[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.

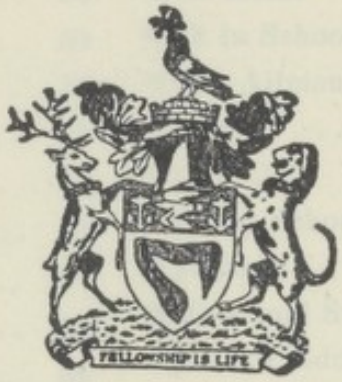
REPORT

of the

School Medical Officer

for the Year

1938



Borough of Walthamstow

EDUCATION COMMITTEE.

REPORT

of the

School Medical Officer

for the Year

1938

CONTENTS.

EDUCATION COMMITTEE.

Chairman:

Alderman Miss E. M. Pracy, B.Sc.

Deputy Chairman:

Alderman A. G. Bottomley.

The Worshipful the Mayor, Alderman Mrs. C. McEntee, J.P.

The Deputy Mayor, Alderman H. Frost, J.P.

The Chairman, Finance Committee, Alderman Ross Wyld.

Ald. G. Gibbons, J.P.
Ald. B. Cole.
Ald. Mrs. M. Norrish.
Ald. W. H. Shaw.
Coun. Mrs. L. P. Bailey.
Coun. S. N. Chaplin.
Coun. A. Eve, J.P. (deceased).
Coun. W. B. Fitt.
Coun. Mrs. E. M. Miller.
Coun. G. S. Mace.
Coun. G. M. Page.

Co-optative Members:

P. Astin, Esq., J.P., C.A.
Mrs. E. M. Hammond.
S. G. Haskins, Esq., E.C.C.
A. J. D. Llewellyn, Esq.
Rev. G. W. M. Laurence.
E. J. Mumford, Esq.
Rt. Rev. Mgr. W. O'Grady, V.G.
Mrs. Sharp.
S. A. Watson, Esq.

Director of Education and Chief Executive Officer:

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

To the Chairman and Members

of the

Walthamstow Education Committee

Ladies and Gentlemen,

I beg to present herewith a report upon the work of the School Medical Department for the year 1938.

The more important matters for comment are the resignation of Dr. A. R. Friel who has acted as your Aural Consultant Surgeon for many years; the inception of the orthoptic scheme; the continued progress of the milk in schools scheme and the extension of the work of medical and dental inspection and treatment with regard to the County Technical and Secondary schools.

Once more I wish to acknowledge the help received from your Committee, the Director of Education, Head Teachers, School Attendance Officers and, of course, the staff of the department.

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 Mansion
Audiometer ..	First & Third Wednesday in each month, 2—4.30 p.m. ..	,, ,,
Minor Ailments..	Monday, 9 a.m.—12 noon	Lloyd Park Mansion and Low Hall Lane.
	Wednesday, 9 a.m.—12 noon	,, ,,
	Friday, 9 a.m.—12 noon	,, ,,
	Saturday, 9 a.m.—12 noon	Lloyd Park Mansion.
Ophthalmic—		
(*a*) Consultant	Second Thursday in each month, 9 a.m.—12 noon	Myope School.
(*b*) Retinoscopy	Tuesday, 9 a.m.—12 noon	Lloyd Park Mansion.
	Thursday, 9 a.m.—12 noon	,, ,,
	Saturday, 9 a.m.—12 noon	,, ,,
Orthopaedic—		
(*a*) Consultant	Third Thursday in each month, 9.30 a.m.—12.30 p.m.	Open Air School.
(*b*) Massage ..	Monday, Tuesday, Wednesday, Friday 1.30—4.30 p.m.	,, ,,
	Thursday, 9.30 a.m.—12.30 p.m.	,, ,,
Orthoptic	Tuesday, Friday 9 a.m.—12 noon	,, ,,
Speech Therapy..	Daily, 9 a.m.—12 noon; 2—4 p.m.	,, ,,
Rheumatism ..	Thursday, 2—4.30 p.m.	Lloyd Park Mansion.
Infectious Disease	Tuesday, 2 p.m. ..	,, ,,
Diphtheria Immunisation	Tuesday, 3 p.m. ..	,, ,,

1. STAFF OF SCHOOL MEDICAL DEPARTMENT.

School Medical Officer and Medical Officer of Health.

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

Assistant School Medical Officers.

D. Broderick, M.B., B.Ch., B.A.O., D.P.H., Barrister-at-Law.
Miss Mary Sheppard, B.A., M.B., B.Ch., B.A.O., D.P.H., Barrister-at-Law.
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. (to 10/1/38).
	F. P. M. Clarke, B.A., B.Sc., L.R.C.S., (Ed.) L.R.C.P., L.R.F.P.S. (Glas.) (from 10/1/38).
Orthopaedic Surgeon	B. Whitchurch Howell, M.B., B.S., F.R.C.S.
Ophthalmic Surgeon	P. McG. Moffatt, M.D., M.R.C.P., F.R.C.S., D.P.H., D.O.M.S.
Physician-in-Charge, Rheumatism Clinic	Wilfrid P. H. Sheldon, M.D., F.R.C.P.

Dental Surgeons.

Mr. L. W. Elmer, L.D.S., R.C.S. (Eng.) (Senior).
Mrs. W. Rosa Thorne, L.D.S., R.F.P.S., D.D.S.
Miss S. M. V. Hathorn, L.D.S., R.C.S. (Eng.) (to 20/5/38).
Miss F. N. Macdonald, L.D.S., R.C.S. (Eng.).
Mr. B. M. A. Gilbert, L.D.S., R.C.S. (Eng.) (from 1/9/38).

Supt. School Nurse.

Miss M. McCabe, S.R.N., H.V.Cert. (1919).

School Nurses and Health Visitors. (Half-time to School Medical Service.)

Miss D. E. Laidler, S.R.N., S.C.M., H.V.Cert.
Miss D. Legg, S.R.N., S.C.M., H.V.Cert.
Mrs. J. Morris, S.R.N. S.C.M. H.V.Cert.
Miss O. North S.R.N. S.C.M. H.V.Cert.
Miss J. M. Palmer, S.R.N., S.C.M., H.V.Cert.
Miss A. Stuart, S.R.N., S.C.M., H.V.Cert.
Miss A. O. Wright, S.R.N., S.C.M., H.V.Cert.
Miss M. A. Young, S.R.N., S.C.M., H.V.Cert.

Dental Nurse and Attendants.

Mrs. F. McWilliam.
Miss P. Parsons.
Miss D. W. Sanford.
Miss N. M. Waterman.

Masseuses.

Miss H. E. Garratt, C.S.M.M.G. (Half-time to 1/4/38, then full-time).
Miss K. B. Taylor, C.S.M.M.G. (Half-time).

Orthoptist.

Miss G. H. Montague Smith (Part-time from 26/8/38).

Clerical Staff. (Also part-time to Public Health duties.)

H. J. Smith (Chief), G. W. West, R. A. C. Green, L. Rushton, A. T. Wade, A. R. Kiggins, G. Bradley.

2. CO-ORDINATION.

Co-ordination is secured by the fact that all the School Medical Staff also carry out duties for other health services, and at the end of the year there were eight half-time School Nurses (who also were half-time Health Visitors).

The school nursing staff is equivalent to five whole-time nurses.

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

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

NUMBER OF SCHOOLS AND ACCOMMODATION.

					Seating Accommodation.			
	Boys.	Girls.	Infts.	Mxd.	Boys.	Girls.	Infts.	Mxd.
Provided	15	15	14	8	5,675	5,552	5,868	3,248
Non-Provided ..	1	2	2	3	208	362	437	929
Special Schools—								
Mentally Defective	—	—	—	1	—	—	—	130
Deaf Centre ..	—	—	—	1	—	—	—	20
Myope Centre ..	—	—	—	1	—	—	—	85
Open Air School..	—	—	—	1	—	—	—	200
Nursery School ..	—	—	—	1	—	—	—	150
Totals ..	16	17	16	16	5,883	5,914	6,305	4,762

	1938.	1937.	1936.	1935.	1934.
Number of Children on Register, Dec. 31st ..	15,980	16,525	17,265	17,845	18,516
Average Attendance ..	14,282.3	14,909.1	15,386.2	16,140.5	16,630.2
Percentage Attendance ..	88.8	88.7	88.3	89.4	88.1
Population	*131,900	,131,900	133,600	134,490	135,090
Percentage of School Children to Population	12.1	12.5	12.9	13.2	13.7

* The 1938 figures not available.

The progressive decline in the percentages specified in the last line will be noted.

School Hygiene.—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.

Mr. Frank H. Heaven, A.R.I.B.A., Architect to the Education Committee, reports as follows:—

Structural Additions and Alterations.—The following works have been carried out during the year, viz.:—

Canteens.—The provision of hot water heaters at three centres.

Demolition.—The removal of disused latrines at Marsh Street Schools Library.

Domestic Subjects Room.—The provision of up-to-date cookers and other fitments to modernise the equipment.

External Repairs.—Prior to painting, the exteriors of six schools or other premises have been extensively repaired.

Floors.—The wood block floors to staff rooms of six schools and of one gymnasium have been re-surfaced and renovated.

Minor Works.—Extensive repairs to roofs, pointing of walls, replacement of plastered ceilings, renovation of floorings and other minor additions and improvements to many of the schools and properties.

Removal of Galleries.—The removal of stepped or sloping galleries in sixty-two classrooms has been carried out at eleven schools, and the floors relaid with jointless or hardwood blocks.

Renovation of Buildings.—Painting to exteriors of two schools, interiors of five schools, part interiors of two schools; interiors of two canteens, one administrative office, all in bright colours; portions of three caretakers' houses, and fitments in Domestic Subjects rooms, together with limewhiting to the out-offices of all the schools in the area.

Staff Lavatories.—The provision of new staff lavatories with hot and cold water supplies at three schools.

Stock Room.—Conversion of an unwanted space into a much needed store at one school.

Heating.—Supplementary heating by overhead electric panels has been added to one school; considerable remodelling of hot water supplies has been carried out at four other schools, and a complete new installation at another. Seven new boilers have been installed at three schools, electric heaters at one caretaker's quarters, and the provision of radiator shields at two schools.

Lighting.—Complete re-wiring and the provision of new electric light fittings at one school; considerable improvements in the lighting at three other schools, and installation of clock controls at another.

Ventilation.—Electric propulsion fans have been fitted into rooms at seven schools where used for lantern or epidiascope work, which necessitates the exclusion of light and closing of windows during such sessions.

Sanitation.—Lavatory basins and sinks (mostly with hot and cold water supplies) have been provided in rooms at eleven schools, and up-to-date bed pan and washing sinks at another, and one sink and a bath at two caretakers' houses. Hot and cold installations have been made to three schools; defective cold water services renewed at two schools, and a gas service at another.

Fitments.—Sundry fitments, as dark blinds to four schools, sun blinds to five schools, hat and coat, pin and picture rails, exhibition panels, shelves and cupboards, repairs to desks and disposal of scrap metal, have been effected at twenty-seven schools or premises.

Stages.—One portable stage, adjustable to various sizes, has been provided for general use, whilst stage beams and/or curtains have been set up at four schools and stage lighting at two others.

Lawns, Shrubberies, Trees, etc.—One new garden with concreted paths has been laid out, but has since been appropriated for an A.R.P. First Aid Post. A lawn has been returfed, water supplies laid on to two school gardens, and trees lopped or felled at four sites, and all planted areas maintained with bulbs, plants, etc., throughout the year.

Five plots of spare land have been levelled up with soil excavated from the site of a new school now in course of erection.

Playfields.—Two areas have been re-sown, a hedge and ditch removed at another, greatly to increase the playing area. One hundred trees planted at one site; repairs and renovations to a spectators' stand and the provision of W.C.'s and wash basins to pavilions at others. Coloured concrete cricket pitches are provided at two centres; new wire mesh fences at three areas; repairs to wood fences and the provision of a mower, roller and other machinery, with housing store, at another.

Playgrounds.—One new playground has been constructed; re-surfacing has been carried out at three, tar-painting at two, and considerable repairs and making good at twenty-two schools, with marking out for organised games at practically every school in the area.

Boundaries and Fences.—Walls have been repaired, wire mesh fences erected and division fences renewed at various properties.

All of which make up the multitudinous activities of a school year.

4. MEDICAL INSPECTION.

The age groups of the children inspected have been those defined under the three code groups of the Board of Education. 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:—

	1938.	1937.
A. Routine Medical Inspections.		
Entrants	1,326	1,685
Second Age Group	1,579	1,649
Third Age Group	1,852	1,749
Total	4,757	5,083
Other Routine Inspections ..	315	209
Grand Total ..	5,072	5,382
B. Other Inspections.		
Special Inspections	4,568	4,410
Re-inspections	30,160	30,714

5. REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

(*a*) **Nutrition.**—The statistical returns relating to nutritional findings at medical inspection are given below in the form required by the Board's Administrative Memorandum issued on the 31st December, 1934.

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Age Groups.	No. of Children Inspected.	"A" Excellent. No.	%	"B" Normal. No.	%	"C" Slightly Subnormal. No.	%	"D" Bad. No.	%
Entrants ..	1,326	439	33.1	780	58.8	107	8.0	—	—
2nd Age Group	1,579	540	34.1	932	59.0	107	6.8	—	—
3rd Age Group	1,852	786	42.4	993	53.6	73	3.9	—	—
Other Routine Inspections..	315	113	35.8	179	56.8	23	7.3	—	—
Total ..	5,072	1,878	37.0	2,884	56.8	310	6.1	—	—

The findings may be shown comparatively as follows:—

		A and B.	C.	D.
1938.	Walthamstow	93.8	6.1	—
1937.	Walthamstow	89.5	10.2	0.1
1937.	England and Wales ..	88.8	10.6	0.6

Dr. Broderick reports:—"During the past year the nutrition of the school children in the area has continued to improve. a noticeable feature being the diminished number in the slightly subnormal group "C."

"At the various inspections and clinics special attention is given to debilitated and under-nourished children.

"The milk in schools scheme aided, when necessary, with free dinners and tonics containing the appropriate vitamins bring about an improvement in height and weight and general physique and well-being. The physical training, open-air school and convalescent home treatment have, too, played their part.

"Talks on the necessity of well-balanced diets are constantly given. The importance of fresh air and personal hygiene is also stressed.

"In addition, the various specialist clinics have done much to improve and maintain the health of physically defective children.

"The 'Contact' clinic controls the spread of debilitating infectious diseases, and the immunising scheme against diphtheria has greatly reduced its incidence.

"Better housing, the care of the pre-school child at the Welfare Centre and Nursery School tend to bring a healthier pupil into the 'Entrants' group.

"Bearing in mind the excellent facilities available, there is every reason to assume a further improvement in nutrition."

Dr. M. Clarke reports:—"It is gratifying to be able to state with assurance that the improvement in the nutrition and general health of our school children, noted in the School Medical Officer's report for 1937, has been well maintained during the past year.

"In my opinion this is in large measure due to the increased consumption of milk, the excellent dinners provided at the Nursery School, Special Schools and Canteens, the Open Air School, the more intelligent interest taken by the parents in what constitutes a rational diet for the growing child, and, lastly and a factor of the greatest importance, the increased time and attention given to physical training in the schools.

"The Open Air School in particular has enabled us to give many children suffering from ill-defined failure of health a chance of making a good recovery with the minimum of interference with their education.

"We encourage the parents to adopt a sensible régime for the child which will enable him to keep fit, and the paramount importance of a well-balanced diet, fresh air in abundance, exercise (preferably in the open air) and adequate rest and sleep is constantly stressed, and the meals provided at the Open Air School, Nursery School and Canteens conform to our best knowledge of dietetics.

"Faulty diet is, I am convinced, at the root of most cases of avoidable ill-health, and to combat this we endeavour to spread reliable information at medical inspections, clinics, etc., on the value of the various foodstuffs from a nutritional point of view, and the close dependence of bodily health on the food we eat.

"A mother with little or no knowledge of practical dietetics will continue to spend her money uneconomically on foods such as fish pastes, sauces, pickles and fancy cakes, which are relatively expensive but of little real nutritional value.

"We constantly stress the importance of giving children foods which contain an abundance of vitamins A and D, as these important accessory food factors are both essential for normal growth—the vitamin A affording good protection against certain infections, and the vitamin D ensuring the formation of sound teeth and bones. One of the cheapest of the first-class body-building foods containing both these vitamins is the herring, and in addition to its high protein or muscle-building content and the vitamins A and D, it contains fat, which is an important source of heat and energy. This most valuable and cheap fish is far too much neglected.

"Parents are also constantly advised as to the importance of green vegetables and uncooked vegetables, such as grated raw carrot, tomatoes, lettuce and celery, and the advisability of cooking the potato in its skin and so conserving its salts.

"All these vegetables furnish valuable mineral salts and vitamins. The parents are advised to give at least two vegetables daily to the children, and in addition fresh fruit daily when possible.

"When for any reason the income is totally inadequate to supply a sufficiency of these important foods, the provision of two-thirds of a pint of milk daily at school, either free or at a reduced cost, helps considerably to safeguard the child's health. In addition to this milk which is taken at the schools, cod liver oil or cod liver oil and malt can be obtained through the school clinics where this is recommended by the medical staff on medical grounds, and we find that this additional provision has been of the greatest benefit to those children who have been considered to be in need of it.

"I should like to express my grateful appreciation of the willing and unfailing co-operation of the head teachers and their

staff in the good work of health propaganda which we endeavour to carry on in the schools."

Nutritional Surveys.—These surveys were carried out after the medical inspection of each school along the lines detailed in the 1936 report.

The classification of the children singled out at these surveys from the whole of the scholars at each school inspected for more detailed examination was as follows:—

A.	B.	C.	D.
30	273	255	4

(*b*) **Uncleanliness.**—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:—

	1938.	1937.
Average number of visits to Schools ..	4	5
Total examinations	42,886	49,615
Number of individual children found unclean	1,285	1,680
Percentage uncleanliness of average attendances	8.9	11.2

Cases of chronic uncleanliness are followed up in the home.

(*c*) **Minor Ailments and Skin Defects.**—The following is the number of skin diseases found during the year:—

	1938.	1937.
Ringworm—Head	9	5
Body	31	28
Scabies	54	31
Impetigo	160	202
Other skin diseases	285	318
Totals	539	584

(*d*) **Visual Defects and External Eye Diseases.**—The number of patients requiring treatment and observation was as follows:—

	1938.		1937.	
	Treatment.	Observation.	Treatment.	Observation.
Visual Defects	309	19	374	32
Squint	47	10	48	4
External Eye Disease ..	479	—	384	2

(*e*) **Nose and Throat Defects.**—The number of patients requiring treatment and observation was as follows:—

	1938.		1937.	
	Treatment.	Observation.	Treatment.	Observation.
Chronic Tonsillitis only ..	152	260	132	213
Adenoids only	5	16	7	7
Chronic Tonsillitis and Adenoids	8	16	13	7
Other conditions ..	307	2	217	—

The 307 cases of other conditions are made up of sore throats and defects requiring diastello treatment.

