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CORPORATION OF GLASGOW

Health and Welfare Department

EDUCATION HEALTH SERVICE

REPORT

ON THE

**Medical Inspection and Treatment
of School Children**

FOR THE YEAR ENDED 31st JULY, 1950

Ordered by the Committee on Health and Welfare to be printed





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REPORT OF THE

COMMISSIONERS

OF THE

LAND OFFICE

IN RESPONSE TO A RESOLUTION

PASSED BY THE HOUSE OF REPRESENTATIVES

1870

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GENERAL INTRODUCTION.

This REPORT is the forty-first since the establishment of medical inspection in Glasgow in the year 1909, the twentieth since the transfer to the Public Health Department in 1930, and the twelfth since the form of report desired by the Department of Health for Scotland was recast in 1939.

In some respects, the pattern of the work undertaken during the session differed from that of recent years as a result of innovations and expansions. From the beginning of the session, the medical supervision of children at nursery schools became the responsibility of the Education Health Service and each of the schools was allocated a weekly visit—medical officer and nurse attending on alternate weeks. Initiated also from the beginning of the session was the medical examination of students on pre-vocational courses for nursing, commerce, engineering, and building. Another scheme instituted was the medical supervision of kitchen staffs who handle food supplied for consumption by school children; both new and old employees were subjected to medical examination, including X-ray, and arrangements have been made for all those remaining in employment to be examined annually. It is intended to include dining-room employees in the scheme as soon as possible.

On the treatment side, the notable innovation was in connection with defective hearing. Audiometric survey of certain age-groups of children revealed a number of cases suffering from varying degrees of deafness; these children were examined at school clinics by specialists, treated at clinic, hospital, etc., if necessary, and graded according to their ability to take advantage of the educational facilities available. The opening of a new orthopaedic clinic at Avenuepark Street (to replace the one discontinued at Ashley Street) made it possible to include facilities for dealing with plaster cases for the first time in any Glasgow school clinic.

The provision of additional residential schools outwith the city resulted in a considerable increase in the number of children presented for examination regarding fitness for admission to these institutions. With the appointment of two qualified speech therapists more children with speech defects were able to be treated.

The scheme of medical inspection and treatment was continued on the usual lines but it had of necessity to be modified in certain respects. Increased commitments without additional staff, an outbreak of smallpox in the city and several absences of staff through illness strained the resources of the Service to such an extent that it was not without some difficulty that the routine work was overtaken and only the less essential had to be restricted. Consultants were unable to devote as much time as formerly to school health duties by reason of administrative changes in the Hospital Board.

School Medical Officers spent less time on the general inspection of school premises, on diphtheria immunisation and on relief duties in other sections of the Health and Welfare Department; but these were offset by the time given to the new schemes mentioned above and to the increased examinations in connection with the residential schools.

Pupils to the number of 48,996—the highest since 1938 with the exception of the years 1949 and 1942—were systematically examined during the session in “ordinary” schools. The percentage (42·6) of these found to have no defect whatever was the highest ever recorded in these Reports. Uncleanliness was notably improved—the lowest percentage since 1939—and the other listed defects exhibited similarly low percentages in most instances. A most satisfactory feature was the fact that *major* defects were the least numerous ever recorded—definite evidence of the improved health of Glasgow school children.

Average physical measurements of the five, nine and thirteen-year-old children were again improved as regards weight and, in height, only the nine-year-olds failed to improve upon the 1949 figures which were the highest ever recorded. Over a period of years, in spite of occasional fluctuations, the average heights and weights of Glasgow school children have shown steady increase. An example of this tendency is given in the following table which indicates the amount of increase since 1932 for boys and girls in the stated age-groups :

	Increase at 1950 compared with 1932.	
	Boys.	Girls.
<i>Pupils of 5 years</i>	1·37 ins., 2·91 lbs.	1·30 ins., 2·66 lbs.
<i>Pupils of 9 years</i>	1·78 ins., 4·84 lbs.	1·44 ins., 4·64 lbs.
<i>Pupils of 13 years</i>	2·30 ins., 8·63 lbs.	1·92 ins., 9·46 lbs.

As the period under review comprises the second complete school session since the introduction of the National Health Service Scheme, the effect of the latter on the treatment facilities of the school Health Service may now be more readily assessed. The sudden fall in the number of attendances at school clinics during the 1949 session from the exceptionally high figures of 1948 was attributed to the preference of parents for the services of their new-found "private" medical practitioners, but the decline appeared to be almost arrested during 1950. At the present time (January, 1951), attendances at "general," refraction and artificial light treatment clinics are actually on the increase.

Attendances for treatment of minor injuries were increased while new ear and eye cases were more numerous than in any year prior to 1948. Skin and "other diseases" again declined but the new scheme of ophthalmic treatment was most successful, a total of 4,593 pairs of new spectacles being supplied during this session. Operations for ear, nose and throat defects were fewer for reasons given but there were increased attendances at the special cardiac clinics. Fewer orthopaedic cases were put on treatment but the consultant dealt with approximately the same number as in 1949 (if plaster cases are included). Hearing aids were supplied to 25 pupils during the year.

Dental staffing was on the whole quite satisfactory, as losses were compensated for by new appointments. Fewer schools were visited but more children were inspected than in 1949 and more were actually treated at clinics. A comparatively high percentage (72.3) of these cases had treatment completed during the year. The increased ratio of fillings to extractions (permanent teeth) was also satisfactory. Some expansion in orthodontic treatment was possible and more X-ray examinations were given. Over 3,000 patients attended the special clinic where emergency dental treatment without prior appointment was given.

The Report contains the usual information, revised and brought up-to-date where necessary. Additional appendices have been provided giving (a) details of the children treated for speech defects; (b) an account of the smallpox outbreak in Glasgow; (c) a complete record of the otological examinations of children referred from the audiometric surveys; and (d) a table showing the average physical measurements

of Glasgow school children since 1910. Fuller details of the findings relating to children examined by the Mass Miniature Radiography Unit are also supplied for the first time in these Reports.

I should like to express my gratitude and appreciation to the Conveners and members of the Health and Welfare and Education Committees for their support and encouragement in the promotion of an efficient School Health Service ; to the Director of Education and officials of the Education Department, Head Teachers and Class Teachers, for their co-operation and assistance in the discharge of the manifold administrative and other duties associated with the school health service.

My appreciation and thanks are due to the Medical, Dental, Nursing, and Clerical staffs for the efficient and conscientious manner in which they have carried out their duties during the year, and especially to Mr. James A. Stewart, Chief Administrative Clerk, for the collation and method of presentation of the statistical matter included within these pages.

JAMES EWAN,
M.B., Ch.B., D.P.H., D.P.A.,
Senior Medical Officer.

155 BATH STREET,
GLASGOW, C.2.

9th February, 1951.

1.—LIST OF STAFF.

(a) *WHOLE-TIME STAFF.*

1 Senior Medical Officer ; 2 Senior Assistant Medical Officers (1 for Child Guidance Work) ; 19 School Medical Officers ⁽¹⁾ ; 1 Senior Dental Officer ; 13 School Dental Officers ⁽²⁾ ; 2 Speech Therapists ⁽³⁾ ; 1 Supervisor of Nurses ; 74 Nurses (including 13 temporary nurses, 7 of whom are employed as cleanliness inspectresses) ⁽⁴⁾ ; 1 Chief Clerk ⁽⁵⁾ ; 35 Clerks ⁽⁶⁾ ; 16 Dental Attendants ⁽⁷⁾.

- (1) *Dr. George A. Mills was appointed to permanent staff on 5-8-49.*
- (2) *Miss Lily T. Milnes resigned on 3-12-49 and Miss Jean T. Smith on 31-3-50. Mr. Wm. A. Howe was appointed to the permanent staff on 1-12-49, Miss Eliz. Watson on 15-12-49 and Miss Janet A. McCann on 4-1-50.*
- (3) *Miss Marie C. Main was appointed to permanent staff on 1-9-49 and Miss Phyllis M. Coats on 5-9-49.*
- (4) *In the course of the session 10 nurses (including 4 temporary nurses) resigned and 10 nurses (including 2 temporary) were appointed.*
- (5) *Mr. James A. Stewart was appointed Chief Clerk on 8-12-49.*
- (6) *2 clerks resigned during the session and 4 were appointed.*
- (7) *2 attendants resigned in the course of the session and 3 were appointed.*

(b) *PART-TIME STAFF.*

3 Dentists ⁽¹⁾ ; 8 Consultants ⁽²⁾.

- (1) *Dr. Harry Michaelson resigned on 11-1-50.*
- (2) *Engaged on school health work by arrangement with the Western Regional Hospital Board (4 Aurists, 1 Dermatologist, 1 Oculist, 1 Heart Specialist, 1 Orthopaedic Surgeon).*

Local doctors and dentists undertook emergency duties at the residential schools and at Mossbank approved school in accordance with separate arrangements made with local Executive Councils.

Supplementary to the foregoing are the following members of the staff mostly employed in connection with the dental treatment of ante-natal and nursing mothers but who also take a small part in ordinary school dental work.

*ANTE-NATAL DENTAL STAFF.**Whole-time.*

1 Dental Officer ; 2 Nurses ; 6 Workshop Technicians (including 1 apprentice).

Part-time.

1 Dental Officer.

Of the total of 10,266 periods (half-days) worked by the School Medical Officers, 9,161 were devoted to the normal work of Medical Inspection and Treatment and 1,105 periods were devoted to other work

as follows :— junior club and school camp examinations, 274 ; holidays abroad, 12 ; harvesters' examinations, 165 ; diphtheria immunisation, 435 ; general inspection of schools, 74 ; examinations of school meals service staff, 94 ; examinations of pre-vocational and nursing students and printers' apprentices, 29 ; and 22 periods on relief duties in other sections of the Health and Welfare Department.

Of the total of 7,322 working periods, School Dental Officers devoted 7,301 periods to the normal work of Dental Inspection and Treatment, and 21 periods to relief duties in the Ante-natal section.

Included in the working periods shown above is the time spent on administrative duties by the Senior Medical Officer, the Senior Assistant Medical Officer and the Senior Dental Officer, as well as the half-days allocated to staff meetings.

2.—GENERAL STATISTICS.

Area of City in acres	39,725
Population of the area (estimated)	1,110,000
Density of Population per acre ...	28
Number of Schools—	
(a) Primary	155
(b) Junior Secondary ...	48
(c) Senior Secondary	29
(d) Schools for Handicapped Children	23
(e) Approved Schools	1
(f) Residential Schools ...	13
(g) Nursery Schools	36
(h) Hospital Schools	4
(i) Agricultural Schools ...	1
(j) Gardening Schools	1
(k) Occupational Centres ...	9
<hr/>	
Total Schools under Education Authority	320
<hr/>	
(1) Schools in receipt of grant and under medical inspection	4
	<hr/>
	324
Average number of children on register ...	173,306
Average number of children in attendance	153,913 (88·8%)

3.—SANITARY CONDITION OF SCHOOLS.

Owing to increased demands by other sections of the work, fewer periods could be allocated during the session to School Medical Officers for carrying out the duties imposed by the Education (Scotland) Act, 1946 [Section 20 (4)]. The reduced total of 74 visits was made to 65 schools, including nursery and residential schools, general inspection of the premises being undertaken; Head Teachers and class teachers were also interviewed on the occasion of each visit and School Medical Officers discussed with them the well-being of pupils and gave advice, where necessary, in particular cases.

With regard to 7 schools, Medical Officers considered them to be satisfactory but in the remainder, they made returns concerning defects which were subsequently reported to the appropriate section of the Education Department for consideration and, if practicable, necessary action. A number of defects were attributed to the age of the buildings and only the provision of new schools would have been the solution. In many cases, a medical inspection room was either absent or inadequate, and a staff-room was frequently used for the purpose as the only substitute available. Staff-rooms were, in some instances, found to be inadequate for the number of users and cloakrooms for the pupils were often too few or sometimes even non-existent. Other complaints included the disrepair of drinking fountains, latrines and playground surfaces and miscellaneous requirements appertaining to maintenance.

The Property Section of the Education Department has supplied the following summarised information regarding the work wholly completed during the year ended 31st July, 1950 (exclusive of work carried out on a jobbing basis) in schools and other educational establishments—the number of establishments in each instance is shown in parentheses.

Heating. Installation or overhauling of boilers; new radiators; space heating. (78).

Lighting. Installation of and alterations to electric lighting; re-wiring. (33)

Washing facilities. Baths; wash-hand basins; sinks; water heaters; spray-bath mixer; hot water supplies. (47).

Water supply. Drinking fountains; storage cisterns and tanks; pumping set; renewal of supply pipes and defective water main. (49)

Lavatories. New W.C.'s and cisterns; renewal of and repair to latrines. (29)

Playgrounds, etc. Provision of and repairs to playgrounds, foot-paths and boundary walls; demolition of Air Raid Shelters and dangerous walls. (62).

New accommodation and alterations. Cloakrooms; playsheds; classrooms; staffrooms; medical inspection rooms. (65)

Floors and stairs. New flooring or re-surfacing in halls and classrooms; re-sanding; repair of stair treads. (27)

Roofs, walls, ceilings, etc. Providing, repairing or renewing chimneys, roofs, gutters, conductors, and walls. (64).

Other work. Fencing and railings provided or renewed (16); linoleum and furnishings (exclusive of supplies by requisition) (22); wireguards for windows and tubular heaters (42); fire extinguishers and hose reels (28); cookers (12). New Dining Centres (18) were opened during the year and there were some alterations and improvements made to existing centres.

4.—ORGANISATION AND ADMINISTRATION.

A. SYSTEM AND EXTENT OF MEDICAL INSPECTION AND TREATMENT.

A list of the staff employed during the Session is given on page 8. Where possible, School Medical Officers were each allocated to a clinic and group of schools in a specific area and were held responsible for the medical inspection and treatment of school children in that district. Part-time specialists appointed by the Hospital Board consulted at central clinics. Local medical practitioners and dentists, by arrangement with the various Executive Councils, undertook emergency treatment for the children in residential and approved schools. Arrangements in connection with nursery schools will be found on page 79.

INSPECTION.

The scheme of inspection in Session 1949-50 was carried out in accordance with the requirements of the Department of Health for Scotland as set out in D.H.S. Circular No. 57/1949 dated 8th August, 1949, and is shown below. Statistical details are given in the body of the Report.

I. SYSTEMATIC ("ROUTINE") Medical Inspection.

- (a) Children in the Infant Department who had not hitherto been medically examined ("Entrants—Infants").
- (b) Children born in 1936 ("Leavers").
- (c) Children born in 1940 ("Intermediates").
- (d) Children born in 1933 ("Secondary pupils").
- (e) Children born in 1942 (Vision and hearing only).

Groups (a), (b), (c), and (d) were presented in the order stated above. On the whole, the inspection of each routine age-group was completed throughout the City before proceeding to the next group. Examination of the children in group (e) was undertaken by Nurses, who made their own arrangements with Head Teachers.

II. NON-ROUTINE Inspection.

- (a) Pupils outwith the groups already named were specially presented at any inspection on account of disease or defect observed by the Teacher.
- (b) Pupils approaching "fixed dates" for leaving school were presented for "Leaving Interviews."

III. Inspection of ABNORMALS.

Pupils found at previous inspection to be suffering from disease or defect were presented for re-examination at intervals determined by the School Medical Officer.

Routine Medical Inspection was also provided in schools and classes for physically and mentally handicapped children. The groups examined were "entrants" and other children not previously examined, "intermediates" and "leavers" (approaching 15 or 16 years of age). In addition, *physically handicapped* pupils were specially examined (a) in June and December with a view to fitness for ordinary school, (b) on approaching 12 years of age as to fitness for secondary education, and (c) at intervals before leaving with regard to fitness to enter employment. *Mentally handicapped* pupils were examined (a) biennially as to fitness to attend ordinary school and (b) at intervals as required and before leaving by the visiting Psychiatrist.

Arrangements were also made throughout the Session for the Routine Dental Inspection by dental officers of pupils in selected schools, Cleanliness Inspection by nurses, Diphtheria Immunisation, including an annual campaign in schools, Mass Radiography of children (generally of 13 years and over) when the unit was available, and the General Inspection of schools by medical officers.

TREATMENT.

The list of the clinics and the medical services provided are shown in the following table :—

CLINIC	Skin, Eye, Ear and other minor diseases	Refraction	Dental	X-Ray (Skin treatment)	Ultra-violet Ray	Orthopaedic	Scabies Baths
18 Pleas Street, W.4.	1	1	1	—	—	—	—
4 Sandy Road, W.1	1	1	1	—	—	—	—
130 William Street, C.3	1	1	1	1	1	—	—
60 Avenuepark Street, N.W.	1	1	1	—	—	1	—
Henderson Street School, N.W.	1	—	—	—	—	—	—
Dobbie's Loan School, C.4	1	—	—	—	—	—	—
91 Denmark Street, N.	1	1	1	—	—	—	—
Hyde Park School, 70 Mollinsburn Street, N.	1	1	1	—	—	—	—
15 Glenbarr Street, N.	1	1	3	—	1	1	1
155 Craik Street, E.1	1	1	2	—	—	—	—
Calton School, 18 Dornoch Street, S.E.	1	1	1	—	—	—	—
10 Redan Street, S.E.	—	—	1	—	—	—	—
Rumford Street School, S.E.	1	1	—	—	—	—	—
Calder Street School, S.2	—	—	1	—	—	—	—
26 Florence Street, C.5.	1	1	1	—	1	1	1
20 Harriet Street, S.3	1	1	1	—	—	—	—
29 Govan Road, S.W.1	1	1	1	—	—	—	—
Broomloan Road School, S.W.1	1	—	—	—	—	—	—
Fairfield School, Fairfield Street, S.W.1	—	—	1	—	—	—	—

Ashley Street Orthopaedic Clinic transferred to Avenuepark Street, 24-10-49.

Glenbarr Street Orthodontic Surgery opened, August, 1949.

Additional medical facilities were again available for school children in hospitals administered by the Western Regional Hospital Board. Arrangements for tonsils and adenoids operations were continued with the Western District, Stobhill, Southern General, and Mearnskirck Hospitals. Various hospitals provided facilities for X-ray examinations and for operative and other treatment of children referred from the school clinics for ear disease. The heart specialist from Stobhill Hospital who attended school clinics arranged for the diagnosis and treatment of certain cases in hospital, and the orthopaedic consultant from

Mearns Kirk Hospital undertook the operative treatment in hospital of a number of cases seen by him at the school clinics on his regular visits.

All treatment at the clinics was provided free of charge, an application signed by the parent being necessary in all cases.

B. SYSTEM AND EXTENT OF DENTAL INSPECTION AND TREATMENT.

See report for 1949, page 14.

The scheme introduced last year, full details of which were given in the 1949 Report, was continued throughout the period under review. Forenoons were again reserved for the annual inspection and treatment of children in a number of selected schools and the afternoons were available mostly for patients from all other sources. Dental Officers were usually attached to clinics, each of which served a group of schools in the district.

The special emergency clinic was retained at Glenbarr Street, functioning every afternoon for the treatment of patients without previous appointment. The X-ray unit has become a useful adjunct to the service. An additional surgery was opened in August, 1949 for orthodontic treatment.

Details of the year's work, including extracts from the Report of the Senior Dental Officer, are given on pages 38 and 73, and a list of the staff employed will be found on page 8.

C. SCHOOL NURSING AND ARRANGEMENTS FOR FOLLOWING UP.

See Report for 1949, page 15.

The staff of school nurses and dental attendants is listed on page 8. With the transference of Eastmuir pupils to Kennyhill School 14 nurses were in attendance at schools for handicapped children compared with 15 last year.

The "nursing" staff, including supervisor, temporary nurses (including cleanliness inspectresses) and dental attendants, devoted 41,471 working periods (half-day) to the work of medical inspection and treatment of children (including home visiting), 451 to examinations in connection with junior club and school camps and harvesting, 450 to diphtheria immunisation, 94 to examinations of school meals' staff and 29 periods to examinations of pre-vocational and nursing students

and printers' apprentices—total periods, 42,495. Home and other visits numbered 2,037 and nurse inspectresses from the Sanitary Divisions also visited the homes in connection with cases of uncleanness discovered in the schools.

D. *CO-ORDINATION WITH THE PUBLIC HEALTH SERVICE AND WITH OTHER DEPARTMENTS OF THE AUTHORITY WHICH RENDER SERVICES TO CHILDREN.*

See Report for 1949, page 16.

HEALTH AND WELFARE DEPARTMENT.

The *Diphtheria Immunisation ad hoc* clinics under the auspices of the Child Welfare section were again in operation throughout the session and assistance was again given by members of the Education Health Service staff weekly. Appendix X, page 84 gives details of the Annual Campaign in schools.

