

[Report 1911] / Medical Officer of Health, Hinckley U.D.C.

Contributors

Hinckley (England). Urban District Council.

Publication/Creation

1911

Persistent URL

<https://wellcomecollection.org/works/hbjd8dxy>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

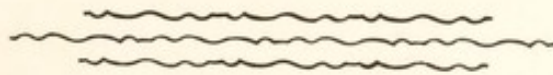
Annual Report

-:- OF THE -:-

Medical Officer of Health

-:- FOR THE -:-

Year ending December 31st, 1911.



HINCKLEY :

PRINTED BY S. WALKER, LONDON ROAD.

1912.



Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

<https://archive.org/details/b29429201>

ANNUAL REPORT.

*To the Chairman and Members of the Hinckley
Urban District Council.*

Gentlemen,—

Again I have the honour of submitting to you my Annual Report in respect of the Health and Sanitary condition of the Hinckley Urban District, for the year ending December 31st, 1911. As usual with these reports, I will commence by giving a short summary of the Vital Statistics of Births and Deaths occurring in the District during the year, and supplement the same with the following data:

VITAL STATISTICS.

Area of District	3,729 acres.
Rateable Value	About £48,811
Population (census 1911)	12,838
Average Population per acre, 1911 ...	3.7
No. of houses inhabited (census 1911)	2,873
Average number of persons per house	4.4
Death Rate, 1911	14.3
Birth Rate, 1911	24.4
Infant Death Rate (under 1 year of age) per 1,000 Births registered...	130.5
Zymotic Death Rate	1.9

On the 1st of April, 1911, the Census of the District was taken, and the following figures are thereby disclosed: Total population of the District, 12,838, of which 6,007 were males, and 6,831 were females. This is an increase of 1,534 persons on the census of 1901. The number of inhabited houses was 2,873, as compared with 2,542 (census 1901), being an increase of 331. Census.

There were 74 uninhabited houses,
31 houses in process of erection, and
165 other buildings not used as dwelling houses

Population. I have estimated the population of the Hinckley Urban District at the middle of 1911 at 12,900, being 700 more than the estimate given for the middle of 1910, and as we have the figures at the last census, I don't think this figure will be very much off the mark.

All calculations that follow have been based on this estimate.

Once more I am pleased to report that all the Factories and Workshops in the District are occupied and also that there are now 38 Factories as against 36 in 1910, the number of Workshops being the same. Eight cases of overcrowding have been brought to my notice, as against 3 in 1910, and these were soon put in order.

The work under the Housing, Town Planning, etc. Act, 1909, has more readily brought these cases to light, and after the whole work in connection with this has been completed, I trust that such cases in the future will not only be reduced but completely disappear.

Births The total number of Births registered in 1911 was 315. This is a decrease of 5 as compared with 1910, and a decrease of 20 as compared with 1909, in fact it is the lowest number recorded for the last 15 years. (See table below).

These births include 9 illegitimate children, 5 being males and 4 females, as compared with 14 illegitimate in 1910, 11 of which were males and 3 females. There were 2 of these births at the Union Workhouse, as compared with 4 in 1910.

I append the following table for comparison:

In 1897, there were 382 births.			
„	1898	„	391
„	1899	„	361
„	1900	„	359
„	1901	„	331
„	1902	„	342
„	1903	„	354
„	1904	„	326
„	1905	„	367
„	1906	„	321
„	1907	„	345
„	1908	„	341
„	1909	„	335
„	1910	„	320
„	1911	„	315

Of these 315 births, 171 were males, and 144 were females, giving an average birth rate of 24.4 per 1,000,

as compared with 26.2 per 1,000 in 1910, and 27.6 per 1,000 in 1909. As this seems a big drop in the birth rate, and one which does not at first sight appear consistent with the fact that there were only 5 births less last year than the year previous, it should be pointed out that the estimated population for 1909 and 1910 was probably lower than the actual figure. This year, we have the actual figures of the Census to work upon. This should be borne in mind when making the comparisons in the percentages throughout this Report.

The number of Births registered during each quarter of the year was as follows:

1st Quarter,	42	boys,	39	girls.
2nd ,,	49	,,	29	,,
3rd ,,	43	,,	42	,,
4th ,,	37	,,	34	,,
	171	,,	144	,,
Total	315.			

The natural increase in the population, i.e., the increase of births over nett deaths, was 131, as compared with 137 in 1910.

The total number of *nett* deaths registered in 1911 was 185 as compared with 183 in 1910, and 183 in 1909. The following table gives the *total* deaths registered in the district for the last 15 years:

Deaths

In 1897 there were	179	deaths.
,, 1898	226	,,
,, 1899	199	,,
,, 1900	192	,,
,, 1901	164	,,
,, 1902	160	,,
,, 1903	187	,,
,, 1904	177	,,
,, 1905	163	,,
,, 1906	202	,,
,, 1907	169	,,
,, 1908	191	,,
,, 1909	190	,,
,, 1910	181	,,
,, 1911	186	,,

Of these 186 deaths, 94 were males and 92 were females, giving an average death rate of 14.4 per 1,000. This is inclusive of 16 deaths at the Union Workhouse, and 5 deaths at the Cottage Hospital.

