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Publication/Creation

1938

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CITY OF WINCHESTER.

Annual Report

ON THE

Health of the City

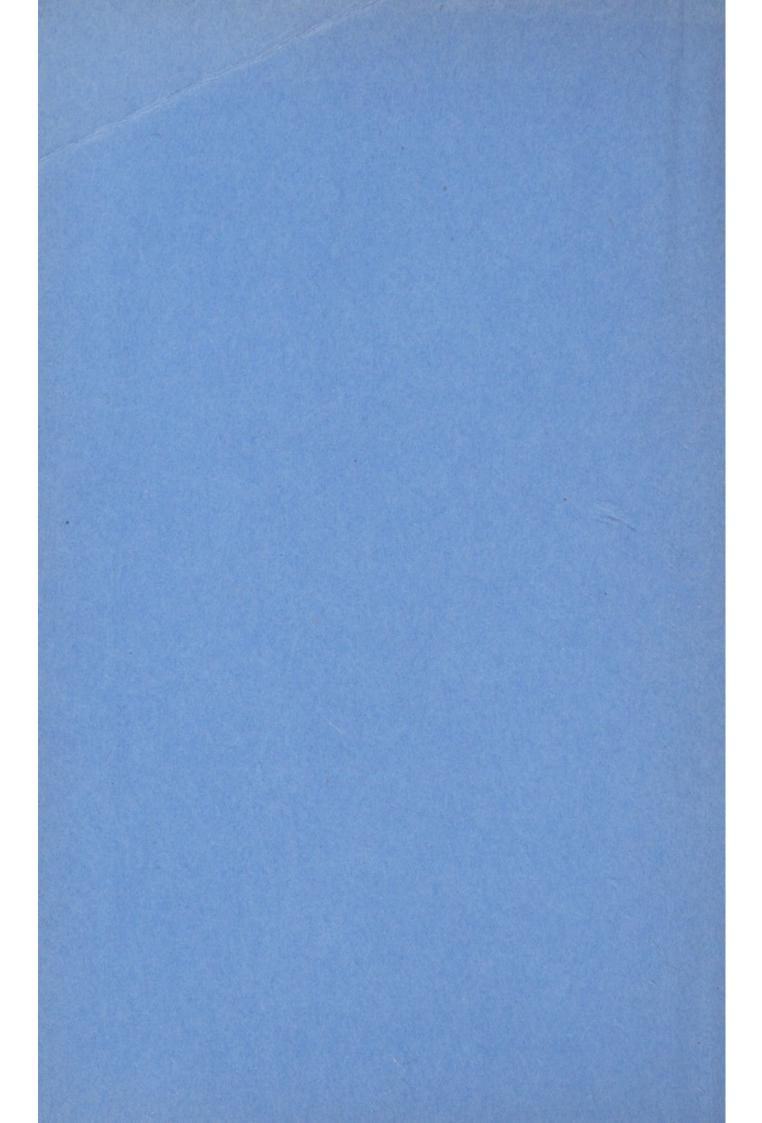
DURING 1938.

BY

W. A. BRUCE YOUNG, M.D., D.P.H.

Medical Officer of Health, &c.

WINCHESTER : PRINTED BY JOHN T. DOSWELL, ST. PETER STREET.-C.4718



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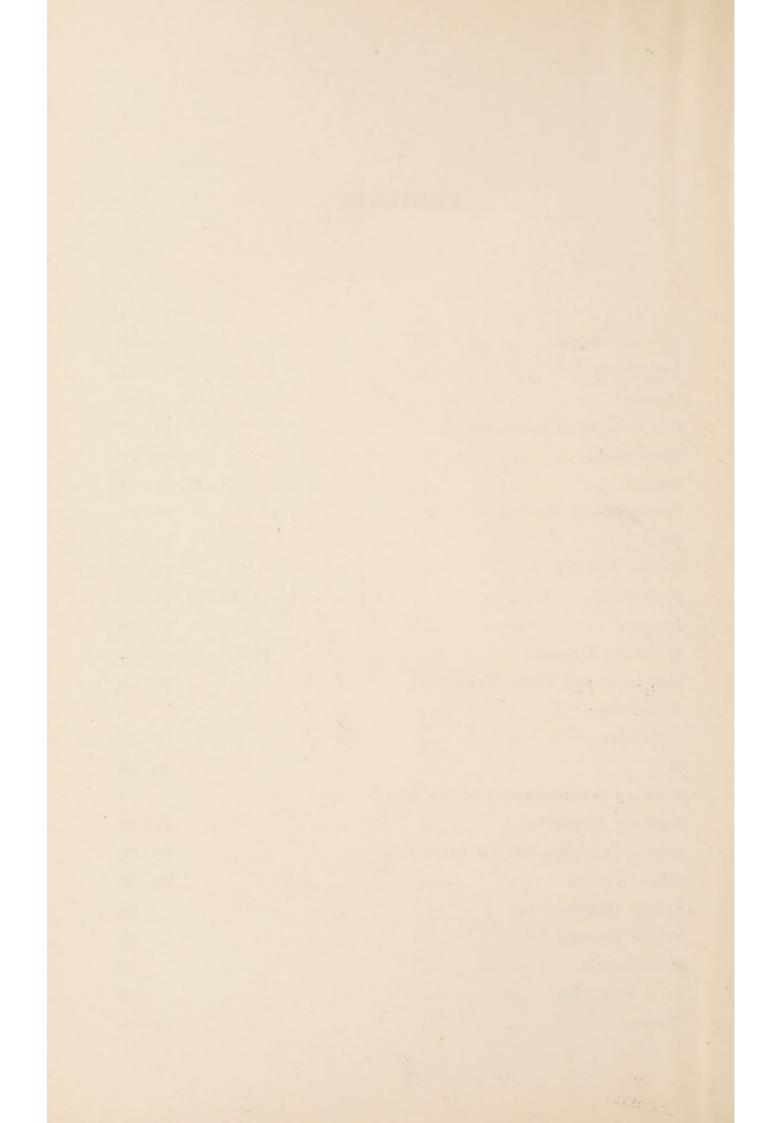
Medical Officer of Health, dc.

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To the Mayor, Aldermen and Councillors of the City of Winchester.

MR. MAYOR, LADIES AND GENTLEMEN,

I beg to submit the Annual Report on the Health of the City for the year 1938.

It is, as usual, divided into three parts, Public Health, Maternity and Child Welfare, and School Medical Work, each of which is administered by the appropriate Committee.

Section D. of Part I. comprises in great part the Report of the Sanitary Inspector.

It is once more my pleasant duty to thank the three Committees for their generous support, my staff for their willing collaboration and service, and the heads of other Corporation departments for valuable help and information.

I am,

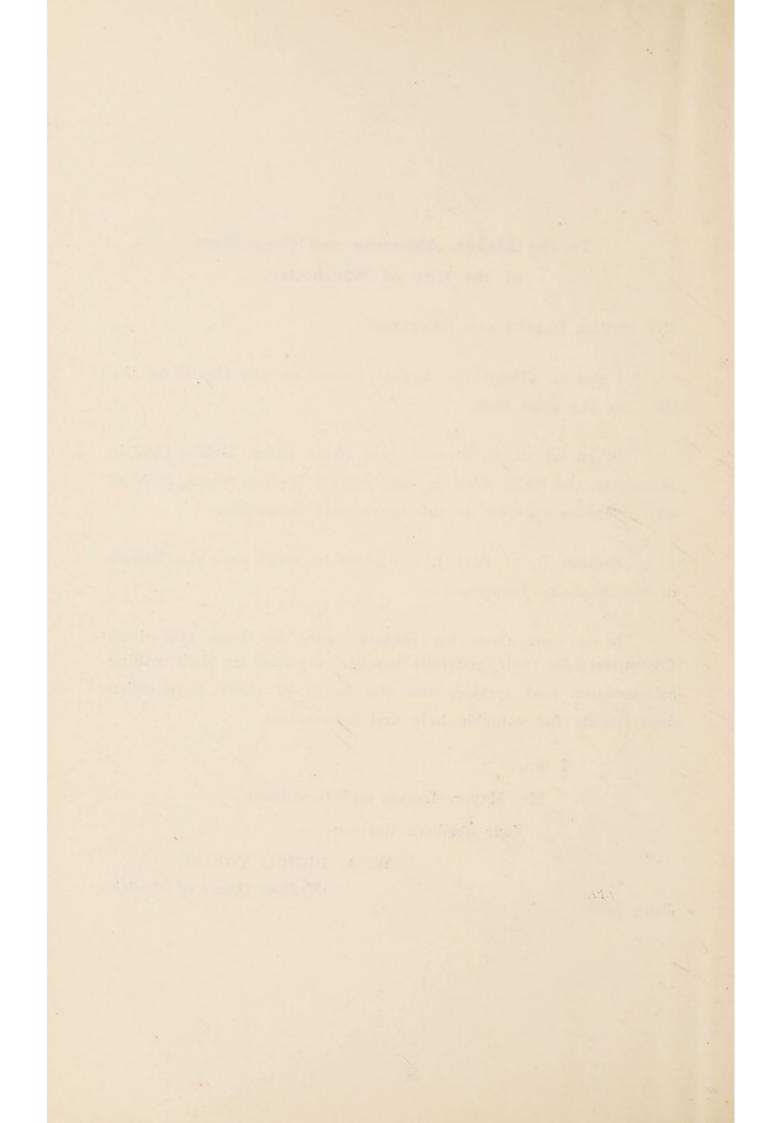
Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

W. A. BRUCE YOUNG, Medical Officer of Health.

June, 1939.

5



PUBLIC HEALTH.

HEALTH COMMITTEE, 1937-38.

THE MAYOR: COUNCILLOR RICHARDSON CHAIRMAN: COUNCILLOR BONES

Alderman Firmstone Alderman Lansdell Councillor Evans Councillor Smith Councillor Murray Councillor Bremridge Councillor Gleadowe

A. STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

1.—Area (in Acres)					38	88	
2Population.							
Census, 1931					229	69	
Estimated, mid. 1938	(R.G.)				244	60	
3.—Number of Inhabite	d Houses at	the end	of 1938,				
according to Rate Bo	oks				62	45	
4Rateable Value (Mar	ch, 1938)			£	2511	18	
Sum represented by a	a penny rate			£1001	14	8	

5.—There are no special industries in the City in the ordinary acceptance of the term.

Small factories and workshops are concerned almost entirely with work connected with the everyday requirements of a purely residential neighbourhood, *i.e.* laundries, bakeries, tailors, etc.

6.—Unemployment.

1.-Births (Registered)

In the first week in January each year.

Men	1933 867	$\frac{1934}{745}$	$\begin{array}{c} 1935\\ 581 \end{array}$	$\frac{1936}{541}$	$\frac{1937}{478}$	1938 865	1939 527
Women	47	63	84	94	70	72	102
	914	808	615	635	548	437	629

B. EXTRACTS FROM THE VITAL STATISTICS OF THE YEAR.

	(neghered)	Total	М.	F
(a)	Live Births-Legitimate	 295	158	187
	Illegitimate	 26	14	12

		Total	М.	F.
(b)	Still Births-Legitimate	12	6	6
	Illegitimate			
(c)	Birth-rate per 1,000 of the estimated			
	resident population	18	6	
(d)	Still Birth-rate per 1,000 total live and			
	still births	36		

2.-Deaths.

	М.	F.	Total
(a)	Total 142	132	274
<i>(b)</i>	Death-rate per 1,000 of the estimated resi	ident	
	population		11'2
(c)	Deaths from Puerperal causes		1
(d)	Death-rate of Infants under one year of age :-		
	i. All Infants (per 1,000 live births)		46.4
	ii. Legitimate Infants (per 1,000 legitim	mate	
	live births)		44'1
	iii. Illegitimate Infants (per 1,000 illegiti	mate	
	live births)		76.9
(e)	Deaths from :-		
	Cancer (all ages)		45
	Measles (all ages)		
	Whooping Cough		-
	Diarrhœa (under 2 years of age)		-
(f)	Deaths in Public Institutions		$28^{\circ}8\%$

3.-Birth and Death Rates, per I,000 Total Population.

