5	84	3 2	273	5 7	91	4 10	297	10 0
3. Furniture, Linen, &c. ...	624	7 8	*608	19 1	250	9 4	118	2 5	155	8 2	623	1 1 0
4. Fuel ...	489	6 0	302	9 6	90	3 4	189	3 10	114	6 0	99	3 4
5. Salaries ...	1,611	19 8	1,821	2 17 1	755	1 8 2	888	18 1	800	2 5 5	816	1 7 6
6. Administration ...	254	3 1	354	11 1	209	7 10	263	5 4	298	15 9	339	8 1
7. Renewals and Repairs ...	475	5 10	—	—	39	1 5	243	4 11	58	3 1	338	11 5
8. Loans—Repayment and Interest ...	—	—	312	9 9	—	—	—	—	—	—	485	16 4
9. Transport ...	64	9	16	6	10	4	23	5	7	4	18	7
10. Miscellaneous ...	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS ...	4,522	2 15 3	3,886	6 1 11	1,792	3 6 10	2,419	2 9 2	2,008	5 6 1	3,246	5 9 5
Provisions (Patients and Staff) per head per week ...	7 1	—	4 9	—	6 9	—	5 3	—	7 8	—	5 5	—
Name of Medical Superintendent ...	R. C. Allen	—	J. A. Stirling.	—	John R. Graham.			—	N. Kennedy	—	C. H. Latham	—
Name of Clerk ...	G. Pym	—	J. L. Feather.	—	W. E. Wakerley.			—	W. B. Bunting	—	J. Spencer	—
Grant due in accordance with Report of Council, April 17th, 1907.	200 0 0	—	369 0 0	—	769 18 0			—	155 0 0	—	290 0 0	—
									165 6 0	—	89 14 0	—
											172 4 0	—

* Includes Greenhouse, £150.

W. M. ASH.
JOHN HUNT.

STATISTICAL INFORMATION

Name of Hospital.		Borough.	
83	...	...	...
33	...	...	...
18	...	...	...
84,082	...	...	...
Population of Hospital District			
Admitted during year ended March 31st, 1935:—			
245	...	...	...
30	...	...	...
2	...	...	...
277	...	...	...
TOTALS			
31	...	...	...
10	...	...	...
3	...	...	...
41	...	...	...
Average number of patients in Hospital each day			
Permanent Staff residing in Hospital			
Non-resident Staff in addition to Clerk and Doctor			
Average number of days each in Hospital			
SUMMARY OF EXPENDITURE:—			
1.	Provisions	...	...
2.	Drugs and Medical Appliances	...	...
3.	Furniture, Lotion, &c.	...	...
4.	Fuel	...	...
5.	Salaries	...	...
6.	Administration	...	...
7.	Renewals and Repairs	...	...
8.	Loans—Repayment and Interest	...	...
9.	Transport	...	...
10.	Miscellaneous	...	...
TOTALS		...	...
Provisions (Patients and Staff) per head per week			
R. C. Allen			
G. Pym			

Repton Hospital District.

DISTRICT.	Estimated Population, 1935.	SMALL- POX.		SCARLET FEVER.		DIPHTH- ERIA		ENTERIC FEVER.		TOTALS.	
		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.
Ashbourne R. ...	11360	—	—	13	9	3	3	—	—	16	12
Repton R. ...	27650	—	—	37	25	35	27	—	—	72	52
TOTALS ...	39010	—	—	50	34	38	30	—	—	88	64

Haddon Hospital District.

Wakewell U. ...	3089	—	—	1	1	3	3	1	1	5	5
Matlocks U. ...	16500	—	—	15	14	2	2	1	1	18	17
Wakewell R. ...	19060	—	—	44	44	1	1	—	—	45	45
TOTALS ...	38649	—	—	60	59	6	6	2	2	68	67

High Peak Hospital District.

New Mills U. ...	8292	—	—	19	14	10	9	—	—	29	23
Chapel R. ...	24140	—	—	51	46	10	10	—	—	61	56
TOTALS ...	32432	—	—	70	60	20	19	—	—	90	79

Buxton Hospital District.

Buxton (Boro') ...	16770	—	—	24	23	29	29	1	1	54	53
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MATERNITY HOMES.

Ashbourne.—During the year 1935, 148 cases were admitted to this Home. Of these, 137 were delivered by midwives and 11 by doctors. 11 cases were attended on the district by the Home staff.

During the financial year ended March 31st, 1936, the number of patients admitted to this Home was 128, the percentage of beds occupied being 54·4. The gross cost during that year was £1,652 (including £502 for repayment of loan and interest and other charges). The sum of £661 was received as fees from patients, leaving a net cost to the County Council of £991.

Chesterfield.—During the year 1935, 332 cases were admitted to this Home from the County, 189 of whom were admitted under the County Council's agreement with the Chesterfield Corporation.

Heanor.—This Maternity Home of 6 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 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, Derby.—During the year 1935, no cases were admitted to this Home under the agreement between the County Council and the authorities of the Home.

Women's Hospital, Derby.—During 1935, seven cases were admitted from the County area, three of which were abnormal cases, and four Puerperal Fever or Puerperal Pyrexia cases.

Wirksworth Cottage Hospital.—42 cases were admitted to this Hospital for the County area during the year 1935. During the financial year ended March 31st, 1936, 43 cases were admitted and 19 were treated in the District. Of the 43 cases in the hospital, 19 were delivered by midwives and 24 by doctors; of the other 19 cases, 14 were delivered by midwives and 5 by doctors. The cost to the County Council was £31 0s. 0d. Under the agreement with this Hospital, the County Council gives a grant of 10s. for each midwifery case undertaken.

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 1935 :—

TABLE XVII.

<i>Institution.</i>	<i>Beds.</i>	<i>Cases admitted.</i>	<i>Average stay. (days).</i>	<i>Cases delivered.</i>		<i>Occasions Medical Aid sought.</i>
				<i>Drs.</i>	<i>Midwives.</i>	
Ashbourne ...	2	6	65	1	5	—
Bakewell ...	2	16	14	3	13	5
Belper ...	3	5	14	1	4	3
Chapel-en-le-Frith	3	5	48	—	5	3
Chesterfield ...	25	45	14	2	43	5
Glossop ...	4	—	—	—	—	—
Shardlow ...	6	5	21	—	5	—
TOTALS ...	45	82	20	7	75	16

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 crippling defects in children 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 117–138.

ORTHOPÆDIC HOSPITALS.

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 amongst children.

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 page 53 of this Report.

PUERPERAL FEVER AND PUERPERAL PYREXIA HOSPITAL ACCOMMODATION.

The County Council has made provision under the Puerperal Fever and Puerperal Pyrexia Regulations, 1926, for the accommodation of cases of these conditions at the following institutions—

- Burton-on-Trent General Infirmary.
- Derbyshire Royal Infirmary (2 beds).
- Derbyshire Hospital for Women, Derby.
- Jessop Hospital for Women, Sheffield.
- Victoria Hospital and Dispensary, Worksop.
- High Peak Isolation Hospital, Chinley.
- Belper Public Assistance Infirmary.

Beds are, as a rule, available as required. Under these Regulations, the following services are provided by the County Council :—

- (a) A second opinion on notified cases of Puerperal Fever or Puerperal Pyrexia.
- (b) The admission of such cases to Hospital.
- (c) The Bacteriological examination of :—
 - (i.) Lochia.
 - (ii.) Blood of such cases.

The County Council are not responsible for Maternity and Child Welfare work in the following Boroughs, and, therefore, Consultants and Hospitals are not available for these areas :—

Buxton,
Chesterfield,
Glossop,
Ilkeston.

(a) **Consultants.**—The following have been recognised by the Ministry of Health and the County Council as Consultants under the Regulations for Derbyshire :—

- N. L. Edwards, Esq., F.R.C.S., 64, Friar Gate, Derby.
(Tel. No. Derby 1551).
- H. T. Hicks, Esq., F.R.C.S., 56, Friar Gate, Derby.
(Tel. No. Derby 284).
- F. H. Lacey, Esq., M.D., 16, St. John's Street, Manchester.
(Tel. No. Manchester Central 1500).
- C. D. Lochrane, Esq., F.R.C.S., 65B, Friar Gate, Derby.
(Home address) Darley Slade, Duffield Road, Derby. (Tel. No. Derby 1439).
- Miles H. Phillips, Esq., F.R.C.S., "Egerton House," 420, Glossop Road, Sheffield. (Tel. No. Sheffield Central 3020).
- C. E. Potter, Esq., M.D., Rosehill House, Derby.
(Tel. No. Derby 1372).
- J. Eric Stacey, Esq., F.R.C.S., 2, Durham Road, Glossop Rd., Sheffield. (Tel. No. Sheffield 60837).

When the services of Consultants are required, either at the time of sending the notification of Puerperal Fever or Puerperal Pyrexia to the District Medical Officer of Health or at any subsequent time, the form of application P.F.2 should be completed and sent to the County Medical Officer, New County Offices, Derby.

In cases of emergency, application should be made to the County Medical Officer either by telephone (Derby 355) or otherwise. If the office is closed and the case is urgent, application should be made direct to the nearest Consultant and form P.F.2 sent within 24 hours to the County Medical Officer with a brief note to the effect that the Consultant was urgently required.

The Consultants' fees will be paid by the County Council, and the charges for this will not fall upon the General Practitioner, subject to the above procedure for immediate notification to the County

Medical Officer being strictly adhered to, but not otherwise. The fee will be recoverable by the County Council from the patient in part or in whole if her financial circumstances permit.

(b) Admission of Patients to Hospital.

The County Council have made arrangements with :—

Burton on Trent General Infirmary (Tel. No. Burton-on-Trent 3334)

Derbyshire Hospital for Women, Derby (Tel. No. Derby 1401)

Derbyshire Royal Infirmary, Derby (Tel. No. Derby 668)

High Peak Isolation Hospital, Chapel-en-le-Frith (Tel. No. Chapel-en-le-Frith 24)

Jessop Hospital for Women, Sheffield (Tel. No. Sheffield Central 521)

Victoria Hospital and Dispensary, Worksop (Tel. No. Worksop 108)

for the reception of notified cases of Puerperal Fever and Puerperal Pyrexia. When it is desired to admit such a case to hospital, application should be made to the County Medical Officer on form P.F.2.

In cases of emergency, application should be made to the County Medical Officer by telephone or, if the County Offices are closed and the case is urgent, application should be made direct to the Hospital by telephone, but cases should not be sent before a reply has been received from the Hospital that a bed is available, and in such cases of emergency form P.F.2 should be sent to the County Medical Officer within 24 hours with a note that the case was admitted to the Hospital (named) as an emergency. Arrangements for the removal of patients to and from the Hospital will not be undertaken by the County Council.

(c) Bacteriological Examination of Lochia and Blood.

Specimens should be sent direct to the County Medical Officer, together with form P.F.2.

Provision of Nurses.

No provision has been made up to the present for the supply of trained nurses in the Homes.

Public Health (Ophthalmia Neonatorum) Regulations, 1926.

The County Council have also authorised me to inform Medical Practitioners that arrangements have been made between the Derbyshire Royal Infirmary and the County Council for the treatment of notified cases of Ophthalmia Neonatorum.

If application is made to me by telephone, I arrange immediately for the admission of the case, or should the necessity arise for treatment when the office is closed, application should be made direct to the Derbyshire Royal Infirmary and a communication sent to this office informing me of the circumstances.

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.—Motor Ambulances for the conveyance of patients suffering from infectious diseases are provided in connection with the isolation hospitals.

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

TABLE XVIII.

<i>Police Division.</i>	<i>Place where kept.</i>	<i>Telephone No.</i>	<i>Detailed Particulars of Ambulance.</i>
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 183.	Alfreton U.D.C. Ambulance is a 23 H.P. model with accommodation for 5 sitting patients and 2 stretchers.
ASHBOURNE.	Sudbury. The Hall Garage	Sudbury 1.	Sudbury Red Cross Ambulance is a Ford make, and has accommodation for two stretchers.
	Ashbourne.	Ashbourne 58.	One 24 H.P. Ford to carry two patients.
BAKEWELL AND MATLOCK.	Bakewell. Council Garage	Bakewell 4 or 70.	Bakewell Red Cross Ambulance is a Ford make and has accommodation for two stretchers.
	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 154 or 48.	New Mills Red Cross Ambulance is a 25 H.P. Daimler, 1926 model which will accommodate two stretcher cases and three sitting cases.
	Glossop.	Glossop 57.	Glossop Borough Police Ambulance is a 20 H.P. Austin, 1924 model which will accommodate two stretcher cases and four sitting cases.

<i>Police Division.</i>	<i>Place where kept.</i>	<i>Telephone No.</i>	<i>Detailed Particulars of Ambulance.</i>
CHESTERFIELD	Chesterfield.	Chesterfield 2222.	Chesterfield Borough Police Ambulance is a 21-H.P. Wolseley and has accommodation for two stretcher cases, assistants and passengers. It is fitted with every modern convenience.
	Bolsover.	Bolsover 5.	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 cases.
	Derby. 146 Burton Road	Derby 1361.	Red Cross Society's Ambulances:—(1) Bedford 1935 26 H.P. double loader, for two stretcher cases or six sitting cases. (2) Ford 23 H.P. for two stretcher cases or four sitting cases.
	Long Eaton. Fire Station Tamworth Road	Long Eaton 21.	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.
REPTON AND GRESLEY.	Swadlincote.	Swadlincote 7310.	The Swadlincote Urban District Council have a horse-drawn ambulance which will accommodate four sitting and two stretcher cases.
	Gresley.	Swadlincote 7153.	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 Ambulance is an 18-H.P. Guy with accommodation for two stretcher cases and four or five sitting cases. It is equipped with all modern appliances.
	Spondon.	Spondon 2200.	The British Celanese Company's Ambulance is a 22-H.P. Morris with accommodation for two stretcher cases.
	Nottingham.	Nottingham 41541	Nottingham Corporation 3 25-H.P. Talbots to carry 3 patients each. One 31-H.P. Daimler to carry 5 patients.

<i>Police Division.</i>	<i>Place where kept.</i>	<i>Telephone No.</i>	<i>Detailed Particulars of Ambulance.</i>
ECKINGTON.	Creswell. Institute Garage	Creswell 8.	Creswell Red Cross Ambulance is a 25-H.P. Ford with accommodation 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.
	Sheffield.	Sheffield 23221.	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.
	Dronfield.	Dronfield 26 and 12.	Dronfield Urban District Council Ambulance is a 30-H.P. Hudson, with accommodation for one stretcher case and attendant or four sitting cases.
	Creswell.	Creswell 14.	Messrs. T. and A. Gilbert's Ambulance is a 23-H.P. Overland which will accommodate two lying cases and attendant or one lying and two sitting cases with attendant.
ILKESTON	Ilkeston. Town Hall	Ilkeston 161. and 36	Ilkeston Red Cross Ambulance is a Ford make with accommodation for two stretchers.
	Ripley.	Ripley 28.	The Ripley Urban District Council Ambulance is horse drawn.
	Ripley.	Ripley 60.	Britain Colliery Ambulance is a 28-H.P. Buick with accommodation for two stretcher cases, and is available when not required for colliery cases.
	Heanor.	Langley Mill 66 or 121.	Heanor Urban District Council Ambulance is a 16 h.p. Austin, with accommodation for two stretchers, two patients, and one attendant.
	Sandiacre.	Sandiacre 167.	Motor Ambulance provided by residents of Sandiacre and Risley. Residents pay 1/- per annum. Non-subscribers pay 6d. per mile.

CLINICS AND TREATMENT CENTRES.

A complete list of the Clinics, Treatment Centres and Dispensaries was given in the Survey Report for 1930. Since then, alterations only have been given, but as these have been numerous I think it well in this Report to present another complete list :—

SCHOOL CLINICS.

1. Minor Ailment Clinics.

<i>Clinic.</i>	<i>Address.</i>	<i>When held.</i>	<i>When Doctor in attendance.</i>
Alfreton ...	... School Clinic, Grange St.	Daily a.m.	Alternate Saturdays.
Ashbourne ...	... Stone House	1st and 3rd Saturdays.	1st and 3rd Saturdays.
Belper ...	... Green Hall	Daily a.m.	2nd, 4th and 5th Saturdays.
Chesterfield ...	... School Clinic, Brimington Road	2nd and 4th Saturdays a.m.	2nd and 4th Saturdays.
Clay Cross...	... New premises	Saturdays a.m.	Alternate Saturdays.
Derby ...	... School Clinic, Walker Lane	1st and 3rd Saturdays a.m.	1st and 3rd Saturdays.
Dronfield ...	... New Council Infants' School	Mondays a.m.	3rd Mondays.
Heanor ...	... School Clinic, Wilmot St.	Tuesdays and Thursdays a.m.	1st Thursdays.
Long Eaton ...	... School Clinic, 4, Nottingham Rd.	Daily a.m.	2nd and 4th Saturdays.
Matlock ...	... School Clinic, Dean Hill House Causeway Lane	Thursdays a.m.	Thursdays.
Ripley ...	... Council Infants' Sch.	Tuesdays a.m.	Tuesdays.
Shirebrook ...	... School Clinic, Cliff House	Daily a.m.	Wednesdays.
Swadlincote ...	... School Clinic, Alexandra Rd.	Daily a.m.	Mondays and Saturdays.

2. Ear, Nose and Throat Clinics.

<i>Clinic.</i>	<i>When held.</i>
*Alfreton ...	... 4th Thursday.
†Ashbourne ...	... 3rd Friday.
†Chinley ...	... 3rd Wednesday.
Chesterfield ...	... 1st Tuesday.
Derby ...	... 1st Wednesday.
*Heanor ...	... 4th Friday.
*Long Eaton ...	... 2nd Thursday.
*Matlock ...	... 1st Thursday.
Shirebrook ...	... 3rd Thursday.

*Every alternate Month, commencing January.

†Every alternate Month, commencing February.

3. Eye Clinics.

<i>Clinic.</i>	<i>Address.</i>	<i>When held.</i>
Alfreton ...	... School Clinic, Grange St.	2nd and 4th Wednesdays, a.m. and p.m.
Belper ...	... Green Hall,	3rd Mondays, a.m. and p.m.
Bolsover ...	... New Infants' School	As required.
Chesterfield	... School Clinic, Brimington Rd.	1st, 2nd and 3rd Thursdays, a.m. and p.m., with 4th Thursdays occasionally.
Chinley ...	... School Clinic, Lower Lane	1st Monday and 1st Wednes- day, a.m. and p.m.
Clowne ...	... Junior Boys' School	As required.
Derby ...	... School Clinic, Walker Lane	Fridays, a.m.
Dronfield ...	... New Council Infants' School	As required.
Eckington	... Wesleyan Sch.	As required.
Heanor ...	... School Clinic, Wilmot St.	Tuesdays, a.m.
Killamarsh	... Council Boys' School	As required.
Long Eaton	... Board Room, High St.	2nd Monday, a.m. and p.m.
Matlock ...	... Dean Hill Hse., Causeway Lane	4th Monday, a.m. and p.m.
Shirebrook	... School Clinic, Cliff House	1st Thursday, a.m. and p.m., and each Saturday a.m.
Swadlincote	... School Clinic, Alexandra Rd.	3rd Wednesday and occasion- ally 4th Thursday, a.m. and p.m.

4. Dental Clinics.

<i>Clinic.</i>	<i>When held.</i>
Alfreton...	... Daily.
Ashbourne	... 2nd, 3rd and 4th Mondays. 1st and 3rd Thursdays. 2nd and 4th Saturdays.
Belper ...	... Tuesdays and Fridays.
Bretby Hall	... 4th Tuesdays.
Chesterfield	... Daily.
Chinley ...	... Tuesdays, Thursdays and Saturdays.
Derby ...	... Mondays, Wednesdays and Saturdays. 1st, 2nd and 3rd Tuesdays. 1st and 3rd Fridays. 2nd and 4th Thursdays.
Dronfield	... Tuesdays.

4. **Dental Clinics** (*continued*).

Heanor ...	... Mondays, Tuesdays and Saturdays.
Long Eaton ...	... Wednesdays, Thursdays and Fridays.
Matlock ...	... Mondays, Wednesdays and Fridays.
Swadlincote ...	... 1st, 2nd and 4th Wednesdays. 1st, 2nd and 3rd Thursdays. 2nd and 4th Fridays.
Shirebrook ...	... Daily.

5. **Orthopædic Clinics.**

ALFRETON.	School Clinic, Grange Street, Alfreton. Every Monday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m. Orthopædic Surgeon attends 2nd and 4th Mondays of each month.
CHESTERFIELD.	School Clinic, Brimington Road, Chesterfield. Every Wednesday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m. Orthopædic Surgeon attends 1st and 3rd Wednesdays of each month.
CHINLEY.	School Clinic, Lower Lane, Chinley. 2nd and 4th Mondays, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m. Orthopædic Surgeon attends 4th Monday of each month.
DERBY.	Tuberculosis Dispensary, County Yard, Derby. Every Thursday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m. Orthopædic Surgeon attends 2nd and 4th Thursdays of each month.
HEANOR.	School Clinic, Wilmot Street, Heanor. Every Friday afternoon, 2 to 4 p.m. Orthopædic Surgeon attends 1st Friday of each month.
LONG EATON.	School Clinic, 4, Nottingham Road, Long Eaton. Every Friday morning, 9.30 a.m. to 12.30 p.m. Orthopædic Surgeon attends 3rd Friday of each month.
MATLOCK.	School Clinic, Dean Hill House, Matlock. Every Tuesday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m. Orthopædic Surgeon attends 1st Tuesday of each month.
SHIREBROOK.	School Clinic, Cliff House, Shirebrook. Every Friday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m. Orthopædic Surgeon attends 4th Friday of each month.
SWADLINCOTE.	School Clinic, Alexandra Road, Swadlincote. Every Tuesday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m. Orthopædic Surgeon attends 3rd Tuesday of each month.

DIPHTHERIA IMMUNISATION CLINIC.

Dr. Graham, Medical Officer of Health of the Chesterfield Rural District, has held a special clinic at Staveley Middlecroft School for the immunisation of children against Diphtheria. During the year 1935, ten children have been given a course of prophylactic treatment with T. A. F. Six of these have been Schick tested some nine months after the injections: all gave negative results, indicating that immunisation was successful.

TUBERCULOSIS DISPENSARIES.

ALFRETON DISPENSARY.—Grange Street, Alfreton.

Open :—Fridays, 11.0 a.m. to 1.0 p.m. and 2.0 to 4.0 p.m.
Dr. W. H. Morton.

ASHBOURNE DISPENSARY.—Stone House, Dark Lane, Ashbourne.

Open :—2nd and 4th Thursdays of the month, 11 a.m. to 1 p.m.
Dr. C. Kingston.

BURTON DISPENSARY.—59, Milton Street, Burton-on-Trent.

Open :—Mondays, 10.30 a.m. to 12.30 p.m.
Dr. C. Kingston.

CHESTERFIELD DISPENSARY.—Brimington Rd., Chesterfield.

Open :—Tuesdays and Fridays, 10 a.m. to 12.30 p.m. and 2 to 5 p.m.

X-Ray examinations of Pulmonary Cases on 1st and 3rd Mondays of month only, 11 a.m. to 1 p.m.
Dr. A. N. Robertson.

CHINLEY DISPENSARY.—Lower Lane, Chinley.

Open :—Mondays, 11 to 1 and 2 to 5 p.m.
Dr. W. H. Morton.

DERBY DISPENSARY.—County Offices, St. Mary's Gate, Derby.

Open :—Fridays, 10 to 12.30 and 2 to 4 p.m.
Dr. C. Kingston.

GLOSSOP DISPENSARY.—Surrey Street, Glossop.

Open :—Wednesdays, 11 to 1 and 2 to 4 p.m.
Dr. W. H. Morton.

ILKESTON DISPENSARY.—Albert Street, Ilkeston.

Open :—Wednesdays, 11 to 1 and 2 to 4.30 p.m.
Dr. C. Kingston.

LONG EATON DISPENSARY.—The Hall, Long Eaton.

Open :—Tuesdays, 10 a.m. to 12 noon.
Dr. C. Kingston.

MATLOCK DISPENSARY.—Dean Hill House, Causeway Lane, Matlock.

Open :—Tuesdays, 10 to 1 and 2 to 4 p.m.
Dr. W. H. Morton.

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 :—

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Chesterfield & North Derbyshire			
Royal Hospital	1	1	2
Derbyshire Royal Infirmary ...	2	2	4

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

	<i>Males.</i>	<i>Females.</i>
Chesterfield & North Derbyshire Royal Hospital	Tuesdays, 4.30 to 6.30. Fridays, 2.30 to 4.30.	Tuesdays, 2.0 to 4.0. Fridays, 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.	Mondays, 3.0 to 5.0. Thursdays, 6.0 to 8.0.

The number of new cases attending the Venereal Diseases Centres during the year 1935 and the diseases for which they required treatment are as follows :—

TABLE XIX.

	<i>Syphilis.</i>	<i>Gonorrhœa.</i>	<i>Soft Chancre.</i>	<i>Total.</i>
Ashton-under-Lyne	3	5	...	8
Burton-on-Trent	13	20	1	34
Chesterfield	49	90	...	139
Derby	54	118	2	174
Huddersfield	...	1	...	1
Leeds	1	1	...	2
Manchester	3	12	...	15
Mansfield	9	11	...	20
Nottingham	22	42	...	64
Salford	...	1	1	2
South Shields	1	...	...	1
Stockport	2	6	...	8
Total	157	307	4	468

This total of 468 compares with 484 for last year.

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

<i>Treatment.</i>							£
Out-patients	...	...	...	...	...	...	2663
In-patients	...	...	...	...	...	...	192
Salvarsan substitutes, Drugs, etc.	...	...	...	...	...	...	471
Travelling expenses—Doctor	...	...	...	...	...	...	21
Do. —Patients	...	...	...	...	...	...	107
Printing, Postages, etc.	...	...	...	...	...	...	10
<i>Other Services.</i>							
Propaganda	...	...	...	...	...	...	291
Pathological Examinations	...	...	...	...	...	...	810
Gross Cost							4565
Receipts for Pathological work done for other Authorities							524
Net Cost							4041

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

	s.	d.
Chesterfield	3	2
Derby	1	8½
Nottingham	1	11

BACTERIOLOGICAL EXAMINATIONS.

During 1935, the number of specimens submitted by the General Practitioners was 2,888, whilst in 1934, 1933, 1932, 1931 and 1930, the number of specimens submitted was respectively 2,492, 2,111, 2,452, 1,709, and 1,613.

Details of the examinations made during 1935 are as follows:—

TABLE XX.

<i>Origin of Specimen.</i>	<i>Spirochætes.</i>		<i>Wassermanns</i>			<i>Gonococci.</i>		<i>Other Examinations.</i>	
	<i>Pos.</i>	<i>Neg.</i>	<i>Pos.</i>	<i>Neg.</i>	<i>Doubt'l</i>	<i>Pos.</i>	<i>Neg.</i>	<i>Pos.</i>	<i>Neg.</i>
Derbyshire } Derby Borough } Burton-on-Trent }	3	2	396	1962	94	66	224	86	55

Eighteen medical practitioners possessing the necessary qualifications and experience are entitled to receive free supplies of salvarsan and salvarsan substitutes for use within the County. These drugs are kept at the Central Office and issued as required.

During the year 1935, a total of 351 doses were supplied, as follows :—

Doses.	Novarseno- billon.	Bis- mostab.	Stabilarsan.	Metarseno- billon.	Total.
0·01 gm. ...	...	...	...	24	24
0·20 gm. ...	...	...	...	24	24
0·30 gm. ...	48	...	...	...	48
0·45 gm. ...	124	...	...	...	124
0·60 gm. ...	56	...	22	...	78
0·90 gm. ...	3	...	...	...	3
5 c.c. ...	...	50	...	...	50
Totals ...	231	50	22	48	351

MATERNITY AND CHILD WELFARE.

MIDWIVES ACTS, 1902—1926.

NUMBER OF MIDWIVES.—At the end of 1935 there were 279 midwives on the County Roll. 20 were *bona-fide* midwives, 182 were trained independent midwives holding the certificate of the Central Midwives Board, and 77 were District Nurse Midwives holding the C.M.B. certificates.

The following changes took place during the year :—

Deaths of Midwives	...	...	...	...	...	1
Midwives whose names were voluntarily removed from the Roll	...	...	...	...	...	1
No. of Midwives who have left the County, of whom 8 were District Nurse Midwives	...	...	...	...	...	27
No. who have done temporary duty for District Nurses	...	...	...	...	...	18
No. of new Midwives enrolled	...	...	...	...	...	18

Deaths following Child-Birth.—During 1935, information was received concerning 45 women who died following child-birth. The causes of death were as follows :—

Puerperal Fever	...	...	...	...	18
Toxæmia	...	...	...	...	6
Hæmorrhage	...	...	...	...	5
Cardiac Conditions	...	...	...	...	4
Pulmonary Embolism	...	...	...	...	4
Respiratory Conditions	...	...	...	...	3
Various	...	...	...	...	5

Hospital or Maternity Home accommodation was provided for 38 of these cases.

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 :—

TABLE XXI.

	1929	1930	1931	1932	1933	1934	1935
<i>Records received—</i>							
Medical Help ..	1856	1918	1645	1716	1735	1892	2010
Still Births ..	160	140	146	134	130	144	149
Deaths of Children ..	46	59	48	65	63	65	92
Deaths of Mothers ..	9	7	3	9	7	4	2
Laying-out the Dead	15	22	31	18	23	40	68
Liability to be a source of infection	107	130	84	74	92	118	130
Notification of Artifi- cial Feeding (within 10 days) ...	84	116	126	109	119	138	140
<i>Puerperal Fever—</i>							
Midwives' cases ...	21	20	17	11	9	10	13
<i>Puerperal Pyrexia—</i>							
Midwives' cases	46	44	36	27	31	33	23
<i>Ophthalmia Neonatorum</i>							
ALL Cases ...	56	65	46	57	48	36	35

The following is an analysis of the 2,010 Medical Help records received during 1935 :—

Records pertaining to the mother :—

Abortion or Miscarriage	...	...	130
Varicose Veins	...	...	11
Ante-partum Hæmorrhage	...	...	87
Deformed Pelvis	...	...	9
Discharge during Pregnancy	...	...	7
Organic Disease	...	...	6
Toxæmia	...	...	88
Retarded Labour	...	...	450
Abnormal Presentation	...	...	105
Retained Placenta	...	...	49
Lacerated Perinæum	...	...	453
Post-partum Hæmorrhage	...	...	49
Fits or Convulsions	...	...	9
Rise of Temperature	...	...	50
White Leg	...	...	2
Inflammation of the Breast	...	...	3
Prolapse of Cord	...	...	10
Prolapse of Uterus	...	...	1
Still Births	...	...	27

Records pertaining to the child:—

Injuries or Malformations	...	...	44
Dangerous feebleness	...	...	97
Eyes, discharging, etc.	...	...	92
Skin Eruption	...	...	5
Navel	...	...	2
Convulsions	...	...	7
Miscellaneous	...	...	217

Inspections made.

Inspection Forms marked " Good "	...	157
" " " " Satisfactory "	...	514
" " " " Indifferent "	...	57
" " " " Bad "	...	—
No. of other inspections and visits	...	427
No. of Midwives out when visited...	...	567
Total	...	1,722

Midwives suspended from practice for being in contact with:—

Puerperal Fever	...	...	4
Puerperal Pyrexia	...	...	13
Scarlet Fever	...	...	10
Measles	...	...	3
Diphtheria	...	...	2
Erysipelas	...	...	1
Septic Eye (self)	...	...	1
Boil on Chin (self)	...	...	1
Septic Thumb (self)	...	...	1
Ophthalmia Neonatorum	...	...	4
Skin Eruption	...	...	1
Vaginal Abscess	...	...	1

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

Puerperal Fever.—The following table shews the number of cases of Puerperal Fever which occurred in the practice of midwives during 1935:—

	Number of Midwives.	Number of Confinements.	Puerperal Fever Cases.	Cases per 1,000 Births.
Bona-fide Midwives ...	20	398	1	2·51
Trained Independent Midwives ...	182	3813	7	1·83
District Nurse-Midwives	77	1375	5	3·63
	279	5586	13	2·33

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 1935 and the case rate from each of these diseases per 1,000 births:—

	<i>Whole County.</i>		<i>M.C.W. Area.</i>	
Number of births	...	9,427		7,426
<i>Disease.</i>	<i>No. of Cases.</i>		<i>Case rate per 1,000 births.</i>	
	<i>Whole County.</i>	<i>M.C.W. Area.</i>	<i>Whole County.</i>	<i>M.C.W. Area.</i>
Puerperal Fever ...	23	22	2.43	2.96
Puerperal Pyrexia...	52	42	5.52	5.65
Total ...	75	64	7.95	8.61

The number of cases admitted to hospitals under the County Council Puerperal Fever and Puerperal Pyrexia Scheme during 1935 was as follows:—

Derbyshire Royal Infirmary	...	...	10
Jessop Hospital for Women	...	...	15
Burton upon Trent General Infirmary	...		1
High Peak Isolation Hospital	...	—	
Victoria Hospital, Worksop	...	—	
Derbyshire Hospital for Women	...	4	

A Consultant's opinion was requested in 5 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 Ophtha'mia Neonatorum during the year and the results of treatment are set out in the following table:—

<i>Notified.</i>	<i>Cases Treated.</i>		<i>Vision unimpaired</i>	<i>Vision impaired.</i>	<i>Total Blindness.</i>	<i>No. of Deaths.</i>
	<i>At Home.</i>	<i>In Hospital.</i>				
35	30	5	34	1	—	—

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

Year.	Births in whole County.	Cases attended by Midwives.	Medical Help summoned	Percentage of Medical calls.	Claims Received	Claims Paid.	Amount Paid.	Amount Received.	Net Cost.
							£ s. d.	£ s. d.	£ s. d.
1915	13,791	10,514	704	6.69	—	—	—	—	—
1916	13,109	10,139	818	8.07	—	—	—	—	—
1917	11,831	9,130	764	8.37	—	—	—	—	—
1918	12,103	9,321	793	8.51	—	—	—	—	—
1919	11,838	9,512	889	9.34	—	—	—	—	—
1920	15,572	12,222	1,250	10.20	—	—	—	—	—
1921	14,417	10,950	1,249	11.40	—	—	—	—	—
1922	13,095	10,168	1,229	12.10	202	131	249 0 0	38 0 0	211 0 0
1923	12,681	9,867	1,240	12.50	250	138	238 0 0	84 0 0	154 0 0
1924	12,615	9,199	1,353	14.70	286	141	267 0 0	66 0 0	201 0 0
1925	12,491	9,408	1,414	15.03	301	181	325 18 0	59 2 6	266 15 6
1926	11,845	8,058	1,565	19.42	518	233	366 5 6	95 1 6	271 4 0
1927	11,194	7,523	1,575	20.93	610	265	440 0 0	212 0 0	228 0 0
1928	11,112	7,892	1,675	21.22	679	281	466 16 0	217 0 0	249 16 0
1929	10,394	6,692	1,856	27.73	986	486	758 14 3	144 11 0	614 3 3
*1930	10,562	6,883	1,918	27.86	953	572	918 5 6	254 15 3	663 10 3
1931	9,231	6,105	1,645	26.94	776	642	1,012 5 9	243 1 9	769 4 0
1932	9,000	6,153	1,716	27.88	912	947	1,459 12 3	321 3 0	1,138 9 3
1933	8,515	6,102	1,735	28.44	995	920	1,453 16 9	554 14 0	899 2 9
1934	8,405	5,790	1,892	32.67	1,068	737	1,274 0 0	478 0 0	796 0 0
1935	8,409	5,586	2,010	35.98	1,108	868	1,381 0 0	294 0 0	1,087 0 0
						947	1,503 0 0	196 0 0	1,307 0 0
						1,033	1,671 5 6	423 1 2	1,284 4 4
						1,059	1,754 2 0	458 17 10	1,295 4 2

*—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 1934 was 4·51 per thousand births.

The following Table gives the Maternal Mortality rate in the County since 1915 :—

TABLE XXIII.

Year	Deaths from Puerperal Fever.	Rate per 1000 Births	Deaths from other accidents 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	2·53	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
1933	13	1·52	24	2·82	37	4·34	8,515
1934	18	2·14	20	2·37	38	4·51	8,405
1935	20	2·37	18	2·14	38	4·51	8,409

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 15.

Compensation to Midwives.—During the year 1935, 11 claims were received for compensation to midwives for loss of practice during suspension, and the amount paid was £8 11s. 6d.

Payment of Doctors' Fees under Section 14(1) of the Midwives Act.—During the financial year ended March 31st, 1936, 1,108 claims were received from medical practitioners. Of these, 1,059 were passed for payment amounting to £1,754 2s. 0d., 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 recoverable for the same period totalled £458 17s. 10d.

Provision of Free Milk.—During the financial year ended March 31st, 1936, 1,212 applications for free milk were received. Of these, 35 were not granted. The expenditure was £385 8s. 5d. for fresh milk and £47 11s. 4d. for dried milk.

NURSING HOMES REGISTRATION ACT.

During the year 1935, four applications for registration of premises were received. Two were refused on account of unsuitability of staff, one was withdrawn.

At the end of 1935 there were 13 Homes on the County Register, as follows :—

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

MEDICAL TREATMENT OF CHILDREN UNDER FIVE YEARS OF AGE.

There is available for children coming within the scope of the Maternity and Child Welfare Committee, the treatment of minor ailments, ear, nose and throat conditions, eye conditions, dental condition; 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 1935 was as follows :—

Ear, nose and throat conditions	...	...	46
Eye conditions	...	...	61
Dental conditions	...	...	1,049
Orthopædic treatment—			
In-Patients	...	...	48
Out-Patients	...	...	250

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.

The number of children on the Register at the end of 1935 was 72, and during the year 805 visits were paid by the Health Visitors.

HEALTH VISITING IN THE HOMES.

A summary of the work done by the Health Visitors during 1935 will be found in Table XL., pages 156-157.

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 1935 there were 52 Centres, 19 in Urban Districts and 33 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.

Details of these Centres are set out in the following Table:—

TABLE XXIV.
INFANT WELFARE CENTRES.

