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Westmorland County Council

ANNUAL REPORT

OF THE

County Medical Officer of Health.

THE YEAR 1930.

Atkinson & Pollitt, Printers, Kendal.

Westmorland County Council

ANNUAL REPORT

OF THE

County Medical Officer of Health.

THE YEAR 1930.

CONTENTS.

County of Westmorland.

Public Health and Housing Committee of the County Council.

Chairman: Mr. J. W. Cropper.

Messrs. Dr. J. L. Cochrane.
Dr. J. L. Cochrane.
J. Crosby,
R. W. Dent,
T. E. Etchells,
H. L. Groves,
F. W. Harrison,
R. W. Hayes,
W. Hewertson,
Rev. W. King,
R. W. Lambert,
W. Mason.
S. A. Moor,
J. Parkin,
G. H. Pattinson,
G. N. Pattinson,
H. A. T. Shepherd,
W. Stalker,
G. E. Thompson.
E. W. Wakefield.
W. H. Wallace.
C. S. Webb.

Maternity and Child Welfare Committee of the County Council.

All the members of the Public Health and Housing Committee compose this Committee with the following representatives of Maternity and Child Welfare Work:—

Mrs. J. W. Cropper,
Mrs. Crossland,
Mrs Dent,
Mrs. Anthony Lowther,
Mr. J. Robinson,

and in addition the following representatives of the medical practitioners :—

Dr. T. H. Gibson,
Dr. J. Cochrane Henderson.

Special Sanatorium Benefit Sub-Committee.

Representatives appointed by the County Council :—

Messrs. J. W. Cropper,
R. W. Dent,
C. E. Greenall,
H. L. Groves (Chairman),
A. Pattinson,
W. H. Wallace,
Dr. J. L. Cochrane.

Appointed by the Westmorland County Insurance Committee :—

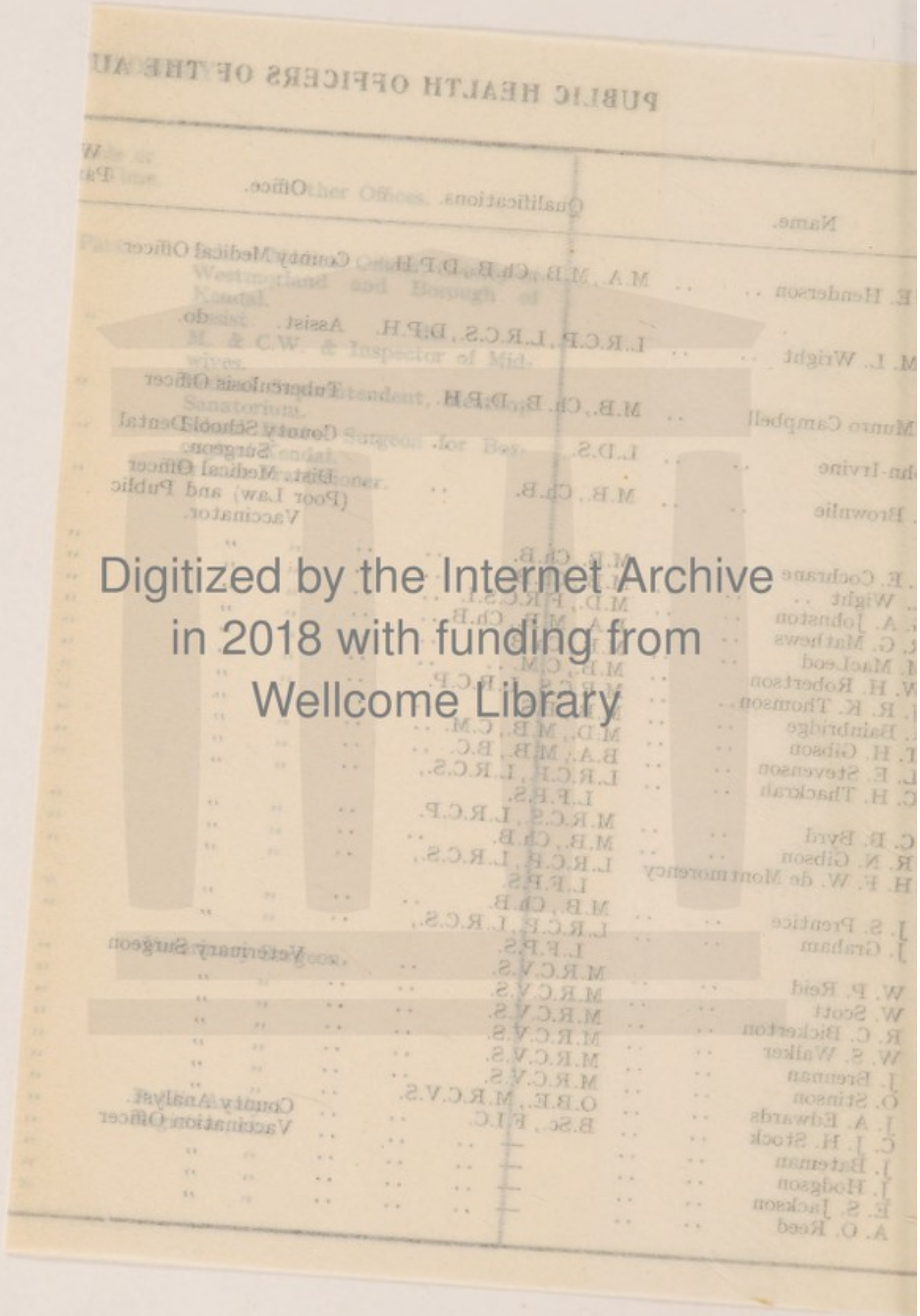
Dr. Craig,
D. Graham,
Mrs. E. A. Cumberland.

District Medical Officer of Health.

Name.				*Urban District.*
W. Baron Cockill, M.D., D.P.H.			...	Ambleside.
,,	,,	,,	...	Appleby.
,,	,,	,,	...	Grasmere.
,,	,,	,,	...	Kendal.
,,	,,	,,	...	Kirkby Lonsdale.
,,	,,	,,	...	Shap.
,,	,,	,,	...	Windermere.
				Rural District.
,,	,,	,,	...	East Westmorland.
,,	,,	,,	...	South Westmorland.
,,	,,	,,	...	West Ward.

PUBLIC HEALTH OFFICERS OF THE AUTHORITY.

Name.	Qualifications.	Office.	Whole or Part Time.	Other Offices.
W. E. Henderson	M.A., M.B., Ch.B., D.P.H.	County Medical Officer	Part	School Medical Officer, County of Westmorland and Borough of Kendal.
J. M. L. Wright	L.R.C.P., L.R.C.S., D.P.H.	Assist. do.	,,	Assist. do. M. & C.W. & Inspector of Midwives.
J. Munro Campbell ..	M.B., Ch. B., D.P.H. ..	Tuberculosis Officer	,,	Medical Superintendent, Meathop Sanatorium.
John Irvine	L.D.S.	County School Dental Surgeon.	,,	School Dental Surgeon for Borough of Kendal.
A. Brownlie	M.B., Ch.B.	Dist. Medical Officer (Poor Law) and Public Vaccinator.	,,	Private Practitioner.
A. E. Cochrane	M.B., Ch.B.	,,	,,	,,
A. Wight	M.B., Ch.B.	,,	,,	,,
G. A. Johnston	M.D., F.R.C.S.I.	,,	,,	,,
R. G. Mathews	B.A., M.B., Ch.B.	,,	,,	,,
M. MacLeod	M.B., Ch.B.	,,	,,	,,
W. H. Robertson ..	M.B., C.M.	,,	,,	,,
J. R. K. Thomson	M.R.C.S., L.R.C.P. ..	,,	,,	,,
I. Bainbridge	M.B., B.S.	,,	,,	,,
T. H. Gibson	M.D., M.B., C.M.	,,	,,	,,
L. E. Stevenson	B.A., M.B., B.C.	,,	,,	,,
C. H. Thackrah	L.R.C.P., L.R.C.S., L.F.P.S. ..	,,	,,	,,
C. B. Byrd	M.R.C.S., L.R.C.P. ..	,,	,,	,,
R. N. Gibson	M.B., Ch.B.	,,	,,	,,
H. F. W. de Montmorency	L.R.C.P., L.R.C.S., L.F.P.S. ..	,,	,,	,,
J. S. Prentice	M.B., Ch.B.	,,	,,	,,
J. Graham	L.R.C.P., L.R.C.S., L.F.P.S. ..	,,	,,	,,
W. P. Reid	M.R.C.V.S.	Veterinary Surgeon	,,	Veterinary Surgeon.
W. Scott	M.R.C.V.S.	,,	,,	,,
R. C. Bickerton	M.R.C.V.S.	,,	,,	,,
W. S. Walker	M.R.C.V.S.	,,	,,	,,
J. Brennan	M.R.C.V.S.	,,	,,	,,
O. Stinson	M.R.C.V.S.	,,	,,	,,
J. A. Edwards	O.B.E., M.R.C.V.S. ..	,,	,,	,,
C. J. H. Stock	B.Sc., F.I.C.	County Analyst.	,,	Public Analyst.
J. Bateman	—	Vaccination Officer	,,	Registrar, etc.
J. Hodgson	—	,,	,,	,,
E. S. Jackson	—	,,	,,	,,
A. O. Reed	—	,,	,,	,,



To the Chairman and Members of the Public Health and Housing Committee.

GENTLEMEN,

I have the honour to present the following Annual Report on the Health of the Administrative County of Westmorland during the year ended 31st December, 1930.

CIRCULAR (1119) AS TO THE CONTENTS AND ARRANGEMENT OF THE ANNUAL REPORTS OF MEDICAL OFFICERS OF HEALTH FOR 1930.

In this Circular the Minister of Health indicates the ground to be traversed by medical officers in their annual reports for 1930. The Local Government Act of 1929 and the Housing Act of 1930 have given County Councils administrative control over an ever expanding territory.

Paragraph 3 of this Circular is to the following effect:—

" Although the Annual Report for 1930 will be a Report of a more simple character than the full Survey Report which the Medical Officer of Health was asked to prepare for 1925, it should, for the following reasons, contain information on certain matters in more detail than has been given in the Reports for the last four years, viz. :—

(a) The transfer of the Poor Law functions in pursuance of the Local Government Act, 1929, and the other changes effected by that Act have necessitated a careful survey, by the Medical Officers of Health of Counties and County Boroughs, of the Hospital and other Medical services available in their respective areas. The information obtained in this connection should be given in the Annual Report for 1930 on the lines indicated in the section of Appendix I to this Circular which is headed ' General Provision of Health Services in the Area.'

(b) The proposals of the Government in relation to Housing which are embodied in the Housing Bill at present before Parliament will necessitate the early directing of special attention on the part of Medical Officers of Health to Housing defects in their areas and the compilation of accurate records regarding the Housing position generally. For this reason the section on Housing contained in the Annual Report for 1930 should be on a more extensive scale than usual as indicated in Appendix I."

The following report in its survey of the Health activities in Westmorland in 1930 follows the lines suggested by the Ministry and takes note of the points about which the Ministry seeks information.

I have the honour to be

Your obedient servant,

WILLIAM ELMSLIE HENDERSON.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)	504,917
Population (Census 1931)	65,398
Population (Reg. General's Estimate, 1929) ...	63,190
Number of inhabited houses (1921)	14,460
Number of inhabited houses (end of 1930) according to Rate Books	17,417
Number of families or separate occupiers (Census 1921)	14,648
Reduced Rateable Value as on 1st April, 1930 ...	£281,469
Estimated product of a Penny Rate (General County) for the financial year 1930-31	£1,435 4 3

SOCIAL CONDITIONS OF COUNTY.

The 1921 Census showed that among the occupations pursued by the male population agriculture leads by a long way, for Westmorland, with its dales and mountains, affords much ground for sheep and cattle grazing. Then follow in order :—

Building and Works of Construction.
Food and Lodging.
Domestic Outdoor Service.
On Railways.
On Roads.
General Labourers.
Engineering.
Boot and Shoe-making.
Mines and Quarries.
Paper-making.
Chemicals, Explosives.

