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BOROUGH OF ROYAL TUNBRIDGE WELLS

# ANNUAL REPORT

OF THE

Medical Officer of Health

AND

School Medical Officer

For the Year 1937.

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





Borough of Royal Tunbridge Wells.

# ANNUAL REPORT

OF THE

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AND

SCHOOL MEDICAL OFFICER

For the Year 1937.

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#### BOROUGH OF ROYAL TUNBRIDGE WELLS.

#### HEALTH AND HOUSING COMMITTEE:

(Present Constitution)

THE MAYOR (Mr. Councillor HILLMAN).

Councillor Dr. RANKINE (Chairman).

Alderman Miss BAKER.

Councillor Miss HUXTABLE. Mr. Councillor HARRIES.

Mr. Alderman CALEY. Councillor Miss BARNES.

Mr. Councillor SARGENT.

MATERNITY AND CHILD WELFARE COMMITTEE:

(Present Constitution)

THE MAYOR (Mr. Councillor HILLMAN).

Alderman Miss BAKER (Chairman)

Mr. Alderman CALEY

Mr. Councillor SARGENT.

Councillor Miss BARNES.

Mrs. BURSLEM.

Mr. Councillor HARRIES. Councillor Miss HUXTABLE. Mrs. HAMMOND. Mrs. PAYNE.

Councillor Dr. RANKINE.

Miss ELINOR WADDILOVE.

#### STAFF OF THE PUBLIC HEALTH DEPARTMENT.

Senior Sanitary Inspector:

H. T. TAYLOR, F.R.S.I., F.S.I.A. (a) (b)

Sanitary Inspectors:

W. P. CAVE, (a) (b). A. G. DAVIES. (a) (b) R. R. CREASEY (a) (b)

Laboratory Attendant, etc. :

H. MAIL.

Chief Clerk:

J. G. COX.

Miss D. BULL.

Assistant Clerks: H. WEEKES.

D. A. BARMBY.

Health Visitors:

Miss J. DONALDSON. (c)

Miss E. RICE OXLEY. (c) (d) Miss K. B. DRAGE. (c) (d)

Miss M. MACLAREN. (c) (d). Miss M. PAGE. (c) (d)

(Resigned 28/2/1937).

(Appointed 9/8/1937).

\*Public Analyst:

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

Dental Nurse-Attendant :

Miss D. O'NEILL. (Appointed 3/5/1937). \*Mrs. J. COX. (Resigned 24/3/1937.)

Dental Surgeon:

T. WYNFORD EVANS, L.D.S. (Appointed 1/5/1937).

\*T. NEVILLE STRANGE, L.D.S., R.C.S. Eng. (Resigned 31/3/1937.)

\*Medical Officer for Ante-Natal Clinic :

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

\*Masseuse:

Miss M. L. P. RUSSELL, C.S.M.M.G.

\*Medical Officer for Orthopædic Clinic :

P. L. RICHARDSON, M.B., B.S., M.R.C.S., L.R.C.P.

Assistant Medical Officer of Health:

W. G. EVANS, M.R.C.S., L.R.C.P., D.P.H. (Appointed 1/1/1937). Medical Officer of Health and Medical Officer for Maternity and Child Welfare:

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

Borough Infectious Diseases Hospital:

Medical Superintendent:

THE MEDICAL OFFICER OF HEALTH.

Matron:

Miss E. M. BROCKLEHURST.

(a) Cert. R.S.I. (b) Meat and Other Foods Cert.

(c) Health Visitor's Certificate.(d) C.M.B. Certificate.

\* Part-time Appointments.

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To His Worship the Mayor, and to the Aldermen and Councillors of the Borough of Royal Tunbridge Wells.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report dealing with the health of the Borough. It describes the work carried out for the benefit of the Town's inhabitants, both individually and collectively.

The early months of the year were marked by a high rainfall, each of the first six months showing an excess over the average. Sunshine, though exceeding the 1936 total, was below the twenty-three years' average in amount: the Borough once more took pride of place amongst the inland health resorts of Britain in the number of hours of bright sunshine recorded.

The number of deaths was lower than in 1936, as was also the number of births: there is a steady upward trend in the average age at death: 67.8 per cent. of the deaths occurred amongst persons over 65 years of age, and only 12.6 per cent. amongst those under 45 years. The Birth and Death Rates are calculated from data which I believe to give a fairly accurate population figure; comparative data based on the Registrar-General's estimate of population are quoted in brackets, as his figure departs further each year from that which the number of inhabited houses, etc., leads me to expect. The Census of 1941 will restore the balance, as did the 1931 Census.

No large scheme of Corporation housing was put through during the year under review, but twelve houses were erected at Oak Road to house families displaced from demolished houses: one hundred and thirty-eight other houses and twelve flats were built by private enterprise. The spread of knowledge of personal hygiene was continued at the various clinics, particularly through the educational course in Mothercraft given at the Tunbridge Wells Infant Welfare Centre to senior girls of the elementary schools; and through the continued distribution of the magazine "Better Health."

I take the opportunity to express to all with whom I have worked, my warm appreciation of the services of the Staff and of the kindly co-operation of members of the Borough Council and of my colleagues.

I am, Mr. Mayor, Ladies and Gentlemen,
Your obedient Servant,
F. C. LINTON.

Public Health Offices, 10, Calverley Terrace, Tunbridge Wells.

23rd June, 1938.

## STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH.

6,034
35,839
32,970
35,700
5.9
10,098†
9,838†
3.6
£468,947
£1,800
49.7°F.

Total rainfall, 1937 ... ... ... 36.52 inches Hours of bright sunshine, 1937 ... 1,454 hours 36 minutes

†These figures include Flats, and represent the number of separately occupied premises.

#### Extracts from Vital Statistics for the Year.

			Total.	Males.	Females.
	(Total		410	217	193
Live Births	Legitimate		387	205	182
	Illegitimate		23	12	11
Birth Rate p	er 1,000 of the	e est	imated r	esident po	pulation-
11.5 (12.4	4 on Registrar	-Gen	eral's est	imate of p	opulation).
Stillbirths			13	11	2
Stillbirth Rat	te per 1,000 of	f tot	al (live a	nd still) b	irths—30.7
Deaths			502	207	295
Crude Death	Rate—14.1	per	1,000 o	f estimate	d resident
populatio	on (on Registra	ar-G	eneral's p	opulation	estimate—
15.2).					
Stillbirths Stillbirth Rat Deaths Crude Death population	4 on Registrar  te per 1,000 of  Rate—14.1	Gen  f tota  per	13 al (live a 502 1,000 or	imate of p  11  nd still) b  207  f estimate	opulation).  2 irths—30.7  295 id resident

Death Rate corrected for age and sex constitution—(factor for correction, 0.73, 1931 Census), 10.3 per 1,000 of estimated resident population (on Registrar-General's estimate of population—11.1).

#### Deaths from puerperal causes :-

Deaths from puerperar causes	-		
	I	Rate per	1,000 total
De	eaths.	(live and s	till) births.
From Puerperal Sepsis	0	0.	0
From other puerperal			
causes	2	4.	73
Total	2	4.	73
Death Rate of Infants under on	e year	of age :-	
All infants per 1,000 live bir	ths .		46.3
Legitimate infants per 1,000	legitir	nate live b	irths 46.5
Illegitimate infants per 1,000	illegit	imate live l	pirths 43.5
	Total.	Males.	Females.
Deaths from Cancer (all ages)	65	31	34
,, ,, Measles (all ages)	0	0	0
" " Whooping Cough			
(all ages)	3	1	2
,, ,, Diarrhœa, etc. (un-			
der 2 years of age	2	1	1

#### Population.

The population at mid-year 1937 was stated by the Registrar-General to be 32,970—2,869 less than the Census population for the extended Borough.

The number of inhabited houses (including flats) at the end of 1937 according to the Rate Books was 9,838 (8,821 end of 1930)—an increase of 1,017 in seven years, and the number of inhabited houses considerably exceeds the number of separate families who were resident in the Borough (including the added area) when the Census was taken. The decrease of population by excess of deaths over births is, in

my opinion, balanced by immigration. This excess totals only 786 since the Census: the Registrar-General's estimate of population is 2,869 lower than in 1931.

The 1931 Census population was 35,365, and an area with 474 persons living in it has been added to the Borough since that date. I estimate the population in mid-year 1937 to be 35,700, the slight increase being credited to the large number of additional houses occupied, viz., 258, during the year.

As any large departure from accuracy in estimating the population seriously affects the vital statistics of the Borough, I can only repeat that a five-yearly Census would provide a valuable check upon the figures arrived at. Meantime, in view of the discrepancy in the estimates, duplicate figures recording the birth and death rates, etc., as calculated on the two estimates are given.

#### Physical Features and General Character.

At the end of 1937, the Borough of Royal Tunbridge Wells covered 6,034 acres. The town, which lies in the extreme south-west corner of Kent,  $34\frac{1}{2}$  miles from London and 30 miles from the South Coast, is built upon hills, most of the houses standing at a level between 300 and 450 feet above sea level. The climate is breezy and bracing, with sheltered spots for those who live in the valleys.

The sub-soil is mostly sandstone, the geological layer known as Tunbridge Wells Sands predominating.

#### 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 Grounds, with the exception of the Sunshine Recorder, which is established on

the roof tower of the Earl's Court Hotel, Mount Ephraim, and of the Standard Barometer, kept in the Health Offices.

The Bowling Green site in the Calverley Grounds is still in use, until a better offers: the usual certificate from the Meteorological Office is suspended until a more satisfactory site is obtained.

The readings were taken by Mr. W. P. Cave and Mr. R. R. Creasey, members of the Staff of the Health Department.

The annual inspection of the Station by an inspector of the Meteorological Office took place on 17th June, and all was reported to be satisfactory.

The total amount of bright sunshine recorded was 1,454 hours 36 minutes, the mean amount being 1,572 hours 18 minutes. The most sunny days were May 28th and June 7th, 14 hours 6 minutes being recorded on each occasion. There were 77 sunless days, 66 being the average.

The highest temperature in the sun was 132 degrees on 15th July.

The mean temperature in the shade for the year was 49.7 degrees, 49.2 being the average.

The mean daily range was 15.2 degrees, the average being 14.2.

The temperature in the shade four feet above the ground was highest, 92 degrees, on 7th August, and lowest, 18 degrees, on the 10th March.

The temperature in the shade first reached:—

60 degrees on 3rd April.

70 ,, ,, 3rd May.

80 ,, ,, 25th May.

90 ,, ,, 7th August (once only).

Last reached:-

80 degrees on the 12th August.

70 ,, ,, 27th September.

60 ,, ,, ,, 28th October.

The hottest night was 13th July, when the temperature did not go below 63 degrees.

The last frost in the air in Spring was on 27th April, and the first in the Autumn on 12th November. The last on the grass in the Spring was on 27th April, and the first in the Autumn was on 18th October.

The rainfall amounted to 36.52 inches, the average being 30.68 inches. It fell on 173 days, the average being 170.

The most rain that fell on one day was 1.10 inches on 4th February.

The wind at 9 a.m. was North on 20 days, North-East 73 days, East 14 days, South-East 34 days, South 27 days, South-West 79 days, West 57 days and North-West 61 days.

The amount of cloud at 9 a.m. was 7.0, 6.7 being the average (10 representing overcast sky). Thunder and lightning occurred on 11 days.

There were 9 fogs, and it was misty on 23 other mornings.

METEOROLOGICAL NOTES, 1937.

	S	Sunshine.	ne.		Rainfall.	ıfall.	Mean Ter	Mean Temperature.	1	Temperature Underground.	Undergroun	nd.
Months.							In snade,	In shade, 4tt. above ground.	One	One Foot.	Four	Four Feet.
	1937.		23 Year Average.	ge.	1937.	57 Year Average.	1937.	47 Year Average.	1937.	37 Year Average.	1937.	23 Year Average.
January	Hrs. Mins. 51 36		Hrs. Mins. 50 30	fins. 30	Inches. 6.55	Inches. 2.70	°F.	°F.	°F.	°F.	°F.	°F.
February	09	36	11	54	4.81	2.32	42.5	39.2	41.7	39.3	43.6	42.7
March	III	9	122	48	4.34	2.30	38.7	42.1	39.8	41.8	42.4	43.2
April	1114	9	138	8	2.24	2.05	48.5	. 46.5	48.5	46.7	46.5	46.5
May	174	36	206	36	2.20	1.91	55.4	53.0	56.3	54.2	52.1	50.8
June	219	42	211	54	2.52	1.97	58.4	58.0	62.7	60.3	59.2	56.2
July	138	18	202	30	69.0	2.29	8.19	9.19	64.4	63.4	61.4	59.6
August	204	36	194	30	1.96	2.38	64.4	61.0	65.3	62.9	63.0	6.09
September	167	36	153	36	2.17	2.28	56.8	57.1	59.2	6.89	6.09	59.7
October	86	12	109	18	3.26	3.56	51.7	50.2	52.2	52.7	55.8	56.0
November	87	24	62	0	1.16	3.51	40.4	43.3	43.0	45.6	49.5	50.6
December	26	48	42	54	4.62	3.41	37.3	39.9	38.7	41.7	43.3	45.9
WHOLE YEAR 1454		36 1572	572	18	36.52	30.68	49.7	49.2	51.1	50.6	51.8	51.3

#### Social Conditions.

Tunbridge Wells is a residential town to which many persons retire from business or professional activities 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. The occupations of the inhabitants are governed by these conditions as there are no large factories. There are numerous garages and motor works, and amongst the other workers are painters, bricklayers, carpenters, gardeners, labourers, printers, bus drivers and conductors and hotel workers; laundries and domestic service absorb a number of the female population. 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 a brickworks situated just outside the Borough boundary.

The total number of unemployed on the Register at the end of December, 1937, was 780. The number during the year did not vary much, except that considerable variations occurred during bad weather, which affects both building and agricultural labour. At the end of the year, the weather was wet.

#### 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 an attractive pleasure ground, in which tennis courts, a miniature golf course and a bowling green are all available, there is also a bandstand in which bands play during the summer season. In addition, there are seven other recreation grounds, some of which are suitably equipped

for tennis, bowls and with children's swings. 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 live births registered as properly belonging to Tunbridge Wells was 410 (217 males and 193 females). This corresponds to a rate of 11.5 per thousand of the population (12.4 on Registrar-General's estimate of population), as compared with 12.0 in 1936. Twelve male and 11 female children were born out of wedlock, giving an illegitimate rate of 5.6 per cent. as compared with 5.9 in 1936.

Thirteen stillbirths were registered, none of which were illegitimate.

The number of births notified during the year under the Notification of Births Acts as occurring in the Borough was 543, and consisted of 301 males and 242 females; of these, 16 males and 10 females were stillborn. The excess of notifications over registrations of births is largely 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.—551 deaths were registered in the Borough during 1937, and there were 174 outwardly transferable deaths and 129 inward transfers, thus making the total number of deaths belonging to the district 506. The final figure allotted by the Registrar-General is 502, and this number is

used as a basis for calculation. The crude Death Rate is 14.1 per thousand (15.2 on Registrar-General's estimate of population), as compared with 14.9 in 1936.

The Registrar-General has supplied the proper correction figure (0.73) as obtained from the 1931 Census returns, and the true or corrected death rate is seen to be 10.3 per thousand (11.1 on Registrar-General's estimate of population); 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. The Table on page 20 compares the birth and death rates, etc., for England and Wales, and various groups of towns, Tunbridge Wells figures being inserted below. The Borough death rate, 10.3 compares favourably with 12.4, the figure for England and Wales generally.

The proportion of deaths over 65 years of age was 67.8 per cent. of the total number (64.0 per cent. in 1936): and under 45 years of age it was but 12.6 per cent. of the total (13.8 per cent. in 1936).

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 to 1930	1931 to 1935	† 1936	1937
Deaths under 1 year  , 1 and under 2  , 2 , 5 , 15  , 15 , 25  , 25 , 45  , 45 , 65 and upwards	72 25 21 20 121 154	57 29 11 13 141 178	46 23 10 14 141 205	40 16 16 12 145 234	36 6 9 15 21 47 107 245	6	22 5 5 7 10 37 118 307	18 3 4 5 7 30 119 342	22 4 3 5 8 31 118 339	19 5 2 5 3 30 99 343

#### CAUSES OF, AND AGES AT DEATH DURING THE YEAR 1937.

	CAUSES OF DEATH.	Ne	ett Deat	hs at t	he subj	oined a	ges of	" Resid	ents"	whether	occurr	ing wit	hin or	Total Deaths whether of Residents or
		All Ages	under l year	and under 2 years	and under 5 years	5 and under 10 years	and under 15 years	and under 20 years	20 and under 35 years	35 and under 45 years	45 and under 65 years	65 and under 75 years	75 years and upwards	Non- Residents in Institutions in the Borough.
All	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	505 1	19	5	2	2	3	2	12	19	99	125	217 1	265
2. Mea 3. Sca 4. Wh 5. Dip 6. Inff 7. Enc 8. Cer 9. Tub 10. Oth 11. Syp 12. Gen 13. Can 14. Dia 15. Cer 16. Hea 17. Anc 18. Oth 19. Bro 20. Pne 21. Oth 22. Pep 23. Dia 24. Apr 24. Apr 25. Cirr 26. Oth 27. Oth 27. Oth 31. Con 32. Sen 33. Sui 34. Oth 55. Cer 33. Sui 34. Oth 56. Oth 57. Oth 58. Acc	choid and Paratyphoid Fevers asles  rlet Fever cooping Cough chtheria cheral ch	1 3			2							5 	7	

Table Showing Number of Deaths from Certain Causes.

				Tube	ercu-	Infec-		1 11 3
Five-Ye	arly Per	iod.	Cancer.	Pul- mon- ary.	Non- Pul- mon- ary.	tious Diseases.	Vio- lence.	In- fluenza.
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 .,	1930		384	106	21	30	59	91
1931	1935		383	65	20	15	57	52
	1936		86	14	3	5	15	4
	1937		65	12	4	5	11	14

<sup>\*</sup> Reliable figures not available.

Infectious Diseases.—Seventy-five cases of Scarlet Fever and 13 cases of Diphtheria were notified. Cases of Scarlet Fever occurred chiefly during the first nine months of the year, only 4 being notified during the last quarter. Only occasional cases of Diphtheria occurred, as the total indicates.

Of the minor infectious diseases, Chicken-pox (178 known cases) and Whooping Cough (155 cases) were most prevalent, as school reports showed. The former was present in November and December, and Whooping Cough in the Spring months: other infectious diseases were not prevalent.

There were five deaths—one was due to Scarlet Fever, three to Whooping Cough and one to Erysipelas.

Further details relating to infectious diseases will be found on page 54.

Maternal Mortality.—Two mothers died during 1937 from conditions associated with childbirth. There were no deaths from Puerperal Sepsis.

<sup>†</sup> Inserted for comparison.

These two deaths represent a maternal mortality rate of 4.73 per thousand total births, compared with 3.11 for England and Wales: the average rate for the previous five years was 2.27 (4.06 for England and Wales).

Infant Mortality.—Nineteen deaths of infants under one year of age took place during the year under review, being 46.3 per thousand live births, as compared with 51.5 the previous year. The corresponding figure for England and Wales was 58 (59 in 1936). The average Infant Mortality Rate in the Borough during the previous ten years was 46.6 per thousand.

As will be seen on page 19, 10 of the 19 deaths occurred during the first three weeks of life.

The stillbirths numbered 13, as compared with 15 during 1936.

These infant deaths were mostly due to causes operating during the period of expectant motherhood, a period to which much attention has been given in the hope of lessening both ill-health and fatalities. The chief means to which improvement in health during the first year of life may be attributed, in my opinion, are as follows:—

- (a) Education of the mothers. (This includes the whole of the facilities provided by the Local Authority's Child Welfare Centres).
- (b) The use of dried milks during the warm months of the year, as well as the employment of greater care in handling and storing liquid milk: efficient pasteurisation of milk.
- (c) Better provision against under-nourishment in periods of unemployment.
- (d) Better housing conditions, and
- (e) Greater facilities for immediate assistance in cases of illness.

INFANT MORTALITY, 1937.

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

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under 1 Year.
All causes { Certified Uncertified	6	2	2	=	10	4	1	2	2	19 —
Small-pox Chicken-pox Measles Scarlet Fever Diphtheria and Croup Whooping-cough Enteritis Tuberculous Meningitis Abdominal Tuberculous Diseases Congenital Malformations Premature Birth Atrophy, Debility and Marasmus Atelectasis Injury at Birth Erysipelas Syphilis Rickets Meningitis (not Tuberculous) Convulsions Gastritis Laryngitis Bronchitis Pneumonia (all forms) Suffocation (overlying) Other causes										

Birth-rate, Death-rate, and Analysis of Mortality during the Year 1937.

