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CITY OF HEREFORD.

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1921.

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ANNUAL REPORT  
OF THE

MEDICAL OFFICER OF HEALTH

AND OF THE

SCHOOL MEDICAL OFFICER

BY

**A. MIDDLETON BROWN,**

M.A., M.D., D.P.H.,

MEDICAL OFFICER OF HEALTH;

MEDICAL SUPERINTENDENT OF THE CITY ISOLATION HOSPITALS;

MEDICAL OFFICER TO THE MATERNITY AND CHILD WELFARE CENTRE;

AND SCHOOL MEDICAL OFFICER.

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HEREFORD:

Printed by Wilson and Phillips, 17, Eign Street.

# CITY OF HEREFORD.

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## Health Committee:

Councillor M. C. OATFIELD, *Mayor.*

Councillor J. MOORE, *Chairman.*

Alderman G. B. GREENLAND. Councillor L. H. LUARD.

Councillor C. FRANKLIN. Councillor T. POWELL.

Councillor A. KEAR. Councillor A. H. SMITH.

Councillor P. H. VAUGHAN.

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## Maternity and Child Welfare Committee:

MEMBERS OF THE HEALTH COMMITTEE, with Alderman E. L. WALLIS

(Chairman of the Care Committee), Mesdames BAKER, E. F.

BULMER, JACKSON, G. MINES, JACKSON-TAYLOR.

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## Housing Acts Committee:

Councillor M. C. OATFIELD, *Mayor.*

Councillor G. B. GREENLAND, *Chairman.*

Alderman C. WITTS. Councillor L. H. LUARD.

Councillor F. W. ALLCOCK. Councillor T. POWELL.

Councillor G. ANDREWS. Councillor R. H. SYMONDS-TAYLER.

Councillor J. C. M. VAUGHAN.

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R. BATTERSBY, *Town Clerk.*

HEALTH OFFICE,

TOWN HALL,

HEREFORD,

April, 1922.

*To the Mayor, Aldermen, and Councillors of the City of Hereford.*

I have the honour to submit the Annual Report on the Health of the City for the year 1921, and the Report on the School Medical Services for the same period.

My predecessor, Dr. J. W. Miller, was in charge of the Health Department until March 25th, 1921, and I took up office on 28th August, 1921. In the interval the late Dr. D. Dryburgh Gold, County Medical Officer of Health, was in charge of the City Health Department, and I wish to put on record the efficient manner in which he kept the work of the department thoroughly up-to-date in spite of his many other duties. This rendered my task of taking up duty all the easier, and by the kind help of Dr. Gold and his Assistant, and of your Sanitary Inspector, Mr. Sidney Protheroe, during the first few months of office, I was enabled to become familiar with the matters of Public Health importance in the City.

You will observe that the Health Report for 1921 is in a more abridged form than usual. This is in accordance with the requirements of Circular 269 of the Ministry of Health, which recommends the omission of details as to conditions which do not vary from year to year and the curtailment of the information asked for in certain years.

**Vital Statistics.**—The Death Rate for the year 1921 was 12.6 and the Birth Rate was 23.7, the Infantile Mortality Rate was 85. The corresponding rates for England and Wales were:—Death Rate, 12.1; Birth Rate, 22.4; and Infantile Mortality Rate, 83.

**Infectious Disease.**—Scarlet Fever was not so prevalent as last year and continues to be of a comparatively mild type. Diphtheria was more prevalent than in 1920 and particularly towards the end of the year. The type of case too was on the whole mild.

**School Medical Inspection.**—The work of Medical Inspection of School Children was carried out throughout the year without interruption, and valuable assistance in Medical Inspection was given by Drs. Baldoe and Symonds. Full details are given in the report and I would draw your attention particularly to the observations on uncleanliness, lack of vaccination and the neglect of early home treatment of minor ailments.

In conclusion I have to acknowledge the sympathetic consideration you have given to all matters I have laid before you, the loyal co-operation of the Staff of the Health Department and the kind assistance of the other Corporation Officials.

I am, yours, etc.,

A. MIDDLETON BROWN.

# CITY OF HEREFORD.

## 1921.

### 1.—GENERAL STATISTICS.

Area ...	...	...	...	...	...	...	...	5,031 acres.
Population (1921) ...	...	...	...	...	...	...	...	23,250
Number of Inhabited Houses (1921) ...	...	...	...	...	...	...	...	
Number of Families or Separate Occupiers (1921) ...	...	...	...	...	...	...	...	
Rateable Value ...	...	...	...	...	...	£138,540	0	0
Sum represented by a Penny Rate ...	...	...	...	...	...	£577	5	0

### 2.—EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

		TOTAL.	MALE.	FEMALE
Births {	Legitimate ...	513	279	234
	Illegitimate ...	40	27	13

Birth Rate as given by Registrar-General ... 23·7

		TOTAL	MALE	FEMALE
Deaths ...	...	293	142	151
Death Rate as given by Registrar-General ..		12·6 Recorded.		11·4 Corrected.

Number of Women Dying in, or in consequence of, Child Birth :—

- (1). From Sepsis ... 0
- (2). From other causes 1

Deaths of Infants under one year per 1,000 Births ... ... 85  
 Legitimate 42. Illegitimate 5. Total 47.

Deaths from Measles, all ages ... ... ... ... Nil.  
 „ „ Whooping Cough, all ages ... ... ... Nil.  
 „ „ Diarrhoea, under two years of age ... ... ... 4

There has been no unusual or excessive mortality during the year.

### 3.—NOTIFIABLE DISEASES DURING THE YEAR.

**Tuberculosis** —**CASES NOT NOTIFIED TO HEREFORD U.D.** :—  
One female was notified in Leominster and came to Hereford after Sanatorium treatment.

One male died in Sanatorium, Knightwick, and sent to Hereford U.D. as a transfer death.

One male "escaped" from Sanatorium, Birmingham, and came temporarily to Hereford.

Two males aged 33 and 34 years died in Knightwick Sanatorium and one male aged 48 years died in the Ministry of Pensions Hospital, Birmingham.

One female aged 24 years died in Cranham Lodge Sanatorium, and one aged 29 years died in the Union Infirmary.

Five cases of Non-Pulmonary Tuberculosis from outside the City died in Herefordshire General Hospital.

The ratio of non-notified Tuberculosis deaths to total Tuberculosis deaths was 5: 19 for Pulmonary, and 8: 10 for Non-Pulmonary.

The following table shows the interval between date of notification and date of death in the case of Tuberculosis deaths :—

	Pulmonary.	Non-Pulmonary
Number notified over 2 years before death	2	0
" " " 1½ but under 2 years before death	1	0
Number notified over 1 but under 1½ years before death	1	0
Number notified over 6 months but under 12 months before death	3	0
Number notified under 6 months before death	7	2
Number notified after death	*5	8

\* Died in Hospital.

**Ophthalmia Neonatorum.**—No cases were notified during the year.

#### 4.—CAUSES OF SICKNESS.

There have been no specially noteworthy causes of sickness and invalidity during the year. The outbreak of Influenza which began at the end of the year had not affected Hereford to any noteworthy extent by the end of the year.

#### 5.—SUMMARY (FOR REFERENCE) OF NURSING ARRANGEMENTS, HOSPITALS AND OTHER INSTITUTIONS.

(A). **Professional Nursing in the Home.**—District Nursing is carried out by the Staff of the Hereford City Nursing and Maternity Society. There are no special arrangements for the home nursing of Infectious Disease in the homes; the school nurses visit school children who are known to be suffering from infectious diseases such as measles, whooping cough, etc., and give directions to the parents as required.

There are three private Nursing Homes in the City.

(B). **Midwives.**—The ten midwives practising in the City are under the supervision of the County Public Health Department.

**(C). Clinics and Treatment Centres.**

NAME.	SITUATION.	NATURE OF ACCOMMODATION.	BY WHOM FOUNDED.
Maternity and Child Welfare, Consultations.	St. Owen Street, adjacent to Town Hall.	Waiting Room. Weighing Room. Consultation Room.	Hereford U.D. Local Authority.
School Clinic for Minor Ailments.	Town Hall.	Waiting Room. Inspection & Treatment Room, Record Office.	Hereford U.D. Local Authority.
School Clinic for Dental Refraction and Ear and Throat work.	St. Owen Street, adjacent to Town Hall.	Waiting Room, Operating Room. Recovery Room. Dark Room.	Hereford U. D. Local Authority.
Tuberculosis Dispensary.	St. Peter Street.	Consulting Room. Waiting Room.	Herefordshire County Council.
V.D. Centre.	Hereford General Hospital.	Male and Female Wards, with 4 and 3 Beds respectively. Treatment Room. Waiting Room. Attendant's Room.	Herefordshire County Council.

**(D). Hospitals provided or subsidised by the Local Authority or by the County Council :—**

1. Tuberculosis—None.
2. Maternity —None.
3. Children —None.
4. Fever —The City Hospital is situated on high ground near the City Boundary, and has accommodation for 32 patients.
5. Smallpox —The Smallpox Hospital is situated near the City Fever Hospital, and has accommodation for 12 patients.

(E). Apart from the Workhouse and Children's Home provided by the Board of Guardians there is no institutional provision for unmarried mothers, illegitimate infants, and homeless children in the City. There is an Orphanage for Roman Catholic children and also an Industrial School for Boys in the City.

(F). **Ambulance Facilities.**—The Local Sanitary Authority own a horse-drawn ambulance for infectious cases and hand ambulance for police cases.

A private motor ambulance is available for hire in the City for non-infectious cases.

**6.—LABORATORY WORK.**

Pathological and Bacteriological examinations as well as the Chemical and Bacteriological examination of waters are carried out at the Laboratory attached to the County Health Department.

Reports on specimens submitted by medical practitioners from City patients are sent to the Medical Officer of Health of the City for his information. This is useful in controlling the notification of such diseases as Diphtheria, Tuberculosis and Enteric Fever.

The following table gives a summary of the work done for the City during the year 1921 :—

For Diphtheria Bacilli	Positive.	Negative.	Total.
	289	513	802
For Diphtheria Bacilli	289	513	802
,, Tuberclle Bacilli—			
1 Sputum	16	33	49
2 Pleural effusion	—	2	2
3 Urine	—	6	6
4 Pus	—	1	1
5 Cerebro-fluid	—	1	1
6 Specimens of Ox	—	9	9
,, Meningococci (Cerebro-fluid)	—	1	1
,, Ringworm	—	1	1
,, Gonorrhœa	—	2	2
Urine for—			
1. Bacilli Coli	1	2	3
2. Albumen	1	—	1
3. Sugar	—	1	1
4. Blood	—	1	1
<b>TOTALS</b>	<b>307</b>	<b>573</b>	<b>880</b>

Six throat brushings from patients giving persistent positive results for Diphtheria were sent to Birmingham University Laboratories to be tested for virulence.

