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County Borough of Tynemouth.

THIRTY-THIRD

ANNUAL REPORT

OF THE

Medical Officer of Health,

with the Fifth Annual Report upon the

Medical Inspection of School Children.

1913.

INDEX.

County Borough of Tynemouth
PUBLIC HEALTH COMMITTEE.

Chairman :—Councillor J. H. TEBB.

Vice-Chairman :—Counc. JOHN T. PORTER.

The Mayor, Councillor G. D. GASCOIGNE.

Alderman	BOLTON	Councillor	HUTCHINSON
„	ELLIS	„	MEIKLE
Councillor	MAUD BURNETT	„	MIDDLETON
„	COATS	„	STEELE
„	DOUGLASS	„	TELFORD
„	FRATER	„	THIRKLE
„	GIBSON	„	WAINE.
„	J. H. HOGG		

STAFF.

Medical Officer of Health, Administrative Tuberculosis Officer, and Medical Officer to the Education Authority :

James A. Hislop, M.D. (Brux.); L.R.C.P.; D.P.H.

Assistant Medical Officer of Health and Tuberculosis Officer :

William Yeates, L.R.C.P.; L.R.C.S.; (Edin.)

Chief Sanitary Inspector and Inspector under the Food and Drugs Acts :

Gibson Edwards, A.R.S.I.

Assistant Inspectors :

William L. McQueen, A.R.S.I. James Stanley, A.R.S.I.

Superintendent of Cleansing Department :

Thomas C. Storer.

Matron of Infectious Diseases Hospital :

Miss M. Ewart.

Tuberculosis Nurse :
Miss Mills.

Health Visitor :
Miss Sweett.

Clerks :

Albert R. Forsyth, Chief Clerk.

Stanley H. Moffat, Clerk. Eustace Bavidge, Junior Clerk.

Disinfector :—Henry Hodgson.

The Staff engaged in School Work will be found in the Report on the Medical Inspection of School Children under Part IV.

PUBLIC HEALTH OFFICE,

TYNEMOUTH,

30TH APRIL, 1914.

To the Mayor, Aldermen and Councillors
of the County Borough of Tynemouth.

MR. MAYOR, MISS BURNETT AND GENTLEMEN,

I have the honour of submitting to you my fifth Annual Report, being the 33rd report presented to you by successive Medical Officers.

The first three parts deal with Vital Statistics Records of Disease and General Sanitary Administration, while the report upon the Medical Inspection of School Children, prepared by Dr. McConnell, will be found under Part IV.

During the year the Council resolved to proceed with a scheme for the institutional treatment of tuberculosis to include all classes of the community. The Medical Officer of Health was appointed Chief Administrative Tuberculosis Officer, and Dr. Yeates began duty on 1st July as Clinical Tuberculosis Officer with Miss Mills as Tuberculosis Nurse. The report prepared by Dr. Yeates will be found on page 30.

I have also to record the inauguration of the "Guild for Mothers and Babies," at Drury House, with a branch at Milbourn Place, a voluntary institution, which will be of great value to the Health Department, and is under the presidency of Mrs. Jos. Robinson, with Dr. Amy Robinson as superintendent, assisted by Miss Sweett, Health Visitor.

Miss Councillor Burnett has also instituted a Day Nursery at Drury House which has been taken advantage of by many mothers.

The death rate during the year is the lowest yet recorded and the tuberculosis mortality rate is also lower than any previous year on record.

I would take this opportunity of thanking the Chairman and Members of the Health Committee for the assistance and courteous consideration which they have extended to me throughout the year, also to my colleagues and members of the staff of the Health Department as well as to other corporation officials, for their valuable and ready help at all times.

I have the honour to remain,

Your obedient servant,

JAMES A. HISLOP,

Medical Officer of Health.

Statistical Summary.

1913.

Area of the Borough (including 84 acres of inland water)	4,372 Acres.
Families or Separate Occupiers (Cenus 1911)	12,783
Population (Census 1901)	51,366
Population (Census 1911)	58,816
Population (Estimated to 30th June 1913)	60,601
Births	1,748
Birth Rate per 1,000 of the Population	28·84
Deaths	951
Death Rate per 1,000 of the Population	15·6
Death Rate from Zymotic Diseases	1·6
Infantile Mortality Rate	123
Death Rate from Pulmonary Tuberculosis	0·85

Legal Summary.

LOCAL ACTS.

Tynemouth Improvement Act	1866
Tynemouth Corporation Water Act	1897
do. do. do.	1898
do. do. do.	1907
Tynemouth Corporation Act	1910

ADOPTED ACTS.

	Date of Adoption.
Public Library Act	13th July, 1868.
Infectious Diseases (Notification) Act 1889 ...	... 23rd October, 1889.
Infectious Diseases (Prevention) Act 1891 ...	11th September, 1891.
Public Health Acts Amendment Act 1890 :—	
Part II.	23rd March, 1892.
Part III.	9th February, 1891.
Part IV.	21st April, 1896.
Public Health Acts Amendment Act 1907 :—	
Part II. Sections 15 to 27 and 29 to 33 ...	28th August, 1909.
Part III. Sections 34 to 47 and 49 to 51 ...	
Part IV. Sections 52 to 65 and 67, 68 ...	
Parts V., VI. and X.	
(Certain adaptations were made by the Local Government Board with regard to Sections 25, 27, 35, 38, 59, 75 and 92)	
Part VII. Sections 79 to 86	1st February, 1909.
Part VIII. Sections 88 to 90	
Part IX.	
Notification of Births Act 1907	... 1st May, 1912.

I.

Vital Statistics.

VITAL STATISTICS.

POPULATION.

THE POPULATION of the Borough at the 30th June, 1913, as estimated by the Registrar General was 60,601.

The *natural* increase of population or the excess of the number of births over deaths was 797.

At the census of 1911 the population was 58,816 and the number of families or separate occupiers was 12,783 which gave an average of 4·5 persons per family or occupier.

THE AREA of the Borough is 4,288 acres, exclusive of 84 acres covered by inland water.

For statistical purposes the Borough has been hitherto divided into six districts but the "Tynemouth Corporation Act, 1904," which came into operation during the last intercensal period, provided for the redivision of the Borough into 9 wards. At the last census the population was enumerated as located in these wards and statistical records are now based upon the population in wards instead of in districts as formerly.

DISTRIBUTION AND DENSITY OF POPULATION.

WARDS.	Population estimated to 30th June, 1913.	Area in Acres.	Persons to the Acre.
Central	5151	30	171·70
Collingwood	8007	2299	3·48
Dockwray	6711	82	81·84
Linskill	9172	314	29·21
Milbourn	5779	114	50·69
Percy	6530	762	8·56
Preston	6043	564	10·71
Rudyerd	5598	41	136·53
Trinity	7610	82	92·80
Borough of Tynemouth	60601	*4288	14·13

* Exclusive of 2 acres in Percy Ward, 81 in Collingwood Ward, and 1 in Preston Ward, which are covered by water.

From the table it will be seen that the average density of population was 14·13 persons per acre, but varied in different wards from 171·7 persons per acre in Central Ward to 3·48 in Collingwood Ward.

BIRTHS.

The number of births registered during the year was 1,766 of which 1,677 were legitimate and 89 illegitimate.

The transferable births received from the Registrar General were :—

		Inward Births.		Outward Births.
Legitimate	Male	1	...	1
	Female	0	...	4
Illegitimate	Male	0	...	9
	Female	0	...	5

It is necessary, therefore, to add one inward transfer, and to deduct 19 outward transfers, from the total births 1,766, in order to arrive at the actual number to be credited to Tynemouth. This will give a *nett total* of 1,748 births and a *birth rate* of 28·84 per 1,000 of the population.

901 of these births were males and 847 were females.

The births with corresponding rates were distributed as follows:—

Births and Birth Rates.

Ward.	Births.	Birth Rate per 1,000 of Population.	No. of Illegitimate Births.	Percentage of Illegitimate Births to Total Births.
Central ...	162	31·4	3	1·85
Collingwood ...	263	32·8	15	5·70
Dockwray ...	260	38·7	12	4·61
Linkskill ...	187	20·3	7	3·74
Milbourn ...	226	39·1	10	4·42
Percy ...	109	16·6	6	5·50
Preston ...	147	24·3	6	4·08
Rudyerd ...	170	30·3	11	6·47
Trinity ...	223	29·3	5	2·24
Inward Transfer ...	1	—	—	—
Borough of Tynemouth	1748	28·84	75	4·29
Mean of Ten Years— 1903–1912 ...	1786	32·21	68	3·77

The highest birth rates occurred in Milbourn and Dockwray Wards and the lowest in Percy Ward.

The birth rate of Tynemouth is considerably higher than that of England and Wales and of the Great Towns, as shown by the following figures :—

Period.	England & Wales.	Great Towns.	Tynemouth.
1901–1905(Average)	28·1	28·9	33·5
1906–1910 (Average)	26·0	26·5	32·1
1911	24·4	25·6	28·0
1912	23·8	24·9	28·9
1913	23·9	25·1	28·8

The birth rate is somewhat lower than last year and shows a marked falling off as compared with the two preceding quinquennial periods given in the table. The nett births show an increase of 14 when compared with 1912.

ILLEGITIMACY.—There were 89 illegitimate births, but 14 of these have been transferred by the Registrar General to other districts, leaving 75 as the total illegitimate births belonging to the Borough. The percentage of illegitimate to nett total births is therefore 4·29 per cent. This is in the proportion of 957·094 legitimate and 42·906 illegitimate births in every 1,000. The highest percentage of illegitimate births occurred in Collingwood, Percy, and Rudyerd Wards.

DEATHS.

The total number of deaths registered within the Borough was 974, but for comparative purposes the following corrections require to be made :—

(1) Deaths of Residents Registered Outside the Borough. (Transferred by Registrar-General).

Place of Death.	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total
Royal Victoria Infirmary, Newcastle-on-Tyne..	1	3	4	2	10
County Asylum, Morpeth	9	5	2	2	18
Fleming Memorial Hospital, N'castle-on-Tyne ...	2	—	—	—	2
Poplar Hospital	1	—	—	—	1
Seamen's Hospital, West Ham	1	—	—	—	1
Darlington Hospital...	1	—	—	—	1
Royal Albert Institution, Lancaster	1	—	—	—	1
Walker Accident Hospital	1	—	—	—	1
Sedgefield Asylum	—	1	—	—	1
South Shields Workhouse Infirmary	—	1	—	—	1
Ingham Infirmary, South Shields...	—	—	—	1	1
City Infectious Diseases Hospital, Walker ...	—	1	—	—	1
Newcastle (2), Blyth (2), Whitley Bay, Hexham, Newport Mon., Bournmouth, South Shields, Harrogate, Great Yarmouth, Longbenton, Wallsend and Faversham (1 each).	5	2	2	5	14
Total ...	22	13	8	10	53

(2) Deaths of Non-Residents Registered Within the Borough.

Place of Death.		No.
Tynemouth Victoria Infirmary		5
Tynemouth Union Workhouse		57
Private Residence		1
Public Places or Buildings		6
Drowned	At Sea	2
	In Dock	2
	In River	1
Accidents on Board Ship		2
	Total	76

It is necessary, therefore, to add 53 deaths of residents registered outside the district to, and deduct 76 deaths of non-residents registered in the district from the total deaths 974, registered within the Borough, in order to arrive at the actual number to be credited to Tynemouth.

The *nett deaths* were, therefore, 951, which is equal to a death rate of 15·6 per thousand of the population and is the lowest death rate yet recorded.

192 deaths occurred in Public Institutions in the Borough, and the following figures show the distribution of these deaths and the number of non-residents who died in the various institutions.

Institutions.	Deaths.	Deaths of Non-Residents.
Victoria Jubilee Infirmary	38	5
Tynemouth Union Workhouse	141	57
Moor Park Hospital	13	—
	192	62

It will be seen from the table showing the comparative death rates, that the death rate for Tynemouth is gradually falling, although higher than that for England and Wales and that of the Great Towns.

Comparative Death Rate per 1,000 in Previous Years.

Period.	England & Wales.	Great Towns.	Tynemouth.
1901–1905(Average)	15·9	17·2	19·1
1906–1910(Average)	14·6	15·2	17·0
1911	14·6	16·4	15·7
1912	13·3	14·6	16·0
1913	13·7	14·3	15·6

The following table shows the total deaths and death rates distributed according to the ward in which they occurred :—

DEATHS AND DEATH RATES IN WARDS.

WARDS.	Total Deaths.	Death Rate per 1,000 of Population.
Central	106	20·57
Collingwood	107	13·36
Dockwray	130	19·37
Linskill	97	10·57
Milbourn	115	19·89
Percy	89	12·25
Preston	105	17·37
Rudyerd	117	21·07
Trinity	94	12·35
Borough of Tynemouth ...	951	15·69
Mean of 10 years—1903-1912...	977	17·66

The highest death rate was recorded in Rudyerd Ward and the lowest in Linskill Ward. The death rate for the whole Borough shows a decrease of 1·9 per thousand as compared with the average rate of the previous ten years.

THE DEATHS QUARTER BY QUARTER WERE :—

PERIOD.	Number of Deaths.	Death Rate per 1,000.
First Quarter	259	17·09
Second Quarter	198	13·06
Third Quarter	231	15·24
Fourth Quarter... ...	263	17·35

The increase in the number of deaths recorded during the first quarter of the year was, in a great measure, due to the deaths which occurred from respiratory diseases, and in the last quarter to deaths from diarrhœa.

The infantile deaths during the 1st quarter were 43, 2nd quarter 39, 3rd quarter 65, and 4th quarter 68.

MORTALITY AT DIFFERENT AGES.—The mortality rates at different age groups per 1,000 of the population were :—

Deaths.	Age Group.	Rate per 1,000 of Population.
215	Under 1 year	3·55
106	1 to 5 years	1·75
80	5 to 25 years	1·32
314	25 to 65 years	5·18
236	65 years and upwards ...	3·89
951	All Ages..	15·69

INFANTILE MORTALITY.—There were 215 deaths of children under 1 year of age, which is in the proportion of 123 deaths to every 1,000 children born, as compared with an average of 136 for the previous ten years.

The following are the infantile mortality rates for Tynemouth compared with those of the Great Towns and England and Wales for the last ten years.

Comparative Infantile Mortality Rates.

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Tynemouth ..	152	159	151	122	138	127	125	123	102	123
Great Towns ..	160	149	155	127	128	118	115	140	101	117
England & Wales	146	128	133	118	121	109	106	130	95	109

The rate for the year is the same as that for 1911. Both summers were warm and dry, and the increase in deaths from diarrhœa accounts partly for the increased rate as compared with 1912, which was cold and wet. The number of premature births and deaths from marasmus also show a marked increase.

The causes of death during 1913 and the previous four years were as follows :—

Cause.	1913	1912	1911	1910	1909
Common Infectious Diseases	4	11	10	12	13
Diarrhœal Diseases ...	39	16	41	24	22
Wasting Diseases ...	79	66	84	92	112
Tuberculous Diseases ...	11	3	10	6	5
Other Causes	82	81	59	90	87
Totals...	215	177	204	224	239

Of the deaths resulting from infectious disease the causes were, chicken-pox, 1 ; scarlet fever, 1 ; whooping cough, 2.

Diarrhœal diseases caused 89 deaths.

Wasting diseases which include deaths resulting from premature birth were accountable for 79 deaths.

Of the infants who died during the year 26, or 12·0 per cent. of the the total infantile deaths, lived less than 24 hours, and 62, or 28·8 per cent. lived less than one week.

The Notification of Births Act came into force on 1st May, 1912, and Miss Mills was appointed Health Visitor to assist in carrying out the provisions of the Act. On 1st July, 1913, Miss Mills was appointed Tuberculosis Nurse, and Miss Sweett took up her duties as Health Visitor. The work accomplished by the Health Visitor will be found on page 45 under Infant Hygiene.

II.

Records of Disease.

RECORDS OF DISEASE.

ZYMOTIC DISEASES.

The principal Zymotic Diseases commonly recognized are seven in number, namely, Smallpox, Scarlet Fever, Diphtheria, Continued Fever, (including Typhoid or Enteric and Typhus), Measles, Whooping Cough and Epidemic Diarrhœa. The following table shows the deaths from these diseases and the mortality rate per 1,000 of the population, distributed according to the Wards in which they occurred.

Zymotic Deaths and Mortality Rates.

Wards.	Deaths from Seven Chief Zymotic Diseases.	Mortality Rate per 1,000.
Central	2	0·39
Collingwood	14	1·75
Dockwray	14	2·09
Linskill	8	0·87
Milbourn	20	3·46
Percy	8	1·23
Preston	11	1·82
Rudyerd	12	2·14
Trinity	8	1·05
Borough of Tynemouth ..	97	1·60

The mortality rate was lowest in Central Ward and highest in Milbourn Ward. The high rate in Milbourn Ward was due to deaths from whooping cough and diarrhœa. The rate for the Borough as a whole is slightly higher than last year owing to the increase of the number of deaths from scarlet fever and diarrhœa.

Mortality Rates per 1000 since 1904.

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Deaths	97	74	138	98	81	71	100	96	78	97
Rates	1·81	1·35	2·50	1·75	1·43	1·23	1·71	1·60	1·34	1·60

The diseases to which the Infectious Diseases (Notification) Act, 1889, applies are :—Smallpox, Cholera, Diphtheria, (including Membranous Croup), Erysipelas, Scarlet Fever, and the fevers known by any of the following names :—Typhus, Typhoid, Enteric, Relapsing, Continued, Puerperal, Cerebro-Spinal and Acute Poliomyelitis.

The number of notifications received from medical practitioners during the year was 418, an increase of 90 on the previous year. The increase was mainly due to the extra number of cases of scarlet fever.

Table showing the number of Notifications and Deaths.

Year.	Smallpox.	Deaths.	Scarlet Fever.	Deaths.	Diphtheria.	Deaths.	Enteric Fever.	Deaths.	Typhus Fever.	Deaths.	Puerperal Fever.	Deaths.	Erysipelas.	Deaths.	Cerebro-Spinal Fever.	Deaths.	Acute Poliomyelitis	Deaths.
1903	111	4	413	11	45	12	17	5	...	...	2	1	107	1	...	...	...	...
1904	95	9	131	2	16	4	13	4	...	...	1	...	84	3	...	...	...	...
1905	39	1	67	1	43	6	17	2	...	...	7	7	85	1	...	...	...	...
1906	1	...	142	6	69	9	*23	5	...	...	2	...	83	1	...	...	...	...
1907	...	...	146	5	56	10	6	...	...	...	5	3	97	4	...	...	...	...
1908	...	...	127	2	61	7	16	3	1	...	1	...	61	1	...	...	...	...
1909	...	...	200	13	81	12	10	1	1	...	1	1	63	1	...	...	...	...
1910	...	...	94	3	78	11	8	4	...	...	3	1	40	...	...	...	...	...
1911	...	...	42	...	50	6	§33	3	...	...	3	1	36	1	...	...	...	...
1912	1	...	206	2	59	4	11	4	.	...	2	2	46	...	1	1	2	...
1913	..	...	281	13	71	10	‡25	3	...	...	3	1	35	1	...	...	3	...

* Includes 3 Cases Continued Fever. § Includes 1 Case Continued Fever.

‡ Includes 1 case of Continued Fever.

Morbidity Rates of Notifiable Infectious Diseases.

Disease.	England & Wales.	County Boroughs.	Tynemouth.
	Rate per 1000 of Population.	Rate per 1000 of Population.	Rate per 1000 of Population.
Scarlet Fever	3·57	4·26	4·63
Diphtheria	1·39	1·48	1·17
Enteric Fever	0·22	0·25	0·36
Puerperal Fever	0·05	0·07	0·05
Erysipelas	0·63	0·74	0·57
Cerebro-Spinal Fever ...	0·01	0·01	0·00
Poliomyelitis	0·02	0·02	0·05

SMALLPOX.—Cases notified, 0; deaths, 0.

Three contacts from foreign ports were kept under observation but none developed the disease.

Through the courtesy of Mr. Percival, Clerk to the Guardians, I am enabled to give the following figures relative to the vaccination of children within the Borough.

VACCINATION RETURNS, 1907—1912.

Year.	1	2	3	4	5	6	7	8	9
	Births.	Vaccinated.	Insusceptible.	Dead.	Conscientious Objectors.	Postponed	Removed.	Unaccounted.	Percentage not Vaccinated including Cols. 5, 6, 7, 8.
1907	1796	1,392	6	182	91	55	15	52	12·0
1908	1896	1,255	7	180	350	24	24	51	23·9
1909	1875	1,002	11	183	515	26	26	79	36·2
1910	1788	929	3	157	626	16	23	43	39·5
1911	1671	816	11	147	653	11	10	23	41·7
1912	1752	866	6	117	716	8	16	23	43·5

These figures show that the percentage of unvaccinated children is still increasing, and the susceptibility of the community to the danger of a widespread epidemic of the disease is, in proportion, becoming greater.

PLAGUE.—No contacts were notified during the year.

SCARLET FEVER.—Cases notified 281; deaths 13; fatality per cent. 4·98.

The number of cases notified shows an increase of 75 over the previous year. In 1910 and 1911 the incidence of the disease was extremely low, and in 1912 and the year reported upon the notifications have increased. There must, however, be a large number of children, who have not been protected by a previous attack, and are therefore susceptible to the disease. During 1913 the notifications reached their maximum in the month of November. The type of disease in a number of cases has been rather severe, but in others the symptoms were so mild that they passed unnoticed until attention was drawn to the nature of the illness either by desquamation or by secondary cases occurring.

