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BOROUGH OF ILKESTON.



ANNUAL HEALTH

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— AND —

SCHOOL MEDICAL

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REPORT

---

For the Year 1933

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.

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### HEALTH, MATERNITY AND CHILD WELFARE COMMITTEE.

THE MAYOR (Councillor	Councillor Mrs. J. B. D. McINTYRE.
G. H. BROUGHTON).	J. REEVE.
Alderman J. WOOLLEY ( <i>Chairman</i> ).	J. RICHARDSON.
„ H. MOSS.	G. RILEY.
„ W. SHAKSPEARE.	J. E. SMITH.
„ S. SHAW.	W. SMITH.
„ E. SMITH.	H. TRUEMAN.
Councillor ADAMS.	Mrs. BALL.
„ H. E. BEARDSLEY.	„ COPLEY.
„ J. HENSHAW.	„ HARTSHORN.
„ E. A. HESKETT.	„ JONES.
„ A. HICKINBOTHAM.	„ MOSS.
„ J. KIRK.	„ SQUIRES.
„ W. LACEY.	„ THORNHILL.

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### HOUSING AND TOWN PLANNING COMMITTEE.

THE MAYOR (Councillor	Councillor Mrs. J. B. D.
G. H. BROUGHTON).	McINTYRE.
Alderman H. MOSS.	J. A. MACDONALD
„ S. SHAW.	( <i>Chairman</i> ).
„ J. WOOLLEY.	G. RILEY.
Councillor J. HENSHAW.	G. W. WOOLLISCROFT.
„ A. HICKINBOTHAM.	



## PUBLIC HEALTH STAFF (1933).

*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:*

PATRICK HUGHES, M.B., B.S.—(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.

*Orthopædic Surgeon:*

G. A. Q. LENNANE, M.A., M.B., B.Ch.—(1) (2).

*Obstetric Consultant:*

C. D. LOCHRANE, M.D., F.R.C.S.Ed.—(1) (2).

*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 H. BLAIR, C.M.B.	(1).
Miss L. OTTEWELL, C.M.B.	(1).
Miss M. GARDINER, 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 and Housing and Town  
Planning Committees of the Borough of Ilkeston.*

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TOWN HALL,

ILKESTON.

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 1933.

The arrangement of the Report follows the plan of recent years, and is in the form suggested by the Ministry of Health.

The year was notable in witnessing the opening of the extension to the Sewage Works and the completion of the new water Reservoir at Marlpool. A start was made upon the important work of getting rid of insanitary dwelling houses. Sixteen clearance areas were declared towards the end of the year and since then all of the sixteen clearance orders have been confirmed. It is, in fact, the large amount of exacting work in connection with housing which is responsible for the lateness of this Report. I have to thank the Chairman and members of the Housing Committee for their stimulating co-operation and look confidently to their continued support in dealing with the remaining insanitary houses and in the future work of solving the problem of overcrowding.

I have also to thank sincerely the chairman and members of the Health Committee for their sustained interest and valuable inspiration in connection with all matters that affect the health of the community.

My thanks are also due to all the staff of the Health Department for their unflagging industry and loyal assistance.

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, 1931	..	..	..	..	..	..	32,813
Estimated 1932	..	..	..	..	..	..	32,690
Estimated 1933	..	..	..	..	..	..	32,580
No. of Inhabited Houses (1931 Census)	..	..	..	..	..	..	7,336
No. of Inhabited Houses (1933) according to Rate Books							7,735
No. of Families or Separate Occupiers (1931 Census)	..						7,907
Rateable Value, 31st March, 1933	..	..	..	..	..	..	£116,963
Sum represented by a Penny Rate	..	..	..	..	..	..	£455
Rates 14s. 0d. in the £ (1932-33).							

## EXTRACTS FROM VITAL STATISTICS.

Live Births.	TOTAL.	M.	F.	Birth Rate.
Legitimate ..	492	238	254	} 15.68
Illegitimate..	19	10	9	
	511	248	263	

The Birth Rate for England and Wales for 1933 was 14.4.

Still Births.	TOTAL.	M.	F.
Legitimate ..	27	14	13
Illegitimate ..	1	1	—
	28	15	13

Rate per 1,000 total births (live and still births) .. 51.9.

Deaths.	TOTAL.	M.	F.	Ilkeston.	Death Rate.
	401	216	185	12.3	Eng. & Wales. 12.3

## Deaths from Puerperal Causes :—

Puerperal Sepsis	..	..	..	..	—
Other Puerperal causes	..	..	..	..	1
				Total	1

Maternal Mortality Rate per 1,000 total live and still births .. 1.85

## Infant Mortality.

Death rate of Infants under 1 year of age per 1,000 live births :—

Legitimate per 1,000 legitimate births	..	75.2
Illegitimate per 1,000 illegitimate births		157.89
Total per 1,000 live births	..	78.27
Rate for England and Wales	..	64

## Specified Deaths.

Measles (all ages)	..	..	..	12
Whooping Cough (all ages)	..	..	..	1
Diarrhoea (under 2 years)	..	..	..	7



# BIRTH-RATES, DEATH-RATES, and ANALYSIS OF MORTALITY

DURING THE YEAR 1933. (Provisional figures).

(The mortality rates for England and Wales refer to the whole population, but for London and the towns to civilians only).

	RATE PER 1,000 POPULATION.		ANNUAL DEATH-RATE PER 1,000 POPULATION.								RATE PER 1,000 LIVE BIRTHS.		
	Live Births.	Still-births.	All Causes	Typhoid and Paratyphoid fevers.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under two years).	Total Deaths under one year.
England and Wales . . . .	14.4	0.62	12.3	0.01	0.00	0.05	0.02	0.05	0.06	0.57	0.54	7.1	64
118 County Boroughs and Great Towns, including London.	14.4	0.67	12.2	0.00	0.00	0.06	0.02	0.06	0.08	0.55	0.49	9.4	67
132 Smaller Towns (Estimated Resident Populations 25,000 to 50,000 at Census 1931).	14.5	0.63	11.0	0.00	0.00	0.04	0.02	0.04	0.04	0.53	0.44	4.9	56
London . . . . .	13.2	0.45	12.2	0.00	0.00	0.02	0.02	0.08	0.08	0.51	0.58	11.6	59
ILKESTON . . . . .	15.68	0.85	12.3	0.03	0.00	0.36	0.03	0.03	0.00	0.6	0.73	13.7	78.27

The maternal mortality rates for England and Wales are as follows: { per 1,000 Live Births . . . 1.79  
 " " Total Births . . . 1.71  
 Puerperal Sepsis. Others. Total.  
 2.63 2.52 4.42  
 4.23

Below is given a table which analyses the causes of the 401 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	75up
ALL CAUSES .. .. .	M.	216	25	9	8	4	12	24	62	38	34
	F.	185	16	8	4	4	11	21	47	34	40
1. Enteric Fever .. .. .	M.	—	—	—	—	—	—	—	—	—	—
	F.	1	—	—	—	—	1	—	—	—	—
2. Measles .. .. .	M.	7	4	1	2	—	—	—	—	—	—
	F.	5	1	3	1	—	—	—	—	—	—
3. Scarlet Fever .. .. .	M.	1	—	—	—	1	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
4. Whooping Cough .. .. .	M.	1	—	1	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
5. Diphtheria .. .. .	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
6. Influenza .. .. .	M.	12	—	—	—	—	1	3	4	1	3
	F.	8	—	—	—	—	1	2	2	1	2
7. Encephalitis Lethargica ..	M.	1	—	—	—	—	—	1	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
8. Cerebro Spinal Fever ..	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
9. Tuberculosis of Respira- tory System.	M.	10	—	—	—	—	3	3	3	1	—
	F.	9	—	—	—	—	5	4	—	—	—
10. Other Tuberculosis Dis- eases	M.	2	1	—	—	—	1	—	—	—	—
	F.	1	—	—	—	—	1	—	—	—	—
11. Syphilis .. .. .	M.	2	1	—	—	—	—	—	1	—	—
	F.	—	—	—	—	—	—	—	—	—	—
12. General Paralysis and Tabes.	M.	1	—	—	—	—	—	—	1	—	—
	F.	2	—	—	—	—	—	1	1	—	—
13. Cancer, Malignant Diseases	M.	19	—	—	—	1	—	2	12	3	1
	F.	29	—	—	—	—	—	5	15	5	4
14. Diabetes .. .. .	M.	1	—	—	—	—	—	—	1	—	—
	F.	3	—	—	—	—	—	1	2	—	—
15. Cerebral Haemorrhage ..	M.	7	—	—	—	—	—	—	2	3	2
	F.	11	—	—	—	—	—	—	3	4	4
16. Heart Disease .. .. .	M.	32	1	—	—	—	1	3	9	12	6
	F.	27	—	—	—	—	1	1	8	11	6
17. Aneurism .. .. .	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
18. Other Circulatory Diseases	M.	7	—	—	—	—	—	—	2	3	2
	F.	11	—	—	—	—	—	—	3	3	5
19. Bronchitis .. .. .	M.	9	—	1	—	—	—	1	1	4	2
	F.	13	—	1	—	—	—	1	2	4	5
20. Pneumonia (all forms) ..	M.	17	2	3	4	—	—	—	6	—	2
	F.	16	3	3	2	—	1	2	3	1	1
21. Other Respiratory Diseases	M.	3	—	—	—	—	—	1	—	2	—
	F.	1	—	—	—	—	1	—	—	—	—
22. Peptic Ulcer .. .. .	M.	5	—	—	—	—	—	1	4	—	—
	F.	1	—	—	—	—	—	—	1	—	—
23. Diarrhoea, etc. (under 2 years)	M.	4	3	1	—	—	—	—	—	—	—
	F.	3	3	—	—	—	—	—	—	—	—
24. Appendicitis .. .. .	M.	2	—	—	—	—	—	1	1	—	—
	F.	—	—	—	—	—	—	—	—	—	—
25. Cirrhosis of Liver .. .. .	M.	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—
26. Other Diseases of Liver, etc.	M.	—	—	—	—	—	—	—	—	—	—
	F.	1	—	—	—	—	—	—	—	1	—
27. Other Digestive Diseases	M.	8	—	—	—	—	1	1	5	1	—
	F.	5	1	—	1	1	—	1	—	—	1

(Continued over).



(Table continued).

CAUSES OF DEATH.	Sex	ALL AGES.	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65-75	75 up
28. Acute and Chronic Nephritis .. .. .	M.	1	-	1	-	-	-	-	-	-	-
	F.	5	-	-	-	1	-	-	2	2	-
29. Puerperal Sepsis .. ..	M.	-	-	-	-	-	-	-	-	-	-
	F.	-	-	-	-	-	-	-	-	-	-
30. Other Puerperal Causes ..	M.	-	-	-	-	-	-	-	-	-	-
	F.	1	-	-	-	-	-	1	-	-	-
31. Cong. Debility and Malformation, Prem. Birth	M.	11	11	-	-	-	-	-	-	-	-
	F.	7	7	-	-	-	-	-	-	-	-
32. Senility .. .. .	M.	14	-	-	-	-	-	-	-	1	13
	F.	9	-	-	-	-	-	-	-	-	9
33. Suicide .. .. .	M.	2	-	-	-	-	-	1	1	-	-
	F.	3	-	-	-	-	-	1	1	-	1
34. Other Deaths from Violence	M.	16	-	1	1	-	4	5	4	1	-
	F.	3	-	-	-	2	-	-	-	1	-
35. Other Defined Diseases..	M.	21	2	-	1	2	1	1	5	6	3
	F.	10	1	1	-	-	-	1	4	1	2
36. Causes ill-defined or unknown	M.	-	-	-	-	-	-	-	-	-	-
	F.	-	-	-	-	-	-	-	-	-	-

**Notes on Vital Statistics.**

The population for 1933 as estimated by the Registrar General was 32,580 and this estimate is 110 less than that for 1932. The number of live births was 511 and the number of deaths was 401 so that the "natural increase of the population," *i.e.*, the excess of births over deaths was also 110. In 1932 this figure was 184, so that the difference is 74. On analysis it is found that the components of this figure 74 consist of 23 fewer births and 51 more deaths than in the previous year. The fewer births correspond to a lower birth-rate namely 15.68, compared with 16.33 for 1932. This fall is in line with the birth-rate for England and Wales, which also fell from 15.3 to 14.4. The death rate however rose appreciably from 10.7 to 12.3 and the rate was the same as that for England and Wales.

