

He must be fully informed on the most recent appliances for testing milk as to quality, butter-fat, and its general fitness for children's food, and must know what to suggest for the reduction to a minimum of the effects arising from noxious trades.

4. Inspection of schools and public buildings as to dampness, plumbing, heating, ventilation, overcrowding, lighting, etc.

5. The regular supervision of the public water supply of the district, and the control of drains, sewers, as regards the direct effects upon health, from sewer-gas in streets, etc., and the disposal of excreta.

Enough then has been indicated to show that the work to be done is extended and of a most exacting character. At present we have this work distributed over the municipalities as given in the following table:

1894.—Table showing number of Boards of Health and health officers to population in Ontario :

Total organized municipalities in Province.	Total number of boards reported organized.	Total M. H. Officers.	Total Sanitary Inspectors.	Total population.	Rates of population to number of M. H. Officers.
743	425	374	205	2,167,460	1 to every 5,795

Returns from reports received in 1894:

	Total number of boards reported organized.	Total M. H. Officers.	Total Sanitary Inspectors.	Total population.	Rates of population to number of M. H. Officers.
Cities	9	9	.....	384,303	1 to every 35,700
Towns	58	50	.....	189,190	1 " 3,780
Villages	87	87	.....	81,431	1 " 1,000
Townships..	271	235	.....	663,494	1 " 2,822

In England, by the Local Government Act of 1888, the population necessary for a county council (health district) was 50,000 ; but as the area of England, compared with that of

the organized municipalities in Ontario is 32,554,880 to 23,154,551 acres in Ontario, while the population is 29,000,000 compared with 2,167,460. in Ontario, it is plain that the extent of area must, in a large degree limit the extent of population for which a medical health officer's services would be available. That 20,000 of a population seems to be a practical working limit in Ontario is seen in the following comparison :

Members of House of Assembly for Ontario numbered in 1893—94 in population of 2,167,460.

Inspectors of schools :

Cities separate from counties, 8 in 358,972 of population.

Towns, 7 in 35,694 of population.

Counties (less cities and towns), 60 in 1,772,794 of population.

Included in their respective county inspectorates are Brantford, Belleville, Stratford, St. Catharines and Windsor. Excluded from county inspectorates are Chatham, Forest, Collingwood, Oshawa, Peterboro', Waterloo, Welland and Niagara Falls.

I find that in 1894 there was expended upon our educational system \$5,233,115 ; this includes \$89,490 as salaries to county school inspectors.

Assuming then that we have some 550 organized townships in Ontario, it would mean that there are now nominally in office some 400 medical health officers in the Province in 750 municipalities. We have seen to what extent the public moneys are expended in matters of education, and by comparison with the following we shall be able to estimate what is spent specifically in an average county on public health work.

Under the heading, Local Board of Health, in the municipal returns made to the Department of Agriculture for the year 1893, from two of our oldest and most prosperous counties, we have the following :

The expenditure under local Boards of Health in the county of Oxford varied :

In 11 townships, from 0 to \$97 ; total, \$481.