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BOROUGH OF ROYAL TUNBRIDGE WELLS.

ANNUAL REPORT

OF THE

Medical Officer of Health

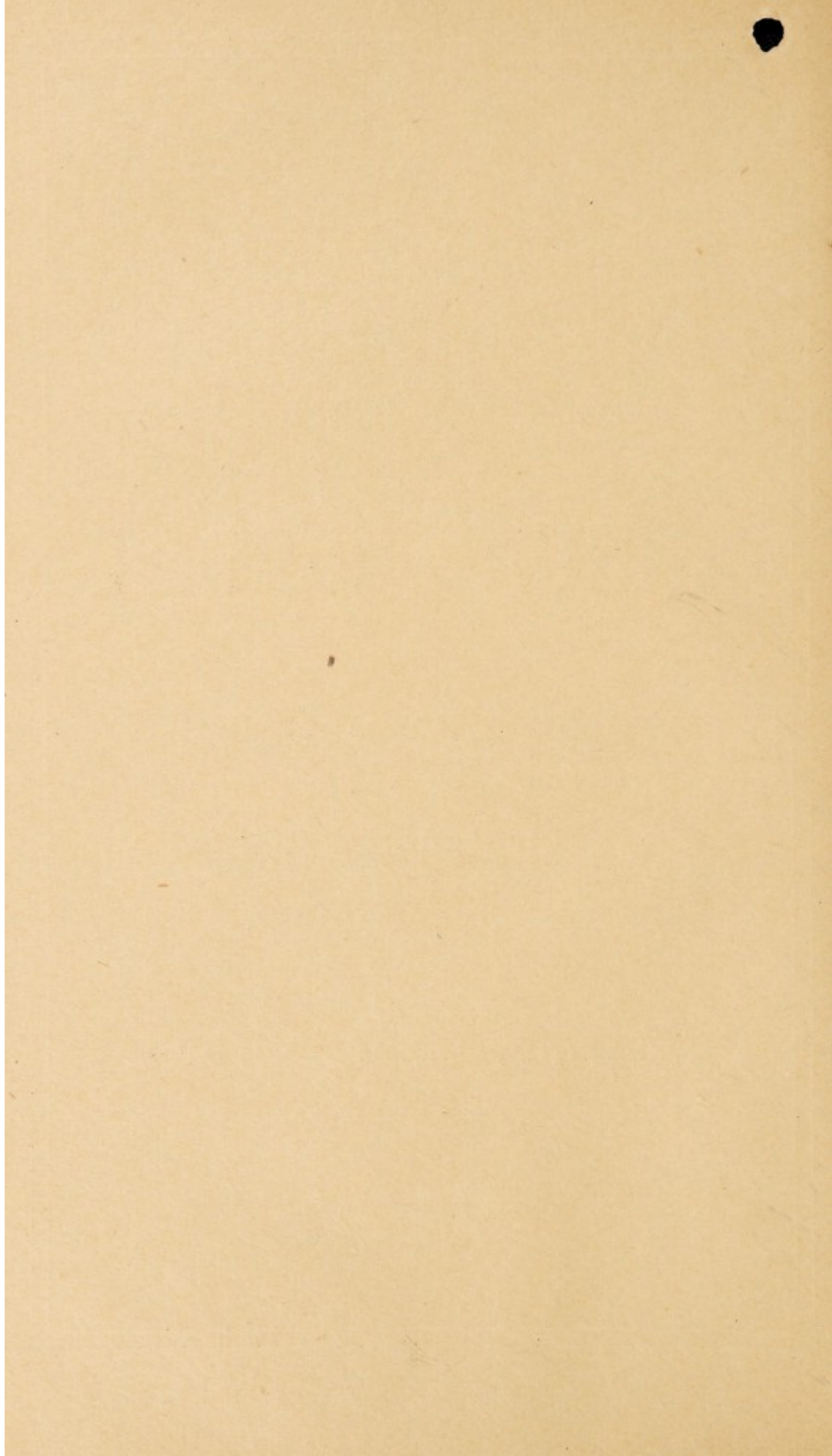
AND THE

School Medical Officer

For the Year 1927.

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

Tunbridge Wells—
BALDWIN, GROSVENOR WORKS.
1246/28.





BOROUGH OF ROYAL TUNBRIDGE WELLS.



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND THE


SCHOOL MEDICAL OFFICER

For the Year 1927.

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

TUNBRIDGE WELLS:
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BOROUGH OF ROYAL TUNBRIDGE WELLS.



HEALTH COMMITTEE :*

Mr. Councillor HEMPSON (Chairman).

THE MAYOR (Mr. Councillor PARSONAGE).

Mr. Alderman CALEY.
Mr. Alderman CARPENTER.
Councillor Miss BAKER.

Mr. Councillor HARGREAVES.
Mr. Councillor OATEN.
Councillor Miss POWER.

MATERNITY AND CHILD WELFARE COMMITTEE :*

Mr. Alderman CARPENTER (Chairman).

THE MAYOR (Mr. Councillor PARSONAGE).

Mr. Alderman CALEY.
Councillor Miss BAKER.
Mr. Councillor BOOTES.
Mr. Councillor HEMPSON.
Mr. Councillor OATEN.

Councillor Miss POWER.
Mrs. PAYNE.
Miss SCOTT.
Mrs. HAMMOND.

STAFF :

Senior Sanitary Inspector :

H. T. TAYLOR, M.R.S.I., M.S.I.A.

Inspectors :

E. J. WELLS, A.R.S.I. W. P. CAVE, A.R.S.I. E. J. A. BETTLE.

Clerk :

F. HICKS.

Second Clerk :

H. J. BELLINGHAM.

Health Visitors :

Miss F. CLARK.
Miss E. RICE OXLEY.

Miss J. DONALDSON.
Miss A. I. PONTING.†

Matron of the Isolation Hospital :

Miss E. BROCKLEHURST.

Public Analyst :

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

Medical Officer for Ante-Natal Clinic :

MARGARET EMSLIE, M.B., Ch.B.

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.

† Resigned, June, 1927.

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

REPORT UPON THE PUBLIC HEALTH OF THE
BOROUGH DURING THE YEAR 1927. ::

Herewith I submit the Annual Report—the 14th which it has been my privilege to submit to you.

It is the second report of the quinquennial period 1926-30, upon which a fuller survey is submitted at the close of the period.

Apart from a sharp outbreak of influenza in February, involving temporary school closure, and causing many deaths amongst old persons, there was no notable outbreak of infectious disease during the year.

Rainfall greatly exceeded the average: Tunbridge Wells alone amongst inland health resorts had rather more sunny hours than the average, in spite of the heavy rainfall.

The care of motherhood and of the delicate child has involved the establishment of pre-natal clinics, provision by the Corporation for adequate treatment for puerperal fevers, and the sanctioning of arrangements for supervision and treatment of crippled children of all ages.

Once again I desire to express my appreciation of the good work done by all members of my staff, and my thanks to the Mayor, Aldermen and Councillors, and to my fellow officials for their cordial support and encouragement.

I am, Ladies and Gentlemen,

Your obedient Servant,

F. C. LINTON.

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 1927, 33,870 (Registrar-General).

Number of houses intended or used for habitation 8,575

Number of inhabited houses 8,455

Rateable value, £373,411.

Sum represented by a penny rate :—

On Borough Rate £1,465.

On General District Rate £1,446.

Mean annual temperature, F. 49.2.

Total rainfall, 40.06 inches.

Hours of bright sunshine, 1,527 hours, 42 minutes.

2.—Extracts from Vital Statistics of the Year.

	Total.	Males.	Females.
Births—Legitimate	412	213	199
„ Illegitimate	22	9	13
Still Births	19	11	8

Birth rate (Registrar-General)

12.8 per thousand.

Deaths 532 216 316

Crude death rate (Registrar-General) 15.7.

Death rate corrected for age and sex constitution, 11.5 per thousand (factor for correction, 0.731).

Number of women dying in, or in consequence of, child birth—
—from sepsis, 0 ; from other causes, 2.

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

Legitimate, 48.5 ; Illegitimate, 45.5. Total, 48.4

	Total.	Males.	Females.
Deaths from Measles (all ages ...	—	—	—
„ „ Whooping Cough (all ages) ...	1	—	1
„ „ Diarrhœa, etc. (under 2 years of age) ...	1	1	—

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

1.—Population.

The population at mid-year in 1927, as estimated by the Registrar-General, was 33,870. As some 400 houses have been built during the past two years and the number of persons whose names are on the register as applicants for houses is as great as it was before these 400 houses were erected, a drop of 560 in the population during one year, 1926-27, seems difficult to credit. The Registrar-General has to give an average figure obtained from various sources, and, as he states in reply to a query, there is room for a wider margin of error as the Census, which was last taken in 1921, becomes more distant. I estimate the actual population of the Borough to be between 35,000 and 36,000 persons. The birth and death returns are, however, calculated upon the Registrar-General's figure, so that uniformity may be maintained with returns throughout the kingdom.

2.—Physical Features and General Character.

The Borough of Royal Tunbridge Wells covers 3,991 acres. It is built upon hills, the altitude above sea level varying from 220 feet at the bottom of the valley in which the historic mineral springs are situated, to 500 feet at the Blackhurst Collecting Reservoir; most of the houses stand at a level between 300 and 450 feet. Its climate is therefore breezy and bracing, with sheltered spots for those who live in the valleys. It lies in the extreme south-west corner of Kent, $34\frac{1}{2}$ miles from London. The sub-soil is mostly sandstone, the geological layer known as Tunbridge Wells

sands predominating. The water supplies for the Borough are drawn from a deeper sandstone layer known as the Hastings sandstone; the supply is pure and soft. During the year 1926, sanction was obtained from the Ministry of Health to open a new borewell so as to increase the amount available; this work is now in progress.

3.—Meteorological Notes.

The records of the Municipal Meteorological Station, which is one of the official auxiliary stations reporting to the Meteorological Office, are kept by the staff of the Health Department and have been so kept since 1st July, 1914. The instruments are situated in the Calverley Park, with the exception of the Sunshine Recorder, which is established on the roof tower of the Earl's Court Hotel, Mount Ephraim, and the Standard Barometer, kept in the Health Office.

The readings are taken by Mr. W. P. Cave and Mr. E. J. A. Bettle, members of the staff of the Health Department.

The annual inspection of the station by an inspector of the Meteorological Office took place on 18th June, and the report on the station was satisfactory.

The total amount of sunshine recorded was 1,527 hours 42 minutes. The mean amount is 1,519 hours 54 minutes. The most sunny day was 22nd June, when 14 hours 30 minutes were recorded. There were 70 sunless days, this number being the average.

The highest temperature in the sun was 142 degrees, on 11th July.

The mean temperature in the shade for the year was 49.2 degrees, this figure being the average.

The mean daily range was 13.3, the average being 14.6.

The temperature in the shade four feet above the ground, was highest, 80 degrees, on 10th July, and lowest, 17 degrees, on 19th December.

The temperature in the shade first reached :—

60 degrees on 21st March.

70 „ „ 21st April.

80 „ „ 10th July.

last reached—

80 „ „ 10th July.

70 „ „ 7th September.

60 „ „ 3rd November.

The hottest night was on 6th August, when the temperature did not go below 62 degrees.

The last frost in the air in spring was on 1st May and the first in the autumn was on 8th November. The last on the grass in spring was on 9th June, and the first in the autumn was on 25th September.

The rainfall amounted to 40.06 inches, the average being 30.54 inches. It fell on 186 days, the average being 173.

The most rain that fell on one day was 1.57 inches on 14th September.

The wind at 9 a.m. was N. 16 days, N. E. 57 days, E. 16 days, S. E. 39 days, S. 47 days, S. W. 104 days, W. 39 days, N. W. 47 days.

The mean amount of cloud at 9 a.m. was 7.0, 6.8 being the average ; ten representing overcast sky. Thunder and lightning occurred on 14 days.

There were 20 fogs, and it was misty on 25 other mornings.

METEOROLOGICAL NOTES.

Months.	Sunshine.		Rainfall. In Inches.		Mean Temperature. In shade, 4ft. above ground.		Temperature Underground.			
							One Foot.		Four Feet.	
	1927.	13 Year Average.	1927.	47 Year Average.	1927.	37 Year Average.	1927.	27 Year Average.	1927.	13 Year Average.
January ...	Hrs. Mins. 63 6	Hrs. Mins. 49 0	2.34	2.59	°F 40.3	°F 38.5	°F 40.4	°F 39.8	°F 44.3	°F 44.1
February ...	59 42	66 18	4.81	2.35	40.2	39.5	40.2	39.5	42.7	43.2
March ...	129 42	112 18	3.88	2.39	45.6	41.8	44.6	41.9	44.7	43.7
April ...	172 54	139 18	1.69	1.99	47.6	46.5	48.5	46.6	47.3	45.9
May ...	261 30	220 36	0.85	1.91	53.8	53.0	54.9	54.1	51.8	50.6
June ...	191 12	201 18	4.51	2.00	55.9	57.7	57.1	59.9	55.2	55.8
July ...	151 12	191 24	2.62	2.35	59.4	61.3	62.1	63.1	58.6	58.7
August ...	177 0	180 6	4.60	2.37	61.2	62.4	62.9	62.6	60.8	60.2
September ...	113 36	144 54	4.41	2.27	56.2	56.9	60.1	58.6	60.4	59.2
October ...	111 30	109 54	2.07	3.60	51.2	50.1	53.9	52.6	56.4	56.0
November ...	51 36	63 54	2.96	3.34	42.9	43.1	47.8	45.4	52.5	50.7
December ...	44 42	40 54	5.32	3.38	35.5	40.0	41.8	41.7	44.0	46.1
WHOLE YEAR	1527 42	1519 54	40.06	30.54	49.2	49.2	51.2	50.5	51.5	51.2

4.—Social Conditions.