(*f*) **Ear Disease and Defective Hearing.**—Patients requiring treatment:—

	1938.	1937.
Defective Hearing	113	31
Otitis Media	242	153
Other Ear Disease	94	51

(*g*) **Dental Defects.**—

	Inspection.	Requiring treatment.	Per Cent.	Actually treated.	Fillings.	Extractions.	Gas Anaesthetic.	Other Operations.
1938 ..	11,245	9,209	81.8	5,842	5,974	10,608	4,723	2,162
1937 ..	10,952	9,145	83.5	6,176	5,953	8,559	3,868	2,799

Reference to dental inspection and treatment at Secondary and Technical Schools is made in Section 16.

(*h*) **Orthopaedic and Postural Defects.**—A total of 80 deformities was found to require treatment. Nearly every cripple is being discovered under the Maternity and Child Welfare Scheme, and is receiving treatment either under your Authority's scheme; at one of the Metropolitan Hospitals; or from the family doctor.

(*i*) **Heart Disease and Rheumatism.**—The findings were as follows:—

	1938.		1937.	
	Requiring Treatment.	Observation.	Requiring Treatment.	Observation.
Heart Disease—Organic ..	45	7	36	9
Functional ..	13	13	35	16
Anaemia	59	4	61	—
Total	117	24	132	25

(*j*) **Tuberculosis.**—As in former years, all children suspected either of pulmonary or glandular tuberculosis are referred to the Tuberculosis Officer for final diagnosis, and are not included in the findings of medical inspections.

(*k*) **Other Defects and Diseases.**—The following table shows the numbers of various other defects which were found:—

	1938.		1937.	
	Requiring Treatment.	Observation.	Requiring Treatment.	Observation.
Enlarged Glands ..	133	—	128	2
Defective Speech ..	36	11	50	12
Bronchitis	79	13	125	20
Epilepsy	5	1	9	2
Chorea	5	4	12	3
Other Defects	2,100	28	1,751	34

6. FOLLOWING UP.

The school nurses paid a total of 4,547 home visits during 1938. The visits are classified below:—

External Eye Diseases	99	Mumps	277
Measles	1,603	Whooping Cough ..	247
Tonsils and Adenoids	163	Uncleanliness ..	247
Chicken Pox	579	Impetigo and Sores ..	185
Vision	283	Dental Failures ..	33
Otorrhoea	182	Ringworm	5
Sore Throat	93	Scabies	60
Erysipelas	1	Deafness	73
Various	416	Scarlet Fever ..	1

As in previous years, the school nurses attend at all medical inspections and staff the various clinics, *e.g.*, aural, minor ailments, ophthalmic and rheumatism clinics, and also carry out cleanliness surveys. Close co-operation was maintained with the almoners of various metropolitan hospitals, and written reports were given when necessary.

7. ARRANGEMENTS FOR TREATMENT.

(*a*) **Nutrition.**—Treatment of nutritional defects is by means of appropriate advice or by a recommendation for milk or midday meals made at medical inspection, re-inspection and at nutritional

surveys. The more severe cases are dealt with by reference to the open air school or to a convalescent home. Various tonics are supplied on medical grounds for children attending the school clinics. The cost is wholly or partially remitted if the family income is below the scale laid down.

The following quantities of the tonics stated were supplied during 1938:—

Cod Liver Oil.	Parrish's Food.	Syrup Lacto Phosphate.	Cod Liver Oil and Malt.	Cod Liver Oil and Parrish's Food.
19½lbs.	161½lbs.	43½lbs.	597lbs.	1,224lbs.

(*b*) **Uncleanliness.**—Treatment is given at the school clinic in cases of chronic uncleanliness. Cleansing facilities are provided at the Low Hall Lane clinic.

(*c*) **Minor Ailments and Diseases of the Skin.**—The treatment of minor ailments is carried out at the seven sessions of the school clinics, all of which are in charge of a medical officer. The number of cases of skin disease treated is shown in the table detailing the work done at the school clinics.

Children suffering from ringworm of the scalp which does not readily respond to local treatment are referred for X-ray treatment to the Queen's Hospital for Children.

During 1938, three patients were referred. The numbers referred during the previous 5 years were: 1937, 1; 1936, 6; 1935, 6; 1934, 11; 1933, 4.

The patient is seen at the first visit by the physician in charge of the skin department. After confirmation of the diagnosis, X-ray treatment is given. Subsequent visits are paid as and when necessary.

Cases of scabies not responding to treatment are referred to the Public Assistance Service for in-patient treatment.

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

The work done at the school clinics is shown in the table given below:—

	Number Excluded under Art. 20B.		Number not Excluded.		Re-inspections.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Ringworm	23	6	1	3	86	37
Scabies	9	45	—	—	99	303
Rheumatism	10	9	82	91	241	306
Impetigo, Sores, etc. ..	79	112	208	107	1,131	704
Skin	28	18	53	51	251	251
Verminous Head, etc. ..	1	93	49	148	36	540
Sore Throat	85	98	7	6	127	138
Discharging Ears and Deafness	4	8	165	168	654	559
Defective Vision ..	—	—	44	64	—	8
External Eye Disease ..	60	62	135	110	643	551
Tonsils and Adenoids ..	—	—	12	19	—	2
Mumps	2	9	—	—	3	4
Various	242	253	874	686	3,272	2,678
Totals	543	713	1,630	1,453	6,543	6,081

First attendances numbered 4,339 against 4,156 in 1937, and re-attendances 12,624 against 11,834, the total attendances being 16,963 against 15,990.

The attendances at Lloyd Park and Markhouse Road Clinics are summarised below:—

	First Inspections.				Re-inspections.		Total.		Grand Total.
	Excluded.		Not Excluded.						
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
Lloyd Park	272	414	1004	860	4316	3877	5592	5151	10743
Markhouse Road ..	271	299	626	593	2227	2204	3124	3096	6220
Total ..	543	713	1630	1453	6543	6081	8716	8247	16963

(*d*) **Visual Defects and External Eye Diseases.**—Treatment for the latter is given at the school clinics (see Table IV, Group 1, at the end of the report).

The medical treatment facilities provided by your Authority for defects of vision, etc., consist of (A) a Myope School staffed on the medical side by Dr. Moffatt (part-time Consultant Ophthalmic

Surgeon), who attends once a month, and Dr. Sheppard; (B) three weekly refraction clinics under the care of Dr. Sheppard, who refers special or difficult cases to the consultant clinic; and (C) two weekly orthoptic sessions for cases of squint.

All defects of vision referred to the eye clinic 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 1938:—

"There were 2,566 attendances at the Eye Clinic during 1938. 490 of these were submitted to retinoscopy, 403 being new cases.

"The following table shows the defects found in the new cases seen:—

Defect.	Under 7 years.		7–11 years.		Over 11 years.		Secondary Schools.		Total	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Hypermetropia ..	24	21	20	17	6	13	—	—	50	51
Hypermetropic Astigmatism	7	6	12	20	12	17	—	2	31	45
Myopic Astigmatism	—	2	6	2	5	8	3	—	14	12
Mixed Astigmatism	—	3	2	2	5	12	2	—	9	17
Myopia	1	2	14	17	38	30	16	17	69	66
Various	—	6	5	10	5	11	1	1	11	28
Totals ..	32	40	59	68	71	91	22	20	184	219

"The details of the group described as various are as follows:—

Defects.	Boys.	Girls.
Mubomian Cyst	—	1
Headaches, anaemia, styes, debility, etc. ..	5	18
Blocked duct	—	2
Torticollis	—	1
Photophobia in bright light	—	2
Habit Spasm	1	3
Corneal scars..	1	1
Conjunctivitis	2	—
Injury	1	—
Pigmented macula	1	—
Totals	11	28

"The types of squints seen and treated are given in the next table:—

		Under 7 years.		7–11 years.		Over 11 years.		Total.
		Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
Internal—	R. ..	5	8	3	3	1	1	21
	L. ..	9	7	4	5	1	2	28
External—	R. ..	—	1	—	—	1	—	2
	L. ..	1	—	—	—	—	—	1
Alternating ..	..	3	7	6	4	2	2	24
Occasional—	R. ..	—	2	1	—	—	—	3
	L. ..	3	—	1	—	1	1	6
Totals ..	..	21	25	15	12	6	6	85

"An Orthoptic clinic was started during the year, and the work to date has been very satisfactory. A full statement will be found later in the report.

"Of the 403 children I examined during the year 1938, I found 60 per cent. of the 11 plus group suffering from Myopic defects. These defects had not appeared when these children were examined in the 7-11 group, which examination usually takes place about the child's eighth birthday. It is my opinion that these defects were present but were latent and only showed when the children were subjected to the more strenuous work of the Junior School. Since there is usually no routine medical examination between the ages of 8 and 12, the children suffering from these defects are, therefore, not discovered. I would suggest a special examination for visual acuity only to be given during these years.

"This opinion appears to be supported by observation regarding visual defects in the 'Health of the School Child' for 1937.

"Five children were admitted to the Blind and Myope School during the year—3 boys and 2 girls."

Orthoptic Clinic.—The following report on the work of this clinic has been given by Miss G. H. Montague Smith, the Orthoptist:

"The clinic was opened on Friday, August 26th, and has since been held for two-hour sessions twice weekly. The first few weeks were occupied in testing all cases seen specially for orthoptic training, and the figures given below show how they have been classified. When the patient first attends the clinic, any existing amblyopia must first be corrected, and when vision is equal exercises may commence on the special instruments devised for curing the defect.

"The patient is shown two different pictures, one for each eye, *e.g.*, a lion is seen by the right eye and a cage by the left eye, and is taught to use both eyes simultaneously and thus see one complete picture of the lion inside the cage. Fusion must then be developed by means of two similar pictures, such as mickey mouse with a hammer and mickey mouse without a hammer but with a nail to hit.

"When the patient has learnt to superimpose, the complete picture of mickey mouse with the hammer and nail is perceived. Stereoscopic pictures are then substituted for fusion slides, and the eyes are gradually exercised towards normality until the muscles are sufficiently strengthened for parallelism to be maintained.

"Treatment lasts for 20-30 minutes twice weekly, and the course may take anything from three months to two years to complete, according to the type of squint.

Total number of cases seen during 1938 ..	37
Unsuitable for treatment	3
Waiting list	19
Amblyopias (all have shown improvement) ..	9
Cases treated (of which two have been cured) ..	6
Total attendances	189
Number of clinics	34"

(*e*) **Nose and Throat Defects.**—The scheme for treatment remained the same as detailed in previous reports. All operations for the removal of tonsils and adenoids were carried out at the Connaught Hospital at a fee of £2, which includes a stay of one night in hospital before and after the operation.

The following table shows the number of cases treated:—

Year.	At Connaught Hospital.	Privately.	Total.
1938	110	2	112
1937	103	3	106

(*f*) **Ear Disease and Defective Hearing.**—(i) *Mastoid Disease.*—One boy was referred to the Prince of Wales's General Hospital, Tottenham, for mastoid operation under your Committee's scheme.

(ii) *Ear Disease.*—Minor defects under this heading are treated at the minor ailments clinic, the numbers treated being given in the table relating to the work of these clinics.

Audiometer Testing.—The use of the Cowan picture frame in conjunction with the audiometer was continued. This procedure enables infants to be tested as soon as possible after entrance to

school. The picture frames are so attractive that the tests are easily carried out as a game. A weekly testing session was held in the schools, and of 1,848 examined, 78 (or 4.2 per cent.) children showing a hearing loss of 9 units or over were referred to the fortnightly clinic held by Dr. Francis Clarke.

Eighty-five new cases attended these clinics, making a total of 313 attendances. Eighteen sessions were held, 17.4 cases per session being seen.

Ear Clinic.—Dr. Francis Clarke reports as follows:—"The aural clinic has been conducted along similar lines as regards organisation and treatment to those followed by Dr. A. R. Friel for a number of years. The results of his special treatment of chronic otorrhoea with zinc ionisation have been remarkably successful and explains the comparatively small percentage of chronic otitis media met with amongst the school population.

"The number of children who attended the clinic during the year and the results of the treatment have been very satisfactory.

"In Walthamstow the children and parents attend the clinic very well. The parents, on the whole, are interested in having their children treated and are glad to take advantage of the services provided by the Committee. The administrative side make frequent scrutiny of any absentees and they are written to for new appointments, and the nursing staff also visit any of these cases when required.

"The inclusion of infants and pre-school children in the aural scheme for treatment is a great advance. A large proportion of such defects as otitis media, deafness, impaired hearing, nasal catarrh, mouth breathing, diseased tonsils and adenoids, found in school children and adults have had their origin during pre-school life.

"They usually begin as a sequel to such diseases as measles, scarlet fever, pneumonia, which are common in young children. This is especially true of otitis media. The anatomical structure of the ear apparatus in very young children renders it easily liable to any infection from the nose or throat.

"In many instances the early signs are slight and do not receive sufficient attention; they are often neglected or treatment is imperfectly carried out, with the result that when the child reaches school age the condition has reached a chronic stage and slowly progresses to a permanent defect. Hence the great importance of detecting and correctly treating these ailments in their early stage.

"Infants and pre-school children are now treated at the clinic for both aural and nasal conditions.

"Amongst the special treatments adopted at the clinic, Friel's Zinc Ionisation method is the standard one used for practically all cases of chronic and some cases of acute otorrhoea. The results are excellent and lasting. It saves time and relieves the patient of the necessity of frequent visits to the clinic and also of having to carry out any treatment himself.

"Diastolisation, the new French method of treatment for nasal catarrh, rhinitis, nasal obstruction, impaired nasal respiration, etc., has been used with success in a very large number of cases suffering from these conditions. It is also used for similar complaints when they form a complication of chronic otitis media, as a collateral treatment to zinc ionisation for the ear. The importance of treating existing nasal defects in these circumstances is to be emphasised.

"Diastolisation is a most useful form of treatment when its principles and technique are understood and correctly carried out.

"During the year, the Committee provided a new Proetz 'Displacement' Apparatus for the diagnosis and treatment of nasal sinus suppuration. This is an important acquisition to the clinic. The presence of nasal sinus disease in children is much more frequent than was formerly believed and is frequently the precursor and cause of the chronicity in such conditions as nasal catarrh, diseased tonsils and adenoids and impaired general health.

"The principle of the method consists in emptying the nasal sinuses under negative pressure and filling with Ephedrine solution. This relieves the delicate lining mucosa of the constant irritation of the septic discharge and allows it to recover. A number of cases were treated by 'Displacement' during the year with very gratifying results.

"The subject of tonsils and adenoids operation has received careful attention. Too often this operation has been performed, quite unnecessarily, with no appreciable benefit to the patients.

"The School Medical Officer desires that a conservative attitude should be adopted towards the removal of tonsils and adenoids amongst school children generally. In this decision he is supported by the highest authorities, and the number of children now referred for operation is reduced to the minimum. There have been no disadvantages from this decision.

"A careful examination is made of the 'history and pathological' condition of the throat and nose of each case before it is advised operation. 'Enlargement' alone is not taken as an indication for removal. There must be a definite pathological condition present which affects the patient's health and is not likely to yield to conservative treatment.

"Towards the end of the year a small number of tonsils were treated by Peters' new method of tonsil 'Suction,' as alternative to operation. The number treated was too small for us to make a full report, but these few cases showed very promising results. This year we hope to treat a number of cases with this method and in a future report to give a full account of our experience of its results.

"Other conservative means such as special tonsil 'paint,' mild cautery, etc., have been used with the necessary attention to associated nasal factors.

"The Audiometer, which has been in use for some years in Walthamstow, has been regularly employed in a periodical Hearing Test Survey of the school children, and any 'failures' are referred to the Aural Clinic for examination and treatment.

"This early detection of any hearing defects is most important. The audiometer has also been a great advantage in testing accurately the rate of progress of these children under treatment for impaired hearing.

"During the year, periodical special visits were made by the Aural Surgeon to the School for the Deaf. Each child has been examined at each visit and records made of his condition. Those who required special treatment were referred to the aural clinic. There is a multitone electrical hearing aids equipment installed at the school. These aids greatly facilitate the work of the teacher and are a great benefit to a number of the deaf children.

"One point in connection with the hearing test of the children at the Deaf Centre. It is very desirable that a Pure Tone Audiometer Test and Audiogram be made of each child's hearing loss. It is very important in the correct setting of the Electrical Aids to the requirements of each particular case. It also determines accurately the nature and situation of the hearing loss.

"There are too few children to warrant the purchase of this expensive apparatus (about £100), but it is possible that arrangements may be made for the loan of an Audiometer to have these children tested.

"A great advance by Walthamstow, one of the few places where this service is available, is the provision made by the Committee for the supply of special tonics, drugs, etc., to children attending the clinic.

"In order that patients should derive the maximum benefit from any physical treatment, it is highly desirable that their general bodily health and resistance should be good. The presence of any infections or toxic absorption puts a big strain on nature's resistance, so that it is essential that the natural defensive mechanism be adequately maintained.

"The tonics chiefly employed are pure cod liver oil (or oil and malt), calcium, either as the gluconate or lacto-phosphate syrup. These supply the essential vitamin content and maintain the necessary correct metabolic balance.

"These tonics are supplied at cost price or less, according to the Committee's scale of necessity. In some cases they may be supplied free of charge.

"A considerable amount of these tonics has been given during the year.

"*Classification*.—A special classification Table of Returns of all cases attending the clinic during the year is appended.

"A word of explanation is necessary with reference to this Table. We have thought it desirable to make a full detailed classification of all cases, not only the total number ot main defects treated and results, but any complications (one or more in any one case), the nature of the treatments (single or combined) of the main defect and its complications, any previous operations such as tonsils and adenoids removal, mastoidectomy and operations performed or advised as part of the clinic treatment, together with detailed results in the various groups, without any overlapping of cases.

"The pre-school children, infants and school children are classified separately."

The classification table shows:—

"A."—Acute and chronic ear defects in infants and pre-school children, with their treatment and results.

"B."—Chronic ear conditions and their complications, with treatment and results, in school children.

"C."—Nose and throat defects in pre-school and school children, with treatment and results.

"D."—Miscellaneous cases.

1. The tables are comprehensive in their record of the various types of cases and defects, their treatment and results.
2. They are easy to understand.
3. They form a simple, reliable system of making annual returns, provided a systematic method of clinical record of each case is kept at the clinic.
4. A general adoption of such a system of classification and tabulation by various bodies dealing with large numbers of children with similar ailments would be a great advantage in a study of the relative incidence, treatment and result of the conditions throughout the country.

EXPLANATORY NOTES ON CLASSIFICATION TABLES.

Tables A and B.

"Treatment."

