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BOROUGH OF ILKESTON

Annual Health

— AND —

School Medical Report

For the Year 1929

BY

H. L. BARKER

M.D. B.S.(Lond.), M.R.C.S., L.R.C.P., D.P.H.

**Medical Officer of Health, Medical Superintendent of
the Isolation Hospital, Superintendent of Maternity
Home, and School Medical Officer.**



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BOROUGH OF ILKESTON

HEALTH, MATERNITY AND CHILD WELFARE COMMITTEE.

THE MAYOR (Councillor	Councillor L. MIDGLEY.
W. LACEY).	„ J. H. MILLARD.
Councillor J. WOOLLEY (<i>Chairman</i>).	„ J. PROCTOR
Alderman ARTHUR HENSHAW.	„ J. RICHARDSON.
„ W. SHAKSPEARE.	„ J. E. SMITH.
„ S. SHAW.	„ W. SMITH.
„ E. SMITH.	Mrs. BALL.
Councillor H. E. BEARDSLEY.	„ BOSTOCK.
„ G. H. BROUGHTON.	„ BROUGHTON
„ J. HENSHAW.	„ MITCHELL.
„ E. H. HESKETT.	„ SHAW.
„ J. KIRK.	„ SHELLEY.
„ Mrs. J. B. D. McINTYRE.	„ SQUIRES.
„ S. MANNERS.	„ THORNHILL.

GENERAL WORKS AND HOUSING COMMITTEE.

THE MAYOR (Councillor	Councillor J. KIRK.
W. LACEY).	„ Mrs. J. B. D. McINTYRE.
Alderman H. MOSS (<i>Chairman</i>).	„ J. A. MACDONALD.
„ AMOS HENSHAW.	„ S. MANNERS.
„ S. SHAW.	„ J. H. MILLARD.
„ E. SMITH.	„ J. RICHARDSON.
Councillor H. E. BEARDSLEY.	„ F. G. ROBINSON.
„ G. H. BROUGHTON.	„ J. E. SMITH.
„ J. HENSHAW.	„ W. SMITH.
„ E. H. HESKETT.	„ G. W. WOOLLISCROFT.



PUBLIC HEALTH STAFF (1929).

Medical Officer of Health and Superintendent of the Isolation Hospital :

H. L. BARKER, M.D., B.S.(Lond.), M.R.C.S.,
L.R.C.P., D.P.H.—(1).

Obstetric Physician to the Maternity Home and Medical Officer to Central Welfare Centre :

ARTHUR DOBSON, M.R.C.S., L.R.C.P.—(1) (2).

Physician to Ante-Natal Clinic :

MARGARET GLEN BOTT, M.B., B.S.(Lond.), M.R.C.S., L.R.C.P.
(1) (2).

Tuberculosis Officer (appointed by Derbyshire County Council) :

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

Senior Sanitary Inspector :

JOSEPH B. DURO, C.R.S.I. (1).

Sanitary Inspector :

C. E. ADCOCK, C.R.S.I. (1).

Health Visitors and School Nurses :

Miss M. E. SHERLOCK, C.M.B., New H.V. Cert.	(1).
Miss M. A. SHAKSPEARE, C.M.B.	(1). Resigned 31/1/29
Miss H. BLAIR, C.M.B.	(1).
Miss L. OTTEWELL,, C.M.B.	(1).
Miss M. E. JACKSON, C.M.B.	(1).

Matron Isolation Hospital :

Miss A. M. JOHNSTON.

Matron, Maternity Home :

Miss L. WELLS, C.M.B.

Tuberculosis Nurse (appointed by Derbyshire County Council) :

Miss E. WEBSTER, C.M.B.

Clerks :

Miss L. TRUEMAN.

Miss H. CLARKE.

(1) = *Exchequer Grants.*

(2) = *Part-time Officers.*

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH, MATERNITY
AND CHILD WELFARE AND HOUSING COMMITTEES OF THE
BOROUGH OF ILKESTON.

TOWN HALL,
ILKESTON.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit my Annual Report on the General Health circumstances of the Borough of Ilkeston for the year 1929, in the form of an Ordinary Report.

The past year was unfortunately accompanied by considerable industrial depression, causing much unemployment in the coalfields. The unfavourable influence of this on the children was, to some extent, mitigated by the work of the local organisation of the Coalfields Distress Fund through which agency there was a distribution of boots and clothing to selected cases.

In the early months of the year the wave of Influenza brought about the death of many young children and elderly people, and had the effect of causing an increased general death rate and infantile mortality rate. The mild outbreak of Small-pox which was carried over from the previous year gave rise to only 4 cases, and ceased entirely in February.

The population has been officially estimated at 33,260, but in my opinion the census of next year will show it to be nearer 35,000.

No less than 174 new houses have been erected, but the existence of much overcrowding in the borough indicates that a great many houses are still required. The work of converting pail-closets into water-closets is now nearing completion; while the Washmeadow Clayhole no longer exists.

The Maternity Home has had a very successful year, and the applications to book beds in the Home could not all be granted owing to the pressure on the accommodation.

At the Antenatal Clinic the work is rapidly increasing. It is satisfactory to be able to record such a low maternal mortality as 1.7.

I have to thank the members of the staff of the Health Department for their continued loyal co-operation.

Finally, I beg to thank very sincerely the members of the various Committees for their constant interest and kind consideration, and especially the Chairman for his valuable help at all times.

I have the honour to remain,

Your obedient servant,

H. L. BARKER.

SECTION I.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)	..	..	..	..	..	2,526
Population :—						
Census, 1921	..	..	..	..	..	32,266
Estimated 1927	..	..	..	..	..	33,000
Estimated 1928	..	..	..	..	..	33,260
No. of Inhabited Houses (1921)	..	..	..	..	..	6,680
No. of Inhabited Houses (1928)	..	..	..	..	..	7,236
No. of families or separate occupiers (1921)	..	..	..	..	..	7,094
Rateable Value 31st March, 1928	..	..	..	..	..	£118,081
Sum represented by a penny rate	..	..	..	..	..	£455
Rates 15s. 0d. in the £						

EXTRACTS FROM VITAL STATISTICS.

Live Births.	Total.	M.	F.	Birth Rate.
Legitimate	558	284	274	} 17.59
Illegitimate	27	16	11	
	—	—	—	
	585	300	285	

The Birth Rate for England and Wales for 1928 was 16.3.

Still Births.	Total.	M.	F.
Legitimate	.. 30	.. 15	.. 15
Illegitimate	.. 1	.. 1	.. —
	—	—	—
	31	16	15

Death Rate.

Deaths.	Total.	M.	F.	Ilkeston.	Eng. & Wales.
	415	214	201	12.48	13.4

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

From Sepsis	..	..	..	..	1
From other causes	..	..	..	..	—

Maternal Mortality rate per 1,000 births .. 1.7.

Infant Mortality.

Deaths of Infants under 1 year of age per 1,000 births :—

Legitimate	..	..	..	..	77.06
Illegitimate	..	..	..	..	111.1
Total	..	..	..	..	78.63
Rate for England and Wales	..	..	..	..	74.

Specified Deaths.

Measles (all ages)	..	..	..	—
Whooping Cough (all ages)	..	..	..	13
Diarrhoea (under 2 years)	..	..	..	17

BIRTH-RATE, DEATH-RATE, and ANALYSIS OF MORTALITY

DURING THE YEAR 1929.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1929, but those for the towns have been calculated on populations estimated to the middle of 1928. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns).

	RATE PER 1,000 TOTAL POPULATION.		ANNUAL DEATH-RATE PER 1,000 POPULATION.								RATE PER 1,000 BIRTHS.		
	Live Births.	Still-births.	All Causes	Enteric Fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under Two years.	Total Deaths under one year.
England and Wales	16.3	0.68	13.4	0.01	0.00	0.08	0.02	0.15	0.08	0.74	0.55	8.1	74
107 County Boroughs and Great Towns, including London.	16.6	0.69	13.7	0.01	0.00	0.12	0.02	0.19	0.09	0.76	0.50	10.9	79
156 Smaller Towns (1921 Adjusted Populations 20,000-50,000).	16.0	0.71	12.3	0.01	0.00	0.06	0.02	0.15	0.07	0.71	0.45	5.9	69
London	15.7	0.53	13.8	0.01	0.00	0.04	0.02	0.26	0.08	0.69	0.56	10.7	70
ILKESTON	17.59	0.93	12.48	0.00	0.00	0.00	0.00	0.39	0.06	0.87	0.48	11.9	78.6

Below is given a table which analyses the causes of the 415 deaths, and the ages at which they occurred:—

CAUSES OF DEATH.	Sex	ALL AGES.	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65-75	75 up
ALL CAUSES	M.	214	21	9	14	7	12	26	50	26	49
	F.	201	24	16	13	7	11	22	44	38	26
1. Enteric Fever	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
2. Small Pox	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
3. Measles	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
4. Scarlet Fever	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	M.	3	1	1	1	—	—	—	—	—	—
	F.	10	—	7	2	1	—	—	—	—	—
6. Diphtheria	M.	—	—	—	—	—	—	—	—	—	—
	F.	2	—	—	2	—	—	—	—	—	—
7. Influenza	M.	17	—	2	3	2	—	2	7	1	—
	F.	12	1	1	—	—	—	3	6	—	1
8. Encephalitis Lethargica	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
9. Meningococcal Meningitis	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
10. Tuberculosis of Respiratory System.	M.	13	—	—	—	1	1	8	3	—	—
	F.	13	—	—	—	—	4	7	1	1	—
11. Other Tuberculous Diseases.	M.	5	—	—	3	—	1	1	—	—	—
	F.	5	2	—	—	1	—	1	1	—	—
12. Cancer, Malignant Disease	M.	18	—	—	—	—	1	2	5	6	4
	F.	20	—	—	—	—	—	—	10	7	3
13. Rheumatic Fever	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
14. Diabetes	M.	—	—	—	—	—	—	—	—	—	—
	F.	2	—	—	—	—	—	—	—	2	—
15. Cerebral Hæmorrhage, &c.	M.	8	—	—	—	—	—	—	3	2	3
	F.	10	—	—	—	—	—	—	3	5	2
16. Heart Disease	M.	27	—	—	—	—	1	3	13	3	7
	F.	24	—	—	1	1	—	3	9	8	2
17. Arterio Sclerosis	M.	8	—	—	—	—	—	—	—	2	6
	F.	8	—	—	—	—	—	—	2	4	2
18. Bronchitis	M.	19	1	1	1	—	1	2	—	6	7
	F.	7	2	—	1	—	—	1	—	3	—
19. Pneumonia (all forms) ..	M.	22	4	4	3	1	—	3	4	2	1
	F.	35	10	7	7	3	—	1	6	1	—
20. Other Respiratory Diseases.	M.	2	—	—	—	—	—	—	1	—	1
	F.	1	—	—	—	—	—	—	—	—	1
21. Ulcer of Stomach or Duodenum.	M.	3	—	—	—	—	—	—	2	1	—
	F.	1	—	—	—	—	—	1	—	—	—
22. Diarrhœa, &c. (under 2 years).	M.	6	6	—	—	—	—	—	—	—	—
	F.	1	1	—	—	—	—	—	—	—	—
23. Appendicitis and typhlitis	M.	1	—	—	—	1	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
24. Cirrhosis of Liver	M.	1	—	—	—	—	—	—	1	—	—
	F.	—	—	—	—	—	—	—	—	—	—
25. Acute & Chronic Nephritis	M.	3	—	—	—	—	1	1	—	—	1
	F.	6	—	—	—	—	—	2	2	—	2
26. Puerperal Sepsis	M.	—	—	—	—	—	—	—	—	—	—
	F.	1	—	—	—	—	1	—	—	—	—
27. Other Accidents and Diseases of Pregnancy and parturition.	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
28. Congenital Debility and Malformation, Premature Birth.	M.	8	7	1	—	—	—	—	—	—	—
	F.	6	6	—	—	—	—	—	—	—	—
29. Suicide	M.	1	—	—	—	—	—	—	1	—	—
	F.	—	—	—	—	—	—	—	—	—	—
30. Other Deaths from Violence.	M.	10	—	—	—	1	4	—	4	—	1
	F.	5	—	1	—	—	1	—	2	1	—
31. Other defined Diseases ..	M.	38	2	—	3	1	1	4	6	3	18
	F.	32	2	—	—	1	5	3	2	6	13
32. Causes ill-defined or unknown.	M.	1	—	—	—	—	1	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—

SECTION II.

