[Report of the Medical Officer of Health for Walthamstow].

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

Borough of Walthamstow

EDUCATION COMMITTEE.

REPORT

of the

School Medical Officer

for the Year

1931.

CONTENTS.

EDUCATION COMMITTEE.

Chairman:

Councillor P. Friedberg.

Deputy Chairman:

Councillor E. C. Redhead to 9/5/31.
,, Ross Wyld from 9/5/31.

The Mayor, Councillor G. H. Spackman, J.P., the Deputy Mayor, Alderman T. W. Smith, and the Chairman, Finance Committee,
Councillor Ross Wyld to 9/5/31 and
,, E. C. Redhead from 9/5/31.

Ald. A. Eve, J.P.	Ald. Mrs. M. Norrish.
Ald. H. Frost, J.P.	Ald. W. H. Shaw.
Ald. G. Gibbons. J.P.	Coun. J. Camp.
Ald. A. S. Le Mare, B.A.	Coun. W. B. Fitt.
Ald. Mrs. C. McEntee, J.P.	Coun. W. H. Morris.

Co-opted Members:

P. Astins, Esq.	Mrs. E. M. McGuffie.
G. A. Bubbers, Esq.	Rt. Rev. Mgr. W. O'Grady.
Rev. T. B. Caukwell.	Miss E. M. Pracey, B.Sc.
Rev. A. W. Leyland.	Mrs. E. A. Smith.

S. G. Haskins, Esq.

Director of Education and Chief Executive Officer:

S. W. Burnell, LL.B., B.Sc.

To the Chairman and Members

of the

Walthamstow Education Committee.

Ladies and Gentlemen,

I beg to present the following report on the work of your Authority's School Medical Service during 1931.

The volume of work performed, as shown by the numbers of inspections carried out and the resultant remedy of defects found, showed no diminution during the year.

The very great increase in the number of follow-up visits paid by the School Nursing Staff will be noticed in this connection.

One important extension of service was carried out, namely, the provision of a Rheumatic Clinic, which has already abundantly justified its inception.

In addition, the Ophthalmic Sessions at the Blind and Myope School were duplicated, and the Deaf Centre was brought under the periodical supervision of your Authority's Aural Surgeon.

It is pleasing to remark the good results following Convalescent Home Treatment, the increasing parental appreciation of the Nursery School, and the success of the School Camps.

The personnel of the Service remained unaltered during 1931, but late in the year, Mr. Picton-Evans became ill and, to the deep regret of his colleagues, passed away in January, 1932.

I would gratefully acknowledge the help of your Committee, the co-operation of your Director of Education, Mr. S. W. Burnell, and the assistance of the staff of the Department.

Acknowledgment is made in the body of the report to those who have so readily contributed.

I have the honour to be

Your obedient servant,

A. T. W. POWELL,

School Medical Officer

SCHOOL CLINICS.

Aural	Monday, 2—4.30 p.m.	Lloyd Park.
Minor Ailments ..	Monday, 9—12 a.m.	Lloyd Park and Low Hall Lane.
	Wednesday, 9—12 a.m.	Lloyd Park and Low Hall Lane.
	Friday, 9—12 a.m. ..	Lloyd Park and Low Hall Lane.
	Saturday, 9—12 a.m.	Lloyd Park.
Ophthalmic—		
(*a*) Consultant ..	First Thursday in each month, 9—12 a.m.	Blind School.
(*b*) Retinoscopy ..	Tuesday, 9—12 a.m.	Lloyd Park.
	Thursday, 9—12 a.m.	Lloyd Park.
	Saturday, 9—12 a.m.	Lloyd Park.
Orthopaedic—		
(*a*) Consultant ..	Third Thursday in each month, 9.30—12.30 a.m.	Physically Defective School.
(*b*) Massage ..	Monday, Tuesday, Wednesday, Friday, 1.30—4.30 p.m.	Ditto.
	Thursday, 9.30—12.30 a.m.	Ditto.
Rheumatism ..	Thursday, 2—4.30 p.m.	Lloyd Park.
Infectious Disease ..	Tuesday, 2—3 p.m.	Lloyd Park.

1. STAFF OF SCHOOL MEDICAL DEPARTMENT.

School Medical Officer and Medical Officer of Health.

A. T. W. Powell. M.C., M.B., B.S., D.P.H.

Assistant School Medical Officers.

D. Broderick, M.B., B.Ch., B.A.O., D.P.H., Barrister-at-Law.
Miss Mary C. Sheppard, B.A., M.B., B.Ch., B.A.O., D.P.H.
Miss Mary C. Clarke, M.B., B.Ch., B.A.O.

Specialist Part-time Medical Officers.

Aural Surgeon ..	A. R. Friel, M.A., M.D., F.R.C.S.I.
Orthopaedic Surgeon ..	B. Whitchurch Howell, M.B., B.S., F.R.C.S.
Ophthalmic Surgeon ..	H. J. Taggart, B.A., M.B., B.Ch., B.A.O., F.R.C.S., D.O.M.S.
Physician-in-Charge—Rheumatism Clinic	Wilfrid P. H. Sheldon, M.D., M.R.C.P. (appointed 14/4/31).

Dental Surgeons.

Mrs. W. Rosa Thorne, L.D.S., R.F.P.S., D.D.S.
The late G. A. Picton-Evans, L.D.S., R.C.S. (Eng.).

School Nurses.

Miss M. McCabe, S.R.N., H.V. Cert. (1919). (Supt.)
Miss F. M. Brophy, S.R.N., C.M.B. Miss D. A. Dolling, S.R.N. Miss M. Dunne, S.R.N., C.M.B. Mrs. J. Morris, S.R.N., C.M.B.

Dental Nurses.

Miss Bacon, Cert. S.I.E.B. and H.V. (R.S.I.).
Mrs. F. McWilliam.

Masseuses.

Miss A. M. Theobald, C.S.M.M.G. (half-time).
Miss M. Scott, C.S.M.M.G. (half-time). (Resigned 29/8/31).
Miss M. Kensley, C.S.M.M.G. (half-time). (1/9/31 to 1/10/31).
Miss H. E. Garratt, C.S.M.M.G. (half-time). (From 5/10/31).

Clerical Staff.

H. J. Smith (Chief). G. W. West. F. J. Aylward. R. A. C. Green. L. Rushton.

2. CO-ORDINATION.

Close co-ordination in the Health activities of the Borough results from the fact that the same staff carries out duties for the various Committees.

The various Clinics and Services provided by your Committee have been made available, whenever necessary, for infants below school age.

The already close co-operation with the local branch of the Invalid Children's Aid Association has been still further strengthened during 1931 by the fact that the Secretary, Miss Lewis, attends every session of the Rheumatism Clinic.

Dr. Sorley, the District Tuberculosis Officer of the Essex County Council, has again been kind enough to send detailed reports on school children attending the Tuberculosis Dispensary.

The Attendance Officers under Mr. S. J. Longman, have again rendered every assistance, particularly in the control of school outbreaks of Variola Minor, in the examination of Defective Children, in the arrangements for Convalescent Home Treatment, and in the provision of milk and boots for necessitous cases.

The co-operation of the Almoners of the London Hospitals, especially those dealing primarily with children, shows a welcome increase. Particular care has been taken to give every possible assistance.

3. THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

School Hygiene.—The following table shows the number of schools in the Borough and the accommodation, etc.:—

NUMBER OF SCHOOLS AND ACCOMMODATION.

					Seating Accommodation.			
	Boys.	Girls.	Infts.	Mxd.	Boys.	Girls.	Infts.	Mxd.
Provided	18	18	15	6	6740	6342	5705	2460
Non-provided ..	1	2	2	3	244	472	437	929
Special Schools—								
Mentally Defective	—	—	—	1	—	—	—	130
Deaf	—	—	—	1	—	—	—	20
Blind and Myope Centre	—	—	—	1	—	—	—	65
Physically Defective Centre	—	—	—	1	—	—	—	80
Nursery School ..	—	—	—	1	—	—	—	150
Totals	19	20	17	14	6984	6814	6142	3834

	1931.	1930.	1929.	1928.	1927.
Number of Children on Register, Dec. 31st ..	19,467	19,432	19,592	19,749	20,197
Average Attendance ..	17,994.9	16,972.1	16,734.1	17,571.8	17,907.7
Percentage Attendance ..	88.3	87.5	85.7	87.8	87.8
Population	132,956	124,800	124,800	122,400	124,330
Percentage of School children to population	14.6	15.57	15.7	16.13	16.09

One Non-provided School (St. Mary's R.C.) was opened during the year. The accommodation is for 311 junior boys and girls.

A detailed sanitary survey is made by the Medical Inspector at the conclusion of the medical inspection of individual Departments. Any recommendations made are then forwarded to your Director of Education.

During the year, good progress was made with the conversion of trough closets to pedestal water closets and the replacement of automatic flushing by individual flushing. A total of 162 new pedestal water closets were substituted at the following Departments:—South Walthamstow Central Boys, 10; Girls', 14; Queen's Road Infants', 14; Coppermill Road Boys', 10; Girls', 12; Infants', 20; Pretoria Avenue Boys', 8; Forest Road Infants', 16; Wood Street Boys', 10; Girls', 16; Infants', 16; Higham Hill Junior Boys', 6; Infants, 10.

The Engineer and Surveyor has kindly furnished a complete list of the more important improvements, which is given as follows:—

Marsh Street Boys'.—Removal of dilapidated belfry. Complete interior renovation (main building). Five new W.C. suites installed in out-offices in place of defective ones. Additional fuel storage.

Higham Hill Schools.—Large amount of re-pointing to buildings and boundary walling.

Gamuel Road Schools.—Forming lobby to Infants' rear entrance. Recovering of asphalted flat roofs to make watertight. Complete interior renovation, all Departments. Reconstruction of defective gable of Boys' Department (finishing).

Maynard Road Schools.—Improved water supply (from main). Reconstruction of boiler room chimney stack.

Pretoria Avenue Schools.—Complete interior renovation. Recovering of asphalt flat roofs to make watertight.

Markhouse Road Schools.—Complete exterior renovation and various repairs, including Caretaker's House. Large amount of re-pointing to brickwork to both School Buildings and Caretaker's House to preserve brickwork and prevent entrance of damp. Recovering asphalt flat roofs.

Forest Road Schools.—Complete reconstruction of hall roofs and providing new lantern lights to Boys' and Girls' Departments. Extensive overhauling and repairs to Boys' Open-Air Classroom to keep out weather, etc. Levelling and cleaning floors, Boys' and Girls' Assembly Halls.

South Walthamstow Central Schools and Queen's Road Infants'.—Complete exterior renovation and repairs to roofs. New entrance porticos (to replace old ones). Improved heating to Handicraft Department. Improvement of heating in Cookery Department. Renewing defective roof ventilators.

Blackhorse Road Schools.—Recovering asphalt flat roofs. Complete exterior renovation.

Wood Street Schools (*Myope School*).—Complete exterior renovation.

William Morris Schools.—Forming Staff Room in Deaf School. improvement of heating apparatus.

St. Patrick's R.C. School.—Forming two lobby enclosures.

Selwyn Avenue Schools.—Recovering asphalt flat roofs. Complete interior renovation of Junior Mixed and Infants' Schools. Construction of new Open-Air Classrooms for Boys' and Girls' Departments.

Joseph Barrett Schools.—Considerable repair to tar-paving. Improved drainage from P.D. Centre Canteen waste gulley.

Mission Grove School.—Recovering of asphalt flat roofs to make watertight.

Winns Avenue Schools.—Recovering asphalt flat roofs. Complete exterior renovation. Improvement of heating apparatus to Girls' Department.

William Elliott Whittingham.—Erection of new Art and Handicraft Building. Recovering asphalt flats of existing buildings.

Nursery School.—Tarpaving. Improved warming. Repairs to framework of building.

St. Mary's Infants' School.—Complete interior renovation. Erection of a new glazed screen to form large rooms into two rooms.

St. Saviour's Boys.—Complete interior renovation. Improved lighting.

St. George's Mixed.—Complete interior renovation.

North Walthamstow Sports Grounds (Billet Road).— Redecoration work to stand and interior of buildings and lavatories generally.

Roger Ascham Infants' School.—A new school on Billet Road site to accommodate 400 is in course of erection.

Generally.—Considerable overhauling and repairs, etc., to electric lighting of schools. Considerable overhauling and repairs, etc., to gas services of schools. Many minor items of repair and improvement have been dealt with by usual School Repair Orders. Lime-whiting to playsheds and lime-whiting and cleansing of out-offices of all schools.

SCHEDULE OF TROUGH CLOSETS CONVERSIONS CARRIED OUT.

District.	School.	Dept.	No. of Trough Ranges Removed.	No. of W. C. Suites Substituted.
			Sections.	
No. 1 ..	S. Walthamstow Central	Girls'	2 of 7 ..	14
	,, ,,	Boys'	2 of 5 ..	10
	Queen's Road ..	Infts.'	2 of 7 ..	14
No. 2 ..	Coppermill Road	Girls'	2 of 6 ..	12
	,, ,,	Boys'	1 of 10 ..	10
	,, ,,	Infts.'	2 of 10 ..	20
	Pretoria Avenue	Boys'	1 of 8 ..	8
	Forest Road ..	Infts.'	2 of 8 ..	16
No. 3 ..	Wood Street ..	Girls'	2 of 8 ..	16
	,, ..	Boys'	2 of 5 ..	10
	,, ..	Infts.'	2 of 6 } ..	16
			1 of 4 } ..	
No. 4 ..	Higham Hill ..	Boys'	1 of 6 ..	6
	,, ..	Infts.'	2 of 5 ..	10
		Total	.. ..	162

4. MEDICAL INSPECTION.

No change has been made in the method of selection of children for inspection from that adopted in previous years. The age groups of the children inspected have been those defined under the Board of Education's three code groups.

There has been no departure from the Board's Schedule of Medical Inspection.

The following table gives a summary of the returns of Medical Inspection for the last two years:—

	1931.	1930.
Entrants	2,663	2,547
Intermediates	1,456	1,905
Leavers	1,460	1,631
Total Routine Inspections ..	5,579	6,083
Other Routine Inspections ..	686	345
Special Inspections	4,092	4,078
Re-inspections	21,240	12,499
Total	25,332	16,577

Routine inspections were 163 less than in 1930, but this decrease was completely offset by an increase of 8,755 in the number of re-inspections.

5. REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

The following Tables show the average heights and weights by age groups, sexes, and are compared with the anthropometric standard. A further comparison is made between (A) Schools serving newer areas; and (B) Schools serving overcrowded areas:—

A.

Boys. Age.	Average Height (inches).	Average Weight (pounds).	Anthropometric Standard Height.	Anthropometric Standard Weight.
5—6 ..	41.5	36.0	40.44	37.74
8—9 ..	47.7	55.0	46.94	49.95
12—13 ..	55.5	75.5	55.48	73.86

B.

5—6 ..	43.1	42.7	40.44	37.74
8—9 ..	45.7	51.2	46.94	49.95
12—13 ..	55.8	74.9	55.48	73.86

Girls.					
			A.		
5—6	..	42.4	42.6	40.68	36.68
8—9	..	48.6	52.0	47.39	52.05
12—13	..	56.0	75.0	54.88	72.66
			B.		
5—6	..	39.0	39.2	40.68	36.68
8—9	..	49.2	55.0	47.39	52.05
12—13	..	56.5	78.6	54.88	72.66

CLOTHING AND FOOTGEAR.

The Table below gives a similar comparison of the above in schools in different areas and by age and sex groups:—

Entrants.

	Clothing Unsatisfactory. %	Footgear Unsatisfactory. %
A—Boys	Nil	Nil
B—Boys	15	26
A—Girls	2	2
B—Girls	6	9

Intermediate.

