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County of Perth Education Authority.



ANNUAL REPORT

OF THE

PRINCIPAL MEDICAL OFFICER

ON

School Health Administration

FOR THE

Year ending 31st July, 1920.



PERTH:

PRINTED BY D. LESLIE (K. ANNANDALE), 20 ST. JOHN STREET.

1920.

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School Health Administration Committee.



Dr. STIRLING, *Convener.*
DUCHESS OF ATHOLL.
LORD ROLLO.

Mr. J. G. BRYDEN.
Mr. J. Dow.
Rev. C. STEWART.

1. LIST OF STAFF.

Principal Medical Officer.

DAVID JAMES M'LEISH, M.A., B.Sc., M.D., D.P.H.

Assistant Medical Officers.

MARY B. W. MACDONALD, L.R.C.P. & S., Edin.

GEORGE STEWART, M.B., Ch.B., B.Sc. (Public Health).

Oculist (*Part Time*).

ALEXANDER TROTTER, M.B., C.M.

Dental Surgeon.

HUGH ANDERSON CROSS, L.D.S., R.F.P. & S. (Glasgow).

Nurses.

NETTA H. STEWART.

JEAN A. M'LEOD.

CATHERINE MILLER, R.R.C.

Clerical Staff.

DAVID S. LOWSON, M.A., *Statistical Clerk.*

JESSIE STEWART, - - - *Typist.*

ISABELLA S. GALLIE, - - - *Clerk.*

Of the above, the Principal Medical Officer commenced duty on 1st October, 1919.

Dr. Macdonald, who was interim Medical Officer of the Perth School Board, commenced duty as Assistant to the new Authority on 1st September, 1919.

Dr. Stewart commenced duty on 8th October, 1919.

Mr. Cross commenced duty on 13th April, 1920.

Nurse Stewart, who was on the temporary staff of the Perth School Board, was appointed to the permanent staff of the Authority on 1st September, 1919.

Nurse M'Leod, who was on the permanent staff of the Perth School Board, returned to duty on the 27th November, 1919, and left the service of the Authority on 12th May, 1920.

Nurse Miller commenced duty on 9th March, 1920.

Miss J. Stewart, Typist, commenced duty on 1st December, 1919.

2. (a) Number of Schools,	173
(b) Number of Children on Register, ...	18,288
Do. in Average Attendance, 16,091	
3. Number of Visits to Schools for Systematic Examinations, in accordance with Scheme of Inspection,	455
4. Number of Special Visits by Medical Officers, <i>i.e.</i> , visits for purposes other than those of system- atic inspection,	146

5. SANITARY CONDITIONS OF SCHOOLS.

A great deal of work is required before the Sanitary Conditions of Schools generally can be considered satisfactory. There has been a considerable lack of appreciation of the necessity for this very important matter in the past, which has been greatly accentuated by the difficulties during the War period. This particularly applies to the country schools, as the town schools with some exceptions are in good sanitary condition.

A. Lighting.—About 50 per cent. of the schools can be considered well lighted, while about 20 per cent. are definitely badly lighted.

In the City attention is specially drawn to the defective lighting of the Infant Class Rooms in Caledonian Road School, to which attention has been drawn in the 4th, 8th and 12th Annual Reports of the Perth School Board. More regular cleaning of windows and replacing of ground glass windows by ordinary glass would do much to improve the lighting.

B. Ventilation.—The means of ventilation are sufficient to about 70 per cent. of the schools, but a good deal can still be done by teachers to make the means of ventilation provided more effective. It must be admitted, however, that the defective heating of many schools makes efficient ventilation very difficult in cold weather.

C. Heating.—In ordinary weather the heating is good in about 50 per cent. of the schools, and only in a few cases is it very bad. Many of the schools however are not sufficiently heated to allow of proper ventilation in cold weather. 85 per cent. are heated by open fires or stoves; 14 per cent. by pipes; one or two have both; in a few schools gas radiators are employed. Those last are a very bad form of school heating, as in many cases there is no provision for escape of fumes. In some schools where radiators have been introduced, they are not used on account of the fumes—in one at least the pressure of gas is insufficient.

D. Cleansing and Disinfection.—This is not satisfactory in many of the schools. This question has been taken up this year by the Health Committee, and regulations have been drawn up. These have been submitted to School Management Committees, and their reports show that to get the required amount of cleaning done will entail an increased expenditure of about 25 per cent. on the cleansing of the schools. These reports have been referred to the Finance Committee, as until this question of sufficient payment of cleaners is settled, little can be done to improve the cleanliness of the schools.

At present in only about 16 per cent. of the schools are floors scrubbed once a month, and in about 22 per cent. the floors are scrubbed less than four times a year.

Wet sweeping is the exception in the country schools.

Windows are not generally well cleaned, and this reduces the amount of lighting considerably.

Playsheds are often improperly floored, and are not sufficiently or regularly cleansed.

Walls and wall hangings are not sufficiently often dusted down and cleansed.

Disinfectants are insufficiently used, or not used at all, in about 80 per cent. of the schools.

The difficulties in Country Schools are often considerable, and it is not expected that the same standard will be attained in all schools, but generally speaking schools should be as well kept as private houses, and I hope that improvements will be made in the near future. The educational value of clean schools is very important, and until conditions improve in this respect no advance can be made in practical instruction in hygiene or physical education.