GENERAL PROVISION OF HEALTH SERVICES.**Hospitals provided or subsidised by the Local Authority or the County Council.**

- (1) **FEVER.**—The Isolation Hospital is situated at Little Hallam in very healthy surroundings, and provides accommodation for 22 patients. It is a wooden structure built on a brick foundation, and was erected as a temporary building during an outbreak of Small Pox in 1888. It has continued to meet the needs of the area ever since in an efficient manner, in spite of many disadvantages. In the first place the accommodation is not sufficient to enable simultaneous epidemics of two diseases to be adequately dealt with, and in the second place the accommodation for the staff is unsatisfactory.
- (2) **SMALL POX.**—There is no separate Small Pox Hospital. Cases of Small Pox are treated at the Isolation Hospital if there are no cases of other infectious disease, otherwise they are sent to the Small Pox Hospital at Basford.
- (3) **TUBERCULOSIS.**—The treatment of Tuberculosis is undertaken by the County Council. Sanatoria are provided at Penmore and at Walton for pulmonary cases. At Bretby Hall tuberculous orthopædic cases are received.
- (4) **MATERNITY.**—The Maternity Home established by the Corporation is situated in Park Avenue and contains 9 beds for maternity cases. It is recognised by the Central Midwives Board as a training school for one pupil midwife at a time.
- (5) **CHILDREN.**—There is no children's hospital in the area. Children in need of hospital treatment are sent to the Ilkeston Hospital or to the hospitals in Nottingham and Derby.
- (6) **ORTHOPÆDIC.**—Arrangements have been made with the Derbyshire County Council for the admission of non-tuberculous orthopædic cases to the Bretby Orthopædic Hospital. This scheme will operate from the 1st April, 1930.

Institutional provision for **UNMARRIED MOTHERS, ILLEGITIMATE INFANTS** and **HOMELESS CHILDREN** is provided in the Basford Union Institution.

Ambulance Facilities.

- (a) **FOR INFECTIOUS CASES.**—A horse-drawn ambulance has been used throughout the year. But at the time of publication this has been replaced by a modern motor ambulance on a

CLINICS AND TREATMENTS CENTRES.

	SITUATION.	MEDICAL OFFICER IN ATTENDANCE.	WHEN HELD.	ACCOMMODATION.	PROVIDED BY
MATERNITY AND CHILD WELFARE CENTRES	(1) Albert Street	Dr. Dobson	Tuesdays, 2—4 p.m.	3 rooms	Ilkeston Corporation.
	(2) Cotmanhay	M.O.H.	Thursdays, 2—4 p.m.	3 rooms	do.
ANTE-NATAL CLINIC	Albert Street	Dr. Glen Bott	First three Mondays in Consultation and month 2—5 p.m.	waiting room	do.
SCHOOL CLINIC	Albert Street	M.O.H.	Daily, 10—12. M.O.H. attends Tues- days and Thursdays.	3 rooms	do.
	Albert Street	Dr. Kingston	Wednesdays, a.m. and p.m.	3 rooms	Derbyshire C.C.
TUBERCULOSIS DISPENSARY					
V.D. TREATMENT CENTRES	(1) 35 North Church St., Nottingham.	—	—	—	Nottingham C.B.C.
	(2) Derbyshire Royal Infirmary, Derby.	—	—	—	Derby C.C. and C.B.C. jointly.

Morris Commercial chassis capable of carrying two lying patients and two or three sitting patients, and fitted with a metal-lined compartment for the transport of infected bedding.

- (b) **FOR NON-INFECTIOUS DISEASE AND ACCIDENT CASES.**—A motor ambulance owned by the Derbyshire Branch of the British Red Cross Society is kept in the Corporation garage, and is readily available.

Clinics and Treatment Centres.

Particulars with regard to the various clinics are shown in tabular form. There is no Day Nursery and no Artificial Light Clinic. The accommodation at the main clinic in Albert Street is much too limited, and an extension of the clinic is urgently needed. Negotiations are now proceeding with this object in view. Arrangements for holding an orthopædic clinic have been completed, but for the proper development of this work the extension of the clinic building is necessary.

Nursing in the Home.

- (a) **GENERAL.**—Two Nursing Associations exist in the Borough, viz., the Ilkeston and the Cotmanhay Nursing Associations. The funds to support these are raised by voluntary contributions and by payments from patients. The nurses work under the directions of the local practitioners.
- (b) **INFECTIOUS DISEASES.**—The same two Associations undertake the nursing of infectious diseases such as measles and pneumonia. The Corporation subsidises the Associations to the extent of £20 a year, and in return the nurses undertake the nursing of cases referred to them by the local authority.

Midwives.

There were 12 midwives practising in the area during the year, of which 9 were certificated and 3 were *bona-fide* midwives practising previous to 1903. Midwives are neither employed nor subsidised by the Corporation for work on the district.

Registration of Maternity and Nursing Homes.

There are no registered Homes in the Borough. During the year no applications were received for the registration of any Home.

Maternal Mortality.

All cases of Puerperal Fever are investigated and assistance is offered when required. The Medical Officer of Health also investigates all cases of maternal deaths from a scientific standpoint with the assistance of the medical practitioner in charge of the case.

Legislation in force.

(1) General Adoptive Acts in force :—

Public Health Acts Amendment Act, 1890, Parts II. to V inclusive ; adopted 1890.

Infectious Diseases (Prevention) Act, 1890 ; adopted 1902.

Public Health Acts Amendment Act, 1907, Parts. II, V, VI ; III, Secs. 34 to 50 inclusive ; IV, Secs. 52 to 66 inclusive, and Sec. 68 ; X, Secs. 92, 93 and 95 ; adopted December, 1911.

Public Health Act, 1925, Parts II to V inclusive ; adopted March 1st, 1926.

(2) By-laws relating to Public Health in force :—

Slaughter Houses, 1893 ; Dairies, Cowsheds and Milk Shops, 1907.

Tents, Vans and Sheds, 1914. Common Lodging Houses, 1914.

Nuisances, 1915.

New Streets and Buildings, 1926.

SECTION III.

SANITARY CIRCUMSTANCES OF THE AREA.

Water.—The Ilkeston and Heanor Water Board supply the town with water from the Waterworks at Whatstandwell. The main source of supply is an underground channel called the Meerbrook Sough, and also a deep bore hole through the rock. The quality of the water is excellent though rather hard. The quantity of water available at the source is plentiful, as is shown by the fact that the period of drought during 1929, which was so alarming in many parts of the country, did not affect the supply sufficiently to cause any serious restriction to be enforced with regard to water consumption within the Borough. In fact only a proportion of the water at the source can be utilised with the present plant and storage accommodation. The limited storage accommodation was mentioned in last year's Report, and its remedy should occupy the urgent attention of the Authority. The reservoirs at Shipley are barely capable of holding one day's supply, whereas storage for at least two days' supply should be provided, and the requirements of an increasing population and new industries should be taken into consideration. The risk of breakdown owing to subsidence of the undermined ground through which the mains travel, makes the matter all the more urgent.

Certain extensions of the peripheral water supply have been made amounting to a total of 1,350 yards of 3 inch main. This includes the main to the new Northern housing site and to the new site in Oakwell Crescent, and also to houses in Pimlico, near the canal.

Rivers and Streams.—The supervision of rivers and streams in this area is carried out by the Trent Fishery Board.

Drainage and Sewerage.—New sewers have been laid to the new Northern housing site, and also to the site in Oakwell Crescent and St. Andrew's Drive. The new road and bridge at the Sewage Disposal Works have been completed and this has greatly facilitated the carting away of the sludge. The Disposal Works have been examined and reported on by the firm of engineers who constructed the original plant, and a comprehensive scheme for their extension has been adopted by the Council and awaits the sanction of higher authority.

Closet Accommodation.—The conversion of pail closets to water closets has proceeded according to the scheme which was commenced in 1927. During the past year 762 pail closets were converted into water closets. The number of pail closets has been reduced during the last three years from 2,232 to 385. Further details are given in the table headed Excrement Disposal.

Scavenging.—This work is performed by a contractor and there has been no extension during the year. The total amount of refuse has diminished owing to the lessened amount of pail contents as a result of the conversion scheme. Particulars are given in the tables at the end of this Report.

Sanitary Inspection of the Area.—Full details in tabular form are given in the table headed Sanitary Inspection of the District.

Smoke Abatement.—A close watch has been kept on chimneys in order to prevent a nuisance arising from the emission of smoke and grit. Several observations have been made during the year and advice has been given as regards the necessary height of chimneys and the need for efficient stoking. In this way nuisance has been abated.

Premises and Occupations which can be controlled by Byelaws or Regulations.—A list of these and the work done in connection therewith is given in the tabular report on the Sanitary Inspection of the District under the headings of Offensive Trades, Common Lodging Houses, Petroleum Act, Canal Boats, Bakehouses, Dairies, Cowsheds and Milkshops and Slaughter Houses.

Other Sanitary Conditions Requiring Notice.—The work of filling in the Washmeadow Clayhole has been proceeded with in a satisfactory manner, and there is now no nuisance in connection with it.

Schools.—These are dealt with in the Report of the School Medical Officer which follows this Report. The closest co-operation is maintained especially with regard to the prevention and isolation of infectious diseases.

Health Education.—A Health Week was held in October. Special propaganda work was carried out in the Schools of the Borough, and is described in the School Medical Report.

Rag Flock Acts, 1911 and 1928.—There is only one premises on which rag flock is used. There has been no need for any action to be taken.

SECTION IV.

HOUSING.

During the year 1929 the number of new houses erected in the Borough was 174. It is a considerable time since such a large number of houses were built in any one year. 147 houses were built with State assistance, and of these 106 were erected by the Local Authority. Since these 174 new houses should each be capable of accommodating five persons without overcrowding, one may regard the total number of new houses as capable of accommodating 870 persons. The increase in the population of the Borough according to the estimate of the Registrar General is 260. Therefore, the effect of erecting 174 new houses may be regarded as equivalent to providing additional housing accommodation for 870, minus 260, that is 610 extra persons. If building is continued at this rate it should do a great deal to relieve overcrowding. The Authority has already made plans for the erection of 62 new houses in the current year. The new houses which have been built are very satisfactory in type and attractive in appearance. Their popularity can be gauged by the fact that there are over 1,100 applicants on the waiting list. The rent varies from 10/6 to 14/10 per week, including rates.

There are still many overcrowded houses in the Borough. Three bad examples may be quoted :—(a) A family of 12 persons in a house consisting of three rooms and a scullery ; (b) a five-roomed house containing 14 persons of which 9 are adults ; (c) a house with five rooms and a scullery containing two families consisting of 14 persons of which 10 are children under 13 years. It is manifestly difficult to deal with such cases during the present state of shortage

of houses. The people state that they have tried to obtain other houses and have put their names on the list of applicants for Council houses.

