

[Report 1912] / Medical Officer of Health, Worcestershire / County of Worcester County Council.

Contributors

Worcestershire (England). County Council.

Publication/Creation

1912

Persistent URL

<https://wellcomecollection.org/works/azz67t5s>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

Unable to display this page

Unable to display this page

Unable to display this page

Unable to display this page

INDEX.

	PAGE
Area and Population of County - Table I. - - -	6
Births and Birth-rates - - - Table III. - - -	9-11
Burial Grounds - - - - - - - - -	87
Byelaws - - - - - - - - -	88-89
Canal Boats - - - - - - - - -	86-87
Cancer - - - - - Tables XIV. and XV. - - -	40-43
Cerebro-Spinal Fever - - - - - - - - -	28
Closure of Schools - - - - - - - - -	85
Common Lodging Houses - - - - - - - - -	87
County Laboratory - - - - - - - - -	93-95
County Sanitary Staff - - - - - - - - -	I
Dairies, Cowsheds - - - - - - - - -	74-77
Deaths and Death-rates - - - Tables II. and IV. - - -	7, 14-15
Diarrhœa and Enteritis - - - Table X. - - -	29-30
Diphtheria and Membranous Croup - Table VIII. - - -	25-27
Domiciliary Treatment of Infectious Diseases (Nurses for)-	46-47
Drainage - - - - - - - - -	64-68
Duties of Sanitary Officials - - - - - - - - -	5-6
Excrement Disposal - - - - - - - - -	71-73
Factories and Workshops - - - - - - - - -	84-85
Fish - - - - - - - - -	79-82
Food and Drugs - - - - - - - - -	93-94
Gipsy Encampments - - - - - - - - -	83
Health Missioners - - - - - - - - -	32-38
Hop-pickers - - - - - - - - -	82-83
Hospitals, Isolation - - - - - - - - -	43-47
Housing, Town Planning &c. Act, 1909 (Tabular Statement)	47-59
Increased Duties of Sanitary Officials - - - - -	5-6
Infantile Mortality - - - Tables XI. and XII.-	30-38
Isolation Hospitals - - - - - - - - -	43-47
Laboratory - - - - - - - - -	93-95
Lodging Houses, Common - - - - - - - - -	87
Measles - - - - - Table VI. - - -	21-22
Meat - - - - - - - - -	79-82
Midwives Act - - - - - - - - -	89-92
Notifiable Diseases - - - Table V.- - -	18, 19
Notification of Births Act 1907 - - - - -	11-13
Offensive Trades - - - - - - - - -	86
Ophthalmia Neonatorum - - - - - - - - -	28-29
Pea-pickers - - - - - - - - -	83
Phthisis, Tuberculosis - - - Table XIII. - - -	38-40
Poliomyelitis, Acute - - - - - - - - -	28
Population of County & Districts - Table II. - - -	7
Puerperal Fever - - - - - - - - -	91
Pulmonary Tuberculosis - - - Table XIII. - - -	38-40
River Pollution - - - - - - - - -	70-71
Salaries of Medical Officers of Health and Sanitary Inspectors	1-5

	PAGE
Sanitary Inspectors' Reports - See Table XVI. at end of Report.	
Scarlatina - - - - - Table VII. - - -	23—25
Scavenging - - - - - - - - - - -	73—74
Schools - - - - - - - - - - -	85
School Closure - - - - - - - - - -	85
Sewage Disposal - - - - - - - - - -	68—70
Sewerage - - - - - - - - - - -	64—68
Slaughter-houses - - - - - - - - -	77—78
Smallpox - - - - - - - - - - -	20
Smallpox Hospital - - - - - - - - -	45
Tuberculosis, Phthisis - - - - - Table XIII. - - -	38—40
Typhoid Fever - - - - - Table IX. - - -	27—28
Vaccination - - - - - - - - - - -	20—21
Vital Statistics - - - - - Table II. - - -	6—7
Water Supply - - - - - - - - - - -	59—64
Whooping Cough - - - - - - - - - -	22—23
Zymotic Diseases - - - - - Table V. - - -	16, 18, 19

TABLES OF STATISTICAL DETAILS.

Urban—

	PAGES	I.	and II.
Bewdley - - - - -	-	I.	and II.
Bromsgrove - - - - -	-	I.	and II.
" (North) - - - - -	-	I.	II.
Droitwich - - - - -	-	III.	IV.
Evesham - - - - -	-	III.	IV.
Kidderminster - - - - -	-	III.	IV.
Lye and Wollescote - - - - -	-	V.	VI.
Malvern - - - - -	-	V.	VI.
Oldbury - - - - -	-	V.	VI.
Redditch - - - - -	-	VII.	VIII.
Stourbridge - - - - -	-	VII.	VIII.
Stourport - - - - -	-	VII.	VIII.

Rural—

Bromsgrove - - - - -	-	IX.	and X.
Droitwich - - - - -	-	IX.	X.
Evesham - - - - -	-	IX.	X.
Feckenham - - - - -	-	XI.	XII.
Halesowen - - - - -	-	XI.	XII.
Kidderminster - - - - -	-	XI.	XII.
Martley - - - - -	-	XIII.	XIV.
Newent - - - - -	-	XIII.	XIV.
Pershore - - - - -	-	XIII.	XIV.
Rock - - - - -	-	XV.	XVI.
Shipston-on-Stour - - - - -	-	XV.	XVI.
Stow-on-the-Wold - - - - -	-	XV.	XVI.
Tenbury - - - - -	-	XVII.	XVIII.
Tewkesbury - - - - -	-	XVII.	XVIII.
Upton-on-Severn - - - - -	-	XVII.	XVIII.
Winchcombe - - - - -	-	XIX.	XIX.



TO THE
*Public Health and Housing Committee of
the Worcestershire County Council.*

Mr. Chairman and Gentlemen,

1. I have the honour to present my Twenty-fourth "Digest" of the 28 Annual Reports of the Medical Officers of Health and 29 Sanitary Inspectors in the Administrative County, which refers to the year 1912. I am glad to say many of the Sanitary Inspectors now present important written reports, in addition to the Tabular Statements they were asked to compile; in consequence of which I am able to present their views upon many local Sanitary questions and doings, in their own words.

County Sanitary Staff.

2. There were no changes in the personnel of the County Sanitary Staff during the year.

3. As I am repeatedly asked for a comparative statement of the salaries paid to the Medical Officers of Health and Sanitary Inspectors in the County, I beg to submit the following particulars:—

Salaries of Medical Officers of Health and Sanitary Inspectors.

Urban Districts.	Area in Statute Acres.	Population (1911).	Medical Officer of Health.	Sanitary Inspector.
Bewdley Borough	2,105	2,745	£30	£ s. d.
				70 0 0 as Sanitary Inspector.
				25 0 0 as Borough Surveyor.
				5 0 0 Shop Act.
				15 0 0 Waterworks Manager.
				£115 0 0
Bromsgrove Urban	1,068	8,926	£45, rising annually to £50.	110 0 0
				70 0 0 Town Surveyor.
				£180 0 0

Salaries of Medical Officers of Health &c.

Urban Districts.	Area in Statute Acres.	Population (1911).	Medical Officer of Health.	Sanitary Inspector.
Bromsgrove North Urban	10,592	7,210	£40.	<p>£ s. d. 40 0 0 Inspector of Nuisances 60 0 0 as Surveyor.</p> <hr/> <p>£100 0 0</p>
Droitwich Borough	1,856	4,146	£25.	<p>100 0 0 as Sanitary Inspector. 135 0 0 other Salaries.</p> <hr/> <p>£235 0 0</p>
Evesham Borough	2,265	8,340	C.M.O. £15 by special arrangement with County Council.	<p>70 0 0 as Sanitary Inspector. 180 0 0 other Salaries.</p> <hr/> <p>£250 0 0</p>
Kidderminster Borough	2,504	27,544	Late M.O.H. £100 Hospital £40 (£1 is. for outside cases). Temp. M.O.H. £50.	<p>220 0 0 20 0 0 Refuse Removal Supt.</p> <hr/> <p>£240 0 0</p>
Lye and Wollescote Urban	784	11,684	£60.	<p>60 0 0 20 0 0 for Supt. night soil work</p> <hr/> <p>£80 0 0</p>
Malvern Urban	4,774	16,513	£100.	<p>220 0 0</p>
Oldbury Urban	3,527	32,232	£145.	<p>150 0 0 25 0 0 Canal Boats. 10 0 0 Cabs. 10 0 0 Housing Act.</p> <hr/> <p>£195 0 0</p>
Redditch Urban	1,023	15,463	£70.	<p>175 0 0</p>
Stourbridge Urban	1,920	17,312	£80.	<p>180 0 0 2 10 0 Petroleum Inspector.</p> <hr/> <p>182 10 0</p>
Stourport Urban	1,340	4,432	£40.	<p>60 0 0</p>

Rural Districts.	Area in Statute Acres.	Population (1911).	Medical Officer of Health.	Sanitary Inspector.
Bromsgrove Rural (Northern Division)	47,047	15,007	£80.	<p>£ s. d.</p> <p>90 0 0 Inspector of Nuisances.</p> <p>70 0 0 Highway Surveyor.</p> <p>20 0 0 Building Surveyor.</p> <hr/> <p>£180 0 0</p>
Bromsgrove Rural (Southern Division)				<p>60 0 0 Inspector of Nuisances.</p> <p>70 0 0 Highway Surveyor.</p> <p>12 10 0 Building Surveyor.</p> <p>7 10 0 Inspector of Canal Boats.</p> <hr/> <p>£150 0 0</p>
Droitwich Rural	53,079	12,975	£82.	<p>135 0 0 (Canal Boats & Housing Inspector inclusive).</p> <p>10 0 0 Building Surveyor.</p> <p>5 0 0 Factory Inspector.</p> <hr/> <p>£150 0 0</p>
Evesham Rural	28,088	9,095	C.M.O. £30 4s. od. by special arrangement with County Council.	<p>140 0 0 Sanitary Inspector.</p> <p>15 0 0 Building Surveyor.</p> <p>60 0 0 Sanitary Inspector. } Peabworth 10 0 0 Surveyor. } R.D. (Glouces.)</p> <hr/> <p>£225 0 0</p>
Feckenham Rural	15,203	5,456	C.M.O. £16 6s. od. by special arrangement with County Council.	<p>67 10 0 Sanitary Inspector.</p> <p>2 10 0 Supt. of Sewerage works & Building Surveyor.</p> <p>9 0 0 Water Inspector and Collector.</p> <p>1 0 0 Sanitary Surveyor.</p> <hr/> <p>£80 0 0</p>
Halesowen Rural	5,485	25,804	£80.	<p>103 0 0 (Proposed increase to £118</p> <p>2 0 0 (including Canal Boats).</p> <p>Supt. of Scavenging &c.</p> <hr/> <p>£105 0 0</p>
Kidderminster Rural	31,641	7,282	£80.	<p>105 0 0 Sanitary Inspector.</p> <p>5 0 0 Canal Boats.</p> <hr/> <p>£110 0 0</p>

Rural Districts.	Area in Statute Acres.	Population (1911).	Medical Officer of Health.	Sanitary Inspector.
Martley Rural	59,170	13,063	£100.	<p>£ s. d. 120 0 0 Sanitary Inspector (proposed increase to £140) 10 0 0 Building Surveyor.</p> <hr/> £130 0 0
Newent Rural	5,305 (Worc. area)	1,192	£5 (Wor'shire) £50 (whole Dist.)	<p>58 0 0 5 0 0 Water Inspector } (whole Dist.) 2 0 0 Scavenging</p>
Pershore Rural	53,728	13,235	C.M.O. £50 by special arrangement with County Council.	<p>100 0 0 as Sanitary Inspector 10 0 0 as Building Inspector 5 0 0 as Petroleum Inspector 5 0 0 for disinfecting, and preparing plans. 10 0 0 Supt. scavenging.</p> <hr/> £130 0 0
Rock Rural	13,314	2,193	£11.	<p>20 0 0 40 0 0 District Road Surveyor</p> <hr/> 60 0 0
Shipston-on-Stour Rural	18,466	4,711	£30. £10 as Medical Supt. of Joint Isolation Hosp. £40.	<p>58 0 0 Inspector of Nuisances 17 10 0 Highway Surveyor. 20 0 0 Water Insp. & Collector 5 0 0 Manager Blockley Outfall Works.</p> <hr/> £100 10 0
Stow-on-the-Wold Rural (a)	44,492	7,114	£60	<p>78 0 0 Sanitary Inspector. 1 0 0 Supt. of Sewers. 1 0 0 Coll. of Water Rents. 10 0 0 Inspector Housing Act 82 0 0 Highway Surveyor.</p> <hr/> £172 0 0

Rural Districts.	Area in Statute Acres.	Population (1911).	Medical Officer of Health.	Sanitary Inspector.																								
Tenbury Rural—	23,434	4,727	£24.	<table><tr><td>£</td><td>s.</td><td>d.</td><td></td></tr><tr><td>70</td><td>0</td><td>0</td><td>Sanitary Inspector.</td></tr><tr><td>80</td><td>0</td><td>0</td><td>Surveyor of Highways.</td></tr><tr><td>25</td><td>0</td><td>0</td><td>Waterworks Inspector.</td></tr><tr><td colspan="4"><hr/></td></tr><tr><td>£175</td><td>0</td><td>0</td><td></td></tr></table>	£	s.	d.		70	0	0	Sanitary Inspector.	80	0	0	Surveyor of Highways.	25	0	0	Waterworks Inspector.	<hr/>				£175	0	0	
£	s.	d.																										
70	0	0	Sanitary Inspector.																									
80	0	0	Surveyor of Highways.																									
25	0	0	Waterworks Inspector.																									
<hr/>																												
£175	0	0																										
Tewkesbury Rural (a)	38,385	7,391	£55.	<table><tr><td>70</td><td>0</td><td>0</td><td>Sanitary Inspector.</td></tr><tr><td>25</td><td>0</td><td>0</td><td>Inspector, Housing Act.</td></tr><tr><td colspan="4"><hr/></td></tr><tr><td>£95</td><td>0</td><td>0</td><td></td></tr></table>	70	0	0	Sanitary Inspector.	25	0	0	Inspector, Housing Act.	<hr/>				£95	0	0									
70	0	0	Sanitary Inspector.																									
25	0	0	Inspector, Housing Act.																									
<hr/>																												
£95	0	0																										
Upton-on-Severn Rural	50,035	14,596	£100.	<table><tr><td>112</td><td>0</td><td>0</td><td>(includ. Canal Boats).</td></tr><tr><td>40</td><td>0</td><td>0</td><td>Building Surveyor.</td></tr><tr><td>10</td><td>0</td><td>0</td><td>Petroleum Inspector.</td></tr><tr><td colspan="4"><hr/></td></tr><tr><td>£162</td><td>0</td><td>0</td><td></td></tr></table>	112	0	0	(includ. Canal Boats).	40	0	0	Building Surveyor.	10	0	0	Petroleum Inspector.	<hr/>				£162	0	0					
112	0	0	(includ. Canal Boats).																									
40	0	0	Building Surveyor.																									
10	0	0	Petroleum Inspector.																									
<hr/>																												
£162	0	0																										
Winchcombe Rural (a)	57,089	9,647	£5 .	<table><tr><td>110</td><td>0</td><td>0</td><td>Sanitary Inspector</td></tr><tr><td>15</td><td>0</td><td>0</td><td>Building Surveyor.</td></tr><tr><td colspan="4"><hr/></td></tr><tr><td>£125</td><td>0</td><td>0</td><td></td></tr></table>	110	0	0	Sanitary Inspector	15	0	0	Building Surveyor.	<hr/>				£125	0	0									
110	0	0	Sanitary Inspector																									
15	0	0	Building Surveyor.																									
<hr/>																												
£125	0	0																										

(a) Includes Gloucestershire Parishes.

4. With the exception of Dr. White (Medical Officer of Health to the Rock and Tenbury District Councils) and myself, all the District Medical Officers of Health in the County are engaged in general practice.

5. Dr. White is a whole-time Medical Officer for a combination of Sanitary Districts; most of which are in Shropshire.

6. In considering the salaries paid to the Worcestershire Sanitary Staff, it should be borne in mind that recent legislation has greatly increased their work.

7. Onerous duties have been imposed by the numerous "Orders" of the Local Government Board, the Housing Acts, etc. In addition to which the Medical Officers are obliged to send to the Board and the County Council weekly returns, which formerly were not required.

8. The following "decision" of the Local Government Board bears upon this subject, viz. :—"In the opinion of the Local

“ Government Board, the Inspector of Nuisances should almost
 “ invariably be the officer to act under the direction and super-
 “ vision of the Medical Officer of Health, for the purposes of the
 “ Housing (Inspection of Districts) Regulations, 1910, and for
 “ this purpose the Board are prepared to sanction a reasonable
 “ increase of the salary of an Inspector of Nuisances appointed
 “ under these regulations.”

Area and Population.

9. The area and population of the County are given in Table I.

TABLE I.

Districts.	Area in Statute areas.	Population.			
		1901.	1911 [‡] .	Increase 1901-1911.	Estimated by M.O.H. in 1912 [‡] .
Urban (12) -	33,758	139,895	156,547	16,652	158,106
Rural (16) -	417,863	126,439	132,080	5,641	132,473
Total (28) -	451,621	266,334	288,627	22,293	290,579

[‡] The Parishes newly added to the Borough of Kidderminster are included in the population of the Urban Districts.

10. The area and population of each district are given in Table II.

11. The boundary of Kidderminster Borough was extended in November to include Franche, Foley Park, Sutton Common, and Broadwaters. Dr. Addenbrooke (Kidderminster Rural) states :—

“ The enlargement of the borough boundaries will be an immense benefit
 “ as regards the sanitary administration of the added areas, especially
 “ those of Sutton Common and Foley Park, which have been for years
 “ so difficult to deal with satisfactorily.”

12. Dr. Brett Young (Halesowen Rural) says :—

“ During the year 220 acres have been added to the parish of Illey, an
 “ area formerly in the Urban District of King's Norton and North-
 “ field. . . . There was an estimated addition of 25 (persons)
 “ to Illey ” by this transference.

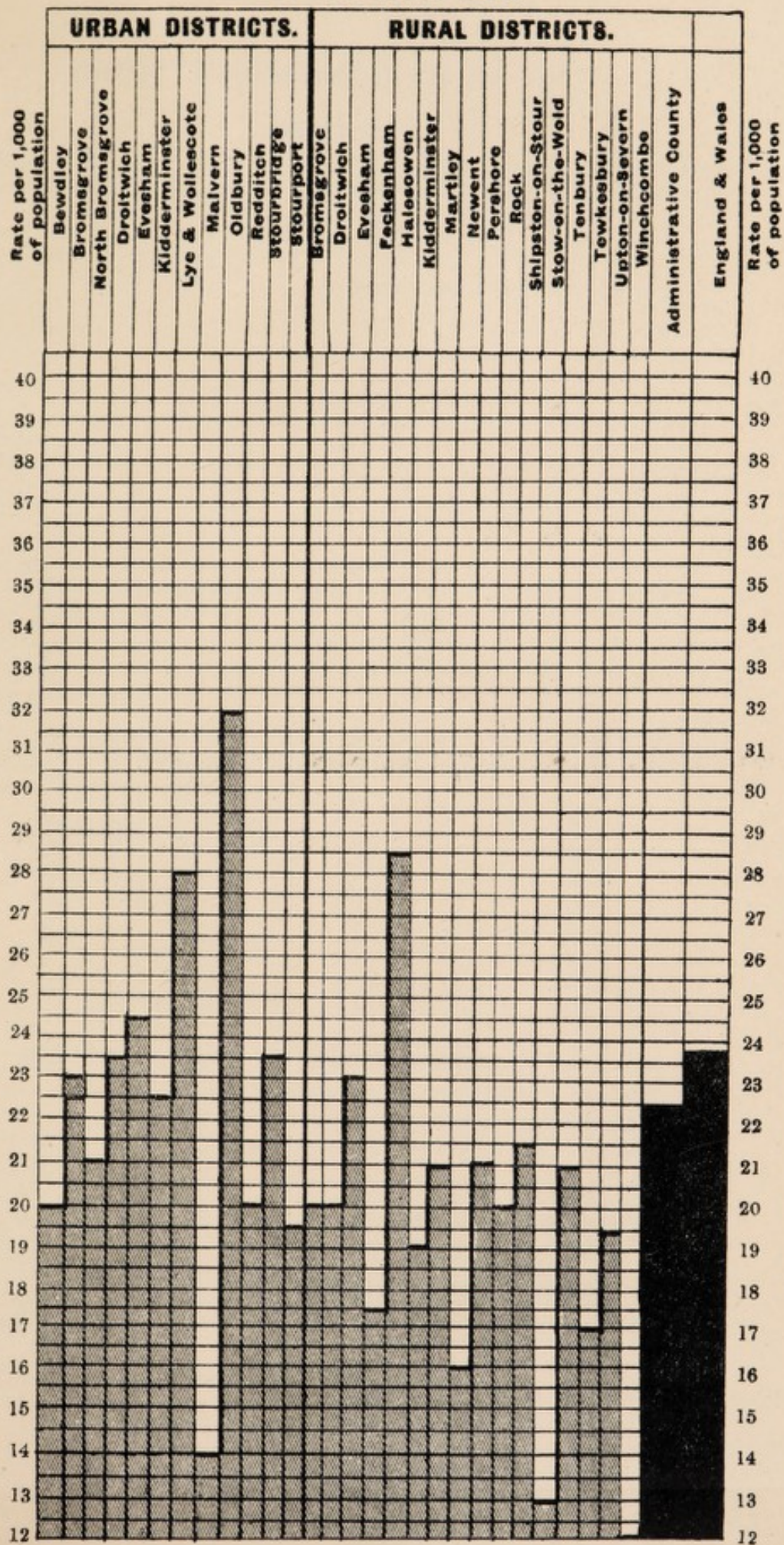
13. Dr. Coaker (Bromsgrove Rural) states that :—

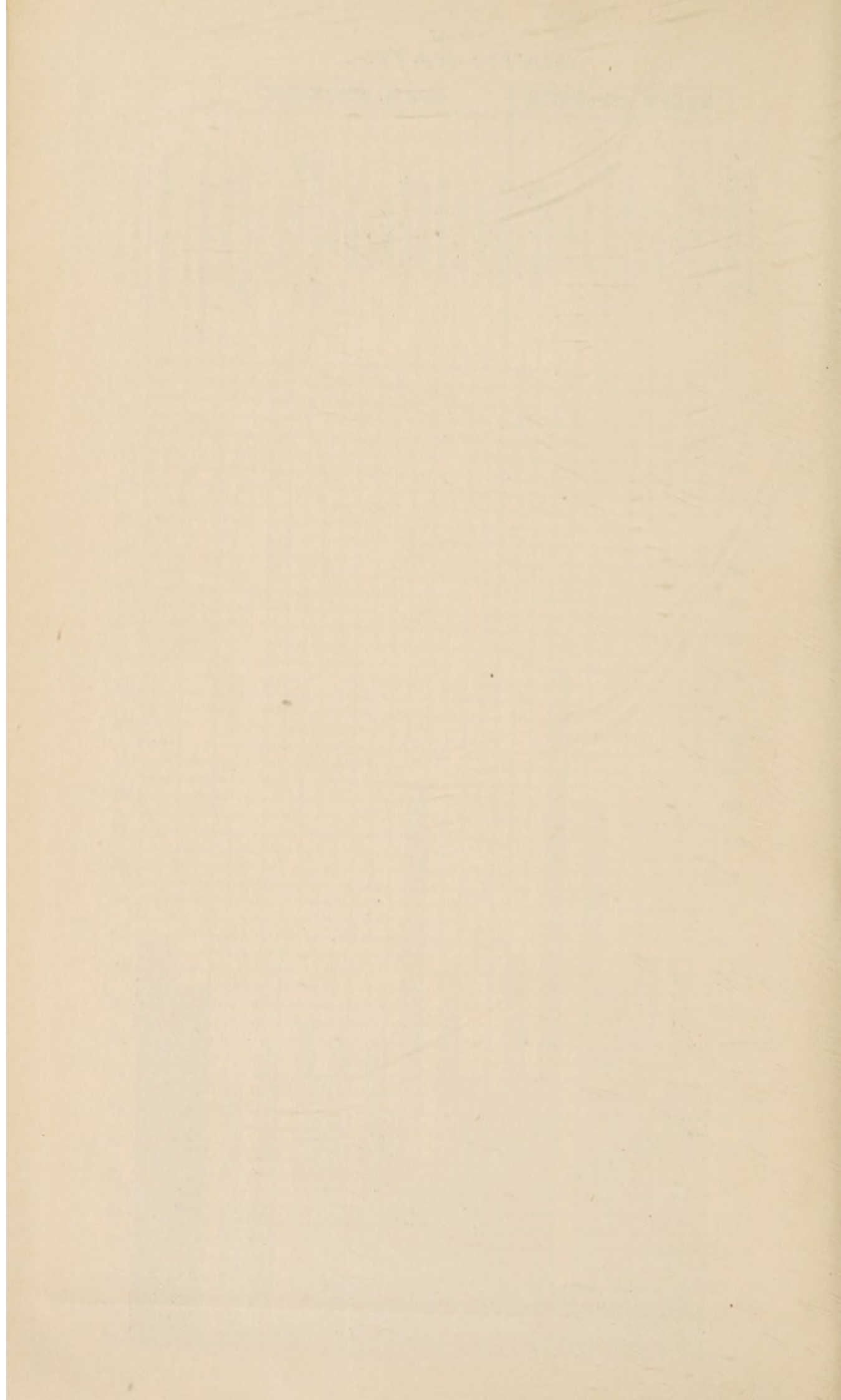
“ In consequence of the carrying out of the Greater Birmingham Scheme
 “ the administration of the parishes of Beoley and Wythall, and the
 “ addition of Rednal Village to the parish of Coston Hackett, are
 “ now included in this district.”

14. Table II. gives the Vital Statistics for 1912 in each Sanitary District in the County.

1912.
BIRTH-RATES.

No. 1.





Births.

Table III. and Diagram No. 1 compare the County Birth-rates with those of England and Wales during 1903-1912 inclusive.

TABLE III.

Districts.	Rates per 1,000 of population.									
	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Urban Districts (12) -	23.1	24.0	23.6	24.3	25.4	25.4	26.9	26.12	27.8	28.6
Rural Districts (16) -	21.6	21.1	22.5	23.5	24.2	25.8	25.7	25.4	27.3	27.05
Administrative County -	22.4	22.7	23.2	23.9	24.9	25.6	26.4	25.8	27.3	27.9
England and Wales -	23.8	24.4	24.8	25.6	26.5	26.3	27.0	27.2	27.9	28.4

The County Birth-rate (22.4) continues to fall, and last year was 5.5 per 1,000 below the rate for 1903. As is well known, falling birth-rates are general; the Registrar-General, referring to the 1912 birth-rate for England and Wales, says it "is 0.6 per 1,000 below the rate for 1911, and lower than the rate of any year on record."

On reference to Table II. it will be seen that the birth-rates of 20 of the 28 Sanitary Districts are below that of the County (22.4). The 8 exceptions were:

Bromsgrove Urban	-	-	-	-	23.0
Droitwich Borough	-	-	-	-	23.3
Evesham Borough	-	-	-	-	24.4
Lye Urban	-	-	-	-	27.8
Oldbury Urban	-	-	-	-	31.7
Stourbridge Urban	-	-	-	-	23.2
Evesham Rural	-	-	-	-	22.6
Halesowen Rural	-	-	-	-	28.5

Notification of Births Act, 1907.

The Local Government Board sent the County Council, on 25th July, 1913, a copy of a circular letter inviting them "if they have not already adopted (this) Act (to) consider the question "at an early date . . ."

This Act, however, has been in force in the Administrative County of Worcester since August 1st, 1909, so that the County Council have anticipated this suggestion of the Board. As I have reported more than once, it is of great value, and the cost of administration (less than £100 per annum) is small.

The following Table shews the numbers of births notified

in the Administrative County between the 1st January and the 31st December, 1912, viz. :—

By Medical Men as to Infants.		By Midwives as to Infants.		By other persons as to Infants.		Total.	
Living.	Dead.	Living.	Dead.	Living.	Dead.	Living.	Dead.
1,386	79	4,803	184	426	6	6,615	269

About 60 per cent. of these births were attended by Midwives.

The following is a statement of births notified in each Sanitary District in the Administrative County during the past year, viz. :—

SANITARY DISTRICTS.						Number of Births notified to County Medical Officer in 1912.
<i>Urban.</i>	Bewdley Borough	-	-	-	-	52
	Bromsgrove	-	-	-	-	242
	Bromsgrove North	-	-	-	-	164
	Droitwich Borough	-	-	-	-	90
	Evesham Borough	-	-	-	-	217
	Kidderminster Borough	-	-	-	-	595
	Lye and Wollescote	-	-	-	-	346
	Malvern	-	-	-	-	248
	Oldbury	-	-	-	-	1105
	Redditch	-	-	-	-	354
	Stourbridge	-	-	-	-	443
	Stourport	-	-	-	-	101
<i>Rural.</i>	Bromsgrove	-	-	-	-	258
	Droitwich	-	-	-	-	258
	Evesham	-	-	-	-	205
	Feckenham	-	-	-	-	102
	Halesowen	-	-	-	-	765
	Kidderminster	-	-	-	-	190
	Martley	-	-	-	-	286
	Newent	-	-	-	-	18
	Pershore	-	-	-	-	305
	Rock	-	-	-	-	57
	Shipston-on-Stour	-	-	-	-	94
	Stow-on-Wold	-	-	-	-	5
	Tenbury	-	-	-	-	96
	Tewkesbury	-	-	-	-	36
	Upton-on-Severn	-	-	-	-	249
	Winchcombe	-	-	-	-	3
Total						6884

The discrepancy between the numbers of Births "notified" to me and those made by Sub-district Registrars to Medical Officers of Health, is apparently due to the fact that the notifications I received included 269 "Still-births," whereas the Sub-District Registrar's returns do not include such births.

The Administrative arrangements are the same as last year, namely :—

The County Council (as required by the Act) supply Doctors and Midwives with postcards and ungummed stamped envelopes.

The arrangement with the Registrars of Deaths, by which I send them every six weeks a list of the births notified to me, and they forward to me a return of the Births they register which are not entered on my list, has been continued. This has enabled me to communicate with Doctors or Midwives who failed to make notifications.

The Cards, as heretofore, have been sent daily to your five Health Missioners, as well as to the one appointed by the Kidderminster Corporation, and have been an important factor in fighting excessive Infantile Mortality. Each Missioner copies the details into her visiting book, and then returns the Cards to me; consequently, she is able to call at the homes of the children shortly after the births occur, and obtain information on the following points :—

Feeding and Clothing.
Use of Soothing Syrups.
Life Assurance.
Sanitary Surroundings.
The Mother's Work.
General Observations.

In the districts where no Health Missioner resides, the practice of sending leaflets on Infant Feeding and Inflammation of the Eyes in Infants (*Ophthalmia Neonatorum*) to each Mother attended by Midwives has been continued.

The following is a list of the Still Births reported during the past seven years. For the sake of comparison, the King's Norton and Northfield and Yardley figures for 1906 to 1911 are not included.

	1906.	1907.	1908.	1909.	1910.	1911.	1912.
Notified by Midwives	58	64	68	92	139	150	191
Notified by Doctors and Parents	—	—	—	40	142	129	85
Total	58	64	68	132	281	279	276

Deaths.

Table IV. compares the County Net Death-rates with those of England and Wales during the years 1903-12 inclusive, and the Map and Diagram (No. 2) other comparisons.

TABLE IV.

Districts.	Rates per 1,000 of population.									
	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Urban Districts (12) -	12.6	14.8	11.5	14.4	12.5	13.6	14.1	13.2	14.8	13.5
Rural Districts (16) -	12.9	13.2	11.4	13.0	12.6	13.1	13.6	13.2	13.5	13.1
Administrative County -	12.7	14.0	11.5	13.8	12.6	13.4	13.9	13.2	14.3	13.3
England and Wales -	13.3	14.6	13.4	14.5	14.7	15.0	15.4	15.2	16.2	15.4

The County Death-rate for 1912 (12.7), with the exception of those for 1910 (11.5), and 1908 (12.6), is the lowest I have ever recorded.

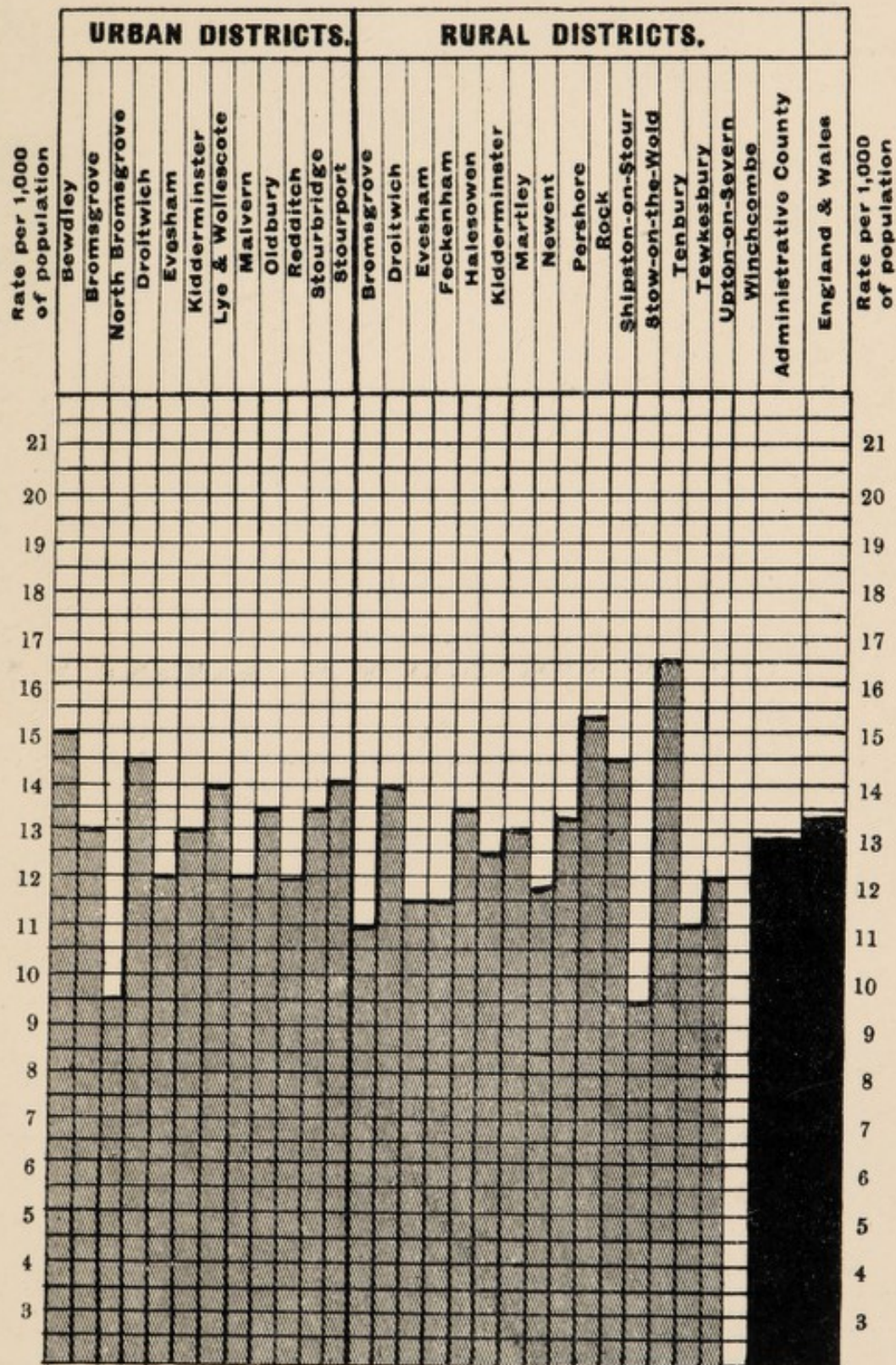
The corresponding Death-rate for England and Wales (13.3) was 1.3 per 1,000 below the rate in 1911, and lower than the rate of any other year on record.

