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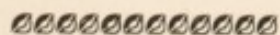
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Borough of Ilkeston.



Annual Report

on the


Health of the Borough

For the Year 1919,

By

John A. Watt, M.B., Ch.B., D.P.H. (Aberdeen),

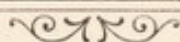
**Medical Officer of Health and
Medical Superintendent of the
Isolation Hospital.**



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Borough of Ilkeston.



HEALTH COMMITTEE.

Alderman E. Smith (Mayor).

Councillor Prior (Chairman).

Alderman Henshaw	Councillor Cutts.
Alderman Shakspeare.	Councillor Hodgett.
Alderman Shaw.	Councillor Marriott.
Councillor W. Smith.	Councillor Middleton.
Councillor Woolley.	Councillor Millard.

MATERNITY & CHILD WELFARE COMMITTEE.

The Mayor.	Councillor Midgley.
Councillor Woolliscroft.	Councillor Woolley.
Alderman Shaw.	Mrs. McIntyre.
Councillor Cutts.	Mrs. Goodchild.
Councillor Levers.	Mrs. Fraser.
Councillor Marriott (Chairman).	Mrs. Levers.
Councillor Prior.	Mrs. Millard.

HOUSING COMMITTEE.

The Mayor.	Councillor Levers.
Alderman Henshaw.	Councillor Macdonald.
Alderman Moss.	Councillor Manners.
Alderman Shakspeare.	Councillor Midgley.
Councillor Fraser (Chairman).	Councillor Millard.
Councillor Henshaw.	Councillor W. Smith.

PUBLIC HEALTH STAFF.

Medical Officer of Health and Superintendent of the Isolation Hospital.

JOHN A. WATT, M.B., CH.B., D.P.H. (Aberdeen).

Obstetric Physician to Maternity Hospital and Medical Officer to Central Infant Welfare Centre.

ARTHUR DOBSON, M.R.C.S., L.R.C.P.

Medical Officer of Cotmanhay Infant Welfare Centre.

W. H. ROACHE, M.R.C.S., L.R.C.P.

Sanitary Inspector.

JOSEPH B. DURO, C.R.S.I.

Health Visitors and School Nurse.

Miss M. E. SHERLOCK, C.M.B.

Miss E. HALLAM, C.M.B.

Mrs. M. A. SHAKSPEARE, C.M.B. (part time).

Mrs. E. M. BARRETT, C.M.B. (part time).

Matron Isolation Hospital.

Miss A. M. JOHNSON.

Matron of Maternity and Children's Hospital.

Miss A. HOPWOOD, A.R.R.C., C.M.B.

Tuberculosis Nurse.

Mrs. BRENNAN, C.M.B. (appointed by Derbyshire County Council).

Clerks.

Miss M. MARTIN.

Miss E. SISSON.

*To the Minister of Health, The Mayor, Chairman and Members
of the Health Committee, Maternity and Child Welfare
Committee and Housing Committee, of the Borough of
Ilkeston.*

HEALTH OFFICE,

TOWN HALL,

15th July, 1920.

Ladies and Gentlemen,

I have the honour to submit to you my Annual Report on the Health and sanitary administration of the Borough for the year 1919, including separate parts dealing with Maternity and Child Welfare, and Housing.

In response to a vigorous public demand, the Ministry of Health was at last established to unify and co-ordinate the Public Health and Medical Services of the State. The Ministry has been given extensive powers to promote the health of the people and to guide all health activities to a single end. This includes the prevention and cure of disease, treatment of physical and mental defects, treatment and cure of the blind, initiation of research, publication of information on health matters, and the training of persons for health services. There have been transferred to the Ministry the powers and duties of the Local Government Board, the Insurance Commissioners, the Board of Education as regards the Medical Inspection and treatment of school children under the Education Acts, the powers of the Privy Council, and of the Lord President under the Midwives Acts, and those of the Secretary of State under part 1 of the Children Act, 1908. There may be further transferred to the Ministry by Order in Council the duties of the Ministry of Pensions with regard to the health of pensioners and dependents, and those of the Secretary of State under laws dealing with lunacy and mental deficiency.

While the central medical administration has been co-ordinated, nothing has yet been done in the sphere of Local Authorities, though here it is that the recognition and treatment of disease is carried out. The problem of the area or unit of health administration is in pressing need of solution. It is keenly felt in a Borough like Ilkeston, where almost all its industries are carried on just outside the Borough boundary. The workmen employed in these industries receive communal services, such as water supply, drainage, scavenging, and lighting. They are housed and their children educated in the Borough, and yet the industries contribute nothing to the privileges enjoyed by their workmen. The Ministry of Health aims at providing specialist medical services for the whole community, but this cannot be done efficiently unless larger areas of health administration are formed and a sufficient population embraced in the authority.

The birth rate, which has been falling steadily for many years, took a leap upwards in October, 1919, and for the last three months of the year was equal to a rate of 30 per 1000. In the first six months of 1920 it equalled a rate of 33 per 1000—a rate which has not been reached since 1910.

The crude death rate was 11.1 per 1,000, and the corrected death rate 12.4 per 1,000. This is one of the lowest rates we have ever had, and would have been still lower if there had not been a recrudescence of Influenza and an excessive prevalence of Pneumonia and Bronchitis in the first few months of the year.

The housing scheme makes slow progress. Nothing has been done to make up the war shortage, or even provide for the natural increase of population in 1919. I have revised my estimate of the housing needs of the borough, and believe that 600 houses are required to make up the present shortage.

Overcrowding, with all its serious moral and physical effects on life and health, is now an ever-growing menace to the community, and especially to young life. Preparations ought to be put in hand at once for the erection of 300 dwellings during 1921.

The Municipal Maternity Hospital, opened in July, has been an unqualified success, and the admissions continue to increase. The war has taught us that if we desire to have a healthy race of men and women, we must take more care of the expectant mother and her infant, and later the school child. A second infant welfare centre has been commenced in Cotmanhay, and the work is growing rapidly.

The public health requirements, in their order of urgency, are :—

1. Scheme for the erection of 300 additional houses.
2. A permanent Isolation Hospital.
3. Speedy conversion of privies and pail closets.
4. Refuse Destructor.

I am, Ladies and Gentlemen,

Your obedient servant,

JOHN A. WATT.

SUMMARY OF STATISTICS, 1919.

Area of Borough, 2526 acres.
 Altitude—highest, 332 feet ; lowest, 130 feet.
 Population—Census for 1911—31,657.
 Estimated population, 31st Dec., 1919—33,000.
 Rateable Value, £91,568.
 Number of persons per acre at Census 1911, 12.5.
 Number of houses erected during 1919, nil.
 Birth Rate, 22.6.
 Crude Death Rate, 11.1.
 Corrected Death Rate, 12.4.
 Infant Mortality Rate, 129.9.
 Zymotic Death Rate, .2.
 Tuberculosis Death Rate, .8.
 Cancer Death Rate, .5.
 Diarrhoea Death Rate, .15.

ENGLAND AND WALES.

Birth Rate, Death Rate, and Infantile Mortality during the year 1919 (provisional figures), compared with Ilkeston.

	Annual Rate per 1000 Civilian Population.		Deaths under 1 year to 1000 Births.
	BIRTHS.	DEATHS.	
England and Wales	18.5	13.8	89
96 great towns (including London)	19.0	13.8	93
148 smaller towns	18.3	12.6	90
London	18.3	13.4	85
Ilkeston	22.6	12.4	129.9

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

The area of the Borough and Township of Ilkeston is 2526 acres, 44 of which are covered by water.

The Borough is situated between the river Erewash on the east and a tributary called the Nutbrook on the west, which here run almost parallel to each other, and at an average distance of one and a-half miles. Its greatest length is about 4 miles, and its greatest breadth $1\frac{3}{4}$ miles. It is situated wholly in the County of Derbyshire, and coterminous with the parish of Ilkeston. The Erewash river is accompanied by two canals—the Erewash and Nottingham canals—and forms the boundary between the counties of Derby and Nottingham. The Nutbrook is also accompanied by a canal, and for some distance forms the western boundary of the Borough. The town is grouped along one main street, extending along a ridge of elevated ground from North to South.

The elevation of the district varies from 130 to 332 O.D. The highest point above the sea level is at the Market Place and St. Mary's Parish Church—the lowest point at the new Sewage Works at Hallam Fields.

The geological formation is clay and gravel, overlying the coal measures.

The town is an important and busy colliery centre, half its male occupied population being employed in coal mining. There is only one colliery now worked within the Borough, viz., the Manners Colliery. Outside, in neighbouring rural districts, there are the Shipley, West Hallam, Cossall, Trowell Moor, and Mapperley Collieries. The Stanton Iron Works employ a large number of men who live in the Borough, and in addition to other iron works, there are lace and hosiery factories employing mainly female labour. The main Midland line from London to Scotland runs through the eastern border of the Borough, and both the Midland Railway and the Great Northern Railway have stations in the town. The Derbyshire and Nottinghamshire Electric Power Co. run electric tramways along almost the whole length of the Borough.

HOSPITALS, DISPENSARIES AND MEDICAL INSTITUTIONS.

Isolation Hospital.

The Borough Isolation Hospital, erected in 1888, during an epidemic of Small Pox, is situated at Little Hallam. It has 18 beds, with disinfector, laundry, and mortuary, and stands on an area of about 5 acres.

School Clinic and Tuberculosis Dispensary.

A combined School Clinic and Tuberculosis Dispensary was erected by the County Council, on land belonging to the Corporation in Albert Street, and opened in 1915. The upper floor is used for the purposes of School, Dental and Infant Clinics, and consists of a waiting room, doctor's room, and dark room for eye work. The lower floor is utilised as a Tuberculosis Dispensary by the County Council for Ilkeston, Heanor, Langley Mill, Codnor, Shipley, Smalley, Mapperley, Kirk Hallam, West Hallam, and Stanton-by-Dale. The whole building serves a most useful function for the Borough and district, but is too small for the rapid growth of public medical work.

Maternity and Children's Hospital.

The Corporation acquired "Parkhyrst," Park Avenue, for the purpose of a Maternity and Children's Hospital. It was opened for the reception of patients in July, 1919, and is already proving itself too small for the purpose.

General Hospital.

The Ilkeston Hospital⁷ consisted until recently of an accident Hospital of 30 beds. A scheme of enlargement has been carried out, whereby other 20 beds will be added, and the intention is to admit medical cases as well as surgical, and develop an out-patient department. Recently an X-ray

apparatus has been given to the Hospital by the St. John's Ambulance Association.

Nursing Associations.

There are two Nursing Associations in the Borough, viz., the Ilkeston Nursing Association and the Shipley and Cotmanhay Nursing Association. The first maintains two nurses, and the second one nurse. The Corporation have recently recognised their value to the town by subsidizing them to help in the nursing of cases of Influenza, Pneumonia, and epidemics of Measles, and other diseases.

Home for Delicate Children.

A voluntary Association maintains a home for delicate poor children at Bonsall, Matlock Bath. During 1919, 168 delicate children received the benefit of one week's residence and care at this home. The children sent were selected by the Chief School Nurse from such ailing children as attend the School Clinics.

Venereal Diseases.

The County Council, who is the authority responsible for dealing with Venereal Diseases, have made no progress with the proposal to start a Clinic for Venereal Diseases in Ilkeston for the district of the Erewash Valley.

A large number of persons, both adults and children, are treated in Hospitals and Institutions in Derby and Nottingham.

Poor Law Relief.

For Poor Law purposes the Borough is under the Basford Union, and the amount expended in Poor Law relief was £1640 17s. 6d.

VITAL STATISTICS.

Population in the Middle of 1919.

Two estimates of population have been supplied from the Registrar General at Somerset House. The Death rate population is given at 31318, and the Birth rate population as 32623. The former figure is the estimated civilian population of the district, and has been used for the calculation of the death rates in this report. It excludes all non-civilian males, whether serving at home or abroad. The birth rate population includes all the elements of the population contributing to the birth and marriage rates, and consists therefore of the civilian population, plus all soldiers, whether serving at home or abroad.

Births.

The Births registered during the year numbered 739, compared with 708 in 1918, equal to a birth rate of 22.6 per 1000 of the population.

	Males.	Females.	Total.
Legitimate	360	327	687
Illegitimate	25	27	52
	<hr/> 385	<hr/> 354	<hr/> 739

The percentage of illegitimate births to the total births was 7.03%.

The birth rate is considerably higher than the birth rate of England and Wales as a whole or the larger or smaller towns of the country.

The births notified under the Notification of Births Act numbered 777, which exceeds the actual births registered, owing to still births, and the period of 6 weeks allowed for registration.

The still births notified under the same Act numbered 27, or 3.4 % of the total.

Marriages.

The number of marriages recorded during 1919 was 148, as compared with 226 in 1918, 212 in 1917, 220 in 1916, 480 in 1915, and 277 in 1914.

Deaths.

The number of deaths belonging to the Borough was 348, equal to a rate of 11.1 per 1,000 living. 41 deaths occurred outside the Borough of Ilkeston, people chiefly in Institutions, making the corrected death rate 12.4 per 1,000 of the population.

Deaths registered in the Borough	348
Died outside district :	
Nottingham—General Hospital	5
Bagthorpe Infirmary	1
Basford Workhouse Infirmary	19
Mickleover County Asylum	8
Derby Royal Infirmary	1
Derby Children's Hospital	1
Penmore Isolation Hospital	1
Shipley Hospital	1
Cossall Colliery	1
West Hallam	1
Other districts	2
	<hr/>
	389

Deaths Grouped.