There are three types of people living in overcrowded conditions who will always be difficult to deal with.

First, there are those people with very large families who perhaps could even afford a bigger house, but who are regarded as undesirable tenants by most landlords.

Secondly, there are those unfortunate people who cannot afford to pay a higher rent owing to unemployment or chronic illness.

These two classes of people are obviously in need of assistance in obtaining houses.

Thirdly, there are those types of people who find a low rent more attractive than healthy surroundings and do not mind in what foul and insanitary conditions they live, although they could easily afford to pay a higher rent. For these people, encouragement, educative measures, and even coercion are necessary.

Unfit and insanitary houses can always be let to a certain type of tenant as long as the rent is sufficiently low. The only method of preventing such houses being occupied is to demolish them.

There are 29 occupied caravans in the area. The establishment of most, if not all, of these caravans, is a contravention of the bye-laws, and steps should be taken to eliminate these undesirable residences. This can be done gradually without causing hardship under existing legal powers. The greatest care ought to be taken at once not to allow the number of caravans to increase, otherwise the Authority will be laying up for itself a store of trouble for the future.

SECTION V.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.—The dairy farms situated in the area have been inspected during the year, and any suggestions to improve the conditions have been carried out by the proprietors. One firm retails under licence Certified Milk which is produced at a farm in Nottinghamshire. This milk was subjected to analysis periodically throughout the year. There are 145 milk shops in the Borough, and these are regularly inspected.

Meat and other Foods.—Practically all the meat slaughtered in the Borough is inspected, and this entails a good deal of work, as there are 7 registered and 12 licensed slaughter houses. The amount of diseased food surrendered is shown in the table at the end of this Report. Stalls and vehicles are regularly inspected. One prosecution was effected for failure to give notice of slaughter.

Adulteration.—The various Acts in connection with Food and Drugs are administered by the County. During the year 86 samples were taken including 24 samples of milk.

Chemical and Bacteriological Examination of Food.—This is carried out by the County Analyst in Derby.

SECTION VI.

INFECTIOUS DISEASES.

Influenza.—A severe epidemic occurred in the early months of the year, but as influenza itself is not a notifiable disease the actual number of cases cannot be given. But the effect of the epidemic can very clearly be seen in other ways. Pneumonia is the most fatal complication of influenza and therefore a consideration of the number of deaths returned as due to both pneumonia and influenza will give an indication of the serious nature of the outbreak. The disease was particularly fatal among the very young and among the elderly. No less than 35 children under the age of 5 years succumbed to pneumonia in 1929, compared with a total of 9 in 1928, while 7 children of the same age died of influenza proper in 1929, compared with none in 1928. Again the total deaths at all ages from pneumonia was 57, and from influenza 29 during 1929, compared with a total from pneumonia of 22, and from influenza of 2 during 1928. The effect of the epidemic therefore was to increase the general death rate, and more especially to increase the infantile mortality rate. The disease appears to have spread to this country from North America and the approach of the epidemic was able to be foreseen by means of reports from the health authorities abroad. As soon as its arrival at the western seaports was noticed, posters were displayed in the Borough giving instructions with regard to the steps to be taken by individuals to avoid the disease and stressing the importance of seeking early medical advice when attacked. Pamphlets containing the same advice were distributed to all the scholars at the elementary schools for the purpose of taking home to their parents.

Scarlet Fever.—This disease showed a tendency to increase towards the end of the year. On the whole it was of a mild type and no deaths occurred. Glandular enlargement was common, but there was an absence of nephritis as a complication. Sixty-nine cases were notified.

Chicken Pox remained notifiable in this area so that cases could be visited and the diagnosis confirmed.

Enteric Fever.—One case occurred, rather mild in type. The infection was acquired from outside this area.

Small Pox.—Four cases only were notified during the year. Three of them were contacts of cases which occurred at the end of the previous year. The other case originated from outside the Borough. The last case was notified on the 26th February and ever since then this area has been free from the disease.

Diphtheria.—There were 7 cases of Diphtheria of which 2 died. Both the fatal cases were of the primary laryngeal type. No Schick tests were performed.

There was no other notable occurrence of infectious disease and there was no special prevalence of animal or insect pests.

Disinfection of premises and of articles exposed to infection was carried out by the health department.

Pathological and Bacteriological examinations are carried out at the County Laboratory in Derby, and full use has been made of this arrangement.

Ophthalmia Neonatorum.—It is very satisfactory to be able to record that no cases of this affection occurred during the year.

Prevention of Blindness.—No action was taken under Section 66 of the Public Health Amendment Act, 1925.

A table is given to show the prevalence of and control over notifiable diseases. It will be noticed that the deaths from all forms of pneumonia exceed the number notified. This apparent discrepancy is due to the fact that only Acute Primary Pneumonia and Acute Influenzal Pneumonia are notifiable, whereas the number of deaths are taken from the Registrar-General's returns and include deaths from other varieties of pneumonia.

PREVALENCE OF AND CONTROL OVER NOTIFIABLE DISEASES.

The number of cases of notifiable infectious disease is set out in the following table :—

DISEASE.	No. Notified.	No. Removed to Hospital.	Total Deaths.
Tuberculosis, Pulmonary ..	31	22	26
Tuberculosis, other forms ..	14	—	10
Pneumonia (all forms) ..	25	—	57
Scarlet Fever	69	42	—
Diphtheria	7	3	2
Erysipelas	3	—	—
Chicken-Pox	49	—	—
Puerperal Pyrexia	1	—	—
Small-Pox	4	4	—

**SEX AND AGE DISTRIBUTION OF CASES OF NOTIFIABLE
DISEASE DURING 1929.**

AGE GROUP.	Sex.	Pneumonia all forms.	Chicken-Pox.	Scarlet Fever.	Diphtheria.	Erysipelas.	Puerperal Pyrexia.	Enteric Fever.	Small-Pox.
0—1	M. F.	- -	- -	- -	- -	- -	- -	- -	- -
1—2	M. F.	1 -	2 4	- -	- -	- -	- -	- -	- -
2—3	M. F.	- -	- 4	2 -	- -	- -	- -	- -	- -
3—4	M. F.	1 -	2 1	2 2	1 2	- -	- -	- -	- -
4—5	M. F.	- -	3 1	3 1	- 1	- -	- -	- -	- 1
5—10	M. F.	1 -	11 10	18 16	1 1	- -	- -	- -	- -
10—15	M. F.	- -	6 3	4 8	1 -	- 1	- -	- -	- -
15—20	M. F.	1 -	1 -	6 4	- -	- -	- -	- 1	- -
20—35	M. F.	2 5	1 -	2 1	- -	- 1	- 1	- -	1 2
35—45	M. F.	5 -	- -	- -	- -	- -	- -	- -	- -
45—65	M. F.	3 3	- -	- -	- -	- 1	- -	- -	- -
65 up- wards	M. F.	1 2	- -	- -	- -	- -	- -	- -	- -
Total all ages	M. F.	15 10	26 23	37 32	3 4	- 3	- 1	- 1	1 3
GRAND TOTAL		25	49	69	7	3	1	1	4

SECTION VII.

TUBERCULOSIS.

The notification of cases of Tuberculosis is fairly satisfactory on the whole. The treatment of Tuberculosis is undertaken by the County. The Tuberculosis Officer attends at the Tuberculosis Dispensary in Albert Street on Wednesday morning and afternoon of each week.

With regard to pulmonary tuberculosis the number of new cases notified remains fairly constant, but the deaths have slightly increased. The number of non-pulmonary cases notified is one less than the previous year, but the deaths have also increased. One unsatisfactory feature in connection with tuberculosis is that although patients are much improved by their treatment in sanatoria, yet they return home to conditions which are often far from ideal, especially if they come back to overcrowded houses. That tuberculosis is a family disease is an undeniable fact, and that infected persons have to live in overcrowded houses together with susceptible children is an equally undeniable pity. It would be a great step forward in the prevention of tuberculosis if a certain proportion of new houses erected by the Authority could be earmarked for applicants, recommended by the medical officer, in whose families there are notified cases of tuberculosis.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action had to be taken under these Regulations in the course of the year.

Public Health Act, 1925. Section 62.

No action under this Section had to be taken during the year.

Particulars of new cases of Tuberculosis and deaths from this cause are given in the following table :—

AGE PERIODS.			NEW CASES.				DEATHS.			
			Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
			M.	F.	M.	F.	M.	F.	M.	F.
0	..	..	—	—	—	2	—	—	—	2
1	..	..	—	—	2	—	1	—	3	—
5	..	..	2	2	2	2	—	—	—	1
10	..	..	—	1	—	1	—	—	—	—
15	..	..	3	5	—	—	2	3	—	—
20	..	..	3	4	2	—	—	—	1	1
25	..	..	—	3	3	—	4	6	1	—
35	..	..	2	1	—	1	3	2	—	—
45	..	..	1	2	—	—	3	1	—	1
55	..	..	—	1	—	—	1	1	—	—
65 and upwards			—	—	—	—	—	—	—	—
TOTAL	..		11	19	9	6	13	13	5	5

RETURN OF NEW PATIENTS WHO ATTENDED ILKESTON DISPENSARY DURING 1929.

AGE.	Total Attendances		No. found Tuberculous		No. of Pulmonary Cases		No. of Non-pulmonary Cases		No. received Sanatorium Treatment		No. refused to go to Sanatorium		No. received other Treatment.		No. under observation		No. Died		No. Discharged.		No. Transferred		Total Sputa examined		Sputa found positive.		No. of Ex-Servicemen.	
	Males	Females																										
Over 15 years of age ..	23	26	134	28	23	5	20	2	3	1	4	21	0	54	15	2												
Under 15 years of age ..	16	19	93	12	5	7	4	0	6	1	1	23	0	19	1	0												

Non-pulmonary cases :—Spine 1, Abdomen 1, Cervical Glands 6, Kidney 1, Hip-joint 1, Lupus 2.

RETURN OF OLD PATIENTS WHO ATTENDED ILKESTON DISPENSARY DURING 1929.

AGE.	Total Attendances		No. found Tuberculous		No. of Pulmonary Cases		No. of Non-pulmonary Cases		No. received Sanatorium Treatment		No. refused to go to Sanatorium		No. received other Treatment.		No. under observation		No. Died		No. Discharged.		No. Transferred		Total Sputa examined		Sputa found positive.		No. of Ex-Servicemen.	
	Males	Females																										
Over 15 years of age ..	39	31	175	75	62	9	4	3	3	0	19	14	2	52	10	7												
Under 15 years of age ..	16	16	106	27	11	21	1	0	9	0	0	8	2	5	1	0												

Non-pulmonary cases :—Eye 1, Elbow joint 2, Knee joint 1, Hip joint 4, Abdomen 6, Lupus 2, Cervical Glands 14,

SECTION VIII.

MATERNITY AND CHILD WELFARE.**Antenatal Clinic.**

The Antenatal Clinic has had a very successful year and is rapidly growing in popularity. At first one session a month, on the first Monday in the month, was held at the Albert Street Clinic. But the numbers attending steadily increased until from November two sessions a month had to be held. At the time of publication of this Report three sessions a month are being held on the first three Mondays of each month. In 1929 the number of new cases attending the clinic was 126 compared with 55 new cases in the previous year. A total of 198 attendances were made and the average number of patients at each session was 14.1. It is obvious that both midwives and expectant mothers are learning to realise the supreme importance of systematic antenatal examination, which, of course, is one of the chief factors to which we must look for the diminution of maternal mortality and morbidity. Those who have conducted antenatal examinations in large clinics know that many serious complications of child-birth can be entirely prevented, and the severe effects of many other abnormalities can be greatly diminished by fore knowledge and timely treatment. Prenatal examination by an expert has also a wonderful effect in re-assuring an expectant mother and in dispelling any apprehension she may have with regard to her approaching confinement.

