

[Report 1925] / Medical Officer of Health and School Medical Officer of Health, Southend-on-Sea Borough.

Contributors

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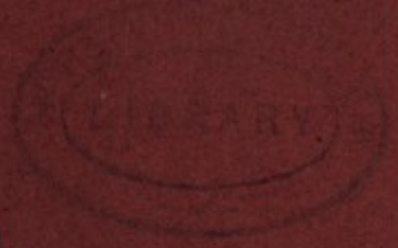
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County Borough of Southend-on-Sea.

ANNUAL REPORT

ON THE WORK OF THE

PUBLIC HEALTH DEPARTMENT

FOR THE YEAR 1925,

BY

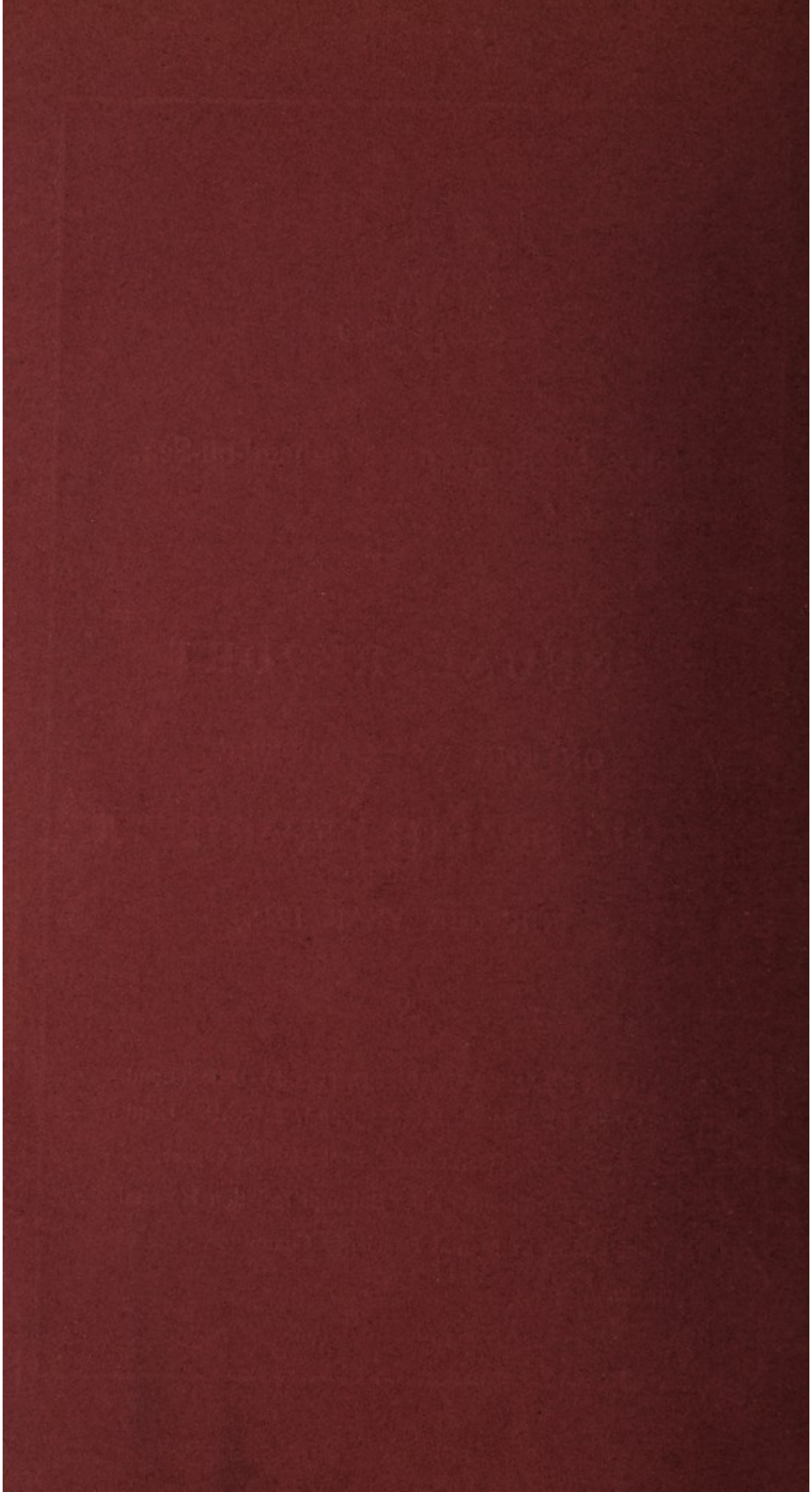
CHARLES GRANT PUGH, M.D. (Lond.), B.Sc. (Lond.),
D.P.H. (Camb.), M.R.C.S. (Eng.), L.P.C.P. (Lond.).

Medical Officer of Health and School Medical Officer.

Medical Superintendent of the Borough Isolation Hospitals.

Medical Officer of Mental Deficiency Committee.

Etc., etc.





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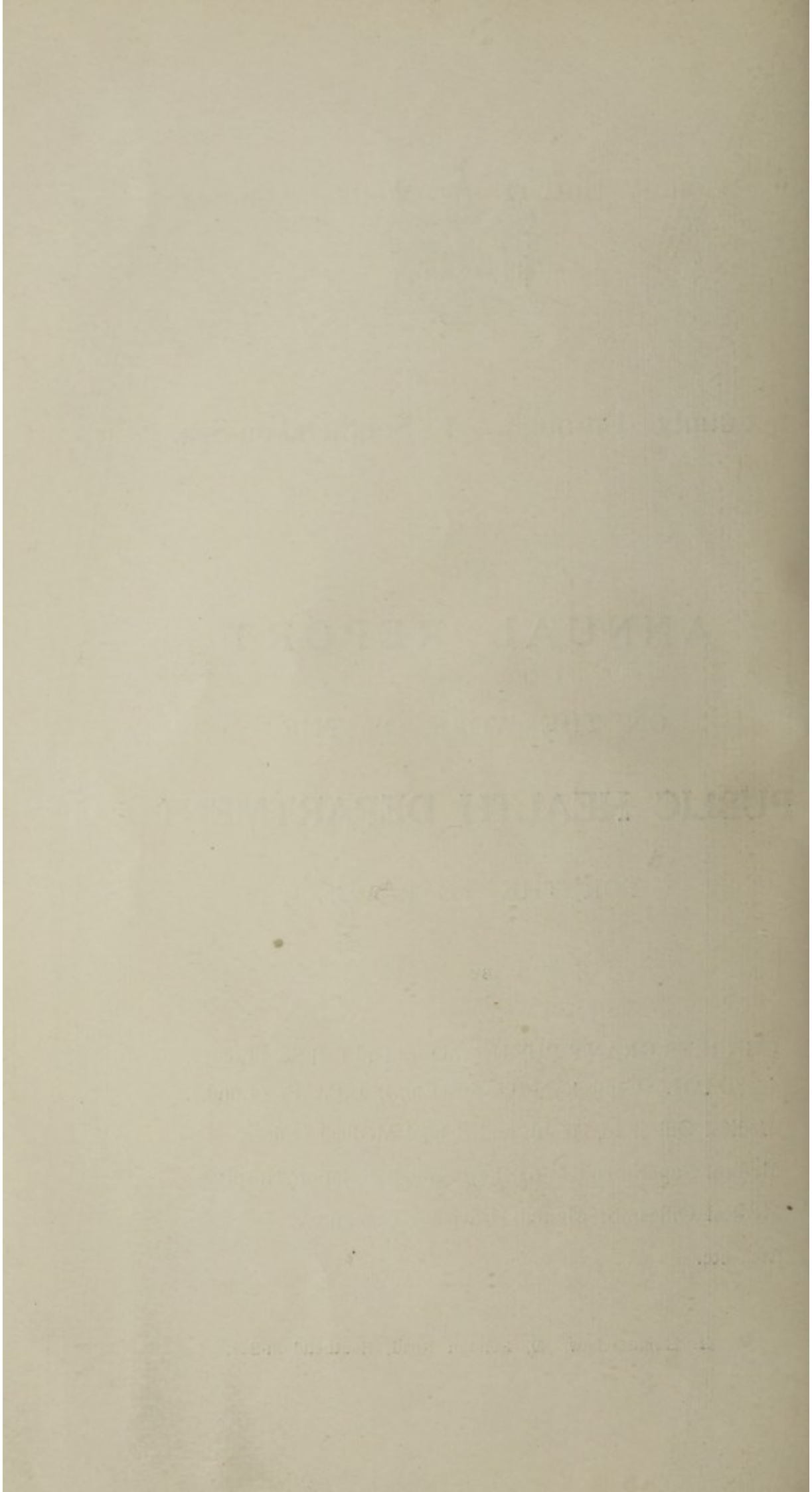
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County Borough of Southend-on-Sea.

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HEALTH COMMITTEE.

November, 1925, to November, 1926.

Mr. Councillor A. A. BUTTERFIELD, J.P. (Chairman).

THE MAYOR (Mr. Alderman DOWSETT).

Mr. Councillor ARMITAGE. Mr. Councillor N. J. OSBORNE.
 Mr. Councillor FLINT. Mr. Councillor W. OSBORNE.
 Mrs. Councillor HAWKEN, J.P. Mr. Councillor SULLIVAN.
 Mr. Councillor LE MASURIER, Mr. Councillor TATTERSALL.
 C.B.E.

Mr. Councillor YOUNG.

MATERNITY AND CHILD WELFARE COMMITTEE.

November, 1925, to November, 1926.

Mrs. Councillor HAWKEN, J.P. (Chairman).

This Committee consists of the Health Committee, together with two co-opted members, viz., Mrs. HUNT and Mrs. STEER.

MENTAL DEFICIENCY COMMITTEE.

November, 1925, to November, 1926.

Mr. Councillor A. A. BUTTERFIELD, J.P. (Chairman).

This Committee consists of the Health Committee, together with two co-opted members, viz., Miss DELF and Miss WELLS.

COMMITTEE UNDER THE BLIND PERSONS ACT.

November, 1925, to November, 1926.

Mr. Councillor A. A. BUTTERFIELD, J.P. (Chairman).

This Committee consists of the Health Committee, together with Mr. W. ENEVER, elected by the Education Committee, and two co-opted members, viz., Capt. LE PAGE AGNEW and Mr. G. ROSE.

County Board of Board of Health

HEALTH COMMITTEE

Resolves 1922, December 1922

The Committee on the Board of Health

The Board of Health

The Board of Health

The Board of Health

The Board of Health

C. H. B.

The Committee on

HEALTH AND CHILD WELFARE COMMITTEE

Resolves 1922, December 1922

The Committee on the Board of Health

The Board of Health

The Board of Health

MENTAL DEFECTIVE COMMITTEE

Resolves 1922, December 1922

The Committee on the Board of Health

The Board of Health

The Board of Health

COMMITTEE FOR THE BLIND PERSONS

Resolves 1922, December 1922

The Committee on the Board of Health

The Board of Health

The Board of Health

1. PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

The Borough of Southend-on-Sea lies on the north coast of the Thames Estuary; as extended it covers an area of 7,083 acres, and is roughly quadrilateral in shape; its length fronting the Estuary is approximately six and a quarter miles in extent, while its width varies, being approximately one and a quarter miles at the western boundary, two and one-third miles at the centre, and one and seven-eighths miles at the eastern boundary.

Elevation.

While the houses on the front in the eastern portion of the town are at the sea level, those of the central portion are situated on cliffs from eighty to one hundred feet above sea level; proceeding towards the west the level gradually falls until at the centre of the western portion the houses are again at sea level, cliffs, however, becoming again a prominent feature of the front towards the western boundary.

Speaking generally, it may be said that the central portion of the Borough stands on high ground; the main London Road which under various names traverses the whole length of the Borough is 93 feet above O.D. at its junction in the High Street in the centre of the town; proceeding in a westerly direction, it gradually rises until a level of 120 feet is reached at the junction of London Road and West Road, while in an easterly direction the road falls, first gradually and then rapidly, to Bourne Green, which is only 20.4 feet above Ordnance Datum. The London Road is thus placed on a crest of high ground which runs from west to east through the whole length of the Borough, and from it the land slopes fairly uniformly in each direction.

Geology.

Geologically, the surface formation varies, but it may be said Old Southend, Southchurch and Prittlewell have a surface soil of river gravel, while the greater part of Westcliff and Leigh is on the London Clay several hundred feet in thickness.

The Foreshore.

The foreshore which, as has been mentioned above, is approximately six and a quarter miles long, has a total area of 3,415 acres, and has a width of about 1,500 yards, 1,700 and 2,300 yards respectively at its western, central and eastern portions respectively; it is entirely covered at each tide, and consists, except near the esplanades, largely of mud areas interspersed with portions covered with clean but fine sand; at the present time the appearance of the foreshore near low water mark is rendered somewhat irregular and unsightly by large banks and isolated clumps of mussels, but in the portions which have been cleared of shellfish there are good stretches of sand. The

greater portion of the foreshore of the Borough, viz., that from the western end of the Leas to an imaginary line from Bryant Avenue to Minster Church is owned by the Corporation; the remaining portions of the foreshore of the Borough, viz., the Thorpe foreshore to the east and the Leigh foreshore to the west are private property belonging to the Burgess Trustees and the L.M.S. Railway Company and the Salvation Army respectively.

Occupations of Inhabitants.

The Borough is essentially a seaside and health resort and residential town, there being, apart from the building, no industry other than catering for the wants and pleasures of the inhabitants and of the visitors. Formerly appealing only almost entirely to trippers and summer visitors for short periods, it has within recent years entirely altered in character, having become largely a residential town and the home of merchants, clerks, and others engaged in London, its proximity to the City and the excellent and cheap train service rendering it very popular as a seaside place of residence, more particularly for men with families. The Town has also become a favourite place of residence for persons retiring from business, the short railway journey to London rendering the latter easy of access for elderly men who may require to visit the City on one or two days a week. Its increasing reputation as a health resort has also attracted large numbers of invalids and delicate persons, while the rapid growth of the town and the carrying out of extensive public improvements have led to a great influx of men engaged in the building and allied trades. During the summer months it is estimated that there are in the Borough an average of about 30,000 temporary visitors, in addition to a variable number of day trippers, on some days amounting to as many as 90,000. Leigh-on-Sea is the home of a number of men employed in the cockle industry.

Divisions of the Borough.

The Borough is now divided into ten municipal wards, viz., Chalkwell, Westborough, Milton, Victoria, Prittlewell, Pier, Thorpe, Southchurch, Leigh and St. Clements. Pier Ward and Prittlewell Ward, and adjoining portions of the Thorpe Ward, Victoria Ward and Milton Ward correspond with Southend as it was before the recent phenomenal growth of the Borough took place. Leigh and St. Clements Wards comprise the former Urban District of Leigh (which was brought within the Borough by the Corporation Act, 1913), but included in them are also portions of the Chalkwell and Westborough Wards of the non-extended Borough and the part of the Parish of Eastwood added to the Borough by the same Act.

The Borough may be considered to be formed by an aggregate of five small towns, viz.: (1) Leigh-on-Sea; (2) Westcliff-on-Sea; (3) Southend-on-Sea proper; (4) Southchurch; and (5) Thorpe Bay.

II. STATISTICAL SUMMARY, 1925.

Area	...	...	...	...	7,082 acres.
Number of inhabited houses—					
Census 1921	...	...	...	...	18,444
Enumerated October 1925	...	...	...	...	23,003
Number of unoccupied houses and of new houses not yet occupied, enumerated					
October, 1925	...	...	...	...	727
Number of houses in course of erection,					
October, 1925	...	...	...	...	553
Number of families or separate occupiers,					
1921	...	...	...	...	22,723
Rateable value, 1925	...	...	...	...	£892,655
Sum represented by a penny rate	...	...	...	...	£3,500
General District Rate, 1925-26	...	...	...	...	5/4
Poor Rate, 1925-26	...	...	...	...	5/4
Loan Debt—					
Electric Lighting, Light Railways and Pier Undertakings	...	...	...	...	£703,653
Gas Undertaking and Private Street Works	...	...	...	...	£121,934
Higher Education and Elementary Education	...	...	...	...	£208,041
Public Health and General Administration purposes	...	...	...	...	£836,581
Housing	...	...	...	...	£189,838
			Total	...	<u>£2060,047</u>
Total rainfall, 1925	...	...	...	...	21.33 inches
Total sunshine, 1925	...	...	...	...	1,670 hours

III. VITAL STATISTICS, 1925.

POPULATION—

At Census	...	...	...	...	106,010
Estimated at mid-year, 1925—					
by Registrar General	...	...	...	...	98,060
by Southend Waterworks Company	...	...	...	...	127,479
by Town Council	...	...	...	...	120,000

BIRTHS—

		Male	Female	Total
Number of legitimate births	...	733	713	1,446
Number of illegitimate births	...	44	39	83
Total births	...	<u>777</u>	<u>752</u>	<u>1,529</u>

Birth Rate—

On Registrar General's estimate of population	15.6
On Town Council's estimate of population	12.7

DEATHS—

		Male	Female	Total
Number of deaths	...	520	632	1,152
Death rate per 1,000—				
On Registrar General's estimate of population	11.7			
On Town Council's estimate of population	9.6			

INFANT MORTALITY RATE—

Deaths of infants under 1 year of age per 1,000 births—					
Legitimate	... 40.	Illegitimate	... 193.	Total	... 49

ZYMOTIC DEATHS—

No. of deaths from—				
Measles (all ages)	...	...	...	1
Whooping Cough (all ages)	...	...	...	9
Diarrhoea and Enteritis (under 2 years of age)	...	...	...	6
Scarlet Fever	...	...	...	2
Diphtheria	...	...	...	—
Smallpox	...	...	...	—
Typhoid Fever	...	...	...	—
Total zymotic deaths	...	...	...	<u>18</u>

Zymotic death rate per 1,000 population—

On Registrar General's estimate of population	.18
On Town Council's estimate of population	... .15

Deaths from pregnancy and parturition—

No. of women dying in or in consequence of child birth—

(a) from sepsis	...	...	...	4
(b) from other causes	...	...	...	3

The following table, based on that issued by the Registrar General, is given for comparison:—

	Annual rate per 1,000 living		Deaths under one year to 1,000 births.
	Births.	Deaths from all causes.	
England and Wales	18.3	12.2	75
105 County Boroughs and great towns	18.8	12.2	79
157 Smaller Towns	18.5	11.2	74
London	18.0	11.7	67
Southend-on-Sea	15.6	11.7	49

IV. POOR LAW RELIEF AND GRATUITOUS MEDICAL RELIEF.

The County Borough forms, with the Rochford Rural District and the Shoeburyness Urban District, the district of the Rochford Union. Relative to the size of the population the out-relief granted in the Borough is extremely small, the average weekly amount in 1925 being £163 12s. 3d. of which £11 10s. 7d. was in kind and £3 11s. 3d. in connection with unemployed relief works. The Poor Law Institution is at Rochford, three miles distant, the workhouse having accommodation for about 204 individuals and the Hospital about 356 beds. The Hospital has recently been enlarged by the provision of additional wards and new quarters for the nursing staff. The Guardians have, during recent years, done much to bring the Hospital up to modern requirements; they have appointed a surgeon and a physician as consultant officers, have got the Hospital recognized as a training school for nurses, have improved the equipment and in other ways have increased the efficiency of the institution. Unfortunately, the Hospital is situate in the grounds of the Poor Law Institution and is immediately adjacent to the workhouse; although possibly there is now less reluctance on the part of the sick to enter the Hospital than before the recent improvements in the administration, the stigma of the Poor Law remains and considerable pressure has often to be brought to bear on many self-respecting members of the community to enter the Rochford Hospital even when no other method of obtaining the skilled nursing or individual treatment they need is open to them.

Owing to the rapid growth not only of the Borough but also of the surrounding districts, the Poor Law Institution is, in spite of frequent additions in recent years, inadequate for the needs of the present population; about 50 inmates have had to be boarded out at the Maldon Poor Law Institution. The Guardians are considering the provision of new Mental wards, the present wards for mental patients being regarded as both unsuitable and inadequate for present requirements.

Gratuitous Medical Relief.

Apart from the Out-patient Department of the Victoria Hospital, and the various Clinics maintained by the Corporation in connection with the School Medical Service and under their V.D., Tuberculosis, and Maternity and Child Welfare Schemes, there is no provision for free out-patient medical treatment. The medical practitioners of the Borough, however, have an arrangement with the Civic Guild of Help under which they are prepared to treat free of charge any patient vouched for by the Guild as necessitous. The out-patient department of the Victoria Hospital is extensively used, though apart from the eye and X-ray departments which are staffed by specialists, it is questionable whether the benefits accruing justify the heavy expense entailed by its maintenance.

V. SUMMARY OF NURSING ARRANGEMENTS, HOSPITALS, CLINICS, Etc., AVAILABLE FOR THE DISTRICT.

(a) Professional Nursing in the Home.

1. *General.* There are two District Nurses attached to the local Victoria Hospital who carry out the home nursing of chronic cases other than cases of Tuberculosis, or other infections and of cases connected with maternity, etc. A District Nurse is maintained in the Leigh Area of the Borough by Queen Alexandra's Jubilee Nursing Association, and undertakes similar duties in the western portion of the Borough.
2. *Infant and Maternal Care.* The eight whole-time Health Visitors and one part-time Health Visitor in the employ of the Corporation undertake the home visiting of infants, young children, and expectant mothers.
3. *Infectious Diseases.* The Health Visitors carry out the home-nursing of cases of Pneumonia, Measles, Whooping Cough, etc., when the severity of the attacks or the development of complications renders such a course desirable. They similarly undertake the home nursing of cases of Puerperal Fever occurring in the practice of midwives or when no other skilled nursing assistance is available.

(b) Midwives.

Thirty-two midwives notified their intention during the the year to practise within the County Borough but of these four did not attend any cases, three attended one case only, four attended two cases only, and the remainder attended as follows :—

Under 10 cases	...	...	8
Between 10-20	...	...	3
„ 20-30	...	...	—
„ 30-40	...	...	2
„ 40-50	...	...	2
„ 50-60	...	...	1
„ 60-70	...	...	2
„ 70-80	...	...	2
„ 80-90	...	...	1
„ 90-100	...	...	—

Of the practising midwives, two only are untrained, the remainder holding the certificate of the Central Midwives Board.

(c) Clinic and Treatment Centres.

1. *Infant and Maternity Centres.* Provided by Southend-on-Sea Town Council.

(a) Southend Centre—held at St. George's Hall, Park Road, Southend-on-Sea, on Tuesdays and Fridays, 2.15 to 4.45 p.m. Ante-natal Clinic held on first Wednesday in each month from 2.15 p.m.

(b) Leigh Centre—held at Council Offices, Leigh-on-Sea, on Mondays, from 2.15 to 4.45 p.m. Ante-natal Clinic held on first Friday in each month, from 2.15 p.m.

(c) Southchurch Centre—held at Belle Vue Baptist Church Hall, Belle Vue Road, Southchurch, on Thursdays, from 2.15 to 4.45 p.m.

2. *Day Nurseries.* None.

3. *School Clinic.* Provided by the Southend-on-Sea Education Committee. The Central Clinic is situated in Great Eastern Avenue in the centre of the Borough, and has ample waiting room accommodation, offices for the nurses and clerks, consultation rooms for the Medical Officers, a dental surgery, an eye clinic, a minor ailment treatment room, baths for the treatment of scabies, etc.

(a) *General* An Inspection Clinic is held each weekday, except Saturday, at the Central Clinic, from 2 p.m.—A Clinic is also held at the Leigh Municipal Offices each Tuesday, at 5 p.m.

(b) *Dental Clinic.* The Dental Clinic is held at the Central Clinic.

- (c) *Eye Clinic.* The Ophthalmic Surgeon attends at the Central Clinic each Tuesday and Friday, from 2 p.m. to 4.30 p.m.
4. *Tuberculosis Dispensary.* Provided by the Southend-on-Sea Town Council. Situate in Clarence Street, Southend-on-Sea. Open Mondays, Thursdays and Saturdays for males at 2 p.m., and females at 3.15 p.m.; open also on Tuesdays at 6 p.m. for males, and on Fridays at 6 p.m. for females.
5. *Venereal Diseases Clinic.* Provided by the Southend-on-Sea Town Council. Held in Old Administrative Block at Borough Sanatorium, Balmoral Road, Westcliff-on-Sea. Clinics are held as follows:—
- | | | |
|-------------|-----------|-----------------------|
| Sundays, | 10 a.m. | Syphilis (both sexes) |
| Tuesdays, | 10 a.m. | Syphilis (females) |
| | 7.30 p.m. | Gonorrhœa (males) |
| Wednesdays, | 2 p.m. | Gonorrhœa (females) |
| | 4.30 p.m. | Syphilis (both sexes) |
| Fridays, | 7.30 p.m. | Gonorrhœa (males) |
| Saturdays, | 10 a.m. | Gonorrhœa (females) |

New cases are seen every day at 10.30 a.m. Hours for irrigation are as follows:—Males, 7 a.m. to 8 a.m. and 6.30 p.m. to 7.30 p.m. daily. Females, 9 a.m. to 10 a.m. and 5 p.m. to 6 p.m. daily.

(d) Hospitals provided or subsidised by Local Authority.

1. *Tuberculosis.* No Hospital is provided, but one ward block of 16 beds (8 male and 8 female) is provided at the local Isolation Hospital for advanced cases of Phthisis.
- During the year the Council submitted for the provisional approval of the Ministry of Health a proposal to extend this ward block so as to make provision for 32 patients and at the end of the year the matter was still under consideration.
2. *Maternity.* No hospital is provided. In instances in which the home conditions preclude the confinements taking place at the mother's home, the Infant Care Sub-Committee out of its Voluntary Fund assists in suitable cases expectant mothers to pay the fees of Certified Midwives who receive expectant mothers in their homes for the confinement and lying-in; three such cases were assisted during 1925.
3. *Children.* No hospital is provided.
4. *Fever.* The Borough Sanatorium, Balmoral Road, Westcliff-on-Sea. The available accommodation is at present as follows:—

Total beds
on a basis
of 2,000 c.ft.
per bed.

Permanent Buildings.

Osborne Block, sanctioned 1922, completed 1923, at a cost of £5,750, two wards of eight beds, two isolation wards of one bed each	18
Britannia Ward, sanctioned 1910, completed 1915, two wards of eight beds, two isolation wards of one bed each	18
King Block, sanctioned 1906, completed 1910, similar accommodation to Britannia Ward	18
Old Block, erected 1895. One ward of six beds. (The other ward is used for cubicles for domestic staff)	6
Western Block, erected prior to 1892, of two separate wards, each with two rooms with five and three beds respectively	16
Venereal Disease Clinic, single-bedded rooms	4

Temporary Structures.

Allen Block, erected 1902, two wards of eight beds each	16
Tin House, two rooms of one bed each	2
Berthon Hut, capable of accommodating two patients; now used as an annex to Allen Block	2

The various wards are used as follows:—

Disease.	Wards.	on 2000 c.ft. per bed basis	As Wards are ordinarily arranged.	Max.No.in times of pressure.
Scarlet Fever	King and Britannia Blocks	36	44	52
Diphtheria	Osborne Ward	18	22	26
Typhoid Fever	N. Western	8	10	10
Tuberculosis	Allen Block	16	16	16
In reserve	Old Block	6	6	8
	S. Western	8	10	10
V.D. and Ophthalmia Neonatorum	Old Home	4	4	4
	Total	96	112	126

The Tin House and the Berthon Hut are not ordinarily in use as wards as, owing to their distance from the other infectious wards, they cannot be conveniently staffed therefrom.

The wards in reserve are used to accommodate any excess of Diphtheria patients, or of Typhoid patients, or any case of Spotted Fever, or cases of mixed infection.

The following table shows the admissions, discharges and deaths during 1925 :—

	Scarlet Fever	Diphtheria	Diphtheria Carriers	Para Typhoid Fever B.	Typhoid Fever.	Erysipelas	Tuberculous Meningitis	Measles	Tonsillitis	Ophthalmia Neonatorum	Admitted with Infant	Admitted with Mother	Pulmonary Tuberculosis	Totals
Remaining on 1st Jan., 1925	18	8	—	-	-	-	-	-	-	-	-	1	11	38
Admitted during year	105	52	3	25	9	1	2	3	13	3	-	-	37	244
Under treatment during year	123	60	3	25	9	1	2	3	13	3	1	-	48	282
Died during year	2	—	-	-	-	-	2	-	1*	-	-	-	22	27
Discharged during year	92	50	3	22	9	1	-	3	12	3	1	-	16	203
Remaining on 31st Dec., 1925	29	10	-	3	-	-	-	-	-	-	-	-	10	52

*Died from Prematurity

5. *Smallpox.* Situate in Sutton Road, Southend-on-Sea, consists of two galvanized iron buildings with out-houses and provides accommodation for about 14 patients and necessary staff on the Ministry's Standard of air and floor space. It is erected on land bought for the purpose of a cemetery.

(e) Hospitals provided by other Agencies.

The only general hospital in the area is the Southend general hospital which, with its 76 beds and cots, is totally inadequate for the needs of the area it attempts to serve. This was pointed out at some length in last year's report, following the issue of which the then Mayor called a conference to consider the problem; this conference appointed two Committees, one to consider the needs of the area and the part which should be played in a complete hospital scheme by the Victoria Hospital, and the other to report on financial considerations. The first Committee has reported that in their opinion two beds per 1,000 population served should be the ideal to be arrived at, or a total of 310 beds at the present time, increasing with the anticipated growth in population of the areas served to 600 within, say, 25 years. The Committee also recognised that it was impossible to extend the present hospital owing to the inadequacy of the site and that any attempt to increase its accommodation not only would be very costly but would result in a hospital difficult to administer and not equal to modern requirements. The Committee therefore suggested that a new site on the outskirts of the Borough be purchased and a hospital erected thereon, the existing hospital being ultimately utilized solely for Out-patient, Casualty, or Clinic purposes.