	Deaths.	Per Cent.
Infant Period—under 1 year	96	24.9
Under School Age—1-5 years	46	11.9
School Age—5-15 years	18	4.8
Adolescent—15-25 years	13	3.3
Early Mature Period—25-45 years	47	11.5
Late Mature Period—45-65 years	65	16.9
Post Mature Period—65 years and upwards ..	104	26.7

Inquests Grouped.

Coroners' inquests were held on the deaths of 17 residents.

Zymotic Death Rate.

The deaths from the seven common epidemic diseases were 8, which gives a zymotic death rate .2 per 1,000.

	Deaths.	Death rate per 1,000.
Diphtheria	1	.03
Measles	1	.03
Whooping Cough.....	3	.09
Diarrhœa and Enteritis	3	.09
	<hr/> 8	<hr/> .2

Tuberculosis Death Rate.

The deaths from Pulmonary Tuberculosis numbered 21, giving a death rate of .6 per 1,000. Other tuberculous diseases caused 5 deaths, giving a death rate of .8 per 1,000 for all tuberculous diseases.

Infant Mortality.

There were 96 deaths of infants under the age of one year, equal to a rate of 129.9 per 1,000 children born, as compared with 94.6 for 1918. Among the infant deaths were 6 illegitimate children from a total of 52 illegitimate births, giving a death rate of 115 per 1,000. This subject is referred to again under Maternity and Child Welfare.

TABLE I.—**Vital Statistics of Whole District during 1919 and Previous Years.**

YEAR.	Population estimated to Middle of each year.	BIRTHS.			TOTAL DEATHS REGIS- TERED IN DISTRICT.		Of Non-Residents, reg. in District, TRANSFERABLE Of Residents not registered in the District.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Uncorrected No.	Nett.		No.	Rate.			Under 1 Year of Age.		At all Ages.	
			No.	Rate.					No.	Rate per 1,000 Nett Births.	No.	Rate.
1910	32800	1122	1122	33.7	386	11.5	-	24	149	132.8	410	12.3
1911	31673	1034	1034	32.6	445	14.1	-	44	157	151.8	489	15.4
1912	32400	955	955	29.4	354	10.9	-	26	102	106.8	380	11.7
1913	32600	943	946	29.0	416	12.7	2	38	146	152.9	454	13.0
1914	32600	882	883	27.0	442	13.5	-	55	132	149.4	497	15.2
1915	30859	911	919	29.7	423	13.7	-	37	131	142.5	460	14.9
1916	30859	802	802	25.9	366	11.8	5	39	82	102.2	400	12.3
1917	30000	733	733	23.7	330	10.6	3	43	95	129.6	370	11.9
1918	30000	708	708	21.6	435	14.5	3	52	67	94.6	484	16.5
1919		739	739	22.6	348	11.1	-	41	96	129.9	389	12.4

At
Census
1911

{ Area of district in acres, 2526.
Total population at all ages, 31657.
Number of inhabited houses, 6,587.
Average number of persons per house, 4.8.

TABLE II.—**Cases of Infectious Disease Notified during the Year 1919.**

NOTIFIABLE DISEASE.	At all Ages.	CASES NOTIFIED IN WHOLE DISTRICT								Cases & remv'd upw. Hospl.
		Under 1	1 to 5	5 to 15	At Ages—Years.					
					15 to 25	25 to 45	45 to 65	65 & upw.		
Diphtheria	39	—	5	20	—	4	1	—	—	32
Scarlet Fever	26	—	2	23	—	1	—	—	—	23
Erysipelas	1	—	—	1	—	—	—	—	—	1
Ophthal. Neonatorum	13	13	—	—	—	—	—	—	—	2
Puerperal Fever	1	—	—	—	—	1	—	—	—	1
Malaria	15	—	—	—	3	11	1	—	—	—
Pneumonia	9	—	—	—	2	6	1	—	—	—
Cerebro Spinal Menin.	1	—	—	—	1	—	—	—	—	1
Measles	113	3	54	56	—	—	—	—	—	—
Dysentery	2	—	—	—	—	2	—	—	—	—
Pulmonary Tubercul.	49	—	—	11	17	12	1	1	—	—
Other forms	16	—	1	12	1	2	—	—	—	—
Totals	285	16	62	123	33	46	4	1	—	58

TABLE III.

**Causes of, and Ages at Death during the
Year 1919.**

	All ages.	Under 1 year.	1-2 years.	2-5 years.	5-15 years.	15-25 years.	25-45 years.	45-65 years.	65 & upwd.	Total.
All causes—										
Certified	382	90	24	21	18	13	47	65	104	382
Uncertified ..	7	6	—	1	—	—	—	—	—	7
Measles	1	—	1	—	—	—	—	—	—	1
Whooping Cough	4	2	1	1	—	—	—	—	—	4
Diphtheria	1	—	—	1	—	—	—	—	—	1
Influenza	30	1	4	6	3	1	4	7	5	30
Pulmonary										
Tuberculosis	21	—	—	—	—	5	14	2	—	21
Other Tub. Dis.	5	—	1	1	—	1	—	2	—	5
Malignant Dis. . .	18	—	—	—	1	—	3	5	9	18
Rheumatism ..	3	—	—	—	3	—	—	—	—	3
Meningitis	4	1	2	—	—	1	—	—	—	4
Heart Disease ..	29	—	—	—	1	1	2	10	15	29
Bronchitis	79	24	6	4	1	1	1	10	32	79
Pneumonia	38	7	7	7	3	1	7	3	3	38
Other Dis. of Res- piratory Organs	3	1	—	—	—	—	1	—	1	3
Diarrhoea and										
Enteritis	5	4	—	—	—	—	—	1	—	5
Appendicitis ..	1	—	—	—	—	1	—	—	—	1
Bright's Dis. . . .	8	—	—	—	—	1	2	5	—	8
Other Accidents and Disease of										
Pregnancy ..	3	—	—	—	—	—	3	—	—	3
Syphilis	5	2	—	—	—	—	2	—	1	5
Convulsions	8	6	1	1	—	—	—	—	—	8
Atrophy, Debility and Marasmus	14	13	1	—	—	—	—	—	—	14
Rickets	1	—	—	1	—	—	—	—	—	1
Premature Birth	33	33	—	—	—	—	—	—	—	33
Congenital Mal- formations ..	1	1	—	—	—	—	—	—	—	1
Atelectasis	1	1	—	—	—	—	—	—	—	1
Violent Deaths..	10	—	—	—	5	—	2	1	2	10
Suicides	3	—	—	—	—	—	—	1	2	3
Other Diseases..	59	—	—	—	1	—	6	18	34	59
Totals	389	96	24	22	18	13	47	65	104	389

TABLE IV.

Infant Mortality during the Year 1919.

CAUSE OF DEATH.	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 Weeks	4 Weeks to 3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 1 year
All causes—										
Certified	22	6	5	8	41	12	14	12	11	90
Uncertified ..	4	—	1	—	5	—	—	1	—	6
Whooping Cough	—	—	1	—	1	—	1	—	—	2
Meningitis	—	—	—	—	—	—	—	1	—	1
Convulsions	—	—	—	—	—	—	3	2	2	7
Bronchitis	—	—	1	1	2	4	7	5	6	24
Pneumonia	—	—	—	—	—	1	2	3	1	7
Other Diseases of										
Resp. Organs	—	—	—	—	—	—	—	—	1	1
Diarrhœa	—	—	—	—	—	1	—	—	—	1
Enteritis	—	—	—	—	—	3	—	—	—	3
Cong. Malform. .	—	—	—	—	—	—	—	1	—	1
Premature Birth	23	4	1	5	33	—	—	—	—	33
Atrophy, Debility										
and Marasmus	2	2	2	2	8	2	1	1	1	13
Congenital Syph.	—	—	1	—	1	1	—	—	—	2
Atelectasis	1	—	—	—	1	—	—	—	—	1
Totals	26	6	6	8	46	12	14	13	11	96

Births.—Legitimate 687
 Illegitimate 52

739

Deaths.—Legitimate 90
 Illegitimate 6

96

SANITARY CIRCUMSTANCES OF DISTRICT.

Water Supply.

The Corporation are owners of the Water Undertaking of the Borough. The water supplied is obtained in bulk from the Ilkeston and Heanor Water Board, under the Ilkeston and Heanor Water Act, 1901. This Act was promoted by the Corporation, in conjunction with the Urban District Council of Heanor, for the acquisition of what is known as "The Meerbrook Sough," an underground stream of water discharging into the River Derwent near Whatstandwell Bridge. The water issues from a rock tunnel, in the boring of which (150 years ago) the huge underground lake was tapped. The supply is constant, and absolutely free from all possibility of contamination.

The water of the Sough is softened by the Board from 19.9 degrees to 7.9 degrees of permanent hardness by means of the Archbutt-Deeley process, and is then pumped into a covered reservoir having a capacity of 1,400,000 gallons, situate at Chadwick Nick, at an elevation of 700 feet above O.D. From this reservoir the water gravitates into the Corporation service reservoirs, at Shipley, at an elevation of 382.5 feet above O.D., having an area of 1a. 3r. 31p., and a capacity of 1,000,000 gallons—the equivalent of one-and-a-half days' supply.

The average daily consumption of water during 1919 was :—

	Gals.
1 For domestic purposes.....	611,065
2 For trade purposes	157,175
3 For outside authorities	20,065
Total	788,305

or an average consumption per head per day for domestic purposes of 18.74 gallons, and 4.82 gallons for trade purposes.

The total consumption of water during 1918 was :—
Gals.

1	For domestic purposes	223,369,000
2	For trade purposes	57,484,000
3	For outside authorities.....	7,039,000
Total		<u>287,892,000</u>

The whole town is supplied with water from the public water supply, with the exception of one ortwoold properties in the out-lying zone of the Borough, which have shallow dry steined old wells and springs, and have been in use for generations.

The undernoted table gives a record of the rainfall taken at the Sewage Works, for 1919 :—

Rainfall.

	Total depth. Inches.	Greatest fall in 24 Hours. Inches.	Date.
January	3.28	.90	3rd
February	1.89	.57	17th
March	4.58	1.41	19th
April	1.09	.32	27th
May	1.39	.82	6th
June .....	.64	.25	12th
July	2.42	.69	19th
August	2.10	.58	28th
September	1.20	.36	22nd
October	2.15	1.00	23rd
November	1.05	1.21	16th
December	2.78	.35	28th
Total	<u>24.57</u>		

Drainage and Sewerage.

The new Sewage Disposal Works, constructed by the Corporation at a cost of £32,771, are situated at Hallam Fields, at the extreme south end of the Borough. They can deal with a daily dry weather sewage flow of 25 gallons per head, which, for a population of 30,000, equals 750,000 gallons per day. The sewage is first treated in settling tanks, and afterwards on bacterial beds worked on the percolating system, provision

also being made for passing the filtered effluent through a humus tank before its discharge into the Erewash. The site is surrounded by artificial banks, formed out of the surplus excavated material, as a protection against floods. There are four tanks, each 120 feet by 31 feet inside, with an average depth of eight feet. The rate at which the sewage reaches the tanks is regulated by a weir orifice fixed in the inlet chamber, and so designed that when the rate of discharge exceeds three times the dry weather flow, any excess will pass through the settling tank reserved for the storm water, and go direct to the river. The electric current driving the distributors is supplied by the Derby and Nottinghamshire Electric Power Co. There is an automatic control gear working the sewage distributors automatically by electricity.

The works deal with the whole sewage of the Borough, which is all purified before its discharge into the river Erewash. The sewage effluent is considered good by the County Medical Officer, and an examination on 25th Feb., 1920, gave the following result :—

Nitrogen as Nitrates and Nitrites.....	1.61
Oxygen absorbed in 4 hours at 80° F. ....	.616

Sanitary Conveniences.

The general policy of the Health Committee is to establish the water carriage system throughout the whole Borough. Conversions of privies into water closets, which were being carried through rapidly before the war began, have been resumed during 1919.

The approximate number of each type of sanitary convenience at the end of 1919 was—

1. Privy middens	259
2. Pail closets	2114
3. Water closets, about	4150

Refuse and Excrement Disposal.

The Corporation has a contract with a private contractor to remove house refuse and empty privies and pail closets. The cost for 1919 amounted to £3,500, or an average of 10s. per house. Though the work is being done rather better, it is not yet satisfactory, and a few complaints are still being lodged at the Health Office. For details of the work done, see the Sanitary Inspector's report.

Portable ashbins, with covers, are being inserted as quickly as possible.

I incorporate below the Annual Report of the Sanitary Inspector, prepared under the Local Government Board Order of 13th December, 1910 :—

CHIEF INSPECTOR OF NUISANCES' OFFICES,

TOWN HALL, ILKESTON,

February 25th, 1920.

To the Chairman and Members of the Health Committee of the Borough of Ilkeston.

Mr. Chairman and Gentlemen,

ANNUAL REPORT FOR 1919.

I have the honour to present to you my report for the year 1919, being my 17th Annual Report as your Sanitary Inspector.