					Birth-r	ate	Death-rate
					Live Births	Still-Births	
(<i>a</i>)	England and	Wales			15'1	0.60	11'6
	125 County I	Boroughs	and	Great			
	Towns inc	luding Lo	ndon		14'9	0.62	12'5
	148 Smaller	Towns,	popu	lation			
	25-50,000				15'8	0'64	11'9
	London				18'8	0'54	12'3
	Winchester				18'1	0'49	11'2

9

<i>(b)</i>	Birth-rates and d	eath-rates (3-y	vear periods)	-
			Birth-rate	Death-rate
	1912-1914		17'1	10.2
	1915-1917		16'8	14'1
	1918-1920		16.6	12.8
	1921-1928	bost with helias (18.8 .	12.5
	1924-1926		16'0	11.7
	1927-1929		14'8	12.7
	1930-1932		18'5	12.1
	1933-1935		12'8	12.6
	1936-1938		12.7	11.7

(c) Deaths of infants and total deaths--

1924 804 29	9.5
1925 260 30	11'1
1926 283 20	7.0
1927 316 22	6.9
1928 255^{S} 17	6.6
1929 847 26	7'4
1930 281 21	7'4
1931 282 9	3'1
1932 310 18	5'8
1983 887 15	4'4
1984 276 9	3.5
1985 828 11	8.8
1936 297 12	4'0
1987 290 10	8'4
1938 274 15	5'5

(d) Deaths of persons over 65 years of age-percentage of total deaths-

1928	 59.6	1934	 60'1
1929	 52.7	1935	 62'5
1930	 55'8	1986	 61'2
1931	 59'4	1937	 59'8
1932	 59'6	1988	 61'2
1933	 60.0		

Causes of Death.

	DISEASE	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
1	Typhoid and Paratyphoid Fevers			1									
2	Measles	3			7								
3	Scarlet Fever							1	1				
4	Whooping Cough	1				2		2				2	
5	Diphtheria	1		1	5		1			1			1
6	Influenza	6	2	13	1	9	3	12	2	4	2	9	
7	Encephalitis Lethargica			1			1			1			
8	Cerebro-Spinal Fever	3											1
9	Tuberculosis of Respiratory												
	System	15	9	12	13	19	10	14	10	15	1	7	6
10	Other Tuberculous Diseases	5	2	7	1	2	2	1	4	3	1	1	1
11	Syphilis	Un	class	sifie	ł	1	1			1	2	1	2
12	G. P. I.; Tabes Dorsalis	Un	class	sified	ł	1							
13	Cancer, Malignant Disease	42	38	41	33	44	41	47	41	31	57	42	45
14	Diabetes	4	6	1	2	2	5	9	3	5	3	3	1
15	Cerebral Hæmorrhage, etc.	17	19	29	16	17	15	18	10	19	12	12	17
16	Heart Disease	62	53	74	70	49	83	82	83	84	79	79	70
17	Aneurism	Un	clas	sifie	a			1			2		
18	Other Circulatory Diseases	Un	clas	sifie	a .	8	16	20	14	15	21	23	19
19	Bronchitis	13	12	16	11	10	9	16	7	7	6	6	4
20	Pneumonia	13	12	16	15	19	23	12	16	13	14	15	11
21	Other Respiratory Diseases	10	4	10	6	9	6	8	2	3	4	1	1
22	Peptic Ulcer	2	2	5	3	1	3	3	3	1	3	3	3
23	Diarrhœa, under 2 years	1		1			1	1					
24	Appendicitis	3	2	3	2	4	4	3	2	1	5		3
25	Cirrhosis of Liver		1	1	1	1		1	1	4	1		
26	Other Diseases of Liver, etc.	Un	class	sified	1		1	1		2	1		1
27	Other Digestive Diseases		class			6	7	8		15	7	6	2
28	Acute and Chronic Nephritis	10		11	9	4	2	4	10	9	7	4	8
29	Puerperal Sepsis			4			1	1				1	
30	Other Puerperal Causes	2	1	1			1	1				-	1
31	Congenital Debility,	-	-	Î			-	-					-
	Malformation, etc.	16	12	19	14	6	14	11	7	7	9	5	9
32	Senility	Un	clas	sifie	d	34	26	28	30	37	22	21	29
33	Suicide		3	5	1	4	3	3	4	3	1	5	4
34	Other Violence	5	5	6	9	11	9	9	8	12	13	8	10
35	Other Defined Diseases	82	68	69	62	18	22	20	18	33	23	35	25
36	Causes Ill-defined or Unknown						1				1		
00													

Totals 316 255 347 281 282 310 337 276 328 297 290 274

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AREES From

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Causes of and Ages at Death during the year 1938.

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			-Certified	-Uncertified	and		Scarlet Fever	Whooping Cough	ria	a	Encephalitis Letharoica	Cerebro-Spinal Fever	Tuberculosis of the Respiratory System	Other Tuberculous Diseases		Par	Mal	TOTA	11	deteoral figunorrhage, etc.	Heart Disease	B	Other Circulatory Diseases	tis	Pneumonia (all forms)	espi	Peptic Ulcer	Diarrhoea, (under 2 years)	Appendicitis	s of	isea	iges	Acute and Chronic Nephritis	Puerperal Sepsis	dierp	tal l				lolen	enne	10-11	
					hoid	Measles	·let	nopin	Diphtheria	Influenza	anha	pro	ercu	TI	Svohilis	01.01	101	Diaboto:	anan I	DLA	rt 1)	Aneurism	ar Cl	Bronchitis	ount	Br R	tic L	rho:	endi	hosi	or D	or D	te al	rper	Br P	geni	tion	lity	ide	1 10	Sr Di	ses 1	
			All causes-		Typhoid and Paratyphoid Fevers	Mea	Scar	Who	Dipl	Influ	Enc	(lere	qnJ.	Othe	Svb	General Paralveis of the Incana Tahae Dovea	Concer Malidnent Disease	I vial	17131	. HELE	Hea	Ane	Othe	Broi	Pnet	Other Respiratory Diseases	Pept	Dian	ddY	Cirrhosis of Liver	Other Diseases of Liver	Other Digestive Disorders	Acu	Puei	Other Puerperal Causes	Congenital Debility, Premature Birth, Malform		Senility	Suicide	Other Violence	Other Defined Diseases	Causes Ill-defined or Unknown	
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			Cancer		Heart Disease	Disease	Pneumonia	nonia	Tuber	Tuberculosis	Senility	ility	Violence	nce
Year	Population	Total	Total Percentage Deaths deaths	Rate per 1000 living	Percentage of deaths	Rate per 1000 living	Percentage of deaths	Rate per 1000 living	Percentage Rate of per 100 deaths living	e Rate per 1000 living	Percentage Rate of per 100 deaths living	e Rate per 1000 living	Percentage of deaths	Rate per 1000 living
1926	24050	283	8.11	1.74	22.22	2.6	00.9	91.0	4.6	0.54	:	:	4.24	0.49
1927	23980	316	13'2	1.74	9.61	2.2	4.11	0.54	6.9	6.83	:	:	06.1	0.50
1928	24110	255	6.11	99.1	1.17	2.1	4.68	0.49	4.3	0.45	:	:	96.1	0.20
1929	23970	847	8.11	171	21'3	9.0	4.61	99.0	5.4	64.0	:	:	1.72	0.25
1930	28970	281	8.11	12.1	24.9	2.9	88.9	0.62	6.5	0.58	:	:	8.20	28.0
1931	22950	282	15.6	16.1	17'8	2.1	673	0.82	7.4	16.0	12'0	1.4	06.8	0.48
1932	24700	304	13.4	1.66	22'3	8.8	10.1	86.0	6.8	0.48	9.11	1.0	5.96	0.36
1933	24910	337	18.9	1.88	24'3	3.29	3.85	0^{-52}	4.4	9.0	8.8	1.1	2.67	98.0
1934	24750	276	14'8	1.65	30	3,35	61.9	0.64	0.9	99.0	10.8	1.2	06.7	0.32
1935	24660	328	9.4	1.26	25'6	3.40	96.8	0.52	9.9	82.0	11.2	1.5	3.65	0.48
1936	24820	297	19'2	2.29	26'5	3'18	4.7	09.0	29.0	80.0	7.4	88.0	4.87	0.52
1937	24520	290	14.5	11.1	27.2	3.22	5.5	0.61	2.7	0.32	9.2	L8.0	2.76	0.32
1938	24460	274	16'4	1.83	25.5	2.86	4.01	0.45	2.5	80.0	10.5	1.18	9.8	0.408
												1		

CANCER.

The facilities for obtaining treatment by radium in suitable cases are sufficient, so that any delay is avoided. There is a National Radium Centre in Southampton.

																			I
		Digestive	ive	Genital	lai	Breast		Urinary		Respiratory System	tory	Skin		Bone		Other parts	wrts	Total	al I
		M.	F.	M.		M.	F.	M.		M.	F.	M.	F.	М.	F.	м.	P.	М.	F.
Under 1 year	year	:	:	:	:	:	:	:	:	- :	:		:	:	:	:	:	:	:
1. 5 years	ears	:	:	:	:	:	;	:	:	:	:	:	:	:	:	÷	:	:	:
5 - 30	:	:	:	:	:	:	:	:	:	:	÷	:	:	:	:	:	:	:	:
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45 - 50	:	1	:	:	:	:	:	:	:	÷	÷	:	:	÷	:	:	:	1	:
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Cancer.-Incidence, Age at Death, etc.

VITAL STATISTICS OF THE DISTRICT, 1926-1938

																	-
	T	All ages	Rate	13	2.11	13.1	10.5	14.4	11.7	12.2	12.5	13.5	1.11	13.3	6.11	8.11	11.2
	DISTRIC	IIV	Number	12	283	316	255	347	281	282	310	337	276	328	297	290	274
	NETT DEATHS BELONGING TO THE DISTRICT	TO THE DISTRICT Under 1 year of age All a	Rate per 1000 nett births	n	51	60	45	73	65	28	56	48	28	36	37	33	30
	NETT		Un	Number	10	20	22	17	26	21	6	18	15	6	11	12	10
	TRANSFERABLE DEATHS	Of residents	registered in the district	6	17	29	16	28	22	19	36	41	23	27	7	24	21
DEATHS	TRANSF DE/	Of non-	registered in the district	8	120	125	136	138	129	222	186	209	223	203	201	234	238
0	Total denths	district	Rate	2	16.0	1.11	15.5	19.0	16.3	1.12	18.6	20.2	19.2	20.4	2.61	20.3	20.1
	Total	dist	Number	9	386	412	375	457	382	485	460	505	476	504	491	500	507
		Rate		12	15.6	14.8	15.2	14.3	13.4	14.0	13.2	12.6	13.4	12.2	13.5	12.1	13.6
	BIRTHS	Number		4	387	367	378	353	331	332	326	315	332	303	335	299	333
		corrected		63	520	544	608	513	448	434	440	442	453	436	537	514	553
	Population	estimated to the middle of each year	(n. o.) h Por death rate	63	24050	23980	24110	23970	23970	22950	24700	24910	24750	24660	24820	24520	24460
	Pe	middle	For hirth		24680	24700	24780	24700	24700	23590							
		Year		1	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938

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C. GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA, 1938.

1.-Public Health Officers of the Authority.

Medical Officer of Health : Medical Officer for Maternity and Child Welfare : School Medical Officer · Medical Superintendent of Isolation Hospital : Police Surgeon :

W. A. Bruce Young, M.D., D.P.H., etc.

Medical Officer of Pre-natal Clinic :

C. J. Penny, O.B.E., M.A., M.D.

Surgeon, Victoria Isolation Hospital: B. H. Pidcock, M.B., B.S., F.R.C.S.

Dental Surgeon :

B. T. Wyatt, L.D.S., F.I.C.

Veterinary Surgeon : J. F. D. Tutt, F.R.C.V.S.

Sanitary Inspectors : Chief-P. Rees, M.S.I.A., C.R.S.I. Assistant-C. Bennett

Health Visitors, School Nurses and Infant Life Protection Visitors: E. Slater D. Dawe

Dental Attendant : N. Winkworth

Corporation Midwives :

D. Day, half-time service Midwifery and Health Visiting H. Oliver, Midwife

Matron of Isolation Hospital: A. E. Stacey, S.R.N.

Clerks:

G. Simmins M. Shepherd

D. Pearce

2.-Laboratory Facilities.

Available at Hants County Council Laboratory, as before.

8.-Ambulance Facilities.

Motor Ambulances owned by the following are available :-

- (a) Royal Hants County Hospital, for hospital and public use.
- (b) St. John's Ambulance Brigade (Winchester Division), for public use.
- (c) City Council, for Fever Hospital work.