In 1910, the average death rate was 14.8 per 1,000. There were 5 deaths (3 males and 2 females), of non-

residents, at the Workhouse, and 1 death of a non-resident at the Cottage Hospital. There were 5 deaths of residents belonging to the district registered outside your district, as supplied to me through the County Medical Officer of Health. The 5 deaths at the Workhouse and 1 at the Cottage Hospital must be deducted, and the 5 deaths away must be added to the total deaths registered, to give the nett deaths for the district. The actual number of deaths returned by the Registrar for each month was as follows:

In January there were	18	deaths.
„ February	11	„
„ March	23	„
„ April	13	„
„ May	15	„
„ June	13	„
„ July	7	„
„ August	25	„
„ September	17	„
„ October	16	„
„ November	15	„
„ December	13	„

July was the month with the fewest deaths, and comparing this month with the last nine Julys, it is the most favourable month in the year. August and March were the months with the highest number of deaths. This is accounted for in August from Summer Diarrhœa being very prevalent, there being no special reason to account for the increased mortality in March.

For the week ending July 8th, no death was registered. The number of deaths under 1 year of age was 41, as compared with 46 in 1910. This gives an infant mortality of 130.5 per 1,000 births registered in 1911, as compared with 143.7 per 1,000 births registered in 1910.

There was 1 death of an illegitimate boy of 4 months, due to Summer Diarrhœa.

The following table gives the ages at which death took place in 1911:

Under 1 year	...	...	41
1 year and under 2 years	...	...	14
2 years	„	5	15
5	„	15	10
15	„	25	12
25	„	45	13
45	„	65	29
65	„	and upwards	51
Nett Deaths			185

The deaths under 1 year of age with those over 65, total half the nett deaths.

The following table gives the Infant Mortality:

Under 1 month	6
1 month and under 3 months ...	11
3 months .. 6 ..	12
6 9 ..	8
9 12 ..	4
Total Deaths ...	41

There were 5 deaths registered in persons over 90, namely, 90, 93, 94, 95, and 96 respectively.

There were 25 deaths registered in 1911, eleven of these being due to Scarlet Fever, 5 due to Influenza, 2 due to Enteric Fever, and 1 to Whooping Cough (not counting the Diarrhœa and Phthisis cases), giving a Zymotic Death Rate of 1.9 per 1,000, as compared with .82 in 1910.

Zymotic
Diseases

The total number of deaths that took place at the Union Workhouse was 16, as compared with 13 deaths in 1910, and 25 deaths in 1909. Of these 16 deaths, 10 were males and 6 females. The oldest death registered was a man of 84 years, and the youngest 22 years, the whole giving an average age at which death took place at this institution at 75.6, as compared with 74.3 in 1910, and 70.8 in 1909.

Workhouse

Of the 16 deaths, 11 belonged to the District, and 5 were persons from outside the district, according to the returns supplied to me weekly by the Local Registrar.

Of those outside the district, 2 belonged to Barwell, and 1 each respectively to Burbage, Sapcote, and Earl Shilton.

This excellent institution still continues to do good work in the town and district, as shown by the large number of patients treated here during the year. The average number of beds occupied, taking the whole year round, is 10.

Cottage
Hospital

During the year 1911, 5 deaths took place here as compared with 8 deaths in 1910, and 3 in 1909. Of these 5 deaths, 3 were males, and 2 females. All except 1 child from Stoke Golding were Hinckley residents

The total number of notifications received during the year was 496, but as the same patient was notified in one instance 3 times, and in 2 other instances twice, from the same disease, I have deducted these 4, so that the

Infectious
Diseases

nett notifications come to 492, as compared with 89 cases in 1910, and 70 cases in 1909.

The reason for this large increase in the number of notifications is that we have experienced rather a severe epidemic of Scarlet Fever during the year. (See report later). Of those notified, 429 were cases of Scarlet Fever, 17 cases of Enteric, 13 cases of Erysipelas, 5 cases of Diphtheria and Croup, and 28 cases of Phthisis. For comparison, I give the totals for the last 15 years.

In 1897 there were 114 cases notified.

„ 1898	„	71	„
„ 1899	„	45	„
„ 1900	„	40	„
„ 1901	„	27	„
„ 1902	„	104	„
„ 1903	„	69	„
„ 1904	„	50	„
„ 1905	„	143	„
„ 1906	„	127	„
„ 1907	„	142	„
„ 1908	„	72	„
„ 1909	„	70	„
„ 1910	„	89	„
„ 1911	„	492	„

Small Pox No cases were reported during the year, as compared with 1 case in 1910, there having been no case reported previous to this for 4 years. The Snarestone Isolation Hospital is always kept in readiness to receive any patients who should contract this disease.