Early in the present year (1926) and before the report above referred to of the Mayor's Committee had become public property, Lord Elveden made a most generous offer to the town through the Mayor of a site for a new hospital and of £20,000 towards the cost of its erection, the offer to become operative when the public had subscribed such an amount as would ensure the erection of a hospital of 120 beds.

Failing an adequate response from the public to the lead thus given by Lord Elveden and seconded by Mr. Cecil Jones in his munificent gift of £10,000 for the erection of a children's block at the new hospital, it is clear that further attempts to uphold the voluntary principle must be regarded as futile, and the shortage in the general hospital accommodation will have to be met either by the Guardians through the Poor Rate if they continue to have to deal with cases which would ordinarily be dealt with at a general hospital, or by the Town Council through the General District Rate should they, as the Health Authority, decide in the interests of the public health that it is incumbent on them to take over a duty ordinarily in this country performed by voluntary agencies.

(f) Institutional Care of unmarried mothers, illegitimate infants, etc.

The only institution is the Girls' Shelter, situate at "St. Monica's," Sutton Road, which is maintained by the Chelmsford Diocesan Association for Girls' Aid, and provides shelter for women and girls for short periods pending the making of other arrangements for their welfare.

The Salvation Army maintain a home for children at "Millfield," West Road, Prittlewell, while Nazareth House, London Road, Westcliff, also cares for a number of aged persons. Unmarried mothers who seek admission to the maternity wards of the Poor Law Authority are, if primiparæ, ordinarily sent by the Guardians to London Maternity Homes for their confinements.

(g) Ambulance Facilities.

Apart from the Police Ambulance, the Council has two other motor ambulances mounted on the Berliet Chassis and purchased in 1923 at a cost of £606 each. One of these is reserved for the removal of infectious cases, the other being retained in reserve for use in case of a breakdown of the first but being used on request to convey patients to Nursing Homes, Hospitals, etc.; during the year it was used on 52 journeys, and the total receipts amounted to £29 8s. 0d., no charge being made in 30 cases, and a charge varying according to the means of the patient but not exceeding 8/6 being made for journeys in the Borough.

A sum calculated at the rate of 9d. per mile is charged to the Tuberculosis Account in respect of the use of the In-

fectious Ambulance for removal of tuberculosis patients to the Allen Block, to Sanatoria, etc., the amount thus charged during 1925 being £14 17s. 2½d.

Motor ambulances for the conveyance of the non-infectious sick are also provided by the St. John's Ambulance Association and by a local garage proprietor.

(h) Supply of Antitoxin, Etc.

Diphtheria Antitoxin is stocked at the Borough Sanatorium and at the Health Office, and is obtainable at cost price by private practitioners; in necessitous cases, Diphtheria Antitoxin is supplied free to medical practitioners for treatment of patients pending confirmation of diagnosis by bacteriological examination.

Antistreptococcic serum and Meningococcic serum are also stocked at the Borough Sanatorium and are obtainable at cost price by private practitioners.

(i) Facilities for bacteriological and chemical investigations.

1. *Bacteriological.* The Borough Laboratory is situate at the Borough Sanatorium. During the year, the following specimens were examined:—

	Posi- tive	Nega- tive	Total
(a) For presence of Diphtheria Bacilli			
From patients in the Borough Sanatorium	83	448	531
Sent by Medical Practitioners	84	873	957
(b) For presence of Tubercle Bacilli in sputum	83	340	423
(c) For Widal Reaction—			
Typhoid Fever	14	69	109
Para Typhoid b.	26		
(d) For examination for ringworm spores	26	20	46
(e) For presence of Tubercle Bacilli in Urine	1	6	7
(f) For presence of Pneumococci in Cerebro-Spinal Fluid	1	—	1
(g) Conjunctival discharge (Morax Bacilli)	1	—	1

In addition, 405 specimens of pus from cases of suspected gonorrhœa including cases of purulent ophthalmia and 5 smears from suspected syphilitic sores were examined at the Borough Laboratory.

Specimens of diphtheria bacilli for virulence test, of urine and faeces for presence of bacilli of enteric group, etc., are sent to the Lister Institute for examination.

Specimens of blood, cerebro-spinal fluid, etc., for examination for Wassermann reaction are sent to the Director of the Pathological Department at the Seamen's Hospital, Greenwich.

Samples of graded milks, etc., are sent for analysis to the Counties Public Health Laboratory.

2. *Chemical.* Apart from a few specimens of water and of sewage effluent, all specimens other than those taken under the Food and Drugs Acts requiring chemical analysis were sent to the Counties Public Health Laboratory for investigation.

VI. PUBLIC HEALTH STAFF.

(a) Whole-Time.

1. Medical Staff.

- (a) Charles Grant Pugh, M.D. (Lond.), B.Sc. (Lond.), D.P.H. (Camb.), Medical Officer of Health, School Medical Officer, Medical Superintendent of Borough Sanatorium and of Smallpox Hospital, Bacteriologist, Medical Officer of Venereal Diseases Clinic, Medical Officer to Mental Deficiency Committee, Medical Officer to Blind Persons Act Committee.
- (b) Frank Ernest Ingall, F.R.C.S. (Eng.), D.P.H., Deputy Medical Officer of Health, Assistant School Medical Officer, Assistant Medical Officer of Venereal Diseases Clinic.
- (c) Marjorie Hamilton King, M.B., B.Ch., D.P.H. (Edin.), Assistant Medical Officer of Health, Assistant School Medical Officer, Assistant Medical Officer of Venereal Diseases Clinic. Acts as Inspector of Midwives.
- (d) George Norman Meachen, M.D. (Lond.), B.S. (Lond.), M.R.C.P. (Lond. and Edin.), Tuberculosis Officer.

2. Dental Staff.

Basil Crisp, L.D.S. (Eng.), Dentist, his work being mainly in connection with the School Medical Service, but also undertaking, when required to do so, the dental treatment of patients in connection with the Tuberculosis and the Maternity and Child Welfare Schemes of the Council.

3. Nursing Staff.

- (a) Health Visitors who devote 50 per cent. of their time to the School Medical Service, 40 per cent. to Maternity and Child Welfare Work, and 10 per cent. to Tuberculosis.
- Miss M. Taylor, Certificated Nurse, C.M.B.
 Miss G. Hedger, Certificated Nurse.
 Miss N. Hitchcock, Certificated Nurse, C.M.B.
 Miss E. Prophett, Certificated Nurse, C.M.B.
 Miss M. Lambert, Certificated Health Visitor
 C.M.B.

Miss K. M. Burnett, Certificated Nurse, C.M.B.
 Miss V.M. Crump, Certificated Health Visitor
 C.M.B.
 Miss M. Butcher, Certificated Nurse, C.M.B.

(b) Tuberculosis Dispensary Nurse.
 Mrs. K. H. Croke, Certificated Nurse, C.M.B.

(c) School Clinic Nurse.
 Miss J. MacLaurin, Certificated Nurse.

4. Sanitary Inspectors.

Chief Sanitary Inspector—

E. W. Penn*†

Assistant Sanitary Inspectors and Inspectors
 under Shops Acts—

F. W. Maynard.

L. E. Edwards*

R. B. Macara.

J. H. Lott*

J. P. Clarke*

R. Drake*

*These officers hold Certificates of the Royal Sanitary Institute as
 Sanitary Inspectors and as Meat Inspectors.

†This officer also acts as Inspector under Diseases of Animals
 Acts, Inspector under Food and Drugs Acts, and under Shops
 Act.

5. Clerks.

Public Health Office : F. T. Webber.
 N. S. Edwards.
 E. Lloyd.

At School Clinic : Miss M. Adams.
 Miss D. Hunnings.
 Miss D. Allsop.

6. Home Visitor for the Blind.

Miss N. Westby.

7. Staff at Borough Sanatorium.

Matron : Miss F. Midgley.

(a) Nursing Staff : 10 Staff Nurses.
 3 Tuberculosis Staff Nurses.
 9 Probationers.

(b) Domestic Staff : 8 Wardmaids.
 3 Housemaids.
 1 Laundry Maid (non-
 resident).
 1 Cook.
 2 Kitchenmaids.

- (c) Male Staff : 1 Porter.
 (non-resident) : 1 Ambulance Chauffeur.
 1 Foreman Drain Tester and
 Disinfector.
 5 Drain Testers and
 Disinfectors.

(b) Part-Time.

1. Public Analyst : Leo Taylor, F.I.C.
2. Veterinary Inspectors : Dunlop Martin, M.R.C.V.S.
 H. D. Sparrow, M.R.C.V.S.
3. Ophthalmic Surgeon : D. D. Evans, M.B., B.Ch.,
 D.O.M.S.
4. On panel for operative treatment of Adenoids and
 Tonsils under School Medical Scheme :
 Sydney Bridger, M.R.C.S., L.R.C.P.
 Grosvenor Hinks, M.B., M.R.C.S., L.R.C.P.
 J. C. Smellie, M.B., M.R.C.S., L.R.C.P.
 Cleveland Smith, M.R.C.S., L.R.C.P.
5. Medical Officers of Infant Centres and Ante-natal
 Clinics :
 At Southend Centre :
 Ralph Norman, M.D. (Lond.)
 At Leigh and Southchurch Centres :
 Charlotte Shields, M.B. (Lond.)
6. Health Visitor—for duty at Infant Centres :
 Miss S.J. Hughes, Certificated Health Visitor.
7. Superintendent of Remedial Treatment Centre :
 Mrs. G. Scholefield, Member of Chartered
 Society of Massage and Medical Gymnas-
 tics.

**VII. LIST OF ADOPTIVE ACTS, BYELAWS,
 Etc., IN FORCE.**

The following adoptive Public Health Acts, Private Acts,
 Byelaws, etc., are in force within the Borough :—

ADOPTIVE ACTS.

1. Infectious Diseases (Prevention) Act, 1890.
2. Public Health Acts (Amendment) Act, 1890.

3. Public Health Acts Amendment Act, 1907 (since 9th February, 1914).

Part 2. Streets and Buildings. Section 17 and Sections 19-33 both inclusive.

Part 3. Sanitary Provisions. Sections 34, 35 (2), 35 (3), 36, 37, 38, 47, 49, 50 and 51.

Part 4. Infectious Diseases. Sections 53, 54, 57, 58, 59, 60, 62, 63, 64 and 65.

Part 5. Common Lodging Houses. Sections 69 to 75 both inclusive.

Part 7. Sections 78, 79, 81, 82, 83 and 84.

PRIVATE ACTS.

Southend-on-Sea Corporation Act, 1895, which contains clauses similar to those of the Public Health Acts Amendment Act, 1907.

Southend-on-Sea Corporation Act, 1909, dealing with the provision of Sewerage Works, Deep Sewers, etc.

Southend-on-Sea Corporation Act, 1913, enlarging the Borough by the inclusion of Leigh-on-Sea, and part of the Parish of Eastwood, and constituting the Borough a County Borough. This Act also contains certain sanitary provisions as to ice cream dealers, combined drainage, etc.

PUBLIC HEALTH BYELAWS.

For the prevention of Nuisances from Snow, Filth, Dust, Ashes and Rubbish, and for the prevention of keeping of animals on any premises so as to be injurious to health, revised in April, 1911.

As to Nuisances, made in 1867, under the Local Government Act, 1858, Clauses 4, 6, 13 and 14 only, dealing with offensive privies, water closets, cesspools, etc., and with deposits of refuse on waste or unoccupied ground.

As to Nuisances in connection with the removal of offensive or noxious matter, made April, 1897.

As to Common Lodging Houses, made January, 1905.

As to Tents, Vans, Sheds and similar structures, revised January, 1911.

As to Landing and Carting of Manure removed from Barges, etc., made April, 1890 (under the provisions of the Southend Local Board Act, 1875).

As to new Streets and Buildings, made August, 1881, added to in September, 1892, and in August, 1897.

As to Slaughterhouses, revised February, 1924.

As to Offensive Trades, made January, 1906, revised July, 1915.

REGULATIONS.

As to Dairies, Cowsheds and Milkshops, revised March, 1907.

As to Underground Rooms under Section 17 (7) of the Housing, etc., Act, 1909, made November, 1914.

VIII. SANITARY CIRCUMSTANCES.

Water Supply.

Apart from 10 outlying farm cottages which are dependent on shallow wells and the Coastguard cottages on the Shoebury-ness boundary which are supplied by the Shoebury-ness Urban District Council, the whole of the Borough is dependent for its water supply on the Southend Waterworks Company whose area of supply includes also the surrounding rural district. The Company was able to give a constant supply during the year; the average daily supply to the whole of their district was over 3¼ million gallons a day which on the assumption that the population supplied was 161,056 is equivalent to 20.35 gallons per head per day. The maximum consumption in any week was in that ending June 20th during which the daily consumption amounted to no less than 25.66 gallons per head.

The water is obtained from 24 deep wells and bore tubes sunk in the adjoining districts and is of the utmost chemical and bacteriological purity.

The Company are proceeding with the first section of the works sanctioned by their Act of 1924 for obtaining water from the River Chelmer and hope to be able to draw on this source during the summer season of 1927.

Drainage and Sewerage.

As is only to be expected in a rapidly growing town, extensive works of sewerage have been carried out during the year, new soil sewers in 1429 yards of new streets having been provided by the Corporation in addition to 1939 yards of storm water sewers while 3330 yards of soil sewer and 391 yards of storm water sewers have been provided by estate owners. The soil sewer along the Eastern Esplanade has been relaid while a 9 inch soil sewer has been provided in the Rochford Road. About 10 miles of storm water sewers have been laid in the Eastern and East Central areas from the east of Southend High Street to Hamstel Road on the North of the London Midland and Scottish railway line and to Southchurch Avenue on the south of the railway line. A new relief sewer is being laid along New Road Leigh to overcome difficulties experienced in Leigh Old Town in times of heavy rain fall. A new main surface water sewer has

been laid in the Leigh West area while a relief storm water sewer has been provided in Pavilion Drive Leigh. A storm water sewer is also being laid via the new road from Sutton Road to Hamstel Road

The new main sewer varying from 15 inches to 48 inches in diameter from the western boundary of the Borough to the sewage treatment works at Prittlewell has been completed with the exception of the outfall into the works but it will not be possible to bring this into use till the treatment works are either extended or modified in the manner proposed in the Bill now before Parliament and referred to below; as a result it will not be possible for the sewage from Hadleigh to be dealt with at the works for the present and the totally inadequate sewer in Fairfax Drive will continue to give trouble by becoming overcharged in times of storm.

The Coleman's Estate is rapidly being developed as a housing area and that portion north of the crest which lies between Fairfax Drive and the Eastwood Road is still unsewered. The subsoil is clay and the land is waterlogged during the wet months of the year with the result that in the autumn and winter the contents of the cesspools of the 120 or so houses when emptied on the gardens and adjoining land cause a serious nuisance; the occupiers of the houses merely make shallow channels to carry away the liquid from the immediate neighbourhood of their own houses with resulting pooling of the sewage, possibly in proximity to the gardens of their neighbours. It is very desirable that steps be at once taken to put in hand the work of sewerage this area so that the present unsatisfactory condition of affairs can be remedied as soon as the Treatment works can receive the additional quantity of sewage.

In addition to those on the Coleman's Estate, there are a number of cesspools in the outlying portion of St. Clement's ward in the neighbourhood of Picketts Road, Eastwood Lane, and Fleming Crescent totalling about 72 and about 35 in the outlying areas of the northern and eastern portions of the Borough in the vicinity of the Cemetery and at Bournes Green respectively.

The absence of a sewer to receive the drainage from the Southchurch National Schools requires particular mention as the cesspool provided overflows into a neighbouring ditch adjoining a public footpath and is frequently a source of nuisance.

The Corporation do not undertake the emptying of cesspools in the Borough except on payment and the charge made is so high in many instances that it is quite prohibitive.

Sewage Treatment Works.

The works at Prittlewell being as a result of the exceptional growth of the Borough now inadequate to cope with the sewage conveyed thereto, it has been necessary during the year to consider what steps should be taken either to enlarge the works or to modify the method of purification adopted so as to

allow a larger quantity of sewage to be dealt with than is now possible. The Corporation are promoting a Bill in Parliament with the object of obtaining release from the obligation imposed by the Southend Corporation Act, 1909, that the effluent discharged into the Estuary should be of such a high standard of purity as was then laid down. It is proposed to give up the bacterial treatment of the sewage and to rely on screening and on sedimentation only, the fluid freed from solids to an extent which will preclude any possibility of settlement on the foreshore being discharged by a new outfall at the eastern end of the Borough into deep water. The works at Leigh which deal with the sewage from that portion of Leigh which gravitates thereto continue in use but the work of extension referred to in last year's report is still in abeyance.

Closet Accommodation.

The water carriage system is in vogue in practically all the houses in the Borough, the only exception being in the case of some of the houses not connected with the public sewer; a considerable proportion of the houses provided with cesspools have water closets but where this is not the case pail closets are in use; there are no privies or privy middens in the Borough.

Refuse Collection.

The quantity of house and trade refuse which has to be collected and disposed of steadily increases each year as will be seen from the following table giving comparative figures for August in 1924 and 1925 respectively :—

	1924	1925
Average No. of men employed daily	86.5	91.9
Average No. of horses employed daily	24.5	25
Number of motor vehicles in use	5	7
Average No. of houses visited daily	3730	3939
Average No. of bins emptied daily	3803	4043
Average No. of loads of trade refuse removed daily	20.4	35.9
Average weight of refuse collected daily	82 tons	88 tons
	4 cwts.	16 cwts.

Of the total weight of refuse collected in August, 1925, viz. 2,145 tons, 42½ tons was of fish offal as compared with 20¼ tons in August, 1924; this is collected from about 30 shops in the Borough by special motor lorry between 4 a.m. and 8 a.m. and disposed of on a farm at Fambridge 3 miles distant, the farmer utilizing it as a fertilizer and paying 5/- per ton delivered on his farm.

A weekly collection of house refuse is made throughout the year, bi-weekly or even daily collections being made during the season from hotels and boarding houses, and in areas in which nuisance is otherwise found to be caused. Galvanized iron bins are invariably in use but it has not been found possible to require householders to provide bins of the regulation size and gauge stipulated by the Council pursuant to section 58 of the Corporation Act, 1913.

The work of refuse collection is undertaken by the Borough Surveyor's Department and is under the control of an Inspector; although complaints are from time to time received of failure to collect, the work is on the whole exceedingly well done. The use of electric vehicles has been found to be more economical than horse traction owing to the long distances which have to be traversed and the Borough Surveyor calculates that the cost per ton of the collection is 10s. 7d. by motor vehicle as compared with 17s. 10½d. by horse vehicles, the corresponding cost per mile being 2s. 11d. and 3s. 11d. respectively. Horse traction however has to be utilized in many areas of the Borough particularly in districts in which the un-made condition of the roads renders motor traction impossible and this to some extent accounts for the differences in cost of collection by the two methods respectively.

Refuse Disposal.

As recorded in previous reports, the Dust Destructor has for many years been inadequate to deal with all the refuse collected with the result that about half or even more has had to be tipped in an adjoining sandpit; this refuse tip caught fire and for many months continued to give off the offensive smell and smoke which is characteristic of burning refuse tips. For several years representations were made that refuse should be placed elsewhere than in the pit in order that the fire in the latter might be allowed to burn out but without avail; fortunately for the inhabitants in the vicinity, the site of the gravel pit is required for the new works proposed to be carried out in connection with the alterations of the sewage treatment works with the result that tipping in the pit has ceased, the fire has burnt out, and the excess refuse is now being placed on an adjoining site and covered over with clean earth so as to avoid the creation of a nuisance.

During the year the Ministry of Health sanctioned the proposal, first submitted to them in the autumn of 1922, to enlarge the Dust Destructor by the provision of 6 additional cells and at the end of the year the tenders obtained by the Council in connection with the work were before the Ministry of Health for sanction of their acceptance. The Destructor enlarged as proposed will probably suffice to deal with the refuse from the central and eastern portions of the Borough for a considerable number of years but the exceptional growth in the western area coupled with the great distance which refuse collected in that area has to be conveyed to the Destructor renders it advisable that an additional destructor be provided in the Leigh area within the immediate future as otherwise in a few years tipping will again have to be resorted to at the site of the present destructor.

Public Mortuary.

During the year the Health Committee of the Council has considered various sites for the erection of a new mortuary to

replace the present premises situate in the Water Tower of the London Road Depot and ultimately fixed upon a site in proximity to the Central Police Station the adoption of which site would enable inquests to be held in the adjoining courts. It would appear however that it is not possible to obtain vacant possession of the 3 houses which would necessarily have to be demolished and consequently once again the matter is for the moment in abeyance.

The unsuitability of the present Mortuary for the purpose is obvious and has been the subject of comment by jurymen at numerous inquests. The erection of a new mortuary has been under consideration for over 18 years and the present mortuary with its primitive arrangements and inadequate provision is a serious blot on the administration of the town.

House Boats in Leigh Creek.

The use for human habitation of houseboats moored in the Leigh Creek and consisting merely of wooden barges, motor launches or other craft with sheds erected on their decks continues and at the end of the year no fewer than 51 were thus occupied. The Byelaws made by the Port of London Sanitary Authority pursuant to section 9 of the Housing of the Working Classes Act, 1885, are of no utility in meeting the difficulty experienced in connection with these dwellings as, although they contain a requirement that each houseboat should be provided with a privy or pail closet and a sanitary refuse bin, there is no restriction on the method of disposal of the contents of these receptacles with the result that slopwater, excreta and refuse are being thrown into the estuary not only polluting the waters but fouling the foreshore. Licences to moor houseboats are obtained on payment from an agent acting for the owners of the foreshore, the Salvation Army, and a notice board in the vicinity urges persons desirous of mooring houseboats in the Creek to apply for permission so to do. By continuing to issue permits and to accept mooring fees the Salvation Army undoubtedly encourages the use of these most unsatisfactory dwellings. It is surprising that General Booth and his advisers do not realize that they are not acting in the public interests or in the real interests of the families who occupy the houseboats by permitting this blot on the sanitation and appearance of the area to continue in spite of protests from the Corporation backed up by the Port of London Sanitary Authority within whose jurisdiction the houseboats lie. Several of the former residents appear to have recognised the unsuitability of the structures as habitations and have forsaken them but unfortunately this is true of a minority only and generally the least unsatisfactory.

Nuisance from Oil Depots.

Very few complaints have been received during the year of any nuisance from this source although at times for a few hours and generally at night time there has been a slight return of the trouble. There is little doubt that it is preventable and these recurrences call for more strict supervision over the works

by the Orsett Rural District Council within whose area the depots are situate.

Complaints as to Nuisances.

Nine hundred and thirty four complaints were received during the year; twenty nine were referred to the Borough Surveyor's Department, as they related to non-removal of house refuse or smells from street gullies.

The complaints dealt with by this Department may be classified as follows :—

Smells from drains	...	...	...	...	76
Blocked drains	...	...	...	...	83
Refuse on land and back passages	...	...	...	...	64
Dirty houses, rooms etc	...	...	...	...	23
Damp houses, defective roofs, etc	...	...	...	...	37
Overcrowding in houses	...	...	...	...	8
Re water supply	...	...	...	...	12
Re van dwellers	...	...	...	...	5
Animals, poultry, etc., improperly kept	...	...	...	...	58
Overflowing of cesspools	...	...	...	...	11
Re rats and mice	...	...	...	...	29
Defective stoves, coppers, etc	...	...	...	...	63
Defective flushing cisterns	...	...	...	...	96
Ashbins	...	...	...	...	98
Shops Acts	...	...	...	...	13
Miscellaneous	...	...	...	...	229

Sanitary Inspection.

The Chief Sanitary Inspector has prepared the following tabular statement showing the work done by the Sanitary Inspectors during the year :—

Complaints received and attended to	...	...	...	905
Complaints referred to Highways Department	...	...	...	29
Nuisances detected without complaint	...	...	...	748
Nuisances abated on notice	...	...	...	940
Nuisances abated without notice	...	...	...	553
Preliminary notices served	...	...	...	911
Notices not complied with but being dealt with	...	...	...	70
Houses affected by notice	...	...	...	1,010
Houses inspected under Public Health Acts	...	...	...	2,281
Houses, number inspected under Housing & Town Planning Act	...	...	...	153
Statutory notices served	...	...	...	109
Visits of inspection made during the detection and abatement of nuisances	...	...	...	16,102
Notices served under Section 28, Housing Act 1919	...	...	...	62

Work done in connection with the Drainage of Premises.

Houses, drains tested :—

After infectious diseases	247
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By request on payment of fee	18
On complaint or alteration of drainage	186
Number of houses re-drained	...	...	22
Number of houses, drains repaired	...	...	225
Total length of drain tested with water	...	...	3,320 ft.
New inspection chambers built	...	...	93
New gullies fixed	...	...	125
New covers to inspection chambers provided	...	...	126
Inspection chambers rendered	...	...	98
Soil pipes tested and re-tested	...	...	286
New soil pipes provided	...	...	44
Vent pipes unblocked	...	...	59
New closet basins and traps fixed	...	...	144
New flushing cisterns provided	...	...	123
New lavatory basins provided	...	...	60
W.C.'s made open risers	...	...	30
New W.C.'s erected	...	...	51
New Baths provided	...	...	27

*Housing. The following defects were remedied and
Improvements carried out.*

Defective flushing cisterns repaired	...	...	85
W.C.'s floors paved	...	...	25
Blocked drains cleared on notice	...	...	259
New stoneware sinks provided	...	...	27
Defective guttering repaired, houses	...	...	119
Defected rainwater pipes repaired	„	...	107
Defective roofs repaired	„	...	161
Yards paved	...	...	29
Yard paving repaired	...	...	88
New floors to houses	...	...	27
Cement plinths to houses provided	...	...	35
Scullery floors cemented	...	...	19
Scullery floors repaired	...	...	32
Stoves repaired	...	...	110
Copper furnaces repaired	...	...	107
New sanitary ashbins provided	...	...	276
New gutters provided	...	...	32
Walls to houses rendered	...	...	7

With respect to Light and Ventilation.

New air bricks provided for ventilation under floors	...	...	107
Sash cords renewed	...	...	363

With respect to Dirty Houses.

Houses cleansed	...	...	16
Rooms cleansed	...	...	220
Ceilings cleansed	...	...	209
Dirty closet basins cleansed	...	...	66
W.C.'s cleansed	...	...	46
Rooms measured as to overcrowding	...	...	72
Overcrowding in rooms abated	...	...	15

In connection with the Water Supply the following work has been carried out.

Houses re-connected with Water Company's mains	8
Houses, water laid on from Company's mains ...	1

With respect to the Keeping of Animals.

Removal of animals improperly kept	42
Stables, yards paved	3
Stables, yard paving repaired	17
Pig Styes cleansed and lime-washed	15
Inspection of piggeries	173
Notices served <i>re</i> removal of manure under Section 49	7
Accumulations of manure removed and owners charged with costs	—

Schools.

Schools, sanitary conveniences, inspections ...	476
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Particulars as to enquiries with respect to Infectious Diseases.

Enquiries <i>re</i> infectious diseases	271
„ „ deaths from phthisis	41
„ „ smallpox contacts	46
„ „ plague contacts	3

Miscellaneous.

Cesspools, emptied and filled in	15
Cesspools, inspections	611
Marine Store dealers' premises, inspections ...	49
Visits to Gipsy vans	59
Common lodging houses, inspections	12
Offensive trades, premises, inspections	466
Butchers' premises, inspections	1,289
Fishmongers' premises, inspected	733
Fruiterer's premises inspected	581
Stables, inspections	825
Ice Cream vendors' premises, inspections ...	496
Public House urinals, inspections	908
Refreshment houses, inspections	502

Shops Act.

Shops Act infringements detected and cautions given	66
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Drain Testing.

As in former years, the drains of houses have been tested as a result of notification of infectious diseases thereat, with the

following results :—

Disease.	No. of houses in which no defects were found.	No. of houses in which slight defects were found.	No. of houses in which serious defects were found.
Scarlet Fever ...	103	21	13
Diphtheria ...	35	11	2
Typhoid Fever ...	9	13	4
Erysipelas ...	29	2	—
Puerperal Fever ...	5	—	—
Smallpox ...	—	—	—
	181	47	19

Disinfection of houses.

Disease.	No. of houses disinfected.	No. of rooms disinfected.
Phthisis deaths ...	101	184
Phthisis removals ...	213	233
Scarlet Fever ...	161	211
Diphtheria ...	68	102
Typhoid Fever ...	38	63
Puerperal Fever ...	5	6
Cancer ...	109	123
Measles ...	15	31
Erysipelas ...	3	3
Verminous houses ...	61	110
Other causes ...	93	98

Disinfecting Station.

This is situate at the Borough Sanatorium and comprises one medium-sized Washington-Lyons Machine. During the year 63,723 articles were subjected to disinfection at the Station.

Common Lodging Houses.

There is only one registered common lodging house in the Borough; 12 inspections were made during the year and the By-laws are well observed. There is also another lodging house which the owner denies comes within the definition; it is however subject to regular inspection to ensure its being kept in compliance with the Byelaws.