4.-Nursing in the Home.

- (a) GENERAL. In addition to the two nurses employed by the Winchester and District Society for Visiting Nurses there are private nurses practising in the area.
- (b) MATERNITY NURSING. The Corporation Midwife acts also as Maternity Nurse, working under private medical practitioners.
- (c) INFECTIOUS DISEASES. The nursing of children under school age who are suffering from non-notifiable infectious diseases is undertaken by the Health Visitors when required.
- (d) SPECIAL NURSING. An Agreement was made in May, 1936, between the City Council and the Winchester and District Nursing Association whereby the latter provides home-nursing assistance on behalf of the Corporation for patients in necessitous circumstances who are notified to the Medical Officer of Health to have Pneumonia.

5. -Clinic and Treatment Centres. Unchanged.

6.-Hospitals.

(a) PUBLIC. 1. Public Assistance Institution Wards ... 148 beds 2. County Council Maternity Ward, St. Paul's Hill 4 beds 3. Victoria Isolation Hospital 4 beds (b) VOLUNTARY. 1. Medical, Surgical and Children's Wards ... 178 beds 2. Maternity Wards 10 beds The City Council accepts responsibility for the cost of the

institutional treatment of all necessitous maternity cases; normal

of September 1

cases are admitted to the County Council Maternity Ward or to a private nursing home; abnormal cases are sent to the Royal Hants County Hospital.

Infectious cases are sent to the Victoria Isolation Hospital which is managed by a joint Committee of the City and the Winchester-Rural District Councils which bear the cost of treatment and maintenance between them.

The patients are drawn from the City, and the whole of the Rural District with the exception of three parishes in the south-west part of the latter area.

The normal accommodation is 33 beds but this is capable of slight expansion when necessary.

7.-Adoptive Acts in Force.

Infectious Diseases (Prevention) Act, 1890. Public Health (Amendments) Acts, 1890-1907. Baths and Wash-houses Act, 1846-1882 Libraries Act Public Health Act, 1925.

8.-Bye-laws in Force.

Houses let in lodgings Tents, vans and sheds Common lodging houses New streets and buildings Drainage of existing buildings Earth closets and cesspools Pleasure grounds Street trading and employment of children Cleansing of footpaths **Open bathing-places** Slaughterhouses Prevention of nuisances **Omnibuses** and hackney carriages Cemeteries Keeping of animals Deposit of litter Nuisances by dogs Wireless loud speakers and gramophones

9.-Regulations.

Dairies, cowsheds and milkshops

D. SANITARY CIRCUMSTANCES OF THE AREA.

1.-Water

The public water supply is now in the charge of the City Corporation.

PHYSICAL PROPERTIES AND CHEMICAL ANALYSIS.

(a)	Smell when heated		natural	
<i>(b)</i>	Turbidity		clear	
(c)	Suspended matter		none	
(d)	Free and saline ammonia		.042	
	Albuminoid ammonia		.032	
	Oxygen absorbed in 4 hours	at 27°C	0.05	
	Nitrogen as nitrites		nil	
	Dissolved solids at 100°C		34'7	
	Chlorine		1'38	
	Poisonous metals and iron		nil	
	Total hardness		20'5	(English)
	Alkalinity to methyl or:	inge		
	(temporary hardness)		20'2	(English)
	Alkalinity to phenolphtha	lein		
	(free alkali)		nil	
	Ph. value		7.6	

BACTERIOLOGICAL EXAMINATION.

March, June, September and December, 1938.

(a) Number of organisms per m.l. capable of growing on :-

			-	
	i.	Agar at 37°C in 2 days	0	2
	ii.	Gelatine at 22°C in 2 days		8
	iii.	Lactose bile salt agar in 2 days		none
<i>(b)</i>	Sma	allest quantity of water :-		
	i.	Giving acid and gas in bile	salt	
		lactose broth	no	ne in 100 m.l.

ii. Containing bacillus coli none in 100 m.l.

Bacteriologically this is a satisfactory water for all drinking and domestic purposes and a public supply.

Particulars of any new sources of Water Supply.

None.

Extension of Mains.

During the year an addition of 1,411 yards was made to the water mains in connection with recently built property.

Contamination.

As mentioned in my report last year, bacteriological analyses made early in January revealed evidences of contamination. A Chlorination Plant was immediately installed and has since been permanently used, with the result that the domestic supply has maintained a high standard of purity.

Quantity.

The available quantity of water during the year has not given given rise to any anxiety.

2.-Drainage and Sewerage.

During the year, work was commenced on a new Sewage Pumping Station in the N.W. section of the district in order to eliminate cesspool drainage and to provide for ultimate building development in this area.

The sewage will be lifted to the nearest existing gravitation sewer.

Additional sewerage provision was made during the year coupling up recent additions with the mains on the South side of the City.

3.-Rivers, Streams, etc.

The main river through the Weirs was thoroughly cleaned out during August and September, and a section of the old Canal at the Wharf was widened and cleaned towards the end of the year.

4.-Closet Accommodation.

No conversion of closets from the conservancy to the water carriage system took place during the year, and it is not anticipated that the dozen or so of the former type that remain will be materially reduced in number for some time. Situated as they are on the rural ring, and in most cases only in occasional use, the alteration of them to cesspool drainage (the only alternative method of disposal owing to the absence of sewers) is much too costly to justify the change.

5.-Public Cleansing.

Improvements were commenced during the latter end of the year.

6.-Swimming Baths and Pools.

There are two public open air baths, both of which are supplied by water from the River Itchen. The water is not treated in any way.

7. Sanitary Inspection.

Complaints received				142
Nuisance found to exist		and the second be		184
No Nuisance				8
Abated	%-			129
Routine Inspections				6423
Number of premises who	ere nuisan	ces were found		225
Re-visits to work in prog	ress and 1	property under no	otice	1265

Particulars of Nuisances and Defects dealt with.

Nature of Nuisance		Number
Premises requiring repair	 	132
Premises requiring cleansing	 	114
Drains found choked	 	26
Drains found otherwise defective	 	15
Defective W.C.'s. and fittings	 	44
Defective yard surfaces	 	38
Defective eave and down spouts	 	85
Defective sinks	 	9
Offensive accumulations	 	28
Absence of proper refuse receptacle	 	32
Rat infestation	 	11
Verminous houses	 	15
Total nuisances and defects found	 	499

Nuisances and Defects-Action Taken.

Number of nuisances and defects	 	499
Abated after verbal notice	 	243
Preliminary notices served	 	118
Statutory notices served	 	nil
Statutory notices complied with	 	nil
Notices outstanding at end of 1938	 	26

Most preliminary and statutory notices served dealt with more than one nuisance.

Public Health (Smoke Abatement) Act, 1926.

One complaint was received of a nuisance from smoke from a factory chimney, but despite observations over a period of six weeks, at no time was smoke emitted for such a period as to constitute a nuisance.

Premises and Occupations controlled by Bye-Laws or Regulations.

- (1) Cowsheds, Dairies and Milkshops
- (2) Slaughterhouses
- (3) Common lodging houses
- (4) Tents, Vans and Shed Dwellings.
- (5) Houses Let in Lodgings.

1.-Cowsheds.

There are nine cowsheds within the City area housing approximately 250 cows. There were changes of the tenancies of three of the farms during the year, and considerable structural alterations and improvements were carried out to the cowsheds for the incoming tenants. Seven of the nine cowsheds hold a licence from the County Council for the production of Accredited Milk.

Twenty-six visits to cowsheds were paid during the year; the conditions found, were, on the whole, satisfactory.

Dairies and Milkshops.

Seven shops in the City sell milk and dairy produce only; fourteen others combine the sale of bottled milk with goods of a miscellaneous character. A considerable proportion of the milk sold is Pasteurised, and a number of Accredited producers sell their own product as ordinary milk. The following table gives particulars of the

licenc	ees granted for the	sale of one or other	of the des	signated mil	ks :-
	Producers licence	es. Pasteurised mil	k		2
	Dealers licences	Tuberculin Tested	milk		4
	Dealers licences	Accredited milk			1
	Dealers licences	Pasteurised milk			6

Fortnightly bacteriological examinations of Pasteurised milk are carried out and monthly examinations of the other grades. The results in all cases have been very satisfactory.

2.-Slaughterhouses.

Seven private slaughterhouses are in regular use by fourteen butchers, whilst an additional one is used only occasionally.

Of the eight slaughterhouses, three are satisfactory as regards position and structure, four are satisfactory from the structural standpoint but not so good as regards position; the remaining one is unsatisfactory in both respects.

Each slaughterhouse is owned by one of the butchers using it, the meat being sold locally in their own shops.

The whole of the meat slaughtered in the town is inspected, and this work entailed approximately 4,000 visits.

The appended table gives particulars of the animals slaughtered and inspected and also of the quantities of meat condemned and surrendered :-

		Cattle	Calves	Sheep and Lambs	Pigs
Number killed		292	889	2877	8176
Number inspected		292	889	2877	3176
Diseases other than Tube	reul	osis			
Carcases condemned			8	2	. 4
Parts of carcases or org	ans				
condemned		6	1	8	2
Percentage of carca	ses				
affected with disease		2.02	0'44	0'84	0'18
Tuberculosis					
Carcases condemned		5	6		7
Parts of carcases or org	ans				
condemned		11			27
Percentage of carca	1915.7				
affected with Tuberculo	osis	5'47	0.62		1.07

3.-Common Lodging Houses.

Three common lodging houses have accommodation for 79 lodgers but the numbers in residence seldom exceed 60. Two accommodate men only, the third has provision for 19 single men and 2 married couples. Two are exceptionally well conducted, and are not a scource of trouble, but the third needs constant supervision to ensure a proper observance of the Byelaws. Regular inspections have been carried out and no occasion arose for the service of a written notice.

4.- Tents, Vans and Shed Dwellings.

During the year application for the confirmation of new Byelaws was made to the Ministry of Health.

No application for a licence for the use of ground for camping sites was received, and it is not anticipated that the practice will develop within the City area. The two or three sites which occasionally house, for a very short period, caravans and/or tents are provided with a water supply and means of refuse disposal.

One site was a subject of a complaint owing to lack of adequate means of refuse disposal, but improvement was promptly secured and steps were taken to guard against a recurrence of the trouble.

5.-Houses Let in Lodgings.

There are a few houses which, by reason of the terms of tenancy, would bring them within the classification of houses let in lodgings; but it has been found best to deal with them either under the Housing or the Public Health Acts.

6.-Offensive Trades.

There are no offensive trades carried on within the City.

7.—Disinfection.

Disinfection of rooms and bedding following non-notifiable cases of infectious disease, is carried out at the request of occupiers and is charged for by the Council.

8.-Testing of Drains.

Requests for drains and fittings to be tested are sometimes received from agents or prospective tenants and a charge based on rateable value is made.

FOOD AND DRUGS ADULTERATION ACT, 1928.

Fifty-one samples were submitted for analysis to the Public Analyst, as follows :-

Milk		26	Seidlitz Powder	 1
Cream		6	Tincture of Iodine	 1
Sausages		6	Epsom Salts	 1
Condensed	Milk	6	Zinc Ointment	 1
Cochineal		1	Wintergreen	 1
	Olive	Oil	1	

Four samples of milk were found to contain the following percentages of added water: 20'8%, 12'1%, 14'0% and 7'8%. Two samples were taken from a small retailer and two from the producer supplying him. Immediately following the taking of further samples from the farm, the milk was found to be above standard, and remained so to the end of the year. A warning was sent to the farmer and a careful watch is being kept on the supply.

In addition to the preceding samples, the following were submitted to the Analyst of the Hampshire County Council:-

Milk	8	for chemical analysis
Milk (Acredited)	8	submitted on behalf of the Ministry of Health for test by methelyne blue reduction test.
Milk (Pasteurised)	75	for bacterial count and phosphatase test.

Of the 75 samples of Pasteurised milk, three were above the permitted count of 100,000 per m.l. and two were not properly pasteurised. In each case the fault was due to improper management of, rather than defects in, the plant.

MILK AND CREAM REGULATIONS, 1912-1917.

	ber of samples oresence of a pre			Number in which preservatives were reported to be present and per- centage of preservative
Milk			26	nil
Cream			6	nil
Thickeni	ing Substan	nces		nil
Other ob	servations			nil

FOOD PREMISES.