The cause for the increased death rate during the year requires further consideration and the reason for it is not far to seek. Many years ago an increased death rate might be attributed to war, famine or pestilence. Civil war at least we hope is now a thing of the past. Famine can presumably be the result only of international war, and we also hope vainly perhaps, but nevertheless sincerely that this crude method of argument will not affect our vital statistics in this generation. There remains pestilence, and the character of this factor has altered considerably with the changing years. A few centuries ago the term would have meant plague, typhus, or smallpox; a few decades ago it would have



conveyed the idea of epidemics of cholera, or enteric fever ; but to-day the fluctuating death rate seems to depend chiefly upon the answer to the following question :—Was the year under review an “Influenza year” or not ? Now the year 1933 was very definitely an “influenza year,” and during the first three months there was an epidemic of influenza which, although short in time, was more severe in character than any since the great epidemic of 1918. The number of deaths from influenza was 20, which is twice that of the previous year. Another result was to increase the number of deaths from pneumonia, the number being 33, compared with 15 in the previous year. Whenever there is a high incidence of influenza it is noticed that there is always an increase in the number of deaths due to pneumonia.

Influenza is nowadays perhaps the most important of all communicable diseases in this country. The real fact seems to be that, in the present state of modern life with its bustling activity, its crowds and its rapid means of transport, the annual visitation of influenza (be it mild or severe) is to be expected, for it cannot be prevented unless new methods of control or cure are discovered. The average number of deaths from influenza every year in England and Wales is 14,000, and during the year 1933 the deaths reached the total of 22,890. The monetary cost of the disease to the nation owing to the loss of time, dislocation of business, loss of wages and cost of treatment of sick, must run into millions of pounds every year. And yet the placidity with which the general public endures this state of things is astonishing. One seldom hears of substantial gifts of money being made for research into the cause and means of control of influenza. Why not ? Perhaps it is because the public has never demanded it with a distinct and audible voice. In this country far too little organised medical research is being done, presumably on the grounds of expense, although in the course of one year the approved insurance societies pay out the sum of ten million pounds in sickness benefit. There can be no doubt that there is urgent need for well organised and adequately financed research work to be carried out into the subject of influenza control. Owing to its international bearings it might best be done in conjunction with the health organisation of the League of Nations.



There could be no sounder financial investment and no undertaking would be likely to yield greater benefits to humanity. It is good news to learn that at last an animal has been found which is susceptible to the disease and perhaps the humble ferret will indicate the hole into which the key of the problem will fit.

Another factor which helped to swell the death rate was an outbreak of measles during the early part of the year. This disease is not notifiable and therefore it is impossible to give actual figures. Owing, however, to the co-ordination which exists between the health and education departments it is possible to state that 412 school children were excluded from school in the course of the year due to the fact that they were actually suffering from measles. Perhaps a further 200 cases occurred among children under school age. The number of deaths from measles was recorded as 12, of which 9 occurred in children under two years of age. This disease is often treated in too light-hearted a manner, but when more isolation hospital accommodation is provided, it will be possible to offer treatment for the more severe cases.

The infantile mortality rate of 78.27 is still high, but the maternal mortality of 1.85 is quite low. Diseases of the heart and circulation accounted for the greatest number of deaths, namely 77, and diseases of the respiratory system came second with 59 deaths, while cancer and malignant disease was third with 48 deaths.

#### **Deaths from Violence.**

Suicide accounted for 5 deaths. Two were males of which one was due to drowning and one to hanging. The other three were females and included two from drowning and one from poisoning. There were 19 deaths due to other forms of violence of which 16 were males and 3 were females. They may be classified as follows :-

Industrial (pit accidents)	..	..	4
Cycling accidents	..	..	4
Run over by motor vehicle	..	..	4
Run over by horse vehicle	..	..	1
Other accidents	..	..	6

Of the latter six cases 2 were due to falls, 2 to drowning, 1 to swallowing poison accidentally and 1 to burns.

## SECTION II.

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

- (1) **FEVER.**—The Corporation Isolation Hospital is situated at Little Hallam on an excellent site with an open aspect. On a basis of 144 square feet per bed it has accommodation for 10 beds, though there are actually 18 beds. Persons resident outside the area have been admitted when request has been made. The Medical Officer of Health is the Medical Superintendent, and the nursing staff comprises a matron, sister and two nurses.
- (2) **SMALL POX.**—There is no separate Small Pox Hospital. Cases of Small Pox are treated in the Isolation Hospital if there are no cases of other infectious disease.
- (3) **MATERNITY HOME.**—The Municipal Maternity Home is situated in Park Avenue and contains nine beds for maternity cases. In 1933 the total number of cases was 156, of which 21 were resident outside this area. The Medical Officer of Health is the Medical Superintendent. Dr. A. Dobson resigned the appointment of Obstetric Physician on leaving the district after having given excellent service to the Home since it was opened in 1919. Dr. P. Hughes has occupied the appointment since the beginning of the year. Any practitioner, however, may attend his own patients by arrangement. The nursing staff consists of a matron, sister and two trained nurses. The Home is recognised by the Central Midwives Board as a training school for one pupil midwife.  
The above hospitals are under the management of the Public Health Committee of the Council.

**Hospitals provided by the County Council.**

- (4) **TUBERCULOSIS.**—The Sanatorium at Penmore is for the treatment of advanced female cases of pulmonary tuberculosis. Advanced male cases are accommodated at the Whitworth Hospital. Other pulmonary cases are treated at the Walton Sanatorium.

Cases of non-pulmonary tuberculosis are treated at the Bretby Hall Orthopaedic Hospital.



- (5) **ORTHOPÆDIC.**—Orthopaedic cases from this area are treated at the Bretby Hall Orthopaedic Hospital. This arrangement is part of the approved orthopaedic scheme of this Authority.
- (6) **BASFORD INSTITUTION.**—This former Poor Law Hospital is used by persons resident in this area. It is administered by the County Public Assistance Committee. Accommodation is available for Unmarried Mothers, Illegitimate Infants and Homeless Children.

#### **Other Hospitals.**

- (7) **THE DERBYSHIRE HOSPITAL FOR WOMEN.**—This authority has an arrangement for the admission of cases of puerperal fever and puerperal pyrexia to the above hospital, which is situated in Derby.
- (8) **ILKESTON HOSPITAL.**—This is a small voluntary general hospital situated in Heanor Road, consisting of 60 beds, of which 14 beds are for children. It has departments for X-ray, ultra-violet light, massage and dental treatment. It is managed by a Board of Governors, and the Honorary Medical Staff consists of three visiting surgeons and three visiting physicians and a dental surgeon. There is also a consulting physician and a consulting surgeon.
- (9) Other Hospitals which are used by residents of this area are :
- NOTTINGHAM GENERAL HOSPITAL.
  - NOTTINGHAM CHILDREN'S HOSPITAL.
  - NOTTINGHAM HOSPITAL FOR WOMEN.
  - NOTTINGHAM THROAT, EAR AND NOSE HOSPITAL.
  - NOTTINGHAM EYE INFIRMARY.
  - HARLOW WOOD ORTHOPÆDIC HOSPITAL.
  - DERBYSHIRE ROYAL INFIRMARY.
  - DERBYSHIRE HOSPITAL FOR SICK CHILDREN.

## CLINICS AND TREATMENTS CENTRES.

	SITUATION.	MEDICAL OFFICER IN ATTENDANCE.	WHEN HELD.	ACCOMMODATION.	PROVIDED BY
MATERNITY AND CHILD WELFARE CENTRES	(1) Albert Street	Dr. Hughes	Tuesdays, 2—4 p.m.	3 rooms	Ilkeston Corporation.
	(2) Wesley Street	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.
TUBERCULOSIS DISPENSARY	Albert Street	Dr. Kingston	Wednesdays, a.m. and p.m.	3 rooms	Derbyshire C.C.
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.



### **Maternity Home.**

This Home admitted 156 maternity cases which is four more than in the previous year. Overcrowding was prevented by limiting the booking of beds. In respect of three individual months the booking list had to be closed thereby refusing the reservation by ten applicants. More beds are required but better accommodation for staff and pre-natal examination purposes is even more urgent.

### **Isolation Hospital.**

The task of providing more adequate accommodation for cases of infectious disease still remains to be carried out. A moderately severe outbreak of infectious disease would place the Authority in a difficult position.

### **Ambulance Facilities.**

- (a) FOR INFECTIOUS CASES.—This Authority possesses a Morris Commercial Fever Ambulance capable of carrying two lying patients and two or three sitting patients. It is fitted with a zinc-lined compartment for the transport of infected bedding. This ambulance was acquired in 1930.
- (b) FOR NON-INFECTIOUS AND ACCIDENT CASES.—A Ford Ambulance owned by the Derbyshire Branch of the British Red Cross Society is kept at the Corporation garage and is readily available when needed.

### **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 belonging to this Authority.

### **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 11 midwives practising in the area during the year, of which 9 were certificated and 2 were *bona-fide* midwives practising previous to 1903. Midwives are neither employed nor subsidised by the Corporation for work in 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.

### **Laboratory Facilities.**

The examination and analysis of clinical material, water, milk and food stuffs is usually performed at the bacteriological and chemical laboratories belonging to the County of Derby.

### **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.

New Streets and Buildings, 1926.



## SECTION III.

**SANITARY CIRCUMSTANCES OF THE AREA.**

**Water.** The source of the water supply from the Meerbrook Sough at Whatstandwell and the recently enlarged Water Works belonging to the Ilkeston and Heanor Water Board were described in a previous report.

On the 31st May, 1933, the new storage reservoir constructed by the Ilkeston Borough was opened and brought into use. The reservoir is situated on an elevated site at Marlpool at a distance of 2 miles from the town and the cost of construction was about £13,400. Its capacity is 2 million gallons so that it is capable of holding two days' supply. The reservoir is built of reinforced concrete, the roof being supported on 106 steel pillars. The interior consists of only one compartment and the inside surface is lined with asphalte. Although it is strongly built with the object of withstanding subsidence yet it is disconcerting to have to record that this Authority has no control over the coal mining operations which may take place immediately beneath it.

The Shipley Reservoir with a capacity of 795,000 gallons has recently become unserviceable owing to serious fractures in its walls due to subsidence following mining operations. It is likely to be out of use for some years. Luckily the new reservoir at Marlpool was in commission before this one had to be abandoned.

The existing 14 inch supply main between Marlpool Reservoir and Shipley Reservoir was taken over as a distribution main, and a new 14 inch main was laid between the same two points and made to connect with the distribution system.

As regards the quantity of water available this Authority is very fortunate in having a remarkably constant source of supply. There was no shortage whatever during the year.

The quality remains very satisfactory. Samples of water were taken by the medical officer at intervals during the year, and the copy of a typical result of analysis is given, the sample having been taken from the new Marlpool Reservoir.

## Parts per 100,000.

Total Solids	..	..	..	..	17.60
Chlorine..	..	..	..	..	1.42.
Nitric Nitrogen	..	..	..	..	0.14.
Free Ammonia	..	..	..	..	absent.
Albuminoid Ammonia		..	..	..	0.001.
Temporary Hardness		..	..	..	5.00.
Permanent Hardness		..	..	..	7.00.

## Total number of organisms growing in Gelatin

at 21° C. in 48 hours	..	..	..	11 per c.c.
-----------------------	----	----	----	-------------

Total number of organisms growing on Agar

at 37° C. in 48 hours	..	..	..	5 per c.c.
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Bacillus Coli	..	..	..	..	absent in 100 c.c.
---------------	----	----	----	----	--------------------

*Report.* "This sample is of excellent quality."

### Water Consumption.

A table is given showing the consumption of water supplied by this Authority during the last three years.