Tunbridge Wells is a residential town to which many persons retire from business to spend the latter part of their lives ; it also serves as a residential town for London business men, for whom there is a good train service to town in the morning, and back in the evening : and it is a large shopping centre. The occupations of the inhabitants are governed by these conditions ; there are no large factories, but there are numerous motor works and garages ; house painters, builders, builders' labourers, gardeners, drivers and conductors of motor chars-a-banc, and for the female population, laundries and domestic service. There are also many shop assistants of both sexes, as Tunbridge Wells is a shopping centre for a considerable area. Some of the inhabitants are employed at the Tunbridge Wells Brickworks situated just outside the Borough boundary ; the Photochrome Works employ a number of girls.

5.—Recreations.

The large and breezy Commons in the centre of the town form a perpetual source of pleasure and of interest to visitors and inhabitants alike. Numerous healthful recreations are provided ; in Calverley Park, situated in the centre of the town, the Corporation provides a charming pleasure ground in which tennis courts, a miniature golf course and a bowling green are all available. Bands play daily during the summer season. In addition, facilities for tennis and bowls are provided in other public parks. There are two golf courses within the Borough boundary, viz. :—the Culverden (18 holes) and the Spa (9 holes), and a third, Nevill Golf Course (18 holes), is situated within easy access just outside the Borough boundary. There are ample facilities for football and cricket, county matches being played here during Cricket Week. Facilities for swimming are provided at the Indoor Baths and at the Open-Air Bath.

VITAL STATISTICS.

Births.—From figures supplied by the Registrar-General the total number of births *registered* as properly belonging to Tunbridge Wells is 434 (222 males, 212 females). This corresponds to a rate of 12.8 per thousand, as compared with 13.3 per thousand in 1926. Nine males and 13 females were born out of wedlock, giving an illegitimate rate of 5.1 per cent., as compared with 7.0 per cent. in 1926. The number of births *registered* shews a decrease as compared with those registered in 1925.

The births *notified* during the year as occurring in the Borough numbered 497 and consisted of 244 males and 253 females ; of these, 11 males and 8 females were stillborn.

The increase in the number of births *notified* is accounted for by births in the Maternity Home, which caters for a wide district around Tunbridge Wells, as well as for the Borough itself.

Deaths.—580 deaths were registered in the Borough during 1927, and there were 126 outwardly transferable deaths and 76 inward transfers, thus making the total number of deaths belonging to the district 530. This gives a crude death rate of 15.6 per thousand.

The Registrar-General has supplied the proper correction figure (0.731) as obtained from the last census returns, and the true or corrected death rate is thus seen to be 11.5 per thousand ; this is a correction for age and sex distribution of the population. In the case of a health resort attractive to elderly persons and to invalids, it is necessary that the *corrected* death rate should be used in making comparisons with the death rate in the country generally. The uncorrected rate in the case of a town in which so many old people reside, naturally gives a false impression of the health value of the locality. Table I. on page 19 compares the births and deaths

rates, etc., for England and Wales and various groups of towns, Tunbridge Wells figures being inserted below. The Borough death rate, 11.5, compares favourably with 12.3, the figure for the kingdom generally.

The death rate of 11.5 is, however, considerably higher than in 1926, when the figure was 9.9. More than half of the increase was due to deaths from influenza, of which an outbreak occurred in the early months of the year. Comparing 1926 to 1927, there were only eight more deaths under the age of 65 in the latter year, but 55 more deaths over 65 years. It is probable that a stage has been reached at which the death rate of a town like Tunbridge Wells has attained its lowest point, and that the much larger accumulation of elderly persons will now have the inevitable result of causing a gradual rise in the death rate, such as is anticipated will take place in the United Kingdom generally in the course of the next few years.

Table showing the average number of Deaths at several ages for consecutive periods of five years.

	1896 to 1900.	1901 to 1905.	1906 to 1910.	1911 to 1915.	1916 to 1920.	1921 to 1925.	1926.*	1927*
Deaths at under 1 year ...	72	57	46	40	36	23	28	21
" 1 and under 2 } ...	25	29	23	16	{ 6	3	6	4
" 2 " 5 } ...	21	11	10	16	{ 9	5	3	8
" 5 " 15 ...	20	13	14	12	15	6	6	7
" 15 " 25 ...	121	141	141	145	21	10	8	11
" 25 " 45 } ...	154	178	205	234	{ 47	36	44	37
" 45 " 65 } ...					{ 107	104	104	119
" 65 and upwards ...					245	276	268	323

* The Mortality for 1926 and 1927 is inserted for comparison.

Heart disease, respiratory diseases, cancer, influenza and tuberculosis were amongst the chief causes of death.

Infectious Diseases.—As already mentioned, a sharp outburst of influenza occurred in the spring months: this was so widespread that it necessitated the closure of schools for

nine days, and the issue of requests to proprietors of places of public entertainment not to admit children to such places of entertainment during the period of school closure, so that the object aimed at in school closure might not be defeated. Whooping Cough was prevalent to a considerable extent, also Chicken Pox. On the other hand Measles, German Measles and Scarlet Fever were not particularly prevalent. A small outbreak of Diphtheria occurred in the early autumn during the period of school closure for holidays; this was eventually traced to a Sunday School and steps were successfully taken to meet the situation.

There was a decrease in the infant death rate. Congenital debility and malformations accounted for more than half the deaths of infants which occurred. Infantile deaths from Pneumonia were seven in number, most of these being doubtless due in the first instance to the outbreak of whooping cough.

A Table is appended shewing the number of deaths from different causes in five-yearly periods from 1886 onwards.

DEATHS FROM

Five-Yearly Period.	Cancer.	Tuberculosis.		Infectious Diseases.	Violence.	Influenza.
		Pulmonary.	Non-Pulmonary.			
1886 to 1890 ...	139	201	69	98	45	*
1891 „ 1895 ...	158	174	103	110	44	*
1896 „ 1900 ...	170	131	91	179	62	84
1901 „ 1905 ...	226	167	61	104	45	67
1906 „ 1910 ...	251	154	48	90	35	87
1911 „ 1915 ...	260	133	46	110	49	60
1916 „ 1920 ...	310	150	62	59	50	178
1921 „ 1925 ...	328	111	32	27	65	64
1926 ...	79	26	3	4	8	4
1927 ...	77	20	3	4	11	37

* Reliable figures not available.

Infant Mortality, 1927.—21 deaths of infants below one year of age occurred, being 48.4 per thousand born,

as compared with an infant mortality of 69 per thousand in England and Wales generally; the stillbirths numbered 19. The average infant mortality in Tunbridge Wells during the previous ten years was 62.2 per thousand. It is noteworthy that amongst the 21 infants who died, only six were over three months of age, while seven were in their first week of life; this means that the majority of deaths were due to causes operating during the period of expectant motherhood.

In Table IV. is given in detail a list of the causes of infant deaths in 1927.

1900-1909		1910-1919		1920-1929		1930-1939		1940-1949		1950-1959		1960-1969		1970-1979		1980-1989		1990-1999		2000-2009		2010-2019		2020-2029			
Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate	Year	Rate
1900	100	1910	100	1920	100	1930	100	1940	100	1950	100	1960	100	1970	100	1980	100	1990	100	2000	100	2010	100	2020	100	2029	100
1901	101	1911	101	1921	101	1931	101	1941	101	1951	101	1961	101	1971	101	1981	101	1991	101	2001	101	2011	101	2021	101	2030	101
1902	102	1912	102	1922	102	1932	102	1942	102	1952	102	1962	102	1972	102	1982	102	1992	102	2002	102	2012	102	2022	102	2031	102
1903	103	1913	103	1923	103	1933	103	1943	103	1953	103	1963	103	1973	103	1983	103	1993	103	2003	103	2013	103	2023	103	2032	103
1904	104	1914	104	1924	104	1934	104	1944	104	1954	104	1964	104	1974	104	1984	104	1994	104	2004	104	2014	104	2024	104	2033	104
1905	105	1915	105	1925	105	1935	105	1945	105	1955	105	1965	105	1975	105	1985	105	1995	105	2005	105	2015	105	2025	105	2034	105
1906	106	1916	106	1926	106	1936	106	1946	106	1956	106	1966	106	1976	106	1986	106	1996	106	2006	106	2016	106	2026	106	2035	106
1907	107	1917	107	1927	107	1937	107	1947	107	1957	107	1967	107	1977	107	1987	107	1997	107	2007	107	2017	107	2027	107	2036	107
1908	108	1918	108	1928	108	1938	108	1948	108	1958	108	1968	108	1978	108	1988	108	1998	108	2008	108	2018	108	2028	108	2037	108
1909	109	1919	109	1929	109	1939	109	1949	109	1959	109	1969	109	1979	109	1989	109	1999	109	2009	109	2019	109	2029	109	2038	109

Table I.

Birth-rate, Death-rate, and Analysis of Mortality during the Year 1927.

(Provisional figures. The rates have been calculated on a population estimated to the middle of 1927. 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. As the registration of stillbirths did not come into operation until 1st July, 1927, no stillbirths are included.

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.	Certified by Registered Medical Practitioners.	Inquest Cases.	Coroner after P. M. No Inquest.	Uncertified Causes of Death.	
England and Wales ...	12.3	0.01	0.00	0.09	0.01	0.09	0.07	0.57	0.51	6.3	69	91.7	6.6	0.7*	1.0	
107 County Boroughs and Great Towns, including London ...	12.2	0.01	0.00	0.12	0.01	0.10	0.08	0.49	0.46	8.3	71	91.9	6.6	0.9*	0.6	
155 Smaller Towns (1921 Adjusted Populations 20,000—50,000) ...	11.3	0.01	0.00	0.07	0.01	0.08	0.05	0.58	0.41	5.0	68	92.7	5.8	0.3*	1.2	
London ...	11.9	0.01	0.00	0.04	0.01	0.12	0.09	0.39	0.51	7.5	59	90.3	7.9	1.8*	0.0	
Tunbridge Wells ...	11.5	0.00	0.00	0.00	0.00	0.03	0.03	1.09	0.38	2.3	48	93.4	5.3	1.1*	0.2	

* The Coroners' (Amendment) Act, 1926, which came into operation on the 1st May, 1927, provided for the registration of deaths on a certificate of the Coroner after P.M. without inquest. These percentages relate therefore to 8 months of the year only.

TABLE III.

Causes of, and Ages at Death during the Year 1927.

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 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.	
	529 1	21 ...	4 ...	4 ...	2 ...	2 ...	4 ...	3 ...	6 ...	17 ...	169 ...
All Causes { Certified Uncertified
Enteric Fever	3
Small Pox
Measles
Scarlet Fever
Whooping Cough
Diphtheria
Influenza
Encephalitis lethargica
Meningococcal meningitis
Tuberculosis of respiratory system
Other Tuberculous diseases
Cancer, malignant disease
Rheumatic Fever
Diabetes
Cerebral hemorrhage, etc.
Heart disease
Arterio-sclerosis
Bronchitis
Pneumonia (all forms)
Other respiratory diseases
Ulcer of stomach or duodenum
Diarrhea, etc. (under 2 years)
Appendicitis and Typhilitis
Cirrhosis of liver
Acute and Chronic Nephritis
Puerperal sepsis
Other accidents and diseases of pregnancy and parturition
Congenital debility and malformation, premature birth
Suicide
Other deaths from violence
Other defined diseases
Causes ill defined or unknown

NETT DEATHS IN THE YEAR!—

Certified	...	...	...	529
Uncertified	...	...	...	1

NETT BIRTHS IN THE YEAR!—

Legitimate	...	...	...	412
Illegitimate	...	...	...	23

Poor Law Relief.—The approximate amount of Poor Law Relief in the Parish of Tunbridge Wells for the year ending 31st March, 1928, was £4593 0s. 0d.

GRATUITOUS MEDICAL RELIEF.

The Tunbridge Wells General Hospital caters for the population of Tunbridge Wells and for a wide district around. A fund is being collected for transferring the Hospital from its cramped and noisy position to a fresh site on the Mount Ephraim ridge, where more airy and extensive premises can be built, subject to less disturbance from passing heavy traffic. The in-patients in 1927 numbered 1,483; theatre operations numbered 734, and operations performed in the out-patients' department under a general anæsthetic numbered 470; out-patients numbered 5,424, making 51,341 attendances. There is a large and well-equipped electrical department which offers radiant heat, radiant light, X-ray and radium treatment, also massage and electrical treatment. An orthopaedic centre allowing of remedial exercises treatment has been established and children attending the Infant Welfare Centres and Elementary Schools in the Borough continued to take advantage of such treatment in 1927. The Corporation has now entered into a definite agreement with the Hospital, commencing 1st April, 1928, for these forms of treatment to be carried out in cases recommended for such treatment by the Medical Officers employed by them.

MASSAGE, ELECTRICAL, RADIANT HEAT, ULTRA VIOLET LIGHT, X-RAY AND RADIUM TREATMENTS.

				Patients.	Treatments.
Massage	...	...	...	500	8,315
Exercises	...	...	...	387	1,020
Electrical Treatments			...	398	4,937
				—	—
				1,285	14,272
				—	—

REMEDIAL EXERCISES.

37 Patients.

1,867 Treatments.

