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County Borough of Dudley

Annual Report

ON THE WORK OF THE

Public Health Services 1933



P. STANLEY BLAKER, M.R.C.P. (Lond.),
M.R.C.S. (Eng.), D.P.H. (Lond.).
Medical Officer of Health and School Medical Officer.
SIDNEY SKITT, M.S.I.A., M.Inst.P.C., Cert.R.San.I.,
Chief Sanitary Inspector and Cleansing Superintendent.





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MEMBERS OF COMMITTEES.

1933.

HEALTH COMMITTEE.

COUNCILLOR A. E. YOUNG, Chairman.

COUNCILLOR J. PRICE, Vice-Chairman.

THE MAYOR.	COUN.	B. PEARSON.
THE DEPUTY MAYOR.	"	J. C. PRICE.
ALD. F. J. BALLARD.	"	W. SHUTTLEWORTH
COUN. M. H. W. FLETCHER.	"	G. TAYLOR.
" F. MORRIS.	"	J. TAYLOR.
" J. MOSS.	"	D. H. WHITEHOUSE.
" J. D. MURRAY.		

MATERNITY AND CHILD WELFARE COMMITTEE.

COUNCILLOR A. GRIFFIN, Chairman.

COUNCILLOR W. SHUTTLEWORTH, Vice-Chairman.

THE MAYOR.	COUN.	G. TAYLOR.
THE DEPUTY MAYOR.	"	J. TAYLOR.
COUN. O. L. BERGENDORFF.	"	T. TAYLOR.
" B. J. CLANCEY.	"	A. E. YOUNG.
" F. S. CLARK.		
" F. MORRIS.		

(Members of the Council)

MRS. BRATT.

MRS. J. A. TAYLOR.

MRS. HARVEY.

*(Co-opted Members).***SCHOOL MEDICAL SERVICE SUB-COMMITTEE.**

COUNCILLOR F. S. CLARK, Chairman.

COUNCILLOR F. MORRIS, Vice-Chairman.

THE MAYOR.	COUN.	W. SHUTTLEWORTH
THE DEPUTY MAYOR.	"	G. TAYLOR.
COUN. O. L. BERGENDORFF	"	J. TAYLOR.
" B. J. CLANCEY.	"	T. TAYLOR.
" A. GRIFFIN.	"	A. E. YOUNG.

(Members of the Council).

MRS. BRATT.

MRS. J. A. TAYLOR.

MRS. HARVEY.

(Co-opted Members).

STAFF.

Medical Officer of Health and School Medical Officer : P. STANLEY
BLAKER, M.R.C.P. (Lond.), M.R.C.S. (Eng.), D.P.H. (Lond.).

Assistant Medical Officer of Health and School Medical Officer : T.
KENRICK HUGHES, M.B., B.Ch., D.P.H. (Liverpool).

Venereal Diseases and Maternity and Child Welfare Officer : E. J. GORDON
WALLACE, M.B., Ch.B., D.P.H. (Edin.).

Dental Surgeons : D. NELSON, L.D.S. (Eng.), and R. P. NEILSON, L.D.S.
(Edin.).

Ophthalmic Surgeon : MR. ST. CLAIR ROBERTS.

Orthopædic Surgeon : MR. WILSON STUART, M.C.

Tuberculosis Officer (Staffs, Wolverhampton and Dudley Joint Committee) :
Dr. D. J. LOUGHRAN.

Chief Sanitary Inspector and Cleansing Superintendent : *SIDNEY SKITT,
M.S.I.A., M.I.P.C., Cert.R.San.I.

Deputy Chief Inspector : *J. ECKERSLEY, M.R.San.I., M.S.I.A.,
A.M.I.P.C.

District Inspectors : *H. HOLDEN, M.S.I.A., *G. E. CURTIS, M.S.I.A.,
*H. A. RICHARDSON, M.S.I.A.

Assistant Inspector and Chief Clerk : *G. ROLLASON, M.S.I.A.

* (Qualified Meat Inspectors).

Official Rat Catcher : G. PEACOCK.

Cleansing Clerk and General Clerks : W. FELLOWS, W. H. BOWMAN,
G. THOMAS.

Veterinary Inspector : MAJOR R. L. GREEN, M.R.C.V.S.

Health Visitors : NURSE EVANS, NURSE BLACK, NURSE DENNIS, NURSE
REYNOLDS (also Supervisor of Mental Deficiency).

School Nurses : NURSE MUIRHEAD, NURSE JOHNSON, NURSE APPLE-
TON, NURSE PLUMMER.

Maternity and Child Welfare : } Chief Clerk—Miss B. TOMLINSON.

School Medical Service : } Junior Clerk—Miss D. LYMN.

Midwives residing and practising under the Local Authority in Dudley :
Miss BROWN, Mrs. DAVIES, Miss HAWKINS, Mrs. JAMES, Mrs.
McLELLAN, Mrs. MOULD, Mrs. NIBLETT, Mrs. POWELL, Mrs.
RAYBOULD, Mrs. WOOTTON.

COUNTY BOROUGH OF DUDLEY

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

(GENERAL)

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To the Chairman and Members of the Health, Maternity and Child Welfare, and Education Committees of the County Borough of Dudley.

LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report on the Public Health Services of the County Borough of Dudley for the year ended December 31st, 1933.

There is no new special factor to report. The work in all branches of the Service has proceeded according to plan and I think, it may be said, satisfactorily. Each Department has done its job. There has been close liaison between all Departments, and the work generally has been co-ordinated and there has been good co-operation. As I stated in my last Report each branch of the Public Health Services is linked up with the other, and the maximum good results can only be achieved in this way for the good of all.

Vital Statistics. The estimated population for this year as stated by the Registrar General is 60,140. This is the highest figure reached. The total number of **Births** has again fallen, being 1,115, which gives a birth rate of 18.54. This figure is the lowest on record. Thirty years ago the Birth Rate was 33.93.

I am glad to say that the **general Death Rate** is lower than it was for the previous two years. The total number of deaths was 709 and the Death Rate 11.78. This figure is better than that for England and Wales as a whole (12.3) and for the 118 County Boroughs and Great Towns (12.2).

The Infantile Mortality Rate is also lower, being 84.73 per 1,000 live births. The total number of deaths under one year of age was 91.

The number of deaths from the **Principal Zymotic Diseases** during the year was only 4, as against 14 in 1932.—the Death Rates being .06 and .23 respectively.

In connection with this it should be stated that there was a considerable increase in the number of Scarlet Fever cases notified to me during the year, viz. : 123 as against 56 in 1932. This disease has been more prevalent generally throughout the country. On the whole the type of the disease has been of a mild character, though a few cases have been severe.

There is little difference in the Death Rate from **Tuberculosis** in the two years 1933 and 1932—1.13 and 1.08 (total number of deaths being 68 and 65) respectively.

The **Sanitary Administration** of the Borough has proceeded evenly. There have been no drastic changes, but various details have been re-adjusted here and there with a view to better efficiency.

The **Housing** problems in Dudley have always been big and have always needed a great deal of thought and consideration. Though great things have been done in this direction during the past few years (and Dudley can very favourably compare with any town of its size in the kingdom in this respect) yet there is still a tremendous lot to do.

It was said when the Priory Estate was purchased by the Corporation in 1928, that Dudley would have enough building land for many years to come. To-day more than half of the Estate has been covered over with new houses, and at most, in another couple of years or so the Estate should be complete. Up to the end of the year there were 1,269 Council houses built and occupied on the Estate. Private enterprise has also been more active in the Priory Estate and in other parts of the Borough. During the year, 298 houses have been built by private enterprise in the Borough.

Slum Clearance. The Birmingham Street area has been cleared but for a very few houses (7), and practically all the people have been housed in small houses and flats provided by the Corporation. The last of the Munition Huts was also seen during the year. They have all been demolished or burnt. On this site now stand a modern up-to-date Elementary School and a large number of Council houses and two storied flats.

The Chief Sanitary Inspector and I have visited the inmates of these houses, and though they came out of slum houses we find that most of them have responded to the improved conditions of their environment.

Further Slum Clearance Areas have been scheduled and already the necessary work in connection with them has been started. These are the Phoenix Passage and Garden Walk (Stafford Street) areas, to be followed by the Dunn Street and other larger areas.

Powers under Sections 17 and 19 of the Housing Act of 1930 have been exercised during the year.

Under the Repairs Section (17) 66 houses have been inspected and repairs specified. Inspections under this section have decreased this year by reason of pressure of other duties.

Under the Demolition Section (19) 149 houses were inspected and 115 Demolition Orders served on the owners. Of this number 64 have been demolished and the remainder will follow when the houses become void. Up-to-date 181 houses have been demolished under Section 19 as unfit for human habitation.

The agreement between the Housing and Health Committees which was entered into in 1929 that 50% of the void and new Council houses should be allocated for cases recommended by the Health Committee still holds good, and during the year a further 300 cases have been housed for health reasons. This makes a total of 989 families since the agreement was first entered into. Amongst these are very bad cases of overcrowding, unfit houses and cases of Tuberculosis living under insanitary conditions.

A set back in this important matter was felt when the Ministry of Health decreed in 1933 that all new Council houses subject to grant were to be used entirely for slum clearance purposes. I shudder to think of the hundreds of cases of overcrowding that still exist in the Borough and also of the tuberculous patient who is making a fight for life. We have housed quite a number of these latter cases and given them rent assistance to help them combat the disease under bettered environmental conditions.

I do hope the Ministry of Health will reconsider their decision and allow us to continue our Slum Clearance schemes, and at the same time permit us to do something to remedy the overcrowding.

The Food Supplies of the Borough have been carefully watched by the Department. This work is systematically done, and the tradespeople know exactly what to expect. During the year 128 samples of foodstuffs were taken and sent for examination to the Public Analyst of the Borough. On the whole the results have been quite good. In a few cases certain samples were found to be not genuine and the vendors were warned.

Meat Inspection is rigorously carried out and during the year 9 tons of unsound meat were condemned and destroyed.

The standard of **Milk** in the Borough has very much improved of recent years. The proof of this statement is in the fact that whereas a few years ago there were no vendors of any of the designated milks, to-day there are 26 licensed to sell milk of one designation or another. Milk is a most valuable article of our food, especially for children, and its value is being more appreciated. During the year 1933, 27,221 gallons of 'Grade A. Pasteurised' Milk were actually consumed by a certain number of the children in our Elementary Schools. Just over half of this quantity was provided free by the Education Committee, and the remainder paid for by the parents. How important it is then that the milk should be free from any danger.

During the year 80 samples of Milk were taken and analysed for quality, 54 samples for examination for cleanliness, and 26 samples for the purpose of Biological Test, *i.e.*, to make sure that the milk was free from the danger of Tuberculosis. Four samples of Milk were definitely Tubercle infected, *i.e.*, over 15%.

In these latter cases every effort is made to trace the milk back to the infected cow, which, if found, is slaughtered. It is very often a long, tedious and expensive process tracing the infected animal, and not always successful.

Full details of the work done under the Food and Drugs Act will be found in that part of this Report which is contributed by Mr. Skitt, the Chief Sanitary Inspector.

With regard to the **Collection and Disposal of House Refuse**, I have only to state that the work is proceeding satisfactorily. There are five tips in use now and each is properly controlled in a scientific manner. Each tip is used in sections according to a definite mapped out plan with levels, and temperature control. At the end of the day no refuse is seen lying about and it would be difficult for the ordinary observer to recognise that there was a refuse tip there. At the same time a valuable piece of work is being done in re-claiming derelict land for present and future use. I wonder how many members of the Council have visited these tips? I think it would be a useful visit.

This work is being very efficiently and at the same time economically carried out. The total cost for the year's work was £8,624, which figure includes capital expenditure.

A very full account will be found in Mr. Skitt's Report.

On the side of the Public Health Services associated with personal hygiene, *i.e.*, with regard to the Maternity and Child Welfare and School Medical Departments, I would like to say that we have tried to do the best we can. At "The Firs" we are pressed for accommodation owing to extensions of the work and the larger attendances being made. As stated elsewhere, the waiting room accommodation is very limited, and on some days the present waiting room is full to overflowing, resulting in embarrassment to full efficiency. This matter has been represented to the Committees concerned and we are hoping in some way to remedy the defect.

During the year a new centre for Maternity and Child Welfare and School Medical work has been opened in the new School in the Priory Estate. This though sufficiently commodious for School Work is lamentably small for the Maternity and Child Welfare work.

Reference elsewhere will be found to the starting of a special Ear, Nose and Throat Clinic at "The Firs" under Specialist direction. This has supplied an urgent need and has already grown to large dimensions. Children are now receiving systematic treatment for Ear, Nose and Throat complaints (especially chronic ear cases) which they certainly did not get before.

The total attendances at all our Centres during the year were :

Maternity and Child Welfare	...	...	31,299
School Medical Service	...	...	18,705
Total	...	...	<u>50,004</u>

In conclusion it only remains for me to tender my thanks to the Chairman and Members of all my Committees for their kind and sympathetic consideration of all my Reports to them. Also to the officials of all other Departments for their help and co-operation. To my own Staff of all Departments, from top to bottom, I tender my best thanks. They have all worked well and I have enjoyed sharing the work with them.

I remain,

Your obedient Servant,

P. STANLEY BLAKER.

COUNTY BOROUGH OF DUDLEY.

POPULATION	1901 Census	...	...	...	...	48,525
"	1911 Census	...	...	...	...	51,079
"	1921 Census	...	...	...	...	57,100
"	1922, estimated	...	...	...	...	57,860
"	1923, estimated	...	...	...	...	58,150
"	1924, estimated	...	...	...	...	58,600
"	1925, estimated	...	...	...	...	58,810
"	1926, estimated	...	...	...	...	58,930
"	1927, estimated	...	...	...	...	59,370
"	1928, estimated	...	...	...	...	58,820
"	1929, estimated	...	...	...	...	58,870
"	1930, estimated	...	...	...	...	58,820
"	1931, estimated	...	...	...	...	60,050
"	1932, estimated	...	...	...	...	59,740
"	1933, estimated	...	...	...	...	60,140
Elevation	{ Cawney Hill	...	...	820 feet above sea level.		
	{ St. Thomas' Church	...	700	"	"	
	{ Eve Hill	...	720	"	"	
	{ Netherton	...	610	"	"	
	{ Woodside	...	570	"	"	
Geological Formation, Limestone, Carboniferous and Heavy Clays.						
Area of the Borough		...	...	...	...	4,065 acres
Number of Inhabited Houses, Census, 1931		...	...	...	...	13,385
Number of Inhabited Houses, (Estimate, 1933)		...	...	...	...	13,874
The reduced Rateable Value of the Borough for						
General Rate at 1st October, 1933 was		...	...	...	...	£219,256
The product of a penny rate is		...	...	...	...	£865

2. EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	Total.	M.	F.		
Births, Legitimate	1097	605	492	Birth Rate	18.54
" Illegitimate	18	7	11		
Deaths ...	709	421	288	Death Rate	11.78
Number of women dying in, or in consequence of, childbirth :—					
From sepsis	...	...	...	...	—
From other causes	...	...	...	...	2
Deaths of infants under one year of age per 1,000 births :—					
Total	...	...	...	...	91
Infantile Mortality Rate (per 1000 Births)...	...	...	...	...	84.73
Deaths from Measles (all ages)...	...	...	...	...	1
" Whooping Cough (all ages)	...	...	...	...	1
" Diarrhoea (under 2 years of age)	...	...	...	...	14
Death Rate from principal Zymotic Diseases	...	...	...	...	.06
Influenza Death Rate	...	...	...	...	.46
Tuberculosis Death Rate	...	...	...	...	1.13
Total Deaths under 5 years of age	...	...	...	...	121

BIRTHS.

The total number of Births in the Borough during the calendar year 1933, numbered 1,115. This figure was supplied by the Registrar General and included all births of Dudley residents taking place outside the Borough.

The Birth Rate for the Borough per 1,000 of its estimated population during the year is 18.54. In 1932 the Birth Rate was 19.76, and the year before 20.31.

There were 1,074 live births and 41 stillbirths. Of the live births there were 589 males and 485 females, making a preponderance of 104 males over the females.

The Birth Rate for England and Wales was 14.4, and for 118 Great Towns it was also 14.4.

Illegitimate Births. The Registrar-General's memorandum states that there were altogether 18 illegitimate births—7 males, 11 females. The total figure in 1932 was 23.

The Birth Rates for Dudley since 1903 have been :—

Year.		Total Births.		Birth Rate per 1000
1903	...	1691	...	33.93
1908	...	1610	...	30.26
1913	...	1470	...	28.28
1918	...	1355	...	25.09
1923	...	1314	...	22.71
1924	...	1290	...	22.01
1925	...	1309	...	22.02
1926	...	1335	...	22.60
1927	...	1219	...	20.53
1928	...	1196	...	20.14
1929	...	1107	...	18.80
1930	...	1219	...	20.72
1931	...	1220	...	20.31
1932	...	1181	...	19.76
1933	...	1115	...	18.54

DEATHS.

As recorded by the Registrar-General, the total number of Deaths of all ages (whether taking place in or out of Dudley) was 709. Of this number there were 422 males and 288 females—134 more males. In 1932 the total deaths were 770, and in 1931, 778.

The Death Rate per 1,000 of the estimated population of 60,140 in 1933 was 11.78. This is lower than it has been for the two preceding years—12.8 and 12.9 respectively.

The Death Rate for England and Wales for 1933 was 12.3 and for 118 County Boroughs and Great Towns it was 12.2.

Therefore the Death Rate for Dudley was lower than both these figures in 1933.

The Death Rate in the Borough since 1900 is as follows :—

Year.	General Death Rate.		Infantile Mortality Rate	
1900	...	20.45	...	—
1905	...	17.52	...	—
1910	...	14.25	...	151
1915	...	16.31	...	124
1920	...	14.77	...	106
1923	...	12.61	...	86
1924	...	12.45	...	92.24
1925	...	13.5	...	106.2
1926	...	10.5	...	87.89
1927	...	12.4	...	98.44
1928	...	11.06	...	66.88
1929	...	15.09	...	114.7
1930	...	11.6	...	65.62
1931	...	12.9	...	76
1932	...	12.8	...	92.3
1933	...	11.78	...	84.73

MONTHLY DEATH RATE FROM ALL CAUSES.

The Death Rate per thousand of the population for each month in the year is given below—these figures can be compared with similar figures for the year 1923 :—

Year.	Jan.	Feb.	Mar.	Apr.	May.	June	July & Aug.	Sept.	Oct.	Nov.	Dec.
1923.	10.3	15.3	16.3	13.8	11.5	10.2	11.2	8.3	6.6	11.4	12.7
1933.	13.3	13.0	8.6	8.5	8.8	7.1	8.7	8.3	9.4	11.1	13.1

GENERAL REMARKS ON THE DEATH RATE.

It will be seen from the Registrar General's table given on Page 36 that 414 of the total number of Deaths during the year, viz.: 709, were due to the same six diseases mentioned in my last Report. These diseases are Tuberculosis of all forms, Cancer, Cerebral Hæmorrhage, Heart Disease, Bronchitis, and Pneumonia.

Heart Disease. Again this year the Registrar-General's report shows that Heart Disease claims the largest number of Deaths from one cause. Rheumatism of the acute type is very prevalent, and Heart Disease follows on Rheumatism in a large percentage of the cases. Chorea (St. Vitus' Dance) is likewise often followed by Heart Disease, because Chorea is a rheumatic affection involving the nervous system. The prevention of these two diseases, Rheumatism and Chorea, will do a great deal in the prevention of Heart Disease. In addition, the proper treatment of a case of Rheumatism or Chorea will considerably help towards the reduction of Heart complications. Rest, in a great measure, is the secret to the proper treatment of both these conditions. In 1933 there were 101 deaths due to this complaint.

Cancer and Malignant Disease. In 1933 there were 79 deaths due to this cause. In 1932 there were 71. This dread disease still pursues its relentless course and claims large numbers of victims throughout the world each year. Much research work is being done on this subject and much has already been achieved in determining the early signs of the disease, both clinically and microscopically; thus making it possible for patients to seek advice and early treatment. The golden rule to remember is that the earlier these cases are properly treated, the better are the chances of success. In the very early stages complete cures can be effected. The cause of this disease is still a mystery, but with the amount of research work being pursued, one longs and hopes for the dawn of a brighter day.

Tuberculosis. As far as this disease is concerned the picture is brighter. For many years now there has been a slow and steady decline in its incidence and in its mortality rate. In this disease the cause is definitely known, viz.: the Tubercle Bacillus. In consequence of this fact, efforts in many ways are directed to prevent infection from this germ. Many people believe that this disease is hereditary, but this is not so. No person is born with tuberculosis, though both the parents may be suffering from it. What is transmitted to the offspring is the extreme susceptibility (which the parents had) to contract the disease if they are exposed to infection. Hence, every conceivable precaution should be taken to prevent children from becoming infected when there is a patient suffering from tuberculosis in the house.

The Bovine type of Tuberculosis is practically always transmitted to the child through the milk supply. No wonder that Sanitary Authorities are "fussy" to prevent the 2,000 deaths that take place each year amongst the children in England.

In 1933 there were 68 deaths, 61 of these were due to pulmonary and 6 due to other forms of tuberculosis. Curiously enough the figure last year was the same.

The Tuberculosis Death Rate in Dudley was 1.13. This has not altered much during the last few years.

Bronchitis. Sixty-three people died from Bronchitis—three of them died in the first year of life and 60 from the age of 45 and onwards; twenty-three being over the age of 75 years. Of this number 41 were males and 22 females. These deaths take place mostly in the winter months, when the lungs of elderly people are not able to stand the cold and fogs.