	RATE PER 1,000 TOTAL POPULATION	ER 1,000			ANNUA	L DEATH-	RATE PER	ANNUAL DEATH-RATE PER 1,000 POPULATION	ULATION.			RATE PER 1,009 LIVE BIRTHS.	R 1,000
	Live Births	Still- Births	All Causes.	Enteric	Small- pox	Measles	Scarlet Fever	Whooping- cough	Diphtheria Influenza	Influenza	Violence	Diarrhoea and En- teritis (un- der 2 yrs.)	Total Deaths under 1 year
England and Wales	14.9	09:0	12.4	00:00	00:00	0.02	0.01	0.04	20.0	0.45	0.54	5.8	58
125 County Boroughs and Great Towns, including London	14.9	29.0	12.5	0.01	0.00	0.03	0.01	0.04	90.0	0.39	0.45	7.9	62
(Resident Population, 25,000 to 50,000 at Census, 1931)	15.3	0.64	11.9	00.00	00:00	0.02	0.01	0.03	0.02	0.42	0.42	3.2	10
London Administrative County	13.3	0.54	12.3	0.00	0.00	0.01	0.01	90.0	0.05	0.38	0.51	12.0	09
TUNBRIDGE WELLS	(12.4)	0.36 (0.39)	10.3	00.00	(0.00)	(0.00)	(0.03)	0.08 (0.09)	0.00	(0.42)	(0.33)	4.9	46

NOTE.—Figures in brackets indicate percentages calculated on Registrar-General's estimate of population.

Total. 3.23 4.88	3.11
Others. 2.26 4.88	4.73
Puerperal Sepsis. 0.97 0.00	0.00
11	11
::	11
11	11
::	::
per 1,000 { England and Wales ive Births { Tunbridge Wells	per 1,000 England and Wales otal Births Tunbridge Wells
1	The maternal mortanty rates are as follows: {

### GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

#### Public Health Staff.

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

Dr. W. G. Evans took up duties as Assistant Medical Officer of Health on 1st January, 1937, succeeding Dr. D. D. Payne.

On August 9th Miss M. Page succeeded as Health Visitor and Maternity and Child Welfare Nurse in place of Miss K. B. Drage, who resigned on 28th February.

Mr. T. Wynford Evans, L.D.S., was, on the 1st May, 1937, appointed the first whole-time Dental Surgeon, in succession to Mr. T. Neville Strange, L.D.S., R.C.S. (Eng.), who held a part-time appointment until 31st March, 1937.

Miss D. O'Neill commenced duties as whole-time Dental Nurse-Attendant on 3rd May, succeeding Mrs. J. Cox, who resigned her part-time appointment on 24th March.

All four of the Nursing Staff act one-fifth of their time as Health Visitors. Miss Rice Oxley devotes four-fifths of her time to Maternity and Child Welfare duties, Miss Donaldson two-fifths and Miss Drage two-fifths: the remainder of their time is occupied with duties in connection with the School Medical Services.

The Dental Surgeon and Dental Nurse-Attendant devote one half day per week to dental treatment under the Maternity and Child Welfare Scheme. Three of the clerical staff devote one-half of their time to Public Health Services, and the fourth clerk devotes one-half of her time to Maternity and Child Welfare—the remainder of their time is devoted to work under the School Medical Services.

#### Laboratory Facilities.

The number of specimens examined in the Borough Laboratory, which is situated at the Public Health Offices, was 647 in 1937, as compared with 901 during the previous year.

The nature of these examinations is set out in the following table:—

Specimens examined for the presence of Diphtheria Bacillus:—

			Post	itive.	Negativ	ve.
(a) From	n Fever H	ospital				
case	es		1	23	106	
(b) From	n outside s	sources		15	399	
						643
Hairs ex	amined for	the pres	sence o	of Rin	gworm	1
Other sp	ecimens exa	mined				3
						-
Tota	ıl	•••				647

The collection of blood, preparation and sterilization of culture media, and disinfection of laboratory apparatus, is done by Mr. Mail, Laboratory Attendant and Caretaker of the Public Health Offices.

In addition to the above, 134 specimens were forwarded to the County Laboratory at Sessions House, Maidstone, for examination. The details are as follows:—

			Positive.	Negative.
82	Sputum examinations f	or		
	Tubercle Bacilli		14	68
15	Blood examinations f	or		
	Typhoid or Para-Typh	noid	an Personal	15
19	Swabs for Hæmolytic			
	Streptococci		4	15
18	tests of Cultures of	B.		
	Diphtheriæ for virulen	ce	11	7
			311 - 1819	mail (cin
	Totals .		29	105
			-	i mile-st

Water, milk and other foods for bacteriological examination are also sent to the County Laboratory at Maidstone. During the year, 26 samples of milk were sent for this purpose, details of the results, etc., will be found on page 48.

Arrangements have been made with Dr. C. F. Selous, Pathologist at the Kent and Sussex Hospital, to examine specimens taken in connection with cases of Puerperal Pyrexia, or suspected cases: 5 such specimens were examined during the year under review.

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, on page 50.

#### Ambulance Facilities.

There are five ambulances in the Borough. One is garaged at the Borough Fever Hospital and is used only for infectious cases, the male staff of the hospital being responsible for driving it. For non-infectious and accident cases, the local branch of the St. John Ambulance Brigade possesses three ambulances, and one belongs to the Borough Police Force. The St. John Ambulance Brigade also provides facilities for removing maternity patients.

The ambulance service provided is adequate for the normal needs of the community.

#### 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. This Association has a staff of eight nurses, one of whom is resident in the outlying parish of Rusthall.

During 1937, 220 new midwifery and maternity and 711 new general cases were undertaken. The number of visits paid was 28,722—22,850 being general, 4,075 maternity and midwifery, 1,185 ante-natal and 612 casual.

- (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 homes of cases of ophthalmia neonatorum, measles, 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, a fee being paid to the Association for her services. No call was made during 1937.
- (c) Midwives.—As from 1st October, 1937, under the terms of the Midwives Act, 1936, the Kent County Council commenced to pay to the District Nursing Association a grant for the services of two and a half whole-time midwives: the Corporation's subsidy for the Rusthall resident midwife ceased when the fresh arrangement came into force.

The control of midwives in the Borough is vested in the Kent County Council; the Child Welfare Work, Ante-natal work and supervision of Nursing Homes are duties of the Borough Council.

The number of midwives who notified their intention to practise in the Tunbridge Wells area during the year was stated by the Kent County Council to be 18. Notifications of births were received from 21 midwives, amongst whom were 15 on the list of the Kent County Council.

#### Clinics and Treatment Centres.

Maternity and Child Welfare Centres.—The Chief Maternity and Child Welfare Centre was, on 5th April, 1937, moved from 8, Calverley Terrace, to Holly Lodge, 11, Crescent Road—adjacent to the Health Offices and School Clinic, which occupy Nos. 9 and 10, Calverley Terrace.

There is also a branch Centre at Rusthall, where meetings are held at the Congregational Church Hall.

Further details concerning these Infant Welfare Centres will be found on page 31.

Day Nurseries.—There are none in Tunbridge Wells.

School Clinic.—The School Clinic is at the Public Health Offices, 9 and 10, Calverley Terrace. The premises, which now consist of nine rooms and a dark room provided by the Borough Education Committee, are well lighted and ventilated and suit their purpose admirably. The Clinic is open each week-day, and in addition to medical inspection and advice, treatment of defects of the eyes, ears and teeth and of minor ailments and skin diseases is undertaken. There were 14,084 attendances in 1937—a number much in excess of previous records.

Tuberculosis Dispensary.—The Kent County Council has a branch Dispensary for tuberculous cases from Tunbridge Wells and district, at 34, Calverley Street. Clinics are held each Monday from 5 to 5.45 p.m., and on Thursdays from 1.30 p.m. to 3 p.m.

The number of patients and the attendances made at this Dispensary during 1937 were as follows:—

	Ins	ured.	Uninsured.	
	Male.	Female.	Male.	Female
Patients	90	39	131	184
Attendances	155	88	480	641

Treatment Centre for Venereal Diseases.—Venereal Diseases are treated at the Kent and Sussex Hospital, Tunbridge Wells, the arrangements being under the control of the Kent County Council. The consultation days are as follows:—

Females—Wednesdays, at 3.30 p.m. Males— ,, at 5.30 p.m.

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 1937 was 60, and the total number of attendances 1,101.

#### Public and Voluntary Hospitals.

Borough Fever Hospital.—The Borough has its own Fever Hospital, situated on its southern boundary, 440 feet above sea level. The site is an excellent one, airy and open, with a southern exposure and wide view over valleys and woodland. The present accommodation available for patients, allowing

12 feet of wall space and 144 square feet for each adult, is as follows:—

- (a) Scarlet Fever Block.—This has accommodation for 22 adult patients—10 in each of two large wards and one in each of two small wards upstairs.
- (b) Diphtheria Block.—This was extended early in 1936 so as to accommodate 12 adult patients instead of 4: the new ward is airy and light, and its modern equipment and labour-saving devices tend to reduce the work of the staff.
- (c) A wood-built block, known as "B" block, accommodates 5 patients.
- (d) A Discharge Block containing five rooms, each capable of accommodating one person. This block is so inconvenient for nursing, and has so many different exits and entrances, that it has not been used for accommodating patients for some years, but has acted as a dormitory for the night nursing staff for whom there is insufficient accommodation in the Administrative Block.

#### Further Needs :-

- (a) Accommodation for the whole of the staff in the Administrative Block: this need has become urgent.
- (b) The replacement of the old wooden Discharge Block by a modern Cubicle Block, with ten cubicles suitable for dealing with doubtful cases, those with double infections, or isolated cases of one disease: to this must be added the need to separate those infected with different strains of Scarlet Fever, which are apt to spread from one to the other.

Patients are taken from Tunbridge Wells, and also from the adjacent northern portion of the Battle Rural District of East Sussex. There is also an agreement with the neighbouring Southborough Urban District Council to take cases of the enteric group of diseases.

The number of patients admitted to the Hospital during

the year was 109 (89 Tunbridge Wells cases and 20 " outside" cases) representing 4,240 patient-days (Tunbridge Wells cases 3,522, other cases 718 days).

Smallpox Hospital.—The Conjoint Smallpox Hospital is situated at Capel, some four and a half miles from Tunbridge Wells. It has accommodation for 18 adult patients, 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.

Additional accommodation for staff is required, and plans have been submitted for this purpose.

Under the provisions of the Local Government Act, 1929, steps have been taken to arrange for this Hospital to serve a much wider area of South-West Kent than hitherto. The arrangements are in course of settlement, and the new areas will have a population within the proportion of beds usually deemed sufficient, viz., one bed to ten thousand of population. Apart from making good the accommodation for staff, the increased area and population to be served does not in itself involve radical change: the drainage is in need of modernisation and plans for putting this work in hand have been approved.

The Kent and Sussex Hospital.—This is a handsome modern hospital, occupying a splendid site, and is well equipped for dealing with all forms of medical, surgical and radiological treatment. It has 210 beds, including 18 for private patients.

The building of its own laundry was completed, and commenced work on 1st October, 1937.

During 1937, the number of in-patients treated was 3,568, out-patients numbered 11,014, making 70,835 attendances.

By agreement with the Borough Council, operations upon elementary school children for the removal of tonsils and adenoids are carried out by the Specialist Aural Surgeon at this Hospital, and in-patient treatment of orthopædic cases is also undertaken at this Hospital.

The Homœopathic Hospital is a comfortable, airy, and well-lighted building, with a sunshine balcony looking on to the Common. In 1937, 245 in-patients were treated as compared with 240 the previous year; 152 theatre operations were performed. Three thousand, five hundred and eighty-two attendances were made at the Out-patients' Department.

Payment is also made to this Hospital by the Education Committee in respect of operations upon elementary school children for the removal of tonsils and adenoids, which are carried out by a visiting Aural Surgeon.

#### Other Forms of Medical Relief.

Tunbridge Wells and District Maternity Home.—Two hundred and forty-seven confinements took place in this Home during 1937, as compared with 266 in 1936. Of these mothers, 120 were residents of Tunbridge Wells, as compared with 113 during the previous year. They represented 28.8 per cent. of the total Tunbridge Wells mothers for the year, as compared with 26.9 per cent. born in the Home during 1936.

During 1937, payment was made by the Corporation, under the terms of the agreement with the Committee of the Home, in three instances where the home conditions were unsuitable for the confinement. A special subsidy of £50 per annum is contributed annually by the Borough Council towards the cost of upkeep.

The Borough Medical Officer of Health has continued to serve as Honorary Administrative Medical Officer to the Home since its inception in 1925, and also to serve as a member of its Executive Committee of Management: this keeps it in close touch with the Health and Maternity and Child Welfare Services of the Borough.

The Invalid Children's Aid Association.—This Association keeps in close touch with the School Medical and Child Welfare Services. No week passes without some interchange of notes, or interview with its secretarial staff, and the Presidency of the Branch has been held for a number of years by the Borough Medical Officer of Health.

Thirty-six children in need of treatment were sent through its good offices to convalescent homes, 22 children were given additional nourishment and help in other forms was given in many cases. One hundred and sixty-four cases in all received assistance, at a cost of £183.

The Local Branch of the Royal Surgical Aid Society has reached the forty-fourth year of its activities. In 1937, 701 appliances were supplied at a cost of £1,527 4s. 8d. Spectacles continue to be provided for school children in suitable instances, on production of the Society's Letters initialled by the School Medical Officer. Thus abuse of charities is avoided, while those in need are assisted.

The Provident Dispensary, 106, Upper Grosvenor Road. The number of members of this institution for the year 1937 was as follows:—Above the age of 14 years 440; under the age of 14 years, 205; total, 645.

Tunbridge Wells Council of Service.—During the year ended 31st March, 1938, in addition to other forms of relief, 192 unemployed persons were provided with coal at a cheap rate, namely 1s. 6d. per cwt. A commencement was made with the building of 32 Homes for Old People, which will be completed in 1938.

Homes, etc., in Tunbridge Wells.—There is a branch of Dr. Barnardo's Home in Park Road, Hurstleigh Holiday

Home in Bishop's Down, and a Convalescent Home at Hawkenbury, in which a residential open-air school for children has been established. These institutions deal almost entirely with children from London, though "Hurstleigh" has proved useful in taking local children on several occasions when a request has been made.

There is also St. Christopher's Nursery College, a large building in extensive grounds, which has developed into a modern training centre for children's nurses: it has a nursery home for the younger children of parents mostly stationed abroad, or travelling abroad.

#### PUBLIC ASSISTANCE.

The amount of Poor Law Relief given by the Public Assistance Committee in Tunbridge Wells for the year ended 31st March, 1938, totalled £9,050, as compared with £7,000 during the previous year.

#### MATERNITY AND CHILD WELFARE SERVICES.

The Council has made the following arrangements for administering the provisions of the Maternity and Child Welfare Acts in the Borough:—

Infant Welfare Centres.—The Chief Maternity and Child Welfare Centre was moved on 5th April, 1937, from 8, Calverley Terrace, to Holly Lodge, 11, Crescent Road—adjacent to the Health Offices, which occupy Nos. 9 and 10, Calverley Terrace. An entrance was made from the Terrace to the back of Holly Lodge, where a perambulator shed was erected. Clinics are held here each Tuesday and Thursday afternoon.

There is also a branch Centre at Rusthall, meeting each Wednesday afternoon in the hall and rooms adjoining the Congregational Church in Rusthall High Street. This is a temporary arrangement, as the premises are not well adapted for use as a Centre.

The total number of attendances at the Centres during 1936 was 9,664, as compared with 10,322 in 1936, 8,787 in 1935, 9,636 in 1934, 10,311 in 1933 and 9,280 in 1932. The Table on the following page analyses the attendances, etc.

The number of individual infants under 1 year of age attending the Centres during the year was 319 (283 in 1936), and the individual children 1-5 years numbered 325 (364 in 1936).

Two thousand, four hundred and twenty-seven medical consultations were held, as compared with 2,765 during the previous year, and 4,903 weighings were carried out (5,175 in 1936).

During the year, 224 infants under 1 year attended the Centres for the first time, being 55 per cent. of the live births (compared with 207 and 48 per cent. in 1936); 72 children aged 1-5 years (91 previous year) attended for the first time.

Ante- and Post-Natal Clinic.—This Clinic was held at Holly Lodge, 11, Crescent Road, Dr. Margaret Emslie attending twice each month for consultations.

A total of 152 ante-natal and 27 post-natal cases attended, and 360 consultations were held: the undermentioned Table gives details of the expectant mothers who attended:—

	Borot	GH RESI	DENTS.	Ou	TSIDE CAS	ES.
	Primips.	Multips.	Total.	Primips.	Multips.	Total.
Individual expec- tant mothers	54 (54)	92 (63)	146 (117)	6 (4)	- (2)	6 (6)
Consultations	128 (121)	188 (135)	316 (256)	8 (9)	- (3)	8 (12

Note.-Figures in brackets indicate similar figures for 1936.

The number of Tunbridge Wells ante-natal cases attending represents 36 per cent. of the total number of births, as compared with 27 per cent. in 1936.

	Tunbridge Wells- Tuesday Clinic.	Wells— Clinic.	Rusthall— Wednesday Clittic.	all— y Clinic.	Tunbridge Wells- Thursday Clinic	Wells—	To	Totals.
	1937. (51 sessions).	1936. (53 sessions).	1937. (51 sessions).	1936. (51 sessions).	1937. (51 sessions).	1936 (51 sessions).	1937.	1936.
Number of attendances of Infants	371	718	889	67.5	1610	1439	2569	5835
Number of attendances of Children 1-5 years Number of attendances of Mothers	267	302	81118	1156	1165	1310	2550	2768
(excluding those at Ante-Natal	636	972	1377	1397	2532	2353	4545	4722
Total Attendances	1274 (25)	1992 (38)	3083 (60)	3228 (63)	5307 (104)	5102 (100)	9664	10322
CONSULTATIONS WITH MEDICAL OFFICER:— Infants Children	3.2	101	347 574	454 633	792 648	791	1173	1346 1419
Totals	99	143	921	1087	1440	1535	2427	2765

NorE: Figures in brackets indicate the approximate average attendances.

In addition to the above, 27 Tunbridge Wells mothers made 36 attendances for post-natal examinations, as compared with 37 cases and 69 attendances during the previous year.

Dr. Emslie comments that a number of the mothers miss the primary medical consultation in the early months of pregnancy, coming only when childbirth is approaching. Others come early and attend several times, thus raising the average attendances to more than two per mother. It is better to correct defects found in the early months, than to make efforts to lighten their ill-consequences at a later date.

Orthopædic Treatment.—Dr. P. L. Richardson is employed to see any orthopædic cases referred to him from the Child Welfare Centres, and also to supervise the in-patient treatment of cases in the Kent & Sussex Hospital, to which children requiring treatment of brief duration are sent under an agreement with the Corporation. Prolonged in-patient treatment is dealt with by sending the crippled child for special education, e.g., to the Chailey Heritage Craft Schools.

Miss Russell continued to hold Remedial Exercise Classes in the School Clinic each Monday, Tuesday and Thursday from 4 to 5 p.m.

During the year, 12 children under school age were seen by Dr. Richardson, and 25 consultations were held. Of these, 4 were new cases suffering from the following defects:—

Poor stance	 	1
Bow legs	 	1
Slight knock-knee	 	1
Double club-foot	 	1

Two cases were recommended remedial exercise treatment: one child made 21 attendances at the Remedial Exercise Classes, and the other carried out home exercises. In addition, two children spent 5 weeks (Bow legs) and 2 weeks (Manipulation, etc.) in the Kent & Sussex Hospital under Dr. Richardson's care.

Four children were discharged as needing no further treatment.

Dental Treatment.—Mr. T. Wynford Evans, L.D.S., the first whole-time Dental Surgeon, took over duties on 1st May, 1937, and dental treatment clinics for children under school age and expectant and nursing mothers were increased from one per month to one per week.