Diphtheria. There were 5 cases notified in 1911, the same as in 1910. One case was removed to the Isolation Hospital and recovered.
Membranous Croup

There were 2 deaths, as compared with 1 in 1910. As far as could be ascertained, no cause could be found for the occurrence of these cases.

The County Council still continue to provide free bacteriological examination for doubtful or suspicious cases of this disease, and this privilege has been made use of on several occasions, and is of undoubted benefit in the carrying out of preventive measures.

I would here urge on the Council to provide a free supply of Antitoxin to be used for the poorer class of patients, not only for its curative properties but also as a prophylactic against others developing the disease in the same household, especially where cases cannot be removed to the Isolation Hospital.

I find that other Councils are doing this.

There were 17 cases notified during the year, as compared with 8 cases in 1910.

Typhoid
Fever

There were 2 deaths, as compared with none in 1910. These cases were spread over the whole year: 2 cases being notified in January, 1 in February, 3 in April, 2 in May, 1 in July, 2 in October, 1 in November, and 5 in December. Two cases appeared in one house down the Ten Foot, off Factory Road, where a case had been previously notified in December 1910.

In one house in Baine's Lane, the father, mother, and 3 children were attacked at different times, and one of the children died of Cancrum Oris following the disease.

As we have no means of isolating Typhoid cases, the Council fell in with my suggestion to procure a nurse to look after the family till the disease was at an end.

Another case was reported in the Ten Foot in December, but as far as the other cases were concerned, they took place in different parts of the town. Any insanitary defects found in connection with these cases were remedied.

A good many cases were noted in June and July, and unfortunately, 4 deaths were recorded in these months, all being due to Broncho-Pneumonia, one of the most fatal complications of the disease.

Measles

There were no notifications received during the year, as compared with 1 in 1910.

Puerperal
Fever

There were 13 cases notified, as compared with 27 in 1910. Again it is pleasing to record no death as due to this disease.

Erysipelas

This disease was not so prevalent as in former years, only 1 death being notified in a child under 1 year of age, as against 3 deaths in 1910.

Pertussis

One has to note the large number of deaths from these diseases in 1911, there being 19 deaths as against 6 deaths in 1910. One can only account for this by the exceptionally dry summer we have experienced, and the deleterious effect of the heat on milk, for no less than 14 of these deaths (11 due to Diarrhoea and 3 due to Enteritis), were in children under 1 year of age. Excepting for this increase in the Diarrhoea returns, the district would have shown a very favourable decrease in infant mortality, as it is the nett death rate is the lowest for very many years.

Diarrhoea
and
Enteritis

Phthisis

During the past year, 28 cases of Phthisis were notified. Of these 15 cases were notified voluntarily, 8 cases were notified under the Poor Law, and 5 cases under the Tuberculous Regulations, 1911. Under the latter heading, there is a great tendency to overlapping of notifications, for I find as stated before, the same case notified more than once, but, for my returns, I have only counted each individual person.

The total number of cases notified is an increase of 12 over 1910.

Under the present regulations, we shall have a more correct knowledge of the total cases of Phthisis in our midst, which will be treated and cared for in a more efficient manner than in the past. The Sanitary Inspector, as far as conditions allow, leaves printed rules and instructions for the use of patients suffering from the malady, and this in the future will no doubt be more thoroughly carried out, to the advantage of the patient and the community at large.

As far as the Urban District is concerned, no accommodation is made for Early, Intermediate, or Advanced cases of Consumption. As a rule, in the case of very poor patients, these drift into the Workhouse Infirmary.

There were 11 deaths registered in 1911, as compared with 14 deaths in 1910, and 12 deaths in 1909. There were 3 deaths attributed to other Tubercular diseases.

The necessary disinfection of rooms is always carried out after death from Phthisis.

Cancer.
Malignant
Diseases

There were 8 deaths due to these causes (1 death in 23), as against 13 deaths in 1910, which is a decrease of 5 deaths.

Chest
Diseases

There were 14 deaths registered, 7 being due to Bronchitis, 2 to Broncho-Pneumonia, 2 to Pneumonia, and 3 due to Asthma, as against 20 deaths in 1910.

Appendicitis

There were 2 deaths registered during the year, but one of these was a patient not belonging to the district.

Cirrhosis of
Liver

One notes 2 deaths in the past year.

Nephritis and
Bright's
Disease

There were 2 deaths registered. Considering the prevalence of this disease generally, this seems a very small and pleasing return.

Premature
Births

There were 4 deaths registered, as against 10 in 1910.

Heart Disease The number of deaths registered from the various forms of heart disease was 19, as against 10 deaths in 1910, and 12 in 1909.