The examination of materials for the Wasserman reaction in connection with the Venereal Diseases Treatment Scheme is carried out at Birmingham University Laboratories.

#### ANTITOXIN.

A supply of Diphtheria Antitoxin is available for City cases in accordance with the provisions of the Diphtheria Antitoxin (outside London) Order, 1910. Arrangements have been made whereby Antitoxin can be obtained at the City Police Station by day or night when the Health Department is closed. Influenza vaccine as issued by the Ministry of Health is available for practitioners attending City cases.

#### ADOPTIVE ACTS, BYELAWS AND LOCAL REGULATIONS IN THE CITY.

The following adoptive Acts, Byelaws and local regulations relating to the public health are in force in the district :—

The Infectious Disease (Prevention) Act, 1890. (April, 1891).

The Public Health Acts Amendment Act, 1890 (Parts 2, 3 and 4). (April, 1891).

The Public Health Acts Amendment Act, 1907 (Part 1; Sections 15 and 16, 18 to 24, 26 to 33 of Part 2; Sections 34 to 37, 43, 45 to 51 of Part 3; Parts 4, 5 and 6; Sections 78 to 81, 83 to 86 of Part 7; Parts 8, 9 and 10). (April, 1910).

**Byelaws :—**

Good Rule and Government and Prevention of Nuisances. (1903).  
 Slaughterhouses (Public). (1866).  
 Slaughterhouses. (1903).  
 Management of the Public Slaughterhouses. (1916).  
 Cattle, Butter, Poultry, Fish, Vegetable and Butchers' Markets. (1871 and 1879).  
 Cleansing of Footways and Pavements, the Cleansing of Earth Closets and Cesspools, and Removal of House Refuse (1903).  
 Keeping of Water Closets supplied with sufficient water for flushing. (1903).  
 Nuisances. (1903).  
 Common Lodging Houses. (1903).  
 Offensive Trades. (1903).  
 New Streets and Buildings. (1904).  
 New Streets and Buildings in the Suburban portion of the City. (1909).  
 Pleasure Grounds and Open Spaces. (1910).  
 Regulating the Employment of Children and Young Persons. (1920).  
 New Buildings. (1914).  
 Regulations for preventing waste, misuse, undue consumption or the contamination of Water. (1900).

**LEGAL PROCEEDINGS.**

The only case taken during the year before the Court of Summary Jurisdiction was one for failing to obey a notice to cease to inhabit a shed used as a dwelling-house, contrary to the provisions of the Housing, Town Planning, etc., Act, 1909. An order was made to quit within a week, which was complied with.

**7.—SANITARY ADMINISTRATION.**

**Water Supply**—Samples of water from the City supply have been examined from time to time Bacteriologically and found satisfactory.

Three samples of well water were submitted for chemical analysis, and in each case the water was reported polluted and unfit for drinking and domestic purposes. In one case the use of the well has been discontinued and in two cases steps have been taken to prevent pollution of the well, and instructions given to boil all water for drinking purposes. These two cases are still under observation at the end of the year.

**Districts Supplied with Well Water.**—There are 97 houses in the City supplied by 63 wells; of these, 77 are outside the system of the town water mains. The particulars in regard to the districts are as follows:—

			Houses	Wells.
Hunderton and Belmont Road	...	...	11	7
Grafton and Red Hill	...	...	7	6
Bullingham	...	...	10	5
Putson	...	...	16	10
Hampton Park and Tupsley	...	...	13	8
Aylestone Hill	...	...	2	2
Canon Moor	...	...	4	2
King's Acre and Huntington	...	...	20	13
Holmer	...	...	10	7
Westfields	...	...	4	3
<b>TOTALS</b>	...	...	<b>97</b>	<b>63</b>

During the year the use of 3 wells for drinking and domestic purposes was discontinued, and the City supply was laid on to 3 houses previously supplied by wells.

**Sewage and Sewage Disposal, etc.—Corporation Sewage Farm**—The existing plant at the Sewage Farm has been found to be insufficient to cope with the present needs of the City, and three schemes for alterations have been prepared by the City Surveyor. The matter is to be the subject of a Ministry of Health Inquiry at an early date.

**Closet Accommodation.**—During the year 16 conservancy closets have been converted to 17 closets on the water carriage system.

The following list shows the number of houses and types of closets in the outlying districts at the end of the year:—

		Houses.	Privies.	Pail Closets.	Earth Closets.
Hunderton and Belmont Road	...	51	11	33	2
Breinton and Broomy Hill	...	8	1	6	1
Grafton and Red Hill	...	4	1	4	—
Bullingham	...	10	3	5	—
Putson	...	14	3	9	—
Hampton Park and Tupsley	...	30	3	19	7
Aylestone Hill	...	12	4	4	4
Canon Moor	...	4	—	3	—
King's Acre and Huntington	...	21	8	13	1
Holmer	...	15	7	8	3
Westfields	...	7	1	7	—
Other Districts	...	8	1	7	—
<b>TOTALS</b>	...	<b>184</b>	<b>43</b>	<b>118</b>	<b>18</b>

## POLLUTION OF RIVERS AND STREAMS.

There has been no necessity to take any action during the year in regard to the river Wye or of any of the streams in the City.

## NUISANCES, INCLUDING DRAINAGE DEFECTS.

## WORK DONE THROUGH THE SANITARY INSPECTOR.

## DRAINAGE—

Obstructed drains opened and cleansed .. .. .. .. ..	51
Defective drainage repaired or relaid .. .. .. .. ..	40
Houses with insufficient drainage, extra provided .. .. .. .. ..	3
Houses connected to public sewer .. .. .. .. ..	13
Glazed stoneware gullies fixed .. .. .. .. ..	23
Drains removed from inside or underneath houses .. .. .. .. ..	1
Sewer interceptors fixed .. .. .. .. ..	6
Disconnecting and inspection chambers constructed .. .. .. .. ..	17
Inspection chambers repaired .. .. .. .. ..	3
Ventilating shafts fixed or repaired .. .. .. .. ..	19

## WATER CLOSETS, PRIVIES AND URINALS—

Obstructed w.c.'s opened and cleansed .. .. .. .. ..	17
Dilapidated w.c.'s repaired or rebuilt .. .. .. .. ..	34
Insufficient accommodation, extra w.c.'s erected .. .. .. .. ..	1
New " Washdown " basins fixed .. .. .. .. ..	3
Pedestal basins fixed .. .. .. .. ..	43
Soil pipes repaired or renewed .. .. .. .. ..	3
Ventilation provided to w.c. compartments .. .. .. .. ..	1
Water supply provided to w.c.'s .. .. .. .. ..	38
Flushing apparatus repaired or new provided .. .. .. .. ..	54
Dirty walls of closets limewashed .. .. .. .. ..	12
Pail closets converted into water closets .. .. .. .. ..	16
Urinals repaired and cleansed .. .. .. .. ..	1

## DWELLING HOUSES, &amp;c.

Dirty and dilapidated houses cleansed and repaired .. .. .. .. ..	37
Occupation of sheds as dwellings discontinued .. .. .. .. ..	2
Houses stripped and cleansed after infection .. .. .. .. ..	2
Roofs repaired .. .. .. .. ..	42
Chimneys and fireplaces repaired .. .. .. .. ..	32
Floors relaid or repaired .. .. .. .. ..	22
Dangerous stairs and defective windows repaired .. .. .. .. ..	40
Cases of overcrowding abated .. .. .. .. ..	2
Dilapidated wash-houses repaired or rebuilt .. .. .. .. ..	6
Dirty walls of wash-houses limewashed .. .. .. .. ..	8
Stagnant water removed from cellars .. .. .. .. ..	5
Yards and passages paved or paving relaid .. .. .. .. ..	4
Water supply provided to houses .. .. .. .. ..	4

## SINKS, WASTE PIPES, AND SPOUTING—

Dilapidated sinks repaired ..	..	..	..	..	..	..	11
New glazed stoneware sinks fixed..	..	..	..	..	..	..	10
Waste-pipes provided to sinks ..	..	..	..	..	..	..	14
Waste and rain-water pipes disconnected from drains ..							2
Spouting repaired or provided ..	..	..	..	..	..	..	45

## KEEPING OF ANIMALS AND MANURE—

Nuisances from Animals improperly kept, abated ..	..	..	..	..	..	6
Accumulations of manure and refuse removed ..	..	..	..	..	..	23

## MISCELLANEOUS—

Dairies and cowsheds limewashed on notice ..	..	..	..	..	..	71
Bakehouses limewashed on notice ..	..	..	..	..	..	5
Workshops limewashed on notice ..	..	..	..	..	..	2
Miscellaneous nuisances abated ..	..	..	..	..	..	58

An account of drainage and other work necessary to abate nuisances, which has been carried out under the supervision of the Sanitary Inspector, is shown in detail in the preceding table. The following table shows the number of notices served and those complied with during the year:—

Statute or Bye-Law.	Notices not complied with at end of 1920.	Notices served 1921.		Notices not complied with at end of 1921.
		Preliminary.	Statutory.	
Public Health Acts ..	100	324	18	411
Factory and Workshop Act ..	—	10	—	9
Housing Acts ..	15	3	1	19
Infectious Disease (Prevention) Act ..	—	—	2	2
Regulations under Dairies, Cow-sheds and Milkshops Order ..	—	74	1	74
City Byelaws ..	—	3	—	3
<b>Total ...</b>	<b>115</b>	<b>414</b>	<b>22</b>	<b>518</b>
			<b>436</b>	

In addition to the above notices, 295 letters were written by the Inspector and 94 reports made to other departments; 81 reports dealing with infectious disease, and 16 on miscellaneous matters were also made.