The cases occurring in each locality month by month were as follows :—

Ward.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Central	4	1	3	—	—	1	—	1	4	2	7	2
Collingwood ..	2	4	—	6	3	2	2	1	3	7	20	4
Dockwray ..	—	2	—	1	3	1	—	3	6	2	1	3
Linskill	3	6	2	3	3	2	1	—	1	5	7	9
Milbourn... ...	3	3	1	1	4	2	—	—	1	—	3	—
Percy	7	2	2	1	4	4	6	4	3	—	3	—
Preston	—	3	5	3	1	—	—	2	4	3	2	9
Rudyerd	4	3	1	—	4	3	—	2	—	—	1	2
Trinity	5	7	6	1	2	—	—	—	4	3	2	2
Total...	28	31	20	16	24	15	9	13	26	22	46	31

The number of cases removed to hospital was 204 or nearly 73 per cent. Many of the houses were visited in an attempt to discover the source of infection. In addition to isolation the other means of prevention adopted were disinfection of the home, the free supply of disinfectants and the exclusion of children from school. In all cases library books were disinfected and in some instances destroyed.

DIPHTHERIA—Cases notified 71 ; deaths 10 ; fatality per cent. 14·0.

Three of the cases were notified as membranous croup. There was an increase of 11 over the notifications of the previous year, and the fatality rate is also higher. The disease was not epidemic at any time and the highest number of cases notified in any month was 12 during November.

The cases occurring in each locality month by month were as follows :—

Ward.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Central	1	—	—	—	—	—	—	—	—	—	—	1
Collingwood ...	—	1	1	4	1	—	—	—	1	1	—	—
Dockwray ...	3	1	—	—	—	1	—	—	2	—	—	—
Linskill	—	—	—	—	2	—	1	2	2	—	2	2
Milbourn... ...	—	—	—	—	—	—	—	—	—	1	—	—
Percy	3	6	1	1	—	1	—	2	3	2	4	—
Preston	—	—	1	—	—	—	—	4	—	1	3	3
Rudyerd	—	—	—	—	—	—	1	—	—	1	2	—
Trinity	1	—	—	—	—	—	—	—	—	—	1	—
Total...	8	8	3	5	3	2	2	8	8	6	12	6

The following statistics with reference to the disease in previous years are of interest :—

	1905	1906	1907	1908	1909	1910	1911	1912
Cases notified ...	37	69	56	61	81	78	50	60
Deaths	6	9	10	7	12	11	6	4
Fatality per cent ...	16·2	13·0	17·8	11·5	14·8	14·1	12·0	6·6

MORTALITY RATE PER 1000 COMPARED WITH ENGLAND AND WALES.

	1905	1906	1907	1908	1909	1910	1911	1912	1913
Tynemouth	·11	·16	·17	·12	·20	·18	·11	·06	·16
England & Wales	·16	·17	·16	·15	·14	·12	·13	·11	·12

Medical practitioners now recognise the assistance which the bacteriological laboratory offers in the recognition of this disease, and in ascertaining whether a convalescent patient is free from infection. Medical men are also taking advantage of the free supply of antitoxin for all cases where the patients are unable to pay for the remedy. Sixty-four phials of diphtheria antitoxin of 2,000 units each were distributed to medical practitioners last year for such cases.

The methods of prevention adopted were isolation of the patient, exclusion of patients and contacts from school, and disinfection of the home. In many cases visits were made to affected houses, and inmates swabbed for the purpose of discovering mild or carrier cases.

ENTERIC FEVER. Cases notified 24 ; deaths 3 ; fatality per cent. 12·5.

Nineteen cases or rather over 79 % were removed to hospital. Two of the cases admitted to hospital after observation were probably cases respectively of influenza and sub-acute rheumatism.

The cases occuring in each locality month by month were as follows :—

WARD.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov	Dec.
Central ...	1	—	—	—	—	—	—	—	—	—	—	—
Collingwood ..	—	—	—	—	—	—	2	—	1	1	—	1
Dockwray ..	—	—	—	—	—	—	—	—	—	—	—	—
Linskill	—	—	—	—	—	—	—	—	—	—	—	—
Milbourn ...	—	—	—	—	—	—	—	—	—	1	1	—
Percy	—	1	—	1	—	—	—	—	—	1	—	—
Preston	3	1	1	—	—	—	—	—	—	1	—	—
Rudyerd	—	3	1	—	—	—	—	—	—	—	1	—
Trinity	—	—	1	—	—	—	—	—	—	1	—	—
Total...	4	5	3	1	—	—	2	—	1	5	2	1

Four of the cases occurring in January were in a public institution. A communication was received on 20th January that a member of the nursing staff was ill with enteric fever and another member was feeling unwell. The first patient took ill on 11th January and the second on 17th January. Both nurses slept in different bedrooms, but were at work in the same ward, one on day duty and the other on night duty. After excluding other possible sources of infection, the suggestion presented itself that the illness had some association with the ward and the patients. With this view an inquiry into the cases of illness in the ward suggested that the blood of one patient might be examined for widal's reaction. The specimen gave a positive result, and was treated as a suspected case. A second patient in the ward took ill a few days later. All patients were isolated and the ward thoroughly disinfected. No further cases occurred.

Two of the cases notified in February and one in March were related to one another and no doubt the infection was conveyed from the one to the other.

Another case notified in March was that of a boy. The boy's parents had been visited about a fortnight prior by an aunt who was not feeling well at the time, and after her return home was notified to the Medical Officer of the district as suffering from enteric fever.

Four cases were pit workers and were probably infected outside the district.

In four cases suspicious illnesses had occurred in the home some time previously. In two instances specimens of blood were obtained from the suspected source of infection, but both gave a negative widal's reaction, in a third instance no blood could be obtained for examination, and in the fourth case the patient was stated to have died from rheumatic fever.

ERYSIPELAS.—Cases notified 35 ; death 1 ; fatality per cent. 2·8.

PUERPERAL FEVER.—Cases notified 3 ; death 1 ; fatality per cent. 33·3

None of the cases occurred in the practice of a midwife.

ACUTE POLIOMYELITIS.—Cases notified 3 ; deaths 0.

Case I.—Female, notified in June, age 1½ years, had paralysis of the left leg and foot, and is attending Children's Hospital ; is practically better but slight deformity of left foot remains.

CASE II.—Male, notified in July, age 3 years, had paralysis of right arm and both legs. Doctor still attending in April of current year and there is slight improvement only.

CASE III.—Female, notified in November, aged 3 years, had paralysis of left leg and foot. Has quite recovered and no deformity.

CEREBRO-SPINAL FEVER.—Cases notified 0; deaths 0.

MEASLES.—Deaths, 5; mortality rate per 1000, 0·08.

All of the deaths were of children under 5 years of age. The deaths were distributed as follows :—

Collingwood, 3; Milbourn and Percy Wards, 1 each.

The deaths recorded during previous years were :—

	1905	1906	1907	1908	1909	1910	1911	1912
Deaths... ...	6	19	23	14	13	41	11	32
Rates per 1,000	·11	·34	·41	·24	·22	·70	·18	·53

Information regarding cases of measles is obtained mainly from the schools, and leaflets have been prepared to be left at houses where cases of the disease have been reported, drawing attention to the fatality of the illness during the early years of life. All children of an affected household attending the infant department were excluded from school, but those children who had had measles and attend the senior classes were allowed to return to school.

WHOOPING COUGH.—Deaths 3; mortality rate per 1,000, 0·04.

The deaths were distributed as follows :—

Collingwood Ward 3.

	1905	1906	1907	1908	1909	1910	1911	1912
Deaths... ...	35	4	28	20	18	19	17	11
Rates per 1,000	·64	·07	·50	·35	·31	·32	·28	·18

DIARRHŒA AND ENTERITIS.—Deaths under 2 years 50; mortality per 1,000 births, 28·6.

The mortality rate in England and Wales for infants under 2 years was 23·4 and for the great towns, 29·3.

Thirty-three of the deaths from diarrhœa occurred during the months of September and October.

Zymotic diarrhœa is marked by a seasonal prevalence and most of the cases are noted during the third quarter of the year, especially after a warm dry summer such as the year now reported upon. It is associated with the earlier years of life and the contagion is probably conveyed by flies and winds to the food or milk. Improper feeding predisposes to attack and bottle fed children are particularly liable to contract the disease. The Health Visitor gives special attention to such cases as may require advice in respect of the feeding of infants, and a pamphlet or card is left with the parent dealing with the care of young children.

OTHER DISEASES.

Under this heading are included certain diseases which are not classed as zymotic but are of special interest.

CANCER AND MALIGNANT DISEASES.—Deaths 58; mortality rate per 1,000, 0·95.

The deaths and rates for the preceding 10 years were as follows :—

	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912
Deaths ...	33	37	46	36	33	42	28	46	46	44
Rate per 1,000	·62	·68	·84	·65	·59	·74	·48	·79	·77	·73

One death occurred between 2 and 5 years; 11 between 25 and 45 years; 24 between 45 and 65 years; and 22 were of persons over 65 years of age.

RESPIRATORY DISEASES.—Deaths, 145; mortality rate per 1,000, 2·39.

The deaths during the last 10 years were as follows :—

	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Bronchitis ...	113	109	101	93	114	76	80	86	92	80
Pneumonia ...	33	43	42	39	37	74	84	54	64	57
Other Respiratory Diseases	11	14	8	9	2	15	16	10	13	8
Total deaths ...	157	166	151	141	153	165	180	150	169	145
Rate per 1,000	2·90	3·05	2·73	2·52	2·70	2·87	3·09	2·54	2·82	2·39

The number of deaths from respiratory diseases was less than for some years previously, and 50 of the deaths occurred in children under 5 years of age.

TUBERCULOSIS.

Pulmonary tuberculosis was made compulsorily notifiable on 1st January, 1912, but the Public Health (Tuberculosis) Regulations 1912, revoked previous regulations and from 1st February, 1913, provided for the notification of *all forms* of tuberculosis.

NOTIFICATIONS :—From 1st to 31st January there were 10 cases of pulmonary tuberculosis notified under the old regulations as follows :—

	Males.	Females.	Total.
Poor Law Institutions ...	3	1	4
Hospitals	1	2	3
Tuberculosis Regulations 1911	2	1	3
Total	6	4	10

From 1st February to 31st December the number of cases notified was :—

	Form A.		Form B.		Total.
	Males.	Females.	Males.	Females.	
Pulmonary ...	49	49	3	1	102
Non-Pulmonary...	52	48	11	10	121
Total	101	97	14	11	223

Eighteen cases were notified twice.

The total notified cases were therefore 233, of which 112 were pulmonary and 121 non-pulmonary.

(1). PULMONARY TUBERCULOSIS :—Deaths 52. Mortality rate per 1,000 0·85.

The deaths and corresponding mortality rates during the last 10 years were as follows :—

Tynemouth.	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912
Deaths... ...	83	68	91	96	88	75	64	61	74	100
Mortality rate...	1·56	1·26	1·67	1·70	1·57	1·32	1·11	1·04	1·20	1·67

Of the 52 deaths 38 occurred in private residences and 14 in public institutions.

The intervals which elapsed between receipt of notification and date of death were as follows :—

Interval.	Deaths. 1913.	1912.
Under 1 week ...	9	29
Under 1 month ...	5	23
1 - 3 months	14	26
3 - 6 months	8	15
6 - 12 months	8	7
Over 1 year	8	0
Total	52	100

The table shows that 93 per cent. of the fatal cases occurred within 6 months after notification in 1912, and 69 per cent. in 1913.

The number of notifications and distribution of the deaths with the mortality rate in each ward was as follows :—

Ward.	Population.	Notifications.	Deaths.	Mortality Rate. 1913	1912
Central	5151	15	10	1·94	1·77
Collingwood ...	8007	16	7	0·87	0·88
Dockwray ...	6711	9	5	0·74	2·26
Linskill	9172	15	6	0·65	1·43
Milbourn... ...	5779	14	7	1·21	1·75
Percy	6530	5	1	0·15	1·70
Preston	6043	6	3	0·49	0·83
Rudyerd	5598	20	8	1·43	3·62
Trinity	7610	12	5	0·65	1·33
Whole Borough	60601	112	52	0·85	1·67

A marked decrease in the rates for Dockwray, Linskill, Percy, Rudyerd and Trinity Wards will be noticed.

Notifications and Deaths in relation to Age and Sex Incidence.

Years.		Under 1.	1-5	5-15.	15-25	25-45	45-65	65 & over	Total
Notifications	Males	—	1	6	8	28	15	—	58
	Females	1	3	5	16	26	2	1	54
								Total	112
Deaths	Males	—	—	—	8	14	7	—	29
	Females	—	—	2	8	12	—	1	23
								Total	52

Inquiry has been made in each case as to the sleeping accommodation, more especially as to whether the patient has a separate bedroom, and the results are summarised in the following table :—

	Separate bedroom.	Separate bed but other occupants of same room	No separate bed and other occupants of same bed.
Cases	34	19	59

(2) NON-PULMONARY TUBERCULOSIS.—Deaths 37 ; mortality rate per 1,000, 0·61.

Notifications and Deaths in relation to Age and Sex Incidence.

Years.		Under 1	1-5	5-15	15-25	25-45	45-65	65 & over	Total
Notifications	Males	4	12	37	5	4	1	—	63
	Females	3	13	29	4	8	—	1	58
								Total	121
Deaths	Males	4	8	2	2	—	—	—	16
	Females	8	7	3	1	1	—	1	21
								Total	37

100 notifications were on Form A and 21 on Form B.

The localisation of the disease amongst the notified cases was as follows :—

Glands	74
Peritoneum	13
Joints	13
Spine	6
Meninges	6
Bones	3
Miscellaneous	6
Total	121

During the year good progress has been made with the complete scheme for the institutional treatment of tuberculosis for all classes, i.e. for insured persons who may receive benefit under the National Insurance Act 1911, and for non-insured persons.

The scheme which has been adopted by the Council and approved by the Local Government Board makes provision as follows :—

(1). A central dispensary with Tuberculosis Officer and Nurse.

(2). Hospital beds at Moor Park for advanced cases and two beds for observation cases.

(3). Sanatorium beds for early cases both for adults and children.

(4). An after care committee.

THE DISPENSARY is the first unit in the scheme and the tuberculosis officer with the nurse to assist him is the nucleus of its activity.

Dr. Wm. Yeates was appointed Tuberculosis Officer and commenced duty on 1st July. Nurse Mills who held previously the joint post of Health Visitor and Tuberculosis Nurse was also appointed to devote the whole of her time to tuberculosis work, and began duty on the same date.

The Dispensary adjoins the Health Office and consists of a consulting room, waiting room, and two dressing rooms. The bacteriological work is done in the laboratory belonging to the Health Office.

HOSPITAL :—Six beds have been provided at Moor Park for tuberculosis and two of the beds are used for observation cases if required When these are not required for observation they are occupied by patients for the purposes of treatment.

SANATORIA :—In the early part of the year patients were sent to Barrasford Sanatorium, but during the latter half of the year other arrangements were made whereby six beds were retained at Woodburn Sanatorium, Edinburgh, for adult cases from Tynemouth.

Arrangements were also made with Stannington Sanatorium, Northumberland, and three beds have been allotted to children sent from the Borough.

It has been thought by the Committee that some economy might be effected, if, in building a new isolation hospital at Balkwell estate, which has recently been acquired by the Corporation and a portion of which is to be used as a site for a new hospital, a combined institution for the treatment of tuberculosis cases could be erected on adjacent ground.

The matter has been discussed with the Local Government Board and the Council have the question at present under consideration.

Such an arrangement, it is thought, might allow more beds to be equipped and managed by the same or a slightly increased staff to that which is at present doing the work at Moor Park.

REPORT UPON INSTITUTIONAL TREATMENT BY DR. YEATES, TUBERCULOSIS OFFICER.

Your Tuberculosis Officer took up duty on 1st July, 1913, and on 5th September the dispensary was opened and is now in full working order. The routine method of working the dispensary is as follows :—

The Medical Officer of Health having received a notification from a practitioner passes it on to the Tuberculosis Officer, who in turn instructs the tuberculosis nurse to visit and report on the condition of living and surroundings and also to make arrangements for the examination of all persons residing in the dwelling. She also carries out the duty of instructing the patient and inmates in the hygienic methods of living (cleansing, sleeping and ventilation, etc.) the collection and disposal of sputum and use ot disinfectants. This having been done and a day and time fixed when the other inmates will be at home, the Tuberculosis Officer visits and examines every inmate living in the infected house. Any member of the household who is, in his opinion, infected, is instructed how to proceed, and also recommended to come to the dispensary for advice or treatment. From among the cases thus brought to his notice are selected those for sanatorium, hospital or dispensary treatment, the early cases being sent to Woodburn Sanatorium, whilst cases in later stages of the disease are sent to Moor Park Hospital, and the remainder are treated at the dispensary. It may be said here that the co-operation of the tuberculosis nurse in the work is invaluable. She displays tact and care in her methods of arranging the visits—a most necessary adjunct, working early and late in her endeavours to carry out the duties allotted to her.

DISPENSARY.

The number of cases examined to the end of 1913, has been 100, and the number attending the dispensary 92. These may be classified as follows :—

		Pulmonary.		Non-Pulmonary.		Total.
		M.	F.	M.	F.	
Number Examined	Insured ...	31	8	1	4	44
	Uninsured	1	17	2	5	25
	Children ...	10	9	7	5	31
	Total	42	34	10	14	100

		Pulmonary.		Non-Pulmonary.		Total.
		M.	F.	M.	F.	
Treated at Dispensary	Insured ...	27	8	1	3	39
	Uninsured	1	15	1	5	22
	Children ...	10	9	7	5	31
	Total	38	32	9	13	92

The results of treatment with tuberculin at the dispensary have in the majority of cases been most satisfactory—cases of old standing, discharging wounds and inflammatory conditions in eyes, showing, after injections of the duration of a month or two, marked improvement. The average gain in weight after injections of varying periods is in men 4¼lbs., in women 4¾lbs. and in children 2½lb., showing that the disease if not arrested, is certainly not so active in its form.

The following table shows the distribution of cases at the end of the year :—

	Attending at end of year.	Not attending.	In sanatoria.	Left district.	Not able to attend.	Died.	Total.
Adults ...	38	4	10	4	2	3	61
Children ...	20	3	3	3	0	2	31

Of the adults 30 were men and 31 women.

Of the men, 16 are working, 8 are not working, 6 are in a sanatorium. Of the 8 not working, two are totally unfit, whilst 6 could work at some form of light intermittent employment, so that it can be said that 73% of the men under treatment are able to work if suitable employment could be obtained.

Of the 31 women under treatment, all but one (a hopeless case) are doing their own house work, or 97% are following their usual employment.

Of the 31 children under treatment, 28 are of school age. 13 of these are excluded from school, whilst 15 are able to attend school, and an arrangement has been made with the School Medical Officer for these to attend the clinic during school hours.

SANATORIA.

The number of cases treated in sanatoria for the year ending 31st December, 1913, was 32.

		Pulmonary.		Non-Pulmonary.	
		M.	F.	M.	F.
Barrasford ...	Insured ...	4	0	0	0
	Uninsured ...	0	0	0	0
Woodburn ...	Insured ...	8	2	0	0
	Uninsured ...	0	1	0	0
Moor Park ...	Insured ...	9	1	0	0
	Uninsured ...	0	3	1	0
Stannington ...	Children ...	2	0	1	0

Of the four cases who were sent to Barrasford, all are working, whilst three are attending the dispensary for tuberculin treatment, and all are in fair health.

Of the eight men sent to Woodburn, three are at work, four are still in the sanatorium and one is not working. Of the three women sent, one only is working, whilst the remaining two are still in the sanatorium. The average gain in weight in males was $5\frac{3}{4}$lbs. and females $8\frac{1}{2}$lbs.

Out of ten men admitted to the wards at Moor Park Hospital, seven are not working, two are still in hospital and one has died. Of the seven not working three could follow some light form of employment, whilst the remainder are totally unfit for work. Four women admitted have not yet been discharged.

The average gain in weight of the patients admitted to Moor Park was males 7 lbs. and females 9 lbs.

Three children all males have been admitted to Stannington Sanatorium, and still occupy beds in that institution. The average gain in weight of the children has been 6 lbs.

The contacts examined to December 31st was 471, and the number found to be infected was 39, most of whom are now receiving treatment of one kind or another.

The subjoined list shows the occupation which each patient attending the Dispensary follows :—

Metal Workers :—Engineers 2 ; Plumbers 1 ; Blacksmiths 2 ; Patternmakers 1 ; Turners 1.
Shipworkers :—Coal Trimmers 2 ; Rivetters 2 ; Labourers 3
Seamen :—Sailors 3 ; Firemen 2.
Factory and Workshop Employees :—Milliners 1 ; Compositors 3 ; Laundresses 1 ; Tailors 2 ; Tailoress 1 ; Typist 1.
Shopkeepers :—Fried Fish Dealer 1 ; Barman 1.

Domestics :—Housewives 22 ; General Servants 4 ; Parlourmaid 1 ; Housemaid 1.

Miscellaneous :—Schoolteacher 1 ; Clerks 2 ; Joiners 3 ; Advertising Agent 1 ; Insurance Agent 1 ; Roadmen 1 ; Night Soilman 1 · Van Driver 1 ; Scholars 28 ; No occupation 3.

TUBERCULIN TREATMENT.

(1) ADULTS.

(a) Pulmonary.—Cases 58 ; Males 32 ; Females 26.

Of the males 6 are not responding to treatment, 4 are stationary, 1 has died and the remaining 21 are showing much improvement and gaining weight. Of the females 7 are not making any progress, 2 are stationary and one has died, whilst 16 are gaining in weight and showing improvement.

(b) Glandular Cases 9. Males 2 ; Females 7.

The two males have markedly improved. Of the females 4 have improved, whilst two are stationary and one has died of some form of malignant disease.