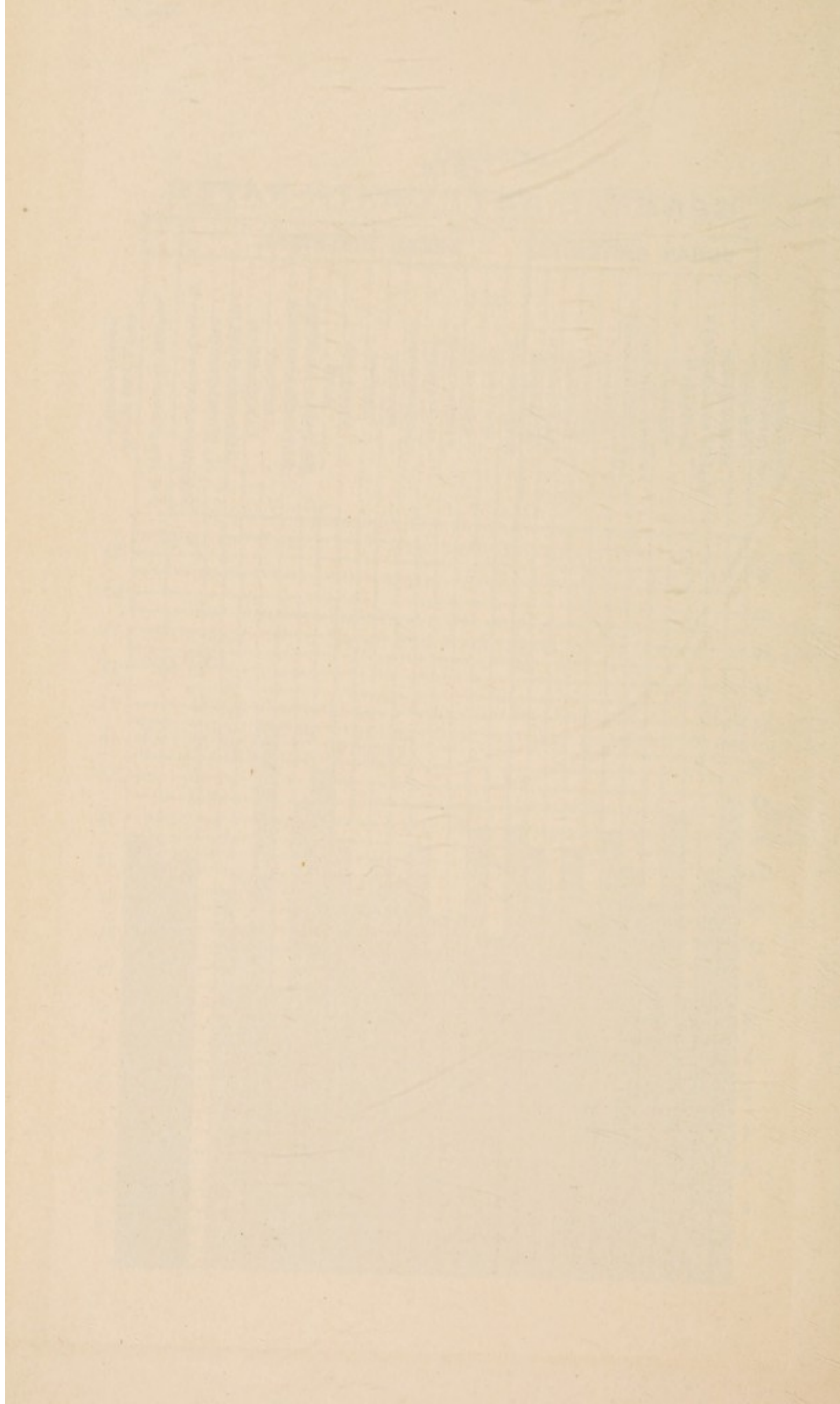
Table II. shows that in 1912 the Death-rates of the under-mentioned districts exceeded that of the Administrative County (12.7), viz :—

Bewdley Borough -	-	-	-	-	14.9
Bromsgrove Urban -	-	-	-	-	13.0
Droitwich Borough -	-	-	-	-	14.4
Kidderminster Borough -	-	-	-	-	12.8
Lye and Wollescote Urban -	-	-	-	-	13.8
Oldbury Urban -	-	-	-	-	13.6
Stourbridge Urban -	-	-	-	-	13.5
Stourport Urban -	-	-	-	-	14.2
Droitwich Rural -	-	-	-	-	14.1
Halesowen Rural -	-	-	-	-	13.3
Martley Rural -	-	-	-	-	13.0
Pershore Rural -	-	-	-	-	13.2
Rock Rural -	-	-	-	-	15.3
Shipston-on-Stour Rural -	-	-	-	-	14.4
Tenbury Rural -	-	-	-	-	16.5

None of these Death-rates are very high.

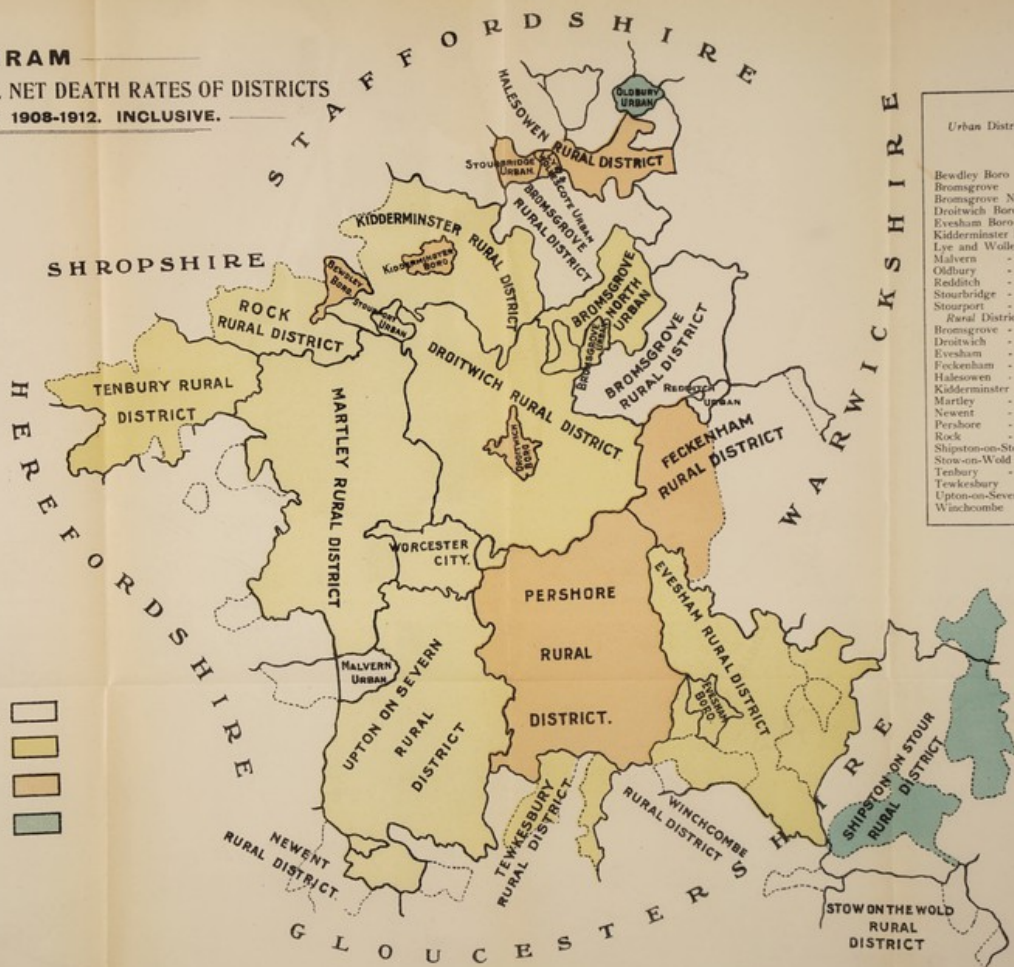
1912.
GENERAL NETT DEATH-RATES.





DIAGRAM

SHOWING THE AVERAGE GENERAL NET DEATH RATES OF DISTRICTS
FOR THE FIVE YEARS 1908-1912. INCLUSIVE.



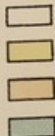
References.

Death Rates ... under 12 per 1,000

" " 12 and under 14 " "

" " 14 " 16 " "

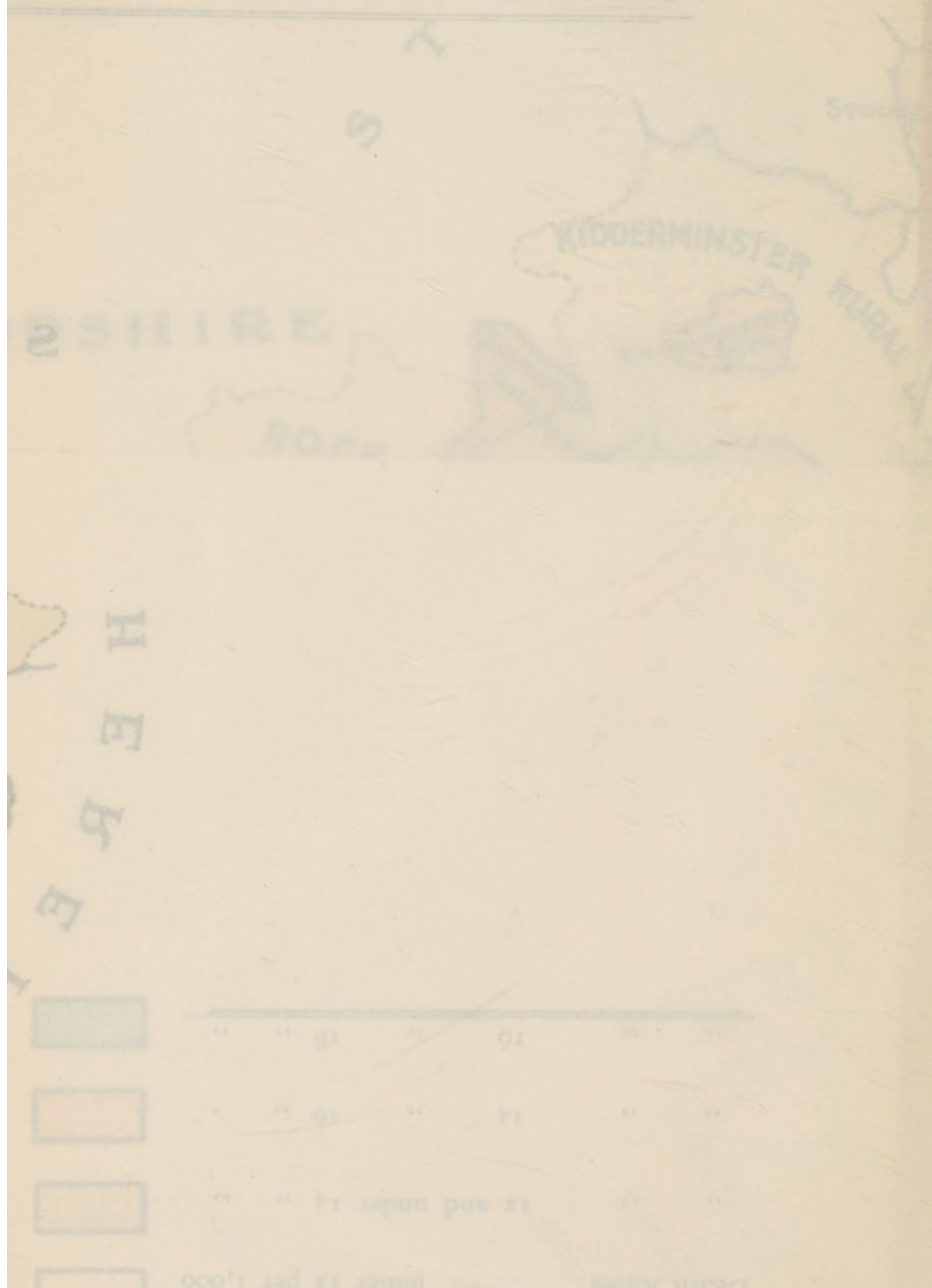
" " 16 " 18 " "



Urban Districts.		Average for 5 Years, 1908-1912	per 1,000
Bewdley Boro.	-	"	14.3
Bromsgrove	-	"	13.9
Bromsgrove North	-	"	12.4
Droitwich Boro.	-	"	15.9
Evesham Boro.	-	"	12.5
Kidderminster Boro.	-	"	14.8
Lye and Wollescote	-	"	15.3
Malvern	-	"	11.7
Oldbury	-	"	10.0
Redditch	-	"	11.8
Stourbridge	-	"	14.1
Stourport	-	"	12.3
Rural Districts.		"	"
Bromsgrove	-	"	11.5
Droitwich	-	"	13.2
Evesham	-	"	12.1
Fockesham	-	"	14.0
Halesowen	-	"	14.4
Kidderminster	-	"	13.1
Martley	-	"	13.4
Newent	-	"	11.3
Pershore	-	"	14.6
Rock	-	"	13.9
Shipston-on-Stour	-	"	16.3
Stow-on-Wold	-	"	9.9
Tenbury	-	"	13.4
Tewkesbury	-	"	12.2
Upton-on-Severn	-	"	12.9
Winchcombe	-	"	8.0

DIAGRAM

SHOWING THE AVERAGE GENERAL NET D
FOR THE FIVE YEARS 1898-1902



Bewdley Borough (Dr. U. W. N. Miles).

- "In my last annual report I tried to account for the undoubted fact that
 "the Death-rate of Bewdley is generally rather high, but there was
 "one important reason which I omitted to state, and that is the
 "number of people who retire from business in the large towns, and
 "come to live in Bewdley when well past the prime of life, who
 "cannot, in the ordinary course of nature, live more than a comparatively short time."

Bromsgrove North Urban (Dr. Kidd).

- "The general Death-rate this year has at last reached the figure which
 "I have always maintained should be the average one for a district
 "like this, namely, below 10.0 per 1,000, and the Infantile and
 "Zymotic Death-rates are equally satisfactory; in this we share, I
 "believe, the experience of the country generally during 1912."

Droitwich Borough (Dr. P. A. Roden).

- "In 1911 the nett Death-rate was 15.1 and the average nett Death-rate of
 "the past six years was 14.18, thus showing distinct improvement,
 "which is remarkable on account of the very heavy rainfall throughout
 "the year, and the great want of sunshine."

Lye and Wollescote Urban (Dr. H. C. Darby).

- "The Death-rate it will be seen shows a very considerable decrease, and is
 "one of the lowest—if not the lowest—we have had."

Oldbury Urban (Dr. G. B. Buttery).

- "This nett Death-rate—13.6—is the lowest annual Death-rate ever known
 "in Oldbury."

Redditch Urban (Dr. J. Stevenson).

- "Unquestionably this (11.0) is a satisfactory figure, just about equal to the
 "average rate of the past five years (1907-11), 11.7 per 1,000. . . .
 "The outstanding feature is the large number of Cancer deaths, far beyond
 "anything we have ever registered before in one year."

Rock Rural (Dr. A. E. White).

- "This rate (15.3) must be regarded as high for such a district, and the
 "notable features of the death returns are five deaths from Phthisis and
 "seven from Respiratory Diseases.
 "As I have previously pointed out, the aspect of the district exposed in the
 "winter to the east wind makes this latter group of diseases a special
 "prominent cause of death in your district.
 "Ten deaths were in persons over seventy and two in persons over eighty
 "years of age."

Tenbury Rural (Dr. A. E. White).

- "The unusually high Death-rate seems to have been due to the prevalence
 "of Whooping Cough, other infectious disease over a long period, and
 "to what is common to other Rural Districts this year, an exceptional
 "mortality amongst aged persons."

Zymotic Diseases.*Notification.*

The "Public Health (Tuberculosis) Regulations, 1911," came into operation on January 1st, 1912, by which it became the duty of every Medical Practitioner (with certain exceptions) to "notify" every case of Pulmonary Tuberculosis occurring in the course of either his public or of his private practice. The "Public Health (Tuberculosis) Regulations, 1912," which came into operation on February 1st, 1913, apply to the compulsory notification of Non-Pulmonary as well as to Pulmonary Tuberculosis. More than half the deaths from Non-Pulmonary Tuberculosis are of children under five years of age, and it is probable that a much higher percentage of the total number of persons suffering from Non-Pulmonary Tuberculosis are children of this age. It is hoped that notification of these cases will facilitate the investigations of sources of infection, and assist in securing improvement in the conditions under which the children live. Notification is to be made on the strength of evidence other than that derived solely from tuberculin tests.

On August 15th, 1912, the Local Government Board issued "The Public Health (Cerebro-Spinal Fever and Acute Poliomyelitis) Regulations, 1912," which require general notification of these diseases, from September 1st, 1912.

"Ophthalmia Neonatorum" (Inflammation of the Eyes in Infants under 10 days old) is also "notifiable" in 22 of the 28 Sanitary Districts in Worcestershire. So the Medical Officers of Health now receive early intimation of outbreaks of most of the important infectious diseases. Measles and Whooping Cough are not notified, and *under the existing order of things*, I cannot say that they ought to be.

Table V. shows the Death-rates of the respective zymotic diseases and the total number of notifiable cases and deaths, and Hospital Cases and Hospital Deaths in each Sanitary District during 1912.

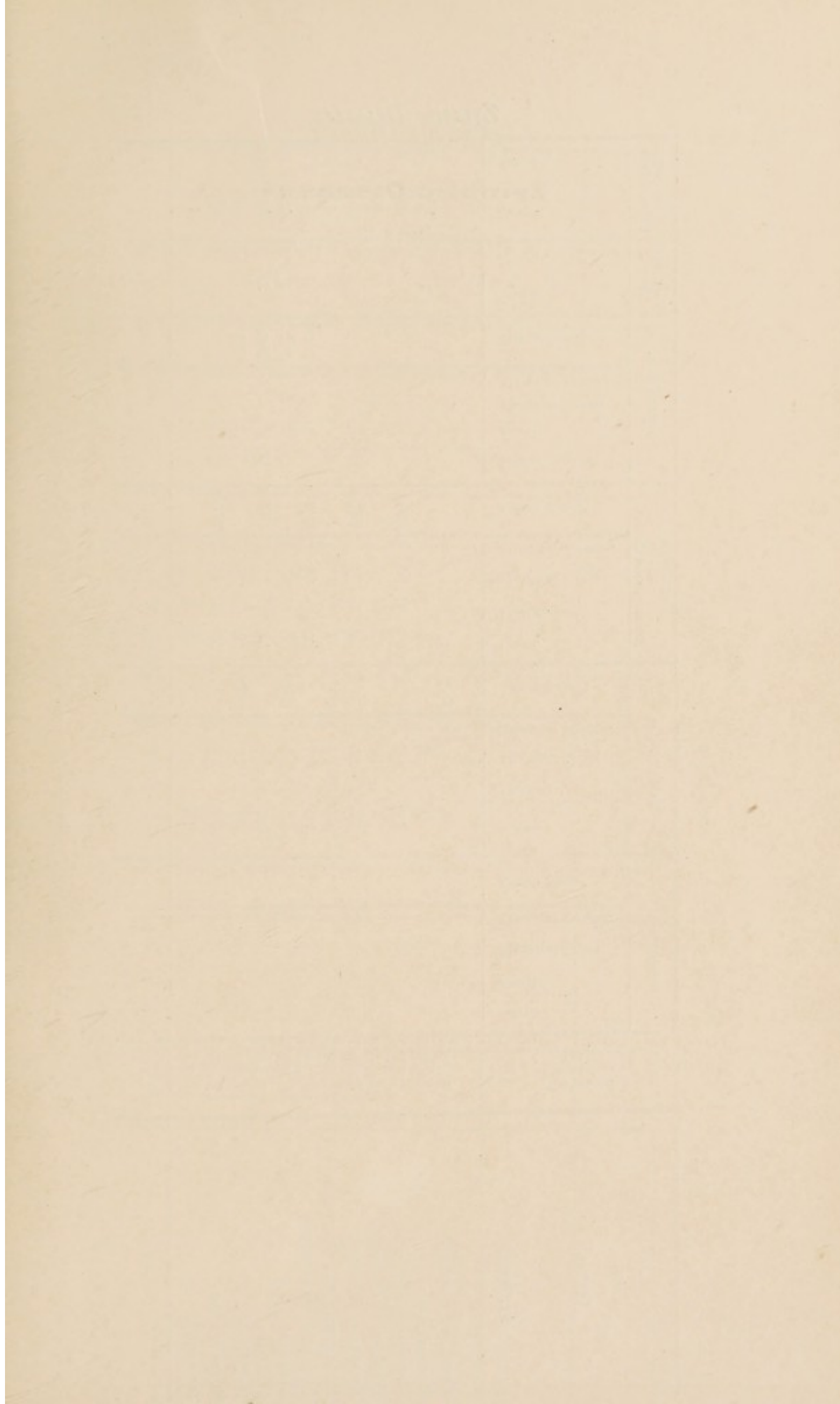


TABLE V.

District.	Estimated Population 1912.	Smallpox.				Scarlet Fever.				Diphtheria and Membranous Croup.				Enteric Fever.				Puerperal Fever.		Pulmonary Tuberculosis.	
		Cases.	Deaths.	Hospital Cases.	Hospital Deaths.	Death Rate.*	Cases.	Deaths.	Hospital Cases.	Hospital Deaths.	Death Rate.*	Cases.	Deaths.	Hospital Cases.	Hospital Deaths.	Death Rate.*	Cases.	Deaths.	Cases.	Deaths.	
<i>Urban.</i>																					
Bewdley Borough	2,745						14	1		1	0.3	1						1	1	9	3
Bromsgrove	8,950						4		4											23	8
Bromsgrove North	7,300						13	1	5		0.1	13	3							20	6
Droitwich Borough	4,146						1		1			1								12	1
Evesham Borough	8,340						68		66		0.1	2	1							24	11
Kidderminster Borough	27,623						143	1	11	1	0.03	10	2							43	15
Lye and Wollescote	11,796						10		7			8								32	8
Malvern	16,513						10	1	9		0.06	24	1					2	2	74	9
Oldbury	33,164						64		35		0.06	6						2		80	30
Redditch	15,700						29	1	27		0.06	10	1							47	14
Stourbridge	17,407						27		23			5								63	12
Stourport	4,422						16					5								12	3
Totals	158,106	Nil	-	-	-	-	399	5	288	2	0.03	84	8	37	3	0.05	15	6	7	439	120

Rural.

Bromsgrove	-	15,200	13	1	7	0.06	36	5	20	0.3	1	1					37	10
Droitwich	-	12,975	23		6		9	5				1					51	11
Evesham	-	9,095	65		61		3	3			1	1					19	3
Feckenham	-	5,456	8		7		7	6									17	7
Halesowen	-	26,000	50		33		11	3	3	0.1	4	1		0.03			56	16
Kidderminster	-	7,282	44		32		8				1	1		0.1			32	6
Martley	-	13,063	55		5		6	1	2	0.07							37	13
Newent (part)	-	1,192	19	1	19	1					2						27	1
Pershore	-	13,235	7		1												7	14
Rock	-	2,210	1		1		37	1		0.2							4	2
Shipston-on-Stour	-	4,712																
Stow-on-the-Wold (part)	-	311																
Tenbury	-	4,713	5		7		7				1						16	2
Tewkesbury (part)	-	2,317	7		7												4	
Upton on-Severn	-	14,596	29	2	29		33	4	24	0.2	4						97	8
Winchcombe (part)	-	116																
Totals	-	132,473	326	4	207	1	157	14	63	0.1	14	2	2	0.01	4	1	404	93

* Per 1,000 of Population.

Smallpox.

The County was entirely free from Smallpox during 1912. Fortunately no case has occurred in Worcestershire since 1907, although minor outbreaks are occurring in some parts of England.

Vaccination.

Many Medical Officers of Health refer to the neglect of Vaccination going on in England, and which sooner or later will be attended by disastrous consequences. The President of the Local Government Board in the House of Commons recently (July, 1913) gave the following figures as to the total number of exemption certificates or declarations of conscientious objection to Vaccination received by Vaccination Officers during the years 1907-12 inclusive, and the percentage of such objections to the total births registered during those years :—

Year.	Exemption.	Percentage of total births registered.
1907	57,675	6'3
1908	162,799	17'3
1909	190,689	20'9
1910	230,947	25'7
1911	248,483	28'2
1912	275,929	31'6

Bewdley Borough (Dr. U. W. N. Miles).

"I regret to have to report that so-called 'compulsory Vaccination' is absolutely done away with in the borough. About half the parents now take advantage of the 'Conscientious Objector' clause of the Vaccination Act, and these tender consciences are, unfortunately, mostly to be found among the most ignorant and dirty of the parents, whose children are most in need of the protection of Vaccination."

Bromsgrove North Urban (Dr. C. Kidd).

"The continued absence of Smallpox in spite of the neglect of Vaccination is leading many people to think that the disease has practically been stamped out by improved sanitation, and certainly the infection of Smallpox is rarely met with nowadays, and can only be imported from where it may exist, but it is equally certain that recent Vaccination protects the individual from developing Smallpox, and that no disease is more fatal to an unprotected child than Smallpox is. Modern Vaccination, too, is so mild and harmless in its immediate effect even to the youngest infant that it is greatly to be regretted that popular prejudice against it has been aggravated by compulsion. When compulsion is practically abandoned the good sense of the public may prove more to be relied upon."

Droitwich Borough (Dr. P. A. Roden).

"There is an increasing tendency towards obtaining exemption from

"Vaccination amongst parents; happily up to the present no ill result
"has ensued, but the danger to which the children would be exposed,
"should an epidemic of Smallpox break out, cannot be too strongly
"pointed out."

Kidderminster Borough (Dr. Hodgson Moore).

"I regret to see the growing tendency of the public for obtaining Exemption
"Certificates for their children.

"Nothing in medicine is more certain than the fact that "Vaccination
"does protect more or less from Small Pox."

Malvern Urban (Dr. C. R. P. Mitchell).

"No case of Smallpox was notified in the district.

"The number of 'conscientious objectors' increases year by year, doubt-
"less because as the years go on more people become aware how
"simple a matter it is to obtain exemption, and soon, if there is no
"change in the law, the country will be ripe for an epidemic on a
"great scale.

"The latest returns shew that in 1900 4·3 per cent. of children born were
"exempted, while in 1910 the number was more than six times as
"great, i.e., 26 per cent. I cannot help thinking that it would be a
"good thing for the country if some of the interest shewn in other
"matters relating to the public health, should be turned to the subject
"of this repulsive disease. It is to be regretted that Smallpox should
"have now any but an academic interest more than a century after
"the introduction of vaccination.

"Owing to the occurrence of 2 cases of Smallpox in a district near at
"hand, I recommended that Chicken Pox should be made notifiable
"for 3 months. These diseases are somewhat similar in the vesicular
"stage, especially if the case be one of the mild varioloid type of
"Smallpox, when the patient may be able to walk about with the
"vesicles well developed."

Stourbridge Urban (Dr. H. W. Freer).

"A considerable number of persons obtained exemption certificates, and
"many take their infants to a neighbouring district to have only one
"mark put on. In the one case the protection against Smallpox is nil,
"and in the other very imperfect."

Bromsgrove Rural (Dr. F. W. J. Coaker).

"Smallpox.—Vaccination exemptions continue to be obtained in increasing
"numbers, with the result that about half of the infants are not vac-
"cinated. Undoubtedly a rude awakening will be experienced in the
"future. Re-vaccination is practically a dead letter."

Measles.

Table VI. shows the number of Deaths and Death-rates of the
County during each of the years 1903-1912 inclusive, and com-
pares the latter with the corresponding rates of England and
Wales.

TABLE VI.

		1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Administrative County	No. of Deaths -	21	119	15	227	23	176	28	88	100	78
	Rate per 1,000 of population	0·07	0·4	0·03	1·5	0·05	0·40	0·07	0·22	0·26	0·20
England & Wales	Rate per 1,000 of population	0·35	0·36	0·23	0·35	0·22	0·36	0·27	0·32	0·36	0·27

Measles appears to have been less prevalent last year in the County as a whole, than in either of the nine previous years, except 1910. I say "appears to have been less prevalent" because it is not a notifiable disease. I can only judge of its prevalence by the numbers of deaths and school closures. Outbreaks of this disease are explosive, and usually occur every two or three years, and when they occur are apt occasionally to be very fatal.

Seven of the 21 deaths occurred in Stourbridge Urban District: 6 being children between the ages of one and five years, and 1 between 5 and 15 years.

Twenty-two schools were closed in 1912, as compared with 68 in 1911: 6 of these were in Martley Rural District, and the remainder were scattered through 12 other districts.

Kidderminster Borough (Dr. H. Moore).

"Sixty-six cases have come officially to our knowledge: two deaths. This number represents but a small proportion of the cases that have occurred."

Whooping Cough.

The disease caused 94 deaths in 1912, as compared with 49 in 1911 and 103 in 1910. Of these 94 deaths, 15 occurred in Kidderminster Borough, 12 in Redditch, 17 in Oldbury Urban, 13 in Halesowen, and 8 in Kidderminster Rural, Districts.

Outbreaks of Whooping Cough necessitated the closures of 20 schools.

Kidderminster Borough (Dr. H. Moore).

"This disease was very prevalent during the middle of the year. I regret the Health Authorities are in such a helpless position with regard to this disease (in my opinion, the most distressing of all infectious diseases, with a higher mortality than Scarlet Fever) owing to the fact that it is not notifiable."

Lye Urban (Dr. Darby).

"Parents are beginning to realize the danger of infection in (Whooping Cough and Measles) and their serious nature, and sufferers are being more carefully kept on home premises."

Oldbury Urban (Dr. Buttery).

"These (17) deaths amongst infants could in many cases be avoided if
"ordinary care was exercised by the parents."

Redditch Urban (Dr. Stevenson).

Whooping Cough was epidemic all the year, and caused 12 deaths."

Stourport Urban (Dr. Robinson).

"Whooping Cough was epidemic in the district in the early months of the
"year."

Halesowen Rural (Dr. Brett Young).

"Following on the Measles epidemic of 1911 there was an epidemic of
"Whooping Cough which caused 13 deaths. Of these nine occurred at
"Halesowen."

Scarlatina.

Table VII. shows the number of cases, and deaths, and Hospital cases, and Hospital deaths, from Scarlatina, and the Death-rates per 1,000 of population in the Urban and Rural Districts collectively, and Administrative County, during each of the years 1903-1912 inclusive; also the corresponding rates of England and Wales.

TABLE VII.

Districts.		1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Urban (12)	Death Rate*	0.03	0.11	0.06	0.16	.1	0.17	0.05	0.04	0.12	0.28
	Cases -	399	716	994	1376	1016	1059	584	548	1123	1875
	Deaths -	5	17	15	39	26	39	12	9	26	60
	Hospital Cases -	288	500	624	993	734	646	434	392	869	1422
	" Deaths -	2	4	2	9	13	9	1	7	14	44
Rural (16)	Death Rate*	0.03	0.07	0.06	0.06	.08	0.08	0.03	0.06	0.05	0.12
	Cases -	326	488	624	704	751	638	599	628	735	848
	Deaths -	4	10	13	13	15	15	6	11	9	21
	Hospital Cases -	207	291	242	383	422	392	379	407	454	543
	" Deaths -	1	2	4	11	7	4	2	1	6	11
Administrative County (28)	Death Rate*	0.03	0.09	0.06	0.12	.09	0.13	0.04	0.05	0.09	0.21
	Cases -	725	1204	1618	2080	1767	1707	1183	1176	1858	2723
	Deaths -	9	27	28	52	41	54	18	20	35	81
	Hospital Cases -	495	791	866	1376	1156	1038	813	799	1323	1965
	" Deaths -	3	6	6	20	20	13	3	8	20	55
England and Wales	Death Rate*	0.05	0.05	0.06	0.09	0.08	0.09	0.10	0.11	0.11	0.12

* Per 1,000 of population.

The County was unusually free from Scarlatina in 1912, only 725 cases having been notified, and 9 deaths registered. The death-rate was also low (0.03 per 1,000).

The "Scarlatina wave" which began to rise in 1906 reached its highest in 1909, began to fall in 1910, and has continued to do so.

Table V. shows the local incidence of the disease.

The utility of Isolation Hospitals so far as Scarlatina is concerned was discussed at some length in my last "Digest" (pp. 68 to 73).

Bewdley Borough (Dr. U. W. N. Miles).

- "During the year 14 cases of Scarlet Fever were notified, all of which were
"satisfactorily isolated at home.
- "I am more convinced than ever of the advantages of keeping these cases
"of Scarlet Fever at home where possible."

Evesham Borough (County Medical Officer).

- "Sixty-six of these 68 cases were removed to Sanatorium, and the other
"two were isolated at home.
- "Sixty-four of those attacked were under 15 years of age, i.e., most of the
"cases were children of school-going age. The disease cropped up
"throughout the year, and that it was not epidemic at any time. The
"type was very mild, and many cases very slight. There was no
"special incidence in any part of the Borough.
- "The local prevalence of Scarlatina was in no way associated with milk
"supplies, but entirely due to mild cases, some of which, owing to their
"mildness, were not recognised until their attacks were well advanced
"and had conveyed infection. This method of Scarlatina dissemina-
"tion is now (as I have reported to you numbers of times) frequent, and
"has become so, since Scarlatina has assumed the mild form it so often
"takes.
- "Although 66 of the 68 persons attacked were removed to your Isolation
"Hospital, the disease was merely kept within bounds, and not stamped
"out."

Kidderminster Borough (Dr. Moore).

- "The epidemic of Scarlet Fever has been marked by the mildness of the
"attack, and in some cases the disease was not discovered until the
"peeling stage, thus the prevention of the spread of the disease was
"rendered more difficult. In one case reported the child was found by
"the nurse at school with the rash out."

Oldbury Urban (Dr. Buttery).

- "Scarlet Fever has once again been more or less prevalent during the
"greater part of the year.
- "As in the previous year, the greatest number of the cases was in Warley
"district or wards, and can almost certainly be attributed to its rela-
"tion with Birmingham, where the disease has been so rife during
"the past year."

Evesham Rural (County Medical Officer).

Forty-six of the 65 cases in the district occurred at Bretforton, and 36 of them were notified during March, April, and May. The remainder were 'dropping cases' at the end of the year. The outbreak was entirely due to personal infection. One parent was fined for wilful exposure in a public highway of his child while suffering from the disease."

Halesowen Rural (Dr. Young).

"In a large majority of the (50) cases it was possible to trace a connection between the infection and school attendance. Every care was used to exclude contacts with infected cases, and children who came from infected houses until the necessary quarantine had been observed and disinfection carried out.

"I am more than ever confirmed in the opinion that mild unrecognised, and therefore unnotified cases, are responsible for the spread of the disease."

Kidderminster Rural (Dr. Addenbrooke).

"Forty-four cases of Scarlet Fever have been notified—nine from the Foreign, thirteen from the Wolverley division, sixteen from the Chaddesley division, and six from the Wribbenhall and Arley division. Thirty-two of these cases were removed to the Borough Infectious Hospital. The disease has been of a mild type, and no death has occurred from this cause among residents in the district, but we have had a good deal of trouble with slight cases, which have not been recognised by the parents in the early stage and so have caused renewed outbreaks.