Column D. ("Antiseptic Treatment").—Drugs used:—Carbolised Glycerine with Menthol; Grieswold's Aniline Dye Mixture; 1% solution of Acriflavine in spirit; Boric-Iodine powder.

Column E ("T./A. Conservative, Nasal").—Mandl's Iodine paint; Wells' Iodine-Aether-Glycerine paint; Peter's Tonsil Suction; Gautier's Diastolisation; Wells' Iodine Vapour Inhalation.

Column F ("T./A. Operation").—Those cases where operation was advised at clinic and operation performed during the year; or still awaiting operation on 31st December, 1938.

"Result."

Column I.—"Still under treatment or observation." This column refers to (*a*) children who attended the clinic towards the end of the year and were not discharged before 31st December, 1938, and "Observation"—children who were discharged but who return periodically for observation, as to permanency of result.

Column J.—"Left"—children who left school or district before completion of treatment. "Lapsed"—children who failed to attend as required.

Column K ("Referred to Hospital").—Operations usually required:—Mastoidectomy; Sinus operations.

Table C.

"Secondary Conditions."

These defects are in respect of the same children as those under "primary" defect, with the added secondary complication.

Column H ("Antiseptic Treatment").—Peter's Nasal paint. Spray or pack nasal cavity with Grieswold's Aniline Dye Mixture or Collosol Argentum.

Column I ("Proetz Displacement").—Method employed in Nasal Sinus Suppuration cases—emptying sinus under negative pressure and filling with Ephedrine solution.

"Nasal Obstruction."

Chiefly due to deflected septum; irregular formation; hypertrophied turbinates.

TABLE A.

ACUTE OTITIS MEDIA.

(I) CHILDREN OVER 5.

Diagnosis.	Totals.	Tonsils and Adenoids.		Treatment.				Result.					
				Zinc Ionisation.	Antiseptic Treatment.	Tonsils and Adenoids Conservative: Nasal: Diastolisation.	Tonsils and Adenoids Operation.	Cured.	Improved.	Still under Treatment or Observation.	Left or Treatment Lapsed.	Referred to Hospital for Operation.	Declined Treatment.
	A	B		C	D	E	F	G	H	I	J	K	L
Acute Non-Suppurative Otitis Media ..	19	6	Operation before Clinic	—	4	—	—	6	—	—	—	—	—
		13	No Operation	—	7	—	—	13	—	—	—	—	—
Acute Non-Suppurative Otitis Media with Nasal Conditions: Enlarged Tonsils and Adenoids	6	1	Operation before Clinic	—	1	—	—	1	—	—	—	—	—
		5	No Operation	—	4	3	1	2	—	1	2	—	—
Acute Suppurative Otitis Media	44 *(5)	9	Operation before Clinic	—	9	—	—	8	—	1	—	—	—
		35	No Operation	2	33	—	—	25	—	4	6	—	—
Acute Suppurative Otitis Media with Nasal Conditions: Enlarged Tonsils and Adenoids	23		Operation before Clinic	—	—	—	—	—	—	—	—	—	—
		23	No Operation	2	21	12	6	14	—	3	5	1	—
Totals	92			4	79	15	7	69	—	9	13	1	—

(II) CHILDREN UNDER 5.

	A	B		C	D	E	F	G	H	I	J	K	L
Acute Non-Suppurative Otitis Media ..	3		Operation before Clinic	—	—	—	—	—	—	—	—	—	—
		3	No Operation	—	3	—	—	2	—	—	1	—	—
Acute Suppurative Otitis Media	13 *(2)	1	Operation before Clinic	—	1	—	—	1	—	—	—	—	—
		12	No Operation	—	12	—	—	11	—	—	1	—	—
Acute Suppurative Otitis Media with Nasal Conditions: Enlarged Tonsils and Adenoids	1		Operation before Clinic	—	—	—	—	—	—	—	—	—	—
		1	No Operation	—	1	—	—	—	—	1	—	—	—
Totals	17			—	17	—	—	14	—	1	2	—	—

* The figures in brackets indicate the number of cases with Bi-lateral Otorrhoea.

TABLE B.

CHRONIC SUPPURATIVE OTITIS MEDIA.

(Children over 5.) Chronic Tympanic Sepsis Complicated by:—		Totals.	Chronic Tympanic Sepsis Complicated by:—						Tonsils and Adenoids.	Treatment.				Result.					
			Granulations: Simple Polypii.	Mastoid Disease.		Enlarged Tonsils and Adenoids.	Nasal Catarrh: Rhinitis; Sinusitis.	External Otitis: Eczema.		Primary (Ear)		Collateral (Nose and Throat)		Cured.	Improved.	Still under Treatment or Observation.	Left or Lapsed Treatment.	Referred to Hospital for Operation.	Declined Treatment.
				Old Operation.	No Operation.					Zinc Ionisation.	Antiseptic Treatment or Cautery.	Tonsils and Adenoids Conservative: Nasal: Diastolisation.	Tonsils and Adenoids Operation.						
			A	B		C	D	E		F	G	H	I	J	K	L	M	N	O
A	Granulations: Simple Polypii	10 *(1)	2	—	—	—	—	—	Operation before Clinic	2	2	—	—	2	—	—	—	—	—
			6	—	1	—	1	—	No Operation	6	4	—	1	3	—	4	1	—	—
B	Mastoid Disease	19	—	8	1	—	1	—	Operation before Clinic	6	9	1	—	3	1	5	1	—	—
			—	9	—	—	—	—	No Operation	4	6	—	—	3	—	1	3	1	1
C	Enlarged Tonsils and Adenoids	12 *(3)	—	—	—	—	—	—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—
			—	—	—	12	—	—	No Operation	8	4	—	5	9	—	2	1	—	—
D	Nasal Catarrh: Rhinitis or Sinusitis ..	13 *(5)	—	3	—	—	7	—	Operation before Clinic	6	2	7	—	7	1	1	—	1	—
			—	—	—	—	3	—	No Operation	2	1	3	—	2	—	1	—	—	—
E	External Otitis: Eczema	2	—	—	—	—	—	2	Operation before Clinic	2	—	—	—	2	—	—	—	—	—
			—	—	—	—	—	—	No Operation	—	—	—	—	—	—	—	—	—	—
	Totals	56	8	20	2	12	12	2		36	28	11	6	31	2	14	6	2	1
Chronic Suppurative Otitis Media solely ..		48	Children over 5 years ..					14	Operation before Clinic	8	6	—	—	13	—	1	—	—	—
								34	No Operation	30	4	—	—	27	—	5	2	—	—
Chronic Suppurative Otitis Media solely ..		3	Children under 5 years ..					—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—
								3	No Operation	—	3	—	—	2	—	—	1	—	—
Chronic Suppurative Otitis Media with Nasal Conditions: Tonsils and Adenoids		—	Children under 5 years ..					—	Operation before Clinic	—	—	—	—	—	—	—	—	—	—
								—	No Operation	—	—	—	—	—	—	—	—	—	—
Grand Totals		107								74	41	11	6	73	2	20	9	2	1

* The figures in brackets indicate the number of cases with Bi-lateral Otorrhoea, with the exception of Mastoid Disease: see below:—
Mastoid Disease—Bi-lateral Otorrhoea.

(*a*) Post-Operation .. .. 4 (*b*) No Operation 1

TABLE C.

NOSE AND THROAT CONDITIONS.

(I) CHILDREN OVER 5.

Diagnosis. Primary.	Total.	Tonsils and Adenoids.		Secondary Conditions.			Treatment.					Result.					
				Deafness.	Nasal Catarrh.	Enlarged Tonsils and Adenoids.	Diastolisation.	Antiseptic Treatment.	Displacement.	Tonsils and Adenoids. Conservative Treatment.	Tonsils and Adenoids. Operative Treatment.	Cured.	Improved.	Still under Treatment or Observation.	Left or Treatment not completed.	Referred to Hospital for Operation.	Declined Treatment.
A	B	C		D	E	F	G	H	I	J	K	L	M	N	O	P	Q
Sinusitis: Rhinitis	8	Operation before Clinic	5	—	—	—	4	1	2	4	—	1	2	1	—	1	—
		No Operation	3	—	—	—	2	3	2	2	—	—	1	2	—	—	—
Nasal Obstruction	11	Operation before Clinic	5	—	—	—	3	—	4	2	—	1	2	—	2	—	—
		No Operation	6	—	—	—	5	—	4	—	1	1	2	1	2	—	—
Nasal Catarrh	79	Operation before Clinic	24	13	—	—	21	1	6	3	—	8	3	8	5	—	—
		No Operation	55	37	—	—	29	1	11	2	5	21	4	12	18	—	—
Enlarged Tonsils and Adenoids	26	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		No Operation	26	13	—	—	9	—	—	12	11	4	—	8	13	—	1
Totals	124		124	63	—	—	73	6	29	25	17	36	14	32	40	1	1

(II) CHILDREN UNDER 5.

A	B	C		D	E	F	G	H	I	J	K	L	M	N	O	P	Q
Nasal Catarrh	4	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		No Operation	4	—	—	—	4	—	—	—	—	3	1	—	—	—	—
Enlarged Tonsils and Adenoids	2	Operation before Clinic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		No Operation	2	—	—	—	—	—	—	2	—	1	1	—	—	—	—
Totals	6		6	—	—	—	4	—	—	2	—	4	2	—	—	—	—

TABLE D.

MISCELLANEOUS CASES.

Diagnosis.	Total.	Result.					
		Cured.	Improved.	Still under Treatment or Observation.	Left or Treatment not completed.	Referred to Hospital for Operation.	Declined Treatment.
Wax: Foreign Body in Ear, etc.	25	25	—	—	—	—	—
Epistaxis	5	5	—	—	—	—	—
Totals	30	30	—	—	—	—	—

(*g*) **Dental Defects.**—*Staff.*—Owing to the resignation of one of the Assistant Dental Surgeons, the full establishment was not available for the whole year.

Casual Treatment.—Treatment is given between 11 a.m. and 12 noon on Mondays and Fridays, and between 10 a.m. and 12 noon on Wednesdays. These patients should not be treated in any ideal school dental scheme inasmuch as they are mostly patients suffering from toothache and for whom, presumably, the parents have previously been offered, and have refused, treatment. If treatment had been accepted, the toothache would probably have been obviated.

Propaganda: *Folders.*—Copies of the illustrated folder, "The Story of a Tooth," and the pamphlet, "What about your Teeth," issued by the Dental Board of the United Kingdom, have been given to the senior children.

Treatment of Secondary and Technical Pupils.—The work done for the Essex County Council is shown below and is not included in Table V, at the end of the report.

INSPECTIONS.

	Ages.						Total Inspected.	No. Offered Treatment.	% requiring Treatment.
	11	12	13	14	15	16			
South West Essex Technical College									
Girls ..	29	29	114	44	65	19	300	252	84
Boys ..	—	—	55	70	78	13	216	178	82.4
Sir Geo. Monoux Grammar School									
Boys ..	62	75	89	97	81	67	471	354	75.3
Totals..	91	104	258	211	224	99	987	784	79.5

TREATMENT.

	No. of Children.	Attendances.	Extractions.		Anaesthetics.		Fillings.	Other Operations
			Temp. Teeth.	Perm. Teeth.	Local	General.	Perm. Teeth.	Perm. Teeth.
Technical College for Boys	78	134	8	23	3	24	165	31
Commercial School for Girls	55	150	3	24	11	23	164	28
High School for Girls	88	173	26	34	1	35	192	36
Sir George Monoux Grammar School for Boys	179	344	18	77	4	62	378	31
South West Essex Technical College for Boys	3	8	—	2	—	1	9	—
for Girls	16	16	—	3	—	—	23	—
Totals ..	419	825	55	163	19	145	931	126

Mr. L. W. Elmer, L.D.S., Senior Dental Surgeon, reports as follows:—

"Last year, 1937, saw the appointment of a further dental surgeon and a dental attendant, thus bringing the staff numerically into line with the Board of Education's recommendation, assuming the usual number of acceptances of treatment.

"Unfortunately, owing to sickness and the hiatus between the resignation of Miss Hathorn and the appointment of Mr. Gilbert, it has only been possible to give treatment on 200 extra sessions.

"There has, therefore, only been available the equivalent of three and a half dental surgeons. It would, in consequence, be premature to draw conclusions as to the potentialities of the present staff.

"It should be noted that the figures given on Table V at the end of the report do not include the increasing amount of work done for the Secondary and Technical Schools. Also, an average of three sessions weekly is now devoted to the treatment of expectant and nursing mothers.

"Arrangements have now been made with the Consultant in charge of the Rheumatism Clinic for all patients referred for dental treatment to be treated by one dental surgeon, irrespective of district in which they reside. Similar arrangements are in force for those children referred for tonsillectomy and thus preclude any chance of these cases being overlooked.

"*Orthodontics*.—Since the commencement of treatment of dental irregulations by means of appliances, the demand for this work has increased tremendously, and it has been found necessary to limit the extent of this work to a certain degree.

"I should like here to pay a tribute to the excellent X-ray films which, in a great number of cases, the Eastman Dental Clinic has been able to supply. These have been very helpful in aiding diagnosis in difficult cases.

"Miss Knight, the speech therapist, has co-operated successfully with the department in several cases of gross malformation of the mouth and jaws, and the exercises prescribed by her have been of great assistance to us."

(*h*) **Orthopaedic and Postural Defects.**—Medical treatment of these defects was given under the Orthopaedic Scheme in charge of the Consultant Orthopaedic Surgeon, Mr. Whitchurch Howell, F.R.C.S., who held a monthly clinic at the Open Air School. Mr. Whitchurch Howell also acts as Honorary Surgeon to the Brookfield Orthopaedic Hospital, an institution of 30 beds recognised as a Hospital School by both the Ministry of Health and the Board of Education, and administered by the Essex County Council.

Details of the work done under the scheme are given in the section dealing with Defective Children (Section 13).

(*i*) **Heart Disease and Rheumatism.**—Dr. Sheldon contributes the following interesting report on the work of the Rheumatism Clinic during 1938.

"During the past year there have been 44 sessions with 729 attendances. Of these attendances, 192 were made by children attending for the first time, while 537 were made by children who were being kept under observation. The number of new cases shows an increase of 16 over 1937, but this does not indicate that this last year has been a particularly bad year for rheumatism, or that the amount of rheumatism in Walthamstow is on the increase. Indeed, it is my impression that during the last 8 years the amount of serious and crippling rheumatism in children is steadily becoming less evident, at any rate in Walthamstow.

"Our present knowledge of the disease would lead us to expect that a reduction in the amount of rheumatism would follow an improvement in the general standard of health in the children, and particularly if the incidence of septic conditions such as dental sepsis and sore throats were to diminish. The examinations made by the School Medical Service would furnish information as to these latter points, but it is certainly my impression that dental and throat sepsis is less prevalent in the children seen at the Rheumatism Clinic than was formerly the case.

"Of the new cases, 53 were found to have some rheumatic cardiac defect. One of these required urgent in-patient hospital treatment, but the remainder were able to remain at home under the supervision of the clinic. During the year, 208 children were discharged from further attendance. This figure is slowly rising year by year, and seeing that the number of cases discharged on account of leaving school or moving from the district remains fairly constant year by year, this increase in the number of discharges again reflects the fact that the degree of injury produced by rheumatism is not quite so great as hitherto.

"As in previous years, close co-operation has been maintained with the school attendance authorities, and I should like to stress how important this is, and how closely it affects the value of the work done in the clinic. During the year it was found necessary to exclude 30 children from attending school, while a further 25 were allowed to attend school but had to be exempted from games and exercises. One of the duties of the Medical Officer is to watch closely those children who are not allowed to take part in games and exercises in order that, as soon as their cardiac condition improves sufficiently for them to be allowed to resume a normal child life, no time may be lost in getting them back to taking part in the school activities.

"During the year, 16 children who have previously been excluded from games were allowed to resume exercises. After this has been allowed they are then followed up in order to be sure that this resumption of games is not interfering with their health, and I am glad to say that all those children who were returned to games were able to continue on this régime throughout the year.

"Once again with the co-operation of the Medical Officer of Health, children have been examined with special reference to their hearts following their discharge from the Isolation Hospital, and those children whose hearts appeared abnormal were referred to the clinic. In this way 10 children were referred to the clinic following discharge after scarlet fever, and of these, 3 were found to show evidence of early rheumatic carditis, while of 13 who were referred to the clinic following discharge after diphtheria, 4 were found to have signs of cardiac damage. These cases have remained under supervision and their progress has been one of slow improvement.

"It is also a pleasure to record again the help received from the Walthamstow branch of the Invalid Children's Aid Association; indeed, it would be difficult to run the clinic to a successful issue without this continued support. During the year, 40 children have been referred for convalescent home treatment, and 37 have actually been sent to the seaside or country."

RHEUMATISM CLINIC, 1938.

Number of sessions	44
,, ,, attendances	729
,, ,, new cases	192
,, ,, old cases	537
,, discharged	208
,, still under treatment	169
,, of new cases with rheumatic or cardiac defect..	53
,, referred to Hospital as in-patient	1
,, ,, ,, ,, ,, out-patient	8
,, ,, for tonsils and adenoids operation ..	27
,, ,, ,, dental treatment	47
,, ,, to P.D. Centre	4
,, ,, ,, Open Air School	2
,, excluded from school	30
,, ,, half-time school	—
,, ,, from games and exercises	25
,, to begin games and exercises	16
,, seen after scarlet fever	10
,, ,, ,. diphtheria	13
,, with cardiac defect after scarlet fever	3
,, ,, ,, ,, ,, diphtheria	4

Number referred for convalescent home treatment ..	40
,, sent away	33
,, referred in 1937 and sent away in 1938 in addition to the above	4
,, refused	4
,, withdrawn	2
,, waiting	1

(*j*) **Tuberculosis.**—Children suffering from actual and suspected tuberculosis are referred to the Tuberculosis Officer of the Essex County Council, which Authority administers the Tuberculosis Treatment Scheme in the Borough. The number of school children examined during the year was: boys 54 and girls 68, of which 9 boys and 21 girls were referred by the School Medical Staff. 28 of the cases were sent by private practitioners, and 64 were examined as contacts.

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

	At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
Pulmonary ..	15	12	2	—	29
Non-pulmonary	9	29	3	—	41

(*k*) **Artificial Sunlight Treatment.**—The arrangements with the Connaught Hospital detailed in the 1936 report were continued.

Seven children of school age were referred for treatment, and a total of 110 treatments was given at a total cost of £11.

8. INFECTIOUS DISEASES.

Control is on the lines detailed in the Board's "Memorandum of Closure of and Exclusion from School, 1930."

Notification in the 5 to 15 years age group during 1938 were as follows (1937 cases shown in parentheses):—Scarlet Fever 163 (116), Diphtheria 44 (68), Bacillary Dysentery 13 (37), Pneumonia 24 (14), Erysipelas 1 (6), Enteric 1 (3), Encephalitis Lethargica 2 (—).