Offensive Trades.

There are four bone dealers premises at which rabbit skins are also stored and one premises used solely for storage of rabbit skins. There are also on the Coleman's Estate premises used by a bone and fat boiler; there being no sewer available in the area these premises drain into cesspools which are frequently the source of nuisance; apart from this, the premises are well conducted and suitable apparatus is installed for avoiding effluvium.

Fish Friers.

There are 30 fish-frying premises on the register and these are all subject to routine inspection. With 2 or 3 exceptions the apparatus is of modern design and as far as possible effluvium is prevented.

Underground Rooms.

There are some 150 houses in the Borough with rooms which come within the definition of underground rooms and of these 33 do not comply with the Regulations as to their use as sleeping rooms. Constant observation is kept to ensure that these rooms are not used for sleeping purposes but during the height of the season it is frequently found that they are brought into use for a few weeks at a time. Many of these rooms could not be so altered as to make them comply with the Regulations.

Factory and Workshops Act, 1901.

I. INSPECTION OF FACTORIES, WORKSHOPS & WORKPLACES.

	Inspections	No. of written notices	Prosecutions
Factories (including Factory Laundries)	419	15	—
Workshops (including Workshop Laundries)	569	7	—
Workplaces other than Outworkers' premises included in Part III. of this Report	1,216	34	—
Total	2,204	56	—

II. DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Nuisances under the Public Health Acts :—

	Found	Remedied	No. of Defects referred to H.M. Inspector	No. of Prosecutions
Want of Cleanliness	28	28	—	—
Want of Ventilation	—	—	—	—

Sanitary Accommodation—

Insufficient	5	3	—	—
Unsuitable or defective ...	6	6	—	—
Not separated for sexes ...	3	3	—	—
Other Offences under the Factory & Workshops Act ...	—	—	—	—
	—	—	—	—
	42	40	—	—
	—	—	—	—

III. HOME WORK.

Lists received from employers.

Dealing with the making of Wearing Apparel.

Sending twice in the year ... ..	...	...	lists	2
Number of Workmen outworkers...	...	...		1
Sending once in the year .. ...	...	...	lists	3
Number of Workmen outworkers...	...	...		3

Dealing with Furniture and Upholstering.

Sending once in the year ... ..	...	...	lists	1
Number of Workmen outworkers...	...	...		1

Address of Outworkers :—

Addresses of Outworkers received from other Councils ... ..	...	...	...	26
Number of Workmen outworkers ... ..	...	...	...	13
Addresses of Outworkers forwarded to other Councils ... ..	...	...	...	—
Outwork in infected premises, instances				
Orders made (Section 110). ... ..	...	...	...	—
Outwork in unwholesome premises, instances				—
Prosecutions ... ..	...	...	...	—
Inspections of Outworkers' premises ... ..	...	...	...	87

IV. REGISTERED WORKSHOPS ON THE REGISTER AT THE END OF THE YEAR.

Workshop Bakehouses ... ..	...	...	...	21
Workshop Laundries ... ..	...	...	...	1
Cabinet Making Workshops ... ..	...	...	...	18
Dressmaking Workshops ... ..	...	...	...	35
Boot Repairing Workshops ... ..	...	...	...	43
Tailoring Workshops ... ..	...	...	...	27
Cockle Boiling Workshops ... ..	...	...	...	13
Miscellaneous ... ..	...	...	...	160
				—
Total number of Workshops on Register ... ..	...	...	...	318
				—

V. OTHER MATTERS.

Matters referred to H.M. Inspector of Factories ... ..	...	...	...	—
Failing to affix abstract ... ..	...	...	...	—

Action taken in matters referred by H.M. Inspector of Factories remediable under the Public Health Acts, but not under the Factory and Workshops Acts (Section 5).	
Notified by H.M. Inspector	6
Reports of action taken sent to H.M. Inspector	4
Underground Bakehouses (Section 101).	
In use at the end of the year	3
Certificates granted during the year	—

VI. BAKEHOUSES.

Bakehouses on Register, December 31st, 1925	54
New Bakehouses erected	1
Notices served on occupiers	4
Bakehouses, inspections	349

Bakehouses.

There are only 3 underground bakehouses in the Borough of which one has not been in use for some years; the other two are fairly satisfactory having regard to their position but it would be preferable if they ceased to be used for this purpose.

Plans for all new bakehouses are submitted to the Health Department before approval by the Buildings Committee and every effort is made to secure that they comply with modern requirements as regards lighting, ventilation, structure of floors and walls, &c.; for some years past all new bakehouses have been provided with ablution facilities for the employees in view of the possible dangers which might otherwise result should any of them be carriers of Paratyphoid Fever or other infection.

Outworkers.

There are relatively few outworkers in the Borough and the majority work in private houses being engaged in art needle-work, tie making, &c.

IX. HOUSING.

1. General Housing conditions in the area.

While the housing conditions of the working classes have greatly improved during the last five years, the position is still far from ideal. A great number of houses are being erected each year but relatively few are intended to be let to persons of the working classes. Some clerical workers and skilled artisans have been able to purchase their own houses and as a result the housing conditions of this class are distinctly better than formerly, but the position of the unskilled labourer and the casual worker is little altered and their plight is often most difficult, particularly if they have large families. The erection of houses by the Town Council on their housing estate has to some extent eased the situation, but the relief has been

largely counter-balanced by the entry of new families into the town.

The following table shows the number and type of houses erected by the Corporation and completed in each year :—

Erected pre-war		Type	Under Government Scheme		Under Council's Scheme					
Year	Pres'nt rental*		Year	Pres'nt rental*	Year				Pres'nt rental*	
1902			1920	1921		1922	1923	1924	1925	
—	—	Parlour & 4 Bedrms.	2	—	24/9	—	—	—	—	—
20	12/8	.. .. 3 ..	17	10	25/5	—	23	22	28	23/10
—	—	Non 3 ..	4	10	20/2	20	51	36	47	22/-
20	11/1	.. .. 2 ..	—	—	—	9	19	4	10	19/10
Total 40			25	20		29	95	62	85	

In addition the Corporation have erected at Leigh-on-Sea 4 non-parlour flats with 3 bedrooms, let at a rental of 19/3; and 12 non-parlour flats with 2 bedrooms, let at a rental of 18/-

* The rentals shown are inclusive of General District Rate, Poor Rate, and Water Rate.

It is understood that the Corporation intend to complete their Sutton Road Housing Scheme during the ensuing year by the provision of 85 additional houses, making a grand total of 437 on that site.

2. Overcrowding.

Cases of overcrowding in the legal sense not infrequently come under notice and are extremely difficult to deal with; the tenants are urged to secure more adequate accommodation and particulars of suitable cases are brought to the notice of the Properties Committee of the Council which supervises the letting of the Council Houses. In the majority of instances the only action possible is the giving of advice as to the most advantageous use of the rooms available and, in the cases of sub-tenants, the urging of the tenant to give the latter the use of an additional room or so.

In the majority of instances the families concerned comprise several young children and the proportion of landlords who will not "allow" children appears to be increasing, as there is no doubt that parents with large families are finding it more and more difficult to secure suitable accommodation. As a result, parents often have to secure the tenancy of a house or of rooms by stratagem, being accompanied on taking

the house by one or two of their children only, the others making their appearance a few days later, when the parents imagine their tenure secure.

Serious as may be the individual instances in which houses and rooms are overcrowded as a result of occupation by too many persons, having regard to the air-space available, the main evils which result from the shortage of house accommodation follow from the herding together of several families in a house built for occupation by one family. Tenants faced with high rentals sub-let some of their rooms to one or more families without any provision being made for the extra families in the way of additional W.C., washing, or cooking accommodation.

Some houses are being purchased with the object of conversion into tenement houses and after very minor, totally inadequate and often very badly carried out alterations, are farmed out to 4, 5, or even 6 families, each of whom is made to pay an extortionate rental. Many of the occupiers of such tenements are parents with large families, because it is families of this character who are unable to obtain other accommodation, and gladly submit to conditions, however inconvenient, so long as they can get a room or two in which to live.

A gas stove fitted with a slot meter may be provided on the landing and each family may have to use this in turn for cooking, with the result that it is in use the greater part of the day; the atmosphere resulting from the lack of ventilation and the smell of the cooking which pervades the house may readily be imagined. Too often, however, the only means of cooking available is the ordinary open fireplace of a room built for use as a bedroom. The sharing of a W.C. or the use of a bathroom as a scullery by 3 or 4 families, the absence of any proper facilities for washing, the lack of privacy, &c., all tend to deprive the families of the decencies and comforts of ordinary home life.

There is considerable need therefore for the adoption of Byelaws relating to houses let in tenements as these would enable the Council to insist upon the provision for the use of the separate families of adequate facilities for cooking, washing, and by way of sanitary conveniences. Such byelaws if enforced with discretion would inflict no hardship upon the needy tenant or sub-tenant but could be used effectually to limit the activities of the unprincipled property owner who as a recent experience has shewn is trading on the housing shortage and purchasing houses to let in tenements with the sole object of exacting most extortionate rentals for accommodation lacking in most essentials. Property owners are not alone the culprits, their activities in this direction being often surpassed by tenants who sub-let rooms regardless of the lack of cooking, washing, and sanitary conveniences. The inconveniences resulting from life under such conditions lead to constant bickering between the several

families and a not inconsiderable proportion of the time of the Sanitary Inspectors is spent in trying to adjust matters between squabbling families. The following case is typical of the conditions met with :—

The tenant of a 5 roomed house let 2 rooms and a scullery on the ground floor to a family consisting of parents and 5 children whose ages ranged from 13 months to 14 years. The tenant then vacated the premises leaving the sub-tenants in possession but the owner refused to accept the latter as tenants and let the upper rooms to another family consisting of a husband, wife, and husband's brother. After a time unpleasantness arose between the 2 families; the scullery was taken away from the ground floor tenants, the W.C. apartment and the water supply were locked up and access allowed thereto only at stated times; the upstairs tenant erected a wooden partition from floor to ceiling at foot of his staircase and in the living room of the ground floor tenant; thus not only reducing the floor space of the living room but also leading to the only means of egress to the W.C. apartment and water supply being through the window of the living room.

The following instances of overcrowding may be cited as typical :—

1. A family consisting of the parents and 5 children aged from 11 years to 4 years, rented for 10/- per week 2 small rooms each less than 950 cubic feet in area, one being used for living and sleeping, and the other as a sleeping apartment only. The mother was expectant.

2. A family consisting of the parents and 5 children aged from 11 years to 6 months rented for 10/- per week two small rooms of 900 cubic feet and 600 cubic feet capacity, the former room being used for living and sleeping and the latter for sleeping only.

3. A family consisting of the parents and four sons aged from 8 to 20 respectively occupied 2 rooms; the larger room which was less than 950 cubic feet in capacity was used as a living room by day and occupied by night by the parents and the youngest son; the other which had a capacity of less than 600 cubic feet was occupied as a sleeping apartment by the 3 elder sons. The mother suffered from chronic Pulmonary Tuberculosis.

4. A house of 8 rooms was let to 5 families comprising 10 adults and 11 children. There were 2 W.C's and 2 sinks but only one cooking range.

5. A family consisting of the parents and 5 children aged from 8 years to 6 months live and sleep in one room of cubic capacity 1,053 cubic feet, the mother being again pregnant. Efforts to obtain other accommodation are fruitless owing to the number of children and the father is unable to pay the rental of one of the Corporation houses.

6. A back room of 880 cubic feet was let to a man, wife and 5 children at a rental of 5/- weekly while 2 small back rooms one leading from the other were let to a man, wife and 4 children under 14 years at 7/6 weekly.

7. A man, wife and 6 children live in one small room of under 1,000 cubic feet; the three eldest girls now sleep out at a cost of 10/- weekly while the parents and the 3 other children sleep in the living room.

8. A man, wife, son aged 14 and daughter aged 11 live and sleep in one room for which they pay a rental of 15/- per week. The room is 1,700 cubic feet in capacity so is not legally overcrowded but from the standpoint of morality the arrangement is obviously deplorable.

3. Fitness of Houses.

(a) The general standard of housing is high, much of the property being of recent erection. There are a few back-to-back houses and in the older parts of Leigh and Southend there are some very ancient and inconvenient houses which will in the course of a few years become unfit for habitation but as a result of frequent minor repairs cannot justifiably be regarded as coming within that category at present.

(b) The defects ordinarily detected during housing inspections are defects to roofs, yard paving, gullies, and defective coppers, stoves, sash cords, flushing cisterns, &c. A large number of the notices served refer to the cleansing of rooms.

(c) The defects found are mainly due to wear and tear. Defects of yard paving and of floors of scullery, and want of cleanliness of walls and ceilings of rooms are in some cases due to dirty or neglectful tenants. The increased rentals now paid have led to a reluctance on the part of the tenant to carry out any repairs however trivial while the action of the Rent Restriction Acts has resulted in landlords shewing a similar disinclination in the case of houses subject to these Acts. In many instances the landlords or their agents if in dispute with the tenants as to necessity for repairs refer the question to the Sanitary Inspectors and accept their decision as to what is fair and reasonable.

4. Unhealthy areas.

No complaints have been received or representations made as to unhealthy areas in the Borough and no districts in the Borough come within this category.

5. Byelaws.

The revision of the byelaws relating to new buildings has engaged the attention of the Buildings Committee for many years and their proposals are about to be submitted to the Ministry for their approval.

The need for the making of byelaws as to houses let in lodgings has already been pointed out in a former paragraph.

The byelaws relating to tents, vans, sheds, &c., were revised in 1911 and are effective in dealing with the nuisances associated with such structures.

HOUSING STATISTICS.

Number of new houses erected during the year :—

(a) Total (including numbers given separately under (b))	1174
(b) With State assistance under the Housing Acts :—	
(i) By the Local Authority	85
(ii) By other bodies or persons	Nil.

1. Unfit dwelling-houses.

Inspection :—

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	2434
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	153
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	1
(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 ...	784

2. Remedy of Defects without service of Formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers ...	621
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3. Action under Statutory Powers.

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

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	62
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(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners	47
(b) By Local Authority in default of owners	Nil.
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	Nil.
<i>B. Proceedings under Public Health Acts.</i>	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	102
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners	71
(b) By Local Authority in default of owners	Nil.
<i>C. Proceedings under Sections 11, 14, and 15 of the Housing Act, 1925.</i>	
(1) Number of representations made with a view to the making of Closing Orders	1
(2) Number of dwelling-houses in respect of which Closing Orders were made	1
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made ...	1
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	—

X. INSPECTION AND SUPERVISION OF FOOD.

A. The Milk Supply.

There are only 8 cowkeepers in the Borough and the total number of cows in milk at any one time rarely exceeds 56. The greater quantity of the milk sold in the Borough is produced at farms in the surrounding rural districts; in the summer season particularly, the supply is augmented by churns from the mid-

lands, and the S.W. of England, accommodation milk being obtained from London wholesale dealers. The retail supply is largely in the hands of 4 or 5 large firms two of whom have during the year provided new premises on modern lines with dairy plant of the latest design; it is understood that 3 of the firms are about to retail all milk in bottles filled by machinery at the central dairies, and to give up the unhygienic hand can; this will be to the undoubted advantage of the customer who will then be far more likely to obtain adequate measure and genuine milk of greater cleanliness than under the present plan when he is largely at the mercy of the roundsman.

No action has yet been taken to provide for the routine veterinary inspection of cows in the cowsheds in the Borough.

Dairies, Cowsheds and Milkshops Order.

The following table shews the number of premises, of inspections and of notices served during the year:—

	Number of Premises.	Number of Inspections.	Number of Notices Served.
Cowsheds ...	8	129	1
Dairies ...	46	438	1
Milkshops ...	160	517	—

Two applications for registration as retailers of milk were refused and one registration was revoked pursuant to Section 2 of the Milk and Dairies (Amendment) Act 1922, the reason in each case being the lack of provision of facilities for cleaning the utensils as required by the Regulations made by the Council pursuant to the Dairies, Cowsheds and Milkshops Order. Every effort is made to dissuade the proprietors of small general shops from applying for registration as purveyors of milk. Proprietors of milk shops are required to have suitable counterpanes with metal lids and the frequent visits of inspection have resulted in considerable improvement in the conditions under which milk is retailed.

The Milk (Special Designations) Order, 1923.

Licences have been issued by the Council pursuant to this Order as follows:—

	No. of premises licensed.
To bottle and distribute Grade A Milk ...	2
To distribute Grade A Milk, bottled in the Borough—3; bottled elsewhere 17, total	20
To bottle and distribute Grade A (Tuberculin tested) Milk ...	1
To distribute Grade A (Tuberculin tested) Milk, bottled in the Borough ...	3
To distribute Certified Milk ...	4

Although several of the dairymen pasteurize most of the milk they retail, particularly in the summer time, no application to sell Pasteurized Milk has been received.

No applications to bottle or distribute graded milks have been refused by the Council.

Samples of graded milks (other than Certified Milk) from each of the 4 licensed bottlers whose milk is sold in the Borough have been submitted to bacterioscopic analysis with the following results :—

Date of sample	No of Bacteria per c.c.	Bacillus Coli.	Remarks.
Firm A.			
13/5/25	173,950	Absent in 0.01 c.c. ...	Conforms to standard.
8/7/25	10,166	Absent in 0.01 c.c. ...	Conforms to standard.
29/9/25	36,250	Absent in 0.01 c.c. ...	Conforms to standard.
25/11/25	18,150	Present in 0.01 c.c. ...	Fails to conform to standard.
Firm B.			
13/5/25	40,267	Present in 0.01 c.c. ...	Fails to conform to standard.
8/7/25	19,800	Present in 0.01 c.c. ...	Fails to conform to standard.
29/9/25	12,750	Absent in 0.1 c.c. ...	Very good sample of Grade A Milk.
25/11/25	2,600	Absent in 1.0 c.c. ...	Excellent sample of Grade A Milk.
Firm C.			
13/5/25	70,700	Absent in 0.01 c.c. ...	Conforms to standard.
8/7/25	18,150	Present in 0.01 c.c. ...	Fails to conform to standard.
29/9/25	44,000	Absent in 0.01 c.c. ...	Conforms to standard.
25/11/25	6,200	Present in 0.01 c.c. ...	Sample contains only a few bacteria but the Bacillus Coli is present in 0.01 c.c. and therefore fails to conform to standard.
Firm D.			
25/11/25	3,850	Absent in 1.0 c.c. ...	Excellent sample of Grade A Milk.

Standard laid down under the Regulations "Not more than 200,000 bacteria per c.c. and no coliform bacillus in 0.01 c.c."

As will be seen the number of bacteria per c.c. in each sample was well below the standard laid down under the Regulations although on 4 occasions the presence of Bacillus Coli in 0.01 c.c. made the sample fail to conform to the standard. The bottler and the M.O.H. of the area in which the milk was produced were informed of the results of the analysis of the unsatisfactory samples and elaborate enquiry followed as to the cause of the presence of the B. Coli in excess.

Public Health (Condensed Milk) Regulations, 1923.

The number of samples taken under these Regulations was as follows:—

Condensed	{	Machine-skimmed	
		(sweetened)	3 formal, 3 informal.
		Full-cream (sweetened)	2 formal 3 informal.
		Full-cream (unsweetened)	1 formal, 1 informal.

All the samples were reported as genuine and as complying with the Regulations.

Milk and Cream Regulations.

The report required by the Local Government Board's Circular of 27th October, 1913, as to the administration of the Regulations is as follows:—

1. Milk and Cream not sold as preserved cream.

	(a) Number of Samples examined for the presence of a preservative.	(b) Number in which preservatives was reported to be present, and percentage of preservative found in each sample.
Milk	151	—
Cream	3	2
Sample No. 1334 ...	.19%	Boric Acid ... Fined £2 10s. 0d.
Sample No. 1335 ...	.26%	Boric Acid ... Fined £2 10s. 0d.

2. Cream sold as preserved cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct:—

1. Correct statements made	...	...	...	1
2. Statements incorrect	...	...	...	—
			Total	1

3. Percentage of preservative found in each sample .34%
Percentage stated on Statutory label4%

(b) Determinations made of milk fat in cream sold as preserved cream:—

1. Above 35 per cent	...	...	...	1
2. Below 35 per cent	...	...	...	—
			Total	1

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V. (1) and the proviso in Article V. (2) of the Regulations have not been observed:—

Nil.

(d) Particulars of each case in which the Regulations have not been complied with, and action taken:—

Nil.

3. Thickening substances. Any evidence of their addition to cream or preserved cream. Action taken where found :—
Nil.
4. Observations, if any.—None.

B. Meat.

Slaughterhouses.

There is no public abattoir in the Borough but there are 8 private slaughterhouses, 2 of which are subject to annual licence; very little killing is carried out in one of the licensed slaughterhouses but the remaining 7 slaughterhouses are fairly extensively used.

The slaughterhouses are in general maintained in a satisfactory condition of cleanliness. They are situated in various parts of the Borough and hence are difficult to keep under continuous observation. Owing to the altered conditions in the neighbourhood of the slaughterhouses the latter with one exception are now in populous areas of the Borough and it would be desirable from many points of view that their use should be discontinued and a public abattoir erected in some suitable position.

Slaughterhouses.

	In 1920.	In Jan. 1925.	In Dec. 1925.
Registered	6	6	6
Licensed	3	2	2

The Byelaws relating to slaughterhouses are on the whole well observed including that requiring the use of a mechanically operated appliance for stunning prior to slaughter. The humane killer adopted at all the slaughterhouses is the Cash captive bolt instrument which is safe and ordinarily effective but on occasions the pistol misfires apparently as the result of the bolt becoming bent or distorted in some way.

The need for proper facilities for the washing of the hands of the Inspectors, slaughtermen, &c., and for sterilizing of knives and cloths used in the course of meat inspection should receive attention when the byelaws relating to slaughterhouses are again the subject of consideration.

Butchers' Shops.

The Inspectors devote considerable attention to the business premises of butchers and to securing due observance of the requirements of the Public Health (Meat) Regulations as to precautions to prevent contamination of the meat. Many of the butchers have now installed glazed shop fronts, and in only a few instances have no alterations been made to meet the Regulations. The former practice of exposing meat on the forecourts of the butchers shops is almost completely discontinued.

There are no meat stalls apart from those forming part of the butchers shops and the width of the street pavements is

ordinarily sufficient to prevent the splashing with mud of the meat exhibited in the shops.

Imported meat appears to form the greater part of the trade of the majority of local butchers though some do a fair trade also in London killed and a few in locally killed meat. The necessity of labelling Imported Meat is constantly being impressed on the traders.

The Inspectors devote particular attention to the provision of suitable storage for the meat, to proper arrangements being available for the frequent removal of bones, trade refuse, &c., to the inspection of brine and pickling tubs when such are provided and to the maintaining of the premises in a condition of cleanliness.

Many of the butchers make sausages on their premises and when this is the case the process is subject to very close supervision.

Meat Inspection.

In addition to the Chief Sanitary Inspector four of the Assistant Inspectors hold the Certificate of the Royal Sanitary Institute as Inspectors of Meat and Other Foods; they carry out the inspection of meat in the 8 private slaughterhouses in the Borough and also in the butchers shops. The requirements of the Public Health (Meat) Regulations as to the giving of notices of intended slaughter are on the whole well complied with; butchers have been furnished with cards on which to give notice and the total number of notices received since the Regulations came into force on 1st April last was 992, intimating the intended slaughter of 453 beasts, 3236 sheep, 436 calves and 1652 pigs. From 1st April to the end of the year the Inspectors examined at the various slaughterhouses the carcasses of 439 beasts, 3057 sheep, 432 calves, and 1614 pigs.

The work of inspection at the slaughterhouses has involved much labour on the part of the Inspectors who on occasions have had to visit slaughterhouses on Sundays, on public holidays, at night time, etc; the increase in the work since the Regulations came into force is shewn by the experience of Inspector Lott who during the first three months of the year had charge of 3 of the slaughterhouses, made 50 visits thereto and examined the carcasses of 34 beasts, 17 calves, 149 sheep and lambs and 256 pigs; during the last 9 months of the year he has had charge of 2 of the three slaughterhouses only, paid 430 visits thereto and examined the carcasses of 172 beasts, 290 calves, 1580 sheep and lambs, and 627 pigs.

The Inspectors have also devoted considerable attention to the examination of meat exposed for sale in butchers' shops particularly carcasses of pigs and calves brought into the Borough from adjoining rural areas. During the early part of the year, these carcasses rarely showed any evidence of having been inspected but in the later months of the year there was some

improvement, a few of the carcasses having obviously been examined but in no case was any carcass found to bear a stamp apart of course from imported Dutch or Belgian produce.

The Inspectors all agree that the number of carcasses found to be diseased or unfit for food is very materially less than it was in former years in spite of the fact that a much greater number of carcasses have been examined during the year; one inspector reports that of 3080 carcasses of pigs, in most cases with offal, examined by him, only 14 were found to be affected in any degree by Tuberculosis which is a great improvement on our experience in former years. It may be that with the knowledge that all carcasses of animals killed in the Borough slaughterhouses are now inspected as to fitness for food, greater care is taken to avoid purchasing for slaughter animals of doubtful quality in view of the practically certain seizure of the carcass failing voluntary surrender should it be diseased.

Meat marking.

Four of the Inspectors have been authorized by the Ministry of Health to mark, pursuant to the Meat Regulations, carcasses inspected by them in the local slaughterhouses. All the local butchers, however, have not availed themselves of the opportunity of having the carcasses stamped by the Inspectors as evidence of their having been examined and passed as sound by them as only 12 out of the 30 butchers for whom animals are slaughtered in the local slaughterhouses consent to have the carcasses stamped. The reasons advanced by the others for refusal vary; some argue that the public confuse the stamp with that on imported or koshered meat; others explain their refusal on the ground that the public will not buy the portion of meat on which the stamp has been imprinted and they object to having to remove the mark before sale to the public; while one butcher urges that although at present the Corporation make no charge for stamping meat there is nothing to debar them in the future from altering their procedure in this respect and that it is not desirable to accustom the public to meat-marking in case hereafter it may be to the butcher's advantage to discontinue the practice.

C. Other Food Stuffs.

The premises of fishmongers, fruiterers and greengrocers have been visited systematically and steps taken where necessary to secure that the yards, stables, &c., are maintained in a cleanly condition. The Corporation arrange for the removal of trade refuse on payment of a small charge.

Restaurants, Dining Rooms, &c., are also subject to continuous inspection during the summer months and the conditions &c., have much improved of recent years, many of the restaurant kitchens having been modernized and improved food storage and scullery facilities provided.

The bakehouses are satisfactorily maintained; many are of modern erection and for some years past the Council has required the provision in connection with all new bakehouses of suitable facilities for ablution for the employees, and provision of towel, soap, &c.

There are 30 fishfrying establishments in the Borough; with two exceptions the ranges are of modern construction and in accordance with the special requirements of the Health Committee; it is customary to require that the gutting and cleaning of the fish shall be in an apartment separate from that in which the fish and potatoes are fried. The premises and fish are frequently inspected and very little nuisance arises except in the case of the older premises the fish-frying apparatus in which requires modernizing.

The cockle-boiling sheds at Leigh-on-Sea and in the Eastern area of the Borough are kept under constant supervision to ensure that the apparatus for sterilization by steam is in good order and that the premises are kept clean. Greater care seems now to be taken in the sterilization of the shellfish.

In spite of frequent warnings, mussels at times continue to be gathered from the Ray and the foreshore of Canvey Island and sold for human consumption without being relaid as required by the Order made by the Port of London Sanitary Authority under the Public Health Shellfish Regulations; the usual practice is to mix the mussels thus gathered with South Dutch mussels, cook the mixed mussels and send them in bags with the original "South Dutch" label to markets in the vicinity. The names of the offenders are known and have been communicated to the Port of London Sanitary Authority but apparently owing to the method adopted difficulties arise in securing evidence to justify a prosecution.

Unsound Food.

