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ROTHERHAM
RURAL DISTRICT COUNCIL.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the year 1908.

**LEWIS J. WEATHERBE, M.B.C.M., Medical Officer
of Health.**

ROTHERHAM RURAL DISTRICT COUNCIL.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH, FOR THE YEAR 1908.

GENTLEMEN,

In the year ending December 31st, 1908, your district has considerably increased in population and industrial importance. The character of the district has been gradually altering for a number of years from Rural to Semi-urban, and at the present time includes several thickly populated colliery settlements requiring constant sanitary supervision. At Whinney Hill, Dalton Brook, Laughton, Maltby, Bramley, and Tinsley a large number of new houses of the cottage type have been erected, owing chiefly to colliery developments.

The number of houses built during the year reached nearly 400, and the population has increased from 28,000 to 30,000, and is still rapidly increasing. Several new railways in course of construction are passing through the district, accounting for a considerable floating population of the navy class not included in the above estimate, but calling for attention from the sanitary staff.

During the year just ended 490 deaths occurred, 259 being males and 231 females. Included in these are 48 which occurred in Public Institutions outside the district, to which they had been removed for medical or surgical treatment. Four deaths of non-residents took place in the South Rotherham Joint Isolation Hospital at Swallownest, to which they had been sent from neighbouring districts suffering from infectious diseases. These latter are excluded from the death rate for your district.

Estimating the population at 30,000, the death rate for 1908 is 16.33 per 1,000, being somewhat higher than the previous year, when it was 14.64. The increased death rate is to a large extent accounted for by the fact that it is now obligatory to include in the death rate of a district, deaths of non-residents which have occurred within or without the district attributable to accidents occurring in the district. Thus a number of colliers and ironworkers residing outside your district who have died from the effects of accidents occurring at collieries and ironworks within the district have to be included in the death rate for your district. This, in my opinion, gives an inaccurate idea of the death rate, which could only be corrected by including the non-residents working in the district as a part of the population of the district.

Nine hundred and ninety-six births were registered, 496 being males and 500 females. Of these, 29 were illegitimate. The birth rate is 33.20 per 1,000, practically the same as for the previous year, when it was 33.36 per 1,000.

The infant mortality is 157 deaths of infants under one year of age out of 996 births. This is at the rate of 157.63 per 1,000 births, higher than for 1907, but lower than in 1906. Of the infant deaths, premature birth and congenital defects accounted for 34, diarrhoea for 30, convulsions for 25, pneumonia for 22, and marasmus and malnutrition for 13. A great many of these deaths could no doubt be prevented by more careful attention to the sanitary surroundings of pregnant women and young infants, such as an abundant supply of fresh air, cleanliness, suitable clothing, and, careful and intelligent attention to diet. This high infant mortality, in my opinion, is due to a great extent to poverty, want of skilled medical assistance in so-called minor ailments, and, above all, ignorance on the part of parents with regard to the feeding and general treatment of young children. These remarks apply especially to deaths from diarrhoea, malnutrition, and respiratory affections. A large number of the deaths from premature birth and congenital defects may be accounted for by the unsuitable surroundings of pregnant women in the poorer districts, where improper food, alcohol, and hard work play an important part.

The teaching of the elementary laws of hygiene to the older girls in Elementary Schools would probably have a beneficial effect on the infant mortality of future generations, and such a course has on many occasions been recommended by Medical Officers of Health.

The adoption of the Notification of Births Act, together with the appointment of Health Visitors for the more congested parts of the district, might be a means of stemming the tide of infantile

mortality. I cannot, however, recommend the adoption of this Act unless the Council is prepared to go to the expense of making arrangements for carrying out the object of the measure, namely, the appointment of one or two trained nurses, or female inspectors, to visit the houses where births have occurred, and give free advice and instruction to those in charge of the infants. Without such arrangements no practical benefit would derive.

The notification of Zymotic Diseases for the year numbered 197, being considerably higher than in 1907, when the number was 148. This increase was attributable to the extreme prevalence of Typhoid Fever during the late summer and autumn.

During the year 90 cases of Scarlet Fever were notified, 61 of Typhoid Fever, 23 of Diphtheria, 20 of Erysipelas, and 3 of Puerperal Fever.

One hundred and twenty-one of the above cases occurred in the North Rotherham District, 105 of which were removed to the Joint Isolation Hospital at Wath.