Forty-two individual children made 72 attendances, and 31 mothers made 75 attendances to see the Dental Surgeon. The following is a summary of the treatment given :-

Teeth ex	ctracted.	Teeth	filled.	Other of	perations.	Administrations
Perm.	Temp.	Perm.	Temp.	Perm.	Temp.	of General Anæsthetics.
117	109	37	20	6	24	36

An arrangement dating from 1st April, 1937, was made between the Borough Council and the local branch of the Royal Surgical Aid Society by which grants (not exceeding 50 per cent. of the nett amount expended by the Society) were made towards the cost of dentures supplied to expectant and nursing mothers attending the Corporation's Centres. Assistance totalling £5 6s. 3d. was given in three cases during the year.

Health Visiting.—The following home visits were paid by the Nursing Staff during the year :-

(a) To expectant mothers	 	First visits	 291
		Total visits	 605

(b) To children under 1 year of age ... First visits ... 380

Total visits ... 1,721

(c)	To children between the ages	s of 1		
	and 5 years		Total visits	 2,709
(d)	Where infants have died		Total visits	 22
(e)	Found no one at home			812

This bald statement of the large amount of home visiting conveys little impression of the value of this branch of the work of the Department. A health visitor's qualifications and ability enable her to act as friendly adviser on many little problems of health and environment which crop up in the working-class home.

Child Life Protection.—On December 31st, 1937, there were within the Borough 82 children under the care of 33 registered foster-mothers, as compared with 86 children boarded-out with 32 foster-mothers at the end of the previous year. (Note: In both instances these figures include St. Christopher's Nursery College, which usually has between 35 and 40 children in residence.)

Three hundred and sixteen visits of inspection were paid during the year.

In sixteen instances failure to notify the reception or leaving of a child under the provisions of the Children Acts were reported to the Maternity and Child Welfare Committee, and in each case a warning was given to the foster-mother.

Assistance in Necessitous Cases.—A Sub-Committee of the Maternity and Child Welfare Committee met once each month in order to deal with applications for assistance under the Maternity and Child Welfare Act. One hundred and three families (111 in 1936) received assistance, of which 82 were supplied with 7,385 (14,022 previous year) pints of fresh milk free of cost, at an estimated cost to the Corporation of £88 16s. In addition, 28 lbs. dried milk, 118 lbs. Cod Liver Oil and Malt, 69 cartons Virol, 49 tins Ovaltine, 21 bottles Cod Liver Oil, 13 tins Almata, 13 cartons Bemax,

3 tins Lactagol and small quantities of Marmite, Radio-Malt, Paraffin, Radiostoleum, etc., to the value of £13 ls. 4d., were issued free of cost.

Food and drugs to the value of £80 8s. 7d. were sold at cost price.

The Medical Staff also issued 97 certificates to families for milk to be supplied through the Public Assistance Committee.

The Corporation gave direct assistance with Maternity Home fees in three instances where the home conditions were unsatisfactory for the confinement: this was in addition to the annual subsidy of £50 paid towards the upkeep of the Maternity Home.

Three sterilised maternity outfits were sold at cost price.

Institutional Provision for Mothers or Children.—The treatment of maternity cases is undertaken by agreement with the Tunbridge Wells and District Maternity Home, to which adequate reference is made on page 29. Cases in need of special medical or surgical treatment are referred to the County Hospital, Pembury, or to the Kent & Sussex Hospital, if unprovided with a medical attendant. The provision for abnormal maternity cases at the Kent & Sussex Hospital consists of two single rooms, situated in the Gynæcological Block, and under the care of the nursing staff of the gynæcological ward—not an ideal arrangement, though much useful work has been done. Nine Borough mothers were confined in this Hospital during 1937.

No children's hospital is provided or subsidised by the Local Authority. Children are treated in the Kent and Sussex Hospital, the Homœopathic Hospital and in the Pembury Hospital. Fees were paid by the Corporation to the

Kent & Sussex Hospital for in-patient treatment of orthopædic cases, and for X-ray examinations in cases referred by the Corporation's Medical Staff. Payment was also made by the Education Committee to both the Kent & Sussex Hospital and to the Homœopathic Hospital for the removal of tonsils and adenoids in elementary school children.

No special institutional provision is made for unmarried mothers, illegitimate infants or homeless children. The Public Assistance Committee makes provision for such cases either in Pembury Hospital, which is now equipped with a modern Maternity Block, including operating theatre, or in other institutions in the County, according to the nature of the case.

## REGISTRATION OF NURSING HOMES.

The following action was taken during the year with regard to the registration of nursing homes:—

Number of applications for assistantion	Maternity Homes.	Other Nursing Homes.
Number of applications for registration	_	_
Number of Homes freshly registered Number of Orders made refusing or can-		_
celling registration		_
Number of Appeals against such Orders Number of cases in which such Orders	-	-
have been—		
(a) Confirmed on appeal	_	
(b) Disallowed		
Number of applications for exemption from registration	1	2
Number of cases in which exemption has been—		
(a) Granted	1	2
(b) Withdrawn	_	_
(c) Refused		_

On December 31st, 1937, there were nine homes registered as compared with thirteen at the end of 1936. All were visited and fully inspected during the year; the inspections are carried out by the Medical Officer of Health, who also supervises the adaptation of fresh premises for nursing home purposes, paying as many visits as occasion requires.

## SANITARY CIRCUMSTANCES.

Water Supply.—The water supply undertaking is owned and managed by the Borough Council, and the supply is a constant one. The water is soft, and is drawn from springs issuing from the stratum known to geologists as Tunbridge Wells Sandstone. The main springs are situated at Pembury in unfrequented woodland areas, in which inhabited dwellings are few and distant, and an Artesian Borewell at Saint's Hill, near Fordcombe, taps the same geological layer of the Ashdown Sands as the Pembury Artesian Wells, at a depth of 407 feet. Water is also pumped from the Tangier Wells to the Parish of Frant in the Rural District of Battle in East Sussex.

The risk of pollution is well guarded against.

The approximate number of dwelling houses supplied at the end of 1937 was 9,901 within the Borough and 752 outside.

Analyses, both chemical and bacteriological, continued to give good results, showing the water as delivered for the consumer's use, to be a pure, soft and wholesome supply. Recent bacteriological analyses are appended:—

Samples of Water taken on the 24th November, 1937.

	No. of organisms pe capable of			Communication	
	on standard Gelatin in 4 days at 22° C.	on standard Agar- Agar in 24 hours at 37/38° C.		-	1 c.c.
15 inch Main in Pembury Road Saint's Hill	15	0	_	-	_
Supply Tangiers Supply	2 30	0	_	_	_

Rivers and Streams.—There are several small streams in the Borough, of which the North and South Streams, leading to the North and South Sewage Farms respectively,

are the largest. Both have been carefully supervised, and a portion of the North Stream, between Clifton Road and the North Farm, was culverted during 1937, at an approximate cost of £2,550. This useful step will prevent its being used for dumping rubbish, etc., and will help to preserve it in a reasonably pure condition.

**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.

Improvements involving an outlay of considerable sums of money were commenced during the year. The chief item was the commencement in July of further extensions and alterations to the South Sewage Farm, involving the installation of additional tanks, filters, etc. This work was still in progress at the end of the year, and is estimated to cost about £18,600.

The North Sewage Farm is 187 acres in extent, and its effluent goes to the North Stream. Considerable improvement in this small stream has taken place, but it is still the subject of careful observation and supervision.

A new stormwater sewer was constructed to take the storm water from the Bretland Road and Lower Green district of Rusthall: the approximate cost of this work was £2,800.

Closet Accommodation.—There are now no privies or earth closets; 105 pail closets are in use in houses situated in the outlying rural areas of the Borough. Sixty water closets drain to cesspools: all the remaining premises are connected to the public sewers.

Cesspools in the Borough are emptied by the Corporation free of charge eight times annually, a charge being made if more frequent emptying be required. Public Cleansing.—Domestic refuse is collected once weekly; trade refuse and refuse from institutions, hotels, schools, etc., is collected daily, or two or three times weekly, as required. The vehicles used are S.D. Freighters, of which five are of modern type (rear loading) and one "Dustless" side loading type.

The Bradford method of controlled tipping is carried out in Tunbridge Wells, and since January, 1935, the refuse has been tipped on low lying land adjacent to the North Sewage Farm.

The total number of dust receptacles in the Borough is approximately 11,750: 9,793 tons (61,305 cubic yards) of house and trade refuse (9,991 tons in 1936) were dealt with by the Cleansing Department during the year.

The street gullies are emptied and flushed at least four times a year.

**Schools.**—All schools in the area are supplied with town water, and are connected with the public sewers.

There was no closure of schools or classes on account of infectious diseases during 1937, but 2 "low attendance certificates" were issued under the Elementary Educational Provisional Code, 1922, Amending Regulations No. 2, 1924. Full details of the procedure taken with regard to infectious diseases amongst elementary school children are set out in the Annual Report of the School Medical Officer.

With regard to the milk supplied to schools, 12 samples were taken during the year and examined, by the courtesy of the County Medical Officer, at the Kent County Laboratory. Details as to the results will be found on page 48. There is no doubt that to ensure a really safe supply, for example against tuberculous infection, milk which has been pasteurised in an approved pasteurising plant should be supplied for the use of children.

Smoke Abatement.—As there are no large factories in the Town, nuisance from smoke is not in any way a prominent matter, and no action was found necessary during the year.

Swimming Baths and Pools.—There are two Public Swimming Baths within the Borough, both of which are under the control of the Corporation.

The Indoor Baths consist of one swimming bath measuring 90 feet by 35 feet, having an up-to-date filtration plant, and 16 slipper baths. The Open Air Bath is 88 yards long and 25 yards wide.

Bacteriological examinations of samples of the waters of both these Baths were made in July, 1937, following upon a detailed inspection. The Indoor Bath and its surrounds proved to be in satisfactory condition, and the analyses showed its water to be of good quality. With regard to the Outdoor Bath, the reports on the water's quality were marked "not too good a water". It was therefore arranged that the water should be chlorinated till the end of the season, pending further improvements recommended in a report made to the Baths Committee. The process of chlorination, which is being carried out until improvements are completed, renders the water wholesome and safe: it is already carried out in the Indoor Bath, where the water is also passed through an efficient filtration plant.

**Shops Act, 1934.**—During the year, 75 visits were made by the Sanitary Inspectors, and five shops were provided with means of heating.

Eradication of Bed Bugs.—It is becoming more habitual for those who find bugs present in their houses to invoke the aid of the Health Department in dealing with these pests. In the case of slight infestations, verbal instruction is given together with the loan of disinfesting fluid and a hand spray.

The following is a summary of the action taken during the year :-

Number of	Council houses	s found to be infested	 7
,, ,,	,, ,,	disinfested	 7
Number of	other houses	found to be infested	 56
		disinfested	 56

In addition to the above, the bedding and furniture belonging to 13 families removed to Council houses were disinfested by the use of Hydrogen Cyanide, the work being carried out by contractors at the expense of the Local Authority. Often before and usually after disinfestation, visits were paid to the infested premises and advice given as to the need for constant vigilance and cleanliness.

Housing.—During the year, two houses were demolished and eight demolition orders were made: the Varney Street Area, consisting of eleven houses, was also cleared of property. Representations were made that 15 houses were in a state so dangerous or injurious to health as to be unfit for human habitation.

Twelve three-bedroomed houses were erected by the Corporation: these accommodated families from condemned or overcrowded houses. One hundred and thirty-eight houses and 12 flats were also built by private enterprise.

Adequate reference to the work carried out by the Department in housing inspection, etc., is appended to the Report of the Senior Sanitary Inspector (see below).

To: The Medical Officer of Health, for the Borough of Royal Tunbridge Wells.

I beg to submit my Annual Report on the work performed by the Sanitary Inspectors during the year 1937. The following table gives a general statement as to the number of inspections and visits made during the year:—

Houses inspected under the Ho	using	Act				340
Premises inspected other than						299
Houses visited re dustbin accor					ove)	203
0 1 1 1 1 1 1 1						193
Houses inspected for sanitary						1
Visits to Slaughter houses						762
,, ,, other food premises (				es. etc.		105
, Bakehouses				,		48
,, ,, Kitchens						42
,, ,, Dairies						123
,, Cowsheds				***	-	98
Ice creem premises						5
Factories						23
Workshops						73
Workplaces		***		***		7
Common Lodging H						9
Stables	ouses			***		11
Streams			***	***	***	12
			***			45
,, re keeping of animals						244
			***			75
***					***	157
,, ,, overcrowding						
,, ,, smoke nuisances				***	***	949
Interviews respecting propertie			***	***	***	243
Secondary visits re works in pro		etc.	***	***	***	4,473
				***		39
Rooms disinfected by Sanitary				***		91
Loads of bedding removed and	destr	oyed		***		3
Other visits			***	***	***	496
Smoke test to drains			***		***	37
Water ,, ,,	***			***		129
Informal notices served 331, r	espect	ing 5		ses.		
	"		73 ,,			
Defects remedied						4,159
Food condemned and destroyed		ons 2	cwts. 2	qrs. 4	lbs.	
Carcases—home killed—examin						5,018
Samples of food submitted for a	nalysi	S		***	***	102
Samples of food below standa	ard					5

## HOUSING.

During the year, systematic inspection was made of working class houses to the number of 340, and these were recorded under the Housing Consolidated Regulations, 1925. Other houses and premises numbering 299 were inspected for various reasons such as complaints, notice from builders, infectious disease, etc., while 203 houses were visited respecting dustbin accommodation, making a total of 842 houses visited by the Sanitary Inspectors.

During the course of these inspections, 15 houses were found to be in a state so dangerous or injurious to health as to be unfit for human habitation, these being:—

Pond Cottage, Ramslye Farm,
 Fonthill, The Common,
 Nos. 1—6, Sunnyvale Terrace, Vale Road,
 Nos. 22—30, North Street, and
 Nos. 1 and 2, Monckton's Row, North Street.

No. 1, Pond Cottage, has been demolished. The owner has agreed to Demolition Orders being made in the case of the Sunnyvale Terrace houses, while the North Street property has been declared a Clearance Area, and the matter is still in abeyance. Of the remaining houses 568 were found not to be in all respects reasonably fit for human habitation, and the necessary steps were taken to obtain the remedying of the defects that existed in a varying degree. During the year, 485 defects were fully remedied at 485 houses, and at the end of the year work was in progress at other of the houses.

The Varney Street Area (comprising 11 houses) was cleared of property, and in addition No. 2, Wood Cottages was demolished, these being outstanding from the previous year. The Albion Square Clearance Area (comprising 21 houses) is still in abeyance owing to the lack of alternative accommodation, while alternative accommodation is required for people living in other unfit houses. There is every hope of this accommodation being built during the current year.

At the end of the year 40 dwellings were overcrowded according to the standard laid down in the Housing Act, 1936, the number of persons dwelling therein being 267. In the present scheme for the erection of a further

158 houses, provision is being made to rehouse the persons from overcrowded and unfit houses.

Defects numbering 4,159 were remedied during the year, and the following table classifies certain of the defects:—

Houses redrained						12
Houses at which drains were re	epaired					45
Intercepting traps fixed		***				2
Inspection chambers construct	ed '					48
Cesspools abolished						_
Inspection chambers repaired						7
New Vent pipes fixed to drai	ns					29
New Soil pipes provided						20
Soil and Vent pipes repaired	***					25
New glazed gullies fixed						91
Defective bell traps removed			***			5
Obstructions removed from dr	ains					17
New W.C.'s provided						29
New W.C. pans and traps fixed						92
W.C.'s provided with water sup						2
Flushing cisterns repaired, or re						90
Rain water pipes disconnected		rains				11
Rain water pipes and gutters r						102
Roofs repaired			***			115
Paving to yards renewed or rep						206
Galvanised dustbins provided						213
Ashpits discontinued						3
Privies discontinued						3
Accumulations of rubbish ren	noved					13
Nuisances from animals abated						6
Shops provided with means of l						5
New sinks provided	······································					34
Sink wastes repaired or renew	ed					53
New Baths and Lavatory Basin						163
New Bath and Lavatory Basin						157
Rooms stripped and distemper						420
Ceilings cleansed and distemper				***		128
Rooms and bedding cleansed (t			doore			12
Overcrowding abated	chancy					43
Rooms ventilated		***			***	26
Walls repaired (internal)					***	159
(outomal)						125
Floors repaired or renewed						180
	tilated		***		***	26
Space under ground floors ver Windows repaired or renewed			***		***	134
	***	***		***		
New sash cords fixed		***			***	261 94
Dampness remedied		***	***			
Coppers repaired or renewed	***					37
Chimneys repaired	***		***	***	***	63
Stoves repaired or renewed			***			116
Slaughter houses cleansed	had					6
Dairies and Cowsheds limewas	nea		***	***	***	34
Miscellaneous						686
New water supply pipes to hous	es				***	2
Factories and Workshops Act	***			***		9

The following information is called for by the Minister of Health:—

	. Inspection of dwelling-houses during the Year :-	1.
639	(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	
000	(In addition 203 houses were visited redustbin accommodation.)	
4978	<ul> <li>(b) Number of inspections made for the purpose</li> <li>(c) (a) Number of dwelling-houses (included under subhead (1) above) which were inspected and recorded under the Housing Consolidated Regulations,</li> </ul>	
340 2772	(b) Number of inspections made for the purpose  (3) Number of dwelling-houses found to be in a state so	
15	dangerous or injurious to health as to be unfit for human habitation (4) Number of dwelling-houses (exclusive of those referred	
568	to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	
formal	. Remedy of Defects during the Year without Service of Notices :—	2.
485	Number of defective dwelling-houses rendered fit in con- sequence of informal action by the Local Authority or their officers	
	. Action under Statutory Powers during the year :-	3.
	A.—Proceedings under sections 9, 10 and 16 of the Housing Act, 1936:	
29	(1) Number of dwelling-houses in respect of which notices were served requiring repairs (2) Number of dwelling-houses which were rendered	
19	fit after service of formal notices:— (a) By owners	
Nil.	<ul> <li>(b) By Local Authority in default of owners</li> <li>B.—Proceedings under Public Health Acts:</li> <li>(1) Number of dwelling-houses in respect of which</li> </ul>	
10	notices were served requiring defects to be remedied (2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
Nil.	(a) By owners (b) By Local Authority in default of owners c.—Proceedings under sections 11 and 13 of the Housing	
8	Act, 1936:  (1) Number of dwelling-houses in respect of which Demolition Orders were made  (2) Number of dwelling-houses demolished in pursuance	
2	of Demolition Orders D.—Proceedings under section 12 of the Housing Act, 1936:	
Nil.	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been	
Nil	rendered fit	

(a)	(i) Number of dwellings overcrowded at the end of	
	the year	40
	(ii) Number of families dwelling therein	40
	(iii) Number of persons dwelling therein	26
(b)	Number of new cases of overcrowding reported during	
	the year	10
(c)	(i) Number of cases of overcrowding relieved during	
	the year	43
	(ii) Number of persons concerned in such cases	25
(d)	Particulars of any cases in which dwelling houses have	
	again become overcrowded after the Local	
	Authority have taken steps for the abatement	
	of overcrowding	Nil
(e)	Any other particulars with respect to overcrowding	
* /	conditions upon which the Medical Officer of	
	Health may consider it desirable to report	Nil

## INSPECTION AND SUPERVISION OF FOOD.

## Milk Supply.

During the year 98 visits were paid to cowsheds and 123 to dairies, several of these visits being early morning visits to obtain samples. As in other years, it was necessary in the case of certain farms to exercise special supervision to ensure the farms and dairies being kept up to a reasonable standard. The chief fault at the cowsheds was the lack of sufficient cleansing of the flanks and udders of the cows. Of the 15 cowkeepers, three hold licences for the production of Accredited Milk and one for Tuberculin Tested.

The following samples were obtained by the Sanitary Inspectors and submitted to the County Laboratory for bacteriological examination.

Accredited Milk	10.	Complied	with	test	6.	Failed	4.
Tuberculin Tested Milk	4.	,,,	**	.,	2.	**	2.
School Milks	12	.,			7.	**	5.

The following licences were issued under the provisions of the Milk (Special Designations) Order, 1936.

To use	the desi	gnatio	n—Tuberculin	Tested	Milk			6
11 11	**	**	,	**	2.5	Supplem	entary)	1
22 12	21		—Pasteurised	Milk.			***	1
			ccredited Milk					1
Establis	shment	for Pas	steurising Milk		***			1

## Meat and Other Foods.

As in past years, strict inspection of the slaughter-

houses was continued during the year under review. The number of these premises at the commencement of the year was six—three registered and three licensed. During the year two of the licensed premises ceased to be used as slaughterhouses, so that at the end of the year three registered and one licensed were in use. Owing to the irregular hours of slaughtering frequent visits outside the ordinary office hours were necessary to ensure that carcases were inspected at, or as near as possible to the time of slaughter. Other food premises were also visited to ascertain whether the requirements of the various enactments were being observed. The stalls were also regularly inspected.