There were 5 deaths registered (2 of them being due to burns which happened in the same week), as compared with 4 deaths due to accidents in 1910. Accidents

There were 6 Enquiries held as to the cause of death in 1911, as compared with 5 in 1910. Inquests

I have ventured to classify these in order to account for the small return made under Nephritis and Bright's Disease. There were 12 deaths registered from various forms of Brain trouble. Cerebral Disease

On account of the epidemic of Scarlet Fever in 1911, this Hospital has been taxed to its utmost, so much so that additional accommodation had to be procured by means of tents. (See Scarlet Fever). There were 223 cases of Scarlet Fever admitted and treated at this Institution, as against 41 cases in 1910. Of these, 139 cases were sent from the Hinckley Urban District, and 84 from the Rural District. 5 deaths took place, as against none in 1910. Isolation Hospital

There were 2 cases of Diphtheria received, one from the Urban District and one from the Rural District. In normal times, the Hospital sets apart accommodation for Scarlet Fever and Diphtheria at the same time, but on account of the prevalence of Scarlet Fever not only in Hinckley but also in the District, all the blocks were used for the isolation of Scarlet Fever only.

Total cases admitted during the year, 225.

During the past year, the District has been visited with Scarlet Fever rather a severe epidemic of this disease, in fact the most severe since I have had the pleasure of writing these reports, for there have been altogether 429 cases notified during the year, as compared with 31 cases in 1910, and 34 cases in 1909. 139 of these cases were removed to the Isolation Hospital, the remaining 290 being isolated in their own homes, as the accommodation at the Isolation Hospital was taxed to its utmost, in spite of the supplementing of its capacity by tents at one period. The large majority of the cases occurred in the autumn, as the following figures for the months show:

In January	...	1	case was notified.
„ February	...	2	cases were „
„ March	...	2	„ „ „
„ April	...	1	case was „
„ May	...	1	„ „ „
„ June	...	8	cases were „
„ July	...	22	„ „ „
„ August	...	55	„ „ „
„ September	...	94	„ „ „
„ October	...	146	„ „ „
„ November	...	53	„ „ „
„ December	...	44	„ „ „

Thus it will be seen that the epidemic started in July and reached its height in October. The outbreak was not confined to any particular portion of the town, and though to commence with every case which could not be satisfactorily dealt with at home was removed to the Isolation Hospital, this did not seem to stop the spread of the fever. When the Isolation Hospital with its supplementary tents (and these could only be used in the fine weather, and therefore only before the epidemic reached its height), were insufficient to cope with the disease, two nurses were engaged to help to treat the patients isolated at home, and to try to make the isolation more thorough. Previous to this, the Sanitary Inspector had visited all home cases, to try and ensure that all precautions were being carried out as far as possible.

As regards the epidemic itself, it ran more or less concurrently with a similar state of things in Leicester and Nuneaton, and no doubt the large interchange of population which daily goes on with these neighbouring large towns helped to spread the disease in all three. Again, there was a very large number of very mild cases, and I think that there have been a very large number of very mild cases which never came under medical supervision at all, and which in pursuing their daily avocations have helped to spread the disease.

As regards any local condition that has helped to spread the disease the one condition which does play an important part in spreading a Zymotic disease such as Scarlet Fever, is the relative one of overcrowding. Other conditions of prime importance are the increased facilities for travelling, and hence as mentioned above, the mixing of a large portion of the population of neighbouring towns, also compulsory education, and especially the practice which is common in Hinckley, of the mothers going to work and sending young children between 3 and 4 years of age to the Infant Schools.

As regards "Return Cases," there have been very few, if any, from the Isolation Hospital.

In a number of cases, the infectivity of Scarlet Fever may be said to become chronic, and under certain conditions, i.e., by catching cold with accompanying nasal discharge, children who have suffered from Scarlet Fever may give the disease to other people even after many weeks have elapsed. It is not wise to dogmatize too much with regard to this question, but I am strongly of opinion that children as a rule are kept too long in

hospital. It has been the common practice to fix 6 weeks as the period of infection and detention in Scarlet Fever cases. Why 6 weeks was chosen is a matter of surmise, probably because desquamation usually continues for 6 weeks, but no one who has had a large experience of Scarlet Fever in Hospital, now believes that desquamation per se has anything to do with the infection, and my experience teaches me that 6 weeks in the majority of cases is too long, and again in a certain number of cases may be too short a period of detention, but each case must be judged on its merits.

This is a matter of great importance from a public health and also from a ratepayer's point of view, for the longer children are kept in Hospital, the greater the cost to the ratepayers, and the greater is the Hospital accommodation required.

By disregarding desquamation (especially that of the thick skin on the sole of the feet), but again judging each case on its merits, as regards the probability of throat and nose infection, it would be possible to send many children home much sooner and thus keep the wards less crowded, which would lessen the cost of up-keep and would incidentally lessen also the chance of return cases.

Several towns, including the neighbouring one of Leicester, have shortened the period of detention, and take no note of desquamation, with no ill-results. On the 25th of September, I sent a Report of the epidemic to the Local Government Board, and also a fuller report embodying the first on November 13th. As regards the steps taken to try and limit the epidemic, as above stated, when it was found that the Isolation Hospital could not accommodate all the cases which required admission, two large tents were procured and established in the Isolation Hospital grounds, but when the weather broke up it was not felt advisable to nurse cases under these conditions.