"Scarlet Fever gave rise to considerable trouble in the parish of Stone, where most of the cases occurred."

Martley Rural (Dr. Dykes).

"No serious outbreak of Scarlet Fever occurred, the cases being mostly isolated ones.

"The cases in Shrawley were really the result of last year's epidemic, and the cases in Astley and Areley Kings also came from that parish, being neighbouring ones.

"The total number 55, being very considerably below last year's number."

Upton-on-Severn Rural (Dr. Cowley).

"The disease (29 cases) was distributed about the district and never assumed an epidemic character. The type of the disease was mild, and the fatal cases died from complications."

Diphtheria.

Table VIII. shows the number of cases, and deaths, and Hospital cases, and Hospital deaths, from Diphtheria and Membranous Croup, and the Death-rate per 1,000 of the population in the Urban and Rural Districts collectively, and administrative County, during the years 1903-1912 inclusive, and also the corresponding rate for England and Wales.

TABLE VIII.

Districts.		1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Urban (12)	Death Rate*	0.05	0.07	0.12	0.16	.1	0.09	0.05	0.07	0.05	.07
	Cases -	84	119	248	200	192	144	115	99	94	141
	Deaths -	8	12	28	39	32	22	11	15	12	15
	Hospital Cases -	37	53	118	97	82	44	45	47	25	33
	„ Deaths -	3	-	-	2	10	-	-	1	-	1
Rural (16)	Death Rate*	0.1	0.1	0.10	0.16	.1	0.11	0.13	0.08	0.14	0.12
	Cases -	157	192	270	280	319	327	266	173	146	163
	Deaths -	14	16	20	30	23	20	23	14	25	21
	Hospital Cases -	63	101	44	80	53	30	59	3	13	13
	„ Deaths -	-	-	-	1	-	-	2	-	2	2
Administrative County (28)	Death Rate*	0.07	0.09	0.11	.16	.13	0.10	0.08	0.07	0.09	0.09
	Cases -	241	311	518	480	511	471	381	272	240	304
	Deaths -	22	28	48	69	55	42	34	29	37	36
	Hospital Cases -	100	154	162	177	135	74	104	50	38	46
	„ Deaths -	3	-	-	3	10	-	2	1	2	3
England and Wales -	Death Rate*	0.11	0.13	0.12	0.14	0.15	0.16	0.17	0.16	0.17	0.18

* Per 1,000 of population.

Fewer deaths (22) occurred in 1912 than in either of the years in the decade; and with the exception of 1904, when 240 cases were notified, there were also fewer cases (241) reported.

In 1904, bacteriological investigations had not come into vogue to anything like the extent they have at present, and consequently many more mild cases are now recognised than formerly was the case.

Bromsgrove North Urban (Dr. Kidd).

“Diphtheria caused the only real epidemic during the year, a short and sharp outbreak of a virulent type occurring during a fortnight in March in Barnt Green Village, three cases in one house being on our side of the boundary, and of these two died within a few hours of admission to the Isolation Hospital. A good deal of public panic was caused by these deaths and some were inclined to blame the sewerage works which were then in full progress. My own opinion is that the sewerage works were not to blame, for similar outbreaks occurred at the same time in two other districts served by the Isolation Hospital, where no sewerage was being carried out, and were of an equally fatal type. One of these was also in this district, three cases occurring early in March at Bournheath, of whom one died five hours after admission to hospital. The type of disease in these three different localities was indential.

“A mild case occurred in June at Apesdale, another in August at Rubery, and in November five other cases occurred at Bournheath of a milder type, two being treated at home. These Bournheath cases were all connected with Fairfield School, where some mild “carrier” case or

"cases probably remained unrecognised. It is more and more agreed
 "now that Diphtheria infection is almost always transmitted from one
 "case to another by more or less direct contact, as in the case of
 "Scarlet Fever, and that it is not often directly caused by such means
 "as sewer gas."

Kidderminster Borough (Dr. Moore).

"Your Committee have passed a resolution (in June), authorizing the
 "supplying of Diphtheria Antitoxin, free of charge to medical men,
 "for treatment of the poorer inhabitants of the borough."

Oldbury Urban (Dr. Buttery).

"There was a considerable increase in the number of cases of Diphtheria
 "notified during the past year in comparison with 1911, the numbers
 "being 24 and 13 respectively. I am, however, pleased to report
 "that, although the number of cases notified was so much greater,
 "the mortality from the disease was considerably less. In 1912, with
 "24 cases reported, only 1 death occurred, whilst in 1911, with only
 "13 cases, 3 were of a fatal character. I attribute this in a great
 "measure to the more general use of anti-toxin which now prevails.
 "This result fully justifies the action taken by public authorities in
 "supplying this very important remedy free to all medical practi-
 "tioners who care to apply for it. The usual precautionary measures
 "were also carried out in every case reported to me."

Typhoid Fever.

Table IX. shows the number of cases and deaths, and Hos-
 pital cases and Hospital deaths and Death-rates, in the Urban and
 Rural Districts, and Administrative County, and the Death-rates
 of England and Wales during 1903-1912 inclusive.

TABLE IX.

Districts.		1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Urban (12)	Death Rate*	0.03	0.04	0.02	0.03	0.05	0.08	0.05	0.04	0.06	0.06
	Cases -	15	33	42	38	35	67	67	70	53	70
	Deaths -	6	10	5	9	12	18	12	10	15	13
	Hospital Cases -	7	10	15	21	7	11	26	23	13	34
	" Deaths -	-	-	2	-	1	-	2	1	4	5
Rural (16)	Death Rate*	0.01	0.06	0.02	0.04	0.02	0.05	0.02	0.02	0.01	0.03
	Cases -	14	50	19	34	39	62	75	34	34	63
	Deaths -	2	8	4	9	5	10	5	5	3	6
	Hospital Cases -	2	26	1	7	14	8	27	5	8	7
	" Deaths -	-	-	-	4	3	-	1	-	-	1
Administrative County (29)	Death Rate*	0.02	0.05	0.02	0.04	0.04	0.06	0.04	0.03	0.04	0.05
	Cases -	29	83	61	72	74	129	142	104	87	133
	Deaths -	8	18	9	18	17	28	17	15	18	19
	Hospital Cases -	9	36	16	28	21	19	53	28	21	41
	" Deaths -	-	-	2	4	4	-	3	1	4	6
England and Wales -	Death Rate*	0.04	0.07	0.05	0.06	0.07	0.07	0.09	0.09	0.09	0.10

* Rate per 1,000 of population.

This table shows that Typhoid Fever—"a preventable filth disease"—is gradually being eradicated. The fact that only 29 cases (8 deaths) occurred in the whole county during 1912 is most gratifying.

Oldbury Urban (Dr. Buttery).

"As the time goes on this disease appears to be gradually disappearing from our midst, and with the same policy being carried out in regard to substituting the water carriage system for the old privy middens and paving of all yards, we are hoping to entirely rid the district of this once fertile cause of our swollen death-rate.

"146 old privies were converted into water closets, and all newly-built houses were furnished with water closets. All these improvements have a distinct influence on the general health of the town.

"There are approximately 1,767 privies in the district, in which total is included 11 moveable receptacles: and 5,493 water closets, in which is included 37 waste water closets."

Acute Poliomyelitis, and Cerebro-Spinal Fever.

I have previously said that these diseases are now compulsorily notifiable in England and Wales, but only 1 case of Poliomyelitis was reported in the County last year, and that was at Halesowen in November.

The etiology of these diseases was discussed at some length in my last "Digest" (pp. 65 to 68).

Ophthalmia Neonatorum.

(Inflammation of the Eyes in Infants under 10 days old.)

Owing to your representations, 22 of the 28 Sanitary Authorities in the County have made this a "notifiable" disease. The Local Authorities who have not scheduled it as notifiable, are Bewdley Borough, and Newent, Rock, Stow-on-the-Wold, Tewkesbury, and Winchcombe Rural Districts.

References to the sixteen cases notified in the County last year are as follows :

Kidderminster Borough.

The Corporation Health Missioner (Miss E. M. Jones) reports :

"Six cases of this disease have been reported, 4 have recovered. Two (twins) are suffering, 1 from partial blindness, and the other complete blindness. They are, however, being treated by an Eye Specialist."

Redditch Urban (Dr. Stevenson).

"Three cases were notified": and the County Health Missioner (Mrs. Bedford-Carpenter) says: "One infant, in spite of having every attention, lost an eye."

Stourbridge Urban (Dr. Freer).

"Two cases were notified during the year, both of the infants being
"visited daily by the District Nurse (Health Missioner). Both cases
"recovered without impairment of vision."

Bromsgrove Rural (Dr. Coaker).

"One case was notified, and prompt treatment afforded in a Voluntary
"Hospital, with the result that the sight was preserved."

Feckenham Rural (County Medical Officer).

"One case was notified and promptly received medical attention, a trained
"nurse being specially engaged."

Halesowen Rural (Dr. Brett Young).

"One case was notified at Cradley in September."

Kidderminster Rural (Dr. Addenbrooke).

"One case has been notified."

Shipston-on-Stour (Dr. Findlay).

"The Council have given me permission on a case being notified, to
"engage a nurse, or to take such steps as may be necessary to try
"to prevent loss of sight."

Tenbury Rural (Dr. White).

"One case was notified."

Diarrhœa and Enteritis.

Table X. shows the number of deaths and death-rates (per 1,000 of population) from Diarrhœa and Enteritis in the County Districts, Administrative County and England and Wales, during 1903-12.

TABLE X.

Districts.	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Urban (12)	47	205	41	45	80	58	137	86	128	76
Rural (16)	28	78	22	16	40	22	80	30	49	28
Administrative County (28) .	75	283	63	61	120	80	217	116	177	104
County death-rate per 1,000 of population	0.25	0.98	0.14	0.14	0.28	0.19	0.5	0.30	0.46	0.27
England and Wales Death-rate per 1,000 of population .		1.06	0.29	0.28	0.50	0.29	0.87	0.59	0.86	0.50

*Enteritis added by order of Local Government Board.

It will be noticed that the death-rate from "Diarrhœa and Enteritis" for England and Wales during 1912 is not given. This is because the Superintendent of Statistics of the General Register Office writes me "that the number of deaths at all ages

"from Diarrhœa and Enteritis is not now tabulated for the purpose of the Registrar-General's Quarterly Returns."

The number of deaths from Infantile Diarrhœa recorded from year to year is a good index to hot or cool summers. For instance, 1910 and 1912 had cool summers, the consequence of which was, that only 63 and 75 deaths were registered in those years. On the other hand, the summer of 1911 was hot and dry, the result being that 283 such deaths occurred. The Local Government Board evidently anticipate that the present drought may also cause excessive mortality from diarrhœa, for on 15th July, 1913, they sent to each Sanitary Authority in England a print of a circular with regard to "Epidemic Diarrhœa and Feeding of Infants," in which they reminded those Councils of the danger to health caused by accumulation of refuse in the neighbourhood of dwellings, and pointed out that such accumulations provide breeding grounds for flies, and are otherwise open to serious objection, and the Board urge that wherever a sufficient sewer and water supply "are available, fresh water closets supplied with flushing cisterns should be substituted for existing closets on the conservancy system, and provided in all new buildings. In connection with this matter, attention should be drawn to the provisions of "Section 39 of the Public Health Acts Amendment Act, 1907."

Referring to the 10 deaths from Diarrhœa in Lye and Wollescote Urban District during the year 1912, Dr. Darby says:

"There has been much less Diarrhœa this autumn, probably owing to wet summer."

Oldbury Urban District (Dr. Buttery).

"There were 19 deaths due to affections of the alimentary tract (Diarrhœa and Enteritis) as compared with 31 in the previous year. It will be remembered, however, that in 1912 the climatic conditions were much less conducive to fermentative changes in food than in the preceding year, whilst the comparative absence of the fly nuisance had the same effect."

Infantile Mortality.

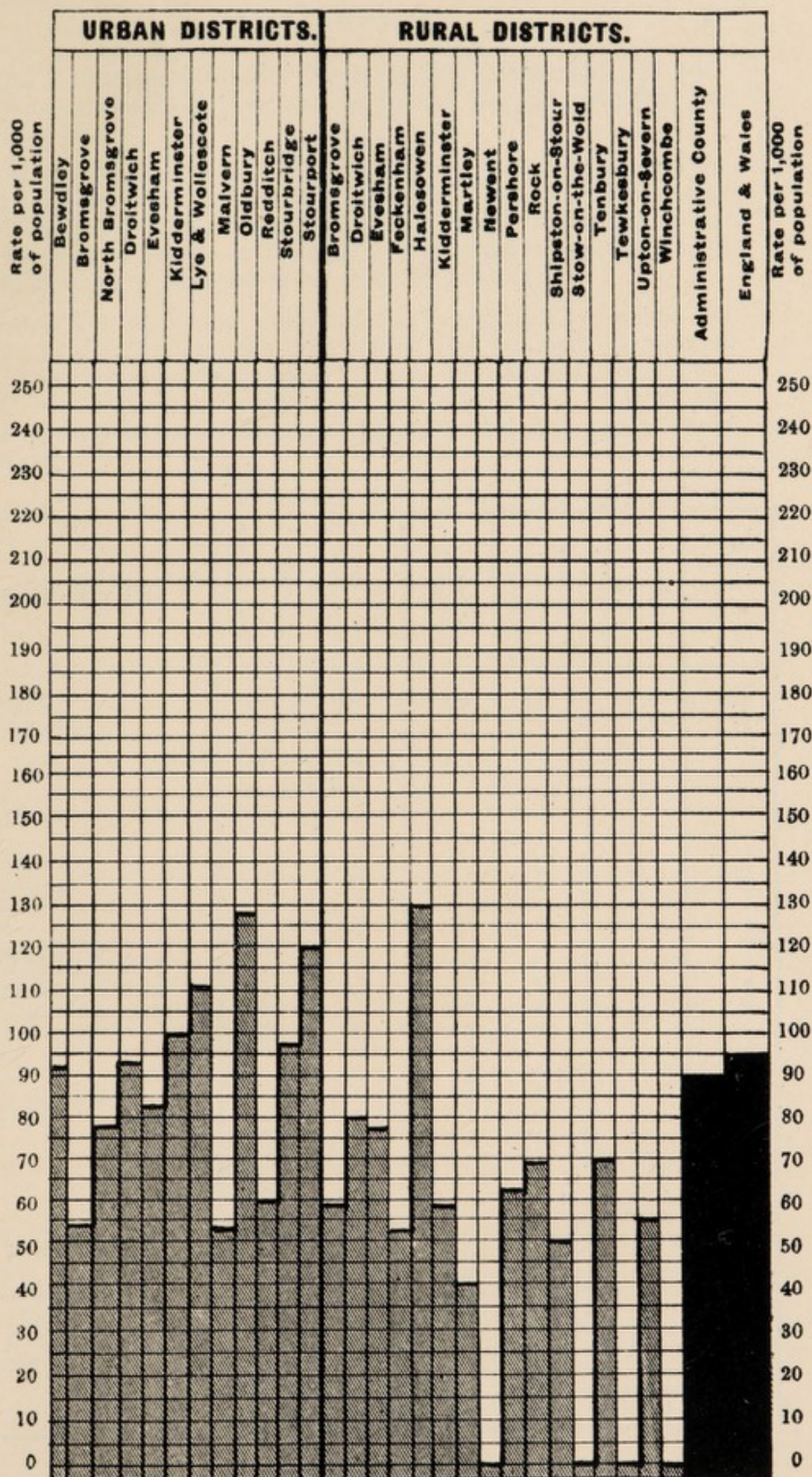
Table XI. and Diagram No. 3 compare the rate of Infantile Mortality in the Urban and Rural Districts collectively, and the Administrative County, with those of England and Wales for the years 1903-1912 inclusive.

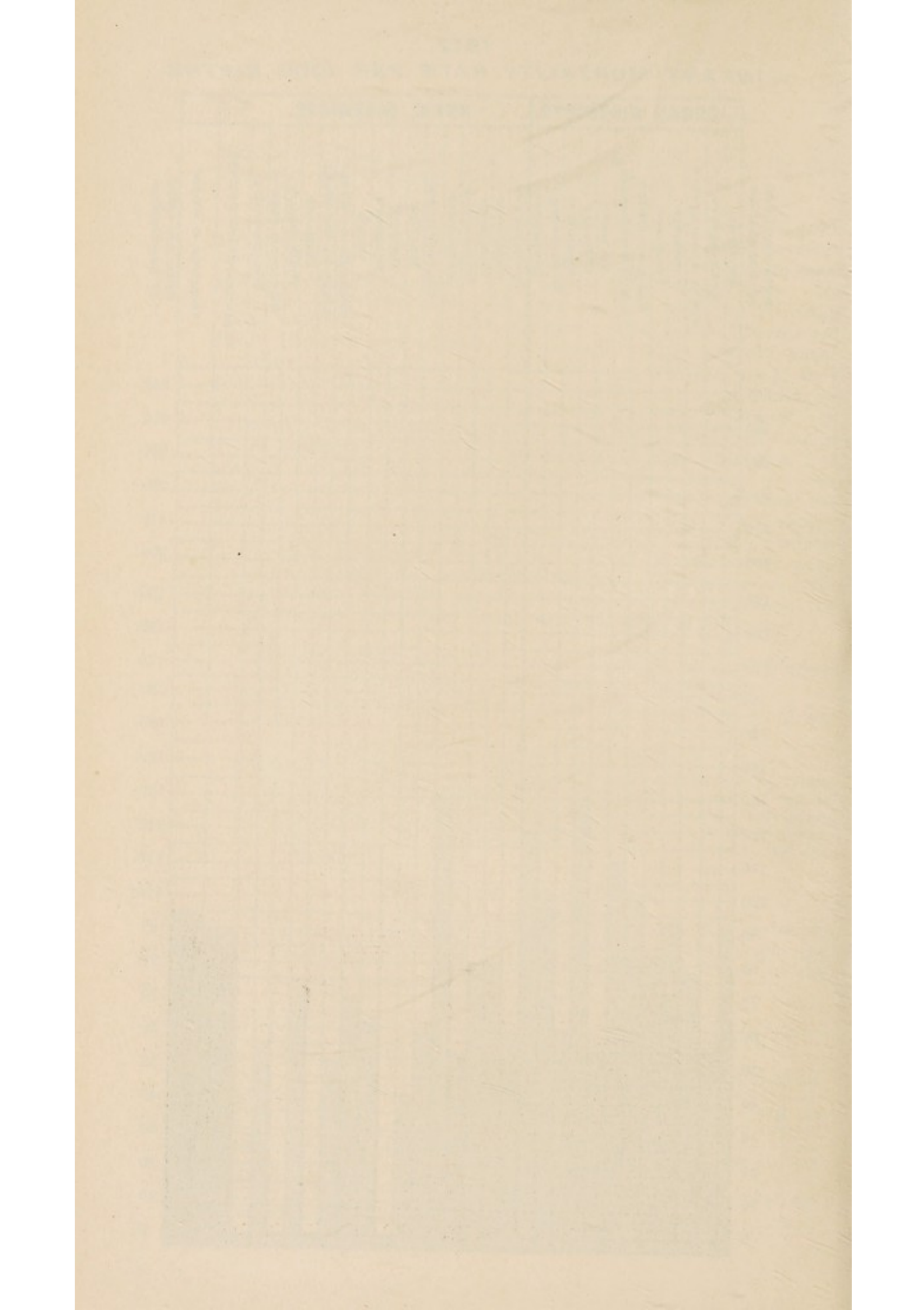
TABLE XI.

Districts.	Deaths of children under 1 year per 1,000 registered Births.									
	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903
Urban (12) - - -	98	132	97	106	88	120	123	111	133	122
Rural (16) - - -	77	95	78	96	123	89	104	100	116	108
Administrative County (28)	89	116	89	102	99	106	115	106	125	116
England and Wales - -	95	130	106	109	121	118	133	128	146	132

1912.

INFANT MORTALITY RATE PER 1000 BIRTHS.





The "Infantile Mortality" rate of the County (89) for 1912 was most satisfactorily low, and only once, viz., in 1910 (89) has it been so low.

The corresponding rate for England and Wales (95) was the lowest ever recorded, but it will be seen that this is higher than that of the County. Infantile Mortality rates are largely dependent on the prevalence or otherwise of Diarrhœa, a disorder which, as I have previously said, is susceptible to climatic influences.

Table XII. shows the causes of death, and the ages of the 582 children in the County, who died before they attained one year of age. The ante-natal complaints, "Premature Births" and "Congenital Malformations," accounted for 144 deaths. 239 of the babies succumbed under the age of four weeks, and 155 of these within one week of birth.

TABLE XII.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under One Year.
All Causes { Certified	154	31	38	15	238	113	89	72	66	578
{ Uncertified	1	.	.	.	1	.	2	1	.	4
Small-pox . . . . .	.	.	.	.	.	.	.	.	.	.
Chicken-pox . . . . .	.	.	.	.	.	.	.	.	.	.
Measles . . . . .	.	.	.	.	.	.	.	1	1	2
Scarlet Fever . . . . .	.	.	.	.	.	.	1	.	.	1
Whooping Cough . . . . .	.	.	1	.	1	7	7	11	8	34
Diphtheria and Croup . . . . .	.	.	.	.	.	.	1	.	.	1
Erysipelas	1	.	.	.	1	.	.	.	.	1
Tuberculous Meningitis . . . . .	.	.	.	.	.	.	4	1	3	8
Abdominal Tuberculosis . . . . .	.	.	.	.	.	.	1	.	1	2
Other Tuberculous Diseases . . . . .	.	.	.	.	.	1	1	2	2	6
Meningitis (<i>not Tuberculous</i>) . . . . .	.	.	.	.	.	2	2	1	3	8
Convulsions	5	5	3	1	14	9	7	5	4	39
Laryngitis . . . . .	.	.	1	.	1	.	.	.	1	2
Bronchitis . . . . .	.	2	4	1	7	19	20	15	16	77
Pneumonia (all forms) . . . . .	.	1	3	1	5	11	11	17	12	56
Diarrhœa . . . . .	.	1	1	1	3	5	7	5	3	23
Enteritis . . . . .	.	1	.	1	2	11	5	3	2	23
Gastritis . . . . .	.	.	1	.	1	3	3	1	1	9
Syphilis	1	.	.	.	1	.	1	.	.	2
Rickets . . . . .	.	.	.	.	.	.	1	1	2	4
Suffocation, overlying	4	.	1	2	7	2	.	.	.	9
Injury at Birth	1	.	.	.	1	.	.	.	.	1
Atelectasis	3	1	.	.	4	.	.	.	.	4
Congenital Malformations	17	3	6	3	29	3	2	.	.	34
Premature Birth	86	10	6	1	103	6	1	.	.	110
Atrophy, Debility and Marasmus	29	5	8	4	46	30	10	4	1	91
Other Causes	8	2	3	.	13	4	6	6	6	35
	155	31	38	15	239	113	91	73	66	582

The Infantile Mortality rates of the undermentioned County Districts were higher than that of the County, viz. :

Bewdley Borough	-	-	-	-	92
Droitwich Borough	-	-	-	-	93
Kidderminster Borough	-	-	-	-	100
Lye and Wollescote Urban	-	-	-	-	112
Oldbury Urban	-	-	-	-	128
Stourbridge Urban	-	-	-	-	96
Stourport Urban	-	-	-	-	119
Halesowen Rural	-	-	-	-	129

It used to be considered that the Infantile Mortality rate of a "healthy district" ought not to exceed 100; and although the 1912 rates in Lye, Oldbury, and Stourbridge Urban, and Halesowen Rural District, do so, they cannot be deemed unsatisfactory, when it is recollected how much lower they are now, than they used to be. It is so well-known locally that the reduction of the Infantile Mortalities in these four districts is largely the result of the excellent work that is being done by your local Health Missioners, that it seems scarcely necessary to mention this fact.

Redditch Urban District (Dr. Stevenson).

"*Infantile Mortality.*—Nineteen children under one year of age died during

"the year. This is equivalent to 60 deaths out of every 1,000 births.

"For five consecutive years we have had an Infantile Mortality figure

"under 100. Formerly it averaged 160, some years being as high as

"200. Indeed, 10 years ago the high rate of infantile mortality in this

"town was nothing short of a disgrace to the mothers and the Sanitary

"Authorities. A Health Missioner was appointed in 1902 with the

"express object of improving the conditions of infant life, and lessening

"the rate of mortality. Judging by the figures of the years since her

"arrival, her work has been markedly successful. Constant and per-

"sistent visitations, persuasion, oral demonstration, tact and kindness

"have, combined with increased sanitary activity and its resulting

"improvements, brought a change. The general conditions of labour

"here, so large a proportion of mothers working daily in factories,

"favour a somewhat high death-rate in infants, but this feature is

"minimised by the fact of larger wages coming into the home, and

"consequently better milk and food.

"Diarrhoea, and other gastro-intestinal troubles have been less, due to

"improvements in the feeding materials, and the manner of giving

"them."

The Kidderminster Borough Health Missioner (Miss Esther M. Jones) reports :—

"*Visits.*—563 cases of Births notified (including cases of twins and eight "still-born).

"522 cases of Births visited.

"636 Supervision visits paid.

"I am pleased to report that there is a high percentage of infants being "breast-fed; in fact 488.

"449 began with Breast Feeding.

"31 on Breast and Bottle.

"34 Bottle only.

"8 did not live long enough to take food.

" *Feeding.*—Unfortunately, Breast Feeding has to be abandoned in many
" cases where the mothers are engaged in work away from their own
" homes, or it has to be supplemented by Bottle Feeding the first few
" months.

" The books sent by the M.O.H. on ' Infant Care and Management ' are
" very helpful and much appreciated, especially by the young mothers
" who appear anxious to begin with regular feeding times and habits of
" cleanliness.

" Tube bottles are less used than formerly.

" I notice the prejudice against determining the weight of infants is dying
" out practically among the younger mothers, who, as far as circum-
" stances will allow, are quite ready to adopt more modern methods in
" dealing with their infants.

" I should be glad to see a little more regular and careful attention paid to
" the eyes of the young babies.

" As the Insurance Maternity Benefits are now in force, one must expect
" that more care and comfort will be devoted to the mother and child
" than heretofore. Too often I find the mother endeavouring to give
" attention to the other children of her household, sitting up in bed pre-
" paring food while her infant is but two or three days old. A good
" number of mothers have been in very straitened circumstances at
" these times, being short of the necessary comforts and conveniences.
" Too frequently they have to depend on the flying visits of the mid-
" wives, and what little attention a neighbour can spare from her own
" home.

" *Homes.*—Though many of the homes are clean and well-kept, much re-
" mains to be done in others. Every effort is being made to improve
" the conditions, and all doubtful cases are reported to the Sanitary
" Inspector, and of course, investigated.

" There is hope for the future in this direction, for the elder school-girls are
" taught Housewifery, Cookery, Laundry, and Infant Care. Practical
" Lessons are given in Bathing and Feeding Infants. On close obser-
" vation the windows of the Artisan Class show that barely 20 per cent.
" realize the value of fresh air.

" *Deaths.*—Forty deaths have been inquired into with the following results :

" 15 were premature.
" 14 Bronchitis, Inflammation and Pneumonia.
" 3 Whooping Cough.
" 2 Diarrhoea.
" 6 from other causes.

" *Ophthalmia.*—Six cases of this disease have been reported, four have re-
" covered. Two (twins) are suffering, one from partial blindness and
" the other complete blindness. They are, however, being treated by
" an Eye Specialist.

" It may interest you to know that among the cases of visits the following
" mothers have employment other than their own domestic work.

" 80 are employed in factories.
" 12 Shopkeepers.
" 12 Charwomen.
" 3 Dressmakers.
" 5 employed on the land.
" 2 Servants.
" 1 Clerk.
" 1 Canvasser.

"In conclusion, the above facts make me think that Kidderminster, employing so much female labour, is one of the towns that would benefit very considerably by the establishment of a Crèche, where the children would be properly cared for, bathed and fed.

"With careful management this should be self-supporting."

The following are Summaries of the Annual Reports for 1912 of the County Health Missioners.

"Lye and Wollescote Urban District.

"(Mrs. A. H. Lucas).

"The Infant deaths during the year amounted to 35 and were due to the following causes:—

"Zymotics - - -	5	(1 Whooping Cough).
"Respiratory - -	11	
"Developmental - -	2	
"Convulsive - - -	4	3 under 1 month. 1, 3 months.
"Tubercular - - -	1	
"Other Causes - -	1	
"Premature Births	11	
	<hr/> 35 <hr/>	

"Visits Paid.

"1,661 visits and re-visits have been made throughout the year—new and old cases.

"Breast Feeding.

"The mothers at Lye and Wollescote are excellent for suckling their infants, 317 out of 340 babies being breast fed.

"A good deal of trouble is sometimes experienced with mothers who will persist in suckling their infants much beyond the allotted time, but there have been fewer such cases this year than usual.

"Tube Bottles.

"These are not in great demand among the mothers. Some of the more careless and lazy ones will have them, as they are 'less trouble' and do not necessitate holding the baby while it is feeding.

"Lectures.

"Twelve well attended Lectures have been given. Special Lectures were given in the summer on diarrhoea, care of milk, cleanliness of utensils, showing a very simple contrivance for covering the milk; also as to flies and their riddance: within the means of the poorest. Mothers are invited to ask for an explanation of anything they do not grasp or understand. Two were demonstrative Lectures; these being greatly appreciated.

"The 'Mothers' Class.'

"A 'Mothers' Class' for child-bearing women was started just 12 months ago. The babies are weighed and charted, any under weight are specially visited and looked after. The number of mothers on books is 74, and those attending increase monthly.

"It is now found that parents take a keen interest in 'baby's chart,' and the old dislike to having their infants weighed is quite overcome.

"The mothers are specially taught in all matters appertaining to infant rearing and feeding, cleanliness of their persons, their children, homes, and to various means of self nourishment where the mothers have a tendency to not suckling their infants, from poverty of milk or other causes.

"The Creche.

"The attendance at the Creche for 11 months was 2,343, and was not as good as usual owing to epidemics of Whooping Cough, 'Strikes,' &c.; during the latter, many women did not work away from home, and nursed the babies themselves. It was closed for one month as usual.

"No cases of sickness occurred in the Nursery, and there was no deaths among the children attending."

"Oldbury Urban District.

"(Miss L. Woodfield).

"During the year 1912, 13 Lectures were given and 3,154 visits were paid.

"Infant Work.

"844 Infants were visited during the year, and owing to the 'Notification of Births Act,' most of these were visited within a fortnight of the birth; some were much older owing to the birth having occurred in another district, and the family moving into Oldbury afterwards.

"It is considered that the practical and timely instructions given have prevented much suffering, and even loss of life. In many instances mothers have been persuaded to obtain early medical treatment for their babies: and so indiscriminate dosing with so-called 'old-fashioned' concoctions has been stopped.

"Feeding.

"There is great improvement in the feeding of the infants. Of the 844 infants visited, 706 were breast-fed, 69 had both breast and bottle feeding, 48 only were nourished entirely on artificial food, and 21 did not live long enough to have any food.

"This improvement is also attributable to the adoption of the 'Notification of Births Act': in consequence of babies having been visited soon after their birth a great deal of artificial feeding has been prevented. The mothers are as a rule found most anxious to perform the important duty of suckling their children, and usually it is only when this is found to be impossible that artificial feeding is resorted to. A great many mothers make the mistake of suckling their children too long, and it is quite common to find children over two years old still at the breast, and it is difficult to get the mother to realise that this is wrong, as they have the erroneous idea that it prevents pregnancy.

"Breast feeding of illegitimate infants is seldom carried on longer than a few weeks, the mothers being obliged to go to work as soon as possible. But these children when put out to a nurse are ordinarily well looked after and fairly well nourished.

"There are not so many of the tube bottles in use as formerly, as the more careful and self-respecting mothers are well aware of the harm they do.

"On the other hand the use of the 'dummy' is almost universal, and doubtless plays an important part in the spread of such diseases as Diarrhoea and Whooping Cough.

" Mothers' Work.

" 127 mothers worked throughout their pregnancy, and most of them go to work again as soon as possible after the birth of the child. In a few cases the married women have been persuaded to stay at home and look after their homes and children.

" The Home.

" Some of the homes were most unsatisfactory, being so dirty as to be injurious to the health of the children. Poverty is nearly always pleaded as an excuse, but bad management and lack of method are often the real causes.

" Poverty and ignorance are the two greatest barriers to be contended with. It is cruel irony to suggest to a mother that her child requires more nourishment knowing that both parents were denying themselves and suffering hardships in order that their child might have the small amount that it was having.

" The first year of a child's life often decides its physical and moral future, and if we could obtain for *necessitous* cases a good supply of nourishing food, the expenditure of either time or money would, it is believed, be amply repaid in a stronger, healthier, and more moral manhood and womanhood. Ignorance can be, and is being, met and fought against; but poverty needs special treatment. There is great need in Oldbury for some charitable agency in this direction.

" The question of fresh air is also of vital importance; and here again it is mainly ignorance which has to be fought. In some homes the bedrooms are almost hermetically sealed, the windows are seldom opened, and occasionally cannot be opened; consequently the air becomes poisonous, and injury to the health soon becomes apparent. But still there was some improvement last year, and the improvement though slow is growing.

" A great many cases of overcrowding have been reported to Dr. Buttery, also cases where bedroom windows do not open, and house walls were damp and dilapidated. The overcrowding reported by no means indicates the amount there is in the district; for when enquiries are made as to the number of persons inhabiting a house, the information given is often incorrect.

" Death Visits.

" 121 deaths were inquired into. Deaths from respiratory diseases head the list, and are more numerous than in 1911. The deaths from the diarrhoeal diseases were only 14, which number is considerably below that of the previous year. The climatic conditions during the summer months favoured a low death-rate from these diseases.

" Premature Births.

" Each year these help to swell our infantile mortality rate, and the fact that mothers do not exercise sufficient care during pregnancy seems to increase them.

" Insurance.

" A great many of the babies who died were insured, but the inquiries proved that numbers of women paid into 'Burial Clubs' quite as much for the yearly dividend as for the burial fees."

" Redditch Urban District.

(Mrs. Bedford Carpenter).

" 335 Notifications of Births were received, 17 of which were still-births. Home visits were paid in 2,050 instances. On account of the

"unusually wet summer there was an almost entire absence of summer complaints. The infantile mortality for 1912 was as low as 60 per 1,000 births. This is a contrast to the very high figures of a few years ago. It is interesting to note that during 1907 17 infants died under one week old, whereas in 1912 6 infants only died at this age. The Notification of Births Act is a great help in checking infantile mortality.

"In 1911, 86 women worked in the factories, whereas in 1912 the figure reached 102. This is, without doubt, one of the results of the new Insurance Act; many women who formerly worked at home being now compelled to work in factories.

"Breast Feeding.

"245 infants under one month were found to be entirely breast-fed. Unfortunately this has to be abandoned for artificial feeding when the mother enters the factory. 23 women were entirely devoid of breast milk.

"Artificial Feeding.

"27 infants were fed on artificial food from birth, and in 4 cases infants were fed with potatoes, tomato, tea, bread, &c.

"Tube Bottles.

"In 24 of these insanitary bottles were used, and mostly by better class artisans. Persistent condemnation of this type of bottle has created, it is satisfactory to find, a widespread feeling that they are positively illegal.

"Ophthalmia Neonatorum.

"Four cases of Ophthalmia Neonatorum were notified during the year; one infant, in spite of having had every attention, lost an eye.

"Women's Work.

"102 women worked in factories, 51 did factory work at home, and 5 were charwomen.

"Lectures.

"Eight Lectures were given. Three were illustrated by lantern slides, and were well attended. Two were practical lessons on infant bathing given to the elder scholars at the National School for Girls."

"Stourbridge Urban District.

"(Miss C. Blackwell).