Within recent years a temporary village has been constructed at Burnbanks, Mardale, to house the workers and their families engaged in the Manchester Corporation Waterworks construction. Here a colony of 486 people is housed.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	Total.	Males.	Females.	
Live Births—(Legitimate)	... 893	... 443	... 450	
(Illegitimate)	... 61	... 28	... 33	
Birth Rate	...	...	...	15.1
Still Births ...	... 43	... 24	... 19	
Rate per 1,000 total Births			...	43.1
Deaths ...	... 800	Death Rate		12.7

Number of women dying in, or in consequence of, child-birth :—

From Sepsis ... 2 From other causes ... 6

Death Rate of Infants under one year of age per 1,000 live births :—

Legitimate ... 59.6 Illegitimate ... 114.8

Total ... 63.1

Deaths from Measles (all ages) ...	... Nil.
,, ,, Whooping-cough (all ages)	... 2
,, ,, Diarrhœa (under 2 years of age)	... 4

POPULATION

DISTRICT.	Area in Acres: (Land and Inland Water).	Population.	
		Registrar General's estimate for 1929.	Census 1931.
URBAN.			
Ambleside ...	4,425	2,303	2,343
Appleby	1,877	1,634	1,618
Grasmere	7,333	861	988
Kendal	2,700	14,680	15,575
Kirkby Lonsdale	3,254	1,166	1,370
Shap	2,081	1,068	1,227
Windermere ...	9,902	5,278	5,701
RURAL.			
East Westmorland	183,771	10,840	10,717
South Westmorland	169,702	19,150	18,954
West Ward ...	119,872	6,210	6,905
Westmorland ...	**504,917**	**63,190**	**65,398**

THE CENSUS OF 1931.

While this Report was nearing completion, the Registrar-General's preliminary report of the Census of 1931 became available.

It reveals, as for Westmorland, a decrease of 348 on the 1921 Census figures. On the other hand it has to be remembered that the 1921 Census was taken at a time when many visitors were temporarily residing at our tourist resorts.

To some extent this fact may account for the decrease in the following Districts, e.g. :—

	1921 Census.	1931 Census.
Ambleside	... 2,876	... 2,343
Grasmere	... 1,173	... 988
South Westmorland	19,398	... 18,954
Windermere	... 6,495	... 5,701

On the other hand the Census figures for Kendal show a remarkable increase—from 14,147 in the 1921 Census to 15,575 in the 1931 Census—the great extension of road transport has brought to Kendal many workers, as have also other industries.

CAUSES OF DEATH.	Sex.	AGGREGATE OF URBAN DISTRICTS. All Ages.	0—	1—	2—	5—	15—	25—	45—	65—	75—	AGGREGATE OF RURAL DISTRICTS. All Ages.	0—	1—	2—	5—	15—	25—	45—	65—	75—
ALL CAUSES	M	179	11	2	1	3	7	15	46	47	47	221	20	3	—	3	6	17	55	59	58
	F	186	13	1	—	7	7	14	35	60	49	214	16	4	3	2	5	17	47	38	82
1 Enteric fever	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2 Small-pox	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3 Measles	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4 Scarlet fever	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5 Whooping cough	M	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—
	F	1	1	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—
6 Diphtheria	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	1	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—
7 Influenza	M	—	—	—	—	—	—	—	—	—	—	6	—	—	—	—	—	3	1	1	1
	F	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	2
8 Encephalitis lethargica	M	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1	—	1	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9 Meningococcal meningitis	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10 Tuberculosis of respiratory system	M	12	—	—	—	—	5	3	4	—	—	5	—	—	—	1	1	2	1	—	—
	F	8	—	—	—	—	3	4	1	—	—	7	—	—	—	—	1	4	2	—	—
11 Other tuberculous diseases	M	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	2	—	1	—	—
	F	7	—	—	—	1	2	1	2	—	1	1	—	—	—	—	—	1	—	—	—
12 Cancer, malignant disease	M	20	—	—	—	—	—	—	9	7	4	25	—	—	—	—	—	2	5	9	9
	F	32	—	—	—	—	—	1	12	12	7	29	—	—	—	—	—	2	9	8	10
13 Rheumatic fever	M	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—
	F	1	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	1	—	—
14 Diabetes	M	5	—	—	—	—	—	—	—	3	2	6	—	—	—	—	—	—	3	2	1
	F	2	—	—	—	—	—	—	1	1	—	5	—	—	—	—	—	—	3	2	—
15 Cerebral hæmorrhage, &c.	M	14	—	—	—	—	—	—	3	7	4	21	—	—	—	—	—	—	5	7	9
	F	24	—	—	—	—	—	—	2	16	6	16	—	—	—	—	—	—	3	5	8
16 Heart disease	M	46	—	—	—	—	—	1	13	12	20	46	—	—	—	—	—	1	13	23	9
	F	34	—	—	—	—	—	1	6	14	13	49	—	—	—	—	—	2	12	10	25
17 Arterio-sclerosis	M	11	—	—	—	—	—	—	1	7	3	9	—	—	—	—	—	—	2	2	5
	F	4	—	—	—	—	—	—	—	2	2	9	—	—	—	—	—	—	—	2	7
18 Bronchitis	M	6	1	—	—	—	—	—	2	1	2	5	1	—	—	—	—	—	3	1	
	F	1	—	—	—	—	—	—	—	1	—	7	—	1	—	—	—	—	—	—	6
19 Pneumonia (all forms)	M	4	—	—	—	—	—	1	2	—	1	12	1	—	—	—	1	—	5	2	3
	F	6	1	1	—	1	—	—	1	1	1	8	1	2	1	—	—	—	3	1	
20 Other respiratory diseases	M	2	—	—	—	1	—	—	—	—	1	4	—	—	—	—	—	1	2	1	—
	F	1	1	—	—	—	—	—	—	—	—	5	—	—	—	—	2	—	2	1	—
21 Ulcer of stomach or duodenum	M	1	—	—	—	—	—	1	—	—	—	5	—	—	—	—	1	2	1	—	1
	F	2	—	—	—	—	—	—	—	—	2	1	—	—	—	—	—	—	—	—	1
22 Diarrhoea, &c.	M	3	2	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
	F	1	—	—	—	—	—	—	—	1	—	1	1	—	—	—	—	—	—	—	—
23 Appendicitis and typhlitis	M	3	—	—	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	2	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—
24 Cirrhosis of liver	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
25 Acute and chronic nephritis	M	10	—	—	—	—	—	—	4	5	1	11	—	—	—	—	—	1	5	2	3
	F	10	—	—	—	—	—	1	2	2	5	13	—	—	—	—	—	1	5	2	5
26 Puerperal sepsis	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	1	—	—	—
27 Other accidents and diseases of pregnancy and parturition	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	3	—	—	—	—	—	3	—	—	—	3	—	—	—	—	—	3	—	—	—
28 Congenital debility and malformation, premature birth	M	5	5	—	—	—	—	—	—	—	—	14	14	—	—	—	—	—	—	—	—
	F	9	8	—	—	—	—	1	—	—	—	11	10	—	—	1	—	—	—	—	—
29 Suicide	M	4	—	—	—	—	—	2	1	1	—	2	—	—	—	—	—	1	1	—	—
	F	4	—	—	—	—	—	—	2	2	—	—	—	—	—	—	—	—	—	—	—
30 Other deaths from violence	M	5	—	—	—	—	1	1	2	1	—	10	—	—	—	—	1	1	4	3	1
	F	—	—	—	—	—	—	—	—	—	—	4	—	—	—	—	—	1	—	1	2
31 Other defined diseases	M	28	3	1	1	1	1	4	5	3	9	32	4	2	—	1	—	2	6	3	14
	F	32	2	—	—	4	2	1	4	7	12	39	4	1	—	1	2	2	10	4	15
32 Causes ill-defined or unknown	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

BIRTH RATE, 1930.

Birth Rate per 1,000 population.

District.	No. of Births 1930.	Birth Rate 1930.	Birth Rate 1929.	Birth Rate 1928.	Birth Rate 1927.	Birth Rate 1926.
Urban.						
Ambleside	27	11.7	9.1	11.5	8.2	13.7
Appleby	21	12.8	9.8	12.2	14.2	8.3
Grasmere	12	13.9	12.8	12.6	12.6	12.7
Kendal	227	15.5	14.2	15.8	17.2	17.6
Kirkby Lonsdale ..	14	12.0	23.2	21.8	15.9	11.5
Shap	22	20.6	22.5	24.7	28.1	21.5
Windermere ..	51	9.6	15.2	10.9	16.3	12.8
Rural.						
East Westmorland ..	224	20.6	18.7	18.4	16.9	19.9
South Westmorland	248	12.9	12.6	15.8	15.5	14.9
West Ward	108	17.4	20.0	17.2	15.1	25.4
Westmorland ..	**954**	**15.1**	**15.1**	**15.9**	**16.1**	**16.8**
England & Wales ..		16.3	16.3	16.7	16.7	17.8

The births registered in the above 5 years were as follows :—

Year	1926	1927	1928	1929	1930
No. of Births	1058	995	1002	957	954

DEATH RATE, 1930.

Net Death Rate per 1,000 population.

District:	No. of Deaths 1930.	Death Rate 1930.	Death Rate 1929.	Death Rate 1928.	Death Rate 1927.	Death Rate 1926.
Urban.						
Ambleside	33	14.3	12.2	11.1	11.3	12.4
Appleby	25	15.3	13.5	14.0	18.8	11.6
Grasmere	10	11.6	8.1	16.1	14.9	18.4
Kendal	203	13.8	13.2	12.5	14.5	12.9
Kirkby Lonsdale	12	10.3	24.0	13.1	15.9	11.5
Shap	17	15.8	20.6	13.3	8.7	21.5
Windermere	65	12.3	12.3	15.2	15.5	8.7
Rural.						
East Westmorland	162	14.9	14.0	14.7	12.0	11.0
South Westmorland	204	10.6	12.6	12.3	13.2	13.0
West Ward	69	11.1	11.0	10.5	14.6	9.5
Westmorland	**800**	**12.7**	**13.1**	**12.9**	**13.6**	**12.04**
England & Wales	—	11.4	13.4	11.7	12.3	11.6

In the attached table, furnished by the Registrar-General, the causes of deaths at different periods of life in the administrative county in 1930 are set out.

It will be observed that the chief causes of death in 1930, in order of fatality, were as follows:—

	No. of deaths.
Heart Disease	175
Cancer	109
Cerebral Hæmorrhage	75
Acute and Chronic Nephritis	44
Congenital Debility	39
Arterio-Sclerosis	33
Tuberculosis of respiratory system ..	32
Pneumonia (all forms)	30

INFANTILE MORTALITY, 1930.

DISTRICT.	No. of Births in 1930	No. of Deaths in 1930.	Infant Mortality Rate in 1930.	Infant Mortality Rate in 1929.	Infant Mortality Rate in 1928.	Infant Mortality Rate in 1927.	Infant Mortality Rate in 1926.
Urban.							
Ambleside	27	4	148	143	0	0	32
Appleby	21	3	143	0	0	45	0
Grasmere	12	0	0	0	91	0	0
Kendal	227	14	61	62	57	103	85
Kirkby Lonsdale	14	0	0	37	40	105	0
Shap	22	3	136	0	0	69	48
Windermere	51	0	0	87	53	12	29
Rural.							
E. Westmorland	224	18	80	49	65	54	68
S. Westmorland....	248	12	48	58	49	27	54
West Ward	108	6	55	32	28	43	19
Westmorland	**954**	**60**	**63**	**54**	**48.9**	**53.2**	**54.8**
England & Wales	—	—	60	74	65	69	70

AGE INCIDENCE OF INFANTILE MORTALITY, 1930.

	1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total under 1 year.
URBAN										
Ambleside	1	—	1	1	3	—	1	—	—	4
Appleby	1	—	2	—	3	—	—	—	—	3
Grasmere	—	—	—	—	—	—	—	—	—	—
Kendal	4	—	4	—	8	1	4	—	1	14
Kirkby Lonsdale	—	—	—	—	—	—	—	—	—	—
Shap	2	—	—	—	2	—	1	—	—	3
Windermere	—	—	—	—	—	—	—	—	—	—
RURAL										
E. Westmorland	15	—	1	—	16	1	1	—	—	18
S. Westmorland	4	3	2	—	9	2	—	—	1	12
West Ward	3	—	1	1	5	1	—	—	—	6
Westmorland.....	30	3	11	2	46	5	7	—	2	60

Analysis of Causes of Deaths of Infants under 1 year in 1930.

