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BOROUGH OF ROYAL TUNBRIDGE WELLS.

ANNUAL REPORT

OF THE

Medical Officer of Health

AND THE

School Medical Officer

For the Year 1923.

F. C. LINTON, M.A., M.B., Ch.B., D.P.H.

Tunbridge Wells -
BALDWIN, GROSVENOR WORKS.
906/24.



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BOROUGH OF ROYAL TUNBRIDGE WELLS.

HEALTH COMMITTEE :*

Mr. Alderman CARPENTER (Chairman).

THE MAYOR (Mr. Councillor S. Parsonage).

Mr. Alderman CALEY.
Councillor Miss BAKER.
Councillor Miss POWER.

Councillor Admiral STOKES-REES,
C.B.
Mr. Councillor THORPE.
Mr. Councillor WORSDALE.

MATERNITY AND CHILD WELFARE COMMITTEE :*

Mr. Alderman CARPENTER (Chairman).

THE MAYOR (Mr. Councillor S. Parsonage).

Councillor Miss BAKER.
Mr. Councillor DOWN.
Mr. Councillor LUCK.
Mr. Councillor OATEN.
Councillor Miss POWER.

Mr. Councillor THORPE.
Mrs. PAYNE.
Miss SCOTT.
Mrs. WALTERS.

STAFF :

Chief Sanitary Inspector :

JAMES CAVE, A.R.S.I., A.R.I.P.H.

Inspectors :

E. J. WELLS, A.R.S.I.

W. P. CAVE, A.R.S.I.

Clerk :

F. HICKS.

Second Clerk :

Miss M. FERMER.

Maternity and Child Welfare Nurse :

Miss E. RICE OXLEY.

Health Visitors :

Miss F. CLARK.

Miss J. DONALDSON.

Matron of the Isolation Hospital :

Miss E. BROCKLEHURST.

Public Analyst :

A. H. M. MUTER, F.I.C.

Medical Officer of Health and Medical Officer for Maternity and Child Welfare :

F. C. LINTON, M.A., M.B., Ch.B., D.P.H.

* The present constitution of Committees is given above.

*To the Mayor, Aldermen and Burgesses of the Borough of
Royal Tunbridge Wells.*

LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report upon the work of the Health Department and of the School Medical and Maternity and Child Welfare Services for the year 1923.

A full survey Report is required every fifth year, the first in 1925. My report for 1923 is accordingly a statement of data with brief comment where called for. It is, nevertheless, to all who read between the lines, a record of a large volume of useful work, which has been zealously and loyally carried out by the Public Health Department staff, each working according to his or her lights, often much beyond office hours.

I am indebted to them,—and also to the practical and sympathetic interest shown by members of the Committees which deal with matters of health, [—]for valuable support which has made the duties run smoothly.

I have the honour to be,

Your obedient Servant,

F. C. LINTON.

INDEX.

HEALTH REPORT.

	PAGE
GENERAL STATISTICS	7
EXTRACTS FROM VITAL STATISTICS	7
NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT ...	8
Population	8
Physical Features and General Character	8
Meteorological Notes	8-10
VITAL STATISTICS	11
Births	11
Deaths	11-12
Infant Mortality	12-13
Table I.	14
„ II.	15-17
„ III.	18
„ IV.	19
PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE ...	20
Seasonal Incidence of Acute Infectious Disease ...	20
Tuberculosis	20
Ophthalmia Neonatorum	20
Scarlet Fever	20
Diphtheria	21
Diarrhoea and Enteritis	21
Typhoid and Para-Typhoid Fevers	21
Encephalitis Lethargica	22
Promotion of Public Interest in Hygiene	22
SUMMARY OF NURSING ARRANGEMENTS, HOSPITALS, ETC. ...	22
Professional Nursing in the Home	22
Midwives	22
CLINICS AND TREATMENT CENTRES	23
Maternity and Child Welfare Centres	23-24
School Clinic	25
Hospitals provided or subsidised	25
AMBULANCE FACILITIES	26
For Infectious Cases	26
For Non-infectious and Accident Cases	26

	PAGE
LABORATORY WORK	26-7
Chemical Analysis	28
Bacteriological Analysis	28
TUNBRIDGE WELLS IMPROVEMENT ACT, 1890	28
PUBLIC HEALTH AMENDMENT ACT, 1907	29
SANITARY ADMINISTRATION	29
Summary of Work Done	29-30
Slaughter Houses	30
Dairies and Cowsheds	30
Disinfection and Disinfestation	31
Sale of Food and Drugs Acts and Food Inspection	31-32
PUBLIC HEALTH (MILK AND CREAM) REGULATIONS	32-34
OTHER FOODS	34
PUBLIC HEALTH STAFF	34-35
HOUSING	35-36

SCHOOL REPORT.

	PAGE
STAFF	37-39
CO-ORDINATION	39
(a) Infant and Child Welfare	39
(b) Nursery Schools	39
(c) The Care of Debilitated Children under School Age	39
THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC	
ELEMENTARY SCHOOLS	39
School Hygiene	39
Medical Inspections	40
FINDINGS OF MEDICAL INSPECTIONS	40
Uncleanliness	40-44
Tonsils and Adenoids	44
Dental Treatment	44
INFECTIOUS DISEASES	45
FOLLOWING UP	45-46
MEDICAL TREATMENT	46
(a) Minor Ailments	46
(b) Tonsils and Adenoids	46

	PAGE
(c) Tuberculosis	46
(d) Skin Disease	46
(e) External Eye Disease	47
(f) Vision	47
(g) Squint	47
(h) Ear Disease and Hearing	48
(i) Crippling Defects and Orthopædics	48
OPEN AIR EDUCATION	48
PHYSICAL TRAINING	48
PROVISION OF MEALS	49
SCHOOL BATHS	49
CO-OPERATION OF PARENTS AND TEACHERS	50
CO-OPERATION OF SCHOOL ATTENDANCE OFFICER	50
CO-OPERATION OF VOLUNTARY BODIES	50
BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN	50
(a) Blind	51
(b) Deaf	51
(c) Mentally Defective	51
(d) Epileptics	51
(e) Physically Defective	51
NURSERY, SECONDARY, AND CONTINUATION SCHOOLS	51
EMPLOYMENT OF CHILDREN AND YOUNG PERSONS	52
PHYSICAL CONDITIONS OF EMPLOYED CHILDREN	52
STATISTICAL TABLES	52
Table I.	52
„ II.	53-54
„ III.	54-55
„ IV.	56-59
NUMBER OF CHILDREN MEDICALLY INSPECTED AT EACH SCHOOL	60

1.—General Statistics.

CENSUS 1921.	{	Area (acres), 3,991.
		Population, 35,568 (preliminary figure).
		„ 34,270, corrected for holiday population by Registrar-General.*
		Number of structurally separate sets of premises intended or used for habitation, 8,178.
		Number of separate occupiers, 8,774.

Population, Mid-year 1923, 34,370.

Number of houses intended or used for habitation, 8,153.

Number of inhabited houses, 8,097.

Rateable value, £312,708.

Sum represented by a penny rate :—

On Borough Rate	...	...	£1,231
On General District Rate	...	...	£1,214.

Mean annual temperature, °F. 49.4.

Total rainfall, 32.25 inches.

Hours of bright sunshine, 1,611 hours, 48 minutes.

2.—Extracts from Vital Statistics of the Year.

	Total.	Males.	Females.
Births—Legitimate ...	452	230	222
„ Illegitimate ...	27	12	15
Still Births ...	13	5	8

Birth rate (Registrar-General)

13.9 per thousand.

Deaths	...	489	212	277
--------	-----	-----	-----	-----

Crude death rate (Registrar-General) 14.2.

Death rate corrected for age and sex constitution, 12.4 per thousand.

Number of women dying in, or in consequence of, child birth—
—from sepsis, 0 ; from other causes, 0.

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

Legitimate 50.9; Illegitimate 37.0. Total 50.1.

	Total.	Males.	Females.
Deaths from Measles (all ages)	0	0	0
" " Whooping Cough			
(all ages) ...	0	0	0
" " Diarrhoea (under 2			
years of age)	0	0	0

* NOTE.—The Medical Officers of some Health Resorts have not made use of the figures supplied by the Registrar-General in which corrections have been made for holiday population. It seems questionable whether at the time of the census, viz., June, the exodus of residents from Tunbridge Wells for holiday purposes was not as large as the number of persons who came to the Borough for holidays. The figure supplied by the Registrar has, however, been accepted and acted upon, but it should be borne in mind that the percentages for infectious diseases are smaller than they appear to be, as the population in which these cases occur, during at least half the year, is much larger than 34,370.

A. — NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

(1.) *Population.*

The population at mid-year in 1923, as estimated by the Registrar-General, was 34,370.

(2.) *Physical Features and General Character.*

These have been described fully in past reports.

Meteorological Notes.—Records for the Meteorological Office, of which a summary follows, are kept by the staff of the Health Department and have been so kept since 1st July, 1914.

The annual inspection of the station by an inspector of the Meteorological Office took place on 1st June, and the report on the station was satisfactory.

The total amount of sunshine recorded was 1,611 hours, 48 minutes. The mean is 1,613 hours, 12 minutes. The most sunny day was July 9th, when 14 hours, 30 minutes were recorded. There were 64 sunless days, 61 being the average.

The highest temperature in the sun was 146 degrees, on July 8th.

The mean temperature in the shade for the year was 49.4 degrees, the average being 49.0.

The mean daily range was 14.5, the average being 14.6.

The temperature in the shade four feet above the ground was highest, 90 degrees, on July 12th, and lowest, 19 degrees, on November 26th and 27th.

The temperature in the shade first reached :—

60 degrees on March 25th.

70 ,, ,, May 2nd.

80 ,, ,, July 5th.

90 ,, ,, July 12th.

last reached—

90 ,, ,, July 12th.

80 ,, ,, August 13th.

70 ,, ,, September 30th.

60 ,, ,, October 19th.

The hottest night was July 13th, when the temperature did not go below 66 degrees.