Close co-operation was maintained with the *Mental Services Section*. For this purpose members of the Education Health Service medical staff attended at 20 Cochrane Street every second Saturday morning throughout the year, examining and, if necessary, certifying under the Mental Deficiency Acts the following groups :—(1) Children under the age of five years whose parents desired institutional treatment provided for them ; (2) children from the age of five to sixteen years who were reported under Section 56 of the Education (Scotland) Act, 1946 as being incapable of receiving instruction in a special school ; (3) school leavers at the age of sixteen years who were reported under Section 57 of the above Act as requiring special care and protection after leaving school ; and (4) adults who required, by reason of mental deficiency, some form of supervision either under guardianship or in institution. (On an average six to eight of these cases are seen per session.)

The Senior Assistant Medical Officers and Senior Dental Officer of the Education Health Service gave lectures to nurses studying for the *Health Visitors' Certificate* and the students visited schools and school clinics.

Dental treatment was also available (a) at special clinics administered by the Education Health Service for ante-natal and nursing mothers (up to 9 months after confinement) referred by the Child Welfare Medical Officers, and (b) for pre-school children at the ordinary dental clinics.

CHILDREN'S DEPARTMENT.

Advice regarding the mental health of children under the care of this Department was frequently asked for during the session. The children were either seen at one of the Child Guidance Clinics or were examined in one of the homes administered by that Department. When necessary, treatment was given either on a daily, or residential basis.

EDUCATION DEPARTMENT.

Nursery Schools were visited periodically during the session (See Appendix VII, page 79 for full details of the work done during the year).

Children were examined twice before proceeding to *holiday and residential camps*; details for the session will be found on page 48. During the summer of 1950, the Senior Medical Officer and the Senior Assistant Medical Officer visited several of the camps and reported on hygiene and other living conditions.

Details of the number of children who were examined before proceeding to *potato harvesting camps* may be found on page 67. The Senior Medical Officer visited most of these camps in company with Education Committee members and Education Department officials.

During a week in the month of June, 1950 a doctor and a nurse were in attendance each day at the entertainment to handicapped children at Loch Lomond (Balloch Park).

Approximately 150 visits were paid to the homes of patients, mostly children and young persons, who were so severely *handicapped* either *mentally* or *mentally and physically* combined as to prevent them from travelling to a suitable centre for examination.

Children excluded from school and those on the *suspense roll* were frequently examined at the request of the School Attendance Department. In 55 other instances private medical practitioners were communicated with and informed of the special facilities available under the Education Health Service for treatment of long standing defects; the ailments from which these children suffered were:—rheumatism (10), bronchitis (9), debility, etc. (7), heart conditions (4), chorea (4), skin diseases (3), and other conditions (18).

The Senior Medical Officer again gave lectures on *Orthopaedics* to physical training instructors at Jordanhill Training College and practical training was given at school clinics.

Students attending *pre-vocational courses* were medically examined to the number of 569 during the session ; these included students at the pre-nursing college, nursery nurses and young people on preliminary courses for commerce, engineering and building apprenticeship.

School Meals Staff Examinations. At the beginning of the session a scheme was instituted for the medical examination, annually, of employees in school meals kitchens. During the period, applicants for vacant posts as well as current employees, were X-rayed by arrangement with the Mass Radiography Unit and subsequently examined by School Medical Officers. The assessment of physical fitness was more rigorous with regard to potential recruits ; actual employees were only considered unfit if suffering from disabilities of a communicable nature or from ailments regarded undesirable in persons handling food intended for consumption by children.

707 persons were dealt with during the year ended 31st July, 1950 the results being as follows :—

	<i>New Staff.</i>	<i>Old Staff.</i>	<i>Total.</i>
Number certified fit ...	178	488	666
Number resigned, failed to attend, etc. ...	2	3	5
Number certified unfit ...	30	6	36
	210	497	707
	—	—	—

The diseases or defects which caused rejection were :—

<i>Old Staff</i> ...	Tuberculosis, 3 ; otorrhoea, 3.
<i>New Staff</i> ...	Tuberculosis, 8 ; varicose veins, 8 ; nits or vermin, 5 ; heart conditions, 2 ; high blood pressure, 2 ; ear conditions, 1 ; diabetes, 1 ; other conditions, 3.

Corporation approval has been given to a proposal for extension of the scheme to include the medical examination of *dining room* personnel and this will be put in train when additional medical staff is made available to the Education Health Service.

E. CO-OPERATION WITH OTHER OUTSIDE AGENCIES.

See Report for 1949, page 19.

UNIVERSITY OF GLASGOW.

During the session 25 students visited various schools and clinics in connection with the curriculum for the *Diploma in Public Health*. Lectures were also given in Mental Deficiency and the twenty students who took the Post-Graduate Course in Mental Deficiency for Medical Officers gained their practical experience in the child guidance clinics, special schools and occupational centres.

The Education Health Service co-operated with Professor Ferguson in connection with an investigation into the health of surviving *premature children* born in the years 1943 and 1944. Extracts from the school medical record cards of 400 pupils were forwarded to the University. Approximately 150 more cases are expected to be dealt with in the 1950-51 session before the survey will have been completed.

WESTERN REGIONAL HOSPITAL BOARD.—the results being as follows:—

Close association was maintained with the Board and the various hospitals throughout the year on matters of mutual interest connected with the health of Glasgow school children.

Consultants were again allocated to Education Health Service clinics and arrangements were continued with the same hospitals for admission of school children for treatment of various ailments. The *School Eye Service*, in the first complete session since the date of inauguration (1st April, 1949) operated satisfactorily, and the *Mass Radiography Unit* continued to provide the usual facilities for school children and adult employees of the Education Department.

The *infectious diseases hospitals* referred 139 school children to Education Health Service clinics for examination and after-care. Of the number reported, 33 failed to appear or intimated that they were receiving private treatment, 5 were found to be requiring no further attention and 17 were dealt with at the "general" school clinics. The remaining 84 were referred for special forms of treatment, including courses of artificial light therapy in 71 cases.

Almost daily, inquiries were made to *Tuberculosis Officers* regarding children absent from school, actual letters being sent in no fewer than 160 instances during the year.

Almoners of Glasgow Institutions forwarded many recommendations for the admission of children to holiday homes and there was frequent correspondence with the *Hearing Aid Clinic* attached to the Ear, Nose and Throat Hospital regarding school children referred for trial and provision of suitable instruments.

Biggart Memorial Home, Prestwick, continued to allocate about 40 beds for physically handicapped Glasgow school children selected by the Education Health Service. During the year, 229 children were summoned to school clinics for preliminary medical examination; of the 199 who attended, 159 were considered suitable for admission to the Home.

NATIONAL HEALTH SERVICE EXECUTIVE COUNCIL.

The previous arrangements for the pricing of *special prescriptions* issued by School Medical Officers and dispensed by local chemists was discontinued with the opening of the new Pharmacy Section of the Health and Welfare Department.

VOLUNTARY ORGANISATIONS.

Medical examinations of children were requested by the following organisations:—

- (1) The *British Sailors' Society* for whom 10 children of merchant seamen were examined prior to being sent to Lagarie Home, Rhu, and
- (2) the *Invalid Children's Aid Association* for whom 12 pupils going to the Children's Village, Humbie, were also examined.

Members of the medical staff attended at the Sheriff Court on eight occasions throughout the session, for the purpose of giving evidence in connection with applications for Judicial Orders for the detention of mental defectives in certified institutions.

Private medical practitioners continued to make use of the Education Health Service for children requiring holidays after convalescence, special treatment and for obtaining information regarding treatment at school clinics in particular cases. Reference has already been made regarding communications in connection with children absent from school.

F. *CO-OPERATION WITH TEACHERS AND PARENTS, WITH SPECIAL REFERENCE TO THE ATTENDANCE OF PARENTS AT INSPECTION.*

The co-operation of the teaching staffs which is essential for facilitating the carrying out of the various schemes involving the examination of school children was continued throughout the session. As in the past, the assistance given was invaluable and particular mention may be made of the help which was afforded in the Diphtheria Immunisation campaign (see page 84).

As has been noted over a number of years, the attendance of parents at the systematic inspection of their children has been gradually declining. During the 1950 session, the percentage of attendance by parents again fell (to 60.3), the lowest ever recorded in these reports. As observed in the 1949 Report, the tendency for parents to absent themselves when their children are being examined is to be deplored as the presence of a responsible adult, particularly the parent, is of value to all concerned with the health and well-being of the child.

Many lectures bearing on the health of school children were given by School Medical Officers during the session to parents', teachers' and other organisations. The Senior Dental Officer also gave a series of lectures to mothers' clubs in the various clinics with a view to making parents more "tooth-conscious."

5.—THE FINDINGS OF MEDICAL INSPECTION.

GENERAL REVIEW.

(Detailed statistics on pages 47 to 68).

In Table I, pages 47 to 48, details of the numbers of children examined during the academic year which ended on 31st July, 1950, are shown under the various categories, and compared with the records of the years 1949 and 1948 respectively.

During the 1950 session, 48,996 pupils attending "ordinary" schools were systematically examined—a total which, except for 1949 and 1942, was the highest to be noted in these reports since 1938. In the same period, 1,279 children were examined in schools for the handicapped, a figure which was the lowest since 1946. Other systematic inspections were considerably increased, particularly the number of examinations in nursery schools, visual acuity and hearing of

children born in 1942 and leaving interviews. Examinations *mainly at clinics* were also increased, particularly adult employees (including staff of the School Meals Service) and children examined as to fitness for admission to residential schools. Fewer cleanliness inspections by nurses were made, but this was offset by the increased number of examinations of the 1942 age-group to which reference has already been made.

Appendix Ia, page 49, gives the numbers and percentages of pupils in the routine age groups who were notified to parents as requiring treatment for defects observed by the School Medical Officer. Further information as regards notification to parents is given in Appendix IIa, page 58. The age distribution of children at the date of routine inspection is shown in Appendix Ib, page 50.

Table II, page 52, details the numbers and percentages of children observed at routine medical inspection to be suffering from specific defects. The following summary of individual defects brings out the main features.

Unsatisfactory clothing again exhibited a low percentage (0.2) similar to that returned for some years and *unsatisfactory footgear* (0.1) was the lowest recorded since 1939.

Uncleanliness showed some improvement and the percentage (7.8) was the lowest in these reports since 1939.

Skin conditions gave a similar percentage (1.5) to that returned in 1949 which was the lowest since 1939. Incidentally, scabies again declined and showed the lowest percentage (0.1) ever recorded.

Defective nutrition equalled the percentage (5.2) of 1949 which was the smallest ever recorded.

Mouth and teeth unhealthy—here again, the percentage (2.1) was the smallest ever recorded.

Naso-pharyngeal defects showed a slight increase (to 9.3% from 8.9% in 1949) the latter percentage being the lowest ever recorded. Nasal catarrh and tonsils for observation were mainly responsible, otherwise the percentage total was smaller than in any other year prior to 1949.

External eye diseases were slightly more numerous than in 1949 (4.1% compared with 4.0%)—strabismus being accountable for the increase.

Defective eyesight (14.9%) showed an increase of 2.4% compared with 1949 and 0.1% over 1948, but was lower than in any other year. A probable explanation is given at the end of this section.

Ear defects were again fewer, otorrhoea being mainly responsible.

Defective hearing still showed almost negligible percentages and *defective speech* percentages were similar to those of 1949 which were the lowest ever recorded.

Mental and nervous conditions were also similar to those of 1949—the lowest ever recorded.

Diseases of the circulatory system were slightly more numerous, the increase being mainly in acquired organic conditions. The total percentage (1.5) was only 0.1% over the 1949 figure which was the lowest ever recorded.

Lung diseases gave the lowest percentage for many years, chronic bronchitis and catarrh being mainly responsible.

Deformities showed a slight increase (0.1%) over the 1949 figure—"other causes" being responsible; the satisfactory decline of "probable rickets" may be noted. *Infectious diseases* exhibited an almost negligible percentage whilst *other diseases* showed the smallest percentage ever recorded.

Additional information obtained from the records of routine inspection can be found in Appendix IIa, page 58. The smallest number of parents recorded for many years attended the examination of their children, and fewer parents were notified of conditions requiring treatment. Of the pupils noted by School Medical Officers for re-inspection,

those with defects of clothing, cleanliness, etc., were the lowest for many years but for "other conditions" there was a slight increase over the 1949 figure which was the lowest ever recorded. The percentage of children excluded from school was also the lowest for many years. Children with no recorded defect (42.6%) had the highest percentage ever recorded as also had children with "sound" teeth (65.3%). Visual acuity was not so satisfactory for "good" eyesight in children without glasses compared with the years 1949 and 1948, but those with glasses showed the most improved percentage for many years. The percentage of pupils reported to have complete immunisation against diphtheria was the highest (85.0) ever recorded in these tables. Full details of the partial examination of children in the 1942 age-group are given in Appendix IIb, page 60, and compared with results obtained in 1949 and 1948. The percentages of these children with good eyesight and good hearing were the highest returned since the introduction of this scheme in 1948.

In Appendix IIc, page 62, the average measurements of school children are shown. The average weights showed consistent increases for both boys and girls, but heights were variable, particularly the 9-year-old pupils. A complete record of average measurements since the year 1910 is given in Appendix XIV, page 93.

Table III on page 64 lists the children according to remediability of the major defects observed at routine inspection. The percentage of children free from defects (other than clothing, cleanliness or minor dental defects) (66.4) compares with 66.9% in 1949 which was the highest ever recorded. The difference was due to a slight deterioration in eyesight as already mentioned in the paragraph relating to Appendix IIa. The more serious defects were, however, fewer than in any year since 1939. As indicated in connection with Appendix IIa, the percentage of children free from any defect was the highest ever recorded.

CONCLUSION.

On the whole it would appear that the health of Glasgow school children continues to improve. The returns of medical inspection show that more pupils were reported to be in perfect physical condition in 1950 than in any previous year and that defects exhibited by the remainder were of a more remediable type than for some time past.

The apparent deterioration in the vision of the children may have been due to a more rigorous assessment of "marginal" cases by School

Medical Officers in view of the improved supply position with regard to spectacles rather than to any increased incidence of defective eyesight. No definite explanation can be given for the unimproved average heights of the 9-year-old pupils except that the decreases were slight and that over a period of years average measurements have been observed to fluctuate from time to time for no apparent reason.

6.—MEDICAL TREATMENT.

Slightly fewer patients on the whole were seen at school clinics during the year as compared with 1949 and 1948 but otherwise the figures in most instances were not inferior to those of other years. Increased attendances were, in fact, recorded in some groups and in others only unforeseen developments hindered probable increases. The following summary gives details of the various categories treated.

Minor injuries (page 25) treated in 1950 were more numerous than in any other year since 1939, appearing to indicate a reliance on the school clinic for treatment of the more superficial type of ailment.

New *ear* cases (page 26) were slightly fewer than in 1949 and also below the exceptionally high figures of 1948, but were higher than in any other year since 1939. Owing to staff illnesses fewer sessions were devoted to this work by school medical officers and withdrawal of the services of an aurist during the second half of the school year caused a further reduction. The number of patients classified according to degree of deafness was also smaller because of delay in the appointment of a successor to the former specialist. Full details of the otological examinations resulting from the audiometric survey of certain age-groups of school children will be found in Appendix XIII, page 89.

Eye diseases (page 28) were fewer than in 1949 and 1948 but were the highest number treated in any year prior to the latter.

New cases of *skin disease* (page 28) continued the steady decline which has been observable over the past few years. More children were, however, disinfested than usual and consequently attendances at the special clinics were more frequent. The fewer ringworm cases treated and the almost negligible total of scabies baths required in the period may be regarded as satisfactory indications of improvement.

Treatment of *defective vision* (page 29) was restored to a more satisfactory position during the year. The new scheme, after the initial difficulties referred to in the 1949 Report, was successfully organised to the point where the numbers which could be dealt with

were only restricted by the time which could be spared for refraction from other work and by the number of school medical officers who were approved by the Hospital Board. The total of 4,593 spectacles actually provided during the period, although not a record number, was most satisfactory in the circumstances which prevailed.

Fewer *operations* (page 31) for ear, nose and throat defects were performed in 1950 compared with 1949, partly because of the curtailment necessitated by outbreaks of smallpox and infantile paralysis during the latter part of the school year and partly by reason of Hospital Board administrative changes which reduced the number of sessions which could be undertaken by the specialists.

A new *orthopaedic* clinic was opened at Avenuepark Street on 24-10-49 in the premises formerly occupied by the Outdoor Medical Service. This clinic replaced the Ashley Street Centre and it was possible to provide facilities for dealing with plaster cases for the first time in a Glasgow school clinic. Mearns Kirk Hospital admitted fewer cases but examinations at clinics (if plaster cases are included) were approximately the same as in 1949. New cases put on treatment, although fewer than in the previous two years, were more numerous than in any year prior to 1948 (see page 32).

"*Other diseases*" (page 35) continued to decline on the whole, only heart disease and anaemia or debility showing slight increases over the 1949 figures. *Medicines* were also less frequently supplied. *Artificial light* treatment (page 36) was slightly reduced, a notable feature, however, being an increase in the number of anaemia and/or debility cases treated—the greatest number ever recorded in these reports. *Cardiac* cases, including re-examinations, (page 36) seen by the specialist during the year were the highest recorded since this scheme was instituted in April, 1947.

(A) MINOR AILMENTS.

Throughout the treatment tables, "Single visit cases" includes those treated and disposed of at first visit, cases not for treatment, and cases without apparent disease.

(1) CUTS, BRUISES, SPRAINS, MINOR INJURIES, ETC.

Details of new cases—	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Cuts, bruises, sprains, etc.	1,851	864	2,715	2,548	2,531
Burns and scalds	181	148	329	375	443
Totals	<u>2,032</u>	<u>1012</u>	<u>3,044</u>	<u>2,923</u>	<u>2,974</u>

The attendances are included with those for skin conditions (page 28).

(2a) DISEASES OF THE EAR.

Examined only

	1950.			1949.		1948.	
	Boys.	Girls.	Totals.	Totals.	Totals.	Totals.	Totals.
Recommended operation for tonsils and/or adenoids ...	293	329	622	519	561		
Other operations recommended	2	2	4	3	3		
Referred to Hospitals	44	44	88	3	3		
Single visit cases	484	425	909	1,182	1,506		
Totals ...	778	755	1,533	1,708	2,071		

Treated at clinics.

Details of new cases—		1950.			1949.		1948.	
		Boys.	Girls.	Totals.	Totals.	Totals.	Totals.	
Chronic suppurative inflammation (otorrhoea)—	Single	259	190	449	525	724		
	Double	56	43	99	157	168		
Results of above disease	...	41	32	73	39	117		
Retracted membrane	...	39	16	55	40	40		
Chronic aural catarrh	...	3	3	6	—	3		
Germinous collection (wax)	...	161	140	301	264	317		
Nasal catarrh	...	45	29	74	54	67		
Laryngitis	...	—	—	—	2	4		
Polypus	...	1	—	1	1	1		
Other diseases	...	92	95	187	131	179		
Cases from previous session	...	697	548	1,245	1,213	1,615		
...	...	596	434	1,030	1,171	955		
Totals ...	...	1,293	982	2,275	2,384	2,570	
Clinic attendances of above cases	...	38,904	23,235	57,139	57,018	57,721		

Examinations by Specialists.

In addition to the foregoing, 1,228 cases (718 boys and 510 girls) were summoned for examination by aurists 309 (173 boys and 136 girls) failed to attend and the remainder were dealt with as under :—

	1950.			1949.		1948.	
	Boys.	Girls.	Totals.	Totals.	Totals.	Totals.	
Recommended operation for tonsils and/or adenoids	45	39	84	133	129		
Other operations recommended	20	11	31	75	27		
Referred to Hospitals	49	25	74	82	81		
For X-ray	30	30	60	86	73		
Others	401	269	670	908	847		
Totals ...	545	374	919	1,284	1,157		

X-ray Examinations.

Cases referred by the specialists during the year for X-ray investigation are arranged below under the various headings according to defects.

	No defect.		Defect found.		Totals.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
STOBHILL						
Sinuses	8	8	10	10	18	18
Mastoids	1	1	4	4	5	5
Sinuses & Mastoids	1	1	1	1	2	2
Sinuses and Chest	1	1	1	1	2	2
Totals	9	9	14	12	23	21
SOUTHERN GENERAL						
Sinuses	14	10	11	11	25	21
Mastoids	1	1	3	3	4	4
Sinuses and Mastoids	1	1	1	1	2	2
Totals	15	10	15	14	30	24
Totals	1,087	1,087	1,087	1,087	1,087	1,087

(2b) DEFECTIVE HEARING.