DISTRICT.	Gastritis.	Convulsions	Bronchitis	Pneumonia.	Prematurity	Atrophy, Debility and Marasmus.	Congenital Malformation	Other Causes	TOTAL
URBAN.									
Ambleside	—	—	—	—	—	2	1	1	4
Appleby ...	—	—	—	—	2	—	1	—	3
Grasmere	—	—	—	—	—	—	—	—	—
Kendal ...	2	—	—	2	4	1	—	5	14
Kirkby Lonsdale	—	—	—	—	—	—	—	—	—
Shap ...	—	1	1	—	—	—	1	—	3
Windermere	—	—	—	—	—	—	—	—	—
RURAL.									
E. Westmorland	1	3	1	—	6	1	4	2	18
S. Westmorland	1	—	—	—	3	6	1	1	12
West Ward	—	—	—	1	2	—	1	2	6
Westmorland	**4**	**4**	**2**	**3**	**17**	**10**	**9**	**1**	**60**

Deaths in order of Fatality.

Prematurity ..	17
Other Causes..	11
Atrophy, Debility and Marasmus ..	10
Congenital Malformation	9
Convulsions .. Gastritis	14
Pneumonia ..	3
Bronchitis ..	2

MATERNITY AND CHILD WELFARE.

This work is ably organised by Dr. Jessie Wright, who in March, 1930, succeeded Dr. Alison Maxwell Wood as Assistant County Medical Officer. Dr. Wright is also Supervisor of Midwives, under the Midwives Acts, and is Superintendent of Nurses for the County Nursing Association.

Under Dr. Wright's supervision, the nurses employed by 27 District Nursing Associations carry out the duties of part-time health visitors—which include maternity and child welfare visiting, school nursing, after-care visiting in connection with the County Tuberculosis Scheme, etc. For these services the County Council, through the County Nursing Association, makes annual payments.

Maternity and Child Welfare Centres are held once a month at Windermere, Bowness-on-Windermere, Ambleside and Burnbanks, at all of which Dr. Wright attends. The centres are supported by local voluntary committees, who devote much care to this important work.

Thanks to the encouragement of the County Nursing Association three additional Nursing Associations have been formed, viz., at Langdale, Tebay and Grayrigg, while arrangements are in train for the Sedbergh and District Nursing Association to include certain adjacent areas in their district, namely, Lowgill, Firbank, and Killington.

The figures for 1930 as to visits by nurses and by Dr. Wright in the County (excluding the Borough of Kendal) are as follows :—

	By Nurse.	Dr. Jessie Wright.	Total.
Expectant Mothers visited	386	10	396
Total visits	1,960	10	1,970
Infants visited	476	156	632
Total visits	5,152	356	5,508
Children, 1-5 years			
Total visits	3,771	295	4,066

In addition to the above figures we have to consider the excellent work done in Kendal. The Borough of Kendal, which is an authority under the Maternity and Child Welfare Act, maintains a centre held weekly at Abbot Hall, Kendal. This efficient centre is conducted by Dr. Cockill, the Medical Officer of Health for the Westmorland Combined Districts, who kindly supplies the following statement of the work done in the Borough of Kendal in 1930.

Summary of work done in connection with Kendal Maternity and Child Welfare Centre, 1930 :—

No. of times the Centre has been open ...		52
,, babies under 1 year attending ...	118	
,, children 1—5 years attending ...	120	
	——	238
,, consultations for babies	1358	
,, ,, children ...	930	
,, ,, mothers ...	243	
,, ,, expectant mothers	122	
	——	2653
Average No. of babies attending per session ...	26	
,, ,, children attending per session	18	
,, ,, mothers attending per session	4·7	
,, ,, expectant mothers attending per session ...	2.3	
	——	51
No. of expectant mothers admitted to Hospital under the Maternity and Child Welfare Act		11

The following is a summary of Nurse Petersen's Work (Kendal Health Visitor) :—

First visits to infants under 12 months ...	224	
Subsequent visits	1073	
Visits to children 1—5 years of age ...	370	
First visits to expectant mothers	138	
Subsequent visits	70	
Still birth enquiries	7	
Attendances at Centre	49	
	——	1931

Summary of Nurse Hughes' Work (Kendal Nurse) :—

Visits to cases of Puerperal Fever ...	0	
,, ,, ,, Pyrexia ...	59	
,, ,, Ophthalmia Neonatorum ...	61	
	——	120

Coming to children of school age we find that in the County (including the Borough of Kendal) the nurses paid 4,127 visits to the homes in connection with children found defective at school medical inspection. 3,495 children had dental treatment, 7,287 had dental inspection, 739 had their eyes tested by refraction, and 3,568 had medical inspection; 20 children received residential treatment at the Ethel Hedley Orthopædic Hospital, Windermere, in 1930. In addition 114 children have been under periodic observation at the Orthopædic After-care Clinics at Kendal, Penrith, and the Ethel Hedley Hospital out-patient department.

Nursing in the Home.

This is carried out by the 27 District Nursing Associations which cover a large proportion of the population. It has been the policy of the County Council to encourage by annual grants the formation of nursing associations, neighbouring villages combining for this purpose.

Owing to the sparsely populated and mountainous character of the County the chief difficulty to be surmounted is the transport of the Nurse. Some Associations have provided their nurse with a motor car, others with a motor-bicycle, and others with a pedal cycle.

The County Nursing Association has been of great use in encouraging local effort in the starting of additional District Associations. During 1930, three such associations have been formed.

There is close co-ordination between the District Nursing Associations and the County Council. The part-time services of the above-mentioned nurses have been secured as Health Visitors, School Nurses and Tuberculosis visitors. For these services, the County Council, through the County Nursing Association, makes annual payments to the District Nursing Associations. Dr. Jessie Wright, the Assistant County Medical Officer, supervises the nurses in respect of these duties; she is also Supervisor of Midwives. The County Nursing Association arranges for the attendance of selected nurses at "refresher" training courses, the cost of this being met by the County Council.

MIDWIVES ACTS, 1902 & 1918.

Dr. Jessie Wright, the Assistant County Medical Officer, who acts as Inspector of Midwives, reports as follows:—36 Midwives notified their intention to practise in the County in 1930. Of these, 22 were District Nurses, 3 practised in the Maternity Department of the County Hospital, Kendal, 2 at St. Monica's Maternity home for unmarried mothers at Kendal, and one at the Poor Law Institution, Kendal. The remaining 8 were in private practice, 2 of them being bona-fide midwives.

The following notifications from Midwives were received in 1930:—

Form of Notification of	sending for Medical Aid	...	71
,,	Still Birth ...	...	2
,,	Artificial Feeding	...	1
,,	Laying out dead body	...	3
,,	Liability to be source of infection	...	5
,,	Notification of death	...	1

THE PUBLIC HEALTH (NOTIFICATION OF PUERPERAL FEVER AND PUERPERAL PYREXIA) REGULATIONS, 1926.

Under the above Regulations, 11 cases of Puerperal Pyrexia and 3 cases of Puerperal Fever were notified in 1930.

The services of Dr. Douglas Smith, Gynæcologist, Carlisle, are available for any notifying practitioner, as well as the provision of trained nursing and laboratory facilities.

NATIONAL HEALTH INSURANCE.

The Sanatorium Benefit Sub-Committee consists of seven representatives appointed by the County Council and of three representatives appointed by the County Insurance Committee.

In conference together these representatives determine the nature and extent of Sanatorium Benefit provided for the various patients. The County Tuberculosis Officer (who is also Medical Superintendent of the Westmorland Sanatorium) is in attendance to advise the Committee and to report on the progress of the patients in whose welfare the Committee takes a close and practical interest.

There is also co-operation between the County Health Committee and the Insurance Committee on the Board of Governors of the Westmorland Sanatorium. This is a voluntary institution, on the Governing Body of which representatives from the County Council and the County Insurance Committee act.

POOR LAW MEDICAL OUT-RELIEF.

This service is now administered by the County Council acting through the County Public Assistance Committee.

Previous to the operation of the Local Government Act there were three Poor Law Unions in the County, namely, the West Ward Union, the East Ward Union and the Kendal Union.

Under the transference brought about by this Act the County has been divided into two areas for administration of out-relief, namely, North Westmorland and South Westmorland. There has been no change in the districts assigned to the various district medical officers.

I am indebted to the County Public Assistance Officer for the following information as to the districts, area, populations, etc. :—

MEDICAL RELIEF AND PUBLIC VACCINATORS' DISTRICTS.

NORTH WESTMORLAND AREA.

Medical and Public Vaccination District.	Parishes.	Area.	Population (1921).
Eamont Bridge ... Dr. J. R. K. Thomson	Askham ...	4490	437
	Barton ...	2800	388
	Brougham ...	6224	253
	Clifton ...	1778	397
	Lowther ...	3675	407
	Sockbridge ...	1230	221
	Yanwath & Eamont B'ge	1300	274
		21497 ...	2377
	Barton Fell—Common to Barton & Sockbridge ...	1715	
		23212 ...	2377
Morland ... Dr. Thackrah.	Bolton ...	2789	262
	Cliburn ...	1891	220
	King's Meaburn ...	2387	146
	Maulds Meaburn & Reagill (pt. of Crosby Ravensworth) ...	6576	368
	Morland ...	1761	274
	Newby ...	2986	169
	Sleagill ...	1384	122
	Great Strickland ...	2339	254
		22113 ...	1815
Patterdale ... Dr. Byrd.	Martindale ...	8022	195
	Patterdale & Hartsop ...	16737	961
		24759 ...	1156
Shap ... Dr. Prentice.	Bampton ...	10925	424
	Crosby Ravensworth (remainder of) ...	4473	358
	Shap Rural ..	25097	243
	Shap Urban ...	2081	1005
	Little Strickland ...	790	93
	Thrimby ...	1573	53
		44939 ...	2176
	The above excludes Bank Moor—Common to Asby & Crosby Ravens'th &...	336	
	Birkbeck Fells — Common to Orton and Crosby Ravensworth ...	6594	
	Totals ...	121953 ...	7524

Medical and Public Vaccination District.	Parishes.	Area.	Population (1921).
Kirkby Thore ...	Kirkby Thore ...	2503 ...	469
Dr. Stevenson.	Milburn ...	7955 ...	198
	Newbiggin ...	1195 ...	120
	Temple Sowerby ...	1240 ...	351
		12893 ...	1138
Orton ...	Orton ...	17657 ...	798
Dr. Graham.	Tebay ...	6855 ...	1030
		24512 ...	1828
Appleby ...	Asby ...	8478 ...	377
Dr. de Montmorency.	Dufton ...	16852 ...	293
	Murton ...	13282 ...	411
	Ormside ...	2718 ...	141
	Appleby ...	1877 ...	1785
	Colby ...	1400 ...	98
	Crackenthorpe ...	1358 ...	115
	Hoff ...	3661 ...	188
	Longmarton ...	6946 ...	619
		56572 ...	4027
Kirkby Stephen ...	Hartley ...	3202 ...	146
Dr. T. H. Gibson.	Kaber ..	4615 ...	136
	Kirkby Stephen ...	3136 ...	1542
	Nateby ..	2194 ...	155
	Wharton ...	1500 ...	39
	Winton ...	5110 ...	199
		19757 ...	2217
Brough ...	Brough ...	1572 ...	620
Dr. Bainbridge.	Brough Sowerby ...	1198 ...	98
	Hillbeck ...	2760 ...	40
	Musgrave ...	4390 ...	196
	Stainmore ...	16328 ...	490
	Warcop ...	11497 ...	577
		37745 ...	2021
Ravenstonedale ...	Crosby Garrett ...	3901 ...	160
Dr. R. N. Gibson.	Mallerstang ..	8371 ...	221
	Ravenstonedale ...	16406 ...	831
	Soulby ...	2644 ...	200
	Waitby ...	2847 ...	98
		34169 ...	1510
	Totals for Area ...	185648 ...	12741

SOUTH WESTMORLAND AREA.