Pneumonia. On the other hand, Pneumonia affects all ages and actually more during the first part of life, 38 deaths taking place before the age of 45. In infants, pneumonia is a most fatal disease, 20 dying during the first year of life. There were altogether 53 deaths due to this disease, 40 of these were males and 13 females. The majority of these deaths occur in the winter months.

Cerebral Haemorrhage. There were 51 deaths due to this condition—known commonly as a "stroke." In some people the arteries in the body degenerate earlier in life than others, but as a rule not before the age of 45, usually later. The result of this degeneration is that the arterial walls become less elastic and yielding and the blood pressure causes a burst. This mostly takes place in the brain. Elderly people should therefore avoid strains such as running and lifting heavy weights and the like.

In age groups the 709 deaths are allocated as follows:—

Age Groups.	1932		1933	
0 ...	109	} 163	91	} 121
1 ...	28		17	
2 ...	26		13	
5 ...	29	} 147	19	} 95
15 ...	35		40	
25 ...	83		36	
45 ...	181	} 520	113	} 493
65 ...	142		259	
75+ ...	137		121	
	—		—	
		770		709
		—		—

The following Table shows the number of deaths in each Ward of the Borough :—

Wards.					Number of Deaths during 1933.
St. Thomas'	...	...	...	...	67
Castle	...	...	...	...	95
St. Edmund's	...	...	...	...	40
St. James'	...	...	...	...	66
St. John's	...	...	...	...	79
Netherton	...	...	...	...	144
Woodside	...	...	...	...	60

INFANTILE MORTALITY.

During the year, 91 babies died before they reached their first birthday. The total number of live births was 1074. This gives an Infantile Mortality Rate of 84.73. This figure is lower than the year preceding, as will be seen from the table on Page 13. This is quite a pleasing feature.

Neo-natal deaths numbered 46, so that just about half the number of babies who died under one year old (91) actually died before they were one month old (neo-natal).

Of the 46 neo-natal deaths 33 died as the result of "Debility, Premature Birth, Malformations, Etc." Many of these cases can be traced to pre-natal causes. With better care, in all directions, of the expectant mother many of these deaths would be prevented, at least, many of the cases of Debility and Prematurity.

The following table sets forth the causes of Death in babies under one year old.

	Total of all deaths under 1 year.		Deaths under 1 month old (included in first column).	
Influenza	...	1	...	—
Tuberculosis	...	2	...	—
Bronchitis	...	3	...	2
Pneumonia	...	20	...	2
Diarrhoea	...	11	...	2
Congenital Debility, Premature Birth, Malformations, etc.	...	46	...	33
Other conditions	...	8	...	7
		91		46

STILL-BIRTHS.

During the year, the Midwives and Local Registrar reported to me 41 still-births.

These are all dealt with in detail on Page 81.

MATERNAL DEATHS.

These are also noted in detail on Page 82.

Two deaths occurred during child birth. This gives a Maternal Mortality Rate of 1.79 per 1,000 Births. These two deaths were practically unavoidable.

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

In the last column of the following table will be seen the number of Infectious and other Notifiable Diseases brought to my notice during the year :—

	1925.	1926.	1927.	1928.	1929.	1930.	1931.	1932	1933.
Scarlet Fever ...	152	84	41	21	41	28	58	56	123
Diphtheria ...	32	34	45	38	28	42	31	28	19
Puerperal Fever ...	2	2	3	2	2	2	12	1	7
Puerperal Pyrexia ...	—	—	7	14	10	4	3	4	3
Ophthalmia									
Neonatorum ...	2	5	5	4	7	4	8	6	7
Pneumonia ...	—	—	—	47	58	38	43	72	69
Erysipelas ...	—	—	—	20	25	16	22	7	7
Encephalitis									
Lethargica ...	—	—	—	3	2	1	1	1	—
Continued Fever...	—	—	—	—	1	—	—	—	—
Enteric Fever ...	—	—	—	—	—	1	—	1	1
Anterior									
Poliomyelitis ...	—	—	—	—	—	1	—	—	—
Acute Poliomyelitis									
Encephalitis ...	—	—	—	—	—	—	1	—	—
Cerebro-Spinal									
Fever ...	—	—	—	—	—	—	1	1	—

SMALL POX.

There were no cases notified to me during the year.

A summary of the **State of Vaccination** is given below :—

No. of Births as shown in the Register for the year 1st January to 31st December, 1933 ...	...	...	931
No. of successful Vaccinations during the year ...	...	...	172
No. of Insusceptibility ...	...	...	—
No. of Statutory Declarations under Section 1 of the Vaccination Act, 1907 ...	...	...	640
No. of Deaths unvaccinated ...	...	...	56
No. of Postponements of children unfit for Vaccination ...	...	...	3
No. of Removals, not found and residing elsewhere ...	...	...	9
No. of cases not accounted for in any of the previous columns ...	...	...	51
TOTAL ...	...	...	931
No. of Q. Form Notices issued to parent ...	...	...	250
No. of Cases visited over 4 months old ...	...	...	251

SCARLET FEVER.

As will be seen from the Table given below, 123 cases of this disease were notified to me in 1933. This figure is more than double that of 1932. Scarlet Fever has been more prevalent in all the districts around Dudley, in fact, more or less all over the country. The following Table shows that children of all ages were affected :—

			Cases.
Between 1 and 5 years old	...	...	29
Bewteen 5 and 14 years old	...	...	75
Over 14 years old	...	...	19
Admitted to Hospital	...	...	80
Died in Hospital	...	...	1

The large number of cases removed to Hospital was due to the fact that the home conditions were such as to preclude the question of them being nursed at home. In most of the cases there were other children in the house, and a separate room could not be given to the patient. In other instances the premises were being used for business purposes. One patient died in Hospital. As far as possible all precautions are taken to prevent the spread of the Disease.

When the child is removed to Hospital, the other children are returned to School after the incubation period and after house disinfection has been effected.

DIPHTHERIA.

Diphtheria was not quite so prevalent during the year, though I am of opinion that the cases were more severe in character. Of pre-school age there were 5 cases, of school age 11, and over 14 years 3. Altogether 17 cases were admitted to Hospital, where one died.

Between 1 and 5 years old...	...	...	5
Between 5 and 14 years old	...	...	11
Over 14 years	...	...	3
Admitted to Hospital	...	...	17
Died in Hospital	...	...	1

In 1932 there were 28 Diphtheria cases notified to me.

I am most strongly of the opinion that all Diphtheria patients should be removed to Hospital. I feel satisfied that the patient gets the best chances because he is more efficiently nursed, and I am equally satisfied that the people do not realise the dangers of the spread of the disease to other members of the family and to the public. There can be no doubt that isolation is more certain in a Hospital than at home. No time should be lost in sending a Laryngeal case of Diphtheria to Hospital. Any delay

in this most assuredly lessens the chances of recovery. Timely Tracheotomy will save a patient—too long temporising will end in death.

A supply of **Anti-toxin** is kept at all Police Stations in the Borough. This can be had by Practitioners at any time of day or night.

Sterilised swabs also can be had at "The Firs" at any time. After a swab has been taken, it should be returned to "The Firs" for examination, and a report will be telephoned to the Doctor at the earliest possible moment.

ENTERIC FEVER.

One case was notified during the year. The patient was an adult. The patient died in his house. The blood gave a positive widal reaction. The case was very carefully enquired into but the source of infection could not be traced.

PUERPERAL SEPSIS.

There were no deaths from Puerperal Sepsis. During the year 7 cases were notified to me. These included cases of an inflammatory character of the pelvic tissues. These cases were seen by the Consultant (Mr. Kenneth McMillan) and removed to the Women's Hospital, Sparkhill, Birmingham.

PUERPERAL PYREXIA.

There were 3 cases notified. These were treated at home by the Practitioners. They all recovered.

OPHTHALMIA NEONATORUM.

Seven babies suffered from this complaint. One case was of a very severe type and unfortunately ended in complete loss of sight. Some of the other cases were of moderate severity and the others mild. No damage was done to the eye in any of these cases. All these patients are kept under observation by the Health Visitor and they are urged to attend at the Clinic. Six cases were admitted to the Guest Hospital for treatment.

HOSPITAL ACCOMMODATION FOR THE BOROUGH.

The Guest Hospital is situated in the Borough. It is maintained by voluntary contributions. This Hospital is fully equipped up to modern standard for all kinds of Medical and Surgical work, including most of the Specialist Branches. There is always a long waiting list for admission. At the present time the Builders are busy with additions.

The Hospital is also known as the Dudley Eye Infirmary. Here there is a very big Eye Department which is doing very useful work under a well known Ophthalmic Surgeon in the Midlands.

There are altogether 107 beds (male and female) in the Hospital.

INFECTIOUS DISEASES HOSPITAL.

There is no Infectious Diseases Hospital owned by the Corporation.

The patients are still being sent to the Stourbridge and Halesowen Joint Infectious Diseases Hospital at Hayley Green. The following number of patients were sent during the year :—

		Admitted.	Recovered.	Died.
Diphtheria	... ..	17	16	1
Scarlet Fever	... ..	80	79	1
Enteric Fever	... ..	1	1	—

On receipt of a notification full enquiries are made by the Sanitary Inspector, and if considered suitable, the case is removed. The case is telephoned through to the Hospital and an ambulance is sent for its removal.

The fees paid to the Hospital are the same, viz. ;—£3 per week per patient, and 15/- for removal of the patient. In addition, all anti-toxin and swab examinations are paid for.

TUBERCULOSIS.

During the year 80 cases of all forms of Tuberculosis were notified to me. These were 33 less than in 1932, the figure for the latter year being 113.

There follows now seven tables which give full details of the various phases of the Disease :—

Table I.

Pulmonary :—

Males	...	39
Females	...	29
		<hr/> 68

Non-Pulmonary :—

Males	...	6
Females	...	6
		<hr/> 12

Total ... 80.

Of the total number, 3 cases were notified by the School Medical Officer :—

Table II.

Pulmonary Tuberculosis	...	...	...	68
Non-Pulmonary :—				
Glands ...	...	...	...	4
Abscess of Back	...	...	...	1
Rib ...	...	...	...	2
Hip ...	...	...	...	1
Peritoneum	...	...	...	1
Kidney	...	...	...	2
Knee ...	...	...	...	1
				—12
Total	...	...	...	80
				—

There were 16 other cases brought to my notice by other sources than by Notification, viz. :—

Table III.

Weekly Death Returns	...	...	5
Transferable Deaths from Registrar			
General ...	...	...	7
Transfers from other areas	...	...	3
Posthumous Notifications	...	...	1
			—
			16
			—

In every instance these cases are fully investigated and reasons ascertained for not complying with the Tuberculosis Regulations.

The total number of new cases, therefore, is 96.

The Deaths due to Tuberculosis numbered 68—63 Pulmonary and 5 Non-Pulmonary. This gives a Tuberculosis Death Rate of 1.13.

Table IV. shows the duration of time elapsing between the date of Notification and the date of death.

Table IV.

	1932	1933
Number of cases of Tuberculosis dying within one month of Notification	12	6
Number of cases dying within two months of Notification	6	6
Number of cases dying within three months of Notification	3	4
Number of cases dying within six months of Notification	1	5
	—	—
	22	21
	—	—

The following table shows the Notifications in age groups :—

Table V.

AGE PERIODS.	NOTIFICATIONS.			
	Pulmonary.		Non-Pulmonary.	
	Male.	Female.	Male.	Female.
0 to 1	—	—	—	—
1 to 5	1	—	2	2
5 to 10	—	—	—	2
10 to 15	1	2	1	1
15 to 20	7	2	1	—
20 to 25	7	7	1	—
25 to 35	9	10	1	—
35 to 45	7	4	—	1
45 to 55	5	4	—	—
55 to 65	1	—	—	—
65 and upwards ...	1	—	—	—
Totals	39	29	6	6

In Table VI. will be found figures showing the incidence and Death Rate of Tuberculosis, together with the General Death Rate and Infantile Mortality Death Rate extending over a period of years.

Table VI.

	No. of Cases Notified.	No. of Deaths.	Tuberculosis Death Rate.	General Death Rate.	Infantile Mortality Rate
1913	195	49	.9	17.53	148
1914	126	36	.6	16.0	139
1915	86	52	.98	16.31	124
1916	97	50	.95	14.97	118
1917	67	62	1.14	13.70	109
1918	58	50	.95	18.25	132
1919	27	48	.89	13.44	105
1920	60	46	.69	14.77	106
1921	59	55	.96	11.66	84.5
1922	69	67	1.15	12.77	87.89
1923	95	51	.87	12.61	86.00
1924	95	59	1.00	12.45	92.24
1925	99	50	.86	13.5	106.2
1926	120	47	.82	10.5	87.89
1927	111	48	.80	12.4	98.44
1928	114	55	.95	11.06	66.88
1929	97	49	.83	15.07	114.7
1930	97	58	.98	11.6	65.62
1931	150	62	1.03	12.9	76
1932	113	65	1.08	12.8	92.3
1933	80	68	1.13	11.78	84.73

Lastly, Table VII. gives a statement of the number of cases of Tuberculosis on the Register on the last day of 1933.

Table VII.

Total No. of Cases on the Register at the End of 1933.						
Pulmonary			Non-Pulmonary			Grand Total
Males	Females	Total	Males	Females	Total	
244	201	445	90	67	157	602

During the year, owing to Housing difficulties arising out of the Ministry of Health's Slum Clearance schemes, the housing of tuberculous cases has not been carried out to the same extent as in previous years, and only 4 fresh cases were re-housed during the year. In Dudley there are still many cases of tuberculosis living under bad conditions, that are not only detrimental to the patient but a menace to other members of the family. Our policy of re-housing these cases in Council houses, and, where necessary, giving them rent assistance, has proved a success, and I am more than satisfied that this policy is a sound economic proposition, and should not be interfered with. All these cases are most thoroughly investigated before they are transferred to a Council house.

There are now a total of 52 tuberculous patients living in Council houses, and rent assistance is being given to 12 patients, the total amount given being 38/6 per week.

In every case the patient has to sign a stamped agreement to fulfil certain conditions when he occupies the Council house.

All these families are regularly visited by the Health Visitors and also by the District Sanitary Inspectors.

VENEREAL DISEASES.

The Venereal Diseases Clinic is situated in the Guest Hospital grounds, close to the entrance gates. The clinic is a separate building built on modern up-to-date lines.

Dr. E. J. Gordon Wallace, a Corporation Official, carries out the duties of Venereal Diseases Officer. He also devotes one-third of his time to Maternity and Child Welfare Work. Thus he attends three Infant Welfare sessions and two ante-natal sessions per week. In this way he, and through him, his colleagues, closely co-ordinate the work of the two Departments. In this way Blood Examinations, Smears, etc., are easily taken and examined, and appropriate advice and treatment given.

The following is Dr. Wallace's Report :—

I have the honour to submit a report of the work carried out under the Venereal Diseases Scheme during 1933.

During the year, 256 patients were examined, this being an increase of 49 over 1932. The areas contributing the patients, and diagnoses are shown in Table I.

Table 1.

	Dudley.	Worcs.	Staffs.	West Brom.	Total for 1933	Total for 1932
Syphilis ...	28	12	26	2	68	47
Soft Chancre ...	3	—	—	—	3	—
Gonorrhœa ...	22	19	51	2	94	84
Conditions other than Venereal ...	31	16	43	1	91	76
TOTAL ...	84	47	120	5	256	207

In addition to these new patients, 187 others who on January 1st, 1933, had not completed their treatment, continued to attend. Four patients who had been removed from the Register in the previous year reported again for treatment and observation of the same infection. During the year, therefore, 447 cases were under active treatment.

The total attendances by male patients were 8779, and by women and children 2852, making an aggregate of 11,631. This compares with 10,101 in 1932, 8,979 in 1931, 8,012 in 1930 and 7,874 in 1929.

An analysis of a diagnosis gives the following results :—

Syphilis ...	26.56%
Gonorrhœa ...	36.72%
Soft Chancre ...	1.17%
Conditions other than Venereal	35.55%

As will be seen from Table I., there was an increase of 21 new patients suffering from Syphilis. These, however, were mostly cases of latent Syphilis, and there has been no proportionate increased incidence of the disease in its primary form. There were 14 more cases of female Gonorrhœa, which shows that some success has attended the efforts to induce the consorts of infected males to report for examination and treatment. A satisfactory solution to this problem cannot be reached until legislation is introduced to make treatment of infected persons compulsory. At present every new case of Gonorrhœa and Syphilis is instructed to get his or her consort to report, but this is not always possible.

Two lectures on Venereal Disease were given at Men's Clubs in the district. It is felt that such propaganda does real good and I am very willing to extend this work. Arrangements were made during the year for the film "Damaged Lives" to be shown at the Plaza Cinema, during the week commencing June 4th, 1934.

The close inter-departmental working continues between this centre and the Child Welfare and Ante-Natal Clinics.

The Laboratory work was carried out as heretofore by Dr. Menton at Stafford, and during the year he performed tests of 755 blood sera and 28 cerebro-spinal fluids.

Twenty-eight examinations for the diagnosis of Syphilis and 640 for Gonorrhoea were made at the Clinic by myself.

One hundred and eighty-one patients were discharged after completion of treatment and final tests of cure. Fifty-one left before completion of treatment and 27 after completion of treatment but before final tests of cure, notwithstanding the fact that the importance of cure is thoroughly impressed on all patients.

In conclusion, I should like to thank my nursing staff and attendants for their most loyal co-operation and assistance.

E. J. GORDON WALLACE, M.B., Ch.B., D.P.H. (Edin.).

*Venereal Diseases and Maternity
and Child Welfare Medical Officer.*

WELFARE OF THE BLIND.

The work continues to be done by the Wolverhampton, Dudley and District Institution for the Blind.

A sub-Committee of the Health Committee, with co-opted members, meets from time to time to consider various matters which are then reported to the Health Committee.

Mr. A. C. V. Thomas is the Secretary of the Institution and he attends these meetings.

All blind persons are visited by the Home Teacher and also by the Corporation's Health Visitors.

When the Blind Persons Act of 1920 was first put into operation in Dudley in 1922, the total expenditure voted by the Council, on behalf of the blind persons was £50. During the financial year ended 31st March, 1934, the amount actually expended by the Council was £2,264. 15s. 7d. This sum does not include what was spent by the Institution from their voluntary funds.

The following is Mr. Thomas's Report :—

**WOLVERHAMPTON, DUDLEY AND DISTRICTS
INSTITUTION FOR THE BLIND.**

REPORT TO DUDLEY TOWN COUNCIL.

1st January—31st December, 1933.

The responsibility for the Welfare of the Blind under the Blind Persons Act, 1920, is delegated by the Town Council to the Wolverhampton, Dudley and Districts Institution for the Blind. Under the Local Government Act, 1929, the arrangements with the Institution includes :—

1. Registration of all blind persons ;
2. Employment of Dudley blind workers in the Institution Workshops at Wolverhampton ;
3. Inclusion of Dudley blind homeworkers in the Institution Home Worker's Scheme ;
4. Home teaching and visiting of the Unemployable Blind in their own homes ;
5. Administration of the scheme augmenting the incomes of unemployable blind persons in the borough on the basis of £1 per week.

Registration.

On December 31st there were 114 blind persons on the Institution Register. The following is a classification :—

Workshop Employees	5
Home Workers	3
Employed elsewhere	4
Employed as Institution Collector ...	1
In occupational training	5
Children at School	2
Children under School age	1
Mental and other cases in Institutions ...	4
Unemployables	89
	114

Employment.

There are five Dudley blind persons employed at the Institution. The earnings of these workers are based on Trades' Union or other recognised rates and each employee receives a weekly augmentation (and if married a dependent's allowance) in addition. The average weekly augmentation to each person is 16/-. .

The occupations practised are :—

Brushmaking ;
Matmaking ;
Machine knitting ;
Chair seating ; and
Fancy Basket-making.

During the period under review three trainees in basket-making have been receiving instruction at the Institution.

Home Workers.

There are three blind persons resident in Dudley included in the Institution Home Workers' Scheme. These workers also receive weekly augmentation.

Home Teaching and visiting.

2276 visits have been made by an Institution Home teacher to unemployable blind persons in their homes. Through the medium of this service the individual needs of all blind persons are brought to the notice of the Institution. All capable of being taught are given instructions in Braille and Moon reading and writing, and also in simple home occupations.

Very satisfactory results continue to be achieved by the Institution Social Centre held each month in King Street Congregational Church Room. The Meetings are always well attended and excellent musical programmes are provided.

Augmentation of Income.

The income of unemployable blind persons is augmented on a basis of £1 per week. Under this Scheme, administered by the Institution on behalf of the Town Council, 61 blind persons receive weekly grants.

MENTAL DEFICIENCY ACTS, 1913-1927.

This work is now progressing on a more satisfactory basis. Gradually the ascertainment is proceeding, and every case is being carefully investigated by myself and reported on case sheets. At the monthly Meeting of the Mental Deficiency Committee all fresh cases ascertained are reported. This report states the name, address, age, diagnosis and recommendations.

Nurse Reynolds, The Mental Deficiency Supervisor, continues her work actively for the welfare of these unfortunate people. She still holds her social evenings at "The Firs" with the help of some voluntary ladies. I am sure we are all indebted to these ladies for giving their time to this work.

As there are at present over 40 suitable cases for an occupation centre, it is hoped very soon to start such a centre which will meet every day—both morning and afternoon. This will help very much towards the furtherance of this work.

Mr. A. H. Backler, the Petitioning Officer, has given me the following notes for insertion in this Report. :—

Survey of Mental Deficiency Cases.

(1) As at 1st January, 1934.

	M.	F.	T.
No. of cases in Institution under Order ...	10	16	26
No. of cases under Guardianship (one case has been transferred to an Institution) ...	2	3	5
No. of cases in places of safety (This case has since been Certified and placed in the Institution at Besford Court) ...	1	—	1
No. of cases notified by local education authorities on which no action has yet been taken ...	8	8	16

With regard to the cases under this heading, 7 cases were notified during the year 1933, 4 males, 3 females.