Among the cases discovered by the medical staff, and included above, were:—Bacillary Dysentery 5, Diphtheria 8, Scarlet Fever 7.

Non-notifiable infectious diseases 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.	Ringworm & Scabies.	Impetigo Sores, etc.	Chicken Pox.
January	—	19	2	32	—	4	145
February	11	530	2	36	2	8	30
March	10	570	4	59	1	15	47
April	—	158	1	29	—	—	15
May	2	94	4	33	—	17	9
June	2	45	10	32	2	3	12
July	1	19	—	13	—	7	20
August	1	11	6	6	—	2	—
September	4	3	4	5	2	3	11
October	—	1	27	2	—	7	71
November	—	1	22	1	5	6	25
December	4	3	14	2	—	4	28
Total—1938 ..	35	1,454	96	250	12	76	413
Total—1937 ..	24	13	139	225	4	67	522

As in former years, a summary of Head Teachers' weekly returns is given:—

School.	Dept.	S.T.	M.	W.C.	Mps.	C.P.	R.W. Scab.	Sores.	Sore Eyes.	S.F.	Diph.	N.C. Diph.
Blackhorse Road.. ..	Girls ..	—	—	—	—	—	—	—	—	1	—	—
	Mixed ..	—	1	—	—	—	—	—	—	3	—	—
	Infants ..	—	90	—	4	79	1	5	—	4	—	—
Wm. Elliott Whittingham	Boys ..	—	—	—	—	1	—	1	—	6	—	—
Higham Hill	Boys ..	—	—	—	—	—	—	—	—	3	—	—
	Girls ..	—	—	—	—	—	—	1	—	3	—	—
	Infants ..	1	25	—	1	58	—	—	—	5	—	1
Pretoria Avenue	Mixed ..	—	—	—	—	—	—	2	—	2	—	—
	Infants ..	—	—	—	—	—	—	1	—	—	—	—
William Morris Central..	Boys ..	—	—	—	—	—	—	—	—	1	—	—
	Girls ..	—	—	—	—	—	—	—	—	1	—	—
Coppermill Lane ..	Boys ..	—	—	—	—	—	—	—	—	—	—	—
	Girls ..	—	—	—	—	—	—	—	—	—	1	—
	Infants ..	2	84	17	—	1	—	—	—	6	1	1
	Mixed ..	—	—	—	2	1	—	—	—	1	2	—
Wood Street	Boys ..	—	4	—	9	3	2	6	—	3	—	—
	Girls ..	1	8	—	8	5	—	2	—	3	1	—
	Infants ..	—	83	—	30	12	1	5	—	4	1	—
Joseph Barrett	Boys ..	—	—	—	—	—	—	—	—	1	—	—
	Girls ..	—	—	—	—	—	—	—	—	1	1	—
Open Air School.. ..	Mixed ..	—	—	—	—	—	—	—	—	—	—	1
Maynard Road	Boys ..	—	—	—	11	1	—	2	—	2	—	—
	Girls ..	—	3	—	31	20	—	2	—	2	—	—
	Infants ..	1	86	2	29	26	1	3	—	2	—	—
St. Mary's	Girls ..	—	1	—	13	—	—	5	—	3	2	—
	Infants ..	—	70	—	37	—	—	—	—	13	—	—
St. George's	Mixed ..	—	—	—	—	—	—	—	—	10	2	—
Shernhall Special ..	Mixed ..	—	—	—	—	—	—	—	—	—	—	—
William McGuffie ..	Boys ..	—	—	—	—	—	—	—	—	—	—	—
	Girls ..	—	2	—	—	—	—	—	—	—	—	—
Mission Grove	Mixed ..	—	2	—	—	6	—	—	—	4	—	—
	Infants ..	—	54	2	8	38	4	10	—	—	—	—
Deaf Centre	Mixed ..	—	—	—	—	—	—	—	—	1	—	—

School.	Dept.	S.T.	M.	W.C.	Mps.	C.P.	R.W. Scab.	Sores	Sore Eyes.	S.F.	Diph	N.C. Diph.
Edinburgh Road ..	Girls ..	—	—	—	—	—	—	—	—	—	1	—
Markhouse Road ..	Boys ..	12	—	—	—	1	—	—	—	—	1	—
	Infants ..	—	46	—	—	—	—	—	—	—	2	—
	Mixed ..	—	10	—	—	1	—	—	—	1	1	—
St. Patrick's	Mixed ..	—	16	—	—	2	—	—	—	3	—	1
St. Saviour's	Boys ..	—	—	—	—	1	—	1	—	—	—	—
	Girls ..	—	—	—	—	—	—	1	—	3	—	—
	Infants ..	1	48	1	—	7	—	—	—	—	4	1
Forest Road	Boys ..	—	—	—	—	—	—	—	—	1	—	—
	Girls ..	—	6	1	—	3	—	—	—	2	2	—
	Infants ..	—	91	1	12	3	—	—	—	1	—	—
Winn's Avenue	Boys ..	1	—	—	—	—	—	1	—	—	—	—
	Girls ..	—	—	—	—	—	—	—	—	—	—	—
	Infants ..	—	103	11	16	5	—	1	—	1	—	—
	Mixed ..	—	4	1	11	5	1	3	—	—	—	—
Chapel End	Boys ..	—	—	—	—	—	—	—	—	1	—	—
	Girls ..	—	—	—	—	—	—	—	—	1	—	—
	Infants ..	2	125	5	24	1	—	3	—	4	5	—
	Mixed ..	—	—	—	—	—	—	2	—	4	1	—
Selwyn Avenue	Boys ..	5	1	—	—	—	—	—	—	1	—	—
	Girls ..	—	1	—	—	13	2	—	—	1	—	—
	Infants ..	—	143	—	—	94	—	—	—	6	1	—
Gamuel Road	Boys ..	3	—	—	1	1	—	1	—	2	2	—
	Girls ..	—	—	—	—	—	—	—	—	1	1	—
	Infants ..	—	66	19	—	—	—	1	—	2	2	2
Geo. Gascoigne Central..	Boys ..	—	—	—	—	—	—	—	—	—	1	—
	Girls ..	—	—	—	—	—	—	—	—	2	—	—
Roger Ascham	Mixed ..	—	—	—	—	—	—	—	—	1	—	—
	Infants ..	—	47	—	3	4	—	1	—	1	—	—
St. Mary's R.C.	Mixed ..	3	38	—	—	1	—	7	—	26	3	1
Myope Centre	Mixed ..	—	—	—	—	—	—	—	—	—	—	—
Nursery School	Mixed ..	3	60	35	—	4	—	6	—	1	1	—
Thorpe Hall	Infants ..	—	136	1	—	16	—	3	—	1	—	1
Totals		35	1454	96	250	413	12	76	—	152	39	9

The following are 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.
1938 ..	50	53	150	16	33	29
1937 ..	50	67	3	64	35	97

	Diarrhoea	Mumps.	Ringworm.	Scabies.	Various.	Totals.
1938 ..	4	27	2	4	516	884
1937 ..	4	27	1	3	579	930

Infectious Diseases Clinic.—The weekly clinic at 2 p.m. on Tuesdays was continued, and all children of school age who had been in contact with cases of infectious diseases were seen prior to their return to school.

As in previous years, all children discharged from the Isolation Hospital or after home isolation for infectious diseases were seen, and particular care was taken to refer all cases with any suspicion of rheumatism or of cardiac defect to the next rheumatism clinic.

Thirty-one children were referred, 13 following diphtheria, 10 following scarlet fever and 8 in connection with the scheme detailed below.

Sore Throat Follow-up Scheme.—The parents of all children reported to the School Medical Service to have had a sore throat are invited in writing to bring the child to the infectious disease clinic approximately four weeks after the onset of sore throat.

The primary purpose is to make sure that no cardiac complications have followed the sore throat. 150 cases were seen in 1938, and eight cases were referred to Dr. Sheldon. The parents have proved willing and anxious to co-operate.

The following table shows the work done at the infectious disease clinic, the large majority of patients being of school age:—

Number of clinics held in connection with Infectious Diseases and Immunisation	52
Number of attendances made	3,571
Average attendance per session	68.6
Number of scarlet fever cases discovered	3
Number of diphtheria cases discovered	2
Number of virulence tests taken in diphtheria carriers	11
Number of children recommended to rheumatism clinic	31
Number of children recommended to ear clinic	8
Number of children recommended to orthopaedic clinic	3

Diphtheria Immunisation.—Immunisation was carried out at the weekly clinic on Tuesdays at 3 p.m. and at Infants' Departments, along the lines detailed in the previous reports. The following summarises the work done during 1938:—

Schick tested for the first time	120
Negative (including pseudo and negative)	48
Positive (including pseudo and positive)	72
Total number of immunisations completed during 1938:—	
(*a*) School age	1,140
(*b*) Pre-school age	288
(*c*) Over school age	4
Total	1,432
Number not completing immunisation or left district	46
Number of Schick tests following immunisation	107
Number of re-Schick tests following immunisation in previous years	546
Number of attendances made at clinic for immunisation	2,398
Immunisation at schools (included above):—	
Number completely immunised	1,034
Number partly immunised	46
Number having second dose, immunised with single dose in previous years	248

Follow-up of Single Dose A.P.T. Immunisation Cases.—In view of the unreliability of the single dose method, invitations were sent to the parents of all children immunised with one dose A.P.T. to have them Schick tested.

1,240 invitations were sent, 546 responded, and 42 were found to have relapsed, *i.e.*, 7.6 per cent.

All these cases were given a further dose.

Scarlet Fever Immunisation.—Dick Tests for Scarlet Fever:—

Positive, 26; Negative, 156; Doubtful, 18. Total 200.

The above were done at a children's residential institution. 73 children were given a prophylactic dose of scarlet fever antitoxin.

During the year, 30 resident children were removed to hospital for scarlet fever and 18 further cases from the attached day school.

The prevalent type of streptococcus pyogenes was Type 27.

Diphtheria and Vincent's Angina.—From the same institution during the year 9 notified cases of diphtheria were removed, but four proved to be Vincent's Angina.

In addition, there were at least 10 cases of oral angina, mostly amongst children in the nursery school section. A special dental inspection at the same time showed 12 cases of gingivitis, which was probably a precursor of the angina.

Vaccination.—The vaccinal condition of each child examined at routine medical inspection was noted, and a summary shows the following:—

		Number Examined.	Number found to be Vaccinated.	Percentage Vaccinated.
Entrants ..	Boys	669	107	15.9
	Girls	657	108	16.4
2nd Age Group ..	Boys	795	172	21.6
	Girls	784	197	25.1
3rd Age Group ..	Boys	922	230	24.9
	Girls	930	284	30.5
Total		4,757	1,098	23.0

Action under Article 20 (*b*) (Exclusion of individual children):

At medical inspection	3
At School Clinics	1,267

Action under Article 22 (School closure).—Nil.

Action under Article 23 (*b*) (*i.e.*, attendance below 60 per cent. of number on register).—Certificates were granted as follows:—

School.	Month.	Disease.
St. Mary's C. of E. Infants (3) ..	February ..	Measles.
Winns Avenue Infants (2) ..	,, ..	,,
Gamuel Road Infants	,, ..	,,
Coppermill Road Infants (2) ..	,, ..	,,
Winns Avenue Infants (2) ..	March	,,
Thorpe Hall Infants (3) ..	,, ...	,,
Forest Road Infants	,, ...	,,
St. Mary's Infants	,, ...	,,
Blackhorse Road Infants ..	,, ...	,,

9. OPEN AIR EDUCATION.

(*a*) **Playground Classes.**—Favourable weather conditions are utilised to the utmost for playground classes, physical exercises and organised games.

Opening of Playing Fields and Playgrounds.—Your Committee decided to open the following playgrounds and playing fields for the use of the scholars out of school hours from 11th April to 30th September, 1938:—

(*a*) Blackhorse Road School Playing Field.
(*b*) Wm. Elliott Whittingham School Playing Field.
(*c*) Chapel End School playground.
(*d*) Wood Street School playground.

The playing fields and playgrounds were open as under:—

(i) Weekdays—during school holidays—all day from 9 a.m. to sunset.
(ii) Weekdays—when schools are in session—after school hours from 4.30 to sunset.
(iii) Saturdays—from 9 a.m. to 5.30 p.m.

Twelve members of the Committee's teaching staff acted as play organisers for two hours on two evenings per week at Wood Street, Blackhorse Road, Selwyn Avenue and Chapel End playgrounds, and Aveling Park, St. James Park, Higham Hill Recreation Ground and Selbourne Road Recreation Ground. The scheme was continued up to the end of September.

The Director of Education states that the following sites and playing fields were available to children attending the Public Elementary Schools during 1938:—

Playing Fields.

Name.	Area.	Availability.
Salisbury Hall ..	20 acres ..	School days and Saturdays.
North Walthamstow Sports Ground	5 ,, ..	School days and Saturdays.
Low Hall Farm ..	52 ,, ..	School days only.
Chestnuts Farm ..	18 ,, ..	School days excepting Thursday afternoons.
Aveling Park ..	16 ,, ..	School days only.

Walthamstow Cricket Club Ground.—Pitches hired: 2 football and 1 hockey pitch for Mondays (3 one-hour sessions) from 1st October, 1938, to 27th March, 1939. Cricket, 3½ days per week commencing 25th April.

Sites.

Name.	Area.	Availability.
Blackhorse Road ..	0.5 acres..	School days and Saturdays.
Wm. Elliott Whittingham	1.7 ,, ..	School days and Saturdays.

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

School.	Place.	Date.
Shernhall Special School—		
Senior Scholars ..	Holmbury St. Mary, Surrey	September, 1938.
Junior Scholars ..	Lancing, Sussex ..	June, 1938.
Coppermill Road J.M...	Coombe Martin ..	Whitsun, 1938.

(*c*) **School Camps.**—School camps were held at Guildford Park, St. Helens, for boys, and the Manor House, Sandown, for girls, during May, June and July.

Forms were issued at school to the parents of children who were likely to benefit from attendance at camp, the selection being made on grounds of poverty and ill-nourishment. The organisation of the camps was, broadly, on the same lines as in previous years.

Three contingents of 66 boys were in camp for fourteen days each between the 6th May and 17th June, and four contingents of 48 girls for similar periods between the 29th April and 24th June. A total of 390 children were sent away.

(*d*) **Swimming.**—The Swimming Committee, composed of official and co-opted members, with two members of the staff of the Director of Education acting as organising secretaries, again organised considerable swimming facilities for the children attending Public Elementary Schools.

As in previous years, two members of the staff at the Public Baths were appointed as swimming instructors to the boys, and one instructress for the girls. Swimming instruction was given to the boys on Tuesdays (all day) and to the girls on Wednesdays (all day).

The Council also granted the use of the swimming bath as follows:—

(*a*) *Life Saving*.—Boys, one afternoon throughout the season. Girls, one afternoon after the summer vacation.

(*b*) *Summer Vacation Passes*.—Use of the bath during the summer vacation—25 passes to each school according to time-table.

(*c*) *Gala*.—Free use of bath on two evenings at end of season.

The following diploma results were obtained:—

	Length.	100 yds.	¼ Mile	Half Length on back	Royal Life-Saving Society Certificates. Elementary	Intermediate	Medallions
Boys' Schools	342	197	132	172	50	31	5
Girls' Schools	312	200	162	191	41	42	13

10. PHYSICAL TRAINING.

The following report has been submitted to your Committee by the P.T. Organisers, Miss Hawkes and Mr. Last:—

"We have pleasure in submitting the following report on Physical Education in the Walthamstow schools during 1938.

"1. **Introduction.**—Consolidation of the progress recorded in our last report has gone on steadily throughout the year under review and special attention has been given to the weaker features of the work. Many difficulties still hamper the full and proper development of Physical Education in its many and varied branches, notably the rather insuperable difficulty regarding certain unsuitable school conditions; partial solutions have at least been found to many of our problems, and steady general progress may be claimed.

"The progressive decline in the percentage of school children to population, recorded in the School Medical Officer's Report for

1937, makes it more imperative to preserve and give these children every opportunity for living healthy, useful, interesting and enjoyable lives. In Walthamstow we have been impressed by the many excellent agencies working towards this end. The pre-natal clinics, child welfare and maternity centres, nursery schools, the provision of milk and meals, are all parts of a comprehensive scheme to ensure healthy lives. A sound scheme of physical education can do little to promote strong, healthy development or give joy to the underfed, unhealthy child, but is very necessary to supplement the good work of the above-mentioned agencies. Underfed children should be carefully tended and their disability remedied before physical exercises are imposed. Children who are capable of withstanding the mental work of the classroom are equally capable of taking part in a physical training lesson under a capable teacher.

"2. **Physical Education in the Schools.**—The physical education of the children in the Primary Schools starts with admission, and the present Board of Education syllabus of Physical Training gives ample scope and guidance for progressive development until they leave. In the Infant Schools at least one, and often two, lessons are given every day. There is no formality about these lessons, movement and enjoyment being the main features. Gradually movement becomes more controlled, mobilisation more rapid, and before leaving the Infant classes the elements of the team system have been initiated.

"In the Junior Schools the tables of exercises are arranged to meet the needs of increasing strength, skill, control, and the widening mental outlook of the children. No syllabus, however excellent, can be satisfactorily interpreted unless the teacher possesses the necessary energy and enthusiasm to make the subject a force and source of real inspiration. In some schools all members of the staff, and in all schools the majority of active teachers capable of teaching the subject, have now attended refresher courses in Physical Education, and improved results are becoming more and more apparent in the work in the schools.

"Great interest is taken in the subject by both teachers and children, and on the whole the work is active, enjoyable and purposeful. The tendency towards aimless physical activity is being gradually replaced by sound training in movement, mental response, and in the development of character and initiative. This progressive development from the Infant School through the Junior School is, however, not always achieved, and in spite of the guidance afforded by a detailed syllabus the standard of attainment at the end of the Junior School course varies widely.

"When the children arrive at the post-primary stage (11 plus), gaps in the orderly progression of physical education appear.

Although much has been done regarding the difficult problem of transference of staff, there is still a shortage of teachers with the necessary specialist qualifications to ensure that all children in the Senior Schools receive adequate training on the portable apparatus provided. As a result of the increasing knowledge and experience of the specialist teachers, more effective use is now made of this apparatus, and the Committee's decision to augment the supply will be particularly welcomed by these teachers. There can, however, be no logical reason why the post-primary children in Secondary and Central Schools should enjoy the privileges of fully equipped gymnasia with changing rooms and showers, while those in the Senior Schools have to accept the less useful portable apparatus with its limited possibilities and hygienic conditions which preclude much of the valuable training in the proper care and cleanliness of the body. The extension of the school-leaving age to 15 years next September increases the urgent need for improved facilities which would do much to create in the pupils a keen desire to continue health-giving activities on leaving school.