When the tents were abandoned, a nurse was engaged to go round and see that the home cases were being properly isolated, and also to treat the more severe type of throats; later a second nurse was engaged.

In September, when it was felt that a certain number of cases were not being taken any notice of by the parents or guardians, and were allowed to mix with others, the following bill was posted all over the town:

HINCKLEY
URBAN DISTRICT COUNCIL.

Scarlet Fever.

As Scarlet Fever is very prevalent at the present time, it is to the benefit of all concerned that where a child or other person is suffering from Sore Throat or Sickness with a Rash, that the parents or persons responsible should immediately notify their Doctor, or the Medical Officer of Health of such illness.

Any person knowingly concealing a case of Scarlet Fever, and not notifying the same as above, is liable to a penalty of forty shillings.

(Signed),

A. W. JENKINS,

Medical Officer of Health.

Castle Street,
Hinckley,

26th September, 1911.

Again in October, when it was still felt that proper care and precaution were not being taken, a second hand-bill was distributed in every house as follows:

HINCKLEY
URBAN DISTRICT COUNCIL.

Scarlet Fever.

As Scarlet Fever is very prevalent in the Town at the present time, the Hinckley Urban District Council wish to emphasise the fact that it is to the benefit of all concerned that when a child or other person is suffering from SORE THROAT OR SICKNESS WITH A RASH, that the Parents of such child, or persons responsible, should immediately consult their Doctor, so that if it turns out to be a case of Scarlet Fever, steps can at once be taken to treat and isolate the Patient, and prevent, as far as possible, the disease spreading.

There seems to be a considerable amount of wilful neglect on the part of persons suffering from Scarlet Fever, and those in charge of any person so suffering, as to exposing themselves or the person in their charge without taking proper precautions against spreading the disease, and attention therefore is drawn to Section 126 of the PUBLIC HEALTH ACT, 1875, set out below, which imposes a PENALTY OF FIVE POUNDS on any person who contravenes the Section.

Notice is therefore given, that if after this date any person while suffering from Scarlet Fever, or being in charge of any person so suffering, exposes such sufferer without proper precautions against spreading the disease in any street, public place, shop, inn, or public conveyance, such person will be prosecuted.

Notices have already been issued and distributed in the town from time to time with reference to the Notification of Infectious Diseases, but attention is once more called to the provisions of Section 3 of the Infectious Disease Notification Act, 1889, which governs this matter, and which imposes a PENALTY OF TWO POUNDS upon any person who does not give the necessary Notice as called for in this Section. In case of doubt, the family Doctor or the Medical Officer of Health (Doctor A. W. Jenkins), should be at once consulted. The Section above referred to is, so far as necessary, also set out below.

The attention of the general public is also called to the following Clauses of the Public Health Acts which relate to provision against infection, and which impose penalties for non compliance therewith.

1. No person must let any house or room in which any person has been suffering from an Infectious Disease, without having such house or room, and all articles therein liable to retain infection, disinfected, (*Public Health Act, 1875, Section 128.*)

2. Proceedings may be taken to prevent Milk being sold from any Dairy within the District if it is likely to cause infectious disease to any person. (*Infectious Disease Prevention Act, 1890, Section 4.*)

3. Persons ceasing to occupy a house in which any person has within six weeks previously been suffering from an infectious disease must have such house, and articles therein liable to retain infection, disinfected, and give notice of the previous existence of the disease to the owner of the house. (*Section 7.*)

4. No person must put into any Ashpit or Ashbin any infectious rubbish. (*Section 13.*)

5. A person suffering from an infectious disease must not carry on any trade or business, unless he can do so without risk of spreading the disease. (*Public Health Acts Amendment Act, 1907, Section 52.*)

6. A Dairyman supplying milk within the district must notify the Medical Officer of Health of infectious diseases among persons engaged in or in connection with his dairy, whether within or without the district. (*Section 54.*)

7. Infected clothes must not be sent to any Public Laundry. (*Section 55.*)

8. No parent shall allow his child who is or has been suffering from infectious disease *or has been exposed to infection*, to attend school if the Medical Officer of Health has previously given notice that the child is not to be sent to school without getting a Certificate from the Medical Officer of Health that the child may attend. (*Section 57.*)

9. No book shall be taken from a Public Library by an infected person, or be returned to the Library after being exposed to infection until properly disinfected by the Local Authority, and no person who takes out a book shall permit any other person who is suffering from infectious disease to use it. (*Section 59.*)

The Council desire to stop if possible the present Epidemic of Scarlet Fever increasing, and they are determined to take stern measures against any person or persons wilfully breaking the law as shortly set out above. The Council will be obliged if any person knowing of any person suffering from Scarlet Fever or in charge of a person so suffering, wilfully doing anything within the limits of the above Acts of Parliament that will tend to spread the disease, will give information to the Sanitary Inspector at the Council offices, so that legal proceedings may be taken.

By Order,

A. S. ATKINS,

Clerk to the Council.

25th October, 1911.

