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Contributors

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COUNTY BOROUGH OF ROTHERHAM.

REPORT

BY THE

MEDICAL OFFICER OF HEALTH,
WILLIAM BARR, M.D., D.Sc., D.P.H.

FOR THE YEAR

1931.

ROTHERHAM :
HENRY GARNETT & Co., LTD., "ADVERTISER" OFFICE,
1932.

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COUNTY BOROUGH OF ROTHERHAM.

HEALTH COMMITTEE

as at December 31st, 1931.

HIS WORSHIP THE MAYOR
(ALDERMAN G. E. CAINE, J.P.)

Chairman :

ALDERMAN F. HARPER.

Vice-Chairman :

COUNCILLOR G. C. BALL.

ALDERMAN	F. A. BARLOW.	COUNCILLOR	W. G. DENHAM.
„	W. WORMALD, O.B.E., J.P.	„	W. FOWLER.
COUNCILLOR	C. R. ADAMS.	„	MRS. F. L. GREEN.
„	G. A. BARKER.	„	H. GUEST.
„	W. BROOKE, J.P.	„	W. MANN.
„	DR. J. CLARKE.	„	H. NORTH.

SUB-COMMITTEES:

HOSPITALS SUB-COMMITTEE.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

MENTAL DEFICIENCY SUB-COMMITTEE.

JOINT COMMITTEES:

SHEFFIELD, ROTHERHAM, AND DISTRICT, SMOKE ABATEMENT
COMMITTEE.

SOUTH WEST YORKSHIRE JOINT BOARD FOR THE MENTALLY
DEFICIENT.

HEALTH OFFICERS OF THE LOCAL AUTHORITY.

These are as under :—

PUBLIC HEALTH DEPARTMENT (Under Public Health Committee).

WILLIAM BARR, M.D., D.Sc., D.P.H.	Medical Officer of Health.
E. ASHWORTH UNDERWOOD, M.A., B.Sc., M.B., D.P.H. (to 31.12.31).	Deputy Medical Officer of Health, Tuberculosis Officer, and Sanatorium Medical Officer.
LANCELOT H. COPPING, M.B., Ch.B.	Assistant Medical Officer of Health, Venereal Diseases Medical Officer, and Maternity and Child Welfare Medical Officer.
ALEXANDER T. DOIG, M.B., Ch.B., D.P.H. (from 22.7.31).	Assistant Medical Officer, Oakwood Hall Sanatorium.
ALICE WHITE, M.B., Ch.B. * (from 28.4.31 to 18.9.31).	Assistant Medical Officer, Maternity and Child Welfare (part time).
MARY D. A. BOYD, M.B., Ch.B. (from 8.10.31).	Do.
JOHN CHISHOLM, F.R.C.S., Ed., M.B., Ch.B.	Obstetric Consultant (part-time, as required).
G. GREEN, M.R.C.V.S.	Veterinary Inspector (part time).
J. EVANS, F.I.C., F.C.S.	Analyst. By fees.
MR. J. E. FULLER (1), (2), (6), (8), (9).	Senior Sanitary Inspector.
MR. W. PEARCE (1), (2), (8), (9).	Assistant Senior Sanitary Inspector.
MR. T. W. PEARCE (1), (2), (8), (9).	District Sanitary Inspector.
MR. W. HORTON (1), (2).	District Sanitary Inspector.
MR. G. C. HARRISON (1).	District Sanitary Inspector.
MR. E. OWEN (1), (9) (to 27.9.31).	District Sanitary Inspector.
MR. L. F. LIGHTFOOT (1) (from 2.11.31).	District Sanitary Inspector.
MR. J. H. HOARE (3).	Smoke Inspector (by arrangement with the Shef- field, Rotherham, and District, Smoke Abatement Committee).
MR. G. E. WESTBY (1), (8).	Chief Clerk.
MISS J. BARRACLOUGH (1), (10).	Senior Health Visitor.
MISS E. G. CRESSWELL (10), (11), (13).	Health Visitor.
MISS M. M. RIGBY (1), (10).	Health Visitor and Inspector of Midwives.
MISS M. F. SENIOR (10), (11), (14).	Health Visitor and Nurse, Venereal Clinic.
MISS M. WATTERSON (4), (7), (10). (to 21.2.31).	Health Visitor and Mental Deficiency Visitor.
MISS E. HEYES (10) (from 20.4.31).	Health Visitor and Mental Deficiency Visitor.
MISS E. M. SLANEY (10), (11).	Health Visitor.
MISS A. E. SCRUTON (11), (12).	Nurse, Tuberculosis Dispensary.
MISS C. BARRACLOUGH (10), (11), (13), (15).	Matron, Isolation Hospital.
MISS A. SMEETON (11), (12).	Matron, Oakwood Hall Sanatorium.
MRS. EYRE.	Certificated Teacher, Oakwood Hall Sanatorium.
MISS A. E. BUFFHAM (10), (11).	Matron, Ferham House Maternity Home.
MR. R. LEEMAN.	Disinfecter.
MR. F. JESSOP.	Venereal Diseases Orderly.
Detective Inspector F. SHORE.	Inspector of Common Lodging Houses (part time)
MISS N. BROOKES.	Visitor of Blind Persons.
Public Health Department.	Four Clerks.
Maternity and Child Welfare Section.	Two Clerks.

Qualifications.

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Do. do. (Meat and other Foods).
- (3) Do. do. (Smoke Inspector).
- (4) Do. do. (Health Visitor).
- (5) Health Visitors Exam. under Ministry of Health Regulations.
- (6) Certificate, San. Insp. Assoc. Exam. Bd. (Sanitary Inspector).
- (7) Diploma, Board of Education, Health Visitors.
- (8) Certificate, Board of Education, Building Construction.
- (9) Certificate, City and Guilds Institute, Plumbing.
- (10) Certificate, Central Midwives Board.
- (11) General Trained Nurse.
- (12) Certificate, Tuberculosis Association.
- (13) Fever Trained Nurse.
- (14) Certificate, Gynæcological Training.
- (15) Housekeeping and Laundry Diploma.

PUBLIC VACCINATION.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.	Public Vaccinator.
C. B. THOMSON, M.B., Ch.B.	Public Vaccinator, North-West Rotherham.
H. R. ELLIOTT, M.R.C.S., L.R.C.P.	Public Vaccinator, South-East Rotherham.
MR. T. J. VOSS.	Vaccination Officer, North-West Rotherham.
MR. F. S. BUTCHER.	Vaccination Officer, South-East Rotherham.

SCHOOL MEDICAL DEPARTMENT (under Education Authority).

A. C. TURNER, M.D., D.P.H.	School Medical Officer.
ELSA PAIGE, M.B., Ch.B.	Assistant School Medical Officer (part-time).
M. RACHAEL POWELL, M.B., Ch.B.	Assistant School Medical Officer (part-time).
H. CECIL SNELL, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P.	Ophthalmic Surgeon (part-time).
H. L. CROCKETT, M.B., Ch.B.	Orthopaedic Surgeon (part-time).
H. R. HEALD, L.D.S., R.C.S.Eng.	Dental Surgeon.
MISS H. WHEATCROFT.	School Nurse.
MISS C. CROFTON.	School Nurse.
MISS G. CAVE.	School Nurse.
MISS K. RAY	School Nurse.
MISS N. SELLORS (from January, 1931).	School Nurse.
MISS A. C. HAMPTON.	Orthopaedic Nurse and Masseuse.
School Medical Department.	Four Clerks.

PUBLIC ASSISTANCE MEDICAL DEPARTMENT (under Public Assistance Committee).

T. V. GRIFFITH, M.B., Ch.B., B.A.O.	Superintendent Medical Officer, Alma Road Hospital.
P. A. MOORE, M.B., Ch.B.	Assistant Medical Officer, Alma Road Hospital.
C. B. THOMSON, M.B., Ch.B.	District Medical Officer, North-West Rotherham.
W. CRERAR, M.B., Ch.B.	District Medical Officer, South-East Rotherham.
H. M. MILLS, M.B., Ch.B. (from 1.9.31).	District Medical Officer, Thorpe and Scholes.
MISS E. C. DAVIES.	Superintendent Nurse, Alma Road Hospital.
MISS HELEN BUTLER.	Boarded-out Visitor and Assistant Relieving Officer.

Public Health Department,
Town Hall,
Rotherham.

TO THE CHAIRMAN—ALDERMAN F. HARPER—AND MEMBERS OF THE
PUBLIC HEALTH COMMITTEE.

In presenting to your notice the annual report on the public health circumstances of the County Borough for the year 1931, the following notes, concerning items referred to at greater length in the text, are given to show in the main the developments during the year under review and wherein the service is in need of further extension.

MILK SUPERVISION.—The examination of milk supplies for bacillus coli as an indicator of faulty methods of production, etc., combined with the close supervision of the dairy herds and dairy processes has had a very striking result. Of milk produced in the Borough 79 per cent. has reached "grade A" standard—the absence of B. coli in 0.01 c.c.

ASHPITS AND PRIVIES.—With concerted work on these during the year gratifying results have been obtained by the removal of 220 fixed dry ashpits, which served 556 houses.

There now remain only 24 privies within the drainage area.

NEW CLINICS.—Several new clinics were established, namely, 2 medical sessions for child welfare in place of 2 non-medical sessions; 1 district ante natal clinic for midwives and district cases; a light clinic with 3 sessions weekly. Other clinics unconnected with the Health Department, but which are notable, are the ante natal clinic, the mental treatment clinic, and the out-patient clinic at Alma Road Hospital, and the several specialised clinics held in the new out-patients' department of the General Hospital.

NEW INSTITUTIONS.—The Yorkshire Convalescent Home for Mothers and Babies at Witherhsea was open from April till October. It will be remembered that the Corporation furnished the "Rotherham" room with two beds, and these were fully utilised during that time by convalescent maternity patients from the Borough.

St. Catherine's Certified Institution for Mental Defectives at Doncaster became available for its Borough quota of patients in October, and three cases were admitted. The problem of mental deficiency in our midst is one which, unfortunately, is only visualised very hazily, and this important step marks distinct progress.

SUN RAY APPARATUS AT OAKWOOD HALL SANATORIUM.—Through the generous gift of Mr. John P. Ridsdale, in memory of his fiancée, Miss Sybil Jeffs, who died in the sanatorium, a Jessioneck Lamp and a Kromayer Lamp were installed during the year. This apparatus will provide additional and valuable treatment for certain selected cases.

ISOLATION HOSPITAL.—Accommodation for infectious diseases is now inadequate. The present buildings provide for less than 1 bed per 1,000 population and structurally give no facility for admitting a variety of cases. With the increasing population and the growing necessity to treat such diseases as measles, pneumonia, whooping cough, encephalitis, poliomyelitis, etc., extension by the cubicle system should be considered at an early date.

DENTAL TREATMENT.—The necessity of providing dental treatment to patients suffering from tuberculosis has been pointed out in several reports. To treat cases in the sanatorium whose resistance is being constantly undermined by oral sepsis is a negation of modern therapeutics.

The dental treatment of women during the ante-natal period is, in the same way, vitally necessary. It is now generally recognised there is a very close connection between puerperal sepsis and oral sepsis, and in dental treatment there is another strong weapon in the overcoming of maternal mortality which should not be ignored.

CHILD WELFARE.—Reference has been made in previous reports to the growth of child welfare work in the borough, and to the necessity for adding facilities to cope with the increasing duties. During the year 2 medical sessions were commenced in the place of 2 non-medical sessions, making 4 medical sessions in all, and already one has to report such an increment of mothers and children attending the clinics that it is only possible to give fractional advice. Three morning sessions are now devoted weekly to children in need of sun ray treatment, and at each of the two centres there is held each morning a minor dressing session. The district ante-natal clinic, held once weekly, is another addition during the year. The multiplication of clinics, while good in itself, is having a very adverse effect on the specific work of health visiting, for this must of necessity be at a standstill when the health visitor is engaged on sessional clinic work.

The problem to be met, therefore, can be divided into two parts :—

(1) Overcrowding of child welfare sessions making the giving of advice border on the absurd.

(2) Curtailment of district health visiting by utilising staff trained in this work for duties which are those of an out-patient nurse.

The former can only be met (a) by increasing child welfare sessions, or (b) curtailing the frequency of attendances of children.

With regard to the latter, the ailments requiring minor treatment are similar in children under 5 to those affecting children of school age, and could be treated at the school clinics by the nurses in charge. Cases requiring more detailed treatment could be referred to the out-patient department of the Alma Road Hospital, or if operative treatment or skilled medical care were needed to the wards. The facilities for thorough and effective care are available if only they were definitely correlated.

STAFF.—Three changes have to be recorded for the year. Miss M. Watterson, Health Visitor, left in February to take up an appointment in Warwickshire; Mr. E. Owen, Sanitary Inspector, left in September for a position at Preston; and Dr. E. A. Underwood, on the last day of the year, left for his important post at Leeds.

While change of personnel is unavoidable yet remediable in its purely physical sense, the effect of discontinuity in a service deeply concerned with human contacts is more far reaching. Time and patience alone can bridge over the initial gap separating the official from the intimate personal relationship required for effective work.

WILLIAM BARR,

Medical Officer of Health.

SECTION I.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

GENERAL STATISTICS.

Area (in acres)	5,893
Population (census), 1921	68,045
Population (estimated), 1931	70,130
Number of inhabited houses, 1921	13,593
Number of families or separate occupiers, 1921	14,695
Rateable value	£320,569
Sum represented by a penny rate	£1,235

CENSUS, 1931.

The preliminary report of the Census taken on the night of Sunday, 26th April, 1931, in so far as it relates to the County Borough of Rotherham, shows an increase of 1,667 persons over the figures of the last Census.

The enumerated populations were:—

	Males.		Females.		Total.
1931	35,134	...	34,555	...	69,689
1921	34,566	...	33,456	...	68,022
	<hr/>		<hr/>		<hr/>
Increase	568	...	1,099	...	1,667
	<hr/>		<hr/>		<hr/>

As a result of the small increase during the past intercensal period, the inference to be drawn is one of decentralisation of people from the town. The natural increase (births minus deaths) of the population of the County Borough during this period was 7,460. Thus emigration from the town amounts to 5,793 persons. The Registrar-General's preliminary report draws attention to the southward trend of the population and also to the fact that, throughout the country, the widespread building activity, with organised town planning and the more generous scale of housing, has caused an overflowing of borough boundaries. This has obtained in Rotherham. The improvement in the Borough's transport services has facilitated this decentralisation of the population. Listerdale has been developed, and the whole length of the Wickersley Road, together with a good length of the Bawtry Road, are now lined with new houses. Thus, just outside the Borough boundaries can be found the overflowing referred to.

Another interesting point arising out of the Census figures shows that whereas throughout the country generally the preponderance of females over males is in the ratio of 1,087 females to 1,000 males, Rotherham as at the last Census still retains a slight majority of male population.

VITAL STATISTICS.

In the following summary extracts from the vital statistics for the year are given :—

			Total.	Male.	Female.		
Births	{	Legitimate ...	1227	634	593	}	Birth rate ... 18.18
		Illegitimate ...	48	24	24		
Deaths	...	...	844	449	395		Death rate ... 12.03
Number of women dying in, or in consequence of, childbirth						{	from sepsis —
							from other causes 3

Deaths of infants under one year of age, rate per 1,000 births :

	Legitimate, 91.	Illegitimate, 104.	Total, 92
Deaths from measles (all ages)	2
Deaths from whooping cough (all ages)	7
Deaths from diarrhoea (under 2 years of age)	8

In the tables which follow are given the detailed vital statistics of the County Borough.

Other tables of a more specific nature are incorporated in the later sections of this report dealing with infectious diseases generally, tuberculosis, venereal diseases, maternity and child welfare, mental deficiency, and blind persons.

In the following table the causes of death at different periods of life, as supplied by the Registrar General, are given for the year 1931. The inclusion of this is considered desirable by the Ministry of Health for the purpose of comparison with the figures for other areas, and relates to deaths **registered** in the calendar year, which totalled 849.

The remainder of the figures relating to deaths in other tables of this report are those of the actual deaths which **occurred** during the year, totalling 844, and have been compiled locally.

TABLE SHOWING AGES AND CAUSES OF DEATH FOR THE YEAR, 1931

CAUSES OF DEATH				Sex	All ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
ALL CAUSES	...	...	...	M.	449	66	18	11	17	16	29	28	46	66	81	71
				F.	400	53	9	11	26	24	18	26	35	55	71	72
1 Enteric fever	...	...	...	M.	1	-	-	-	-	-	-	-	1	-	-	-
				F.	-	-	-	-	-	-	-	-	-	-	-	-
2 Measles	...	...	...	M.	-	-	-	-	-	-	-	-	-	-	-	-
				F.	2	-	2	-	-	-	-	-	-	-	-	-
3 Scarlet fever	...	...	...	M.	-	-	-	-	-	-	-	-	-	-	-	-
				F.	-	-	-	-	-	-	-	-	-	-	-	-
4 Whooping cough	...	...	...	M.	4	1	3	-	-	-	-	-	-	-	-	-
				F.	3	2	1	-	-	-	-	-	-	-	-	-
5 Diphtheria	...	...	...	M.	3	1	-	2	-	-	-	-	-	-	-	-
				F.	3	-	-	1	2	-	-	-	-	-	-	-
6 Influenza	...	...	...	M.	7	-	-	1	-	-	1	-	2	2	1	-
				F.	3	1	-	-	-	-	1	-	-	-	1	-
7 Encephalitis lethargica	...	...	...	M.	-	-	-	-	-	-	-	-	-	-	-	-
				F.	1	-	-	-	-	-	-	-	-	1	-	-
8 Meningococcal meningitis	...	...	...	M.	20	-	1	4	4	4	4	1	1	-	-	1
				F.	24	2	1	1	10	5	3	-	1	1	-	-
9 Tuberculosis of respiratory system	...	...	...	M.	27	-	-	-	1	4	6	7	8	1	-	-
				F.	16	-	-	-	1	7	2	1	1	3	1	-
10 Other tuberculous diseases	...	...	...	M.	7	-	2	-	1	2	1	-	-	-	1	-
				F.	10	-	2	-	3	1	2	-	2	-	-	-
11 Syphilis	...	...	...	M.	2	1	-	-	-	-	-	-	-	-	1	-
				F.	1	-	-	-	1	-	-	-	-	-	-	-
12 General paralysis of the insane, tabes dorsalis	...	...	...	M.	2	-	-	-	-	-	-	1	1	-	-	-
				F.	-	-	-	-	-	-	-	-	-	-	-	-
13 Cancer, malignant disease	...	...	...	M.	45	-	-	-	1	-	3	1	7	15	13	2
				F.	42	-	-	-	-	1	-	6	7	13	10	5
14 Diabetes	...	...	...	M.	4	-	-	-	-	-	1	1	-	1	1	-
				F.	9	-	-	-	-	1	1	1	2	1	2	1
15 Cerebral haemorrhage	...	...	...	M.	29	-	-	-	-	-	-	-	1	8	11	9
				F.	19	-	-	-	-	-	-	-	1	3	3	12
16 Heart disease	...	...	...	M.	63	-	-	-	1	1	1	1	6	14	22	17
				F.	75	-	-	-	1	-	4	3	7	14	25	21
17 Aneurysm	...	...	...	M.	-	-	-	-	-	-	-	-	-	-	-	-
				F.	1	-	-	-	-	-	-	-	1	-	-	-
18 Other circulatory diseases	...	...	...	M.	14	-	-	-	-	-	1	-	3	1	5	4
				F.	18	-	-	-	-	-	-	1	2	3	7	5
19 Bronchitis	...	...	...	M.	27	6	1	-	-	-	-	1	-	5	4	10
				F.	24	4	-	-	-	-	1	-	1	3	8	7
20 Pneumonia (all forms)	...	...	...	M.	50	25	6	1	1	-	1	5	3	2	3	3
				F.	34	8	1	6	2	1	1	1	1	4	5	4
21 Other respiratory diseases	...	...	...	M.	7	1	-	-	-	-	1	2	-	-	2	1
				F.	5	-	-	-	-	-	1	-	-	1	1	2
22 Peptic ulcer	...	...	...	M.	9	-	-	-	-	1	-	2	4	1	1	-
				F.	2	-	-	-	-	-	-	-	1	1	-	-

In the following table the vital statistics of the Borough in relation to the months of the year are given:—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total 1931
Infant—No. of wet days	18	19	6	17	17	18	20	14	10	9	18	13	179
Inches of rain	1.78	2.04	0.19	2.91	2.50	4.60	3.74	3.94	2.14	0.63	2.87	0.72	28.06
Maximum daily fall—day ...	23rd	6th	1st	2nd	26th	5th	12th	7th	3rd	29th	18th	5th	—
Maximum daily fall—inches	0.47	0.31	0.09	0.63	0.49	1.02	0.67	0.89	0.99	0.15	0.53	0.22	—
B'ths— Legitimate	125	96	108	103	89	116	98	104	103	92	95	98	1227
Illegitimate	7	1	2	5	7	3	3	6	5	2	6	1	48
Total	132	97	110	108	96	119	101	110	108	94	101	99	1275
Birth rate	22.59	16.60	18.82	18.48	16.43	20.36	17.28	18.82	18.48	16.08	17.28	16.94	18.18
B'ths— Gross	120	107	124	97	79	63	69	62	66	68	74	92	1021
Outward transfers	24	21	26	21	16	14	19	16	11	19	15	25	227
Inward transfers	5	4	8	6	2	2	3	4	6	2	3	5	50
Nett	101	90	106	82	65	51	53	50	61	51	62	72	844
Death rate	17.28	15.40	18.13	14.03	11.13	8.73	9.07	8.56	10.43	8.73	10.61	12.32	12.03
Infant deaths under 1 year of age	18	16	14	9	10	5	11	4	13	5	5	7	117
Infant mortality rate per 1000 b'ths	136	165	127	82	104	42	109	36	120	53	50	71	92
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	21	17	11	22	14	20	8	37	8	10	8	12	188
Scarlet fever	11	7	6	5	12	13	8	11	12	12	10	12	119
Typhoid and paratyphoid fevers	—	—	—	—	—	—	—	—	—	—	4	3	7
Erysipelas	7	1	1	3	2	6	4	—	3	—	3	3	33
Pneumonia	32	23	34	14	12	7	3	3	11	8	7	18	172
Chicken-pox	94	28	68	32	12	9	17	10	10	14	15	16	325
Encephalitis lethargica	—	1	—	—	—	1	—	—	—	—	—	—	2
Cerebro-spinal fever	2	5	7	14	11	5	2	2	—	2	—	2	52
Acute polio-myelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	1	1
Measles	5	5	2	5	9	6	5	8	13	27	110	190	385
German measles	—	—	—	—	—	2	1	—	1	2	—	1	7
Puerperal fever	—	—	1	—	—	—	—	—	—	—	—	3	4
Puerperal pyrexia	—	—	1	1	—	1	1	2	3	2	1	1	13
Ophthalmia neonatorum	1	—	—	—	—	—	1	1	—	—	—	4	7
Pemphigus neonatorum	—	—	2	—	—	—	—	—	—	—	—	—	2
Pulmonary tuberculosis— Males	3	5	6	4	4	4	5	4	1	4	5	5	50
Females	3	3	3	5	7	8	7	5	4	3	2	3	53
Other forms of tub'culosis— Males	4	3	1	3	3	2	2	1	2	—	3	1	25
Females	3	4	3	1	—	—	—	—	1	2	—	—	14
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	1	—	—	—	—	—	—	—	—	—	1	2
Scarlet fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping cough	1	1	—	1	1	—	—	—	1	—	1	1	7
Diphtheria	—	—	—	1	2	—	—	—	—	—	—	3	6
Typhoid fever	—	—	—	—	—	—	—	—	—	—	—	1	1
Erysipelas	—	—	—	1	—	—	—	—	—	—	—	—	1
Influenza	1	2	4	—	—	1	—	1	—	—	1	—	10
Diarrhoea & enteritis (under 2 yrs)	—	—	—	2	—	—	—	—	2	—	1	1	8
Tuberculosis— respiratory ...	6	5	4	2	1	—	2	6	3	6	4	3	42
„ other forms	3	2	1	5	—	1	—	2	—	—	—	3	17
Bronchitis	10	11	12	6	3	2	3	2	1	1	3	3	57
Pneumonia	17	13	17	7	6	2	4	6	4	2	3	8	89
Malignant disease	9	9	18	5	5	2	1	9	7	3	9	7	84
Diseases of the heart	18	13	16	14	8	10	5	6	9	6	11	12	128
Nephritis and Bright's disease ...	2	5	3	3	1	1	2	—	2	1	2	1	23