(c) Skin Cases 3. Males 2 ; Females 1.

These are showing marked improvement.

(2) CHILDREN.

(a) Pulmonary 19. Males 10 ; Females 9.

Of the 10 males 9 are making rapid progress and 1 is stationary. Of the 9 females 8 are progressing well, and one has died.

(b) Glandular 5. Males 3 ; Females 2.

Of these, 4 are doing well, and 1 has required operative interference.

(c) Peritoneal 4. Males 3 ; Females 1.

Of these 2 have died, 1 is stationary and 1 is cured.

(d) Osseous 1. Female 1.

Has required operation but making fair progress.

(e) Inflammatory Eye Condition 1. Female 1.

This case is making rapid recovery.

I may here say that children affected with tubercle seem to respond to treatment much more rapidly than adults, and the results are more gratifying. I therefore look upon the treatment of the younger members of the community as most important in the stamping out of the so called "white plague."

The number of subjects with decayed teeth is a source of trouble, and patients would be well advised to attend to the condition of their teeth, as this is a source of infection to the body. It also retards recovery by preventing assimilation of food through want of proper mastication.

AFTER CARE.

The after care of the tuberculous is a subject of much concern, as the return of patients to their old method of living after receiving treatment at a sanatorium, or failing to carry out the instructions given, is only to court disaster.

Some cheap form of sleeping shelter to loan for the purpose of erection in the yard or front garden might be provided, the number of these, however, would of course naturally be restricted owing to the unsuitability of the neighbourhood.

It is a somewhat unfortunate thing that many suffering from tuberculosis as soon as they are informed of the fact cease work. This tends to depress the patient, as well as to impoverish the supply of the necessary food by loss of wages.

After the education received at a sanatorium and by instruction regarding methods of living, if properly carried out, the tuberculous subject should cease to be a source of danger to others.

In conclusion, I would like to thank the Medical Officer of Health, the Assistant School Medical Officer and the Tuberculosis Nurse, for their valuable co-operation in the work, the Committee for the kindly feeling shown by them, and the practitioners of the district for their courtesy and help.

III.

General Sanitation.

GENERAL SANITATION.

HOSPITALS.

MOOR PARK HOSPITAL.—The ordinary infectious diseases are treated at this Hospital. One ward has also been set apart for the treatment of advanced cases of pulmonary tuberculosis and two beds have also been provided in an adjacent building for observation cases. The latter, however, are used as ward beds for tuberculosis cases when not required for patients under observation.

The ward to be used for tuberculosis and the accommodation for observation cases was altered by the Borough Surveyor to suit the requirements, as far as possible, of the cases to be treated in them.

The number of cases admitted during the year was 272. At the beginning of 1913, 34 patients were in hospital, and during the year 272 were admitted, making a total of 306 under treatment. Of these 231 were discharged recovered, and 13 died, leaving 62 in hospital at the end of the year.

ADMISSIONS, DISCHARGES AND DEATHS, DURING 1913.

DISEASE.	Patients in Hospital, 1st January, 1913	Admitted.	Discharged.	Died.	Remaining in Hospital, 31st Dec., 1913.
Scarlet Fever...	27	204	173	5	53
Diphtheria ...	6	35	33	6	2
Enteric Fever...	1	19	18	1	1
Tuberculosis ...	—	14	7	1	6
Total...	34	272	231	13	62

The total number of days spent in hospital by patients during the year was 13,287, or an average duration of 49.7 days per patient.

The total number of days and the average duration of residence for each disease was as follows :—

	Scarlet Fever.	Diphtheria.	Enteric.	Tuberculosis
Total days in hospital ...	11,101	597	893	696
Average number of days per patient	54·4	17·05	47	49·7

The vans for the removal of infected clothing and bedding and the return of disinfected articles made 378 journeys, and the number of days that the disinfector was in use amounted to 119 days.

During the year regulations for the control of the isolation hospital were prepared and submitted to the Committee for approval and printed.

The regulations deal with the duties of the various members of the staff, and rules for patients and visitors.

A special set of regulations was also drawn out for consumptive patients.

Owing to the increase of the nursing staff, extra sleeping accommodation has been provided in the old administration building. The Committee also authorised the painting of all external iron and wood work at the hospital and this was duly carried out by the Borough Surveyor.

SMALLPOX HOSPITAL :—The old hospital at Percy Square originally used for smallpox purposes has now been pulled down and the borough is at present without any provision for cases of smallpox. The matter has been under consideration by the Committee for some considerable time and after much deliberation it was thought that the best policy would be to use the present hospital at Moor Park for smallpox owing to its isolated position, and to build another hospital for ordinary infectious diseases on the new site which the Council have acquired at Balkwell. A portion of the south-west corner of the estate is considered to be the best site for the hospital, and plans for the new building are receiving the attention of the Borough Surveyor.

A Local Government Board inquiry was held in the early part of the year relative to the purchase of the estate and the sanction of the Board was obtained in October, 1913, to the borrowing of £11,020 for that purpose.

BACTERIOLOGICAL LABORATORY.

During the year the number of specimens examined was 778.

The number of specimens examined since the laboratory was opened will be seen from the following table :—

Year.	Diphtheria.		Phthisis.		Typhoid Fever.		Ringworm.		Miscellaneous		Total.
	+	—	+	—	+	—	+	—	+	—	
1907	36	53	10	24	4	2	—	—	4	1	134
1908	44	74	3	16	7	5	—	—	—	2	151
1909	48	157	7	17	8	9	14	—	5	15	280
1910	89	201	24	46	4	17	169	32	7	10	590
1911	71	227	28	35	27	23	160	55	4	15	645
1912	78	169	48	75	6	25	106	38	24	2	571
1913	94	254	53	177	21	22	105	39	10	3	778

The miscellaneous specimens were examined either for the indentification of pneumococcus, gonococcus, or, for the nature of the organism present in order that a suitable vaccine might be obtained for the purpose of treatment.

Milk specimens are examined by animal inoculation at the laboratory of the University of Durham College of Medicine, Newcastle.

HOUSING.

During 1913 systematic inspection was carried out under the Housing and Town Planning Act 1909. The Chief Sanitary Inspector was appointed as Housing Inspector by resolution of the Council on 19th October, 1910, to carry out the detailed inspection, and the Housing Sub-Committee has met monthly to consider the reports of the Inspector. During the year the following districts have been visited and reported upon :

Northumberland Street, East Percy Street, Reed Street, George Street, King Street, Queen Street, Church Street, Upper Queen Street, Upper Pearson Street, Linskill Street, Stephenson Street.

The summary of houses dealt with, the nature of the defects and the action taken will be found on pages 56-59.

In the various reports submitted each month by the Inspector, it has been found in connection with cases of overcrowding that tenants had great difficulty in obtaining accommodation suitable to the needs and sizes of their families. With the marked revival in trade during the last year or two there has been a corresponding demand for low or moderately

rented houses, acccording to the class of workmen employed at the various industrial centres situated within or near to the Borough, so that there are practically no workmen's dwellings vacant at the present time.

The population of the Borough at the census of 1911 was 58,816, distributed in relation to housing as follows :—

No. of Rooms.	Number of Private Families or Tenants.	Population.	Persons per Room.
1	1423	4064	2·8
2	3129	13197	2·1
3	2846	13030	1·5
4	2258	10968	1·2
5 and over.	2980	14608	—
	*12,636	*55,837	

* These figures do not include persons living in public institutions, etc.

The table shows that 36% of all private families representing a population of 17,261 were living at the time of the census in one and two roomed houses.

Since 1911 there has been an estimated increase in population of about 800 persons annually. At the date of the last census it was found that the number of persons per family was 4·5, so that if it be assumed that the total increase during the years 1911, 1912 and 1913, is about 2,400 persons and that each family occupies a tenement, then about 533 tenements should have been built during this triennial period to accommodate the constantly increasing population. Through the courtesy of the Borough Surveyor, I have been able to get the actual number of tenements built during each of these years, and the figures are given in the following table :—

New Dwellings Erected during the Years 1911, 1912 and 1913.

Ward	Number of Rooms.						Totals.
	1	2	3	4	5	6 & over.	
Collingwood ...	—	—	—	2	—	1	3
Linskill	—	—	9	10	19	12	50
Percy	—	—	—	—	—	3	3
Preston	—	2	2	26	15	6	51
Trinity	—	13	10	5	—	—	28
Central	—	—	—	—	—	—	—
Dockwray ..	—	—	—	—	—	—	—
Milbourn ..	—	—	—	—	—	—	—
Rudyerd	—	—	—	—	—	—	—
Total...	—	15	21	43	34	22	135

These figures represent the total number of tenements if a house is intended to accommodate more than one family, so that during the three years the total number of tenement dwellings erected has been 135, or 398 less than the number required to accommodate the estimated increase in population when considered in the ratio of persons per family to each tenement as ascertained at the last census.

In other words about 1,790 persons have required to find accommodation in houses already existing and have probably assisted to increase a state of overcrowding.

During the last three years about 124 tenements have been closed either voluntarily or as clearance for public works, or under the operation of the Housing and Town Planning Act. Of this number 4 were made habitable, seven have been utilised as store-houses, and 24 had not been occupied for some time prior to closure, thus leaving about 89 tenements which had been recently occupied, but are now closed, and representing, on the basis of the census estimation of 4·5 persons per family or tenement, a displaced population of about 400 people.

During the course of inspection under the Housing and Town Planning Act, Dockwray, Central, Rudyerd and Milbourn Wards, are those in which overcrowding has been encountered. If this condition occurred in a less densely populated part of the Borough, as for example Collingwood and Preston Wards where the total number of persons per acre is 3 and 10 respectively, the evil effects would perhaps not be so marked, but occurring in the most congested areas in the Borough its general effect upon the death rate and the tuberculosis mortality rate is well seen from tha following table in which the wards already named are compared, and the average population and rates for the three years 1911-1913 are given.

Ward.	Estimated Population.	Area in Acres.	Persons to Acre.	Death Rate all causes.	Tuberculosis Mortality Rate.
Central	5082	30	169·4	19·8	2·5
Dockwray ..	6925	82	82·0	18·7	2·3
Milbourn ...	5703	114	50·0	18·2	1·9
Rudyerd	5524	41	134·7	21·6	3·0
Collingwood ...	7903	2299	3·4	14·1	1·6
Preston	5967	564	10·5	14·9	1·0

The *average general death rate* during the same period for the whole Borough per 1,000 of the population was 15·7, and the *average tuberculosis mortality rate* for the same period was 1·23.

The Committee are dealing with the question of offering facilities for building enterprise and a report upon the matter has been prepared by the Borough Surveyor, which is at present under consideration.

WATER SUPPLY.

The Borough derives its domestic supply from the water works at Fontburn, Northumberland, and some details of the waterworks have been given in previous reports A few dwellings and outlying farms are supplied by wells or springs.

The gravitation supply from the Font is distributed on the constant system. The gathering ground is of a peaty character and the water committee have the question of decolourising the water under consideration. Some experiments have been carried out by the Turnover Filter Company at the Font, but the Committee have decided to further experiment with the mechanical filters made by Messrs. Bell, and Mather & Platt, before coming to any decision upon the question of a complete installation.

The average result of the analyses of the Font Water made during the year was as follows :—

	Parts per 100,000.
Chlorides as Chlorine	1·0
Nitrites as Nitrogen	Nil
Nitrates as Nitrogen	·036
Free Ammonia...	·002
Albuminoid Ammonia...	·018
Oxygen Absorbed (2 hours at 37° C.)	·804
Total Hardness.	8·4
Total Solids	13·0

There was no presumptive evidence of bacillus coli obtained by bacteriological examination. The colour of the water as tested by Hazen's colour standard has been found to vary from 7° after a dry period to 14° after heavy rainfall. During the summer months the average colour was 8° Hazen.

OFFENSIVE TRADES.

The following offensive trades are carried on within the Borough :— Gutscraping 4 ; fish manure making 1 ; tripe boiling 4 ; tallow melting 1 ; dealing in rags, bones, fats, animal skins or other like matter in an offensive condition 4 ; fish and potato frying 24.

New bye-laws regulating offensive trades have been made by the Council and received the sanction of the Local Government Board on 7th February.

Owing to repeated complaints regarding a nuisance emanating from the premises of a gutscraper at the back of Spring Terrace, the offender appeared on 29th August to answer five summonses for contravention of the bye-laws. The charges were as follows :—(1) That he did not cause the floors of his premises to be thoroughly swept at frequent intervals, and deodorised on 2nd August ; (2) that he did not cause guts, not required for immediate use, to be placed in suitable receptacles on August 20th ; (3) that on 2nd August he did not cause all refuse to be cleaned away ; (4) that on 20th August he did not cause all refuse to be cleaned away ; (5) that on 19th August he did not cause to be scraped certain parts of the internal wall of his premises upon which certain dirt had accumulated.

As the defendant pleaded guilty, the Town Clerk, who prosecuted stated that the first charge only would be proceeded with and the remaining four charges would be withdrawn on payment of costs.

A fine of £2 10 0 and costs was imposed and the remaining four charges were dismissed on payment of costs.

SLAUGHTER HOUSES. There is no public slaughter-house in the Borough but the local butchers' association have an arrangement whereby a butcher who is a member of the association will be compensated for meat condemned as unsound or unfit for human food.

The Medical Officer of Health is notified by the butcher of any unsound meat he may have upon his premises.

Inspection of the slaughter-houses has been made throughout the year and the total amount of meat condemned was 1,308 lbs.

Owing to the price of newly slaughtered fresh meat, frozen and chilled meat is rapidly taking the place of the former, and some butchers who had a good fresh meat trade have either required to give it up or keep a stock of both to supply the demand of their customers.

INSPECTION OF DAIRY HERDS.

The dairy herds in the Borough are inspected by Mr. Harper, M.R.C.V.S., twice in each year for the detection of tubercular disease of the udder.

The first inspection was finished in the month of February and the second in the month of September.

The udders of two cows were considered suspicious and samples of the milk were taken for animal inoculation from both cows. In both instances the results of examination were negative.

The number of cows examined at each inspection was 270 and 241 respectively. The number of cowkeepers 20 and 21 respectively.

An important order, the Tuberculosis Order of 1913, under the Diseases of Animals Acts 1894 to 1911, came into operation on 1st May, whereby "Every person having in his possession or under his charge :—

(1) Any cow which is, or appears to be, suffering from tuberculosis of the udder ; indurated udder, or other chronic disease of the udder ; or

(2) Any bovine animal which is, or appears to be, suffering from tuberculosis with emaciation ; shall without avoidable delay give information of the fact to a constable of the police force for the area wherein the animal is, or to an inspector of the Local Authority."

The order also provides for the compensation of the owner of the animal ; for precautions to be adopted with respect to the milk ; for the detention and isolation of suspected animals, and for the cleansing and disinfection of premises.

A Veterinary Inspector has been appointed who will inspect quarterly all bovine animals within the Borough under the Tuberculosis Order 1913 and he will also act as Inspector under the Dairies, Cowsheds and Milkshops Order.

One cow suffering from Tuberculosis was notified under the Tuberculosis Order on 10th December and compensation paid in respect of the animal.

MIDWIVES ACT, 1903.

On the 1st January, 1913, there were 10 persons certified as midwives under the Act, practising or resident within the Borough. During the year two midwives were added to the list and one died, leaving 11 on the register at the end of the year. Two of the midwives on the register did not attend any cases throughout the year.

The following is the revised list of persons certified as midwives and practising within the Borough, two being resident outside the Borough :—

No. of certificate.	Name.	Address.
20153	Margaret Emmerson ...	8, Sibthorpe Street.
19570	Dorothy Hart ...	... 52½, Bedford Street.
18873	Violet Laidler ...	... 66, Stephenson Street.
30824	Elizabeth Preston	... 39, North Street.
150	Alice Scott ...	... 15, Linskill Street.
14146	Isabella Warren	... 58, Stephenson Street.
24286	May Weston ...	... 9, Prudhoe Terrace, Tynemouth.
31031	Ellen Young ...	... 28, Percy Street, Tynemouth.
7164	Hannah Piper ...	... 22, Denmark St., South Shields.
34024	Christina Temple	... 51, Hulne Avenue, Tynemouth.
10670	Agnes Gallon ...	... 25, Nelson Street. Willington Quay.

The number of cases attended during the year by midwives was 651, or 37·2 per cent. of births registered during the year.

WORK OF MIDWIVES.

Year.	Midwives.	Cases attended.	Medical aid summoned.	Still born.	Miscarriages.
1909	10	441	22	13	14
1910	10	532	16	25	5
1911	10	550	21	24	9
1912	10	585	25	27	5
1913	11	651	8	29	10

Medical aid was summoned for the following reasons :—Malpresentation and hœmorrhage, 1 ; Illness of mother, 2 ; Illness of child, 5.

No case of puerperal fever was notified by a midwife as required by Rule No. 18.

During the year the instruments and case books of each midwife were inspected.

The object of the Act is to secure the better training of the midwives and to regulate their practice. The Central Midwives Board is the central authority and they have issued rules detailing the duties and responsibilities of all practising midwives. The Local Supervising Authority is the Town Council, who exercise general supervision, investigate charges of malpractice, negligence or misconduct, and under certain circumstances order the suspension of any midwife from practice.

INFANT HYGIENE.

The Notification of Births Act, 1907, was adopted by the Council and came into force with the sanction of the Local Government Board on 1st May, 1912. The Act requires that notice in writing be sent to the Medical Officer of Health within 36 hours of the birth of a child, and applies to all births whether the child be alive or not, if the pregnancy has lasted longer than 28 weeks.

A Health Visitor was appointed at the time of the adoption of the Act whose services were devoted to work in connection with Tuberculosis cases and also to work under the Notification of Births Act. On 1st July, 1913, a whole time Health Visitor, Miss Sweett, was appointed for the purpose of carrying out the duties under the Act.

The total number of births registered during the year was 1,766 and the notifications received under the Act was 1,669, or 94·5 per cent of the total births.

The persons notifying the births were :—

Doctor	450
Midwife	651
Others	568
Total	1669

According to the Ward in which they occurred the number of notified births was as follows :—

Ward.	Male.	Female.	Total.
Central ...	83	95	178
Collingwood...	118	102	220
Dockwray ...	150	120	270
Linskill ...	105	69	174
Milbourn ...	116	96	212
Percy ...	63	60	123
Preston ...	68	60	128
Rudyerd ...	62	79	141
Trinity ...	120	103	223
Total	885	784	1669

Of the 1,669 births 885 were males and 784. females. Fifty-four still births were notified.

In several cases failure to notify a birth has been brought to the notice of the persons in attendance, but no action was taken as there was generally misapprehension as to the requirements of the Act. The number of babies kept under observation was 1,093 and the Visitor has as far as possible made weekly visits to these cases for the first month, and selected cases were afterwards kept under supervision by a monthly visit throughout the year.

Of the 1,093 cases visited, the births may be allocated according to the size of house, as follows :—

One apartment	275	births.
Two apartments	489	,,
Three apartments	222	,,
Four apartments	79	,,
Five apartments and over ...	28	,,
	1093	births.

The visits of the Health Visitor are greatly appreciated. She gives such advice as she thinks necessary and a card is left giving instructions regarding feeding, weaning, preparation and storage of milk, care of the bowels, diarrhœa, washing and clothing of the child and need of pure air.

It was mentioned in last year's report that it was proposed to establish a "Guild for Mothers and Babies." This is now an accomplished fact.

An old and voluntary institution in the Borough known as the "Ladies Charity for lying in women" has been re-organised and is now named the "Guild for Mothers and Babies." Mrs. Robinson, the president of the parent institution has been elected president of the Guild. The work is carried on in intimate association with the Health Department aided by what was formerly the "Ladies Charity" committee with co-opted members. Dr. Amy Robinson has undertaken the voluntary work of superintendent and she is assisted by Miss Sweett, the official Health Visitor. In addition to the usual weighing of the infant which is carefully recorded on a card, a portion of the time is devoted to education of the parent in infant hygiene and a few of the ailments associated with infant life. These talks generally occupy 7 to 10 minutes and the duty is divided between Dr. Robinson and the Health Visitor. The former deals with purely medical topics such as diarrhœa, infectious diseases, consumption and emergencies, and the latter with such subjects as feeding, washing and clothing of the child, and infant hygiene generally.

The committee have felt that their efforts have been appreciated by many mothers in the town and in order to still further assist those at the west end of the district, an additional centre has been opened at the United Methodist Schoolroom, Milbourn Place.

An attempt is also being made to get the midwives to form an association for the purpose of discussing matters concerning their work and the welfare of their patients. It is proposed that a course of lectures should be given to the midwives on subjects bearing upon practical work and difficulties they may meet with in the performance of their duties.

Miss Councillor Burnett has also opened a day nursery on Tuesdays at Drury House for the infants of mothers who require to do their washing and have no person capable of looking after their infants while they are occupied.

CLEANSING DEPARTMENT.

The Cleansing Superintendent, Mr. T. C. Storer, has control of this department and with the assistance of Mr. Robt. H. Storer is responsible for the organisation and practical working of the department including the removal of night soil.

The cleansing of the promenade and supervision of the sea banks, public shelters, and attendant of the life boat for bathers also forms part of the work of the Superintendent during ths summer months.

The work is divided into two sections, day and night scavenging. Part of the work is done by contract and part by Corporation employees.

DAY SCAVENGING.—This work includes street cleansing, watering, flushing of sewers, removal of ashes and shop refuse, snow etc. There is also the supervision of the salt water reservoir which is utilised for street cleansing, as a supply to the swimming bath at Hawkey's Lane, to the public baths in Saville Street and to many private dwellings. The number of employees in the day section averaged about 50 men and 7 horses with cartmen.