As a routine procedure, regular inspections of all food premises are carried out, and the general standard of cleanliness in the storage, preparation and sale of foodstuffs is very satisfactory. Minor defects in the structure of shops, and methods of handling foodstuffs were readily remedied by occupiers without recourse to legal proceedings.

PUBLIC ELEMENTARY SCHOOLS.

Thirty-six visits were paid to the Elementary Schools in connection with the annual cleansing, and 10 additional visits in connection with special cleansing at 3 of the schools.

RAG FLOCK ACTS 1911-1928.

No rag flock is manufactured in the town, and the relatively small quantities used in re-making mattresses is bought under a guarantee of conformity with the Acts.

MERCHANDISE MARKS ACT.

The several labelling orders under the Act are faithfully observed by traders, and the small number of omissions found are due to carelessness or oversight rather than an attempt to evade the orders. In all such cases, a verbal intimation is given to the shopkeeper, and this has been found sufficient to secure compliance.

SHOPS ACT.

Considerable progress was made during the year in providing facilities for the maintenance of a reasonable temperature in shops during the cold weather.

The number of shops without any means of heating is now reduced to about 25. These are mostly shops in which perishable foodstuffs are sold belonging to Butchers, Fishmongers, Greengrocers and Grocers.

It is extremely difficult to devise any satisfactory system of heating for this type of shop, for there are so many difficulties to be overcome, e.g. trade customs of keeping doors and sometimes windows open; The effects of local heating on the stocks, considerations of cost, etc.

In Butchers and Grocers shops, tubular electric heaters fixed six inches above the floor level behind the counters or on the shop walls, appear to have proved satisfactory and so far no adverse effects on stock have been reported. Shopkeepers generally are slowly appreciating the fact that a reasonably warm shop, besides promoting the comfort of their employees, is an inducement to customers to call and that their apprehensions of damage to their stock are very largely imaginary.

ERADICATION OF BED BUGS.

Fourteen complaints of infestation by Bugs were received, five in privately owned houses and nine in Council houses. The same treatment was given to all, but was varied in extent according to the degree of infestation. In small infestations, skirtings, picture rails and architrave mouldings were eased away from the walls and two or three applications of Zaldicide at 10 day intervals were given followed by a thorough scrubbing of walls, floors and furniture with a 10% solution of Izal.

The treatment of rooms heavily infested consisted of the removal of skirtings, picture rails, architrave mouldings and all wall paper. A blow-lamp flame was applied to the backs of all the skirtings, etc., and to the wall plaster throughout the room. Zaldicide was sprayed on the walls at 10 day intervals and the walls finally washed with neat Izal before the replacement of the skirtings, etc.

One private house in which all the walls and ceilings were lined with $\frac{3''}{8}$ matchboarding was so badly infested that any treatment short of removing the lining was useless. This was done, and the walls and ceilings plastered.

In all the cases dealt with the treatment proved effective.

INSPECTION OF DWELLING HOUSES DURING THE YEAR.

1(a)	Total number of dwelling houses inspected for hous	sing	
1	defects (under Public Health or Housing Acts).	••••	186
<i>(b)</i>	Number of inspections made for that purpose		285

2,-(a) Number of dwelling houses (included under sub-head (1)	
2) (w) Humber of a weiting houses included under sub-head (1)	
above) which were inspected and recorded under the	
Housing Consolidated Regulations, 1925	91
(b) Number of inspections made for that purpose	189
3Number of dwelling houses found to be in a state so	
dangerous or injurious to health as to be unfit for	
human habitation	7
Undertaking by owner	1
Scheme undertaken by owner	4
Demolished	2
4Number of dwelling houses (exclusive of those referred to	
under the preceding sub-head) found not to be in all	
respects reasonably fit for human habitation	176
Remedy of defects during the year without service of fo	ormal
notices.	
Number of defective dwelling houses rendered fit in conseque	nce of
	nee or
informal action by the Local Authorities or their officers.	
informal action by the Local Authorities or their officers.	143
informal action by the Local Authorities or their officers. Action under Statutory Powers during the year.	143
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 	143
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1.—Number of dwelling houses in respect of which notices 	143 , 1936.
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1.—Number of dwelling houses in respect of which notices were served requiring repairs 	143 , 1936.
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1.—Number of dwelling houses in respect of which notices were served requiring repairs 2.—Number of dwelling houses which were rendered fit after service of formal notices :- 	143 , 1936.
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1.—Number of dwelling houses in respect of which notices were served requiring repairs 2.—Number of dwelling houses which were rendered fit after service of formal notices :- (a) By owners 	143 , 1936. 4 4
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1.—Number of dwelling houses in respect of which notices were served requiring repairs 2.—Number of dwelling houses which were rendered fit after service of formal notices :- 	143 , 1936. 4
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1.—Number of dwelling houses in respect of which notices were served requiring repairs 2.—Number of dwelling houses which were rendered fit after service of formal notices :- (a) By owners 	143 , 1936. 4 4
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1Number of dwelling houses in respect of which notices were served requiring repairs 2Number of dwelling houses which were rendered fit after service of formal notices :- (a) By owners (b) By Local Authority in default of owners 	143 , 1936. 4 4
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act -Number of dwelling houses in respect of which notices were served requiring repairs 2.—Number of dwelling houses which were rendered fit after service of formal notices :- (a) By owners (b) By Local Authority in default of owners B. Proceedings under Public Health Acts:- 	143 , 1936. 4 4
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act -Number of dwelling houses in respect of which notices were served requiring repairs -Number of dwelling houses which were rendered fit after service of formal notices :- By owners By Local Authority in default of owners B. Proceedings under Public Health Acts:- -Number of dwelling houses in respect of which 	143 , 1936. 4 1 nil
 informal action by the Local Authorities or their officers. Action under Statutory Powers during the year. A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1.—Number of dwelling houses in respect of which notices were served requiring repairs 2.—Number of dwelling houses which were rendered fit after service of formal notices :- (a) By owners (b) By Local Authority in default of owners B. Proceedings under Public Health Acts :- 1.—Number of dwelling houses in respect of which notices were served requiring defects to be remedied 	143 , 1936. 4 1 nil

- (a) By owners nil.
- (b) By Local Authority in default of owners ... nil

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C.	Proce	edings under Sections 11 and 13 of the Housing Act, 1	936:-
	1	Number of dwelling houses in respect of which	
		Demolition Orders were made	2
	2	Number of dwelling houses demolished in pursuance	
		of Demolition Orders	2
D.	Proce	eedings under Section 12 of the Housing Act, 1936 :-	
	1.	Number of separate tenements or underground rooms,	
		in respect of which closing orders were made	1
	2.	Number of separate tenements or underground rooms,	
		in respect of which Closing Orders were determined,	
		the tenement or room having been rendered fit	nil
Ho	using	Act, 1936, (Part IV.) Overcrowding.	
	(<i>a</i>)	1Number of dwelling houses overcrowded at the	
	()	end of the year	4
		2Number of families dwelling therein	4
		3Number of persons dwelling therein	81
	(b)	Number of new cases of overcrowding reported	
	1	during the year	1
	(c)	1Number of cases of overcrowding relieved during	
		the year	15
		2Number of persons concerned in such cases	112
	(d)	Particulars of any cases in which dwelling houses	
		have again been overcrowded after the Local	
		Authority have taken steps for the abatement of	
		overcrowding	nil
	(e)	Any other particulars with respect to overcrowding	
		conditions upon which the Medical Officer of Health	
		may consider it desirable to report	nil
E.	PRE	VALENCE AND CONTROL OF INFECTI	ous

DISEASE.

1.-Diphtheria Immunization.

When the approval of the Board of Education had been received, the immunization to Diphtheria which has hitherto been given to children under school age only, was extended to all children attending the elementary schools. The conditions under which this is carried out are exactly the same as those that were in operation last year, *i.e.* the work is performed by private Practitioners at their own surgeries.

The following figures are available :-

1	Numbe	r Inoculate	α.
 	22	cases	
 	20	cases	
 	87	cases	
 	149	cases	
	··· ···	22 20 37	20 cases 37 cases

2.-Victoria Hospital.

It will be seen that, so far as the City is concerned, we had an unusually small amount of infection to deal with, and that the majority of the cases came from the surrounding districts.

Many of the cases sent in by them were of a very serious nature but of 54 admitted only 1 died.

Infantile Paralysis.

We had the unusual experience of having a small outbreak of Infantile Paralysis in Winchester and shared this with a large number of other districts in the country about the same time.

The first case was notified on 17th October, 1938, and the last case on 18th November, 1938.

The age distribution was as follows :-

Under school age	 nil
School children	 8
Adults	 8

The cases were scattered over the whole of the district and it was quite impossible to trace any connection between them.

All were admitted to Institutions where they received suitable treatment.

It can be said, that on the whole, good and satisfactory recoveries were obtained in all cases, owing to early notification and the adoption of suitable institutional treatment.

Shortly after the second case was notified, it was decided to co-operate with neighbouring Local Authorities with the object of securing an artificial respirator, as some difficulty had been experienced in obtaining institutional treatment in two cases which has occurred in the neighbourhood. Before this scheme could be put into operation however, Lord Nuffield's scheme was made known. The Council promptly applied to have an "Iron Lung" allotted to them and this was delivered to us in the early part of the present year (1989).

			TOTA	L NO	TIFI	CATIO	NS						
DISEASE	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Scarlet Fever	35	65	25	20	37	26	53	55	151	96	59	44	18
Diphtheria	9 -	3	5	26	32	6	14	7	3	9	3	12	3
Enteric Fevers	5	4	3	4	3	2	5	2	1	1	4		1
Puerperal Fever	4			7	4	7	2	5	1	1	3	2	1
,, Pyrexia (Non-Notifiable)	3	2	1	13	3	4	8	9	7	10	14	9	10
Pneumonia	19	60	31	17	8	47	43	44	19	17	24	29	7
Erysipelas	4	2	1	12	1	8	3	3	10	6	4	2	4
Acute Poliomyelitis and Polioencephalitis		1	2						1				6
Cerebro-spinal Fever		3						2					1
Encephalitis Lethargica		1					1		1				
Ophthalmia Neonatorum	7	2	8	10	6	5	2	5	6	2	2	9	3

NOTIFIABLE INFECTIOUS DISEASES, 1938.

TREATMENT, &c. OF NOTIFIABLE

DISEASES. Winchester Residents

	Total Cases Notified	Total	Treated in Hospital	Deaths
Scarlet Fever	 18	18	16	
Diphtheria	 3	3	3	
Enteric Fevers	 1	1	1	
Puerperal Fever	 1	1	1	
,, Pyrexia	 - 10	10	4	
Pneumonia	 7	7	2	
Erysipelas	 4	4	1	
Ophthalmia Neonatorum	 3	3		

AGE DISTRIBUTION.

		Under 1 year	1-2 years	2-3 years	3-4 years	4-5 years	5-10 years	10-15 years	15-20 years	20-35 years	35-45 years	45-65 years	65 years and over	Totals	
Scarlet Fever	'			2	1		6	3		3	2	1		18	
Enteric Fevers							1							1	
Diphtheria							1	1	1					3	
Puerperal Fever										1				1	
" Pyrexia								1		8	1			10	
Pneumonia				2		1				1		2	1	7	
Erysipelas											1	3		4	
Ophthalmia Neonatorum		3			•			•	•	·	•			3	

Ophthalmia Neonatorum.

Cases notified	 	 8
Treated in Hospital	 	 None
Vision unimpaired	 	 None 3.

Non-Notifiable Infectious Diseases.