As in former years, the services of an aurist were retained for the purpose of classifying children with hearing difficulties and assessing their ability to take advantage of the educational facilities available to them. A total of 73 examinations was given and 63 children were graded as follows:—school for deaf, 14; semi-deaf classes or to remain therein, 18; to remain in special (not deaf) school, 1; ordinary school or to remain therein, 13; not graded (for further examination), 17.

Hospital treatment was advised for 17 children (including 10 for tonsils and/or adenoids operation), 20 were referred for treatment at clinic or school, and a hearing aid was recommended in 10 instances. Lip reading was suggested for 3 cases and speech therapy for 2, the remainder being referred either for special investigation or for re-examination.

Hearing Aids. 36 children (21 boys and 15 girls) were referred to the Hearing Aid Clinic of the Ear, Nose and Throat Hospital. A total of 25 pupils (11 boys and 14 girls) obtained hearing aids during the year, the cost of two of these being defrayed by the Corporation as the official government instrument was found to be unsuitable.

Audiograms. 58 children were referred, during the session, to the Hearing Aid Clinic for test of hearing by audiogram. Up to 31st July, 1950, 13 boys and 14 girls had been tested.

Audiometric Surveys. A report on these will be found in Appendix XIII, page 89, showing the findings of the aurists and the treatments given.

(3) DISEASES OF THE EYE, EXCLUDING DEFECTIVE VISION.

Details of new cases—	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Blepharitis	256	291	547	611	716
Hordeolum (stye)	182	231	413	400	396
Conjunctivitis, catarrhal	304	269	573	705	727
Conjunctivitis, muco-purulent	5	3	8	9	22
Ophthalmia, strumous (includes phlyctenular conjunctivitis and keratitis)	16	9	25	—	—
Keratitis (interstitial)	2	2	4	4	6
Corneal ulcers	19	24	43	73	67
Corneal opacities	—	5	5	1	—
Dacryocystitis	—	1	1	1	1
Epiphora	1	—	1	—	—
Injuries	39	18	57	77	44
Other diseases	22	26	48	49	41
Single visit cases	95	97	192	196	200
	941	976	1,917	2,126	2,220
Cases from previous session ...	126	113	239	280	293
Totals	1,067	1,089	2,156	2,406	2,513
Clinic attendances of above cases ...	10,167	9,690	19,857	22,559	23,360

(4a) DISEASES OF THE SKIN, EXCLUDING RINGWORM AND FAVUS.

Details of new cases—	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Scabies	217	209	426	751	1,975
Pediculosis capitis	3	8	11	7	16
Impetigo contagiosa	1,464	817	2,281	2,600	4,599
Ped. cap. and imp. cont.	6	17	23	18	79
Ecthyma	27	23	50	73	217
Dermatitis seborrhoeica	176	185	361	414	548
Eczema	105	84	189	217	315
Alopecia areata	21	18	39	39	87
Psoriasis	14	23	37	61	85
Herpes zoster (shingles)	99	71	170	178	277
Lupus	—	—	—	—	—
Ulcers and abscesses	2,169	996	3,165	3,292	4,827
Urticaria	75	82	157	129	221
Warts	227	275	502	387	412
Other skin diseases	243	220	463	483	638
Single visit cases	1,602	1,089	2,691	2,242	3,009
	6,448	4,117	10,565	10,891	17,305
Cases from previous session ...	423	268	691	977	886
Totals	6,871	4,385	11,256	11,868	18,191
Clinic attendances of above and ring- worm cases	62,015	40,712	102,727	108,423	138,182

Special Disinfesting Clinics—

New cases	520	423	513
Attendances	900	695	962

(4b) RINGWORM.

Drug Treatment—

Details of new cases—

			1950.			1949.	1948.
		Boys.	Girls.	Totals.	Totals.	Totals.	
Ringworm (head) ...	...	60	14	74	99	95
Ringworm (body) ...	...	106	68	174	201	280
Totals ...	...	166	82	248	300	375

X-ray Treatment—

75 children (63 boys and 12 girls) were given X-ray treatment for ringworm of the scalp, making 80 attendances for radiation, and receiving 371 X-ray exposures (generally 5 exposures per child).

Other skin conditions were also treated by X-ray, 5 boys making 6 attendances and receiving 7 exposures, and 3 girls making 10 attendances and receiving 16 exposures.

(4c) BATH TREATMENT OF SCABIES.

			1950.			1949.	1948.
		Boys.	Girls.	Totals.	Totals.	Totals.	
Cases receiving baths ...	...	191	186	377	708	1,841
Baths given ...	...	1,136	1149	2,285	4,015	12,942

(B) DEFECTIVE VISION.

The School Eye Service, after the initial difficulties had been resolved, successfully functioned throughout the period. Half as many more children as in 1949 were subjected to refraction during the 1950 session and only the restraints imposed by shortage of staff and absences through illness prevented a greater increase in the number of patients examined. Usually, 16 to 18 cases were summoned to each refraction clinic in order to obtain the desired average attendance of 12 children, but although the latter figure was equalled or excelled on some occasions, in general the average was found to be less.

A satisfactory total of 4,593 spectacles was supplied during the year by the contractors as compared with the meagre 166 delivered during the difficult 1949 session. The former figure included orders placed in the previous year. After those outstanding had been supplied the regularity with which glasses came from the contractors kept pace with the orders sent.

Below are given the figures relating to (a) the cases dealt with at refraction clinics during the school year and (b) the provision of glasses prescribed by School Medical Officers.

(a) CASES DEALT WITH AT REFRACTION CLINICS.

	1948	1949	1950	1950	1950	1949	1948
	Totals	Totals	Boys	Girls	Totals	Totals	Totals
Subjected to refraction—							
Spectacles prescribed	1,174	1,174	2,207	2,322	4,529	2,907	6,627
Spectacles not prescribed—							
For further treatment	...	...	...	...	933	826	1,504
No treatment required	...	...	...	...	859	597	1,201
					6,321	4,330	9,332
Not subjected to refraction—							
For further treatment	...	...	...	...	1,195	691	1,124
No treatment required	...	...	...	...	550	345	383
Spectacles checked	...	...	...	...	39	6	64
Postponed	...	...	...	...	776	427	1,381
					2,580	1,469	2,952
Total number dealt with at refraction clinics	1,841	1,841	191	191	8,901	5,799	12,284
Number of clinics held	...	...	...	...	919	688	1,367
Average number of children per clinic	...	...	...	...	9.7	8.4	8.9
Average number subjected to refraction at each clinic	...	...	...	...	6.9	6.3	6.8

At the occlusion clinics 87 children were put on treatment, and an additional 71 were kept under observation. A total of 33 children were put off treatment and 10 were referred to hospitals for further treatment.

Approximately 3,000 children at the end of the school session were awaiting refraction distributed as follows:—New cases—20; "failed to attend"—650; retests—2,330.

(b) PROVISION OF SPECTACLES

New cases to the number of 4,593 were supplied with spectacles, the cellulose acetate type being chosen in 4,525 (98.5%), and gold-filled in 68 (1.5%) instances.

Replacements or repairs totalled 622 distributed as follows:—new lenses, 31; replaced lenses, 141; frames, sides, etc., 450 (cellulose acetate, 361; gold-filled, 53; nickel, 36).

(C) EAR, NOSE AND THROAT OPERATIVE TREATMENT

(i) TONSILS AND ADENOIDS OPERATIONS.

In addition to those treated in the year for operative and other treatment to the number of 31 were dealt with in Stobhill, Southern General and Mearnskirk Hospitals during the year for operative and other treatment of various ear, nose and throat conditions. Some of these patients were given treatment for more than one defect for the following, either singly or in combination—nasal defects, 14; and throat conditions, 1; other ear conditions, 10; nasal defects, 14; and throat conditions, 1.

	1950			1949			1948		
	Boys.	Girls.	Totals.	Totals.	Totals.	Totals.	Totals.	Totals.	
Tonsils removed—									
Western District Hospital	3	2	5	1	2				
Mearnskirk Hospital	1	1	2						
Adenoids removed—									
Western District Hospital	6	3	9	21	10				
Mearnskirk Hospital	48	19	67	58	—				
Stobhill Hospital	3	—	3	1	—				
Southern General Hospital	2	2	4	6	—				

(a) DEFORMITIES TREATED IN MEARNSKIRK HOSPITAL

Western District Hospital	459	782	1,241	1,471	1,065
Stobhill Hospital	26	37	63	91	27
Mearnskirk Hospital	115	67	182	318	—
Southern General Hospital	—	—	—	2	27
	<u>661</u>	<u>862</u>	<u>1,523</u>	<u>1,966</u>	<u>1,137</u>

Number of operation periods	...	...	...	*114	*133	*108
Average number of cases per period	...	...	...	*11	*11	*11
Clinic (including hospital) attendances	...	...	...	5,053	6,184	3,488

* These figures relate only to the Western District Hospital

In addition to the above, 81 children (57 boys and 24 girls) were admitted to hospital during the year, 57 (35 boys and 22 girls) of these being discharged without operation for various reasons, mostly medical, and 24 (22 boys and 2 girls) remaining in hospital on 31st July, 1950 awaiting operation.

Other forms of treatment were also given to children receiving tonsils and adenoids operation, and a few patients were detained in hospital for more than the normal period before and after operation for medical reasons.

All children were instructed to report to the school clinic two weeks after dismissal from hospital for post-operative examination.

The number of cases on the waiting list at 31st July, 1950 was 1,443, consisting of 642 boys and 801 girls.

(ii) OTHER EAR, NOSE AND THROAT OPERATIONS.

In addition to those treated for tonsils and/or adenoids, children to the number of 31 were dealt with in Stobhill, Southern General and Mearnskirk Hospitals during the year for operative and other treatment of various ear, nose and throat conditions. Some of the patients underwent treatment for more than one defect. Treatments were given for the following, either singly or in combination—mastoid condition, 6 ; other ear conditions, 10 ; nasal defects, 14 ; and throat conditions, 1.

The number of cases on the waiting list for hospital treatment at 31st July, 1950 was 63 boys and 32 girls, a total of 95.

(D) ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) DEFORMITIES TREATED IN MEARNSKIRK HOSPITAL.

Cases in hospital at 1-8-49	...	...	...	18
Number admitted during session			...	36
				—
				54
Number dismissed during session	...	...	...	47
				—
Number still in hospital at 31-7-50	...	...	...	7
				—

All the above cases had been selected at the Education Health Service orthopaedic clinics by the visiting Orthopaedic Surgeon. Of the 47 patients dismissed, the causes of disability were as shown in the following table :—

Foot Deformities—				
Congenital	...	...	...	10
Post-Poliomyelitis	...	...	...	19
Others	...	...	...	4
Scoliosis	...	...	...	3
Cerebral Palsy	...	...	...	5
Congenital Dislocation of Hip Joint	...	...	...	2
Congenital Deformity of Spine	...	...	...	1
Torticollis	...	...	...	2
Peripheral Neuritis	...	...	...	1
				—
				47
				—

7 of the above cases were treated by splinting and exercises, and general physical measures; upon the remaining 40 a total of 84 operations were performed as follows:—

Foot Operations—Tenotomy of plantar fascia and wrenching of foot, 34; manipulations and plaster, 17; arthrodesis, 2; tendon transplants, 11; elongation of tendo achilles, 8.

Other Operations—For torticollis (tenotomy), 2; Shelf operation for unreduced C.D.H., 1; miscellaneous minor procedures, 9.

The average stay in hospital of these 47 cases was 155 days.

On 31st July, 1950, the number of patients on the waiting list for admission to hospital was 85.

The Orthopaedic Surgeon continued his regular visits to Education Health Service orthopaedic clinics, and many patients were referred to his weekly clinic held at the hospital and were fitted with plasters and splints as required. During the year new patients were supplied with calipers (2), below knee irons (7) and spinal braces (4); old patients had alterations made to boots in 262 cases, and repairs or replacements of old calipers and leg irons amounted to 78.

(b) DEFORMITIES TREATED BY EXERCISE, MASSAGE, ELECTRICAL TREATMENT, ETC., AT AVENUEPARK STREET, FLORENCE STREET AND GLENBARR STREET ORTHOPAEDIC CLINICS.

	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Number of children examined by—					
School Medical Officers ...	394	539	933	940	1,202
Orthopaedic Surgeon ...	331	346	677	798	515
Number of attendances of "old" cases reporting for observation					
	484	562	1,046	1,229	931
Number of Plaster cases					
(Avenuepark Street Clinic) ...	71	46	117	—	—

The staff of seven physiotherapists carried out treatment for the following cases :—

	Boys.	1950. Girls.	Totals.	1949. Totals.	1948. Totals.
Details of new cases put on treatment at Clinics—					
Deformities of spine (kyphosis lordosis, scoliosis)	88	151	239	225	204
Paralysis, infantile and other... ..	44	26	70	94	95
Flat-foot and other deformities of the foot	54	122	176	201	242
Wry-neck (torticollis)	4	3	7	24	16
Fracture (result of), sprains and dislocations	1	3	4	6	8
Deformities of chest	24	8	32	40	13
Knock-knees	17	20	37	51	45
Others	10	28	38	45	25
	<u>242</u>	<u>361</u>	<u>603</u>	<u>686</u>	<u>648</u>
Cases from previous session	72	99	171	173	158
Totals	<u>314</u>	<u>460</u>	<u>774</u>	<u>859</u>	<u>806</u>
Discharged from Orthopaedic Clinics—					
Fit	146	228	374	485	422
For hospital treatment	5	5	10	18	19
To Convalescent Homes	5	2	7	3	5
Transferred to other clinics or treated by appliances	21	19	40	49	35
For other reasons (leaving school, etc.)	71	94	165	132	152
Totals	<u>248</u>	<u>348</u>	<u>596</u>	<u>687</u>	<u>633</u>
Number still on treatment	66	112	178	172	173
Number of attendances made by children for treatment			14,584	16,356	16,788

(c) DEFORMITIES TREATED BY EXERCISE AND MASSAGE OUTWITH THE ABOVE NAMED CLINICS.

Other children were dealt with at schools, child guidance clinics, and nursery schools, visits being made for this purpose by physiotherapists. Details of the numbers treated are given below.

	Special Schools.	Child Guidance Clinics.	Nursery Schools.	Totals.
Number of cases treated individually	45	14	93	152
Number of treatments given	830	39	432	1301
Number of classes held	610	104	10	724

(E) OTHER DISEASES.

(a) CASES DEALT WITH AT THE REGULAR CLINICS FOR "GENERAL" DISEASES.

Details of new cases—	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Bronchitis and bronchial catarrh	412	320	732	974	1,367
Anaemia and/or debility ...	702	805	1,507	1,462	1,871
Rickets	9	4	13	7	13
Tubercular conditions—					
Pulmonary (including contacts)	68	79	147	182	211
Non-pulmonary	4	7	11	16	20
Paralysis	1	4	5	6	6
Heart disease	52	50	102	39	30
Chorea	15	23	38	48	63
Enlarged tonsils and/or adenoids	108	135	243	278	537
Adenitis	42	33	75	71	213
Rheumatism	52	91	143	172	371
Enuresis	232	349	581	688	774
Malnutrition	15	18	33	39	38
Epilepsy	6	12	18	23	62
Digestive disorders	75	93	168	276	449
Infectious diseases	29	42	71	71	401
Mental deficiency	—	1	1	2	3
Nervous disorders	23	22	45	55	98
Others	193	187	380	392	756
Single visit cases	646	665	1,311	1,271	1,419
Totals	<u>2,684</u>	<u>2,940</u>	<u>5,624</u>	<u>6,072</u>	<u>8,702</u>
Clinic attendances of above cases ...	8,448	8,256	16,704	18,113	23,331

(b) SUPPLY OF MEDICINES.

Details of new cases seen elsewhere than at "General" Clinics—	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Sent from school inspection for immediate supply	398	557	955	1,005	1,077
Sent from skin, eye and ear clinics	309	396	705	797	1,291
Additional attendances at "General" clinics for medicine	8,252	6,828	15,080	17,799	22,608
Totals	<u>8,959</u>	<u>7,781</u>	<u>16,740</u>	<u>19,601</u>	<u>24,976</u>

(c) ARTIFICIAL LIGHT TREATMENT.

Details of new cases—	1950.		Totals.	1949.	1948.
	Boys.	Girls.		Totals.	Totals.
Rickets	17	14	31	19	33
Anaemia and/or debility ...	390	441	831	765	793
Nervous disorders	1	—	1	4	2
Enlarged glands	8	8	16	24	28
Chronic bronchitis	190	208	398	454	545
Rheumatism	36	71	107	77	120
Skin conditions	22	15	37	31	40
Eye conditions	1	3	4	2	14
Ear conditions	13	5	18	13	3
Other diseases	36	14	50	79	92
Single visit cases	26	45	71	157	200
Totals	740	824	1,564	1,625	1,870
Clinic attendances of above cases	9,831	11,317	21,148	21,323	24,516

In addition, 1 boy was treated at the Child Welfare Clinic in Summertown Road, Govan.

(d) CASES SEEN AT CARDIAC CLINICS.

The heart specialist from Stobhill Hospital again attended school clinics for the purpose of examining school children specially referred by School Medical Officers, and recommending any necessary treatment. During the session 514 (214 boys and 300 girls) were summoned, of whom 110 (37 boys and 73 girls) failed to attend. The remainder reported as follows :—

New Cases.		Re-examinations.		Totals.	
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
100	123	77	104	177	227

The specialist referred 11 children (7 boys and 4 girls) for electrocardiogram or X-ray investigation and 27 (12 boys and 15 girls) for admission to hospital. In 15 instances (5 boys and 10 girls) he advised that they should be passed out to ordinary school suitably graded as regards physical training in school and recommended 3 girls for special school and 1 boy as suitable for home tuition. In addition, 21 children (11 boys and 10 girls) were recommended other forms of specialist and school clinic treatment.

In his report the specialist stated that the work of the past year had largely been along the following lines and that the whole scheme had been working very satisfactorily :—

- (a) The attempt had been made to distinguish between the signs of "functional" as distinct from "organic" disease. In this way much unnecessary cardiac invalidism could be avoided.
- (b) The capabilities for exercise of those with organic disease had been assessed and these children allowed physical training at school according to a graded plan agreed upon with the superintendent of physical training in schools.
- (c) Where the diagnosis was in doubt as the result of a clinical examination, children had been referred to Stobhill Hospital for special investigations, and
- (d) In-patient facilities had been offered those thought to require a period of hospital treatment.

There had been one further development in the past year. It had always been difficult to know exactly what duties children with varying degrees of heart diseases were best fitted to perform on leaving school. Because of the interest shown by Professor Ferguson of Glasgow University in this problem, a special clinic had been started at which such children were interviewed, their physical and mental capabilities assessed, and, with the aid of employment officers, work thought to be suitable offered them. Professor Ferguson had kindly undertaken to follow up such cases for a short period in order to make sure that proper assessments had been made. The first small group dealt with had been doing well and there was little doubt that this scheme would become an integral part of the service.

7.—DENTAL INSPECTION AND TREATMENT.

This is the second complete school session during which the scheme, introduced last year, has been in full operation and it is now possible for comparisons to be made. Table V (pages 73 to 75) gives full details of the work during the year ending 31st July, 1950.

As regards the "Systematic" cases, a perusal of Table V reveals certain points which may be explained as follows:—

- (1) Fewer schools were visited during the year because of the decision to examine *all* the children in each selected school instead of those in the infant department only as originally planned.
- (2) More children were, however, systematically inspected and treated, and a greater number of cases was recorded where treatment was completed.
- (3) The upward trend (2.4%) in the numbers of children not requiring treatment was anticipated and should be progressive.
- (4) A most satisfactory feature was the sharp rise in the number of permanent fillings from 3,123 to 8,336.
- (5) The increased rate of fillings to extractions (permanent teeth) (524 : 100) was also gratifying.

Cases outwith the "Systematic" group included children treated at the special "emergency" clinic which was held every afternoon at Glenbarr Street for "toothache" cases. A total of 3,041 patients attended this clinic during the year.

The dental X-ray unit at Glenbarr Street continued its useful purpose of making available immediate radiographic diagnoses to all Dental Officers who are becoming increasingly conscious of its benefits; 231 radiographs were taken and processed during the year. When immediate relief from pain is desirable, this can be given on the premises on the day the X-ray is taken; otherwise, the radiograph is submitted to the Dental Officer concerned for future guidance.