The following table shows the quantity of unsound food of various kinds which was surrendered during the year:—

Carcases	Pigs'	...	Tuberculosis	...	14	
	Calves	...	Tuberculosis	...	3	
	Heifers	...	Tuberculosis	...	2	
	Cow's	...	Septicæmia	...	1	
	Sheep	...	Peritonitis	...	1	
			Uraemia	...	1	Total carcases 22
Joints.	Beef	...	Bone-taint	...	519½ lbs.	
		...	Bruised	...	492 lbs.	
		...	Tuberculosis	...	69 lbs.	
		...	Fracture	...	48 lbs.	Total 1128½ lbs.
	Veal	...	Decomposing	...	60 lbs.	
		...	Fracture	...	7 lbs.	Total 67 lbs.
Pork	...	Sour and Decomposing	61 lbs.		Total 61 lbs.	
Heads	Pigs'	...	Tuberculosis	...	21	
	Ox	...	Tuberculosis	...	1	Total heads 22

Plucks	Calves	...	Decomposing	...	41		
		Pigs	...	Cirrhosis	...	14	
				...	Abscesses	...	1	Total plucks 56
Livers	Ox	...	Decomposing	...	23		
			...	Flukes	...	16	
			...	Tuberculosis	...	5	
			...	Fatty Infiltration	...	3	
			...	Cirrhosis	...	3	
			...	Cavernous Angeioma	...	2	
	Pigs	...	Cirrhosis	...	33		
	Sheep	...	Strongylus Rufescens	...	5	Total livers 90	
Lungs	Ox	...	Tuberculosis	...	9		
			...	Pneumonia	...	3	
			...	Abscess	...	1	
	Pigs	...	Pneumonia	...	2	Total lungs 15	
Tongue	Ox	...	Actinomycosis	...	1	Total tongues 1	
Fish		...	Prawns	...	48 gallons	decomposing	
		...	Cod Roe	...	14 stone	"	
		...	Whiting	...	5 stone	"	
		...	Haddocks	...	5 stone	"	
		...	Mackerel	...	2 boxes	"	
		...	Skate	...	1 box	"	
		...	Megrims	...	1 box	"	
		...	Crabs	...	1 barrel	"	
		...	Whelks	...	5 bags	"	
		...	Escallops	...	15 doz.	"	
	...	Crabs	...	1 basket	"		
Miscellaneous		...	Milk	...	83 gallons	sour	
		...	Potatoes	...	21 cwts.	decomposing	
		...	Pears	...	50 boxes	"	
		...	Onions	...	14 cases	"	
		...	Tomatoes	...	6 boxes	"	
		...	Frozen Eggs	...	1 tin	"	
		...	Imported Eggs	...	2 doz.	"	
		...	Suet	...	32 lbs.	"	
Tinned Food		...	Milk	...	592 tins	Blown	
		...	Spinach	...	230 tins	"	
		...	Soup	...	40 tins	"	
		...	Salmon	...	31 tins	"	
		...	Slids in Oil	...	26 tins	"	
		...	Corned Beef	...	6 tins	"	
		...	Tongue	...	1 tin	"	
		...	Herrings	...	1 tin	"	

The only seizure of food during the year was that of a pigs' carcase which with 19 others was brought to the premises of a butcher in the Borough from a slaughterhouse in a rural district in the centre of the County and which was found to be badly infected with Tuberculosis. The owner stated in explanation that he had endeavoured to get the carcasses of animals killed

in his slaughterhouse inspected by the officer of the local sanitary authority but without success. The facts were communicated to the local sanitary authority concerned who it is understood were indignant that the Corporation should expect them to have an examination made of carcasses which though slaughtered in their district were intended for food elsewhere. No proceedings were taken against the owner of the carcase in question on his promising to invite the Corporation's Officers to inspect any other carcasses he brought into the Borough for sale to butchers.

The local traders are alive to the danger of having diseased or unsound food on their premises and readily call the attention of the Inspectors to food which in their opinion is suspect.

Food and Drugs Act.

The following table shows the number of samples taken during the year for analysis by the Public Analyst :—

Article.	Sample	Genuine	Adulterated	Total	Combined Total
Milk	Formal	135	10	145	
	Informal	5	—	5	150
Skimmed Milk	Formal	1	—	1	1
Condensed Milk					
Full Cream (Sweetened)	Formal	2	—	2	
	Informal	3	—	3	5
Full Cream					
(Unsweetened)	Formal	1	—	1	
	Informal	1	—	1	2
Machine Skimmed					
(Sweetened)	Formal	3	—	3	
	Informal	3	—	3	6
Cream	Formal	1	2	3	3
Preserved Cream	Formal	1	—	1	1
Sponge Cakes	Formal	2	—	2	
	Informal	32	2	34	36
Beef Sausages	Formal	25	2	27	
	Informal	2	—	2	29
Pork Sausages	Formal	14	—	14	14
Demerera Sugar	Informal	12	—	12	12
Butter	Formal	11	—	11	11

Pepper	Informal	10	—	10	10
Margarine	Formal	7	1	8	8
American Apples	Informal	2	3	5	5
Jonathon Apples	Informal	3	2	5	5
Luncheon Sausage	Formal	3	2	5	5
Mustard	Informal	3	1	4	4
Shredded Suet	Informal	1	3	4	4
Camphorated Oil	Formal	2	—	2	
	Informal	—	1	1	3
Whisky	Formal	3	—	3	3
Egg Substitute	Informal	2	—	2	2
Liquid Egg	Informal	—	2	2	2
Almond Essence	Informal	1	—	1	1
Baking Powder	Informal	1	—	1	1
Beef Sausage Meat	Formal	1	—	1	1
Breakfast Sausage	Formal	1	—	1	1
Chicken, Ham and Tongue Paste	Formal	1	—	1	1
Cream Custard	Formal	1	—	1	1
Fish Paste	Informal	1	—	1	1
Honey	Informal	1	—	1	1
Headless Prawns	Informal	1	—	1	1
Lard	Informal	1	—	1	1
Lemon Curd	Formal	1	—	1	1
Meat & Fish Paste	Formal	1	—	1	1
Meat Preservative	Informal	1	—	1	1
Sausage Colouring	Informal	—	1	1	1
Sausage Seasoning	Informal	1	—	1	1

Formal Samples 234.

Informal Samples 102.

Total Samples 336.

Name of Article.	Identification No.	Result of Analysis.	Result of legal proceedings, if any, under Food and Drugs Act.	Result of legal proceedings, if any, under any other Act.	The course adopted in regard to each sample in respect of which no legal proceedings were taken.
Margarine	1324	13% Butter Fat.	—	—	Cautioned
Cream	1334	.19% Boric Acid	Fined £2 10s. 0d.	—	—
Cream	1335	.26% Boric Acid.	Fined £2 10s. 0d.	—	—
Camphorated Oil	1336	5% Deficient in Camphor	—	—	Informal Sample
Milk	1357	1.42% Added Water	—	—	Cautioned
Milk	1363	.23% Added Water	—	—	Cautioned
Milk	1389	31.0% Fat abstracted	Fined £5.	—	Cautioned
Sausage Colouring	1394	1/20th gr. per lb. Arsenious Oxide	—	—	—
Milk	1425	20.0% Fat abstracted	Fined 10/-	—	—
Milk	1435	9.45% Fat abstracted and 15.17% added Water	Fined £5.	—	—
Boiled Milk	1462	10.0% Fat abstracted	—	—	Cautioned
Milk	1468	33.3% Fat abstracted	Fined £2.	—	—
Milk	1470	10.70% Added Water	Fined £2	—	—
Milk	1473	11.05% Added Water	Fined £2.	—	—
Milk	1474	14.12% Added Water	Fined £2.	—	—
Luncheon Sausage	1484	Boric Acid 11.9 gr. per lb.	—	—	Cautioned
Beef Sausage	1489	Boric Acid 10.5 gr. per lb.	—	—	Cautioned
Luncheon Sausage	1496	Boric Acid 9.1 gr. per lb.	—	—	Cautioned
Beef Sausage	1495	Boric Acid 4.2 gr. per lb.	—	—	Cautioned
Sponge Cake	1532	Boric Acid 7.0 gr. per lb.	—	—	Informal Samples
Sponge Cake	1539	Boric Acid 23.8 gr. per lb.	—	—	Cautioned as Formal Samples proved genuine
Liquid Egg	1555	Boric Acid 1.2 gr. per lb.	—	—	Informal Samples
Liquid Egg	1556	Boric Acid 1.2 gr. per lb.	—	—	Cautioned
Mustard	1624	Admixture of foreign starch	—	—	Informal Samples
Shredded Suet	1629	Over 15% Starch	—	—	Cautioned
Shredded Suet	1630	Over 15% Starch	—	—	Informal Samples
Shredded Suet	1631	Over 15% Starch	—	—	Formal Samples to be taken.
American Apples	1635	Arsenic .5/100 gr. per lb.	—	—	Warned by M.O.H. to withdraw remainder of consignments from sale
American Apples	1637	Arsenic .5/100 gr. per lb.	—	—	—
American Apples	1638	Arsenic .1/000 gr. per lb.	—	—	—
Jonathon Apples	1640	Arsenic .1/000 gr. per lb.	—	—	—
Jonathon Apples	1641	Arsenic .5/100 gr. per lb.	—	—	—

XI. INFECTIOUS DISEASES.

Notifiable diseases during year 1925
(other than Tuberculosis):—

Disease.	Total Cases notified.	Cases admitted to Hospital.	Total Deaths.
Smallpox	—	—	—
Diphtheria	54	52	—
Scarlet Fever	156	105	2
Enteric Fever (including Paratyphoid Fever)	34	34	—
Puerperal Fever	5	3*	2
Pneumonia	243	—	64
Erysipelas	31	1	—
Poliomyelitis	2	—	—
Ophthalmia Neonatorum	45	3	—
Encephalitis Lethargica	2	—	5
Malaria	2	—	—

* One case to Rochford Poor Law Hospital.

An analysis of the total cases and deaths under the various age groups is given in the Ministry of Health Tables II. and III. respectively at the end of this report.

Scarlet Fever.

Of the 156 cases of Scarlet Fever which were notified, 105 were admitted to the Borough Sanatorium, the remaining 51 being isolated at home; three cases occurred in each of five houses, and two in each of 11 houses, but with the two exceptions referred to later the secondary cases had been infected before the primary cases had been recognised. Home-treated cases are visited twice weekly by the Health Visitor to ensure that effectual isolation is maintained, but in two instances secondary cases occurred as a result of failure on the part of the parents to observe the precautions enjoined. No "return cases" followed the discharge of convalescent patients from the Borough Sanatorium, but one such case occurred after release from isolation of a home-treated case, the "return case" sickening with the disease five days later.

The majority of the cases were of the very mild type, but a few had severe attacks and there were two deaths, a boy aged five dying from septicæmia, and an adult aged 48 from toxæmia.

The Dick test for the discovery of susceptible subjects has no been utilized.

Diphtheria.

Of the 54 cases of Diphtheria notified, 52 were removed to hospital; of the other two, one was a case only recognised some weeks later on development of slight paralysis, and the other a trivial case only recognizable on bacteriological examination. Two cases occurred in each of four houses, and two occurred in a boarding school.

As was the case also in 1924, there were no deaths, which is evidence of the care taken by local medical practitioners not to overlook cases but to resort to bacteriological examination in any suspicious case and to administer antitoxin as a precautionary measure without waiting for bacteriological confirmation of the diagnosis when the condition suggests the probability of the disease being Diphtheria. Eleven of the cases were recognized at the School Clinic and there is no doubt the ability of parents to obtain advice at the Clinic as to the nature of school children's ailments partly accounts for the low mortality from Diphtheria in this Borough during recent years.

Antitoxin is stocked at the Public Health Offices and at the Borough Sanatorium and, when the parents are unable to pay for the same, is supplied free of charge to medical practitioners for use in suspected cases pending confirmation of the diagnosis.

The Shick test for the discovery of susceptible subjects, rendering it practicable to immunize the latter, has not been used as owing to the relative freedom of the Borough from the disease such measures would not appear to be called for or, if attempted, likely to be acceptable to the public.

Typhoid Fever.

The number of cases of Typhoid Fever which came under notice during the year was nine, all of whom were removed to hospital. As was the case in each of the three preceding years, no deaths were attributable to this disease.

Of the nine cases, one was an instance of imported infection, a ship's engineer who arrived at Tilbury on April 2nd and had been ill on the voyage, being notified to be suffering from Typhoid Fever on April 10th.

Of the remaining cases, four girls, fellow employees at a fancy shop, became ill from 10 to 14 days after consuming cockles brought to the shop by a colleague who had collected the same from the War Department's foreshore at Shoeburyness and, after heating them in a saucepan till the shells opened, had shared them with 11 of the 37 women employees at the shop. Of the 11 girls who had consumed the cockles, five developed Typhoid Fever, viz., four residents in Southend and one at Tilbury. One girl gave rise to a secondary case, her sister with whom she had slept prior to her removal to hospital sickening with Typhoid

Fever 14 days later. Of the remaining three cases, one followed the consumption of whelks purchased at a local fishmonger's, while in the other two cases no source of infection was ascertained.

The attention of the War Department and of the Shoberness Urban District Council was called to the advisability of issuing notices warning the public as to the danger of consuming without proper sterilization shellfish collected from their foreshores and, as a result, warning notices were erected.

Paratyphoid Fever.

Twenty-five cases of Paratyphoid B Fever were notified in the Borough during the year of which 22 occurred during a slight outbreak of the disease during July and August.

The first case was notified on July 30th, having become ill on July 22nd, and this notification was quickly followed by others as shewn in the following table:—

Date of Notification	No. of Cases	Dates of Onset
July 30th	1	July 22nd
August 1st	2	July 22nd, 23rd
August 2nd	3	July 20th, 22nd, 23rd
August 3rd	2	July 23rd, 25th
August 5th	1	July 22nd
August 6th	1	July 23rd
August 7th	2	July 20th, 30th
August 8th	1	July 27th
August 9th	2	July 27th, 30th
August 12th	1	July 30th

There were six secondary cases, the dates of onset of which as also the dates of onset and of removal to hospital of the primary cases being as follows:—

PRIMARY CASES		SECONDARY CASES	
Date of Onset	Date of removal to Hospital	Date of Onset	Date of removal to Hospital
July 22nd	July 30th	August 4th	August 8th
July 30th	August 7th	August 4th	August 8th
July 23rd	August 1st	August 3rd	August 11th
July 22nd	August 2nd	August 2nd, 5th	August 12th, 13th
July 30th	August 12th	August 16th	August 21st

The 16 primary cases occurred in 15 houses, a husband and his wife sickening with the disease in the same house on the same day. Of the secondary cases, one occurred at the Victoria Hospital; the primary case had been admitted on July 27th for

operation for appendicitis, was diagnosed to have Paratyphoid B on August 1st, and removed to the Borough Sanatorium on same day; the secondary case had been admitted on July 27th for injury caused by being run over by a motor car, developed pyrexia on August 3rd, and was removed to the Borough Sanatorium on August 11th on the cause of the latter being found to be Paratyphoid B.

The age and sex incidence of the cases was as follows:—

Age Group	MALES		FEMALES	
	Primary	Secondary	Primary	Secondary
5	—	—	—	1
5—10	—	—	2	—
10—15	2	1	2	1
15—20	1	—	3	1
20—25	1	—	1	—
25—30	—	—	—	—
30—35	1	—	2	—
35—40	—	—	—	1
40—45	—	—	1	1
Total	5	1	11	5

All the patients were admitted to the Borough Sanatorium and made good recoveries; the majority had mild uncomplicated attacks, but in several the pyrexia lasted between three and four weeks.

Exhaustive enquiries failed to reveal any food common to all the primary cases; milk, ice-cream, confectionery, bread, pastries, vegetables, cherries, tomatoes, and shell-fish were clearly not implicated. With one exception, however, all the primary cases had consumed pressed beef purchased during the 10 days before the onset of their illnesses at a shop in the centre of the Borough at which was sold cooked meats and butchers' meat, and even the exception stated that she ordinarily obtained pressed beef from this shop but had not done so for several weeks, although it would appear she had purchased cooked meats at other shops and had eaten sandwiches at various places during the fortnight preceding her illness. The majority of the patients had eaten pressed beef from the shop in question upon several occasions during the fortnight preceding their illnesses and as a consequence it was difficult to ascertain the precise dates.

The cases were limited to the centre of the Borough with the exception of two, one occurring at Thorpe Bay in the extreme Eastern portion of the Borough, and the other in the North West area; each of these cases had partaken of pressed beef purchased from the shop in question, although enquiry shewed that all the other articles of food consumed by them were obtained from shops in the immediate vicinity of their homes.

Enquiries at the shop shewed that there had been no cases of diarrhoea or other recent illnesses among the staff either of the shop or the cook-house; all the employees had been engaged in the business for some years and none gave a history of having had any form of enteric fever. A specimen of blood from each of the employees was tested as to agglutination of Paratyphoid B Bacilli, but all proved negative, except that of the foreman cook who, however, gave a history of having been inoculated in the Army in 1917. A specimen of his fœces and urine were examined at the Lister Institute with negative results as to the presence of Bacillus Paratyphoid B. There was a change in the proprietorship of the shop before investigations were completed, and in view of this and the apparent cessation of the outbreak, it was not considered desirable to pursue the investigations further.

The brother of the Thorpe Bay patient was taken ill about the same time as his sister while on holiday at an East Coast resort and was later diagnosed to have Paratyphoid B. So far as is known, this is the only instance in which cases notified in other towns could be associated with the outbreak.

Three other cases of Paratyphoid B were notified in the Borough during the year. Of these, one was a resident in the Rochford Rural District who was admitted to the Victoria Hospital on September 6th as a suspected case of Appendicitis, was diagnosed as suffering from Paratyphoid B on September 12th, and removed to the Borough Sanatorium on same day.

The other two cases were also patients at the Victoria Hospital, having been admitted thereto on November 15th and November 16th respectively for appendix operations which were performed on day of admission; they developed pyrexia on November 26th and November 25th respectively, and were diagnosed to have Paratyphoid B on November 30th on the appearance of the eruption. Both had fairly severe attacks, but recovered. The source of infection was not ascertained; they came from different parts of the Borough and were patients in different wards at the Victoria Hospital; the infection did not appear to be explicable on the assumption that any member of the Hospital staff was a carrier, but there seemed some possibility that the infection was not unconnected with the similar case which had been under operative treatment in the hospital during the outbreak in the Summer.

Poliomyelitis.

Only two cases of this disease were notified during the year, viz., a male aged 53 and a male aged 9, the former on July 30th and the latter on September 24th. In one case, the muscles affected were the supra and infra-spinati and the deltoid, while in the other the weakness was confined to the right lower limb. At the end of the year both cases were continuing to improve, though in each considerable loss of power still persisted.

Encephalitis Lethargica.

Two cases only were notified, viz., a male aged 56 notified on 27th March, and a girl aged 6 notified on November 21st. At the end of the year the former was still unable to work, while the latter still suffered from squint, diplopia, etc.

Three other cases came under notice, viz., a male aged 20 who was suffering from early Parkinsonianism after an attack early in the year, a woman aged 37 who had the Parkinsonian syndrome to a marked degree following an unrecognized attack in May, 1924, and a female aged 57 who had similar symptoms following an attack early in 1924.

Malaria.

The two cases of Malaria notified were persons who had contracted the disease abroad and had recently returned to this country.

Puerperal Fever.

This is dealt with in Section XIV. under the heading, "Maternity and Child Welfare."

Smallpox.

There have been no cases of this disease during the year and consequently no action has been necessary under the Public Health (Smallpox Prevention) Regulations, 1917.

Non-notifiable diseases.

Apart from Whooping Cough in the spring and autumn, and from Chickenpox in the last quarter of the year, the non-notifiable infectious diseases have not been particularly prevalent.

Cleansing of verminous persons.

There is provision for the bathing and cleansing of verminous school children at the School Clinic, and at the Borough Sanatorium for adults, but there is very little demand in this Borough for this service.

Disinfection.

The provision made for disinfection of rooms, bedding, etc., is dealt with under Section VII.

Bacteriological examinations.

The provision made for bacteriological examinations is stated under Section VI.

Comparison with previous years.

The following table shews the number of cases of each of the commoner infectious diseases notified and of the deaths therefrom in 1925 and during the two five-year periods, 1920-4 and 1910-14.

	5 years period 1910-4.			5 years period 1920-4.			Year 1925.		
	Average No. of cases per annum	Average yearly incidence per 100,000 population	Average No. of deaths per annum	Average No. of cases per annum	Average yearly incidence per 100,000 population	Average No. of deaths per annum	No. of cases	Incidence per 100,000 population	No. of deaths
Scarlet Fever	136.2	189	1.4	204.2	222	.6	156	130	1
Diphtheria	66.6	92	4	74.2	80	4.6	54	45	1
Typhoid Fever	11.8	20.5	1.8	4.8	5	.2	9	7.6	1
Paratyphoid Fever	—	—	—	—	—	—	25	21	1
Cerebro-spinal Fever	.6	.84	.6	.8	.87	—	—	—	1
Puerperal Fever	5.2	7.2	1.2	11	11	1.6	5	4.2	1

2/14, 19, 20

XII. TUBERCULOSIS.

New Cases and Mortality.

The number of Primary Notifications upon Forms A and B in 1925 was 254, of which 191 were pulmonary and 65 were non-pulmonary. These will be found classified in the following table:—

Age Periods	Notifications.								Deaths.			
	on Form A.				on Form B.				Pulmonary		Non-Pulmonary	
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary					
	M	F	M	F	M	F	M	F	M	F	M	F
0	...	...	...	3	...	...	...	...	...	...	...	...
1	...	...	8	3	...	...	...	...	1	...	4	...
5	3	2	10	2	1	1	2	5	...	...	...	...
10	2	2	6	3	...	...	1	4	...	1	2	...
15	5	14	1	4	...	...	...	...	...	6	...	...
20	7	14	...	...	...	...	...	...	1	3	...	...
25	33	27	3	...	...	...	...	...	15	15	...	...
35	29	17	1	2	...	...	...	...	16	12	1	...
45	13	6	2	1	...	...	...	...	8	3	...	...
55	5	6	...	1	...	...	...	...	5	3	...	...
65 and upwards	1	3	...	1	...	...	...	...	...	3	1	...
Totals	98	91	33	20	1	1	5	9	46	46	8	9

In addition 7 cases came to the notice of the department from the death returns being mostly persons who though suffering from Pulmonary Tuberculosis had not been under the care of local medical practitioners since taking up residence in the Borough until a day or two before death. On the whole it may be said that the Regulations as to notification are well observed in the Borough. Of the 254 new cases notified enquiry shewed that no fewer than 117 had acquired the disease prior to taking up residence in the Borough.

The ward incidence of the primary cases (excluding those notified on Form B) is shown in the following table:—

Ward	Pulmonary Tuberculosis	Non-Pulmonary Tuberculosis
Chalkwell	13	4
Westborough	21	8
Milton	16	5
Victoria	13	3
Pier	25	3
Prittlewell	13	6
Southchurch	32	10
Thorpe	11	2
Leigh	31	6
St. Clements	14	4

The various parts of the body affected among the 254 new cases are indicated in the next table:—

Part of Body Affected	Males	Females	Total
Lungs	99	92	191
Cervical Glands	14	13	27
Peritoneum	6	4	10
Spinal Column	1	3	4
Joints	3	2	5
Brain and Meninges	3	4	7
Skin	2	1	3
Genito-Urinary	4	0	4
Bones	2	1	3
Total	134	120	254

At the end of the year the total number of cases of Tuberculosis on the Register of Notifications was 673, 516 (281 males, 235 females) suffering from Pulmonary Tuberculosis and 157 (76 males and 81 females) from Non-Pulmonary Tuberculosis.

The Public Health (Prevention of Tuberculosis) Regulations 1925.

No action has been necessary under these Regulations which relate to the employment of tuberculous employees in the milk trade.

Public Health Act, 1925. Section 62.

It has not been necessary to take any action under this section to secure the removal to hospital of persons suffering from Pulmonary Tuberculosis who though infectious are without lodging or accommodation sufficient to enable proper precautions to be taken to prevent the spread of infection.

Institutions for Residential Treatment.

One ward block of two 8 bedded wards at the Borough Sanatorium for infectious diseases is reserved for the admission of advanced cases of pulmonary tuberculosis; this provision is of great utility but the number of beds is inadequate and the Council's suggestion that the accommodation be extended is now under consideration by the Ministry. During the year 37 patients 20 males and 17 females, were admitted, 3 of the men patients being ex-service men. The patients are under the medical care of the Clinical Tuberculosis Officer and the ward block is staffed by 3 staff nurses with special experience of tuberculosis and 2 probationer nurses.

Accommodation for patients suffering from Pulmonary Tuberculosis who require sanatorium treatment and for cases of Non-Pulmonary Tuberculosis who need treatment in surgical tuberculosis hospitals is obtained as required. During the year patients have received treatment at the following institutions:—

	Adult Males	Adult Females	Children	Total
Pulmonary Tuberculosis—				
Brompton Hospital	—	1	—	1
Grosvenor Sanatorium	1	11	—	12
National Sanatorium, Benenden	10	1	—	11
Bramshott Sanatorium	1	—	—	1
Maltings Farm Sanatorium	—	2	—	2
London Hospital	—	1	—	1
Holy Cross Sanatorium	—	1	—	1
Wyton Sanatorium	—	—	6	6
Non-Pulmonary Tuberculosis—				
East Anglian Children's Sanatorium	—	—	1	1
Heatherwood Sanatorium	—	—	2	2
Victoria Home, Margate	—	—	1	1
London Hospital	—	2	—	2
Royal Sea Bathing Hospital, Margate	2	2	1	5
High Beech Hospital	—	—	3	3

The following table shews the number of cases who were in institutions on 1st January and 31st December respectively and

the numbers of new admissions and discharges during the year.

	In Institutions on 1st January	Admitted during 1925.	Discharged during 1925.	Died during 1925.	In Institutions on 31st Dec.
Pulmonary Tuberculosis					
Hospital treatment ...	11	37	17	21	10
Sanatorium treatment	5	29	19	—	15
Non-Pulmonary Tuberculosis	7	7	5	—	9

The Tuberculosis Dispensary.

Situate in Clarence Street, Southend-on-Sea. Open Mondays, Thursdays and Saturdays for males at 2 p.m. and females at 3-15 p.m.; also on Tuesdays at 6 p.m. for males, and on Fridays at 6 p.m. for females.

By agreement with the Essex County Council, the Corporation continues as in former years to provide domiciliary visitation and dispensary treatment for patients residing in the Rochford Rural District and Shoeburyness Urban District but the figures given refer, except where otherwise stated, to patients from the Borough only.

The staff comprises one Clinical Tuberculosis Officer, Dr. G. N. Meachen, and one Tuberculosis Dispensary Nurse who devote their whole time to Tuberculosis work; in addition each of the whole-time Health Visitors undertakes the Home visitation of Tuberculosis cases in the area of the Borough allotted to her, one-tenth of her salary being charged to the Tuberculosis Account.

The number of new cases entered upon the Register during 1925 was 487 in addition to 27 patients transferred from other dispensaries. These are classified in the following table:—

Sex.	Tuberculosis		Doubtful	Not Tuberculous	Total
	Pulmonary	Non-Pulmonary			
Males ...	82	25	8	96	231
Females ...	77	24	35	120	256
Totals ...	159	49	63	216	487

The above numbers include 108 "contacts," of whom 5 were found to be tuberculous, 17 were suspicious or doubtful, while 86 proved to be not tuberculous.

Of the new patients who were entered on the Dispensary Register, 427 were seen at the Dispensary, 178 being sent by medical practitioners, 50 being referred by the Ministry of Pensions, 34 being transferred from the School Clinic and 132 being patients who visited the Dispensary of their own accord.

The number of patients who attended the Dispensary in 1925 is shewn on the following table:—

Classification	From Southend County Borough.	From Essex County Council area.
Pulmonary Tuberculosis	240	110
Non-pulmonary Tuberculosis	81	22
Doubtful Tuberculosis	84	32
Not Tuberculous	100	37
Total	505	201

The attendances of the above patients were as follows:—

Classification	From Southend County Borough.	From Essex County Council area.
Pulmonary Tuberculosis	1,691	332
Non-pulmonary Tuberculosis	638	72
Doubtful Tuberculosis	300	34
Not Tuberculous	207	59
Total	2,836	497

Visits of the Tuberculosis Officer.

During the year the Tuberculosis Officer paid 591 visits to the homes of patients, 311 of which were within the Borough, and 280 were in the Essex County Areas. 45 consultations were held with medical practitioners.

Ex-Service Men.

During the year 233 reports were rendered to the Ministry of Pensions or to the Local War Pensions Committee relative to tuberculous Ex-Service men.

Miscellaneous.

The following information under various headings sug-

gested by the Ministry of Health in Circular 648 has been furnished by the Clinical Tuberculosis Officer.

3. Patients requiring specialized treatment are sent to suitable sanatoria or hospitals. The Clinical Tuberculosis Officer has been appointed Consulting Physician for Tuberculosis to the local Poor Law Infirmary, situated at Rochford, and attends at regular intervals at that institution to see tuberculous patients in consultation with the Medical Officers thereof. x

Cases of doubtful or actual tuberculosis occurring in school children are invariably referred to the Clinical Tuberculosis Officer by the School Medical Officers.

4. The relations between the medical practitioners of the Borough and the Dispensary are such that the closest co-ordination exists in regard to the work of the Clinical Tuberculosis Officer and medical practitioners including the Insurance practitioners, the appropriate forms in the case of insured patients respecting progress and treatment being regularly exchanged.

5. In cases where the diagnosis is doubtful the patient, unless under private medical care, is urged to come again after an interval, and, if necessary, visits to the home are made by the Tuberculosis Officer.

6. Every effort is made by the Tuberculosis Officer, the Tuberculosis Nurse, or the Health Visitor for the area in which the patient resides, to persuade "contacts" to attend the Dispensary or to be examined at home.

7. No special methods of diagnosis are in use, except repeated examination of the sputum, but in tuberculosis of the bones or joints radiographs are taken where the diagnosis has been doubtful. During the year 6 patients were thus x-rayed. Tuberculin has been given in a few selected cases. ? for diagnosis

8. Dental treatment is provided by the Council in necessitous cases when recommended by the Tuberculosis Officer, and ex-service men whose disease is recognised by the Ministry of Pensions as being "due to" or "aggravated" by service are provided with dental treatment by the Ministry. During the year 8 patients were thus treated, 3 by the Ministry and 5 by the Council, the dentures in the latter cases being paid for by the After-care Committee, by the Civic Guild of Help or other voluntary agency.

9. Home nursing of advanced tuberculous patients is not undertaken by the Council, such patients being encouraged to enter the "Allen Ward" at the Borough Sanatorium. The local District Nursing Association has, on occasion, visited the homes of patients for this purpose.

Extra nourishment is provided by the Town Council for those necessitous patients when such provision is regarded as ancillary to treatment either before admission to sanatoria or immediately on discharge from sanatoria and before they have

resumed employment; during the year 25 patients were thus supplied with milk and eggs at a cost of £90 3s. 0½d.