Water Consumption for years ending :—	March, 1932.	March, 1933.	March, 1934.
<b>INSIDE AND OUTSIDE OF THE BOROUGH.</b>	<i>Gallons.</i>	<i>Gallons.</i>	<i>Gallons.</i>
Consumption for all purposes .. .. .	362,926,000	351,239,000	363,334,000
Average Daily Consumption .. .. .	991,601	962,298	995,435
Total Domestic Consumption .. .. .	265,594,000	259,859,000	269,620,000
Total Trade Consumption .. .. .	97,332,000	91,380,000	93,714,000
Consumption per head per day, Domestic .. .. .	21·61	21·15	22·07
" " " Trade .. .. .	7·62	7·44	7·68
Total Consumption per head per day .. .. .	29·23	28·59	29·75
Estimated population inside and outside .. .. .	33,570	33,660	33,470
<b>INSIDE THE BOROUGH only.</b>			
Total Consumption for Domestic purposes .. .. .	262,740,000	257,080,000	267,641,000
" " Trade purposes .. .. .	56,905,000	57,800,000	48,571,000
Consumption per head per day, Domestic .. .. .	21·62	21·21	22·08
" " " Trade .. .. .	4·68	4·77	4·01
Total Consumption per head per day .. .. .	26·30	25·98	26·09
Estimated Population inside Borough .. .. .	33,200	32,690	32,580
Estimated Consumption outside Borough for Domestic Purposes .. .. .	2,854,000	2,779,000	1,979,000
Consumption outside Borough—Measured Supply	40,427,000	33,580,000	45,143,000



**Rivers and Streams.**—The work of supervising the condition of the rivers and streams in this district is carried out by the Trent Fishery Board and the County Councils concerned. The Erewash stream reaches this area in a polluted condition, but efforts are made to prevent any further pollution while it forms the boundary of this sanitary area. The effluent from the Corporation Sewage Works is now satisfactory.

**New Extension of Sewage Works.**

**Sewage Disposal.**—The new extension to the Sewage Disposal Works was opened on 26th July, 1933. These extra works have been constructed at a cost of about £58,750 and enable the Disposal Works to deal with a dry weather flow of 1,125,000 gallons per day, and if necessary to treat the sewage of a population of 45,000 persons. A new concrete outfall sewer 30 inches in diameter was laid from Corporation Road to the canal, and a new storm overflow chamber was constructed on the north side of the canal. From this chamber a 24 inch storm water drain 110 yards long proceeds to the River Erewash and takes the storm water in excess of six times the dry weather flow. A new cast iron sewer 18 inches in diameter was laid from the storm overflow chamber to the Works to assist the existing sewers. An additional settling tank was constructed so as to bring the total capacity to 915,000 gallons, providing for a period of detention of over 19 hours. Two new storm water tanks were built giving a total capacity of 282,000 gallons. These deal by settling with any storm water in excess of three times the dry weather sewage flow. Two entirely new bacteria beds were constructed so as to bring the total number to six with a total area of 2 acres. The filtering material in the four old bacteria beds was washed and screened, and the beds were re-filled. Two new upward-flow humas tanks were also built and provision made for humas lagoon and for sludge drying lagoons. The old works were generally reconditioned and a well equipped laboratory was provided so that the effluent can be examined with accuracy, and the various processes can be checked at each stage.

**Drainage and Sewerage.**—A new relief sewer half a mile long was constructed to deal with the Awsworth Road area. A new length of sewer about 270 yards long was laid in Park Road from Millfield Road to a point near the Depot of the Traction Company.



**Closest Accommodation.**—There are now only 5 privy middens in this area, three being abolished during the year. The number of pail-closets at the end of the year was 166, of which 119 belong to houses and 47 are in connection with factories and workshops. They are all so situated that they cannot be connected to existing sewers. The provision of a new sewer is required in the Hallam Fields district. No conversions of pail-closets were carried out by the Authority during the year. Further details are given in the tables at the end of this report.

**Public Cleansing.**—No alteration of the existing method was made. Refuse removal is carried out by a contractor. Dry house refuse is collected in covered lorries, and is all disposed of by the process of controlled tipping. This method is perfectly satisfactory when properly supervised, and much derelict land within the borough has been reclaimed for useful purposes. Sufficient land for tipping is available. The contents of privies and earth closets are collected in covered iron filth carts by the contractor and disposed of by burying in trenches. Cesspools are emptied by private arrangement. Full particulars are given in the table at the end of this Report.

**Sanitary Inspection of the Area.**—Details are given in tabular form in the table headed Sanitary Inspection of the District.

**Smoke Abatement.**—During the year 26 smoke observations were taken and nuisances were remedied after serving informal notices in the majority of cases. One firm, however, persisted in producing black smoke after repeated warnings, and after an expert had been called in by the Authority to inspect the works and to show how the nuisance could be avoided. Legal action was taken and the firm was ordered to abate the nuisance within three months and to pay the costs of the action.

**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.

**Schools.**—As the Medical Officer of Health is also the School Medical Officer it is possible for effective steps to be taken to safeguard the health of the scholars. This subject is dealt with in the School Medical Report which follows this Report.



**Health Education.**—The annual Health Week was held in October, during which special attention was directed towards impressing on the scholars of the elementary and secondary schools the importance of preventing ill-health. A description of the work done is contained in the school report which follows later. This method of health teaching undoubtedly reaches the homes of the people as well as that given at the clinics and during the visits of the health visitors and school nurses. The journal "Better Health" was distributed during the year in the schools to the extent of 1,000 copies a month. The notice board for the display of posters which was formerly used by the Empire Marketing Board has been taken over by this Authority and is being used for the purpose of exhibiting health posters.

#### SECTION IV.

#### HOUSING.

##### HOUSING STATISTICS.

Number of New Houses erected during the year :—

(a) Total including numbers given separately under	(b)	262
(1) By the Local Authority .. .. .		156
(2) By other Local Authorities .. .. .		<i>Nil.</i>
(3) By other bodies or persons .. .. .		106
(b) With State assistance under the Housing Act :—		
(1) By the Local Authority :—		
(a) For the purpose of Part III. of the Act, 1925		156
(b) For other purposes .. .. .		<i>Nil.</i>
(2) By other bodies or persons .. .. .		<i>Nil.</i>
Total number of houses owned by the Local Authority		
at the end of the year 1933 .. .. .		566

##### HOUSE INSPECTION.

#### 1.—Inspection of Dwelling-houses during the year 1933.

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) .. .. .	242
(b) Number of inspections made for the purpose ..	3,821

(2) (a) Number of dwelling-houses (including under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 .. .. .	167
(b) Number of inspections made for the purpose ..	1,293
(3) Number of dwelling-houses found to be in a state so dangerous or injurious as to be unfit for human habitation .. .. .	7
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .. .. .	242

**2.—Remedy of defects during the year without Service of formal Notices.**

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers .. .. .	242
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**3.—Action under Statutory Powers during the year 1933.**

(a) Proceedings under Sections 17, 18, and 23 of the Housing Act, 1930.	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs .. ..	22
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By Owners .. .. .	19
(b) By Local Authority in default of Owners ..	<i>Nil.</i>
(b) Proceedings under Public Health Acts :—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	<i>Nil.</i>
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By Owners .. .. .	<i>Nil.</i>
(b) By Local Authority in default of Owners ..	<i>Nil.</i>
(c) Proceedings under sections 19 and 21 of the Housing Act, 1930 :—	
(1) Number of dwelling-houses in respect of which Demolition Orders were made .. .. .	7



- |   |             |
|---|-------------|
| (2) Number of dwelling-houses demolished in pursuance of Demolition Orders .. .. .  | 3           |
| (d) Proceedings under Section 20 of the Housing Act, 1930 :—  |             |
| (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made .. .. .  | <i>Nil.</i> |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .. .. . | <i>Nil.</i> |

### GENERAL OBSERVATIONS.

In the course of the year the Authority built 156 houses and thereby completed the Council housing estate off the Heanor Road, consisting of 186 houses of a remarkably good type in a healthy and pleasantly laid out site. These are the last houses to be built with the assistance of the 1925 Act subsidy. Private enterprise was responsible for 106 new houses, and this is the largest number of that category built in one year for more than twenty years. There is still, however, need for more houses of all kinds, especially for those at low rents, and there seems to be two main difficulties. One is the withdrawal of the subsidy, for it is found that the rents of the houses built under the 1933 Act are too high for the lower-paid wage earners. The other serious difficulty in this area is that of finding suitable sites for housing estates of sufficient size to produce the most economic building. The borough is already congested, and has a density of nearly 13 persons to the acre. Unfortunately, the strenuous efforts that were made to obtain an appreciable extension of the boundaries were not successful. The addition to the borough only consisted of two small areas which were practically built up. If the prospective subsidy returns in connection with an attempt to abolish the undoubted overcrowding which still prevails, the resulting housing estates will most probably have to be built outside the present boundaries of the borough.

In connection with the present drive to demolish insanitary dwellings, the Authority agreed to a provisional programme which aimed at the demolition of 175 houses and the re-housing of 738 displaced persons. Sixteen areas in this programme are now being dealt with. Further additions will have to be made as property becomes worn out. Attempts are being made to bring about the repair of unsatisfactory houses so as to save them if possible from becoming fit subjects for clearance orders.



There is an urgent need for a town-planning scheme. Houses of all sizes and shapes are being erected in odd vacant plots of land without suitable site planning, while ribbon-development is proceeding with great rapidity. Recent experience has shown that one of the reasons for dwelling houses becoming insanitary and being included in clearance areas is their bad arrangement, many, for instance, being built in back gardens or confined courts. It is surely illogical for an Authority to demolish such houses and yet remain without power to prevent further houses being built with a similar faulty arrangement. Proper zoning of areas would give confidence and a sense of security to prospective builders.

## SECTION V.

### INSPECTION AND SUPERVISION OF FOOD.

**Milk Supply.**—There are 7 registered cowsheds in this area and they are periodically inspected. The number of milk shops from which milk is retailed is 129. Samples are taken from time to time and submitted for examination, both for bacterial content and for tubercle bacilli. With regard to designated milk, one firm retailed Certified milk and another firm produced and retailed Pasteurised milk under Licence.

**Meat and Other Foods.**—There are 4 registered slaughter-houses and 14 licenced slaughter-houses. A high standard of inspection of the meat slaughtered or prepared on these premises is carried out. Systematic inspection is also performed of shops, stalls, vehicles and places where food is prepared. The amount of surrendered food stuffs is given in the tables at the end of this Report.

As before, a record was kept of the proportion of cattle and pigs slaughtered in this area, which showed signs of tuberculous affection, and is as follows :—

#### BOVINES.

Number of bovine animals slaughtered during the year .. .. .	1,965
Number found to be affected with Tuberculosis (in lungs only 22, in udder only 4) .. ..	50
Percentage of animals affected with Tuberculosis..	2.54%
Percentage of animals affected with Tuberculosis of the udder .. .. .	0.24%



**Pigs.**

Number of pigs slaughtered during the year ..	1,653
Number found to be affected with Tuberculosis ..	16
Percentage of pigs affected with Tuberculosis ..	0.96%

**Adulteration.**—The various Acts in connection with Food and Drugs are administered by the County.

**Chemical and Bacteriological Examination of Food.**—Work in connection with this is carried out in the chemical and bacteriological laboratories belonging to the County. No prosecutions were undertaken by this Authority.

**Nutrition.**—Dissemination with regard to knowledge in nutrition is for the most part carried out in the schools in connection with health instruction and in the science and cookery classes which are held. Similar information is imparted in the clinics and by the health visitors.

## SECTION VI.

**INFECTIOUS AND OTHER DISEASES.**

**General.**—Apart from influenza and measles which have already been referred to, there was no serious incidence of infectious disease. The total number of notifiable diseases actually notified was 156, and of these 79 were cases of chicken pox, which is locally notifiable, and 31 were of tuberculosis. If both these diseases are excluded the number was 46. A stock of anti-toxin sera is maintained in the Health Department for the treatment of diphtheria, scarlet fever, puerperal fever and cerebro-spinal fever, and is available gratis for the use of medical practitioners. The members of the staff in the Isolation Hospital are Schick-tested and immunised against diphtheria if necessary. There is satisfactory co-ordination with the schools with regard to the occurrence of infectious disease and the exclusion of contacts.

The total number of pathological and bacteriological specimens which were sent from this area to the County Laboratory at Derby during the year was 135, and of these 105 were sent by practitioners and 30 by the Isolation Hospital.

**Scarlet Fever.**—The number of cases notified was 13 of which 8 were treated in hospital. All the cases were mild except one, who developed a fatal acute nephritis.

**Diphtheria.**—There were 10 notifications and 9 were treated in hospital. Every case made a satisfactory recovery without complications.

**Enteric Fever.**—One case was notified.

**Cerebro-Spinal Fever.**—One case of this complaint was notified and was treated in hospital. He made a good recovery.

**Polio-Myelitis.**—One case was notified within a few days of the onset, and was removed to hospital.

**Puerperal Pyrexia.**—Five cases were notified and 4 were removed to hospital. All the cases made satisfactory recoveries.

**Measles.**—There was an extensive incidence of measles in the early part of the year, the school intimations showing that there were 412 cases among school children. There were 12 deaths during the year, all the fatal cases being below the age of 5 years.