Throughout the year the orthodontic clinics dealt with 285 children, while at the Dental Hospital a number of additional cases were being treated under special arrangements with the Education Health Service. Owing to the protracted treatment necessary in these cases a considerable waiting list was accumulated and it was found impossible to transfer Dental Officers from work of a more urgent nature. In the 1950-51 session, however, a scheme will be introduced which it is hoped will reduce the numbers awaiting treatment with the minimum of loss to other branches of the service.

8.—SPECIAL SCHOOLS AND CLASSES AND RESIDENTIAL SCHOOLS.

(a) FOR HANDICAPPED CHILDREN.

The following table shows the number of pupils at the various schools for handicapped children in the City (under the management of the Corporation) as at 30th June, 1950, and those in hospital schools and in residential schools for physically handicapped and convalescent children outwith the City as at 30th June, 1950.

CLASSIFICATION.	(1) Day Centres in City.		(2) Combined Day & Boarding Centres in City.		(3) Residential Centres outwith City.	
	No. of Centres.	No. of Pupils.	No. of Centres.	No. of Pupils.	No. of Centres.	No. of Pupils.
Physically Handicapped						
General	11	1,095	—	—	10	564
Deaf	1	27	2	216	—	—
Semi-deaf	1	74	1	26	—	—
Myopic	1	81	—	—	—	—
Blind	—	—	1	22	—	—
Mentally Handicapped						
General	18	2,957	—	—	—	—
Ineducable but train- able (in occupational centres)	9	383	—	—	—	—
	(30)	4,617	(2)	264	10	564

The total of the pupils shown above, 5,445, compares with a total of 5,815 in 1949, and with 5,940 pupils of similar categories receiving instruction in 1948.

The standard type of special school is a centre for both physically and mentally handicapped pupils (in separate classes), Protestant and Roman Catholic children being in separate schools. Exceptions are—1 centre for older mentally handicapped boys (Protestant and Roman Catholic), 2 centres for mentally handicapped children only, 4 centres for mentally handicapped children housed in ordinary schools (1 Protestant and 3 Roman Catholic), 9 occupational centres for trainable children housed in ordinary schools.

Owing to the reduced number of physically handicapped children it was considered advisable to transfer the physically handicapped pupils from Eastmuir School to Kennyhill School, leaving Eastmuir entirely for mentally handicapped children.

During the session the myopic classes at St. Vincent's (Tollcross) School were amalgamated with Albany School as the unit at St. Vincent's was too small for efficient education. Albany School was moved from the premises in Ashley Street to Church Street School and the myopic school was re-named Kelvin.

As a result of housing redistribution additional accommodation was required at Polmadie School and it was found necessary to transfer the Occupational Centre to Wolseley Street School. This Centre was re-named Wolseley Street Occupational Centre.

A new Residential School for Roman Catholic boys was opened at Craig House, Kilmarnock, on 1st September, 1949.

The *Residential Centres* outwith the City are now as follows :—

Hospital Schools—Victoria Auxiliary Infirmary, Philipshill ; Strathblane Home ; Mearnskirk and Stobhill (including Lenzie Annexe) Hospitals.

Residential Schools—

- 36 places at Caol Ruadh, Colintrave (Protestant P.H. boys) ;
- 30 places at Agnes Patrick, Ascog. (Protestant P.H. girls) ;
- 48 places at Craig, Kilmarnock. (Roman Catholic P.H. and convalescent boys) ;
- 23 places at Lumsden, Maybole. (Roman Catholic P.H. and convalescent girls) ;
- 64 places at Hillfoot, Bearsden. (Protestant convalescent girls) ;
- 65 places at Seafeld, Ardrossan. (Protestant convalescent boys).

There is also a residential school at Nerston, East Kilbride, with accommodation for 40 "maladjusted" children.

The period of residence for physically handicapped children averages from three to six months according to the needs of the individual child, about six weeks for convalescents and from three to nine months for patients admitted to Nerston.

EXAMINATION AND AFTER-CARE OF MENTALLY HANDICAPPED CHILDREN.

The number of children specially examined by the School Medical Officers regarding *mental defects* during the year was :—

	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
First examinations	324	254	578	619	645
Re-examinations	914	659	1,573	1,757	1,785
Totals	<u>1,238</u>	<u>913</u>	<u>2,151</u>	<u>2,376</u>	<u>2,430</u>

An After-Care Section of the Health and Welfare Department has now been set up under the National Health Service (Scotland) Act, 1947.

HOME TUITION SCHEME.

This scheme—set up in May, 1947 in terms of Section 14 of the Education (Scotland) Act, 1946—was continued during the year. Physically handicapped children, unable to attend school even with the provision of transport received private instruction of one hour's duration on two evenings per week. The number of children participating at 31st July, 1950 was 63 and 40 certificated teachers were employed outwith school hours.

It was possible for 7 children to be presented for the Calibration Test which was conducted in their homes under supervision. Some of the older pupils are being provided with a modified secondary course ; one girl is having a course in commercial subjects.

The main causes of incapacity from which the children in the scheme suffered are detailed below, and the numbers for the year 1949 are given in parentheses for each category.

Chronic heart disease, 13 (17) ; non-pulmonary tuberculosis, 10 (4) ; spina bifida, 5 (5) ; post-infantile paralysis, 6 (4) ; pseudo-hypertrophic muscular dystrophy, 4 (4) ; cerebral diplegia, 3 (2) ; arthritis, 3 (2) ; pulmonary conditions (non-tubercular), 3 (3) ; other causes, 16 (12).

In addition to the above schemes, Glasgow children are accommodated and educated at the following Centres not under the management of the Corporation :—

Biggart Memorial Home, Prestwick—40 physically handicapped children requiring nursing care.

East Park Homes in Glasgow and Largs—64 physically handicapped children requiring long-term nursing care.

Westerlea School for Spastics, Edinburgh—4 Protestant spastic children.

The Colony for Epileptics, Bridge of Weir—9 Protestant children suffering from serious epilepsy.

The Royal Blind School, Edinburgh—21 Protestant blind children.

Mary Hare Grammar School for the Deaf, Newbury, Berks.—2 children, former pupils of Renfrew Street School, were admitted to this school on 3-10-49 for secondary education.

The Rudolf Steiner Schools, Aberdeen—6 Protestant mentally handicapped children suffering also from gross physical handicap.

Larbert Certified Institution—1 mentally handicapped boy, Protestant.

Lennox Castle Certified Institution—77 mentally handicapped boys (Protestant and Roman Catholic) aged 12-16 years, mostly juvenile delinquents, but including a few cases of serious epilepsy with mental deterioration, and one deaf mentally handicapped boy for whom no other provision could be made.

St. Charles' Certified Institution, Carstairs—61 mentally handicapped Roman Catholic boys and girls.

St. Joseph's Certified Institution, Rosewell—10 Roman Catholic mentally handicapped children with multiple defects.

Waverly Park Certified Institution, Kirkintilloch—22 Protestant mentally handicapped girls.

(b) FOR NORMAL CHILDREN.

There are 5 Residential Schools outwith the City for normal children who usually go in school groups and stay for a period of four weeks. Accommodation is as follows :—

- 52 places at Achnamara, Lochgilphead (Protestant, post-primary boys and girls) ;
- 24 places at South Park, Ascog. (Protestant, primary boys) ;
- 24 places at Stevenson, Ascog. (Protestant, primary girls) ;
- 80 places at Castle Toward, by Dunoon. (Protestant, primary boys and girls) ;
- 60 places at Galloway, Wigtown. (Protestant primary boys and girls).

There is also a Residential Nursery School at Southannan, Fairlie, with 36 places and children go in groups from each Glasgow nursery school in turn for a period in residence, generally of four weeks.

In addition, the Corporation leased Dounans Camp, Aberfoyle for the months of October and November, 1949 and June, 1950 when approximately 200 normal children (Protestant and Roman Catholic) were accommodated each month, and Belmont Camp, Meigle during March, 1950 when 250 children were accommodated.

Arrangements were also made for parties of post-primary school children to undergo special character training courses of four weeks' duration at either Moray Sea School, Burghead, or Glenmore Lodge, Aviemore. At Burghead, four courses were arranged during the period July to October, 1949 when 59 boys in all attended and three courses from May to July, 1950 when 45 boys attended. At Aviemore, three courses were organised during the months of January, February and May, 1950, 58 boys and 62 girls being sent.

(c) *FOR MALADJUSTED CHILDREN.*

CHILD GUIDANCE.

The Child Guidance Clinics dealt with 3,309 children, as compared with 3,045 in the preceding year. These children showed one or more of the following symptoms :—Emotional disorders (general instability, anxiety and obsessional states, night terrors and sleep walking, enuresis and soiling, emotional retardation and regression, psychopathic personalities—1,450 instances) ; Behaviour disturbances (unmanageable behaviour, aggression and temper tantrums, sadistic tendencies, exhibitionism, truancy and wandering—648) ; Delinquency (theft, lying, malicious mischief and sexual offences—340) ; Educational

disability (general backwardness and specific disability—1,019) ; Speech defect—620 instances. Of these children, 121 were given residential treatment at Nerston Home as compared with 127 in the preceding session.

Further information can be found in the report issued annually by the Education Department.

SPEECH THERAPY.

Owing to shortage of staff it had not been possible to deal with many of the cases referred for treatment of speech disabilities and defects, and consequently a considerable waiting list had been accumulating. The position was eased by the appointment, to the Education Health Service in September, 1949, of two qualified speech therapists who have since been working full-time at Child Guidance clinics.

Details of the type of work done throughout the year are given in Appendix XI, page 86.

9.—ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.

At the end of session 1949-50, the Physical Education Staff consisted of the Superintendent of Physical Training, 2 Assistant Superintendents (a man and a woman), 42 Principal Teachers (28 men and 14 women), 106 assistant men teachers (including 3 seconded) and 85 assistant women teachers including 6 physiotherapists engaged at the three Orthopaedic Clinics ; 4 men and 3 women assistant teachers were employed in Further Education Day Classes.

One woman Principal Teacher was in charge of the orthopaedic clinics, the staff of which included among their duties visits to schools for physically handicapped pupils, nursery schools, and child guidance clinics. The Principal Teachers from secondary schools visited neighbouring primary schools to give demonstration lessons and to advise class teachers ; a number of weekly visits to primary schools was also made by men assistant teachers.

In Secondary Schools instruction in Personal Hygiene and simple First Aid was given and in the Primary Schools class teachers gave short talks on Health Habits. In schools where facilities were available children, with the consent of their parents, attended Spray Baths at one of the periods set apart for physical education.

The Mobile Spray Bath Unit continued in operation, visiting six selected schools weekly and providing facilities for approximately 200 spray baths daily. An Education Health Service nurse was in attendance at each of the schools for the purpose of examining the children before

they used the sprays ; during the year, 31,854 baths were given. Also continued were the special arrangements for the use by schools in the neighbourhood of spray bath facilities at Garngad and Cranstonhill Corporation Baths.

The provision of additional playing field accommodation for organised games continued to receive attention and schemes for the construction of a number of playing pitches for boys' and girls' games in the Possilpark and Govan areas were undertaken. Re-conditioning of pitches at Scotstoun Showground and Nether Pollok Playing Fields was carried out.

During the months of September and October, 1949 and May and June, 1950 (when swimming instruction was a compulsory part of the curriculum where facilities were available) arrangements were made for some 24,500 boys and girls to attend weekly at school or Corporation Baths Department ponds. During the winter months, November 1949 to April 1950, approximately 15,700 boys and girls, with the consent of their parents, continued to receive a weekly period of instruction in swimming.

10.—ARRANGEMENTS FOR FEEDING AND CLOTHING OF CHILDREN.

(a) ADMINISTRATION AND NATURE OF MEALS.—

See Report for 1945, page 34.

There are at present 21 Kitchens and 5 School Meals Centres providing meals for school children. These include Crookston Kitchen which is administered by the Health and Welfare Department.

On an "average" day in June, 1950, the total daily output of school meals was 58,629, of which 56,875 were dinners.

There were in use by the end of June, 1950—283 Dining Rooms and Halls, 210 of which were in school premises and 73 in halls or other non-school premises. Of the 210 in school premises, 21 were in schools for handicapped children and 39 were in nursery schools.

(b) NUMBER AND COST OF MEALS.—

The numbers of meals supplied during the year ending 31st July, 1950 were :—

	Breakfasts.	Dinners.	Teas.	Total.
Supplied on payment ...	211,959	9,866,117	1,051,401	11,129,477
Supplied free of charge ...	45,614	3,995,073	111,331	4,152,018
Totals ...	257,573	13,861,190	1,162,732	15,281,495

The total number of meals supplied during 1950 was 15,281,495 compared with 15,506,037 in 1949.

From the beginning of April 1950, dinners only were supplied to ordinary day-school pupils. Nursery schools, however, were provided with dinners and teas, but the only establishments receiving three meals daily were the Remand Home and the Health and Welfare Department Day Nurseries.

The charges for meals were altered, at the request of the Government, and the new charges operating since 1st January, 1950 are shown below with the old charges in parentheses :—

Dinners, five days per week, 2/3 (1/10), six days per week, 2/7 (2/1) ; three meals per day, six days per week 5/- (4/-).

(c) *BOOTS AND CLOTHING.*—

Boots and clothing, or both, were supplied to 3,188 children during the school year compared with 24,652 in 1949. The reduction in the numbers was due to the undertaking given by the National Assistance Board to ensure that children whose parents were in receipt of allowances from the National Assistance Board, the Ministry of Labour or the Ministry of National Insurance would be in a fit state to attend school.

(d) *MILK SUPPLY TO SCHOOL CHILDREN.*—

The total number of milk rations supplied during the year ending 31st July, 1950 was 32,049,978, a figure which compared with 32,318,834 in 1949. The most recent census figures showed that 84·7% of the children on the registers in October, 1949 were taking school milk as against 85·7% in October, 1948. The milk was provided free of charge.

The Senior Food Inspector of the Health and Welfare Department reported that pasteurised milk was supplied to schools in the City during the year by four creameries. Altogether, 161 samples were taken from the creameries at regular intervals for examination by the City Bacteriologist and City Analyst whose reports might be considered satisfactory. The average fat content of the samples was 3·68% and the average non-fatty solids equalled 8·70%. Where any unsatisfactory report was received, visits were paid to the creamery concerned and a full investigation made.

STATISTICAL AND OTHER APPENDICES.

TABLE I.—TOTAL NUMBER OF CHILDREN EXAMINED AT :

(A) (a) SYSTEMATIC EXAMINATIONS, i.e., the main groups recommended for the session (see page 12), and (b) OTHER SYSTEMATIC EXAMINATIONS, i.e., children missed at recommended age groups or otherwise outwith these groups.

GROUP.	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
(a) Entrants	9,095	8,753	17,848	17,990	16,769
Second Age Group	7,421	7,191	14,612	15,001	14,905
Third Age Group ...	7,430	7,475	14,905	14,638	14,206
Fourth Age Group	665	398	1,063	1,010	921
	24,611	23,817	48,428	48,639	46,801
(b) Others	227	341	568	827	1,137
Totals	24,838	24,158	48,996	49,466	47,938

For age distribution of these children see Appendix Ib on page 50.

In addition to these numbers of children, the following were examined in the course of Systematic Inspection of the pupils at Special Schools and Classes :—

GROUP.	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Physically handicapped children	229	219	448	583	562
Mentally handicapped children	472	359	831	856	872
Totals	701	578	1,279	1,439	1,434

(B) OTHER EXAMINATIONS—

GROUP.	1950.	1949.	1948.
(i) <i>In Schools</i> —			
Systematic Inspection of Nursery School Children	941	809	613
Other Examinations in Nursery Schools ...	3,486	541	—
Inspection of children in two High Schools			512
Systematic Inspection of Children in Independent Schools	<i>Included in (A)</i>	<i>Included in (A)</i>	817
1942 age-group (Visual Acuity and Hearing only)—(by school nurses)	14,546	13,031	14,420
Special Cases (in respect of particular defects)	11,680	11,563	15,432
Re-inspections by Medical Officers	10,851	11,696	10,422
Leaving Interviews	5,127	4,088	1,440
Examinations regarding Mental Defect ...	2,151	2,376	2,430
Discharges in Special Schools and Classes ...	308	376	404
Totals	49,090	44,480	46,490
(ii) <i>Mainly at Clinics</i> —			
Applicants for preliminary training as Teachers	39	64	65
Applicants for Licences under the Corporation Bye-laws for the Employment of Children	814	766	698
Adult Employees of the Corporation ...	795	78	97
*Certifications—Blind Persons Act, 1920 ...	9	14	15
Candidates for Printers' Apprenticeships ...	118	131	100
Children as to fitness for camps, etc.—			
Harvesters, etc.	7,629	6,694	3,489
Forestry, etc.	—	44	—
School and Junior Club groups	9,518	10,316	10,000
Children as to fitness for "School Journeys" abroad, etc.	344	649	—
Children as to fitness for admission to Residential Schools and Institutions ...	7,303	4,917	4,323
Pre-vocational Students	569	34	—
Other Special Cases	19	36	68
Examinations in Remand Home	2,730	1,521	1,531
Totals	29,887	25,264	20,386
(iii) <i>Cleanliness and Special Examinations</i> —			
†Cleanliness inspections (by school nurses) ...	153,616	160,999	141,084
Totals	153,616	160,999	141,084

* These examinations are made at the Central Clinic for the Blind.

† In addition, Nurse Inspectresses of the Sanitary Division made 139,663 cleanliness inspections in 1,169 visits to 79 schools (see page 68).

APPENDIX Ia.—NOTIFICATION TO PARENTS.

The numbers and percentages of individual children inspected at systematic examinations who were notified to parents as requiring treatment for conditions other than (a) defects of clothing or cleanliness (including pediculosis) and (b) minor dental defects, were as follows :—

GROUP.	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Entrants ...	2,849 (31·3)	2,752 (31·4)	5,601 (31·4)	5,714 (31·8)	6,570 (39·2)
2nd Age Group ...	2,220 (29·9)	2,326 (32·3)	4,546 (31·1)	4,965 (33·1)	5,781 (38·8)
3rd Age Group ...	1,619 (21·8)	2,121 (28·4)	3,740 (25·1)	3,467 (23·7)	4,529 (31·9)
4th Age Group ...	48 (7·2)	57 (14·3)	105 (9·9)	103 (10·2)	579 (28·6)
Others ...	63 (27·8)	92 (27·0)	155 (27·3)	207 (25·0)	
Totals ...	6,799 (27·4)	7,348 (30·4)	14,147 (28·9)	14,456 (29·2)	17,459 (36·4)

The numbers and percentages of cases in which intimation was made to parents verbally or by card, together with information as to similar intimations in respect of clothing, cleanliness, and/or minor dental defects will be found in Appendix IIa on page 58.

APPENDIX Ib.—AGE DISTRIBUTION OF CHILDREN

(a) Children within groups recommended

(b) Children outwith groups

‡ Entrants-Infants.

Ages.		Entrants-Infants.				
		4	5	6	7	8
BOYS.						
Non-transferred Schools	(a) ...	166	5,986	214	50	12
Do.	(b) ...	—	—	—	11	10
Transferred Schools	(a) ...	83	2,432	116	29	7
Do.	(b) ...	—	—	—	4	6
Totals	(a) ...	249	8,418	330	79	19
Do.	(b) ...	—	—	—	15	16
Totals, 1950	... ..	249	8,418	330	94	35
Totals, 1949	... ..	269	8,601	357	77	46
GIRLS.						
Non-transferred Schools	(a) ...	125	5,693	218	51	10
Do.	(b) ...	—	—	—	13	11
Transferred Schools	(a) ...	68	2,408	145	32	3
Do.	(b) ...	—	—	—	9	5
Totals	(a) ...	193	8,101	363	83	13
Do.	(b) ...	—	—	—	22	16
Totals, 1950	... ..	193	8,101	363	105	29
Totals, 1949	... ..	247	8,036	297	83	24
ALL.						
Totals	(a) ...	442	16,519	693	162	32
Do.	(b) ...	—	—	—	37	32
Totals, 1950	... ..	442	16,519	693	199	64
Totals, 1949	... ..	516	16,637	654	160	70

‡ This grouping applies only to

AT DATE OF SYSTEMATIC EXAMINATION.

for the session (as indicated by brackets).

recommended for the session.