A—Boys	Nil	Nil
B—Boys	12	9
A—Girls	Nil	Nil
B—Girls	2	6

Leavers.

A—Boys	8	6
B—Boys	2	7
A—Girls	18	26
B—Girls	3	9

Large increases are noted in the percentages of unsatisfactory clothing and footgear in boy entrants from the B schools and in the girl leavers from the A schools.

Uncleanliness.—The previous year's average of 10 visits per school was maintained during 1931 by the School Nurses, who made a total of 117,253 examinations and who found 1,051

individual children to be unclean. No children were cleansed under arrangements by your Committee, nor were any legal proceedings taken.

The following Table gives comparative figures for the past two years:—

	1931.	1930.
Average number of visits per school ..	10	10
Total number of examinations ..	117,253	105,029
Number of individual children found unclean	1,051	1,288
Percentage uncleanliness	0.89	1.13

The percentage uncleanliness is the lowest attained since 1926.

Minor Ailments.—The total number of defects found at both medical inspection and re-inspections to be requiring treatment is given below, and is compared with similar findings during 1930:—

	1931.	1930.
Ringworm—Head	30	33
Body	41	56
Scabies	32	30
Impetigo	589	553
Other Skin Disease	250	249
Minor Eye Defects	225	249
Minor Ear Defects	189	217
Miscellaneous	1,008	695
Totals	2,364	2,082

Tonsils and Adenoids.—The following comparison is given of the findings in 1931 and 1930:—

	1931.		1930.	
	Treatment.	Observation.	Treatment.	Observation.
Enlarged Tonsils	318	216	95	170
Adenoids	14	3	4	4
Enlarged Tonsils and Adenoids ..	62	12	335	91
Totals	394	231	434	265

Although there are wide fluctuations between the yearly sub-headings, the totals do not vary so widely.

Tuberculosis.—No definite case of Pulmonary Tuberculosis was found and only 3 suspected cases, of which 1 required treatment. These numbers do not represent the total Tuberculosis incidence amongst school children, in view of the fact that children are usually referred to the Tuberculosis Officer for his final diagnosis.

Skin Disease.—A total of 955 cases of Skin Disease was found, against 910 in 1930.

External Eye Diseases.—Findings under this heading have been discussed under "Minor Ailments."

Vision.—454 defects of Vision required treatment, and 25 required observation. The 1930 figures were 553 and 11 respectively.

In addition, there were 51 cases of squint found to require treatment and 4 requiring observation, against 54 and 4 in 1930.

Ear Disease and Hearing.—The following figures compare the findings of 1931 and the previous year:—

	1931.	1930.
Defective Hearing	24	61
Otitis Media	175	143
Other Ear Disease	45	80

Dental Defects.—1,126 dental defects were found to require treatment in 6,265 children inspected by the Medical Officers during routine inspections. The more complete dental inspections carried out by the Dental Surgeons showed 13,874 children requiring treatment out of 24,547 examined, or over 56 per cent., as compared with 55 per cent. during 1930.

Crippling Defects.—One case of rickets, 2 of spinal curvature and 16 other deformities required treatment.

Heart and Circulation Defects.—The figures were:—

	Requiring Treatment.	Observation.	Requiring Treatment.	Observation.
Heart Disease—Organic	27	47	51	5
Functional	29	25	91	48
Anaemia	41	5	50	5
Totals	97	77	192	58

The total of organic defects found was 74 against 56 in 1930; while the functional defects decreased from 139 in 1930 to 54 in 1931.

Defects of the Lungs.—206 cases of Bronchitis required treatment, as compared with 130 in 1930.

6. INFECTIOUS DISEASE.

The control of infectious disease in the Borough is effected on the lines detailed in the Board of Education's "Memorandum on Closure of and Exclusion from School," 1927. Notifiable Infectious Disease is chiefly brought to notice by notifications received from local Doctors under the Infectious Disease Notification Act. The following Table details the monthly notifications received under this Act in respect of children of the age group 5-15 years, *i.e.*, roughly, children of school age.

	Scarlet Fever.	Diph-theria.	Small-pox.	Chicken-pox.
January	21	25	4	30
February	25	21	11	48
March	18	13	1	25
April	22	13	1	51
May	27	12	—	53
June	29	14	—	183
July	25	28	—	112
August	17	11	—	66
September	27	19	—	35
October	15	17	4	107
November	22	9	2	128
December	23	21	1	74
Totals ..	269	203	24	912

In addition, the following notifications were received in respect of children in this age group:—Pneumonia, 37; Enteric Fever, 14; Erysipelas, 4; and Cerebro-Spinal Meningitis, 1.

The cases discovered by the Medical Staff and included in the above Table, were as follows:—

	Scarlet Fever.	Diph-theria.	Small-pox.	Chicken-pox.
1931 ..	16	62	28	342
1930 ..	19	70	30	21

Non-notifiable infectious disease is chiefly brought to light by the weekly returns made by Head Teachers under the local "Regulations as to Infectious Diseases in Schools." The monthly figures were as follows:—

	Sore Throat.	Measles.	Whooping Cough.	Mumps.	Chicken Pox.	Ring-worm and Scabies.	Impetigo, Sores, etc.
January ..	6	1	111	3	38	3	6
February ..	2	5	60	10	28	1	4
March ..	4	12	88	14	24	2	14
April ..	4	2	64	3	26	—	10
May ..	1	1	51	3	11	1	15
June ..	7	3	74	5	188	1	10
July ..	4	—	12	15	49	1	5
August ..	3	2	—	3	1	—	1
September	19	2	8	18	24	—	19
October ..	8	5	17	74	107	2	14
November	9	3	21	47	128	1	6
December	3	1	14	84	42	1	6
Totals 1931	70	37	520	279	676	13	110
,, 1930	75	1589	89	223	496	7	100

Comparing the above incidence with 1930, the most noticeable features are the decreases in the number of cases of Measles, Scarlet Fever and Diphtheria, and the increases in the number of cases of Whooping Cough, Mumps and Chicken Pox.

The regularity with which the few cases of Measles occurred each month illustrates how the infection persists even in non-epidemic years.

The highest incidence of Whooping Cough was in January, of Mumps in December, of Chicken Pox and Scarlet Fever in June, and of Diphtheria in July.

The summary of Head Teachers' weekly returns in Schools is given in a separate Table, from which the following features will be noticed:—

(*a*) The comparative or complete absence of Whooping Cough in the following Infants' Departments:—Blackhorse Road, Higham Hill Temporary, Mission Grove and St. Saviour's.

(*b*) The severity of Mumps at all Departments of Maynard Road School.

(*c*) The very high incidence of Chicken Pox at Higham Hill Infants' Department, and the low one at the corresponding Temporary Infants' Department serving the same area.

School.	Dept.	S.T.	M.	W.C.	Mumps	C.P.	R.W. Scab.	Sores, etc.	Sore Eyes.	S.F.	Diph.	Bact. Diph.
	Boys' ..	—	—	—	—	3	—	—	—	6	—	—
Blackhorse Road	Girls' ..	1	—	—	1	6	—	—	—	6	10	—
..	Infts.' ..	—	—	1	23	14	—	—	—	—	4	—
William Elliot Whitt. ..	Boys' ..	—	—	—	—	1	—	—	—	2	—	—
	Girls' ..	18	—	1	3	14	—	7	—	9	3	—
Higham Hill	Boys' ..	—	—	—	—	4	—	—	—	8	4	1
	Infts.' ..	1	1	38	12	108	2	3	—	11	1	—
	Tem. Infts.'	—	—	1	—	4	—	1	—	—	2	1
	Boys' ..	—	—	—	—	—	—	—	—	5	8	—
Pretoria Avenue	Girls' ..	1	—	3	—	2	—	—	—	2	2	—
	Infts.' ..	5	1	43	1	52	1	5	—	9	6	—
North Central	Boys' ..	—	—	—	—	—	—	—	—	1	1	—
	Girls' ..	—	—	—	—	—	—	—	—	6	2	—
	Boys' ..	—	—	—	—	—	—	—	—	—	1	—
Coppermill Lane	Girls' ..	—	—	—	—	—	—	1	—	—	2	—
	Infts.' ..	2	4	31	8	61	—	3	—	5	3	—
	Juniors ..	—	—	—	—	12	—	—	—	4	8	—
	Boys' ..	—	—	—	—	1	—	—	—	1	3	—
Wood Street	Girls' ..	—	—	—	—	—	—	—	—	3	6	—
	Infts.' ..	1	1	35	9	6	1	35	—	3	5	—
	Boys' ..	—	—	—	2	—	—	—	—	2	—	—
Joseph Barrett	Girls' ..	—	—	—	—	—	—	—	—	—	—	—
P.D. Centre		—	—	—	—	—	—	—	—	1	4	—
	Boys' ..	—	1	—	38	3	—	4	—	1	2	—
Maynard Road	Girls' ..	1	—	2	16	13	—	—	—	2	3	—
	Infts.' ..	36	7	47	108	79	6	32	—	5	4	—
St. Mary's	Girls' ..	2	—	—	14	—	—	—	—	4	1	1
	Infts.' ..	2	15	42	14	2	1	2	—	3	4	—
St. George's	R.C. ..	—	—	9	—	—	—	—	—	1	—	—
Shernhall Street		—	—	—	—	—	—	—	—	—	—	—
	Boys' ..	—	—	—	—	—	—	—	—	1	3	1
William Morris	Girls' ..	—	—	—	—	2	—	—	—	—	2	—
	Juniors ..	—	—	—	—	—	—	—	—	2	1	—
Marsh Street	Boys' ..	—	—	—	—	—	—	—	—	1	1	—

Mission Grove	Girls' ..	—	—	—	—	—	—	—	—	1	—	—
	Infts.' ..	—	—	—	13	1	—	—	—	7	5	—
Deaf Centre		—	—	—	—	—	—	—	—	—	—	—
Edinburgh Road	Girls' ..	—	—	—	2	—	—	—	—	2	—	1
	Boys' ..	—	—	—	—	1	—	—	—	2	1	—
Markhouse Road	Infts.' ..	—	—	—	—	—	—	—	—	6	3	1
	Juniors ..	—	—	—	—	—	—	—	—	3	4	—
St. Patrick's	Junior ..	—	—	11	—	1	—	5	—	—	2	—
	Boys' ..	—	—	—	—	—	—	—	—	2	—	—
St. Saviour's	Girls' ..	—	—	—	—	—	—	—	—	4	1	—
	Infts.' ..	—	1	3	—	58	2	5	—	10	3	—
	Boys' ..	—	—	—	—	—	—	—	—	3	3	—
Forest Road	Girls' ..	—	—	—	—	—	—	—	—	—	2	—
	Infts.' ..	—	—	17	—	3	—	1	—	8	14	—
	Boys' ..	—	—	—	—	2	—	—	—	3	—	—
Winn's Avenue	Girls' ..	—	—	—	—	—	—	—	—	2	1	—
	Infts.' ..	—	2	51	3	64	—	1	—	11	3	—
	Juniors ..	—	—	5	1	39	—	2	—	7	2	—
	Boys' ..	—	—	—	—	—	—	—	—	1	—	—
Chapel End	Girls' ..	—	—	—	—	—	—	—	—	3	3	—
	Infts.' ..	—	2	31	—	23	—	—	—	10	9	1
	Juniors ..	—	—	—	—	—	—	—	—	7	7	—
	Boys' ..	—	—	—	—	—	—	—	—	2	1	1
Selwyn Avenue	Girls' ..	—	—	—	—	1	—	—	—	1	8	—
	Infts.' ..	—	1	63	3	79	—	—	—	6	5	1
	Boys' ..	—	—	—	—	1	—	—	—	4	1	—
Gamuel Road	Girls' ..	—	—	—	—	3	—	2	—	8	1	—
	Infts.' ..	—	1	10	—	1	—	1	—	13	1	2
	Boys' ..	—	—	—	—	—	—	—	—	2	—	—
Queen's Road	Girls' ..	—	—	—	—	—	—	—	—	2	2	—
	Infts.' ..	—	—	39	2	4	—	—	—	13	3	—
Roger Ascham		—	—	—	—	—	—	—	—	1	3	—
St. Mary's R.C.		—	—	25	6	—	—	—	—	—	1	—
Myope Centre		—	—	—	—	—	—	—	—	1	—	—
Nursery School		—	—	12	—	8	—	—	—	4	1	—
Totals		70	37	520	279	676	13	110	—	253	186	11

The following were the weekly average numbers of children away from School owing to Exclusions and the Non-Notifiable Infectious and other diseases named:—

	Exclusions.	Chicken-pox.	Measles.	Whooping Cough.	Sore Throat.	Influenza.
1931 ..	125	97	3	109	29	78
1930 ..	222	73	189	17	39	50

	Diarrhoea.	Mumps.	Ringworm.	Scabies.	Various.	Totals.
1931 ..	2	21	6	3	684	1177
1930 ..	3	38	9	2	633	1275

A weekly Infectious Disease Clinic is held on Tuesdays at 2 p.m. at Lloyd Park, at which all home contacts of cases of Diphtheria and Scarlet Fever are seen, as well as all school children after discharge from the Isolation Hospital or from Home Nursing.

Exclusion from school is rigidly enforced until all fear from infection has disappeared.

A total of 713 swabs were taken at the School Clinic.

The incidence of the various Infectious Diseases amongst school children during the year is reviewed below:—

(*a*) **Smallpox.**—Of the 24 cases notified in the age group 5-15 years, 22 were of school age, 11 were notified by Private Practitioners, and 11 by the School Medical Officer. Every case was unvaccinated.

Three schools required the detailed supervision outlined in last year's Report for dealing with this disease:—

(1) *Winn's Avenue Girls' School.*—The first case discovered had attended school between 12th and 16th January while in an infectious condition and gave rise to six secondary cases, the last four of which appeared to have an incubation period of 16 days as compared with the usual one of 12 days. All the secondary cases were closely watched and, except one, were discovered and removed to Hospital either on the day of rash or the following day; whilst one patient was sent in during the prodromal illness and before the appearance of the rash.

(2) *Wood Street Boys' School.*—The first case had attended school between 16th and 21st January whilst infectious, and apparently gave rise to two further cases.

(3) *Mission Grove School.*—A child notified on the 7th November had attended this school between the 1st and 5th November while infectious, but no further cases arose.

In addition, 4 other school cases had attended 4 other schools on the day of onset of this disease, but in each case nothing further arose, suggesting that the disease is not infectious on the day of onset.

Vaccination.—During the close supervision of the 3 schools named above, detailed vaccination lists were prepared by the Head Teachers, who throughout co-operated in the closest possible manner. The following summary throws some interesting light on the vaccinal state of the school population:—

School.	No. on Books.	No. found to be Vaccinated.	Percentage Vaccinated.
Winn's Avenue Senior Girls' ..	249	67	26.9
Wood Street Boys'	411	109	26.5
Mission Grove Infants' ..	213	47	22.6

Taking these figures as an average, it appears that only some quarter of the school population is protected against Smallpox, a finding in close agreement with the experience of 1930.

(*b*) **Diphtheria.**—186 cases of clinical Diphtheria occurred amongst school children during 1931, and 11 cases of the non-clinical type. During 1930, the figures were 301 and 41 respectively.

The diminished incidence was gratifying, but at the same time was largely due to factors which cannot be controlled. On the other hand, the disease can be fought scientifically and lifelong protection can be afforded by immunisation, which should be made available to all parents who wish their children to be protected.

Two localised outbreaks, one of 11 cases at Blackhorse Road Girls' School in July and one of 8 cases at Coppermill Road Junior Mixed School in December, both of the nasal type, were controlled by repeated inspections and the swabbing of all suspects.

(*c*) **Scarlet Fever.**—The number of cases of Scarlet Fever amongst school children diminished from 359 in 1930 to 253 in 1931. There was no marked outbreak in any of the Elementary Schools, but 8 cases occurred at Brookfield Hospital Orthopaedic School, which are referred to elsewhere.