No less than 762 visits were paid to slaughterhouses and 105 visits to other food premises, and 5,018 carcases together with the organs thereof were examined in accordance with the Meat Regulations, 1924.

The total amount of food condemned and destroyed was 2 tons 2 cwts. 2 qrs. 4 lbs., the greater part being meat found diseased at time of slaughter. The butchers are again to be congratulated on the high standard of animals slaughtered for food. It has to be borne in mind, however, that however good an animal may appear, disease may be found on post mortem examination being made, and this being so inspection cannot be relaxed.

The food condemned comprised the following:-

Beef (home kil	led)		1374	lbs	of	which	1324	lbs.	was	tubercular.
Beef offal (hom	e kille	ed)	1083	,,	. 22:	. 11	1027		61	**
Pork ,		,,	82		**	***		,,	,,,	,,
Pigs heads ,,			829		**	**	829		**	,,
Ox livers ,,		**	150		"	**	31		"	,,
Other offals ,, Mutton		**	369		**	2.7	81	,,	**	"
			101 199							
offal			0.3	"						
Fish			84	- 7.5						
Bacon			92							
Corned Beef			12	11						
Fruit (Pears)	***	***	308	,,						

The following information is given at the request of the Minister of Health:—

## CARCASES INSPECTED AND CONDEMNED.

	Cattle, excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed (if known)	420	5	321	2023	2319
Number inspected	420	5	321	1953	2319
All diseases except Tuber- culosis. Whole carcases con-					
demned	Nil	Nil	1	Nil	Nil
Carcases of which some part or organ was condemned	19	Nil	Nil -	3	88 (including 59 congestion only).
Percentage of the num- ber inspected affected with disease other than tuberculosis	4.5	_	0.31	0.15	3.8
Tuberculosis only. Whole carcases condemned	Nil	2	Nil	Nil	Nil
Carcases of which some part or organ was condemned	28	Nil	4	Nil	102
Percentage of the num- ber inspected affected with tuberculosis	6.7	40	1.2	Nil	4.4

A meat marketing scheme is not in force in the Borough.

## FOOD AND DRUGS (ADULTERATION) ACT.

The work under the Food and Drugs (Adulteration) Act, Public Health (Preservatives, etc., in Food) Regulations, etc., was actively pursued during the year, when 102 samples were submitted for analysis, 50 of these being milk. Three informal and one formal sample of milk were found to be below the standard laid down in

the Sale of Milk Regulations, two being deficient in fat and two containing extraneous water. In the case of the former the longer period lapsing between the afternoon and morning milking of the cows was thought to be the cause of the deficiency. Advice was given to the farmer, after which further samples complied with the standard. In the case of the informal samples containing extraneous water, these were obtained from milk being supplied to a school in the Borough. A formal sample obtained subsequently was found to be genuine, and at the end of the year the supply was being kept under observation. The remainder of the samples were of good quality, as the average figures will show, especially as these include those for the samples below standard.

						]	Fatty Solids.	Solids not fat.
1st	quarter	(15 s	amples)				3.54%	8.92%
2nd	,,	(16	,, )				3.45%	8.93%
3rd	,,	(13	,, )				3.8 %	8.81%
4th	**	(6	,, )	***	***		3.98%	8.68%
			3 10				9.0.0/	0 = 0/
		Presci	ribed St	andard			3.0 %	8.5 %

A sample of sausages was found to contain a preservative, the amount being within the limit prescribed by the order. A technical offence was committed as a declaration was not attached to the package and the notice in the shop had been dislodged. A warning to the vendor was considered sufficient. All samples were examined to ascertain whether the Public Health (Preservatives, etc., in Food) Regulations were being observed. No infringements of the Public Health (Condensed Milk) Regulations and the Public Health (Dried Milk) Regulations were found during the year. The following table gives the number of samples analysed:—

FOOD AND DRUGS (ADULTERATION) ACT. Samples Analysed During 1937.

Nature of Article		Examined.		Ac	Adulterated		Action Talean
	Formal	Formal Informal	Total	Formal	Formal Informal	Total	ACHOII TAKEII.
Milk	27	23	20	1	00	4	No. 755 (informal). 9% deficient in fat; further sample
							(formal).
							Subsequent samples reported satisfactory.
							Nos. 822 and 824 (informal) from same vendor, contained one and two ner cent added water respectively
							Formal sample proved genuine.
Cream	1	9	9				
Butter	1	53	20				
Margarine	1	20 0	10 0				
Lard	1	. 00	. 00				
Cheese	1	+	4				
Ice Cream	1	00 0	00 0		,	,	
Sausages	1	9	9	1	-	-	Contained small amount of preservative. Notice exhibited
Coffee	1	00	co				in such on further sample being taken.
	1	-	-				
Prunes	1	1	1				
Pepper	1						
Ground Race	-						
Suet							
Tapioca	1						
Sago	1	1	-				
Eucalyptus Oil	1	1	-				
Ground Almonds	1	1	-				
Mincemeat	1	1	1				
Grapes	1	1	-				
Totals	27	7.5	102	-	4	2	

## FACTORIES AND WORKSHOPS ACT.

During the year 23 visits were paid to factories and 73 to workshops and 7 to workplaces, and defects numbering 9 were remedied. In addition 48 visits were paid to bakehouses and 42 to kitchens, which generally speaking were kept to a reasonable standard.

## RATS AND MICE DESTRUCTION ACT.

The work in this connection showed a considerable increase during the year 1937, no less than 244 visits being paid by the Sanitary Inspecting Staff. In many parts of the country the rat menace has increased during recent years, this being particularly the case where new house estates have been brought into being near land used for allotments and piggeries. One such area exists in Tunbridge Wells and so serious did the rat nuisance become in this and other parts of the town, that it was decided to fully employ a man as ratcatcher. He was appointed for a period of three months, which was subsequently extended to six months, and commenced duty on August 6th. Hundreds of rats were definitely accounted for, while many others were destroyed in their runs following the use of gas. I am still firmly of the opinion that the only satisfactory solution to the rat problem is the employment of whole-time ratcatchers to cover the whole of the country.

In conclusion, I desire to express my thanks to you and the members of the Health Committee for the support I have received throughout a year which has been rendered more trying by the further duties undertaken in connection with Aid Raid Precautions.

(Signed) HARRY T. TAYLOR, Senior Sanitary Inspector.

# PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

## (A) NOTIFIABLE DISEASES.

One hundred and thirty-eight cases of infectious disease were notified during 1937, as compared with 121 in 1936, 119 in 1935, 224 in 1934 and 138 in 1933. The following Tables give details of the seasonal and age incidence of, and the mortality from, these notifiable diseases:—

Seasonal Incidence of Notifiable Infectious Diseases, 1937.

Month.		Diph- theria.		Opht- halmia Neona- torum.	monia.	& Py-	Cere- bro- Spinal Fever.	Dy- sen- tery.	Acute Ant: Polio- mye- litis.	Total
January	 6	1	3	_	11	1			_	22
February	 7	3	3	-	-	3		-	_	16
March	 13	. 1	2		5	_	-	-		21
April	 9	-	-	_	3	-		-	_	12
May	 6	1	-	1	1	-	_		-	9
June	 8		1	-	1	_	_	_		10
July	 6	2	-	-	-	_	-	-		8
August	 6	_	-	_	1	1	-	_	_	8
September	 10	1	-	_	-	1	1			13
October	 	3	-	_	2	1	_			6
November	 2 2	1	1	-	1	_	-		1	6
December	 2	-	1	-	2	-	-	2	-	7
TOTAL	 75	13	11	1	27	7	1	2	1	138

AGES, Etc., OF CASES OF NOTIFIABLE INFECTIOUS DISEASES.

Deaths (Inhabitants only).	-   -	34*	1	1.1	1	L
Cases admitted to hospital.	70 13	150	60	- 1	1	1
65 years and over	111	1 10	1	11	1	1
45 years and under 65 years.	9   1-	1 10	1	-	1	1
35 years and under 45 years.	-11	01	61	11	1	1
20 years and under 35 years.	∞ +	10	4	11	1	1
15 years and under 20 years.	. 53 T	11	-	11	1	1
10 years and under 15 years.	= 01 -	11	1	-	1	1
5 years and under 10 years.	1 60 7	14	1	11	1	1
4 years and under 5	44	11	1	1-	1	1
3 years and under 4	9	11	1	11	1	1
years and under 3	e	01	1	11	1	1
year and under 2 2 years.	-   -	1-	1	11	1	1
1 2 year years and and Under under under 1 2 3 year. years. years.	11-	- 6	T	11	1	1
Total cases notified (All ages).	75 (4) 113 (2) 11 (3)	27 (1)	7 (1)	2 T	1 (-)	1
DISEASE.	Scarlet Fever Diphtheria Erysipelas Ophthalmia	Neonatorum Pneumonia	Puerperal Pyrexia Cerebro-spinal	Fever Dysentery	Poliomyelitis Other Diseases	notifiable locally

Note-Figures in brackets (column 2) indicate the number occurring amongst outside cases in institutions in the Borough.

\*Only certain forms of Pneumonia are notifiable, but this figure includes deaths from all forms.

Scarlet Fever.—Seventy-five cases were notified, giving a case rate of 2.1 per thousand population, as compared with 2.33 for England and Wales. The average number of cases per annum in the quinquennium 1932-36 was 50.

The disease produced one fatality.

The type of the disease continued mild, and 70 cases were treated in the Borough Fever Hospital, the average period of stay being 39 days: the stay of most patients does not exceed a calendar month, but a few who are retained with complications such as ear discharge bring the average up to a larger figure.

Anti-Scarlatinal Serum continues to be used in more acute cases, and appears definitely to reduce the period of stay in hospital.

The difficulty of diagnosing mild cases of this disease is well known, and the differentiation of various strains of Hæmolytic Streptococci capable of giving rise to a scarlet rash and symptoms of Scarlet Fever, has led to a revisal of fever hospital accommodation in favour of the cubicle or small ward type—to allow of separation of different types of Scarlet Fever infections. Extensions in this direction are under the consideration of the Health Committee.

Diphtheria.—The attack rate per thousand population was 0.36 as compared with 1.49 for England and Wales generally. The cases numbered 13 (30 in 1936), of which 2 were inmates of institutions in the Borough. There were no fatal cases.

All 13 cases were admitted to the Borough Fever Hospital for treatment, and the average length of stay was 53 days: in addition, 4 "carriers" of the Diphtheria bacillus were isolated and treated in the Hospital, their length of stay averaging 13 days.

The Table on page 58 gives details of the incidence, etc., of Diphtheria in the Borough over a long period of years.

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 daily (including Sundays) and speedy reports of the examinations are given.

The dangers attached to Diphtheria should be kept fully in mind by members of the medical profession, and by all who have children in their care. Anti-toxin is ready, free of charge, for immediate use in any suspicious case; it should be given without awaiting bacteriological reports wherever the suspicion of Diphtheria is entertained. Waiting till the next day may mean the loss of a life.

Fresh arrivals on the Staff of the Borough Fever Hospital are Schick-tested, and those who are susceptible are immunized against Diphtheria. Permission has been given to extend testing and immunization to young children at the Child Welfare Centres: immunization is best carried out at the age of 1 to 2 years, as it thus forestalls the age at which Diphtheria is most severe in those who are not immune to attack.

Comparison of the Incidence, and Mortality of Diphtheria in Different

8,148 8,984 8,345 8,705 9,065 9,535 9,535 9,535 9,255 9,615 9,255 9,255 9,273 1,373 1,073 1,373 1,673 1,973 5,273 5,573 5,778 8,308 8,308	No. of Cases.  20 16 24 41 40 44 67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69 91	$ \begin{array}{c c} 1.37 \\ 1.49 \\ 2.24 \\ 3.87 \\ 9.08 \\ 3.87 \\ 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array} $		Deaths Registered.  5 4 5 9 5 8 14 10 31 7 3 1 2 0 1 0 6 1 3 0 8	0.47 0.33 1.01 0.23 0.10 0.03 0.06 0.00 0.03 0.00 0.03 0.00 0.17 0.03 0.08 0.00 0.02	0
7,984 3,345 3,705 9,065 9,535 9,895 9,255 9,615 9,975 1,335 3,443 3,773 4,973 4,973 5,273 5,573 5,573 5,778 3,038	16 24 41 40 44 67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	$ \begin{vmatrix} 0.57 \\ 0.85 \\ 1.43 \\ 1.37 \\ 1.49 \\ 2.24 \\ 3.87 \\ 9.08 \\ 3.87 \\ 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{vmatrix} $	4·33 0·54	4 5 9 5 8 14 10 31 7 3 1 2 0 1 0 6 1 3 0	$ \begin{array}{c} 0.14 \\ 0.18 \\ 0.31 \\ 0.17 \\ 0.27 \\ 0.47 \\ 0.33 \\ 1.01 \\ 0.23 \\ 0.10 \\ 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.00 \\ 0.017 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.022 \\ \end{array} $	
7,984 3,345 3,705 9,065 9,535 9,895 9,255 9,615 9,975 1,335 3,443 3,773 4,973 4,973 5,273 5,573 5,573 5,778 3,038	16 24 41 40 44 67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	$ \begin{vmatrix} 0.57 \\ 0.85 \\ 1.43 \\ 1.37 \\ 1.49 \\ 2.24 \\ 3.87 \\ 9.08 \\ 3.87 \\ 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{vmatrix} $	4·33 0·54	5 9 5 8 14 10 31 7 3 1 2 0 1 0 6 1 3 0	$ \begin{array}{c} 0.18 \\ 0.31 \\ 0.17 \\ 0.27 \\ 0.47 \\ 0.33 \\ 1.01 \\ 0.23 \\ 0.10 \\ 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.02 \\ \end{array} $	
3,345 3,705 9,065 9,535 9,895 9,255 9,615 9,975 1,335 3,443 3,773 4,973 4,973 5,273 5,573 5,573 5,778 3,038	24 41 40 44 67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	$ \begin{vmatrix} 0.85 \\ 1.43 \\ 1.37 \\ 1.49 \\ 2.24 \\ 3.87 \\ 9.08 \\ 3.87 \\ 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 $	4·33 0·54	9 5 8 14 10 31 7 3 1 2 0 1 0 6 1 3 0	$\begin{bmatrix} 0.31 \\ 0.17 \\ 0.27 \\ 0.47 \\ 0.33 \\ 1.01 \\ 0.23 \\ 0.10 \\ 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.22 \\ \end{bmatrix}$	
3,705 9,065 9,535 9,895 9,255 9,615 9,975 1,335 3,443 8,773 4,973 4,973 5,273 5,573 5,573 5,778 8,1038	41 40 44 67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	$ \begin{array}{c} 1.43 \\ 1.37 \\ 1.49 \\ 2.24 \\ 3.87 \\ 9.08 \\ 3.87 \\ 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array} $	4·33 0·54	5 8 14 10 31 7 3 1 2 0 1 0 6 1 3 0	$ \begin{vmatrix} 0.17 \\ 0.27 \\ 0.47 \\ 0.33 \\ 1.01 \\ 0.23 \\ 0.10 \\ 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.22 \\ \end{vmatrix} $	
0,065 0,535 0,895 0,255 0,615 0,975 1,335 3,443 8,773 1,073 1,373 1,673 1,973 5,273 5,573 5,573 5,778 8,1038	40 44 67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	$ \begin{array}{c} 1.37 \\ 1.49 \\ 2.24 \\ 3.87 \\ 9.08 \\ 3.87 \\ 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array} $	0:54	8 14 10 31 7 3 1 2 0 1 0 0 6 1 3 0	$ \begin{array}{c} 0.27 \\ 0.47 \\ 0.33 \\ 1.01 \\ 0.23 \\ 0.10 \\ 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.22 \\ \end{array} $	
0,535 0,895 0,255 0,615 0,975 1,335 3,443 3,773 4,073 4,973 4,973 5,573 5,573 5,573 5,778 3,038	44 67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	$ \begin{array}{c c} 1.49 \\ 2.24 \\ 3.87 \\ 9.08 \\ 3.87 \\ 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array} $	0:54	14 10 31 7 3 1 2 0 1 0 6 1 3 0	$\begin{bmatrix} 0.47 \\ 0.33 \\ 1.01 \\ 0.23 \\ 0.10 \\ 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.22 \\ \end{bmatrix}$	
0,895 0,255 0,615 0,975 1,335 8,443 8,773 4,073 4,973 4,973 5,273 5,573 5,573 5,778 8,1038	67 117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	2.24 3.87 9.08 3.87 2.62 0.93 0.68 0.26 0.35 0.49 0.28 0.76 0.81 0.31 0.41 1.92 2.52	0:54	10 31 7 3 1 2 0 1 0 6 1 3 0	0.47 0.33 1.01 0.23 0.10 0.03 0.06 0.00 0.03 0.00 0.03 0.00 0.17 0.03 0.08 0.00 0.02	
0,255 0,615 0,975 1,335 3,443 3,773 4,073 4,373 4,673 4,973 5,573 5,573 5,573 5,778 3,173 5,778	117 278 120 82 31 23 9 12 17 10 27 29 11 15 69	3.87 9.08 3.87 2.62 0.93 0.68 0.26 0.35 0.49 0.28 0.76 0.81 0.31 0.41 1.92 2.52	0:54	31 7 3 1 2 0 1 0 0 6 1 3 0	$ \begin{array}{c} 1.01 \\ 0.23 \\ 0.10 \end{array} $ $ \begin{array}{c} 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \end{array} $	0.05
0,615 0,975 1,335 3,443 3,773 4,073 4,973 4,973 5,573 5,573 5,573 5,778 3,038	278 120 82 31 23 9 12 17 10 27 29 11 15 69	9.08 3.87 2.62 0.93 0.68 0.26 0.35 0.49 0.28 0.76 0.81 0.31 0.41 1.92 2.52	0:54	7 3 1 2 0 1 0 0 6 1 3 0	$\begin{bmatrix} 0.23 \\ 0.10 \\ 0.03 \\ 0.06 \\ 0.00 \\ 0.03 \\ 0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.22 \\ \end{bmatrix}$	0.05
0,975 1,335 3,443 3,773 4,073 4,973 4,973 5,273 5,573 5,573 5,778 3,173 5,778	120 82 31 23 9 12 17 10 27 29 11 15 69	$egin{array}{c} 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array}$		3 1 2 0 1 0 0 6 1 3 0	0.10   0.03   0.06   0.00   0.03   0.00   0.17   0.03   0.08   0.00   0.22	0.05
1,335 3,443 3,773 1,073 1,373 1,673 1,973 5,273 5,573 5,573 5,778 3,173 5,778	82 31 23 9 12 17 10 27 29 11 15 69	$egin{array}{c} 2.62 \\ 0.93 \\ 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array}$		1 2 0 1 0 0 6 1 3 0	0.03 0.06 0.00 0.03 0.00 0.00 0.17 0.03 0.08 0.00 0.22	0.05
8,443 8,773 4,073 4,373 4,673 4,973 5,273 5,573 5,573 5,778 8,173 5,778	31 23 9 12 17 10 27 29 11 15 69	$ \begin{array}{c} 0.68 \\ 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \end{array} $		2 0 1 0 0 6 1 3 0	0.06 0.00 0.03 0.00 0.00 0.17 0.03 0.08 0.00 0.22	0.05
8,773 4,073 4,373 4,673 4,973 5,273 5,573 5,573 5,778 3,173 5,778	9 12 17 10 27 29 11 15 69	$egin{array}{c} 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array}$		0 1 0 0 6 1 3 0	0.00 0.03 0.00 0.00 0.17 0.03 0.08 0.00 0.22	0.05
1,073 1,373 1,673 1,973 5,273 5,573 5,873 3,173 5,778 3,038	9 12 17 10 27 29 11 15 69	$egin{array}{c} 0.26 \\ 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \\ \end{array}$		1 0 0 6 1 3 0	0.03 0.00 0.00 0.17 0.03 0.08 0.00 0.22	0-05
1,373 1,673 1,973 5,273 5,573 5,873 3,173 5,778 3,038	12 17 10 27 29 11 15 69	$\begin{bmatrix} 0.35 \\ 0.49 \\ 0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \end{bmatrix}$	0.51	0 0 6 1 3	0.00 0.00 0.17 0.03 0.08 0.00 0.22	0-05
1,673 1,973 5,273 5,573 5,873 5,778 3,038	17 10 27 29 11 15 69	$0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52$	0.51	0 6 1 3 0	$0.00 \\ 0.17 \\ 0.03 \\ 0.08 \\ 0.00 \\ 0.22$	0.05
1,973 5,273 5,573 5,873 3,173 5,778 3,038	10 27 29 11 15 69	$0.28 \\ 0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52$	0.51	6 1 3 0	0.00 0.17 0.03 0.08 0.00 0.22	0.03
5,273 5,573 5,873 5,173 5,778 3,038	27 29 11 15 69	$0.76 \\ 0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52$	0.51	1 3 0	0.03 0.08 0.00 0.22	
5,573 5,873 5,173 5,778 3,038	29 11 15 69	$0.81 \\ 0.31 \\ 0.41 \\ 1.92 \\ 2.52$	0.21	3 0	0.08 0.00 0.22	
5,873 3,173 5,778 3,038	11 15 69	$\begin{bmatrix} 0.31 \\ 0.41 \\ 1.92 \\ 2.52 \end{bmatrix}$		0	0.00	
5,173 5,778 3,038	15 69	$0.41 \ 1.92 \ 2.52$			0.22	
5,778 3,038	69	1.92		8		
3,038					0.00 1	
				10	0.28	
3,298	.129	3.5	2.93	4	0.11	
3,460	154	4.2		1	0.02	
3,430	83	2.5		5	0.15	0.10
2,316	53	1.6		7	0.22	0.13
0,751	40	1.3		1	0.03	
2,297	23		1.42	1	0.03	
4,423	57	1.6		4	0.20	
5,795	64	1.8		2	0.06	
1,270	32	0.9		1	0.03	
1,360	26	0.8		0	0.00	
4,370	11		0.54	1	0.03	
1,330	11	0.3		1	0.03	
1,080	14	0.4		1	0.03	0.04
4,430	15	0.4		1	0.03	0.04
				1		
			0.79	0		
				3		
				3		
				1		
				0		
1			0.63	2	0.06	
4.470				1		
4,470 5,653						
5,653	9					
5,653 5,650		0.00		2	0.00	
C. 49 BL BL AND	3,870 4,820 5,040 5,040 4,660 5,040 4,470 5,653	3,870 42 4,820 45 5,040 10 5,040 27 4,660 19 5,040 5 4,470 36 5,653 41 5,650 9	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$

<sup>\*</sup> 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.

presence of diphtheria.