Midwives.

There were 12 midwives in the Borough, of which 9 were trained and 3 were *bona-fide* midwives who were in practice previous to 1903. The number of births attended by midwives on the district was 402, out of a total of 625 notified births which occurred during the year. At the Maternity Home 187 births took place, so that out of a total of 438 births which took place on the district 36 were attended by doctors and 402 by midwives. Thus no less than 91 per cent. were attended by midwives. This fact is a strong argument in favour of the necessity of close supervision of the midwives being exercised by the local maternity and child welfare authority which deals with the care of the mothers before confinement and with the welfare of both mothers and children after confinement.

Municipal Maternity Home.

The Maternity Home had a remarkably busy year and dealt with more cases than in any preceding year except 1921. For most of the time work was performed at a very high pressure and after July the applications to book were so much in excess of the available

accommodation that the booking had to be limited and several applications to book were refused. If this state of affairs continues the question of extension will have to be considered. The accommodation for the staff is insufficient at present. The results of the year's work are highly satisfactory. No mother died from any obstetric cause, though one patient unfortunately succumbed to influenzal pneumonia from which she was suffering on admission. The still births and the infant death were due to unpreventable conditions. On the other hand many dangerous complications were dealt with successfully.

The Statistics for 1929 are given in the following table.

ILKESTON MUNICIPAL MATERNITY HOME.

INFORMATION REQUIRED.	PARTICULARS.	
(1) No. of cases in the Home on 1st January, 1929 ..	2.	
(2) No. of cases admitted during 1929	188.	
(3) Average duration of stay	14 days.	
(4) No. of cases delivered by :		
(a) Midwives	166	(1 case transferred to hospital for Caesarean Section).
(b) Doctors	21	
(5) No. of cases in which medical assistance was sought by a midwife, stating the reasons for requiring assistance.	(a) 19—7	Albuminuria. 1 Contracted Pelvis. 5 Justo Minor Pelvis. 2 Varicose Veins. 4 No Foetal heart sounds heard.
(a) Ante-natal.. ..	(b) 22—2	Antepartum Hæmorrhage (1 Placenta Prævia, 1 Partial Placenta Prævia).
(b) During Labour.		4 Unreduced Occipito Posterior. 5 Uterine Inertia. 2 Breech—extended arms and legs. 2 Long labours—Foetal heart sounds rapid. 2 Rigid outlets. 1 Eclampsia. 1 Abortion. 1 Carneous Mole. 2 Unsatisfactory condition of patients on admission: 1 Influenza, 1 Pneumonia.
(c) After labour (state separately the number of ruptured perineums which required suture).	(c) 22—14	Ruptured Perineums. 3 Mastitis. 2 Collapsed immediately after delivery. 2 Post-partum hæmorrhage. 1 Persistent vomiting.
(d) For Infant.. ..	(d) 16—14	Feeble condition (7 premature), 1 hare-lip and cleft palate, 1 cleft palate.

INFORMATION REQUIRED.	PARTICULARS.
(6) No. of cases notified as : (a) puerperal fever .. (b) puerperal pyrexia (i.e., rise of temperature to 100.4°F. for 24 hours or its recurrence within that period) stating the result of treatment in each case.	(a) Nil. (b) 2—1 Admitted with Pneumonia— Result—Good. 1 Albuminuria, admitted with In- fluenza—developed Pneumo- nia—(Twin pregnancy). Result —patient died.
(7) No. of cases of pemphigus neonatorum	Nil.
(8) No. of cases notified as ophthalmia neonatorum stating the result of treatment in each case	Nil.
(9) No. of cases of "inflam- mation of the eyes," however slight.. ..	Nil.
(10) No. of infants not entirely breastfed while in the Institution, stating the reasons why they were not breastfed.	5—1 Mother had Pneumonia 2 Twins—mother had Influenza —Pneumonia. 1 Mother Tubercular. 1 Mother insufficient milk (Infant kept in Home some time owing to prematurity).
(11) No. of maternal deaths, stating the causes.	1 Pneumonia, Influenza.
(12) No. of foetal deaths (a) stillborn, and (b) within 10 days of birth. State the causes and the re- sults of post mortem examinations if obtain- able.	(a) 9—2 Hydrocephalus : 1 Anencephalus 1 Macerated—Albuminuria, 4 Macerated—(2 diseased pla- centa), 1 Emergency—no foe- tal heart sounds heard on admission. (b) 1 Atelectasis.

Home Visiting.

At the beginning of the year there were only three half-time health visitors instead of the usual number of four. Still the Authority decided to attempt to carry on for three months as an experiment without filling the vacancy. It was found, however, that the child welfare work had to be seriously curtailed. Visits to babies under one year had to be cut down and all routine visiting to toddlers was impossible. Consequently a temporary nurse was engaged until a new health visitor could be appointed. At the end of January Miss M. A. Shakspeare resigned on joining the health visiting staff of Warwickshire County after nearly eight years of valuable work in this area. On the 1st March Miss L. Ottewell was appointed a combined health visitor and school nurse. On the

1st August Miss M. E. Jackson commenced duty as the fourth health visitor and school nurse, and it was possible to resume the routine work again. The work of the health visitors during the year is shown in the following table :—

Summary of Heath Visitors' Reports for 1929.

Births Notified (twins 5)	..	..	..	..	..	625
Males ..	..	..	..	..	..	323
Females ..	..	..	..	..	..	302
Still Births ..	..	..	..	..	..	27
Died within Three Days ..	..	..	..	..	..	7
Attended by Medical Practitioners ..	..	..	..	..	..	42
Attended by Midwives only ..	..	..	..	..	..	402
Admitted to Maternity Home ..	..	..	..	..	..	181
Total number of visits paid..	..	..	..	..	..	7,013
Children weighed ..	..	..	..	..	..	592
Average weight ..	..	..	..	..	lbs.	7.46
Breast fed at birth ..	..	..	..	..	..	577
Bottle fed at birth ..	..	..	..	..	..	10
Breast and Bottle fed at birth ..	..	..	..	..	..	2
" " Spoon " " " ..	..	..	..	..	..	—
Spoon fed at birth ..	..	..	..	..	..	3
Pre-natal Cases visited ..	..	..	..	..	..	16
Outside the Borough ..	..	..	..	..	..	9
Number of individual infants under 1 year visited ..	..	..	..	..	..	3,161
" " " children 1 to 5 years ..	..	..	..	..	..	2,936

Instruction in Mothercraft.

The senior health visitor gives instruction in hygiene and the management of infants on one afternoon a week at the housewifery centre owned by the Education Authority. To this centre a batch of 12 senior girls aged 12 to 14 are sent every month. Practical demonstration of the bathing of a baby is frequently given to the class by the matron of the Maternity Home. This scheme of instruction in mothercraft commenced in June.

Maternity Outfits.

Six maternity outfits were purchased early in the year with funds supplied by the Coalfields Distress Fund. These outfits contain all the linen necessary for a confinement and are lent out to necessitous mothers who are allowed to retain them up to three weeks after the date of the confinement. The outfits are contained in strong suit cases and possess the following contents:—

For the Mother.

3 Sheets.
2 Drawsheets.
1 Macintosh Sheet.
1 Labour Gown.
2 Nightdresses.
1 pair Towels.
1 pkt. Sanitary Towels.
3 Pillowcases.

For the Infant.

3 Vests. 3 Binders.
3 Barracoats.
3 Gowns.
6 Napkins.
1 Bath towel.
2 small Towels.
1 box Powder.
1 box of Soap.

Infant Welfare Centres.

Two child-welfare clinics are held every week. The clinic at Albert Street is open on Tuesday afternoons and that at Cotmanhay on Thursday afternoons. A medical officer attends at every session.

A new weighing machine has been purchased which is quick to manipulate and is so accurate that test feeds can be given.

The attendances are shown in the attached table.

ATTENDANCES AT INFANT WELFARE CENTRES.

ALBERT STREET.

Individual Cases.	Total Attendances.	Examined by Doctor.	Infants under One Year.	Toddlers.
534	2,097	329	1,330	767

COTMANHAY.

269	890	336	584	306
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Special Investigations.

STILL BIRTHS.—All still births among midwives cases are enquired into in order to find out if there is any cause which can be guarded against in a future pregnancy.

PUERPERAL FEVER AND PYREXIA.—These conditions are notifiable and professional enquiries are made and advice and help are offered when necessary. There were no cases of Puerperal Fever and only one of Pyrexia during the year.

MATERNAL DEATHS.—A confidential professional enquiry is made into all cases of maternal death, with the object of acquiring scientific data which may be of use in the research into causes and means of prevention of this distressing occurrence. The maternal mortality rate of 1.7 is much lower than usual.

INFANTILE DEATHS.—The causes of death in infants under one year are enquired into and special records kept. There were only seven deaths from infantile diarrhoea.

The rather higher infantile mortality rate of 78.6 is accounted for by the serious epidemic of influenza which occurred in the early months of the year.

Free Supply of Milk.

Under the provision of the Maternity and Child Welfare Act, 1918, free milk was issued in necessitous cases to expectant and nursing mothers and to selected children under the age of five years. In the majority of cases the infants were under nine months of age. The number of applications in respect of which milk was issued was 529, and the approximate cost was £138.

SUMMARY OF THE WORK DONE BY THE HOUSING INSPECTOR.

Housing Acts and Regulations.

NUMBER OF HOUSES ERECTED DURING 1929.

(a) Total (including numbers separately under (b))	.. ..	174
(b) With State Assistance under Housing Acts	.. ..	147
(i) By the Local Authority	.. ..	106
(ii) By other bodies or persons	.. ..	41

Unfit Dwelling Houses.

(1) Total number of dwelling-houses inspected for housing defects under Public Health or Housing Acts	.. ..	374
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	.. ..	43
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	.. ..	3
(4) Number of dwelling-houses (exclusive of those referred to under preceding sub-head) found not to be in all respects reasonably fit for human habitation	.. ..	331

Remedy of Defects without Service of Notice.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	..	331
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Action under Statutory Powers.

(a) Proceedings under Section 3 of the Housing Act, 1925 :		
(i) Number of dwelling-houses in respect of which Notices were served requiring repairs	.. ..	43
(ii) Number of dwelling-houses which were rendered fit after service of formal Notices :		
(a) By Owners	.. ..	43
(b) By Local Authority in default of Owners	..	Nil.
(iii) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by the Owners of intention to close	.. ..	3
(b) Proceedings under Public Health Acts :		
(i) Number of dwelling-houses in respect of which Notices were served requiring defects to be remedied	.. ..	331
(ii) Number of dwelling-houses in which defects were remedied after service of Formal Notices :		
(a) By Owners	.. ..	331
(b) By Local Authority in default of Owners	..	Nil.
(c) Proceedings under Sec. II, 14 and 15 of Housing Acts, 1925 :		
(i) Number of representations made with a view of the making of Closing Orders	.. ..	3
(ii) Number of dwelling-houses in respect of which Closing Orders were made	.. ..	3
(iii) Number of Closing Orders determined	.. ..	Nil.
(iv) Number of Demolition Orders made	.. ..	3
(v) Number of dwelling-houses demolished	.. ..	7

Other Details connected with Housing.