Address.	Frequency of Sessions.	Day and time of Meeting.	Average Attendance per Session.		No. Attended for First Time.		Present arrangement for medical supervision
			Expect- ant Mothers	Chil- dren.	Expect- ant Mothers.	Chil- dren.	
URBAN DISTRICTS.							
ALFRETON.							
Wesleyan Church, Somercotes	Fortnightly	2nd and 4th Mons., 2—4.30	—	39.26	—	70	Dr. Pooler, Fortnightly
School Clinic, Grange St., Alfreton	Weekly	Tues., 10—12, and 2 to 4.30	—	71.97	—	163	Dr. Carless, Fortnightly
Congregational Assem- bly Room, Riddings	Fortnightly	1st & 3rd Mons., 2—4	0.15	42.00	2	60	Dr. Pooler, Fortnightly
ASHBOURNE.							
St. John's Rooms	Weekly	Wednesday, 12—4	0.07	22.13	—	43	Dr. Pierce, Fortnightly
BAKEWELL.							
Market Hall	Do.	Tuesdays, 2—4	0.08	19.64	—	28	Dr. Bryan, 1st & 3rd
BELPER.							
Green Hall	Do.	Thursday, 10.30—4	0.08	35.80	4	162	Dr. Goodson, Fortnightly
BOLSOVER.							
Bainbridge Hall, New Bolsover	Fortnightly	2nd & 4th Thurs., 2.30—5	—	26.69	—	45	Dr. Pooler, Fortnightly
CLAY CROSS.							
The Vicarage	Weekly	Tuesday, 1.30—4	0.48	50.12	12	128	Dr. Pooler, Weekly
DRONFIELD.							
Cong. Chapel	Do.	Monday, 1—4	0.11	26.61	3	69	Dr. Morris, Monthly (1st)
HEANOR.							
School Clinic	Do.	Wednesday, 1—4	0.11	64.84	3	227	Dr. Goodson, Fortnightly
LONG EATON.							
4, Notts. Road	Twice Weekly	Mon. 10—12.30 & 2—4.30 Fri. 2—4.30	—	47.27	—	239	Dr. Goodson, Mondays, p.m.
MATLOCK.							
Dean Hill House	Weekly	Wednesdays, 2—4.30	—	40.27	—	111	Dr. Goodson, Fortnightly
NEW MILLS.							
St. James' Schoolroom	Do.	Thursdays, 2—4	0.08	21.20	1	39	Dr. Pemberton, Fortnightly
RIPLEY.							
Old Schools, Outram Street	Do.	Monday, 10—4	—	41.89	—	104	Dr. Macdonald, Weekly
Bethel Chapel Marchay.	Do.	Wednesdays, 10—12	0.66	34.72	13	86	Dr. Flint, 1st and 3rd
STAVELEY.							
Ebenezer Chapel, Barrow Hill	Do.	Wednesday, 2—4	0.04	38.50	1	76	Dr. Burke, 2nd
Staveley P.M. Chapel	Do.	Tuesdays, 1.30—4.30	—	63.14	—	138	Dr. Carless, Fortnightly
SWADLINCOTE.							
Alexandra Road	Do.	Monday, 2—6	—	44.13	—	160	Dr. Cochran, Monthly
WIRKSWORTH.							
Parish Room	Do.	Thursday, 2—4.30	—	23.80	—	54	Dr. Popham, 1st and 3rd

Address.	Frequency of Sessions.	Day and time of Meeting.	Average Attendance per Session.		No. Attended for First Time.		Present arrangements for medical supervision.
			Expectant Mothers	Children.	Expectant Mothers	Children.	
IL DISTRICTS.							
WELL. Swell Wesleyan Hall.	Fortnightly	2nd & 4th Tuesdays, 1—5	0·86	25·52	5	27	Dr. Bryan, 4th Tuesdays
Greave Hillage Hall.	Do.	2nd & 4th Wednesdays, 2—4	—	6·58	—	9	Weighing Centre
Wersage. The Institute.	Do.	2nd & 4th, Wed., 2—4	1·04	21·52	9	21	Weighing Centre
Weld. Parish Room.	Weekly	Monday, 2—4	—	14·15	—	15	Dr. Popham, 2nd and 4th
WELL. Wrebrook. Cliff House.	Do.	Wednesday, 2—4	—	64·78	—	162	Dr. Wear, Weekly
Wasley. Primitive Methodist Chapel.	Fortnightly	2nd & 4th Thursdays, 2—4.30	0·26	37·95	4	63	Dr. Wear, Fortnightly
Wingwith. Miners' Institute.	Do.	1st & 3rd Mon., 3—5	0·92	54·87	5	61	Dr. Wear, Monthly, 1st Mondays
Wishelf. Church Room.	Do.	1st & 3rd Ths., 2.30—4.30	—	34·37	—	34	Dr. Wear, Fortnightly
Wickwell. Newton Council School.	Do.	1st & 3rd Mon., 1—3	—	35·46	—	36	Dr. Wear, Monthly, 1st Mondays
Wilstown. Miners' Welfare Inst.	Do.	2nd & 4th Mon., 1—5	0·68	55·72	2	59	Dr. Wear, Fortnightly
Wixton. Prim. Meth. School,	Do.	2nd and 4th Wednesdays 11.0—1.0	0·26	30·82	—	63	Dr. Wear, Fortnightly
Wuth Normanton. Mount Tabor Chapel	Do.	2nd & 4th Tues. 1.30—4	0·22	48·34	—	74	Dr. Wear, Fortnightly
EN-LE-FRITH.							
Wimley. School Clinic	Do.	1st & 3rd Wednesdays, 2—4	0·17	10·30	4	12	Weighing Centre
Wyfield. Wesleyan Methodist Church.	Do.	2nd & 4th Tuesdays, 2—4	0·09	19·28	2	30	Dr. Bryan, Monthly
ERFIELD.							
Warrington. Wesleyan Schoolroom	Weekly	Mon., 1 to 4	0·25	48·93	8	74	Dr. Morris, 2nd and 4th
Wastone. Wesleyan Church	Fortnightly	Alternate Tues., 2—4	0·12	18·00	—	22	Weighing Centre
Wath. Holmwood Mission Room	Do.	Wednesday, 2.30—4.30	0·24	30·68	11	85	Dr. Pooler, Fortnightly
Wonebroom. Church Institute	Do.	Monday, 10—12.30	0·08	31·51	1	87	Dr. Pooler, Weekly
Wassmoor. P.M. School	Do.	Wednesday, 2—4	0·37	37·41	5	46	Dr. Pooler, Fortnightly

Address.	Frequency of Sessions.	Day and time of Meeting.	Average Attendance per Session.		No. Attended for First Time.		Present arrangements for medical supervision
			Expectant Mothers	Children.	Expectant Mothers	Children	
North Wingfield. Miners' Welfare.	Weekly	Thursday, 2.30—4.30	0.43	64.40	4	72	Dr. Pooler, 1st and 3rd
Brimington. Church Hall	Do.	Thursdays, 2—4	0.19	38.55	5	91	Dr. Burke, 2nd and 4th
Beighton. C. of E. Schoolroom	Do.	Tuesday, 2—4	0.02	35.04	1	127	Dr. Morris, 2nd and 4th
Killamarsh. Congregational Room	Do.	Wednesday, 2—4	0.04	24.35	2	102	Dr. Morris, 1st and 3rd
*Pilsley Miners' Welfare Barlow Hill.	Fortnightly	2nd & 4th Tuesdays, 2—4.30	0.61	48.23	2	33	Dr. Flint, 2nd and 4th
CLOWNE Clowne. P.M. Chapel.	Weekly	Tuesday, 1.30—4	—	27.06	—	82	Dr. Wear, Fortnightly
Creswell. Methodist School, Mansfield Road	Do.	Wednesdays, 2—4	0.02	33.53	1	135	Dr. Morris, 2nd and 4th
SHARDLOW. Sandiacre. Lenton Street School	Do.	2nd & 4th, Mondays, 2—4.15	—	30.71	—	52	Weighing Centres
Draycott. Co-op. Stores Committee Rooms	Do.	2nd & 4th Wednesdays, 1.30—4	0.09	21.47	1	27	Weighing Centres
Spondon. New Methodist Church	Do.	1st & 3rd Tuesdays, 11—4.30	0.43	26.35	2	57	Dr. Hendry, 1st and 3rd
Melbourne. Cooks Institute.	Weekly	Wednesday, 2—4.30.	0.15	27.80	2	54	Dr. Hendry, 1st and 3rd
Ockbrook. Church Room	Monthly	Last Monday each Month	0.27	17.90	1	18	Weighing Centres
Alvaston. Nunsfield House	Weekly	Thursdays, 2—4.30	0.34	25.89	9	83	Dr. Hendry, Wednesdays
†Chaddesden. Methodist Chapel.	Fortnightly	2nd & 4th Tuesdays, 2—4.30.	—	23.00	—	64	Dr. Hendry, 2nd and 4th

* Opened June 13th, 1935.

† Opened September 10th, 1935.

The Centre at Chaddesden has been so successful that it has been necessary to open it weekly. Permission to do this was granted in April, 1936.

Voluntary Infant Welfare Centres.—During the financial year ended March 31st, 1936, 4 Voluntary Infant Welfare Centres received a Grant of £10 each from the County Council, namely:—

Allestree.
Bradwell.
Chellaston.
Mickleover.

Ante-Natal Scheme.—The following Table gives details as to the sessions and attendances at the various Ante-Natal Centres during 1935 :—

TABLE XXV.
*Average
attendance of
expectant*

<i>Clinic.</i>	<i>No. of Sessions. (Half-day)</i>	<i>First Visits.</i>	<i>Subsequent Visits.</i>	<i>mothers per Session.</i>	<i>Post Natal Visits.</i>	<i>When held.</i>
Matlock ...	23	50	104	6.68	6	Alternate Fridays.
Shirebrook ...	92	212	509	7.83	23	Mondays.
Long Eaton	48	189	327	10.75	4	Tuesdays.
Derby ...	26	69	104	6.65	5	Alternate Tuesdays.
Alfreton ...	52	178	387	10.86	10	Alternate Fridays.
Swadlincote	23	77	113	8.26	24	Alternate Fridays.
Staveley ...	46	104	239	7.45	16	Alternate Thursdays.
Eckington ...	26	89	132	8.50	4	Alternate Thursdays.
Ashbourne ...	38	183	394	15.18	1	Alternate Saturdays.
Chesterfield	100	364	799	11.63	2	Wednesdays.
Ripley ...	23	77	125	8.78	24	Alternate Thursdays.
*Heanor ...	14	81	115	13.00	4	Wednesdays.
†Clay Cross...	—	—	—	—	—	Alternate Tuesdays.
	511	1673	3348	9.82	123	

*Opened on June 19th, 1935.

†Opened on May 12th, 1936.

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

Infant Life Protection.—Under the provisions of the Children and Young Persons Act, 1932, during 1935 the health visitors paid 354 visits to children cared for by foster-parents. As a general rule, visits are paid bi-monthly, and more frequently if necessary.

There were 73 children and 68 foster-parents on the Register at the end of 1935.

There were no deaths of infants taken for reward and no prosecutions during the year.

Dental Treatment of Expectant and Nursing Mothers.

<i>Number referred for treatment.</i>	<i>Number treated.</i>	<i>Number of dentures supplied.</i>
166	141	93

Home Helps.—Arrangements are in force 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. So far, this service has had little call upon it.

TABLE XXVI.
CLOSET ACCOMMODATION.

Districts.	Approximate number of Houses with				Number of Conversions.	
	Privy Middens.	Pail Closets	Water Closets	Trough and slop Water Closets	From Privy-middens to water Closets	From Pail-Closets to water Closets
URBAN.						
Alfreton	61	2,518	3,861	39	5	57
Ashbourne	24	30	1,019	288	1	—
Bakewell	142	51	586	17	5	—
Belper	50	443	3,355	111	10	7
Bolsover	92	55	2,268	6	8	12
Buxton (Boro') ...	31	238	4,060	8	11	11
Chesterfield (Boro')	121	—	15,697	251	25	30
Clay Cross	228	6	2,044	12	34	—
Dronfield	40	19	1,230	—	16	—
Glossop (Boro') ...	26	57	3,750	479	10	—
Heanor	74	363	6,013	—	4	172
Ilkeston (Boro') ...	13	181	8,432	307	—	2
Long Eaton	22	207	7,733	74	—	—
Matlock	640	714	3,395	52	16	24
New Mills	32	37	1,255	531	3	—
Ripley	102	1213	3,359	—	18	100
Staveley	68	92	3,763	85	7	2
Swadlincote	39	8	5,100	71	3	—
Wirksworth	200	143	969	4	—	14
<i>Urban Districts ...</i>	2,005	6,375	77,889	2,335	176	431
RURAL.						
Ashbourne	2,065	516	364	7	10	—
Bakewell	2,009	1,290	1,528	10	43	—
Belper	293	2,047	4,335	29	51	30
Blackwell	793	4,574	4,614	—	122	139
Chapel-en-le-Frith	1,464	900	5,072	45	39	1
Chesterfield	5,748	617	12,121	11	671	—
Clowne	1,467	1,079	2,071	—	158	34
Repton	1,791	1,187	4,088	7	114	10
Shardlow	454	2,172	13,491	47	147	277
<i>Rural Districts ...</i>	16,084	14,382	47,684	156	1,355	241
<i>Urban Districts ...</i>	2,005	6,375	77,889	2,335	176	431
<i>Whole County ...</i>	18089	20,757	125573	2,491	1,531	672

APPLICATIONS FOR LOANS
FOR PROVISION OF SEWERAGE AND SEWAGE DISPOSAL
WORKS AND WATER SCHEMES DURING 1935.

<i>District.</i>	<i>Date of Inquiry.</i>	<i>Amount of Loan.</i>	<i>Purpose.</i>	<i>Result of Inquiry.</i>
Ashbourne R.	May 16	£8,600	Water supply for Hartington, Heathcote and Biggin	Scheme sanctioned. Tenders advertised for.
Ashbourne R.	May 16	£11,050	Water supply for Brassington, Bradbourne and Parwich	Ministry advise District Council to find more suitable source of supply.
Bakewell R.	June 6	£7,766	Water supply for Winster, Elton, and Ivonbrook Grange	Scheme sanctioned. Work in progress.
Shardlow R.	July 4	£44,448	Water supply for many parishes	Scheme sanctioned. Work in progress.
Bakewell R.	July 26	£9,525	Water supply for Foolow, Grindlow, Great Hucklow, Little Hucklow, Wardlow	Scheme sanctioned. Work in progress.
Ashbourne R.	Aug. 15	£7,500	Water supply for Bradley, Hulland, & Hulland Ward	Sanction given for trial bore-hole to be sunk.
Wirks-worth U.	Aug. 28	£1,385	Water supply	Scheme sanctioned.
Wirks-worth U.	Aug. 28	£314	Sewerage	Scheme sanctioned.
Alfreton U.	Aug. 29	£1,800	Sewerage	Scheme sanctioned.
Blackwell R.	Oct. 2	£7,860	Sewerage and sewage disposal for South Nor-manton and Blackwell	Scheme sanctioned. Work in progress.
Repton R.	Oct. 4	£11,500	Sewerage and sewage disposal for Findern and Mickleover	Scheme sanctioned. Tenders advertised for.

The results of the following Inquiries, held in 1932, 1933, and 1934 which were not known at the end of 1934 are as follows :—

<i>District.</i> 1932.	<i>Date of Inquiry.</i>	<i>Amount of Loan.</i>	<i>Purpose.</i>	<i>Result of Inquiry.</i>
Chester- field R.	Mar. 10	£45,749	Water supply for Northern area	Not yet sanctioned.
Chester- field R.	Mar. 10	£44,304	Water supply for Southern area	Not yet sanctioned.
1933.				
Alfreton U.	July 6	£10,200	Improvements to water supply	Scheme sanctioned. Work in progress.
1934.				
Chester- field R.	July 10	£8,300	Sewerage and sewage disposal of Frecheville Estate	Scheme abandoned in favour of joint arrangement with Sheffield Corpora- tion.
Chapel-en- le-Frith R.	June 22	£3,000	New storage reservoir	Scheme sanctioned. Tenders advertised for.
Repton R.	Aug. 24	£7,600	Sewerage and sewage disposal for Castle Gresley	Scheme sanctioned. Original site ap- proved.

District and Sanitary Inspector's Name.	Closets and Ashpits.								Drainage.			Other Defects.												Totals					
	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.	Roofs, Eaves Spouts, and Down Spouts.	Sinks.	Insufficient Ventilation.	Windows.	Dampness.	Water in Cellars.	Water Supply.	Overcrowding.	Foul Condition of Houses.	Offensive Accumulations.	Animals improperly kept.		Pigsties.	Smoke Nuisances.	Urinals.	Nuisances not specified	
Alfreton C. Tingle.	Inspections made	80	10	230	...	16	4	275	6	300	40	102	100	35	18	35	52	6	4	19	14	5	...	1	15	2	1789	3158	
	Informal Notices served	40	5	50	...	8	...	141	3	173	18	52	52	25	16	35	50	2	4	6	12	3	...	1	2	2	60	760	
	Legal Notices served	...	...	...	...	...	...	...	...	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	
	Nuisances abated	40	5	57	...	8	2	141	3	163	15	54	105	40	19	81	133	2	4	6	12	3	...	1	13	...	500	1407	
Ashbourne D. Powell.	Inspections made	...	1	...	...	...	3	...	5	8	6	3	10	12	14	12	33	...	...	39	...	10	...	...	1	...	14	173	
	Informal Notices served	...	1	...	...	...	3	...	5	8	6	...	...	...	...	...	...	...	...	...	...	10	...	...	1	...	14	50	
	Legal Notices served	...	...	...	...	...	...	...	...	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Nuisances abated	...	1	...	...	...	3	...	5	8	6	...	...	...	...	...	...	...	...	...	...	10	...	...	1	...	14	50	
Bakewell T. W. Baker.	Inspections made	26	5	...	...	15	...	5	2	31	16	45	50	48	45	45	45	2	...	10	...	6	2	4	...	2	...	404	
	Informal Notices served	3	1	...	...	...	...	...	...	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	8	
	Legal Notices served	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
	Nuisances abated	26	5	...	...	15	...	5	2	31	16	...	5	3	...	...	...	...	2	...	10	...	6	2	4	...	2	...	134
Belper J. A. Statham.	Inspections made	...	35	42	...	12	3	500	65	70	20	78	20	1	...	24	6	...	...	...	...	20	2	1	...	3	20	40	962
	Informal Notices served	...	10	7	...	6	3	260	35	38	20	22	10	1	...	12	6	...	...	...	12	2	1	...	3	1	40	489	
	Legal Notices served	...	...	...	...	...	...	45	...	...	...	4	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	57	
	Nuisances abated	...	10	7	...	6	3	258	35	38	20	22	10	1	...	12	6	...	...	...	12	2	1	...	3	1	40	487	
Bolsover E. Booth.	Inspections made	87	37	42	12	62	10	287	32	116	189	35	147	49	51	116	135	18	17	12	37	14	12	28	47	6	87	1697	
	Informal Notices served	19	8	12	...	35	...	81	18	2	39	11	56	27	25	67	69	6	1	1	11	5	3	2	1	...	29	585	
	Legal Notices served	...	...	...	...	...	...	...	...	...	...	2	2	2	2	2	2	...	...	...	...	...	...	...	...	...	2	14	
	Nuisances abated	67	8	12	...	47	2	265	18	47	162	27	92	31	36	92	87	6	3	3	27	5	4	7	1	3	59	1113	

Table XXVII. continued.

URBAN DISTRICTS—continued.

District and Sanitary Inspector's Name.	Closets and Ashpits.								Drainage.				Other Defects.												Totals.				
	Defective Privies, Pail Closets and Ash pits.	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.	Roofs, Eaves Spouts, and Down Spouts.	Sinks.	Insufficient Venti- lation.	Windows.	Dampness.	Water in Cellars.	Water Supply.	Overcrowding.	Foul Condition of Houses.	Offensive Accumu- lations.	Animals improperly kept.	Pigsties.		Smoke Nuisances.	Urinals.	Nuisances not specified	
Buxton (Boro') W. O. Coates.	Inspections made	...	52	88	78	...	175	47	527	65	1280	353	157	126	25	21	163	35	...	...	56	168	69	127	58	71	98	483	4322
	Informal Notices served	...	2	6	9	...	17	4	6	3	67	16	23	25	2	2	20	3	...	...	3	19	7	4	...	...	2	30	270
	Legal Notices served	...	2	...	...	...	...	2	83	...	20	31	2	2	...	...	...	...	...	...	...	3	1	...	...	...	51	197	
	Nuisances abated	...	4	11	11	...	38	6	233	3	280	169	54	56	2	2	88	3	...	...	3	21	10	4	...	...	2	120	1120
Chesterfield (B.) A. S. Carter.	Inspections made	...	6	15	21	...	125	7	1359	39	167	260	226	411	96	3	72	70	16	...	4	84	76	31	12	154	6	323	3583
	Informal Notices served	...	...	3	7	...	41	1	425	13	55	85	64	129	30	1	25	25	5	...	1	18	25	10	4	11	2	105	1085
	Legal Notices served	...	3	3	...	...	1	2	42	...	1	2	17	12	3	...	...	...	...	...	...	...	...	...	...	...	...	4	90
	Nuisances abated	...	13	19	27	...	58	3	598	15	107	88	61	204	36	1	32	38	6	...	...	18	24	10	4	11	2	216	1591
Clay Cross W. A. T. Lynam	Inspections made	...	6	147	...	...	14	8	55	...	34	68	87	45	19	...	2	9	10	4	7	7	8	...	...	...	71	601	
	Informal Notices served	...	...	15	...	...	12	2	16	...	17	29	11	20	13	...	2	4	1	4	2	...	5	...	...	...	37	190	
	Legal Notices served	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Nuisances abated	...	6	34	...	...	12	14	41	...	28	61	82	29	13	...	2	4	3	4	3	3	5	...	...	...	39	383	
Dronfield R. C. Haycock.	Inspections made	...	30	48	...	...	30	20	32	2	70	42	11	7	2	17	15	20	2	47	50	13	2	7	14	...	52	13	546
	Informal Notices served	...	20	17	...	...	10	5	...	...	...	7	...	...	...	...	...	3	...	8	...	...	...	...	...	...	...	...	70
	Legal Notices served	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Nuisances abated	...	10	16	...	...	...	4	6	...	15	14	14	...	...	2	...	...	...	3	...	...	...	...	...	...	...	...	84

Glossop (Boro')	H. Dane.	Inspections made Informal Notices served Legal Notices served Nuisances abated	2849	20	...	470	25	470	16	970	625 620 600 220					350	300	10	12	280	136	32	...	10	1	...	25	8041																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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URBAN DISTRICTS—continued.

Table XXVII. continued

District and Sanitary Inspector's Name.	Closets and Ashpits.								Drainage.			Other Defects.												Totals.					
	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.	Roofs, Eaves Spouts, and Down Spouts.	Sinks.	Insufficient Ventilation.	Windows.	Dampness.	Water in Cellars.	Water Supply.	Overcrowding.	Foul Condition of Houses.	Offensive Accumulations.	Animals improperly kept.		Pigsties.	Smoke Nuisances.	Urinals.	Nuisances not specified	
Staveley H. Nuttall.	Inspections made	...	2	7	2	...	...	...	...	2	7	4	18	5	...	10	23	3	3	...	2	4	3	7	4	...	3	...	172
	Informal Notices served	...	1	1	1	...	...	...	...	...	...	2	9	2	...	5	8	2	2	...	1	3	1	2	1	...	1	...	388
	Legal Notices served	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
	Nuisances abated	...	1	1	1	...	5	343	...	...	...	...	2	9	2	5	...	8	2	...	1	3	1	2	1	...	1	...	388
Swadlincote E. L. Austerberry	Inspections made	...	301	9	...	...	...	...	...	8	20	23	34	6	6	50	29	3	3	4	3	2	3	...	51	12	13	109	4639
	Informal Notices served	...	...	3	...	...	...	...	...	4	9	12	19	4	5	27	14	1	1	2	1	1	2	...	3	4	...	57	252
	Legal Notices served	...	212	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	212
	Nuisances abated	...	130	3	...	...	...	...	...	5	10	14	21	4	5	31	19	1	1	2	1	...	2	...	3	6	...	64	469
Wirksworth C. Frobisher.	Inspections made	...	172	41	16	23	...	...	...	24	57	146	121	92	74	102	77	9	124	26	29	18	16	14	14	9	6	148	1556
	Informal Notices served	...	110	...	12	14	...	...	...	19	...	90	75	80	58	62	63	...	...	19	2	4	7	2	...	...	...	70	711
	Legal Notices served	...	...	31	...	...	...	...	...	...	40	23	35	14	31	27	56	6	22	12	19	14	4	3	4	2	26	415	
	Nuisances abated	...	38	31	12	14	...	...	...	7	37	21	23	20	22	27	27	2	2	26	4	10	14	4	3	4	2	24	486

RURAL DISTRICTS.

Ashbourne J. H. Wheelodon H. Litchfield.	Inspections made	...	30	...	...	...	18	...	25	...	40	75	20	28	18	16	...	...	...	35	10	6	50	...	30	...	10	4	415	
	Informal Notices served	...	19	7	...	...	17	...	29	...	18	35	15	7	36	18	28	27	36	...	20	3	8	24	...	4	...	3	41	407
	Legal Notices served	...	...	...	...	...	...	...	...	...	1	2	...	1	4	...	4	4	4	...	...	...	1	...	1	...	...	25	47	
	Nuisances abated	...	11	4	...	10	17	...	29	...	14	27	15	3	28	12	19	18	24	...	17	1	7	25	...	5	...	3	37	326

Bakewell R. Hayhurst.	Inspections made	...	81	60	...	12	16	54	28	17	34	80	38	22	72	39	33	29	39	...	96	...	...	12	2	6	...	5	124	899
	Informal Notices served	...	31	27	...	4	5	18	14	10	22	38	22	17	34	22	21	15	22	...	34	...	...	10	1	2	...	3	48	420
	Legal Notices served	...	1	...	...	...	...	...	...	...	...	1	...	...	1	1	1	1	1	...	...	...	...	...	...	...	...	...	1	8
	Nuisances abated	...	35	27	...	4	5	18	14	10	12	38	22	9	14	12	11	12	12	...	34	...	...	10	1	2	...	3	48	353
Belper J. Laycock W. G. Cooper	Inspections made	...	174	51	40	...	63	28	193	33	...	94	112	17	96	29	8	24	39	...	67	46	9	102	6	47	...	22	53	1353
	Informal Notices served	...	111	51	24	...	35	5	76	15	...	72	70	7	69	16	5	17	22	...	19	8	4	14	3	3	...	...	48	694
	Legal Notices served	...	1	23	11	...	...	...	1	...	...	14	...	...	34	...	...	...	...	...	...	...	...	...	...	...	...	...	27	111
	Nuisances abated	...	96	51	30	...	37	16	120	17	...	76	92	7	85	17	7	15	23	...	18	7	4	14	3	31	...	...	43	809
Blackwell R. Clarkson. I. N. Creear.	Inspections made	...	302	84	146	...	39	4	424	132	15	258	226	308	515	66	119	268	381	3	61	...	49	135	25	22	5	48	655	4290
	Informal Notices served	...	77	2	1	...	9	1	96	26	...	65	66	42	43	13	16	1	44	1	...	...	1	14	14	11	...	...	22	565
	Legal Notices served	...	15	...	...	...	...	...	7	...	1	33	2	76	88	13	5	48	49	...	2	...	...	...	...	...	...	...	14	353
	Nuisances abated	...	251	122	139	...	29	1	243	66	8	213	178	207	293	47	88	224	287	1	15	...	24	92	15	10	1	4	497	3055
Chapel-en-le- Frith T. Dinsdale.	Inspections made	...	33	70	...	3	4	13	91	...	6	94	62	124	49	24	55	109	205	4	192	...	3	74	14	2	...	4	471	1706
	Informal Notices served	...	9	2	...	1	3	8	43	...	2	38	26	6	11	2	13	30	29	1	22	...	1	35	3	1	...	...	70	356
	Legal Notices served	...	7	23	...	...	...	...	23	...	1	6	...	...	6	...	6	5	7	...	3	...	...	4	...	...	...	...	3	94
	Nuisances abated	...	6	29	...	1	3	8	63	...	1	40	27	60	7	14	18	177	88	1	82	...	1	37	3	1	...	...	209	876
Chesterfield T. W. Binns P. Waterfall	Inspections made	...	23	2371	21	...	9	14	762	11	...	567	122	464	149	73	1	15	70	81	32	25	12	63	23	9	...	13	965	5895
	Informal Notices served	...	22	667	21	...	9	9	761	11	...	432	119	364	130	71	1	13	32	55	34	15	9	46	14	6	...	13	942	3796
	Legal Notices served	...	2	29	...	...	...	3	3	...	...	8	4	14	5	3	...	...	13	...	1	...	1	...	...	1	...	...	21	108
	Nuisances abated	...	23	671	21	...	9	9	761	11	...	534	123	448	142	67	1	7	25	57	32	13	6	46	14	7	...	13	962	4002
Clowne W. J. Gallagher	Inspections made	...	420	158	34	...	21	...	406	54	52	91	83	54	181	31	...	...	...	1	7	...	...	4	...	16	...	...	...	1613
	Informal Notices served	...	72	158	34	...	21	...	406	54	52	91	83	54	181	31	...	...	...	1	7	...	...	4	...	16	...	...	...	1265
	Legal Notices served	...	...	...	...	...	12	...	...	...	12	...	...	12	12	12	...	...	...	...	...	...	...	...	...	...	...	...	...	60
	Nuisances abated	...	72	158	34	...	21	...	406	54	52	91	83	24	160	19	...	...	...	...	1	7	...	4	...	16	...	...	...	1202
Repton J. Crabtree. G. V. Peace.	Inspections made	...	135	229	36	37	21	15	228	33	42	152	90	34	303	115	119	145	163	5	461	32	12	212	11	12	9	15	339	3005
	Informal Notices served	...	64	83	16	8	13	5	99	14	17	89	64	17	133	49	51	74	85	2	199	6	3	111	4	4	4	4	141	1359
	Legal Notices served	...	17	14	...	...	...	...	24	...	3	6	16	3	26	14	22	19	30	1	90	1	...	...	1	...	...	1	28	316
	Nuisances abated	...	87	134	10	9	15	8	227	13	15	79	59	16	144	50	57	84	78	2	242	5	3	101	3	4	3	3	131	1582

RURAL DISTRICTS—continued.

Table XXVII. continued.

District and Inspector's Name.	Closets and Ashpits.										Drainage.			Other Defects.												Totals.				
	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.	Roofs, Eaves Spouts, and Down Spouts.	Sinks.	Insufficient Venti- lation.	Windows.	Dampness.	Water in Cellars.	Water Supply.	Overcrowding.	Foul Condition of Houses.	Offensive Accumu- lations.	Animals improperly kept.	Pigsties.	Smoke Nuisances.		Urinals.	Nuisances not specified.		
Shardlow F. G. Forman.	Inspections made	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Informal Notices served	41	594	1042	4	547	160	1288	415	8	1033	279	566	987	584	55	370	212	...	599	9	33	83	4	21	22	60	445	9461	
	Legal Notices served	10	63	127	8	277	26	182	198	2	201	156	137	441	106	20	163	72	...	198	2	3	37	3	11	11	1	227	2682	
	Nuisances abated	6	2	10	...	...	...	10	2	...	7	...	19	12	10	18	15	20	...	19	...	3	...	...	...	...	...	...	15	168
		15	145	230	2	282	42	402	201	2	296	139	139	450	144	14	170	69	...	236	2	8	41	3	9	11	6	241	3299	

WATER SUPPLIES.

The following is a brief summary of the conditions existing in the various Sanitary Districts at the present time :—

URBAN DISTRICTS.

Alfreton.—This district is supplied by the Local Authority, the Derwent Valley Board, and the Butterley Co. The U.D.C. have a 12-inch borehole at Lindway, 126 feet deep, the water being pumped to the Lindway Reservoir. Filters are provided at Lindway. The supply can be augmented by water from the Wingfield Manor Colliery, but this water also requires filtration. The hardness is 35.8.*

The U.D.C. have sunk a borehole at Dethick with the object of augmenting the supply, and a test pumping gave 564,000 g.p.d. This water is satisfactory both chemically and bacteriologically, the total hardness being only 7.14. The borehole is 580 feet deep and the water level is 46 feet below the surface. An Inquiry for loan sanction was held in September, 1933. The work is now in progress.

Ashbourne.—This district is supplied by the Local Authority. The source of the supply since 1929 is two 24-inch boreholes sunk 300 feet into the Bunter Sandstone, at Rodsley. The water is pumped to the existing reservoirs on the Derby Road, Ashbourne, a distance of four miles. Here the water is softened—a recent analysis showing the hardness to be 9.5 as against 28.0 before softening.

The cost of softening is 3d. per 1,000 gallons.

The Derby Road area recently added to the U.D. is now supplied with water by means of an automatic “booster,” electrically operated.

Consumption, 21 gallons per head per day.

Bakewell.—The supply is drawn from springs in the millstone grit at Beeley Moor, between Limetree Wood and Raven Tor at about 980 feet O.D. The average yield is about 120,000 to 150,000 g.p.d. Seven Springs in Manner's Wood to the east of the town supply the Station, The Kennels, Brooklands and the neighbouring premises. The water is satisfactory in quantity and quality; its hardness is low—under four parts per 100,000.

The Haddon Hospital area water supply was improved in 1935 by the provision of a 20,000 gallon balancing tank in Monyash Road, above the Hospital.

Belper.—This district obtains its water from springs in the grit at Springwood, Bulls Moor, Ladywell and Belper Lane. The

*Throughout this section hardness is given in parts per 100,000 unless otherwise stated.

average yields are approximately 77,000, 40,000, 32,000 and 17,000 g.p.d. respectively. Water is also obtained from the deep well at the water works pumping station.

There are four reservoirs, namely—Bessyloan with a capacity of 400,000 g.; Bulls Moor 275,000 g.; Springwood 275,000 g.; and Ladywell 38,000 g.

Chemical analyses made in September, 1935, gave the following results :—

		<i>Temporary Hardness.</i>	<i>Permanent Hardness.</i>	<i>Total.</i>
Deep well at water works	...	15.7	5.0	20.7
Bulls Moor Reservoir	...	1.7	8.8	10.5
Spring at Springwood Reservoir (Slightly acid in reaction).		3.8	7.1	10.9
Mixed water Springwood Reser- voir	... ..	12.3	5.7	18.0
Ladywell Reservoir	...	11.6	5.4	17.0

All were satisfactory from a chemical standpoint.

Bacteriological examinations in November, 1935, gave the following results :—

	<i>Bacteria per C.C. on Agar.</i>		
	<i>in 24 hrs. at 37° C.</i>	<i>in 72 hrs. at 20° C.</i>	
Bulls Moor Reservoir...	None	56	Not in 150 c.c.
Springwood Reservoir...	8	176	Present in 1 c.c.
Ladywell Reservoir ...	10	2,560	Present in 3 c.c.
Deep well, Water works, (Sept., 1935) ...	3	3	Not in 150 c.c.

Belper U.D.C. also supplies the following districts with water :—

Heage (Ripley Urban) and the parishes of Denby, Kilburn and Holbrook in Belper R.D., and Morley Parish in Shardlow R.D.

Bolsover.—This district is combined with Chesterfield Borough for purposes of water supply under the Chesterfield and Bolsover Water Act, 1932, which came into force in April, 1933.

In Bolsover, water is derived from the Whaley Well, 80 feet deep; from the L.N.E. Railway tunnel, also a 140 feet borehole near Bolsover Station. The water is softened by the Kennicott Base Exchange process. The tunnel supply is retained only as a standby in case of emergency.

A new 10-inch to 11-inch main was laid in 1934 to connect up the Bolsover and Chesterfield systems. It connects the Water Tower (150,000 g.) at Bolsover with the Corporation main at Hady Hill and passes through Sutton-cum-Duckmanton and Calow parishes in the Chesterfield R.D.

Hillstown is not now supplied by Bolsover U.D.C., the supply being connected up with the Blackwell R.D.C. Meden Valley Scheme.

Bolsover U.D.C. in 1932 took over the mains supplying the Model Village, Bolsover, from the Bolsover Colliery Co., Ltd.

There has been no shortage.

The water is satisfactory both chemically and bacteriologically.

Buxton Borough.—The Borough is supplied from reservoirs at Stanley Moor, Burbage, Hogshaw and Black Edge, fed by moorland catchment areas. Practically the whole of the district is supplied by the local authority and there is no shortage.

Chesterfield Borough.—The water systems of the Borough are combined with those of Bolsover U.D. under the Chesterfield and Bolsover Water Act, 1932.

LINACRE AND HOLME BROOK WORKS.—These works consist of the Upper, Middle, and Lower Linacre reservoirs, filtration works, pumping station and a borehole in the millstone grit at Linacre, and a pumping station and borehole at Holme Brook in the lower coal measures.

The gathering ground is approximately 1,700 acres and the storage capacity is over 247,000,000 g.

The water from the supply to the Linacre Reservoir shows a total hardness of 8.0.

HOLYMOORSIDE WORKS.—This scheme consists of boreholes in the millstone grit at Whispering Well and a borehole in the Chatsworth grit. There is a service reservoir of 550,000 g. capacity at Whispering Well.

An analysis on the 4th February, 1935, showed a total hardness of 8.0 and a bacterial examination showed 'Coli' present in 12 c.c.

In 1934, the Borough supply was augmented by water from the Whaley source at Bolsover. As stated above, the Borough and the Bolsover U.D.C. schemes are joint.

Clay Cross.—This district is supplied by the local authority. The water is derived from Woferley Springs, the Press Brook and Grinder's Well. The Press Brook and the Grinder's Well water are filtered.

A borehole was put down in 1904 to a depth of 297 feet into the millstone grit. The Woferley Springs rise from the lower coal measures.

The consumption is 23 g.p.h.p.d., of which $1\frac{1}{2}$ gallons is for trade purposes.

From August to October, 1934, the supply was shut off from 11 p.m. to 5 a.m. daily.

An analysis made in October, 1935, showed a hardness of 16.7 and a bacteriological examination made in August, 1934, showed B.Coli present in 35 c.c.

The U.D.C. is considering the provision of additional filter bed area at the Water Works.

Dronfield.—The district is supplied with water by the Chesterfield R.D.C. from their northern scheme. The mains in the area of the old district are under the control of the U.D.C. In April, 1935, the District was extended by the addition of Coal Aston, Dronfield Woodhouse and parts of Holmesfield and Unstone. These newly added areas are also supplied from the Chesterfield R.D.C.'s Northern scheme.

Glossop Borough.—This district is supplied by the local authority. There are reservoirs at Swineshaw (56,000,000 g.), Hadfield (two, 7,000,000 g.), and small reservoirs at lower end of Padfield Road, at Greenwood's Field, Park Road, and the Gamesley Reservoir.

The reservoirs are fed by moorland springs.

The Hadfield Reservoirs water is filtered by means of four eight-foot diameter Bell's mechanical pressure filters and treated with lime. A lime treatment plant is also provided for the Swineshaw reservoir water.

Bacteriological examinations were made in October, 1935, with the following results:—

<i>Source.</i>	<i>Bacteria per c.c. on Agar.</i>		<i>B.Coli.</i>
	<i>In 24 hrs. at 37° C.</i>	<i>In 72 hrs. at 20° C.</i>	
Swineshaw Reservoir ...	20	110	Present in 150 c.c.
Hadfield Reservoir			
(filtered) ...	29	124	Present in 35 c.c.

Heanor and Ilkeston.—These two districts are supplied with water by the Ilkeston and Heanor Water Board; part of the Urban District of Ripley is also supplied from the same source. The water-works are at Whatstandwell, and consist of pumping, softening and filtration plants. The water mainly used is from the Meerbrook Sough, which takes water from the old lead mine levels under Wirksworth and Middleton cut in the carboniferous limestone and millstone grit. The water is pumped from the works after softening and filtering to Chadwick Nick reservoir, 700 feet O.D., and thence it gravitates to service reservoirs at Codnor, Shipley, and Tag Hill. At the works there are, in addition to the Sough water, two boreholes, one 30 inches diameter, 174 feet deep, and the other 10 inches in diameter and 130 feet deep.

The Board is allowed to take from the Meerbrook Sough up to 3,000,000 gallons per day, which, with a supply of 750,000 gallons per day from the two boreholes, gives an available supply of

3,750,000 gallons per day. The maximum demand up to the present has been 2,300,000 gallons per day. The available quantity is ample, and the quality of the water as supplied from the works is satisfactory in every way.

The Meerbrook Sough raw water for many years was free from contamination, although the sewage of Middleton-by-Wirksworth was discharged into old lead mine shafts. The outlet for these mine shaft waters must have been in a northerly direction and away from the Meerbrook Sough. Eventually the mine shaft used for the discharge of the bulk of the Middleton sewage became choked. Explosives were used, and the shaft was usable again for a few months; then the outlet again became choked. Another adjacent old mine shaft was then used and possibly the outlet of the water in this shaft was via the Meerbrook Sough because coli was found in the raw water of the Sough. Rigorous colour tests proved that the shaft and the Sough were connected. Consequently, in 1931, a sewer was laid to take the Middleton sewage into Wirksworth sewerage system. Since this was done, the Meerbrook Sough untreated water has been free from contamination. The Sough water has a hardness of about 30, whilst the 10-inch borehole water hardness is about 19, and that of the 30-inch borehole is 18. After treatment the hardness is 7.7.