(*d*) **Chicken Pox.**—This disease continued to be notifiable during 1931 in view of the prevalence of minor Smallpox, and 912 cases were notified between the ages of 5-15 years. The maximum incidence occurred in June, when 183 cases were notified.

(*e*) **Measles.**—As forecast in last year's Report, the incidence of Measles during 1931 was very low and only amounted to 37 known cases amongst school children. During 1931, no deaths of school children occurred. At the time of writing, the expected biennial epidemic has commenced and every possible step is being taken to minimise this fatal and dangerous disease, which each year takes more toll than Scarlet Fever and Diphtheria combined.

(*f*) **Whooping Cough.**—Whooping Cough mainly attacked the Infants' Departments from the beginning of the year up to June. During 1931, 14 deaths of school children occurred.

(*g*) **Enteric Fever.**—The 14 cases of Enteric Fever were infected through the agency of a common milk supply, which, in turn, had become infected during production in the area of a neighbouring Authority.

(*h*) (1) Action under Article 45 (*b*) (*i.e.*, attendance below 60 per cent. of number on register)—

One Certificate was granted, as follows:—

School.	Month.	Disease.
Maynard Road Infants'	January	Whooping Cough.

(*h*) (2) Action under Article 53 (*b*) (exclusion of individual children):—

At Medical Inspection	10
At School Clinics	1,452

(*h*) (3) Action under Article 57 (school closure by the Sanitary Authority):—

Nil.

7. FOLLOWING UP.

The School Nurses made 3,598 visits to the homes of children as set out below:—

Tonsils and Adenoids ..	514	Dental Defects ..	1,300
Measles	31	Whooping Cough ..	520
Defects of Vision, etc.	473	Chicken Pox	30
Sore Throat	52	Mumps	235
Scabies	8	Impetigo	28
Otorrhoea	40	Ringworm	9
Various	65	Rheumatism	32
Uncleanliness	41	Nursery School Absentees	220

The total for the year compares with 863 during 1930, and an average of 1,108 for the past five years. The large increase is due to several factors, *e.g.*, the incidence of Non-Notifiable Infectious Diseases such as Whooping Cough, Measles and Mumps, the systematic visiting of failures to attend for Dental Treatment, similar visiting in connection with absentees from the Nursery School, and increased visiting for purely "following up" purposes.

The School Nurses attend at all medical inspections and staff the various Clinics, *e.g.*, Aural, Minor Ailment, Ophthalmic, Rheumatism, Ringworm and Tonsillectomy Clinics, and also carry out extensive cleanliness surveys, as already detailed.

Several "following up" visits were paid at the request of the Almoners of various Metropolitan General Hospitals, and written reports were given of the findings.

8. MEDICAL TREATMENT.

The numbers of each code group requiring treatment is given in Table II (*b*) at the end of the Report. The percentages of children found to require treatment were as follows:—

Code Groups.	1931.	1930.
Entrants	10.4	7.8
Intermediate	12.3	14.2
Leavers	15.6	14.4
Total (Code Groups) ..	12.2	11.6
Other Routine Inspections ..	12.1	13.6

Minor Ailments.—The treatment of minor ailments is carried out at the seven sessions of the School Clinics which are detailed earlier in the Report, all of which are in charge of a Medical Officer.

Table IV, Group 1 (Board of Education), at the end of the Report, shows the number of defects treated during the year.

The actual work done at the School Clinics is shown on the Table given below:—

	First Attendances.				Re-inspections.	
	Number Excluded from School.		Number to Return to School.			
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Ringworm	33	11	5	11	269	142
Scabies	10	18	1	1	175	179
Rheumatism	13	15	51	61	46	54
Impetigo, Sores, etc. ..	210	158	170	105	1855	1465
Skin	35	40	64	72	290	374
Verminous Head, etc. ..	2	9	—	9	10	25
Sore Throat	127	199	18	20	202	322
Discharging Ears and Deafness	12	1	152	149	447	336
Defective Vision	—	—	211	235	10	16
External Eye Diseases ..	38	29	74	74	281	250
Tonsils and Adenoids ..	1	2	82	82	95	98
Mumps	14	15	—	2	6	16
Various	246	221	473	526	1679	1931
Totals	741	718	1301	1347	5365	5208

First attendances numbered 4,107 against 3,717 in 1930, and re-attendances 10,573 against 9,237, the total attendances being 14,680 against 12,954.

Tonsils and Adenoids.—Your Authority's scheme of treatment of these defects consists of:—

(*a*) An agreement with the Walthamstow Dispensary under which cases are operated upon there as out-patients at a fee of £1 per case for Tonsils and Adenoids, 15s. for Adenoids only, and 10s. for Tonsils.

A fatality has recently been reported (February, 1932) at the Dispensary. The last fatality had been previously reported in 1916, since when 3,817 cases had been done under your Authority's scheme. This figure is given in order that the operative risk of tonsillectomy may not be forgotten.

This risk, amongst others, must always be carefully considered before advising the operation, and the tendency of present practice is unquestionably to advise tonsillectomy less frequently.

(*b*) An arrangement with the Connaught Hospital by which cases are admitted the day previous to the operation and are discharged when fit. The fees are £1 1s. for the operation and 8s. per day for maintenance.

Children are treated under this scheme when the home conditions are considered unsatisfactory. The average stay in Hospital was 5.5 days.

The following Table shows the number of cases treated during the last two years:—

Year.	At Dispensary.	At Connaught Hospital.	At Isolation Hospital.	Privately.	Total.
1931 ..	272	64	4	14	354
1930 ..	310	53	—	5	368

The cases done at the Isolation Hospital were virulent Diphtheria carriers.

In addition, 92 other children received diastolisation treatment at the School Clinics.

Tuberculosis.—Children suffering from actual and suspected Tuberculosis are referred to Dr. Sorley, Tuberculosis Officer to the Essex County Council, which Authority administers the Tuberculosis Scheme in the Borough. The numbers of school children examined during the year were 73 boys and 72 girls, of which 22 boys and 10 girls were referred by the School Medical Staff.

Of the total of 145 school children examined, 6 were notified as suffering from glandular tuberculosis and 6 as suffering from tuberculosis of the bones and joints. Dr. Sorley very kindly sent full weekly reports in respect of each child seen. Recommendations for treatment were carried out as far as possible, and included the following:—Dental, Tonsils and Adenoids and Convalescent Home treatment. Forty grants of free milk were also made.

At the end of the year, the live register of notified cases of school age was as follows:—

Pulmonary.			
At School.		At Sanatorium.	
Boys.	Girls.	Boys.	Girls.
3	12	1	1

Non-Pulmonary.							
At School.		At P.D. School.		At Sanatorium.		Not at School.	
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
27	27	4	—	6	3	—	1

Skin Disease.—The number of cases of skin disease treated is shown in the Table detailing the work done at the School Clinics. In addition, 14 cases of Ringworm of the scalp were referred to the London Hospital for X-Ray treatment, at a cost of £2 12s. 6d. per case.

External Eye Disease.—Treatment for these cases is given at the School Clinics. (See Table IV, Group 1, at the end of the Report.)

Vision.—The medical treatment facilities provided by your Authority for defects of vision, etc., consist of (1) a Blind School staffed on the medical side by your part-time Consulting Ophthalmic Surgeon, Mr. H. J. Taggart, F.R.C.S.; and (2) 3 weekly Refraction Clinics under the care of Dr. Sheppard, who refers special or difficult cases to Mr. Taggart's Consultant Clinics, and which she attends, so maintaining a close liaison. Mr. Taggart's report will be found under Section 17 of the Report.

All defects of vision are referred to the Eye Clinics by other Medical Officers and are, if necessary, followed up for the remainder of the child's school life. Dr. Sheppard has kindly contributed the following account of the work done during 1931:—

"The work of the Eye Clinic has been carried out on 3 half-days weekly; the total number of children seen being 770, making 2,436 attendances. 393 new children attended, showing defects as specified below:—

Disease.	Under 7 years.		7—11 years.		Over 11 years.		Totals.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Hypermetropia ..	21	15	16	14	15	12	52	41
Hypermetropic Astigmatism ..	14	12	26	22	12	8	52	42
Myopic Astigmatism	7	4	13	3	2	6	22	13
Myopia	3	2	21	18	25	28	49	48
Mixed Astigmatism	2	1	8	9	4	2	14	12
Glasses not required	5	4	14	10	8	6	27	20
Odd Eyes ..	—	—	—	—	1	—	1	—
Totals ..	52	38	98	76	67	62	217	176

"In addition to the 393 new refractions, 185 old cases were also done, making a total of 476 refractions.

"The above Table has been drawn up according to the Reorganisation Grouping Scheme, and it is hoped that it may be possible to deduce some interesting information from it later.

"Ten children were recommended to attend the Myope Centre, which Mr. Taggart attends on the first Thursday of each month to inspect the children.

"There has been no change made in recent years as to the routine of the Clinic, which has been found to work admirably. Atropine drops are still used by the Nurse on the day of refraction instead of the ointment being given to the mothers a few days previously. Homatropine and cocaine is instilled where the atropine would interfere with reading, as in the case of impending examinations, etc.

"The treatment for squint, as outlined in a previous Report, continues to be satisfactory and has not been departed from. Eight children were sent to the Western Ophthalmic Hospital for operation.

Squint.		Boys.	Girls.
Convergent	R	6	11
	L	12	13
Divergent	R	—	—
	L	—	1
Occasional	R	1	1
	L	—	2
Alternating ..	.. ..	8	8

"During the year structural alterations were carried out at Lloyd Park, which enabled a separate dark room to be provided for retinoscopy.

"Table IV (ii) (Board of Education) gives further particulars, and shows that only 7 children failed to obtain or to receive glasses out of a total of 637 prescribed."

Ear Disease and Hearing.—Minor defects under the above heading are treated at the Minor Ailment Clinics, the numbers treated being given in the Table relating to the work of these Clinics. Refractory or special cases are referred to the weekly Consultant Aural Clinic, held on Mondays from 2—4.30 p.m. by Dr. A. R. Friel, who has again been good enough to report on the valuable work done at this Clinic, as follows:—

Nature of Disease.	Total.	Cured	Lost Sight Of.	Still under Treatment.	Hospital Treatment.
Acute Suppurative Otitis Media ..	50	35	5	8	2
Chronic Suppurative Otitis Media due to—					
(*a*) Tympanic Sepsis	32	22	5	5	—
(*b*) Tympanic Sepsis and Granulations	7	5	—	2	—
(*c*) Tympanic Sepsis and Polypi..	3	3	—	—	—
Tympanic conditions:—					
(*a*) Rhinitis	2	—	2	—	—
(*b*) Tonsils (enlarged or inflamed)	1	1	—	—	—
(*c*) External Otitis	1	1	—	—	—
Attic Disease	11	3	1	3	4
Mastoid Disease	15	2	—	6	7
External Otitis Media	21	18	1	2	—
Not diagnosed	1	—	1	—	—
Totals	144	90	15	26	13

"In the above Table there are:—

"(1) An analysis of the conditions causing the trouble in the ear and giving rise to discharge; and

"(2) A summary of the results of treatment.

"The results are given under four headings:—(1) Cured; (2) Lost Sight of; (3) Still Under Treatment; and (4) Those needing an Operation in Hospital.

"Under the heading "Lost Sight of," are given the conditions found in patients who have either moved out of the district, who are unwilling to come to the Clinic, or who have gone elsewhere for treatment. In some cases, the parents are not able to bring the children as they have to go to work.

"Under the heading 'Still Under Treatment,' are the cases which at the end of December, 1931, were still in attendance at the Clinic and whose treatment continues into 1932. It is not possible to avoid this overlap in the statistics.

"Under the heading 'Hospital Cases,' are the conditions found in patients who have already gone to hospital, or should go, as they need an operation on the mastoid. In many cases, a mastoid

operation is a serious economic drawback to a patient. Usually, in the chronic cases, the hearing becomes very defective after operation; whilst if the discharge is not cured, disability is still greater. It is the practice in this Clinic not to send a patient for operation unless the disease is acute, or unless it is reasonably certain that the child will be much better after the operation than he was before. Not merely is the condition in the ear taken into account, but the financial condition of the family is also considered. It is not to be expected that a mother whose husband is out of work at intervals and who has several young children, can bring a patient regularly to hospital to have the ear dressed for some months after the operation has been performed. As long as there are no acute symptoms such a child is, therefore, allowed to remain as he is. It is an easy thing to have a mastoid operation performed, but it is a difficult thing to ensure a dry ear and moderate hearing. These conditions which need a mastoid operation often attend the Clinic for years, and they reappear in the Tables in successive years.

"Every ear in which discharge comes from the mastoid does need operation. Those cases in which the discharge is mucoid usually recover with treatment at the Clinic, but those in which the discharge is purulent very seldom do so.

"Children are frequently brought to the Clinic suffering from deafness. Sometimes the deafness is slight, but more usually it is of moderate or even of considerable degree. When it is slight and recent, a great deal can be done and the patient can often leave school without any handicapping deafness.

"When the deafness is of greater degree, complete recovery is rare. In these cases, the deafness has usually lasted a considerable time. It may be asked, why did they not come for treatment when the deafness was recent and slight? The answer is that they were not detected. It is only quite recently that in this country it has been possible to measure accurately the hearing of children. An American instrument called the Audiometer has been introduced into this country by Dr. Crowden, of the London School of Hygiene and Tropical Medicine. This instrument is really a gramophone in which the horn is replaced by a large number of earphones. Twenty-four or more children can be readily tested at one time. A single earphone is given to each child, who puts it over one ear and writes on a piece of paper what he hears. The gramophone speaks a series of groups of numbers thus, 846, 327, 591 form a group. Each group is spoken at a different degree of loudness, and the groups which he cannot write down wholly or in part give a measure of his defect of hearing. Some thousands of children have been tested in schools in North London, and it has been found

that 6.5 per cent. show some defect of hearing. A school can often be examined in a day; but if it is large and there are many young children, two or three days may be required by a clerk and a nurse working together. The children who show a defect are sent to the Ear Clinic for the cause to be discovered and the condition, if possible, treated. From the experience which has been gained, it appears that we should concentrate on the young children. In them, the deafness is recent, and scar tissue has not had time to form in the ear. The older children often show conditions similar to those found in adults, and treatment is not efficacious to the same degree as in the younger children.

"Dr. Crowden gave a demonstration in 1931 at the Walthamstow Deaf School of the method of testing with the Audiometer. It is an expensive instrument, but not excessively so. It does not seem to wear out or to need repair frequently; the only renewals, so far, having been the records, which cost 4s. 6d. each. In a few years, its use will have spread all over this country.

"Mr. Rushton has charge of the organising of the Clinic. Each patient for each visit has a written appointment stating the day and time at which he is expected to attend.

"Miss Brophy assists in the treatment during the Clinic hours, and also carries out treatment at Markhouse Road Clinic."

The success achieved by Dr. Friel in the Ionisation of cases of ear discharge has been dramatically illustrated on several occasions. Some cases following Scarlet Fever which had resisted all local treatment in the Isolation Hospital, have been cured by two or three Ionisation treatments.

Dental Defects.—The following Table shows a summary of Table IV (iii) (Board of Education) for the past 2 years:—

Year.	Inspections.	Requiring Treatment.	Per cent.	Actually Treated.	Fillings.	Extractions.	Gas Anaesthetics.	Other Operations.
1931 ..	24547	13874	56.5	7349	5653	11169	4863	669
1930 ..	19557	10817	55.3	6286	5622	10816	4186	676

The full tables are given at the end of the Report.

Mrs. Thorne, L.D.S., reports as follows:—

"During the past year, treatment has been given to children from the Elementary Schools between the ages of 5—14 years, the Central Schools and Special Schools up to 16 years, and the holders of Scholarships in the Technical and the Secondary Schools.