In the subsequent table the vital statistics of the Borough in relation to the various wards are shown :—

	East Ward	St. Ann's Ward	Clifton Ward	South Ward	West Ward	North Ward	Thorn-hill Ward	Mas-bro' Ward	Kimber-worth Ward	Total 1931
Estimated population	11830	8335	9482	5631	4861	7453	6836	7094	8608	70130
Number of houses	2857	2013	2290	1360	1174	1800	1651	1713	2079	16937
Acreage	742.016	121.500	519.228	430.500	563.000	300.000	197.300	411.300	2878.961	5893.305
Density of houses per acre	3.85	16.57	4.41	3.16	2.09	6.00	8.37	4.17	0.72	2.88
Density of population per acre	15.94	68.61	18.26	13.08	8.63	24.85	34.64	17.25	2.98	11.91
Births— Legitimate	200	139	162	51	96	129	159	148	143	1227
Illegitimate	6	4	3	1	4	10	7	9	4	48
Total	206	143	165	52	100	139	166	157	147	1275
Birth rate	17.42	17.16	17.40	9.23	20.57	18.65	24.29	22.14	17.08	18.18
Deaths— Gross	98	128	140	73	219	97	91	97	78	1021
Outward transfers	2	3	62	2	154	1	—	1	2	227
Inward transfers	6	4	3	4	3	5	8	6	11	50
Nett	102	129	81	75	68	101	99	102	87	844
Death rate	8.62	15.47	8.54	13.32	13.99	13.55	14.48	14.38	10.10	12.03
Nett deaths under 1 year of age	17	17	11	9	11	15	11	13	13	117
Infantile mortality rate per 1000 births	82	119	67	173	110	108	66	83	88	92
CASES OF INFECTIOUS DISEASE REPORTED	Small-pox	—	—	—	—	—	—	—	—	—
	Diphtheria	38	20	16	5	18	10	38	27	16
	Scarlet fever	22	16	11	9	6	17	9	17	12
	Typhoid and paratyphoid fevers	—	—	—	—	3	—	—	1	3
	Erysipelas	3	7	3	2	3	6	3	2	4
	Pneumonia	31	19	27	15	19	25	14	14	8
	Chicken-pox	117	24	43	14	11	20	21	57	18
	Encephalitis lethargica	1	—	1	—	—	—	—	—	—
	Cerebro-spinal fever	8	7	7	2	4	5	7	10	2
	Acute polio-myelitis... ..	—	—	—	—	—	—	—	—	—
	Malaria	—	—	—	—	—	—	1	—	—
	Measles	142	49	108	12	11	16	16	18	13
	German measles	1	—	1	2	—	1	—	—	2
	Puerperal fever	1	1	—	—	—	—	—	1	1
	Puerperal pyrexia	2	1	—	—	1	6	—	—	3
	Ophthalmia neonatorum	—	2	—	1	1	1	1	—	1
	Pemphigus neonatorum	—	—	—	—	1	—	—	1	—
	Pulmonary tuberculosis— Males	11	7	2	3	7	3	6	9	2
	Females	6	15	9	1	8	5	5	3	1
Other forms of tuberculosis— Males	4	2	2	1	2	5	2	3	4	
Females	2	2	1	1	—	3	1	2	2	
DEATHS	Small-pox	—	—	—	—	—	—	—	—	—
	Measles	—	1	—	—	—	1	—	—	2
	Scarlet fever	—	—	—	—	—	—	—	—	—
	Whooping cough	1	4	—	1	—	—	1	—	7
	Diphtheria	1	—	2	—	1	—	1	—	6
	Typhoid fever	—	—	—	—	—	—	—	1	1
	Erysipelas	1	—	—	—	—	—	—	—	1
	Influenza	3	1	1	—	—	—	1	1	3
	Diarrhœa and enteritis (under 2 yrs)	1	1	—	—	2	2	—	2	—
	Tuberculosis—respiratory	2	9	1	3	5	5	6	7	4
	other forms	1	3	—	2	1	3	2	3	2
	Bronchitis	5	5	7	6	5	10	5	7	7
	Pneumonia	9	21	14	5	8	9	8	10	5
	Malignant disease	3	6	11	9	6	14	15	12	8
Diseases of the heart	23	25	8	12	12	15	7	11	15	
Nephritis and Bright's disease	4	7	4	3	1	1	—	3	—	

The following table shows the birth-rate, death-rate, and analysis of mortality, during the year 1931, compared with England and Wales as a whole and various other areas.

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

	RATE PER 1,000 POPULATION.		ANNUAL DEATH-RATE PER 1,000 POPULATION.										RATE PER 1,000 BIRTHS.		PERCENTAGE OF TOTAL DEATHS.			
	Live births.	Still births.	All causes.	Enteric fever.	Small-pox.	Measles.	Scarlet fever.	Whooping cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and enteritis under two years.	Total deaths under one year.	Certified by registered medical practitioners.	Inquest cases.	Certified by Coroner after P.M.	No inquest.	Uncertified causes of death.
England and Wales...	15.8	0.67	12.3	0.01	0.00	0.08	0.01	0.06	0.07	0.36	0.54	6.0	66	91.18	6.17	1.70	0.95	
107 County Boroughs and Great Towns, including London.	16.0	0.67	12.3	0.00	0.00	0.10	0.01	0.07	0.08	0.33	0.48	8.4	71	91.43	5.84	2.24	0.49	
159 Smaller Towns (1921 adjusted populations 20,000-50,000).	15.6	0.73	11.3	0.00	0.00	0.07	0.01	0.05	0.05	0.36	0.43	4.0	62	92.17	5.49	1.25	1.09	
London ...	15.0	0.50	12.4	0.01	0.00	0.03	0.02	0.07	0.06	0.26	0.57	9.7	65	89.52	6.23	4.24	0.01	
Rotherham ...	18.2	0.80	12.0	0.01	0.00	0.03	0.00	0.10	0.08	0.14	0.51	6.3	92	93.60	3.80	1.89	0.71	

Puerperal sepsis Others Total

The maternal mortality rates for England and Wales are as follow : { per 1,000 live births ... 1.66 2.45 4.11

The maternal mortality rates for Rotherham are as follow : { " total births ... 1.59 2.35 3.95

{ " live births ... 2.35 2.35

{ " total births ... 2.25 2.25

The birth-rate, death-rate, and analysis of mortality during the years 1927-1931 for Rotherham alone are summarised herewith :—

YEAR.	RATE PER 1,000 POPULATION.										RATE PER 1,000 BIRTHS.				
	Birth rate.	Death rate.	Small-pox.	Enteric fever.	Diphtheria.	Scarlet fever.	Measles.	Whooping cough.	Pulmonary tuberculosis.	Other forms of tuberculosis.	Diarrhoea and enteritis under two years.	Total deaths under one year.	Deaths under one week.	Deaths under one month.	Maternal deaths.
1927 ...	20.76	13.46	—	0.01	0.24	0.01	0.23	0.37	0.94	0.21	5.5	90	19	36	2.7
1928 ...	19.05	10.58	0.01	—	0.08	0.04	0.03	0.01	0.81	0.20	13.3	71	13	30	4.5
1929 ...	20.01	12.13	—	—	0.01	—	—	0.13	0.65	0.16	9.2	83	27	41	8.3
1930 ...	18.72	10.50	—	—	0.14	0.06	0.27	0.01	0.69	0.13	6.0	74	22	39	3.8
1931 ...	18.18	12.03	—	0.01	0.08	—	0.03	0.10	0.60	0.23	6.3	92	26	43	2.3
Average ...	19.34	11.74	0.002	0.004	0.11	0.02	0.11	0.12	0.74	0.19	8.1	82	22	38	4.4

SECTION II.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

PROFESSIONAL NURSING IN THE HOME.

There is no scheme provided by the Local Authority for professional nursing in the home of either (a) general cases or (b) infectious cases.

A grant, however, of £50 a year is made by the Corporation to the Rotherham District Nursing Association. Advice of a general or special nature is also available in the case of certain infectious diseases, such as measles or pneumonia, in the course of the routine visits of the health visitors.

MIDWIVES.

There are twenty midwives, to whom no subsidy is granted, in practice in the County Borough.

Two midwives, who, by the approval of the Central Midwives Board, undertake the training of pupils from the Municipal Maternity Home and the Alma Road Hospital, are paid by the Local Authority at the rate of 7/6 per case.

NATIONAL HEALTH INSURANCE.

Apart from the fact that Insurance medical practitioners are required, under their terms of service, to furnish certain reports to the Tuberculosis Officer in connection with the treatment of tuberculosis, and, further, that the Borough Council appoint one-fifth of the members of the Insurance Committee, there are no other points in which the work of the Local Authority is administered in co-operation with the National Health Insurance service.

LABORATORY FACILITIES.

Laboratory arrangements for the examination of clinical materials are provided by the Corporation at the laboratory attached to the Public Health Department, Town Hall, Rotherham, and the work is performed by the Medical Officer of Health and his assistants.

Particulars of the examinations during the year 1931 are given in Section VI. of this report.

Bacteriological work of a more detailed character, such as biological tests, virulence tests, Wassermann re-actions, blood cultures, etc., are sent to Sheffield University.

Chemical investigations are carried out by the Public Analyst on behalf of the Local Authority, the Senior Sanitary Inspector and the Assistant Senior Sanitary Inspector being the authorised inspectors under the Acts.

In Section V. of this report details are given of samples taken, summonses issued, convictions obtained, and the amounts of the penalties received.

LEGISLATION IN FORCE.

The local Acts, general adoptive Acts, special local Regulations, and Bye-laws relating to the public health, in force in the area, are as follow:—

LOCAL ACTS.

The First Public Health Supplement Act, 1852.
 Rotherham and Kimberworth Local Board of Health Act, 1863.
 Rotherham and Kimberworth Local Board of Health Act, 1870.
 Rotherham Borough Extension and Sewerage Act, 1879.
 Rotherham Corporation Act, 1904.
 Rotherham Corporation Act, 1911.
 Rotherham Corporation Act, 1915.
 Rotherham Corporation Act, 1921.
 Rotherham Corporation Act, 1924.
 Rotherham Corporation Act, 1928.
 Rotherham Corporation Act, 1930.

GENERAL ADOPTIVE ACTS.

The Infectious Diseases (Prevention) Act, 1890.
 The Public Health Acts (Amendment) Act, 1890, Parts 1, 2, 3, and 5.
 The Notification of Births Act, 1907.

Sections of the Public Health Acts (Amendment) Act, 1907 in force as follow:—

- Part 2. (Streets and Buildings) Sections 16, 19, 22, 23, 24, 25, 32, and 33.
- Part 3. (Sanitary Provisions) Sections 34, 36, 43, 48, 50, and 51.
- Part 4. (Infectious Diseases) Sections 52, 55, 56, 63, and 64.
- Part 5. (Common Lodging Houses) Sections 69, 70, 71, 72, 73, 74, and 75.
- Part 7. (Police) Section 78 (Regulations as to Street Traffic) Sections 79, 80, 85, and 86.
- Part 8. (Fire Brigade) Sections 87, 88, 89, and 90.
- Part 10. (Miscellaneous) Section 93.

Public Health Act, 1925, Sections 14, 15, 16, 20, 21, 24, 26, 30, 35, 37, 45, 51, and 55.

SPECIAL LOCAL REGULATIONS.

Measles and German Measles, 1920.

BYE-LAWS.

Nuisances, the Keeping of Animals, and the Cleansing of Footways and Pavements, 1893.
 Slaughterhouses, 1893.
 Common Lodging Houses, 1893.
 Locomotives on Highways, 1901.
 Houses Let in Lodgings, 1920.
 Offensive Trades, 1922.
 Pleasure Fairs, 1922.
 Tents, Vans, Sheds, and similar structures used for human habitation, 1923.
 New Streets and Buildings, 1925.
 Drainage of Existing Buildings, 1926.
 Nursing Homes, 1928.

No new local legislation was put into force during the year 1931.

HOSPITALS.

In the following summary are briefly set out the hospital services, public and voluntary, within or without the area, which are used by the inhabitants of the County Borough of Rotherham.

Name.	Situation.	Purpose.	Beds.	Proportion, Rotherham.	Management.
Oakwood Hall Sanatorium	Rotherham	Tuberculosis	100	70 beds Rotherham 30 beds West Riding	Rotherham Corporation
Isolation Hospital	Rotherham	Infectious diseases	64	All	do.
Kimberworth Hospital	Rotherham	Smallpox	17	All	do.
Ferham House	Rotherham	Maternity	10	All	do.
Alma Road Hospital	Rotherham	General	361	50%	do.
Rotherham Hospital	Rotherham	General	130	76%	Voluntary
Royal Hospital	Sheffield	General	340	3%	Voluntary
Royal Infirmary	Sheffield	General	500	3%	Voluntary
Jessop Hospital and Norton Hall Annexe	Sheffield	Maternity and women's diseases ; puerperal cases	146	3%	Voluntary
Sheffield Children's Hospital	Sheffield	Children	110	3%	Voluntary
City General Hospital	Sheffield	General	840	Fractional	Sheffield Corporation
Yorkshire Children's Orthopaedic Hospital	Kirbymoorside	Orthopaedic	106	5 beds	Voluntary
St. Catherine's Certified Institution	Doncaster	Mental defectives	20	3 beds	South West Yorks. Joint Board
Yorkshire Convalescent Home for Mothers and Babies	Withernsea	Convalescence	12	2 beds	Voluntary

Further details with regard to the hospitals under the control of the Local Authority concerning the classification of the medical and nursing staffs on 31st December, 1931, and the employment of consultants, are as follow:—

Name.	Medical staff.	Nursing staff.	Consultants.
Oakwood Hall Sanatorium	2 1 part time	Matron ... 1 Sisters ... 4 Nurses ... 14	Orthopaedic surgeon when required.
Isolation Hospital	1 part time	Matron ... 1 Sister ... 1 Nurses ... 10	Surgeon when required
Ferham House Maternity Home	1 part time	Matron ... 1 Sisters ... 2 Nurses ... 3	Obstetric surgeon employed
Kimberworth Hospital	1 part time	Staffed from Isolation Hospital when required	
Alma Road Hospital	2	Matron ... 1 Sisters ... 11 Nurses ... 61 Male Nurses 4	

In the following table is specified the bed accommodation of the various hospitals in the Borough relating to defined grouping of case material.

	General Hospital.	Alma Road Hospital.	Oakwood Hall Sanatorium	Isolation Hospital.	Ferham House Maternity Home.	Kimber- worth Hospital.
Medical	36	97	—	—	—	—
Surgical	72	43	—	—	—	—
Children	22	47	—	—	—	—
Chronic sick	—	75	—	—	—	—
Venereal	—	2	—	—	2	—
Tuberculosis	—	21	100	—	—	—
Isolation	—	—	—	64	—	17
Maternity	—	15	—	—	10	—
Mental and mental defectives	—	50	—	—	—	—

It should be noted that the three hospitals, the General, Alma Road, and Oakwood, are not utilised solely by the County Borough. The General Hospital is available for the whole of the surrounding area, the proportion of the Borough patients to the whole treated being in the neighbourhood of 76 per cent. Alma Road Hospital serves the areas of the Rotherham County Borough and the Rother Valley Public Assistance Committees, with a population of approximately 188,400. Oakwood Hall Sanatorium, with its 100 beds, has 30 definitely allocated to the West Riding County Council by agreement.

ALMA ROAD HOSPITAL.

The following extracts from Form Hosp. 6 of the Ministry of Health give details of the institutional treatment of the sick in Alma Road Hospital, Rotherham. This institution is maintained as a hospital under the Poor Law Act.

The total number of beds available for sick, maternity, and mental cases is as follows:—

For men	142	} excluding 11 cots in maternity wards.
For women	145	
For children under 16 years	63	
Total	350	

The following table shows the classification of the accommodation for the sick and the number of beds occupied on 31st December, 1931.

Classification of wards.	Number of wards.	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total.	
		Pro-vided	Occu-pied	Pro-vided	Occu-pied	Pro-vided	Occu-pied	Pro-vided	Occu-pied
1 Medical	6	49	49	48	46	—	—	97	95
2 Surgical	4	27	19	16	8	17	11	60	38
3 Children (med.)	3	—	—	—	—	30	29	30	29
4 Chronic sick	3	25	25	50	45	—	—	75	70
5 Venereal	1	2	1	—	—	—	—	2	1
6 Tuberculosis	2	9	7	6	6	6	3	21	16
7 Isolation	—	—	—	—	—	—	—	—	—
8 Maternity	1	—	—	15	8	—	—	15	8
9 Mental	2	23	22	18	18	—	—	41	40
(a) Short stay	—	—	—	—	—	—	—	—	—
(b) Long stay	—	—	—	—	—	—	—	—	—
10 Mental defectives	1	—	—	—	—	9	9	9	9
11 Other maternity cots	—	—	—	—	—	11	6	11	6
Total	23	135	123	153	131	62	52	361	312

The following gives the statistics of in-patients relating to the year 1931.

DISEASE GROUPS	Children (under 16 years of age).		Men and women.	
	Dis- charged	Died	Dis- charged	Died
Acute infectious disease	10	4	30	13
Influenza	2	—	12	1
Tuberculosis—				
(1) Pulmonary	2	1	27	13
(2) Non-pulmonary	8	3	8	6
Malignant disease	—	—	13	27
Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	12	—	21	1
(2) Non-articular manifestations of so-called "rheum- atism" (muscular rheumatism, fibrositis, lumbago and sciatica)	—	—	27	—
(3) Chronic arthritis	—	—	10	—
Venereal disease	1	2	2	1
Puerperal pyrexia	—	—	—	—
Puerperal fever (a) Women confined in the hospital	—	—	—	—
(b) Admitted from outside	—	—	1	1
Other diseases and accidents connected with child bearing	—	—	93	1
Mental diseases (a) Senile dementia	—	—	8	16
(b) Other	12	—	113	—
Senile decay	—	—	26	19
Violence	14	2	72	4
<i>In respect of cases not included above :</i>				
Disease of the nervous system and sense organs	27	2	98	40
Disease of the respiratory system	74	18	92	34
" " circulatory " 	4	1	68	39
" " digestive " 	58	6	225	8
" " genito-urinary " 	17	3	106	3
" " skin 	41	1	49	—
Other diseases	81	2	146	2
Mothers and infants discharged from maternity wards and not included in above figures. Mothers	—	—	146	—
Infants	116	19	—	—

At the two general hospitals in the County Borough there are full facilities for operative surgery. X-ray plant is provided at both, and also at Oakwood Hall Sanatorium.

Ophthalmic work is well developed at the General Hospital, the consultant also acting in connection with the School Clinics.

At the General Hospital, the new out-patients' department has now been opened. The building makes a very fine addition to the hospital and is fitted with all modern appliances in its several departments for massage ; dentistry ; eye work, sunray treatment ; and ear, nose, and throat conditions.

In addition, dental work is carried out at the School and Child Welfare Centres. Massage and remedial exercises are carried out at both general hospitals, and also in connection with the school and child welfare clinics. Pathological work is undertaken for the two general hospitals and other institutions and clinics of the Corporation by the Public Health Department, so far as specimens of a public health nature are concerned, and by the Sheffield University or other private pathological laboratories for specimens not in that category or which cannot be done locally, such as biological tests.

During the year one consultation took place between representatives of the Voluntary Hospital and the Local Authority as required by Section 13 of the Local Government Act, but nothing material transpired.

MATERNITY AND NURSING HOMES.

Two maternity homes in the Borough are registered under the provisions of the Nursing Homes Registration Act, 1927, one as a maternity home only and the other as a nursing and maternity home. No new applications were received for registration, nor any orders made during the year refusing or cancelling such, and no applications for exemption from registration were applied for. The homes have been inspected by the Maternity and Child Welfare Medical Officer, and no action has been necessary during the year.

MATERNAL MORTALITY.

During the year investigations have been made into all maternal deaths occurring in the Borough, and the results of each enquiry have been forwarded to the Maternity Mortality Committee, or in the case of extra urban deaths, to the responsible authority for the area in which the case was normally resident, for transmission to that committee.

All cases of puerperal fever and puerperal pyrexia are enquired into by the Medical Officer for Maternity and Child Welfare, and particulars of these enquiries will be found in Section IX. of this report.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS, AND HOMELESS CHILDREN.

In the case of unmarried mothers, these are usually dealt with by an order of admission into the Alma Road Institution. In most cases, however, at the time of admission the woman should be classed as an expectant unmarried mother. In some cases the woman enters the institution for the confinement only, and, after the child is born, takes her discharge. In other cases, where the woman has no home or her parents refuse to take her back, she remains, along with her child, in the institution until she can get the child adopted, leaving her in the position of again obtaining employment.

There is also another type of unmarried woman who has lived with her supposed husband as man and wife for many years, although not married. In these cases, to prevent the home being broken up, out-relief is granted. Under the Relief Regulation Order the grant of relief to this class of case is left entirely at the discretion of the committee.

At the present time there are several cases of unmarried mothers resident at the Alma Road Institution, and in some cases they have been chargeable for a considerable period.

In the case of women who give birth to an illegitimate child in the institution, the Public Assistance Committee take the necessary legal steps on behalf of the mother to obtain, if possible, an affiliation order on the putative father.

Illegitimate children and homeless children are dealt with as under:—

Children up to three years of age are provided for in the institution (house portion) nursery, and are cared for by a staff of nursing attendants under the direction of the Workhouse Matron.

Section 170 (2) makes it the duty of the Medical Officer of the Institution to examine every infant under the age of 18 months at least once in every fortnight and every other child once at least in every month.

On reaching the age of three years all children in the institution (except hospital cases are transferred to the children's homes. There are ten children's homes within the Borough, in charge of a fostermother or fostermothers, with a Lady Superintendent in control of the whole of the homes. The children are examined once every three months by Dr. Turner, School Medical Officer, and also are examined quarterly by the School Dentist. In the case of children requiring curative treatment, they attend more frequently.

Where suitable foster-parents can be found and the child is also suitable, the case is boarded out in a private home, and the committee usually allow 7s. 6d. weekly for maintenance, together with 20s. quarterly allowance for clothing. Many of these children receive medical attention from outside medical men, but all the boarded-out children are required to attend for a quarterly medical examination by Dr. Turner.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

No institutional accommodation has been provided for the care of mental defectives solely for the use of local cases. Rotherham is, however, one of the constituent authorities of the South-West Yorkshire Joint Board for Mental Defectives, and during October, 1931, 20 beds became available, of which Rotherham's share was 9.

The 32 mental defectives who are at present in certified or approved institutions are accommodated in the following:—St. Catherine's, Whittington Hall, Stoke Park Colony, Prudhoe Hall, Calderstones Institution, Royal Albert Institution, and Rampton State Institution.

AMBULANCE FACILITIES.

There are two motor ambulances, one specifically used for small-pox, and one for the other infectious diseases requiring removal to the Isolation Hospital.

Accidents and non-infectious cases continue to be dealt with by the Police in a highly efficient manner.

CLINICS AND TREATMENT CENTRES.

The following is a list of the out-patient departments under the control of the Corporation and provided by them, together with the sessional times, and attendances for 1931:—

	Situation	Sessional time	Attendances 1930
1. CHILD WELFARE Ferham House	Kimberworth Road	Tuesday, Friday afternoons	8589
Cranworth Centre	Cranworth Road	Monday, Thursday afternoons	9868
2. ANTE-NATAL Ferham House (Maternity Home cases)	Kimberworth Road	Wednesday afternoons	1020
Ferham House (District cases)	Kimberworth Road	Monday afternoons	235
Alma Road Hospital (Maternity ward cases)	Alma Road	Friday mornings	227
3. POST NATAL Ferham House	Kimberworth Road	Monday afternoons	47
4. SCHOOL CHILDREN Ferham House	Kimberworth Road	Each morning	17514
Cranworth Centre	Cranworth Road	Each morning	19943
Thorpe Hesley	Thorpe Hesley	One morning weekly	971
Herringthorpe	Herringthorpe	One afternoon weekly	146
5. ORTHOPAEDIC Cranworth Centre	Cranworth Road	One afternoon monthly	206
6. REMEDIAL, ETC. Cranworth Centre	Cranworth Road	Four mornings weekly	4810
7. OPHTHALMIC Ferham House	Kimberworth Road	One morning weekly	
Cranworth Centre	Cranworth Road	alternately	1350
8. DENTAL Ferham House	Kimberworth Road	Eight half days	
Cranworth Centre	Cranworth Road	weekly	5104
9. TUBERCULOSIS Dispensary	Frederick Street	Monday, Wednesday afternoons	2035
10. VENEREAL DISEASES Centre	Frederick Street	Daily	9116
11. LIGHT TREATMENT Ferham House	Kimberworth Road	Monday, Wednesday and Friday mornings	2432
12. OUT-PATIENT DEPARTMENT Alma Road Hospital	Alma Road	Daily	8339
13. MENTAL CLINIC Alma Road Hospital	Alma Road	One afternoon weekly	411

In addition, 1077 attendances were made at the school baths at Ferham House.

