[Report 1937] / Medical Officer of Health, Ilkeston Borough.

Contributors

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BOROUGH OF ILKESTON

ANNUAL HEALTH

AND

SCHOOL MEDICAL REPORT

For the year 1937

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.

James Harwood, Ltd., Printers, Derwent Street, Derby



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BOROUGH OF ILKESTON.

HEALTH, MATERNITY AND CHILD WELFARE COMMITTEE.

THE MAYOR (Councillor J. E. Kirk). Councillor Mrs. J. B. McINTYRE. Alderman J. WOOLLEY (Chairman). " W. LACEY. S. SHAW. ... Councillor E. ADAMS. D. BARTON. ** E. BOSTOCK. ... G. H. BROUGHTON. ,, J. HENSHAW. .. E. A. HESKETT. 22 J. HOULT. **

" J. OFIELD. " J. E. SMITH. Mrs. J. TAYLOR. .. " H. TRUEMAN.

" R. WINFIELD.

Mrs. BALL.

- " COPLEY.
- " JONES.
- " MOSS.
- " SQUIRES.
- " THORNHILL.

HOUSING AND TOWN PLANNING COMMITTEE.

THE MA	YOR (Councillor J. E. Kirk).	Councillor	J. HENSHAW (Chairman).
Alderma	n A. HENSHAW.	,,	J. HOULT.
,,	S. SHAW.		J. A. MACDONALD.
,,	J. WOOLLEY.		A. MEAKIN.
Councille	or E. ADAMS.	,,	Mrs. J. B. MCINTYRE.
,,	G. H. BROUGHTON.	,,	S. PAGE.

A. MEAKIN.

PUBLIC HEALTH STAFF (1937).

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).

Tuterculosis 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: C. E. ADCOCK, Cert. S.I.B., M.S.I.A. (1).

Sanitary Inspectors : W. NORRIS, Cert.S.I.B. (1). R. MARTIN, Cert.S.I.B. (1), appointed April, 1937. resigned August, 1937. J. L. WILLOUGHBY, Cert.S.I.B., M.S.I.A. (1), appointed September, 1937.

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 A. R. MCWHINNEY, C.M.B. (1).

> Matron, Isolation Hospital: MISS F. M. PERRY.

Matron, Maternity Home: MISS L. WELLS, C.M.B.

Tuberculosis Nurse (appointed by Derbyshire County Council) : Miss D. DONKIN, C.M.B.

> Clerks : MISS L. TRUEMAN. MISS H. CLARKE. MR. J. NICHOLLS.

(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.

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 1937.

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

Though there has been a fair amount of infectious disease, we have escaped any serious outbreak, and until such time as the new Isolation Hospital is built we must hope that our good luck will continue. But it cannot last for ever.

The birth rate in the Borough has risen. The demand for accommodation in the Maternity Home has still further increased and far exceeds the supply.

The year under review has been an active one in housing matters. By repeated inspections of the housing conditions in the town the Housing Committee has drawn up a comprehensive programme for the clearing away of houses which have long passed their period of usefulness. The first batch of clearance orders formed the subject of an enquiry in October, 1937. It is the large amount of housing work performed in the current year which is the main reason for the lateness of publication of this Report.

It will further be realised that a great deal of time has had to be spent recently on urgent matters in connection with air raid precautions. But it may cause some satisfaction to know that provision for giving first-aid treatment and decontamination to any casualties which might have occurred during air raids was reasonably complete during the past crisis. Moreover three schools have been structurally converted and equipped for use as first-aid posts, and the material for rendering them gas proof has been stored in sheds on the premises so as to enable the posts to be got ready for use in an emergency with the minimum of delay.

I have to thank the members of the Committee for their great interest in health and housing matters and for their encouragement.

I wish also to thank the whole staff of the different branches of the health department for their keenness and willing help during the past year.

I have the honour to remain,

Your obedient Servant,

H. L. BARKER.

SECTION I.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)							2,861
Population :							
Census, 1931							33,164
Estimated 1936							32,570
Estimated 1937							32,310
No. of Inhabited Ho	uses (1931 Ce	ensus)				7,336
No. of Inhabited Ho	uses ((1937) a	ccordir	ng to R	ate Bo	oks	8,503
No. of Families or Se							7,907
Rateable Value, 31st	Marc	ch, 1937				· · f.	137,479
Sum represented by	a Pen	ny Rat	е				£533
Rates 16s. 0d. in the	£ (19	36-37).					

EXTRACTS FROM VITAL STATISTICS.

Live Births. TOTAL.	М.	F.	Birth Rate.
Legitimate 542	296	246	} 17.2
Illegitimate 16	10	6	5 11.4
558	306	252	
The Birth Rate for England	and Wale	es for 1937	was 14.9.
Still Births. Tor	AL.	M.	F.
Legitimate 19	9	11 .	. 8
Illegitimate			. –
	_		-
1		11	8
Rate per 1,000 total births	(live and :		
			th Rate.
Deaths. TOTAL. M. F.			ng. & Wales.
378 226 152	1	1.69	12.4
Deaths from Puerperal Causes.	Deaths.		er 1,000 total d still) births.
Puerperal Sepsis	_		_
Other Puerperal Causes	1		1.73
1			
. Total	1		1.73
Infant Mortality.			
Death rate of Infants under 1	l year of ag	e per 1,000	live births :
Legitimate infants per			
Illegitimate infants per			
All infants per 1,000 liv			66.3
Rate for England and V	Wales .		58
Specified Deaths.			
Cancer (all ages)			41
Measles (all ages)			2
Whooping Cough (all ages)			–
Diarrhoea (under 2 years)			4

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

DURING THE YEAR 1937. (Provisional figures).

	RA	RATE		ANNUAL		DEATH-RATE	TE PER	1,000	POPULATION	TION.		KATE 1,0 LIVE B	I,000 BIRTHS.
	PER 1,000 POPULATION.	ATION.		bio	.x.			3	.si			siti	
	Live Births.	Still births.	All Causes	Typhoid s Paratypho fevers.	oq-llsm2	Measles.	Scarlet Fever.	niqoodW dguoD	Diphther	ezasuftal	Violence.	Diarrhœ and Enter (under) two years	Total Dea under or year.
England and Wales	14.9	09-0	12.4	00.0	00-0	0.02	0.01	0.04	0.07	0.45	0.54	5.8	58
125 County Boroughs and Great Towns, including London.	14.9	0-67	12.5	0.01	00-0	0.03	10.0	0.04	80.0	0-39	0.45	7.9	62
Resident Populations 25,000 to 50,000 at Census 1931).	15.3	0.64	6-11	00.0	0.00	0.02	10.0	0.03	0.05	0.42	0.42	3.2	55
London	13-3	0.54	12.3	00-0	00.0	10.0	10.0	90-06	0.05	0.38	0.51	12.0	60
ILKESTON	17.2	0-58	11.69	00.0	00.0	90.0	00.0	00-0	0-03	0.55	0.43	10.2	66.03
The maternal mortality rates for England and Wales are						f per 1	000 Li	f per 1,000 Live Births		Puerperal Sepsis	sepsis.	Others. 2-26	Total. 3.23

6

_	deatins, and the a	Sco.	at win	icii t	ney o	ccuii	cu.					
	CAUSES OF DEATH.	Sex	ALL AGES.	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65-75	75up
AL	l Causes		226	26	4	6	6	4	19	61	55	45
1	Enteric Fever		152	11	1 -	1 _	3 -	5	12	34	40	45
2	Measles	F. M.	-	-	-	$\frac{-}{1}$	-	-	-	-	-	_
		F.	1	1	-	-	-	-	-	-	-	-
	Scarlet Fever	M. F.	-	-	-	-	-	-	-	-	-	-
4.	Whooping Cough	M. F.	-		-	-	-	-	-	-	-	-
5.	Diphtheria	M.	1	-	-	-	1	-	-	-	-	-
6.	Influenza	F. M.	13	_	-	1	1	-	$\frac{-}{3}$	6	2	-
		F.	5	-	-	-	-	-	1	3	-	1
	Encephalitis Lethargica	M. F.	-	_	-	_	-	-	-	-	-	-
8.	Cerebro-Spinal Fever	M. F.		-	=	-	-	=	_	-	-	-
9	Tuberculosis of Respira-	M.	11	-	-	-	12	2	5	4	-	-
10.	tory System. Other Tuberculous Dis-	F. M.	53	$\overline{1}$	-	-	-1	3	2	ī	=	-
	eases.	F.	2	-	1	-	1	-	-	-	-	-
11.	Syphilis	M. F.	1	_	-	_	Ξ	-	2	1	-	_
12.	General Paralysis and Tabes.	M. F.	1	-	-	-	-	-	-	1	-	_
13.	Cancer, Malignant Diseases	M.	26	-		-	-	1	2	5	13	5
14.	Diabetes	F. M.	15 3	-	-	-	-	-	2	9 2	$\frac{2}{1}$	2
		F.	4	-	-	-	-	-	-	23	-3	$\frac{2}{2}$
	Cerebral Haemorrhage	M. F.	8 7	-	_	-	-	21	2	1	4	2
16.	Heart Disease	M. F.	44 34	-	-	1	1	-	$\frac{2}{2}$	18 7	12 11	10 14
17.	Aneurism	М.	1	-		-	-	-	-	1	-	-
18.	Other Circulatory Diseases	F. M.	10	2	-	-	-	-	1	3	5	1
	Prese abilitie	F. M.	18 14	-	-	-	-	1	$\frac{-}{1}$	3 2	10 4	4 6
		F.	8	1	_	-	-	-	-	2	1	4
20.	Pneumonia (all forms)	M. F.	14 5	4	4	1	-	-	1	$\frac{3}{2}$	1 1	_
21.	Other Respiratory Diseases	Μ.	1	-	-	-	-	-	-	1	-	-
22.	Peptic Ulcer	F. M.	4	-		I	-	-	2	3	1	-
	Diarrhoea, etc. (under 2	F. M.	$\frac{-}{2}$	$\overline{2}$	-	-	-	-	-	-	-	-
	years)	F.	2	2	-	-	50		-	-	-	-
24.	Appendicitis	M. F.	1	=	-	-	-	-		-	1	-
25.	Cirrhosis of Liver	M. F.	1	-	-	-	-	- 1	-	1	-	-
26.	Other Diseases of Liver,	M.	-	-	-	-	-	-	-	-	-	-
27	etc. Other Digestive Diseases	F. M.	1 4	-	-	-	=	-	1	-	1	$\overline{2}$
		F.	3	-	-	1				1	-	1
							1000					

Below is given a table which analyses the causes of the 378 deaths, and the ages at which they occurred:—

(Continued over).

	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 Ne-	М.	7	-	-	-	-	-	1	1	2	3
	phritis	F.	7	-	-	-	1	-	-	2	1	3
29.	Puerperal Sepsis	M.	-	-	-	-	-		-	-	-	-
00	011 D 10	F.	-	-	-	-		-	-	-	-	-
30.	Other Puerperal Causes	M.	-	-	-	-		-	-	-	-	-
		F.	1	-	-	-	- :	-	1	-	-	-
31.	Cong. Debility and Mal-	M.	17	17	-	-	-	-	-	-	-	-
	formation, Prem. Birth	F.	6	6	-	-	-	-	-	-	-	-
32.	Senility	M.	16	-	-	-	-	-	-	-	4	12
		F.	14			-	-				5	9
33.	Suicide	Μ.	3	-	-	-	-	-	1	1	1	-
		F.	1	-	-	-	-	-	-	-	-	1
34.	Other Deaths from Vio-	M.	7	-	-	-	2	-	1	3	1	-
	lence	F.	3	-	-	-		-	-	1	1	1
35.	Other Defined Diseases	M.	12	1		2	-	-	-	1	4	4
		F.	10	-	- 1	-	1	1	3	1	3	1
36.	Causes ill-defined or un-	Μ.	-	-	-	-	-	-	-	-	-	-
	known	F.	-	-	-	-	-	-	-	-	-	-

(Table continued).

Notes on Vital Statistics.

According to the estimate given by the Registrar General the mid-year population was 32,310. This is a decrease of 260 on the figure for the previous year. The number of live births was 558, and the number of deaths was 378. The natural increase of the population is the difference between these two figures and works out as 180. In the previous year it was 159.

The birth rate of 17.2 was appreciably higher than the figure of 16.27 of the previous year, while the death rate of 11.69 was also slightly higher than the previous year's figure of 11.39.

There was one death attributed to puerperal causes and consequently the maternal mortality rate was 1.73.

The infant mortality rate was 66.3 per 1,000 live births. It shows an increase which was due to the marked incidence of catarrhal trouble during the year.

Year.	I.M. Rate.	Year.	I.M. Rate.	Year.	I.M. Rate.	Year.	I.M. Rate
1901	181.8	1911	151.8	1921	92.5	1931	68.5
1902	176.4	1912	106.8	1922	83.8	1932	74.9
1903	198.1	1913	152.9	1923	91.2	1933	78.2
1904	183.5	1914	149.4	1924	75.5	1934	55.1
1905	158.1	1915	142.5	1925	110.9	1935	62.8
1906	177.3	1916	102.2	1926	83.4	1936	50.9
1907	156.9	1917	129.6	1927	87.2	1937	66.3
1908	147.1	1918	94.6	1928	60.2		
1909	191.2	1919	129.9	1929	78.6		
1910	132.8	1920	99.0	1930	62.3		

A table showing the rates since 1901 is appended.

Infantile Mortality Rates since 1901.

Deaths from Violence.

SUICIDE. Four cases occurred during the year, three males and one female. The three males each employed a different method namely, self inflicted throat wound, drowning, and coal gas poisoning. The female succumbed to a self-inflicted throat wound which is an unusual method for a woman to employ.

OTHER DEATHS FROM VIOLENCE. There were 10 other deaths from violence of which only one was due to a road accident, in which an elderly woman was knocked down by a motor car. An analysis is given below.

NON-SUICIDAL DEATHS FROM VIOLENCE.

Industrial (pit 2, factory	1)	 	3
Accidental drowning		 	3
Falls		 	2
Run over on railway		 	1
Run over by motor car		 	1

SECTION II.