The amount of refuse dealt with by day scavenging during the year was :—

Street sweepings	7702	loads.
Ashes and trade refuse ...	1983	,,
Paper, rags, etc.	878	,,
Road mud	237	,,
		,,
Total	10800	loads.

The number of vans of water used for street watering was 2821 and for flushing sewers 1947. The amount of refuse delivered and consumed at the destructor amounted to 2661 loads.

NIGHT SCAVENGING.—The work of this section includes the emptying of all ashpits and sanitary pails and the carting of all household refuse to the manure depot or other tips.

Fifty-five men and 21 horses were employed on an average in this section, and the amount of refuse dealt with was :—

Removed to manure depot ...	21,687	loads.
,, ,, farmers and others	11,298	,,
,, ,, destructor ..	783	,,
Total	33,768	loads.

The following table shows the number of ashpits, pails, etc., in the district :—

Emptied by	Privy Pails used as conveniences	Privy Ashpits.	Dry Ashbins, Pails, Boxes, &c.	Dry Ashpits.	Blood Kits.
Corporation	4057	377	226	96	60
Contractor	4871	130	766	24	20
Total	8928	507	992	120	80

Thirty ashpits on the non contracted area and 10 ashpits on the contract area have been abolished during the year.

The Borough in so far as removal of night soil is concerned is divided into two areas, viz. :—

(a) Contracted area comprising 11 districts. In 6 of these districts and in portions of other 2 districts the pails are emptied nightly with the

exception of Saturday night. In the remaining districts pails are attended to on 4 nights in the week.

(b) Non-contracted area comprising 8 districts in which the pails are attended to nightly with the exception of Saturday.

As the Committee were not satisfied with the work of the contractor, the unexpired portion of the contract which ended on 31st March, 1914, was carried out by Mr. Brand from 1st August.

At the end of the year 1913, 8,928 houses were provided with privy pails, there were 507 privy-ashpits and about 3,566 houses were provided with water closets.

METEOROLOGY

The highest temperature during the year was 76° F in the month of August, or 4° higher than the highest temperature of the previous year.

The lowest temperature 23° F was recorded in the month of March.

The mean barometric pressure varied throughout the year from 29·600 of mercury recorded in the month of March to 30·174″ in the month of June.

February was the driest month in the year having 12 wet days with a total rainfall of 0·49″, although August had only 7 wet days but a heavier rainfall than during the month of February. The heaviest rainfall was recorded in the months of January and September, each having a total rainfall of 4·17″ with 21 wet days in January and 16 in September. The total rainfall for the year was 24·18″. Rain fell on 181 days during the year.

The average rainfall at Tynemouth during the last 10 years was as as follows :—

Year	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Inches	20·45	18·69	26·46	24·94	20·02	28·92	24·37	26·26	32·39	24·18

Average for 10 years 24·66″.

Details of the mean meteorological readings for the year 1913 as recorded by the Meteorological Office, North Shields, were as follows :—

AVERAGE METEOROLOGICAL READINGS AT NORTH SHIELDS,

FOR THE YEAR ENDING 31st DECEMBER, 1913.

MONTH.	BAROMETER	TEMPERATURE OF AIR.						Prevailing Direction of Wind.	RAINFALL.	
		Mean of				Absolute Extremes.				
	Mean Pressure in inches.	8·0 a.m. Dry Bulb.	9·0 a.m. Wet Bulb.	Daily Max.	Daily Min.	Max.	Min.		Number of Days on which Rain has fallen.	Amount of Rainfall in inches.
January ...	29·674	37·20	36·24	42·04	33·00	53	24	S.E. & S.	21	4·17
February ...	30·008	39·11	37·16	46·11	34·18	55	26	S. & S.S.W.	12	0·49
March... ...	29·600	39·02	36·23	47·22	33·27	54	23	S.W. & W.	20	2·30
April	29·749	42·19	41·06	50·22	37·20	60	30	S.S.W. & S.W.	19	2·62
May	29·788	46·23	45·18	55·01	41·29	68	34	S.W. & W.	16	3·18
June	30·174	50·19	50·12	62·19	48·13	69	42	W.S.W. & E.N.E.	15	1·38
July	30·014	53·19	51·07	60·28	51·07	67	46	N. & W.	11	0·62
August ...	30·002	54·14	52·07	63·06	51·25	76	45	S.W. & W.N.W.	7	0·62
September ...	29·953	54·06	52·06	61·01	51·19	70	42	N.N.E. & N.	16	4·17
October ...	29·779	49·07	47·02	56·01	46·10	62	32	N.E. & S.S.W.	13	1·84
November ...	29·932	45·07	43·08	51·16	41·16	58	35	S.W. & S.	21	1·62
December ...	29·879	40·18	38·15	45·22	36·17	56	24	W. & S.W.	10	1·17
								Total	181	24·18

Public Health Office,

Tynemouth.

ANNUAL REPORT
OF THE CHIEF SANITARY INSPECTOR.

Mr. Mayor, Madam and Gentlemen,

I beg to submit my Eight Annual Report, with tables, of the work done in the department during the year ending 31st December, 1913.

INSPECTIONS.—During the year frequent and regular inspections have been made of the several districts including these outlying viz :— Allotments, Middle Engine, Murton Row, Blue Houses, etc.

All houses in which cases of infectious disease had been notified, were visited and inquiries made as to the probable source of infection. Arrangements were also made for the removal of the patient to Hospital or isolation at home, and for the disinfection of rooms, bedding and clothing.

Visits have also been made to premises in connection with complaints as to nuisances, which in some cases were verified while in others no cause for complaint was found.

Frequent inspections have been made of all factories, workshops and workplaces (as per table) which have been from time to time notified by H.M. Inspector of Factories. The houses of outworkers, butchers' shops, slaughter-houses, premises where offensive trades are carried on, dairies, milkshops, farms, common and seamen's lodging houses have also been inspected.

NUISANCES.—During the year the number of notices served for the abatement of nuisances under the Public Health Acts and Local Bye-laws was 1,432 of which 1,260 were informal or preliminary, and 172 statutory notices. The informal notice was sufficient in many cases. Other work was found to be executed willingly by owners without any notice. The nuisances and defects found varied very much in character.

SANITARY CONVENIENCES.—Although a great improvement has been made by the provision of water-closets and dry ash-bins to all new buildings. I regret to say that there are still a large number of privy-middens in existence. The following figures show the conversions during the year:—

40 Privy middens were abolished and 30 water-closets and 27 privy-pail closets erected in their place. 7 additional water-closets were also provided to premises where the accommodation was considered insufficient.

OFFENSIVE TRADES.—There are now six separate trades carried on within the Borough which come under the above heading, all of which are frequently inspected. A great improvement has recently been effected in carrying on the gutscraping, skin-cleaning and fish-frying trades.

DRAIN TESTING.—The drains and sanitary fittings of 531 houses were inspected either on receipt of complaint, by request, or following a case of infectious disease.

The drains of 11 dwelling houses were tested by request, and 18 on suspicion of a nuisance or after receiving a complaint from the tenant, making a total of 29 tests, all of which revealed defects. All defective drains were either re-laid or put into a sanitary condition.

HOUSE-TO-HOUSE INSPECTION.—The house-to-house inspection under the Housing, Town Planning, etc., Act, 1909, has been continued. Full reports of houses inspected and where defects were found, were submitted to the Housing Committee each month. Inspection during the year was made of all tenemented houses in the various streets as given on pages 56-59. Many cases of overcrowding were found during the inspection, some of the families only occupying one room, but after considerable difficulty the overcrowding was abated by the occupants finding more suitable accommodation.

I regret to say that the overcrowding is not likely to diminish owing to the scarcity of houses of all sizes, especially two and three roomed tenements, unless immediate steps are taken to facilitate the provision of houses suitable for the working class and at a moderate rental.

The principal defects found during the inspection were defective roofs, spouting, surfaces of yards, privies and drainage. A number of rooms

were found damp and had defective ceilings, walls, floors and windows. A large quantity of refuse was also removed from attics, cellars and outhouses.

The following table shows the number of dwelling houses which have been dealt with during the year :—

Tenements inspected	817
Tenements considered unfit for human habitation ...	38
Representations made to Local Authority with a view to making of Closing Orders	36
Closing Orders made	9
Tenements, the defects in which were remedied without making of Closing Orders...	240
Dwelling houses which, after the making of Closing Orders, were put in a fit state for human habitation	1
Houses closed voluntarily by owner	27
Houses demolished voluntarily by owner...	22
Houses demolished by Order	10

On pages 56-59 will be found a list of houses where defects were found and the action taken thereon.

SEAMEN'S AND COMMON LODGING HOUSES.—There were 33 seamen's and 8 common lodging houses on the register on the 31st December 1913, providing accommodation for 438 and 286 lodgers respectively. All the houses are regularly inspected and were generally found in a satisfactory state, so far as cleanliness and management is concerned. The limewashing of room walls and ceilings, and also staircases and passages, is done regularly twice a year. There is an increase of 2 seamen's lodging houses, and the number of common lodging houses remains the same as the previous year.

FACTORIES AND WORKSHOPS.—The number of Factories and Workshops on the register at the end of the year was 221 (as per table) which includes 14 bakehouses and 3 laundries, all of which have been inspected, and in most cases the requirements of the Acts as to cleanliness, ventilation, air-space, sanitary conveniences, etc., were reasonably complied with, only in a few cases was it necessary to serve notices.

The number of outworkers on the register was 20, being a decrease of 6 compared with the previous year, and all of which were visited at least twice during the year.

DAIRIES, DAIRY FARMS AND MILKSHOPS.—There are 21 dairy-farms or cowkeepers within the Borough, being an increase of 1 compared with the previous year. The total number of cows kept at the time of the last inspection was 241 being a decrease of 29. The number of cows varied from 2 to 31. The number of persons registered to sell milk, including shops and dairies, was 166. All premises registered for the sale of milk were inspected at least twice during the year, as well as dairy farms, and they were found fairly satisfactory, only on very few occasions had instructions to be given for the limewashing of the cowsheds. When visiting the farms I was accompanied by the Veterinary Surgeon who inspected all the cows and found it necessary occasionally to take samples of milk direct from the cow for examination for tubercle bacillus.

BUTCHERS' SHOPS AND SLAUGHTER HOUSES.—During the year inspections were made of these premises while slaughtering was being carried on. There were 18 butchers who slaughtered in their shops, and 24 had separate slaughter houses. 19 dealt in frozen or chilled meat only. The number of cattle slaughtered in the Borough was fewer than in previous years owing to the large sale of frozen and chilled meat.

INSPECTION OF FISH AND FISH CURING PREMISES.—An inspection of fish landed by boat and rail at the Fish Market is made each morning.

The quantity of fish condemned during the year was as follows :—

White fish 9 stones.
Shrimps 17¼ „
Mackerel 72 „
Mussels 8 „
Herrings 3000 boxes weighing 250 tons.

All condemned fish is immediately sent to the Fish Guano Works at the Low Lights.

The number of fish curing and smoking premises is increasing yearly, many of them having been recently erected and properly constructed to

suit the trade. All the premises are frequently inspected while the trade is being carried on, but no cause for complaint in respect of nuisance was found, limewashing and cleansing being regularly done.

SAMPLES OF FOOD AND DRUGS.—The number of samples purchased for analysis during the year was 186, of these 126 were "Formal" and 60 "Informal" samples taken under the Sale of Food and Drug Acts; of these five were the subject of legal preceedings, the result of which will be found in the table. There were also 13 samples of milk certified to be below the standard by the public Analyst, but the deficiency was not considered sufficient to warrant proceedings being taken. In each case the responsible person was either brought before the Health Committee to explain the deficiency, or a letter of caution was sent by the Town Clerk.

INFECTIOUS DISEASES.—All cases of infectious disease notified during the year were visited and inquiries made. The Inspectors also removed patients to hospital when necessary. After removal of the patient to hospital or at the termination of the illness, the infected rooms were disinfected and the bedding removed to the disinfecting stove at the hospital. A total of 487 rooms and 3077 articles were disinfected during the year.

I am, Madam and Gentlemen,

Your obedient servant,

GIBSON EDWARDS,

Chief Sanitary Inspector.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action taken.
Northumberland Street ...	10	Defective floors, windows, roofs, spouting, privies, passages, staircase, fireplaces, and surfaces of yards. Insufficient sanitary accommodation. Rooms very dark. Damp walls.	Notices served, defects remedied and additional sanitary accommodation provided.
Pottery Yard...	4	Defective roofs, walls, floors and windows. Defective and dirty passages and staircases. Defective downspouts and privies	Notices served and defects remedied.
do.	1	Overcrowded by 1 adult and 2 children	Overcrowding abated.
Reed Street	23	Defective walls, floors, doors, windows, fireplaces and ceilings of rooms; privies, roofs, spoutings, wash-houses, stairs and ashpits. Defective and dirty passages and staircases. Dangerous archway. Insufficient light and ventilation. Damp walls. Accumulations of refuse. Insufficient sanitary accommodation.	Notices served, defects remedied, refuse removed, additional light and ventilation provided and 2 additional w.c.s provided.
do.	1	Overcrowded by 2 adults	Overcrowding abated.
do.	1	Overcrowded by 1 child	do.
Fawcus's Buildings	3	Defective floors, walls, windows and ceiling of rooms. Defective roofs and privies. Accumulations of refuse.	Notices served, defects remedied and refuse removed.
Brown's Buildings	2	Defective roofs of buildings	Notices served, defects partly remedied.
Percy Court	1	Defective roof causing dampness. Defective spouting and windows ...	Notice served and defects remedied.
East Percy Street	9	Defective windows, pavements of yards, privies, outhouses, passage walls, roofs, spouting, skylights. No means for removing surface water from yards.	Notices served, defects remedied and provision made for removing surface water.
do.	1	Two rooms overcrowded by two children	Overcrowding abated.
do.	1	Two rooms overcrowded by two adults	do.
do.	1	Two rooms overcrowded by three adults	do
Charlotte Street	23	Defective windows, ceilings, walls, floors, fireplaces, privies, roofs, spoutings, surfaces of yards, and w.c. fittings, damp walls, defective and dirty passages and staircases. Insufficient sanitary accommodation. Obstructed w.c.'s, No system of drainage.	Notices served, defects remedied and additional w.c. provided.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action Taken.
Reed's Court	3	Defective and dirty passages and staircases. Offensive odours from stables. Defective privies, walls and ceilings of rooms.	Notices served, defects remedied, staircase walls coloured and nuisance from stables abated.
Ainsley's Court	1	Defective floors and windows of rooms	Notice served and defects remedied.
Back Reed Street	7	Defective ceilings and windows of rooms; defective roof. Insufficient sanitary accommodation.	Notices served and defects remedied. Additional w.c. provided.
Phœnix Terrace	1	Defective roof and insufficient ventilation	Notice served and roof repaired.
George Street	5	Defective roofs, spoutings, surfaces of yards, privies, passages; walls, ceilings, windows and floors of rooms Damp walls.	Notices served and defects remedied.
Back George Street	1	Defective spouting, stairs, gallery and floors of rooms	Notice served and defects remedied.
George's Terrace	9	Defective floors, walls, ceilings, windows, fireplaces, stairs, privies and roofs. Insufficient sanitary accommodation.	Notices served and defects remedied. 2 additional w.c.s provided.
King Street	12	Defective windows, doors, ceilings, walls, fireplaces, roofs, spouting, privies, surfaces of yards and washhouses. Dangerous stairs. Untrapped scullery sinks. Insufficient ventilation. Damp walls. Defective and dirty passages and staircases.	Notices served, defects remedied and additional ventilation provided.
Ponton's Buildings	6	Defective windows, floors, walls and ceilings of rooms, privies, roofs, spoutings and surfaces of yards. Damp walls. Defective and dirty passages and staircases. Dangerous gallery.	Notices served, defects remedied, dampness prevented and staircase walls coloured.
Union Stairs	1	One room overcrowded	Overcrowding abated.
Brown's Court, Cullercoats ...	1	One room overcrowded	do.
Good Design Yard	1	Defective roof, floors, fireplaces, passage walls, and surface of yard. Damp walls.	Notice served and defects remedied.
Pine Apple Court	1	Defective roof and privy. Defective and dirty passage and staircase ...	Notice served, defects remedied and staircase walls coloured.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action Taken.
Queen Street	37	Defective pavement of yards, privies, roofs, stairs, stair-landings, windows, floors, walls, ceilings, doors, passage ceilings and floors, fireplaces, washhouses, skylights, cupboards, yard door, roofs and doors of passages and staircases. Insufficient sanitary accommodation. Damp walls. Defective and obstructed spouting and downspouts. Accumulations of refuse. Dangerous chimney stacks. Dirty staircases.	Notices served, defects remedied, additional sanitary accommodation provided, refuse removed and staircase walls coloured.
do.	1	Two rooms overcrowded by 1 adult and 1 child	Overcrowding abated.
Queen's Court	1	Defective walls, floors, ceilings, windows, downspouts, spouting, cupboards and roofs. Damp walls. Defective and dirty passage and staircase. Dirty yard. Dangerous stairs and gallery.	Notice served, defects remedied and passage and yard cleansed.
Elliott's Cottages	2	Defective floors, windows, ceilings, fireplaces, roofs, cupboards and downspout. Accumulations of refuse. Insufficient ventilation. Smoky chimneys. Dilapidated out-houses.	Notices served, defects remedied, out-houses rebuilt, additional ventilation provided, and refuse removed.
Graham's Yard	2	Defective windows, floors, spoutings, downspouts, privies, doors, washhouses, pavements of yards, and roofs. Defective and dirty passage and staircase. Accumulations of refuse. Insufficient ventilation. Damp walls.	Notices served, defects and dampness remedied, staircase walls coloured, refuse removed and additional ventilation provided.
Causey Bank...	1	Defective windows, ceilings, walls and floors. Obstructed drains. Defective and dirty passages and staircases.	Notice served, defects remedied, drain cleansed and walls of staircase coloured.
Church Lane	1	Defective roof, downspout, privy, floors and stairlanding. Defective and dirty passage and staircase.	Notice served, defects remedied and staircase walls coloured.
Church Street	69	Defective windows, doors, fireplaces, walls, ceilings, floors, stairs, stair-landing, roofs, spoutings, pavements of yard, waste pipes, cupboards, privies, yard walls, out-houses, coal-houses and underground tank. Damp rooms. Defective and dirty passages and staircases. Accumulations of refuse. Insufficient sanitary conveniences. Attic unfit for human habitation. Dangerous handrails.	Notices served, defects remedied, staircase and passage walls limewashed, additional sanitary accommodation provided, refuse removed and attic closed.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action Taken.
Church Street	1	One room overcrowded	Overcrowding abated.
Crozier's Yard	2	Defective roofs, windows, walls and floors of rooms	Notices served and defects remedied.
Upper Queen Street	3	Obstructed drains. Defective downspouts, pavements of yards and privies.	Notices served, defects remedied, drains cleansed and reinstated in sanitary condition.
Queen's Terrace	6	Defective privies, spoutings, floors, ceilings, fireplaces and windows. Accumulations of refuse. Insufficient sanitary conveniences.	Notices served, defects remedied,additional privy provided and refuse removed.
Upper Pearson Street	4	Damp rooms. Defective floors, doors, windows, fireplaces, roofs, stairs, yard doors, privies, surfaces of yards and passage floors.	Notices served, defects remedied and dampness prevented.
Linskill Street	53	Damp rooms. Accumulations of refuse. Defective and dirtv passages and staircases. Insufficient sanitary conveniences. Obstructed drain. Defective windows, doors, ceilings, walls, floors, roofs, spouting, downspouts, privies, fireplaces, stairs, pavements of yards, yard walls, cupboards, gullies and ashpits.	Notices served, defects remedied, drain and gully cleansed and repaired, ashpit converted to privy.
Tyne Street	1	Defective ceilings, windows, floors, walls of rooms. Damp rooms.	Notices served and defects remedied.
Stephenson Street	1	Defective floors, windows, walls and fireplaces of rooms. Defective privies	do.
Back Linskill Street	1	Defective windows, ceilings, privies, wastepipes and passage ceiling. ...	do.

Factories, Workshops, Workplaces and Homework.

1.—Inspection (Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.)

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (Including Factory Laundries) ...	42	3	
Workshops (Including Workshop Laundries)	333	42	
Workplaces (Other than Outworkers' premises included in Part 3 of this Report)... ...	Nil.	Nil.	
Total...	375	45	

2.—Defects Found.

Particulars.	Number of Defects.			Number of Prosecutions
	Found.	Remedied.	Referred to H M. Inspector.	
Nuisances under the Public Health Acts:—				
Want of Cleanliness	18	17		
Want of Ventilation	5	4		
Overcrowding	—	—		
Sanitary Accommodation — insufficient	8	5		
Sanitary Accommodation — unsuitable or defective	7	6		
Sanitary Accommodation — not separate for sexes	7	4		
Other Matters	—	—		
Total...	45	36		

3.—Home Work.

Outworkers' Lists, Section 107.

Lists received from Employers sending twice in the year—			
Wearing Apparel—[1] Making, &c. ...	Lists 4	22	names.
Wool workers	„ 2	2	„
Lists received from Employers sending once in the year—			
Wearing Apparel—[1] Making, &c. ...	Lists 3	3	„
Shoemaker	„ —	—	„
Furniture and Upholstery	„ —	—	„
		*27	names.

* 7 of these names appeared on two lists, therefore making the total number of individuals employed as outworkers 20.

As no lists had been received, 6 letters, requesting that the return of outworkers be sent in at once, were sent to the various firms in the Borough, but in the majority of cases replies were received stating that they employed no outworkers and did not think any return should be made.