It should be noted that whilst the dental clinic, orthopædic clinic, and remedial exercises clinic are under the Education Authority, children under five years of age can have treatment, by arrangement, when referred by the Medical Officer of the Child Welfare Centre.

During the year 100 were so referred for dental treatment and 14 for orthopædic.

There are no day nurseries in Rotherham.

LOCAL GOVERNMENT ACT, 1929.

In accordance with Circular 1119 of the Ministry of Health, an account was given in the annual report of 1930 concerning the discharge of the medical services transferred to the Corporation under the Local Government Act 1929, and the provision under special Acts of certain Poor Law services for which duplicate powers exist.

The details of certain specific transferred duties as vaccination and Part 1 of the Children Act, 1908, are referred to elsewhere in this report.

POOR LAW MEDICAL OUT-RELIEF.

For the purpose of domiciliary medical attendance, the County Borough is divided into 3 areas. Prior to April 1st, 1930, there were four medical officers acting within the Rotherham County Borough, two of the medical officers having relatively small districts. Now, however, the Public Assistance Committee have divided the County Borough area into 3 districts so far as medical attention is concerned, Dr. Crerar being in charge of the South-Eastern District, Dr. Thomson of the North-Western District, and Dr. Mills of the Thorpe and Scholes District.

No correlation with the existing Panel system, whereby an individual with years to his credit is suddenly and irrevocably called from voluntary to non-voluntary medical service, exists.

SECTION III.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

The supplies obtained during 1931 were as follow :—

From Derwent Valley Water Board (via Sheffield), 744,000 gallons per day.

From Langsett (Sheffield Corporation), 1,600,000 gallons per day.

The emergency supply from Ulley reservoir (Rotherham Corporation) has not been called upon during the year.

The total service reservoir capacity now available is 4. million gallons, which is equal to 1-4/5th days' supply for the town.

The whole of the distribution in the Borough is effected by gravitation, with the following exceptions :—

Langsett water pumped from Boston reservoir to Boston overhead tank to supply high level areas in Moorgate and Broom Road.

Derwent water pumped from Kimberworth reservoir to Keppel's Column reservoir during periods of maximum " draw-off " to supply high level areas in Thorpe Hesley and Scholes.

The general condition of the town mains is being steadily improved both by the renewal of the older pipes by concrete lined pipes of increased capacity and by the continued scraping of mains.

HOUSING SITES.

Considerable extensions to the distribution system have been made to supply the new housing sites at Herringthorpe and South Street; the former obtaining a high pressure supply of Langsett water and the latter a high pressure supply of Derwent water.

TOWN AREA.

Improvements and extensions to the distribution system in the centre of the town have been executed to ensure an adequate supply to the improved areas.

CHARACTER OF WATER.

A marked brown discolouration of the water in districts supplied with Langsett water has been much in evidence during part of this year, and in the Autumn particularly caused unnecessary concern to numerous consumers. In view of the complaints received during this same period, samples of water were submitted to Drs. Thresh, Beale, and Suckling, of the Counties Public Health Laboratories, London, for analysis, and the following is an extract from the report:—

“ We are perfectly satisfied with the purity of the water as understood from the public health point of view. There is no doubt that the water is quite wholesome, and would not have the slightest deleterious effect upon those consuming it. In addition, it has the advantage of being very soft.”

This discolouration is due to an unusual excess of peat stain in the filtered water, but the human consumption of such water is not attended by any ill effects, as all harmful constituents of the water, if present, have been efficiently removed by filtration. However, by adjustment of the treatment at Langsett, the Sheffield Corporation have now almost entirely overcome this discolouration.

During the year a special sample was taken for the purpose of ascertaining the presence of lead. The sample was taken from a tap which had been sealed for 45 hours, and the Public Analyst reported no lead was present in the sample.

RIVERS AND STREAMS.

The supervision of rivers and streams in the County Borough rests with the West Riding Rivers Board.

DRAINAGE AND SEWERAGE.

By means of a high level and also a low level sewer, the sewage of the greater part of Rotherham is conveyed to the Aldwarke Sewage Works on the banks of the river Don. The method of purification is by the bio-aeration process.

The village of Thorpe Hesley has a separate sewerage system and sprinkler filter, and the sewage from Blackburn is treated at the adjacent disposal works of the City of Sheffield.

Cesspools exist in the unsewered parts of the district.

During the year under review the sewers were further extended, and the drains of 15 houses, which previously discharged into six cesspools, were re-constructed and connected to the sewers.

CLOSET ACCOMMODATION.

During the year 15 privies were abolished and water closets substituted, and 11 were abolished where no water closet was substituted.

The number of privies remaining at the end of 1931 was as follows:—

Within the drainage area	...	...	...	...	24
Outside the drainage area	...	...	...	...	126
					—150

The following is a statement of privies converted or abolished and dry ashpits abolished since 1910:—

Year	Privies converted or abolished.	Dry ashpits abolished.	Year	Privies converted or abolished.	Dry ashpits abolished.
1910	445	—	1921	20	83
1911	734	—	1922	13	47
1912	175	—	1923	11	13
1913	63	—	1924	2	46
1914	21	29	1925	9	37
1915	7	32	1926	9	34
1916	—	1	1927	14	40
1917	—	1	1928	15	24
1918	—	1	1929	5	41
1919	8	3	1930	19	124
1920	32	62	1931	26	220

SCAVENGING.

The cleansing of privies and cesspools, and the removal and disposal of house refuse, are undertaken by the Cleansing Department of the Borough Engineer.

Privies in the urban parts of the Borough are emptied every fortnight. Those in the rural parts are emptied every eight weeks, or more frequently as required.

Pail closets, fixed ashpits, and movable bins are emptied weekly. Cesspools are emptied by mechanical emptier as required.

The total amount of refuse collected and disposed of during the year ended 31st March, 1932, amounted to 19,442 tons, and represents 15.19 cwts. per 1,000 population per day.

Refuse was disposed of by means of incineration at the Destructor and by controlled tipping. Four of the five tips of the Borough are re-claiming low lying areas, which, when completed, will be used as recreation grounds.

The percentage of refuse tipped was 80% and incinerated 20%.

In order to facilitate the provision and maintenance of movable ashbins, power to enable the Corporation to maintain refuse bins on payment of a certain sum per annum for each premises was granted under the Rotherham Corporation Act, 1930. This power was put into operation during the year and a charge of 1s. 6d. per annum is made, for which the Corporation maintain and renew bins and provide the initial ashbins when fixed ashpits are abolished.

During the year, 220 fixed dry ashpits serving 556 houses were abolished, leaving 175 to be dealt with.

Street cleansing is undertaken by the Highways Department of the Borough Engineer.

There are 65 $\frac{3}{4}$ miles of roads in the Borough, of which approximately

11 miles are cleansed daily.

6	Do.	3 times per week.
20	Do.	twice per week.
28 $\frac{3}{4}$	Do.	once weekly.

During the year, 68 million square yards of streets were cleansed, exclusive of footpaths.

Also during the year, 3,841 gullies were emptied by hand and 12,450 by the suction gully emptier.

SANITARY INSPECTION OF THE AREA.

The following is a summary of the work done by the sanitary inspectors during the year, together with a statement of the periodic sanitary work performed by the health visitors.

MALE STAFF.		
Complaints investigated	...	509
Miscellaneous inspections and visits	...	3810
Re-inspections of nuisances	...	2706
Inspections of work in progress	...	800
Visits for sanitary alterations	...	53
Interviews with owners, agents, and builders	...	189
Inspections of pleasure fairs	...	3
" " tents, vans, and sheds	...	67
" " workshops and factories	...	134
" " offensive trades	...	314
" " cowsheds and dairies	...	263
" " common lodging houses (including visits by Police Inspector)	...	228
" " canal boats	...	6
" " houses let in lodgings	...	17
" " premises where made-up goods are prepared	...	69
" " ice cream makers' premises	...	110

Fall pipes disconnected from drains	...	...	...	...	...	...	...	...	...	14
Sinks renewed or repaired	...	...	...	...	...	...	...	...	...	91
Sink waste pipes cleansed	...	...	...	...	...	...	...	...	...	2
Sink wastes renewed or repaired	...	...	...	...	...	...	...	...	...	51
Sink waste pipes disconnected from drains	...	...	...	...	...	...	...	...	...	2
House floors repaired	...	...	...	...	...	...	...	...	...	83
Defective plaster work repaired (houses)	...	...	...	...	...	...	...	...	...	88
Defective ceilings repaired (houses)	...	...	...	...	...	...	...	...	...	41
Ranges and fireplaces repaired	...	...	...	...	...	...	...	...	...	73
Washing coppers repaired or renewed	...	...	...	...	...	...	...	...	...	53
Stairs repaired	...	...	...	...	...	...	...	...	...	20
Window defects remedied (houses)	...	...	...	...	...	...	...	...	...	74
Door defects remedied (houses)	...	...	...	...	...	...	...	...	...	45
Offensive accumulations removed	...	...	...	...	...	...	...	...	...	26
Water supplies taken inside houses	...	...	...	...	...	...	...	...	...	15
Nuisances from the keeping of animals abated	...	...	...	...	...	...	...	...	...	5
Dangerous structures remedied	...	...	...	...	...	...	...	...	...	20
Outbuildings repaired	...	...	...	...	...	...	...	...	...	24
Outbuildings demolished	...	...	...	...	...	...	...	...	...	17
Coal stores provided	...	...	...	...	...	...	...	...	...	7
Food stores repaired	...	...	...	...	...	...	...	...	...	6
Wells filled in	...	...	...	...	...	...	...	...	...	1
Dirty houses cleansed	...	...	...	...	...	...	...	...	...	7
Yards cleansed	...	...	...	...	...	...	...	...	...	10
Manure pits provided or repaired	...	...	...	...	...	...	...	...	...	3
Other matters remedied (unclassified)	...	...	...	...	...	...	...	...	...	55
Nuisances connected with offensive trades remedied	...	...	...	...	...	...	...	...	...	8
Defects connected with factories and workshops remedied	...	...	...	...	...	...	...	...	...	15
Dairy farms improved	...	...	...	...	...	...	...	...	...	1

One summons was issued for an unabated nuisance.

SMOKE ABATEMENT.

Under arrangement between the Councils of the City of Sheffield and the County Borough of Rotherham, all the powers relating to the abatement of nuisance from smoke conferred by the Public Health Act, 1875, and the Public Health (Smoke Abatement) Act, 1926, were conferred on the Joint Smoke Abatement Committee in May, 1928. The experience of this committee satisfied them that the area covered by them should be extended, and they invited the Stocksbridge, Rawmarsh, and Greasbro' Urban District Councils, together with the Rotherham and Wortley Rural District Councils, to combine with them. All these councils, with the exception of Wortley Rural District, accepted the invitation; the Sheffield and Rotherham Smoke Abatement Committee was abolished, and the Sheffield, Rotherham and District Smoke Abatement Committee constituted in its place. The new committee commenced its duties on May 12th, 1930, and the work is continuing in quite a satisfactory manner.

The following table shows the work done during the past four years, and the gradual improvement made, in Rotherham.

	1928	1929	1930	1931
No. of observations on chimneys of one hour each ...	1059	1050	879	607
„ minutes during which excessive smoke was emitted	3248	3028½	2183	1769
Average number of minutes during which smoke was emitted	3.4	2.8	2.3	2.9
No. of intimations served	49	59	44	43
„ works visited	49	77	63	63
„ statutory notices served	21	23	17	9
„ complaints received and attended to	6	6	9	4
„ chimneys dismantled	2	4	3	1
„ chimneys raised	2	—	—	3
„ chimneys erected (new)	1	2	6	3
„ prosecutions (an abatement order and costs in each case)	2	2	1	1

As will be seen, the number of observations taken during the year is again less than the previous year. This is due to the extra work entailed by the adjoining districts of Greasborough, Rawmarsh, and the Rotherham Rural District, the pollution from which would be to some extent felt in the Rotherham County Borough. The total number of observations in these adjoining districts for the year was 443, so that it will be noted that the total observations taken for the year are about normal.

The past year has been one of continued trade depression, and this shows a reactionary effect on general statistics. Factories are not working under steady load, and intermittent working gives rather abnormal figures with regard to smoke abatement. The work of reconstruction and conversion from coal firing to the use of gas, oil, pulverised fuel, together with mechanical stoking, is steadily progressing. In Rotherham it can be stated that, in comparison with other districts, conversions are going forward more speedily than elsewhere. This is due to the better facilities offered to the manufacturers who are prepared to use gas as fuel.

The following is the list of conversions carried out during the past two years:—

Number of steam boilers converted from coal to gas firing ...	3
Number of steam boilers erected for gas firing	3
Number of central heating units installed	11
Number of furnaces converted for gas firing	17
Number of furnaces erected for gas firing	13
Number of furnaces erected for oil firing	12

Number of glass melting furnaces converted for gas firing	...	2
Number of new boilers installed	... ..	1
Number of furnaces converted for pulverised fuel burning	...	1
Number of furnaces converted to mechanical stoking	... ..	12

There is yet plenty of opportunity for the manufacturers to improve their combustion conditions in order to assist in giving a clearer atmosphere, but taking into account the very poor conditions of trade, the progress shown is very satisfactory.

The following table gives the ultra violet ray readings and the monthly details of the observations with the soot deposit gauges taken at the Town Hall and Oakwood Hall Sanatorium for the year 1931:—

TOWN HALL.

Month	Ultra-violet ray readings		Soot deposit gauge.					
	Total units	Daily average	Rainfall m/m's.	Total solids dissolv'd grams.	Total insoluble matter grams.	Equivalent to tons per square mile.		
						Total insoluble	Total soluble	Total solids
January ...	12.0	0.39	47.6	0.321	0.558	19.40	11.16	30.55
February ...	9.0	0.32	53.5	0.360	0.716	24.89	12.51	37.40
March ...	20.5	0.66	2.2	0.205	0.454	15.78	7.13	22.91
April ...	18.5	0.62	77.7	0.342	0.647	22.49	11.89	34.38
May ...	32.5	1.05	79.4	0.314	0.676	23.49	10.91	34.41
June ...	24.5	0.82	118.9	0.279	0.564	19.60	9.70	29.30
July ...	130.0	4.20	109.1	0.302	0.831	28.88	10.56	39.38
August ...	121.0	3.90	110.4	0.259	0.462	16.05	9.00	25.06
September ...	31.5	1.05	84.6	0.322	0.556	19.32	11.19	30.52
October ...	4.5	0.15	15.1	0.333	0.690	23.98	11.58	35.56
November ...	3.5	0.12	80.4	0.283	0.644	22.38	9.84	32.22
December ...	2.5	0.08	18.8	0.237	0.551	19.15	8.24	27.39
Average ...	34.2	1.12	66.5	0.296	0.612	21.28	10.30	31.59

OAKWOOD HALL SANATORIUM.

Month	Ultra-violet ray readings		Soot deposit gauge.					
	Total units	Daily average	Rainfall m/m's.	Total solids dissolv'd grams.	Total insoluble matter grams.	Equivalent to tons per square mile.		
						Total insoluble	Total soluble	Total solids
January ...	14.5	0.47	12.9	0.157	0.287	9.62	5.26	14.89
February ...	11.5	0.41	35.1	0.262	0.312	10.46	8.78	19.25
March ...	23.0	0.90	2.0	0.084	0.095	3.19	2.82	6.00
April ...	26.0	0.87	65.8	0.200	0.262	8.78	6.70	15.49
May ...	38.5	1.24	73.2	0.145	0.261	8.75	4.86	13.61
June ...	30.0	1.00	99.4	0.234	0.181	7.84	6.07	13.91
July ...	139.5	4.50	102.8	0.172	0.228	7.64	5.77	13.41
August ...	126.5	4.08	124.7	0.190	0.200	6.70	6.38	13.08
September ...	33.0	1.10	79.2	0.120	0.210	7.04	4.02	11.06
October ...	6.5	0.21	15.3	0.133	0.182	6.10	4.46	10.56
November ...	4.0	0.13	66.9	0.142	0.151	5.06	4.76	9.82
December ...	2.5	0.08	14.5	0.165	0.123	4.12	5.53	9.66
Average ...	38.4	1.25	57.6	0.167	0.218	7.10	5.45	12.56

OFFENSIVE TRADES.

The following offensive trades existed in the Borough at the end of December, 1931 :—

Fish friers ...	88
Tripe boilers ...	4
Gut scrapers ...	1
Rag and bone dealers ...	3
Hide and skin dealers ...	2
Blood driers ...	1
	—
	99
	—

There was no increase in the number of offensive trades during the year. Several applications for the consent of the Council to the establishing of the business of a fish fryer were refused.

The following matters were dealt with and remedied :—

Fish fryers' premises :						
Lack of cleanliness	...	...	...	...	...	5
Drainage of cleaning shed	...	...	...	...	...	1
Defective walls, floor, and drainage of cleaning shed						1
Hide and skin dealer's premises :						
Limewashing	...	...	...	...	...	1
						—
						8
						—

COMMON LODGING-HOUSES.

In all, 228 visits were paid to the five common lodging-houses in the Borough.

Four of the premises, none of which were originally erected for the purpose of lodging-houses, and are not all that could be desired, were maintained in a cleanly state. Exception was taken to the condition of one lodging-house, and after the attention of the keeper was drawn to it, an improvement was made.

HOUSES LET IN LODGINGS.

Twenty premises are registered as houses let in lodgings, and are occupied by a total of 81 families.

Sixty-three inspections were made during the year, and nine written notices were served for defects and non-compliance with Bye-laws.

The premises were maintained in a reasonable condition.

TENTS, VANS, AND SHEDS.

The Bye-laws relating to tents, vans, and sheds have been found effective in connection with existing structures, and the further powers of the Corporation contained in the Rotherham Corporation Act, 1930, under which, with certain reservations, no tents, vans, sheds or similar structures used or intended to be used for human habitation shall be placed or kept on any land within the Borough without the previous consent of the Corporation, have been useful in controlling new structures. Several applications for permission to "pitch" vans in the Borough were refused by the Council during the year.

No special difficulty was experienced.

The number of tents, vans, or sheds, etc., in the Borough occupied as dwellings on the 31st December, 1931, was as follows :—

Occupied vans on wheels	...	...	...	...	11
Vans on wheels with extensions	...	...	...	...	2
Huts not on wheels	...	...	...	...	10
					—
					23
					—

FACTORIES AND WORKSHOPS.

The number of workshops on the register at the end of 1931 is set out below :—

Workshops and workplaces (excluding bakehouses) ...	112
Bakehouses (including factory bakehouses) ...	12
	124

Details of inspection, including inspections made by the health visitors, are given herewith :—

Premises.	Inspections.	Written notices.	Verbal notices.
Factories (including factory laundries) ...	16	4	—
Workshops (including workshop laundries) ...	156	2	9
Workplaces (other than outworkers' premises)...	1	—	—
	173	6	9

In the following statement, particulars of the defects found are given :—

Particulars.	Number of defects	
	Found.	Remedied.
Want of cleanliness ...	11	11
Other nuisances ...	1	1
Insufficient sanitary accommodation ...	1	1
Defective sanitary accommodation ...	1	1
Sanitary accommodation not separate for sexes ...	1	1
	15	15

Four complaints were received from H.M. Inspector of Factories, all referring to factories.

CANAL BOATS.

The County Borough of Rotherham is not a registration authority for the purposes of the Canal Boats Acts.

As stated in my last report, very few boats stay at the wharf any length of time, the majority stopping for a few hours to unload part of the cargo or exchange horses, and then continuing their journey.

The following statement summarises the work :—

Number of visits paid to the canal wharf	14
Number of canal boats examined	6
Number of infringements observed (no certificate on board)	1
Notifications of infectious disease	—

Number of persons on board :

	Males.	Females.
Adults	10	5
Children under 12 years	1	1
	—	—
	11	6—17

No cases of illness were observed.

DISPOSAL OF THE DEAD.

Although the most modern facilities for cremation are available at the City Road Cemetery, Sheffield, no recent increase in the disposal of the dead by this method can be shown.

I am indebted to the Superintendent, Mr. C. Cook, for the following figures relating to the past 18 years :—

Year.	Number of cremations.
1913—1924	One each year.
1925	6
1926	4
1927	5
1928	5
1929	2
1930	3
1931	2

SCHOOLS.

In relation to the sanitary condition of schools, the Education Committee is actively pursuing its policy of closing those which are unhygienic and replacing them with new buildings, as referred to in previous reports. The new Spurley Hey Central School was opened to receive children on April 1st, the Parish Church and Eastwood Schools being closed on March 31st. The new infant and junior school at Herringthorpe was opened on August 24th. Both these schools are planned on semi-open-air lines. At the Spurley Hey School shower baths are provided, and the girls' department includes a model flat with a bath-room. No medical rooms have been provided, as the school is next door to the Cranworth Road Clinic. At Herringthorpe School there are two large medical rooms, which are very suitable for use as a branch clinic should future developments render this desirable.

The medical inspection of school children in the Borough, carried out by Dr. A. C. Turner and his staff, is under the control of the Education Committee. There is, however, the very closest co-operation between the School Medical Service and the Public Health Department in matters appertaining to the health of the scholars and for the prevention of the spread of infectious disease. Strict attention is paid to the instructions contained in the "Memorandum on Closure of and Exclusion from School, 1927." These arrangements were set out in detail in the 1930 survey report, and no alterations have been made during the year.

RAG FLOCK ACT.

No flocks are manufactured in the district. One workshop where rag flocks are used in a small way was inspected during the year, and was found to be maintained in a cleanly condition. No samples were taken.

UNDERGROUND SLEEPING ROOMS.

There are no underground sleeping rooms in the Borough, and no Regulations have been made under the Housing Act, 1925, Section 18 (1).

SECTION IV.

HOUSING.

In the following table housing statistics for the year 1931 are given :—

I.—INSPECTION OF DWELLING-HOUSES DURING THE YEAR :—	
(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) and number of inspections made for that purpose	2106
(2) Number of dwelling-houses (included under sub-head (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925, and number of inspections made for that purpose	176
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	8
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	59
II.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICE :—	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	1681
III.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—	
A. Proceedings under Sections 17, 18, and 23 of the Housing Act, 1930.	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	—
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners	—
(b) By Local Authority in default of owners	—
B. Proceedings under Public Health Acts.	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	101
(2) Number of dwelling-houses in which defects were remedied after service of formal notices	
(a) By owners	56
(b) By Local Authority in default of owners	10
C. Proceedings under Sections 19 and 21 of the Housing Act, 1930.	
(1) Number of dwelling-houses in respect of which demolition orders were made	—
(2) Number of dwelling-houses demolished in pursuance of demolition orders	—
D. Proceedings under Section 20 of the Housing Act, 1930.	
(1) Number of separate tenements or underground rooms in respect of which closing orders were made	—
(2) Number of separate tenements or underground rooms in respect of which closing orders were determined, the tenement or room having been rendered fit	—

E. Proceedings under Section 3 of the Housing Act, 1925.

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

F. Proceedings under Sections 11, 14, and 15 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which closing orders were made	-
(2) Number of dwelling-houses in respect of which closing orders were determined, the dwelling-houses having been rendered fit	-
(3) Number of dwelling-houses in respect of which demolition orders were made	-
(4) Number of dwelling-houses demolished in pursuance of demolition orders	4
(5) Number of dwelling-houses voluntarily closed by owners	3

SECTION V.

INSPECTION AND SUPERVISION OF FOOD.

MILK.

In connection with the provisions of the Milk and Dairies Acts and Orders, given below are the numbers of registered producers and retailers of milk and the number of registered dairies in the County Borough.

Registered cowkeepers (producers within the County Borough) ...	25
Retail milk purveyors :	
Cowkeepers within the County Borough retailing their own milk	18
Retail roundsmen with premises within the County Borough ...	26
Retailers (not roundsmen) from shops within the County Borough	17
Retail roundsmen from premises outside the County Borough	60
	—
	121
<hr style="width: 10%; margin-left: auto; margin-right: 0;"/>	
Registered dairies :	
Where cows are kept	25
Where milk is sold or stored	34
Where receptacles are stored	9
	—
	68
	—

One dealer's licence for the sale of "certified" milk was issued under the Milk and Dairies (Special Designations) Order, 1923.