"A feature of this year's work in several of the Senior Girls' Schools has been the inclusion in the time-table of either Greek or Central European dancing. This has been received by the girls with great enthusiasm and has resulted in a marked increase in the poise and control of movement, and an accompanying lack of self-consciousness which has fully justified the introduction of this pleasant activity. Following the present Teachers' Dancing Course, it is hoped that a weekly period of Greek or Central European dancing will be included as part of the physical training scheme in all Girls' Senior Schools. The provision of a pianist for this type of dancing is necessary, but is a great difficulty as Head Teachers can rarely spare a second member of the staff for this purpose. The appointment of a floating pianist seems the only solution to this problem.

"3. **Playing Fields.**—Extensive improvements were carried out during the year on the Committee's spacious playing fields at Salisbury Hall, and this important work, together with the supply of maintenance machinery and extra games equipment, should further enhance the value of these splendid fields. The many advantages of possessing grounds maintained and marked solely to meet the requirements of children's games have been fully demonstrated by the excellent use made of this field, especially during the summer months. At the Billet Road playing field the groundsman deserves credit for his excellent maintenance of the field, in spite of a very full programme of school visits. This field is also regarded as the centre for valuable out-of-school activities, and it is pleasing to record a marked increase made in the use of the shower baths. The formation of desirable cleanly habits is an important

aspect of the hygiene of games training, and whilst the temporary pavilions and amenities provided at Salisbury Hall have served a very useful purpose, the need for a supply of hot water has been strongly felt, especially during the winter months.

"One of the chief advantages of controlling our own grounds is that it is rarely necessary to exclude children on account of major repairs or seasonal changes in games markings, which can be carried out during the school holidays. We much appreciate the valuable co-operation of the Parks Committee for granting facilities for school games in parks and recreation grounds, but these playing pitches are often closed for long periods because they are considered unfit for use, and for the re-marking of pitches at a particularly valuable school training period at the beginning of each autumn term.

"We would, therefore, urge that every effort be made to acquire at least twelve acres of the valuable centrally situated Chestnuts site for school playing fields under the Education Committee's control. Much time is now taken in travelling to and from the playing fields, but with sufficient accommodation all school games could be arranged at the end of either the morning or afternoon school session. This would have other important advantages besides the saving of valuable time, and regular use of playing pitches for more than two occasions per day is undesirable if turf is to be maintained in good condition.

"The provision of concrete practice wickets at Salisbury Hall and Billet Road made it possible to organise cricket practices of real training value, and the opportunities provided for intensive batting practice were much appreciated by teachers and boys. The senior girls readily realised the 'carry over' value of informal tennis and cricket practices, and the majority were able to provide themselves with some type of racquet.

"These improved facilities should do much to ensure that the vast majority of children will, before leaving school, acquire sufficient skill and pleasure in performance to create a real desire to take an active part in games, instead of merely filling in coupons about them.

"An indication of the growing interest taken in games was given during October when approximately 200 senior girls from East Ham, Barking, Walthamstow and Willesden took part in an interesting 'handball' tournament at Salisbury Hall. Provided that the competitive element is rightly controlled, these gatherings are of great value to teachers and children.

"4. **Clothing.**—In our first annual report (1936) we ventured to offer the following recommendation: 'that proper gymnastic shoes should be considered a necessary part of every child's school equipment,' and we are, therefore, particularly pleased to note the Committee's generous decision to provide these shoes for all school children. The type of shoe at present in use has given very satisfactory service, and we anticipate that a yearly issue of shoes to the extent of approximately 80 per cent. of the school population would suffice to maintain an adequate supply.

"For the more advanced work of the Senior Schools we should be satisfied with nothing less than a complete change of clothing and the provision of showers, but we consider that, under the present difficult conditions, the best practical solution to this important hygienic problem has generally been found. The modern facilities recently provided at the Wm. Morris Central School have already had a most stimulating effect upon the work and are proving immensely popular with the pupils.

"5. **Teachers' Courses.**—Courses for teachers have been continued during the year. A course of weekly Demonstration Lectures, extending over a period of six weeks, was given for Head Teachers of Infants' Schools during the summer term, and this was followed by a similar 12 weeks' course for Infant Teachers unable to take an active part in the work. Ten Walthamstow women teachers attended a course involving the use of apparatus, held in Barking, and 18 teachers are at present attending a course in Central European dancing organised by the Essex Education Committee in Leyton. Two men and one woman physical training specialist teachers were generously granted leave of absence in order to attend three months' courses in Physical Education. Seven teachers are at present attending Leaders' courses for Recreative Physical Training, and four teachers attended a similar course during the Christmas holidays, both courses being organised in London by the Central Council for Recreative Physical Training.

"Nineteen Head Teachers and Physical Training specialists in Senior Schools spent a profitable day observing various phases of physical education in three Senior Schools in Birmingham. Teachers too rarely enjoy the opportunity of observing their colleagues at work.

"Forty-two men teachers attended a Games Course for nine weekly meetings at the Billet Road Playing Field, and, with the co-operation of the Walthamstow Schools Football Association, the last three of these meetings were extended beyond school hours and valuable coaching given by a well-known Football Association coach.

"6. **Swimming.**—Last year we estimated that at least 5,500 children in the post-primary schools should be given the opportunity of enjoying a regular swimming lesson throughout the school year. This privilege should also be extended to children in their last year at the Junior Schools, making a total of nearly 7,000 children. We regret that last year only 1,200 children per week were able to receive instruction over the limited period of the summer months, and the necessity for making further provision will be further emphasised by the raising of the school leaving age. We feel that the Baths Committee should be requested to extend the periods available for the instruction of school children, and we hope that accommodation for a good proportion of the Monoux boys will be found at the South-West Essex Technical College, thus releasing much-needed places at the Walthamstow Baths for children attending Walthamstow schools.

"The effectiveness of the actual swimming instruction is still seriously handicapped by (*a*) the lack of sufficient shallow water area, and (*b*) the excessive size of the classes, especially for non-swimmers. The majority of teachers readily gave their specialist teacher valuable assistance by actively coaching a section of these large classes, but there is still room for improvement upon the lines indicated in our previous report.

"*Number of certificates gained*:

	Lengths.	100 yds.	¼-mile.	½-Length on back.	Royal Life Saving Society Certificates.		
					Elem.	Inter.	Medallions
Girls:							
1936 ..	280	222	116	207	39	36	5
1937 ..	373	221	155	218	40	40	11
1938 ..	312	200	162	191	41	42	13 (2 bars)
Boys:							
1936 ..	273	166	104	147	50	24	—
1937 ..	375	249	138	200	41	16	—
1938 ..	342	197	132	172	50	31	5

"The results achieved by individual schools vary too widely, and whilst the majority deserve credit for their good work under difficult conditions, there is an obvious lack of interest at others in this healthy activity. The small decrease in the total number of certificates was probably due to three causes: (i) the rather indifferent summer weather; (ii) the war crisis; and (iii) the insistence upon better style in the actual tests. Much excellent work was again performed by enthusiastic teachers out of school hours, and the truly heroic efforts of those responsible for the organisation of

the Annual Galas under the exceptionally difficult conditions of 'crisis' week deserve high praise. These functions did much to preserve the morale of the children during those critical days.

"We would call your attention particularly to the excellent record of successes in the Royal Life Saving Society's examinations. The arduous work of preparing the children for this work is carried out very efficiently by the specialist swimming instructors. There is no need to emphasise the value of this important work, but it gives us great pleasure to record that a girl attending one of your Senior Schools was awarded the Royal Humane Society's Medal for saving a child from drowning during the summer holidays.

"7. **Play Centres.**—As a result of the successful operation of the two experimental centres opened at the Blackhorse Road and Wood Street Schools in 1937, the scheme was extended to include the following centres:—

Playgrounds.	Parks and Recreation Grounds.
Blackhorse Road School.	Aveling Park.
Chapel End School.	Higham Hill.
Wood Street School.	St. James' Park.
Selwyn Avenue School.	Selborne Road.

"The playgrounds were opened for two hours on three evenings and the parks on two evenings per week from Easter until the end of summer time, excluding the summer holidays. One Play Leader (man) was appointed to each playground centre, and one man and one woman to each park centre. The staff undertook the work with a genuine desire to render useful social service, and after a preliminary meeting with the Organisers of Physical Training all agreed to attend special courses in play leadership, conducted in London by the Central Council for Recreative Physical Training. Some of these teachers also gave active assistance in the organisation of a large National Demonstration of Play Leadership in Regents Park. Frequent visits were paid to these centres throughout the season, and whilst some were more successful than others, and many difficulties have yet to be overcome, we are pleased to report that the centres served a very useful purpose, were much appreciated by children and parents, and should be continued and, if possible, extended.

"Important data, such as attendances, accidents, loss or breakage of apparatus, were recorded on a special form and posted to the Education Office at the conclusion of each meeting. These records contained much useful information and, together with the final reports submitted by the Leaders, should do much to improve the efficiency of the scheme.

"Briefly, some of the most interesting observations from these reports are:—

(1) The playground centres proved most popular with boys and girls up to 12 years of age and Senior School girls. More senior boys visited the park centres, but required further facilities for the major games of football and cricket.

(2) The excellent behaviour of the children indicated by the surprisingly small amount of apparatus broken under conditions which made accurate control and checking almost impossible, and the absence of disciplinary troubles, deserve comment.

(3) Approximately 36,800 visits were made by children to the park centres and 21,600 to the playground centres, making a total of 58,400 visits.

(4) The interest and co-operation of parents increased throughout the season.

(5) The need for the provision of a 'quiet corner,' with opportunities for reading, handwork and impromptu dramatics, was felt, particularly at the playground centres.

(6) A more liberal and effective games marking service was required in the parks.

"Special mention must be made of the excellent help given by voluntary helpers, the majority of whom were drawn from the women's Keep Fit classes. Their services were much appreciated by the play leaders, and at some centres they proved particularly useful with the younger children.

"We also wish to thank the Parks Committee and the various members of their staff who contributed so much towards the successful working of the scheme.

"We hope that the grim air raid preparations on the Selborne Avenue ground will not prevent the opening of this valuable centre next summer. In any case, further playing field accommodation is required for children in the High Street and Mission Grove School areas, and the acquisition of the site of the former Home Office School would prove extremely valuable.

"8. **Out-of-School Activities.**—The recognition of the necessity for enlarging the scope of physical education beyond the narrow conception of 'physical drill' has in no small measure been due to the untiring efforts of enthusiastic teachers to supplement this training by the provision of facilities for the more recreative aspects of the work, such as games, swimming and athletics out of

school hours. Members of the Walthamstow Schools Athletic, Cricket and Football, and Swimming Associations continue to uphold this splendid tradition for 'service' and are making full use of the extra facilities and equipment now provided by the Education Committee at the Salisbury Hall and Billet Road Playing Fields. To us, one of the most pleasing features of this work is that the element of competition is strictly controlled and is not allowed to destroy the vitally important recreative spirit which should permeate all games and healthy exercise.

"The selection and coaching of athletics for children is at present receiving much attention. The attainment of skill and success in these activities can form a valuable objective focus of interest in the systematic gymnastic training. We consider that the 'standard tests' so successfully organised by the Schools Athletic Association do serve this useful purpose, and we have pleasure in recording the following details of the valuable scheme supplied by the Hon. Secretary of the Association:—

STANDARD TESTS FOR CHILDREN (11—14 YEARS).

1st Stage Boys.		1st Stage Girls.	
100 Yards ..	15 secs.	100 Yards ..	15 secs.
High Jump ..	3ft. 5in.	High Jump ..	3ft. 5in.
Long Jump ..	11ft.	Broad Jump ..	5ft. 6in.
Hurdles (2ft.) ..	15 secs. (75 yds.)	Hurdles (2ft.) ..	15 secs.
Throwing Football	27ft.	Netball Shooting ..	3 out of 7 (preliminary 1 free throw)

2nd Stage Boys.		2nd Stage Girls.	
100 Yards ..	14 secs.	100 Yards ..	14 secs.
High Jump ..	3ft. 8in.	High Jump ..	3ft. 8in.
Long Jump ..	12ft.	Broad Jump ..	5ft. 9in.
Hurdles (2ft. 6in.)	15 secs.	Hurdles (2ft. 6in.)	15 secs.
Throwing Football	32ft.	Netball Shooting ..	4 out of 7 (preliminary 1 free throw)

"A minimum of three successes from each group of five tests must be gained to win a first or second class certificate, and all successes are entered on the certificate.

"Number of children examined in 1938:—

1st stage boys	550.	Certificates gained	430.	78% successes
2nd stage boys	232.	,, ,,	184.	79% ,,
1st stage girls	681.	,, ,,	360.	53% ,,
2nd stage girls	245.	,, ,,	160.	66% ,,
Totals	1,708	,, ,,	1,134.	66% ,,

"9. **'Keep Fit' Work.**—The Keep Fit classes for women and girls started in Walthamstow last year have continued to run and additional classes have been formed. Ten of these classes are now held at the following centres: —

Mondays	..	Chapel End.
Tuesdays	..	Blackhorse Road and Coppermill Road.
Wednesdays	..	Forest Road, Mission Grove and Selwyn Avenue.
Thursdays	..	Markhouse Road, Mission Grove, Winns Avenue (2 classes).

"In connection with this work for the adolescent, a Games Club has been started. This club meets on Saturday afternoons at the Salisbury Hall Playing Field, most generously lent by the Education Committee, and it is possible for any girl or woman in Walthamstow to play hockey, netball, tennis or cricket for a fee of 2d. for the afternoon. For this very modest sum members get the services of a games coach and are supplied with the necessary games equipment. The club has approximately 50 members. Several matches with local clubs have been played, and it is hoped that, as girls become more skilful during school life, the desire to continue their games and the membership of this club will greatly increase. The provision of such cheap facilities in a built-up area such as Walthamstow must be indeed rare.

"The men's Keep Fit class started at Selwyn Avenue last March continues to hold regular weekly meetings and is now under the control of the Essex Education Authority, which has also extended its provision of teachers of physical training to the recently formed Old Boys' Clubs at the Joseph Barrett and Chapel End Senior Boys' Schools.

"In conclusion, we wish to express our sincere appreciation for all the help and advice received from the Director of Education and his staff, our thanks to the teachers for responding so cheerfully to our suggestions, and our recognition of the watchful care of its youth exercised by the Education Committee, all of which have contributed towards making our work such a pleasant duty."

11. PROVISION OF MEALS.

(1) **Mid-day Meals.**—Mid-day meals were provided at the Nursery, Shernhall, Special, Blind and Myope, and the Open Air Schools.

The feeding centres at Joseph Barrett School, at High Street and at Higham Hill School were continued.

The number of meals was as follows:—

Year.	Number of Children.	Number of Meals.	Average Meals per Child.
1938	797	94,990	119.2
1937	801	93,791	117.1
1936	732	91,133	124.5
1935	758	79,923	105.4

(2) **Milk Meals.**—Milk was supplied on medical grounds to 5,177 children on the recommendation of the medical staff after the examination of children either at school or clinics, the total number of meals being 1,453,915. The number of children supplied during the preceding year was 4,168, and the number of meals 1,079,039.

Children presenting evidence of subnormal nutrition are given milk meals provisionally, on the recommendation of the Head Teachers, pending medical examination.

Children receiving "official" milk are seen at the medical inspections and re-inspections each year, the findings are recorded on a special card, and a decision made as to the extension of the milk meals.

(3) **Milk in Schools Scheme.**—The arrangements detailed in former reports were continued in 1938, all the milk supplied being pasteurised milk sold under licence.

A table is published below summarising the reports of Head Teachers as to milk consumed in schools in March and October, 1936, and as required by the Board of Education.

The summary shows the percentage at each school receiving milk on the two dates, including absentees who usually receive milk:—

MILK IN SCHOOLS.—SUMMARY.

March and October, 1937.

School.	Dept.	No. on Roll. Mar.	No. on Roll. Oct.	Free. Mar.	Free. Oct.	For Payment. Mar.	For Payment. Oct.	Total. Mar.	Total. Oct.	% receiving Milk. Mar.	% receiving Milk. Oct.
Blackhorse Road	Girls ..	233	252	71	100	64	68	135	168	57.9	66.6
	Mixed ..	334	317	46	60	158	144	204	204	61.0	64.3
	Infants ..	227	202	49	53	153	132	202	185	88.9	91.5
Wm. Elliott Whittingham	Boys ..	252	277	67	57	50	67	117	124	46.4	44.7
Higham Hill	Boys ..	290	275	76	89	137	94	213	183	73.4	66.5
	Girls ..	288	267	182	155	80	90	262	245	90.9	91.7
	Infants ..	279	240	122	87	122	121	244	208	87 4	86.6
William Morris Central ..	Boys ..	289	301	64	61	130	125	194	186	67.1	61.7
	Girls ..	320	350	48	55	90	103	138	158	43.1	45.1
Coppermill Lane	Boys ..	192	206	67	74	58	51	125	125	65 1	60.6
	Girls ..	218	220	58	63	90	60	148	123	67.8	55.9
	Infants ..	290	238	42	28	221	160	263	188	90.6	78.9
	Mixed ..	349	338	66	128	130	197	196	325	56.1	96.1
Wood Street	Boys ..	237	252	133	118	76	72	209	190	88.1	75.3
	Girls ..	242	242	81	83	81	90	162	173	66.9	71.4
	Infants ..	244	213	57	24	112	58	169	82	69.2	38.4
Joseph Barrett	Boys ..	250	277	61	87	70	97	131	184	52.4	66.4
	Girls ..	228	267	54	89	65	90	119	179	52.1	67.0
Open Air School	Mixed ..	155	145	155	145	—	—	155	145	100.0	100.0
Maynard Road	Boys ..	335	333	76	62	115	185	191	247	57.0	74.1
	Girls ..	298	297	59	63	112	179	171	242	57.3	81.4
	Infants ..	330	298	28	19	147	192	175	211	53.0	70.8
St. Mary's	Girls ..	137	133	28	37	60	67	88	104	64.2	78.1
	Infants ..	172	133	34	18	79	89	113	107	65.6	80.4
St. George's	Mixed ..	139	143	37	41	79	84	116	125	83.4	87.4
Shernhall Special	Mixed ..	51	54	40	49	11	5	51	54	100.0	100.0
William McGuffie	Boys ..	207	237	29	57	70	66	99	123	47.8	51.4
	Girls ..	217	221	51	56	60	63	111	119	51.1	53.8
Mission Grove	Mixed ..	249	262	106	101	110	112	216	213	86.7	81.2
	Infants ..	207	170	38	23	143	115	181	138	87.4	81.1
Deaf Centre	Mixed ..	20	21	13	16	4	4	17	20	85.0	95.2
Edinburgh Road	Girls ..	201	224	63	71	52	72	115	143	57.2	63.8