"The extension of the treatment scheme to scholarship children has been long in demand, and many of these scholars used to return requesting to continue under the Clinic not only for monetary reasons, but for preference.

"The Senior Schools are now under routine inspection; the younger children have been accustomed to periodic inspection, but the leavers have had no such opportunity, and previously received treatment only when they applied or were advised to do so by the School Doctors. The numbers of acceptances for treatment vary so greatly that it is not easy to assign any one reason for the many refusals. One Senior School showed almost the largest number of acceptances, while another in the same district gave the very lowest. With one or two exceptions, there has been a very fair return at this first inspection of Senior Schools, and it has fully justified the expansion; also, it enables a certain amount of valuable following up to be carried on.

"In September, the Dental Board sent a representative, who gave very useful and instructive addresses on oral hygiene to the Senior Schools. This could not but be of value in encouraging the children to accept advice and treatment on their own behalf. The child appreciates being personally instructed in the care of his teeth, and can be better relied upon to carry out instructions than the parent.

"Subsequent to this address, the following Higher Elementary and Senior Schools have been inspected:—North and South Central Boys', Marsh Street Boys', Edinburgh Road Girls', Winn's Avenue Boys' and Girls', Blackhorse Road Girls', Mission Grove Girls', William Morris Boys' and Girls'. In these 10 schools the number of acceptances of treatment average 25 per cent. of the forms distributed.

"In 6 Junior Schools 35 per cent. accepted, while in 4 Infants' Schools 39 per cent. accepted treatment. These figures show a large proportion of refusals, and the acceptances from Senior Schools are not as favourable as those of the other schools which have been continually visited, and the figures speak for themselves, showing the urgent need for continually bringing before the minds of the elder scholars the value of a sound dentition, and also an important and not negligible point that it can be maintained with little pain or inconvenience.

"This still too large number of refusals is due to both ignorance and apathy. There is rarely reluctance on the part of the parents for radical treatment, but on the other hand, conservative work still meets with a certain amount of opposition in some quarters. Parents frequently consult the older child as to his wishes with regard to treatment. This may be partly the reason for the small numbers of acceptances amongst Senior Schools.

"The giving of appointments has been reorganised. There is now no ground for complaint by reason of waiting at either morning or afternoon session. So far, these special times for appointments have not been well kept. In time, the parents will accustom themselves to punctuality, which will aid the work of the staff, obviate the tedium of waiting, and limit the time the child spends at the Clinic.

"The failure of patients to keep appointments is one problem which besets every Clinic. The question arises of how to minimise these failures, and how best to fill the gaps without undue pressure on the staff and consequent lessened efficiency.

"The failures have been carefully followed up by the School Nurses with some good results.

Although there is no special department for the treatment of irregularities of teeth, a large number of these cases have been dealt with. They vary from irregularity of individual teeth, anterior crowding due to premature loss of milk teeth, lack of growth of jaws, etc. Many parents could not afford to attend one of the dental hospitals for hospitals for treatment.

"These have been remedied by judicious extractions, followed by instructions to parent and child. All the cases which have returned for re-examination have proved that this treatment is of great value not only from an aesthetic point, but from a practical one, rendering the articulation more nearly normal and the mouth self-cleansing. Some few who were willing and able have been referred to the dental hospitals for treatment.

"To the teachers we owe our grateful thanks for their co-operation and courtesy at all times.

"The incidence of decay does not lessen, and there is still a very high figure for extractions. This latter is due to non-acceptance of treatment at routine inspection, with the result that when treatment is sought it is always urgent and radical. This is a matter which will have to be solved before the condition of treatment changes from one of extraction to one of preservation of the complete dentition for adult life."

Crippling Defects and Orthopaedics.—Medical treatment of these defects is given under an orthopaedic scheme in charge of the Consultant Orthopaedic Surgeon, Mr. Whitchurch Howell, F.R.C.S., who holds a monthly Clinic at the Physically Defective School. Mr. Howell also acts as Honorary Surgeon to the Brookfield Orthopaedic Hospital, a voluntary Institution of 30 beds, recognised as a Hospital School by both the Ministry of Health and the Board of Education.

Two Masseuses divide their whole time between the Hospital and the Orthopaedic and Massage Clinic at the Physically Defective School. Your Authority's cases have priority of admission to the Hospital.

Details of the work done under the scheme are given in the Section dealing with Defective Children (Section 17).

Rheumatism Clinic.—A scheme to provide a Rheumatism Clinic was approved at the beginning of the year, and after visits had been paid to similar Clinics in London it was decided to invite Dr. Wilfrid Sheldon, Physician to the Hospital for Sick Children, Great Ormond Street, to take charge.

There is no question that the Clinic has fully justified its establishment, and its usefulness in dealing with patients showing Rheumatic symptoms after Infectious Diseases has been particularly appreciated.

Two beds were reserved at Hawkesbury and 1 at Edgar Lee Convalescent Homes for 1 year, chiefly for cases recommended from the Clinic.

The following report by Dr. Sheldon gives a full account of the organisation and objects of the Clinic:—

"The new Rheumatism Clinic, which began work just before the end of the summer term 1931, is now six months old, and in the following report the nature and scope of the work which has been undertaken is presented:—

"*Personnel.*—The Clinic meets each Thursday afternoon at 2 p.m., and there have been up to now 22 sessions. In addition to myself, there are 3 Assistants on whom the success of the Clinic largely depends. The organisation of appointments for new and old patients is carried out by Mr. Rushton. From 15 to 20 patients are seen each session, and appointments are issued at half-hourly intervals during the afternoon so as to minimise the amount of

waiting on the part of the patients. Mr. Rushton also acts as liaison between the Clinic and the other Clinics at Lloyd Park and outside public services. A Nurse (Mrs. Morris) is also in attendance to supervise the order of the children, their undressing and dressing, the weighing of all cases, and the dispensing of the stock medicines which may be advised. By her home visits, she is able to help materially in assuring the regular attendance of the children. Miss Lewis, of the I.C.A.A., also attends each session, so that references for convalescence, transfers to the London General Hospitals, matters of home visiting and reports on housing conditions can be dealt with directly. I should like to take this opportunity of thanking each of these for their splendid assistance in contributing to the efficient working of the Clinic.

"*Numbers*.—The number of new cases so far dealt with has reached 203. Of these, 110 have made 2 or more attendances since their first appointment. There has been no difficulty in securing second or later attendances, which may be taken to indicate that the Clinic is being appreciated and used by the patients.

"In 69 cases, the evidence of Rheumatism has been judged to be negative, and these children have been referred back to the School Medical Service, further attendance at the Clinic not being considered necessary. At the end of 1931 there were 134 children being kept under further supervision, and of these no less than 82 have their heart affected by rheumatism.

"*Objects*.—The purposes of the Clinic may be divided into three headings:—

"(1) Supervision of the health of those children who are already the subjects of rheumatism. This is the largest function of the Clinic. Apart from the rheumatic condition, the health of the children has been found, on the whole, to be of good standard. This is largely attributable to the work of the other special Clinics, such as the Dental, Aural, Tonsil, etc., into whose hands many of the children have passed before being referred to the Rheumatism Clinic.

"*Teeth*.—Twenty-eight children have needed dental treatment, and have been referred to the appropriate Clinic, where the requisite treatment has been given.

"*Tonsils*.—In 17 children the state of the tonsils has been sufficiently bad as to be injurious to the general health, and removal of these structures has been recommended and carried out in Hospital, where the cases can be admitted for one or two nights.

"Advice is also given on such matters as clothing, diet, bedding, exercises, etc. The weight of each child is recorded at each attendance, as this affords a valuable means of checking the child's progress. It is found that the Rheumatic process may safely be regarded as quiescent so long as the weight continues to show a normal rise.

"(2) To act as a Consultative Centre to which the School Medical Service and Local Practitioners can refer children whom they suspect of being rheumatic. In some of these an opinion can be given at the first attendance; others it is necessary to observe at the Clinic over 2 or 3 months before forming an opinion. Of the 203 children so far examined, 134 have been considered truly rheumatic. Of the remainder, some have had cardiac abnormalities other than rheumatic, some have required advice *re* diet, etc., others suffering from various degrees of debility have been referred for convalescent or other appropriate treatment. Thirty-five children in all have been referred for convalescence. In only 2 cases have the parents refused to allow this, and the I.C.A.A. and Miss Lewis are to be congratulated on having placed already 25 children at suitable Convalescent Homes. In 12 cases, the heart condition has been such that Hospital treatment has been judged necessary.

"(3) To co-operate with the Attendance Officer in estimating to what extent the children are able to attend school, whether half-time schooling is necessary as a temporary arrangement, or whether the child needs the particular advantages of a Physically Defective School. It is a pleasure to report that the most cordial co-operation has taken place in this direction. Of the 203 children, 20 have needed complete exclusion from school for variable periods. In 2 cases, satisfactory arrangements have been made for half-time attendance, and 4 children have been transferred to the Physically Defective School.

"*Prevention*.—There is no doubt that in so serious a malady as is the rheumatism of childhood, prevention of the disease is to be aimed at as far as possible. This has been attempted with definite results in the children who have recently had either Scarlet Fever or Diphtheria, two infectious diseases which are prone to be followed by rheumatism. At the time of their discharge from the Isolation Hospital, the children are referred to the "Infectious Disease Clinic," and those who are suspected in any way of harbouring early rheumatic symptoms are sent to the Rheumatic Clinic. The following figures give some indication of the value of this arrangement:—

"Out of 198 children discharged after Scarlet Fever, 30 were singled out for transfer to the Rheumatism Clinic, and of these 11 were found to exhibit evidence of early rheumatic heart disease.

Out of 200 children discharged after Diphtheria, 10 were picked out for transfer to the Rheumatism Clinic; and of these, 5 were found to exhibit evidence of early rheumatic heart disease.

"By getting these children at the commencement of their heart trouble and at once instituting appropriate treatment, it is not too much to hope that much of the later cardiac crippling may be prevented, and in some cases actual recovery be achieved.

"Although this line of approach to the subject has only recently been commenced, its value is evident, and during the ensuing year it is hoped to expand this aspect of the work."

9. OPEN-AIR EDUCATION.

(*a*) **Playground Classes.**—Favourable weather conditions for playground classes, physical exercises and organised games are utilised to the utmost. During the year, the North Walthamstow Sports Ground (4½ acres) was purchased for school sports.

(*b*) **School Journeys.**—The following school journeys were made during the year:—

School.	Number.	Place.	Date.
Blind and Myope ..	35—40	Dawlish ..	10th-24th June.
South Walthamstow Central Girls'	20	Rouen ..	Whitsun.
North Walthamstow Central Girls'	27	Braubach .. / Lorenz ..	4th-11th April.
Shernhall Special ..	30	Ryde ..	8th-22nd May.

(*c*) **School Camps.**—The following particulars are taken from the report made to your Authority by your Director of Education:—

"SCHOOL CAMPS, 1931.

"BOYS .. St. Helens, Isle of Wight.
"GIRLS .. Sandown, Isle of Wight.

"The Camps were held during the months of June, July and September, and amply fulfilled the purposes laid down by the Committee in March, 1930, viz.:—

(i) To supply the benefits of a country holiday, particularly for those children whose home circumstances render such a change desirable and who would be capable of deriving the physical benefits of such a change.

(ii) To inculcate good habits of conduct and of personal and domestic hygiene.

(iii) To take advantage of all local resources which would contribute to the education of the children.

"*Selection of Children*.—Children were selected on grounds of poverty and under-nourishment rather than for physical reasons alone. The selection has hitherto been made by the Head Teachers. who have carefully considered all the circumstances. There have been very few criticisms of the method of selection by parents, but it is proposed, in the light of the experience gained, to submit a formal questionnaire to parents, in future, as to means, opportunity for holiday, and health and habits of the child.

"*Boys' Camp*.—The standing Camp at Guildford Park, St. Helens, was again rented for a period of six weeks, at a charge of 15s. per week per child, and £1 5s. for adults. It has a delightful situation on high and well-drained ground near to the sea, and within easy reach of places of great interest historically. The following summary gives particulars as to dates, numbers, etc. :—

BOYS' CAMP.

Date, 1931.	School.	No.
9th June to 19th June ..	Markhouse Road	24
	Coppermill Road	24
	St. Saviour's	4
	North Walthamstow Central ..	6
	St. Patrick's	3
19th June to 3rd July ..	Marsh Street	20
	William Morris	18
	Winns Avenue	18
	Selwyn Avenue	4
3rd July to 17th July ..	Joseph Barrett	19
	Chapel End	18
	Wm. Elliott Whittingham ..	19
	St. George's	3
	Marsh Street	1
	North Walthamstow Central ..	1
	St. Patrick's	1

"*Girls' Camp*.—The girls proceeded in groups of 48, under 4 teachers, to Sandown (The Firs). This is a hostel built on the lines of the L.C.C. Homes, and contains a large dining-room, 2 dormitories with separate beds, and with teachers' room adjoining. Altogether, 192 girls and 16 teachers spent a fortnight at this hostel, where the arrangements, food, etc., were excellent. The charge was £1 per child per week during June and July, and 18s. 6d. per week in September, together with £1 5s. per week for each teacher.

"The table below gives particulars as to numbers, etc.:—

GIRLS' CAMP.

Date, 1931.	School.	No.
19th June to 3rd July ..	Coppermill Road	22
	South Walthamstow Central	9
	William Morris	17
3rd July to 17th July ..	Joseph Barrett	22
	Chapel End	16
	St. Mary's	5
	St. Saviour's	5
4th September to 18th September	Blackhorse Road	16
	North Walthamstow Central	10
	Mission Grove	22
18th September to 2nd October	Edinburgh Road	22
	Winns Avenue	15
	Selwyn Avenue	5
	St. George's	3
	St. Patrick's	3

"*Educational Arrangements.*—Boxes of books were sent to the Camps from the Schools' Library. Games apparatus (cricket, netball, etc.) were provided, and arrangements made at each Camp for:—(*a*) A Bank; (*b*) Library; (*c*) Post Office; (*d*) First-Aid and Medical Attention. The girls' teachers had prepared a booklet giving:—(i) Maps of the Area; (ii) Time-table; (iii) Instructions as to Work, Collection of Specimens, etc.; (iv) Programme and Points of Interest.

"Ordnance and large-scale maps of the Island were provided and arrangements made, by permission of the Home Office, for visits to Carisbrooke Castle and Osborne House. Another set "outing" was a visit to Alum Bay. Other visits to Shanklin, Ventnor, Brading, etc., were included in each programme, whilst the opportunity of visiting the Royal Dockyard at Portsmouth and being shown over the "Victory" and the "Iron Duke" was much appreciated, thanks to the courtesy and kindness of Lieutenant Bates, who personally conducted each party.

"The following time-table, which was, of course, modified to suit the circumstances, was adopted by the Boys' Leaders:—

7 a.m.	Reveillé. Wash and Run.
8.10 a.m.	Parade and Inspection.
8.30 a.m.	Breakfast.
9—9.30 a.m. ..	Tent work.
9.30 a.m.	Camp Inspection and Orders for the Day.
10—12 noon ..	Physical Activities (Drill, Games, Bathing).
12—12.30 p.m. ..	Boys Free in Camp.
12.30—1.30 p.m. ..	Dinner.
2—4.30 p.m. ..	Educational Visits, Rambles, Practical Lessons and Talks.
4.30—5 p.m. ..	Tea.
5—8 p.m.	Free in Camp.
8 p.m.	Supper.
8.30—9.30	Quiet Hour—Games, Singing.
9.30 p.m.	Tales and Talks.
10 p.m.	Lights Out.

"In all cases, a scheme of work was carried out. In connection with the field work, many interesting specimens of flora were made, rocks and sea-shells were collected and studied, shipping and land features sketched, and diaries were well kept by the children.