‡ Second Age Group.			‡ Third Age Group.				‡ Fourth Age Group.				Totals
8	9	10	11	12	13	14	15	16	17	18	
69	4,235	797	—	202	4,691	488	9	412	148	—	17,479
—	7	45	18	6	4	32	24	2	—	—	159
52	1,971	297	—	147	1,707	195	—	86	10	—	7,132
—	9	15	12	10	2	6	4	—	—	—	68
121	6,206	1,094	—	349	6,398	683	9	498	158	—	24,611
—	16	60	30	16	6	38	28	2	—	—	227
121	6,222	1,154	30	365	6,404	721	37	500	158	—	24,838
122	6,504	1,186	84	288	6,260	848	72	420	181	—	25,315
55	4,037	841	—	214	4,459	483	3	270	60	—	16,519
—	7	41	15	9	8	26	42	1	3	—	176
43	1,822	393	—	116	1,947	256	—	49	16	—	7,298
—	34	36	12	14	9	37	9	—	—	—	165
98	5,859	1,234	—	330	6,406	739	3	319	76	—	23,817
—	41	77	27	23	17	63	51	1	3	—	341
98	5,900	1,311	27	353	6,423	802	54	320	79	—	24,158
99	6,005	1,360	66	291	6,337	863	42	281	115	5	24,151
219	12,065	2,328	—	679	12,804	1,422	12	817	234	—	48,428
—	57	137	57	39	23	101	79	3	3	—	568
219	12,122	2,465	57	718	12,827	1,523	91	820	237	—	48,996
221	12,509	2,546	150	579	12,597	1,711	114	701	296	5	49,466

the (a) lines on the table.

TABLE II.—SYSTEMATIC EXAMINATION OF CHILDREN IN ORDINARY SCHOOLS.
NUMBERS AND PERCENTAGES OF CHILDREN SUFFERING FROM DEFECTS.

An individual child may appear in several sections but only once in any section, i.e., only the child's major defect in any section is recorded—any minor defects in the same section are ignored in this table. "Sections" are indicated by the horizontal lines across the columns, and the section totals give the numbers of individual children having at least one defect in that section.

Age Groups.	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1949.	1948.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	
Number examined	9,095	8,753	7,421	7,191	7,430	7,475	665	398	24,838	24,158	48,996	49,466	47,938
Nature of defects found													
1. CLOTHING													
{ Insufficient	—	1	2	4	—	6	—	—	2	11	13	17	23
{ Ragged ...	4	3	9	1	—	3	—	—	13	7	20	16	18
{ Dirty	6	4	6	10	3	25	—	—	15	40	55	47	55
{ Dirty	(0.1)	(0.0)	(0.1)	(0.1)	(0.0)	(0.3)	—	—	(0.1)	(0.2)	(0.1)	(0.1)	(0.1)
Totals	10	8	17	15	3	34	—	—	30	58	88	80	96
{ Unsatisfactory	(0.1)	(0.1)	(0.2)	(0.2)	(0.0)	(0.5)	—	—	(0.1)	(0.2)	(0.2)	(0.2)	(0.2)
2. FOOTGEAR													
{ Unsatisfactory	10	6	15	5	3	28	—	—	28	39	67	75	99
{ None	(0.1)	(0.1)	(0.2)	(0.1)	(0.0)	(0.4)	—	—	(0.1)	(0.2)	(0.1)	(0.2)	(0.2)
Totals	10	6	15	5	3	28	—	—	28	39	67	76	99
{ Dirty ...	(0.1)	(0.1)	(0.2)	(0.1)	(0.0)	(0.4)	—	—	(0.1)	(0.2)	(0.1)	(0.2)	(0.2)
3. UNCLEANLINESS													
{ Dirty ...	—	—	1	1	—	1	—	—	1	2	3	10	10
{ Nits ...	186	673	148	778	147	1,659	—	1	483	3,153	3,636	4,741	4,284
{ Verminous ...	(2.0)	(7.7)	(2.0)	(10.8)	(2.0)	(22.2)	(0.3)	(0.3)	(1.9)	(13.1)	(7.4)	(9.6)	(8.9)
{ Dirty ...	10	30	9	19	9	55	—	—	28	105	133	131	110
{ Verminous ...	(0.1)	(0.3)	(0.1)	(0.3)	(0.1)	(0.7)	—	—	(0.1)	(0.4)	(0.3)	(0.3)	(0.2)
{ Dirty ...	12	7	14	3	5	17	—	—	32	28	60	39	62
{ Verminous ...	(0.1)	(0.1)	(0.2)	(0.0)	(0.1)	(0.2)	—	—	(0.1)	(0.1)	(0.1)	(0.1)	(0.1)
Totals	208	710	173	803	161	1,732	1	1	545	3,290	3,835	4,926	4,474
{ Dirty ...	(2.3)	(8.1)	(2.3)	(11.2)	(2.2)	(23.2)	(0.3)	(0.3)	(2.2)	(13.6)	(7.8)	(10.0)	(9.3)

TABLE II—Continued.

Age Groups.	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1950.	1949.	1948.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
7. NASO-PHARYNX													
(a) <i>Nose</i>													
Obstruction—for observation	107 (1.2)	56 (0.6)	33 (0.4)	34 (0.5)	17 (0.2)	10 (0.1)	—	—	157 (0.6)	101 (0.4)	258 (0.5)	237 (0.5)	456 (1.0)
Obstruction—for operation	59 (0.6)	38 (0.4)	18 (0.2)	16 (0.2)	6 (0.1)	8 (0.1)	1 (0.2)	—	84 (0.3)	62 (0.3)	146 (0.3)	148 (0.3)	142 (0.3)
Catarrh	48 (0.5)	39 (0.4)	41 (0.6)	20 (0.3)	25 (0.3)	19 (0.3)	—	—	117 (0.5)	78 (0.3)	195 (0.4)	156 (0.3)	192 (0.4)
Other conditions	—	1 (0.0)	5 (0.1)	1 (0.0)	5 (0.1)	5 (0.1)	—	—	11 (0.0)	7 (0.0)	18 (0.0)	12 (0.0)	23 (0.0)
(b) <i>Throat</i>													
Tonsils—for observation	680 (7.5)	668 (7.6)	280 (3.8)	306 (4.3)	168 (2.3)	219 (2.9)	3 (0.5)	2 (0.5)	1,140 (4.6)	1,207 (5.0)	2,347 (4.8)	2,224 (4.5)	3,013 (6.3)
Tonsils—for operation	363 (4.0)	359 (4.1)	154 (2.1)	201 (2.8)	67 (0.9)	143 (1.9)	1 (0.2)	—	589 (2.4)	712 (2.9)	1,301 (2.7)	1,341 (2.7)	787 (1.6)
Other conditions	3 (0.0)	2 (0.0)	2 (0.0)	3 (0.0)	—	12 (0.2)	—	—	5 (0.0)	17 (0.1)	22 (0.0)	19 (0.0)	27 (0.1)
(c) <i>Glands</i>													
For observation	84 (0.9)	75 (0.9)	29 (0.4)	32 (0.4)	24 (0.3)	31 (0.4)	1 (0.2)	—	138 (0.6)	138 (0.6)	276 (0.6)	280 (0.6)	342 (0.7)
For operation	—	1 (0.0)	—	—	—	—	—	—	—	1 (0.0)	1 (0.0)	5 (0.0)	3 (0.0)
Totals	1,344 (14.8)	1,239 (14.2)	562 (7.6)	613 (8.5)	312 (4.2)	447 (6.0)	6 (0.9)	2 (0.5)	2,241 (9.0)	2,323 (9.6)	4,564 (9.3)	4,422 (8.9)	4,985 (10.4)
8. EYES													
(a) <i>External Diseases</i>													
Blepharitis	51 (0.6)	45 (0.5)	36 (0.5)	57 (0.8)	50 (0.7)	62 (0.8)	5 (0.8)	1 (0.3)	142 (0.6)	168 (0.7)	310 (0.6)	365 (0.7)	466 (1.0)
Conjunctivitis	9 (0.1)	11 (0.1)	7 (0.1)	8 (0.1)	11 (0.1)	8 (0.1)	1 (0.2)	—	28 (0.1)	28 (0.1)	56 (0.1)	41 (0.1)	47 (0.1)
Corneal opacities	3 (0.0)	5 (0.1)	5 (0.1)	8 (0.1)	4 (0.1)	6 (0.1)	—	—	12 (0.0)	19 (0.1)	31 (0.1)	24 (0.0)	41 (0.1)
Strabismus	352 (3.9)	372 (4.2)	231 (3.1)	227 (3.2)	153 (2.1)	178 (2.4)	5 (0.8)	5 (1.3)	747 (3.0)	789 (3.3)	1,536 (3.1)	1,447 (2.9)	1,540 (3.2)
Other diseases	16 (0.2)	18 (0.2)	13 (0.2)	17 (0.2)	13 (0.2)	16 (0.2)	—	1 (0.3)	42 (0.2)	54 (0.2)	96 (0.2)	95 (0.2)	103 (0.2)
Totals	431 (4.7)	451 (5.2)	292 (3.0)	317 (4.4)	231 (3.1)	270 (3.6)	11 (1.7)	7 (1.8)	971 (3.0)	1,058 (4.4)	2,029 (4.1)	1,972 (4.0)	2,197 (4.6)

TABLE II—Continued.

Age Groups. ...	Entrants.		2nd age group.		3rd agegroup.		4th age group.		All ages.		1950.	1949.	1948.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
10. SPEECH													
Defective articulation ...	96 (1.1)	54 (0.6)	21 (0.3)	20 (0.3)	10 (0.1)	7 (0.1)	—	—	128 (0.5)	81 (0.3)	209 (0.4)	216 (0.4)	290 (0.6)
Stammering ...	20 (0.2)	3 (0.0)	22 (0.3)	4 (0.1)	23 (0.3)	7 (0.1)	—	—	66 (0.3)	14 (0.1)	80 (0.2)	82 (0.2)	97 (0.2)
Totals ...	116 (1.3)	57 (0.7)	43 (0.6)	24 (0.3)	33 (0.4)	14 (0.2)	—	—	194 (0.8)	95 (0.4)	289 (0.6)	298 (0.6)	387 (0.8)
11. MENTAL AND NERVOUS CONDITION													
Backward ...	5 (0.1)	3 (0.0)	21 (0.3)	9 (0.1)	14 (0.2)	6 (0.1)	—	—	41 (0.2)	18 (0.1)	59 (0.1)	61 (0.1)	147 (0.3)
Dull ...	3 (0.0)	2 (0.0)	8 (0.1)	9 (0.1)	—	2 (0.0)	—	—	11 (0.0)	13 (0.1)	24 (0.0)	35 (0.1)	75 (0.2)
Mentally defective (educable)	2 (0.0)	1 (0.0)	2 (0.0)	1 (0.0)	1 (0.0)	—	—	—	5 (0.0)	2 (0.0)	7 (0.0)	—	7 (0.0)
" " (ineducable)	—	—	—	—	—	—	—	—	—	—	—	—	2 (0.0)
Highly nervous ...	8 (0.1)	1 (0.0)	6 (0.1)	11 (0.2)	7 (0.1)	—	—	—	23 (0.1)	13 (0.1)	36 (0.1)	39 (0.1)	109 (0.2)
Difficult in behaviour ...	4 (0.0)	—	1 (0.0)	1 (0.0)	1 (0.0)	1 (0.0)	—	—	7 (0.0)	2 (0.0)	9 (0.0)	8 (0.0)	10 (0.0)
Totals ...	22 (0.2)	7 (0.1)	38 (0.5)	31 (0.4)	23 (0.3)	9 (0.1)	1 (0.2)	—	87 (0.4)	48 (0.2)	135 (0.3)	143 (0.3)	350 (0.7)
12. CIRCULATORY SYSTEM													
<i>(a) Organic Heart Disease</i>													
Congenital ...	25 (0.3)	24 (0.3)	18 (0.2)	12 (0.2)	15 (0.2)	16 (0.2)	—	—	58 (0.2)	53 (0.2)	111 (0.2)	107 (0.2)	131 (0.3)
Acquired ...	25 (0.3)	21 (0.2)	39 (0.5)	44 (0.6)	53 (0.7)	78 (1.0)	3 (0.5)	3	121 (0.5)	150 (0.6)	271 (0.6)	253 (0.5)	285 (0.6)
Functional Conditions ...	101 (1.1)	81 (0.9)	44 (0.6)	45 (0.6)	25 (0.3)	50 (0.7)	2 (0.3)	—	175 (0.7)	179 (0.7)	354 (0.7)	325 (0.7)	420 (0.9)
Totals ...	151 (1.7)	126 (1.4)	101 (1.4)	101 (1.4)	93 (1.3)	144 (1.9)	5 (0.8)	2 (0.5)	354 (1.4)	382 (1.6)	736 (1.5)	685 (1.4)	836 (1.7)

13. LUNGS													
Chronic Bronchitis ...	24 (0.3)	16 (0.2)	15 (0.2)	14 (0.2)	21 (0.3)	10 (0.1)	—	—	60 (0.2)	40 (0.2)	100 (0.2)	161 (0.3)	190 (0.4)
Suspected Tuberculosis ...	26 (0.3)	26 (0.3)	18 (0.2)	12 (0.2)	11 (0.1)	12 (0.2)	3 (0.8)	—	56 (0.2)	55 (0.2)	111 (0.2)	118 (0.2)	126 (0.3)
Catarrh ...	320 (3.5)	261 (3.0)	170 (2.3)	128 (1.8)	120 (1.6)	61 (0.8)	1 (0.3)	—	615 (2.5)	454 (1.9)	1,069 (2.2)	1,130 (2.3)	1,444 (3.0)
Other diseases ...	5 (0.1)	3 (0.0)	4 (0.1)	3 (0.0)	4 (0.1)	6 (0.1)	—	—	14 (0.1)	12 (0.0)	26 (0.1)	41 (0.1)	36 (0.1)
Totals ...	375 (4.1)	306 (3.5)	207 (2.8)	157 (2.2)	156 (2.1)	89 (1.2)	4 (1.0)	—	745 (3.0)	561 (2.3)	1,306 (2.7)	1,450 (2.9)	1,796 (3.7)
14. DEFORMITIES													
(a) <i>Congenital</i> ...	51 (0.6)	43 (0.5)	25 (0.3)	22 (0.3)	15 (0.2)	33 (0.4)	3 (0.5)	—	95 (0.4)	99 (0.4)	194 (0.4)	181 (0.4)	223 (0.5)
(b) <i>Acquired</i>													
Infantile Paralysis ...	10 (0.1)	7 (0.1)	3 (0.0)	6 (0.1)	12 (0.2)	6 (0.1)	2 (0.3)	—	27 (0.1)	21 (0.1)	48 (0.1)	43 (0.1)	29 (0.1)
Probable Rickets ...	48 (0.5)	12 (0.1)	12 (0.2)	7 (0.1)	8 (0.1)	14 (0.2)	—	—	68 (0.3)	33 (0.1)	101 (0.2)	134 (0.3)	202 (0.4)
Other causes ...	39 (0.4)	36 (0.4)	41 (0.6)	46 (0.6)	44 (0.6)	100 (1.3)	3 (0.5)	6 (1.5)	129 (0.5)	192 (0.8)	321 (0.7)	282 (0.6)	244 (0.5)
Totals ...	148 (1.6)	98 (1.1)	81 (1.1)	81 (1.1)	79 (1.1)	153 (2.0)	8 (1.2)	6 (1.5)	319 (1.3)	345 (1.4)	664 (1.4)	640 (1.3)	698 (1.5)
15. INFECTIOUS DISEASES ...													
	3 (0.0)	11 (0.1)	1 (0.0)	2 (0.0)	—	—	—	—	4 (0.0)	13 (0.1)	17 (0.0)	14 (0.0)	30 (0.1)
16. OTHER DISEASES OR DEFECTS ...													
	277 (3.0)	311 (3.6)	179 (2.4)	176 (2.4)	120 (1.6)	250 (3.3)	4 (0.6)	7 (1.8)	584 (2.4)	752 (3.1)	1,336 (2.7)	1,584 (3.2)	1,817 (3.8)

APPENDIX IIb.—VISUAL ACUITY AND HEARING OF CHILDREN BORN IN 1942.

See report for 1948, page 52.

The partial examination of children approximately 7 years old was again included in the annual scheme of systematic medical inspection of school children at the request of the Department of Health for Scotland. Detailed results of inspection during the period are given below under the relative sub-headings, and columns of 1949 and 1948 totals are also supplied for purpose of comparison.

VISUAL ACUITY.

Result of Eyesight (Snellen) Test.

		No. and percentage.				
		1950.			1949.	1948.
		Boys.	Girls.	Totals.	Totals.	Totals.
Children who wore glasses at examination.	With Glasses—					
	Good, 6/6 ...	63	74	137	98	147
		(0.9)	(1.0)	(0.9)	(0.8)	(1.0)
	Fair, 6/9, 6/12 ...	190	241	431	338	461
		(2.6)	(3.3)	(3.0)	(2.6)	(3.2)
	Bad, 6/18, etc. ...	43	52	95	139	176
	(0.6)	(0.7)	(0.7)	(1.1)	(1.2)	
	Without Glasses—					
	Good, 6/6 ...	27	35	62	27	60
		(0.4)	(0.5)	(0.4)	(0.2)	(0.4)
	Fair, 6/9, 6/12 ...	168	195	363	259	360
	(2.3)	(2.7)	(2.5)	(2.0)	(2.5)	
Bad, 6/18, etc. ...	101	137	238	289	363	
	(1.4)	(1.9)	(1.6)	(2.2)	(2.5)	
Children not wearing glasses at examination	Good, 6/6 ...	3,984	3,895	7,879	5,002	5,930
		(54.6)	(53.8)	(54.2)	(38.4)	(41.1)
	Fair, 6/9, 6/12 ...	2,436	2,343	4,779	6,217	6,655
		(33.4)	(32.3)	(32.9)	(47.7)	(46.2)
Bad, 6/18, etc. ...	585	640	1,225	1,237	1,051	
	(8.0)	(8.8)	(8.4)	(9.5)	(7.3)	
Totals ...	7,301	7,245	14,546	13,031	14,420	

Summary of findings (taking the better eye and with spectacles if worn at examination) :—

	No. and percentage.				
	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals
Good, 6/6	4,047 (55·4)	3,969 (54·8)	8,016 (55·1)	5,100 (39·1)	6,077 (42·1)
Fair, 6/9, 6/12	2,626 (36·0)	2,584 (35·7)	5,210 (35·8)	6,555 (50·3)	7,116 (49·3)
Bad, 6/18, etc.	628 (8·6)	692 (9·6)	1,320 (8·8)	1,376 (10·6)	1,227 (8·5)
Totals	<u>7,301</u>	<u>7,245</u>	<u>14,546</u>	<u>13,031</u>	<u>14,420</u>

Of those with defective eyesight, 1,338 (698 boys and 640 girls) were recommended for refraction, and 124 (57 boys and 67 girls) were advised to have re-test.

HEARING.

Result of hearing Test.

	No. and percentage.				
	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Normal	7,256 (99·4)	7,209 (99·5)	14,465 (99·4)	12,876 (98·8)	14,213 (98·6)
Defective—					
Grade I, for ordinary class	20 (0·3)	18 (0·2)	38 (0·3)	116 (0·9)	152 (1·0)
Grade IIa, for front seat	12 (0·2)	5 (0·1)	17 (0·1)	22 (0·2)	29 (0·2)
Grade IIb, for class for semi-deaf	11 (0·2)	8 (0·1)	19 (0·1)	16 (0·1)	25 (0·2)
Grade III, for deaf class	2 (0·0)	5 (0·1)	7 (0·0)	1 (0·0)	1 (0·0)
Totals	<u>7,301</u>	<u>7,245</u>	<u>14,546</u>	<u>13,031</u>	<u>14,420</u>

40 of the above children (22 boys and 18 girls) were referred to clinic for investigation of the cause of deafness.

APPENDIX IIc.—AVERAGE MEASUREMENTS OF SCHOOL CHILDREN.

The averages for age, height and weight of school children in the four age-groups who were examined at routine medical inspection during the year 1949-50 are given in the following pages.

Details of the sixteen-year-olds are as follows :—

PUPILS AGED SIXTEEN YEARS—

	Non-transferred		Transferred		All	
	Boys	Girls	Boys	Girls	Boys	Girls
Number examined ...	414	271	86	49	500	320
Average age (in months beyond year of age) ...	6.65	6.08	6.43	5.90	6.61	6.05
Height (in inches) ...	67.60	63.63	66.54	62.88	67.17	63.27
Weight (in pounds) ...	133.88	120.77	129.61	119.09	132.90	120.27

On page 94, arranged in tabular form, are the averages of the 5, 9 and 13 year-olds and the relative average measurements adjusted to uniform ages for the year 1950 and for each of the years back to 1941. To simplify the study of these adjusted measurements, the highest in each series is printed in **heavy** type and the second highest *in italics*. The findings may be summarised thus :—

(1) PUPILS AGED FIVE YEARS.