Medical and Public Vaccination District.	Parishes.	Area.	Population (1921).
Kendal ...	Kendal ...	2700 ...	14146
Dr. Alec Cochrane.	Dillicar ...	1121 ...	100
	Docker ...	1373 ...	65
	Fawcett Forest ...	3935 ...	36
	Firbank ...	2986 ...	146
	Grayrigg ...	3752 ...	202
	Helsington ...	3326 ...	297
	Lambrigg ...	1805 ...	125
	Longsleddale ...	6731 ...	101
	Natland ...	1156 ...	572
	New Hutton	4758 ...	246
	Old Hutton and Holmescales ...	3976 ...	268
	Patton ...	637 ...	67
	Scalthwaiterigg ...	1188 ...	182
	Sedgwick ...	495 ...	200
	Stainton ...	1736 ...	324
	Strickland Ketel ...	2361 ...	753
	Strickland Roger ...	3199 ...	384
	Underbarrow and Bradleyfield ...	5122 ...	396
	Whinfell ...	4347 ...	136
	Whitwell & Selside ...	3388 ...	183
	Skelsmergh ...	2093 ...	329
		62185 ...	19258
Ambleside ...	Ambleside ...	4425 ...	2876
Dr. G. A. Johnston.	Grasmere ...	7333 ...	1173
	Langdales ...	9509 ...	686
	Rydal, etc. ...	4858 ...	503
		26125 ...	5238
Milnthorpe ...	Arnside ...	1823 ...	1678
Dr. MacLeod.	Beetham ...	3696 ...	685
	Crosthwaite (part) ...	3931 ...	225
	Haverbrack ...	667 ...	101
	Heversham ...	1463 ...	372
	Hincaster ...	700 ...	143
	Levens ...	3516 ...	710
	Meathop ...	2431 ...	328
	Milnthorpe ...	913 ...	1025
	Witherslack ...	4650 ...	401
		23790 ...	5668

Medical and Public Vaccination District.	Parishes.	Area.	Population (1921).
Kirkby Lonsdale ...	Barbon ...	4278 ...	248
Dr. Mathews.	Casterton ...	4326 ...	424
	Hutton Roof ...	2716 ...	234
	Killington ...	4937 ...	200
	Kirkby Lonsdale ...	3254 ...	1393
	Lupton ...	3524 ...	196
	Mansergh ...	2669 ...	180
	Middleton ...	7256 ...	209
		32960 ...	3084
Windermere ...	Bowness ...	983 ...	3860
Dr. Brownlie.	Crosthwaite (part) ...	4119 ...	444
	Troutbeck ...	5808 ...	486
	Undermillbeck ...	3365 ...	748
	Windermere ...	8919 ...	2635
		23194 ...	8173
Burton ...	Burton ...	1472 ...	460
Dr. Robertson.	Farleton ...	1203 ...	63
	Holme ...	1648 ...	626
	Preston Patrick ...	3659 ...	441
	Preston Richard ...	2134 ...	619
	Dalton ...	2171 ...	111
		12287 ...	2320
Staveley ...	Crook ...	2119 ...	221
Dr. Wight.	Hugill ...	2900 ...	376
	Kentmere ...	6613 ...	138
	Nether Staveley ...	2563 ...	362
	Over Staveley ...	2580 ...	643
		16775 ...	1740
	Totals for South Westmorland ...	197316 ...	45481

LABORATORY FACILITIES.

The Combined Districts of Westmorland have provided laboratories at Kendal to which any practitioner may send specimens for examination. The Medical Officer of Health for the Combined Districts kindly supplies the following table.

It will be observed that water analysis and the bacterial count for milk are also carried out at this laboratory. The examination of sputum for the Tubercle Bacillus is also undertaken at the Laboratory at the Westmorland Sanatorium, free of charge, outfits being supplied to all practitioners.

Specimens of milk for Tubercle Bacillus are examined at the Public Health Laboratory of Manchester University, where also are examined specimens under the Public Health (V.D.) Regulations.

Work under the Sale of Food and Drugs Acts is undertaken at the Laboratory of the County Analyst, Darlington.

DISTRICT.	Diphtheria.	Tuberculous (Sputum).	Enteric Fever.		Organisms.	Malaria.	Gonococcus.	Urine.		Cyto-diagnosis.	Anaemia.	Vaccine Cultures.	Water.			Milk.		TOTALS.
			Agglutinations.	Carriers.				Bacilluria.	Deposit.				Analysis.	B. Coli.	Deposit.	Bacterial Count.	B Coli.	
Ambleside ...	10	-	-	-	-	1	-	1	-	-	-	1	-	-	-	-	-	13
Appleby ...	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5
Grasmere ...	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	2
Kendal ...	121	33	5	4	-	1	7	16	2	4	11	1	1	25	1	9	9	250
Kirkby Lonsdale	-	-	-	-	-	-	-	-	-	-	-	-	2	2	-	-		4
Shap	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Windermere ...	68	-	-	-	-	-	-	1	-	-	-	-	1	2	-	-	-	72
East Westmorland	11	-	-	2	-	-	-	-	-	-	1	-	2	1	-	-	-	17
South Westmorland	67	11	4	-	3	-	2	5	-	1	4	-	5	3	-	14	14	133
West Ward ...	6	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	-	8
TOTALS	289	44	9	6	4	3	9	23	2	5	17	3	11	33	1	23	23	505

HOSPITALS.

A. ISOLATION HOSPITAL ACCOMMODATION.

1. Smallpox.

There is one Smallpox Hospital at Woodside, near Kendal.

The accommodation is 10 beds as based on 144 square feet per bed.

This Hospital is under the management of a Joint Hospital Board, consisting of representatives from the whole of the District Health Authorities in Westmorland (except the Urban District of Kirkby Lonsdale), and from Grange Urban District and Ulverston Rural District.

There is a trained nurse in residence, and additional staff would be engaged as required. The medical arrangements are under the Medical Officer of Health of the Combined Districts of Westmorland.

2. Other Infectious Diseases.

There are three Isolation Hospitals (excluding Smallpox) in the County. They are provided and maintained by local Authorities or by joint local authorities, and are as follows:—

(1) *Kendal Isolation Hospital.*

Based on 144 square feet per bed, there are 24 beds. Scarlet Fever, Diphtheria, and Enteric Fever cases are treated.

There is a nursing staff of one Matron, one Sister and four Nurses. The Medical Staff consists of five of the local practitioners.

This Hospital is administered by the Corporation of Kendal and supplies accommodation for the Urban Districts of Kendal, Ambleside, Grasmere, Kirkby Lonsdale, Grange, Carnforth, Windermere (for Diphtheria cases only), and the Rural District of South Westmorland.

(2) *Windermere Isolation Hospital.*

Based on 144 square feet per bed, there are 6 beds and two wards. Scarlet Fever and Enteric cases are treated. There is a resident caretaker and nursing staff is engaged as required. The local practitioners attend their own cases.

This Hospital is the property of the Windermere Urban District Council and supplies accommodation for the area under its control.

(3) *The Ormside Fever Hospital, Ormside, near Appleby.*

Based on 144 square feet per bed there are 24 beds. Scarlet Fever, Diphtheria and Enteric Fever cases are treated.

There is a resident caretaker and nursing staff is engaged as required. The medical officer is Dr. de Montmorency, of Appleby.

This Hospital is managed by a Joint Hospital Board consisting of representatives from the Borough of Appleby and Shap Urban Districts and from the Rural Districts of East Westmorland and West Ward.

Summary.

Available beds:.

Kendal ...	24	based on 144 sq. ft. per bed.
Windermere...	6	,,
Ormside ...	24	,,
Total beds ...	54	

B. GENERAL MEDICAL AND SURGICAL HOSPITALS.

(a) *County Hospital, Kendal.* This excellently equipped hospital is supported by voluntary subscriptions and donations. It is undergoing extension, and the following accommodation will be available in the near future:—

Medical Beds ...	...	10 male.
		10 female.
Surgical Beds ...	...	16 male.
		24 female.
Children ...	...	12 cots.
Maternity Beds in Maternity Block ...	...	6.

STAFF.

Medical and Surgical	...	6 Medical Practitioners in Kendal.
Nursing ...	...	1 Matron.
		1 Assistant Matron.
		4 Ward Sisters.
		2 Staff Nurses.
		12 Probationers.

A Resident Medical Officer is shortly to be appointed.

There is an excellent X-ray installation. This Hospital treats patients from all over the County. The enormous motor traffic in the Lake District provides its quota of road accidents, many of the injured being treated in this Hospital. Thus a very real problem faces the Governors and Staff.

There are three Hospitals situated outside the County at which Westmorland patients are treated. These are:—

(b) *The Cumberland Infirmary, Carlisle,* with 52 beds for male and 59 for female cases, and in addition 20 beds for children.

(c) *Penrith Cottage Hospital* with 5 beds for male and 5 beds for female patients, and in addition 2 cots for children.

Westmorland patients from the north and north-west parts of Westmorland are treated in these hospitals, while those residents in the south of the county are occasionally treated at

(d) *The Royal Lancaster Infirmary, Lancaster,* with its 106 beds, 20 of which are for children.

(4) Children.

There is accommodation for children in all the above-mentioned hospitals as well as in several of the Hospitals described below.

(5) Maternity.

(a) As mentioned above, there is at the County Hospital, Kendal a separate Maternity Block with 6 beds. There are two Nursing Sisters who are certified midwives.

(b) *St. Monica's Home for Unmarried Mothers, Kendal.* This is a voluntary institution under the Carlisle Diocesan Moral Welfare Association. There are 10 beds and 2 certified midwives.

(c) *Private Nursing Homes.*

Nine Private Nursing Homes are registered in the County.

(6) Venereal Diseases.

Patients from Westmorland attend, mainly, the North Lonsdale Hospital, Barrow-in-Furness. At the Venereal Diseases department of this Hospital cases are occasionally admitted, but the majority are out-patients.

Westmorland patients are treated also at the Cumberland Infirmary, Carlisle, and at the Royal Infirmary, Preston.

From time to time patients are sent to the Hope Hospital, Leeds—a Maternity Hospital—for their confinement and concurrent treatment.

(7) Tuberculosis.

(a) *Pulmonary.* Thanks to the pioneer efforts of Drs. Paget-Tomlinson and Parker, a Sanatorium was provided many years ago at Meathop, near Grange-over-Sands. The Institution, which is on a voluntary basis, has the following accommodation :—

Available beds—Male 90.
Female 60.

As will be seen in the report of the County Tuberculosis Officer 44 Westmorland patients were in residence in 1930.

This Sanatorium has much original equipment invented by members of the Governing body.

(b) *Non-Pulmonary.*

A certain number of patients (4 in 1930) are treated at the above Sanatorium, others at the County Hospital, Kendal, or at the Ethel Hedley Orthopædic Hospital, Windermere.

(8) Chronic Sick at Public Assistance Institutions.

(a) *Poor Law Institution, Kendal.*

Out of a total of 135 beds, 40 to 45 are available for the chronic sick, while in the nursery there are 8 beds.

(b) *Poor Law Institution, Eden House, Kirkby Stephen.*

The total beds are 58, of which 12 to 15 are available for the chronic sick, while 2 children can be accommodated in the nursery.

(9) Mental.

The Counties of Cumberland and Westmorland combine to maintain the Mental Hospital at Garlands, near Carlisle. The occupancy of beds was, at the end of 1930, as follows:—

	Males.	Females.	Total.
Cumberland ...	329 ...	322 ...	651
Westmorland ...	66 ...	77 ...	143
Private Patients ...	11 ...	20 ..	31
Service Patients ...	26 ...	0 ...	26
Ex-Service Patients ...	3 ...	0 ...	3
Totals ...	435	419	854

Reference is made to the Mental Treatment Act on page 32.

(10) Mental Deficiency.

The City of Carlisle and the Counties of Cumberland and Westmorland jointly administer the Mental Deficiency Act. A large Institution for Mental Defectives has just been opened at Dovenby Hall, near Cockermouth, Cumberland, to accommodate 300 patients to start with.

Mental Home, Milnthorpe, Westmorland.

At present there is in the County of Westmorland one Poor Law Institution certified under Section 37 of the Mental Deficiency Act, 1913, for the reception of low grade defectives.

There is a total of 124 beds, and the Institution is certified for:—

	26 adult males,
	18 juvenile males,
	27 adult females,
	24 juvenile females.
Total	95

The remainder are Poor Law patients certified under the Lunacy Act, Section 24.

(11) Orthopædic.

Ethel Hedley Hospital, Calgarth Park, Windermere.

Thanks to the generosity of Mr. O. W. E. Hedley, Briery Close, Windermere, this admirably equipped Hospital is available for Westmorland children as well as Cumberland and part of Lancashire. There are beds for 50 children.