In dealing with Nuisances, I have followed the usual well-established practice of procedure by issuing Preliminary Notices to the number of 143, and the work done thereon is recorded in the table "abated." Abatement is not always fulfilled with the speed one would desire, and consequently patience is very sorely tried, but by persisted persuasion and tact much is accomplished without resorting to legal proceedings. There were 25 Statutory Notices issued by your instructions, and in all cases the works completed. No legal procedure was necessary.

The number of inspections made by me during the year is as follows :—

Inspections to premises	..	..	997
Re-inspections to premises	..	..	2903
Inspections to Slaughter Houses	..	..	242
Inspections to Common Lodging-house	..	..	29
Inspections to Tripe Boiling Premises	..	..	27
Inspections to Cowsheds	..	..	31
Inspections to Bakehouses and Workshops	..	..	72
Inspections to Petrol Stores	..	..	57
Inspections to Consumptive Shelters	..	..	108
Infectious cases visited	..	..	—

Arising out of the above table of Inspections, the following defects were found :—

Defective or choked Water Closets	..	..	48
Defective or choked drains	..	..	50
Defective sink waste pipes	..	..	7
Defective spouts	..	..	20
Defective or damp walls	..	..	10
Defective yard paving	..	..	16
Defective closet pails	..	..	18
Defective or worn out ashbins	..	..	97
Dirty houses	..	..	1
Windows not made to open	..	..	6
Defects in workshops	..	..	15
Animals improperly kept	..	..	1

It is very gratifying to state that of the above summary of defects found, only three were outstanding at the end of the year.

REFUSE AND ITS REMOVAL.

The cleansing of premises throughout the Borough has been a very serious problem during 1919, and when one only views the very heavy accumulations still abounding, it is somewhat creditable to the Refuse Contractor to say the work has been very effectively overcome. In 1918 there were 23,906 loads removed, and in 1919 this amount was excelled by about 1,000 additional loads, making a total cartage of 24,900 loads removed. This excess is due principally to the very inferior quality which householders had to be content with. In the past it has been a point of complaint of the quality of the coal issued to the majority of workpeople, who, being colliers, receive what is commonly termed "colliers' coal," which, to say the least, generally contains a good allowance of unconsumable rubbish. Turning to the heavy burden placed upon the Contractor to clear all refuse accumulating around dwellings, the Local Authority were compelled to call the attention of the public especially in the matter of the storage of paper, vegetable and animal refuse, and waste food being deposited in the ashpits. In view of the universal desire for economy on the part of every individual, and on the principle that "every little helps," I once again appeal to all householders in this Borough to co-operate with the Council, and do whatever lies in their power to help reduce the cost of public services in the following matters:— You are asked to treat the ashpit and ashbin as if the same belonged to you personally; and further—

DON'T put any combustible material, such as paper, wood, tea leaves, and vegetable matter, into the bin or ashpit, but BURN the same on the fire.

DON'T put wet materials into the ashbin or ashpit.

DON'T keep the bin uncovered, or leave the ashpit door open.

DON'T set fire to the contents.

DON'T place the dustbin in a position which causes needless walking on the part of the dustmen, but place it in an accessible position at the entrance to the garden.

DON'T put garden refuse into ashpit or ashbin, but bury it in the garden.

DON'T forget that every load of refuse saved means economy in the collection and disposal.

The number of closets in existence is approximately—

Privy middens	..	..	..	..	259
Pail closets	..	..	..	..	2114

During the year 15 privies were converted into 30 water closets, and 4 pail closets turned into 4 water closets.

The work of speeding up conversions is now actively in operation, and I hope to give a very favourable report next year.

COMMON LODGING HOUSES.

There is only one registered common lodging house in the Borough, and has accommodation for 32 lodgers. The premises are well kept, and no complaints have been necessary.

SLAUGHTER HOUSES.

There are 21 Slaughter-houses in the Borough; 7 are registered and 14 licensed.

242 Inspections were made, and only in two instances was it found necessary to remind the occupier of limewashing. The premises are very well conducted, and no complaints have been received.

The following meat, &c., was confiscated as being unfit for sale, and disposed of:—5 cwts. 9 qrs. $8\frac{1}{2}$ lbs. beef, 18 lbs. corned beef, 6 lbs. tinned tongue, 68 lbs. Persian dates, $7\frac{1}{4}$ lbs. bacon.

In addition to inspections to slaughter-houses, I regularly inspected all live animals brought in by rail or road, with a view to observing whether suspicious animals were discernable.

There have been no proceedings for unsound foods.

DAIRIES, COWSHEDS, AND MILKSHOPS.

There are still 18 persons registered as Cowkeepers, and 34 persons registered to sell milk. 11 visits were paid to the cowsheds, and 120 inspections to premises where milk was sold. All the premises were in a satisfactory condition and well kept.

OFFENSIVE TRADES.

There are only two registered tripe boiler, one of which has nearly ceased to continue the business. The premises are excellently situated and well kept. No complaints have been received.

I would venture to suggest that the Public Health Act, 1907, be made operative within the Borough, and that steps be taken to declare the business of a "fish-fryer" and "chip potato frier" be scheduled as offensive trades. These places abound throughout the district, and are very smelly at time of cooking.

FACTORY AND WORKSHOPS ACTS.

Complaints received from H.M. Inspector of Factories relating to sanitation in Factories or Workshops, have been dealt with. 12 Complaints were received for the following defects:—9 for limewashing, 1 for sanitary convenience insufficient, 2 for screens required in front of w.c.'s. 72 visits were made during the year.

HOME WORK.

6 Lists were received during the year—4 in the first half comprising 63 outworkers, 2 in the second half comprising 12 outworkers. Visits were made by the Health Visitors, and where found necessary the premises were cleansed.

PETROLEUM ACTS.

16 Licenses were issued for the following:—12 for Petrol, and 6 for Carbide of Calcium. 57 visits were made, and the premises found satisfactory.

CONSUMPTIVE SHELTERS.

108 visits were made to the shelters, and where defects were found the same were remedied.

CANAL BOATS ACTS.

Copy, as forwarded to H.M. Inspector of Boats.

January 4th, 1920.

To the Chairman and Members of the Health Committee of the Borough of Ilkeston.

Gentlemen, *Annual Report, Canal Boats, 1919.*

I have the honour to submit my report upon the Canal Boats for the year 1919, in compliance with Section 3 of the Canal Boats Act, 1884, and the Regulations issued by the Ministry of Health.

The Inspection of Canal Boats is carried out by the Chief Inspector of Nuisances for this Borough, at a salary of £180 per annum.

During 1919 there were 10 Canal Boats inspected. Registered for (after cabins) 28 adults, and (fore cabin) for 3 adults. At time of inspections there were on board 12 men, 3 women, and 5 children respectively.

Of the 10 Canal Boats, 8 were in good order; the remaining two, one required painting, and the other required registered number. These two boats have complied with Notices issued.

There were no prosecutions. Two boats have been registered during 1919. There are 43 Boats upon the Register at the end of 1919.

I have the honour to be, Gentlemen,

Your obedient servant,

JOSEPH B. DURO,

Chief Inspector of Nuisances and Canal Boat Officer,
Borough of Ilkeston.

HOUSING AND TOWN PLANNING ACT, 1909.

During the year 1919 there were several instances where premises were unfit to be occupied in their present state. The Owners had an opportunity to remedy, but failed; consequently, the same were demolished, viz.:—Factory Lane, No. 6; Cotmanhay Road (Richards' Yard), Nos. 397, 1, 2, and 3. One demolition order having become operative, but owing to the war was left, the same has now been completed, and the site cleared of buildings, viz., Evans's Row, Nos. 1 to 15.

In conclusion, I beg to thank the Council for their kindness to me throughout the year, which I have greatly appreciated.

I have the honour to be, Gentlemen,

Your obedient servant,

JOSEPH B. DURO,

Inspector of Nuisances, Cert. Royal Sanitary Institute, Member
San. Insp. Association.

Schools.

The Sanitary condition of the 6 provided schools in the Borough is very good. With regard to the 3 non-provided schools, Hallam Fields School ought to be closed at the earliest possible moment. It is situated close to the Stanton Ironworks, and the noise and smoke arising from these huge works make the school difficult to conduct and injurious to the health of the children.

Trinity School requires its play-ground extended and properly drained. The condition of the private road leading to this school should be remedied without further delay.

All the public schools are supplied with water from the public supply.

It was not necessary to close any of the schools for the prevalence of infectious disease. The general action taken

in dealing with infectious diseases follows the principles laid down by the Board of Education in their "Memorandum on Closure and Exclusion from School, 1909."

Food.

MILK SUPPLY.

Most of the milk consumed in the town is produced in adjoining rural districts of the counties of Derby and Nottingham, and control is exercised by the respective County Councils.

The Milkshops, Dairies, and Cowsheds are generally in a good condition. Regulations for their control were adopted in 1907, and are enforced in the Borough.

MILK (MOTHERS AND CHILDREN) ORDER, 1918.

The Medical Officer of Health and the Medical Officers of the Infant Welfare Centres have been authorised to carry out the terms of this order, and help has been given to a few cases attending the Centres. Orders are issued for Cows' Milk or Dried Milk monthly. The amount expended for year ending 31st March, 1920, was £25 2s. 9d., and 36 orders were issued.

SALE OF FOOD AND DRUGS ACT.

This work is carried out by the Derbyshire County Council, and no figures or statistics are available.

Sanitary Administration of the District.

Your Medical Officer of Health acts also as School Medical Officer and Superintendent of the Borough Isolation Hospital. He also acts as Tuberculosis Officer to the Derbyshire County Council, and administers Tuberculosis Dispensaries at Ilkeston and Long Eaton.

Mr. Joseph B. Duro, Sanitary Inspector, is Inspector under the Canal Boats Acts and Petroleum Act. His Annual Report is incorporated with this.

Two whole time Health Visitors carry out the Notification of Births Act and the general care of child welfare, attend school and infant clinics, medical inspections of schools, and the after treatment of children showing defects.

Two part-time Health Visitors carry out work under the Notification of Births Act, each in two wards.

The County Council employ a Tuberculosis Dispensary Nurse, who visits Tuberculosis cases in the Borough and certain adjoining districts. She is also Inspector of Midwives, and gives copies of her reports to the Medical Officer of Health.

Adoptive Acts in Force in the Borough.

Public Health Acts Amendment Act, 1890—

Part II., III., IV., V., adopted by Council 7th October, 1890.
Public Health Acts Amendment Act, 1907—

Part II.

- „ III., Sections 34 to 50 inclusive.
- „ IV., Sections 52 to 66 inclusive, and Section 68.
- „ V.
- „ VI.
- „ X., Sections 92, 93, and 95.

Notification of Births Act, 1907, adopted 3rd December, 1907.
Infectious Disease (Prevention) Act, 1890.

Hospital for Infectious Diseases.

Negotiations were again resumed with the Heanor Urban District Council regarding the provision of a new joint Isolation Hospital, and a meeting took place in the Town Hall, Ilkeston, on the 15th January, 1919, of representatives of the two authorities. The County Medical Officer of Health explained the provision of Hospitals under the Isolation Hospitals Acts of 1893 and 1901, and advocated that one good Hospital for both authorities would be more efficient, and could be built and maintained more economically than separate hospitals for both authorities. Following this meeting, the Heanor Urban District Council agreed to join with Ilkeston in building a joint Isolation Hospital, and at the request of the Health Committee, I prepared a short report as under :—

REPORT BY THE MEDICAL OFFICER OF HEALTH ON THE PROVISION OF A JOINT ISOLATION HOSPITAL FOR ILKESTON AND HEANOR.

The area and population for the joint districts is given below :—

				Acreage.	Population.		
					1901.	1911.	1914.
Heanor	..	..	..	3509	16,249	19,851	21,000
Ilkeston	..	..	..	2526	25,384	31,657	33,000
				6035	41,633	51,508	54,000

Roughly speaking, the district forms a strip about eight miles long, with an average width of about two miles; its geographical centre is in Shipley Parish.

Number of Beds required.

The accommodation to be provided depends upon many factors, but the usual estimate is one bed for 1000 persons. This is not insisted on by the Local Government Board, if the buildings to be erected are placed and planned so as to admit of future extension. Recent knowledge shows that a smaller number of beds would suffice. The sanitary administrator desires not so much a large number of beds to meet the contingency of an extensive epidemic as a number sufficient for the ordinary needs of the district. It is believed that a hospital of 40 beds, with room for additional buildings, would suffice.

Buildings Required.

1. Pavilions for the treatment of the sick.
 Pavilions of 16 beds for Scarlet Fever.
 12 beds for Diphtheria.
 6 beds for Typhoid Fever.
 6 beds for observation and private cases.
2. An administrative block for the staff and stores.
3. Out offices, such as Laundry, Mortuary, Disinfecting Chamber, Ambulance shed, and possibly boiler house and engine house.
4. Attendant's house.

Cost.

An Isolation Hospital is a costly building to erect in proportion to the number of inmates, the inmates being persons seriously ill, require a comparatively large staff to attend them. The cost varies according to the value of the land, facilities for obtaining water supply, drainage, and the provision of roads. In pre war days the average cost was about £400 per bed. Under favourable circumstances, it was sometimes as low as £300 or even lower. There should be no unfavourable circumstances to make the cost high in the Ilkeston and Heanor Area. With strict economy, it might be possible build at £600 per bed, which for a 40-bedded hospital would mean £24,000.