† This figure is a composite one, the Borough boundaries being extended during the year.

Erysipelas.—Eleven notifications were received, and four of these cases occurred in the Kent and Sussex Hospital. The case rate for the Borough and for England and Wales was 0.31 and 0.37 respectively.

Ophthalmia Neonatorum.—Only one case of this disease was notified during 1937, and the condition was treated at the Out-patient's Department of the Kent & Sussex Hospital. There was no permanent impairment of vision.

Pneumonia.—Twenty-seven notifications of this disease were received, as compared with 19 during 1936: it was most prevalent in January.

Acute Primary and Acute Influenzal Pneumonia are the varieties notifiable, and owing to a certain amount of confusion in the minds of the medical practitioners, the returns are not as complete as could be wished.

Puerperal Fever and Puerperal Pyrexia.—Seven cases were notified—all under the heading of Puerperal Pyrexia. Since 1st October, 1937, this term is the only one in use for notifying cases of fever during the puerperium.

Two cases occurred in the Kent & Sussex Hospital, and a third was treated in the Borough Fever Hospital for a period of 28 days. All patients made good recoveries, there being no deaths.

Cerebro-Spinal Fever.—One case was notified. The patient, a boy aged 14 years, was admitted for diagnosis to the Kent & Sussex Hospital, where bacteriological confirmation of diagnosis was obtained. The patient, who came from Frant, Sussex, made a good recovery.

Dysentery.—Two cases were notified, both occurring in December: one was a child and the other an adult. Neither case proved fatal, and no bacteriological confirmation was obtained.

Acute Anterior Poliomyelitis.—One case was notified, after considerable doubt of the nature of the disease in the early stages. The case, a girl aged 8 years, proved to be of a mild type, leaving slight paralysis of two groups of muscles. The child is now receiving education and treatment in the Heritage Craft Schools, Chailey.

Tuberculosis.—Under the Public Health (Tuberculosis) Regulations, it is required that a Register be kept of all tuberculous persons in the area, and that a statment of the number on the register be forwarded to the Health Authority of the Administrative County, at the end of each quarter.

The number of persons whose names were on the Register at the end of 1937, was 136 (77 Pulmonary and 59 Non-Pulmonary) as compared with 139 (81 Pulmonary and 58 Non-Pulmonary) at the end of 1936.

TUBERCULOSIS.

New Cases and Mortality during 1937.

		New	Cases.			Dea	ths.	
Age-	Pulr	nonary.	Non-P	ulmonary.	Puli	nonary.	Non-P	ulmonary
Periods.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female
0-1	_			_	_	_	_	_
1-5	-	-	1		-	-		1
5-10	-	-	2	1		-	700	-
10-15 15-20	_	_	1				1	
20-25			_	_	_			_
25-35	2 3	4	-	2	2	1	-	
35-45	3	1	-		1	1		-
45-55	-	1	-		3	2	-	1
55-65	-	_	-	-		1	-	-
65 & upwards	1	1	_	-		1	_	1
otals	6	7	5	3	6	6	1	3

Of the 16 deaths, 5 cases (3 Pulmonary and 2 Non-Pulmonary) had not been notified under the Public Health (Tuberculosis) Regulations.

The Tuberculosis death rate for 1937 was 0.45. The Pulmonary death rate, 0.34, equals the lowest recorded.

The Table which follows this paragraph clearly indicates that the death rate from Tuberculosis is slowly and steadily being reduced.

Deaths from Tuberculosis During 48 Years.

Year.	Estimated Population.	Phthisis.	Phthisis. Death-rate	Other Forms of Tuber- culosis,	Totals.	Tuber- culosis Death-rate	Average Tuber- culosis Death-rate
1890	28,148	37	1.32	12	49	1.73	
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	1.93
1894	29,065	39	1.34	16	55	1.89	
1895	29,535	34	1.15	30	64	2.16	
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 >	1.45
1899	30,975	40	1.29	15	55	1.77	7.77
1900	31,335	20	0.63	24	44	1.40	
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	1.34
1904	34,373	36	1.04	8	44	1.28	1.01
1905	34,673	35	1.01	11	46	1.32	
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	1.13
1909	35,873	43	1.19	7	50	1.39	1.10
1910		28	0.77	11	39	1.08	
	36,173				27		
1911	35,778	21	0.58	6		0.75	
1912	36,038	24	0.66	7	31	0.86	1.00
1913	36,298	32	0.88	14	46	1.26	1.00
1914	36,460	27	0.74	11	38	1.04	
1915	33,430	29	0.87	8	37	1.11	
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	1.27
1919	34,423	29	0.87	10	39	1.16	
1920	35,795	21	0.59	12	33	0.92	
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	0.84
1924	34,330	19	0.55	6	25	0.73	
1925	34,080	17	0.50	4	21	0.62	
1926	34,430	26	0.76	3	29	0.84	
1927	33,870	20	0.59	3	23	0.68	
1928	34,820	20	0.57	6	26	0.75	0.73
1929	35,040	19	0.54	4	23	0.66	
1930	35,040	21	0.60	5 3 3 4	26	0.74	
1931	34,660	16	0.46	3	19	0.55	
1932	35,040	12	0.34	3	15	0.43	
1933	34,470	14	0.41	4	18	0.52	0.49
1934	†35,653	12	0.34	4	16	0.45	
1935	35,650	12	0.34		17	0.48	
1936	35,650	14	0.39	5 3 4	17	0.48	
1937	35,700	12	0.34	4	16	0.45	

<sup>†</sup>This figure is a composite one, as the Borough boundaries were extended during the year

Conditions which have favoured and which continue to 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 less under-nourishment prevailing; (3) the spread of information 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 and to avoid spreading infection by promiscuous expectoration. Further improvement may be expected when the construction of more houses at low rents completely abolishes overcrowding.

The arrangements for treating tuberculous persons resident in the Borough are in the hands of the Kent County Council.

It was not 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, or section 172 of the Public Health Act, 1936.

## (B) NON-NOTIFIABLE ACUTE INFECTIOUS DISEASES.

Knowledge of these is chiefly obtained through the schools in the first instance; visiting at homes where school cases are notified enables the Health Visitors to discover cases amongst younger children. Full use is made of the daily notices received from the head teachers, to follow up the cases in their homes.

The following Table shows the number of known cases of minor infections during 1937, together with those of the preceding five years—whether occurring amongst school children or others. Three deaths from Whooping Cough were registered.

The section is	1937.	1936.	1935.	1934.	1933.	1932
Measles	 47	668	1	31	4	251
Whooping-cough .	 155	191	81	279	25	319
	 178	12	176	262	60	221
German Measles	 4	6	1	14	1	5
Mumps	 8	15	552	6	7	4

Fourteen deaths were attributed to Influenza, 13 of which were persons over 45 years of age.

Two deaths occurred from Diarrhæa and Enteritis—not due to epidemic diarrhæa.

## CANCER.

As will be seen on page 64, 65 deaths were due to this disease in 1937—a diminution from the figure 86, recorded in 1935 and again in 1936. It should always be remembered that in the early stages of this disease the prospect of recovery is good, but medical advice must be sought early.

At the Kent & Sussex Hospital, a Radium Clinic is held each Saturday morning at 11 a.m., to deal with the numerous victims of Cancer for which this form of treatment is suited. Therefore, anyone, particularly if past middle life, who is in doubt about an ailment, should seek early medical advice, with the knowledge that treatment can be promptly arranged, with large hope of cure if the advice be sought early. One hundred and forty-seven new cases were treated at this Clinic in 1937, compared with 94 the previous year.

The following Table shows the relative incidence of the disease in sexes, age groups and sites of attack during 1937.

DEATHS FROM CANCER, 1937.

	Total	34	401-01   1020-   -	
Females.	Over 80 yrs.	œ	- 80 01           -         -	1111
	70-80 yrs.	6		
	60-70 yrs.	10	-213131   -   -	-111
	50-60 yrs.	9	-   -     01 -	-
	40-50 yrs.	-	11111-111111111	1111
	30-40 yrs.	1	11111111111111111	1111
Males.	Under Total 30 yrs.	1	11111111111111	1111
	Total	31	P4 48 1-33	1111
	Over 80 yrs.	5		1111
	70-80 yrs.	00	m     -m               -	1111
	60-70 yrs.	=	w       w	1111
	50-60 yrs.	9	21   22       -     -	1111
	40-50 yrs.	-	111-11111111111	1111
	30-40 yrs.	1		1111
	Under 30-40 Total 30 yrs. yrs.	1	пппіштип	1111
	Total	92	10123348331	
		:	owell us	1111
		Totals	Colon, Bowel Stomach Breast Lung Prostate Uterus Rectum Gsophagus Tongue Antrum Bronchus Pancreas Testes Orbit Liver	Bladder Kidney Skin Ovary

## DISINFECTION AND DISINFESTATION.

The Public Cleansing Station is housed in the basement of the Health Offices. There is a Steam Sack Disinfector, which sterilises clothing while the owner is having cleansing and disinfectant treatment in the adjacent bathing room. Thirty disinfectant baths were given to eleven individuals during 1937.

The majority of the disinfections of rooms have been carried out by the Sanitary Inspecting Staff, except after office hours when they are done by the Caretaker of the Health Offices, who also works the Willesden Sack Disinfector. There is a small disinfector at the Fever Hospital, used in connection with fever cases. Bedding is disinfected after enteric fever cases, and, on request by the medical attendant, after certain cases of Cancer.

Washing and boiling of bed linen and personal wear, thorough airing and scrubbing of rooms which have been occupied by infected persons are advised; stripping of wall paper and re-decoration of rooms vacated after prolonged use by sufferers from pulmonary tuberculosis is required.

Small-pox and Chicken-pox are the only diseases readily carried in the clothing; the chief method of spread of infectious diseases is by direct contact with the human carrier, and disinfection of rooms and clothing occupies a less prominent position than it once did. Attention to building up the patient's health, and to abolishing unhealthy conditions of the throat, nose or ears, avoidance of crowding and close atmosphere, do more to diminish the spread of infection than does the fumigation of rooms.

## PREVENTION OF BLINDNESS.

Immediately upon the receipt of a notification of Ophthalmia Neonatorum, an offer is made to the doctor in charge to supply the services of a qualified nurse from the District Nursing Association to carry out his instructions for treatment. It is frequently found that the quickest procedure is to have the infant taken up to see the Ophthalmic Surgeon at the Kent & Sussex Hospital: the district nurse carries out treatment at home in conjunction with any carried out at the daily hospital visit.

No case of permanent damage to vision from this disease has occurred in the Borough for a number of years.

## NUTRITION.

At the Tunbridge Wells Infant Welfare Centre, a series of 12 addresses is given each school term to the senior girls attending the elementary schools in the Borough. These Mothercraft lectures include careful instruction on the feeding of infants, so that the future mothers may have some knowledge of this important branch of education when they take up housekeeping for themselves. Classes consist of about 16 girls and are held each week, and an examination of the subject matter of the lectures is held at the end of each course.

## BOROUGH OF ROYAL TUNBRIDGE WELLS.

#### EDUCATION COMMITTEE:

(Present constitution).

Mr. Alderman SAUNDERS (Chairman).

Alderman Miss BAKER.

Mr. Councillor CRABTREE.

Mr. Councillor CROSS.

Mr. Councillor HAYWARD.

Mr. Councillor HUGGETT.

Mr. Councillor KENNARD.

Mr. Councillor LANGFORD.

Mr. Councillor McGILL.

Councillor Sir Wm. McLEAN, K.B.E.

Mr. Councillor RAISWELL.

Mr. COUNCILLOR SARGENT.

Miss R. J. HAZLEWOOD.

Miss MURIEL WELLS.

Rev. T. C. BEWES, M.A.

Rev. Canon T. G. GILLING-LAX,

M.A., R.D.

Rev. W. TURTON.

Mr. C. A. PRESTON, M.A.

Mr. T. ROBINS.

## STAFF OF THE SCHOOL MEDICAL DEPARTMENT:

#### †Chief Clerk:

J. G. COX.

## †Assistant Clerks:

Miss D. E. BULL.

C. H. WEEKES. D. A. BARMBY

## †School Nurses:

Miss J. DONALDSON (two-fifths time).

Miss M. MACLAREN (four-fifths time). Miss M. PAGE (two-fifths time) (appointed 9/8/1937).

Miss K. B. DRAGE (two-fifths time) (resigned 28/2/1937).

#### Dental Nurse-Attendant :

†Miss D. O'NEILL (appointed 3/5/1937).

\*Mrs. J. COX (resigned 24/3/1937).

## School Dental Surgeon:

†T. WYNFORD EVANS, L.D.S. (appointed 1/5/1937). \*T. NEVILLE STRANGE, L.D.S., R.C.S., Eng. (resigned 31/3/1937).

#### \*Masseuse :

Miss M. L. P. RUSSELL, C.S.M.M.G.

## \*Orthopaedic Surgeon:

PHILIP L. RICHARDSON, M.B., B.S., Lond., M.R.C.S., L.R.C.P.

## \*Aural Surgeon :

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

### \*Ophthalmic Surgeon:

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

## †Assistant School Medical Officer:

W. G. EVANS, M.R.C.S., L.R.C.P., D.P.H. (appointed 1/1/1937).

## †School Medical Officer:

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

\* Part-time Appointments.

† Full-time Officers, but only Part-time devoted to School Medical Work.

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# 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 my Report upon the work of the School Medical Department during the year 1937. It is compiled in accordance with the suggestions for the arrangement of annual reports made by the Board of Education in Form 6M. (Schedule), issued in January, 1934. It is the twenty-fourth report since I commenced duty as your School Medical Officer.

On 31st December, 1937, there were within the area of the Borough, one provided school and sixteen non-provided schools, consisting of twenty-one departments with recognised accommodation for 3,937 children. Owing to diminution in the number of scholars, it was found possible to close down another of the buildings ill adapted for use as school premises, viz., Basinghall Infants' School, with accommodation for 212 children: the closure took place in August, 1937. The average number of children on the School Registers during the year under review was 2,902, compared with 2,937 during the previous year.

During the year, 6,217 examinations were made by the Medical Staff, and the number of attendances made by children at the School Clinic was 14,084, beating all previous records by more than 2,500.

The first whole-time Dental Surgeon and Dental Nurse-Attendant were appointed in May.

Instruction in Mothercraft to senior girls was continued throughout the year.

I sincerely thank all members of my Staff, members of the Education Committee and the Teaching Staffs of the Schools for their help and encouragement in enabling me to cope with the work herein set forth.

I am, Ladies and Gentlemen,
Your obedient Servant,
F. C. LINTON.

Public Health Offices, 10, Calverley Terrace, Tunbridge Wells. 27th April, 1938.

SUMMARY OF STATISTICS, 1937.
Average number of children on the School Registers
during Year ended 31st December, 1937 2,902
Average attendance at the Elementary Schools during
the Year ended 31st December, 1937 2,620
Number of Medical Examinations :—
(a) In the Schools 2,626
(b) At School Medical Centre 3,591
——— Total 6,217
Number of examinations by the School Dental Surgeon 2,259
Number of treatments for Minor Ailments:—
(a) At Open-air School 1,192
(b) At School Medical Centre 8,694
—— Total 9,886
Number of treatments given by the School Dental
Surgeon to 1,324 individual children 2,380
Total number of attendances at the School Medical
Centre for all purposes 14,084
Number of attendances for treatment (remedial
exercises, massage, electrical treatment, etc.) at
School Orthopædic Clinic 1,072
Number of operations for removal of Tonsils and/or
Adenoids, under Local Authority's arrangements 138
Number of administrations of General Anæsthetics
for teeth extractions 678
Home visits by School Nursing Staff 2,084
STAFF.
On the first page of this Report are set out the names
of the Staff.
Dr. W. G. Evans took up duties as Assistant School
Medical Officer on 1st January, 1937, succeeding Dr. D. D.
Payne.
On August 9th, Miss M. Page succeeded Miss K. B.
Drage as School Nurse who resigned on 98th February to

On August 9th, Miss M. Page succeeded Miss K. B. Drage as School Nurse, who resigned on 28th February to take up a similar appointment under the Tottenham Borough Council.

Mr. T. Wynford Evans was, on the 1st May, 1937, appointed the first whole-time Dental Surgeon, in succession to Mr. T. Neville Strange, who held a part-time appointment to that date.

Miss D. O'Neill commenced duties as whole-time Dental Nurse-Attendant on 3rd May, succeeding Mrs. J. Cox, who resigned her part-time appointment on the 24th March.

No other changes of Staff took place during the year.

#### CO-ORDINATION.

The work carried out under the Maternity and Child Welfare Scheme and the School Medical Services is undertaken by the same Medical Staff, and two of the School Nurses also act as Maternity and Child Welfare Nurses. The same record card is used for consultations at the Infant Welfare Centres and for recording routine medical examinations in the schools, so that the previous medical history is available at school inspections. Satisfactory co-ordination of the work is thus achieved.

# THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

## School Hygiene.

In continuance of a general review of school premises, as instructed by the Education Committee in July, 1932, the following report was made on the St. John's Junior Mixed School buildings in October, 1937.

This is a building which abuts on the pavement of the main North road entering Tunbridge Wells, namely St. John's Road, and which is flanked by a narrow road, Newcomen Road, with buildings about 18 feet distant on the further side of Newcomen Road. Its area is covered not only with two separate groups of school buildings, but also with two private houses, which are Church property: they are erected upon ground which should form part of the school recreation space,

which is at present neither large enough nor sufficiently open to allow of comfort in organizing games, physical exercises, etc.

The entrance for boys opens off the brick pavement in St. John's Road and leads into a passage used as a cloakroom leading through to the playground. From its right, a door opens into one classroom, and on its left is situated one of the private houses referred to. There is a stone step up from the pavement: another step enters into the wood-floored passage, which has a double row of pegs on each wall for coat hanging. It is open to the public pavement, as the door is seldom closed. At the far end of the passage lies the playground.

The surface of **the playground** consists of granite chips set in concrete, constituting a hard and durable material. It slopes irregularly to the North, but has no pot-holes, save that a portion of the material is broken away beside one surface drain.