MILK IN SCHOOLS.—SUMMARY.—*continued.*

School.	Dept.	No. on Roll.		Free.		For Payment.		Total.		% receiving Milk.	
		Mar.	Oct.	Mar.	Oct.	Mar.	Oct.	Mar.	Oct.	Mar.	Oct.
Markhouse Road	Boys ..	192	190	41	52	96	85	137	137	71.4	72.1
	Infants ..	175	135	70	50	90	70	160	120	91.4	88.8
	Mixed ..	279	288	132	148	116	103	248	251	88.8	87.1
St. Patrick's	Mixed ..	236	232	78	77	80	90	158	167	66.9	71.9
St. Saviour's	Boys ..	143	150	46	53	65	64	111	117	77.6	78.0
	Girls ..	108	125	36	40	56	62	92	102	85.1	81.6
	Infants ..	150	127	58	44	83	79	141	123	94.0	96.8
Forest Road	Boys ..	267	248	39	33	130	130	169	163	63.2	65.7
	Girls ..	241	243	40	32	123	107	163	139	67.6	57.2
	Infants ..	284	239	28	24	214	172	242	196	85.2	82.0
Winn's Avenue	Boys ..	217	215	82	52	60	49	142	101	65.4	46.9
	Girls ..	261	268	84	91	52	75	136	166	52.2	61.7
	Infants ..	258	246	21	14	200	210	221	224	85.6	94.6
	Mixed ..	383	353	85	53	222	195	307	248	80.1	70.2
Chapel End	Boys ..	235	226	52	67	28	52	80	119	34.0	52.6
	Girls ..	208	237	47	64	53	77	100	141	48.0	59.4
	Infants ..	408	379	65	46	277	255	342	301	83.8	79.3
	Mixed ..	375	338	57	59	138	140	195	199	52.0	59.8
Selwyn Avenue	Boys ..	376	381	51	56	160	165	211	221	56.1	57.8
	Girls ..	404	413	54	55	150	174	204	229	50.4	55.4
	Infants ..	409	396	28	21	265	232	293	253	71.6	33.8
Gamuel Road	Boys ..	267	246	52	47	148	125	200	172	74.7	69.9
	Girls ..	252	228	59	48	133	116	192	164	76.1	71.9
	Infants ..	292	273	34	31	200	188	234	219	80.9	80.2
Geo. Gascoigne Central ..	Boys ..	279	308	43	47	123	144	166	191	59.4	62.0
	Girls ..	297	323	44	45	45	78	89	123	29.9	58.0
Roger Ascham	Mixed ..	398	359	113	104	85	92	198	196	49.7	54.5
	Infants ..	283	231	53	37	193	156	246	193	86.9	83.5
St. Mary's R.C.	Mixed ..	327	333	76	83	240	210	316	293	96.6	87.9
Myope Centre	Mixed ..	66	57	11	11	45	31	56	42	84.8	73.6
Nursery School	Mixed ..	134	163	101	94	33	69	134	163	100·0	100.0
Thorpe Hall	Infants ..	323	309	33	26	203	266	236	292	73.0	94.4
Pretoria Avenue	Mixed ..	247	248	50	53	120	142	170	195	68·8	78.6
Totals		16,254	15,912	3,964	3,926	7,155	7,255	11,119	11,181	68.4	70.2

The progress of the scheme since 1935 may be seen from the following table:—

	Number on Roll.	Receiving Free Milk.	Available for Voluntary Milk.	Receiving Voluntary Milk.	Percentage receiving Voluntary Milk.	Total receiving Milk.	Percentage receiving Milk.
March, 1935	18,354	922	17,432	9,142	52.4	10,064	54.2
October, 1935 ..	17,691	1,370	16,321	8,056	49.3	9,426	53.28
March, 1936	17,545	2,188	15,357	7,647	43.21	9,835	56.05
October, 1936 ..	17,144	2,705	14,439	7,652	52.09	10,357	60.41
March, 1937	16,760	2,918	13,842	7,307	43.59	10,225	61.0
October, 1937 ..	16,526	3,549	12,977	7,463	46.3	11,102	66.63
March, 1938	16,254	3,964	12,290	7,155	58.2	11,119	68.4
October, 1938 ..	15,912	3,926	11,986	7,255	60.5	11,181	70.2

The scheme has again been operated in every Department in Walthamstow, and further generous acknowledgment must be made to Head Teachers and their staffs generally.

The continued co-operation of the teaching staff is earnestly sought, particularly to try and reach the ideal, when *all* children (except those who have a definite dislike for milk and those who are "sensitive" to certain of its proteins) obtain at least one pint per day of "safe" milk, *i.e.*, efficiently pasteurised milk.

It is a local requirement of the scheme that only pasteurised milk sold under licence shall be supplied, *i.e.*, the cap on the bottle should be labelled "pasteurised milk."

Bacteriological, etc., Control.—During the year, 17 samples of milk were obtained by the Chief Sanitary Inspector for analysis. Sixteen were examined for bacteriological counts and all were satisfactory, the highest being 48,000 per mill., and the lowest 1,800 per mill.

Fifteen were examined by the phosphatase test and all were satisfactory.

Vacation Scheme.—Six schools were selected as distribution centres during the school holidays in 1938. The number of meals served is shown below:—

DISTRIBUTION OF MILK DURING SCHOOL HOLIDAYS, 1938.

Centre.	Voluntary.				Official.				Totals.				Grand Total.
	Easter.	Whitsun.	Summer.	Xmas.	Easter.	Whitsun.	Summer.	Xmas.	Easter.	Whitsun.	Summer.	Xmas.	
Markhouse Road	632	604	1,904	712	1,425	1,255	5,318	1,943	2,057	1,859	7,222	2,655	13,793
Maynard Road	322	362	1,898	558	695	690	3,272	1,035	1,017	1,052	5,170	1,593	8,832
Mission Grove (Christmas only)	—	—	—	818	—	—	—	1,162	—	—	—	1,980	1,980
Pretoria Avenue (not Christmas)	711	688	3,362	—	862	742	3,782	—	1,573	1,430	7,144	—	10,147
Thorpe Hall	405	544	2,364	612	827	678	3,569	1,034	1,232	1,222	5,933	1,646	10,033
Winns Avenue	554	639	2,517	866	1,165	1,188	5,029	1,460	1,719	1,827	7,546	2,326	13,418
Totals	2,624	2,837	12,045	3,566	4,974	4,553	20,970	6,634	7,598	7,390	33,015	10,200	58,203

Afternoon Voluntary Milk.—Following a reference to the matter by the President of the Board of Education at the Public Health Services Congress in November, 1938, an enquiry was made by the Director of Education, at the request of the School Medical Officer, as to the amount of milk supplied in the afternoon. The table below gives the position in November, 1938. All except eight Departments supplied afternoon milk, and special enquiries were made by the Director of Education from these Departments. As a result, at one—a Senior Boys' Department—no fewer than 32 boys wished to have afternoon milk.

PARTICULARS *RE* VOLUNTARY MILK.

NOVEMBER, 1938.

School.		Average No. Supplied in Afternoons.
Blackhorse Road	Senior Girls ..	—
	Junior Mixed ..	36
	Infants	26
Chapel End	Senior Boys ..	11
	Senior Girls ..	13
	Junior Mixed ..	62
	Infants	160
Coppermill Road	Senior Boys ..	15
	Senior Girls ..	—
	Junior Mixed ..	76
	Infants	—
Edinburgh Road	Senior Girls ..	13
Forest Road	Junior Boys ..	22
	Junior Girls ..	19
	Infants	8
Gamuel Road	Junior Boys ..	44
	Junior Girls ..	36
	Infants	94
Higham Hill	Junior Boys ..	34
	Junior Girls ..	27
	Infants	—
Joseph Barrett	Senior Boys ..	33
	Senior Girls ..	10
Markhouse Road	Senior Boys ..	27
	Junior Mixed ..	52
	Infants	55
Maynard Road	Junior Boys ..	66
	Junior Girls ..	1
	Infants	4
Mission Grove	Junior Mixed ..	46
	Infants	96
Roger Ascham	Junior Mixed ..	27
	Infants	81
Selwyn Avenue, E.4 ..	Boys	33
	Girls	9
	Infants	20
Thorpe Hall	Infants	130
Wm. E. Whittingham ..	Senior Boys ..	—
Wm. McGuffie	Senior Boys ..	10
	Senior Girls ..	7

School.		Average No. supplied in Afternoons.
Winns Avenue	Senior Boys ..	—
	Senior Girls ..	65
	Junior Mixed ..	7
	Infants	14
Wood Street	Junior Boys ..	35
	Junior Girls ..	1
	Infants	—
SELECTIVE CENTRAL SCHOOLS.		
Geo. Gascoigne Central ..	Boys	20
	Girls	—
William Morris Central ..	Boys	10
	Girls	4
NON-PROVIDED SCHOOLS.		
St. George's (R.C.) ..	Mixed	7
St. Mary's (C. of E.) ..	Girls	23
	Infants	24
St. Mary's (R.C.) ..	Junior Mixed ..	80
St. Patrick's (R.C.) ..	Mixed	50
St. Saviour's	Boys	21
	Girls	7
	Infants	31

12. (a) CO-OPERATION OF PARENTS.

The following table shows the attendance of parents during 1938:—

Boys.	Number Inspected.	Number of Parents.	Per cent. 1938.	Per cent. 1937.
Entrants	669	609	91.0	92.0
2nd Age Group	795	629	79.1	76.0
3rd Age Group	922	324	35.1	36.6
Totals	2,386	1,562	65.4	66.5
Girls.				
Entrants	657	611	92.9	91.0
2nd Age Group	784	652	83.1	79.2
3rd Age Group	930	605	65.0	52.1
Totals	2,371	1,868	78.7	74.6
Grand Total ..	4,757	3,430	72.1	70.7

(b) CO-OPERATION OF TEACHERS.

Renewed and grateful acknowledgment for the co-operation of Head Teachers and their staffs must be made. Generous help and co-operation has invariably been experienced.

(c) CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

The Superintendent Attendance Officer and his staff have again co-operated with the work of the School Medical Service, and there is almost daily proof of the advantage resulting from it.

(d) CO-OPERATION OF VOLUNTARY BODIES.

(*a*) **The Invalid Children's Aid Association.**—The Association, and especially its Secretary, Miss D. A. Lewis, has yet again rendered very valuable help, notably at the rheumatism clinic, in arranging for convalescent home treatment and in connection with the after-care of children attending the Open Air School and Brookfield Hospital. Miss Lewis kindly contributed the following report and statistics relating to the work of the Walthamstow Branch during 1938:—

"There was a slight increase in our work during 1938, and the number of children sent away increased from 222 to 246. For the first time, however, we record an appreciable drop in the average length of stay, which fell below 12 weeks. This is probably because no children were away 52 weeks, the longest stay being 44 weeks. There were more cases of anaemia and debility, which is a little disappointing following the improvement of the previous year.

"We missed the six Ventnor beds badly during the summer. The children had to wait very long periods to get away, often as much as two months. There also seemed to be general congestion all round. I wondered whether more Authorities were paying for children to go away and that this increased the numbers on waiting lists. Otherwise it indicated that more children had been ill all over London.

"New cases (in addition to many re-applications) were referred by:—

	Over 5 years.	Under 5 years.	Total.
Medical men, Hospitals and Dispensaries ..	114	31	145
Tuberculosis Dispensaries	—	—	—
Medical Officer of Health and Infant Welfare Centres	1	5	6
Education Committees and School Medical Officers	49	4	53
Public Assistance Committees	—	—	—
Local Authorities under schemes for—			
(1) Rheumatism	33	—	33
(2) Orthopaedic Care	96	92	188
Invalid Children's Aid Association	1	1	2
Parents	2	1	3
Voluntary Agencies	1	—	1

"Classification of Cases:—

Tuberculosis—Glands	2	—	2
,, —Joints	—	—	—
Anaemia and Debility	45	14	59
After-effects of acute illnesses	22	2	24
Marasmus and Malnutrition	13	—	13
Rheumatism, Chorea and Heart	26	3	29
Heart (Congenital)	—	—	—
Diseases of Lungs (Non-T.B.)—			
(*a*) Bronchitis, Pneumonia, etc. ..	32	8	40
(*b*) Asthma	4	—	4
Glands (Non-T.B.)	3	2	5
Diseases of Bones (Non-T.B.)	67	63	130
Diseases of Digestive Organs	4	2	6
Paralysis	8	6	14
Nervous Conditions	21	2	23
Congenital Deformities	18	18	36
Hernia	1	3	4
Diseases of—Ears	6	4	10
Eyes	2	2	4
Nose and Throat	11	2	13
Accidents	2	—	2
Various	10	3	13
Totals	297	134	431

"Help given to Old and New Cases (all ages):—

	Old.	New.
Sent to Special Hospitals and Convalescent Homes	41	205
Extensions from previous years	62	—
Provided with Massage and Exercises	—	8
Referred for visiting and advice	94	88
Clothes	—	32
Totals	197	333

"Number of visits paid, 1,226.

"Average length of stay in Convalescent Home, 11 weeks 6 days.

"37 children were sent away from the rheumatism clinic."

(*b*) **National Society for the Prevention of Cruelty to Children.**—The following summary of the work done in Walthamstow during 1938 is reported by Inspector Luff:—

Nature of Offence.		How Dealt with.	
Neglect	57	Warned and advised ..	70
Assault and ill-treatment	7	Otherwise dealt with ..	9
Advice sought	15	Convicted	1
Various	1		
Total	80	Total	80

Number of children dealt with over 5 years of age: boys, 58; girls, 42.

Number of children under 5 years of age, 62.

193 supervisory visits were made during the year, and 93 miscellaneous visits were made.

(*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 1938:—

"The distribution of footwear for the year ended 31st December, 1938, was higher than for the previous year, 1,166 pairs being distributed at a cost of approximately £350."

(*d*) Miss S. C. Turner, of the **Mental Welfare Section** of the Clerk to the Essex County Council's Department (formerly the Essex Voluntary Association for Mental Welfare), kindly contributes the following report on work in Walthamstow:—

"*Occupation and Training Centre.*—The Settlement, Greenleaf Road. Supervisor: Miss Barbara Drury. This centre provides training and occupation for defective children excluded from school and older girls who are unemployable. Attendance is voluntary, yet the number on the register continues to increase, and is now 34; the average daily attendance rises proportionately.

"The object of the centre is to fit each child as far as possible to live usefully in the community, and to prevent behaviour problems arising from repeated failures in every-day tasks and lack of adequate self-expression. Work at the Centre is carefully graded so that in sense training, handwork and domestic training steady progress is easily made.

"The quickened public interest in 'keep fit' is reflected in the Centre, where keep fit costumes have been supplied for the older girls and increased attention is given to physical training. Much progress has already been made and it is expected that considerable improvement in posture and movement will be noticeable next year.

"Children are brought to the Centre daily by guides, and a mid-day meal is supplied to the children at a cost of 1s. per head per week.

"The most pleasing feature of the progress during the year and the increased confidence in the Centre is the number of younger children who have been admitted and who are thus given a greater opportunity to benefit from the training.

"The Mental and After-Care Committee continue to take an interest in the Centre children and have again organised for them a very enjoyable outing and party.

"*Craft Class for Senior Boys*.—Former Commercial School, Hoe Street. Supervisor: Miss Carol Wood.

"This class for defective boys over 14 continues to meet in the mornings only. Twenty-two lads are now attending and taking part in the activities, which include woodwork, rug-making, gardening and games. Although the change of premises during the year have affected the output of the class, there has been no diminution of enthusiasm in the lads attending.

"The Mental and After-Care Committee again organised the outing and the visit to the pantomime, both of which were very successful and provided a great deal of happiness to the members of the class. The local Committee continue also to assist in the supervision of defectives in their homes; of these there are in Walthamstow 114 under statutory supervision, 3 under guardianship, 2 on licence from institutions, and 221 under voluntary supervision. Many thanks are due to the local Committee for their invaluable assistance."

(*e*) **Walthamstow Committee for Mental Welfare and After Care.**—Mr. L. F. Bristow, Hon. Secretary, kindly contributes the following report:—

"Miss Turner's report given above covers a great deal of our work in Walthamstow. The members of the Committee have worked enthusiastically, and in addition to the visiting, they arranged the annual re-union social held in May and the Christmas party in December, to which all those on our after-care list were invited.

"Thanks to the financial aid we get from the Essex County Council (Sunday Cinema Fund) we are able to do a lot more for these defectives than would otherwise be possible. Everyone received a gift at Christmas, and in special cases clothing and invalid chairs have been purchased. Grants are made to the Essex Voluntary Association to assist necessitous cases attending the Occupation Centre, thus ensuring that they receive a mid-day meal.

"We are very grateful to all those who assist us in our work, and to the Local Authority for their co-operation in our efforts on behalf of the mentally defective."

13. BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

Table 3 at the end of the report gives a full analysis of all exceptional children in the area.

(*a*) The ascertainment of such children continued along the lines detailed in last year's report and has, generally, been adequate.

(*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 ineducable mental defectives. An occupational centre is provided by the Essex Voluntary Association for Mental Welfare. The work of this Association is reported under Section 12 (*d*).

(*c*) General review 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 1938, and has been supplied by the Head Teacher, Miss Balls:—

	Blind.		Partially Blind.	
	Walthamstow.	Other Authorities.	Walthamstow.	Other Authorities.
Boys	3	5	20	3
Girls	—	2	20	5
Totals	3	7	40	8

The work done at the school is detailed in previous annual reports and in the following report of the Consultant Ophthalmic Surgeon, Dr. P. McG. Moffatt:—

"The work of the Myope School has been carried out with the usual care and enthusiasm of the staff. Miss Balls has been ever willing to co-operate in any proposal to increase the efficiency of the teaching, at the same time having due regard for saving sight.

"A list of the pupils attending the school, together with the various causes of their defective vision is given below.

Defect.	Boys.	Girls.
Myopia	19	19
High Hypermetropia	1	1
Albino	1	1
Nystagmus	4	1
Left eye enucleated	1	—
Congenital cataracts	1	2
Bilateral optic atrophy	1	—
Phlyctenular conjunctivitis and Corneal nebulae	1	1
Interstitial keratitis	1	—
Adherent leucoma	—	1
Macular defect	—	1
Glioma	—	1
Total	30	28

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

"The Committee provides a school at Wood Street for the teaching of blind boys and girls, and for the saving and safeguarding the sight of children whose eyes are in a precarious condition during those years of growth and education when they otherwise would be subjected to great strain.

"Thus there are two groups of children in the school:—

(1) The partially blind.

(2) Those who are 'blind within the meaning of the Act.'

"On the 31st December, 1938, the first group numbered 48 and the second group numbered 10.