There were 171 complaints investigated, and 12 tests applied to drainage (9 by water and 3 by smoke). Particulars of visits and inspections are as follows:—

Nuisances	...	...	...	...	...	1112
Works in progress	...	...	...	...	...	134
Housing Acts	...	...	...	...	...	67
Infectious Disease	...	...	...	...	...	180
Factory and Workshop Act	...	...	...	...	...	46
Outworkers	...	...	...	...	...	8
Bakehouses	...	...	...	...	...	20
Common Lodging-houses	...	...	...	...	...	2
Dairies, Cowsheds and Milkshops	...	...	...	...	...	115
Public Abattoir	...	...	...	...	...	25
Food-preparing places	...	...	...	...	...	145
Stables and Piggeries	...	...	...	...	...	39
Offensive Trades	...	...	...	...	...	21
Schools and Public Buildings	...	...	...	...	...	4
Public Conveniences	...	...	...	...	...	32
Miscellaneous	...	...	...	...	...	137
						2087

The whole of the caravans used for habitation during the May Fair were visited. No infectious disease was detected.

The assistant Sanitary Inspector, Mr. G. H. Williams, resigned on March 27th, 1920, to take up an appointment as a Sanitary Inspector under the Sudan Government. The vacancy has not yet been filled.

#### COMMON LODGING HOUSES.

The Registered Common Lodging House, No. 7, Little Berrington Street, has been discontinued and there are no Registered Common Lodging Houses now in the City.

#### FOOD PREPARING PLACES.

In addition to the restaurant kitchens and bakehouses which are inspected under the Factory and Workshop Act, sausages and other meat products are made at or in connection with 29 butchers' shops.

There are also eight fried fish shops and five tripe boiling premises.

It has not been necessary to draw attention to any insanitary conditions in regard to them.

#### OFFENSIVE TRADES.

During the year consent to establish the business of a tripe boiler was granted. There are now five tripe boilers, 1 gut scraper, and two hide and skin depots in the City. They have been conducted in a satisfactory manner. A complaint received informally of nuisance arising in connection with conduct of one offensive trade was investigated but no action was considered necessary.

## PUBLIC ABATTOIR.

The following are particulars of the number of animals slaughtered or deposited in the Public Abattoir during the year:—

Beeves 1,688, Calves 711, Sheep 5,895, Lambs 2,073, and Pigs 2,456. Total 12,823, as compared with 11,372 in 1920, and 20,661 in 1919.

**Diseased Carcasses.**—The following diseased conditions were found in animals at the Abattoir during the year and the carcasses or portions were voluntarily surrendered. Owing to delay of the owner in surrendering the carcase of a sheep, it was necessary to obtain a Justice's Order for destruction.

Cows.—	Tuberculosis (general) ...	...	7
	Emaciation... ...	...	2
	Emaciation and injury ...	...	1
	Injury to buttock ...	...	1
	Abscess in loin ...	...	1
	Tumour in head ...	...	1
BULLS.—	Injury to loin ...	...	1
	Inflammation of intestines ...	...	1
HEIFERS.—	Actinomycosis (jaw) ...	...	2
BULLOCKS.—	Tuberculosis (localised) ...	...	1
	Actinomycosis (jaw) ...	...	1
CALVES.—	Congestion of lungs ...	...	1
	Emaciation and injury ...	...	1
SHEEP.—	Found dead ...	...	4
	Decomposition through injury ...	...	2
	Congestion of lungs ...	...	1
PIGS.—	Congestion of lungs ...	...	2
	Emaciation and injury ...	...	1

## OTHER UNSOUND FOOD.

The following unsound food was voluntarily surrendered for destruction:—

Six hundred weight, 3 quarters, 18 pounds of frozen beef, four carcases and 68 pounds of frozen mutton, one rabbit and four pork pies.

**FISH.**—Consisting of one box of salmon, two barrels of herrings, two barrels of sprats, one box of lobsters, and 3 quarters, 14 pounds of assorted fish.

**PRESERVED FOOD STUFFS.**—Consisting of 35 tins of corned beef, two tins of tongue, one jar of potted meat, 42 tins of condensed milk, 110 tins of tomatoes, 139 tins of fruit, 15 tins of jam, 62 tins of fish, and one bottle of pickles.

## PIGSTYES AND PIG KEEPING.

The regulations governing the keeping of pigs in the vicinity of dwellinghouses which had been somewhat relaxed during the war are now being strictly enforced.

The notice of three owners of pigs were drawn to breaches of the regulations and in each case the regulations were complied with.

## DISINFECTION.

The following are particulars in regard to disinfection of rooms, bedding, etc.:-

DISEASE.	ROOMS.	BEDDING.
Scarlet Fever	39	32
Diphtheria	65	51
Acute Poliomyelitis	2	2
Encephalitis Lethargica	1	1
Phthisis	9	9
Other Diseases	15	6
<b>TOTALS</b>	<b>131</b>	<b>101</b>

The whole of the rooms were disinfected by formalin vapour and the bedding, etc., by steam, in addition a Hereford motor car was disinfected after conveying a case of Diphtheria from Ross to Shrewsbury.

The disinfection by steam is carried out at the Isolation Hospital by means of a "Manlove Alliott" high pressure steam disinfecter.

## DAIRIES, COWSHEDS AND MILKSHOPS.

There were the names of 14 persons on the Register who kept dairies, 15 who had cowsheds, and 15 who kept milkstores or retail milkshops at the end of 1921.

In addition, 52 purveyors of milk were registered, of whom 22 reside outside the City.

During the year 12 applications for registration were granted, nine as purveyors of milk (six of whom reside outside the City), and three as cowkeepers and purveyors, each of which were transfers.

In May and October the usual circular letters were sent drawing attention to the regulations requiring the limewashing of dairies and cowsheds, and these letters were followed up by inspection to see that the limewashing had been carried out.

Many of the cowsheds in the City, while complying with the regulations, are old and quite out of keeping with modern dairy construction. Regular grooming of the cows did not appear to be carried out in any of the dairies inspected. This is one of the essentials of a clean milk supply.

**Report of the Inspector under the Sale of  
Food and Drugs Acts, etc.**

---

TOWN HALL,

HEREFORD,

*January, 1922.*

**SALE OF FOOD AND DRUGS ACTS.**

The following table shows the number and nature of the articles submitted to the Public Analyst for analysis during the year ending December 31st, 1921, and the result of the analysis:—

ARTICLES.	Number purchased		Number genuine		Number adulterated.	
	Formal	Informal	Formal	Informal	Formal	Informal
Milk ... ... ...	12	37	10	29	2	8
Condensed Milk ...	—	1	—	1	—	—
Cream ... ... ...	—	1	—	1	—	—
Preserved Cream ...	—	2	—	2	—	—
Butter ... ... ...	—	5	—	5	—	—
Lard ... ... ...	—	3	—	3	—	—
Cheese ... ... ...	—	3	—	3	—	—
Coffee ... ... ...	—	2	—	2	—	—
Pepper ... ... ...	—	3	—	3	—	—
Mustard ... ... ...	—	1	—	1	—	—
Rice ... ... ...	—	3	—	3	—	—
Scotch Whisky ...	—	1	—	1	—	—
 Totals ... ... ...	12	62	10	54	2	8
		74		64		10

**OBSERVATIONS.**

**Milk.**—Of the 12 "formal" samples, one was certified as genuine; three as genuine and of good average quality; one as genuine and of exceptional quality containing no less than 5·7 per cent. of fat; one was about 50 per cent. above the limit in fat; one was genuine but of poor quality; three were genuine but rather low in fat; one contained 2·85 per cent. of fat being deficient of 5 per cent.; and one contained 9 per cent. of added water.

An opportunity of submitting explanations was given the vendors of the two last mentioned samples, and as the Health Committee were of opinion that the explanations were such which they felt able to accept, they were cautioned. In regard to the sample which contained 2.85 per cent. of fat, samples were taken direct from individual cows and in three instances the amount of fat was 2.2 and 2.7 (two) per cent.

Of the 37 "informal" samples, 19 were certified as genuine; three as genuine and of fair quality; two as genuine and of good quality; one as genuine but down to the limit in fat; one as genuine but slightly below the average quality with regard to fat; one as of very poor quality containing only 3.1 per cent. of fat; one as fractionally below the legal limit in fat; eight as deficient in fat (3.3 per cent., 5 per cent., 6.6 per cent., 10 per cent. (three), 26 per cent. (two)); and one was suspicious of a few per cent. of added water.

In regard to the eight samples which were deficient in fat, five were taken in the course of delivery from one farm. These were deficient in fat to the extent of 3.3, 5, 6.6, 10, and 26 per cent. respectively. The attention of the cowkeeper was drawn to the matter and suspicion rested on an employee. Further samples were eventually taken which proved genuine. The other three samples were taken from individual cows, two were deficient of 10 per cent. and one 26 per cent. of fat.

**Butter.**—Three samples were genuine and of good quality. One contained a trace of boron preservative and 13.4 per cent. of moisture, and one was free from boron preservative and contained 11 per cent. of moisture.

**Scotch Whisky.**—This sample was 28 degrees under proof. The constituents for genuine whisky were present in about minimum quantities, and although the analyst was unable to say definitely that the sample was not genuine Scotch Whisky as understood in the trade, he was of opinion that it was of a low grade.

**Other Articles.**—All these were certified to be genuine and of good quality.

#### MARGARINE ACT, 1887.

No wholesale dealers were registered during the year and there are still five premises registered wherein the business is carried on.

PUBLIC HEALTH (CREAM AND MILK) REGULATIONS,  
1912 AND 1917.

1. Milk and Cream not sold as Preserved Cream:—

	Number of Samples examined for the presence of a preservative.	Number in which a preservative was reported to be present.
Milk ... ...	49	Nil.
Cream ... ...	1	Nil.

2. Cream sold as Preserved Cream:—

(a). Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct—

(1). Correct statements made	...	2
(2). Statements incorrect	...	Nil.
	Total	...

(b). Determinations made of milk fat in cream sold as preserved cream—

(1). Above 35 per cent.	...	2
(2). Below 35 per cent.	...	Nil.
	Total	...

(c). There have been no instances where (apart from analysis) the requirements as to labelling or declaration of cream has not been observed.

(d). No cases have arisen in which the Regulations have not been complied with.