10. Cases of Non-Pulmonary tuberculosis, especially of the bones and joints in adults and children, are sent for in-patient treatment to surgical hospitals approved by the Ministry. Any surgical appliances such as splints, &c., are provided in necessitous cases by the Council.

11. There is an After-care Committee, upon a voluntary basis, the nucleus of which was formed from a Sub-Committee of the local Civic Guild of Help in 1924. Meetings are held monthly at which the Tuberculosis Officer attends. In addition to supplementing the work of the Dispensary by friendly advice and counsel, the Committee has done much useful work in sending contacts away to convalescent homes, boarding out "pre-tuberculous" children in the country, assisting in selected cases with loans of money to pay arrears of rent, or in referring patients to other charitable organisations. Like most care-committees, it is greatly hampered in its operations by want of funds.

12. Suitable employment for ex-sanatorium patients and others whose physical condition allows, has in a few instances been found by the After-care Committee but experience shews that efforts in this direction are generally unsuccessful which is not surprising having regard to local labour conditions.

13. The Council possesses 3 moveable shelters which are lent to patients if inspection shews that they can be erected in a suitable position in the garden and the patient can receive adequate care. The shelters are regularly inspected by the Tuberculosis Officer and the Council's Sanitary Inspectors.

14. No special factor exists in the Borough that would tend to lead to an increase in the incidence of tuberculosis as there are no large works or factories in the town. About 50 per cent. of the known cases had already contracted the disease prior to taking up residence in the Borough while a large proportion of the others are the children of parents who took up residence in former years owing to their having developed the disease elsewhere.

15. The special difficulties encountered are those common to most health-resorts, namely, that of tracing and helping the temporary resident and transient visitor who is here to-day and gone tomorrow. Many cases doubtless never come to the knowledge of the Public Health Department at all. Some patients even come to the town in a moribund condition and only become known through the death returns. The lack of adequate housing accommodation and the inability of a family whose breadwinner suffers from tuberculosis to pay the heavy rentals demanded locally without subletting the greater part of the house lead to difficulties in securing adequate segregation of advanced or infective cases in their homes.

Ministry of Health Tables.

The following statistical tables have been compiled as required by Memorandum 37T of the Ministry of Health.

TABLE I.

Return showing the work of the Dispensary during the year 1925.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.			
	Adults.		Children.		Adults.		Children.		Adults.		Children.	
	M	F	M	F	M	F	M	F	M	F	M	F
A.—NEW CASES examined during the year (excluding contacts):—												
(a) Definitely tuberculous	73	69	6	6	3	8	22	16	76	77	28	22
(b) Doubtfully tuberculous	...	...	...	...	...	...	...	...	16	18	6	7
(c) Non-tuberculous	...	...	...	...	...	...	...	...	51	48	28	22
B.—CONTACTS examined during the year:—												
(a) Definitely tuberculous	3	...	...	2	...	...	...	...	3	...	...	2
(b) Doubtfully tuberculous	...	...	...	...	...	...	...	...	...	6	6	4
(c) Non-tuberculous	...	...	...	...	...	...	...	...	5	21	32	29
C.—CASES written off the Dispensary Register as												
(a) Cured	25	5	2	3	2	1	3	7	27	6	5	10
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	...	...	...	...	...	...	...	...	37	71	60	56
D.—NUMBER OF PERSONS on Dispensary Register on December 31st:—												
(a) Diagnosis completed	206	165	26	32	17	21	54	40	223	186	80	72
(b) Diagnosis not completed	...	...	...	...	...	...	...	...	6	8	5	2
1. Number of persons on Dispensary Register on January 1st	...	...	...	...	...	...	...	...	...	...	519	...
2. Number of patients transferred from other areas and of "lost sight of" cases returned	...	...	...	...	...	...	...	...	...	...	27	...
3. Number of patients transferred to other areas and cases "lost sight of"	...	...	...	...	...	...	...	...	...	...	99	...
4. Died during the year	...	...	...	...	...	...	...	...	...	...	80	...
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months	...	...	...	...	...	...	...	...	...	...	15	...
6. Number of attendances at the Dispensary (including Contacts)	...	...	...	...	...	...	...	...	...	...	2836	...
7. Number of attendances of non-pulmonary cases at Orthopaedic Out-stations for treatment or supervision	...	...	...	...	...	...	...	...	...	...	...	...
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for	...	...	...	...	...	...	...	...	...	...	...	...
(a) "Light" treatment	...	...	...	...	...	...	...	...	...	...	66	...
(b) Other special forms of treatment	...	...	...	...	...	...	...	...	...	...	20	...
9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	...	...	...	...	...	...	...	...	...	...	8	...
10. Number of consultations with medical practitioners:—	...	...	...	...	...	...	...	...	...	...	...	...
(a) At Homes of Applicants	...	...	...	...	...	...	...	...	...	...	30	...
(b) Otherwise	...	...	...	...	...	...	...	...	...	...	...	...
11. Number of other visits by Tuberculosis Officers to Homes	...	...	...	...	...	...	...	...	...	...	281	...
12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	...	...	...	...	...	...	...	...	...	...	586	...
13. Number of	...	...	...	...	...	...	...	...	...	...	...	...
(a) Specimens of sputum, &c., examined	...	...	...	...	...	...	...	...	...	...	429	...
(b) X-ray examinations made in connection with Dispensary work	...	...	...	...	...	...	...	...	...	...	6	...
14. Number of Insured Persons on Dispensary Register on the 31st December, 1925	...	...	...	...	...	...	...	...	...	...	132	...
15. Number of Insured Persons under Domiciliary Treatment on the 31st December 1925	...	...	...	...	...	...	...	...	...	...	46	...
16. Number of reports received during the year in respect of Insured Persons:—	...	...	...	...	...	...	...	...	...	...	...	...
(a) Form G.P. 17	...	...	...	...	...	...	...	...	...	...	2	...
(b) Form G.P. 36	...	...	...	...	...	...	...	...	...	...	100	...

TABLE II.
RESIDENTIAL INSTITUTIONS.

(A). Average Number of Beds Available for Patients during the Year 1925.

	Observation.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Total.
		"Sanatorium" Beds.	"Hospital" Beds.	Disease of Bones & Joints.	Other Conditions	
Adult Males	5.62	8	0.48	...	12.10
Adult Females	4.65	8	0.82	...	13.47
Children under 15	...	2.31	...	5.05	0.45	7.81
TOTAL	10.58	16	6.36	0.45	35.39

(B). Return showing the Extent of Residential Treatment during the Year 1925.

		In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31.
Number of Patients ...	Children, Adults, M.	8	31	14	12	13
	F.	11	31	26	9	7
	Children, M.	2	5	...	...	7
	F.	2	6	1	...	7
Number of Observation Cases ...	Children, Adults, M.	...	...	...	...	...
	F.	...	...	...	...	...
	Children, M.	...	...	...	...	...
	F.	...	...	...	...	...
Total ...		25	75	41	21	54

TABLE IV.—PULMONARY.
Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary at the end of 1925.

Condition.		Class	T.B. Minus.	Class T.B. plus.			Total Class T plus.
				Group 1.	Group 2.	Group 3.	
Disease arrested	Adults	M	54	23	1	...	24
		F	51	10	...	...	10
	Children	M	19	...	...	...	...
		F	17	...	...	...	...
Disease not arrested	Adults	M	55	34	40	1	75
		F	55	24	22	3	49
	Children	M	7	...	...	...	...
		F	15	...	...	...	...
Totals			271	91	65	4	158

TABLE IV.—NON-PULMONARY.
Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary at the end of 1925.

Condition.		Bones & Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	
Disease arrested	Adults	M	5	...	2	...	7
		F	1	...	...	1	2
	Children	M	4	9	...	6	19
		F	8	5	1	11	25
Disease not arrested	Adults	M	4	...	5	1	10
		F	8	2	5	4	19
	Children	M	15	10	1	11	35
		F	7	5	...	5	15
Totals		50	29	14	39	132	

XIII. VENEREAL DISEASES SCHEME.

The Venereal Diseases Scheme of the Council provides :—

- (a) For the maintenance of a Treatment Clinic at the Borough Sanatorium for infectious diseases, Balmoral Road, Westcliff-on-Sea.
- (b) For the examination, free of charge to medical practitioners practising in the County Borough, of pathological specimens from cases or suspected cases by the Director of the Pathological Department at the Seaman's Hospital, Greenwich.
- (c) For the supply of approved arseno-benzol compounds to medical practitioners practising in the County Borough who hold one of the qualifications laid down by the Ministry of Health.

Statistics as to the work carried out at the Treatment Clinic are given below :—

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Total	
	M's	F's	M's	F's	M's	F's	M's	F's	M's	F's
1. No. of cases which—										
(a) Were under treatment or observation on 1st Jan., 1925, for ...	51	22	...	...	54	20	4	...	69	42
(b) Had been marked off in a previous year as having ceased to attend or as transferred to other Centres, and which returned to the Treatment Centre during the year suffering from the same infection ...	5	5	...	...	7	2	...	...	10	5
Total—Items 1(a) 1(b)	54	25	...	...	41	22	4	...	79	47
2. (a) No. of cases dealt with at the Treatment Centre during the year for the first time	14	17	...	...	86	24	84	56	184	77
Total—Items 1(a), 1(b) & 2(a)	48	42	...	...	127	46	88	56	263	124
2 (b) No. of cases included in Item 2(a) known to have received previous treatment at other Centres for the same infection ...	2	8	...	...	18	7	...	...	20	15
3. No. of cases who ceased to attend—										
(a) Before completing a course of treatment...	...	1	...	...	26	1	...	...	26	2
(b) After one or more courses but before completion of treatment for ...	15	5	...	...	...	...	...	...	15	5
(c) After completion of treatment but before final test as to cure...	4	6	...	...	16	12	...	...	20	18
4. No. of cases transferred to other Treatment Centres after treatment for	3	...	...	...	20	1	...	...	25	1
5. No. of cases discharged from the Out-Patient Clinic after completion of treatment and observation for	3	7	...	...	52	21	...	...	55	28
6. No. of cases who, on 1st January, 1926, were under treatment or observation for ...	25	23	...	...	55	11	...	...	58	34
Total—Items 3, 4, 5 & 6	48	42	...	...	127	46	...	...	175	88
7. Out-Patient Attendances—										
(a) For individual attention by the Medical Officer ...	458	448	...	...	1082	714	164	79	1704	1241
(b) For intermediate treatment, e.g., irrigation, dressings, etc.	...	...	...	...	2486	672	...	...	2486	672
Total Attendances ...	458	448	...	...	5568	1586	164	79	4190	1913
8. Aggregate number of "In-patient" days of treatment given to persons who were suffering from	...	...	...	...	...	26	...	...	...	...

9. Pathological Examinations.

	For detection of			For Wassermann Re-action
	Spirochetes	Gonococci	Other Organisms	
(a) Specimens examined at and by Medical Officer of the Centre	5	405	...	...
(b) Specimens from persons attending at Centre, examined at Bacteriological Laboratory at King's College ... ..	...	...	...	165

County or County Borough in which patient usually resides	Southend-on-Sea.	Essex.	London.	Surrey.	Leicester.	Plymouth.	Kent.	Total.
	A. No. of persons from each area dealt with during the year at or in connection with the out-patient Clinic for the first time and found to be suffering from—							
Syphilis	26	4	...	1	...	...	...	31
Soft Chancre	...	...	...	...	...	...	...	...
Gonorrhœa	88	11	10	...	1	...	...	110
Conditions other than Venereal	91	25	3	...	...	1	...	120
Total	205	40	13	1	1	1	...	261
B—Total number of attendances at the Out-patient Clinic of all patients residing in each area	5597	382	113	2	4	1	4	6105
C—Aggregate number of "In-patient days" of all patients residing in each area	26	...	...	...	...	...	...	26
D—Number of doses of Arsenobenzol Compounds given in the:								
1 Out patient Clinic ...	533	46	...	...	...	...	...	579
2 In-patient Department to patients residing in each area ... ..	...	...	...	...	...	...	...	...

The following table shows how the work at the Treatment Centre compares with that in previous years.

New Patients suffering	1918	1919	1920	1921	1922	1923	1924	1925
From Syphilis ...	21	74	85	57	37	45	37	31
„ Gonorrhœa .	29	110	100	83	67	102	102	111
„ Soft Chancre ..	...	...	2	9	4	7	3	...
Total attendances ...	564	4751	7133	7615	6005	7289	5815	6105

Only one of the 31 new patients who suffered from Syphilis was an instance of relatively recent infection, the other patients being either in the late secondary or tertiary stage of the disease or else instances of congenital disease. So far as can be judged from the numbers of new patients who attend the Treatment Centre for treatment for Gonorrhœa there appears to be no very definite decline in the incidence of this disease; on the other hand there is no reason to suppose there is any increase in incidence as it is probable a greater proportion of patients than formerly now attend the Clinic for treatment.

The number of specimens sent for examination to the Director of the Pathological Department of the Seamens Hospital, Greenwich during 1925 was as follows:—

	By Medical Officer of V.D. Treatment Centre	By Private Practitioner
(a) for gonococci	—	5
(b) for spirochetes	—	—
(c) of blood for Wassermann Reaction ...	169	49
(d) of cerebro-spinal fluid for Wassermann Reaction	—	—
(e) Miscellaneous specimens	—	—

The provision made both for Clinic treatment and for intermediate treatment appears to be adequate. The majority of the local practitioners refer to the Clinic for treatment nearly all their patients whom they find to be suffering from Venereal Diseases especially male patients suffering from gonorrhœa or patients suffering from syphilis who require treatment by arsenobenzol compounds. The number of female patients who attend for treatment for gonorrhœa is unduly low and although efforts are always made to secure the attendance of women who are suspected to have infected male patients the response is poor. Female patients suffering from gonorrhœa are treated by a woman medical officer and ample private waiting room accommodation is available so it is difficult to see what further provision can be made which would attract a larger proportion of women patients. It appears probable that the great disparity between the numbers of men and women who attend for treatment for gonorrhœa is in the main due to the relative mildness of symptoms in the chronic disease in women.

Notices as to the provision made for diagnosis and treatment at the Council's Treatment Centre are exhibited in the public lavatories including those at the Railway Stations.

During the summer months a large proportion of the new patients who present themselves for examination and treatment are either temporary visitors or temporary residents for the season. This accounts for the somewhat large proportion of patients who cease to attend before completing treatment,

Syphilis patients marked off in one year as ceasing to attend often re-appear at the Centre a few months later for further treatment explaining that in the interval they had left the district and it is clear that the statistics as to the proportion of patients who cease to attend before cure exaggerate the number who neglect to obtain adequate treatment.

Only 4 of the local medical practitioners have at any time availed themselves of the facilities to obtain free supplies of arseno-benzol compounds for the treatment of their patients; during 1925, supplies of Sulfarsenol for subcutaneous injection into 2 patients have been given to their respective doctors, the total quantity supplied being 18 doses totalling 5.28 grammes and 21 doses totalling 5.88 grammes respectively. Since the scheme was initiated only one practitioner has applied for a supply of an arseno-benzol compound for intravenous injection which form of treatment does not appear to be commonly used by local practitioners.

It has not been necessary to take any action under the Venereal Diseases Act, 1917, and there is no reason to believe that any unqualified practitioner undertakes the treatment of Venereal Diseases in this Borough.

XIV. MATERNITY AND CHILD WELFARE.

A. The Council's Scheme provides as follows—

- (a) Infant Clinics at Centres held at Southend twice weekly and at Leigh-on-Sea and at Southchurch once weekly.

The particulars of attendances, &c., are shewn below :

	Southend	Leigh	Southchurch	Total
No. of Sessions held ...	104	49	52	205
No. of individuals who attended :—				
Infants	352	201	292	845
Children aged 1 to 5	259	170	280	709
Nursing Mothers ...	311	218	272	801
Other Mothers ...	145	87	173	405
Total attendances of :—				
Infants and Children	4014	2309	3801	10124
Nursing Mothers ...	3001	1369	2320	6690
Other Mothers ...	753	577	1240	2570
No. of children aged 1 to 5 subjected to routine medical inspections				
	223	67	96	386

- (b) Antenatal Clinics at Southend and at Leigh once

monthly, the particulars of attendances, &c., being as follows:—

	Southend	Leigh	Total
No. of sessions held ...	12	12	24
No. of individual expectant mothers ...	175	83	258
No. of attendances of expectant mothers ...	299	142	441

- (c) The Home Visiting of Infants, young children, and expectant mothers by the Council's staff of 8 whole-time Health Visitors and 1 part-time Health Visitor. Particulars of the work done in this connection during the year are shewn below:—

No. of live Births notified ...	1,429
No. of infants noted for visiting (including new arrivals from other towns) ...	1,597
No. of infants visited ...	2,017
No. of visits to infants under one year	6,215
No. of visits to children between one year and five years of age ...	2,399
No. of expectant mothers visited ...	384
No. of visits to expectant mothers ...	1,095
No. of attendances at Infant Clinics ...	510
No. of attendances at Ante-natal Clinics	62

Of the 1,391 infants visited as a result of receipt of notification of birth, the number found to be artificially fed within the first six months of life was:—

(a) From Birth ...	68
(b) Breast Fed at first, but Artificially fed later ...	389

- (d) The Home Nursing by the Council's Health Visitors of cases of Pneumonia, Measles, Whooping Cough, &c., when the severity of the attacks or the development of complications renders such a course desirable. The Health Visitors similarly undertake when removal to hospital is not considered necessary the home nursing of cases of Puerperal Fever occurring in the practice of midwives or when no other skilled nursing assistance is available. They also visit other cases of infectious disease under isolation at home to ensure that adequate isolation is being maintained as also cases of mild ophthalmia in infants in order to ensure that the cases receive adequate nursing treatment. The work carried out by the Health Visitors during

the year in this connection is shewn below :—

Disease.	No. of cases visited	No. of cases home-nursed	No. of visits
Measles	545	—	952
Pneumonia	175	13	464
Whooping Cough	157	—	373
Scarlet Fever	100	—	556
Typhoid Fever (contacts)	56	—	331
Mumps	55	—	77
Ophthalmia Neonatorum including suspected cases	35	—	154
Diphtheria	33	—	87
Puerperal Fever	1	1	114
Tuberculosis	265	—	761

(e) *The Hospital treatment of cases of Ophthalmia Neonatorum.*—Of the 45 cases of Ophthalmia Neonatorum notified during the year, 23 were treated at the Borough Sanatorium, 22 as outpatients and 3 as inpatients; with the exception of one premature (7 months) infant who died from prematurity on the 10th day after birth, all recovered without damage to vision. The total number of attendances for necessary treatment as out-patients was 464 while the 3 infants admitted with their mothers owing to the severity of attacks remained 18 days, 12 days and 6 days respectively, the two former being subsequently treated as outpatients till complete recovery.

(f) *The Inspection of Midwives.*—The Woman Assistant Medical Officer of Health acts as inspector of Midwives, and paid 51 visits and two special visits during the year. Each Midwife in substantial practice was inspected at least once a quarter, while the others received visits occasionally. The regulations of the Central Midwives' Board are well observed.

(g) *The payment for Medical Aid for Midwives.*—Medical Aid was sought by Midwives in accordance with the regulations of the Central Midwives' Board upon 153 occasions or in 23.1 per cent. of the cases attended by them, as follows :—

Condition of Infant—

Discharge from eyes	33
Prematurity, debility or congenital defects	14
Convulsions	1
Unsatisfactory condition of infant	3 — 51

Maternal conditions—

During Pregnancy—

Antepartum Hæmorrhage	...	...	7
Miscarriage	...	...	3
Threatened abortion	...	...	3
Swollen legs	...	...	2
Cold and Cough	...	...	1
Chorea	...	...	1
Fits	...	...	1
General condition unsatisfactory	...	...	2 — 20

During Labour—

Perineal tear	...	...	44
Difficult or obstructed labour	...	...	24
Retained placenta	...	...	7
Hæmorrhage	...	...	1
Presentation unknown	1 — 77

During Puerperium—

Rapid pulse and rising temperature	5 — 5
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In addition the following notices were received from Midwives, pursuant to the regulations of the Central Midwives' Board:—

Notice of still birth	...	...	12
Notice of artificial feeding	...	...	9
Notice of death of infant	...	...	5
Notice of liability to be a source of infection	...	...	4
Notice of having laid out a dead body	...	...	1 — 31

In 77 instances in which medical aid was sought by Midwives the fees of the Doctors were, in accordance with the Midwives' Act, 1918, paid by the Corporation. 16 cases were referred for investigation as to their financial circumstances to the Civic Guild of Help whose recommendations were considered by the Committee with the following results:—

In 9 cases the patient was considered necessitous and the relatives were not asked to contribute towards the expense incurred.

In 2 cases it was recommended that the full amounts viz., 3 guineas and 10/- respectively be refunded to the Corporation.

In 5 cases it was recommended that part of the fee paid be refunded as follows:—

- £2 of a fee of £2 15s.
- 25/- of a fee of 3 guineas.
- 10/6 of a fee of 1 guinea.
- 5/- of a fee of 10/-.
- 5/- of a fee of 1 guinea.

In 3 instances the Committee, owing to exceptional circumstances, remitted the payment of fees of 10/- and 5/- and in 1 case remitted the balance of the fee after 2/6 had been paid of a fee of 5/-.

In the remaining 58 cases the relatives were requested to refund the whole of the fee, viz. :—

14 at 2 guineas.
1 at 25/-
23 at 1 guinea.
3 at £1.
1 at 15/-.
5 at 10/-.
1 at 7/6.
10 at 5/-.

The total gross cost of the provision of medical aid for Midwives was £89 17s. 6d. as compared with £94 11s. in 1924, £61 17s. 6d. in 1923, £60 5s. in 1922, £58 8s. in 1921 and £29 13s. 6d. in 1920. Of the £72 16s. 6d. which the relatives were required to contribute £55 12s. 6d. had been paid off by the end of the year, whilst £11 19s. 6d. was paid off the amount £20 14s. outstanding at the end of the previous year.

(h) *The payment of Midwives' fees in necessitous cases.—*

During the year the midwife's fee, viz., a reduced fee of one guinea, was paid by the Council in 23 instances while in 3 instances part of the fee viz., 17/-, 16/- and 11/- was paid to midwives engaged by women who were considered to be necessitous, a total expenditure of £26 7s. as compared with £14 14s. in 1924, £28 7s. in 1923, £29 18s. 6d. in 1922, £47 1s. in 1921 and £48 6s. in 1920.

(i) *Milk for Mothers and Children in necessitous cases.—*

The following table shews the quantity of fresh and dried milk ordered each month of the year.

	Fresh Milk.		Dried Milk.	
	Quantity. Pints.	Cost. £ s. d.	Quantity. lbs.	Cost. £ s. d.
January	3,885½	64 15 2	51	3 16 6
February	2,568	42 16 0	47	3 10 6
March	1,604	26 14 8	46	3 9 0
April	1,631	20 7 9	24	1 16 0
May	986	12 6 6	26	1 19 0
June	447	5 11 9	22	1 13 0
July	385	4 16 3	18	1 7 0
August	413	5 3 3	13	19 6
September	364	4 11 0	18	1 7 0
October	841	12 5 ¾	37	2 15 6

		Fresh Milk.		Dried Milk.	
		Quantity.	Cost.	Quantity.	Cost.
		Pints.	£ s. d.	lbs.	£ s. d.
November	...	1,292½	18 16 11¼	40	3 0 0
December	...	1,538	22 8 7	66	4 19 0
Totals for	1925	16,055	240 13 2¼	408	30 12 0
	1924	29,893½*	411 15 2	1,331	99 16 6
	1923	21,580	256 14 9½	567	47 0 6
	1922	12,052	164 6 10½	585	54 16 3
	1921	14,373	266 2 5¼	909	97 6 1
	1920	17,025	385 2 11¼	—	— — —

*Since 1st September, 1924 Grade A Milk only has been supplied by the Corporation under the Maternity and Child Welfare Scheme.

- (j) *Meals for expectant mothers and young children in necessitous cases.*—Two expectant mothers and one child being provided with dinners and teas during 1925 at a cost of £2 5s. 2d.
- (k) *Dental treatment* for expectant mothers and young children at the School Dental Clinic by arrangement with the Education Committee, 5 expectant mothers and 10 young children thus receiving dental treatment during the year.
- (l) *Treatment for squint* in young children under 5 at the School Eye Clinic by arrangement with the Education Committee, 14 such children having been provided with treatment during 1925.

B. Voluntary Work in connection with Maternity and Infant Welfare.

The supervision of the detailed work of the Maternity and Child Welfare Committee is entrusted to a Sub-Committee which consists of 10 ladies who assist in the work of the Infant Centres together with the lady members of the Maternity and Child Welfare Committee, representatives elected by medical practitioners, the practising midwives, and a representative of the Education Committee.

This Sub-Committee also administers a Voluntary Fund

by means of which they are able to assist necessitous mothers to pay the fees for their confinements to take place in the homes of midwives in instances in which otherwise the mothers would have to resort to the Poor Law Hospital owing to housing difficulties rendering their confinement at home impossible. The Sub-Committee out of its Fund also pays the expenses of sending mothers and delicate children, who need change of air to convalescent homes, pays for dentures for expectant and nursing mothers, provides extra nourishment and medical comforts for mothers and children in necessitous cases when such are advised by the family doctors, supplies sterile maternity outfits to necessitous expectant mothers free or at a reduced charge, and in many other ways assists in the general work.

The local Civic Guild of Help enquires into all applications for milk and meals, for assistance to pay the fees of midwives, and for remission of repayment of the amounts paid by the Council to doctors for medical aid to midwives.

C. Maternal Morbidity and Mortality.

Puerperal Fever.—Five cases of Puerperal Fever were notified during the year, viz., two from the Victoria Hospital, one from a Midwife's Home, and two cases in which the confinement had taken place at the patient's own residence.

The cases at the Victoria Hospital followed craniotomy for contracted pelvis and version for placenta prævia respectively while that in the Midwife's Home followed the digital removal of a retained placenta following postpartum hæmorrhage. Of the remaining cases, one was a primipara who sustained a vaginal tear and the other followed easy labour and was possibly not a case of Puerperal Fever, the pyrexia more probably being due to axillary adenitis.

The case which occurred in the Midwife's Home was removed to the Rochford Hospital and died thereat; one of the two cases who were delivered at the Victoria Hospital also had a fatal termination.

PUERPERAL FEVER, 1925.

Age.	Place of confinement.	Date of confinement.	Character of confinement.	Date of onset.	Date notified.	Where treated.	Remarks.
1. Multipara aged 36.	Midwife's home	Jan. 13th.	Adherent Placenta	Jan. 16th.	Jan. 16th.	Rochford Poor Law Hospital.	Died on Jan. 31st.
2. Primipara aged 23.	Victoria Hospital	Feb. 26th,	Contracted Pelvis, Craniotomy	Mar. 1st.	Mar. 1st.	Victoria Hospital.	Recovered.
3. Multipara aged 27.	Victoria Hospital	Feb. 26th,	Placenta Praevia	Mar. 1st.	Mar. 1st.	Victoria Hospital.	Died on Mar. 4th.
4. Primipara aged 33.	Private Residence	Mar. 2nd.	Difficult labour, Vaginal tear	Mar. 6th.	Mar. 6th.	Home.	Recovered.
5. Primipara aged 29.	Private Residence	July 11th.	Normal labour No tear	July 15th.	July 16th.	Home.	Recovered ? axillary adenitis.

The patient with contracted pelvis had refused to attend the Antenatal Clinic and had also refused antenatal examination by a doctor whom she sought when 5 months pregnant to engage to attend her at her confinement; as a result, the doctor suspecting from her dwarfed stature that there was a likelihood of pelvic contraction refused to be engaged with the result that she then engaged another practitioner who making no pelvic examination till labour set in found after 12 hours fruitless efforts that delivery was impossible without destruction of the child and had to send the patient into the Victoria Hospital as a case of urgency.

In addition to the cases of Puerperal Fever, two other deaths from sepsis connected with pregnancy or the puerperium were reported during the year; both occurred at the Rochford Hospital and were attributed to "Acute Puerperal Salpingitis, Septic Pneumonia" and to "Miscarriage. Chronic Pelvic Abscess 9 months" respectively. The former patient had been admitted to the Rochford Hospital owing to the development of fits ? eclamptic in nature and on admission was suffering from gonorrhoea with inflammation of Bartholin's gland; the delivery on February 27th was uncomplicated apart from a slight superficial laceration which was sutured; the temperature rose on the third day, and the patient shortly afterwards developed thrombosis of the veins of the thigh followed by pneumonia from which she died on April 1st.

Other Maternal Deaths.—Three deaths from diseases of pregnancy or parturition from causes other than sepsis were registered during the year viz. :—

- (a) A primipara aged 26 who was confined at home by a medical practitioner and who died 8 weeks later in a Nursing Home from "Toxæmia caused by constipation occurring during Phlebitis 6 weeks after Parturition."
- (b) A multipara aged 42 who died 15 days after a miscarriage from profuse hæmorrhage.
- (c) A primipara aged 31 who died from Puerperal eclampsia in the 6th month of pregnancy 30 hours after onset of first fit. She had not engaged a doctor or midwife and had not attended the antenatal clinic. She had had swelling of the feet for a month but had attached no importance to this symptom.