The regulations as finally amended are as follows. As some of the requirements have been somewhat modified, the expense in carrying them into effect may not be so great as anticipated.

1. All floors should be scrubbed at least once every six weeks.
2. Daily wet sweeping should be carried out. No dry sweeping is allowed. Before sweeping, treat the floor with moist sawdust or similar material, or lightly spray it.
3. All furniture, desks, seats, tables, chairs, cloakroom pegs, &c., should be dusted daily with a moistened duster.
4. Windows should be kept fully open as often as possible.
5. Windows should be kept clean and bright, and should be cleaned at least 3 times a year.

6. Pail closets should be emptied daily in summer, and at least every second day in winter. Earth, ashes or sawdust should be provided. Paper should be supplied in the offices, and kept tidy by means of a small box, nail, or hook.
7. The school offices, water closets, pail privies and urinals should be swept out, or hosed out, daily, and all wood-work should be scrubbed once a week, and whenever it is fouled.
8. The play-sheds should be swept out daily, and the wood-work scrubbed at least once a month.
9. Ash-pits should never receive closet refuse.
10. The wash-hand basins should be thoroughly cleansed at least once a week, and a sufficient number of clean towels provided at least twice a week. Soap should always be available.
11. At the Summer, Easter and Xmas holidays a thorough "Spring cleaning" of the school should be carried out, everything that will scrub should be scrubbed—rooms, lobbies, cupboards (after emptying) and all articles in common use by the children, and everything that cannot be washed should be dusted thoroughly, if possible in the open air. Everything should be removed from the walls, and the wall should be brushed free of dust. Windows should be widely opened during the cleaning.
12. The Head-teacher is responsible for the carrying out of these regulations by the cleaners, and should satisfy himself or herself by a regular morning inspection of the whole school and offices. Entries should be made weekly in the cleansing register, and whenever there is any failure to carry out the regulations. Any gross neglect should be at once reported to the Local Management Committee.

Suggestions are also being made to the Management Committees with regard to regular disinfection of the schools, the condition and nature of the covering of the playgrounds, the provision of apparatus for cleansing foot-gear of children entering school, and with regard to the provision of a proper supply of earth, ashes, sawdust, &c.

E. Water Supply.—Improvements in water supply are necessary in many schools. In several schools the water supply is bad, and in about 15 per cent. of schools the supply is insufficient.

F. Water Carriage Systems are installed in about 45 per cent. of the schools. Many however are the old trough pattern, which should be gradually replaced by individual closets. In about 45 per cent. pail closets are in use, but very few are properly provided with earth, sawdust, etc., and many are ill kept and generally in bad order.

12 schools have cesspit closets, which should be abolished at once.

In three small schools there is no provision of sanitary conveniences.

G. Playgrounds.—These are unsatisfactory, in many cases being muddy in winter and dusty in summer. Covering playgrounds with ashes, as is done in a number of schools, is not conducive to a healthy or cleanly school, and should be discontinued. When this covering is employed for the playground, the school is sure to be dirty. Playing fields should be aimed at for all country schools.

H. Personal Cleanliness.—The following letter was sent to Head Teachers during the year:—

EDUCATION AUTHORITY OF THE COUNTY OF PERTH.

PERSONAL CLEANLINESS.

To the
Head Teacher.....

DEAR SIR OR MADAM,

In the recent Memorandum of the School Health Administration issued by the Scottish Board of Health in March, 1920, the following Statement is made regarding Personal Cleanliness:—"Many classes in Schools have hitherto shown commendable conditions of personal cleanliness in the children, and Medical Inspection has done much to remove from the Schools generally gross degrees of verminousness and personal uncleanness. But in the majority of cases it is to be feared that the cleanliness of the hair and the exposed skin of the pupils is not yet regarded as having any relation to School training. Every School is required to have a reasonable supply of wash-hand basins. A few Schools have spray baths. Whatever facilities exist, the utmost use should be made of them, and every effort should be made to train pupils in habits of personal cleanliness."

Every endeavour should be made by the Head Teachers and Class Teachers to improve the personal cleanliness of the children in the School. None of our Schools have spray baths, but wherever there is an insufficient supply of wash basins, water or clean towels, this should be reported to the School Management Committee, so that proper facilities may be provided. Soap should always be easily available, and where there is difficulty in keeping it beside the basins, it should be kept in a dish inside the Class Room where it is more or less under supervision. It should not be locked away. All children who come to School with their hair and exposed skin in an uncleanly condition, should be sent to the lavatories to wash.

It is anticipated that shortly all Schools will be visited by

Nurses to regularly inspect the children for verminous conditions, which are usually found to arise from one or two neglected families infecting other children in the School. All difficulties of this latter kind not remedied by the Nurse's visit should be reported to the Authority's Medical Officer. The incidence of contagious disease would be lessened by directing attention to personal cleanliness, and probably it would soon be found that very few children would require to be sent to the lavatories to wash, when the children realise that the teacher placed great importance on cleanliness. Any children suffering from a contagious disease should not be allowed to use the School towels.

Every opportunity should be taken by Teachers to advise the children on the value of healthy habits, such as regular washing, cleansing of teeth, especially after the last meal of the day, the importance of regular sleep, and of fresh air in their bedrooms, etc.

EDUCATION AUTHORITY OFFICE,
22nd April, 1920.