The last frost in the air in spring was on April 10th, and the first in the autumn was on November 7th. The last on the grass in spring was on June 3rd, and the first in the autumn was on August 31st.

The rainfall amounted to 32.25 inches, the average being 29.43 inches. It fell on 187 days, the average being 173.

The most rain that fell on one day was 1.34 inches on May 28th.

The wind at 9 a.m. was N. 21 days, N.E. 28 days, E. 7 days, S.E. 23 days, S. 32 days, S.W. 118 days, W. 83 days, N.W. 53 days.

The mean amount of cloud at 9 a.m. was 6.5, 6.8 being the average ; ten representing overcast. There was thunder and lightning on 18 days.

There were 26 fogs, and it was misty on 46 other mornings.

METEOROLOGICAL NOTES.

Months.	Sunshine.			Rainfall. In Inches.		Mean Temperature. In shade, 4ft. above ground.		Temperature Underground.			
	1923.		27 Year Average.	1923.	46 Year Average.	1923.	33 Year Average.	One Foot.		Four Feet.	
	Hrs.	Mins.	Hrs. Mins.			°F	°F	1923.	23 Year Average.	1923.	9 Year Average.
January ...	66	18	51	54	1.35	2.54	38.3	39.7	39.4	43.2	44.1
February ...	57	48	75	36	4.32	2.28	39.2	42.5	39.2	43.6	43.0
March ...	114	24	121	18	1.82	2.26	41.9	44.3	41.8	44.3	43.6
April ...	134	48	160	0	2.39	1.99	46.3	49.0	46.3	47.8	45.7
May ...	161	24	215	54	3.79	1.90	53.0	53.4	54.0	51.0	50.6
June ...	117	36	199	30	0.57	2.03	57.8	56.4	59.9	53.4	55.6
July ...	261	18	210	18	1.84	2.33	61.3	64.8	63.1	59.4	58.2
August ...	252	0	198	48	1.57	2.49	60.8	62.7	62.7	61.0	59.8
September ...	209	30	162	12	2.03	2.31	56.8	57.6	58.4	58.5	58.9
October ...	98	12	108	48	6.93	2.80	50.0	53.7	52.5	55.8	55.8
November ...	93	42	68	36	2.51	3.24	43.1	44.6	45.0	50.2	50.2
December ...	44	48	40	18	3.13	3.26	40.2	40.1	41.5	44.6	46.2
WHOLE YEAR	1,611	48	1,613	12	32.25	29.43	49.4	50.7	50.3	51.1	51.0

VITAL STATISTICS.

BIRTHS.—From figures supplied by the Registrar-General the total number of births registered as properly belonging to Tunbridge Wells is 479 (242 males, 237 females). This corresponds to a rate of 13.9 per thousand, as compared with 14.8 per thousand in 1922. Twelve males and 15 females were born out of wedlock, giving an illegitimate rate of 5.6 per cent., as compared with 6.1 per cent. in 1922.

The births notified during the year as occurring in the Borough numbered 497, and consisted of 253 males and 244 females ; of these, 5 males and 8 females were stillborn.

DEATHS.—494 deaths were registered in the Borough during 1923, and there were 72 outwardly transferable deaths and 67 inward transfers, thus making the total number of deaths belonging to the district 489. This gives a crude death rate of 14.2 per thousand. In order to compare it with that of the country generally, a figure for correction has been supplied by the Registrar-General, as the age and sex constitution of the Tunbridge Wells population differs considerably from that of the general population of the Kingdom. On applying the correction figure (0.8683) the death rate in the Borough is 12.4 per thousand.

It is only fair to state that this correction figure has not been prepared from the population as enumerated at the recent census. The Registrar-General has not yet made this figure available.

On a study of the death returns there is little doubt that the figure should be smaller than it now is, in order to enable the death-rate in Tunbridge Wells to be compared with that of the country in general on a fair basis ; that is to say, there are relatively more aged people attracted to Tunbridge Wells to spend their declining years in its pleasant surroundings than was formerly the case. In support of this deduction the

deaths under 25 years of age in 1923 are the lowest on record in the Borough, the deaths from 65 and upwards are the highest; a fact which goes to prove that the population of 65 years and upwards is relatively markedly increasing in number. There are two reasons for this :—(1) An increase in average longevity; and (2) An increased immigration of elderly persons.

Showing the Mortality at several ages for 1923, and for five periods of five years.

	1898 to 1902.	1903 to 1907.	1908 to 1912.	1913 to 1917.	1918 to 1922.	25 years average 1898 to 1922.	1923.
Deaths at under 1 year ...	70	52	41	38	36	47	24
„ 1 and under 2 } ...	30	24	17	7	6	} 24	4
„ 2 and under 5 } ...	18	10	12	8	10		4
„ 5 and under 15 ...	17	12	14	17	10	13	8
„ 15 and under 25 ...	135	143	133	43	48	15	7
„ 25 and under 45 } ...	110	104	252	251	212	} 143	40
„ 45 and under 65 } ...	157	195	206	252	251		105
„ 65 and upwards ...							297

INFANT MORTALITY.—24 deaths of infants below one year of age occurred, being 50.1 per thousand born, as compared with an infant mortality of 69 per thousand in England and Wales generally, the lowest hitherto recorded in the country. The average infant mortality in Tunbridge Wells during the previous ten years was 73.5. Infant deaths in 1923 were fifteen fewer than in 1922, and the number of still-births has further decreased by three. Absence of infectious diseases such as measles, whooping cough and pneumonia, largely accounts for this substantial decrease and it is also noteworthy that not one death of a child under two years of age was attributed to diarrhoea and enteritis.

A table graphically illustrating the rate of infant mortality in Tunbridge Wells and in England and Wales for the past 33 years is appended. In Table IV. is given in detail a list of the causes of infant deaths in 1923.

GRAPHIC RECORD OF INFANT MORTALITY.

(Number of Deaths per 1,000 Births in Tunbridge Wells 1891 to 1923 (33 years).)

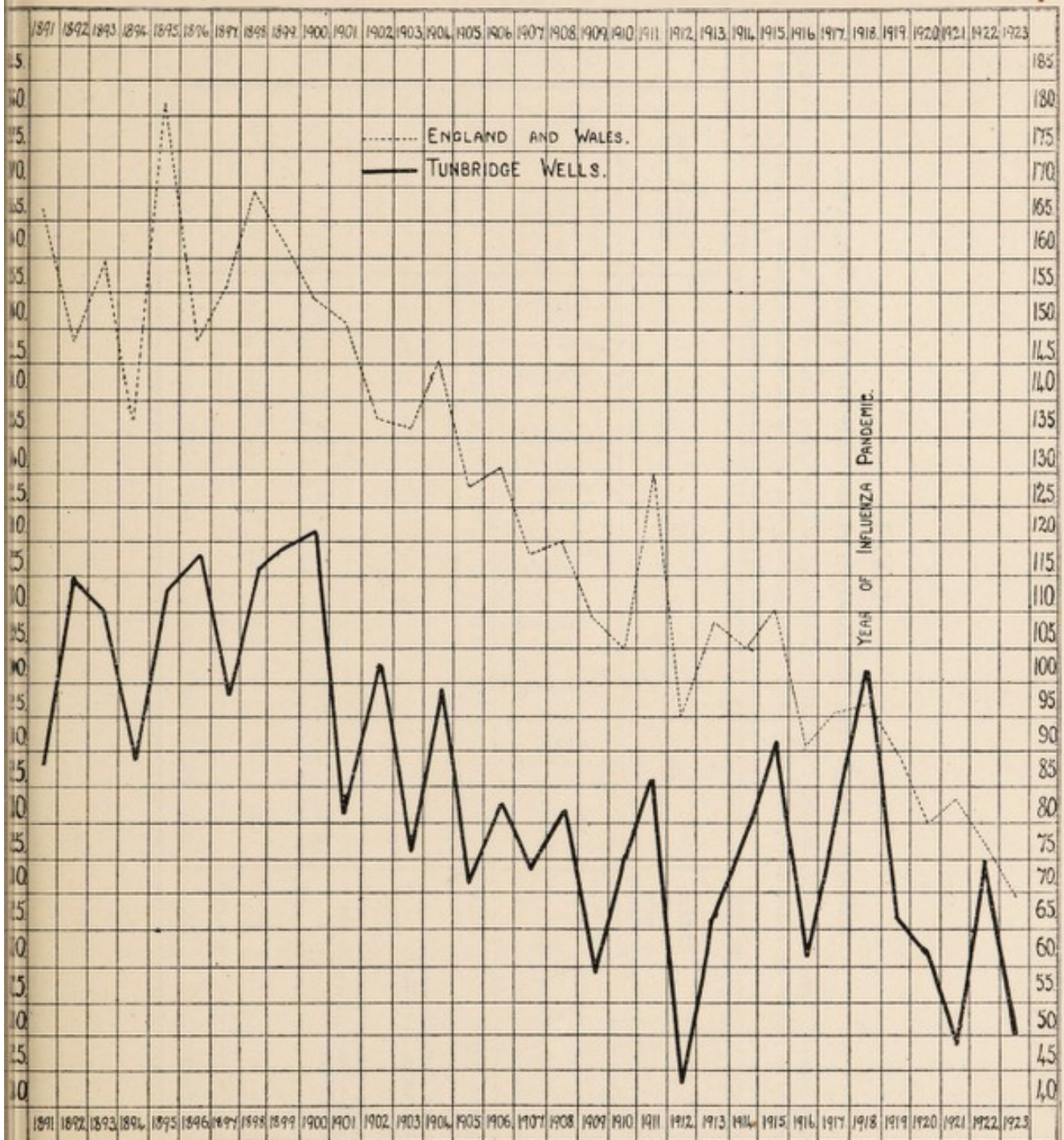


Table I.
Birth-rate, Death-rate, and Analysis of Mortality during the Year 1923.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1923, while those for the towns have been calculated on populations estimated to the middle of 1922. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

	BIRTH-RATE PER 1,000 TOTAL POPULATION.	ANNUAL DEATH-RATE PER 1,000 POPULATION.								RATE PER 1,000 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.	Causes of Death Certified by Registered Medical Practitioners.	Inquest Cases.	Uncertified Causes of Death.
England and Wales ...	19.7	11.6	0.01	0.00	0.14	0.03	0.10	0.07	0.22	0.44	7.7	69	92.0	6.9	1.1
105 County Boroughs and 96 Great Towns, including London ...	20.4	11.6	0.01	0.00	0.15	0.03	0.12	0.09	0.22	0.40	9.9	72	92.2	7.2	0.6
157 Smaller Towns (1921 Adjusted Populations 20,000—50,000) ...	19.8	10.6	0.01	—	0.19	0.02	0.10	0.06	0.21	0.38	6.4	69	92.6	6.1	1.3
London ...	20.2	11.2	0.01	0.00	0.08	0.02	0.09	0.13	0.17	0.45	10.2	60	90.8	9.1	0.1
Tunbridge Wells ...	13.9	12.4	0.00	0.00	0.00	0.00	0.00	0.03	0.17	0.26	00.0	50	95.9	4.1	0.0

Table II.—NOTIFIABLE DISEASES FOR YEAR 1923.