3. Thickening Substances.—There was no evidence of their addition to cream or preserved cream.

### 8.—PUBLIC HEALTH STAFF.

NAME.	Qualifications.	Office held.	Whole or Part Time.	Salary contributed to under P.H.A. or by Exchequer.	Other Public Office.
A. MIDDLETON BROWN ..	M.A., M.D., Ch.B., D.P.H.	Medical Officer of Health ..	Part ..	Yes ..	School Medical Officer. Medical Superintendent of Isolation Hospitals. Police Surgeon.
W. T. RIGBY ..	F.I.C.	City Analyst .. ..	Part ..	—	—
S. PROTHEROE ..	Cert. R.S.I.	Sanitary Inspector. Inspector under Sale of Food and Drugs Acts, and Housing Acts	Whole ..	Yes ..	—
Vacancy since March 27th, 1920.		Assistant Sanitary Inspector	..	..	
Miss G. CLARKE ..	Cert. R.S.I. Cert. C.M.B.	Health Visitor .. ..	Part ..	Yes ..	School Nurse.
Miss M. SARGENT ..	Cert. R.S.I. Cert. C.M.B.	Health Visitor .. ..	Part ..	Yes ..	School Nurse.
Miss D. BURN ..	—	Clerk .. .. ..	Part ..	No ..	Clerk in School Medical Department
C. WOOD ..	—	Clerk and Sanitary Assistant ..	Whole ..	No ..	—
Miss C. BUDINGER ..	—	Matron, Isolation Hospital ..	Whole ..	No ..	—
E. GOODE ..	—	Disinfecter .. .. ..	Whole ..	No ..	—
A. ENGLAND ..	—	Abattoir Superintendent ..	Part ..	No ..	Stores-keeper.

In addition to the Matron, the female staff of the Isolation Hospital consists of three nurses, a cook, a laundry maid and two wardmaids.

## 9.—HOUSING.

Number of new houses erected during the year:—	
(a). Total	... ... ... ... ... 139
(b). As part of Municipal Housing Scheme	... 138
<b>1. Unfit Dwelling-houses.</b>	
Inspection.—(1). Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ...	46
(2). Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	46
(3). Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	4
(4). Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ...	21
<b>2. Remedy of defects without service of formal notices.</b>	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	13
<b>3. Action under Statutory Powers.</b>	
A.—Proceedings under Section 28 of the Housing, Town Planning, etc., Act, 1919.	
(1). Number of dwelling-houses in respect of which notices were served requiring repairs ...	1
(2). Number of dwelling-houses which were rendered fit:—	
(a). By Owners ...	1
(b). By Local Authority in default of Owners ...	—
(3). Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close ...	—
B.—Proceedings under Public Health Acts.	
(1). Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ...	3
(2). Number of dwelling-houses in which defects were remedied:—	
(a). By Owners ...	1
(b). By Local Authority in default of Owners ...	—
C.—Proceedings under Sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909.	
(1). Number of representations made with a view to the making of Closing Orders ...	4
(2). Number of dwelling-houses in respect of which Closing Orders were made ...	2
(3). Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit ...	—
(4). Number of dwelling-houses in respect of which Demolition Orders were made ...	—
(5). Number of dwelling-houses demolished in pursuance of Demolition Orders ...	—

INCREASE OF RENT AND MORTGAGE INTEREST  
(RESTRICTIONS) ACT, 1920.

Under this Act, 17 certificates were granted on the application of the tenants of houses who had been served with notices of their landlord's intention to increase their rent, on the ground that the houses were not in a reasonable state of repair.

CITY HOSPITALS.

At the end of 1920 there were ten cases in Hospital and during the year eighty-eight cases were admitted. No cases were admitted to the Small Pox Hospital during the year.

The following table gives the particulars of admissions and discharge of patients during 1921:—

DISEASE.	Patients remaining in Hospital on January 1st, 1921.	Patients Admitted and Discharged during 1921.	ISOLATION HOSPITAL, 1921.			Average Days in Hospital.	
			Total.	Recovered.	Died.		
Scarlet Fever ..	4	4	—	33	—	3	—
Diphtheria ..	6	6	—	55	53	7	—
Diphtheria Contacts ..	—	—	—	9	9	—	—
<b>TOTALS</b> ..	10	10	—	97	95	2	—
				11	11	—	85
						—	—
						2	2

\* Including those admitted in 1920 and discharged in 1921.

SANITATION.—In October I drew the attention of the Public Health Committee to the obsolete sanitary arrangements at the City Hospitals, and recommended that the existing conservancy system should be converted into a water carriage system. This recommendation was adopted by the Council, and authority to carry out the work was obtained from the Ministry of Health. Plans have been prepared by the City Surveyor, and the work will include provision of sanitary apparatus in the wards, the laying of the necessary pipes, and the installation of a small sewage treatment plant, as it is not possible to connect the hospital drainage to the existing City Sewerage system on account of difference in levels. The Porter's Lodge and Small Pox Hospital are included in the scheme adopted. The completed work will be described fully in the next annual report.

RULES GOVERNING HOSPITAL ADMINISTRATION:—These have been revised and approved, and steps have been taken to bring them to the notice of all concerned.

#### MATERNITY AND CHILD WELFARE CENTRE.

The Centre was open every Wednesday afternoon.

The Medical Officer sees all infants attending for the first time and such other infants as are referred to him by the Health Visitors. Advice is given on infant hygiene and management, both to the mothers individually and collectively in lectures.

Mothers of infants who are found to be suffering from any definite ailment or defect are advised to take them to a private doctor. The function of the Clinic is preventive and educative; its aim is to keep healthy babies healthy. All children are weighed and a record of the weight is kept and a copy given to the mother.

During the year 250 mothers made 1,470 attendances. The attendances of children under one year number 1,257 and over one year 298. Children up to 5 years who do not attend school may be brought to the Clinic.

The number attending the Clinic shows signs of increasing, and it may be necessary to hold two meetings a week in the near future. Much of the success of the Centre is due to the assistance given by the two regular voluntary helpers, Mrs. Jackson and Mrs. Mines. Unfortunately it has not been possible to find helpers for the sewing rooms, and this has consequently lapsed for the present. The Health Visitors continue to supply patterns when required.

ANTE-NATAL WORK.—This side of the activity of the Centre has so far not been developed to any great extent, but arrangements are made, and it is hoped that the facilities afforded will become more widely known and made use of. Here again the function of the Centre is preventive and educative, and the work which it is hoped to accomplish will not interfere in any way with the interests of the private doctors or midwives who will ultimately be attending the cases.

TABLE A.  
CITY OF HEREFORD

## CITY OF HEREFORD.

DEATHS OF RESIDENTS FROM ALL CAUSES, 1921.



REPORT OF THE  
SCHOOL MEDICAL OFFICER  
FOR 1921.

**Education Committee:**

Councillor M. C. OATFIELD, *Mayor.*

Alderman J. R. SYMONDS, *Chairman.*

Alderman G. B. GREENLAND.	Alderman C. WITTS.
Alderman A. D. STEELE.	Councillor J. JONES.
Alderman E. L. WALLIS.	Councillor A. KEAR.

*Nominated Members:*

Rev. C. G. LEDGER.	THE VERY REV. THE DEAN.
Rev. A. P. SMITH.	Miss M. BULL.
Rev. Preb. A. B. WYNNE-WILLSON.	Miss E. KRABBE.
	Miss S. M. SMITH.

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*Selected Members:*

THE VERY REV. THE DEAN.
Miss M. BULL.
Miss E. KRABBE.
Miss S. M. SMITH.

**Care Committee:**

Councillor M. C. OATFIELD, *Mayor.*

Alderman E. L. WALLIS, *Chairman.*

Councillor A. KEAR.	Miss E. KRABBE.
Rev. C. G. LEDGER.	Mrs. L. LILLEY.
Rev. A. P. SMITH.	Mrs. G. MINES.
Lieut.-Col. H. R. C. HEWAT.	Mrs. A. C. MOORE.
Miss M. BULL.	Mrs. NICHOLSON.
Mrs. H. P. BULMER.	Miss S. M. SMITH.
Mrs. GOLD.	Mrs. TUKE.
Mrs. JACKSON.	

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E. W. MAPLES, O.B.E., M.A., LL.D., *Director of Education.*

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**School Medical Department:**

*School Medical Officer:* A. MIDDLETON BROWN, M.A., M.D., D.P.H.

*School Dental Officer:* W. VOSE DAVIES, L.D.S.

*Ear and Throat Surgeon:* E. W. DUBUISSON, M.R.C.S., L.R.C.P.

*Eye Surgeon:* N. H. PIKE, M.B., B.S., M.R.C.S., L.R.C.P.

*Anæsthetist:* J. O. LANE, B.A., M.D., M.R.C.S.

*School Nurse:* Miss G. CLARKE, Cert. R.S.I. and C.M.B.

„ „ Miss M. SARGENT, Cert. R.S.I. and C.M.B.

*Record Clerk:* Miss D. BURN.

*School Attendance Officer:* E. STEPHENS.

## Annual Report for Year 1921.

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The Staff employed in the Medical Inspection and Treatment of Children attending the Schools under the Local Education Authority consists of :—

- (1) School Medical Officer.
- (2) School Dental Officer.
- (3) Ear and Throat Surgeon.
- (4) Anæsthetist.
- (5) Eye Surgeon.
- (6) Two School Nurses.
- (7) Clerk.

The School Medical Officer carries out the administrative part of the work, the medical inspection of routine and special cases, the work of the School Clinic for treatment of Minor Ailments, and the medical duties in relation to the education of physically and mentally defective children. Dr. J. W. Miller relinquished that appointment on March 31st, 1921, and his successor took up duties on the 25th of August, 1921. In the interval the work of administration and of the Minor Ailment Clinic was carried out by the late Dr. D. D. Gold, County Medical Officer, and the work of routine Medical Inspection by Drs. Ballock and Symonds, who were engaged in the work during 50 sessions of 1—1½ hours each. The School Medical Officer is also Medical Officer of Health for the City.

The School Dental Officer is employed one whole day a week, and is engaged partly in routine dental inspection, and partly in treatment. He devotes the rest of his time to work under the County Education Authority.

The Ear and Throat Surgeon is engaged from time to time as cases arise. He sees all cases referred by the School Medical Officer and advises as to, and carries out operations. At operations he has the services of a local practitioner as anæsthetist.

The Eye Surgeon sees all cases referred for refraction by the School Medical Officer, examines them and prescribes the necessary treatment. During the year he devoted 9 sessions to the work. At each session he sees not more than 10 cases.

The School Nurses attend at the treatment and other Clinics, and at the Schools during routine medical and dental inspections. They carry out inspections at the Schools for verminous conditions, and visit the Schools and the homes of the children for the purpose of following up cases referred for treatment. They devote one-half of their time to the work of the Infant and Child Welfare Department.

The Clerk devotes half her time to the work of the School Medical Department, and half to the work of the Infant and Child Welfare Department, and certain other statistical work of the Health Department.