	τ	Juder 5 years	5-14 years	Other Ages	Total
Measles		65	225		290
Whooping Cough		9	5		10
Chicken Pox		26	178		204
Rubella			2		2
Mumps		1	28		24

				City of Winches		From ther Dist	ricts	Total Admissio	ms
(a)	Admissions, 1938	3 :-							
	Scarlet Fever			17		25		42	
	Diphtheria			5		22		27	
	Acute Poliomyel	itis		1		_		1	
Pleurisy & Broncho-Pneumonia 1								1	
	Measles			2		8		5	
	Erysipelas			2		1		3	
	Rubella			-		1		1	
	Diphtheria & Me	asles				1		1	
	Measles & Appen	dicitis		1		-		1	
	Measles & Pneur	nonia		_		1		1	
	Mumps (Military)		2				2	
				31		54		85	
(b)	DEATHS :-								
	Diphtheria					1		1	
(c) MAINTENANCE AND TREATMENT OF PATIENTS, 1931 - 1938									
		1931	1932	1933	1934	1985	1936	1937	Aver-
		1932	1933	1934	1935	1936	1937	1938	age 10 yrs.
	nber of patients reated	10	74	167	0.05	92	173	131	118
		49	14	107	265	92	175	191	110
2. Nur		1.01	0000	1007	0705	05.11	0105	5157	9007
	ays	1434	2090	4697	8785	3541	6165	5157	3867
3. Ave	rage stay (in days)	29.2	28.3	28.1	33.1	38.2	35.6	39.3	32.2
	erage number of								
, p	atients per day	3.9	5.2	12.8	24.0	9.7	16.9	14.1	10.2
5. Gro	ss cost per patient	10/2014				30/2/1	20/18/8		28/5/6
42/14/0 14/18/1 6. Gross cost per patient								24/19/1	LI .
	er day	29/-	19/-	10/7	9/-	15/8	11/9	12/8	17/8
P									-1-

Victoria Isolation Hospital.

(d) TUBERCULOSIS.

1.—It has not been necessary to take any action during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under Section 62 of the Public Health Act, 1925, or Section 72 of the Public Health Act, 1936.

2.-Notifications :-

	All case		Residents				
Sex	Respiratory	Non- respiratory	Total	Respiratory	Non- respiratory	Total	
Male	17	8	20	16		16	
Female	5	8	8	2	2	4	
Both sexes	22	6	28	18	2	20	

3.-Deaths and Death-rate (Residents) :-

	Respiratory	Non-respiratory	Both types
Deaths	 6	1	7
Death-rate per 1000 population	 0'24	.04	0'28

4.-Previous death-rates :-

1914-18	 0.38	1929-33	 0.69
1919-28	 0.74	1934-37	 0.61
1924 - 28	 0.69	1938	 0'28

5.- Ages at Notification and at Death (Residents) :-

			lew Cases		Deaths				
Age	Respi M	ratory F	Non-Re M	spiratory F	Respin M	ratory F	Non-Res M	piratory F	
Under 1 year									
1 to 5 years									
5 to 15 years									
15 to 25 years	2	1		1		1			
25 to 35 years	4	1		1	1		1		
35 to 45 years	5				2	1			
45 to 55 years	2								
55 to 65 years	3							ine .	
65 and upwards						1	*7		
Totals	16	2		2	8	8	1		

6Notifications received from :-		
Private Practitioners		 16
Medical Officers of Institutions	····	 4
Not notified during life		 -

7.—Cases of Tuberculosis on the Register on December 31st each year 1931-1938 (inclusive).

Year		MALES		F	EMALES		BOTH SEXES			
Lear	Respiratory	Non- Respiratory	Total	Respiratory	Non- Respiratory	Total	Respiratory	Non- Respiratory	Total	
1981	42	14	56	11	10	21	58	24	77	
1932	42	15	57	18	12	80	60	27	87	
1988	34	9	43	22	8	30	56	17	73	
1984	80	10	40	21	8	29	51	18	69	
1985	80	11	41	17	9	26	47	20	67	
1986	23	9	82	21	5	26	44	14	58	
1987	15	8	23	24	6	30	39	.14	53	
1938	22	7	29	22	8	80	44	15	59	

Year 1938	December	November	October	September	August	July	June	May	April	March	February	January	Months	Ì
														-
30.25	29.74	29.75	30.46	29.98	29.95	29.93	30.62	29.89	32.16	30.12	30.27	30.22	Mean Pressure at Station Level 128 feet above M.S.L.	Barometer
82	00	66	65	78	68	75	79	74	66	66	54	56	Highest Maximum	
20	20	30	34	36	40	41	61	86	26	25	29	33	Lowest Minimum	Temp
58.3	43.6	54.9	58.0	66.8	72.2	8-89	68.3	60.0	55.4	58.4	46-2	47.3	Average Maximum	Temperature
13.8	35.8	44.0	44.3	43.9	54.7	52.4	52.5	43.0	36-1	38.8	36-4	39.8	Average Minimum	
51.2	39.8	50.2	51.9	57.3	62.3	59-0	60.2	53.4	47.1	48.1	41.4	44.1	Mean of obs. at 9 a.m. Dry We bulb bul	
50.3	39-4	49.5	51-1	57.1	60-9	58.7	58.7	51.9	45.7	47.4	40.7	12.8	of obs. a.m. Wet bulb	Hygrometer
93	100	93	93	100	94	94	94	86	93	93	92	92	Degree of Hum. Sat.= 100	er
130	18	17	18	11	7	11	8	11		. 09	7	19	No. of Days when Rain fell	R
27-32	4.34	5.28	3.23	1.36	1.94	2.66	1.04	2.01		.38	.98	3.80	Total Amount (inches)	Rainfall
1482.45	38-65	45.10	109-25	121.75	167-80	138-35	232.10	168.75	177-20	162.50	86.00	35.00	Number of hours	Sunshine
18	10		22		2		1	*	4	1	10		Ň	
71	33		*	6	Ċ1	1	ω	80	17	6	14	*	NE.	
1	•	•	•		•	•		•	•	•	1		R.	Wi
46	8	9	12	51	01	*	60	C1		10	60	•	SE.	Wind (Days)
32	1.9		6	10	•	6	ω		•	33	29	CI	×	(s)
150	9	21	14	10	11	19	15	9	80	15	01	19	sw.	
9		•	•	1	10	1	10	•	•	20	1	•	W.,	
38	7	•	œ	6	6		60	2	6	2	•	w	NW.	

METEOROLOGICAL RECORD, 1938.

MATERNITY AND CHILD WELFARE.

MATERNITY AND CHILD WELFARE COMMITTEE, 1937 - 1938.

THE MAYOR: COUNCILLOR RICHARDSON.

Alderman Lansdell Counciller Firmstone Counciller Hinxman Counciller Sankey Councillor Bones Councillor Perkins Councillor Crompton Mrs. A. T. Edmonds

1.-Diphtheria Immunization.

The scheme for the immunization of pre-school children makes very little progress; this will be seen from the following figures-

Year	Births Notified	Children Immunized
1935 (7 months)	159	22
1936	345	30
1937	817	87
1938	338	29

Communications have been made to private practitioners with the object of securing their assistance in improving these figures.

2.-Pre-Natal Services by General Medical Practitioners.

The scheme which was finally adopted at the beginning of the present year was put into operation in August.

An outline of the scheme is as follows-

(a) The Pre-Natal Clinic has been continued but is now held only once a month.

(b) In addition, it has been arranged that private practitioners doing maternity work in the City shall undertake the Pre-Natal and Post-Natal supervision of patients who attend at their surgeries voluntarily for the purpose, and of others referred to them by the midwives practising in the City.

(c) Each expectant-mother so attending is to receive a general medical examination about the 16th week and a detailed medical and pelvic examination at the 32nd and 36th weeks.

(d) One Post-Natal examination, to be made between the 3rd and 6th week after confinement, is also provided for.

(e) It has been arranged that on these occasions special attention shall be given to the dental condition of the women, and practitioners are encouraged to notify me when in their judgment treatment is necessary.

(f) Patients for whom they think them necessary can be supplied, under certain conditions as regards income, with sterilised maternity outfits or extra nourishment.

8.-Pre-Natal and Post-Natal Clinic.

At the time of writing, reports had not been received from general practitioners giving the number of women who had had a complete series of Pre-Natal and Post-Natal examinations up to the end of the year. These figures will be available in the Annual Report for 1939.

During the year, 57 patients had been seen at the Pre-Natal Clinic, and 12 patients had attended for Post-Natal observation.

4.-Obstetric Consultants' Services.

One section of the scheme referred to above, set out arrangements whereby the services of Obstetric Consultants are made available to general practitioners undertaking domiciliary midwifery in circumstances of doubt or difficulty at the time of confinement or during the lying-in period.

Practitioners requiring advice or assistance before confinement can secure it by referring their patients to the Pre-Natal Clinic.

When he considers it necessary immediate admission to a Nursing Home or Hospital for confinement may be obtained on the recommendation of the Consultant.

The Consultants' services are also available in suspected or established cases of Puerperal Pyrexia.

Between the initiation of the scheme and the end of the year two consultations were held.

5.—Emergency Maternity Units.

Consultations have been held with the County Council in connexion with the provision of an Emergency Maternity Unit for City patients. At the time of writing no scheme had been put forward by the County Council. When such a scheme is drawn up, it is intended that the City will collaborate.

6.—Dental Services.

The Health Visitors are expected to include the care of the teeth of pre-school children and expectant-mothers in their homevisiting, and also during the attendance of these persons at the Maternity and Child Welfare Centre. Those appearing to require treatment are referred by the Health Visitors at the Centre to the Medical Officer at each session.

The Medical Officer in turn brings the patients to the notice of the Dental Officer who devotes two short sessions per week to the dental care of these persons.

It has not yet been found possible to arrange for the services of an anæsthetist for the administration of general anæsthetics. At the end of the year this was the subject of negotiation with the general practitioners of the district and it is hoped that terms may be agreed upon early in the New Year.

Advantage is taken by the Dental Surgeon on these occasions of giving advice to all who bring their children to him for treatment or those who themselves attend for treatment.

NUMBER OF CASES DURING THE YEAR 1938.

1. Number of all women and pre-school children who attended the Maternity and Child Welfare Dental Clinic during the year (latter part of year only).

(a)	Ante-Natal-Women			11 .
(b)	Post-Natal-Women			1
(c)	Child Welfare Centre-Pre-Sch	ool Child	ren	71
		Expectant Mothers	Nursing Mothers	Pre-School Children
2.	. Those specially referred to Dental Clinics by Medical Officer	11	1	71
3.	. Those found to be in need of treatment	11	1	71
4	. Those who received treatment	t 19	1	89

5. Number of treatments-

(<i>a</i>)	Fillings i. In temporary teeth			5
	ii. In permanent teeth	-	-	
(b)	Number of teeth ex- tracted	70	2	69
(c)	Number of administratic of general anæsthesia	ons -		
(d)	Number of patients supplied with dentures			
(e)	Number of dentures supplied			

1. -BIRTHS.

(a) Notifications.

i. Residents-Live Births		826	
Still Births		12	338
ii. Notified by-Midwives		214	000
Doctors, Parents,	&c.	124	
iii. Non-residents-Live Births		201	
Still Births		14	

558

(b) Institutional Births.

	19	85	1986		19	87	1938	
	R.*	N.R.*	R.•	N.R.*	R.*	N.R.*	R.*	N.R.*
Royal Hants County Hospital	24	70	81	98	22	94	18	102
No. 1 St. Paul's Hill	8	43	18	59	19	60	20	48
Diocesan Maternity Home		9		19		16		22
Private Nursing Homes	22	21	84	21	80	44	84	52
Percentage of all notified births	4	15	5	1	5	5	5	18

* R-Residents N.R.-Non-Residents of Winchester.

š.
98
.
5
1
2
3
5
1
1
2
1
8
8
1
4

Year	Total notified births	Still births	Rate per 1000
1916-18	1237	38	80'7
1919-21	1794	64	88'4
1922 - 24	1727	50	29'9
1925-27	1658	52	81'8
1928-30	1667	97	58.7
1931-33	1370	74	55.4
1984-86	1458	68	46'7
1937	514	27	52.5
1938	553	26	47'01

FIGURES FOR 3-YEAR PERIODS, 1916-38

2.-Deaths -Infantile Mortality.

<i>(a)</i>	Rate per 1000 live births-	_		
	All children			 46'4
	Legitimate children			 44'1
	Illegitimate children			 76.9
<i>(b)</i>	Comparative Infantile Me	ortality	y Rates—	
	England and Wales			 58'0
	126 County Borough	s and	Great Towns,	
	including Londor	1		 57.0
	London			 57.0
	148 Smaller Towns			 50.0
	Winchester			 46'4
11	a (D 1) 1. 10			

(c) Cause of Death under 12 months-

Causes	Under 1 week	1-2 weeks	23 weeks	5-4 weeks	Total under 4 weeks	I-3 months	3-6 months	6-9 months	-12 months	Total under 12 months
Cerebro-Spinal Fever		-							1	1
Prematurity, Congenital									1	1
Deformity, etc	9				9					9
Other defined diseases		1			1	1				2
Pneumonia							1	2		8
Totals	9	1			10	1	1	2	1	15

8.-Health Visiting.