DISEASE.	Total cases notified (All ages.)	Under 1 year.	1 year and under 2 years.	2 years and under 3 years.	3 years and under 4 years.	4 years and under 5 years.	5 years and under 10 years.	10 years and under 15 years.	15 years and under 20 years.	20 years and under 35 years.	35 years and under 45 years.	45 years and under 65 years.	65 years and over.	Cases admitted to hospital.
Diphtheria ...	11	...	...	...	...	...	6	3	...	2	...	...	...	11
Scarlet Fever...	33	...	...	...	2	2	17	9	3	...	...	...	...	30
Enteric Fever (including Paratyphoid) ...	4	...	...	...	...	...	...	...	1	1	...	1	1	2
Pneumonia ...	14	3	1	...	...	...	...	...	...	1	...	5	4	...
Erysipelas ...	14	1	...	...	...	...	...	...	...	2	1	8	2	1
Encephalitis														
Lethargica ...	3	...	...	...	...	...	...	...	1	...	2	...	...	3

TUBERCULOSIS.

Age-Periods.	New Cases.				Deaths.			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
0.	...	...	1	...	...	...	1	...
1.	...	...	...	1	...	...	...	1
5.	...	...	3	...	...	...	1	...
10.	...	1	...	1	...	...	...	...
15.	1	1	...	2	...	1	...	...
20.	3	2	...	...	1	...	1	...
25.	7	2	...	...	4	6	...	...
35.	3	4	...	...	3	2	...	...
45.	5	2	...	...	3	1	...	...
55.	1	1	...	...	4	1	...	...
65 & upwards	1	1	...	...	1	2	...	...
Totals ...	21	14	4	4	17	13	3	1

TABLE III.
Causes of, and Ages at Death during the Year 1923.

CAUSES OF DEATH.	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.													Total Deaths whether of Residents or Non-Residents in Institutions in the District.		
	All Causes	Certified Uncertified	ALL AGES.	Under 1 year.	1 and 2 years.	2 and 3 years.	3 and 4 years.	4 and 5 years.	5 and 10 years.	10 and 15 years.	15 and 20 years.	20 and 35 years.	35 and 45 years.		45 and 65 years.	65 years up-wards.
All Causes	489	24	4	2	2	...	5	3	1	26	20	106	296	106	...	
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Diphtheria	1	...	...	...	...	...	1	...	...	...	...	...	...	1	...	
Influenza	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Encephalitis lethargica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Meningococcal meningitis	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Tuberculosis of respiratory system	30	...	...	...	...	...	...	1	1	11	5	9	3	...	...	
Other Tuberculosis diseases	4	1	...	...	...	1	...	...	...	...	...	...	...	...	...	
Cancer, malignant disease	72	...	...	...	...	...	...	...	...	1	4	20	47	12	...	
Rheumatic Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Diabetes	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Cerebral hemorrhage, etc.	51	...	...	...	...	...	...	...	...	1	...	3	2	1	...	
Heart disease	70	...	...	...	...	...	...	...	...	...	...	6	45	2	...	
Arterio-sclerosis	20	...	...	...	...	...	...	1	4	4	2	16	47	7	...	
Bronchitis	23	3	...	...	...	...	...	...	...	...	...	3	17	...	...	
Pneumonia (all forms)	20	4	...	2	...	...	...	...	...	1	...	5	15	3	...	
Other respiratory diseases	11	...	1	...	...	...	...	...	...	...	1	...	13	1	...	
Ulcer of stomach or duodenum	6	...	...	...	...	...	...	...	...	...	...	4	5	2	...	
Diarrhoea, etc. (under 2 years)	...	...	...	...	...	...	...	...	...	...	2	1	3	10	...	
Appendicitis and Typhilitis	4	...	...	...	...	...	...	...	...	...	...	...	...	7	...	
Cirrhosis of liver	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	
Acute and Chronic Nephritis	21	...	...	...	...	...	...	1	...	1	1	8	10	11	...	
Puerperal sepsis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Other accidents and diseases of pregnancy and parturition	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Congenital debility and malformation, premature birth	12	12	...	...	...	...	...	...	...	...	...	...	...	2	...	
Suicide	4	...	...	...	...	...	...	...	...	...	...	4	...	2	...	
Other deaths from violence	8	...	...	...	...	1	...	1	...	...	...	3	1	9	...	
Other defined deaths	120	4	3	...	...	...	2	...	...	2	5	22	82	27	...	
Causes ill defined or unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	

NETT DEATHS IN THE YEAR:—

Legitimate ... 23
 Illegitimate ... 1

NETT BIRTHS IN THE YEAR:—

Legitimate ... 452
 Illegitimate ... 27

TABLE IV.

INFANT MORTALITY.

1923. Nett Deaths from stated causes at various Ages under 1 Year of Age.

CAUSE OF DEATH.		Under 1 Week.	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 1 Year.
All causes	Certified ...	10	2	1	—	13	5	2	3	1	24
	Uncertified	—	—	—	—	—	—	—	—	—	—
Small-pox ...		—	—	—	—	—	—	—	—	—	—
Chicken-pox ...		—	—	—	—	—	—	—	—	—	—
Measles ...		—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...		—	—	—	—	—	—	—	—	—	—
Diphtheria and Croup ...		—	—	—	—	—	—	—	—	—	—
Whooping-cough ...		—	—	—	—	—	—	—	—	—	—
Diarrhoea ...		—	—	—	—	—	—	—	—	—	—
Enteritis ...		—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis		—	—	—	—	—	—	—	1	—	1
Abdominal Tuberculosis ...		—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases ...		—	—	—	—	—	—	—	—	—	—
Congenital Malformations ...		—	—	—	—	—	—	—	—	—	—
Premature Birth ...		8	1	—	—	9	—	—	—	—	9
Atrophy, Debility and Marasmus ...		1	1	—	—	2	1	—	—	—	3
Atelectasis ...		—	—	—	—	—	—	—	—	—	—
Injury at Birth ...		—	—	—	—	—	—	—	—	—	—
Erysipelas ...		—	—	—	—	—	—	—	—	—	—
Syphilis ...		—	—	—	—	—	2	—	—	—	2
Rickets ...		—	—	—	—	—	—	—	—	—	—
Meningitis (not Tuberculous) ...		—	—	—	—	—	—	—	—	—	—
Convulsions ...		—	—	—	—	—	—	—	—	—	—
Gastritis ...		—	—	—	—	—	—	—	—	—	—
Laryngitis ...		—	—	—	—	—	—	—	—	—	—
Bronchitis ...		—	—	1	—	1	1	—	1	—	3
Pneumonia (all forms) ...		1	—	—	—	1	1	1	1	—	4
Suffocation (overlying) ...		—	—	—	—	—	—	—	—	—	—
Other causes ...		—	—	—	—	—	—	1	—	1	2
Totals ...		10	2	1	—	13	5	2	3	1	24

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

A summary follows of the notifiable infectious diseases which occurred during each month of the year 1923. 82 cases were notified during the year.

Seasonal Incidence of Acute Infectious Diseases, 1923.

Month.	Scarlet Fever.	Diph- theria.	Enteric Fever.	Erysip- elas.	Ophthal- mia Neona- torum.	Encep- halitis lethar- gica.	Pneu- monia.
January	2	1	...	1	1	...	3
February	2	1	...	1	...	...	2
March ...	...	...	...	2	...	...	1
April ...	...	...	...	1	...	3	1
May ...	2	...	1	...	...	...	...
June ...	...	...	...	2	...	...	...
July ...	...	3	...	3	...	...	2
August ...	3	...	3	...	...	...	...
September	6	2	...	1	...	...	1
October	8	...	...	1	1	...	...
November	6	3	...	2	1	...	1
December	4	1	...	...	...	...	3
Total ...	33	11	4	14	3	3	14

Tuberculosis.—Of the 34 deaths from Tuberculosis, 3 had not been previously notified. In each case the practitioner notifying the death was written to, the omission to notify being pointed out, and a request made for the notification to be sent.

Ophthalmia Neonatorum.—Three cases of this disease were notified, all were treated at home, and all made complete recovery.

Scarlet Fever.—This disease was not prevalent during 1923, the total number of cases which occurred being 33, of which 31 were admitted to the Isolation Hospital. There was one "return" case during the year.

It is well known that enlarged and unhealthy tonsils and adenoids retain scarlet fever infection for many months

after an attack and are fertile sources of spread of infection. In two instances tonsils and adenoids were removed from children while in the Isolation Hospital convalescing from scarlet fever.

Diphtheria.—Eleven cases were notified during the year, and one death occurred. The incidence in 1923 is much smaller than it has been in any other year since bacteriological facilities rendered notification accurate. The figures from 1913 to 1923 are as follows :—

	Number of	
	Cases.	Deaths.
1913	129	4
1914	154	1
1915	83	5
1916	53	7
1917	40	1
1918	23	1
1919	57	7
1920	64	2
1921	32	1
1922	26	0
1923	11	1

Diarrhoea and Enteritis.—No deaths in the year are attributed to this condition.

