

**[Report 1925] / Medical Officer of Health, Mansfield Borough.**

**Contributors**

Mansfield (England). Borough Council.

**Publication/Creation**

1925

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BOROUGH OF MANSFIELD.



# ANNUAL REPORT

ON THE

Sanitary Conditions of the District

AND

# HOUSING REPORT

For the Year ended 31st December, 1925.

*By*

**JAMES E. WILSON, M.D., B.Ch., D.P.H.,**

*Medical Officer of Health.*

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W. & J. Linney, Ltd., West Gate, Mansfield.





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## HEALTH COMMITTEE.

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*Chairman :*

ALDERMAN D. H. MALTBY, J.P.

HIS WORSHIP THE MAYOR.

*Aldermen :*

J. MARRIOTT, J.P.

W. SINGLETON, J.P.

*Councillors :*

H. BOSWORTH,

E. W. MELLORS,

H. DANIEL,

J. POLLARD,

A. HARDY,

J. E. ROBINSON,

J. H. MANN,

J. L. WILSON.

## PUBLIC HEALTH STAFF.


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STAFF.—The Members of the Public Health Staff are :—

<i>Medical Officer of Health</i>	J. E. WILSON, M.D., D.P.H.
<i>Assistant Medical Officer of Health</i> ... ..	MISS JESSIE SMITH, M.B., D.P.H. (Commenced Duty 1st Sept., 1925.)
<i>Senior Sanitary Inspector</i> ...	BERNARD ALLMAN, Cert. R.S.I., Cert. in Meat Inspection.
<i>Assistant Inspector</i> ... ..	HERBERT ALLSOPP, Cert. R.S.I.
<i>Assistant Inspector</i> ... ..	WM. T. T. GLASSBROOK, Cert. R.S.I.
<i>Senior Health Visitor</i> ... ..	MISS H. A. HUNT, 3 years' general training, C.M.B. Cert.
<i>Health Visitor</i> ... ..	MISS P. GOODWIN, 3 years' general training, C.M.B. Cert.
<i>Health Visitor</i> ... ..	MISS F. HARRISON, 3 years' general training, C.M.B. Cert. (Took up duty 22nd June, 1925.)
<i>Clerk</i> ... ..	E. V. HARDWICK, also acts as Bacteriological Laboratory Assistant.
<i>Clerk</i> ... ..	MISS D. ROBERTS, half time to Maternity and Child Welfare and half to School Medical work.
<i>Disinfecter</i> ... ..	GEORGE BURTON.





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PUBLIC HEALTH DEPARTMENT,  
EXCHANGE ROW,  
MANSFIELD,

MAY, 1926.

*To the Mayor, Aldermen and Councillors of the  
Borough of Mansfield.*

GENTLEMEN,

I beg to submit herewith my Report for the Year 1925. As laid down by the Ministry of Health Circular 648, this is what is known as a "Survey" Report, that is to say, it will deal more comprehensively with the sanitary progress of the last five years, and will indicate developments that are likely to arise within the immediate future.

The year under review opened with a considerable number of cases of small-pox under treatment, and 142 cases of this disease were removed to hospital during the year. They occurred most frequently in the earlier months of the year.

An effort has been made to deal with the convertible privy-middens and pail closets of the Borough, and the offer held out to owners of pail closets has resulted in a large number of conversions to water-closets.

The Mansfield Corporation Act, 1925, has brought into effect several very desirable sanitary provisions.



Apart from small-pox there has been no other outstanding incidence of disease during the year, and it will, I think, be seen from the vital statistics, shewn elsewhere, that the health of the Borough compares very favourably with that of the country as a whole.

The general growth of the Public Health and School work compelled me to apply for assistance in my Department. Miss Jessie Smith, M.B., D.P.H., was appointed by you and commenced her duties on 1st September.

To her and to every other member of my staff I feel indebted for loyal assistance during the year when much has been accomplished in sanitary progress, and a year during which arduous work has been required. The presence of small-pox alone makes a heavy demand, the stress of which filters throughout the whole of the staff of a Public Health Department.

I must again acknowledge the sympathetic interest taken by you in my work, as well as the courtesy and consideration shewn to me on all occasions.

I am, Gentlemen,

Your obedient Servant,

**JAMES E. WILSON,**

## NATURAL AND SOCIAL CONDITIONS OF THE BOROUGH.

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Area (in acres), 7,068.

**Population.**—The Registrar-General's estimated mid-year population for 1925 is 47,000.

The following table will give an estimated figure for each of the wards:—

North Ward (including Pleasley Hill) ...	17,555
South Ward ... ..	14,766
East Ward ... ..	14,679
	<hr/>
Total...	47,000
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## PHYSICAL FEATURES & GENERAL CHARACTER OF THE BOROUGH.

---

The Borough of Mansfield lies on the western border of Nottinghamshire, being divided from Derbyshire by the river Meden.

Geographically it occupies a position in latitude  $53^{\circ} 7'$  to  $53^{\circ} 10'$  north of the equator and longitude  $1^{\circ} 7'$  to  $1^{\circ} 15'$  west of the meridian of Greenwich.



The surface is undulating and varies in elevation from 270—588 feet above sea level. The Market Place is in the centre of the town and is at an elevation of 335 feet above sea level. From it diverge in an upward direction the five main roads leading out of the town. The highest point in the Borough is Fish Pond Hill (588 feet).

Geologically it is situated near the junction of the Magnesian Limestone with the New Red Sandstone. This Magnesian Limestone supplies an excellent building stone. From the Red Sandstone is derived a moulding sand which enjoys world-wide reputation for making castings.

Formerly, Mansfield stood in the heart of the Ancient Forest of Sherwood. Beneath it are coal measures which have added considerably to the growth and prosperity of the town, and which are now being tapped at more distant points, thus creating a ring of new mining villages which will in the future also continue to add to this growth and prosperity.

### **Number of Inhabited Houses.**

These, according to 1921 figures, amounted to 9,095.

The number of families or separate occupiers in 1921 was 9,483.

### **Rateable Value.**

Rateable Value of the Borough at 31st December, 1925, £170,316.

Value of a Penny Rate, £644.

The rateable value is under reconsideration, and a new assessment for the whole Borough will be completed next year.

## SOCIAL CONDITIONS AND INDUSTRIES OF THE BOROUGH.

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Coal mining engages the attention of the larger number of the inhabitants. As noted above, Mansfield is adjacent to the great Nottinghamshire Coalfield. Sherwood Colliery is just outside the Borough, and in the immediate vicinity are Clipstone, Welbeck, Rufford and Crown Farm Pits. New sinkings are going on at Blidworth, Ollerton, Edwinstowe, Bilsthorpe and Firbeck.

These coal mines are well equipped and are comparatively safe to work in.

This occupation brings in its train a certain number of deaths from accidental causes, but these are comparatively low in this area. Chest conditions are, perhaps, especially in advancing years, more common amongst miners, and as well I have noted that anæmia is prevalent amongst this class of workers. Probably this is largely due to absence of sunlight.

Although there is a great deal of prejudice on the part of the miner himself against Pit Head Baths, I consider that their provision by colliery owners would be a great boon to those engaged in this industry. I think that the conditions under which coal is hewed from the coal face, the combination of coal dust, heat, and sweat, are conditions which call for the



cleansing of the skin surfaces as soon as possible after cessation of work. To make it easier for the men to return clean to their homes would go far to promote cleanliness in the miner's home, and in his going to and fro would allow him a more contented outlook on his mode of earning a living.

### **Other Industries.**

There are several other industries in the town which provide employment to male and female workers. The chief of these are :—Boot and Shoe Factories, Cotton Doubling, Hosiery Manufacture, Engineering, and Decorated Tin-Box Making.

None of these occupations can, I think, be regarded as adding in any special degree to the mortality-rates.

A good many of the local collieries and several of the larger employers of labour have developed highly organised Welfare Schemes. All efforts in this direction will go far to raise the standard of social conditions for the workers.

While trade depression has been a feature of the last year or two and the end of the " slump " is not yet in sight, there has been comparatively little unemployment.

Improved housing conditions only are required to attract a great increase of population to the town.

## VITAL STATISTICS.

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**Births.**—During the year 936 net births were registered giving a birth-rate of 19·9 per 1,000 per annum.

The following scheme shews how this number is made up :—

			Males.	Females.	Total.
Legitimate	...	...	446	458	904
Illegitimate	...	...	20	12	32
			466	470	936
			466	470	936

The Illegitimate Birth-rate per 1,000 population is 0·68.

The Birth-Rates for the last five years are :—

Year.			Total Births.		Birth-rate.
1921	...	...	1,163	...	25·7
1922	...	...	991	...	21·6
1923	...	...	1,012	...	21·9
1924	...	...	962	...	20·5
1925	...	...	936	...	19·9

The "natural increase" or excess of births over deaths during the year was 503.

There is a great deal of unnecessary alarm vented from time to time in consequence of the fall of the birth-rate. When one realises that in the last 20-25 years infantile mortality-rates have been halved and the expectation of life has been largely increased one can realise that there is no fear of de-population as long as there are twice as many children born into the world as persons dying. The mathematical conclusion that one must come to is, on the other hand, that we are gradually getting more and more densely populated, and such a condition must



be an important factor in the production of that overcrowding of the labour market which produces unemployment, severe competition and social unrest.

### Deaths and Death-Rate.

Net deaths belonging to the Borough	...	433
Death-rate	... ..	9·2

Fluctuations during the last five years will be seen from this Table :—

Year.	Total Deaths. Mansfield.	Death-rate. Mansfield.	Death-rate for England & Wales.	Below.
1921... ..	490	10·8	12·1	1·3
1922... ..	416	9·0	12·9	3·9
1923... ..	492	10·6	11·6	1·0
1924... ..	461	9·8	12·2	2·4
1925... ..	433	9·2	12·2	3·0

It will be noted that this death-rate has each year kept well below the general death-rate for England and Wales.

The principal causes of death were as follows :—

Cause.	Number.	Mortality-rate (per 1,000 pop.)
Organic Heart Diseases	56	1·19
Pneumonia (all forms)	54	1·15
Bronchitis	40	·85
Cancer and Malignant Disease	40	·85
Congenital Debility, &c.	28	·59
Tuberculosis (all forms)	20	·42
Influenza	14	·29
Violence	14	·29

Complete tabulation of the causes of death will be found on Table III.

### **Infantile Mortality-Rate.**

This is defined as being the number of deaths of children under one year per 1,000 registered births.

The Illegitimate Infantile Mortality-rate is almost always higher than the Legitimate. These rates are shewn below :—

Legitimate Infantile Mortality-rate 76·3 per 1,000 Legitimate births.

Illegitimate Infantile Mortality-rate 93·7 per 1,000 illegitimate births.

General Infantile Death-rate (legitimate and illegitimate) 76·9.

Complete tabulation of the causes of Infantile Mortality will be found in Table IV.

How our local rate compares with that of England and Wales as a whole and other towns will be seen in Table V.