Institutional care has been provided for 1 case, statutory supervision and training is required in respect of another case, and occupational centre training for 3 other cases. The remaining cases are well cared for by their parents and it does not appear necessary that they should be placed under statutory supervision or removed to an Institution.

(2) Mental Defectives in receipt of Poor Law Relief :—

(a) There are 26 cases accommodated at Burton House which is an Institution approved under Section 37 of the Mental Deficiency Act, 1913, but they have not yet been certified. They are well cared for and classified as far as possible by the Institution Authorities, and the Committee do not consider that there is need, at the moment, to have the patients certified by Order on Petition.	11	15	26
--	----	----	----

M. F. T.

(b) There are 13 cases in receipt of Out-Door Relief from the Public Assistance Committee. From information obtained of the Public Assistance Authority, they are well cared for by relatives and it does not seem necessary that they should be placed under Statutory Supervision at the moment, although it may be necessary, by change of circumstances, to provide institution accommodation later.

5 8 13

(3) No. of cases otherwise ascertained but action not yet taken

21 9 30

With regard to these cases, the majority of whom were ascertained during the year, they have been tentatively classified by the Medical Officer of Health and Supervisor under the following heads, namely :—

Institutional care required 10 3 13

Statutory Supervision, training or Guardianship 11 6 17

The question of this classification is under consideration by the Mental Deficiency Committee. Great stress is made that the Local Authority should make more use of their powers for placing a defective under guardianship. The selection of guardians presents considerable difficulty. It was limited by the difficulty of finding suitable guardians who were willing to undertake the responsibility involved. So far as the mental deficients in Dudley were concerned, it had been pointed out, on many occasions, that in several cases the defectives were well cared for by their parents and were only in need, at the present, of some training in an Occupation Centre ; that parents did not appreciate the need of obtaining further legal powers over their own children.

With regard to the question of statutory supervision and training, this matter is under consideration by a Special Sub-Committee who will report at an early date with their recommendations thereon.

					M.	F.	T.
(4)	No. of cases who may become subject to be dealt with	...	...	...	8	17	25

The figures under this heading, although perhaps not strictly accurate, are a helpful guide towards obtaining knowledge as to the incidence of mental defect. These cases are at the moment under voluntary supervision, and are visited periodically by the Supervisor, Nurse Reynolds.

On the recommendation of the Medical Officer of Health these cases require occupational centre training, and they might at any moment be rendered "subject to be dealt with," but only a small proportion of the cases would require Institution care. It seems probable that some of the cases may have to be dealt with statutorily by action taken under one or other of Sections 2(2)(b) and 2(1)(b) and (1) of the Mental Deficiency Act, as amended by the Act of 1927, and so brought within the reach of the benefits of the Act, from which they are now excluded.

The Report of the Voluntary Association which was formed in Dudley on the 19th April, 1932 is as follows :—

"Dudley Voluntary Association for Mental Welfare. Report 1933.

First Evening Centre Class opened on the 3rd May, 1932.

The Supervisor—Nurse Reynolds.

Number on Books 1st January, 1934—11 males, 33 females.

Average attendance per week—4 males, 8 females.

Reliable Helpers—Five day school teachers give their services.

Christmas Party 1933.

Various forms of Handwork are taught ; social entertainments.

The Centre provides useful means of supervision and an opportunity of observing doubtful cases."

BACTERIOLOGICAL WORK.

At "The Firs," where there is a small laboratory, the following examinations were made by Dr. Hughes and Dr. Wallace :—

Diphtheria swabs	...	...	...	152	Positive	12
Sputums for T.B.	...	...	...	74	"	10
Ringworm	...	...	...	4	"	3
Others	...	...	...	38	"	—
Urine	...	...	...	181	"	—
Total				449		25

The Venereal Diseases examinations are done at the Venereal Diseases Clinic at the Hospital.

For the use of General Practitioners, sputum pots and sterile throat swabs can be had by applying at "The Firs."

VITAL STATISTICS.

TABLES

1.—TABLE SHOWING THE COMPARATIVE MORTALITY OF CERTAIN TOWNS IN
1933 AND THEIR BIRTH RATES, Etc.

Town	Population	Birth Rate per 1,000	Death Rate per 1,000	Zymotic Death Rate	Respira- tory Death Rate	Phthisis Death Rate	Infantile Death Rate
England and Wales (1933)	—	14.4	12.3	—	—	—	—
Burton-on-Trent	49,070	13.8	12.3	.22	—	.51	68
Wolverhampton	140,060	14.7	11.2	.32	.72	.90	79
DUDLEY	60,140	18.54	11.78	.06	2.04	1.13	84.73
Worcester	*—	—	—	—	—	—	—
Birmingham	1,023,500	14.7	11.0	.32	1.32	.85	66

* Particulars not available at time of Publication of Report.

II.—DEATHS FROM THE PRINCIPAL ZYMOTIC DISEASES

WERE :—

Diseases	Total Deaths	Under 5 years	5 years and upwards
Scarlet Fever	1	1	—
Measles	1	1	—
Diphtheria	1	—	1
Whooping Cough	1	1	—
Small Pox	—	—	—
Totals	4	3	1

III.—THE NUMBER OF DEATHS FROM THE PRINCIPAL ZYMOTIC DISEASES
IN THE VARIOUS WARDS WERE :—

Diseases	St. Thomas	Castle	St. Edmund	St. James	St. John	Netherton	Woodside	Guest Hospital	Hospital
Scarlet Fever ...	—	—	—	—	—	—	—	—	1*
Diphtheria ...	—	—	—	—	—	—	—	—	1*
Measles ...	—	1	—	—	—	—	—	—	—
Enteric Fever ...	—	—	—	—	—	—	—	—	—
Whooping Cough ...	—	—	—	1	—	—	—	—	—
Small Pox ...	—	—	—	—	—	—	—	—	—
Diarrhoea ...	6	1	1	2	3	1	—	—	—
Influenza ...	1	1	—	1	4	4	2	1	—

* Borough patients treated at Stourbridge and Halesowen Hospital, Hayley Green.

COUNTY BOROUGH OF DUDLEY.

IV. Causes of Death at Different Periods during the year 1933.

CAUSES OF DEATH	Sex	AGGREGATE.													
		All ages		Under 1 Year	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 55	55 and under 65	65 and under 75	75 and up- wards	
		1932	1933												
ALL CAUSES	M	409	421	64	10	5	12	21	20	25	45	78	83	58	
	F	361	288	27	7	8	7	19	16	19	24	38	60	63	
1. Measles	M	3	1	—	—	1	—	—	—	—	—	—	—	—	
	F	2	—	—	—	—	—	—	—	—	—	—	—	—	
2. Scarlet Fever	M	2	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	1	—	—	—	—	—	—	—	—	—	—	—	
3. Whooping Cough	M	1	—	—	—	—	—	—	—	—	—	—	—	—	
	F	4	1	—	—	—	—	—	—	—	—	—	—	—	
4. Diphtheria	M	1	1	—	—	—	1	—	—	—	—	—	—	—	
	F	1	—	—	—	—	—	—	—	—	—	—	—	—	
5. Influenza	M	17	17	1	2	—	1	2	2	1	3	2	2	1	
	F	10	11	—	—	—	—	—	1	—	4	3	—	3	
6. Encephalitis Lethargica	M	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	2	—	—	—	—	—	—	—	—	—	—	—	—	
7. Cerebro-spinal fever	M	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	1	—	—	—	—	—	—	—	—	—	—	—	—	
8. Tuberculosis of Respiratory System	M	33	36	—	1	—	—	9	9	11	4	1	—	1	
	F	25	25	—	—	—	1	8	4	8	1	3	—	—	
9. Other Tuberculous diseases	M	7	2	1	—	—	—	1	—	—	—	—	—	—	
	F	2	4	1	—	1	—	1	1	—	—	—	—	—	
10. Syphilis	M	1	—	—	—	—	—	—	—	—	—	—	—	—	
	F	1	—	—	—	—	—	—	—	—	—	—	—	—	
11. General paralysis of the insane, tabes dorsalis	M	3	2	—	—	—	—	—	1	—	1	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	
12. Cancer Malignant Disease	M	32	46	—	—	—	—	—	—	3	—	17	17	4	
	F	39	33	—	—	—	—	—	—	2	5	10	13	3	

V.—DEATHS AT VARIOUS AGE PERIODS.

The subjoined Table gives the Deaths at various age periods for the last fifteen years.

	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933
Under 1 year ...	135	184	143	127	113	119	145	117	135	80	146	80	93	109	91
Between 1 and 5 years	77	71	67	83	110	55	115	48	77	57	92	53	54	54	30
Between 5 and 15 yrs.	28	41	35	36	37	65	41	24	34	36	26	26	19	29	19
Between 15 and 25 yrs.	35	29	25	39	40	97	36	67	40	85	46	39	39	35	40
Between 25 and 65 yrs.	228	262	205	247	213	160	223	210	246	154	282	252	260	264	265
Over 65 years ...	222	243	191	207	217	234	233	153	256	239	295	238	313	279	264

COUNTY BOROUGH OF DUDLEY.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

Summary of Notifications during the period from the 3rd January, 1933, to 31st December, 1933.

Age Periods	FORMAL NOTIFICATIONS.											
	NUMBER OF PRIMARY NOTIFICATIONS OF NEW CASES OF TUBERCULOSIS.											
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	TOTAL ALL AGES
Pulmonary Males ...	—	1	—	1	7	7	9	7	5	1	1	39
.. Females	—	—	—	2	2	7	10	4	4	—	—	29
Non-Pulmonary M.	—	2	—	1	1	1	1	—	—	—	—	6
.. Females	—	2	2	1	—	—	—	1	—	—	—	6
TOTALS	—	5	2	5	10	15	20	12	9	1	1	80
												126

OF THE

AND CLEANSING SUPERINTENDENT

ON THE

SANITARY CIRCUMSTANCES OF THE AREA

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GENERAL
SANITARY CIRCUMSTANCES
OF THE
COUNTY BOROUGH OF DUDLEY

*To the Chairman and Members of the Health Committee of the
County Borough of Dudley.*

MR. CHAIRMAN AND GENTLEMEN,

In submitting to you my fourth Annual Report on the Sanitary Circumstances of the Borough I have had careful regard to the guidance given in the circular issued by the Ministry of Health for this purpose, and also to the matter given in previous Annual Reports. Repetition of explanation or comment has been avoided wherever possible. The Report is set out on lines similar to the past two years so as to facilitate reference or comparison with these as desired.

One change took place in the staff during the year, Mr. George E. Curtis, District Sanitary Inspector, being appointed Sanitary Inspector to the Kingswood Urban District Council. Mr. Herbert A. Richardson, District Sanitary Inspector to the County Borough of Smethwick, was appointed to succeed Mr. Curtis.

The separate sections of the Report are their own barometer of where pressure has been highest. As in each year since the reorganisation of the Sanitary Service in 1929, action has been governed by urgency of demand, and whilst the latter has varied somewhat over the years, first "Administration" and "Food Supplies" particularly Meat Inspection, then "Cleansing," "Overcrowding—Housing" and so on, the urgency has been consistent in its increase. Much has wanted more with a vengeance.

Latterly 'Housing' action in Slum Clearance and Re-housing accounts for easily 75 per cent. of the time of the staff, and the one time primary essentials of the duties of a Sanitary Department—routine visits for limewashing and inspections for defects at varied registered trades and premises, and other similar public health action—are by force of circumstances somewhat neglected. The increased and very exacting duties required of

the staff in dealing with the demolition of Unfit properties and the re-housing of the families involve responsibility which calls for considerable attention to technical detail and expert knowledge of Housing administration which does not allow of light or slipshod handling. Reference to the sectional report on Housing shows results of achievements of which I think the Council has every right to be proud.

Other items worthy of note are those referring to Houses-let-in-Lodgings and Disinfection.

Again I have to record my thanks and appreciation for the support and confidence of the Chairman and Members of the Health Committee and the Medical Officer of Health. Also for the loyal service of all members of the staff, and workmen. With some experience of Local Government Service in other towns I can say without reservation that I know of no more hard-working, efficient and loyal servants than are my present colleagues in the Sanitary Service, and to their efforts is due in very large measure whatever good results are being achieved. I am humbly appreciative and grateful for their help.

I am, Gentlemen,

Yours obediently,

S. SKITT,

*Chief Sanitary Inspector
and Cleansing Superintendent.*

DRAINAGE, SEWERAGE, RIVERS AND STREAMS.

Some progress was made during 1933 in the provision of sewers to the Himley Avenue and Himley Road Areas concerning which an Enquiry was held in September, 1932 ; the Himley Road and Corser Street section of the sewer being completed and the Pumping Station erected. The work was not sufficiently advanced to allow of any connection from houses in the district.

No other works of importance were carried out in this connection.

Report was made to the Health Committee in February, 1933, on the pollution of brooks at Darby End and Withymoor, Netherton. In each case the brooks feed watercress beds. Five samples of water taken from the brooks and watercress beds as a consequence of complaint as to smells showed these to be contaminated by sewage or animal matter.

The Health Committee instructed that the attention of the Public Works Committee be drawn to the pollution of the brooks, that the persons responsible for the production and sale of watercress from the beds concerned be advised of the findings of the Analyst, and that because of the possible danger of spreading infectious disease they be advised to discontinue the practice of growing watercress in the beds affected.

No material change has, as yet, resulted from these references.

SANITARY INSPECTION OF THE AREA.

Record of Inspections and Results.

Inspections made with respect to :	No. of inspections	Nuisances or defects reported.	Re-visits made re abatement	Nuisances or defects remedied.
Houses under P.H.A. ...	521	1286	1396	958
Drainage work only ...	299	60	247	54
Accumulations ...	105	46	116	23
Animals ...	27	14	39	17
Closets—water pails, privies	187	188	337	204
Ashplaces ...	165	97	170	96
Yards, Courts, etc. ...	27	12	35	27
Overcrowding ...	140	46	52	12
Cesspools ...	28	10	40	2

Other Visits.

With respect to Public Cleansing Services ...	437
With respect to Infectious Disease ...	184
With respect to Miscellaneous Items ...	229
Interviews with Owners and Traders (District Inspectors) ...	993

Notices served—All purposes.

	<i>Informal.</i>	<i>Statutory.</i>	<i>Total.</i>
Notices served	555	200	755
Notices complied with	449	117	566
Choked Drains cleansed by Department's Drain Cleanser			209
Choked Water-closets cleansed by Department's drain Cleanser			101

SANITARY ACCOMMODATION.

The following is a summary of Sanitary Accommodation based on records kept and as near correct as possible.

Statement of Sanitary Accommodation existing on 31st Dec., 1933.

No. of Houses and other premises...	...	...	14,888
No. of houses and other premises served by W.C.'s draining into Public Sewers ... ..	...	...	14,618
No. of houses and other premises served by ashbins			14,810
No. of Privies in the Borough ... ..	...	...	61
No. of Cesspools in the Borough ... ..	...	...	62
No. of Pail-closets in the Borough ... ..	...	...	119

Particulars of Conversions from Conservancy System.

Privies converted to W.C.'s. ... ..	...	...	8
Waste W.C.'s. converted to W.C.'s. ... ..	...	...	1
Privies converted to Pails... ..	...	...	1
New or Additional W.C.'s. provided ... ..	...	...	11
Privies abolished by demolition of dwelling houses			2
Additional Pails provided to other than dwelling-houses ... ..	...	...	3
W.C.'s. and Cesspool, drainage connected to Public Sewers ... ..	...	...	1
No. of dry ashpits abolished ... ..	...	...	14
New ashbins provided (replacements and additional)			133

WATER.

Three samples of the town's water were submitted for analysis. Two were reported to have increased hardness in comparison with previous samples reported on, and at the suggestion of the Analyst, these were referred to the Water Company.

The hardness was reported to be in no way harmful for drinking, but a disadvantage for washing and heating.

Twenty-five special visits or re-visits have been made re water supplies.

Seventy-six dwellinghouses have been given better facilities for the usage of water by the provision of 40 additional taps and 57 additional sinks in houses and washhouses,

FACTORIES, WORKSHOPS AND WORKPLACES.

1.—Inspection of Factories, Workshops and Workplaces.

PREMISES.	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
FACTORIES (including Factory Laundries)	17	2	—
WORKSHOPS (including Workshop Laundries)	7	—	—
WORKPLACES (other than Outworkers' premises).	3	—	—
<i>Total</i>	27	2	—

2.—DEFECTS FOUND.

PARTICULARS.	Number of Defects			No. of Prosecutions
	Found	Remedied	Referred to H.M. Insp'tor	
<i>Nuisances under the Public Health Acts—</i>				
Want of Cleanliness	1	2	—	—
Want of Ventilation	—	1	—	—
Overcrowding	—	—	—	—
Want of Drainage to Floors	—	—	—	—
Other Nuisances	1	3	—	—
Sanitary accommodation { insufficient	2	—	—	—
{ unsuitable or defective	10	7	—	—
{ not separate for sexes... ..	—	—	—	—
<i>Offences under the Factory and Workshops Act:</i>				
Illegal occupation of underground bake-house (s. 101)	—	—	—	—
Other offences	—	—	—	—
(excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).				
<i>Total</i>	14	13	—	—

COURT PROCEEDINGS. Court Proceedings were taken during the year as follows :

Acts, Byelaws or Regulations under which proceedings were instituted.	Default or Offence.	Result.	Fines. £ s. d.	Costs. £ s. d.
Public Health Act, 1875— Sections 116-118.	Unsound Food deposited for the purpose of sale.	Convicted and Fined. Gave Undertaking to the Bench not to stand on Dudley Market either as principal or servant.	5 0 0	—
Ditto.	Owner of premises on which unsound food was deposited for sale.	Case withdrawn on Undertaking to the Bench not to stand on Dudley Market.	—	—
Merchandise Marks Act, 1926, Section 1, and Imported Goods Order, No. 4, 1929.	Foreign tomatoes not marked in accordance with Regulations.	Case proved. Dismissed on payment of costs.	—	4 0
Ditto.	Exposing and selling imported tomatoes not marked with the country of origin.	Convicted and Fined.	15 0	5 0
Public Health (Meat) Regulations, 1924—Article 20.	Splashing of dirt on to five pieces of bacon.	Case proved. Dismissed on payment of costs.	—	4 0
Dudley Corporation Act, 1928 Section 127.	Caravan kept on land without consent of Corporation.	Convicted and Fined after adjournments of 14 and 7 days.	10 0	—
Ditto.	Caravan kept on land without consent of Corporation.	Convicted and Fined after adjournments of 14 and 7 days.	10 0	—
Public Health Act, 1875— Section 91.	Failure to abate nuisances arising from general defects of property.	Case withdrawn after adjournment of 14 days. No costs awarded.	—	—

COURT PROCEEDINGS—continued.

Acts, Byelaws or Regulations under which Proceedings were instituted.	Default or Offence.	Result.	Fines. £ s. d.	Costs. £ s. d.
Houses-let-in-Lodgings Byelaws—Clause 5.	Use of house as a House-let-in-Lodgings, such house not complying with Byelaws.	Convicted. Costs awarded.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Ditto.	—	5 0
Ditto.	Ditto.	Case withdrawn	—	—
Milk and Dairies Order, 1926 —Section 6.	Retailing milk within the Borough without registration for such purpose.	Convicted and Fined.	1 0 0	—

ATMOSPHERIC POLLUTION.

Action was taken as found necessary for the abatement of nuisance from smoke. Observations have been taken and advice given where necessary, and the improvement achieved in certain chimneys which were regular offenders two and three years ago has been maintained.

HOUSES-LET-IN-LODGINGS AND COMMON LODGING HOUSES

As foreshadowed in my Report for 1932 abnormal attention has had to be given to Houses-let-in-Lodgings and Common Lodging Houses during 1933.

In an attempt to enforce the Houses-let-in-Lodgings byelaws in the District proceedings were instituted in August, 1933, under Paragraph 5 of the Byelaws against persons responsible for the letting of ten houses to members of more than one family. In the ten houses there were 45 families and 174 persons in a total of 72 rooms. The total weekly rent paid by the families was £18 4s. 0d. Conviction was obtained in each case with costs—5/-.

Preliminary action and preparation for proceedings, and following up action required to achieve the desired results of compliance with Byelaws, has required a tremendous amount of work and time. At the time of the preparation of this Report (April, 1934) the position had been reached that all but two of the houses had complied with the Byelaws by reducing the number of families to two—tenant and sub-tenant. In the meantime, information is available that other houses are being occupied under conditions similar to those existing in August, in some cases by the families removed from the houses dealt with.

The houses used for this purpose constitute a real problem. Landlords cannot let them as a single tenancy, they cannot sell them, and for the most part, even if they wish to, they cannot face the cost involved in making them comply with the Byelaws, and so they take the only way out—let a number of families in and carry on until the Local Authority can take action. A five shilling fine is not very fearsome, and finally, after humbugging the Local Authority for time and leniency because there is nowhere for the people to go, they clear them out, at any rate for a time, and other houses open up for similar usage.

A further unfortunate effect is that what have otherwise been regarded as desirable suburban areas are now becoming undesirable, and many owner-occupiers complain bitterly of the effect on their environment and the depreciation of the value of their property.

Until there is a sufficiency of houses at a rent that the families concerned can pay, I cannot see any hope of achieving satisfactory results by the operation of the Byelaws.

Three Common Lodging Houses were demolished during the year, these being situated in the Birmingham Street Area, leaving seven others to be demolished in 1934.

One hundred and nineteen visits were made to Houses-let-in-Lodgings and Common Lodging Houses.

OFFENSIVE TRADES.