4.—*Registered Workshops.*

Workshops on the Register (s. 131) at the end of the year. (1).		Number. (2).
Important classes of workshops, such as workshop bakehouses may be enumerated here.	The most important Workshops are :—	
	Bakers	14
	Fish Curers	34
	Joiners	22
	Milliners	11
	Shoemakers	13
	Tailors	19
	Other Trades	108
	Total number of Workshops on Register	221

5.—*Other Matters.*

Class (1).		Number (2).
Matters notified to H.M. Inspector of Factories :—		
Action taken in matters referred by H.M. Inspectors as remedial under the Public Health Acts, but not under the Factory Act (S. 5) ...	Notified by H.M. Inspector	45
	Reports (of action taken) sent to H.M. Inspectors	45
Underground Bakehouses (S. 101) :—		
In use at the end of the year...		None.

List of Workshops on the Register at the end of the year.

Basket Makers ... 1	Dyers 1	Photographers ... 5
Bakers 14	Engineers 9	Picture Framer .. 1
Boiler Makers... ... 1	Farriers 3	Perfumers 1
Boat Builders 1	Fish Curers 34	Plumbers 5
Bicycle Repairers ... 1	Gas Manufacturers ... 1	Printers 6
Biscuit Manufacturers 1	Hosiers... 2	Rag Sorters 2
Blacksmiths 4	Ice Manufacturers ... 2	Saddlers 1
Block & Mast Makers,. 1	Jewellers 6	Sail Makers 3
Brewers 1	Joiners 22	Salt Packers 3
Brick Makers 1	Laundries 3	Sausage Makers ... 1
Cabinetmakers ... 3	Lead Manufacturers ... 1	Shoemakers ... 13
Cartwrights 1	Metal Founders ... 3	Tailors... 19
Coffee Grinders ... 2	Milliners 11	Timber Merchants ... 5
Coach Builders .. 3	Mineral Water Makers 3	Tinsmiths 2
Compass Adjusters ... 1	Net Makers 3	Upholsterers 1
Confectioners 1	Oil and Guano Manufacturers ... 1	Waggoners 1
Dressmakers 8	Paint Manufacturers .. 1	Total 221
Drysalters 1		

ANALYSIS OF FOOD AND DRUGS.

Articles Analysed.	Number Analysed.	Result of Analysis		Extent of Adulteration.	Action Taken.
		Genu.	Adul.		
				FORMAL SAMPLES.	
Milk ...	109	92	17	35·0 % deficient in milk fat	Fined 40/- & costs.
				13·3 % do.	Case dismissed.
				10·0 % do.	Cautioned.
				16·6 % do.	Case withdrawn.
				3·3 % do.	Cautioned.
				1·6 % do.	do.
				3·3 % do.	do.
				1·6 % do.	do.
				2·3 % do.	do.
				1·6 % do.	do.
				7·7 % do.	do.
				15·0 % deficient in milk fat, 7·9 % deficient in non-fatty solids	Case Dismissed.
				6·5 % deficient in non-fatty solids	Cautioned.
				Very slightly deficient in milk fat	No action taken.
				8·3 % deficient in milk fat, 2·9 % deficient in non-fatty solids	Case Dismissed.
				1·6 % deficient in milk fat	Cautioned.
				1·6 % do.	do.
Cream ...	12	12	0		
Butter ...	1	1	0		
Whisky	4	3	1	25·5° under proof	No action taken.
				INFORMAL SAMPLES.	
Lard ...	24	23	1	Contained more than 10 % of hydrogenised oil ...	Followed up by formal sample.
Butter ...	24	22	1	Found to be margarine	do.
			1	Contained a minute proportion of boric acid ...	No action taken.
Whisky	12	8	1	28·3° under proof	Followed up by formal sample
			1	31·6° do.	do.
			1	25·0° do.	do.
			1	33·1° do.	do.
TOTALS	186	161	25		

REPORT OF ADMINISTRATION IN CONNECTION WITH THE PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912.

1. MILK AND CREAM NOT SOLD AS PRESERVED CREAM.

	Number of samples examined for the presence of a preservative.	Number in which a preservative was reported to be present.
MILK ...	109	Nil.
CREAM ...	2	Nil.

2. CREAM SOLD AS PRESERVED CREAM.

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

(1) Correct statements made	10
(2) Statement incorrect	0
Total	10

(*b*) Determinations made of fat in cream sold as preserved cream.

(1) Above 35 per cent.	10
(2) Below 35 per cent.	0
	10

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

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

3. THICKENING SUBSTANCES.

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

4. OTHER OBSERVATIONS (IF ANY).

All samples of milk and cream, whether taken under the Food and Drugs Act or the Milk and Cream Regulations, 1912, by the Food and Drugs Inspector, are examined for the presence of a preservative by the Analyst, so that action may be taken either under the Food and Drugs Act or under Regulations as the case may be.

DISINFECTION OF HOUSES, Etc.

Cause.	Rooms.	Articles.
Scarlet Fever	258	2128
Diphtheria	74	404
Typhoid	28	213
Tuberculosis	47	265
Vermin	65	32
Puerperal	1	0
Itch	0	35
Acute Poliomyelitis	3	0
Other Diseases	11	0
	487	3077

SANITARY PAIL SYSTEM.

Notices served on account of defective sanitary pails, doors, etc. (including repeated notices) 2867

Notices complied with during the year 1976

(Percentage of notices complied with—69 per cent.)

Statutory notices served for new sanitary pails 130

Statutory notices complied with during the year 130

---

76 additional water closets were provided during the year.

40 ashpits have been abolished during the year.

A Summary of Nuisances dealt with by Notice under the Public Health Acts and Bye-laws.

NATURE OF NUISANCE DEALT WITH AND WORK REQUIRED TO BE DONE.

List of defects found during routine inspections and inspections under the Housing, Town Planning, etc., Act.

NUISANCES.	Public Health Act.		Housing, Town Planning, etc., Act.	
	Informal.	Statutory.	Informal.	Statutory.
Obstructed & Defective Drains & Gullies ...	148	22	5	1
Defective Ashpits to be repaired ...	5	3	...	...
„ Ashpits to be converted to W.C's	...	...	2	...
„ Privies and Outhouses ...	179	28	91	8
„ W.C Cistern, Pipes, etc, ...	11	2	1	...
„ and Obs. Spouting, Eaves, etc. ...	59	12	121	11
„ Walls, Floors and Ceilings of ro'ms	64	11	168	20
Dirty Yards, Privies, etc.	352	21	2	1
Defective Surfaces of Yards	27	8	41	3
No Water Supply	7	3	...	...
Cleanse Dirty Rooms	26	2	...	...
Additional W.C.s. required	15	6	19	7
Untrapped Scullery Sinks	2	...	1	...
Defective and Obstructed Scullery Sinks ...	9	1	2	...
Dirty and Defective Washhouses	9	1	10	1
Accumulated Manure or Refuse	43	10	22	4
Defective Chimneys and Fireplaces ...	16	3	30	2
Defective Roof of Building	52	9	93	10
Provide Urine Guards	16	...	...	...
Damp Rooms, etc.	23	2	46	2
Defective Doors...	9	3	18	3
Dirty Passages and Staircases	53	6	35	7
Insufficient Light and Ventilation ...	9	...	9	3
Defective Windows	33	6	105	7
Obstructed W.C.s.	24	1	1	...
Provide System of Drainage	1	1	2	...
Overcrowding	9	3	10	...
Provide Dustbins	15	3	1	...
Fowls	3	...	...	...
Defective Staircases and Passages... ...	40	5	102	15
Defective Underground Tanks ...	1	...	1	...
	1260	172	938	105

TABLE I.

Vital Statistics of Whole District during 1913 and previous Years.

Year.	Population estimated to middle of each Year.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Uncorrect'd Number.	Nett.						Under 1 Year of Age.		At all Ages.	
			Number.	Rate.	Number.	Rate.	of Non residents regist'r'd in the District.	of Residents not regist'r'd in the District.	Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1908	56654	1896	...	33·4	1037	18·3	85	1	262	138	951	16·8
1909	57428	1874	...	32·6	1018	17·5	63	3	239	127	958	16·7
1910	58223	1788	...	30·7	1035	17·7	66	2	224	125	971	16·6
1911	59008	1672	1653	28·0	963	16·4	74	38	204	123	927	15·7
1912	59809	1752	1734	28·9	1001	16·7	83	39	177	102	957	16·0
1913	60601	1766	1748	28·8	974	16·7	76	53	215	123	951	15·6

Area of District in acres (exclusive of area covered by water), 4,288.

Total population at all ages, 58,816.
Number of inhabited houses, 12,783.
Average number of persons per family, 4·5.
} At Census of 1911.

TABLE II.—Cases of Infectious Disease notified during the Year 1913.

Notifiable Disease.	Number of Cases Notified.								Total Cases Notified in each Ward.									Total Cases Removed to Hospital.
	At all Ages.	At Ages—Years.							1 Central.	2 Collingwood.	3 Dockwray.	4 Linskill.	5 Milbourn.	6 Percy.	7 Preston.	8 Rudyerd.	9 Trinity.	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upwards.										
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera (C) Plague (P) ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...
Diphtheria (including Membranous Croup)	71	...	22	39	3	6	1	...	2	9	7	11	1	23	12	4	2	35
Erysipelas	35	...	...	3	4	13	14	1	2	1	9	7	2	4	4	3	3	...
Scarlet Fever . ..	281	3	81	183	8	6	...	...	25	54	22	42	18	36	32	20	32	204
Typhus Fever	..	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...
Enteric Fever . ..	24	...	...	5	6	11	2	...	1	5	...	...	2	3	6	5	2	19
Relapsing Fever (R) Continued Fever (C)	1c	...	...	...	...	1c	...	...	...	...	...	...	...	...	1c	...	...	...
Puerperal Fever ...	3	...	...	...	1	2	...	...	...	...	...	1	...	1	1	...	...	..
Cerebro-Spinal Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Poliomyelitis	3	...	3	...	...	...	...	...	...	1	...	...	...	...	1	1	...	...
Pulmonary Tuberculosis	112	1	4	11	24	54	17	1	15	16	9	15	14	5	6	20	12	29
Other forms of Tuberculosis ...	121	7	25	66	9	12	1	1	16	10	17	13	18	6	18	7	16	3
Totals	651	11	135	307	55	105	35	3	61	96	64	89	55	78	81	60	67	290*

*Moor Park Hospital (Infectious) ... ... 258 cases.
do. do. (Tuberculosis) ... ... 14 ,,
Stannington Sanatorium ... ... 3 ,,
Barrasford do. ... ... 4 ,,
Woodburn do. ... ... 11 ,,

Total cases 290

Total available beds at Moor Park 56
Number of Infectious Diseases that can be concurrently treated 3

Isolation Hospital—Moor Park Hospital, near North Shields.
Sanatoria—Barrasford Sanatorium and Stannington Sanatorium, Northumberland; Woodburn Sanatorium, Edinburgh.

TABLE III.

Causes of, and Age at Death during the Year 1912.

Causes of Death.	Nett Deaths at the Subjoined ages of "Residents" whether occurring within or without the District.									Total Deaths whether of "Residents" or "Non-Residents" in Institutions in the District.
	All Ages	Under 1 year	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	
1	2	3	4	5	6	7	8	9	10	11
All Cases Certified	943	212	52	53	42	37	120	193	234	...
All Cases Uncertified	8	3	1	...	...	1	...	1	2	...
Enteric Fever	3	...	...	...	..	1	1	1	...	2
Small Pox	...	...	...	...	...	...	...	...	...	...
Measles	5	...	4	1	...		...	...	...	...
Scarlet Fever	13	1	1	6	4	...	1	...	...	5
Whooping Cough	3	2	...	1	...	...	...	...	...	...
Diphtheria and Croup	10	..	1	5	4	..	...	...	...	6
Influenza	3	...	...	1	...	...	...	1	1	...
Erysipelas	1	...	...	..	...	...	..	...	1	...
Phthisis (Pulmonary Tuberculosis)	52	...	...	...	1	16	25	9	1	11
Tuberculous Meningitis	8	3	...	2	2	1	...	...	...	...
Other Tuberculous Diseases	29	9	8	5	3	2	1	...	1	3
Cancer, malignant disease	58	...	...	1	...	...	11	24	22	21
Rheumatic Fever	4	...	...		1	...	1	2	...	...
Meningitis	14	8	1	1	3	...	1	...	...	1
Organic Heart Disease	75	1	...	...	5	3	10	33	23	14
Bronchitis	80	17	5	4	1	...	3	17	33	16
Pneumonia (all forms)	57	8	8	7	2	2	7	13	10	7
Other diseases of Respiratory organs	8	...	...	1	...	3	1	3	...	1
Diarrhœa and Enteritis	63	40	10	7	1	2	1	1	1	2
Appendicitis and Typhlitis	5	...	1	...	...	1	3	...	...	1
Cirrhosis of Liver	10	...	...	...	...	...	2	7	1	2
Alcoholism	3	...	...	...	..	...	2	...	1	2
Nephritis and Bright's Disease	22	...		1	...	...	3	10	8	5
Puerperal Fever	1	...	...	..	...	...	1	...	...	1
Other accidents and diseases of Pregnancy and Parturition	8	1	...	...	...	1	6	...	...	2
Congenital Debility and Malformation, including Premature Birth.	79	74	4	1	...	..	...	...	..	1
Violent Deaths, excluding Suicide	37	4	4	4	4	3	7	8	3	14
Suicides	4	...	...	...	...	..	1	2	1	2
Other Defined Diseases	275	45	5	5	11	3	23	59	124	69
Diseases ill-defined or unknown	21	2	1	...	...	...	9	4	5	4
	951	215	53	53	42	38	120	194	236	192
Sub-Entries included in above figures: Cerebro-spinal Meningitis	...									...
Sub-Entries included in above figures: Poliomyelitis	...									...

TABLE IIIA.

Causes of Deaths during the Year 1913.

Allocated to the Wards in which they occurred.

Causes of Death.	WARDS.									
	All Ages.	Central.	Collingwood.	Dockwray.	Linskill.	Milbourn.	Percy.	Preston.	Rudyerd.	Trinity.
Enteric Fever...	3	...	...	...	...	...	...	2	1	...
Small-pox	—	...		...	...	...	...	...	...	...
Measles	5	...	3	...	...	1	1	...	...	...
Scarlet Fever...	13	...	...	2	3	4	1	2	1	...
Whooping Cough	3	...	3	...	...	...	...	...	...	...
Diphtheria and Croup... ...	10	...	1	1	...	...	3	5	...	...
Influenza	3	...	1	...	...	...	...	1	1	...
Erysipelas	1	...	...	...	...	...	...	...	1	...
Phthisis(Pulmonary Tuberculosis)	52	10	7	5	6	7	1	3	8	5
Tuberculous Meningitis ...	8	2	...	2	...	1	...	2	1	...
Other Tuberculous Diseases ...	29	2	5	6	3	2	5	1	3	2
Cancer, malignant disease ...	58	3	6	10	9	5	7	9	6	3
Rheumatic Fever	4	...	1	...	...	...	...	1	1	1
Meningitis	14	1	1	3	1	1	1	1	2	3
Organic Heart Disease ...	75	8	11	7	5	13	5	7	10	9
Bronchitis	80	17	5	10	10	12	3	7	11	5
Pneumonia (all forms)...	57	6	4	8	7	11	6	2	7	6
Other diseases of respiratory organs	8	1	1	2	1	...	...	...	1	2
Diarrhœa and Enteritis ...	63	2	7	11	5	15	3	2	10	8
Appendicitis and Typhlitis ...	5	...	...	...	3	...	...	1	...	1
Cirrhosis of Liver	10	1	...	2	1	...	3	...	1	2
Alcoholism	3	2	...	...	...	...	...	...	1	...
Nephritis and Bright's Disease ...	22	2	3	3	3	2	1	5	...	3
Puerperal Fever	1	...	...	...	...	...	1	...	...	...
Other accidents and diseases of Pregnancy and Parturition...	8	1	1	...	1	2	...	...	1	2
Congenital Debility and Malformation,including Premature Birth	79	12	8	8	7	10	7	10	9	8
Violent Deaths, excluding Suicide	37	5	8	6	2	1	2	1	7	5
Suicide	4	1	2	...	...	...	1	...	...	...
Other Defined Diseases ..	275	27	27	41	29	27	27	41	28	28
Diseases ill-defined or unknown...	21	3	2	3	1	1	2	2	6	1
Tolals ...	951	106	107	130	97	115	80	105	117	94

TABLE IV.

Infantile Mortality during the Year 1913.

Nett Deaths from stated Causes at various Ages under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1–2 Weeks.	2–3 Weeks.	3–4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 months.	Total Deaths under 1 Year.
All causes :—										
Certified	59	9	12	5	88	37	40	21	29	212
Uncertified	3	...	...	...	...	...	...	...	...	3
Small-pox	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	1	...	1
Measles	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	1	...	1
Whooping Cough	...	...	2		2	...	...	...	...	2
Diphtheria and Croup ...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	..
Tuberculous Meningitis ...	...	...	...	...	...	...	...	2	...	2
Abdominal Tuberculosis ...	...	...	...	...	...	1	1	3	3	8
Other Tuberculous Diseases ...	...	...	...	...	...	...	1	...	...	1
Meningitis (not Tuberculous) ...	2	...	...	...	2	5	1	1	..	9
Convulsions	6	2	1	...	9	4	4	2	4	23
Laryngitis	...	...	...	...	...	..	...	...	...	..
Bronchitis	...	1	2	1	4	2	6	2	3	17
Pneumonia (all forms) ...	...	...	...	...	...	...	2	1	5	8
Diarrhœa	...	...	...	...	...	2	6	..	2	10
Enteritis	...	...	...	1	1	8	9	5	7	30
Gastritis	...	...	...	...	...	...	.	...	...	...
Syphilis	...	...	..	1	1	4	...	...	...	5
Rickets	...	...	...	...	..	...	..	...	...	
Suffocation, overlying ...	...	...	1	...	1	...	2	...	...	3
Injury at Birth	...	...	...	...	...	...	...	...	...	...
Atelectasis	...	...	...	...	...	...	...	...	...	...
Congenital Malformations ...	...	...	...	...	...	...	1	...	...	1
Premature Birth	28	2	3	1	34	3	...	...	...	37
Atrophy, Debility, and Marasmus	22	2	2	1	27	7	5	2	1	42
Other Causes	4	2	1	...	7	1	2	1	4	15
Totals ...	62	9	12	5	88	37	40	21	29	215

Nett Births in the year :—Legitimate, 1,673 ; Illegitimate, 75.

Nett Deaths in year of { Legitimate infants, 207. / Illegitimate do. 8.

IV.

Medical Inspection of School Children.

County Borough of Tynemouth.

FIFTH

ANNUAL REPORT

ON THE

Medical Inspection of School Children.

1913.

INDEX.

County Borough of Tynemouth Education Committee.

MEDICAL INSPECTION SUB-COMMITTEE.

Chairman :—Alderman W. Murray, J.P.

Councillor J. H. Tebb, J.P. — A. E. Hill, Esq., B.A.; J.P.

Councillor Maud Burnett. — Rev. S. Pearson.

STAFF.

School Medical Officer :
James A. Hislop, M.D. (Brux) ; L.R.C.P. ; D.P.H.

Assistant School Medical Officer :
James McConnell, M.B. (Durh) ; L.R.C.P. ; D.P.H.

School Nurse :
Miss J. L. Scott.

Clerk :
Tom Little.

Average number of children on School Registers	10532
Number of children in average attendance	9335
,, ,, ,, submitted for Medical Inspection	3823

EDUCATION OFFICES,

26 NORTHUMBERLAND SQUARE,

NORTH SHIELDS,

1ST MARCH, 1914.

TO THE CHAIRMAN AND MEMBERS OF THE
COUNTY BOROUGH OF TYNEMOUTH EDUCATION COMMITTEE.

Ladies and Gentlemen,

I beg to submit my Fifth Annual Report upon the Medical Inspection of Elementary School Children for the year ended 31st December, 1913.

The work pertaining to Medical Inspection continues smoothly.

The first complete Inspection of children conforming to three Age-Groups has been carried out during the year, viz. :— (a) Entrants, (b) 8-9 years of age, and (c) Leavers.

Important features in connection with the School Medical Work for the year under review have been as follows :—

(1) The Housing and better facilities provided for the Assistant School Medical Officer and Staff at the Education Offices, instead of at the Health Department.

(2) The first complete year's work of a Full Time School Nurse, including the commencement of Treatment of minor ailments, and the cleansing of verminous school children at the Cleansing Station.

(3) The appointment of a Medical Inspection Sub-Committee as a standing Sub-Committee of the Education Committee.

I am of opinion that while the work has grown in volume, yet at the same time it has also become more efficient, partly due to past experience, but principally to the sympathetic and consistent support and co-operation of all concerned in school work, and I take this opportunity of recording to them all my indebtedness and thanks.

Believe me,

Ladies and Gentlemen,

Your obedient servant,

JAMES McCONNELL.

GENERAL REVIEW OF THE HYGIENIC CONDITIONS PREVALENT IN THE SCHOOLS.

Structural Alterations during the Year.

Trinity School.—This School was re-opened as an Infants' Department on 6th January, 1913, after the extensive alterations mentioned in my last Report.

Western School.—Extensive alterations have been carried out in this School. The Infants' Department has been extended, divided into separate class-rooms with increased window area, and a new cloakroom provided; a Head Master's private room and a Cloak Room provided for the Boys' Department; and a heating apparatus installed for the whole School.

Cleanliness of Schools.

I consider that the School premises can now be maintained in a satisfactorily clean condition, provided the Head Teachers utilize correctly the present means at their disposal for checking the routine work of daily, weekly and vacation cleansing as set out in the regulations, and I am pleased to record a general higher standard than that of a few years back.