Further reference to this subject will be found in the section dealing with Maternity and Child Welfare.

### **Amount of Poor Law Relief.**

In year 1925 this amounted to £11,019.

### **Extent to which Hospital and other forms of gratuitous Medical Relief are utilised.**

The Mansfield and District Hospital, serving as it does a large outside area as well as the Borough, is constantly full and further extensions are contemplated.

The female side of the Poor Law Infirmary is constantly in occupation. The male side has occasional vacant beds in summer time only.



### **Localised Causes of Illness.**

The most noteworthy cause of sickness during the year has been the occurrence of 142 cases of small-pox.

No other infectious disorder attained epidemic severity, although at the close of the year a good number of cases of measles and whooping-cough were notified by the reports of school teachers.

I have endeavoured, since my appointment in 1922, to note any general conditions reacting unfavourably as regards the inhabitants of the Borough. Probably the two most important general considerations are :—

1. General conditions of overcrowding due to non-provision of a sufficiency of additional houses at moderate rentals. These two factors react on one another. A man obtains a house and leaves his slum in order to occupy a hygienic home on Bull Farm Estate. There he finds that the combination of high rent, rates, and the expense of refurnishing present a financial complexity of which the only solution to hand is to take in one or two other families. He is thus driven back to conditions of overcrowding through high building costs resulting in too expensive houses.

In my opinion we shall have to get back to the comfortable terrace type of house with garden front and rear in order to get down to what the average working man's income can afford in the way of rent. This might, I think, be done without any sacrifice of healthy living conditions. Many economies can be effected in the construction of this type of house. The costs of drainage and sewerage, road construction, lighting, etc., are much less. They are warmer than detached or semi-detached dwellings. Ample window space and ventilation can easily be provided, and if constructed on the regulation acreage air-space should be ample.

2. The other inimical condition at work is the general tendency of fall in wages, while the cost of living, and especially the cost of food, remains high.



## GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

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The following Hospitals are provided or subsidised by the Local Authority or by the County Council :—

1. **Tuberculosis.**—The responsibility for treating this disease rests with the County Council. The Ransom Sanatorium is situated amongst pine woods about three miles from the Borough. Accommodation consists of 130 beds, 50 of which are for males, 40 for females and 40 for children. I find that during the past year 44 Mansfield cases were admitted to this Institution.

2. **Maternity.**—No Maternity Hospital has been provided, but one bed is retained in the Mansfield Hospital by the Maternity and Child Welfare Committee for the treatment of complicated maternity cases. The terms on which this bed is held are 6s. per day during each day of occupation, 5s. per week while not occupied, together with the doctor's fee in each case of £2 2s. 0d.

3. **Children's Hospital.**—There is no Children's Hospital in the Borough ; the Mansfield and District Hospital contains Children's Wards (32 beds).

4. **Fever Hospital.**—The Forest Fever Hospital is situated on the outskirts of the Borough on a site of 4 acres 2 roods and 12 perches, which was purchased in 1894. An extension of the buildings occurred in 1915, and as they now stand these buildings consist of a Central Administrative Block, three blocks for the treatment of infectious diseases, one of which is for Scarlet Fever and one for Diphtheria. The third is an Observation Block and has 4 single-bed wards for the isolation of



doubtful cases or cases of cross-infection which have arisen in other wards.

The Hospital is designed to accommodate 32 patients with provision of 2,000 cubic feet of air space per head.

During the year a Porter's Lodge and Garage has been erected at a cost of £844.

Further details as to the number of cases treated will be found in another portion of this Report.

5. **Small-pox Hospital.**—The Small-pox Hospital belonging to the Borough, situated in Brick Kiln Lane, has not been used for the treatment of this disease during the year. Cases from this area were sent to the Nottingham City Small-pox Hospital, Bagthorpe, up to 5th May. From this period onwards these cases were sent to Morton and Spital Hospitals under the North Derbyshire Hospital Board.

6. **Other Hospitals.**—The Union Hospital, situated in Mansfield, has 164 beds ; 77 of these are for females, including the maternity department, and 87 for males. This is under the control of the Poor Law Guardians.

**Mansfield and District Hospital.**—This hospital has a total number of 108 beds, which are allocated as follows:—

Medical 25.	Surgical 51.	Children 32.
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### **Unmarried Mothers.**

An annual subscription is voted to the Mansfield and District Society for the Help and Protection of Girls who are able to secure beds for approved cases, but apart from this there is no institutional provision for unmarried mothers and illegitimate children in the area. Homeless children are received into the Union Infirmary.

### **Ambulance Facilities.**

(a) FOR INFECTIOUS CASES.—A Motor Ambulance is provided for this purpose and is now garaged at the Hospital Lodge. This arrangement will facilitate removal of cases at all hours with a minimum amount of delay.

(b) FOR NON-INFECTIOUS AND ACCIDENT CASES.—An Ambulance has been provided by the British Red Cross Society and is maintained by the Borough. One or two of the surrounding Authorities contribute to the cost of upkeep.

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## **CLINICS AND TREATMENT CENTRES.**

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MATERNITY AND CHILD WELFARE CENTRE.—There are two Welfare Centres. One is held at 56, Leeming Street, Mansfield, and the other at St. Barnabas' Church Schoolroom, Pleasley Hill.

At Leeming Street two clinics attended by the doctor are held each week in addition to an Ante-Natal Clinic.

At the Pleasley Hill Centre one session is held each Monday.

DAY NURSERIES.—There are no day nurseries provided in this town.

SCHOOL CLINICS.—The Mansfield School Clinic occupies premises in the centre of the town, its general activities being Consultation Clinics, Minor Ailments Clinic, Dental Clinic, Eye Clinic, and Ringworm Clinic.

TUBERCULOSIS DISPENSARY.—There is a Tuberculosis Dispensary under the control of the Nottinghamshire County Council in Mansfield. It is attended by a Specialist Medical Officer twice a week. Arrangements are in progress for a new site which will facilitate the work of the Tuberculosis Officer.



VENEREAL DISEASE.—A Venereal Diseases Clinic is also under the supervision of the County Council and conducted at West Hill House. Two days a week are set aside for males and females. An Irrigation Clinic is held daily.

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## PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY.

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A list of these will be found as a preface to this Report. These are all wholly employed by this Authority.

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## PROFESSIONAL NURSING IN THE HOME.

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(a) Generally this is discharged by members of the District Nursing Association or by nurses who are on the staff of Nursing Homes. A grant of £20 is made annually to the local District Nursing Association.

(b) FOR INFECTIOUS DISEASES.—There is no scheme for home nursing of infectious diseases in the home.

**Midwives.**—No midwives are employed by this Authority. The number of midwives practising in the area is 12.

**Chemical Work.**—Specimens from this Authority are sent to the Public Analyst, City of Nottingham.

Analyses under the Sale of Food and Drugs Act are conducted by the Nottinghamshire County Council.

I am much indebted to the Chief Analyst to this Authority for a regular quarterly report upon the articles analysed by him which are taken in the district of the Borough of Mansfield.

A summary of Statistics from this source will be found elsewhere.

## LEGISLATION IN FORCE.

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### **Special Acts of Parliament.**

Mansfield Commissioners' Gas Act, 1878.

Mansfield Corporation Act, 1901.

(Royal Assent 26th July, 1901.)

Mansfield Corporation Act, 1905.

(Royal Assent 11th July, 1905.)

Electric Lighting Order, 20th June, 1899.

Electric Lighting Order, 2nd August, 1907.

The Mansfield Corporation Gas Order, 1924.

The Mansfield Corporation Act, 1925 (*See Note below*).

**List of Acts of Parliament.**—Adopted by the Council, and the dates on which they came into force in the District:—  
Public Health (Water) Act, 1878, Sections 6 and 7.

Order of the Local Government Board, dated 6th December, 1889.

Public Libraries Acts.

Infectious Disease (Prevention) Act, 1890, 1st July, 1892.

Public Health Acts Amendment Act, 1890, parts 2, 3, 4 and 5, 1st July, 1892.



Baths and Wash-houses Acts, 9th November, 1892.

Private Street Works Act, 1892, 25th March, 1894.

Notification of Births Act, 1907, 1st January, 1909.

Public Health Acts (Amendment) Act, 1907, Sections 21, 22, 32 (Part II.), 35, 46, 50 (Part III.), 63, 64 (Part IV.) and 95 (Part X.), 13th January, 1922.

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The Mansfield Corporation Act, 1925, received Royal Assent on 7th August, 1925.

The chief sanitary provisions may be summarised as follows :—

Measures for the prevention of the spread of infectious diseases.

Powers for dealing with Common Lodging-houses.

Sanitary Regulations for premises used for the preparation and sale of food.

Cleansing of Milk Vessels.

Restrictions on Rag and Bone dealers.

Cleansing of verminous houses and persons.

Provision of Public Slaughter-house.

This Act also obtains power for the construction of a large number of street improvements and widening schemes.

## SANITARY CIRCUMSTANCES OF THE AREA.

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### **Water.**

The water supply of the Borough is derived from the Bunter formation by means of two deep wells.

**RAINWORTH WELL.**—The site of this well and pumping station was purchased in 1895 and in the same year the sinking of the well was completed. The depth of this well is about 107 feet.

**CLIPSTONE WELL.**—This was sunk in 1908. The permanent well is stated to be 200 feet deep. This well was brought into operation in 1909.

There is as well a Reservoir constructed on a piece of land at Berry Hill with a capacity of 800,000 gallons. Two pumping stations are established, one on Chesterfield Road and another small boosting station on the Nottingham Road.

The total capital expenditure on this undertaking up to 31st March, 1925, was £118,747 13s. 5d.

This Bunter formation, mainly pebble beds and mottled sandstone, extends from just below the surface at Clipstone to a depth of 369 feet, at Rainworth to a depth of 276 feet. The so-called "middle marl" separates this stratum from the Magnesian Limestone, its depth at Clipstone being 30 feet and at Rainworth 16 feet. Consequently it does not contain an excess of salts of lime. This moderate amount of hardness is a dietetic point of considerable value, and makes the water an economical one from the domestic point of view as well as rendering it well adapted for manufacturing processes.



The supply of water is constant. As well it possesses an extremely high degree of organic purity and is very palatable.

Bacteriological reports are obtained quarterly from the University of Manchester, and these shew that the water is of a very high standard of bacterial purity. The estimated domestic supply within the Borough is 19 gallons per head per day, and for all purposes 25 gallons per head per day.

The following outside Authorities receive a supply from this undertaking :—

1. Mansfield Woodhouse.
2. Pleasley and New Houghton.
3. Tibshelf and Newton.
4. Clipstone.

### **Rivers and Streams.**

The river Maun passes through the town. The upper reaches of this river are fed by the King's Mill Reservoir, which receives the effluent of the Sutton-in-Ashfield Sewage Scheme.

Well below the town this river receives the effluent from the Mansfield Sewage Works.

The river Meden receives the effluent from the Pleasley Hill Sewage Works, at a point well outside that part of the Borough.