D. J. McLEISH,
Principal Medical Officer.

In this connection there is at present an insufficient provision of wash hand basins and of clean towels and soap in many of the schools.

I. Cloakroom Accommodation. — Drying of Clothes. Cloakroom Accommodation is insufficient in about one-third of the country schools, and very few are provided with means of drying wet clothing. This latter subject has been approached by the Health Committee during the year, but has been greatly hampered by the defective accommodation and apparatus.

A very considerable amount of work has already been carried out by the Property and Works Committee in improving the conditions of the schools, but the present high costs of labour and materials has made it impossible to deal with other than the most pressing or special cases.

6. ORGANIZATION AND ADMINISTRATION.

A. System of Medical Inspection—Preparation for Inspection.—Some weeks prior to the inspection, information is asked for from the schools as to the numbers of children due for inspection. About a week or ten days' notice is given of the actual date of the inspection. The Head Teachers then distribute the Medical History sheets, on which the date and time of the inspection is stated. They also make out a card for each child who has not previously been inspected. In some of the country schools they also weigh and measure the children, which saves a considerable amount of the inspector's time in out-of-the-way districts, where a great deal of time is taken up in travelling.

District Nurses.—If there is a district nurse in the area she is also notified, so that she may be present at the inspection, if her other duties allow of this.

The inspector is accompanied by a clerk, who enters the particulars on the schedule, and writes out all necessary notices for parents. He also prepares a list of all defective children, on the form shown below.

Form 9 M.I.

Name and Postal Address.	Age.	Sex.	School.	Defect.	Advice Given.	Nurse's following-up Notes. Whether receiving attention?	Medical Officer's Re-examination.

When the inspection is completed, the schedules and the defect list are returned to the office, where the results of the inspection are tabulated. Copies are made of the defect lists in the office, so that a record of all defective children is always available. A copy is also sent to the district nurse for "following up" the children. Where there is no district nurse, a copy is sent to the head teacher, who is asked to state which children have received attention. A second medical visit is also made to as many schools as possible, for examination of children found defective. The schedules are returned to the school after the results have been tabulated, and are kept in a box in the school. As it was found that this arrangement was unsatisfactory in the larger schools, separate cardboard boxes were supplied for each class in these schools, and when a child goes to a higher class, the schedule is transferred also.

When children remove from one school to another, the head masters send for the medical schedule from the previous school. If the child comes from the area of another Authority, the head teacher sends to the office, and the schedule is written for and forwarded to the school on receipt. These latter schedules are, however, often unsatisfactory on account of the different symbols in use for recording defects. A general system for the whole country would obviate this defect. The method adopted for recording in the County is as follows.

The new schedules have been printed as exact replicas of the scheme suggested by the department for uniformity in Circular 460 of 24th August, 1914, and the numbers used under the various headings are used for recording the defects, for example :—

T. Nervous System.

1. Epilepsy.
2. Chorea.
3. Infantile Paralysis.
4. Other Diseases.

If the child suffers from Chorea, this is noted under nervous system as 2 ; if from infantile paralysis as 3.

If some such general system were adopted, this would eliminate the defect in schedules received from other Authorities.

CHILDREN SELECTED FOR EXAMINATION.—The children selected for examination during the year were—"Entrants," children entering school for the first time. "Intermediates," children eight years of age at the date of inspection. "Leavers," children who had reached the age of 12 years at the date of inspection. In Perth City children who had attained the age of 13 years were inspected as leavers.

The age periods laid down by the Board of Health are—

1. Entrants.
2. Children in their 10th year (9 year old children).
3. Children in their 13th year (12 year old children).
4. Children in their 17th year (16 year old children).

The groups selected for examination in the year ending July 31st, 1921, are selected with a view to adopting these age groups in the following session. To have adopted them immediately without allowing a transition period would have meant that some children would be examined two years in succession, while many remained uninspected as a result of the loss of 4 years inspecting work in the County. In Perth City some children would have been inspected three years in succession, as the intermediate age was altered from 7 years to 8 years during the present session.

B. School Nurses.—1. **NUMBER ON STAFF**—Two full time Nurses in Perth City. From 27th November, 1919, to May 12th, 1920, a third full-time nurse was employed. She accompanied the Medical Inspector in the County, and when she resigned the vacancy was not filled. A clerk is taking over this work from September 1st, 1920.

2. **DUTIES IN SCHOOLS.**—The Nurses visit the schools in the City and inspect children for verminous conditions, defective clothing and foot gear, and for contagious diseases of all kinds.

3. **DUTIES IN VISITING.**—Nurses visit the homes of verminous children, of children who are neglected in any way, and of all children noted as defective who are not known to be under treatment either at the clinic or privately. They also visit the houses of all children who cease to attend the clinic, or who are notified by the attendance officer as absent from school where a medical reason is alleged as the cause of the absence, unless the child is known to be obtaining sufficient medical attendance. During the epidemic of measles as many as possible of the cases were visited to advise the parents about the nursing of the patient.

During the year arrangements were made with many of the District Nursing Associations, whereby the services of district Nurses were obtained for following up cases of children found defective.

In certain districts their services were also obtained for treating or advising in the treatment of minor ailments, such as contagious diseases and verminous conditions.