There are a very valuable X-ray installation, a remedial exercises gymnasium, open air shelters, etc., etc. Surgical specialists from Manchester do the operative work, while a series of after-care clinics radiates from the main Hospital.

THE MENTAL TREATMENT ACT, 1930.

This Act came into force on the 1st January, 1931. It is supplementary to the Lunacy Act. It proceeds on the principle that mental illness is not necessarily insanity and it permits the expenditure of public monies in the treatment of patients who are not under certificate of insanity.

This Act invites Local Authorities to consider the whole picture of Mental Health "to see it steadily and see it whole."

In the past local authorities concerned themselves with the segregation in institutions of the certified insane with a view to the safety of the public and the protection of the insane person against himself.

"It has become obvious to the initiated however, that to a great extent, in progressing along these lines our efforts have been directed towards mitigating the effects of the mischief of mental disorder and that little, if anything, has been done to deal with the problem of mental disease itself, for by the time a mental patient is bad enough to be certified as insane and therefore to become eligible for treatment in a mental hospital, it only too frequently happens that his condition is hopeless."—Dr. Beaton, Medical Superintendent, City Mental Hospital, Portsmouth.

The Board of Control issued a circular letter explaining the Act and summarised the main provisions as follows:—

"(1) The preventive treatment of incipient mental illness by the provision of out-patient clinics and extended facilities for voluntary treatment.

(2) A further advance in assimilating the treatment of mental illness to that of other forms of illness:

(a) By provision under which certain cases may be temporarily placed under care and treament without 'certification.'

(b) By the opportunities afforded of associating the general hospital (voluntary and municipal) in the treatment of mental illness.

(3) Extended provision for after-care and systematised research into mental disease.

(4) Dissociation of the treatment of mental illness from the poor law.

(5) Various important alterations in terminology reflecting the more enlightened views now taken in regard to mental illness."

As regards (5) the words now outlawed from our terminology are " asylum," " pauper," and " lunatic."

In the County Tuberculosis Scheme we concern ourselves not only with the institutional treatment of " advanced " cases but with " contacts," pre-tubercular and early cases. By analogy this Act invites us to concern ourselves with the earliest departures from mental health as well as with the sufferers from advanced mental disease.

MATERNITY AND NURSING HOMES.

Under the Nursing Homes Registration Act, 1927, the Maternity and Nursing Homes have been inspected.

1.	Number of applications for registration ... Since the operation of this Act, 9 applications have been made,, of which, 7 were for Maternity and general nursing combined and 2 for Maternity only.	9
2.	Number of Homes registered	9
3.	Number of orders made refusing or cancelling registration	Nil
4.	Number of appeals against such orders ...	Nil
5.	Number of cases in which such orders have been	
	(a) confirmed on appeal	Nil
	(b) disallowed.	Nil
6.	Number of applications for exemption from registration	1
7.	Number of cases in which exemption has been	
	(a) granted	1
	(b) withdrawn	Nil
	(c) refused	Nil

One of the maternity and nursing homes has been closed as the applicant has left the district, while one such home has been transferred to larger premises.

MATERNITY HOSPITAL ACCOMMODATION.

As will be seen on page 30 there is a Maternity Department at the County Hospital, Kendal, which is a general hospital maintained on a voluntary basis.

Most of the mothers themselves meet the cost. When unable to do so in full your Authority in terms of the Maternity and Child Welfare Act pays the Hospital and recovers from the patient half the total cost.

Here, in 1930, 62 Mothers from Kendal and 35 from the County were confined. Since this Department was opened on the 5th March, 1924, up to 31st December, 1930, 582 mothers have been confined here.

There is at St. Monica's Maternity Home, Kendal, accommodation for unmarried mothers. In 1930 16 mothers were confined. This is a voluntary institution under the Carlisle Diocesan Moral Welfare Association.

MATERNAL MORTALITY.

In 1930, 2 deaths were registered as due to puerperal sepsis and 6 as due to other accidents and diseases of pregnancy and parturition; 4 of the 6 as due to embolism, one as due to hæmorrhage and one as due to general debility.

Your Committee is endeavouring to combat this serious mortality by increasing the number of qualified maternity nurses available throughout the County by means of annual payments which encourage the formation of additional District Nursing Associations by extending ante-natal supervision and by securing maternity hospital accommodation for abnormal emergency cases or for mothers from unsuitable or remote homes.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

As will be seen above the Carlisle Diocesan Moral Welfare Association maintain St. Monica's Maternity Home, Kendal, for Unmarried Mothers. This Home aims at the moral as well as the physical, welfare of unmarried mothers. They remain in the Home for several months after their confinement and nurse their infants. Thereafter the mothers are found employment and the infants suitable foster-mothers under the Infant Protection regulations.

CLINICS AND TREATMENT CENTRES.

Name.	Situation.	Accommodation.	Provided by.
School Clinic ..	Town Hall, Kendal ..	Waiting Room, Consulting Room, Dark Room.	Borough of Kendal.
School Dental Clinic ..	Abbot Hall, Kendal ..	Waiting Room, Operating Room, Recovery Room.	County of Westmorland and Borough of Kendal.
Orthopaedic Clinic ..	,, ,, ..	Waiting Room, Consulting Room, Plaster Room.	County of Westmorland and Borough of Kendal.
,, ..	Penrith ..	,,	By arrangement with Cumberland County Council.
,, ..	Ethel Hedley Hospital, Calgarth Park, Windermere.	,,	Ethel Hedley Hospital Governors.
Tuberculosis Dispensary.	Fellside, Kendal. ..	Waiting Room, Consulting Room, Weighing Room, 3 Dressing Rooms.	County of Westmorland.
,, ..	Meathop, Grange-over-Sands.	Consulting Room, Waiting Room, X-ray Room.	Governors of Westm'l'd Sanatorium, Meathop.
,, ..	Battlebarrow, Appleby.	Consulting Room, Waiting Room.	County of Westmorland.
Maternity & Child Welfare Centre.	Abbot Hall, Kendal ..	Waiting Room, Consulting Room, Weighing Room.	Borough of Kendal.
,, ..	Ambleside ..	Waiting Room, Consulting Room.	Voluntary—subsidised by County.
,, ..	Windermere ..	,,	,,
,, ..	Bowness ..	,,	,,
,, ..	Burnbanks, Mardale ..	,,	Corporation of Manchester (Water Works Settlement)

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Name.	Situation.	Accommodation.
School Clinic ..	Town Hall, Kendal ..	Waiting Room, Consulting Room, Dark Room.
School Dental Clinic ..	Abbot Hall, Kendal ..	Waiting Room, Operating Room, Recovery Room.
Orthopaedic Clinic ..	" " ..	Waiting Room, Consulting Room, Plaster Room.
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" ..	Battlebarrow, Appleby.	Consulting Room, Waiting Room.
Maternity & Child Welfare Centre.	Abbot Hall, Kendal ..	Waiting Room, Consulting Room, Weighing Room.
" ..	Ambleside ..	Waiting Room, Consulting Room.
" ..	Windermere ..	" "
" ..	Bowness ..	" "
" ..	Burnbanks, Mardale ..	Corporation of Manchester (Water Works Settlement).

The Public Assistance Committee concerns itself with homeless children who are admitted to the Abbey Home for children at Staveley, Westmorland, with its 76 beds. Here children from 3 to 16 years of age of both sexes are admitted. There is one observation ward and a detached block for the sick, with two wards, one of three beds for boys and one of three beds for girls.

AMBULANCE FACILITIES.

(a) For Infectious Cases.

The Kendal Corporation own two motor ambulances. The transport area covered includes the Borough of Kendal, the Urban Districts of Ambleside, Grasmere, Kirkby Lonsdale, Carnforth and Grange-over-Sands, and the Rural District of South Westmorland.

The Urban District Council of Windermere use a horse ambulance for the transport of infectious cases in their area to their Isolation Hospital.

The rest of the County is covered by a motor ambulance stationed at the Ormside Joint Infectious Hospital, near Appleby, which is the property of the Ormside Joint Hospital Board and is available for the transport of infectious cases from the Borough of Appleby, the Urban District of Shap, and the Rural Districts of East Westmorland and the West Ward.

(b) For Non-Infectious and Accident Cases.

Thanks to co-operation between the Corporation of Kendal and the very efficient Kendal Divisions of the St. John Ambulance Brigade, excellent provision for the transport of such cases is in operation, whereby a rota of ambulance men and sisters is provided for ambulance transport duty by night as well as by day. The area covered is that of Kendal and South Westmorland, south of Windermere. The Kendal Corporation employs a whole-time driver.

In the Windermere and Ambleside districts the Windermere and Ambleside Divisions of the St. John Ambulance each maintain a motor ambulance and provide the personnel.

The rest of the County is covered by the motor ambulance of the Penrith District Joint Ambulance Committee.

Considering the very great traffic passing through Westmorland, especially through Kendal and the Lake District, the voluntary service of these Divisions of the St. John Ambulance is beyond all praise. There is an ever present call on their expert help so ungrudgingly afforded.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLIES.

The following extracts from the Annual Reports for 1930, of the Medical Officer of Health for the Westmorland Combined Districts refer to works carried out in connection with the water supplies in certain of the Districts :—

Ambleside.

New mains have been laid in Kelsick Road, St. Mary's Lane and Slack. The whole of the trunk mains have been cleaned. The supply has been perfectly satisfactory both as regards quality and quantity.

Grasmere.

Improvements in filtration carried out at the Reservoir have made a marked improvement in the supply generally. The supply is excellent in quality and abundant in quantity.

Kendal.

The quality of the water has been good and there has been no recurrence of the smell and bitter taste reported during the previous two years. The cleaning out of the weeds undertaken last year has been effectual; it would be wise to do a certain amount of this each year when a suitable opportunity occurs.

The quantity of water has caused some anxiety and recourse to the Mints Feet supply has had to be taken during part of the year. The capacity of the Fisher Tarn Reservoir is ample, but there is a considerable escape of water through leaks in the dam. Investigation is now being made to find a suitable method of arresting the waste and when this is done, there should be no shortage of water whatever. A monthly bacteriological examination of the water is always carried out.

Shap.

There is an insufficiency of water to the northern part of the area due to old pipes being much too small for the number of houses served : this is mainly supplied from the Kirkbank supply, but in an extension scheme now prepared and about to be taken in hand, the 2-inch main from the Force Beck Ghyll scheme will be extended through the main road to the north end to supplement the supply.

East Westmorland.

Kelleth area in Orton parish.

The residents in this area petitioned the Ministry of Health for an improved supply and an engineer has been appointed to prepare a scheme.

Artlegarth Beck Scheme.

An Engineer is engaged on the preparation of a scheme which will, if carried out, make the water from this source available to the following parishes:—Asby, Colby, Crosby Garrett, Hoff, Kaber, Kirkby Stephen, Musgrave, Nateby and Wharton, Orton, Ravenstonedale, Soulby, Waitby and Winton.

South Westmorland.

A considerable improvement has been made to the Hutton Roof water supply by piping further up the land; both quality and quantity are better.

A larger main from the Lupton Reservoir to Milnthorpe is required and the Council have the project before them.

West Ward.

The large scheme supplied from Bleawater has had no extension of mains, but a very considerable number of branches and service pipes have been laid down. Some 516 houses and 15 schools are now connected to this supply.

The Barton and district supply has been considerably improved since an additional spring was included last year, but the yield in droughty periods makes it desirable to supplement the supply further, and two other springs have since been found. It is proposed to incorporate these in the supply at an early date.

RIVERS AND STREAMS, DRAINAGE AND SEWERAGE.

Ambleside.

The water in rivers and streams is very little polluted; any cases observed are immediately attended to. The sewage disposal works continue to satisfy the Rivers Pollution Committee's Inspector and the effluent is good. The Council have applied to the Ministry of Health for a grant towards the reconditioning of the filter beds.

Grasmere.

A small modern Disposal Plant has been constructed for a business establishment in the congested portion of the area: this is a great improvement, as it has entirely removed a nuisance of many years standing and considerable pollution to a stream.

Shap.

The provision of a comprehensive sewerage scheme has been before the Council for some time and during this year a survey has been made and a consulting engineer's opinion obtained as to the best practicable scheme and cost of same. His report was considered by the Council in November, and of three alternative schemes, one which provides for gravitation system throughout, and includes complete disposal works, is estimated to cost £7,000—£8,000. Applications have been made to the County Council for a grant in aid of the scheme as well as to the Unemployment Grants Committee.