The water works were enlarged in 1932 by the addition of a large electric pump house and extra boiler house, together with additional filters and softening tanks. The filters, 14 in number, are the design and patent of the Board's Resident Engineer, Mr. Alfred E. Smith.

At the time the works were enlarged, a duplicate rising main to Chadwick Nick Reservoir was laid and an extra main laid from the reservoir through Ripley to Codnor Park Market Place. Special care was taken in the design of the main to prevent serious defects arising in the areas liable to subsidence.

The method of treatment of the lime after use has also been improved.

In 1932, an additional concrete roofed-in reservoir having a capacity of 1,300,000 g. was constructed at Codnor by the Heanor U.D.C.

Later, the Ilkeston Borough Council constructed a similar reservoir at Shipley, to hold 2,000,000 g.

The existing reservoirs now are :—

	<i>Capacity.</i>	<i>O.D.</i>
Chadwick Nick	1,300,000	700
Tagg Hill	200,000	428
Codnor No. 1 (Heanor U.D.C.) ...	390,000	489
Codnor No. 2 (Heanor U.D.C.) ...	1,300,000	515
Woodside (Shipley) (Ilkeston Boro')	950,000	382
Shipley (Ilkeston Boro')	2,000,000	404
TOTAL	6,140,000	

SAMPLES OF WATER TAKEN DURING 1935.

Date.	Source.	No. of bacteria per c.c. on Agar		Presence of <i>B. Coli.</i>
		after 24 hrs. at 37° C.	after 72 hrs. at 20° C.	
Feb.	10" borehole ...	1	2	Not in 150 c.c.
"	30" borehole ...	1	Nil	" 150 c.c.
"	Meerbrook Sough	Nil	1	" 150 c.c.
"	Tap water, treated	Nil	1	" 150 c.c.
				after 48 hrs.
April	10" borehole ...	Nil	3	Not in 160 c.c.
"	30" borehole ...	5	Nil	" 160 c.c.
"	Meerbrook Sough	2	Nil	" 160 c.c.
"	Tap water, treated	1	Nil	" 160 c.c.
July	10" borehole ...	5	2	" 200 c.c.
"	30" borehole ...	Nil	10	" 200 c.c.
"	Meerbrook Sough	Nil	2	" 200 c.c.
"	Tap water, treated	1	8	" 200 c.c.
Oct.	10" borehole ...	Nil	5	" 150 c.c.
"	30" borehole ...	Nil	2	" 150 c.c.
"	Meerbrook Sough	Nil	3	Present in 200 c.c.
"	Tap water, treated	Nil	1	Not in 200 c.c.
Dec.	10" borehole ...	2	1	" 200 c.c.
"	30" borehole ...	2	Nil	" 200 c.c.
"	Meerbrook Sough	Nil	4	" 200 c.c.
"	Tap water, treated	2	Nil	" 200 c.c.

These samples show a high degree of bacteriological purity which is constantly maintained.

Long Eaton.—This district is supplied by the local authority and the Derwent Valley Water Board.

The works of the local authority are at Stanton-by-Bridge and consist of a well with headings and boreholes in the millstone grit. The remainder is obtained from the D.V.W.B. The U.D.C. also supplies Stanton-by-Bridge, Castle Donington and Kegworth which are outside the urban district.

A bacteriological examination in April, 1935, of the Stanton water showed :—

Number of bacteria per c.c. on Agar after 24 hrs.							
at 37° C.	...	...	...	...	...	...	8
Ditto after 48 hrs.	at 20° C.	...	...	...	...	...	8
B. Coli present in 150 c.c.							

A chemical analysis made in September, 1935, showed the hardness to be, temporary 24·6, permanent 13·8, total 38·4.

Owing to a shortage of water during the last few years, a scheme has been prepared for further augmenting the supply from the D.V.W.B. by means of a 10-inch main to a reservoir of 500,000 g. capacity at Risley.

In 1934, a total of 198,896,520 gallons of water was supplied, of which 106 millions came from Stanton, $56\frac{1}{2}$ millions from the D.V.W.B. and remainder from Nottingham Corporation, a borehole in Bennett Street, Long Eaton and a borehole at the Long Eaton Gas Co.

Matlock.—The Urban district is supplied by the local authority. The new Urban District now includes the former urban districts of Bonsall, North Darley and South Darley.

MATLOCK is supplied from springs in the millstone grit at Matlock Moor and the Wolds, and from a borehole having a total yield of 215,000 g.p.d. The water is collected in a 12,000,000 g. reservoir at the Wolds.

The MATLOCK BATH area was formerly supplied by springs at Hackney, but is now supplied from the North Darley source and the Cromford supply.

STARKHOLMES, HEARTHSTONE, HIGH LEAS and TANSLEY are supplied from small reservoirs or tanks fed by springs in the millstone grit.

MATLOCK CLIFF area is now supplied from the Tansley source.

A piped supply is taken to CROMFORD area from tanks supplied by several springs at Willow Well and Black Rocks. Some of this water is pumped at Temple Walk, Matlock Bath, to the Upperwood Reservoir at a height of 760 O.D. to supply the higher parts (Gilderoy Road, etc.) of Matlock Bath.

BONSALL is supplied from three small covered reservoirs fed by springs and carboniferous limestone formation; one reservoir is near Manor Farm, one at Upper Town and the other which is known as "Boiling Pot." The hamlet of Slaley is supplied by a small reservoir (3,000 g.) fed by a spring. This water is pumped from a collecting chamber to the reservoir.

NORTH DARLEY is supplied mainly from the Sydnop Reservoir which is fed by springs which rise from the millstone grit. A filter is provided here. The yield of the Sydnop Springs is about 490,000 g.p.d.

LITTLE ROWSLEY is supplied from springs in the grit at Rowsley Wood.

TINKERSLEY is supplied from springs in Copley Wood.

SOUTH DARLEY receives its supply from springs in the millstone grit on Stanton Moor. The water is plumbo-solvent and tin-lined pipes are used.

The following table gives the result of the examinations of the various waters :—

Source.	Date.	<i>Bacteria per c.c. on Agar</i>		<i>B. Coli.</i>	<i>Hardness.</i>		
		after 24 hrs. at 37° C.	after 48 hrs. at 20° C.		T.	P.	Total.
Matlock Moor	1931	4	46	Not in 150 c.c.	0.71	4.43	5.14
Sydnope	... 1931	Nil	Nil	Not in 150 c.c.	0.86	4.43	5.29
South Darley	1933	1	4	Not in 150 c.c.	0.68	4.03	4.71
Bonsall—							
Manor Resr.	Feb., 1935	60	156	Present in 1 c.c.	16.32	7.28	23.60
	Nov., 1935	4	154	Present in 2 c.c.			
Upper Town Resr.	,,	4	8	Not in 150 c.c.			
" Boiling				Not in			
" Pot Resr.	,,	2	2	150 c.c.			
Slaley	... 1931	4	32	Not in 150 c.c.	14.74	6.76	21.50
Sunnyside Spring,							
Tansley	... 1933	—	—	—	0.26	3.77	4.03
Knabhall Resr., Tansley	1934	—	—	—	0.2	2.8	3.0

New Mills.—This district is supplied by the local authority. The sources of supply are as follows :—

- (a) Ball Beard Reservoir, 1,166,000 g. ; 762 O.D. fed by surface water.
- (b) Low Leighton Reservoir, 1,190,000 g. ; 502 O.D. also fed by surface water.

The supply to these reservoirs can be augmented when required, by pumping from the Gow Hole Colliery Adit, which has a yield of 200,000 g.p.d.

This adit water is very hard—42.4 parts per 100,000.

- (c) Moorlands Tank—5,000 g.

New Mills water is filtered by means of Bell's pressure filters.

The area of constant supply is limited to about the 600 ft. contour. A scheme for the supply of the higher parts of New Mills was turned down by the Ministry of Health after an Inquiry on the 19th November, 1931, when it was proposed to take water from the Hayfield—Mellor main at Jordanwall Nook as it passes through New Mills district.

The U.D.C. have an arrangement by which they can take 25,000 g.p.d. from the Stockport Corporation's new main which has recently been laid in connection with their Goyt Valley Scheme.

Ripley.—The whole of this district is supplied either by the Ilkeston and Heanor Water Board, the D.V.W.Bd., or the Belper Urban D.C. The mains of the two Boards pass through the district.

The Bull Bridge area has been disconnected from the Belper Rural District Council's main and is now supplied by the Ripley U.D.C.'s system through the Belper Urban District Council's scheme.

Staveley.—This new Urban District takes its supply of water from the Northern Scheme of Chesterfield R.D.C.

Swadlincote.—The district is supplied by the Swadlincote and Ashby Joint Water Committee, with a pumping station and softening plant at Milton and a 3,000,000 g. reservoir at Manchester Lane, Boundary.

The water is derived from a heading in the bunter sandstone at Milton, from which it gravitates to the pumping station. The Water, after softening to 8°, is pumped to the reservoir.

The two old reservoirs on the Ashby Road, near Woodville, are now disused.

Whaley Bridge.—This is a new district formed of parts of Cheshire and Derbyshire, which came under the administration of Derbyshire on the 1st April, 1936.

The district has several sources of water supply :—

DISLEY portion is supplied partly from the Stockport Corporation's Sett Reservoir main.

YEARDSLEY-CUM-WHALEY is supplied from reservoirs at Diglee, Stonehead and Fox Home, also from the Chapel-en-le-Frith system.

TAXAL portion receives its supply from small reservoirs in the area.

FERNILEE is supplied from Nook Reservoir, Fernilee Reservoir and Lee Head Reservoir.

All the above systems can be connected up as desired.

The new main of the Stockport Corporation's Goyt Valley scheme passes through the centre of the district.

Wirksworth.—The local authority supplies the district. The supply is derived from underground springs issuing from the Lower Kinderscout Grit, collected in a covered reservoir above Bream-fields on Wirksworth Moor. The overflow from this reservoir is collected in three open reservoirs just below the covered reservoir.

A new borehole at Wigwell was brought into use in 1934. The water here is pumped to the older works.

Negotiations are in progress for providing Middleton-by-Wirsworth with a more satisfactory supply from the Dunsley Spring in Via Gellia. Middleton is a parish recently added to the Urban District from Ashbourne R.D.

RURAL DISTRICTS.

Districts and Parishes.

Sources of Supply.

Ashbourne.

ALKMONTON.	Shallow wells. No shortage.
ATLOW.	Shallow wells and rain water. The proposed scheme for Hulland when completed could supply Atlow.
BALLIDON.	Shallow wells and rain water. (See "Bradbourne.")
BIGGIN.	Rain water collected in meres. A new scheme for Hartington and Biggin has been sanctioned and the work is in progress.
BOYLESTONE.	Springs. A ram supplies several farms belonging to the County Council. A new scheme has been prepared for the County Council to obtain water from a borehole to be sunk at Mount Pleasant, Sutton-on-the-Hill.
BRADBOURNE.	Wells. A new scheme was prepared in 1935, for obtaining water from Havenhill Dale, but the Ministry of Health are not satisfied with the proposed source. The scheme is for Bradbourne, Brassington and Parwich and could also supply Ballidon.
BRADLEY.	Springs and wells. Water for Bradley Hall raised by ram from Lady's Spring in the limestone shales S.W. of the Church. This parish could be supplied by the proposed Hulland scheme.
BRAILSFORD.	Supplied by two wells in glacial sand and gravel on the north side of the village—reservoir and piped supply—owned by the exors. of Col. G. A. Strutt.
BRASSINGTON.	Wells and rain water. The wells are in the carboniferous limestone. Proposed scheme with Bradbourne and Parwich. Not yet approved as regards source.
CALLOW.	Wells in the shale grit.

CARSINGTON.	Springs and shallow wells in the carboniferous limestone. This parish could be supplied from the proposed Bradbourne scheme.
CLIFTON.	Springs from glacial deposits E. of the Church and from a small stream near "The Hollies." Piped supply to area South of the Henmore Brook.
CUBLEY.	Springs and shallow wells.
DOVERIDGE.	From reservoir at Somersal Herbert fed by springs from the glacial sand and gravel. Piped supply laid in 1930 by local authority. The reservoir and main pipe to the village is owned by the Uttoxeter U.D.C. No shortage.
EATON AND ALSOP.	Water derived from Nabs Spring in the carboniferous limestone near the River Dove at Newton Grange, and raised by ram to a reservoir near Hanson Grange.
EDLASTON AND WYASTON.	Wells in the bunter sandstone and in limestone. The supply to Wyaston is from a spring on the east of Wyaston brook, and wells. There was a shortage in 1935 when a temporary supply was provided by a stand pipe fixed to the Ashbourne U.D.C. rising main from Rodsley.
FENNY BENTLEY.	Springs and shallow wells in the carboniferous limestone shales.
HARTINGTON, NETHER QUARTER.	Springs and rain water. The new scheme for Hartington Town Quarter will serve the villages of Biggin and Heathcote.
HARTINGTON, TOWN QUARTER.	New scheme in progress. Borehole sunk between the River Dove and the village of Sheen (Staffs.), in the Millstone Grit formation. The water has a temporary hardness of 12·8 and a permanent hardness of 1·0—total 13·8.
HOGNASTON.	Springs and wells in the carboniferous limestone.
HOLLINGTON.	From reservoir supplied by ram from springs in the Keuper Marl to the east of the village. The works are privately owned.
HOPTON AND GRIFFE GRANGE.	Hopton is supplied from springs in the shale grit in Callow Parish and spring supplies to several farms. Griffe Grange is supplied from wells in the shale grit.

HULLAND AND HULLAND WARD.	Scheme prepared and sanction given by Ministry of Health for borehole to be sunk at Shepherd's Folly, Sturston Road, near Bradley. Work in progress. The scheme will supply Hulland, and Hulland Ward—the latter now absorbing the Parish of Hulland Ward Intakes. Bradley and Atlow could both be supplied from this scheme when required, and an extension of the main when laid, could give a supply to Turnditch in Belper R.D.
HUNGRY BENTLEY.	Shallow wells.
IBLE.	Rain water and a few springs issuing from the junction of the limestone and toadstone. Constant supply.
KIRK IRETON.	Two springs from the sandstone and limestone shales. The water is raised by two rams to a reservoir above the village. The system is owned by the R.D.C.
KNIVETON.	Wells in the limestone shales.
LEA HALL.	Spring and shallow wells in the limestone.
LONGFORD.	Shallow wells. Longford Hall has a supply from springs from the Drift over the Keuper Marl in Longford Park. A portion of the village will receive a supply from this source. At Longford Dairy there is a borehole 340 ft. deep in the alluvium Keuper Marl, yielding 5,000 g.p.h., for use at the factory.
MAPLETON.	Shallow wells in the limestone.
MARSTON MONTGOMERY.	Springs and wells. Shortage in 1935.
MERCASTON.	Wells in the Trias.
NEWTON GRANGE.	(As for Eaton and Alsop).
NORBURY AND ROSTON.	A borehole in the Keuper sandstone supplies Norbury. There is also a borehole at Norbury Farm 125 ft. deep—450 g.p.h. Roston relies on a spring from the glacial beds near the chapel, and from wells. Many of the latter have failed recently.

- OFFCOTE AND UNDERWOOD. Wells and springs in the limestone and trias outcrops.
- OSMASTON. A piped supply is provided by the Osmaston Manor Estate (1933).
- PARWICH. Springs and wells in limestone shales. Hardness 36°. Shortage in 1934 and 1935. There is a privately-owned borehole to supply Parwich Hall.
Parwich Lees is supplied from the Newton Grange system.
Proposed scheme with Bradbourne and Brassington not yet approved as regards source.
- RODSLEY. Shallow wells. Ashbourne Urban District obtains its water from boreholes in Rodsley.
- SHIRLEY. Privately-owned piped supply from a reservoir fed by ram from a spring near Shirley Mill (1933).
- SNELSTON. From Betling Spring, south of Snelston Hall. Borehole 174 ft. deep in the Keuper Marl at Snelston Firs (600 g.p.h.).
- SOMERSAL HERBERT. Partly piped supply from reservoirs supplying Doveridge and belonging to the Uttoxeter U.D.C. Remainder by wells.
- SUDBURY. By Sudbury Estate Waterworks. From springs at Alder Moor Wood and Sudbury Coppice in the glacial sand and gravel formation, estimated yield 10,000 and 20,000 g.p.d., respectively. Marchington (Staffs.) is supplied from this source.
- THORPE. Partly supplied by works owned by Messrs. Marston, Thompson & Evershed, Ltd., from the Fenny Bentley Spring in the carboniferous limestone at Upper Pasture Tops. The remainder of the parish is supplied by shallow wells.
- TISSINGTON. Wells in the limestone and shales.
A ram at Tissington Spires (480 O.D.) Dovedale, lifts spring water to a reservoir formed of two converted boilers (10,000 g. capacity) at a height of 1,200 feet O.D. The water serves the Hall and cottage and Rectory, Sharplo Farm and Bostern Farm. The village of Tissington is also supplied by a ram in the village.

- YEAVELEY. Spring and shallow wells.
- YELDERSLEY. The Hall and estate are supplied from a bore-hole 120 ft. deep into the Bunter sandstone and from a small stream east of the Hall. There are three storage reservoirs.

Bakewell.

- Parts of ASHFORD, Supplied by local authority's scheme
 CALVER, FROGGATT, from springs from the millstone grit at
 GREAT LONGSTONE, Stoke Flat, Froggatt Edge, where the
 HASSOP, LITTLE water is filtered. A new storage reser-
 LONGSTONE, ROWLAND voir of 3,165,000 g. capacity is in
 and STONY course of construction at Stoke
 MIDDLETON. Flat.
- ABNEY AND Abney is supplied by two springs, Abney Moor,
 ABNEY north of the village, from the limestone
 GRANGE. shales. Chemically satisfactory (1934).
 Abney Grange is supplied by water from a
 spring.
- ALDWARK. Few springs and rain water.
- BASLOW. Springs from the Millstone grit at Heathy Lea
 and Jack Flat, with a storage reservoir.
 The water is very good, bacteriologically and
 chemically.
- BEELEY. Piped supply from springs from the millstone
 grit.
- BIRCHOVER. Piped supply from springs in the millstone
 grit at Upper Park Plantation belonging the
 R.D.C.
- BLACKWELL. Supplied from five wells in the carboniferous
 limestone and from Calton Hill Quarry south
 of the village.
- BRADWELL. Local authority's supply from springs in the
 sandstone in limestone shales at Dead Man's
 Clough, east of Hazelbadge Hall. The water
 is chemically satisfactory, but B. Coli was
 present in 0.1 c.c.
- BRUSHFIELD. By ram from a spring in the toadstone outcrop
 in Monsal Dale.
- CHATSWORTH. The Chatsworth Estate Co., provides a piped
 supply from the Emperor Spring in the
 millstone grit in the Park.

- CHELMORTON. Piped supply by local authority—from springs north of the village, issuing from the junction of the limestone and toadstone. A scheme for providing a reservoir is prepared and has been submitted to the County Council for a grant.
- CURBAR. Piped supply by local authority—from springs in the millstone grit with a small reservoir at Curbar Edge.
- EDENSOR. By Chatsworth Estate Co.—piped supply from springs in the millstone grit, Calton Plantation—covered reservoir.
- ELTON. Wells — unsatisfactory quality. Temporary stand pipe provided in 1933 to supply water from Oddo Farm.
A new scheme is in progress to supply Elton along with Winster by stand pipes.
- EYAM. The local authority owns the waterworks which consist of a piped supply from a reservoir at Ladywash near "Mompesson's Well" constructed in 1933 with a capacity of 225,000 g. The Coldwell and High Cliff Springs which supply the reservoir have been found insufficient. It is now proposed to tap the underground water at the head of Mag Clough and pump this to the reservoir. (Ministry Inquiry held 15/4/36).
- EYAM
WOODLANDS. Parish Council supply from the springs on millstone grit on the north side of Mag Clough. This supply provides water for Grindleford up to the 700 ft. contour.
- FLAGG. The local authority provides a stand pipe supply from a disused lead mine shaft in Flagg, sunk 300 ft. in the carboniferous limestone, reaching water at 150 ft.
As B. Coli was found in the water, a small chlorinating plant has been installed. This water also supplies the neighbouring village of Monyash.
- FOOLOW. Springs and rain water. Supply inadequate. See "Great Hucklow" for new scheme in progress. The Duric Well, N.E. of Bretton, supplies Bretton village.
- GRATTON. Spring in millstone grit at Rock Farm, which formerly also supplied Elton.

GREAT HUCKLOW.	A new scheme is in progress to provide water for Great Hucklow, Foolow, Grindlow, Little Hucklow, and Wardlow. Water is to be derived from springs at Camp Hill Farm, Great Hucklow and will be piped to stand taps and to the existing troughs.
GREAT ROWSLEY.	The Haddon Estates Co. provides a supply from springs in the limestone shales at Pilhough, with a reservoir at Peak Tor.
GRINDLOW.	New scheme in progress. (See "Great Hucklow").
HARTHILL.	Springs.
HARTINGTON, MIDDLE QUARTER.	Earl Sterndale, Crowdecote and most of the parish depend on rain water. Negotiations with Chapel R.D.C. to supply from their Greensides scheme failed. The local authority now propose to take underground water from springs to the south of the Greensides scheme.
HATHERSAGE.	In 1932 the local authority purchased the old waterworks including the reservoirs and augmented the supply by taking in spring water issuing from the millstone grit at the Burbage Brook near "Fox House."
HAZELBADGE.	Springs.
HIGHLOW.	Springs.
IRONBROOK GRANGE.	Supplied from Shothouse Spring. A stand pipe will be provided when the Winster scheme is completed.
LITTLE HUCKLOW.	New scheme in progress. (See "Great Hucklow").
LITTON.	Mainly from Tideswell Water Committee's supply to a reservoir in Litton—remainder from wells.
MIDDLETON-BY- YOULGREAVE.	From a spring which supplies Lomberdale House, Youlgreave.
SMERRILL.	Rain water.
MONYASH.	Stand pipe supply provided in 1935 from Flagg system.
NETHER HADDON.	Springs.

- NETHER PADLEY. Local authority provides a supply from springs in the millstone grit N. of the village.
- OFFERTON. Springs from the limestone shales.
- OUTSEATS. Springs from the millstone grit.
- OVER HADDON. By ram from the River Lathkill.
- PILSLEY. Piped supply from springs in the millstone grit in Calton Plantation, Edensor.
- SHELDON. The local authority provides a supply from springs at Five Wells, one mile to the west of the village. The water issues from the limestone—toadstone junction. Rain water is used in outlying places.
- STANTON. Piped supply from Stanton Estate.
- STOKE. Scattered area. Part served by private supply (Capt. Hunter).
- TADDINGTON. Piped supply by Local Authority and from springs.
- TIDESWELL. The Tideswell Water Committee provides a piped supply from a reservoir at Brook Head to the N.W. of the village. The water comes from a spring in the carboniferous limestone and upland surface water. The hardness is rather high.
- Litton takes its supply from this source.
- WARDLOW. New scheme in progress. (See "Great Hucklow").
- WHESTON. Rain water collected in meres.
- WINSTER. At present Winster has two covered reservoirs fed by springs in the millstone grit at Upper Park Plantation, near Birchover. The supply is inadequate.
- New scheme in progress, utilizing the underground water at Shothouse Spring, Ivonbrook Grange, obtained by forming a heading into the hillside. From here the water will be pumped to a new reservoir on high ground between the spring and Winster. The new reservoir will be of 20,000 g. capacity and at a height of 1,100 O.D. and will be connected to the existing reservoirs at Winster and will also provide a supply to Elton. The water

will be softened. Above the level of the existing reservoirs in Winsters stand pipes will be provided from the new main. The farms at Ivonbrook Grange will have a stand pipe supply providing untreated water. The water has a hardness of 20.9 and B. Coli are absent in 250 c.c. (22/10/35).

YOULGREAVE. Supplied from a spring issuing from the millstone grit at Bleakley Plantation.

Belper.

ALDERWASLEY. Springs collected in a reservoir supply the Hall. The village is supplied by several piped springs. Remainder of the Parish from wells or springs. Whatstandwell is supplied by the Local Authority partly from Crich Carr springs in the millstone grit.

ALLESTREE. Supplied by Derby Corporation.

ASHLEYHAY. Springs from the millstone grit.

CRICH. By local authority. (See "Dethick").

DARLEY ABBEY. Mainly by Derby Corporation.

DENBY. Smalley Joint Water Committee. Received in bulk from Belper U.D.C. and stored in reservoir at High Wood, Pinchom's Hill.

DETHICK, LEA, AND
HOLLOWAY. By local authority.
(1) From Carver Spring in millstone grit at Dethick, raised by ram to reservoir.
(2) Cattley Well, Dethick.
The hardness is 7.2 (30/8/34).
Crich and South Wingfield are also supplied from this reservoir.

DUFFIELD. By local authority.
(1) From springs at Cross-o'-th'-Hands, with storage reservoir at Hazelwood.
(2) From spring at Handley Wood.

Both systems can be connected. A duplicate main was laid in Hazelwood Road, Duffield, in 1933, between the reservoir and the main road to improve the supply immediately below the reservoir in times of heavy draw-off. Bacteriological examination of the Cross'-th'-Hands sources show B. Coli absent in 150 c.c. in two of the springs whilst the other two

show the presence of B. Coli in 1 c.c. and in 15 c.c. respectively. (Feb., 1936).

In November, 1935, the public supply showed coli present in 1 c.c.

- HAZELWOOD. Springs from the millstone grit and from wells. Not sufficient in dry weather.
- HOLBROOK. Belper U.D.C.
- HORSLEY. Smalley Joint Water Committee. Received in bulk from Belper U.D.C.
- HORSLEY Smalley Joint Water Committee.
WOODHOUSE. Received in bulk from Belper U.D.C.
- IDRIDGEHAY. Eight houses have a piped supply—remainder supplied from shallow wells and springs.
- KEDLESTON. From Kedleston Estate. Lion's Mouth Spring in Kedleston Park, rising from the alluvium.
- KILBURN. Smalley Joint Water Committee—received in bulk from Belper U.D.C.
- KIRK LANGLEY. Springs and shallow wells. Shortage in 1933.
- MACKWORTH. Springs and shallow wells. Shortage. A ram supply has been provided for a few farms by the owner. A scheme has been prepared for extending the Derby Corporation's main as far as Mackworth Village.
- MAPPERLEY. By the Stanley and West Hallam supply from the West Hallam Colliery shaft, 358 ft. deep.
- PENTRICH. Springs and shallow wells.
- QUARNDON. Partly supplied by Kedleston Estate from springs in the Bunter on Quarndon Common and partly by Derby Corporation.
- RAVENSDALE PARK. From springs in the Bunter Pebble Beds and from shallow wells.
- SHIPLEY. Partly by Ilkeston and Heanor Water Board through the local authorities and partly by the Shipley Collieries Co. from their shaft sunk in the middle coal measures to a depth of 336 ft.

SHOTTLE AND POSTERN.	From springs in the millstone grit and from wells.
SMALLEY.	By the Smalley Joint Water Committee from Belper U.D.C. and by the Stanley and West Hallam system from source at West Hallam Colliery.
SOUTH WINGFIELD.	By local authority from the Dethick source.
TURNDITCH.	Partly by Kedleston Estate and remainder by shallow wells and springs—limestone shales area. Shortage. A scheme is under consideration. This area could be supplied from the Hulland scheme belonging Ashbourne R.D.C. now commenced by sinking a borehole.
WESTON UNDERWOOD.	Mugginton is served by springs in the Bunter at Calder Well, raised by rams, and from wells.
WINDLEY.	From springs and shallow wells in the limestone shales area.

Blackwell.

The comprehensive scheme for serving almost all the rural district from the Meden Valley Waterworks in the Dukeries was brought into use in March, 1933. Water is pumped from two 24" boreholes at Budby, 230 ft. deep in the Bunter sandstone, boosted at Stoney Houghton Reservoir (900,000 g.) to three reservoirs of 525,000 g. total capacity at Whitehough near Tibshelf, supplying service reservoirs on the way at Pleasley and Biggin.

Hillstown, Palterton and Scarcliffe, Nether Langwith, Glapwell, Doe Lea, Ault Hucknall and Stainsby are now connected with this system and, towards the end of 1935, Whaley Thorns supply was changed over from the Sheepbridge Coal and Iron Co's supply to the Meden Valley supply.

The R.D.C. also supplies Warsop U.D., Huthwaite U.D. and part of Skegby R.D. (Parishes, Skegby, Sokeholme and Teversal).

The works are designed to supply a population of 92,000 with 20 g.p.h.p.d., of which, approximately, 70,000 are now supplied. The total consumption from these works is now 1,500,000 gallons per day.

The water has a total hardness of 12·6.

The Model Village portion of Shirebrook is still supplied by the Shirebrook Colliery Co., the hardness being 71·05 (1932).

Chapel-en-le-Frith.

- ASTON. Springs.
- BAMFORD. Partly by local authority and partly by the D.V.W.B. The local authority supplies below the 800 ft. contour from springs in Bamford Clough issuing from the shale grit and collected in two reservoirs. The hardness is low.
- BROUGH AND SHATTON. Springs—shortage.
- CASTLETON. Castleton Water Works Co., Ltd., supply from the springs rising in the sandstone and the limestone shales at Brockett Booth Plantation north of Castleton, and collected in a reservoir. There is a shortage occasionally. An Inquiry was held by the Ministry of Health (12/10/32) for a loan for the purpose of the water works, but sanction was not given.
- CHAPEL-EN-LE-FRITH. Partly by Local Authority from
- (1) Springs issuing from the shale grit at Roych ;
 - (2) from a spring to the east of Shireoaks, in the Yoredale grit ;
 - (3) from springs at Ridge Hall issuing from the millstone grit.
 - (4) from springs at Combs Moss.
- There are four reservoirs with a total capacity of 4,420,000 g. The total hardness is 3·8.
- Dove Holes is supplied by the Local Authority from water issuing from the limestone grit, east of Hob Tor, collected below the surface and laid on to a reservoir. The water is plumbo-solvent ; the hardness is 3·9.
- The water is now treated for plumbo-solvency. The supply is ample.
- CHARLESWORTH. By local authority from springs in the millstone grit at Cloud Farm, Hargate Hill, and a spring known as Jackson's Spring, collected in reservoirs.
- CHINLEY. Mainly a piped supply from the Chapel system.
- CHISWORTH. Springs.
- DERWENT. Partly by D.V.W.B. and springs.

- EDALE. By local authority. Underground water is collected in a tank and piped to village.
- GREEN FAIRFIELD. Piped supply from Doveholes main. Also linked up with Buxton Borough main.
- HARTINGTON, UPPER QUARTER. Partly by local authority from the Greensides Waterworks. Supplies Sterndale Moor and Hindlow.
The hardness is 6·43. The flow was considerably reduced in 1934.
Remainder of parish relies on rain water and springs.
- HAYFIELD. Supplied by local authority from springs in the shale grit at Harry Moor, Kinder.
Hardness, 2·34.
Sanction has been given by the Ministry of Health for a loan of £3,000 for the purpose of constructing a storage reservoir of 180,000 g. capacity, equal to three day's supply.
This water is also used to supply the parish of Mellor which has recently been transferred to Marple Bridge Urban District in Cheshire.
The reservoir for this Mellor supply is at Jordan-wall Nook.
- HOPE. Pipe supply from reservoir at Fulwood Hill, $1\frac{1}{4}$ miles north of Hope, fed by springs at Jagger's Clough, $2\frac{1}{2}$ miles from reservoir.
The hardness is low.
- KING STERNDALE. Partly served by private supply from Woolow. Remainder from wells.
- PEAK FOREST. Shallow wells (limestone area)—bacteriologically unsatisfactory.
At Sparrow Pit the water is satisfactory from a chemical standpoint, but bacteriologically, B. Coli were found in 1 c.c. (2/9/35).
- THORNHILL. Springs from the limestone shales.
- HOPE WOODLANDS. Springs from the shale grit.
- WORMHILL. By local authority from springs issuing from the limestone on Wormhill Moor, and pumped to a reservoir on Bole Hill. Hardness 23·0. The water is softened to 15·5 and consideration has been given to increasing the softening plant.

Chesterfield R.D. About 91% of the houses have a piped supply.

BRIMINGTON
CALOW
HASLAND
TUPTON
WINGERWORTH

Mainly supplied by Chesterfield and Bolsover Joint Water Board.

Wingerworth is also supplied from the Wingerworth source purchased by the R.D.C. in 1934. There are two open reservoirs of 280,000 g. and 410,000 g. respectively and a borehole. Remainder of parish is supplied from wells and springs.

HOLMESFIELD
BARLOW
ECKINGTON
BEIGHTON
KILLAMARSH

Mainly supplied by local authority from the Barbrook Reservoirs, 100,000,000 g. ; Ramsley Reservoir, 18,000,000 g. ; Crowhole Reservoir, 25,000,000 g. From springs in the millstone grit and moorland surface at Totley Moss, Big Moor, Ramsley Moor, and Leash Fen.

The water at Barbrook and Crowhole is filtered. Hardness, 4.57.

The new urban district of Staveley is supplied from this source.

The portion of Beighton parish known as Frecheville is supplied from the Sheffield Corporation at a cost of 1/3 per 1,000 gallons.

TEMPLE
NORMANTON
TUPTON
NORTH
WINGFIELD
HEATH
PILSLEY
STRETTON
SHIRLAND AND
HIGHAM
MORTON

Supplied by local authority from springs collected in three reservoirs at Press, (32,000,000 g.). Hardness, 9.43. The sources of the supply are the Eddlestow springs and the Brockhurst Springs.

BRAMPTON AND
WALTON.

Many of the houses in this area are supplied by Chesterfield Corporation, whose source of supply (other than that with the Bolsover U.D.) is derived from this district. A few houses are supplied by the Chatsworth Estate. Isolated farms have wells.

ASHOVER.

By local authority from springs in the limestone grit at Eddlestow and Bath Spring, near Ashover.

Hardness is low. There is a covered reservoir (15,000 g.) serving Ashover village. Remainder of Parish is supplied from wells.

The Eddlestow water can be used for either Ashover or the Chesterfield R.D.C's Southern Scheme.

Alton and Littlemoor hamlets have an independent supply from the Brown Edge Springs.

BRACKENFIELD. Wells. Shortage. Unsatisfactory quality.

WESSINGTON. By Alfreton U.D.C. by meter, from Lindway Reservoir.

Clowne.

BARLBOROUGH	Supplied by R.D.C. who receive in bulk from the Manton Colliery of the Wigan Coal & Iron Co., at Worksop. The hardness is 19·29 after softening from 34·50. Other parts of Elmton and Whitwell are supplied by a spring at Cuckney and a well in the Bunter at Carburton.
CLOWNE.	
ELMTON (part)	
WHITWELL (part)	

Repton.

ASH	HOON	} Wells.
BARTON BLOUNT	INGLEBY	
BEARWARDCOTE	LULLINGTON	
CALDWELL	MARSTON-ON-DOVE	
CATTON	OSLISTON & THURVASTON	
CHURCH BROUGHTON	RADBOURNE	
DALBURY LEES	SUTTON-ON-THE-HILL	
FOREMARK	TRUSLEY	
FOSTON & SCROPTON	TWYFORD & STENSON	

CASTLE GRESLEY	} South Staffs. Water Co.
COTON-IN-THE-ELMS	
DRAKELOW	
ETWALL	
FINDERN	
LINTON	
NEWTON SOLNEY	
REPTON (except Milton village)	
ROSLISTON	
WALTON-ON-TRENT	
WILLINGTON	

- BRETBY.** The supply to the village is collected in four springs on the County Council's estate at Bretby Park issuing from the glacial sand and gravel and collected in four small reservoirs. The yield from these reservoirs is variable and, when necessary, the supply is augmented from the South Staffordshire supply. The remaining portion of the parish is supplied from the South Staffordshire mains.
- BURNASTON
EGGINTON
ETWALL** } Partly by Burton Corporation from a well 71 ft. deep in Keuper Marl, near Blakely Lodge, one mile south of Etwall. Etwall has also been connected to the South Staffs. Co's supply. Remainder from wells.
- CALKE.** From the Calke Abbey Estate. Supplied from springs in the Keuper sandstone, east of the Elms. Some wells.
- HARTSHORNE.** By local authority's piped supply from springs at the base of the Keuper in Several Wood, three-quarters of a mile S.E. of the village and served from a covered reservoir in Manchester Lane. Hardness, 25·7, mainly temporary. Some houses are supplied from springs in Caulkley Wood.
- HATTON.** Partly by Tutbury R.D.C. (Staffs.) and the remainder by wells.
- HILTON.** Wells used mainly, but there is a piped supply to eight houses owned by the Hilton Gravel Co.
- MICKLEOVER.** Derby Corporation.
- MILTON.** A village in Repton Parish is supplied by the Swadlincote and Ashby Joint Water Committee from their Milton Water Works.
- NETHERSEAL.** Shallow wells.
- OVERSEAL.** Partly by the local authority from the Smisby Well and an additional spring in Several Wood and partly by the Moira Colliery Co., Ltd., from a spring in the Trias at Willesley Hall, Leicestershire.
- SMISBY.** Wells and springs—some polluted. A supply could be obtained from the water tower at Boundary.

TICKNALL. By the local authority from a well 25 ft. deep in the Keuper sandstone. The water is raised by a wind pump to a reservoir. Springs from the limestone are also used.

WOODVILLE. Partly supplied by the Swadlincote and Ashby Joint Water Company from the Milton Waterworks and partly from a well owned by the local authority at Boundary. The well is 10 feet diameter and 91 feet deep with four headings (150 yds.) in the Keuper sandstone from which the water is pumped to an elevated tank. The hardness is 37·23. The water from a spring in Several Wood is also collected and pumped to the elevated tank. This water is also used for part of the supply to Overseal.

Shardlow. Approximately 85% of the houses in the R.D. have a piped supply.

ALVASTON & BOULTON (part)	} Derwent Valley Water Board (180,000 g.p.d.). The R.D.C. can take up to 250,000 g.p.d. Bartlewood (Dunshill) Reservoir at Ockbrook (500,000 g.). Consumption 14 g.p.h.p.d.
ASTON-ON-TRENT	
BREASTON (part)	
CHELLASTON	
DRAYCOTT (part)	
ELVASTON	
OCKBROOK	
BORROWASH	
SHARDLOW	
SANDIACRE (part)	

ALVASTON & BOULTON	} Derby Corporation.
BREADSALL	
CHADDESSEN	
LITTLEOVER.	
LITTLE EATON	
SPONDON	

DALE ABBEY (part)	} By local authority from the West Hallam pit shaft of the Mapperley Colliery Co. Reservoir at Smalley Common (90,000 g.). Consumption 80,000 g.p.d. or 20 g.p.h.p.d. From this source, Mapperley (Belper R.D.) receive 6,500 g.p.d.
STANLEY	
WEST HALLAM	

BARROW-ON-TRENT SWARKESTONE	} Shallow wells. Could be supplied by an extension of the new scheme.
HOPWELL.	Scattered area. A few houses connected to the Bartlewood (Dunshill) reservoir.
MORLEY.	Springs and shallow wells.
SINFIN AND ARLESTON.	Scattered area. Wells.
KIRK HALLAM AND STANTON-BY-DALE	From Ilkeston and Heanor Water Board, with a pumping station.
MELBOURNE DERBY HILLS	} Now supplied from the Bartlewood (Dunshill) Reservoir, augmented by boreholes 225 ft. deep in the limestone grit at Melbourne. Two reservoirs high and low level (50,000 g. and 100,000 g. capacity respectively). This source alone was found to be insufficient, hence Melbourne was connected to the D.V. water in 1935. Consumption 70,000 g.p.d.
RISLEY SANDIACRE	} By Local Authority from the Sandiacre and Stapleford Waterworks, consisting of a borehole 140 feet deep in the Bunter sandstone. Hardness 23°. This water is pumped to a reservoir at Risley, 100,000 g. capacity. Some water from D.V.W.B. main also is delivered to this reservoir.
STANTON-BY-BRIDGE.	Supplied by Long Eaton U.D.C. from waterworks at Stanton.