### **Drainage and Sewerage.**

There are three Sewage Disposal Works dealing with the sewage matter of the Borough.

(a) BATH LANE WORKS.—These consist of sedimentation tanks and sprinkler beds. A further extension brought into operation in September, 1924, is operated on the principle of activated sludge treatment.

This bio-aeration plant has a capacity of 500,000 gallons per day, but probably is worked most efficiently when dealing with 400,000 to 450,000 gallons.

The total amount of sewage matter passing through these works is on an average 1,250,000 gallons per day. It will be seen therefore that the bio-aeration plant is dealing with about one-third of the total sewage.

(b) PLEASLEY HILL WORKS.—These were extended in 1921 and now consist of sedimentation tanks and percolating filter beds, sewage matter being distributed on these by means of one large and eight small sprinklers. The original works were erected about 1900. Storm water can be dealt with by passing through the complete system or running it on to a separate filtration bed.

(c) RAINWORTH WORKS.—These are situated outside the Borough and deal with sewage from the Mansfield part of Rainworth as well as parts of Southwell Rural District and Skegby Rural District. It consists of detritus chambers, two septic tanks used alternately, with distribution of sewage on a farm, the available amount of land being 11·9 acres. Crops of oats and potatoes are grown on parts of this sewage farm.

With the large increase in the portion of Rainworth, outside the Borough, it would seem to me that these works are now becoming heavily taxed and will shortly require extensions or alterations of type.



## **Drains and Sewers.**

The main sewers in the town are very old.

New drainage work and extensions have recently been completed in the following areas :—

MAUN VALLEY SCHEME.—Sutton Road, Quarry, Lane, Sheep-bridge Lane, &c.

Southwell Road, from Forest Hospital to Blythe's Barn.

Kate Moody Lane.

Berry Hill Road.

Berry Hill Lane.

Argyle Street.

George Street.

Clifton Grove.

Perlethorpe Avenue.

Peck's Hill.

## **Closet Accommodation.**

In November, 1923, I submitted a report on the subject of conversion of pail closets and privy-middens within the Borough, and a Sub-Committee was appointed to deal with this matter.

PAIL CLOSETS.—In June, 1924, a scheme was approved whereby the owner of property should contribute towards the cost of conversion £4 per closet, the owner in addition bearing any necessary expenditure on structural alterations. This offer was made to the owners of property within reasonable distance of a sewer and water supply. When this offer was made there were 300 convertible pail closets.

Under this scheme 128 conversions have been carried out in 1925 at a cost of £999 3s. 4d., and the work of conversion was still proceeding at the close of the year. The work has been carried out by the Corporation. Seven privy-middens were converted at the expense of the owner.

**Scavenging.**

The following is an extract from the Borough Surveyor's Report for the twelve months ending 31st March, 1925 :—

## NUMBER OF ASHPITS, PAILS, AND BINS IN USE.

Date. Year ended.	No. of Ashpits.			Pails.	Bins.
	Privy.	Dry.	Total.		
31st March, 1924 ... ..	45	460	505	363	8138
31st March, 1925 ... ..	39	403	442	363	8454

## NUMBER OF ASHPITS, PAILS, AND BINS EMPTIED.

Date. Year ended.	No. of Ashpits.			Pails.	Bins.
	Privy.	Dry.	Total.		
31st March, 1924 ... ..	253	7008	7261	18881	417894
31st March, 1925 ... ..	159	4580	4739	18952	435480

## APPROXIMATE WEIGHT OF REFUSE COLLECTED.

Date. Year ended.	To Destructor.	To Tips.	To Farms.	Total.
	Tons.	Tons.	Tons.	Tons.
31st March, 1924 ... ..	13335	5463	608	19406
31st March, 1925 ... ..	15907	2602	602	19111

## WEIGHT OF REFUSE BROUGHT INTO DESTRUCTOR.

Date. Year ended.	Collected by	Trade and Market	Total
	Health Committee.	Refuse.	Weight.
	Tons.	Tons.	Tons.
31st March, 1924... ..	13335	947	14282
31st March, 1925... ..	15907	998	16905

Nett cost of Collection of Refuse and its delivery to destructor, tips and farms was £6,622 19s. 10d., *i.e.*, 6/11 per ton.

The quantity of refuse cremated was 16,905 tons at a cost of £3,023 11s. 10d., equivalent to a cost of 3/6·9 per ton.

Four horses and four 2½ ton Electric Wagons were engaged in removal.



## Smoke Abatement.

Observations of factory chimneys have been regularly made during the year.

With the exception of one or two chimneys there has been nothing to complain of in regard to pollution by black smoke.

Where nuisance has occurred visits have been made to the works and interviews have been held with the owners and boiler-men which usually has led to improvement.

In one case where another type of engine was installed the volume of smoke discharged was decreased, but not to a sufficient degree to be satisfactory. Further observations are being taken and suggestions made which it is hoped will be successful.

Several of the factories use mechanical means of stoking which prove satisfactory, while others have installed electricity and use fires for heating purposes only.

Local readings of atmospheric impurity are not taken.

## Slaughter-houses.

Thirteen slaughter-houses are at present occupied in the Borough.

			Year, 1920.		January, 1925.		December, 1925.
Registered	...	...	9	...	6	...	6
Licensed	...	...	5	...	7	...	7
Total...			14	...	13	...	13

## **Schools.**

The Medical Officer of Health acts as Chief School Medical Officer, so that the Public Health and School Medical Services are readily co-ordinated.

In addition to regular inspection of the school children the Public Elementary Schools are also inspected as to their sanitary arrangements and hygienic condition by the medical staff as well as by the Sanitary Inspector.

With regard to infectious disease the Memorandum on Closure and Exclusion from School, 1925, has been carefully followed.

Diphtheria contacts are not allowed to return to school until a swab taken from the throat shews that they are non-infective.

Children suffering from infectious disease treated at the Forest Hospital remain at home for at least two weeks after discharge and are inspected by the medical staff before return.

During the past year it was not found necessary to close any of the schools although a considerable number of cases of measles and whooping-cough occurred towards the end of the year.

Non-notifiable infectious diseases occurring in the Schools are notified to the Medical Officer each week. This list includes Measles, Whooping-cough, Mumps and Ringworm. (N.B.—Chicken-pox is included at present amongst the notifiable group.)

Each School is supplied with water from the Town Supply, and flushing closets are provided in each school.

The rapid growth of the town has led to some overcrowding, but the Education Committee have now a building programme well in hand which will shortly relieve this congestion.



## HOUSING.

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### 1. General Housing Conditions in the Area.

There is a very excessive shortage of houses in this Borough, this being probably greater now than at any period during the last five years. The rate of building has not kept up with the normal growth of the Borough, and the cessation of building during the war created a great shortage of houses at the end of 1919.

To meet this problem the following Housing Estates have been developed within the Borough:—

(1) BAUMS LANE HOUSING ESTATE.—This land was purchased in 1920 and 24 houses have been erected upon it.

(2) MOOR STREET HOUSING ESTATE.—Land was acquired in 1921 for the erection of 7 houses on this site.

(3) BULL FARM HOUSING ESTATE.—This includes the following lands:—

(a) Land containing 39 acres and 6 perches with farm and buildings thereon, purchased in 1921, situated west of Chesterfield Road.

(b) Four acres 1 rood 38 perches in Cock Lane.

(c) Three pieces of land in Chesterfield Road and Cock Lane containing 10 acres 2 roods and 5 perches.

On this Bull Farm Estate 373 houses have been completed and occupied on 31st December, 1925, and 210 were in course of erection.

(4) Land was purchased in 1921 at Ravensdale Farm, consisting of 98 acres 2 roods 8 perches, with the farmhouse and buildings thereon. On completion of the Bull Farm Estate this will probably be developed as a Housing Estate.

**Growth of Population.**—Very rapid development has occurred in the Nottinghamshire coalfield, and new villages are springing up for the workers in the new sinkings. There will, however, be a good many of these who will prefer to live in a town such as Mansfield, which forms a natural centre for this widely expanding area.

Indirectly this surrounding population will as well come to shop in Mansfield, and trade development in the town will add to the growth of population.

## **2. Overcrowding.**

It is difficult to estimate the extent of overcrowding, but I would say that there are more than 1,500 houses in the Borough in which two families are living. There are also many houses where there are three families living. Many families also are known to have been on the waiting list for houses for more than four or five years.

The cause of overcrowding is attributed to the development of new coalfields in the district, which have previously been referred to.



It has been found impossible to take drastic action with regard to overcrowding, the continued shortage of houses precluding all possibility of dealing stringently in such cases.

### **3. Fitness of Houses.**

The houses in the greater portion of the Borough are modern, but several areas in the older parts of the town are very defective in their construction, lighting, and ventilation, &c. These will later form the basis of a further representation under the Housing of the Working Classes Act.

Most of the property is managed by agents, an arrangement which is not so conducive to proper management as when under direct supervision of the owners.

General action taken under the Public Health and Housing Acts was, in the main, palliative.

There has been a considerable volume of improvement as regards general hygienic conditions during the year. A large number of pail-closets and privies have been replaced by flushing water-closets, and a large number of dustbins have been provided, replacing ashpits.

The water supply of the Borough has also been improved by the erection of an additional high level water storage tank for supplying water to several of the higher parts of the town. The construction of this tank was completed about the end of 1925.

#### 4. Unhealthy Areas.

CLERKSON'S ALLEY SCHEME.—The official representation pursuant to the provisions of Part I. of the Housing of the Working Classes Act, 1890, was made by your Medical Officer on 21st March, 1923, declaring this as an unhealthy area. This declaration refers to an area of 2.133 acres, and consisting of 72 houses known as :—

Clerkson's Alley,  
Bull Yard,  
Union Court,  
Thompson's Alley,  
Alfred Court,  
Nag's Head Yard,  
Cross Keys Yard.

The number of persons occupying these houses was estimated at 359.

This representation was accepted by the Council on 20th April, 1923. The scheme for the improvement of the area was approved by the Council on 21st September, 1923.

A petition, dated 19th October, 1923, was lodged against the scheme, and this was the subject of an enquiry held on 11th December, 1923.

The scheme received the approval of the Ministry of Health on 16th July, 1924.

Tenders for the erection and completion of houses for dispossessed tenants of this area were submitted on 16th December, 1925.





### 3. Action under Statutory Powers.

A.—PROCEEDINGS UNDER SECTION 3 OF THE HOUSING ACT, 1925 :—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ... ..	31
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners ... ..	30
(b) By Local Authority in default of owners	—
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	—

B.—PROCEEDINGS UNDER PUBLIC HEALTH ACTS :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ... ..	169
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners ... ..	155
(b) By Local Authority in default of owners	—

C.—PROCEEDINGS UNDER SECTIONS 11, 14 & 15, HOUSING ACT, 1925 :—

(1) Number of representations made with a view to the making of Closing Orders... ..	—
(2) Number of dwelling-houses in respect of which Closing Orders were made ... ..	—
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-house having been rendered fit ... ..	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made ... ..	—
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders ... ..	6



## REPORT OF THE SANITARY INSPECTOR TO THE MEDICAL OFFICER OF HEALTH.

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Dear Sir,

I have pleasure in submitting to you my eleventh Annual Report. From a perusal of the report it will be seen that considerable work has been done in the way of general sanitary matters.