"Of the infants visited during the year, 101 were breast-fed and 15 were bottle-fed.

"More attention has recently been paid to properly mixing of infants' food. 'Boat' shape bottles are more generally used.

"Mothers were invited to bring their infants to the Dispensary to be weighed on Thursdays. The average attendance has been 5. A nursing talk on infant management was given every month.

"22 of the mothers worked away from home, 10 for part of the day only, and 12 for the whole day, but in most instances they went home for dinner.

"When the mothers go out for washing and charing the infants are invariably taken to be breast-fed. The mothers work at pea-picking, or other field work, who take their infants and small children with them.

"It is the infants of mothers who work in brickyards that fare badly; they are left either in the care of a grandmother, a neighbour, or a "girl who has just left school, and are consequently fed with 'bread "sop.' They are suckled at night, so that breast-feeding is at the "wrong end of the day, and what with breast-feeding by night and "the dummy teat by day, they are literally sucking day and night.

"There were five cases of twins, and only in one instance did the two "survive.

"320 visits and 284 repeat visits were paid."

"Halesowen Rural District.

"(Miss G. Simons).

"During the past 12 months, 761 infants under one year of age were "visited. These included nearly the whole number of newly-born "infants in Halesowen, and some others who were born elsewhere, and "afterwards were brought into the district.

"With regard to my enquiries as to the influence factory work has on "Infantile Mortality, it appears that little children as well as infants "suffer from the neglect consequent on their mothers being absent so "much from home.

"Nursing-mothers are still on the increase, and a greater number than "formerly breast-feed their infants until the proper weaning time. "Dummy teats are not so often used as they used to be. Taking the "mothers generally, there seems to be a steady improvement amongst "them in the management of their infants.

"The Notes on the Eyes of Infants, also those on the Care, Feeding and "Management of Infants, have done much good.

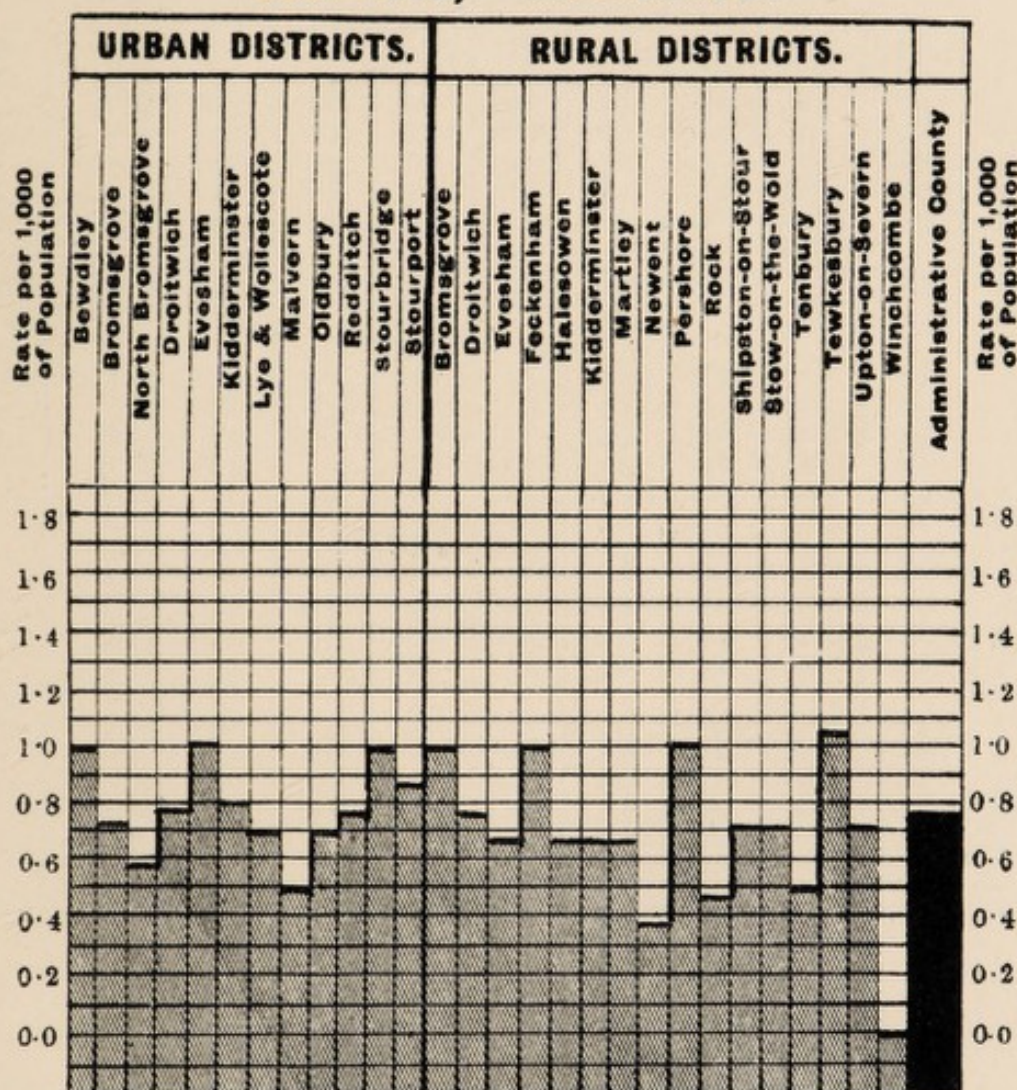
"In the visits to the home an endeavour has been made to give such "instructions and advice as each particular case required and to get "the mothers to adopt the best methods of promoting the welfare "of infants and for the betterment of the homes.

"Eight addresses have been given, 4 in Cakemore and 4 in Cradley."

Pulmonary Tuberculosis.

Table XIII. and Diagram No. 4 show the average County Death-rate due to Pulmonary Tuberculosis during the years 1903-1912.

**AVERAGE PHTHISIS DEATH RATES FOR
1903-1912, INCLUSIVE.**



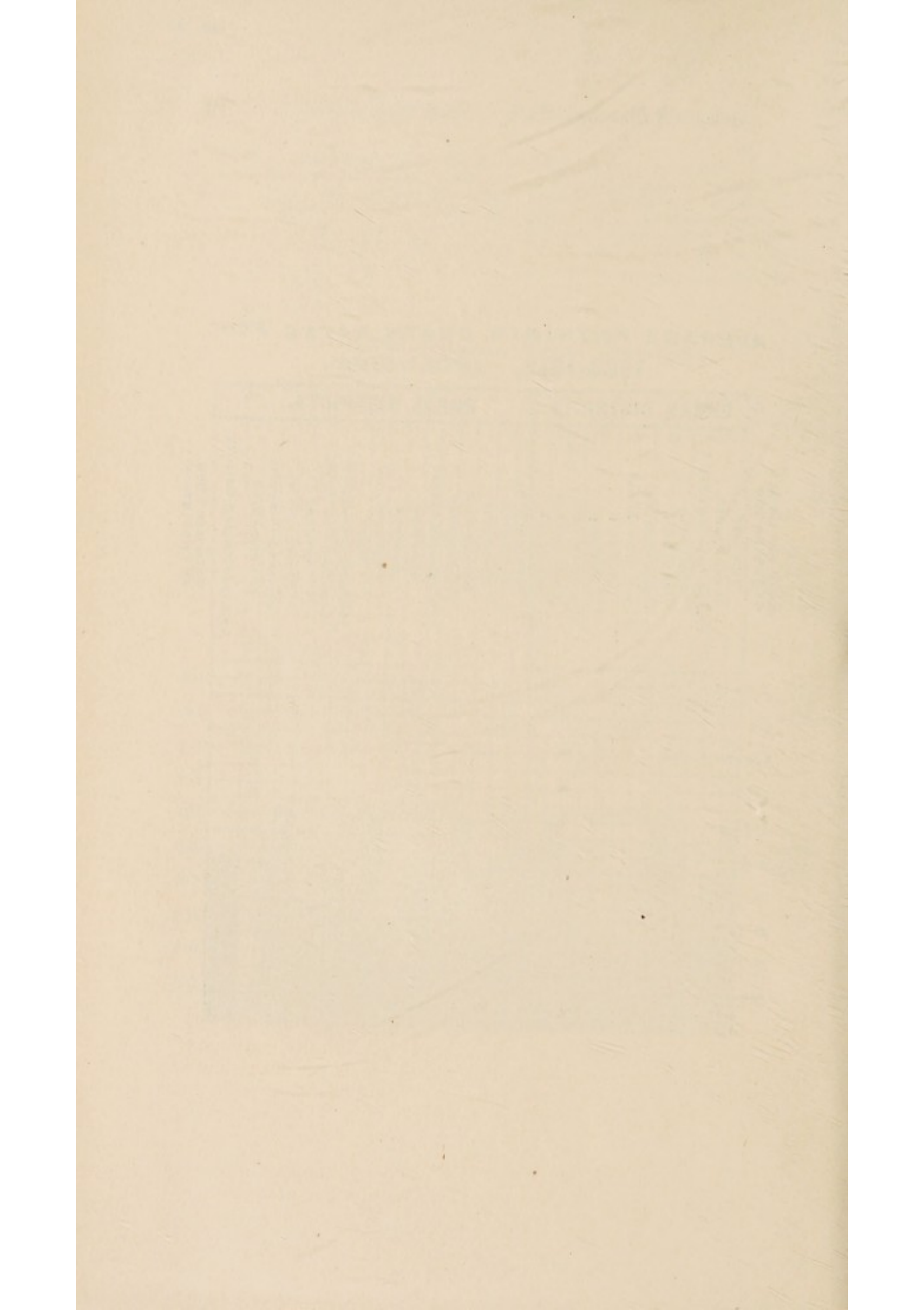


TABLE XIII.

Districts.	Average for years 1903 to 1912.	Rate per 1,000 of Population.									
		1912.	1911.	1910.	1909.	1908.	1907.	1906.	1905.	1904.	1903.
<i>Urban.</i>											
Key Borough	0.99	1.0	0.7	0.7	1.3	0.3	1.7	1.7	1.3	0.6	0.6
grove	0.72	0.9	0.7	1.03	1.03	0.9	1.1	0.5	0.2	0.7	0.2
grove North	0.58	0.8	0.5	0.8	0.83	1.0	0.6	0.5	0.1	0.5	0.17
wich Borough	0.74	0.2	0.9	0.7	0.71	0.2	1.6	1.1	0.9	0.4	0.7
am Borough	1.02	1.3	0.8	0.7	0.72	0.8	1.6	1.4	0.8	0.9	1.2
minster											
Borough	0.81	0.5	0.9	1.09	1.1	0.7	0.8	0.7	0.8	0.7	0.9
ad Wollescote	0.67	0.6	1.2	0.6	0.6	0.5	0.6	0.5	0.9	0.7	0.5
rn	0.55	0.5	0.9	0.6	0.5	0.3	0.5	0.5	0.4	0.8	0.5
ry	0.69	0.9	0.7	1.08	0.7	0.7	0.8	0.5	0.6	0.6	0.4
ch	0.76	0.8	0.9	0.9	0.5	1.1	0.6	0.6	0.7	0.6	0.9
ridge	1.01	0.7	0.9	1.01	1.1	1.1	1.2	0.7	1.0	1.07	1.4
ort	0.88	0.6	1.1	0.9	0.9	1.1	1.2	0.9	0.9	1.1	0.2
an death rate	0.74	0.75	0.8	0.8	0.76	0.73	0.78	0.78	0.71	0.70	0.63
<i>Rural.</i>											
grove	1.00	0.6	1.1	0.8	0.9	1.4	1.2	1.2	0.8	1.0	1.0
rich	0.75	0.8	0.7	0.6	0.4	1.2	0.3	1.0	0.9	1.0	0.6
am	0.67	0.3	0.4	0.6	0.6	0.8	0.5	1.9	0.7	0.2	0.7
hham	1.08	1.2	1.1	0.9	1.4	1.4	0.7	0.7	0.9	1.8	0.7
owen	0.66	0.6	0.7	0.8	0.8	0.6	0.4	0.7	0.9	0.3	0.8
minster	0.66	0.8	0.6	0.5	0.6	0.6	0.4	0.7	1.0	0.8	0.6
y	0.67	0.9	0.5	0.8	0.7	0.4	0.8	0.7	0.5	0.7	0.7
at (part)	0.37	0.8	1.5	-	0.0	0.7	0.0	0.7	0.0	0.0	0.0
ere	1.07	1.0	0.7	0.4	1.5	1.3	1.0	1.0	1.7	1.3	0.8
	0.47	0.0	0.9	0.4	0.4	0.4	0.4	0.0	0.9	0.9	0.4
on-on-Stour	0.66	0.4	0.8	0.4	0.4	0.6	1.1	0.6	0.2	1.3	0.8
on-the-Wold											
(part)	0.64	0.0	-	-	0.0	0.0	0.0	0.0	3.4	0.0	3.0
ry	0.56	0.4	0.8	1.05	0.8	0.4	1.0	0.4	0.2	0.2	0.4
isbury (part)	1.01	0.0	2.1	-	0.8	0.0	2.6	0.8	0.4	1.74	1.7
on-Severn	0.71	0.5	0.4	0.9	0.6	1.1	0.9	0.5	0.8	0.6	0.8
combe (part)	0.0	0.0	-	-	0.0	0.0	0.0	0.0	0.0	0.0	0.0
al death rate	0.76	0.70	0.74	0.6	0.8	0.9	0.78	0.7	0.9	0.75	0.81
nty death rate	0.76	0.73	0.80	0.7	0.79	0.81	0.78	0.78	0.8	0.77	0.75

This Table confirms the opinion I expressed that "the County Death-rate from Pulmonary Tuberculosis is practically stationary and that it seems, therefore, that measures not as yet in existence will have to be taken if the Mortality from this disease is to decline in future at anything like the rate it did between 1861-1893."

I rejoice, therefore, to record the fact—well-known to you—that the crusade against Pulmonary Consumption has now just as—

sumed a new phase, and that the County Council have decided to deal with this disease when it occurs, not only in persons insured under the National Insurance Act 1911, but also in non-insured people; for on the 28 July 1913, the Council passed the following Resolution, viz. :—"That from and after the day fixed for the "County Scheme for the treatment of Tuberculosis coming into "operation, all cases of Tuberculosis in persons, whether insured "or un-insured, be dealt with under such Scheme."

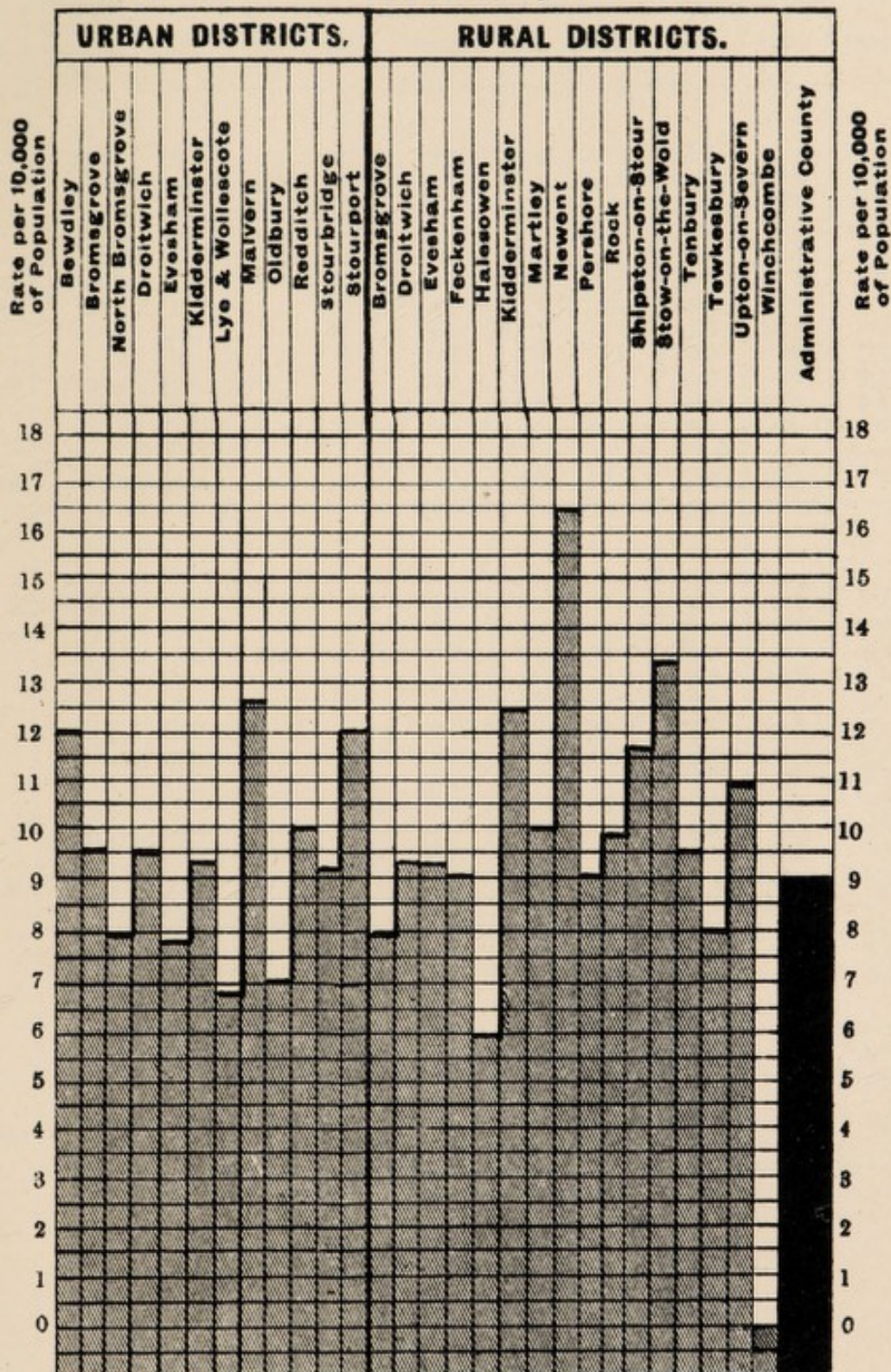
Undoubtedly, the "Public Health (Tuberculosis) Regulations "1912," which require compulsory notification of Non-pulmonary as well as Pulmonary Tuberculosis, and which came into operation on Feb. 1st 1913, will facilitate the County Scheme.

As the Memorandum I prepared in December 1911 is referred to in my last "Digest" (p. 58), and the "County Scheme" are so well known to you, it seems quite unnecessary to refer to them now. It should, however, be mentioned, that in consequence of the County Insurance Committee having placed £2,683 to the credit of the County Council, the Council were able to provide "Sanatorium benefit" for 198 insured persons between July 15th 1912, and 15th July 1913: 110 of these received treatment in Worcestershire Sanatoria, 41 were dealt with at the local "Dispensaries" and 47 were treated at home.

Cancer.

Table XIV. and Diagram No. 5 show the Cancer Death-rates of the County and respective Districts during the years 1903-1912 inclusive per 10,000 of the population.

**AVERAGE CANCER DEATH RATES PER
10,000 OF THE POPULATION, FOR
THE YEARS 1903-1912, INCLUSIVE.**



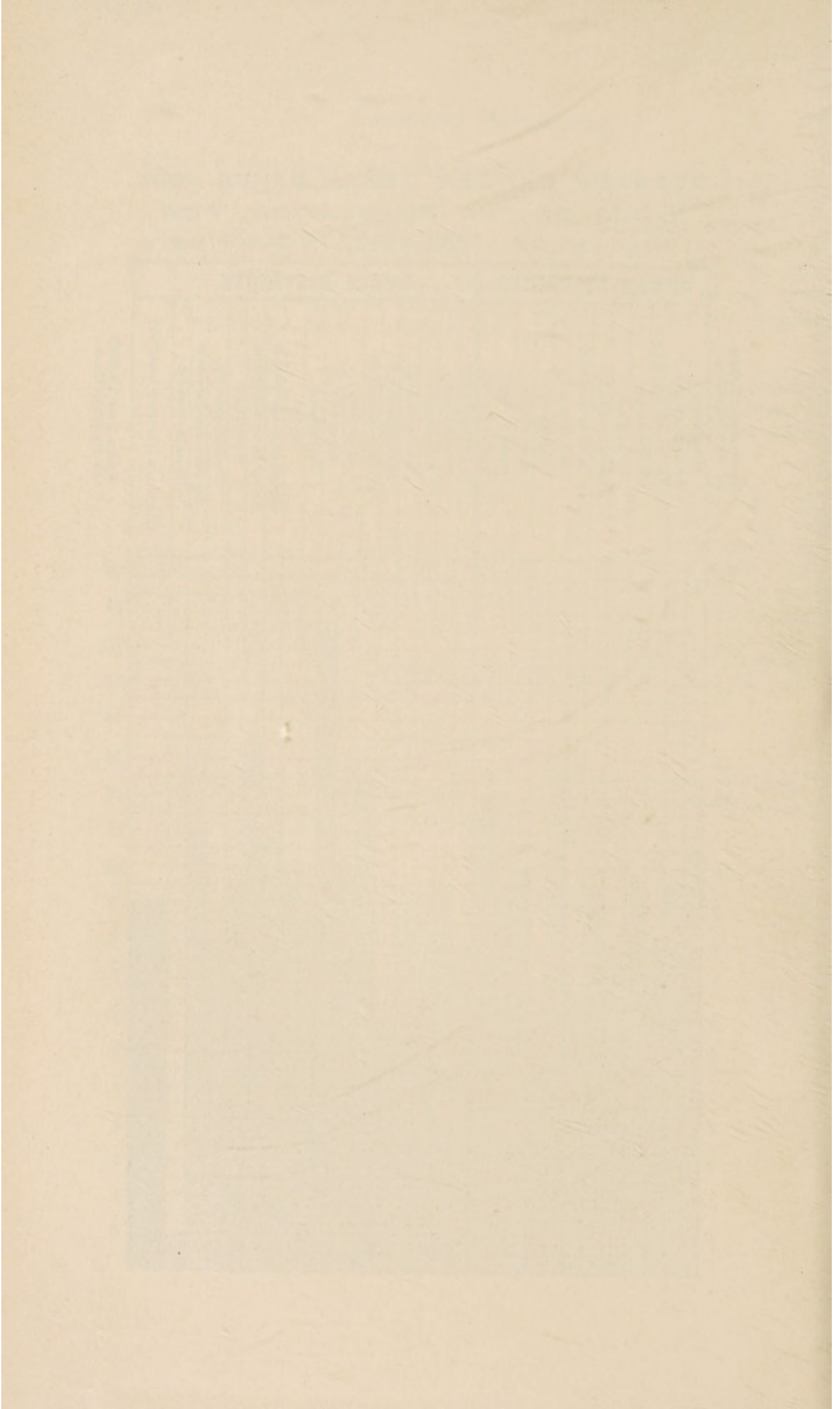


TABLE XIV.

Urban Districts.	Average for years 1903 to 1912 per 10,000 of popula- tion.	Rate per 10,000.									
		1912.	1911.	1910.	1909.	1908.	1907.	1906.	1905.	1904.	1903.
Borough -	12.2	18.2	14.5	17.7	13.9	13.9	10.4	6.0	10.4	6.9	10.4
ove -	9.61	12.2	10.07	10.2	11.6	16.1	4.6	10.0	5.8	4.6	11.0
ove North	8.09	4.0	5.5	8.6	8.2	11.6	5.0	10.0	10.1	11.1	6.8
h Borough	9.54	9.0	4.8	11.8	7.1	7.1	14.2	2.0	9.5	19.0	10.9
-	7.8	6.0	5.9	9.6	10.8	9.6	5.1	5.0	6.4	5.6	14.0
inster -	9.48	11.6	9.8	10.9	7.6	10.2	6.8	10.0	9.3	9.3	9.3
Wollescote	6.63	10.1	9.4	5.07	3.4	12.0	3.4	9.0	5.2	2.6	6.2
-	12.67	16.9	12.1	16.1	13.8	20.6	11.4	11.0	12.5	1.3	11.0
-	7.09	8.7	6.2	6.7	9.8	8.6	5.0	8.0	7.6	7.6	2.7
-	9.99	17.2	10.3	9.4	12.8	5.8	9.9	6.0	9.6	9.7	9.2
dge -	9.19	9.9	8.6	10.1	7.9	12.6	6.9	8.0	10.0	8.9	9.0
rt -	12.15	13.5	9.02	11.8	9.4	14.0	20.8	6.0	9.0	13.0	15.0
Urban Death-rate	8.82	11.3	8.07	9.2	9.3	9.8	7.6	7.3	8.1	8.2	9.4
Rural Districts.											
ove -	8.13	9.9	10.7	4.8	6.5	8.1	8.1	7.0	4.9	8.1	13.2
h -	9.37	12.3	7.7	12.3	5.4	9.2	9.2	10.0	6.1	10.8	10.7
-	9.34	8.6	6.5	12.5	13.9	6.3	14.1	14.0	9.2	1.3	7.0
am -	9.17	10.9	12.8	11.1	7.3	5.4	7.2	8.0	10.8	7.2	11.0
en -	6.06	5.0	7.7	8.1	7.6	7.2	5.5	6.0	5.0	5.5	3.0
inster -	12.5	10.8	15.2	16.8	12.8	13.8	11.8	17.0	13.8	9.1	3.9
-	10.02	16.8	12.2	12.3	8.2	6.9	10.0	17.0	6.9	6.9	3.0
(part) -	16.54	41.9	0.0	7.6	30.5	15.2	7.6	22.0	7.6	16.0	17.0
-	9.16	9.0	7.5	11.02	11.02	10.9	9.3	11.0	5.4	8.5	8.0
-	9.80	9.0	0.0	19.5	14.6	9.5	9.5	4.0	9.3	4.6	18.0
on-Stour	11.79	8.4	14.8	6.9	6.9	15.9	13.5	22.0	19.0	6.5	4.0
the-Wold (part)	13.47	32.1	0.0	-	0.0	34.2	34.2	0.0	0.0	34.2	0.0
-	9.50	19.0	10.5	4.2	10.6	10.4	6.2	10.0	14.0	4.1	6.0
ury (part) -	8.17	4.3	8.6	13.3	8.7	4.3	13.1	4.0	8.0	17.4	0.0
n-Severn -	10.91	12.3	12.5	10.0	15.3	11.8	8.4	11.0	11.8	6.0	10.0
mbe (part) -	-	0.0	0.0	-	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Rural Death-rate	8.91	10.3	9.07	9.4	8.9	9.2	8.3	9.8	8.2	9.0	7.0
County Death-rate	8.90	10.9	9.1	9.2	9.1	9.5	7.9	8.4	8.1	8.6	8.2

Cancer.

Table XV. gives the ages of those who died from Cancer in each district during the years 1911 and 1912.

TABLE XV.

Districts.	At all ages.	Ages in years.							
		Under 1	1-2	2-5	5-15	15-25	25-45	45-65	65 and upwards.
<i>Urban.</i>									
Bewdley Borough	9	-	-	-	-	-	2	3	4
Bromsgrove	20	-	-	-	-	-	-	8	12
North Bromsgrove	7	-	-	-	-	-	1	3	3
Droitwich	6	-	-	-	-	-	-	2	4
Evesham	10	-	-	-	-	-	-	7	3
Kidderminster	56	-	-	-	-	-	6	28	22
Lye & Wollescote	23	-	-	-	-	-	3	13	7
Malvern	48	-	-	-	-	-	2	16	30
Oldbury	49	-	-	-	-	2	4	26	17
Redditch	43	-	-	-	-	1	7	19	16
Stourbridge	32	-	-	-	-	-	3	15	14
Stourport	10	-	-	-	-	-	2	4	4
<i>Rural.</i>									
Bromsgrove	29	-	-	-	-	-	-	11	18
Droitwich	26	-	-	-	-	1	3	13	9
Evesham	12	-	-	-	-	-	2	3	7
Feckenham	13	-	-	-	-	-	-	7	6
Halesowen	33	-	-	-	-	-	9	14	10
Kidderminster	24	-	-	-	-	1	2	8	13
Martley	38	-	-	1	-	-	2	22	13
Newent	6	-	-	-	-	-	-	-	6
Pershore	22	-	-	-	-	-	2	14	6
Rock	2	-	-	-	-	-	-	-	2
Shipston-on-Stour	11	-	-	-	-	-	-	4	7
Stow-on-the-Wold	1	-	-	-	-	-	-	1	-
Tenbury	14	-	-	-	-	-	1	7	6
Tewkesbury	3	-	-	-	-	-	-	2	1
Upton-on-Severn	36	-	-	-	-	-	2	14	20
Winchcombe	-	-	-	-	-	-	-	-	-
Total	583	-	-	1	-	5	53	264	260

Comparing the above Table (XV.) with the corresponding one given in my last "Digest" (p. 65), it will be seen that the Local Government Board have made some change in their form; inasmuch as the age column "25 to 65," issued in 1911, has now been subdivided and the deaths at "25 to 45" and "45 to 65" years of age are shown separately. The result of this is that it appears that the majority of deaths from Cancer occurred after the age of 45; for instance, 524 of the total 583 deaths registered during 1911 and 12 (90%) were persons who were 45 years of age or more.

The "Imperial Cancer Research Committee" are still hard at work, investigating the nature and causation of "Cancer," and have arrived at most valuable conclusions during the year; but unfortunately, the Etiology of this dread disease is still wrapt in mystery.

Isolation Hospitals.

In December 1911, I prepared a "Memorandum on Pulmonary Tuberculosis," and suggested comprehensive measures for dealing with the disease. One of the proposals was, that the Hospital Authorities in the County, whose Hospital sites are suitable, should be invited to treat "intermediate" and "advanced cases" of Pulmonary Tuberculosis. This was not the first time I made this suggestion, for I did so in my "Digests" for 1908 (p. 32) and 1909 (p. 35 E). My Annual Report for 1911 (p. 71) contained the following reference to this subject:—"As some of the Hospital Authorities will—I hope—shortly be considering the question of building for the accommodation of Pulmonary Tuberculosis, it may be mentioned that I have good reason for thinking that the Local Government Board will not require anything like the cubic space for such patients as they do for those suffering from the other infectious diseases. Furthermore, it is not improbable that the Board will make 'grants' of three-fifths of the outlay involved, provided that the total sum does not exceed an average of £90 per bed."

Some months back the Bromsgrove and Stourbridge and Halesowen Hospital Committees asked the Local Government Board to "approve" their Institutions for this purpose; and the County Council who had arranged to take over the Upton-on-Severn Smallpox Hospital, made a similar application. Although the Local Government Board assented to the principle of these applications, certain legal difficulties stood in the way. Happily, however, these were eventually surmounted, so that these Hospitals have been receiving Pulmonary Tuberculosis Patients for some time. Lately the Evesham, and Tewkesbury Joint Hospital Boards also decided to admit Pulmonary Tuberculosis patients into their Hospitals.

My surmise that the Local Government Board would approve simple buildings for such patients and make "grants" of three-fifths of the outlay has, I am glad to say, turned out to be correct. On Feb. 25th 1913, the Board issued a Memorandum on the "Provision of Institutions for the treatment of Tuberculosis" in which they advocate "inexpensive buildings for the treatment of cases of Tuberculosis" . . . (and state) that "additional accommodation may generally be more expeditiously provided at, or in connection with existing hospitals . . . where provision for administration, &c., already exists . . . With regard to the

“ distribution of the capital grant made available by the Finance Act 1911, to aid the provision of Institutions for the treatment of Tuberculosis, it must be understood . . . that, as the capital grant is a fixed sum, the Board may not be able, in the case of late applications to make grants of such an amount as the circumstances of the area would otherwise justify.”

The Stourbridge and Halesowen Hospital Committee have decided to build a “Tuberculosis Pavilion” for 16 beds, the Bromsgrove Hospital Committee one for 14 beds, the Evesham Joint Hospital Board one for 6 beds and the Tewkesbury Joint Hospital Board one for 6 beds, and are submitting plans to the Local Government Board. “Grants” are being applied for, and as all the “pavilions” to be built are similar to others the Local Government Board have approved, there is little doubt the “three-fifths grants” will be available. It is hoped that *permanent* arrangements will also be made with the Kidderminster Corporation; and also with the Upton-on-Severn Smallpox Hospital Committee if it is found that the additional 58 beds at Knightwick Sanatorium do not suffice. Before the Smallpox Hospital at Welland was temporarily taken over by the County Council, arrangements were made with the Evesham and Pershore Smallpox Hospital Committee to receive any cases of Smallpox which might appear in the Malvern or Upton-on-Severn Districts, into the Evesham Committee’s Hospital, at Haselor (near Elmley Castle).

If it should eventually be agreed for the Welland Hospital to be *permanently* retained for the use of Tuberculosis patients, I think it would be quite practicable to continue the arrangement for sending Malvern and Upton Smallpox cases to Haselor. When several of the Isolation Hospital Committees in the County were constituted under the Isolation Hospital Acts, it was thought by some persons that these districts were too large. Practical experience, however, shows that this anticipation was groundless. The Local Government Board Report on Hospitals, issued in July 1912, confirms the Worcestershire experience, and states that “recent improvements in means of communication and transport enable a Hospital to serve a considerably larger area than was formerly thought practicable. . . . This is especially the case for Smallpox Hospitals, which may conveniently serve a larger area than those for other acute diseases.” I therefore confidently recommend that the Evesham and Pershore, and Upton-on-Severn Smallpox Hospital Districts be amalgamated, as the Haselor Buildings are sufficiently large for the purpose: but should it be found that they are not—which I do not anticipate—the Site is big enough for additional buildings to be erected there.

Bromsgrove Smallpox Hospital.

When I inspected this Hospital on June 16th 1913, I found it in a neglected state, and the ground adjacent to the buildings overgrown with thistles and weeds. This Hospital is certainly not in "constant readiness" to receive a patient as it ought to be. Not long since it was broken into, and numbers of cups, plates, spoons, linen, etc., were stolen. The perpetrator of this robbery was not discovered.

The Annual Reports contain the following references to Isolation Hospitals :—

Bromsgrove North Urban (Dr. Kidd).

"I am glad to say that the course which I have for so long urged, namely, the use of the Isolation Hospital for the treatment of Tuberculosis, has now been permitted, and the Joint Isolation Hospital at Hill Top is now recognised as a sanatorium for the admission of Tuberculous cases. Special wards and open-air shelters are about to be erected for the purpose, but in the meantime, the hospital being very empty this spring, one of the ordinary wards has been set apart for the reception of consumptive patients. By this means cases of Phthisis can be sent without any delay to the Isolation Hospital just as cases of Scarlet Fever or Diphtheria are at present sent."

"I hope very much that full use will be made of this opportunity of using the Isolation Hospital for the treatment of Phthisis, for I am convinced that besides being prompt and convenient, it will prove eminently advantageous."

"Suitable cases would, of course, be transferred to Knightwick or other sanatorium if necessary."

Evesham Borough (County Medical Officer).

"This is a joint Hospital for the Borough of Evesham, Evesham Rural District, and Pebworth Rural District (Gloucestershire)."

"The administration block is admittedly too small, consequently the Joint Board have the question of enlargement under their consideration."

"In my opinion the time has arrived for a Medical Superintendent, resident in Evesham, to be appointed, who should be responsible for the general control of the Institution and the staff. This need not be an expensive matter, nor interfere with the present arrangements for medical attendance, which have worked so satisfactorily so many years past. Grouping of the patients in the wards, in order as far as possible to limit the number of 'return cases,' and other things, in my opinion, call for such an appointment. The neighbouring Sanitary Authority at Pershore found it desirable to adopt this course a year or two back, and the cost has been small and the result satisfactory."

Kidderminster Borough (Dr. W. Hodgson Moore).

"The Scarlet Fever Hospital is the property of your Council, and is situated near the Stourport Road, about 1½ miles from the centre of the borough."