The County Council in previous years gave a grant of £40 per head for capital expenditure. There is a good case for a revision of this figure with the altered monetary values. Assuming they double it, or even give a grant of £100 per bed, the grant given would only furnish the hospital.

If the County Council erect a pavilion for Tuberculosis on the hospital site, this would help to reduce the total cost and the administrative expenses.

The Heanor District Council have passed the following resolutions :—

That Heanor join with Ilkeston in building a Joint Isolation Hospital, subject to the following stipulations :—

1. That the Hospital be situate between Shipley Schools and Heanor boundary.
2. The Hospital to be under the joint superintendence of the Medical Officers of Health of the two districts, each to have charge of the patients from his own district.
3. The Joint Committee to be constituted of six members to be nominated by the Ilkeston Town Council, four by the Heanor Urban District Council, and three by the Derbyshire County Council from members of outside divisions. The above arrangements as between Ilkeston and Heanor being on a basis of three to two, to be subject to revision after the next census, in case of any material alteration in the population of the two districts.

The first condition means that the Hospital must be built in Shipley Parish, which is a sort of neutral country. If land could be got at a reasonable price here, and situated as near as possible to either Marlpool Station or Shipley Gate, for the convenience of relatives visiting the sick, the situation would do quite well, more especially if a drainage system existed.

The second condition that the Hospital should be under the joint superintendence of the Medical Officers of Health of the two districts would not be satisfactory. Joint superintendence is never a success, but this difficulty could be arranged by suggesting that each Medical Officer of Health should be in charge for alternate years. A hospital of 40 beds, with possibly additional pavilions for Tuberculosis, requires a good deal of careful superintendence to run it efficiently.

I recommend to the Committee that they should approve of the principle of joining with the Heanor Urban District Council in providing a joint Isolation Hospital, but that in view of the high cost of building and uncertain outlook, the scheme be not proceeded with until the time becomes more opportune; and that they agree to the principle that the Hospital be situated in Shipley Parish, provided a suitable site can be got.

I have purposely not discussed the question of representation of the Joint Isolation Hospital Committee, as this is a question purely for the Health Committee to decide.

JOHN A. WATT,

25th June, 1919.

Medical Officer of Health.

The Borough Isolation Hospital, erected in 1888, was intended as a temporary hospital for the treatment of Small Pox. It is now used for the ordinary infectious diseases, and in the event of an outbreak of Small Pox would have to be devoted solely to the treatment of Small Pox patients, unless accommodation could be found in the district at some other Small Pox Hospital.

The County Council have asked for a conference of certain local authorities in the area for the provision of a separate Small Pox Hospital, and suggest that army huts might be acquired and utilised for the purpose.

The Health Committee consented to allow children suffering from incipient or early Tuberculosis to be treated in the hospital when the wards were not required for other infectious diseases.

Miss Johnston, the Matron, considering the difficulties, continues to manage the hospital with great care and economy.

The administration of the Hospital has the confidence of the public, and there is now seldom any difficulty in getting patients removed to hospital.

The table on page 27 gives the figures since 1899.

At the beginning of 1919 there were 4 patients in the Hospital. During the year 116 patients were admitted, as shown in the following table, which gives the admissions, discharges, and the number remaining at the end of the year :—

Disease.	In Hospital on 1st January, 1919.	Admitd.	Dischrgd.	Remaining in Hospital at end of year.
Enteric Fever	3	—	3	—
Cerebro Spinal Meng. ..	—	1	—	1
Diphtheria	1	34	32	3
Scarlet Fever	—	23	19	4
Whooping Cough	—	1	1	—
Skin Diseases	—	17	17	—
Ophthalmia Neonato- rum and Mother	—	2	2	—
Phthisis	—	38	38	—
Totals	4	116	112	8

Year.	Scarlet Fever.		Diphtheria and Membranous Croup.		Enteric Fever.		Small Pox.	
	No. of cases Notified.	No. treated at Hospital.	No. of cases Notified.	No. treated at Hospital.	No. of cases Notified.	No. treated at Hospital.	No. of cases Notified.	No. treated at Hospital.
1899	27		17		77	33		
1900	142	3	17		173	32		
1901	63		15		30	14		
1902	76	1	40		19		20	
1903	55		33		29		4	1
1904	78		9		36		20	18
1905	85	1	21		31	7		
1906	18	1	29	2	35	6		
1907	48		25	1	20	6		
1908	23	5	44	3	8	2		
1909	5		74	2	7	2		
1910	20	6	39	9	7	1		
1911	36	10	51	13	5	2		
1912	22	16	28	10				
1913	28	22	42	24	3	2		
1914	58	39	67	47	2	2		
1915	127	101	72	55	11	8		
1916	24	21	33	26	2			
1917	8	7	20	16				
1918	13	13	16	12	7	7		
1919	26	23	39	34				

Infectious Diseases (Notifiable).

The total number of notifications of diseases compulsorily notifiable amounted to 285, as shown in Table II. of the Ministry of Health, and the following summary for the past ten years.

Summary of Notifications, 1910-1919.

	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919
Diphtheria	39	51	28	42	67	72	33	20	16	39
Erysipelas	4	3	2	2	6	6	2	6	2	1
Scarlet Fever	20	36	22	28	58	127	24	8	13	26
Typhus Fever	1	—	—	—	—	—	—	—	—	—
Enteric Fever	7	5	—	3	2	11	2	—	7	—
Puerperal Fever	—	4	1	1	1	1	1	1	—	1
Cerebro Spinal Menin.	—	—	—	—	—	—	—	—	—	1
Ophthalmia Neonatm.	—	—	—	—	—	4	1	3	4	13
Malaria	—	—	—	—	—	—	—	—	—	15
Dysentery	—	—	—	—	—	—	—	—	—	2
Pneumonia	—	—	—	—	—	—	—	—	—	9
Measles	—	—	—	—	—	—	44	462	38	113
Pulmon. Tuberculosis	10	21	67	62	43	42	38	50	51	49
Other forms ..	—	—	—	20	14	18	22	17	19	16
	81	120	120	158	191	281	167	567	150	285

A weekly return of all notifications of infectious disease is sent to the Ministry of Health and the County Medical Officer of Health.

An order was issued on 17th January, 1919, adding the diseases of Malaria, Dysentery, Acute Primary Pneumonia and Acute Influenzal Pneumonia, and Relapsing Fever, to the list of notifiable diseases.

The majority of the doctors notify their cases of infectious disease promptly, especially when removal to Isolation Hospital is asked. The Medical Officer of Health was obliged to report to the Health Committee that the terms of the Notification Act were not being carried out by one or two practitioners. The Town Clerk was then instructed to write a letter pointing out their obligations, and as this failed to bring about complete notification, a resolution was passed by the Health Committee that in any future case of failure to notify, proceedings would be taken in court.

There seems to be some misunderstanding about the notification of Acute Pneumonia, as only 9 cases have been notified since the order came into force.

BACTERIOLOGY.

By arrangements with the County Council, bacteriological examinations are carried out in their laboratory at Derby. A supply of outfits is kept in the Public Health Office, and practitioners are invited to make full use of these for the purpose of diagnosis.

The number of specimens examined during 1919 is given below :—

	Positive.	Negative.
Enteric Fever	—	1
Diphtheria	20	1
Phthisis	33	49
Ringworm	33	12
Wassermann test for Syphilis	7	5

SMALL POX AND VACCINATION.

There has been no Small Pox in the Borough since the epidemic of 1904.

The Vaccination Officer has kindly supplied me with the following figures regarding Vaccination for year 1919 :—

Vaccinations	..	..	142
Exemptions	....	..	367

DIPHTHERIA.

Cases 29 ; deaths, 1 ; fatality rate, 2.5.

Several severe cases of Diphtheria were admitted to Hospital, and many of these late cases developed Palatal Paralysis, and in a few cases Paralysis of the limbs. Only one death occurred, and this was in a child who was treated at home. No disease responds like Diphtheria to the early administration of serum.

ANTITOXIN.

Antitoxin is supplied by the Corporation to all practitioners, and a supply is kept both at the Health Office and the Isolation Hospital. It is quite common to have a delay

of one or two days between recognition of a suspected case and removal to Hospital. Practitioners have all been informed that any urgent cases of Diphtheria may be admitted to Hospital at any time of the day or night. Borroughs Welcome Concentrated Antitoxin has been used.

SCARLET FEVER.

26 cases—no deaths.

The type of this disease has been exceedingly mild, and at the present time it is rare to find any complications such as Rheumatism, Nephritis, or Acute Otitis.

ENTERIC FEVER.

No cases have occurred during the year.

CEREBO-SPINAL MENINGITIS.

A female patient was notified on the 8th December as suffering from Meningitis with spots. The Medical Officer of Health visited the case, and found the clinical symptoms conclusive of Cerebro-Spinal Fever. The patient was a girl aged 19 years, who had come with a sailor from Grimsby, on Monday, 24th November, and suddenly took ill on the 30th November with headache and vomiting. The head was markedly retracted, there was muscular rigidity, Kernig's sign was positive with stupor and delirium. No ocular symptoms were present. Attempts to get Cerebro-Spinal Fluid for examination were unsuccessful. The patient gradually recovered, and left the Isolation Hospital on 21st February, 1920, with no paralysis or interference with the special senses. The Medical Officer of Health of Grimsby was informed of the case.

SYPHILIS.

5 deaths.

Two of these cases were under the age of one year, and certified as Congenital Syphilis; 3 were over the age of 25, certified as Specific Myelitis; and 2 General Paralysis.

CANCER.

Cancer, which is a disease of middle and old age, caused 18 deaths, or .5 per 1000.

MEASLES, WHOOPING COUGH, DIARRHŒA, & ENTERITIS.

These are referred to under Maternity and Child Welfare.

INFLUENZA, PNEUMONIA, & BRONCHITIS.

The third wave of the pandemic of Influenza which broke out over the world in 1918 came in February and March. It was very much milder than the Autumn outbreak of 1918. The number of deaths attributed to Influenza were 31. The deaths from Influenza, Pneumonia, and Bronchitis during each month of the year are given below :—

	Influenza.	Pneumonia.	Bronchitis.
January ..	4	1	5
February ..	7	8	22
March ..	11	4	18
April ..	4	7	8
May ..	3	5	3
June ..	1	—	3
July ..	—	2	2
August ..	—	1	—
September ..	—	1	4
October ..	—	1	6
November ..	1	3	6
December ..	—	5	2
	—	—	—
	31	38	79

The high death rate from Bronchitis in the months of February and March is very noticeable, and seems excessive, considering the mildness of the early months of the year. Probably a goodly number of these were really secondary to unrecognised attacks of Influenza.

The Public Health Influenza Regulations were rescinded on the 6th May, 1919.

Pneumonic cases are visited by the Health Visitors, and where nursing assistance is required, the services of the district nurses have been utilised. With the extension of the Ilkeston Hospital it will be possible to admit a certain number of cases of Pneumonia, where the home conditions are bad.

PREVALENCE AND CONTROL OVER TUBERCULOSIS.

Notification.

By a General Order issued by the Local Government Board, Tuberculosis was recognised as an epidemic or an infectious disease, and all forms of Tuberculosis became compulsorily notifiable from the first day of February, 1913.

The notifications received during the year totalled 65, as shown below :—

	1-5 years		5-15 years		15-26 years		24-45 years		45-65 years		65 and upwds.		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Pulm. Tubercul.			4	7	10	7	12	7	1		1		28	21
Bone			4			1	2						6	1
Glands	1		4	1									5	1
Peritonitis ..			1	1									1	1
General				1										1
	1		13	10	10	8	14	7	1		1		40	25

Considerable progress has been made towards early notification of Tuberculosis, but it is still quite common to get notification in the advanced stage, or even a few days before death. A few cases were not notified at all. The advantages offered for the Bacteriological examination of sputum are not utilised by practitioners as they ought to be. In other cases persons allow themselves to get into a chronic condition of ill health before seeking medical advice and securing early treatment in a sanatorium, which is so important for the arrest of the disease.

The procedure adopted on notification is as follows :—

(a) On receipt of notification the Tuberculosis Nurse visits and makes a full report on the sanitary condition of the house and the social conditions of the family. Copies of this report are given to the Medical Officer of Health and the County Medical Officer of Health. If any sanitary defects are found, notice is served upon the owner by the local authority.

The Nurse leaves a spit bottle for the patient, and advises as to the destruction of the sputum. If not already done, a specimen of sputum is sent for examination for tubercle bacilli. If the doctor in attendance desires the case to be treated at the dispensary, the patient is asked to come for examination by the Tuberculosis Officer, who then advises suitable treatment. Cases in the early stage are sent to Walton Sanatorium, for a period of education and open air treatment. If Tuberculin is considered advisable, the patient attends the dispensary for injections, and keeps a continuous record of the temperature. Shelters are lent by the County Council where there is a suitable garden, and where the patient agrees to sleep outside.

(b) The Tuberculosis Nurse visits regularly the homes of all notified patients, whether they are at work or not. The object is to continue to stimulate the patients to keep up the open-air treatment and live as healthy and hygienic a life as possible. If this is not done, they lapse back into the old careless ways, and all the benefit derived is undone.

Special attention is paid to the open window. In many cases hopper windows have been inserted to secure the constant flushing of the rooms with fresh air.