GENERAL PROVISION OF HEALTH SERVICES.

Hospitals provided or subsidised by the Local Authority.

(1) FEVER. The Isolation Hospital belonging to the borough is situated at Little Hallam. On a basis of 144 square feet per bed it has accommodation for 10 beds, although there are actually 18 beds. Patients from outside the boundaries of the district have been admitted when the accommodation has been available. The medical officer of health is the medical superintendent and the nursing staff comprises a matron, sister and three nurses.

The hospital has been established for nearly fifty years and is no longer up to modern requirements. Consequently this authority now has the obligation placed on it by the Minister of Health under Section 63 of the Local Government Act, 1919, to build a new hospital of not less than 24 beds for infectious disease other than small-pox. Provisional plans have been approved by the Ministry to build the new hospital on the site adjacent to the existing hospital. There is no reason why the scheme should not be energetically pushed on with and completed as soon as possible.

(2) SMALL-POX. There is no separate small-pox hospital. During epidemics of small-pox in former years the isolation hospital has been used for treating small-pox cases.

In the County Council scheme mentioned in the last paragraph there is a provision to the effect that the following 13 County Districts, namely, Ilkeston Borough, Alfreton Urban District, Ashbourne Urban District, Belper Urban District, Heanor Urban District, Long Eaton Urban District, Ripley Urban District, Swadlincote Urban District, Wirksworth Urban District, Ashbourne Rural District, Belper Rural District, Repton Rural District, Shardlow Rural District, shall combine and form one small-pox area and shall provide for that area a new small-pox hospital having accommodation for a minimum of 12 beds.

It does not appear that any further action has yet been taken.

(3) MATERNITY HOME. The municipal maternity home is in Park Avenue. It contains 9 beds for maternity cases and has in addition an isolation ward. The Medical Officer of Health is the Medical Superintendent. The Obstetric Physician is Dr. P. Hughes and his services are available for any patient who is in need of medical assistance. Any practitioner, however, may attend his own patient by mutual arrangement. The nursing staff consists of a matron, sister and two trained nurses.

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.

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

- (5) ORTHOPAEDIC.—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, AND (7) SHARDLOW INSTITUTION. These former Poor Law Hospitals are used by persons resident in this area. They are administered by the Nottingham and Derby County Public Assistance Committees respectively. 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, ultraviolet light, massage and dental treatment. It is managed by a Board of Governors, and the Honorary Medical Staff consists of visiting surgeons and visiting physicians and a dental surgeon. There is also a consulting physician, consulting surgeons, and a radiologist.
- (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 ORTHOPAEDIC HOSPITAL. DERBYSHIRE ROYAL INFIRMARY. DERBYSHIRE HOSPITAL FOR SICK CHILDREN.

	SITUATION.	MEDICAL OFFICER IN ATTENDANCE.	WHEN HELD.	Accommodation.	PROVIDED BY
MATERNITY AND CHILD	(1) Albert Street	Dr. Hughes	Tuesdays, 2-4 p.m.	3 rooms	Ilkeston Corporation.
WELFARE CENTRES	(2) Wesley Street	М.О.Н.	Thursdays, 2-4 p.m.	3 rooms	do.
ANTE-NATAL CLINIC	Albert Street	Dr. Glen Bott	Mondays 2—5 p.m.	3 rooms	do.
SCHOOL CLINIC	Albert Street	М.О.Н.	Daily, 10-12. M.O.H. attends Tues- days and Thursdays.	3 rooms	do.
ORTHOPAEDIC CLINIC	Albert Street	Orthopaedic Surgeon attends monthly on 4th Wednesday.	Orthopaedic Surgeon Wednesdays, a.m. and attends monthly on p.m. 4th Wednesday.	2 rooms	do.
TUBERCULOSIS DISPENSARY	Albert Street	Dr. Kingston	Wednesdays, a.m. and p.m.	3 rooms	Derbyshire C.C.
V.D. TREATMENT CENTRES	(i) 35 North Church St., Nottingham.	h			Nottingham C.B.C.
	(2) Derbyshire Royal Infirmary, Derby.				Derby C.C. and C.B.C. jointly.

CLINICS AND TREATMENTS CENTRES.

12

Maternity Home.—In the course of the year 132 patients were admitted. It was necessary to refuse the bookings of 32 applicants on account of the lack of accommodation. The urgent need for better and more extensive accommodation for staff and patients is recognised. Land has now been acquired behind the present Home for the purposes of building new wards.

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.

A local Voluntary Committee for the Care of Cripples has been formed. They have established an occupation centre which meets once a week where adult cripples are taught various forms of hand work. This Committee is doing very good work in this direction.

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.

On the 1st July the Midwives Act, 1936, came into operation, but this authority did not apply to be made the local supervising authority. The only two bona-fide midwives who had been practising since before 1903 retired from practice under the provisions of the Act. The County Council appointed three midwives to work the county scheme of which two were already in practice namely, Mrs. Fisher and Miss Hunt. The latter midwife works on behalf of the Cotmanhay Nursing Association. The third county midwife is Mrs. Hodcroft. At the end of the year there were 10 practising midwives, all of whom were in possession of the C.M.B. certificate. No midwives are employed or subsidised by the Corporation for work done 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.

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.

Housing (Rural Workers) Act, 1926.

(2) Bye-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.

Source.—The source of the town's water supply from the Meerbrook Sough and the two bore holes at Whatstandwell, together with the pumping arrangements of the Ilkeston and Heanor Water Board Waterworks were described in last year's report. During the year important measures were taken to protect the water from contamination on the gathering ground.

Storage.—The storage reservoir at Marlpool, which has a capacity of two million gallons and is owned by the Corporation; was described in last year's report. Fears were then expressed that the reservoir was in danger of being damaged if the underlying coal was worked. Those fears have since been vindicated. Coal mining activities took place some little distance to the west of the reservoir and these were followed a few weeks later by signs of damage to the structure of the reservoir. Immediate and energetic action was taken and the reservoir was emptied and repairs to the interior were carried out. The incident should be regarded as an indication as to what to expect if the coal immediately below the reservoir is ever worked.

Extension of Supply.—During the year the following extensions of water supply were carried out. New 3 inch main in Longfield Crescent; new 3, 4 and 6 inch mains in Green Lane housing estate; extension of 3 inch main into Green Lane estate from Albany Street; extension of 3 inch main into Awsworth Road; extension of 3 inch main into Lime Street from Graham Street.

The quantity of water supplied was quite satisfactory and no restriction had to be made. The average daily consumption was just over a million gallons.

The quality of the water was very satisfactory. Samples were examined at regular intervals, both chemically and bacteriologically. The result of the most recent examination is appended.

Analysis of Ilkeston Water.

Chemical Examination.	Parts per 100,000.
Total Solids dried at 100°C	20.00
Suspended Matter	absent.
Chlorides as chlorine	2.13
Oxidised Nitrogen as nitrate	0.20
Oxidised Nitrogen as nitrite	trace.
Free Ammonia	0.011
Albuminoid Ammonia	absent.
Temporary Hardness	5.00
Permanent Hardness	5.00
Oxygen absorbed in 3 hrs. at 80°F	0.00
Free Chlorine	0.04 parts per million.
pH Value	9.10
Appearance	clear & bright
Taste and Colour	normal
Odour	none

Bacteriological Examination.

No. of colonies developing per ml. on agar at 21°C. in 72 hours	0
No. of colonies developing per ml. on agar at 37°C. in 24 hours	0
No. of colonies developing per ml. on agar at 37°C. in 48 hours	0
Coli-aerogenes count per 100 mls. at 37°C. in 48 hours	0
Presumptive B. Coli absent	in 200 c.c.

This water is of good quality and quite suitable for public supply."

Water Consumption for Years ending :-		irch,)36.	March, 1937.	March, 1938.
INSIDE AND OUTSIDE OF BOROUGH.	Gal	lons.	Gallons.	Gallons.
Consumption for all purposes	398,4	90,000	401,222,000	425,686,000
	1,0	88,770	1,099,238	1,166,263
Total Domestic Consumption	. 297,4	73,000	302,299,000	316,729,000
		17,000	98,923,000	108,957,000
Consumption per head per day-				
Dissection	. 23	3.90	24.359	25.51
Tanda		3.11	7.97	8.78
Total	. 32	2.01	32.33	34.29
Estimated population (inside and outside Boro INSIDE BOROUGH.	')	34,000	34,000	34,000
	. 297.2	98,000	302,124,000	316,455,000
		41,000	55,709,000	64,353,000
,, ,, Trade Consumption per head per day—	50,8	41,000	55,705,000	04,555,000
	. 23	.94	24.36	25.53
Tuedo		.08	4.489	5.19
Total	. 28	3.02	28.849	30.72
		33,980	33,980	32,310
ESTIMATED CONSUMPTION OUTSIDE BOROUGH		_		
Domestic		75,000	175,000	274,000
Trade (measured)	50,1	76,000	43,214,000	44,604,000

Water Consumption.—A table is given showing the consumption of water supplied by this authority during the last three years.

Sewage Disposal.—The Corporation Sewage Works at Hallam Fields has performed in an efficient manner throughout the year and has produced a satisfactory effluent.

Drainage and Sewerage.—Two new sewers have been laid in connection with the new Green Lane Housing Estate, one of 9 inches and one of 18 inches in diameter. A new sewer of 9 inches diameter has also been laid in Shaw Street.

Rivers and Streams.—The work of supervising the conditions of the rivers and streams in this district is carried out by the Tren Fishery Board and the County Councils concerned.

Closet Accommodation.—Details are given in a table at the end of this report. There were no conversions of either pail closets or privy middens during the year.

Public Cleansing.—The collection of refuse is performed by a contractor and disposal is effected by means of controlled tipping.

There are three tips at convenient situations within the borough and they are all owned by the authority. Tipping at Pewit was commenced at the end of April. The two other tips are at Gallows Inn and on Awsworth Road.

Sanitary Inspection of the Area.—Details prepared by the senior Sanitary Inspector are given in the form of tables at the end of the report.

Shops.—The number of inspections made in connection with the Shops Acts was 172. No proceedings were instituted.

Smoke Abatement.—During the year smoke observations were taken when necessary and steps were taken to remedy any nuisance.

Swimming Baths and Pools.—The Corporation owns an open-air swimming bath. In size it is not sufficient for the needs of the town. The bath is well managed. The water is changed frequently and is chlorinated. There are no privately owned baths or bathing pools in the district.

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 Acts, 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 and the programme was chiefly confined to the schools. A description of the activities is given in the School Report which follows this Health Report.

SECTION IV.

HOUSING, 1937.

HOUSING STATISTICS.

Numbe	er of New Houses erected during th	e year	:—		
(a)	Total including numbers given sepa	rately	under (b)—	150
	(1) By the Local Authority				52
	(2) By other Local Authorities				Nil
	(3) By other bodies or persons				98
(b)	With State assistance under the Ho (1) By the Local Authority—	ousing	Act—		
	(a) For the purpose of Part II	I. of tl	ne Act,	1925	Nil
					52
	(2) By other bodies or persons				Nil
Tot	tal number of houses owned by the	e Loca	1 Autho	ority	
	at the end of the year 1937				684

HOUSE INSPECTION.

1.-Inspection of Dwelling-houses during the year 1937.

(1)	(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing	
	Acts)	329
	(b) Number of inspections made for the purpose ?	752
(2)	(a) Number of dwelling-houses (included under sub- head (1) above) which were inspected and recorded	
	under the Housing Consolidated Regulations, 1925	80
	(b) Number of inspections made for the purpose :	398
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious as to be unfit for human	
	habitation	195
(4)	Number of dwelling-houses (exclusive of these referred to under the preceding sub-head) found not to be in all	
	respects fit for human habitation	134
2.—Re	emedy of defects during the year without service of form Notices.	nal
Nu	umber of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority	
	or their Officers	60

3.—Ac	tion under Statutory Powers during the year 1937.	
<i>(a)</i>	Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.	
	(1) Number of dwelling-houses in respect of which Notices were served requiring repairs	6
	(2) Number of dwelling-houses which were rendered fit after service of formal Notices—	
	 (a) By Owners (b) By Local Authority in default of Owners 	Nil Nil
<i>(b)</i>	Proceedings under Public Health Acts-	
	(1) Number of dwelling-houses in respect of which Notices were served requiring defects to be remedied	Nil
	(2) Number of dwelling-houses in which defects were remedied after service of formal notices—	
	(a) By owners	Nil
	(b) By Local Authority in default of Owners	Nil
(c)	Proceedings under Sections 11 and 13 of the Housing Act, 1936—	
	(1) Number of dwelling-houses in respect of which Demolition Orders were made	7
	(2) Number of dwelling-houses demolished in pur- suance of Demolition Orders	4
(<i>d</i>)	Proceedings under Section 12 of the Housing Act, 1936—	
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were	
	determined, the tenement or room having been rendered fit	Nil

4.-Housing Act, 1936 (Part IV.)-Overcrowding.

(<i>a</i>)	I. No. of dwellings overcrowded at the end of the	
	year	166
	II. No. of families dwelling therein	171
	III. No. of persons dwelling therein	1,275
(b)	No. of cases of overcrowding reported during the year	Nil
(c)	I. No. of cases of overcrowding relieved during the	
	year	4
	II. No. of persons concerned in such cases	25
(<i>d</i>)	Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority	

have taken steps for the abatement of overcrowding Nil

GENERAL OBSERVATIONS.

Clearance and Demolition. Demolition Orders were made in respect of 7 houses and 4 houses were actually demolished. On the 26th October the Minister of Health held an inquiry into 9 Clearance Areas comprising 78 houses. The Confirmation Orders had not yet been received at the end of the year.

Repairs. The number of houses which were inspected for defects was 329, and for this purpose 752 inspections were made. As a result of both informal and statutory action 60 houses were rendered fit. Internal water supply was supplied in the case of 39 houses. The details with regard to housing inspection and repairs is given in the tables at the end of this report.

Disinfestation. The following are the particulars with regard to the eradication of bed bugs.