**Influenza.**—For three or four weeks the incidence was wide-spread and the type severe.

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

**Cancer.**—The number of deaths from cancer was 48, an increase of 3 on the figure for last year. Facilities exist for obtaining skilled diagnosis and specialist treatment at the neighbouring large hospitals, and radium treatment can be obtained when necessary. The accompanying table shows the particular organs affected in the 48 fatal cases and the relation to age and sex.

#### CANCER MORTALITY TABLE, 1933.

Site Affected, Sex and age at Death.

Total Cases.	SITE.	All Ages.		10-20		30-40		40-50		50-60		60-70		70-80	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F
10	Large Intestine ..	4	6	—	—	—	—	—	—	3	—	4	1	1	1
7	Breast ..	—	7	—	—	—	—	1	—	1	—	2	—	—	2
13	Stomach ..	8	5	—	—	—	—	1	2	5	—	2	3	—	—
5	Rectum ..	2	3	—	—	1	—	—	—	1	—	1	—	1	1
1	Gall Bladder ..	—	1	—	—	—	—	—	—	—	—	1	—	—	—
6	Uterus ..	—	6	—	—	2	—	2	—	1	—	—	—	—	1
1	Neck ..	1	—	—	—	—	—	—	—	—	—	1	—	—	—
1	Brain and Cord ..	1	—	1	—	—	—	—	—	—	—	—	—	—	—
1	Lung ..	1	—	—	—	1	—	—	—	—	—	—	—	—	—
1	Liver ..	1	—	—	—	—	—	—	—	—	—	—	—	1	—
1	Ovary ..	—	1	—	—	—	—	1	—	—	—	—	—	—	—
1	Larynx ..	1	—	—	—	—	—	—	—	—	—	1	—	—	—
48	All Sites ..	19	29	1	—	1	3	1	6	9	2	8	8	3	5



**Venereal Diseases.** The following table gives an indication of the incidence of this group of diseases.

**Number of New Cases of Venereal Diseases resident in  
Ilkeston treated during 1933.**

	SYPHILIS.		GONORRHOEA.		TOTAL.	
	Male.	Female.	Male.	Female.	Male.	Female.
Nottingham .. ..	6	2	19	1	25	3
Derby .. ..	—	1	—	—	—	1
TOTALS ..	6	3	19	1	25	4

Total number of new cases .. .. 29 persons.

**Prevalence of and Control over Notifiable Diseases.**

A table is given to show the prevalence of and control over notifiable diseases.

DISEASE.	No. Notified.	No. Removed to Hospital.	Total Deaths.
Tuberculosis, Pulmonary ..	24	17	19
Tuberculosis, other forms ..	7	4	3
Pneumonia (all forms) ..	10	—	33
Scarlet Fever .. ..	13	8	1
Diphtheria .. ..	10	9	—
Erysipelas .. ..	4	—	—
Chicken-Pox .. ..	79	—	—
Puerperal Pyrexia .. ..	5	4	—
Cerebro-Spinal Fever ..	1	1	—
Polio-Myelitis .. ..	1	1	—
Ophthalmia Neonatorum ..	1	—	—
Enteric Fever .. ..	1	1	1

**OPHTHALMIA NEONATORUM.**

**TABLE.**

CASES.			Vision Un- impaired.	Vision impaired.	Total Blindness.	Deaths.
Notified.	Treated.					
	At home.	In hospital				
1	1	-	1	-	-	-

**SEX AND AGE DISTRIBUTION OF CASES OF NOTIFIABLE  
DISEASES DURING 1933.**

AGE GROUP.	Sex.	Pneumonia all forms.	Chicken-Pox.	Scarlet Fever.	Diphtheria.	Erysipelas.	Puerperal Pyrexia.	Cerebro. Spinal Fever.	Ophthalmia Neonatorum.	Poliomyelitis.	Enteric Fever.
0—1	M.	-	-	-	-	-	-	-	1	-	-
	F.	-	1	-	-	-	-	-	-	-	-
1—2	M.	-	-	-	-	-	-	-	-	-	-
	F.	-	4	-	-	-	-	-	-	-	-
2—3	M.	-	2	1	-	-	-	-	-	-	-
	F.	-	4	-	-	-	-	-	-	-	-
3—4	M.	-	2	1	-	-	-	1	-	-	-
	F.	-	6	-	-	-	-	-	-	-	-
4—5	M.	-	2	-	-	-	-	-	-	-	-
	F.	-	3	-	-	-	-	-	-	-	-
5—10	M.	-	20	1	2	-	-	-	-	1	-
	F.	-	24	5	2	-	-	-	-	-	-
10—15	M.	-	4	3	1	-	-	-	-	-	-
	F.	-	4	-	3	-	-	-	-	-	-
15—20	M.	-	-	-	2	-	-	-	-	-	-
	F.	-	1	-	-	-	-	-	-	-	1
20—35	M.	3	1	1	-	1	-	-	-	-	-
	F.	2	1	1	-	1	-	-	-	-	-
35—45	M.	3	-	-	-	-	-	-	-	-	-
	F.	-	-	-	-	-	5	-	-	-	-
45—65	M.	1	-	-	-	1	-	-	-	-	-
	F.	1	-	-	-	1	-	-	-	-	-
65 up- wards	M.	-	-	-	-	-	-	-	-	-	-
	F.	-	-	-	-	-	-	-	-	-	-
Total all ages	M.	7	31	7	5	2	-	1	1	1	-
	F.	3	48	6	5	2	5	-	-	-	1
GRAND TOTAL		10	79	13	10	4	5	1	1	1	1



## SECTION VII.

**TUBERCULOSIS.**

There were 22 deaths from tuberculosis during the year, and of these 19 were due to the respiratory form. Of these, 5 cases were not notified.

The number of cases of respiratory tuberculosis notified were 24, and the number of non-respiratory cases, *i.e.*, disease of glands, bones and joints, was 7.

There was an increase in the total attendances at the tuberculosis dispensary from 676 to 746. The published tables show the result of the year's work.

**Public Health (Prevention of Tuberculosis) Regulations, 1925.**

No action had to be taken under these Regulations during the year.

**Public Health Act, 1925 : Section 62.**

No action was taken under this section.

Particulars of new cases of tuberculosis and deaths from this cause are given in the following table.

AGE PERIODS.			NEW CASES.				DEATHS.			
			Respiratory.		Non-respiratory.		Respiratory.		Non-respiratory.	
			M.	F.	M.	F.	M.	F.	M.	F.
0	..	..	—	—	—	—	—	—	1	—
1	..	..	—	—	1	—	—	—	—	—
5	..	..	1	—	1	1	—	—	—	—
10	..	..	1	—	1	1	—	—	—	—
15	..	..	3	3	—	—	1	2	1	—
20	..	..	1	3	—	1	2	3	—	1
25	..	..	2	5	—	1	2	3	—	—
35	..	..	1	—	—	—	2	1	—	—
45	..	..	—	1	—	—	—	—	—	—
55	..	..	2	1	—	—	2	—	—	—
65 and upwards			1	—	—	—	1	—	—	—
TOTAL	..		12	12	3	4	10	9	2	1

# RETURN OF NEW PATIENTS WHO ATTENDED ILKESTON DISPENSARY DURING 1933.

AGE.	Males		Females		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.
Over 15 years of age	28	23	198	19	18	1	13	2	3	-	1	32	1	67	10	2			
Under 15 years of age	15	8	114	6	1	5	2	-	3	2	-	17	1	22	1	-			

Non-pulmonary cases :—Cervical Glands 4, Spine and Hips 1, Knee 1.

# RETURN OF OLD PATIENTS WHO ATTENDED ILKESTON DISPENSARY DURING 1933.

AGE.	Males		Females		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.
Over 15 years of age	47	42	238	89	74	14	16	3	10	-	14	5	2	60	17	8			
Under 15 years of age	14	16	195	30	15	16	2	-	1	2	-	5	2	15	1	-			

Non-pulmonary cases :—Cervical Glands 15, Lupus 3, Knee 1, Spine 6, Hip Joint 3, Ankle 1, Abdomen 1,



## SECTION VIII.

**MATERNITY AND CHILD WELFARE.**

**Ante-Natal Care.**—Every session of the Ante-natal Clinic is attended by the specialist medical officer, Dr. Margaret Glen Bott. The sessions were held on the first three Mondays of each month. The number of individual patients who attended during the year was 188, and of these 154 were new cases. The number of sessions held was 36, and the total number of attendances was 609. The average number of patients who attended at each session was 17. This Clinic is doing valuable work. Not only are expectant mothers reassured and guarded against possible danger, but the midwives who will attend them and who accompany the majority of the patients to the Clinic also receive advice with regard to the management of the case. The capable way in which this Clinic is conducted is undoubtedly an important cause of the low incidence of the mortality from puerperal conditions. Seven patients were sent to the Nottingham Womens' Hospital for Caesarean operation, and all had live and healthy babies.

**Midwives.**—There were no alterations as regards the employment or subsidising of midwives. There were 11 midwives in the Borough, of which 9 were certificated and 2 were bona-fide midwives practising previous to 1903. The number of births notified by midwives was 550.

**Municipal Maternity Home.**—The number of cases admitted to the Home during the year was 156. Once again the available accommodation proved insufficient for the demand and the booking of 10 expectant mothers had to be refused. The statistics for 1933 are given in the following table.

- |   |   |
|---|---|
| 1.—Name of Institution: The Maternity Home,<br>Ilkeston, Derbyshire.                          |   |
| 2.—Number of maternity beds in the Institution<br>(exclusive of isolation and labour beds) .. | 9 |

3.—Number of maternity cases admitted during the year .. .. .	156
4.—Average duration of stay .. .. .	14 days.
5.—Number of cases delivered by—	
(a) Midwives .. .. .	139
(b) Doctors .. .. .	17
6.—Number of cases in which medical assistance was sought by a midwife in emergency ..	26
7.—Number of cases notified as—	
(a) Puerperal Fever .. .. .	Nil.
(b) Puerperal Pyrexia.. .. .	Nil.
8.—Number of cases of pemphigus neonatorum ..	Nil.
9.—Number of infants not entirely breastfed while in the Institution .. .. .	5
10.—(a) Number of cases notified as Ophthalmia Neonatorum .. .. .	Nil.
(b) Result of treatment in each case .. ..	Nil.
11.—(a) Number of maternal deaths .. .. .	Nil.
(b) Cause of death in each case .. .. .	Nil.
12.—(a) Number of infant deaths—	
(i) Stillborn .. .. .	5
(ii) Within 10 days of birth .. .. .	2
(b) Cause of death in each case, and results of post-mortem examination (if obtainable)—	
(i) (a) Hydramnios-Malformation.	
(b) Macerated Foetus.	
(c) Hydrocephalus—Generally Malformed.	
(d) Death in Utero (premature).	
(e) Macerated Foetus.	
(ii)(a) Asphyxia Neonatorum.	
(b) Melaena Neonatorum.	

**Home Visiting.**—There are four health visitors who are also part time school nurses. The work of the health visitors was described in last year's report. A table is given to embody a summary of the health visitors' reports during the year.



### Summary of Health Visitors' Reports for 1933.

Births Notified (twins 7)	..	..	..	..	551
Males	..	..	..	..	274
Females	..	..	..	..	277
Still Births	..	..	..	..	26
Died within Three Days	..	..	..	..	11
Attended by Medical Practitioners	..	..	..	..	31
Attended by Midwives only	..	..	..	..	366
Admitted to Maternity Home	..	..	..	..	154
Number of first visits	..	..	..	..	509
Number of re-visits under 1 year	..	..	..	..	2,695
Number of re-visits over 1 year	..	..	..	..	3,391
Total number of visits paid	..	..	..	..	6,595
Children weighed	..	..	..	..	519
Average weight	..	..	..	..	lbs. 7.35
Breast fed at birth	..	..	..	..	503
Bottle fed at birth	..	..	..	..	9
Spoon fed	..	..	..	..	2
Pre-natal Cases, first visits	..	..	..	..	49
Outside the Borough	..	..	..	..	23
Number of individual infants under 1 year visited	..	..	..	..	2,363
Number of individual children 1 to 5 years	..	..	..	..	3,213

**Maternity Outfits.**—Complete maternity outfits were loaned out free of charge in respect of four maternity cases during the year.

**Infant Welfare Centres.**—A child welfare clinic is held every Tuesday afternoon at the Albert Street Clinic and every Thursday afternoon at the Cotmanhay Clinic. Both centres are well attended.