Christ Church, Preston, and St. Joseph's R. C. Schools have been colour-washed and painted both internally and externally; Eastern Senior and St. Cuthbert's R. C. Schools have been painted and colour-washed internally; and King Edward School has been painted externally.

Ventilation, Lighting and Warming.

Small improvements in the Lighting and Ventilation of certain class-rooms have been made at Christ Church, Royal Jubilee Girls' and St. Peter's Schools.

The installation of the new apparatus at Western School will, it is hoped, solve the question of the inadequate heating of this School, and the adoption of the Chaddock windows and replacement of the old obscured glass by plain glass has very materially improved the ventilation and lighting of this School.

Playgrounds.

The playground at Priory School has been partly asphalted.

The provision of a playing field for the Senior Boys and Girls at Royal Jubilee School should fill a long-felt want, and I hope it will be possible for arrangements to be made whereby these children may receive their physical drill in this area also.

Sanitation and Sanitary Conveniences.

Increased lavatory accommodation has been provided at Christ Church School.

The sanitary arrangements generally have been maintained in good order, and defects as reported have received attention.

Equipment.

During the year some of the unsatisfactory Desks have been replaced by up-to-date Dual Desks. Locker Desks are now being provided for the Senior Children.

CO-RELATION OF SCHOOL MEDICAL SERVICE WITH THE PUBLIC HEALTH SERVICE.

Precisely similar arrangements to those existing in past years to secure intimate relationship between Public Health and School Medical Work are being carried out at my new headquarters, and I do not consider that my removal from the Health Department to the Education Offices has in any way affected the efficient co-operation of these two services which has existed in past years. Up to the present time any action in connection with the control and detection of Infectious Diseases amongst School Children has been in every way just as efficient and expeditious as in the past.

Arrangements exist between the two services, the Head Teachers, and School Attendance Department for the notification and certification of all children suffering from the notifiable infectious diseases, affecting both their exclusion and re-admission to school.

Tuberculosis Officer.

In order to obviate overlapping of work as far as possible, arrangements have been made with this Officer to notify periodically to the Assistant School Medical Officer all cases of Tuberculosis affecting school children in three groups, viz. : (1) Cases undergoing treatment or supervision regularly at the Tuberculosis Clinic, whether sent or notified in the first place by the Assistant School Medical Officer or not, (2) cases under Private or Institutional treatment and not undergoing supervision by the Tuberculosis Officer, and (3) cases ceasing to remain under the supervision of the Tuberculosis Officer.

It is apparent therefore that class (1), being already actively supervised by the Tuberculosis Officer and certified as fit or unfit for school, do not require further supervision on our part so long as they are attending the Tuberculosis Clinic, but that classes (2) and (3) do require supervision on our part.

Already many school children have been sent by me to the Tuberculosis Clinic for report or treatment, and the co-operation thus established between the two services should be of great assistance in the control and treatment of all Tuberculous school children, especially as to the conditions under which they should be educated.

REVIEW OF THE ACTION TAKEN TO DETECT AND PREVENT THE SPREAD OF INFECTIOUS DISEASES, INCLUDING REFERENCE TO ACTION TAKEN UNDER ARTICLES 45 (b), 53 (b) AND 57 OF THE CODE, 1909.

Generally speaking, during the year under review there were considerably fewer cases of acute infectious diseases than in 1912, with a corresponding benefit in the School Attendance Returns.

The Weekly Return of Infectious Diseases reported by the Head Teachers, totalled monthly and yearly, with comparative figures for two preceding years, is shown in Table 1.

School closure was not found necessary during the past year, and no preventive action of a particularly large or important nature undertaken—school departments being disinfected and cleansed, swabs taken from throats and examined bacteriologically, hairs examined microscopically, and contacts supervised as part of the routine work for the control of infectious or contagious diseases.

Scarlet Fever, which commenced to be slightly more prevalent in the autumn of 1912, has continued so during the past year, but has always been under control.

A few more cases of Diphtheria were also reported.

Measles shows a marked decline upon last year and upon any previous year's records since 1909, the total cases for the year being 60, as compared with 601 in 1912.

Whooping Cough was much less prevalent, while Chicken Pox was a little more so.

TABLE I. **Cases of Infectious Diseases as Reported by Head Teachers in Weekly Returns.**

Disease.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Whole Year.
Scarlet Fever	21	15	16	9	6	3	7	—	17	5	26	11	136
Diphtheria	4	4	1	—	—	2	—	—	3	2	4	4	24
Enteric Fever	—	1	2	1	—	—	—	—	—	—	—	—	4
Measles	18	9	5	1	3	1	—	—	3	—	12	8	60
Whooping Cough	5	1	—	2	1	1	4	—	2	2	9	3	30
Chicken Pox	10	4	13	16	33	16	13	—	5	12	9	5	136
Influenza	8	7	5	5	1	—	—	—	—	—	1	—	27
Sore Throat	11	8	2	9	11	9	3	—	2	—	5	—	60
Mumps	12	9	4	4	5	4	1	—	4	2	6	1	52
Ophthalmia	4	10	3	12	14	8	4	—	8	4	14	5	86
Ringworm	10	14	9	20	24	11	12	—	9	7	11	1	128
Impetigo...	14	7	12	15	23	11	17	—	25	23	33	3	183
Scabies	14	16	10	15	16	3	2	—	6	6	13	3	104
Verminous Conditions... ...	2	1	3	2	1	1	5	—	6	7	2	1	31
Total New Cases	133	106	85	111	138	70	68	—	90	70	145	45	1061
Corresponding period 1912 ...	151	137	138	72	102	109	114	—	368	358	227	83	1859
Corresponding period 1911 ...	135	189	185	162	193	146	170	—	125	108	152	108	1672
Average weekly absence owing to Infectious Disease and Contact with same	227	180	170	151	152	169	131	—	102	116	173	164	157
Corresponding period 1912 ..	147	141	119	135	117	155	171	—	271	579	424	282	236
Corresponding period 1911 ...	166	168	186	167	163	157	155	—	83	99	118	140	145
Percentage of absentees owing to Infectious Diseases and Contact with same	2.0	1.7	1.6	1.4	1.4	1.5	1.2	—	1.1	1.1	1.6	1.5	1.5
Corresponding period 1912 ...	1.4	1.3	1.1	1.2	1.1	1.4	1.6	—	2.5	5.4	4.0	2.6	2.2
Corresponding period 1911 ...	1.5	1.6	1.9	1.5	1.5	1.4	1.6	—	.7	.9	1.1	1.4	1.3
Percentage of absentees from all causes	14.3	10.4	9.3	8.1	8.8	9.4	9.5	—	7.9	7.9	9.4	10.0	9.4
Corresponding period 1912 ...	12.1	12.2	8.0	7.8	8.0	9.3	10.8	—	10.3	14.0	14.2	13.6	11.0
Corresponding period 1911 ...	10.8	10.2	11.0	9.3	9.3	9.4	10.3	—	8.8	9.1	9.4	10.4	10.0

Comparing the number of cases of Ringworm notified in Table I. for this year with a similar return of the previous year, there is a decline of 15 cases, namely from 143 to 128, and of the latter number this year all except six were periodically examined at the School Clinic.

The actual number of new cases periodically examined at the School Clinic during the past four years was as follows :—

	1910	1911	1912	1913
Ringworm, scalp	92	89	75	83
Ringworm, body	17	44	39	39
	109	133	114	122

I believe we have now a very complete knowledge of the total number of children affected, and that there are very few unrecognised cases now attending school. This disease was more particularly prevalent amongst the scholars at King Edward, Priory and Cullercoats Schools.

The absence from school of the more severe and old standing cases is still of a prolonged nature, amounting to 12 months and more in some cases—these cases really require X-rays treatment.

With the advent of drug treatment at the School Clinic, I hope that, provided a sharp look-out is kept to ensure cases continuing to come under observation and treatment early, considerable inroads will be made upon this most troublesome disease, and it will be interesting to note what improvement takes place during the next year.

The School Nurse will this year, besides undertaking treatment, examine as many contacts as thought necessary, and give suitable directions to the parents.

For some time I have been under the impression that the exclusion of Ringworm cases from school has had very little (if any) effect in preventing the spread of infection, and I consider that these children would be much better collected together in one or

two special classes, so that while they continue to receive their education, they could be also better supervised and treated.

During the year 144 specimens of hair were examined microscopically for Ringworm, of which 105 proved positive and 39 negative.

Scabies (Itch) continues a most troublesome disease to treat satisfactorily under the conditions existing at the present time in many of the homes of the children. As a rule, households, including adults and children under school age are affected at one time, and to ensure adequate treatment, facilities are really required whereby these cases can procure treatment by baths, and have all their clothing, bedding, &c., disinfected. The loss of school attendance in a year through this disease is very considerable.

The nature and number of Exclusion and Re-admission Certificates granted to children under Article 53 (b) during the year is set out in Table II.

TABLE II.

INFECTIOUS :		
Acute Infectious Fevers :		
Notifiable	182	
Non-Notifiable	13	
Contacts	315	
Diseases of Skin	407	
Pediculosis	46	
Ophthalmia	29	
		992
NON-INFECTIOUS :		
Diseases of Eye	88	
Diseases of Nutrition	45	
Tuberculosis	26	
Do. Suspected	5	
Diseases of Heart	10	
Rheumatism	5	
Chorea and Epilepsy	7	
Other Disease or Defect	149	
		335
Total Exclusions		1327
Total Re-admission Certificates		1037

A copy of each Certificate is sent to each Head Teacher concerned, and to the Chief Attendance Officer. All children excluded from school by the Certificate of the Assistant School Medical Officer must now have a Re-admission Certificate made out by him before they are re-admitted to school.

A Register of all children excluded by Certificate of the School Medical Officer is now kept.

ORGANISATION, SUPERVISION AND METHODS OF MEDICAL INSPECTION ADOPTED.

The Chief School Medical Officer undertakes the control of the notifiable Infectious Diseases amongst school children, and also of the non-notifiable diseases when of an epidemic nature, leaving myself free to undertake the Routine Inspections at the Schools, Special Inspections, further examinations and re-examinations at Schools or Clinic, Treatment, and generally to organise and supervise the clerical work.

Seeing that the Routine Inspections now include a third age-group, namely, children 8-9 years old, considerably more of my time will be taken up in getting round the Schools.

The Schedule of Inspection as suggested by the Board of Education is carried out with a few minor additions, and I find it possible to make from 40 to 45 full inspections or 50 to 55 Infant Inspections per School Day—an average of 6 minutes per child, but this is only made possible by the Head Teachers having already prepared and filled in certain of the items on the Medical Inspection Cards. I have not up to the present time found it necessary to occupy the School Nurse's time at the Routine Inspections, owing to the ready help rendered to me by both Head and Assistant Teachers, for which I must renew my thanks.

Parents are invited by printed notices to attend the inspection of their children, and to obviate as much as possible long waiting on their part a certain number are invited at stated intervals of time per morning and afternoon session. The nature

of any defect found is explained and the necessary treatment recommended to those parents present. These cases are subsequently "Followed Up" by the School Nurse, and such cases re-examined by me at intervals as thought necessary.

In cases where a defect is found, and parents or guardians are unable to be present at the ordinary routine inspections I endeavour as far as possible to secure an interview either at the School or School Clinic, and though this necessitates going over ground a second time, I consider it well worth the while.

The number of Parents present at Inspections, declining Inspection, and the number of children absent on the dates of Inspections can be shown thus :—

TABLE III.

	Entrants.		Leavers.		Intermediate.		Total Routine.	Special Cases and further Examinations.
	Boys	Girls	Boys	Girls	Boys	Girls		
Parents present	333	320	125	180	202	223	1383 **36.1**	1332 **88.0**
Parents declining Inspection	1	1	—	2	—	2	6 **.1**	—
Children absent on Inspection	—	2	1	1	1	1	6 **.1**	—

Figures in heavy type indicate percentage.

The number of Parents attending the Inspection of their children shows an increase of 7 per cent. over the previous year, and I believe still more would be present if their home duties permitted them, for as a rule there are a greater number present in the afternoons than in the mornings.

Parents declining inspection last year were extremely few, and the children absent from inspection were reduced to their lowest limit, but necessitated in some instances a third visit to the schools.

The only Inspections not conducted on School premises during the year were those at Christ Church School, where they were carried out as in previous years at the adjacent Parish Hall.

The disturbance to the ordinary school arrangements is necessarily more considerable in those schools which have not a private room to place at my disposal, and necessitates a temporary re-arrangement of classes, whilst in some instances the noise incidental to school work is distinctly troublesome.

GENERAL STATEMENT OF THE EXTENT AND SCOPE OF THE MEDICAL INSPECTION CARRIED OUT DURING THE YEAR.

The number of visits made to school departments was :—

Routine Inspections and Re-examinations.....	135
Absentees from Routine Inspections and Re-examinations	57
	192

Roughly, each school block was visited once per year for Routine Inspections, the length of the visit varying with the number of children for inspection, and on two further occasions for absentees and re-examinations. On each occasion, Head Teachers are at liberty to present any other children for Special Inspection, though they are encouraged to send such cases to the Clinic on certain days each week, as in my opinion they can be better and sooner dealt with there.

The children inspected during the year conform to the following groups :—

I. Routine Inspections.
   (a) Infants not previously Inspected (Entrants).
   (b) Children 8-9 years old.
   (c) Children liable to leave school within 12 months (Leavers).

II. Special Inspections.
(a) At Schools.
(b) At School Clinic.

III. Inspections in connection with the prevalence of any Infectious Disease. (No record of these Inspections is made).

The number of children inspected during the year, classified according to age and sex in the Routine Inspections, and sex only in the Special Inspections, and the number of children re-examined, was as follows :—

TABLE IV.

Number of Children Inspected 1st Jan., 1913, to 31st Dec., 1913.

A. "Code" Groups.

Age.	Entrants.						Leavers.					Grand Total
	3	4	5	6	Other ages.	Total	12	13	14	Other ages.	Total	
Boys	—	—	506	252	7	765	20	555	3	15	593	1358
Girls	—	—	491	257	5	753	33	502	—	—	535	1288
Totals	—	—	997	509	12	1518	53	1057	3	15	1128	2646

B. Groups other than "Code."

	Intermediate Group (if any).	Special Cases.	Re-examinations (i.e., No. of children re-examined).
Boys	572	552	623
Girls	605	635	622
Totals	1177	1187	1245

There was a total increase of 1045 Inspections over 1912, consisting of 183 Entrants, 685 Intermediates, and 177 Leavers. During 1912, only certain children in the 8-9 years old group were examined for reasons stated in my last report, and the increase in the Leavers group calls for particular attention, as it points to a further stoppage of any leakage due to children leaving school without medical inspection. The Inspections carried out in 1913 represent the first complete inspection of elementary school children mentioned in the three age groups.

For comparative purposes, I have drawn up in tabular formation the number of Routine Inspections carried out annually since the inauguration of medical inspection in this Borough.

TABLE V.

	1909			1910			1911			1912			1913		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Entrants	659	627	1286	641	574	1215	637	608	1245	721	614	1335	765	753	1518
Intermediate Group	—	—	—	203	165	368	599	536	1135*	243	249	492†	593	535	1128
Leavers	436	332	768	330	322	652	376	327	703	495	456	951	572	605	1177
Totals	1095	959	2054	1174	1061	2235	1612	1471	3083	1459	1319	2778	1930	1893	3823

* The intermediate age-group of children inspected in this year was 7-8 years.

† The intermediate age-group of children inspected in this year was 8-9 years, but only those children were inspected who had not been inspected in the previous year as 7-8 years old.

The number of children presented at the School Clinic for special inspection has grown enormously since the inception of this work 4 years ago, and represents an important branch of the work carried out in a year.

Further Examinations.

In order that a more thorough and careful examination may be made of certain children found defective at the routine inspections in the schools, the parents or guardians of such children are asked by printed notice to attend with such children at the School Clinic on Saturday mornings, when the nature of some of the defects can be demonstrated, others explained, and the requisite treatment recommended.

326 further examinations of children found defective at the Routine Inspections were made during the year (see Table VIII.)

The nature and number of defects for which treatment was recommended, together with the results, including the nature and agency of treatment, is shown in Table VI.

COMMENTS UPON TABLE VI., INCLUDING REVIEW OF METHODS EMPLOYED OR AVAILABLE FOR THE TREATMENT OF DEFECTS, AND AN ACCOUNT OF THE ACTION OF THE SCHOOL NURSE IN OBTAINING OR ASSISTING IN THE TREATMENT OF SUCH DEFECTS.

Routine Cases,

For each child discovered with a physical defect requiring treatment or observation, whether of a major or minor character, a duplicate card (yellow), smaller and capable of being carried in a wallet, is made out, upon which is extracted from the Routine Inspection Card the nature of the defect and the treatment recommended. The results of " Following Up " and treatment adopted

TABLE VI.—Defects for which Treatment was recommended, with Results.

Nature of Defect.	Cases.					Results.						Nature of Treatment obtained.			Agency of Treatment obtained.				
						Treated													
	Old Cases brought forward.	Routine Cases.	Special Cases.	Attendance Officer's Cases.	Total Cases.	Cured or alleviated.	Improved.	Unchanged or result unknown.	Untreated.	Left School or District.	Under S.M.O.'s observation only.	Medication.	Operation.	Special attention at Home or School under S.M.O.'s directions and supervision.	Private Medical Practitioner.	Hospital or Charitable Institution.	School Clinic.	Poor Law.	Home or School under S.M.O.'s directions and supervision.
Non-Infectious Diseases—																			
NOSE AND THROAT :—																			
Enlarged Tonsils & Adenoids (probable)	73	83	20	—	176		86	38	38		14	9	62	53	9	62			53
Do. old operation cases	66	1	1	—	68		62	5			1		2	65	1	1			65
Other Disease	7	1	7	3	18	10	7	1				11		7	3	1	1		13
ENLARGED CERVICAL GLANDS	—	1	5	3	9		9					7		2		1	2		6
EARS AND HEARING :—																			
Suppuration	31	22	21	4	78		46	26	4	2		31	1	40	9	11	4	2	46
Deafness	11	17	4	—	32		15	11	2	1	3	7	1	18	2	6			18
Obstruction	—	1	2	—	3	3						3			1				2
Other Disease	—	—	1	1	2			2				2				2			
EYES :—																			
External Disease	38	19	54	35	146	81	60	3			2	140		4	20	50	31	1	42
Defective Vision & Squint	57	171	80	9	317	146		4	105	6	56	150			27	118		5	
Other Disease or Defect	7	2	2	2	13	4	5	4				12	1			6		1	6
HEART AND CIRCULATION :—																			
Organic	16	15	6	3	40		25	7		6	2 dead	9		23	5	4		2	21
Functional	1	3			4	1	3							4					4
NUTRITION :—																			
Malnutrition, Anæmia, Debility	38	13	25	25	101	1	92	3		5		19		77	11	6	2		77
Rickets	13	9	2	—	24		22	1	1			3	1	19		4			19
LUNGS (non-Tubercular)	3	2	4	9	18	14	4					11		7		1			17
NERVOUS SYSTEM	12	3	12	4	31	4	9	17		1		20		10	9	9		1	11
DEFORMITIES & MALFORMATIONS	7	5	4		16		7		6	3		2	2	3	1	3			3
TEETH	3	7	1	4	15	7	3		5			9	1		6				4
DISEASES OF SKIN	9	10	48	21	88	80	4	1		3		82		3	10	16	23	3	33
OTHER DISEASE OR DEFECT	3	3	27	28	61	56	2		2	1		50	5	3	9	14	17		18
Infectious Diseases—																			
SKIN :—																			
Ringworm, scalp	13	14	50	19	96	65	30			1		95			29	24	30	1	11
,, body	—	—	30	9	39	39						39			4		9		26
Impetigo	2	3	137	99	241	233	7			1		240			15	10	68		147
Scabies	5	3	54	25	87	70	17					87			6	4	22	4	51
VERMINOUS CONDITIONS	1	1	26	30	58	56	2					58			4	1	11	2	40
TUBERCULOSIS :—																			
Pulmonary	8	5	7	3	23		11	8		2	2 dead	13		6	1	8		4	6
,, suspected	6	2	5	3	16		12	2		2		8		6	5	1		2	6
Other forms	27	9	38	6	80	9	34	23		12	2 dead	24	5	37	6	20		3	37
OPHTHALMIA	—	2	20	21	43	41	2					43			2	1	11		29
RHEUMATISM	—	—	2	1	3		2	1				2		1	1	1			1
ACUTE INFECTIOUS FEVERS	—	—	10	7	17	16	1					17			6		1		10
OTHER DISEASE OR DEFECT	4	3	23	7	37	33	4					13	2	22	5	2	2		28
TOTALS	461	430	728	381	2000	969	583	157	163	46	76 6 dead	1216	83	410	207	387	234	31	850
PERCENTAGES	23.0	21.5	36.4	19.0	—	48.4	29.1	7.8	8.1	2.3	3.8 Dead ·3	71.1	4.8	23.9	12.1	22.6	13.6	1.8	49.7

are noted from time to time by the School Nurse when home-visiting, or by the Medical Officer when re-examining at the Schools or School Clinic, and should no treatment result, the reasons for non-treatment are, as far as possible, defined. The period and dates of any exclusion and re-admission are also noted.

Special Cases.

These cases include a large number of children submitted for examination by the School Attendance Officers with a view to more satisfactory treatment or supervision (blue card), and the remaining cases come to us through the Head Teachers (white card), either at the School or School Clinic, and upon these cards are placed similar records as in the Routine Cases.

I think therefore it is possible to say that children once noted as defective and requiring treatment or observation can be followed up as time and occasion permit either by the School Nurse or the Medical Officer.