The Tunbridge Wells Eye and Ear Hospital deals with a greatly increased number of patients since the advent of an aural surgeon, in addition to an ophthalmic surgeon. The following Table speaks for itself in this respect :—

Year.	Out-Patients.	Attendances.	In-Patients.	Theatre Operations.
1921	2,339	5,115	303	284
1922	2,144	4,718	282	257
1923	2,105	4,736	289	265
1924	2,303	7,314	391	348
1925	2,615	8,917	478	476
1926	2,702	9,390	556	522
1927	2,675	9,927	713	666

This Hospital will be amalgamated with the General Hospital when the hospital extension scheme is completed.

At the **Homœopathic Hospital**, which has 22 beds, there were 201 in-patients in 1927, and 130 theatre operations were performed. Four thousand, three hundred and six attendances of out-patients were made and 38 minor operations were performed in the out-patients' department.

The Local Branch of the **Royal Surgical Aid Society** is performing an increasing amount of work annually; for instance, in 1927, 767 appliances were supplied at a cost of £1,514 18s. 10d., being an increase of 30 over the number supplied in 1926. I desire to make grateful acknowledgment to this Society for extending to me the privilege of sending school children whose parents are unable to afford glasses when ordered by the ophthalmic surgeon, to the optician, with the Society's letters, initialled by myself as School Medical Officer. Such letters are only given after due enquiry into the home circumstances and the optician does not accept such letters for school children unless thus initialled.

The Provident Dispensary, 106, Upper Grosvenor Road. The number of members of this institution for the year 1927 was as follows :—Above the age of 14 years, 880 ; under the age of 14 years, 431 ; total, 1,311.

Tunbridge Wells Central Aid Society.—This Society performs very useful work in assisting to send persons to Convalescent Homes, in particular I am deeply indebted to the Invalid Children's Aid Branch which arranges for school children in need of treatment at Convalescent Homes, and with which your School Medical and Child Welfare services keep in constant touch. The amount disbursed in pensions and special cases during 1927 was £676 5s. 3d., dealing with 60 cases. The Invalid Children's Aid Branch gave assistance amounting to £83 10s. 8d. to 42 children during the year.

The Tunbridge Wells District Nursing Association has a staff of five nurses. 814 cases were dealt with in the year, 31st March, 1927, to 31st March, 1928, of which 109 were maternity cases. The total number of visits made was 14,238, of which 12,227 were general, 1,632 maternity, and 379 ante-natal. I have had the privilege of serving on the Committee of this useful Association for several years, and am thus in close touch with the valuable work done by the District Nurses. The Corporation has also made arrangements under the terms of the Maternity and Child Welfare Act, 1918, whereby the services of a District Nurse may be obtained for the home nursing of a child suffering from certain specified diseases, *e.g.*, ophthalmia neonatorum, measles or whooping cough with broncho-pneumonia, where, in the opinion of the Medical Officer of Health, the home conditions require such services. The Nurse acts under the direction of the Medical Attendant, and a fee is paid to the Association for her services.

Maternity Home, Upper Grosvenor Road. This Home, which was formally opened on 29th April, 1925, has now

thoroughly established itself as a prominent feature and an important branch of the medical and nursing facilities available for the residents of Tunbridge Wells and neighbourhood. The Home has nine beds, five in the general wards, two in private wards, one in an isolation ward and one in a convalescent ward. It also accommodates the staff. One hundred and forty-six confinements, took place in the year ending 31st December, 1927; 83 of the mothers were Tunbridge Wells mothers, the remainder coming from the surrounding district. These figures speak for themselves. The Tunbridge Wells Corporation entered into an agreement under which, by payment of a suitable subsidy, patients recommended by the Borough Medical Officer can be admitted to the Home. This agreement commenced on 1st April, 1926, and assistance was provided during the year, in three cases in which the mothers' home environment was unsuited to confinement and in which her circumstances made financial aid necessary. Co-ordination with the work of the Home is well maintained, as the Borough Medical Officer of Health serves on the Committee of Management, and also acts as Administrative Medical Officer for the Home.

Other Homes in Tunbridge Wells.—There is a branch of Dr. Barnardo's Home in Park Road, Hurstleigh Holiday Home in Bishops Down, and a Convalescent Home at Hawkenbury, in which a residential open-air school for L.C.C. children has been established.

These institutions deal almost entirely with children from London. There is also a small Rescue and Preventive Home in Upper Grosvenor Road.

Tuberculosis Dispensary.—The Kent County Council has a branch Dispensary for tuberculous cases at 34, Calverley Street. The attendances at this Dispensary during 1927 numbered 1,211, and were as follows :—

Male.	Female.	Male.	Female.
Insured.		Uninsured.	
202	98	366	545

Tunbridge Wells and District Public Dental Service.—This is an association of legally qualified dental practitioners. Persons who are unable to afford large fees are treated here for small sums. The number of new patients attending in 1927 was 404, and the total number of attendances, 3,539.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

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

1.—Tuberculosis.—There is no hospital for the treatment of tuberculosis in the neighbourhood of Tunbridge Wells. The County Council makes arrangements for the treatment of suitable cases in hospitals situated in other parts of the county.

2.—Maternity.—The treatment of maternity cases is undertaken by arrangement with the Voluntary Home already mentioned, situated in Upper Grosvenor Road.

3.—Children.—No children's hospital is provided or subsidised by the Local Authority or by the County Council in Tunbridge Wells. Children are treated in the General Hospital, Eye and Ear Hospital, and Homœopathic Hospital. Fees are paid by the Local Authority to these hospitals in the case of operative treatment upon elementary school children for enlarged tonsils and adenoids.

4.—Fever.—The Borough has its own Fever Hospital which is situated on its southern boundary, 450 feet above sea level. The site is an excellent one, airy and open, with a southern exposure and wide view over valleys and woodland.

There is accommodation in the wards in use for 40 adult patients, allowing 2,000 cubic feet air space per bed. Sixty beds and cots are available for use in case of need, but the number of patients seldom exceeds 40.

In each of the four ward blocks a central heating stove and hot water circulation has been installed during the past three years. Geysers for water heating have thus been dispensed with—a change much appreciated by the staff and patients.

The Hospital has a large garden which supplies vegetables for most of the year for the patients and staff, also a fairly large amount of fruit in summer time, thus saving expense in catering.

5.—Smallpox.—A conjoint Smallpox Hospital is situated at Capel some four and a half miles from Tunbridge Wells. It has 20 beds and is under the administration of a Board representing Tunbridge Wells, Tonbridge and Southborough Urban Districts and the Tonbridge Rural District. The situation of this Hospital is an excellent one for the purpose, being well away from human habitation in the midst of open and high lying country. A caretaker and his wife live in the house on the premises and are responsible for keeping the hospital in good order and ready for use in case it should be required. Sentry stoves and hot water circulation have now been installed in both blocks, thus providing hot water for baths, etc., whenever required. Hot water formerly had to be taken by hand labour from the laundry copper to the ward, an unsuitable arrangement for a Smallpox Hospital as hot baths are of paramount importance in treating the disease.

No special institutional provision is made for unmarried mothers, illegitimate infants or homeless children. The Infirmary of the Poor Law Union, situated at Pembury, deals with most of these cases.

AMBULANCE FACILITIES.

(a) **For Infectious Cases.**—Two ambulances are kept on the Isolation Hospital premises, one somewhat heavy and out-of-date. Horses are hired as required to remove cases to the Hospital. The question of replacing these by a motor ambulance is under consideration, but no alteration in equipment has as yet been made.

(b) **For Non-infectious and Accident Cases.**—The Borough Police Force has a motor ambulance which proves of great service for cases of this type. In addition, the St. John Ambulance Brigade has an ambulance which can be hired for removal of sick persons, etc.

CLINICS AND TREATMENT CENTRES.

Maternity and Child Welfare Centres.—There is a Maternity and Child Welfare Centre at 35, Calverley Street, provided by the Tunbridge Wells Borough Council, consisting of a detached house with seven rooms. The main waiting room is large, consisting of two rooms made into one. There is a branch centre at Rusthall where meetings are held in the St. John Ambulance Brigade (Rusthall Section) Room.

Day Nurseries.—There are none in Tunbridge Wells.

School Clinics.—The School Clinic is at the Public Health Offices, Calverley Parade. The premises consist of four rooms provided by the Borough Education Committee.

Tuberculosis Dispensaries.—The Tuberculosis Dispensary is provided by the County Council and consists of a detached house at 34, Calverley Street, next door to the Maternity and Child Welfare Centre; its accommodation is similar to that of the Child Welfare Centre.

Treatment Centres for Venereal Diseases.—Venereal Diseases are treated at the General Hospital, Tunbridge Wells, there being one consultation day per week for men

and one for women. The arrangements are under the control of the Kent County Council.

PUBLIC HEALTH STAFF.

A list of the staff of the Public Health Department is given at the beginning of this Report.

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.

All four of the nursing staff act for one-fifth of their time as Health Visitors.

Miss F. M. Clark owing to ill-health was unable to carry out her duties during the last quarter of the year. Miss A. I. Ponting resigned to take up an appointment elsewhere in June, 1927, and owing to difficulty in obtaining a suitable successor, her post was not filled until 1928.

Contributions are made :—

- (a) Under the Public Health Act towards the salaries of the Medical Officer of Health and Senior 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 Nurses.
- (d) By Exchequer grant towards the fees of the Analyst under the Food and Drugs Act.

PROFESSIONAL NURSING IN THE HOME.

(a) **General.**—The Tunbridge Wells District Nursing Association, which is affiliated to the Queen's Jubilee Nursing Association and supported by voluntary contributions, undertakes home nursing when required. A report of its work has already been given.

(b) **For Infectious Diseases.**—So far as the Borough Council is concerned, an arrangement is made whereby the services of a District Nurse can be obtained for attending in the home, in cases of Ophthalmia Neonatorum, Measles, Whooping Cough, etc., under the Maternity and Child Welfare Act, 1918. It is in the discretion of the Medical Officer of Health to call for these services as required; one call was made during 1927.

Midwives.—No subsidy is as yet made by the Local Authority to practising Midwives. Arrangements will come into force in 1928, whereby a subsidy will be paid to the Tunbridge Wells and District Nursing Association to establish a nurse-midwife in Rusthall. The subsidy will be payable for midwifery services only.

As has frequently been stated, the Child Welfare work of the Borough, so far as attention to expectant motherhood is concerned, labours under a serious disadvantage in that the Borough Council and its Officers do not supervise the work of the local Midwives, the control being vested in a distant body, the Kent County Council. The number of Midwives practising in Tunbridge Wells during the year was nine.

BOROUGH BACTERIOLOGICAL LABORATORY, PUBLIC HEALTH OFFICE.

The number of specimens examined in the Borough Laboratory during 1927, is set out in the following table:—

Specimens examined for presence of Diphtheria

Bacillus	...	...	...	...	997
				Positive. Negative.	
From Isolation Hospital					
cases	...	...	122	200	
From outside sources			66	609	
For Vincent's Spirillum	...		1	3	4
Hairs examined for presence					
of Ringworm	...		3	7	10
Other specimens examined					3
					<hr/>
Total	...	...	...	...	1,014
					<hr/>

In addition to the above, specimens were examined at the County Laboratory, Sessions House, Maidstone, as follows :—

	Positive.	Negative.
86 specimens for Tubercle Bacillus	16	70
35 Blood Examinations for Typhoid		
or Para-Typhoid	9	26
76 Swab Examinations for Diph-		
theria	5	71
4 Virulence tests for Diphtheria	—	4
	<hr/>	<hr/>
	30	171
	<hr/>	<hr/>

Chemical Work.—Chemical analyses of specimens of water, milk, and other forms of food, and drugs, are carried out by the Public Analyst, Mr. A. H. Mitchell Muter, of the South London Laboratories. The work done is reviewed under the Food and Drugs Acts.

LEGISLATION.

The Tunbridge Wells Improvement Act of 1890, to which Royal assent was given on 14th August, 1890, is in force.

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, which was declared to be in force within the Borough on 3rd April, 1911, 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.

Drainage Bye-laws were approved by the Council and have been amended under the **Public Health Act, 1925**, of which the following parts were adopted and put into force on 1st March, 1926 :—Parts II., III., IV. and V. (with the exception of sections 14, 20, 29, 34 and 35).

Fresh Bye-laws relating to Slaughter-houses came into force in the Borough in March, 1925. Under these, use of the humane killer for slaughtering all animals is obligatory.

Water Supply.—The water supply of Tunbridge Wells is drawn from springs issuing from the stratum known to geologists as the Tunbridge Wells Sandstone. The springs are situated in unfrequented woodland areas, in which inhabited buildings are few and distant ; the risk of pollution is well guarded against. In 1927, the occurrence of cases of typhoid fever, at a farm near one of the supply springs made it advisable to put this spring out of use temporarily until the risk—never more than remote—had ceased. This was accordingly done.

For roughly one-half of the year the supply of water from the springs meets the requirements of the Borough. During the remaining portion of the year, artesian borewells, seven in number, give an ample and pure supply of water to supplement the flow from the springs. The Artesian Wells are situated at Pembury, where there is a large reservoir, capable of holding 42,000,000 gallons. From this reservoir the water is pumped to a distributing reservoir at Blackhurst, Pembury, over 500 feet above sea level. Thence it is distributed through the mains by force of gravity to the areas supplied. A certain amount of iron contained in solution in this deep well water is effectively removed by the use of Candy Oxidising Pressure Filters, six in number. The Artesian Wells are bored through the Wadhurst Clay and take their supply from the underlying Ashdown Sands; the nearest point at which the Ashdown Sands reach the surface is some miles distant from the borewells. The water enters six open filter beds at Pembury, having an area of about one acre. An analysis, made by the Borough Analyst, reads as follows :—

Specimen from 15in. Main in Pembury Road.

Chemical Analysis.