It was again found that the cost of repairs to property was a great obstacle to getting work carried out.

### General Sanitation.

On account of the method adopted by the Corporation with regard to the conversion of pail-closets to the water-carriage system, some progress has been made. The following statement gives the particulars of unsatisfactory methods of sewage and refuse disposal still remaining in the Borough:—

Number of Privies	...	...	...	65
,, Pail-closets	...	...	...	227
,, Waste-water Closets	...	...	...	56
,, Ashpits	...	...	...	296

The conversions to recognised sanitary types of closets and ashpits in recent years have been as follows:—

Year.	Privies converted to W.C's.	Pail Closets converted to W.C's.	Waste-water Closets converted to W.C's	Ashpits replaced by regulation Dustbins.
1921... ..	3	121	—	97
1922... ..	2	3	14	52
1923... ..	1	1	—	72
1924... ..	15	—	—	45
1925... ..	7	128	—	58

### Dairies, Cowsheds, and Milkshops.

These premises have been regularly inspected and have given cause for very little complaint. Where it was found necessary to ask for lime-washing the work was carried out without further need of notices.

### Milk Supply.

The number of milch cows kept in the Borough during the year has not increased, as will be seen from the following Table :—

Number of	Years.				
	1921.	1922.	1923.	1924.	1925.
Cowsheds in use in the Borough	45	43	38	38	42
Milch Cows in the Borough ...	235	229	242	243	243
Milk Purveyors ... ..	49	51	52	53	63
Milk Wholesalers ... ..	—	—	33	35	35

During the year 123 inspections were conducted in regard to the premises of Purveyors of Milk.

During the year complaints have been received regarding the wholesomeness of the milk supplied in the Borough. These complaints arise chiefly from customers supplied with milk imported into the Borough. I consider if more samples of milk were taken and tested for foreign matter such complaints would practically cease.

Apart from the inspection of dairies and cowsheds the Milk and Dairies (Amendment) Act, 1922, and the Milk and Dairies (Consolidation) Act, 1915, in conjunction with the Tuberculosis Order, 1925, is administered by the County Authorities.

Such an arrangement is not satisfactory for a Borough of the size of Mansfield. All condemned animals are sent to a knacker's yard to be slaughtered outside the Borough, which



method prevents any part of the carcase which might be good for food being saved for such purpose.

### **Pasteurised Milk.**

Only one licence has been granted for the manufacture and sale (wholesale and retail) of Pasteurised Milk.

The plant used is of the " holding " type and is manufactured by The Aluminium Plant and Vessel Co.

In this machine the milk, after removal of all dirt and foreign matter, is heated to a temperature of 145° F. and retained at that temperature for a period of not less than 30 minutes.

Six licences have been granted for the retail sale of this milk, and the manufacturer has a very extensive sale in the district.

This milk is regularly tested and has been found very satisfactory.

No other manufacturing applications for licence have been received, and no other applications have been received for any of the other forms of graded milk.

There have been no instances of refusal or revocation of licence.

### **Offensive Trades.**

It may be said we are rather fortunate as regards the number of offensive trades in the Borough, there being only five such premises, viz. :—

- Three tripe boilers' premises,
- One tallow melter,
- One hide, skin and fat warehouse.

There has been no need for complaint as regards these premises during the year with the exception of ordinary repairs, &c.

Number of Inspections made ... .. 74

There is a need for bye-laws to control fried-fish shops in the Borough.

### **Common Lodging-Houses.**

The two common lodging-houses in the Borough have been regularly inspected.

I had to complain during the year of the neglect in having the premises limewashed by the specified dates ; also as to the condition of the beds at one of the houses.

I consider the premises at Walkden Buildings are unsuitable and too dilapidated to be used much longer as a common lodging-house.

### **Rats and Mice (Destruction) Act, 1919.**

During the " National Rat Week," inaugurated by the Ministry of Agriculture and Fisheries, the following action was taken by the Health Committee :—

1. An advertisement was inserted in each of the weekly papers asking for the concerted efforts of the public in the destruction of Rats and Mice.

Posters were placed on the advertisement hoardings in the Borough.

All business premises and other premises known to be or likely to be troubled by rats were circularised.



2. All complaints have been investigated, also many infested premises visited and advice given with regard to Rat Destruction.
3. The sewers, where found to be infested, were baited in the manholes with poison. Special attention was paid to the Sewage Works, this work being done by the Borough Surveyor's staff.

As far as could be ascertained, the results proved most satisfactory.

### **Food Inspection.**

The work of food inspection is a very important branch of an Inspector's duties, entailing great responsibilities if conscientiously carried out.

The law regarding bakehouses and food preparing places is improved by the passing of the Public Health Act, 1925, although it might have been more helpful if more definite instructions had been given regarding storage rooms of prepared foods. An Inspector, by using discretion, can, however, carry out his work much better than previously.

The number of bakehouses on the register at the end of the year was 19. Several of these are modern, up-to-date premises possessing the most up-to-date appliances and equipment, the remainder being more or less out-of-date premises and requiring strict supervision.

I am,

Your obedient Servant,

**BERNARD ALLMAN.**

## SUMMARY OF WORK DONE, 1925.

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Summary of work done, including that in connection with House-to-House Inspection on informal or statutory notices, etc., served for the abatement of nuisances, etc., as the result of inspections :—

	Number of Defects, etc., remedied on	
	Informal Notices.	Statutory Notices.
Drains amended, repaired or re-constructed ...	328	19
Drains, W.C.'s and gullies cleansed ... ..	787	7
Fall pipes and eaves spouts cleansed or repaired...	171	24
W.C.'s and privies repaired ... ..	168	18
Additional W.C.'s provided ... ..	6	—
Privies converted into W.C.'s ... ..	7	8
Pail-closets converted into W.C.'s ... ..	128	—
Dry Dustbins provided ... ..	407	40
Dry Dustbins provided in lieu of ashpits abolished	58	1
Dilapidations repaired (including roofs, ceilings, walls and floors) ... ..	144	21
Yards, passages and pavements repaired ... ..	516	29
Defective light and ventilation ... ..	16	5
Dirty premises limewashed and cleansed ... ..	29	1
Over-crowding of dwellings abated ... ..	—	—
Nuisances abated from keeping animals and fowls	42	—
Smoke nuisances abated ... ..	4	—
Manure and refuse removal ... ..	30	—
Miscellaneous ... ..	117	9
Total of defects remedied or nuisances abated ...	2958	182



Table shewing premises inspected, notices served, complaints registered, notices complied with, etc. :—

Number of complaints registered	...	...	...	...	254
„ Premises inspected	...	...	...	...	2424
„ Workshops inspected (F. & W. A.)	...	...	...	...	211
„ Informal Notices served	...	...	...	...	1342
„ Informal Notices complied with	...	...	...	...	1190
„ Notices served	...	...	...	...	178
„ Notices complied with	...	...	...	...	176
„ Inspections	...	...	...	...	7352
„ Houses inspected under Housing and Town Planning Act	...	...	...	...	262
„ Houses inspected in which defects were found and office notices served	...	...	...	...	226
„ Houses inspected in which defects were reme- died without serving Closing Order	...	...	...	...	225
„ Cases of Infectious Diseases investigated	...	...	...	...	326
„ Articles of clothing, &c., disinfected	...	...	...	...	11581

### **Summary of Food Inspection.**

The duties include the inspection of meat, fish, fruit, cowsheds and dairies, and all wholesale and retail premises where food is sold or prepared for sale.

## SURRENDERED AND DESTROYED :—

	Tons.	cwts.	lbs.
Beef ... ..	1	7	110
Beef (imported) ... ..	0	8	52
Pork ... ..	0	7	85
Edible Organs ... ..	1	10	86
Tinned Fruit and Vegetables ... ..	1	18	74
Fish and Game ... ..	0	6	66
Shell Fish ... ..	0	18	4
Fruit (green) ... ..	1	1	4
Rabbits ... ..	0	0	75
Sausages ... ..	0	0	66
Corned Beef and Tongues... ..	0	12	52
Bacon ... ..	0	0	76
Nuts ... ..	1	4	0
Total...	9	17	78

In addition to the food surrendered and destroyed as mentioned in the previous column, the following statement shews the number of carcasses surrendered :—

	Carcases.	Cause.
Cows ... ..	3½	Tuberculous
Heifers ... ..	2	Tuberculous
Bullocks ... ..	4	Tuberculous
Bullocks ... ..	1	Pyemia
Pigs ... ..	2	Tuberculous
Pigs ... ..	3	Cirrhosis and Icterus
Pigs ... ..	2	Swine Fever
Pigs ... ..	2	Peritonitis and Emaciation
Sheep ... ..	2	Pneumonia (Moribund)
Lamb ... ..	1	Septic Pneumonia
Calf ... ..	1	Umbilical Ill



### **Seized and Destroyed.**

Fourteen rabbits were seized and destroyed as unfit for the food of man. Owner cautioned. No legal proceedings taken.

### **Summary of Premises Inspected.**

Slaughter-houses, butchers' and provision shops, fish shops and meat factories ...	1788 visits.
Dairies and Cowsheds ... ..	232 ,,

The Markets, which are held on Thursdays, Fridays and Saturdays of each week, have been regularly inspected, and little cause for complaint has arisen.

There are a large number of meat and prepared food stalls in the open market. These, in accordance with the Public Health (Meat) Regulations, 1924, have been covered over and screened at the sides and back with tent sheeting.

The stall boards are removed after use and cleansed by the Market Superintendent's staff.

This, although an advance on previous methods, is far from satisfactory, and I shall welcome the time when it will be compulsory for all foods sold in markets to be displayed in covered markets only.

### **The Public Health (Meat) Regulations, 1924.**

These Regulations are a decided advance in the work of food inspection and have created a tremendous amount of work.

Under these regulations notice forms for regular and occasional slaughtering have been issued, and a supply of such forms is always available by applying at the Public Health Department.

It has been my endeavour to examine all animals slaughtered in the Borough within three hours as stated, and this has been done almost in every case. This has entailed much work on Sundays in addition to week-days.

It would be much easier if all Authorities would make a more determined effort to carry out more systematic inspection and work to the standard as laid down in Memo. Foods 62 on Meat Inspection.

Much dead meat is imported into the Borough, which appears to have received very little inspection, and I am afraid until pressure is brought to bear upon all Local Authorities to carry out the Regulations more systematically this will increase rather than decrease.

We have not adopted the principle of meat-marking as yet, but I consider the trade would welcome such a principle, as it would provide a criterion whereby the customer would know that the wholesomeness of his supply was above reproach.

The number of food-preparing premises on the register at the end of the year was forty-two.

BERNARD ALLMAN.