NEW SCHEME.

A new scheme has been commenced comprising a borehole at Breadsall Moor on the Little Eaton by-pass road, 447 ft. deep, a new reservoir at Drum Hill (503 O.D.) of 500,000 g. capacity connecting up with the existing Bartlewood Reservoir and joining up the D.V.W.B., Sandiacre, Melbourne, and Stanley and West Hallam systems. Melbourne and Sandiacre have already been linked up.

Morley, Weston-on-Trent, Barrow-on-Trent and Dale Abbey will be provided with a supply.

The Stanley and West Hallam source will be abandoned.

When the scheme is completed only three parishes will be without a piped supply, viz. :—Hopwell, Arlestone and Sinfen and part of Sinfen Moor.

The cost will be £44,448 and the annual charges £3,360.

The water has a hardness of 12.4 and no B. Coli were found in 300 c.c.

RIVER POLLUTION AND SEWAGE PURIFICATION.

The conditions existing at the present time in the various Sanitary Districts in the County and the extensions and improvements carried out during 1935 are as set out below :—

Alfreton Urban.

The whole of the district is sewered, except a few outlying premises.

There are sewage disposal works at Highfield, Meadow Lane (two), Swanwick, Swanwick Hill, Greenhill Lane, Newlands Road, Somercotes, Pye Bridge and Cotes Park.

At Ironville there is no treatment of the sewage other than by dilution in wet weather. It is high time that this matter received the attention of the Local Sanitary Authority.

The sewage works at Pye Bridge are in process of being remodelled.

A scheme has been prepared for sewerage Sleetmoor Lane.

The area known as Forge Rows has a plant consisting of tanks and filters for the treatment of the sewage.

Ashbourne Urban.

The present sewage disposal works are still over-taxed and extensions are needed.

A scheme for enlarging the sewage works has been prepared, but the Inquiry will not be held until the possibilities of a gravitation scheme on a site at Sides Mill, Clifton, have been considered. Negotiations are also taking place with a view to Ashbourne R.D.C. and Mayfield R.D.C. joining in with the scheme.

A scheme has also been prepared for sewerage the whole of the recently added Derby Road area.

Bakewell Urban.

The sewerage and the sewage disposal works are nearing completion.

The town has practically been re-sewered and disposal works provided on Coombs Road near the railway.

The sewage gravitates to a pumping station on the Rowsley Road from whence it is pumped across the River Wye to the new disposal works.

Belper Urban.

The old sewage disposal works were enlarged in 1932.

The system is worked partly by gravitation and partly by five air ejectors. The whole can be worked by steam provided by the refuse destructor and when this is not available the ejectors can be worked automatically by electricity.

Bolsover Urban.

There are five sewage disposal works for the district—Bolsover, Carr Vale, Shuttlewood, Stanfree and Whaley Common. The main works at Bolsover have recently been improved by converting the primary and secondary filters into separate filters and providing a storm tank. The land used for irrigation when required, needs attention. At Carr Vale the humus tank sludge is allowed to pass to the River Doe Lea. A pump should be provided for lifting this sludge to a drying bed.

Buxton Borough.

The sewage for the Borough is treated in tanks, roughing filters and percolating filters. A sludge pressing plant is used. Experiments have been made by the Manager to ascertain whether gas liquor could be dealt with at the sewage disposal works. He found that the final effluent was not adversely affected so long as the dilution was not less than one of liquor to 700—800 of sewage.

Proper humus tanks are required at these works and care should be taken during the process of brushing out the large channel feeding the filters, to see that the tank effluent and sludge from the channel do not pass to the River Wye.

Chesterfield Borough.

Practically the whole of the district is sewered and the sewage is treated at Whittington on the activated sludge principle.

Care has to be taken in very dry weather when there is little infiltration into the sewers owing to the amount and nature of trade wastes entering the sewers.

A chlorination plant has been installed and is used when required, the point of chlorination being before the tank settlement.

It is proposed to extend and improve the method of sludge digestion.

Clay Cross Urban.

There are three disposal works for the district—Bacon Springs, Danesmoor, Long Rows.

The Long Rows works are obsolete and unsatisfactory and should be replaced with works of modern design.

Dronfield Urban.

With the exception of the recently added areas, most of the district is sewered to two disposal works, the main works and the works at Coal Aston. The works will need enlarging to deal with the sewage of the new areas. At present, in the new areas, there are two sewage tanks at Dronfield Woodhouse.

Glossop Borough.

Almost all the district is sewered and the sewage is treated at one disposal works near "Melandra Castle."

Heanor Urban.

The old works at Commonsides, Loscoe and Woodend have been abolished and the sewage taken to and treated at the modern disposal works at Langley Mill.

There are other works at Cross Hill to deal with the sewage of Codnor and Cross Hill and Waingroves in Ripley U.D.

There is a small plant for a few houses at Stoneyford.

Ilkeston Borough.

The main disposal works at Hallam Fields were considerably enlarged in 1933. The filters are rectangular and the sprinklers are worked by electricity.

At Shipley Common, the newly added area, there is a small disposal plant having double filtration.

Long Eaton.

Considerable improvement is being effected by the laying of a new low-level sewer which will permit of certain low-lying areas being drained and the Sawley sewage works being abolished.

The sewage from certain areas outside the County—Toton, Chilwell and Attenborough is treated at the main disposal works which were extended for this purpose.

Electric pumping stations are provided at various points in order that all the sewage of the area may be treated at one works.

Matlock Urban.

The main disposal works are at High Peak Junction with an electric pumping station at Knowlestone Place, Matlock.

The recently added areas of North Darley, South Darley and Bonsall (formerly separate urban districts) are in need of proper sewage disposal schemes. The populations of these areas are:—

North Darley—4,500. South Darley—730. Bonsall—1,150.

New Mills Urban.

The main disposal works are of modern construction and situated near the gas works. They deal with the sewage of practically the whole district.

A small disposal plant is provided for a few houses at Hague Bar.

Ripley Urban.

The Waingroves sewage is dealt with at Cross Hill disposal works belonging to Heanor U.D.C. The sewage of most of the remainder of the district is dealt with at Ripley Northern, Ripley Southern, Marehay and Street Lane Works.

Staveley Urban.

The sewage of this newly formed urban district is treated on the activated sludge principle at disposal works at the north-eastern corner of the district.

Swadlincote Urban.

New disposal works are in course of construction replacing the old system of tanks and land treatment.

The sewage of a small portion of the district is dealt with by tank and land treatment at Cappy Lane.

Whaley Bridge Urban.

The sewage of this newly formed urban district is treated at works situated at Furness Vale. The works consist of two detritus tanks, three settling tanks (each sub-divided), three storm water tanks, six circular percolating filters, four humus tanks and the necessary sludge lagoons. The area of the land is $6\frac{3}{4}$ acres of which $1\frac{3}{4}$ acres are let off for crop growing. The works also serve the following places which are outside the Urban District:—Barren Clough, Whiteclough, Buxworth, Brierley Green, Lee End, Chinley and Alder Bank.

Wirksworth Urban.

The bulk of the sewage is treated at disposal works. The main works are at Wirksworth and these were extended in 1932 to take the sewage of Middleton-by-Wirksworth which formerly drained into disused lead mine shafts.

There is a small plant at Homesford Cottages. At these works, although only recently constructed, the filter has been provided with fixed pipe distribution which is unsatisfactory.

Ashbourne Rural.

BRAILS福德—Small sewage works..

DOVERIDGE.—Small sewage works.

HARTINGTON, TOWN QUARTER.—Small sewage works. The sewage is very dilute except in very dry weather.

SUDBURY.—Small sewage works, the filters having fixed distribution.

TISSINGTON.—The works consist of covered tanks only.

THORPE.—Two hotels have private installation.

HOGNASTON.—Small sewage works, consisting of a tank and land treatment.

KIRK IRETON.—Scheme prepared, but not sanctioned by the Ministry of Health.

Other parishes have no proper disposal works, the sewage being discharged either into tanks, streams and ditches or on land.

Bakewell Rural.

GREAT LONGSTONE.—Modern sewage disposal works.

HATHERSAGE.—Tanks and land treatment. Unsatisfactory at times. Effluent to River Derwent.

LITTLE LONGSTONE.—Tank and land treatment. The effluent disappears into the ground.

STONEY MIDDLETON.—Tank and land treatment.

TIDESWELL.—Tanks, filters and land treatment. The works are not satisfactory and pollution of the brook occurs.

EYAM WOODLANDS (Grindleford).—A new disposal scheme has been sanctioned and will be commenced shortly.

No treatment of the sewage is provided for the remainder of the rural district which consists of small villages.

Belper Rural.

The following villages have their own sewage disposal works :—Allestree, Crich, Darley Abbey, Denby and Kilburn, Duffield, Holbrook, Horsley, Horsley Woodhouse, Mapperley, Openwoodgate, Quarndon, Smalley, Smithy Houses, South Wingfield and Whatstandwell.

Part of Smalley Parish is drained to Heanor U.D.

The sewage of Holloway discharges into a stream at Lea Bridge.

The remainder of the area consists of small villages where no sewage treatment is provided.

Blackwell Rural.

There are sewage disposal works at the following places:— B. Winnings, Berristow Place, Birchwood Lane, Brookhill Lane, Carnfield, Hardstoft Lane, Langwith, Newton, New Houghton, Pleasley, Pinxton Green, Pinxton Wharf, Pinxton Tip, Primrose Hill, Scarcliffe, Shirebrook, South Normanton, Tibshelf, and tanks and land treatment provided at Westhouses (North) and Westhouses (South).

The old works at Palterton and at Doe Lea were abolished and new works provided in 1935 for these areas together with Glapwell, at Stockley.

A new scheme is in progress at South Normanton which will improve the South Normanton Sewage works and abolish those at B. Winnings and Berristow Place.

Upper Langwith (Scarcliff Parish) which formerly drained into cesspools which overflowed to the River Poulter has now been sewered and connected to the Langwith Joint sewage works.

Several schemes have been prepared for replacing the Pinxton Wharf sewage works but delay has taken place owing to the fact that subsidence is still occurring in the area.

There is a proposal to abandon the works at Tibshelf and Newton and enlarge the Primrose Hill Works to deal with the extra flow.

The Parish of Ault Hucknall consists of several small hamlets where it has not been found necessary to provide disposal works.

Chapel-en-le-Frith Rural.

Sewage disposal works are provided for Bamford, Castleton, Chapel, Chinley, Buxworth, Hayfield and Hope. There is a small plant for a portion of Dove Holes. A scheme was prepared in 1927 for Charlesworth and Chisworth but did not receive the sanction of the Ministry of Health. The remaining parishes consist of small scattered villages.

Chesterfield Rural.

There are sewage disposal works at Apperknowle, Arkwright Town, Barlow, Beighton (two), Calow Alley, Calow Village, Eckington, Grassmoor, Grassmoor Colliery Pit Head Baths, Halfway, Hackenthorpe (two), Hepthorne Lane, High Moor, Killamarsh, Locko Brook, Morton, Mosborough, New Tupton, Pilsley, Pilsley Station, Ridgeway, Shirland and Higham, Stonebroom, Tapton Grove, Temple Normanton, Troway, Wessington, Wheeldon Mill Upper, Wheeldon Mill Lower, Williamthorpe (two), Winsick.

There are sewage tanks at Brimington Common, Siscar, Unstone Green, West Handley.

Work is in progress on a new scheme for Ashover.

At Brampton there is a small disposal plant for a few houses.

The remainder of the rural district consists of small scattered villages.

Clowne Rural.

There are sewage works at Barlborough, Hodthorpe and Whitwell.

Tank and land treatment is provided at Clowne, Cresswell, Mount Pleasant and West Lea.

The Whitwell works are in need of improvement as the Whitwell Colliery Pit Head Baths drainage is pumped to these works and during the pumping periods the filters are overworked and overflow to the brook takes place. This matter has been referred to the Council's Engineers.

A Ministry of Health Inquiry was held on March 25th, 1936, with regard to new disposal works at Clowne.

Repton Rural.

Sewage disposal works are provided at Mickleover, Findern, Repton, Etwall, Coton Park, Linton North, Milton, Overseal, Woodville. Tanks are provided at Hatton, Hilton, Castle Gresley (two), Mount Pleasant and Scropton.

A new scheme is in progress for Castle Gresley.

A scheme is being prepared for dealing with the sewage at Willington.

A Ministry of Health Inquiry has been held with regard to a sewage disposal scheme for Hatton. The scheme does not, however, include the area near the Station Hotel and the Scropton Lane sewage tank area, nor does it include the Uttoxeter Main Road houses.

A scheme has been prepared for sewerage Findern and enlarging the present works there. Findern Lane End houses are included.

The sewage of other small villages is discharged into cesspools, ditches or streams.

Shardlow Rural.

Sewage disposal works are provided for the following places :—

Borrowash and Ockbrook.	Shardlow and Aston-on-Trent.
Chaddesden.	Smalley Common.
Chellaston.	Spondon.
Draycott and Breaston.	Stanley.
Little Eaton and part of	Stanley Common.
Breadsall.	Stanton-by-Dale.
Littleover.	West Hallam.
Melbourne.	
Sandiacre and Risley.	

The village of Weston-on-Trent will probably be connected to the Shardlow sewers.

Alvaston and Boulton is mainly drained to the Derby Borough sewers.

The sewage of other small villages is discharged into cesspools, ditches or streams.

SEWAGE EFFLUENTS.

During the year 1935, 114 samples of sewage effluents were collected and analysed. The samples were classified as follows :—

Good	...	...	...	35
Satisfactory	...	...	...	45
Unsatisfactory	...	...	...	16
Bad	...	...	...	18

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.

I must point out that the number of samples of sewage effluents taken during the year is considerably smaller than usual—a little more than a quarter, or, at the most, a third of the number usually taken—some explanation of this is necessary. The explanation is that during the year the Accredited Milk Producers' Scheme has taken up a very considerable proportion of the time of the Sanitary Inspectors, so much so that in the last half of the year it was impossible to find time to take a single sample of effluent, notwithstanding that the Inspectors were working all hours of the day and night. The call of the Sanitary Inspectors' time for this purpose was obviously noticed in other counties, as the demand for sanitary inspectors for the purposes of the Accredited Milk Scheme resulted in the loss to me of one of my two Inspectors during the busiest part of the year, and there was, of necessity, a period when we could least afford it, in which the work had to be carried on by one inspector only.

SCAVENGING.

ALFRETON URBAN.—Lorry purchased to replace two horses and carts. Greater activity in salvaging. One paper baler and one tin baler purchased. Five additional staff employed on refuse tip.

CHESTERFIELD BOROUGH.—A dust catcher has been erected in conjunction with the incinerators in order to eliminate atmospheric pollution by the discharge of dust and other burnt material from the incinerators. A new type of vehicle known as the "Scammell mechanical horse and Container" has been adopted which reduces the dust nuisance when loading.

MATLOCK URBAN.—Lumsdale refuse tip closed. Refuse incinerator purchased.

STAVELEY URBAN.—Scheme extended to include parish of Duckmanton.

ASHBOURNE RURAL.—The scheme of collection of house refuse has been extended during the year and regular collections are now made at Brassington, Clifton, Hartington Upper Quarter and Parwich.

BAKEWELL RURAL.—Baslow and Bubnell have adopted a scavenging scheme. Pails and dust-bins are to be emptied weekly.

REPTON RURAL.—Public scavenging schemes were inaugurated for the parishes of Willington and Hilton and roadside tips were discontinued. A new tip was provided for the parishes of Findern and Stenson and a scavenging scheme was put into operation in the parish of Repton.

SHARDLOW RURAL.—During the year public scavenging was extended to include the parish of Arleston and Sinfin, where a large number of new houses is being built. Public scavenging is now in operation in 22 parishes in this District.

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

505 licences for the production of Grade "A" milk were issued during 1935 under the Milk and Dairies Amendment Act, 1922.

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915, AND TUBERCULOSIS ORDER, 1925.

The work done during 1935 under the Act and Order is set out in Table XXVIII. with comparative figures for each year since the coming into force of the Tuberculosis Order, 1925.

Two Veterinary Inspectors commenced duty in February, 1934. In October, 1935, the number of Veterinary Officers was increased to 7.

TABLE XXIX.

Milk and Dairies (Consolidation) Act, 1915. Milk and Dairies (Amendment) Act, 1922. Milk and Dairies Order, 1926.

The following Table shows the work ascertained to have been carried out in improving the condition of Cowsheds and Farms during 1935 :—

	URBAN DISTRICTS.										RURAL DISTRICTS.																		
	Alfreton.	Ashbourne.	Bakewell.	Belper.	Bolsover.	Buxton (Boro)	Chesterfield (Boro)	Clay Cross.	Dronfield.	Glossop (Boro)	Heanor.	Ilkeston (Boro)	Long Eaton.	Matlock.	New Mills.	Ripley.	Staveley.	Swadlincote.	Wirksworth.	Ashbourne.	Bakewell.	Belper.	Blackwell.	Chapel-en-le-Frith.	Chesterfield.	Clowne.	Repton.	Shardlow.	
COWSHEDS.																													
Number in District ...	76	18	22	42	39	67	87	43	?	90	73	24	38	302	134	110	71	42	72	929	551	110	584	666	1132	710			
Newly built ...	2	2	—	—	1	1	—	—	—	—	2	—	—	2	—	2	—	—	—	—	14	8	—	1	11	16	2		
Entirely remodelled internally ...	—	—	—	1	2	—	8	—	—	2	7	—	12	4	—	5	2	—	—	39	29	—	19	35	55	19			
Not now used for milk beast ...	—	—	—	—	2	3	2	—	—	1	1	—	—	2	—	3	—	—	—	—	—	2	—	6	7	—			
Where new floors were laid ...	7	2	1	2	3	1	—	3	1	5	7	1	12	4	—	5	—	2	2	40	78	5	17	9	110	24			
Where floors were repaired ...	4	—	2	2	2	—	2	—	1	12	7	—	1	—	—	5	4	2	6	6	11	8	4	1	35	15			
Where feeding troughs were repaired or provided ...	—	2	—	2	2	—	1	3	1	—	7	—	12	4	—	1	2	1	5	12	2	2	14	—	71	15			
Where lighting and ventilation were improved ...	3	2	1	—	3	4	2	3	1	5	7	1	12	4	1	4	4	3	3	55	21	2	17	9	140	29			
Where lofts were removed ...	—	—	—	—	1	—	—	—	2	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	6	1			
Where loft floors were improved ...	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	2	—			
Where drain inlets were removed to outside ...	—	2	—	—	1	1	1	—	—	—	4	—	7	2	—	2	4	—	2	7	5	—	—	—	—	17	4		
Where drainage was provided ...	2	2	—	2	—	1	3	—	2	—	3	—	8	—	—	2	2	3	—	18	3	—	3	—	—	9	15		
Where walls were rendered in cement ...	6	—	—	2	2	3	3	3	2	5	8	1	12	4	—	4	2	6	3	35	14	3	16	10	76	1			
Where standings were paved ...	—	2	1	2	—	1	—	—	2	2	7	—	12	4	—	3	—	4	2	36	29	5	17	8	37	24			
Where approach paving was repaired ...	—	1	—	1	1	—	—	—	—	2	3	1	10	—	—	4	1	4	6	13	2	1	10	3	27	13			
Which were cleaned up ...	—	—	14	2	—	18	—	—	2	10	12	—	38	—	1	10	2	12	54	250	31	6	38	—	51	4			
Where manure dump was moved ...	2	2	6	—	1	4	1	—	—	2	2	1	2	—	—	7	1	6	2	2	6	7	1	5	16	4			
Where manure dump was improved ...	—	—	—	1	1	—	—	—	—	3	—	—	1	—	—	5	—	10	2	1	5	—	—	—	19	1			
Where work is completed ...	2	2	—	3	8	19	16	—	1	5	7	1	12	6	—	9	2	10	all	140	81	21	19	10	76	—			
Where work is in progress ...	2	—	2	—	1	—	—	3	1	—	5	—	—	—	1	3	1	—	—	2	4	2	1	7	21	—			
FARMS.																													
Number in District ...	55	18	14	42	25	41	65	35	?	49	37	12	18	?	75	60	46	31	74	484	318	169	455	?	610	349			
Where new dairies were built ...	4	—	—	1	1	5	9	1	—	1	4	1	2	4	3	3	1	—	—	13	10	6	5	11	33	4			
Where dairies were improved ...	—	—	—	—	1	9	3	—	—	1	1	—	1	—	—	—	—	4	2	5	12	2	7	1	21	6			

DAIRIES, COWSHEDS, AND MILKSHOPS.

DETAILS OF WORK DONE BY LOCAL SANITARY INSPECTORS
DURING 1935.

TABLE XXX.

<i>Urban Districts.</i>	<i>Number on Register.</i>	<i>Inspections made.</i>	<i>Notices served.</i>	<i>Nuisances abated.</i>
Alfreton	70	196	5	5
Ashbourne	31	62	18	24
Bakewell	31	74	1	4
Belper	42	80	—	1
Bolsover	51	152	10	23
Buxton (Boro') ...	81	358	49	53
Chesterfield (Boro')	293	631	56	47
Clay Cross	44	62	6	16
Dronfield	10	40	3	3
Glossop (Boro') ...	109	483	20	20
Heanor	127	199	25	20
Ilkeston (Boro') ...	73	44	2	2
Long Eaton	51	380	32	57
Matlock	302	76	—	—
New Mills	84	20	4	6
Ripley	64	78	14	54
Staveley	46	—	—	—
Swadlincote	31	174	62	62
Wirksworth	55	64	19	27
<i>Urban Districts...</i>	1595	3173	326	424
<i>Rural Districts.</i>				
Ashbourne	838	131	—	—
Bakewell	484	466	80	120
Belper	460	438	23	22
Blackwell	367	274	16	20
Chapel-en-le-Frith..	457	312	44	20
Chesterfield	666	462	103	97
Clowne	90	261	41	41
Repton	610	1073	215	160
Shardlow	410	229	61	33
<i>Rural Districts ...</i>	4382	3646	583	513
<i>Urban Districts...</i>	1595	3173	326	424
<i>Whole County ...</i>	5977	6819	909	937

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Mr. R. W. Sutton, B.Sc., 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, and is also appointed under the Agricultural Produce (Grading and Marking) Act, 1928, and the Merchandise Marks 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 1935 :—

<i>Total samples analysed.</i>	<i>Percentage adulterated.</i>	<i>Milk samples.</i>	<i>Percentage adulterated.</i>
2056	5·4	905	9·7

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

<i>Non-fatty solids.</i>	<i>Fat.</i>	<i>Total solids.</i>
8·78	3·61	12·39

The percentage adulteration is slightly higher than last year.

Two samples of Crustless Cheese (one taken informally) were found to be seriously contaminated with tin from the metal foil in which the cheese was wrapped. This cheese was condemned as unfit for food and the information supplied to the local Sanitary Inspector. The remaining cartons of this cheese were duly seized and destroyed.

All appropriate samples were examined for preservatives, and the provisions of the Regulations appear to be well observed by traders in the County.

Four samples of Fruit Wine contained a slight excess of Benzoic Acid preservative.

One sample of Cordial contained Sulphur Dioxide preservative slightly in excess of the amount permitted.

Four samples of drugs failed to reach the standard of the British Pharmacopœia.

Water Samples.—During the year, 59 samples of water and effluents were examined for the various Committees of the County Council, 111 were analysed for the Urban and Rural District Councils in the County, and 37 samples were submitted for analysis by private residents.”

STATISTICAL INFORMATION RELATING TO ISOLATION HOSPITAL COMMITTEES APPLYING FOR A GRANT.
Year ended March 31st, 1935.

TABLE XV.

Name of Hospital.	Belper.	Penmore.	Dronfield.	Mastin Moor.	Morton.	Langwith.	High Peak	Shardlow.	Repton.	Ilkeston.	Haddon.	
Total Number of Beds in Hospital ...	83	59	28	28	38	36	46	50	36	25	35	
Number of Beds on basis of 1 for every 144 square feet ...	33	50	18	18	18	24	18	33	18	10	16	
Number of beds on which Grant is based † ...	18	45	18	18	18	24	14	27	15	10	16	
Population of Hospital District ...	84,082	64,720	169,387				32,432	74,290	39,010	32,880	38,649	
Have Admitted during year ended March 31st, 1935:—												
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	
Scarlet Fever ...	245	73	88	83	44	76	36	122	79	23	51	
Diphtheria ...	30	54	31	99	83	44	44	186	46	23	29	
Typhoid Fever ...	—	3	6	8	3	2	1	8	2	—	1	
Other Diseases ...	2	24	1	4	1	—	3	—	—	1	7	
TOTALS ...	277	154	126	194	131	122	104	316	127	47	88	
Average number of patients in Hospital each day ...	31.46	12.26	10.31	18.92	7.28	11.41	9	36	10.28	4.85	8.2	
Permanent Staff residing in Hospital ...	16	20	10	12	14	12	9	20	8	6	10	
Non-resident Staff in addition to Clerk and Doctor ...	3	6	1	1	1	2	3	1	2	1	1	
Average number of days each case in Hospital ...	41.06	30.89	30.96	40.45	21.64	35.11	24	32	28.19	38.68	30.26	
SUMMARY OF EXPENDITURE:—												
	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.	Cost.	Average Cost per patient per week.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1. Provisions ...	867 10 7	397 12 6	355 13 3	422 8 7	425 1 2 6	331 11 2	263 11 3	1,095 11 9	297 11 1	223 17 8	319 15 0	
2. Drugs and Medical Appliances ...	138 1 8	76 2 5	84 3 2	273 5 7	91 4 10	297 1 10	42 1 9	269 2 10	104 3 11	39 3 1	54 2 7	
3. Furniture, Linen, &c. ...	624 7 8	*668 19 1	250 9 4	118 2 5	155 8 2	623 1 10	169 7 3	483 5 2	261 9 9	160 12 8	213 10 0	
4. Fuel ...	489 6 0	302 9 6	90 3 4	189 3 10	114 6 0	99 3 4	202 8 8	499 5 4	164 6 2	153 12 1	223 10 0	
5. Salaries ...	1,011 19 8	1,821 2 17 1	755 1 8 2	888 18 1	869 2 5 5	816 1 7 6	1,027 2 3 10	1,709 18 3	614 1 3 0	690 2 7 7	955 2 4 9	
6. Administration ...	254 3 1	354 11 1	209 7 10	263 5 4	298 15 9	339 8 1	273 11 8	531 5 8	197 7 4	119 9 5	179 8 3	
7. Renewals and Repairs ...	475 5 10	—	39 1 5	243 4 11	58 3 1	338 11 5	—	—	—	68 3 5	—	
8. Loans—Repayment and Interest ...	—	312 9 9	—	—	—	—	485 16 4	—	547 5 10	—	984 2 6 2	
9. Transport ...	64 9	16 6	10 4	23 5	7 4	18 7	44 1 10	79 10	40 1 6	46 3 8	15 8 1	
10. Miscellaneous ...	—	—	—	—	—	—	—	—	—	—	2 1	
TOTALS ...	4,522 2 15 3	3,886 6 1 11	1,792 3 6 10	2,419 2 9 2	2,008 5 6 1	3,246 5 9 5	2,020 4 6 3	5,212 2 15 8	1,677 3 2 9	1,408 5 11 7	2,944 6 18 1	
Provisions (Patients and Staff) per head per week ...	7 1	4 9	6 9	5 3	7 8	5 5	5 7	7 6	7 1	4 8	6 9	
Name of Medical Superintendent ...	R. C. Allen	J. A. Stirling.	John R. Graham.				N. Kennedy	C. H. Latham	J. A. Watt	H. L. Barker.	H. G. Watson.	
Name of Clerk ...	G. Pym	J. L. Feather.	W. E. Wakerley.				W. B. Bunting	J. Spencer	A. E. Gilbert	E. I. E. Williams	B. G. Codge.	
Grant due in accordance with Report of Council, April 17th, 1907.	200 0 0	369 0 0	769 18 0				155 0 0	290 0 0	165 6 0	89 14 0	172 4 0	

* Includes Greenhouse, £150.

W. M. ASH.
JOHN HUNT.

TUBERCULOSIS SCHEME.

I regret to have to report that Dr. P. Heffernan, one of the whole-time Tuberculosis Officers, had to resign during the year on account of illhealth; he had been in the service of the County Council for nearly 17 years. I cannot speak too highly of his services, and he was held in high esteem both in this County and elsewhere. The Tuberculosis Service has suffered a severe loss by his retirement and by the death of Dr. Nicholson in 1934. Thus, within a period of a little over 12 months, the service has lost two of its three whole-time officers, but valuable assistance was rendered by Dr. J. H. Jones, who acted as *locum-tenens* Tuberculosis Officer for a period of over nine months until Dr. W. H. Morton, who was appointed permanently in place of Dr. Heffernan, was able to take up duty in this County early in 1936. Before coming here, Dr. Morton was Assistant Tuberculosis Officer in Manchester.

As mentioned in my Report for 1935, following the death of Dr. Nicholson, alterations in the medical staff of the service were made in order to bring the dispensary and sanatorium into closer relationship, the Medical Superintendent of Walton Sanatorium taking over the duties of Tuberculosis Officer for the Chesterfield Dispensary area (the North-Eastern part of the County), and, in order to relieve him of certain duties at the Sanatorium, an additional Medical Officer was appointed there. Thus the medical staff of the combined Sanatorium and Chesterfield Dispensary area is as follows :—

- (a) Medical Superintendent and Tuberculosis Officer, and
- (b) Two Assistant Medical Officers at the Sanatorium, one senior and the other junior.

This arrangement came into full operation on May 1st, 1935.

The Tuberculosis Scheme consists of two main units, viz., Dispensary and Institutional.

DISPENSARY UNIT.

This unit now consists of ten dispensaries, which, together with nine orthopædic clinics, are geographically situated so as to serve the whole of the administrative County.

The following changes have taken place in the Dispensary unit during the year :—

Alfreton Dispensary.—An entirely new dispensary was opened on June 21st, 1935, in rooms which had become available at the Alfreton Clinic. This Dispensary serves a population of approximately 69,300, and relieves patients in this somewhat congested area of the necessity of travelling comparatively long distances to either Chesterfield, Derby, or Ilkeston Dispensaries. The provision of this Dispensary appears to be amply justified.

Burton Dispensary.—Owing to the premises in which this Dispensary was held, jointly with the Burton Corporation, being

required by the owners for other purposes, it was as a temporary measure transferred to the Public Assistance Institution, Burton-on-Trent, pending the completion of new premises which were being built by the Burton Corporation. These new premises were ready for occupation on April 1st, 1936.

Artificial Pneumothorax Treatment at Dispensaries.

In my Report for last year I mentioned that arrangements had been made for artificial pneumothorax refill operations to be continued at Chinley and Derby dispensaries after the treatment had been commenced at the Sanatorium. Dr. Heffernan commenced the work at Chinley shortly before his illness, but when he went off duty it had to be discontinued; however, with the appointment of Dr. Morton, the treatment there has been re-commenced.

As certain minor alterations had to be carried out at Derby Dispensary, it was not possible to commence this form of treatment there until March, 1935. Since then, and up to the end of 1935, 62 refill operations were performed. This work appears to be growing rapidly for during the first three months of 1936 no fewer than 61 refills were given. Up to the present, Saturday mornings have been devoted to this work, but it seems probable that additional sessions will be required.

The giving of refills at Clinics has greatly relieved the work of the Sanatorium staff and has saved patients many long journeys.

Dispensary Statistics.—Details of the work done at or in connection with the dispensaries during the year are given in Table T.I. together with the average figures for the last five years. Some idea of the loss to the service caused by illness preceding the death of Dr. Nicholson and the retirement of Dr. Heffernan is to be noticed in the reduction in the number of visits by the Tuberculosis Officers to the homes of patients and in the number of contact examinations, which figures respectively have fallen from 1,849 in 1930 to 978 in 1935, and 1,762 in 1930 to 569 in 1935.

The number of cases of tuberculosis in the County at the end of the year as revealed by the registers of the district medical officers of health was 2,993; of this number, 1,877 cases (1,353 pulmonary and 524 non-pulmonary) were on the dispensary registers, and consequently under the supervision of the Tuberculosis Officers, so that 62·71% of the persons suffering from tuberculosis took advantage of the County Scheme—about the same percentage as last year.

During the year, 980 new cases attended at the Dispensaries, and of this number 324 (33·06%) were found to be suffering from tuberculosis. Examination of contacts revealed a further 7 definite and 9 doubtfully tuberculous cases. Of the total number of 331 new definite cases, 265 were pulmonary and 66 were non-pulmonary; of the pulmonary cases, only 14 were under 15 years of age, whilst of the non-pulmonary, 36 were under 15 years of age. There has

been a remarkable reduction in the number of children found to be suffering from both pulmonary and non-pulmonary tuberculosis.

New cases notified as suffering from tuberculosis, or coming to my knowledge otherwise than by notification, numbered 500, 66% of which came under the tuberculosis scheme. 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 81.9. Taking only the pulmonary cases, 72.8% of the new cases coming to my knowledge attended at the Dispensaries, and, again, excluding those who died before my hearing of them or within 14 days of notification, the figure is increased to 85.2%.

Of the 1,353 pulmonary cases on the dispensary registers at the end of 1935, 875, or a percentage of 64.7, either were or had been positive sputum cases.

INSTITUTIONAL UNIT.

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

TABLE T. II.

NAME OF INSTITUTION.	FOR PUL- MONARY CASES.		FOR NON-PUL- MONARY CASES.		TOTAL
	Adults.	Children under 15	Adults.	Children under 15	
Derbyshire Sanatorium An additional 10 shelter beds are available during the summer time.	116	10	—	—	126
Penmore Hospital An additional 4 shelter beds are available during the summer time.	14	—	—	—	14
Whitworth Hospital... ..	6	—	—	—	6
Bretby Hall Orthopædic Hospital	—	—	32	65	97*
Poor Law Institutions.					
Ashbourne	1	—	—	—	1
Bakewell	1	—	—	—	1
Belper	8	—	—	—	8
Chapel-en-le-Frith... ..	3	—	—	—	3
Chesterfield	7	1	1	2	11
Glossop (no beds specially pro- vided for the treatment of tuberculosis)	—	—	—	—	—
Hayfield do.	—	—	—	—	—
Shardlow	4	—	4	—	8
Total	160	11	37	67	275

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

TABLE T.III.

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.
Number of doubtfully tuberculous cases ad- mitted for observation.	Adult males	4	18	20	—	2
	Adult females	2	4	5	—	1
	Children	6	10	11	—	5
	Total	12	32	36	—	8
Number of Patients suffering from Pulmonary Tuber- culosis.	Adult males	72	156	131	36	61
	Adult females	55	142	128	23	46
	Children	10	15	18	2	5
	Total	137	313	277	61	112
Number of patients suffering from Non-Pulmonary Tuberculosis.	Adult males	16	23	21	1	17
	Adult females	11	21	19	1	12
	Children	52	44	48	—	48
	Total	79	88	88	2	77
GRAND TOTAL		228	433	401	63	197

TABLE T IV.

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

Classification on admission to the Institution			Condition at time of discharge.	Duration of Residential Treatment in Institutions.															Grand Totals.
				Under 3 months but exceeding 28 days.			3—6 months			6—12 months			More than 12 months			Totals.			
				M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Pulmonary Tuberculosis	Class TB. minus	Quiescent ...	9	3	3	2	1	3	1	1	1	—	—	—	12	5	7	24	
		Not quiescent	2	9	—	5	7	6	3	—	—	—	—	1	10	16	7	33	
		Died in Institution	3	—	—	1	—	—	—	—	—	—	—	—	4	—	—	4	
	Class TB. plus Group 1	Quiescent ...	1	—	—	—	2	—	1	—	1	—	—	—	2	2	1	5	
		Not quiescent	4	2	—	5	4	1	3	1	—	1	—	—	13	7	1	21	
		Died in Institution	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	
	Class TB. plus Group 2	Quiescent ...	1	1	—	3	—	—	—	—	—	1	—	—	5	1	—	6	
		Not quiescent	19	12	—	18	31	—	17	13	—	2	5	1	56	61	1	118	
		Died in Institution	1	1	—	—	—	—	—	1	—	—	—	—	1	2	—	3	
	Class TB. plus Group 3	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent	8	6	—	14	18	—	6	4	—	2	2	—	30	30	—	60	
		Died in Institution	14	10	1	5	3	—	5	1	—	1	—	—	25	14	1	40	
Non-Pulmonary Tuberculosis	Bones and Joints	Quiescent ...	3	2	2	—	2	2	2	1	4	5	2	12	10	7	20	37	
		Not quiescent	2	2	2	1	—	2	—	1	1	1	2	—	4	5	5	14	
		Died in Institution	1	1	—	—	—	—	—	—	—	—	—	—	1	1	—	2	
	Abdominal	Quiescent ...	—	1	1	—	—	1	—	1	—	1	—	—	1	2	2	5	
		Not quiescent	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1	
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Other Organs	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent	1	—	—	1	—	—	—	—	—	—	—	—	2	—	—	2	
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Periphe- ral Glands	Quiescent ...	—	2	1	1	—	6	—	—	4	—	—	1	1	2	12	15	
		Not quiescent	—	—	1	—	—	1	—	1	1	—	—	—	—	1	3	4	
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

TABLE T V.

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

Diagnosis on discharge from observation	For Pulmonary Tuberculosis.						For Non-Pulmonary Tuberculosis						Totals		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous ...	2	-	-	4	-	2	-	-	-	1	-	1	7	-	3
Non-tuberculous	1	-	-	10	2	-	-	-	1	1	3	7	12	5	8
Doubtful ...	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-
Totals	3	-	-	15	2	2	-	-	1	2	3	8	20	5	11

WALTON SANATORIUM.

The Medical Superintendent of the Institution, Dr. A. Niven Robertson, reports on the work at this Institution during 1935, as follows :—

CLINICAL STATISTICS.

				Males.	Females.	Children.	Total.
Admissions	...	...	...	145	119	12	276
Discharges	...	...	...	160	116	19	295

Average number of beds occupied—124.8.

Average length of stay of the patients—145 days.

Average gain in weight of the patients—10 lbs., 1 ozs.

Patients Discharged.

MINISTRY OF HEALTH CLASSIFICATION. TABLE D.S.I.

	M.	F.	C.	Total.
PULMONARY.				
1. Class T.B. Minus ...	27	22	15	64
2. Class T.B. Plus ...				
Group I. ...	16	11	2	29
Group II. ...	62	60	1	123
Group III. ...	41	21	1	63
NON-PULMONARY.				
Bones and Joints ...	—	—	—	—
Abdominal ...	1	—	—	1
Other Organs ...	1	—	—	1
Peripheral Glands ...	—	—	—	—
NON-TUBERCULOUS ...	11	2	—	13
DOUBTFULLY TUBERCULOUS	1	—	—	1
TOTALS ...	160	116	19	295

General Results of Treatment.

Quiescent ...	37
Not Quiescent ...	204
Died in the Institution ...	40
Not Tuberculous ...	13
Doubtfully Tuberculous ...	1
	—
	295
	—

Cases Admitted for Diagnosis.

Twenty-four cases were under observation during the year, with the following results :—

Pulmonary Tuberculosis ...	8
Intestinal Tuberculosis ...	1
Doubtfully Tuberculous ...	1
Bronchiectasis ...	3
Bronchitis ...	4
Malignant Disease of Lung ...	4
Malignant Disease Larynx and Glands ...	1
No active disease ...	1
Diagnosis not completed at end of year ...	1
	—
TOTAL ...	24
	—

Laboratory Work.