D. Still Births.

Detailed enquiry was made into 11 cases of still births notified by midwives. In only one instance was there a history of previous miscarriages or still births, the mother after having given birth to a living child in 1916 having a miscarriage at 4

months in 1922 and a premature labour at 7 months in 1923 and at 7½ months in 1925; her blood gave a negative Wassermann Reaction and the only explanation of the premature termination of her later pregnancies appeared to be chronic illhealth resulting from T.N.T. poisoning in munition work during the War.

Of the remaining cases, 5 were still births at full term; 2 were due to the cord being round the infant's neck but in the other 3 cases no cause was ascertained though in 2 instances the still birth was attributed to a fall during the week or so immediately before labour set in; in 2 instances the mothers were primiparæ while of the others one had had living 8 children and the other two one living child.

Four cases were associated with premature labours at from 6½ to 7½ months and no cause was ascertainable except in two instances in which there had been antepartum hæmorrhage. In the remaining case at 3 months, the abortion immediately followed rectification of a malposition of the uterus at 3 months by a medical practitioner.

E. Ophthalmia Neonatorum.

Although 45 cases were notified during the year, the great majority were not due to gonococcal infection but were merely infants who developed a few days after birth slight purulent discharge from the eyes which readily cleared up with simple treatment. In less than half the cases, was there any swelling of the eyelids and in only about 12 instances was the disease at all severe. Of the cases 26 occurred in the practices of certified midwives, one midwife notifying 11 cases, one 7 cases, one 4 cases and four 1 case each; the great majority of the cases occurring in the practices of the three midwives who had more than one case were merely instances of slight non-purulent conjunctivitis probably due to the instillation of silver nitrate at the time of birth, and should not have been notified under the Regulations; 7 of these cases were notified only by the midwives, the doctors called in by the midwives in accordance with the Rules of the Central Midwives' Board not considering that the ailment came within the definition of Ophthalmia Neonatorum and consequently did not notify them. In no instance did any ulceration of the cornea result, the infants recovering with undamaged vision. One premature infant born at 6½ months who was treated as an in-patient at the Borough Sanatorium died as a result of prematurity 10 days after birth.

OPHTHALMIA NEONATORUM.

NUMBER OF CASES.

Notified	Treated at home	Treated in Hospital	Treated as Out-patients at the Borough Sanatorium.	Vision unimpaired	Vision impaired	Total Blindness	Deaths
45	22	5	25	44	—	—	1

XV. CONTAGIOUS DISEASES OF ANIMALS ACTS.

The total number of inspections made during the year under the above Acts was 52 and the following statement gives particulars of the action taken under these Acts and under the Orders of the Minister of Agriculture and Fisheries.

Swine Fever Order, 1908.—No cases of suspected Swine Fever were notified during the year.

Parasitic Mange Orders, 1911-19.—Two cases of Parasitic Mange among horses were reported and these were both confirmed by the Corporation's Veterinary Inspectors.

Rabies Order, 1919.—No suspected cases of Rabies were reported.

Sheep Double Dipping Order, 1920.—Four hundred and twenty-four sheep and lambs were dipped as required by the Order.

Foot and Mouth Disease.—No cases of Foot and Mouth Disease have occurred in the Borough, but movements of animals were restricted for a period under the Midlands and South of England Regulation of Movement Order, 1925. The Borough was also declared for a time an infected area owing to an outbreak having occurred within a fifteen mile radius. Three persons were cautioned for an infringement of the Orders and one was prosecuted and fined £2 for moving a heifer to a slaughterhouse in the Borough from an infected area without license.

Rats and Mice Destruction Act, 1919.—Twenty-nine complaints were received during the year and dealt with.

During the rat week occupiers of premises where rats were known or believed to exist were asked to make special endeavours to rid their premises of the pests. Poisons are generally used and there is considerable difficulty in estimating the number of rats actually killed but no fewer than 1034 are known to have been accounted for during rat week by other means of extermination such as dogs, ferrets, traps, etc. Apart from poultry runs, sheds used as stores by provision dealers, etc., stables and similar premises, the Borough is relatively free from rat infestation.

XVI. MENTAL DEFICIENCY ACT.

Ascertainment.—Excluding children aged between 7 and 16 whose cases have not been notified to the Mental Deficiency Committee by the Education Committee pursuant to Section 2 (2) of the Act, there were at the end of the year 127 residents

in the County Borough who were known to be mentally defective within the meaning of the Act. Of these 26 (14 males, 12 females) were in certified institutions, 69 (38 males, 31 females) under statutory supervision and 32 (17 males, 15 females) under voluntary supervision.

During the year 9 cases were notified by the Education Committee under Section 2 (2) viz. 5 males and 4 females, and these were placed under statutory supervision.

Institutional Care.—Of the 26 defectives in institutions, 24 were at the Royal Eastern Counties Institution and 2 at the Royal Earlswood Institution. With two exceptions, one at each institution, the cases have all been dealt with under "Order," the Council having exercised its permissive powers in the case of one male and one female defective only.

Institutional care was provided during the year for 3 cases only; 2 boys who had been notified by the Education Committee in 1924 as requiring institutional care were admitted to the Royal Eastern Counties Institution under Order and the relatives of an epileptic feeble-minded woman were assisted by the Council in the exercise of its permissive powers to pay for her care in the Royal Earlswood Institution.

The shortage of accommodation in certified institutions throughout the country renders it almost impossible to secure the admission of even urgent cases and at the end of the year no fewer than 7 cases which the Mental Deficiency Committee regard as urgently requiring institutional care were awaiting admission. Early in the year, at the invitation of the Board of Control, representatives of the Council attended a conference on the subject at the Board's offices with representatives of the Essex County Council and of the East Ham and West Ham County Borough Councils and subsequently also a conference with representatives of the two County Borough Councils.

In June the West Ham Council informed the Town Council that the Board of Control had provisionally approved of a site at Ockenden owned by them for the erection of a new institution and in answer to an enquiry whether the Town Council desired to enter into an arrangement for the reception of defectives from this County Borough into the proposed institution were informed that the Corporation while not prepared to join with the Town Councils of East Ham and West Ham in providing the new institution would be glad later to consider any proposals which the West Ham Council might make to them should the latter find after the new institution has been brought into use that it is in a position to offer beds to other local authorities.

During the year, the Council made representations to the

Essex County Council and to the Committee of the Royal Eastern Counties Institution that the Corporation should be allowed to join with the County Councils of Essex, Cambridge and Suffolk in the scheme then under consideration by which the County Councils would provide capital to enlarge the Royal Eastern Counties Institution but was informed that it was desired to restrict the number of authorities partaking in the scheme and that consequently the Corporation's application could not be acceded to. The Essex County Council's Mental Deficiency Committee undertook however to recommend the County Council to let to the Corporation 40 beds in the proposed new extension to the Institution for as long a period as the Board of Control will allow while the Committee of the Royal Eastern Counties Institution promised to allow the Corporation to continue to use the beds already allotted to patients from the Borough and to allot additional beds from time to time as they become vacant from the 350 or so now occupied by private patients, elected patients, and Board of Guardian's cases should they not be wanted for similar cases.

Supervision.—All defectives under supervision are visited at least once a quarter and those under statutory supervision once a month and even more frequently should such be necessary. The supervision is carried out by the Council's Health Visitors in the case of female defectives and by the Inspectors of the Health Department in the case of adult male defectives. Records are made of each visit and reports submitted at regular intervals or forthwith should there be any indication of the necessity for prompt action. During the year 547 visits were thus paid in addition to the visits paid by the Probation Officers in cases which have come under the notice of the Justices for various offences.

Five of the defectives have married since coming under notice but with two exceptions these were cases under voluntary supervision.

Of the 55 males under supervision 6 are imbeciles or idiots, 26 are of so low grade as to be unable to do any work while 23 are employed in various capacities generally in assisting relatives and only 2 or 3 can be considered to be self supporting; the occupations include labourers in the building trade (4) errand boys (2) milk carrier (1), sweep (1), billposter (1), farm labourer (1), gardeners (4), van boys (2), boot repairer (1), newspaper boy (1), pantry boy (1), cockler (1), and casual work (3).

Of the 46 females under supervision 5 are imbeciles or idiots while 16 are employed, 5 as daily maids and 11 in assisting in the house work of their homes, the remaining 25 being so feeble-minded as to be unable to do any work.

XVII. BLIND PERSONS ACT, 1920.

Register of the Blind.—The following table shews the number of blind persons on the Register at the beginning and end of the year :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
No. on Register on 1st January, 1925 ...	26	55	81
Admitted to Register during year ...	14	17	31
Removed from Register during year as no longer blind ...	—	—	—
Died during year ...	1	—	1
Left Borough during the year ...	2	4	6
No. on Register on 31st December, 1925	37	68	105

Home Visitor.—At the suggestion of the Minister of Health, the Statutory Committee decided early in the year to take over the duty of providing their own Home Teacher for the Blind in lieu of the arrangement hitherto in force under which a blind Home Teacher provided by the National Institute for the Blind acted for an extensive area of South Essex including the County Borough. After full consideration it was decided that a sighted person should be appointed to the office and, in view of the fact that the greater number of the blind in the Borough are women and that old persons who are not suitable for Home Teaching preponderate, it was considered that a woman should be appointed to the new post under the title of Home Visitor to the Blind. Miss Norah Westby who was appointed to the vacancy conditionally on her passing the Home Teachers examination of the College of Teachers of the Blind within 2 years took up duty on 1st June.

Regular visits have been made by the Home Visitor to all the blind persons on the Register, the total number of visits being 1039. The services rendered to the blind during the visits vary; sometimes she reads to the blind persons, writes their letters, or gives any other assistance needed at the moment. Where indicated, the Home Visitor gives lessons in Braille or Moon or in handcraft; 105 lessons have been given during the half year of which 81 were in embossed type, 12 in wool rug making, and 12 in chair seating. The Home Visitor has assisted 8 of the blind over 50 years of age in obtaining their Old Age Pensions, has acted as almoner to 8 persons in the distribution of weekly allowances granted by the Voluntary Care Sub-Committee out of their Voluntary Fund, and has secured the services of 11 voluntary workers who have each "adopted" a blind person; these voluntary workers read to the blind, accompany them for walks, to concerts and entertainments, and take a friendly interest in their welfare thus rendering a most valuable social service.

Approved Home Workers.—The number of approved Home Workers at the end of the year was 11, each of whom

received 5/- weekly as augmentation of wages, this sum being paid to them by the Council through the agency of the London Society for Teaching and Training the Blind, Swiss Cottage which Society pursuant to the Council's Scheme under the Blind Persons Act undertakes for the Council the supervision of approved Home Workers.

Tram Passes for the Blind.—Upon the suggestion of the Blind Persons Act Committee, the Town Council has granted free passes on the Corporation Tramways to each of 16 blind persons resident in the Borough who find it necessary to travel frequently on the tramways either to secure orders, to deliver work, or for other purposes.

Technical Training.—At the end of the year, a blind woman who had been provided with training in machine knitting at Swiss Cottage School for the Blind by the Higher Education Committee on the recommendation of the Blind Persons Act Committee completed her training and it is understood is now self-supporting. During the year one adult blind (male) was referred to the Higher Education Committee for training and at the end of the year the necessary arrangements for his securing training were in progress.

Entertainments, etc., for the Blind.—As in past years, a Sub-Committee of the Blind Persons Act Committee has arranged for various concerts, social gatherings, motor outings, &c., for the blind during the year, all of which were very much appreciated. The blind are also indebted to several private residents for the kindness shewn in entertaining them and to the Essex and Southend-on-Sea Automobile Club for providing a summer outing.

Voluntary Fund.—The Southend-on-Sea Blind Persons (Voluntary Visitors) Fund which is registered as a Charity pursuant to the Blind Persons Act continued during the year to be of great assistance to the blind. The receipts during the year amounted to no less than £536 2s. 11d. of which £410 3s. 3d. was collected by a street collection. Much of the success which has attended the establishment of the Fund is to be ascribed to the energy and interest displayed by Councillor William Osborne in organizing the street collection and concerts given in aid of the charity and his recent departure from the Borough is a great loss to the local blind.

During the year weekly allowances amounting to £382 6s. 0d. were given to 32 blind persons and grants totalling £5 7s. 7½d. were made to 6 blind persons. In addition 5/- was given at Christmas to each of 47 necessitous blind persons. The

balance sheet of the Fund for the year which was duly audited by the Borough Accountant as Honorary Auditor is as follows :—

YEAR ENDED 31st DECEMBER, 1925.

RECEIPTS.	£ s. d.	£ s. d.
Balance brought forward from 1924		246 0 10
Proceeds from Street Collection—Pansy Day	410 3 3	
Proceeds from Concert—J. Keep, Esq.	61 17 6	
Donations collected by Coun. Wm. Osborne	48 13 6	
Collection at performance of the Westcliff Mission		
Temperance Band	7 6 8	
Donation by Chamber of Trade	2 2 0	
Grant from Metropolitan and Adjacent Counties		
Association for the Blind	5 10 0	
Donation by Mr. R. Brockbank	5 0	
Donation by Mrs. Harlow	5 0	
	—————	536 2 11
		£782 3 9
		—————
PAYMENTS.	£ s. d.	£ s. d.
By Weekly allowances to Blind Persons		382 6 0
„ Grants to Blind Persons		5 7 7½
„ Grants for Christmas		11 15 0
„ Expenses of Street Collection—Pansy Day ...		55 1 9
„ Expenses of Summer Outing		8 8 6
„ Expenses of Socials		7 12 0½
„ Sundries (cheque books)		15 0
		—————
		471 5 11
„ Balances 31st December, 1925 :—		
Cash at Bank	302 13 6	
Cash in hands of Treasurer	8 4 4	
	—————	310 17 10
		£782 3 9
		—————

XVIII. APPENDICES.

Miscellaneous Tables.

Births Registered in the County Borough in 1925.

Ward.	Legitimate	Illegitimate	Total
Chalkwell	204	9	213
Westborough	176	6	182
Victoria	118	1	119
Milton	69	7	76
Prittlewell	144	8	152
Pier	132	5	137
Southchurch	272	7	279
Thorpe	103	7	110
Leigh	113	9	122
St. Clements	90	3	93
Totals	1,421	62	1,483

No. of boys registered	754	} 1,483
No. of girls registered	729	

Infants born outside the Borough to residents :—
Males 49, Females 48.

Infants born in the Borough to non-residents :—
Males 26, Females 25.

Illegitimate Infants :—

	Males.	Females.	Total.
Born in Borough to residents ...	32	30	62
Born outside Borough to residents	15	13	28
Born in Borough to non-residents	3	4	7

Notification of Births Act, 1921.

There were received during the year 1,486 notifications, 44 being of still births and 13 duplicate notifications of births in the Borough, 706 notifications being by doctors, 657 by midwives, and 4 by midwives but a doctor was in attendance, and 119 by parents or other persons; in the latter cases a medical man was in attendance at the birth in each case.

No notification was received in 41 cases, 40 of which were attended by doctors, and 1 by a midwife. Failure to comply with the requirements of the Act occurred in 2.7 per cent. of the births as compared with 2.1 per cent. in 1924. In each instance a communication was sent to the person who had failed to notify calling attention to the requirements of the Act, but as in most cases the omission was due to inadvertence or to ignorance of the law no prosecution was instituted in any of the cases. 5 cases were afterwards notified.

Deaths in Institutions in 1925.

Of the 998 deaths which were registered as having occurred in the Borough 164 or 16.4 per cent. occurred in Institutions, 95 taking place in the Victoria Hospital, 27 in the Borough Sanatorium, 37 in the various Nursing Homes, and 5 in Nazareth House.

Of the 1,152 deaths of residents in the Borough 341 or 29.5 per cent. took place in Public Institutions, either in the Borough or elsewhere, as under :—

Public Institutions in the Borough :—			
Victoria Hospital	...	...	61
Borough Sanatorium	...	...	27
Various Nursing Homes	...	...	30
Nazareth House	...	...	5 — 123
Public Institutions outside the Borough :—			
Rochford Hospital	...	...	151
Severalls Mental Hospital	...	...	11
London Hospitals	...	...	37
Provincial Hospitals	...	...	2
Other Institutions	...	...	17 — 218

Uncertified Deaths in 1925.

Of the 998 deaths in the Borough 40 were uncertified, a percentage of 4.0 as compared with 2.9 in 1924, 4.1 in 1923, 4.7 in 1922, 2.7 in 1921 and 4.9 in 1920.

Of the deaths, 4 were of infants, the deaths of whom were attributed to causes as under :—

Cause or Death.	Number	Ages at Death.
Convulsions	2	2 months, 5 hours.
Premature birth	2	30 minutes 6 hours.

The causes to which the remaining deaths were attributed were as follows :—

Disease.	No. of Deaths.	Ages at Death.
Heart Failure	8	75, 73, 70, 68, 60, 56, 55, 52
Senile Decay	8	89, 86, 81, 78, 78, 75, 73, 72
Heart Disease	4	68, 64, 48, 45
Cerebral Hæmorrhage	3	85, 64, 60
Asthma	2	64, 60
Bronchitis	2	81, 78
Syncope	2	60, 55
Apoplexy	1	71
Diabetes	1	65
Epidemic Enteritis	1	11
Gastric trouble	1	57
Influenza	1	48
Lardaceous Disease	1	59
Pulmonary Tuberculosis	1	27

Inquests.

Inquests were held by the Coroner for South East Essex as to deaths of 76 persons who died during the year in the Borough, a percentage of 7.6 on the 998 deaths.

Suicides—

Coal Gas Poisoning	...	...	...	11
Drowning	...	...	...	3
Cut Throat	...	...	...	2
Run over by train	...	...	...	2
Hanging	...	...	...	1
Jumping from window	...	...	...	1
Jumping from railway bridge	...	...	...	1 — 21

Accidents—

Run over by motor vehicle	...	...	...	5
Drowning	...	...	...	5
Fall	...	...	...	5
Injuries from motor cycle accident	...	...	...	4
Fracture of Skull	...	...	...	4
Injuries from collision	...	...	...	2
Buried in fall of earth	...	...	...	1
Crushed	...	...	...	1
Coal gas poisoning	...	...	...	1
Heart failure due to tree falling on him	...	...	...	1
Knocked down by railway engine	...	...	...	1 — 30

Natural Causes—

Heart Failure	...	...	...	6
Cerebral Hæmorrhage	...	...	...	4
Broncho Pneumonia	...	...	...	1
Coma following severe epilepsy	...	...	...	1
Heart Failure	...	...	...	1
Perforated gall bladder	...	...	...	1
Pulmonary Embolism	...	...	...	1
Tetanus	...	...	...	1
Tuberculosis	...	...	...	1
Strangulated femoral hernia	...	...	...	1 — 18

Other causes—

Asphyxia	...	...	...	3
Accidental overlaying	...	...	...	2
Inattention at birth	...	...	...	1
Traumatic pneumonia following fall	...	...	...	1 — 7

Meteorological Tables.

MAXIMUM THERMOMETER, 1925.

Month.	Mean Deg.	Highest Deg.	Date	Lowest Deg.	Date
January	47.0	55	2nd, 30th	34	12th
February	48.6	55	5rd, 8th, 10th, 28th	37	22nd
March	48.0	55	16th	38	12th
April	54.0	61	12th, 13th	46	4th
May	63.7	76	16th	51	1st
June	69.8	85	15th	55	24th
July	72.8	87	22nd	62	27th
August	75.0	80	17th, 21st	60	25th
September	62.5	68	1st 15th 18th	58	9th, 10th, 28th
October	59.0	69	3rd	47	16th
November	46.9	62	2nd	36	27th, 28th
December	45.0	54	30th	30	4th

MINIMUM THERMOMETER, 1925.

Month.	Mean Deg.	Highest Deg.	Date.	Lowest Deg.	Date
January	38.0	48	31st	27	11th
February	38.0	48	11th	31	21st, 22nd
March	36.0	45	7th	25	13th
April	40.5	46	6th, 10th, 25rd	34	4th
May	48.6	57	18th	36	2nd
June	52.0	60	16th	46	1st, 19th
July	57.4	66	22nd	50	29th
August	56.0	61	9th	50	2nd, 3rd
September	49.0	59	1st	42	5th
October	47.5	57	2nd, 4th 21st	34	14th, 15th
November	37.7	51	3rd	26	27th
December	34.3	48	30th	23	16th

RAINFALL, 1925.

Month.	Total Rainfall Inches	Quarterly Rainfall	Highest Rainfall in 24 hours Inches	Date
January	1·14	4·05	·33	1st
February	1·76		·49	25th
March	1·15		·41	1st
April	1·17	5·29	·17	2nd
May	1·65		·60	25rd
June	·47		·20	24th
July	2·15	6·95	·77	22nd
August	2·89		·91	1st
September	1·89		·65	20th
October	2·87	7·06	·98	19th
November	1·61		·41	10th
December	2·58		·55	30 th

WIND, 1925.

Month	N.	N.N.E.	N.E.	E.N.E.	E.	E.S.E.	S.E.	S.S.E.	S.	S.S.W.	S.W.	W.S.W.	W.	W.N.W.	N.W.	N.N.W.
January	1	1	...	3	3	2	4	4	2	7	17	5	5	1	5	2
February	3	1	...	...	1	...	...	5	3	12	11	8	9	1	...	2
March	2	19	2	1	2	...	...	...	...	3	6	5	12	4	4	3
April	...	2	6	1	1	3	6	4	1	7	6	11	2	4	2	1
May	...	...	...	4	3	3	2	3	9	9	18	5	1	...	2	1
June	3	3	5	4	3	6	2	...	2	...	5	3	1	2	9	9
July	7	4	3	2	3	5	1	2	5	5	8	5	1	1	3	2
August	1	2	1	2	...	3	2	1	6	6	12	4	8	5	3	2
September	4	...	...	...	...	1	5	1	5	4	7	5	11	7	5	4
October	3	4	3	2	3	1	3	3	6	4	6	4	6	...	3	3
November	4	6	12	...	2	1	...	1	5	2	4	2	5	1	7	6
December	1	...	2	1	...	5	2	1	4	1	14	8	5	6	5	5

TABLE SHOWING NUMBER OF HOURS OF SUNSHINE
IN EACH MONTH DURING THE LAST TEN YEARS.

Month	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
January	...	55.9	74.7	55.5	45.4	46.1	49.6	53.6	65.5	52.5
February	...	84.7	87.1	55.8	99.4	85.6	75.7	57.7	55.1	74.6
March	...	57.6	86.4	68.5	144.2	146.7	106.8	110.9	179.1	120.6
April	...	189.2	126.8	118.9	105.5	221.1	172.5	149.4	161.5	155.8
May	...	169.1	258.8	264.2	258.5	251.5	274.7	151.5	254.0	245.8
June	...	159.1	211.8	225.7	216.5	225.6	222.2	145.9	211.2	270.5
July	...	153.1	219.6	112.1	171.6	281.5	173.2	249.2	257.5	199.1
August	...	176.0	172.7	265.1	169.7	175.2	171.8	254.7	201.1	165.1
September	...	102.5	174.6	156.8	115.4	182.7	142.8	203.9	123.2	156.5
October	...	96.9	142.2	91.4	183.9	159.9	131.6	99.5	95.0	111.8
November	...	75.0	53.9	67.8	97.4	78.2	42.5	78.2	55.0	77.4
December	...	27.0	75.8	32.6	51.4	55.6	43.7	34.0	45.5	62.5
Totals	...	1306.1	1597.5	1565.4	1478.5	1616.5	1606.9	1588.5	1677.5	1670.0

TOTAL RAINFALL IN PAST YEARS.

1892	...	21.83 inches.	Rain fell on 141 days
1893	...	17.61 "	" " " 128 "
1894	...	24.94 "	" " " 193 "
1895	...	19.38 "	" " " 145 "
1896	...	21.74 "	" " " 141 "
1897	...	21.23 "	" " " 125 "
1898	...	15.76 "	" " " 99 "
1899	...	22.38 "	" " " 128 "
1900	...	20.51 "	" " " 143 "
1901	...	14.83 "	" " " 107 "
1902	...	18.51 "	" " " 134 "
1903	...	31.66 "	" " " 171 "
1904	...	18.76 "	" " " 130 "
1905	...	17.89 "	" " " 150 "
1906	...	23.21 "	" " " 149 "
1907	...	19.98 "	" " " 173 "
1908	...	18.69 "	" " " 130 "
1909	...	25.77 "	" " " 154 "
1910	...	22.51 "	" " " 174 "
1911	...	19.08 "	" " " 140 "
1912	...	20.23 "	" " " 176 "
1913	...	18.93 "	" " " 145 "
1914	...	18.73 "	" " " 136 "
1915	...	24.55 "	" " " 140 "
1916	...	17.65 "	" " " 155 "
1917	...	22.04 "	" " " 154 "
1918	...	21.83 "	" " " 183 "
1919	...	20.92 "	" " " 162 "
1920	...	18.83 "	" " " 160 "
1921	...	16.84 "	" " " 109 "
1922	...	19.10 "	" " " 163 "
1923	...	20.70 "	" " " 196 "
1924	...	25.07 "	" " " 194 "
1925	...	21.33 "	" " " 178 "

Ministry of Health Tables.

TABLE I.

Vital Statistics of Whole District during 1925 and previous years.

Year	Population estimated to middle of each year.		Births.		Total Deaths registered in the District		Transferable Deaths.		Net Deaths belonging to the District			
	Population estimated to middle of each year.	Uncorrected Number.	Net.	Number.	Number.	Rates.	Of Non-residents registered in the district.	Of residents not registered in the district.	Under 1 year		At all ages.	
									Number.	Rate per 1,000 Net Births.		Number.	Rates
1917	71919	1095	1129	1404	914	12.7	75	184	91	80	1025	14.2
1918	70692	887	918	11.58	888	12.5	80	177	68	74	1005	14.2
1919	87538	1248	1280	14.6	916	10.9	75	175	75	58	1018	12.1
1920	87562	1825	1858	21.2	872	9.9	79	195	97	52	986	11.2
1921	90500	1595	1644	18.1	889	9.8	69	169	94	57	986	10.8
1922	91430	1510	1532	16.7	907	9.9	84	225	79	51	1048	11.4
1923	95090	1448	1482	15.9	952	10.0	80	179	71	47	1051	11.07
1924	96450	1581	1455	14.9	973	10.0	76	221	75	52	1118	11.6
1925	98060	1485	1529	15.6	988	10.2	89	243	75	49	1152	11.7

Area of District in acres } 7,083
land and inland water }

Total Population at all ages, at Census 1921—106,010.

The figures for the estimated population are those supplied by the Registrar-General.

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

Notifiable Disease.	No. of cases notified.												Total cases notified in each Ward.								Total Cases Removed to Hospital.					
	At all ages.	Under 1 year.	1 to 2.	2 to 3.	3 to 4.	4 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 65.	65 & upwards.	Chalkwell.	Westborough.	Milton.	Victoria.	Pier.	Prittlewell.		Southchurch.	Thorpe.	Leigh.	St. Clements.	
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera, Plague	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous Group)	54	2	...	2	3	3	27	9	3	5	5	4	14	5	1	6	1	4	11	5	17	3	2	7	7	52
Erysipelas	51	...	...	...	...	...	1	2	2	5	5	2	5	...	...	...	5	5	1	...	7	2	5	3	3	1
Scarlet Fever	156	...	...	4	11	11	69	28	17	11	11	5	2	...	...	39	20	19	17	13	11	10	17	4	4	105
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fevers:—	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhoid	9	...	...	...	...	...	...	1	5	4	...	1	...	...	...	1	...	...	5	1	...	1	...	1	...	9
Paratyphoid	25	...	...	...	...	...	4	7	6	5	3	...	...	...	...	1	...	1	5	7	9	2	...	...	...	25
Relapsing Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Continued Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever	5	...	...	...	...	...	...	...	...	4	1	...	...	...	...	...	1	...	2	...	1	...	...	...	...	5
Cerebrospinal Meningitis	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Poliomyelitis	2	...	...	...	...	...	1	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	1	...	...
Ophthalmia Neonatorum	45	45	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	5	6	8	16	7	1	...	...	5
Pneumonia	243	17	11	15	8	7	28	15	15	26	58	47	20	20	1	58	25	25	45	21	29	10	22	9	...	...
Trench Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Malaria	2	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	1	...	...	...	1	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	2	...	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1	...	...	...	...
Acute Polio Encephalitis	...	...	...	...	...	...	4	4	19	81	46	50	4	...	...	21	16	15	25	13	52	11	51	14	66	
Pulmonary Tuberculosis	189	...	...	...	...	...	12	9	5	5	5	4	1	...	...	8	5	5	5	6	10	2	6	4	7	
Other forms of Tuberculosis	51	5	5	3	1	2	12	9	5	5	5	4	1	...	...	8	5	5	5	6	10	2	6	4	7	
TOTALS	814	67	16	24	24	25	148	75	68	145	98	100	28	28	47	117	75	72	121	74	155	49	85	45	271	

TABLE III.

Causes of and Ages at Death during the year, 1925.