## FACTORY AND WORKSHOP ACT, 1901.

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Total number of Workshops on the Register ... ..	176
Inspections made to Workshops and Factories ... ..	211

Four notices of occupation and two notices of nuisances have been received from H.M. Inspector during the year.

The following Table gives the sanitary defects found in workshops, workplaces and factories:—

Want of cleanliness ... ..	10
Want of ventilation ... ..	—
Sanitary accommodation insufficient ... ..	—
Sanitary accommodation unsuitable or defective ...	1
Sanitary accommodation not separate for sexes ... ..	—
Defective drainage ... ..	—
Defective roofs, &c. ... ..	—

Six outworkers' lists were received from employers notifying fourteen outworkers resident in the Borough. Names of outworkers on our returns resident outside the Borough are transferred to the Authority where they reside.

All the outworkers' premises were inspected at least once during the year.

No case of infectious disease was notified at any of the outworkers' premises during the year.

## SALE OF FOOD AND DRUGS ACT AND THE MILK AND CREAM REGULATIONS.

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The County Council are the Authority for the carrying out of the provisions of the above Acts.

By the courtesy of the Chief Analyst to the Nottinghamshire County Council I submit a report of the result of the analyses of articles of food taken within the Borough of Mansfield during the year 1925 :—

Articles.	Samples.	Correct.	Incorrect.	Result.
Baking Powder ... ..	2	2	—	Genuine
Beef Dripping ... ..	1	1	—	„
Butter ... ..	6	6	—	„
Bread ... ..	3	3	—	„
Cocoa ... ..	1	1	—	„
Flour ... ..	1	1	—	„
Ground Rice ... ..	4	4	—	„
Ground Ginger ... ..	2	2	—	„
Gin ... ..	2	2	—	„
Honey ... ..	1	1	—	„
Lard ... ..	2	2	—	„
Margarine ... ..	2	2	—	„
Milk ... ..	69	59	10	10 Adulterated
Oatmeal, fine ... ..	1	1	—	Genuine
Oatmeal, malted ... ..	1	1	—	„
Pepper ... ..	1	1	—	„
Rice ... ..	1	1	—	„
Sugar, Demarara ... ..	1	1	—	„
Whisky ... ..	6	6	—	„
Sponge Cakes ... ..	2	2	—	„
Machine Skimmed Condensed Milk	1	1	—	„



**Number of Informal Samples of Milk tested by Inspectors by "Gerber" Tester:—**

	Correct.	Incorrect.	Total.
Number of Samples taken by Inspectors...	145	1	146
Number submitted by milk retailers and producers to the Inspectors ... ..	510	2	512
Number taken at Farms ... ..	2	3	5
Totals...	657	6	663

**PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.**

The amount of Notifiable Infectious Diseases occurring during the last 5 years will be seen from the following Table:—

	1921.	1922.	1923.	1924.	1925.
Small-pox ... ..	—	—	5	85	142
Scarlet Fever ... ..	257	109	106	137	101
Diphtheria ... ..	33	34	43	55	31
Typhoid (and Para-typhoid fever) ... ..	1	1	1	1	4
Erysipelas ... ..	5	19	14	12	16
Puerperal Fever ... ..	3	5	5	3	3
Encephalitis Lethargica ... ..	3	1	1	6	6
Ophthalmia Neonatorum ... ..	45	16	19	13	7
Cerebro-spinal Fever ... ..	—	2	—	1	1
Pulmonary Tuberculosis ... ..	30	60	66	47	64
Other Forms of Tuberculosis ... ..	9	26	22	15	12
Poliomyelitis ... ..	—	2	—	—	1
Chicken-pox ... ..	—	—	47*	309*	332*

\* Notifiable under Section 7, Infectious Diseases (Notification) Act, 1889, from 13th July, 1923.

FACTS TO BE DERIVED FROM THIS TABLE.—Scarlet Fever incidence has diminished although the population has increased.

The Borough has been singularly free from diseases of the typhoid group. The number of cases of Puerperal Fever is low and shews remarkable constancy.

No favourable alteration in attack-rate of Tuberculosis can be assumed from the above figures. Private practitioners are, however, becoming more alert in the notification of this disease, and so the above figures should not be interpreted as indicating a higher frequency of the disease.

PNEUMONIA, MALARIA, DYSENTERY, AND TRENCH FEVER.—These are notified under the Regulations of 7th January, 1919. The number of cases notified will be seen from the following table :—

				1921.	1922.	1923.	1924.	1925.
Pneumonia	...	...	...	26	29	29	26	40
Malaria	...	...	...	2	—	—	—	—
Dysentery	...	...	...	1	—	—	—	—
Trench Fever	...	...	...	...	—	—	—	—

NOTE.—These figures are not at all reliable as regards Pneumonia, this disease actually accounting for 54 deaths in the Borough. The other diseases usually occur in persons who have lived abroad and as such practitioners now seem to regard them as legacies of the Great War. It would seem that at any rate these diseases have not obtained a footing in this locality.



## Means of Prevention of Infectious Diseases.

The most important factor in the control of Scarlet Fever is the Isolation Hospital. Our most potent weapons against the spread of Diphtheria are careful swabbing and examination of all suspicious sore throats and all contacts of actual cases, together with isolation of persons affected.

How our Hospital has met these requirements will be seen from the following table :—

Years.	Population,	SCARLET FEVER.				DIPHTHERIA.				Total No. of patients treated.	Patient days.	Patients in Hospital: Daily Average.
		Total No. of cases notified.	Attack rate per 1,000 population.	No. of cases admitted to Hospital.	Per Cent of total notifications.	Cases notified.	Attack rate per 1000.	Admission to Hospital.	Per Cent of Notifications.			
1915	40,208	148	3·6	63	42·6	87	2·1	5	5·7	84	—	—
1916	41,038	134	3·2	87	64·9	130	3·1	9	6·9	103	3932	10·8
1917	41,868	80	1·9	55	68·7	60	1·4	35	58·3	110	4206	11·5
1918	42,698	47	1·1	44	93·6	37	0·8	30	81·0	95	4219	11·6
1919	43,528	52	1·1	47	90·4	54	1·2	37	68·5	95	3537	9·7
1920	44,358	77	1·7	63	81·8	54	1·2	39	72·2	130	4173	11·3
1921	45,190	257	5·7	171	66·5	33	0·7	27	81·8	212	7473	20·5
1922	46,020	109	2·3	82	75·2	34	0·7	30	88·2	154	6403	17·3
1923	46,850	106	2·2	96	90·6	43	0·9	39	90·7	158	7122	19·5
1924	47,680	139	2·9	128	92·1	56	1·1	51	91·0	214	8675	23·7
1925	47,000	101	2·1	96	95·0	31	0·6	28	90·3	134	5211	14·2

CONCLUSIONS.—The attack-rates of Scarlet Fever and Diphtheria shew gradual diminution. Proportion of cases treated in the Fever Hospital has gradually increased. This year's figure for Scarlet Fever, 95 %, establishes a high-water mark.

The actual number of cases of Scarlet Fever and Diphtheria was much below that of 1924.

## SMALL-POX.

---

This disease in a mild form has been prevalent in the district for the last three years.

The number of cases notified to me and treated during this period have been :—

Year.					Number of Cases.
1923	...	...	...	...	5
1924	...	...	...	...	85
1925	...	...	...	...	142

### **Treatment.**

The Small-pox Hospital, established in 1888, was found to be unsuitable for the reception of this disease, and as a consequence treatment had to be obtained in outside institutions. All the 1923 and 1924 cases and 130 of the 1925 series of cases were removed for treatment to the City of Nottingham Small-pox Hospital at Bulwell Forest.

In May, 1925, an agreement was made with the North Derbyshire Hospital Committee, and the remaining 12 cases were sent to their Small-pox Hospitals at Morton and Spital.

### **Incidence amongst School Children.**

Of the cases notified in 1925, 42 occurred amongst School Children, all of whom attended Public Elementary Schools, and



all of whom were unvaccinated. The schools affected will be seen from the following table :—

School.				Number of Cases.
Carter Lane	...	...	...	12
Rosemary	...	...	...	6
St. Peter's	...	...	...	2
Newgate Lane	...	...	...	4
Moor Lane	...	...	...	5
Broomhill	...	...	...	8
King Edward	...	...	...	2
Rainworth	...	...	...	3
				—
			Total...	42
				—

A record of vaccination statistics amongst school children made in this year shewed that of 2,759 school children examined only 899 were vaccinated. This gives a percentage figure of 32.5 vaccinated. In spite of a two years' invasion of the Borough there still therefore remain a large number of unprotected children.

AGES ATTACKED.—These will be found tabulated in Table II., and include all ages from 2 years up to 69.

### **Proportion of Vaccinated and Unvaccinated.**

Thirty-four persons affected had been vaccinated in infancy, 104 had not at any time been vaccinated.

Of the 34 persons vaccinated it must be noted that the youngest was 32 years and the oldest 69 years, the average age being 48·3 years.

These figures confirm my results observed in the 1924 group of cases, viz. :—that the present type of disease does not as a rule attack a person under 30 years of age who has been vaccinated in infancy. This protection period would not be so long were the disease of a more severe type.

The vaccinated persons were attacked within the following age groups :—

30—39.	40—49.	50—59.	60—69.
2	17	13	2

No person who had been twice successfully vaccinated developed the disease.

### **Control of the Disease.**

I have no hesitation in saying that the only means of controlling the disease are :—

- (1) Isolation of the patient in a Special Hospital.
- (2) Vaccination of all contacts and their supervision for at least 16 days.

### **Character of the Disease.**

The general type of the disease is still mild compared with the Asiatic type.

In my cases the interval between the onset of feverish symptoms and the occurrence of rash was 4·7 days.



The mortality has been nil, and the average time spent in hospital 20.1 days.

Although the average type was mild, six cases proved to be confluent, and one of these was in hospital for 69 days. All these confluent cases were unvaccinated. One case, a girl 8 years old, developed Keratitis, one of the complications usually associated with the severe type of the disease. She was also unvaccinated.

I have also observed that after discharge from hospital it is often a considerable time before a patient feels sufficiently strong to return to an arduous occupation.

Forty-eight of the male adults attacked were miners, the largest number of these working at Crown Farm.

I am of opinion that the conditions under which the miner works would be extremely likely to disseminate the infection of this disease. Great care should, therefore, be taken to see that unusual spots about the face or body are shewn to a doctor and not dismissed as due to water or sweating. I am much indebted to Colliery Managers for help given in carrying out these precautions.

### **Missed Cases.**

The mildness of type has again resulted in several groups of persons in one house being affected simply because the doctor was not called in when the first cases of "just a few spots" occurred.

A typical instance of this comes under record here. An unvaccinated child developed a few spots on December 24th, 1924. In two weeks' time the whole family, consisting of father, mother and five children, all of whom were unvaccinated, were removed to hospital with the disease.

These cases might all have been prevented had advice been sought in the first instance.

### **Vaccination.**

Seven hundred and ninety-two primary vaccinations and 291 re-vaccinations were carried out mainly amongst the unprotected contacts of the above cases.