In the South Rotherham District 76 cases occurred, 39 being removed to the Joint Isolation Hospital at Swallownest. The total number of cases removed to Hospital reached 144.

In the North Rotherham Joint Isolation Hospital, at Wath, eight patients from your district died, all from Typhoid Fever, the remaining 97 cases having been discharged cured.

In the South Rotherham Joint Isolation Hospital, at Swallownest, there were four deaths of patients from your district, 2 from Scarlet Fever, 1 from Typhoid Fever, and 1 from Diphtheria.

During the year 14 deaths were due to Measles, 4 to Scarlet Fever, 8 to Whooping Cough, 5 to Diphtheria, 10 to Typhoid Fever, 2 to Epidemic Influenza, and 2 to Puerperal Fever, making the total deaths from zymotic causes 45. The zymotic death rate for 1908 is 1.50 per 1,000; the rate for 1907 was 1.25 per 1,000.

Measles, Whooping Cough, Chicken Pox, and Mumps have been prevalent in various parts of the district during the year, and schools have been closed as follows :—

At Wentworth from January 8th to February 5th. Measles.

At Aughton from February 10th to March 7th. Measles.

At Catcliffe from February 24th to March 14th. Measles.

At Wentworth from May 20th to June 10th. Scarlet Fever.

At Brinsworth from September 14th to October 3rd. Measles.

At Aughton from November 9th to November 28th. Whooping Cough.

On an outbreak of any infectious disease affecting school life occurring, the affected district has been visited, and returns of absentees from school obtained. The usual bills have been posted and hand bills distributed recommending the precautions to be taken to prevent the spread of infection, and, where necessary, schools have been closed and disinfected. In all cases the school teachers have been instructed as to the exclusion of scholars presenting any symptoms of the prevalent disease, and I have examined a large number of school children for suspected unrecognised cases.

I would strongly recommend that all the schools in the district should be supplied with disinfectant, and instructions given to the caretakers to have the school floors sprinkled with a solution of the disinfectant before sweeping. In this way disease germs and vermin could be kept to some extent under control instead of impregnating the air, as is done when the floors are swept in the dry state. I consider also that during the summer vacation all schools should be thoroughly disinfected under the supervision of one of the sanitary staff. The expense of thorough disinfection, if intelligently carried out, is money well spent.

Of the 90 cases of Scarlet Fever notified 72 were removed to Hospital. Of the 61 cases of Typhoid Fever 55 were removed, and of the 23 cases of Diphtheria 17 were removed. As usual, in many cases, I was obliged to apply considerable pressure before those in charge of the case would consent to removal; and, curiously enough, these were usually cases in which there was no opportunity of proper isolation at home, and removal was almost a necessity. In all instances where cases were isolated at their own homes, I personally visited the premises and gave instructions for proper isolation and for endeavouring to prevent the spread of infection.

Whenever a case has been removed to Hospital the premises, clothing, and bedding have been thoroughly disinfected, and in the case of a patient isolated at home the same precautions have been taken after recovery.

I regret to have to report to you a very serious epidemic of Typhoid Fever which occurred at the new colliery district of Whinney Hill and Dalton Brook. Unfortunately this congested district is dependent on the privy midden system for the disposal

of human excrement and house refuse. When building operations were commenced in this district some years ago I drew your attention to the urgent desirability of introducing the water closet system, or, failing that, the "Pail System," having had unpleasant experiences of infected privy middens both at Treeton and North Staveley in connection with the prevalence of Typhoid Fever.

The disease in the present epidemic was of a most virulent and fatal type, ten deaths having occurred out of forty-three cases notified. The first case was notified on 9th August, about which time Typhoid Fever was somewhat prevalent in districts adjoining yours. This case was immediately removed to Hospital and proved fatal on August 23rd. After removal the premises and clothing were disinfected, the midden ashpit emptied, and the yard, which is asphalted, together with the inside and outside of the midden ashpit, thoroughly sprayed with a strong solution of perchloride of mercury. On personal inspection I was satisfied that infection had been controlled.

About this time the ashpits were becoming rather full, and flies were very abundant.