"*General*.—The reports of the teachers-in-charge speak in the highest terms of the accommodation and food. The conduct of the children was excellent, and all the Head Teachers speak of the marked improvement of the children on their return. For most of them it was their first long journey, and not many of them had seen the sea before. It was thus a great adventure, and boys and girls have learnt much from their stay in the Isle of Wight which will prove of lasting benefit. The sea and sun-bathing, good habits of cleanliness and personal hygiene, social contacts and the constant care of the teachers, who carried out their arduous duties most admirably, all combined to help towards a higher standard of living which will not easily be lost.

"The transport arrangements were well carried out. The Railway Company very kindly reserved coaches and gave every assistance, and not the slightest hitch occurred in the journeys to and from the Island. There were only a few minor cases of ailments, which could easily be treated. In some cases, a slight scratch could produce severe festering, owing to the low state of health of the children, probably due to malnutrition; but in only one case, where the child developed a temperature, was medical aid summoned. Each group had at least one teacher skilled in first-aid, and all slight casualties were promptly given adequate attention. Ample supplies of first-aid equipment were provided. A few

complaints, mainly with regard to the girls, as to cleanliness and personal habits, were reported; but it is hoped, with the co-operation of the School Medical Officer, to eliminate this cause of complaint in future years.

"All children were medically examined, and a few had to be rejected on various grounds. The questionnaire suggested above will probably reduce the number rejected and prevent the consequent disappointment in the future.

"*Finance*.—The total amount provided by the Committee and sanctioned by the Board of Education was £1,000. Parents were invited to pay 2s. per week as a contribution towards the cost of food and, except in a very few cases, this was willingly paid. The following particulars as to cost will indicate how the money was expended:—

(i) *Fares*:—

Waterloo to Sandown.—Girls, 5s. 10d.; Teachers, 11s. 8d.

Waterloo to St. Helen's.—Boys, 5s. 9½d.; Teachers, 11s. 7d.

Total Expenditure in Fares .. £137 8s. 7d.

(ii) *Maintenance*:—

Girls (June—July).—£1 per week, plus £1 5s. per Teacher.

Girls (September—October).—18s. 6d. per week, plus £1 5s. per Teacher.

Boys.—15s. per week, plus £1 5s. per Teacher.

Total Expenditure on Maintenance .. £724 12s. 11d.

(iii) *Summary*:—

	£	s.	d.
Visits by Char-a-bancs, etc...	70	6	0
Fares	137	8	7
Insurance, etc.	12	15	5
Maintenance	724	12	11
Sundries	38	8	2
Kitbags	25	0	10
Sports Apparatus	13	15	4
Books, Apparatus, etc.	9	13	10
Transport (Kitbags)	9	7	8

	£	s.	d.
Total	1,041	8	9
Less Receipts	65	4	6
	£976	4	3

"The total net expenditure was £976 4s. 3d.

"*Conclusion*.—Numerous grateful letters from parents and scholars testify to the enjoyment and benefits in health of the scholars. Most of them were near the school-leaving age, and one can scarcely over-estimate the values—physical and mental—at such a critical period in their lives. The greatest credit is due to the staff who volunteered for this service. The work, which was exceedingly strenuous and involved much longer hours of supervision than those to which they were accustomed in their school work, was most ably carried out, and their services were generously given and appreciated by the children.

"Preliminary and provisional arrangements are being made for the holding of similar Camps next year. This development of school work is one which amply repays the expenditure of service, time and money, and the historical and other features of the Isle of Wight render it probably the most suitable place in England for the School Camps.

"Visits were paid at various times by the Chairman, Mr. P. Astins, Councillor J. Camp, and Alderman Mrs. McEntee. The School Medical Officer and Director also visited the Camp and useful information for guidance in future arrangements has been gathered by the visitors. The opportunity was also taken of visiting the Convalescent Home at Ventnor, where there are 22 Walthamstow children in attendance."

Each child was examined by a Medical Officer 2 days before leaving for Camp, and any unfit cases were replaced.

Unfortunately, in spite of previous warnings by the School Nurses, considerable trouble was experienced amongst the girls with regard to verminous heads. Several cases were rejected when failure to remedy this condition was found on a second examination on the day before the Camp.

All groups of children subsequent to the first were weighed before and after Camp, and the results are summarised in the following Table:—

The nett cost for 183 boys and 192 girls—a total of 375 children and 28 teachers—for the 14 days' camping, amounted to £976 4s. 3d., after deducting parents' contributions.

RESULTS OF WEIGHING CHILDREN BEFORE AND AFTER SCHOOL CAMPS.

	Boys.		Girls.			
	2nd Group.	3rd Group.	1st Group.	2nd Group.	3rd Group.	4th Group.
Weight Increased ..	35	37	39	38	41	41
Maximum Increase ..	4 lbs. 3 ozs.	5 lbs.	6 lbs.	4 lbs. 6 ozs.	6 lbs.	3 lbs. 8 ozs.
Minimum ,, ..	1 oz.	8 ozs.	8 ozs.	4 ozs.	12 ozs.	4 ozs.
Average ,, ..	1 lb. 6 ozs.	1 lb. 12 ozs.	2 lbs. 13 ozs.	2 lbs. 3 ozs.	2 lbs. 8 ozs.	1 lb. 14 ozs.
No Change	3	1	2	5	2	3
Weight Lost	22	21	7	5	5	2
Maximum Loss ..	3 lbs.	4 lbs.	4 lbs. 8 ozs.	2 lbs. 8 ozs.	2 lbs. 8 ozs.	3 lbs.
Minimum ,, ..	4 ozs.	8 ozs.	8 ozs.	8 ozs.	1 lb.	1 lb. 8 ozs.
Average ,, ..	1 lb. 9 ozs.	1 lb. 9 ozs.	2 lbs. 4 ozs.	14 ozs.	1 lb. 11 ozs.	2 lbs. 4 ozs.
Total Average Increase	4 ozs.	4 ozs.	2 lbs. 2 ozs.	1 lb. 13 ozs.	2 lbs. 2 ozs.	1 lb. 9 ozs.

NOTE.—The greater average increase in Girls may be explained by the fact that Boys would be more active at a Camp of this kind.
The 1st Group of Boys was not weighed.

(*d*) **Open-Air Classrooms in Public Elementary Schools.**—The accommodation available for open-air education was augmented towards the close of the year by the completion of two new classrooms for 50 children each at the Boys' and Girls' Departments at Selwyn Avenue Schools.

The accommodation at the existing 4 open-air classrooms remains as detailed in the Report for 1930. The Head Teachers' observations are given below:—

Miss Cockrell (Forest Road Girls' Department) stated that "we find a definite improvement both in general health and in physique, particularly at the close of the summer months."

Mr. Taylor (Forest Road Boys' Department) remarks that "the children are less listless and more eager to work."

Miss Adkins (Coppermill Road Junior Mixed Department) reports that "the children's parents are satisfied that they enjoy better health and have fewer colds. The attendances compare very favourably with that of the other classes."

(*e*) There are no day or residential open-air schools in the Borough.

10. PHYSICAL TRAINING.

Physical Training is carried out in all the schools according to the Board's Syllabus and, in addition, 3 Specialist Instructors are employed—1 for each Central Boys' School and 1 for the 2 Central Girls' Schools.

Well-equipped gymnasia are provided at each of the Central Schools and at the Marsh Street Senior Boys' School. The latter gymnasium is also used by boys attending the Markhouse Road Senior Boys' School.

The recent acquisition of the North Walthamstow Sports Ground (4½ acres), together with the existing playing fields at Chestnuts Farm and the use of the several Parks, makes reasonable provision for organised games for all schools in the area.

When remedial exercises are considered necessary by the Medical Staff, cases are usually referred to the Orthopaedic Clinic.

11. PROVISION OF MEALS.

(i) Your Authority provides a mid-day dinner for the children of necessitous parents at the Canteen Centre, in High Street. Adequate cooking, service and dining arrangements exist and, during the year, 4 wash-basins were provided. The menus consist of a joint, vegetables and pudding.

Year.	Number of Children.	Number of Meals.	Average Meals per Child.
1931	385	42,762	111
1930	310	32,750	105.6

The average cost per meal during 1931 was 6d. The increase both in the number of children fed and the number of meals supplied during 1931 will be noted.

(ii) Milk was supplied to 526 children on medical grounds on the recommendations of the Medical Staff after the examination of children either at School or at Clinics. The number of children supplied during the preceding year was 301.

In addition, 40 children were supplied with milk on the recommendation of the Tuberculosis Officer.

(iii) *National Milk Publicity Council's Scheme.*—The provision of milk under this Scheme appears to be well maintained, and is in every way to be commended. All milk supplied under the Scheme is required to be pasteurised. The adoption of the Scheme in those schools which have not yet made arrangements is strongly urged.

12. SCHOOL BATHS.

There are no School Swimming Baths in your Authority's schools, but good use continues to be made of the Municipal Baths under the supervision of the Committee's Swimming Instructor.

13. CO-OPERATION OF PARENTS.

Every endeavour is made to secure the attendance of parents at medical inspection, and written notifications are sent by Head Teachers inviting them to be present. The Medical Inspector is then able to explain the importance of remedying any defect found.

The following Table shows the attendance of parents during 1931:—

Boys.

	Number of Inspections.	Number of Parents.	Per cent. 1931.	Per cent. 1930.
Entrants	1340	1144	85.3	85.3
Intermediate ..	749	508	67.8	65.3
Leavers	1040	389	37.4	35.8

GIRLS.

	Number of Inspections.	Number of Parents.	Per cent. 1931.	Per cent. 1930.
Entrants	1323	1152	87.0	87.2
Intermediate ..	707	547	77.3	77.3
Leavers	1106	638	57.6	57.6

14. CO-OPERATION OF TEACHERS.

Renewed and grateful acknowledgment must be given for the co-operation of Head Teachers, upon whom a great deal of the success of the School Medical Service depends. They have again helped generously in the preparation for medical inspection and re-inspections, in assisting in the following-up necessary for the remedy of defects, in allowing the use of their private rooms for inspection, and in the reference of all known cases of minor ailments for treatment at the School Clinics.

Many minor ailments occur between the visits of the Medical Inspectors to the schools and the continued co-operation of the Teaching Staff in sending such cases for treatment, either to the family doctor or to the Clinics, is earnestly requested. The importance of immediate treatment for such serious conditions as discharging ears and squints cannot be over-estimated.

15. CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

The Attendance Department, under Mr. S. J. Longman, Superintendent Attendance Officer, has again co-operated most generously, particularly in the following respects:—The ascertainment of exceptional children, especially of the mentally defective, and their subsequent statutory examination; arrangements for Convalescent Home treatment; control of Smallpox in school outbreaks; provision of milk on medical grounds; arrangements for Orthopaedic treatment; and the collection of fees for spectacles provided under the Authority's scheme.

16. CO-OPERATION OF VOLUNTARY BODIES.

(*a*) The Invalid Children's Aid Association, through its Secretary, Miss D. A. Lewis, has given invaluable help, notably in respect of the Rheumatism Clinic, of arranging for Convalescent Home treatment at St. Catherine's Home, Ventnor, and of after-care visiting in connection with children attending the Physically Defective School and Brookfield Hospital. Miss Lewis has attended every session of the Rheumatism Clinic, where her help has been much appreciated. Miss Lewis has kindly contributed the following statistics relating to the work of the Walthamstow Branch during 1931:—

Table of Cases, 1931.

Referred by:—	
School Medical Department	202
Medical Men, Hospitals, Dispensaries	99
Tuberculosis Dispensaries	32
School Officials	16
I.C.A.A.	3
C.O.S. and other Voluntary Bodies	3
Naval and Military Agencies	1
Parents	4
Others	44
Total	404
Defects:—	
Tuberculosis—Glands 2, Joints 2	4
Anaemia and Debility	102
After-effects of Illness	13
Marasmus and Malnutrition	6
Disease of Glands, non-tubercular	5
Pneumonia, Bronchitis and Asthma, etc.	30
Bones, non-tubercular	92
Congenital Deformities	10
Paralysis	27
Injuries	5
Rheumatism, Chorea, Heart	80
Diseases of Nervous System	7
Mentally Deficient	2
Hernia	1
Diseases of the Eyes	3
,, Nose and Throat	3
,, Ears	3
,, Digestive Organs	6
Various	5
Total	404

Help Given to Old and New Cases.

	Old.	New.	Total.
Sent to Special Hospitals and Convalescent Homes	53	202	255
Extensions from previous years	57	—	57
Provided with Surgical Boots and Appliances	86	35	121
Provided with Massage and Exercises	—	11	11
Referred for Visiting and Advice	7	123	130
Referred by I.C.A.A. to other Agencies	2	12	14
Totals	205	383	588

Two children were sent away for training. Clothes are now supplied at several Convalescent Homes. Eighty-seven children were away at the end of 1931.

(*b*) Inspector Francis, of the South-West Essex Branch of the N.S.P.C.C., contributes the following statistics and notes relating to the work done during 1931:—

No. of Cases.	Nature of Offence, etc.		How dealt with.	
176	Neglect	93	Warned and Advised ..	174
	Advice sought ..	49	Prosecuted and Convicted	2
	Ill-treatment ..	24		
	Various	10		

"Supervision visits totalled 605, involving 219 boys and 207 girls, including 63 pre-school children. Three cases were referred to Brookfield Hospital, and are now quite normal. The Society has had to prosecute in 2 cases, the parents being convicted with loss of the custody of the children, who are now progressing satisfactorily.

"Some parents are finding great difficulty in providing boots and clothes for their children. Thanks are due to the Education Authority for the provision of boots, but the Society would welcome all articles of clothing at its local office, 12, Eastfield Road."

(*c*) **Central Boot Fund Committee.**—The Honorary Secretary, Mr. A. J. Blackhall, has very kindly sent the following account of the work of the Boot Fund during 1931:—

"The year 1931, so far as the Central Boot Fund Committee was concerned, was rather a memorable one, inasmuch as the allocation of boots was withheld after the Whitsun holidays owing to the serious financial position of the Fund caused by the great distress in the Town and the consequent heavy demands made for boots.

"The distribution was recommenced on the 1st October, 1931.

"In spite of this suspension, however, 600 pairs of boots were distributed during the 8 months, at a cost of practically £230.

"During the year, the Committee accepted new Contracts from local firms for the supply of footwear and also decided to allow parents the choice of shoes in respect of applications on behalf of girls."

(*d*) The Honorary Secretary for the Mental Welfare and After-Care Committee, Mr. L. A. Bristow, incorporates his report with the following by Miss Turner.

(*e*) The Secretary of the Essex Voluntary Association for Mental Welfare, Miss Turner, sends the following report on the work of the Occupation Centres provided by that Association at The Settlement, Greenleaf Road:—

"With a view to training and congenial occupation for those who have been excluded from Shernhall Street Special School, and others over school age who are unable to take their place as responsible and independent citizens, 2 Centres are provided in Walthamstow, this being made possible by a grant to the Association from the County Council.

"*Children and Elder Girls.*—Mornings: Mrs. Louis in charge. Thirty-one have attended during the year, among them many types and all grades and ages. Twelve elder girls have received some training in domestic work; for games and dancing they join the children, but for individual handwork they sit at a table apart. Many of the children are helpless little ones, who need constant attention from the Supervisor and her staff; others can make good attempts at country dancing and learn simple stitchery.

"There can, of course, be little grading, but we feel that this is not altogether a drawback. Is not the family unit a happy and efficient training school where those of all ages and varying abilities and responsibilities mix freely? The aim is to train the children to fit more readily into their homes, and to become independent of others in their personal needs. Music has an almost universal appeal, and in dancing and singing, in drill and, above all, in rhythmic work, it is used to stimulate and reinforce.