"Special arrangements are made for admitting patients from the following districts: Rural District of Kidderminster, Martley Rural District, Stourport Urban District, Bewdley Borough."

"We have one iron Pavilion, containing two wards, six beds in each ward, nurse's bed-sitting room, kitchen, scullery, larder, out-offices, laundry, ambulance house, mortuary, and a wooden building for the use of staff.

"This is a good building, standing high up; in my opinion it would make an excellent Sanatorium for Tubercular patients. I should like to call the attention of the County Council and the National Insurance Committee to this fact."

Oldbury Urban (Dr. G. B. Buttery).

"At the end of the year a most unfortunate condition of things occurred at the Hospital at Holly Lane, and was the cause of a good deal of inconvenience in some cases. Owing to a case of measles being imported into the Hospital, a mixed infection occurred, which caused the Hospital to be closed against any fresh cases of scarlet fever. The hospital authorities decided, and decided wisely, to take this course, and although some irritation and inconvenience were experienced, it was the only proper course to pursue. The Hospital has been thoroughly disinfected, and is now (February) open to any new cases requiring admission."

Pershore Rural (County Medical Officer).

The appointment of a Medical Officer to be responsible for the control of the Hospital—of course, under the Committee—has, I believe, been beneficial.

Shipston-on-Stour Rural (Dr. G. Findlay).

"The Isolation Hospital is situated at Shipston, in conjunction with the Brailes Rural District, and is centrally situated for both districts. The Hospital was erected in 1901, and consists of three wards capable of holding 10 patients. There is also an administrative block with quarters for a nurse, and where the caretaker and her husband reside. Only one kind of infectious disease can be accommodated at a time, and the Hospital has been used for the reception of cases of scarlet fever only since it was first opened.

"There are also two huts in the same field as the Hospital, which can be used for the prompt isolation of a case of small-pox should one occur in the district. The last time these huts were used was in 1903."

Tewkesbury Rural (Dr. A. F. Turner).

"The new Joint Isolation Hospital, I am sorry to say, is not yet completed, though I hope it will be before the end of March. The building operations have been much delayed owing to bad weather, and strikes on the railways, which interfered with the transport of building material."*

* Since the report was written this work has been completed, and the Isolation Hospital is now a very complete building.

Nurses for Domiciliary Treatment of Infectious Diseases.

The Pershore Rural District, who have not provided any hospital accommodation for diphtheria patients, at one time employed a nurse for treating the patients at home, and this was certainly the best thing to do under the circumstances.

The Local Government Board have, however, recently decided that a District Council who have not provided hospital accommodation for cases of infectious disease have no legal authority to provide nurses for attendance on patients at their own homes.

“ By Section 67 of the Public Health Acts Amendment Act, 1907 (7 Edw. vii., c. 53), it is enacted *inter alia* that a local authority may provide Nurses for attendance on patients suffering from any infectious disease in their district who, owing to want of accommodation at the hospital or danger of infection, cannot be removed to the hospital or in cases where removal to the hospital is likely to endanger the patients' health.” In reply to an enquiry addressed to them on the subject, the Local Government Board have stated that “ whilst a District Council who have provided hospital accommodation for cases of infectious disease occurring in their district might acquire power under the section above mentioned to provide nurses for attendance on patients under the conditions therein referred to, there is no legal authority which would enable a District Council who have not provided hospital accommodation to provide nurses for attendance on patients at their own homes.”

Sanitary Work.

Housing, Town Planning, etc., Act, 1909.

Improvement of the housing accommodation for the working-classes is undoubtedly one of the most pressing sanitary questions of the day, and it is now generally recognised that the prevention of Tuberculosis is largely dependent upon it. The Medical Officers of Health for Bromsgrove (Dr. Kidd), and Stourport (Dr. Robinson), Urban Districts, specially allude to this association, and the former says: “ In the matter of phthisis prevention, unquestionably housing takes the first place; for all the Sanatoria and Dispensaries in the world will do no real good if the people have to return to ill-lighted, ill-ventilated, damp, dirty and crowded dwellings. It is for this reason that housing should be considered first, foremost, and all the time.”

Each of the Medical Officers and Sanitary Inspectors in the County describes the working of the Act in his district: and it is obvious that the *majority* of the Worcestershire Authorities are taking active measures.

In February last I presented a “ Special report ” on this subject, and at your meeting on 3 May 1913, you directed me to embody in this report, the action taken by each Sanitary Authority during 1912.

In order that you may compare the work undertaken in 1911 with that of last year, I submit the following tabular statement :—

From this table it appears that only 470 houses were built in the County during 1912, as compared with an annual average of 700 during each of the previous 5 years, and that the number of houses erected last year was less than the 1907-11 average in each district, except Droitwich and Kidderminster Boroughs, and Bromsgrove, Pershore, and Upton-on-Severn Rural Districts, in which districts the increases were small.

161 houses in the County were closed last year ; but there is no information as to how many of the 470 houses built were cottages. As instructed, your Clerk wrote the Clerks of the Rural District Councils in the County on February 28th, 1910, that by S. 69 of the Housing, Town Planning, etc., Act, 1909, it was their duty to send to me a copy of any representation, complaint, or information, mentioned in S. 45 of the Housing of the Working Classes Act, 1890. This latter section includes a copy of any "closing order" that is made. From the returns made by the Sanitary Inspectors, it appears that 47 closing orders were made in the Rural Districts in the course of the year 1912. Notices of only seven of these orders were sent to me : consequently I suggest that your Clerk again reminds the Rural Clerks of their obligations in this respect. Of 245 represented to be unfit for habitation, 161 were closed. 4,767 houses were inspected under the Act in 1912, as compared with 4,197 in 1911 ; consequently, it appears that taking the County as a whole, the year 1912 did not manifest very great additional vigour under the Housing Act of 1909.

Before alluding to any details of house inspection, it should be mentioned that the inspection required under this Act extends to all dwelling-houses, whether occupied or unoccupied ; for the Local Government Board have expressed their opinion that in view of the provisions of Sections 17 (1), 36 (c) and 49 (1) of the Housing, Town Planning, etc., Act, 1909, the power of inspection conferred upon the Local Authority by Section 17 of the Act would *extend to all dwellings in the district of the Local Authority whether occupied or un-occupied.*

Only 11 houses in Bewdley were inspected last year as compared with 37 in 1911, and Dr. Miles says the number of houses dealt with last year is undoubtedly small, but the inspection was begun in the part of the Town where the percentage of houses which are unfit for habitation is very large, and where difficulties of dealing with them are very great. He anticipates that faster progress is likely to be made when the better parts of the town are reached.

I trust this will be so ; for the number dealt with is, as Dr. Miles says, "undoubtedly small."

HOUSING TOWN PLANNING &c. ACT 1909.

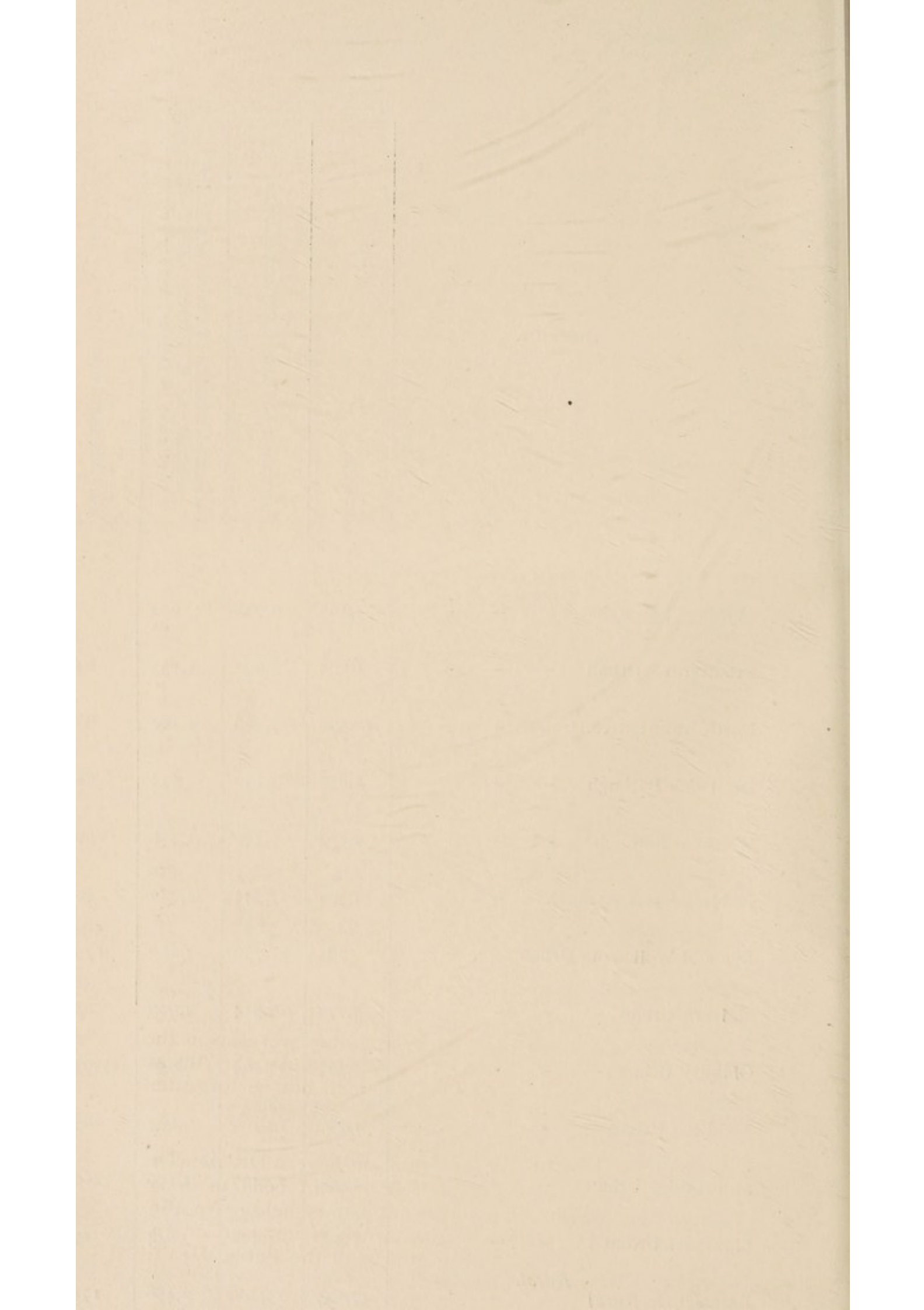
DISTRICT.	Acreage.	Population of District (estimated 1912).	Estimated number of houses within limits of Section 14 of Housing, Town Planning Act 1909 in December 1911 (viz. L/16).	No. of houses built 1907-1911 inclusive.	1911.		1912.		1911.		1912.		1911.		1912.		1911.		1912.		1911.		1912.		1911.		1912.		1911.		1912.		1911.		1912.	
					No. of houses inspected in :-	No. of houses represented as unfit for habitation in :-	No. of Closing Orders made by Local Authority in :-	No. of Closing Orders that became operative in :-	No. of defects remedied without Closing Orders in :-	No. of defects remedied after Closing Orders in :-	No. of Closing Orders determined in :-	No. of houses demolished in :-	No. of Orders to execute works under Section 13 in :-	No. of Orders to execute works under Section 15, complied with in :-	No. of cases of overcrowding abated in :-																					
Bewdley Borough	Urban.	2,105	2,745	672	6	0	37	11	15	7	0	1	0	1	6	-	0	-	0	1	1	-	1	6	-	2	1	2								
Bromsgrove Urban	-	1,068	8,950	1,753	64	0	15	61	0	1	0	0	0	0	41	34	0	-	0	-	0	-	0	16	0	15	0	-								
North Bromsgrove Urban	-	10,592	7,300	1,160	83	13	130	121	0	-	0	-	0	-	82	-	0	-	0	-	0	-	0	72	0	-	4	2								
Droitwich Borough	-	1,856	4,146	631	28	11	35	10	7	2	0	2	0	2	(i) 25	0	0	0	0	0	4	Vol.	3	0	0	0	0	3	0							
Evesham Borough	-	2,265	8,340	1,410	166	27	140	181	0	1	0	0	0	0	119	114	0	-	0	-	0	1	61	11	35	11	1	1								
Kidderminster Borough	-	2,504	27,544	4,742	41	16	413	723	28	36	28	30	44	30	126	2,927	196	81	31	19	14	(h) 4	0	4	0	0	24	13	16							
Lye and Wollescote Urban	-	784	11,796	2,200	179	7	94	257	6	19	6	19	-	19	0	759	0	15	0	2	By Order (g)	4	(j)	88	0	81	8	26								
Malvern Urban	-	4,774	16,514	2,000	93	6	207	149	8	8	8	11	9	11	716	151	0	4	0	4	0	6	0	-	0	-	6	7								
Oldbury Urban	-	3,527	33,164	6,858	1,393	110	720	482	14	13	14	14	19	9	(d) 828	(o) 720	0	(o) 90	0	8	20	17	0	-	0	-	20	19								
Redditch Urban	-	1,023	15,700	2,884	263	45	223	202	54	2	0	0	(c)	-	2,800	-	†	-	0	-	1	-	(k)	-	165	-	25	-								
Stourbridge Urban	-	1,920	17,497	3,170	260	42	172	188	16	47	16	47	23	38	1,480 (e)	1,976	124	526	1	28	20	12	10	22	5	12	9	4								
Stourport Urban	-	1,340	4,422	844	17	4	15	102	0	1	0	1	0	1	(f) 59	255	0	-	0	-	0	1	0	-	0	-	0	-								
Bromsgrove Rural	Rural.	47,047	15,200	2,488	174	40	99	129	0	5	0	1	0	1	37	50	0	1	0	-	0	-	0	-	0	-	0	-	3	1						
Droitwich Rural	-	53,079	12,975	2,586	84	11	43	34	14	5	11	5	4	4	18	27	6	2	6	2	4	(h) 5	6	8	3	4	1	1								
Evesham Rural	-	28,088	9,095	1,835	173	27	83	101	62	9	22	7	20	10	29	31	6	6	6	2	2	9	7	12	1	8	9	5								
Feckenham Rural	-	15,203	5,456	1,049	11	4	154	111	4	3	4	3	4	3	8	6	1	-	-	-	-	-	137	111	123	80	4	-								
Halesowen Rural	-	5,485	25,975	4,190	273	27	130	423	30	2	30	2	26	10	463	1,525	0	121	0	-	9	2	45	56	30	31	-	4								
Kidderminster Rural	-	31,641	7,356	80% of total (2,260)	*47	9	632	405	11	35	(b)	7	0	3	512	29	‡	4	0	3	(h) 0	0	-	35	-	32	29	25								
Martley Rural	-	50,170	13,063	(v) 2,300	54	9	528	417	10	11	10	4	10	4	-	13	1	0	1	0	(i)	2	(l)	5	-	5	5	4								
Pershore Rural	-	53,728	13,235	-	79	25	150	246	6	12	6	0	0	0	(u)	47	At 12 houses.	-	1	-	‡ 3	3	4	5	4	5	20	4								
Rock Rural	-	13,314	2,210	-	8	1	38	10	1	1	2	0	-	0	-	0	1	0	-	-	1	0	0	0	0	0	0	0								
Shipston-on-Stour Rural	-	18,466	4,712	(v) 900	(a)	-	30	162	18	8	2	2	0	2	10	99	0	(r) 1	0	-	6	closed	-	0	-	0	-	0	3							
Tenbury Rural	-	23,434	4,713	(v) 600	30	5	62	102	5	4	0	3	0	2	3	1	-	1	-	2	-	(s) 0	40	2	33	2	2	1								
Tewkesbury Rural (part of)	-	10,019	2,317	420	15	-	-	45	-	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-									
Upton-on-Severn Rural	-	50,035	14,596	2,637	38	11	47	35	8	11	-	11	7	11	5	(r) 1	0	0	0	0	‡ 6	‡ 1	0	-	0	-	0	1								
Totals	-				3579	470	4197	4767	317	245	159	172	172	161	7367	8765	247	852	49	71	91	66	311	453	399	312	163	126								

*1908-1911.
†None, all work done voluntarily.
‡In one house.
§No Closing Orders issued.
||All at Pershore.
¶Demolished by Owner.

(a) No Building Byelaws, so number not known.
(b) Eleven houses unfit closed by arrangement with owners
(c) 4 closed voluntarily.
(d) In 240 houses.
(e) In 74 houses.
(f) In 15 houses.
(g) 39 voluntarily.

(h) 2 Voluntarily.
(i) 3
(j) Notices served in 1912.
(k) 189 notices complied with after letters.
(l) Large amount of work carried out by owners "on request."
(m) Defects remedied under Section 15.

(n) Does not include drainage, closet accommodation and sinks.
(o) Seven others in January 1912.
(p) Summary of defects at monthly meetings.
(q) 1 House.
(r) 7 Demolition Orders made.
(s) In 25 houses.
(t) At 23 houses.



Dr. Kidd explains that only 61 houses were dealt with in the Bromsgrove Urban District, as "the Inspectors' time is so fully occupied." He does not anticipate that the Inspector will "be able, without neglecting his other duties, to do more than "10 or 12 houses a month, at which rate, the record will take "12 years to complete." Consequently he advises his Council to put the work "in the hands of some qualified official."

Dr. Kidd, who is also Medical Officer of Health to Bromsgrove North Urban Council, considers that the work is slow in that district, owing to the Inspector having lack of time.

As regards the small number of houses inspected in Droitwich Borough—10—Dr. Roden says, "procedure under this Act is "necessarily slow, as it is impossible to close certain houses which "are at present in a bad state of repair, because there are no "others for the people to occupy."

I would point out that "closure" by no means always follows inspection, and unless the houses are inspected under the Act, the true state of affairs will not be ascertained.

Dr. Darby states that in Lye Urban District it will be some years before the 2,497 houses can be visited, consequently he advises that a youth should be appointed as a Sanitary Clerk, in order to enable the Inspector to do more inspections.

It will be observed that only 34 houses in Droitwich Rural District were inspected in 1912 (at the rate of less than three a month) and 43 in 1911. There were 3,130 separate occupiers in this district when the 1911 census was taken; so if but 40 are inspected annually, it will take 78 years before one inspection of each house is made.

Although so many houses in Martley Rural District were inspected, 417 in 1912 and 528 in 1911, the Sanitary Inspector (Mr. Inskip) says that, "chiefly owing to the very wet season (he "has) been unable to make as many inspections under the Act as "last year." In connection with this, it should not be forgotten that Martley is a large sparsely-populated Rural District.

The Medical Officer of Health for Upton-on-Severn District (Dr. Cowley) says, "No systematic inspection has yet been made of "the district, but a record of a large number is held. Another "Inspector is needed, as so much extra work is imposed on the "present one in this, and duties connected with the Public Health "(Tuberculosis) and other regulations."

The Medical Officers of Bewdley, Halesowen, and Rock, refer to the financial difficulty of dealing with defective cottages, owing to the people who own them, being little better off,—or even as well off—as those who live in them.

Another difficulty connected with housing (several Medical Officers mention) is due to undesirable tenants being unable to obtain Cottages. The Sanitary Inspector for Redditch (Mr. Jameson), “found it necessary to bring pressure to bear on some “tenants, who, after the Owners have done everything in their “power to make their houses habitable, have through careless and “filthy habits made the houses almost as bad as they were before “the improvements were carried out. In consequence of notices “served upon such tenants under the Public Health Acts, decided “improvement resulted.”

It is unnecessary to enumerate the ordinary defects met with at the houses of the working classes, as they are so generally well-known. In order to facilitate their rectification, the Sanitary Inspectors of Kidderminster Borough (Mr. Cowderoy), and Redditch (Mr. Jameson) and Stourbridge (Mr. Kent) Urban Districts, have (with the approval of their Committees) issued model “Specifications,” which they send to those Owners of defective houses, who are called upon to make improvements.

This procedure has been found very useful, and to be appreciated by such Owners. I trust, therefore, other Sanitary Authorities in the County will follow this good lead.

Mr. Jameson estimates that the owners of defective property in Redditch expended £2,310 under the Act last year, and Mr. Kent says that during the same period in Stourbridge, “the cost “of the repairs done through the operation of the Act was “upwards of £1,750.”

The Annual Reports for last year, and my Special Housing report of Feb. 1913 show, that there is scarcity of Labourers' Cottages in the following Districts, viz. :—

Bewdley Borough.

Bromsgrove North Urban District.

Droitwich Borough.

Evesham Borough.

Kidderminster Borough.

Lye Urban District.

Redditch.

Stourport.

Bromsgrove Rural

- *(Alvechurch, Webheath, Stoke Prior, Coston Hackett, Hunnington, Hagley and Pedmore).

Droitwich	-	-	-	(Martin Hussingtree and Crowle).
Evesham	-	-	-	(Offenham, and the Littletons).
Feckenham	-	-	-	(Astwood Bank, Cookhill, and Inkberrow).
Halesowen	-	-	-	
Pershore	-	-	-	(Crophorne, Fladbury, Peopleton, and Pershore).
Shipston	-	-	-	(Shipston-on-Stour).
Tewkesbury	-	-	-	(Bredon).
Upton	-	-	-	(Castlemorton, and other parishes).

* The Medical Officer of Health says, "Certain pressure of accommodation "is kept up by the overflow population from the neighbouring towns "of Birmingham, Redditch, Stourbridge, and Halesowen."

As the Evesham Rural District Council have already erected 60 cottages at Broadway, and have decided to build 20 at Offenham, and 36 at "The Littletons," it justly marks them as pioneers in Rural housing matters; and I am glad to say that the success of their enterprise seems to be inducing other Authorities—and particularly those in the Southern part of the County—to follow their good example.

Droitwich Corporation have applied to the Local Government Board for a Loan of £1,980 to build 12 cottages, the Pershore Rural Council for another of £2,800 for 16 houses at Pinvin, and Upton-on-Severn Rural Council one of £900 for cottages at Castle-morton. At the Local Government Board Enquiry held at Castle-morton on May 15th, 1913, it was, however, decided to withdraw the application and submit another, entailing less expenditure.

The Redditch Urban Council have prepared a Scheme for 31 cottages, estimated to cost £6,182.

The "estimates" of these Schemes which have been carefully scrutinized by the Local Government Board, indicate that the Annual call upon the rates for the Broadway Scheme will be £23 5s., for the Droitwich Borough Scheme £4 5s. 2d., for the Pershore Rural Council Scheme £22 4s. 7d., and that the Redditch Scheme will show a balance in favour of the Council of £8 18s. 7d.

It is believed that if the rents of Pershore Council are increased from 3/6 to 3/9, the deficiency will be much reduced.

These contemplated Annual deficiencies to be met by the local rates are so small, that other Authorities should not be deterred from building by the "burden upon the rates" bogey.

Evesham Corporation, Lye Urban and Tenbury Rural Council's, have decided not to build until sufficient time has elapsed to enable them to decide whether or not "private enterprise" will meet local requirements. In connection with such a proposal, I would repeat a statement I made in my Special Housing Report: "As regards the question of Local Authorities themselves building cottages, it is sometimes alleged that Municipalities should not compete with private enterprise. But since the Housing Act affords Public Authorities special facilities for acquiring land and building on particularly favourable terms, it is obvious that so far as dwellings at weekly rentals not exceeding 2s. 6d. to 3s. 6d. are concerned, private owners cannot compete, as they cannot get adequate return for their outlay, and consequently they are not inclined to build."

The following "Extracts" refer to the work done during 1912 in each District:—

Bewdley Borough (Dr. Miles).

The number of houses dealt with since the passing of the Act is undoubtedly small, but inspection was begun in the part of the town where the percentage of houses which are unfit for habitation is very large, and where the difficulties of dealing with them are the greatest. The property dealt with so far is all in the hands of very small owners, and every opportunity is being given them to remedy defects sooner than compel them to close them altogether. Much faster progress is likely to be made when the better parts of the town are inspected.

The old, cheap houses seem an attraction to an undesirable class of people from outside the borough.

One of the greatest difficulties in dealing with the cottage property is that the greater part of it is owned by people who are little better off than the people who live in it.

Dr. Miles says it is hard on the individual property owner, who is in many cases not at all well off, but he is sure the town will benefit in the long run if this class of house is either closed or forced to be put into such a state of repair as to command a higher rent from a better class of tenant. It is well known that any decent house suitable for a working man is never empty; he would like the Council to seriously consider the possibility of building workmen's cottages themselves.

No new house was built during the year, and so little building of cottages has been done in the borough for so many years that practically the whole of the houses of the working classes are very old.

Bromsgrove Urban (Dr. Kidd).

"In the matter of phthisis prevention, unquestionably housing takes the first place, for all the sanatoria and dispensaries in the world will do no real good if the people have to return to ill-lighted, ill-ventilated, damp, dirty, and crowded dwellings, and it is for this reason that housing should be considered first, foremost, and all the time."

No new house was built for the second year in succession. Many of the older houses in the town remain defective, but improvement proceeds as the defects are discovered.

He says. "It is all very well to have power . . . to order the demolition of a house that may be obstructing the free light and air of a neighbouring house, but in a small town such as this, where every family is known, the practical difficulties are very great."

Only 61 houses were inspected under the Act last year, which is on an average 5 per month; and Dr. Kidd stated in his Annual Report for 1910 that the Inspector's time is very fully occupied, that he does not anticipate that the Inspector will be able, without neglecting his other duties, to do more than 10 or 12 houses a month, at which rate the record will take 12 years to complete; consequently, he thinks it would be better to treat it as an extra work altogether, which should be put in the hands of some qualified official, and carried through as may be until the whole record is complete.

Bromsgrove North Urban (Dr. Kidd).

121 houses were inspected under the Act last year, as compared with 130 in 1911. Dr. Kidd mentioned in his 1910 report that "the Sanitary Inspector's time is pretty fully occupied as it is, and it will be impossible for him in the intervals of his regular work to do more than a few houses each month. . . . If the Inspector does 10 houses a month . . . the inspection of the whole district will take over 12 years."

In connection with this statement, it should be said that the present Sanitary Inspector is also District Surveyor, and consequently it can easily be realized that his time is "pretty fully occupied." Under these circumstances it seems to me the joint offices of Sanitary Inspector and District Surveyor might advisedly be separated, considering the large area he has to supervise. Dr. Kidd says in his report for last year that "progress continues to be made, if slowly," and that "it is not always the old houses that are found in a bad state, some tenants quickly reducing any house to a condition injurious to health from sheer want of cleanliness."

In my Special Report on Housing I showed that Dr. Kidd is of opinion that there is a permanent want of good cottages with three sleeping-rooms, and what overcrowding exists is due to the old two-bedroom houses.

Droitwich Borough (Dr. Roden).

10 houses were inspected last year, as compared with 35 in 1911. 11 houses were built during the year, and 3 were pulled down. Procedure under the Act is said to be necessarily slow, as it is impossible to close certain houses, which are in a bad state of repair, because there are no other houses for the people to occupy.

A Local Government Board Inquiry was held on January 24th, 1913, as to a loan of £1,700 asked by the Town Council for the erection of 12 cottages. These houses will be erected in three blocks of 4 houses each. Some details of them are given in my Special Report on Housing (1st February, 1913).

Evesham Borough (County Medical Officer).

181 houses were inspected, and no "closing order" was made during the year: this latter circumstance was not owing to the satisfactory condition of the cottages, for no less than 72 are known to be in poor condition. It has not been practicable to make greater use of the Act owing to lack of cottages. There is undoubtedly a great scarcity of workmen's dwellings, for a cottage is never vacant for longer than necessary for change of tenancies to take place.

In 1911 a scheme was propounded for providing cottages by private enterprise, but this has not yet matured, so the Corporation have appointed a Special Committee to go into the question, and if necessary to advise the Council how they can best deal with it. In my opinion, I think the Corporation should build cottages capable of being let *at rents which labourers can afford to pay*, for I do not think this class of house can be provided in any other way.

Kidderminster Borough (Dr. Hodgson Moore).

It is reported that the work under the Act is proceeding in a satisfactory manner; and that the housing problem is becoming rather difficult to deal with, as there are very few houses empty at a rent of 3s. or 3s. 6d. per week, consequently bad cases of overcrowding are reported. All the houses built during the last 2 or 3 years are rented at 5s. per week and upwards. The undesirability of the tenant has something to do with obtaining houses, and is not altogether unconnected with the overcrowding problem. The better class landlord is doing a great deal voluntarily. The Health Committee—The Sanitary Inspector (Mr. Cowderoy) reports; have issued a "specification" as a guide to what they require when orders are given to repair houses under the Act, and refer to: Walls, damp-proof courses, ceilings, floors, staircases, windows, pantries, bedrooms, cellars, roofs, drains and sinks, water supply, paving, washhouses, w.c.'s, "back-to-back" houses, spouting, and ashpits.

Lye and Wollescote Urban (Dr. Darby).

Dr. Darby says, "The work under the Act is progressing very well." The inspections are made "street by street," some of the worst quarters of the district have been taken first. Some property owners are acting without waiting for the Inspector's visits. It will, however, be some years before the 2,497 houses can be visited. Dr. Darby advises that a youth should be appointed as a Sanitary Clerk, as the Inspector could be set free to do more inspection; if this is not done, he fears inspection under the Act will fall into arrear. Dr. Darby has brought the need of more houses at low rentals to the notice of his Council. This requirement is not at present very pressing, but if houses have to be closed, it will be necessary to erect some in the near future. It appears that it is the intention of the Council to allow a little time to elapse, for the display of private enterprise, and that if the need exists at the end of that time, to themselves consider the question of erecting cheap houses.

Malvern Urban (Dr. Mitchell).

Work under the Act is being systematically carried out. The Inspector's (Mr. Hillyard) Report shows that a good deal is being done, and the Chairman and some of the members of the Sanitary Committee have visited several localities. Mr. Hillyard says, "The cases of overcrowding that have been met with are those of large families with slender means of maintenance. The parents of such families occasionally find great difficulty in securing a home with sufficient accommodation for their needs."

Dr. Mitchell states that "taken as a whole, the accommodation for workmen in the district is sufficient."

Oldbury Urban (Dr. Buttery).

Dr. Buttery says, "The greater part of the houses are rated below £16 per annum, whilst many of them are rated below £12 per annum"

(and) . . . the carrying out of the requirements of the Housing and Town Planning Act is almost sufficient itself for our department to cope with."

The Sanitary Inspector (Mr. Robbins) reports that "the working of this Act has been steadily maintained, and house-to-house inspection carefully carried out. . . . There is now plenty of good house accommodation, with good sanitary surroundings, and 110 new houses have been erected during the year."

Redditch Urban (Dr. Stevenson).

Dr. Stevenson writes, "Very fortunately the Inspector was able to devote a large share of his time during the year to the practical working of this Act . . . (but) there is much work yet to be done in improving the smaller class of property in the town. . . . One of the greatest needs is moderately priced houses. . . . Undoubtedly many working-class tenants are in a serious position, and many workers in the town are compelled to live in neighbouring villages. . . . (The) Council has during the year purchased at a moderate price, some land suitable for the erection of workmen's dwellings."

The Sanitary Inspector (Mr. Jameson) found it necessary to bring pressure to bear on some tenants who, after owners have done everything in their power to make their houses habitable, have through careless and filthy habits made the houses almost as bad as they were before the improvements were carried out. In consequence of notices served upon such tenants under the Public Health Acts, decided improvement resulted. Mr. Jameson mentions "that while there have been considerable difficulties to be met in order to deal effectively with certain property, it has not been found necessary to take proceedings against defaulting landlords." He estimates that the work carried out under the Act on 145 houses have cost approximately £2,310. A great many cases of overcrowding have been found.

Mr. Jameson issues a letter "specification" to owners required to make alterations, which makes recommendations for dealing with defective floors, damp courses, walls, bedrooms, windows, closets, water supply, drainage, roofs, spouting, pantries, etc. This has been found most useful, and resulted in excellent work being done.

Stourbridge Urban (Dr. Wilberforce Freer).

Dr. Freer states that "Under the Housing and Town Planning Act, and the Public Health Amendment Act, 1907, a large amount of work has been done, not only in making unfit dwelling-houses fit for human habitation, but also in providing for the use of the occupiers greater conveniences. . . . There is an adequate number of artisans' houses. There is no considerable amount of overcrowding."

The Sanitary Inspector's (Mr. Kent) Report gives details of much good housing work, and mentions that "the cost of the repairs done through the operation of this Act was upwards of £1,750." By direction of the Stourbridge Sanitary Committee he issues a circular with the Closing Orders setting out details of the action to be taken, and a general outline of the repairs and alterations required. At the request of several property owners, he also supplied detailed specifications of the works necessary to put their houses into proper state of repair.

Stourport Urban (Dr. Robinson).

Dr. Robinson reports, "A good deal of inspection has been done by myself and the Sanitary Inspector in connection with cases of notifiable disease, and the Housing, Town Planning, etc., Act, 1909. More would have been done had it been possible to find the necessary time. . . . I am convinced that prevention of Tuberculosis will be attained only by dealing thoroughly with the insanitary cottage property which forms so large a proportion of the whole."

In the Special Report I made in February last, I mentioned that Dr. Robinson was of opinion that "the problem of the housing of the working classes promises to become acute. For many years dealing with this class of property was postponed till the completion of the sewage scheme. About 10 per cent. of the houses in the district is of the 'back-to-back' type, and though the Council is anxious to deal effectively with this class of property by Closing Orders where necessary, it is handicapped by the fact that almost every habitable house is occupied, and there is nowhere for evicted tenants to go."

Dr. Robinson says, in his 1912 Report, "If private enterprise is unwilling or unable to build cottage property, I hope the Council will decide to do so themselves."

Bromsgrove Rural (Dr. Coaker).

"Forty new houses were erected in the district. There are practically no empty cottages in the district, and a certain pressure of accommodation is kept up by the overflow population from the neighbouring towns of Birmingham, Redditch, Stourbridge, and Halesowen, where trade has been brisk for some time. No doubt, if working-class houses were erected at Alvechurch, Webheath, Stoke Prior, Coston-Hackett, Hunnington, Hagley, and Pedmore they would quickly be tenanted by this overflow population, but the intrinsic needs of the district are fairly well satisfied; although to my mind it is apparent that more accommodation will be needed in the future. As regards the Council building cottages, an interesting memorandum on the outlay and estimated income has been laid before you by the County Medical Officer."

Droitwich Rural (Dr. Wilkinson).

Dr. Wilkinson says, "New cottages are required at Martin Hussingtree; otherwise the accommodation of the district seems sufficient." In a return he made for my Special Report, he mentioned that there was also a scarcity of cottages at Crowle.

Evesham Rural (County Medical Officer).

The firm position the Evesham Rural Council have maintained where opposition to housing orders was offered, and their progressive action in so successfully carrying through a scheme by which 60 cottages have been built at Broadway, justly marks this Council as pioneers in rural housing matters. As the Broadway Housing Scheme is fully described in my "Special Report," and has just been alluded to, further reference is unnecessary. Anyone reading the Sanitary Inspector's (Mr. Holloway) Report will realize that the District Council have in many ways made great use of the Act.

As there is a decided want of cottages at Norton and Lenchwick, the District Council took the matter up, but ultimately decided not to build, as a large owner proceeded to build 4 cottages. This, how-

ever, will only partially meet local requirements; and it seems to me a pity that the living-rooms of these houses will face almost due north, whereas they could readily have been placed so that the sun had free access.

The Rural District Council have also decided to build 20 cottages at Offenham, and 36 at Littleton villages.

Feckenham Rural (County Medical Officer).

This Council have recently appointed a "Special Housing Committee" to examine the Inspector's "records," as there was not sufficient time to do so at their ordinary meetings.

As there is strong "prima facie" evidence that more cottages are needed at Astwood Bank, Cookhill, and Inkberrow, Special District Council Committees are about to hold local inquiries at these places.