On September 17th and 23rd three further cases were notified in one house, the midden of which was not far distant from that of the house where the first case occurred, the doors for emptying the two middens facing one another, though not directly opposite. These three cases were also immediately removed to Hospital and the premises disinfected, as in the previous case. On inspection on this occasion I formed the opinion that the spread was due to midden infection, probably fly borne, from the first midden, during or previous to emptying. I now gave instructions that all middens within a given radius of the infected centre should be emptied and thoroughly disinfected, after which a man was employed to spray daily all the ashpits, middens, and yards in the infected block. Eight further cases were notified between this date and October 10th, all within the infected radius. No further case was notified at Whinney Hill until the 19th of November, when four further cases occurred in two adjoining houses. This fresh outbreak I found was due to an unrecognised case in an infant suckling at the breast, who had been ill for six weeks, but was supposed to be suffering from "a cold." The mother of this child was the first case in the fresh outbreak. These four cases were removed to Hospital, and the same stringent precautions taken as before, and no further spread of the disease took place here.

In the meantime, however, in the adjoining district of Dalton Brook, on October 19th, a case of Typhoid Fever was notified, and

on immediately visiting the premises I found the patient was the son of a woman who had come from the infected area at Whinney Hill, and had, in fact, been washing clothes in one of the infected houses. This case was removed to Hospital, and the premises, clothing, &c., disinfected. This woman also developed the disease, and went to Hospital in her turn. I now turned my attention to the infected area in this district, and after having all the midden ashpits emptied I had two men employed daily spraying middens, ashpits, yards, and gullies with perchloride solution.

Not being thoroughly satisfied that the rough back roads between the rows of middens, on which the contents are thrown when emptying, was being thoroughly disinfected, a watering cart was brought into use with a wide spray. This was filled with a disinfecting solution, and kept constantly going for several weeks, spraying the roads and the walls of the middens. In all, forty-three cases were notified, and fortunately I was able to effect early removal to Hospital of all except one case, which proved fatal directly after notification.

During the epidemic I paid almost daily visits of inspection to the infected neighbourhood, and from time to time personally supervised the disinfection.

It is very important that strict supervision should be kept over the regular and systematic emptying of the ashpits, followed by disinfection, not only here but in all similar congested parts of the district where the midden ashpit system is in vogue.

During many of my inspections at Dalton Brook, Whinney Hill, Laughton Common, Tinsley Park, and at other places in the district, I have found decaying animal and vegetable refuse lying about the yards and the roads behind the ashpits, these places being used by the children as public water closets; and I have frequently found considerable quantities of human excrement deposited in such places. I have warned and threatened many of the householders against these insanitary conditions, and am constantly having warning bills posted in such neighbourhoods, but I am afraid it is impossible to alter the habits of such people. These adverse conditions, and the absence of personal cleanliness make it most difficult to combat such an epidemic as we have had to deal with at Whinney Hill and Dalton Brook.

Diarrhoea has, as usual, been present during the summer and autumn months, 38 deaths having been attributed to that cause, of which 30 occurred in children under one year of age.

Pneumonia has, as in 1907, a very high mortality, 58 deaths having been certified as due to that cause, 37 of which occurred in children under 5 years of age.

In November last I was called upon to examine some cases of sudden illness on a canal boat at Tinsley, two of which, out of the three, proved fatal. I formed the opinion in agreement with the medical man attending, who had summoned me, that these people were suffering from Ptomaine poisoning, and at the inquest, which followed, a verdict of death from Ptomaine poisoning was brought in, in accordance with the medical evidence. On enquiry, I was informed that the cargo of the boat consisted of iron ore and Christmas toys, which seemed to me at the time harmless enough. In the light of some fatal cases which occurred on a steamer at Grimsby, however, the affair assumed a different complexion, and on making further enquiries I found that the "iron ore" was really "Ferrosilicon," from inhalation of the gases of which I am now inclined to believe these two unfortunate people died.

During the year I have had seventeen samples of drinking water analysed, nine of which proved to be of wholesome and pure quality. Of the remaining eight, one was from the public well at Ulley, the result of the analysis pointing to very serious sewage contamination. This well has been permanently closed. Five samples were from suspected wells in different parts of the district, the analysis in each case pointing to pollution by surface and subsoil drainage. These wells have now all been put into a proper state of repair, and made impervious down to the solid rock, after which further analyses have given satisfactory results in the several cases where a second sample has been taken. The branch water supply has been added to at Aston, Brinsworth, and Dalton, and several new wells have been sunk and satisfactorily constructed in different parts of the district. There is still a deficiency in both quantity and quality at Wickersley, Ulley, Brampton, and Laughton.