PUBLIC HEALTH ACT 1875: SECTION 126.

Any person who:—

1. While suffering from any dangerous infectious disorder wilfully exposes himself without proper precautions against spreading the said disorder, in any street, public place, shop, inn, or public conveyance, or enters any public conveyance without previously notifying the owner, conductor, or driver thereof, that he is so suffering; or

2. Being in charge of any person so suffering, so exposes such sufferer or causes or permits such sufferer to be so exposed, or

3. Gives, lends, sells, transmits, or exposes, without previous disinfection, any bedding, clothing, rags, or other things which have been exposed to infection from any such disorder, shall be liable to a penalty not exceeding five pounds;

Provided that no proceedings under this section shall be taken against persons transmitting with proper precautions any bedding, clothing, rags, or other things for the purpose of having the same disinfected.

INFECTIOUS DISEASE NOTIFICATION ACT 1889: SECTION 3.

1. Where an inmate of any building is suffering from an Infectious Disease, (1) The head of the family to which such inmate belongs, or (2) The nearest relative in the building or in attendance on the patient, or (3) The person in charge of the patient, or (4) The occupier of the building shall, as soon as he becomes aware that the patient is suffering from an Infectious Disease, send notice thereof to the "Medical Officer of Health."

2. Penalty for not giving notice—A Fine not exceeding "Forty Shillings."

The expression "Infectious Disease" means any of the following diseases, viz., 'Small-pox,' 'Cholera,' 'Diphtheria,' 'Membranous Croup,' 'Erysipelas,' '*Scarlatina or Scarlet Fever*,' and any of the following Fevers—'Typhus,' 'Typhoid,' 'Enteric,' 'Relapsing,' 'Continued,' or 'Puerperal.'

Mr. Abbott, your Inspector, was specially delegated to call at every house and see that proper isolation was being carried out.

On October 17th, the Schools were closed, but the epidemic was already beginning to abate, and it would not be right to attach much if any importance to the fact that the cases have decreased since the Schools were closed.

Of the 429 cases notified, 1 case was a child under 1; 123 cases between 1 and 5 years; 246 cases between 5 and 15 years; 44 cases between 15 and 25 years; and 15 cases between 25 and 45 years. There were 11 deaths altogether from this disease, 4 of these deaths being due to convulsions at the onset of the Fever, so

that considering the large number of cases notified, the fatality rate cannot be said to be high.

Water Supply The water supply still continues good, and though we have had an exceptionally dry summer, no shortage of water was experienced. No complaints reached me as to the quality of the water.

Sewers The sewers in the various parts of the town have been regularly flushed out. The complaints that have been received have been generally due to untrapped and old type street gullies, and up-to-date gullies have been substituted.

The Committee are now considering the question of a new main outfall sewer in the Rugby Road.

One street ventilating shaft has been erected in New Street, and the Surveyor has been given instructions to erect several others as occasion arises.

Sanitary Conditions With regard to the Sanitary conditions generally, I have regularly and systematically inspected the whole district during the past year.

The number of Privies converted into Water Closets during the past year was 9, as compared with 15 in 1910, and 12 Pail Closets were also converted into Water Closets.

The number of Ashpits converted into Ashbins was 12. Ashbins are now provided to all new houses. The detail of the work in connection with this is fully set out in the Surveyor's Report.

Housing, Town Planning Act The work in connection with this has been carried out by the Surveyor and myself, and as shown by the figures given below, much valuable and important work has been got through. Altogether, 220 houses have been thoroughly inspected during the past year, and a detailed account of the conditions found have been conveyed into Books specially kept for this purpose, and which will be of great importance to refer to in the future. The question of overcrowding, ventilation, and proper sanitary accommodation has been thoroughly enquired into. I must refer to a full Report given in the Surveyor's Annual Report for 1911.

In 140 houses, repairs found necessary have been carried out.

In 55 other houses repairs are in hand.

No repairs were required to 4 houses.

Two houses were closed by order of the Council, and 19 houses were or are being demolished by the owners.

I am pleased to report that considerable improvement Sewage Farm has taken place at the Sewage Farm. A detailed account will be found in the Surveyor's Report.

The streets have been kept in a clean and sanitary condition. Practically all ashpits are now emptied during the night, and as stated above, ashbins are now gradually being substituted for ashpits under the Housing Act.

The house refuse is still being deposited at the Sewage Farm, and as this increases from year to year, and as the land available at the Farm is being rapidly filled up, the question of having an up-to-date Destructor will, in the future, have to be seriously thought of.

The number of Factories on the Register at the end of 1911 was 38, and the number of workshops and workplaces 50. Your Surveyor and myself have made periodic visits to the Factories and Workshops in the town, and no important defects were met with.

All infectious cases notified have been as far as possible visited by myself, or the Surveyor and Sanitary Inspector, and in all cases where insanitary defects have been discovered, these were quickly remedied. No out-work was allowed in houses where infectious disease had taken place till the premises had been satisfactorily disinfected.