1.	No. recorded as being within the Borough ...	69
	(Fish Fryer, 61 ; Marine Stores, 4 ; Fellmonger, 1 ; Fat and Tallow Melter, 1 ; Bone Dealer, 1 ; Dealer in Scrap Metal, 1.)	
2.	No. of new Offensive Trades established and Type ...	2
	(Fish Fryer)	
3.	No. discontinued and struck off Register ...	2
4.	No. of existing Offensive Trades made to comply with Byelaws ...	4
5.	No. of visits for inspection ...	87
	No. of re-visits for inspection ...	57

Thirteen premises are registered subject to renewal under Section 44 of the Public Health Act, 1925.

Some complaint was received concerning smells from fat melting at a certain registered premises in the District. Thorough investigation was made as to the possible remedies, and it is pleasant to be able to record that although actually the works concerned were already equipped in accordance with modern standards with all normal fume destruction appliances, the owners readily undertook to provide further experimental and specialised machinery at considerable cost in order to meet the representations of the Sanitary Department. Such pleasing co-operation for the public benefit is sufficiently uncommon to warrant mention.

TENTS, VANS AND SHEDS.

The action taken in 1930-31 to remove about 40 caravans from the District has been very effective in checking any fresh developments in the establishment of further colonies.

Very few caravans now come into the District.

OUTWORKERS.

During the year, 29 lists of Outworkers have been received from employers containing 230 names and addresses, 184 of which were outside the Borough. These were forwarded to the respective Councils in whose Districts the Outworkers resided.

I also received 11 lists containing 24 names and addresses from other Authorities, making a total of 254 Outworkers dealt with.

LEGISLATION IN FORCE IN THE BOROUGH.

The following Byelaws affecting the Health Services were in operation during the year, viz. :—

Houses-let-in-Lodgings	...	...	5/9/30
Common Lodging Houses	...	...	22/5/30
Slaughter Houses	...	...	23/6/30
Nuisances	...	...	12/5/30
Mortuaries, Borough Cemetery and Markets	...	...	12/5/30
New Streets and Buildings	...	...	3/2/30
Offensive Trades	...	...	11/5/28

The Dudley Corporation Act, 1928, also contains many provisions covering matters affecting the Public Health Services.

RATS AND MICE DESTRUCTION ACT, 1919.

Since the last Report, the Official Rat Catcher has continued to meet with considerable success in the destruction of rats in the Borough, by means of poison baits, Cyanogas 'A' dust, and cage traps.

Excellent results have been obtained from Liquid Extract of Red Squill, this poison being found to be most efficient, and safe against domestic animals. Cyanogas 'A' dust has been applied with a proper dusting machine wherever it has been found possible.

Notices were inserted in the local newspapers asking for the co-operation of the public in the destruction of rats and mice during Rat Week, advertising the free distribution of baits, and requesting anyone with infested premises to apply for help and advice from the Sanitary Department.

The table given below is a record of the work of the Official Rat Catcher during the year.

Premises having received attention from the Rat Catcher.	No. of visits and re-visits made.	No. of baits laid.	No. of baits taken.	No. of rats actually caught.	No. of Premises where attention has been terminated after satisfactory service.
78	1014	9570	8782	735	72

CANAL BOATS.

Observation has been kept on the Canal Boats in the Borough, but the number of these boats using the canal is now very small.

RAG FLOCK ACT.

Six samples of Rag Flock were taken during the year from manufacturing premises in the District. All were in accordance with the requirements of the Act.

The premises and fittings in use for the manufacture of flock in the District are reasonably good.

MERCHANDISE MARKS ACT.

AGRICULTURAL PRODUCE GRADING & MARKING ACT.

FERTILISERS AND FEEDING STUFFS ACT.

Regular observation and inspection is made and action taken as required under these Acts. All Inspectors are authorised Officers under the Merchandise Marks Act.

The spadework put in by way of preliminary action, warnings, etc. is considerable. Five-hundred and ninety-one visits were made and innumerable verbal notices given of contraventions.

Proceedings were instituted in two instances for failure to mark imported tomatoes. Conviction was obtained in each case but dealt with lightly as to penalties.

Two samples were taken under the Fertilisers and Feeding Stuffs Act and these were found to be in order.

ENTERTAINMENT PLACES AND LICENSED HOUSES.

Visits of inspection have been made and action as to nuisances has been taken as found necessary.

SCHOOLS.

Inspections for nuisances or insanitary conditions have been made from time to time and notices served upon the Education Authority. All works asked for have been carried out.

INFECTIOUS DISEASE.

DISINFECTION AND DEFESTING.

There was a considerable increase in the service of Disinfection, by reason of the epidemic of Scarlet Fever, and of Defesting by reason of the extraordinary position which arose in the removal of families from the Hutments and from houses demolished under the Housing Act, 1930. This increase affected the duties and time of Inspectors and Disinfecting Staff considerably.

As will be seen in another part of the report—'Housing'—

123 families were removed from the Hutments.

200 families were removed from houses to be demolished.

As a consequence of the conditions found the Health Committee decided to take such action as was found desirable to prevent the infestation of the new Council houses, and for that purpose careful inspection was made of every house as to the condition of bedding, walls, furniture, fittings, etc. Infested mattresses were burned and replaced with new ones, and steam disinfection and fumigation carried out as required.

Report was made to the Health Committee as to the lack of equipment for efficient disinfection and defesting treatment. The transport available was reported to be quite inadequate and unsuitable, and the premises and plant available for steam disinfection defective, insufficient and obsolete. Consideration is being given to the recommendations made.

The extra demand made as a consequence of the Scarlet Fever epidemic may be considered abnormal, but there is every indication that the defesting service is one which will grow as progress is continued with slum clearance.

REGISTERED TRADES AND PREMISES.

Very little progress was made in the consolidation of the position as it affects the bringing up-to-date of office records as to Registered Trades and Premises. This, I am afraid, as with certain other routine duties, has been affected by what I have previously referred to as 'urgent' matters—particularly Housing work.

Trades and Premises in order and Registered	283
Trades and Premises accepted as recorded in Registers but not approved as in order since 1929 	281 approx.
Trades and Premises that have been struck off Registers through discontinuance, removal, etc. 	99
Trades and Premises concerning which con- sideration has been deferred... ...	3

PUBLIC CLEANSING

COLLECTION AND DISPOSAL OF HOUSE AND TRADE REFUSE.

Reference to the Public Cleansing section of the Annual Report for each of the four years immediately preceding this, will help materially in the appreciation of the continued development during the past year.

It might be said to be one of mixed progress and stagnation, the stagnation being only concerned with the protracted development in the provision of a satisfactory Depot premises, efficient incinerator and Disinfecting station. Reports and Meetings have been numerous but owing to the continued uncertainty of the position at the Maughan Street premises with respect to subsidence, no change has taken place.

The progress has been in the continued development in the reclamation of land by Tip Control, and increased efficiency in both Collection and Disposal Services.

During the year consideration was given by the Council and Committees concerned to the unification of the whole of the Public Cleansing Services.

Although the Summer of 1933 was an exceptionally dry and warm one only one complaint was received of nuisance from any of the Controlled Tips. An infestation of crickets at the Priory Tip was dealt with and mastered so that it never got out of hand.

As will be seen in the cost tables, and as foreshadowed in the Report for 1932, the nett cost of the Service increased slightly, due for the most part to the improvement and increase in Tip Control, to the added cost of the cesspool cleansing service, and to the increase in the number of dwellinghouses.

A capital charge of £2,250 was spent out of revenue in the purchase of approximately 47 acres of waste land for reclamation by Controlled Tipping.

No material change has taken place in the manner of service as indicated in the Report for 1932, and I have not considered it necessary to repeat the information given on that point.

The following tables give a summary for comparative purposes of the service given with costs :—

COLLECTION.

Financial Year ending—	1933.	1932.	*1929.
No. of houses and other premises to which collection service is given	14,300	14,200	12,500
Average No. of ashbins cleansed per week	14,470	14,235	8,546
Average No. of privy middens cleansed per week	12	15	No data
Average No. of pail-closets cleansed per week	116	115	No data
Average No. of cesspools cleansed	15	14	No data
No. of ashpits emptied throughout the year	14	24	11,204
Total refuse collected in tons ...	12,011	20,746	20,733

* This year is given for comparative purposes, both in collection and cost records because it is the last year prior to the reorganisation of the Service.

COSTS.

A. GENERAL.

Financial Year ending—	1933.	1932.	1929.*
Total nett cost of Collection and Disposal	£6,374	£5,935	£10,329
Capital Cost defrayed out of Revenue	£2,250	£269	Nil.
Expenditure for all purposes ...	£8,624	£6,224	£10,329
Income from Trade Refuse, and Miscellaneous sales	£36	£103	£13
Nett expenditure for all purposes...	£8,588	£6,121	£10,316
Rateable Value	£219,256	£209,050	£213,618
Product of Penny Rate	£865	£842	£812
Total Rates in the £	15s. 10d.	15s. 10d.	15s. 3d.
Nett cost—equivalent Rate in £ ...	7.37d.	6.4d.	11.6d.
Percentage of above to total Rates in the £	3.92%	3.29%	6.34%
Total nett cost per premises cleansed	8s. 10d.	8s. 6d.	16s. 6d.
Weight (in cwts.) per 1,000 population per day (365 days) ...	19.2	18.9	19.3

B. COLLECTION.

Financial Year ending—	1933.	1932.	*1929.
Total nett cost (exclusive of income)	£5,043	£4,672	£9,106
Total nett cost per ton	4s. 9½d.	4s. 6d.	8s. 9d.
Total nett cost per premises cleansed	6s. 11½d.	6s. 7d.	14s. 7d.

C. DISPOSAL.

Total nett cost (exclusive of income)	£1,367	£1,283	£1,223
Total nett cost per ton in the control of Tips (Average of Five) ...	11.4d.	10.2d.	No data
Total nett cost per ton of burning at the destructor	5s. 3½d.	7s. 2d.	No data

D. VEHICLE COSTS.

Financial Year ending—	1933.	1932.
Four S.D. Freighters engaged in the collection of ashbin and Trade Refuse ...	—	—
Average cost per ton	4s. 2d.	3s. 8d.
Average cost per mile travelled ...	3s. 8d.	3s. 0d.
Two Morris Commercial Vehicles engaged in various duties—		
Average cost per ton	3s. 1d.	3s. 0¾d.
Average cost per mile travelled ...	1s. 11d.	1s. 5½d.

N.B.—The difference in duties between the S. D. Freighters and Morris Vehicles is too extreme to make a comparison.

E. COSTING—REFUSE COLLECTION AND DISPOSAL.

The following figures, taken from the Corporation Account Books and prepared by the Borough Treasurer, are of interest for comparative purposes :—

Year Ending.	Contract or Direct Labour.	Total Collection and Disposal Cost.			Premises Cleansed.	Cost per annum per house Cleansed.
		Nett Collection and Disposal Cost.	Capital Charges.	Total Cost.		
31 3 27	C.	£ 9,876	Nil.	£ 9,876	12,417	s. d. 15 11
31 3 28	C.	10,283	Nil.	10,283	12,444	16 6
31 3 29	C.	10,329	Nil.	10,329	12,499	16 6
31 3 30	D. L.	7,250	1,450	8,700	13,000	13 4
31 3 31	D. L.	6,333	1,682	8,015	13,700	11 9
31 3 32	D. L.	5,955	269	6,224	14,000	8 6
31 3 33	D. L.	6,390	2,250	8,660	14,300	8 11

HOUSING

OPERATION OF THE HOUSING ACTS, 1925-1930.

The principal work done under the above Acts during the year might be summarised as follows :—

Original Inspections.

(a) Under Section 19 for individual demolition	...	149
(b) Under Section 17 for repair	... ..	66
(c) Re-visits and re-inspections to secure effective results from above	... ..	3627
(d) Visits in connection with re-housing of families from the Birmingham Street and New Hall Street Areas, and from houses subject to Section 19 action	... ..	1162

The summary of achievements under these Acts as it concerns houses demolished, families re-housed, and housing repairs is as follows :—

(a) Houses demolished—	
Birmingham Street and New Hall Street Slum Clearance Areas	... .. 62
Individual Demolitions (Section 19)	... .. 64
(b) Families re-housed from houses demolished or to be demolished	... .. 200
(e) Houses repaired under Section 17	... .. 85

As in the past few years tables are given showing :—

- (a) Analysis of Housing Accommodation dealt with under Sections 17 and 19 of the Housing Act.
- (b) Particulars of the conditions causing the re-housing of families as Health Cases under the 50-50 agreement with the Housing Committee, and the total of such cases.
- (c) The summary of Housing action tabulated as required by the Ministry of Health.
- (d) A copy of the progress report required quarterly by the Ministry of Health, and as it was submitted for December 31st, 1933.
- (e) A table furnished by the Borough Engineer (F. H. Gibbons, Esq., M.Inst.M.& Cy.E.) showing the number of new houses erected in the Borough.

- (f) Information supplied by the Housing Manager (W. H. Round, Esq., F.A.L.P.A.) as to (1) families in receipt of rent assistance under the provisions of the Housing Act, 1930 ; (2) The Corporation (Munition) Hutments.

In previous Reports comment has been made on the practical operation of the Housing Acts. Reference to the other sections of this Report, on the subjects of Disinfection and Houses-let-in-Lodgings, will give sidelights on the year's experience as it affects Housing. Submissions in previous Reports have, in the main, been confirmed.

TABLE 1.
HOUSING ACT, 1930. OPERATION OF SECTION 17.
(Repairs Section).

No. of Houses inspected and recorded—66.			Statutory Notices—		
Preliminary Notices—			Served		
Served	...	59	Served	...	27
*Complied with	...	73	Complied with	...	15
*Work commenced	...	86	Work commenced	...	19

Analysis of Housing Accommodation and Type.

HOUSING ACCOMMODATION. No. in brackets indicates number of houses in that class having scullery in addition.			Back to Back.	Blank back Wall.	Through vent or light.	Through Houses.	Court Prop- erties.
1 B.R. & 1 L.R.	2	(1)	—	—	—	2	—
2 B.R. & 1 L.R.	12	(6)	—	—	—	12	—
3 B.R. & 1 L.R.	1	(—)	—	—	—	1	—
2 B.R. & 2 L.R.	38	(5)	—	—	1	37	—
3 B.R. & 2 L.R.	13	(4)	—	—	—	13	—
3 B.R. & 3 L.R.	—	(—)	—	—	—	—	—
4 B.R. & 2 or 3 L.R.	—	(—)	—	—	—	—	—
Housing having more than above	(—)		—	—	—	—	—

Analysis of Conditions Found.

CLOSET ACCOMMODATION.	Separate ...	...	...	...	...	17
	Common to 2 houses	...	...	...	...	26
	" " 3 houses	...	...	...	...	—
	" " 4 or more houses	...	...	...	...	—
	Type : Water Closet	...	...	...	...	43
	Other Types	...	...	...	...	—
WATER SUPPLY.	Separate ...	...	...	...	...	27
	Common to 2 houses	...	...	...	...	12
	" " 3 houses	...	...	...	...	—
	" " 4 or more houses	...	...	...	...	3
	Well Water	...	...	...	...	—
WASH-HOUSE ACCOMMODATION.	Separate ...	...	...	...	...	36
	Common to 2 houses	...	...	...	...	11
	" " 3 houses	...	...	...	...	1
	" " 4 or more houses	...	...	...	...	1
FOODSTORE.	Satisfactory	...	...	...	...	1
	Common with Coals	...	...	...	...	11
	Other unsatisfactory	...	...	...	...	54
YARDS.	Paved	...	...	...	...	13
	Unpaved...	...	...	...	...	—
	Part Paved	...	...	...	...	13
	Separate	...	...	...	...	9
	Common to 1—6 houses	...	...	...	...	16
	" " 6—12 houses	...	...	...	...	1
	" " over 12 houses	...	...	...	...	—
SINKS AND BRICK SILLS.	Scullery :	No. of sinks	...	...	...	12
	" " brick sills	...	...	...	...	4
	Wash-house :	" " sinks (sep.)	...	...	...	9
		" " " (com.)	...	...	...	6
		" " sills (sep.)	...	...	...	11
		" " " (com.)	...	...	...	6

*These figures have reference also to notices served in 1932.

TABLE 2.

HOUSING ACT, 1930. OPERATION OF SECTION 19.
(Demolition Section for Individual Houses).

No. of Houses inspected and recorded—149.

No. of Dem. Orders served	115	No. of Undertakings accepted:	
No. of houses demolished...	64	A. To make fit ...	9
No. outstanding for demolition ...	132	B. Not to re-use for human habitation... ..	6
		No. actually made fit ...	2

Analysis of Housing Accommodation and Type.

HOUSING ACCOMMODATION. No. in brackets indicates number of houses in that class having scullery in addition.	Back to Back.	Blank back Wall.	Through vent or light.	Through Houses.	Court Prop- erties.
1 L.R. only 3 (1)	1	—	1	1	3
1 B.R. & 1 L.R. 36 (—)	12	19	3	2	24
2 B.R. & 1 L.R. 90 (21)	12	36	20	22	67
3 B.R. & 1 L.R. 2 (—)	1	—	1	—	1
2 B.R. & 2 L.R. 16 (3)	—	3	—	13	7
3 B.R. & 2 L.R. 2 (—)	—	—	—	2	—
3 B.R. & 3 L.R. — (—)	—	—	—	—	—
4 B.R. & 2 or 3 L.R. — (—)	—	—	—	—	—
Housing having more than above — (—)	—	—	—	—	—

Analysis of Conditions Found.

CLOSET ACCOMMODATION.	Separate	22
	Common to 2 houses	49
	" " 3 houses	11
	" " 4 or more houses	1
	Type : Water closet	76
	Other Types	7
WATER SUPPLY.	Separate	24
	Common to 2 houses	7
	" " 3 houses	8
	" " 4 or more houses	25
	Well Water	—
WASH-HOUSE ACCOMMODATION.	Separate	25
	Common to 2 houses	8
	" " 3 houses	14
	" " 4 or more houses	16
FOODSTORE.	Satisfactory	—
	Common with coals	10
	Other unsatisfactory	117
YARDS.	Paved	10
	Unpaved... ..	5
	Part Paved	35
	Separate	—
	Common to 1—6 houses	39
	" " 6—12 houses	5
	" " over 12 houses	2
SINKS AND BRICK SILLS	Scullery : No. of sinks	7
	" " sills	7
	Wash-house : " " sinks (sep.)	8
	" " " (com.)	7
	" " sills (sep.)	11
	" " " (com.)	31

TABLE 3.

PARTICULARS OF RE-HOUSING OF FAMILIES FROM UNFIT HOUSES, OVERCROWDED HOUSES AND HOUSES OCCUPIED BY PERSONS SUFFERING FROM TUBERCULOSIS, ETC.

The figures given are for houses allocated by the Health Committee under the 50/50 agreement with the Housing Committee, commencing November, 1929, and ending December 31st, 1933.

Families Removed : 1929, 34 ; 1930, 350 ; 1931, 150 ; 1932, 155 ; 1933, 300. Total—989.

Conditions causing Removal.		Families Re-housed.			
(1) Caravans	...	...	...	...	17
(2) Corporation—		Having T.B. patient	and being		
(Munition Hutments)		overcrowded	...	...	3
"		Being overcrowded	...	...	12
"		For other purposes	...	...	87
(3) Overcrowding only		...	...	...	376
"		With T.B. in family	...	...	32
(4) Specials	...	...	...	...	13
(5) Street Widening	...	...	...	...	21
(6) Unfit House only (individual Section 19)		...	...	...	192
"		With T.B. in family	...	...	2
"		With overcrowding	...	...	67
(7) Tuberculosis only	...	...	...	...	15
(8) Birmingham Street Slum Clearance Area		...	...	...	148
(9) New Hall Street Slum Clearance Area	...	...	...	...	4
					989

Of the Tuberculosis cases 12 were in receipt of financial assistance on December 31st, 1933.

Of the families removed from Unfit Houses where demolition ensued under the Housing Act, 1930, 164 were in receipt of financial assistance on December 31st, 1933 :—

67 of these were removed from the Birmingham Street and New Hall Street Slum Clearance Areas.

97 were removed from individually unfit houses.

HOUSING.

Summary as required by Ministry of Health.

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

- | | | |
|---|-----|------|
| (1) (a) Total number of dwelling-houses inspected for housing defects) under Public Health or Housing Acts) (includes re-inspections) | ... | 767 |
| (b) Number of inspections made for the purpose | | 5790 |

(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	...	...	...	246
(b) Number of inspections made for the purpose				3627
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	246
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	...	...	...	521
2.—Remedy of Defects during the year without service of Formal Notices :—				
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	...	...	...	155
3.—Action under Statutory Powers during the Year :—				
A.—Proceedings under sections 17, 18 and 23 of the Housing Act, 1930 :—				
(1) Number of dwelling houses in respect of which notices were served requiring repairs	...	...		36
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—				
(a) By owners	...	...	...	14
(b) By local authority in default of owners	...			3
B.—Proceedings under Public Health Acts :—				
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	72
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—				
(a) By owners	...	...	...	66
(b) By local authority in default of owners	...			5
C.—Proceedings under sections 19 and 21 of the Housing Act, 1930 :—				
(1) Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	115
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	64

D.—Proceedings under section 20 of the Housing Act, 1930 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil.
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil.
Visits and re-visits connected with Housing and not recorded above	1162
(These were in connection with re-housing, defesting, enquiries and investigation.)	

The following is a summary of the Return submitted to the Ministry of Health on December 31st, 1933, as to the progressive achievement under the Housing Act, 1930.

Part I. of the Act : Clearance Areas.

No. of unfit dwellinghouses demolished	154
No. of other houses demolished	2
No. of persons displaced from demolished houses ...	652

Part II. of the Act : Individually Unfit Houses.