In it are situated the boys' offices: a urinal with six places, and three box-seat closets. The urinal is watered by a wall sprinkler. Its floor is of concrete, its walls ditto, and there are four slate partitions between the stalls. The box-seat closets are not a good type and should be replaced by pedestal closets with fixed side-slabs, as in the offices in the girls' school yard: these admit of easy and effective cleansing.

There are two dustbins in the yard, which was clean, as were the boys' offices. Buildings abut too closely on the yard and overlook it, shutting out a certain amount of light and air.

Classroom A. is the main classroom in which class 1A. and sometimes 1B. meet. The main lighting of this room is from the west by four windows and comes from behind the

pupils—a good direction. It is noisy, being on the main road. Artificial lighting-eight pendant electric lightssatisfactory. The room is lofty with pointed arched roof of ecclesiastical type. This roof is lined with dark polished wood planks which tend to darken the room generally. There are two ventilators in the ridge of the roof, and two opening sky-lights in the east roof giving cross ventilation with the west windows. There are also two windows in the south end, opening directly on to Newcomen Road. These give little light, as a high building is 18 feet distant across the road. There are dual desks of different sizes, sufficient to seat the pupils. For heating there is a large Tortoise stove which should have a metal bowl of water on the top to prevent drying of the air. I understand that this bowl is available. There is also a small stove (Portway and Sons) in the other fireplace in the room. This was not in use, and I understand had not been used for some years, it being stated that its small size involves frequent stoking. It appeared to be in good condition and repair, and I recommend its being put into use again this winter, and a fire guard provided for it. The end of the room near it is too cold without some form of heat.

Classroom 3B. opens off 1A. with a movable screen of wood and glass between the two (E.S.A. pattern). This room has four windows on the south wall, three north roof sky-lights for cross-ventilation, and two roof ventilators. Dual desks are provided, and the heating by one Tortoise stove is satisfactory. Natural lighting not very good, as the roof is again of dark wood. Artificial: eight pendant lights—satisfactory.

Behind it is the side entrance for girls from Newcomen Road. There is a descent of three steps from the pavement to this entrance. Five rows of pegs on one wall and four on the other, and a wood floor. One wash-hand basin and a roller towel, which I was told was changed from three to four

times weekly, were in this passage. The basin was cast-iron with white enamel and was clean and in good condition.

Next is a further cloakroom for girls and this possesses two movable stands for coats—a better arrangement than wall pegs. There is no heating in any of the cloakrooms, and consequently no means of drying the coats or shoes on wet days. There are two lights in this cloakroom.

Next is **Classroom B.**, a smaller room which has two stoves, and north window-lighting. This light is poor, as of the four north windows, it is only possible to see a small portion of sky from two, because of adjacent buildings. There are four pendant lights, one roof ventilator and one sky-light opposite the windows.

Moving across the boys' playground to the separate block, the first room is simply an entrance room for access to the other classrooms of this portion of the school. It has a Tortoise stove, large size, and could be used as a drying room for coats and boots.

There is another entrance porch in which boys' clothes are hung. This has a tiled floor and one wash-hand basin, and a roller towel changed daily.

Next to it is a small classroom only used as a store-room. This room had a good south light and one stove in it.

Classroom 2A. This has two Tortoise stoves for heating, has cross-ventilation and a pleasant fresh temperature on entering. It has east and west lighting, and six pendant artificial lights. The desks are all of dual pattern. This was the best classroom seen so far.

Classroom 3A. This was very stuffy on entering. There is one Tortoise stove in a corner of the room, one north and four east long windows, giving good light. Four pendant artificial lights. The top portion of the north window can be used for ventilating across from the east windows, but was not in use when I inspected. As this room was definitely stuffy, more use should be made of its means of ventilation if the children are to be kept free from colds or headaches.

Next was a fifth porch with girls' coats on the wall pegs and a paved floor. In it was a second wash-hand basin for girls. There is only one in the school for boys.

The girls' playground was in use for exercises when I inspected. It is too small and overlooked by small houses close at hand.

The girls' offices. Six W.C.'s with fixed side slabs on pedestal closets. The floor is concrete and a brick passage leads into the offices. One flush chain was broken off and needs replacing.

No. 1, Newcomen Road. A house built on the school property and taking up what should be playground space here.

The caretakers' work had not been very well done, as all high surfaces such as the tops of cupboards, window ledges, and electric globes were heavily covered with dust. I was informed that one of the two caretakers has been absent ill for a fortnight, which may account for the coatings of dust, when one cleaner only was dealing with so large an area.

Summary. Buildings on this school ground are crowded together. It is difficult to administer, being separated into two portions. It abuts too closely on public roads. Box-seats should be replaced as opportunity occurs by pedestal closets in the boys' offices. The lighting could be considerably improved by having a light-reflecting surface to the pointed arched ceilings of the classrooms. The floors have been treated with "Floradcol" and were in a satisfactory condition and clean, though ledges, etc., in the classrooms were dust-laden. A flush-chain needs repair in the girls' school offices. A fire-guard is needed for the smaller stove in Classroom A.

Like many other of the small schools in the Borough, the buildings do not meet with present-day conceptions of school buildings, nor would it be possible without wide reconstruction to modernise them fully.

## Medical Inspection.

All children undergo three routine medical inspections in the schools. The three age groups inspected were Entrants (those commencing school life), Second Age Group (8 to 9 years of age) and the Third Age Group (12 to 13 years). All children admitted to elementary schools from private schools are medically inspected as soon after their admission as possible; if these do not fall within the above Groups, they are included as "Other Routine Inspections." The number of Routine Inspections carried out during the year was 979 (977 by the School Medical Staff and 2 at the parents' request by the private medical attendant).

The Board's schedule of medical inspection was closely followed.

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

In addition to the above, 32 children were specially inspected at the request of the teachers, and 975 re-inspected in the schools (see page 119).

At the School Clinic, 1,638 special examinations and 1,953 re-inspections took place. In addition, 144 special inspections and 498 re-inspections were made at the Open-Air School.

The total number of medical examinations carried out was therefore 6,217 (previous year 6,347).

## Findings of Medical Inspections.

The following Table showing the defects found on medical inspection, is similar to Table II. on page 108, but the defects found under each Group of Routine Inspections are given separately:—

		ROU	JTINE	MEDIC	AL INS	SPECTI	ONS.		1.014	Specia
		l6 ants.		20 d Age oup.	Thire	76 i Age oup.		7 ers.	Exam	Specia nina- ns.
Teat is gained	Re- quir- ing treat- ment.	For obser- vation	Re- quir- ing treat- ment.	For obser- vation	Re- quir- ing treat- ment.	For obser- vation	Re- quir- ing treat- ment.	For obser- vation	Re- quir- ing treat- ment.	For observation
Skin— Pingworm—Scalp	1									
Ringworm—Scalp Body	_			_	_	_	_		7	_
Cashier			_		-	-	_	_	6	_
Impetigo	-	-	-	-	-	_	_	-	26	_
Other Diseases (Non-				1				NAME OF	1230	
Tuberculous)	1	1	3	2	2	1	-	-	39	2
Eye-								rich l		
Blepharitis	-		-	-	1	-	-	-	16	
Conjunctivitis Keratitis	-	_	-	-		-	-		19	
Compact Constitue			=				=			-
Defective Vision (ex-	1000			355	1637		1.97	85.0	17.00	
cluding Squint)	_	-	15	3	11	2	2		21	1
Squint	4		1	_			ī	de-	2	-
Other Conditions		-	_		2	_	_	-	52	1
Ear—										
Defective Hearing	-				-	-	-	-	8	2
Otitis Media	2	2	1	-	3	-	1	-	25	
Other Ear Diseases	-	2	2	1	1	-	1		48	5
Nose and Throat— Tonsillitis only	4	54	9	31	0	22		9	62	14
Adenoids only	6	1	7	2	8	23		1	1	14
Tonsillitis and Adenoids	20	20	8	15	2	5	2	2	24	4
Other Conditions	2	7	4	6		3			42	3
Enlarged Cervical Glands		0.50								
(Non-Tuberculous)	1	45	-	33	-	17	-	4	16	21
Defective Teeth	46	31	31	20	15	12	9	6	141	1
Defective Speech	-		-	-	_	-			-	1
Rheumatism Heart and Circulation—	-	-		-	2	5	1	1	9	5
Heart Disease—										
Oscania			-	3		9			3	2
Functional	1	_	_	_	1	2	-	_	_	_
Anaemia	1		1	1	1			-	3	-
Lungs-										
Bronchitis	2	9	2	4	2	-		-	9	-
Other Non-Tuberculous					- 22					
Diseases	-		-	2	-	-	-	77	7	-
Fuberculosis— Pulmonary—Definite		-								
Suspected					-					
Non-Pulmonary-										
Glands	_	1			_	-	minu.		4	6
Bones and Joints	-	-	-	-					1	_
Skin	-	-	=	-				-	-	-
Other Forms	-	- 1	-	-		-		-	1	-
Nervous System—		1	HAZEL E					1		
Epilepsy	-	1	-	1	-	-	-	_	1	-
Chorea	1	1 1	1	3	=	1	1	177	2 5	2 5
Other Conditions	1	1		3	-	1	1		3	0
Distrate	1	1	-	-	*****		-			-
Calcal Committee	i	_	2 2	2	5 2	6	1		2	1
Spinai Curvature	1	1	2	2 9	2	5	-	1	12	i
Other Forms	-									

- (a) MALNUTRITION.—The nutrition of all children undergoing Routine Medical Inspection is now classified in accordance with the terms of Administrative Memorandum No. 124, issued by the Board of Education on 31st December, 1934, and a summary of the results will be found in Table II on page 109. Classification of degrees of nutrition is notably difficult, and there is no doubt that individual inspectors give varying results.
- (b) Uncleanliness.—Eight thousand and twenty-four heads were inspected during 1937, and of these 2.4 per cent. showed the presence of infestation with vermin or their eggs—the same percentage as in the previous year. Three schools—St. James' Senior Boys, St. Mark's Junior Mixed and Infants and King Charles' Senior Boys—had a clear record throughout the year. Some schools showed increased infestation. Inspections are stringent, even one nit in an otherwise clean child being recorded as an infestation. Vigilance on the part of the teaching staff in detecting and reporting early infestation is of the greatest help in preventing spread to others.

The total number of inspections for the presence of vermin was 8,282, of this total 92 were re-inspections in school and 166 re-inspections at the School Clinic.

The School Nurses make a routine inspection of all children during each school term—i.e., thrice yearly. The following Table records the work done by the Nurses at these routine head inspections, and the conditions found, as compared with the years 1936 and 1922, the year in which a vigorous campaign was started.

#### INSPECTIONS OF HEADS FOR YEAR 1937.

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, 1937.	Percentage of Nits or Vermin found, 1936.	Percentage of Nits or Vermin found, 1922.
St. James' Sen. Boys	367	_	_	0.0	0.0	5.2
St. James' Sen. Girls	324	3	-	0.9	1.4	8.6
St. James' Infants	397	10	-	0.5	0.6 2.3	5.8
St. Barnabas Jun. Mixed St. Barnabas Infants	645 303	8		1.6 2.6	3.7	14.4
St. Mark's Jun. Mixed	303	0		2.0	0.1	14.4
and Infants	263	_		0.0	0.0	_
Christ Church Jun. Mxd.						
and Infants	394	7	-	1.8	1.9	34.2
King Charles' Sen. Boys	399	-		0.0	0.0	1.3
Murray House Sen. Girls	349	1	-	0.3	0.0	4.7
St. Peter's Jun. Mixed	271	2		0.7	1.1	
St. Peter's Infants	175	3	1	2.3	6.0	28.8
St. John's Jun. Mixed	488	23	1	4.9	3.5	-
Down Lane Infants	244 271	8		3.7	0.8	8.9
St. Luke's Infants St. Augustine's Mixed	276	11	3 6	5.2 8.3	4.8 5.5	20.6 31.3
Royal Victoria Sen. Boys	356	5	0	1.4	0.4	7.7
Basinghall Infants	173	14	9	9.2	8.0	15.6
Holy Trinity Sen. Girls	298	13	1	4.7	1.5	24.9
Rusthall Boys	688	7	2 1 2 4	1.3	2.1	10.9
Rusthall Girls	683	11	4	2.5	2.7	28.0
Rusthall Infants	416	4	4	1.9	2.4	13.8
Open-Air Mixed	244	14	8	9.0	12.0	-
Total	8,024	163	33	2.4	2.4	14.7

The 196 heads found infested represented 134 individual children.

Parents are helped in every way to rid their children of this trouble. No prosecutions were undertaken in 1937.

- (c) MINOR AILMENTS AND DISEASES OF THE SKIN.—As will be seen in the Table on page 80, the greater number of these cases were discovered at the School Clinic, where the children presented themselves for treatment.
  - (d) VISUAL DEFECTS AND EXTERNAL EYE DISEASE.—

Fifty-seven children were referred to the Ophthalmic Surgeon for defects of vision or for squint, as compared with 90 in 1936.

It should be noted that at the Routine Medical Inspection of Entrants, vision is not tested, as the children are too young to read the letters.

- (e) Nose and Throat Defects.—It will be seen that 390 defects of the nose and/or throat were discovered amongst the children. Of the children undergoing routine inspection, 6.2 per cent. were referred for treatment compared with 4.3 per cent. the previous year: the increased percentage was doubtless a sequalæ of the Measles epidemic of the previous year.
- (f) EAR DISEASE AND DEFECTIVE HEARING.—One hundred and four cases were noted, 92 of which were referred for treatment. Here again, the majority of the defects were discovered amongst children presenting themselves at the School Clinic.
- (g) Dental Defects.—One hundred and one of the children undergoing a routine medical inspection (10.3 per cent.), and 141 children seen at the School Clinic, were found to require immediate dental treatment. These were referred to the School Dental Surgeon, without waiting for the routine dental inspection. There is a residue of parents who refuse treatment for their children, and these form a large proportion of the 10 per cent. found to be dentally unfit at routine medical inspection.
- (h) ORTHOPÆDIC AND POSTURAL DEFECTS.—Fifty-five children were found to be suffering from some deformity (49 in 1936), of whom 28 (27 in 1936) were referred to the Orthopædic Surgeon.
  - (i) Tuberculosis.—No suspected cases of Tuberculosis

were found. Amongst the 13 old cases examined during the year, 6 were found to be in need of treatment.

- (j) HEART DISEASE AND RHEUMATISM.—Twenty-eight children were found to be suffering from diseases or disorders of the heart and circulation, and 23 children were classed as suffering from Rheumatism. Eleven of the heart cases and 12 rheumatic children were referred for treatment.
- (k) OTHER DEFECTS AND DISEASES.—Under this heading, which includes debility, injuries, etc., 726 defects were found, of which 629 required treatment.

## Following-up.

The following-up of children is undertaken in three ways, namely:—

- (a) By home visits of School Nurses.
- (b) At the School Clinic, where children frequently come for re-inspection by the Medical Staff, and
- (c) By medical re-inspections in the Schools.

The School Nurses' work during 1937, included the following:—

Visits to Houses v Diseases ha			 First Visits.	Sub- sequent Visits.	TOTAL
Scarlet Fever	 		 14	4	18
Diphtheria	 		 5	1	6
Measles	 		 53	4	57
German Measles	 		 2	1	3
Mumps	 		 5	3	8
Whooping Cough	 	4	 113	145	258
Chicken Pox	 		 115	49	164
Sore Throat	 100		 37	7	44
Ringworm (Scalp)	 				
(body)	 		 2	1	3
Verminous Heads	 		 18	13	31
Verminous Bodies	 		 1		1
Impetigo Contagiosa	 		 11	5	16
Scabies	 		 3	_	3
Infectious Eye Disea			 1	_	1
Other Diseases	 		 75	11	86
Totals	 		 455	244	699

Home Visits arising out of Medical Inspections	, and	for	other	
information				1,385
Cultures taken				127
Number of Heads Inspected				8,282
Visits paid to Elementary Schools (all purposes)				202

As will be seen on page 119, 975 re-inspections were carried out at the schools, and the results were as follows:—

Cured	 	 	226
Improved	 	 	295
Stationary	 	 	377
Worse	 	 	77

It should be noted that children who are known to have been cured by treatment are not included in the Reinspections at the schools.

### Arrangements for Treatment.

(a) Malnutrition.—Children who are suffering from this condition to any marked extent are sent to the Borough Open-Air School for Physically Defective Children, where three meals a day are provided at a charge relative to the parents' means. Full particulars concerning this School will be found on page 95.

For those children who are found to be suffering from slight Malnutrition, milk is provided in school at 11 a.m., either at the parents' expense, or—when circumstances demand it—at the expense of the Education Committee (see page 97 for details of this scheme).

(b) Uncleanliness.—When children are found to be suffering from verminous heads, the parents are given printed instructions for dealing with the trouble. In certain instances where they fail to clear the child's head of nits, the School Nursing Staff assists: such assistance was given in twenty-one cases in 1937. In the case of Scabies and other parasitic skin diseases, disinfectant baths are given on three successive days in the Cleansing Station at the Health Offices, the clothing being dealt with by steam sterilisation in a Willesden Sack Disinfector. This has proved a very effective way of dealing with such cases. Six individual children were treated by this method.

(c) MINOR AILMENTS AND DISEASES OF THE SKIN.—
These are treated at the School Clinic by the School Nursing
Staff. The following Table gives details of the defects
treated during the year:—

Disease or Defect	t.		No. of defects treated.	No. of treat- ments given.
Minor Ailments :				
Injuries, cuts, abrasions	***		250	1,019
Septic wounds			185	1,132
Sores, spots			88	303
Boils			84	505
Warts, corns, whitlows			51	596
Sprains, bruises			47	165
Burns, scalds			36	135
Chilblains			33	187
Bites, stings			14	37
Miscellaneous			106	512
Skin Diseases :				
Impetigo			64	433
Eczema			16	81
Ringworm			5	46
Rashes			5 5 7	12
Herpes				23
Scabies	***		6	27
Urticaria			2	7
Miscellaneous	***		3	15
Total		*	1,002	5,235

With but few exceptions, all children attended the Clinic until cured.

The scholars at the Borough Open-Air School are treated there by the Nurse in attendance, and details of the treatment given will be found on page 96. (d) VISUAL DEFECTS AND EXTERNAL EYE DISEASE.— Dr. Davies, the Ophthalmic Surgeon, attends the School Clinic three times in each month, and all cases found to require treatment are referred to him. During the year, 437 examinations were made by Dr. Davies, and spectacles were prescribed for 80 children.

Three children were operated upon for Squint at the Kent and Sussex Hospital.

One hundred and forty-five defects or diseases of the eyes were treated at the School Clinic by the Nursing Staff as follows:—

Disease or	Defec	t.	No. of defects treated.	No. of treat- ments given.
Conjunctivitis			 18	71
Blepharitis			 18	161
Styes			 73	222
Miscellaneous			 36	109
To	otal		 145	563

In addition to the above, 59 children had 278 applications of atropine to their eyes.

(e) Nose and Throat Defects.—The Education Committee has made arrangements with both the Homœopathic and the Kent and Sussex Hospitals for the treatment of tonsils and adenoids by operation.

As will be seen in Group III., Table IV., on page 115, 165 children suffering from defects of the nose or throat, or both, received treatment during the year. One hundred and fifty-seven operations were performed for the removal of Tonsils and/or Adenoid growths, and 3 operations on nasal spurs. One hundred and thirty-eight of these operations were done under the Local Education Authority's agreements with the Kent and Sussex Hospital and the Homœopathic

Hospital. Of these 138, 105 parents paying into the Tunbridge Wells and District Association of Hospital Contributors or into the Pea-nut Hospital Honey-Comb Scheme, had their children operated upon under the terms of the agreement between the Local Authority and these Associations. Nineteen operations were known to have been carried out privately.

The total number recommended for treatment was 190, and 146 received operative treatment (the other 14 cases known to have been treated, were recommended by private medical practitioners and not by the School Medical Staff). This represents a percentage of 77.

I am of opinion that operative treatment of unhealthy conditions of the nose and throat is a valuable factor in reducing the incidence of those infectious diseases of which the path of entry is the nose and throat: also the severity of, and tendency to complications in, Scarlet Fever are undoubtedly less amongst those who are unobstructed by enlarged tonsils and adenoid growths.