Four instances occurred where contacts got the marks of vaccination well out but also developed small-pox. These were all instances where the small-pox infection had had three or four days' start. In explanation of this well recognised phenomenon it is to be noted that the protective power of vaccination travels quicker than the invasion of the small-pox virus, but there is bound to be a line of intersection where vaccination will come too late to prevent small-pox but just in time to give a positive vaccination result.

My results then shew that vaccination three days after exposure cannot be relied upon to give successful protection.

Where infection has had a longer start vaccination will not take at all, thus yielding a very valuable diagnostic sign.



In dealing with the 232 cases of small-pox which I have met with during the last three years I have never had the slightest reason to alter my unswerving faith in the protective power of vaccination. Every case in this large number has confirmed my opinion in regard to the action of calf lymph, nor have I had any reason to believe that its use has any adverse effect on the general health, growth or development of child or adult in any way.

### Cost of the Outbreak,

The number of cases notified since 1923 have cost for treatment in Hospital and removal :—

Year.	Number of Cases.	Actual Cost of Removal and Treatment.			Notification of Chicken-Pox and Small-Pox.		
		£	s.	d.	£	s.	d.
1923	5	138	10	0	6	10	0
1924	85	1728	5	0	49	5	0
1925	142	2786	13	0	59	5	0

I would estimate the additional expenditure on extra disinfectants and disinfection, publicity literature, &c., at £55 per year.

The total cost for the three years can therefore be estimated at :—

Year.	£ s. d.		
1923	200	0	0
1924	1832	10	0
1925	2900	18	0
Total...	£4932	8	0

## TUBERCULOSIS.

Particulars of new cases and deaths from this disease in the area will be found below :—

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M	F	M	F	M	F	M	F
0 ... ..	—	—	—	3	—	—	—	2
1 ... ..	2	—	—	—	—	—	—	—
5 ... ..	5	1	1	1	—	—	—	1
10 ... ..	3	4	—	1	—	—	—	—
15 ... ..	6	7	3	1	1	—	—	1
20 ... ..	1	8	—	2	—	2	—	—
25 ... ..	4	9	—	—	2	1	—	1
35 ... ..	6	4	—	—	1	1	—	—
45 ... ..	1	1	—	—	1	—	—	—
55 ... ..	2	—	—	—	2	—	1	—
65 & upwards	—	—	—	—	1	—	—	—
Totals ...	30	34	4	8	8	4	1	5

### Notification of Tuberculosis.

Fifty-six per cent. of cases dying from Tuberculosis had previously been notified. This is about the same figure as recorded in previous years. There are many factors which prevent medical men notifying cases of this disease, but the chief one is, I think, that as the disease is so chronic old cases are not notified because the practitioner assumes that having had the disease for a lengthy period the case has been previously notified ; thus, we do not become a ware of new cases coming into the town.



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

No action has been necessary in regard to tuberculous employees in the milk trade.

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### **PUBLIC HEALTH ACT, 1925, SECTION 62.**

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Compulsory removal to hospital under this section has not been found necessary.

The general administration of the scheme for the treatment of this disease is carried out by the County Authority.

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### **VENEREAL DISEASES.**

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The responsibility for carrying out treatment in this group of diseases rests with the County Council, who have established a Venereal Centre at Westfield House. The facilities provide for diagnosis, treatment and consultation are quite adequate. Cases known or suspected of suffering in this way are referred from my School Clinics and Welfare Centres and every facility has been granted in regard to the diagnosis and treatment of such cases.

## FOREST HOSPITAL.

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The present Infectious Hospital is situated on Southwell Road on a site of 4 acres 2 roods 12 perches.

This site was purchased in 1894 for £300. The original buildings consisted of Administrative Block, a Caretaker's Cottage, 2 Iron Wards, Laundry and Mortuary. These original buildings cost £2,600.

In 1906 the staff consisted of a Matron (trained) and two Nurses, who slept in the Wards.

Up to 1915 only one disease could be treated at a time.

In 1915 the Administrative Block was extended and 3 new Ward Blocks providing the following accommodation:—

Scarlet Fever	...	...	16 beds.
Diphtheria	...	...	12 ..
Observation Ward	...	...	4 ..

The Observation Ward consists of a Central Kitchen with two pairs of one bed wards on either side, each ward being completely isolated from the adjoining one, but separated by a glass screen partition.

These beds are most useful for the separation of cases of doubtful diagnosis or for treating complicated cases. This accommodation has been sufficient to deal with all cases of the Typhoid Group.

The heating of large wards is by means of Shorland Stoves, small wards have open fireplaces.



Floors are impervious, and constructed of that material known as Dolomond.

### Staff.

The Staff consists of Matron, one Sister, one Staff Nurse, and seven Probationers.

The Medical Officer of Health acts as Medical Superintendent, and is assisted by Dr. Smith.

During 1925 a Caretaker's Lodge and Garage were erected close to the Southwell Road entrance, and the Fever Ambulance is accommodated in this garage. This Lodge is connected up by telephone, so that urgent cases can now be removed by night or by day. The cost of these new buildings was £844.

The cases of Infectious Disease receiving treatment during the year were :—

	In Hospital Jan. 1st, 1925.	Admis- sions.	Dis- charged.	Died.	Remaining 31st Dec, 1925.
Scarlet Fever ... ..	19	96	104	3	8
Diphtheria ... ..	4	28	25	2	5
Typhoid (and para-typhoid) Fever	—	3	1	—	2
Encephalitis Lethargica ...	—	2	2	—	—
Other Conditions ... ..	—	5	5	—	—

The average stay in Hospital of Scarlet Fever cases was 35·9 days, of Diphtheria 26·25 days.

The total number of patients under treatment during the year was 157. This was fewer than in 1924.

Daily average number of patients in hospital—14·2.

The average cost of food per head per day, patients and staff, was 1/4.

### **Deaths in Hospital.**

STAFF.—On 15th June, Sister Hughes, who had held her appointment for 6 years, died after a very brief illness.

PATIENTS.—Three patients died from Scarlet Fever. One was admitted with Pneumonia and died a few hours after admission. The other cases developed Septicæmia.

Two patients died from Diphtheria, both of whom had had symptoms of this disease at home for several days before the condition was recognised.

#### NUMBER OF RETURN CASES :—

Scarlet Fever	...	...	...	2
Diphtheria	...	...	...	Nil.

The Shick Test has been applied once during the year only. No systematic immunising against Diphtheria has as yet been carried out.

The Dick Test has not been applied.



## BACTERIOLOGICAL LABORATORY.

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During the year the bacteriological examination was in the hands of the Manchester University, and quarterly examinations of samples from each of the wells at Clipstone and Rainworth were made.

Diphtheria swabs, material suspected of containing the tubercle bacillus, and certain other pathological specimens were examined in the Laboratory at the Public Health Office by the Medical Officer of Health, who was ably assisted in this work by Mr. E. V. Hardwick. This officer has had a great deal of experience in this work, and is perfectly competent to carry on the routine in the absence of the Medical Officer.

During the year the serological examination of blood in suspected cases of Enteric Fever was carried out in addition to the ordinary microscopical examinations.

Analysis of Work carried out in the Bacteriological Laboratory during the year 1925 :—

	Positive.	Negative.	Total.
Diphtheria ... ..	71	441	512
Tubercle Bacillus, Sputum ...	10	24	34
Ringworm ... ..	6	2	8
Typhoid Fever ... ..	1	11	12
Gonorrhœa ... ..	3	3	6
Anthrax ... ..	—	1	1
Miscellaneous ... ..	17	24	41
	<hr/>		
Totals...	108	506	614
	<hr/>		

The following Table gives the number of examinations made in the Laboratory during the last 5 years :—

	1921.	1922.	1923.	1924.	1925.
Diphtheria ... ..	387	413	548	769	512
Tubercle Bacillus, Sputum ...	34	35	21	20	34
Typhoid Fever ... ..	—	4	—	9	12
Ringworm ... ..	59	30	3	5	8
Gonorrhœa ... ..	6	11	—	5	6
Anthrax ... ..	—	1	3	9	1
Miscellaneous ... ..	35	17	17	26	41

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## MATERNITY AND CHILD WELFARE.

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### General Scheme.

The scheme for provision of treatment for expectant and nursing mothers, as well as children from infancy to 5 years of age, is administered from its two chief centres :—

#### 1. Mansfield Centre.

Situated in a commodious house at 56, Leeming Street, this centre contains :—

- (a) Health Visitors' Room, where records are stored and the clerical work of the department is chiefly dealt with.
- (b) Dining Room, where a daily mid-day meal is provided for poor mothers during the latter three months of pregnancy and the first six months of lactation. This mid-day meal is, in normal times, attended by 16 to 20 mothers. Each mother pays 1d. for her dinner, and may be accompanied by one child, who receives a suitable meal for the sum of  $\frac{1}{2}$ d.



Cooking is carried out by the Caretaker, and the arrangement of the menu and purchase of food-stuffs is controlled by a Ladies' Voluntary Committee. Generous supplies of food are contributed towards this meal by several kind donors.

- (c) Surgery and Dispensary, where minor dressings are carried out and food-stuffs and nutrient preparations are sold.
- (d) Doctor's Consulting Room, on first floor.
- (e) Waiting Room.
- (f) Weighing Room. On Clinic afternoons the Health Visitors are assisted by voluntary helpers. Children are weighed at any time, but special weighing clinics are held on Tuesday and Thursday afternoons.
- (g) Caretaker's living and sleeping accommodation.

### **Medical Arrangements.**

Health Visitors advise parents and carry out minor treatment work each morning.

Doctor's consultations are held as follows:—

Tuesday afternoon—(a) Ante-natal Clinic.

(b) General clinic for mothers and children.

Thursday afternoon—General clinic for consultation and treatment.

The Centre is connected up by telephone, and so special cases can be seen by the Medical Officer or Dr. Smith at any time.

A large open shed is provided at the rear of these premises for perambulators and push-cars.

Teas are provided by Voluntary Helpers at a small cost for parents and children attending the Centre on Tuesday and Thursday. The introduction of this social amenity goes a long way, I think, in popularising the Centre amongst mothers and children.

## **2. Pleasley Hill Centre.**

This Centre was originally held in the Friends' Adult School, but was transferred in 1923 to more commodious premises in St. Barnabas' Schoolroom.

This Centre is attended each Monday afternoon by the Senior Health Visitor and one of the Medical Staff.

All necessary medicines, dressings, food-stuffs, and nutrient preparations are available.

It serves the districts of Pleasley Hill and Bull Farm.

Afternoon teas are also served and general assistance given by a number of local ladies, who also assist in the weighing of children.

The collaboration in this work of these voluntary helpers is, to my mind, most valuable, as it neutralises by its personal and friendly attitude any idea of officialdom in the carrying out of the very helpful work of the Welfare Centre.

## **Special Services in connection with Maternity and Child Welfare.**

(a) A Maternity Bed is retained in the Mansfield and District Hospital for the treatment of complicated maternity cases where home conditions are unsuitable, and where the patient is unable to pay for such treatment.