"*Boys' Handicraft Class.*—Afternoons: Miss Carter in charge. Twenty-eight defectives have attended during the year, the eldest aged 29 and the youngest 14. This number includes low-grade defectives, but everything possible is done to encourage the boy who, standing no chance of regular work, can yet keep jobs for short periods. Eleven of the boys have had outside work during the year. One was gardening, 1 had an ice-cream barrow, others worked as sand-paperers; but mostly they had jobs as errand-boys or "odd hand." One boy had settled down well with a pawnbroker and stood outside to keep an eye on the stall, greatly to his parents' satisfaction. One day, however, he took 14 hours to deliver a parcel in City Road, E.C., and so came back to the Class.

"The boys come not as to a school, but in the spirit of work. Orders are taken, and the boys receive 50 per cent. of the profits. (In calculating profits, the materials in the finished article only are included, not overhead charges or the cost of spoiled materials). There are 10 different occupations on hand; and in brush-making, the most popular occupation, nearly 100 brushes have been turned out during the year. Those boys who get work are encouraged to keep in touch with the Class, and to return should their job come to an end.

"The Class has benefited much through local interest; in both bookbinding and shoe repairing, tradesmen have helped by advice and in the provision of materials. Several of our more capable boys have been placed in a factory where the management are interested in "handicapped" workers. As these have kept their work and are reported to be satisfactory, we hope in time to place others.

"*Summer Outing, etc.*—In July, a party of 75, consisting of defectives from both Centres and their parents and friends, went for their Summer Outing to Theydon Bois. Tea was provided, and games were played in the forest.

"At Christmas, a very successful party was held, arranged by the Local Mental Welfare and After-Care Committee; but the elder boys, instead of sharing in the party for the children and girls, were taken to a pantomime. In this, too, arrangements were made by the Local Committee.

"*Local Mental Welfare and After-Care Committee.*—Throughout the year, the Local Committee have been invaluable. They have continued to keep in touch for the Association with defectives placed under Statutory Supervision, and were responsible for the Christmas party, as well as arrangements for the pantomime, on which occasion the Hon. Secretary, Mr. Bristow, was in charge of the boys. In addition, the annual Reunion Social was held in June, when nearly 100 old scholars from the Shernhall Street School were present. A very instructive visit was paid in July to the Manor at Epsom, an L.C.C. Institution; and during the year a Parents' Association was formed by Miss Purcell, the Head Teacher of the Special School, in co-operation with the Local Committee, a very successful inaugural meeting being held in July. We offer to Mr. Bristow and to his Committee most hearty thanks for invaluable help.

"At each Centre the Supervisor will gladly welcome visitors."

(*f*) The following information has been extracted from the Annual Report of the Walthamstow Association of Tuberculosis Care Helpers for the year ending 31st March, 1931. The Association

made the following grants in respect of children:—Nourishment, 6; Christmas grants, 17; cases sent to Convalescent Homes, 16. In co-operation with the Education Committee, 27 cases of Physically Defective Children were recommended for Convalescent Home treatment.

(*g*) Co-operation with Brookfield Orthopaedic Hospital and with the Walthamstow Dispensary in respect of treatment for Tonsils and Adenoids is acknowledged elsewhere.

17. BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

Table 3 at the end of the Report gives a full analysis of all exceptional children in the Borough.

(*a*) The ascertainment of such children can justly be claimed to be as complete as possible owing to the splendid co-operation of Mr. S. J. Longman, the Superintendent Attendance Officer, and his colleagues. Exceptional children are discovered even before reaching school age by the periodical street census carried out by the Attendance Department.

(*b*) Mentally Defective children not in special schools are supervised by the Essex County Council, the local Mental Deficiency Authority, in the case of idiots and imbeciles, and at the Occupation Centre (provided by the Essex Voluntary Association for Mental Welfare) in the case of ineducable mental defectives. The work of the Association is reported under Section 16 (*e*).

(*c*) General revision of the work of the Authority's Special Schools:—

(i) *Blind School.*—Your Committee provide a Blind School at Wood Street, with accommodation for 85 children of both sexes. The following Table shows the classification of children attending the school at the end of 1931, and has been supplied by the Head Teacher, Miss Balls:—

	"Blind within the Act."		"Partially Blind."	
	Walthamstow.	Other Authorities.	Walthamstow.	Other Authorities.
Boys ..	3	2	27	7
Girls ..	7	4	27	8
Total ..	10	6	54	15

The after-care of the children comes under the purview of the After-Care Committee and the Walthamstow Committee for the Care of the Blind.

The work done at the school is detailed in previous Annual Reports and in the following interesting report of the Consultant Ophthalmic Surgeon, Mr. H. J. Taggart, F.R.C.S.:—

"Since the long vacation, I have visited the Blind and Myope School once a month. This is a great improvement on the 6 Annual Visits formerly paid, as it permits of the really necessary bi-annual, instead of an annual, examination of each child.

"The following Table summarises the defects for which the children were in attendance at this school during 1931:—

	Boys.	Girls.	Total.
High Myopia	13	13	26
High Myopic Astigmatism	10	15	25
High Hypermetropic Astigmatism	2	2	4
Congenital Nystagmus	5	5	10
Myopic Astigmatism and Nystagmus	1	—	1
Congenital Choroidal Colobomata	1	1	2
Micropthalmos and Colobomata	1	—	1
Macula Colobomata	1	—	1
Double Congenital Cataracts	1	1	2
Congenital Cataract and Nystagmus	—	1	1
Glioma—Bilateral Enucleation	—	1	1
,, —Right Eye Enucleated	1	—	1
Corneal Nebulae and Cucomata	1	4	5
Corneal Opacities following Interstitial Keratitis	1	—	1
Bilateral Primary Optic Atrophy	1	—	1
Partial Optic Atrophy following Retro-bulbar Neuritis	—	1	1
Albino	—	1	1
	—	—	—
Totals	39	45	84
	—	—	—

"A number of the children have been admitted during the year to the Western Ophthalmic Hospital under my care for operative treatment.

"I wish again to thank the staff at the school for their co-operation and the care which they have shown in carrying out all my suggestions."

During the year, your Authority approved of the attendance of the Consultant Ophthalmic Surgeon once a month instead of 1 every 2 months, as before.

Miss M. L. Balls, the Head Teacher, has kindly sent the following notes:—

"As the children attending this Centre come from all parts of Walthamstow and the surrounding districts of Chingford, Woodford and Leyton, special arrangements have to be made for their conveyance.

"In Walthamstow, most of them travel on the local trams, all fares being covered by the Education Authority. In order to prevent accidents, the Attendance Officers are stationed at the main stopping places to see the children safely on and off the cars. Those children living off the tram routes are brought by the Council's ambulance or bus.

"The Chingford and Leyton children are brought to school either by a guide appointed by the Local Education Authority or by their parents.

"A mid-day meal is provided each day, for which the children pay the small sum of 3d. per day. As in other schools, necessitous children receive free meals. Milk meals are also provided, either by the parents' wish or the doctor's orders.

"Between 10th June and 24th June, 40 children were taken by 2 teachers for a school journey to Dawlish, in Devon. Special lessons in History, Geography, Nature Study and Literature were given in preparation for the visit, whilst drawings, postcard albums and compositions formed a record after the return to school.

"Of the children left, 1 boy has gone for training at Tottenham Court Road Workshops for the Blind, and the remainder are in good and suitable work."

(ii) *Deaf Centre.*—The Head Teacher reports a year's successful work at the School, and that the majority of the older children were exceptionally intelligent. At the end of the year there were 21 children on the roll, comprising 11 congenitally deaf, 5 semi-deaf, and 5 aphasic cases. Two of the children were from outside Authorities. One boy, an aphasic, was allowed to leave at the age of 14 years on obtaining suitable employment, and excellent reports have since been received.

The speech apparatus recently provided has been found to have been of great help to some children.

Your Authority have now sanctioned the utilisation of Dr. Friel's services in the specialist supervision of the School on 3 sessions per annum. During one of his visits, Dr. Friel tested the residual hearing possessed by the children. The tests were carried

out by an ingenious and recently-invented instrument, the Audiometer, which is the only scientific way of recording the acuity of the sense of hearing, and is more fully described in Dr. Friel's report.

(iii) *Physically Defective School.*—Your Authority provide a Physically Defective School, with accommodation for 80 pupils of both sexes.

The School is under the Orthopaedic charge of Mr. B. Whitchurch Howell, F.R.C.S., Consulting Orthopaedic Surgeon to your Committee, who holds a monthly clinic, assisted by 2 part-time Masseuses. The remaining staff consists of a Head Teacher, 2 Assistant Teachers, 1 Art Mistress, a Craft Master. The ambulances are staffed by a Nurse and 2 Ambulance Drivers. In addition, there is a Cook and a Female Attendant.

The School is provided with a well-equipped Orthopaedic and Massage Room, in which daily Massage Clinics are held.

Mr. B. Whitchurch Howell, F.R.C.S., has kindly contributed the following report on the work of the Orthopaedic Clinic:—

"The following statistical report compiled with great care by the Masseuses, Miss Theobald and Miss Garratt, shows the large amount of most interesting work undertaken by the Clinic. To them I owe much, both in organisation and in the care with which they have carried out the details of the treatment recommended.

"The time has now come for further help, namely, the appointment of a part-time Masseuse with full Orthopaedic qualifications, who should, in addition, correlate her work with that at the Brookfield Orthopaedic Hospital.

"In addition, those cripples now over 16 years of age should not be forgotten. Their claims are just as urgent as when they attended the Orthopaedic Clinic under the jurisdiction of the Education Committee.

"I, therefore, hope that Miss Lewis and her kind friends, with the members of the Education, Brookfield Hospital and other Committees will, with the help of the British Red Cross Society, evolve some scheme by which the cripples over 16 requiring supervision or even occasional treatment, will be enabled to obtain the same from the same staff that helped them whilst of school age."

JOSEPH BARRETT PHYSICALLY DEFECTIVE CENTRE ORTHOPAEDIC SCHEME.

Defects.	Boys.			Girls.		
	5—16 Years.	Under 5 Years.	Over 16 Years.	5—16 Years.	Under 5 Years.	Over 16 Years.
Anterior Poliomyelitis ..	17	1	3	17	1	13
Rickets	8	23	—	1	17	—
Congenital Dislocation of Hip	—	—	—	5	1	—
Tubercular Joints ..	13	—	—	4	—	1
Achondroplasia	1	—	—	—	—	—
Foot Deformities ..	24	6	1	16	6	1
Erb's Paralysis	—	—	1	1	—	—
Pseudo Hypertrophic Paralysis	1	1	—	—	—	1
Torticollis	2	—	—	3	1	—
Genu Valgum and Varum	8	—	—	7	—	—
Visceroptosis	1	—	—	—	—	—
Congenital Defects ..	3	2	—	5	—	—
Cerebral Ataxia	2	—	—	1	—	—
Spastic Paralysis ..	10	1	—	10	1	2
Scoliosis, Kyphosis, Lordosis	13	2	—	15	1	1
Arthritis, Polyarthritis ..	2	—	—	6	—	—
Fractures	3	1	1	—	—	—
Kohler's Disease ..	1	—	—	—	—	—
Perthe's Disease	1	—	—	—	—	—
Pseudo Coxalgia	1	—	—	—	—	—
Spina Bifida	1	—	—	1	—	—
Osteomyelitis	3	—	—	—	—	—
Epilepsy	1	—	—	2	—	—
Heart Disease	12	—	—	11	—	—
Miscellaneous	3	5	2	7	4	1

Number of Cases seen by the Surgeon:—

(*a*) School children	298	
(*b*) Children under School age	133	507
(*c*) Children over School age	76	

Number of Attendances for Orthopaedic and Massage Treatments (including children of all ages) 2,263

Number of Sessions held:—

(*a*) Medical Inspections by Orthopaedic Surgeon ..	11
(*b*) For Treatment	204

Miss Thompson, Head Teacher of the Physically Defective School, reports that during 1931 the average attendance was about 65. Of 8 children who left (being over age), 6 obtained employment, 1 failed to do so, and 1 was sent to a training school through the agency of the After-Care Committee.

The 60 children in attendance on 23rd December, 1931, suffered from the following defects:—

Boys.—Orthopaedic, 27; Heart, 9; Nephritis, 1; Asthmatical, 1; Epileptic, 1.

Girls.—Orthopaedic, 12; Heart, 8; Epileptic (Petit Mal), 1.

The Rotary Club again took the older children to Hampton Court. Under arrangements made by the Education Authority, a visit was also paid to Sadlers Wells Theatre to see "A Midsummer Night's Dream."

Miss Thompson remarks upon the fact that the present tendency is to admit children at a younger age, which secures the maximum benefit of treatment.

The following is a summary of after-care reports of Physically Defective Children:—

1 apprenticed to a Tailoring Firm. The Juvenile Employment Officer is keeping in touch with the case.
1 working on own order in a friend's Shop. Enquiries being made with regard to workshop facilities.
1 attending Technical College.
1 patient out of hand. Parents refractory. Referred to N.S.P.C.C.
1 Invalid Children's Aid Association arranged for training in Tailoring.
5 referred to Juvenile Employment Officer.

In addition, 1 case was assisted to the extent of £1 0s. 6d. for the provision of instruments.

Brookfield Orthopaedic Hospital.—The Orthopaedic Scheme depends for a great deal of its success on Brookfield Hospital, which is provided by voluntary efforts. It is a Hospital School recognised both by the Board of Education and the Ministry of Health. Thirty beds are provided, and an excellent sun ward, glazed with "Vita" glass was provided during 1931 by the generosity of T. S. Armstrong, Esq., J.P.

The average number of beds in daily occupation during the year was 22.45. There were 21 patients in Hospital on 1st January, 1931, and 75 were admitted during the year, 20 remaining on 31st December. The average stay was 107.8 days.

The work of the Hospital was considerably impeded during the year by an outbreak of Scarlet Fever, which commenced in October and continued up to the end of the year. Eight definite cases occurred, and 2 patients were removed for observation. An

attempt was made to control the outbreak by means of Dick testing, throat swabbing (with subsequent typing by Dr. Griffiths at the Ministry of Health Laboratory), and securing passive immunity. The typing showed the outbreak to be Type 2 throughout, and all members of the staff carrying this type of Haemolytic Streptococcus were suspended from duty.

Miss Theobald, C.S.M.M.G., has kindly summarised the admissions and the operations done during 1931, as follows:—

Admissions:—(WALTHAMSTOW CASES)

Under 5 years of age	12
5 years and over	12
Number of Patients already in Hospital on 1st January, 1931	12

Classification of Admissions.	Under 5 Years.	5 Years and Over.
Rachitis:—		
(*a*) Genu Valgum	3	—
(*b*) Genu Varum	4	—
Deformities of Feet:—		
(*a*) Talipes Equino Varus	1	—
(*b*) Pes Planus	—	1
Congenital Deformities:—		
(*a*) Torticollis	1	—
(*b*) Erb's Paralysis	—	1
Spastic Hemiplegia	2	1
Anterior Poliomyelitis	1	6
Arthritis, Hip	—	1
Still's Disease	—	1
Spina Bifida	—	1
Pseudo Hypertrophic Paralysis	—	1

Classification of Operations.	Under 5 Years.	5 Years and Over.
Osteotomy:—		
(*a*) Femoral	4	2
(*b*) Humerus	—	1
Osteoclasis	4	—
Arthrodesis—Tarsal and Metatarsal Joints ..	—	1
Reduction C.D.H.—2nd and 3rd positions ..	5	—
Aspiration Abscess	—	3
Exploration Popliteal Nerve	—	1
Manipulations—Feet	1	1
Circumcision	1	—
Subcutaneous Division—Sterno Mastoid ..	1	—
Subcutaneous Tenotomy Tendo Achilles ..	3	5

Plaster of Paris:—

Plaster Jackets	2	Plaster Beds	3
,, Spicas	2	,, Casts	2

Splints—Various:—

(*a*) Following Operation by Surgeon	17
(*b*) By Masseuses	12
Dental Treatments	3

BROOKFIELD ORTHOPAEDIC HOSPITAL.