<i>Determination.</i>				<i>Parts per 100,000.</i>
Free and Saline Ammonia	...	...	...	0.0030
Albuminoid Ammonia	...	...	...	0.0020
Oxygen absorbed	} in 15 minutes	...	...	0.0052
at 80° F.		} in 4 hours	...	0.0076
Nitric Nitrogen	...	...	...	0.41
Chlorine	...	...	...	2.6
Equivalent to Sodium Chloride	...	...	...	3.3
Total Solid Matter (Dried at 180° C.)	...	...	...	14.0
Temporary Hardness	...	...	...	3.5
Permanent Hardness	...	...	...	2.75
Appearance in two-foot tube	...	...	...	Colourless and Clear
Metals (Lead, Copper, Zinc, Iron)	...	...	...	Trace of Iron

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 ...	25	0	—	—	—

The results of both chemical and bacteriological analyses show the water to be remarkably pure and to be a drinking water of excellent quality. Until the dry season of 1921, the sources of water supply already mentioned fully sufficed to meet all needs, not only of the Borough, but of the neighbouring villages of Langton, Speldhurst, Stockland Green, and part of Pembury. Further consideration of the supplies after 1921 has resulted in the selection of a fresh site for boring an artesian well between Fordcombe and Penshurst, the layer to be tapped being the same as at Pembury, viz. :— the Ashdown Sands, but at a point about seven miles distant, on the opposite side of the boundary. The application made to the Ministry of Health for this purpose was sanctioned early in 1926. The water supply is a constant one and the number of dwelling-houses supplied is 8,552 in the Borough and 520 outside with a population of 42,000.

Rivers and Streams.—All the water courses in the Borough are small in volume, and periodical inspections have shown them to be in a satisfactory state.

Drainage and Sewerage.—The Borough sewage drains towards two sewage farms, one at the northern end and the other at the southern end of the town. The North Sewage Farm is 187 acres in extent, and the South Farm 197 acres. At the South Farm a portion of the sewage is treated by means of percolating bacteria beds. The effluents from both

Sewage Farms are frequently analysed and give satisfactory results. Sewage from a portion of the town lying north-west of Mount Ephraim is dealt with by pumping across to join the sewage which proceeds to the South Farm.

Closet Accommodation.—There are no privies in the Borough. Six pail closets are in use in houses situated in the rural outskirts of the Borough. Seventy-four water closets are connected to properly constructed cesspools, all the rest being connected to the public sewers.

Scavenging.—Refuse, both domestic and trade, is collected and removed in motor vehicles or covered carts once weekly. Trade refuse is collected daily from premises where this is necessary. Covered dustbins are very largely in use and where fixed brick receptacles are found to be defective, efforts, usually successful, are made to abolish them and substitute galvanised iron bins of which 605 were provided in 1927. Refuse is conveyed to tips situated near High Brooms Brickworks, and at Forest Road Brickworks. Modern motor dust collectors are being substituted for the antiquated covered carts, which have been in use and which have never proved satisfactory from a sanitary point of view.

Disposal of Refuse.—There has been a marked improvement in the condition of the two refuse dumps since the visit of the Ministry of Health's representative in November, 1926. The method adopted at the City of Bradford was studied on the spot by the Corporation's Superintendent of Refuse Disposal, who has since proceeded to carry it out in the best manner in which local conditions would allow. The layers of refuse are deeper than those recommended in the Bradford Report, but apart from this the method is closely adhered to, with the result that no nuisance now arises at either dump.

Schools.—All schools in the area are supplied with town water, and—with the exception of Rusthall Boys' School,

which drains to a cesspool in private grounds—are connected to the public sewers.

There was no closure of schools or classes on account of infectious disease in 1927.

Sanitary Inspection of Area.—During 1927, I re-visited all the dairy farms in the Borough, accompanied by the Senior Sanitary Inspector, and took the opportunity of investigating the alterations required on some premises to comply with the conditions of the most recent regulations. The additional assistant supplied to the sanitary inspecting staff has enabled the inspection of houses in the Borough to be proceeded with at a much greater rate than was formerly possible.

Attached is the report of the Senior Sanitary Inspector, Mr. H. T. Taylor, from which it will be seen that 615 dwelling houses were inspected for housing defects. Three hundred and forty-three of these were found not to be in all respects reasonably fit for human habitation. In addition 686 houses were inspected in connection with ashpit accommodation, of which 514 were found to be without proper ashpit accommodation.

Mr. Taylor's report also shews that much time and care were devoted to meat inspection by the sanitary staff.

*To the Medical Officer of Health,
Borough of Royal Tunbridge Wells.*

I beg to submit the following report on the work of the Sanitary Department during the year 1927.

The following Table gives a general statement as to the number of inspections, etc., made and other work done during the year :—

Houses inspected	...	...	...	...	...	...	405
Houses inspected—respecting Dustbins	...	...	...	...	...	...	686
Complaints investigated	...	...	...	...	...	...	159
Complaints referred to other departments	...	...	...	...	...	...	17

Houses inspected for Sanitary Certificates	...	...	...	7
Amount paid for inspections for and on granting of sanitary certificates	...	...	...	£38 8s.
Stables inspected	...	...	...	17
Visits respecting keeping of animals	...	...	...	25
" " rats	...	...	...	85
Secondary visits to houses under notice	...	...	...	3,381
Interviews respecting property, etc.	...	...	...	160
Occasions on which chemical test was applied to drains	...	...	...	194
" " " smoke	...	...	...	49
" " " water	...	...	...	112
Visits to slaughter houses	...	...	...	466
" " other food premises	...	...	...	92
" " bakehouses	...	...	...	68
" " dairies	...	...	...	118
" " cowsheds	...	...	...	41
" " ice cream premises	...	...	...	13
" " factories	...	...	...	36
" " workshops	...	...	...	136
" " workplaces	...	...	...	11
" " Common Lodging Houses	...	...	...	8
" " respecting infectious cases	...	...	...	88
Rooms disinfected	...	...	...	112
Loads of bedding removed	...	...	...	13
Other visits	...	...	...	154
Informal notices served—479, respecting 957 houses.				
Formal notices served—22, respecting 20 houses.				
Defects remedied	...	...	...	2,922
Food condemned and destroyed—1 ton 13 cwt. 15 lbs.				
Samples of food and drugs submitted to Public Analyst	...	...	...	128
Samples of milk tested at office	...	...	...	21

Notices in respect of 957 houses were served and at the end of the year the majority of these had been complied with. Special attention was paid to the question of ashpit accommodation, no less than 686 houses being visited in connection with the matter. Separate defects numbering 2,922 were remedied and these are classified as follows:—

Defects Remedied.

Houses re-drained	...	...	...	...	36
Houses at which drains were repaired	...	...	...	...	48
Intercepting traps fixed	...	...	...	...	2
Inspection chambers constructed	...	...	...	...	56
Inspection chambers repaired	...	...	...	...	17
New vent pipes fixed to drains	...	...	...	...	20
New soil pipes provided	...	...	...	...	6
Soil and vent pipes repaired	...	...	...	...	20
New glazed gullies fixed	...	...	...	...	115
Defective bell traps removed	...	...	...	...	2
Obstructions removed from drains	...	...	...	...	14
New W.C.'s constructed	...	...	...	...	4
Defective W.C. pans and traps removed	...	...	...	...	65
W.C.'s provided with water supply	...	...	...	...	2
Flushing cisterns repaired or renewed	...	...	...	...	38
Rain-water pipes disconnected from drains	...	...	...	...	12
Rain-water pipes and gutters repaired	...	...	...	...	95

Roofs repaired	83
Paving to yards repaired	114
Galvanized dust-bins provided	605
Ashpits discontinued	75
Accumulations of rubbish removed	9
Nuisances from animals abated	7
New sinks provided	30
Waste pipes repaired or renewed	64
Rooms stripped and distempered or re-papered	306
Ceilings cleansed and distempered	90
Rooms and bedding cleansed (tenant)	8
Overcrowding abated	4
Rooms ventilated	22
Wall repaired (internally)	123
Wall repaired (externally)	66
Floors repaired	141
Space under ground floors ventilated	67
Windows repaired	59
New sash cords fixed	149
Dampness remedied	20
Coppers repaired	46
Stoves repaired	47
Chimneys repaired	13
Food cupboards provided	1
Slaughter houses cleansed	5
Cowsheds limewashed	10
Dairies limewashed	12
Miscellaneous	194

Proceedings under the Public Health Act, 1875, were taken against a person for refusing admission to a dwelling-house for the purpose of examining as to the presence of a nuisance. A conviction was obtained and a fine of 20s. inflicted.

Factories and Workshops.

	Defects found.	Remedied.
Want of cleanliness	6	5
Overcrowding	—	—
Other nuisances	13	13
Sanitary accommodation insufficient	—	—
" unsuitable	7	6
" not separate	—	—
Breach of bakehouse requirements	15	13
Outworkers' premises cleansed ...	—	—
	41	37

FOOD SUPPLIES.

Food preparing places, particularly slaughter-houses, were again visited as frequently as time would permit, 466 visits being paid to slaughter-houses, and 92 to other food premises, not including bakehouses, dairies, etc. Food

weighing 1 ton 13 cwts. 15 lbs. was destroyed as being unfit for human consumption, this comprising :—

Beef (home killed)	...	...	541 lbs.	(532 lbs. tuberculous)
" offals (home killed)	...	...	421 "	417 "
Mutton	...	...	91 "	"
Pork (home killed)	...	...	955 "	955 "
Pigs' heads	...	...	191 "	191 "
Beasts' livers	...	...	225 "	58 "
Other offals	...	...	340 "	224 "
Imported beef	...	...	651 "	"
" offals	...	...	83 "	"
Fish	...	...	127 "	"
Bacon	...	...	39 "	"
Eggs (375)	...	...	47 "	"
			<hr/> 3,711 lbs. <hr/>	

The slaughter-houses in the district number five, four being registered and one licensed. One of the registered slaughter-houses was very little used during the year, the owner having acquired premises a short distance outside the Borough boundary at Hawkenbury, part of the premises being converted into an up-to-date slaughter-house. By arrangement with the Tonbridge Rural District Council, the supervision of the slaughter-house will be carried out by me from the 1st January, 1928.

Proceedings were taken against a butcher for removing a carcase and the offals thereof before the time prescribed in the Meat Regulations, and a conviction was obtained and a fine of twenty shillings inflicted.

Two hundred and fifty-four notices of intention to slaughter were received, these being in addition to the notices as to regular slaughtering days.

In view of the Milk and Dairies Order which came into operation on the 1st October, 1926, special attention was again paid to the dairies and cowsheds with the result that many improvements were made, particularly as regards the cleansing and sterilization of the utensils and vessels. Complete boilers and steam chests were installed at eight dairies, four steam chests were installed at four dairies already pos-

sessing boilers, one patent bottle washing machine was installed at another dairy, while at another a boiler has been installed preparatory to the fixing of a proper steam chest.

Two cow-keepers in the Borough expressed their intention of entering for the Kent County Clean Milk Competition, and carried out certain improvements at their farms to enable them to produce the high standard of milk which is required in these competitions.

During the year proceedings were taken against three men for carrying on the business of dairyman without being registered. These cases were brought forward more in the nature of a warning, and they were dismissed on payment of costs. One dairyman was also summoned for failing to have his name and address inscribed on the can from which he was selling milk, and he was convicted and fined ten shillings.

FOOD AND DRUGS.

The following Table gives the particulars as to the number of samples of food submitted for analysis during the year, and the action taken under the Food and Drugs Acts, and the Milk and Cream Regulations :—

FOOD AND DRUGS ACTS, 1927.

Nature of Article.	Examined.		Adulterated.		Remarks.
	Formal.	Informal. Total.	Formal	Informal. Total.	
New Milk ...	74	5 79	18	1 19	<p>No. 7. 19% deficient in fat. Cautioned.</p> <p>" 13. 16% Ditto ditto.</p> <p>" 39. Informal. 23% deficient in fat. Cautioned.</p> <p>" 51. 8% deficient in fat. Cautioned. Convicted for failing to have name on can.</p> <p>" 52. 25% deficient in fat and contained 3½% extraneous water. Fined £2 and 15s. costs.</p> <p>" 56. 9% deficient in fat. Cautioned.</p> <p>" 59. Contained 13½% added water. Samples 64—68 (inclusive) taken in course of delivery.</p> <p>" 60. 5% deficient in fat. Cautioned.</p> <p>" 64. 9% deficient in fat and contained 16½% extraneous water. Fined £2 10s. 0d. in each case and £4 14s. 0d. costs.</p> <p>" 65. 8% deficient in fat and contained 18% extraneous water.</p> <p>" 67. Contained 11% extraneous water } Taken in conjunc-</p> <p>" 68. Contained 13% extraneous water } tion with Nos. 64 & 65</p> <p>" 78. 40% Deficient in fat and contained 22½% added water. From similar source to 67 and 68.</p> <p>" 80. 9% deficient in fat. Cautioned.</p> <p>" 82. Contained 5½% added water. Cautioned.</p> <p>" 86. 6% deficient in fat. Cautioned.</p> <p>" 120. Contained 2½% extraneous water. Cautioned.</p> <p>" 125. Contained 20½% extraneous water. Fined £5 including costs.</p> <p>" 126. Contained 10% extraneous water. Fined £5 including costs.</p>
Carried forward	74	5 79	18	1 19	

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

REPORT FOR THE YEAR ENDED 31ST DECEMBER, 1927.