Typhoid and Para-Typhoid Fevers.—Four cases, all of Para-Typhoid Fever, were notified during 1923; in three instances the disease was contracted elsewhere, two being visitors to the town, and the third returning ill from a holiday. In the fourth case it was not possible to trace the source of infection though a certain amount of suspicion was attached to the eating of strawberries about the probable date of infection.

Encephalitis Lethargica.—Three cases of this disease were notified during the year from the General Hospital. None of the patients belonged to Tunbridge Wells.

Promotion of Public Interest in Hygiene.—In October, 1923, a competition, for which prizes were given, was held at the Town Hall in connection with the Child Welfare Centres. Questions on Mothercraft were set for competition amongst mothers attending the Welfare Centres and prizes given for the best answers.

Subjects for essays were also set for school children, prizes being given for the best essays. Babies were entered for the competition to the number of 62 and were judged by medical officers from other centres. On the occasion of the prize-giving, which took place at the Pump Room, a popular health lecture was delivered by Dr. Elizabeth Sloan-Chesser.

SUMMARY (FOR REFERENCE) OF NURSING ARRANGEMENTS, HOSPITALS, AND OTHER INSTITUTIONS AVAILABLE FOR THE DISTRICT.

Professional Nursing in the Home.—The Tunbridge Wells District Nursing Association, supported by voluntary contributions, has on its staff two nurses attending maternity cases. So far as the Corporation is concerned, the only arrangement made for the services of the Association's nurses is that, in return for a small retaining fee paid annually, a nurse's services are obtainable for attending in the home of cases such as Ophthalmia Neonatorum, Measles, Whooping Cough, etc., under the Maternity and Child Welfare Act, 1918.

Midwives.—Midwives are under the control of the County Council. The number practising in Tunbridge Wells during the year was 14.

CLINICS AND TREATMENT CENTRES.

Maternity and Child Welfare Centres.—There are two Maternity and Child Welfare Centres in the Borough, one meeting being held at the Public Health Offices every Thursday afternoon and the other at Rusthall St. John Ambulance Brigade Room each Friday afternoon.

In the case of the former, the premises belong to the Corporation, and the staff consists of the Corporation Medical Officer and the Child Welfare Nurse, assisted by a number of ladies who give their services voluntarily ; a similar arrangement prevails at the Rusthall Centre, save that an annual subsidy is paid to the St. John Ambulance Brigade for the use of the premises, heating, lighting and cleaning, the Medical Officer and Child Welfare Nurse being assisted in this instance by the ladies of the Rusthall detachment of the St. John Ambulance Brigade.

The total number of attendances on Thursday afternoons at the Public Health Office Centre during 1923 was 4,550, an increase upon the previous year's attendance of 653. The Medical Officer held 1,811 consultations.

Since writing my report last year upon the unsuitable nature of these premises, the Ministry of Health has suggested that a report should be made upon the whole question. This has been done and new premises have been obtained at 35, Calverley Street. These have been approved by the Council and have been inspected and approved by representatives from the Ministry of Health. It is hoped shortly that the business of equipping and furnishing the building will be completed.

The new premises consist of a detached two-storied building, eight-roomed, and it is proposed by removing the party-wall between two of the downstairs rooms to make a large waiting-room. There is also a side passage by which

perambulators can be wheeled to a shelter to be erected in the garden. In this way some of the chief difficulties under which the work has been carried on in Calverley Parade will be removed.

With regard to the outlying centre at Rusthall, the total number of attendances during the year was 1,232, as compared with 1,411 in 1922. This slight diminution corresponds with fewer births in the district. The establishment of a centre in their midst is much appreciated by the mothers of Rusthall and Denny Bottom, to whom the long journey to the Health Office Centre formerly made any but rare attendances a matter of difficulty.

The Maternity and Child Welfare Nurse, in addition to arranging the work of these Centres, and the organising of the Baby Competition, paid the following home visits during the year :—

First visits to infants	...	...	...	...	404
Subsequent visits to infants	...	...	...	...	1,703
Visits to children, 1 to 5 years	...	...	...	...	4,113
Visits to expectant mothers	...	...	...	...	184
					—
					6,404
					—

A Sub-Committee of the Maternity and Child Welfare Committee dealt with applications for assistance under the Milk (Mothers and Children) Orders, meeting on Monday mornings at the Health Offices on 37 occasions. 6,534 pints of fresh milk were granted. The Medical Officer also issued 142 certificates for milk through the Guardians. There were also issued free of cost :—56 lbs. Cod Liver Oil and Malt, 96 lbs. Dried Milk, 36 pots of Virol, 4 tins of Ovaltine, and some Liquid Paraffin, Soda Citrate, Easton's Syrup and Grey Powders.

School Clinic.—The School Clinic meets at the Health Offices, where treatment is carried out daily from Monday to Saturday, and the School Medical Officer sees cases referred to him on Tuesday and Friday mornings, and urgent cases at other times. The premises and staff are provided by the local authority. Details of work done are given under the School Medical Services in the latter portion of this Report.

There are no day nurseries in the Borough.

With regard to other Clinics in the Borough, there is a Tuberculosis Dispensary under the control of the County Council. Consultations are held by the Medical Officer on Mondays and Thursdays at specified hours. There is also at the General Hospital a centre for the treatment of venereal disease, with clinics twice a week.

Hospitals provided or subsidised by the Local Authority.

—The Tunbridge Wells Isolation Hospital is situated near the southern boundary of the Borough and is 500 feet above sea level. This hospital has 57 beds; scarlet fever, diphtheria, and enteric fever are treated, also other infectious diseases as occasion requires.

The hospital is an excellent one, and all that is needed to complete it is the extension of the administrative block, sanctioned by the Local Government Board in 1914, but not yet carried out.

Smallpox and plague are provided for at the Dislingbury Hospital, Capel, which has 20 beds, and is a joint hospital for Tunbridge Wells, Tonbridge and Southborough.

These are the only hospitals directly supported by the Borough Council. The County Council provides various institutions for the treatment of Tuberculosis, but none of these are situated in the Borough of Tunbridge Wells.

There are in addition, three voluntary hospitals, viz. :— The General (86 beds), Eye and Ear (14 beds and 2 cots), and Homoeopathic (21 beds), all of which cater for a wide area surrounding Tunbridge Wells.

AMBULANCE FACILITIES.

(a) For infectious cases.

At present there are two ambulances, one used for scarlet fever and one for diphtheria and other cases ; horses are hired in the town to take these to the houses of cases as they occur and to bring the patients back to the Fever Hospital where the ambulances are kept. This procedure, as can easily be imagined, is somewhat slow, and there is no doubt that the provision of a motor ambulance would be of great advantage to the patients who are being removed, sometimes in a dangerously ill condition. Apart from the initial cost of fitting up such an ambulance, there would be little difference in the annual cost of transport.

(b) For non-infectious and accident cases.

The local branch of the St. John Ambulance Brigade possesses two motor ambulances and one stretcher on a carriage for such cases. The Corporation also has under the charge of the Chief Constable a motor ambulance and three stretchers on carriages. This motor ambulance is a new and useful feature for street accidents work.

LABORATORY WORK.

There is a well-equipped laboratory at the Health Offices. Examinations are made of specimens for the detection of Diphtheria and also in connection with school medical work for Ringworm of the head and various other conditions as they arise. There is also at Maidstone a County Laboratory, where examinations for Tuberculosis are made, and in which specimens are tested for virulence in the case of Diphtheria

carriers ; other special work which may arise can also be carried out at this laboratory.

Owing to the remarkably low incidence of Diphtheria throughout the year, and to the almost complete disappearance of ringworm of the scalp in the latter part of the year, the work in the Borough laboratory was lighter than usual.

The following is a record of work done in the Tunbridge Wells laboratory during 1923 :—

Specimens from Isolation Hospital patients	...	59
Outside specimens from suspected Diphtheria cases and contacts		227
Hairs for Ringworm		36
Smears for Vincent's Angina		2
Other specimens (Urine, 2 ; Sputum, 1)		3
Total number of specimens examined		327

In addition, the following specimens were forwarded from this department to the County Laboratory at Maidstone, to be examined and reported upon :—

RESULT.

55 for Tubercle Bacillus.	11 Positive.	44 Negative.
8 „ Enteric.	4 „	4 „
4 „ „ from Isolation Hos-		
pital	2 „	2 „
18 „ Diphtheria.	1 „	17 „
3 „ „ from Iso-		
lation Hospital	0 „	3 „

Diphtheria anti-toxin is issued free of cost for the use of doctors in the Borough, a supply being kept at the Public Health Offices and being immediately available upon request from a medical man. Anti-tetanic serum and anti-influenza vaccine are also supplied to medical men on request.

Chemical tests of water and foodstuffs are made by the public analyst. The work done is reviewed under the Food and Drugs Act, and a recent chemical and bacteriological analysis of the Tunbridge Wells water supply, which is obtained from deep wells and springs, is appended herewith :—

**Specimen from 15in. Main in Pembury Road.
Chemical Analysis.**

<i>Description.</i>	<i>Parts per 100,000.</i>		
Free and Saline Ammonia ...	...	...	0.0040
Albuminoid Ammonia ...	...	...	0.0030
Oxygen absorbed at 80° F.	} in 15 minutes	...	0.0096
		in 4 hours	0.0167
Nitric Nitrogen ...	...	...	0.24
Chlorine ...	...	...	2.4
Equivalent to Sodium Chloride ...	...	...	3.6
Total Solid Matter (dried at 180° C.)	...	...	18.0
Appearance in two-foot tube ...	...	...	Colourless and clear.
Metals (Lead, Copper, Zinc, Iron) ...	...	...	Slight trace of Iron.
Temporary Hardness ...	...	...	3.75
Permanent Hardness ...	...	...	4.00

BACTERIOLOGICAL ANALYSIS.					
Description of Sample.	No. of organisms per cubic centimetre capable of growing.		B. Coli Communis Presumptive Test.		
	On standard gelatin in 4 days at 22° C.	On standard Agar-Agar in 24 hours at 37°—38° C.	100. c.c.	10. c.c.	1. c.c.
From 15in. Main in Pembury Road on 24 March, 1924 ...	15	2	—	—	—

The Tunbridge Wells Improvement Act, 1890.—This Act has been in force since 1890, and of this Act parts 2, 3, 4, 6, 7 and 12 relate to Public Health, dealing with water supply,

sanitary provision of buildings and streets, common lodging houses, infectious diseases, slaughter houses, and public baths.