CAUSES OF DEATH.	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the district.									
	All ages	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65-75	75 and Upwards
All causes { Certified Uncertified	1112 40	71 4	11 —	17 —	23 1	36 —	166 1	299 16	217 8	272 10
Enteric Fever	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—
Measles	1	1	—	—	—	—	—	—	—	—
Scarlet Fever	2	—	—	—	1	—	—	1	—	—
Whooping Cough	9	4	1	3	—	—	—	—	—	1
Diphtheria	—	—	—	—	—	—	—	—	—	—
Influenza	51	—	1	—	—	1	9	9	5	6
Encephalitis Lethargica	5	—	—	—	—	—	5	—	—	—
Meningococcal meningitis	—	—	—	—	—	—	—	—	—	—
Tuberculosis of respiratory system ...	85	—	—	1	1	11	52	17	1	—
Other Tuberculous Diseases	20	2	4	2	3	1	4	3	—	1
Cancer, malignant disease	191	—	1	1	—	1	21	78	59	30
Rheumatic Fever	3	—	—	—	2	—	—	1	—	—
Diabetes	23	—	—	—	—	—	—	8	12	3
Cerebral Hæmorrhage, etc,	82	—	—	—	—	—	3	26	27	26
Heart Disease	179	—	—	—	5	3	12	48	46	67
Arterio-sclerosis	53	—	—	—	—	—	1	10	7	15
Bronchitis	62	2	—	—	—	—	—	10	9	41
Pneumonia (all forms)	64	11	4	4	1	—	9	19	11	5
Other respiratory diseases	15	—	—	1	—	1	1	3	3	4
Ulcer of stomach or duodenum	6	—	—	—	—	—	1	4	—	1
Diarrhœa, etc. (under 2 years)	11	6	—	—	1	—	—	—	1	3
Appendicitis and Typhlitis	12	1	—	1	1	2	1	4	2	—
Cirrhosis of Liver	8	—	—	—	—	—	1	6	1	—
Acute and chronic Nephritis	53	—	—	—	—	3	3	11	7	9
Puerperal Sepsis	4	—	—	—	—	1	3	—	—	—
Other accidents and diseases of pregnancy and parturition ...	3	—	—	—	—	—	3	—	—	—
Congenital debility and malformation, premature birth ...	30	30	—	—	—	—	—	—	—	—
Suicide	20	—	—	—	—	1	9	9	1	—
Other deaths from violence	27	3	—	2	5	4	4	4	1	4
Other defined diseases	190	15	—	2	6	7	24	39	31	66
Causes ill-defined or unknown	7	—	—	—	—	—	1	5	1	—
TOTALS	1152	75	11	17	24	36	167	315	225	282

TABLE IV.

Nett Deaths from Stated Causes at various Ages under
One year of Age.

CAUSES OF DEATH.	Under 1 Week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 months	3-6 months	6-9 months	9-12 months	Total Deaths under 1 year
All causes { Certified	21	6	4	...	34	16	9	11	4	71
{ Uncertified	3	...	...	...	...	1	...	...	...	4
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...
Chicken-pox ... ..	...	...	...	...	...	...	...	...	...	...
Measles ... ..	...	...	...	...	...	1	...	...	...	1
German Measles ... ..	...	...	...	...	...	...	...	...	1	1
Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...
Whooping Cough ... ..	...	...	...	...	...	1	...	1	2	4
Diphtheria and Croup ... ..	...	...	...	...	...	...	...	...	...	...
Influenza ... ..	...	...	...	...	...	...	...	...	...	...
Erysipelas ... ..	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis ... ..	...	...	...	...	...	...	...	2	...	2
Abdominal Tuberculosis ... ..	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases ... ..	...	...	...	...	...	...	...	...	...	...
Meningitis (Not Tuberculous) ... ..	...	...	...	...	...	...	...	...	...	...
Convulsions	2	1	...	...	3	1	...	...	...	4
Laryngitis ... ..	...	...	...	...	...	...	...	...	...	...
Bronchitis ... ..	...	...	...	...	...	1	...	1	...	2
Pneumonia (all forms) ... ..	...	...	...	...	...	5	4	2	...	11
Diarrhœa and Enteritis ... ..	...	1	...	...	1	...	1	3	1	6
Gastritis ... ..	...	...	...	...	...	1	...	...	...	1
Syphilis ... ..	...	...	...	...	...	1	1	...	...	2
Rickets ... ..	...	...	...	...	...	...	...	...	...	...
Suffocation Overlaying Inattention at Birth	1	...	...	...	1	...	...	...	...	1
Atelectasis	1	...	...	...	1	...	...	...	...	1
Congenital Malformation	1	1	1	...	3	3	...	...	...	6
Premature Birth	12	2	2	...	16	1	...	...	...	17
Atrophy, Debility and Maramus	3	...	1	...	4	2	2	...	...	8
Other causes	4	...	...	...	4	...	1	2	...	7
TOTALS	24	6	4	...	34	17	9	11	4	75

Nett Births in the Year	{ Legitimate	...	...	...	1446
	{ Illegitimate	...	..	...	83
Nett Deaths in the Year	{ Legitimate	...	...	...	59
	{ Illegitimate	...	...	...	16

BIRTH RATE, DEATH RATE AND ANALYSIS OF MORTALITY DURING THE YEAR 1925.

	Birthrate per 1,000 Total Population	Annual Death Rate per 1000 Population										Rate per 1000 Births		Percentage of Total Deaths		
		All Causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under one year	Death certified by Medical Practitioners	Inquest Cases	Uncertified Causes of Death	
England and Wales	18.5	12.2	0.01	0.00	0.15	0.05	0.15	0.07	0.52	0.47	8.4	75	92.1	6.9	1.0	
105 County Boroughs & Great Towns, including London ...	18.8	12.2	0.01	0.00	0.17	0.05	0.09	0.50	0.45	10.8	79	79	92.1	7.5	0.6	
155 Smaller Towns (1921 ad- justed Populations 20,000— 50,000)	18.3	11.2	0.01	0.00	0.15	0.02	0.06	0.51	0.38	7.6	74	74	95.0	5.9	1.1	
London	18.0	11.7	0.01	0.00	0.08	0.02	0.11	0.25	0.46	10.6	67	67	91.1	8.9	0.0	
Southend-on-Sea	15.6	11.7	0.00	0.00	0.01	0.02	0.00	0.51	0.48	5.9	49	49	89.9	6.6	3.5	



SOUTHEND-ON-SEA EDUCATION COMMITTEE.

ANNUAL REPORT
OF THE
SCHOOL MEDICAL OFFICER
FOR THE YEAR
1925.

CHILDREN'S CARE SUB-COMMITTEE OF THE EDUCATION COMMITTEE.

Which controls the School Medical Service.

November 1925 — October 1926.

Mr. F. W. SQUIER, (*Chairman*).

Mr. Coun. BOCKETT.	Mr. H. LEWIS.
Mr. Coun. F. S. DUNNETT.	Mr. Coun. TAYLOR.
Mr. Coun. S. F. JOHNSON, J.P.	Mrs. Coun. HAWKEN, J.P.
Mrs. BARRIE.	Miss REAY, J.P.
Miss BILL.	Mr. MARA.
Mr. CALVERT.	Mrs. PAGE.
Mr. ENEVER.	Mr. PUDDICOMBE.
Mr. TREBY.	Mr. SAUNDERS.
Miss CAMPBELL.	Mrs. SQUIER.
Miss A. DELF, B.A.	Mrs. STEER.
Miss DUTTON.	Mr. STONE.
Mr. JAY.	Mrs. WILLIAMS.

The following report is drawn up on lines required by the Board of Education.

1. Staff of the School Medical Service.

(a) Whole Time Officers—

School Medical Officer—

Charles Grant Pugh, M.D. (Lond.), B.Sc. (Lond.),
D.P.H. (Camb.), (also Medical Officer of
Health).

Assistant School Medical Officers—

Frank Ernest Ingall, F.R.C.S. (Eng.), D.P.H.
(Lond.).

Marjorie Hamilton King, M.B., B.Ch., D.P.H.
(Edin.).

Dentist—

Basil Crisp, L.D.S. (Eng.).

Health Visitors who also act as School Nurses—

Miss M. Taylor.

Miss G. Hedger.

Miss N. Hitchcock.

Miss E. Prophett.

Miss M. A. Lambert.

Miss K. M. Burnett.

Miss V. Crump.

Miss M. Butcher.

Clinic Nurse—

Miss J. MacLaurin.

Clerks—

Miss M. Adams.

Miss D. Hunnings.

Miss D. Allsop.

(b) Part-time Officers.

Ophthalmic Surgeon—

Dr. D. D. Evans, M.B., B.Ch., M.R.C.S. (Eng.),
L.R.C.P. (Lond.), D.O.M.S.

Surgeons on Panel for Operative Treatment of
Adenoids—

Mr. Sydney Bridger, M.R.C.S., L.R.C.P.

Mr. J. Grosvenor Hinks, M.B.

Mr. J. C. Smellie, M.B.

Mr. H. Cleveland Smith, M.R.C.S., L.R.C.P.

Superintendent of Remedial Treatment Centre—

Mrs. G. Scholefield, Member of Chartered Society
of Massage and Medical Gymnastics.

II. Co-ordination.

(a) *Infant and Child Welfare.* The administration of the Maternity and Child Welfare Scheme of the Council by the School Medical Officer who is also Medical Officer of Health ensures the close co-operation of the two services and the arrangement by which the Health Visitors carry out the visiting of infants and young children and also act as school nurses for the schools

attended by children from their areas continues to work most satisfactorily, and to serve as a further link between the school medical service and the other activities of the Public Health Department.

The Infant Centres are attended by the Health Visitors who are thus in touch with the children from birth till they cease to attend school; this arrangement is obviously to the advantage of the weakly and ailing and of those who on account of congenital or acquired defect require special care and attention.

(b) *Nursery Schools.* There are no nursery schools in the Borough.

(c) *Care of debilitated children under school age.* These continue to be inspected at the Infant Centres, the aim being to secure that they are medically inspected once every three months during their first year, once every six months during their second year, and once a year after this until they reach school age.

III. School Hygiene.

The schools generally are of modern design and construction, the ventilation and lighting and on the whole the heating being satisfactory; in two schools where the heating was found to be inefficient, alterations have been made with very good results and the heating systems of some other schools are receiving attention with the object of increasing their efficiency. The sanitary arrangements are of modern type and adequate, and are inspected regularly and maintained in good working order.

The central schools which are at present held in halls attached to churches fall behind modern ideals as regards convenience, lighting, etc.

IV. Medical Inspection.

The routine medical inspection is carried out on the school premises with the exception of Southchurch National Schools, in which case the inspections are held in The Barn in close proximity to the schools.

(a) *Age groups of children inspected.* The age groups and the number of each group inspected during 1925 were as follows.

Entrants, 1,936, mainly children of five or six years of age.
Intermediates, 873 children aged eight and under nine years.

Leavers, 524 children aged twelve or over who had not been routinely inspected since reaching the age of twelve.

(b) *Schedule Card.* The Board's Schedule of medical inspection is strictly adhered to.

(c) *Early ascertainment of crippling defects.* The Head Teacher is invited to present for examination during the Routine

Inspections any child thought to be suffering from any defect or illness. At other times the Head Teacher refers such children to the School Medical Officer, who arranges for their examination at home, at school, or at the School Clinic, as may be indicated.

(d) *Disturbance of school arrangements.* This is avoided as far as possible, the dates of inspection being arranged to suit the convenience of the Head Teacher.

The only real disturbance which takes place is at those few schools at which no separate room is available for the examination, and this, in consequence, has to take place in a classroom, the class being temporarily accommodated elsewhere.

(e) *Inspection Clinic.* The Clinic was held at 2 p.m. on each weekday, excepting Saturday, throughout the year at the Southend Clinic, and at 5 p.m. at the Leigh Municipal Offices each Tuesday during school terms. The total number of individual children who attended at one or other clinic was 2,868, the total number of attendances made by them being 6,968 as follows.

Number of Diseases for which Attendances were made.	No. of Children.	Number of Attendances.
One	2,175	4,002
Two	490	1,783
Three	150	824
Four	47	300
Five	6	59
	—	—
	2,868	6,968
	—	—

V. Findings of Medical Inspections.

(a) *Uncleanliness.* Four children out of a total of 3,377 examined at the routine medical inspections were found to have verminous hair or hair so extremely nitty, as to render exclusion necessary. During the year the School Nurses spent 183 sessions in carrying out hair and scalp examinations in the schools; at these sessions they examined 33,914 children and found it necessary to exclude 391 whose hair was either verminous or very nitty; of this number 39 children were excluded on more than one occasion.

The loss of attendance due to exclusion from school owing to conditions of uncleanliness is decreasing in amount and during 1925 it was not necessary to take legal proceedings under the school attendance Bye-Laws in any case on this account.

(b) *Minor Ailments and (e) Skin Diseases.* Impetigo continues to cause a very unnecessary loss of attendance, and though it is satisfactory to note that the number of cases in 1925 shows a decrease on that of the preceding year, the disease remains much more prevalent than would be the case were greater attention paid to cleanliness of the hands and finger nails and to the avoidance of causes of irritation leading to scratching, chief among these being a verminous condition of the scalp.

There were 298 cases of the disease, 15 of which were found at routine inspections and the remainder among children attending the School Clinic.

Scabies has increased slightly during the last two years and 38 cases came under observation this year, 8 being found at routine medical inspections and 30 attending the clinic.

(c) *Tonsils and Adenoids.* The number of children suffering from enlarged tonsils and adenoids for which operative treatment was advised was 256 of whom 175 received appropriate treatment. In addition 433 children were found to be suffering from similar conditions to an extent not justifying operation, and were referred for observation, advice as to the necessity of breathing exercises, etc., being given to the parents.

(d) *Tuberculosis.* Definite Pulmonary Tuberculosis was found in three children on routine inspection and in two at the clinic and signs leading to a suspicion of this disease were found in one child at school and in six at the clinic. All definite or suspected cases are referred to the Tuberculosis Dispensary for treatment or observation.

(f) *External Eye Disease.* Twenty eight cases of Blepharitis occurred, twenty being found at routine inspections and eight at the School Clinic. Two cases of conjunctivitis were met with at routine and twenty seven at special inspections. Five cases of Keratitis were seen at the Clinic and one of corneal opacity at school.

(g) *Defective Vision and Squint.* Vision was found to be defective in 97 children at routine inspections and in 484 at special examinations, and squint was present in 28 cases seen at School and in 14 who attended the clinic.

(h) *Ear Disease.* Eighty nine children were found to be suffering from ear discharge, which in the majority of cases was associated with unhealthy conditions of the nose and throat among which enlarged tonsils and adenoids as usual predominated

(i) *Dental Defects.* There were 142 children urgently needing dental treatment among those routinely examined and a further 50 attended the Inspection Clinic on account of toothache or alveolar abscesses resulting from dental caries.

Many of these had ignored previous invitations to attend the dental clinic for treatment, a very natural attempt to avoid pain and discomfort on the part of children when parents have not grasped the importance to health and comfort of a sound and clean set of teeth. The number of parents who regard dental caries as of little or no importance is a steadily diminishing one, and the altered attitude is reflected in the greater number of children found to have clean and healthy mouths.

VI. Infectious Diseases.

Any absence known or suspected to be due to Infectious Disease is notified to the School Medical Officer by the Head

Teacher or the School Attendance Officer, each case being then visited by a Health Visitor, or if necessary by a Medical Officer and dealt with in the manner appropriate to the existing condition. During the Spring, German Measles caused a good many exclusions and later in the year Chicken Pox was prevalent among the infants at the Eastern end of the town, but the more serious infectious diseases caused very little trouble during 1925.

VII Following Up and Work of Nurses.

During the year 5735 visits were made to the homes of children suffering from various defects as follows:—

	No. of Children.	No. of Visits.
Enlarged Tonsils, Adenoids or Mouth-breathing	734	1,181
Squint or Defective Vision	337	660
Deformities	23	60
Verminous conditions	408	564
Infectious Diseases	860	1,907
Contagious Skin Disease (Impetigo, Scabies, Ringworm)	152	412
Mulnutrition, Neglect, etc.	13	24
Defective Teeth	226	274
Tuberculosis	103	288
Other conditions, <i>e.g.</i> , Blepharitis, Bronchitis, Otorrhœa, etc.	202	365
Totals	3,058	5,735

The Nurses attend the Routine Medical and Dental Inspections and the Dental Clinic and follow up children in cases where this is considered necessary. They also carry out routine skin, scalp and hair examinations for the results of which see Section V. The School Clinic Nurse devotes her whole time to the treatment of minor ailments and to attendance at the Inspection Clinics.

VIII. Medical Treatment.

(a) *Minor Ailments and (d) Skin Disease.* The following table shows the work carried out at the Minor Ailment Treatment Clinic during the year:—

	Disease.	No. of Patients.	No. of attendances.
Uncleanliness	Verminous Scalp	19	37
	Nitty Hair	230	322
Skin Diseases.	Impetigo	168	979
	Scabies	4	12
	Eczema	4	15
	Ringworm of Scalp	17	659
	Ringworm of Body	5	94
	Boils	26	103
	Chilblains	3	35

Eye	Blepharitis	...	...	1	2
Diseases.	Conjunctivitis	...	...	6	49
Ear	Wax in ear	...	...	3	14
Diseases.	Ear Discharge	...	...	15	97
	Abscesses	...	...	7	45
	Minor Injuries	...	...	47	375
	Miscellaneous	...	...	214	1,198
				769	4,036
				—	—

Scalp Ringworm. Facilities for treatment of this disease by Xrays are now provided at The Queens Hospital for Children, Hackney Road, London, E.2. the fee payable for each case being one guinea. In necessitous cases this fee together with the necessary railway fares are paid by the Education Committee either wholly or in part; this course was adopted in five of the 11 cases dealt with during the year.

This treatment has materially reduced the number of attendances at the minor ailment treatment department of the school clinic 17 cases making 659 attendances an average of 38.7 visits per case whereas during 1924, 21 cases made 1494 attendances or an average of 71 visits per case.

It has also had the beneficial effect of very materially shortening the periods of exclusion from school for this disease, the long periods which are sometimes necessary with other forms of treatment having an extremely bad effect on the education and discipline of certain types of children.

The following table shows the number of cases which came under observation :—

			Cases excluded in 1924 or earlier.	New cases in 1925.
Cured during 1925	...	...	8	5
Left Town	...	...	1	2
Still excluded at end of year	...	...	2	7

Verminous Hair. The cleansing of verminous and nitty hair is in many instances carried out at home; in other cases it is done at the Clinic under the supervision of the Clinic Nurse, the actual work in the great majority of cases being done by the relatives of the children. It is possible by the use of suitable metal combs to de-nit a head completely in about half an hour and during the year 249 children had their hair cleansed in this way at the Clinic.

An increasing number of parents are purchasing these combs for home use a fact which must tend to diminish the number of verminous and nitty heads found in the schools.

Impetigo, Scabies, etc. Impetigo heads the list as a cause of attendances at the minor ailment treatment centre, 168 children making 975 attendances, this being a slight decrease on the pre-

vious year. Four cases of Scabies were treated at the Clinic making 12 attendances and 26 children suffering from boils made 103 attendances.

(b) *Tonsils and Adenoids.* The number of children who received operative treatment for enlarged tonsils and adenoids under the scheme of the Education Committee during 1925 was 169 this being a very considerable increase on the numbers for each of the two preceding years. The arrangements for carrying out this treatment remain unchanged. The contributions payable by the relatives of the patients according to the scale fixed by the Committee were as follows:—

To pay £1 11s. 6d. (full cost)	...	55 cases
To pay £1 10s. 0d.	...	2 cases
To pay £1 7s. 6d.	...	1 case
To pay £1 3s. 0d.	...	1 case
To pay £1 1s. 0d.	...	3 cases
To pay £1 0s. 0d.	...	2 cases
To pay between 15/- and £1.	...	8 cases
To pay between 10/- and 15/-	...	7 cases
To pay between 7/6 and 10/-	...	7 cases
To pay between 5/- and 7/6	...	15 cases
To pay between 2/6 and 5/-	...	6 cases
To pay 2/-	...	1 case
To receive free treatment	...	61 cases

Although the number of cases operated upon is considerably in excess of those in each of the last two years the same care has been exercised in the selection of cases for which this treatment has been recommended, and, as heretofore, no case has been proposed for operation before a course of medicinal treatment and breathing exercises has been tried without success.

The want of success attendant upon the treatment by breathing exercises and medical measures in so many cases is largely attributable to laxity and want of perseverance on the part of parents; the child, naturally not realizing the dangers of the conditions, takes very little interest in the rather irksome measures necessary for its cure, and regards them as a nuisance and as something to be shirked on every possible occasion, an attitude only to be overcome by methodical and unremitting attention on the part of those having charge of the sufferer from this ailment.

(c) *Tuberculosis.* Children suffering from this disease are referred to the Tuberculosis Dispensary for observation and treatment.

(e) and (f) *External Eye Diseases and Vision.* Sessions of the Eye Clinic are held on Tuesday and Friday afternoons, the number of sessions held during the year being 95 at which 1861 attendances were made by children. The above attendances were made by 389 children who had attended in previous years and who required examination and by 359 new cases. The following report has been submitted by the Committees' Ophthalmic Surgeon.

Retinoscopies have been carried out in the case of 658 children of whom 571 were elementary school children, 73 secondary school children and 14 young children referred from the Infant Centres. The errors of refraction found were as follows :—

Defect.	Number of cases.
Myopia—uncomplicated	97
with squint	1
with trachoma	1
with Nystagmus	1 — 100
Simple Myopic Astigmatism	15
Compound Myopic Astigmatism	73
with squint	5
with Nystagmus	1 — 79
Hypermetropia	56
with squint	37 — 93
Simple Hypermetropic Astigmatism	116
with squint	7
with phlyctenular keratitis	1
with choroiditis	1 — 125
Compound Hypermetropic Astigmatism	113
with squint	48
with Nystagmus	1
with staphyloma of cornea	1 — 163
Mixed Astigmatism	29
with squint	4
with albinism	1
with choroiditis	1 — 35
Anisometropia	10
with squint	1 — 11
No error of refraction	37

The routine previously adopted has been continued, the visual acuity of each eye being ascertained on first visit, together with the nature of the symptoms. If a refraction is considered necessary, 0.5% atropine ointment is supplied for instillation by the parents night and morning on 3 days before the second visit when a retinoscopy is done following which a prescription for glasses to correct the defect is given to the parents. The child is again examined after the spectacles prescribed have been obtained in order to ensure that they are accurately centred, correctly fitted and in accordance with the prescription.

Children with severe defects attend for re-examination from time to time as advised and those with severe or progressive myopia are kept under very constant supervision, meanwhile being provided with special desks at school and their curriculum modified so as to avoid any close work.

It is the practice to correct even slight errors of refraction when the symptoms are in any way severe notwithstanding that the actual vision in each eye may be perfectly normal as the

occurrence of constant headaches during and after school hours not only makes work uncongenial but is detrimental to the general health.

Apart from the conditions referred to above, the following diseases or defects of the eye also came under notice :—

Defect.	Number of cases.
Phlyctenular Conjunctivitis	13
Phlyctenular Keratitis	8
Keratitis	1
Coloboma iris	1
Paralysis Supr. oblique	1
Dermoid of ext. canthus	1
Congenital cataract	1
Hæmorrhagic cyst of conjunctiva	1
Traumatic ulcer of cornea	1
Perforating injury of eye	1

Provision of Spectacles. The arrangement by which these are supplied by a wholesale London firm, the fitting being carried out under the supervision of the Medical Officers at the Inspection Clinic still continues, and is found to work satisfactorily. During the year 363 pairs of spectacles were supplied at a cost of £123 12s. 9d. and 178 pairs repaired or had the lenses changed as found necessary on re-examination at a cost of £10 2s. 10d. Besides the above 28 pairs of spectacles were provided and two pairs were repaired by the Education Committee free of charge at a cost of £7 8s. 6d. for children whose parents were considered by the Children's Care Sub-Committee to be unable to bear the expense involved.

(g) *Ear Disease and Hearing.* As in previous years the majority of cases of ear discharge have been treated at home under the direction of the Medical Officers. Where necessary home visits have been made by nurses in order to instruct the parents in the practical details of the treatment required. Fifteen cases in which home treatment was impossible or inefficient were treated at the Minor Ailment Clinic making 97 attendances for this purpose.

(h) *Dental Defects.* The scheme for dental inspection and dental treatment remains unaltered, each elementary school being visited once yearly and all children in attendance being inspected by the dentist. As will be seen in the tables in the appendix, no fewer than 9,392 children were thus inspected during 1925 of whom 3392 were found to require treatment. Those actually treated at the Dental Clinic numbered 1894 or 56 per cent of those found at routine inspection to require treatment. In addition 517 attended for treatment as urgent cases on account of toothache or alveolar abscess.

The percentage of children found on routine inspection to require treatment who actually obtained such treatment, viz. 56 compares with 50 in 1924 which is gratifying evidence that the efforts of the Head Teachers and Health Visitors to educate the parents in the importance of dental treatment is slowly bearing fruit. The proportion of children who obtain dental treatment as a

result of dental inspection differs considerably not only in the various schools but also in the several departments of the same school and it is obvious that the percentage is largely dependant upon the attitude of the Head Teachers to the dental scheme. The majority of the Head Teachers are most energetic in urging the children and their parents to accept dental treatment where such is considered necessary by the dentist. In a few departments however the dentist reports that no such enthusiasm is shown by the teaching staff and it is not surprising that in these departments the efforts of the Dentist and Health Visitors meet with a comparatively poor response.

Very little trouble is experienced in dealing with the children while undergoing treatment and on the whole they behave splendidly. Treatment is carried out as painlessly as possible, anæsthetics either local or general being used in almost every case. Fillings are treated in a like manner, regional anæsthesia being applied when the cavities are deep or hyper-sensitive. Parents are allowed in the surgery during the treatment should they so desire.

The dentist has undertaken in suitable instances the treatment of "regulation" cases and some exceedingly good results have been obtained. Only the most persevering patients are dealt with as without the co-operation of the child and the parents the labour involved would be fruitless.

In the near future it will be necessary to consider the advisability of appointing an additional dentist as it is becoming difficult to cope with the increasing demands on the present staff.

(i) *Crippling Defects and Orthopædics.* The Remedial Treatment Centre in the temporary building in the playground of Hamlet Court Road School has been carried on during the year, sessions being held twice a week during the school terms.

The treatment consists in active and passive exercises, massage, etc., directed to the cure or amelioration of such conditions as curvatures of the spine, flat feet, weak ankles, etc. The work is carried out under the direction of Mrs. G. Scholefield, Member of the Chartered Society of Massage and Medical Gymnastics, who has submitted the following report on the work during the year:—

The Remedial Treatment Centre was open on Tuesday and Thursday afternoons during the school terms, the number of sessions held during 1925 being 87; at these sessions 509 attendances were made by children for the treatment of the following deformities:—

Incipient Scoliosis.
Severe Scoliosis.
Kypho-lordosis.
Flat-foot.

During the year two children were discharged cured, and four ceased to attend owing to having left school.

Satisfactory results have been obtained in all incipient cases of spinal curvature, though owing to the nature of the defect treatment must necessarily be prolonged and should preferably continue through practically the whole of the period of growth in order to ensure that there is no return of deformity.

Each child is instructed in exercises specially adapted to correct the existing defects and in cases where this is necessary simple apparatus is devised to help the child to carry out the exercises at home each day, without which much of the advantage gained by attending the centre must be lost.

G. SCHOLEFIELD.

The Education Committee has made provision in the estimates for the establishment of an orthopedic clinic but the matter is temporarily in abeyance pending the appointment of an Orthopedic Surgeon at the Southend Victoria Hospital.

IX. Open-air Education.

At present there is no open air school in the Borough. The Education Committee, however, has provisionally set aside a site with an area of $2\frac{3}{4}$ acres situate on the north of Fairfax Drive for this purpose and plans for the erection of the school will in due course be proposed.

In the meantime classes are held in the playgrounds as far as weather and other circumstances allow.

X. Physical Training.

There is no Organiser of Physical Training, this work now being supervised directly by the Director of Education who has kindly supplied the following note:—

In addition to the public parks, the following playing fields have been available:—

(a) *For Elementary School scholars.*

The Jones Memorial Recreation Grounds of 15 acres; and the Fairfax Drive School Site of 17 acres.

During the past year the four acres of additional land, presented by the late Mr. R. A. Jones in connection with the Jones Memorial Recreation Ground, has been laid out and two additional football pitches and a cricket "table" have been provided.

In addition to the usual series of league football games in which every Elementary School takes part, arrangements have been made for inter-school cricket matches to be played with a view to promoting cricket amongst the children attending the local Elementary Schools.

To ensure satisfactory supervision of the Ground, the Education Committee have erected a house for the Groundsman on an adjacent site kindly presented by Mr. R. A. Jones in 1924.

The following statistics show that a large number of elementary school children participated in the Annual Athletic School Sports held on the Jones Memorial Recreation Ground in 1925.

Selected entries	...	...	...	1,378
Competitors	...	...	...	1,037

The following statistics show the attendances at the Open Air Swimming Baths by organised parties of school children in 1925 :—

No. of children using the Open Air Swimming Bath	9,676
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(b) *For Secondary School pupils.*

Large playing fields are available at each Secondary School.

XI. Provision of Meals.

Meals are provided by the Committee in necessitous cases the arrangements being made by the Organiser of Meals under the supervision of the Director of Education. The children attend for their meals at catering establishments as near their schools as possible and the meals provided have been satisfactory both in quantity and quality. The children to receive free meals are selected by the District Care Committees on the recommendation of the Head Teachers and Attendance Officers who by their knowledge of the individuals and their homes are in a position to form a reliable opinion as to the need of such provision in each case. Each child is kept under medical observation and records made as to their weight and nutrition at regular intervals.

The following table supplied by the Director of Education shows the number of children who received meals and the number of meals provided during the year, together with the cost of these :—

	1925.	1924.	1923.
No. of children provided with meals	173	149	150
No. of meals—Dinners	5,617	5,117	6,756
Teas	1,995	2,052	2,856
Total cost of meals provided	£190	£216	£233

In addition 12 children were supplied with milk and 72 children were supplied with Cod Liver Oil and Malt at a cost of £18.