1.	(a)	The number	of	council ho	uses fe	ound to	be infe	sted	
		was							6
		The number	of	council h	ouses	fumigat	ed was	s	6
	<i>(b)</i>	The number	of	other hou	ises fo	und to	be infe	sted	
		was							8
		The number	of	other hou	ses fui	migated	was		8

 The method employed for council houses was by fumigating with Hydrocyanic Acid gas.

The method employed for other houses was by fumigating with sulphur vapour and zaldecide.

- 3. All belongings of new tenants going into council houses are removed by the local authority and fumigated with Hydrocyanic Acid gas before being delivered to the council houses. Mattresses, pillows and other bedding are, however, disinfested by means of the steam disinfector.
- 4. The work of disinfestation of houses and furniture by means of Hydrocyanic Acid gas is performed by a contractor who gives the necessary certificates to the effect that the disinfestation has been carried out and that the house is safe for occupation and the furniture is safe to use.
 - The sulphur and zaldecide disinfestation of houses and the steam disinfestation of bedding are carried out by the local authority.

SECTION V.

INSPECTION AND SUPERVISION OF FOOD.

Milk.—The number of cow keepers registered with this authority was 13 and their cowsheds were inspected during the year, 20 visits being made for the purpose. At one farm a new dairy was built. The number of retail purveyors of milk was 97, of whom 4 were newly registered during the year. As regards milk of special designation 4 licences were granted during the year. One licence was for Tuberculin Tested Milk, one was for Accredited Milk, and two were on behalf of Pasteurized Milk. There are two licensed establishments for Pasteurized milk in the borough.

Meat and Other Foods.—There is no public abbatoir in this area, and all the slaughtering is performed in 18 private slaughter houses. The inspection of meat, therefore, takes up a large amount of time, and for this purpose 2,149 visits were made during the year. The amount of unsound meat surrendered during the year was four and a half tons. The character of disease found is given in the table at the end of this report, and it will be seen that tuberculosis was the main disease and more than four tons of tuberculous meat was surrendered. The following table shows the incidence in bovines and pigs. BOVINES.

Number of bovine animals slaughtered during	the	
year		1,908
Number found to be affected with tuberculosis	(in	
lungs only, 93, in the udder only, 2)		264
Percentage of animals affected with Tuberculosi	s	13.83%
Percentage of animals affected with Tuberculosis	s of	
the udder		0.104%
PIGS.		
Number of pigs slaughtered during the year		1,593
Number found to be affected with Tuberculosis		83
Percentage of pigs affected with Tuberculosis		5.20%

Shops in which food is prepared and sold have been inspected during the year. A close watch is also kept on the food sold in the markets. The various bakehouses, of which there are 19 on the register, have been inspected from time to time. One case of contamination of beer with lead occurred. The cause was discovered and the condition was remedied.

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.—Knowledge with regard to nutrition is disseminated at the various clinics and also through the health visitors. Instruction with regard to nutrition is given in the schools, particularly in special subjects classrooms which exist in every senior school.

SECTION VI.

INFECTIOUS AND OTHER DISEASES.

General.—The amount of influenza was rather greater than usual. But apart from that the incidence of the ordinary infectious diseases was below the average. The total number of all notifiable diseases was 223. If the 84 cases of chicken-pox are substracted the total becomes 139. There were 37 new cases of tuberculosis.

In the schools there is effective co-ordination with regard to the early discovery of infectious disease and the exclusion of contacts. No action has been taken with regard to artificial immunisation against diphtheria in the schools, but Schick testing is performed at the Isolation Hospital and members of the staff are immunised if necessary. At this hospital the stay of scarlet fever cases is considerably shortened by the routine use of antiserum. A stock of anti-toxin is kept at the Health Department and issued free to practitioners for the treatment of cases of diphtherai, scarlet fever, puerperal fever and cerebro-spinal fever.

Scarlet Fever.—56 cases were notified and of these 21 were treated in hospital.

Diphtheria.—27 cases were notified and 25 were treated in hospital.

Enteric Fever.-There were no cases.

Cerebro-Spinal Fever.—One case was notified. The patient was treated in the Nottingham General Hospital and recovered.

Puerperal Fever and Pyrexia.—One case of puerperal pyrexia was notified.

In the course of the year the number of cases of infectious disease treated at the Ilkeston isolation hospital was 54, of which there were 29 scarlet fever, 25 diphtheria.

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

Cancer.—There were 41 deaths from malignant disease which is an increase of 3 on the previous year. There are facilities at the various general hospitals for obtaining skilled diagnosis and specialist preatment, including treatment by radium. The accompanying table shows the particular organs affected in the 41 fatal cases related to age and sex.

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CANCER
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Site affected, Sex and Age at Death.

	1	1
81- M F	11.11.1.1.1.1.1.1.1.1.1	1 -
-80 F		6 3
70 F	0.4011-111-111	12 3
51–60 M F	1 1 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 4
41-50 M F		1 4
31-40 M F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-
21–30 M F		1
11-20 M F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-
All Ages M F	-01110111011100100	26 15
	:::::::::::::::	:
TE.	estine	:
SI	Face Oesophagu Stomach Large Int Rectum Liver Neck Lung Prostate Braast Bladder Mouth Brain Uterus Ovary	All Sites
Total Cases.	- 6 2 2 4 61 - 61 - 60 - 61 - 60 -	41
	SITE. All Mee ME M F M F M F M F M F M F M F M F M F	All MF All Face All MF M M F M M F M M F

Venereal Diseases.—The following table shows the incidence of this group of diseases.

Number	of	New	Cases	of Ve	enereal	Diseases	resident	in	
		Ilke	ston	treated	during	g 1937.			

			SYPI	HILIS.	GONOR	RHOEA.	Total.	
Notting	ham		Male. 5	Female.	Male.	Female.	Male. 16	Female.
Derby			 -	-	1	-	1	-
	Тот	ALS	 5	1	12	4	17	5

Total number of new cases 22 persons.

Prevalence of and control over Notifiable Diseases.—A table is given to show the prevalence and control over notifiable diseases.

Disease.	No. Notified.	No. Removed to Hospital.	Total Deaths.
Tuberculosis, Pulmonary	29	13	16
Tuberculosis, other forms	8	3	5
Pneumonia (all forms)	43	13	19
Scarlet Fever	56	21	
Diphtheria	27	25	1
Erysipelas	3	1	_
Chicken-Pox	84	_	-
Puerperal Pyrexia	1	4	_
Ophthalmia Neonatorum	1		
Cerebro Spinal Fever	1	1	
Dysentery	2		
Poliomyelitis	5	1	

OPHTHALMIA NEONATORUM.

TABLE.

	CASES.				Total Blindness.		
Notified.	Trea	ited.		Vision impaired.		Deaths.	
Notified.	At home.	In hospital					
1	1	-	1	-	-	-	

Age Group.	Sex.	I'neumonia all forms.	Chicken-Pox.	Scarlet Fever.	Diphtheria.	Erysipelas.	Dysentery.	Ophthalmia' Neonatorum.	Puerperal Pyrexia.	Cerebro Spinal Fever.	Poliomyelitis.
0-1	М. F.	-1	4 2		1 1	1 1		1	1 1	1 1	
1-2	М. F.	1	1 1		1	1 1			-	-	
2-3	М. F.	2	_	$-\frac{1}{2}$	1		-	-	-	-	-
3— 4	М. F.	$\overline{1}$	$\frac{2}{1}$	2 1	1 1	-	-	-	-	Ξ	-
4— 5	М. F.	2	5 4	1 3	-1	-	-	-	-	-	$\frac{1}{2}$
5—10	М. F.	5 1	27 28	9 15	3 8	-		-	-	-	-1
10—15	М. F.	2	3 4	6 6	1	-	-1	-	-	-	1
15—20	М. F.	1	$\frac{-}{2}$	4 6	-	-		-	-	1	-
20—35	М. F.	8 3		1	2 7	=	-	-	-1	-	-
35—45	М. F.	4 2	-	-	-	1	-1	-	=	-	1. 1
4565	М. F.	5 4		=	-	1 1		-	-	-	
65 up- wards	М. F.	-			-	-		-			- 1
Total all ages	М. F.	30 13	42 42	23 33	9 18	2 1	$\frac{-}{2}$	1	-1	1	2 3
Grand I	TOTAL	43	84	56	27	3	2	1	1	1	5

SEX AND AGE DISTRIBUTION OF CASES OF NOTIFIABLE DISEASES DURING 1937.

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SECTION VII.

TUBERCULOSIS.

Notification. The number of new cases of respiratory tuberculosis were in the case of males 13, and in the case of females 16, showing a decrease of 7 on the previous year. As regards the non-respiratory form 3 males and 5 females were notified, showing an increase of 2 on the previous year.

Deaths. There were a total of 21 deaths, which is a decrease of 4 on the previous year. Sixteen were due to the respiratory form, and 5 to non-respiratory forms. All the deaths except two had been notified previously as being cases of tuberculosis.

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.

		1	New Cases.				DEATHS.				
Age Periods.		Respiratory.		Non- respiratory.		Respiratory.		Non- respiratory			
		М.	F.	М.	F.	М.	F.	М.	F.		
0			-	-	1	1	-	-	1	-	
1			-	-	-	1	-	-	-	1	
5			-	-	1	3		-	1	1	
10			1	1	-	-	-		-	-	
15			3	1	-	-	-	2	-	-	
20			1	2 7	-	-	2	1	-	-	
25			2		-	-	3	1	-	-	
35			3	3	-	-	- 2	2	-	-	
45			1	1	-	-	1	-	1	-	
55			1	1	1	-	3	-	-		
	id upwa	ards	1	-	-	-	-		-	-	
То	TAL		13	16	3	5	11	6	3	2	

Treatment. The treatment of tuberculosis is carried out by the County Council. For this purpose there is a dispensary at the Albert Street Clinic, where two sessions are held every week on Wednesday morning and afternoon, at both of which the tuberculosis officer is present. Any practitioner may send patients to the dispensary for consultation and treatment. For the purpose of X-ray examinations and for artificial pneumo-thorax refills the patients are seen in Derby. In-patient treatment for pulmonary cases is provided at Walton and Penmore Sanatoria and at the Whitworth Hospital. For non-respiratory cases there are beds in Bretby Hall Orthopaedic Hospital. The tuberculosis officer and the nurse make domiciliary visits to the homes of patients. There is also a voluntary after-care committee which supplies extra nourishment, clothing and bedding to necessitous patients.

Of the 29 respiratory cases notified during the year, 13 patients were admitted to the various sanatoria. Of the 8 non-respiratory cases, 1 was treated at a general hospital and 2 at Bretby. Out of the 37 cases notified during the year, no less than 11 patients died within six months.

SECTION VIII.

MATERNITY AND CHILD WELFARE.

Ante-Natal Care .- One ante-natal session has been held every week on Mondays throughout the year. Each session is attended by the specialist medical officer, Dr. Margaret Glen Bott. The total attendances at the 47 sessions were 1,038, and the average number of patients at each session was 22, as compared with 17 in the preceding year. The number of individual patients who attended during the year was 315 as against 217 in the preceding year. Of these individuals 276 were new cases, compared to 186 in the preceding year, showing an increase of 90 patients. It will therefore be seen that the greater facilities offered to expectant mothers at the clinic have been made use of in no uncertain manner. In fact the number of expectant mothers who attended the antenatal clinic represented 54.6 per cent, of the total 577 live and still births which occurred in the borough during the year. The number of cases who were sent into hospital on account of expected difficulty was 26, and a Caesarean operation was performed in respect of 10 cases. X-ray examinations were made as regards 5 patients.

Midwives. During the year the Midwives Act, 1936, came into operation, but the supervising authority is the County Council. At the end of the year there were 3 county midwives of whom one was employed by a voluntary nursing association. The total number of midwives was 10, all of whom possess the C.M.B. certificate. The number of births notified by midwives was 557.

Municipal Maternity Home. The Maternity Home is described in the beginning of the report. During the year 132 cases were admitted. No maternal death occurred and there were no cases of puerperal pyrexia. The number of bookings refused was 32, which shows the urgent need for increased accommodation. The statistics for 1937 are given below.

1.—Name of Institution : The Maternity Home, Ilkeston, Derbyshire	
2.—Number of maternity beds in the Institution (exclusive of isolation and labour beds)	9
3.—Number of maternity cases admitted during the year	132
4.—Average duration of stay	14 days
5.—Number of cases delivered by—	
(a) Midwives	117
(b) Doctors	15
6.—Number of cases in which medical assistance was sought by a midwife in emergency	39
7.—Number of cases notified as—	
(a) Puerperal Fever	Nil
(b) Puerperal Pyrexia	Nil
8.—Number of cases of pemphigus neonatorum	Nil
9Number of infants not entirely breastfed while	
in the Institution	3
10(a) Number of cases notified as Ophthalmia	
Neonatorum	Nil
(b) Result of treatment in each case	Nil

11.—(<i>a</i>)	Number of maternal deaths	 	Nil
(b)	Cause of death in each case	 	Nil
12.—(<i>a</i>)	Number of infant deaths		
	(i) Stillborn	 	2
	(ii) Within 10 days of birth	 	2
(b)	Cause of death in each case, and post-mortem examination (if obt		
	(1) (a) Hydrocephalus.		
	(b) Diseased Placenta.		
	(2) (a) Atelectasis.		
	(b) Congenital Heart.		

Home Visiting.—There are four health visitors who are also part-time school nurses. The accompanying table gives a summary of their work during the year.

Summary of Health Visitors' Reports for 1937.

Births Notified (twins 6	5)				558
Males					297
Females					261
Still Births					16
Died within Three Days	s				12
Attended by Medical Pr	ractitione	ers			57
Attended by Midwives	only				367
Admitted to Maternity	Home				134
Number of first visits					541
Number of re-visits und	er 1 year				3,037
Number of re-visits ove	r 1 year				4,315
Total number of visits p	paid				7,893
Children weighed					534
Average weight				lbs.	7.4
Breast fed at birth					515
Bottle fed at birth					9
Breast and Bottle					2
Spoon fed					4
Pre-natal Cases, first vis	sits				107
Outside the Borough					23
Number of individual in	fants un	der 1	year vi	sited	2,760
Number of individual cl					4,043

Maternity Outfits.—Complete maternity outfits are kept in the health department and can be loaned to necessitous cases.