Several of the cottages at Abbots Morton are in a dilapidated condition, and really ought to be closed. Two of these are occupied by aged people, who have lived there many years. To evict these old people would be cruel, and, as they are not likely to live many years, a patching-up process should be adopted. As there are now two vacant cottages in the village, I cannot advise that as yet the District Council should be called upon to build.

Halesowen Rural (Dr. Brett Young).

Owing to the late Sanitary Inspector (Mr. C. Whitworth) resigning his appointment in March, 1911, and to his successor not coming into office until the following July, that district did not show such a good record of housing work as it would otherwise have done. During 1912, however, systematic inspection was made, and 452 "records" were placed before the local Housing Committee. Considerable progress—the Sanitary Inspector (Mr. Shaw) says—"has been made under Section 15. . . . In all cases through ventilation and lighting of rooms and pantries has received special attention. The great difficulty met with has been: the owners' alleged financial inability to comply with the notices, which is, no doubt, too true in many cases, but with a little latitude as to time the difficulty has been overcome."

Dr. Brett Young makes no recommendation in his Annual Report as to the Halesowen Council building cottages, but in my Special Report I mentioned that he is of opinion "that there is a scarcity of houses."

Kidderminster Rural (Dr. E. H. Addenbrooke).

Dr. E. H. Addenbrooke reports: "Houses are becoming rather scarce in Wolverley and Wribbenhall, and it is difficult sometimes when overcrowding is dealt with to find a vacant house. In other parts of the district the accommodation for artisans and labourers is sufficient. . . . No action has been taken so far under the Housing Act."

The Sanitary Inspector (Mr. Llewellyn) reports: "In accordance with requirements of the (Housing) Act . . . a systematic inspection (in company with the Medical Officer of Health) of houses in the poorer parts of the district has been carried out, and a full record, covering all that is required under the above Act, has been kept. During the past year 405 houses in Cookley, Wolverley, Trimpley, and Hoobrook were thoroughly inspected, and various defects found. Taking the houses and cottages in the district as a whole, the housing accommodation for the working classes is very good."

Martley Rural (Dr. Dykes).

Dr. Dykes says: "The lighting of a good many of the houses is poor, and many of the windows downstairs are found not made to open. The bedroom accommodation is not good, only a few of the more modern cottages having three bedrooms. The majority simply have one large bedroom, and a large landing at the top of the stairs making the second bedroom. None of the older cottages have a damp-proof course. . . . The supply of houses equals the demand."

The Sanitary Inspector reports that, "Chiefly owing to the very wet season (he has) been unable to make as many inspections under the Housing, Town Planning, etc., Act, as last year." Referring to the want of damp-proof courses, Mr. Inskip says, "As the majority of cottages are so constructed that this defect cannot be remedied (he is) often at a loss to know what to do in the matter."

Pershore Rural (County Medical Officer).

As a result of representation made by Pinvin Parish Council to the Local Government Board that the Pershore Rural Council were in default as regards building cottages in that village, the District have applied to the Board for a loan of £2,800 to enable them to erect 16 cottages. It is estimated that the annual rents of these cottages, at 3s. 6d. per week each, and allowing £3 for "voids," will be £142 12s. 0d., and that after repayment of interest and capital on loan, and all other expenses, £22 4s. 7d. will have to be found by rate every year. As yet, however, the Board's sanction has not been obtained.

A representation was made to the Local Government Board that cottages were required at Birlingham, but I am convinced that at present there is no necessity for the District Council to build, as the supply is equal to the demand. Furthermore, the cottages in this village are in fairly good order, but indeed above the average condition.

The Pershore Council have also recently received representations from the Parish Councils at Cropthorne, Fladbury, and Peopleton that cottages are needed in those villages; consequently the Committee of the Pershore Council have already held local enquiries at Cropthorne and Fladbury, with the result that the District Council have decided to build six cottages in each of these villages.

Rock Rural (Dr. White).

Dr. White says: "On account of the age of a number of houses scattered about, a good deal still requires to be done before the housing conditions of the working classes is altogether satisfactory in the district. Some cottages which nominally belong to the tenants are in a very dirty and dilapidated condition, but their owners are without the means to put them in a sanitary state."

Shipston-on-Stour Rural (Dr. Findlay).

Dr. Findlay says: "At Shipston, as I reported last year, I thought there was a scarcity of cottages suitable for the labouring classes. The Council had the matter before them, but did not consider there was sufficient demand to necessitate building by the Council. A petition, signed by four residents in the town, asking the Council to consider the subject of building more cottages, was presented to the Council. . . . There appears to be plenty of cottages at Blockley and Tredington for the people."

Tenbury Rural (Dr. White).

"The Council have had under consideration the question of building workmen's cottages, there being obviously no surplus of cottages. Some difficulty was encountered in closing some which were represented as unfit; but as private owners have promised to build about a dozen, the matter has been postponed for a time."

Tewkesbury Rural (Dr. Turner).

"The work of this Act progresses steadily, if slowly. . . . It is a very difficult question for a Medical Officer of Health to decide as to the recommendation for the making of Closing Orders. The closing of a house is in many cases almost impossible owing to the want of house accommodation elsewhere, and it frequently drives the inhabitants of the rural district into the neighbouring town of Tewkesbury, where housing accommodation is very much wanted for the town's requirements. If the closing of houses is to become more frequent, it will be absolutely necessary for fresh houses to be put up, or otherwise the rural district will become depopulated."

I stated in my Special Report that Dr. Turner was of opinion that there is a scarcity of cottages at Bredon, and that the District Council should build ten.

The Tewkesbury District Council invited me to discuss this question with them, and decided to hold a local inquiry, the outcome of which was, that the Council have come to the decision that they should build ten cottages at once.

Upton-on-Severn Rural (Dr. Cowley).

Dr. Cowley says: "There is hardly a parish in this district in which few or many houses are up to present day requirements. . . . To condemn all those which could reasonably be considered unfit would place the district in difficulties, unless building of others had preceded such measures. The fact that private enterprise has ceased, throws the onus, where the necessity exists, on local authorities. . . . The Committee appointed for dealing with the subject has met monthly, and on their recommendation (it has been) decided to build two pairs of cottages at Castle Morton. . . . This is a beginning, and as there is a manifest want in other parishes, I trust the authority will be encouraged to proceed with the good work."

A Local Government Board Inquiry as to a loan of £900 for building the four cottages at Castle Morton was held on May 15th, 1913, when the Council applied to withdraw the scheme on the ground of the cost, and undertook to submit a cheaper one. This they are now doing.

Dr. Cowley also says: "No systematic inspection has yet been made of the district, but a record of a large number is held. Another Inspector is needed, as so much extra work is imposed on the present one in this, and duties connected with the Public Health (Tuberculosis) and other regulations."

Water Supply.

The Annual Reports shew that the local Water Supplies have received considerable attention during the year. The Local Government Board have sanctioned a loan of £13,000 which will enable the Evesham Rural District Council to purchase 250,000 gallons of water per day from springs at Stanway (Cotswold

Hills), in order to augment their "Evesham Village Water Scheme" which was carried out with such success some years back. It will also enable the Rural District Council to lay down Water-works at Offenham, and to provide water for the Villages of Badsey, Wickhamford, Aldington, and Hampton, which have hitherto been supplied in bulk by Evesham Corporation at a charge of 1s. 4d. per 1,000 gallons.

The Pershore Rural Council have recently agreed to purchase some springs at Staunton (Cotswold Hills) and to lay down Works for supplying the Town of Pershore, and Villages of Cropthorne and Pinvin with water.

The purchase of these Springs involves an outlay of £9,000: whereas had the Pershore Council bought them when they were offered some years ago, they would only have cost £3,000.

Application has not yet been made to the Local Government Board for a loan to carry out this Scheme, as the purchase of the Springs has not been legally "completed," and the Engineers (Messrs. Willcox and Raikes) have not prepared detail plans.

The Bromsgrove Rural Council have made arrangements by which the East Worcestershire Waterworks Co. have supplied Fairfield with water.

The Tewkesbury Rural Council have recently extended the Bredon water-mains to Lower Westmancote.

The Upton-on-Severn Rural Council have experienced unusual difficulties and expense in "boring" for water to supply the town of Upton-on-Severn. The contractors have now bored to a depth of 1,635ft. 6in., about 1,330ft. being through marl and sandstone. The first test of the yield commenced on April 18th, 1913, and was continued without cessation for 14 days, and no difficulty was experienced in maintaining a yield of 50,000 gallons per day. No diminution of supply was perceptible at the end of the test, so the Upton-on-Severn Council have applied to the Local Government Board for a loan of £10,000 to carry out the Scheme.

A small Water-Scheme has also been carried out by the Upton-on-Severn Council at Powick.

Dr. Hodgson Moore says there has not yet been sufficient time since "Broadwaters" was added to Kidderminster Borough, for the Corporation to extend their water-mains to that locality, which is "the one part of the added area that is not already supplied from the Borough."

The town of Stourport which has for many years been supplied with water by Kidderminster Corporation is now being supplied from the Bewdley "borings."

No definite decisions have yet been arrived at, as to whether or not the Villages of Crowle (Droitwich Rural District) and Feckenham (Feckenham Rural District) are to be supplied otherwise than by wells.

The following are extracts from the Annual Reports :—

Bewdley Borough (Dr. U. W. N. Miles).

"This year I am in a position to state there is no possible risk of
"any contamination of the water supply."

Bromsgrove North Urban (Dr. Cameron Kidd).

"Water supply may now be said to be good through the whole district.
"Where wells continue in use samples have been frequently analysed,
"and as a rule prove to be pure, but the mains of the East Worcester-
"shire Waterworks Co. now practically cover the district."

Evesham Borough (Mr. Harvey, Sanitary Inspector).

"The supply from the springs has been abundant The rainfall in this
"district for the year was 35½ inches.
"The County Analyst's monthly reports upon his bacteriological examina-
"tion of samples submitted to him, state that the water is of its
"usual good quality, and fit for drinking purposes.
"The reservoirs have been washed out, and new copper screens placed
"on the outlets of Nos. 1 and 2. The trunk and other mains have
"also been well flushed. Supplies have been laid on to all new
"buildings. In the early part of the year the 6-inch supply main
"was extended from Longdon Hill to the reservoirs, a distance of
"about 2½ miles. This has resulted in increased pressure in the higher
"parts of the town, and has also relieved the old main of all this
"extra work."

Kidderminster Borough (Dr. Hodgson Moore).

"The water supply of the borough is derived from an Artesian Well
"300 feet deep.
"The analysis by the Borough Analyst showed it to be of good quality.
"There is plenty of water, and the supply has been continuous during
"the whole year.
"We have not had sufficient time to deal with Broadwaters, the one part
"of the added area that is not already supplied from the Borough.
"Four samples have been taken from different wells in this district and
"all were found polluted and unfit for drinking purposes.
"The Drainage and Waterworks Committee passed a resolution to extend
"the main into this district."

Malvern Urban (Dr. C. R. P. Mitchell).

"For the first time since its construction, no water has been pumped
"from the Bromsberrow supply. The yield from the hills was

"132,712,000 gallons, or three times that of the previous year, whilst the quantity used was 126,989,000 gallons."

Redditch Urban (Dr. J. Stevenson).

"With the exception of 21 houses, which draw their supply from five wells, all the houses are supplied by the East Worcestershire Waterworks Company. This is pumped from deep artesian wells, and is excellent in purity."

Stourport Urban (Dr. E. S. Robinson).

"The great majority of the houses are supplied from the Kidderminster Waterworks, 970 out of 1,046. This supply is constant, and of excellent quality. It is, however, to be replaced during this year by another supply from the Bewdley Waterworks. The waters are for all practical purposes identical in quality, and the change is being made solely on the grounds of expediency and economy. The rest of the houses are supplied from wells. One well has been closed as polluted, and there are others that, from their situation, are liable to contamination."

Bromsgrove Rural (Dr. F. W. J. Coaker).

"The contract for extending the East Worcestershire Waterworks mains to Fairfield Village has been placed, and the work will soon be in hand. Those parts of the district where the supply is from wells have been adequately supplied, as the wet season has replenished the springs."

Droitwich Rural (Dr. J. Wilkinson).

"The East Worcestershire Water Company supplies parts of Dodderhill, and the Worcester City Water Company parts of Claines. The rest of the district is supplied from wells.

"A satisfactory report was received from the County Analyst on the water supply of each of the 11 new houses erected in 1912.

"The water supply at Crowle is still unsatisfactory; 6 samples were sent to the County Analyst in February, and he reported that 'all the above samples appear to have been collected from a sewage contamination area.'

"In April, with the County Medical Officer, the County Analyst, and your Inspector, I visited Crowle, and we inspected that part of your district; 12 samples of water were taken for analysis; the report on these waters is not satisfactory."

Feckenham Rural (County Medical Officer).

"*Feckenham Village.* In my last Annual Report I showed that 8 samples of water from wells in Feckenham had been taken for analysis, and that the County Analyst reported that all were unfit for drinking purposes; I added 'all the Feckenham wells have been cleansed, but no further analyses have been made. I consequently suggest that this be done in order to see what effect (if any) the cleansing has had.'

"During the year 1912 the present Inspector submitted 9 samples of water from the Feckenham wells to the County Analyst, who reported 6 of them were unfit for drinking, 1 might be used after boiling, 1 might be used, 1 was not satisfactory, and as it was taken from a new well another sample should be analysed later on."

"Efforts have been made to protect the 6 condemned wells from surface pollution. Since this was finished, no further analyses of these wells have been made, so I advise that this should be done without further delay.

"On September 11th, 1912, the Local Government Board wrote enquiring if any such analyses had been made, and if so, with what result? To this your Clerk replied (December 10th, 1912) that the Council had caused several more analyses to be made, with the result that in most cases the water is contaminated, and consequently have caused several of the wells to be opened. The subsequent action with regard to these wells has just been mentioned.

"Your Clerk, when writing (December 10th, 1912), pointed out to the Board that to lay on a water supply by mains would be a very serious financial burden to the parish, consequently the Council desired to have every opportunity of improving the present supply.

"Since then (March 25th, 1913) the Board have enquired whether the Feckenham wells are provided with pumps, or whether the Council propose to make such provision, as it appears to the Board that the measures proposed will be incomplete unless such provision is made."

Halesowen Rural (Dr. Brett Young).

"The water supply for the greater part of the district is from the mains of the South Staffordshire Waterworks. The supply is constant, abundant, and of excellent quality.

"There are still some wells in the district, but each year they are becoming fewer in number."

Kidderminster Rural (Dr. E. H. Addenbrooke).

"With regard to the water supply of the district, it has been very satisfactory on the whole. Forty-eight additional houses have had the town water laid on in the Foreign and Wribbenhall. The wells and springs, etc., in the country areas have been well looked after."

Mr. D. Llewellyn, Sanitary Inspector, reports :—

"There is a sure, if slow, advance in the number of houses obtaining their supply from the Borough of Kidderminster and Bewdley's water mains, there being an increase of 48 during the year, as against an increase of 88 in the previous year.

"There were 86 wells cleansed and repaired during the year, one more than in 1911.

"Nine polluted wells were closed, and 16 new wells sunk.

"One sample of water was analysed, and this was certified to be of good quality.

"No cases of shortage of water in the rural areas were heard of."

Martley Rural (Dr. D. G. Dykes).

"The water supply is chiefly obtained from shallow and deep wells, with the exception of Vernon Park, a few houses in Areley Kings, and Clifton-on-Teme.

"The water rises off the red rocky marl or off the red sandstone rock, and forms a fairly constant source of supply."

Shipston-on-Stour Rural (Dr. G. Findlay).

"The waterworks supplying this town were opened in 1901. The water
 "is brought from a large spring at Ebrington, in the Campden Rural
 "District, and, by the agreement, 40,000 gallons per day is the
 "maximum amount of water allowed to be taken for the supply of
 "the town. The supply is constant at high pressure. . . .
 "Practically all the houses . . . are now connected with the
 "water-mains."

Tenbury Rural (Dr. White).

"700 yards of main were re-laid in Tenbury."

Tewkesbury Rural (Dr. Turner).

"The villages of Bredon, Conderton, Bredon's Norton, Overbury (Wor-
 "cestershire) receive their water from Bredon Hill. The main
 "supplying Bredon has now been extended to the hamlet of Bredon's
 "Hardwick. The village of Teddington (Worcestershire) has its
 "water supply from the Cotswold Hills. All the above-mentioned
 "villages have a very good and sufficient water supply."

Mr. C. H. G. Shorland, Sanitary Inspector, adds :—

"The Bredon water service has now been extended to Lower Westman-
 "cote, and will shortly be extended to another part of Westman-
 "cote."

Upton-on-Severn Rural (Dr. Cowley).

Dr. Cowley mentions that at the end of 1911 the boring for water had
 reached a depth of 1,614 feet, but subsequently the bore-hole was
 deepened another 100 feet. Great difficulties have been experienced
 in carrying out this work.

"*Powick Village.* The water obtained from the well which I alluded to
 "as being sunk in the lower part of the village proved unfit. It was
 "therefore decided to utilise a spring on the north side of the village
 "which issued from a high bank, and which had stood the test of
 "the County Analyst. An ingenious scheme was drawn up by your
 "Surveyor (Mr. M. D. Price) for intercepting it and conveying it by
 "gravitation to the part required. It promises to provide an ample
 "supply."

Sewerage.

The much needed Sewerage Scheme for Barnt Green, which is
 partly in Bromsgrove North Urban District and partly in Broms-
 grove Rural District, has been completed.

The Tewkesbury Rural Council have also sewered Westman-
 cote.

Each of these Schemes was carried out by means of loans
 sanctioned by the Local Government Board.

The Local Government Board have also sanctioned the undermentioned sewerage loans, viz. :—

For Rubery (North Bromsgrove Urban District) ...	£11,903
„ Rose Hill (Barnt Green Urban District) ...	£ 852
„ Rednall (Bromsgrove Rural District) ...	£ 2,300
„ Hallow (Martley Rural District) ...	£ 3,500
„ Kempsey (Upton-on-Severn Rural District) ...	£ 4,174

The Upton-on-Severn Rural District Council have adopted Sewerage Schemes for Madresfield and Guarlford, but the Local Government Board have not yet held their Inquiries.

The Shipston-on-Stour Sewerage Scheme—the pressing need for which was shown in my Report dated 24th October, 1896—has been in abeyance for some years, as the loan for the Waterworks exhausted the Council's borrowing powers. A considerable part of this loan having been repaid, a conference of representatives of the District and Parish Councils, attended by a Local Government Board Inspector and the Engineers, was held on January 30th 1912, the outcome of which was, that a sewerage loan of £5,300 has now been applied for.

The position of the Hunt End (Feckenham Rural District) drainage scheme is the same as it was, when I presented my last Annual Report. The conference of the Feckenham and Alcester Rural District Councils, suggested by the Local Government Board, has not been held, nor have the Board sent any further communication to the Feckenham Rural District Council about it.

The Bretforton (Evesham Rural District) and Pershore Sewerage Schemes advisedly are in abeyance, pending decisions as to local Water Supply questions.

Bewdley Borough (Dr. U. W. N. Miles).

“The main sewer at the lower end of Lax Lane became blocked in the early part of the year, and was found to be completely silted up and in a very dilapidated condition.

“The old sewer was done away with, and 60 yards of 9 inch pipes substituted. A defective barrel sewer at the back of Load Street was also replaced by 40 feet of 9 inch pipes.

“The expense of these alterations was so great that the work of completing the sewerage of Bark Hill, which was proposed to be done during the year, had to be postponed.”

Bromsgrove North Urban (Dr. Kidd).

“Much has happened this year in the matter of drainage. The joint scheme for sewerage Barnt Green Village in conjunction with the Bromsgrove Rural Council was finally entered upon early in the year, and the main sewer through the village is complete and in working order. The whole of the outfall works lie outside this

"district. In May I was asked to make a special report as to the
 "necessity of extending the sewer up to and along Plymouth Road,
 "and as a result this extension was also undertaken. It is unquestion-
 "able that sewerage was urgently needed in this neighbourhood, and
 "the resulting improvement will be very great.

"At Rubery things have moved more slowly, and the old bad con-
 "ditions so often described still remain, but it is no longer asserted
 "that no nuisance exists, and active steps are being taken to provide
 "the necessary sewerage. The terms asked for the reception of
 "sewage from this area into the Birmingham system proved, as I
 "had always expected they would, to be prohibitive, and the necessary
 "preliminaries for carrying out a sewerage scheme of our own are
 "being got through. The Local Government Board enquiry has been
 "held, and we shall soon at last see the end of this long standing
 "reproach to the district. Active building is expected in the near
 "future in this neighbourhood for which a town planning scheme is
 "proposed and the provision of sewerage is therefore the more impera-
 "tive. The group of houses at Rose Hill, Lickey, which I mentioned
 "last year as also needing drainage, is to be dealt with, I am glad
 "to say, as suggested, in conjunction with the scheme for sewerage
 "the village of Rednal beyond our boundary."

Droitwich Borough (Dr. Roden).

"The continued subsidence of the ground interferes seriously with the
 "sewer levels. This is seen most prominently in High Street, where
 "the street becomes flooded after a heavy fall of rain. The Town
 "Council are considering the best means to adopt to remedy this, but
 "up to the present have been unable to find a suitable scheme on
 "account of the subsoil water which is present here in great quantity."

Kidderminster Borough (Dr. Hodgson Moore).

"Part of the added area (Franche and Hill Grove Crescent) are already
 "connected with our sewers.
 "I hope the Drainage and Waterworks Committee will see their way to
 "sewer the other portions of the area very soon, for the story of over-
 "flowing dumbwells, running into houses and other people's gardens,
 "etc., is not quite up to the standard of sanitation required by your
 "Committee."

Redditch Urban (Dr. Stevenson).

"The fact that the sewage disposal works cost less than the amount of
 "the loan sanctioned made it possible to take out several defective
 "sewers that were of inadequate size and substitute larger ones. This
 "was done in Edward Street, Ipsley Street, and Red Lion Street,
 "where cellars were occasionally flooded. In some of these cases a
 "better gradient was obtained than previously existed. The total
 "cost of the work was £880."

Bromsgrove Rural (Dr. Coaker).

"The sewers have now been completed at Barnt Green Village. Con-
 "siderable difficulty and consequent delay was encountered in the
 "work, on account of the trenches being water-logged. The house
 "connections have been made, and I look forward to building develop-
 "ment going on in this part. By the inclusion of Rednal Village
 "in this district under the Greater Birmingham Scheme, the efficient
 "drainage of this village becomes a pressing necessity. A scheme
 "for sewerage had been considered by the old King's Norton and

"Northfield Urban District Council, but on account of alteration of boundaries the carrying out of it was deferred. A scheme has now been prepared by this Council's Engineer, and provision made for the inclusion in the scheme of the Rose Hill part of North Bromsgrove Urban District Council."

Droitwich Rural (Dr. Wilkinson).

"As the Borough of Droitwich are unable to receive the drainage from Hill End into their sewer, arrangements will have to be made to convert the present privy middens into pail closets and provide sanitary dust bins, and the Council will no doubt be prepared to undertake the necessary scavenging."

"Owing to complaints having been received by the Council regarding the drainage at Hampton Lovett, a new drain 600 feet in length was laid, and no fresh complaints have been received."

Halesowen Rural (Dr. Brett Young).

"The whole of the district with the exception of quite a small outlying Rural part is served by the system of the Upper Stour Main Sewerage Board."

"All new houses erected during the year, to the number of 37, were connected to the main sewerage system with the exception of one new house at Spies Lane, Hill, which is outside the main sewerage area."

Martley Rural (Dr. D. G. Dykes).

"A Local Government Board enquiry has been held with regard to the Hallow sewerage, a new system of drainage being contemplated."

Pershore Rural (County Medical Officer).

Nothing has been done to improve the defective sewerage of Pershore, except to relay a sewer in the Defford Road at a cost of £73.

As the contemplated scheme of water supply will cost such a large sum, it seems doubtful whether the rateable value of the town of Pershore will permit of a sewerage scheme also being carried out.

Shipston on-Stour Rural (Dr. G. Findlay).

"On January 30th, Mr. Hetherington, Local Government Board Inspector, held an enquiry with regard to the plans provided by Messrs. Willcox and Raikes for the new scheme of sewage works for this town, and provisional agreements have been entered into with Sir Grey H. D'E Skipwith for the purchase of a field suitable for sewage disposal works. If these arrangements are approved of by the Local Government Board, the scheme will probably be carried out at an early date."

Mr. C. J. Gander, Sanitary Inspector, says:—

"Sewers.—These were broken in several places, but the new scheme will shortly be put in hand."

Tewkesbury Rural (Dr. A. F. Turner).

"The villages of Bredon, Overbury, Conderton, and part of Ashchurch are provided with a sewage system, and the drainage is in a satisfactory condition. The irrigation lands are working well, and improvements at Overbury have been carried out with very satis-

"factory results. The drainage of the hamlet of Westmancote is completed, and the houses are now being connected up."

Upton-on-Severn Rural (Dr. J. S. Cowley).

"*Madresfield and Guarlford Sewerage Scheme.*—In this, the latest scheme for sewage disposal, the plans were completed by Messrs. Willcox and Raikes. Lord Beauchamp, who is principally concerned, has since referred the scheme for the criticism of Messrs. Strachan and Weeks, engineers chosen by himself. Their report was submitted by your Council to Messrs. Willcox and Raikes for their observation. These were afterwards discussed by the Madresfield and Guarlford Sub-committee, whose decision was to recommend to the Council that the original scheme of Messrs. Willcox and Raikes be approved. The loan applied for is £5,000, apportioned, Madresfield £3,485 2s. 8d., Guarlford £1,514 17s. 4d. The apportionments for common benefit as to the special expenses to be legally incurred are Madresfield £1,903 1s. 3d., Guarlford £684 os. 10d. The overseers have been served with notice of apportionment, and have the power of appeal within 21 days of date.

"*Powick Village Sanitation.*—The completion of this sewerage was much delayed owing to the continual rainfall. Colonel Drury, the Local Government Inspector, visited Powick on February 15th to ascertain the progress of the work. He made an inspection of the proposed additions, outfall ditch, site of proposed osier beds, etc. Mr. Bricknell, another Inspector, also met some of your Council and officials on October 9th, 1912, and appeared satisfied with what had been done and the assurances given him. The Local Government Board has sanctioned the arrangement, which may obviate the pumping scheme, on an understanding that if it does not turn out satisfactory it would be necessary to revert to it.

"*Kempsey Sewerage Scheme.*—This scheme, after preparation and deliberation for 14 years, has at last arrived at an issue. The site for the pumping station has been obtained after prolonged negotiation, as also that for the disposal area, and the compensation claimed by the tenant has been arranged. The loan of £4,781 has been granted under three heads: £3,989 for 30 years, £680 for 15 years, and £112 for 60 years. The contract for the work of Messrs. Law of £4,218 10s. 0d. has been accepted. It may be anticipated that the sewers will be ready for the house connections in the course of the year. This is desirable as regards the school drainage, and also some of the larger houses, the pumping of which gives rise to nuisance by the offensive smells. I look forward with much satisfaction to this improved sanitation of the village. From the analysis of water from many of the wells, I fear there is a large amount of subsoil pollution. This detracts from a feeling of entire confidence in the full realisation of its sanitation.

"Some extensions were also added to the systems both at Upton-on-Severn and Hanley Castle for the purpose of connecting house drainage."

Sewage Disposal.

The improvements carried out at the Droitwich Borough Sewage Farm are giving satisfactory results.

Great improvements of Evesham Borough Sewage Works are nearly completed, under a "Loan" sanctioned by the Local Government Board. The old liquifying tanks have been covered

over, and large additional bacteria beds have been put down. The contemplated works, however, are not yet quite finished.

The Kidderminster Corporation having applied to the Local Government Board for a Loan of £13,500, for the purchase of "Birchen Coppice and Dropping Wells" Farms, in order to improve their admittedly insufficient outfall works, two of the Board's Inspectors held a Local Inquiry on Feb. 19th, 1913.

The Board sent the County Council a copy of a letter which they had addressed to the Kidderminster Corporation, from which the following is an extract:—"The Board learn from the report (of their Inspectors) that the lands proposed to be purchased, together with those already held by the Town Council for purposes of Sewage disposal, comprise an area of 868½ acres, but that under arrangements which have been made with the Worcestershire County Council and the Town Council of Bewdley, with a view to avoiding nuisance and contamination of water-supply, it is proposed to use less than half of this area for purposes of irrigation. The present Scheme is therefore open to criticism, not only on account of the heavy expense involved, but also on the ground that a very large area of surplus land will be left on the Town Council's hands. As the Board understand, the Town Council have decided upon the proposed additions to the Sewage Farm without consulting the Engineers as to the practicability of an alternative and more economical scheme.

"It appears to the Board, therefore, that before the present proposals are further considered, the Town Council should ask their Engineers to advise them, without reference to the provisional arrangements already made, as to the best method of preventing the works from being a nuisance, whether from smell, or otherwise, having regard to the desirability of economy. The Engineers' report on this question should be obtained at the earliest possible date, and should then be communicated to the Board without delay, together with the Town Council's observations thereon."

The following are references to this subject, made in the Annual Reports:—

Bromsgrove Urban (Dr. Kidd).

"The Sewage Farm continues to work satisfactorily."

Droitwich Borough (Dr. Roden).

"The work carried out at the Sewage Outfall Works has, notwithstanding the heavy rainfall, been very satisfactory. The entire Farm is now brought into use, so that proper intervals for rest can be given to the prepared Ashbeds.

"There are no longer any complaints of smells from the Sewage Farm other than those which are unavoidable in any Sewage Disposal Works."

Evesham Borough (Mr. Harvey, Borough Surveyor).

"The extensions to the Outfall Works are still in progress.

"The whole of the sewage can now undergo secondary filtration, the septic tanks have been roofed over with 'Ferro Concrete' and the contact beds again washed and the work of increasing their depth is proceeding."

Malvern Urban (Mr. Thorp, District Surveyor),

"The three farms maintained by the Council have worked very satisfactorily during the whole year, in spite of having to deal with three times the normal annual flow."

Stourport Urban (Dr. Robinson).

"The Kidderminster Sewage Farm nuisance still exists, though somewhat mitigated."

Shipston-on-Stour Rural (Dr. Findlay).

Blockley.—"The Outfall Works appear to be doing the work of purifying the sewage in a satisfactory manner, under a manager who is supervised by the Sanitary Inspector, a good clear effluent being obtained with no signs of pollution in the stream below the out-fall."

Tewkesbury Rural (Mr. G. H. G. Shorland).

"*Overbury Sewerage Land.*—The provision of a large sprinkling filter has greatly improved upon the former condition of affairs."

"*Conderton Sewerage Land.*—The District Council have now taken over the above area from Sir Richard B. Martin."

River Pollution.

The following references to this subject are made in the Annual Reports :—

Bromsgrove North Urban (Dr. Kidd).

"The Rubery Drainage Scheme, when completed, will greatly lessen the chance of river pollution.

"At Catshill . . . where a small stream runs in close proximity to houses, much has been done in recent years to remove privies, pigsties, etc., which were leaking or draining into the stream."

Evesham Borough (Mr. Harvey).

When the new Sewage Works are completed, there should not be any cause for complaint that the Borough Sewage pollutes the river Avon."

Kidderminster Borough (Dr. Hodgson Moore).

"The River Stour flowing through the centre of the town is free from any injurious pollution."

Stourbridge Urban (Dr. H. W. Freer).

"The only river in the district is the Stour. It practically receives no pollution from this district."

Stourport Urban (Dr. Robinson).

"No serious pollution of the rivers takes place in the district. The canal
"receives sewage from a few houses in the district, but is offensive—
"especially in the summer—by reason of contamination elsewhere."

Halesowen Rural (Dr. Brett Young).

"The rivers and streams in the district may now be considered to be free
"from pollution. For some years there was at times a suspicion of
"acid waste from the galvanizing works getting into the River Stour,
"but no question of this kind has arisen during the year 1912."

Kidderminster Rural (Dr. Addenbrooke).

"There is very little pollution of streams in the district, and no case of the
"kind has arisen during the year."

Martley Rural (Dr. Dykes).

"No pollution of the rivers or streams takes place in the district, with the
"exception of Hallow" (where a sewerage scheme is about to be carried
out).

These statements of the District Medical Officers of Health confirm the statement I made in my last Annual Report that
"river pollution is not now particularly obvious in Worcester-
"shire."

River Severn.

The Crude Sewage of Bewdley Borough still flows direct to the Severn, as the Corporation, having exhausted their borrowing powers cannot carry out a Sewerage Scheme.

For some time past the crude sewage from Worcester City has flowed into the river Severn; but the City Engineer writes me (18 July, 1913):—"The Sewage works have been completed and
"running, but through a defect in one of the pumps, the works
"are at present standing. I hope to have them running again in
"a few days."

Excrement Disposal.

Bromsgrove Urban.

Dr. Kidd says:—

"The conversion of old privies to w.c.'s continues steadily, if slowly.
"(Bromsgrove) ought to be a water closet town entirely, the sewerage
"system being amply designed to take the drainage from every house,
"and there is no reason why a single cesspit privy should remain.
"No greater improvement could be made than the abolition of all
"existing privies."

Bromsgrove North Urban.

Dr. Kidd writes:—

"Now for the first time there is a drainage system in operation, a steadily

"and increasing number of old privies and pails ought to be converted into w.c.'s, and it is earnestly hoped that when the sewers are complete, the fullest use will be made of them by providing w.c.'s to all the houses on the line of the sewer."

Droitwich Borough.

Dr. Roden reports :—

"There are still too many cesspits and privies in existence; in the out-lying parts of the Borough these cannot be avoided, but where the houses are within easy reach of the Water Carriage System, they should be provided with Water Closets."

Lye and Wollescote Urban.

Dr. Darby anticipates :—

"As the house-to-house inspection proceeds, many of the existing privy middens will be converted into w.c.'s, and more dustbins will be used."

Malvern Urban.

Dr. Mitchell mentions

That the defect most frequently met with during the inspection of the houses, under the Housing and Town Planning Act, 1909, is "the absence of flushing appliances to the water closets," and (he fears) that "this defect will remain as long as the water meter system continues. In some instances in cottages visited the pan was clean. . . . but in many it was foul."

Oldbury Urban.

Dr. Buttery says :—

As time goes on Typhoid Fever appears to be gradually disappearing, and with the substitution of the water carriage system for the old privy middens, it is hoped to rid the district of this once fertile cause of a swollen local death-rate."

"All newly-built houses were furnished with water closets."

Mr. G. H. Robbins (Sanitary Inspector) :

"There are approximately 1,767 privies in the district"

Redditch Urban.

There are only 7 privy middens in use : but Mr. Jameson's report shows

That there are no less than 1,540 pails in the district at the present time, but it was a record year with respect to the conversion of these receptacles to water closets, no less than 64 having been altered to the water carriage system."

Stourbridge Urban.

The Sanitary Inspector, Mr. Kent, reports that

"There are a few houses in the district which are not provided with water closets."

This is very satisfactory, because I call to mind that when I presented my first County Report in the year 1890, Stourbridge was almost entirely a "midden closet town." The Urban Council are to be congratulated on the energetic fashion with which they have dealt with insanitary middens.

Stourport Urban.

Dr. Robinson says :—

"Roughly speaking, there are about 100 privies still left in the district,
"and probably the majority of these will remain permanently . . .
"on account of their distance from the sewers."

Halesowen Rural.

Dr. Young says :—

"With sewers and a public water supply, there is no reason why the conversion of privy middens to w.c.'s should not go on more rapidly. It
"is most necessary in such a populous district from a sanitary point
"of view, and it is even desirable from an economic point."

Mr. Shaw, the Sanitary Inspector, mentions that

"The provision of water closets in place of old privy middens has been a
"chief feature of the work."