The attendances at the clinics are shown in the following table :—

#### ATTENDANCES AT INFANT WELFARE CENTRES.

##### ALBERT STREET.

Individual Cases.	Total Attendances.	Examined by Doctor.	Infants under One Year.	Toddlers.
584	2,336	372	1,443	893

##### COTMANHAY.

330	1,326	414	603	723
-----	-------	-----	-----	-----

**Still Births.**—Notified cases of still births are enquired into by the health visitors and records are kept. During 1933 the number of still births enquiries was 27, and the results are given below. There was maceration in 10 cases. Causes of still births :—

Death in utero previous to labour	..	..	15
Malpresentation or obstructed labour	..	..	4
Congenital deformity of foetus	..	..	4
Ante-partum haemorrhage..	..	..	2
Albuminuria..	..	..	2
Total	..	..	27

**Puerperal Pyrexia and Puerperal Fever.**—Assistance can be given in dealing with either of these conditions by providing a consultant to give a second opinion or by the provision of hospital treatment. In accordance with the provisions of the Puerperal Fever Regulations the existing arrangement for providing in-patient treatment at the Derbyshire Hospital for Women has been continued. Three patients were admitted under this scheme in 1933. Two of them made good recoveries, but the third died from pneumonia. Five cases of puerperal pyrexia were notified during the year. There were no cases of puerperal fever.

**Maternal Deaths.**—Every case of maternal death is enquired into from a strictly medical point of view with the object of discovering what further arrangements are necessary to prevent these distressing cases. Only one death occurred which could be attributed to puerperal causes, and this was due to eclampsia following abortion. The maternal mortality rate for the year was consequently low, namely 1.85 per 1,000 births.

**Infantile Deaths.**—The deaths of infants under the age of one year are also made the subject of enquiry by the health visitors, who pass the reports on to the medical officer. The number of deaths of infants under one year was 41, and the infantile mortality rate was 78.27 per 1,000 live births. This is much higher than the rate for England and Wales which was 64. Measles was responsible for 5 cases, while prematurity was given as a cause in 12 cases. The following table classifies the causes of deaths:—

Prematurity and congenital defects	..	..	18
Diarrhoea	..	..	6
Measles	..	..	5
Pneumonia	..	..	5
Meningitis	..	..	2
Convulsions	..	..	2
Heart Disease	..	..	1
Syphilis	..	..	1
Tuberculous peritonitis	..	..	1

**Free Supply of Milk.**—Under the provisions of the Maternity and Child Welfare Act, 1918, free milk was issued in necessitous cases to expectant and nursing mothers and to children under 5 years of age recommended by medical officers. In all cases enquiries are made into the means of the family and issues are made in accordance with an approved scale. The number of applications in respect of which milk was issued was 1,416, and the approximate cost was £420.



**Children's Act, 1908.**—Arrangements have been made by which the health visitors perform the work of Infant Protection Visitors in their several districts, and the medical officer of health is the officer to whom notices under Part I of the Act must be sent. During the year there have been no children coming within the provisions of Part I of this Act.

**Orthopaedic Treatment.**—An approved orthopaedic scheme is in operation. The services of the orthopaedic surgeon are available for consultation by medical practitioners in cases of crippling diseases such as anterior poliomyelitis. The ascertainment of crippled children is for the most part performed by the health visitors who report to the medical officer. A consultation clinic is held from time to time at which crippled children are seen by the orthopaedic surgeon and advice is given as regards treatment and after-care. In-patient treatment is available at the Bretby Hall Orthopaedic Hospital and financial help is given in necessitous cases. Much valuable work is still being done as formerly by the neighbouring voluntary hospitals.

**Institutional Provision.**—There are no changes in the arrangements for institutional provision in the cases of unmarried mothers, illegitimate infants, and homeless children.

### SANITARY INSPECTION OF THE DISTRICT.

Details of Inspections made and defects found during the year 1933 by the Sanitary Inspector.

#### Drainage, Etc.

Drains opened and cleansed .. .. .	46
Drains provided with new traps .. .. .	15
New drains and inspection chambers .. .. .	4
Drains repaired or relaid .. .. .	36
Drains tested by water after relaying .. .. .	6
Drains tested by smoke .. .. .	5
Sink pipes disconnected .. .. .	6
New sink-waste pipes disconnected and re-fixed .. .. .	27
New sinkstones provided and fixed .. .. .	7
Broken inspection covers renewed .. .. .	4
Backyards repaired or re-paved .. .. .	66
Floors in houses repaired .. .. .	12
Dilapidated walls and ceilings repaired .. .. .	21
Roofs defective .. .. .	61
Defective stairs repaired .. .. .	27
Windows defective and made to open .. .. .	69
Defective spouts repaired or renewed .. .. .	60
Pantry vents and light improved .. .. .	38
Defective coppers renewed .. .. .	17
Dirty houses cleansed .. .. .	2
Defective brickwork pointed up .. .. .	59
Dampness in rooms remedied .. .. .	18

**Water Closets and Urinals.**

Water Closets, new basins provided and fixed	..	..	..	19
Defective fittings repaired	..	..	..	26
Choked water closets remedied	..	..	..	30

**Miscellaneous Defects** not enumerated in above tables :

Defective ashbins renewed	..	..	..	55
Broken sash-cords	..	..	..	55
Defects to kitchen ranges or boilers	..	..	..	42
Defects to doors or frames repaired	..	..	..	21
Small defects remedied on premises	..	..	..	130
Smoke observations taken	..	..	..	26
Foul water-courses cleansed	..	..	..	2
Number of Inspections made to premises	..	..	..	2,528
Number of re-inspections made during repairs	..	..	..	1,293
Number of Informal Notices issued	..	..	..	267
Number of Statutory Notices issued	..	..	..	24
Number of Notices not complied with at end of year	:	..	..	4

**Privies, Ashpits and Ashbins.**

Privies made into Water Closets during 1933	..	..	..	Nil.
Pail-closets made into Water Closets..	..	..	..	Nil.
Defective Ashpits repaired	..	..	..	12
New Ashbins provided	..	..	..	55
New pails provided to existing Pail-closets	..	..	..	5
Number of inspections to Privy-middens	..	..	..	12
Number of inspections made to Ashpits	..	..	..	3,340
Number of Inspections made to Ashbins	..	..	..	8,317
Number of inspections made to existing Pail-closets	..	..	..	91

**Offensive Trades.**

Only 1 registered premises, <b>Tripe Boiling</b>	..	..	..	1
Number of inspections made	..	..	..	35
Number of Notices served	..	..	..	Nil.

**Common Lodging-houses.** .. .. . Nil.

**Places of Amusements.**

The premises of entertainment are inspected from time to time and reports made to the Health Committee and also the Licensing Bench by the Senior Sanitary Inspector.

**Petroleum Acts.**

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

Number of Petrol Spirit Licences issued	..	..	..	41
Number of Carbide of Calcium Licences issued	..	..	..	5
Number of inspections made during 1933	..	..	..	49

**Canal Boats.**

These Canal Boats Acts are administered by the Senior Sanitary Inspector, Mr. Joseph B. Duro.

Number of Canal Boats on Register end of 1933	..	..	..	40
Number of Canal Boats inspected	..	..	..	1
Number of infringements found	..	..	..	Nil.
Prosecutions	..	..	..	Nil.
Number of men on board	..	..	..	3
Number of women on board	..	..	..	Nil.
Number of children on board	..	..	..	Nil.



**Bakehouses.**

Number of Bakehouses on Register .. .. .	28
Number of Inspections made .. .. .	41
Number of Notices issued .. .. .	1

**Dairies, Cowsheds and Milkshops.**

Number of Cowsheds on Register .. .. .	7
Number of Milkshops .. .. .	129
Number of visits made .. .. .	127
Number of Notices issued .. .. .	2

**Slaughter-houses.**

Registered Slaughter-houses .. .. .	4
Licensed Slaughter-houses .. .. .	14
Number of visits made .. .. .	1,351
Number of Notices issued .. .. .	5

**Surrendered Food Stuffs.**

Beef 2,362 lbs.; Foreign beef, 260 lbs.; Bovine Lungs, 43 lbs.; Bovine Livers, 44; Heads and Tongues, 8; Udders, 14; Kidneys, 18; Spleens, 7; Tripes, 7; Calves Kidneys 2.  
 Sheeps' Livers, 43.  
 Pork 1,184 lbs.; Heads, 16; Hearts, 10; Livers, 10; Kidneys 10.

**Disinfection of Premises.**

Number of rooms disinfected.. .. .	206
------------------------------------	-----

The above include not only infected rooms, but after death from Cancer and Tuberculosis. A Formalin Sprayer using 40% Formalin is used, and Sulphur.

**Factories, Workshops and Workplaces.**

	Inspections.	Notices	Pros.
Factories (including Factory Laundries)	19	Nil.	Nil.
Workshops (including Workshop Laundries)	40	1	Nil.
Workplaces (other than outworkers)	35	Nil.	Nil.

**Outworkers.**

The number of outworkers in the first half of the year was 6, and in the second half 17.

Number of visits made .. .. .	30
-------------------------------	----

**Shops Acts.**

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

(a) Boots and Shoes; (b) Hairdressers and Barbers.

Four Prosecutions were instituted against Shop Keepers for not Exhibiting their Assistants Weekly Half-holiday Notices. One fined 20s. and costs; one fined 10s. and costs; two fined 4s. and costs.

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

*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, 1933.**

Municipal Borough of ILKESTON.	Area in Statute Acres (Land and Inland Water).	Population by Wards. (Census 1931)	Number of Occupied 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	32,813	7,694	6,762	166	233	5	307	7,872
North Ward	..	6,135	1,442	1,230	31	52	3	45	1,459
Granby Ward	..	4,115	873	754	9	26	-	18	867
Market Ward	..	6,450	1,391	1,197	4	59	1	90	1,385
Victoria Ward	..	3,889	1,113	1,047	9	18	-	14	1,280
Old Park Ward	..	5,479	1,266	1,110	4	35	1	63	1,319
South Ward	..	6,745	1,609	1,424	109	43	-	77	1,562



# EXCREMENT DISPOSAL — 1933.

IN WHOLE DISTRICT ..	Number of Houses, etc. with—				Number of Defective Privies improved.
	Privy-middens.	Pail-closets.	Water-closets.	Slop-water closets.	
	(a) 5	(b) 119	(c) 7,571	(d) 307	2 Nil.

NOTE.—(a) Total number of Privy-Middens 5, shared by 5 houses which cannot reach the sewer and are therefore not convertible.

(b) Total number of Pail-closets, 166; these are: 119 shared by 119 houses, 46 at Stanton Ironworks, and 1 at Flour Mill, Nottingham Road.

(c) Total number of Water-closets, 7,872; shared by 7,571 houses, etc.

(d) Total Number of Slop-water Closets, 307, shared by 307 houses, etc.

The term "Houses, etc.", in this table includes dwelling places, churches, chapels, schools, factories and workshops.

## REFUSE COLLECTION AND 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.	Occupiers of Houses.	Total Cost	
					throughout District during year.	
WHOLE BOROUGH ..	32,580	No.	Yes.	No.	£3,313-12-0	7s. 7½d. Controlled Tipping

## SUMMARY OF PAIL CLOSETS.

	NORTH WARD.	GRANBY WARD.	MARKET WARD.	VICTORIA WARD.	OLD PARK WARD.	SOUTH WARD.	TOTALS.
Number of Houses with Pail-closets ..	31	9	4	9	3	63	119
Factories and Workshops with Pail-closets .. ..	—	—	—	—	1	46	47
TOTALS .. ..	31	9	4	9	4	109	166



## REFUSE REMOVAL AND DISPOSAL.

SHOWING ANNUAL RETURN FOR THE PAST THREE  
YEARS OF TONS REMOVED

YEAR.	ASHBIN REFUSE.	ASHPIT REFUSE.	PRIVY CONTENTS.	PAIL CONTENTS.	TOTALS.
1931 ..	14,188	2,595	6	372	17,161
1932 ..	14,608	2,527	7	328	17,470
1933 ..	15,117½	2,512¼	6½	289½	17,925¾

MONTHLY RETURNS (TONS), FOR THE YEAR  
ENDING 31st DECEMBER, 1933.