"By a careful arrangement of the curriculum, and the employment of special methods of teaching and special educational apparatus adapted to the needs of the children, every effort is made to educate children of varying degrees of blindness, in such a manner that each child may develop its capacity for learning and doing to the fullest extent, in spite of the handicap of defective sight.

"In the instruction of the partially blind children, sight-saving methods, including books printed in 1-inch type, large maps and illustrations, written work performed on blackboards and typewriters by the children, ensure that the children subject their eyes to no strain whilst learning their lessons.

"Those children who are 'blind within the meaning of the Act' are taught the Braille system of reading and writing, and the Taylor frame is used in the working out of arithmetic.

"In addition to the ordinary school curriculum, various forms of manual work are undertaken by the children.

"For those children who travel a long distance to school, the Authority generously provides a two-course meal at mid-day, at a purely nominal cost.

"About 85 per cent. of the children availed themselves of the Milk Marketing Board's scheme for the purchase of milk in schools during the year.

"The school accommodates 85 children, but the number on roll did not exceed 66 last year.

"During the year, 19 children left school.

"Three were transferred back to the Elementary School, as the state of their eyes had improved with the care taken by doctors and teachers.

"One girl went to the Royal Normal College for the Blind for further training.

"Four girls obtained employment as shop assistants.

"One girl found work in a knitwear factory.

"Two girls are employed as waitresses in restaurants at London stores.

"One girl is employed as children's attendant at an orphanage.

"One girl is employed as a typist at a factory.

"One girl is employed at an art shop, framing pictures in passe-partout.

"One girl is employed at a leather work studio, preparing leather bags.

"One boy is learning french polishing.

"One boy assists on a baker's round.

"One boy is learning the butchering trade.

"One boy is learning the tool making trade."

(ii) **Deaf School.**—As in previous years, following an assessment of each child's hearing by means of the Audiometer, all children in attendance were examined by Dr. Francis Clarke, your Aural Surgeon. Any of the children requiring further advice during the year were referred to the weekly aural clinic. In addition, the children were given the usual medical inspection and re-inspection.

Miss V. K. Mitchell, the Teacher in Charge, reports as follows:—

"There were 21 children on the register at the end of 1938—10 boys and 11 girls. The defects were as follows:—

Deaf within the meaning of the Act.	Partially Deaf.	Speech Defects.	Aphasic.	Cleft Palate.
8	5	3	4	1

"During the year, four children were admitted—three hard of hearing and one who appears to be aphasic. Two of the hard-of-hearing children are from Leyton.

"Three children have left school, a hard of hearing boy to work in a factory, a deaf mentally defective boy to go to the L.C.C. Residential School at Penn, Bucks, to learn a trade, and a deaf girl to work at machine embroidery. Reports of these children and of old pupils of the school are all very satisfactory.

"One deaf girl, who is now 15 years old, has been attending the William Morris Central School for the last three years and having speech lessons for half an hour each day at the Deaf Centre. The interest taken in her by the Head Teacher and the staff of the Central School, and her excellent lip reading, are enabling her to take the R.S.A. examination in 1939.

"The ages of the children range from 6 years to 15 years. With the inclusion of such different types as deaf, partially deaf, hard of hearing, aphasic and children with speech defects in such a small group, the teaching has become very individual, with different methods for each case. The multitone apparatus is still used to advantage.

"The children take physical training or dancing each day. Four bigger boys play football in winter and cricket in summer once a week with those of the Wm. McGuffie School. In summer, the senior boys and girls attend swimming classes with the scholars of the Wm. Morris Central School.

"The senior boys spend one afternoon per week at the Wm. McGuffie Woodwork Centre, and the girls of 12 or over attend cookery classes.

"A new garden has been made in the playground. The children are keenly interested.

"We were sorry to lose Miss Hicks in July after four years at this school. Miss E. M. Johnson was appointed assistant teacher in October."

(iii) **Open Air School.**—Miss Thompson, the Head Teacher, reports as follows:—

"The Open Air School has now been open two full years and results are becoming more apparent.

"Four classrooms, accommodating 30 children each, are reserved for those requiring open air treatment, though some 12 orthopaedic infant cases are also grouped in the room for the smallest infants. One room is set aside for manual training and one is reserved for the older orthopaedic and cardiac cases.

"During the year, weekly medical inspections have been maintained, and once a month prospective candidates for admission attend for examination. Two dental inspections have been held and in November the Senior Dental Surgeon remarked on the much improved state of the children's teeth.

"The feeding of the school children is now regulated and inspected by a member of the Education Committee and the dietitian. The school staff weigh the children once a month and the results are showing an almost steady gain of approximately 1½lbs. average, except where there are losses due to minor ailments, new admissions, etc.

"Miss Hawkes, Organiser of Physical Training in the district, has advised us specially on the work suitable for debilitated children and has commended the management of this important subject for the school.

"Favourable comment has been made on the Art work. This subject has a beneficial influence on children whose vitality is not necessarily high, by giving them opportunities for creative expression and occupation.

"The Orthopaedic Section continues working on the lines of an ordinary elementary school. The needlework of the girls is of a high standard and enables most of them to enter the trade as wage earners immediately on leaving school. The cripple boys are usually sent to a training school.

"Children who have left during 1938:—

	Open Air Section.		Orthopaedic Section.	
	Boys.	Girls.	Boys.	Girls.
Discharged and returned to ordinary Elementary School	35	26	—	2
Left for work	8	—	5	8
Left District	3	—	1	1
Left for Convalescence or Hospital	6	6	2	—
Training School	—	—	2	—
Total	52	32	10	12 11

"The number on roll at December 21st, 1938, was as follows:—

Debilitated.		Epileptic.		Orthopaedic.		Cardiac.		Total.	
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
63	54	1	2	14	12	5	6	83	74

(iv) **Orthopaedic Scheme.**—The arrangements whereby the Superintendent Health Visitor and the Welfare Masseuse attended each clinic was continued. The close liaison has proved very valuable. A total of 15 Consultant sessions were held in 1938.

The scheme is under the clinical charge of Mr. B. Whitchurch Howell, F.R.C.S., Consulting Orthopaedic Surgeon, who reports as follows:—

"The statistics ably compiled by Miss Garratt and her staff give some indication of the work carried out in this clinic at the Open Air School at Hale End Road.

"The figures vary slightly from year to year as to the total number of admissions into hospital for surgical treatment.

"The chief points of note during the last twelve months are: the increased health of the children admitted to the Physically Defective School; the eager co-operation of the parents in their treatment, and the enthusiasm of the staff carrying out their treatment.

"It is, however, to be regretted that there is an increasing number of cases of bunions and flat foot, due, in the main, to the wearing of unsatisfactory foot-gear. This matter is being dealt with, and it is hoped that no permanent disabilities will thereby arise.

"My personal thanks are due to Dr. Powell, School Medical Officer, and the Orthopaedic Staff under Miss Garratt and Miss Lewis."

ORTHOPAEDIC SCHEME.

Defects.	Boys.			Girls.		
	5–16 years.	Under 5 yrs.	Over 16 yrs.	5–16 years.	Under 5 yrs.	Over 16 yrs.
Anterior Poliomyelitis..	14	2	3	8	3	13
Scoliosis. Kyphosis and Lordosis	12	—	—	21	1	1
Rickets—						
(*a*) Genu Varum ..	3	42	—	2	19	—
(*b*) Genu Valgum ..	15	26	—	15	23	—
Pes Plano Valgus ..	82	18	—	37	18	—
Spastic Paralysis ..	10	3	—	7	1	—
Arthritis	2	—	—	3	—	2
Talipes—						
(*a*) Equino Varus ..	8	—	1	3	1	—
(*b*) Equino Valgus ..	2	—	—	1	me l	—
(*c*) Mid-tarsal Varus..	3	—	—	—	—	—
(*d*) Calcaneo Valgus..	1	—	—	—	5	—
Torticollis	2	7	—	6	4	—
Congenital Dislocation of Hip..	—	—	—	5	3	—
Osteomyelitis	1	—	2	—	—	—
Congenital Defects ..	7	6	—	4	3	—
Amputation—Leg ..	—	—	—	2	—	—
Ataxia	2	—	—	2	—	—
Hammer Toe	2	—	—	7	—	—
Spina Bifida	1	—	—	—	1	—
Schlatters Disease ..	—	—	—	1	—	—
Erb's Paralysis ..	—	—	—	1	—	—
Tibial and Flexion Deformity of Toes ..	1	—	—	1	2	—
Bakers Cyst	1	—	—	—	—	—
Asthma	6	—	—	1	—	—
Digitus Varus	1	—	—	1	—	—
Hemihypertrophy ..	1	—	—	1	—	—
Fractures	1	—	—	1	—	—
Hallux Valgus	1	—	—	5	—	—
Constipation	1	—	—	1	—	—
Epiphysitis	1	—	—	—	—	—
Perthe's Disease ..	1	—	—	1	—	—
Hallux Rigidus.. ..	—	—	—	1	—	—
Freiburg's Disease ..	—	—	—	1	—	—
Cut Tendon—Flexor Profundus Digitorum III Left	—	—	—	1	—	—
Rheumatism	1	—	—	—	—	—
Amotonia	—	—	—	—	1	—
Miscellaneous .. .. surgical Tuberculosis	5 8	5 -	— 2	3 5	7 -	— 1
Totals	196	109	8	148	93	17

Number of cases seen by the Surgeon:—

From Physically Defective Centre	72
From other schools	194
Over school age	34
Under school age	154
Total	454

New cases seen by the Surgeon:—

School age	108
Under school age	81
Total	189

Total number of examinations by Surgeon	643
Total number of cases discharged by Surgeon	83
Average number of examinations made per session	42.9
Cases discharged by Surgeon and for after-care by Masseuse:—	
School age	57
Under school age	38
Total	95

Cases closed by Surgeon for non-attendance	43
Cases of school age away for training	3
Number of attendances for orthopaedic and massage treatment	4,230
Average number of attendances per session	10.1
Number of sessions held:—	
For Medical inspection	15
For Treatments	418
Total number of visits by Instrument Maker	21

(v) **Brookfield Orthopaedic Hospital.**—The orthopaedic scheme continues to depend for a great deal of its success on Brookfield Hospital, which is administered by the Essex County Council. It is a hospital school recognised by the Board of Education and the Ministry of Health. Thirty beds are provided and Mr. Whitchurch Howell is the Orthopaedic Consultant in charge.

Miss Garratt, C.S.M.M.G., has kindly summarised the admissions and operations done during 1938 as follows:—

Admissions (Walthamstow cases only):—

Under 5 years of age	6
5 years and over	7
Total	13
Number who were already in Hospital on January 1st, 1938	5

Classification of Defects.	Under 5 years.	5 years and over.
Rickets	1	—
Anterior Poliomyelitis	3	1
Congenital Dislocation of Hips	2	1
Talipes—		
(*a*) Equino Varus	1	1
(*b*) Calcaneo Valgus	1	—
Polyarthritis	—	1
T.B. Knee	—	1
Epiphysitis Hip	—	1
Hammer Toe	—	1
Spina Bifida	—	1
Torticollis	—	1
Cut Tendon (Flexor Profundus Digitorum)	—	1

Classification of Operations.	Under 5 years.	5 years and over.
Osteoclasis	1	—
Congenital Dislocation of Hip—		
(*a*) Open Reduction	—	1
(*b*) Closed Reduction	2	—
Tenotomy—		
(*a*) Sterno Mastoid	—	1
(*b*) Tendo Achilles	1	—
Arthrodesis—		
(*a*) Scaphoid Joints	1	—
(*b*) Knee	—	1
(*c*) Foot	—	1
(*d*) Toe	—	1
Exploration and Tendon Repair (Flexor Profundus Digitorum)	—	1

(vi) **Mental Deficiency—Ascertainment.**—Ascertainment has proceeded along the lines detailed in previous years. A summary of the 69 intelligent quotient examinations is given below. Of the 51 children not mentally deficient, 11 had intelligence quotients of or above 90, and 29 were between 80 and 89.

Certification.—The School Medical Officer and two of the assistant School Medical Officers are recognised by the Board of Education as certifying officers.

A summary of the work done under this heading during the last two years is given below:—

	1938.	1937.
Not Mentally Defective or Dull and Backward	47	38
Physically Defective	—	4
Border-line Mentally Defective	4	15
Mentally Defective	15	14
Mentally Defective (ineducable)	—	3
Imbeciles	3	3
Idiots	—	—
Totals	69	76

School for Mentally Defective Children.—Your Authority provide a special school with accommodation for 130 children.

At the end of 1938 the classification, according to the latest available intelligence quotients, was as follows:—

	1938.	1937.	1936.	1935.
Intelligence Quotient 80 to 89 ..	6	2	3	4
,, ,, 70 to 79 ..	10	5	8	11
,, ,, 60 to 69 ..	21	20	28	29
,, ,, 50 to 59 ..	16	16	16	10
,, ,, 40 to 49 ..	4	4	1	5
,, ,, 30 to 39 ..	—	—	—	1
Not recently tested	2	2	3	1
Totals	59	49	59	61

A special visit is paid to the school every term, and all cases considered to be ineducable by the Head Teacher are carefully reviewed and, if necessary, excluded and notified to the County Council for supervision.

(vii) **Child Guidance.**—The reference of children requiring guidance to the London Child Guidance Clinic continued during 1938. The fee for initial consultation is 15s., and for each subsequent treatment 5s. for psychiatric and 2s. 6d. for psychological treatment.

One case first referred in 1936 and 6 cases referred in 1937 still continued to attend the Clinic.

Ten new cases were referred for the following reasons:—

Delinquency 1, Pilfering 2, Uncontrollable temper and cruelty 1, Maladjustment 3, Sleeplessness and refusal to go to school 1, Nervousness and sleepwalking 1, Enuresis 1.

The Leyton Authority accepted responsibility for payment with regard to one case referred, and the responsibility for another was accepted by the Essex County Council.

169 attendances were made by these patients at a cost of £41 12s. 6d., against which certain recoveries were made.

(viii) **Speech Therapy.**—Miss I. M. S. Knight, the Speech Therapist, reports as follows:—

"I am pleased to report a good year with regard to speech therapy, although somewhat disorganised during the last term. I can say that in every case of withdrawal due to school-leaving age or removal from the district, each case was showing some degree of improvement. I found a definite instability on the part of the children during the last term, which I attributed to the international situation. This was probably noticeable because so many children suffering with defect of speech are hypersensitive and nervous, and the recovery from this was slow.

"A puppet theatre has been added to the apparatus for helping towards correct and easy articulation. The children love it and although we cannot attain a 'public performance' standard it is a great asset and help. Some day it is hoped to invite a small audience to watch our efforts, but it must be understood that when a child can speak freely and without self-conscious effort he must leave the clinic to make room for another child in need of therapeutic treatment, consequently I feel we cannot attain as a whole the standard we would like because the speech of each individual child is at such varying stages of improvement.

"An aquarium was introduced, but, unfortunately, during the summer holidays most of the fish died from over-feeding. These fish were watched and talked about so much that several parents came to see this wonderful aquarium. I am hoping to replace fish and plants at an early date, so that every-day interests can be discussed and speech observed and corrected when the children are off their guard. Without the aid of such interesting devices speech therapy could be a very dull business; with them the children learn to love the work, hardly realising that it is such; the confidence which so many have lost or never had, through their inability to utter accurate sounds, returns.

"Lastly, parents' meetings were organised inviting the parents in groups to visit the clinic with the idea of discussing in an informal way their children's progress. These meetings have been most helpful to me, and, I trust, the parent too. It has been suggested that parents be allowed to visit and watch a demonstration lesson. I think this a very good idea and worth consideration. The co-operation of the parent in the treatment of speech defects is so important, and contact in this way has helped to my entire satisfaction. There are still two groups to meet for discussion.

"I feel I cannot finish without thanking the Head Teachers for valuable information sent on to me at various times during the year, but for this helpful co-operation I should many times have been the loser."

TABLE OF RESULTS.

Defect.	Discharged. Cured.	Discharged. With-drawn.	Left School.	Transferred to Special Schools.	Left District.
Stammer	7	3	8	—	4
Defective Articulation ..	10	1	—	3	1
Lisp	4	—	3	—	—
Cleft Palate	—	—	1	—	—
Nasal Intonation ..	—	—	—	—	1
Totals	21	4	12	3	6

Convalescent Home Treatment.—235 children were sent away for convalescent home treatment during 1938. There were 80 children remaining in convalescent homes and hospital schools on December 31st, 1938.

The conditions for which children were sent included the following:—Debility, 48; Heart, 14; Rheumatism, 11; Chest, 48; Anaemia, 21; Malnutrition, 11; Nervousness, 22; after infectious illness, 17; Surgical, 5; Ear Disease, 9; Various, 35.

A total of 37 children were sent to the convalescent homes or heart homes from the rheumatism clinic. The average length of stay in all homes has been 11 weeks and 6 days.

14. FULL-TIME COURSES OF HIGHER EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

The Authority for the provision of such courses is the Essex County Council.

15. NURSERY SCHOOL.

The medical and nursing supervision continued mainly on the lines detailed in previous reports, *i.e.*, (*a*) examination of new admissions at the school clinic as soon as possible after admission to school; (*b*) stripped examinations of each child once per term; and (*c*) annual routine examinations. Parents are invited to be present at examinations (*b*) and (*c*).

Miss Richards, Head Teacher, contributes the following report:—

"Both the health and consequently the attendance of the children has been considerably better during the winter of this year than in the preceding years.

"This is partly attributable to a fairly mild winter, but also to other causes:—

"(*a*) The children have been drinking more milk (*i.e.*, every child has one pint of milk to drink per day, with the exception of the two-year-olds, who find two-thirds of a pint quite sufficient).

"(*b*) The special diet which the children have had during the year has cut down the consumption of starchy foods to a minimum, and consequently the muscles of the children have improved and there is less excessive fat. Also there has been less nasal catarrh and fewer colds than in former years.

"(*c*) Daily periods of concentrated physical activity with special apparatus (as suggested by Miss Hawkes, Physical Training Organiser) have done much to improve the muscular tone and general health of the children.

"At the recent medical examination of the children Dr. Clarke expressed the opinion that the general health of the children was very good and that they showed definite muscular improvement. She also commented on the few actual defects.

"The attendance in two groups was rather badly depleted in the Christmas term owing to an outbreak of whooping cough in the neighbourhood.

"One slight alteration in the general procedure should, perhaps, be recorded. Owing to the difficulty of adequate supervision of cleaning teeth with tooth brushes, this activity has been discontinued, and the children are now being given one-eighth of an apple to eat after every meal."

Children under 5 years of age.—The Superintendent of Attendance Officers kindly states that in December 1938, there were 566 children on the registers born in the years 1934 and 1935, apart from children at the Nursery School. Every Infants Department had such children on its register, the maximum number being 53, the average number per department being 31.4.

There were five Nursery classes, *i.e.*, Gamuel Road (2), and one each at Roger Ascham, St. Mary's R.C. and Thorpe Hall Schools.