No. of houses demolished (Section 19)	181
No. of buildings closed (Section 20)	Nil.
No. of persons displaced from above	701
No. of dwellinghouses made fit—formal action ...	60
No. of Voluntary Demolitions	12
No. of dwellinghouses closed under undertaking ...	14
No. of dwellinghouses made fit—Informal Action ...	268

Street Widening.

Thirteen houses were demolished during the year for street widening.

Hutments.

1933 might be handed down in the Town's History as the year in which Dudley achieved **world wide publicity** by reason of Films showing in many Countries the burning of the Munition Hutments.

The Hutments referred to had for many years been regarded as one of Dudley's 'black spots.' They remained to become a 'bright spot' and then—finish !

Two hundred and eighty-six in all were taken over by the Corporation from the Office of Works in December, 1929. The cleared site is now being used for Housing development.

HOUSING.**Number of New Houses erected in the Borough.**

The following Tables furnished by the Borough Engineer show the number of houses erected in the Borough, under the 1919 and 1923 to 1930 Acts, since the War.

Livingroom, Scullery and 3 Bedrooms.			
RED HILL	...	...	102
BLOWER'S GREEN	...	...	60
NORTHFIELD ROAD	...	...	60
BURNT TREE	...	...	24
WOODSIDE	...	...	220
BUNN'S LANE	...	...	60
WHITE NOBS	...	...	32
CRADLEY ROAD	...	...	216
BREWERY FIELDS	...	...	16
TANFIELD ROAD	...	...	22
BELPER ROW	...	...	20
WATSON'S GREEN	...	...	116
BOWLING GREEN...	...	...	101
PRIORY ESTATE	...	...	907
WOLVERTON ROAD	...	...	58
TOTAL	...	...	2014

Livingroom, Scullery and 2 Bedrooms.			
BOWLING GREEN...	...	...	24
PRIORY ESTATE	...	...	278
WOLVERTON ROAD	...	...	106
TOTAL	...	...	408

Parlour, Scullery, Livingroom and 4 Bedrooms.			
RED HILL	...	...	8
NORTHFIELD ROAD	...	...	6
PRIORY ESTATE	...	...	6
TOTAL	...	...	20

Parlour, Livingroom, Scullery and 3 Bedrooms.			
RED HILL	...	...	12
BLOWER'S GREEN	...	...	44
NORTHFIELD ROAD	...	...	14
BURNT TREE	...	...	18
PRIORY ESTATE	...	...	78
TOTAL	...	...	166

SUMMARY.

SITE.	Total No. of houses erected to date.
RED HILL	122
BLOWER'S GREEN	104
NORTHFIELD ROAD	80
BURNT TREE	42
WOODSIDE	220
BUNN'S LANE	60
WHITE NOBS	32
CRADLEY ROAD	216
BREWERY FIELDS	16
TANFIELD ROAD	22
BELPER ROW	20
WATSON'S GREEN	116
BOWLING GREEN...	125
PRIORY ESTATE	1269
WOLVERTON ROAD	164
GRAND TOTAL...	2608

**HOUSES ERECTED BY
PRIVATE ENTERPRISE.**

Year.	Subsidised.	Not Subsidised.
1919/23	—	37
1924	71	17
1925	20	12
1926	32	15
1927	44	22
1928	18	9
1929	24	21
1930	—	35
1931	—	62
1932	—	113
1933	—	298
Total	209	641
Grand Total—850.		

HOUSING.

Number of New Houses erected during the year 1933.

(a) Total (including numbers given separately under (b) :—

(1) By the Local Authority	...	...	...	354
(2) By other Local Authorities	...	...	...	—
(3) By other bodies and persons	...	...	...	298

(b) With State Assistance under the Housing Acts :—

(1) By the Local Authority :—

(i) For the purpose of Part II. of the Act of 1925	...	...	...	...	—
(ii) For the purpose of Part III. of the Act of 1925	...	...	...	...	153
(allocated to 1924 Act)					
(iii) For other purposes	...	...	...	...	201
(allocated to 1930 Act)					

(2) By other bodies or persons

...	—
-----	-----	-----	-----	---

PUBLIC FOOD SUPPLIES

INSPECTION OF PUBLIC FOOD SUPPLIES AND FOOD PREMISES.

There is very little other than the usual routine work to record under this heading. The one exception is the Slaughter of Animals Act.

The bringing of the Act into operation provided one of the rare occasions when national legislation rightly or wrongly takes the responsibility of a decision making compulsory a measure affecting trade practice that might be said to be debatable, in so far that for a number of years the question of stunning has been a matter for local action under Byelaws. Even now the Local Authorities and Traders are left to argue and create unnecessary ill-feeling, by the exclusion of sheep from the compulsory provisions of the Act, and gives Local Authorities a year in which to decide whether sheep shall be 'in' or 'out.' If there were local features affecting the issue it would be understandable but there are none.

Each year adds emphasis to the need for a Public Abattoir, and the provision of a covered Meat Market with power to control the depositing of Meat for inspection.

REGISTRATIONS UNDER THE MILK AND DAIRIES ACTS AND MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

Under the Milk and Dairies (Amendment) Act, 1922 and Milk and Dairies Order, 1926.

				Existing.	New (1933).	Total.
A.—Retailers :—						
Loose Milk	...	...	...	85	12	97
Bottled "	...	...	...	198	42	240
B.—Producers, Dairymen or Wholesalers				30	4	34

Under the Milk (Special Designations) Order, 1923.

				Grade A.	A.T.T.	Cert.	Past.
1. No. and type of new							
Licences	...	...	8	6	—	—	2
2. Total number and type							
licensed	...	...	26	19	2	1	4

DAIRIES AND COWSHEDS.

No. of new Cowsheds erected	...	...	...	...	—
No. of existing Cowsheds reconstructed	...	...	...	...	2
No. of new Dairies erected	...	...	...	...	1
No. of existing Dairies reconstructed	...	...	...	...	2
No. of visits made for inspection...	...	...	...	...	96
No. of visits made for re-inspection	...	...	...	...	21

BACTERIOLOGICAL EXAMINATION OF MILK.

Bacteriological Content A.														Tuberculosis Content B.	
Samples.	No. taken for		Bacteriological Count per c.c.					Coliform organisms present in				Neg.	Pos.		
	Bact. Count A.	T.B. Count B.	Under 30,000	Under 200,000	Under 500,000	Over 500,000	1 c.c.	10th	100th	1000th					
Loose Milk ...	1	2	3	4	5	6	7	8	9	10	11	12			
Bottled Milk ...	35	16	15	7	6	7	4	10	8	9	12	4			
Designated Milks :—															
Grade " A " ...	3	2	1	1	—	1	1	—	—	1	2	—			
" " A.T.T." ...	2	2	2	—	—	—	—	—	—	—	2	—			
" Certified ...	—	—	—	—	—	—	—	—	—	—	—	—			
" Pasteurised ...	1	1	1	—	—	—	—	—	—	—	1	—			
" "A" Pasteurised	3	1	3	—	—	—	—	—	—	—	1	—			
Totals ...	54	26	29	9	7	9	6	10	10	12	22	4			

The samples in columns Nos. 5, 6, 9 and 10 are all dirty milks.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Total number of Samples Taken 128

Milk	63	Salmon	1
Cream	1	Coffee Extract	1
Butter	5	Tomato Ketchup	1
Margarine	3	Sauce... ..	2
Tea	1	Epsom Salts	3
Pepper	1	Lemon Squash	1
Custard Powder	3	Lemon Cheese	1
Vinegar	1	Corned Beef	1
Tinned Pears	2	Ipecacuanha Wine	1
Tinned Peas	2	Seidlitz Powder	2
Tinned Beans	1	Iodine	2
Mustard	1	Almond Oil	1
Olive Oil	1	Castor Oil	1
Fish Paste	2	Baking Powder	1
Sponge Cake	2	Damson Jam	1
Sausage	3	Mincemeat	1
Whiskey	6	Shredded Suet	1
Pickles	2	Borax	1
Sardines	2	Boracic Ointment	1
Sugar	2		

Eight samples were reported upon adversely by the Public Analyst for the year 1933.

These consisted of six milk samples, one seidlitz powder sample, and one tincture of iodine sample.

Sample No.	Description.	Result of Analysis.	Remarks.
503	Milk	Deficient of 2% of fat.	Taken from Retailer.
519	Milk	Deficient of 12% of fat and 1% solids not fat.	"Appeal to Cow" samples taken as a consequence of Sample No. 503.
520	Milk	Deficient of 3% of milk fat.	
521	Milk	Deficient of 10% of fat.	
544	Milk	Deficient of 2% of milk fat.	
569	Milk	Deficient of 6% of Milk fat.	Reported as "abnormal" milk. This sample confirmed previous low reports. Two further samples just gave the minimum fat.
589	Seidlitz Powder.	25.6% excess of Tartaric Acid.	Informal samples. A formal sample from the same vendor was genuine.
590	Tincture of Iodine (weak)	Contained 2.56 grams. per 100 c.c. of Potassium Iodide.	Informal sample. A formal sample from the same vendor was in accordance with the 1932 Pharmacopoeia.

**PUBLIC HEALTH ACTS AND PUBLIC HEALTH (MEAT)
REGULATIONS 1924.**

There are at the present time 11 Licensed Slaughter Houses and 9 Registered Slaughter Houses.

The following Animals were notified for slaughter during the year :—

Beasts	...	...	...	...	...	734
Sheep	...	...	...	...	...	3889
Pigs	...	...	...	...	...	4614
Calves	...	...	...	...	...	45
TOTAL	...	...	...	...	...	9282

Visits to Slaughterhouses for inspection of Meat and premises—
2134.

Meat and Other Foods Condemned.

	Beasts.	Sheep.	Pigs.	Calves.	Total.
Whole carcasses ...	7	6	4	—	17
Part carcasses ...	21	5	10	—	36
Heads ...	16	—	359	—	375
Lungs ...	111	105	276	—	492
Livers ...	138	246	210	—	594
Hearts ...	1	11	133	—	145
Spleens ...	2	—	11	—	13
Udders ...	20	—	—	—	20
Mesenteries ...	4	—	16	—	20
Stomachs ...	—	—	7	—	7
Kidneys ...	3	4	10	—	17
Loins ...	—	—	1	—	1

Diseases.

	Beasts. lbs.	Sheep. lbs.	Pigs. lbs.	Calves. lbs.	Total. lbs.
Tuberculosis ...	6260	82	6662	—	13004
Parasitical Cysts ...	1290	441	105	—	1836
Decomposition ...	1379	160	220	—	1759
Dropsy ...	1200	88	—	—	1288
Distomatosis ...	490	67	2	—	559
Cirrhosis ...	279	35	70	—	384
Bruised ...	180	—	94	—	274
Mammitis ...	240	—	—	—	240
Angiomatosis ...	180	—	—	—	180
Abscesses ...	119	—	—	—	119
Pneumonia ...	42	6	60	—	108
Traumatic Inflammation ...	91	—	7	—	98
Necrosis ...	73	—	6	—	79
Inflammation ...	24	1	47	—	72
Pleurisy ...	17	2	45	—	64
Moribund ...	—	62	—	—	62
Congestion ...	26	6	26	—	58
Lymphadenitis Caseous ...	—	57	—	—	57
Fatty Infiltration ...	22	33	—	—	55
Gangrenous Pneumonia ...	—	53	—	—	53
Calculi ...	30	—	—	—	30
Nephritis ...	8	6	—	—	14
Pericarditis ...	3	—	4	—	7

TOTAL WEIGHT OF MEAT CONDEMNED—9 tons. 2 cwts. 0 qrs. 16 lbs.

Visits to other Food Premises for inspection and Foods condemned were as follows :—

Premises.

General Food Premises—Shops and Markets ...	1353
Food Preparing Premises ...	32
Cold Stores ...	65

Foods Condemned.

Tins of Milk ...	580
Tins of Fish ...	31
Tins of Fruit ...	230
Tins of Beef ...	42
Kippers ...	...Pairs 6
Fish Roes ...	...Boxes 5
Turkeys ...	...Boxes 2
Fowls ...	... 3
Hares ...	... 1
Chocolate ...	... lbs. 70
Sprouts ...	... Nets 7

SLAUGHTER OF ANIMALS ACT.

Necessary action was taken sufficiently early in the year to secure that the Butchers in the District were made fully aware of the responsibilities of the above-named Act which came into operation on the 1st January, 1934.

A demonstration of mechanical stunning apparatus was made on the 7th November, 1933, by arrangement with the Royal Society for the Prevention of Cruelty to Animals and the Local Butchers' Association.

The Committee decided to postpone decision as to the mechanical stunning of sheep until later in 1934.

Owing to the failure of Manufacturers to provide the necessary equipment there has been some delay in the use of Guns. All Butchers even now (May, 1934) are not equipped to comply with the Act.

STATEMENT OF REVENUE

For the year ending 1900

The following is a statement of the revenue received by the State of New York for the year ending 1900.

The total revenue received by the State for the year ending 1900 was \$1,000,000,000.

The revenue was derived from the following sources:

1. Tax on the sale of liquor, \$1,000,000,000.

2. Tax on the sale of tobacco, \$1,000,000,000.

3. Tax on the sale of other articles, \$1,000,000,000.

4. Tax on the sale of real estate, \$1,000,000,000.

5. Tax on the sale of personal property, \$1,000,000,000.

6. Tax on the sale of other property, \$1,000,000,000.

COUNTY BOROUGH OF DUDLEY

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AS TO

MATERNITY AND CHILD WELFARE

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MATERNITY AND CHILD WELFARE

Again I have to state that the work of this Committee is increasing.

Early in the year (February) a new Maternity and Child Welfare Clinic was opened in the Priory Estate. This Estate is rapidly developing and, owing to the long distance the Mothers had to travel to "The Firs," this additional Clinic was inaugurated.

The premises are situated in the new School in the Priory. The accommodation here soon proved to be inadequate. It is a frequent occurrence now for the attendances to number from 60 to 80 per session. All the rooms are too small and on a busy afternoon the rooms are overcrowded.

It should be stated here, however, that primarily these premises were constructed as a School Clinic to meet the needs of the children attending the Priory School. As a School Clinic there is not any overcrowding and the premises are satisfactory. But when Mothers, babies and toddlers attend at the same time it becomes a different story. I hope we may be able to find other quarters soon for the Maternity and Child Welfare work. They will have to be much more commodious.

It might have been expected that the opening of the Priory Clinic would have relieved the pressure on the attendance at the sessions held at "The Firs." This is not at all so. All Baby Clinics are fully employed.

There are now seven Infant Welfare Sessions held each week, viz. :—

- 3 at "The Firs," Dudley (Main Centre) ;
- 2 at the Public Hall Clinic, Netherton ;
- 1 at the Public Library, Holly Hall ;
- 1 at the Priory Clinic.

Three of these Sessions are taken by myself, one by Dr. Hughes and three by Dr. Wallace.

For Maternity and Child Welfare work generally, the attendances at the various Clinics during the year were :—

Ordinary baby sessions ...	...	...	17,195
Ante and Post-Natal and others ...	...	...	1,063
Dental (Mothers and babies) ...	...	...	856
Orthopædic ...	...	...	421
Massage ...	...	...	507
Ultra-Violet Ray ...	...	...	1,403
TOTAL ...			21,445

The percentage of notified live births attending the baby Clinics was 78.5.

ANTE AND POST NATAL CLINICS.

Dr. Gordon Wallace exercises control of this Department and I append herewith his report for the year :—

“ I have the honour to submit a report of the work carried out at the Ante-Natal Clinics during 1933.

The Priory Clinic was opened in March and has been greatly appreciated by patients living in that part of the Town, as they had previously found it very inconvenient to attend at “ The Firs.”

The attendances were as follows :—

	<i>The Firs.</i>	<i>Priory.</i>	<i>Netherton.</i>
Cases reporting for the first time...	152	63	66
Subsequent visits 	267	58	133
	<hr/> 419	<hr/> 121	<hr/> 199

Total ante-natal attendances—739.

In addition 28 patients reported for post-natal examinations and made 39 attendances.

A most thorough routine examination is made of every patient. The general health in childhood and adult life is investigated to ascertain whether any previous illness may probably interfere adversely with pregnancy, or the confinement. Full particulars of previous pregnancies, labours, etc., are noted. If such obstetric history reveals earlier miscarriages, still-births, deaths of children in early infancy, or any other evidence pointing to “ specific ” diseases, a Wasserman test is taken. Should the result be positive, its meaning is explained and systematic treatment is given at the V.D. Clinic. The Midwife is supplied with a test tube to collect some of the baby’s blood when the umbilical cord is cut at birth and the Wasserman test is also performed on this specimen. It is gratifying to know that this aspect of preventative medicine is successful and during the year several babies have been born free from the stigma of congenital syphilis who would have otherwise been infected.

Any other symptom of ill-health is investigated and appropriate treatment prescribed. Free milk is supplied from the 7th month onwards to those patients whose condition merits it. It is well known that dental decay occurs commonly in pregnancy. This is particularly noticeable in Dudley and all such cases are referred to the Dental Surgeon for his opinion and treatment. A careful abdominal examination is made to see that the foetal position is normal, the urine is examined and pelvic measurements and blood pressure taken. If necessary an X-Ray examination is also made. Any patient who complains of a vaginal discharge

is seen at a special clinic and appropriate treatment instituted if necessary. In this way it is hoped to reduce the numbers of cases of Ophthalmia Neonatorum which causes a lot of blindness in newly born children.

At the end of each examination, the patient is asked to report on a certain subsequent date and should she fail to do so, a Health Visitor is sent to call on her. Shortly before the confinement is expected a complete report of the ante-natal examination is sent to the midwife concerned, stating what measures have been advised, what to expect at the confinement, etc., etc. Should any abnormality be detected which requires operative measures under general anæsthesia, the patient's own doctor and midwife are notified of the facts and arrangements made for them to take over the case. During the year two such cases were dealt with which, had nothing been done, would have had serious effects on the mother's well-being.

Without doubt there are in Dudley, many more expectant Mothers who ought to attend an Ante-Natal Clinic but will not do so. It is indeed a difficult matter to overcome old fashioned prejudices and to educate people as to the value of such routine examinations during pregnancy. Nevertheless, those who attend, do appreciate what is being done for them and one feels that it is only a matter of time before every expectant mother will be under ante-natal supervision."

MIDWIVES.

The number of Midwives practising in the Borough is the same. They were visited in their homes and an Inspection made of their equipment. In one or two instances, the conditions were not quite satisfactory and they were warned.

A few midwives living just outside the boundary attend cases within the Borough. These come under the supervision of the Staffordshire County Council.

One Midwife, viz., Mould, received a subsidy of £25 during the year.

When a case of Puerperal Sepsis is notified by a practitioner, the midwife attending the case is interviewed with regard to the occurrence and she is suspended from work for a period of three or four days and all necessary precautions taken.

The total number of births notified during the year was 1,116. Of this number 840 were notified to me by Midwives and 276 either by doctor, parent or local registrar. The births in the cases notified to me by midwives took place in their own homes. In addition there were 122 births which took place in Institutions. This makes a total of 962 births attended by Midwives—therefore a percentage of over 86 of all births in Dudley were attended by midwives. I consider this fairly good.

The presence of the HANDYWOMAN is evident in many of the 276 Births notified by doctors, parents and registrar. It is definitely known to me that there are a certain number of Handywomen who regularly practice in association with some of the Medical Practitioners, and I hope one day that I may be fortunate enough to prove a case against one of these women. It is definitely my opinion that the Handywoman would soon disappear if the Medical Practitioner so wished. He has only got to refuse to attend any woman in her confinement where a certified midwife has not been engaged.

MEDICAL AID.

On 208 occasions Medical Aid was summoned by the Midwife on the authorised form, *i.e.*, 24.76% of all cases attended by Midwives in their homes. In 1932 the % was 25.6.

The following Classification shows the reasons for which Medical Aid was summoned:

ON ACCOUNT OF MOTHER:

Recommended at Ante-Natal Clinic	...	...	...	6
Torn Perinæum	...	...	...	47
Delayed Labour	...	...	...	46
Inertia	...	...	...	7
Abortion	...	...	...	20
Ante-Partum Hæmorrhage	...	...	...	8
Post-Partum Hæmorrhage	...	...	...	6
Adherent placenta	...	...	...	6
Rise of Temperature	...	...	...	5
Feeble pulse	...	...	...	5
Contracted Pelvis	...	...	...	1
Extended breech	...	...	...	4
Malpresentations	...	...	...	12
Other conditions	...	...	...	10
				<hr/>
				183
				<hr/>

ON ACCOUNT OF INFANT:

Feebleness of Infant	...	...	...	5
Prematurity	...	...	...	5
Malformation	...	...	...	2
Still-born	...	...	...	8
Discharging eyes	...	...	...	2
Ophthalmia Neonatorum	...	...	...	1
Bronchitis	...	...	...	2
				<hr/>
				25
				<hr/>

The next table shows the number of confinement cases standing to the credit of each midwife and the number of times she sent for a doctor :—

		No. of cases.		No. of Medical Aid.
Midwife J.	...	114	...	14
Midwife H.	...	96	...	25
Midwife Mc.L.	...	90	...	20
Midwife N.	...	84	...	39
Midwife D.	...	77	...	23
Midwife B.	...	112	...	37
Midwife R.	...	71	...	23
Midwife W.	...	24	...	4
Midwife M.	...	29	...	12
Midwife P.	...	40	...	8

DOCTORS' FEES.

The amount paid in doctors' fees during the year was £223 0s. 6d. Of this amount £40 6s. 6d. was recovered from the various patients. As far as possible, these fees are worked on a Scale which was agreed to by the Maternity and Child Welfare Committee, but nevertheless, there are a great many bad debts and these have to be written off from time to time.

In every case a full and careful enquiry is made on special forms and any statements made as to the income are corroborated by writing to the Firm where the man works and from other sources. All this information is collected in my department and then, with the doctor's account, is passed on to the Borough Treasurer for presentation to the Committee.