Dairy farms and dairy cattle have been periodically inspected during the year, 113 visits to premises having been made by the Veterinary Inspector and 1,297 clinical examinations made of bovines; in addition, three visits were made by the inspector to premises outside the Borough, where 48 bovines were examined; these latter visits and examinations were occasioned by the finding of tubercle bacilli in samples of bulk milk brought into our area.

Particulars of the milk samples taken and examined for bacillus tuberculosis in connection with the work of the Veterinary Inspector are set out below.

	Positive.	Negative.	Total.
Samples microscopically examined (individual cows)	6	25	31
Samples biologically examined (individual cows)	1	13	14
Samples biologically examined (controls) ...	—	5	5
Samples biologically examined (mixed milk)	—	1	1
	<u>7</u>	<u>44</u>	<u>51</u>

Six cows were slaughtered in connection with the provisions of the Tuberculosis Order, and the post mortem findings were as follow :—

Animals affected with tuberculosis of the udder	2
Animals giving tuberculous milk and showing lesions of tuberculosis	1
Animals otherwise affected with tuberculosis	2
Animals not affected with tuberculosis	1
	<u>6</u>

The total amount of compensation paid in respect of the six cows was £46 15s. and the amount of salvage received £30 15s.

Improvements were made at one dairy farm, additional lighting and a new floor being provided in the cowhouse and a suitable milk house provided. A fair standard of cleanliness, both of premises and animals, was maintained at the farms.

With a view to the detection of unclean and tubercle infected milk, samples were taken in addition to those obtained during the routine veterinary inspections; the samples were from bulk consignments, all being examined for the presence of bacillus coli and some for bacillus tuberculosis. The following gives the details :—

Bulk milk : test for presence of bacillus coli.		
B. coli test positive in 0.001 c.c.	2	
B. coli test positive in 0.01 c.c. (negative in 0.001)	5	
B. coli test negative in 0.01 c.c.	27	
	<u>34</u>	

It will be seen that though the samples were not of graded milk, 27 of the 34 (or 79 per cent.) were of " grade A " standard as regards the absence of coliform bacilli in 0.01 c.c.

In connection with the biological examinations for the presence of tubercle bacilli, 24 samples of bulk milk were submitted, and three of them (or 12.5 per cent.) were reported positive. The three infected samples were from supplies produced outside our area; the responsible local authorities were notified, and in each case the source of infection was traced and the cow slaughtered.

One sample of " certified " milk was submitted for bacteriological examination, and it conformed to the requirements of the Milk and Dairies (Special Designations) Order.

MEAT.

The number of private slaughter-houses in the Borough and the nature of the holdings are as follow :—

Registered slaughter-houses	...	...	...	...	...	2
Licensed slaughter-houses	...	...	...	...	...	1
Annually licensed slaughter-houses	...	...	...	...	...	3
						—
						6
						—

In addition to the private slaughter-houses, there is the Public Slaughter-house, in which approximately 80 per cent. of the animals slaughtered in the Borough are dressed.

The following figures, supplied by the Superintendent, indicate the number of animals slaughtered during 1931 at the abattoir, at which a whole-time Meat Inspector is stationed :—

Beasts	...	...	...	...	...	5,196
Calves	...	...	...	...	...	141
Sheep and lambs	...	...	...	...	...	7,414
Pigs	...	...	...	...	...	10,580
						—
						23,331
						=====

The number of visits paid by the staff to the whole of the slaughter-houses, including the Public Slaughter-house, during the year was 1,370.

In addition to the written notices of slaughter at the private slaughter-houses, the following notices were received in compliance with the Public Health (Meat) Regulations, 1924 :—

Nature of notices.	Notices received.	Number visited.
A. Private premises (other than private slaughterhouses) :—		
Notices of intention to slaughter	76	76
Emergency slaughter in the Borough	5	5
Emergency slaughter outside the Borough and carcasses brought into the Borough for inspection	2	2
B. Private slaughterhouses :—		
Notices of intention to slaughter	11	11
Emergency slaughter	4	4
Notices to examine meat where there is evidence of disease ...	9	9
	107	107

The following summary gives details of the meat seized or surrendered and destroyed during 1931 as unfit for human food, from all causes (including tuberculosis) :—

Number of	Beasts.	Calves.	Sheep and lambs.	Pigs.	Total.
Carcases (including offal)	87	8	78	30	203
Portions of carcases ...	19	—	—	—	19
Heads (including tongues)	315	—	—	345	660
Tongues (only) ...	2	—	—	—	2
Lungs	1200	—	20	430	1650
Livers	600	—	325	482	1407
Tripes or stomachs ...	263	—	—	—	263
Spleens	159	—	—	50	209
Kidneys	205	—	—	2	207
Hearts	13	—	—	—	13
Udders	420	—	—	—	420
Fats (mesenteries, etc.)	371	—	—	1200	1571

The total weight of fresh meat and offals condemned was allocated as follows :

	Tons.	Cwts.
Public Slaughterhouse	52	18½
Private slaughterhouses	1	12½
Other private premises	—	7¼
	54	18¾

Tuberculosis was the reason for the condemnation of 82 per cent. of the total weight of fresh meat and offals condemned during the year.

Particulars of the tuberculous meat seized or surrendered and destroyed during 1931 are given herewith:—

Number of	Beasts.	Calves.	Sheep.	Pigs.	Total.
Carcases (including offal)	76	2	1	16	95
Portions of carcases (quarters)	14	—	—	—	14
Heads (including tongues)	308	—	—	336	644
Lungs	1160	—	—	400	1560
Livers	393	—	—	388	781
Tripes or stomachs	260	—	—	—	260
Spleens	160	—	—	40	200
Kidneys	90	—	—	—	90
Hearts	11	—	—	—	11
Udders	80	—	—	—	80
Mesenteries	358	—	—	1190	1548

Under the Tuberculosis Order, 24 cows were taken to the Public Slaughterhouse for slaughter from the West Riding, 10 of which were entirely condemned; and 5 were slaughtered for the County Borough, 1 being entirely condemned. These are included in the foregoing table.

The following table gives an analysis of whole carcasses condemned on account of disease or condition other than tuberculosis:—

Condition or disease which rendered the meat unfit for human food.	Beasts.	Calves.	Sheep.	Pigs	Total.
Septicæmia	3	—	—	—	3
Swine fever	—	—	—	8	8
Jaundice	—	—	—	3	3
Johne's disease and hydraemia	4	—	—	—	4
Traumatism and hydraemia	1	—	—	—	1
Hydræmia	1	2	71	1	75
Joint ill	—	1	—	—	1
Immature	—	3	—	—	3
Killed in extremis... ..	—	—	5	1	6
Fevered	1	—	—	—	1
Actinomycosis and emaciation	1	—	—	—	1
Malignant tumour... ..	—	—	1	—	1
Odorous	—	—	—	1	1
	11	6	77	14	108

The practice of marking meat, which commenced during 1930 and in accordance with Part III. of the Public Health (Meat) Regulations, was continued throughout the year. The stamp, which identifies the inspector using it, indicates that the carcase has been inspected and passed as fit for human food, and is used only in connection with carcases dressed at the Public Slaughter-house.

The Borough continues to be free from butcher meat stalls, except meat hawkers' vehicles. None of these were found to contravene the Public Health (Meat) Regulations.

OTHER FOOD.

The following table gives details of food other than fresh killed meat condemned during the year:—

	Number	Weight
Carcases of imported mutton (caseous lymphadenitis) ..	1	—
Frozen or chilled meat	—	828 lbs.
Frozen offals	—	270 lbs.
Bacon	—	72 lbs.
Chitterlings (barrels)	3	—
Fish	—	37 lbs.
Prawns (tins)	2	—
Shrimps	—	7 lbs.
Cockles (bags)	1	—
Tinned food (tins)	54	—
Apples (boxes)	8	—

Twenty-three certificates of unsoundness were given.

Special examinations were made of 2,079 carcases of imported mutton for caseous lymphadenitis. One carcase was found to be affected with the disease, and was condemned.

FOOD AND DRUGS ACT.

The subsequent tables in this section show the work done in connection with the Food and Drugs (Adulteration) Act, the Condensed Milk Regulations, and the Preservatives in Food Regulations.

Total No.	Nature of sample.	Genuine		Not reported as genuine.		Formal samples			Penalties including costs.
		Formal.	Informal.	Formal.	Informal.	Prosecutions instituted.	Dismissed or withdrawn.	Convictions.	
2	Ammoniated tincture of quinine ...	—	2	—	—	—	—	—	—
3	Baking powder ...	—	3	—	—	—	—	—	—
24	Butter ...	—	24	—	—	—	—	—	—
2	Camphorated oil ...	—	2	—	—	—	—	—	—
3	Coffee ...	—	3	—	—	—	—	—	—
3	Coffee and chicory	—	2	—	1	—	—	—	—
6	Condensed milk ...	—	6	—	—	—	—	—	—
6	Cream ...	—	6	—	—	—	—	—	—
2	Cream of tartar ...	—	2	—	—	—	—	—	—
3	Flour (self-raising)	—	3	—	—	—	—	—	—
2	Glycerine ...	—	2	—	—	—	—	—	—
3	Ground ginger ...	—	3	—	—	—	—	—	—
3	Jams ...	—	3	—	—	—	—	—	—
7	Lard ...	—	7	—	—	—	—	—	—
3	Lemon curd ...	—	3	—	—	—	—	—	—
2	Liquorice powder ...	—	2	—	—	—	—	—	—
7	Margarine ...	—	7	—	—	—	—	—	—
114	Milk ...	73	22	18	1	1	1	—	17/4 (costs)
3	Mincemeat ...	—	3	—	—	—	—	—	—
3	Pepper ...	—	3	—	—	—	—	—	—
2	Potted meats ...	—	2	—	—	—	—	—	—
5	Sausages ...	—	3	—	2	—	—	—	—
3	Sponge buns ...	—	3	—	—	—	—	—	—
2	Sweet spirit of nitre	—	2	—	—	—	—	—	—
1	Tea ...	—	1	—	—	—	—	—	—
3	Vinegar ...	3	—	—	—	—	—	—	—
217		76	119	18	4	1	1	—	17/4

As will be seen from the preceding summary, two hundred and seventeen samples were procured, and twenty-two of this total were reported not genuine. One sample purchased as coffee and chicory consisted wholly of coffee; no action was taken in this case. Two samples of sausage contained sulphur di-oxide; this preservative is permitted in sausage to the extent of four hundred and fifty parts per million, but its presence must be declared; the two samples contained one hundred and seventy-eight parts and two hundred and eighty-five parts per million, but no declaration was made; a warning letter was sent to each vendor.

The remaining nineteen non-genuine samples were of milk, and relate to eleven supplies; the enquiries made concerning the causes of the deficiencies in

these eleven supplies showed that four supplies were deficient because of unequal intervals between milking times and six supplies were deficient by reason of careless or faulty handling, that is the milk was not well mixed before despatch from the place of production or was not kept mixed during the progress of delivery by the roundsman ; in the case of the remaining supply, which was slightly deficient in solids not fat, the Public Analyst reported the milk to be abnormal in character, the ratio of ash : protein. lactose ; being 2:8:11, as against a normal of 2:9:13.

A summons was issued against the vendor of one milk sample which was 34.3 per cent. deficient in milk fat ; this was one of the deficiencies, referred to above, caused by the milk not being kept mixed by the roundsman ; at the hearing before the magistrates the case was dismissed on payment of costs. Other vendors or producers of supplies adversely reported on were informed of the causes responsible for the poor quality of the milk and were warned ; subsequent samples showed that the observance of more nearly approximate intervals between milking times, and proper mixing of the milk, resulted in supplies conforming to the requirements of the Sale of Milk Regulations.

Further particulars of the 19 non-genuine articles are given in the following summary :—

Identification mark.	Article.	Result of analysis. Percentages.		Remarks and action taken; or result of prosecution.
		Milk Fat.	Solids not fat.	
692	Milk	2.90	9.30	Letter to vendor.
714	Milk	2.90	8.79	Letter to vendor.
716	Milk	2.89	8.94	Letter to vendor.
722	Milk	2.89	9.01	Letter to vendor.
724	Milk	2.96	9.07	Letter to vendor.
726	Milk	1.97	8.84	Deficiency of milk-fat caused by failure to keep milk mixed during delivery; summons against vendor dismissed on payment of costs.
732	Milk	2.68	8.56	Deficiency caused by failure to keep milk mixed during delivery; letter to vendor.
757	Milk	2.70	9.25	Deficiency due to unequal intervals between milking times; letter to vendor; see also No. 760.
760	Milk	2.88	8.80	"Appeal to cow" sample—taken in connection with No. 757 (above); deficiency due to hours of milking.
772	Milk	2.35	8.41	Milk of one cow which was "in season" at time of sampling; see also Nos. 775, 776, 784, 786, 789 and 805.
775	Milk	3.78	8.18	"Appeal to cow" sample from same animal as No. 772.
776	Milk	3.78	8.18	"Appeal to cow" sample; mixed milk of four cows.
784	Milk	3.25	8.14	"Appeal to cow" sample; milk of one cow.
786	Milk	3.30	8.34	"Appeal to cow" sample; milk of one cow.
789	Milk	3.98	8.03	"Appeal to cow" sample; mixed milk of four cows.
805	Milk	3.72	8.10	"Appeal to cow" sample; mixed milk of four cows.
780	Milk	2.67	8.73	Deficiency caused by failure to keep milk mixed during delivery; letter to vendor.
783	Milk	3.35	8.26	Letter to vendor.
818	Milk	3.45	8.41	Letter to vendor.
698	Coffee and chicory	Consisted wholly of coffee		No action.
798	Sausage	Contained 178 parts per million sulphur di-oxide. No declaration.		Letter to vendor.
801	Sausage	Contained 285 parts per million sulphur di-oxide. No declaration.		Letter to vendor.

Taken in connection with No. 772. The milk was abnormal in character, the ration of ash, protein, lactose, being 2.8.11 as against a normal of 2.9.13.

The total number of milk samples procured was	114
The highest percentage of milk fat was	4.95
Associated with solids not fat (August)	9.00
The highest percentage of solids not fat was	9.37
Associated with milk fat (February)	3.55
The number of samples containing 4 per cent. or over of milk fat was	15
The number of samples containing 9 per cent. or over of solids not fat was	31
And the number of samples containing over 4 per cent. milk fat and 9 per cent. solids not fat was	2

The quarterly average composition of the samples was as follows :—

Period.	Milk-fat.	Solids not fat.	No. of samples.
1st quarter	3.55	8.98	38
2nd quarter	3.29	8.83	25
3rd quarter	3.59	8.70	38
4th quarter	3.58	8.76	13
The whole year	3.51	8.83	114

In connection with three milk supplies, eleven "appeal to the cow" samples were taken; seven of them (covering two supplies) did not conform to the presumptive standard, the cause of the deficiency in the case of one supply being unequal intervals between milking times; in the case of the second supply the milk was abnormal in character as previously described. Of the seven "appeal to the cow" samples, whose composition was not in accordance with the requirements of the Sale of Milk Regulations, three were taken from individual cows.

Twenty samples of the milk supplied to schools were submitted for analysis; all were reported genuine.

The six samples of cream analysed were genuine and free from preservative. There are no premises in the County Borough registered for the manufacture or sale of artificial cream.

All samples of condensed milk conformed to the Public Health (Condensed Milk) Regulations.

With regard to the Public Health (Preservatives, etc., in Food) Regulations, only two samples were found to contain preservative; these were samples of sausage, to which reference has previously been made.

ICE CREAM.

It is provided by the Rotherham Corporation Act, 1928, that places used for the manufacture or sale of ice cream (with the exceptions of factory and workshop premises, hotels, restaurants, and clubs) shall be registered with the Corporation, and at the close of the year under review 93 such premises were on the register; the majority of the places are shops, and there are also some private dwelling-houses.

Legislation has not yet provided for the degree of control (as to the type of premises which may be used) which is desirable in the case of a commodity of such a nature as ice cream; a type of premises affording thoroughly hygienic conditions is obviously desirable since the work of making a clean and wholesome product is thereby rendered easier. In the absence, however, of model facilities, satisfactory results can be achieved (though with greater difficulty) by the use of right methods. Our visits of inspection are made with a view to securing that the procedure in making and also in the storage of materials and product shall result in an article free from contamination and infection.

SECTION VI.

INFECTIOUS DISEASES GENERALLY.

The prevalence of the infectious diseases notifiable in the County Borough is shown in the following table:—

Disease.	1927	1928	1929	1930	1931
Small-pox	27	31	2	2	—
Cholera	—	—	—	—	—
Plague	—	—	—	—	—
Diphtheria	104	70	74	146	188
Erysipelas... ..	63	55	63	38	33
Scarlet fever	174	177	217	200	119
Malaria	2	1	1	1	1
Typhoid and paratyphoid fevers	3	1	3	3	7
Continued fevers	—	—	—	—	—
Puerperal fever	1	6	6	7	4
Encephalitis lethargica	3	4	—	2	2
Measles and German Measles	2199	464	618	1712	392
Ophthalmia neonatorum	7	6	5	1	7
Pulmonary tuberculosis	169	143	141	98	103
Other forms of tuberculosis	42	34	38	44	39
Cerebro-spinal meningitis	1	1	—	3	52
Pneumonia	606	266	317	196	172
Chicken-pox	478	419	387	492	325
Dysentery... ..	—	—	—	—	—
Acute anterior poliomyelitis	—	1	—	—	—
Acute polio-encephalitis... ..	—	—	—	—	—
Puerperal pyrexia	13	8	16	11	13
Pemphigus neonatorum	7	4	4	5	2
Totals	3899	1691	1892	2961	1459

In the subsequent table particulars are given of the incidence of the notifiable infectious diseases during the year, showing age grouping, ward distribution, cases removed to hospital, and total deaths.

It will be noticed that the total number of notifications is less than half what obtained during the preceding year, due in the main to the relative lowness of measles. Diphtheria was higher than usual, 188 cases being notified with 6 deaths, representing a case fatality rate of 3.2 per cent.

Scarlet fever was fortunately lower than ordinarily; and pneumonia showed a decided drop from previous years.

The unfortunate occurrence of cerebro-spinal meningitis of which 52 cases were notified makes a tragic offset. Of these 45 were treated in hospital and 7 were kept at home. In all 69 notifications were received, of which in 17 cases the diagnosis was not confirmed and the medical practitioner withdrew his notification. The disease accounted for 43 deaths during the year or a case fatality rate of 82.7 per cent. The typhoid group accounted for 7 notifications. Small-pox, fortunately, was absent from the Borough.

TYPHOID FEVER.

During the year 7 cases in the typhoid group were notified. The first, notified on the 2nd November, appeared to be a sporadic case. The others were linked, together with other four notified in January, 1932. The following extract from a report furnished to the Ministry of Health gives the main details of the outbreak.

On the 11th November I was called in by the attending practitioner to see two boys of 12 and 6 years who were suspected to be suffering from typhoid fever. They were removed to the Isolation Hospital where blood culture from the boy aged 12 gave a pure growth of *B. typhosus*, and the boy aged 6, an agglutination in 1/25—1/125, with no agglutination in the para-group. The other members of the family were bacteriologically tested with negative results except a boy of 4 who had a positive Widal and was removed to hospital on November 20th.

The history is as follows:—Mussels were procured from a hawker with a dray on 31st October. These had been purchased wholesale in Sheffield, but the retailer could not give the name of the wholesaler and had lost his invoice, so that the origin could not be traced. The father and the four sons (21, 12, 6 and 4 years) all ate the mussels. The mother and the baby did not partake. The father was taken ill very soon with vomiting and pain which lasted all day and onto the next when recovery set in. The son aged 21 had no ill effects whatever. The boy aged 12 became severely ill and was typhoidal on November 11th when I saw him. The same with less severity applied to the boy of 6. The boy of 4 who later gave a positive Widal had vomited after eating the mussels and was then apparently well, but on the blood test being positive he was removed to hospital as stated, and where he never showed signs of illness.

It is interesting to note that with the exception of the son of 21 years, the two who were really ill were those who did not vomit.

The above refers to the family H.

Following on the mussels outbreak the next notification of typhoid fever was that of Miss W., a nurse in the children's block at Alma Road Hospital. During certain alterations at the hospital, Nurse W. was sleeping at home and she was notified on December 8th by the family practitioner. The report from the bacteriologist gave a positive Widal reaction to *B. typhosus*. Nurse W. became ill on December 3rd and was removed to the Isolation Hospital on December 8th. Nothing of a causative nature could be found at her home, although it was stated that three or four weeks previously some of the children she had been nursing at the hospital had diarrhœa. As a result of this, enquiries were made as to any suspicious cases in Alma Road Hospital or the possibility of food contamination or carriers, with negative results.

On December 29th other two nurses, Miss P. and Miss W. (2) who were on duty in the same block referred to were removed to the Isolation Hospital. The Widal reaction was positive in the former, and *B. typhosus* was found in the urine of the latter.

Following this I visited Alma Road Hospital and made clinical enquiries the same day regarding patients and staff. A man named W. (3) who clinically was suspicious of typhoid and who had been admitted to the hospital two hours previously was transferred to the Isolation Hospital. This case, however, was afterwards found negative.

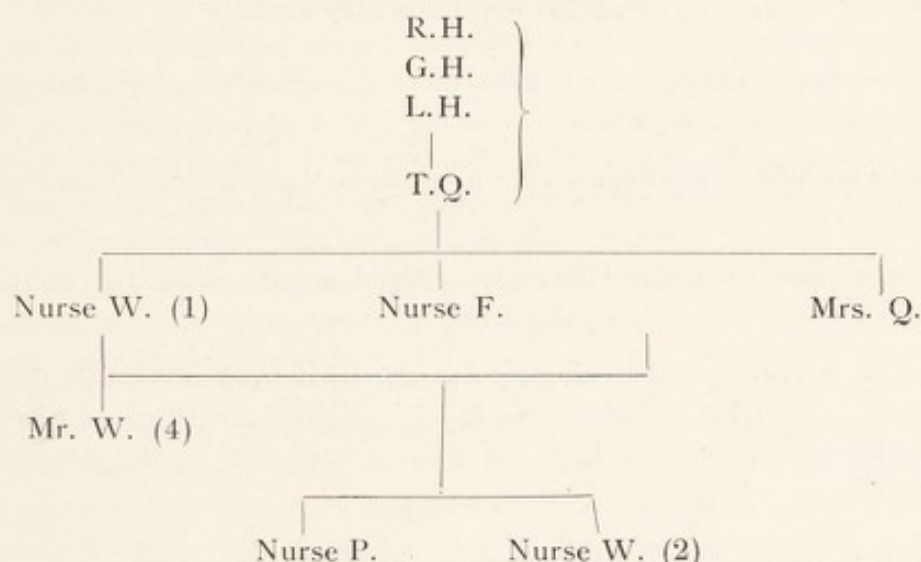
A concerted bacteriological investigation of the staff and patients of this block was then undertaken when it was found that Miss F., another nurse who had been ill at her home (outside the Borough) since December 5th, and who had been returned to hospital on December 14th for more efficient nursing had a positive Widal. She was too ill to remove to the Isolation Hospital and was nursed at Alma Road, due care being taken regarding infectivity. The bacteriological results of the staff and patients were now available, when it was found that a child, T. Q., aged 2.3/12th years, admitted 6th November, 1931, was Widal positive. Subsequently on 11th January, *B. typhosus* was found in his faeces although absent on January 7th. All the other cases were negative.

Concurrently with these examinations, investigations were being made at the houses of the infected nurses and patients, in particular of the Q. family, as information was elicited that three other members of the family (children) had been admitted to the Alma Road Hospital on 14th December, 1931, one of whom died a few hours after admission from pneumonia. One of the other children was also

considered to be suffering from pneumonia, and the other from general debility on admission. It was also stated that Mrs. Q. had got up from a sick bed in order to visit the first child prior to death. A complete bacteriological examination was then made on Mr. and Mrs. Q., when it was found that the latter had a positive Widal. She had been ill since December 1st.

About this time, 4th January, 1932, Mr. W. (4), the father of Nurse W. (1), who had been sleeping at home, came under the care of his private practitioner who on the 6th January took a specimen for Widal reaction, which was found positive up to 1/150. A blood culture taken the following day gave a pure growth of *B. typhosus*. He was removed to the Isolation Hospital on January 6th. The other members of the W. family, 3 in number, were found negative.