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.

The attendances at the clinics are shown in the following table.

Individual Cases.	Total Attendances.	Examinations by Doctor.	Infants under One Year.	Toddlers.
578	2,497	240	1,648	849
		COTMANHAY.		
251	1,032	223	622	410

ATTENDANCES AT INFANT WELFARE CENTRES.

 251
 1,032
 223
 622
 410

 Still Births.
 All notified still-births are made the subject of enquiries.
 During the year 16 still births were investigated with

enquiries. During the year 16 still births were investigated with the results given below. In no case was the cause associated with ante-partum haemorrhage or albuminuria.

Death in utero previous to labour			10
Malpresentation or obstructed labo	our		1
Congenital deformity of foetus			5
	Former		10
	TOTAL	• •	16
			-

Puerperal Pyrexia and Puerperal Fever.—Arrangements exist for the treatment of these cases in the Derbyshire Hospital for Women at Derby. There is also a consulting obstetrician whose opinion and assistance can be obtained in complicated cases. No case of puerperal fever occurred, but one case of puerperal pyrexia was notified and treated at home.

Maternal Deaths. Enquiries are made into all maternal deaths to see if anything further can be done in the way of prevention. Recently arrangements have been made by which difficult obstetric cases can be taken without delay into either the Derbyshire Hospital for Women or the Nottingham Hospital for Women. One death only from puerperal causes was registered during the year. It was due to pulmonary embolism. The maternal mortality rate per 1,000 total births was 1.73. Infantile Deaths. The deaths of infants under one year of age are enquired into by the health visitors, and their reports are examined by the medical officer in conjunction with the child welfare record card of the infant. The number of infantile deaths during the year was 37. The infantile mortality rate per 1,000 live births was 66.3. The following table classifies the causes of infant deaths :—

Prematurity	and Conge	nit	al defects		 23
Pneumonia					 5
Diarrhœa					 4
Bronchitis					 2
Measles					 1
Tuberculous	Peritonitis				 1
Convulsions					 1
					-
			TOTAL		 37

Free Supply of Milk.—Under the provisions of the Public Health Act, 1936, 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 706, and the approximate cost was f_{208} .

Infant Life Protection. 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.—Under the provisions of the approved orthopaedic scheme in-patient treatment is available at Bretby Hall Orthopaedic Hospital and financial help is given in necessitous cases. Two children under school age received treatment as in-patients during the year. Ascertainment of crippling conditions among children under school age is carried out by the health visitors during their routine visiting, and also by examination of children at the child welfare centres. Two sessions were held each week at the orthopaedic clinic under Miss Garratt, one of the county orthopaedic nurses. On the fourth Wednesday of each month Dr. Lennane, the county orthopaedic surgeon, was in attendance. During the year 33 individual children under school age attended for treatment. The total attendance of these children at the nurse's clinics was 109, and at the surgeon's clinic 71. The defects treated were as follows :—

Rickets			 13	Spastic Para	lysis		 1
Congenital	Deform	nity	 4	Kypho-Scolie			 1
Flat Feet			 4	Tuberculosis	Finge	r	 1
Talipes			 3	Others			 4
Poliomyelit	is		 2				—
					T	OTAL	 33

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

MATERNAL MORTALITY.

The following report prepared by the Medical Officer of Health upon the subjects discussed in the Ministry of Health Circular, 1622, was sent to the Ministry on the 7th December, and was under consideration by the appropriate Committee of this authority at the end of the year :—

MATERNAL MORTALITY.

In accordance with Circular 1622 I have the honour to submit the following report concerning the maternity and allied services in the Borough of Ilkeston. This report is intended to indicate what steps are now being taken in this borough to combat mortality or morbidity arising out of child birth, what further steps appear to be necessary and what action it is proposed to take. The subject is discussed under the same paragraphs as those which occur in Circular 1622.

1. **Team Work.** There is at present close co-operation between the medical officer of health, the medical officers of the ante-natal clinic and the maternity home, the consultant obstetricians, the medical staffs of hospitals, the general practitioners and the health visitors. The area of this district is so compact that intimate communication can be maintained between the practitioners and the health department without the holding of special meetings. The practitioners have been informed by circular letter with regard to the special facilities which are offered by the health department. There is fairly close co-operation between the midwives and the health visitors and the connection between the midwives and the ante-natal clinic is remarkably intimate and beneficial to the patients. In fact the co-operation between the health department and the midwives is as close as could be expected in the present condition of affairs where the local authority, although the maternity and child welfare authority, is not also the local supervising authority for midwives.

2. Consultant Services. Adequate arrangements have been made in that the services of two obstetric specialists of consulting rank are available for practitioners to call into consultation. One consultant lives in Derby and the other in Nottingham. Arrangements have also been made with the Derbyshire Hospital for Women for the in-patient treatment in that hospital of cases of puerperal pyrexia that are in need of Hospital treatment, and moreover the Derby consultant is the senior obstetric surgeon of that hospital. Full use has been made of this scheme. It is also possible to remove from the municipal maternity home to that hospital any case of puerperal pyrexia so as to lesson the risk of the spread of infection to any other patient in the home.

3. Emergency Unit.—The need for such an emergency unit as has been described in the Circular has not been felt in this area owing to the proximity of the hospitals in Nottingham and Derby and the transport facility. Occasionally emergency cases have been transferred with ease to the local maternity home. The question will, however, be further reviewed.

4. Maternity Accommodation.—The only institution within this area for maternity cases is the municipal maternity home which has accommodation for nine beds and has also an isolation ward. There is a great demand for beds in this home and the number of bookings has had to be limited during the past few years so as to prevent any danger from overcrowding. During 1936 the number of patients admitted was 129, whereas the total number of live and still births within the borough was 559. The number of bookings refused was 33 and probably others would have applied if it were not common knowledge that booking has to be made at this home several months in advance of the date of confinement. There is therefore a definite need for more maternity beds in this area and the authority is apparently aware of this need. The Maternity and Child Welfare Committee has acquired a site which is eminently suitable for the erection of a new maternity home, but no resolution has yet been passed definitely sanctioning this procedure. The present maternity home was opened in 1920 and is out of date. The accommodation for patients is deficient, there is not sufficient room for the staff and there is no proper accommodation for the ante-natal examination of the prospective patients. In spite of all the disadvantages the home continues to do excellent work. It will be realised that there are few opportunities to give in-patient treatment in the ante-natal period and there is need for a special ward for ante-natal treatment.

It should be added that a certain number of cases obtain accommodation in the converted public assistance hospital at Shardlow. For cases which are expected to be abnormal or to require operative measures, accommodation is usually obtained in the special women's hospitals in Derby or Nottingham.

5. Ante-natal Services.—There is a municipal ante-natal clinic at which sessions are now held every week. It really merits the title of "consultative" ante-natal clinic in that practitioners as well as midwives send their patients and the result of examination and any necessary advice is communicated to the medical attendant or midwife. Nearly all the midwives attend the clinic with their patients and are interviewed by the medical officer in charge. The latter is a woman doctor who is an obstetric consultant in Nottingham. This clinic seems to meet the needs of this area and is very necessary. In connection with ante-natal work I should like to remark that very few medical practitioners actually book confinements. They usually inform applicants that they should book a midwife and if it happens that the midwife needs medical assistance then the midwife has the power under the Midwives Acts to send for the practitioner and the services will be rendered free of charge to the patient. The result of this arrangement is that the medical practitioner who is called in has seldom seen the patient during the ante-natal period and to a certain extent is handicapped. As a matter of fact about one half of the patients confined at home attend the ante-natal clinic.

With respect to the municipal maternity home all the patients are examined ante-natally by the matron or sister. Any difficult cases are also examined by the visiting medical officer. I have recommended that all the patients booked for the maternity home should be examined as a routine measure by the visiting medical officer seeing that he will be called in to assist if any difficulty arises. Up to the present the appropriate committee has not agreed to a special session being held for this purpose.

6. **Post-natal Services.**—At present there is no special postnatal session at the ante-natal clinic although some patients are asked to return after confinement for further examination. Consideration will, however, be given to this. Ample facilities exist at the neighbouring women's hospitals for the treatment of gynaecological conditions.

7. Ancillary Services.

- (i) Adequate arrangements exist for the supply of milk free to necessitous expectant and nursing mothers. As regards expectant mothers the supply is not limited to the last three months of pregnancy.
- (ii) It is doubtful if a service of Home Helps would be patronised in this area where it is usually easy for help to be given by relations or neighbours. The writer has had considerable experience of the service of Home Helps in another town and found their use to be very limited. The matter will be further considered.
- (iii) It is the intention of this authority to give dental treatment to expectant and nursing mothers in the near future. At present all the accommodation in the dental department of the clinic is fully occupied in the treatment of school children.

 Records.—The present system of record keeping with regard to ante-natal and maternity cases is fairly comprehensive and seems to work well. It will be further reviewed if found necessary.

9. Education.—A great deal of personal education in maternity matters is carried out along with routine work at the maternity home and the ante-natal clinic. The educational work of the health visitors is also very valuable. Some of the midwives are also doing useful work and they will be a valuable channel of education as their own education and training improve in the future. The objection of expectant mothers to ante-natal examination is gradually, but surely, being broken down. This year an attempt was made to start an evening class in homecraft and mothercraft for adults in connection with the night school schemes. Although the arrangements were made no candidates for the class put in an appearance. A further attempt will perhaps be made in another part of the district.

10. General.

- (1) The recommendation with regard to the appointment of a panel of practitioners able and willing to give obstetric assistance is being considered at present by the local division of the British Medical Association.
- (2) In connection with the ante-natal clinic and the maternity home I have made arrangements with the local general hospital for X-ray photographs to be taken of expectant mothers in connection with whom abnormalities are suspected. This procedure has been found to be very valuable and it has been possible to confirm the diagnosis of conditions such as the presence of twins or of an Anencephalic foetus or other monster. In my opinion this facility for X-ray examination should be made available wherever possible in connection with all consultative ante-natal clinics.
- (3) It is the financial consideration which handicaps further advance in areas such as this which possess a low rateable value and never seem to produce any rich benefactors. To such areas grants on a more liberal scale should be made available for purposes of such great national importance as the building of maternity homes.

1937,

SANITARY INSPECTION OF THE DISTRICT.

Details of Visits and Inspections made by the Sanitary Inspectors during the year.

Inspection of Premises					 	466
Re-visits during repairs					 	603
Canal Boats Inspected					 	7
Caravans, Tents and Simil	ar Stru	ictures			 	10
Cinemas and Theatres					 	18
Cowsheds					 	20
Drainage Inspections					 	52
Water, Smoke and Colour			ins		 	27
Factories, Workshops and	Work	olaces			 	159
Outworkers' Premises					 	5
Offensive Trades					 	6
Petrol Storage Premises					 	30
Ashpit Inspections					 	296
Privy Inspections					 	2
Ashbin Inspections					 	2,900
Pail Closet Inspections					 	5
Water Closet Inspections					 	563
Smoke Observations					 	2
Infectious Diseases Investi	gations	5			 	87
Cases removed to Hospita					 	55
Bedding Disinfected					 	267
Rooms Disinfected					 	274
Beds Disinfested					 	58
Rooms Disinfested					 	32
Clearance Area Removal					 	21
					 	24
Miscellaneous Visits					 	528
Houses inspected for Housi					 	69
_	ing Dec	17		(Acts)		260
		(*.	io using	,	 	-00

Meat and Other Food Inspections.

 		 	2,149
 		 	478
 		 	3
 		 	134
 		 	26
 		 	Nil
 		 	3
 	··· ··		

Notices Issued.

Number of Informal Notices issued (Public Health Acts)		110
Number of Informal Notices served (Shops Acts)		1
Number of Informal Notices served (Housing Acts)		65
Number of Statutory Notices served (Public Health Acts)		Nil
Number of Statutory Notices served (Shops Acts)		Nil
Number of Statutory Notices served (Sec. 9, Housing Act, 193	(6)	24
Number of Statutory Notices served (Sec. 157, Housing Act, 1		807
Number of Statutory Notices served (Sec. 168, Housing Act, 1		57

Details of Improvements made and Defects remedied during the year under the Public Health Acts and Housing Acts.