(a)	Officers engaged in health visiting	at the	end of	the year-
	i. By the City Council		3	
	ii. By Voluntary Organisations		nil	

(b) The three officers devote half of their time to healthvisiting, including attendance at the Child Welfare Centre.

(c) Home visiting by health visitors-

i. To expectant mothers			
First visits			32
Total visits			120
ii. To children under 1 ye	ear of age—		
First visits			814
Total visits			1686
iii. To children between t	he ages of 1	-5 years-	
Total visits			2158

(d) Infectious diseases of mothers and of children under 5 years of age-

and Copal Saw	Cases Notified	Cases Visited	Cases for whom home nursing was provided by the Council	Cases removed to Hospital	
Measles and Rubella	46	48			
Whooping Cough	 9	8			
Chicken Pox	 · · · · · · ·				
Diarrhœa	 				
Ophthalmia Neonatorum	 3	3			
Puerperal Fever	 1			1	
Puerperal Pyrexia	 10			4	

4.-Child Welfare Centres.

(<i>a</i>)			er pro lunta			maint tions	ained	l by t	he Co	uncil		1 nil
(b)	A	ttend	ances	-								
		1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Infants un 1 year		2638	.2286	2091	2188	2607	2245	2249	2127	2158	1937	1340
Children years)	(1-5 	1810	1885	1974	2699	2835	1707	2370	2864	3296	2322	2426

(c) Number of children who attended at the Welfare Centre for the first time during the year and who on the date of their first attendance were—

i. Under 1 year of age		 109
ii. Between 1 and 5 years	of age	 26

(d) Number of children who attended during the year and who at the end of the year were—

i. Under 1 year of age		 85
ii. Between 1 and 5 years o	f age	 251

33'4

(e) Percentage of live-births of residents represented by (c) 1

5. Maternity Homes and Hospitals.

(a) i.	Beds available in the Royal Hants County Hospital for the treatment of abnormal	
	and isolation beds)	10. 8
ii.	Patients admitted to these beds from Winchester in 1938	17
iii.	Cost	£230
(b) i.	Number of women admitted to maternity homes or institutions for normal	
	confinements	18
ii.	Cost	£45
(c)	Total cost of institutional treatment of maternity cases	£275

(d)

The following table shows the number of confinements for which treatment in the Maternity Ward was necessary because of abnormalities—

Year	Notified Births	Admissions	Percentage
1928	406	22	5'4
1929	857	16	4'5
1930	888	24	7'8
1981	326	20	6'1
1932	336	20	6.0
1933	811	18	6'1
1934	842	24	7'0
1985	295	24	8'1
1936	849	30	8'5
1937	817	24	7.5
1988	338	17	5.0

6.—Homes and Hospitals for Sick and Ailing Children under 5 years of age.

Apart from the Public Assistance Institution the only provision consists of the Children's Ward in the Royal Hants County Hospital.

7.-Convalescent Homes.

For expectant an	d nursing m	others and young	children	nil
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8.-Homes for Mothers and Babies.

Provide	d by th	e Council	 	 nil
	-	bluntary Assoc the reception		
beer	n made		 	 nil

There are no day nurseries in the district.

9.-Home Nursing.

Number of nurses employed at the end of the year for the nursing of expectant mothers and of children under 5, maternity nursing or the nursing of puerperal fever—

i. By the Council		 8
ii. By Voluntary Associations		 2
Number of patients attended by these	nurses	 27

10.-Midwives and Midwifery Services.

<i>(a)</i>	Number of midwives practising in the area at	the	
	end of 1988-		
	i. Attached to Institutions		10
	ii. Others		2
	Number employed by the Council		2
	Number subsidised by the Council		nil
	Number employed by Voluntary Associations		2
	Number of cases in which the Council paid	or	
	contributed to the fee of a midwife		nil

(b)	Maternal deaths	and d	leath-r	ate-
	Vear		Notified	Right

Year	Notified Births	Deaths
1931	326	nil
1982	886	2
1933	320	2
1984	842	nil
1985	295	nil
1986	349	nil
1987	317	1
1938	338	1

Maternal death-rate (approx.) 0.0 per 1000 total births. Maternal death-rate 1931-38, 0.0 per 1000 total births.

(c) Ante-Natal Clinic, etc.

(0)	Alte-Natal Chille, etc.	
	1. Number of Clinics provided and maintained-	
	(a) By the Council	1
	(b) By Voluntary Associations	nil
	2. Total attendances at the Clinic by expectant	150
	mothers during the year	158
	3. (a) Number of expectant mothers who attended at the Clinic during the year for the first	
	time	57
	(b) Total who attended	65
	4. Percentage of births represented by the number $\inf S(a) \dots \dots \dots \dots \dots \dots$	16.8
	* Anony of attack and non accession	8.7
		01
(d)	Post-Natal Clinic.	
	Number of women who attended for examination	12
(e)	Corporation Midwives.	
	i. One works whole time; one gives half of her	
	time to midwifery and half to health-visiting.	
	ii. Midwives cases—	
	Delivered by midwives 58 3	
	,, ,, doctors 3 Patients sent to hospital—	
	Before labour 2	
	During labour 1	
	During puerperium nil	
	Miscarriages 2	
	66	
	iii. Visiting by midwives-	
	To own confinements 1029	
	As maternity nurse for doctors	
	cases 82	
	Ante-Natal 224	
	Post-Natal 84	
	Others 21	
	1900	
	iv. Consultations-	
	Booking visits by patients 86	
	Total visits by patients 304	

11Past	teurised and Dried Milk.	
(<i>a</i>)	Supplied to expectant and nursing mothers	40
	Children under 5	80
(b)	Liquid milk delivered at the homes free or a	5
	less than cost price in necessitous cases	65
	Dried milk distributed at Centre on similar	
	terms	21
(c)	Amounts supplied-	
	Liquid milk	1420 gallons
	Dried milk	838 pounds
(d)	Number of recipients	120
	ant Life Protection.	
	mber of persons on the Register who were	,
	receiving children for reward at the end of the	•
	year	19
Nu	mber of children on the Register-	
	At the end of 1938	18
	Who died	ni
Nu	mber of Infant Life Protection Visitors at the	,
	end of 1938 who were Health Visitors	. 8
No	legal proceedings, special sanctions or orders w during the year.	ere necessar;

MEDICAL INSPECTION OF SCHOOL CHILDREN.

EDUCATION COMMITTEE, 1937-38.

THE MAYOR: COUNCILLOR RICHARDSON. Alderman Pinsent (Chairman) Mrs. Munt

,,	Firmstone	Miss R. E. Douglas
,,	Johnson	Miss D. M. Edmeades
,,	Newton	Miss A. Williams
Council	llor Bristow	Rev. H. E. B. Hillary
,,	Crompton	Canon J. H. King
,,	Hinxman	Rev. J. H. B. Mace
,,	Irving	Rev. P. R. Wickham
,,	Jeffery	Mr. T. Atkinson
,,	Perkins	Mr. H. H. Pells
,,	Smith	Mr. J. A. Sawyer

1.—Diphtheria Immunization.

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Taylor

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Immunization to diphtheria which previously had been confined to young children coming within the scope of the work of the Maternity and Child Welfare Committee was extended in the autumn to all children attending the elementary schools.

The arrangements are similar to those which had previously been made, *i.e.* the general medical practitioners in the City are provided by the Council with the re-agent (A.P.T.) which they administer in two doses at a monthly interval.

The administration of the immunizing agent takes place in the doctors' surgeries. The first completed case was notified on 4th August, 1938, and since that date 120 school children have been treated.

Little or no propaganda advocating the procedure has been undertaken, it being considered advisable to introduce the practice by personal contact between doctor and patient.

2.-Uncleanliness (of the Hair).

In the early summer, following reports on the subject which had previously been made to the Committee, it was decided that more intensive efforts should be made by the school medical department for the purpose of securing a still higher degree of personal cleanliness than had been obtained hitherto.

The aim is to secure in every scholar a complete absence of lice, and their eggs (nits).

The following is an outline of the arrangements-

All children found to harbour lice or at all seriously infested with nits are immediately excluded from school and followed up at home and at school. Others showing only slight evidence of infestation are advised and instructed, and also followed up at school but not excluded.

In the former cases visits are paid to the homes for the purpose of discussing the subject with the parents who also are offered every possible assistance in securing a better state of things. Provision is made for a supply of steel combs by purchase or hire by the parents, and of suitable soap for use at home, and the children are encouraged to attend the school clinic where assistance is given them by the school nurses. It is disappointing, however, to find that very little advantage is taken by the parents of the advice and assistance which is offered to them.

Children at all seriously infested are excluded for definite short periods which are extended when necessary. If a child thus excluded is found by the school nurse to be not entirely free of the slightest evidence of infestation at the end of a fortnight, he or she is reported to the School Attendance Department for disciplinary action to be taken against the parents for failure to render the child fit to attend school.

8.—Defective Eyesight.

Following the receipt of the Ministry of Health's Circular of August 6th, 1937, on the "Prevention of Blindness," the subject of the treatment of defective eyesight among our school children was reviewed in a report which was subsequently approved by the Council. A new scheme of treatment was put into operation whereby all children found by the School Medical Officer to be in need of treatment are referred to a Consultant Ophthalmologist for refraction, etc. Children found by him to need spectacles are given a prescription and sent to an optician. After they receive their glasses from the optician they report to the oculist for approval. He arranges a date for re-examination. All children so treated are followed-up each term in school by the School Medical Officer for the purpose of ascertaining whether they are wearing the glasses, or whether anything needs attention.

4.—Dental Services.

Arrangements were completed during the latter part of the year whereby the part-time school dentist was appointed a whole-time officer.

His duties now include the dental treatment of all school children, of young children and expectant mothers on behalf of the Maternity and Child Welfare Committee, and of patients in the infectious diseases hospital, as and when required.

It is confidently anticipated that by re-organisation of the inspections and the increased number of sessions now available for inspections and treatment, it will be possible to examine every school child twice a year.

Unfortunately we have to report that, although parents are notified of the intended visit of the dentist to the school, only a comparatively small number of them take the trouble to attend. The dentist is therefore not able to give much advice to the parents on the subject.

This failure to attend necessitates a very large amount of clerical work in the sending of notices and the making of appointments.

The figures given for the dental work on pages 64-65 refer to children who have been treated during the year. It is important to note that although many of the children are seen on several occasions, no child is counted twice in the table.

It had been hoped to commence the practice of administering general anæsthetics to women and children in the autumn of the year, but it has not yet been found possible to agree with the local medical practitioners about the terms under which they would be prepared to administer the anæsthetics. The subject is still under consideration at the time of writing. This delay is particularly unfortunate, for the public has now been educated to the advantage, and in many cases, the necessity of general anæsthesia; an appreciable proportion of the refusals of treatment which we have had has been due to the fact that we are not yet in a position to offer this benefit.

5. - Infectious Diseases.

(a) NOTIFIABLE DISEASES.

It is a pleasure to record that we have had fewer notifications of notifiable diseases in our schools during 1938 than at any time during the last 15 years. An outstanding feature was a small outbreak of Infantile Paralysis in the City; this is referred to on page 30.

Of the three school children affected two were sent to Alton for treatment, and one was treated in the Royal Hants County Hospital and was still there at the end of the year.

(b) NON-NOTIFIABLE DISEASES.

During February cases of measles began to be reported to us; they finally numbered 223. This is fewer than we usually have in an outbreak of this kind; moreover, it was not so widely distributed as usual.

It is a common experience that epidemics of measles are frequently accompanied or followed by whooping-cough. Our experience this year was a singularly fortunate one in that five cases only of the latter disease were reported to us.

On the other hand, we had a larger number of cases of chicken pox than usual. This disease may well be said to be endemic; but, happily, its effect upon the health of school children or the community as a whole, is almost negligible. The question therefore inevitably arises as to whether there is any necessity to exclude school children who happen to be in contact with those suffering from it. I think that formerly this was necessary when small pox used to visit us occasionally. As close a supervision as possible of chicken pox was then necessary to prevent confusion with possible small pox, but in the complete absence of small pox in the country this is now much less important. I am inclined to think that the exclusion of contacts of this disease might be discontinued without any detrimental effects.

6.-Milk in Schools.