Paving of Yards under Section 25 P.H.A. (A) Act, 1907	.. ..	Nil.
Sinkstones, Section 49 P.H.A. (A) Act, 1907	.. ..	Nil.

SANITARY INSPECTION OF THE DISTRICT.

Details of Inspections and defects found during the year 1929 by the Sanitary Inspectors.

Drainage

Drains opened and cleansed	155
Drains provided with new traps	20
New drains and inspection chambers	1093
Drains repaired or relaid	50
Drains tested by water after relaying	80
Drains tested by smoke	1
Sink pipes disconnected	6
New sink-waste pipes provided and fixed	12
New sinkstones provided	12
Broken inspection covers renewed	20
Backyards repaired or re-paved	30
Floors in houses repaired	15
Dilapidated walls and ceilings repaired	19
Roofs repaired	26
Defective stairs repaired	6
Windows made to open	25
Defective spouts repaired	12
Pantry vents and light improved	10
Defective coppers renewed	12
Dirty houses cleansed	6
Defective brickwork pointed up	15
Dampness in rooms remedied	10

Water Closets and Urinals.

Water Closets, new basins fixed	882
Defective fittings provided	100
Choked water closets cleansed	60

Miscellaneous Defects not enumerated in above tables :

Nuisances from animals improperly kept	6
Offensive accumulations removed	10
Small defects remedied in premises	130
Number of Inspections to premises	3481
Re-visits to premises during repairs	3800
Number of Informal Notices issued	227
Number of Statutory Notices served	338
Number of Notices not complied with	3

Privies, Ashpits and Ashbins.

Privies made into Water Closets	Nil.
Pail-closets made into Water Closets	862
Defective Ashpits	54
New Ashbins provided	350
New pails provided to Pail-closets	6
Number of inspections made to existing Privies	24
Number of Inspections to Ashbins	10,326
Number of inspections made to Ashpits	4,421
Number of inspections made to Pail-closets	4,037

Offensive Trades.

Only 1 registered premises, Tripe Boiler	1
Number of inspections	40
Number of Notices or complaints	Nil.

Common Lodging-houses. Nil

Places of Amusements.

Premises are visited from time to time and reports made by the Senior Sanitary Inspector to the Health Committee and the Licensing Authority.

Petroleum Acts.

These Acts are administered by the Senior Sanitary Inspector, Mr. J. B. Duro.

Number of Petrol Licences issued during 1929	37
Number of Carbide of Calcium Licences issued in 1929	7
Number of Inspections made during 1929	45

Canal Boats.

These Acts are administered by the Senior Sanitary Inspector, Mr. J. B. Duro.

Number of Canal Boats on Register	40
Number of Canal Boats inspected	19
Number of infringements found	Nil.
Prosecutions	Nil.
Number of men on board	20
Number of women on board	4
Number of children on board	4

Bakehouses.

Number of bakehouses on Register	29
Number of Inspections made	15
Number of Notices issued	Nil.

Dairies, Cowsheds and Milkshops.

Number of Cowsheds on Register	9
Number of milkshops	145
Number of visits	126

Slaughter-houses.

Registered Slaughter-houses	7
Licensed Slaughter-houses	12
Number of inspections	1,333
Number of Notices issued	6

Surrendered Food Stuffs.

1,607 lbs. Beef ; 77 Livers ; 5 Pigsheads ; 88 lbs. Pork ; 395 lbs. Apples.
Prosecutions : 1 Meat Reg. Clause 8 ; Fined 20/-.

Disinfection of Premises.

Number of rooms disinfected	336
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These include not only infectious cases, but after death from Cancer and Tuberculosis and also the Free Library. A Formalin Sprayer containing 40% Formalin is used, and Sulphur.

Factories, Workshops and Workplaces.

The following tables are inserted in compliance with Section 132 of the Factory and Workshops Act, 1901.

Inspections of Factories, Workshops and Workplaces.

	Inspections.	Notices	Pros.
Factories (including Factory Laundry)	7	Nil.	Nil.
Workshops (including Workshop Laundries)	70	1	Nil.
Workplaces (other than outworkers)	40	Nil.	Nil.

NUMBER OF DEFECTS.

	Found.	Remedied.	Ref. to H.M. Pros.	Inspector.
Nuisances under the P.H. Acts				
Want of cleanliness.. ..	Nil.	Nil.	Nil.	Nil.
Sanitary Accommodation ..	1	1	Nil.	Nil.
Screening and ventilation ..	1	1	Nil.	Nil.

Outworkers.

The number of outworkers in the first half of the year was 67, and in the second half 24.

Number of visits paid to premises 32

Shops Acts.

The Shops Acts are administered by the Senior Sanitary Inspector, Mr. J. B. Duro. Two trades are governed by Local Acts, viz.:

(i) Boots and Shoes; (ii) Barbers and Hairdressers.

No cases were submitted to Court for contravening the Shops Acts.

JOSEPH B. DURO, C.R.S.I.,
Senior Sanitary Inspector.

CYRIL E. ADCOCK, C.R.S.I.,
Junior Sanitary Inspector.

**SUMMARY SHOWING THE NUMBER OF HOUSES, ACREAGE, POPULATION & SANITARY
CONVENIENCES OF THE SEPARATE WARDS. DECEMBER, 1929.**

Municipal Borough of ILKESTON. By Wards.	Area in Statute Acres (Land and Inland Water).	Population by Wards. (Census 1921)	Number of Houses.	Approx. Number of Ashbins.	Number of Pail- Closets. (Total.)	Number of Ashpits, (Dry.)	Number of Privy Middens.	Number of Slop- water Closets.	Number of Water- Closets. (Approx.)
ILKESTON.	2,526	32,266	7,240	6,033	385	326	12	317	7,175
North Ward	..	497	1,340	1,074	53	73	8	49	1,310
Granby Ward	..	204	847	716	59	41	-	18	830
Market Ward	..	216	1,384	1,109	108	84	1	90	1,291
Victoria Ward	..	529	908	809	21	30	1	15	1,029
Old Park Ward	..	306	1,231	1,023	13	43	2	68	1,246
South Ward	..	774	1,530	1,302	131	55	-	77	1,469

EXCREMENT DISPOSAL — 1929.

IN WHOLE DISTRICT ..	Approximate Number of Houses, etc. with—				Number of Houses converted from Privy-middens to Water-closets since January, 1929.	Number of Defective Privies improved.
	Privy-middens.	Pail-closets.	Water-closets.	Slop-water Closets.		
	(a) 16	(b) 395	(c) 6,851	(d) 317	(e) Nil.	Nil.

NOTE.—(a) Total number of Privy-middens 12, of these 1 is shared by 3 houses which are adjacent to the sewer and are therefore convertible to Water-closets, and 11 are shared by 13 houses which cannot reach the sewer and are therefore not convertible.
 (b) Total number of Pail-closets, 385; shared by 395 houses, etc.
 (c) Total number of Water-closets, 7,175; shared by 6,851 houses, etc.
 (d) Number of Slop-water Closets is 317, shared by 317 houses, etc.
 (e) In addition 820 Pail-closets have been converted into 820 Water-closets by the Corporation, by contract, since January, 1929; and 42 additional Water-closets have been provided.
 The term Houses, etc., in this table includes dwelling places, churches, chapels, schools, factories and workshops.

SCAVENGING AND REFUSE DISPOSAL.

Parts of Urban Districts or (in Rural Districts) Parishes in which Scavenging is carried out.	Population of separate areas for which there is Public Scavenging.	If done by		Cost.	Refuse Tips.
		Servants of Council.	Under Contract. of Houses.	Total Cost for year ending 31st March, 1929 annum.	How Refuse is disposed of.
WHOLE BOROUGH ..	33,260	No.	Yes.	No.	£3,655-12-5 10s. 0-2d. Tipped on land at Gallow's Inn and Cotmanhay, and filling up of land at Washmeadow Clayhole, spread in layers 5 feet deep and covered with soil.

SUMMARY OF PAIL CLOSETS.

	NORTH WARD.	GRANBY WARD.	MARKET WARD.	VICTORIA WARD.	OLD PARK WARD.	SOUTH WARD.	TOTALS.
Number of Houses with Pail-closets ..	53	59	108	21	11	73	325
Lock-up Shops with Pail-closets ..	—	—	—	—	1	—	1
Factories and Workshops with Pail-closets	—	—	—	—	1	46	47
Churches, Chapels and Schools with Pails ..	—	—	—	—	—	12	12
TOTALS	53	59	108	21	13	131	385

Number of Houses without a separate
Convenience (using other Pails) ..

10

Total number of Houses, Churches, Chapels, Schools, Factories and Workshops with Pail-closet accommodation ..

395.

REFUSE REMOVAL AND DISPOSAL.

SHOWING ANNUAL RETURN FOR THE PAST THREE YEARS OF LOADS REMOVED.

YEAR.	ASHBIN REFUSE.	ASHPIT REFUSE.	PRIVY CONTENTS.	PAIL CONTENTS.	TOTALS.
1927 ..	12,952	3,360½	15	3,996	20,323½
1928 ..	13,011	3,248	26	3,306	19,591
1929 ..	13,093½	2,712½	43	1,363	17,212

An investigation made in May, 1922, by taking loads of refuse from various parts of the Borough and having them weighed showed an average weight of One Ton per load of ASHBIN REFUSE, and One Ton, Three Hundred-weights per load of ASHPIT REFUSE. On the 7th October, 1922, one of the pan-carts used for night-soil scavenging was filled with water to six inches above the axle by means of a closet pail with a capacity of 9½ gallons, the cart contained 18 pailsfull of water, the net weight being 15½ cwt.

REFUSE REMOVAL.

SHOWING MONTHLY RETURNS FOR THE YEAR
ENDING 31st DECEMBER, 1929.

MONTH.	ASHBIN REFUSE.	ASHPIT REFUSE.	PRIVY CONTENTS.	PAIL CONTENTS.	TOTALS.
January ..	1,159½	253½	—	178	1,591
February	977	231	1	164	1,373
March ..	1,071	262	—	143	1,476
April ..	1,119	199	—	158	1,476
May ..	1,110	285	6	124	1,525
June ..	1,005	266	22	129	1,422
July ..	1,146	194	4	130	1,474
August ..	1,097	233	7	89	1,426
September	1,056	197	3	75	1,331
October ..	1,116	234	—	68	1,418
November	1,113	213	—	48	1,374
December	1,124	145	—	57	1,326
TOTALS ..	13,093½	2,712½	43	1,363	17,212

PRIVY ACCOMMODATION EXISTING 31st DECEMBER, 1929.

Situation of Privies that are able to drain into Public Sewer.	Number of Privies.	Number of Conveniences.	Number of Houses.
Nos. 49a, 50 and 51 Bath Street	1	2	3
TOTALS	1	2	3

Situation of Privies that are unable to drain into Public Sewer.	Number of Privies.	Number of Conveniences.	Number of Houses.
Nos. 2, 3, 21 Church Street ..	3	3	3
Bentley's Farm, Cotmanhay ..	1	1	1
No. 1 Fish Ponds	1	2	1
Nos. 20, 21, Heanor Road ..	2	2	2
No. 10 Duke Street	1	1	1
No. 52 King Street	1	2	1
Nos. 45, 46, 47 Nottingham Road	1	2	3
No. 4 Larklands	1	2	1
Privies unable to drain into Sewer	11	15	13
Privies able to drain into Sewer	1	2	3
Total number of Privies in existence	12	17	16

DISPOSAL OF PAIL AND PRIVY CONTENTS.