MONTH.	ASHBIN REFUSE.	ASHPIT REFUSE.	PRIVY CONTENTS.	PAIL CONTENTS.	TOTALS.
January ..	1,522¾	196¼	—	27½	1,746½
February	1,188½	225	—	22¾	1,436¼
March ..	1,344	260	1¼	22¾	1,628
April ..	1,230	227	—	24¾	1,481¾
May ..	1,347¾	213¼	—	25½	1,586½
June ..	1,256¼	223½	—	21¾	1,501½
July ..	1,167½	209½	5¼	27½	1,409¾
August ..	1,175¾	150	—	20	1,345¾
September	1,124	219	—	23¾	1,366¾
October ..	1,177½	198½	—	24¾	1,400¾
November	1,190½	234	—	23¾	1,448¼
December	1,393	156¼	—	24¾	1,574
TOTALS ..	15,117½	2,512¼	6½	289½	17,925¾

**PRIVY ACCOMMODATION EXISTING 31st DECEMBER, 1933.**

Situation of Privies that are unable to drain into Sewer.	Number of Privies.	Number of Conveniences.	Number of Houses.
No. 21, Church Street ..	1	1	1
Bentley's Farm, Cotmanhay ..	1	1	1
No. 1 Fishponds .. ..	1	2	1
No. 52, King Street .. ..	1	2	1
No. 4, Larklands .. ..	1	2	1
Total number of Privies in existence .. ..	5	8	5

**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.
PART OF OLD PARK WARD		
PART OF OLD PARK WARD	}	To Booth's Land, Station Road
VICTORIA WARD		
MARKET WARD		
GRANBY WARD		
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.

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# ANNUAL REPORT

OF THE

## School Medical Officer

For 1933.

H. L. BARKER,

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



**EDUCATION COMMITTEE.**

THE MAYOR (Coun. G. H. BROUGHTON).	Councillor Mrs. J. B. D. McINTYRE.
Coun. G. W. WOOLLISCROFT, O.B.E.,	„ J. A. MACDONALD.
J.P. ( <i>Chairman</i> ).	„ G. RILEY
Alderman AMOS HENSHAW, J.P., C.C.	Professor H. A. S. WORTLEY, M.A.
„ W. SHAKSPEARE, J.P.	F. P. SUDBURY, Esq., J.P., C.C.
„ J. WOOLLEY, J.P.	S. R. WOOD, Esq., M.A.
Councillor A. HICKINBOTHAM.	Mrs. BROUGHTON.
„ J. KIRK.	

**Director of Education.**

T. FROST, Esq., B.Sc.

**STAFF (1933).****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. ( <i>County Ophthalmic Surgeon</i> )
ORTHOPAEDIC SURGEON	.. ..	G. A. Q. LENNANE, M.A., M.B., B.Ch. ( <i>County Orthopaedic Surgeon</i> ).
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>
Miss M. E. SHERLOCK, C.M.B.	..	..	..	..	..	21st June, 1914
Miss H. BLAIR, C.M.B.	..	..	..	..	..	1st June, 1922
Miss L. OTTEWELL, C.M.B.	..	..	..	..	..	1st Mar., 1929
Miss M. GARDINER, C.M.B.	..	..	..	..	..	5th May, 1930

**Clerks.**

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

Borough of Ilkeston Education Committee.

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**ANNUAL REPORT**  
OF THE  
**SCHOOL MEDICAL OFFICER**  
FOR 1933.

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TO THE CHAIRMAN AND MEMBERS OF THE ILKESTON EDUCATION  
COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I beg to present my Annual Report for the year ending 31st  
December, 1933.

The general form of the Report is very similar in arrangement  
to previous annual reports, but there are slight modifications which  
follow the suggestions recently made by the Board. I am glad to  
say that the school medical service continues to work harmoniously  
with all the various departments administered by your Committee.

I have received, as usual, the loyal co-operation of every member  
of the school medical department for which I am grateful.

My thanks are due to the Chairman and Members of the Educa-  
tion Committee for their enthusiasm, encouragement and valued  
assistance.

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 (Registrar-General's Estimate, 1933) ..	32,580
Number of Schools .. .. .	10
Number of Departments .. .. .	20
Average number on School Register .. .. .	5,278
Average Attendance .. .. .	4,850

**I.—STAFF.**

Particulars with regard to the staff are given on a previous page. There have been no changes in the course of the year.

**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) 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.**

**School Hygiene.**—The position and surroundings of the various elementary schools have been described in recent reports. There has been no great change since the Senior Cavendish Schools were opened in 1929 except that special practical rooms have been completed for all senior schools. The position of one school is definitely unsatisfactory, namely, that at Hallam Fields. It is placed close up to the furnaces of the large ironworks and suffers considerably



from noise and also from the almost continual nuisance of metallic dust. Seeing that building development of a fairly extensive nature is now taking place in the neighbourhood, fresh provision of a more suitable kind should now be considered. The other schools are well placed if we except the fact that three of them are situated on busy roads. The unsatisfactory basement-like character of Chaucer Infants' School has been referred to in other reports.

The ventilation and heating of the schools is satisfactory if properly supervised. The lighting in those schools which are supplied with electric lighting is satisfactory, but where only gas is available attention has to be given to the provision and maintenance of the newest types of efficient burners. The schools are well equipped as regards blackboards and desks.

The water supply to all the schools is derived from the town supply and the cleanliness of the classrooms, cloakrooms and playgrounds is satisfactory. The sanitary conveniences are all of the water-carriage system. There has been improvement in the arrangements for washing at some schools. But in the majority of schools there is no provision of hot water for washing purposes. Only one school possesses a bath and it is greatly appreciated and made much use of by the pupils. If every school was supplied with provision for baths many of the scholars would derive considerable hygienic and educational benefit.

#### IV.—MEDICAL INSPECTION.

**Routine Inspections.**—Every child undergoes a routine medical inspection three times in the course of school life. In order to accomplish this three age groups are inspected every year. The age groups are those laid down by the Board and are as follows :—

(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.



Every term one of the above age groups is examined. The "entrants" at the infant schools are examined during the summer term because there are fewer absentees during that term owing to the fact that the schools are usually free from serious epidemic disease in the summer months. The "leavers" are examined during the spring term so as to allow plenty of time to complete the remedy of any physical defects which may be found.

The "intermediates" are examined in the winter term. The routine inspections have always taken place in the schools, and the Board's schedule of medical inspection has been followed.

**Re-inspections.**—Those children who have been found to be suffering from some defect at a former inspection are re-inspected at their respective schools every year in order to find out if satisfactory improvement has been made, and the parents are asked to obtain any further treatment which may be necessary.

**Special Inspections.**—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) **Malnutrition.**—The number of children found at both routine and special inspections to be suffering from malnutrition was 42, which is rather less than the number for the previous year, namely 56. Of course a greater number would have probably been found if every child had been examined.

(b) **Uncleanliness.**—A table is given below which, although it indicates the general improvement which has taken place during recent years, does not show that there was a continuance of the improvement during the past year. This relapse adds weight to the previous suggestion that better facilities might be provided through the schools for attaining personal cleanliness.

## UNCLEANLINESS.

<i>Year.</i>	<i>Average Number of Children on School Registers.</i>	<i>Number of Individual Children Found Unclean.</i>	<i>Percentage.</i>
1923	5,827	396	6.8
1924	5,833	379	6.5
1925	5,454	237	4.3
1926	5,444	352	6.5
1927	5,692	303	5.3
1928	5,500	277	5.0
1929	5,585	277	4.9
1930	5,383	275	5.1
1931	5,338	242	4.5
1932	5,377	185	3.4
1933	5,278	226	4.2

(c) **Minor Ailments and Skin Disease.**—The minor ailments call for no special comment. As regards skin disease of a contagious variety the accompanying table shows that there was only one case of ringworm. There was an increase in the number of scabies cases, but a less number of cases of impetigo. Under the latter heading are included those cases found at routine inspections and at the clinic which are severe enough to warrant exclusion.

<i>Year.</i>	<i>Impetigo.</i>	<i>Ringworm of Scalp.</i>	<i>Scabies.</i>
1926	53	26	5
1927	57	14	16
1928	55	10	21
1929	47	8	5
1930	46	2	2
1931	32	2	3
1932	44	1	9
1933	27	1	15

(d) **Visual Defects and External Eye Disease.**—The number of cases of inflammatory diseases of the eye was 48 as against 41 in the previous year. The number of cases of squint was again 27.



With regard to visual defects the number of children who were found at both routine and special inspections to have defective vision was 157 of which 124 needed treatment. The incidence of defective vision at routine inspections was 8.1 per cent.

(e) **Nose and Throat Defects.**—The number of children found at routine inspections to have enlargement of the tonsils or adenoids or both was 382, as against 337 in 1932. The number of similar cases found at special inspections was 91 as against 73 in 1932. This increase is probably due to the modern fashion for keeping such cases under observation for a longer period. Whether the result will be an increase in the number of children with defective hearing the next year or two will determine. The other conditions of the nose and throat were chiefly acute catarrhal affections and occurred chiefly during the epidemic period in the spring.

(f) **Ear Disease and Defective Hearing.**—The number of children suffering from discharging ears who were treated during the year was 40. Cases of defective hearing discovered at routine and special inspections numbered 22. It is, however, impossible to investigate the incidence of defective hearing without some scientific apparatus such as the audiometer.

(g) **Dental Defects.**—The number of children inspected by the school dentist was 2,050 and of these 2,018 were found to require treatment, *i.e.*, 98.4 per cent.

(h) **Orthopaedic and Postural Defects.**—Of the 53 children found at the routine and special inspections to be suffering from these defects, 2 were due to tuberculosis, and 18 to the effects of rickets.

(i) **Heart Disease and Rheumatism.**—At the end of the year there were 42 children known to be suffering from heart disease of an organic nature. Of these, in 11 cases the cause was due to congenital malformation and 5 were boys and 6 were girls. In the remaining 31 cases the cause was considered to be due to rheumatic affection. Eleven of them were boys and 20 were girls.

(j) **Tuberculosis.**—The 6 new cases notified during the year were as follows :—2 pulmonary, 3 glands, and 1 joint tuberculosis.

(k) **Other Defects and Diseases.**—There were only 24 miscellaneous defects found at routine inspections. But at special inspections the large number of 679 cases was made up principally of children suffering from common colds, measles, whooping cough and chicken pox.

## VI.—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 128 visits with regard to defects found at medical inspections, and 79 visits to the parents of children who were found to be suffering from dental defects. The number of visits paid in order to persuade parents to obtain glasses for children with defective vision was 99.

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 12,690 examinations were made. 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 1933 :

SUMMARY OF SCHOOL NURSES WORK FOR 1933.

	Nurse Sherlock.	Nurse Blair.	Nurse Ottewell.	Nurse Gardiner.	TOTAL.
Visits <i>re</i> Infectious Diseases .. .. .	14	111	281	301	707
Visits <i>re</i> other Diseases .. .. .	2	237	331	351	921
Visits <i>re</i> Inspection for Cleanliness .. .. .	—	8	15	6	29
Visits to Schools for Medical Inspections .. .. .	—	46	38	34	118
Special Visits to Schools .. .. .	—	27	20	48	95
Visits to Schools for Cleanliness .. .. .	—	38	39	47	124
Number of Children Examined for Cleanliness .. .. .	—	3,999	4,255	4,436	12,690
Number of Notices issued <i>re</i> Verminous Condition .. .. .	—	94	239	158	491
Number of Notices issued <i>re</i> other Defects .. .. .	—	18	43	22	83
Visits <i>re</i> Medical Inspection Defects .. .. .	—	53	40	35	128
Attendances at Refraction Clinic .. .. .	15	1	—	—	16
Visits <i>re</i> Refraction Cases .. .. .	—	18	29	52	99
Visits to Schools for Dental Inspections .. .. .	—	4	2	6	12
Attendances at Dental Clinic .. .. .	195	10	—	—	205
Visits <i>re</i> Dental Defects .. .. .	—	29	3	47	79
Attendances at School Clinic .. .. .	204	10	—	—	214
Attendances of Children at Minor Ailments Clinic .. .. .	2,282	92	—	—	2,374
Attendance at Orthopaedic Clinic .. .. .	—	—	—	1	1

The following is an analysis of 1,628 visits paid by School Nurses to absentees from school on medical or alleged medical grounds :—

Infectious Diseases .. ..	613	Conjunctivitis .. ..	2
Infectious Disease Contacts ..	94	Boils .. ..	11
Influenza .. ..	202	Burns and Scalds .. ..	6
Rashes, not defined .. ..	8	Impetigo .. ..	8
Bronchitis .. ..	26	Injuries and Sprains .. ..	30
Coughs and Colds .. ..	274	Septic Wounds.. ..	36
Tonsilitis.. ..	91	Earache.. ..	3
Adenitis .. ..	3	Digestive Disturbances ..	10
Toothache .. ..	4	Miscellaneous Conditions ..	35
Otorrhoea .. ..	5	Out or returned to School when	
Sickness and Diarrhoea ..	19	visited .. ..	57
Rheumatism .. ..	2	Swollen Glands .. ..	10
Debility .. ..	19		

## VII.—ARRANGEMENTS FOR TREATMENT.

(a) **Malnutrition.**—Children suffering from malnutrition are examined at the clinic with the object of determining the underlying cause of the condition. Advice is given to the parents with regard to where the necessary treatment can be obtained and also with regard to the kind of diet appropriate for the child. In those cases where a sufficiency of food cannot be obtained owing to the financial condition of the home, the children are recommended to attend the school canteen. After attending the school canteen for some weeks a marked improvement is invariably seen in the general nutrition of such children.