Exterior of Houses.					
Roofs repaired					45
NT 11 1 1 1 1					74
Chimney Stacks repaired					20
Eavesgutters and downspouts repaired or p	provid	ed			56
Dampness remedied (including provision	n of I	new	damp-p	proof	
courses)					44
Sub. floor vents provided					1
Door Steps renewed					11
Additional Wash-houses provided		••			
Yard Division Walls repaired		• •		•••	6
Drainage.					
Drains opened and cleanced					32
Drains opened and cleansed Drains repaired or relaid			•••	•••	7
New drains and inspection chambers prov	vided				2
Drains tested by water, smoke or colour flu					27
Drain ventilators repaired					
Underground rainwater cisterns abolished					3
Broken Inspection Chamber Covers renewe					4
Rainwater Pipe disconnected from drain					_
Yards repaired or repayed					107
raidy repaired of repared 11 11					
Interior of Houses.					
Houses cleansed					14
	••	••			14 59
Floors relaid or repaired		•••		•••	88
YTT 11		•••			74
		•••			35
Design frames manifed		•••		•••	23
Fireplaces, ovens, or sideboilers repaired	•••	•••			58
Stairs repaired	•••	•••		•••	21
Balusters repaired	•••				2
Handrails provided					57
Water in cellars remedied					2
Defective gas fittings					ĩ
Pantry vents and lighting improved					6
Washing coppers provided or repaired					14
Small defects remedied					65
Secondary Ventilation provided					20
, I					
Sinks, Baths, etc.					
New sinks provided	••	••			31
Sink waste pipes trapped or repaired	••	•••	•••		4
Water Supply.					
Internal supply of water provided					39
Internal supply of water provided					39
W.C.'s, Urinals, etc.					
Waterclosets, new basins or seats fixed					13
W.C. Door or Frames repaired					13
Defective fittings repaired					17
Choked W.C.'s remedied					7
Additional W.C.'s provided					6
New Floors to W C's				1735	1

Privies, Pails and Cesspools.						
Privies converted into W.C.'s						Nil
Pails converted into W.C.'s						NiI
New pails to existing pail closets						NiI
Ashpits and Ashbins.						
						2
Number of Ashpits abolished		•••		•••		
Number of Defective Ashpits repai		•••		•••		1
New Ashbins provided	•••	•••	••	•••	•••	253
INSPECTION AND SUP	ERVIS	ION	OF FO	OD.		
Cowsheds.	220120					
Cowkeepers registered						13
Cowsheds						25
Inspections						20
Informal Notices issued		• •		• •		Nil
Contraventions Remedied (Number of	Cowshe	ds).				
Newly-built Cowsheds				00000	2100	-
Where floors were repaired						_
Where feeding troughs were repaire		ovid	ed			
Where lighting and ventilation wer			cu	•••	•••	_
	· · ·	, veu		•••	•••	
Where drain inlets were removed to		i.	• •	• •	• •	_
Where walls were rendered in ceme		ie	• •	•••	• •	
					• •	-
Where approach paving was repair		•••	• •		• •	-
Where manure dump was moved		• •	• •			1
Where work is completed	•••			•••	• •	1
Where work is in progress		• •	• •			-
Number of Farms.						
Where new Dairies were built.						1
Where dairies were improved						1
Where cowkeeping was given up						-
Dilia I Dana di Milla						
Dairies and Purveyors of Milk.						
Number of producers of milk	•••			••		13
Number of retail purveyors			• •	• •		97
Number of Inspections		••				26
Registered during the year (Retaile	ers)					4
,, ,, ,, (Wholes	salers)					1
Removed from Register during the	year					1
Informal Notices served	••	••	••	•••	• •	1
Milk Special Designations Order,						
Licences granted during the year						4
Dealers licensed to sell Tuberculin						1
Dealers licensed to sell Accredited						1
Dealers licensed to sell Pasteurise						2 2
Pasteurising Establishments						2
Milk Samples.						
Number of samples taken for Bact	eriologi	cal E	xamina	tion		Nil
Number of sediment tests made		•••				3
Slaughterhouses.						
Number of slaughterhouses on Reg	ister					
(Registered 5, Licenced 13)						18
Number of visits made, including r						2,149
AT 1 (AT 1) 1 A			inuay vi			2,143
runnor or rouces issued						-

PROSECUTIONS. There were no legal proceedings taken during the year.

Unsound Food Surrendered during the Year.

		TUBERCULO	OSIS.		
3	Bovine	Carcases (weight 1,696 lbs.)	3	Pig's	Carcases (weight 470 lbs.).
$207 \\ 53 \\ 31 \\ 96 \\ 1 \\ 37 \\ 14 \\ 29 \\ 4$	"" "" "" "" ""	Lurgs (sets). Livers. Mesenterys. Heads. Tongue. Spleens. Stomachs. Kidneys. Hearts.	$ \begin{array}{r} 71 \\ 28 \\ 6 \\ 6 \\ 13 \\ 2 \end{array} $	11 11 11 11 11	Heads. Plucks. Spleens. Lungs (sets). Mesenterys. Kidneys.
9 4 9		Udders. Intestines. Omentums.			

1 ,, Skirt.

Total Weight 9,693 lbs.

OTHER DISEASES AND INJURIES.

4	Bovin	ivers				Multiple Abscesses.
4						Angiomatosis.
1						Distomatosis.
4	,,					Cirrhosis.
i	**	Lungs				Abcesses.
0	,,					Hydatid Cy ts.
$\frac{2}{1}$	"	**	• •	• •	•••	Pneumonia.
0	"	,,			••	
$\frac{2}{12}$,,	Tiddawa			•••	Pleurisy.
14	**	Udders				Mastitis.
2		Kidneys				Infarction Cysts.
4						Nephritis.
1		Heart				Pericarditis.
1	,,	Head				Actinomycosis.
	bs. of					Unsound.
33]	lbs. of	Pork				Bone Taint.
6	Pigs.	Lungs				Pleurisy.
3		Plucks				Cirrhosis and Pleurisy.
4		Hearts				Pleurisy and Adhesions.
2		Livers				Cirrhosis.
225		Hocks and	Trotte	rs		Decomposition.
5		s' Livers				Distomatosis.
5	,,					Hydatid Cysts.
1		Pluck				Pleurisy and Adhesions.
i	,,					Hydatid Cysts.
î	.,	T unge				Hydatid Cysts.
1	"	Lungs				Strongularia
1	,,	Caraaaa	(mainh)	50 11-		Strongylosis.
25 1	ha" of	Carcase	weight	t 50 10s	.)	Emaciation.
00 1	DS. OI	Mutton				Decomposition

Total weight, 5991 lbs.

OTHER UNSOUND FOOD SURRENDERED.

4 tins of Corned Beef-Unsound		 	24 lbs.
6 " Ox Tongue-Unsound		 	33 lbs.
3 " Cooked Pork—Unsound		 	18 lbs.
2 " Cooked Mutton-Unsound		 	12 lbs.
1 Box of Kippers-Unsound		 	14 lbs.
2 Rabbits		 1	4 lbs.
Total Weight,	105 lbs.		

Total Weight of Unsound Food Surrendered during the Year.-10,3971 lbs.

	Cattle exclud- ing Cows	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed (if known)	1,908		92	4,185	1,596
Number inspected	1,908	-	92	3,967	1,596
ALL DISEASES (except T.B.) :	_	_		1	—
Cascases of which some part or organ was condemned	33		_	17	13
Percentage of the number inspected, affected with disease (other than T.B.)	1.73%	2	-	0.45%	0.81%
T.B. ONLY : Whole carcases condemned	3	_		_	3
Carcases of which some part or organ was condemned	261	_	-	_	80
Percentage of the number in- spected, affected with T.B.	13.83%	-	_	_	5.20%

CARCASES INSPECTED AND CONDEMNED.

Public Health (Meat) Regulations, 1924.

umber of anima	is slaughtered	during the year :		
Bovines.	Calves.	Sheep and Lambs.	Pigs.	
1,908	92	4,185	1,596	

Bovines.	Calves.	Sheep and Lambs.	Pigs.
159.	7.6	348.7	133.

Offensive Trades.

Number on Register (Tripe I	Boiler)		 • •	••	1
Number of Notices served		 	 		Nil

Bakehouses.

Number on Register	 	 	 	19
Number of Notices issued	 	 	 	Nil

Sanitary Supervision of Music Halls, Theatres, etc.

An Annual Report is submitted to the Health Committee and the Local Licencing Bench in accordance with Circular 120 of the Ministry of Health, dated 25th August, 1920. The following is a copy of the Report for 1937 :—

Scala and Kings Picture Houses and New Theatre.

These premises have been inspected from time to time during the year, both during performances and at other times. There have been no serious complaints. Any minor matters which are found are notified to the Managers and are rectified without delay.

Premises with Music and Dancing Licences and Billiards Saloons.

These have been inspected occasionally during the year and there has been no cause for complaint.

Canal Boats Acts.

The Public Health Act, 1936, which came into operation on the 1st October, 1937, repealed the Canal Boats Act, 1877, except Sections 12, 16 and 17, and the whole of the Canal Boats Act, 1874. The following is a copy of the Report for the year :—

LADIES AND GENTLEMEN,

ANNUAL REPORT ON CANAL BOATS, 1937.

I have the honour to submit the Annual Report of work done during 1937, under the Canal Boats Acts, 1877/1884, and Regulations made thereunder.

On the 1st October, 1937, the Public Health Act, 1936, came into operation and this Act repealed the Canal Boats Acts, 1877 and 1884, so that from that date this Report is in accordance with Sections 249 to 258 of the Public Health Act, 1936.

During the year seven canal boats were inspected, but only two of these were registed boats. The other five boats were unregistered and not used as dwellings, they are used by the Erewash Canal Carrying Company, Ltd., of Leicester, for short distance hauls.

The two registered boats inspected were the "Ash" and "Cyprus." The former was registered at Loughborough, No. 61, for 3 adults and was occupied by 1 man and 1 woman. The boat "Cyprus," inspected on the 19th May, was not properly lettered, marked and numbered, and no certificate of registration was produced. It was occupied by 2 men. On the 20th May a complaint note was sent to the owners, The Erewash Canal Carrying Company, Ltd., Leicester, informing them of the contravention of Sections 3 and 5 of the Canal Boats Act, 1877. The complaint note was returned on the 8th June, the Canal Boats Inspector for the Long Eaton U.D.C. having certified that the boat was then properly lettered and marked and carried the copy of the registration certificate as required by the Act.

Both the registered boats were in a clean and satisfactory condition, and no persons appeared to be suffering from any infectious disease.

No boats were registered or removed from the register during the year.

The boats plying through the District are all narrow boats generally travelling North empty, and returning through the District loaded with coal slack from colliery wharves situated a few miles North of the Borough. It is due to the fact that the boats do not stop in the District to load up, that so few are inspected, although many visits are paid to the Canal.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

C. E. ADCOCK,

Senior Sanitary Inspector and Canal Boats Inspector.

Common Lodging Houses.

There are no Common Lodging Houses in the Borough.

Factory and Workshops Act.

1.-INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

Premises	Inspec- tions.	Number of Notices.	Prosecu- tions.
Factories (including Factory Laundries)	24	Nil	Nil
Workshops (including Workshop Laundrics)	51	Nil	Nil
Workplaces (other than outworkers' premise	s) 84	Nil	Nil
TOTAL	159	Nil	Nil

2.-DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

			NUM	BER OF DE		No. of offences in respect of
Particula	urs		Found.	Remedied.	Referred to H.M. Inspector.	which prosecu- tions were instituted.
Want of cleanline			Nil	Nil	Nil	Nil
Want of ventilation	on		,,	,,		,,
Overcrowding			.,	,,	,,	,,
Want of drainage	of floors		,,	.,	,,	**
Other nuisances			1	1	,,	,,
Sanitary	Insufficient Unsuitable or		Nil	Nil	"	**
Accommodation {	defective Not separate	for	,,	,,	.,	"
Illegal occupation		d bake-	,,	,,		**
house			**	**	2.	,,
Sections n		er the the		"		"
	ctories and V fer of Powers) (Nork-				
	TOTALS		1	1	Nil.	Nil.

Outworkers in Unwholesome Premises, Section 108.

Nature of Work.	Instances	5.	Notices Served.	Prosect tions	
Lace, Lace Curtains and Nets	Nil		Nil	Nil	
Outworkers.					
No. of lists received during the	year			 	3
Number of outworkers, first hal	lf of year			 	Nil
Number of outworkers, second	half of year	r		 	8
Number of visits made				 	5

Petroleum Acts.

Number of Petroleum Spirit Licences issued	 	 42
Number of Carbide of Calcium Licences issued	 	 3
Number of inspections made	 	 30

Rag Flock Acts.

No samples were taken during the year.

Rats and Mice Destruction Act.

This Act is administered by the County Council.

Rent and Mortgage Interest (Restrictions) Acts.

Two Certificates were issued during the year.

Shops Acts, 1912 to 1936.

There are local Orders made under the Shops Acts, 1912, in respe	
two trades, namely :(a) Boots and Shoes, (b) Barbers and Hairdre	ssers.
Number of visits made under the Shops Acts	172
Number of Preliminary Notices served (under Section 10, 1934 Act)	Nil
Number of Notices served with respect to the exhibition of forms	
and records	1

Prosecutions.

No proceedings were instituted under the Shops Acts during the year.

Recent Legislation.

Three New Shops Acts came into operation during the year, viz. :--

The Retail Meat Dealers' Shops (Sunday Closing) Act, 1936.

The Shops Act, 1936.

The Shops (Sunday Trading Restriction) Act, 1936.

The first Act prohibits the sale on Sunday of butchers' meat, not only in butchers' shops, but also at a stall or any other place (subject to exemption for Jewish butchers licensed for the sale of Kosher meat). Dispatch or delivery of butchers' meat is also prohibited except when Christmas Day or Christmas Eve falls on a Sunday.

The Shops Act, 1936, applies the provisions of the Shops Acts, 1912 to 1934, to premises and places where the business of lending books or periodicals is carried on for purposes of gain. Both these Acts came into operation on the 1st of January, 1937. The general effect of the Shops (Sunday Trading Restrictions) Act, 1936, is (1) to require the closing of shops on Sundays subject to a number of exemptions designed to meet the reasonable needs of the public, and (2) to provide for compensatory holidays during the week for persons employed on Sunday about the business of those shops which are permitted to open. The Act operated from the 1st May, 1937, but provided for exemption of certain transactions until the 1st February, 1938.

In consequence of the above mentioned Acts an amount of Sunday duty had to be done by the Shops Inspectors.

> C. E. ADCOCK, Cert. S.I.B., M.S.I.A., Senior Sanitary Inspector.