1,915 sputums and 1,620 urines were examined during the year. In 17 cases, sedimentation tests, precipitation tests and Arneth counts were done to help in the elucidation of the diagnosis. No absolutely reliable diagnostic test has yet been evolved by research workers to help us in clinical diagnosis. 14 differential blood counts were done and 18 blood sugar estimations by Maclean's method. 10 urea concentration tests were done.

X-Ray Work.

690 X-Ray photographs were taken during the year and 1,474 screenings were done in artificial pneumothorax cases.

As the surgical work increases so also does the X-Ray work. All cases require screening before each A.P. refill to see the amount of collapse, the position and condition of adhesions, amount of mediastinal displacement, presence of fluid, etc., and all cases require screening before and after 'Phrenic' evulsions to see the effect on the action of the diaphragm. Lipiodol cases require X-Ray photographs after Lipiodol in addition to the usual X-Ray taken on admission.

Ultra Violet Light Treatment.

TABLE D.S.II.

<i>Disease.</i>	<i>No. of Cases.</i>	<i>Cured.</i>	<i>Much Improved</i>	<i>Improved</i>	<i>I.S.Q.</i>	<i>Worse.</i>
Hilus Tubercle. ...	4	—	—	4	—	—
Glands in Neck ...	1	1	—	—	—	—
Lupus ...	2	—	1	—	1	—
Pleuritis ...	2	—	1	1	—	—
T.B. Peritonitis ...	2	—	1	—	1	—
Pul. Tub. ...	1	—	—	1	—	—
T.B. Testis ...	1	—	—	1	—	—
Total ...	13	1	3	7	2	—

Gold Treatment.

5 patients had treatment by Solganal B Oleosum. 1 much improved, 3 improved and 1 no effect. In 2 cases the positive sputum became negative.

9 patients were treated by Allochrysine. 4 improved. In 3 cases positive sputum became negative on discharge. 2 cases no effect. In the final 3, the course had to be abandoned too soon to have any influence.

2 patients had Myocrisin. 1 had to abandon treatment because of a pustular rash, the other had only three doses.

The most suitable cases for Gold therapy are the active exudative type of case with a positive sputum and some degree of toxæmia and cases of Artificial Pneumothorax developing early exudative disease in the good lung. In the latter, the fresh disease may be arrested by the Gold treatment so that the A.P. may be continued on the diseased lung.

In some cases the effect is most striking and is without doubt due to the action of the Gold. I will cite two cases. The first case was steadily going downhill. He was toxic, losing weight and the prognosis appeared fatal. In a few weeks after starting Gold he improved, steadily put on weight and left five years ago with a negative sputum. He has kept well ever since, been working at his old occupation for some years and his sputum has been negative for two years. The second case is that of a patient who is still in Sanatorium. He made no progress until he was put on Allochrysine. Since then he has never looked back and has a persistently negative sputum.

Phrenic Evulsion.

Ten patients had this operation performed by Mr. Milward, in 1935. 3 right-sided cases. 7 left-sided cases. 7 patients were in the second stage and 3 in the third stage of the disease. Paralysis of the diaphragm was obtained in all cases and the average rise of the diaphragm compared with the other side on inspiration was $1\frac{1}{2}$ inches. All were T.B. + before operation. Of these, one became sputum free, four have since died from the disease.

Phrenic evulsion may be tried in most cases where an artificial pneumothorax has been found impossible. In some cases it may be preferred to artificial pneumothorax. It is also useful as a sequel to A.P.

Artificial Pneumothorax.

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
New cases	14	19	33
Old cases	15	17	32
Refill operations	537	593	1,130
Gas replacements	59	9	68
Depneumothorax	15	3	18
Pressure readings	16	14	30

If one compares the above with Table D.S. III. in last year's report, it shows that the number of cases treated by this method again increased in 1935, and that it increases every year.

It is a treatment which involves long and arduous determination on the part of both patient and doctor and is liable to many complications. It has also considerable risks. The criterion for its inception is that the risk of death from the disease is greater than the risk of the operation. It is noticeable how patients who have once started it rarely wish to relinquish their pneumothorax as they soon realise the benefits and feel safer if they continue with it. It is, however, as difficult a question to determine the end of a pneumothorax as its beginning.

Thoracoplasty.

One patient was transferred to the Chesterfield Royal Hospital for an upper Thoracoplasty. This was very successful in collapsing the cavity in the lung and the patient has done well.

Lipiodol.

Lipiodol was used intrabronchially in 4 cases, 3 given by the nasal route, 1 by the cricothyroid route. In all 4 cases the X-Ray taken following Lipiodol gave the definite diagnosis of bronchiectasis.

Dental Work.

There were 114 extractions, 1 impression, 4 casings, 5 scalings, 16 examinations and 1 filling.

Meteorological Data.

The Laboratory Assistant still keeps daily meteorological records which are of continuing interest as, of course, open-air treatment depends largely on meteorological factors.

Daily Records.

Highest Daily Wind	Feb. 15th...	24.13 miles per hour.
" " Dry Kata	" 15th...	49.3
" " Wet Kata	Oct. 19th...	72.5
Lowest Daily Dry Kata	Aug. 7th...	3.4
" " Wet Kata	" 7th...	21.3
Highest Outdoor Temp., 3 p.m. ...	July 13th...	88° F.
Lowest " " " "	Dec. 23rd...	28° F.
Highest Radiant Heat	Aug. 7th...	137.3° F.
Greatest amount of Ultra-violet rays	" 7th...	8
Highest Rainfall	Sept. 24th...	1.17 inches.
" Maximum Temperature	July 13th...	88° F.
Lowest Minimum Temperature ...	Dec. 23rd...	17° F.
Day of Maximum sunshine	July 7th...	14.7 hours.
Total Rainfall for 1935	...	34.13 inches.

Monthly Records.

Highest Monthly Dry Kata	February ...	30.8
" " Wet Kata	" ...	48.2
" Average Wind	" ...	11.24 miles per hour
" " Outdoor Temp.	July...	70.1° F.
Month with most Ultra-violet rays ...	" ...	76
Highest monthly radiant heat	August ...	88.3° F.
Month with most sunshine	July...	8.3 hours per day.
Highest Rainfall	November ...	6.15 inches.
" Barometric Pressure	January ...	29.63 "
" Relative Humidity	December ...	88.7%.

February had the greatest cooling power and highest wind. Cooling power depends largely on the amount of wind.

July had the greatest warmth, sunshine and ultra-violet light, but August had more radiant heat.

The greatest gain in weight was in the month of October and September took second place. This corresponds to the ten-yearly average given in last year's report.

Administrative Changes in Staff.

Dr. Williams took up duties on May 1st as Senior Assistant Medical Officer when I took over the full duties of Tuberculosis Officer for the N.E. Derbyshire Region.

Dr. Waddy was appointed Junior Assistant Medical Officer at the beginning of October in place of Dr. Glover, resigned.

Improvements in Buildings and Grounds.

The old wooden poultry sheds were pulled down and a new concrete up-to-date poultry house erected in its place by the engineer at the Sanatorium. This work was done very well by our own Staff and has removed the eyesore of the old broken-down huts that served as hen houses.

The appearance of the grounds has been enhanced by the asphaltting of all the drives and paths round the various wards and by the planting of bulbs of various sorts along the drives.

The aspect of the Male Block has been much improved by the patients making a new terrace along the front with steps leading down to a garden having a crazy pavement path.

New glass doors are being erected in two verandahs and the appearance of these verandahs is much improved as a result.

Patients' Recreation.

Each block has its own wireless, so that in the recreation hours all up-patients can listen in.

We are indebted to various people who gave Concerts periodically throughout the year.

In summer, the male patients play Bowls on the Top Block lawn and Croquet is played on the Womens' Block.

Various indoor recreations are provided. The patients have a monthly Whist Drive and there is a Billiards Table on the Men's Ward.

School.

Miss Sherwin continues to do good work by teaching the children in the open-air school. The walls of the school are decorated with pictures of instructional value. In winter the children sit wrapped up in blanket costumes and hoods.

Nursing Staff.

Our nurses are trained for the Tuberculosis Association Certificate. Lectures are given by the Senior Assistant Medical Officer on Tuberculosis, by the Junior Assistant Medical Officer on Anatomy, Physiology and Hygiene, and by the Matron on Practical Nursing. These lectures were started in 1925 and the following number has passed since that date, 28 passes, 5 being with Honours. There have been only 8 failures.

Matron takes a great interest in the future nursing careers of our Staff and many now hold responsible Matrons' and Sisters' posts in various hospitals in Britain.

TABLE D.S. III.

Condition of Patients discharged from the Derbyshire Sanatorium, Chesterfield, from 1915-1934 inclusive.

YEAR OF DISCHARGE FROM SANATORIUM.																		
Condition in 1935.	1915-1927.		1928.		1929.		1930.		1931.		1932.		1933.		1934.		Total.	
	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.
Cured ...	1277	39.59	68	26.78	51	17.00	26	9.74	7	2.72	1	.42	1	.45	...	...	1431	28.53
Arrested ...	68	2.11	27	10.63	35	11.67	56	20.97	64	24.91	52	21.75	38	16.97	12	4.86	352	7.02
Not arrested ...	24	.74	5	1.97	16	5.33	12	4.49	23	8.95	46	19.25	70	31.25	156	63.15	352	7.02
Condition not ascertain'd	12	.37	3	1.18	4	1.33	4	1.50	5	1.95	1	.42	7	3.12	1	.40	37	.74
Lost sight of or not																		
Tuberculous ...	622	19.28	41	16.14	48	16.00	58	21.72	32	12.45	41	17.16	27	12.05	20	8.10	889	17.73
Dead ...	1223	37.91	110	43.30	146	48.67	111	41.58	126	49.02	98	41.00	81	36.16	58	23.49	1953	38.96
Total ...	3226	100.00	254	100.00	300	100.00	267	100.00	257	100.00	239	100.00	224	100.00	247	100.00	5014	100.00

DERBYSHIRE SANATORIUM.

TABLE D.S. IV.

Comparative Statement of Cost.

Year ending March 31st:—

Average daily number of		1932.		1933.		1934.		1935.		1936.	
do.	do. Patients Staff	124.4 37.6		119.4 37.8		124.9 38.0		129.0 38.0		122.2 38.0	
		Total Cost.	Cost per week per Patient.	Total Cost.	Cost per week per Patient.	Total Cost.	Cost per week per Patient.	Total Cost.	Cost per week per Patient.	Total Cost.	Cost per week per Patient.
		£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.
Salaries and Wages	...	4,629	0 14 3	4,741	0 15 2	4,922	0 15 1	4,981	0 14 10	4,963	0 15 6
Provisions	...	3,886	0 12 0	3,709	0 11 11	3,813	0 11 9	4,029	0 12 0	4,241	0 13 3
Drugs and Medical Appliances	...	472	0 1 5½	598	0 1 11	528	0 1 8	511	0 1 6	601	0 1 10½
Fuel, Light and Water	...	1,234	0 3 10	1,053	0 3 4	1,122	0 3 5	1,124	0 3 4	1,408	0 4 5
Domestic and Laundry	...	511	0 1 7	566	0 1 10	630	0 1 11	572	0 1 8	609	0 1 11
Renewals and Repairs	...	256	0 0 9½	438	0 1 5	446	0 1 5	276	0 0 10	712	0 2 3
Miscellaneous	...	589	0 1 10	540	0 1 9	580	0 1 9	414	0 1 3	654	0 2 0½
Rates, Taxes and Insurance	...	638	0 2 0	605	0 1 11	632	0 1 11	640	0 1 11	541	0 1 8
Loan Repayment and Interest	...	896	0 2 9	894	0 2 10	707	0 2 2	516	0 1 6	469	0 1 6
Gross Totals	...	13,111	2 0 6	13,144	2 2 1	13,380	2 1 1	13,063	1 18 10	14,198	2 4 5
Deduct Profit on Farm Account	...	17	0 0 0½	144	0 0 5½	149	0 0 5½	234	0 0 8	320	0 1 0
Deduct other Income	...	55	0 0 2	93	0 0 3½	66	0 0 2½	72	0 0 3	80	0 0 3
Net Cost	...	13,039	2 0 3½	12,907	2 1 4	13,165	2 0 5	12,757	1 17 11	13,798	2 3 2
Food per person per week	...	...	9/2d.	...	9/-	...	9/-	...	9/3d.	...	10/1½d.

BRETBY HALL ORTHOPÆDIC HOSPITAL.

Dr. Lennane, Medical Superintendent of this Institution, reports as follows :—

TABLE B.I.

					<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
No. of Patients in Hospital at Midnight, Dec. 31, 1934.							
Tubercular	...	...	...	...	53	33	86
Non-Tubercular	...	...	...	...	27	21	48
					—	—	—
					80	54	134
					—	—	—
Admissions during 1935.							
Tubercular	...	...	...	...	50	47	97
Non-Tubercular	...	...	...	...	60	77	137
					—	—	—
					110	124	234
					—	—	—
No. of patients treated during 1935.							
Tubercular	...	...	...	...	103	80	183
Non-Tubercular	...	...	...	...	87	98	185
					—	—	—
					190	178	368
					—	—	—
No. of patients discharged during 1935.							
Tubercular	...	...	...	...	53	42	95
Non-Tubercular	...	...	...	...	64	72	136
					—	—	—
					117	114	231
					—	—	—

Of the 234 admissions, 20 tubercular and 13 non-tubercular cases were re-admissions. The reasons for their re-admittance were as follows :—

Relapse of original condition	...	...	...	...	...	7
Development of fresh lesion	...	...	...	...	...	2
Further treatment	...	...	...	...	...	10
Re-application of plasters or other splints	...	...	...	...	...	11
Re-admitted from other hospitals	...	...	...	...	...	3
						—
						33
						—

TABLE B.II.

Cases admitted as Non-Pulmonary Tuberculosis treated during 1935.				Cases of Non-Tubercular Diseases treated during 1935.			
<i>Site of Lesion.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>	<i>Disease.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Spine ...	34	18	52	Rickets ...	9	5	14
Hip ...	24	28	52	Talipes ...	10	7	17
Knee ...	12	7	19	Poliomyelitis ...	23	27	50
Other bones and joints ...	13	7	20	Spastic Paraplegia...	5	4	9
Abdomen ...	1	6	7	Torticollis ...	3	5	8
Glands... ..	19	13	32	Scoliosis ...	10	14	24
Skin ...	—	1	1	Perthes' Disease	4	1	5
				Miscellaneous ...	23	35	58
Total ...	103	80	183	Total ...	87	98	185

There were four deaths during the year, as shown in the following Table:—

TABLE B.III.

<i>Lesion.</i>	<i>Cause of Death.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Tubercular Spine ...	Tubercular Peritonitis ...	2	—	2
Tubercular Spine ...	Amyloid Disease ...	1	—	1
Tubercular Spine ...	Pulmonary Tuberculosis ...	—	1	1
		3	1	4

The following Table shows the location of disease of the patients discharged :

TABLE B.IV.

(a) TUBERCULAR.

<i>Site of Lesion.</i>	<i>Diagnosis not Confirmed.</i>		<i>Discharged.</i>		<i>Died.</i>		<i>Total.</i>
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
Spine ...	2	4	13	3	3	1	26
Hip ...	2	2	12	9	—	—	25
Knee ...	1	3	3	2	—	—	9
Other Bones & Jts	2	2	4	2	—	—	10
Abdomen ...	—	—	2	3	—	—	5
Lymph Glands ...	—	—	12	12	—	—	24
Total ...	7	11	46	31	3	1	99

(b) NON-TUBERCULAR.

<i>Disease.</i>	<i>Discharged.</i>		<i>Died.</i>		<i>Total.</i>
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
Rickets ...	7	7	—	—	14
Torticollis ...	2	5	—	—	7
Talipes ...	11	5	—	—	16
Poliomyelitis ...	17	14	—	—	31
Spastic Paraplegia ...	5	2	—	—	7
Scoliosis ...	6	15	—	—	21
Miscellaneous ...	16	24	—	—	40
Total ...	64	72	—	—	136

Average length of stay of patients :—

Tubercular Cases ...	307 days.
Non-Tubercular Cases ...	146 „
All Cases ...	214 „

During the year the following operations were performed:—

Stabilisation of foot	...	...	...	...	12
Open correction of club foot	...	...	...	...	1
Wrenching	...	...	...	...	27
Tenotomy of Tendons	...	...	...	...	41
Manipulation	...	...	...	...	10
Transplantation of Tendons	...	...	...	...	8
Osteotomy	...	...	...	...	25
Stoeffel's Operation	...	...	...	...	2
Osteoclasis	...	...	...	...	8
Sequestrectomy	...	...	...	...	4
Arthrodesis of joints	...	...	...	...	3
Excision of glands	...	...	...	...	9
Skin graft	...	...	...	...	3
Bone graft	...	...	...	...	1
Excision of coccyx	...	...	...	...	1
Exploration of Psoas Abscess	...	...	...	...	3
Correction of Hammer Toes	...	...	...	...	6
Removal of nail	...	...	...	...	4
Incision of abscess	...	...	...	...	4
Amputation of small digits	...	...	...	...	5
Lumbar Puncture	...	...	...	...	1
Removal of Urethral Calculus	...	...	...	...	1
Others	...	...	...	...	4
Total					183

Consulting Surgeon.

Mr. Naughton Dunn, the consulting surgeon, visited the Hospital on 12 occasions and performed 41 operations.

Massage.

During the year under review, 188 cases were treated in the massage department. The total number of treatments was as follows:—

Sunlight	...	...	...	...	106
Massage	...	...	...	...	5
Exercises	...	...	...	...	83
Electrical	...	...	...	...	19
Total					213

X-Rays.

356 patients were X-Rayed during the year, 625 films being taken.

Dental Work.

The following work was carried out by the County Dental Staff:—

CHILDREN.

Attendances.	Treated.	Fillings.		Extractions.	
		Perm.	Temp.	Perm.	Temp.
248	182	185	6	93	188

ADULTS.

Attendances.	Treated.	Extractions.	Fillings.	Scalings.	Dentures.
52	28	103	12	4	12

Ophthalmic Work.

Periodic visits were made by the County Ophthalmic Surgeon to see cases reported to him for treatment.

Infectious Diseases.

The following cases of infectious diseases occurred during the year:—

Chickenpox	...	...	...	7
Whooping Cough	...	...	...	1
Ringworm	...	...	...	2
Mumps	...	...	...	1
Diphtheria	...	...	...	8

Surgical Instruments and Splints.

Practically all the Surgical Instruments and Splints are made in the Hospital workshops. The following have been made and supplied to patients in the Hospital or attending clinics:—

HOSPITAL.

Callipers	...	...	...	...	...	...	25
Thomas's Bed Splints	...	...	...	...	...	...	12
Thomas's Walking Splints	...	...	...	...	...	...	11
Pattens	...	...	...	...	...	...	17
Spinal Frames	...	...	...	...	...	...	26
Boots Raised	...	...	...	...	...	...	9
Other Alterations to Boots	...	...	...	...	...	...	107
Crutches (Pairs)	...	...	...	...	...	...	7
K.K., side and double irons	...	...	...	...	...	...	10
Other Metal Splints	...	...	...	...	...	...	11
Repairs and Alterations to Splints	...	...	...	...	...	...	56
Plaster Boots	...	...	...	...	...	...	24
Posterior Spinal Supports	...	...	...	...	...	...	9
Block Leather Jackets	...	...	...	...	...	...	5
Block leather hip spicas	...	...	...	...	...	...	2
Miscellaneous	...	...	...	...	...	...	33
Total							364

CLINICS.

Callipers	...	...	...	...	...	...	22
Thomas's Walking Splints	...	...	...	...	...	...	4
Pattens	...	...	...	...	...	...	23
Boots Raised	...	...	...	...	...	...	115
Other Alterations to Boots	...	...	...	...	...	...	433
Crutches (pairs)	...	...	...	...	...	...	3
K.K., side and double irons	...	...	...	...	...	...	39
Other Metal Splints	...	...	...	...	...	...	7
Repairs and Alterations to Splints	...	...	...	...	...	...	222
Plaster Boots	...	...	...	...	...	...	6
Posterior Spinal Supports	...	...	...	...	...	...	16
Block leather jackets	...	...	...	...	...	...	2
Special boots	...	...	...	...	...	...	4
Groin and Shoulder Straps (pairs)	...	...	...	...	...	...	44
Miscellaneous	...	...	...	...	...	...	50
Total							990

CELLULOID SPLINTS.

Jackets	...	...	...	...	...	...	4
Hip Spicas	...	...	...	...	...	...	9
Knee Splints	...	...	...	...	...	...	4
Elbow Splints	...	...	...	...	...	...	2
Head Pieces	...	...	...	...	...	...	4
Total							23

The total value of the work done amounted to £478 13s. 8d.

TABLE B. V.
ATTENDANCES AT ORTHOPAEDIC CLINICS.
(a) **Tubercular Cases.**

Situation of Lesion.	Alfreton.	Chesterfield.	Chinley.	Derby.	Heanor.	Long Eaton.	Matlock.	Shirebrook.	Swadlincote.	TOTAL.
Spine	8	33	10	16	7	8	3	2	3	90
Hip	7	17	3	12	4	2	—	5	7	57
Knee	3	11	3	7	2	1	1	5	4	37
Other Joints ..	2	14	3	6	4	2	4	1	1	37
Abdomen ...	4	2	—	—	—	—	—	1	—	7
Periph'al Glands	6	10	1	2	—	—	8	3	3	33
Other Organs	—	1	—	—	—	—	—	1	—	2
Total ...	30	88	20	43	17	13	16	18	18	263

(b) **Non-Tubercular Cases.**

Lesion.	Alfreton.	Chesterfield.	Chinley.	Derby.	Heanor.	Long Eaton.	Matlock.	Shirebrook.	Swadlincote.	TOTAL.
Rickets ...	45	55	8	22	9	11	21	17	20	208
Torticollis ...	2	—	1	7	3	1	1	3	5	23
Talipes ...	11	11	19	45	18	23	4	6	38	175
Poliomyelitis ...	15	48	8	14	11	3	9	7	6	121
Spastic Paraplegia ...	9	7	3	16	8	7	1	7	4	62
Scoliosis ...	41	28	3	20	5	20	24	8	61	210
Miscellaneous	35	46	9	27	10	12	20	23	36	218
Total .	158	195	51	151	64	77	80	71	170	1017
Total Attendances	931	1044	302	939	448	655	610	528	2069	7526
No. of Plasters Applied ..	22	62	12	28	10	6	15	23	15	193

Heavy pressure was felt on the bed accommodation of the whole hospital, particularly with regard to the adult male ward. The number of admissions was 48 more, and would have been considerably greater, except for an outbreak of diphtheria which occurred towards the end of the year and prevented the admission and discharge of patients. There was a considerable reduction in the average length of stay of tuberculous patients. The average length of stay of non-tuberculous cases has risen from 138—146 days.

With regard to the orthopaedic clinics, there was a very slight increase in the number of patients on the registers. There was also an increase of over 1,000 in the total attendances,

BRETBY HALL ORTHOPÆDIC HOSPITAL.
TABLE B. VI.
Comparative Statement of Costs.

Year ending March 31st:—

	1932		1933		1934		1935		1936	
	Average Daily No. of Patients	do. Staff	145.2	142.4	130.5	136.3	136.3	141.0	141.0	57.7
	60.8		60.9		56.4		57.8		57.7	
	Total Cost.	Cost per week per patient.	Total Cost.	Cost per week per patient.	Total Cost.	Cost per week per patient.	Total Cost.	Cost per week per patient.	Total Cost.	Cost per week per patient.
	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.
	5,335	14 2	5,434	14 8	5,335	15 8	5,835	16 5	5,901	16 0
Salaries, and Wages	3,182	8 5	3,047	8 2½	2,923	8 7	3,175	8 11	3,448	9 4
Provisions	695	1 10	654	1 9	667	2 0	614	1 9	676	1 10
Drugs and Medical Appliances...	1,001	2 8	1,439	3 10½	1,204	3 6	1,251	3 6½	1,486	4 0
Fuel, Light and Water	943	2 6	755	2 0	622	1 10	1,046	2 11½	478	1 4
Domestic and Laundry	1,803	4 9	1,968	5 4	1,512	4 5	680	1 11	1,995	5 5
Renewals and Repairs	358	0 11	290	0 9	282	10	360	1 0	419	1 2
Miscellaneous	377	1 0	382	1 0	463	1 4	389	1 1	402	1 1
Rates, Taxes and Insurance	3,429	9 1	3,460	9 4	3,874	11 5	3,437	9 8	3,370	9 2
Loan Repayment and Interest										
Gross Totals	17,123	2 5 4	17,429	2 6 11	16,882	2 9 7	16,787	2 7 3	18,175	2 9 4
Deduct Rents, etc.	450	1 2	487	1 3	608	1 9	745	2 1	786	2 2
Nett Totals	16,673	2 4 2	16,942	2 5 8	16,274	2 7 10	16,042	2 5 2	17,389	2 7 2
Food per person per week	5/11		5/9		6/2		6/3		6/7½	

PENMORE PAVILION.

During the year, this Pavilion, which is attached to the Chesterfield Joint Isolation Hospital, has continued to be used for the treatment of female patients. Usually those with advanced disease are admitted, and they are under the control of the Medical Superintendent of Walton Sanatorium and his assistants.

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

TABLE P.I.

Patients in the Pavilion on the 1st January, 1935	...	12
Admissions	... ..	26
Discharges	... ..	38
Patients in the Pavilion on the 31st December, 1935		Nil
Condition of patients on discharge :—		
Improved	... ..	13
No material improvement	... ..	6
Died in the Institution	... ..	15
Transferred to Walton Sanatorium	...	4
		—
		38
		—

Fourteen beds are provided in this Pavilion and four shelter beds are available when necessary and when climatic conditions permit. During the year there was not the usual demand for beds, only 26 patients being admitted as compared with 44 in 1934. Early in December there were only four patients in the Pavilion, and at that time the Authorities of the Isolation Hospital were having great difficulty in obtaining a sufficient number of nurses to deal with an epidemic of scarlet fever in the Chesterfield area, and in order to relieve the nursing staff of the Pavilion for duty in the Isolation Hospital the four patients were, as a temporary measure transferred to the Sanatorium. Towards the end of January, 1936, the Pavilion was re-opened.

Only in September was it found necessary to use one of the shelters.

The daily average number of beds available spread over the whole year was 16, and the average number of beds occupied was 10, or 62% of the full capacity. The average duration of stay of the 38 patients discharged was 134 days, one of the patients having been in since 1932. The average gain in weight of those who were improved as a result of treatment in the institution was 11 lbs. 5 ozs.

The cost per patient per day for the year ended March 31st, 1936 was 8s. 3d.

WHITWORTH HOSPITAL.

At this Hospital there is a self-contained block of six beds which is leased by the County Council from the Trustees of the Hospital for the treatment of male pulmonary cases of the "advanced" and "hospital" types, one of the County Tuberculosis Officers being in charge. This block was first used for the treatment of Tuberculosis in 1929, and it continues to fulfil a useful function in providing accommodation for the types of cases mentioned above. There is no difficulty in persuading patients to be admitted or to remain there. No great improvement in the condition of the patients is to be expected, but the chief advantage of the institution is that the patients who are admitted are usually in a highly infectious condition, and they are thus removed from their own homes, where there is considerable risk of the disease spreading to other members of the family, are housed in excellent surroundings and provided with the necessary nursing and treatment.

A wireless set with head-phones was installed during the year, and it has been much appreciated by both the patients and the staff.

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

TABLE W.I.

Patients in the Hospital on January 1st, 1935	...	5
Admissions	... ..	19
Discharges	... ..	19
Patients in the Hospital on December 31st, 1935	...	5
Condition of patients on discharge :		
Improved	... ..	10
No material improvement	... ..	3
Died in the Institution	... ..	6

The average duration of stay of the 19 patients discharged during the year was 123 days and the average number of beds occupied was 5·3 or 89 per cent. of the full capacity. The cost per patient per day for the year ended March 31st, 1936, was 7s. 11d.

OTHER INSTITUTIONS.

With the institutional accommodation 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 Council.

Six cases were admitted to such institutions during the year : two were afforded two periods of treatment each, making a total of eight admissions in all. Three of the cases were suffering from pulmonary tuberculosis and were admitted to Papworth Village Settlement with a view to becoming permanent settlers there, but two of them remained in the institution for only a short time ; the

other patient is still there, and at the time of writing is reported to be making good progress. The remaining three patients were all treated in the Manchester Royal Infirmary: one was a case of renal tuberculosis, one a bone and joint case, and one a case of tuberculous cervical adenitis.

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

Patients in the Institutions on January 1st, 1935	...	1
Admissions	... ..	8
Discharges	... ..	8
Patients in Institutions on December 31st, 1935	...	1

Condition of patients on discharge:—

Quiescent	... ..	1
Improved	... ..	2
No material improvement	... ..	5

The patient who was in an institution on January 1st, 1935, was suffering from tuberculous peritonitis, and after 13 months' treatment in the East Lancashire Tuberculosis Colony his disease became quiescent, and at the time of his discharge he was doing six hours work daily.

POOR LAW INSTITUTIONS.

The number of beds available, on December 31st, 1935, in Poor Law Institutions belonging to the County Council for the treatment of tuberculosis is given in Table T.II, 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.

RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT PROVIDED DURING THE YEAR IN POOR LAW INSTITUTIONS FOR PERSONS CHARGEABLE TO THE COUNCIL.

		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.
Number of patients suffering from pul- monary tuberculosis admitted for treatment.	Adult males	9	9	3	9	6
	Adult females	3	1	2	2	—
	Children	—	—	—	—	—
	Total	12	10	5	11	6
Number of patients suffering from non- pulmonary tuberculosis admitted for treatment.	Adult males	3	2	2	1	2
	Adult females	1	3	2	2	—
	Children	—	—	—	—	—
	Total	4	5	4	3	2
GRAND TOTAL		16	15	9	14	8

Treatment of Lupus.—The treatment of nine cases of lupus was continued during the year—seven at the Derbyshire Royal Infirmary, one of which was subsequently transferred to Bretby Hall Orthopædic Hospital, and two at the Manchester and Salford Hospital for Skin Diseases.

The following shows the location of disease of these cases and the results of treatment :—

<i>Location of Disease.</i>	<i>Number of Cases.</i>	<i>Results of Treatment.</i>
Face and Neck	5	3 much improved. 1 improved. 1 gave up treatment.
Left hand	1	Much improved—disease arrested.
Buttocks	2	1 much improved. 1 no material improvement.
Multiple lesions	1	Slight improvement.

NOTIFICATION OF TUBERCULOSIS.

During the year under review, 500 (364 pulmonary and 136 non-pulmonary) new cases were reported. Of this number, 428 were primary notifications and 72 were new cases coming to my knowledge otherwise than by notification. The figure of 500 new cases is a decrease of 144 as compared with the corresponding figure for 1934. What is particularly pleasing about this decrease is that it occurs mainly in young people up to 25 years and is fairly evenly divided amongst the pulmonary and non-pulmonary groups. However, there is a slight increase in the age groups 45 to 65 years of age. Another satisfactory feature is that the number of new cases is reduced to about half what it was ten years ago, the figure in 1925 being 1,057.

The case rate per 1,000 of the population for the year was .81.

NEW CASES AND MORTALITY DURING 1935.

The following table gives particulars of new cases of Tuberculosis and of deaths from the disease amongst all cases occurring during the year.

TABLE T.VII.

Age periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0— ...	1	—	3	4	—	—	4	2
1— ...	—	—	13	18	—	1	8	13
5— ...	6	10	18	19	—	2	6	2
15— ...	39	69	11	15	22	39	5	8
25— ...	46	46	7	7	34	40	5	3
35— ...	36	23	5	4	26	25	1	2
45— ...	34	11	3	4	19	4	2	3
55— ...	21	10	1	2	29	6	4	4
65 and upwards	8	4	2	—	6	6	—	—
Totals ...	191	173	63	73	136	123	35	37
Total—all cases ...	500				331			

DEATHS FROM TUBERCULOSIS.

Whilst the number of notifications has decreased, there has been a slight increase in the number of deaths from pulmonary tuberculosis, the increase occurring mainly in the female age group 25 to 35 years of age.

The number of deaths in the County during 1935 recorded by the Registrar-General as attributable to Tuberculosis was 331, whilst the number of persons who were known to be suffering from tuberculosis and who died during the year was 346. It should be borne in mind that tuberculosis may not have been the primary cause of death in all these cases.

Approximately one-third of the deaths from pulmonary tuberculosis occurred in public institutions.

The following table shews the period which elapsed between the date of receipt of the notification and the date of death.

TABLE T.VIII.

	Number of deaths reported in 1935.	Percentages
Cases not notified ...	40	11·56
Notified after death ...	37	10·70
Notified less than 1 week before death ...	15	4·34
1— 2 weeks before death ...	4	1·16
2— 3 „ „ „ ...	12	3·47
3— 4 „ „ „ ...	6	1·73
1— 2 months before death ...	27	7·80
2— 3 „ „ „ ...	18	5·20
3—12 „ „ „ ...	58	16·76
Over 1 year „ „ „ ...	129	37·28
	346	100·00

Twenty of the 40 deaths of cases not notified were received from the Local Registrars. Enquiries were made as to why notification had not been made in these cases and the information given in the following table elicited. Enquiry into the remaining 20 cases was not practicable, as the information which was obtained by means of the Registrar General's Transferred Death Slips was not received until sometime after the date of death.

TABLE T.IX.

Reasons for non-notification :—

	<i>Pulmonary.</i>	<i>Non-Pulmonary.</i>	<i>Total.</i>
Complicated cases presenting difficult diagnosis (including meningitis cases) ..	—	5	5
Attended by more than one doctor. Thought to have been notified by doctor first attending	5	1	6
Disease discovered post-mortem	6	1	7
Notification overlooked ...	2	—	2
	13	7	20

TABLE T. X.

NOTIFICATIONS AND DEATHS.*

<i>Year.</i>	<i>Notifications.</i>		<i>Deaths.</i>	
	<i>Pulmonary.</i>	<i>All Forms.</i>	<i>Pulmonary.</i>	<i>All Forms</i>
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
1933	386	580	258	324
1934	442	644	243	317
1935	364	500	259	331

*(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:—

TABLE T. XI.

Years.	PULMONARY.		NON-PULMONARY.		TOTAL.	
	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	.68	.12	.15	.56	.83
1933	.41	.69	.11	.13	.52	.82
1934	.39	.63	.12	.13	.51	.76
1935	.42	—	.11	—	.53	—

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.

TABLE T. XII.

Year.	PULMONARY.			NON-PULMONARY.			TOTAL
	Males.	Females.	Total.	Males.	Females.	Total.	
1930	1380	1238	2618	720	628	1348	3966
1931	1296	1172	2468	660	600	1260	3728
1932	1164	1055	2219	682	577	1259	3478
1933	1054	928	1982	571	504	1075	3057
1934	1074	951	2025	564	524	1088	3113
1935	1065	921	1986	503	504	1007	2993

HOUSING OF TUBERCULOSIS CASES.

The following table shows the housing conditions of the patients on the lists of the Health Visitors giving the 1935 cases separate from the cases which came on their lists prior to 1935. The first percentage column shows the sleeping arrangements of the cases when first visited, and the second percentage column gives the cases that have been on the register for over a year. Comparison of the two columns shows that there is generally an improvement in the sleeping arrangements, but, nevertheless, it is regrettable that the percentage of cases sharing a bed is still so high.

TABLE T. XIII.
SLEEPING ARRANGEMENTS FOR TUBERCULOSIS PATIENTS.

	Cases visited for first time during 1935				Old Cases			
	Number			Percent- age	Number			Percent age
	Under 15	Over 15	Total		Under 15	Over 15	Total	
Pulmonary cases considered In- fectious, Patients having :—								
Separate Bedroom	2	83	85	49.42	4	377	381	62.05
Separate bed, but room shared	2	25	27	15.70	1	95	96	15.64
Bed shared with another person	—	60	60	34.88	10	127	137	22.31
TOTAL	4	168	172	100.00	15	599	614	100.00
Pulmonary Cases considered non- infectious having :—								
Separate Bedroom	5	51	56	45.90	15	151	166	38.87
Separate bed, but room shared	2	12	14	11.48	32	53	85	19.91
Bed shared with another person	4	48	52	42.62	23	153	176	41.22
TOTAL	11	111	122	100.00	70	357	427	100.00
Non-pulmonary cases having :—								
Separate Bedroom	9	15	24	28.92	75	125	200	35.84
Separate bed but room shared	17	8	25	30.12	105	63	168	30.11
Bed shared with another person	16	18	34	40.96	79	111	190	34.05
TOTAL	42	41	83	100.00	259	299	558	100.00
GRAND TOTAL	57	320	377	—	344	1,255	1,599	—

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS)
REGULATIONS, 1925.

One man who was engaged in the milk trade was, on his discharge from the Sanatorium, reported to the Local Sanitary Authority, but as he was not fit to follow his employment no action was called for.

PUBLIC HEALTH ACT, 1925 (SECTION 62).

Three persons who were suffering from advanced pulmonary tuberculosis and in an infectious state, and whose home conditions were very unsatisfactory, were referred to me with a view to action being taken to secure compulsory removal to an institution.

In the first case, after legal action was threatened, the patient agreed to be admitted to the Sanatorium, and eventually he died there after being in for nearly four months.

The second case was a girl of 16 in a house with three younger children. The risk of the children being infected was pointed out to the father, but he would not allow her to be admitted to the Sanatorium, but agreed to provide her with a separate bedroom. In view of this, and as the girl was not likely to live very long, it was agreed to let her remain at home.

The third case was a married woman with seven children; the family removed to a larger house and the patient was provided with a shelter. No legal action was, therefore, called for.

AFTER-CARE.

There are now only four After-Care Committees functioning in the County in the following areas, viz., Chesterfield (Borough Welfare Committee), Glossop Borough, Ilkeston Borough, and Ripley Urban District. Only two of these Committees—Ilkeston and Ripley—now administer on behalf of the County Council, the scheme for the provision of extra-nourishment in their area, Chesterfield Borough Welfare Committee having intimated at the end of the year that they were no longer able to carry out this work. Apart from this, the work of these Committees is purely voluntary; they raise money locally for the assistance of necessitous cases.

In addition to these After-Care Committees, the British Red Cross Society give assistance in necessitous cases in the way of supplying articles which Public Authorities are not empowered to provide.

OTHER SERVICES.

Homes Visited by Health Visitors.—The County Health Visitors visit all notified cases of Tuberculosis unless the notifying practitioner specially requests that visits should not be paid. The visiting is carried out under the supervision of the Tuberculosis Officer for the area.

During the year the following number of visits have been paid :—

Dispensary Cases	...	...	5,924
Other Cases	...	...	1,484
Total	...		7,408

Extra Nourishment.—Grants of extra nourishment in the form of milk, up to two pints per day, are allowed to patients who are likely to benefit materially thereby and whose financial circumstances fall within a scale of income adopted by the County Council.

During the year, 249 patients were granted extra nourishment, and the cost for the year ended March 31st, 1936, was £871 16s. 0d.

There has been a remarkable growth in this branch of the service during the last five years, the number of persons who were granted milk in 1930 being 69.

The large majority of the patients who are assisted under this scheme are in extremely poor circumstances, and the provision of milk seems to be much valued.

Nursing of Bed-ridden Cases.—By arrangement with the Derbyshire County Nursing Association, bed-ridden cases of tuberculosis are visited by the district nurses upon the recommendation of the Tuberculosis Officers. During the year, the district nurses were asked to visit nine such cases in their homes, and 361 visits were paid to those cases.

Shelters.—We continue to loan open-air shelters to suitable patients on the recommendation of the Tuberculosis Officers.