## CO-ORDINATION.

As will be seen above, most of the officials carrying out the work of the School Medical Service are also employed in other health work in the City, so that co-ordination is complete. There are no Nursery Schools, but up to the present time it has been the custom to admit children from three years of age to the infant departments of the Public Elementary Schools. After the 1st January, 1922, no child under 5 years of age will be allowed to commence School. Children up to the age of 5 years are dealt with at the Infant and Child Welfare Clinic.

## SCHOOL HYGIENE.

**Report on School Premises in Hereford.**—There are eleven Public Elementary Schools in the City. In these there are fifteen departments. Three Schools are "provided" Schools, viz.:—Scudamore, St. Owen's and St. Peter's, comprising five departments. The Infant Department of Holmer School is also "provided."

**DISTRIBUTION.**—The Schools are distributed throughout the more densely populated districts in the City. No child living in Hereford has to walk over three miles to School. A few children living in the outlying parts of Huntington and St. Nicholas' Parish attend Schools in the rural district.

**SCHOOL SITES.**—Most of the Schools are built in open sites. This allows of the proper lighting and airing of both School buildings and playgrounds and also the provision of sufficient playground accommodation. All Saints' School, St. John's School, and St Peter's School are too closely surrounded by other buildings, and the same obtains to a lesser degree in the case of Blue Coat School. One side of All Saints' is very markedly overshadowed by the adjacent Electric Light Station.

**SCHOOL BUILDINGS.**—Four of the Schools have been built or remodelled during the present century, and conform in most respects to the requirements of modern school architecture. They are St. Owen's School, 1905; Blue Coat School, 1910; Holmer Infants' School, 1911; Scudamore Schools, 1913; St. James' Infants' School was built in 1896. Some of the other Schools were built nearly fifty years ago, and are insufficient as regards accommodation and unsatisfactory as regards planning and arrangement. Accommodation is provided for 3,788 scholars, and taking the average attendance as a guide, Holmer Mixed School is the only one which has been over-crowded during the past year.

**LIGHTING.**—In the majority of the Schools there is good natural lighting, although in certain cases the position of the windows does not allow of the source of light being on the scholars' left hand. In Tupsley School some of the window panes are small, and a good deal of the window space is taken up with window frame. The proximity to other buildings inhibits natural lighting at St. Peter's School and in the lower floor class-rooms at All Saints' School. Artificial lighting is by electricity in Scudamore and Blue Coat Schools, and in the others by gas except Tupsley School, where oil lamps are used.

HEATING.—The class-rooms, etc., are heated by hot water pipes in four Schools and in the Infants' Department at Holmer School. In the other School buildings the class-rooms are heated by coal or coke stoves. These stoves are supplemented by gas fires in the Roman Catholic, St. Martin's and All Saints' Schools. In the last some of the gas fires have no flue. A record of the temperature, taken twice daily, is kept in each class-room, and the heating regulated accordingly. It would appear that the heating apparatus in some cases is not put on sufficiently early in the morning during cold weather. The following examples of unsatisfactory heating of rooms are recorded:—

*St. Martin's School*—

Nov. 11th	...	34 deg. Far.	...	Room 1.	
„	9th	...	36 deg. Far.	...	Juniors.
July 11th	...	83 deg. Far.	...	Room 4.	

*Tupsley School*—

Dec. 13th	...	38 deg. Far.	...	Small Room.
July 11th	...	85 deg. Far.	...	Main Room.

*Roman Catholic School*—

July 11th	...	83 deg. Far.	...	Room 2.
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VENTILATION.—The means of ventilation provided in most of the Schools is satisfactory if properly and intelligently made use of, although in few cases do the windows open to one-half of their extent as recommended by the Board of Education. The wall ventilators in many cases appeared to have been kept closed for some considerable time prior to the visits to the Schools. Most of the School windows open on the "hopper" principle. Such windows permit of less ventilation and admit less light than hung windows. As only three Schools are more than one storey high roof ventilation is fairly general. One class-room (Standard 3 class-room in the Roman Catholic School) is difficult to ventilate properly on account of being surrounded by other rooms except a part of one side. My predecessor reported at length on this subject in his report for 1919.

CLOAK ROOMS.—In all the Schools the pegs for the children's coats are too close together and permit the garments to touch. In Schools with a central heating system the cloak rooms are heated in winter. The girls' cloak room in the Roman Catholic School and one cloak room in All Saints' School may be heated by gas radiators, but on the whole no systematic method of drying the children's coats, etc., in bad weather is in use. In most of the older schools the cloak rooms are merely dark lobbies leading to the class-rooms, and out of keeping with modern standards.

CLEANLINESS.—The cleaning of the Schools is on the whole unsatisfactory. The majority of the cases, floors are not sufficiently cleansed, and in very few instances is dusting above eye level done. This means that when the windows are opened for ventilation that some of the dust lodged on ledges above eye level is disturbed and

tends to pollute the atmosphere in the class-room. Efficient dusting of all exposed surfaces and ledges with a damp mop should be done daily. It has been decided recently to try a proprietary substance, for which the merit is claimed that it allows sweeping without raising dust.

**SANITARY ARRANGEMENTS.**—The provision of these is in many instances rather insufficient as judged by modern requirements: for example, there are only three closets for 113 girls in All Saints' School. An improperly constructed urinal marred the general excellence of construction at Scudamore School. It is a matter for regret that so many of the Schools are provided with trough closets which are not self-cleansing. It is difficult to understand why this obsolete fixture was placed in Holmer Infants' School, which was built as recently as 1911. It was noticed that the fasteners on the closet doors at St. James' School are too high for the average child to open. Ablution facilities are insufficient in some of the Schools and in no case are School baths provided. All the Schools are supplied with the Town's water. Except Tupsley School, all Schools are connected with the City Sewerage system. The site of Tupsley School makes efficient drainage very difficult, and the present system of drainage is not altogether satisfactory.

**PLAYGROUND ACCOMMODATION.**—With the exception of the Roman Catholic Schools the area of playgrounds provided is fairly ample. Five Schools only are provided with playground shelters. The surface of the playgrounds in only three Schools is satisfactory, viz.:—Roman Catholic, St. Martin's and St. John's. Roughness, irregularities and lack of proper drainage are some of the causes which render the surface unsatisfactory, and these faults are the cause of numerous falls and consequent bruised knees which call for treatment at the School Clinic.

One cannot help remarking that the general arrangements and accommodation in the older Schools fall far short of that in the newer Schools, and it is a cause for regret that all the children cannot have the advantage of being educated in Schools which come up to the highest level in the City.

#### MEDICAL INSPECTION.

Due notice of visit of the School Medical Officer to carry out routine Medical Inspection is sent to the Head Teacher, who is responsible for sending out notices to parents inviting them to be present at the routine Medical Inspection of their children, and asking them to supply particulars of previous illnesses and defects, to which the School Medical Officer should have his attention specially directed. Routine Medical Inspections are carried out at every School twice during the year, so that children who are absent at the first visit and all newly admitted scholars are medically inspected as far as possible in their proper age groups. The School Nurse visits the School prior to the Medical Officer for the purpose of weighing and measuring the children. She also makes preliminary tests of vision, so that the Medical Officer has to deal only with those children who are likely to be referred for any defect in this particular.

(a). AGE GROUP.—Routine Medical Inspection is carried out of all children in the three age groups laid down by the Board of Education, viz.: Entrants, Intermediates, and Leavers. Children under five years of age attending the Public Elementary Schools are not examined except as "Specials." During the year ending 31st December, 1921, the routine Medical Examination of 998 children was carried out. The number was made up as under:—

	ENTRANTS.	INTERMEDIATES.	LEAVERS.
Boys.....	186	162	162
Girls.....	148	178	162
Total...	334	340	324

(b). There has been no departure from the Boards' Schedule of Medical Inspection.

(c). A card index is kept of all abnormal children in the City. This index includes all children who are suffering from crippling defects. Crippling defects in children attending school are reported to the School Medical Officer by the teacher, and all such children are seen at the visit of the School Medical Officer to the school for the purpose of routine Medical Inspection, and at such other time as may be necessary at the School Clinic. Cripple children not attending school are reported to the School Medical Officer by the School Attendance Officer, who also ascertains if the children are under medical supervision. The parents of children not under medical supervision are advised to bring their children to the Clinic, where they are examined by the School Medical Officer, and the appropriate treatment—if any—arranged, either by referring the case to a private practitioner, or through the agency of the School Medical Service. The cases dealt with during the year are referred to in paragraph V. below.

(d). Routine Medical Inspections are carried out in all cases at the schools. Sufficient notice is given of a proposed visit by the School Medical Officer, and if the date and hour fixed is inconvenient to the head teacher, some satisfactory re-arrangement can usually be made. In no case was a disturbance of school arrangements occasioned for this cause during the year.

### 5 Findings of Medical Inspections:—

(a). NUTRITION.—The children are generally well nourished. Out of 1,756 children examined only six were considered to be suffering from malnutrition, and that only to a minor degree. The nutrition of 93 children was found to be subnormal, but the lack of food cannot always be said to be the cause of this. Lack of proper feeding, imperfect preparation of the food, irregular meal times, are common causes of subnormal nutrition. In view of the prevailing unemployment towards the end of the year, the question of providing meals to children was considered, and in making inquiries the head teachers were asked to furnish lists of children whom they considered underfed at home. The names of 71 children were sent in, and each child was examined by the School Medical Officer. The following facts were elicited:—

1. Only 25 of the 71 children showed signs of subnormal nutrition.

2. The majority of the children had bread and butter or margarine and tea, and nothing else for breakfast.

3. Tea was commonly a constituent of every meal.

4. Some of the children had a very liberal dietary, and yet appeared not to obtain the benefit from it one would expect.

5. The teachers and others familiar with the home conditions were of the opinion that in cases of distress and lack of food in the home, the mother is the first to suffer, then the children of pre-school age.

The facts brought to the notice of the Authority did not warrant them taking any steps under the Provision of Meals Act, 1906—14, but the Distress Committee arranged for certain school children to obtain meals at private houses on the invitation of their hosts, and for others to obtain a midday meal on three days a week at restaurants. The cost of the latter was defrayed out of certain funds placed at their disposal privately. The scheme has proved successful so far, but as it was commenced only in the last week of the year it is too early yet to make any definite pronouncement on it.

The following table shows the average heights and weights of Hereford children examined last year, compared with the average measurements of all school children in England and Wales. Only three age groups are dealt with, as the numbers examined at other ages are too small for comparison:—

ANTHROPOMETRY, 1921. HEIGHT.