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

Article.	(a) Number of Samples examined for the pre- sence of a preserva- tive.	(b) Number in which a preservative was re- ported to be present and percentage of preservative found in each sample.
Milk ...	79	Nil.
Cream	6	4 0.39% Boric Acid. Informal. 0.08% ditto ditto 0.09% ditto. Formal 0.11% ditto ditto

The two formal samples were taken from the same vendors as the informal samples. Proceedings were taken in the case of the formal samples, and a fine of £3 (including costs) was inflicted in each instance.

(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	...	...	2
(ii.)	Statements incorrect	...	...	Nil

—

2

—

- (iii.) Percentage of preservative found in each sample—sample No. 63, 0.19%
No. 62, 0.23%. Percentage stated on statutory label, “ Not exceeding 0.4% ”

- (b) Determinations made of milk fat in cream sold as preserved cream.
- | | | | | | |
|-------|-----------|-----|-----|-----|-----|
| (i.) | Above 35% | ... | ... | ... | 2 |
| (ii.) | Below 35% | ... | ... | ... | Nil |
- (c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article 5 (1) and the proviso in Article 5 (2) of the Regulations have not been observed 1
- (d) Particulars of each case in which the regulations have not been complied with and action taken :—

Preserved cream deposited for sale in an unlabelled receptacle. Vendor cautioned.

(3.) *Thickening substances.*

Any evidence of their addition to cream or to preserved cream. Action taken where found.
Nil found.

(4.) *Other observations, if any.*

All milk samples submitted for analysis are examined for the presence of preservatives and other foreign substances.

HOUSING STATISTICS FOR THE YEAR 1927.

Number of new houses erected during the year :—

- | | | | | | | |
|-------|---|-----|-----|-----|-----|-----|
| (a) | Total (including numbers given separately under (b)) | ... | ... | ... | ... | 110 |
| (b) | With State assistance under the Housing Acts :— | | | | | |
| (i.) | By the Local Authority | ... | ... | ... | ... | 46 |
| (ii.) | By other bodies or persons | ... | ... | ... | ... | 22 |

I.—UNFIT DWELLING-HOUSES.

Inspection.

- | | | | | |
|-----|---|-----|-----|-----|
| (1) | Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) | ... | ... | 405 |
| | (In addition 686 houses were inspected in connection with ashpit accommodation.) | | | |

(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	210
(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	343
(In addition 514 houses were found to be without proper ashpit accommodation.)	

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	281
---	-----

III.—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	9
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) by owners	9
(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. Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	10
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) by owners	10
(b) by Local Authority in default of owners	Nil

C. Proceedings under sections 11, 14 and 15 of the Housing Act, 1925.

(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

Of the six houses mentioned in the Report for 1926 as being unfit for human habitation four are now unoccupied, they having been closed by the owners without statutory steps having to be taken by the Local Authority. It is proposed to clear the site as soon as possession can be obtained of the remaining two houses.

HARRY T. TAYLOR,

Chief Sanitary Inspector.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

A summary follows of the notifiable infectious diseases which occurred during each month of the year 1927. One hundred and fifty-two cases were notified during the year, as compared with 98 in 1926

Notifications of Pneumonia increased from 28 to 64, and of Diphtheria from 15 to 42. Forty-one cases of Pneumonia were notified in the first two months of the year, when Influenza was also prevalent. Nineteen cases of Diphtheria were notified in September during school holidays. The original source of infection was traced to a missed case of mild Diphtheria which had attended a Sunday School for two or three weeks before being traced.

Seasonal Incidence of Acute Infectious Diseases, 1927.

Month.	Scarlet Fever.	Diph- theria.	Enteric Fever Group.	Erysip- elas.	Ophthal- mia Neona- torum.	Encep- halitis lethar- gica.	Pneu- monia.	Acute Polio- myelitis.	Puer- peral Fever and Pyrexia
January ...	1	5	—	1	1	1	19	—	1
February ...	2	—	—	—	—	—	22	—	—
March ...	3	2	—	1	1	—	1	—	3
April ...	1	1	—	1	1	—	2	—	—
May ...	3	2	—	—	2	—	4	—	—
June ...	—	6	3	—	—	—	5	—	1
July ...	3	1	—	1	—	—	1	—	—
August ...	1	4	—	—	—	—	—	—	1
September ...	—	19	—	1	—	—	1	—	—
October ...	2	—	—	—	—	—	4	—	—
November ...	3	—	1	—	—	—	3	1	1
December ...	2	2	—	1	—	1	2	—	—
Total ...	21	42	4	6	5	2	64	1	7

Diphtheria.—The attack rate per thousand population was 1.2. Glancing at the Table appended it is noticed that in the years 1896 to 1900, Diphtheria was prevalent in the Borough; again in the years 1911 to 1915, it was prevalent,

though not on so extensive a scale. Arguing from these figures, the disease should again be rife in the period 1926 to 1930.

No rise occurred in 1926 ; in 1927 the number of cases rose from 15 to 42 ; one death occurred.

The Corporation provides anti-toxin, free of charge, for use by medical practitioners practising in the town. This anti-toxin can be obtained at the Public Health Offices at any hour. Specimens taken from suspicious cases are examined at the Public Health Offices and speedy reports of the examinations are given. Carriers, if found, are treated until the germ of Diptheria has either disappeared or lost its poisonous properties. The 42 patients were all treated in the Isolation Hospital.

**Comparison of the Fatality, Incidence, and Mortality of Diphtheria
in Different Years.**

Year.	Estimated Population.	No. of Cases.	Deaths Registered	Fatality per cent.	Attack- Rate per 1,000 Population	Death- Rate per 1,000 Population	Rainfall in inches.
1890	28,148	20	5	25.0	0.71	0.18	—
1891	27,984	16	4	25.0	0.57	0.14	—
1892	28,345	24	5	20.8	0.85	0.17	—
1893	28,705	41	9	21.9	1.40	0.31	26.05
1894	29,065	40	5	12.5	1.37	0.17	36.58
1895	29,535	44	8	18.2	1.49	0.27	26.69
1896	29,895	67	14	20.9	2.24	0.46	30.07
1897	30,255	117	10	8.5	3.86	0.33	27.65
1898	30,615	278	31	11.2	9.07	1.01	23.39
1899	30,975	120	7	5.8	3.87	0.23	28.10
1900	31,335	82	3	3.6	2.61	0.10	31.28
1901	33,443	31	1	3.2	0.92	0.03	24.84
1902	33,773	23	2	8.7	0.68	0.06	25.19
1903	34,073	9	0	0.0	0.26	0.00	42.41
1904	34,373	12	1	8.3	0.34	0.03	29.32
1905	34,673	17	0	0.0	0.49	0.00	27.05
1906	34,973	10	0	0.0	0.28	0.00	32.74
1907	35,273	27	6	22.2	0.76	0.17	28.55
1908	35,573	29	2	6.9	0.81	0.06	29.53
1909	35,873	11	3	27.3	0.31	0.08	35.14
1910	36,173	15	1	6.6	0.41	0.03	35.14
1911	35,778	69	8	11.6	1.92	0.22	35.19
* 1912	36,038	91	10	11.0	2.52	0.28	38.18
1913	36,298	129	4	3.1	3.5	0.11	—
1914	36,460	154	1	0.6	4.2	0.02	30.91
1915	33,430	83	5	6.0	2.5	0.15	35.15
1916	32,316	53	7	13.2	1.6	0.22	35.69
1917	30,751	40	1	2.5	1.3	0.03	31.38
1918	32,297	23	1	4.3	0.8	0.03	28.95
1919	34,423	57	7	12.3	1.6	0.20	29.24
1920	35,795	64	3	4.7	1.8	0.08	25.13
1921	34,270	32	1	3.1	0.9	0.03	16.45
1922	34,360	26	0	0.0	0.8	0.00	30.82
1923	34,370	11	1	9.0	0.3	0.03	32.25
1924	34,330	11	1	9.0	0.3	0.03	36.42
1925	34,080	14	1	7.1	0.4	0.03	32.81
1926	34,430	15	1	6.6	0.4	0.03	29.78
1927	33,870	42	1	2.4	1.2	0.03	40.06

* Since 1912, mild cases diagnosed by bacteriological examination are included; prior to that year they were unrecognised as cases of diphtheria. The attack-rate per 1,000 population, before 1912, was calculated without the aid of this method of detecting the presence of diphtheria.

Scarlet Fever.—The type of this disease was mild and the cases numbered 21 as compared with 37 in 1926. The difficulty of diagnosing mild cases of this disease is well known. The average number of cases in the previous five years was 73 per annum. Seventeen of the 21 cases were treated in the Isolation Hospital.

Enteric Fever.—Four cases of Typhoid or Para-Typhoid Fever were notified in 1927.

Encephalitis Lethargica.—There were two cases notified.

Acute Poliomyelitis.—One notification was received in 1927.

Puerperal Fever and Puerperal Pyrexia.—Under the new regulations dealing with Puerperal Fever and Puerperal Pyrexia, seven notifications were received in 1927; all of these were slight feverish conditions which rapidly cleared.

Ophthalmia Neonatorum.—Five cases of Ophthalmia Neonatorum occurred, all of them making complete recovery,

Non-Notifiable Acute Infectious Diseases.—Knowledge of these is chiefly obtained through schools in the first instance, and visiting at homes where school cases are notified enables the Health Visitors to discover the cases amongst younger children.

Whooping Cough and Chicken Pox were rather prevalent, the former in the spring months, the latter at the close of the year.

Influenza.—Thirty-seven deaths were ascribed to Influenza as compared with four in 1926. Cases were numerous in February and March; it was necessary to close the elementary schools for nine days at the end of February on account of a widespread epidemic of influenza.

Epidemic Diarrhoea and Enteritis.—Epidemic Diarrhoea was not prevalent; no deaths of infants were registered as being due to Diarrhoea and Enteritis.

Tuberculosis.—Under The Public Health (Tuberculosis) Regulations, 1924, it is required that a register be kept of all tuberculous persons in the area, and that it be brought

up to date each quarter when a statement of the number on the register is forwarded to the Health Authority of the Administrative County. The number of persons whose names were on the register at the close of the year 1926 was 130 Pulmonary and 48 Non-Pulmonary, and the number at the close of the year 1927, 120 Pulmonary and 56 Non-Pulmonary. The fresh cases and mortality during the year are set out in the accompanying Table.

TUBERCULOSIS.
New Cases and Mortality during 1927.

Age-Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
0	—	—	—	—	—	—	—	—
1	—	—	2	—	1	—	—	1
5	1	—	2	2	—	—	—	—
10	—	—	3	—	—	—	—	—
15	4	—	—	1	2	—	—	—
20	2	1	1	—	2	1	—	—
25	2	3	—	1	—	3	—	—
35	2	5	—	—	2	3	—	—
45	3	2	—	—	1	—	—	1
55	—	—	—	—	2	1	—	—
65 & upwards	—	2	—	—	—	2	1	—
Totals ...	14	13	8	4	10	10	1	2

It has not been necessary to take any action under the "Public Health (Prevention of Tuberculosis) Regulations, 1925," and no action was taken under Section 62 of the "Public Health Act, 1925."

The death rate for the present year, 0.68, is less than the average death rate for the previous five years, and excepting 1925, is the lowest recorded. Undoubtedly this rate should decrease, and conditions which will favour its decrease are (1) Better housing accommodation with free access of light and air and with free use of the means of ventilation; (2) better economic conditions with more regular employment and less under-nourishment prevailing; (3) the spread of informa-

tion upon the health-giving properties of sunlight and air and general teaching of personal hygiene ; (4) greater care on the part of the public to ensure a clean healthy food supply for themselves.

Deaths from Tuberculosis During the Last 38 Years.

Year.	Estimated Population.	Phthisis.	Phthisis. Death-rate	Other Forms of Tuberculosis.	Totals.	Tuberculosis Death-rate	Average Tuberculosis Death-rates
1890	28,148	37	1.32	12	49	1.38	1.77
1891	27,984	40	1.43	17	57	2.03	
1892	28,345	30	1.06	18	48	1.69	
1893	28,705	31	1.08	22	53	1.84	
1894	29,065	39	1.34	16	55	1.89	
1895	29,535	34	1.15	30	64	2.16	1.60
1896	29,895	25	0.83	21	46	1.54	
1897	30,255	25	0.82	11	36	1.19	
1898	30,615	21	0.68	20	41	1.35	
1899	30,975	40	1.29	15	55	1.77	
1900	31,335	20	0.63	24	44	0.85	1.24
1901	33,443	35	1.04	15	50	1.49	
1902	33,773	29	0.89	17	46	1.36	
1903	34,073	32	0.93	10	42	1.23	
1904	34,373	36	1.04	8	44	1.28	
1905	34,673	35	1.01	11	46	1.32	1.18
1906	34,973	28	0.80	8	36	1.03	
1907	35,273	35	0.99	8	43	1.22	
1908	35,573	20	0.56	14	34	0.93	
1909	35,873	43	1.19	7	50	1.39	
1910	36,173	28	0.77	11	39	1.08	1.00
1911	35,778	21	0.58	6	27	0.75	
1912	36,038	24	0.66	7	31	0.86	
1913	36,298	32	0.88	14	46	1.26	
1914	36,460	27	0.74	11	38	1.04	
1915	33,430	29	0.87	8	37	1.11	1.23
1916	32,316	28	0.87	12	40	1.24	
1917	30,751	30	0.97	13	43	1.40	
1918	32,297	36	1.11	17	53	1.64	
1919	34,423	29	0.87	10	39	1.16	
1920	35,795	21	0.59	12	33	0.92	0.84
1921	34,270	25	0.73	7	32	0.93	
1922	34,360	21	0.61	11	32	0.93	
1923	34,370	30	0.88	4	34	0.99	
1924	34,330	19	0.55	6	25	0.73	
1925	34,080	17	0.50	4	21	0.62	0.84
1926	34,430	26	0.76	3	29	0.84	
1927	33,870	20	0.59	3	23	0.68	

Tuberculosis and Venereal Diseases Schemes.—Arrangements for *treating* tuberculous persons and those suffering from venereal diseases are in the hands of the County Council which has arranged times for consultations at the Tuberculosis Dispensary, and at the General Hospital respectively.