(b) (c) **Uncleanliness, Minor Ailments and Disease of the Skin.**—The majority of these conditions are treated at the minor ailment clinic. The more serious skin diseases are referred to the special hospitals in the vicinity.

(d) **Visual Defects and External Eye Diseases.**—Visual defects are treated at the school clinic by the school ophthalmic surgeon and during the year spectacles were prescribed for 114 children. The number of children who obtained spectacles under this scheme was 98. Arrangements exist for children who suffer from squint to be treated at the Derbyshire Hospital for Sick Children. Other defects are occasionally sent to the special hospitals in the neighbourhood.

(e) **Nose and Throat Defects.**—The arrangements with the Nottingham Throat, Ear and Nose Hospital for securing the operative treatment of children suffering from enlarged tonsils



and adenoids still exist. The results of treating properly selected cases have been admirable. Under this scheme 90 children were treated. Other defects are also referred to the same hospital.

(f) **Ear Disease and Defective Hearing.**—Many cases are treated at the school clinic while others requiring operation are referred to the special hospitals.

(g) **Dental Defects.**—These are treated as in former years at the school clinic by the school dentist. The number of children treated during the year was 2,268 and the number of attendances was 3,482.

(h) **Orthopaedic and Postural Defects.**—Cases requiring expert opinion are seen by the school orthopaedic surgeon at his periodical visits. In-patient treatment is provided at Bretby Hall Orthopaedic Hospital and two children were admitted during the year under the Authority's scheme. A few cases attended the general hospitals in the neighbourhood.

(i) **Heart Disease and Rheumatism.**—These cases are seen at the school clinic and are referred for treatment either to their own practitioners or to the neighbouring hospitals.

(j) **Tuberculosis.**—The Derbyshire County Council carry out treatment for tuberculosis and maintain a local Dispensary, to which suspected cases are sent for investigation. Sanatorium treatment is provided for both pulmonary and non-pulmonary cases. Five children received Sanatorium treatment during the year.

(k) **Other Defects and Diseases.**—These cases are referred for treatment to private practitioners or to the appropriate hospitals.

### VIII.—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.



Of the common infectious diseases there were 9 cases of scarlet fever and 8 of diphtheria notified during the year among school children.

The number of cases of chicken pox among school children notified during the year was 39. Most of these occurred during the first four months of the year. During the spring there was a wide spread epidemic of mild influenza.

### IX.—OPEN-AIR EDUCATION.

There is no day open-air school and there are no open-air classrooms or residential open-air schools. Playground classes are held when favourable conditions obtain.

Several school journeys have been made during the year. The annual camp of the Derbyshire Schools' Camping Association was held during August at Sutton-on-Sea and was attended by 99 school children from Ilkeston of which 52 were boys and 47 were girls. The duration of stay was one week. The expenses of 10 of the children were paid for by the Ilkeston Rotary Club. Several children also attended camps in connection with the Scouts and Guides' organisations.

### X.—PHYSICAL TRAINING.

**Physical Exercises.**—These form an important part of the school work and are taught by teachers who have received special training. The senior schools are well equipped with apparatus for gymnastic exercises and the work in the schools is occasionally watched by the school medical officer. Those children who are temporarily unfit for exercises are excluded from the work. Drill and games are performed in the open air when possible.

**Organised Games.**—Arrangements exist for every senior and junior school to have the use of playing fields for organised games. In addition to the Rutland Recreation ground and the Bennerley ground the new playing field at the Pewit Meadow has recently been brought into use. In the winter the boys play football and the girls play hockey. During the summer both cricket and tennis are played, while net-ball is played on the school playgrounds. Athletic sports are held in the summer. Various league matches are also arranged.



**Swimming.**—Organised lessons are given in the open-air swimming bath belonging to the Corporation. In the course of the year 171 certificates were accorded to learners. In order to qualify for this certificate it is necessary to learn to swim 20 yards with the breast stroke. Seventy 1st class certificates were given to those children who could swim 50 yards with the breast stroke and 25 yards on the back. While eighty-nine 2nd class certificates were given to children who could swim 40 yards with the breast stroke and 20 yards on the back.

**Dancing.**—Action songs and simple dances are learnt by the smaller children. The senior children, both boys and girls, are taught folk-dancing.

There is no Area Organiser of Physical Training for this Authority.

#### XI.—PROVISION OF MEALS.

For those children who are recommended by teachers and confirmed by the school medical officer as suffering from malnutrition which is such as to prevent them from deriving full benefit from the instruction given in the schools, a school canteen is established at the cookery school situated at Gladstone School in the centre of the town. The medical officer also selects cases of malnutrition whom he may find either during medical inspection or from those referred to him at the clinic and recommends their attendance at the feeding centre.

Two meals are given a day, namely, breakfast and dinner, and the centre is open to all through the holidays, but not on Sundays. The average daily attendance was 52, and the number of individual children for whom meals were provided was 114. The average cost per meal was 3½d. when all expenses, including the cost of conveyance, were taken into account, though the average cost per meal for food only, was 1¾d. The tram fares of children who attend from a distance are paid by the Authority.

The work at the school canteen has grown very considerably, the individual children fed having increased from 64 to 114 and the average daily attendance from 39 to 52. It will therefore be realised that larger and better accommodation is very necessary, for the seating capacity is only suitable for half the actual number and furthermore the teaching of cookery is being hampered at the



school. The food supplied is wholesome and well cooked and the medical officer inspects the canteen and offers suggestions regarding the menu. The scholars who attend show marked improvement in their nutrition and the scheme deserves every encouragement and assistance.

## XII.—CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

(a) **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. The attendance of parents at the routine inspections of the three different categories of children held during the year was as follows :—Entrants, 93 per cent. ; Intermediates, 76 per cent. ; and Leavers, 40 per cent. 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 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.

In the large majority of cases no fault can be found with the manner in which the parents are willing to co-operate. In a small number of cases, however, a good deal of encouragement and diligent following-up is necessary.

(b) **Teachers.**—It is manifest that the teachers take a keen interest in the health of their pupils and are ready to assist the school medical department in every way they can. They co-operate in the preparation of various lists of children and in making arrangements for inspections and suffer considerable inconvenience owing to the absence of proper facilities for medical inspection at most schools. Special instructions are often given regarding individual scholars and the teachers can always be relied on to supervise and to render them effective.

(c) **School Attendance Officers.**—During the year the superintendent has supplied the medical department with lists of absent children. The children are then visited by the school nurses and the result is communicated to the school attendance officers. The



list is also reviewed by the medical officer, who can in this way keep himself informed with regard to the incidence of any disease among the school children. Reports showing the weekly attendance at the different schools have also been furnished so that the reason for any unusually poor attendance could be investigated. The attendance officers also send to the clinic any children who appear to be in need of medical advice or treatment.

(d) **Voluntary Bodies.**—The Derbyshire Schools' Camping Association has been already mentioned as the organisers of a camp to which children go from this area. The annual Health Week is arranged in co-operation with the Derbyshire Health Week Committee. At the Royal Institution for the Deaf in Derby several children who are totally deaf are maintained. The National Society for the Prevention of Cruelty to Children, through their energetic district inspector, is always ready to give any assistance in its power. The Tuberculosis After-Care Committee is willing to help in the welfare of tuberculous school children. Medical treatment for the children is available and is made full use of at the Ilkeston Hospital and at the various hospitals in Derby and Nottingham. The Ilkeston Rotary Club sent ten children to the annual camp and the British Legion has assisted children in various ways. Several children have benefitted in health by a stay at the Convalescent Home at Skegness.

### XIII.—BLIND, DEAF AND EPILEPTIC CHILDREN.

(a) Defective children are ascertained by the medical officer at routine and special inspections at the schools and during examination at the clinic. They are also discovered as a result of visits of the school nurses, and reports made by the attendance officers and teachers. Many defective children are in fact ascertained before they reach school age through the work of the school nurses when acting as health visitors, and a list of such children is maintained. Special efforts are made to discover mentally deficient children by examining those children who are reported by the teachers as being backward. A comprehensive record on a card system is kept of all defective and exceptional children, and medical examinations are made from time to time and necessary treatment is advised.

At the end of the year there were 12 children whose vision was so defective that they were unable to use the ordinary school books. These children are allowed to attend school under special conditions which have been laid down by the ophthalmic surgeon.



There are 3 totally deaf children being educated at the Royal Institution for the Deaf in Derby.

One child was suffering from epilepsy of such a severe nature as to prevent attendance at school.

As regards organic disease of the heart a total of 42 cases were ascertained of which 5 were excluded from school and 37 were at school at the end of the year.

The number of children suffering from crippling defects was 44 at the end of the year and of these 3 children were excluded from school.

(b) Those mentally defective children whose defect is not so severe as to render them ineducable are taught in special classes in many schools. Three of these classes have specially certified teachers.

The remaining mental defectives who are considered ineducable are reported to the County Authority under the provisions of the Mental Deficiency Act.

(c) No special School is maintained by the Authority.

#### **XIV.—FULL-TIME COURSES OF HIGHER EDUCATION FOR BLIND, ETC., STUDENTS.**

This Authority has no power with regard to schemes for Higher Education.

#### **XV.—NURSERY SCHOOLS.**

No Nursery Schools have been established by this Authority, but a scheme has been prepared to provide nursery classes in suitably adapted rooms attached to certain infant schools. A great many children below the age of 5 years already attend the infant schools with much benefit to their health and development. They all come within the scope of the school medical service. The accommodation and equipment are not entirely appropriate for the very young children and there is a definite need for special nursery classrooms, annexes and playgrounds.

#### **XVI.—SECONDARY SCHOOLS AND OTHER INSTITUTIONS OF HIGHER EDUCATION.**

These do not come within the power of this Authority. The scholars of the Secondary School, however, take part in all the activities of the annual Health Week.



## XVII.—PARENTS' PAYMENTS.

**Children Attending Public Elementary Schools.**—The arrangements for recovering the cost of treatment from parents varies with the different services. At the minor ailment clinic no charge is made but a collecting box is maintained for voluntary contributions.

The parents and children who attend the ophthalmic clinic are expected to purchase spectacles if prescribed. But in circumstances of poverty the cases are reviewed by the Education Committee. During 1933 the Committee sanctioned 21 spectacles to be provided free and 9 spectacles at a reduced cost. At the dental clinic a box is kept for contributions.

With regard to recovering the cost of the operation for the removal of tonsils and adenoids an enquiry is made into the means of each family and this is verified by communicating with the employers. The Committee then review the facts relating to each individual case and settle the amount which the parents will have to pay. In order to assist the Committee to deal with every case in a similar manner a scale of charges related to income has been drawn up.

The method of recovering the cost of orthopaedic treatment and the provision of appliances is somewhat similar. The circumstances of each case are considered by the Committee who decide what proportion of the cost the parents shall be called upon to pay.

## XVIII.—HEALTH EDUCATION.

Throughout the year instruction in health matters is given by the teachers in all schools. During Health Week the instruction is of an intensive nature and in 1933 this was held during the first week in October. Parties of teachers paid visits to places of interest from a hygienic point of view in the previous week so as to be prepared to give talks to the scholars on the particular subject during the Health Week. These visits were made to the following places:—Harlow Wood Orthopaedic Hospital, the Midland Agricultural College and Dairy Farm, Boots' Beeston Factory, Ilkeston Sewage Works and Ilkeston and Heanor Water Works. During Health Week eleven lectures illustrated by lantern slides were given in the Town Hall by the school medical officer and were attended by 3,400 children. Essays on the subject of the lecture were written by the children and prizes were given for the best essays in each school. On two afternoons during the week exhibitions of health films were given in the King's Picture House and these were witnessed by about



2,500 children. The pupils in the seven infant schools performed simple health plays or gave recitations, while many schools drew up excellent health posters. Appropriate literature was provided by various voluntary bodies for distribution in the schools.