(b) SAMARITAN HOSPITAL FOR WOMEN.—Recommendations are obtained so that in complicated cases the advice of the Consulting Staff of this Hospital may be obtained.

(c) Tubercular cases are referred for treatment to the Tuberculosis Dispensary of the County Council.

(d) Venereal cases are referred for consultation to the County Council's Treatment Centre at West Hill House.

(e) EYE CASES.—These are referred for treatment to Mr. Christie Reid, the Consulting Ophthalmologist to the Education Committee.

(f) CRIPPLED CHILDREN.—The scheme brought forward in 1924 was approved by the Ministry of Health on 8th February, 1925. It provides for the treatment of non-tubercular children from infancy up to 5 years, the general outline of the scheme being :—

(a) THE LOCAL CLINIC.—Attended by a specially qualified Orthopædic Surgeon, with nursing staff working under him, specially trained in orthopædic work.

The clinic is a centre for diagnosis and classification of cases. Splints, plaster cases, &c., are applied. Massage and electrical treatment are given in suitable cases.

(b) HOSPITAL TREATMENT.—Minor operative treatment may be done in the Mansfield and District Hospital or the case may be sent to a special Orthopædic Hospital. During the past year our cases were sent to St. Gerard's Hospital, Coleshill, near Birmingham.

(c) PROVISION OF SPLINTS AND NECESSARY APPLIANCES.—This is often necessary following actual operative treatment, and may



have to be kept up for a fairly long period afterwards in order to secure the best results.

In this close co-operation has been maintained with the Mansfield and District Cripples' Guild, whose specialist surgeon, Mr. Malkin, has kindly advised me as to the means of treatment considered best in each case.

A similar scheme is now provided for school children, and so the work begun in childhood can be supervised and extended if need be after the child ceases to attend the Welfare Clinic.

In all cases where any portion of expenditure is borne by the Maternity and Child Welfare Committee the case must be recommended by the Medical Officer. Each case for operative treatment at Coleshill is sanctioned by the Maternity and Child Welfare Committee.

(g) Demonstrations are given by the Senior Health Visitor on the arts of washing and dressing babies and cot-making. These are given to mothers as well as to Senior Girls attending the Public Elementary Schools in the town.

(h) CARBURTON HOME.—Through the kindly interest of her Grace the Duchess of Portland this Babies' Home is available for the gratuitous treatment of a few of our ailing babies each year. This home is maintained by Her Grace with a view to providing requisite nursing, good food, and additional fresh air and sunshine for tiny babies who find it difficult to struggle against home conditions and the accompanying malnutrition which is often the result of improper feeding rather than scarcity of food.

To such, a visit to this Home has often been the turning point in the direction of health and vigour.



(i) SEWING AND KNITTING CLASSES.—These are held each winter session, and in connection with the classes an exhibition of work done is usually held towards the end of the session.

During the year 1925 these classes were under the direction of Mrs. Cox, Mrs. Gregory, and Mrs. Robinson.

These classes form an excellent method of demonstrating the right methods of clothing children, and are always much appreciated.

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I shall now pass on to deal with some of the Statistics arising out of the work of this Department.

### **Births.**

The following table will shew the uncorrected number of births registered during the year :—

	Males.	Females.	Total.
Residents ... ..	460	469	929
Non-residents ...	18	14	32
Total...	478	483	961

### **Corrected Births.**

The following figures supplied by the Registrar-General represent the above figures corrected by the removal of non-residents and the addition of Mansfield children born outside the Borough :—

Males.	Females.	Total.
466	470	936

### **Notification of Births Act, 1907.**

930 births were notified under this Act. Fourteen cases were un-notified :—

8 attended by Doctors,

6 attended by Midwives,

so that 95 % of all Births were notified.

### **Illegitimate Birth-rate.**

Thirty-two illegitimate births were registered, giving an illegitimate birth-rate of 0·68 per 1,000 population.

### **Still-births.**

Forty-seven cases of still-births were notified, of which 4 were non-residents.

### **Infantile Death-rate.**

The total number of infant deaths during the year was 72, viz., 37 males and 35 females.

Of these infantile deaths 3 were illegitimate.

This gives the following rates :—

General Infantile Mortality-rate, 76·9 per 1,000 children born.

Legitimate Infantile Mortality-rate, 76·3 per 1,000 legitimate births.

Illegitimate Infantile Mortality-rate, 93·7 per 1,000 illegitimate births.



Infantile deaths had the following Ward distribution :—

North Ward (including Pleasley Hill)	...	28
(Of these only 3 occurred in Pleasley Hill.)		
South Ward	... ..	16
East Ward	... ..	28

There is a higher infantile death-rate shewn in the more overcrowded parts of the Borough.

The Infantile Death-rate for England and Wales is this year 75·0. I am sorry to find that our mortality-rate is slightly higher than the general one. However, it shews a decline on last year's figure, and one must continue to hope that we shall soon see a further diminution.

The following table shews comparative Infantile Death-rates for five preceding years :—

Year.	England and Wales.	157 Comparable Towns (Population 20,000 to 50,000).	Mansfield.
1920	80	80	104·6
1921	83	84	78·2
1922	77	75	61·5
1923	69	69	92·9
1924	75	71	82·1
1925	75	74	76·9

### Causes of Infantile Deaths.

Complete detail of these causes will be found in Table IV.

1. PNEUMONIA AND BRONCHITIS.—It is sufficient to note that the largest cause of death was respiratory disease, 12 deaths being due to Bronchitis and 18 to Pneumonia. I am inclined to think that several of these were in their origin due to Measles or Whooping Cough, as both these conditions were prevalent towards the end of the year.

Improper feeding and overcrowding act as predisposing causative factors.

2. PREMATUREITY has again shewn itself as a predisposing factor in causing infantile deaths.

The number of deaths due to convulsions are much lower than usual.

### Attendances at Centres.

The attendances at the afternoon weighing clinics were as follows :—

LEEMING STREET (Total Sessions 102) :—

	Number Attending.	Number of Attendances.
Infants ... ..	677	3592
Expectant Mothers ... ..	21	54
Nursing Mothers ... ..	57	70
Children (1 to 5 years) ... ..	548	1528
	—	—
Totals...	1303	5244
	—	—

PLEASLEY HILL (Total Sessions 47) :—

	Number Attending.	Number of Attendances.
Infants ... ..	97	1617
Expectant Mothers ... ..	19	79
Nursing Mothers ... ..	40	129
Children (1 to 5 years) ... ..	131	1067
	—	—
Totals...	287	2892
	—	—



**Attendances at the Medical Officer's Consultations.**

	Mansfield (59 Sessions).	Pleasley Hill (29 Sessions).
Infants ... ..	345	194
Expectant Mothers ...	35	10
Nursing Mothers ... ..	46	31
Children (1 to 5 years) ...	396	87
	—	—
Total...	822	322
	—	—

These figures are about the same as those of last year, a few shew a slight increase, others a slight diminution.

**Treatment Provided at the Centres.**

	Number Attending.	Number of Attendances.
Infants, Ophthalmic Cases ... ..	56	701
Infants, Other Cases ... ..	124	560
Children (1 to 5 years) Ophthalmic Cases	23	88
Children (1 to 5 years) Other Cases ...	113	826
Expectant Mothers ... ..	1	4
Nursing Mothers ... ..	3	7
	—	—
Totals...	320	2186
	—	—

The total number of attendances made during the year were :—

Cases attending.	Number of attendances.
1,910.	10,322.

### Health Visitors' Visits.

The numbers of visits paid by Health Visitors during the year were :—

Visits to Infants	...	...	...	...	...	...	4393
„ Children (1 to 5 years)	...	...	...	...	...	...	1598
„ Expectant Mothers	...	...	...	...	...	...	154
„ Special (Measles, Whooping-cough, &c.)	...	...	...	...	...	...	103
Investigation of Still-births	...	...	...	...	...	...	43
Investigation of Infant Deaths	...	...	...	...	...	...	70
Visits to Cases of Ophthalmia Neonatorum	...	...	...	...	...	...	33
Miscellaneous	...	...	...	...	...	...	91
Special Nursing Cases	...	...	...	...	...	...	334
							—
						Total...	6,819
							—

### Feeding of Necessitous Mothers.

Mothers attending.	Dinners served to Mothers.	Dinners served to Children.
39.	2,491.	1,526.

Total number of dining sessions held—256.

### Venereal Diseases.

Three suspected cases of congenital syphilis were sent up for the Wasserman test. Two of these were positive and were placed under appropriate treatment.



## Eye Cases.

Twenty cases of squint and refractive error were referred to Dr. A. Christie Reid for examination and necessary treatment.

## Ophthalmia Neonatorum.

Notified.	Treated		Vision Unimpaired	Vision Impaired.	Total Blindness.	Deaths.
	At Home.	Infant Welfare or Hospital.				
7	—	7	7	—	—	—

## Midwives.

There are 12 practising midwives in the Borough ; 11 are certificated and one is registered. These come under the supervision of the Nottinghamshire County Council.

## Deaths in Child-birth.

The number of women dying in child-birth or in direct consequence of child-birth was 5.

Causes :—Sepsis	...	...	...	...	3
Other Causes	...	...	...	...	2

## Maternity Bed.

Six cases were admitted during the year to the bed in the Mansfield and District Hospital retained for the use of complicated cases of pregnancy.

The cost of such treatment amounted to £51 0s. 0d.

### Progress of Welfare Work.

The following table will give a comparative idea of the number of mothers and children availing themselves of the Welfare Centres :—

Year.	Number Attending.	Number of Attendances.
1915 ... ..	262 ...	1,110
1916 ... ..	391 ...	2,801
1917 ... ..	514 ...	4,713
1918 ... ..	859 ...	6,441
1919 ... ..	934 ...	5,263
1920 ... ..	1,330 ...	7,887
1921 ... ..	1,663 ...	11,410
1922 ... ..	1,702 ...	10,498
1923 ... ..	1,873 ...	10,946
1924 ... ..	1,758 ...	10,877
1925 ... ..	1,910 ...	10,322

The critical factor in this table is the number of persons attending, and it is satisfactory to note that this continues to rise.

### Voluntary Committee.

I have made some previous reference to the splendid assistance given in the Welfare Department by outside voluntary helpers.

During the past year these services have again been most generously given, and I feel that the Maternity and Child Welfare Committee are under a great debt of gratitude to these unobtrusive workers for the excellent spirit they infuse into such work. Their efforts have certainly been of incalculable value in popularising our Welfare Centres.



## NOTES ON THE PROGRESS AND IMPROVEMENT OF PUBLIC HEALTH DURING THE LAST FIVE YEARS.

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The details given under the heading of general death-rates and infantile death-rates will show that towards the end of the last 5 years there has been a diminution of both these mortality-rates.

The death-rates from diarrhoeal diseases under two years of age is one of the most valuable indications of sanitary progress and shews a remarkable diminution.