SOUTH WARD	}	To Gallows Inn Tip.
OLD PARK WARD		
VICTORIA WARD		
MARKET WARD		
GRANBY WARD	}	To Bentley's Land, Cotmanhay.
NORTH WARD		

DISPOSAL OF DRY REFUSE.

SOUTH WARD	}	To Gallows Inn Tip.
AND PART OF OLD PARK WARD		
AND PART OF OLD PARK WARD	}	To Washmeadow Clayhole.
VICTORIA WARD		
MARKET WARD		
GRANBY WARD		
AND PART OF NORTH WARD	}	To Bentley's Land, Cotmanhay.
PART OF NORTH WARD		

All Tips are levelled and covered with soil.
Average distance to Tips, 1.06 miles.

Borough of Ilkeston Education
Committee.

ANNUAL REPORT

OF THE

School Medical Officer

For 1929.

H. L. BARKER,

M.D., B.S.(Lond.), M.R.C.S., L.R.C.P., D.P.H.

EDUCATION COMMITTEE.

THE MAYOR (Coun. W. LACEY).	Councillor J. H. MILLARD.
Coun. G. W. WOOLLISCROFT, O.B.E., J.P. (<i>Chairman</i>).	„ J. PROCTOR.
Alderman AMOS HENSHAW, J.P., C.C.	„ J. WOOLLEY, J.P.
„ ARTHUR HENSHAW, J.P.	Professor H. A. S. WORTLEY.
„ W. SHAKSPEARE, J.P.	F. P. SUDBURY, Esq., J.P., C.C.
Councillor G. H. BROUGHTON.	S. R. WOOD, Esq., M.A.
„ L. MIDGLEY.	Mrs. PRIOR.

STAFF (1929).**School Medical Officer (also Medical Officer of Health).**

H. L. BARKER, M.D., B.S.(Lond.), M.R.C.S., L.R.C.P., D.P.H.

Part Time Medical Officers.

ASSISTANT SCHOOL MEDICAL OFFICER .. S. W. LUND, M.B., Ch.B., D.P.H.

OPHTHALMIC SURGEON T. E. A. CARR, M.B., B.S.
(*County Ophthalmic Surgeon*)

DENTAL SURGEON.. .. A. L. HODGKINSON, L.D.S.

NOSE and THROAT SURGEONS of the Nottingham Throat, Ear
and Nose Hospital.

School Nurses (also Health Visitors).

	<i>Appointed.</i>	<i>Resigned.</i>
Miss M. E. SHERLOCK, C.M.B.	21st June, 1914	—
Miss M. A. SHAKSPEARE, C.M.B.	1st Mar., 1921	31st Jan., 1929
Miss H. BLAIR, C.M.B. ..	1st June, 1922	—
Miss L. OTTEWELL, C.M.B. ..	1st Mar., 1929	—
Miss M. E. JACKSON, C.M.B...	1st Aug., 1929	—

Clerks.

Miss L. TRUEMAN	15th May, 1923	—
Miss H. CLARKE	13th Oct., 1924	—

Borough of Ilkeston Education Committee.

ANNUAL REPORT
OF THE
SCHOOL MEDICAL OFFICER
FOR 1929.

TO THE CHAIRMAN AND MEMBERS OF THE ILKESTON EDUCATION
COMMITTEE.

MR. CHAIRMAN, LADY AND GENTLEMEN,

I beg to present my Annual Report for the year ending 31st
December, 1929.

The main features of the year have been as follows :—

- (a) An Orthopædic Scheme has at last been sanctioned.
- (b) The Dental Scheme has continued to expand.
- (c) The opening of Cavendish School and the reorganisation of the schools has relieved the overcrowding.
- (d) The Coalfields Distress Fund enabled hundreds of school children to receive free gifts of much needed boots and clothing during the worst period of the industrial distress.
- (e) The School Clinic has proved to be too small for the increasing demand on it, and is urgently in need of extension.

I have the honour to remain,

Your obedient Servant,

H. L. BARKER,

School Medical Officer.

BOROUGH OF ILKESTON.

Area of Borough (in acres)	2,526
Population	33,260
Number of Schools	10
Number of Departments	20
Average number on School Register	5,585
Average Attendance	5,025

I.—STAFF.

Several changes occurred in the staff of school nurses. When the year opened there were only three school nurses instead of the usual number of four, the Authority having decided to attempt to carry on with only three nurses for a trial period of three months. As a result some of the work had to be curtailed to meet the shortage of staff. Fewer inspections for cleanliness were made and fewer visits were paid to homes for the following up of medical and dental inspection defects and in connection with school absentees. After three months it was recognised that an extra nurse was required, and a temporary nurse, Nurse Blackburn, was appointed. At the end of January, Miss M. A. Shakspeare resigned in order to take up a similar appointment on the Warwickshire County Staff. She had held the appointment of school nurse for nearly eight years and had done magnificent work in the Borough. On the 1st March Miss L. Ottewell was appointed a school nurse, and the appointment of Miss M. E. Jackson on the 1st August again brought the number of school nurses up to four.

II.—CO-ORDINATION.

(a) The Infant and Child Welfare Scheme of the Local Authority is co-ordinated with the School Medical Service in that the school nurses are also health visitors. The records of all infants and children under school age which have been prepared both as a result of systematic visits to the homes, and also after the visits of children brought to see the Medical Officers at the Child Welfare Clinics, are available for the use of the School Medical Staff. On the other hand, information discovered at routine medical inspections which is likely to be valuable with regard to younger children of the same family under school age is made use of in child welfare work.

(b) No Nursery Schools are provided by this Authority, but their establishment is under consideration.

(c) Debilitated children under school age come within the purview of the school nurses when acting as health visitors, and particulars about any exceptional child are reported to the Medical Officer of Health, who is also the School Medical Officer. The latter endeavours to see that appropriate treatment is obtained for the child and all records are at hand when the child reaches school age.

III.—THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

The schools have been frequently inspected from the point of view of hygiene. They are all kept in a clean condition. They are all well built and the surroundings are satisfactory with one or two exceptions. Lighting and warming are satisfactory on the whole. Good ventilation is possible in all, but it requires constant supervision if a stuffy infective atmosphere is to be avoided. The new senior school for both boys and girls, Cavendish School, was opened in September. It is a well-designed double cloister type of school with a common central hall, and is situated in an open space giving free air circulation. Well-sited special classrooms fit it for the education of older children, and give an opportunity for the teaching of such valuable subjects from the health point of view as domestic science, cookery, hygiene and elementary physiology. There is a medical inspection room and a bath adjoining.

As regards the older schools, the opening of Cavendish School has relieved the congestion. At Hallam Fields the smoke and grit remain, but the two old classrooms which were unhygienic are not now used. The overcrowding at Kensington School has been remedied, and the re-painting of the interior with light-coloured paint, as recommended in last year's report, has made the lighting satisfactory. At Holy Trinity the playground has been asphalted and repaired with much benefit to the infants attending. This school is difficult to heat in cold weather. The basement-like position of Chaucer Infants' School is far from ideal, and needs consideration. At some schools lavatory accommodation for teachers is needed. Better supervision might be given as regards the hand-washing of the pupils.

Water supply for washing and drinking is provided at all the schools. All schools now possess water closets. In last year's report one school was mentioned as having pail closets, but conversion to the water-carriage system has now been effected. The cloakrooms are heated in many schools and the children's clothes are dried on the radiators when necessary.

The type of desk and blackboard is on the whole very satisfactory. A few old desks remain, but they are gradually being replaced by the modern type.

Arrangements for the warming up of meals are not general because nearly all the children live quite close to their school and return home for dinner. At the Central School, however, there is an excellent arrangement for providing a hot meal, which is cooked at the Cookery School close at hand. The meal is always supervised by a member of the staff.

At most schools hot milk is provided during the morning break under arrangements made by the head teacher.

IV.—MEDICAL INSPECTION.

Medical Inspection.—The Board's schedule of medical inspection has been followed. Three age groups have been inspected.

(1) Entrants, *i.e.*, those children who had been enrolled since the last medical inspection, or who for some reason had never been previously inspected.

(2) Intermediates, *i.e.*, those children whose eighth birthday occurred during the year.

(3) Leavers, *i.e.*, those children who were over twelve but under thirteen on the 1st January, or who were due to leave at the end of the term and had not been examined since reaching the age of twelve.

One of the above groups was examined at all the schools during each term, the medical examination always taking place at the school. Each department was thus visited in the course of the year. After routine inspection, all children in the school exhibiting some special defect which had been discovered at a former inspection, were again seen by the medical officer in order to note the improvement and to see if appropriate treatment had been obtained.

Medical inspection of special cases has also been carried out at the school clinic on two mornings a week. Children are brought there by their parents for advice, or are sent by the teachers if they suspect that the children show any departure from health. The school nurses and school attendance officers also send children to the clinic if they are absent from school and appear to be in need of medical advice and treatment.

V.—FINDINGS OF MEDICAL INSPECTION.

(a) **Uncleanliness.**—The incidence of uncleanliness was rather higher than usual, namely, 2.4 per cent. This was probably due to the fact that fewer cleanliness inspections were held owing to the shortage of one school nurse for a portion of the year.

(b) **Minor Ailments.**—These were of the usual variety.

(c) **Enlargement of Tonsils and Adenoids.**—This condition was again the second most common defect found during routine inspection, but the greater proportion of the cases required observation only.

(d) **Tuberculosis.**—Three cases of non-pulmonary tuberculosis were found at routine inspections and also one case of definite pulmonary disease, and three suspected cases.

(e) **Skin Diseases.**—These were very much as usual, but the number of cases of Scabies was only 5 compared with 21 in the previous year.

(f) **External Eye Diseases.**—56 children were found to be suffering from inflammatory conditions of the eye and all received treatment. Squint occurred in 33 children, of whom 29 were in need of treatment.

(g) **Vision.**—At inspections 151 children were found to have defective vision, and of these 123 required treatment.

(h) **Ear Disease.**—Running ears were seen in 58 children and all required treatment except one.

(i) **Dental Defect** is by far the commonest defect found at inspection. No less than 92 per cent. of the children were found to be in need of treatment, and the necessary treatment was accepted by 75 per cent. of those found defective.

(j) **Crippling Defects.**—A census of children suffering from crippling conditions was made during the year and is alluded to under Special Enquiries.

VI.—INFECTIOUS DISEASE.

The suggestions of the Memorandum on Closure and Exclusion from School are followed. All children known to be suffering from infectious diseases are excluded from school by the certificate of the school medical officer, and contacts are also excluded for the

requisite period. All absentee children who are likely to be suffering from infectious disease are visited by the school nurses and also by the medical officer if necessary. There was no serious incidence of infectious disease, and no school or department had to be closed during the year. In some of the infants' departments there were a good many cases of whooping cough in the early part of the year.

VII.—FOLLOWING UP.

Whenever at routine medical inspection a child is found to be suffering from any defect, a special card is made out and the child is seen periodically during the year. A record is kept of the condition, and whether treatment recommended has been carried out. The school nurses also visit these children when necessary for the purpose of following up the recommendations for treatment. During the year the school nurses made 174 visits with regard to defects found at medical inspections, and 255 visits to the parents of children who were found to be suffering from dental defects. Some of this following up work of the nurses had to be curtailed during the first three months of the year owing to the staff being depleted by one school nurse.

Certain children with defects such as running ears, enlarged glands, skin diseases, etc., attend the clinic regularly as specials, and their progress is carefully watched. In addition, the medical officer keeps a record of all exceptional children and examines them from time to time and notes their progress.