Before representing diagrammatically the course of the outbreak it should be observed that the original cases H. and the Q. family live next door to each other in very low standard houses with one W.C. to the two families and that (while it is denied) there is frequent coming and going between the two houses. The genealogical diagram would appear therefore to be as follows:—



No further case occurred, and there was one death.

The outside contacts were kept under observation and the staff and patients of the affected hospital block underwent a three weeks' quarantine from January 7th, no discharges or admissions being allowed.

The bacteriological investigations had reference to 30 persons, 10 positive cases and 20 negative cases, and numbered 88—24 Widal's, 13 blood cultures, 24 urines, and 27 faeces.

No reactions to the para-group were ever obtained.

BADSLEY MOOR LANE HOSPITAL.

The following table shows the classification of cases removed to the Borough Isolation Hospital, together with the result of treatment:—

Disease.	Cases notified during 1931	In hospital 31st Dec. 1930	Admissions 1931	Discharges 1931	Deaths 1931	Remaining in hospital 31st Dec. 1931	Total patient days.
Scarlet fever ...	119	10	109	109	—	10	3429
Diphtheria ...	188	26	188	196	6	12	7853
Typhoid fevers ...	7	2	8	2	1	7	75
Cerebro-spinal meningitis ...	52	—	62	21	41	—	1109
Other diseases ...	—	1	4	4	1	—	111
Total ...	366	39	371	332	49	29	12577

The average number of patients daily was 34.4

Of three cases notified as scarlet fever, there was 1 found to be suffering from erythema, 1 measles, and 1 erysipelas.

Four cases notified as diphtheria were found to be 2 pneumonia, 1 measles, and 1 tonsillitis.

One case notified as typhoid fever was found negative and the notification withdrawn.

One case of cerebro-spinal meningitis was admitted from outside the Borough by arrangement. Included in the figures for this disease are 16 cases, the notifications for which were withdrawn by the medical practitioners on the diagnosis not being confirmed.

Comparative annual case figures are given in the following summary:—

Year.	Scarlet fever.	Diphtheria.	Typhoid fevers.	Other diseases.	Total.
1927 ...	156	92	2	43	293
1928 ...	144	68	1	11	224
1929 ...	218	69	2	13	302
1930 ...	172	138	3	22	335
1931 ...	109	188	8	66	371
Total ...	799	555	16	155	1525

The following complications occurred amongst the cases treated:—

Scarlet Fever.				Diphtheria.			
Haematuria	...	...	2	Albuminuria	...	...	1
Albuminuria	...	...	4	Laryngeal obstruction	...	...	8
Adenitis	...	...	3	Cardiac irregularity	...	...	3
Otorrhoea	...	...	2	Strabismus	...	...	2

Surgical interference was required in three of the cases of laryngeal obstruction. There was one "return" case of scarlet fever and one of diphtheria.

CEREBRO-SPINAL FEVER.

In view of the prominence of this disease the following notes prepared by Dr. Underwood, the then Deputy Medical Officer of Health, who was in clinical charge of cases admitted to the Isolation Hospital, will be of medical interest.

"Clinical Features.—Most cases showed a very acute type of the disease. Although the typical signs of cerebro-spinal fever usually develop rapidly, interesting features were quite common. The incidence of rashes (32 per cent.) was lower than is generally found in such epidemics. Herpes developed in one-fifth of the confirmed hospital cases. Ocular manifestations of the disease were common and important in diagnosis. Of these inequality of the pupils or a sluggish reaction were very remarkable. Strabismus was also common, since it occurred in over a third of the cases. Conjunctivitis was fairly common, and amaurosis, iritis, conjunctival haemorrhage, and total ophthalmoplegia were also seen. Nystagmus or ptosis were never observed.

"Since in many cases death occurred early, numerous complications were not seen. Of those which were, nervous manifestations were the most important. Facial paralysis occurred in 3 cases; paralysis of the arm in 2; nerve deafness in 1; and internal hydrocephalus in 3. Pain in the joints occurred in 4 cases, but a typical acute arthritis was not seen.

"Serological findings.—Serological examination of the cerebro-spinal fluid by Dr. W. M. Scott, of the Ministry of Health, showed that in 75 per cent. of these the organisms were either of type 3 or of mixed type 1 and 3.

"Treatment.—The methods of treatment commonly employed in this disease—lumbar puncture at intervals of 12 to 24 hours, and the administration of serum by the intrathecal route, together with serum given intravenously in the early stages—were practised at the beginning of the epidemic. These measures did not meet with any remarkable success, and the failure must almost certainly be

attributed to the fact that the prevalent organism was the type 3 meningococcus, and also to the fact that type sera were not available. Hence, attempts were made by giving large doses of a polyvalent serum to increase in the body the concentration of the antiserum to the causal type of the meningococcus. For this purpose the intravenous route was mainly adopted; but by the withdrawal of large amounts of cerebro-spinal fluid it was possible to give much larger doses of serum intrathecally than those usually employed. In this way amounts of serum up to 80 c.c. could be given intrathecally. In children these routes were not so readily available, and the intraperitoneal route was then sometimes used. The operation of cisternal puncture was performed on 26 occasions for purposes of diagnosis or treatment. On seven occasions serum was given by this route. By these means amounts of serum of over 800 c.c. were frequently given to individual cases, and the greatest amount given to any one case was 1110 c.c. By using a concentrated product nearly 800 c.c. of serum were given intrathecally to one patient.

“ The outbreak is an illuminating example of the gravity of such an epidemic, and the necessity for the early provision of type sera. The outbreak may be compared with the Glasgow epidemic of 1929, in which a case-mortality rate of 83.6 per cent. was recorded. It would seem that, despite the use of serum, cerebro-spinal fever in its epidemic form can still be an extremely grave disease.”

In connection with the outbreak the following taken from the annual report of Dr. Turner, School Medical Officer, is worthy of notice :—

“ A remarkable incident, which well illustrates the difficulties which are encountered in trying to control such an epidemic, occurred in connection with a schoolgirl, living in an extremely poor neighbourhood, who contracted this disease on April 10th and who died in a few hours, before she could be removed to the Isolation Hospital. On April 15th I was hurriedly summoned to Thornhill School, where 81 children informed me with quiet pride that they had visited the house and viewed the body. All the schools in the neighbourhood were visited and the scholars questioned, with the result that the number of contacts was increased to 116 children and one student teacher. All these were excluded from school for three weeks and the children were visited by the school nurses, whilst a circular, urging the importance of immediate medical attention should any symptoms develop, was sent to all the parents. Fortunately, none of the contacts developed the disease.”

Subsequently, under Section 67 of the Rotherham Corporation Act, 1924, proceedings were instituted against the parent “ being the person in charge of the body of a person who had died of an infectious disease did permit or allow other persons unnecessarily to come into contact with the body.”

The defendant was fined 10/- and prominence given to the case in the local Press as a warning to others.

KIMBERWORTH HOSPITAL.

No cases of small-pox were admitted to Kimberworth Hospital during the year.

VACCINATION.

The County Borough is divided into two areas for the purpose of vaccination, the south-east, and the north-west, each with a vaccination officer and a public vaccinator.

Dr. T. V. Griffith, the Medical Officer of Alma Road Hospital, also acts as a public vaccinator.

The following are details extracted from the annual return forwarded to the Registrar-General, and relate to the year 1930:—

Number of yive births returned in birth list sheets	1,403
Number successfully vaccinated	628
Number insusceptible of vaccination	7
Number of conscientious objectors	660
Number who died unvaccinated	80
Number postponed by medical certificate	4
Number removed to other known districts	12
Number removed to places unknown	5
Number remaining on 31st January, 1932, not accounted for ...	7

Under the Public Health (Small-pox Prevention) Regulations, 1917, no vaccinations or revaccinations were performed.

PROPHYLAXIS OF DIPHTHERIA AND SCARLET FEVER.

During the year no Schick or Dick tests were performed, nor were any persons immunised.

SUPPLY OF DIPHTHERIA ANTITOXIN.

On application to the Health Department, concentrated diphtheria antitoxin is supplied free to all medical practitioners for use in the Borough.

During the year, 22 phials, equivalent to 110,000 units, were so supplied.

BACTERIOLOGICAL LABORATORY.

In the following table details are given of the examinations at the Public Health Laboratory made during 1931 :—

Examinations for :—	Positive.	Negative.	Doubtful.	Total.
Diphtheria	351	1540	1	1892
Tuberculosis	266	660	—	926
Typhoid fever	1	9	—	10
Gonorrhoea	91	85	22	198
Other examinations	131	169	1	301
Total	840	2463	24	3327

The following statement gives details of the specimens examined at the Bacteriological Laboratory of the University of Sheffield during the year 1931 :—

Wassermans	370
Cerebro-spinal fluid :	
Complete examinations	22
„ less colloidal gold	17
Examination for organisms	5
	44
	—
Blood cultures	8
	8
	—
Typhoid examinations :	
Blood	24
Urine	6
Faeces	7
	—
	37
Virulence tests :	
Ear swabs	2
Throat swabs	2
Nasal swabs	5
	—
	9
Milk examinations :	
Inoculation—T.B.	56
B. coli content	36
	—
	92
Other examinations :	
Swab from lung	1
Pus—organisms	3
Sputum—T.B.	2
Portion of lung	1
Water for bact. examination	2
Mussels—typhoid	2
Pleural fluid	1
	—
	12
	—
	572

NON-NOTIFIABLE ACUTE INFECTIOUS DISEASES.

The following table indicates the incidence of various non-notifiable acute infectious diseases prevalent amongst children attending the public elementary schools :—

Disease.	1927	1928	1929	1930	1931
Whooping cough ...	525	173	580	302	461
Mumps	160	877	148	202	419
Ringworm	637	547	242	264	290
Totals	1322	1597	970	768	1170

CANCER.

During the year, 84 deaths from cancer took place, as compared with 82 in 1927, 71 in 1928, 91 in 1929, and 88 in 1930.

Details are furnished in the following table regarding the location of the disease, together with the age and sex distribution.

Location of disease	Under 20 years		20—25		25—30		30—35		35—40		40—45		45—50		50—55		55—60		60—65		65—70		70—75		75—80		80—85		85 years & over		Grand total.	
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.			
Buccal cavity	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	-	2	-	-	-	-	-	-	-	8	-	8
Pharynx, œsophagus, stomach, M. liver & annexa F.	-	-	1	-	-	-	-	-	1	-	-	-	1	2	3	0	3	2	2	3	1	-	3	1	-	-	-	-	-	15	6	21
Peritoneum, intestines, M. and rectum F.	-	-	-	-	1	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	2	1	3	-	-	-	-	-	9	11	20	
Female genital organs	-	-	-	-	-	-	-	-	2	2	2	2	2	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	10	10	
Breast	-	-	-	-	-	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	7	7	7	
Skin	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other organs	-	-	-	-	1	-	-	-	1	1	1	1	1	1	1	1	1	2	2	3	3	2	2	1	1	1	1	1	11	7	18	
Totals	-	-	1	1	2	2	2	2	4	5	10	4	8	9	3	6	10	3	2	1	3	2	1	1	3	2	1	1	43	41	84	

The ratio of cancer deaths to deaths from all causes expressed as a percentage for the years 1927-31 is as follows:— In 1927 the percentage was 8.7; in 1928, 9.5; in 1929, 10.6; in 1930, 11.9, and in 1931, 10.0.

In accordance with Circular 1136 of the Ministry of Health certain enquiries have been carried out to ascertain whether, and if so, in what ways environmental, economic, social, and other conditions affected sufferers, and in a general way to survey the local means of dealing with the disease.

The co-operation of the local branch of the British Medical Association was secured after the points of the circular and the necessary enquiry forms had been discussed in detail. In all, 31 inquiry forms were sent out following cancer deaths as reported in the registration weekly returns. The first case dealt with occurred in July, so that only the last half of the year has been surveyed.

From the meagre information at present available it would be unwise to draw conclusions, but the striking points emerge that in nearly every instance there was a very short interval between the onset of premonitory symptoms and seeking medical advice, that the bulk of the cases were inoperable, and that death was not long delayed.

One must not forget, of course, that the information is obtained from questionnaire forms relating to cases which have died and which, therefore, present the blackest picture; but nevertheless the statistics are a grim reminder that even at its earliest, symptomatically, cancer may be hopeless.

INFLUENZA.

During the year 10 deaths occurred from influenza: 1 in January, 2 in February, 4 in March, 1 in June, 1 in August, and 1 in November.

A rota of women available for service as home helps was drawn up in the early part of the year, but no applications were made for their services.

CLEANSING AND DISINFECTION.

Two steam sterilizers are available, one at the Isolation Hospital and one at the Small-pox Hospital. Articles from premises where infectious disease has occurred are disinfected free of charge, whilst clothing, etc., from non-infectious cases is charged for at the rate of 5/- to cover costs.

Infected articles in the home are dealt with by fumigation, and infected premises by a combination of spraying and fumigation. In the case of books from the Public Library, these are returned to the Public Health Department direct, where they are fumigated in a special chamber. They are then sent to the library and kept there 14 days prior to re-issue.

With regard to verminous persons, children are dealt with at the School Clinics and adults at the contact block in the Isolation Hospital. Premises infected with vermin are subjected to a special spray.

REMOVAL OF INFIRM OR DISEASED PERSONS.

Under Section 101 of the Rotherham Corporation Act, 1928, which enables the Medical Officer of Health to apply to a court for an order for removal of an infirm or diseased person, one application was made to the Court during the year. An order was granted and the person was ultimately removed to the Institution of the Public Assistance Committee.

One other aged and infirm person was under observation and was ultimately persuaded to enter the institution without an order being obtained.

RATS.

Rat Week was observed in Rotherham, in accordance with the instructions of the Ministry of Agriculture and Fisheries, from November 2nd to November 7th inclusive. As in previous years, hardware dealers in traps, etc., and chemists in poisons were circularised and provided with bills, and asked to co-operate in making a window display.

The editorial leaderette in "Better Health" dealt with rats and mice, and gave similar advice to consult the department.

Reference to Rat Week was also made in the local Press.

The information available at the Health Department included the leaflet of the Ministry of Agriculture and Fisheries (No. 244), together with all the available trade circulars and pamphlets the department could get.

This year no ratcatchers were employed, but the addresses of those acting in a private capacity were procurable.

Very few applications for assistance were received at the Public Health Department as a result of the week's activities.

MOSQUITOES.

The year 1931 was fortunately one in which mosquitoes were not so troublesome as previously although several instances of severe illness were brought to notice. Specimens caught in the Borough and examined were found to be the common house mosquito (*Culex pipiens*).

SECTION VII.

TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1931.

Under the Public Health (Tuberculosis) Regulations, 1930, the number of cases of tuberculosis on the register of notifications on the 31st December, 1931, was 1095, classified as follows :—

Total cases ...	Pulmonary.			Non-pulmonary.		
	Males.	Females.	Total.	Males.	Females.	Total.
1095	481	400	881	105	109	214

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :—

Age periods. Years.	New cases.*				Deaths.			
	Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 ...	—	1	—	—	—	—	—	—
1-5 ...	—	1	4	5	—	—	2	3
5-10 ...	3	2	11	6	—	1	—	2
10-15 ...	6	2	6	3	1	—	1	—
15-20 ...	4	5	3	—	3	2	—	—
20-25 ...	9	17	2	1	1	4	2	1
25-35 ...	16	12	3	1	6	3	1	2
35-45 ...	12	9	—	1	6	1	—	—
45-55 ...	9	6	—	—	8	1	—	2
55-65 ...	2	4	—	—	1	3	—	—
65 and upwards ...	—	1	1	—	—	1	1	—
Totals ...	61	60	30	17	26	16	7	10

*Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year 1931.

The ratio of non-notified tuberculosis deaths to the total tuberculosis deaths was 1 in 6½. No action was required for cases of wilful neglect or refusal to notify.

No action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or Section 62 of the Public Health Act, 1926.

TUBERCULOSIS DISPENSARY.

The general routine work of the dispensary was carried out as in former years. As commenced in 1930, almost every new case was X-rayed as an out-patient—usually on the first day of his attendance. This arrangement permits the elimination or acceptance of many doubtfully tuberculous cases who would otherwise be admitted to the sanatorium as observation cases.

In addition, certain dispensary cases have attended the sanatorium as out-patients for ultra-violet ray therapy or for investigation by lipiodol.

The following return shows the work of the dispensary during the year 1931.

DIAGNOSIS.	Pulmonary				Non-pulmonary				Total				Grand total.	
	Adlts.		Child.		Adlts.		Child.		Adlts.		Child.			
	M	F	M	F	M	F	M	F	M	F	M	F		
A—New cases examined during the year (excluding contacts)														
(a) Definitely tuberculous ...	34	30	2	4	4	1	8	7	38	31	10	11	90	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	4	3	4	4	15	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	33	20	4	15	72	
B—Contacts examined during the year :—														
(a) Definitely tuberculous ...	—	1	1	—	—	—	4	—	—	1	5	—	6	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	—	—	—	—	—	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	3	3	3	3	12	
C—Cases written off the dispensary register as														
(a) Recovered ...	22	11	18	22	4	5	12	5	26	16	30	27	99	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the dispensary register as tuberculous) ...	—	—	—	—	—	—	—	—	37	25	9	20	91	
D—Number of cases on dispensary register on Dec. 31st :—														
(a) Definitely tuberculous ...	273	216	113	103	9	9	57	60	282	225	170	163	840	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	4	3	4	4	15	

1. Number of cases on dispensary register on January 1st ...	896	8. Number of visits by Tuberculosis Officer to homes (including personal consultations) ...	9
2. Number of cases transferred from other areas and cases returned after discharge under head 3 in previous years ...	13	9. Number of visits by nurses or health visitors to homes for dispensary purposes ...	2926
3. Number of patients transferred to other areas, cases not desiring further assistance under the scheme and cases "lost sight of" ...	17	10. Number of	
4. Cases written off during the year as dead (all causes) ...	42	(a) Specimens of sputum, &c., examined ...	164
5. Number of attendances at the dispensary (including contacts) ...	2035	(b) X-ray examinations made in connection with dispensary work ...	110
6. Number of insured persons under domiciliary treatment on the 31st December ...	79	11. Number of "recovered" cases restored to dispensary register and included in A(a) and A((b) above ...	1
7. Number of consultations with medical practitioners:—		12. Number of "T.B. plus" cases on dispensary register on 31st December ...	101
(a) Personal ...	3		
(b) Otherwise ...	192		

The 91 non-tuberculous persons revealed the following conditions:— bronchitis, 41; pulmonary fibrosis, 9; hilus enlargement, 8; no apparent disease, 6; anæmia 3; mitral stenosis, 3; asthma, 2; bursistis of knee, 2; goitre, 2; enteritis, 2; rickets, 2; and 1 each from anthracosis, bronchiectasis, chronic laryngitis, epistaxis, influenza, intestinal worms, lumbago, myalgia, myocarditis, organising pneumonia, and spinal curvature (traumatic).

The following summary shows the clinical condition of all patients at the end of 1931, classified as (a) pulmonay cases and (b) non-pulmonay cases, arranged according to the years in which they first came under public medical treatment:—

(a) PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the return relates.	Previous to 1926			1926			1927			1928			1929			1930			1931																	
	Class T. B. plus.			Class T. B. plus.			Class T. B. plus.			Class T. B. plus.			Class T. B. plus.			Class T. B. plus.			Class T. B. plus.																	
	Group 1.	Group 2.	Group 3.	Total (Class T. B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T. B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T. B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T. B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T. B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T. B. plus).												
Disease arrested—																																				
Adults M.	6	—	—	6	19	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
F.	—	2	—	2	16	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
Children	—	1	—	1	27	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
Disease not arrested	1	8	2	11	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
Adults M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
F.	—	2	—	2	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
Children	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
Condition not ascertained during the year ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
Total on dispensary register at 31st December ...	1	19	2	22	77	1	9	—	10	86	1	3	3	7	104	2	6	1	9	69	5	3	1	9	18	9	6	—	15	33	12	14	3	29		
Discharged as recovered	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Adults M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Children	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Lost sight of, or otherwise removed from dispensary register	1	6	—	7	34	1	1	2	4	27	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Adults M.	4	14	11	29	4	1	2	6	9	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Children	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total written off dispensary register ...	5	22	15	42	47	2	7	18	27	37	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
GRAND TOTALS ...	557	641	17	64	124	3	16	18	37	123	1	15	25	41	121	2	18	8	28	84	6	10	5	21	29	11	18	2	31	38	13	21	4	38		

(a) Remaining on dispensary register on 31st December.

(b) Not now on dispensary register and reasons for removal therefrom.

(b) NON-PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the return relates.	Previous to 1926				1926				1927				1928				1929				1930				1931									
	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.									
Disease arrested—																																		
Adults	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4				
Children	5	1	1	3	10	2	1	3	6	16	1	1	1	7	10	1	1	1	1	9	1	1	1	1	12	1	1	1	1	12				
Disease not arrested																																		
Adults	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4				
Children	4	1	3	1	9	2	1	1	1	5	1	1	1	1	4	3	1	1	1	6	2	4	1	1	7	3	1	1	5	7				
Condition not ascertained during the year																																		
Total on dispensary register at 31st December	10	1	5	4	20	4	2	2	6	14	9	3	7	19	5	1	1	8	15	3	1	1	10	15	9	2	3	14	28	7	4	13	24	
Transferred to pulmonary																																		
Discharged as recovered	1	1	1	2	5	2	1	1	4	10	2	1	1	4	8	1	1	1	3	6	1	1	1	3	5	1	1	1	3	4	1	3	5	
Lost sight of, or otherwise removed from dispensary register	3	3	2	12	20	7	1	1	3	11	1	1	1	4	6	1	1	1	3	6	1	1	1	3	5	1	1	1	3	4	1	3	5	
Dead—																																		
Adults	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	4	
Children	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	1	1	4	1	1	4	
Total written off dispensary register	22	7	8	28	65	7	2	2	9	20	1	2	5	10	2	3	2	3	11	16	1	1	1	1	4	1	1	2	4	7	4	13	24	
GRAND TOTALS of (a) and (b) excluding those transferred to pulmonary	32	8	13	32	85	11	4	4	15	34	10	5	2	12	29	6	1	1	10	18	3	1	1	11	16	10	2	3	15	30	7	4	13	24

(a) Remaining on dispensary register and reasons for removal therefrom.
 (b) Not now on dispensary register and reasons for removal therefrom.

OAKWOOD HALL SANATORIUM.

During the year the sanatorium has continued to play effectively its part as a diagnosis and treatment centre for tuberculosis. The allocation of beds remains as in previous years, 70 beds being available for Borough cases and 30 beds for patients of the West Riding County Council.

One hundred and 39 Borough cases and 90 West Riding cases were admitted during the year. Of these cases, 131 were discharged, while 8 died. The following table analyses in greater detail the Borough admissions and discharges during the year:—

Number of patients in hospital.				1/1/31	Admitted.	Discharged.	Died.	31/12/31
Observation cases.	Adults.	M.	...	2	11	11	—	2
		F.	...	1	4	5	—	—
	Children		...	—	5	4	—	1
Total ...				3	20	20	—	3
Accepted cases.	Adults.	M.	...	27	52	48	7	24
		F.	...	17	42	39	1	19
	Children		...	23	25	24	—	24
Total ...				67	119	111	8	67
Grand total ...				70	139	131	8	70

The following table gives particulars of the 20 observation cases who were discharged from the sanatorium during the year:—

Diagnosis on discharge from observation	For pulmonary tuberculosis.						For non-pulmonary tuberculosis.						Totals		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks			M	F	Ch
	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch			
Tuberculous ...	2	—	1	2	2	1	1	—	—	2	—	—	7	2	2
Non-tuberculous ...	—	—	—	3	3	2	—	—	—	1	—	—	4	3	2
Doubtful ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ...	2	—	1	5	5	3	1	—	—	3	—	—	11	5	4

The immediate results of the treatment of definitely tuberculous patients discharged from the sanatorium during the year are given in the following table:—

Classification on admission to the institution.	Condition at time of discharge.	Duration of residential treatment in the institution.															Grand totals.				
		Under 3 months.			3—6 months.			6—12 months.			More than 12 months.			Totals.							
		M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch					
PULMONARY TUBERCULOSIS.		Class TB minus.	Quiescent ...	...	...	2	1	2	3	2	4	2	1	1	—	—	7	7	4	18	
			Not quiescent ...	...	...	2	6	1	6	3	1	4	4	—	—	3	—	12	16	2	30
			Died in institution ...	...	...	1	—	—	2	—	—	—	—	—	—	—	3	—	—	3	
PULMONARY TUBERCULOSIS.		Class TB plus Group 1.	Quiescent ...	...	...	—	—	—	—	—	—	—	—	—	—	—	3	—	—	3	
			Not quiescent ...	...	...	3	—	1	3	2	—	—	1	—	—	—	6	3	1	10	
			Died in institution ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
PULMONARY TUBERCULOSIS.		Class TB plus Group 2.	Quiescent ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			Not quiescent ...	...	...	8	1	—	2	3	—	3	2	—	4	1	—	17	7	—	24
			Died in institution ...	...	...	1	—	—	2	—	—	—	—	1	—	—	4	—	—	4	
PULMONARY TUBERCULOSIS.		Class TB plus Group 3.	Quiescent ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			Not quiescent ...	...	...	—	2	—	1	—	—	1	—	—	—	—	2	2	—	4	
			Died in institution ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
NON-PULMONARY TUBERCULOSIS.		Bones and joints.	Quiescent ...	...	...	1	—	—	—	—	2	—	—	—	—	1	4	1	1	6	8
			Not quiescent ...	...	...	—	—	—	—	—	—	—	2	—	—	1	—	—	3	—	3
			Died in institution ...	...	...	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1
NON-PULMONARY TUBERCULOSIS.		Abdominal.	Quiescent ...	...	...	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	1
			Not quiescent ...	...	...	—	1	—	—	—	—	1	1	—	—	—	—	2	1	—	3
			Died in institution ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
NON-PULMONARY TUBERCULOSIS.		Other organs.	Quiescent ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			Not quiescent ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			Died in institution ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
NON-PULMONARY TUBERCULOSIS.		Peripheral glands.	Quiescent ...	...	...	—	—	—	—	—	—	—	4	—	—	—	—	—	4	—	4
			Not quiescent ...	...	...	—	—	—	1	—	—	—	1	—	—	1	—	1	2	—	3
			Died in institution ...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

17 patients were admitted for one day for lipiodol treatment.