All infected houses have been disinfected by the Council, and in many instances where more cases than one took place in the same house, at different times, that house was disinfected on each occasion.

All necessary disinfectants have been supplied to houses where infectious diseases took place on request.

There are still the same number of bakehouses on the Register, namely, 16, and these have been inspected twice during the year.

All repairs which were ordered to be carried out by the Council after a special report on their condition had been made by the Surveyor and myself, have now been carried out, and they are at present in a satisfactory condition.

I have again visited all the Dairies in the district, but there are now no cowsheds situate in the town.

The Dairies, Cowsheds, and Milkshops Order was adopted during the year by the Council.

All milksellers and cowkeepers are now registered, and inspection of all these premises will be made, and a report of the same presented to the Council.

Lodging
House

The Lodging House known as the "Jolly Bacchus" has been visited, and found to be kept in a satisfactory manner. The same tenant has during the past year been granted a licence for the old "Blue Bell Inn" to be used as a Lodging House, after certain structural alterations had been carried out to the satisfaction of the Surveyor.

One person was convicted during the year for keeping an unregistered house.

Slaughter
Houses

Frequent visits have been made to the various slaughter-houses in the district, and all defects discovered as far as possible have been remedied. A report will shortly be presented in connection with a suggested Abbatoir for the town.

Many inspections of food have been made from time to time, and one conviction was obtained against a man for selling fish in the Market Place that was unfit for human consumption.

I append the usual tables which have undergone considerable modifications, as required by the Local Government Board, and beg to remain,

Gentlemen,

Your obedient servant,

ARTHUR W. JENKINS,

M.B., B.S., L.R.C.P., LOND.

M.R.C.S., ENG.,

Medical Officer of Health.

January, 1912.

TABLE I.—HINCKLEY URBAN DISTRICT

YEAR.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
	Uncorrected Number.	Nett.		No.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 yr.		At all ages.	
		No.	Rate.					No.	Rate per 1000 Births	No.	Rate.
1906	321		26.7	202	16.8	12		62	193.1	190	15.8
1907	345		28.7	169	14.08	9	1	48	139.8	161	13.4
1908	341		28.4	191	15.9	9	2	63	184.7	184	15.3
1909	335		27.6	190	15.7	10	3	49	146.2	183	15.1
1910	320		26.2	181	14.8	6	8	46	143.7	183	15
1911	314	315	24.4	186	14.4	6	5	41	130.5	185	14.3

Area of District in acres [exclusive of area covered by water], 3729. Total population at all ages, 12838; number of inhabited houses, 2873; average number of persons per house, 4.4 [at Census of 1911].

TABLE II.—CASES OF INFECTIOUS DISEASE NOTIFIED IN 1911.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.								Total Cases re- moved to Hospital.
	At all Ages	At Ages—Years.							
		Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and Up- wards.	
Small-pox									
Cholera... ..									
Diphtheria (including Membranous Croup)	5		1	3	1				1
Erysipelas	13				1	5	5	2	
Scarlet Fever	429	1	123	246	44	15			139
Typhus Fever									
Enteric Fever	17		2	4	3	6	2		
Relapsing Fever									
Continued Fever									
Puerperal Fever									
Plague									
Phthisis—									
Under Tuberculosis Regulations, 1908	8				2	5	1		
Under Tuberculosis Regulations, 1911	5				1	1	3		
Voluntary... ..	15		1	1	7	5	1		
Totals	492	1	127	254	59	37	12	2	140

Hinckley Isolation Hospital, in Barwell Parish, near Hinckley, for the Hinckley Urban and Rural Districts.

Total available beds, 24. Number of Diseases that can be concurrently treated, 2.

TABLE III.—CAUSES OF, AND AGES AT, DEATH DURING 1911.

CAUSES OF DEATH	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.									Total Deaths whether Residents or Non-Residents in Institutions in the District.
	All Ages	Under 1 year	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards	
Enteric Fever ...	2			1		1				
Small Pox ...										
Measles ...	4		1	2	1					
Scarlet Fever ...	11			6	4	1				
Whooping Cough ...	1	1								
Diphtheria & Croup	2			2						
Influenza ...	5						2		3	1
Erysipelas ...										
Cerebro-Spinal Fever										
Phthisis (Pulmonary Tuberculosis) ...	11					6	4	1		2
Tuberculous Meningitis ...										
Other Tuberculous Diseases ...	3			1		1		1		
Rheumatic Fever ...	1				1					
Cancer, malignant disease ...	8					1	2	4	1	1
Bronchitis ...	7	1	1				1	1	3	1
Broncho-Pneumonia	2		2							
Pneumonia (all other forms) ...	2						1	1		
Asthma ...	3							2	1	1
Diarrhoea and Enteritis ...	19	14	3	1	1					
Appendicitis and Typhlitis ...	1					1				1
Alcoholism ...										
Cirrhosis of Liver ...	2							2		
Nephritis & Bright's Disease ...	2	1							1	
Puerperal Fever ...										
Diseases of Pregnancy and Parturition...										
Congenital Debility & Malformation, including Premature Birth ...	22	20	1	1						
Violent Deaths, excluding Suicide...	5	1	2	1				1		2
Suicides ...	1								1	
Heart Disease ...	19				2	1	2	7	7	6
Cerebral Disease ...	12						1	5	6	4
Other Defined Diseases ...	40	3	4		1			4	28	2
All causes ...	185	41	14	15	10	12	13	29	51	21

TABLE IV—INFANT MORTALITY DURING 1911.