In Crieff this treatment of minor ailments was considerably helped by the setting apart towards the end of the session of a small room in the Public School where the Nurses treated minor ailments. Some equipment was provided in the school, such as drugs, dressings, enamel ware and a few instruments. A considerable amount of useful work was accomplished in this district. Several medical visits were paid to see cases, and the schools were regularly inspected for verminous conditions, deficient clothing, and contagious diseases.

A scheme is now nearing completion in the County (excluding Perth City), which embraces general school nursing, maternity and child welfare nursing, and tuberculosis nursing. It includes the provision of a general Superintendent, a relief Nurse, 5 full time Nurses, and the use of the district Nurses of the various associations which now, under the stimulating influence of the Nursing Federation which came into being during the year, are at least 31 in number, with 36 Nurses in their employ. This number is still increasing, and it is expected that the County will soon be well provided with district Nurses.

C. Arrangements for Following up.—In the City this is complete. The nurses see all cases that have been recommended treatment. Visits to the schools by the Medical Officer is frequent, and the Clinic is open daily.

In the country districts the following up is not so complete. The defect lists previously mentioned are sent to the district nurse, if one is available, so that she may follow up the children to their homes and advise the parents to have treatment. She reports later the results of her visits. If there is no district nurse the lists are sent to the headmaster to report how many children have been treated. As many schools as possible are re-visited for re-examination of defectives, attention being concentrated particularly on the larger schools. If children are not re-examined during the year of their inspection, they are re-examined at the next routine visit to the school.

D. Supervision of Infectious Diseases including School Closure.—Notice of infectious disease is sent by the head teacher to the Health Department, on a form provided. Advice is given whenever necessary to the head teachers, and if the circumstances warrant it the school is visited by the Principal Medical Officer. Whenever it is possible that School Closure or Class Closure might

help to prevent the spread of infectious disease—information of the outbreak is sent to the County Medical Officer of Health, or to the Medical Officers of the 12 burghs. It is unfortunate, however, that the School Medical Officer has no power to close schools or classes, as in this way a more uniform policy could be adopted, and duplication of officers entering the schools would be avoided.

E. Co-ordination with Public Health Service.—Notices of notifiable infectious disease are received by the head teachers from the various Sanitary Authorities, and, as stated above, notices of non-notifiable disease are sent by the Education Authority's Medical Officer to the various Medical Officers of Health.

A combined scheme for provision of Nursing Services is nearing completion at present, as detailed earlier in the Report.

F. Presence of Parents at Inspection.—Notice of the examination is sent to all parents whose children are due for systematic inspection.

The parents of 12·9 per cent. of the infants examined were present.

„	7·39	„	intermediates	„	„
„	2·13	„	leavers	„	„

7. PHYSICAL CONDITION OF THE SCHOOL CHILDREN.

A. Total number of Children examined:—

(a) At systematic examinations.

	Ages.	Number Examined.	TOTALS.
Entrants, - -	4	136	2236
	5	1014	
	6	804	
	7	282	
Intermediates, -	8	1649	1735
	9-11	86	
Leavers, - - -	12	1170	1546
	13	354	
	14	22	
Total of Systematic Examinations, ...			5517

(b) Special Cases, 999

(c) Re-examinations, 1532

GRAND TOTAL of (a), (b) and (c), ... 8048

There were also seen :—

By Oculist,	156 children with 286 attendances.		
By Dentist,	2109	„ and 118	„ for treatment.
At Clinic,	941	„ with 8096	„
Total Children,	<u>3206</u>	<u>8500</u>	„

By Nurses there were 7260 inspections for Cleanliness in City.

B. Number of Children notified to Parents as suffering from Defects.—1937 were notified to their parents as suffering from defects of various kinds. 163 of these notices were for defective teeth.

C. Number of Children receiving attention (defective teeth excluded).—63 per cent. were found to be receiving attention for defects notified. 26 per cent. were found not to be receiving attention for defects notified to parents.

In 11 per cent. of the cases the result of the notice was unknown, either because the children were absent on the re-examination day or had left, or because no re-examination was made during the year. It should be noted, however, that though 63 per cent. were receiving attention, this does not mean that the attention was always satisfactory, especially as the difficulty of obtaining adequate treatment in country districts is very considerable.

D. Clothing :—

Cases discovered during Systematic Inspection.							Cases otherwise Inspected. Special Cases.
Number Examined.	Insufficient.		In need of Repair.		Dirty.		Number found Defective.
	Number.	Percentage	Number.	Percentage	Number.	Percentage	
5431	19	·34	91	1·67	56	1·03	76

No comparison can be made with previous years, as there are no similar figures for comparison.

On the whole, the clothing of the children is satisfactory, though most schools have one or two neglected families, except in the smaller country schools.

Occasionally children are over-burdened with clothes.

E. Footgear:—

Cases discovered during Systematic Examination. (Systematic Cases).		Cases otherwise Inspected. (Special Cases).
Number Examined.	Unsatisfactory.	
	Number.	Percentage.
5431	70	1.28
		Number found Defective.
		56

From the Attendance Officer's Report in Perth City it is seen that for the year ending July 31st, 1920, 97 pairs of Boots were supplied to pupils whose parents were in necessitous circumstances, at a total cost of £79 16s. 8d. The average cost per pair was 16/5½. During the year ending July 31st, 1919, 173 pairs were supplied at a total cost of £118 19s. 6½d., and at an average cost of 13/9 per pair.