The schools are visited about every three months by the school nurses for the purpose of inspecting the pupils for cleanliness. During the year, 11,548 examinations were made. Owing to the shortage of one nurse this work was cut down, during the early part of the year. The school nurses also visit the homes of those children who are found to be absent by the school attendance officers and appear to be in bad health. By this means infectious disease is often discovered. The senior school nurse attends the clinic daily for the treatment of minor ailments, and assists the medical officer and school dentist during the special sessions.

The following table gives a summary of the work of the school nurses during 1929.

SUMMARY OF SCHOOL NURSES WORK FOR 1929.

	Nurse Sherlock.	Nurse Blair.	Nurse Shakespeare	Nurse Ottewell.	Nurse Jackson.	Nurse Blackburn.	TOTAL.
Visits <i>re</i> Infectious Diseases	7	145	1	136	84	24	397
Visits <i>re</i> other Diseases	11	123	14	62	37	27	274
Visits <i>re</i> Inspection for Cleanliness	2	4	—	—	4	1	11
Visits to Schools for Medical Inspections	2	79	13	25	11	2	132
Special Visits to Schools	5	53	4	24	16	9	111
Visits to Schools for Cleanliness	1	34	—	21	15	—	71
Number of Children Examined for Cleanliness ..	229	6,067	—	3,882	1,370	—	11,548
Number of Notices issued <i>re</i> Verminous Condition	8	150	—	63	24	—	245
Number of Notices issued <i>re</i> other Defects	—	79	—	39	9	—	127
Visits <i>re</i> Medical Inspection Defects	2	66	—	74	27	5	174
Attendances at Refraction Clinic	12	1	—	—	—	—	13
Visits <i>re</i> Refraction Cases	7	27	1	15	38	5	93
Visits to Schools for Dental Inspections	3	4	—	2	—	—	9
Attendances at Dental Clinic	79	8	—	2	2	—	91
Visits <i>re</i> Dental Defects	19	58	—	54	35	89	255
Attendances at School Clinic	196	16	—	—	—	1	213
Attendances of Children at Minor Ailments Clinic	2,889	318	—	—	—	—	3,207
Visits to Housewifery Centre for Health Talks ..	18	—	—	—	—	—	18
Special Visits <i>re</i> M.D. Children	—	—	—	—	—	78	78

The following is an analysis of 671 visits paid by School Nurses to absentees from school on medical or alleged medical grounds :—

Infectious Diseases	354	Boils	3
Infectious Disease Contacts ..	43	Headache	1
Influenza	55	Impetigo	3
Rashes, not defined	3	Injuries and Sprains	4
Bronchitis	41	Septic Wounds	6
Coughs and Colds	63	Pyrexia	1
Tonsillitis	18	Earache	3
Adenitis	4	Digestive Disturbances	8
Toothache	5	Miscellaneous Conditions	21
Conjunctivitis	5	Fitness for School	14
Blepharitis	1	Out or returned to school when	
Sickness and Diarrhoea	5	visited	12
Rheumatism	4	Referred to Clinic	3
Debility	8	Defective Clothing	3

VIII.—MEDICAL TREATMENT.

If a child is found to be suffering from any disability requiring treatment, the parent is advised to consult the usual medical attendant. But for those who cannot afford to do so, special facilities exist.

(a) **Minor Ailments.**—The school clinic is open every morning for the treatment of minor ailments, and a nurse is present. The medical officer attends on two mornings a week.

(b) **Tonsils and Adenoids.**—For those who cannot afford to be treated privately, arrangements for treatment exist with the Nottingham Throat, Ear and Nose Hospital. The scheme is very satisfactory and the results are excellent. During the year 123 children were treated under the Authority's scheme; while 8 children received treatment apart from the scheme. Financial assistance towards the cost of the treatment is given by the Education Authority in deserving cases.

(c) **Tuberculosis** is treated under arrangements made by the Derbyshire County Council. The Tuberculosis Dispensary is open on two half-days a week, and cases of definite or suspected disease are sent to be examined by the Tuberculosis Officer. Sanatorium treatment is available.

(d) **Skin Disease.**—Minor skin complaints are treated at the school clinic.

(e) (f) **Eye Diseases** are treated at the special eye clinic provided by the Authority, at which the County Ophthalmic Surgeon attends. During the year 185 children were treated at the clinic for errors of refraction, and spectacles were prescribed for 105 children. Those parents who cannot afford to pay the whole cost of spectacles receive financial help from the Authority. During the year this

Authority became a subscriber to the Derbyshire Hospital for Sick Children, and in consequence is able to obtain the admission of children requiring ophthalmic operations to the eye wards of that hospital. Cases of severe squint have been admitted and successfully operated on. As the operating surgeon at the hospital is also the Authority's ophthalmic surgeon who attends the clinic, continuity of treatment is preserved.

(g) **Ear Diseases** are treated at the clinic or referred to the hospitals. Daily treatment is given to many children suffering from ear discharge. On the whole these cases have responded well to treatment.

(h) **Dental Defects.**—A comprehensive dental scheme is in force. The school dentist inspects a fresh group every year in all the schools. Those children who require treatment and whose parents agree to participate in the scheme are treated at the clinic by appointment. Re-inspections are also made of children who came into the scheme in former years, and treatment is offered to those who need it. During the year 1,938 children were inspected, and 1,783 found to be in need of treatment. Of these children 1,349 were treated.

(i) **Crippling Defects.**—Treatment for these children has been obtained as before at the neighbouring hospitals. At last, however, this Authority has established an Orthopædic Scheme, which comes into operation in 1930. The scheme is in connection with the County Authority. In-patients are to be received into Bretby Hall Orthopædic Hospital, owned by the Derbyshire County Council. Clinics are to be held at Ilkeston, and will be attended by the County Orthopædic Surgeon at regular intervals. One of the County Orthopædic nurses will attend the intermediate clinics. The scheme also embraces pre-school children.

IX.—OPEN-AIR EDUCATION.

Open-air classes are held when the weather is suitable in either playground or playing field. School journeys have been taken to places of interest in the district. During the summer 42 boys and girls attended the Derbyshire School Camp. There are no open-air classrooms and no open-air schools. The question of establishing an open-air school is under consideration and forms an item in the new education three years' programme. There appear to be constantly in the Borough from 50 to 100 children whose state of health is such that they would greatly benefit by attending an open-air school.

X.—PHYSICAL TRAINING.

Organised Games.—Full use has been made of the playing fields belonging to the various schools and in general the facilities for organised games have been increased. Eight tennis courts are available every day during the season for the use of the girls. Each school holds its own athletic sports and there is also a larger sports meeting at which all the schools are represented.

Swimming.—Classes have attended at the swimming baths as in former years, and a swimming gala was held in July: Proficiency certificates were again awarded. There were 17 children who gained first-class certificates and 28 who gained second-class certificates. In addition, 73 learners certificates were awarded.

Voluntary Associations.—There are two voluntary bodies, namely the Ilkeston and District Schools' Football Association and the Ilkeston Schools' Sports Associations. The action of these two associations in rearranging their leagues and competitions in order to fit in with the new distribution of children in the reorganised schools was much appreciated.

XI.—PROVISION OF MEALS.

The Authority has provided a feeding centre at Gladstone School which may be attended by any child in the Borough who is specially recommended by the teachers and the school medical officer on the ground of malnutrition which is such as to prevent the child from obtaining full benefit from his instruction. Two meals are given a day, and the average daily attendance is about 40. The medical officer selects cases of malnutrition whom he may find either during medical inspections, or among those children referred to him at the clinic. The dietary has been thoroughly considered by the medical officer from time to time, and as a result of his advice, certain alterations have been made so as to supply a sufficiency of accessory food factors. Viking margarine has been substituted for ordinary margarine, and milk pudding is supplied daily. Liver has been given weekly, and fresh fruit occasionally.

The tram fares of children who attend the feeding centre from a distance are paid by the Authority. There is no doubt that the children derive great benefit from the meals. The average cost per meal per child is 4½d., and 57 individual children received meals.

XII.—SCHOOL BATHS.

There are no baths in the older schools, but a bath has been supplied in the new Cavendish School and is being tentatively patronised by the pupils.

XIII.—CO-OPERATION OF PARENTS.

Before a routine medical inspection is held, the parents of the children to be examined are notified, and an opportunity is given for them to be present. On the whole, the attendance of parents at inspections is satisfactory, and is especially good in certain schools. When a child is found to be defective, the parent is notified and informed of the treatment recommended. If the parent does not consent to treatment within a short time, the school nurse pays a visit and points out to the parent the need for treatment, and the method of obtaining the treatment suitable to the special case. When necessary, these visits are repeated and are the most successful means of gaining the co-operation of the parents.

XIV.—CO-OPERATION OF TEACHERS.

The Head Teachers have been very helpful in facilitating the work of medical inspection by supplying lists of children when asked for, and by arranging accommodation for the actual inspection. As only one school possesses a medical inspection room, this has often involved no little ingenuity. The Head Teachers have promptly sent to the clinic children whom they suspect to be in ill health, and have carried out conscientiously any recommendations made by the medical officer with regard to their pupils.

XV.—CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

The School Attendance Officers have co-operated by sending lists of absentee children, and have brought to the notice of the medical officer any children which appeared to be in need of medical attention.

XVI.—CO-OPERATION OF VOLUNTARY BODIES.

The National Society for the Prevention of Cruelty to Children has, through the energy of the District Inspector, been very helpful especially in looking after the interests of crippled children. The Tuberculous After-Care Committee is always ready to co-operate in the interests of tuberculous patients. The Ilkeston Hospital has been ready at all times to place its resources at the disposal of the school children.

XVII.—BLIND, DEAF AND EPILEPTIC CHILDREN.

(a) The methods adopted for ascertaining defective children follow the lines suggested by the Board. Defective children are discovered by the medical officer at the inspections, and by the nurses. They are also brought to notice by the teachers and by the school attendance officers. Special arrangements have been made to ascertain all mentally deficient children by the testing of all children who are regarded as backward by the teachers. All defective and exceptional children are examined periodically by the medical officer, and records are kept on card indices.

There are no blind children of school age..

There are five totally deaf children, all of whom are maintained in the Royal Institution for the Deaf at Derby.

Three children suffering from mild epilepsy are attending ordinary classes, whilst one epileptic child is at present unable to attend school and is visited from time to time by the nurse.

Of the physically defective children two were at sanatoria or hospital at the end of the year.

(b) Mentally defective children are taught in special classes in many schools, and their progress is carefully watched by the Medical Officer. Those who are ineducable are reported to the County Authority under the Mental Deficiency Act, 1913. Seven ineducable children were reported during the year.

(c) No Special School is maintained by this Authority.

XVIII.—NURSERY SCHOOLS.

The Authority possesses no Nursery Schools, but their establishment is under consideration and forms a part of the Education Programme for the next three years.

XIX.—SECONDARY SCHOOLS.

XX.—CONTINUATION SCHOOLS.

These do not come under the power of this Authority.

XXI.—EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

The Chairman of the Education Committee is also Chairman of the Juvenile Employment Committee. The School Medical Officer, Director of Education and Superintendent School Attendance Officer are appointed to this Committee in an advisory capacity. In addition, several members of the Education Committee are also on the Juvenile Employment Committee.

XXII.—SPECIAL ENQUIRIES.

An enquiry was made to ascertain the number of school children suffering from non-tuberculous crippling conditions. The total number of such children discovered was 35. The different causes of the crippling were as follows :—

Infantile paralysis	14
Congenital paralysis of limbs ..	6
Crippling due to injury	5
Rickets	5
Arrested growth of limbs ..	3
Wry neck	2
	—
Total ..	35
	==

XXIII.—MISCELLANEOUS.