CAUSE OF DEATH.			Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under One Year.
All causes	Certified	Uncertified.	4			2	6	11	12	8	4	41
Small-pox	..	..										
Chicken-pox	..	..										
Measles	..	..										
Scarlet fever	..	..										
Diphtheria and Croup	..	..										
Whooping-cough	..	..								1		1
Diarrhœa	..	..							3	6	2	11
Enteritis	..	..						1	2			3
Tuberculous Meningitis	..	..										
Abdominal Tuberculosis	..	..										
Other Tuberculous Diseases	..	..										
Congenital Malformations	..	..										
Premature birth	..	..	3				3	1				4
Atrophy, Debility and Marasmus	..	..	1			2	3	6	5	1	1	16
Atelectasis	..	..										
Injury at birth	..	..										
Erysipelas	..	..										
Syphilis	..	..										
Rickets	..	..										
Meningitis (<i>not Tuberculous</i>)	..	..										
Convulsions	..	..						1	1		1	3
Gastritis	..	..										
Laryngitis	..	..										
Bronchitis	..	..						1				1
Pneumonia (all forms)	..	..										
Suffocation, overlying	..	..						1				1
Other causes	..	..							1			1
Total	..	..	4			2	6	11	12	8	4	41

Nett Births in the Year—Legitimate, 306; Illegitimate, 9. Nett deaths in the Year of—
 Legitimate infants 40; Illegitimate infants, 1.

Factories, Workshops, Workplaces and Homework.

I.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions
FACTORIES number, 38 (including Factory Laundries) WORKSHOPS number, 50 (including Workshop Laundries) WORKPLACES (Bakehouses) number, 16 (other than Outworkers' premises included in Part 3 of this Report) Total ... 104	Two complete inspections of the whole of the factories, Workshops and Workplaces.	Nil.	No important defects were discovered and the owner's attention were called to minor defects which were remedied.

2.—DEFECTS FOUND.

Particulars	Number of Defects.			Number of Prosecutions.
	Found	Remedied	Referred to H.M. Insp'ctor	
<i>Nuisances under the Public Health Acts:</i>	The whole of the Factories and Workshops are now limewashed twice a year and any other suggestions made by the Inspector carried out. The ventilation was uniformly found good. All Factories etc, are now well supplied with sufficient closet accommodation.			
Want of Cleanliness				
Want of Ventilation				
Overcrowding				
Want of Drainage of Floors				
Other Nuisances				
Sanitary Accommodation { insufficient unsuitable or defective not separate for sexes				
<i>Offences under the Factory and Workshop Act:</i>	All Bakehouses have been inspected and various repairs were ordered to be done and were executed. There are no underground bakehouses in the town.			
Illegal occupation of underground bakehouse (s. 101)				
Breach of special sanitary requirements for bakehouses (ss. 97 to 100)				
Other offences (excluding offences relating to outwork which are included in Part 3 of this Report)...				

3.—HOME WORK.

Nature of Work.	Outworkers' Lists, Section 107.						Outwork in Unwholesome Premises, Section 108.			Outwork in Infected Premises, Sections 109, 110.
	Lists received from Employers.			Notices served on Occupiers as to keeping or sending lists.	Prosecutions.		Instances.	Notices served.	Prosecutions	
	Sending twice in the year.				Failing to keep or permit inspection of lists.	Failing to send lists.				
	Lists	Outworkers								
		Con- t'act'rs	Work- men.							
Wearing apparel :—										
(1) making, etc....	22	21	236	nil.	nil.	nil.	nil.	nil.	nil.	
(2) cleaning and washing										

4.—REGISTERED WORKSHOPS.

				Number.
Workshops on the Register (S. 131) at the end of the year.				
Important classes of Workshops, such as Workshop, Bakehouses, may be enumerated here.	}	Factories	38	
		Workshops and Workplaces	50	
		Bakehouses	16	
Total			104	
5.—OTHER MATTERS.				
Matters notified to H.M. Inspectors of Factories:—				
Failure to affix Abstract of the Factory and Workshop Acts (S. 133)			nil	
Action taken in matters referred by H.M. Inspector as remedi- able under the Public Health Acts, but not under the Fac- tory and Workshop Acts (S. 5)	{	Notified by H.M. Inspector ...	2	
		Reports (of action taken) sent to H.M. Inspector ...	2	
Other			nil	
Underground Bakehouses (S. 101):—				
Certificates granted during the year			nil	
In use at the end of the year			nil	