Disinfection and Disinfestation.—Of premises, bedding, and clothing, is carried out either by or under the supervision of the sanitary staff. One disinfecting chamber is situated near the Public Health Offices and a smaller disinfector is in use at the Isolation Hospital. Formalin, Bacterol, or Sulphur Gas is used according to circumstances. In cases of vermin infestation, disinfection of rooms, bedding and clothing is similarly carried out. There is no public cleansing station in the Borough, but arrangements are now being made to establish one.

Bedding is disinfected after Enteric Fever, and, on request, after Cancer cases with discharges. Spring cleaning, washing and boiling of bed linen and personal wear and thorough airing of rooms which have been occupied by infected persons are advised. The chief method of spread is by direct contact with the human carrier, and disinfection occupies a less prominent position than it once did, even in diseases such as Scarlet Fever and Diphtheria. The building up of the patient's health in an airy environment such as that of the Borough Isolation Hospital, and attention to unhealthy conditions of the nose and throat or ears, are more fruitful methods of diminishing spread of infection than routine fumigation of rooms. Small doses of any infection protect an individual by raising his immunity to the disease; only very small doses of infection are likely to be acquired from the dust of a room which has been occupied by a sufferer from a disease. These remarks apply to the acute infectious diseases, and not to a long-lived infection such as that of Tuberculosis. A few infectious diseases are liable to be spread by means of clothing, books, etc.; the majority do not spread in this way, and each case must be judged on its merits.

MATERNITY AND CHILD WELFARE.

The Maternity Home referred to on page 26 continued to render excellent service in 1927, and in all cases where

Tunbridge Wells mothers leave the Home and are not under the care of a private medical attendant, steps are taken to secure supervision of the mothers and babies immediately.

The two Child Welfare Centres which meet on Wednesday and Thursday afternoons respectively, are largely attended, and overcrowding of the Thursday Clinic at Tunbridge Wells is avoided by a fresh arrangement involving the attendance of babies for weighing on Tuesday afternoons. The attendance figures at the Centres are as follows :—

	Rusthall.	Tunbridge Wells.
Infants under 1 year ...	328	1,335
Children 1 to 5 years ...	423	1,195
Expectant Mothers ...	22	98
Mothers ...	600	2,166

Total consultations with Medical Officer, 1,244.

The usual autumn competitive examination on mothercraft was arranged, a series of questions was set; other subjects for competition include sewing of baby garments, cutting down clothing to fit small children and the making of toys. Some of the fathers again entered for this branch of the competition. These competitive tests produced excellent results; the prizes were distributed again by Miss Parsonage, at a successful gathering presided over by Mr. Alderman Westbrook, the Deputy Mayor.

The ladies who, in past years, have unselfishly devoted so much time and enthusiasm to carrying on the work of the Centres by offering their voluntary services, have continued to do so and have contributed largely to the success of the Clinics.

Miss Rice Oxley devotes four-fifths of her time to Child Welfare duties, Miss Donaldson two-fifths, and Miss Ponting,

up to the time of her departure in June, two-fifths. One Child Welfare Visitor was, therefore, wanting from June to December, 1927.

The visits paid during the year were as follows :—

First visits to infants	413
Subsequent visits to infants	1,819
Visits to children 1 to 5 years	2,949
Visits to expectant mothers	205
Visits where infants have died	18
Visits—found no one at home	219

The Sub-Committee of the Maternity and Child Welfare Committee dealing with applications for assistance under the Milk (Mothers and Children) Orders, continued to meet on Monday mornings at the Public Health Offices and orders for 4,257 pints of fresh milk were granted. There were also issued free of cost :—152 lbs. dried milk, 111 lbs. Cod Liver Oil and Malt, four tins of Ovaltine, 50 pots of Virol and small quantities of some other foods or drugs. The Medical Officer also issued 78 certificates for milk to be supplied through the Guardians.

BOROUGH OF ROYAL TUNBRIDGE WELLS.

EDUCATION COMMITTEE :

Mr. Councillor BERWICK (Chairman).

M. Alderman SILCOCK.	Mr. Councillor SAUNDERS.
Mr. Alderman WESLEY SMITH.	The Rev. Canon A. W. OLIVER,
Mr. Alderman WILLMOT.	M.A.
Councillor Miss BAKER.	The Rev. T. G. GILLING-LAX,
Mr. Councillor BURSLEM.	M.A.
Mr. Councillor GILBERT.	Miss HAZLEWOOD.
Mr. Councillor HARGREAVES.	Miss MAUD ROBERTS.
Mr. Councillor HILLMAN.	Mr. J. A. PUNTON SMITH, M.B.E.
Mr. Councillor OATEN.	Mr. C. A. PRESTON, M.A.
Councillor Miss POWER.	Mr. C. H. STRANGE.

STAFF OF THE SCHOOL MEDICAL DEPARTMENT :

Clerk (*part time*) :

F. HICKS.

Junior Clerk (*part time*) :

H. J. BELLINGHAM.

School Nurses :

Miss F. CLARK.	Miss J. DONALDSON.	Miss A. I. PONTING.*
(<i>four-fifths time</i>).	(<i>two-fifths time</i>).	(<i>two-fifths time</i>).

School Dental Surgeon :

T. F. FOX, L.D.S., R.C.S., ENG.

Aural Surgeon :

J. WALKER WOOD, L.R.C.P., L.R.C.S., L.R.F.P.

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.

* Resigned 18/6/27.

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,

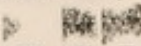
I have the honour to present to you my Report upon the work of the School Medical Department during the year 1927.

On December 31st, 1927, there were within the area of the Borough no provided schools and 18 non-provided schools, including 22 departments, with recognised accommodation for 5,122 children. The average attendance during the year was 2,990.

The question of the Open-Air School for 40 children of which I spoke in my preface to last year's report, has advanced a further step in that the sum of One thousand pounds has now been raised by voluntary contributions. Great thanks are due to Miss Robins and Miss Tritton for initiating this scheme, and to the generous benefactors who have made it possible for us to see the school in operation during the forthcoming year. Meantime, the voluntary Open-Air Class which accommodates 15 children, has been continued by Miss Tritton at Bredbury.

I am, Ladies and Gentlemen,

Your obedient servant,


F. C. LINTON.

1. STAFF.

On the first page of this Report are set out the names of the Staff, in which the following changes took place during the year :—Miss A. I. Ponting resigned her appointment in June, to take up similar duties in the County Borough of Croydon. Owing to the difficulty in obtaining a suitable successor, none was appointed until 1928, thus leaving a gap of several months. In September, 1927, Miss Clark, owing to ill-health, was unable to resume her duties, and as her ill-health continued, it was necessary to obtain the services of a half-time School Nurse, Mrs. Nelson, who carried out her duties acceptably during the last two months of the year. Naturally, owing to the lessened staff, the amount of work done was appreciably less than in 1926. All praise is due to Miss Donaldson for the extra duties which she undertook in endeavouring to meet the situation single-handed.

Mr. T. F. Fox, who is a welcome addition to the staff, completed his first full year's duty as School Dental Surgeon.

Dr. J. Walker Wood commenced duty as Aural Surgeon in April, 1927. This appointment has proved extremely useful and a number of children who suffered from chronic ear disease are now under definite and regular treatment.

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.

2. CO-ORDINATION.

(a) **Infant and Child Welfare.**—Two of the School Nurses also act as Maternity and Child Welfare Nurses ; the School Medical Officer is also Medical Officer to the Maternity and Child Welfare Centres ; co-ordination of the work is therefore thorough.

(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, either by supplying Milk or supplying Cod Liver Oil and Malt, free, or at cost price, according to circumstances; also by giving certificates for relief from the Guardians where medical grounds necessitated additional nourishment: 78 such certificates were given by me during the year.

When a child, either of school age or under, is found by the Corporation Medical Staff to require a change of air, suitable arrangements are made in one of the following ways:—
 (i.) The parents may be able to take the child to the seaside, or to send him to relatives at the seaside or in the country.
 (ii.) Where such facilities do not exist, the case is referred to the Invalid Children's Aid Branch of the Charity Organisation Society which makes the necessary arrangements with Convalescent Homes. A change of air has thus been obtained in every case in which it was recommended.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

3. SCHOOL HYGIENE.

Considerable alterations were made in 1927, in the arrangement and staffing of the schools. These alterations were useful so far as they went, but unfortunately included no scheme for improvement in the structure or environment of school buildings, many of which are far from ideal. I should like the Members of the Education Committee to keep in mind the need for a larger central school, constructed on modern lines, to replace several of the less satisfactory of the present buildings. There is no lack of means of transport for scholars now, so that distance need be no deterrent.

4. 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 1,192. (See Table I. at end of Report.) In addition, 318 children were medically re-inspected in the schools. At the School Medical Centre, 1,189 special inspections and 786 re-inspections took place. The total number of inspections was therefore 3,167.

The Board's Schedule of Medical Inspection was followed as closely as was possible under the exceptional circumstances arising from the change over of the scholars under the reconstruction scheme. The departments are now Senior, Junior Mixed and Infants, instead of as formerly, Boys, Girls and Infants. The difficulty in tracing children chiefly affected the intermediate age group, as very few children belonging to this group continued to attend the same school as previously. This difficulty is one which will not recur.

School inspections were held in the afternoons, arrangements being made for the inspection of 25 children at each session. The parents are invariably notified before an inspection and their presence is requested.

5. FINDINGS OF MEDICAL INSPECTIONS.

(a) **Uncleanliness.**—The shortage of Nursing Staff, as set out in my foreword to this Report, hampered the work of cleanliness inspections. The foundation of this work has, however, been well and truly laid in the past few years. Six thousand, seven hundred and forty-three heads were inspected in 1927, and of these only 4.3 per cent. shewed the presence of infestation with vermin or their eggs. This percentage compares favourably with the 14.7 per cent. of 1922; it is the lowest percentage yet recorded. These good results are chiefly due to the excellent work of the School Nurses; they are also due to the efforts of many of the Head Teachers and to the spread of knowledge of what cleanliness means to health amongst the school children themselves and their parents. The total number of inspections for the presence of vermin was 7,000; of this total, 163 were re-inspections in school and 94 re-inspections made at the

School Medical Centre. The Nurses themselves treated at the Centre 11 cases in which the parents for one reason or another found difficulty in clearing the children's heads from nits. Another factor which has tended to reduce the percentage of uncleanness is the short hair fashion in vogue amongst the senior girls. This enables the hair to be much more easily kept free from infestation and to be cleared rapidly should it occur.

The following Table records the work done by the School Nurses at the routine head inspections, and the conditions found, as compared with the years 1926 and 1922, the year in which the vigorous campaign was started.

INSPECTIONS OF HEADS FOR YEAR 1927.

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, 1927.	Percentage of Nits or Vermin found, 1926.	Percentage of Nits or Vermin found, 1922.
St. James', Boys ...	362	6	—	1.6	3.4	5.2
" Girls ...	315	16	—	5.1	10.1	8.6
" Infants ...	411	4	1	1.2	1.1	5.8
St. Barnabas', Jun. M'd	372	27	2	7.7	—	—
" Infants ...	243	12	—	4.9	9.7	14.4
St. John's Jun. Mixed	481	5	3	1.7	—	—
Down Lane ...	286	8	4	4.2	6.5	8.9
St. Luke's ...	339	20	17	10.9	14.2	20.6
St. Augustine's ...	319	21	13	10.7	13.0	31.3
Grosvenor ...	267	1	—	0.4	1.5	7.7
Royal Victoria ...	237	5	—	2.1	2.8	4.7
Basinghall ...	492	10	7	3.4	7.3	15.6
Holy Trinity ...	280	20	1	7.5	8.2	24.9
St. Peter's, Jun. Mixed	206	13	1	6.8	—	—
" Infants ...	161	5	—	3.1	17.3	28.8
Rusthall, Boys ...	356	10	—	2.8	4.3	10.9
" Girls ...	335	17	3	6.0	4.6	28.0
" Infants ...	264	12	2	5.3	3.6	13.8
Murray House ...	366	7	—	2.0	2.6	4.7
King Charles' ...	310	1	—	0.3	1.4	1.3
Christ Church ...	216	8	—	3.7	4.6	34.2
St. Mark's, Jun. Mixed	106	5	—	4.7	0.6	19.3
Delicate Class ...	19	—	—	—	20.0	—
TOTALS ...	6,743	233	54	4.3	6.0	14.7

Every effort is made to advise and aid parents in getting children cleared of the trouble as soon as it is found. It was not found necessary to result to prosecution in any case during 1927.

(b) **Minor Ailments.**—Under this heading, which includes cuts, abrasions, (e) skin disease and (f) external eye disease, 295 cases were seen during the year; of these, 100 were cases of skin disease and 21 were cases of external eye disease.

(c) **Tonsils and Adenoids.**—Four hundred and twenty-two children were noted as having enlarged tonsils; 41 others had adenoid growths, and 151 had enlargement of tonsils and adenoids, while 38 suffered from other conditions of the nose and throat. These large figures point to the continuance of unhealthy factors in the lives of the children tending to produce re-action and overgrowth of tissues normally small, in an attempt to deal with attacking poisons. I am of opinion that more fresh air and less dust both in the homes and in the school buildings, will go far towards diminishing the overgrowth of tissue in the breathing passages, though much of it is doubtless due to our moist climate.