(a) BOYS. The average for both *height* and *weight* was the *highest* ever recorded in each of the columns in the table.

(b) GIRLS. *Highest* place was attained in *four* of the columns and second place in the remaining two. These latter were the height of "non-transferred" pupils which had an almost negligible decrease and the weight of "transferred" girls which, although improved, just failed to reach the premier position attained by pupils examined in 1946.

(2) PUPILS AGED NINE YEARS.

(a) BOYS. *Height* averages failed to improve upon those recorded in 1949; the "non-transferred" only sharing highest place with the previous best of 1949 while "transferred" declined to second place and the "all" figure inevitably dropped to second place also. *Weight* averages, however, attained *highest* place in each column.

(b) GIRLS. "Non-transferred" pupils showed a slight deterioration in height to second place and although the "*transferred*" figure reached *highest* place it was insufficient to raise the "all" figure which could only equal the previous highest of 1949. *Weight* attained *highest* place in each series.

(3) PUPILS AGED THIRTEEN YEARS.

(a) BOYS. *Highest* place was attained in *five* of the six columns—only height of "transferred" pupils fell to second place.

(b) GIRLS. *Highest* place was reached in *each* series.

(4) In all relative groups, the 1950 average measurement was *higher* than the highest average for any year prior to 1941.

In Appendix XIV, page 93, a complete record is displayed of the average measurements of Glasgow school children for each year from 1910 (when routine medical inspection was instituted by the School Board of Glasgow) to date. The table shows the average heights and weights of the total number of pupils in the five, nine and thirteen years' age-groups who were measured at routine inspection by School Medical Officers. Quinquennial figures have been tabulated also and the averages for the year 1950 have been added for comparison.

Attention is drawn to the fact, however, that only the figures for the years 1938 onwards are strictly comparable, as the average ages of the pupils examined in these years were adjusted to the uniform age-groups of 5 years 4 months, 9 years 5 months and 13 years 5 months. In earlier years, either the month of age was unrecorded (from 1910 to 1923) or an approximation was given to the nearest complete month which usually fluctuated between 4 and 5 months beyond the year of age (from 1924 to 1937). Moreover, the averages were only given to one decimal place in the years prior to 1938.

Nevertheless, even when due allowance is made for these discrepancies, it is clear that steady increases in the average height and weight of children in each of the selected age-groups have been recorded regularly over many of the forty years, and more especially during the latter half of the period.

TABLE III.—SYSTEMATIC MEDICAL EXAMINATION OF ACCORDING TO REMEDIABILITY OF THE MAJOR

CLASSIFICATION	NO. OF CHILDREN EACH GROUP (AND					
	Entrants			Second Age Group		
	Boys	Girls	Total	Boys	Girls	Total
I. Children free from defects	6,058 (66.6)	5,863 (67.0)	11,921 (66.8)	4,729 (63.7)	4,496 (62.5)	9,225 (63.1)
II. Children (otherwise free from defects) who suffer from—						
(a) Defective vision not worse than 6/12 in the better eye with or without glasses; or	—	—	—	637 (8.6)	673 (9.4)	1,310 (9.0)
(b) Conditions of the mouth and teeth requiring treatment	159 (1.7)	157 (1.8)	316 (1.8)	115 (1.5)	72 (1.0)	187 (1.3)
(c) Both (a) and (b)	—	—	—	11 (0.1)	17 (0.2)	28 (0.2)
Totals	159 (1.7)	157 (1.8)	316 (1.8)	763 (10.3)	762 (10.6)	1,525 (10.4)
III. Children suffering from ailments (other than those mentioned in II) from which complete recovery is anticipated within a few weeks	1,613 (17.7)	1,615 (18.5)	3,228 (18.1)	1,093 (14.7)	1,076 (15.0)	2,169 (14.8)
IV. Children suffering from (or suspected to be suffering from) defects less remediable than defects specified in II or III, distinguishing cases—						
(a) Where complete cure or restoration of function (in the case of eye defect, full correction) is considered possible	955 (10.5)	874 (10.0)	1,829 (10.2)	588 (7.9)	609 (8.5)	1,197 (8.2)
(b) Where improvement only is considered possible, e.g. without complete restoration of function	297 (3.3)	240 (2.7)	537 (3.0)	245 (3.3)	241 (3.4)	486 (3.3)
Totals	1,252 (13.8)	1,114 (12.7)	2,366 (13.3)	833 (11.2)	850 (11.8)	1,683 (11.5)
V. Children suffering from defects from which improvement is not considered possible	13 (0.1)	4 (0.0)	17 (0.1)	3 (0.0)	7 (0.1)	10 (0.1)
Total numbers of children examined	9,095	8,753	17,848	7,421	7,191	14,612

* Includes 568 children

CHILDREN IN ORDINARY SCHOOLS. CLASSIFICATION
DEFECTS FOUND IN THE INDIVIDUAL CHILD.

EXAMINED IN PERCENTAGES).						NO. OF CHILDREN EXAMINED (AND PERCENTAGES).				
Third Age Group			Fourth Age Group			* All Ages Totals, 1950			Totals, 1949	Totals, 1948
Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total		
5,335 (71·8)	4,826 (64·6)	10,161 (68·2)	560 (84·2)	326 (81·9)	886 (83·3)	16,826 (67·7)	15,730 (65·1)	32,556 (66·4)	33,087 (66·9)	29,026 (60·5)
560 (7·5)	670 (9·0)	1,230 (8·3)	42 (6·3)	26 (6·5)	68 (6·4)	1,254 (5·0)	1,391 (5·8)	2,645 (5·4)	2,216 (4·5)	2,702 (5·6)
62 (0·8)	96 (1·3)	158 (1·1)	2 (0·3)	2 (0·5)	4 (0·4)	339 (1·4)	340 (1·4)	679 (1·4)	749 (1·5)	852 (1·8)
6 (0·1)	11 (0·1)	17 (0·1)	3 (0·5)	—	3 (0·3)	21 (0·1)	29 (0·1)	50 (0·1)	51 (0·1)	67 (0·1)
628 (8·5)	777 (10·4)	1,405 (9·4)	47 (7·1)	28 (7·0)	75 (7·1)	1,614 (6·5)	1,760 (7·3)	3,374 (6·9)	3,016 (6·1)	3,621 (7·6)
846 (11·4)	934 (12·5)	1,780 (11·9)	26 (3·9)	17 (4·3)	43 (4·0)	3,613 (14·5)	3,687 (15·3)	7,300 (14·9)	7,358 (14·9)	9,039 (18·9)
379 (5·1)	562 (7·5)	941 (6·3)	18 (2·7)	17 (4·3)	35 (3·3)	1,963 (7·9)	2,088 (8·6)	4,051 (8·3)	4,147 (8·4)	4,211 (8·8)
232 (3·1)	368 (4·9)	600 (4·0)	11 (1·7)	9 (2·3)	20 (1·9)	793 (3·2)	871 (3·6)	1,664 (3·4)	1,804 (3·6)	1,990 (4·2)
611 (8·2)	930 (12·4)	1,541 (10·3)	29 (4·4)	26 (6·5)	55 (5·2)	2,756 (11·1)	2,959 (12·2)	5,715 (11·7)	5,951 (12·0)	6,201 (12·9)
10 (0·1)	8 (0·1)	18 (0·1)	3 (0·5)	1 (0·3)	4 (0·4)	29 (0·1)	22 (0·1)	51 (0·1)	54 (0·1)	51 (0·1)
7,430	7,475	14,905	665	398	1,063	24,838	24,158	48,996	49,466	47,938

outwith normal Age Groups.

APPENDIX IIIa.—*INSPECTION OF SPECIAL CASES ("NON-ROUTINES" AND "ABNORMALS").*

DEFECTS FOUND IN CHILDREN PRESENTED FOR MEDICAL INSPECTION AS "NON-ROUTINES"—11,680 children were presented for "non-routine" inspection (generally on account of defect observed or suspected by teachers); 10,174 of these were pupils in ordinary schools and 1,506 in special schools.

Some of these children were found on examination to have more than one defect. The individual results were: nits minor, 283; nits major and/or vermin, 313; skin conditions, 1,114; eye conditions (including defective vision), 2,850; ear, nose and throat defects, 1,509; "general" defects, 4,518; defective teeth, 206; no apparent disease, 414; and other causes, 524.

RE-INSPECTION BY MEDICAL OFFICERS OF "ABNORMALS."—The total re-inspections were 10,830. Of these, 3,437 (31·7 per cent.) were found to be receiving treatment at the school clinics, 1,977 (18·2 per cent.) were being treated elsewhere, 4,159 (38·4 per cent.) did not require treatment, and 1,257 (11·7 per cent.) had not had the necessary treatment provided. These last were unimportant cases or were reported for "following-up" by other methods.

(Details of "non-routine" and "abnormal" cases examined in Nursery Schools may be found on page 81).

APPENDIX IIIb.—*OTHER SPECIAL INSPECTIONS.*

(a) LEAVING INTERVIEWS.—These were granted to 5,127 pupils in order to bring medical records up-to-date and to give advice regarding suitability for certain occupations.

(b) HOLIDAY CAMPS, ETC.—The usual arrangements were made for the inspection of pupils attending schools, play centres and junior clubs who had been proposed for holiday camps in the summer and for children going to harvesting camps in the autumn. Slightly fewer children than last year were dealt with in connection with holiday camps but a more than corresponding increase in the number of harvesters was examined.

(i) *School and Junior Club Camps (June-July, 1950).*

	Boys.		GIRLS.	
	Preliminary Inspection.	Final Inspection.	Preliminary Inspection.	Final Inspection.
	No. and %.	No. and %.	No. and %.	No. and %.
Fit	2,240 (90.0)	2,465 (98.8)	1,661 (73.9)	2,215 (96.9)
*Fit?	235 (9.4)	—	573 (25.5)	—
Unfit	15 (0.6)	29 (1.2)	14 (0.6)	71 (3.1)
Totals	2,490	2,494	2,248	2,286

* Doubtful fitness at preliminary inspection.

In the above table the percentages shown for children recorded as "fit" at the preliminary inspection were superior to those of 1949, but, as always, a few schools and junior clubs presented children more than 50% of whom had to be rejected mostly on account of verminous conditions.

(ii) *Children going to Harvesting Camps (October, 1949).*

	Boys.		GIRLS.	
	Preliminary Inspection.	Final Inspection.	Preliminary Inspection.	Final Inspection.
	No. and %.	No. and %.	No. and %.	No. and %.
Fit	2,767 (85.2)	2,652 (96.6)	668 (66.5)	537 (84.8)
*Fit?	394 (12.2)	1 (0.0)	234 (23.3)	—
Unfit	85 (2.6)	92 (3.4)	102 (10.2)	96 (15.2)
Totals	3,247	2,745	1,004	633

* Doubtful fitness at preliminary inspection.

The results of inspection were similar to those of the holiday camps. Although improved percentages were recorded, a few of the schools presented too many unclean children for examination.

(c) CLEANLINESS INSPECTIONS IN SCHOOLS.—During the year, nurses from the Education Health Service examined more children than in any previous year with the exception of 1949, and nurse inspectresses saw the greatest number ever recorded in these Reports. The results tabulated overleaf indicate that the cleanliness inspectresses, who visit schools in the less salubrious areas, found a slight improvement in the girls and a deterioration in the boys, whilst the nurse inspectresses reported general improvement especially among the girls.

Cleanliness Inspectresses of the Education Health Service.

	Boys.		GIRLS.	
	1950	1949	1950	1949
<i>First Inspections.</i>				
Examined ...	50,290	53,990	53,116	55,939
Infested ...	1,351 (2.7)	1,344 (2.5)	3,447 (6.4)	4,162 (7.5)
Infected ...	3,160 (6.3)	3,360 (6.2)	12,283 (23.1)	12,282 (22.9)
<i>Re-Inspections.</i>				
Examined ...	12,770	14,252	37,440	36,818
Infested ...	959 (7.5)	1,093 (7.6)	5,072 (13.5)	5,484 (14.9)
Infected ...	3,715 (29.0)	3,777 (26.5)	18,458 (49.3)	18,487 (50.2)

In 361 instances, formal notices to cleanse children within 24 hours were issued, mainly by Cleanliness Inspectresses and Senior Women Assistants. Of this number, 177 were cleansed at home by the parents and 130 were compulsory disinfested at school or clinic. Sixteen parents were successfully prosecuted under the Education (Scotland) Act, 1946, Section 52; fifteen were fined £1 and one was bound over for six months.

Nurse Inspectresses of the Sanitary Divisions.

	Boys.		GIRLS.	
	1950	1949	1950	1949
<i>General Inspections.</i>				
Examined ...	52,701	52,242	49,256	47,685
Infested ...	171 (0.3)	122 (0.2)	408 (0.8)	329 (0.7)
Infected ...	5,564 (10.6)	5,866 (11.2)	14,483 (29.9)	14,800 (31.0)

The Nurse Inspectresses also visited 7,148 houses and re-visited 432. They issued 533 formal printed notices to parents to cleanse the children within 24 hours, and reported that 159 children had been cleansed at clinics and 9,214 by the parents.

APPENDIX IIIc.—CLEANLINESS SUPERVISION BY SENIOR WOMEN ASSISTANTS (ASSISTED BY WELFARE ATTENDANTS) AT SELECTED SCHOOLS.

This scheme, initiated in January, 1941, with 6 schools and now functioning in 26 schools is established in selected schools where suitable accommodation is available and where the Senior Woman Assistant normally is sufficiently free from teaching duties.

The main objective is the inculcation of cleanliness of person and clothing and good condition of footgear by methods of persuasion and encouragement in a friendly atmosphere. Repressive measures are kept in the background and only gross cases of persistent neglect are dealt with under the statutory powers provided by the Education (Scotland) Act, 1946, and the Children and Young Persons (Scotland) Act, 1937.

Some of the usual methods employed in these particular schools include the following :—

- (1) Provision of regular lessons on hygiene to classes above the Infant Department ;
- (2) Examination of all pupils by the Senior Woman Assistant with the aid of a Welfare Attendant, and the making of returns in September and May of the conditions found ;
- (3) Registration and re-examination of unsatisfactory cases, the giving of marks for cleanliness, etc., and the interviewing of parents where necessary ;
- (4) In troublesome cases, cleansing children in school with parents' consent or, in persistent cases, arranging for the issue of a formal notice to cleanse and on non-compliance cleansing the child in school without consent ;
- (5) Encouraging diphtheria immunisation and the medical treatment of children either at school clinics or by private medical practitioner, and generally seeing to the physical wellbeing of the pupils in co-operation with the staff of the Education Health Service.

In the following table the percentages of children in the 26 schools who were found to be clean and well-cared-for in every respect at two general inspections during Session 1949-50 are compared with the results of similar inspections during 1948-49 and 1947-48.

		First Inspection.		Second Inspection.	
		Boys.	Girls.	Boys.	Girls.
Six original schools (January, 1941)	1950	86.8%	64.6%	91.1%	70.1%
	1949	84.8%	53.4%	88.3%	67.2%
	1948	85.4%	62.5%	88.1%	62.1%
Other schools (June, 1942 and later)	1950	86.1%	64.2%	86.9%	68.4%
	1949	81.9%	59.2%	87.7%	68.1%
	1948	80.6%	56.2%	86.4%	69.0%
All twenty-six schools	1950	86.2%	64.3%	87.6%	68.7%
	1949	82.6%	59.7%	87.8%	67.9%
	1948	81.5%	57.6%	86.8%	67.3%

The percentages for the 6 *original schools* showed a decided improvement at both first and second inspections, only one school being much below the average for the group and even it had improved on the previous year.

In the *other schools*, the results of the first inspection were much improved over those for the years 1949 and 1948 and although the second inspection records did not quite reveal the same tendency they compared favourably with the past two years. Nevertheless, a few schools returned unsatisfactory percentages, especially for girls, and were the means of reducing the general average below that which should be possible of attainment.

Taking the twenty-six schools as a whole, the girls showed the greatest improvement, reaching the highest level at first inspection since the scheme commenced and at second inspection bettering the returns of the previous three years. The boys, however, although steadily improving at first inspection have apparently, at second inspection, reached a point above which little change may be expected and which may be regarded as satisfactory so long as there is no deterioration.

TABLE IV.—RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.

Disability.	(a)	(b)	(c)	Totals.
	At ordinary school.	At special schools or classes.	At no school or institution.	
1. BLIND	—	28	—	28
2. PARTIALLY SIGHTED—				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	—	35	—	35
(b) Other conditions of the eye, <i>e.g.</i> , cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	—	56	—	56
3. DEAF—Grade I	*87	—	—	87
Grade IIA	*27	—	—	27
Grade IIB	—	89	—	89
Grade III	—	111	—	111
4. DEFECTIVE SPEECH—				
(a) Defects of articulation requiring special educational measures	} †620	3	—	623
(b) Stammering requiring special educational measures				
5. MENTALLY DEFECTIVE— (Children between 5 and 16 years)—				
(a) Educable (I.Q. approx. 50-70)	—	2,011	—	2,011
(b) Ineducable (I.Q. generally less than 50)	—	383	26	409
6. EPILEPSY—				
(a) Mild and occasional ...	—	44	—	44
(b) Severe (suitable for care in a residential school) ¶	—	—	‡2	2
7. PHYSICALLY DEFECTIVE— (Children between 6 and 16 years)—				
(a) Non - pulmonary tuberculosis (excluding cervical glands)	—	165	‡10	175
(b) General orthopaedic conditions	—	182	‡18	200
(c) Organic heart disease ...	—	75	‡14	89
(d) Other causes of ill-health	—	376	‡17	393
<i>Carried forward</i> ...	734	3,558	87	4,379

Disability.	(a)	(b)	(c)	Totals.
	At ordinary school.	At special schools or classes.	At no school or institution.	
<i>Brought forward</i> ...	734	3,558	87	4,379
8. MULTIPLE DEFECTS—				
(i) Mentally defective (ineducable) and physically defective ("general orthopaedic conditions") ...	—	—	31	31
(ii) Mentally defective (ineducable and epilepsy (mild)) ...	—	—	—	—
(iii) Mentally defective (ineducable and epilepsy (severe)) ...	—	—	13	13
(iv) Mentally defective (ineducable) and blind ...	—	—	8	8
(v) Mentally defective (educable) and physically defective ("general orthopaedic conditions") ...	—	267	—	267
(vi) Mentally defective (educable) and epilepsy (mild)	—	19	—	19
(vii) Mentally defective (educable) and epilepsy (severe)	—	—	—	—
(viii) Mentally defective (educable) and physically defective ("other causes of ill-health") ...	—	529	—	529
(ix) Mentally defective (educable) and deaf ...	—	97	—	97
(x) Mentally defective (educable) and blind ...	—	—	—	—
(xi) Other multiple defects	—	378	§19	397
Totals ...	734	4,848	158	5,740

* Pupils examined at Routine Medical Inspection during the session.

¶ A number of cases of severe epilepsy "not suitable for care in a residential school" are lodged in Certified Institutions and the Colony for Epileptics, Bridge of Weir.

† Children attending Child Guidance Clinics during the session.

‡ Home Tuition cases.

§ Includes 2 Home Tuition cases.

TABLE V.—DENTAL INSPECTION AND TREATMENT.