Of the £118 19s. 6½d. spent in the year ending July 31st, 1919, £98 5s. 7d. was recovered from parents.

Of the sum of £79 16s. 8d. spent in the year ending July 31st, 1920, £35 18s. 8d. has been already recovered, and payments are still being made.

The system adopted is as follows:—Notices are sent to the parents of all children found with defective boots, asking them to provide proper footgear without delay. If the circumstances do not admit of this being done at once, the parents are told to apply to the headmaster. A form is then filled up in which the parent promises to pay for boots by weekly instalments, and the boots are provided at once by the Authority. When parents fall in arrears with payments, the circumstances are considered by the School Management Committee.

If the parents are considered necessitous, part of the cost may be remitted. If, however, the parents are able to pay, they are warned by the Committee that if the payments are not regularly made in future, proceedings will be taken to enforce payment. On the whole, the scheme works very well, with a small cost to the Authority.

During the present session all the School Management Committees in the County have been notified of this procedure, and all necessary forms and payment cards have been supplied for all the schools in the area. Prices have been obtained from Contractors and submitted to the various Committees as a guide in dealing with cases in their district. In some districts, however, arrangements do not yet appear to have been made for dealing systematically with these cases.

The attention of School Management Committees was specially directed during the year to the question of drying clothes and foot-gear, but though a certain amount of improvement was obtained in this respect, the question of apparatus and accommodation prevented the full accomplishment of this beneficial object.

F. Average Heights and Weights.—Children have been weighed and measured as usual, and the information obtained has therefore been of use to the inspectors in estimating the physical condition of the children.

In the regulations issued by the Scottish Board of Health, it is stated that systematic comparisons of individual and collective measurements should be made as far as practicable, but that this part of the work should be kept in a secondary position while so much remains to be done in the elementary essentials of school and personal hygiene.

As so much work was required in the first year of the Authority in organizing the health work, and as no work had been done in the country districts for four years, it was considered advisable to omit these comparisons during the session under review.

G. Cleanliness of Head and Body :—

Cases Discovered during Systematic Examination. (Systematic Cases.)					Cases otherwise Inspected. (Special Cases).
Number Examined.	Dirty (including Nits in Head Cases).		Verminous.		Number found Defective.
	Number.	Percentage	Number.	Percentage	
Head, 5431	689	12.6	15	·27	71 dirty. 19 verminous.
Body, 5431	196	3.6	12	·22	7 dirty. 40 verminous.

In Perth the school nurses make regular inspections for cleanliness. The results of these inspections are seen in the subjoined table.

Body.

Systematic Cases.									Special Cases.
Number Examined.	Ringworm.		Impetigo.		Scabies.		Other Diseases.		Ringworm, 18 Impetigo, 61 Scabies, } 63 Other Dis. }
	No.	Per-centage	No.	Per-centage	No.	Per-centage	No.	Per-centage	
5431	13	.23	20	.36	13	.23	77	1.41	

Ringworm has been the most troublesome disease of the skin during the session.

167 cases were treated in Perth City, as detailed later. Scabies also proved a difficulty. The absence of baths at home makes the cure difficult, and cases persist sometimes for months, especially where other members of the family, not of school age, are not being thoroughly treated. These cases could also be dealt with more efficiently at a Cleansing Station.

I. Nutrition :—

Cases discovered during Systematic Inspection. (Systematic Cases).									Cases other- wise Inspected (Special Cases)
Number Ex- amined.	Above Average.		Average.		Below Average.		Very Bad		Number found Defective.
	No.	Per-centage.	No.	Per-centage.	No.	Per-centage.	No.	Per-centage.	
5431	1161	21.37	3256	60.05	1002	18.4	12	.22	8

Bad nutrition, from which nearly 19 per cent. of the children suffer, is a matter calling for attention in all parts of the country. Apart from definite disease, there are many factors entering into the production of the condition. Actual want of food is relatively unimportant, at least in this County, but improper and improperly cooked food is very important. The absence of a proper mid-day meal is also important. Many children still do not get a proper mid-day meal. Pieces of various kinds are taken to school, and eaten at the interval. Many schools, however, as will be seen under the heading of "School Meals," do a great deal to improve these conditions in the winter months, though little is done in summer time. Insufficient sleep, work out of school hours and bad housing all contribute in producing bad nutrition. A child who is not properly nourished, cannot be properly educated. It is hoped that many more schools will deal with the question of the mid-day meal for school children.

J. Teeth.

Cases discovered during Systematic Examination. (Systematic Cases).									Cases otherwise Inspected. (Special Cases).
Number Examined.	Sound.		One to Four Decayed.		Five or More Decayed.		Oral Sepsis.		Number found Defective.
	No.	Per-centage	No.	Per-centage	No.	Per-centage	No.	Per-centage	
5431	1106	20.3	2875	52.9	1450	26.7	66	1.21	Dental Caries 14 Oral Sepsis 5

80 per cent. of the children have decayed teeth. The condition has become so common that it is universally neglected, and yet preservation of the teeth is important in preserving health. The lowering of vitality, anæmia, digestive disorders, and liability to infection of enlarged glands by tuberculosis—all resulting from septic conditions of the mouth are well known, and yet the only thing that appears to appeal to the average citizen is the presence or absence of toothache. One could almost wish that toothache were an invariable accompaniment of a septic mouth. In the country the difficulty of obtaining conservative dentistry however is very great at present, and even those who are anxious to attend to their children's teeth cannot always do so.