(c) Enquiries are always made as to whether the other members of the family are in good health, and any person showing suspicious symptoms is urged to come to the dispensary for examination by the Tuberculosis Officer.

(d) The services of the Tuberculosis Officer are available for domiciliary visits; and he has consultations when desired by practitioners in attendance. Special attention is paid to discharged soldiers and sailors, who are visited regularly and given special allowances for extra food and nourishment.

(e) Proper measures of cleansing and disinfection are carried out.

Mortality.

Deaths from Pulmonary Tuberculosis during 1919 numbered 21, equal to a rate of .6 per 1,000. Other Tuberculous diseases caused 5 deaths, equal to a combined rate of .8 per 1,000 for all Tuberculous diseases.

A statement of the deaths from Tuberculosis from the year 1910 is given below :—

Year.	Pulmonary Tuberculosis.	Other Tuberculous Disease.	Total.
1910	22	24	46
1911	26	14	40
1912	18	10	28
1913	18	5	23
1914	20	13	33
1915	26	12	38
1916	19	3	22
1917	12	7	19
1918	19	8	27
1919	21	5	26

Treatment.

The provision of treatment is in the hands of the Derbyshire County Council, and the following institutions are available for persons suffering from Tuberculosis :—

1. Tuberculosis Dispensary in Ilkeston, serving the Borough and the surrounding districts in the Erewash Valley.
2. A Sanatorium of 100 beds at Walton, Chesterfield, for the treatment of early cases.
3. Hospital at Penmore, Chesterfield, for the isolation of advanced cases which cannot be satisfactorily treated at home.

During the year 1919 12 males and 12 females were admitted into Walton Sanatorium, and 6 males to Penmore Hospital, most of them remaining for a period of three months' treatment.

Ilkeston Tuberculosis After Care Committee.

Towards the end of 1917 the County Council organised the formation of a representative Care Committee, to assist persons suffering from Tuberculosis in the Borough. The Committee received recommendations from the Tuberculosis Officer to supply additional nourishment, extra clothing required on going to a Sanatorium, special appliances, and generally to help Tuberculous persons to establish themselves again in life and secure suitable employment for them. Meetings are held every month, and every case is investigated by members of the Committee deputed for the purpose. The

administrative expenses are paid by the County Council. Much good work has been performed, and a copy of the Balance Sheet for the year is given below :—

BALANCE SHEET FROM 1ST JANUARY TO 31ST DECEMBER, 1919.

<i>Receipts.</i>	£	s.	d.
Balance at Bank	25	0	10
Donations and Subscriptions—			
Nursing Association (part proceeds of Dance)	17	8	9
J. B. Lewis & Sons	5	5	0
Ilkeston Football Charity Committee	5	0	0
Mrs. Bishop	1	1	0
Concert at King's Picture House	53	19	7
Buttercup Day	41	12	0
Whist Drive and Dance	24	0	0
Collection box at Clinic	1	9	0
Bank Interest	0	10	6
	£175	6	8

<i>Payments.</i>	£	s.	d.
Accounts for invalids' food, clothing, &c.	92	2	7
Expenses Buttercup Day	12	10	7
Expenses Whist Drive	2	16	7
Balance in hand	67	16	11
	£175	6	8

Miss Martin acted as secretary, and gave valuable service to the Committee.

MATERNITY AND CHILD WELFARE.

Infantile Mortality.

The mortality among infants is stated to be a sensitive index of the sanitary condition of a town. This is partly true, but not a complete statement of the problem. However perfect the sanitation, if there is not good mother craft, there will be an excessive death rate among infants. Good mothering means attention to the physical condition of the expectant mother, and the care, management and feeding of her child. If the expectant mother fails to get proper nourishment, sufficient sleep, rest and exercise in the open air, or is harassed and worried, she is liable to have a premature weakly child, dying in the first month of life. A high Infantile Mortality rate implies, in addition to the loss of many infants, the maiming of many surviving children, and a high death rate in the next 4 years of life. The three main causes of death in infancy are :

- (1) The group of immature, premature children, and those that suffer from wasting and atrophy.
- (2) Diarrhoeal diseases.
- (3) Respiratory diseases.

If the Infantile Mortality in Ilkeston during the last 10 years be classified according to these main groups, we get a very interesting table, which shows where we have made progress and where further action is indicated.

Table of Infantile Mortality from 1909 to 1919
Grouped according to Cause of Death.

<i>Cause of Death.</i>			1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919
(1) Prematurity, Immaturity, Atrophy, Marasmus, etc.	...	...	89	60	58	57	59	56	55	48	48	28	48
(2) Diarrhoea & Enteritis & Gastritis	...	...	41	30	43	1	31	22	10	8	4	8	4
(3) Respiratory, Pneumonia, Bronchitis, etc.	...	...	44	22	13	21	25	27	34	18	24	13	32
(4) Miscellaneous.	...	...	35	37	43	23	31	27	32	8	17	18	12
Totals	...	...	209	149	157	102	146	132	131	82	93	67	96
BIRTHS	...	...	1093	1122	1034	955	946	883	919	802	733	708	734
INFANTILE MORTALITY RATES	...	...	191.2	132.8	151.8	106.8	152.9	149.4	142.5	102.3	129.6	94.6	129.9

It will be noticed that deaths from diarrhoeal diseases have been largely reduced, the average for the last 4 years being 6 deaths as against 43 in 1913 and 55 deaths in 1911. I attribute this reduction partly to the increased use of dried milk for the artificial rearing of children. Dried milk freshly prepared has been shown to be a much cleaner and purer food than cow's milk, produced and handled under unwholesome conditions. Ordinary cow's milk constitutes one of the finest media for the growth of micro-organisms, and in hot weather gets quickly contaminated and causing Infantile Diarrhoea. Other factors which have contributed to the reduction in diarrhoeal deaths have been that recent summers have been cool, and the replacement of horse transport by motor-driven vehicles has prevented accumulations of horse refuse, which is one of the main breeding places of flies.

There is a considerable reduction of deaths in the miscellaneous group, and particularly noticeable in the deaths due to Tubercular Peritonitis and Meningitis and so-called Tabes Mesenterica.

No appreciable reduction has taken place in the deaths due to immaturity, prematurity, atrophy, &c. The measure to be adopted to combat this is the development of ante-natal clinics, and increased care of the expectant mother. This is of the highest importance, along with the development of an efficient midwifery service.

Deaths from Respiratory Diseases remain as high as ever. It is lamentable to see infants in arms carried about late at night in the most inclement weather. They are very liable to Bronchitis and catarrhal infections of chest, leading on to Pneumonia and death. Only rousing of the public conscience and education will prevent this needless waste of human life.

Mortality during 1919.

The Infantile Mortality rate for 1919 was 129.9 per 1000 children born, as against 94.6 for 1918. This increased mortality was due to causes operating in the first quarter of the year, when there was a high prevalence of respiratory diseases associated with the epidemic of Influenza then existing. In the first quarter of the year there were 42 infantile deaths, of which 24 were due to Bronchitis and 7 Pneumonia. In each of the other three quarters of the year, 18 infantile deaths occurred.

This high death rate from respiratory disease was probably caused by unrecognised Influenza in children.

The Post-natal death rate, which means the deaths within the first 4 weeks of life, numbered 46, equal to a rate of 62.2 per 1000 children born. This group included 33 deaths from prematurity and 8 deaths from atrophy, debility, and marasmus. The Infantile Mortality rate averaged for each quinquennial period from 1895 is as follows —

Year.		Quinquennial average.
1895-1899	..	187.5
1900-1904	..	184.9
1905-1909	..	166.1
1910-1914	..	138.9
1915-1919	..	119.7

Health Visiting.

Miss Sherlock, Chief Health Visitor, supervises the work of the other Health Visitors, and the general arrangements for attending to the health of expectant and nursing mothers and children under 5 years of age. Miss Hallam carries out Infant Welfare work in Market and Victoria Wards. Mrs. Shakspears, C.M.B. (part time) looks after South and Old Park Wards, and Mrs. Barrett, C.M.B. (part time), Granby and North Wards.

Investigation is made into every still-birth. Still-births numbered 27 for 1919, against 31 for 1918. 19 children died within two days of birth, as against 6 children during 1918. An investigation and report is made on every infant death. There are no voluntary associations in connection with Maternity and Child Welfare work, and as the Medical Officer of Health is also School Medical Officer, co-ordination of the work of these two departments is complete.

The Chief Health Visitor is Infant Protection Officer for Basford Board of Guardians, and visits and reports to the Guardians on children who are boarded out under the Children Act, 1908.

The services of the Health Visitors have also been placed at the disposal of the Local War Pensions Committee, to visit cases of neglected children of soldiers, sailors, or airmen—dead, or still on active service.

All children who are ailing are kept under the supervision of the nursing staff until they are 5 years of age.

Notification of Births Act.

A summary of the work done by the Health Visitors is given below. The number of births notified was 777; 25% were attended by medical practitioners and 75% by midwives. All births are visited on the fourth day. The infant is weighed, and the mother receives a card with a note of the weight, and an invitation to bring the child to the Infant Welfare Centre to have the progress recorded. The second visit of the Health Visitor is usually about a month after birth, and every effort is made to induce mothers to feed their children on the breast. Special attention is given to bottle fed infants, cases of uncleanness, and illegitimacy. Insanitary conditions are reported, and action taken by the Sanitary Inspector.

Notification of Births.

Summary of Monthly Reports, 1919.

Births notified (Twins, 8)	777
Males	411
Females	366
Still Births	27
Died within two days	19
Ophthalmia Neonatorum	13
Attended by Medical Practitioners	203
Attended by Midwives only	574
Total number of visits paid	4987
Children weighed	727
Average weight	7.38 lbs.
Breast-fed at birth.....	690
Bottle-fed at birth	24
Breast and bottle-fed at birth	5
Spoon fed at birth	8
Infants attended Clinic	556
Attendance of Infants at Clinic.....	1510
Pre-natal cases visited	154
Dirty houses	7
Not visited	7

Baby Show.

A Baby Welfare Competition organised in connection with the "Daily Sketch" Baby Competition created much enthusiasm amongst some of the mothers of Ilkeston, and considering the short time in which it was arranged, the entry of 113 infants was surprisingly good. Among them were two pairs of twins and the survivor of a set of triplets. Prizes given by local ladies and gentlemen were distributed amongst 3 classes—6-9 months, 9-18 months, and 1½-3 years. Special prizes were given to ailing children who had made the greatest progress at the Infant Welfare Centre. The 14 winners in the 3 classes qualified for the next stage of the competition, which was held at Derby, and 2 Ilkeston infants were selected for the semi-final competition at Nottingham. The children, of course, were all selected from those who were regularly attending the Local Welfare Centre.

Child Welfare Centres.

The Central Clinic continues to be held in the premises of the School Clinic, in Albert Street, on Monday afternoons, from 2 to 4.30 p.m., and is under the superintendence of Miss M. E. Sherlock, Chief Health Visitor. Dr. A. Dobson attends at each session. It was felt that there was room for another infant welfare centre in the north end of the town, and a second centre was opened in March, 1920, in Bennerley Avenue Infants' School, Cotmanhay, on Thursday afternoons, from 2 to 4.30 p.m. It is in charge of Miss E. Hallam, Health Visitor, and Dr. W. H. Roache, attends twice a month.

A card system is kept of the progress of the infant from birth, and notes are made on examinations by the Medical Officer of the Centre. There is a large sale of dried milk (Glaxo and Cow & Gate), which is sold at cost price, and Virol. Voluntary help in providing tea is given by women members of the Maternity and Child Welfare Committee. A record of the attendance of the main Centre is as follows :

Month.	Attendances.	Examined by Doctor.
January	69	.. 20
February	82	.. 12
March	293	.. 15
April	121	.. 16
May	142	.. 20
June	107	.. 22
July	94	.. 27
August	63	.. 12
September	163	.. 32
October	99	.. 25
November	115	.. 25
December	162	.. 36
	<hr/> 1510	<hr/> 262

Maternity Hospital.

The Maternity Hospital was opened for the reception of patients in July, and a formal opening ceremony took place on the 24th September, when an excellent address was given by Dr. Harold Scurfield, Medical Officer of Health of Sheffield, on the aims and objects of child welfare. The Maternity and Child Welfare Committee appointed Miss Ada Hopwood, A.R.R.C., as Matron of the Hospital. Certain alterations were made to the house, electric light was introduced, internal re-decoration done, and a supply of hot water brought to each ward from a central heater. A new outside laundry was built. A sketch plan of the apportionment of the rooms is shown in this report.