DENTAL INSPECTION.—

(1) NUMBER OF CHILDREN INSPECTED BY THE DENTAL OFFICERS.	1950			1949	1948
	System- atic Exam- inations.	Other Cases.	Totals.	Totals.	Totals.
AGE.					
2	—		—	10	—
3	—		—	20	—
4	22		22	22	42
5	3,305		3,305	3,836	4,676
6	3,866		3,866	4,215	5,476
7	3,621		3,621	3,192	4,532
8	3,379		3,379	2,529	3,369
9	3,553	Nil.	3,553	2,071	3,587
10	3,404		3,404	1,890	3,605
11	3,284		3,284	1,612	3,222
12	1,843		1,843	637	2,148
13	1,060		1,060	301	1,460
14	995		995	345	758
15	75		75	7	129
16	—		—	—	15
17	—		—	—	5
18	—		—	—	3
19	—		—	—	1
Totals	28,407	—	28,407	20,687	33,028
(1A). No. of schools in- spected	43		43	53	65
(1B). Half-days spent at inspection	110		110	92	134
(2). Found to require treatment	21,474 (75·6%)	Nil.	21,474 (75·6%)	16,143 (78·0%)	24,503 (74·2%)
(2A). Number of children accepting treatment (59·0%)	12,677 (59·0%)		12,677 (59·0%)	9,663 (59·9%)	14,854 (60·6%)
(2B). Cards not returned or returned blank (4·0%)	851 (4·0%)		851 (4·0%)	782 (4·8%)	1,520 (6·2%)
(2c). Promised private treatment (37·0%)	7,946 (37·0%)		7,946 (37·0%)	5,698 (35·3%)	8,129 (33·2%)

DENTAL TREATMENT.—

	1950			1949	1948
	Systematic Examinations.	Other* Cases.	Totals.	Totals.	Totals.
(3). Actually treated by the school dental officers	12,004	11,074	23,078	22,236	22,946
(3A). Number of the above cases where treatment was completed ...	8,555 (71·3%)	8,129 (73·4%)	16,684 (72·3%)	14,260 (64·1%)	8,744 (38·1%)
(4). Number of attendances for treatment	32,041	25,033	57,074	56,618	52,998
(4A). Attendances, but treatment not given	2,854	2,087	4,941	3,438	3,759
(5). Fillings—					
(a) Permanent teeth	8,336	5,572	13,908	8,886	9,249
(b) Temporary teeth	2,266	704	2,970	3,881	1,076
(6). Extractions—					
(a) Permanent teeth—					
Without anaesthetic	—	6	6	1	19
With local anaesthetic	1,591	3,227	4,818	3,848	3,909
With general anaesthetic ...	—	—	—	—	—
(b) Temporary teeth—					
Without anaesthetic	34	13	47	24	35
With local anaesthetic	17,372	15,197	32,569	38,253	32,886
With general anaesthetic ...	—	—	—	—	—
(7). Number of administrations of general anaesthetic for extractions ...	—	—	—	—	—
(8). Other operations—					
(a) Permanent teeth—					
Scalings ...	1,742	1,220	2,962	2,093	3,901
Gum treatment ...	606	771	1,377	1,694	3,079
Silver nitrate dressings	409	202	611	2,241	1,940
Temporary fillings	2,598	1,814	4,412	3,406	4,268
Others ...	1,061	936	1,997	1,295	1,694
(b) Temporary teeth—					
Scalings ...	30	23	53	100	42
Gum treatment ...	65	44	109	194	180
Silver nitrate dressings	5,893	2,283	8,176	10,329	9,522
Temporary fillings	292	160	452	682	301
Others ...	136	71	207	164	49

*Obtained from sources other than Routine Dental Inspection, including emergency treatment cases and patients referred by school medical officers, teachers, etc.

	1950			1949	1948
	System- atic Exam-	Other Cases.	Totals.	Totals.	Totals.
(9) Half-days devoted to inspection	110	—	110	92	134
Half-days devoted to treatment	3,945	2,507	6,452	5,920	5,096
Half-days devoted to orthodontic treatment	Not available.		400	93	72
(10) Number of children treated under private arrangements ...	Not known.				
(11) Ratio of fillings to extractions (permanent teeth only) ...	524 : 100	172 : 100	288 : 100	231 : 100	235 : 100

Orthodontic Treatment.—An aggregate of 2,482 treatments was given to 285 children at the school clinic, about 68 cases being completed.

Other Work.—Other forms of treatment given were as follows :—

Crowns	5
Artificial dentures	48
Root treatments	25
Special operation	1
Surgical case	1
X-ray examinations	231

AGE DISTRIBUTION OF "OTHER CASES."—

Age in years ...	1	2	3	4	5	6	7	8
Number treated ...	1	36	169	250	1,178	1,305	1,281	1,342
Age in years ...	9	10	11	12	13	14	15	16
Number treated ...	1,423	1,167	905	729	709	499	73	7

TOTAL 11,074

APPENDIX VI.—SUMMARY OF MEDICAL INSPECTION AND TREATMENT STATISTICS (of which details are given throughout Report) showing comparison with Statistics for previous two years.

A. INSPECTION.

Type.	Cases 1950	Cases 1949	Cases 1948
Systematic Examinations (<i>page 47</i>)	48,996	49,466	47,938
Systematic Examinations— Special Schools (<i>page 47</i>)	1,279	1,439	1,434
Other Examinations in Schools (<i>page 48</i>) ...	49,090	44,480	46,490
Other Examinations mainly in Clinics (<i>page 48</i>)	29,887	25,264	20,386
Cleanliness Examinations (<i>page 48</i>)	153,616	160,999	141,084
Dental Inspections (<i>page 73</i>)	28,407	21,622	33,028
Remand Home Inspections (<i>page 84</i>) ...	2,730	1,521	1,483
Totals	314,005	304,791	291,843

B. TREATMENT.

Disease or Defect.	Cases.			Attendances.		
	1950	1949	1948	1950	1949	1948
<i>(a) MINOR AILMENTS—</i>						
EAR—						
Examined only ...	1,533	1,708	2,071	} 57,139	57,018	57,721
Clinic Treatment ...	2,275	2,384	2,570			
Aurists' Examinations	919	1,284	1,157	919	1,284	1,157
Aurists' Classifications	63	75	59	73	75	59
Audiometric Surveys...	754	—	—	857	—	—
<i>(page 26)</i>	5,544	5,451	5,857	58,988	58,377	58,937
EYE	2,156	2,406	2,513	19,857	22,559	23,360
<i>(page 28)</i>						
SKIN—						
Cuts, minor injuries, etc.	3,044	2,923	2,974	} 102,727	108,423	138,182
Clinic Treatment ...	11,256	11,868	18,191			
Cleansing Clinics ...	520	423	513	900	695	962
Ringworm—Head ...	75	106	126	80	106	126
Body ...	174	201	280	<i>Included under "Clinic Treatment."</i>		
Scabies Baths ...	(377)	*(708)	(1,841)	2,285	4,015	12,942
<i>(pages 25 and 28)</i>	15,069	15,521	22,084	105,992	113,239	152,212
<i>(b) DEFECTIVE VISION—</i>						
Spectacles supplied ...	4,593	2,166	5,577	5,215	2,193	7,761
<i>(page 30)</i>						

* Cases are included under "clinic treatment" but attendances are shown separately.

Disease or Defect.	Cases.			Attendances.		
	1950	1949	1948	1950	1949	1948
<i>(c) EAR, NOSE AND THROAT—</i>						
Tonsils and Adenoids operations	1,523	1,966	1,137	5,053	6,184	3,488
Other operations ...	31	22	55	31	22	55
<i>(page 31)</i>	1,554	1,988	1,192	5,084	6,206	3,543
<i>(d) ORTHOPAEDIC—</i>						
Examined only ...	1,007	1,052	1,069	1,007	1,052	1,069
Plaster Cases	117	—	—	117	—	—
Treated by exercises ...	774	859	806	15,630	17,585	17,719
Treated by appliances	—	—	105	—	—	212
Treated outwith clinics	152	242	<i>Not available</i>	1,301	1,393	<i>Not available</i>
<i>(page 33)</i>	2,050	2,153	1,980	18,055	20,030	19,000
<i>(e) OTHER DISEASES—</i>						
General	5,624	6,072	8,702	16,704	18,113	23,331
Supply of Medicines	1,660	1,802	2,368	15,080	17,799	22,608
Artificial Light ...	1,564	1,625	1,870	21,148	21,323	24,516
Cardiac Cases ...	223	239	268	404	<i>Included in "General"</i>	
<i>(page 35)</i>	9,071	9,738	13,208	53,336	57,235	70,455
<i>(f) DENTAL</i> <i>(page 74).</i>	23,078	22,236	22,946	62,015	60,056	56,757
<i>(g) REMAND HOME ...</i> <i>(page 84)</i>	296	252	339	296	252	339
TOTALS	71,477	67,277	86,535	337,739	344,681	404,648

**APPENDIX VII.—NURSERY SCHOOLS AND DAY
NURSERIES.**

At the end of June 1950, 36 Nursery Schools were functioning under the Education Department with places for 1,355 children and there were 36 children in Southannan Residential Nursery School, Fairlie. On the same date the Health and Welfare Department had under its management 15 day Nurseries with about 700 places, and one Weekly Nursery for 40 children whose mothers worked on nightshifts.

From the beginning of the school year entire responsibility for the medical supervision of children attending nursery schools was assumed by the Education Health Service and Child Welfare Medical Officers discontinued their visitations. Under the new arrangement each school was visited weekly by a member of the Education Health Service staff and the Superintendent or Teacher-in-charge was encouraged to seek advice at all other times from the nearest school clinic. A School Medical Officer visited fortnightly and examined any child presented (a) for annual routine inspection, (b) because of ailment suspected by teacher ("non-routine"), or (c) for re-inspection on account of defect observed at a previous examination ("abnormal"). During the alternate week, when the doctor was not due, a school nurse attended and gave advice if required.

As a result of the foregoing, more children than usual were medically examined. During the year ended 31st July, 1950, 941 children (458 boys and 483 girls) were subjected to "routine inspection," 3,465 were examined as "non-routine," and 21 were re-inspected ("abnormals"). Full details of these examinations are given in the following pages.

ROUTINE INSPECTION.

(i) *Numbers and Percentages of Children Suffering from Defects*
(see Table II, page 52 for full details of headings).

Nature of Defects Found.	Number Examined.		
	Boys.	Girls.	Totals.
Unsatisfactory clothing	—	2	2 (0.2%)
Uncleanliness of head	10	40	50 (5.3%)
Skin conditions of head or body	12	8	20 (2.1%)
Defective nutrition	19	30	49 (5.2%)
Mouth and teeth unhealthy	8	3	11 (1.2%)
Naso-pharyngeal conditions	106	81	187 (17.7%)
Eye diseases (excluding defective eye-sight)	20	22	42 (4.5%)
Defective vision	5	3	8 (0.8%)
Ear diseases (including defective hearing)	8	3	11 (1.2%)
Defective speech	8	5	13 (1.4%)
Mental and nervous conditions	—	—	—
Defects of circulatory system	5	9	14 (1.5%)
Pulmonary conditions	44	50	94 (10.0%)
Deformities	33	28	61 (6.5%)
Other diseases or defects	29	26	55 (5.8%)

(ii) *Classification of Children according to Remediability of Major Defects Found in the Individual Child* (see Table III, page 64, for full details of headings).

Classification.	Number Examined.		
	Boys.	Girls.	Totals.
Free from defects	247	280	527 (56.0%)
Defects of mouth and teeth only	3	2	5 (0.5%)
Temporary ailments	108	117	225 (23.9%)
"Curable" defects	57	46	103 (10.9%)
"Improvable" defects	43	38	81 (8.6%)
Defects not "improvable"	—	—	— (0.0%)
Totals	458	483	941

(iii) *Additional Information.*

Parents were notified of defects found in 371 instances, 54 (5.7 per cent.) of these being due to clothing, cleanliness, or minor dental defects, and 317 (33.7 per cent.) being in respect of other defects. School Medical Officers also noted 40 cases (4.2 per cent.) for re-inspection as a result of defects observed in clothing, cleanliness, or for minor dental defects, and 384 children (40.8 per cent.) having other defects. "Sound teeth" was recorded in 684 cases (72.7 per cent.) and 791 pupils (84.1 per cent.) were recorded as having had complete diphtheria immunisation. The age distribution of the children at the date of inspection was 2 years, 288 ; 3 years, 418 ; 4 years, 230 ; 5 years, 5.

INSPECTION OF NON-ROUTINE CASES.

Children to the number of 3,465 were presented for inspection on account of defects observed or suspected by teachers. The individual results were as follows :—

Nits minor, 27 ; nits major, 10 ; skin conditions, 267 ; eye conditions, 155 ; ear, nose and throat defects, 409 ; "general" defects, 2,001 ; defective teeth, 123 ; no apparent disease, 337 ; and other causes, 142.

RE-INSPECTION OF " ABNORMAL " CASES.

The total number of re-inspections was 21, and 6 of these pupils were found to be receiving treatment at school clinics whilst 2 were being treated elsewhere. Treatment was not required in 5 cases and 8 others were not obtaining the necessary treatment for various reasons.

APPENDIX VIII.—MASS MINIATURE RADIOGRAPHY.

The Education Health Service continued to arrange with the Mass Miniature Radiography Centre for the X-raying of pupils attending Glasgow schools. Children mostly of 13 years and over were dealt with, a miniature photograph being taken of each and any case of apparent abnormality being recalled for a large film and/or medical examination.

In the course of Session 1949-50, pupils to the number of 17,441 (8,536 boys and 8,905 girls) were examined. Of these, 16,107 (7,927 boys and 8,180 girls) had miniature film only taken and the remaining 1,353 were recalled as follows :—

	Males.		Females.		Total.	
	Number.	Rate per 1000.	Number.	Rate per 1000.	Number.	Rate per 1000.
For large film only ...	384	45	434	49	818	47
For medical examination only	54	6	98	11	152	9
For medical examination and large film ...	52	6	71	8	123	7
For observation by M.R. Unit.	124	15	136	15	260	15
Total number recalled ...	614	72	739	83	1,353	78

Details of the abnormalities discovered during the year are shown in the following table :—

	No action (miniature film only).		No action after investigation		Referred to own doctor.		Still under observation by M.R. Unit		Sent to hospital.		Total Number examined (and rate per thousand).		
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.
PULMONARY TUBERCULOSIS													
<i>Re-infection or adult type—</i>													
Active ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Inactive ...	2	1	5	6	—	—	12	16	2	9	14	25	39 (2.2)
Previously known ...	1	6	6	3	—	—	14	26	—	—	21	33	54 (3.1)
<i>First Infection—</i>													
Active primary ...	—	—	—	—	—	—	7	8	—	—	14	17	31 (1.8)
Other primary ...	616	488	122	139	—	—	15	11	—	—	766	647	26 (1.5)
													1,413 (81.0)
OTHER PULMONARY ABNORMALITIES													
Root involvement ...	46	22	32	15	—	—	11	19	—	—	89	56	145 (8.3)
Pulmonary fibrosis ...	7	7	28	19	—	—	6	7	—	—	41	33	74 (4.2)
Pleural abnormality ...	28	15	7	18	—	—	17	9	1	—	53	42	95 (5.4)
Bronchiectasis ...	—	—	1	2	—	—	8	8	—	—	9	10	19 (1.1)
Pneumonia ...	—	—	—	—	—	—	1	1	—	—	1	1	2 (0.1)
CARDIAC DISEASE													
Congenital ...	—	—	1	3	4	3	—	—	1	—	6	6	12 (0.7)
Acquired ...	—	—	1	2	1	14	—	—	—	1	2	17	19 (1.1)
Others ...	11	21	57	79	—	—	—	—	—	—	68	100	168 (9.6)
ALL OTHER ABNORMALITIES													
Scoliosis ...	3	15	3	5	—	—	—	—	—	—	6	20	26 (1.5)
Rib abnormality ...	102	81	42	62	—	—	—	—	—	—	144	143	287 (16.5)
Azygos lobe ...	10	—	2	10	—	—	—	—	—	—	12	10	22 (1.3)
Others ...	—	—	2	1	—	—	1	1	1	—	4	2	6 (0.3)
Totals ...	826	656	309	364	6	17	119	126	5	10	1,265	1,173	2,438

APPENDIX IX.—MEDICAL SUPERVISION OF REMAND HOME.

From the beginning of the session the School Medical Officers, on a weekly rota, undertook the medical supervision of children in the Home, and were available to be called out any time of the day or night on request. The children were examined within 24 hours of admission and immediately prior to dismissal, and at other times considered necessary by the Medical Officer or the Superintendent. A routine inspection was made of every child in the Home each Friday afternoon.

Details of the examinations and the numbers treated for ailments during the year ending 31st July, 1950 are as follows :—

	1950.			1949.	1948.
	Boys.	Girls.	Totals.	Totals.	Totals.
Examined	2,601	129	2,730	1,521	1,483
Treated in the Home	270	19	289	145	180
Treated at Clinic ...	3	—	3	5	7
Sent to Hospital	2	2	4	3	2

APPENDIX X.—DIPHTHERIA IMMUNISATION CAMPAIGN.

During the early spring of 1950, a Diphtheria Immunisation Campaign in the schools was undertaken on a similar basis to that organised in 1949. Again, the offer of immunisation was made to all pupils in primary classes who had never been immunised or whose last injection had been received more than four years previously.

Although not meeting with quite the same enthusiastic response as in 1949, the appeal was nevertheless successful in obtaining volunteers who, in most cases, would not have gone elsewhere for immunisation injections. Moreover, the giving of re-inforcing doses at schools relieved pressure which otherwise would have been exerted on the regular immunisation clinics as experienced by them in the years prior to 1949.

The table on the next page shows the number of injections given in the various categories (a) at schools by School Medical Officers (mostly during the period of the campaign), and (b) at the diphtheria immunisation *ad hoc* clinics (throughout the year). Totals for 1949 and 1948 are also given for purposes of comparison.

Scrutiny of the table reveals a number of points which may be explained as follows :—

- (1) The total injections given in 1950 were fewer both at schools and clinics compared with 1949 but it is notable that the figures for schools exceeded those returned in any other year, with the exception of 1949.
- (2) School Medical Officers, during the short *period of the campaign* in the schools, recorded more than twice the number of injections that were given at the immunisation clinics during *the whole year*.
- (3) Re-inforcing injections, although fewer than in 1949, were again mostly given at schools—97% of the total for 1950.
- (4) An annual short-term immunisation campaign appears to be a pre-requisite for ensuring the maintenance of a reasonably well-protected juvenile population.

		At Schools.			At Clinics.		
		Under 5 years.	Over 5 years.	Totals.	Under 5 years.	Over 5 years.	Totals
First Injections	1950	434	5,619	6,053	5,524	214	5,738
	1949	Not available		7,512	8,081	245	8,326
	1948			10,391	10,833	605	11,438
Final Injections (completed)	1950	349	4,739	5,088	5,179	633	5,812
	1949	394	4,882	5,276	7,811	695	8,506
	1948	1,006	8,272	9,278	10,110	954	11,064
Re-inforcing Doses	1950	131	18,675	18,806	108	418	526
	1949	Not available		22,645	141	789	930
	1948			3,494	758	3,465	3,633
Total Nos. of Injections	1950	914	29,033	29,947	10,811	1,265	12,076
	1949	Not available		35,433	16,033	1,729	17,762
	1948			23,163	21,111	5,024	26,135

APPENDIX XI.—SPEECH THERAPY.

Details of Cases.	Advice only.	Cases Treated		Number of Treatments		DISCHARGED.												Current Cases.	
		Boys.	Girls.	Boys.	Girls.	Satisfactory.		Improved.		Unsatisfactory.		Failed to Co-operate.		Transferred.		Boys.	Girls.		
						Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.				
Stutter	19	158	40	4,997	411	34	10	26	12	2	—	14	3	2	1	80	14		
Dyslalia																			
Multiple	47	128	58	1,205	525	48	24	14	10	—	—	9	1	5	1	52	22		
Simple	1	22	11	100	80	12	9	2	—	—	—	3	2	—	—	5	—		
Idioglossia	—	5	7	36	107	—	2	—	—	—	—	—	2	1	—	4	3		
Delayed Speech	—	10	—	92	—	1	—	1	—	—	—	1	—	1	—	6	—		
Partially Deaf	1	6	4	49	70	1	1	1	—	—	—	—	—	—	—	4	3		
Cleft Palate	2	7	5	76	87	—	—	—	—	—	—	1	—	1	1	5	4		
Dysphonia	1	6	4	59	49	3	—	1	1	—	—	—	—	1	1	1	2		
Aphasia	—	5	4	62	81	—	—	—	—	1	—	—	1	1	—	3	3		
Others	2	5	1	40	2	—	—	—	—	—	—	—	—	—	1	5	—		
Totals	73	352	134	3,716	1,412	99	46	45	23	3	—	28	9	12	5	165	51		
		486		5,128														216	

APPENDIX XII.—SMALLPOX OUTBREAK, 1950.

Full details of the outbreak of smallpox in Glasgow during the spring of 1950 as reported by the Medical Officer of Health have been published elsewhere, and it is intended here to show only how it affected the Education Health Service.

One of the cases of smallpox was a schoolboy who had been in contact with the original case (the Asian seaman) and it was decided to vaccinate all pupils, teachers and all persons who had visited the school during the time the boy was in the initial stages of the disease. Accordingly, on Monday 27th March, all children attending St. Columba's School were given consent forms for parental signature and next day staff from the Education Health Service vaccinated a total of 1,298 persons. Subsequently, during the same week, school medical officers vaccinated students in the nurses' training college, and the children and staff at a nursery school because of their association with smallpox contacts.

In the meantime, on 27th March, a vaccination centre had been opened by the Medical Officer of Health in the Health Department premises at Cochrane Street and towards the end of that week, the Senior Medical Officer (Education Health Service) and several members of his medical staff gave their assistance. When it became evident, however, that the public demand for vaccination could not be met by the provision of one centre alone, the Education Health Service opened, on Monday 3rd April, 5 district centres—one in the office premises at 155 Bath Street and the remainder in district school clinics for the convenience of people living or working in all areas of the city.