MIDWIVES FEES.

During the year a certain number of claims were submitted by Midwives for fees which had not been paid by the patients. The total amount thus paid by the Borough Treasurer was £11 10s. 6d. In 1932, the amount was £10 4s. 0d. In all these cases, the same complete enquiry is made before the claim is put before the Committee.

MATERNITY HOMES.

There is only one small private Home in the Borough which has been registered and during the year only three confinements took place here. As the Nurse in charge is not a certified Midwife the cases were attended by a doctor.

Just outside the Borough Boundary, however, there is the fully equipped Rosemary Ednam Maternity Home. This Institution is under the Staffordshire County Council. At this Home only normal cases are admitted. The Dudley Town Council send special and deserving cases to this Home and agree to pay

£2 2s. 0d. per week. A certain number of cases are also admitted under the Public Assistance Committee. The total number of Dudley cases confined at the Rosemary Ednam Home last year was 99, of which 12 were sent and paid for by the Maternity and Child Welfare Committee. All these cases are admitted on the recommendation of Dr. Wallace, who sees the cases at the Ante-Natal Clinics.

Four Dudley cases were confined at Holbeache Maternity Home at Tipton, 12 in the Birmingham Maternity Hospital and 4 at a Stourbridge Maternity Home.

The particulars of all cases are reported to the Maternity and Child Welfare Committee.

STILL-BIRTHS.

During the year, 42 Still-births were reported to me as follows, by :—

Medical Practitioner	...	...	10
Midwife	...	...	27
Local Registrar	...	...	5

Of this number, 5 were Inward Transfers. An analysis of the figures gives the following particulars :—

Males	...	...	...	21
Females	...	...	...	15
Sex not known	...	...	...	6
				— 42
Legitimate	...	...	...	41
Illegitimate	...	...	...	1
				— 42
Full time pregnancy	...	...	...	18
Premature	...	...	...	24
				— 42
Primipara	...	...	...	19
Multipara	...	...	...	23
				— 42

Presentation :—

Vertex	...	...	...	21
Breech and footling	...	...	...	6
Face	...	...	...	3
Transverse	...	...	...	2
L.O.A.	...	...	...	2
Not stated	...	...	...	8
				— 42

MATERNAL DEATHS.

In 1933 there were only two Maternal deaths. One patient died of very sudden Post-partum Eclampsia and the other of (1) Cardiac Failure (b) Cardiac Embolism. This gives a Mortality Rate of 1.79 per 1000 births (there were 1116 births). Last year this figure was .81 as there was actually one death due to Child-Birth.

I append a few notes on each case :

Mrs. M. D.—Age 29. Primipara—confined 29-8-33. Attended by a Certified Midwife. Doctor was engaged by patient. Doctor was sent for but baby was born before his arrival. Duration of labour was three hours, ten minutes and there was slight P.P.H. Patient was left quite comfortable by the doctor, with a contracted uterus. A few hours later the husband went to the doctor and told him that the patient was dead. The doctor attributes death as due to an Embolus. Duration of pregnancy 40 weeks—apparently the doctor had her under Ante-natal care.

Mrs. R.—Age 35. Primipara. Attended by certified midwife and private doctor was engaged 2-6-33. Under the doctor for Ante-Natal Care. Urine was examined every fortnight from 2-6-33 up to and including 8-10-33. Owing to the patient's condition, labour had to be induced and she was naturally delivered of a Still-born 8 months baby. On the 8th day after confinement she suddenly had a severe fit and died on the following day (24-10-33) in spite of all efforts to save her. The patient had every possible care and attention from the midwife and the doctor, both during the ante-natal period and after.

Detailed reports on both these cases have been forwarded to the Maternal Mortality Committee of the Ministry of Health.

HOSPITAL ARRANGEMENTS OF PUERPERAL SEPTIC AND COMPLICATED CASES OF PREGNANCY.

The arrangements made by the Dudley Town Council for Hospital Treatment of this class of case is quite satisfactory. The Obstetric Consultant is Mr. Kenneth McMillan, F.R.C.S., of Birmingham. On request, he is sent for to see any case and if he thinks necessary the patient is admitted to Hospital in Birmingham under his care. The fee paid to the Consultant is £5 5s. 0d. and the Hospital fees are £3 3s. 0d. per week.

All these cases are immediately reported to the Chairman and to the following Maternity and Child Welfare Committee Meeting for confirmation.

Mr. McMillan was called out in Consultation 8 times during the year and 8 patients were admitted to Hospital. There were no deaths in Hospital of Dudley cases.

THE TODDLER (1 to 5 years).

Continuous effort is being made to keep in touch with the Toddler. Health Visitors are specially instructed to visit them and to try and get them to the Clinics for examination. Special cards of invitation are sent out by the Nurses asking the Mothers to bring the Toddler for examination. A special slip is gummed to the card, which is completed when the examination is made.

In 1933, 265 Toddlers were thus specially examined. This figure is not as good as one would wish, and we must continue to hope that these numbers will increase.

During the year 30 children between the ages of 1 and 5 years died. The two tables below show (a) the age groups and (b) the causes of death.

(a)			1932.	1933.
	1 to 2 years	... ..	28	17
	2 to 3 years	... ..	15	8
	3 to 4 years	... ..	8	3
	4 to 5 years	... ..	3	2
			<hr/> 54	<hr/> 30

(b) CAUSE OF DEATH.			1932.	1933.
	Measles	... ..	1	1
	Whooping Cough	... ..	—	1
	Tuberculosis	... ..	1	2
	Scarlet Fever	... ..	4	1
	Influenza	... ..	7	11
	Pneumonia	... ..	32	2
	Diarrhoea	... ..	—	3
	Other diseases	... ..	7	9
			<hr/> 54	<hr/> 30

MILK (MOTHERS AND CHILDREN) ORDER, 1919.

The need for the distribution of free milk for the use of babies, Nursing and Expectant Mothers, still continues. During the year the following amounts of Dried Milk were distributed free :—

At Dudley " The Firs "	... ..	4,680 lbs.
At Netherton	... ..	1,040 "
At Holly Hall	... ..	364 "
At the Priory	... ..	780 "

The total cost of this was £465 4s. 8d.

The supply of this Milk is very carefully supervised and the utmost care is taken to prevent fraud. Every week an application form is completed by the parent stating full particulars and some of these are verified.

Milk to the Expectant Mother is given at the Ante-Natal Clinic by Dr. Wallace.

The milk is given on an income Scale prescribed by the Committee and a full list of the recipients, with statement of income and number in family is presented to the Chairman at the Committee.

ORTHOPAEDIC TREATMENT.

This work amongst the babies is very closely linked up with the orthopaedic work in connection with School children. Children of all ages are seen at the same session by the Orthopaedic Surgeon, and in the same way they are attended by the After-Care Nurses at the same Sessions. The Maternity and Child Welfare Committee, however, disburse the cost in the proportion of $\frac{1}{4}$ Maternity and Child Welfare Committee and $\frac{3}{4}$ Education Committee.

The actual cost for In-patient treatment and the provision of surgical appliances is borne by the Committee concerned.

In the same way, children of all ages attend the massage and Ultra-Violet Ray Departments.

For the provision of surgical appliances and In-patient treatment, parents pay the whole or a part of the cost. In each case full enquiries are made and placed before the Committee, who decide what proportion, if any, the parents have to pay. In urgent cases a report is made to the Chairman and the treatment sanctioned.

During the year the following cases came under the Orthopaedic Surgeon :—

Defects :				Old cases continued.	New cases during the year.
Paralysis	...	...	...	2	1
Rickets	...	...	...	19	20
Congenital defects	...	...	...	10	3
Foot defects	...	...	...	12	11
Others	...	...	...	6	11
Total				49	46
The new cases made				257	attendances
The old cases made				225	"
Total				482	"

The attendances made at the Massage Clinic were 530.

The attendances made at the Sun-Ray Clinic were 1,379.

The number of children under school age suffering from Tubercular Orthopædic affections were as follows :—

Tubercular knee	...	2
-----------------	-----	---

During the year, 5 children received In-patient treatment at the Royal Cripples Hospital, Birmingham. The fee payable for this is £2 12s. 6d. per week for each patient.

The cost of treatment for all tubercular cases is borne by the Staffordshire, Wolverhampton and Dudley Joint Committee for Tuberculosis.

DENTAL TREATMENT

This work is merged with the School Dental work. The basis of agreement between the two Committees is that the Maternity and Child Welfare Committee pay $\frac{1}{3}$ the salary of one Dental Surgeon and one School Nurse.

The following attendances were made :—

Mentally defective	...	...	9
Nursing Mothers	...	...	330
Expectant Mothers	...	...	107
Babies	...	...	410
Total			856
Permanent extractions	...	...	734
Temporary	...	...	361
General anæsthetics	...	...	537
Permanent operations	...	...	171
Temporary operations	...	...	135

Mr. Nelson makes the following observations :—

“ As might reasonably be expected in a comparatively new branch of the dental clinic, there has been a rise in the attendance during the year. The rise of 250 may not be phenomenal, but it has been steady. As explained in the School report, one session a week is reserved at Dudley for this work and at the other clinics the cases are done during the ordinary school session. Thus, a rise of 250 means approximately 5 more per session.

At the moment, practically all cases are for extractions, which are done under nitrous oxide gas. This means that two people are occupied on each session devoted to the work, so that on an average the Maternity and Child Welfare Authorities are receiving about $\frac{1}{4}$ of the time of one dental surgeon. This is not yet up to the maximum allowance of $\frac{1}{3}$ of the time of one dental surgeon.

The greatest difficulty at the moment is to anticipate the attendance at any of these clinics, in order to have a full programme at every session.

In with the nursing and expectant mothers and babies, we now treat a few isolated cases of mentally defectives.

This work, carried out in Dudley, is largely due to the ignorance and neglect of the parents. They care little or not at all for their own teeth or their babies. Their teeth remain uncleaned and uncared for and it is ultimately only pain that brings them along for treatment. A few cases come as a result of examinations at other clinics, but the isolated cases that accept treatment, other than those which are actually suffering pain, is very small.

Little can be said that has not already been said before. We do what we can but without national assistance of some kind our work seems futile. We clear mouths for people who have no hopes of buying dentures. We treat the babies, look after them as school children, knowing only too well that as soon as they reach fourteen years of age, there is no provision made for their dental welfare after they leave school.

In short, the service to be of real benefit must be extended from School age until the age when State benefits are available. Also, there are married women to be cared for, who cannot obtain these benefits, some of whom becoming pregnant, eventually reach the Clinics with mouths only fit for clearance. Only too often they have left school with sound mouths a few years before.

One cannot deny that in relieving pain and removing sepsis one is doing a great service, but what of the ultimate condition of these patients robbed of the function of their teeth and without the means to provide artificial substitutes? In many instances, we have to leave unsound teeth which would be better extracted, so as to provide some means of mastication.

One can seldom say that a case has been treated exactly as it should. It is generally a case of taking a course of doing the lesser of two evils.

Babies attend at the age of 15 months with teeth so bad and septic that they have to be removed. Education is required in the use of the brush and the correct diet, not only for baby but for the ante-natal cases.

Thus the work calls for the closest co-operation between all clinics, between parents and the clinic and ultimately we must hope the state will co-operate by making it possible to extend the field of treatment."

EAR, NOSE AND THROAT WORK.

A special department for the Ear, Nose and Throat work was inaugurated in June, 1933. Mr. Hallchurch, the Specialist at the Ear, Nose and Throat departments at the Wolverhampton General Hospital and the Dudley Guest Hospital, was appointed to take charge of the Department. Children of all ages (under and of school age) are treated together at the same session. Details of the plan were placed before the Board of Education and the Ministry of Health and were approved. The arrangement was that Mr. Hallchurch should attend twice a month at a fee of 3 guineas per session. Sanction was obtained for the expenditure of a certain amount of money on equipment. One fourth of the cost was to be borne by the Maternity and Child Welfare Committee and three quarters by the Education Committee.

The work in this department has grown beyond all expectations and Mr. Hallchurch found it necessary to ask his Clinical Assistant, (Dr. Winifred Dean) at the Hospital, to attend two mornings a week. On the other mornings of the week a nurse is in attendance, carrying out the treatment. Dr. Dean has been House Surgeon at the Ear, Nose and Throat Department at Wolverhampton General Hospital and also Clinical Assistant at the Dudley Guest Hospital Ear, Nose and Throat Department.

Very good work is being done at this Clinic. All the chronic otorrhœas are being investigated and being properly and regularly treated. The treatment consists of local application, Ionizations and operative measures.

There is a close liaison between the Clinic and the Dudley Guest Hospital owing to Mr. Hallchurch's position there.

Thus, all cases of Ear, Nose and Throat trouble amongst the babies is referred to this special Clinic.

The School Medical Service and the Maternity and Child Welfare Committees are to be heartily congratulated on the establishment of this Clinic. Personally, I am very proud of the fact. I have for a long time felt its urgent need. The importance of this work is not only from its curative standpoint. The preventative side of the work must never be lost sight of. These children will be definitely and properly treated in the early stages of their complaints and so we hope and trust that much of the chronic diseases connected with the ear will be prevented. Deafness, like Blindness, is a terrible calamity—it is a tragedy, and by treating these cases, I am sure we shall be preventing Deafness and in some cases even death from Meningitis and blood poisoning.

Already people are getting to know of this Clinic and Mothers come of their own accord for advice and treatment.

In connection with this matter, I would like to draw the attention of the Local Authority to the valuable report on the incidence and prevention of Deafness by the late Dr. Eichols of the Board of Education and the Ministry of Health's Circular Nos. 1337 and 1337a, dated May 22nd, 1933.

It is rather a pleasure to have anticipated both these Documents.

INFECTIOUS DISEASES.

SCARLET FEVER : was prevalent during the latter half of the year. On the whole it was not of a severe type. Altogether 29 cases of children under five years of age were notified to me. Of this number, 16 were admitted to Hospital. One child died of the disease.

DIPHTHERIA : Five children under 5 years of age were notified to me as suffering from Diphtheria. Three were admitted to Hospital. There were no deaths.

MEASLES and WHOOPING COUGH accounted for one death only.

THE LADIES VOLUNTARY COMMITTEE.

I am sure we are all very grateful to the large number of ladies who come and help us in our work with the babies and mothers. The Mayoress is the President and Mrs. Bagshaw the Secretary of this band of Voluntary Helpers.

Somehow, I would like the ladies to have a greater sense of the value and importance of this work. The magnitude of the work should be appreciated by the fact that we find it necessary to hold seven Clinic Sessions per week and every session has a crowded attendance. Only one Nurse can be spared for each of these sessions, so a helping hand is a real assistance and the Nurse is more than glad of it to relieve her of some of the clerical work in the finding of record cards from the Cabinet and making the entries. Then there is the little social side of the duties—making of tea for the mothers. Of course this need not be done, but I think it helps and relieves the monotony of waiting about. So that we really need two Voluntary Helpers for each Session.

There is one other little point I want to mention and that is the regularity of attendance. If a Voluntary Helper fails to attend on her day and fails to send a substitute, it rather lets the Nurse down. We have some helpers who never miss their turn—some others, I am afraid, are not so regular. Do try and stick to it. You are really doing a good work and we are all ever so grateful to you.

BABY DAY.

We had a Baby Day last Summer. On May 31st, we invited something like 500 mothers, with their little ones, to a Garden Party in the grounds of "The Firs." The day was fortunately very fine.

The voluntary workers provided a big tea. There was also a Punch and Judy Show and a small orchestra provided the music.

Members of the Maternity and Child Welfare Committee and others were invited and tea was provided for them in one of the rooms.

In addition, during Christmas week, a special tea was provided at each Clinic.

All this was organised by the Ladies Voluntary Committee and our best thanks are due to them and to Mrs. Bagshaw for all their hard work.

REPORT OF HEALTH VISITORS FOR THE YEAR 1933.

		NURSE EVANS.	NURSE BLACK.	NURSE DENNIS.	NURSE REYNOLDS.
BIRTHS Notified to M.O.H.					
Live : Legitimate	Male ...	181	142	150	73
	Female ...	135	127	128	61
Illegitimate	Male ...	4	1	2	—
	Female ...	4	—	2	1
		— 316	— 270	— 278	— 135
By whom notified :—					
Medical Practitioners	...	25	14	42	5
Midwives	... ..	270	253	189	128
Local Registrar	... ..	29	3	19	2
Others	... ..	4	—	28	—
		— 328	— 270	— 278	— 135
Still-births notified :	Male ...	7	3	6	3
	Female ...	5	3	6	2
		— 12	— 6	— 12	— 5
Births outside Borough	... ..	53	3	—	17
		— 53	— 3	— —	— 17
Visits of Health Visitors :					
First visits to babies	...	356	267	228	151
Re-visits	... ..	1898	1408	491	443
Visits to 1—5 children	...	5324	3817	3352	1617
Ante-Natal visits	... ..	185	60	64	52
Re-visits	... ..	27	110	39	75
Visits to Still-births	...	13	6	12	5
Visits to Midwives	... ..	70	74	11	8
Visits to Ophthalmia Neon.	...	3	—	4	1
Re-visits	... ..	19	—	3	4
Visits to Tuberculosis pat's.	...	27	17	13	13
Re-visits	... ..	73	54	43	107
Visits to whooping cough "	...	16	6	12	—
Re-visits	... ..	12	—	21	—
General advice	... ..	276	973	1919	118
House inspections	... ..	153	12	16	5
Common yards visits	...	28	13	103	—
Visits to Blind Persons	...	70	131	60	24
Special visits	... ..	257	113	61	139
		— 8807	— 5061	— 6562	— 2762
Attendances at Clinics :					
New cases under 1 year	...	239	221	189	95
New cases over 1 year	...	107	46	59	52
		— 346	— 267	— 248	— 147
Total attendances :	...				
Under 1 year	...	4953	3187	2656	1129
Over 1 year	... ..	1344	1753	881	284
		— 6297	— 4940	— 3537	— 1413
Ante-Natal Clinics :					
New cases	... ..	—	66	163	63
Old cases	... ..	115	133	328	58
		— 115	— 199	— 491	— 121
Post-Natal :					
New cases	... ..	—	22	22	—
Old cases	... ..	53	15	25	—
		— 53	— 37	— 47	— —

COUNTY BOROUGH OF DUDLEY

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

ON THE

MEDICAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN

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THE ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR

1933

During the year there were 10,305 children on the School Register. The average attendance was 9,449 for the year.

The progress in the re-organisation of the Schools in Dudley, in accordance with the Haddow Report, was continued during the year. The only matters of re-organisation which were dealt with, were :—

- (i) the closure of the Female School of Industry (Fisher Street Junior Girl's School) on the 30th September, 1933.
- (ii) the re-modelling of the St. Edmund's Church School so that it could be used as a School for children of both sexes up to 11 years of age instead of a School for Infants and Junior Girls. Re-organised School as from 2nd October, 1933.

These two changes cause St. John's, St. Edmund's and Blue Coat Senior School to form a self-contained group of three Church Schools, providing accommodation for about one thousand children.

The following is a summary of the Elementary Schools in Dudley as existed in 1933.

Senior Schools (11 to 14 plus) ...	...	8
Schools not re-organised (7 to 14 plus)...	...	4
Junior Schools (7 to 11 plus) ...	...	10
Junior and Infants (5 to 11 plus) ...	...	2
Infants ...	...	15

No additional Schools were built during the year.

During the year, the School Medical Service has continued to work steadily on improved and established lines, each section continuing to do good work. There are, however, two special features to which I wish to draw attention.

NEW CLINIC.

First, there is the opening of an additional Clinic in the new Priory Estate, which is being rapidly built over. In my last Report, I stated that special Clinic accommodation was being provided in the new Priory School (Infant's Dept.). There is one large room for the doctor, three smaller rooms and a store. This Clinic was opened in February, 1933 and has been found most useful for the School children on the new Estate. Medical Inspections are held here and also a Minor Ailments Clinic on Friday mornings in each week.

Later, when the Senior Department is added to the School, and when, in the future, a further School is provided for another part of the Estate, the usefulness of this Clinic will be more appreciated. This increases our number to four Centres in the Borough.

EAR, NOSE AND THROAT CLINIC.

The second addition to our Medical Service I wish to draw attention to, is definitely an advance in the School Medical work. In my Report for 1932, on Page 95, I drew attention to the fact that there was no definite and organised plan for the treatment of Ear, Nose and Throat diseases amongst the children and more especially of chronic Ear cases. I am happy to state that having obtained the approval of the Board of Education and the Ministry of Health, a special Ear, Nose and Throat Clinic was started under the supervision of Mr. Hallchurch, the Specialist at the Dudley Guest Hospital. This Clinic functions every morning and is visited twice a month by Mr. Hallchurch though his Chief Clinical Assistant attends twice a week. Systematic Ionizations are administered as well as various other forms of daily treatment, and in addition cases are arranged for operation at the Guest Hospital by Mr. Hallchurch himself. I am sure this Clinic now fills a long felt gap in the School Medical Service in Dudley, and personally I am very pleased.

The one regret in this matter has been that it means a Nurse on duty every morning. The result of this has been that it has curtailed some of the other work,—less Head Inspections and less Home Visiting. I am very sorry for this because I feel that we should not relax on work in connection with Cleanliness Inspections, and Home Visiting is a very useful adjunct. Attendance of Nurses at Dental Clinics absorbs a great deal of their time. Perhaps some day we may be able to have a Dental Attendant.

WAITING ROOM.

I cannot refrain from mentioning here that the Waiting Room accommodation at "The Firs" is most inadequate. We have tried our best to carry on with the existing space, but the work at "The Firs" steadily grows, and with the additional Ear, Nose and

Throat Clinic held each morning, the accommodation has become most pressing. The present Waiting Room measures 16ft. 6ins., by 16ft. 3ins., and when there happens to be a Dental, an Orthopædic or an Ear, Nose and Throat Clinic held at the same time, the congestion is so great that the overflow of Mothers and children through the Hall and passage and obstruct the stairs to the upper floor.