During the year, 13 new shelters were purchased at a cost of £11 10s. 0d. each.

The old type of shelters which have been in use for many years are gradually getting beyond repair, and are being disposed of as occasion arises :—

No. of Shelters sold during the year	...	...	...	9
No. in use at end of year	...	...	...	61
No. in store at end of year	...	...	...	13
Sets of Bed and Bedding supplied	...	...	...	23
Shelters supplied, but not in use	...	...	...	19
Shelters available for use at Institutions	...	...	...	14

X-Rays.

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

<i>Dispensary Area.</i>	<i>No. of Examinations.</i>		
Alfreton	...	...	47
Ashbourne	...	...	19
Burton	...	...	43
Chesterfield	...	...	356
Chinley	...	...	94
Derby	...	...	242
Glossop	...	...	26
Ilkeston	...	...	68
Long Eaton	...	...	44
Matlock	...	...	71
			1,010
Derbyshire Sanatorium	...		2,164
Bretby Hall Orthopædic Hospital			625
Total	...		3,799

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, six persons were examined, and were found to be fit for employment in the industries; one of the workers was engaged in the Sandstone Industry, one in the Refractories Industries, and four in the Asbestos Industries.

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. XIV.

	<i>Pos.</i>	<i>Neg.</i>	<i>Total.</i>
From Medical Practitioners ...	170	915	1,085
From Dispensaries and Sanatoria	356	1,086	1,442
From Hospitals	4	19	23
Total	530	2,020	2,550

Specimens examined by the Ellerman and Erlandsen method.

Up to 10 years		11—20		21 & over		Totals	
<i>Pos.</i>	<i>Neg.</i>	<i>Pos.</i>	<i>Neg.</i>	<i>Pos.</i>	<i>Neg.</i>	<i>Pos.</i>	<i>Neg.</i>
—	109	20	273	38	603	58	985

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

Notifiable Diseases.—The following Tables, prepared from information supplied by the Local Medical Officers of Health and compiled at the request of the Ministry of Health, shew the incidence of notifiable diseases in the County and an analysis of the age groups of cases of notifiable diseases during 1935 :—

TABLE XXXI.

<i>Disease.</i>	<i>Total Cases notified.</i>	<i>Cases admitted to Hospital.</i>	<i>Deaths.</i>
Smallpox	Nil	Nil	Nil
Scarlet Fever	1,729	1,390	6
Diphtheria	735	658	42
Enteric Fever	28	27	2
Puerperal Fever	25	19	22
Puerperal Pyrexia	74	42	20
Pneumonia	902	41	401
Cerebro-spinal Fever	10	9	8
Erysipelas	288	22	—*
Ophthalmia Neonatorum	38	10	—*
Encephalitis Lethargica	6	—*	11
Measles	—*	—*	12
Chickenpox	—*	—*	—*

* Information not available.

TABLE XXXII.

Analysis in Age Groups of Cases of Notifiable Diseases
during 1935.

Age Group.	Small- pox.	Scarlet Fever.	Diphth- eria.	Typhoid Fever.	Puerperal Fever.	Puerperal Pyrexia.	Pneu- monia.	Erysi- pelas.
Under 1 year	—	7	3	—	—	—	35	3
1 —	—	30	17	—	—	—	35	2
2 —	—	46	27	—	—	—	31	3
3 —	—	123	36	—	—	—	37	—
4 —	—	156	48	—	—	—	18	3
5 —	—	706	259	6	—	—	128	6
10 —	—	364	166	2	—	—	63	7
15 —	—	122	61	3	1	2	55	11
20 —	—	128	78	9	21	55	141	47
35 —	—	38	26	5	3	17	125	44
45 —	—	8	13	3	—	—	157	106
65 and over	—	1	1	—	—	—	72	59
Total	—	1,729	735	28	25	74	897	291

Smallpox.—No cases of this disease occurred during the year.

Diphtheria.—The number of cases of Diphtheria notified during the year, as given by the Registrar-General is 724, compared with 629 in 1934, whilst the number of deaths was 42, compared with 30 in the previous year. The case mortality in 1935 was 5·80 compared with 4·75, the rate for the previous year.

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

The number of specimens received at the County Bacteriological Laboratory for examination for Diphtheria Bacillus during the last eleven 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
1933	...	...	5,092
1934	...	...	10,104
1935	...	...	9,914

Of the 9,914 specimens received during 1935, only 816 were found positive. It will be noted that there is an increasing tendency to resort to swabbing. It is sometimes necessary to swab all contacts as a preventive measure. Where this is done a high percentage of negative results are to be expected, but the sources of many of the specimens lead one to believe that a great deal of swabbing is done for the purpose of diagnosis, and in this case the swabbing seems to be somewhat indiscriminate.

As I pointed out in my Report for the year 1925, it is all to the good that we should be constantly on the look-out for Diphtheria, but it is to be hoped that too much reliance for diagnostic purposes is not placed on the bacteriologist's reports, to the neglect of the clinical signs and symptoms.

Scarlet Fever.—During the year, 1,729 cases of this disease are stated by the Registrar-General as having been notified in the County, of which six proved fatal, compared with 1,330 cases and three deaths in the previous year. The figures for the year under review give a case mortality of 0·34 compared with 0·22, the rate for the previous year.

Whooping Cough.—Fifteen deaths occurred during the year from this disease, giving a death rate of 0·02 per thousand of the population.

Measles.—Twelve deaths occurred from this disease during the year, compared with 28 in the previous year.

Polio-Myelitis.—During the year, 27 cases of this disease occurred. In 15, the Orthopædic Surgeon was called in, in consultation.

Cancer.—In order that full advantages of the Sheffield Radium Centre should be available for Derbyshire patients, the Public Health Committee in June, 1935, undertook to pay the fares of necessitous persons attending that Centre.

Table XXXIII. gives the number of deaths and the death rate from this disease in the County compared with the rates for England and Wales from 1901, and Table XXXIV. shows the incidence from Cancer among males and females at varying ages from 1916 :—

TABLE XXXIII.

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

Year.	Death Rates.		No. of	
	England and Wales.	Derbyshire.	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 ...	1.51 ...	1.351 ...	837	
1933 ...	1.52 ...	1.306 ...	813	
1934 ...	1.56 ...	1.409 ...	869	
1935 ...	... ...	1.365 ...	845	

TABLE XXXIV.

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

Year.	AGES.								Totals.		Grand Total.
	Under 25		25—45		45—65		65 and over.				
	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
1933	5	3	25	45	164	187	198	186	392	421	813
1934	6	3	24	45	191	176	229	195	450	419	869
1935	3	2	23	40	181	172	213	211	420	425	845

Enteric Fever. 27 cases of this disease occurred during the year, with two deaths, giving a case mortality of 7·40, compared with 9·25, the rate for the previous year. The following table gives the case mortality per cent., the death rate per thousand of the population, and the case rate per thousand of the population for the last thirty-six years :—

TABLE XXXV.

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	·005	·07
1933	41	12·19	·008	·06
1934	21	9·52	·003	·03
1935	27	7·40	·003	·04

Encephalitis Lethargica.—During the year 1935, six cases of this disease were notified.

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. Two schools were closed by the School Medical Officer and three by the Local Sanitary Authority.

TABLE XXXVI.

Year.	No. of Schools or Departments closed.	No. Closed by School Med. Officer.	No. Closed by Sanitary Authority.	REASON FOR CLOSURE.							
				Influenza.	Measles.	Whooping Cough.	Chicken Pox.	Scarlet Fever.	Diphtheria.	Mumps.	Other Causes.
1924	32	14	18	3	17	2	1	2	1	1	5
1925	52	10	42	11	33	6	—	—	1	1	—
1926	14	1	13	—	8	3	—	2	1	—	—
1927	128	16	112	100	14	2	1	1	1	2	7
1928	19	3	16	—	15	1	—	2	1	—	—
1929	14	2	12	7	1	1	—	3	1	—	1
1930	22	2	20	2	11	1	1	5	—	—	2
1931	22	1	21	5	6	4	1	—	5	—	1
1932	21	1	20	6	6	4	—	—	5	—	—
1933	19	2	17	15	3	—	1	—	—	—	—
1934	7	1	6	—	4	1	—	1	1	—	—
1935	5	2	3	—	3	—	—	2	—	—	—

TABLE XXXVII

Cases of Notifiable Diseases notified during 1935
as reported by the Local Medical Officers of Health.

Urban Districts.	Tuberculosis.		Small-Pox.	Scarlet Fever.	Diphtheria.	Enteric Fever.	Puer-peral Fever.	Puer-peral Pyrexia.	Cerebro-Spinal Fever.	Erysipelas.	Ophth. Neon.	Enceph. Letharg.
	Pulmonary.	Other.										
Acton ..	15	3	..	53	7	..	1	5	2	9	..	..
Abourne ..	3	1	..	7	2	..	..	2	..	4	1	..
Awewell ..	..	..	..	1	3	1	..	1	..	1	..	..
Asper ..	5	3	..	43	1	1	..	..	..	4	..	..
Asover ..	4	3	..	31	4	5	..	1	..	6	..	..
Acton (Boro') ..	4	1	..	24	29	1	1	3	..	4	1	..
Asterfield (Boro') ..	61	16	..	192	45	5	7	20	2	50	3	1
Wy Cross ..	4	2	..	8	20	1	..	..	2	2	..	..
Asnfield ..	3	..	..	18	15	..	..	1	..	2	..	1
Asop (Boro') ..	9	2	..	47	55	..	..	1	..	3	2	..
Asnor ..	13	1	..	115	8	..	3	3	..	8	3	..
Aston (Boro') ..	30	1	..	22	43	1	..	6	..	7	1	..
Asg Eaton ..	8	5	..	88	98	..	..	1	..	10	1	..
Aslock ..	9	3	..	15	2	1	..	2	..	3	..	..
Asv Mills ..	5	1	..	19	10	..	..	..	..	4	..	..
Asley ..	2	..	..	35	6	..	..	1	..	15	1	..
Asveley ..	7	3	..	45	49	..	1	2	..	10	..	..
Asadlincote ..	7	4	..	52	68	..	..	3	..	12	1	..
Asksworth ..	5	3	..	46	1	..	..	2	..	1	2	..
Urban Districts	194	52	..	861	466	16	13	54	6	155	16	2
Rural Districts.	Tuberculosis.		Small Pox.	Scarlet Fever.	Diphtheria.	Enteric Fever.	Puer-peral Fever.	Puer-peral Pyrexia.	Cerebro-Spinal Fever.	Erysipelas.	Ophth. Neon.	Enceph. Letharg.
	Pulmonary.	Other.										
Abourne ..	5	3	..	13	3	..	..	..	..	1	..	..
Awewell ..	4	5	..	44	1	..	1	4	..	11	1	..
Asper ..	14	2	..	60	8	..	1	1	..	10	5	..
Askewell ..	47	10	..	118	15	9	..	4	1	23	..	..
Aspel-en-le-Frith ..	10	..	..	51	10	..	2	2	..	8	1	..
Asterfield ..	50	26	..	224	136	1	4	5	..	42	8	2
Aswne ..	20	3	..	181	18	..	..	1	2	13	..	1
Aspton ..	14	11	..	37	35	..	1	2	1	6	..	..
Asdallow ..	17	10	..	140	43	2	3	1	..	19	7	1
Rural Districts	181	70	..	868	269	12	12	20	4	133	22	4
Urban Districts	194	52	..	861	466	16	13	54	6	155	16	2
Whole County	375	122	..	1729	735	28	25	74	10	288	38	6

TABLE XXXVIII.

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.

URBAN DISTRICTS.	SMALLPOX.				SCARLATINA.				DIPHThERIA AND MEMBRANOUS CROUP.				TYPHOID FEVER.			
	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 ...	...	...	...	...	63	...	2.83	...	6	...	.27	...	...	...	...	...
Ashbourne ...	...	...	...	...	7	...	1.47	...	2	1	.42	50.00	...	...	...	...
Bakewell ...	...	...	...	...	1	...	.32	...	3	...	.97	...	1	...	.32	...
Belper ...	...	...	...	...	41	...	2.79	...	1	...	.06	...	1	...	.06	...
Bolsover ...	...	...	...	...	29	...	2.92	...	2	...	.20	...	5	...	.50	...
Buxton (Boro') ...	...	...	...	...	21	...	1.25	...	26	1	1.55	3.84	1	...	.06	...
Chesterfield (Boro') ...	...	...	...	...	192	2	2.96	1.04	39	8	.60	20.51	5	...	.07	...
Clay Cross ...	...	...	...	...	8	...	.94	...	18	1	2.13	5.55	...	...	...	...
Dronfield ...	...	...	...	...	27	...	4.22	...	20	...	3.12	...	...	...	...	...
Glossop (Boro') ...	...	...	...	...	47	...	2.46	...	53	1	2.78	1.88	...	...	...	...
Heanor ...	...	...	...	...	119	1	5.27	.84	8	2	.35	25.00	...	...	...	...
Ilkeston (Boro') ...	...	...	...	...	22	...	.66	...	43	2	1.30	4.65	1	...	.03	...
Long Eaton ...	...	...	...	...	87	...	3.52	...	98	8	3.96	8.16	...	...	...	...
Matlock ...	...	...	...	...	14	...	.84	...	2	...	.12	...	1	...	.06	...
New Mills ...	...	...	...	...	19	...	2.29	...	10	...	1.20	...	...	...	...	...
Ripley ...	...	...	...	...	32	...	1.82	...	5	1	.28	20.00	...	...	...	...
Staveley ...	...	...	...	...	37	...	2.11	...	43	3	2.45	6.97	...	...	...	...
Swadlincote ...	...	...	...	...	51	...	2.49	...	67	2	3.27	2.98	...	...	...	...
Wirksworth ...	...	...	...	...	43	1	9.08	1.32	1	...	.21	...	...	...	...	...
<i>Urban Districts</i> ...	...	...	...	...	860	4	2.56	.46	447	30	1.33	6.71	15	...	.04	...
RURAL DISTRICTS.																
Ashbourne ...	...	...	...	...	12	...	1.05	...	3	...	.26	...	...	...	...	...
Bakewell ...	...	...	...	...	44	1	2.30	2.27	1	...	.05	...	...	...	...	...
Belper ...	...	...	...	...	56	...	2.24	...	6	...	.24	...	...	...	...	...
Blackwell ...	...	...	...	...	118	1	2.69	.84	15	...	.34	...	9	1	.20	.40
Chapel-en-le-Frith...	...	...	...	...	51	...	2.11	...	10	1	.41	10.00	...	...	...	...
Chesterfield ...	...	...	...	...	230	...	3.51	...	143	9	2.18	6.29	1	...	.01	...
Clowne ...	...	...	...	...	181	...	10.15	...	19	1	1.06	5.26	...	...	...	...
Repton ...	...	...	...	...	39	...	1.41	...	38	1	1.37	2.63	...	...	...	...
Shardlow ...	...	...	...	...	138	...	2.78	...	42	...	.84	...	2	1	.04	50%
<i>Rural Districts</i> ...	...	...	...	...	869	2	3.06	.23	277	12	.97	4.33	12	2	.04	16%
<i>Urban Districts</i> ...	...	...	...	...	860	4	2.56	.46	447	30	1.33	6.71	15	...	.04	...
<i>Whole County</i> ...	...	...	...	...	1729	6	2.79	.34	724	42	1.16	5.80	27	2	.04	7%

BLIND PERSONS ACT, 1920.

At the end of 1935 there were 987 blind persons on the Register. Of these, 529 were males and 458 females. 486 were in receipt of County relief at a total cost of £12,290 per annum. The average amount of relief per case was 9s. 9d. per week.

The arrangements made in 1931 for the domiciliary medical relief of necessitous blind persons were continued during the year 1935.

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 1935 are shown in the following table:—

TABLE XXXIX.

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
A.—NUMBER OF CASES “ SUBJECT TO BE DEALT WITH ” :—			
1. Under “ Order ” :—			
(a) (1) In Institutions (excluding cases on Licence) ...	101	199	300
(2) On Licence from Institutions ...	5	5	10
(b) (1) Under Guardianship (ex- cluding cases on Licence) ...	2	5	7
(2) On Licence from Guardian- ship ...	—	—	—
2. In “ places of safety ” ...	1	—	1
3. Under Statutory Supervision ... of whom :—	204	159	363
(a) Attending Occupation Centres ...	—	—	—
(b) Awaiting removal to an Institution ...	7	2	9
4. Action not yet taken under any one of the above headings—			
(a) Notified by Local Education Authorities, Sec. 2(2) ...	—	—	—
(b) Mental Defectives in receipt of Poor Law Relief :—			
(1) Indoor Relief ...	45	91	136
(2) Outdoor Relief ...	38	46	84
(c) Otherwise “ ascertained ” ...	3	2	5

B.—NUMBER OF CASES WHO MAY BECOME

“ SUBJECT TO BE DEALT WITH ” :—

1	In Institutions or under Guardianship dealt with under Sec. 3 :—			
	(a) In regard to whom the Local Authority contributes under its permissive powers	—	4	4
	(b) Maintained wholly by parents, relatives or others	4	2	6
2	Reported to the Local Authority from any reliable source but as to whom no action has been taken	254	214	468
3	Under Voluntary Supervision	254	214	468
		(Supervised by Health Visitors)		
	Of whom, attending Occupation Centres	—	—	—
	No. of defectives who have given birth to children :—			
	After marriage	—	3	3
	While unmarried	—	2	2
	No. of defectives who have married	—	3	3

TABLE XL.

**SUMMARY OF WORK DONE BY HEALTH VISITORS
DURING 1935.**

1. MATERNITY AND CHILD WELFARE.

(a) *Ante-Natal*—

Number of Sessions	...	...	...	511
--------------------	-----	-----	-----	-----

Attendances :

Ante-Natal	...	...	...	5,021
------------	-----	-----	-----	-------

Post-Natal	...	...	...	123
------------	-----	-----	-----	-----

—	5,144
---	-------

Visits to homes—

First visits	...	...	...	1,184
--------------	-----	-----	-----	-------

Subsequent visits	...	...	...	997
-------------------	-----	-----	-----	-----

—	2,181
---	-------

(b) *Infant Welfare*—

First visits to infants	...	...	7,350
-------------------------	-----	-----	-------

Other visits (under 1 year)	...	31,611
-----------------------------	-----	--------

Visits to children 1—5 years	...	58,155
------------------------------	-----	--------

—	97,116
---	--------

(c) *Attendances at Infant Welfare Centres—*

Number of Sessions	...	...	...	1,972
Expectant mothers (at Centres)			332	
Infants under 1 year	...	...	39,090	
Children over 1 year	...	...	33,144	
			————	72,566

2. TUBERCULOSIS—

No. of Dispensary sessions attended	...	...	825
No. of visits to homes	...	...	7,408

3. SCHOOL MEDICAL INSPECTION—

Number of Inspections:—

Elementary	...	...	...	34,646
Secondary	...	...	...	2,560
Vermineous conditions	...			134,261
Other Inspections	...	...	...	13,798
Home visits to school children	...	...	...	9,565
			————	194,830

Clinic sessions attended—

Ear	...	...	...	...	126
Eye	...	...	...	...	455
Dental anæsthetic	...	...	...	...	116
				——	697

4. MENTAL DEFICIENCY—

Visit to homes	...	...	...	2,595
----------------	-----	-----	-----	-------

5. BLIND PERSONS ACT—

Visit to homes	...	...	...	26
----------------	-----	-----	-----	----

6. Infant Life Protection Visits ...

... 354

7. Boarding-out Visits ...

... 805

8. Miscellaneous Visits ...

... 986

COUNTY OF DERBY.

Appendix I.

Table of Deaths during the year 1935 in each of the Sanitary Districts, Classified according to Diseases.

DISTRICTS.	DEATHS FROM VARIOUS CAUSES.																																											
	Typhoid and Paratyphoid Fevers.	Meadles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Erysipelas Lethargia.	Cerebro Spinal Fever.	Tuberculous of Respiratory System.	Other Tuberculous Diseases.	Syphilis.	General Paralysis of the Uterus.	Chorea Maligna.	Malignant Disease.	Diabetes.	Cerebral Haemorrhage.	Heart Disease.	Aneurysm.	Other Circulatory Diseases.	Bronchitis.	Pneumonia (all forms).	Other Respiratory Diseases.	Pleural Effusion.	Diarrhoea, etc. (under 2 yrs).	Appendicitis.	Cirrhosis of Liver.	Other Diseases of Liver, etc.	Digestive Diseases.	Acute and Chronic Nephritis.	Pericarditis.	Other Pericardial Diseases.	General Infection.	Scabies.	Suicide.	Other Violence.	Other Defunct Causes.	Ill-defined or unknown.	Smallpox.	Poliomyelitis.	Poli-encephalitis.	TOTALS.			
ALFRETON	—	—	—	—	—	6	1	2	6	1	3	1	35	5	7	57	1	19	8	14	3	—	2	2	3	—	7	4	—	—	15	5	1	8	22	1	—	—	—	—	—	—	243	
ASHBOURNE	—	—	—	—	—	1	3	—	—	—	—	—	8	—	7	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	36
BAKEWELL	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	30
BELPER	—	2	—	—	—	—	—	—	4	3	1	—	23	4	9	35	—	5	4	5	—	—	—	—	—	1	1	5	5	—	—	8	15	1	16	21	1	—	—	—	—	—	149	
BOLSOVER	—	—	—	—	—	1	—	—	6	2	—	—	12	1	8	24	—	6	3	11	—	2	3	3	—	1	3	1	1	—	7	2	2	23	1	—	—	—	—	—	—	—	—	122
BRAMPTON & WALTON	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	
BUXTON (Borough)	—	—	—	—	—	1	10	—	3	1	—	—	29	2	7	53	1	17	4	19	4	1	1	1	1	1	6	4	—	1	8	9	1	9	21	2	—	—	—	—	—	—	—	216
CHESTERFIELD (Borough)	3	2	—	—	8	11	1	49	11	1	4	88	9	47	174	1	34	39	42	9	6	4	4	3	5	11	14	2	2	47	24	6	24	64	1	—	—	—	—	—	—	751		
CLAY CROSS	—	—	—	1	1	—	—	—	2	3	1	—	11	1	4	39	—	3	6	1	1	2	—	—	—	4	1	1	3	—	5	5	11	3	—	—	—	—	—	—	—	—	109	
GLORFIELD	—	—	—	—	—	1	1	—	2	1	—	—	2	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	74	
GLORFIELD (Borough)	—	—	—	1	4	—	—	—	1	—	—	—	42	7	25	68	—	19	11	9	5	1	1	1	2	2	7	10	1	1	4	15	3	3	17	—	—	—	—	—	—	254		
HEANOR	—	1	—	—	2	1	—	—	11	—	2	—	22	2	13	46	8	11	9	8	1	2	2	2	2	1	2	8	14	2	16	30	11	31	—	—	—	—	—	—	—	381		
ILKESTON (Borough)	—	2	—	—	2	7	—	1	20	3	—	—	39	2	21	70	1	23	14	38	2	6	2	1	1	2	8	10	1	1	8	33	5	8	18	2	—	—	—	—	—	274		
LONG EATON	—	—	—	2	8	2	1	—	10	4	1	1	34	4	30	57	—	7	10	11	4	1	—	2	—	2	—	4	14	1	1	8	33	5	8	18	2	—	—	—	—	196		
LATOCK	—	—	—	—	—	3	—	1	6	1	1	—	27	4	12	37	—	14	—	—	—	—	—	2	—	—	6	11	1	8	4	—	—	—	8	23	5	—	—	—	—	174		
NEW MILLS	—	—	—	1	—	—	—	—	5	1	1	—	15	1	9	15	—	8	5	8	—	—	—	—	1	2	2	2	—	—	5	7	2	5	6	—	—	—	—	—	—	162		
NULEY	—	2	—	—	1	2	—	—	5	—	—	—	14	3	12	47	—	3	5	5	1	2	1	—	1	1	2	4	1	—	8	19	3	9	42	1	—	—	—	—	—	174		
STAVELEY	—	—	—	—	3	3	—	—	3	2	—	—	20	2	9	19	—	4	5	5	1	3	1	—	—	—	1	3	2	1	—	6	—	1	5	10	1	—	—	—	—	110		
STAVELEY	—	—	—	—	—	6	—	—	6	6	—	—	23	—	13	49	—	6	10	8	—	1	—	—	—	—	1	4	7	—	12	20	5	8	21	1	—	—	—	—	209			
STAVELEY	—	—	—	—	—	1	—	—	5	1	—	—	12	—	7	22	—	5	—	5	—	—	—	—	—	—	2	4	—	—	1	—	—	2	6	1	—	—	—	—	—	84		
URBAN DISTRICTS	—	10	4	5	30	64	3	6	150	42	11	10	466	47	235	844	4	191	132	223	31	28	20	14	14	22	81	122	13	9	193	202	47	122	341	19	—	1	—	—	3,756			
ASHBOURNE	—	—	—	—	—	—	—	—	2	3	—	—	13	3	9	31	—	6	3	4	1	1	—	1	—	—	—	1	5	—	2	3	23	1	9	12	—	—	—	—	—	133		
BAKEWELL	—	—	1	1	—	6	—	—	9	—	1	—	33	4	20	41	—	9	4	22	3	2	1	1	1	1	2	9	5	1	—	10	11	2	9	25	1	—	—	—	—	234		
BELPER	—	1	—	—	—	3	—	—	7	2	1	—	39	5	22	58	—	18	5	15	4	2	2	2	—	1	10	9	—	—	9	14	2	11	25	1	—	—	—	—	—	270		
CLAY CROSS	1	—	—	—	—	3	1	1	30	6	1	1	38	7	37	79	1	14	15	26	8	3	1	1	2	2	3	7	2	2	30	31	9	22	37	—	—	—	—	—	419			
CHESTERFIELD	—	—	—	1	1	4	—	—	—	—	—	—	40	6	22	63	1	18	11	12	4	3	1	3	—	2	4	1	3	—	9	34	1	—	—	—	—	—	—	—	384			
CLAYTON	—	—	—	1	9	6	2	—	17	6	5	3	46	19	12	41	20	1	25	21	47	1	25	21	4	8	3	19	30	3	34	12	9	32	76	3	—	—	—	—	737			
GLORFIELD	—	—	—	—	—	1	—	—	6	—	—	—	11	9	9	4	—	9	5	13	1	2	—	1	1	4	3	5	—	7	9	3	13	21	1	—	—	—	—	—	192			
HEANOR	—	—	—	3	1	2	1	—	9	4	—	2	33	1	18	66	—	7	13	2	2	2	2	5	—	—	8	9	—	2	8	25	1	16	32	1	—	—	—	—	274			
ILKESTON	—	—	—	—	—	2	1	—	4	—	—	1	78	7	40	117	1	31	17	26	1	1	1	6	—	2	11	16	3	2	23	39	6	12	45	—	—	—	—	—	520			
RURAL DISTRICTS	2	2	2	10	12	35	8	2	109	30	10	8	379	47	199	708	5	139	88	178	29	20	12	23	8	22	74	97	9	11	133	188	34	136	289	8	—	2	1	—	3,069			
URBAN DISTRICTS	—	10	4	5	30	64	3	6	150	42	11	10	466	47	235	845	4	191	132	223	31	28	20	14	14	22	81	122	13	9	193	202	47	122	341	19	—	1	—	—	3,756			
WHOLE COUNTY	2	12	6	15	42	99	11	8	259	72	21	18	845	94	434	1532	9	330	220	401	60	48	32	37	22	44	155	219	22	20	326	390	81	258	630	27	—	3	1	—	6,825			

DERBYSHIRE EDUCATION COMMITTEE.

REPORT

OF THE

School Medical Officer

ON THE

Medical Inspection of School Children

FOR THE

Year ended 31st December, 1935.

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

School Medical Officer.

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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.

CHIEF ASSISTANT SCHOOL MEDICAL OFFICER.

W. J. PIERCE, M.B., Ch.B., 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.

K. N. FLINT, M.B., Ch.B.

WILHELMINA W. HENDRY, M.B., Ch.B., D.P.H.

ETHEL W. MORRIS, M.R.C.S., L.R.C.P., D.P.H.

H. N. POPHAM, M.B., B.S.

MARGARET S. PURCE, M.B., Ch.B., F.R.C.S.

Also 7 Part-time School Medical Officers.

OPHTHALMIC SURGEON—

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

ORTHOPÆDIC SURGEON—

G. A. Q. LENNANE, M.A., M.B., B.Ch.

SENIOR DENTAL OFFICER—

H. P. SUTCLIFFE, L.D.S.

DENTAL OFFICERS—

S. T. J. ABELL, L.D.S.

JOSEPHINE DOLAN.

C. E. GODFREY, L.D.S.

ELIZABETH GRANT, L.D.S.

FLORA GRANT, L.D.S.

CICELY JEFFERSON, L.D.S.

C. L. NOBLE, L.D.S.

DORIS M. THOMSON, L.D.S.

Also 7 Dental Attendants and 2 Dental Clerks.

ORTHOPÆDIC NURSES—

Miss M. E. GARRATT, C.S.M. & M.G.

Miss E. TAYLOR, C.S.M., M.G., M.E.

SCHOOL NURSES—

53 School Nurses are employed.

CLERICAL STAFF—

8 Clerks.

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER, 1935.

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

LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the work of the School Medical Service in Derbyshire for 1935.

I have little to add to what I have given in the body of the Report. The nutritional state of the children again received very careful and special consideration, and from the Tables at the end of the Report it will be seen that only 0.9% of the children were returned as suffering from bad nutrition. This figure, I think, indicates that the nutritional state of the children is good.

I wish again to express my appreciation of the continued help and encouragement I receive from the Education Committee. It has been constant during the eleven years I have been here, as also has been the good relationship between myself and the Directors of Education. It would be difficult to imagine smoother working between two Departments.

I have the honour to be,

Your obedient Servant,

W. M. ASH,

School Medical Officer.

*New County Offices,
St. Mary's Gate,
Derby.*

March, 1936.

SECTION I.

Staff.

The staff of the School Medical Department is set out at the commencement of this Report.

At the end of 1935, I received the resignation of Dr. R. A. McCrea who was a part-time Assistant School Medical Officer for the Brampton and Walton area. He had carried out medical inspection for the Derbyshire Education Committee from the inception of the School Medical Service, so that his services have been available for 27 years, 17 of which were spent during the time of the late Dr. Barwise and 10 whilst I have been School Medical Officer. I feel I should express in this Report my appreciation of Dr. McCrea's services and his willingness at all times to help me in whatever I asked. I also wish to express my appreciation of the extraordinary smoothness with which we have worked together.

Number of Schools and Enrolments.

The administrative county for the purposes of elementary education comprises the administrative county, with the exception of the Boroughs of Buxton, Chesterfield, Glossop, and Ilkeston, which are autonomous authorities for elementary education.

The Elementary Education area is now, subsequent to various boundary changes, 613,111 acres with a population of 484,115 as estimated in mid-year 1934, the 1935 population not being available at the time of writing this Report. 1,100 children were transferred to other authorities by the revision of boundaries on 1st April, 1934, as follows :—777 to Sheffield, 174 to Ilkeston, 149 to Buxton.

The following table gives a comparison of the number of schools and enrolments in the Urban and Rural districts for the past eleven years :—

TABLE A.

	NUMBER OF SCHOOLS			ENROLMENT		
	Urban Districts	Rural Districts	Total	Urban Districts	Rural Districts	Total
1925	91	283	374	29,859	46,909	76,768
1926	93	281	374	30,127	46,641	76,768
1927	96	278	374	30,496	47,817	78,313
1928	98	279	377	29,977	46,524	76,501
1929	94	283	377	29,222	46,013	75,235
1930	97	280	377	25,404	49,672	75,076
1931	97	280	377	29,287	45,788	75,075
1932	95	284	379	28,621	46,790	75,411
1933	95	282	377	28,474	47,055	75,529
1934	97	272	369	27,770	43,488	71,258
1935	99	271	370	29,060	40,039	69,099

The administrative county comprises 28 sanitary districts, 24 in the County Elementary Education area, 15 urban and 9 rural districts. The districts for which the Derbyshire Education Committee are responsible for the purposes of elementary education are set out in Table B, which shows the number of schools and enrolments in each district.

TABLE B.

District	Name of Doctor	No. of Schools in Area	Enrolment
URBAN DISTRICTS.			
Alfreton	Dr. Flint	12	3,237
Ashbourne	*Dr. Sadler	2	639
Bakewell	*Dr. Evans	2	341
Belper	Dr. Popham	6	2,021
Bolsover	Dr. Burke	8	2,648
Clay Cross	Dr. Flint	2	1,327
Dronfield	Dr. Morris	3	881
Heanor	*Dr. Turton	14	3,264
Long Eaton	Dr. Hendry	6	3,308
Matlock	Dr. Bryan	12	1,963
New Mills	*Dr. Pemberton	6	1,043
Ripley	Dr. Flint	8	2,258
Staveley	Dr. Burke	10	2,461
Swadlincote	Dr. Purce	8	2,983
Wirksworth	Dr. Popham	4	686
TOTAL ...		103	29,060
RURAL DISTRICTS.			
Ashbourne	Dr. Popham	27	1,478
Bakewell	Dr. Bryan	33	2,364
Belper	Dr. Popham	31	2,972
Blackwell	*Dr. Wear	26	6,832
Chapel-en-le-Frith	Dr. Bryan	23	2,269
Do.	*Dr. Milligan	5	370
Chesterfield	Dr. Burke	15	3,952
Do.	Dr. Flint	13	2,678
Do.	*Dr. McCrea	4	338
Do.	Dr. Morris	17	4,366
Clowne	Dr. Morris	6	2,683
Repton	Dr. Purce	32	4,003
Shardlow	Dr. Hendry	35	5,734
TOTAL ...		267	40,039
Total (Whole-time Officers)		311	56,272
Total (Part-time Officers)		59	12,827
TOTAL ...		370	69,099

* Part-time Officers.

New Schools.

Two new elementary schools have been completed during the year, one at Frecheville, Bighton, accommodating 150 children, and one at West Hallam, known as West Hallam Scargill Central School, accommodating 200 children.

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

CO-ORDINATION.

The closest co-operation has been maintained between the various medical services in the County. This is facilitated by the fact that the School Medical Officer is also the County Medical Officer.

(a) **Maternity and Child Welfare.** The Maternity and Child Welfare area coincides with the elementary education area, and the School Nurses act as Health Visitors under the Maternity and Child Welfare scheme. In this way the child continues under the supervision of the same health officers during school life as well as pre-school life. In most areas also the School Doctor is Medical Officer of the Infant Welfare Centre, and this, generally speaking, is the policy for the County. In addition to this, there has been close co-operation between the Maternity and Child Welfare service and the Domestic Science Department of the Education Committee. The two departments working in conjunction have held evening classes for mothers. These classes are particularly valuable, for the evening was found to be a more suitable time than the afternoon, because mothers could come whilst other members of the family who had returned from work looked after the children at home, and a mother could give her whole time to the subject under discussion, knowing also that she had not to hurry home to receive children from school or her husband from work. A variety of subjects are taught at these classes, all bearing on the care of infants and children, their clothing and feeding, and such matters as food values, marketing, storage of food are dealt with, and cookery demonstrations are given.

(b) **Care of debilitated and delicate children under school age.** The School Nurses in the course of their duties as Health Visitors gather information on debilitated and defective children under school age. They advise on such matters as feeding, clothing, open-air and general hygiene, and endeavour to get children to the appropriate clinic for examination, whence they are referred to their private doctors if it is found that medical treatment is required.

The Maternity and Child Welfare Committee, by arrangements with the Education Committee, provide facilities for dental treatment, treatment for ear, nose and throat conditions, and both in-patient and out-patient orthopædic treatment for children under five years of age. The Maternity and Child Welfare Committee also maintain blind children under two years of age at Homes outside the County. After the age of two years, blind children come under the care of the Education Committee for maintenance in schools for the blind. The attendance officers also bring to my notice any such children below school age who come to their knowledge during the course of their duties.

(d) **Tuberculosis and Orthopædics.** Co-operation between the Tuberculosis and School Medical Departments is of the closest. The School Medical Officers refer all definite or suspected cases of tuberculosis amongst school children to the Council's Tuberculosis Officers for supervision or diagnosis, whilst any school child coming to the knowledge of the Tuberculosis Officer in the course of his duties, either as a case or home contact of a case of tuberculosis, is reported to the Assistant School Medical Officer of the area in which the child resides. In the case of surgical tuberculosis, children requiring orthopædic treatment are referred to the Orthopædic Surgeon, between whom and the Tuberculosis Officers there is the closest co-operation.

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

TABLE C.

	Good.	Insufficient	Unsatisfactory.	Defective and needs attention.
Cleanliness	360	—	10	—
Heating	352	10	4	4
Lighting	338	15	16	1
Ventilation	331	14	18	7
Water Supply	340	19	11	—
Washing Arrangements ...	327	32	10	1
Cloak Room Arrangements ...	336	18	13	3
Sanitary Arrangements ...	313	7	30	20
Playgrounds	284	7	10	69

The serious defects in the sanitary condition of any department are at once referred to the County Architect. The following Table (Table D) shows the number of schools at which work has been 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 D.

TYPE OF WORK.	1931	1932	1933	1934	1935	Total.
Improvements to heating apparatus	75	46	22	22	27	192
Heating improved by stoves, etc. ...	17	14	12	7	5	55
Conveniences converted	2	15	9	6	7	39
Drainage improved	16	14	9	2	7	48
Ventilation improved	22	22	6	14	20	84
Electric light installed	14	13	25	27	16	95
New floors	34	32	24	20	21	131
Supplied with Cookery Centre ...	1	—	—	3	—	4
Supplied with Manual Rooms ...	—	—	1	2	3	6
General repairs carried out ...	124	405	593	88	111	1,321

Medical Inspection. Medical inspection has been continued during the year on the lines laid out in detail in former reports. For this purpose the County is divided into 14 areas, with an assistant school medical officer in charge of each; seven of these assistant school medical officers are full-time officers and seven are part-time. Each school is visited twice in every year, once for the purpose of routine medical inspection and at least once for re-inspection. In addition to the medical officers, the school nurses attend schools from time to time to carry out examinations for personal cleanliness and verminous conditions existing amongst the children. During 1935, each school has received an average of 4.6 visits by the school nurses.

(a) **The Age Groups** inspected were those prescribed by the Board of Education (Special Services) Regulations, 1925, viz., all children in public elementary schools as soon as possible in the twelve months following

- (i.) their admission to public elementary schools,
- (ii.) their attaining the age of 8 years, and
- (iii.) their attaining the age of 12 years.

The medical inspections of children falling into one or other of these groups are termed "Routine" medical inspections.

These groups are now spoken of as "Entrants," "Second Age Group," and "Third Age Group" respectively.

Routine inspection also comprises inspection of children who do not fall in either of the three prescribed groups, but who are examined for some reason other than being selected on account of some suspected ill-health for "Special" inspection.

A "Special" inspection is a medical inspection by the school medical officer himself or by one of the medical officers on his staff of a child specially selected or referred for such inspection, *i.e.*, not inspected at a routine medical inspection as defined above. Such children may be selected by the medical officer during a visit to a school or may be referred to him by the teachers, school nurses, attendance officers, parents or otherwise.

Statistical particulars of these routine medical inspections, together with particulars of special inspections and re-inspections, are given in Table I. appended to this Report.

"Re-inspections" are medical inspections of children who, at a previous routine or special inspection, were found to have some defect which required treatment or observation.

(b) **Extent to which the Board's Schedule of Medical Inspection has been followed.**

All inspections have been carried out in accordance with the schedule of medical inspection of the Board of Education. The scheme adopted for reporting results of medical inspection has

proved itself to be highly satisfactory and greatly facilitates the compilation of the Board of Education Tables at the end of each year. These tables are appended to this Report.

FINDINGS OF MEDICAL INSPECTION AND MEDICAL TREATMENT.