The scavenging during the year has not been carried out to my satisfaction, as I have reported to you on several occasions. At Whinney Hill, Dalton Brook, Laughton Common, and Tinsley I have found the ashpits full to overflowing more than once, and a similar state of affairs has existed in other less thickly populated parts of the district. I cannot impress upon you too forcibly the danger of irregular and inefficient scavenging, especially in thickly populated places, where the midden ashpit system exists.

I have during the year made regular and systematic inspections of all parts of the district, and am glad to report that the general sanitation is gradually improving. I should like to see a more

rapid development in the improvement of the cowsheds and dairies, especially with regard to cleanliness.

During the year 222 nuisances have been abated.

The prompt and kind assistance of Dr. Burman, Medical Officer of the North Rotherham Joint Isolation Hospital, in helping me to deal with a severe epidemic, and of Drs. Kenny and Mason, Medical Officers of the South Rotherham Joint Isolation Hospital, who are always most willing to assist in times of stress, has been invaluable.

A very severe pressure has been put upon the sanitary staff under Mr. Hey during a year when disinfection has been carried out to an enormous extent, and I am well satisfied with the ready and willing help which I have ungrudgingly received on all occasions.

The Clerks have, as usual, given me most valuable advice and assistance in all legal and clerical matters.

I beg to draw your attention to the statistical tables at the end of this report.

Yours obediently,

LEWIS J. WEATHERBE,

Medical Officer of Health.

Clough House,
Rotherham.

Vital Statistics.

POPULATION estimated to Middle of each Year.	BIRTHS.		Total Deaths Registered in the District				Total Deaths in Public Institutions in the District.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	Nett Deaths at all ages belonging to the District.	
			Under 1 year of Age.		At all Ages.					Num- ber.	Rate
	Num- ber.	Rate.	Num- ber.	Rate per 1,000 Births regis- tered.	Num- ber.	Rate					
(1905) 23000	764	33·21	109	142·67	335	14·56	10	4	2	333	14·47
(1906) 25000	802	32·08	135	168·32	374	14·96	8	5	30	407	16·28
(1907) 28000	934	33·36	135	144·53	376	13·42	8	5	39	410	14·64
(1908) 30000	996	33·20	157	157·63	446	14·86	8	4	48	490	16·33

Area of District
in acres (excluding
Water) } 34825

Total Population at all ages, 18805—Census of 1901.
No. of Inhabited Houses, 3697.
Average No. of Persons per House, 5.09

Year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 Year.
1905	23000	764	335	109
1906	25000	802	407	135
1907	28000	934	410	135
1908	30000	996	490	157

Cases of Infectious Disease notified during 1908.

Notifiable Disease.	Cases notified in Whole District.							Total Cases Notified in each locality.			No. of Cases Removed to Hospital from each locality.		
	At all Ages.	At Ages. Years.						North Rotherham District.	South Rotherham District.	North Rotherham District.	South Rotherham District.	Total cases removed to Hospital.	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.						
Diphtheria (including Membranous Croup)	23	2	4	15	2		7	16	5	12	17		
Erysipelas	20	2	1	1		15	2	18					
Scarlet fever	90	1	31	56	2		61	29	53	19	72		
Enteric fever	61		4	27	11	19	50	11	47	8	55		
Puerperal fever.....	3				1	2	1	2					
Totals	197	5	40	99	16	36	121	76	105	39	144		

Causes of, and Ages at, Death during 1908.