A Voluntary fund is used to supply sick children excluded from school with meals, milk, cod liver oil and malt and with boots, etc., in necessitous cases.

XII. School Baths.

There are no school baths. The older children receive instruction in swimming at the public baths during summer months.

XIII. Co-operation of Parents.

The arrangements for ensuring the attendance of parents at the Routine Medical Inspections remain unchanged and the proportion of parents who responded to the invitations sent asking them to be present is shown in the following table :—

	Percentage of parents present.
Entrants	81.5
Intermediates	70.4
Leavers	54.5

XIV. Co-operation of Teachers.

The Teachers render most valuable aid in bringing forward as "Specials" at the Routine Medical Inspection children thought to be ailing or suffering from defects, or by referring them to the Inspection Clinic and also by notifying the School Medical Officer of any children absent on account of illness and not under medical supervision at home.

XV. Co-operation of School Attendance Officers.

The School Attendance Officers are in constant and close touch with the Medical Officers and the School Nurses, they receive notice of all exclusions from school and re-admissions thereto and examine the records of the Inspection Clinic daily. At intervals of a week they submit to the School Medical Officer all medical certificates given by private practitioners relative to the absence of children from school.

They bring to the notice of the Medical Officers any child absent for suspected infectious disease and arrange for the regular attendance at the Inspection Clinic of non-infectious absentees who are not receiving medical treatment, thus forming a very important link in the machinery for ensuring the adequate care of the school child.

In addition they also collect from parents the contributions fixed by the Committee as payable for the operative treatment of enlarged tonsils and adenoids and for the provision of spectacles.

XVI. Co-operation of Voluntary Bodies.

The Children's Care Sub-Committee through its Voluntary Funds provides Oil and Malt, Virol, Milk, &c., in necessitous cases where these are reported by the Medical Officers to be needed.

The Civic Guild of Help undertakes all enquiries for the Education Committee into the ability of parents to contribute to the cost of operative treatment and of Xray treatment, or the supply of surgical appliances or spectacles for their children.

The Guild also, where necessary, helps to secure the admission of children to Hospitals, Convalescent or Holiday Homes in many cases providing travelling expenses and necessary clothing, &c.

XVII. Blind, Deaf, Defective and Epileptic Children.

(a) *Ascertainment.* These children are detected at Routine Medical Inspections being presented either as "routines" or as "specials" by the Head Teachers. Children not at school are notified by the School Attendance Officers and attend at the School Clinic for examination as specials by the School Medical Officer or in the case of "blind" children by the Committee's Ophthalmic Surgeon.

(b) *Blind and Deaf Children.* Reports on children found to be too deaf to be taught in a class of hearing children or too blind to be able to read ordinary school books are submitted to the Committee which then makes arrangements for their reception into suitable residential schools.

There is only one blind child resident in the Borough, a girl of 14 who had both eyes removed in early infancy; she was sent to a residential school for the blind but only stayed a few months as her parents preferred her to remain at home under private tuition; the arrangements made for her home tuition came to an end in November and the Education Committee at the end of the year were about to institute legal proceedings against the parents to compel them to provide her with suitable education. There are 11 partially blind children (4 boys and 7 girls) in the Borough; these suffer from severe or progressive myopia, are under continuous supervision by the Committee's Ophthalmic Surgeon, and are provided with special desks at the ordinary elementary schools, their curriculum being modified so as not to entail any close work.

There are 13 children too deaf to be taught in a class of hearing children; of these 11 are in attendance at a residential school for the deaf at Margate and two are provided with education in a private residential school for the deaf. There are also five children in attendance at public elementary schools who are partially deaf and who have to receive on that account special attention from their class teachers.

(c) *Epileptic.* Three children, one boy and two girls, who suffer from severe epilepsy are being educated at the Lingfield School for epileptics. Three boys suffer from frequent severe fits and are not considered fit to be sent to a residential school. One boy and one girl occasionally have a fit at school and have consequently to be classed as having severe epilepsy; they however are frequently free from fits for many months at a time and are consequently allowed to continue to attend ordinary elementary schools. In addition, 23 children (11 boys and 12 girls) suffer from mild epilepsy, the fits being relatively infrequent and not occurring at school.

(d) *Feeble-minded.* Of 47 children attending certified schools for the feeble-minded, 26 boys and 17 girls are in attendance at the Southend Day Special School and one boy and three girls are residents in certified residential Special Schools. Ten

feeble-minded children (6 boys and 4 girls) are in attendance at private schools while 29 (17 boys and 12 girls) are on the roll of public elementary schools being placed in backward classes and receiving as much individual attention as possible. Nine children (six boys and three girls) are not receiving any education, the majority being children under 7. All feeble-minded children including those not in attendance at the Special School are under the supervision of the Health Visitors.

(e) *The Southend Special School.* The Southend-on-Sea Special School for the education of the feeble-minded is housed in most unsuitable premises as has been recorded in previous reports and as soon as provision is made for other children requiring special instruction it is the intention of the Education Committee to provide new premises on a more suitable site.

During the year the Education Committee notified to the Mental Deficiency Committee pursuant to the Mental Deficiency (Notification of Children) Regulations 1924, the names of five boys and four girls; of these two boys were imbeciles notified pursuant to article 2; one boy and three girls were notified under article 3 as being unlikely to derive further benefit from attendance at the Special School; one boy under article 4 as being unable to attend without detriment to the other children, and one boy and one girl under article 6 as leaving the Special School at the age of 16 and as requiring institutional care.

The following table shews the numbers of children who have left the school since 1st January, 1916, classified according to the reason for their leaving :—

	Males.	Females.	Total.
1. Number who left school on account of leaving town for other areas	11	4	15
2. Number who left on reaching the age of 16	8	9	17
3. Number who left between 14 and 16 years of age with permission of Education Committee	16	8	24
4. Number who left on account of ill-health	1	4	5
5. Number who were excluded as being ineducable	8	3	11
6. Number who left on entering Private School	—	1	1
7. Number who left on transfer to ordinary elementary school	2	3	5
8. Number who left on admission to Residential Special School	3	2	5
9. Number who died while still on roll	—	1	1
Totals	49	35	84

The after-careers of the above children :—

	Males.	Females.	Total.
1. Number who have since died ...	2	1	3
2. (a) Number who are known to be incapable by reason of mental or physical defect of undertaking employment ...	7	7	14
(b) Number who are in attendance at an institution for further education ...	1	2	3
(c) Number who are in certified institutions under the Mental Deficiency Act ...	3	2	5
(d) Number in Poor Law Institutions	—	3	3
3. Number who are employed			
(a) Industrial or Manual occupations	13	—	13
(b) Agricultural or rural occupations	2	—	2
(c) Domestic occupations including those who are helping in domestic work at home ...	1	13	14
(d) Commercial, professional or clerical work ...	—	—	—
(e) Blind Alley or other precarious occupations ...	2	—	2
(f) In Army ...	1	—	1
4. Number who have left the neighbourhood ...	16	7	23
5. Number lost sight of ...	1	—	1
Totals ...	49	35	84

Of the 19 males employed, two work as builders labourers, two as farm labourers, two as gardeners, and one each as painter's labourer, boot repairer, bill poster, sweep, carter's labourer, stoker, baker, coalman and milkman respectively, and two are engaged as newspaper boy and errand boy respectively while one assists in the housework at home and one is in the army.

Of the 13 girls employed, four work as daily maids and one as a nursemaid, the remainder assisting in the house work at home.

(f) *The Physically defective*—(1) Of the 42 children known to have organic (valvular) *disease of the heart*, nine were at the end of the year absent on medical certificate, the remaining 33 being in more or less regular attendance although five suffered from cyanosis or dyspnoea on the slightest exertion and consequently were unable to take part in any games, drill, &c., (2) Of 35 children suffering from old *infantile paralysis*, one is at a Residential School for the physically defective, two are out of school, one of whom is awaiting admission to a Residential School, and 32 are in attendance at Council Schools, 17 wearing

special boots, irons or other surgical appliances. (3) There are three children suffering from marked deformities the results of *rickets* one of whom is at a Residential Special School for the physically defective. (4) The remaining children with deformities include one with Spina Bifida and perforating ulcer of foot, four with loss of a lower limb through amputation, three with congenital dislocation of the hip, three suffering from cerebral diplegia, one with congenital absence of hand, one with congenital deformity of forearm, one with hypertrophic muscular paralysis, three with congenital absence of important muscles of upper limbs, two with congenital talipes and six with crippling as the result of old tuberculous hip disease. (5) Of the 63 children known to have *active tuberculosis*, 24 were suffering from Pulmonary Tuberculosis of whom five were in Sanatoria; 12 had tuberculous glands of neck and two tuberculosis of mediastinal glands; 10 had tuberculous disease of the peritoneum, of whom one was in a surgical tuberculosis hospital; four had tuberculous disease of the spine of whom three were in hospital; six had tuberculous disease of the knee of whom two were in hospital; two had tuberculous disease of the hip, one of the elbow and two of the skin. (6) The 124 children classed in the Board of Education Tables at the end of the report as delicate either suffered from anaemia or malnutrition or were under regular observation as being of the pre-tuberculous type. Many of them had a history of illness in infancy suggestive of *tabes mesenterica* and all were regarded as specially suited for open-air education.

XVIII. Nursery Schools.

There are no Nursery Schools in the Borough nor do such appear to be needed in this non-industrial area.

XIX. Secondary Schools.

(a) *Routine Medical Inspection.* Forty seven sessions were spent in routine inspections and re-inspections at these schools the visits being distributed as follows:—

Southend High School for Boys ...	13 sessions
Southend High School for Girls ...	14 sessions
Westcliff High School	17 sessions
School of Science and Art	3 sessions

The number of scholars routinely examined was 971 and of these 484 were re-examined during the year. There were also 95 examined as specials. Parents were present in 514 cases or 52.9 per cent of the routine examinations.

(b) *Findings of Medical Inspections.* The scholars examined were as a whole very well nourished, many being distinctly above the average in this respect, and no case of uncleanness was met with at any of the schools.

Tonsils and Adenoids. Five cases of chronic enlargement of the tonsils of such degree as to need operative treatment were

found and four others were referred for further observation.

Tuberculosis. No case of pulmonary tuberculosis was found. One boy showed thickening around the knee joint due to old tuberculous synovitis but had recovered without any limitation of movement in the joint.

Skin Disease. No case of Impetigo or Ringworm was met with at routine inspections, the only diseases found being a few cases of seborrhœa and of slight eczema and acne.

External Eye Disease. There were five cases of Blepharitis none of them being of a severe type and all improving under treatment.

Vision. Seventy-three of the scholars examined presented defects of vision of such degree as to render treatment by spectacles advisable and two others showing a lesser defect were referred for further observation. No case of squint was found.

Ear Discharge and Hearing. There were two cases of recurring inflammation of the middle ear with occasional ear discharge and one of slight defect in hearing due to a catarrhal condition.

Dental Defects. These again figured largely in the total of defects discovered, 146 scholars showing dental caries requiring treatment.

Crippling Defects. No case of organic disease of the heart was found but four scholars showed functional derangement due to slight dilatation of this organ.

There were two cases of slight spinal curvature for which remedial exercise were prescribed and one scholar suffered from occasional attacks of epilepsy. Thirteen boys had varicocele of varying degree but in no case sufficiently severe to need treatment.

(c) *Facilities for treatment available.* In any case in which a defect requiring treatment is found the parent is referred to the family doctor for further advice and the necessary treatment. Any remedial exercises needed in cases of spinal curvature, incipient flat foot or other deformity due to muscular weakness are carried out at school under the supervision of the Gymnastic Instructors the exercises being arranged to meet the needs of each individual case.

Cases of dental and visual defects in children whose parents are unable to afford private treatment are referred to the Dental and Eye Clinics of the Education Committee.

(d) *Results of Re-examination.* Most of the defects found at Routine Medical Inspections had received the necessary treatment. Five pupils suffering from enlarged tonsils and

adenoids received operative treatment, three privately and two under the Scheme of the Education Committee. Eighty-three pupils with errors of refraction received treatment, 73 under the Committee's scheme and 10 privately; of these 63 were found to need spectacles and in 62 cases the spectacles were obtained and worn.

Of eleven girls who showed a tendency to flat feet, 8 were restored to a normal condition and 3 were improved by a course of exercises carried out at school and at home.

When dealing with dental defects, conditions are not so satisfactory and thorough, as would be expected; the proportion of defects treated is slightly higher among the girls than among the boys, the former valuing the appearance of good teeth more than the latter; the number of either sex who can be considered as having had satisfactory treatment is much smaller than could be desired. This disappointing result is undoubtedly due to the natural reluctance of the child to face the discomfort of the dental chair not being counterbalanced by the requisite firmness on the part of the parent, a state of things which it is hoped will show a progressive improvement.

XX. Continuation Schools

None have been provided.

XXI. Employment of Children.

Practically the only employments open to children in the Borough are on newspaper and milk rounds and as errand boys. During the year 142 boys and 2 girls under 14 years of age were examined as to fitness for employment and 142 were granted certificates of fitness pursuant to the Byelaws governing the employment of children, the remaining two being found physically unfit to undertake any work additional to that involved in the school curriculum. Six girls were examined and found fit for employment in theatrical performances.

XXII. Miscellaneous.

Sixty-seven candidates for employment in the service of the Education Committee were submitted to medical examination.

Elementary Schools.

RETURN OF MEDICAL INSPECTIONS 1st JANUARY, 1925,
TO 31st DECEMBER, 1925.

—
TABLE I.

A. ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections :—

Entrants	...	...	...	...	1,936
Intermediates	...	...	...	...	873
Leavers	...	...	...	...	524
			Total	...	3,333

Number of other Routine Inspections 44

B. OTHER INSPECTIONS.

Number of Special Inspections	...			4,057
Number of Re-Inspections	...	...	...	7,092
		Total	...	11,149

TABLE II.

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31st DECEMBER, 1925.

	<i>Routine Inspections.</i>		<i>Special Inspections.</i>		
	<i>No. of Defects.</i>		<i>No. of Defects.</i>		
	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	
Malnutrition	1	8	25	3	
Uncleanliness :—	4	...	...	...
Skin	Ringworm :—				
	Scalp	3	...	25	...
	Body	3	...	35	...
	Scabies	8	...	50	...
	Impetigo	15	...	285	...
Other Diseases (Non-Tuberculous)	11	3	345	58	
Eye	Blepharitis	14	6	7	1
	Conjunctivitis	2	...	27	...
	Keratitis	...	...	5	...
	Corneal Opacities	...	1	...	...
	Defective Vision (excluding Squint)	94	3	469	1
	Squint	27	1	14	...
Other Conditions	8	5	67	8	
Ear	Defective Hearing	...	8	8	5
	Otitis Media	20	5	64	...
	Other Ear Diseases	1	1	24	3
Nose and Throat	Enlarged Tonsils only	19	126	22	70
	Adenoids only	2	52	5	11
	Enlarged Tonsils and Adenoids	65	155	145	59
	Other Conditions	15	165	157	86
Enlarged Cervical Glands (Non-Tuberculous)	3	26	10	82	
Defective Speech	1	7	...	3	
Teeth—Dental Diseases :—	142	...	50	...	
Heart & Circulation	Heart Disease :—				
	Organic	...	...	...	1
	Functional	...	16	...	12
Anæmia	24	3	65	...	

		<i>Routine. Inspection</i>		<i>Special Inspection.</i>	
		<i>No. of defects.</i>		<i>No. of defects.</i>	
		Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
Lungs	{ Bronchitis	7	3	40	23
	{ Other Non-Tuberculous Diseases	8	13	88	11
Tubercu- losis	{ Pulmonary :—				
	Definite	2	1	2	...
	Suspected	1	...	3	3
	{ Non-pulmonary :—				
	Glands	...	...	3	2
	Spine	...	1	...	...
	Hip	...	...	...	...
	{ Other Bones and Joints	...	...	1	1
	{ Skin	...	...	...	...
	{ Other Forms	2	1	...	...
Nervous System	{ Epilepsy	...	2	1	3
	{ Chorea	...	...	9	1
	{ Other conditions	2	9	5	14
Deform- ities	{ Rickets	4	4	2	5
	{ Spinal Curvature	3	3	...	2
	{ Other Forms	7	31	8	10
Other Defects and Diseases		49	53	616	394

TABLE II.—*Continued.*

B. NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE
MEDICAL INSPECTION TO REQUIRE TREATMENT.
(excluding Uncleanliness and Dental Diseases).

GROUP	Number of Children		Percentage of children found to require treatment
	Inspected	Found to require treatment	
Code Groups :—			
Entrants	1956	251	11.9*
Intermediates ...	875	112	12.8
Leavers	524	42	8.0
Total (Code Groups)...	3555	385	11.5
Other Routine Inspections	44	5	11.5

* All new-comers to Council Schools in the Borough were routinely inspected, 1,459 being aged 5, 242 aged 6 and 235 being of other ages. New-comers aged 7 but under 8 and aged 12 or over were grouped as "intermediates" and "leavers" respectively.

TABLE III.

RETURN OF EXCEPTIONAL CHILDREN IN THE AREA.

			Boys	Girls	Total
Blind (including partially blind).	(i). Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind ...	...	...	...
		Attending Public Elementary Schools ...	...	...	...
		At other Institutions ...	...	...	...
		At no School or Institution ...	...	1	1
	(ii). Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind ...	...	...	...
		Attending Public Elementary Schools ...	4	7	11
		At other Institutions ...	...	...	...
		At no School or Institution ...	...	...	...
Deaf (including deaf and dumb and partially deaf).	(i). Suitable for training in a School or Class for the totally deaf or deaf & dumb.	Attending Certified Schools or Classes for the Deaf ...	7	4	11
		Attending Public Elementary Schools ...	...	...	...
		At other Institutions ...	...	2	2
		At no School or Institution ...	...	...	...
	(ii). Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ...	...	...	...
		Attending Public Elementary Schools ...	2	3	5
		At other Institutions ...	...	...	...
		At no School or Institution ...	...	...	...
Mentally Defective.	Feeble-minded (cases not notified to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children ...	27	20	47
		Attending Public Elementary Schools ...	17	12	29
		At other Institutions ...	6	4	10
		At no School or Institution ...	6	3	9

TABLE III.—Continued.

			Boys	Girls	Total
Mentally Defective (contd.)	Notified to the Local Control Authority during the year.	Feeble-minded	5	4	7
		Imbeciles	2	...	2
		Idiots ... ..	...	...	...
Epileptics	Suffering from severe Epilepsy.	Attending Certified Special Schools for Epileptics ...	1	2	5
		In Institutions other than Certified Special Schools	...	...	...
		Attending Public Elementary Schools	1	1	2
		At no School or Institution	5	...	5
	Suffering from Epilepsy which is not severe.	Attending Public Elementary Schools	11	12	25
		At no School or Institution	...	...	...
Physically Defective.	Infectious Pulmonary and Glandular Tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ... ..	...	2	2
		At other Institutions ... ..	...	...	...
		At no School or Institution	2	1	5
	Non-infectious but active Pulmonary and Glandular Tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	2	1	5
		At Certified Residential Open Air Schools ... ..	...	...	...
		At Certified Day Open Air Schools ... ..	...	...	...
		At Public Elementary Schools	8	7	15
		At other Institutions ... ..	...	...	...
		At no School or Institution	8	9	17

TABLE III.—Continued.

			Boys	Girls	Total
Physically Defective (contd.)	Delicate children (e.g., pre or latent Tuberculosis, Malnutrition, Debility, Anæmia, &c.)	At Certified Residential Open Air Schools ... ..	...	...	...
		At Certified Day Open Air Schools ... ..	...	...	...
		At Public Elementary Schools	80	47	127
		At other Institutions ...	3	9	12
		At no School or Institution	2	3	5
	Active Non-Pulmonary Tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	3	3	6
		At Public Elementary Schools	2	4	6
		At other Institutions ...	4	...	4
		At no School or Institution	4	3	7
	Crippled children (other than those with active Tuberculosis disease, e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools	2	1	3
		At Certified Residential Cripple Schools ... ..	...	...	...
		At Certified Day Cripple Schools ... ..	...	...	...
		At Public Elementary Schools	51	22	53
		At other Institutions ...	1	3	4
		At no School or Institution	11	5	16

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED

31st DECEMBER, 1925.

TREATMENT TABLE.

GROUP I.

MINOR AILMENTS (excluding Uncleanliness, for which see Group V.).

Disease or Defect	Number of Defects treated, or under treatment, during the year.		
	Under the Authority's Scheme	Otherwise	Total
1	2	3	4
Skin—			
Ringworm :—			
Scalp	20	6	26
Body	5	53	58
Scabies	4	34	38
Impetigo	168	130	298
Other Skin Disease	24	212	236
Minor Eye Defects—			
(External and other but excluding cases falling in Group II.)	20	110	130
Minor Ear Defects—			
	18	90	108
Miscellaneous—			
(e.g. minor injuries, bruises, sores, chil- blains, &c.) ...	261	330	591
Total ...	520	945	1465

TABLE IV.—Continued.

GROUP II.

DEFECTIVE VISION AND SQUINT.

(excluding Minor Eye Defects treated as Minor Ailments—Group I.).

Defect or Disease.	No. of defects dealt with.			
	Under the Authority's Scheme	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint) (Operations for Squint should be recorded separately in the body of the Report).	571	1	...	572
Other Defect or Disease of the eyes (excluding those recorded in Group 1).	25	...	6	31
Total ...	596	1	6	605

Total number of children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme	415
(b) Otherwise	1

Total number of children who obtained or received spectacles :—

(a) Under the Authority's Scheme	391
(b) Otherwise	3

TABLE IV.—*Continued.*

GROUP III.

TREATMENT OF DEFECTS OF NOSE AND THROAT.

Number of Defects.

Received Operative Treatment.			Received other forms of treatment	Total number treated
Under the Authority's Scheme, in Clinic or Hospital	By Private Prac- titioner or Hospital apart from the Authority's Scheme	Total		
169	6	175	75	248

TABLE IV.—Continued.

GROUP IV.

DENTAL DEFECTS.

(1). Number of Children who were :—

(a) Inspected by the Dentist :—

		Aged				
	5	.....	228		
	6	.....	757		
	7	.....	808		
	8	.....	1074		
Routine Age Groups	9	.....	1208		
	10	.....	1236		
	11	.....	1247		
	12	.....	1198		
	13	.....	1042		
	14	594	Total	...	9,392
			Specials		treated 517*	
				Grand Total	9909	
	(b)	Found to require treatment	...	...	3,909
	(c)	Actually treated	...	...	2,411
	(d)	Retreated during the year as the result of periodical examination...	...	...	561*

*Included in number treated.

(2)	Half-days devoted to	Inspection	...	74	Total	...	402
		Treatment	...	328			
(3)	Attendances made by children for treatment		...		...	2,522	
(4)	Fillings	Permanent Teeth	...	449	Total	...	589
		Temporary Teeth	...	140			
(5)	Extractions	Permanent Teeth	...	545	Total	...	3,179
		Temporary Teeth	...	2634			
(6)	Administrations of general anæsthetics for extractions		...		...	156	
(7)	Other operations		...		...	84	

TABLE IV.—Continued.

GROUP V.

UNCLEANLINESS AND VERMINOUS CONDITIONS.

(1)	Average number of visits per school made during the year by the School Nurses ...	...	10
(2)	Total number of examinations of children in the Schools by the School Nurses ...	...	33,914
(3)	Number of individual children found unclean ...	...	391*
(4)	Number of children cleansed under arrangements made by the Local Education Authority. ...	...	249
(5)	Number of cases in which legal proceedings were taken :—		
	(a) Under the Education Act, 1921 ...	...	—
	(b) Under School Attendance Byelaws ...	...	—

*In addition 4 children were found unclean at Routine Medical Inspection.

Secondary Schools.

RETURN OF MEDICAL INSPECTIONS 1st JANUARY, 1925,
TO 31st DECEMBER, 1925.

TABLE I.

A. ROUTINE MEDICAL INSPECTIONS.

		Boys.	Girls.
Entrants into School	...	245	164
Other Pupils	...	309	253
Total	...	<u>554</u>	<u>417</u>

B. OTHER INSPECTIONS.

Number of Special Inspections	...	36	59
Number of Re-Inspections	...	210	288
Total	...	<u>246</u>	<u>347</u>

TABLE II.

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31st DECEMBER, 1925.

					Routine Inspections.		Special Inspections.	
					No. of Defects.		No. of Defects	
					Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
Malnutrition					...	...	...	...
Uncleanliness :—					...	...	...	...
Skin	..	Ringworm :—			...	...	...	...
		Scalp			...	...	...	...
		Body			...	...	1	...
		Scabies			...	...	...	...
		Impetigo			...	...	4	...
Other Diseases (Non-Tuberculous)					6	1	...	...
Eye	..	Blepharitis			5	...	...	1
		Conjunctivitis			...	...	...	...
		Keratitis			...	...	...	...
		Corneal Opacities			...	...	...	...
		Defective Vision (excluding Squint)			73	2	46	...
		Squint			...	...	...	...
Other Conditions					...	...	...	...
Ear	..	Defective Hearing			...	1	...	...
		Otitis Media			2	...	2	...
		Other Ear Diseases			...	2	...	...
Nose and Throat	..	Enlarged Tonsils only			5	4	...	...
		Adenoids only			...	2	...	...
		Enlarged Tonsils and Adenoids			...	4	...	...
		Other Conditions			1	23	1	1
Enlarged Cervical Glands (Non-Tuberculous)					...	4	...	...
Defective Speech					...	...	...	...
Teeth—Dental Diseases :—					146	...	2	...
Heart & Circulation	..	Heart Disease :—			...	...	...	...
		Organic			...	...	...	...
		Functional			...	4	...	...
Anæmia					5	...	...	...

					<i>Routine Inspections.</i>		<i>Special Inspections.</i>	
					<i>No. of Defects.</i>		<i>No. of Defects.</i>	
					Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
Lungs	{	Bronchitis	...	...	...	...	...	...
	{	Other Non-Tuberculous Diseases	...	...	...	1	...	...
		Pulmonary :—						
		Definite	...	...	...	...	...	...
		Suspected	...	...	...	...	...	...
Tuberculosis	{	Non-pulmonary :—						
	{	Glands	...	...	...	...	...	...
	{	Spine	...	...	...	...	...	...
	{	Hip	...	...	...	...	...	...
	{	Other Bones and Joints	...	...	1	1	...	...
	{	Skin	...	...	...	...	...	...
	{	Other Forms	...	...	...	1	...	...
Nervous System	{	Epilepsy	...	...	...	1	...	...
	{	Chorea	...	...	...	...	...	...
	{	Other conditions	...	...	...	2	...	...
Deformities	{	Rickets	...	...	...	...	...	...
	{	Spinal Curvature	...	...	2	6	...	1
	{	Other Forms	...	...	2	61	1	...
Other Defects and Diseases			...	...	5	26	5	6

TABLE II.—*Continued.*

B. NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE
MEDICAL INSPECTION TO REQUIRE TREATMENT.

(excluding Uncleanliness and Dental Diseases).

GROUP	Number of Children		Percentage of children found to require treatment
	Inspected	Found to require treatment	
Entrants	409	38	9·2
Intermediates ...	376	49	13·0
Leavers	186	14	7·4
Total	971	101	10·4

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED

31st DECEMBER, 1925.

TREATMENT TABLE.

GROUP I.

MINOR AILMENTS (excluding Uncleanliness, for which see Group V.).

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme	Otherwise	Total
Skin—			
Ringworm :—			
Scalp ... ..	...	...	...
Body ... ..	...	1	1
Scabies ... ..	...	...	...
Impetigo	2	2	4
Other Skin Disease	...	6	6
Minor Eye Defects— (External and other but excluding cases falling in Group II.)			
	1	4	5
Minor Ear Defects—			
	1	2	3
Miscellaneous— (e.g. minor injuries, bruises, sores, chilblains, &c.)			
	...	7	7
Total	4	22	26

TABLE IV.—Continued.

GROUP II.

DEFECTIVE VISION AND SQUINT.

(excluding Minor Eye Defects treated as Minor Ailments—Group I.).

Defect or Disease.	No. of defects dealt with.			Total.
	Under the Authority's Scheme	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme.	Otherwise.	
Errors of Refraction (including Squint) (Operations for Squint should be recorded separately in the body of the Report).	73	10	...	83
Other Defect or Disease of the eyes (excluding those recorded in Group 1).	...	...	...	...
Total ...	73	10	...	83

Total number of children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme ...	...	...	...	51
(b) Otherwise ...	...	...	...	12

Total number of children who obtained or received spectacles :—

(a) Under the Authority's Scheme ...	...	...	...	48
(b) Otherwise ...	...	...	...	14

TABLE IV.—Continued.

GROUP III.

TREATMENT OF DEFECTS OF NOSE AND THROAT.

Number of Defects.

Received Operative Treatment.		Total.	Received other forms of treatment.	Total number treated.
Under the Authority's Scheme in Clinic, or Hospital.	By private practitioner or Hospital, apart from the Authority's Scheme.			
2	3	5	1	6

TABLE IV.—Continued.

GROUP V.

UNCLEANLINESS AND VERMINOUS CONDITIONS.

(1) Average number of visits per school made during the year by the School Nurses ...	...	...	—
(2) Total number of examinations of children in the Schools by the School Nurses ...	...	...	—
(3) Number of individual children found unclean ...	...	...	8
(4) Number of individual children cleansed under arrangements made by the Local Education Authority.	4

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