The most important addition to the equipment during the year was the installation of two ultra-violet ray lamps, which were kindly given by Mr. John P. Ridsdale. One of the lamps is a Jessionek lamp, which is used for general light baths. The other is a Kromayer lamp, water-cooled, and it is used for intensive ultra-violet ray application to local conditions such as lupus, superficial ulcers, sinuses, etc. The installation of these lamps was completed in July, and treatment was begun on July 31st. The lamps have been in almost daily use since then in the treatment of 35 patients.

The results obtained from general light treatment only (Jessionek lamp) at the end of the year are as follow :—

	Very much improved	Much improved.	Improved.	Not improved.	Total.
Pulmonary	1	1	—	5	7
Non-pulmonary	3	9	6	3	21
Total	4	10	6	8	28

It should be noted that the table includes all cases who were having or had had treatment at the end of the year. Many cases, therefore, who had only a short course of treatment are included.

Six patients have had combined local and general treatment by the Kromayer and Jessionek lamps. Of these, two are very much improved and four are much improved.

Only one case had local treatment by the Kromayer lamp without general treatment. This was an out-patient with a sinus from a tuberculous rib of many years' standing. After a preliminary improvement, he relapsed.

The X-ray plant continues to give extremely satisfactory results. Radiographs are taken as a routine in all cases of pulmonary, and also bone and joint tuberculosis, and in all suspected cases. Its employment has greatly facilitated the diagnosis in difficult cases, and the control of treatment in those cases in which the diagnosis has been established.

It is indispensable in the control of collapse therapy by artificial pneumothorax, the value of which method has in recent years become undisputed. During the latter part of the year this method was tried in 6 cases. In only 3 of these could good collapse be obtained. Of the remaining 3 cases, induction was prevented in one case by dense pleural adhesions, and the treatment was abandoned in two cases because the "pocket" obtained was too small to allow satisfactory collapse. Those cases in which good collapse was obtained show a very definite and satisfactory degree of improvement.

The installation of the X-ray apparatus has also enabled a most useful method of diagnosis to be utilised, that of bronchography by the injection of lipiodol. The injection is usually made by the intereroid route, though in a few cases the supraglottic route was used. Thirty-seven such examinations have been made in

cases where the diagnosis was in doubt, for example, bronchiectasis, lung abscess, and malignant disease. Although the injection is made primarily for diagnostic purposes, it is noteworthy that many patients state, a few days afterwards, that they feel improved and that the amount of sputum is lessened.

Despite these improvements in methods and equipment, there still remains a large blank in the local scheme for the treatment of tuberculosis. The provision of dental treatment for sanatorium and necessitous dispensary patients is no longer merely advisable; it is imperative. We cannot claim to have an up-to-date tuberculosis service until this want is remedied. Oral sepsis is bound to militate against the benefit of sanatorium treatment and to be prejudicial to the chances of improvement. Some scheme for dental treatment of tuberculous patients has been adopted by most local authorities, including the West Riding County Council.

The Boy Scout movement continues to flourish, due to the untiring and enthusiastic efforts of Mr. George Chatterton and Mr. William Lucas. Under the guidance of these rover scouts, the boys are taught many useful handicrafts, such as the making of various kinds of baskets, trays, mats, and also leather work and cane chair repairing. Over 200 such articles were sold during the year to patients, their visitors, the staff, and their friends. No profit is made, the receipts merely covering the cost of manufacture. It is to be hoped that in the near future a suitable market will be obtained for these articles.

The sanatorium continues to be an active training school for nurses. During the year four nurses sat the final examination for the certificate of the Tuberculosis Association, all being successful, one of them, Miss Marshall, passing with honours.

ALMA ROAD HOSPITAL.

In the following extract from T. 145 of the Ministry of Health, the position with regard to the number of beds available for the treatment of tuberculosis in the Alma Road Hospital as on 31st December, 1931, is given. For pulmonary cases there are 21 beds, 15 for adults and 6 for children under 15 years of age. For non-pulmonary cases there are no definite beds provided, but the patients are nursed in the general wards.

The following table shows the number of patients treated in the hospital during the year who were chargeable to the Rotherham County Borough Council:—

Number of patients in hospital.			1/1/31	Admitted.	Discharged	Died.	31/12/31
Pulmonary cases.	Adults.	M. ...	3	9	4	3	5
		F. ...	4	8	6	2	4
	Children	... ..	—	4	1	1	2
	Total ...	... ..	7	21	11	6	11
Non-pulmonary cases.	Adults.	M. ...	2	1	1	2	—
		F. ...	2	1	1	1	1
	Children	... ..	3	4	3	2	2
	Total ...	... ..	7	6	5	5	3
Grand total			14	27	16	11	14

TUBERCULOSIS CARE COMMITTEE.

While the Tuberculosis Care Committee is a voluntary one, reference to tuberculosis work in the County Borough would be incomplete were its activities to pass unnoticed in an official report. Accordingly, in the following a general extract of the committee's second annual report is made. It will be remembered that the Tuberculosis Care Committee was inaugurated in October, 1929, and that the first month dealt with its activities for the few months of that year as well as the subsequent one.

The year 1931, the year covered by the second report, was a particularly trying one, being one of acute distress and economic disturbance, so that extensions of schemes originally visualised by the committee were greatly impeded.

Financially, the year closed with a smaller balance than at its commencement.

The provision of extra nourishment during the year proved to be a heavy burden on the funds. Had sufficient income been forthcoming, the committee would have been able to extend their activities instead of having had all along to husband their resources to meet any possible liabilities on schemes already commenced.

The Public Health Committee of the Rotherham Corporation again made a grant of £140 towards their expenditure in providing extra nourishment to suitable cases, and also a grant of £20 towards the cost of secretarial expenses, printing, and stationery. With the passing of the Local Government Act, 1929, and the

consequent change from the 50 per cent. grant in aid system to the block grants, the Council are now permitted (Circular 1072, paragraph 9) to extend the arrangements for the supply of extra nourishment to tuberculous patients beyond the previous limit of £2 per 1,000 of population, but the need for economy and the severe pruning which the Corporation have applied to their expenditure have not permitted this grant to be increased. It has, therefore, been necessary to apply the previous conditions, as outlined by the Ministry of Health, to the cases assisted by the Corporation fund in order to keep within the limits of their grant, and to assist all other cases out of the voluntary fund.

Out of the Corporation fund 44 persons received grants amounting to £169 12s. 6d., and from the voluntary fund 35 persons received grants amounting to £124 18s. 10d. In all, 409 grants were made of milk, eggs, meat, clothing, oil, and malt.

During the year the committee have worked in close co-operation with the Public Assistance Committee. Information regarding the grants made to cases was supplied to them for central index purposes, to prevent overlapping of effort, and towards the end of the year an arrangement was arrived at between the Public Health and the Public Assistance Committees whereby the last-named committee would be prepared to accept the Tuberculosis Officer's certificate for grants of extra medical necessities, which include grants of extra nourishment. This arrangement will considerably assist in the conservation of the voluntary fund grants to cases in receipt of Public Assistance relief.

The scale of income adopted in connection with grants remains the same.

The committee continued to utilise the spare ground in College Street as a car park until it was required for street improvement purposes. The committee then transferred the car park back to Corporation Street on April 6th, and whilst for the first few months after transference the park did not pay its way, towards the close of the year income improved and met the expenditure. In order to meet the wishes of the motorists, and also to popularise the car park, the committee instituted a system of weekly tickets, and this scheme commenced on August 17th. The charge for the ticket is 1s. 6d. per week, and this allows unlimited parking during that period. The income from these tickets has justified the experiment, and the exchange tickets which are issued each time of parking show that on total the cost is very little less than the 4d. charge which is normally made. The cost of printing and stationery has been kept to a minimum by allowing advertisements on the back of the car park labels.

A really regrettable feature of the year 1931 has been the virtual forcing out of existence of the Employment Sub-committee. In the original scheme, it was intended that the work of this sub-committee would be to obtain suitable employment for ex-sanatorium patients with the aid of the Employment Exchange; but in these days of industrial depression, particularly so in Rotherham and its surrounding districts, when hundreds of able-bodied men are out of work and unable to get employment, there is little chance for the tubercular sufferer. It is certain that this position will remain until the whole economic situation improves.

Another question which has been considered by the committee during the past year has been assistance towards obtaining houses in better surroundings for tubercular cases.

It is widely recognised that housing has much to do with the onset and cause of tuberculosis in the human being and with his ultimate recovery or death.

Similarly, it is well known that, following the beneficial effect of sanatorium residence and efficient treatment, much of the good obtained is negated by a return to less healthy surroundings. Again, the liability to infect others is much enhanced by insufficiency of room, darkness, and the other evils of bad housing. Already in some towns this knowledge has been translated into something practical.

It should be borne in mind that where a reduced rent might need to apply would be where the head of the household is the patient—unable to work or not in receipt of enough money through broken work to meet the rent expenses.

If the committee had sufficient funds they would be able to assist these cases by granting small subsidies towards their rent.

There is also the question of grants of clothing, surgical requisites, etc., which cannot be undertaken without sufficient funds. Assistance in providing artificial teeth is even more necessary, but the cost of these essentials of good health is the only reason why this form of assistance cannot at present be developed.

SECTION VIII.

VENEREAL DISEASES.

The attendances at the Venereal Diseases Centre show a slight increase for the year. There is little change in routine treatment. The treatment of gonorrhœa remains the same; a new transformer has been obtained to replace the old accumulators used with the urethroscope; this gives a much more satisfactory working light which is dependable.

In the treatment of syphilis the newer bismuth preparations have given decidedly better results, particularly in the treatment of congenital cases. The best preparation appears to be bismuth sub-salicylate in an oil medium, originally a German preparation; this is now being obtained from British laboratories, and is not expensive in use. The treatment of primary cases remain the same, namely, stabilarsan and sulphostab in conjunction with metallic bismuth. The metallic bismuth previously used has been superseded by a collosol bismuth which, while being apparently just as efficient in other directions, does not cause local inflammation encysting deposits of bismuth in the tissues. Bismuth treatment of late (tertiary) cases shows some slight improvement, with a definite reduction in cost.

The female day at the centre has been changed from Thursday (local early closing day) to Friday, enabling patients from outside the Borough to have prescriptions made up on the day of attendance, thus saving double journeys.

These alterations in clinics came into operation on 5th June, 1931, and the present scheme is outlined in the following copy of the official circular letter.

COUNTY BOROUGH OF ROTHERHAM.

PUBLIC HEALTH DEPARTMENT.

TREATMENT OF VENEREAL DISEASES.

CENTRE.

The Centre for the treatment of venereal diseases is situated at No. 12, Frederick Street, in the same building as the Tuberculosis Dispensary.

The Medical Officer is in attendance every week-day at 9.30 a.m.

CLINICS.

Clinics, which are always attended by the Medical Officer, are held as follows :—

For MEN :

Tuesday	...	...	...	...	9.30 a.m. to 11 a.m.
					5.30 p.m. to 8 p.m.
Wednesday	...	...	...	...	5.30 p.m. to 8 p.m.

For WOMEN and CHILDREN :

Friday	...	...	...	...	11.30 a.m. to 12.30 p.m.
					6 p.m. to 8 p.m.

INTERMEDIATE TREATMENT.

The Centre is open for intermediate treatment at the following times :—

For MEN :

Every week-day morning, 9.30 a.m. to 11 a.m.
 Every week-day evening (except Friday), 5.30 p.m. to 8.30 p.m.
 Prophylactic treatment can be given during the above hours.

For WOMEN and CHILDREN :

Every week-day morning, 11.30 a.m. to 12.30 p.m. (by appointment).
 Also Friday, 6 p.m. to 8 p.m.
 A Nurse is in attendance.

PATHOLOGICAL INVESTIGATIONS.

Patients may be sent to the Centre for consultations or for pathological investigations, such as :—

- (a) The taking of blood for Wassermann re-action.
- (b) The preparation of smears and their examination for gonococci.
- (c) The preparation of smears and their examination for spirochaetes by dark-ground illumination.
- (d) Urethroscopic examination.

If desired, patients may continue to be treated by their own medical attendants, who will be informed by letter of the result of the pathological investigation.

SECRECY.

Strict secrecy is observed. For the sake of greater privacy, appointments may be arranged beforehand by letter or telephone.

APPARATUS.

Apparatus for taking blood or smears can be supplied on loan.

URGENT CASES.

Urgent cases can usually be seen at any time if notice is first given by telephone.

IN-PATIENTS.

Provision has been made for the treatment of in-patients of both sexes.

FREE TREATMENT.

All treatment is FREE.

TELEPHONE.

From 9 a.m. to 8.30 p.m. (week-days) " Rotherham 231."
 At other times " Rotherham 888."

In the following table details are given concerning patients dealt with during the last five years.

Total number of persons dealt with during the year at or in connection with the out-patient clinic and suffering from :	1927			1928			1929			1930			1931		
	Number of persons who were under treatment on 1st January, 1927.	Number of persons dealt with during the year for the first time.	Total.	Number of persons who were under treatment or observation on 1st January, 1928.	Number of persons dealt with during the year for the first time.	Total.	Number of persons who were under treatment or observation on 1st January, 1929.	Number of persons dealt with during the year for the first time.	Total.	Number of persons who were under treatment or observation on 1st January, 1930.	Number of persons dealt with during the year for the first time.	Total.	Number of persons who were under treatment or observation on 1st January, 1931.	Number of persons dealt with during the year for the first time.	Total.
Syphilis	40	53	93	59	48	107	66	23	89	58	61	119	88	28	116
Soft chancre	—	10	10	3	13	16	—	2	2	1	6	7	—	—	—
Gonorrhoea	79	81	160	95	111	206	90	98	188	84	101	185	74	73	147
Conditions other than venereal ...	8	51	59	1	43	44	—	78	78	13	59	72	8	63	71
Totals	127	195	322	158	215	373	156	201	357	156	227	383	170	164	334

Total attendances of all patients during the year at the out-patient clinic

1927 1928 1929 1930 1931

7880 8639 8952 9094 9116

Aggregate number of "in-patient days" of treatment during the year ...

206 92 257 32 31

In the following table is given the return relating to all persons who were treated at the Rotherham centre during the year ended 31st December, 1931.

	Syphilis		Soft chancre		Gonorrhoea		Con- ditions other than venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
1. Number of cases on 1st January under treatment or observation ...	54	29	—	—	37	25	1	2	92	56	148
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ...	3	2	—	—	10	2	2	3	15	7	22
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under item 4) suffering from :—											
Syphilis, primary ...	4	3	—	—	—	—	—	—	4	3	7
„ secondary ...	1	—	—	—	—	—	—	—	1	—	1
„ latent in 1st year of infection ...	2	1	—	—	—	—	—	—	2	1	3
„ all later stages ...	2	5	—	—	—	—	—	—	2	5	7
„ congenital ...	2	6	—	—	—	—	—	—	2	6	8
Soft chancre ...	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection ...	—	—	—	—	47	13	—	—	47	13	60
„ later ...	—	—	—	—	8	—	—	—	8	—	8
Conditions other than venereal ...	—	—	—	—	—	—	50	13	50	13	63
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other centres for the same infection ...	2	—	—	—	3	2	—	—	5	2	7
TOTALS OF ITEMS, 1, 2, 3 AND 4	70	46	—	—	105	42	53	18	228	106	334
5. Number of cases discharged after completion of treatment and final tests of cure (see item 15) ...	4	—	—	—	6	1	52	15	62	16	78
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary ...	9	2	—	—	—	—	—	—	9	2	11
„ secondary ...	—	—	—	—	—	—	—	—	—	—	—
„ latent in 1st year of infection ...	—	—	—	—	—	—	—	—	—	—	—
„ all later stages ...	6	8	—	—	—	—	—	—	6	8	14
„ congenital ...	5	3	—	—	—	—	—	—	5	3	8
Soft chancre ...	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection ...	—	—	—	—	38	11	—	—	38	11	49
„ later ...	—	—	—	—	7	5	—	—	7	5	12

	Syphilis		Soft chancre		Gonorrhoea		Con- ditions other than venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
	7. Number of cases which ceased to attend after completion of treatment but before final tests of cure (see item 15)	3	—	—	—	1	2	—	—	4	2	6
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	3	1	—	—	4	—	—	—	7	1	8
9. Number of cases remaining under treatment or observation on 31st December	40	32	—	—	49	23	1	3	90	58	148
TOTALS OF ITEMS 5, 6, 7, 8 AND 9 ... (These totals should agree with those of items 1, 2, 3 and 4)	70	46	—	—	105	42	53	18	228	106	334
10. Number of cases in the following stages of syphilis included in item 6 which failed to complete one course of treatment :—											
Syphilis, primary	4	2	—	—	—	—	—	—	4	2	6
„ secondary	—	—	—	—	—	—	—	—	—	—	—
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	2	2	—	—	—	—	—	—	2	2	4
„ congenital	3	2	—	—	—	—	—	—	3	2	5
11. Number of attendances :—											
(a) for individual attention of the medical officers	1228	756	—	—	634	367	71	65	1933	1188	3121
(b) for immediate treatment, e.g., irrigation, dressing	34	2	—	—	4919	670	324	46	5277	718	5995
TOTAL ATTENDANCES	1262	758	—	—	5553	1037	395	111	7210	1906	9116
12. In patients :—											
(a) Total number of persons admitted for treatment during the year	—	—	—	—	—	2	—	—	—	2	2
(b) Aggregate number of “in-patient days” of treatment given	—	—	—	—	—	31	—	—	—	31	31
	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
13. Number of cases of congenital syphilis in item 3 above classified according to age periods	1	—	—	—	1	5	—	1	2	6	

	Arsenobenzene Compounds	Mercury	Bismuth		
14. Chief preparations used in treatment of syphilis :—	Stabilarsan Sulphostab.	Pil. hydrarg. co. Pil. hyd. iod.	Bismostab Bismogenol.		
(a) Names of preparations					
(b) Total number of injections given (out-patients and in-patients)	598	—	885		
(c) Number of injections <i>included in (b)</i> given to patients who on first attendance at this centre were suffering from primary and secondary syphilis	128	—	219		
15. Are the tests recommended in Memo. V21 as amended by Memo, V21A followed in deciding as to the discharge of the patient after treatment and observation for syphilis and gonorrhoea?	Yes				
If not, in what way are they modified?	—				
	Microscopical		Serum tests		
	For spirochetes	For gonococci	Wassermann	Others for syphilis	For gonorrhoea
16. Pathological Work :—					
(a) Number of specimens examined at and by the Medical Officer of the treatment centre	—	171	—	—	—
(b) Number of specimens from patients attending at the centre sent for examination to an approved laboratory	—	—	180	—	—

The following is a statement showing the services rendered at the treatment centre during the year, classified according to the areas in which the patients resided :—

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Rotherham	Yorks. W.R.	Sheffield	Hull	London	Derbyshire C.C.	Scotland	Total
A. Number of cases in item 3 from each area found to be suffering from :—								
Syphilis	16	8	-	-	1	1	-	26
Soft chancre	-	-	-	-	-	-	-	-
Gonorrhoea	41	26	-	-	-	-	1	68
Conditions other than venereal	26	34	2	-	1	-	-	63
Total	83	68	2	-	2	1	1	157
B. Total number of attendances of all patients residing in each area	6246	2732	8	59	13	49	9	9116
C. Aggregate number of " in-patient days " of all patients residing in each area	31	-	-	-	-	-	-	31
D. Number of doses of arsenobenzene compounds given in the out-patient clinic and in-patient department to patients residing in each area	344	229	-	-	-	25	-	598

The pathological work performed during the past five years in connection with venereal diseases is summarised in the following :—

	For detection of			For Wassermann re-action.				
	Spirochetes.	Gonococci.	Organisms. other					
Examinations of pathological material :—								
(a) Specimens which were examined at the Public Health Laboratory during the years :—								
1927	5	123	—	—
1928	—	117	—	—
1929	—	407	—	—
1930	2	280	—	—
1931	—	171	—	—
(b) Specimens from persons attending at the treatment centre which were sent for examination to an approved laboratory during the years :—								
1927	—	—	—	209
1928	—	—	—	230
1929	—	—	—	191
1930	—	—	1	195
1931	—	—	—	180

Besides the 180 tests for the Wassermann re-action which were sent from the Centre, there were 190 tests for Wassermann re-action sent to the Sheffield University Bacteriological Laboratory on behalf of local medical practitioners.

The following statement gives the return relating to all patients who have been in residence at the venereal diseases hostels during the year 1931 :—

SECTION IX.

MATERNITY AND CHILD WELFARE.

MIDWIVES.

During the year ending December 31st, 1931, 20 midwives notified their intention to practice in the County Borough. Of this number, 15 were trained midwives holding the certificate of the Central Midwives Board, and the remaining five were bona-fide midwives who were in practice prior to the passing of the Act of 1902.

Sixteen of the midwives live in the town; the remaining number live outside, but take cases within the Borough.

The year has been singularly free from suspensions; only two cases occurred. One, following a case of pemphigus, was for a period of 48 hours only whilst disinfection was carried on. The second case was due to the midwife's ill-health.

Every midwife resident within the Borough was visited by the Local Authority's inspector four times during the year, when her house, bags, and appliances, and all her records were examined. In addition to these routine inspections, 51 special visits were paid to deal with various matters which arose in connection with their work.

The statistics for 1931 are given in the following table:—

Certificate number.	No. of cases.	Infants born alive.		Dead.	Died within 3 days.	Feeding.		Ophthalmia.	Puerperal fever.	Puerperal pyrexia.	Pemphigus.	Mothers dead.	Illegitimate.	Twins.	Medical aid		
		Stillborn.	Breast entirely.			Breast &/or artificial.	Ante natal.								Neo and post natal.	For infant.	
57198	53	51	3	3	2	43	8	-	-	-	-	-	2	1	20	22	3
71407	7	7	-	1	-	6	1	-	-	-	-	-	-	-	2	2	-
24756	14	14	-	-	-	14	-	-	-	-	-	-	-	-	1	-	3
8590	9	9	-	-	-	9	-	-	-	-	-	-	-	-	-	2	1
4924	21	20	1	-	-	19	1	-	-	-	-	-	1	-	-	17	6
5767	2	2	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-
40344	35	35	-	3	-	31	4	-	-	-	-	-	-	-	-	-	-
2910	42	40	3	3	1	28	12	-	-	-	-	-	2	1	2	11	1
69545	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-
3857	55	55	-	6	2	44	11	-	-	-	-	-	2	-	13	16	7
44515	42	42	1	3	1	40	2	1	-	-	-	-	-	1	77	14	12
70641	34	33	2	-	-	27	6	-	-	-	-	-	-	1	12	10	8
40576	41	35	6	1	-	29	6	1	-	-	-	-	-	-	2	9	2
34006	64	64	1	1	-	52	12	-	-	-	2	-	-	1	43	29	13
55602	4	4	-	-	-	4	-	-	-	-	-	-	-	-	-	2	-
45089	65	63	2	4	-	57	6	-	-	-	-	-	-	-	26	36	32
64479	25	25	-	-	-	20	5	-	1	1	-	-	-	-	2	7	1
66154	50	49	1	3	1	44	5	-	-	1	-	-	1	-	4	13	1
47557	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
71521	5	5	-	-	-	5	-	-	-	-	-	-	-	-	-	1	-
Total	569	554	20	28	7	475	79	2	1	2	2	-	8	5	204	192	90

ANTE-NATAL AND POST-NATAL CLINICS.