The provision of a large Waiting Room would, in addition, give us facilities for Educational work amongst the parents and children. At present no such facilities exist.

I am hoping that this matter will soon receive attention as it is definitely an urgent need.

THE STAFF.

During the year there has been no change in the Staff of the School Medical Service. Nurse Johnson was granted six months leave of absence without pay, in order to take a Course of Health Visitors Training in Birmingham. During her absence Nurse Norfolk (fully trained) was appointed as a Temporary Nurse.

CO-ORDINATION.

As far as possible, every effort is being made to co-ordinate all the work connected with Child Welfare. At the present time the School Nurses are distinct from the Health Visitors and for this reason it is not possible to prevent overlapping in the Home Visiting. Also, the Minor Ailments Clinic for School Children is quite separate, though often babies are attended to at these Clinics and vice versa. In certain Departments, however, the School children and the babies are completely merged and are attended to at the same Clinic, *e.g.*, the Orthopædic, After-Care, Massage, Sun-Ray, etc., also the Dental and the Ear, Nose and Throat Clinics.

An obstacle to the complete co-ordination of the Maternity and Child Welfare and School work is that the School Nurses are not all qualified for the Health Visitor's work, in accordance with the Ministry of Health's Regulations. The School Nurses do not get the higher rate of Salary of the Health Visitors, hence it is difficult to get School Nurses with the added qualifications of a Health Visitor.

MEDICAL INSPECTION.

Dr. Hughes does all the Medical Inspections in School.

During the year, he examined 3,283 children at Schools—227 less than the year previous. The age groups are as follows :—

	1932.		1933.	
	No. Examined.	% of Defects.	No. Examined.	% of Defects
Entrants	... 1205	21.24%	... 1099	23.20%
Intermediates	... 1133	19.06%	... 1073	18.73%
Leavers	... 1172	17.40%	... 1111	17.28%
Total	... 3510	19.25%	... 3283	19.73%

Other Routine Inspections were only 18.

The number of "Special" Inspections were 3542. This number is 1304 more than the year previous. The Re-inspections were 7653, making a total attendance of 11,195.

The figures include :—

644 examined for the supply of Free Milk.

332 Casuals.

926 seen at the Special Ear, Nose and Throat Clinic.

133 re-examinations at School.

Examined for Swimming Inspections.

The various defects from which all these children (Routine and Special) suffered is set out in Table II at the end of this Report.

The following, however, are the principal defects found :—

				Routine.	Special.
Malnutrition	...	...	...	37	1
Eye Diseases	...	...	...	34	168
Defective Vision and Squint	...	...	...	140	79
Nose & Throat : Tonsils and Adenoids	...	...	...	232	204
Ear Diseases	...	...	...	85	105
Skin Diseases	...	...	...	24	842
Heart and Circulation	...	...	...	45	36
Lungs	...	...	...	31	62

These figures are slightly higher than the year previous. I think that this is due to the fact that a better record is kept of all cases attending the Centre apart from the regular set Clinics.

With regard to Malnutrition, I am of the opinion that this is not so pronounced as one would expect it to be in a poor industrial Area where there is much unemployment. During the past year close upon a thousand children have had two one-third pint bottles of grade "A" Milk a day at the cost of the Education Committee and perhaps an equal number at least one bottle for which payment has been made by the parent. This certainly may have done something to reduce the apparent incidence of Malnutrition. I think probably it has.

UNCLEANLINESS.

During the year, 139,745 Inspections were made by the School Nurses for conditions of cleanliness. Of this number 792 were found to be actually bad and 2,269 slight. In the records kept this distinction is denoted by ++ and +, the latter being only children with a few nits.

In 1932, the number of inspections was greater, viz., 196,927 and each Department was visited on an average of 22.9 times during the year, whereas in the year under review (1933) the average number of visits paid was 15.8.

The explanation of the reduced number of visits paid and the total number of inspections made is that since the inauguration of the special Ear, Nose and Throat Clinic the Nurses have had less time for this work and in addition a larger number of children with skin diseases attend for daily treatment at the Clinic.

It is a matter of regret that this should be so because the lack of constant supervision may result in an increase of dirty heads—in fact there is already some evidence of this.

Some of the very dirty and neglected cases have had to be reported to the Inspector of the N.S.P.C.C. In no case was prosecution necessary.

The Nurses' Report, in the form of a Table, is appended herewith.

SCHOOL NURSES REPORT FOR THE YEAR ENDING 1933.

	Number of children examined.	Number of children found to be unclean.		Number of children found with skin disease.	Number of children excluded.	Number of visits paid to Schools.	Number of attendances at Clinics.	Number of Visits paid to Homes.
		+	++					
JANUARY ...	18224	200	59	13	-	137	72	123
FEBRUARY ...	16118	165	59	18	-	146	93	144
MARCH ...	14332	192	74	12	-	160	115	300
APRIL ...	10156	178	67	4	3	96	78	114
MAY ...	12983	273	114	—	-	125	103	147
JUNE ...	11326	187	71	—	-	67	81	49
JULY ...	11545	298	64	16	1	116	115	90
AUGUST ...	10540	255	85	22	1	92	118	110
SEPTEMBER ...	1123	24	—	5	1	30	82	21
OCTOBER ...	13745	239	93	2	-	95	116	96
NOVEMBER ...	11853	152	26	2	2	101	115	88
DECEMBER ...	8311	89	18	—	1	76	93	53
TOTAL ...	140246	2252	730	94	9	1241	1181	1335

Infectious Diseases.

During the last three or four months of the year, there has been a great increase in the prevalence of Scarlet Fever. This fact is also noted in the surrounding Area. The disease, on the whole, has been a of mild type and it has not been found necessary to close any School or Department on account of the prevalence of this or any other Infectious Disease.

The number of cases of Diphtheria occurring in School children notified were 11 as compared with 25 last year. They were all admitted to Hospital.

The County Borough of Dudley has an agreement with the Joint Hospital Board of the Stourbridge and Halesowen Councils, to admit our cases into their Infectious Diseases Hospital at Haley Green. During the year there has been no difficulty in this respect.

The following is a statement of the number of cases of School children notified, admitted to Hospital, and deaths during the year 1933 :—

		Notified.	Admitted to Hospital.	Deaths.
Scarlet Fever	...	75	48	Nil.
Diphtheria	...	11	11	1

Following Up.

As time permits, this work is done by Dr. Hughes and the School Nurses. All urgent cases are followed up by visits made by the School Nurses.

The Nurses made 1321 visits to Homes.

MEDICAL TREATMENT.

During the year a further Minor Ailments Clinic was opened in the new Priory Estate. So that now there are six sessions held each week, viz. :—

At "The Firs," Dudley	Monday, Wednesday and Thursday.
Public Hall, Netherton	Wednesday afternoon.
Public Library, Holly Hall	Friday afternoon.
Priory Clinic	Friday morning.

All these Sessions are attended by Dr. Hughes except that which is held at "The Firs" on Wednesday afternoon, which I conduct personally. A Nurse is always in attendance.

These Sessions refer only to Minor Ailments generally.

At the various Clinics, 2142 children were seen for the first time as new cases and the total attendances number 11,195.

Many cases of definite illness, sometimes severe are discovered at these Clinics and the parent advised to call in their own private doctor or take the child to Hospital—usually the Dudley Guest.

In this connection, I would like to add that in consequence of a certain amount of failure on the part of some parents to carry out the treatment, a larger number of children are made to attend the Clinic daily for treatment. These cases are often seen by the doctor and by one of the Nurses on duty. These extras are all made note of in a special book (Casualty Book). This accounts for the greater number of attendances made during 1933 as compared with 1932 (8,070).

Ear, Nose and Throat Diseases (Tonsils and Adenoids).

In June 1933, a Special Ear, Nose and Throat Clinic was commenced at "The Firs," Dudley, under the supervision of Mr. Hallchurch, the Specialist at the Dudley Guest Hospital and also at the Wolverhampton General Hospital. Within a very short time of commencement the work began to grow with leaps and bounds. This only serves to justify the strong case I made out in my last two Annual Reports for the need of such a Clinic. Personally I am delighted with the result, because I am more than satisfied that it is doing a great work and will result, not only in preventing a great deal of permanent deafness, but also much illness and even death in some cases from complications of blood poisoning and meningitis.

Dr. Dean, Mr. Hallchurch's Chief Clinical Assistant, attends twice weekly regularly and is hard at work all the morning. All cases for operation for Tonsils and Adenoids, Nose defects, Mastoids, etc., are carefully arranged in consultation with Mr. Hallchurch, who performs the operations himself.

During the year 436 Nose and Throat cases were dealt with. Of this number 121 were cases of Tonsils and Adenoids and 29 of other defects. All these cases needed operative treatment. Other forms of treatment were administered to 286 cases.

Tuberculosis.

Only six children of School age were notified to me during the year as suffering from Tuberculosis. In 1932 there were as many as 19. There were 4 females and 2 males.

Localisation.

Lungs	...	...	...	...	2
Kidney	...	...	...	...	1
Rib	...	...	...	...	1
Cervical glands	...	...	...	...	1
Peritoneum	...	...	...	...	1

The kidney case was interesting. The patient was a girl who attended the Minor Ailments Clinic under Dr. Hughes. The urine was examined and found to contain albumen. The patient was kept under observation and the urine frequently examined. The microscope showed a deposit of blood cells and pus cells. She was sent to the Hospital with a request for an investigation of her case. An X-Ray was taken and she was admitted for a week or so and then discharged. She again attended the Clinic and the urine still showed albumen and pus. A sample was sent to the Staffordshire Bacteriological Laboratory with a request for a Biological test. The guinea pig died of generalised Tuberculosis. The patient was then sent to the Children's Hospital at Birmingham where she was admitted and her left kidney removed successfully. When she was discharged she was admitted to the Himley Sanatorium for Children. The girl to day is very well.

There were five other children who were admitted into the Sanatorium in 1932. These were discharged during 1933.

One child, already notified, was a transfer from an Outside Authority.

Most cases notified as Tuberculosis were first seen at the School Clinic and referred to the Tuberculosis Officer for his opinion. The policy for re-housing Tuberculosis cases (where possible and where necessary) in Council Houses was continued during the year. All such children are kept under observation.

Skin Diseases.

As usual, a very large number of children attending the Clinic suffer from some form of skin affection and the majority of these are impetiginous septic sores. In some cases the impetiginous sores are very extensive involving large areas of the skin surface. It can only again be stated that, with care, a great amount of this can be prevented by carefully treating with disinfection the skin abrasions that children get from falls. The prompt application of a little Iodine and a dry dressing would cause the injury to heal without any further trouble. If this is not done the abrasion festers and becomes a source of supply for infection to other parts of the body. There were nearly 400 cases of Impetigo treated at the Clinic during the year.

The number of cases of RINGWORM of the SCALP was again small, there being only five noted during the year. Not so many years ago the numbers used to be very much larger—2 or 3 times as many. The five cases referred to above were treated by X-Rays. There were 15 cases of Scabies (Itch).

Defective Vision and Squint.

Mr. St. Clair Roberts continues to act as Ophthalmic Surgeon to the Dudley Education Committee. The same arrangements exist as in previous years. During the year 219 children were examined by him for errors of refraction. Of this number glasses were prescribed for 140 and I am glad to say that all the 140 obtained these glasses.

In necessitous cases the parents are helped (either with regard to the whole or part cost) from a Voluntary Fund. If it were not for this Fund perhaps greater difficulty would be experienced in persuading the Mothers to supply the Spectacles.

Other Defects and Diseases of the Eye.

Apart from Defective vision and Squint, children suffer a great deal from acute and chronic inflammation of the Eyelids. The latter are very difficult to treat. They are usually very protracted. These chronic cases are usually the result of neglect in treating the acute cases which parents call a "cold" in the eye, or following an attack of measles or whooping cough. If these early cases would be only cared for by the parent, most of them would be cured and no end of trouble and suffering spared the child. There were over 200 such cases treated during the year.

Dental Defects and Treatment.

Some remarks may be made with regard to the Dental work. Owing to the poor attendance of children at many Sessions a report was made to the School Medical Service Sub-Committee. As an outcome of this, early in the year, a Conference was held at the Education Offices of all the Head Teachers, Members of the Committee and Clinic Staff. At this Conference a full discussion took place and one reason given for poor attendance was that "The Firs," where all the Gas Administration was done, was too far for distant parts of the Borough. At this Meeting, therefore, it was suggested that at least the Netherton Clinic should be fully equipped for all kinds of Dental work, (including general anæsthetics). This suggestion was carried out during the year and has been of great value to all the children in the Netherton Schools.

I am glad to say that since that conference, for one reason and another, the attendance has been better and more work has been done. There is no doubt, however, that the attendance could still be bettered.

A notable improvement in the work done has been the increase in the number of fillings—the fillings for the year under review is 2036, whereas for the year previous it was only 621.

The following Report has been written by Mr. Nelson, the Senior Dental Surgeon.

" As will be seen from the Table of Statistics, there has been a fairly general increase in all figures as compared with 1932. A study of this Table compared with last year's reveals many interesting facts. In the first instance, although the number inspected in Schools is lower and the number selected for treatment also lower in proportion, the actual number of children seen at the Clinics is, by a strange coincidence the same as last year. The total attendance on the other hand has risen by a matter of 350. The number re-treated as a result of periodic examinations has risen by 200.

All this points to one thing—that each individual child that attends is now receiving more thorough and more complete treatment. This has produced what is generally considered a desirable state of affairs, namely, a slight fall (104) in the number of casuals. The fall in fact indicates that the children are thoroughly treated as routines and, therefore, are not being troubled with toothache, etc., between inspections. One can only hope that one day things will progress to such an extent that casuals will entirely disappear.

Fillings have risen more than threefold, and strangely enough this has not yet caused a fall in permanent extractions. Temporary extractions have fallen by about the same amount as the permanent have risen. This is accounted for by the fact that whereas we were at one time dealing with dirty mouths in which there were perhaps six extractions to do, to-day the extractions are more isolated. As an example, several years ago if one took 1,000 children, they would probably provide 5,000 extractions, whilst to-day they would be expected to provide less than a quarter of that number. This is indicated by the increase in the number of general anæsthetics. In 1932, 4,196 anæsthetics yielded 7,783 extractions, this year 4,771 yielded only 7,749. Thus year by year we reap the benefit of previous years work, not in figure but in results, working towards the ultimate ideal when there will be no figures to show other than inspection, attendance and conservative.

In one direction we have broken away from accepted practice to a certain extent. Silicate filling in anterior teeth are usually considered to be contra-indicated in School work on account of the large expenditure of time they involve. We have done many hundreds of these and they have been greatly appreciated. It has not tended to make our numbers extremely high, but we can at least feel that we have done good work.

One of the outstanding features of the year has been the introduction of nitrous oxide to the Netherton Clinic in June. In addition the whole Clinic has been brought right up-to-date, with the addition of an electric engine, etc. There can be no doubt

that this has been a great success and has contributed in no small way to the rise in figures as a whole, although it has meant an increase in the number of joint sessions.

The Holly Hall Clinic is still rather primitive. Lack of running water, up to date equipment and other details, does not lend to maximum efficiency. Suggestions were, however, made for the establishment of the Clinic in other quarters and when this takes place, there can be no doubt but what it will be appreciated by patients and staff alike. No gas is given there and at the moment all septic cases have to travel to Dudley for extractions.

No Dental cases have been seen at the Priory, as it is not felt that two dental surgeons can cover more than three Clinics effectively, apart from the consideration of expense. In addition, the Priory Schools are not as far from the Dudley Clinic as several other schools which have to attend. In short, at the moment it does not merit a session a week.

Some mention of the proportion of the work at Dudley, Netherton and Holly Hall Clinics may be of interest. The Clinics are in the following proportion:—

Dudley, 5 joint and 4 single handed sessions.

Netherton, 2 joint and 1 single handed sessions.

Holly Hall, 1 single handed session.

	Attendance.	Fillings Permanent	Fillings Temporary.	Extractions Permanent	Extractions Temporary.	General Anæsthetics.	Other Operations Permanent.	Other Operations Temporary.
DUDLEY ..	5596	1401	216	1113	4709	3904	568	612
NETHERTON ...	1716	309	44	279	1269	867	282	229
HOLLY HALL ...	642	44	22	1	378	—	151	127
	7954	1754	282	1393	6356	4771	1001	968

Of the 5 joint sessions at Dudley, one is devoted to Maternity and Child Welfare work. At the other Clinics, Maternity and Child Welfare work is done during the course of ordinary school sessions. These figures are shown elsewhere.

It has been suggested that, in view of the number of general anæsthetics given, that an anæsthetist must be employed. This is not the case. All anæsthetics are given by the Dental Staff.

In 1934, there are several things we could wish for. The first is better waiting room accommodation at Dudley, the second, an increase in our Nursing or Clerical Staff. At the moment, there is much in the way of clerical work which would be done, but which cannot with the limited staff. To give one example, although 3,490 children attended out of 3,688 selected in school for treatment, there is still room for consent forms. This figure, by the way, gives a percentage of 97% which must be one of the best in the Country. They may not attend at the first notice, but further notices and visits ultimately bring them along.

Mention must be made of our Health Week, which was one of the most successful so far. Miss Springfield from the Dental Board proved to be a very popular lecturer amongst pupils and teachers. Even those who have hitherto almost opposed Health Teaching, have said how much they appreciated Miss Springfield's talks and expressed the hope that she would return again.

Crippling Defects and Orthopædic Treatment.

In this branch of the School Medical Work, the previous arrangements still obtain. The work is carried out by the Royal Cripples Hospital, Birmingham, under the expert advice of Mr. Wilson Stuart, the Orthopædic Surgeon, who attends at "The Firs" once and sometimes twice a month. For In-patient treatment the patients are admitted to one or other of the Hospitals under the Birmingham Authorities. The After-Care Nurses visit every Friday and attend to cases. "The Firs" is also a fully equipped Massage, Electrical, Remedial Exercise and Ultra-Violet Ray Dept. The Masseuse attends every day full-time and the Sun-Ray Nurse attends three mornings a week.

Children of all ages (Maternity and Child Welfare and School) attend the Orthopædic Clinics—no distinction is made. An agreed proportion of the costs, however, is paid by each Committee.

During the year, the same Outside Authorities have continued to avail themselves of the facilities that the Dudley Clinic affords, in order to save parents a long journey to Birmingham.

The fees paid by these Authorities is the same, viz., 2/6 per attendance at the Clinic, whether for Consultation, After-Care or Massage, etc., and 1/6 for each attendance for Ultra-Violet Ray treatment. The cost of appliances and In-patient treatment is a matter for the Authority concerned.

Summary of Defects of Dudley School Children.

Paralysis	...	...	...	...	10
Rickets	...	...	...	...	15
Deformities of Feet	...	...	...	...	27
Other conditions (non-Tubercular)	...	...	...	...	33
					—
<i>New Cases</i>	...	...	...	...	19
<i>Old Cases</i>	...	...	...	...	66
					—
					85
					—

The following cases of Tuberculous affections were under Orthopædic Treatment during the year :—

Tuberculous Affections :—

Spine	...	...	...	...	4
Hip	...	...	...	...	2
Others	...	...	...	...	6
					—
<i>New Cases</i>	...	...	...	...	1
<i>Old Cases</i>	...	...	...	...	11
					—
					12
					—

Attendances.

Attendance.				Ortho- pædic.	Massage	Ultra- Violet Ray.	TOTAL.
DUDLEY	...	...	...	693	1017	1813	3523
Staffs. Education Committee				114	469	40	621
Staffs. Health Visiting Com.				73	—	3	76
Tuberculosis Joint Committee				274	61	72	407
Rowley Regis Urban District				16	262	—	278
Brierley Hill Urban District				45	35	—	80
Totals				1215	1842	2285	4985

The above Table shows a very considerable increase in the attendances at the Orthopædic Clinics.

Open-Air Education—West Malvern Open-Air School.

As has been the practice for some time now, 20 places were again reserved at the Malvern Open-Air School for Dudley children and during the year 60 children were sent, each for a period of three months. Ten boys and ten girls are sent in March, June and September. One of our School Nurses usually takes a fresh batch and returns with a batch who have finished their stay.

These children are all selected by me. They are, for the most part, children of very poor parents, who have been ailing for some time. Every attention is given to select suitable cases and for this purpose they are usually seen by me at least once a week for about six weeks before they go. On their return they are again seen by me. With very few exceptions they all do very well indeed—the gain in weight being, in some cases, extraordinary.

The average gain in weight per child is as follows :—

		June.	Sept.	Dec.
Boys	...	10½ lbs.	9¼ lbs.	10½ lbs.
Girls	...	12½ lbs.	10 lbs.	11 lbs.

As usual, our School Medical Service Voluntary Fund had to help materially to find some of the clothing for these children.

In addition to the above children who were sent away, Mr. E. C. Lewis has been good enough to send away a few children into the Country.

Astley Burf Camp.

During the year this Camp was again open and several batches of 60 children each went and stayed at the Camp from Monday to Friday. Open-Air Classes are held—the children sleep in Bell tents and have their meals in a large open-air building.

During the year a large building was put up for sleeping accommodation in the event of bad weather.

The children look forward to this outing very much and I am sure are the better for it.

BLIND, DEAF, MENTALLY DEFECTIVE AND EPILEPTIC CHILDREN.

Blind.

There are two children—one boy and one girl resident at the Birmingham Institute for the Blind. They are both doing very well.

Partially Blind.

There are 29 children who are partially blind. They are mostly high myopes and are seen by the Ophthalmic Surgeon annually.