The appointment of a dental surgeon during the year will however do something to deal with this difficulty, and probably when the value of sound teeth is better appreciated, more will take advantage of the dental treatment which is now much more accessible. At present 43 per cent. of those offered treatment accept it.

K. (a).—Nose :—

Cases discovered during Systematic Examination. (Systematic Cases).							Cases otherwise Inspected. (Special Cases).
Number Examined.	Catarrh.		Obstruction.		Other Diseases.		Number found Defective.
	No.	Percentage	No.	Percentage	No.	Percentage	
5431	43	.79	2	.04	8	.14	9

K. (b).—Throat :—

Cases discovered during Systematic Examination. (Systematic Cases).									Cases otherwise Inspected. (Special Cases).
Number Examined.	1. Slightly Enlarged Tonsils.		2. Markedly Enlarged Tonsils.		3. Adenoids probably present.		4. Other Diseases.		Number found Defective.
	No.	Per- centage	No.	Per- centage	No.	Per- centage	No.	Per- centage	
5431	2753	50.6	469	8.63	92	1.69	31	.57	87 { 1—37 2—28 3—15 4—7

Tonsils large enough to cause obstruction to breathing, or accompanied by deafness, or repeated attacks of sore throat or bronchitis should receive attention. Slighter degrees of enlargement are very common, and usually subside naturally without causing any ill effects. Cases accompanied by deafness are usually complicated by the presence of adenoids, which should be treated with the tonsils. 24.7 per cent. of cases recommended for treatment received attention during the year.

K. (c).—Lymphatic Glands :—

Cases discovered during Systematic Examination. (Systematic Cases).									Cases otherwise Inspected. (Spec. Cases).
Number Examined.	Palpably Enlarged.		Markedly Enlarged.		Suppur- ating.		Cicatrices.		Number found Defective.
	No.	Per- centage	No.	Per- centage	No.	Per- centage	No.	Per- centage	
Submax- illary, 5431	1840	33.8	73	1.34	...	...	6	.11	5
Cervical, 5431	1902	35.0	88	1.62	3	.05	20	.36	11

Slightly enlarged glands are very common, and are probably caused by absorption of infective material from decayed teeth, and unhealthy conditions of the throat. They are the natural defences of the body to the entrance of infective material, and are another indication of the necessity for attention to the teeth of the children. The glands, in themselves, require no treatment in the majority of cases.

L. External Eye Disease :—

Cases discovered during Systematic Examination. (Systematic Cases).										Cases otherwise Inspected. (Special Cases).	
Number Examined.	1. Blepharitis.		2. Con-junctivitis.		3. Corneal Opacities.		4. Strabismus.		5. Other Diseases.		Number found Defective.
	No.	Per-centage	No.	Per-centage	No.	Per-centage	No.	Per-centage	No.	Per-centage	
5431	211	3.88	41	.75	9	.16	76	1.39	45	.82	101 { 1—27 2—25 3— 5 4—20 5—24

Blepharitis, an inflammation of the lids of the eyes around the eye-lashes is the most common eye trouble met with. Sometimes this indicates eye strain and is remedied by suitable spectacles. Severe cases cause loss of the eye-lashes and disfigurement.

Squint usually requires glasses, otherwise the sight of the squinting eye is greatly reduced.

54 per cent. of the cases recommended received attention during the year.

M. Visual Acuity :—

Cases discovered during Systematic Examination. (Systematic Cases).							Cases otherwise Inspected. (Special Cases).
Number Examined.	Good Vision. 6/6.		Fair Vision. 6/9 and 6/12.		Bad Vision. 6/18 or more.		Number found Defective.
	No.	Percentage	No.	Percentage	No.	Percentage	
3195	2649	82.9	390	12.2	156	4.9	77

All cases of bad vision should be corrected by suitable spectacles, and also all slight defects when accompanied by symptoms of eye strain. In the above table the children are classified according to their working vision. Many of the children, with good and fair vision, have one eye extremely defective, often due to a neglected squint. Any damage to the good eye would be serious in such children.

44 per cent. of the cases recommended received attention during the year, and a considerable number have received attention since the end of the session.

N. Ears :—

Cases discovered during Systematic Examination. (Systematic Cases).							Cases otherwise Inspected. (Special Cases).
Number Examined.	1. Otorrhœa.		2. Wax.		3. Other Diseases.		Number found Defective.
	No.	Percentage	No.	Percentage	No.	Percentage	
5431	59	1.08	54	.99	4	.07	56 { 1—48 2—5 3—3

O.—Hearing :—

Cases discovered during Systematic Examination. (Systematic Cases).					Cases otherwise Inspected. (Special Cases).
Number Examined.	1 Slightly Deaf.		2 Markedly Deaf.		Number found Defective.
	Number.	Percentage.	Number.	Percentage.	
5431	49	.90	9	.16	34 { 1—24 2—10

Otorrhœa or discharging ears is the most serious complaint, and is often the cause of serious deafness. It is often neglected in earlier years, and is then much more difficult to cure. It often follows the infectious fevers, and if treated thoroughly at once, readily reacts to treatment without any impairment of hearing.

The deafness due to wax is easily cured by removal of the wax.