(f) Ear Disease and Defective Hearing.—Ninetytwo of the 104 sufferers from ear disease or deafness were referred for treatment, the majority to Dr. Walker Wood, the Aural Surgeon, who is in attendance at the School Clinic on the first Monday in each month. Two hundred and seventy attendances were made to see the Aural Surgeon, and appended is a report of the work done by him:—

## Synopsis of Cases dealt with.

#### Ear Cases.

Chronic suppurative otitis i	media			14
Chronic suppurative otitis	media,	Resid	ual	8
Cerumen				7
Chronic middle ear catarrh				4
External otitis				3
Acute otitis, Mastoid opera	ation			2

Acute middle ear catarrh, Eustachian	 2	
Aural Polypus	 1	
**	_	41
Nose Cases.		
Chronic rhinitis (Chronic nasal catarrh)	 6	
Adenoids	5	
Acute catarrh of antrum	3	
Hypertrophic rhinitis	2	
Nasal obstruction (Developmental, septu		
	2	
Epistaxis, nose bleed	 2	
	-	20
Throat Cases.		
Enlarged Tonsils and Adenoids	 12	
Chronic tonsillitis (septic)	 2	
		14
Miscellaneous.		
Cervical Adenitis	 2	
		2
TOTAL		77
		-

The figures given in the above table are for new cases seen during the year. As before, aural conditions provided the largest number of patients. Many of our cases of chronic otorrhoea we have again been able to write off as "cured".

## (Signed) J. WALKER WOOD.

The School Nurses treated 140 cases at the School Clinic as follows:—

Disease or Defect.	No. of Cases treated.	No. of treat- ments given.
Otorrhoea	 47	1,575
Deafness, wax in ear	 20	176
Miscellaneous (Earache, etc.)	 73	867
Total	 140	2,618

In addition to the above, 19 children had 322 treatments at the Open-Air School (see page 95).

(g) Dental Defects.—Mr. T. Wynford Evans, the School Dental Surgeon, reports upon this branch of the work as follows:—

Although the full time Dental Clinic only commenced on 1st May, 1937, the results to the end of the year have shown ample justification for making the Dental Department a whole-time one. The various totals of different treatments undertaken compare favourably with previous figures, and particularly so when it is borne in mind that there was only a part-time Dental Surgeon here for the first three months of the year, and no dental treatment available at all during the month of April. A true picture showing the results of the working of a full time Clinic will only be apparent at the completion of a full year. It is safe to forecast that all schools will be inspected and treatment offered to those children requiring it within every year, and when it is remembered that in the past nearly three years have elapsed between consecutive visits to the same school, this is a very definite stride forward in the improvement of dental treatment for school children.

The children on the whole make good use of the Service offered, and I am pleased to say that there is no difficulty in persuading the majority of parents to accept conservative treatment for their children.

The parents of the Rusthall children do not make use of the Clinic as much as I should like to see them, but perhaps this is partly accounted for by the distances they have to travel to the Clinic at Calverley Terrace. It may be that in the future it will be possible to set up a small clinic at Rusthall, and with treatment offered so

much nearer their homes, better results will probably be obtained.

I should like to mention briefly the various totals of work carried out during the year, the figures in brackets being those for the full time Dental Clinic, *i.e.*, from 1st May to 31st December.

The number of children dentally inspected was 2,259 (2,022), of whom 1,938 (1,725) or 86 per cent. were found to require treatment, compared with 91 per cent. in 1936. One thousand, three hundred and twenty-four individual children actually received treatment during the year, having 2,380 (1,930) treatments, as compared with 685 children and 2,004 treatments during 1936. Of the children offered treatment, 70 per cent. actually attended. The number of fillings inserted was 2,133 (1,796), and 3,058 (2,478) teeth were extracted, also 678 (583) administrations of a general anæsthetic were given by the Assistant School Medical Officer, compared with 269 the previous year. The number of "other operations" for the year was 743 (739), which shows a very large increase on the previous year, namely 41, but this is accounted for by the introduction and extensive use of Howes' Ammoniacal Silver Nitrate treatment for temporary teeth, which can hardly be classified as fillings.

## (Signed) T. WYNFORD EVANS,

School Dental Surgeon.

Further details of the Dental Surgeon's work are given in Table V., on page 117.

The employment of a whole-time dental surgeon has placed this important branch of the School Medical Service on a satisfactory basis: the work now being done will, I am confident, go far to improve general health and fitness as time goes on.

(h) ORTHOPÆDIC AND POSTURAL DEFECTS.—The Orthopædic Clinic held once a month at the School Clinic, was conducted as before by Dr. P. L. Richardson, and the following is a short report upon the work carried out by him:—

Seventy-five children attended these Clinics during 1937, and 151 consultations were held. Of these cases, 33 were new ones, and the following are details of the conditions from which they were found to be suffering:—

Scoliosis and/or	Kyphosis				15
Warts on feet					2
Flat feet					2
Pes Cavus					1
Sl. winging of S	capulae				1
Mild Rickets wi	th Kyphos	sis			1
Prot, abdomen	and Lordo	sis			1
Crippling due to	Idiocy				1
Miscellaneous (S	Sprains, Ci	ooked	toes,	etc.)	9

During the year, 18 children were discharged as needing no further treatment, and 3 other cases ceased to attend, having left the town or being over age.

Dr. Richardson is responsible for supervising and directing the treatment of postural defects, etc., carried out by the part-time masseuse, Miss Russell. Remedial Exercise Classes are held at the School Clinic each Monday, Tuesday and Thursday from 4 to 5 p.m. Dr. Richardson also supervises the in-patient treatment of orthopædic cases admitted to the Kent and Sussex Hospital under the Local Education Authority's arrangement with that hospital.

Fifty-three children were treated under the Local

Authority's Scheme, 51 of whom attended the Remedial Exercise Class for treatment (remedial exercises, massage, electrical treatment) making 1,072 attendances.

Two boys were admitted to the Kent and Sussex Hospital for in-patient treatment, one for five weeks (amputation of toe) and the other for 1 week for the removal of a cyst.

- (i) Tuberculosis.—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. The number of elementary school children suffering from tuberculous complaints at the end of the year was 32 (the same number as at the end of 1936). Six cases were in attendance at the Open-Air School, 12 in attendance at ordinary elementary schools and 1 at Tonbridge Special School, 6 in various hospitals and 7 at no school.
- (j) HEART DISEASE AND RHEUMATISM.—Children found requiring treatment are referred to Hospital or to their own medical attendant: 23 were thus referred during 1937.
- (k) Other Defects and Diseases.—Where other conditions are discovered needing medical treatment, the children are referred to their medical attendant or to the appropriate hospital—usually with a personal note of explanation.

#### Infectious Diseases.

The procedure taken with regard to infectious diseases amongst Elementary School children is as follows:—

The Head Teacher of each school notifies to the School Medical Officer daily, any case of infectious disease, actual or suspected. These cases are then followed up at home by the School Nurses and arrangements made for their exclusion from school, together with any contacts. Contact is maintained

with the children until they are finally freed for re-admission.

In major infectious illnesses such as Scarlet Fever and Diphtheria, cases are mostly removed to the Borough Fever Hospital, and all contacts are inspected by the Medical Staff before being allowed to return to school.

The following Table records the incidence of various infectious diseases amongst Elementary School children during the year, together with comparative figures for 1936:—

Disease.	Boys.	Girls.	Total 1937.	Total 1936.
Scarlet Fever	21	18	39	22
Diphtheria	2	2	4	20
Enteric Fever	-	- 1		1
Ac. Ant. Poliomyelitis		1	1	-
German Measles	1		1	5
Measles	19	17	36	629
Whooping Cough		54	106	142
Mumps		4	7	12
Chicken Pox	73	83	156	11

Scarlet Fever claimed a few victims, whilst Diphtheria was almost absent. Chicken Pox prevailed mostly in November and December, and Whooping Cough was present in moderate amount during the Spring months: other infectious diseases were small in incidence.

There were two deaths amongst the elementary school population: one from Scarlet Fever and the other from Whooping Cough complicated by Pneumonia.

No schools or classes were closed on account of infectious disease, but 2 "low attendance certificates" were issued under the Elementary Education Provisional Code, 1922, Amending Regulations No. 2, 1924—both on account of Chicken Pox.

Seven hundred and ninety-five notices were sent from the Public Health Offices to the Head Teachers of the schools excluding children for various diseases, and 635 freeing notices were also sent.

## The Borough Open-Air School.

A Special Open-Air Day School has been built for the accommodation of 60 physically defective children. The School was opened in May, 1931, and consists of a Central Administrative Block containing kitchen, larder, dining room, medical room, spray-bathroom, dressing room, blanket room and teachers' room. To the south-east of the main block, there is a classroom for infants, and to the south-west another classroom with rest-room attached. This rest-room is also used for teaching purposes. There is also a bungalow, built in 1934, near the entrance gate for the Caretaker-Gardener, whose wife acts as Cook-Housekeeper.

The meadow in which the School is situated is a pleasant one, with woodland shade at the South end.

Eighty-seven individual children attended the School during 1937, as compared with 100 during 1936; 53 were in attendance the whole year.

The average increase in weight per month amongst the 87 children referred to was 0.65 lbs. (compared with 0.72 lbs. in 1936, 0.67 lbs. in 1935, 0.61 lbs. in 1934, 0.67 lbs. in 1933, 0.57 lbs. in 1932, and 0.44 lbs. in the ordinary schools).

The average gain in weight amongst the 53 children who were in attendance the whole year was 0.63 lbs. (0.57 lbs. in 1936) per month. The lowest individual gain amongst the 53 children was 3.8 lbs., and the greatest gain 19.5 lbs. Eleven scholars gained half a stone or more. No child failed to gain weight.

The provision of this School goes far to solve the problem of dealing with the undernourished and debilitated child who cannot stand up to the strain of ordinary school life. Miss Donaldson has acted as Nurse throughout the year, spending four hours daily (9 a.m. to 1 p.m.) at the School. She supervises the children's meals, rest periods, etc., and she also gave the following treatments for various minor ailments:—

			No. of cases.	Treatments.
Skin diseases			9	80
Eye ailments			13	277
Ear ailments			19	322
Miscellaneous	(bru	ises,	of standard	
chilblains,	etc.)		91	513
Total			132	1,192
			-	

Visits were paid by the Medical Staff two or three times each week, chiefly by the Assistant School Medical Officer. Close observation was kept on each child, and factors likely to improve his or her health were carefully weighed, and put into force when decided upon.

It should be remembered that, though Tunbridge Wells is a pleasant and airy town, its school buildings in general leave much to be desired, having been designed to meet the conceptions of a past generation which had no precedent construction by which to guide itself aright: it had not then been realised that pure air, good lighting, warmth without stuffiness, and adequate ventilation were vital to the physical and mental health of growing children: these are salient characteristics of modern school architecture. There is a sharp contrast between our Open-Air School and most of our school buildings, in which so large a part of each child's life is spent. An approximation to open-air conditions is gradually becoming the normal aim of school construction in all the countries of Central and Western Europe, as well as in Britain.

## Physical Training.

Since the issue of Circular 1444 of the Board of Education, dealing with this subject, Instructors in Physical Training of both sexes have been appointed to advise the teachers in our schools upon this important branch of education. Much has been done to equip the scholars with suitable costumes and shoes for physical exercises, and to improve the environment in which the exercises are taken. Old buildings and playgrounds render this difficult in some instances.

Organised visits continued to be paid to the Corporation Indoor Baths by the senior scholars, who are admitted free of charge when bringing their own towels and in the care of a teacher. The sum of 10/- per week is paid by the Education Committee to the Baths Committee for the services of a Swimming Instructor and the sum of 1d. for each attendance during school hours. The number of such attendances during 1937 was 15,805 (14,932 in 1936).

Children whose physical condition renders drill or strenuous exercise inadvisable are notified to the head teachers at the time of inspection.

#### Provision of Meals.

With regard to the provision of meals, Tunbridge Wells is fortunate in being able to deal with the more marked cases of malnutrition amongst its school children by sending them to its Open-Air School, in which there is accommodation for 60 children and where three meals per day are given at a cost varying from 9d. per day for those who can afford it, down to nothing in cases of extreme poverty.

Under the Milk Marketing Board's Scheme, milk is supplied in sealed bottles (one-third of a pint) to school children: parents pay \$\frac{1}{2}d\$. per bottle for this milk, or, if

recommended by the School Medical Staff, payment is made in necessitous cases by the Local Education Authority. Fortyfive per cent. of all the children on the school registers had this milk in school, as compared with 41 per cent. in 1936.

The number of children provided with free milk under this Scheme by the Local Education Authority was 86 during 1937, at an approximate cost of £18 12s. 6d. In 1936, 65 children were supplied at a cost of approximately £12 0s. 11d.

### Co-operation of Parents.

Prior to the holding of routine medical and dental inspections, notices, which are sent from the Public Health Offices, are addressed and distributed by the Head Teachers, requesting the parents' attendance. The percentage of parents attending at the routine medical inspections was 77 per cent., as follows:—

Entrants ... ... 92% (93% in 1936) Second Age Group ... 83% (76% ,, ,, ) Third Age Group ... ... 54% (62% ,, ,, ) Other Routine Inspections ... 76% (72% ,, ,, )

In addition to the above, many parents attend the School Clinic with their children.

### Co-operation of Teachers.

(i) Medical and Dental Inspections.—The Head Teacher is invited to be present at these 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 cordially with the School Medical Staff in endeavouring to keep the general standard of health at a high level. I should like particularly to mention the interest and care which the Teachers have shown in connection with the supply of milk to children in schools.

- (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 and Dental Treatment.—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.

Each week the Head Teachers are notified of all appointments given to scholars to attend the Dental Treatment Clinic and also the Ophthalmic, Aural and Orthopædic Clinics: in this way they are able to assist in the keeping of these appointments.

### 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.

## Co-operation of Voluntary Bodies.

- (i) No call is made upon voluntary bodies in connection with the work of medical and dental inspection.
- (ii) In following-up mentally defective children, the Kent Voluntary Association for Mental Welfare does most useful work. A subsidy of £20 is paid annually to this Association by the Corporation.

The following report from the Secretary records the year's 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 1937.

The total number of children of school age under the supervision of the Association on January 1st, 1937, was thirty.

During the year three new cases have been received from the School Medical Officer bringing the total to thirty-three.

#### Reports.

Twenty-five reports have been rendered during the year including First Reports, Annual Reports and Special Reports in cases where continued supervision was felt to be necessary and reporting to the County Mental Deficiency Committee for Friendly Supervision was suggested.

#### Visits.

Members of the staff of the Association have paid fifty-five visits to the homes of the children and members of the local Case Committee have been in touch with ten cases, paying quarterly visits.

#### Tonbridge Special School.

As will be seen from the Table above twenty boys and girls are in attendance at the Day Special School at Tonbridge at the end of the year. A further four left during the year, suitable employment having been found for one, and three being considered unsuitable to derive further benefit from the instruction given.

It is a great pleasure to see these children at the School where they are happy in the work suited to their mental capacity and the parents in every case have expressed their appreciation of the help that is given by the staff of the school.

#### After Care.

The Association has continued to keep in touch with those cases under or over 16 years of age who have left school.

The three children mentioned above as having been transferred to the Mental Deficiency Committee for Friendly Supervision are all working, the lad has had regular employment as a garden boy since he left the school and the two girls have daily domestic work.

Of the seven children supervised for the Education Committee but attending no School, two boys are in regular work, one as a garden boy and one as a house boy at a local Nursing Home, both are well spoken of by their employers. The three boys who were excluded from the special school during the year as being too low grade to benefit from the instruction given are all at home and the parents of the younger ones, aged only 13 and 9 years respectively, are very anxious with regard to their future. The remaining two are also at home, the girl is able to do housework and the little boy aged 6, will in all probability attend the Occupation Centre later on.

Our grateful thanks are due to the voluntary helpers who attend regularly at the Occupation Centre, the members of our local Case Committee, who visit regularly and report should need for any help and advice appear to be necessary, and in particular to Miss Scott, the Chairman of the Committee, who once again arranged for a Sale in her garden, when work done by the children attending the Occupation Centres and their friends realised the sum of £15 15s. 6d.

(Signed) S. G. NUGENT.

- (iii) The local branch of the Invalid Children's Aid Association is 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. Similarly, this Association arranges for the supply of milk and eggs for children excluded from school through illness, or as contacts when the school supply of milk is not available. These activities have been of great help in the medical treatment of invalid children, and I am glad to have this opportunity of acknowledging indebtedness to the Society for this work. One hundred and sixty-four cases were dealt with in 1937, of these 36 were sent to Convalescent Homes, etc., and 22 were given nourishment at their homes or in school: some of the children assisted were under school age, but most were attending school.
- (iv) The Royal Surgical Aid Society provides letters—each of the value of five shillings—in cases where glasses have been recommended to children whose parents have been found, on investigation, to require such assistance. In 5 out of 77 cases assistance was given in 1937.
- (v) When found necessary, the Inspector of the National Society for the Prevention of Cruelty to Children has conferred with the School Medical Staff, such conferences proving of value to both parties.

#### HEALTH EDUCATION.

Copies of the magazine "Better Health," issued by the Central Council for Health Education, are distributed free to the senior scholars each month by the Local Education Authority. This magazine contains valuable information on health matters, and forms the subjects of talks given by the teachers.

In association with the National Health Campaign, posters were sent to the schools for each classroom, and leaflets were issued to the senior scholars in connection with each branch of the Campaign.

Instruction in Mothercraft was continued throughout the year at the Tunbridge Wells Child Welfare Centre, the Scholars receiving such instruction were Spring Term—Holy Trinity Girls'; Summer Term—St. James' Senior Girls', and Autumn Term—Rusthall Senior Girls' and St. Augustine's combined. The lectures were given by two members of the Child Welfare Nursing Staff, and the subject matter was as set forth in the 1936 Annual Report.

## BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

These children are brought to notice through medical inspections both at the schools and at the School Clinic, by the Health Visitors and also through the Maternity and Child Welfare Centres. In addition to these, the Head Teachers are each year requested to forward to the School Medical Officer details of all children who are (a) Partially Deaf, (b) Partially Blind, (c) Epileptic, (d) Crippled, (e) Suffering from heart disease, and (f) Dull or backward (stating the number of years retarded). These methods have proved to be adequate.

The following are details of all the Exceptional Children for whom the Local Education Authority was responsible at the end of 1937:—

(a) BLIND.—There was one partially sighted boy in a residential special school for the blind, and 3 similar cases (2 boys and 1 girl) were in attendance at elementary schools, all of whom were under observation by the Ophthalmic

Surgeon. In addition, 1 such child was not attending school.

- (b) Deaf.—Two boys who were too deaf to benefit from ordinary elementary school training, were inmates of the Brighton Institution for the Deaf and Dumb.
- (c) Mentally Defective.—Fifteen detailed examinations of children presented for mental defects were made during 1937, of which 9 were first examinations, the children being classed as follows:—

Dull and Backward ... ... 3 boys and 1 girl.

Feeble-minded ... ... 1 girl.

Physically Defective and Feeble-

minded ... ... 1 boy.

Imbecile ... ... ... 1 boy and 1 girl.

Idiot ... ... 1 boy.

Of the 6 children re-inspected, 3 were placed in the same category as when first examined, viz., 2 dull and backward and 1 feeble-minded; 2 were transferred from the dull and backward to the feeble-minded class, and 1 from the feeble-minded to the imbecile class.

The arrangements for sending feeble-minded children to the Tonbridge Special School as daily pupils, begun in the autumn of 1925, continued in use; nineteen children from Tunbridge Wells were in attendance at the end of 1937. The children are conveyed to and from the School (a distance of four and a half miles from Tunbridge Wells) by omnibus, and are accompanied by the Assistant School Attendance Officer who acts as Guide.

Besides these 19 children (11 boys and 8 girls) attending the Special School, 1 girl was attending an elementary school and 1 a private school, and 5 boys and 1 girl were at no school or institution. The following-up and home supervision of mentally defective children is undertaken by the Kent Voluntary Association for Mental Welfare, and a copy of the Association's report upon the work carried out for the Local Education Authority will be found on page 99.

- (d) EPILEPTIC.—There was, at the end of the year, one boy maintained in a residential special school for epileptics.
- (e) Physically Defective.—Under this heading at the end of the year were classed 115 children (see Table III., on page 109).

Of these, 63 were in attendance at the Open-Air School, 35 were attending elementary schools, 9 were in institutions, and 8 children were at no school or institution.

Full details of the work carried out at the Borough Open-Air School will be found on page 95.

(f) CHILDREN WITH MULTIPLE DEFECTS.—At the end of the year, there were 2 children classified under this heading, namely a boy suffering from Feeble-mindedness and Tuberculous abdominal glands attending the Tonbridge Special School, and an idiot and crippled boy at no school.