The Public Health Amendment Act, 1907.—Of this Act the following sections have been adopted :—

Part I. Sections 1—14.

„ II.	„	17, 21—24, 26—30, 32 and 33.
„ III.	„	34—42, 45, 47—51.
„ IV.	„	52—66, 68.
„ V.	„	69—75.
„ VI.	„	76, 77.
„ X.	„	93 and 95.

SANITARY ADMINISTRATION.

A tabular summary of the work of the Sanitary Department during the year, and action taken under the Public Health Acts or bye-laws, etc., mentioned above, is set out below :—

57	Complaints received and investigated.
8	Premises in respect of which statutory notices have been served.
37	Premises in respect of which informal notices have been served.
156	Houses, drains and sanitary fittings inspected.
743	Visits of re-inspection or to work in course of progress.
10	Drains re-constructed.
22	Drains repaired.
46	Choked drains cleared and cleansed.
51	Inspection chambers constructed.
4	Inspection chambers repaired.
13	Drain ventilation shafts erected or repaired.
8	Soil pipes erected.
6	Soil pipes repaired.
41	W.C.'s re-constructed and provided with flushing apparatus.
11	Flushing apparatus repaired.
77	Efficient traps substituted for inefficient ones.
37	Rain-water and waste pipes disconnected from drains or repaired and made to discharge over properly trapped gullies.
30	Yards and areas paved or paving repaired.
6	New w.c. buildings and apparatus constructed.
12	W.C.'s cleansed and repaired.
11	New sinks provided.
21	New lavatory basins provided.
47	Old sinks provided with new waste pipes.
22	Eaves gutters repaired.
53	Doors repaired.
42	Windows repaired.
49	Walls repaired.
41	Floors repaired.
23	Air inlets under floors provided.
17	Roofs repaired.

- Rooms ventilated to the outer air.
- Food cupboards ventilated to the outer air.
- New food cupboard provided.
- 30 Houses provided with sufficient supply of water.
- 1 Sample of water submitted for analysis.
- 134 Rooms cleansed and limewashed.
- 40 Dustbins provided or repaired.
- 77 Various improvements.
- 46 Hours' observation work.
- 218 Special inspections of back yards and premises.
- 25 Inspections of stable yards and manure pits.
- 27 Offensive accumulations removed.
- Pigs removed.
- Stables paved and drained.
- 93 Visits *re* destruction of rats.
- 88 Inspections of slaughter houses.
- 201 Inspections of cowsheds, dairies, and milkshops.
- 41 Inspections of common lodging houses.
- 223 Inspections of food shops.
- 204 Parcels of food examined.
- 1831 lbs. food unfit for human consumption seized and destroyed.
- 292 Visits, interviews, etc., *re* work to be carried out.
- 62 Special inspections of urinals at licensed premises.
- 43 Workrooms limewashed.
- 3 Workrooms measured up for air space.
- 192 Visits to workshops.
- 6 Visits *re* overcrowding.
- Works carried out under the Infectious Diseases Acts**
- 166 Visits to infected houses.
- 156 Rooms disinfected.
- 2380 Articles of clothing disinfected.
- 7 Loads of bedding removed to the disinfectors and returned to the respective owners.
- 2 Visits to disinfect public buildings, including Hospitals, etc.
- 10 Loads of bedding destroyed.
- 23 Visits to flush W.C.'s and drains.

SLAUGHTER HOUSES.—There are six private slaughter houses in the town, five registered and one licensed annually. 88 inspections have been made of these premises, in order to inspect so far as possible the carcasses of animals slaughtered and to see that the removal of offal, cleansing and limewashing were carried out in accordance with the bye-laws.

The five registered slaughter houses are old buildings and in three instances in close proximity to dwellings, and for this reason are somewhat objectionable; the owners must be given credit however for having kept them in a cleanly condition.

DAIRIES AND COWSHEDS.—At the end of 1923 there were 64 names on the registers, namely, 10 as wholesale producers and 54 as retail purveyors. 20 inspections have been made in order to see that the bye-laws are complied with.

DISINFECTION AND DISINFESTATION.—In all cases of infectious disease and in many cases of vermin infestation, the disinfection of rooms, bedding and clothing is carried out either by or under the supervision of the sanitary staff. There are two disinfectors at the Sanatorium, and one near the Public Health Offices. Formalin, Bacterol, and Sulphur Gas are used according to circumstances. Bedding, etc., is removed to the disinfectors and returned to the owners in specially constructed vans, separate vans being used for collection and return.

SALE OF FOOD AND DRUGS ACTS, ETC., AND FOOD INSPECTION.—One hundred and seven samples of food were submitted to the Public Analyst and reported upon as follows :

Description of Samples.	No of Samples.	Analyst Report.	Proceedings.
	41	Genuine.	
Milk	44 { 1 No. 28 1 No. 30 1 No. 33	8% deficient in fat 2½ of extraneous water 3% of extraneous water and coloured with annatto.	Vendors cautioned (see note in text)
Butter	12	Genuine	
Lard	4	"	
Cheese	4	"	
Margarine	4	"	
Jam	4	"	
Sugar	2	"	
Mustard	1	"	
Ditto Condiment	1	"	
Pea Flour	2	"	
Cocoa	5	"	
Sago	2	"	
Tapioca	2 { 1 No. 54 1	50% of Sago Genuine	Letter to vendor
Arrowroot	2	"	
Olive Oil	2	"	
Shredded Suet	1	"	
Ditto and Rice Flour	1	"	
Sponge Cakes	3	"	
Ammoniated Tincture of Quinine	4	"	
Camphorated Oil	4	"	
Boric Ointment	3	"	

The average solids of the 44 milks analysed (including the three returned as adulterated) were as follows :—

Milk fat, 3.60. Non-fatty solids, 9.2.

Eighteen of the samples were formal, 89 informal, 17 samples were obtained in the public street, and series sampling by the service of deputies was frequently carried out.

Sample No. 28 was informal and taken at the request of the retail purveyor ; an attempt was made to obtain a formal sample from the wholesale producer, but it was ascertained that the retail purveyor had cancelled the supply. Sample No. 30 : The Vendor was cautioned in regard to the $2\frac{1}{2}$ per cent. of extraneous water, the fat content was 3.70, the sample was the last pint of a five-gallon can. A subsequent sample proved genuine. Sample No. 33 was taken from a retail purveyor at his request, in consequence of the result obtained of several samples that he had previously had tested (the fat content was 3.66). A sample was procured from the wholesale producer the following day, which proved genuine. There is reason to believe that the wholesale producer became aware of the fact that a sample had been taken from the retailer. Two subsequent samples proved genuine.

No action was taken under the Margarine Act, 1887, or the Butter and Margarine Act, 1907.

All the samples were submitted to the Public Analyst by the Chief Sanitary Inspector, who is the officer appointed to carry out the provisions of the Acts.

PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912 AND 1917.

Report for the year ended 31st December, 1923.

(1.) *Milk ; and Cream not sold as preserved cream.*

	(a) Number of Samples examined for the pre- sence of a preservative.	(b) Number in which a preservative was re- ported to be present and percentage of pre- servative found in each sample.
Milk ...	44	Nil
Cream	6	„

Nature of preservative in each case in column (b) and action taken under the regulations in regard to it.

(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 :—

(i.) Correct statements made	...	...	4
(ii.) Statements incorrect	...	...	Nil

iii.	Percentage of Pre- servative found in each Sample.	Percentage stated on Statutory Label.
G	0.40	0.4
H	0.40	0.4
I	0.32	0.4
J	0.37	0.4

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

(i.) Above 35 per cent.	...	...	4
(ii.) Below 35 per cent.	...	...	Nil
Total	...	...	4

- (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 to preserved cream. Action taken where found ... Nil
- (4.) *Other observations, if any.*
All the cream samples were obtained by a deputy, informally.

OTHER FOODS.—Sixteen hundredweights one quarter and eleven pounds of food were seized and dealt with. No action was taken beyond seizure, no attempt having been made to sell the goods for human consumption.

PUBLIC HEALTH STAFF.

A statement of the staff of the Public Health Department is given at the beginning of this report. The two health nurses are also school nurses, one-fifth of their time being devoted to Health work and four-fifths to School Medical services. In addition to the regular members of the Public Health Department mentioned on the front page of the report, Dr. C. Elliott, M.R.C.S., L.R.C.P., is appointed to take holiday duty during the Medical Officer's annual leave.

The Chief Sanitary Inspector, Mr. J. Cave, is also Inspector under the Food and Drugs Act, and the two health visitors and school nurses, in addition to being fully trained nurses, hold certificates of proficiency in school nurses' and health visitors' work, from approved bodies. The Maternity and Child Welfare nurse, who was appointed in July, 1921, possesses the Royal Sanitary Institute's certificate for health visitor, school nurse, and tuberculosis nurse. She also has the Central Midwives Board certificate, the York Road Hospital certificate of training, and some training at a General Hospital, besides four years' previous experience

as a health visitor and maternity and child welfare nurse.

Contributions are made :—

- (a) Under the Public Health Act towards the salaries of the Medical Officer of Health and Chief Sanitary Inspector.
- (b) By Exchequer grants towards the salaries of the School Medical Officer, Ophthalmic Surgeon, Dental Surgeon, School Nurses, and Chief Clerk of the Health Offices, whose time is equally divided between health and school medical duties. There is also a contribution towards the part-time services of Dr. C. Elliott, who assists with school medical inspections up to the number of one thousand routine inspections annually.
- (c) By Exchequer grant towards the salaries of the Medical Officer for Maternity and Child Welfare and of the Maternity and Child Welfare nurse.
- (d) By Exchequer grant towards the fees of the Analyst under the Food and Drugs Act.