Scavenging.

The Bromsgrove Rural Council will begin to scavenge the parish of Hagley on September 29th, 1913; and their Medical Officer of Health considers that Aston Fields, Finstall, Stoke Heath, and Stoke Prior should be similarly dealt with.

Each of the Annual Reports on the Urban District explains the local scavenging methods carried out. A few only of the Rural Councils undertake scavenging, as their districts are not as a rule, populous. It is not necessary to give extracts from all the Annual Reports as to Scavenging; but a few of them should be mentioned.

Bewdley Borough.

Dr. Miles says :—

"I should like to again call attention to the unsatisfactory nature of many
"of the receptacles in which the house refuse is put in the streets to
"be collected by the carts, and also to the method sometimes employed
"for emptying ash-pits by wheeling their contents into the street
"and there depositing it in a heap for the cart to collect."

"I understand that this method saves labour, but I hope that the Council
"will see its way to sanctioning the extra expense which would be
"entailed by bringing the ashes straight to the cart."

"I should like also to suggest the provision of receptacles for paper, banana
"skins, orange peel, etc., in the streets, as is now done in so many
"towns. All these things scattered and blown about the streets are
"possible causes of the spread of disease."

Bromsgrove Urban.

The Borough Surveyor's report shows that a very large number of ashpits, privies and portable receptacles were cleansed during the year, and Dr. Kidd says :—

"The Inspector's report shows the amount of night scavenging that still
"has to be done. The cost of all this could be saved if w.c.'s were
"universal, to say nothing of the removal of centres of nuisances."

Stourport Urban (Dr. Robinson).

"An effort should be made to remove house refuse at least weekly, and
"to replace the large number of ashpits—several holding at least a
"cart load—by ash bins."

Shipston-on Stour Rural (Dr. Findlay).

"Scavenging is not undertaken in any part of the district by the Council,
"and, as I have before reported, I think it would be a good thing
"if a system of scavenging was established, especially at Shipston,
"where many of the houses are closely built together, and these
"having only small court yards, there is no garden ground available
"for refuse disposal.

"The matter has been discussed by the Council, and the difficulty seems
"to be chiefly in finding a suitable place to put the refuse after it has
"been collected. Perhaps this may be got over when the new sewage
"outfall works are established."

Dairies and Cowsheds.

My last "Digest" contained a large number of Extracts from the Annual reports, which showed that the Sanitary Officers are giving considerable attention to the Dairies and Cowsheds, but that much improvement is still needed in the methods usually adopted for supervising the milk-supplies; a fact to which I specially directed your attention, in a Special report I made to you on 9th May, 1908.

As is well-known, the "Tuberculosis Order, 1913," issued by the Board of Agriculture, came into operation on May 1st, 1913. The Board's letter (17th Feb. 1913), which accompanied the "Order," states that the latter "aims at securing the destruction
"of every cow found to be suffering from Tuberculosis of the
"Udder, or to be giving tuberculous milk, as well as of all bovine
"animals which are suffering with tuberculosis with emaciation,
"since these are known to disseminate freely the germs of the
"disease" (par. 6).

Articles 2 and 3 of the Order, require every person having such animals in his possession, and all Veterinary Surgeons who become aware of such animals to "notify" them to the Local Authority enforcing the "Diseases of Animals Act, 1904."

Article 8 provides for compensation for the destruction of Tuberculous Bovine Animals.

In order "to make better provision with respect to the sale of milk and the regulation of Dairies," the President of the Local Government Board laid the "Milk and Dairies Bill" before the House of Commons on 28 March, 1913. Although I presented a Special Memorandum on this "Bill" to the "Public Health and Housing Committee," it is unnecessary to allude to it; as there is no probability that this "Bill" will become law during the present Parliamentary Session.

The Worcestershire "Tuberculosis Special Committee," presented a report on this "Order" and "Bill" to the County Council on June 9, 1913; and the County Council decided to make a representation to the Board of Agriculture to the following effect.

(1) That the Valuation of tuberculous bovine animals on two bases is unfair, and that a modification of the Order should be made, so as to ensure one Valuation, and that the open Market Value of the animal, and (2), that for the purposes of the Order, the County Council should be the Local Authority for the whole County, including the County Boroughs.

With regard to the "Milk and Dairies Bill," the County Council passed a resolution, "that the unit of administration, be "the Administrative County rather than the Sanitary area."

Section 15 of the "Bill," was to empower the Local Government Board to make "Orders" for the registration and inspection of dairies and cowsheds: the lighting, ventilation, drainage, water-supply, floor-space, air-space, and arrangements for securing their Sanitary condition; for the cooling of, and convenience of milk, etc., etc.: consequently, as these "orders" in effect would amount to a new Act of Parliament, the County Council resolved that every effort be made to have the draft Orders laid before Parliament before the Bill becomes law, so that some opportunity may be given to consider them, and offer any objections that may be necessary. The Council also resolved that as the Bill forms part of the National Scheme for dealing with Tuberculosis, that steps be taken to induce the Government to make a grant towards the cost of administering the "Bill," should it become law.

Should a "Milk and Dairies Bill" again come before Parliament, no doubt it will be as carefully scrutinized by the County Council as that brought forward in March 1913, was.

The Chief Constable has been good enough to inform me that between May 1st, 1913—the date when "The Tuberculosis Order,

1913," came into force—and July 31st, 1913, inclusive, 22 bovine animals were slaughtered in the County.

This number seems small. The Board of Agriculture informed me (18 April, 1913) that they "estimate that the cost of "Compensation for animals slaughtered under the Order, would "be approximately equivalent to the amount which would be "payable on the assumption that one per cent. of all cows and "heifers in milk or in calf are suffering from one of the forms of "Tuberculosis specified in the Order, and that 50 per cent. of these "affected animals will be found to be suffering from 'advanced "Tuberculosis,' as described in Article 8 (4) of the Order.

"The total number of bovine animals returned last year in "the district of the Local Authority for the purposes of the "Diseases of Animals Acts of the County of Worcester, was "67,722, and of these, the number of cows and heifers in milk or "in calf, was 23,820."

Some of the following extracts from the Annual Reports show that the desirable practice of grooming milking-cows udders and flanks is not as common as it ought to be :—

Bewdley Borough (Dr. Miles).

"Some of the cowsheds are not kept as clean as they should be."

Bromsgrove North Urban (Dr. Kidd).

"Old-fashioned rustic methods of dealing with dairy cows continue very "much in evidence, but as a rule I think care is taken in the washing "and cleansing of vessels, and there is undoubted improvement "generally in cowsheds in the matter of space, paving, and lighting. "It is unfortunate that one or two dairy owners who tried to introduce "modern methods, including the regular grooming of cows and the "use of clean washed linen overalls by all milkers and attendants, "found the expense too great to be profitable, and had to abandon "the full routine, and, of course, any great rise in the cost of milk to the consumer would be disastrous to the poor especially, but steady "improvement does take place, and with fuller control of tuberculosis "in cows, I think that the milk supply will be satisfactory."

Lye Urban (Dr. Darby).

"I regret to say it is very difficult to obtain a clean milk supply, because "the cow-keepers who milk their own cows cannot, in most cases, be "made to realize the necessity for grooming their cows."

Halesowen Rural (Dr. Young)

"There is probably a growing sense of the need for cleanliness in dealing "with milk, but much will have to be yet done to make it satisfactory "from a strictly sanitarian point of view."

Martley Rural (Dr. Dykes).

"A great many of the cow-keepers apply the tuberculosis test. The "milkers' hands are washed, but very little grooming of the cows is done."

Shipston-on-Stour Rural (Dr. Findlay).

"A considerable quantity is exported, chiefly to London, from the Blockley side of the district. There are about 300 cows kept for milking purposes in the registered cowsheds. Nearly all the cowsheds are open structures, the animals being kept in the open the greater part of the year, only being in shelter during very severe weather."

Slaughter-houses.

The Annual Reports indicate that the Slaughter-houses in all the Sanitary Districts are inspected, and that with few exceptions these trades are as free from nuisance as is practicable.

A butcher in Bewdley Borough was "fined" because his Slaughter-house was kept in an insanitary condition.

Alluding to those in Bromsgrove Town, Dr. Kidd says:—"I can only refer to previous reports which still apply. The cold summer this year, lessened the amount of apparent nuisance, and the premises are kept as clean as possible." Dr. Kidd has for some years past advocated the erection of an Abattoir.

The Medical Officers of Health for Kidderminster Borough (Dr. Moore), and Lye and Wollescote Urban District (Dr. Darby), report that more frequent lime-washing is needed.

A new Slaughter-house is said to have been erected in the latter district during the year "on the latest principles."

Mr. Jameson (Redditch) mentions "that so far as the structural conditions will allow, the premises have been on the whole, kept fairly clean;" and he adds "that the need of a public abattoir is greater to-day, if only for an efficient system of meat inspection, which, as before explained, is impossible under the existing conditions." He was "told by some butchers that they would be only too pleased to have their cattle slaughtered in a Public abattoir if such was provided." Mr. Jameson goes on to say, "Whilst dealing with this subject, it will not be out of place to make reference to the slaughtering of animals, which many times I have noticed has received very little consideration, as too often great suffering is caused by the use of obsolete instruments. Moreover, the young slaughterman has to learn his trade, and the lesson is learnt at the expense of the living animal, whereas in a Public Abattoir this could be avoided by the provision of proper humane slaughtering appliances."

I know from personal observation that "slaughtering" often causes animals unnecessary pain: consequently, I suggested

that when killing became necessary under the "Tuberculosis Order," that it should be a "Standing Order" in Worcestershire, that a "Humane Killer" should be employed; and I am glad to say my suggestion has been acted upon.

Some butchers, I know utilize efficient "Humane Killers," which can be operated by anyone. As they only cost 25/- each, and a box of 20 cartridges can be purchased for 1/-, there is no reason why butchers should not invariably use them for cattle.

Dr. Dykes mentioned last year that his Council "have no control legally over slaughter-houses in rural districts," so I then said that if his Council applied to the Local Government Board for "urban powers" to enable them to frame "byelaws" for slaughter-houses, they would certainly be granted, *for the particular parish in which the slaughter-house is located.*

This year he says that "the majority of the slaughter-houses are satisfactory, especially those with a regular trade. There are no byelaws for their control."

Dr. Findlay advises the Shipston-on-Stour District Council that "it would be very useful if the Council would adopt some byelaws for these places, so that they could be placed on a register like dairies."

On the 25 Jan. 1913, the Council of the Worcestershire Chamber of Agriculture passed the following resolution, and forwarded a copy of it to the County Council, viz. :—

"That this Chamber views with alarm the proposal of certain local authorities to abolish private slaughter-houses and make it compulsory that all animals intended for human consumption, be killed in Public Abattoirs; and this Chamber is of opinion that (if adopted) it would be detrimental to breeders and feeders of fat Stock in this Country, as it has been proved that when butchers are deprived of their private slaughter-houses, they frequently deal in foreign meat in preference to enduring the inconvenience and extra expense entailed by killing in a Public Abattoir."

I mentioned in my last "Digest" that "as the law now stands, although a local authority have power to build (such a place), they cannot *oblige* butchers who occupy 'registered' (as distinct from 'licensed') slaughter-houses to use abattoirs, even if erected. Usually the occupiers of old slaughter-houses, are 'registered.'"

Meat—Fish.

I reported last year, that of the 29 Sanitary Inspectors in the County, only 2 (Mr. Kent, Stourbridge, and Mr. Jameson, Redditch) held special "qualifications" for meat inspection; since then, one Inspector (Mr. A. Shaw, Halesowen) has obtained the Certificate for meat inspection, granted by the Sanitary Institute. Meat inspection is so important from a public health point of view, that it is essential that Sanitary Officials should be experienced in such work.

In connection with this however, it should not be forgotten, that before a Sanitary Inspector can sit for a "certificate" he is required to attend a course of practical demonstrations at some Public Slaughter-house, such as those in Birmingham; this takes considerable time, and entails expense upon the Candidate, which too often his salary does not permit him to incur. If the Higher Education Committee could be induced to give small grants to those Sanitary Inspectors in the County who undertake to "qualify," I feel sure the public would benefit by better inspection of Meat.

In support of this I may say, "The Royal Commission appointed to enquire into the Administrative Procedure for controlling danger to man through the use, as food, of the Meat and Milk of Tuberculous Animals" in their 1908 report (p. 21, par. 5), recommended "that in future no person be permitted to act as a Meat Inspector until he has passed a qualifying examination."

Dr. Darby (Lye) writes in his Annual Report for last year, "I have been to some expense and trouble personally to attend a course of Practical Demonstrations at the Public Slaughter-houses in Birmingham during the summer months."

In my last "Digest" I expressed the hope that both the Medical Officers and Inspectors would in future deal more fully with local questions of Meat inspection. Only 10 of them, however, refer to this subject, except to record the number of seizures of "food" unfit for consumption.

As the Local Government Board have not issued any detailed instructions with regard to the condemnation of Meat, I am inclined to think that the degree of tubercular disease which should lead to the seizure of a carcass is not as uniform as it ought to be; consequently, I now re-produce an extract from the Royal Commission's Report, given in my "Digest" for 1897 (pp. 33, 34), which still applies, viz. :—

“Tuberculosis in Animals intended for Food.

“We recommend that the Local Government Board be empowered to issue instructions from time to time for the guidance of meat inspectors, prescribing the degree of tubercular disease which, in the opinion of the Board, should cause a carcase, or part thereof, to be seized.

“Pending the issue of such instructions, we are of opinion that the following principles should be observed in the inspection of tuberculous carcases of cattle :

- | | |
|---|--|
| (a) “When there is miliary tuberculosis of
“both lungs | } The entire carcase
and all the organs
may be seized. |
| (b) “When tuberculous lesions are present
“on the pleura and peritoneum | |
| (c) “When tuberculous lesions are present
“in the muscular system, or in the
“lymphatic glands embedded in or
“between the muscles | |
| (d) “When tuberculous lesions exist in any
“part of an emaciated carcase | |
| (a) “When the lesions are confined to the
“lungs and the thoracic lymphatic
“glands | } The carcase, if
otherwise healthy,
shall not be con-
demned, but every
part of it contain-
ing tuberculous
lesions shall be
seized. |
| (b) “When the lesions are confined to the
“liver | |
| (c) “When the lesions are confined to the
“pharyngeal lymphatic glands | |
| (d) “When the lesions are confined to any
“combination of the foregoing, but
“are collectively small in extent. | |

“In view of the greater tendency to generalisation of tuberculosis in the pig, we consider that the presence of tubercular deposit in any degree should involve seizure of the whole carcase, and of the organs.

“In respect of foreign dead meat, seizure shall ensue in every case where the pleura has been ‘stripped.’”

The following are some extracts from the Annual Reports :—

Kidderminster Borough (Dr. Moore).

“Taking the meat supply as a whole, we are well served in Kidderminster. In the month of April I called your Committee’s attention to the custom of farmers ‘killing animals to save their lives,’ and bringing the carcase to market for sale. This practice is very reprehensible, and whilst your officials have no power to prevent the owner or his friends eating the flesh from such carcases, their energies will be directed to prevent any flesh of a doubtful character being sold in the borough. In the case calling forth the above remarks, the owner was fined £1 and costs for sending to market for sale the carcase of a sucking pig. We issued a circular during the year suggesting to butchers and owners the desirability of submitting for inspection by your officials any carcase of meat about which there was the slightest trace of suspicion. This has been acted on, to the advantage of the trade and your officials.”

Malvern Urban (Dr. Mitchell).

“Any thorough meat inspection under present circumstances is an utter impossibility, and though visits may be made on days when slaughtering is likely to be proceeding, they are not uniformly successful in this respect.”

Oldbury Urban (Dr. Buttery).

"Our meat supply continues to receive constant attention, and as far as lies in our power we see that the people are supplied with meat of a sound and wholesome character. The slaughter-houses are regularly visited, often when slaughtering operations are proceedings, and in a number of instances where any suspicion was aroused, steps were taken to confiscate certain portions of the animals which might be deleterious to the health of the consumers. . . . During the year a quantity of meat has been voluntarily surrendered to us by the butchers themselves."

The Sanitary Inspector (Mr. Robbins) reports :—

"The market, shops, and slaughter-houses have been regularly inspected, and a quantity of meat and fish has been surrendered to us; but in one case we seized a quantity of fish, which was dealt with by the Justices, and the owner was sentenced to six weeks' imprisonment without the option of a fine."

Redditch Urban (Mr. Jameson, Sanitary Inspector).

"Every possible attention has been given to the inspection of meat, fish, and other foods during the year. It is very gratifying to report that upon several occasions butchers and fish dealers have asked me to examine meat and fish upon which they themselves had a doubt as to its fitness for food, and, furthermore, have on all occasions accepted my decision without raising any objection. It will be noted that the past year has been exceptionally heavy with regard to this subject, the total number of visits made to shops, slaughter-houses, etc., amounting to five hundred and twenty."

"*Meat.*—Two thousand four hundred and fifty-four pounds of meat has been surrendered and destroyed, which included the whole carcasses of two beasts which were afflicted with tuberculosis, and three pigs. In January, acting under your instructions, proceedings were taken against a butcher for having exposed for sale some unsound pork, which resulted in a fine of £10 and costs being inflicted."

"*Fish.*—Two hundred and seventy-two pounds of fish has been surrendered and destroyed as unfit for food."

Stourbridge Urban.

Mr. Kent, Sanitary Inspector, says :—

"Eight lots of meat, including several livers, were destroyed, and also several lots of fish. In all cases the meat was surrendered to me. There was no seizure of unsound food."

Stourport Urban (Dr. Robinson).

Dr. Robinson says :—

"There is no regular inspection of meat."

Halesowen Rural.

Mr. Shaw, Sanitary Inspector, says :—

"The following unsound food was surrendered voluntarily :—Beef : 9 carcasses, 2 hindquarters, 10 sets of organs, 9 livers. Mutton : 2 carcasses and all organs. Fish : 6 boxes of kippers."

Kidderminster Rural (Dr. Addenbrooke).

"No meat was condemned."

The Sanitary Inspector, Mr. D. Llewellyn, reports :—

"Your Medical Officer of Health condemned as unfit for food 98lbs. of
"fish, consisting of herrings, cod fish, and lemon sole."

The Standing Joint Committee having been informed that unwholesome fish was being offered for Sale in the northern part of the County, I convened an informal meeting of the Medical Officers of Health, and Sanitary Inspectors of the Bromsgrove, Bromsgrove North and Redditch Urban, and of the Bromsgrove Rural Districts, to discuss the matter. The Sanitary Inspector for the Redditch Urban District (Mr. Jameson), who first called attention to the matter, described the action he was taking to prevent it.

The conclusion we came to was, that concerted action was necessary ; so plans for carrying this into effect were arranged.

I wrote the Medical Officer of Health for Birmingham on the subject, and from what he told me, it is obvious that the fish sold in the City is thoroughly well inspected. Apparently some fish hawkers after purchasing it in Birmingham, dole it out to persons they employ ; and although when bought it is good, occasionally it is decomposed before being offered for sale in the County.

Now that the Inspectors I have named have arranged to promptly communicate with each as circumstances require, it is hoped that this traffic in bad fish will be prevented.

Hop-pickers.

The following are references from the Annual Reports, viz :—

Martley Rural District (Dr. Dykes).

- "All the accommodation used for the hop-pickers is inspected both previous
"to and after the arrival of the pickers. A general improvement has
"been noted each year in the accommodation provided. A special
"report is made each year at the end of the season to the Rural
"District Council.
- "No infectious diseases were notified ; this makes two years in succession
"that we have been free. No complaints of nuisances were received
"either privately or from the pickers themselves."

The Sanitary Inspector (Mr. Inskip) reports :—

- "During the hop-picking season 41 farms were visited, and the quarters
"provided for the hop-pickers thoroughly inspected. Altogether, 65
"inspections were made, and generally the quarters provided were found
"to be satisfactory, a great many improvements or alterations having
"been carried out since last year. From a sanitary point of view the
"season was a good one, no complaints, either privately or from the

"pickers themselves, being received, and for the second year in succession no notifications of infectious disease were received."

Pershore Rural District.

I advised that the Sanitary Inspector be directed to make a special report in July or August of each year upon the accommodation provided at the hop-yards in the district, and to visit them while the picking was in progress; and the Rural District Council agreed to my recommendation.

The Sanitary Inspector (Mr. Moulson) reports:—

"I inspected the sheds at Fladbury and Wick; both were limewashed, and clean straw provided. The accommodation at Wick was not sufficient for the pickers, so 12 tents were erected for them. I had to call the attention of the farmer to the privies at Wick, which were not cleansed when required. I found some hop-pickers sleeping in some sheds at Broughton Hackett which are not satisfactory. The owner has promised to remedy the defects before they are occupied again."

Tenbury Rural District (Dr. White).

"The advent of hop-picking season results in an increase of population of several thousands for a few weeks, but the deaths and births amongst these are carefully excluded, but not so the infectious disease. . . . Bye-laws for hop-pickers have recently been adopted for the whole district."

"The hop-pickers' accommodation has been systematically inspected before coming into use in the autumn, and further improvements in several instances carried out."

Gipsy Encampments.

Droitwich Rural District (Dr. Wilkinson).

"In December, with your Inspector, I visited Hartlebury Common, and reported on the condition of the Encampments there, and orders were made to provide proper sanitary conveniences."

Pea-pickers.

So far as my information goes, not nearly so many complaints were made last year with regard to the nomadic pea-pickers which visited the County, as was the case a few years ago.

Kidderminster Rural District (Dr. Addenbrooke).

"Visiting the Glebe Farm, with the Inspector, we found that seventy-four pea-pickers were sleeping upon the premises under very disgraceful conditions: fourteen of them in two open cart sheds, twenty-four in two cowsheds, ten in the feeding passage of the cowshed, eight in two pigstyes, fourteen in two sheep shelters, and four under a bag tent fixed against the wall. Many of them had been sleeping on bags of rotten potatoes which smelt badly, and there were quantities more of these stinking potatoes in the yard. The person in charge of the pea-pickers was instructed to remove the potato bags at once, and to provide fresh straw, and notice was sent to the owner of the farm requiring him to abate the nuisances, and to provide better accommodation for the pea-pickers."

Factories and Workshops Act, 1901.

A "Workshop" is defined as a place where manual labour is exercised by way of trade or purposes of gain, in, or incidental to, the making, repairing, etc., of any article; and a "Factory" as a place in which mechanical power is used as distinct from a "Workshop." Local Authorities are responsible for the sanitary administration of "Workshops," and H.M. Inspectors of Factories for the well-ordering of "Factories." There are, however, two exceptions to the latter rule, viz., as regards the safety from fire under certain conditions, and as to "sanitary conveniences" in those districts where S. 22 of the "Public Health Acts Amendment Act, 1890," has been adopted.

With regard to safety from fire, the provisions apply only to Factories in which more than 40 persons are employed.

I have referred to these statutory duties because I learn that it is not thoroughly well understood that where S. 22 of the "Public Health Acts Amendments Act, 1890," is in force in any district—and it is in force in many sanitary districts in the County—it is part of the statutory duty of the local Sanitary Inspector to visit *every "factory" in his district*, without waiting for a notice from H.M. Inspector of Factories that any particular factory is without "sufficient and suitable accommodation in the way of "sanitary conveniences, having regard to the number of persons "employed in, or in attendance at such building, and also where "persons of both sexes are employed."

Most of the Annual Reports contain brief references to the work carried out with respect to the "Workshops," but little is said about the "sanitary conveniences" of "Factories."

Lye and Wollescote Urban (Dr. Darby).

"Birds are still being kept in some of (the workshops); the practice is "insanitary, and as I have before remarked, should be prohibited.

"Several factories have been recently erected, and are, of course, up to "date. Two new sheet-iron works and a fork works have been "constructed.

"In speaking of animals in workshops—it was the custom to keep birds "in used and disused sculleries—the Inspector informs me that he is "getting this remedied as he proceeds with his house-to-house visits."

Redditch Urban.

Mr. Jameson (Sanitary Inspector) says :

"During the year 294 visits have been made under (the Factory and "Workshops Act, 1901). 16 notices were received from H.M. "Inspector of Factories, all of which received attention. Five of the "notices had reference to the provision of alternate means of escape in "case of fire for the persons employed; these cases have been carefully "dealt with, and the improvements that have been carried out have "been fully reported upon to H.M. Inspector of Factories as required."

Stourbridge Urban.

Mr. Kent reports that :

"At the end of 1912 there were 240 workshops on the register."

He paid 86 visits to these. Eight complaints received from H.M. Inspector were remedied.

Schools.

87 Closing Orders with regard to Schools in the Administrative County were issued on account of outbreaks of Infectious Diseases in 1912, as compared with 130 in 1911, viz. :

Measles	-	-	-	-	-	26
Whooping Cough	-	-	-	-	-	20
Scarlet Fever	-	-	-	-	-	11
Mumps	-	-	-	-	-	3
Diphtheria	-	-	-	-	-	4
Chickenpox	-	-	-	-	-	4
Influenza and Whooping Cough	-	-	-	-	-	3
German Measles	-	-	-	-	-	3
Whooping Cough and Colds	-	-	-	-	-	2
Whooping Cough and Chickenpox	-	-	-	-	-	2
Mumps and Whooping Cough	-	-	-	-	-	2
Measles and Influenza	-	-	-	-	-	1
Measles and Scarlet Fever and to avoid serious loss of Grant	-	-	-	-	-	1
Measles and Whooping Cough	-	-	-	-	-	1
Disinfection after Scarlet Fever	-	-	-	-	-	1
Ringworm and Dermatitis	-	-	-	-	-	1
Coughs	-	-	-	-	-	1
Scarlet Fever and Sore-throats	-	-	-	-	-	1
Total	-	-	-	-	-	87

With regard to the inter-communication which has been arranged between Head School Teachers and Medical Officers of Health, Dr. Kidd (Bromsgrove North Urban) says :

"The notification of cases of Measles and Whooping Cough by School Teachers to the Medical Officer of Health is, I think, most useful by giving early information of the presence of these non-notifiable diseases."

The Annual Reports show that the Medical Officers of Health "keep an eye" on the sanitary conveniences at the Schools, as they are empowered to do. The Director of Education is advised of any sanitary defects of school out-offices, to which they call attention.

Offensive Trades.

The number of "Offensive Trades," as defined by S. 112 of the Public Health Act, 1875, in the County is not large.

Mr. Jameson (Redditch), referring to the 17 complaints he received with regard to nuisances created by fried-fish shops, says :

"The principal cause of complaint is undoubtedly the effluvia nuisance, as the trade is notorious in this respect, due to the escape of vapours in the process of frying. It has been suggested that the business of a fried fish-fryer would be greatly simplified if it was classified as an offensive trade within the meaning of Section 112 of the Public Health Act, 1875. This would be an extreme measure, and would impose great restrictions on this useful class of business, and whilst it must be admitted that there is always more or less a disagreeable effluvia emanating from fried fish shops when the frying is in progress, there are to my mind details in connection with such businesses that are of even more importance to the people than the effluvia nuisance . . . Cotton seed oil is generally the frying media used in this district, which, being a vegetable oil, has a peculiar odour which is noticeable even when not heated, besides which a substance deposits upon the inside of the frying pan. People with limited capital sometimes venture into this business, and usually end disastrously, as ill-adapted or obsolete appliances are procured, and these cause continual sources of trouble and annoyance, and eventually failure. . . . As these shops are undoubtedly a great benefit to a large section of the community, every precaution has been taken to give advice as to the general management, with the idea of obtaining a better state of cleanliness and wholesomeness in the conditions of these useful shops."

Stourbridge Urban.

Dr. Freer says :

"In 1910 the Council applied to the Local Government Board to have certain trades included in the list of Offensive Trades. This sanction was obtained in 1910."

The Sanitary Inspector (Mr. Kent) reports :—

"There are 24 offensive trade carried on in the district, viz. : Fish fryers 12, hide and skin dealers 3, fat dealers 1, fellmongers 1, leather dressers 1, and tripe boilers 6." Permission was given during the year for the establishment of two tripe boiler's businesses ; but sanction to commence fish frying was refused in one instance.

Canal Boats.

Table XVI. shows that canal boats are inspected in the districts where there are canals, viz. :

Bewdley Borough, Droitwich Urban, Kidderminster Borough, Oldbury Urban, Stourport Urban, Bromsgrove Rural, Droitwich Rural, Halesowen Rural, Kidderminster Rural, Pershore Rural, Tewkesbury Rural, Upton-on-Severn Rural.

The Sanitary Inspector for Kidderminster Borough (Mr. Cowderoy) reports :

"On the whole, the cabins are kept clean, and not overcrowded. Very few women and children are met with on boats passing through the Borough. In 6 instances the boats were worked by a man and his wife (only). In 25 instances the boats had on board a man, his wife, and one or more children, and 201 boats were worked by men only). A willingness is always shown by the canal boat people to comply with the law."

The Medical Officer of Health for Upton-on-Severn Rural District (Dr. Cowley) says :

"The Inspector reports that he has inspected 19 boats, and that in no case was it necessary to deal with them through contravention of Act or regulations."

Common Lodging Houses.

Table XVI. shows that the Common Lodging Houses are inspected. They appear to be kept in a cleanly condition. The statements in the reports call for no comment.

Burial Grounds.

Kidderminster Borough.

It was reported in my last "Digest" that the Sanitary Inspector was of opinion that St. John's Churchyard was becoming overcrowded, and consequently the Vicar and Churchwardens promised to prepare plans showing the grave spaces and number of burials which had taken place. No reference to this question is made in the Annual Reports for 1912, but I am informed that the Vicar has now submitted to the Health Committee a plan of the Churchyard, showing each grave space, and he has also compiled a register of the graves.

Evesham Rural District.

Church Honeybourne Churchyard having been closed by an Order of the Local Government Board, the Vicar and Churchwardens have enlarged it. I advised that Offenham Churchyard should be closed on December 31st, 1914, and the Parish Council, the Vicar, and the Churchwardens agreed that this was necessary. A Local Government Board Inspector held a Local Inquiry, but the Board have decided to take the matter into consideration next year. As I did not suggest that this Churchyard should be closed until the end of next year, this decision should meet the case. There seems every probability that the present Churchyard can be enlarged.

Byelaws.

My last "Digest" (p. 115) contained an extract from a circular issued by the Local Government Board, with regard to Byelaws for New Streets and Buildings, in which the Board said: "There are some Rural Districts in which a code of byelaws based on the Board's original model series, which was drawn up with special reference to Urban Areas, is still in force. These codes are not only more stringent than the Board would at the present day consider necessary in a Rural Area, but are not relieved by the relaxations and modifications which have been embodied in the latest model code for Urban Districts, with a view, not only of meeting special difficulties, but of securing greater flexibility in the administration of the 'Byelaws.' The Councils of these districts should take the matter into early consideration, and see whether a less exacting series of Byelaws would not meet the reasonable requirements of their area."

In compliance with your instructions, I asked the Clerk of each *Rural* Council if he would be good enough to send me a complete set of all the Sanitary Bye-laws in force in his District? The whole of them (16 in number) acceded to my request, and consequently I learn that there are no Building Bye-laws in force in four Rural Districts, viz. : Newent, Rock, Shipston-on-Stour, and Stow-on-the-Wold.

The following statement shows the dates when the other 12 Rural District Councils framed their Building Bye-laws :

Rural District.	Date when Building Bye-laws were allowed by the Local Government Board.			
Bromsgrove - - -	-	-	-	5 July, 1898.
Droitwich - - -	-	-	-	15 November, 1898.
Evesham - - -	-	-	-	24 December, 1908.
Feckenham - - -	-	-	-	23 January, 1904.
Halesowen - - -	-	-	-	6 July, 1897.
Kidderminster - - -	-	-	-	24 December, 1907.
Martley - - -	-	-	-	26 July, 1882.
Pershore - - -	-	-	-	23 February, 1899.
Tenbury - - -	-	-	-	25 September, 1882.
Tewkesbury - - -	-	-	-	7 January, 1903.
Upton-on-Severn - - -	-	-	-	6 October, 1899.
Winchcombe - - -	-	-	-	24 July, 1909.

From this it appears that some of the local Building Bye-laws have been in force for some time. Presumably, therefore, they could be revised with advantage. Such being the case, it seems to me the Local Authorities who framed their Bye-laws some years ago, might with advantage now reconsider them.

With a view to enabling Local Authorities to revise their Bye-laws and make them suitable for the needs of the locality, the Local Government Board issued a model series of Building Bye-laws for Rural Districts in 1901. They have also framed a series, suitable for Rural areas which are beginning to assume Urban characteristics.

I was unable to file a copy of the Martley Bye-laws, as the Clerk could not spare one, no others being in existence. Under these circumstances, persons about to build in this district cannot obtain these regulations for guidance.

Bromsgrove Rural (Dr. Coaker).

"The present Bye-laws were made 13 years ago, and have been followed
"very closely. In consequence of the increase of prices of materials,
"and the introduction of stronger materials, it would seem advisable
"to consider whether some revision should not be made. I would
"like to see better pantry accommodation insisted upon, so that
"places where food is stored shall have good ventilation."

Administration of Midwives Act, 1912.

I think I can best comply with the requirements of the Local Government Board—that County Medical Officers should report annually upon the administration of the Midwives Act—by giving extracts from the "Eighth Annual Report of the Midwives Act Committee to the County Council":

"Number of Midwives in the County.

"On the 1st January, 1912, there were 253 certified Midwives on the
"County Roll.
"Since that date 7 have died, 6 retired, and 12 left the County, and 18
"on the Roll last year have not given notice this year. 42 new Mid-
"wives gave notice of their intention to practice. On the 1st January,
"1913, there were therefore 252 Midwives on the Roll.

"Illegal Practice.

"It was not necessary to take action against any woman for illegal practice,
"and it is obvious that the convictions obtained in previous years have
"had the desired effect.

"Inspection of Midwives.

"The Midwives have been duly inspected by the two Medical Inspectors.
"Beyond question, mothers and infants are receiving better care as a result
"of the Midwives Act.
"A suggestion has been made that the visits to Midwives should be fewer
"in order to save the cost of the Inspectors' travelling expenses; but
"we are convinced that the present satisfactory state of the practising
"Midwives has been effected and can only be maintained by constant
"supervision; and that if this is relaxed, there would be a return to
"neglect and laxity on the part of many Midwives, as 59 per cent. of
"the Midwives in the County are untrained. Such a condition would
"be most regrettable. It would not only entail great hardship and

"sufferings amongst the poor parturient women in the County, but
 "would also undoubtedly affect the health and vigour of the child, for
 "in many cases, through the ignorance and neglect on the part of
 "Midwives, the mother may acquire a condition of illhealth which
 "would account in many cases for the physical deterioration which
 "unhappily is so often apparent in many children.

"Infringement of Rules.

"The County Medical Officer found it necessary to caution only 6 Midwives
 "during 1912 for breaches of the Rules. These were as under:—

- "Failure to send in Form VIII, when practising Midwifery.
- "Failure to take bag to case.
- "Register in arrears.
- "Door plate wrongly inscribed.
- "Neglect of patients.

"Cases attended by Midwives.

"The County Medical Officer has obtained the following information of the
 "Midwives' work during 1912:—

- "A. The number of Births attended by Midwives.
- "B. How many times each Midwife sought Medical aid.
- "C. How many Still-births each Midwife attended.
- "D. The number of deaths of Mothers and Infants in each Midwife's practice.

"A. Number of Births attended by Midwives.