16. SECONDARY SCHOOLS.

The Authority for the provision of Secondary Schools in Walthamstow is the Essex County Council. The opening of the new Technical College in September was an outstanding event in connection with technical education.

(*a*) **Dental Inspection and Treatment.**—Reference has been made in Section 7 (*g*) to the dental inspection and treatment of pupils attending Secondary and Technical Schools.

(*b*) **Medical Inspection and Treatment.**—The inspection and treatment of the pupils attending the Secondary and Technical Schools was continued during 1938. The numbers on roll at the end of the December term, 1938, were as follows:—

The Walthamstow High School for Girls	..	413
The Sir Geo. Monoux Grammar School	..	549
South-West Essex Technical College—Girls	..	308
Boys	..	583

The following table shows the findings at medical inspection:—

	High School. (Girls.)	Sir Geo. Monoux Grammar (Boys.)	South-West Essex Technical College. (Girls.)	(Boys.)
Number inspected:—				
Entrants	80	105	194	151
12 years old	79	88	—	—
15 years old	12	92	185	83
Total	171	285	379	234
Specials	301	24	41	89
Parents present	147	177	185	174
Number referred for treatment (excluding Dental and Uncleanliness)	61	41	67	77
Number referred for observation	29	32	34	26
Number referred for treatment (excluding Vision, Dental and Uncleanliness)	47	17	54	63
Nutrition—A.	37	88	173	85
B.	126	188	202	139
C.	8	9	4	10
D.	—	—	—	—
Defects:—				
Skin, requiring treatment ..	6	5	3	24
Blepharitis, requiring treatment	1	—	6	1
Conjunctivitis, requiring treatment	4	1	—	—
Defective Vision (excluding squint)—				
Requiring treatment ..	14	24	13	14
Requiring observation ..	6	2	3	2
Other Conditions of Eyes, requiring treatment ..	2	—	1	2
Defective Hearing, requiring treatment	1	1	4	2
Otitis Media—				
Requiring treatment ..	—	—	3	—
Requiring observation ..	—	—	—	—
Enlarged Tonsils—				
Requiring treatment ..	—	—	1	4
Requiring observation ..	6	3	3	11
Other Conditions of Nose and Throat, requiring treatment	2	1	3	1

	(Girls.)	(Boys.)	(Girls.)	(Boys.)
Speech—				
Stammer, requiring treatment	—	—	—	—
Other forms, observation..	—	—	—	—
Teeth, requiring treatment..	4	15	23	5
Heart—				
Organic—				
Requiring treatment ..	—	—	—	1
Requiring observation..	—	—	1	—
Functional—				
Treatment	—	1	3	—
Observation	2	1	3	—
Anaemia, requiring treatment	2	—	—	2
Rheumatism, requiring treatment	1	—	—	—
Lungs, other Conditions (non-tubercular), observation	—	3	9	1
Deformities:—				
Spinal Curvature, requiring treatment	1	—	—	1
Other forms, requiring treatment	20	8	22	27
Other Defects and Diseases—				
Requiring treatment ..	12	2	3	8
Requiring observation ..	1	4	7	7

The number of attendances made at the clinics for treatment is shown below:—

Minor Ailments	238
Ophthalmic	92
Orthopaedic	252
Rheumatism	18
Aural	29
Speech	145

The total payment made by the Essex County Council in regard to medical and dental inspection and treatment for the year ending 31st March, 1939, was £672 12s. 0d.

17. PARENTS' PAYMENTS.

The approved scales for the recovery of fees in respect of treatment for tonsils and adenoids, ringworm and dental defects are set out on the back of the leaflets in use for the purpose of recording the parents' agreement for such treatment.

In the case of the members of the Hospital Savings Association, the vouchers are accepted in lieu of parents' payments, and the contributions are recovered from the Association.

The full cost of the appliances supplied under the orthodontic scheme is recovered from the parents before they are supplied.

Except in necessitous cases, parents pay in full for all spectacles under an agreed scale of charges by all the opticians on the official rota.

Recovery is also made in respect of Child Guidance and Artificial Sunlight treatment.

18. HEALTH EDUCATION.

(*a*) **Dental.**—Fourteen lectures were given by the Lecturers of the Dental Board of the United Kingdom.

(*b*) **Films.**—Four films were loaned for exhibition by the Health and Cleanliness Council.

(*c*) The Director of the National Milk Publicity Council reports that the following lectures were given during 1938 by the Council's lecturer:—

Date.	No. of Lectures.	Attendances.	School.
June 17th	2	350	Chapel End Infants.
	2	373	,, Junior Mixed.
June 23rd	1	60	Markhouse Road Senior Boys.
June 24th	1	200	Roger Ascham Junior Mixed.
	1	240	,, ,, Infants.
July 1st	2	350	Coppermill Road Junior Mixed.
July 7th	1	170	,, ,, Senior Girls.
	1	200	,, ,, Senior Boys.
July 8th	1	180	Forest Road Infants.
	3	225	,, Junior Boys.
July 11th	1	160	Chapel End Senior Girls.
July 12th	1	200	Blackhorse Road Senior Girls.
July 14th	1	160	Gamuel Road Infants.
July 15th	1	250	Blackhorse Road Infants.
Aug. 29th	2	260	Wm. Ell. Whittingham Senior Boys.
Aug. 30th	2	350	Jos. Barrett Senior Girls.
Sept. 1st	1	150	Higham Hill Infants.
Sept. 1st	3	170	,, Junior Boys.
Sept. 2nd	1	76	Markhouse Road Infants.
Aug. 30th	2	210	Gamuel Road Junior Girls.
Sept. 16th	2	262	Maynard Road Infants.
Nov. 4th	1	212	Winn's Avenue Infants.
Nov. 7th	3	312	Coppermill Road Infants.
Nov. 11th	2	180	Winn's Avenue Senior Boys.
Nov. 18th	2	356	Mission Grove Junior Mixed.
	2	294	Selwyn Avenue Infants.
Nov. 25th	1	140	Mission Grove Infants.
Nov. 4th	2	249	Thorpe Hall Infants.
Nov. 4th	1	254	Winn's Avenue Senior Girls.
Nov. 18th	2	390	Selwyn Avenue Girls.
Dec. 6th	1	250	Edinburgh Road Girls.
Dec. 9th	1	222	Pretoria Avenue Junior Mixed.
	2	248	Wood Street Boys.
	1	225	,, Infants.
	53	7,928	

19. SPECIAL ENQUIRIES.

(*a*) **Diphtheria Immunisation.**—The investigation into the efficiency of immunisation by Alum Precipitated Toxoid was continued, and is discussed in Section 8 of the Report.

(*b*) **Rheumatic Carditis following Infectious Disease.**—The report on the investigation into rheumatic carditis following infectious disease is included in the report of Dr. Sheldon, Physician in charge of the Rheumatism Clinic.

(*c*) **Sore Throat Follow-up Scheme.**—A new scheme for the follow-up of children after sore throat was begun at the end of the year and is referred to in the report of Dr. Sheldon.

(*d*) **Aural Clinic.**—Dr. Francis Clarke carried out special work on "Displacement in sinus suppuration" and "Tonsil Suction."

20. MISCELLANEOUS.

(i) **Employment of Children and Young Persons.**—Mr. R. Dempsey, the Juvenile Employment Officer, gives the following report on the work of the Bureau:—

"*Choice of Employment.*—The year was not so good for industry and commerce as the previous year, when very few juveniles were unemployed. About November, 1937, it was noticed that large numbers of boys and girls were losing their employment, which was unusual for that time of year. Moreover, employers both in Walthamstow and the City were slow in offering vacancies. There appeared to be a general feeling that the international situation was likely to become worse and nobody wanted to be overloaded with stock. These conditions continued throughout the year. Nevertheless, the record of vacancies and placings as set out in Appendix 3 shows a large increase over the previous year, the total placings reaching the record figure of 2,631, compared with 1,716 during the previous year.

"The Committee note with pleasure that the number of placings with the co-operation of other Employment Exchanges has increased from 443 to 684.

"Advice to school leavers was continued as in previous years by visits to the schools. In all, 2,133 scholars were interviewed individually, and 837 parents were present at the interviews. The number of scholars was approximately the same as the previous year, but there was an increase of 173 parents who took the trouble to accept the invitation to be present at the school when their children were being interviewed.

"The Juvenile Employment Officer and his assistants have given a number of addresses to associations who have invited them to talk on the subject of the Juvenile Employment Bureau.

"*Unemployment Insurance and Assistance.*—The number of claims to benefit increased this year from 818 to 1,425, and the total amount paid in benefit (£955) was £617 in excess of the amount paid last year.

"There were 11 claims in respect of Unemployment Assistance, and benefit amounting to £5 9s. 6d. was paid.

"No claims were made during the year under the Agriculture Insurance Scheme.

"Unemployment Insurance books issued to new entrants numbered 2,270, this being a decrease of 243.

"At the annual exchange of Unemployment Books there was a decrease of 750 books exchanged. This is largely accounted for by a general reduction in the number of juveniles employed by individual firms, and also by the fact that a number of firms on the borders, but outside Walthamstow, sent their books to be exchanged at the Walthamstow Bureau last year.

"*Industrial Distribution.*—The annual exchange of Unemployment Books gives an idea as to the numbers of boys and girls employed within the area in various industries. The number of books exchanged under the various age groups were:—

Boys, 16-17 years	1,753
Boys, 14-15 years	1,315
Girls, 16-17 years	1,734
Girls, 14-15 years	1,118
Total	5,920

(ii) **Employment of Children.**—172 children were examined by the medical staff under the Employment of Children Bye-laws, and all were passed as fit.

Employment of Children in Public Entertainments.—Licences were granted to 34 children for employment on production of satisfactory certificates from the medical staff.

Medical Examinations.—The following examinations were made during 1937 by the medical staff:—

	New Appointments.
Teachers	40
Others	17

21. STATISTICAL TABLES.

The statistical tables required by the Board of Education follow:—

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31ST DECEMBER, 1938, BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

Total number of children notified, 8.

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	—	—
(*b*) Imbeciles	2	—
(*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	—	—
2. Feeble-minded children notified on leaving a Special School on or before attaining the age of 16	3	3
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	5	3

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC ELEMENTARY SCHOOLS.

A.—Routine Medical Inspections.

Number of Inspections in the prescribed Groups:—

Entrants	1,326
Second Age Group	1,579
Third Age Group	1,852
Total	4,757
Number of other Routine Inspections	315
Grand Total	5,072

B.—Other Inspections.

Number of Special Inspections	4,568
Number of Re-Inspections	30,160
Total	34,728

C.—Children found to require Treatment.

NUMBER OF *individual children* FOUND AT *Routine* MEDICAL INSPECTION TO REQUIRE TREATMENT (**excluding Defects of Nutrition, Uncleanliness and Dental Diseases**).

NOTE : No individual child should be counted more than once in any column of this table; for example—A child suffering from defective vision and adenoids should appear once in column 2, once in column 3, and "once only" in column 4. Similarly a child suffering from two defects other than defective vision should appear once only in column 3 and once in column 4.

Group. (1)	For defective vision (excluding squint). (2)	For all other conditions recorded in Table IIA. (3)	Total. (4)
Entrants	6	263	268
Second Age Group	65	280	337
Third Age Group	117	257	366
Total (Prescribed Groups)	188	800	971
Other Routine Inspections	16	49	65
Grand Total	204	849	1036

TABLE II. A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1938.

Defect or Disease.			Routine Inspections.		Special Inspections.	
			No. of Defects.		No. 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)
Skin	1	Ringworm:— Scalp	—	—	9	—
	2	Body	3	—	28	—
	3	Scabies	2	—	52	—
	4	Impetigo	6	2	152	—
	5	Other Diseases (Non-Tuberculous)	78	1	206	—
		Total (Heads 1 to 5)	89	3	447	—
Eye	6	Blepharitis	46	—	87	—
	7	Conjunctivitis	22	—	217	—
	8	Keratitis	—	—	—	—
	9	Corneal Opacities	—	—	—	—
	10	Other Conditions (excluding Defective Vision and Squint)	12	—	95	—
		Total (Heads 6 to 10)	80	—	399	—
	11	Defective Vision (excluding Squint)	204	18	105	1
	12	Squint	27	10	20	—
Ear	13	Defective Hearing	10	5	103	—
	14	Otitis Media	30	11	212	—
	15	Other Ear Diseases	2	2	92	—
Nose and Throat	16	Chronic Tonsillitis only	86	235	66	25
	17	Adenoids only	5	16	—	—
	18	Chronic Tonsillitis and Adenoids	3	16	5	—
	19	Other Conditions	16	2	291	—
20		Enlarged Cervical Glands (Non-Tuberculous)	99	—	34	—
21		Defective Speech	16	9	20	2
Heart and Circulation	22	Heart Disease:— Organic	35	7	10	—
	23	Functional	8	12	5	1
	24	Anaemia	31	4	28	—
Lungs	25	Bronchitis	75	13	4	—
	26	Other Non-Tuberculous Diseases	6	—	13	—
Tuberculosis	27	Pulmonary:— Definite	—	—	—	—
	28	Suspected	—	—	—	—
		Non-Pulmonary:—				
	29	Glands	—	—	—	—
	30	Bones and Joints	1	—	—	—
	31	Skin	—	—	—	—
	32	Other Forms	—	—	—	—
		Total (Heads 29 to 32)	1	—	—	—
Nervous System	33	Epilepsy	2	1	1	—
	34	Chorea	2	3	3	1
	35	Other Conditions	—	—	4	—
Deformities	36	Rickets	5	1	—	—
	37	Spinal Curvature	2	2	2	—
	38	Other Forms	29	10	42	—
39		Other Defects and Diseases (excluding Defects of Nutrition, Uncleanliness and Dental Diseases	221	26	1,879	2
		Total number of defects	1,084	406	3,785	32

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

Age Groups.	Number of Children Inspected.	A (Excellent).		B (Normal).		C (Slightly subnormal).		D (Bad).	
		No.	%	No.	%	No.	%	No.	%
Entrants	1,326	439	33.1	780	58.8	107	8.0	—	—
Second Age Group	1,579	540	34.1	932	59.0	107	6.8	—	—
Third Age Group..	1,852	786	42.4	993	53.6	73	3.9	—	—
Other Routine Inspections ..	315	113	35.8	179	56.8	23	7.3	—	—
Total ..	5,072	1,878	37.0	2,884	56.8	310	6.1	—	—

Table III.—RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
5	—	—	—	5

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
41	—	—	—	—	41

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
8	—	—	—	8

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf, and Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
13 (8 Aphasic)	—	—	—	13

MENTALLY DEFECTIVE CHILDREN.

Feeble-minded Children.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
63	4	—	—	67

EPILEPTIC CHILDREN.

Children Suffering from Severe Epilepsy.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
5	—	—	—	5

PHYSICALLY DEFECTIVE CHILDREN.

A.—Tuberculous Children.

I.—Children Suffering from Pulmonary Tuberculosis.

(Including pleura and intra-thoracic glands.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
15	12	2	—	29

II.—Children Suffering from Non-pulmonary Tuberculosis.

(This category should include tuberculosis of all sites other than those shown in (I) above.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
9	29	3	—	41

B.—Delicate Children.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution	Total.
160	—	—	—	160

C.—Crippled Children.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
25	—	—	—	25

D.—Children with Heart Disease.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
18	—	—	—	18

Children Suffering from Multiple Defects.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total
Mentally Defective and Deaf ..	2	—	—	—	2
Mentally Defective and Physically Defective ..	1	—	—	—	1

TABLE IV.—RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER, 1938.

TREATMENT TABLE.

Group I.—Minor Ailments (excluding Uncleanliness, for which see Table VI).

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Skin:—			
Ringworm—Scalp:—			
(i) X-Ray Treatment. If none, indicate by dash	3	—	3
(ii) Other Treatment	6	—	6
Ringworm—Body	28	—	28
Scabies	52	—	52
Impetigo	152	—	152
Other skin disease	206	5	211
Minor Eye Defects .. .. (External and other, but excluding cases falling in Group II)	410	2	412
Minor Ear Defects	404	9	413
Miscellaneous .. .. (*e.g.*, minor injuries, bruises, sores, chilblains, etc.)	1,762	209	1,971
Total	3,023	225	3,248

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I).

	No. of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including squint) (Operations for squint should be recorded separately in the body of the School Medical Officer's Report.)	New 387 Old 103	3	493
Other defect or disease of the eyes (excluding those recorded in Group I)	39	—	39
Total	529	3	532

	Under the Authority's Scheme.	Otherwise.	Total.
No. of Children for whom spectacles were—			
(*a*) Prescribed	571	3	574
(*b*) Obtained	550	3	553

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

Received Operative Treatment.												Received other Forms of Treatment.	Total Number Treated.
Under the Authority's Scheme, in Clinic or Hospital. (1)				By Private Practitioner or Hospital, apart from the Authority's Scheme. (2)				Total. (3)				(4)	(5)
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
—	—	110	—	2	—	—	—	2	—	110	—	109	221

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.
(iv) Other defects of the nose and throat.

Group IV.—Orthopaedic and Postural Defects.

	Under the Authority's Scheme. (1)			Otherwise. (2)			Total number treated.
	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	
Number of Children treated	14	—	340	—	—	—	352

Table V.—Dental Inspection and Treatment.

(1) Number of Children who were:—

Inspected by the Dentist:

	Aged:			
(*a*) Routine Age Groups	5	..	988	
	6	..	920	
	7	..	1307	
	8	..	1174	
	9	..	1190	
	10	..	1130	Total .. 9429
	11	..	805	
	12	..	770	
	13	..	677	
	14-16	..	468	

(*b*) Specials	.. ..	1816
	Grand Total	11245
(2) Found to require treatment	.. ..	9209
(3) Actually treated	.. ..	5842
(4) Attendances made by children for treatment	.. .. ..	10799

(5) Half-days devoted to:—

Inspection	.. ..	89
Treatment	.. ..	1411
Total	.. .. ..	1500

(6) Fillings:—

Permanent teeth	..	4827
Temporary teeth		1147
Total	.. .. ..	5974

(7) Extractions:—

Permanent teeth	..	2012
Temporary teeth	..	8596
Total	.. .. ..	10608

(8) Administrations of general anaesthetics for extractions 4723

(9) Other operations:—

Permanent teeth	..	1843
Temporary teeth	..	319
Total	.. .. ..	2162

Table VI.—Uncleanliness and Verminous Conditions.

(i.) Average number of visits per school made during the year by the School Nurses	4
(ii.) Total number of examinations of children in the Schools by School Nurses	42886
(iii.) Number of individual children found unclean	1285
(iv.) Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	—
(v.) Number of cases in which legal proceedings were taken:—	
(*a*) Under the Education Act, 1921	—
(*b*) Under School Attendance Byelaws	—