52 per cent. of the cases recommended received attention during the year.

P.—Speech :—

Cases discovered during Systematic Examination. (Systematic Cases).					Cases otherwise Inspected. (Special Cases).
Number Examined.	1 Defective Articulation.		2 Stammering.		Number found Defective.
	Number.	Percentage.	Number.	Percentage.	
5431	46	.84	17	.31	20 { 1—8 2—12

Q—Mental Condition :—

Cases discovered during Systematic Examination. (Systematic Cases).					Cases otherwise Inspected. (Special Cases).
Number Examined.	Dull or Backward.		Mentally Defective.		Number found Defective.
	Number.	Percentage.	Number.	Percentage.	
5431	86	1.58	18	.33	123

The number given under the heading "dull or backward" does not fully represent this class.

The question of dealing with feeble minded children in a County area is a very difficult one, and is at present engaging the attention of the Health Committee. Further information is given under the heading "Special Classes."

R.—Heart and Circulation :—

Cases discovered during Systematic Examination. (Systematic Cases).							Cases otherwise Inspected. (Special Cases).
Number Examined.	Organic Disease. (Congenital and Acquired).		Functional Disease.		Anaemia.		Number found Defective.
	No.	Percentage	No.	Percentage	No.	Percentage	
5431	27	·49	88	1·62	53	·97	12

S.—Lungs :—

Cases discovered during Systematic Examination. (Systematic Cases).								Cases otherwise Inspected. (Special Cases).	
Number Examined.	1. Chronic Bronchitis.		2. Tuberculosis.		3. Tuberculosis (Suspected).		4. Other Diseases.		Number found Defective.
	No.	Per- centage	No.	Per- centage	No.	Per- centage	No.	Per- centage	
5431	35	.64	2	.03	6	.11	36	.66	18 { 1—4 2—8 3—4 4—2

Bronchial catarrhs are fairly frequent, but definite tuberculosis of the lungs in school children is not nearly so common. The difficulty of diagnosis in young children is very great, and consequently the heading "Tuberculosis suspected" has been introduced, as it is important that suspected cases should have satisfactory treatment.

T.—Nervous System :—

Cases discovered during Systematic Examination. (Systematic Cases).									Cases otherwise Inspected. (Special Cases).
Number Examined.	1. Epilepsy.		2. Chorea.		3. Infantile Paralysis.		4. Other Diseases.		Number found Defective.
	No.	Per-centage	No.	Per-centage	No.	Per-centage	No.	Per-centage	
5431	4	·07	7	·12	19	·34	120	2·21	39 { 1—3 2—3 3—21 4—12

Infantile paralysis is the commonest defect met with. This is the paralysis resulting from the infectious disease called "acute poliomyelitis" which occurs before school age. What is seen in school children is the resulting paralysis. These conditions might be greatly improved if thorough treatment were obtained soon after the attack of the disease.

U.—Tuberculosis (not Pulmonary) :—

Cases discovered during Systematic Examination. (Systematic Cases).										Cases otherwise Inspected. (Spec. Cases)	
No. Ex- amined	1. Glandular.		2. Bones and Joints.		3. Abdominal.		4. Skin.		5. Other Forms.		No. found Defective.
	No.	Per- centage	No.	Per- centage	No.	Per- centage	No.	Per- centage	No.	Per- centage	
5431	34	·62	4	·07	2	·03	1	·01	4	·07	14 { 1-5 2-6 3-3

V.—Rickets :—

Cases discovered during Systematic Examination. (Systematic Cases).					Cases otherwise Inspected. (Special Cases).
Number Examined.	Slight.		Marked.		Number found Defective.
	Number.	Percentage.	Number.	Percentage.	
5431	36	·66	7	·12	5

What is seen in school children is the deformity of the bones resulting from rickets in earlier life.

The prevention can only be attempted through infant welfare centres and health visitors. As this work is now beginning under the Maternity and Child Welfare Act, some improvement may be expected in a few years time.

X. Infectious or Contagious Disease :—

At Systematic Inspections.	Specials.
9	7

Infectious cases are seldom met with at systematic inspections. Outbreaks of Measles occurred at 23 schools, and 7 of the country schools were closed on this account. One department of a school was also closed for a similar reason. The closure was for periods varying from one to two weeks.

Smaller outbreaks of Whooping Cough occurred in 8 schools. 31 cases of Enteric Fever occurred from September to December, 1919, in Perth City. Cases occurred in 5 of the City schools, but mainly involved two schools.

A number of cases of Scarlet Fever, Diphtheria, Chickenpox, and Mumps also occurred.

Y. Other Diseases or Defects :—

Number Examined.	Cases discovered during Systematic Inspection.		Special Cases.
	Number.	Percentage.	Number found Defective.
5431	147	2.65	60

W. Deformities :—

Cases discovered during Systematic Examination. (Systematic Cases).					Cases otherwise Inspected. (Special Cases).
Number Examined.	1 Congenital.		2 Acquired (non-rachitic).		Number found Defective.
	Number.	Percentage.	Number.	Percentage.	
5431	26	.47	47	.86	20 { 1-11 2-9

8. SPECIAL SCHOOLS AND CLASSES (including Open-air Schools).

Number of Schools or Classes :—

- (1). *Physically Defective Children*.—None. One child attends a day school at Dundee.