Although the arrangements for supplying milk in the schools are the same as we have had in operation in recent years the Committee at their meeting in October decided that those children whom I think require it shall in future be supplied with an additional third of a pint in the afternoon sessions. Apart from these special cases, I am of the opinion that the late afternoon is often a more suitable time for giving milk in school than the morning.

7.-Physical Training.

The following is a report which I have received from the Physical Training Officer who is employed jointly by the City and the County Council"From September 1st, the appointment of three Assistant Organisers by the five Authorities in the scheme has increased the provision of organising service in Winchester to a total of 44 days per year, which is equivalent to one fifth of the service of a full-time Organiser. The Chief Woman Organiser has retained oversight of schools concerned with infants and with girls, while the Chief Man Organiser and his Assistant (Mr. Heyworth) have arranged to share the schools in which there are boys.

Considerable progress was made during the year in the carrying out of the physical training scheme in the schools. While there was no improvement in the facilities (the Senior Schools, for example, are still without proper gymnasia), timetables in many cases were amended, in order to give adequate time for better distribution of time to the subject; specialisation of staff was a marked and desirable feature in the arrangements; attendance at teachers' classes and lecture demonstrations was good, and the value of these was evident in the spirit and improved performance seen in the lessons on subsequent visits; the adequate supply of physical training and games apparatus made a valuable contribution to enjoyment and skill.

More experimental and regular work needs to be done in regard to Dancing, and definite time should be devoted, in the Organised Games periods, to preliminary practices leading up to the major games.

Swimming continued to be a most attractive activity in the summer months, children from every Junior and Senior School having regular lessons at the two open-air swimming baths. The members of the Schools Swimming Association are to be congratulated on their keenness in organising an interesting programme of out-of-school practices in various aspects of swimming.

A number of schools arranged very successful individual school sports meetings, in which all the children were encouraged to take an active part. This is an excellent feature in the life of the school, and forms, in addition, useful preparatory training and practice for the City Sports which again were run with efficiency and enthusiasm."

There are several matters in connection with the subject of physical training which are worthy of consideration.

1. Some of the exercises performed by the children call for a considerable amount of unusual physical exertion. It appears desirable

that for this reason medical evidence should be produced at intervals about each child as to whether he or she is physically fit to undertake the training arranged.

2. In most cases also it is desirable from the physical as well as from the educational point of view that after the physical training the children should be allowed to rest, lying down for a short period.

8. The question of proper clothing which the children should wear is also important.

4. It seems to be desirable also that in all cases provision should be made for washing, or better still, for shower baths at the end of the lesson after the children have had their short period of rest.

8.-Board of Education Tables.

It might be an advantage to make a few comments on these tables.

- (a) The continued absence of ringworm is noteworthy. For many years we have found that almost invariably when a child has been found in a Winchester school to have ringworm he or she has been infected either when away from home or is a newly-arrived resident in the City.
- (b) Abnormal conditions of the nose and throat are being sensibly diminished. This I think is in great part due to the fact that quite a fairly high proportion of children receive operative treatment before or very soon after their entry into school.
- (c) Tuberculosis, either definite or suspected, is very rarely found. It is a source of satisfaction to know that from the very outset of the scheme for the provision of milk in the schools it has been our rule to supply "safe" (pasteurized) milk.
- (d) It is now a very rare occurrence for us to find among our children any who are "too deaf to be taught in a class of hearing children." (This is the basis of evaluation indicated in these tables.) This is probably because those conditions of the nose and throat which are very likely to bring about deafness now receive earlier and better treatment than formerly (v. par. B above).

9.-Other Statistics, etc.

Other tables are supplied giving information which does not appear in the Board of Education tables.

- 1. The first table (Sec. B) gives percentage findings; these on the whole appear to vary little from year to year.
- 2. Although I think it may be a subject for congratulation that the percentage of children in whom there is not the slightest evidence whatsoever of verminous conditions should be 98%, on the other hand I do feel that we ought not to relax our efforts in trying to ensure a complete absence of uncleanliness of head or body throughout the whole of the school population.
- 3. A comparison of the present year's figures with those of the last 15 years in certain specified conditions is interesting and appears in Section B, Table 2.
- 4. It is also noticeable that the figures relating to total attendances at the clinic show a general tendency towards a reduction, from 1930 onwards. This is almost entirely due to a fall in the number of children attending for the treatment of minor ailments.

I cannot produce any figures in this connection proving the correctness of my impression but I am disposed to think on evidence which is given to me by teachers and nurses alike that the conditions usually dealt with such as cuts, bruises, sprains, various skin diseases, etc., are becoming less prevalent, and that the diminution is not owing to a disinclination on the part of the parents to sending their children for treatment here; the necessity for it is, in fact, much less than it used to be.

SECTION A.

Board of Education - Medical Inspection Returns.

Table I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC ELEMENTARY SCHOOLS.

A.-ROUTINE MEDICAL INSPECTIONS.

Number of inspections in the prescribed groups-

N

Entrants		 	276
Second age group		 	313
Third age group		 	270
	Total	 	859
lumber of other routine insp	pections	 	nil

B.-OTHER INSPECTIONS.

Number of special inspections	 	 1474
Number of re-inspections	 	 2216

Total

C .- CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Medical Inspection to require treatment (excluding defects of nutrition, uncleanliness and dental diseases).

Group		For Defective Vision (ex- cluding Squint)	For all other conditions recorded in Table II. Δ.	Total
Entrants		1	28	29
Second age group		8	86	44
Third age group		8	15	28
Total (prescribed gro	ups)	17	79	96
Other routine inspect	ions	nil	nil	nil

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		Inspections Defects Requiring		Defects Requiring
DEFECT OR DISEASE	Requiring Treatment	to be kept under ob- servation but not requiring Treatment	Requiring Treatment	to be kep under ob- servation but not requiring Treatment
SEIN-Ringworm : Scalp			1	
Body				
Scabies		1	2	
Impetigo	1		62	
Other Diseases (Non-Tuberculous)	9		65	
Total (Heads 1-5)	10	1	130	•
Eve-Blepharitis	2	1	14	:
Conjunctivitis	7	1	22	1
Keratitis		1	•	
Corneal Opacities			•	•
Other Conditions (excluding Defective			0	
Vision and Squint)	ċ		2	;
Total (Heads 6-10)	9 17	3 20	38 12	1
Defective Vision (excluding Squint) Squint	11	20	2	
EAR-Defective Hearing	1	0	2	
Otitis Media	1		14	
Other Ear Diseases	3		9	
NOSE AND THROAT-Chronic Tonsillitis only	8	2	10	
Adenoids only	6	1	11	
Chronic Tonsillitis and Adenoids	5	2	8	.4
Other Conditions	3	-	48	3
ENLARGED CERVICAL GLANDS (Non-Tuberculous)				
DEFECTIVE SPEECH				
HEART AND CIRCULATION-Heart Disease : Organ	ic 1	3	3	1
Functions				
Anæmia	5		7	
Lungs-Bronchitis	2	1	9	1
Other Non-Tuberculous Diseases	1			
TUBERCULOSIS-Pulmonary : Definite				
Suspected				
Non-Pulmonary : Glands				
Bones and Joints				
Skin				
Other Forms				
Total (Heads 29-32)	•		•.	•
NERVOUS SYSTEM-Epilepsy	2	1	4	•
Chorea			1	
Other Conditions	3	1	6	2
DEFORMITIES-Rickets		•	;	
Spinal Curvature Other Forms	3 6		1	
OTHER DEFECTS AND DISEASES (excluding Defect of Nutrition, Uncleanliness	6	7	•	
and Dental Diseases)	6	5	507	363
Total number of Defects	99	54	820	38J

Table II.—A. Return of Defects found by Medical Inspection in the year ended 31st December, 1938.

B. Classification of the Nutrition of Children Inspected during the year in the Routine Age Groups.

Age-G	Froups	Number of Children inspected		cellent per cent.		per cent.	Sub-	ightly normal per cent.		Bad per cent,
Entrants		276	83	11.9	194	70.2	46	16.6	3	1.1
Second A	ge-group	313	34	10.8	206	65.8	70	22.3	3	0.9
Third Ag Other Ro	e group . outine	270	58	21.4	179	66.3	31	11.4	2	0.7
]	Inspections									
	Total	859	125	14.5	579	67.4	147	17.1	8	0.9 .

MENTAL DEFICIENCY (NOTIFICATION OF CHILDREN) REGULATIONS, 1928.

Statement of the number of children notified during the year ended 31st December, 1938, by the Local Education Authority to the Local Mental Deficiency Authority.

To	tal number of children notified				8
	Diagnosis			Boys	Girls
1.	i. Children incapable of receiving	ng benefit or	further		
	benefit from instruction in a	Special Schoo	l—		
	(a) Idiots				1
	(b) Imbeciles				
	(c) Others			2	
	ii. Children unable to be inst	tructed in a	Special		
	School without detriment to	the interests	of other		
	children-				
	(a) Moral Defectives				
	(b) Others				
2.	Feeble-minded children notified	d on leaving a	Special		
	School on or before attaining th	e age of 16			
8.	Feeble-minded children notified	under Article	e 8, i.e.,		
	"special circumstances" cases				
4.	Children who in addition to bein	ng mentally d	efective		
	were blind or deaf				
	Total			2	1
	Totter			-	

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Table III. - Return of all Exceptional Children in the Area.

BLIND CHILDREN.

A blind child is one who is too blind to be able to read the ordinary school books used by children. This definition covers some children who are totally or almost totally blind and can only be appropriately taught in a school for blind children, and others who have partial sight and can be appropriately taught in a school for partially sighted children. Only the first class are included in this section.

At Certified Schools for the Blind	 	nil
At Public Elementary Schools	 	nil
At other Institutions	 	nil
At no School or Institution	 	nil

PARTIALLY SIGHTED CHILDREN.

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

Children who are able by means of suitable glasses to read the ordinary school books used by children without fatigue or injury are not included in this Table.

At Certified Schools for the H	Blind		 1	
At Certified Schools for the Pa	artially :	ighted		
At Public Elementary Schools			 1	
At other Institutions				
At no School or Institution			 . —	2

DEAF CHILDREN.

A deaf child is defined by Section 69 of the Education Act, 1921, as one who is too deaf to be taught in a class of hearing children in an elementary school. This definition covers some children who are totally, or almost totally, deaf and can only be appropriately taught in a school for deaf children, and others who have partial hearing and can be appropriately taught in a school for partially deaf children.

At Certified Schools for the Deaf	 	- nil
At Public Elementary Schools	 	nil
At other Institutions	 	nil
At no School or Institution	 	nil

PARTIALLY DEAF CHILDREN.

Children who can appropriately be taught only in a school for the partially deaf,

At Certified Schools for the Deaf		 nil
At Certified Schools for the Part	ially Deaf	 nil
At Public Elementary Schools		 nil
At other Institutions		 nil
At no School or Institution		 nil

MENTALLY DEFECTIVE CHILDREN.

Feeble-minded Children.

Mentally Defective children are children who, not being imbecile and not being merely dull or backward, are incapable by reason of mental defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for mentally defective children.

At Certified Schools for Mental	ly Defe	tive Children	 2	A Otal
At Public Elementary Schools			 8	
At other Institutions	·		 1	
At no School or Institution		·	 2 -	- 13

EPILEPTIC CHILDREN.

Children suffering from Severe Epilepsy.

At Certified Special Schools	 		1	Total
At Public Elementary Schools	 		3	
At other Institutions	 	'		
At no School or Institution	 			- 4

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PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

I .- Children suffering from Pulmonary Tuberculosis.

(Including pleura and intra-thoracic glands.)							
At Certified Special Schools					Total		
At Public Elementary Schools	·						
At other Institutions				1			
At no School or Institution				1 .	2		

II .- Children suffering from Non-pulmonary Tuberculosis.

At Certified Special Schools	 	 2	Total
At Public Elementary Schools	 	 1	
At other Institutions	 		
At no School or Institution	 	 	3

B. DELICATE CHILDREN.

At Certified Special Schools				Total
At Gertined Special Schools	••	••	 •	
At Public Elementary Schools			 5	
At other Institutions				
At no School or Institution			 	- 5

C. CRIPPLED CHILDREN.

Chi dren (other than those disgnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, *i.e.*, children who generally speaking are unable to take part, in any complete sense, in physical exercise or games or such activities of the School curriculum as gardening or forms of handwork usually engaged in by other children.