	37.	ECEMBER, 1	E WARDS,	PARATE	SE	IENCES OF THE SEPARATE	ENCES	N
IN & SANITARY	~2	POPULATIO	Z NUMBER OF HOUSES, ACREAGE,	HOUSES,	OF	NUMBER	THE	SUMMARY SHOWING

>

Number of Water- Closets.	8,765	1,606	866	1,381	1,327	1,484	2,101
Number of Slop- water Closets.	306	45	18	60	14	63	76
Number of Privy Middens.	12	61	•	1	ı	-	œ
Number of Ashpits. (Dry.)	159	29	15	39	16	27	33
Number of Pail- Closets. (Total.)	131	47	2	i	7	1	69
Approx. Number of Ashbins.	7,781	1,443	775	1,242	1,085	1,301	1,935
Number of Occupied Houses.	8,483	1,597	858	1,379	1,146	1,421	2,082
Population by Wards. ((Census 1931)	33,164	6,440	4,115	6,450	3,889	5,479	6,843
Area in Statute Acres (Land and Inland Water).	2,861	586	204	216	529	306	1,020
z		:	:	:	:	:	:
oroug on. ls.		:	:	:	:	:	:
Municipal Borough of ILKESTON. By Wards.	ILKESTON.	North Ward	Granby Ward	Market Ward	Victoria Ward	Old Park Ward	South Ward

			EXC Number of Hou	EXCREMENT DI of Houses, etc. with	EXCREMENT DISPOSAL 1937. f Houses, etc. with—	1937.	
		Privy- middens.	Pail- closets.	Water- closets.	Slop-water closets.	 Number of Houses converted from Privy-middens to Water- closets since 1st January, 1937. Privies improved. 	Number of Defective Privies improved.
IN WHOLE DISTRICT	DISTRICT	(a) 12	(b) 82	(c) 8,442	(<i>d</i>) 306	Nil.	.IIN
NOTE.—(a)	Total numb	Nore.—(a) Total number of Privy-Middens	iddens 12, shar	ed by 12 hc	ouses which car	12, shared by 12 houses which cannot reach the sewer and therefore are not convertible.	re are not convertible.
(a)	I otal numb School.	ber of Fail-clo	osets, 131; the	re are: 50	shared by 50	(b) lotal number of Pail-closets, 131; there are: 30 shared by 30 houses, 46 at Stanton Ironworks, 3 at Mirk Hauam School.	s, o at Mirk Hallam
(0)	Total numb	per of Water-c	(c) Total number of Water-closets, 8,765; shared by 8,442 houses, etc.	shared by 8,	442 houses, etc	ä	
(p)	Total Num	ber of Slop-wa	(d) Total Number of Slop-water Closets, 306, shared by 306 houses, etc.	6, shared by	· 306 houses, e	tc.	
Th	e term "Hou	uses. etc.". in	this table inclu	ides dwelling	places, church	The term "Houses, etc.", in this table includes dwelling places, churches, chapels, schools, factories and workshops.	id workshops.

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whom Diotestates	Domination of	Ι	If done by		Cost.	st.	Refuse Tips.	
or (in Rural Districts) Parishes in which Scavenging is carried out.	for which there is Public Scavenging.	Servants of Council.	Under Contract.	Occupiers of Houses.	Total Cost throughout District during year.	Cost per House per annum.	How Refuse is disposed of.	
WHOLE BOROUGH	33,164	No.	Yes.	No.	£3,731-1-6 7s. 74d.	7s. 7 <u>4</u> d.	Controlled Tipping	

SUMMARY OF PAIL CLOSETS EXISTING 31st DECEMBER, 1937.

REFUSE REMOVAL AND DISPOSAL.

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$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Year.	Ashbin Refuse.	Ashpit Refuse.	Privy Contents,	PAIL CONTENTS.	TOTALS.
Total - 19,019 27 285 $17,352\frac{1}{2}$ $1,949\frac{1}{4}$ 27 285 Total - 19,301\frac{3}{4} 1,949\frac{1}{4} 27 285 $18,047$ $2,036$ 13 23 250	35	17,045	1,974	181	299	19,336
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		Total	19,019			
Total 19,301 ² 18,047 2,036 13 250	36	17,3524	1,949	27	285	19,6133
18,047 2,036 13 250		Total	-19,301			
	37	18,047	2,036	13	250	20,346

Situation of Privies that are un- able to drain into Sewer.	Number of Privies.	Number of Conveniences.	Number of Houses.
No. 2, Church Street	1	1	1
Bentley's Farm, Cotmanhay	1	1	1
No. 52, King Street	1	2	1
No. 4, Larklands	1	2	1
"The Yews," Kirk Hallam	1	1	1
Allsopp's Cottage, Kirk Hallam	1	1	1
Spring Farm, Kirk Hallam	1	1	1
Vine Farm, Kirk Hallam	1	1	1
Bunker Hill Cottages, Kirk Hallam	4	4	4
Total number of Privies in existence	12	14	12

PRIVY ACCOMMODATION EXISTING 31st DECEMBER, 1937.

DISPOSAL OF PAIL AND PRIVY CONTENTS.

The Pail and Privy Refuse from the Whole Borough to Gallows Inn Tip.

DISPOSAL OF DRY REFUSE.

All tips are levelled and covered with soil. Average distance to tips approximately 1 mile.

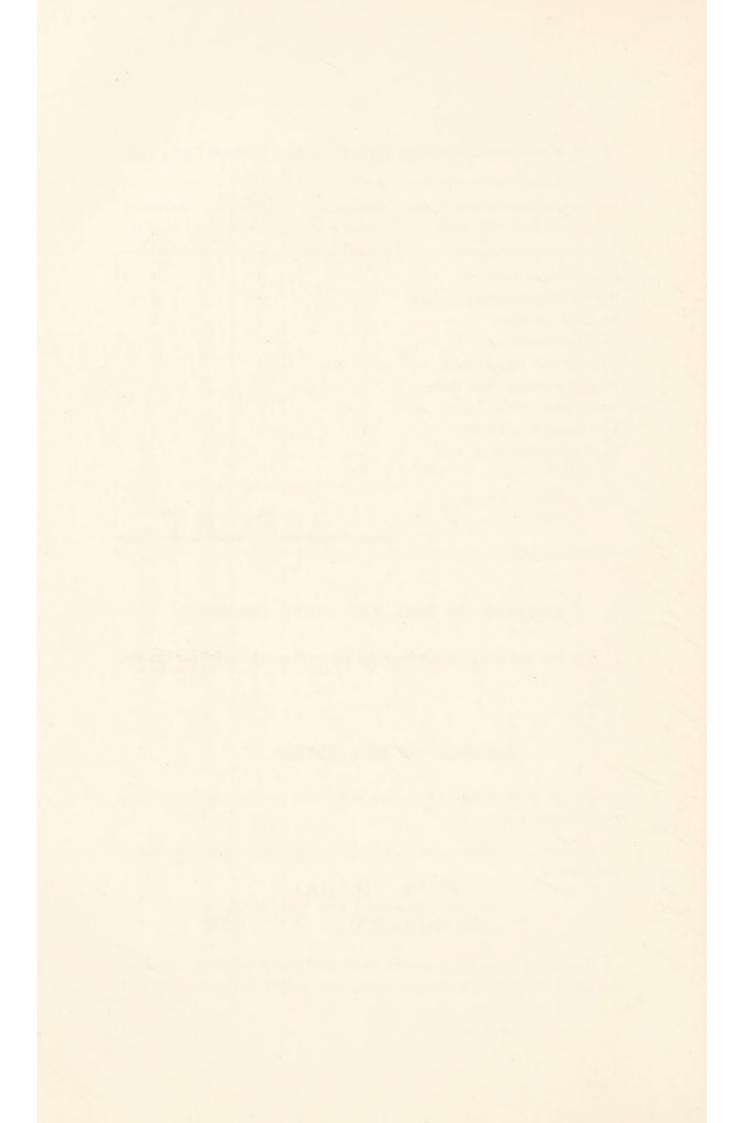
The Dry refuse from the whole Borough is tipped upon the three existing tips, viz. :—

GALLOWS INN.

PEWITT (commenced 30th April, 1937).

AWSWORTH ROAD.

The nearest tip to the Area from which the refuse is collected, is used for the tipping of refuse from that particular Area, so that all tips are now used for part of each week.



Borough of Ilkeston Education Committee.

ANNUAL REPORT

OF THE

School Medical Officer

For 1937.

H. L. BARKER,

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

EDUCATION COMMITTEE.

THE MAYOR (Coun. J. E. Kirk). Coun. G. W. WOOLLISCROFT, O.B.E. J.P. (Chairman). Alderman AMOS HENSHAW, J.P J. WOOLLEY, J.P. .. Councillor D. BARTON. E. A. ADAMS. ...

> Mrs. J. B. D. McINTYRE. ..

Councillor E. BOSTOCK. J. OFIELD. ,, J. HENSHAW. ,, Professor R. PEERS, M.C., M.A. F. P. SUDBURY, Esq., J.P., C.C. S. R. WOOD, Esq., M.A. MRS. BALL, C.C.

. . .

Director of Education.

W. A. SCARR, Esq., M.A.

STAFF (1937).

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.

School Dental Surgeon.

A. L. HODGKINSON, L.D.S.

Part Time Medical Officers.

ASSISTANT SCHOOL MEDICAL OFFICER	S. W. LUND, M.B., Ch.B., D.P.H.
Ophthalmic Surgeon	T. E. A. CARR, M.B., B.S. (County Ophthalmic Surgeon)
ORTHOPÆDIC SURGEON	G. A. Q. LENNANE, M.A., M.B., B.Ch. (County Orthopædic Surgeon).
	ns of the Nottingham Throat, Ear se Hospital.

School Nurses (also Health Visitors).

			Appointea.
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 A. R. MCWHINNEY, C.M.B.		 	 1st Nov., 1934.

Clerks.

MISS L. TRUEMA	Ν	 	 	 15TH May, 1923.
MISS H. CLARKE		 	 	 13th Oct., 1924.

Dental Attendant.

MISS S. M. CAMM	11th May, 1936.
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Borough of Ilkeston Education Committee.

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

FOR 1937.

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, 1937.

The form of the Report is similar to that of other years and follows closely the suggestions of the Board of Education.

I have to thank the members of the school medical department for their keen work and loyalty and the staff of the schools for their interest and assistance.

To the Chairman and Members of the Education Committee I offer my thanks for their help and encouragement in improving thewelfare of the school children.

I have the honour to remain,

Your obedient Servant,

H. L. BARKER,

School Medical Officer ...

BOROUGH OF ILKESTON.

Area of Borough (in acres)		 2,861
Population (Registrar-General's Estimate, 193	6)	 32,310
Number of Schools		 12
Number of Departments		 26
Average number on School Register		 4,826
Average Attendance		 4,343

I.-STAFF.

Particulars with regard to the staff are given on a previous page. One change occurred during the year. On the 4th December, Miss A. R. McWhinney resigned her post as school nurse on account of marriage, after having given four years' excellent service. At the end of the year the position had not been filled owing to the shortage throughout the country of nurses holding the Health Visitors' qualification.

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. Since the opening of nursery classes at three schools the co-ordination has become still closer.

(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 general position with regard to the schools within the Borough remains very much the same as last year. The proposal to erect a new infants' school to replace the former one at Kensington which was burnt down in 1935 has been approved, and land has been purchased for the purpose on the Field House estate. In the meantime the overcrowding at the Cavendish Senior and Kensington Junior schools, where the infants are being temporarily accommodated, is still going on. At Hallam Fields the close proximity of the school to the Stanton Ironworks causes a perpetual nuisance due to the noise and excessive dust from the furnaces. The subsidence of the foundations of Shipley school caused by coal mining, has become definitely worse. The cracks in the walls are more marked and there has been damage to the service pipes. The school building is, however, now strengthened by steel ties. The cracks in the playground walls have greatly increased in severity. In October there was a serious fresh subsidence under the Bennerley Boys and Girls schools which necessitated considerable work in repairing the playground, the walls and the floors of the school.

All the schools have drinking water derived from the town's piped supply, and all schools except Kirk Hallam have the water carriage system of sewage disposal. In some of the older schools the cloak room accommodation is somewhat deficient, and the hand washing arrangements in many schools are primitive. The desk accommodation is improving gradually. In those schools lit by gas the lighting can be quite satisfactory when properly attended to, but when neglected it becomes detrimental both physically and educationally.

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.

Nursery Classes.—The children in these classes are examined once every term.

V.-FINDINGS OF MEDICAL INSPECTIONS.

(a) Malnutrition.—At every routine inspection the condition of the children as regards nutrition is noted, and the results are shown in Table II.B. at the end of this report. A summary of the results is given below :—

Total number of children inspected	 1,780
Children whose nutrition was excellent	 251 or 14.1%
Children whose nutrition was normal	 1,475 or 82.86%

Children whose nutrition was slightly sub-

normal				 	53 or 2.97%
Children whose	nutrition	was	bad	 	1 or .01%

The results show an improvement when compared with those of the previous year.

(b) **Uncleanliness.**—A table showing the results of inspection for the last ten years is given. It should be mentioned that a new standard of inspection was adopted in 1935.

Year.	Average Number of Children on School Registers.	Number of Individual Children Found Unclean.	Percentage
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
1934	5,243	272	5.2
1935	5,121	870	16.9
1936	4,927	824	16.7
1937	4,826	732	15.1

UNCLEANLINESS.

(c) Minor Ailments and Skin Diseases.—A comparative table follows giving the results for the last ten years.

Year.	Impetigo.	Ringworm of Scalp.	Scabies.	
1928	55	10	21	
1929	47	8	5	
1930	46	2	2	
1931	32	2	3	
1932	44	1	9	
1933	27	1	15	
1934	28	9	6	
1935	33	13	3	
1936	44	1	21	
1937	44	_	14	

(d) Visual Defects and External Eye Diseases.—The number of cases of inflammatory diseases of the eye was 52 as against 52 in the previous year. At routine inspection 47 cases of squint were discovered as against 20 in the previous year. At routine and special inspection the number of children found to have visual defects was 162, of which 112 required treatment. The incidence of defective vision at routine inspection was 9 per cent. compared to 9 per cent. in the previous year.

(e) Nose and Throat Defects.—At routine examinations of the three age groups the number of children found to have chronic enlargement of the tonsils or adenoids or both was 303. The number of such cases found during special inspections was 78.

(f) Ear Disease and Defective Hearing.—There were 36 cases of discharging ears treated during the year. At routine and special inspections 13 cases of seriously defective hearing were found.

(g) **Dental Defects.**—Out of 3,013 children who were inspected by the dentist, 2,628 were found to need treatment, *i.e.*, 87 per cent. The figure for the previous year was 88 per cent.

(h) **Orthopaedic and Postural Defects.**—During routine and special inspections these defects were found in 78 children. Thirty-eight were the result of rickets.

(i) Heart Disease and Rheumatism.—The number of children in the schools known to be suffering from heart disease at the end of the year was 36.

(j) Tuberculosis.—The number of new cases among school children notified during the year was 5. One of these was a respiratory case.