Age in years.	No. Examined.		Height ins.		Average England and Wales.		Amount by which Hereford children are above or below average.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys	Girls.
5	148	131	41.3	40.0	40.6	40.4	+ 0.7	- 0.4
8	162	178	47.3	47.0	47.3	46.9	nil.	+ 0.1
12	143	146	55.5	55.2	54.8	55.4	+ 0.7	- 0.2

ANTHROPOMETRY, 1921. WEIGHT.

Age in years.	No. Examined.		Weight, lbs.		Average England and Wales.		Amount by which Hereford children are above or below average.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys	Girls.
5	148	131	38.9	37.2	38.6	37.7	+ 0.3	- 0.5
8	162	178	51.0	50.3	52.0	49.5	- 1.0	+ 0.8
12	143	146	71.8	73.0	72.6	73.8	- 0.8	- 0.8

CLOTHING AND FOOTGEAR.—In examining the clothing of children the points noted are suitability, sufficiency and cleanliness. As regards the last two the clothing of the children was very good. In only three cases could it be said to be altogether unsatisfactory. Attention of the parents was drawn to the condition and it was remedied. In 77 children the clothing was slightly defective as regards sufficiency or cleanliness. In the matter of suitability the conditions were not so satisfactory. Cotton garments are often found where wool or flannel should be. The garments of children should as far as possible be suspended from the shoulders and not from the waist, and should be made so that they can be easily put on and taken off. The practice of stitching a child into her garments instead of using buttons or hooks, or other suitable fasteners, is undesirable.

UNCLEANLINESS.—The cleanliness of the children leaves much to be desired. Evidence of this is obtained at the routine Medical Inspections, in spite of the fact that parents are advised of the inspections, but much more reliable evidence of the unsatisfactory state of affairs is obtained at the periodical examination held by the School Nurses, of which no warning is given to the parent. The fact that the number of children found in an unsatisfactory state of cleanliness is much smaller at routine Medical Inspections than at the Nurses' Inspections is abundant proof that parents do not take sufficient trouble at all times in this matter. The number of children found suffering from uncleanness at routine Medical Inspection is set out in Table 11 at the end of the report, and the following table gives the percentage of children found with verminous heads by the Nurses at their inspection:—

		Bad.		Moderate.		Slight.		Total.		
		Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
		%	%	%	%	%	%	%	%	
All Saints'	..	..	Nil	9.2	3.2	14	Nil	4.6	3.2	27.5
Blue Coat (Girls)	..	..	..	8	..	3.5	..	7	..	11.4
Holmer (Mixed)	..	..	6	5	6	18.3	2.5	30.8	3	54
Holmer (Infants)	..	..	1.7	8.5	8.4	10.9	6.8	12	17	31.2
Roman Catholic (Mixed)	..	..	Nil	4.2	3	9.8	4	28	7	42
Roman Catholic (Infants)	..	..	Nil	4	Nil	13	6	22	6	40
Scudamore (Boys)	..	..	7	..	3	..	1.4	..	2.4	..
Scudamore (Girls)	..	..	..	3	..	10.7	..	25.6	..	39
Scudamore (Juniors)	..	..	1.4	2.5	Nil	17	2.1	13.6	3.5	33
S. James' (Infants)	..	..	1	2.1	Nil	5.3	1	5.3	2	13
S. John's (Girls)	..	..	..	10.8	..	8	..	16.2	..	35
S. Martin's (Mixed)	..	..	Nil	3.3	Nil	16.4	4.5	36.2	4.5	56
S. Owen's (Boys)	..	..	Nil	..	2	..	4	..	2.4	..
S. Peter's (Girls)	..	..	..	4.7	..	13.3	..	6.7	..	25
Tupsley (Mixed)	..	..	Nil	6.5	Nil	8.6	1	10.8	1.4	26

Compared with last year eight schools show a lower figure, six a higher figure, and in one school the figure is the same as for last year. During the year the Nurses paid 55 visits to the schools for the purpose of making an inspection for cleanliness. Children suffering from the grosser forms of uncleanness are excluded from school till cleansed, and the cases are reported to the Local Education Authority.

Printed instructions as to cleansing are given to the parents of all children found verminous, and assistance in cleansing is given in

certain cases by the School Nurses at the School Clinic. There is no cleansing station provided by the Local Authority.

(c). **MINOR AILMENTS.**—Apart from conditions dealt with below, very few minor ailments are met with at routine Medical Inspections, as children suffering from such are as a rule sent by the teachers to the School Clinic as soon as the condition is noted, and the appropriate treatment is arranged for. Twelve cases of functional heart disease were found, 31 cases of anaemia, of which only 10 required treatment. There were 31 cases of bronchitis, of which 26 were recommended for treatment.

(d). **TONSILS AND ADENOIDS.**—Five children were suffering from enlarged tonsils and adenoids in slight degree, and 62 children were recommended for examination by the Ear and Throat Surgeon. The examination for this condition is generally facilitated if the parent is present to give a history of symptoms. Digital examination for adenoids is not carried out during routine inspection except at the request of the parent.

(e). **TUBERCULOSIS.**—All children attending school who have been previously notified as tuberculous are seen at the time of routine Medical Inspection, whether they belong to one of the age groups inspected or not. Twenty-five children suffering from pulmonary tuberculosis and three children suffering from other forms of tuberculosis were examined.

(f). **SKIN DISEASES.**—Only 18 children were found suffering from skin disease in the course of routine inspection. As is the case with minor ailments, children suffering from these diseases are sent by the teachers to the School Clinic. In this way 350 children suffering from skin diseases were treated as "Specials."

(g). **EXTERNAL EYE DISEASE.**—With the exception of one case of corneal opacity, the only cases of external eye disease met with were cases of Blepharitis or inflammation of the eye-lids. This condition was found to require treatment in 24 children, and 10 children no treatment was recommended. This inflammation of the eye-lids is often neglected by careless parents until it interferes with the child's vision, and thereby a much longer time elapses before a cure is effected; and in such cases the condition is likely to recur. Inflammation of the eye-lids is often associated with errors of refraction, and subsides when these errors are corrected by suitable spectacles. Another common cause is lack of personal cleanliness.

**VISION.**—The examination of vision is carried out by the ordinary test cards at six metres, and all children who are unable to read 6/9 with both eyes are subjected to further examination, and if necessary recommended for examination by refraction. Fifty-four children were found to have defective vision during the year, and 12 children suffered from squint. Children who are noticed to have difficulty in seeing the blackboard from the back seats in a class-room are referred by the teachers as "Specials."

**EAR DISEASE AND DEFECTIVE HEARING.**—Otorrhœa, or "running ears," was found in 33 children; 13 of these were seen at routine Medical Inspection, of which 6 were cases that had previously been under observation at the School Clinic; 20 children were brought up

as special cases by teachers or parents. This condition is one which is apt to be treated lightly by parents, and may give rise to sudden and serious trouble if neglected. Seven children were found to suffer from defective hearing to such a degree as to require treatment. The tests for hearing are applied to children of the intermediate and leaver groups only, and consists of the whisper test at 20 feet, 10 feet, and 5 feet, supplemented by the watch test in certain cases. Here again valuable assistance is given by teachers and parents bringing cases of deafness to the notice of the School Medical Officer.

**DENTAL DEFECT.**—As will be seen in Table IV, D 1 and 2, the School Dentist devoted 19 half-days to dental inspection and examined 1,968 children, referring 775 for treatment. This represents a percentage of 39 with defective teeth, as compared with 32 for the year 1920; this increase may be associated with the fall in the price of sugar. The figures for Hereford City, however, compare favourably with the figures for England and Wales. The Chief Medical Officer of the Board of Education in his annual report for 1920 states that the figures received from 121 areas in England and Wales show that not less than 70 per cent. of the children were deemed to be sufficiently serious in respect of dental decay to be referred for treatment.

At routine Medical Inspections the teeth of the children are examined without the aid of a dental mirror, and it was found that out of 998 children 343 had less than four decayed teeth and 237 had more than four unsound teeth. The attention of parents is drawn to this condition and treatment advised.

**CRIPPLING DEFECT.**—All cripple children are seen as special cases at each visit to the schools for routine Medical Inspection. There are three children suffering from crippling due to tuberculosis, and seven suffering from crippling due to other causes, attending the Public Elementary Schools in the City.

**VACCINATION.**—The large number of children who are unvaccinated against Small-pox is a matter for serious consideration. From conversations I have had with parents who are present when the children come up for routine Medical Inspection, I am convinced that this is largely due to ignorance of the reasons for vaccination of children. Some parents confessed they did not know any reason for it, others had a vague idea that it prevented any infectious disease, and only very few knew that vaccination was carried out to prevent Small-pox only. It is clear then that the majority of parents require guidance, and the proved value of vaccination in relation to Small-pox prevention might well be set out in the schedule given to parents relating to the requirements of the Vaccination Acts at the time of registration of a child's birth. The increasing number of unvaccinated children is shown in the following report:—

		Percentage unvaccinated.			
Leavers	Boys	...	...	...	34
	Girls	...	...	...	37
Intermediate	Boys	...	...	...	53
	Girls	...	...	...	65
Entrants	Boys	...	...	...	65
	Girls	...	...	...	68

It is interesting to speculate how far the conscientious objections would be adhered to should Small-pox break out in the district.

### 6. Infectious Disease:—

All cases of Notifiable Infectious Disease are brought to the notice of the School Medical Officer in his capacity of Medical Officer of Health, and the school attendance of the patient and contacts regulated accordingly. Cases of non-notifiable infectious diseases are reported to the School Medical Officer by the teachers and by the School Attendance Officer. If necessary, the case is investigated by one of the School Nurses, and attendance of the case and contacts regulated under the direction of the School Medical Officer.

During 1921, 17 cases of Scarlet Fever were notified and 40 cases of Diphtheria. Four cases of Diphtheria died. There was one case of each of the following diseases amongst school children:— Acute Anterior Poliomyelitis, Acute Pneumonia, Encephalitis Lethargica. Seven cases of Whooping Cough and one case of Measles were brought to the notice of the School Medical Officer by teachers. It was not necessary to close any schools during 1921, for the purpose of preventing the spread of infectious diseases.

### 7. Following Up:—

The parents of children found suffering from physical defects at routine Medical Inspection are informed of this if the defect requires treatment. The report is sent on a form with certificate, which the parent is asked to have filled up (by the doctor or dentist undertaking treatment, and returned to the School Medical Officer. After a suitable interval, if the counterfoil is not returned, the child is seen again at the School by the School Nurse, and if necessary visited at the home to see if the necessary treatment has been obtained. In this connection the School Nurses paid 397 visits to the homes during the year. The following up of children who are "under observation" is accomplished by calling them up from time to time to the School Clinic on Saturday morning for examination by the School Medical Officer.