East Westmorland.

330 yards of 9in. sewer have been put in for the top portion of Sandford Village.

The open effluent channel from the tanks in Winton House field has been superseded by 240 yards of 9in. effluent sewer at a sufficient depth to allow for the construction of a percolating filter when found necessary. New tanks, filter, sludge pits and effluent sewer have been put in at the Orton Road outfall at Tebay.

West Ward.

Numerous new drains have been constructed in various parts, where, through the new water supply being available and thus making it practicable, sanitary conveniences have been installed in houses.

HOUSING.

The Housing Act, 1930, confers on County Councils important responsibilities as regards the housing of the Rural working classes. The subject of the housing needs in the various districts is dealt with by the Medical Officer of Health for the Combined Districts. The following excerpts from his Annual Reports for 1930 deal with certain areas in the County:—

Ambleside.

There is a shortage of houses available at reasonable rents. The Council is contemplating the erection of 20 houses. A scheme is being prepared at the present time for this. There is a small amount of overcrowding, this being confined to the cottage type of house. An inspection of the district has been made to ascertain the housing needs and it was found that twelve houses were overcrowded or unsuitable.

Appleby.

Twenty-four houses have been erected by the Council and are let at eight and ten shillings per week exclusive of rates. This rent is fairly high considering the rate of wages in the district. Overcrowding is not of a serious character.

Grasmere.

During the past few years and also at the present time the supply of working-class houses is satisfactory, the demand as it arises being met by several philanthropic landowners; during the year three houses have been built and there are other three in course of construction.

Kendal.

The houses available for persons of the working classes are mainly situated in yards off the main streets and on the Fellside and Far Cross Bank, and the number in these areas is approximately 1,200. The houses are all old and it is estimated that more than 50 per cent. of them are in a dilapidated condition.

The accommodation consists generally of kitchen, scullery and two or three bedrooms. Very often the third bedroom is an attic room which is not fit for a sleeping room.

Many of these houses being situated in narrow yards running east and west, face due north and consequently never receive any direct sunlight. Some are back to back and others have no through ventilation.

All of this type of houses are built of rubble, and damp courses are absent. The mortar in most cases is decayed, flags are laid direct upon the earth, so that dampness in both walls and floors is very common. Owing to the configuration of the ground the floors of many houses are below the level of the surrounding earth to depths varying from 6 inches to 8 feet.

Ventilated food stores are the exception, and in many of the houses there is no scullery, and a sink is provided in the living-room.

Plaster on walls and ceilings is generally in a bad condition and floors are defective.

Arrangements for cooking food and heating water are generally bad, and it is the exception rather than the rule to find a kitchen range in good order. Most of the houses have one door only, opening out into the yard which is common to all houses in the same yard.

The yards are mostly cobble paved.

No house of this type has been built for many years.

The rents vary from 2s. to 10s. per week, according to whether the house is decontrolled or not.

The next type of house is one with living room and scullery and two or three bedrooms, with separate backyard and sanitary accommodation. These houses are situated in Union Buildings, Procter Gardens, Garth Place, etc., and number approximately 300. The houses of this type are in a fair state of repair.

The next type consist of a parlour, kitchen, scullery, and two, three or four bedrooms, and are comparatively modern, such as in Nether Street, Lound Street, part of Wattsfield Estate, etc. These houses to a large extent are occupied by the owners and are generally kept in good repair and approximately number 300.

The most modern type of working class houses are those erected by the Corporation (396), the Kendal and District Housing Society (76), and Mr. E. W. Wakefield at Sandylands (32).

During the five years, ending December, 1930, 581 houses of all types have been erected and during the same period only 33 have been demolished or converted to other uses.

Sufficiency of Supply of Houses.

The number of applicants upon the Corporation register at the end of the year was 550.

There are no unoccupied houses suitable for persons of the working classes.

The Housing Committee have purchased land behind Kirkland and are preparing a scheme for the erection of more houses.

There have been no important changes in the population during the past 5 years, except perhaps that the extension of motor transport has brought more transport workers to reside in the Borough.

There is still ample land available in the Borough for suitable sites for new houses

Overcrowding.

No exact figure can be given, but undoubtedly overcrowding does exist to a very large extent. The basis upon which overcrowding has been estimated is the allowance of 300 cubic feet of air space per person.

Only 20 cases were officially dealt with during the year and these were the worst of the many cases occurring.

In making infectious disease enquiries and housing inspections cases of overcrowding are met with daily and no official action can be taken owing to the lack of other accommodation.

The cause of overcrowding, except in a very few cases, is not inability to pay rent.

A three bedroomed tenement was let at 12s. 6d. per week to a family consisting of father, mother and 3 children, aged 6, 4, and 2, and two bedrooms were sub-let at 9s. 6d. per week and used for both living and sleeping for a family consisting of father, mother and 7 daughters, aged from 4 to 18 years of age. Whilst this state of affairs lasted the wife of the original tenant gave birth to a child. Statutory notice was served and the occupier left the house and the lodgers remained as tenants.

Fitness of Houses.

The great difficulty with the oldest type of house is that the repairs required to make them fit in all respects would cost more than the value of the house warrants, so that any repairs asked for have been of a minor character to keep the houses reasonably dry and waterproof. Another difficulty is that vacant possession of houses of this type is necessary in order to carry out the repairs properly.

No special steps have been taken nor has any definite programme been formulated as to the best method of dealing with insanitary property.

Unhealthy Areas.

Preliminary surveys and reports upon two areas, one in Highgate and one in Chapel Lane, were made during the year. In both these areas the houses number approximately 50 to the acre and are generally in a dilapidated condition.

The method of dealing with these areas is still under consideration. It is quite evident that at least 5 per cent. of the residents in these areas are not fitted either by inclination or training to occupy new houses of a type now being erected. It might be possible to remove some of them into the other houses belonging to the Corporation and also to erect a certain number of houses of the tenement type where they would be more or less under supervision.

Kirkby Lonsdale.

General Observations.

The housing conditions of the district are comparatively good, the prevalent type being the older properties of 40 to 50 years and longer, substantially built with the local stone of the district; these number 302 and are generally sound in construction. The prevailing forms of defect are to be found in the roofing, deterioration of slating, guttering and spouting. Large numbers have stone flagged floors conducive to cold, and but few are cellared. Only 21 houses are dated from 1900 to 1915, while no houses were built during the war, and from 1921 to 1930, 25 houses have been built. There are no prevailing bad conditions resulting from over-crowding.

Sufficiency of Supply of Houses.

The construction of houses has not kept pace with the demand. only seven houses having been erected post-war by private enterprise, and the Council have recently, in order to meet to some extent the shortage, erected 18 houses (8 parlour and 10 non-parlour type). There are still applicants for the working class type of house but no houses of any type are available, and it is probable the Council will consider an extension of their housing scheme should the shortage warrant such extension.

Shap.

The general condition of the houses in the Urban District may be regarded as fair. The prevailing type is the two storey, four roomed cottage built of local stone, and the majority are fairly old but sound. Some 12 to 15 houses at the Shap Granite Works are stone built of poor type, having two small bedrooms situated mainly in the roof and ventilated and lighted by a skylight in each. These were included among the number which it was considered should be replaced as soon as new houses could be built. Ten houses are in course of erection and should be ready for occupation by Easter. For these ten houses the Council have had 28 applicants and this is about the figure representing the extent of the shortage. There is no appreciable increase in the permanent population, but a temporary increase exists by reason of men in lodgings who are working on the new road in connection with the Haweswater Waterworks undertaking.

East Westmorland.

General Observations.

Until the construction of the Railways—the North Eastern in 1861 and the Midland in 1875—houses were only needed for the agricultural and allied population, and a large percentage of these houses date back to the early part of the 19th century. These houses were very substantially built with the local stone and covered with North Country slates. The chief defects found have been lack of light and ventilation, drainage, water supply and ground dampness. Improvements have been obtained through the application of the various Public Health and Housing Acts and in a number of cases at a cost for which the owners cannot expect to receive any reasonable return.

After the construction of the Railways, with the exception of Kirkby Stephen and Tebay, the Railway Companies made provision for their workpeople. At Tebay the Companies erected upwards of 70 houses but these were not sufficient to meet the demand, and private and public enterprise have erected the remainder.

At Kirkby Stephen the Midland Company erected 14 houses but the North Eastern did not make any provision, this being left to private enterprise, which apparently met the demand until 1914. Since 1919 the Local Authority has erected 30 houses to meet the demand caused by cessation of building during the War years and also the opening out of a limestone Quarry since that period. The Railway Companies have provided approximately 140 houses.

In the present century 148 houses have been erected,. 106 of these since 1919. From these records it is evident that the rate of building slowed down during the first 20 years of the century, there being only an average of two per year erected.

Since 1919 the houses have chiefly been built with brick, rough casted, and North Country slate roofs.

Overcrowding has not been serious owing to a number of the houses having sufficient accommodation for more than one family.

Sufficiency of Supply of Houses.

Kirkby Stephen and Kirkby Thore are the only places that are really suffering from any shortage of available houses at reasonable rents and the erection of 12 houses at each place would ease the situation. The question of the erection of further houses is under consideration at Kirkby Stephen.

The Quarries at Hartley have increased the working-class popu-, lation at Kirkby Stephen. Any re-organisation of the Railways might reduce the population at Kirkby Stephen and Tebay.

There are no special difficulties in providing suitable sites for houses other than levels and availability of sewers and water supplies.

Overcrowding.

Practically nil. Only eleven cases dealt with in the past 10 years.

The cause has been temporary, chiefly owing to not being able to obtain a suitable house at the time.

South Westmorland.

The Housing conditions in this district are fairly good and there is practically no overcrowding except in single cases from time to time. Workmen's cottages form a large proportion of the total number of houses and though in many cases these are very old, the quality of the material used, and the work done in the erection of them has stood the test of time, and houses which have been erected more than 50 years ago are still, in all respects,. fit for human habitation. Owing to the stormy weather and the exposed position of many of the houses, damp is frequently caused by displacement of slates and other parts of the roof. Very few brick

houses were erected in this district prior to 1914, all the houses being then built of local stone, roofed with local slate, and timbered with well seasoned wood of long-lasting qualities. Statistics obtained during December of 1930 show that there is no great requirement for additional new working-class houses for workmen living in the district. Two families are, in certain cases, occupying one house but without causing overcrowding.

There are very few married farm labourers in the district, the work on the farms being done by young men boarded at the farm houses, and therefore the housing of the married farm labourer does not arise.

Sufficiency of Supply of Houses.

There is very little shortage in the district, and no measures have been taken, or are contemplated, by the Council to deal with it.

There has been no great change in the population lately, nor is any anticipated in the future.

The Council own 28 houses in the Parish of Natland, and no difficulty is anticipated in obtaining land for building if other houses for the working-class are considered necessary.

West Ward.

General Observations.

The general conditions in relation to housing in this area remain much the same as they have been over the past five years. With the exception of the Manchester Waterworks undertaking, the other sources of employment in the district are very largely agriculture, and some lead-mining at Glenridding. These two continue to give about the same amount of labour as hitherto—or rather less, owing to trade depression.

The Manchester Corporation are giving employment to some 200 men and have erected for them at Haweswater cast-iron huts (concrete faced) of substantial construction. The new village is also well equipped with water supply, sewage disposal plant and electric light, while the social and other needs are provided for by a public hall, canteen, shops, mission room and dispensary, etc.

Three old houses also have been renovated to lodge men, and a number are in lodgings at various places in the vicinity.

The houses generally throughout the district may be considered to be in a fair condition, but of course many are old and lacking in the conveniences now regarded as essential.

Dampness is the most prevailing defect.

Sufficiency of Supply of Houses.

The sufficiency of supply of houses has been under consideration and the Council sought the opinions of the various Parish Councils and Parish meetings. The results of these inquiries were that 14 parishes replied that they did not require additional houses, and 5 parishes asked for numbers varying from three to six and totalling 21. These parishes do not include Patterdale, which has been specially considered. A Report following a survey of this parish in September, 1929, indicated that in 14 or 15 cases there was definite need for additional houses, either by reason of overcrowding or two families in one house, and that 20 houses should be built. In view of no action being taken to remedy this state of affairs, after an interval of 12 months, a special report was made to the Ministry of Health, and a copy sent to the County Council, which latter intervened and some progress began to be made. Opposition was experienced both inside the Council from its members, and outside from landowners, who were unwilling to sell any land for this purpose.