There is no special class for partially blind children in Dudley.

The cost of blind children in Institutions for the year amounted to £280 13s. 10d.

Deaf.

Eight deaf children (three boys and five girls) resident in Dudley attend the Deaf School which is situated at the Intermediate School. About 10 or 12 children from Outside Authorities also attend this school.

The children from this school attend the Aural Clinic for examination and treatment as required. They are seen by the Aural Surgeon.

There are 26 partially deaf children in the Borough. One case attends the Deaf School and the remainder the ordinary Elementary Schools. These children are kept under observation and appropriate treatment given.

Mentally Defective Children.

In Table III. of Exceptional Children, 62 Mentally Defective children are shown. Two of these are at a Certified School, 38 are attending the Elementary Schools, 6 are at other Institutions and 16 are at home and not attending any School or Institution. Of the 6 children at "other Institutions," 2 are resident at Burton House (the Public Assistance Institution), 2 are under guardianship and 2 are attending daily Occupation Centres.

Mental Deficiency (Notification of Children) Regulations 1928.

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31ST DECEMBER, 1933, BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

Total number of children notified 25

Analysis of the above Total.

DIAGNOSIS.	BOYS.	GIRLS.
1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School :		
(a) Idiots	—	1
(b) Imbeciles	5	5
(c) Others	7	7
(ii) Children unable to be instructed in a Special School without detriment to the interests of other children :		
(a) Moral defectives ...	—	—
(b) Others	—	—
2. Feeble-minded children notified on leaving a Special School on or before attaining the age of 16	—	—
3. Feeble-minded children notified under Article 3, i.e., "special circumstances" cases	—	—
<i>Note.</i> —No child should be notified under Article 3 until the Board have issued a formal certificate (Form 308M) to the Authority.		
4. Children who in addition to being mentally defective were blind or deaf... ..	—	—
<i>Note.</i> —No blind or deaf child should be notified without reference to the Board—see Article 2, proviso (ii)....		
GRAND TOTAL ...	12	13

With reference to the whole subject of Mental Deficiency, since the appointment of Nurse Reynolds as a Mental Deficiency Supervisor, a steady ascertainment is proceeding. Cases are being brought forward and carefully examined and where children are concerned (up to the age of 16) Form 306 is completed and the case reported to the Director of Education with appropriate recommendations in each case.

Ineducable children are reported to the Mental Deficiency Committee through the Director of Education. It is hoped that further progress at a more rapid rate will be made during the current year.

Nurse Reynolds was specially sent to London by the Dudley Corporation for a training in this work. Since her appointment, the work generally in connection with the care of the Mentally Defectives has been put on a more systematic basis.

Dudley is about to start an Occupation Centre. Suitable cases will be referred to this Centre. Nurse Reynolds will be in charge and will have two assistants to help her.

Like most Authorities Dudley experiences the greatest difficulty in finding places in certified Residential Schools for suitable cases. The Director of Education has a list of a number of children that have been recommended for Special Schools for Mentally Defective children.

Epileptic Children.

There are 4 children suffering from severe epilepsy. These children are at home—no places can be found for these cases in any Residential Institution.

Multiple Defects.

There are 9 children suffering from a combination of defects, viz. :—

Deaf and crippled, 1. At Deaf School.

Epilepsy and Mental Deficiency, 4.

At Epileptic Home, 1.

At Elementary School, 1.

At no School or Institution, 2.

Crippled and Mentally Defective, 4. At no School or Institution.

Physical Training.

The physical training of the children is in the hands of the Teachers. No Organiser of Physical Training is employed by the Education Committee.

Provision of Meals—Free Milk.

I am informed by the Director of Education that in December 1933, 937 children were receiving 2, 1/3rd pint bottles of milk daily, making a total of 337, 895 bottles at 1d. a bottle. The total cost of this to the Dudley Education Committee for the year ended 31st December, 1933 was £1,407 17s. 11d.

In addition to the free milk, I am informed by the Dairy firm supplying the milk, that 297,637, 1/3rd pint bottles were sold at the various schools. This makes a total of 635,532 bottles which is equivalent to 27,221 gallons of milk.

The milk is supplied by a reputed dairy company and is of the grade "A" Standard of the special milk designation Order of the Ministry of Health and is in addition pasteurised. In the usual routine work of the Foods and Drugs Act Samples of this milk are taken from time to time and subjected to an analysis for quality and for cleanliness (Bacteriological Count) and also to a Biological Test for Tubercle Bacillus. During the year the samples taken were found to be quite satisfactory.

Suitable children for free milk are selected by the teachers, and the parents then make an application on a special form, giving a full statement of their income, etc., and the number of children in the family. If the application forms are found to be satisfactory (according to Scale) by the Director of Education, he passes them on to the Medical Staff. Dr. Hughes then visits the Schools and makes an examination of all these children and certifies the necessity or otherwise for the giving of milk.

During the Winter months the milk is, in most instances I am informed, warmed before the children drink it. The bottles are put in a galvanised iron crate and stood in hot water for a short time.

The distribution of this milk involves a great deal of work and our thanks are due to the Teachers for all the trouble they take.

Co-operation.

Again I would like to thank the Teachers for their help and co-operation and without saying any more on this subject, I would ask them, not only to continue to give their support to our work but if and where possible to increase it.

The N.S.P.C.C.

With the Local Inspector, Mr. Budd, our co-operation is very intimate. Again it is my pleasure to testify to the very great help I receive from Mr. Budd. During the course of the year there are many cases that, but for him, we should find very difficult to deal with. Most of these cases are children that are really

neglected by the parent. Verminous heads, sometimes associated with extensive Impetigo of the Scalp form the majority of the cases that are referred to him. In such cases there is no doubt that the child suffers from this condition.

I am definitely of the opinion that the local branch of the Society is of great help to the School Medical Service and therefore merits the support of the Education Committee.

During the year, Mr. Budd investigated the following cases referred to him by this Department :—

General Neglect	...	...	...	24
Dirty Heads	...	...	...	6
Impetigo	...	...	...	3
Orthopædic cases	...	...	...	2
Dental cases	...	...	...	3
Nose and Throat case	...	...	...	1
Aural case	...	...	...	1
				<hr/> 40 <hr/>

SECONDARY EDUCATION.

The Routine Medical Inspection at the Girl's High School in Dudley is carried out by myself personally. That of the Grammar School is done by a local Medical Practitioner.

The number of children on the School Register during the year was 410. This number is made up of children residing in the County Borough of Dudley and from the outlying districts of Staffordshire, there being 89 of the latter. The Scholarship children were 105 from Dudley and 68 from Staffordshire.

In all, three Routine Inspections of four sessions each are carried out during the year. Before Easter and during the Summer and Autumn Terms.

During the examinations, a Nurse and Miss O'Dwyer (the Mistress in charge of the Physical Training) are in attendance and I am glad to say that a very large proportion of the parents attend. The arrangements made at the School for the examination of the children are quite satisfactory.

The total number of children inspected during the year, as Routine Cases was 230. There were also 14 Specials and re-examination cases. This makes a total of 244.

The total number of defects found was 28. These are set out in a Table at the end of the Report.

Medical Treatment.

At the Inspections all defects are pointed out to the parent and they are advised what to do. For anything requiring treatment, the parent is instructed to consult her own Medical attendant. In a few Dudley Scholarship cases, where it is known that the parents are not able to afford the expense, the children are treated at the Dudley Clinic. This refers more often to Dental Treatment.

All defects are promptly followed up and these children are seen again at one or other of the later Inspections.

With regard to Staffordshire children, a report is made of the Inspection to the School Medical Officer for the County. This report sets out the number of children inspected, the nature of the defects found and the treatment advised. A return is also made of the progress of defects found at a previous Inspection.

On the whole, I am definitely of the opinion that the general physical condition and health of the girls is very good, and especially is this so of the older girls. There is a marked improvement in the condition of the teeth.

The Training College.

Students from the Training College still continue to attend the various Clinics during a session. The male students devote themselves to the School Minor Ailments Clinic and the female students to the Maternity and Child Welfare Clinics.

Even this slight insight into the working of a Clinic should be of value to them in later life in their work as Teachers.

HEALTH TEACHING.

Again this year, Dudley celebrated its Health Week in the Schools during the week from November 13th to 18th.

It was conducted on the same lines as former years.

The Cinema Managers kindly placed the Picture Houses at our disposal for one morning—and there are five such houses in Dudley. The following films were shown :—

1. Tommy Tucker's Tooth (Dental Board of the United Kingdom).
2. Drifting (Health and Cleanliness Council).
3. The Death Mystery (Health and Cleanliness Council).

On each day the display began at 11 o'clock. Children over the age of 10 years from certain groups of schools attended each day. They were accompanied by Teachers.

At the conclusion of the showing of the film a short talk was given by myself and the proceedings were concluded by the showing of a suitable film of some general interest (provided by the management) and a vote of thanks to the proprietors, Managers and Staff for their kindness and interest.

Dr. Hughes visited a certain number of schools each morning and gave a Health talk.

The Dental side of this week of Health Propaganda was very interesting. Miss Springfield was kindly sent by the Dental Board with the portable exhibition. She visited all the Senior Schools during the week and her talks were very much appreciated by children and teachers alike. I am sure we are very grateful to Miss Springfield and the Dental Board for their kind help.

On other mornings during the week the teachers were helpful in giving the children Health talks.

Suitable Posters and Leaflets were freely distributed at the Schools.

On the whole, our Health Week amongst the School children was successful and appreciated.

Visit to the Hopfields.

On August 31st, 1933, a visit was again made by certain members of the Education Committee and Members of the School Medical Service Sub-Committee to Hop growing Farms in Worcestershire and Herefordshire.

The members divided themselves up into three parties consisting of about four members each, and each party visited a named group of farms where there were Dudley children.

Each party drew up a report from which a general report was compiled and presented to the Committee.

On the whole, the members were agreed that the conditions prevailing in the Hopfields had improved during the last few years, but that there was still room for considerable improvement. It was very noticeable that in some farms the general character of the accommodation provided and the general state of cleanliness maintained was very much better than in others. In some the conditions prevailing were on the poor side. This rather forced one to the conclusion that in some farms a greater degree of personal supervision was given, whilst in others this supervision had been practically ignored.

Later as a result of this visit, a joint conference with the Hop growing Farmers Association and a small representative deputation of the Dudley Education Committee, accompanied by the Mayor, took place at Worcester. The Meeting was of a most friendly character at which both sides made their representations and we came away from that meeting satisfied that good would result.

COST OF SCHOOL MEDICAL SERVICE.

The total cost, up to December 31st, 1933, of providing all the services ennumerated in the foregoing remarks embodied in the Report was £4,147 7s. 7d., of which £95 13s. 7d. was recovered from parents.

The growth and development of the School Medical Service can be to some extent estimated when it is considered that in 1923 the total cost for the services then existing was £1,643 9s. 0d. of which £32 18s. 9d. was recovered from parents.

COUNTY BOROUGH OF DUDLEY

School Medical Service

STATISTICAL TABLES

FOR

YEAR ENDING 31st DECEMBER, 1933

TABLE I.

RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :

Entrants	...	...	...	...	1099
Second Age Group	...	...	...	...	1073
Third Age Group	...	...	...	...	1111
			<i>Total</i>	...	<u>3283</u>

Number of other Routine Inspections	...	...	18
Children Examined at School for Swimming	...	...	1358
		<i>Total</i>	<u>1376</u>

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	3542
Number of re-inspections	...	...	7653
		<i>Total</i>	<u>11,195</u>

For Free Milk	...	...	644	included in	Specials
Casuals at Clinic	<i>New</i>	...	332	do.	do.
	<i>Old</i>	...	1351	included in	Re-Inspections
Ear, Throat & Nose Clinic	926		do.		do.
Re-Exams. in School	...	133	do.		do.

TABLE II.
A.—Return of Defects found by Medical Inspection in the Year ended December 31st, 1933.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIALS.	
	No. for Treatment.	No. for Observation.	No. for Treatment.	No. for Observation.
Malnutrition	37	—	1	—
SKIN :				
Ringworm : Scalp	1	—	4	—
Body	—	—	11	—
Scabies	1	—	14	—
Impetigo	8	—	383	—
Other Diseases (Non-Tubercular)	14	—	430	—
EYE :				
Blepharitis...	15	—	19	—
Conjunctivitis	13	—	84	—
Keratitis	—	—	1	—
Corneal Opacities	3	—	2	—
Defective Vision (excluding Squint)...	111	—	64	—
Squint	29	—	15	—
Other Conditions	3	—	62	—
EARS :				
Defective Hearing	5	—	18	—
Otitis Media	39	—	55	—
Other Ear Diseases	41	—	40	—

NOSE AND THROAT :						
Chronic Tonsillitis only	...	3	—	—	3	—
Adenoids only	...	18	—	—	11	—
Chronic Tonsillitis and Adenoids	...	192	8	—	94	—
Other Conditions	...	11	—	—	96	—
Enlarged cervical glands (Non-Tubercular)	...	4	—	—	24	—
Defective Speech	...	15	2	—	2	—
HEART AND CIRCULATION :						
Heart Disease : Organic	...	8	1	—	5	—
Functional	...	2	—	—	—	—
Anaemia	...	30	4	—	31	—
LUNGS :						
Bronchitis	...	25	1	—	54	—
Other Diseases (Non-Tubercular)	...	3	2	—	8	—
TUBERCULOSIS :						
Pulmonary : Definite	...	—	—	—	2	—
Suspected	...	1	—	—	1	—
Non-Pulmonary :						
Glands	...	—	—	—	1	—
Bones & Joints	...	—	—	—	1	—
Skin	...	—	—	—	—	—
Other forms	...	—	—	—	2	—
NERVOUS SYSTEM :						
Epilepsy	...	3	—	—	2	—
Chorea	...	2	—	—	12	—
Other Conditions	...	—	—	—	9	—
DEFORMITIES :						
Rickets	...	—	—	—	—	—
Spinal Curvature	...	5	—	—	3	—
Other forms	...	11	—	—	3	—
OTHER DEFECTS AND DISEASES	...	112	—	—	1023	—

B.—Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Disease).

GROUP.	NUMBER OF CHILDREN.		Percentage of Children found to require Treatment
	Inspected	Found to require Treatment.	
(1)	(2)	(3)	(4)
PREScribed GROUPS :—			
Entrants	1099	255	23.20
Second Age Group ...	1073	201	18.73
Third Age Group ...	1111	192	17.28
TOTAL (Prescribed Groups)	3283	648	19.73
Other Routine Inspections	18	—	—

TABLE III.*Return of all Exceptional Children in the Area.***CHILDREN SUFFERING FROM MULTIPLE DEFECTS.**

Information is only required in respect of children suffering from any combination of the following types of defect :—

Blindness (Not Partial Blindness). Deafness (Not Partial Deafness). Mental Defect. Epilepsy. Active Tuberculosis. Crippling (as defined in the penultimate category of the Table). Heart Disease.

Number of children suffering from any combination of the above defects ... 9

BLIND CHILDREN.

A blind child is a child who is too blind to be able to read the ordinary school books used by children.

Enter in this Section only children who are so blind that they can only be appropriately taught in a school for blind children.

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

PARTIALLY BLIND CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	29	—	—	29

DEAF CHILDREN.

A deaf child is a child who is too deaf to be taught in a class of hearing children in an elementary school.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
8	—	—	—	8

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.
1	—	25	—	—	26

TABLE III.—continued.**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.
2	38	6	16	62

EPILEPTIC CHILDREN.**CHILDREN SUFFERING FROM SEVERE EPILEPSY.**

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

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

PHYSICALLY DEFECTIVE CHILDREN.

Physically Defective children are children who, by reason of physical defect, are incapable of receiving proper benefit from the instruction in the ordinary Public Elementary Schools, but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for physically defective children.

A.—TUBERCULOSIS CHILDREN.**I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.**

(Including pleura and intra-thoracic glands.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	25	—	11	36

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

(This category should include tuberculosis of all sites other than those shown in (I) above.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	25	—	7	33

TABLE III.—*continued.*

B.—DELICATE CHILDREN.

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

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
60	63	—	—	123

C.—CRIPPLED CHILDREN.

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

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
6	33	—	—	39

D.—CHILDREN WITH HEART DISEASE.

This Section is confined to children whose defect is so severe as to necessitate the provision of educational facilities other than those of the Public Elementary School.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	28	—	14	42

Note :—

CHILDREN SUFFERING FROM MULTIPLE DEFECTS, 1933.

Deaf+Crippling defects : ...	...	1	At Elementary School ...	
Epilepsy+Mental Deficiency	...	4	{ At Epileptic Home ...	1
			{ At Elementary School ...	1
			{ At no School or Institution	2
Cripples+Mental Deficiency	...	4	At no School or Institution	4

TABLE IV.

Return of Defects treated during the Year ended
31st December, 1933.

TREATMENT TABLE.

Group I.—Minor Ailments (excluding Uncleanliness, for which see Group VI).

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise (3)	Total. (4)
<i>Skin—</i>			
Ringworm—Scalp. (Show separately in brackets the number which were treated by X-Rays)	4 (3)	—	4
Ringworm—Body	11	—	11
Scabies	14	—	14
Impetigo	383	—	383
Other skin disease	430	—	430
<i>Minor Eye Defects</i>	168	—	168
(External and other, but excluding cases falling in Group II.)		—	
<i>Minor Ear Defects</i>	105		105
<i>Miscellaneous</i>	1023	4	1027
(e.g., minor injuries, bruises, sores, chilblains, etc.)			
Total	2138	4	2142

TABLE IV.—*continued.*

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

Defect or Disease.	No. of Defects dealt with			
	Under the Authority's Scheme.	By Private Practitioner or at Hospital, apart from the Authority's Scheme.	Other-wise.	Total.
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including squint). (Operations for squint should be recorded separately in the body of the School Medical Officer's Report.) ...	219	—	—	219
Other Defect or Disease of the Eyes (excluding those recorded in Group I.). ...	—	—	—	—
Total	219	—	—	219

Number of children for whom spectacles were prescribed :

(1) Under the Authority's Scheme	...	...	...	140
(2) Otherwise	...	...	...	—

Number of children for whom spectacles were obtained :

(1) Under the Authority's Scheme	...	...	...	140
(2) Otherwise	...	...	...	—

TABLE IV.—*continued.**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 (1)				By Private Practitioner or Hospital, apart from the Authority's Scheme. (2)				Total. (3)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(4)	(5)
—	1	117	29	—	—	3	—	—	1	120	29	286	436

- (i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and adenoids.
 (iv) Other defects of the nose and throat.

Group IV.—Orthopaedic and Postural Defects.

Number of children treated under the Authority's Scheme :

(i)	Residential treatment with education	...	...	—
(ii)	Residential treatment without education	...	...	—
(iii)	Non-residential treatment at an orthopaedic clinic	...	...	85

Number of children treated otherwise :

(i)	Residential treatment with education	...	...	—
(ii)	Residential treatment without education	...	...	—
(iii)	Non-residential treatment at an orthopaedic clinic	...	...	—
Total number treated				85

Group V.—Dental Defects.

(1) Number of children who were :						
(a) Inspected by the Dentist :						
Aged	5	...	...	...	...	721
"	6	...	...	...	...	987
"	7	...	...	...	...	1054
"	8	...	...	...	...	786
"	9	...	...	...	...	647
"	10	...	...	...	...	861
"	11	...	...	...	...	1024
"	12	...	...	...	...	667
"	13	...	...	...	...	554
"	14	...	...	...	...	174
<i>Total</i>						7475
Specials	...	...	...	...	...	1823
<i>Grand Total</i>						9298
(b) Found to require treatment						5511
(c) Actually treated						5417
(2) Half days devoted to :						
Inspection				...	...	36
Treatment				...	...	700
<i>Total</i>						*736
(3) Attendances made by children for treatment						7954
(4) Fillings :						
Permanent Teeth				...	...	1754
Temporary Teeth				...	...	282
<i>Total</i>						2036
(5) Extractions :						
Permanent Teeth				...	...	1393
Temporary Teeth				...	...	6356
<i>Total</i>						7749
(6) Administration of general Anæsthetics for extractions						4771
(7) Other Operations :						
Permanent Teeth				...	...	1001
Temporary Teeth				...	...	968
<i>Total</i>						1969

*In addition 10 Half-days were devoted to Health Propaganda.

Group VI.—Uncleanliness and Verminous Conditions.

(i.)	Average number of visits per school made during the year by the School Nurses				15.8
(ii.)	Total number of examinations of children in the Schools by School Nurses				139745
(iii.)	Number of individual children found unclean				
		Slight	...	2269	
		Bad	...	792	3061
(iv.)	Number of children cleansed under arrangements made by the Local Education Authority				3061
(v.)	Number of cases in which legal proceedings were taken :—				
	(a)	Under the Education Act, 1921	...	...	Nil.
	(b)	Under School Attendance Byelaws	...	...	Nil.

SECONDARY SCHOOLS AND CONTINUATION SCHOOLS.

TABLE I.

A.—ROUTINE MEDICAL INSPECTION.

Number of Code Group Inspections :—

Entrants	...	...	...	...	...	...	8
Intermediates	...	...	...	...	...	...	9
Leavers	...	...	...	...	...	...	223
<i>Total</i>							230

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	6
Number of Re-Inspections	...	...	...	...	8
					14

TABLE II.

RETURN OF DEFECTS FOUND.

DEFECTS OR DISEASE.						ROUTINE INSPECTIONS.	
						No. for Treatment.	No. for Observation.
Malnutrition	...	...	...	...	...	1	—
Eye Disease	...	...	...	...	...	4	1
Nose and Throat	...	...	...	...	...	1	—
Ear Disease	...	...	...	...	...	—	—
Deformities	...	...	...	...	...	3	—
Other Defects	...	...	...	...	...	18	—
<i>Total</i>						27	1