### 8. Medical Treatment:—

The Treatment Scheme of the Local Education Authority provides for the treatment of the following defects in children attending the Public Elementary Schools:—

1. Minor Ailments.
2. Dental Defects.
3. Enlarged Tonsils and Adenoids.
4. Errors of Refraction (Defective Vision).

No charge is made for the treatment of minor ailments. A small nominal charge, varying with the ability of the parent to pay, is made for treatment of the other defects mentioned above. Treatment for defects other than these should be sought elsewhere, through the agency either of a private doctor or in one of the hospitals or the dispensary. No parent is under any obligation to obtain treatment for his child through the agency of the Local Authority's Treatment Scheme should he desire to go elsewhere, but it is the duty of the Local Authority to see that treatment of defects noted at routine Medical Inspection is obtained when necessary.

The Minor Ailment Clinic, held daily at the Town Hall from 9-30 to 10-30 a.m., is the clearing house for treatment except for such cases as are detected at the routine Medical Inspection and referred to the Eye, Ear and Throat and Dental Surgeons direct. The function of the School Clinic is very largely educative and preventive, and this function is largely lost sight of by the parents. It was never meant to take the place of the private doctor or the hospital out-patient department. It is educative in as much as the parents are expected to attend with their children to be instructed in methods of home treatment of minor ailments which do not require medical attention. It is preventive in as much as it deals with the first beginnings of disease. Parental ignorance and apathy and the lack of early and intelligent home treatment gives the School Clinic much needless work. Mistaken ideas as to the relative functions of the druggist and doctor are very prevalent.

(a) Fifty-four children were referred for treatment for miscellaneous minor ailments, and of these 39 received treatment at the Minor Ailment Clinic, and 15 were treated elsewhere. The conditions dealt with were—Sore throat, colds, minor injuries, etc.

(b). **TONSILS AND ADENOIDS.**—Sixty-two children were referred for further examination and treatment, and of these three were operated on under the Local Education Authority's Scheme, eight were operated on privately, and 34 received other forms of treatment. In recommending children for treatment for this condition, the "Instructions for Operative Treatment" as set out in paragraph 95 of the Annual Report of the Chief Medical Officer for 1919 are borne in mind. After operation the parents are instructed as to the necessity of giving the child breathing exercise.

(c) **TUBERCULOSIS.**—Twenty-eight children of school age have been notified as suffering from Pulmonary Tuberculosis, and are kept under observation by the Tuberculosis Officer. Of these 25 (9 boys and 16 girls) are attending Public Elementary Schools. Three children suffer from suspected Tuberculosis and are able to attend Public Elementary Schools. One boy is under treatment at an Orthopædic Hospital outside Hereford, and one girl has received treatment at an Orthopædic Hospital, and is now convalescent, but not yet fit to attend school. A large number of children—many of whom have a family history of Tuberculosis—are kept under observation as suspected cases and pretuberculous cases. I have to acknowledge the kind assistance given by the Tuberculosis Officer in the diagnosis of doubtful cases.

(d). **SKIN DISEASES.**—The various skin diseases dealt with are set out in Table IV below. It will be seen that a large number of the cases are Impetigo. This is a condition where small abrasions of the skin become infected and festering sores are set up. This condition is usually associated with lack of cleanliness of the skin, and the timely application of soap and water in sufficient quantity would do much to prevent the condition. As the condition is contagious it gives rise to much unnecessary absenteeism, and as it is preventable, its treatment at the School Clinic takes up the time of the School Nurses unnecessarily. Ringworm of head and body is fairly prevalent, and is treated by applications of various drugs only. X-Ray treatment is not obtainable under the Local Education Authority's Scheme.

**DISEASES OF THE EYE AND DEFECTIVE VISION.**—External Eye Diseases are dealt with at the School Clinic as minor ailments, except serious cases, which are referred to a private doctor or hospital. Children suffering from Defective Vision and Squint who require treatment are mostly treated under the scheme of the Local Education Authority. During the year 55 children were recommended for refraction, and 37 submitted to treatment at the Eye Clinic, three were treated by private practitioners. Fuller particulars are given in Table IV below.

**EAR DISEASE AND HEARING.**—Thirteen children received treatment at the Minor Ailment Clinic for diseases of the ear, principally Otorrhcea. Parents are instructed in the use of the rubber-ball ear syringe, in order to carry out home treatment. Six children received treatment from private practitioners, and one was treated at the General Hospital. Eleven children received treatment at the Clinic for removal of wax plugs in the ear.



D.—TREATMENT OF DENTAL DEFECTS.

1. Number of Children dealt with.

		AGE GROUPS.											
		5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	"Specials."	TOTAL.
(a) Inspected by Dentist	..	185	310	204	390	289	212	143	114	63	12	46	1,968
(b) Referred for treatment	..	6	35	66	168	144	109	83	69	38	11	46	775
(c) Actually treated	..	4	19	28	76	79	50	39	40	16	8	21	380
(d) Re-treated (result of periodical examination)	..	..	..	4	23	35	39	27	32	12	7	..	179

\* It is understood that cases under this head are also included under (c) above.

2. Particulars of Time given and of Operations undertaken.

(1).	(2).	(3).	(4).	(5).	(6).	(7).	(8).	(9).	(10).	(11).	No. of other Operations.	
											Total No. of Fillings.	No. of Administrations of General Anaesthetics included in (4) and (6).
19	64	610	167	550	264	19	569	Nil.	717	283		

### 9. Open-air Schools.

Physical exercises are given in the school playgrounds in fine weather, and during the summer certain other classes are taught in the playground. Nature Study in the open air, and visits to factories, etc., have been undertaken in at least one school. There are no School Camps, Open-air Class-rooms, Day Open-air Schools or Residential Open-air Schools in the City.

### 10. Physical Training.

Beyond recommending children to be excused drill on account of certain physical conditions, the School Medical Officer is not associated with the work of physical training. There is no Area Organiser for Physical Training. A Play Centre is provided at Lord Scudamore School every school-day evening.

### 11. Provision of Meals.

No action has been taken by the Authority under the Provision of Meals Acts, 1906-14. During 1921 measures taken to provide meals for a limited number of school children through outside agencies are referred to above, under Nutrition.

### 12. School Baths.

There are no School Baths, but arrangements are made by the Authority whereby school children can attend the Public Baths and obtain instruction in swimming. During 1921, 119 boys and 60 girls obtained certificates of proficiency in swimming.

### 13. Co-operation of Parents.

As noted above, parents are invited to attend routine Medical Inspections, and in order that as many parents or guardians as possible may avail themselves of the opportunity of being present while the School Medical Officer is in the School, the routine Medical Inspections are carried out as far as possible in the afternoons. In spite of this it is a matter for regret that so few parents were present. Household and other duties no doubt prevent a few parents, but the majority could attend, and apart from any advantage to themselves, they can assist the School Medical Officer very much in assessing the physical condition of their children. Nine hundred and ninety-eight children were examined, but in only 228 cases was the parent or guardian present. Other relatives attended in 19 cases. Again, many of the parents do not attend with their children when they come up to the Treatment Clinic. All children attending the Clinics for the first time at least should be accompanied by a responsible adult, who can give some history of the case, and take instructions for its treatment. It is waste of the Medical Officer's time to give instructions to a young child as to treatment. It is to be feared that as the work of the Minor Ailment Clinic is done without payment, it is evaluated accordingly by many parents.

### 14. Co-operation of Teachers.

Valuable assistance is given by the teachers in all branches of the work. By drawing attention to children who are dirty and verminous they can do much to assist in preventing this. The keeping of records of temperatures in the class-rooms by the teachers afford a valuable index of the sufficiency of the heating arrangements.

**15. Co-operation of School Attendance Officer.**

There is only one School Attendance Officer, who co-operates with the School Medical Department in all matters affecting school attendance. The usual notices of children excluded from or readmitted to school by the School Medical Officer are sent to the School Attendance Committee.

**16. Co-operation of Voluntary Bodies.**

The work of the School Medical Department is directed by the Care Sub-Committee of the Education Committee. This Sub-Committee consists partly of elected members of the Town Council and partly of co-opted members, and its members visit the schools from time to see that their recommendations are carried out.

There is also co-operation with the National Society for Prevention of Cruelty to Children, and with the Distress Committee, to which cases requiring temporary assistance either in food or clothing for children attending the Public Elementary Schools are referred. Cases requiring assistance are also reported from time to time to the Charities administered by the various religious bodies in the City.

**17. Blind, Deaf, Defective and Epileptic Children.**

Such children of school age are brought to the notice of the School Medical Officer by the School Attendance Officer, or by the Health Visitors and School Nurses. As will be seen by Table III, one blind child, one deaf child, and two mentally defective children are in residential institutions. No fresh cases have been placed during 1921.

One mentally defective child returned from an institution early in 1921, and is not following any employment.

**18. Nursery Schools.**

There are no Nursery Schools, but children have been admitted to the Infant Departments of the Public Elementary Schools before reaching the age of five years. Such children do not come up for routine Medical Inspection till they reach the age of five years, but they may be presented as "special" cases either at the school or at the School Clinic.

**19. Employment of Children and Young Persons.**

(1). The employment of children and young persons is regulated by Bye Laws which came into force on 1st January, 1921. All children employed outside school hours are registered by the Authority; 59 boys and 5 girls had been registered up to the end of the year. Children employed before school hours in the sale or delivery of milk, or in agricultural pursuits, must be certified fit for such employment by the School Medical Officer. Only one such certificate was issued during the year. One breach of the Bye Laws by the employment of a boy under 12 years of age was brought to the notice of the Authority, and his employment was discontinued.

(2). A medical report based on the latest available inspection is furnished on the Labour card of each leaver child, for the information of the Juvenile Employment Committee of the Labour Exchange. The Committee meets monthly, and the School Medical Officer attends in an advisory capacity.

(3). No case of injury to health or physical development occasioned by employment has been noted during the year.

TABLE I.