HOUSING.

Number of new houses erected during the year :—

(a) Total	...	...	...	...	...	...	32
(b) As part of a municipal housing scheme	...						Nil.

I.—UNFIT DWELLING-HOUSES.

I.—Inspection.

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	...	156
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	...	...	...	...	...	46
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	...	Nil.
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	...	28

II.—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	...	...	...	...	...	39
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III.—Action under Statutory Powers.

A. <i>Proceedings under section 28 of the Housing, Town Planning, etc., Act, 1919.</i>			
(1)	Number of dwelling-houses in respect of which notices were served requiring repairs...	...	8
(2)	Number of dwelling-houses which were rendered fit—		
	(a) by owners	...	8
	(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.
B. <i>Proceedings under Public Health Acts.</i>			
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	45
(2)	Number of dwelling-houses in which defects were remedied—		
	(a) by owners	...	67
	(b) by Local Authority in default of owners	...	Nil.
C. <i>Proceedings under sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909.</i>			
(1)	Number of representations made with a view to the making of Closing Orders	...	Nil.
(2)	Number of dwelling-houses in respect of which Closing Orders were made	...	Nil.
(3)	Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	...	Nil.
(4)	Number of dwelling-houses in respect of which Demolition Orders were made... ..	...	Nil.
(5)	Number of dwelling-houses demolished in pursuance of Demolition Orders	...	Nil.

BOROUGH OF ROYAL TUNBRIDGE WELLS.

EDUCATION COMMITTEE :

The Ven. Archdeacon A. T. SCOTT, M.A. (Chairman).

Mr. Alderman ELWIG.
Mr. Alderman SILCOCK.
Mr. Alderman WILLMOT.
Councillor Miss BAKER.
Mr. Councillor BERWICK.
Mr. Councillor GILBERT.
Mr. Councillor OATEN.
Councillor Miss POWER.
Mr. Councillor SAUNDERS.
Mr. Councillor WESLEY SMITH.

Mr. Councillor STAMFORD.
Mr. Councillor THORPE.
Miss MAUD ROBERTS.
The Rev. Canon A. W. OLIVER,
M.A.
The Rev. W. USHER, M.D.
Mr. J. A. PUNTON SMITH, M.B.E.
Mrs. WHITROW.
Mr. C. A. PRESTON.

STAFF OF THE SCHOOL MEDICAL DEPARTMENT :

Clerk (*part time*) :

F. HICKS.

Second Clerk (*part time*) :

Miss M. FERMER.

School Nurses (*four-fifths time*) :

Miss F. CLARK.

Miss J. DONALDSON.

School Dental Surgeon :

J. STUART SMITH, L.D.S., R.C.S.Eng.

Ophthalmic Surgeon :

D. DAVIES, M.B., M.R.C.S., L.R.C.P.

Assistant to School Medical Officer (*part time*) :

C. ELLIOTT, M.R.C.S., L.R.C.P.

School Medical Officer :

F. C. LINTON, M.A., M.B., Ch.B., D.P.H.

Report to the Education Committee.

BY

F. C. LINTON, M.A., M.B., Ch.B., D.P.H.,
School Medical Officer.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present to you my Report upon the work of the School Medical Department during the year 1923.

On December 31st, 1923, there were within the area of the Borough no provided schools and 18 non-provided schools, including 26 departments, with recognised accommodation for 5,122 children. The average attendance during the year was 3,506.

The arrangement of the Report follows the lines of the suggestions made in the Board of Education's Memorandum accompanying Form 6M of December, 1920.

The Board has, however, in a circular dated 27th December, 1923, arranged to modify the Tables required to be prepared with the Report. The modifications which are made somewhat lighten the labour involved in preparation; Tables V. and VI., which are summaries, are omitted and one or two other minor changes have been made.

I am,

Ladies and Gentlemen,

Your obedient Servant,

F. C. LINTON.

STAFF.

On the first page of this Report are set out the names of the Staff, which remained unchanged during the year 1923.

The terms of Dr. C. Elliott's appointment to assist in the work of the School Medical Inspections were as before, his inspections being limited to not more than 1,000 children per annum.

CO-ORDINATION.

(a.) **Infant and Child Welfare.**—The School Medical Officer is also the Medical Officer responsible for Child Welfare under the Maternity and Child Welfare Act. The Maternity and Child Welfare Nurse and the two School Nurses are under the School Medical Officer's direct control, and co-ordination of the work is therefore complete.

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

(c.) **The Care of Debilitated Children under School Age.**—Debilitated children under school age were assisted under the Milk (Mothers' and Children's) Rescission Order, 1921, and by giving certificates for relief from the Guardians where medical grounds necessitated additional nourishment: 142 such certificates were given by me during the year.

When change of air was required for a child of school age or under, the Invalid Children's Aid Branch of the Charity Organisation Society has taken the case in hand and made all arrangements.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

School Hygiene.—The sanitation of the Schools is good, but many of the buildings are poorly lighted, lacking in play space, and inadequately equipped with cloak-room

accommodation, or with suitable screens upon which to hang the children's clothes. Arrangements for drying clothes and boots in most schools in Tunbridge Wells are non-existent.

There is but one school in the Borough, viz., Rusthall Girls' School, which approaches at all nearly to the hygienic requirements of the modern school.

Medical Inspections.—Three age groups were inspected, viz.:—Entrants, Intermediates (8 to 9 years of age), and Leavers (12 years of age and upwards). The total number of Routine Inspections was 1,256. (See Table I. at end of Report.) In addition, 340 children were medically re-inspected in the schools. At the School Medical Centre 544 special inspections and 602 re-inspections took place. The total number of inspections was therefore 2,742.

The Board's Schedule of Medical Inspection was completely followed.

Crippling defects were ascertained, either through the School teachers, at Medical Inspections, or at the School Medical Centre.

School inspections were invariably made in the afternoons, 25 children being arranged for at each session.

FINDINGS OF MEDICAL INSPECTIONS.

Uncleanliness.—Much careful attention was given to this matter as in the past two years, and a marked improvement has been noted in some of the schools.

The total number of inspections for the presence of vermin was 10,714. Every child was, on the average, inspected thrice during the School year, that is, once in each session, in accordance with the Board of Education's requirements. Of this total, 553 were re-inspections made at School and 141 re-inspections made at the School Medical Centre. The

School Nurses selected 27 cases in which the parents for one reason or another found difficulty in clearing the children's heads from nits, and treated them with a special nit comb at the School Medical Centre, the Nurse spending on the average an hour over each case, continuing until the last nit was removed from the hair.

The following Table records the work done by the School Nurses at the routine head inspections, and the conditions found :—

INSPECTIONS OF HEADS FOR YEAR 1923.

SCHOOL.	No. of Heads inspected.	No. in whom Nits only were found.	No. in whom Vermin found (head or body).	Percentage of Nits or Vermin found, 1923.	Percentage of Nits or Vermin found, 1922.	Percentage comparison with 1922. + indicates increase. — " — decrease. O " stationary.
St. James', Boys ...	777	10	6	2.1	5.2	—
" Girls ...	653	46	12	8.9	8.6	O
" Infants ...	644	28	6	5.3	5.8	O
St. Barnabas', Boys ...	329	20	15	10.6	19.5	—
" Girls ...	327	56	7	19.2	23.2	—
" Infants ...	322	31	12	13.4	14.4	—
St. John's, Boys ...	377	12	8	5.3	7.0	—
" Girls ...	406	72	9	19.9	25.9	—
Down Lane ...	216	13	1	6.5	8.9	—
St. Luke's ...	235	22	16	16.2	20.6	—
St. Augustine's ...	309	44	30	23.9	31.3	—
Grosvenor ...	347	9	1	2.9	4.7	—
Royal Victoria ...	590	19	6	5.0	7.7	—
Basinghall ...	350	29	15	12.6	15.6	—
Holy Trinity ...	270	45	2	17.4	24.9	—
St. Peter's, Boys ...	401	16	4	5.0	15.6	—
" Girls ...	314	44	10	17.2	24.9	—
" Infants ...	142	12	2	9.9	28.8	—
Rusthall, Boys ...	601	35	5	6.3	10.9	—
" Girls ...	616	76	5	13.1	28.0	—
" Infants... ..	354	34	10	12.4	13.8	—
Murray House ...	565	23	0	4.1	4.7	—
King Charles' ...	441	2	1	0.7	1.3	—
Christ Church ...	192	30	6	18.7	34.2	—
St. Mark's, Mixed	225	17	2	8.4	19.3	—
" Infants	107	19	1	18.7	15.8	—
TOTALS ...	10,020	764	192	9.5	14.7	

The figures for individual schools vary greatly, chiefly on account of the class of child which attends, but also, as the lowered percentages shew, according to the exertions made by the teachers to keep their schools clear of this infestation. Taken as a whole, the reduced percentage of children infested is a fitting encouragement and reward for the time and trouble spent over this unnecessary evil. The numbers this year shew a considerable reduction so far as "nits only" are concerned, but there is a rise in the number of cases in which live vermin have been discovered, due to an increase in one or two schools, which more than counterbalances the decrease in others. Cleanliness in this respect depends largely upon the keenness of the Head Teacher in discovering and excluding as early as possible any child with live vermin in her hair, informing the School Nurses so that the matter may be dealt with.

A Card is issued to the parents of each child on whom vermin or their eggs are found, worded as follows :—

(FRONT.)

" Tunbridge Wells Education Committee.

I am sorry to find that the head of your child..... is in need of attention. The trouble can be cured easily if you follow the directions given on the other side of this card.

It is hoped that by promptly following the doctor's directions you will aid the Managers and Teachers in preventing the spread of vermin from one child to another.

Signed.....

Medical Inspector,

School Nurse, or Head Teacher,

.....School.