Causes of Death.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.							Total Deaths whether of Residents or Non-Residents in Public Institutions in the District.
	All Ages.	Under 1 Year	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards	
Measles	14	3	8	3	...	...	...	...
Scarlet Fever ...	4	1	2	1	...	...	...	3
Whooping Cough	8	5	3	...	...	...	...	...
Diphtheria (including Membranous Croup)	5	1	1	3	...	...	...	3
Croup	1	...	1	...	...	...	...	...
Fever, Enteric ...	10	.	...	2	1	7	...	2
Epid'emic Influenza	2	...	...	...	...	1	1	...
Diarrhœa... ..	38	30	6	...	...	1	1	...
Enteritis	5	2	1	...	1	1	...	...
Puerperal fever ...	2	...	...	...	1	1	...	...
Phthisis (Pulmonary Tuberculosis)	19	...	...	3	5	11	...	...
Other tuberculous diseases ...	9	4	3	2	...	...	...	...
Cancer, malignant disease	23	...	1	...	...	16	6	...
Bronchitis	32	12	6	...	...	7	7	...
Pneumonia	58	22	15	...	2	16	3	...
Alcoholism } Cirrhosis of liver }	3	...	...	...	...	3	...	...
Premature birth and Congenital defects	34	34	...	...	...	...	...	...
Diseases and accidents of parturition ...	2	...	...	...	1	1	...	...
Heart diseases ...	35	..	...	1	3	20	11	...
Accidents	44	...	4	4	12	22	2	...
Suicides	6	...	...	1	1	4	..	...
Marasmus and Malnutrition ...	13	13	...	...	...	...	...	...
Septic diseases ...	16	2	4	2	2	5	1	...
Senile decay	43	...	...	...	...	...	43	...
Convulsions	29	25	4	...	...	...	...	...
Apoplexy	9	...	...	...	...	5	4	...
All other causes .	26	3	4	1	1	10	7	...
All causes ...	490	157	63	23	30	131	86	8

Infantile Mortality during the Year 1908.

Under One Year of Age

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under one Year.
	24	15	7	2	48	16	9	6	18	7	9	12	12	9	5	6	
All Causes	24	15	7	2	48	16	9	6	18	7	9	12	12	9	5	6	157
Measles																3	3
Scarlet Fever.....									1								1
Diphtheria (including Mem- branous Croup.....				1	1												1
Whooping Cough												1	3			1	5
Diarrhœa, all forms			1		1	2	3	2	5	3	3	4	2	4		1	30
Enteritis, Muco-enteritis,) Gastro-enteritis												1	1				2
Premature Birth	12	1	1		14	2	1										17
Congenital Defects.....	6	6			12	1		3	1								17
Atrophy, Debility, Marasmus		2	3		5	2	1	1	1	1				1	1		13
Tuberculous Peritonitis) Tabes Mesenterica. ..)													1				1
Other Tuberculous Diseases..										1	1	1					3
Convulsions	5	3	1		9	6	1		5			1		1	1	1	25
Bronchitis.....		1	1	1	3		1		2		3		1	1	1		12
Pneumonia		1			1	2	1		2	2	2	4	4	2	2		22
Other Causes	1	1			2	1	1		1								5
	24	15	7	2	48	16	9	6	18	7	9	12	12	9	5	6	157

Population (estimated to middle of 1908), 30,000.

Births in the year :—Legitimate, 967 ; illegitimate, 29.

Deaths in the year :—Legitimate } 157
 Illegitimate } 157

Deaths from all causes at all ages, 490.

TABLE REQUIRED BY THE WEST RIDING COUNTY COUNCIL.

WATER SUPPLY.—Any development during 1908—Aston, 48 yards; Brinsworth, 16 yards; Dalton, 732 yards; and several wells put in sanitary repair. Developments still needed? Wickersley, Brampton-en-le-Morthen, Ulley, Laughton Common. Has public supply been continuous? Very slightly intermittent. Any complaint as to action on lead?—No. Any samples tested for lead during 1908—No.

SEWERAGE—Developments during 1908—Aston, 146 yards; Brinsworth, 342 yards; Dalton, 900 yards; Laughton, 60 yards. Developments still needed? Laughton Common. Any complaints as to offensive manholes?—Yes, from open covers, remedied.

SEWAGE DISPOSAL—Any complaint as to outfall works?—Yes.

SCAVENGING.—Performed by contract in parts. Annual cost, £2,085. Any inadequacy, and where?—Tinsley, Laughton Common, Thrybergh, Dalton.

BY-LAWS.—Any adopted or sanctioned during 1908?—No.

ADOPTIVE ACTS.—Any steps taken for the consideration, adoption, or application of:—(a) Notification of Births Act, 1907. No. (b) Public Health Acts Amendment Act, 1907. Yes. What sections?—All in parts II, III, IV and V. (c) Other Adoptive Acts?—No.

Regulated Buildings, Trades, &c.	No. in District.	No. on Register.	Total No. of Inspections made.	General Conditions.
Canal Boats .....	..	..	4	Good.
Slaughter Houses .....	..	12	8	Good.
Cowsheds	120	120	30	Improving.