*Number of Children Inspected January 1st, 1921, to December 31st, 1921.*

## A.—ROUTINE MEDICAL INSPECTION.

## ENTRANTS.

	AGE.				Other Ages.	Total.	
	3.	4.	5.	6.			
Boys ...	...	...	...	148	38	...	186
Girls ...	...	...	...	131	17	...	148
<b>TOTALS</b>	...	...	...	279	55	...	334

## LEAVERS.

	AGE.				Other Ages.	Total.	Grand Total.	
	8.	12.	13.	14.				
Boys ...	...	162	143	16	3	...	324	510
Girls ...	...	178	146	14	2	...	340	488
<b>TOTALS</b>	...	340	289	30	5	...	664	998

## SPECIAL CASES.

	School.	Inspection Clinic.	Total,	Re-examinations. No. of Children re-examined.
Boys ...	...	36	322	358
Girls ...	...	23	357	380
<b>TOTALS</b>	...	59	679	758
				1,261

Number of individual children inspected—1,756.

TABLE II.

*Return of Defects found in the course of Medical Inspection, 1921,*

DEFECT OR DISEASE.	ROUTINE INSPECTION.		SPECIALS.*	
	Number referred for Treatment.	Number requiring to be kept under observation but not referred for Treatment.	Number referred for Treatment.	Number requiring to be kept under observation but not referred for Treatment.
1.	2.	3.	4.	5.
<b>MALNUTRITION</b> ... ... ... ... ...	2	92	4	1
<b>UNCLEANLINESS</b> —				
Head ... ... ... ... ...	4	32	10	6
Body ... ... ... ... ...	4	...	4	...
<b>SKIN</b> —				
Ringworm—Head ... ... ... ... ...	9	...	53	...
Body ... ... ... ... ...	3	...	24	...
Scabies ... ... ... ... ...	...	...	10	...
Impetigo ... ... ... ... ...	4	...	115	...
Other Diseases (non-Tubercular)	2	...	112	...
<b>EYE</b> —				
Blepharitis ... ... ... ... ...	12	8	12	2
Conjunctivitis ... ... ... ... ...	...	...	...	...
Keratitis ... ... ... ... ...	...	...	...	...
Corneal Ulcer ... ... ... ... ...	...	...	...	...
Corneal Opacities ... ... ... ... ...	1	...	...	...
Defective Vision ... ... ... ... ...	46	...	9	...
Squint ... ... ... ... ...	8	...	4	...
Other Conditions ... ... ... ... ...	...	...	...	...
<b>EAR</b> —				
Defective Hearing ... ... ... ... ...	5	...	2	...
Otitis Media ... ... ... ... ...	...	...	...	...
Other Ear Diseases ... ... ... ... ...	10	3	20	...
<b>NOSE AND THROAT</b> —				
Enlarged Tonsils ... ... ... ... ...	20	...	2	...
Adenoids ... ... ... ... ...	5	1	7	...
Enlarged Tonsils and Adenoids ...	20	4	8	...
Other Conditions ... ... ... ... ...	6	...	70	...
<b>ENLARGED CERVICAL GLANDS</b> — (non-Tubercular) ... ... ... ... ...	1	61	6	...
<b>DEFECTIVE SPEECH</b> ... ... ... ... ...	2	...	1	...
<b>TEETH—DENTAL DISEASES</b> ... ... ... ... ...	...	...	18	...
<b>HEART AND CIRCULATION</b> —				
Heart Disease - Organic ... ... ... ... ...	6	4	2	...
Functional ... ... ... ... ...	3	3	4	2
Anaemia ... ... ... ... ...	1	21	9	...
<b>LUNGS</b> —				
Bronchitis ... ... ... ... ...	11	5	15	...
Other Non-Tubercular Diseases ...	...	...	2	...
<b>TUBERCULOSIS</b> —				
Pulmonary—Definite ... ... ... ... ...	...	...	...	...
Suspected ... ... ... ... ...	...	19	3	...
Non-Pulmonary—				
Glands ... ... ... ... ...	...	...	2	...
Spine ... ... ... ... ...	...	...	1	...
Hip ... ... ... ... ...	...	...	...	...
Other Bones and Joints ...	...	...	...	...
Skin ... ... ... ... ...	...	...	...	...
Other Forms ... ... ... ... ...	...	...	...	...
<b>NERVOUS SYSTEM</b> —				
Epilepsy ... ... ... ... ...	2	...	...	...
Chorea ... ... ... ... ...	1	2	2	2
Other Conditions ... ... ... ... ...	1	...	2	...
<b>DEFORMITIES</b> —				
Rickets ... ... ... ... ...	3	...	1	1
Spinal Curvature ... ... ... ... ...	1	...	2	2
Other Forms ... ... ... ... ...	2	...	1	...
<b>OTHER DEFECTS AND DISEASES</b> ...	...	31	147	2

Number of *Individual Children* having Defects which required Treatment or to be kept under Observation ... ... ... ... ... ...

1175

\* "Special Cases" are those children specially referred to the Medical Officer and not due for routine medical inspection under the Code at the time when specially referred. Such children may or may not be of Code-group age and may be referred to the Medical Officer at the school or the clinic by the Committee, Medical Officers, School Nurses, Teachers, Attendance Officers, Parents, or otherwise.

TABLE III.

			Boys.	Girls.	Total.
BLIND (Including partially Blind) ..	..	..	Attending Public Elementary Schools ..	..	..
			Attending Certified Schools for the Blind ..	..	..
		Not at School ..	..	..	..
DEAF AND DUMB (Including partially Deaf) ..	..	..	Attending Public Elementary Schools ..	..	..
			Attending Certified Schools for the Deaf ..	..	..
		Not at School ..	..	..	..
MENTALLY DEFICIENT—			Attending Public Elementary Schools ..	..	..
Feeble Minded ..	..	..	Attending Certified Schools for Mentally Defective Children ..	..	..
			Notified to Local Education Authority during the year ..	..	..
		Not at School ..	..	..	..
Imbeciles ..	..	..	At School ..	..	..
			Not at School ..	..	..
Idiots ..	..	..	..	..	..
EPILEPTICS ..	..	..	Attending Public Elementary Schools ..	..	..
			Attending Certified Schools for Epileptics ..	..	..
		Not at School ..	..	..	..
PHYSICALLY DEFECTIVE—			Attending Public Elementary Schools ..	..	..
Pulmonary Tuberculosis ..	..	..	Attending Certified Schools ..	..	..
			In Institutions other than Certified Schools ..	..	..
		Not at School ..	..	..	..
Crippling due to Tuberculosis ..	..	..	Attending Public Elementary Schools ..	..	..
			Attending Certified Schools ..	..	..
		Not at School ..	..	..	..
			Attending Public Elementary Schools ..	..	..
			Attending Certified Schools ..	..	..
		Not at School ..	..	..	..
			Attending Public Elementary Schools ..	..	..
			Attending Open-air Schools ..	..	..
		Not at School ..	..	..	..
Retarded 2 years ..	..	..	..	..	..
Retarded 3 years ..	..	..	..	..	..
DULL AND BACKWARD CHILDREN—					
				41	43
				13	29

One girl who was retarded three years is also included under the heading Crippling due to Tuberculosis. One girl epileptic is also included under the heading Deaf and Dumb. One boy epileptic is also included under heading Mentally Defective.

TABLE IV.

*Treatment of Defects of Children during 1921.*

## A.—TREATMENT OF MINOR AILMENTS.

Disease or Defect.	Referred for Treatment.	NUMBER OF CHILDREN			TREATED.	
		Under Local Education Authority's Scheme.	Otherwise.	Total.		
<b>SKIN—</b>						
Ringworm—Head	.. .. ..	52	46	6	52	
Ringworm—Body	.. .. ..	24	19	5	24	
Scabies	.. .. ..	10	3	7	10	
Impetigo	.. .. ..	150	143	7	150	
Minor Injuries	.. .. ..	40	38	2	40	
Other Skin Disease	.. .. ..	72	59	13	72	
EAR DISEASE	.. .. ..	18	11	7	18	
EYE DISEASE (external and other)	.. .. ..	10	4	6	10	
MISCELLANEOUS	.. .. ..	54	39	15	54	

## B.—TREATMENT OF VISUAL DEFECT.

Referred for Refraction	NUMBER OF CHILDREN.								
	Submitted to Refraction.				For whom Glasses were Prescribed.	For whom Glasses were Provided.	Recommended for Treatment other than by Glasses.	Received other Forms of Treatment.	
	Under Local Education Authority's Scheme—Clinic or Hospital.	By Private Practitioner or Hospital.	Otherwise.	Total.					
55	37	3	..	40	33	29	3	3	4

## C.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

REFERRED FOR TREATMENT.	NUMBER OF CHILDREN.			
	RECEIVED OPERATIVE TREATMENT.			RECEIVED OTHER FORMS OF TREATMENT.
	UNDER LOCAL EDUCATION AUTHORITY'S SCHEME—CLINIC OR HOSPITAL.	BY PRIVATE PRACTITIONER OR HOSPITAL.	TOTAL.	
62	3	8	11	31

TABLE V.

*Summary of Treatment of Defects as shown in Table IV.*

DISEASE OR DEFECT.	NUMBER OF CHILDREN.			
	REFERRED FOR TREATMENT.	UNDER LOCAL EDUCATION AUTHORITY'S SCHEME.	OTHERWISE.	TOTAL.
Minor Ailments ... ... ... ...	430	362	68	430
Visual Defects ... ... ... ...	55	37	3	40
Defects of Nose and Throat ... ... ... ...	62	34	8	42
Dental Defects ... ... ... ...	775	380	16	396
TOTALS ... ... ... ...	1322	813	95	908

TABLE VI.

*Summary relating to Children Medically Inspected at the Routine Inspections, 1921.*

(1). The total number of Children Medically Inspected at the Routine Inspections	...	...	...	...	...	2920
(2). The number of Children in (1) suffering from—						
Malnutrition	...	...	...	...	...	94
Skin Disease	...	...	...	...	...	18
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Eye Disease	...	...	...	...	...	21
Defective Hearing	...	...	...	...	...	5
Ear Disease	...	...	...	...	...	13
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Enlarged Cervical Glands (non-tubercular)	...	...	...	...	...	62
Defective Speech	...	...	...	...	...	2
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Heart Disease—						
Organic	...	...	...	...	...	10
Functional	...	...	...	...	...	6
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Non-pulmonary	...	...	...	...	...	—
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						1168
(3). The number of Children in (1) suffering from defects (other than uncleanliness or defective clothing who require to be kept under observation but not referred for treatment)	...	...	...	...	...	244
(4). The number of children in (1) who were referred for treatment (excluding uncleanliness, defective clothing, etc.)	...	...	...	...	...	892
(5). The number of Children in (4) who received treatment for one or more defects (excluding uncleanliness, defective clothing, etc.)	...	...	...	...	...	496

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