N.B.—This Card must be enclosed in an envelope.

All communications respecting this matter should be sent to the School Medical Officer, 9, Calverley Parade, Tunbridge Wells."

(REVERSE.)

“Instructions for Cleansing Heads.

A CURE MAY BE EFFECTED WITHIN A WEEK.

Even clean children are liable to become infested with vermin, and it is therefore necessary to examine the hair every week at least, daily if possible.

Paraffin oil should be rubbed in thoroughly, and a towel tightly wrapped turban-wise round the head, covering up the scalp entirely. If nits are present, the towel should be left on overnight, to make sure they are all killed.

After the towel is taken off, the head should be thoroughly shampooed with soap and hot water and the hair treated by rubbing in strong vinegar while damp. It should then be combed with a fine comb to remove dead lice and nits. The combing should be repeated till the last nit has gone.

The addition of 5 per cent. (one tablespoonful to half a pint of paraffin oil) of Sassafras oil, oil of Eucalyptus or oil of Cedarwood is useful, as the insects are more quickly killed.

CAUTION.—Do not apply the paraffin near a naked light.

Note.—When sores are present, these should be treated at the School Medical Centre (9 to 10 a.m.) or elsewhere, before treatment with vinegar.”

F. C. LINTON, M.B., Ch.B.,
School Medical Officer.

This card may be sent to the parent by the Head Teacher who notices a child to be in a verminous or nitty condition in School, or by the School Nurse at a routine inspection, or by the School Medical Officer.

Where live vermin are discovered, children are excluded from school for a week, during which time every effort is made to aid the parents in getting the child thoroughly clear of the trouble.

Where parents have proved obdurate to all advice and the children have remained in a verminous and nitty condition, prosecution has been undertaken under the School Attendance Bye-Laws in eight cases. I attended as School Medical Officer to give evidence in each case. Fines were imposed as follows :—In two cases, 5s., including costs ; in five cases, 10s., including costs ; and in one case, 15s., including costs. These fines and the publicity attending the matter have had a salutary effect in the Schools concerned and have contributed materially to the improvement in the general standard of cleanliness.

Tonsils and Adenoids.—89 children received operative treatment for defects of the nose and throat in 1923, as compared with 84 in 1922. 66 of the 89 were treated under the Local Education Authority's arrangements with the hospitals. The average sum paid for these operations by the parents was 6s. 5d.

Dental Treatment.—As before, three sessions per School week, lasting $2\frac{1}{2}$ hours each, were held. Mr. Stuart Smith has now established himself in the good graces of the children's parents and the percentage of children treated has risen from 60 per cent. in 1922, to 72 per cent. in 1923, shewing that the personal element has much to do with the response of the parents to the advice to have their children's teeth attended to. This increased percentage of treatment has taken place in the face of the commencement to charge a small fee for treatment at the clinic, thus clearly shewing that the charge has proved no deterrent when a parent is anxious to have his child's health attended to.

A charge of one shilling for an administration of gas has been made since the clinic was started. In addition to this, a charge of sixpence per child treated has been made since 1st January, 1923, this sum being remitted in necessitous cases.

The work done by the Dental Surgeon has been largely conservative and is thus in accordance with the aims of the Board of Education.

The details of the work done are given in Table IV., Group IV.

INFECTIOUS DISEASE.

The following Closures of Class or Departments were made during 1923 :—

SCHOOL.	CLASS OR DEPARTMENT.	REASON.	PERIOD OF CLOSURE.	
			FROM	TO
Christ Church ...	Class III. ...	Measles ...	23/7/23	27/7/23

FOLLOWING UP.

The two School Nurses are present at Medical Inspections and at the Medical Inspection Centre, and follow up at the homes all cases referred for treatment or for further observation by the Medical Officer. The following Table specifies the work done in 1923 :—

Visits to Houses where the following Diseases have occurred.	1st Visits.	2nd Visits.	TOTAL.
Scarlet Fever	2	—	2
Diphtheria	2	—	2
Measles	22	19	41
German Measles	3	7	10
Mumps	52	61	113
Whooping Cough	2	2	4
Chicken Pox	96	117	213
Sore Throat	42	1	43
Ringworm (scalp)	9	2	11
„ (body)	2	—	2
Verminous Heads	25	4	29
Verminous Bodies	1	—	1
Impetigo Contagiosa	10	8	18
Scabies	5	—	5
Infectious Eye Disease	—	—	—
Other Diseases	10	4	14
Totals	283	225	508

Visits paid to Elementary Schools for Medical Inspections	...	58
Number of Children prepared for Medical Inspections	...	1480
Number of Children prepared for Ophthalmic Surgeon	...	629
Number of Children prepared for Dental Inspection	...	545
Visits paid to Elementary Schools for Dental Inspections	...	17
Other Visits to Elementary Schools	...	73
Home " " " " " for Head Inspections	...	122
Visits arising out of Medical Inspections and for other information	...	2184
Cultures taken	...	22
Number of Heads Inspected	...	10714
" " found with Nits only	...	764
" " " " Vermin	...	192
Number of Children found with Body Vermin	...	12

In addition, the School Nurses attend the School Medical Officer, Ophthalmic Surgeon and the Dental Surgeon, during their sessions at the School Medical Centre, and carry out the daily treatment of minor ailments. Miss Clark and Miss Donaldson, who acted throughout the year, have maintained a high standard of work, sparing themselves in no way to carry out their duties efficiently and conscientiously.

MEDICAL TREATMENT.

(a.) **Minor Ailments.**—1,325 attendances were made for treatment by the School Nurses.

(b.) **Tonsils and Adenoids.**—66 cases were operated upon under the Local Education Authority's Scheme, 23 being operated upon under other arrangements, and of 242 cases recommended to have medical treatment, 113 received treatment.

(c.) **Tuberculosis.**—When a child suffering or suspected to be suffering from a tuberculous complaint is discovered, a note is given to the parent to take to the Medical Officer at the Tuberculosis Dispensary, where the child is kept under observation for treatment, and attends also at the School Medical Centre at intervals, varied according to the duration and severity of the tuberculous condition.

(d.) **Skin Disease.**—This is treated at the School Medical Centre when the condition is a minor one. 81 cases were treated at the School Medical Centre during 1923. Severe

skin disease usually is treated at the General Hospital. There was a marked diminution in the number of cases of ringworm of the scalp, thus lightening the treatment work of the Centre.

(e.) **External Eye Disease.**—Directions for treatment are given to the parent and cases are kept under observation at the School Medical Centre, being generally seen by the Ophthalmic Surgeon. 17 cases were dealt with in this manner during 1923.

(f.) **Vision.**—All children showing defective vision are brought under the care of the Ophthalmic Surgeon at the School Medical Centre. It should be noted that, in 1923, glasses were prescribed for 69 children, and of these 65 obtained the glasses.

The number of children with defective vision has decreased greatly, and I am of opinion that this lesser number is likely to continue, as defective diet and under-nourishment during the war years and the years immediately succeeding, accounted for a certain amount of eye strain and defective sight. This has now ceased. Arrangements are therefore being made for a reduced number of sessions in the year 1924-5, as it is believed that the Ophthalmic Surgeon can deal effectively with the cases which present themselves if only two-thirds of the present number of sessions are held.

Arrangements were made with the Surgical Aid Society for the provision of Letters for spectacles in cases in which the parents are unable to pay the full cost.

To prevent over-lapping of Charities or assistance being given in unsuitable cases, the Optician has instructions not to accept Letters for spectacles unless these are initialled by the School Medical Officer.

(g.) **Squint.**—Operations for squint were performed upon Elementary School children in six cases at the Eye and Ear Hospital during the year 1923.

(h.) **Ear Disease and Hearing.**—These defects, if due to conditions such as wax, are treated at the School Medical Centre ; major defects are referred to the Eye and Ear Hospital.

(i.) **Crippling Defects and Orthopædics.**—There is no special treatment in connection with the Schools for these conditions. They are usually referred to the General Hospital if treatment is required. In the hospital there is a room specially fitted with apparatus for remedial exercises.

OPEN-AIR EDUCATION.

There is no Open-Air School at present in Tunbridge Wells.

By the kindness of a lady in the Borough, a small class for children, whose physical condition prevents their attending ordinary school, has been held at a private house for two hours twice weekly, the average attendance being about 10.

It appears to me that the time is ripe for considering what arrangements can be made for establishing an Open-Air School or Class for physically defectives, so that Tunbridge Wells children may share in the benefits which experience has shown to be derived from such Schools in the many districts in which they have been established.

It has been proved that not only the child suffering from permanent physical defects which unfit him for the wear and tear of ordinary school life, but also the child whose health is lowered temporarily for one reason or another, derives marked benefit from attendance at an open-air school. The benefit is not only physical, as teachers have again and again testified to the marked mental brightening-up shewn by children in open-air schools.

PHYSICAL TRAINING.

This is undertaken at individual Schools ; there is no General Organiser for the district.

PROVISION OF MEALS.

Meals are not provided at the Schools ; during the present period of unemployment soup kitchens are open at three or four different centres for the winter months. These are largely taken advantage of by School children in the Borough.

SCHOOL BATHS.

The following are the arrangements made by the Baths Committee for School children at the Tunbridge Wells Corporation Baths and at the Open-Air Baths during the summer months :—

OPEN-AIR BATH.—The Baths Committee of the Town Council provide for instruction in swimming to scholars from Elementary Schools in the Borough attending the Open-Air Bath during School hours.

Scholars (in charge of a Teacher and bringing their own towels) are admitted to the Bath free of charge to themselves ; the Elementary School Teachers accompanying the scholars are also admitted.

The Borough Education Committee makes a payment to the Baths Committee at the rate of 10s. per week for the services of a swimming instructor, and a payment of $\frac{1}{2}$ d. in respect of each scholar admitted to the Open-Air Bath during School hours.

INDOOR SWIMMING BATH.—Scholars from the Elementary Schools in the Borough, in charge of a Teacher and bringing their own towel, are admitted to the Indoor Baths during School hours on any week-day except Monday, upon payment by the Education Committee of a charge of one penny per scholar. This arrangement came into force at the end of 1922, and is an improvement upon the former arrangements under which a small charge was made to each scholar.