#### NURSERY, SECONDARY AND CONTINUATION SCHOOLS.

Nursery classes are held at four of the Infants' Schools for children 3-5 years, and a few children under 5 years of age attend at other infants' departments also. There is no Nursery School in the Borough, which is widely scattered, and in which individual infants' schools have small numbers in attendance.

The arrangements for Medical Services in the Secondary and Continuation Schools are undertaken by the Kent County Council.

#### EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

One hundred certificates (97 boys and 3 girls) were granted to school children under the Employment of Children Bye-laws during 1937—the largest number in the past ten years.

Newsagents' De	liveri	es (inclu	ding	l girl)		44
Greengrocers'	,,	( ,	,	1 ,, )		19
Grocers'	,,					10
Butchers'	,,					6
General Stores	,,					6
Bakers'	,,					3
Miscellaneous	,,,					5
Houseboys (incl	uding	1 Hous	egirl)			7
					-	_
Total						100

The physical condition of the children applying for medical certificates has been good, and in only one instance was a certificate refused on medical grounds to an applicant.

In July, 1935, arrangements were made to supply the Juvenile Employment Bureau of the Kent County Council with a medical report on each child leaving school at the age of fourteen years, and 247 such reports were made during the year.

#### PARENTS' PAYMENTS.

The fees charged for treatment by the School Dental Surgeon are one shilling for extractions under gas, and sixpence for other treatment. These sums are payable at the time of treatment, but are remitted in necessitous cases. The sum of £36 6s. 0d. was collected in this way during 1937.

With regard to operations for tonsils and/or adenoids, the parents are interviewed by a member of the Medical Staff and a contribution is fixed according to the means of the parents. If however, the parents contribute to the Association of Hospital Contributors, they are not requested to make any contribution, as the hospitals have agreed to charge the Education Committee half fees for the operation in such cases. A similar arrangement with the Kent and Sussex Hospital only, applies to the Pea-nut Hospital Honey-Comb Scheme. The average contribution made by the parents in respect of the 33 operations carried out during 1937 was four shillings and sevenpence.

No charge is made for the treatment of minor ailments, except in aural cases requiring prolonged treatment, a charge of one shilling being then made: and in orthopædic cases, for treatment at the Remedial Exercises Class, a maximum charge of threepence per attendance.

#### SPECIAL INQUIRIES.

There were no special Inquiries conducted during the year under review.

#### STATISTICAL TABLES.

The six Statistical Tables required by the Board of Education are appended, and these give detailed information on the work done in the various branches of the School Medical Service. In addition, a copy of the Board of Education Form 307M. is appended.

#### TABLE I.

### Medical Inspections of Children attending Public Elementary Schools.

A.—ROUTIN	E ME	EDICAL	INSI	PECTI	ONS.		
Number of Inspections in the	preso	ribed G	roups-	_			
Entrants							316
Second Age Group		***	***			***	320
Third Age Group							276
Total							912
Number of other Routin	e Insp	pections		***			67
Grand Total				•••			979*
В.—ОТ	HER	INSP	ECTIO	NS.			
Number of Special Inspections							1,814
Number of Re-Inspections	***	***		***	***		3,426

<sup>\*</sup> This figure includes 2 Routine Medical Inspections carried out by private medical attendants.

... ... 5,240

#### C .- CHILDREN FOUND TO REQUIRE TREATMENT.

NUMBER OF individual children FOUND AT Routine MEDICAL INSPECTION TO REQUIRE TREATMENT (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Group.	For defective vision (exclud- ing squint).	For all other conditions re- corded in Table II A.	Total.
(1)	(2)	(3)	(4)
Entrants	_	56	56
SECOND AGE GROUP	15	47	62
THIRD AGE GROUP	11	37	47
Total (Prescribed Groups)	26	140	165
OTHER ROUTINE INSPECTIONS	2	11	12
GRAND TOTAL	28	151	177

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1937.

						ROUTINE I	NSPECTIONS	SPECIAL IN	SPECTIONS.
						No. of	Defects.	No. of	Defects.
	DEFECT	OR I	DISE	ASE.		Requiring Treatment.	Requiring to be kept under ob- servation, but not requiring Treatment (3)	Requiring Treat- ment.	Requiring to be kept under ob- servation, but not requiring Treatment (5)
SKIN-							1		
(1)	Ringworm	-Scalp Body				=	=	7	=
(3)	Scabies Impetigo	***	***	***	***		=	6 26	_
(5)	Other Dise	ases (N	on-T	ubercu	ilous)	6	4	39	2
	TOTAL	(Heads	1 to	5)		6	4	78	2
EYE-									
(6)	Blepharitis		***	***	***	1	-	16 19	=
(8)	Keratitis					-	-	_	-
(10)	Corneal Or Other Con	ditions	(excl	luding	Defec-				
	tive Vi	sion and	1 Squ	uint)		2		52	1
	TOTAL	(Heads	6 to	10)		3	_	87	1
(11)	Defective Squint			7.		28	5	21 2	1
EAR-						0			
(13)	Otitis Med			***		7	2	8 25	2
(15)	Other Ear	Disease	es			4	3	48	5
(16)	Chronic To	nsillitis	only	y		23	117	62	14
(17)	Adenoids o Chronic To	nsillitis	and	Adend	oids	32	42	24	4
(19) (20) Ex	Other Cond		Ğı	ANDS	(Non-	6	16	42	3
	Tubercule EFECTIVE SP	ous)	***			1	99	16	21
	AND CIRCULA			***			-	-	1
Hear (22)	t Disease : Organic					-	12	3	2
(23)	Functional					2	2	-	
LUNGS-	Anaemia	111	111	***	***	3	1	3	-
(25) (26)	Bronchitis Other Non-	Tubere	nlon	e Diser		6	13	9 7	
TUBERCU	JLOSIS-	Tubere	diod	S Disci	1303 ,,,				
	onary: Definite					_		_	_
(28)	Suspected Pulmonary:					-	-	-	-
(29)	Glands		.,,			-	1	4	6
(30)	Bones and Skin	Joints				= 1	_	1	_
(32)	Other Form					-	_	1	_
	TOTAL	(Heads	29	to 32)		_	1	6	6
	SYSTEM-					100000			
(33)	Epilepsy Chorea					_	1 2	1 2 5	2 5
(35) Deformi	Other Cond					3	5	5	5
(36)	Rickets					1	1	-	-
(37)	Spinal Curv Other Forn					9 4	8 16	12	1
	THER DEFECT	SANDI	)ISE	ASES (e.	xclud-				
	ing Nutrit Dental Dis-		nclea	anlines:	s and	41	47	600	61
	TOTAL					185	403	1064	132
	TOTAL			***		100	100	1004	102

#### TABLE II.—continued.

B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Age-groups	Number of Children		A ellent)		B rmal)	(Sligh	tly formal)		D ad)
	Inspected	No.	%	No.	%	No.	%	No.	%
Entrants Second Age-group Third Age-group Other Routine In-	316 320 276	29 21 26	9.2 6.6 9.4	225 230 203	71.2 71.9 73.6	62 69 47	19.6 21.5 17.0	=	=
spections	67	6	9.0	51	76.1	10	14.9	-	-
TOTAL	979	82	8.4	709	72.4	188	19.2	-	-

#### TABLE III.

#### RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

#### BLIND CHILDREN.

A blind child is one who is "too blind to be able to read the ordinary school books used by children."

At Certified Schools for the Bli	nd	***	 	-
At Public Elementary Schools			 	-
At Other Institutions		***	 	
At no School or Institution			 	=
Total			 	

#### PARTIALLY SIGHTED CHILDREN.

In this Section only children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially sighted, have been entered.

At Certified Schools for the B At Certified Schools for the Pa		sighted		 1
At Public Elementary School	s		***	 3
At other Institutions	***	***		 -
At no School or Institution		***		 1
Total				 5

#### DEAF CHILDREN.

A deaf child is one who is "too deaf to be taught in a class of hearing children in an elementary school."

At Certified Schools for the Dea	af	***			2
At Public Elementary Schools					
At other Institutions		***		111	
At no School or Institution					-
Total			9		2

#### TABLE III.—continued.

PARTIALLY DEAF CHILD		, be to	al t	lun in	
In this section children who can appropria school for the partially deaf, have been enter		be tai	ight on	ily in	
At Certified Schools for the Dea		Doof			-
At Certified Schools for the Part At Public Elementary Schools	iany .	Dear	***	***	_
At other Institutions					_
At no School or Institution					-
Total					-
MENTALLY DEFECTIVE CHI	LDRE	N.			
Feeble-Minded Children.—Mentally children who, not being imbecile and not be	Defe ing m	ctive c	ull or l	back-	
ward, are incapable by reason of mental de benefit from the instruction in the ordinary Pu but are not incapable by reason of that defect instruction in Special Schools for mentally de	of rec	Element eiving	tary Sc benefit	hools	
instruction in Special Schools for mentally de	lectiv	e cinidi	en.		
At Certified Schools for Mentall	v Dei	fective	Childre	en	18
At Public Elementary Schools				S	1
At Other Institutions					1
At no School or Institution				***	6
Total					26
EPILEPTIC CHILDREN.—CHILDREN SUFFERING  In this part of the Table only thos who are epileptic within the meaning of the not being idiots or imbeciles, are unfit by re to attend the ordinary Public Elementary S	e chi Act,	ldren a i.e., ch of seve	re incl	uded who,	
At Certified Special Schools					1
At Public Elementary Schools					-
At no School or Institution				***	_
Tre no oction of Institution					
Total					1
Physically Defective Ch	ILDRI	EN.			
A.—TUBERCULOUS CHILI	OREN.				
<ol> <li>Children suffering from Pulmonary Tuber and intra-thoracic glands).</li> </ol>	rculos	is (inch	iding p	oleura	
At Certified Special Schools					_
At Public Elementary Schools					
At Public Elementary Schools At other Institutions					= 1
At Public Elementary Schools					<u>-</u>
At Public Elementary Schools At other Institutions					- - 1

#### TABLE III.—continued.

	en suffering from Non-Pulmon ory includes tuberculosis of all n in $(I)$ above).				(this those	
	At Certified Special Schools					10
	At Public Elementary Schools At other Institutions	***	***			12
	At no School or Institution					7
	Total					30
	B.—DELICATE CHILDR	EN				
	ction is confined to children who that they should be specially sele hool.					
	At Certified Special Schools					54
	At Public Elementary Schools At other Institutions		***			21
	At no School or Institution	***			***	
	The tro Democr of Thistitude					
					1000	75
diagnosed as are suffering	C.—CRIPPLED CHILDRI dection is confined to childre stuberculous and in need of treatm from a degree of crippling sufficient with a child's normal mode of life.	en (onent for	r that c	lisease)	who	7.0
liagnosed as are suffering	c.—CRIPPLED CHILDRI section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools At other Institutions	en (on ent for iently	ther r	than t	hose	1 1 1
diagnosed as are suffering	c.—CRIPPLED CHILDRI section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools	en (onent for iently	ther that c	than t lisease) to inte	those who rfere	1 1 1 1
diagnosed as are suffering	c.—CRIPPLED CHILDRI section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools At other Institutions	en (onent for iently	ther that consevere	than t lisease) to inte	those who rfere	1 1 1 1 1 4
This Se	c.—CRIPPLED CHILDRI Section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution	en (of ent for ently	ther that c severe	than thisease) to inte	chose who refere	1 1 1 1
This Se	c.—CRIPPLED CHILDRI section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution  Total  D.—CHILDREN WITH HEART ction is confined to children in spared to certify that they are inceed of receiving proper benefit froblic Elementary Schools  At Certified Special Schools	en (of ent for ently	ther that c severe	than thisease) to inte	chose who refere	1 1 1 1 1 4
This Se	c.—CRIPPLED CHILDRI section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution  Total  D.—CHILDREN WITH HEART ction is confined to children in spared to certify that they are incept of receiving proper benefit froblic Elementary Schools At Certified Special Schools At Public Elementary Schools At Public Elementary Schools	en (of ently of the control of the c	ther r that c severe	than thisease) to inte	chose who orfere	1 1 1 1 4
This Se	C.—CRIPPLED CHILDRI Section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution  Total  D.—CHILDREN WITH HEART ction is confined to children in spared to certify that they are inceet of receiving proper benefit froblic Elementary Schools At Certified Special Schools At Public Elementary Schools At Other Institutions  Total	en (of ent for	ther r that c severe	than thisease) to inte	chose who orfere	1 1 1 1 1 4
This Se	c.—CRIPPLED CHILDRI section is confined to childre tuberculous and in need of treatm from a degree of crippling sufficient a child's normal mode of life.  At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution  Total  D.—CHILDREN WITH HEART ction is confined to children in spared to certify that they are incept of receiving proper benefit froblic Elementary Schools At Certified Special Schools At Public Elementary Schools At Public Elementary Schools	en (of ent for	ther r that c severe	than thisease) to inte	chose who orfere	1 1 1 1 4

#### TABLE III.—continued.

#### CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Information is only given in respect of children suffering from any combination of the following types of defect :—

Blindness (excluding partially sighted children).
Deafness (excluding partially deaf children).
Mental Defect (Feeble-minded).
Severe Epilepsy.
Active Tuberculosis.
Crippling (as defined in Section C above).
Heart Disease.

Combination of Defect.	At Certified Special Schools.	At Public Elemen- tary Schools.	At other Institu- tions.	At no School or Institu- tion.	Total.
Feeble-minded and Tuberculosis Crippling due to Idiocy	1	=	=	-	1

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER, 1937.

# TREATMENT TABLES.

GROUP I.-MINOR ALLMENTS (excluding Uncleanliness, for which see Table VI.).

Discuss or Defeat	Number of Defects tr	Number of Defects treated, or under treatment during the year.	nent during the year.
(1)	Under the Authority's Scheme.	Otherwise.	Total.
Skin-			
Ringworm-Scalp— (i.) X-Ray Treatment	1	1	1
	1	-	1
: : :	10	1	52
Scabies		1	9
Impetigo	69	00	7.5
Other skin disease		10	47
Minor Eye Defects-			
(External and other, but excluding cases falling in Group II.)	158	01	160
Minor Ear Defects		6	168
ninor injuries, bruises, sores, chilblains, el		29	1014
Total	1419	53	1472

TABLE IV.-continued.

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

with.	Total.	157	16	173	83
No. of Defects dealt with.	Otherwise.	00	01	9	
No. o	Under the Authority's Scheme.	154	14	168	80
		:	:	:	::
		::	:	:	11
		:	oup I.)	:	::
		:	l in Gro	:	::
		:	ecorde	:	::
		:	those r	:	::
		(	luding	:	ere :::
		squint	es (exc	:	acles w
		luding	f the ey	:	n spect
		Errors of Refraction (including squint	Other defect or disease of the eyes (excluding those recorded in Group I.)	Total	No. of Children for whom spectacles were  (a) Prescribed  (b) Obtained

TABLE IV.-continued.

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

	oer treate		10
	Total number treate		165
	Received other forms of Treatment.		20
		(iv)	60
	Total.	(iii)	154
	To	(ii)	ಣ
nt.		(3)	1
Received Operative Treatment.	n the	(iv)	00
rative 1	Under the Authority's By Private Practitioner or Scheme, in Clinic Hospital, apart from the or Hospital.  Authority's Scheme.	(iii)	16
d Ope	Private I ospital, ap Authority	(ii)	00
Receive	By Pr Hosp Au	(E)	ı
	ority's inic	(iv)	1
	r the Authorheme, in Clion Hospital	(iii)	138
	der th	(i) (ii)	1
	Unic	18	1

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and a

. (iii) Tonsils and adenoids. (iv) Other defects of the nose and throat.

TABLE IV .- continued.

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

F	number treated	28
	Non-residential treatment at an orthopædic clinic.	-
Otherwise. (2)	Residential treatment without education.	I
	Residential treatment with education.	m
cheme.	Non-residential treatment at an orthopædic clinic.	75
Under the Authority's Scheme.	Residential treatment without education.	61
Under t	Residential treatment with education.	1
		Number of children treated

### TABLE V.

DENTAL INSPECTION AND TREATMENT.

302	341	1843	530	2133	686	3058	678	166	743
11	:	:	:	:	::	:	tions	::	:
::	:	:	:	:	. : :	:	extract	::	:
::	:	:	:	:	::	:	tics for	::	:
::	: 1	:	:	:	::	:	næsthe	::	:
1::	:	:	:	:	::	:	neral a	::	:
Half-days devoted to: Inspection Treatment	Total	Fillings:— Permanent teeth	Temporary teeth	Total	Extractions:— Permanent teeth Temporary teeth	Total	Administrations of general anæsthetics for extractions	Other operations:— Permanent teeth Temporary teeth	Total
(5)		(9)			<u>E</u>		(8)	(6)	
	145 142 917	244	176	249 265	99	256	2259	1938 1324 2380	
		255	211	249	2003	256		1938 1324 2380	
Dentist:	:					- 1	2259	:::	
y the Dentist:	::	:::	: :	::	: :	:	2259	atment	
(1) Number of Children inspected by the Dentist: Aged:	::		:::	::	: :	:	2259	:::	

## TABLE VI.

	:	
	ge number of visits per school made during the year by the School Nurses	
ILIONS.	School	
COND	by the	. 4
MINOUS	ne year	
D VER	aring th	
ESS AN	nade d	
UNCLEANLINESS AND VERMINOUS CONDITIONS	school r	11 11 1
ONCE	its per	
	r of vis	
	numbe	
	Se e	

3 8,024 134

: 三角角层 (v.)

: : : : : : : : : : Authority .... Number of cases in which legal proceedings were taken:—

(a) Under the Education Act, 1921 ....

(b) Under School Attendance Bye-Laws ....

: :

#### Mental Deficiency (Notification of Children) Regulations, 1928.

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31st DECEMBER, 1937, BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

#### Total number of children notified 5.

#### ANALYSIS OF THE ABOVE TOTAL.

	DIAGNOSIS.	BOYS.	GIRLS
1.	(i) Children incapable of receiving benefit or further benefit from instruction in a Special School:  (a) Idiots  (b) Imbeciles  (c) Others  (ii) Children unable to be instructed in a Special School without detriment to the interests of other children:	1 -	<del>-</del> 1
	(a) Moral defectives (b) Others		=
2.	Feeble-minded children notified on leaving a Special School on or before attaining the age of 16	1	2
3.	Feeble-minded children notified under Article 3, i.e., "special circumstances" cases Note.—No child is notified under Article 3 until the Board have issued a formal certificate (Form 308 M) to the Authority.	-	-
4.	Children who in addition to being mentally defective were blind or deaf	-	_
	GRAND TOTAL	2	3

	Rout	Routine Medical Inspections.	dical		Medical Re	†Medical Re-inspections.		~
	Boys.	Girls.	Total.	Cured.	Improved.	Improved. Stationary. Worse.	Worse.	Total.
St. James, Infante	0.0	9	0	9	***			1
	24	Q#	2 5 2 5 2 5 2 5 2 5 5 5 5 5 5 5 5 5 5 5	10	7 0	21	4	276
James' Sen. Girls	1	58	000	1	,			
Barnabas Jun. Mixed	40	39	79	26	333	88	00	105
St. Barnabas Infants	35	25	57	9	4	4	-	15
H .	=	15	26	00	7	ಣ	1	18
Christ Church Jun. Mixed and Infants	27	19	46	13	7	14	00	37
Iving Charles' Sen. Boys	25	1	252	6	18	13	01	45
Murray House Sen. Girls	1	89	89	13	17	15	4	49
St. Peter's Jun. Mixed	28	19	47	13	6	17	00	47
St. Peter's Infants	10	10	20	20	9	20	1	17
St. John's Jun. Mixed	16	10	26	20	67	17	-	31
Down Lane Infants	31	36	67	00	16	24	14	62
St. Luke's Infants	2]	30	51	55	32	50	4	108
Mixed	9	12	18	12	26	22	6	69
Koyal Victoria Sen. Boys	51	1	51	7	00	6	1	19
Basinghall Infants	19	55	41	0.1	60	7	j	12
Holy Irmity Sen. Girls	1	55	55	_	13	21	63	43
: ::	73	1	73	00	25	45	7	85
Rusthall Girls	1	67	67	14	21	20	03	57
Rusthall Infants	44	30	74	18	17	59	-	65
Totals	517	492	1,009*	226	295	377	77	975

\* This figure includes children specially inspected in the schools in addition to the Routine Medical Inspections.

† It should be noted that children who are known to have had treatment are not included in the Re-inspections at the Schools.