Overcrowding.

The extent of overcrowding elsewhere in the district is small, and mainly consists of cases where a labourer with large family is occupying a small cottage. In these cases the economic difficulty of taking a larger house is the main cause of the situation.

ANNUAL REPORT OF THE COUNTY ANALYST.

1. During the 12 months ended the 31st December, 1930, I have analysed 79 samples of Food and Drugs submitted by the Inspectors appointed under the Food and Drugs (Adulteration) Act, 1928, for the County of Westmorland, viz. :—

From the Appleby Division ...	...	35
From the Kendal Division ...	...	44
Total ...		79

2. The following table briefly summarises the result of the analysis of these samples and indicates what action has been taken in connection with those samples which were found not to be of genuine quality :—

No. of samples of Milk submitted	...	54
No. of other samples submitted	...	25
Total ...		79

No. of samples adulterated or below standard	...	9
No. of samples of doubtful quality ...	...	0
No. of samples appeal to cow samples	...	4
No. of samples on delivery "Reference Samples"		0
No. of persons cautioned ...	...	0
No. of persons summoned ...	...	1
No. of persons convicted ...	...	0
No. of persons discharged ...	...	1
No. of persons to pay costs ...	...	0
No. of cases in which no action taken ...	...	8
No. of cases pending at end of year ...	...	0
Amount of Fines ...	...	None
Amount of Costs ...	...	None

3. The percentage of adulteration for the year is 12.00; for the 12 months ended the 31st December, 1929, it was 5.33. In each case all samples which have been reported as otherwise than genuine are included, but appeal samples and reference samples are not included.

4. In one case only has proceedings been instituted, but the summons was dismissed.

5. Of the 54 samples of Milk submitted during the 12 months 8 were returned as being adulterated or below standard, while 4 samples were taken on appeal to cow.

Excluding the 4 latter samples the percentage of adulteration for Milk amounted to 16.00 per cent.; for the previous 12 months the figure was 8.16.

The average composition of the 42 genuine samples was as follows:

Non-fatty Solids	...	...	8.81%
Fat	...	...	3.61%

For the previous 12 months the average figures were:—

Non-fatty Solids	...	...	8.85%
Fat	...	...	3.76%

In connection with the appeal samples, two of these related to one sample which was found to be deficient in Non-fatty Solids; the first of these appeal samples disclosed on analysis an even lower figure for Non-fatty Solids than the sample with which it was connected, but a further appeal sample taken from the same source proved to be genuine.

Of the other two appeal samples, one was deficient in Non-fatty solids and one deficient in Fat; as a consequence no action was taken with regard to the samples with which they were connected.

In two cases where samples were substantially deficient in Non-fatty Solids permission to take appeal samples was refused by the producers.

6. *Other Samples.* Articles falling under this heading were 25 in number, and apart from one case which had been dealt with in the Report for the Quarter ended 31st December, 1930, it is satisfactory to record that these complied with the requirements of the Food and Drugs (Adulteration) Act, 1928.

(signed) Cyril J. H. Stock.
9th January, 1931. County Analyst.

In the Borough of Kendal the Inspector under these Acts is the Borough Sanitary Inspector, and the Borough Analyst is Mr. W. H. Roberts, M.Sc., F.I.C., Liverpool.

The Medical Officer of Health in his Annual Report for 1930 states:—

The following articles were taken and submitted for analysis:—

Article.	No. of samples.	Result.	Remarks.
Milk	32	Genuine.	
Milk	1	2.7% Milk Fat. 8.81% Non Fatty Solids.	Vendor warned.
Milk	1	2.9% Milk Fat. 8.86% Non Fatty Solids.	Vendor warned.
Sausages	9	Genuine.	
Potted Meat ..	2	,,	
Lard	6	,,	
Margarine	8	,,	
Margarine	1	,,	No declaration on wrapper as to whether article was margarine. No labelling on box from which sample was sold. Vendor warned.
Butter	5	,,	
Tripe	1	,,	
Fish paste ..	1	,,	
Cream	2	,,	
Beef dripping ..	2	,,	
Ground Cinnamon	1	,,	
Egg Substitute ..	1	,,	
Boiled Sweets ..	2	,,	
Tinned Milk ..	1	,,	
Coffee	1	,,	
Jam	1	,,	
	78		

The average percentage fat and non-fatty solids in all milks (genuine and non-genuine) was 3.82% and 9.21%.

The highest fat content was 5% and the highest non-fatty content was 9.65%.

PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912.

	No. of samples examined for presence of preservatives.	No. of samples in which a preservative was found to be present.
Milk ...	34	... Nil
Cream ...	2	... Nil

PREVALENCE OF INFECTIOUS AND OTHER DISEASES.

In the following Table a statement of the number of diseases notified in the various districts in 1930, will be found :—

NOTIFIABLE DISEASES.

Disease.	Ambleside.	Appleby.	Grasmere.	Kendal.	Kirkby Lonsdale.	Shap.	W'mere.	E. West'd.	S. West'd.	W. Ward.	Total 1930.	Average Notified 1921-25.
Diphtheria	1	1	—	4	—	—	15	1	8	1	31	22
Puerperal Pyrexia	1	2	—	3	—	—	—	4	—	1	11	—
Scarlet Fever	—	2	1	17	1	—	2	10	27	4	64	154
Pneumonia	—	5	—	6	1	1	5	37	19	9	83	109
Erysipelas	—	1	—	9	1	—	2	11	13	3	40	12
Enteric Fever	—	—	—	2	—	—	—	—	—	—	2	4
Puerperal Fever	—	—	—	2	—	—	—	—	1	—	3	2
Paratyphoid	—	—	—	1	—	—	—	—	—	—	1	—
Encephalitis Lethargica	—	—	—	1	—	—	—	1	—	—	2	4
Acute Poliomyelitis	—	—	—	—	—	—	—	—	1	—	1	5
Pulmonary Tuberculosis	1	—	--	20	3	1	4	8	12	6	55	81
Other forms of Tuberculosis	4	—	1	9	—	—	—	2	5	—	21	17
Ophthalmia Neonatorum	—	—	—	1	—	1	—	1	—	—	3	1
Malaria	—	—	—	—	—	—	—	—	—	—	—	1

Notifiable Diseases, 1930.

DISEASES.	Total	Under 1 year	1	2	3	4	5	10	15	20	35	45	65 and over	Admitted to Hospital.	Deaths	Under 1 year	1	2	3	4	5	10	15	20	35	45	65 and over
Scarlet Fever	64	—	1	2	3	2	24	13	6	9	3	1	—	57	1	—	—	—	—	—	1	—	—	—	—	—	—
Diphtheria	31	—	—	—	2	—	14	8	3	3	1	—	—	27	2	—	—	—	1	—	1	—	—	—	—	—	—
Enteric Fever	3	—	—	—	—	—	—	—	1	1	1	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever ...	3	—	—	—	—	—	—	—	—	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ...	11	—	—	—	—	—	—	—	—	9	2	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—
Pneumonia	83	1	4	—	2	4	12	6	5	14	7	13	15	1	19	—	1	—	—	1	1	—	—	3	2	5	6
Erysipelas	40	3	—	—	—	—	—	1	3	7	5	13	8	—	1	1	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	2	—	—	—	—	—	—	—	—	1	—	—	1	—	2	—	—	—	—	—	—	—	—	1	—	—	1
Acute Poliomyelitis ...	1	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Notifiable Disease

DISEASES.	Total	Under 1 year	1	2	3	4	5	10	15	20
Scarlet Fever	64	—	1	2	3	2	24	13	6	9
Diphtheria	31	—	—	—	2	—	14	8	3	3
Enteric Fever ...	3	—	—	—	—	—	—	—	1	1
Puerperal Fever ...	3	—	—	—	—	—	—	—	—	2
Puerperal Pyrexia ...	11	—	—	—	—	—	—	—	—	9
Pneumonia	83	1	4	—	2	4	12	6	5	14
Erysipelas	40	3	—	—	—	—	—	1	3	7
Encephalitis Lethargica	2	—	—	—	—	—	—	—	—	1
Acute Poliomyelitis ...	1	—	—	—	—	1	—	—	—	—
Ophthalmia Neonatorum	3	3	—	—	—	—	—	—	—	—

OPHTHALMIA NEONATORUM.

Districts.	Cases.			Vision un-impaired.	Vision impaired.	Total Blindness.	Deaths.
	Notified	Treated.					
		At Home.	In Hospital.				
Urban.							
Ambleside							
Appleby							
Grasmere							
Kendal	1	1		1			
Kirkby Lonsdale ..							
Shap	1	1		1			
Windermere							
Rural.							
East Westmorland ..	1	1		1			
South Westmorland ..							
West Ward							
Westmorland ..	3	3		3			

CONTROL OF TUBERCULOSIS.

In the following Table are the figures for the notification of, and deaths from, Tuberculosis in 1930:—

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—	—	—	—	—	—	—	—	—
1—	—	—	1	—	—	—	—	—
5—	1	1	2	—	1	—	—	—
10—	—	—	2	1	—	—	—	—
15—	10	3	1	4	2	1	—	2
20—	7	8	3	1	4	3	2	—
25—	4	5	—	—	2	3	—	—
35—	4	3	1	—	3	4	—	2
45—	3	1	2	1	2	1	—	2
55—	4	—	—	1	2	2	—	1
65—	—	1	1	—	—	1	—	1
Totals	33	22	13	8	16	15	2	8

DEATH RATE FROM TUBERCULOSIS.

In December, 1930, the Ministry of Health issued Memordum 131/CT giving an analysis of work done in the year 1929 under the scheme of Local Authorities for the treatment of Tuberculosis.

The study of this most comprehensive analysis provides us with an interesting account of where we stand as compared with counties similar to Westmorland.

This analysis reveals the fact that in 1929 Westmorland had the lowest death rate both from Pulmonary Tuberculosis and from all forms of Tuberculosis.

Death rate from Pulmonary Tuberculosis per million population :—

	Pulmonary.	All forms.
All Counties ...	650 ...	804
Westmorland ...	364 ...	475

I am indebted to Dr. Munro Campbell, the County Tuberculosis Officer, for the following report for 1930 :—

"Under the Westmorland County Council Tuberculosis Scheme the County Medical Officer of Health, Dr. W. E. Henderson, is the chief administrative officer, whilst the Medical Superintendent of the Westmorland Sanatorium is the Clinical Tuberculosis Officer.

During the year a weekly session has been held at the Kendal Dispensary, and a session every two months has been held at Appleby. Owing, however, to the scattered population of the County, domiciliary consultations and visits form a rather large proportion of the work.

At the Kendal Dispensary, Miss Johnson, the District Nurse for Levens, carries out the duties as Tuberculosis Nurse, and Miss Curwen, the District Nurse at Appleby, attends the Dispensary there.

In various other districts the District Nurses carry out the visitation of notified cases of tuberculosis, and send in quarterly returns on the number of visits made and the condition of the patients. At the Sanatorium the X-Ray plant is utilised for dispensary and county cases, and specimens of sputa for report are examined at the laboratory there.

The following Ministry of Health table gives details of new cases seen during the year, dispensary attendances, domiciliary visits, etc.

With one exception all the Westmorland County Council cases have been treated at the Westmorland Sanatorium. The exception was a patient who had been in Westmorland Sanatorium for a long period, and was transferred to Blencathra Sanatorium, Threlkeld.