The centres were open from 9 a.m. to 9 p.m. daily and although the original intention had been to deal with children principally, the queues which formed at each centre were observed to be composed of adults as well as children. It was, therefore, found expedient to vaccinate all who presented themselves, including children with signed consents from parents; the effect was to relieve considerably the pressure on the Cochrane Street Centre. Group vaccinations also were undertaken mostly at the centres, but occasionally it was found possible to arrange for a medical officer to visit a school or establishment. International certificates of successful vaccination were issued on request at the centres, and dressings were applied when necessary.

In the following table are shown the numbers of persons vaccinated each day under the auspices of the Education Health Service during the two weeks from Monday 3rd to Saturday 15th April, 1950 :—

	155 Bath Street (Office prem.)	Florence Street Clinic.	Glenbarr Street Clinic.	Govan Road Clinic.	Sandy Road Clinic.	Other Establishments.	Total.
Mon. 3rd	3,351	4,349	4,267	2,502	2,028	394	16,891
Tues. 4th	4,887	4,986	4,189	3,664	3,219	171	21,116
Wed. 5th	4,562	3,609	2,131	2,727	2,762	423	16,214
Thur. 6th	3,231	1,544	1,118	2,352	2,050	64	10,359
Fri. 7th	1,185	596	374	986	750	46	3,937
Sat. 8th	667	382	243	636	851	—	2,779
Sun. 9th	434	382	245	738	826	—	2,625
Mon. 10th	771	830	446	1,283	1,325	1	4,656
Tues. 11th	748	372	213	690	545	4	2,572
Wed. 12th	251	142	70	165	157	—	785
Thur. 13th	88	32	21	44	58	—	243
Fri. 14th	58	24	19	29	33	—	163
Sat. 15th	25	6	11	14	11	—	67
	20,258	17,254	13,347	15,830	14,615	1,103	82,407

The centre at Bath Street was continued until 21st April but only 71 persons were vaccinated during the additional five days, although almost 100 were provided with certificates or were given dressings.

In all, during the period 27th March to 21st April, approximately 176,000 people were vaccinated in the City by the Health Department staffs, 84,000 (48%) being actually dealt with by Education Health Service personnel; during the same period the attendances at all centres were 162,000 of which 82,500 (51%) were vaccinated at Education Health Service centres. From 3rd April, when the five Education Health Service centres were opened, the attendances at *all* centres were 141,500, 82,500 (58%) of these being treated at E.H.S. centres.

Inevitably, the ordinary work of the Education Health Service was upset during the period of emergency as medical, nursing and clerical staffs were almost wholly employed on vaccination duties. The minor ailments clinics were, however, kept in operation by retaining the sisters-in-charge for the purpose of giving daily dressings and supplying medicines. Towards the middle of the second week in April it appeared as though the intensive control measures throughout the City were having success in limiting the extent of the outbreak, and arrangements were made for the resumption of normal duties by the Education Health Service staffs on 17th April. This assessment of the position was justified subsequently when the Medical Officer of Health declared the city free of smallpox on 15th April, and it was possible to transfer without delay to routine school health work.

APPENDIX XIII.—AUDIOMETRIC SURVEYS.

During the year 1948-49 an Audiometric Survey of 10-year-old pupils in Glasgow schools was undertaken by staff of the Education Department, and in 1949-50 a survey of children aged 8-9 years (pupils born between 1st September, 1940 and 31st August, 1941) was also organised. As a result, 801 children from Survey No. I and 971 from Survey No. II were referred to the Education Health Service for otological examination. Subsequently, 24 more 10-year-old pupils who had not been tested in Survey No. I were added to the lists.

Arrangements were made with the Western Regional Hospital Board for the services of specialists to be provided at school clinics for this work but the number of cases which could be dealt with was restricted by the limited number of sessions which could be given by the specialists and by the failure of patients to attend when summoned. All cases referred from Survey No. I (10-year-olds) were summoned to a specialist at least once during the year but many either failed to report or stated that they would obtain treatment privately. With regard to Survey No. II cases, as it was not considered possible to overtake within the year the examination of all pupils referred, priority in summoning was accorded to the more severe cases of hearing defect as indicated by their audiograms.

The results of these otological examinations, which are indistinguishable elsewhere in this Report because of their inclusion with similar data from other sources, are shown separately in the following pages.

SURVEY No. I.

	Boys.	Girls.	Totals.
Summonses for first examination	534	456	990
Attendances for first examination	354	293	647
Summonses for re-examination	60	52	112
Attendances for re-examination	38	38	76
Total summonses	594	508	1,102
Total attendances	392	331	723

GRADING.

Of the number who attended, 11 boys and 5 girls were not examined because they were unaccompanied by a responsible adult person. The remainder were examined and graded as follows :—

	Boys.	Girls.	Totals.
Normal	4	4	8
I—For ordinary class	101	92	193
IIa—For front seat	154	123	277
IIb—For semi-deaf class	13	16	29
III—For deaf class	1	3	4
Not graded meantime	70	50	120
	<hr/>	<hr/>	<hr/>
	343	288	631
	<hr/>	<hr/>	<hr/>

RECOMMENDATION.

The above cases were also recommended to be dealt with by one or more of the following methods :—

	Boys.	Girls.	Totals.
Clinic treatment	168	142	310
Tonsils & adenoids operation	144	132	276
Other ear, nose and throat operations	3	2	5
Hospital investigation or treatment	17	13	30
X-ray examination	32	20	52
Audiogram	29	42	71
Hearing aid	4	8	12
Specialist examination	36	31	67
Full investigation of hearing	8	2	10
Review at later date	52	46	98
Keep under observation	8	2	10
Other recommendations	11	11	22

TREATMENT.

All cases recommended for clinic treatment were summoned to the local Education Health Service clinic. Some of the other forms of treatment and investigation were as under :—

Tonsils and adenoids operations.—During the session, 170 children (83 boys and 87 girls) were summoned to clinic for preliminary examination as to suitability for operation, but 39 (18 boys and 21 girls) were not admitted to hospital for various reasons—mostly because of refusal or of failure to attend clinic. The remainder were admitted to hospital and there dealt with as follows :—

	Boys.	Girls.	Totals.
Tonsils and adenoids removed	51	65	116
Tonsil tag removed	1	—	1
Adenoids removed	9	1	10
Adenoids removed and other operation or treatment given ...	4	—	4
	<hr/> 65	<hr/> 66	<hr/> 131
	<hr/>	<hr/>	<hr/>

X-ray examinations.—The results of these were :—

	Boys.	Girls.	Totals.
Sinuses— positive	9	9	18
negative	16	10	26
Mastoids—positive	2	—	2
Chest negative, sinuses positive ...	—	1	1
	<hr/> 27	<hr/> 20	<hr/> 47
	<hr/>	<hr/>	<hr/>

Audiograms.—Of the 71 children recommended for audiograms, 42 (17 boys and 25 girls) had been referred to the Ear, Nose and Throat Hospital (Hearing Aid Clinic) by the end of the session, the remainder not being due to be referred until after 31st July, 1950. Audiograms to the number of 12 (4 boys and 8 girls) were actually done during the year.

Hearing Aids.—By 31st July, 1950, of the 4 boys and 8 girls recommended aids, 2 boys and 6 girls had been supplied with instruments, one of the girls being provided with an aid at Corporation expense because the Government type was found to be unsuitable. In addition, one girl who had been referred for full investigation was also supplied with an aid.

Full investigation of hearing.—2 boys and 1 girl were referred to the Ear, Nose and Throat Hospital during the year, one boy having 5 audiograms taken and the girl being supplied with a hearing aid as mentioned in the previous paragraph.

SURVEY NO. II

	Boys.	Girls.	Totals.
Number of summoning notices sent ...	80	82	162
Number of actual attendances ...	69	65	134

GRADING.

5 girls and 4 boys were not examined for various reasons and the remainder were graded as follows :—

	Boys.	Girls.	Totals.
Normal	—	—	—
I—For ordinary class	9	6	15
IIa—For front seat	40	35	75
IIb—For semi-deaf class	3	1	4
III—For deaf class	—	—	—
Not graded meantime	12	19	31
	—	—	—
	64	61	125
	—	—	—

RECOMMENDATION.

The above cases were recommended as shown :—

	Boys.	Girls.	Totals.
Clinic treatment	28	34	62
Tonsils and adenoids operation ...	31	22	53
Hospital treatment	5	3	8
X-ray examination	8	10	18
Audiogram	2	4	6
Hearing aid	2	1	3
Specialist examination	8	13	21
Full investigation of hearing ...	1	—	1
Review at later date	29	29	58
Other recommendations	5	2	7

TREATMENT.

Tonsils and adenoids were removed in one instance (a boy). 2 boys and 3 girls were referred for *audiogram*, one boy and one girl having audiogram, one boy and one girl having audiogram and peep-show test and one girl having peep-show test. *X-raying of sinuses* was performed on 7 boys and 9 girls and results showed positive for 5 boys and 5 girls and negative for 2 boys and 4 girls. *Hearing aids* were not supplied during the session, although 2 boys and 1 girl had been referred to the Ear, Nose and Throat Hospital.

APPENDIX XIV.—AVERAGE MEASUREMENTS OF GLASGOW SCHOOL CHILDREN SINCE 1910.

Year.	5 years.				9 years.				13 years.			
	Ht. in ins.		Wt. in lbs.		Ht. in ins.		Wt. in lbs.		Ht. in ins.		Wt. in lbs.	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
1910	40.3	39.9	39.2	38.4	45.2	44.7	48.4	47.5	—	—	—	—
1	39.7	40.0	38.8	38.2	46.5	46.7	53.5	51.9	53.7	52.4	68.7	68.4
2	40.0	40.0	38.5	38.4	48.3	47.9	56.4	53.0	—	—	—	—
3	39.7	39.2	38.1	37.4	48.2	48.2	56.8	52.0	54.8	56.2	73.2	81.8
4	40.5	40.4	37.7	37.0	47.4	48.3	54.8	54.1	55.1	56.3	76.4	79.0
1910-14	40.0	39.9	38.5	37.9	47.1	47.2	54.0	51.7	54.5	55.0	72.8	76.4
1915	—	—	—	—	—	—	—	—	—	—	—	—
6	—	—	—	—	—	—	—	—	—	—	—	—
7	41.2	38.5	38.5	38.4	47.9	47.7	55.1	52.9	55.7	56.0	75.9	76.0
8	41.8	39.4	38.4	36.4	48.0	47.5	54.6	52.5	55.7	55.8	73.7	77.6
9	40.3	40.2	38.5	37.6	48.2	47.4	54.2	50.9	56.3	56.3	78.8	78.2
1915-19	41.1	39.4	38.5	37.5	48.0	47.5	54.6	52.1	55.9	56.0	76.1	77.3
1920	40.9	40.7	39.2	38.6	48.2	47.5	53.7	51.6	55.4	56.0	76.0	79.9
1	40.2	39.8	39.5	38.1	49.1	48.3	54.4	53.5	54.7	56.5	74.8	78.5
2	40.5	40.1	38.6	37.7	48.1	47.8	53.1	52.5	55.8	55.9	75.8	77.9
3	40.2	39.6	39.0	38.1	48.2	47.9	54.3	52.9	55.0	54.7	73.7	76.6
4	40.7	40.3	39.1	37.4	49.0	47.9	56.1	53.3	54.5	56.3	74.9	78.2
1920-24	40.5	40.1	39.1	38.0	48.5	47.9	54.3	52.8	55.1	55.9	75.0	78.2
1925	41.3	39.9	38.9	37.4	48.9	48.2	57.8	55.4	55.8	56.3	78.7	80.3
6	40.8	40.3	39.2	37.7	48.8	49.3	56.5	54.8	55.7	56.0	77.4	79.7
7	40.9	40.7	39.3	38.1	49.5	48.8	56.4	54.3	56.1	56.5	78.8	82.1
8	40.6	40.3	39.3	37.8	48.8	48.8	56.6	54.4	56.2	56.2	78.7	80.4
9	40.6	40.4	39.0	37.7	48.8	48.3	56.4	54.0	56.0	56.6	77.6	82.2
1925-29	40.8	40.3	39.1	37.7	49.0	48.7	56.7	54.6	56.0	56.3	78.2	80.9
1930	41.0	40.8	39.4	38.0	49.0	49.0	57.2	55.0	56.4	57.2	80.0	83.1
1	40.9	40.7	39.5	38.1	49.3	49.1	57.2	55.1	56.2	57.1	79.7	83.2
2	41.1	40.7	39.4	37.8	49.3	49.1	57.0	55.0	56.3	57.3	79.8	83.7
3	41.1	40.8	39.5	38.0	49.3	49.1	57.1	55.1	56.2	57.2	79.4	83.0
4	41.2	40.9	39.6	38.2	49.5	49.2	57.6	55.5	56.9	57.8	81.5	85.8
1930-34	41.1	40.8	39.5	38.0	49.3	49.1	57.2	55.1	56.4	57.3	80.1	83.8
1935	41.4	41.1	39.7	38.1	49.6	49.4	57.6	55.7	56.9	57.7	81.7	85.8
6	41.4	41.1	39.9	38.4	49.7	49.4	58.0	55.9	57.2	58.1	82.9	87.6
7	41.4	41.1	40.0	38.5	49.8	49.5	58.2	56.3	57.2	58.1	83.1	88.2
8	41.65	41.34	40.52	39.01	50.23	49.98	59.45	57.59	57.33	58.47	83.45	88.93
9	41.47	41.25	40.26	38.93	50.18	49.87	59.58	57.90	57.45	58.41	84.43	89.49
1935-39	41.46	41.18	40.08	38.59	49.90	49.63	58.57	56.68	57.22	58.16	83.12	88.00
1940	—	—	—	—	—	—	—	—	—	—	—	—
1	42.02	41.65	41.26	39.66	50.32	50.25	59.18	57.80	58.08	58.75	86.46	90.06
2	41.97	41.58	41.06	39.52	50.65	50.23	60.21	58.02	58.20	58.80	86.11	90.55
3	41.95	41.54	41.43	39.69	50.48	50.11	60.13	58.27	58.07	58.96	86.39	91.37
4	41.87	41.49	41.28	39.67	50.50	50.07	60.42	58.27	58.18	58.90	87.23	91.19
1940-44	41.95	41.57	41.26	39.64	50.49	50.17	59.99	58.09	58.13	58.85	86.55	90.79
1945	42.01	41.64	41.52	40.07	50.66	50.20	60.88	58.64	58.26	59.00	87.15	92.37
6	42.08	41.70	41.68	40.20	50.67	50.24	60.78	58.76	58.18	58.86	87.01	91.47
7	42.06	41.70	41.49	39.81	50.90	50.40	61.11	58.86	58.20	58.96	86.67	91.41
8	42.18	41.74	41.61	39.83	50.89	50.38	61.32	58.95	58.28	58.98	87.18	91.58
9	42.36	41.98	42.05	40.41	51.11	50.54	61.73	59.49	58.57	59.01	88.13	92.16
1945-49	42.14	41.75	41.67	40.06	50.85	50.35	61.16	58.94	58.30	58.98	87.23	91.80
1950	42.47	42.00	42.31	40.46	51.08	50.54	61.84	59.64	58.60	59.22	88.43	93.16

Numbers, Average Ages and Measurements of Children of 5, 9 and 13 years of age within the Groups examined during Systematic Inspection.
 (The highest "adjusted" average in each column is in black type and the second in *italics*.)

AGE. Type of School	5 YEARS.						9 YEARS.						13 YEARS.						
	Non-transf'd		Transferred		All		Non-transf'd		Transferred		All		Non-transf'd		Transferred		All		
	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	
No. of Boys & Age (months)* Actual Average Measurements 1950	5,986	42-62	42-18	41-67	42-49	42-34	4,242	62-85	61-28	6,222	62-35	4,695	89-79	57-91	86-82	6,404	89-00	58-74	88-43
	42-60	42-60	42-13	41-59	42-47	42-31	51-26	62-33	60-79	51-08	61-84	58-89	89-19	57-80	86-33	58-60	88-43	58-60	88-43
	<i>42-47</i>	<i>42-25</i>	<i>42-10</i>	<i>41-57</i>	<i>42-36</i>	<i>42-05</i>	<i>51-26</i>	<i>62-23</i>	<i>60-57</i>	<i>51-11</i>	<i>61-73</i>	<i>58-85</i>	<i>88-86</i>	<i>57-88</i>	<i>86-28</i>	<i>58-57</i>	<i>88-13</i>	<i>58-57</i>	<i>88-13</i>
	42-29	41-85	41-91	41-05	42-18	41-61	51-05	61-62	60-57	50-89	61-32	58-54	87-97	57-65	85-19	58-28	87-18	58-28	87-18
	42-19	41-69	41-77	41-02	42-06	41-49	<i>51-13</i>	61-67	59-84	50-90	61-11	58-49	87-60	57-37	83-97	58-20	86-67	58-20	86-67
	42-23	41-90	41-73	41-15	42-08	41-68	50-88	61-22	49-90	50-67	60-78	58-44	87-70	57-47	85-12	58-18	87-01	58-18	87-01
	42-15	41-75	41-68	40-98	42-01	41-52	50-87	61-30	59-94	50-66	60-88	58-52	87-91	57-46	84-45	58-26	87-15	58-26	87-15
	42-02	41-48	41-50	40-83	41-87	41-28	50-66	60-77	50-17	59-65	60-42	58-44	88-17	57-46	84-69	58-18	87-23	58-18	87-23
	42-13	41-67	41-58	40-90	41-95	41-43	50-70	60-67	49-96	58-86	60-13	58-30	86-99	57-43	84-74	58-07	86-39	58-07	86-39
	42-04	41-30	41-57	40-52	41-97	41-06	50-85	60-76	50-20	58-98	60-21	58-45	86-73	57-44	84-25	58-20	86-11	58-20	86-11
42-18	41-47	41-58	40-65	42-02	41-26	50-95	59-65	49-92	58-89	59-18	58-39	87-24	57-31	84-47	58-08	86-46	58-08	86-46	
Adjusted Average Measurements (uniform ages of 5 yrs. 4 mths., 9 yrs. 5 mths., and 13 yrs. 5 mths. respectively)	5,693	42-15	41-82	39-85	42-05	40-55	4,044	60-85	58-92	5,900	60-24	4,467	94-92	58-66	91-77	6,423	93-96	59-35	93-96
	40-78	40-78	41-74	39-72	42-00	40-46	50-73	60-22	58-38	50-54	59-64	59-52	94-10	58-53	91-02	59-22	93-16	59-22	93-16
	<i>42-12</i>	<i>40-73</i>	<i>41-65</i>	<i>39-61</i>	<i>41-98</i>	<i>40-41</i>	<i>50-76</i>	<i>60-05</i>	<i>58-78</i>	<i>50-54</i>	<i>59-49</i>	<i>59-32</i>	<i>92-94</i>	<i>58-23</i>	<i>90-24</i>	<i>59-01</i>	<i>92-16</i>	<i>59-01</i>	<i>92-16</i>
	41-91	40-13	41-38	39-17	41-74	39-83	50-59	59-51	57-73	50-38	58-95	59-24	92-28	58-33	89-87	58-98	91-58	58-98	91-58
	41-82	40-10	41-42	39-17	41-70	39-81	50-63	59-34	57-75	50-40	58-86	59-29	92-50	58-16	88-74	58-96	91-41	58-96	91-41
	41-82	40-41	41-44	39-75	41-70	40-20	50-52	59-36	57-45	50-24	58-76	59-05	92-07	58-32	89-82	58-86	91-47	58-86	91-47
	41-81	40-33	41-29	39-51	41-64	40-07	50-45	59-13	57-66	50-20	58-64	59-26	93-08	58-23	90-26	59-00	92-37	59-00	92-37
	41-66	39-97	41-10	38-97	41-49	39-67	50-30	58-71	57-36	50-07	58-27	59-12	91-93	58-27	89-11	58-90	91-19	58-90	91-19
	41-70	39-93	41-16	39-17	41-54	39-69	50-40	58-96	56-95	50-11	58-27	59-20	92-02	58-23	89-52	58-96	91-37	58-96	91-37
	41-76	39-74	41-17	39-06	41-58	39-52	50-52	58-63	56-65	50-23	58-02	59-09	91-48	58-07	88-22	58-80	90-55	58-80	90-55
41-83	38-89	41-19	39-07	41-65	39-66	50-43	58-02	57-26	50-25	57-80	58-99	90-58	58-11	88-62	58-75	90-06	58-75	90-06	

* Beyond years of age given at head of sections.