"The returns made by the Midwives shew that:

"(1) 7 Trained Midwives attended				-	-	No case.
59	"	"	"	-	-	1- 10 cases.
23	"	"	"	-	-	11- 20 "
4	"	"	"	-	-	21- 30 "
3	"	"	"	-	-	31- 40 "
3	"	"	"	-	-	41- 50 "
2	"	"	"	-	-	51- 75 "
3	"	"	"	-	-	76-100 "
"(2) 14 Untrained Midwives attended				-	-	No case.
76	"	"	"	-	-	1- 10 cases.
20	"	"	"	-	-	11- 20 "
7	"	"	"	-	-	21- 30 "
9	"	"	"	-	-	31- 40 "
6	"	"	"	-	-	41- 50 "
7	"	"	"	-	-	51- 75 "
6	"	"	"	-	-	76-100 "
3	"	"	"	-	-	101-150 "

"In the course of 1912 the Worcestershire Midwives attended 4,033 lying-in
 "women, i.e., 60 per cent. of the Births notified in the Administrative
 "County, as compared with 63 per cent. in 1911.

"B. Medical Aid Records.

"The Rules of the Central Midwives Board require a Midwife in certain
 "conditions of the mother or child to advise in writing that a Medical
 "Practitioner be sent for, and to send to the Local Supervising
 "Authority a copy of that notice.

"The following are the numbers of these notices sent in by Midwives
 "during the last six years, viz. :—

" 1912	1911	1910	1909	1908	1907
318	329	210	177	161	175

" (King's Norton and Northfield and Yardley figures not included).
 " These were returned as follows:—

" (1)	43	Trained	Midwives	sent in	-	-	No Notice.
	23	"	"	"	-	-	1 "
	13	"	"	"	-	-	2 notices.
	10	"	"	"	-	-	3 "
	3	"	"	"	-	-	4 "
	8	"	"	"	-	-	From 5 to 7 notices.
	4	"	"	"	-	-	" 8 to 15 "

" It will be noticed that during the past two years the number of Medical
 " Aid Records sent in have materially increased, and now that the
 " Doctor's fee is provided for it is expected that this increase will be
 " maintained.

" (2)	101	Untrained	Midwives	sent in	-	-	No Notice.
	14	"	"	"	-	-	1 "
	15	"	"	"	-	-	2 notices.
	6	"	"	"	-	-	3 "
	4	"	"	"	-	-	4 "
	5	"	"	"	-	-	From 5 to 7 notices.
	3	"	"	"	-	-	" 8 to 17 "

" C. Still-births.

" The numbers of Still-births reported by Midwives during the past seven
 " years were as follows, and for the sake of comparison, the King's
 " Norton and Northfield, and Yardley, figures are not included:—

	1906	1907	1908	1909	1910	1911	1912
" Notified by Midwives	58	64	68	92	139	150	191
" Notified by Doctors							
" and Parents	-	—	—	40	142	129	85
" Totals	- 58	64	68	132	281	279	276

" D. Deaths of Mothers and Infants.

" Seven deaths of mothers or infants were reported, and each was the
 " subject of an Inquiry, but no action on the part of the Committee
 " was necessary.

" Laying out of Dead Bodies.

" In accordance with Rule 17, 30 notices have been received from Mid-
 " wives, of the laying out of dead bodies.

" Puerperal Fever.

" The following is a return of Puerperal Fever cases attended by Midwives
 " during the years 1907 to 1912:—

" In 1912	-	-	-	-	-	10 cases.
" 1911	-	-	-	-	-	8 "
" 1910	-	-	-	-	-	12 "
" 1909	-	-	-	-	-	15 "
" 1908	-	-	-	-	-	13 "
" 1907	-	-	-	-	-	18 "

" Each Midwife in attendance was suspended by the County Medical Officer
 " until proper disinfection was carried out; and special enquiries were
 " made by the Inspectors, as a result of which 2 of the Midwives were
 " reprimanded for breaches of the Rules.

" Training of Midwives.

" The annual Grants of the Higher Education Committee have enabled

"your Committee to train 40 women during the past seven years.
 "Only two of these failed to pass the Central Midwives Board Examination, one was found not suitable, and one has not yet finished training.

"At the present time there are 104 Trained Midwives in the County, i.e.,
 "41 per cent. of the Midwives are now trained, as compared with 7
 "per cent. in 1905.

"We cannot too strongly urge the importance of training suitable local
 "women to act as Midwives to take the place of the old registered
 "midwife, who is slowly dying out. It also becomes more apparent
 "that it is almost useless to train women (particularly those in country
 "districts) unless they have some other means of livelihood. One Mid-
 "wife duly trained and most satisfactory in every respect is leaving
 "the County as her income from Midwifery in 1912 was £16. The
 "combination of District Nurse and Midwife seems to work well, and
 "it is hoped will be still further extended, especially in the Rural
 "Districts of the County. While it is expected that at a future date
 "some help may be obtained from the County Insurance Funds for
 "the training of Midwives, we hope that for another year at least
 "the Higher Education Committee will continue the Grants for
 "training as in former years.*

"Statistics of Midwives practising in the County.

	1909	1910	1911	1912
"Trained Midwives certified by Examination -	78	94	95	104
"Untrained Midwives certified as being in bona " fide practice prior to 1901 -	-	-	173	172
			158	148
"Totals -	-	251	266	253
				252

"Temperature Books.

"In accordance with the Rules of the Central Midwives Board the books
 "for recording temperatures are now in general use, except by those
 "Midwives who are considered not to be trusted to use them.

"While in most cases the Thermometers are being properly used, in some
 "instances this is not so; and at an important Inquiry held during
 "the year, it transpired that the Midwife's Book showed that all
 "recorded temperatures were 98° F. without the slightest variation.

"Inquiry.

"Only one Inquiry was held last year. In this case there was no question
 "that the Midwife had neglected to call in Medical Aid according to
 "the Rules, but owing to the apparent uselessness of reporting cases
 "of neglect to the Central Midwives Board and to the fact that the
 "Midwife gave an undertaking to cease practice, no further action
 "was taken.

"Notification of Changes of Address etc.

"The notification of changes of address and of the deaths of seven certified
 "Midwives have been notified to the Central Midwives Board."

* The grant has been continued.

County Chemical and Bacteriological Laboratory.

The County Analyst and Bacteriologist (Mr. Duncan) has favoured me with the following statement :—

During the year (1st January to 31st December, 1912) the total number of samples received for analysis, Chemical and Bacteriological, was 6,004. They may be divided as follows :—

Chemical.

Fertilisers and Feeding Stuffs	-	-	-	-	-	300
Food and Drugs	-	-	-	-	-	1,604
Miscellaneous	-	-	-	-	-	79
Poisoning Cases	-	-	-	-	-	11
Sewage	-	-	-	-	-	16
Water	-	-	-	-	-	368
Total Chemical	-	-	-	-	-	2,378

Bacteriological.

Anthrax	-	-	-	-	-	-	11
Diphtheria	-	-	-	-	-	-	1,777
Miscellaneous	-	-	-	-	-	-	216
Ringworm	-	-	-	-	-	-	702
Tubercle	-	-	-	-	-	-	542
Typhoid	-	-	-	-	-	-	71
Water	-	-	-	-	-	-	307
Total Bacteriological	-	-	-	-	-	-	3,626

Food and Drugs.

Under the Sale of Food and Drugs Acts, 1,210 samples were taken. The County Police took 1,119 samples, of which 38 were obviously adulterated. The Sanitary Authority of the City of Worcester took 91 samples, of which 10 were adulterated. The samples were adulterated to the extent of 3.9%, as against 5.3% in 1911. The following drugs were found to be adulterated: Solution of Ammonia, Camphorated Oil, and Grey Powder.

In the County, 10 samples of milk showed serious deficiency in Fat or Solids not Fat, and fines were inflicted varying from 10s. to £5.

In the City of Worcester, 6 samples of milk were returned as adulterated, out of 53, and the fines varied from £1 to £5 with costs.

On the whole, the quality of the Food and Drugs sold in the County may be considered to be fairly satisfactory.

As regards Rice, which was specially reported upon in 1909, the presence of a Polishing Material, such as Talc, is still noticeable, but in quantity under that recommended as a maximum by the Local Government Board.

The samples of Butter, Lard, and Cheese were satisfactory as regards Foreign Fat. Paraffin Wax was carefully examined for in most samples, but with negative results.

All samples of Milk taken under the Sale of Foods and Drugs Acts were tested for preservatives, such as Boron Compounds and Formalin, with the very satisfactory result that all the tests gave negative results.

The Sale of Milk Regulations, 1912, came into force on the 1st September, 1912, and refer to the composition of Separated or Skimmed Milk, and that they should not contain less than 8.7% of Milk Solids other than Milk Fat.

The Public Health (Milk and Cream) Regulations, 1912, came into operation on October 1st, 1912. The Regulations relate to the use of preservatives in Milk and Cream.

The addition of preservatives to Milk is now prohibited.

To Cream containing less than 35% of Milk Fat no preservative may be added. If, however, the Cream contains 35% or more of Milk Fat, Boric Acid, Borax, or a mixture of these preservative substances, or hydrogen peroxide may be added, but unfortunately the quantity is not limited by the Regulations.

Bacteriological Department.

During 1912, 3,626 specimens were received for Bacteriological examination. There was a considerable decrease in the number of swabs sent in for examination.

There has been a considerable increase in the number of specimens sent in for the determination of the micro-organism suspected to be causing trouble. Pure cultures of the various organisms have been obtained, so that vaccines of various strengths may be prepared. These examinations have developed considerably, and require much detailed work.

A large number of hairs have been sent in for examination for Ringworm. Out of 702 examinations, 435 were positive, 260

negative, and 7 failed owing to the loss of hairs during treatment with Caustic Potash.

Tuberculosis.

During the past year 542 specimens of Sputa, etc. were examined for the Tubercle Bacillus. All specimens of Sputa were smeared on two glass slides, stained by Ziehl-Neelsen's method, and bleached with Nitric Acid Solution, and examined under the microscope for Acid-fast Bacilli. If Acid-fast Bacilli were not detected the specimens were concentrated, after clearing, in the centrifuge, and the sediment stained as above. By this process—which takes more time to perform than the above—a much larger volume of Sputum can be examined, but my experience has been that it shows only an increase in the detection of Acid-fast Bacilli of about 2%. The Anti-formin Process was also made use of, but with results not so successful as with the two processes mentioned above.

The County Bacteriologist calls special attention to the fact that many specimens are sent to him by medical men, who do not state the nature of the examination required. A short statement of the nature of the specimen and the examination required, with *name and address of sender*, should be enclosed with all specimens, or if specimens and letters are sent under separate cover, the specimen should be marked so that it can be readily identified.

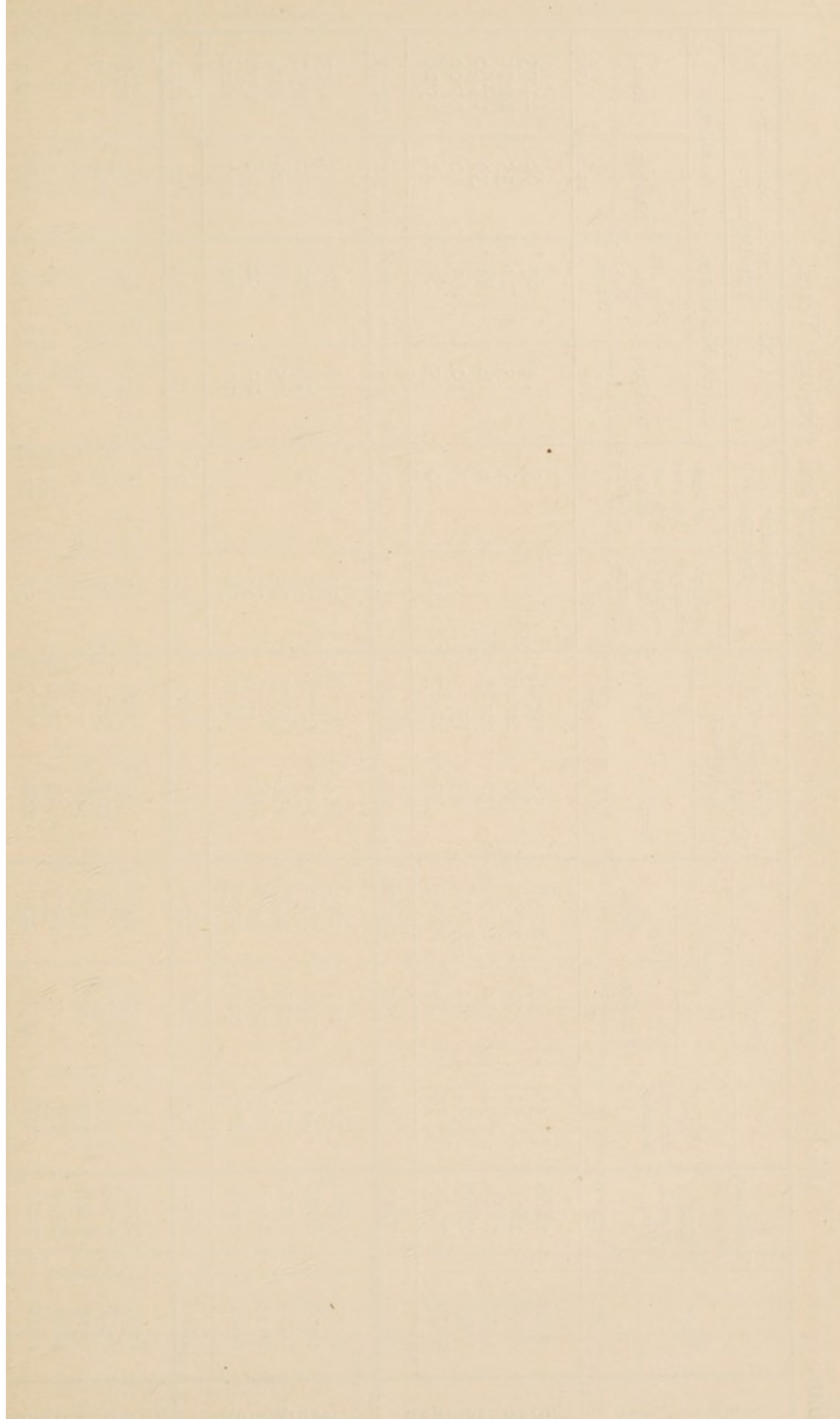
The following Tables give the statistical information required by the Local Government Board, with respect to each Sanitary District in the County; as well as Summaries (Table XVI.) of the detail work carried out by the Sanitary Inspectors.

Your obedient Servant,

G. H. FOSBROKE, D.P.H.Camb.
County Medical Officer.

Shirehall, Worcester,
September, 1913.





Urban. TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District	of Residents registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
Bewdley Boro.	1	2	3	4	5	6	7	8	9	10	11	12	13
	1907	2866	59	59	20.58	55	19.36		5	4	67	60	20.93
	1908	2866	72	72	25.12	30	10.46		5	3	41	35	12.21
	1909	2866	74	74	25.81	37	12.87		2	6	81	39	13.60
	1910	2866	61	61	21.28	43	15		7	10	163	50	17.09
	1911	2745	74	74	26.95	33	12.02	1	10	5	67	42	15.26
Bromsgrove.	1912	2745	54	54	19.66	31	11.29		10	5	92	41	14.93
	1907	8620	217	217	25.1	154	17.8	39		18	82	115	13.3
	1908	8660	241	241	27.8	155	17.8	27	2	29	120	130	15.0
	1909	8700	215	215	24.7	154	17.7	28		25	116	126	14.4
	1910	8740	217	217	24.8	146	16.7	30		20	92	116	13.2
	1911	8928	201	201	22.5	167	18.7	38		20	99	129	14.2
Bromsgrove North.	1912	8950	206	206	23.0	144	16.0	30	3	11	53	117	13.0
	1907	6000	152	152	24.6	77	12.8	17	5	11	72	65	10.8
	1908	6000	157	157	26.1	124	20.6	50	10	14	89	84	14.0
	1909	6040	150	150	24.8	156	25.8	76	6	16	106	86	14.2
	1910	6200	157	157	25.3	143	23.0	69	3	11	70	77	12.0
	1911	7210	138	138	20.6	128	17.7	51	11	19	137	88	12.2
Bromsgrove North.	1912	7300	140	140	20.9	105	14.3	44	5	11	78	66	9.8

TABLE III. Causes of, and ages at Death, 1912.

Name of District.		All Causes.		Enteric Fever.	Smallpox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria and Croup.	Influenza.	Erysipelas.	Phthisis (Pulmonary Tuberculosis).	Tuberculous Meningitis.	Other Tuberculous diseases.	Cancer, malignant disease.	Rheumatic Fever.	Meningitis.	Organic Heart disease.	Bronchitis.	Pneumonia (all forms).	Other Respiratory diseases.	Diarrhoea and Enteritis.	Appendicitis and Typhilitis.	Cirrhosis of Liver.	Alcoholism.	Nephritis and Bright's disease.	Puerperal Fever.	Other Accidents and diseases of Pregnancy and Parturition.	Congenital Debility and Malformation.	Violent deaths, excluding Suicide.	Suicides.	Other defined diseases.	Diseases ill-defined or unknown.				
		Certified.	Uncertified.																																		
Bewdley Boro.	Under 1 Year	5					1	1												1	1								1			1					
	1-2	2						1												1	1												1				
	2-5	—																																			
	5-15	2													1					1	1													1			
	15-25	3												2						1	2													10			
	25-45	6																		1	1																
	45-65	7																		1	1																
	65 & upwards	16																		1	2																
Bromsgrove.	Under 1 Year	11																		3	3									4			1				
	1-2	3																		1	1														1		
	2-5	1																																		2	
	5-15	5												1	1						1																
	15-25	6																																			
	25-45	9																		2	1																
	45-65	29																		10	1														7		
	65 & upwards	53																		3	1															10	21
Bromsgrove North.	Under 1 Year	11																		3	1									3			4				
	1-2	4																		2																	
	2-5	2																																			
	5-15	5																																			
	15-25	6																																			
	25-45	3																																			
	45-65	11																		5	1																
	65 & upwards	24																		12	1															3	2	10

Urban. TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Nett.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Nett Births.	Number.	Rate.
Droitwich Borough.	1	2	3	4	5	6	7	8	9	10	11	12	13
	1907	4,201	92	92	21.8	88	21.1	10		15	163	78	18.5
	1908	4,201	85	85	20.2	71	16.9	8		3	35	63	14.9
	1909	4,201	105	105	24.9	79	18.8	9	2	4	38	72	17.1
	1910	4,220	80	80	18.9	73	17.2	11	1	14	150	63	14.6
	1911	4,146	93	93	22.6	67	16.14	5	1	13	139	63	15.1
	1912	4,146	96	96	23.39	63	15.1	7	4	9	93	60	14.4
Evesham Borough.	1907	8,290	234	234	28.2	93	11.2	1	7	16	68	99	11.9
	1908	8,290	234	234	28.2	94	11.3	1	7	16	68	100	12.0
	1909	8,300	216	216	26.1	97	11.6	5	14	24	111	106	12.7
	1910	8,300	218	218	26.2	92	11.0	4	17	20	90	105	12.6
	1911	8,341	216	217	26.0	94	11.2	4	22	30	138	112	13.4
	1912	8,340	200	204	24.4	82	9.8	5	22	17	83	99	11.8
KidderminsterBoro.	1907	24,700	550	550	22.26	366	14.81	30		77	140.00	336	13.60
	1908	24,700	522	522	21.13	409	16.55	45		63	120.68	364	14.73
	1909	24,700	560	560	22.67	483	19.55	39	2	90	160.71	444	17.97
	1910	24,700	503	503	20.36	389	15.75	54		73	145.12	334	13.52
	1911	24,400	536	536	21.96	420	17.21	54	13	80	149.25	379	15.53
	1912	24,400	548	545	22.33	348	14.26	46	11	55	100.91	313	12.82

Urban. TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
Lye and Wollescote.	1	2	3	4	5	6	7	8	9	10	11	12	13
	1907	11,535	317	317	27.4	160	13.8		15	46	145	175	15.1
	1908	11,627	370	370	31.8	148	12.7		21	35	94	169	14.5
	1909	11,721	331	331	28.2	197	16.8		25	43	129	222	18.9
	1910	11,815	303	303	25.6	129	10.9		9	29	95	138	11.6
	1911	11,684	336	336	25.6	181	15.4		28	50	148	209	17.8
	1912	11,796	327	328	27.8	142	12.0		22	37	112	164	13.8
Malvern.	1907	17,500	271	271	15.4	165	9.4		20	21	77	185	10.5
	1908	18,000	228	228	12.6	180	10.0	2	12	19	83	190	10.5
	1909	18,000	261	261	14.5	213	11.8	1	14	21	80	226	12.5
	1910	18,000	243	243	13.5	196	10.8	2	16	20	81.4	210	11.0
	1911	16,514	245	249	15.1	199	12.7	17	23	16	64.2	205	12.4
	1912	16,514	225	227	13.7	190	11.2	9	22	12	52.8	203	12.2
Oldbury.	1907	28,000	1,011	1,011	36.1	462	16.5		47	164	162	509	18.1
	1908	29,000	1,060	1,060	35.6	447	15.4		64	156	147	511	17.6
	1909	29,300	1,002	1,002	34.1	443	15.1		47	135	134.9	489	16.6
	1910	29,600	1,053	1,053	35.5	406	13.7		59	133	126.3	464	15.6
	1911	32,240	978	985	30.5	471	14.6		75	152	154	546	16.9
	1912	32,232	1,048	1,054	31.7	390	11.7		63	135	128	453	13.6

Urban. TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Nett.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
	I	2	3	4	5	6	7	8	9	10	11	12	13
Redditch.	1907	15,070	406	406	27.6	162	11.0	2	11	46	113	171	11.3
	1908	15,340	396	396	25.8	177	11.5	4	14	38	95	187	12.1
	1909	15,600	349	349	22.3	198	12.6	4	6	30	85	200	12.8
	1910	15,885	351	351	22.0	171	10.7	6	10	30	85	175	11.0
	1911	15,500	307	310	20.0	168	10.8	10	21	30	96	179	11.5
	1912	15,700	312	315	20.0	173	11.0	3	16	19	60	186	11.8
Stourbridge.	1907	16,929	434	434	25.63	221	13.05		38	54	124.42	259	15.30
	1908	17,031	444	444	26.07	202	11.86		27	37	83.83	229	13.23
	1909	17,134	430	430	25.09	254	14.83	1	25	66	153.48	288	16.88
	1910	17,238	406	406	23.55	193	11.19	1	18	44	108.37	210	12.12
	1911	17,341	450	450	25.99	229	13.20	3	34	59	131.11	260	14.99
	1912	17,407	399	405	23.26	198	11.37		37	39	96.29	235	13.50
Stourport.	1907	4,392	102	102	23.2	67	15.2		7	16	156.9	74	16.8
	1908	4,402	81	81	18.4	42	9.5		8	8	98.1	50	11.3
	1909	4,412	90	90	20.3	44	9.9		10	6	66.6	54	12.2
	1910	4,422	97	97	21.9	38	8.4		6	7	72.1	44	9.9
	1911	4,432	104	104	23.4	47	10.5	1	17	13	125	63	14.1
	1912	4,422	84	85	19.2	55	12.4		8	10	119	63	14.2

Rural.

TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

IX.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.		Number.	Rate.
	1	2	3	4	5	6	7	8	9	10	11	12	13
Bromsgrove.	1907	12,250	287	287	23.4	150	12.2		17	21	73	167	13.6
	1908	12,300	283	283	23.0	149	12.1		11	22	77	160	13.0
	1909	12,300	238	238	19.3	147	11.9		15	26	108	162	13.1
	1910	12,300	286	286	23.3	121	10.9	1	16	18	62	136	11.0
	1911	13,132	243	245	18.6	134	10.2	2	17	27	110	149	11.3
	1912	13,700	271	275	20.0	136	9.9	4	20	16	58	152	11.0
Droitwich.	1907	12,932	308	308	23.5	159	12.2		15	30	98.3	174	14.2
	1908	12,932	256	256	19.8	155	11.9		16	23	89.8	171	15.2
	1909	12,932	264	264	20.4	145	11.2		12	19	71.9	157	12.1
	1910	12,932	254	254	19.6	149	11.5		18	19	74.8	167	12.9
	1911	12,975	241	242	18.6	133	10.2		22	20	82.6	155	11.9
	1912	12,975	253	261	20.1	149	11.4		35	21	80.4	184	14.1
Evesham.	1907	8,290	234	234	28.2	93	11.2	1	7	16	68	99	11.9
	1908	8,290	234	234	28.2	94	11.3	1	7	16	68	100	12.0
	1909	8,300	216	216	26.1	97	11.6	5	14	24	111	106	12.7
	1910	8,300	218	218	26.2	92	11.0	4	17	20	90	105	12.6
	1911	9,095	202	201	22.2	119	13.0	21	9	10	49	107	11.7
	1912	9,095	211	206	22.6	113	12.4	14	6	16	77	105	11.5

Name of District.	All Causes.		Smallpox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria and Croup.	Influenza.	Erysipelas.	Pneumonia (all forms).	Other Respiratory diseases.	Diarrhoea and Enteritis.	Typhoid, Typhitis, and Appendicitis.	Liver, Cirrhosis of.	Alcoholism.	Nephritis and Bright's disease.	Puerperal Fever.	Other Accidents and diseases of Pregnancy and Parturition.	Congenital Debility and Malformation.	Violent deaths, excluding Suicide.	Suicides.	Other defined diseases.	Diseases ill-defined or unknown.
	Certified.	Uncertified.																					
Bromsgrove.	Under 1 Year	16				1						2							8	1			3
	1-2	2										1											1
	2-5	4					2																1
	5-15	8					3																1
	15-25	4																		2			3
	25-45	13																					1
	45-65	31																					2
	65 & upwards	74																		1			20
Droitwich.	Under 1 Year	21				3													9				3
	1-2	1																					1
	2-5	4																					1
	5-15	5																					1
	15-25	6																					1
	25-45	22																					7
	45-65	39																					1
	65 & upwards	86																		2			20
Evesham.	Under 1 Year	16																					5
	1-2	3																					1
	2-5	1																					1
	5-15	2																					1
	15-25	3																					1
	25-45	6																					3
	45-65	24																					11
	65 & upwards	49																		2			36

Rural.

TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

XI.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13	
Feckenham.	1907	5,500	145		26.3	54	9.8		10		68	64	11.6
	1908	5,500	123		22.3	72	13.0		5	7	56	77	14.0
	1909	5,450	108		19.8	75	13.7		6	14	130	81	14.8
	1910	5,400	110		20.3	72	13.3		9	6	55	81	15.0
	1911	5,455	101	101	18.5	68	12.4		13	10	99	81	14.8
	1912	5,456	95	96	17.5	51	9.3		12	5	52	63	11.5
Halesowen.	1907	27,349	860		36.4	355	15.9		21	100	117	376	13.7
	1908	27,734	800		33.9	337	14.1	3	17	103	128	351	14.8
	1909	27,734	764		32.4	351	14.8	13	23	89	116	361	15.3
	1910	27,061	769		28.4	332	12.2	2	31	85	110	361	13.3
	1911	25,765	697	698	27.0	375	14.5	4	26	101	144	379	15.4
	1912	25,975	735	741	28.5	322	12.3	6	31	96	129	347	13.3
Kidderminster.	1907	10,100	225		22.27	128	12.6		17	18	80.	145	14.35
	1908	10,100	242		23.96	127	12.5	2	16	19	78.1	141	13.9
	1909	10,100	213		21.1	135	13.36	4	19	23	108.9	150	14.8
	1910	10,100	202		20.0	108	10.7	1	21	19	94.05	128	12.57
	1911	10,500	202	202	19.3	119	11.4	5	16	18	89.1	130	12.4
	1912	10,500	193	192	19.2	124	11.8	8	16	11	57.20	122	12.2

Rural. TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
Martley.	1907	12,941	303	303	23.4	155	11.9	1	15	24	79.2	169	13.05
	1908	12,941	295	295	22.7	161	12.4	2	8	30	101.6	167	12.9
	1909	12,941	288	288	22.1	188	14.4	2	8	28	97.0	194	14.9
	1910	12,941	281	281	21.0	155	11.9	8	14	15	53.3	161	12.4
	1911	13,063	283	283	21.6	167	12.7	1	19	21	74.2	185	14.1
	1912	13,063	274	274	20.9	145	11.1		25	11	40	170	13.0
Newent.	1907	1,308	24	24	18.3	14	10.7			2	83		
	1908	1,308	23	23	17.6	13	9.9			2	117		
	1909	1,308	17	17	13.0	19	14.5					12	9.1
	1910	1,308	16	16	12.2	11	8.4			5	200	17	13.01
	1911	1,306	25	25	19.1	17	13.01						
	1912	1,306	19	19	14.5	14	10.7					14	10.7
Persshore.	1907	12,810	280	280	21.8	170	13.2	2	3	27	96	171	13.3
	1908	12,800	303	303	23.6	197	15.3		10	30	99	207	16.1
	1909	12,700	293	293	23.0	213	16.7	1	9	24	81	221	17.4
	1910	12,700	279	279	21.9	161	12.6		3	21	75	164	12.9
	1911	13,235	282	281	21.1	169	12.7		12	20	70	181	13.6
	1912	13,235	274	274	20.7	169	12.7	3	10	17	62	176	13.2

Rural.

TABLE III.—Causes of, and Ages at Death, 1912.

Name of District.	All Causes.		Enteric Fever.	Smallpox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria and Croup.	Influenza.	Erysipelas.	Phthisis (Pulmonary Tuberculosis).	Tuberculous Meningitis.	Other Tuberculous diseases.	Cancer, malignant disease.	Rheumatic Fever.	Meningitis.	Organic Heart disease.	Bronchitis.	Pneumonia (all forms).	Other Respiratory diseases.	Diarrhoea and Enteritis.	Appendicitis and Typhlitis.	Cirrhosis of Liver.	Alcoholism.	Nephritis and Bright's disease.	Puerperal Fever.	Other Accidents and diseases of Pregnancy and Parturition.	Congenital Debility and Malformation.	Violent deaths, excluding Suicide.	Suicides.	Other defined diseases.	Diseases ill-defined or unknown.			
	Certified.	Uncertified.																																	
Martley.	Under 1 Year	11			1		2													1								1	5	1	1				
	1-2	2																																	
	2-5	2																																	
	5-15	7					1					1																							
	15-25	6									3	2																							
	25-45	20									5	1						4		2															
	45-65	52							1		5						3		1																
	65 & upwards	70									5						14		8																
Newent.	Under 1 Year	1																																	
	1-2																																		
	2-5																																		
	5-15																																		
	15-25	1									1																								
	25-45	1																																	
	45-65	1																																	
	65 & upwards	10													5		2		1																
Pershore.	Under 1 Year	17			2		1																												
	1-2	4					1																												
	2-5																																		
	5-15	5																																	
	15-25	11									2	1																							
	25-45	16									3																								
	45-65	43							1		4						5		2																
	65 & upwards	79	1														6		5																

Rural. TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.		
Rock.	I	2	3	4	5	6	7	8	9	10	11	12	13
	1907	2,100	47	47	22.3	28	13.3		1	3	63	29	13.8
	1908	2,100	45	45	21.4	33	15.7			3	66	33	15.7
	1909	2,050	40	40	19.5	28	13.6			5	100	28	13.6
	1910	2,050	39	39	19.0	27	13.1			2	51	30	14.6
	1911	2,200	48	48	21.8	20	8.1		3	2	41	23	10.4
Shipston-on-Stour.	1912	2,210	44	44	19.9	35	15.6	1		3	68	34	15.3
	1907	4,707	110	110	23.3	89	18.8	16	2	6	55	75	15.9
	1908	4,708	115	115	24.4	88	18.6	14	4	12	104	78	16.5
	1909	4,709	102	102	21.6	81	17.1	13	1	8	80	69	14.5
	1910	4,710	94	94	19.9	87	18.4	20	7	8	85	74	15.6
	1911	4,711	104	105	22.6	99	20.9	12	11	9	86	98	20.7
Stow-on-the-Wold.	1912	4,712	102	101	21.4	72	15.2	9	5	5	50	68	14.4
	1907	292	7	7	24.0	6	20.5					6	20.5
	1908	292	6	6	20.5	6	20.5					6	20.5
	1909	292	5	5	17.4	2	6.7					2	6.7
	1910	292	6	6	20.5	1	3.4					1	3.4
	1911	311	1	1	3.2	3	9.6			1	1,000	3	9.6
1912	311	4	4	12.8	3	9.6					3	9.6	

TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Rural.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
Tenbury.	1	2	3	4	5	6	7	8	9	10	11	12	13
	1907	4,784	105	105	21.9	62		1	3	5	53	64	13.3
	1908	4,770	94	94	19.6	53		3	6	2	25	56	11.7
	1909	4,770	77	77	16.1	68		2	3	11	119	69	14.6
	1910	4,750	92	92	19.5	55			5	4	42	60	12.6
	1911	4,727	78	77	16.2	57			3	11	142	60	12.6
1912	4,713	91	90	90	21.2	74		3	7	7	70	78	16.5
Tewkesbury.	1907	2,293	52	52	22.6	29	12.2			1	18	29	12.2
	1908	2,293	51	51	22.2	31	13.5			2	39	31	13.5
	1909	2,293	64	64	27.9	27	11.7			4	62	27	11.7
	1910	2,293	49	49	21.3	24	10.4			3	61	24	10.4
	1911	2,317	52	54	23.3	31	13.3		2	4	76	33	14.2
	1912	2,317	40	40	17.2	25	10.7		1			26	11.2
Upton-on-Severn.	1907	13,000	299	299	23.0	322	24.7	135	5	29	96.9	189	14.5
	1908	13,000	294	294	22.6	259	19.9	81	4	22	74.8	172	13.2
	1909	13,000	289	289	22.2	270	20.7	89	7	31	107.0	188	14.4
	1910	13,000	260	260	20.0	223	17.1	73	4	17	65.4	154	11.8
	1911	14,400	295	295	22.6	254	18.1	93	13	13	44.4	174	13.3
	1912	*14,596	255	255	19.0	255	†17.4	104	10	14	54.9	161	12.0

* Including Powick Asylum.

† As given by M.O.H.

Rural.

TABLE I.—Vital Statistics of Whole District during 1912 and previous Years.

Name of District.	YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NET DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Net.		Number.	Rate.	of Non-residents registered in the District	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number.	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
Winchcombe.	1	2	3	4	5	6	7	8	9	10	11	12	13
	1907	116						1	8.6			1	8.6
	1908	116	3	3	25.8			3	25.8			3	25.8
	1909	116	3	3	25.8			1	8.6			1	8.6
	1910	116	2	2	17.1			1	8.6			1	8.6
	1911	116	5	5	43.1								
1912	116												

Rural.

TABLE III.—Causes of, and Ages at Death, 1912.

Name of District.	Under 1 Year	All Causes.		Enteric Fever.	Smallpox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria and Croup.	Influenza.	Erysipelas.	Phthisis (Pulmonary Tuberculosis).	Tuberculous Meningitis.	Other Tuberculous diseases.	Cancer, malignant disease.	Rheumatic Fever.	Meningitis.	Organic Heart disease.	Bronchitis.	Pneumonia (all forms).	Other Respiratory diseases.	Diarrhoea and Enteritis.	Appendicitis and Typhitis.	Cirrhosis of Liver.	Alcoholism.	Nephritis and Bright's disease.	Puerperal Fever.	Other Accidents and diseases of Pregnancy and Parturition.	Congenital Debility and Malformation.	Violent deaths, excluding Suicide.	Suicides.	Other defined diseases.	Diseases ill-defined or unknown.
		Certified.	Uncertified.																														
Winchcombe.	Under 1 Year																																
	1-2																																
	2-5																																
	5-15																																
	15-25																																
	25-45																																
	45-65																																
	65 & upwards																																

Nil

Shewing SANITARY WORK done in the SANITARY INSPECTORS' DEPARTMENT during the year 1912, in the COUNTY OF WORCESTER.