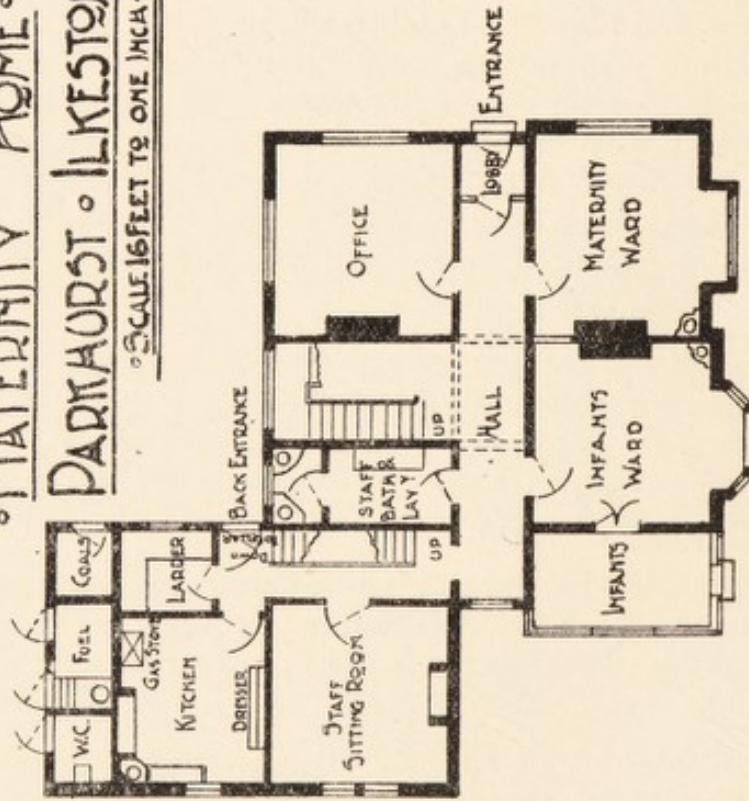
The staff consists of Matron, 3 Staff Nurses, 1 cook, 1 daily maid, 1 laundry maid. It is hoped that the Central Midwives Board will approve of the Institution as a teaching centre, and that probationers will be accepted and given their training for the C.M.B. certificate.

The fee charged for ordinary maternity cases is £2 2s. weekly, which may be remitted or reduced in necessitous circumstances. Patients from the County area pay the same fee, but the Derbyshire County Council, in addition, have paid a fee of £2 2s. for two weeks.

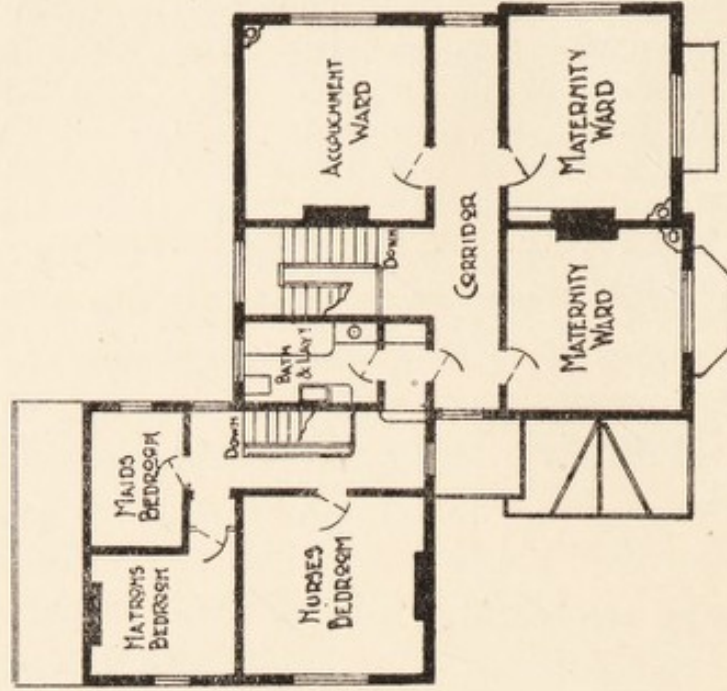
In accordance with the request of the Ministry of Health, the following return has been sent to them of admissions up

° MATERNITY HOME ° PARKHURST ° ILKESTON °

° SCALE 16 FEET TO ONE INCH °



° GROUND FLOOR PLAN °



° FIRST FLOOR PLAN °

MEASUREMENTS
 BY MISS A. J. BEECHER

to 31st March, 1920. The demand for admission has been largely due to the capable and efficient manner it has been conducted by Miss Hopwood, the Matron. The Committee were fortunate in securing the services of Dr. Arthur Dobson as Obstetric Physician, and I desire to thank the Doctor and Matron for the very excellent services they have given.

Municipal Maternity Hospital.

Returns for Year ending 31st March, 1920.

Total number of cases admitted, 44 (3 cases were re-admitted—2 false pains, 1 persistent vomiting—also 1 threatened abortion, and 1 case where baby born before arrival).

Individual cases, 39.

Average duration of stay, 2 weeks.

Number of cases delivered by midwives, 34.

„ „ „ doctors, 5.

Number of cases in which medical assistance was sought by the midwife, with reasons for requiring assistance :—

- (a) ante-natal, 1 (persistent vomiting).
- (b) during labour, 5 (1 Uterine inertia, 1 Placenta praevia, 1 Justo minor pelvis, 1 persistent occipito posterior, 1 narrow vaginal outlet—delayed second stage).
- (c) after labour, 1 (Bronchitis).
- (d) for infant, 1 (Convulsions due to injuries of head at birth).

Number of cases notified as puerperal sepsis, with result of treatment, in each case, Nil.

Number of cases in which temperature rose above 100.4 for 24 hours, with rise of pulse rate—1 case (excessive lactation), 1 case (Chronic Bronchitis).

Number of cases notified as Ophthalmia Neonatorum, with result of treatment in each case, None.

Number of cases of “inflammation of the eyes, however slight,” None.

Number of infants not entirely breast-fed while in the Institution, with the reasons why they were not breast-fed, Twins (alternate breast and bottle).

Number of maternal deaths, with causes, None.

Number of fetal deaths (stillborn or within 10 days of birth), and their causes, and the results of the post mortem examination, if obtainable, 1 (Convulsions, due to injuries of head at birth).

Midwives Act.

The administration of the Midwives Act of 1902, amended in 1918, is carried out by the Derbyshire County Council, who are the supervising authority, and your Medical Officer of Health receives copies of reports prepared by the Inspector of Midwives. At the end of 1919 there were 6 midwives practising in the Borough who held the certificate of the Central Midwives Board. In addition, there were 8 women practising as *bona fide* midwives, and of these 5 were over 60 years of age. Medical Practitioners of the town attended 204 births, or about 26%; qualified midwives and Maternity Hospital, 156 births, 20%; and unqualified midwives, 417 births, or 54%. One unqualified midwife attended 142 cases. The midwifery service of the town is far from satisfactory—more than half of the confinements are attended by women who are untrained and uneducated, and most of them too old to carry out efficiently the onerous and responsible duties which devolve upon them. Without a staff of adequately trained midwives and doctors, it is impossible to bring the necessary skill and experience to the bedside of every woman. Every woman in pregnancy should receive skilled attention, ante-natal, natal, and post-natal. It will be necessary for the Council in the near future to provide one or more fully trained midwives to reside in the Maternity Hospital, and attend women in child-birth in their own homes.

Puerperal Fever.

One case of Puerperal Fever was notified in a prim-ipara, aged 23, and the practitioner in attendance asked for a consultation with the Medical Officer of Health. Labour had been prolonged, and owing to the infant's head being deformed, cephalotriby had to be performed after delivery with forceps had failed. The manipulations required had been prolonged, and sepsis set in. This patient died on 12th January, 1920.

Accidents of Child Birth.

One death occurred from Placenta Praevia, and 2 deaths from Heart Disease following child birth.

Ophthalmia Neonatorum.

Thirteen cases were notified, of which 2 were removed to the Isolation Hospital. All these cases were immediately visited by the Health Visitors and treated with Arygrol. If the disease was slight, they were treated at home ; if they were rather more severe, they usually came to the daily Clinic for treatment with Silver Nitrate ; and if severe, removal to Hospital was advised. All completely recovered, without any loss of vision.

Measles.

Measles was introduced into the town about October, and gradually spread from the North end to the South. All school absentees were visited by the Health Visitors, and in severe cases the services of the district nurses were called for. The type of case was moderately severe, and 25 cases were referred to the district nurses. The results of good nursing in these bad measles cases was excellent. No deaths were known to have occurred.

Whooping Cough.

Whooping Cough was responsible for 4 deaths.

Diarrhoea and Enteritis.

Four deaths occurred in infants under one year old.

HOUSING.

The erection of dwelling-houses for the working classes by private enterprise came to a standstill soon after the outbreak of war. As shown in the undernoted table, only 13 houses have been erected since the end of 1914. If the large number of insanitary dwelling-houses closed during the years 1913-1914 be considered, the Borough is in the same position regarding its housing accommodation as it was at the end of 1912. The new houses erected since 1912 have been counter-balanced by the number of unfit dwellings closed.

Year.	No. of houses erected.	No. of houses closed.
1910	174	9
1911	97	1
1912	57	—
1913	77	100
1914	49	37
1915	9	4
1916	4	—
1917-1919	—	—

(i.) EXISTING HOUSING ACCOMMODATION.

Number of dwelling-houses in the district	6948
Number of working-class houses of different types :	
Houses with living room, scullery, and two bedrooms ..	350
Living room, scullery, and three bedrooms	170
Parlour, living room, scullery, and two bedrooms	1050
Parlour, living room, scullery, and three bedrooms	4500
Parlour, living room, scullery, and four bedrooms	170
Total	6240

New houses for the working class erected during year 1919 Nil.
 Population (estimated) 33000

No important changes are expected in the population in the near future. It must not be overlooked, however, that the birth rate so far for 1920 shows the large increase of 50% over 1919.

(ii.) OVERCROWDING.

Tenements with more than 2 occupants per room, according to Census of 1911 —

Number of tenements	183
Number of occupiers	1817
The percentage of dwellings overcrowded	2.82

There is no question that considerable overcrowding now exists. Many married couples and their children are living with parents because they cannot find a house. In some cases 9 or 10 persons are living in a house with two bedrooms. Overcrowding to this extent means serious injury to health. It means impure and foul air, which lowers and depresses the vitality, causing an excessive rate of sickness. Under such conditions it is impossible to separate the sexes properly. It drives the men and children out into the streets, and lowers and degrades the whole standard of family life.

The enquiry which was commenced by my staff in March, 1919, was again continued in October, and a census taken of further typical working class streets in each of the six different wards. The results are shown in the table, and the figures have been utilised as the basis of the housing scheme of the Corporation. The results show that 53 families out of a population of 9220 desire houses of their own and cannot get them. This by no means represents the full requirements, as there are many families living with their parents or others who would naturally take a house of their own if it could be got. I think one could safely add 50% to provide for young couples waiting to get married and to cover families who would naturally take a house of their own, or who ought to be compelled, owing to overcrowding, to seek another house. The census taken is large enough to give us an accurate average for the whole town. It includes different districts and all the different types of working class streets. Calculating on a population of 33,000, it represents a shortage of 190 dwelling-houses. I estimate the housing needs of the Borough at the end of June, 1920, as follows :

1. To relieve present overcrowding, 190 + 50% 285
2. To provide for the growth of population for the next three years, at 50 houses annually 150
3. To replace dwelling-houses which are unfit for human habitation and cannot be made fit 75
4. To replace houses which, though not definitely unfit for habitation, fall below a reasonable standard and are not worth the cost of improving 100

 610

Table of Enquiry into Housing Conditions.

SOUTH WARD.

	No. of houses.	Popula- tion.	Bed- rooms.	No. of families who have not house of their own & want one.
Hallam Fields Road	44	185	135	1
Kingston Avenue	53	252	162	1
Crompton Street	96	492	291	1
Belper Street	51	221	118	—
Nottingham Road	159	784	442	9
	<hr/> 403	<hr/> 1934	<hr/> 1148	<hr/> 12

OLD PARK WARD.

Brook Street	40	211	115	1
Albany Street	60	304	164	—
Roberts Street	30	133	90	1
Orchard Street	47	261	134	2
Gladstone Street	37	154	88	—
Andrew Avenue	44	187	127	3
	<hr/> 258	<hr/> 1250	<hr/> 718	<hr/> 7

VICTORIA WARD.

Albert Street	48	225	154	2
Jackson Avenue	44	203	136	1
Lord Haddon Road	88	492	252	6
	<hr/> 180	<hr/> 920	<hr/> 542	<hr/> 9

MARKET WARD.

Carr Street	49	225	125	3
Byron Street	49	204	140	—
Mill Street	89	409	239	1
Chapel Street	110	560	297	1
	<hr/> 297	<hr/> 1398	<hr/> 801	<hr/> 5

GRANBY WARD.

Awsworth Road	150	682	374	2
Lower Granby Street....	44	195	113	1
Ebenezer Street	69	334	151	—
Belvoir Street	32	166	83	—
Cambridge Cottages	6	29	17	—
Tutin Street.....	12	48	36	1
William Street.....	12	47	36	1
Alderley Cottages	5	20	10	—
Granby St. and part of Cot-				
manhay Road	85	380	243	4
	<hr/>	<hr/>	<hr/>	<hr/>
	415	1901	1063	9

NORTH WARD.

Archer Street	49	218	148	1
Wesley Street	51	243	122	1
Prince Street	66	285	166	2
Stratford Street	56	324	155	5
Ash Street	72	311	181	—
Norman Street	99	436	262	2
	<hr/>	<hr/>	<hr/>	<hr/>
	393	1817	1034	11
	<hr/>	<hr/>	<hr/>	<hr/>
Total	1946	9220	5306	53
	<hr/>	<hr/>	<hr/>	<hr/>

(iii.) FITNESS OF HOUSES.

The type of house built in recent years for the artizan class has been good. It usually consisted of a living room, kitchen, and scullery on the ground floor, with three bedrooms and bath-room upstairs.