Any nuisance from fish-frying?—No.

COWSHEDS.—Any special inspection made during 1908?—Yes, in connection with infectious diseases. Any action taken by outside Authorities, e.g., under "Milk Clauses" concerning milk supplied from this district?—No.

INFECTIOUS DISEASE.—Any suspected spread by rats, dogs, cats, fowls, flies, or fleas?—Typhoid by flies at Dalton and Thrybergh. How is infected clothing dealt with?—Disinfected by steam at Hospital.

ISOLATION HOSPITALS.—Any observation on adequacy or efficiency?—Should always be prepared to treat three diseases instead of two.

SCHOOLS.—Any ailment or contagious disease associated particularly with school-life during 1908?—Measles, Scarlet Fever, Whooping Cough.

MIDWIVES ACT, 1902.—Are there any uncertified women attending confinements without a doctor?—No.

DWELLINGS.—Number of houses built during 1908?—390. General character. Cottages. Do the new houses accord with By-laws? Yes. Who sees plans?—Surveyor and Council. Any occupied houses unfit for habitation?—No. Any overcrowding of persons in houses?—No. Any action taken under the Housing of the Working Classes Acts?—No. Is house to house inspection systematically made?—Yes. Are records kept?—Yes.

INFANTILE MORTALITY.—What organised effort to control it?—None at present. Do you recommend appointment of Health Visitors?—Have not done.

PREVENTION OF CONSUMPTION.—Any system of notification?—No. Any Sanitary Inspection of Patients' Houses?—No. Any Disinfection of Patients' Houses?—No. Any distribution of advice?—No. Any action re Spitting? No. Any disinfection of public rooms, vehicles, &c.?—No.

NUISANCES.—Total number of nuisances in hand at close of 1907, 169. At close of 1908, 83. Reported during 1908, 136. Abated during 1908, 222. Total number of legal notices served for abatement of nuisances during 1908, 1.

Total number of summonses or other legal proceedings, none. Number of sink wastes disconnected during 1908, 90 repaired. Number of closets newly constructed during 1908, 390. Kinds? Water closets and combined privy. Number of closets reconstructed during 1908, 16. Kinds? Privy: Number of house drains tested, 1. What method adopted? Smoke.

BIRTHS.—During 1908: Males, 496; Females, 500; total, 996. Number illegitimate, included in above, 29.

DEATHS.—During 1908—(1) Gross Deaths, i.e., total actually registered in the district, without any correction, 446; (2) Nett Deaths, on which the rates are calculated. Males, 259; females, 231; total, 490. Number uncertified, included in the above? None.

SANITARY REQUIREMENTS OF DISTRICT, AND SUGGESTIONS OF MEDICAL OFFICER OF HEALTH:—Accommodation for three diseases at both Joint Isolation Hospitals. Sewerage scheme and water supply at Laughton Common. Better water supply at Wickersley, Brampton-en-le-Morthen, and Ulley.

Annual Report of the Medical Officer of Health for the year 1908 for the Rural District of Rotherham on the administration of the Factory and Workshop Act, 1901, in connection with Factories, Workshops, Workplaces, and Home-work.

Premises.	Number of Inspections.
Factories (including Factory Laundries)	4
Workshops (including Workshop Laundries)	12
Workplaces (other than Outworkers' premises included in Part 3 of this Report).....	1
Total	17

DEFECTS FOUND.

	Number of Defects.	
	Found.	Remedied.
Nuisances under the Public Health Acts:—		
Want of Ventilation	1	1
Total	1	1

HOMEWORK.

Nature of Work.	Number of Addresses of Outworkers received from other Councils.	Number of Inspections of Outworkers premises.
File Making	1	2

REGISTERED WORKSHOPS.

Workshops on the Register at the end of the year.	Number.
Steel and Iron Works	4
Joiners, Wheelwrights, and Blacksmiths	17
Dressmakers	1
Bakehouse	1
Laundry (hand)	1
Total number of Workshops on Register	24

OTHER MATTERS.

Matters notified to H.M. Inspector of Factories.	Number.
Notified by H.M. Inspector	1
Total	1

L. J. WEATHERBE, M.B.C.M.,

Medical Officer of Health.

8th February, 1909.