During the period under review all of the public health services have been extended along general lines of progress. For example : The numbers attending the Maternity and Child Welfare Centres have largely increased. Various fresh departments have been opened up in connection with the scheme for treatment of school children, and the schemes for the treatment of Tuberculosis and Venereal Diseases have added to the necessary machinery for dealing with these problems.

The new Meat Regulations have now rendered more effective the machinery for eliminating unhealthy food.

The addition of a refuse screening plant has made it possible to deal with more of the refuse of the Borough by burning. All these conditions are tending to raise the standard of the public health.

### **Future Lines of Development.**

As to the future development of the Public Health Services the lines on which these will be conducted will no doubt provide for extensions of the present schemes, together with municipal schemes for the treatment of such diseases as Cancer, and possibly Influenza and Heart Disease.

Provision of a Public Abbatoir is a matter which will tend to simplify and render more complete the present scheme of Meat Inspection.

A special school on fresh-air lines, where education and health-restoration might proceed hand in hand, is one of those provisions which I hope to see realised at an early date.

Above all, publicity campaigns in regard to the elementary facts of hygiene and prevention of disease should be undertaken.



TABLE I.

Vital Statistics of Whole District during 1925 and previous years.

Year.	Population estimated to middle of each Year.	Births.		Total Deaths Registered in the District.		Nett Deaths belonging to the District.			Rate per 1,000 Nett Births.
		Number Registered.	Nett.	Number.	Rate.	At all Ages.		Under 1 Year of Age.	
						Number.	Rate.		
1919	44,447	981	963	594	13.3	476	10.7	91	94.5
1920	46,219	1303	1291	496	10.7	415	9.0	135	104.6
1921	45,190	1182	1163	578	12.8	490	10.8	91	78.2
1922	45,770	1010	991	525	11.4	416	9.0	61	61.5
1923	46,270	1028	1012	619	13.3	492	10.6	94	92.9
1924	46,760	977	962	594	12.7	461	9.8	78	82.1
1925	47,000	961	936	585	12.4	433	9.2	72	76.9

TABLE II.  
Cases of Infectious Disease notified during the Year 1925.

Notifiable Disease.	Number of Cases Notified.													Total Cases Notified in each Locality.				Total Cases removed to Hospital.
	All Ages.	At Ages - Years.												North Ward including Pleasley Hill	Pleasley Hill	South Ward.	East Ward.	
		Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 & over.					
Small-pox .....	142	..	4	4	18	26	21	28	15	23	3	59	2	26	57	142		
Scarlet fever .....	101	..	2	3	7	8	50	20	5	1	..	54	3	33	14	96		
Diphtheria .....	31	..	..	3	1	10	12	4	..	..	..	8	..	13	10	28		
Enteric fever .....	4	..	..	..	1	..	1	..	..	..	1	4	3	..	..	3		
Erysipelas .....	16	..	..	..	..	..	3	2	4	6	1	7	3	3	6	1		
Puerperal fever .....	3	..	..	..	..	..	..	3	..	..	..	3	1	..	..	2		
Encephalitis .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Lethargica .....	6	..	1	..	..	1	..	1	..	2	..	1	..	1	4	5		
Ophthalmia .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Neonatorum .....	7	7	..	..	..	..	..	..	..	..	..	4	..	2	1	..		
Cerebro-spinal fever..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	1	1		
Pulmonary .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Tuberculosis .....	64	..	1	1	..	7	15	20	10	4	..	21	1	21	22	..		
Other forms of .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Tuberculosis .....	12	3	..	..	2	1	3	3	..	..	..	4	..	5	3	..		
Pneumonia .....	40	1	3	1	3	4	16	..	..	5	..	17	5	9	14	2		
Polio-myelitis .....	1	..	1	..	..	..	..	..	..	..	..	..	..	1	..	1		
Chicken Pox .....	332	16	12	20	35	29	189	24	3	1	..	95	7	80	157	..		
<b>Totals .....</b>	<b>760</b>	<b>27</b>	<b>18</b>	<b>30</b>	<b>49</b>	<b>42</b>	<b>281</b>	<b>94</b>	<b>56</b>	<b>85</b>	<b>4</b>	<b>277</b>	<b>25</b>	<b>194</b>	<b>289</b>	<b>281</b>		



TABLE III.  
Causes of Death: Civilians only.

Cause of Death.								Males.	Females.
ALL CAUSES	...	...	...	...	...	...	...	228	205
1	Enteric Fever	...	...	...	...	...	...	—	—
2	Small-pox	...	...	...	...	...	...	—	—
3	Measles	...	...	...	...	...	...	—	—
4	Scarlet Fever	...	...	...	...	...	...	2	2
5	Whooping-cough	...	...	...	...	...	...	—	—
6	Diphtheria	...	...	...	...	...	...	1	2
7	Influenza	...	...	...	...	...	...	7	7
8	Encephalitis Lethargica	...	...	...	...	...	...	2	—
9	Meningococcal Meningitis	...	...	...	...	...	...	—	—
10	Tuberculosis of Respiratory System	...	...	...	...	...	...	8	5
11	Other Tuberculous Diseases	...	...	...	...	...	...	1	6
12	Cancer, Malignant Disease	...	...	...	...	...	...	19	21
13	Rheumatic Fever	...	...	...	...	...	...	1	1
14	Diabetes	...	...	...	...	...	...	—	2
15	Cerebral Hæmorrhage, &c.	...	...	...	...	...	...	14	15
16	Heart Disease	...	...	...	...	...	...	27	29
17	Arterio-sclerosis	...	...	...	...	...	...	6	1
18	Bronchitis	...	...	...	...	...	...	23	17
19	Pneumonia (all forms)	...	...	...	...	...	...	33	21
20	Other Respiratory Diseases	...	...	...	...	...	...	2	—
21	Ulcer of Stomach or Duodenum	...	...	...	...	...	...	3	—
22	Diarrhœa, &c. (under 2 years)	...	...	...	...	...	...	1	—
23	Appendicitis and Typhlitis	...	...	...	...	...	...	—	1
24	Cirrhosis of Liver	...	...	...	...	...	...	2	1
25	Acute and Chronic Nephritis	...	...	...	...	...	...	6	3
26	Puerperal Sepsis	...	...	...	...	...	...	—	3
27	Other Accidents and Diseases of Pregnancy and Parturition	...	...	...	...	...	...	—	2
28	Congenital Debility & Malformation, Premature Birth	...	...	...	...	...	...	12	16
29	Suicide	...	...	...	...	...	...	2	—
30	Other Deaths from Violence	...	...	...	...	...	...	10	2
31	Other defined Diseases	...	...	...	...	...	...	45	45
32	Causes ill-defined or unknown	...	...	...	...	...	...	1	3
Special Causes (included above)—									
	Poliomyelitis	...	...	...	...	...	...	—	—
	Polioencephalitis	...	...	...	...	...	...	—	—
Deaths of Infants under one year—									
	Total	...	...	...	...	...	...	37	35
	Illegitimate	...	...	...	...	...	...	1	2
Total Births									
	Legitimate	...	...	...	...	...	...	446	458
	Illegitimate	...	...	...	...	...	...	20	12
POPULATION								47,000	

TABLE IV.

## Infant Mortality during the Year 1925.

Nett Deaths from stated causes at various Ages under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1 to 2 Weeks.	2 to 3 Weeks.	3 to 4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 months.	Total Deaths under One Year.
All Causes	20	3	3	2	28	3	10	18	7	66
{ Certified ... ..	3	..	..	..	3	..	3	..	..	6
{ Uncertified ... ..	..	..	..	..	..	..	..	..	..	..
1 Measles ... ..	..	..	..	..	..	..	..	..	..	..
2 Whooping Cough... ..	..	..	..	..	..	..	..	..	..	..
3 Diphtheria... ..	..	..	..	..	..	..	..	..	..	..
4 Influenza ... ..	..	..	..	..	..	..	..	..	1	1
5 Erysipelas ... ..	..	..	..	..	..	..	..	..	..	..
6 Tuberculous Meningitis... ..	..	..	..	..	..	..	..	1	..	1
7 Tuberculosis, Intest ... ..	..	..	..	..	..	..	..	..	..	..
8 Other Tuberculous Diseases ... ..	..	..	..	..	..	..	..	..	1	1
9 Syphilis ... ..	..	..	..	..	..	..	..	..	..	..
10 Rickets ... ..	..	..	..	..	..	..	..	1	..	1
11 Meningitis ( <i>not Tuberculous</i> ) ... ..	..	..	..	..	..	..	..	..	..	..
12 Convulsions ... ..	1	..	..	..	1	..	3	..	..	4
13 Bronchitis ... ..	..	1	1	..	2	..	2	5	3	12
14 Pneumonia (all forms) ... ..	..	..	1	..	1	1	5	10	1	18
15 Other Respiratory Diseases ... ..	..	..	..	..	..	..	..	..	..	..
16 Gastritis ... ..	..	..	..	..	..	..	1	..	..	1
17 Diarrhoea ... ..	..	..	..	..	..	..	..	..	..	..
18 Hernia, Intestinal Obstruction.. ..	..	..	..	..	..	..	..	..	..	..
19 Malformation ... ..	2	..	..	..	2	2	..	..	..	4
20 Debility, Sclerema ... ..	3	..	..	1	4	..	2	1	..	7
21 Icterus ... ..	..	..	..	..	..	..	..	..	..	..
22 Premature Birth ... ..	12	..	1	1	14	..	..	..	..	14
23 Injury at Birth ... ..	2	..	..	..	2	..	..	..	..	2
24 Disease of Umbilicus ... ..	..	1	..	..	1	..	..	..	..	1
25 Atelectasis... ..	2	1	..	..	3	..	..	..	..	3
26 Lack of Care ... ..	1	..	..	..	1	..	..	..	..	1
27 Suffocation, in Bed ... ..	..	..	..	..	..	..	..	..	..	..
28 Other Violence ... ..	..	..	..	..	..	..	..	..	..	..
29 Other Causes... ..	..	..	..	..	..	..	..	..	1	1
Total ...	23	3	3	2	31	3	13	18	7	72



TABLE V.

## Birth-rate, Death-rate and Analysis of Mortality during the Year 1925.

(Provisional figures. Populations estimated to the middle of 1925 have been used for the purpose of this Table).

	Birth-rate per 1,000 Total Population.	ANNUAL DEATH-RATE PER 1,000 POPULATION.									RATE PER 1,000 Births.	
		All Causes.	Enteric Fever.	Small-Pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under 2 Years).	Total Deaths under One Year.
England and Wales ... ..	18.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	75
105 County Boroughs and Great Towns, including London ... ..	18.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	79
157 Smaller Towns (1921 Adjusted Populations 20,000—50,000) ... ..	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	74
London ... ..	18.0	11.7	0.01	0.00	0.08	0.02	0.19	0.11	0.23	0.46	10.6	67
MANSFIELD ... ..	19.9	9.2	0.00	0.00	0.00	0.08	0.00	0.06	0.29	0.29	1.06	76.9