Diagnosis.	Pulmonary.				Non-pulmonary.				Total.			
	Adults.		Children.		Adults.		Children.		Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A.—New Cases examined during the year (excluding contacts) :												
(*a*) Definitely tuberculous ..	24	14	—	—	3	5	4	1	27	19	4	1
(*b*) Doubtfully tuberculous ..	—	—	—	—	—	—	—	—	3	—	3	1
(*c*) Non-tuberculous	—	—	—	—	—	—	—	—	11	6	4	7
B.—Contacts examined during the year :—												
(*a*) Definitely tuberculous ..	1	3	—	—	—	—	—	—	1	3	—	—
(*b*) Doubtfully tuberculous ..	—	—	—	—	—	—	—	—	—	—	1	1
(*c*) Non-tuberculous	—	—	—	—	—	—	—	—	—	2	2	—
C.—Cases written off the Dispensary Register as												
(*a*) Cured ..	2	1	—	—	1	1	2	—	3	2	2	—
(*b*) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	—	—	—	—	—	—	—	—	14	8	8	8
D.—Number of Persons on Dispensary Register on Dec. 31st :— ..												
(*a*) Diagnosis completed ..	68	55	3	10	4	5	7	5	72	60	10	15
(*b*) Diagnosis not completed ..	—	—	—	—	—	—	—	—	—	—	2	—

1. Number of persons on Dispensary Register on January 1st	142
2. Number of patients transferred from other areas and of "lost sight of" cases returned	4
3. Number of patients transferred to other areas and cases "lost sight of"	12
4. Died during the year	26
5. Number of observation cases under A (*b*) and B (*b*) above in which period of observation exceeded 2 months ..	5
6. Number of attendances at the Dispensary (including Contacts)	203
7. Number of attendances of non-pulmonary cases at Orthopædic Out-stations for treatment or supervision ..	—
8. Number of attendances at General Hospitals or other Institutions approved for the purpose, of patients for—	
(*a*) "Light" treatment	69
(*b*) Other special forms of treatment	—
9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	—
10. Number of consultations with medical practitioners :—	
(*a*) At Homes of Applicants	57
(*b*) Otherwise	36
11. Number of other visits by Tuberculosis Officers to Homes	98
12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	1260
13. Number of	
(*a*) Specimens of sputum, &c., examined	93
(*b*) X-Ray examinations made in connection with Dispensary work	20
14. Number of Insured Persons on Dispensary Register on the 31st December	99
15. Number of Insured Persons under Domiciliary Treatment on the 31st December	10
16. Number of reports received during the year in respect of Insured Persons :—	
(*a*) Form G.P. 17	45
(*b*) Form G.P. 36	—

Taken as a whole the average number of beds occupied during the year is again less than the preceding year. For 1930 the number was 26, as compared to 29 for 1929. At the end of the year 23 Westmorland patients were at Meathop, and 1 was at Threlkeld, as further detailed in the tables below :—

	Observ-ation.	Pulmonary Tuberculosis.		Non-pulmonary Tuberculosis.		Total.
		Sanator-ium. beds.	*Hospital* beds.	Diseases of Bones and Joints.	Other conditions.	
Adult Males ..	.75	8	5	—	—	13.75
Adult Females ..	.5	4.5	4	.5	.5	10
Children under 15	.25	1	—	.5	.5	2.25
Total	1.5	13.5	9	1	1	26

			In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year	Died in the Institution	In Insti-tutions on Dec. 31.
Number of Patients.	Adults	M.	11	27	21	4	13
		F.	5	20	9	6	10
	Ch'd'n	M.	—	3	2	—	1
		F.	1	1	2	—	—
Number of Observation Cases.	Adults	M.	—	4	4	—	—
		F.	—	—	—	—	—
	Ch'd'n	M.	—	3	3	—	—
		F.	—	1	1	—	—
Total			17	59	42	10	24

The results of treatment of the Westmorland patients are shown in the following Table, which expresses the condition on discharge.

Classification on admission to the Institution.		Condition at time of discharge.	Duration of Residential Treatment in the Institution.												
			Under 3 months.			3–6 months.			6–12 months.			More than 12 months			Total.
			M.	F.	Ch	M.	F.	Ch	M.	F.	Ch	M	F.	Ch	
Pulmonary Tuberculosis	Class T.B. minus. 9 cases.	Quiescent	–	–	–	2	1	1	1	–	1	–	–	–	6
		Improved	1	–	–	1	1	–	–	–	–	–	–	–	3
		No material improvement	–	–	–	–	–	–	–	–	–	–	–	–	–
		Died in Institution ..	–	–	–	–	–	–	–	–	–	–	–	–	–
	Class T.B. plus Group 1. 5 cases.	Quiescent	1	1	–	2	1	–	–	–	–	–	–	–	5
		Improved	–	–	–	–	–	–	–	–	–	–	–	–	–
		No material improvement	–	–	–	–	–	–	–	–	–	–	–	–	–
		Died in Institution ..	–	–	–	–	–	–	–	–	–	–	–	–	–
	Class T.B. plus Group 2 13 cases.	Quiescent	–	–	–	–	1	–	1	–	–	–	–	–	2
		Improved	–	–	–	1	2	–	2	1	–	1	–	–	7
		No material improvement	1	–	–	–	–	–	1	–	–	–	–	–	2
		Died in Institution ..	–	–	–	–	–	–	1	1	–	–	–	–	2
	Class T.B. plus Group 3 13 cases.	Quiescent	–	–	–	–	–	–	–	–	–	–	–	–	–
		Improved	–	–	–	2	–	–	1	–	–	1	–	–	4
		No material improvement	–	–	–	1	–	–	1	–	–	–	–	–	2
		Died in Institution ..	3	1	–	–	2	–	–	1	–	–	–	–	7
Non-Pulmonary Tuberculosis	4 cases.	Quiescent or Arrested ..	–	–	–	–	–	1	–	–	1	–	1	–	3
		Improved	–	–	–	–	–	–	–	–	–	–	–	–	–
		No material improvement	–	–	–	–	–	–	–	–	–	–	–	–	–
		Died in Institution ..	–	1	–	–	–	–	–	–	–	–	–	–	1
Total		.. ..	Under 1 week.			1–2 weeks.			2–4 weeks.			More than 4 weeks.			44
Observation for purposes of diagnosis. 8 cases.		Tuberculous	–	–	–	1	–	–	–	–	1	2	–	1	5
		Non-Tuberculous ..	–	–	–	–	–	–	–	–	–	1	–	1	2
		Doubtful	–	–	–	–	–	–	–	–	–	1	–	–	1
		Totals	–	–	–	1	–	–	–	–	1	4	–	2	8

The results of treatment of the Westmorland patients are shown in the following Table, which expresses the condition on discharge.

Classification on admission to the Institution.		Condition at time of discharge.	Duration of Residential Treatment in the Institution.											
			Under 3 months.			3–6 months.			6–12 months.			More than 12 months		
			M.	F.	Ch	M.	F.	Ch	M.	F.	Ch	M	F.	C
Pulmonary Tuberculosis	Class T.B. minus. 9 cases.	Quiescent	–	–	–	2	1	1	1	–	1	–	–	–
		Improved	1	–	–	1	1	–	–	–	–	–	–	–
		No material improvement	–	–	–	–	–	–	–	–	–	–	–	–
		Died in Institution ..	–	–	–	–	–	–	–	–	–	–	–	–
	Class T.B. plus Group 1. 5 cases.	Quiescent	1	1	–	2	1	–	–	–	–	–	–	–
		Improved	–	–	–	–	–	–	–	–	–	–	–	–
		No material improvement	–	–	–	–	–	–	–	–	–	–	–	–
		Died in Institution ..	–	–	–	–	–	–	–	–	–	–	–	–
	Class T.B. plus Group 2 13 cases.	Quiescent	–	–	–	–	1	–	1	–	–	–	–	–
		Improved	–	–	–	1	2	–	2	1	–	1	–	–
		No material improvement	1	–	–	–	–	–	1	–	–	–	–	–
		Died in Institution ..	–	–	–	–	–	–	1	1	–	–	–	–
	Class T.B. plus Group 3 13 cases.	Quiescent	–	–	–	–	–	–	–	–	–	–	–	–
		Improved	–	–	–	2	–	–	1	–	–	1	–	–
		No material improvement	–	–	–	1	–	–	1	–	–	–	–	–
		Died in Institution ..	3	1	–	2	–	–	1	–	–	–	–	–
Non-Pulmonary Tuberculosis	4 cases.	Quiescent or Arrested ..	–	–	–	–	–	1	–	–	1	–	1	
		Improved	–	–	–	–	–	–	–	–	–	–	–	
		No material improvement	–	–	–	–	–	–	–	–	–	–	–	
		Died in Institution ..	–	1	–	–	–	–	–	–	–	–	–	
Total		.. .. ..	Under 1 week.			1–2 weeks.			2–4 weeks.			More than 4 weeks		
Observation for purposes of diagnosis. 8 cases.		Tuberculous ..	–	–	–	1	–	–	–	–	1	2	–	
		Non-Tuberculous ..	–	–	–	–	–	–	–	–	–	1	–	
		Doubtful	–	–	–	–	–	–	–	–	–	1	–	
		Totals	–	–	–	1	–	–	–	–	1	4	–	

Dental treatment was given to 23 patients during their Sanatorium treatment, and the following work was done :—

	1930.	1929.
Extractions	113	96
Fillings	4	2
Scalings	3	4
Dentures Repaired	3	2
Dentures (part) supplied ..	4	5
Dentures (full) supplied ..	2	15

Domiciliary visits by doctor and nurses, and dispensary attendances keep one in touch with patients after discharge, and various help is obtainable through sanction of the Sanatorium Benefit Sub-Committee, or through such organisations as the Kendal Charity Organisation Society.

The Westmorland County Council have provided nine shelters, which are given to patients at the discretion of the Tuberculosis Officer. At present the shelters are used by patients at Milnthorpe, Kendal, Bonningate, Staveley, Grasmere, Pooley Bridge, Yanwath, Clifton, and Bampton.

I have pleasure in acknowledging the kindly and ever-ready help of Dr. W. E. Henderson, and the friendly spirit of co-operation I always receive from the practitioners in the county."

CONTROL OF BOVINE TUBERCULOSIS.

In terms of the Tuberculosis Order, 1925, co-operative action is taken as between the Agricultural Officer, the County Police, the County Veterinary Inspectors and your Committee.

In 1930, 71 animals were destroyed. Since this Act came into operation over 500 animals have been destroyed. The bacteriological examination of samples of milk for Tubercle Bacillus is carried out at the Public Health Laboratory, Manchester.

PUBLIC HEALTH (VENEREAL DISEASES) REGULATIONS.

A. Scheme.

(a) Arrangements are in force whereby Westmorland patients are treated at the V.D. Clinics at the North Lonsdale Hospital, Barrow-in-Furness; at the Cumberland Infirmary, Carlisle, and at the Preston Royal Infirmary (occasionally).

There is a maternity home for unmarried mothers in Kendal (St. Monica's); all patients before admission have the Wassermann test applied. Should any prove positive they are transferred to the Hope Hospital, Leeds, for obstetric and venereal treatment.

(b) *Diagnosis.*

All Medical practitioners are supplied, free of cost to them, with special outfits (blood and smears) for sending specimens to the Pathological Department of the University of Manchester.

(c) *Attendance at V.D. Clinics.*

In necessitous cases the scheme provides for the payment of the railway fares to the Clinics.

(d) *Supply of Approved Drugs.*

The Medical practitioners who have had previous experience in the administration of approved drugs have been supplied with these drugs.

B. Adequacy of Position.

The distance of the Clinics is a disadvantage, but the incidence of venereal disease in this County does not warrant the opening of a centre.

From extensive enquiry in all directions, I cannot find a high incidence of the disease in this County.

C. Co-operation of Medical Practitioners.

All practitioners have been informed about the Scheme and the facilities offered, and they frequently make use of the diagnosis outfits.

D. Public Instruction.

By means of the Westmorland Branch of the Social Hygiene Council special lectures have been given as detailed in previous reports.

During 1930, 61 blood specimens were sent to the Public Health Laboratory, Manchester, of which 7 gave a positive result, 50 were negative, and 4 doubtful.

In 1930, 12 patients were treated.

HEALTH EDUCATION.

Here, the widespread activities of the Westmorland Federation of Women's Institutes have provided keen audiences when health talks have been given by Dr. Jessie Wright, Mr. Irvine, the County School Dental Surgeon, and myself.

The subjects vary from the care of eyes and teeth to Food and Your Money's worth. Special attention has been paid to nutrition and food values.

Simple health talks are given to school children at Medical Inspection whereby they are encouraged to hold on to health and to put into practice the teaching given them in their hygiene lesson.

My warm thanks are due to my Colleagues in the County Health Office for keen and harmonious service.

To Dr. Cockill, the Medical Officer of Health for the Westmorland Combined Districts, to Dr. J. Munro Campbell, the County Tuberculosis Officer, and to the Doctors practising in the County I tender my thanks for their ever ready help.

The County Nursing Association has well earned our thanks, and so have the nurses employed by the District Nursing Associations. To all of them I would express my grateful thanks.