#### XIX.—SPECIAL INQUIRIES.

**Vaccination.**—The continuation of an inquiry to ascertain the extent to which children are protected against small pox gave figures which are appreciably less than the previous year. Among the 1,670 children in the code groups who underwent routine inspection during the year the percentage number of children found to be vaccinated against small pox was as follows :—

Entrants .. .. .	23 per cent.
Intermediates .. .. .	28 „
Leavers .. .. .	32 „

**Attendance of Parents.**—The attendance of parents at routine inspections held during the year showed the following percentage :—

Entrants .. .. .	94 per cent.
Intermediates .. .. .	76 „
Leavers .. .. .	40 „

**Mortality among School Children.**—Eight deaths occurred among children of school age during the year, and were due to the following causes :

Epilepsy .. .. .	1	Cerebral tumour	1
Nephritis.. .. .	1	Heart failure ..	1
Epistaxis.. .. .	1	Run over ..	1
Peritonitis .. .. .	1	Drowned ..	1

#### XX.—MISCELLANEOUS.

(1) “ **Better Health** ” **Journal.**—The publication of a local edition of the magazine known as “ **Better Health** ” was continued, and one thousand copies, supplied gratis by the publishers, were distributed monthly to the schools. The supply, however, ceased at the end of the year.

(2) **Issue of Boots.**—The Joint Advisory Committee maintains a “ **Boot Fund** ” for supplying boots to children whose parents are in necessitous circumstances. During 1933 the number of pairs of boots issued was 196.

(3) **Children and Young Persons Act, 1933.**—Under the provisions of this Act medical certificates were issued by the school medical officer to 55 children after examination, enabling them to follow the employment of distributing newspapers between certain hours.



## XXIV.—STATISTICAL TABLES.

## MEDICAL INSPECTION RETURNS.

Table 1.—Return of Medical Inspections.

## A.—ROUTINE MEDICAL INSPECTIONS.

*No. of Inspections in the prescribed Groups*

Entrants .. .. .	513
Second Age Group .. .. .	513
Third Age Group .. .. .	644
TOTAL ..	1,670
No. of other Routine Inspections .. .. .	25

## B.—OTHER INSPECTIONS.

Number of Special Inspections .. .. .	1,442
No. of Re-Inspections .. .. .	1,565
TOTAL ..	3,007

TABLE II.

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

DEFECT OR DISEASE.	Routine Inspections		Special Inspections.	
	No. of Defects.		No. of Defects.	
	Re-quiring Treatment.	Requiring to be kept under observation but not requiring Treatment.	Re-quiring Treatment.	Requiring to be kept under observation but not requiring Treatment.
(1)	(2)	(3)	(4)	(5)
Malnutrition .. .. .	—	8	33	1
Skin { Ringworm :				
Scalp .. .. .	—	—	1	—
Body .. .. .	—	—	—	—
Scabies .. .. .	—	—	15	—
Impetigo .. .. .	2	—	25	—
Other Diseases (Non-Tuberculous)	5	5	19	15

TABLE II.—continued.

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.
				(2)	(3)	(4)	(5)
Eye	Blepharitis .. ..	..	..	12	—	16	—
	Conjunctivitis .. ..	..	..	—	—	20	—
	Keratitis .. ..	..	..	—	—	1	—
	Corneal Opacities .. ..	..	..	—	—	1	—
	Defective Vision (excluding Squint).	..	..	105	32	19	1
	Squint .. ..	..	..	32	6	6	—
Ear	Other Conditions .. ..	..	..	1	3	5	2
	Defective Hearing .. ..	..	..	3	7	9	3
	Otitis Media .. ..	..	..	10	—	30	—
	Other Ear Diseases .. ..	..	..	—	—	1	1
	Chronic Tonsillitis only .. ..	..	..	6	222	22	33
Nose and Throat	Adenoids only .. ..	..	..	—	12	3	2
	Chronic Tonsillitis and Adenoids .. ..	..	..	51	91	25	6
	Other Conditions .. ..	..	..	—	5	76	46
Enlarged Cervical Glands (Non- tuberculous) .. ..				—	66	5	15
Defective Speech .. ..				—	10	—	—
Teeth—Dental Diseases .. ..				901	—	39	—
Heart and Circulation	Heart Disease :						
	Organic .. ..	..	..	—	9	8	3
	Functional .. ..	..	..	—	28	1	7
Lungs	Anæmia .. ..	..	..	21	1	32	2
	Bronchitis .. ..	..	..	8	31	81	12
	Other Non-tuberculous Diseases .. ..	..	..	2	13	25	32
	Pulmonary :						
Tuber- culosis	Definite .. ..	..	..	—	1	2	—
	Suspected .. ..	..	..	—	1	—	12
	Non-Pulmonary :						
	Glands .. ..	..	..	—	—	3	—
	Bones & Joints .. ..	..	..	—	1	—	1
Nervous System	Skin .. ..	..	..	—	—	—	—
	Other forms .. ..	..	..	—	1	—	—
	Epilepsy .. ..	..	..	—	—	4	3
	Chorea .. ..	..	..	2	—	11	2
Deformities	Other Conditions .. ..	..	..	—	1	4	3
	Rickets .. ..	..	..	—	18	—	—
	Spinal Curvature .. ..	..	..	—	2	1	—
Other Defects and Diseases (Ex- cluding Uncleanliness and Dental Diseases) .. ..				5	19	4	2
				8	16	242	437



**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)	
Prescribed Groups :—			
Entrants .. .. .	513	68	13.2
Second Age Group .. ..	513	64	12.4
Third Age Group .. ..	644	119	18.4
Total (Prescribed Groups) ..	1,670	251	15.0
Other Routine Inspections ..	25	5	20.0

**TABLE III.**

**Numerical Returns of all Exceptional Children in the Area.  
1933.**

			Boys.	Girls.	Total
Children suffering from Multiple Defects, <i>i.e.</i> , any combination of the following types of defect :—					
Blindness ( <i>not</i> Partially Blindness), Deafness ( <i>not</i> Partially Deafness), Mental Defect, Epilepsy, Active Tuberculosis, Crippling, or Heart Disease .. .. .			3	—	3
Blind .. .. .	Suitable for training in a School for the totally blind.	At Certified Schools for the Blind .. .. .	—	—	—
		At Public Elementary Schools .. .. .	—	—	—
		At other Institutions .. .. .	—	—	—
		At no School or Institution	—	—	—
		Total	—	—	—
Partially Blind	Suitable for training in a School for the partially blind.	At Certified Schools for the Blind .. .. .	—	—	—
		At Certified Schools for the Partially Blind .. .. .	—	—	—
		At Public Elementary Schools .. .. .	9	3	12
		At other Institutions .. .. .	—	—	—
		At no School or Institution	—	—	—
		Total	12	—	12

TABLE III.—continued.

				Boys.	Girls.	Total
Deaf .. ..	Suitable for training in a School for the totally deaf.	At Certified Schools for the Deaf .. .. .	1	2	3	
		At Public Elementary Schools .. .. .	—	—	—	
		At other Institutions ..	—	—	—	
		At no School or Institution	—	—	—	
			Total	3		
Partially Deaf	Suitable for training in a School for the partially Deaf.	At Certified Schools for the Deaf .. .. .	—	—	—	
		At Certified Schools for the Partially Deaf .. ..	—	—	—	
		At Public Elementary Schools .. .. .	—	—	—	
		At other Institutions ..	—	—	—	
		At no School or Institution	—	—	—	
			Total	—		
Mentally Defective.	Feeble-minded .. ..	At Certified Schools for Mentally Defective Children .. .. .	—	—	—	
		At Public Elementary Schools .. .. .	10	12	22	
		At other Institutions ..	—	—	—	
		At no School or Institution	1	—	1	
			Total	23		
Epileptics ..	Suffering from severe epilepsy.	At Certified Special Schools	—	—	—	
		At Public Elementary Schools .. .. .	—	—	—	
		At other Institutions ..	—	—	—	
		At no School or Institution	1	—	1	
			Total	1		
Physically Defective.	A. Tuberculosis Children ..	At Certified Special Schools	—	—	—	
	(1) Children suffering from Pulmonary Tuberculosis (including pleura and intra-thoracic glands).	At Public Elementary Schools .. .. .	5	2	7	
		At other Institutions ..	—	—	—	
		At no School or Institution	1	1	2	
			Total	9		
	(2) Children suffering from non-pulmonary Tuberculosis (of all sites other than those shown in (1) above).	At Certified Special Schools	1	—	1	
		At Public Elementary Schools .. .. .	5	7	12	
		At other Institutions ..	—	—	—	
		At no School or Institution	—	—	—	
			Total	13		



TABLE III.—continued.

				Boys.	Girls.	Total
Physically Defective continued).	B. Delicate Children, <i>i.e.</i> , All Children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School.	At Certified Special Schools	—	—	—	
		At Public Elementary Schools .. .. .	13	11	24	
		At other Institutions ..	—	—	—	
		At no School or Institution	1	2	3	
		Total				27
	C. Crippled Children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Special Schools	—	—	—	
		At Public Elementary Schools .. .. .	19	22	41	
		At other Institutions ..	—	—	—	
		At no School or Institution	1	2	3	
		Total				44
	D. Children with Heart Disease, <i>i.e.</i> , Children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public elementary school ..	At Certified Special Schools	—	—	—	
		At Public Elementary Schools .. .. .	14	23	37	
		At other Institutions ..	—	—	—	
		At no School or Institution	2	3	5	
		Total				42

TABLE IV.

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

**Treatment Table.**

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

DISEASE OR DEFECT.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin :			
Ringworm—Scalp .. .. .	1	—	1*
Ringworm—Body .. .. .	1	—	1
Scabies .. .. .	15	—	15
Impetigo .. .. .	89	—	89
Other Skin Disease .. .. .	11	—	11
Minor Eye Defects : (External and other, but excluding cases falling in Group II.) .. .. .	45	—	45
Minor Ear Defects.. .. .	52	—	52
Miscellaneous ( <i>e.g.</i> minor injuries, bruises, sores, chilblains, etc.) .. .. .	149	—	149
TOTAL .. .. .	363	—	363

\* Treated by X-Rays, 1.



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.	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) .. ..	203	11	—	214
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ..	4	—	—	4
TOTAL ..	207	11	—	218

Total number of Children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme .. .. .	114
(b) Otherwise .. .. .	11

Total number of Children who obtained or received spectacles :—

(a) Under the Authority's Scheme .. .. .	98
(b) Otherwise .. .. .	11

**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. (See Note b.) (1)				By Private Practitioner or Hospital, apart from the Authority's Scheme. (2)				Total  (3)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
34	2	54	—	—	—	4	—	34	2	58	—	—	94

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

TABLE IV.—continued.

## Group IV.—Orthopaedic and Postural Defects

	Under the Authority's Scheme. (1)			Otherwise. (2)			Total number treated
	Residential treatment with education.	Residential treatment without education.	Non- residential treatment at an orthopaedic clinic.	Residential treatment with education.	Residential treatment without education.	Non- residential treatment at an orthopaedic clinic.	
	(i)	(ii)	(iii)	(i)	(ii)	(iii)	
Number of children treated ..	2	Nil.	0	0	1	0	3

## Group V.—Dental Defects.

(1) Number of Children who were :—

(i) Inspected by the Dentist :—

## ROUTINE AGE GROUPS.

7	8	9	10	11	12	13	14		
135	134	166	200	417	438	403	152	Total	2,045
								Specials	5

Grand Total 2,050

(ii) Found to require Treatment .. .. . 2,018

(iii) Actually Treated .. .. . 2,268

(2) Half-days devoted to :—

Inspection ..	..	..	..	12	} Total 217.
Treatment ..	..	..	..	205	

(3) Attendances made by children for treatment .. .. . 3,482

(4) Fillings :—

Permanent teeth ..	..	..	645	} Total 663.
Temporary teeth ..	..	..	18	

(5) Extractions :—

Permanent teeth ..	..	..	96	} Total 3,574
Temporary teeth ..	..	..	3,478	

(6) Administrations of general Anaesthetics for extractions .. Nil

(7) Other operations (Dressings and Scalings) .. .. . 526

## Group VI.—Uncleanliness and Verminous Conditions.

(1) Average number of visits per school made during the year by the School Nurses .. .. . 8.2

(2) Total number of examinations of children in the schools by School Nurses .. .. . 12,690

(3) Number of individual children found unclean .. .. . 226

(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.



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