(k) Other Defects and Diseases.—The number of these miscellaneous defects found at routine inspection was 21. The majority, namely 762, were discovered at special inspections chiefly at the clinics, and consists for the most part of epidemic and catarrhal conditions.

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 84 visits with regard to defects found at medical inspections, and 46 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 93.

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 12,385 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 clinics daily for the treatment of minor ailments, and assists the medical officers and school dentist during the special sessions.

The following table gives a summary of the work of the school nurses during 1937 :—

1937.
FOR
WORK
NURSES
OF SCHOOL
SUMMARY C

	Nurse Sherlock.	Nurse Blair.	Nurse Ottewell.	Nurse McWhinney.	TOTAL.
Visits re Infectious Diseases	10	86	101	161	358
Visits re other Diseases	14	239	252	401	906
Visits re Inspection for Cleanliness	1	18	14	10	43
Visits to Schools for Medical Inspections	:	44	40	38	122
Special Visits to Schools	:	33	48	22	103
Visits to Schools for Cleanliness	:	49	60	52	161
Number of Children Examined for Cleanliness	:	4,026	4,075	4,284	12.385
Number of Notices issued re Verminous Condition	:	94	254	124	472
Number of Notices issued re other Defects	:	50	67	23	140
Visits re Medical Inspection Defects	1	31	22	30	84
Attendances at Refraction Clinic	14	I			15
Visits re Refraction Cases	40	10	20	23	93
Attendances at Dental Clinic	50	4	1	1	55
Visits re Dental Defects	:	15	17	14	46
:	187	20	I	63	209
Attendances of Children at Minor Ailments Clinic	2,159	202	1	11	2,372
linic	:	3	1		11
Visits re Orthopædic Defects	1	16	10	7	34

The following is an analysis of 1,264 visits paid by School Nurses to the homes of scholars absent from school due to medical or alleged medical grounds :—

Infectious Diseases	 305	Conjunctivitis	2
Infectious Disease Contacts	 53	Boils	5
Influenza	 328	Burns and Scalds	14
Rashes, not defined	 7	Impetigo	10
Bronchitis	19	Injuries and Sprains	12
Coughs and Colds	230	Septic Sores	23
Tonsilitis	 133	Earache	1
Ringworm		Digestive Disturbances	12
Blepharitis	 2	Miscellaneous Conditions	31
Otorrhoea		Out or returned to School when	
Sickness and Diarrhoea	 3	visited	49
Rheumatism		Swollen Glands	12
Debility	 3	Adenitis	1

VII.—ARRANGEMENTS FOR TREATMENT.

(a) Malnutrition.—Children exhibiting signs of malnutrition are carefully examined with the object of discovering the underlying cause, and usually the parent is also interviewed. If medical treatment is considered necessary, advice about obtaining suitable treatment is given. When the dietary is thought to be at fault advice is given with the object of remedying it. In a few cases poverty is found to be the cause, and the children are then recommended to have free meals at the school canteen, and may be also advised to receive a free issue of milk in the school.

(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.—The School Ophthalmic Surgeon visits the school clinic at regular intervals to examine the cases of visual defect and to prescribe treatment. During the year spectacles were ordered for 103 children, and the number of children who had obtained spectacles at the end of the year was 103. This clinic is popular with the parents and is doing excellent service. There are also arrangements for treating cases ot squint at the Derbyshire Hospital for Sick Children under the same Ophthalmic Surgeon who attends the clinic. There are special eye hospitals in the vicinity where other diseases of the eye can be treated. This Authority has a scheme for assisting necessitous parents to obtain spectacles either free or at a reduced price. During the year 9 children received free spectacles and 2 obtained spectacles at a reduced price. (e) Nose and Throat Defects.—The arrangement with the Nottingham Throat, Ear and Nose Hospital for undertaking the operation for removal of tonsils and adenoids has continued satisfactorily. The number of cases undergoing the operation was 91. Other defects of the nose, throat and ear are also referred to this hospital when necessary.

(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.—Treatment is carried out at the dental department of the school clinic by the whole time school dentist. That this dental work is appreciated by the majority of the parents is shown by the remarkably large number of acceptances, namely, 95 per cent. During the year 2,442 children were inspected at routine inspections and 2,057 were found to require treatment, i.e., 84 per cent. Of these, 1,965 children accepted treatment. Such a high acceptance rate means that the volume of dental work required to be done is well above the average. It is worth recording that at Cavendish Boys' School the treatment acceptance was 100 per cent., and also that the scholars from Chaucer Boys' School all kept their appointments. It has been found advisable to take the very youngest children into the dental scheme. For the most part they have serious dental sepsis and require multiple extractions to enable them to start their school life with a healthy mouth. The more extended use of gas anaesthesia has enabled a large number of extractions to be done and the improvement in the condition of the mouths of the children is very obvious. Owing to the temporary illness of the dentist the total amount of work done is rather less than in the previous year, but taking his absence into account, the amount of work has been very satisfactory.

(*h*) **Orthopaedic and Postural Defects.**—The Orthopaedic Scheme has continued in the same way as before, with two clinics a week held by Miss Garrett, who supervises the remedial exercises. The County Orthopaedic Surgeon has visited once a month and has examined all the patients in turn. 67 individual children have attended the clinic and have been treated for the following conditions :—Tuberculosis 1, Rickets 5, Poliomyelitis 7, Spastic Paralysis 6, Kyphosis or Scoliosis 16, Congenital Deformity 8, other conditions 24. The number of attendances at the nurses' sessions was 766, and at the surgeon's sessions 154.

At Bretby Hall Orthopaedic Hospital 10 in-patients have been treated for the following conditions :—Poliomyelitis 2, Spastic paralysis 2, Kypho-scoliosis 2, Hammer-toe 1, Torticollis 1, Injury 1, Septic Arthritis 1.

(i) Heart Disease and Rheumatism.—Children suffering from these complaints are advised to obtain treatment from their own practitioners or from the general hospitals. Their progress is watched by repeated examination at the clinic. There is still a great need for the provision of hospital beds where children suffering from juvenile rheumatism may obtain the prolonged rest and attention which is required in order to prevent permanent damage to the heart.

(*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. Two children received hospital treatment during the year.

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

REPORT OF THE SCHOOL DENTAL SURGEON. MR. A. L. HODGKINSON :---

Owing to my unavoidable and prolonged absence from the clinic there has been serious dislocation of work. Fortunately the services of a dentist were obtained for part-time, and this enabled special and urgent cases to be treated. Consequently there is a decrease in the number of children inspected and treated, with one exception. The one form of treatment showing a considerable increase on last year is the number of teeth extracted. This increase is due almost entirely to the inclusion in the dental scheme of infants and those children attending nursery classes. The only drawback is that by taking into the dental scheme these extra age groups, it will not be possible to inspect and treat all the children on the school registers in a full year, a condition which is, of course, highly desirable. Unhappily the condition of the teeth of the younger children who have recently come into the scheme is appalling ; gross caries with widespread destruction and multiple sinuses is common. This results in far too many teeth having to be extracted to eliminate sepsis, as dental conditions are so deplorable that extraction is the only remedy.

For the first time nearly all the extractions have been completed with the aid of a general anaesthetic, and in fact, such large numbers would not be possible without it.

The acceptance rate is still very satisfactory, *i.e.*, 95 per cent. of the number who were offered treatment during the year. At the end of the year there were known to be 390 children whose parents definitely refused treatment. This, however, is 97 less than last year, but even if these cases still needed treatment, the actual acceptance rate of those children who had been recommended treatment would be 80 per cent. The excuses given to the nurses on their follow-up visits for failure to take advantage of the dental scheme are most unconvincing. Without doubt these children would be much improved if their parents had a better sense of the duties and responsibilities incumbent upon them. During the year 2,442 children were inspected, 2,057 were found to require treatment, and 1,965 accepted treatment. There were also 571 treated as specials. Included in this latter number are children below school age, and those who for some reason were not attending school when inspection took place, also children who were to undergo operation for removal of tonsils and adenoids, eve defects and other cases requiring urgent treatment. Altogether, 2,530 children were treated, and for this purpose 3,250 attendances were made. Extractions numbered 466 permanent teeth and 5,827 temporary teeth. This is a total increase of 2,435 on last year. 6,072 were completed with the aid of a general anaesthetic, which was given on 1,328 occasions, and for the remainder (221) a local anaesthetic was used.

During the year a lecturer from the Dental Board visited the senior schools in the Borough and gave talks on dental hygiene.

It would be interesting to know the value of the contribution made by the dental service to the education of children, because it is clear that if the mouth is not clean and the teeth in good order, a child cannot make full use of the educational opportunities which are afforded it.

The reorganisation of schools under the Hadow Scheme has created difficulties for the school dental service. When children were under the care of one head teacher from the age of 7 years until leaving school, it was very much easier for the teachers to develop dental consciousness in them, follow up their dental history, and also become familiar with the mental and physical development of the child. Also there is nothing more important in gaining acceptances than the hearty co-operation of the teachers. They are in touch with the children daily and can use their powers of persuasion to help them use the clinic intelligently.

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.

On the occurrence of a case of infectious disease in a school an examination is made of the class mates with the object of discovering a possible carrier of infection, and for this purpose swabs are taken if necessary. Importance is attached to the proper spacing of children within the class and the need of flushing the classroom periodically with fresh air.

The number of notifiable infectious diseases among school children which were notified during the year was as follows :—

Pulmonary Tuberculosis 1, other forms of Tuberculosis 4 (the site affected being meninges 2, cervical glands 2), Diphtheria 12, Scarlet Fever 37, Chicken Pox 69, Pneumonia 10, Dysentery 1, and Poliomyelitis 4.

The incidence of scarlet fever was low and that for diphtheria about the average.

IX.-OPEN-AIR EDUCATION.

There is no open-air school within the Area, and no school possesses specific open-air classrooms. Playground classes are held during favourable conditions, and drill and games take place in the open air.

During August 58 children attended a camp for one week at Sutton-on-Sea, the party consisting of 21 girls and 37 boys. This camp was held under the auspices of the Derbyshire Schools Camping Association. The Ilkeston Rotary Club paid for the expenses of 10 of the children. Periodical school journeys to various places of interest were made during the year.

X.-PHYSICAL TRAINING.

Physical Exercises.—There is no Area Organiser. The physical exercises in the schools form part of the regular curriculum and are taught by teachers who have received special training. The schools are faily well provided with apparatus, and the exercises are suited to the capacity of the scholars. The work is handicapped by the fact that no gymnasium is available for the use of the elementary school children.

Organised Games.—In the Winter the boys play football and in Summer cricket. The girls play hockey in Winter and tennis in the Summer. Netball and other games are played in the playground when the conditions are suitable. Playing fields are available for all junior and senior schools, but are situated at a long distance from a few of the schools. Athletic Sports are held in the Summer. A spirit of rivalry is fostered by holding inter-school league matches.

Swimming.—Organised swimming classes form a part of the curriculum, and every endeavour is made to encourage the children to learn to swim. Learner's certificates were granted to 134 pupils during the year. The test for this certificate is to be able to swim 20 yards with the breast stroke. Fifty-two 1st Class certificates were given to those children who were able to swim 50 yards with the breast stroke and 25 yards on the back. While 57 2nd Class certificates were given to children who proved their ability to swim 40 yards with the breast stroke and 20 yards on the back. The numbers of scholars gaining proficiency in swimming show a marked increase compared with the previous year.

XI.-PROVISION OF MEALS.

School Canteen.—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 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 44, and the number of individual children for whom meals were provided was 76. The average cost per meal was $4\frac{3}{4}$ d. when all expenses, including the cost of conveyance, were taken into account, though the average cost per meal, for food only, was $2\frac{1}{4}$ d. The tram fares of children who attend from a distance are paid by the Authority.

The supply of food is satisfactory, and the School Medical Officer has paid frequent visits and made suggestions with regard to the fare provided. The children who regularly attend the Canteen derive much benefit.

Provision of Milk.—The Milk-in-Schools Scheme organised by the National Milk Publicity Council has been in operation during the whole year. The milk is pasteurised, and is issued in bottles containing one-third of a pint at a charge of one-halfpenny. The arrangements for the issue are made by the individual schools with the vendors. The milk when tested has been found to be satisfactory. Free issues are also made on the recommendation of the School Medical Officer if the income of the parents comes within an agreed scale. The number of individual children to whom free issues of milk were granted during the year was 71, but the average number of free issues on any given day was 52. Including these free issues the total number of bottles of milk consumed by children under the scheme during the year was 412,492.

Average number	er of ch	nildren	per day	/ takin	g mill	k on	
payment							1,921
Average number	er of ch	ildren	per day	taking	milk	free	52
							1,973

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

(a) **Parents.**—The parents of children are always notified when their children are about to undergo a routine examination, and they are invited to be present. This opportunity to be present at medical inspections is apparently appreciated by the parents, whose attendance is very satisfactory when the two youngest groups are being examined. The attendance of parents at the routine inspections of the three different categories of children held during the year was as follows :- Entrants, 85 per cent. ; Intermediates, 77 per cent. ; and Leavers, 36 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 cooperation 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.**—As usual the fullest co-operation has been obtained from the teachers during the year, and they have always been ready to assist the work of the medical department. Most of the teachers appear to be just as interested in the health of the pupils as in their scholastic progress. The head-teachers have granted the use of their private rooms for the purpose of medical examinations, and have personally supervised the arrangements for the various inspections.

When instructions have been given with regard to any special children the teachers have seen that they were complied with.

(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. 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.

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 8 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 was one totally deaf child belonging to this Area being educated at the Deaf and Dumb School in Nottingham.

Two epileptic children were admitted to the Maghull Home for Epileptics at Liverpool. There were 31 cases of organic heart disease at the end of the year, and of these 1 was excluded from school owing to the severity of the condition. The remaining 30 were attending school, some of them under various restrictions as regards their times of attendance and participation in games.

The number of children suffering from serious crippling defects was 36 at the end of the year, and of these 2 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 several schools.