During the year, two additional clinics were commenced for ante-natal work in extension of the clinic held at the Ferham House Maternity Home, which for the past ten years has been held chiefly for patients prior to admission. District cases were accepted at this clinic, but with the growth of these cases attending, a separate clinic was opened during the year, and also one at the Alma Road Hospital for its own cases prior to admission to the maternity ward.

During the year a total of 1,482 attendances was made by 450 expectant mothers attending these clinics, which represents 33.8 per cent. of the total notified births and still births. There was an average attendance of 10.9 per session held.

FERHAM HOUSE MATERNITY HOME ANTE-NATAL CLINIC.

During the year, 290 cases attended, of which 49 were midwives' cases and 6 referred to the clinic by doctors. Of the remainder, 223 cases were booked for the Maternity Home, 5 were referred to the Alma Road Hospital before booking, and 7 decided to stay at home for their confinement.

The comparative figures for the past five years are as follow :—

Year.	Number who attended for the first time.	Number of examinations made.	Average attendance per session.
1927 ...	270	698	13
1928 ...	332	894	17
1929 ...	273	1059	20
1930 ...	345	1009	20
1931 ...	290	1020	20

DISTRICT CLINIC, FERHAM HOUSE.

The above clinic commenced in May, 1931, with the threefold object of dealing with ante-natal cases, post-natal cases, and the giving of advice on birth control within the limits laid down for municipal authorities in the Ministry's memorandum on the subject. The sessions were held on Tuesday mornings.

Dr. Alice White was appointed to take charge of this clinic. Unfortunately, the continuity of the work was interrupted by the ill-health of Dr. White, for whom a locum had frequently to deputise in her absence. It is safe to assume that there is loss of confidence by the mothers in an institution at which they are examined by a different doctor at each visit.

Towards the end of the year, it was suggested that morning sessions might not be so readily attended as afternoon sessions, and when Dr. N. Boyd was appointed to succeed Dr. White it was decided to change the time from 9.30 a.m. on Tuesdays to 2.30 p.m. on Mondays. The change has resulted in a 100 per cent. increase, and, therefore, has been perfectly justified.

The following table indicates the work from 1st May to 31st December, 1931 :—

Sessions held.	Number who attended for the first time.	Number of examinations made.	Average attendance per session.
34	Ante-natal ... 98	235	8.3
	Post-natal ... 34	47	
	Total ... 132	282	

Of the 132 cases who attended, 67 were referred to the clinic by midwives, 25 were referred by health visitors, 6 were referred by the Maternity Home, 20 were referred from the Child Welfare Centres, and 14 attended on their own.

ANTE-NATAL CLINIC, ALMA ROAD HOSPITAL.

A clinic in connection with the maternity ward of the Alma Road Hospital commenced early on in the year. At the 50 sessions held, 62 patients attended and made 227 attendances.

FERHAM HOUSE MATERNITY HOME.

During the year the number of babies born in the home was 192, an increase of 13 on the previous year.

Regular courses of lectures to pupil midwives have been given, and all pupils attached to the staff of the home have been successful in obtaining the certificate of the Central Midwives' Board.

The statistics for the year 1930 are given in the following table:—

1	Number of beds	...	...	...	...	...	...	...	10
2	Number of cases admitted during 1931	...	...	...	...	...	...	...	222
3	Average duration of stay	...	...	...	...	...	...	...	11.6 days
4	Number of cases delivered by—								
	(a) midwives	...	...	...	...	...	...	...	187
	(b) doctors	...	...	...	...	...	...	...	5
5	Number of cases in which medical assistance was sought by the midwife	...	...	...	...	...	...	...	84
6	Number of cases notified as								
	(a) puerperal fever	...	...	...	...	...	...	...	—
	(b) puerperal pyrexia	...	...	...	...	...	...	...	4
7	Number of cases of pemphigus neonatorum	...	...	...	...	...	...	...	—
8	Number of infants not entirely breast fed while in the Institution	...	...	...	...	...	...	...	2
9	Number of cases of ophthalmia neonatorum with result of treatment in each case	...	...	...	...	...	...	...	1 cured
10	Number of maternal deaths	...	...	...	...	...	...	...	—
11	(a) Number of foetal deaths								
	(i) stillborn...	...	...	...	...	...	...	...	5
	(ii) within 10 days of birth	...	...	...	...	...	...	...	4
	(b) Cause of death in each case, and results of postmortem examination (if obtainable).								

STILLBORN.

1. Central placenta praevia.
2. Accidental haemorrhage.
3. Monster.
4. Early rupture of membranes and prolonged first and second stages.
5. Syphilis ; mother, Wassermann reaction negative.

WITHIN 10 DAYS OF BIRTH.

1. Prematurity.
2. Asphyxia.
3. Haemorrhagic purpura.
4. Intercranial haemorrhage following birth injuries.

ALMA ROAD HOSPITAL.

The following table gives particulars for the year 1931 of the cases dealt with at the maternity ward at the Alma Road Hospital.

1	Number of beds	15
2	Number of cases admitted during 1931	146
3	Average duration of stay	15 days
4	Number of cases delivered by—	
	(a) midwives	104
	(b) doctors	32
5	Number of cases in which medical assistance was sought by the midwife	42
6	Number of cases notified as—	
	(a) puerperal fever	—
	(b) puerperal pyrexia	—
7	Number of cases of pemphigus neonatorum	—
8	Number of infants not entirely breast fed while in the Institution	15
9	Number of cases of ophthalmia neonatorum with result of treatment in each case	—
10	Number of maternal deaths	—
11	Number of foetal deaths—	
	(i) stillborn	14
	(ii) within 10 days of birth	10

Cause of death in each case, and results of post mortem examination.

STILLBIRTHS.

1. Monstrosity.
2. Premature birth, A.P.H.
3. Breech with extended legs.
4. Breech presentation, obstructed labour.
5. A.P.H.
6. Breech with extended legs.
7. Eclampsia, premature birth.
8. Spina bifida, monstrosity.
9. Emaciated foetus.
10. Cord presentation, child dead in utero.
11. Monstrosity, forceps delivery.
12. Severe A.P.H.
13. Mother, pre-eclamptic.
14. Prematurity.

WITHIN 10 DAYS OF BIRTH.

1. Premature twin.
2. Premature twin.
3. Prematurity.
4. Prematurity.
5. Prematurity.
6. Prematurity, debility from birth.
7. Premature twin.
8. Premature twin.
9. Acute heart failure, congenital heart disease.
10. Convulsions, injury at birth.

NOTIFICATION OF BIRTHS ACT, 1907.

The following table shows the births notified under this Act:—

Births notified.	Live births.	Still births.	Total.
From institutions and by doctors	726	36	762
By midwives	544	20	564
By sundry persons	5	—	5
Total notified prior to registration	1275	56	1331

SUMMARY OF REGISTRARS' NOTIFICATIONS.

Births notified by registrars and	Live births.	Still births.	Total.
Attended by midwives	10	—	10
Born in institutions or attended by doctors... ..	24	—	24
Total	34	—	34

HOME VISITING.

Staff changes have been fewer than of recent years. Miss M. Watterson resigned in February to take up office under an authority under which she had previously served, and Miss Heyes was appointed to fill the vacancy in April.

It takes two years for a health visitor to become acquainted with her area and with the duties involved in it, so that frequent changes temporarily reduce the efficiency of the staff and therefore are not desirable. With each change there is a period of loss of contact, which is only re-established after a lapse of time.

Home visiting has been carried out on the same lines as hitherto. Births attended by midwives have been visited during the first ten days and re-visited before the end of the first month. Doctors' cases have been visited after the puerperium.

The pre-school population of Rotherham is approximately 6,000. Three thousand infants under 5 years of age attend the Child Welfare Centres, and the average attendance per child is six times per year.

Children attending the centres regularly have not been re-visited except in special circumstances. Re-visiting has been concentrated on those children who have not come within the sphere of the welfare centres.

Children under the age of seven years who are boarded out under the Children's Act, 1908, and the illegitimate children have been inspected monthly.

Home visits have been paid to all the expectant mothers who have attended the district clinic and to the mothers for whom convalescent treatment had been recommended.

Indoor duties have been increased by two medical sessions in the place of two non-medical sessions, three ultra-violet light sessions, one district clinic, and six minor treatment sessions per week, with a relative increase in the Senior Health Visitor's administrative duties. No additions to the health visiting or clerical staffs have been made, so that the health visitors' time for home visiting has been reduced to 45 per cent. Necessarily this restricts personal supervision, particularly in the case of children between two and five years.

As this age group furnishes largely that mass of unremedied defect found amongst school entrants, it is worth considering more concerted action in the supervision of the group.

Tonsils and adenoids, discharging ears and catarrhal conditions, squints and eye conditions, carious teeth, are the common defects which should receive correction before the child enters on school life.

It is by frequent home visiting that these defects are recognised and by education and encouragement of the mother that early treatment is obtained either from the family doctor or the various public institutions. In this connection I should like to emphasise that one or two home visits per year are practically useless. The health visitor must go time and time again in order to convert the mother to a belief in remedial treatment for a condition which she may consider trivial at the time; or failing this, to force the parents, by whatever means a health visitor may, to a realisation of what, legally, is the parents' duty to the child.

In the launching of any further schemes for maternity and child welfare involving staffing, consideration should be given to the formation of internal and external staff.

SPECIAL INVESTIGATIONS.

Infantile deaths.

All deaths of infants under one year have been investigated and records kept.

Stillbirths.

All midwives' cases have been investigated and re-visited at intervals, so that the value of ante-natal care might be urged in the event of a further pregnancy.

CHILD WELFARE CENTRES.

There are two child welfare centres in the Borough, at each of which one medical and one non-medical session was held weekly until May, when all the sessions were attended by a medical officer.

Dr. Alice White, then appointed, took charge of the Tuesday session at Ferham House and the Thursday session at Cranworth Road. Dr. L. H. Copping continued to take charge of the remaining two sessions.

The arrangement is not entirely satisfactory. It would have been better if each doctor had been able to take charge of a specific centre, but the exigencies of other duties precluded such an arrangement.

The increase of medical sessions has reduced overcrowding at the centres in some measure, but the four sessions are not as yet equally well attended. The average attendance per session throughout the year was 92 and the average number of medical consultations per session was 58.

It does not appear that there is much scope for further development of the existing sessions; any extension of the service, therefore, would have to be in the nature of an increase in the number of sessions per week.

As reported elsewhere, one-half of the infants under five years of age in Rotherham attend at the Child Welfare Centres, and the average number of attendances per child per year is six, excluding the attendances at subsidiary clinics.

The following table gives the figures relating to the centres:—

	Ferham House.	Cranworth Road.	Total.
Number of sessions held	100	100	200
Medical sessions (included in above)	82	84	166
New cases enrolled during the year :			
Under 1 year	422	458	880
Over 1 year	137	153	290
Cases brought forward from previous years and enrolled during the year :			
Under 1 year	214	282	496
Over 1 year	501	613	1114
Total number of children attending during the year :			
Under 1 year	636	740	1376
Over 1 year	638	766	1404
Total attendances made :			
Under 1 year	4849	5078	9927
Over 1 year	3741	4790	8531
Average attendance per session	85.9	98.7	92
Average number of medical consultations per session	58	59	58

VOLUNTARY HELP.

During 1931 the voluntary helpers have continued their visits to the Child Welfare Centres.

Twenty-five ladies attended in rotation on the four days weekly when the clinics were held, to serve tea to the mothers and to help in other ways. Help has also been given in knitting babies' garments.

ULTRA VIOLET LIGHT CLINIC.

The ultra violet light clinic was opened in March. The equipment includes one mercury vapour lamp and one solux heat lamp.

Sessions are held at Ferham House on Mondays, Wednesdays, and Fridays, from 9.30 a.m. to 12.30 p.m. Infants are referred from the Child Welfare Centres, and treatment is controlled by Dr. L. H. Copping, who attends each session.

The following table gives particulars of the attendances since the scheme commenced on 23rd March, 1931:—

Number of sessions held	...	...	...	...	...	100
New cases:						
Under 1 year	...	...	...	...	...	9
Over 1 year	...	...	...	...	...	76
Total attendances:						
Under 1 year	...	...	...	...	...	107
Over 1 year	...	...	...	...	...	2,325
Average attendance per session	...	...	...	...	...	24.32

MINOR TREATMENT.

Minor treatment, hitherto carried on at the central office of the Health Department, was transferred to the Child Welfare Centres during the year. One health visitor attends at each centre daily between 9.0 and 11.0 a.m., when minor treatment ordered by the medical officers is carried out.

The giving of treatment furnishes an opportunity for the instruction of the mother in the application of fomentations, the cleaning up of septic conditions generally, and in the use of certain preparations. One can readily appreciate that this is of educational value, but it tends towards curative measures rather than preventive, and does not legitimately lie within the province of a health visitor.

The obtaining of treatment of minor ailments in an area in which poverty is rife presents difficulties. Assuming that the policy of the Child Welfare Centres is educational only, a mother attending a centre with an infant suffering from a minor defect such as ringworm or impetigo might be referred to either the family

doctor or the general hospital. With the more fortunately placed mother these instructions are carried out, but in the case where the family income is 25s. 3d. unemployment insurance for three people, and a rent of 10s. 2d. for a small municipal house, the mother realises her inability to consult the family doctor without incurring a debt. The ailment does not appear to be one meriting this mortgaging of the future, and she often feels compelled to try a cheap, if quack, remedy, perhaps obtained in the Market, rather than carry out the instruction given by the centre medical officers.

If she wishes to attend the General Hospital, she must first obtain an out-patient recommend. Her husband is unemployed, so that she has difficulty in obtaining the necessary recommendation and again the condition is not sufficiently serious in her eyes to warrant her troubling the parson or other persons of influence whom she knows might be able to obtain one for her. The condition, therefore, often goes untreated until more serious complications occur, and, in addition, the mother's confidence in the value of the Child Welfare Centres is lost.

It appears imperative that, at present, some provision for the treatment of minor ailments must be linked up with the Child Welfare Scheme, but I am of opinion that this should not be carried out by people engaged on the preventive side.

A solution might be found either by co-operation with—

- (a) the School Medical service, which possesses fully equipped treatment centres, or
- (b) an out-patients' department at the Municipal Hospital, Alma Road.

During the year, 38 mothers and 62 children under 5 years of age received home nursing treatment by the Queen's nurses. A grant is paid by the Council to the Association in respect of such service.

At the Municipal Hospital, Alma Road, 217 children under 5 years of age received indoor treatment.

FREE AND ASSISTED MILK SCHEME.

The age limit remains at 18 months, with the exception of special cases certified by the child welfare medical officers.

The scale of income is that adopted in 1928.

The following table gives a statement of the working of the scheme during the year :—

				Cows milk.	Dried milk.
Number of applications received	...	...	...	3295	2401
Number granted free	...	...	...	2852	2103
Number granted half cost	...	...	...	189	167
Number disallowed	...	...	...	254	131
Approximate quantity	...	...	...	10,620 gallons	12,505 packets
Approximate cost	...	...	...	£840	£992

Applications are renewed monthly.

Included in the above table is the amount of milk shown hereunder granted during the year under the transferred service from the Public Assistance Committee to the Maternity and Child Welfare Sub-Committee, in pursuance of the Local Government Act, 1929.

				Cows milk.	Dried milk.
Number of applications received	...	...	...	452	178
Number granted free	...	...	...	440	174
Number granted half cost	...	...	...	3	3
Number disallowed	...	...	...	9	1
Approximate quantity	...	...	...	1573 gallons	1036 packets
Approximate cost	...	...	...	£124	£79

COD LIVER OIL.

Number of children who received cod liver oil products, 737.

Quantity distributed free, 1,490 lbs., and 178 gals. 76 ozs. of emulsion.

No means test applies to the granting of these products. Each case is judged on its needs and certified by the child welfare medical officers.

MUNICIPAL DEPOTS FOR THE SALE OF DRIED MILK, &c.

During the year, at the two depôts, 14,511 packets of dried milk products were sold, 498 being at half cost; and 11,883 were distributed free. The total sales of malt and cod liver oil products were 5,176 $\frac{3}{4}$ lbs. and 159 gals. 92 ozs. of emulsion; 1,490 lbs. of malt and cod liver oil products and 178 gals. 76 ozs. of emulsion were distributed free; 24 $\frac{3}{4}$ gals. of Parrish's chemical food and 79 tins of lactagol were also sold.

CONVALESCENT HOME.

In March, the Council decided to furnish one room containing two beds at the Yorkshire Convalescent Home for Mothers and Babies at Withernsea.

The two beds were rented throughout the season from April to October, and 26 mothers with their infants were sent for convalescent treatment.

The Yorkshire Home fills a long felt want, as the difficulties of arranging a holiday for a mother with a baby were almost unsurmountable. The value of a home catering specially for this class of patient can readily be imagined. The need for rest and a change of air after a trying confinement is evident in only too many cases which come within the purview of the child welfare medical officers, and in arranging for the convalescence of a mother with her baby, one realises that an ounce of practice is worth much more than a pound of theory.

Although maintenance has been paid by the Council in respect of each mother, no provision has been made for travelling expenses. As the majority of the mothers were wives of unemployed men, this presented difficulty. In some instances, fares were paid by grants from the Miners' Welfare funds of one of the local collieries, by the Public Assistance Committee, and by voluntary agencies.

HOME HELPS.

No increase in the demand for home helps has been made.

The following table shows the extent of the scheme since its inauguration:—

Year.	Number of homes attended.	Number of days on which home helps were employed.
1925	17	244
1926	18	275
1927	52	938
1928	50	956
1929	47	763
1930	47	946
1931	49	958

MATERNITY OUTFITS.

The two bags supplied by the Stoddart Bequest in 1927 have been in demand during the year. Sundry renewals from the same source have been made, and the demand for the outfits now exceeds the provision.

Each bag contains all that is necessary for a confinement, including dressings, and is completely sterilised before each issue.

CONVALESCENT HOME OUTFITS.

Outfits of clothing provided by gift and by the Stoddart bequest have been loaned to mothers proceeding to the Convalescent Home. It was felt that a mother could not receive full benefit from her holiday if, during her stay, she was subjected to a feeling of inferiority because of her shabby and inadequate wardrobe.

In addition, English summers being what they are, one felt that there might be danger in sending a debilitated woman to stand the winds of an east coast resort without the provision of suitable warm clothing.

ORTHOPÆDIC SCHEME.

Number of clinics held	...	...	...	...	...	9
„ cases examined	...	...	...	...	...	14
„ examinations made	...	...	...	...	...	40
„ splints, etc., supplied	...	...	...	...	...	3
„ children who received indoor treatment	...	...	...	...	...	—
„ children who received massage	...	...	...	...	...	2

No children were receiving indoor treatment at Kirbymoorside at the end of the year and none were awaiting admission.

SCHOOL ENTRANTS.

Particulars of pre-school health and progress of 810 infants have been submitted to the School Medical Officer during the year.

Since 1928, the home visiting records, the child welfare centre notes, and, later, the ultra violet ray clinic, and orthopædic clinic notes have been correlated, so that the information supplied should prove helpful to the school medical service.

CERTAIN DISEASES.

Puerperal fever :

Cases notified	...	...	...	...	...	4
Removed to Norton Hall	...	...	...	...	...	4
Deaths	...	...	...	...	...	—

One case had been previously notified as puerperal pyrexia. This case terminated fatally after the expiration of the year under review.

Puerperal pyrexia :

Cases notified	...	...	...	...	...	13
Treated at Ferham House	...	...	...	...	...	1
Treated at Alma Road Hospital	...	...	...	...	...	1
Treated at General Hospital	...	...	...	...	...	2
Treated at home	...	...	...	...	...	3
Removed to Norton Hall	...	...	...	...	...	7*

* Includes the case stated above—removed from district to the General Hospital and then transferred to Norton Hall.

Ophthalmia neonatorum :								
Cases notified	...	...	...	...	...	...	...	7
Nursed at home	...	...	...	...	...	...	...	4
Nursed by health visitors	...	...	...	...	...	...	...	2
Nursed at the Maternity Home	...	...	...	...	...	...	...	1
Recovered	...	...	...	...	...	...	...	7
Vision impaired	...	...	...	...	...	...	...	—
Deaths	...	...	...	...	...	...	...	—
Pemphigus neonatorum :								
Cases notified	...	...	...	...	...	...	...	2
Treated at home	...	...	...	...	...	...	...	2
Recovered	...	...	...	...	...	...	...	2
Deaths	...	...	...	...	...	...	...	—

MEASLES.

Measles assumed epidemic proportions at the end of the year. Cases under school age were visited by the health visitors, and advice given on isolation, nursing, and exclusion from school. Many cases were found to be suffering from whooping cough. Grants of milk were made in necessitous cases and cod liver oil preparations allowed during convalescence. Two hundred and two cases under five were notified; 230 visits were paid and two deaths occurred.

WHOOPING COUGH.

This is not a notifiable disease, so that no reliable statistics can be given. It was prevalent during the Autumn, and seven infants under five died of the disease. The high death-rate attributed to bronchitis and broncho-pneumonia in infants is largely due to the influence of this disease.

GENERAL.

DENTAL SCHEME.

The services of a dental surgeon have been available for children under the age of five, by joint arrangement with the Education Committee.

One hundred children attending the Child Welfare Centres were referred for treatment during the year.

REMOVAL OF CHILDREN.

Notices of removal of 143 children to other areas were sent to public health authorities, and 67 notices of incoming children were received.

SEWING CLASSES.

In September, a sewing class was commenced at the Cranworth Road Centre. Two sewing machines were provided and materials obtained for re-sale at cost price.

The class is held on Tuesday afternoon at 2 p.m., and mothers are instructed in the cutting out and making up of garments of approved design and in the reconstructing of garments.

INFANTILE MORTALITY.

An increase in the infantile mortality is a regrettable fact.

In reviewing the causes of deaths it appears that the fatal diseases of infancy fall now mainly into two groups—

- (a) Prematurity, congenital weakness, and deffects.
- (b) Bronchitis and broncho-pneumonia.

Forty-four per cent. of infant deaths in Rotherham last year were due to the former and 40 per cent. to the latter.

In actual figures, 51 deaths, including 10 of twin children, were attributed to prematurity and congenital conditions.

During the period 1921-1931, the average number of deaths per year from these causes was 50; it does not appear, therefore, that any reduction in this cause group is being effected despite the present measures of ante-natal care.

One is forced to the conclusion that ante-natal care is not, as yet, as widely practised as the case demands.

There can be little doubt that the causes in some instances are economic. The shirking of the burden of the unwanted child results in the achievement of premature termination of pregnancy and the birth of a feeble infant into an environment at once opposed to its survival.

Amongst the economic causes may also be classed the problem of maternal nutrition.

This group cause of infant death is almost outside the scope of health visiting activities, and beyond advising the mother of the value of early and continued ante-natal care in the event of a future pregnancy, the health visitor can do nothing. Efforts at a reduction must be directed towards—

- (a) An improved ante-natal care of all expectant mothers.
- (b) An individual realisation that the unwanted child should never be conceived.
- (c) A greater consideration of the science of maternal nutrition and its application.

In regard to the second group, the number of deaths was nine above the mean average of 37 for the 1921-1931 period.

Two mongols succumbed to the disease—the common fate of such afflicted children. Measles and whooping cough contributed to an increase of the number of deaths certified in this group; but there appears to be no diminution in deaths of infants due to chest weakness unassociated with prior contributory infections.

I am of opinion that there is still a great need for education of the mother in elementary child management. I believe that faulty clothing, lack of air and sunshine are the main causes of these deaths, and that herein lies scope for further action by child welfare medical officers and health visitors.

The value of the open window is not sufficiently appreciated, and many infants spend the greater portion of their infancy beside the kitchen grate.

Again, exposure of the buttocks and lower limbs is all too frequent in infants over the napkin stage of development, i.e., eight months, and Dickens' diagnosis of "damp doorsteps settled on their lungs" still obtains.