Appended to this Report will be found the Tables prescribed by the Board of Education shewing defects found at Medical Inspections during 1935 (Table II., Section A.); number of children found to require treatment (Table I., Section C.); whilst Table V. shows the dental defects found, and Table VI. relates to uncleanness and verminous conditions.

All children examined during 1935 at routine medical inspection have been classified by the Assistant School Medical Officers according to the state of their nutrition. On the Board of Education's instructions, the four categories used were those of "A"—Excellent; "B"—Normal; "C"—Sub-normal; and "D"—Bad.

(a) **Uncleanliness.** During the year, 134,261 inspections and re-inspections for this condition were made—57,247 of boys and 77,014 of girls. 2,363 individual children were found to be verminous; of these, 267 were boys and 2,096 were girls. 0.75% of boys were verminous and 6.00% of girls.

(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 4,593 minor ailments treated. Of these, 4,077 were treated under the Authority's scheme, and 516 otherwise.

(c) **Tonsils and Adenoids.** During the year, 1,684 children were found with chronic tonsillitis and adenoids, 312 of them being referred for treatment. 81 cases were operated upon at hospitals under the County scheme, 97 received their operations elsewhere, making a total of 178 for the year.

The system of conservative treatment for tonsils and adenoids as described in my Annual Report for 1933 is still maintained, and children still have at least 6 months' observation period after being made dentally fit before being referred for operation. The results of this conservative treatment have fully justified its adoption.

Arrangements have been made for necessary operations to be carried out at hospitals where the children can be retained overnight.

The operations for the North-Western area are carried out at Ancoats Hospital, Manchester, for the North-Eastern area at Chesterfield and North Derbyshire Royal Hospital, and for the south of the county at Derbyshire Royal Infirmary, Derby.

The following table shows the number of cases referred to the respective hospitals for operation :—

	<i>Ref. for Operation.</i>	<i>Operation performed.</i>
Ancoats ...	1	1
Chesterfield ...	80	56
Derby ...	29	24
	—	—
	110	81
	—	—

TABLE E.

TONSILS AND ADENOIDS REFERRED FOR TREATMENT.

(Incidence per 1,000 Routine Inspections.)

<i>Year</i>	<i>Derbyshire.</i>	<i>England and Wales.</i>
1930 ...	140.2	66.5
1931 ...	83.1	64.6
1932 ...	16.2	51.2
1933 ...	17.9	39.5
1934 ...	8.4	40.2
1935 ...	10.4	—

TABLE F.

Total No. found Defective.

<i>Year</i>	<i>Referred for Treatment.</i>	<i>Referred for Observation.</i>
1930 ...	4,336	1,862
1931 ...	2,876	2,805
1932 ...	588	3,472
1933 ...	756	3,699
1934 ...	308	1,627
1935 ...	312	1,372

TABLE G.

	<i>Received Operative Treatment.</i>	
<i>Year</i>	<i>Under Authority's Scheme.</i>	<i>Total (including Hospital, etc.).</i>
1930 ...	1,742	2,316
1931 ...	1,970	2,626
1932 ...	841	1,187
1933 ...	361	523
1934 ...	35	156
1935 ...	81	178

TABLE H.

ATTENDANCES AT THE EAR, NOSE AND THROAT CLINICS
DURING THE YEAR 1935.

Area.			Nose and Throat cases.	Ear Cases.	Total.
Ashbourne	...	...	36	1	37
Alfreton	...	...	38	78	116
Chinley	...	...	58	19	77
Chesterfield	...	...	71	256	327
Derby	...	...	89	106	195
Heanor	...	...	26	29	55
Long Eaton	...	...	33	47	80
Matlock	...	...	73	29	102
Shirebrook	...	...	99	114	213
Swadlincote	...	...	105	107	212
Total			628	786	1414

(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.

TABLE J.

PULMONARY.					1935	1934
Definite	...	...	...	...	10	17
Suspected	...	...	...	...	47	41
NON-PULMONARY.						
Glands	...	...	...	...	48	49
Bones and Joints	...	...	...	...	25	27
Skin	...	...	...	...	5	4
Other forms	...	...	...	...	14	12

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

TABLE K.

Year.	PULMONARY.		NON-PULMONARY.		Total Notifications Ages 5—15
	M.	F.	M.	F.	
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
1933	13	11	39	41	104
1934	16	15	32	27	90
1935	6	10	14	18	48

The remarkable reduction in the number of school children notified as suffering from tuberculosis during the last year is very satisfactory. It will be seen from the Table that there has been a steady decline in the number of notifications of tuberculosis amongst school children; the drop this year, however, is particularly satisfactory, but it is too early to say whether this low figure will be maintained.

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 10 beds are available for them. 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, 1935	6	5	11
Admissions during 1935	5	8	13
Discharges during 1935	8	11	19
Children in Sanatorium, 31st December, 1935	3	2	5

Condition of patients on discharge :—

Condition.	Class T.B. Minus.	Group +I.	Group +II.	Group +III.	Total.
Quiescent	8	1	—	—	9
Not Quiescent	7	1	1	—	9
Died in the Institution	—	—	—	1	1

(e) **Skin Diseases.** *Ringworm of the Body.* At School Medical Inspection, 12 children were found to be suffering from ringworm of the body and 7 cases were found otherwise, making a total of 19 cases, 17 of these were treated at school clinics and 2 otherwise.

Ringworm of the Scalp. During the year, 10 cases of ringworm of the scalp were found at medical inspection and 45 otherwise, making a total of 55 children discovered to be suffering from this disease, 53 of whom were treated under the Authority's scheme and 2 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	...	...	6
	Number of ringworm cases treated satisfactorily by X-rays	...	...	5
	Number treated by other means	...	...	1
CHESTERFIELD.	Total number of cases	...	...	8
	Number treated by X-rays	...	...	6
	Number treated by other means	...	...	2

Scabies. 40 cases of scabies were discovered during the year at school medical inspection, 18 of whom were treated under the Authority's scheme.

Impetigo. During the year, 184 cases of Impetigo were found at School Medical Inspection, 417 being discovered otherwise, making a total of 601, of whom 590 were treated under the Authority's scheme, and 11 received their treatment elsewhere.

Other Skin Diseases. 316 cases were found at medical inspection to require treatment, 199 of whom were treated under the Authority's scheme.

(f) **External Eye Disease.** 223 cases of external eye diseases were discovered during the course of medical inspection. Of these, 163 were found to be suffering from blepharitis; 173 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. 433 cases were treated under the Authority's scheme and 49 otherwise.

(g) **Vision.** In the course of medical inspection, 2,233 children were found to be suffering from defective vision, excluding squint, 1,404 of whom required treatment. 2,336 cases from all sources were referred for refraction, 2,223 of these being treated under the Authority's scheme.

An interesting report has been received from Dr. Ethel W. Morris on her work in the Eye Clinics and especially relating to myopia, or short sight. She remarks on the unusually high difference of incidence amongst boys and girls of 22%, the girls being more often affected than boys in the proportion of 39% boys and 61% girls. The difference in London shown by Bishop Harman in 1913 was only 6%—46% boys and 52% girls. It is difficult to give an explanation of the fact, but in this County it is suggested that boys often refuse treatment because they say the wearing of glasses counts against them in obtaining employment in the pits.

By means of charts, she also shows that the largest incidence of myopia falls chiefly between the years of 8 and 12. Generally speaking, sight is not tested before the age of 8 years, but she points out that at that age the incidence is practically equal in boys and girls; after that age, girls are more often affected than boys.

Discussing the treatment of myopia, she states:—

“The Prophylactic treatment of Myopia should be begun in the nursery and schoolroom with efficient constitutional treatment. This should consist of a diet varied, appetising and rich in vitamins, sufficient sleep—an essential which the modern child lacks—and plenty of exercise.

In the treatment of low Myopia, the refractive error should be fully corrected and detailed instructions should be given pointing out the correct position of holding all near work, which should not be attempted except in good light. Reading in bed should be forbidden unless a bed-light is placed in the right position and a correct posture can be assumed. Homework should be reduced to a minimum. This is especially important in the case of secondary school-children, who often have to travel some distance to and from school. They arrive home late, and then, tired out, spend two or three hours over home-work which they could have done in half the time if it were done in a well-lighted classroom during the afternoon.

Illumination should be good and not too bright—it should come from behind and to the left of the patient's head. This will prevent stooping over near work and the tendency to bring the book too close to the eyes. Books with very small print should not be used. Unfortunately, Bibles and Prayer Books are often printed in far too small type, especially as they are used in buildings which are frequently badly illuminated.”

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

TABLE L.

No abnormality	...	...	...	...	...	186
Hypermetropia and hypermetropic astigmatism	...	...	...	...	...	1282
Myopia, myopic astigmatism and mixed astigmatism	...	...	...	...	...	745
Disturbances of muscle balance:—						
Squint, convergent	...	...	...	...	...	370
„ divergent	...	...	...	...	...	36
Affections of the lids:—						
Blepharitis	...	...	...	...	...	26
Other affections of the lids	...	...	...	...	...	21
Affections of the Conjunctiva	...	...	...	...	...	34
Affections of the Cornea—Inflammation	...	...	...	...	...	5
Corneal Opacities	...	...	...	...	...	49
Other affections of the Cornea	...	...	...	...	...	5
„ „ Lachrymal apparatus	...	...	...	...	...	6
„ „ Iris	...	...	...	...	...	12
„ „ Lens	...	...	...	...	...	18
„ „ Fundus oculi	...	...	...	...	...	35
Other affections of the eye	...	...	...	...	...	36
Affections of the central nervous system	...	...	...	...	...	26
Symptoms due to non-ocular disease	...	...	...	...	...	33
Examinations incomplete	...	...	...	...	...	41

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

TABLE M.

CLINIC.	NEW CASES.		OLD CASES.		Total.
	Re-fraction.	Treat-ment.	Re-fraction.	Treat-ment.	
Mr. T. E. A. CARR.					
Alfreton ...	279	4	61	12	356
Belper ...	138	1	23	—	162
Chesterfield ...	394	8	121	2	525
Chinley ...	130	1	23	—	154
Derby ...	242	8	73	3	326
Heanor ...	216	12	61	5	294
Long Eaton ...	178	1	37	—	216
Matlock ...	156	2	48	—	206
Swadlincote and Bretby ...	168	5	35	1	209
	1901	42	482	23	2448
Dr. E. W. MORRIS.					
Bolsover ...	51	1	57	4	113
Clowne ...	56	2	64	3	125
Dronfield ...	21	12	83	3	119
Eckington ...	43	1	87	17	148
Killamarsh ...	29	4	65	5	103
Shirebrook ...	122	9	134	20	285
	322	29	490	52	893

GRAND TOTAL 3341

(h) **Ear Diseases.** During the course of medical inspection, 225 children were found to be suffering from discharging ears, 164 from defective hearing, and 260 from other ear diseases. Further statistical details of the Ear, Nose and Throat Department have been tabulated under the heading of Tonsils and Adenoids. Three cases of discharging ears have been treated by ionisation.

(i.) **Dental Defects.** 38,420 children were inspected by the Dental Officers during 291 sessions devoted to inspections. 6,301 (16·4%) were found dentally fit; 15,314 (47·6%) of those found to require treatment were actually treated.

Details of the work done by the dental department are presented in statistical form in Table IV., Group IV., at the end of this Report.

It is very satisfactory to note that the number of fillings of permanent teeth considerably exceeded the number of extractions, and that for every permanent tooth removed in this County 6·6 are filled.

The following Table, which shews a comparison between the Derbyshire figures and those for England and Wales as a whole, still further illustrates the preponderance of fillings over extractions in this County.

Details of treatment per 100 children treated :—

	<i>Fillings.</i>	<i>Extractions.</i>	<i>Other Operations.</i>
Derbyshire, 1935 ...	205·3	183·8	100·6
England and Wales, 1934	73·3	188·3	29·5

Under the scheme whereby dental treatment is given to children suffering from chronic tonsillitis or adenoids, or both, 743 were referred to the dental department. 517 of these were treated.

The following are extracts from the Annual Report of the Senior Dental Officer relating to the work of his department during the year :—

“38,420 scholars (more than half the school population of the County) were inspected during 1935, and 291 sessions were devoted to this work, giving an average of 132 children inspected during each session. 6,301 when examined were found to be dentally fit. When compared with those inspected, this figure may appear to be rather low, but children having even slight defects are referred for treatment ; also, one ninth of the school population consists of school entrants, a large percentage of whom require attention.

Consents for treatment have improved annually until the consents for 1935 were 47·6%. This figure denotes not the number of children for whom parents have signed consent forms, but those who actually attended the clinic for treatment subsequent to giving consent, for the signing of consent forms means nothing if appointments are not kept.”

He comments on the high number of “specials” who have been inspected and deprecates the treatment of “casuals.” Treatment of these cases interferes with the carrying out of treatment of those who have readily consented to routine dental treatment, and he rightly points out that the school dental service should not be regarded as a means of curing toothache, but of producing sound, healthy mouths.

(j) **Orthopædic and Postural Defects.** The County Orthopædic Scheme consists of a central orthopædic hospital at Bretby, accommodating 147 cases. There are 115 beds set apart for children under 16 years of age—65 for cases of surgical tuberculosis and 50 for non-tubercular orthopædic cases. Run in conjunction with this central hospital and staffed by the medical officers from the hospital are 9 Orthopædic Clinics situated throughout the County so as to serve the whole area. These clinics are in fact out-patient

units of the central hospital; particulars of their situation and times of opening will be found later in this Report on page 23.

The following tables shew the work done during the year:—

TABLE N.

1935	School Age.				Total.	Under Sch. Age.		Total.	Grand Total.
	Boys.		Girls.						
	Attending Clinic or County Inst.	Attending other Institutions	Attending Clinic or County Inst.	Attending other Institutions					
<i>Tuberculosis—</i>									
Cervical Adenitis	14	—	6	—	20	1	1	2	22
Abdominal Glands	6	—	2	—	8	—	—	—	8
Spine	19	—	24	—	43	—	—	—	43
Hip	15	—	16	1	32	1	1	2	34
Knee	14	—	9	—	23	2	1	3	26
Foot	2	—	3	—	5	—	—	—	5
Elbow	3	—	2	—	5	—	—	—	5
Hand	—	—	2	—	2	—	—	—	2
Shoulder	1	—	—	—	1	—	—	—	1
<i>Paralyses—</i>									
Poliomyelitis	66	—	59	1	126	6	7	13	139
Spastic	26	—	20	—	46	10	3	13	59
Pseudo-Hypertrophic	3	—	—	—	3	—	—	—	3
<i>Rickets—</i>									
Scoliosis	35	—	100	—	135	—	—	—	135
Kyphosis	31	—	44	—	75	1	—	1	76
Torticollis	7	1	6	—	14	2	4	6	20
Bow legs, etc.	64	—	60	—	124	67	69	136	260
Congenital Defects	37	—	38	—	75	24	24	48	123
Injuries	9	—	13	—	22	—	1	1	23
Others	53	—	73	—	126	14	11	25	151

TABLE O.
NUMBER OF CHILDREN OF SCHOOL AGE (5—16) IN
HOSPITAL DURING THE YEAR 1935.

	NON. T.B. CASES.	NON. PULM. T.B. CASES.
Children in Hospital on Jan. 1st, 1935	33	42
Admitted during 1935	102	42
Discharged during 1935	95	43
Children in Hospital on Dec. 31st, 1935	40	41

BRETBY HALL ORTHOPÆDIC HOSPITAL SCHOOL.

Bretby is an approved Special School under Part V. of the Education Act, 1921. 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, 1935	81
Number of children on Admission Register on December 31st, 1935	85
Number of children who have passed through the School during 1935	225
Average number of scholars on Admission Register during 1935	86·9
Number of times School was opened during the School year Jan. 1st, 1935—Dec. 31st, 1935	460

The school was inspected by His Majesty's Inspector in February, 1935. The report was in most respects very satisfactory. The degree of give and take between the teaching and medical staff being mentioned as a most striking characteristic. Suggestions for the improvement of hand-work were made and have since been carried out. One girl was successful in the Derby Borough Scholarship examination, and she will go to Parkfields Cedars Secondary School on leaving Bretby Hospital. Awards were made to five girls in the Derbyshire Health Week Competition (Needlework), and during the summer local prizes were won for similar work.

(k) **Heart Disease and Rheumatism.** During the year, 178 cases of organic heart disease were found at Routine Medical Inspection, of whom 20 were referred to their own doctors for treatment.

The remaining 158 children are kept under observation by the Assistant School Medical Officers.

SCHOOL CLINICS.

A complete list of the Clinics was given in the Survey Report for 1930. Since then, alterations only have been given, but as these have been numerous I think it well in this Report to present another complete list :—

1. Minor Ailment Clinics.

<i>Clinic.</i>	<i>Address.</i>	<i>When held.</i>	<i>When doctor in attendance.</i>
Alfreton	...School Clinic, Grange St.	Daily, a.m.	2nd and 4th Saturdays.
Ashbourne	...Stone House.	1st and 3rd Saturdays.	1st and 3rd Saturdays.
Belper	...Green Hall.	Daily, a.m.	2nd, 4th and 5th Saturdays.
Chesterfield	...School Clinic, Brimington Rd.	2nd and 4th Saturdays, a.m.	2nd and 4th Saturdays.
Clay Cross	...New premises, High Street.	Saturdays, a.m.	1st and 3rd Saturdays.
Derby	...School Clinic, Walker Lane.	1st and 3rd Saturdays, a.m.	1st and 3rd Saturdays.
Dronfield	...New Council Infants' School.	Mondays, a.m.	3rd Mondays.
Heanor	...School Clinic, Wilmot Street.	Tuesdays and Thursdays, a.m.	1st Thursdays.
Long Eaton	...School Clinic, 4, Nottingham Rd.	Daily, a.m.	2nd and 4th Saturdays.
Matlock	...School Clinic, Dean Hill House, Causeway Lane.	Thursdays, a.m.	Thursdays.
Ripley	...Council Infants' School.	Tuesdays, a.m.	Tuesdays.
Shirebrook	...School Clinic, Cliff House.	Daily, a.m.	Wednesdays.
Swadlincote	...School Clinic, Alexandra Rd.	Daily, a.m.	Mondays and Saturdays.

2. Ear, Nose and Throat Clinics.

<i>Clinic.</i>	<i>When held.</i>
*Alfreton	4th Thursday.
†Ashbourne	3rd Friday.
†Chinley	3rd Wednesday.
Chesterfield	1st Tuesday.
Derby	1st Wednesday.
*Heanor	4th Friday.
*Long Eaton	2nd Thursday.
*Matlock	1st Thursday.
Shirebrook	3rd Thursday.
*Every alternate month, commencing January.	
†Every alternate month, commencing February.	

3. Eye Clinics.

<i>Clinic.</i>	<i>Address.</i>	<i>When held.</i>
Alfreton	...School Clinic, Grange Street.	2nd and 4th Wednesdays, a.m. and p.m.
Belper	...Green Hall.	3rd Mondays, a.m. and p.m.
Bolsover	...New Infants' School.	As required.
Chesterfield	...School Clinic, Brimington Rd.	1st, 2nd and 3rd Thursdays, a.m. and p.m., with 4th Thursdays occasionally.
Chinley	...School Clinic, Lower Lane.	1st Mondays and 1st Wednes- days, a.m. and p.m.
Clowne	...Junior Boys' School.	As required.
Derby	...School Clinic, Walker Lane.	Fridays, a.m.
Dronfield	...New Council Infants' School.	As required.
Eckington	...Wesleyan School.	As required.
Heanor	...School Clinic, Wilmot Street.	Tuesdays, a.m.
Killamarsh	...Council Boys' School.	As required.
Long Eaton	...Board Room, High Street.	2nd Mondays, a.m. and p.m.
Matlock	...Dean Hill House, Causeway Lane.	4th Mondays, a.m. and p.m.
Shirebrook	...School Clinic, Cliff House.	1st Thursdays, a.m. and p.m., and each Saturday, a.m.
Swadlincote	...School Clinic, Alexandra Road.	3rd Wednesdays and oc- casionally 4th Thursdays, a.m. and p.m.

4. Dental Clinics.

<i>Clinic.</i>	<i>When held.</i>
Alfreton	... Daily.
Ashbourne	... 2nd, 3rd, and 4th Mondays. 1st and 3rd Thursdays. 2nd and 4th Saturdays.
Belper	... Tuesdays and Fridays.
Bretby Hall	... 4th Tuesdays.
Chesterfield	... Daily.
Chinley	... Tuesdays, Thursdays, and Saturdays.
Derby	... Mondays, Wednesdays, and Saturdays. 1st, 2nd, and 3rd Tuesdays. 1st and 3rd Fridays. 2nd and 4th Thursdays.
Dronfield	... Tuesdays.
Heanor	... Mondays, Tuesdays, and Saturdays.
Long Eaton	... Wednesdays, Thursdays, and Fridays.
Matlock	... Mondays, Wednesdays, and Fridays.
Swadlincote	... 1st, 2nd, and 4th Wednesdays. 1st, 2nd, and 3rd Thursdays. 2nd and 4th Fridays.
Shirebrook	... Daily.

(5) Orthopædic Clinics.

- ALFRETON.** School Clinic, Grange Street, Alfreton.
Every Monday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m.
Orthopædic Surgeon attends 2nd and 4th Mondays of each month.
- CHESTERFIELD.** School Clinic, Brimington Road, Chesterfield.
Every Wednesday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m.
Orthopædic Surgeon attends 1st and 3rd Wednesdays of each month.
- CHINLEY.** School Clinic, Lower Lane, Chinley.
2nd and 4th Mondays, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m.
Orthopædic Surgeon attends 4th Monday of each month.
- DERBY.** Tuberculosis Dispensary, County Yard, Derby.
Every Thursday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m.
Orthopædic Surgeon attends 2nd and 4th Thursdays of each month.
- HEANOR.** School Clinic, Wilmot Street, Heanor.
Every Friday afternoon, 2 to 4 p.m.
Orthopædic Surgeon attends 1st Friday of each month.
- LONG EATON.** School Clinic, 4, Nottingham Road, Long Eaton.
Every Friday morning, 9.30 a.m. to 12.30 p.m.
Orthopædic Surgeon attends 3rd Friday of each month.
- MATLOCK.** School Clinic, Dean Hill House, Matlock.
Every Tuesday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m.
Orthopædic Surgeon attends 1st Tuesday of each month.
- SHIREBROOK.** School Clinic, Cliff House, Shirebrook.
Every Friday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m.
Orthopædic Surgeon attends 4th Friday of each month.
- SWADLINCOTE.** School Clinic, Alexandra Road, Swadlincote.
Every Tuesday, 9.30 a.m. to 12.30 p.m. 2 to 4 p.m.
Orthopædic Surgeon attends 3rd Tuesday of each month.

(6) Diphtheria Immunisation Clinic.

Dr. Graham, Medical Officer of Health to the Chesterfield Rural District Council, has held a special clinic at Staveley Middlecroft School for the immunisation of children against diphtheria. During the year, ten children have been given a course of prophylactic treatment with T.A.F. Six of these were Schick Tested some nine months after the injections; all gave negative results indicating that immunisation was successful.

VACCINATION.

The following Table shows the vaccinal conditions of the children examined at medical inspection, of whom an enormous and increasing percentage are unvaccinated. The Table indicates that only one out of four school children in the County Elementary Education area is vaccinated.

TABLE P.

Division and District.	Number Examined.	Number Vaccinated	Unvaccinated.	
			Number	Percentage.
NORTH-EAST DERBYSHIRE.				
Chesterfield Rural	3,550	1,026	2,524	70·99
Blackwell Rural	2,200	409	1,791	81·40
Clowne Rural	766	222	544	71·02
Bolsover Urban... ..	608	107	501	82·40
Brampton & Walton Urban ...	120	28	92	76·67
Clay Cross Urban	288	62	226	78·46
Staveley Urban... ..	744	168	576	77·42
Dronfield Urban	256	98	158	61·72
Alfreton Urban	950	263	687	72·32
Heanor Urban	1,127	266	861	76·40
Ripley Urban	620	69	551	88·87
Total	11,229	2,718	8,511	75·80
WEST DERBYSHIRE.				
Bakewell Rural	715	216	499	69·79
Bakewell Urban	100	88	12	12·00
Matlock Urban	676	119	557	82·40
Ashbourne Rural	538	231	307	57·06
Ashbourne Urban	237	100	137	57·81
Chapel-en-le-Frith Rural ...	1,040	309	731	70·29
Repton Rural	1,245	503	742	59·60
Total	4,551	1,566	2,985	65·59
SOUTH-EAST DERBYSHIRE.				
Belper Rural	957	196	761	79·52
Belper Urban	460	47	413	89·78
Wirksworth Urban	229	36	193	84·28
Shardlow Rural	2,339	609	1,730	73·96
Long Eaton Urban	1,353	263	1,090	80·56
Total	5,338	1,151	4,187	78·46
NORTH-WEST DERBYSHIRE.				
New Mills Urban	327	97	230	70·33
Total	327	97	230	70·33
SOUTH DERBYSHIRE.				
Swadlincote Urban	898	143	755	84·08
Total	898	143	755	84·08
GRAND TOTAL	22,343	5,675	16,668	74·60

INFECTIOUS DISEASES.

Arrangements for the detection and prevention of infectious diseases have been fully described in previous reports and continue to work satisfactorily. Briefly, they are as follows:—

The School Medical Officer and local Medical Officers of Health are informed of all outbreaks of infectious disease occurring in the schools at the earliest possible moment. The machinery for the exclusion of individual children was simplified at the beginning of 1926 by instituting a system whereby the Medical Officer of Health embodies his recommendations in certificates which are transmitted to the School Medical Officer, who regularises the exclusion by transforming such certificates into formal authorisations under Article 20 (b) of the Code, thereby obviating the cumbersome and slower procedure provided for under Article 22, which is to the effect that a Medical Officer of Health cannot exclude a child from school, but he can advise his Sanitary Authority, or two members thereof, that exclusion is necessary, and they can require the exclusion of the individual child.

All cases of infectious disease are reported on an appropriate form to both the School Medical Officer and the local Medical Officer of Health by the Head Teachers. This form serves not only as an intimation that infectious disease is prevalent, but also as a basis on which the School Medical Officer is enabled to certify, under Rule 23 of Schedule IV. of the Code, as now amended, that the average attendance of the school has fallen below 60% by reason of the prevalence of epidemic disease in the district. On such a certificate the attendance for any week need not be reckoned in calculating the average attendance for the purpose of the Board's grant.

Inter-notification between the teachers, local Medical Officers of Health and the Central Office has made it possible to keep a close watch on the occurrence of infectious diseases in the schools. The Assistant School Medical Officers investigate, in co-operation with the local Medical Officers of Health, and give advice to the teachers, and, where necessary, exclude children to prevent the spread of infection.

During the year 117 investigations into outbreaks of infectious disease were carried out by Assistant School Medical Officers. The following table shews the number of children examined by them in this connection:—

Chicken Pox...	...	...	46
Conjunctivitis	...	...	9
Diphtheria	...	...	6,595
Measles	...	...	643
Mumps	...	...	40
Scarlet Fever	...	...	807
Whooping Cough	...	...	23
Small Pox (suspected)	...	...	129
Influenza	...	...	7
Total			8,299

I would like to mention a Report I have received from Dr. Flint on an outbreak of diphtheria which occurred in his area. His investigations were carried out in a very thorough manner, and his report of his findings, containing charts and diagrams, is a model of what such reports should be.

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 Q.

TABLE Q.
SCHOOL CLOSURE.

Year	No. of Schools or De- part- ments closed.	No. Closed by School Med. Officer.	No. Closed by Sanitary Author- ity.	REASON FOR CLOSURE.							
				In- fluenza.	Measles.	Whoop- ing Cough.	Chicken Pox.	Scarlet Fever.	Diph- theria.	Mumps.	Other Causes.
1924	32	14	18	3	17	2	1	2	1	1	5
1925	52	10	42	11	33	6	—	—	1	1	—
1926	14	1	13	—	8	3	—	2	1	—	—
1927	128	16	112	100	14	2	1	1	1	2	7
1928	19	3	16	—	15	1	—	2	1	—	—
1929	14	2	12	7	1	1	—	3	1	—	1
1930	22	2	20	2	11	1	1	5	—	—	2
1931	22	1	21	5	6	4	1	—	5	—	1
1932	21	1	20	6	6	4	—	—	5	—	—
1933	19	2	17	15	3	—	1	—	—	—	—
1934	7	1	6	—	4	1	—	1	1	—	—
1935	5	2	3	—	3	—	—	2	—	—	—

TABLE R.
CHILDREN TEMPORARILY EXCLUDED FROM SCHOOL
ON MEDICAL GROUNDS.

(Excluding Verminous conditions).

<i>Tuberculous Conditions</i>	41	<i>Eye Diseases.</i>	
<i>Pre-Tuberculous Conditions</i>	2	Asthenopia	3
<i>Skin Diseases.</i>		Conjunctivitis	1
Impetigo	23	Defective Vision... ..	2
Ringworm	12	Hypermetropia	1
Scabies	23	Myopia	3
Other Skin Diseases	5	Squint	5
		Other Eye Affections	5
<i>Infectious Diseases.</i>		<i>Debility.</i>	47
Cerebro Spinal Meningitis	1	<i>Nervous Diseases.</i>	
" Contacts	2	Asthma	8
Chicken Pox	4	Chorea	45
Diphtheria	183	Epilepsy	10
" Contacts	433	<i>Blood and Heart Diseases.</i>	
Erysipelas (suspected)	1	Anæmia	25
Influenza	6	Heart Disease	2
Measles	1	Rheumatic Carditis	1
" Contacts	2	<i>Other Diseases.</i>	
Mumps	4	Arthritis	2
Polioencephalitis	1	Bronchitis	47
Poliomyelitis	2	Bronchiectasis	9
" Contacts	2	Gastritis	3
Scarlet Fever	412	Paralysis	7
" Contacts	652	Rheumatism	9
Small Pox (suspected)	1	Other conditions	59
Tonsillitis	31		
Typhoid Fever	2		
" Contacts	5		
Whooping Cough	1	Total	2146

TABLE S.
PERMANENT EXCLUSIONS,

All cases of permanent exclusion are, prior to exclusion, reported in detail to the Education Committee. The condition warranting permanent exclusion and the number of cases suffering from the condition that have been excluded during the year are:—

<i>Nervous and Mental Diseases.</i>			
Feeble-mindedness			3
Imbecility			7
Idiocy			1
Epilepsy			1
<i>Other Diseases.</i>			
Bronchiectasis			1
Heart Disease			3
T.B. Peritonitis and Blindness			1
Total			17

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	...	...	57
Mental Tests	...	...	112
Camping party examined			65
			234

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	...	...	1294
Blind Persons Examined	...	...	223
Mental Defectives Examined (M.D. Act)...	...	...	32
Child Guidance Examinations	...	...	100
Examinations under Superannuation Scheme	...	...	11
Compensation Examinations	...	...	7
Miscellaneous	...	...	88
Total...			...1,755

MEDICAL EXAMINATION OF PUPIL TEACHER CANDIDATES.

There were 92 intending pupil teachers examined during 1935, 39 boys and 53 girls, all of whom were passed medically fit.

FOLLOWING UP.

The method of following up children who have been found defective at medical inspection, which was instituted in 1930, works very satisfactorily. The number of home visits to school children by Health Visitors in this connection amounted to 9,565 during the year. This following up is carried out thus :—

Supplementary cards are provided and filled up at the Routine Medical Inspection for each child found to have a defect which requires observation or treatment. These cards, at the end of School Medical Inspection, are handed to the Health Visitor, who follows up those cases referred for treatment, and writes her comments on the back of the card after her visit.

The card is returned to the Central Office two months after School Medical Inspection, the Health Visitor's comments noted, and clinic treatment entered on the back of the card in the space for this purpose. The card is then returned to the Health Visitor, who attaches it to the child's Routine School Medical Card on her next visit to the school if the treatment has been carried out, but in cases where no treatment has been carried out, she retains the card and continues following up. At the next Routine Medical Inspection, any cards she has in her possession relating to children in that school are produced.

The names of any 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, failing 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 well-known Derbyshire type of school, a report on the construction of which was included in some detail in my Report for 1928, is in fact an open-air school. There are now 18 such schools in existence.

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 of open-air recreation and camping are given by Mr. Hobson, the Organiser of Physical Training, in his report on pages 33-39.

NUTRITIONAL STATE OF CHILDREN.

All children examined during 1935 at routine medical inspection have been classified by the Assistant School Medical Officers according to the state of nutrition. On the Board of Education's instructions, the four categories used were those of "A"—Excellent; "B"—Normal; "C"—Sub-normal; and "D"—Bad.

In addition, the Assistant School Medical Officers have made special reports on the nutrition of school children examined at routine and special medical examinations. The general assessment was not based upon any single criterion such as any ratio of sex, height and weight, but was based on clinical observation of general appearance, facies, carriage and posture; the condition of the mucuous membranes, the tone and functioning of the muscular system; and the amount of sub-cutaneous fat and general alertness. In short, it was the general impression which was an important guide in the decision made by the examining officer.

The following table summarises returns made by the school medical inspectors :—

	" A "	" B "	" C "	" D "	TOTAL
Number	3,786	15,576	2,782	199	22,343
Percentage	16·9	69·7	12·5	0·9	100·0

The findings of officers who work in different areas are interesting.

In the Peak district of Derbyshire, which is almost entirely rural, there are very few cases of mal-nutrition.

One officer, whose work is carried out in a mining area, noted that the girls' nutritional state was on the whole better than the boys', this being specially noticeable in the "Leaver" group. This is in all probability due to late hours and insufficient sleep, as the boys when questioned admitted to going to bed much later than the girls.

The necessity of adequate sleep to the growing child cannot be over-estimated, and in the "sub-normal" and "bad" groups the bulk of the children were found to be obtaining far too little sleep, many of them being allowed to stay up at night as late as they please. Although it is a lamentable state of affairs that parents by condoning late hours for their children so injure their growing bodies, the question of sleep is not within the active control of the School Medical Officer, but every opportunity is taken to educate the parents in the value of proper rest for growing children.

Another officer, whose area includes an urban district as well as a rural area, noted little difference between these two areas; in the urban area, 9·3% boys and 8·6% girls showing some degree of sub-normal nutrition, while in the rural area 9% boys and 7·7% girls were showing some degree of sub-normal nutrition (Categories "C" and "D"). It should, however, be mentioned that the urban district concerned is an industrial one in which unemployment is low.

One officer was able to place only 12 in category "D" (bad) out of 2,152 routine inspections. These 12 cases showed under weight, very poor muscular development and poor activity. In some cases the poor nutrition was associated with some underlying pathological condition.

One officer, in addition to the routine investigations into mal-nutrition, made a particular survey of nutrition amongst children specially examined and re-examined for other defects. Of these, 1,396 were boys, of whom 185 were placed in category "C" and seven in category "D," and 1,375 were girls of whom 169 were placed in category "C" and 10 in category "D."

In another area, also urban, the officer shows the good effect of free milk meals on the children of "C" and "D" classes, whose parents cannot afford to pay for milk when it is recommended. Some of the homes where children of sub-normal nutrition live have been visited by one of the assistant school medical officers, who ascertained the family income, diet and general mode of life.

A study of the diets in these homes makes it evident that the chief article of food is bread, there being little meat purchased; margarine is used instead of butter, and there is also a decided lack of animal fats. The children of these families have been given free milk meals at school.

The free milk scheme as detailed in my Annual Report for 1934 has been continued. During the year, 1,722 applications were made for the supply of free milk at school. These applicants were classified as follows:—

<i>Nutrition.</i>	<i>Financial circumstances</i>	
	<i>entitling to receive free milk.</i>	<i>not entitling to receive free milk.</i>
Supernormal	164	13
Normal	470	44
Subnormal	912	119
	1,546	176
	1,722	

The extent to which free milk meals have been supplied will be seen from an examination of the table below, which refers to the free milk supplied each month of 1935.

<i>Month.</i>	<i>Number of children fed.</i>	<i>Number of meals provided.</i>
January	1,967	32,904
February	2,116	36,476
March	2,263	42,220
April	2,174	29,972
May	2,314	43,973
June	2,413	32,256
July	2,406	50,008
August	2,006	4,635
September	2,367	45,421
October	2,579	48,901
November	2,672	43,290
December	2,778	38,000

All the children receiving free milk are weighed and measured before the commencement of the supply, and their height and weight are again recorded at the next and subsequent visits of the Assistant School Medical Officer to the schools. The quetelet factor (*i.e.*, the relationship of height and weight) is ascertained in each case. I have received detailed returns relating to 2,370 children who have been receiving free milk at school for periods varying from 4 to 88 weeks. I give below a table setting out the

age, increase of quetelet factor per month, and number of children in each age group recorded. I am aware that the quetelet factor in itself is not a full indication of the effects of the milk which the children receive, but it is at least a portion of the whole picture. The normal increase in quetelet factor is 0.415 per month at the age of five, but this increase accelerates as the child gets older, until at the age of 13 it increases at the rate of 0.83 per month. It will be seen from the table that the increases are in all cases greater than the normal, but it should be remembered that the children to whom free milk is issued are likely to be of low nutrition in the first instance, so that a good increase may be expected in such cases.

CHILDREN IN RECEIPT OF FREE MILK.

Age when free milk allowed.	Number of children.	Average increase of quetelet factor per month.
4	15	0.533
5	245	0.652
6	274	0.634
7	292	0.709
8	332	0.832
9	293	0.713
10	282	0.907
11	244	0.974
12	228	1.157
13	149	1.418
14	16	1.520
Total ...	2,370	0.843

One Assistant School Medical Officer reports on the effect of free milk on the children as follows :—

“The benefit in some cases is very obvious and some teachers say that the children who fell asleep in class and who now receive free milk keep awake and are mentally brighter and better in every way.”

Some children are recommended for free milk, and it is found that their parents' financial circumstances do not bring them within the scope of the free milk scheme. The homes of these children are visited by Health Visitors, and often it is found that the reason for the child's apparent sub-normal nourishment is accounted for by the fickleness of the child's appetite, ill-balanced diet, faulty home hygiene, etc. After the exercise of tact and persuasion, the Health Visitors have been able to persuade the majority of mothers to follow their advice, and it is gratifying to note that improvement in the nutritional state of the children has been attained. There is no doubt that the nutrition of children often bears more relationship to the commonsense and industry of the mother than the income of the father, but I still stand on what I said in my report last year, viz., that poverty is a matter which even from the medical point of view must be taken seriously into account in forming a judgment on the state of nourishment of any child.

Report of the Organiser of Physical Training for the year 1935.

Since the issue, in 1904, of a scheme of physical training for schools, each decade has produced a fresh scheme which has prescribed movements requiring more accommodation—indoor and outdoor—for their performance than those of its predecessors. The "Syllabus of Physical Training for Schools, 1933," demands not only considerable space, but a suitable surface on which children may kneel, sit or lie during certain exercises, and suitable footwear and loose clothing to allow of free, unrestricted movement of the trunk and limbs. A shower-bath and/or a rub down immediately after the physical training lesson has also been recommended. Further schemes for (a) Senior Boys and (b) Senior Girls are promised during the year 1936.

The progressive nature of these schemes is very admirable, and the benefits to be derived from their application would be excellent if the accommodation of all schools permitted of every child having a daily period of organised physical activity. But the provision of facilities, especially in respect of exercise rooms, changing rooms, shower-baths and drying and storing rooms for changes of clothing and towels has lagged behind deplorably.

The ESSENCE OF TRAINING in any subject or activity is CONTINUITY. Without it, the best cannot be achieved.

In Derbyshire, the percentage of schools having sufficient use of a hall, playground and playing field to allow of a daily period of vigorous physical activity throughout the year is extremely small. A wet day or period, a mud, snow or ice-covered playground, a dusty cinder surface or a windy day when dust swirls into eyes and mouths can make the playground or playing field, or both, wholly unfit for use for organised physical activities for children.