(1) A Health Week was held in October, and health propaganda was carried out in all the schools. The Medical Officer gave an address to all the senior and junior pupils on a health subject, and prizes were given for the best essays on the subject of the address. Health Films were shown at the Kings' Picture House to the senior school children, and parties of children visited the Corporation Sewage Works, and the Co-operative Society's Model Bakery. Parties of teachers also visited a Dairy Farm producing Certified Milk, the Water Works at Whatstandwell, and the Midland Agricultural and Dairy College.

(2) **Reorganisation of the Schools** into senior and junior schools was effected completely in September. It involved a considerable re-sorting of medical records. The scheme has the advantage of concentrating the senior children in certain schools.

(3) **Instruction in Hygiene.**—There is a housewifery centre owned by this Authority, to which 12 senior girls are sent every month for a course of instruction. In June arrangements were made for the senior health visitor and school nurse, Miss Sherlock, to give a lesson once a week to the girls on hygiene and the management of infants. It has frequently been possible also for the girls to pay a visit to the Maternity Home and watch a baby being bathed.

(4) **School Clinic.**—The volume of work has now outgrown the size of the clinic and extension of the premises is being considered. This is urgently required, especially for the sake of the Orthopædic and Dental Schemes.

(5) **Coalfields Distress Fund.**—Work in connection with the local Distress Committee occupied a considerable amount of time of certain members of the staff. Lists of children who apparently were in need of boots or clothing were sent in by Head Teachers. Each case was then investigated by a sub-committee to ascertain the income of the family. In all deserving cases boots and clothing were given. There is no doubt that the issue of boots and articles of clothing by this Fund did a great deal to preserve the health of school children whose parents had fallen on bad times owing to the industrial situation. The following list shows the number of articles issued :—

Boots	..	..	..	..	..	..	..	461
BOYS' CLOTHING.				GIRLS' CLOTHING.				
Jerseys	..	..	81	Vests	..	..	202	
Knickers	..	..	82	Hose	..	..	89	
Shirts	..	..	34	Knickers	..	..	98	

XXIV.—STATISTICAL TABLES.

MEDICAL INSPECTION RETURNS.

Table 1.—Return of Medical Inspections.

A.—ROUTINE MEDICAL INSPECTIONS.

No. of Code Group Inspections—

Entrants	..	..	..	..	..	304
Intermediates	..	..	..	..	..	637
Leavers	..	..	..	..	..	505
TOTAL ..						1,446
No. of other Routine Inspections	..	..	..	..	..	—

B.—OTHER INSPECTIONS.

Number of Special Inspections	..	..	..	1,150
No. of Re-Inspections	..	..	..	2,173
TOTAL ..				3,323

TABLE II.

A.—Return of defects found by Medical Inspection in the Year ended 31st December, 1929.

DEFECT OR DISEASE.				Routine Inspections		Special Inspections.	
				No. of	Defects.	No. of	Defects.
(1)				Re- quiring Treat- ment.	Requiring to be kept under ob- servation but not requiring Treatment.	Re- quiring Treat- ment.	Requiring to be kept under ob- servation but not requiring Treatment.
(1)				(2)	(3)	(4)	(5)
Malnutrition	..	..	..	1	17	—	—
Uncleanliness	..	..	..	4	—	7	—
Skin	Ringworm :						
	Scalp	..	..	2	—	6	—
	Body	..	..	—	—	2	—
	Scabies	..	..	—	—	5	—
	Impetigo	..	..	4	—	43	—
Other Diseases (Non-Tuberculous)				6	2	38	14

TABLE II.—continued.

DEFECT OR DISEASE.				Routine Inspections		Special Inspections.	
				No. of	Defects.	No. of	Defects.
				Re- quiring Treat- ment.	Requiring to be kept under ob- servation but not requiring Treatment.	Re- quiring Treat- ment.	Requiring to be kept under ob- servation but not requiring Treatment.
(1)	(2)	(3)	(4)	(5)			
Eye	Blepharitis	7	—	21	—		
	Conjunctivitis	1	—	24	—		
	Keratitis	1	—	2	—		
	Corneal Opacities	—	—	—	—		
	Defective Vision (excluding Squint).	105	27	18	1		
	Squint	25	4	4	—		
Ear	Other Conditions	—	1	5	2		
	Defective Hearing	8	9	12	—		
	Otitis Media	12	1	45	—		
	Other Ear Diseases	—	—	5	—		
Nose and Throat	Enlarged Tonsils only	28	235	44	31		
	Adenoids only	1	5	1	1		
Throat	Enlarged Tonsils and Adenoids	69	27	23	2		
	Other Conditions	3	7	25	18		
Enlarged Cervical Glands (Non- tuberculous)				—	18	—	7
Defective Speech				—	4	1	—
Teeth—Dental Diseases				774	—	43	—
Heart and Circulation	Heart Disease :						
	Organic	1	16	1	1		
	Functional	—	2	2	3		
Lungs	Anæmia	24	1	21	1		
	Bronchitis	19	24	51	9		
	Other Non-tuberculous Diseases	3	4	39	13		
	Pulmonary :						
Tuber- culosis	Definite	1	—	3	—		
	Suspected	—	3	—	6		
	Non-Pulmonary :						
	Glands	—	—	1	1		
	Spine	—	—	—	—		
	Hip	—	—	—	—		
	Other Bones & Joints	—	—	—	—		
	Skin	—	—	1	—		
Nervous System	Other forms	—	—	—	—		
	Epilepsy	—	—	2	1		
	Chorea	3	—	14	1		
Deformities	Other Conditions	—	2	3	5		
	Rickets	2	6	—	—		
	Spinal Curvature	—	—	1	—		
Other Defects and Diseases	Other Forms	2	8	6	1		
		9	7	201	297		

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

GROUP. (1)	NUMBER OF CHILDREN.		Percentage of Children found to require Treatment. (4)
	Inspected. (2)	Found to require Treatment. (3)	
Code Groups :—			
Entrants	304	49	16.1
Intermediates .. .	637	153	24.01
Leavers	505	105	20.7
Total (Code Groups) .. .	1,446	307	21.2
Other Routine Inspections ..	—	—	—

TABLE III.

**Numerical Returns of all Exceptional Children in the Area.
1929.**

			Boys.	Girls.	Total
Blind (including partially blind)	(1) Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind..	—	—	—
		Attending Public Elementary Schools	—	—	—
		At other Institutions ..	—	—	—
		At no School or Institution	—	—	—
	(2) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind..	—	—	—
		Attending Public Elementary Schools	—	1	1
		At other Institutions ..	—	—	—
		At no School or Institution	—	—	—
	(1) Suitable for training in a School or Class for the totally Deaf or Deaf and Dumb.	Attending Certified Schools or Classes for the Deaf..	3	2	5
		Attending Public Elementary Schools	—	—	—
		At other Institutions ..	—	—	—
		At no School or Institution	—	—	—
	(2) Suitable for training in a School or Class for the partially Deaf	Attending Certified Schools or Classes for the Deaf..	—	—	—
		Attending Public Elementary Schools	—	2	2
		At other Institutions ..	—	—	—
		At no School or Institution	—	—	—

TABLE III.—continued.

			Boys.	Girls.	Total
Mentally Defective	Feeble-minded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children	—	—	—
		Attending Public Elementary Schools	16	15	31
		At other Institutions ..	—	—	—
		At no School or Institution	2	—	2
	Notified to the Local Control Authority during the year.	Feeble-minded	—	—	—
		Imbeciles	—	—	—
		Idiots	—	—	—
Epileptics ..	Suffering from Severe Epilepsy.	Attending Certified Special Schools for Epileptics ..	—	—	—
		In Institutions other than Certified Special Schools	—	—	—
		Attending Public Elementary Schools	—	—	—
		At no School or Institution	1	—	1
	Suffering from Epilepsy which is not severe.	Attending Public Elementary Schools	2	1	3
		At no School or Institution	—	—	—
Physically Defective.	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	1	1
		At other Institutions ..	—	—	—
		At no School or Institution	—	—	—
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	1	1
		At Certified Residential Open-Air Schools ..	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schls.	18	8	26
		At other Institutions ..	—	—	—
		At no School or Institution	—	2	2
	Delicate Children (<i>e.g.</i> , pre- or latent tuberculosis, malnutrition, debility, anæmia, etc.	At Certified Residential Open-Air Schools ..	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schls.	20	14	34
		At other Institutions ..	—	—	—
		At no School or Institution	—	3	3
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	—	—
		At Public Elementary Schls.	1	2	3
		At other Institutions ..	—	—	—
		At no School or Institution	—	—	—
	Crippled Children (other than those with active Tuberculous Disease), <i>e.g.</i> , children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools	—	—	—
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools	—	—	—
		At Public Elementary Schls.	16	18	34
		At other Institutions ..	—	—	—
		At no School or Institution	5	4	9

TABLE IV.

Return of Defects Treated during the Year ended
31st December, 1929.

Treatment Table.

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

DISEASE OR DEFECT.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin :			
Ringworm—Scalp	7	—	7
Ringworm—Body	3	—	3
Scabies	5	—	5
Impetigo	210	—	210
Other Skin Diseases	20	—	20
Minor Eye Defects : (External and other, but excluding cases falling in Group III.)	34	—	34
Minor Ear Defects	41	—	41
Miscellaneous (<i>e.g.</i> minor injuries, bruises, sores, chilblains, etc.)	161	—	161
TOTAL	481	—	481

TABLE IV.

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

DEFECT OR DISEASE.	NO. OF DEFECTS DEALT WITH.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme.	Other-wise.	Total.
Errors of refraction (including Squint), operations for Squint should be recorded separately in the body of the Report)	185	9	—	194
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ..	7	—	—	7
TOTAL ..	192	9	—	201

Total number of Children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme	105
(b) Otherwise	9

Total number of Children who obtained or received spectacles :—

(a) Under the Authority's Scheme	80
(b) Otherwise	9

Group III.—Treatment of Defects of Nose and Throat.

NUMBER OF DEFECTS.				
RECEIVED OPERATIVE TREATMENT.			Received other forms of Treatment.	Total Number Treated.
Under the Authority's Scheme in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
123	8	131	—	131

Group IV.—Dental Defects.

(1) Number of Children who were :—

(a) Inspected by the Dentist :—

ROUTINE AGE GROUPS.							
7	8	9	10	11			
523	516	433	402	61		Total..	1,935
						Specials	3
						Grand Total..	1,938

(b)	Found to require Treatment	..	..	..	..	..	1,783
(c)	Actually Treated	..	..	..	..	..	1,349
(d)	Re-treated during the year as the result of periodical examination	..	..	..	..	..	827

(2) Half-days devoted to :—

Inspection	9	} Total 94
Treatment	85	

(3) Attendances made by children for treatment 1,542

(4) Fillings :—

Permanent teeth	58	} Total 118
Temporary teeth	60	

(5) Extractions :—

Permanent teeth	14	} Total 2,789
Temporary teeth	2,775	

(6) Administrations of general Anaesthetics for extractions Nil.

(7) Other operations (Dressings and Scalings) 144

Group V.—Uncleanliness and Verminous Conditions.

(1) Average number of visits per school made during the year by the School Nurses 3.5

(2) Total number of examinations of children in the schools by School Nurses 11,548

(3) Number of individual children found unclean 277

(4) Number of children cleansed under arrangements made by the Local Education Authority Nil.

(5) Number of cases in which legal proceedings were taken :—

(a)	Under the Education Act, 1921	..	..	..	Nil.
(b)	Under School Attendance Byelaws	..	..	..	Nil.