Results of Treatment.

I am of the opinion that our results are improved both as regards numbers who have undergone treatment and the adequacy of such treatment, and it is almost possible to say that we are acquainted with the facts pertaining to the after-results of each child found defective, excepting those leaving school shortly after the notification of a defect, in which case it is not always possible to know whether treatment has taken place or the result of such treatment.

The "Following Up" of defective children in order to secure adequate treatment is one of the principal duties of the School Nurse, and necessitates a great number of visits and re-visits to the homes to ascertain what has been done in the way of treatment, or if no treatment has been obtained, to encourage and assist parents to procure the necessary treatment by visiting various institutions at certain times, or referring the cases to the Invalid Children's Aid Committee for assistance in one way or another.

AGENCY OF TREATMENT.

Nose and Throat affections requiring operation were in the great majority of cases attended to either at the Local Infirmary, or at the Throat and Ear Hospital, the Royal Victoria Infirmary or the Children's Hospital, Newcastle-upon-Tyne, and a few cases by Private Practitioners.

Cases of Defective Vision or chronic eye defects requiring prolonged treatment were attended to in the great majority of cases at the Eye Infirmary and the Royal Victoria Infirmary, Newcastle-upon-Tyne, and a few at the Ingham Infirmary, South Shields, or by Private Practitioners. Owing to the lack of local facilities for the treatment of eye cases, there is a difficulty in procuring treatment in many cases because of the journey, time taken up, expense, and other home difficulties not permitting the poorer class of parents to undertake their parental responsibilities, and there are still some parents of elder children who strongly object to spectacles, because of the belief that it is likely to prejudice their children as regards certain occupations, or because of appearance : lastly, the ignorant and indifferent parent cannot be made to see the necessity of spectacles unless the case is of an extreme nature.

Skin diseases such as Impetigo, Scabies and Pediculosis were chiefly supervised or treated at the School Clinic, or the local Dispensary. Ringworm cases are increasingly being treated at the Clinic, though a fair number obtain treatment at the Skin Hospital or other Institution in Newcastle-upon-Tyne, the Local Dispensary or Private Practitioner.

General Diseases of a serious nature undergo treatment by Private Practitioners or at Institutions locally or at Newcastle-upon-Tyne.

The treatment of Discharging Ears is frequently not carried out satisfactorily because of the difficulties, and also because many parents pay little or no regard to this complaint. I hope that the School Nurse may be able to give a portion of her time this year to the treatment of such cases, which, if not properly and systematically treated, may ultimately lead to dangerous conditions.

In addition to the above classes of cases, there were a large number of children with defects of a nature which required further observation by myself, or some special home or school attention, combined with some advice and supervision on the part of myself or the School Nurse, carried out at the Clinic or at the Schools.

NATURE OF TREATMENT.

Cases classified as requiring special attention at home or school refer to children suffering from quiescent Heart Disease, certain Tuberculous conditions, Malnutrition, certain Ear and Eye defects, Mouth Breathing, &c., where by some individual attention on the part of the Parent and Teacher to instructions given by the School Medical Officer, such as correct feeding, modification or attention to physical exercises, seat in class, &c., much can be done to assist these children physically and mentally.

We are indebted to the several Institutions mentioned, and to others not mentioned, for much gratuitous and very valuable service rendered to many school children requiring their aid throughout the past year.

The reasons for non-treatment can be tabulated as follows :—

TABLE VII.

Nature of of Defect.	Aversion to operation.	Indifference and ignorance.	Lack of opportunity or local facilities.	Defect only recently notified.	Other reason.	Total.
Nose, Throat and Ear ...	18	13	3	2	8	44
Vision & Squint	—	43	25	20	17	105
Cleft Palate	3	—	—	1	—	4
Rickets	—	—	1	—	—	1
Hernia.....	2	—	—	—	—	2
Other Defect ...	3	3	—	—	1	7

School Clinic.

The work in connection with the School Clinic, until the 31st July, 1913, was of an advisory or supervisory nature only, and was carried out in two rooms at the Health Department. When, however, the Education Committee resolved to undertake the treatment of certain minor ailments it was finally decided to remove the school medical work and staff to the Education Offices where more space could be given, provided certain alterations were made, and at the same time a more closer union struck up with the Attendance Department, without in any way interfering with the already existing arrangements between the Public Health and the School Medical Services, and so from the 1st August the School Medical work, including the work of the School Clinic and treatment of minor ailments, has been carried out at the Education Offices.

The sanction of the Board of Education to our proposed scheme of treatment of minor ailments mentioned in last year's report was obtained in January, 1913, and the work would have commenced sooner had it not been apparent that the old premises were badly adapted and too small for carrying out the work even on a small scale, and it was therefore deferred, wisely I think, until the question of our removal to other quarters was finally decided upon.

An application, with plans showing the necessary alterations, was made to and approved by the Board of Education in May, 1913, and a portion of the expense will be recovered from the Board.

During the year the Medical Officer attended the School Clinic on Wednesday afternoons and Saturday mornings for the examination, further examination, and re-examination of cases sent either by Head Teachers or the Chief Attendance Officer, or of cases referred from the Inspections at the Schools. Any advice and treatment thought necessary was recommended to the parents, and children who were undergoing treatment at the Clinic were supervised from time to time. The School Nurse assisted at this work, and from the 1st August such cases as were suitable for treatment at the Clinic were undertaken at once.

In addition, the School Nurse attended on Monday and Thursday mornings, until the 31st July, 1913, for the purpose of giving advice to parents and supervising the treatment of minor ailments, and from the 1st August for the treatment of minor ailments.

The extent and nature of the work done during the year 1913 can be tabulated as follows :—

TABLE VIII.

Disease or Defect.	Advice and supervision.				Treatment. (from 1st Aug., 1913).		
	No. of Cases.			Total attend-ances.	No. of of cases.	Total attend-ances.	Average attend-ances per case (treat-ment only).
	Further examin-ations of Routine cases.	Special	Total				
Ringworm, scalp	8	55	63	213	30	297	9.9
,, body	—	29	29	67	9	23	2.7
Scabies	5	46	51	145	22	95	4.3
Impetigo	6	143	149	355	68	220	3.2
Other Disease of Skin	2	41	43	77	23	58	2.4
Verminous conditions	1	46	47	100	11	56	5.0
Minor Accidents, Injuries	1	14	15	31	8	29	3.6
Vision and Squint ...	170	65	235	278	—	—	—
External Eye Disease	10	122	132	263	42	170	4.0
Other Disease of Eye .	4	9	13	26	—	—	—
Nose and Throat	19	22	41	50	—	—	—
Ears and Hearing	44	37	81	114	4	9	2.2
Tuberculosis (all forms)	9	33	42	141	—	—	—
Suspected Tuberculosis Malnutrition, &c. ...	20	63	83	168	2	7	3.5
Epilepsy, Chorea, Paralyses	2	19	21	42	—	—	—
Valvular Disease of Heart	9	9	18	32	—	—	—
Other Disease or Defect	16	96	112	168	15	38	2.5
Nil	—	92	92	92	—	—	—
TOTALS	326	941	1267	2362	234	1002	4.2

The average number of children receiving treatment per session was 31.

The results of the treatment commenced during the last few months of the year have been so far most satisfactory. The nature of the defects are largely just those which with a little skilled advice, treatment and supervision make as a rule a more speedy recovery, but which I know from my past experience can be the cause of a prolonged absence from school, and provided early and correct use is made by the Attendance Department and the Head Teachers of the means now provided for treatment, I believe the work should be a new factor in helping to secure better attendance results.

Further, Head Teachers can and do now make good use of the Clinic for the early correction of any suspected defect which they may have detected, by securing the attendance of the parent and child at the Clinic for examination by the Medical Officer, and the recommendation by him of any treatment thought necessary. Lastly, the child physically unfit for school can be temporarily excluded, periodically supervised, and re-admitted when thought fit.

I should mention here that my relationship with the local Medical Practitioners continues to be of a harmonious nature, for during a year I am brought into association with all of them many times, and I am indebted to one and all for their courtesy and assistance to me in clearing away many little difficulties.

SCHOOL NURSE.

The year under review was the first complete year's work of a whole time School Nurse, and I consider the expectations held out in regard to this appointment have certainly been reached, if not exceeded.

The duties and work laid out in my last year's Report have been carried out by the Nurse in an efficient, conscientious and tactful manner, and to my entire satisfaction.

Mention has already been made of the Nurse's work at the School Clinic, and in my remarks pertaining to the Cleansing Scheme one can form some idea of her work during the year in connection with the cleanliness of the children.

The visits and re-visits at homes and schools, and the number of children "Followed Up" during the year can be shown thus :—

TABLE IX.

No. of Cases "Followed up."			Number of visits and re-visits.	Average number of visits per case.
At Home.	At School.	Total.		
1833	708	2541	3989	1.5

The Nurse becomes conversant with the facts of each individual case referred to her for "Following Up" purposes, and can therefore fairly accurately gauge the difficulties to be overcome in order to secure the necessary advice and treatment. Cases vary from those requiring very little, to those requiring very persistent supervision.

Invalid Children's Aid Committee.

I have again to place on record the very valuable and practical assistance rendered during the past year by the above Committee on behalf of many school children whose parents required some assistance in procuring necessary treatment, and to the active and harmonious way in which they have worked with the School Medical service. I especially regret that Miss M. A. Fenwick has found it necessary to resign from the position of Chairman and from any further work in connection with this Committee, knowing as I do the real practical benefits which have resulted to many school children from her work during the past five years I have been associated with School Medical work in this Borough.

I have extracted the following particulars from their Report for the past year :—

" During the 12 months from December, 1912, to November, 1913, 75 children have been visited and helped by the Members of this Committee, not including the large number visited and assisted to obtain spectacles by the Members of the Spectacle Sub-Committee, a report of which is given separately. The children visited by the Invalid Children's Aid Committee include cases of Tuberculosis, Paralysis, Cripples, general ill-health, and those requiring surgical appliances or operations for the removal of tonsils and adenoids. The children are also helped financially to go to hospitals to obtain surgical appliances and are also provided with milk and emulsion when necessary. Valuable assistance is given to the Invalid Children's Aid Committee by the Arnison Surgical Aid Society by giving grants of money to deserving cases. Emulsion at a reduced rate has been given on Saturday mornings 268 times during the past 12 months.

During the summer, the Committee assisted the Holiday Agency Committee by visiting the children who had been recommended for a holiday.

Amongst the cases dealt with, were :—

5 cases of Nose, Throat and Ear Defects requiring operation (subsequently performed).
12 cases of Rickets requiring surgical appliances, operation, &c.
11 cases of Tuberculosis requiring surgical appliances.
2 cases of Paralysis requiring surgical appliances.
6 cases of Malnutrition requiring special feeding.
3 other defects.

Four parents refused treatment.

SPECTACLES.

114 cases have been visited during the year.

21 have been sent to Institutions in Newcastle-upon-Tyne to be tested.

10 have had Tickets given for the Ingham Infirmary, South Shields.

89 have got glasses, and have paid for or are paying for them.

7 have been handed over to the Secretary of the Tynemouth Women's Local Government Association, as the Visitors have been unable to get the money from the parents.

2 have had the benefit of the Invalid Children's Aid Committee's reduced terms, and have been paid for privately.

2 refuse to go to Newcastle to be tested.

60 cases are closed, having received glasses and paid for them, or have had treatment at the Ingham Infirmary, South Shields.

TABLE X.—Return showing the Physical Condition of Children Inspected.

Condition.		Entrants.				Leavers.				Intermediate Group.				Total.				Special Cases.		
		Boys	Girls	Total	Per cent.	Boys	Girls	Total	Per cent.	Boys	Girls	Total	Per cent.	Boys	Girls	Total	Per cent.	Boys	Girls	Total
	Total Inspected	765	753	1518		593	535	1128		572	605	1177		1930	1893	3823		552	635	1187
Clothing	Satisfactory	748	734	1482	97.6	577	522	1099	97.4	552	582	1134	96.3	1877	1838	3715	97.1			
	Unsatisfactory	17	19	36	2.3	16	13	29	2.6	20	23	43	3.6	53	55	108	2.8			
Footgear.	Satisfactory	744	731	1475	97.1	569	519	1088	96.3	521	588	1109	94.2	1834	1838	3672	96.0			
	Unsatisfactory	21	22	43	2.8	24	16	40	3.5	51	17	68	5.7	96	55	151	3.9			
Cleanliness of Head.	Clean (i.e., no nits or pediculi)	754	538	1292	85.1	590	381	971	86.0	564	415	979	83.1	1908	1334	3242	84.8			
	Nits only	9	203	212	13.9	3	151	154	13.6	6	186	192	16.3	18	540	558	14.5			
	Pediculi	2	12	14	.9	—	3	3	.2	2	4	6	.5	4	19	23	.6	6	42	48
Cleanliness of Body.	Clean	748	735	1483	97.6	583	523	1106	98.0	542	566	1108	94.1	1873	1824	3697	96.7			
	Dirty	16	18	34	2.2	9	9	18	1.7	27	35	62	5.2	52	62	114	2.9			
	Pediculi present	1	—	1	.06	1	3	4	.3	3	4	7	.5	5	7	12	.3	—	4	4
Nutrition.	Excellent	103	67	170	11.1	80	76	156	13.8	96	100	196	16.6	279	243	522	13.6			
	Normal	538	550	1088	71.6	427	374	801	71.0	392	407	799	67.8	1357	1331	2688	70.3			
	Below Normal	118	130	248	16.3	81	80	161	14.2	81	91	172	14.6	280	301	581	15.1	8	15	23
	Bad	6	6	12	.8	5	5	10	.8	3	7	10	.8	14	18	32	.9	8	9	17
Nose and Throat.	No Defect	511	540	1051	69.2	448	392	840	74.4	414	465	879	74.6	1373	1379	2770	72.4			
	*Mouth Breathers	51	28	79	5.2	18	11	29	2.5	27	22	49	4.1	96	61	157	4.1	—	1	1
	Tonsils: slightly enlarged and enlarged	185	178	363	23.9	122	125	247	21.8	123	115	238	20.2	430	418	848	22.1	2	5	7
	Tonsils: much enlarged	4	—	4	.2	4	2	6	.5	—	1	1	.08	8	3	11	.2	1	6	7
	Adenoids: slight	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Adenoids: marked	14	7	21	1.3	1	5	6	.5	8	2	10	.8	23	14	37	.9	—	—	—
External Eye Disease.	No Disease	741	732	1473	97.0	586	518	1104	97.8	555	590	1145	97.2	1882	1840	3722	97.3			
	Blepharitis	7	2	9	.5	2	4	6	.5	10	4	14	1.1	19	10	29	.7	7	5	12
	Conjunctivitis	13	5	18	1.1	2	2	4	.3	2	4	6	.5	17	11	28	.7	47	58	105
	Corneal Opacities	4	14	18	1.1	3	11	14	1.2	5	7	12	1.0	12	32	44	1.1	2	6	8
	Other Disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	5	7
Ear Disease.	No Disease	753	748	1501	98.8	583	525	1108	98.2	560	595	1156	98.2	1896	1869	3765	98.4			
	Obstruction	1	1	2	.1	5	2	7	.6	6	5	11	.9	12	8	20	.5	2	—	2
	Otorrhœa: R.	3	2	5	.3	2	5	7	.6	2	1	3	.2	7	8	15	.3	12	7	19
	" L.	6	2	8	.5	2	2	4	.3	4	2	6	.5	12	6	18	.4	7	4	11
	Other Disease	2	—	2	.1	1	1	2	.1	—	1	1	.08	3	2	5	.1	4	5	9
Teeth.	Sound	200	190	390	25.6	63	69	132	11.7	79	63	142	12.0	342	322	664	17.1			
	Less than 4 decayed	285	294	579	38.1	349	310	659	58.4	303	272	575	48.8	937	876	1813	47.6	—	—	—
	Four or more decayed	279	268	547	35.9	179	155	334	29.6	190	279	469	39.0	648	693	1341	35.1	2	2	4
	Sepsis (marked)	1	1	2	.1	2	1	3	.2	—	—	—	—	3	2	5	.1	—	1	1
Heart and Circulation.	No Disease	759	747	1506	99.2	585	528	1113	98.6	567	609	1168	99.2	1911	1875	3786	99.0			
	Organic Disease	2	3	5	.3	7	6	13	1.1	2	3	5	.4	11	12	23	.6	3	6	9
	Functional Disease	2	2	4	.2	1	—	1	.08	1	—	1	.08	4	2	6	.1	—	—	—
	Anæmia	2	—	2	.1	—	1	1	.08	1	1	2	.1	3	2	5	.1	1	11	12
	Other Disease	—	1	1	.06	—	—	—	—	1	1	2	.1	1	2	3	.07	—	—	—
Lungs.	No Disease	753	741	1494	98.4	591	532	1123	99.6	567	601	1168	99.2	1911	1874	3785	99.0			
	Chronic Bronchitis and Bronchial Catarrh	9	11	20	1.3	2	2	4	.3	3	3	6	.5	14	16	30	.7	14	6	20
	Tuberculosis	2	1	3	.1	—	—	—	—	1	1	2	.1	3	2	5	.1	7	3	10
	" suspected	1	—	1	.06	—	1	1	.06	—	—	—	—	1	1	2	.05	5	3	8
	Other Disease	—	—	—	—	—	—	—	—	1	—	1	.08	1	—	1	.02	1	—	1
Nervous System.	No Disease	765	753	1518	100.0	591	533	1124	99.5	572	605	1177	100.0	1928	1891	3819	99.8			
	Epilepsy (major or minor)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	2	5
	Chorea	—	—	—	—	1	1	2	.1	—	—	—	—	1	1	2	.05	4	2	6
	Other Disease	—	—	—	—	1	1	2	.1	—	—	—	—	1	1	2	.05	3	2	5
Skin.	No Disease	741	737	1478	97.3	576	526	1102	97.6	554	589	1143	97.1	1871	1852	3723	97.3			
	Ringworm: body	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	21	18	39
	" head	2	5	7	.4	1	—	1	.08	4	2	6	.5	7	7	14	.3	38	31	69
	Impetigo	15	6	21	1.3	2	2	4	.3	3	2	5	.4	20	10	30	.7	101	135	236
	Scabies	1	3	4	.2	—	1	1	.08	—	3	3	.2	1	7	8	.2	38	41	79
	Other Disease	6	2	8	.5	14	6	20	1.7	11	9	20	1.6	31	17	48	1.2	45	42	87
Rickets.	No Disease	744	744	1488	98.0	593	535	1128	100.0	570	603	1173	99.6	1907	1882	3789	99.1			
	Slight	14	6	20	1.3	—	—	—	—	2	1	3	.2	16	7	23	.6			
	Marked	7	3	10	.6	—	—	—	—	—	1	1	.08	7	4	11	.2	1	1	2
Deformities.	No Deformity	760	750	1510	99.4	580	528	1108	98.2	563	600	1163	98.8	1903	1878	3781	98.9			
	Deformity present	5	3	8	.5	13	5	18	1.5	9	7	16	1.3	27	15	42	1.0	6	—	6
Tuberculosis Non-Pulmonary.	No Disease	765	751	1516	99.8	590	534	1124	99.6	570	604	1174	99.7	1925	1889	3814	99.7			
	Glandular	—	—	—	—	3	1	4	.3	1	—	1	.08	4	1	5	.1	15	10	25
	Bones and Joints	—	2	2	.1	—	—	—	—	—	1	1	.08	—	3	3	.07	7	7	14
	Other Forms	—	—	—	—	—	—	—	—	1	—	1	.08	1	—	1	.02	2	3	5
Speech.	Not Defective	763	750	1513	99.8	577	530	1107	98.1	570	600	1170	99.4	1910	1880	3790	99.1			
	Defective Articulation	2	3	5	.2	9	3	12	1.0	2	2	4	.3	13	8	21	.5	1	—	1
	Stammering	—	—	—	—	7	2	9	.8	—	3	3	.2	7	5	12	.3	—	—	—
Mental Condition.	Normal	—	—	—	—	519	433	952	84.3	472	539	1011	85.9	992	971	1963	85.1			
	Dull or Backward	—	—	—	—	74	102	176	15.6	99	66	165	14.0	173	168	341	14.8			
	Mentally Defective (all grades)	—	—	—	—	—	—	—	—	1	—	1	.08	—	1	1	.02			
Vision.	$\frac{6}{9}$ each eye (normal vision)																	—	1	1
	$\frac{6}{9}$ R.					474	409	883	78.2	425	416	841	71.4	899	825	1724	74.7	1	1	2
	L.					470	401	871	77.2	426	403	829	70.4	896	804	1700	73.7	2	1	3
	$\frac{6}{9}$ R.					52	75	127	11.2	112	141	253	21.4	164	216	380	16.4	3	3	6
	$\frac{6}{9}$ L.					51	75	126	11.1	112	146	258	21.9	163	221	384	16.6	4	1	5
	$\frac{6}{12}$ R.					17	9	26	2.3	19	28	47	3.9	36	37	73	3.1	4	5	9
	$\frac{6}{12}$ L.					27	13	40	3.5	19	30	49	4.1	46	43	89	3.9	3	2	5
	$\frac{6}{18}$ R.					22	27	49	4.3	9	15	24	2.0	31	42	73	3.1	12	12	24
	$\frac{6}{18}$ L.					24	28	52	4.6	12	16	28	2.3	36	44	80	3.4	16	10	26
	$\frac{6}{24}$ R.					15	7	22	1.9	3	1	4	.3	18	8	26	1.1	3	8	11
	$\frac{6}{24}$ L.					13	9	22	1.9	1	3	4	.3	14	12	26	1.1	2	11	13
	$\frac{6}{36}$ R.					8	6	14	1.2	1	2	3	.2	9	8	17	.7	6	1	7
	$\frac{6}{36}$ L.					3	7	10	.8	1	3	4	.3	4	10	14	.6	4	3	7
	$\frac{6}{60}$ R.					5	2	7	.6	3	2	5	.4	8	4	12	.5	9	3	12
	$\frac{6}{60}$ L.					5	2	7	.6	1	4	5	.4	6	6	12	.5	7	3	10
	$\frac{6}{}$ R.																			
	L.																			
	Squint	18	12	30	1.9	5	12	17	1.5	7	5	12	1.0	30	29	59	1.5	6	13	19
Hearing (Whisper).	20 feet each ear (normal hearing)	760	745	1505	99.1	571	511	1082	95.9	550	581	1131	96.0	1881	1837	3718	96.9			
	20 feet R.																			
	L.																			
	10 feet R.	4	7	11	.7	15	13	28	2.4	10	17	27	2.2	29	37	66	1.7	1	3	4
	L.																			
	5 feet R.	1	1	2	.1	7	11	18	1.5	12	7	19	1.6	20	19	39	1.0	3	6	9
	L.																			