Many dwelling-houses got badly out of repair during the war, and the cost of repairs to property is now almost prohibitive. The new Rent Act of 1920 ought to give a stimulus to good landlords, but it will take a long time before cottage property is brought to a proper standard of fitness. Apart from the dull monotony of many of the rows of artisan houses in Ilkeston, the most serious defect is the condition of the backyards. They are often common to a block of houses in open yards, not paved or asphalted, undrained, and commonly without any part laid out as a garden or plot of ground. At the back of the yard stands the out-houses, and for the

rest they are simply dirty undrained common yards. It is impossible to take any action regarding unfit houses until the new building scheme is more advanced. Two blocks, comprising 20 houses, upon which closing orders had been served in 1914, and which were standing derelict, were demolished by the owners. The houses which are unfit for human habitation, amounting to approximately 75, are clustered along the main streets of Ilkeston, and in yards in close proximity. There is a group along Cotmanhay Road and Awsworth Road, another in South Street, and a few in Nottingham Road. They are old properties, with gross structural defects, which ought to be closed at the earliest possible moment.

(iv.) UNHEALTHY AREAS.

No action has been taken and no complaints have been lodged with the Authority regarding any unhealthy areas under Part i. and Part ii. of the Housing Act, 1890.

(v.) BYE-LAWS RELATING TO HOUSES, TO HOUSES LET IN LODGINGS, AND TO TENTS, VANS, SHEDS, &c.

The building bye-laws, which are dated 1864, are antiquated. A number of vans belonging to travelling showmen come into the town for the winter months, and squat in the yards and open spaces along South Street. Notices were served on the owners of the property under the Public Health Acts, requiring them to pave or asphalt the yards and provide a sufficient water supply and closet accommodation, if they were to continue to let the land for this purpose. One owner has said he will carry out the requirements of the Corporation, and the others have agreed to discontinue letting the land for this purpose. The Corporation has Bye-laws dealing with the regulation of tents, vans, and sheds, dated 1914.

(vii.) APPENDICES, STATISTICS FOR THE 12 MONTHS ENDED 31ST DEC., 1919.

- | | |
|---|------|
| 1. Number of dwelling-houses in respect of which complaints were made that they were unfit for human habitation | nil. |
| 2. Action under Section 17 of the Housing Act, 1909.. | nil. |
| 3. Action under Section 28 of the Housing Act, 1919 .. | nil. |

4. Closing orders	nil.
5. Demolition Orders	nil.
6. Dwelling-houses demolished voluntarily	25
7. Obstructive buildings	nil.
8. Staff engaged in housing work with, briefly, duties of each officer—	

Medical Officer of Health.
Inspector of Nuisances.

Housing Scheme of the Corporation.

(1) SOUTHERN SITE.

The site selected is on the North side of Little Hallam Lane, abutting Nottingham Road and Stanton Road, extending to an area of $28\frac{1}{2}$ acres. The lay-out plan shows a new street linking up Nottingham Road and Stanton Road, and provides for 300 houses of various types. So far the Ministry have only sanctioned the erection of 50 houses. Contracts have been let to three builders, at a cost of £40,006, excluding streets. This price will be increased owing to the recent advances in the cost of labour and materials. There are to be 24 parlour and 26 non-parlour dwellings. The cost according to the original contract price is approximately £850 and £750 respectively. With the advance of prices, the probable cost will be £1000 or more. The erection of these houses is now proceeding, and the work is further on than on the Northern site. The cost of the site was £6,500.

(2) NORTHERN SITE.

The building site here is at the corner of Heanor Road and Church Street, Cotmanhay, extending to an area of $12\frac{1}{2}$ acres, and providing for 130 dwelling-houses. The Ministry of Health has sanctioned the erection of 50 houses—24 parlour and 26 non-parlour. The accommodation and approximate cost are precisely the same as the other scheme. The cost of the site was £2900.

Parlour House—Parlour, Kitchen, Scullery, Bath, 3 Bedrooms, w.c., and Coals.

Non-Parlour House—Kitchen, Scullery, 3 Bedrooms, Bath, w.c., and Coals.

BOROUGH OF ILKESTON.



ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

For Year 1919.

*To the Mayor, Chairman and Members of the Education
Committee of the Borough of Ilkeston*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit my Annual Report on the Medical Inspection and Treatment of School Children during 1919, and as desired by the Board of Education, I have incorporated a Report by the Organiser of Physical Training, and a Statement respecting the employment of children of school age.

The national system of the School Medical Service of England and Wales was instituted on the passing of the Education (Administrative Provisions) Act of 1907. It has just completed its first decennial period, and it is interesting to review the work that has been accomplished and what remains to be done.

In 1908 you appointed a lady Medical Officer to carry out the work of medical inspection and duties under the Notification of Births Act. In its earlier stages the work consisted largely of the medical inspection of groups of children in order to discover defects and disease. No facilities were provided for treatment beyond those already existing at Medical Institutions and by private medical practitioners. The erection of the School Clinic in Albert Street was the next step. When it was opened in 1915 it was possible to offer facilities for the treatment of school children, and in succession you instituted a daily clinic for the treatment of simple ailments, followed by an Eye Clinic, and finally a Dental Clinic was instituted in the early part of 1919. In addition satisfactory arrangements have been made for operations on Tonsil and Adenoid cases and for the X-Ray treatment of Ringworm. The sick, diseased and defective children of Ilkeston have now available for them skilled medical treatment on a large scale, whereby many defects are remedied and much suffering and disease prevented.

The Education Act of 1918 further extends the national system of supervision of the health of the school child and it is designed as part of the public health service of the country, and should be available for all classes. It now comprises the following functions:—

- (1) The medical inspection and treatment of the child and adolescent (5—18 years) in all grades of schools.
- (2) The sanitation of the school premises, the hygiene of education, and the control of infectious disease.
- (3) Systematic physical training.
- (4) The provision of school meals.
- (5) Special and open-air education for defective children (blind, deaf, cripple, mentally deficient, diseased and debilitated).
- (6) Supervision of juvenile employment in relation to physique.

The School Medical Service is undoubtedly a branch of Preventive Medicine, and it has shown that the health of the child is the foun-

dation of national health. Much of the disease and premature death in middle life occurs because we neglect to deal with the origin of disease in childhood, and because we fail to teach and insist upon the essential elements of health, viz., fresh air, exercise, warmth, nutrition, cleanliness and habit.

If the child be left the prey of neglected measles, rheumatism, malnutrition or dental decay, the results in adult life are inevitable—you get tuberculosis, nephritis, heart disease, anæmia, and early loss of teeth. The law of cause and effect operates inexorably.

The Local Education Authority should clearly keep in mind the steps that are necessary to secure the full value of the School Medical Service and their minimum requirements have been well put by Sir George Newman, the Chief Medical Officer of the Ministry of Health, in his outline of the practice of Preventive Medicine as follows :—

- (a) That every school child shall periodically come under direct medical and dental supervision, and if found defective shall be “ followed up.”
- (b) That every school child found ill-nourished, shall somehow or other be properly nourished, and every child found verminous shall, somehow or other be cleansed.
- (c) That for every sick, diseased or defective child, skilled medical treatment shall be available, either by the Local Education Authority or otherwise.
- (d) That every child shall be educated in a well-ventilated schoolroom or classroom, or in some form of open-air schoolroom or classroom.
- (e) That every child shall have daily organised physical exercise of appropriate character.
- (f) That no child of school age shall be employed for profit except under approved conditions.
- (g) That the school environment and the means of education shall be such as can in no case exert unfavourable or injurious influences upon the health, growth, and development of the child.

I desire to thank Mr. Beacroft, Director of Education, for his kindly co-operation in the school medical work, also Miss Sherlock, Chief School Nurse, for her untiring assistance at the various clinics, and Miss Martin, who has prepared the figures for this report.

I am,

Your obedient Servant,

JOHN A. WATT,

MB., Ch.B., D.P.H.

Town Hall,
Ilkeston,

12th April, 1920.

Annual Report of the School Medical Officer For Year 1919.

Schools and their Accommodation. There are 6 provided schools and 3 non-provided schools in the Borough, with 20 separate departments and accommodation for 5,897 scholars. The average number on the roll was 5,871, with an average attendance of 5,245, equal to 89%.

Sanitary Condition of Schools. The sanitary condition of the schools is good. Hallam Fields school owing to its situation near the Stanton Ironworks, amidst the noise and smoke arising therefrom, besides certain structural defects, cannot be considered as satisfactory. The School Mistress's house at Granby School has been converted into a Housewifery Centre. Chaucer Street School was re-decorated internally and the boiler replaced.

Medical Inspection. The scope of medical inspection consists in the examination of children of age groups known as "entrants," "intermediates," and "leavers." The total number of routine medical inspections for 1919 was "entrants" 657, "intermediates" 257, "leavers" 379, total 1,293.

Attendance of Parents. The average attendance of parents at medical inspection was 47%. It was highest in the infant departments and in the schools that were situated in the midst of a dense population.

Closure of Schools. No closure of schools was advised during the year.

The official Tables required by the Board of Education are given below :—

Table I. gives the number of children inspected at each age.

Table II. gives the return of defects found in the course of inspections and special examinations.

Table III gives the return of all exceptional children in the area.

Table IV. gives the results of treatment of defects of children.

Table V. gives the number of children examined, treatment, etc.

TREATMENT OF SCHOOL CHILDREN.

Inspection Clinic. A daily clinic is held every morning at 10 a.m., and is conducted by Miss M. E. Sherlock, Chief School Nurse. The School Medical Officer attends on Tuesday mornings at 10.30 a.m.

for the examination of school children referred to him as unable to attend school through illness or brought by parents for advice. In addition to the granting of exclusion certificates, the clinic treats verminous conditions, septic sores and injuries, diseases of the skin, simple cases of diseases of the ear, nose and throat, chest conditions. Children suffering from acute diseases are given general advice and referred to their own doctor. A register is kept of all attendances and a list given to the Attendance Officer, with the name, address, school, disease and period of exclusion. To give some idea of the scope of the work the total attendances of children treated by the school nurse was 3,378, or a daily average per school day of over 15 cases. The total attendances at the School Medical Officer's Clinic was 1,393, and the individual number of children seen was 826.

Ophthalmic Clinic. This Clinic is held as arranged at 10.30 a.m. Glasses are got from Messrs. Bruce, Green & Co., London, and sold at a little over cost price, or in necessitous cases without charge. A supply of trial frames is kept, and though it takes a little time to select a well-fitting frame for each child, it is found to be more satisfactory and less expensive to the parents, to get the glasses from a wholesale firm. The attendance and details of the Clinic are as follows :—

Cases treated	...	...	...	...	112
Refraction Cases	...	...	...	...	56
Treatment Cases	...	...	...	...	56
Glasses obtained	...	...	...	...	44
Glasses not required	...	...	...	...	19
Refused treatment	...	...	...	...	2
Cases re-examined—treatment not required					7
Cases examined and still under treatment	...	...	...	...	7
Total Attendances	...	...	...	...	344

Tonsils and Adenoids. After the opening of the Maternity and Children's Hospital in September, 1919, operations for tonsils and adenoids were performed there, and 17 cases were done. The ordinary fee was £1 1s., which was reduced to 10/6 or remitted. Operations are done by Dr. Arthur Dobson, and anæsthetics given by the School Medical Officer. Children were admitted at night to be prepared for the anæsthetic; the operation was done the following morning, and they were taken home later on in the day. Operation is advised where children are obviously suffering in health from tonsillar enlargement causing deafness, obstruction in breathing or articulation, or enlarged glands. Parents must sign a form giving their consent to the operation.

Dental Clinic. Dental Inspection and treatment for school children was commenced in November, 1918, and the County Dentist and his dressers have carried on a dental inspection or clinic every Thursday afternoon. The Clinic has been very success-

ful, and the work is developing rapidly. Of the injurious effects of bad teeth upon the general health of children there can be no question. The mouth is one of the chief sources of infection of many disease. Every child should be the possessor of a tooth brush which should be used regularly twice a day and particularly before bedtime. The work done is in accordance with the conditions laid down in paragraph 114 in the report of the Chief Medical Officer of the Board for year 1916. All children on attaining their 6th year, when the first permanent molar makes its appearance are examined by the school dentist. If they require dental treatment the parents are informed, and permission is asked that it should be carried out. Periodical inspections are subsequently made at the schools, so that from the age of six until the child leaves school free dental treatment is provided for them. The dentist in addition treats cases of dental disease which may be referred to him by the School Medical Officer. Details of the dental work is given below :—

Number of children inspected	...	...	1460
Number of children requiring treatment	...	...	853
Number of children who refused treatment...	...	...	392
Number of clinics held during 1919	...	...	37
Number of Inspections at Schools	...	...	18
Number of children treated	...	...	438
Extractions	...	...	731
Fillings	...	...	234
Dressings	...	...	417
Scalings	...	...	109
Total Attendances	...	...	527

Tuberculosis. Table III. gives the cases of Tuberculosis known to be existing amongst school children and kept under observation by the Tuberculosis Nurse of the County Council. The Health Committee of the Corporation continue to allow a ward in the Isolation Hospital to be used for the treatment of school children suffering from or threatened with Pulmonary Tuberculosis, when not required for other infectious disease. During 1919, 32 cases were admitted, and amongst these half a dozen cases were found to have tubercle bacilli in their sputum.

Deaf and Dumb Children. Two children who are deaf and dumb are being maintained by the Education Committee in the Deaf and Dumb Institution, Derby.