Digestive diseases have been almost banished from the group causes of infant deaths, but respiratory diseases remain. We have focussed attention to infant feeding at each and every turn. The same vigilance must now be directed to systems of infant clothing and by education to a more general appreciation of the value of air and sunshine in child nurture.

The following table gives the details concerning infantile mortality:—

CAUSE OF DEATH.	Under 1 week.	1—2 weeks.	2—3 weeks.	3—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 : certified ...	32	8	9	5	54	20	16	12	13	115
uncertified ...	1	—	—	—	1	—	—	—	1	2
Small-pox ...	—	—	—	—	—	—	—	—	—	—
Chicken-pox ...	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—
Scarlet fever ...	—	—	—	—	—	—	—	—	—	—
Whooping cough ...	—	—	—	—	—	—	—	1	1	2
Diphtheria and croup ...	—	—	—	—	—	—	—	—	1	1
Erysipelas ...	—	—	—	—	—	—	—	—	—	—
Tuberculous meningitis ...	—	—	—	—	—	—	—	—	—	—
Pulmonary tuberculosis ...	—	—	—	—	—	—	—	—	—	—
Other tuberculous diseases ...	—	—	—	—	—	—	—	—	—	—
Meningitis (not tuberculous) ...	—	—	—	—	—	—	—	—	—	—
Convulsions ...	—	—	—	—	—	—	—	—	—	—
Laryngitis ...	—	—	—	—	—	—	—	—	—	—
Bronchitis ...	—	—	2	1	3	3	4	3	—	13
Pneumonia (all forms) ...	—	—	—	1	1	9	7	5	11	33
Diarrhœa ...	—	—	—	—	—	—	—	—	—	—
Enteritis ...	—	1	1	—	2	2	2	—	1	7
Gastritis ...	—	1	—	—	1	—	—	—	—	1
Syphilis ...	—	—	—	1	1	—	—	—	—	1
Rickets ...	—	—	—	—	—	—	—	—	—	—
Suffocation, overlying ...	—	—	—	—	—	—	—	—	—	—
Injury at birth ...	—	—	—	—	—	—	—	—	—	—
Atelectasis ...	—	—	—	—	—	—	—	—	—	—
Congenital malformations ...	1	1	1	—	3	1	1	—	—	5
Premature birth ...	24	4	3	2	33	2	—	—	—	35
Atrophy, debility & marasmus ...	—	1	2	—	3	1	1	—	—	5
Other causes ...	8	—	—	—	8	2	1	3	—	14
Totals ...	33	8	9	5	55	20	16	12	14	117

Nett births in the year : legitimate infants ... 1227
 illegitimate infants ... 48

Nett deaths in the year : legitimate ... 112
 illegitimate ... 5

Infantile mortality rate per 1,000 births : legitimate ... 91
 illegitimate ... 104

BOARDED-OUT CHILDREN.

Fifty-two visits were paid to the houses of infants under seven years of age, of which there were seven boarded out under the 1908 Act at the end of the year.

Adoption orders have been taken out in respect of two infants previously registered.

In the administration of the Act several difficulties have been met with, and it is to be hoped that the new Bill now before Parliament will contain safeguarding clauses in the interests of the boarded-out child. The present Act is bad in that any person other than expected relatives can take a child for gain and register the fact. If, on visiting, the inspector deems the conditions or care to be unsuitable, the child can be removed at the instance of the inspector. This results in changes of home and guardianship, which cannot be good when one remembers the Act only applies to infants under seven years of age.

Again, registration is not compulsory if the infant is taken for a period of less than 48 hours, so that a child may pass through several hands and be lost sight of.

In isolated cases where no money is paid but legal adoption is not secured, registration is not statutory. This results in infants being given away not always to desirable people. A child may thus be disposed of without any legal provision for following up and supervision.

If premises and fostermothers had to be registered prior to the reception of any child other than one legally adopted, registration could be cancelled in cases in which conditions were deemed to be unsatisfactory. This would obviate the bringing of an infant on to unsuitable premises to be removed after a short stay.

Nurse children are almost without exception illegitimate children who are being maintained by their mothers out of a small weekly wage. Paternal responsibility is only fulfilled in the ratio of 1 in 12, so that the difficulty in obtaining a good home for a nurse child for the paltry sum which the mother is able to offer looms large.

The illegitimate birth-rate is declining, so that we cannot be guilty of encouraging illegitimacy by a more rational attitude to the unfortunate offspring.

I believe the best means of caring for these unfortunates would be by each local authority employing fostermothers in the same way that home helps are now employed, the fostermothers being selected, supervised, and paid by the local authority, and the fees being collected by them direct from the mother.

Enactments on these lines would, I believe, eliminate the barter and sale of fosterlings.

The following table relates to the administration of Part I. of the Children Act, 1908, for the year 1931 :—

I. Notification :—

(i) Number of foster parents on the register :—				
(a)	at the beginning of the year	...	...	9
(b)	at the end of the year	...	...	7
(ii) Number of children on the register :—				
(a)	at the beginning of the year	...	...	9
(b)	at the end of the year	...	...	7
(c)	who died during the year	...	...	—
(d)	on whom inquests were held during the year	...	...	—

II. Visiting :—

(i) Number of visitors holding appointments under Section 2 (2) at the end of the year :—				
(a)	Health visitors	...	...	6
(b)	Female, other than health visitors	...	...	—
(c)	Male	...	...	1 (M.O.H.)
(ii) Number of persons or societies authorised to visit under the proviso to Section 2 (2) —				

Note.—Whilst not definitely appointed under the Act, the visiting is carried out by the health visitors.

III. Number of cases (if any) in which proceedings were taken during the year :—

(i)	Under Section 1 (7)	...	...	—
(ii)	Under Section 2 (5)	...	...	—
(iii)	Under Section 2 (6)	...	...	—
(iv)	Under Section 3	...	...	—
(v)	Under Section 4	...	...	—
(vi)	Under Section 5 (2)	...	...	—
(vii)	Under Section 6 (2)	...	...	—
(viii)	Under Section 7	...	...	—
(ix)	Under Section 8 (1)	...	...	—
Total —				

IV. Number of cases in which the Local Authority has given a sanction during the year :—

(i)	Under (a) of Section 3	...	...	—
(ii)	Under (b) of Section 3	...	...	—
(iii)	Under (c) of Section 3	...	...	—
Total —				

V. Number of orders obtained during the year :—

		From a justice.	From the Local Authority.
(i)	Under (a) of Section 5 (1)	...	—
(ii)	Under (b) of Section 5 (1)	...	—
(iii)	Under (c) of Section 5 (1)	...	—
Totals		...	—

The following is a general summary regarding maternity and child welfare :—

1. POPULATION OF THE AREA SERVED BY THE COUNCIL—70,130.
2. NUMBER OF BIRTHS NOTIFIED IN THAT AREA DURING THE YEAR UNDER THE NOTIFICATION OF BIRTHS ACT, 1907 :—
 - (a) Live births, 1275. (b) Still births, 56. (c) Total 1331.
 - (d) By midwives, 564. (e) By doctors and parents, 767.
3. HEALTH VISITING.
 - (i) Number of officers employed for health visiting at the end of the year :
 - (a) by the Council, 6.
 - (b) by voluntary associations, None.
 - (ii) If any of the health visitors are engaged on other work during part of their time, state the equivalent of whole-time services devoted by the whole staff to health visiting—
 - (a) in the case of health visitors employed by the Council, 4 5/6.
 - (b) in the case of health visitors employed by voluntary associations, None.
 - (iii) Number of visits paid during the year by all health visitors :

(a) To expectant mothers	... ..	First visits	... ..	321
		Total visits	... ..	649
(b) To children under 1 year of age	... ..	First visits	... ..	1159
		Total visits	... ..	5790
(c) To children between the ages of 1 and 5 years	... ..	Total visits	... ..	12988
4. INFANT WELFARE CENTRES.
 - (a) Number of centres provided and maintained by the Council, 2.
 - (b) Number of centres provided and maintained by voluntary associations, None.
 - (c) Total number of attendances at all centres during the year :
 - (i) By children under 1 year of age, 9927.
 - (ii) By children between the ages of 1 and 5 years 8531.
 - (d) Average attendance of children per session at all centres during the year, 92.
 - (e) Total number of children who attended at the centres for the first time during the year :
 - (i) Children under 1 year of age, 880.
 - (ii) Children between the ages of 1 and 5 years, 290.
 - (f) Percentage of total notified births represented by the number in (e) (i), 69.
5. ANTE NATAL CLINICS (WHETHER HELD AT INFANT WELFARE CENTRES OR AT OTHER PREMISES).
 - (a) Number of clinics, including ante-natal clinics, provided at institutions transferred to the Council under Part I of the Local Government Act, 1929, provided and maintained by the Council, 3.
 - (b) Number of clinics provided and maintained by voluntary associations, 0.
 - (c) Total number of attendances by expectant mothers at all clinics during the year, 1482
 - (d) Average attendance of expectant mothers per session at all clinics during the year, 10.9
 - (e) Total number of expectant mothers who attended at the clinics during the year, 450.
 - (f) Percentage of total notified births represented by the number in (e), 33.8

6. MATERNITY HOMES AND HOSPITALS.

I.

	Separate maternity institutions provided by the Council.	Institutions (with maternity wards) transferred to the Council under Part I of the Local Government Act, 1929.	Institutions provided by voluntary associations.
Number of institutions ...	1	1	—
Number of maternity beds	10	15	—
Total number of women admitted to these beds during the year ...	222	146	—

II.

Number of women (if any) sent by the Council during the year to other maternity institutions, 10. Transferred to Norton Hall, Sheffield, for puerperal pyrexia, and fever—institutional cases, 4; district cases, 6.

7. HOMES AND HOSPITALS FOR SICK OR AILING CHILDREN UNDER 5 YEARS OF AGE.

I.

	Separate institutions provided by the Council for these cases.	Institutions (with accommodation for these cases) transferred to the Council under Part I of the Local Government Act, 1929.	Institutions provided by voluntary association.
Number of institutions ...	—	1	—
Number of beds provided for such children	—	30	—
Total number of children admitted to these beds during the year	—	217	—

II.

Number of such children (if any) sent by the Council during the year to other institutions, 0.

8. CONVALESCENT HOMES.

- (a) Number of convalescent institutions with accommodation for expectant or nursing mothers or children under 5 years of age :
 - (i) provided by the Council, None.
 - (ii) provided by voluntary associations. The Rotherham Corporation have equipped two beds at the Yorkshire Home for Mothers and Babies, Withernsea.
- (b) Number of beds for such cases in convalescent institutions :
 - (i) provided by the Council, 2.
 - (ii) provided by voluntary associations, None.
- (c) Total number of cases admitted to the beds included in (b) during the year, 26.
- (d) Total number of such cases sent by the Council during the year to other convalescent institutions, None.

9. HOMES FOR MOTHERS AND BABIES.

- (a) Number of such homes :
 - (i) provided by the Council, None.
 - (ii) provided by voluntary associations, None.
- (b) Number of beds in homes :
 - (i) provided by the Council, None.
 - (ii) provided by voluntary associations, None.
- (c) Total number of cases admitted to these homes during the year :
 - (i) expectant mothers, None.
 - (ii) mothers and babies, None.
 - (iii) babies, None.
- (d) Total number of such cases sent by the Council during the year to other homes for mothers and babies, None.

10. DAY NURSERIES.

- (a) Number of day nurseries :
 - (i) provided by the Council, None.
 - (ii) provided by voluntary associations, None.
- (b) Number of places for children under 5 years of age in the nurseries :
 - (i) provided by the Council, None.
 - (ii) provided by voluntary associations, None.
- (c) Total number of attendances of children at these nurseries during the year :
 - (i) whole day, None.
 - (ii) half-day, None.

11. INFECTIOUS DISEASES.

Disease.	Number of cases notified during the year.	Number of cases visited by officers of the Council.	Number of cases for whom home nursing was provided by the Council.	Number of cases removed to hospitals.
(1) Ophthalmia neonatorum	7	4	3	1
(2) Pemphigus neonatorum	2	2	—	—
(3) Puerperal fever	4	4	—	4
		Professional enquiry into all cases by M.O., M.C.W.		
(4) Puerperal pyrexia	13	13 do.	—	10
(5) Measles and German measles (in children under 5 years of age)	202	230	—	—
(6) Whooping cough (do.)	Not notifiable	17	—	—
(7) Epidemic diarrhoea (do.)	do.	—	—	—
(8) Poliomyelitis (do.)	do.	—	—	—

12. HOME NURSING.

(a) Number of nurses employed at the end of the year for the nursing of expectant mothers and children under 5 years of age, maternity nursing, or the nursing of puerperal fever :

(i) by the Council, None.

(ii) by voluntary associations. Rotherham District Nursing Association. Staff, one Superintendent and 6 nurses, and the work is undertaken with their general district nursing.

(b) Total number of cases attended during the year by these nurses, 100.

13. MIDWIVES.

- (a) Number practising in the area served by the Council for maternity and child welfare at the end of the year, 20.
- (b) Number
 - (i) employed by the Council, None.
 - (ii) subsidised by the Council, None.
 - (iii) employed by voluntary associations, 1.
- (c) Number of cases attended by midwives during the year :
 - (i) as midwives, 569.
 - (ii) as maternity nurses, 103.
- (d) Number of cases during the year in which the Council paid or contributed to the fee of a midwife, None.

14. MATERNAL DEATHS.

- (a) Number of women who died in, or in consequence of, childbirth in the area served by the Council for maternity and child welfare during the year :
 - (i) from sepsis, —
 - (ii) from other causes, 2.
- (b) Number of these cases which died :
 - (i) at home, —
 - (ii) in institutions, 2.

SECTION X.

MENTAL DEFICIENCY.

In the following table particulars are given for the year 1931 of mental defectives (A) "subject to be dealt with" by the Local Authority, and (B) who may become "subject to be dealt with" by the Local Authority.

A.—Number of cases "subject to be dealt with" :—

	Males.	Females.	Total.
1. Under "order" :—			
(a) (1) In institutions (excluding cases on licence).			
Under 16 years of age	5	13	18
Aged 16 years and over	—	1	1
(2) On licence from institutions.			
Under 16 years of age	1	1	2
Aged 16 years and over	—	—	—
(b) (1) Under guardianship (excluding cases on licence).			
Under 16 years of age	2	3	5
Aged 16 years and over	—	—	—
(2) On licence from guardianship.			
Under 16 years of age	—	—	—
Aged 16 years and over	1	—	1
2. In "places of safety."			
Under 16 years of age	1	2	3
Aged 16 years and over	1	—	1
3. Under statutory supervision	11	5	16
Of whom,—			
(a) Attending occupation centres	—	—	—
(b) Awaiting removal to an institution	9	5	14
4. Action not yet taken under any one of the above headings :—			
(a) Notified by Local Education Authority (Sec. 2 (2)) ...	3	—	3
(b) Mental defectives in receipt of Poor Law relief :—			
(1) Institutional (a) In Public Assistance institutions not approved under Section 37 ...	6	8	14
(b) In institutions certified under the M.D. Acts (including those approved under Section 37) —			
(i) Cases "placed" under Sect. 3 ...	—	—	—
(ii) Other cases	8	5	13
(2) Domiciliary	9	14	23
(c) Otherwise "ascertained"	1	—	1

B.—Number of cases who may become "subject to be dealt with" :—

1. In institutions or under guardianship—dealt with under Sec. 3 :—			
(a) In regard to whom the Local Authority contributes under its permissive powers	—	—	—
(b) Maintained wholly by parents, relatives or others	—	—	—

2. Reported to the Local Authority from any reliable source but as to whom no action has been taken	...	...	...	...	...	—	—	—
3. Under voluntary supervision	...	...	...	...	...	17	8	25
Of whom, attending occupation centres	...	...	...	...	...	—	—	—

Also there were

						Males.	Females.	Total.
(a) Number of instances in which licence was granted during 1931 :—								
1. From institutions	...	...	...	...	...	1	—	1
2. From guardianship	...	...	...	...	...	—	—	—
(b) Number of instances in which cases on licence have been returned to institutions or transferred to guardianship during the year 1931 :—								
1. To institutions...	...	...	...	...	...	—	—	—
2. To guardianship	...	...	...	...	...	—	—	—

Of the cases notified by the Local Education Authority under Section 2 (2) during the year, there were :—

						Males.	Females.	Total.
Sent to institutions by " order "	...	...	...	...	...	—	—	—
Placed under guardianship by " order "	...	...	...	...	...	—	—	—
Placed under statutory supervision	...	...	...	...	...	—	—	—
Placed in " places of safety "	...	...	...	...	...	—	—	—
Died or removed from area	...	...	...	...	...	—	—	—
Action not yet taken	(a) in receipt of Poor relief	...	...	...	...	2	—	2
	(b) Others	...	...	...	...	1	—	1
						—	—	—
	Total	...	...	...	...	3	—	3

Of the total number of mental defectives known to the Local Authority, there were :—

(a) Number who have given birth to children during 1931 :—

(1) After marriage	...	...	...	...	...	—
(2) While unmarried	...	...	...	...	...	—

(b) Number who have married during year

...	—
-----	-----	-----	-----	-----	-----	---

At the end of the year, the total number of defectives known to the Local Authority was 126. Of these, 27 were under " order ;" 19 being in institutions, 2 on licence from institutions, 5 under guardianship, and 1 on licence from guardianship. Four others were in " places of safety," and of the 95 remaining, 50 were in receipt of Poor Law relief, comprising 23 domiciliary cases and 27 institutional. The further 43 were under supervision in their own homes.

During the year 3 cases were admitted to institutional care; 1 was transferred from guardianship to an institution; 1 was transferred from a "place of safety" to guardianship; 1 under guardianship was transferred from the jurisdiction of the Public Assistance Committee to that of the Mental Deficiency Authority; and 1 was licensed from an institution.

The provision of institutional care at St. Catherine's, Doncaster, by the activity of the South-West Yorkshire Joint Board is the most prominent step locally in this serious social problem of mental deficiency. The board was joined in August by Barnsley County Borough, the other constituent authorities being Dewsbury, Doncaster, Halifax, Huddersfield, Rotherham, and Wakefield.

The original building of St. Catherine's was made available for the accommodation of 20 female defectives, and during October received its first cases from Rotherham, one from a "place of safety" and two from other institutions.

The work of providing two villas proceeded and by the end of the year was well in hand, the arrangement now being, at the time of writing this report, to have, in conformity with the amended certificate of the Board of Control of March, 1932, not more than 20 males under 16 years of age in the mansion and not more than 120 females in the two villas, not idiots or other low grade of cot and chair type, on the understanding that patients in each group are suitable to live in association.

The 19 cases "under order" in item A1 (a) (1) were in the following certified institutions:—Four cases were in the Rampton State Institution, 9 cases were in the Whittington Hall Certified Institution, 3 cases were in the St. Catherine's Certified Institution, and 1 each in Calderstones, Stoke Park, and Prudhoe Hall Colonies.

SECTION XI.

BLIND PERSONS.

The number of blind persons registered in the Borough at the 31st December, 1930, was 123. During the year 1931 the number of new cases registered was 13, and the deaths or removals 10. The number on the register at the end of the year was 126.

The following tables will be of interest:—

DISTRIBUTION.

Intra-institutional							
Sheffield Workshops :	Workers	...	...	...	...	...	9
	Trainees	...	...	...	...	...	2
Royal Blind School, Sheffield	...	...	...	...	...	...	4
Other residential institutions	...	...	...	...	...	...	5
Poor Law institutions	...	...	...	...	...	...	4
South Yorkshire Mental Hospital	...	...	...	...	...	...	1
Extra-institutional	...	...	...	...	...	...	101
							126

AGE AND SEX.

Age.								Males.	Females.	Total.
0—5	...	...	...	...	...	...	...	—	—	—
5—16	...	...	...	...	...	...	...	2	2	4
16—21	...	...	...	...	...	...	...	2	3	5
21—30	...	...	...	...	...	...	...	4	1	5
30—40	...	...	...	...	...	...	...	10	10	20
40—50	...	...	...	...	...	...	...	8	2	10
50—60	...	...	...	...	...	...	...	14	8	22
60—70	...	...	...	...	...	...	...	13	10	23
70 and over	...	...	...	...	...	...	...	21	16	37
								—	—	—
								74	52	126
								—	—	—

EMPLOYABILITY (over 16 years of age).

								Males.	Females.	Total.
Employed	...	...	...	...	...	...	...	9	5	14
Training	...	...	...	...	...	...	...	1	2	3
Trainable	...	...	...	...	...	...	...	6	—	6
Trained but unemployed	...	...	...	...	...	...	...	—	1	1
Unemployable	...	...	...	...	...	...	...	56	42	98
								—	—	—
								72	50	122
								—	—	—

EMPLOYMENT.

Factory :	Basket makers	...	...	...	...	...	...	3
	Mat makers	...	...	...	...	...	...	2
	Knitters	...	...	...	...	...	...	4
								9
								—
At home	...	...	...	...	...	...	...	5
								—
								14
								—

For the fourth year in succession there have been no blind children under the age of 5 years. The four children under 16 years of age on the register are resident at the Royal Blind School, Sheffield.

All blind persons in the Borough who are suitable for technical training are either receiving this or awaiting admission to the workshops at Sheffield.

The yearly analysis of the register has again been made, and the Blind Persons Act Committee are satisfied that all blind persons under the age of 50 years who are suitable for education or technical training have been reported to the Education Committee, and that employment has been provided for all persons able to take advantage of it.

There are eighty-two blind persons over the age of 50 years resident in the Borough; all blind persons at this age period are eligible for the Old Age pension on the same terms as sighted persons over seventy years of age. Of the eighty-two, 71 are in receipt of the pension; one is married, and the joint income is over the scale; two have private means, and their incomes are over the scale; and eight are resident in institutions.

The co-operation between the Borough Council and the Sheffield City Council in matters relating to the welfare of the blind has been continued during the year ending December, 1931.

The Rotherham Borough Council granted domiciliary assistance to the unemployable blind persons in the Borough, amounting to £1,794 13s. 5d., being an increase of £258 12s. 11d. over the previous year.

The handicraft class has been continued during the year; meetings have been held in each week, and have been organised on the same lines as last year. The attendances have increased considerably, as will be seen from the following table:—

1930—Rotherham blind persons	...	...	...	...	427
West Riding blind persons	...	...	...	...	351
					778
1931—Rotherham blind persons	...	...	...	...	733
West Riding blind persons	...	...	...	...	291
					1,024

The rambles for those attending the handicraft class have been continued, and are much appreciated.

The monthly concerts during the Winter season have been arranged in co-operation with the Rotherham branch of Toc H, to whom the committee wish to express their thanks. These concerts are much appreciated by the blind people, and the attendances have been very good.

The Summer outing, tea and concert at Christmas, and Christmas gifts to the blind people were again provided.

The Voluntary Fund Committee has continued its work during the year in close co-operation with the work under the Borough Council. The income received was £192 15s. 3d. and the expenditure £145 14s. 1d. Through this fund 35 free wireless sets have been provided and maintained; 32 crystal sets provided by the "British Wireless" Fund for the Blind have been made into one-valve sets, installed, and kept in working order. Certificates have now been issued to 76 blind persons in the Borough entitling them to receive a free wireless licence in accordance with the provision of the Wireless Telegraphy (Blind Persons Facilities) Act, 1926.

The broadcast programmes are of great interest to blind persons, and the free licence and provision of free sets are among the most appreciated benefits provided.

During the year, tickets have been issued to blind people in the Borough entitling them to free slipper baths at the Rotherham Corporation Public Baths.

Grants for clothing and for the provision of spectacles have been given in several cases by the Voluntary Fund Committee.

The work of teaching and visiting in the Borough has again been carried out by Miss N. Brookes under the terms of the agreement between the Sheffield Corporation and the Rotherham Borough Council. During the year she has paid the following visits:—

Routine.	Special.	Assistance.	Total.
153	141	229	523

During the year, 5,100 twopenny and 5,196 one penny tram tickets were provided free of charge to the blind persons living within the Borough, the cost being borne in equal proportions by the Tramways Committee and the Blind Persons Act Committee.

Through the kindness of the Managements of the Rotherham Hippodrome, and of the Empire, Cinema, Whitehall, and Tivoli Picture Houses, blind persons living in the Borough are allowed free passes to attend performances at each of these places free of charge.

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General notes by the Secretary of the Board of Education... The work of teaching and raising in the Board has been very different...

Number	Spoken	Written	Total
100	150	200	350

During the year 1871-72 the number of the Board has been very different... The Board has been very different... The Board has been very different...