(d) **Tuberculosis.**—Eighteen cases of tuberculosis were found amongst the children inspected, and of these one was a case of tuberculosis of the lungs. In addition, 10 suspected cases of pulmonary tuberculosis were seen.

(g) **Vision.**—Eighty-nine cases of defective vision and 14 cases of squint were detected, all being referred to the Ophthalmic Surgeon for the necessary treatment.

(h) **Ear Disease and Hearing.**—Defective hearing was noted in 21 cases, disease of the middle ear in 34, and other diseases in 21 cases. These cases were referred to Dr. Walker Wood, the Aural Surgeon, who attended once each month at the School Clinic to see children referred to him.

(i) **Dental Defects.**—Nine hundred and three children were noted to be suffering from dental diseases. A few of the most urgent of these were referred directly to the School Dental Surgeon, most of whose patients are selected by himself at the School Dental Inspections for treatment. Many others were advised to have dental treatment elsewhere, facilities for such treatment being explained to the parents. At Routine Medical Inspections 806 out of 1,192 children inspected had defective teeth, a percentage of 67.5.

(j) **Crippling Defects.**—Thirty children were found to be suffering from crippling defects. At the end of the year three of these were being educated at Certified Residential Schools and 21 attended ordinary schools. Two were attending a small voluntary class held by Miss Tritton for delicate children and 4 were at no school or institution.

6. INFECTIOUS DISEASE.

All schools were closed under Article 57 of the Code for nine days on account of a widespread outbreak of influenza.

The accompanying Table records the incidence of various infectious diseases amongst school children during the year :—

Scarlet Fever.			Enteric Fever.			Diphtheria.			German Measles.		Measles.			Whooping Cough.		Chicken Pox.		Mumps.	
Boys.	Girls.	Deaths.	Boys.	Girls.	Deaths.	Boys.	Girls.	Deaths.	Boys.	Girls.	Boys.	Girls.	Deaths.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
4	11	—	—	1	—	14	11	1	12	16	12	7	—	55	76	110	81	6	3

8. MEDICAL TREATMENT.

(a) **Minor Ailments.**—One hundred and thirty-four cases of minor ailments amongst the school children were treated during 1927 ; of these 97 were treated at the School Medical Centre, making 1,057 attendances ; the remaining 37 were treated elsewhere.

(b) **Tonsils and Adenoids.**—One hundred and forty-four children suffering from enlarged tonsils or adenoid growths or both, received operative treatment ; 79 of these operations were performed under the Local Education Authority's arrangements with the hospitals. The average sum paid for these operations by the parents was six shillings and elevenpence. The total number recommended for treatment was 287 ; 52 per cent. were actually treated, 144 by operation and six by other forms of treatment.

I am of opinion that the large number of children who now have their noses and throats freed from unhealthy conditions is a valuable factor in reducing the incidence of infectious disease. It is also bound to diminish the number and severity of catarrhal infections which sweep through the schools during the wetter months.

(c) **Tuberculosis.**—All suspected or definite cases of this disease are referred for medical treatment—mostly to the Tuberculosis Officer ; they are also carefully followed up to see that all obtain treatment.

(d) **Skin Disease.**—One hundred cases of disease of the skin were found at Routine and Special Inspections as compared with 104 in 1926, and 103 in 1925. Eighty of these were classed as requiring treatment, 44 being treated at the Clinic and 19 being known to have had treatment elsewhere.

(e) **External Eye Disease.**—Twenty-one cases as compared with 29 in 1926 were detected, and of the 10 recommended treatment, four were treated at the School Clinic.

(f) **Vision.**—Eighty-nine defects of vision and 14 cases of squint were found in the course of inspections. Eighty-six of these were referred to the Ophthalmic Surgeon, from whom they received suitable treatment. At the School Clinic 490 attendances were made to see Dr. Davies; in addition, 339 attendances were made for atropine and other treatment for the eyes.

(g) **Ear Disease and Hearing.**—All cases were referred to Dr. Walker Wood, who is in attendance at the School Clinic on the first Monday in each month. Urgent cases were sent to see him at the Eye and Ear Hospital with a personal note. Minor defects, such as wax in the ear and eczema of the external channel, were treated at the School Clinic.

Appended is a report of the work done by the Aural Surgeon :—

REPORT OF AURAL SURGEON.

Ear.

Thirty-six children were referred to me for examination on account of deafness.

Of these 15 had actively discharging ears from chronic suppurative otitis media. These cases were treated either at the Clinic by the School Nurse or under my supervision at the Eye and Ear Hospital. Four cases were treated by Ionisation.

In 10 cases the deafness was found to be due to Eustachian obstruction, and regular treatment at the Clinic has brought about a cure in practically all the cases.

In six children the deafness was found to be due to the effects of old standing, and probably untreated, suppuration in early life. At the time of examination the ears were dry but badly damaged. Local treatment is of little use in these cases, but is always tried.

In two cases of suppuration in the ear Aural Polypi were found and removed later at the Eye and Ear Hospital.

Other causes of deafness :—One case of Cochlear (nerve) deafness following Mumps ; one case of External Otitis and one case of Cerumen (wax in ears).

Nose and Throat.

Fifty-four cases were specially referred to me on account of suspected adenoids or septic tonsils, because of otorrhoea, mouth breathing, recurrent colds, ear-ache, "growing pains" and headaches. Twenty-one of these cases have had operation for removal of tonsils and adenoids in six cases the parents refused operation and in three cases refused all treatment. The remainder are under treatment or awaiting operation.

Other conditions for which treatment has been given : One case of Laryngitis, one case of Glands in neck, one case of Sinusitis (Antrum).

(h) **Dental Defects.**—The School Dental Surgeon, whose work has increased since April, 1927, by the addition of three half-days per month, devoted 28 half-days to inspections in the schools, and 121 half-days to treatment at the Centre. The total number of children inspected was 1,640, of whom 95 per cent. were found to require treatment. Seven hundred and thirty-nine were actually treated, making 1,343 attendances as compared with 676 actually treated the previous year. It is still difficult to persuade some parents whose children are not actually suffering from toothache that commencing decay needs attention, but it is hoped by suitable propaganda work that the number of such parents will gradually diminish. Fees charged for treatment at the Clinic are one shilling for gas administration and sixpence per child treated. The aim of the Dental Surgeon's work is to save teeth wherever possible, thus according with the aim of the Board of Education.

In 1922, with a view to encouraging tooth cleansing amongst school children, a number of tooth brushes and suitable tooth pastes were purchased out of voluntary funds, and were sold to school children applying for them at the School Medical Centre, or, in some instances, through the Head Teachers. The sale of these brushes and tooth pastes has been continued, and is helping materially to bring about an increased interest in oral hygiene. The brushes are sold at sixpence each, 45 being purchased by the children during 1927. One hundred and twenty-seven boxes or tubes of tooth paste have also been sold at a price of one penny each.

The details of the Dental Surgeon's work are given in Table IV., Group IV.

(i) **Crippling Defects and Orthopaedics.**—Three crippled children were receiving both education and treatment in residential institutions at the end of the year, one boy and two girls being educated at the Heritage Craft Schools at Chailey, Sussex. At the General Hospital, Tunbridge Wells, there is a well-equipped orthopaedic department to which school children are sent for treatment. Dr. Horder directs the treatment and in each case a personal note is sent to him explaining the condition of the crippled child and asking that treatment may be given. In this way a considerable number of those cripples who require remedial exercises are obtaining them. Definite arrangements have now been made so that children who ought to be having treatment may continue to do so for as long a period as is necessary. These arrangements come into force on 1st April, 1928.

9. OPEN-AIR EDUCATION.

The Borough Education Committee has up to the present no facilities for open-air education under its control. The small voluntary class formerly held in a specially prepared hut in the garden of 33, Queen's Road, has continued to function

throughout the year, meeting at "Bredbury," Mount Ephraim, through the kindness of Mrs. Duncanson.

The number of delicate children who attend it varied from 12 to 16. A former Infants' School Teacher was employed to take the classes, which were held from 10 o'clock to 12.15 daily.

An open-air School Committee was formed and directed its endeavours to raising the necessary money to build and equip a suitable open-air school for forty children. These endeavours have now met with success, and the Local Authority is consulting the Board of Education about the best method of procedure before taking further steps.

10. PHYSICAL TRAINING.

There is no specially appointed Director of Physical Training in Tunbridge Wells, and it is left to the Head Teachers to organise this branch of education to the best of their ability. So far, owing to the lack of any organised physical training arrangements, the work has not been closely associated with the School Medical Service. In every case in which a child's health is such as to impede or prevent his undertaking drill or severe physical exercises, notice to this effect is given to the Head Teacher at the time of inspection.

11. PROVISION OF MEALS.

No action was taken by the Education Authority in this respect, but suitable extra nourishment is provided in cases of malnutrition by supplying milk in school or by other methods; payment for the nourishment provided is made either by funds at the disposal of the Managers' Committees or from a voluntary fund raised by the School Medical Staff. It has always been found possible to obtain the additional nourishment by one or other means when required.

12. 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 and Indoor Swimming Baths.—The Baths Committee of the Town Council have arranged to admit scholars from the Elementary Schools in the Borough when in charge of a teacher and bringing their own towels, free of charge to the Baths; the accompanying teacher is also admitted free of charge. For these privileges the Education Committee pays the Baths Committee a sum of ten shillings per week for the services of a swimming instructor and a payment of a half-penny in respect of each scholar admitted to the Open-Air Bath during school hours, and a sum of one penny for each scholar admitted to the Indoor Bath during school hours, on any week day save Monday. The swimming instructor is available at the Open-Air Bath from June to August, and during the remaining nine months of the year at the Indoor Bath. The number of attendances has again risen considerably, being 15,729. Tests are made, and elementary and proficiency certificates are given to scholars who pass the necessary tests to the satisfaction of the Baths Superintendent.

13. CO-OPERATION OF PARENTS.

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 shows a slight decrease and was as follows :—79 per cent. attended at the inspection of infants : 50 per cent. at the inspection of senior boys ; and 64 per cent. at the inspection of senior girls.

14. CO-OPERATION OF TEACHERS.

(i.) MEDICAL INSPECTION.—The Head Teacher is present at Medical Inspections and is informed of all cases in which special care is required on account of the child's physical condition. The Head Teachers have evinced in many ways a keen interest in the health of the pupils committed to their charge and have co-operated accordingly with the School Medical Staff in endeavours to keep the general standard of health at a high level.

(ii.) FOLLOWING-UP.—The Head Teachers keep in touch with the School Nurses and frequently add their advice and counsel to the parents in the matter of obtaining treatment where defects call for it.

(iii.) MEDICAL TREATMENT OF THE CHILDREN.—The Head Teachers are all informed of the advisability of sending any child who appears to be below his usual state of health to the School Medical Centre in cases where the child is not already receiving private medical attention. The power to send children to the Centre is vested in the School Medical Staff, Head Teachers, School Attendance Officer, or parents. In order to facilitate the recording of school attendances a card is issued to allow of the time spent at the medical treatment centre to be recorded for school attendance purposes. This arrangement is much appreciated by the teachers, as it dispenses with loss of attendance marks on such occasion.

15. CO-OPERATION OF SCHOOL ATTENDANCE OFFICER.

The School Attendance Officer whose office is situated at the Town Hall, keeps in constant touch with the School Medical Department and co-operation is cordial and complete;

16. CO-OPERATION OF VOLUNTARY BODIES.

(i.) No call is made upon voluntary bodies in connection with the work of medical inspection.

(ii.) In following-up mentally defective children, the Kent Voluntary Association for Mental Welfare does useful work and it has also established an occupation centre formerly meeting in St. Barnabas' Hall, but transferred during the year to Belgrave Rooms, Goods Station Road, in which children of the imbecile class or a few low-grade feeble-minded children are taught some handwork and otherwise occupied.

The following report from the Secretary shews the useful work done by the Association :—

KENT VOLUNTARY ASSOCIATION FOR MENTAL WELFARE.

REPORT ON WORK FOR THE TUNBRIDGE WELLS EDUCATION COMMITTEE CARRIED OUT FOR MENTALLY DEFECTIVE CHILDREN DURING THE YEAR 1927.

The total number of children of school age under the supervision of the Association on January 1st, 1927, was 19. During the year four new cases have been received from the School Medical Officer. Two cases were sent in as ascertainties and have been returned for supervision, thus bringing the total to 25.

Of these cases the details are as follows :—

Transferred to County M.D. Committee for					
Statutory Sup.	...	...	...	...	3
Transferred to County M.D. Committee for					
Friendly Sup.	...	...	...	...	2
					—
Now visited for County M.D. Committee					5
					—

Of the remainder, all under 16 years of age.

Attending Elementary School	...	...	5
Attending Tonbridge Special School	...	...	7
At Residential Special School	...	...	2
Attending no School	...	...	6
(Two of these are in employment : one is in the Pembury Infirmary.)			
			—20

25

Total number of children of school age under the supervision of the Association, Decem- ber 31st, 1927	20
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Reports and Visits.

Twenty-two reports have been rendered during the current year including 18 annual reports, two special reports on home circumstances with recommendations for Friendly Supervision, two ascertainment reports. In addition, reports in letter form have been rendered in respect of approximately six cases.

Twenty-five visits have been paid to cases by members of the staff and approximately 40 by voluntary visitors.

At the request of the Committee assistance has been given in obtaining a vacancy at a Residential Special School.

Convalescent and hospital treatment has been obtained for two children, one of whom was sent to St. Mary's Home, Broadstairs, for a period of two months.