* Adenoids probable cause.

54 are still being visited.

The expenditure in connection with the provision of spectacles during the past year (December, 1912, to November, 1913), was £13 11s. 9d., and the amount recovered from parents was £10 3s. 5d."

Borough of Tynemouth Holiday Agency.

During the year 1913, 67 children of school age were sent for a residence in the country of from 7 to 14 days' duration. The majority of these cases had been under my supervision on account of various ailments, and I can testify that such holiday materially assisted many of them back to normal health.

National Society for the Prevention of Cruelty to Children.

It was found necessary to report the parents of 16 children to the Local Officer of the N. S. P. C. C.

GENERAL REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

A Return showing the physical condition of the children inspected is given in Table X.

Clothing and Footgear.

The condition of the children's clothing and footgear shows a slight improvement upon the last two years, which is satisfactory, seeing that the percentage is based upon over 1000 more inspections, and it should be remembered that the condition recorded represents the usual day-by-day appearance as seen by the Teachers, and not that on presentation for inspection. Parents should guard against the wearing by children of any artificial restrictions about the chest tending to hamper chest movements at play and at physical exercises.

Cleanliness.

The number of children attending school with actual live vermin upon them, and the average degree of infection with nits (eggs) is nothing like so bad as it was some 4 years ago, and the achievement of this satisfactory improvement is due to the increased attention on the part of many parents, the vigilance on the part of the Teachers and Head Teachers, the latter of whom are now authorised to examine the person and clothing of any child thought to be unsatisfactory, and finally to the thorough way in which the School Nurse has carried out her duties and work in connection with the Cleansing Scheme.

We are now paying particular attention to that class of parent who makes light of a few nits, so as to convince her of the necessity of finally and completely getting rid of these.

The percentage of children with vermin or nits (chiefly nits) in the hair was 15.4, but of this 8.4% are recorded as having few or very few nits, leaving 7% which can be compared with 11.8% in 1912 and 10.9% in 1911.

I hope to be able to record continuous improvement in the standard of cleanliness of school children from year to year.

Cleansing Scheme.

The system adopted for the purpose of improving the cleanliness of children has now been in practice one year, and has formed one of the principal duties of the School Nurse. The results of the work can be shown in tabular form as follows :—

TABLE XI.

School.	No. of children examined.	Clean.	Verminous.	Notices served.				No. of children removed to Cleansing Station		Prosecutions.	No. of re-examinations made.	No. of visits made to School Departments.
				Form 1	Form 2	Final warning	Statutory Notices.	On one occasion.	On two occasions			
St. Cuthbert's Girls	515	442	73	39	55	17	15	6	1	1	242	15
,, Infants	165	139	26	23	3	2	3	1	—	—	57	10
Jubilee Girls	266	215	51	39	20	9	18	1	4	1	138	13
,, Juniors	272	227	45	33	15	4	3	2	—	—	66	5
,, Infants	152	133	19	14	10	3	1	—	—	—	47	5
Christ Church Girls	200	183	17	17	6	1	—	—	—	—	53	4
,, Infants	194	176	18	18	1	—	—	—	—	—	34	4
Eastern Girls	332	220	112	123	32	24	21	4	4	2	200	12
,, Infants	344	281	63	54	32	16	5	1	—	—	131	12
,, Boys	376	337	39	34	26	15	13	2	—	—	94	5
St. Peter's	258	189	69	55	13	13	11	4	1	1	53	9
Priory Mixed & Infants	394	334	60	41	23	20	13	3	—	—	90	12
Queen Victoria Infants	6	4	2	—	—	2	—	—	—	—	4	3
Cullercoats Girls	7	—	7	1	5	7	1	1	—	—	12	6
Western Girls	273	247	26	13	15	10	2	—	—	—	25	4
,, Juniors	412	384	28	19	10	3	—	—	—	—	22	3
TOTALS	4166	3511	655	523	266	146	106	25	10	5	1268	122

It should be remembered that the inspections by the Nurse are carried out under Section 122 of the Children Act, are of a surprise nature, and therefore best adapted for the purpose for which they are intended, namely to ensure everyday reasonable cleanliness of children who are attending school. I do not think there can be any doubt that this unpleasant but important duty on the part of the School Nurse has had most satisfactory results. Until, however, the homes of the worst cases can be satisfactorily dealt with, re-infection is bound to occur.

In four of the worst cases of neglect, the parents were summoned before the Magistrates for allowing their children to lapse into their former verminous condition, necessitating the child being cleansed a second time by the Authority. Fines of 5/- and costs were inflicted in each case.

We are indebted to the Tynemouth Board of Guardians for granting us permission to use their facilities at the Poor Law Institution, 50 Preston Road, for the purpose of a Cleansing Station at a nominal fee per occasion.

NUTRITION.

During the course of my routine inspections I formed the impression that there was an improvement in the nutrition of the children generally, which is confirmed by a fall of 2·7 % in the children classified as subnormally or badly nourished, as compared with 1912. The percentage of children who have been classified as sub-normally or badly nourished during the past 5 years is shown in tabular formation, viz. :—

	Below Normal.	Bad.
1909.....	24.8%	2.0%
1910	27.0%	2.7%
1911	20.8%	1.0%
1912	18.1%	0.6%
1913	15.1%	0.9%

I consider the fall since 1910 must be associated with the more stable employment which has existed here as elsewhere, though to what extent it is difficult to apportion. This, however, should be made more apparent in the course of the next few years.

I am not conscious of having changed my standard of classification, but on the contrary have attempted to maintain the same standard from year to year, and while I cannot state any one particular outstanding cause for malnutrition unassociated with evident physical defect, yet there is no doubt that insufficient feeding, improper feeding, insufficient sleep, bad home surroundings and housing conditions occupy a prominent part in certain cases, and parental ignorance of the laws of health of childhood and hereditary predisposition in other cases.

126 malnourished children have been periodically supervised and weighed at intervals during the year.

Nose and Throat.

Mouth Breathing is not nearly so evident a defect amongst school children as it was some four years ago, and this is undoubtedly due to the increased attention paid by the Teachers to Breathing Exercises as a result of medical inspection. Parents are likewise more alive to the evil results therefrom, and have become better educated in so far as to associate this defect with Nose and Throat conditions possibly requiring medical treatment.

Adenoids are to be inferred as the most probable cause of mouth breathing, and it would be practically correct to attribute all mouth breathing cases shown in Table X. to be also cases of Adenoids, though not stated as such.

Enlarged Tonsils and Adenoids (probable).

176 cases, including 73 carried forward from last year, were kept under periodical supervision. 107 children were recommended operation, and of these 62 received such treatment followed by attention to breathing exercises, 7 received other forms of medical treatment, and 38 remain untreated surgically for various reasons. 69 cases were kept under supervision with attention to breathing exercises at home and school.

66 old operation cases of former years were re-examined to note their present condition and improvement. Two cases required and had a further operation performed.

External Eye Disease.

Phlyctenular Conjunctivitis and Keratitis continues to occupy a prominent place amongst the diseases of childhood, and the resulting corneal opacities are a frequent cause of loss or distortion of vision. The large majority of these cases come under our notice as special cases, and the absence from school is of a prolonged nature owing to the very slow recovery which many of these cases make.

Muco-purulent Conjunctivitis was not so prevalent as in 1912, and was never at any time confined to the scholars of one class or school department.

Ear Disease.

I am of opinion that a little more attention is being paid to discharging ears by parents year by year, partly due to the periodical examination and following up of these cases from time to time. The School Nurse will now undertake the treatment of the worst cases at the Clinic.

I have hopes that with the increased attention and treatment now paid to diseased throat conditions, that ultimately the cases of chronic ear discharge may appreciably fall in numbers.

Teeth.

Our methods of attempting to educate the children to attend daily to the cleanliness of the teeth and mouth both by verbal and printed instructions continue.

Heart and Circulation.

Organic disease of the Mitral Valve, causing Mitral Regurgitation, was found in 22 cases ; Mitral Stenosis in one case ; and two cases were of a congenital nature from birth.

These cases, in addition to those found in previous years, have been periodically re-examined, and the Teachers informed of

the child's present condition with a view to any modification of physical exercises.

Lungs.

Coughs and colds are more prevalent and appear to spread much easier in the Infant Departments than in the Senior Departments.

One boy was found sitting in school with a definite Pneumonia.

Remarks upon Tuberculosis (Pulmonary and other forms) are made under a special heading dealing with the subject.

Nervous System.

Five cases of Epilepsy came under notice as special cases, none being found at the routine inspections. It was found necessary to exclude 4 as unfit for attendance at an ordinary school at the present time, and they have been re-examined at intervals throughout the year. One case continues able to attend school.

Three cases of Chorea, one case of Neuritis causing wrist drop, one case of Facial Paralysis, and 5 cases of a functional nature were also recorded.

Skin Diseases.

The great majority of the cases of infectious or contagious skin diseases were special cases, which came to us for supervision and treatment. Children sitting in school with an infectious skin disease are now much less evident than they were a few years back, and this reflects credit upon the Teachers' vigilance in this direction.

The School Nurse will now undertake the treatment of the vast majority of these cases, and this should hasten the recovery of many of them.

DEFORMITIES (including Rickets).

The nature of the deformities may be classified as in Table XII.

TABLE XII.

	Entrants.		Leavers.		Inter-mediate.		Total Routine.			Special.		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Total	Boys	Girls	Total
Rickets: Deformity Chest ..	7	1	4	—	6	1	17	2	19	—	—	—
,, Legs ..	16	7	1	1	1	2	18	10	28	1	1	2
,, Head ..	—	1	—	—	—	—	—	1	1	—	—	—
Spinal Curvature ..	1	—	1	—	—	1	2	1	3	—	—	—
Lameness Legs ...	1	1	1	—	—	2	2	3	5	—	—	—
Wry Neck	—	1	2	—	—	—	2	1	3	—	—	—
Talipes	—	—	—	—	—	1	—	1	1	1	—	1
Injury Elbow	1	—	—	—	—	—	1	—	1	—	—	—
Lameness (Paralysis)	—	1	1	—	2	1	3	2	5	5	—	5
Amputation Finger	—	—	—	1	—	—	—	1	1	—	—	—
High Arched Palate	—	—	3	3	2	1	5	4	9	—	—	—

Four children had rickets of such a pronounced nature as to make them temporarily unfit for attendance at an ordinary school. Many of the other cases of deformity due to this disease should by treatment considerably improve.

Infantile Paralysis before school age is reached is a common cause of subsequent and permanent lameness.

TUBERCULOSIS (ALL FORMS)

The physical condition of the school children known to be suffering from Tuberculosis at the end of the year is shewn in Table XIII.

TABLE XIII.

	Number of Cases.	Keeping well under S.M.O.'s periodical supervision.	Receiving Medical Treatment.					
			Private Practitioner.	Public Hospital	Sanitorium	Poor Law.		Tuberculosis Clinic.
						Union Hospital.	Sanatorium.	
ATTENDING SCHOOL:—								
Tuberculosis, Lungs	8	6						2
Do. Glands	24	22	1					1
Do. Bones and Joints	5	5						
Do. Spine	5	5						
Do. Other Forms	4	3		1				
Total Attending School	46	41	1	1				3
NOT ATTENDING SCHOOL:—								
Tuberculosis, Lungs	11		1	1	1	2	2	4
Do. Glands	12		5	1	1	2		3
Do. Bones and Joints	10	1		6				3
Do. Spine	4	1		1				2
Do. Other forms	2			1		1		
Total not attending School	39	2	6	10	2	5	2	12
GRAND TOTAL	85	43	7	11	2	5	2	15

I am indebted to the Tuberculosis Officer for his examination and report upon certain children whom I thought proper to bring to his notice, and, as mentioned before, by the arrangement made with this Officer all cases and suspected cases of Tuberculosis should thus be efficiently supervised in the future.

I consider the treatment of these children has been well maintained throughout the year, more children having received institutional treatment.

Mental Condition.

The percentage of children classified by the Head Teachers as dull or backward is 2% higher this year than last year. Mental dullness or backwardness is not infrequently found to be associated with physical defect or subnormal nourishment, and this association should not be lost sight of in the provision which is about to be made for the better education of dull and backward children.

I referred in my last report to the benefits likely to accrue from the increased individual attention which these children would receive in special and smaller classes.

I intend this year to keep a register of dull and backward children, and to assign as far as possible the specific reasons for each child's backwardness.

During the year, the proposed plans for King Edward new Junior School, in which provision is to be made for dull and backward children, were submitted to me for my observations, and I have had an opportunity of discussing the plans with the Architect.

Vision.

Note should be taken of the number of children with Eye defects referred to the School Clinic for examination during the year by the Head Teachers. (See Table VIII.).

I have referred elsewhere to the excellent work which has been carried out in connection with the provision of spectacles and the treatment of certain other eye defects by the Invalid Children's Aid (Eye) Committee.

HEARING.

The whisper test was again adopted this year, though at certain schools the noise incidental to a school or adjacent street traffic does certainly cause trouble.

It is rare to meet with deafness other than that which can be associated with discharging ears or enlarged tonsils and adenoids, and as stated before I think the present amount of deafness amongst school children should diminish as the result of the increased attention now paid to defective throat conditions, providing these are satisfactorily and early rectified.

OTHER PARTICULARS AND DEFECTS NOT RECORDED IN TABLE X. were as follows :—

VACCINATION.

The percentage of children upon whom no vaccination marks were found remains about 20%, which is approximately the same percentage as that found in the previous three years.

HEIGHTS AND WEIGHTS.

The average Heights and Weights of the children examined at Routine Inspections were as follows :—

TABLE XIV.

HEIGHT.

Boys.				Girls.			
Age.	No. Measured.	Cms.	Ins.	Age.	No. Measured.	Cms.	Ins.
5	500	102.5	40:2	5	485	101.5	40.0
6	246	105.5	41.5	6	252	107.0	42.2
8	643	119.5	47.0	8	584	117.0	46.2
12	20	139.0	54.7	12	33	139.0	54.7
13	517	140.0	55.2	13	489	144.8	57.0

TABLE XV.

Weight.

Boys.				Girls.			
Age.	No. Weighed.	Kilos.	Lbs.	Age.	No. Weighed.	Kilos.	Lbs.
5	500	17.1	37.6	5	485	16.6	36.7
6	246	18.5	40.7	6	252	18.2	40.2
8	643	22.7	50.6	8	584	21.7	48.0
12	20	33.7	74.7	12	33	35.3	77.6
13	517	33.2	73.1	13	489	35.3	77.6

Malformations.

TABLE XVI.

	Entrants.		Leavers.		Inter-mediate.		Total Routine.			Special.		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Total	Boys	Girls	Total
Microcephalus	–	–	–	–	1	–	1	–	1	–	–	—
Cleft Palate	–	1	–	1	–	1	–	3	3	1	–	1
Congenital Atresia.	–	1	–	–	–	–	–	1	1	–	–	—
Accessory Auricle .	–	–	–	–	1	–	1	–	1	–	–	—

EDUCATION (PROVISION OF MEALS) ACT, 1906.

This Act was not brought into force during 1913.

REVIEW OF THE METHODS ADOPTED AND THE ADEQUACY OF SUCH METHODS FOR DEALING WITH THE BLIND, DEAF, MENTALLY OR PHYSICALLY DEFECTIVE AND EPILEPTIC CHILDREN UNDER THE ACTS OF 1893 AND 1899.

The number of exceptional children in the Borough was as follows :—

TABLE XVII.—Numerical Return of all Exceptional Children in the Area.

			Boys	Girls	Total
Blind (including partially Blind).		Attending Public Elementary Schools	–	2	2
		Attending Certified Schools for the Blind	2	2	4
		Not at School	–	1	1
Deaf and Dumb (including partially Deaf).		Attending Public Elementary Schools	1	2	3
		Attending Certified Schools for the Deaf	3	5	8
		Not at School	–	–	–
Mentally Deficient.	Feeble Minded.	Attending Public Elementary Schools	12	7	19
		Attending Certified Schools for Mentally Defective Children	–	2	2
		Not at School	2	1	3
	Imbeciles.	At School	–	–	–
		Not at School	–	–	–
	Idiots		–	–	–
Epileptics.		Attending Public Elementary Schools	–	1	1
		Attending Certified Schools for Epileptics	–	–	–
		Not at School	3	2	5
Physically Defective.	Pulmonary Tuberculosis.	Attending Public Elementary Schools	7	1	8
		Attending Certified Schools for Physically Defective Children	–	–	–
		Not at School	8	3	11
	Other Forms of Tuberculosis.	Attending Public Elementary Schools	12	26	38
		Attending Certified Schools for Physically Defective Children	–	–	–
		Not at School	16	12	28
	Cripples other than Tubercular.	Attending Public Elementary Schools	6	–	6
		Attending Certified Schools for Physically Defective Children	–	–	–
		Not at School	7	1	8
Dull or Backward		Retarded, 2 years / 3 years, not known	66	35	101

The Blind and Partially Blind.

Four children are being educated in Blind Schools, as follows :—

	No. of Children.
Royal Victoria School for the Blind, Newcastle-upon-Tyne	2
Catholic Blind Asylum, Liverpool	2

One child was sent to the Blind School, Newcastle, during the year ; one child has been excluded from school the whole of the past year on account of serious eye defect prohibiting the use of the eyes for school work ; and two children are attending school, but are seriously hampered at their school work by the effects of old eye disease.

The Deaf.

Eight children are being educated in Special Schools, as follows :—

	No. of Children.
Northern Counties Institution for the Deaf and Dumb, Newcastle-upon-Tyne	7
St. John's Institution for the Deaf and Dumb, Boston Spa, Yorkshire	1

Two children whom I had anticipated in my last report would be admitted to the Deaf and Dumb School, Newcastle-upon-Tyne this year, were subsequently not thought suitable cases by the Authorities of this Institution, and remain in attendance at an ordinary school.

One child has now reached the age of admission, and the case is at present under consideration with a view to her admission to a Deaf and Dumb School.

Mentally Defective.

No further action has been taken locally to deal with the educable mentally defective children in the Borough. I have deferred making any further special examination of these children and the dull and backward children bordering upon mental deficiency until the regulations about to be issued by the Board of Education have been received.

The proposed classes for dull and backward children at the new Department of King Edward School will materially help in all borderland cases which require a period of observation before one can definitely decide regarding their mental classification.

At the present time, we have a record of 22 children who would be suitable cases for admission to a Special School, but it will be necessary to again make a complete survey directly the regulations referred to above are received, so as to bring our present list up to date.

In addition, there are 4 Epileptics who would be capable of receiving education in a Special School.

Physically Defective.

In connection with this work, I have drawn up a report upon those children for whom it is necessary in my opinion to make further educational facilities other than those provided at an elementary school.

The children were classified into 3 groups :—

(a) Children with physical defects causing temporary disablement.
(b) Children with Tuberculosis (all forms).
(c) Children with physical defects causing permanent disablement.

The Committee have now this matter under consideration.

Dull and Backward.

The number of Dull and Backward children given in Table XVII. will be seen to differ from that in Table X., and is due to a different classification. The number in Table XVII. signifies the number of children whom Head Teachers consider should be removed to Dull and Backward Classes for more individual attention, while that in Table X. conforms to the mental grade assigned by the Head Teachers at the Routine Inspections.

METHODS AND RESULTS OF PHYSICAL EXERCISES IN THE SCHOOLS.

During the year the Education Committee considered Circular 825 in which the Board of Education notified new provisions enabling persons already recognised as Certificated Teachers to take Hygiene and Physical Training as a separate subject under certain conditions, and that the Certificates of such Teachers who satisfy the Examiners in this subject would be endorsed accordingly.

The Education Committee have made arrangements for a course of instruction for Female Assistant Teachers of our Elementary Schools. This work is being undertaken by Miss Bruce, the Physical Drill Instructress to the Secondary School scholars, on Wednesday and Friday evenings, and 15 Elementary School Teachers have joined the classes. The attendance at the classes here is not restricted to Certificated Teachers, but Uncertificated Teachers were allowed to take the Course if they so desired.

I have kept in touch with this movement and would like to congratulate the Committee on taking the step of forming these classes, as I consider they will have a very good effect in helping forward the physical development of the school children, and that the Physical Exercises in the Schools will be conducted on much better and more enlightened lines.

I have already paid one visit to the classes. The Teachers themselves express their appreciation of the facilities

which have been placed at their disposal. The Course commenced on the 10th December, 1913, and will extend up to the end of November, 1914, with the usual holidays.

EXAMINATION OF PUPIL TEACHERS, OR TEACHERS OF ANY GRADE.

During the year, 18 Teachers were examined, of whom 17 were passed as satisfactory, and one rejected.

JAMES McCONNELL.