At Certified Special Schools	 	 4
At Public Elementary Schools	 	 8
At other Institutions	 	
At no School or Institution	 	 3 15

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools	 		Total
At Public Elementary Schools	 	 9	
At other Institutions	 		
At no School or Institution	 	 4 -	13

m.

nil

nil

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CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Blindness (excluding partially sighted children). Deafness (excluding partially deaf children). Mental Defect (Feeble minded). Severe Epilepsy. Active Tuberculosis. Crippling (as defined in Section C above). Heart Disease. Combination of Defects nil ... • • . . nil At Certified Special Schools At Public Elementary Schools 1 ••

....

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At other Institutions

At no School or Institution

TABLE IV.

TREATMENT TABLES.

GROUP I.-MINOR AILMENTS (excluding Uncleanliness).

	4		lefects treated, t during the ye	
Disease or Defect		Under the Authority's Scheme	Otherwise	Total
Skin-Ringworm, Scalp	-			
i. X-Ray T	reatment	 		
ii. Other		 		
Ringworm, Body		 		
Scabies		 2		2
Impetigo		 81	1	82
Other skin diseas	es	 62	3	65
Minor Eye Defects		 87	1	88
Minor Ear Defects		 21	1	22
Miscellaneous		 611	8	619
	Total	 764	14	778

GROUP II.-DEFECTIVE VISION AND SQUINT (excluding

Minor Eye Defects treated as Minor Ailments-Group I.)

	Number of	of defects dealt	with
Disease or Defect	Under the Authority's Scheme	Otherwise	Total
Errors of Refraction (including Squint)	65	14	79
Other Defect or Disease of the Eyes			
(excluding those recorded in			
Group I.)			
	_	-	
Total	65	14	79
Number of Children for whom spectacles were			
(a) Prescribed	57	14	71
(b) Obtained	57	14	71

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

Under the Authority's	Scheme, in On	ne or nosi	prosei	
Tonsils only				2
Adenoids only				2
Tonsils and Adend	oids			10
Other defects of the	he nose and thr	oat	·	
By Private Practition		, apart fro	om the	
Authority's Schen	ne			
Tonsils only	ne 			2
				2
Tonsils only				1
Tonsils only Adenoids only	 bids			1
Tonsils only Adenoids only Tonsils and Adeno	 bids			1 1
Tonsils only Adenoids only Tonsils and Adeno	 oids he nose and thr			1
Tonsils only Adenoids only Tonsils and Adeno Other defects of th	 oids he nose and thr	 oat		1 1

GROUP IV .- ORTHOPÆDIC AND POSTURAL DEFECTS.

Number of children treated-

	Under the Authority's Scheme	Otherwise	Total number treated
Residential treatment with			
education			nil
Residential treatment without education			nil
education			nu
Non-residential treatment at an			
orthopædic clinic			nil

Table V.-DENTAL INSPECTION AND TREATMENT.

1. Number of children inspected by the Dentist-

					Rout	tine Age	Groups			
5 yrs.	6 yrs.	7 yrs.	8 yrs.	9 yrs.	10 yrs.	11 yrs.	12 yrs.	13 yrs.	14 yrs.	Total
178	216	249	290	248	291	217	242	238	178	2347
Spec	ials									332
		Tota	l (rout	ine an	d spec	ials)				2679

2.	Number found to require treatment	1840
3.	Number actually treated	986
4.	Attendances made by children for treatment	2584
5.	Half-days devoted to—Inspection 30 Treatment 321	351
6.	Fillings-Permanent teeth 976 Temporary teeth 10	986
7.	Extractions - Permanent teeth 441 Temporary teeth 1705	2146
8.	Administrations of general anæsthetics for extractions	nil
9.	Other operations-Permanent teeth 149 Temporary teeth -	149

Table VI.-UNCLEANLINESS AND VERMINOUS CONDITIONS.

1.	Average number of visits per school made d	luring th	ne year	
	by School Nurses			9
2.	Total number of examinations of children in	n the sch	iools by	
	School Nurses			8802
3.	Number of individual children found unclear	۱		188
4.	Number of individual children cleansed under	er Sectio	n 87 (2)	
	and (3) of the Education Act, 1921		a	nil
5.	Number of cases in which legal proceedings	were tak	en—	
	(a) Under the Education Act, 1921			7
	(b) Under School Attendance Bye-laws			nil

SECTION B.

				oys		irls		sexes
			Number	Per cent.	Number	Per cent.	Number	Per cent
Clothing-								
Satisfactory			425	98	426	99	851	99
Unsatisfactory			4	1	2		6	
Dirty			2				2	
Verminous								
Footwear—				100			1000	-
Satisfactory			425	98	422	99	847	98
Unsatisfactory			6	1	6	1	12	1
Cleanliness -								
Head Clean			421	98	420	98	814	98
Dirty			1	:	3		4	•
Nits		•	6	1	4	1	10	1
Vermin					1		1	
Body Clean			.24	98	428	100	852	99
Dirty		•	7	1			7	1
Fleas				•	•			
Lice		•						
Nutrition-								
Excellent			45	10	80	18	125	14
Normal			303	70	276	64	579	67
Sub-normal		•	77	17	70	16	147	17
Bad			6	1	2		8	1
Feeth-								
No decayed teeth		•	163	38	155	36	318	37
Less than 4 deca	yed teeth	•	162	38	155	36	317	37
More than 4 deci	ayed teeth		106	24	118	27	224	26
Nose and Throat-				-				
Enlarged tonsils		•	33	7	25	6	58	6
Adenoids			1	•.	1	•	2	•
Adenoids and en		sils	4	1	1	•	5	•
Enlarged neck glands	8.		9	2	11	2	20	2
External eye diseases	\$	•	6	1	2	•	8	1
Eyesight-							- 10	
Good		•	277	91	271	93	548	92
Medium			12	4	11	4	23	3
Bad .		•	16	4	8	2	24	3
Diseases of the ear			2				2	
Defective speech								
Mental condition-								
Retarded 2 years		•	1	•	1		2	
,, 3 years	8.							
Mentally deficier	it	•	2		1		3	
Deformities-								
Rickets		•						
Spinal curvature			1		1		2	
Other types					3		3	
Tuberculosis-Respin	ratory syst	em –	-					
Definite								
Suspected								
Other types								
Organic heart disease	в		3		2		5	
Anæmia .			3		3		6	
Bronchitis								
Droncintus					-			
					1		1	
Nervous disease Diseases of the skin	:	:	i	:	1	:	1 2	

Table I.-Results of Routine Medical Inspections, 1938.

appeals.				lable	e II									
	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
Total number of children examined	1159	924	932	874	924	1175	919	887	1162	904	666	898	1010	876
Clothing-Satisfactory	1122	878	868	841	884	1133	890	870	1134	893	971	887	1005	863
Unsatisfactory	37	46	33	31	40	42	29	17	28	11	28	11	5	13
Percentage	2	4	**		+	4	60	-	01	61	60	-	1	-
Footwear-Satisfactory	1135	896	916	862	906	1161	606	881	1150	901	982	895	1006	866
Unsatisfactory	24	28	16	10	18	14	10	9	12	~	17		ŧ	10
Percentage	2	50	1	1	67	-	-	:	1	1	67	1	:	1
Cleanliness (Head)-Clean	1063	865	871	823	844	1105	866	846	1110	885	968	880	992	855
Dirty, nits, vermin	96	59	61	48	80	70	53	41	51	19	23	18	18	21
Percentage	7	9	9	10	œ	9	5	4	4	5	60	5	. 2	\$
Teeth-No decayed teeth	305	302	308	320	304	287	376	391	543	453	415	446	489	347
Percentage	26	32	33	36	33	24	40	44	47	50	40	50	49	39
Less than 4 decayed teeth	588	377	379	327	375	407	353	325	432	318	323	273	304	312
Percentage	50	40	40	37	41	35	38	36	37	35	30	30	30	35
More than 4 decayed teeth	266	245	245	225	245	481	190	171	187	133	265	179	217	215
Percentage	24	26	26	25	26	41	20	19	16	14	26	20	21	24
Eyesight-Number of children examined	788	615	635	532	893	743	588	607	LLL	595	665	594	728	602
Good	698	521	557	467	848	639	537	557	713	548	573	531	642	543
Percentage	88	82	87	87	94	86	91	16	16	92	85	89	88	90
Medium	45	65	47	45	27	19	37	26	29	25	62	26	41	15
Percentage	5	10	1	80	00	8	9	4	14	÷	80	4	9	2
Bad	45	29	31	20	18	43	14	24	35	22	30	37	45	44
Percentage	5	4	10	80	2	9	67	4	10	3	Ŧ	1	9	1

SECTION B. Table II.

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SECTION C.

Infectious Diseases among Elementary School Children, 1938.

									-							
Notifiable Disease-	1923	1924	1925	1926	1927	1928	1929	1930	1881	1932	1935	1934	1935	1936	1937	1938
Scarlet Fever	16	16	48	22	23	14	8	18	12	26	28	65	48	42 .	31	··· 6
	17	12	:	5	1	c7	6	22	67	ŝ	4	:	9	:	8	63
Enteric Fevers	:	;		1	1	:	50	:	:	:	1	:	:	1	:	1
Infantile Paralysis	:	:	:	. :	1	:	:	: :	:	:	:	1	:	:	:	8
Cerebro-Spinal Fever	:	:			1		:	:	:	:		:	:	:.	:	
	not	not registered	tered	c1	10	9	60	07	9	6	9	61	Ŧ	¢1	:	1
Respiratory Tuberculosis	6	4	33	:	67	:	:	67	:	:	1	1	:	1	:	•
Non-Respiratory "	10	5	:	67	9	4	67	67	8	50	1	:0	1	:	1	:
Non-notifiable Diseases-																
	14	853	$\widetilde{\mathcal{X}}$	35	167	10	1	492	:	-	26	251	:	239	67	223
Whooping Cough	165	48 108	108	173	23	22	32	42	98	90	167	XQ.	52	x	65	ñ
Chicken Pox	16	97 135 118	113	93	õ 0	148	78	90	67	43	28	125	011	28	14	178
	not	not registered	tered	127	220	:	6	·	9		102	162	-	1	-	21
	:	10	517	17	5	22	Ŧ	8	357	28	13	-	1	33	1	23
and the second sec												and the second se	And a statement of the statement of the	and the owner of the owner own	-	

SECTION D.

SCHOOL NURSING WORK. 1.-Visits to Schools by School Nurses. i. Routine medical inspections 49 ii. Routine dental inspections 30 iii. Cleanliness inspections-(a) Special terminal inspections— Visits to schools 53 Number of children inspected 6663 (b) Ordinary routine inspections— Visits to schools ... 53 Number of children inspected 2139 iv. In connection with infectious disease-Visits to schools 51 Number of children inspected 1138 v. Other visits 20 2. Visits to Homes of School Children. i. Following up defects 184 ii. Concerning infectious disease, sore throats, etc. 645 ... iii. Concerning uncleanliness 85

iv. Absentees (suspected infectious disease) 88 v. Other visits 20 vi. Dental cases 1478

SECTION E.

SCHOOL CLINICS.

1.	Number of children treated at th	e Minor A	Ailment Clinic		
	Minor Surgical conditions				868
	Minor Medical conditions				861
2.	Total attendances at-				
	Minor Ailment Clinic				4164
	Inspection Clinic				708
	Eye (Refraction) Clinic				815
	Dental Clinic		*		2581
3.	Medical certification-				
	For school attendance urposes				1941
	Employment out of school h	ours			58
	Exemption from school attendance (over 14 years)				86

Year	Minor Ailment Clinic for Treatment	Inspection Clinic for advice Certificates, &c.	Eye (Refraction) Clinic	Dental Clinic for advice and Treatment	Total Attend ances
1926	6045	717	195	695	7652
1927	4896	766	168	768	6098
1928	5302	656	110	696	6764
1929	6131	626	111	1488	8356
1930	7718	689	233	1287	9927
1931	6684	882	232	2035	9888
1982	6495	519	276	1968	9258
1988	5595	627	261	1779	8262
1934	5707	627	884	1755	8533
985	5296	526	345	1805	7972
1936	5728	572	210	1656	8160
987	5504	917	259	1605	8285
1938	4164	708	815	2584	7771
Averag attendan 926-38 (i	ces 5751	687	234	1548	8214

4. Total Attendances made by Children-