Admissions:—(ALL CASES)

From Walthamstow	24
From other Districts in Essex	62
Number of Patients already in Hospital on 1st January ..	21
Total number of Discharges	59
Transfers to Queen's Hospital	1
Transfers to Chingford Sanatorium	11

CLASSIFICATION OF ADMISSIONS.

Spastic Paralysis:—

(*a*) Hemiplegia	10
(*b*) Diplegia	3
(*c*) Paraplegia	1
(*d*) Tetraplegia	2

Rachitis:—

(*a*) Genu Valgum	5
(*b*) Genu Varum	13

Talipes:—

(*a*) Equino Varus	5
(*b*) Equinus	3
(*c*) Pes Cavus	1
(*d*) Pes Plano Valgus ..	2
Pes Planus	2
Osteitis	1

Congenital Deformities:—

(*a*) Torticollis	2
(*b*) Erb's Paralysis	2
(*c*) Multiple (Arms and Legs)	1
(*d*) Lobster Hand	1
(*e*) Digitus Varus	1
(*f*) C.D.H.	1

Scoliosis:—

(*a*) Congenital	1
(*b*) Acquired	1
Encephalomyelitis	1
Anterior Poliomyelitis ..	16
Arthritis, Hip	3
Fracture (Supracondylar Humerus)	1
Spina Bifida	1
Pseudo Hypertrophic Paralysis	1

PLASTER OF PARIS.

Plaster Beds:—

(*a*) Spinal	6
(*b*) Abduction, Hip ..	1

Plaster Jackets 2

Plaster Spica:—

(*a*) Hip	8
(*b*) Shoulder	2

Dental Extractions 7

Plaster Casts:—

(*a*) In Suspension	3
(*b*) Feet	2

Splints—Various:—

(*a*) Following Operation by Surgeon	63
(*b*) By Masseuses	18

CLASSIFICATION OF OPERATIONS.

Osteotomy:—		Manipulations (1 wrist, 3 feet)	4
(*a*) Femoral	11	Exploration, Elbow—Volhman's Contracture ..	1
(*b*) Cuneiform	1	Circumcision	1
(*c*) Humerus	1	Investigation, Hip	1
Removal Head of Astragalus ..	1	Subcutaneous Division Sterno Mastoid	2
Osteoclasis	19	Subcutaneous Tenotomy Tendo Achilles	17
Steindler's Operation	2	Subcutaneous Tenotomy Tendo Adductor	6
Arthrodesis:—		Subcutaneous Tenotomy Plantar Fascia	1
(*a*) Tarsal and Metatarsal Joints	2	Open Elongation—Tendo Achilles	11
(*b*) 1st Phalangeal Joint (Foot)	2	Tendon Transplantation (Flexon Carpi Ulvaris)	1
Amputation, Digits	3		
Reduction—C.D.H.	1		
2nd and 3rd Positions	5		
Stoefel's Operation—Median Nerve	3		
Aspiration Abscess	3		
Exploration Popliteal Nerve..	1		

Total Number of Operations .. .. 100.

(iv) *Mental Deficiency.*—Following a Post Graduate Course, one of the Assistant Medical Officers was recognised as a Certifying Officer, bringing the total number of Certifying Officers up to 3. The addition has permitted arrears of work to be overtaken.

During 1931, 88 children were examined by your Committee's Certifying Officers for alleged Mental Deficiency, with the following results:—

No.	Classification.	Recommendations.
9	Dull and Backward, and 1 Border-line Case	To remain in School for the present.
1	Mentally Defective, Partially Blind and Cripple	To go to Residential School for Multiple Defects.
19	Mentally Deficient	To go to Special School.
3	Dull and Backward	Re-examine in 12 months.
12	Dull and Backward	Re-examine in 6 months.
2	Dull and Backward	Re-examine in 3 months.
6	Dull and Backward	To be re-examined later.
3	1 Idiot, 1 Imbecile and 1 Doubtful	To be seen again when 7 years of age.
9	Imbeciles	Notified to Essex County Council
1	Epileptic, with Progressive Mental Changes	To be re-examined in March, 1932.
12	Not Mentally Deficient	—
2	Normal	To continue at present School.
1	Dull and Backward	To go to Brookfield Hospital.
1	Doubtful	To be re-examined in June, 1933.
1	Doubtful	To go to Infants' School for 6 months.
1	Epileptic	To be kept under supervision for 6 months.
1	Epileptic	To arrange for Special School.
1	De-certified	To go to Ordinary School.
3	Idiots	To be notified to the Essex County Council.

In addition, 30 children attending the Special School were examined in the autumn by the School Medical Officer and mental assessments were carried out, as a result of which 3 children were de-certified and 2 were excluded as ineducable. An unduly large proportion of the children were found to be low grade defectives.

A total of 18 children were notified to the Essex County Council as the local Mental Deficiency Authority. An analysis of these cases is given at the end of the Report.

Mentally Defective School.—Your Committee's Special School has accommodation for 130 mixed children. A mid-day meal is served, and an After-Care Committee is in existence.

Miss Purcell, the Head Mistress, has contributed the following notes on the work during 1931:—

"The Special School continued to be a very happy School, and 1931 saw but little change in its curriculum.

"The 'Craft' Class chiefly included boys and girls over 14 years of age, and gave more time to handwork than to reading and calculation. The children in this Class attended Cookery at the Wood Street Centre, and the splendid results show that the training was well worth while. Some boys, and one in particular, were able to cook and to serve a dinner throughout, and all were taught to become handy in the home or workshop. A Craftmaster taught woodwork, including simple repairs to toys, furniture and equipment, upholstery, boot repairing and brushmaking. A qualified Gardener visited for 2 sessions and taught the boys horticulture, a rockery and fishpond being constructed in one tiny playground during the autumn; while the allotments, in spite of their bad position, yielded well both flowers and vegetables for School use. A Visiting Teacher instructed the girls in the use of a stocking machine, the use of the sewing machine being taught by the Head Teacher.

"Classes I and II, the older and the younger educable children worked alternate sessions with 2 assistants—1 specialising in the academic and mental side, and the other in physical exercises and general hand-training. Walks, skipping, general remedial exercises, simple dancing and games, according to the mental status of the child, took the place of drill. Observations and mental tests throughout the School were conducted by 1 Teacher, who also keeps the annual records of each child.

"The very youngest children, chronologically as well as mentally, spend their time in the 'Nursery,' where general habits (cleanliness, behaviour, sociability, etc.,) are the predominating feature; while freedom resembles, as far as possible, that of a good home.

"An excellent hot dinner—including meat, 3 vegetables and a sweet (or fresh fruit)—was provided daily at 3d. per head. The kitchen, needless to say, is the 'pivot' in the eyes of the children on which the whole School revolves. The efficacy of this meal is seen at the times of epidemics, when the School suffers less in proportion than the ordinary schools from the prevailing complaint.

"Every child who needed one was given a hot bath at least once a week, and many a garment was made serviceable and comfortable by the Nurse while the bath was being given.

"The Attendants were responsible for the conduct at the dinner tables and the training in table manners, as well as for the safe journey home by special car.

"In May, 1931, a party of 33 boys and girls went on a School journey to Ryde, and had a most enjoyable time in spite of the coldness of the weather. Every beauty spot in the Island was visited, and hundreds of miles were covered by train, charabanc, and foot during the fortnight's stay. The Education Committee were most liberal in this, as in all that concerns the wellbeing of the special children, and many a child will, in later life, be able to look back on at least 5 such health-giving, educating holidays.

"The Medical Staff at Lloyd Park, as well as that of the Attendance Department, give the scholars sympathetic consideration, and are always ready to assist the School staff in any possible direction, both in School and out, and even extend their help to scholars who have left and fallen on bad days.

"At midsummer, a Parents' Social was held, under the chairmanship of Alderman Le Mare. After-care Visitors were able to meet parents who will eventually be visited by them. A short musical programme was enjoyed, to say nothing of the refreshments prepared by the Cookery Class; and classrooms and the craftwork were open for inspection. It is proposed to hold such Socials about twice a year, so that the fathers, as well as the mothers, can get an opportunity of consulting the staff and seeing for themselves the opportunities the Education Committee provide, free of all charge, for those children who are not quite so gifted as others in the normal school, but who can, by training and individual care, take their place as citizens in this Borough.

"Scholars who leave are paid friendly visits and, where requested, advice is given by the members of the After-Care Committee, who do their utmost to help.

"Some of the old scholars obtained work immediately they left School, and many of them have retained it in spite of the prevailing wave of unemployment, proving the worth of all that has been expended on them by the generous opportunities afforded them by the Education Committee."

(v) *Stammering Classes.*—The Stammering Classes were continued on Monday and Thursday afternoons at Marsh Street School, under the charge of Mr. Bradfield. The results are summarised as follows:—

	Left.			Remaining.	
	Cured.	Nearly Cured.	Good Progress.	Nearly Cured.	Good Progress.
Boys (23) ..	2	1	2	2	16
Girls (4)	—	2	—	—	2

(vi) *Convalescent Home Treatment.*—211 children were sent away for Convalescent Home Treatment during 1931. Included in this number were 29 sent away in conjunction with the Walthamstow Association of Tuberculosis Care Helpers. There were 97 children remaining in Convalescent Homes and Hospital Schools in December, 1931.

The following were the Homes utilised, the numbers of children recommended being indicated:—Ventnor, 64; Westgate, 29; Hayling Island, 25; Godalming, 20; West Wickham, 15; Kemp Town, 10; Lancing, 11; Seaford, 7; Edgar Lee Home, 5; Hawkenbury, 4; Clivedon, 2; Coldash, 1; Northcourt Hospital, 2; Woodford, 6; Brooklands, 3; Lingfield, 2; Kearsney, Dover, St. Mary's, Taworth Court, Sevenoaks and Cheyne Hospitals, 1 each.

The conditions for which children were sent included the following:—Debility, 63; Heart Disease, 33; Rheumatism, 16; Chest Complaints, 15; Anaemia, 6; Debility following Appendicitis, 5; Malnutrition, 2.

During the course of the year, 6 additional beds, making 16 in all, were obtained at St. Catherine's Home, Ventnor.

The following example demonstrates the value of treatment in Rheumatism:—"J. N. Scarlet Fever in 1930, followed by Rheumatic Pericarditis and Carditis. Admitted to local hospital August, 1930; transferred to West Wickham, January, 1931, and gained over 7 lbs. in 6 months. Seen by Doctor for after-care examination in January, 1932. Heart quite well; attending elementary school."

Perusal of the reports on 113 of the children who have returned from Convalescent Homes during the year showed that only 2 failed to put on weight, and even these cases were reported as having done well or fairly well. The average weight gain of 30 cases who had been at Ventnor, was nearly 8 lbs.; whilst of the 85 children whose weight increase had been recorded amongst the 113, 25 showed increases running into double figures, the maximum being 20 lbs.

Arrangements have now been made for heights and weights to be recorded before and after Convalescent Home Treatment, in order to present next year a fuller report.

In 3 cases, suffering respectively from Bronchitis, Fibrosis and Asthma (*i.e.*, all chest conditions) and treated at the Isle of Wight, relapses were noted after the return home, and, in 2 cases, necessitating a further period of Convalescent Home Treatment.

The following summary of a questionnaire sent to Head Teachers gives further information as to the value of Convalescent Home Treatment:—

"By arrangement with your Director of Education, and with a view to ascertaining whether Convalescent Treatment had made any noticeable and permanent improvement in the health of children sent to Ventnor and other Homes, a series of questions was addressed to Head Teachers on 10th April last.

"The replies from 43 Departments show that, approximately, 281 children from these Departments were sent to Convalescent Homes during the last 3 years.

"Of this number, 263 were noticeably improved, 3 were not so, and no information was available in respect of 15.

"The Head Teachers report that school work was much improved in 11 cases, and improved in 184. In 38 there was no change, and 43 were retarded.

"Brightness and liveliness at play generally increased (173 cases), but were unaltered in 77 cases.

"Improvement in health effected by treatment was maintained in 134 cases; but 21 children showed rapid deterioration, and 109 slow deterioration. The factors which Head Teachers blamed for any deterioration are as follows:—Home Conditions, 16; Overcrowding, 3; Improper Food, etc., 6; Insufficient Sleep, etc., 4; Bad Ventilation, etc., 3.

"Eleven Head Teachers emphasised the necessity for longer periods of treatment if permanent value is to be obtained, but were satisfied that their "long stay" cases had benefited permanently. Other Head Teachers were satisfied that improvement had followed treatment."

It will be realised what an enormous amount of work has resulted for Mr. Longman and his assistant colleagues, and for the Local Branch of the Invalid Children's Aid Association.

18. NURSERY SCHOOL.

The routine Medical Supervision detailed in last year's Report has again been found to work well in practice, and has been continued during 1931.

The School Nurse who supervises this School, has paid 45 special visits to discuss with the parents their reason for withdrawing children from School after their initial enrolment. These visits were paid by the Nurse and not the School Attendance Officer, because attendance at the Nursery School is not obligatory, and because it was thought that the mothers might discuss the real reason for absenteeism more readily with the School Nurse. As far as the results of the visits can be summarised, the chief objection on the part of the parent was to the open-air regime. The validity of this objection can perhaps be evaluated more correctly after consideration of the information following, and of the Head Teacher's observations:—

(*a*) *Incidence of Infectious Disease.*

School Opened, June, 1929.

June—December, 1929 ..	No infectious disease.
1st January—31st March, 1930	Measles, 49 cases.
1st April—31st May, 1930	Chicken-pox, 3; Mumps, 2; Measles, 1; Diphtheria, 1; Scarlet Fever, 1.
1st July—30th September, 1930	Whooping Cough, 8; Scarlet Fever, 2; Measles, 1; Diphtheria, 1.
February, 1931	Scarlet Fever, 1.
March, 1931	Scarlet Fever, 2.
April, 1931	Whooping Cough, 4; Chicken-pox, 2; Diphtheria, 1.
August, 1931	Scarlet Fever, 1.
October 1931	Whooping Cough, 3.
November, 1931	Chicken-pox, 3.
December, 1931	Whooping Cough, 5; Chicken-pox, 3.

The detailed figures have been given to show that, although a particularly susceptible population was at risk, no gross spread of infectious disease occurred, except in the case of Measles, early in 1930. The open-air regime must play a very big part in combating the spread of infectious disease at this School.

In a further endeavour to compare the incidence of infectious disease at the Nursery School (children aged 2—5 years) with that at the Infant Schools (children aged 5—7 years), the following Table has been compiled:—

	Measles.	Whooping Cough.	Mumps.	Chicken Pox.	Scarlet Fever.	Diphtheria.
1930.						
17 Infant Departments: Average Attendance, 5,496	1,457	81	184	426	179	142
Percentage of Infectious Disease	26.5	1.47	3.34	7.75	3.26	2.59
Nursery School: Average Attendance, 116	51	8	2	3	3	2
Percentage of Infectious Disease	43.9	6.89	1.72	2.59	2.59	1.72
1931.						
17 Infant Departments: Average Attendance, 5,285	36	452	196	559	120	75
Percentage of Infectious Disease	0.68	8.55	3.71	10.5	2.27	1.42
Nursery School: Average Attendance, 126	Nil	12	Nil	8	4	1
Percentage of Infectious Disease	Nil	9.52	Nil	6.35	3.18	0.79

The value of the comparison is, of course, diminished by the small numbers involved at the Nursery School; but even so, the experience of 1931 supports the value of the open-air regime, although the more frequent medical inspection, the daily nursing supervision, and the well-balanced diet must also play a considerable part.