Physically Defective Children. The numbers of physically defective school children so far as known is given in Table III. Several cases of severe rickets have been sent to Children's Hospitals for operation, and very good results obtained. A few parents stupidly persist in refusing to have anything done to rectify severe bow legs and similar conditions. Suitable cases of Infantile Paralysis and spinal curvature receive remedial exercises by the Instructor of Physical Training.

Ringworm. Ringworm continues to give much trouble. By arrangements with the Derbyshire County Council X-Ray treatment is provided for severe cases at a charge of £1 1s. per case, now raised to 30/-. Eleven cases were treated with X-Rays, and the rest with ointment and other parasiticides. The total number of cases discovered was 36 of the scalp and 9 of the body.

Scabies. Scabies continues to be pretty prevalent amongst the school children, and during the year 72 cases were discovered—15 cases were removed to the Isolation Hospital for treatment. In severe cases if the treatment is not being carried out at home satisfactorily, hospital treatment is advised. Often 3 or 4 members of a family are infected including grown-up persons. It is a difficult disease to cure in an ordinary artisan's dwelling house, and disinfection of the body clothing and bed clothes cannot be done properly.

Cleanliness. The general standard of cleanliness remains good, and no case of body vermin was found. Monthly inspections are made by the school nurses, especially in the girls' departments. The ideal aimed at is to inspect every girl's hair once a month. Examinations made by the Chief School Nurse during the last quarter of the year upon girls' hair give the following results :—

Cases clean	...	...	49.3%
Cases with a few nits	...	...	47.5%
Cases with many nits	...	...	2.1%
Cases with vermin	...	...	1.1%

SUMMARY OF SCHOOL NURSES' WORK FOR YEAR 1919.

	<i>Nurse Sherlock.</i>	<i>Nurse Gleadell.</i>	<i>Total.</i>
Visits re School Absentees	456	231	687
Visits re Infectious Disease	169	151	320
Visits re Medical Inspection Defects	33	43	76
Visits to Schools for Medical Inspection	36	24	60
Special Visits to Schools	18	29	47
Visits to Schools for Cleanliness	96	49	145
Children examined for cleanliness	18382	11823	30205
Notices issued re Verminous Conditions	477	528	1005
Notices issued re other defects	63	23	86
Visits re inspection for Cleanliness	6	6	12
Attended School Clinics	41	2	43
Attended Ophthalmic Clinics	19	—	19
Visits re Ophthalmic Cases	18	—	18
Attended Clinic for Physical Exercises and Massage	13	—	13
Attendance of children for daily treat- ment	3378	—	3378

Feeding Centre. The Feeding Centre established in the Cookery Department of the Gladstone Street Girls' School continues to supply breakfasts and dinners to necessitous children and those suffering from insufficient nourishment. Breakfast is served at 8.15 a.m., and dinner at 12.30 p.m. The Education Committee provide free passes for the children by tram to the Centre. 94 children attended the Centre, the total number of meals given 11,357. The total cost amounted to £207 10s. 4d., equal to 4.3d. per meal.

Home for Ailing Children. A voluntary association maintains a home for delicate children at Bonsall, near Matlock. This is the only non-official organisation which does anything for schoolchildren. The Committee invite the Chief School Nurse to select ailing children from those who attend the School Clinics or may be brought under her notice. The home is situated in a beautiful spot in Derbyshire, and it is a great boon to ailing children to get a week's holiday in the uplands of Derbyshire. They are conveyed to and fro by motor 'bus. The home was opened from 9th April to 10th September, 1919. 168 children (98 girls and 70 boys) were sent—the majority of the children being from 9 to 11 years of age.

TABLE I.

NUMBER OF CHILDREN INSPECTED 1st JANUARY, 1919,
TO 31st DECEMBER, 1919.

"CODE" GROUPS.

Age.	ENTRANTS.					
	3	4	5	6	Other Ages.	Total.
Boys	2	64	168	63	6	303
Girls	—	66	184	93	11	354
Totals	2	130	352	156	17	657

Age.	Inter- mediate Group.	LEAVERS.				
		8	12	13	14	Grand Total.
Boys	111	169	24	—	193	607
Girls	85	156	29	1	186	625
Totals	196	325	53	1	379	1232

B. GROUPS OTHER THAN "CODE."

			Intermediate Group (other than 8 years).	Special Cases.	Re-examinations (i.e., No. of Children re-examined).
Boys ... ..	...	...	22	369	147
Girls ... ..	...	...	39	481	84
Totals ... ..	...	...	61	850	331

TABLE II.

RETURN OF DEFECTS FOUND IN THE COURSE OF
MEDICAL INSPECTION IN 1919.

Defect or Disease.					Code Groups.		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)
Defective Clothing or Footgear					2	—	—	—
Uncleanliness					1	—	8	—
Skin	{	Ringworm—						
		Head			13	—	23	—
		Body			1	—	8	—
		Scabies			16	—	56	—
		Impetigo			13	—	44	—
		Other Disease			3	—	50	—
Eye	{	Defective Vision & Squint ...			28	5	42	—
		External Eye Disease ...			7	—	50	—
Ear		Defective Hearing			—	2	8	1
Nose and Throat	{	Enlarged Tonsils			22	2	7	2
		Adenoids			1	1	7	—
		Enlarged Tonsils and Adenoids			1	—	5	—
Heart and Circulation.	{	Heart Disease :						
		Organic			—	67	—	6
		Functional			—	9	—	6
		Anæmia			—	5	4	—
Lungs.	{	Pulmonary Tuberculosis :						
		Definite			—	—	2	—
		Suspected			—	4	8	—
		Bronchitis			—	1	3	31
		Other Disease			—	—	1	1
Nervous System	{	Chorea			—	—	5	—
		Non-Pulmonary Tuberculosis :						
		Glands			1	—	7	—
		Bones and Joints ...			—	—	1	—
		Rickets			4	—	5	—
		Deformities			1	—	8	—
		Other Defects or Disease ...			2	—	9	191

TABLE III.

NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN
IN THE AREA IN 1919.

		Boys.	Girls.	Total.
Blind	Not at School	—	1	1
Deaf & Dumb	Attending Public Elementary Schools	1	—	1
	Attending Certified Schools for the Deaf	1	1	2
Mentally Deficient ... ..	... ..	19	18	37
Epileptics	Attending Public Elementary Schools	2	1	3
Pulmonary Tuberculosis ...	Attending Public Elementary Schools	6	17	23
Other forms of Tuberculosis ...	Attending Public Elementary Schools	14	8	22
Cripples other than Tubercular	Attending Public Elementary Schools	10	22	32
	Not at School	3	2	5

TABLE IV.—TREATMENT OF DEFECTS OF CHILDREN DURING 1919.

	No. of defects found for which Treatment was considered necessary.			No. of defects for which no report is available.	No. of defects treated.	Results of Treatment.			No. of defects not treated.	Per-centage of defects treated.
	From previous year.	New.	Total.			Remedied.	Improved.	Unchanged.		
Clothing and Footwear	—	2	2	—	2	—	2	—	—	100
Cleanliness of Head	—	9	9	—	9	—	—	—	—	100
Nose and Throat	18	43	61	—	16	16	—	—	45	26.2
External Eye Disease	—	56	56	—	56	56	—	—	—	100
Ear Disease	—	8	8	—	8	7	1	—	—	100
Heart and Circulation	—	4	4	—	4	—	4	—	—	100
Lungs	—	14	14	—	14	1	12	1	—	100
Nervous System	—	5	5	—	5	3	1	1	—	100
Skin	—	227	227	1	227	210	9	8	—	100
Rickets	—	9	9	—	4	—	2	2	5	44.4
Deformities	2	9	11	—	11	—	11	—	—	100
Tuberculosis, Non-pulmonary	—	8	8	—	8	1	5	2	—	100
Miscellaneous	2	14	16	1	13	9	2	2	2	81.2
Total	22	408	430	2	377	312	49	16	52	87.6

TABLE V.—INSPECTION, TREATMENT, &c. OF CHILDREN
DURING 1919.

(1) The total number of children medically inspected (whether Code Group, special or ailing children)...	2143
(2) The number of children in (1) suffering from defects (other than uncleanness or defective clothing or footgear) who require to be kept under obser- vation) but not referred for treatment ...	328
(3) The number of children in (1) who were referred for treatment (excluding uncleanness, defective clothing, etc.)	466
(4) The number of children in (3) who received treat- ment for one or more defects (excluding unclean- liness, defective clothing, etc.)	377

Report of Organiser of Physical Training.

1. **Supervision of School Work.** From the beginning of the year until 31st March the appointment of an Organiser of Physical Training was held by Mrs. Constance M. Walls. The post was vacant until 1st September, when Miss D. H. McNaughtan, Trained Diplomee of Dartford Physical Training College commenced her duties. Since that date all the twenty departments of the elementary schools have been visited, the drill of all classes seen, suggestions and advice offered, and demonstration lessons given.

2. **Training of Teachers.** Classes for teachers have been arranged, and these have been taken on the lines of the new syllabus, the Organiser having had a course in this syllabus, at the Scarborough Summer School. These classes have been well attended with the result that 30 women teachers have become acquainted with the methods of the new syllabus which are less formal than those of the syllabus of 1909, allow the teachers more scope for enterprise and initiative, and the children more free movement and games. Teachers who attended the course have applied the new methods to their own classes with satisfactory results.

The delay in the issue of the new syllabus has somewhat hindered progress in the work of other teachers, but now that notification has been received that copies are available it is hoped that the new methods will soon be adopted satisfactorily throughout the Borough. Simple apparatus—rope, bean bags and balls have been supplied or promised to all the schools.

3. Remedial Exercises at School Clinic. On two afternoons a week children attend the Clinic in Albert Street for remedial exercises and massage. In December nine children were attending—five girls and four boys, chiefly cases of infantile paralysis. The attendance has been good, particularly that of the boys.

The room is bright and airy, but too small to obtain much benefit from any form of activity. Improvement, though slow, is shewn in all cases.

4. Play Centre. On 10th November a Play Centre was started at the Gladstone Street Schools, and is open three evenings a week, from 5.30 to 7 o'clock. Children from the following schools have permission to attend:—

Gladstone Street	... ..	Mondays.
Kensington Roman Catholic		Wednesdays.
Chaucer Street	... ..	Thursdays.

This division was made so as to allow as many children as possible to attend, as with one centre only, it is impossible to take in all who ask to come. About 200 children attend each evening, and since it was opened in November there have been 3185 attendances.

The children are chosen by the Head Teachers of the four schools; those coming from poor homes, overcrowded surroundings or large families with no facilities for healthy play, or shy children in poor circumstances, being considered the most suitable. There is a room for painting—always crowded, a room for quiet games, *e.g.*, snakes and ladders, ludo, etc., a room for reading and sewing dolls' clothes, bags, etc., made from scraps of materials—two rooms, one for boys and one for girls, where active games, with boxing for boys and dancing for girls are taken.

There is a room for little children brought by bigger brothers and sisters, who might otherwise be prevented from coming, in which are toys, bricks, dolls and picture books. It is hoped to start a room for easy handicraft occupations.

Each room is in charge of a teacher, and the whole Centre is controlled by the Superintendent, Mr. Percy Cox, a trained certificated teacher.

The discipline is easy, and the whole scheme is intended to make the children lose sight of the fact that the building is a school and that the helpers are teachers. Visitors are welcomed.

EMPLOYMENT OF CHILDREN OF SCHOOL AGE (BOYS).

School.	Number employed	Paper Sellers.	Lather Boys.	Errand Boys.	Firewood Sellers.	Milk sellers.	Farm Workers.	Hawkers.	Asst. in Shops.	Assist. at Stalls in Market.	Miscell- aneous.
Bennerley Boys ...	25	9	3	7	—	1	3	—	2	—	—
Granby Boys ...	58	34	3	14	—	—	2	2	2	—	1
Chaucer St. Boys ...	30	15	1	10	4	—	—	—	—	—	—
Hall Croft Boys ...	41	18	4	15	—	—	—	—	—	—	1
Gladstone St. Boys ...	36	11	1	14	2	4	—	—	1	2	1
Catholic Boys ...	13	5	1	2	2	—	—	2	1	—	—
Kensington Boys ...	27	8	1	3	3	3	—	2	—	—	7
Hallam Fields Boys...	19	5	—	4	—	1	1	3	—	—	5
Totals ...	249	105	14	69	11	12	6	9	6	2	15

EMPLOYMENT OF CHILDREN OF SCHOOL AGE (GIRLS).

School.	Number employed.	Paper sellers.	Nurse girls.	Errand girls.	Domestic Helps.	Lace Workers.	Asst. in Shops.	Milk Selling.	Asst. at Stalls in Market.	Miscell- aneous.
Bennerley Girls	8	2	1	1	2	1	—	1	—	—
Granby Girls	6	5	—	—	1	—	—	—	—	—
Chaucer Street Girls	43	6	18	5	10	3	1	—	—	—
Hall Croft Girls	8	2	—	3	—	1	2	—	—	—
Gladstone Street Girls	34	6	4	14	1	1	1	1	4	2
Catholic Girls	2	—	1	—	—	—	1	—	—	—
Kensington Girls	18	1	3	1	8	1	1	2	—	1
Totals	119	22	27	24	22	7	6	4	4	3