CO-OPERATION OF PARENTS AND TEACHERS.

Postcards are prepared in the Health Offices and are sent to the Head Teacher prior to the holding of a Medical Inspection, for address and distribution to the parents, requesting their attendance. The percentage of parents attending at the inspections shews a slight increase and was as follows:—79 per cent. attended at the inspections of infants ; 50 per cent. at the inspections of senior boys ; and 66 per cent. at the inspections of senior girls.

CO-OPERATION OF THE SCHOOL ATTENDANCE OFFICER.

The School Attendance Officer, whose office is situated conveniently near the School Medical Centre, keeps in constant touch, and I wish to express here my appreciation of the prompt and efficient way in which he deals with all cases reported to him.

CO-OPERATION OF VOLUNTARY BODIES.

Children's Care Committees were established at St. Barnabas' School (1920) and Christ Church School (1921). These are of great assistance in following up School medical work. A School Nurse is a member of each Committee and reports to the Committee all cases in which its services are considered likely to be of use.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

These children come to notice through the Health Visitors and School Teachers and also through the Maternity and Child Welfare Centre. No special Schools for such children exist in the Tunbridge Wells area, but under arrangements made by the Education Committee the following children have been dealt with :—

(a.) **BLIND.**—A boy and a girl are inmates of certified schools for the blind at Brighton. Another girl is being trained for agricultural work, her sight not being too defective to follow this employment. She is not at a special school or institution, but living in the country with relatives. Seven other children who are suffering from marked short-sightedness are attending ordinary elementary schools.

(b.) **DEAF.**—Three children who are too deaf to benefit from ordinary elementary school training are inmates of certified schools for the deaf in Brighton.

(c.) **MENTALLY DEFECTIVE.**—Three children were sent to residential schools for mentally defective children, two more being classed as imbeciles were notified to the Local Control Authority (Kent County Council) during the year. Eight more are attending public elementary schools as there is no special class available for their instruction. Two are attending no school or institution. During 1923, twelve children were examined under the Mental Deficiency Acts, of whom three were found to be merely backward and nine were classed as feeble-minded within the meaning of the Act.

(d.) **EPILEPTICS.**—There are no very severe cases of Epilepsy, but five moderately severe cases attend public elementary schools.

(e.) **PHYSICALLY DEFECTIVE.**—The physically defective children at the end of the year numbered 19 in all, of whom 11 are attending public elementary schools. None are maintained in institutions by the local Education Authority.

NURSERY, SECONDARY, AND CONTINUATION SCHOOLS.

There are no Nursery Schools in the Borough and the arrangements for Medical Service in the Secondary and Continuation Schools are undertaken by the County Council.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

The provisions of the Act regulating such employment came into force towards the end of 1922, and 76 medical certificates were granted to fresh children attending the elementary schools, under the Employment of Children Act.

PHYSICAL CONDITIONS OF EMPLOYED CHILDREN.

The physical condition of the children applying for employment has been good, and in only three instances has a certificate been refused on medical grounds to applicants.

STATISTICAL TABLES.

The four Statistical Tables required by the Board of Education are appended, and these give detailed information of the work done in the various branches of the School Medical Service.

I am,

Ladies and Gentlemen,

Your obedient Servant,

F. C. LINTON.

TABLE I.—Return of Medical Inspections.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections—								
Entrants	...	...	...	...	...	...	...	333
Intermediates	...	...	...	...	...	...	...	286
Leavers	...	...	...	...	...	...	...	390
Total	...	...	...	...	...	...	...	1,009
Number of other Routine Inspections								
	...	...	...	...	...	...	...	247

B.—OTHER INSPECTIONS.

Number of Special Inspections...	...	...	...	...	544
Number of Re-Inspections	...	...	...	...	942
Total	...	...	...	...	1,486
Grand Total	...	...	...	...	2,742

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR
ENDED 31ST DECEMBER, 1923.

DEFECT OR DISEASE.	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.
(1)	(2)	(3)	(4)	(5)
Malnutrition	1	43	27	2
Uncleanliness : (See Table IV., Group V.)	—	—	57	—
Skin—				
Ringworm—Scalp	—	—	11	—
Body	1	—	16	—
Scabies	4	—	—	—
Impetigo	5	3	60	3
Other Diseases (Non-Tuberculous)	3	5	45	12
Eye—				
Blepharitis	3	11	10	—
Conjunctivitis	—	2	6	—
Keratitis	—	—	—	—
Corneal Opacities	1	—	1	—
Defective Vision (excluding Squint)	117	5	8	—
Squint	8	9	2	1
Other Conditions	1	2	5	—
Ear—				
Defective Hearing	3	20	4	1
Otitis Media	6	16	8	—
Other Ear Diseases	—	11	1	—
Nose and Throat—				
Enlarged Tonsils only	85	197	22	6
Adenoids only	18	26	12	2
Enlarged Tonsils and Adenoids	62	31	29	2
Other Conditions	—	4	14	7
Enlarged Cervical Glands (Non-Tuberculous)	2	319	7	1
Defective Speech	—	2	—	2
Teeth—Dental Diseases	136	653	31	—
(See Table IV., Group IV.)				
Heart and Circulation—				
Heart Disease—Organic	3	9	1	2
Functional	2	36	1	2
Anæmia	3	14	3	—
Lungs—				
Bronchitis	2	4	6	—
Other Non-Tuberculous Diseases	—	13	1	—
Tuberculosis—				
Pulmonary—Definite	—	—	—	—
Suspected	—	—	4	—
Non-Pulmonary—Glands	1	4	2	—
Spine	—	—	—	—
Hip	—	1	—	—
Other Bones and Joints	—	1	—	—
Skin	—	—	—	—
Other Forms	1	2	—	—
Nervous System—				
Epilepsy	—	3	1	2
Chorea	1	—	—	1
Other Conditions	1	10	—	1
Deformities—				
Rickets	—	10	2	—
Spinal Curvature	1	21	2	—
Other Forms	—	18	4	1
Other Defects and Diseases	19	53	77	20

TABLE II.—continued.

B.—NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING UNCLEANLINESS AND DENTAL DISEASES)

GROUP. (1)	NUMBER OF CHILDREN.		Percentage of Children found to require Treatment. (4)
	Inspected. (2)	Found to require Treatment. (3)	
CODE GROUPS :—			
Entrants	333	55	16.5
Intermediates	286	88	37.7
Leavers	390	99	25.4
Total (Code Groups)	1,009	242	24.0
Other Routine Inspections	247	41	16.6

TABLE III.

RETURN OF ALL 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 ...	1	1	2
		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	3	4	7
		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 and dumb.	Attending Certified Schools or Classes for the Deaf ...	1	2	3
		Attending Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		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	—	—	—
		At other Institutions	—	—	—
		At no School or Institution ...	—	—	—
MENTALLY DEFECTIVE.	Feeble-minded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children	2	1	3
		Attending Public Elementary Schools	2	5	7
		At other Institutions	—	1	1
		At no School or Institution ...	1	1	2
	Notified to the Local Control Authority during the year.	Feeble-minded	—	—	—
		Imbeciles	2	—	2
		Idiots	—	—	—

TABLE III.—continued.

			Boys	Girls	Total
EPILEPTICS.	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics ...	—	—	—
		In Institutions other than Certified Special Schools ...	—	—	—
		Attending Public Elementary Schools ...	—	—	—
		At no School or Institution ...	—	—	—
	Suffering from epilepsy which is not severe.	Attending Public Elementary Schools ...	2	3*	5
		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 ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
		At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ...	—	—	—
	Non-infectious but active pulmonary and glandular tuberculosis.	At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Open-Air Schools ...	—	—	—
		At Public Elementary Schools...	1	—	1
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	—	1
		At Certified Residential Open-Air Schools ...	—	—	—
PHYSICALLY DEFECTIVE.	Delicate children (<i>e.g.</i> , pre- or latent tuberculosis, malnutrition, debility, anæmia, etc.).	At Certified Day Open-Air Schools ...	—	—	—
		At Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	3	1	4
		At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board ...	—	—	—
	Active non-pulmonary tuberculosis.	At Public Elementary Schools ...	2†	1	3
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	1	2
		At Certified Hospital Schools ...	—	—	—
	Crippled Children (other than those with active tuberculous disease), <i>e.g.</i> , children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Residential Cripple Schools ...	—	—	—
		At Certified Day Cripple Schools ...	—	—	—
		At Public Elementary Schools ...	3	4*	7
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	—	1

* One girl shewn under two headings.

† One boy had Cervical Glands removed and has now returned to Public Elementary School. There is another boy who is not entered in the above classes as he is dumb, blind, and is also a low-grade mental defective. He is not suitable for training in blind or dumb institutions, as not much improvement could be hoped for.

TABLE IV.
RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1923.
TREATMENT TABLE.
 GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group V.)

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
<i>Skin—</i>			
Ringworm-Scalp	10	1	11
Ringworm-Body	14	—	14
Scabies	—	—	—
Impetigo	46	2	48
Other skin disease	10	2	12
<i>Minor Eye Defects—</i>	1	—	1
(External and other, but excluding cases falling in Group II.)			
<i>Minor Ear Defects</i>	4	4	8
<i>Miscellaneous</i>	21	9	30
(e.g., minor injuries, bruises, sores, chilblains, etc.)			
Total	106	18	124

TABLE IV.—continued.

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.) 4

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.
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including Squint)	162	4	—	166
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	20	—	—	20
Total	182	4	—	186

Total number of children for whom spectacles were prescribed—

(a) Under the Authority's Scheme ... 69

(b) Otherwise ... 66

Total number of children who obtained or received spectacles—

(a) Under the Authority's Scheme ... 65

(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. (4)	Total number treated. (5)
Under the Authority's Scheme, in Clinic or Hospital. (1)	By Private Practitioner or Hospital, apart from the Authority's Scheme. (2)	Total. (3)		
66	23	89	24	113