Miss Richards, the Head Teacher, in a report stresses the improvement shown in attendance during 1931, viz.:—

Year.	Total of Attendances.	Total Enrolment.	Average Attendance.
1930	33,056	131	71.24
1931	42,413	150 (Maximum Capacity)	90.04

and regards the improvement as demonstrating the greater confidence of the parents and the decreased fear of the open-air conditions. The children became hardier and more acclimatised to open-air conditions, suffered less from colds, exclusions were fewer, and there was less opposition on the part of parents to the remedy of physical defects. The acceptances of Dental Treatment numbered 75 per cent.

During the year, visits have been paid by the Junior Assistants to the adjoining Infant Welfare Centre.

19. SECONDARY SCHOOLS.

The Authority for the provision of Secondary Schools in your Borough is the Essex County Council.

20. CONTINUATION SCHOOLS.

There are no Continuation Schools in the Area.

21. EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

(i) and (ii).—The work of the Juvenile Employment and Welfare Committee is referred to in the following report by Mr. R. Dempsey, the Juvenile Employment Officer:—

"*Unemployment Insurance*.—The year commenced at the Juvenile Employment Bureau with a very black outlook, and the number of young people who received Unemployment Benefit increased steadily during the first quarter of the year. After the first quarter, the numbers receiving Unemployment Benefit gradually decreased. The highest and the lowest weekly figures among those who received Unemployment Benefit at the Bureau during the year were:—

"*Boys*.—116 in March; 43 in December.

"*Girls*.—96 in January; 12 in December.

"In October, the rates of contributions to Unemployment Insurance were increased and the benefits reduced under the National Economy Order, 1931.

"The number of new entrants to Unemployment Insurance at 16 years of age was 2,040.

"The total number of Unemployment Books exchanged at the Bureau during the year was 2,439, compared with 2,482 during the previous year.

"The following statement shows the number of individual payments which were made at the Bureau in respect of Unemployment Insurance during the year, and the total amounts paid:—

Period.	Amount Paid.	Individual Payments.		
		Boys.	Girls.	Total.
	£			
January to March	695	1,141	807	1,948
April to June	463	795	526	1,321
July to September	346	674	268	942
October to December	287	658	183	841
Totals	£1,791	3,268	1,784	5,052

"*Junior Instruction Centres.*—The Junior Instruction Centres, which were formed at the Bureau at the commencement of the year, continued throughout the year very satisfactorily, under the supervision of Mr. M. O'Sullivan and Miss Edith Hatch, B.A. Owing to the improved condition of employment among girls, the Girls' Centre was discontinued in November. The total number of individuals who attended the Centres during the year was 1,198.

"*Registrations for Employment.*—The registrations at the Bureau during the year were:—

	Boys.	Girls.	Total.
Insured Persons (over 16 years) ..	540	429	969
Not Insured (under 16 years) ..	551	560	1,111
And the re-registrations were:—			
Insured Persons	693	416	1,109
Not Insured	550	611	1,161
Total Registrations ..	2,334	2,016	4,350

"*State of Unemployment.*—The following figures, which were extracted on the first Monday of each month, give an indication of the state of unemployment at various periods of the year:—

Date. Week ending—	Number Remaining on the Register. Boys.	Girls.	Total.
5th January	210	166	376
2nd February	183	116	299
2nd March	127	81	208
6th April	136	112	248
4th May	135	92	227
1st June	90	74	164
6th July	129	93	222
3rd August	163	104	267
7th September	143	92	235
5th October	147	74	221
2nd November	122	54	176
7th December	124	51	175

"Employment was found for 582 boys and 522 girls during the year. The number of vacancies reported to the Bureau was some hundreds less than during the previous year. This, of course, was due to the abnormal conditions prevailing during the first part of the year. The factory worker, however, had very little difficulty in obtaining employment up to 16 years of age, and the School Leavers of that category had little occasion to obtain the assistance of the Bureau.

"In the case of Secondary and Central School pupils who would normally expect to obtain openings in commerce, the position of the School Leaver was seriously affected, owing to the general tendency towards the reduction of office staffs which was prevailing throughout London during the year. At one period of the year over 80 per cent. of those registered at the Bureau had specialised in office work, and most of these juveniles were obliged to enter industry, owing to the absence of suitable vacancies in commerce."

(iii) *Employment of Children (Street Trading Byelaws).*—173 children were examined by the Medical Staff under the Employment of Children Byelaws, and all were passed as fit for employment except one.

The proposed alterations in the Byelaws have not yet received the sanction of the Home Office.

22. SPECIAL ENQUIRIES.

By arrangement with the Director of Education, a special questionnaire on Health Education was sent out to all Departments, and a summary of the replies were submitted to your School Management Committee. The summary showed that 55 Departments possessed copies of the Board of Education's Handbook of Suggestions on Health Education, and 42 Departments possessed copies of the Syllabus of Hygiene of Food and Drink. Systematic lessons in Health Education were given in 27 Departments, 14 of which submitted copies of the Syllabus in use.

Three Departments have paid special visits in connection with Health Education.

No instruction in matters of sex appeared to be given, but in 8 Departments the subject was referred to as follows:—By general individual advice, 4; during nature study lessons, 3; during Scripture lessons, 1.

It is felt that systematic health education based on the excellent official publications, should be given in all Departments by means of short but regular lessons.

23. MISCELLANEOUS.

Dental Demonstrations.—The Dental Exhibit provided by the Dental Board of the United Kingdom, was demonstrated to 26 Departments in 16 Schools over a period of 8 school days. A Lady Demonstrator gave simple talks on Dental Hygiene and explained the Exhibit, which consisted of a series of models showing the development and eruption of the teeth, their structure, and the diseases to which they are liable.

The demonstrations were well appreciated, and your Committee have decided to invite the Board to repeat them during 1932.

Medical Examinations.

The following examinations were made during 1931 by the Medical Staff:—

	New Appointments.	Prolonged Sickness.	Others.
Teachers	53	22	12
Cleaners	3	9	—

The total of 99 medical examinations compares with 80 during 1930.

TABLE II.

A.—Return of defects found in course of Medical Inspection in 1931.

Defect or Disease.		Routine Inspections.		Special Inspections.	
		Number of Defects.		Number of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring Treatment.
1		2	3	4	5
Malnutrition		—	—	270	—
Uncleanliness (See Table IV., Group V.)		—	—	—	—
Skin.	Ringworm, Scalp	11	—	25	—
	,, Body	3	—	38	—
	Scabies	—	—	24	—
	Impetigo	7	—	572	—
	Other Diseases (Non-Tuberculous)	33	—	247	—
Eye.	Blepharitis	18	—	60	—
	Conjunctivitis	5	—	66	—
	Keratitis	—	—	—	—
	Corneal Opacities	—	—	—	—
	Defective Vision (excluding Squint)	187	5	267	29
	Squint	34	2	17	2
	Other Conditions	7	—	80	—
Ear.	Defective Hearing	13	2	11	—
	Otitis Media	30	2	143	—
	Other Ear Diseases	3	1	42	—
Nose and Throat.	Enlarged Tonsils only	193	206	125	10
	Adenoids only	9	3	5	—
	Enlarged Tonsils and Adenoids	20	10	47	2
	Other Conditions	37	3	429	—
Enlarged Cervical Glands (Non-Tuberculous)		129	2	23	—
Defective Speech		29	5	5	—
Teeth—Dental Diseases (See Table IV., Group IV.)		1126	—	—	—
Heart and Circulation.	Heart Disease, Organic	17	47	10	—
	,, ,, Functional	24	25	5	—
	Anæmia	75	3	16	—
Lungs.	Bronchitis	175	13	31	—
	Other Non-Tuberculous Diseases	4	—	—	—
Tuberculosis.	Pulmonary, Definite	—	—	—	—
	,, Suspected	—	3	1	—
	Non-Pulmonary Glands	—	—	—	—
	,, Spine	—	—	—	—
	,, Hip	—	—	—	—
	,, Other Bones & Joints	1	—	—	—
	,, Skin	—	—	—	—
	,, Other Forms	—	—	—	—
Nervous System.	Epilepsy	2	—	—	—
	Chorea	—	—	6	—
	Other Conditions	1	—	—	—
Deformities.	Rickets	1	1	—	—
	Spinal Curvature	2	1	—	—
	Other Forms	8	2	9	—
Other Defects and Diseases		133	6	994	—

B.—Number of Individual Children having Defects which required Treatment (Excluding Uncleanliness and Dental Diseases.)

Group.	Number of Children.		Percentage of Children found to require Treatment.
	Inspected.	Found to require Treatment.	
1	2	3	4
Code Groups:—			
Entrants	2663	278	10.4
Intermediates	1456	180	12.3
Leavers	1460	228	15.6
Total (Code Groups)	5579	686	12.2
Other Routine Inspections	686	83	12.09

24. STATISTICAL TABLES.

The Statistical Tables required by the Board of Education follow:—

TABLE I.

Return of Medical Inspections.

A.—Routine Medical Inspections.

Number of Code Group Inspections.				Number of other Routine Inspections.
Entrants.	Intermediates.	Leavers.	Total.	
2663	1456	1460	5579	686

B.—Other Inspections.

Number of Special Inspections.	Number of Re-Inspections.	Total.
4092	21240	25332

TABLE III.

Return of all Exceptional Children in the Area.

			Boys.	Girls.	Totals.
Children suffering from multiple defects			—	1	1
Blind (including partially blind).	(*i*) Suitable for training in a School for the totally blind.	At Certified Schools for the Blind ..	4	8	12
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	1	1
		At no School or Institution	—	—	—
	(*ii*) Suitable for training in a School for the partially blind.	At Certified Schools for the Blind or Partially Blind	27	27	54
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
Deaf (including deaf and dumb and partially deaf).	(*i*) Suitable for training in a School for the totally deaf or deaf and dumb	At Certified Schools for the Deaf ..	5	5	10
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	(*ii*) Suitable for training in a School for the partially deaf.	At Certified Schools for the Deaf or Partially Deaf	4	5	9
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
Mentally Defective.	Feebleminded	At Certified Schools for Mentally Defective Children	34	30	64
		At Public Elementary Schools ..	—	—	—
		At other Institutions	1	—	1
		At no School or Institution	4	9	13
Epileptics.	Suffering from severe epilepsy.	At Certified Schools for Epileptics ..	—	—	—
		At Certified Residential Open-Air Schools	3	1	4
		At Certified Day Open-Air Schools ..	—	—	—
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
		At Physically Defective Centre ..	1	1	2
	Suffering from epilepsy which is not severe.	At Public Elementary Schools ..	—	—	—
		At no School or Institution	—	—	—
Physically Defective.	Active pulmonary tuberculosis (including pleura and intra-thoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	1	1	2
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools ..	—	—	—
		At Public Elementary Schools ..	—	1	1
		At other Institutions	—	—	—
		At no School or Institution	—	—	—

			Boys.	Girls.	Totals.
Physically Defective (continued)	Quiescent or arrested pulmonary tuberculosis (including pleura and intrathoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	1	—	1
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools	4	8	12
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Tuberculosis of the peripheral glands.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	1	—	1
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools	19	19	38
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Abdominal tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	1	1
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools	2	2	4
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Tuberculosis of bones and joints (not including deformities due to old tuberculosis).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	5	2	7
		At Public Elementary Schools	3	3	6
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Tuberculosis of other organs (skin, etc.).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	—	—
		At Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Delicate Children, *i.e.*, all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open-Air School.	At Certified Residential Cripple School	—	—	—
		At Certified Day Cripple Schools	—	—	—
		At Certified Residential Open-Air Schools	38	15	53
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools (Open-Air Classes)	77	75	152
		At other Institutions	4	2	6
		At no School or Institution	8	5	13

			Boys.	Girls.	Total.
Physically Defective (continued).	Crippled Children (other than those with active tuberculous disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Hospital Schools ..	6	4	10
		At Certified Day Cripple Schools ..	24	11	35
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools ..	—	—	—
		At Public Elementary Schools ..	—	—	—
		At other Institutions	1	—	1
		At no School or Institution	—	—	—
	Children with heart disease, *i.e.*, children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public elementary school.	At Certified Hospital Schools ..	4	12	16
		At Certified Residential Cripple School	—	—	—
		At Certified Day Cripple Schools ..	12	7	19
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools ..	—	—	—
		At Public Elementary Schools ..	—	—	—
		At other Institutions	1	—	1
		At no School or Institution	—	1	1

TABLE IV.

Return of defects treated during the year ended 31st December, 1931.

Group I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group V.).

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin—			
Ringworm—Scalp	29	1	30
Ringworm—Body	40	1	41
Scabies	32	—	32
Impetigo	587	2	589
Other skin disease	244	6	250
Minor Eye Defects (external and other, but excluding cases falling in Group II.)	222	3	225
Minor Ear Defects	187	2	189
Miscellaneous (*e.g.*, minor injuries, bruises, sores, chilblains, etc.) ..	874	134	1008
Total	2215	149	2364

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

Defect or Disease.	No. of Defects dealt with.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint) .. .. (Operations for Squint should be recorded separately in the body of the Report.)	345	6	—	351
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ..	46	—	—	46
Total	391	6	—	397

	Under the Authority's Scheme.	Otherwise.
Total number of Children for whom spectacles were prescribed	637	6
Total number of Children who obtained or received spectacles	630	6

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.

Received Operative Treatment.				
Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.	Received other forms of Treatment.	Total number treated.
340	14	354	92	446

Group IV.—Dental Defects.

(1) Number of Children who were:—

(*a*) Inspected by the Dentist:

Routine Age Groups	Aged: 5	2245		
	6	2223		
	7	2482		
	8	2164		
	9	2412		
	10	2655	Total	20125
	11	2726		
	12	1363		
	13	1275		
	14	450		
	15	130		
Specials				4422
			Grand Total	24547

(*b*) Found to require treatment 13874

(*c*) Actually treated 7349

(2) Half-days devoted to:—

Inspection	89	
Treatment	774	
Total		863

(3) Attendances made by children for treatment 7594

(4) Fillings:—

Permanent teeth ..	2026	
Temporary teeth ..	3627	
Total		5653

(5) Extractions:—

Permanent teeth	.. 1922	
Temporary teeth	.. 9247	
Total	.. ..	.. 11169

(6) Administrations of general anaesthetics for extractions 4863

Other operations:—

Permanent teeth	.. 186	
Temporary teeth	.. 483	
Total	.. ..	.. 669

Group V.—Uncleanliness and Verminous Conditions.

i.) Average number of visits per school made during the year by the School Nurses 10

(ii.) Total number of examinations of children in the Schools by School Nurses 117253

(iii.) Number of individual children found unclean 1051

(iv.) Number of children cleansed under arrangements made by the Local Education Authority .. .. —

(v.) Number of cases in which legal proceedings were taken:—

(*a*) Under the Education Act, 1921 .. .. .. —

(*b*) Under School Attendance Byelaws .. .. .. —

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31st DECEMBER, 1931, BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

Total Number of Children Notified .. .. 18.

Analysis of the Above Total.

Diagnosis.	Boys.	Girls.
1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School:—		
(*a*) Idiots	—	2
(*b*) Imbeciles	7	5
(*c*) Others	—	—
(ii) Children unable to be instructed in a Special School without detriment to the interests of other Children:—		
(*a*) Moral Defectives	—	—
(*b*) Others	1	1
2. Feeble-minded Children notified on leaving a Special School on or before attaining the age of 16	2	—
3. Feeble-minded Children notified under Article 3 (*i.e.*, "Special Circumstances" Cases) ..	—	—
NOTE.—No child should be notified under Article 3 until the Board have issued a formal certificate (Form 308M) to the Authority.		
4. Children who, in addition to being Mentally Defective, were Blind or Deaf	—	—
NOTE.—No Blind or Deaf Child should be notified without reference to the Board. See Article 2, Proviso (ii).		
Grand Total	10	8