The body not only houses the brain—it supports the brain. Upon the health of the body depends one's very existence—one's physical and mental vigour. This fact is universally accepted, but, though special rooms—fully equipped—are provided to ensure continuity of training in subjects (science, domestic science and handicrafts) which train only parts of the brain or body, or both, the provision of sufficient facilities to ensure continuity of health training, which lays the foundations upon which all other forms of training are best built, has been neglected or considered unnecessary. Till every school has been provided with an exercising room for each sex, no abundance of Organisers and expert teachers can compensate for the loss of continuity of training.

It is pleasing to note that provision has been made for a gymnasium hall in the plans for the proposed new schools at Alfreton, Frecheville, and Grass-moor.

The Physical Training Lesson.

The value of the various courses for teachers taken by the organisers during the years 1934 and 1935, and based on the "Syllabus of Physical Training for Schools, 1933," has been proved during the year under review. Almost without exception, the lessons have shown that the teachers are making genuine efforts towards giving the children vigorous, purposeful exercise after the patterns set at the courses. More and more frequently the organisers find the work good, and in many cases very good. Free practices by individuals, pairs or small groups, are established features of almost every lesson, and the children enter into these activities with a lively interest and an abundance of effort. Ball practices, skipping, jumping, hurdling, the various phases of sprinting, football, cricket, netball, stool-ball and rounders, hand-standings, cartwheels, dives and forward rolls are some of the almost endless variety of free practices employed. This freer and more varied vigorous exercise will, undoubtedly, lead to increased suppleness and mobility, and produce, it is hoped, that condition known as "fighting fit."

Where gymnastic apparatus has been provided in senior boys' schools, the teachers have made an excellent start with the gymnastic training. The exercises on the benches have been taught with care, and the progression to more difficult work is being slowed down somewhat till familiarity with this type of training has increased. The agility and vaulting exercises, however,

have progressed very quickly. Occasionally one sees even running forward-somersaults with take off from, and landing on a wooden floor. The boys love the work, and, though difficulty is experienced in getting the boys to provide shorts, vests, and shoes, there is little difficulty in getting them to discard all but the very minimum of clothing.

This work has commenced so well that it is recommended that special courses in this type of work be arranged in various centres during the year 1936, and that more schools be provided with benches, vaulting boxes, and agility mats.

Miss Hyden, Assistant Organiser, states that in many schools in which conditions for physical training are poor, but in which head-teachers have shown marked interest in physical training and allied subjects, obstacles have been overcome and the standard of work has become very good. As teachers have gained confidence, exercises, performed with a rhythmical swing, have been taken more purposefully. There has been increased mobility and vigour in the lesson and more scope allowed for children's initiative. A child, left out when some activity is to be done in pairs, will now occupy itself with a rope or ball.

In most of the Senior Girls' Schools the work has advanced. The majority of girls in these schools now realise the necessity for wearing suitable clothing. Many have become proficient in the preliminary movements—good landings, etc. Ankle mobility has increased and more advanced movements may be taken with safety. Springiness of movement, self-control, and self-help are more in evidence.

A further extract from Miss Hyden's report is of interest:—"The suggestion of utilising the Infant Room from 3.30—4.0 p.m., wherever possible . . . is an attempt (1) to maintain the enthusiasm of those teachers and girls who have made an effort to provide suitable 'kit' for physical training, and (2) to secure that continuity of exercise which is essential if the children are to benefit fully from their physical training."

Miss Hyden reports that she "talked to the senior girls of one school on the immediate results of exercise and the reason for suggesting a cold sponge, a vigorous rub down, and the changing into a dry vest afterwards. The changing is optional, but, with the co-operation of the parents and the head-teacher, the majority of the senior girls in the school now do change. In an essay on the subject, a girl wrote: "The perspiration which would have clogged my pores was now all wiped away, and, as the saying goes, 'I felt as fresh as a daisy'." Miss Hyden suggests that the provision of cheap canvas screens would be helpful in the schools where children may be encouraged to change underwear.

After the school doctor had reported on the bad posture of most of the girls in a school, Miss Hyden talked to the girls, in the presence of the head-teacher and class teachers, on the effect of round shoulders on the chest and internal organs and demonstrated with the two senior classes a five-minutes table of corrective exercises with a definite effect on posture. It was also advised that these exercises be taken regularly after the recreation period, morning and afternoon, out of doors when possible, and at other times between the desks.

Clothing.

There has been a great advance in respect of suitable clothing in the girls' schools. "Teachers have shown much tact and ingenuity in securing the wearing of practical garments for physical training. Following a talk by the Organiser to the girls in the presence of the teachers, the matter has been left entirely to the discretion of the individual head-teacher. As yet, many garments fall short of the ideal stated in the report for 1934, but the response and progress in this respect is most encouraging." (Extract from Miss Hyden's report).

The boys generally discard jacket, waistcoat, and/or pullover and roll up shirt sleeves, but there are schools in which boys wear nothing above the

waist—in fact, shoes and shorts constitute their whole attire. When and where physical training lessons are taken on a Granwood floor the boys often discard the rubber shoes as the bare foot ensures a better grip on the somewhat slippery floor surface.

Dancing.

English folk dances (country) have covered the full range of dancing in many schools in the past. To give teachers an opportunity of seeing other forms of dancing and other methods of teaching dancing, a lecture demonstration of Rhythmic Dancing was arranged at Woodville. Ninety-two teachers attended the lecture demonstration, and many of them took part in a practical lesson. A course of Rhythmic Dancing for the teachers is now being organised in that area.

Playgrounds.

The grants made during the year towards the cost of asphaltting a number of voluntary school playgrounds will have ensured more periods of physical activities for the children in these schools, and the surface will be more satisfactory in every way.

Playing Fields.

During the year two fresh playing fields have been hired to serve three departments of schools and two fields have been purchased to serve two schools. Further, one field has been purchased to serve two schools for which a field was previously rented.

Sites for six new schools have been purchased, and it is possible that some or all of these may be used as playing fields before building is commenced.

There are now 259 fields available for use by 355 departments of elementary schools.

Swimming.

One new bath—a road-side bath—at Roe Side Farm, Chapel-en-le-Frith, was used from June 27th to September 27th by the boys and girls of four schools. The use of the bath at the Ormonde Colliery, Loscoe, has been discontinued as a suitable temperature and depth of the water could not be relied upon.

Once again the teachers and part-time instructors (12) and instructresses (15) are to be congratulated on the results they have produced during the short period of 16 lessons. Of the 6,918 children who have received instruction, 4,524 were unable to swim at the beginning of the season. 2,828, or 62.4%, of these have learned to swim, and 4,011 proficiency certificates have been earned.

The production of so many swimmers at a cost of approximately £1,500 is a splendid achievement, and the value is enhanced when the effect of the lessons on the personal cleanliness of the children is considered. The head-teacher of every school participating in the Committee's scheme of swimming instruction and every instructor and instructress receives, with his or her notice of the commencement of the instruction, a circular in which he or she is asked to encourage the children to cleanse their bodies thoroughly at home in anticipation of the swimming lessons and to clear the nose and throat by using handkerchiefs immediately before leaving the dressing cubicles at the baths.

The practice of using home facilities for ensuring cleanliness of body for these 16 weekly lessons should assist in the formation of habits of cleanliness.

Head-teachers have frequently drawn attention to children whose physique has improved considerably during the period of the swimming lessons, and at times Assistant School Medical Officers have remarked upon the improved physique of members of the swimming classes.

The number of baths used by the school classes has been 17.

LEARNERS.

(1) Year.	(2) Non-swimmers, May 1st.	(3) Non-swimmers, Oct. 5th.	(4) Learners.	(5) % of Column 4 to Col. 2.
1933... ..	4,339	1,901	2,438	56.1
1934... ..	4,389	1,701	2,688	61.2
1935... ..	4,524	1,696	2,828	62.4

CERTIFICATES.

	1933.			1934.			1934.		
	Boys.	Girls.	Totals.	Boys.	Girls.	Totals.	Boys.	Girls.	Totals.
3rd Class	1,247	858	2,105	1,136	840	1,976	1,322	923	2,245
2nd Class	625	333	958	616	435	1,051	719	414	1,133
1st Class	371	210	581	385	206	591	398	235	633
Totals	2,243	1,401	3,644	2,137	1,481	3,618	2,439	1,572	4,011
Endorsements for									
$\frac{1}{4}$ Mile or more ...	81	50	131	43	28	71	28	62	90
R.L.S.S. Awards ...	35	24	59	23	38	61	17	10	27

NUMBER OF SCHOOLS, PUPILS AND ATTENDANCES.

Year.	No. of Schools using the baths.	No. of Pupils.			No. of Attendances.		
		Boys.	Girls.	Totals.	Boys.	Girls.	Totals.
1933... ..	118	3,645	3,005	6,650	43,695	35,379	79,074
1934... ..	121	3,694	3,135	6,829	45,137	37,465	82,602
1935... ..	128	3,720	3,198	6,918	43,775	36,803	80,578

Thanks are due to the Butterley Company and the Colliery Managers for the free use of the baths at the Britain and Denby Collieries and to the various Baths authorities in the County, at Burton and at Marple, Cheshire, for allowing a very generous use of their baths by organised classes of school children.

At Bolsover, Ripley (Britain and Denby Colliery Baths), Burton, Chapel-en-le-Frith, Clay Cross, Creswell, Darley Dale, Langley, Long Eaton, Matlock Bath, Ringwood and Tibshelf the baths are reserved for the exclusive use of the school classes at stated times. At the Belper, Derby (2), and Marple baths, members of the public may use the baths while the children's lessons are in progress.

Reports from four secondary schools show that 120 pupils have learned to swim, 210 proficiency certificates have been gained, and 28 pupils have earned endorsements of their first-class certificates by swimming a quarter-mile or more.

Teachers' Classes.

Two short courses of five lessons each for men teachers have been taken by the Organiser at Long Eaton and Woodville. Miss Hyden has conducted a short course at Wirksworth and a 10-lesson course at Heanor for women teachers. All these courses were well attended.

Camps.

The Derbyshire Education Committee have granted assistance to 870 needy children to enable them to attend various camps during the year.

Voluntary Associations.

The voluntary associations in the county have again done excellent work in catering for the social and physical welfare of school children, and the calls made upon the time and energy of the workers have been very heavy. Their perseverance, despite difficulties, and their patience and sympathy are worthy of the highest praise.

(1) THE DERBYSHIRE SCHOOLS' CAMPING ASSOCIATION. (Extracts from the Annual Report).

CHILDREN IN CAMP DURING 1935.

ASSOCIATION CAMPS.

	First Week.			Second Week.			1935. Total.	1934. Total.
	Boys.	Girls.	Total.	Boys.	Girls.	Total.		
Derbyshire Education Com.	227	82	309	201	99	300	609	695
Chesterfield ..	3	7	10	2	1	3	13	18
Ilkeston ..	—	—	—	35	19	54	54	72
Buxton ..	—	—	—	26	3	29	29	18
Ilkeston Rotary Club ...	—	—	—	5	5	10	10	10
Long Eaton Rotary Club...	20	6	26	—	—	—	26	19
Matlock Rotary Club ...	12	12	24	—	—	—	24	20
Others	—	—	—	1	—	1	1	—
	262	107	369	270	127	397	766	852

SCHOOL JOURNEYS.

	Boys.	Girls.	Total.
Grassmoor	—	22	22
Heath	—	20	20
Doe Lea	—	20	20
Staveley Middlecroft	—	23	23
Church Gresley (York Road)	—	21	21
Swadlincote (Belmont Street)	—	21	21
Risley	11	12	23
Ripley Council	—	25	25
	11	164	175

"The Committee has very much pleasure in presenting the Report of another highly successful camping season. The long summer days, with more than the usual amount of sunshine, gave added incentives to prospective campers, and, while the total number of children attending the camps was not quite equal to last year's number, there was an increase in the number of schools sending children to the Association Camps and on the School Journeys.

"Association Camps. For the sixth year, these camps were held at Sutton-on-Sea, and for the fourth time on the same sites, from 2nd to 16th August. They were most successful from every point of view; the favourable weather conditions, with many sunny hours, the careful organisation by the Camp Commandants, the willing help of many experienced helpers, and the hearty co-operation of the children, all contributed to make these camps so happy.

"School Journeys. During the year, eight School Journeys from individual schools have been held in connection with the Association's activities.

"The Committee has during the past year reviewed its method of helping school journeys and holiday camps. Previously a capitation grant has been made to each school. This year, however, it was decided to allocate a sum of £40 to assist school journeys, the grant to each party to be at a flat rate, according to the number of schools applying for assistance, but in no case to exceed £6. It was also made a condition that a programme of work of educational value should be submitted to and approved by the Local Education Authority and by the Board of Education. A sum of £20 was allocated for the purpose of assisting school holiday camps, but no applications were received."

(2) THE DERBYSHIRE SCHOOLS' SPORTS ASSOCIATION.

This Association has carried out the usual programme of activities for school children. Each of the sections—football, net-ball, athletics and swimming—has organised an inter-association competition. The football section has arranged representative matches with neighbouring counties, and the athletic section took a team of boys and girls to compete in the Inter-County Athletic Championship Meeting at Kettering in July.

(3) THE DERBYSHIRE FOLK DANCE AND SONG SOCIETY.

This Society has had a satisfactory year. Upwards of 30 courses of instruction have been conducted in the various centres, the membership of which includes a large proportion of teachers.

The annual folk dance festival for children, held at Ripley in June, provided a happy day for hundreds of young folk dancers and interested grown-ups.

The Society organised support of the Derby, Derbyshire, and North Staffordshire Musical Festival (Folk Dance Section). Folk Dance Centres and Schools were encouraged to take part in the festival, and members of the Society took charge of the folk dance party which followed the competitions.

During the Jubilee Week, in May, members of individual centres toured villages in their immediate neighbourhood and gave displays of folk dancing in each. On May 11th, 120 members of the Society made a tour of the Peak of Derbyshire and gave displays in Bakewell, Ashford, Tideswell, Castleton, Hope, Bamford, Hathersage, and Baslow. General dancing in these villages attracted not only the children and young men and women who had done some folk dancing while at school, but large numbers of the older folks were drawn in to enjoy English folk dances for the first time.

Successful folk dance parties have been held at each of the centres each term.

A big drive in physical training is foreshadowed for 1936. The Central Council of Recreative Physical Training, which comprises representatives of all organisations interested in the social and physical welfare of young people, aims "to help to improve the physical and mental health of the community by developing existing facilities for recreative physical activities of all kinds and also by making provision for the thousands not yet associated with any organisation."

In January, 1935, the Council of the British Medical Association appointed a special committee to consider and report upon the necessity for the cultivation of the physical development of the civilian population and the methods to be pursued for this object. The committee began its deliberations at the end of February, 1935, and hopes to issue its report early in 1936.

The committee is impressed by the necessity of raising the national standard of physical fitness. The inquiries which it is conducting are of an extensive character, and include investigations of—

- (1) The provision made at present for the physical education of
 - (a) pupils in public elementary, secondary, and other schools;
 - (b) students in universities and colleges;
 - (c) other persons of post-school age.
- (2) The present arrangements for the training of teachers and organisers of physical education and of play leaders.
- (3) The systems of physical education in use in foreign countries.

The Board of Education has promised two books on recreational physical training for (a) youths and men and (b) girls and women.

There will be a great need for the organisation of courses of instruction for play leaders who will be able to conduct classes for the general public, and a survey of all the rooms, playing fields, etc., available for physical activity would seem to be necessary.

In concluding this report, the Organiser wishes to record his appreciation of the continued support of the Education Committee and the Director of Education and of the co-operation of Miss Hyden and the teachers.

CO-OPERATION OF PARENTS.

All parents are invited to be present at Medical Inspections, and during the year 14,129 or 31% of parents attended.

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.

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 :—

Children reported to be generally neglected	...	11
Children neglected and requiring medical treatment	... ..	6

BLIND, DEAF AND DEFECTIVE CHILDREN.

A. Ascertainment.

The method of ascertainment of defective children continues in the manner described in my Report for 1933, page 38. There is only one child under the age of five on the Derbyshire Register of Blind Persons.

B. Supervision of Mentally-defective Children not in Special Schools.

It will be seen from Table III. at the end of this report that 182 out of 291 children certifiable as mentally defective are attending public elementary schools, while 85 are at no school or institution. The supervision of these children is carefully maintained by the Assistant School Medical Officers and the Health Visitors, who arrange to examine children at least once a year, although many are examined several times a year.

C. Special Schools.

Reference to the work at the Bretby Hall Orthopædic Hospital Special School during the year will be found under the heading of "Orthopædic and Postural Defects," on page 18. The arrangement for after-care remains as described in my annual Report for 1933, as also do the arrangements for the accommodation of children requiring special education in recognised Special Schools outside the County. The following Table is a summary of the after-careers of Derbyshire children who have attended Special Schools :—

	Total.	School Age.		Over School Age.		Dead.	Left County.	No Information.	In Institution.	Under School Age.
		At Ordinary School.	Not at School.	Employed.	Not Employed.					
Orthopædic Cases Discharged from Bretby ...	849	475	23	177	47	29	51	13	—	34
Cripples (discharged from Schools other than Bretby) ...	6	—	1	2	1	—	—	—	2	—
Blind and Partially Sighted	18	3	1	3	1	—	3	—	7	—
Deaf and Partially Deaf ...	31	—	1	17	5	—	5	2	1	—
Epileptic ...	10	1	1	2	1	1	2	—	2	—
Delicate ...	77	46	3	14	7	—	3	4	—	—

FEEBLE-MINDED.

Not Transferred to M.D. Act Com.	At Certified Institution.	Mental Hospital.	Under Guardianship.	Under Statutory Supervision.	Transferred to other Authorities	Total.
3	17	2	—	9	3	34

D. Full-time Courses of Higher Education for Blind, Deaf, Defective and Epileptic Children.

No full-time courses of higher education for such students are provided by the Derbyshire Education Committee. Arrangements are made for the higher education of Derbyshire Blind Students generally at the Royal Midland Institution for the Blind, Nottingham.

When a child in attendance at a special school for the blind reaches the age of 16, the Derbyshire Education Committee gives careful consideration to the question of sending him for a course of higher education so as to enable him to earn his own living either independently or with the help of the Augmentation of Wages Scheme of the Royal Midland Institution for the Blind. Suitable cases are also from time to time referred for training by a Home Teacher or the Secretary of the Royal Midland Institution for the Blind; in each case, a medical certificate is obtained, stating that the candidate is suitable for training. These cases all receive sympathetic consideration.

During the year 1935, students were in training at the following institutions :—

Blind Cases.	<i>Number of Students.</i>			
National Institution for the Blind, London	...	...	...	1
Royal Midland Institution for the Blind, Nottingham...	...	...	...	10
Royal Normal College, London	...	...	...	1
Worcester College for the Blind	...	...	...	1
Sheffield Workshops for the Blind	...	...	...	1
				—
				14

Epileptic Cases.

Chalfont Colony	...	...	...	...	...	2
------------------------	-----	-----	-----	-----	-----	---

Cripples.

Lord Mayor Treloar's Cripple School	...	...	...	...	1
--	-----	-----	-----	-----	---

After Careers of Students who have completed training.

At the end of 1935 there were 20 home workers in Derbyshire employed and assisted in accordance with the Home Workers' Scheme of the Blind Persons Act Committee. The following table shews the occupations and the average weekly wage of the home workers. In each case, 10s. per week is paid by the Royal Midland Institution for the Blind in augmentation of their wages.

<i>Occupation.</i>	<i>No. of Workers.</i>	<i>Weekly Wage.</i>	<i>Average Weekly Wage.</i>
Piano Tuning	2	4/6 to 11/4	7/11
Machine Knitting	4	10/5 to 16/4	13/6
Basket Making	1	7/11	7/11
Boot Repairing	3	3/6 to 13/-	8/4
Brush Maker	1	16/-	16/-

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 arrangements for medical inspection and treatment, following up, and recovering the cost of treatment from parents were fully described in my Annual Report for 1931. During the year 1935, 141 Secondary School Children were found at the school clinics to require spectacles and 158 received dental treatment under the Authority's scheme.

EMPLOYMENT OF CHILDREN & YOUNG PERSONS.

The following Table gives particulars of the medical inspections under the Employment of Children Bye-laws.

No. of Applications.	No. Disallowed.	No. Allowed.	Applications Withdrawn.	Delivery of Newspapers.	Delivery of Milk.	Errand Boy.	Domestic Employment.	Agricultural Work.	Entertainments.
585	4	566	15	438	72	34	9	10	3

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 1934-35, £432 16s. 1d. was collected, as compared with £416 0s. 5d. for 1933-34, and distributed as follows:—

	£	s.	d.
Surgical Appliance Fund	195	18	0
Derbyshire Royal Infirmary	67	5	8
Chesterfield Royal Hospital	31	7	5
Derbyshire Children's Hospital	32	0	11
Mansfield and District Hospital	19	5	11
Burton-on-Trent Infirmary	16	14	4
Derbyshire Women's Hospital	8	4	0
Miscellaneous (less than £5 each)	61	19	10
	£432	16	1

Surgical instruments and spectacles for school children are also supplied from the above fund. During the year ended March 31st, 1935, the expenditure in this connection was £244 6s. 6d.

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, 1935, 1,973 specimens from school children were examined in the County Bacteriological Laboratory. Details of these are as follows:—

	<i>Positive.</i>	<i>Negative.</i>
Swabs for Diphtheria	40	1,904
Hairs for Ringworm	55	59
Urine for Albumin and Sugar ...	3	2
Eye Cultures	1	—
Miscellaneous	4	8
Totals	103	1,973

SCHOOL NURSING SERVICE.

Below is a summary of the work done by the School Nurses during the year:—

Medical Inspections (Elementary Schools)	34,646	
Medical Inspections (Secondary Schools)	2,560	
		37,206
Verminous Inspections		134,261
Other Inspections		13,798
Visits to Homes following up cases		9,565
Visits to Mentally Deficient Persons		2,595
Visits to Blind Persons		26
		197,451

HEALTH EDUCATION.

The influence of continuous education in health matters which takes place at the schools and the school clinics is accentuated once a year by the holding of the special Health Week, and I think there can be no doubt that the improvement in cleanliness can be attributed to the influence of constantly repeated health precepts to the parents of the children.

The special Health Week organised by the Derbyshire Health Week Committee, of which I, as County Medical Officer, am Honorary Medical Adviser, was held from September 30th to October 5th. Assistant School Medical Officers visited 17 schools

and gave health talks to 2,639 scholars. Cinematograph films were shown to 1,562 scholars. In addition, 5,343 posters, 59,500 leaflets and 3,150 booklets were issued by the Derbyshire Health Week Committee, who also awarded prizes for essay competitions. At Somercotes Council School, where a gymnastic display was given by a troupe of gymnastic experts, through the active interest of Councillor F. Wilson, 250 senior boys and girls were present.

CHILD GUIDANCE.

Dr. Bryan reports on this branch of the work as follows :—

	<i>New Cases.</i>	<i>Old Cases.</i>	<i>Attendances.</i>
Matlock Clinic ...	46	22	106
Chinley Clinic ...	17	6	31
Elsewhere ...	32	11	77
	—	—	—
Total ...	95	39	214
	—	—	—

Home Visits ...	...	...	...	75
Special Visits to Schools	...	...	...	37
Special Interviews	...	...	...	25
Visits to Police Stations	...	...	...	3
Visits to Institutions	...	...	...	2
Attendances at Children's Courts	...	...	...	4
				—
Total ...	...	...	...	146
				—

CONDITIONS FOR WHICH ADVICE WAS SOUGHT.

	<i>New Cases.</i>	<i>Old Cases.</i>
Backwardness ...	15	6
Nervousness ...	10	3
Irritability and Tantrums	2	3
Unmanageableness	6	3
Bed Wetting, etc.	11	2
Speech Difficulties	6	—
Disturbed Sleep ...	6	5
Nervous Movements	3	1
Destructiveness	4	—
Stealing ...	10	7
Sex Difficulties	5	—
Digestive Disorders	7	2
Psycho Neurosis, etc.	3	1
Miscellaneous ...	7	6
	—	—
Total ...	95	39
	—	—

RESULTS OF TREATMENT.

					<i>New Cases.</i>	<i>Old Cases.</i>
Apparently Cured	...	...	...	...	19	14
Much Improved	...	...	...	...	13	8
Not Improved	...	...	...	...	3	4
Still under Treatment	...	...	...	...	26	11
Treatment Discontinued	...	...	...	...	5	1
Institutional Treatment	...	...	...	...	4	1
Consultation and Advice only	...	...	...	...	25	—
					—	—
				Total	95	39
					—	—

Dr. Bryan has made a very full and interesting report on the work of child guidance in this County. The report is too full to give at length, but, after pointing out that the work continues very much as in 1934, he says:—

“At the end of the year there was—for the first time since its inception—a waiting list at the Matlock Clinic.

During the year, more special visits have been paid and more following-up of cases has been done, but in spite of this I feel that the following-up is the least satisfactory part of the work. It is impossible for me, single handed, to maintain an adequate contact with all my cases, and I feel more than ever the need of a specially-trained Health Visitor, not only for following up, but also for writing up the preliminary case-histories.

During the past year the question of the boarding-out of troublesome children under the Children Act, 1933, has several times cropped up. In some quarters there appears to be a feeling that it is better to be rid, once and for all, of our responsibility for young delinquents by placing them safely behind the walls of an approved school rather than to perpetuate that responsibility by boarding them out in the care of fit persons.

The Children Act lays it down that in dealing with a delinquent child or young person we are to ‘have regard to the welfare of the child or young person.’ We would not be discharging our obligations under this Act by merely placing a child where it can cause us no further concern until it reaches the age at which we cease to be responsible for it, unless, at the same time, we are convinced that the course is the most likely to cure the child’s anti-social tendencies, and turn it into an efficient and law-abiding citizen.

‘Lack of parental control’ is so often cited as the cause of juvenile delinquency that there is a tendency to overlook the fact that excess of parental control can also be responsible; and while an approved school may be quite a good place for a child who has lacked discipline, it is by no means the best place for a child who has already had too much of it.

If, however, we adopt the alternative course of boarding out these children in the care of a fit person, this must be of no haphazard nature. We must be at great pains to find the sort of home which is suited to the requirements of each individual child.

At present we are experiencing great difficulty in finding suitable homes for problem children; in some instances there have been serious delays before a home has been found, and in others the urgency of the situation has demanded that the child should be placed without waiting to find a home peculiarly

suited to his requirements. To obviate this, I suggest that all Health Visitors should be asked to make a note of persons in their district who are suitable and willing to undertake the care of difficult children. If a list were gradually compiled in this way, it would make it unnecessary for us to rush round in a hurry when emergencies arise, and, in giving us a wider choice, it would make it more likely that we should be able to choose just the sort of home we wanted for the child in question."

With these suggestions I agree, but they take more time than the present staff are able to give. The Children's Acts have meant considerably more work for the Child Guidance department, and shortly it will have to be considered whether Dr. Bryan will not have to give more time to this; that would mean additional staff to relieve him of his routine duties. However, it is not such an easy task to establish a complete service of this sort over an area such as Derbyshire, which covers 1,000 square miles.

SECTION II.

TABLES OF THE BOARD OF EDUCATION.

TABLE 1.

RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed groups :—

Entrants	...	...	...	...	...	7,689
Second age group	...	...	...	...	...	7,214
Third age group	...	...	...	...	...	6,849
Total						21,752
Number of other Routine Inspections						591
Grand Total						22,343

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	11,241
Number of Re-Inspections	...	...	...	...	12,000
Total					23,241

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

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

Prescribed groups :—

Entrants	...	...	...	...	...	891
Second age group	...	...	...	...	...	995
Third age group	...	...	...	...	...	949
Total (prescribed groups)						2,835
Other routine inspections						—
Grand total						2,835

TABLE 1a (SECONDARY SCHOOLS).

A.—ROUTINE INSPECTIONS.

Boys	...	...	...	...	...	...	2,317
Girls	...	...	...	...	...	...	2,294
			Total	...	...	...	4,611

B.—SPECIAL INSPECTIONS.

Boys	...	...	...	...	...	...	31
Girls	...	...	...	...	...	...	16
			Total	...	...		47

C.—RE-INSPECTIONS.

Boys	...	...	...	...	...	...	188
Girls	...	...	...	...	...	...	243
				Total	...	...	431

TABLE II.

A—Return of Defects found by Medical Inspection in the year
ended 31st December, 1935.

DEFECT OR DISEASE.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)		(2)	(3)	(4)	(5)
Skin	(1) Ringworm—Scalp	7	—	3	—
	(2) „ „ Body	12	—	—	—
	(3) Scabies	18	—	22	—
	(4) Impetigo	116	10	57	1
	(5) Other Diseases (Non-Tuberculous)	195	74	45	2
	TOTAL (Heads 1 to 5)...	348	84	127	3
Eye	(6) Blepharitis	100	28	29	6
	(7) Conjunctivitis	22	7	13	1
	(8) Keratitis	3	—	1	—
	(9) Corneal Opacities	3	6	2	2
	(10) Other Conditions (excluding Defective Vision and Squint)	27	19	22	9
	TOTAL (Heads 6 to 10)	155	60	67	18
Ear	(11) Defective Vision (excluding Squint)	851	764	553	65
	(12) Squint	187	127	66	11
	(13) Defective Hearing	52	61	31	20
	(14) Otitis Media	117	52	51	5
Nose and Throat	(15) Other Ear Diseases	116	102	34	8
	(16) Chronic Tonsillitis only	88	617	26	70
	(17) Adenoids only	15	44	5	10
	(18) Chronic Tonsillitis and Adenoids... ..	131	517	47	114
Heart and Circulation	(19) Other Conditions	115	117	36	16
	(20) Enlarged Cervical Glands (Non-Tuberculous)... ..	77	496	8	41
	(21) Defective Speech	23	72	6	9
	(22) Organic	14	126	6	32
Circulation	(23) Functional	25	274	2	19
	(24) Anaemia	131	81	24	35

TABLE II—*continued.*

A—Return of Defects found by Medical Inspection.

DEFECT OR DISEASE.					ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
					No. of Defects.		No. of Defects.	
(1)	(2)	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	(3)	(4)	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	(5)
Lungs	(25) Bronchitis	132	156	16	20			
	(26) Other Non-Tuberculous Diseases	21	38	9	14			
	Pulmonary :—							
	(27) Definite	4	4	1	1			
	(28) Suspected	5	28	8	6			
	Non-Pulmonary :—							
	(29) Glands	12	18	8	10			
	(30) Bones and Joints	9	9	3	4			
	(31) Skin	1	1	2	1			
	(32) Other Forms	3	6	1	4			
	TOTAL (Heads 29 to 32)	25	34	14	19			
Nervous System	(33) Epilepsy	—	20	9	17			
	(34) Chorea	7	26	8	12			
	(35) Other Conditions	32	82	20	40			
Deformities	(36) Rickets	22	105	3	9			
	(37) Spinal Curvature	73	65	24	4			
	(38) Other Forms	99	117	35	51			
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ...		319	380	209	148			
Total		3,184	4,649	1,445	817			

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

Age-groups	Number of Chil- dren In- spected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	7689	1213	15·8	5471	71·2	941	12·2	64	0·8
Second Age-group	7214	1109	15·3	5036	69·9	991	13·7	78	1·1
Third Age-group	6849	1349	19·7	4678	68·3	766	11·2	56	0·8
Other Routine Inspections ...	591	115	19·4	391	66·2	84	14·2	1	0·2
TOTAL ...	22343	3786	16·9	15576	69·7	2782	12·5	199	0·9

TABLE II. A.

SECONDARY SCHOOLS.

Return of Defects found by Medical Inspection in the year
ended 31st December, 1935.

DEFECT OR DISEASE.					Number referred for treatment.		Number required to be kept under observation but not referred for treatment.	
					Boys.	Girls.	Boys.	Girls.
Skin	{	(1) Ringworm—Scalp	—	—	—	—		
		(2) „ Body	—	1	—	—		
		(3) Scabies	—	—	—	—		
		(4) Impetigo	5	—	—	—		
		(5) Other Diseases (Non-Tuberculous)	26	16	13	2		
	TOTAL (Heads 1 to 5) ...		31	17	13	2		
Eye	{	(6) Blepharitis	8	8	—	2		
		(7) Conjunctivitis	2	2	—	2		
		(8) Keratitis	—	—	—	—		
		(9) Corneal Opacities	—	—	—	—		
		(10) Other Conditions (excluding Defective Vision and Squint)...	2	6	10	1		
	TOTAL (Heads 6 to 10)		12	16	10	5		
Ear	{	(11) Defective Vision (excluding Squint)	111	133	218	97		
		(12) Squint	2	2	2	2		
		(13) Defective Hearing	3	1	1	1		
		(14) Otitis Media	5	5	1	2		
Nose and Throat	{	(15) Other Ear Diseases	3	14	5	1		
		(16) Chronic Tonsillitis only	—	4	47	31		
		(17) Adenoids only	1	—	1	1		
		(18) Chronic Tonsillitis and Adenoids... ..	2	1	7	7		
(20) Enlarged Cervical Glands (Non-Tuberculous)	{	(19) Other Conditions	19	4	5	3		
		...	7	1	25	10		
		(21) Defective Speech	2	—	10	1		

TABLE II A—*continued.*

SECONDARY SCHOOLS.

Return of Defects found by Medical Inspection.

DEFECT OR DISEASE.				Number referred for treatment.		Number required to be kept under observation but not referred for treatment.	
				Boys.	Girls.	Boys.	Girls.
Heart & Circulation	Heart Disease :						
	(22)	Organic	... ..	1	—	14	7
	(23)	Functional	... ..	9	1	26	43
	(24)	Anaemia	... ..	7	5	5	2
Lungs	(25)	Bronchitis	... ..	6	4	3	3
	(26)	Other Non-Tuberculous Diseases	... ..	1	—	4	—
Tuberculosis	Pulmonary :—						
	(27)	Definite	... ..	—	—	—	—
	(28)	Suspected	... ..	1	—	2	—
	Non-Pulmonary :—						
	(29)	Glands	... ..	—	—	3	—
	(30)	Bones and Joints	... ..	—	—	1	—
	(31)	Skin	... ..	—	—	—	—
	(32)	Other Forms	... ..	—	—	—	—
TOTAL (Heads 29 to 32)				—	—	4	—
Nervous System	(33)	Epilepsy	... ..	1	—	1	—
	(34)	Chorea...	... ..	—	1	1	—
	(35)	Other Conditions	... ..	1	3	4	—
Deformities	(36)	Rickets	... ..	1	—	5	—
	(37)	Spinal Curvature	... ..	10	16	12	25
	(38)	Other Forms	... ..	15	14	48	23
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases ...				21	31	27	27
Total				272	273	501	293

TABLE III.

Return of all Exceptional Children in the Area,
December 31st, 1935.

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
8	1	—	1	10

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
9	—	20	—	9	38

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
31	6	—	1	38

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
14	—	11	—	4	29

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
23	182	1	85	291

TABLE III—*continued.*

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
6	—	—	25	31

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	17	5	19	41

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
32	89	2	25	148

B. DELICATE CHILDREN.

At Certified Special Schools	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
4	127	—	55	186

C. CRIPPLED CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
29	243	1	59	332

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	47	—	37	85

Children Suffering from Multiple Defects.

Defects.	Special School.	Elementary Schools.	Other Institutions	At no School.	Total.
Feeble-minded and Epileptic ...	—	2	—	6	8
Feeble-minded and Deaf ...	1	—	—	—	1
Feeble-minded and Heart ...	1	—	—	1	2
Feeble-minded and Cripple ...	2	8	1	11	22
Feeble-minded, and Tuberculous ...	1	—	—	—	1
Feeble-minded & Blind	—	1	—	—	1
Feeble-minded, Blind and Cripple ...	—	—	—	1	1
Feeble-minded, Cripple and Epileptic ...	—	—	—	1	1
Feeble-minded, Cripple, Semi-mute ...	—	—	—	1	1
Epileptic and Heart...	—	—	—	1	1
Epileptic and Blind ...	—	—	1	1	2
Blind and Cripple ...	—	—	—	1	1
Cripple & Tuberculous	—	1	—	—	1
	5	12	2	24	43

TABLE IV.

Return of Defects treated during the year 1935.

Group I.—Minor Ailments (excluding Uncleanliness, for which see Table VI.).

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin :—			
Ringworm Scalp (i) X-Ray treatment	11	—	11
(ii) Other „	42	2	44
Ringworm Body ...	17	2	19
Scabies ...	18	3	21
Impetigo ...	590	11	601
Other Skin Disease ...	199	29	228
Minor Eye Defects ...	433	49	482
(External and other, but excluding cases falling in Group II.)			
Minor Ear Defects ...	341	53	394
Miscellaneous ...	2426	367	2793
(e.g., minor injuries, bruises, sores, chil-blains, etc.)			
Total ...	4077	516	4593

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

Disease or Defect.	No. of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
ERRORS OF REFRACTION (including squint). (Operations for squint should be recorded separately in the body of the School Medical Officer's Report). ...	2,223	113	2,336
Other defect or disease of the eyes (excluding those recorded in Group I.) ...	146	56	202
Total ...	2,369	169	2,538
No. of Children for whom spectacles were	Under the Authority's Scheme.	Otherwise.	Total.
(a) Prescribed ...	1,518	87	1,605
(b) Obtained ...	983	584	1,567

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

Number of Defects.													
Received Operative Treatment.												Received other Forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or Hospital.				By Private Practitioner or Hospital, apart from the Author- ity's Scheme.				Total.					
Tonsils only.	Adenoids only.	Tonsils & Adenoids.	Other Defects.	Tonsils only.	Adenoids only.	Tonsils & Adenoids.	Other Defects.	Tonsils only.	Adenoids only.	Tonsils & Adenoids.	Other Defects.		
7	16	58	—	39	—	58	—	46	16	116	—	559	737

Group IV.—Orthopædic and Postural Defects.

	Under the Authority's Scheme.			Otherwise.			Total number treated.
	Residential treatment with education.	Residential treatment without education.	Non-residential treat- ment at an orthopædic clinic.	Residential treatment with education.	Residential treatment without education.	Non-residential treat- ment at an orthopædic clinic.	
Number of chil- dren treated	199	—	883	2	2	25	966

Table V.—Dental Inspection and Treatment.

(1) Number of children inspected by the Dentist

(a) Routine age-groups

AGE	5	6	7	8	9	10	11	12	13	14	TOTAL
Number	3858	3910	3814	3983	4109	4032	3652	3645	3301	425	34,729

(b) Specials ... 3,691

(c) TOTAL (Routine and Specials) ... 38,420

(2) Number found to require treatment ... 32,119

(3) Number actually treated ... 15,314

(4) Attendances made by children for treatment ... 26,595

(5) Half-days devoted to :—

Inspection ... 291
Treatment ... 3,480

Total ... 3,771

(7) Extractions :—

Permanent Teeth ... 4,548
Temporary Teeth ... 23,600

Total ... 28,148

(8) Administrations of general
anæsthetics for extractions 2,762

(6) Fillings :—

Permanent Teeth ... 30,089
Temporary Teeth ... 1,349

Total ... 31,438

(9) Other Operations :—

Permanent Teeth ... 3,700
Temporary Teeth ... 11,704

Total ... 15,404

Table VI.—Uncleanliness and Verminous Conditions.(i.) Average number of visits per school made during the year by
the School Nurses ... 4.6(ii.) Total number of examinations of children in the Schools by
School Nurses ... 134,261(iii.) Number of *individual* children found unclean ... 2,363(iv.) Number of children cleansed under arrangements made by the
Local Education Authority ... 1

(v.) Number of cases in which legal proceedings were taken :—

(a) Under the Education Act, 1921 ... Nil

(b) Under School Attendance Byelaws ... Nil