After Care.

Difficulty has been experienced in obtaining suitable employment for the boys and girls as they leave school.

One lad has however been taught to seat stools with sea grass and he has now obtained orders from a local shop and is anxious to learn other forms of saleable handicrafts.

Two boys have attended regularly at the Occupation Centre where good work continues to be done.

The Centre is now held at the Belgrave Rooms, Goods Station Road, on Monday, Tuesday, Thursday and Friday mornings, from 10 to 12 o'clock.

Guardianship Scheme.

The Association has been asked to develop a Guardianship Scheme for the County Mental Deficiency Committee as an alternative to institutional care. By means of the Scheme children will be placed in homes in the neighbourhood of one of the Association's Occupation Centres and young people of 16 years and over will be placed with employer guardians with a view to providing them, where possible with domestic farm or garden work.

Several cases have been already satisfactorily placed, and it will be of interest to your Committee to know that one of their cases is to be placed early in the new year.

(iii.) The Invalid Children's Aid Branch of the Charity Organisation Society is always appealed to when it is desired to get a child to a Convalescent Home and the arrangements are made by the Secretary of the I.C.A. This has been of great help in the medical treatment of invalid children, and I am glad to have this opportunity of acknowledging my indebtedness to the Society for this work. The Surgical Aid Society provides letters—each of the value of five shillings—in all cases where glasses have been recommended to children whose parents have been found on investigation to require such assistance. In 14 out of 62 cases assistance was given in 1927.

17. 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 Centres. 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.—One boy and one girl inmates of certified schools for the blind at Brighton. Four other children who are suffering from marked short-sightedness are attending ordinary Elementary Schools.

(b) DEAF.—Two children who are too deaf to benefit from ordinary Elementary School training are inmates of a certified school for the deaf in Brighton.

There are also 11 partially deaf children attending ordinary school all of whom have been or are receiving treatment at the Eye and Ear Hospital.

(c) MENTALLY DEFECTIVE.—Thirteen examinations of fresh children presented for mental defects were made during 1927, the children being classed as follows :—Two of normal intelligence, four dull or backward, three feeble-minded within the Meaning of the Mental Deficiency Acts, and four imbecile. In addition, amongst a number of children re-inspected, one formerly classed as feeble-minded has now been placed in the imbecile class.

Three children, two boys and one girl, certified as feeble-minded, were, on 31st December, 1927, residents of institutions for training the mentally deficient, the Local Education Authority being responsible for their maintenance. Three boys and one girl were notified to the Local Control Authority as imbecile during the year.

The arrangement of sending feeble-minded children to the Tonbridge Special School as daily pupils, begun in the autumn of 1925, proved satisfactory and ten places were taken for Tunbridge Wells children in 1926. The number of places was increased to 12 for the year 1927. The 'bus takes the children daily to and from the school door, a distance of four and a half miles from Tunbridge Wells.

Besides the 12 feeble-minded children attending the Special School, eight such children are attending ordinary school in Tunbridge Wells.

(d) EPILEPTIC.—One boy is being maintained and educated at an Epileptic Colony, the Local Education Authority being responsible for his maintenance. In addition five cases of epilepsy, none severe, are attending the Public Elementary Schools, and one boy was not at any school.

(e) PHYSICALLY DEFECTIVE.—Under this heading, at the end of the year were classed 103 children (see Table III.). Of these 79 were attending Public Elementary Schools. Under the Local Education Authority's arrangements, three were being educated at the Certified Residential School at Chailey, Sussex; of seventeen children who suffered from Tuberculosis, thirteen attended school, one was in an institution, and three were at no school. Twelve children were attending the open-air class held in "Bredbury," and eight other physically defective children were not attending any school or institution; one cripple was attending the Technical Institute, and one, also feeble-minded, attended the Special School at Tonbridge.

18. NURSERY ; 19. SECONDARY ; AND 20. 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.

21. EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

Employment of Elementary School children is not of considerable extent and takes the shape of doing paper rounds, occasionally errand rounds on Saturdays, and acting as houseboys in a few instances. During 1927, 92 certificates were granted to fresh children.

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

22. 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.

Number of Code Group Inspections—									
Entrants	...	...	...	...	...	...	...	...	468
Intermediates	...	...	...	...	...	...	...	...	228
Leavers	...	...	...	...	...	...	...	...	424
									<hr/>
Total	...	...	...	...	...	...	...	...	1120
Number of other Routine Inspections	...	...	...	...	...	...	...	...	72
									<hr/>
									1192

B.—OTHER INSPECTIONS.								
Number of Special Inspections ... ..	...	...	...	...	...		1189	
Number of Re-Inspections ... ..	...	...	...	...	...		786	
Total ... ..	...	...	...	...	...	—		1975
Grand Total ... ..	...	...	...	...	...	...		3160

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR
ENDED 31ST DECEMBER, 1927.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treat- ment.	Requiring to be kept under ob- servation, but not requiring Treatment	Requiring Treat- ment.	Requiring to be kept under ob- servation, but not requiring Treatment.
(1)	(2)	(3)	(4)	(5)
Malnutrition	—	26	13	—
Uncleanliness : (See Table IV., Group V.)	—	—	—	—
Skin—				
Ringworm—Scalp	—	—	5	—
Body	—	1	2	—
Scabies	1	1	7	—
Impetigo	—	5	30	—
Other Diseases (Non-Tuberculous)	—	5	35	8
Eye—				
Blepharitis	—	3	3	4
Conjunctivitis	—	2	3	1
Keratitis	—	—	—	—
Corneal Opacities	—	—	2	—
Defective Vision (excluding Squint)	65	16	8	—
Squint	7	1	6	—
Other Conditions	1	—	1	1
Ear—				
Defective Hearing	2	11	7	1
Otitis Media	4	17	13	—
Other Ear Diseases	3	11	7	—
Nose and Throat—				
Enlarged Tonsils only	98	246	38	40
Adenoids only	14	20	5	2
Enlarged Tonsils and Adenoids	61	38	50	10
Other Conditions	2	4	19	18
Enlarged Cervical Glands (Non-Tuberculous)	1	223	9	7
Defective Speech	—	—	—	5
Teeth—Dental Diseases	89	717	62	35
(See Table IV., Group IV.)				
Heart and Circulation—				
Heart Disease—Organic	3	—	2	6
Functional	—	31	—	5
Anæmia	1	6	7	—
Lungs—				
Bronchitis	2	5	10	—
Other Non-Tuberculous Diseases	—	4	—	—
Tuberculosis—				
Pulmonary—Definite	—	—	1	—
Suspected	—	1	9	—
Non-Pulmonary—Glands	3	5	5	—
Spine	—	—	—	—
Hip	—	—	1	—
Other Bones and Joints	—	—	—	—
Skin	—	—	—	—
Other Forms	—	1	2	—
Nervous System—				
Epilepsy	—	1	1	1
Chorea	—	—	12	1
Other Conditions	1	5	4	1
Deformities—				
Rickets	—	2	—	—
Spinal Curvature	1	4	3	3
Other Forms	1	13	10	2
Other Defects and Diseases	7	42	93	32

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	468	130	27.8
Intermediates	228	78	34.4
Leavers	424	124	29.2
Total (Code Groups)	1120	332	29.7
Other Routine Inspections	72	25	34.7

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 ...	—	—	—
	(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	1	3	4
		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	1	2
		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	6	5	11
		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	9	6	15
		Attending Public Elementary Schools	4	4	8
		At other Institutions	—	—	—
		At no School or Institution ...	—	—	—
	Notified to the Local Control Authority during the year.	Feeble-minded	5	3	8
		Imbeciles	—	—	—
		Idiots	—	—	—

TABLE III.—continued.

			Boys	Girls	Total
EPILEPTICS.	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics ...	1	—	1
		In Institutions other than Certified Special Schools ...	—	—	—
		Attending Public Elementary Schools ...	—	—	—
		At no School or Institution ...	1	—	1
	Suffering from epilepsy which is not severe.	Attending Public Elementary Schools ...	4	1	5
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 ...	1	—	1
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board ...	—	—	—
		At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Open-Air Schools ...	—	—	—
		At Public Elementary Schools ...	2	—	2
		At other Institutions ...	—	1	1
		At no School or Institution ...	—	—	—
	Delicate children (<i>e.g.</i> , pre- or latent tuberculosis, malnutrition, debility, anaemia, etc.).	At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Open-Air Schools ...	—	—	—
		At Public Elementary Schools ...	25	20	45
		At other Institutions ...	8	7	10†
		At no School or Institution ...	—	—	—
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board ...	—	—	—
		At Public Elementary Schools ...	6	5	11
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	2	3
	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 Hospital Schools ...	—	—	—
		At Certified Residential Cripple Schools ...	1	2	3
		At Certified Day Cripple Schools ...	—	—	—
		At Public Elementary Schools ...	11	10	21
		At other Institutions ...	1	1	2
		At no School or Institution ...	3	1	4

† At an Open-Air Class, meeting in private house and garden by voluntary arrangement.

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1927.

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	1	2	3
Ringworm-Body	2	—	2
Scabies	1	8	9
Impetigo	29	2	31
Other skin disease	11	7	18
Minor Eye Defects—	4	1	5
(External and other, but excluding cases falling in Group II.)			
Minor Ear Defects	12	—	12
Miscellaneous	37	17	54
(e.g., minor injuries, bruises, sores, chilblains, etc.)			
Total	97	37	134

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.			
(1)	Under the Authority's Scheme. (2)	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme. (3)	Otherwise. (4)	Total. (5)
Errors of Refraction (including Squint)	197	5	—	202
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	31	—	—	31
Total	228	5	—	233

Total number of children for whom spectacles were prescribed—

(a) Under the Authority's Scheme ... 80

(b) Otherwise ... 76

Total number of children who obtained or received spectacles—

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

(b) Otherwise ... 62

Total ... 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)	
9	65	144	150

TABLE IV.—continued.

GROUP IV.—DENTAL DEFECTS.

(1) Number of Children who were:—		(2) Half-days devoted to:—			
(a) Inspected by the Dentist:		Inspection ...	...	...	28
Aged:		Treatment ...	...	...	121
Routine Age Groups—		Total	...	...	149
5	...		...	...	110
6	...		...	...	185
7	...		...	...	260
8	...		...	...	168
9	...		...	...	140
10	...		...	...	177
11	...		...	...	165
12	...		...	...	155
13	...		...	...	139
14	...		...	...	63
Total ...	...		...	...	1562
Specials	...		...	...	78
Grand Total ...	...		...	...	1640
(b) Found to require treatment			...	...	1561
(c) Actually treated	...		...	...	739
(d) Re-treated during the year as the result of periodical examination	...		...	...	375
(3) Attendances made by children for treatment			...	...	1343
(4) Fillings:—			...	...
Permanent teeth	...		...	...	1202
Temporary teeth	...		...	...	699
Total	...		...	...	1901
(5) Extractions:—			...	...
Permanent teeth	...		...	...	136
Temporary teeth	...		...	...	1254
Total	...		...	...	1390
(6) Administrations of general anaesthetics for extractions			...	...	105
(7) Other operations:			...	...
Permanent teeth	...		...	...	115
Temporary teeth	...		...	...	12
Total	...		...	...	127

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i.)	Average number of visits per school made during the year by the School Nurses	...	...	4.2
(ii.)	Total number of examinations of children in the Schools by School Nurses	...	...	6,743
(iii.)	Number of individual children found unclean	...	...	49
(iv.)	Number of children cleansed under arrangements made by the Local Education Authority	...	...	11
(v.)	Number of cases in which legal proceedings were taken:—			
(a)	Under the Education Act, 1921	...	...	0
(b)	Under School Attendance Bye-Laws	...	...	0

Number of Children Medically Inspected at each School.

SCHOOL.	GRADE.	BOYS.	GIRLS.
St. James'	Boys ...	46	—
"	Girls ...	—	57
"	Infants	57	36
St. Barnabas'	Mixed	20	24
"	Infants	27	37
St. John's	Mixed ...	41	19
Down Lane	Infants	30	26
St. Luke's	Infants	26	32
St. Augustine's	Mixed ...	19	13
Royal Victoria	Boys ...	51	—
Grosvenor	Mixed ...	23	22
Basinghall	Infants	55	56
Holy Trinity	Girls ...	—	59
St. Peter's	Mixed	29	23
"	Infants	15	18
Murray House	Girls ...	—	74
King Charles'	Boys ...	28	—
Christ Church	Infants	13	15
St. Mark's	Mixed ...	17	20
Rusthall	Boys ...	59	—
"	Girls ...	—	54
"	Infants	28	23
TOTAL		584	608

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RE-INSPECTIONS :—

Improved ...	103
Stationary ...	102
Cured ...	88
Worse ...	25
	318
	1510

Number of Children Medically Inspected at each School.

Sex	Boys	Girls	Total
St. James	40	47	87
St. John's	37	56	93
St. Michael's	50	51	101
St. Peter's	47	38	85
St. Paul's	35	28	63
St. Vincent's	28	15	43
St. George's	41	32	73
St. Andrew's	50	40	90
St. Basil's	28	20	48
St. Francis	28	18	46
St. Ignace	15	12	27
St. Joseph	17	13	30
St. Lawrence	20	14	34
St. Mark	28	22	50
St. Matthew	28	22	50
St. Nicholas	28	22	50
St. Patrick	28	22	50
St. Raphael	28	22	50
St. Timothy	28	22	50
St. Valentine	28	22	50
St. Vitalis	28	22	50
St. Zeno	28	22	50
Total	664	544	1208

REMARKS:

Inspected 160
 Satisfactory 102
 Cases 28
 Worms 22



1/ May. 1846

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