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 there are three Nursery Classes. Each class is attached to an Infants' School. The Nursery Class at Bennerley Infants' School was opened in October, 1935, while the classes at Chaucer Infants' and Gladstone Infants' Schools were opened in February, 1937. These classes are helping to fulfil a need which has been felt for many years, and the demand for places is in excess of the accommodation.

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 1937 the Committee sanctioned 9 spectacles to be provided free and 2 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.

The fundamental principles underlying good health are taught indirectly in every school to a more or less degree. Moreover, these principles are put into practice in some schools in such a way as to have a very beneficial effect on the basic health of the scholars. During October a Health Week was held with the object of still further emphasising the value of good health and the methods of acquiring and maintaining it. The programme was somewhat different to other years, in that the co-operation of the National Milk Publicity Council was obtained. The district organiser of that body, Mr. J. H. Hudson B.Sc., arranged an interesting exhibition in the South Street School and showed a series of instructive health films. During three days parties of school children visited the film displays in the mornings, and during the evening session either a selected group of boys gave a display of physical training or a group of girls gave a dancing display. In conjunction with the showing of health films, six lectures illustrated by lantern slides were given by the School Medical Officer in the Town Hall, and the programme was organised in such a way that each party of children visited both halls, the total number of scholars being 1,780. During the week the pupils of the various infant schools gave performances in their schools of short health plays. Posters and literature upon health subjects were distributed to the schools. Prizes were offered for essays relating to the Milk films and various County competitions were arranged for essays on health subjects, for poster designs and for a family dietary budget.

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 very similar to the previous year. Among the 1,552 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	 	 18 p	er cent.
Intermediates	 	 21	,,
Leavers	 	 36	,,

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

Entrants	 	 85 p	er cent.	
Intermediates	 	 77	,,	
Leavers	 	 36	,,	

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

Tuberculous	Meningi	itis	2	Nephritis		 1
Drowning			2	Mastoid Disea	se	 1
Influenza			1			

XX.-MISCELLANEOUS.

1. **Issue of Boots.**—During 1937 the Joint Advisory Committee "Boot Fund" issued 17 pairs of boots to the children of parents in necessitous circumstances.

2. Children and Young Persons Act, 1933.—A number of children were examined by the School Medical Officer under the provisions of the Above Act, and 61 were given certificates enabling them to engage in the work of distributing newspapers outside school hours. Two young persons and 2 children who had contravened the law were mentally examined, and sent to approved schools by the magistrates.

XXIV.—STATISTICAL TABLES.

MEDICAL INSPECTION RETURNS.

Table 1.-Return of Medical Inspections.

A.-ROUTINE MEDICAL INSPECTIONS.

No. of Inspections in the prescribed Groups

Entrants						541
Second Age Group						472
Third Age Group	••					539
*				TOTA	L	1,552
No. of other Routin	e Ins	pections				228
		GR	AND	TOTAL		1,780

B.—OTHER INSPECTIONS.

Number of Special Inspe	ctions	 	 1,309
No. of Re-Inspections		 	 1,289
		TOTAL	 2,598

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number	of	Individual	Children	found	at	Routine	Medical
Inspe	ction	to require	Treatment	(excludi	ng l	Defects of N	utrition,
Uncle	anlir	ness and D	ental Disea	ses).			

Group. (1)	For Defective Vision (excluding squint). (2)	For all other conditions recorded in Table IIA. (3)	Total. (4)
Prescribed Groups :			
Entrants	 -	46	46
Second Age Group	 36	39	74
Third Age Group	 59	34	88
Total (Prescribed Groups)	 95	119	208
Other Routine Inspections	 	22	22
GRAND TOTAL	 95	141	230

TABLE II.

A.—Return of defects found by Medical Inspection in the Year ended 31st December, 1937.

	Routine	Inspections	Special	Inspections.	
	No. of	f Defects.	No. of Defects.		
DEFECT OR DISEASE. (1)	Re- quiring Treat- ment. (2)	Requiring to be kept under ob- servation but not requiring Treatment. (3)	Re- quiring Treat- ment. (4)	Requiring to be kept under ob- servation but not requiring Treatment (5)	
Ringworm : Scalp Body Skin Scabies Impetigo Other Diseases			$\frac{2}{13}$		

		Routine	Inspections	Special I	nspections.
		No. of	Defects.	No. of	Defects.
D	EFECT OR DISEASE.	Re- quiring Treat- ment.	Requiring to be kept under ob- servation but not requiring Treatment.	Re- quiring Treat- ment.	Requiring to be kept under ob- servation but not requiring Treatment.
	(1)	(2)	(3)	(4)	(5)
ſ	Blepharitis Conjunctivitis	6 2	3	15 26	-
1	Keratitis	_		1	
1	Corneal Opacities	2	1	2	-
- 1	Other Conditions (excluding	1	0		0
Eye {	DefectiveVision & Squint)	1	2	4	2
	TOTAL (Heads 6 to 10)	11	6	48	2
	Defective Vision (excluding Squint). Squint	95 45	47 2 4	17 3 9	3 1
Ear	Defective Hearing Otitis Media	4	2	32	
Lai	Other Ear Diseases	_	_	7	2
	Chronic Tonsilitis only	6	210	44	13
Nose		-	6	-	1
and Throa Enlar	1	24 1	57	15 51	5 27
	uberculous)		10	3	13
Defect	tive Speech (Heart Disease :	-	8	-	2
Hear		-	9	5	5 2
Circul			14	1	2
	Bronchitis	8	12 28	23 76	11
Lungs		7	20	10	**
	Diseases Pulmonary :	-	7	7	4
	Definite			-	
Tuber	Suspected	-	3		/
culosi		1	_	2	1
	Bones & Joints	-	-	-	-
	Skin	-			
	U Other forms				
	TOTAL (Heads 29 to 32)	1		2	1
	Epilepsy	2		83	1
Syste	m { Chorea	-	-	5	1
	Rickets	-	37	1	-
Defor	mities { Spinal Curvature	1	2		-
041	Other Forms	15	9	11	2
	Defects and Diseases (Ex- ing Defects of Nutrition, Un-				
	lliness and Dental Diseases)	2	19	281	481
T	TAL NUMBER OF DEFECTS	238	496	718	591

TABLE II.-continued.

TABLE II.

B. —Classification	of the	Nutrition of	Children	Inspected du	ring
the	Year in	n the Routine	Age Gro	ups.	

Age-groups. Number of Children			A. B. cellent) (Normal)		C. (Slightly subnormal)		D. (Bad)		
	Inspected	No.	%	No.	%	No.	%	No.	%
Entrants	541	63	11.64	463	85.58	15	2.77	-	-
Second Age- Group	472	49	10.38	413	87.5	10	2.11	-	_
Third Age- Group	539	122	22.63	391	72.54	25	4.63	1	.18
Other Routine Inspections	228	17	7.45	208	91.22	3	1.31	_	_
Total	1,780	251	14.1	1,475	82.86	53	2.97	1	.01

TABLE III.

Numerical Returns of all Exceptional Children in the Area. 1937.

			Boys.	Girls.	Total
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	=	_	_
			То	tal	-
Partially Sighted	Suitable for training in a School for the partially sighted.	At Certified Schools for the Blind	_	-	_
	Signeed.	Partially Sighted At Public Elementary	-	-	-
		Schools	5	1	6
		At other Institutions		—	—
		At no School or Institution	-	-	-
			То	tal	6

TABLE III .- continued.

Boys. Girls. Total

					110
Deaf	Suitable for training in a School for the totally deaf.	At Certified Schools for the Deaf		1	1
		At no School or Institution	_	_	
			To	otal	1
Partially Deaf	Suitable for training in a School for the partially Deaf.	At Certified Schools for the Deaf	_		_
		Partially Deaf			
		At Public Elementary Schools	_	1	1
		At other Institutions	-	_	_
		At no School or Institution	-		
			Т	otal	1
Mentally Defective.	Feeble-minded	At Certified Schools for Mentally Defective Chil- dren	_	_	_
		At Public Elementary	-	-	
		Schools At other Institutions	7	7	14
		At no School or Institution	1	_	1
			To	otal	15
Epileptics	Suffering from severe	At Certified Special Schools At Public Elementary Schools At other Institutions	_	-	_
	epilepsy.			1	1
			—	-	-
		At no School or Institution		1	1
			То	otal	2
	. Tuberculous Children 1) Children suffering from	At Certified Special Schools At Public Elementary		-	-
Dencente. (Pulmonary Tuberculosis	Schools	2	3	5
	(including pleura and	At other Institutions	1		
	intra-thoracic glands).	At no School or Institution	1	_	
	· · · · · · · · · · · · · · · · · · ·		To	otal	6
. (2) Children suffering from	At Certified Special Schools At Public Elementary	-	-	-
	non-pulmonary Tuber- culosis (of all sites other	Schools	3	3	6
	than those shown in (1) above).	At other Institutions At no School or Institution	_	2	$\overline{2}$
					8

TABLE I	I.—continued
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				Boys.	Girls.	Total		
Physically Defective	В.	Delicate Children, <i>i.e.</i> , All Children (except	At Certified Special Schools At Public Elementary	_	_	-		
(continued).		those included in other groups) whose general	Schools	5	5	10		
			At other Institutions At no School or Institution	1	1	2		
		Open Air School.		Т	otal	12		
	C.	Crippled Children (other	At Certified Special Schools	1	-	1		
		than those diagnosed as tuberculous and in	At Public Elementary Schools	19	14	33		
				need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's	At other Institutions At no School or Institution	=	2	2
		normal mode of life.		To	36			
	D.	Children with Heart Dis- ease.	At Certified Special Schools At Public Elementary	-	-	-		
		case.	Schools	17	12	29		
			At other Institutions At no School or Institution	1		1		
				To	otal	31		
		Children suffering from multiple defects (<i>i.e.</i> ,	At Certified Special Schools At Public Elementary	-	_			
		any combination of the	Schools	1	-	1		
		following types of defect) :	At other Institutions At no School or Institution	_				
		Blindness (excluding part-	The no benear of institution					
		ially sighted children). Deafness (excluding part- ially deaf children). Mental Defect (Feeble- Minded). Severe Epilepsy. Active Tuberculosis. Crippling (as defined in Section C above). Heart Disease.						
					Tot	al 1		

TABLE IV.

Return of Defects Treated during the Year ended 31st December, 1937.

Treatment Table.

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

	Number of Defects treated under treatment during the				
DISEASE OR DEFECT.	Under the Authority's Scheme.	Otherwise.	Total.		
(1)	(2)	(3)	(4)		
Skin : Ringworm—Scalp— (i.) X-Ray Treatment. If none, indicate by dash. (ii.) Other Treatment.	_	=	=		
Ringworm—Body	3	-	3		
Scabies	14	-	14		
Impetigo	84	-	84		
Other Skin Disease	14	-	14		
Minor Eye Defects : (External and other, but excluding cases falling in Group II.)	78	_	78		
Minor Ear Defects	81	-	81		
Miscellaneous (e.g. minor injuries, bruises sores, chilblains, etc.)	0.10	_	242		
TOTAL	516	-	516		

TABLE IV.

	No. of D	efects dealt	with.	No. of children for whom spectacles were					
Defect or Disease.	The day of the				Prescribed (1)		ined 2)		
	Under the Authority's Scheme (2)	Otherwise.	Total. (4)	(i) Under the Author- ity's Scheme.	(ii) Other- wise.	(i) Under the Author- ity's Scheme.	(ii) Other- wise.		
Errors of Refraction (including squint). (Operations for squint should be recorded separ- ately in the body of the School Medical Officer's Report.)	205	6	211	103	6	103	6		
Other Defect or Disease of the Eyes (excluding those recorded in Group I).	4	1	5	Тотл	109	Тотл	109		
Total	209	7	216						

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

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

]	NUME	ER C	of Di	EFECT	rs.		
			REC	EIVE	D OF	PERAT	IVE '	FREA	TMEN	T.			
	Auth Sche Clin Hos	er the ority' me, in ic or pital. 1)	s n	P	racti or Ho apart e Aut Sch	rivat tione spita from thorit eme. 2)	r l, n v's	Total (3)		Received other forms of Treatment. (4)	Total Number Treated. (5)		
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(i v)		
52	-	39	-	-	-	1	-	52	-	40	-	-	92

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

TABLE IV.-continued.

	Under th	e Authority's (1)	Scheme.				
	Residential treatment with education (1)	Residential treatment without education (ii)	Non- residential treatment at an orthopædic clinic (iii)	Residential treatment with education (i)	Residential treatment without education (ii)	Non- residential treatment at an orthopædic clinic (iii)	Total number treated
Number of children treated ·	. 11	_	67	_		-	69

Group IV .- Orthopædic and Postural Defects.

TABLE V.-Dental Inspection and Treatment.

	(a) Routine Age Gr							
4 33	5 6 7 8 9	10	11			$\begin{array}{c}14\\267\end{array}$	Total	2,44
	(b) Specials	• , • •		• •	• •	•••	•••	57
	(c) TOTAL (Routine :	and Spe	cials)					3,01
(2)	Number found to require ta	eatmen	it					2,62
(3)	Number actually treated .							2,53
(4)	Attendances made by child	en for t	treatn	nent				3,25
(5)	Half-days devoted to :							
	Inspection Treatment	: :	:		$\binom{28}{291}$	Fotal	319	
(6)	Fillings :							
	Permanent teeth .	: :			762].	Fatal	010	
	Temporary teeth .				157 5	rotai	919	
(7)	Extractions :							
	Permanent teeth . Temporary teeth .			•••	466].	Total	6 293	
							0,200	
(8)	Administrations of general	anæsthe	etics for	or ex	tractio	ns		1,328
(9)	Other operations :	temp. f	illings		$^{209}_{747}$ T	otal	956	

TABLE VI.-Uncleanliness and Verminous Conditions.

(1)	Average number of visits per school made during the year by the School Nurses	7.3
(2)	Total number of examinations of children in the Schools by School Nurses	
(3)	Number of individual children found unclean	732
(4)	Number of <i>individual</i> children cleansed under arrangements made by the Local Education Authority	
(5)	Number of cases in which legal proceedings were taken : (a) Under the Education Act, 1921 (b) Under School Attendance Byelaws	