- (2). *Mentally Defective Children*.—There are 2 special classes in Perth City, accomodating 40 children. No children are kept after 14 years of age, unless at the desire of the parents, as at present there are no facilities for teaching such trades as cobbling, tailoring, etc. Until accommadation is available for bringing the defective children in the country districts in to the classes, sufficient numbers would scarcely be available for such specialised instruction. Six children are at present in Baldovan Institution, Dundee. (July 31st, 1920).
- (3). *Backward Children*.—Special classes are provided in the Southern, Northern and Central District Schools.
- (4). *Blind and Partially Blind Children*.—None. Two children are in the Dundee Institution for the blind. (July 31st, 1920).
- (5). *Deaf and Deaf-mute Children*.—None. Two children are in Donaldson's Hospital, Edinburgh. Seven children are in the Dudhope Institution for the Deaf and Dumb, Dundee. (July 31st, 1920).

Six children were reported to Parish Councils during the year, as mentally defective and uneducable.

9. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE OF CHILDREN.

A. Physical Exercises.—The following report was submitted to the Health Committee during the year.

REPORT ON PHYSICAL INSTRUCTION IN THE COUNTY OF PERTH.

There are in the employment of the Authority 5 expert teachers, 4 ladies and one gentleman.

Two of these teach in Perth City, one in the Academy and one in the primary schools. The other three teach in the

McLaren High School, Callander,	} 4 Higher Grade Schools,
Blairstown Higher Grade School,	
Pitlochry Higher Grade School,	
Breadalbane Academy, Aberfeldy,	

and in the primary schools at

Killiecrankie	Blairstown R. C.	Muthill
Birnam	Ratray	Auchterarder
Errol	Alyth	Aberuthven
Glendoick	Gauldswell	Aberfoyle
St. Madoes	Methven	Kinlochard
Almondbank	Public School, Callander	
	17 Primary Schools.	

The time devoted by these teachers, to each school, is very limited. The post-intermediate girls in the Perth Academy get no instruction at all, and the post intermediate boys have only their cadet drill.

In the higher grade schools, about $\frac{3}{4}$ hour per week is devoted to this work, except the first year children in Callander High School, and the junior students who get $1\frac{1}{2}$ hours.

The Primary Schools.—In the primary schools, about $\frac{1}{2}$ hour per week or $\frac{1}{2}$ hour per fortnight is devoted to this work. The same amount of time is given by the class teacher.

The work done by these experts is actual teaching of the classes, not as it might be, teaching of the class teacher or supervising, which seems the only way to bring expert advice to all the schools in the County, unless the staff of experts is largely increased.

Accommodation — Indoor.—There is very little proper accommodation for physical training—gymnasias at Callander, Pitlochry, Perth Academy, Caledonian Road and Perth R. C.—the latter unfit for use, a few central halls and an occasional empty class room. Apart from this, playgrounds are used in good weather and class rooms in bad weather. The playsheds are mostly too small to use, and the teachers report that the class rooms are not suitable for active exercises on account of lack of cleanliness, bad ventilation, &c. The question of suitable accommodation requires consideration.

Clothing and Footgear.—A certain number of children bring shoes, especially in Perth, but the majority carry on drill and games, if any, in ordinary boots. All should have proper shoes for this work.

Equipment.—Generally there is no equipment for indoor games, except in one or two of the higher grade schools, and there is no equipment in the primary schools for outdoor games.

Equipment for outdoor and indoor games is required in all the schools.

Games are not general at schools, on account of difficulty of accommodation, footwear and equipment indoor, and lack of equipment and suitable accommodation outdoor.

Playing Fields.—There are very few in the County.

Play Centres.—There are no play centres.

Swimming.—This could easily be re-established in Perth. At present there are some arrangements for Academy children only.

School Camps.—Some voluntary bodies conduct these from Perth, but otherwise nothing of this nature is done.

Breathing Exercises are only occasionally taken. Most of the teachers feel that the class rooms are unsuitable for these exercises.

Handkerchief drill is difficult, on account of the absence of handkerchiefs.

Personal Hygiene.—An occasional lesson is given in personal hygiene.

Scouts, &c.—There are a considerable number of boy scouts, and a few girl guides among the scholars, and also a battalion of the boys' brigade in Perth.

General Recommendations.—The system of Physical Education in the County is not properly organised. Some schools are getting expert help and others are getting none. The expert teachers we have are too much occupied in teaching classes, instead of directing the work of the class teachers, and they are hampered by lack of proper accommodation, footgear, equipment for games, both indoor and outdoor.

A short period of 20 minutes every day is required for physical education, and the subject should include talks on hygienic habits and insistence on cleanliness. To put this important subject on proper lines, an organiser is required to deal with the whole question. A few more expert teachers might be employed to cover the whole County, and if their work was more definitely supervisory, their experience would go further, as they could cover more schools.

The Authority is now advertising for an Organiser of Physical Education.

Physical Education has not had the amount of attention paid to it that it deserves. Teachers of this subject are not too plentiful, and it would be a wise policy to gradually augment the staff whenever possible. With regard to the secondary schools, which at present have not sufficient expert teaching, it should be remembered that provision of specially trained teachers for this work is not extra expenditure. At present, in these schools, the work of the expert is supplemented by teachers who have not been specially trained for this work, but who may be quite as expensive to the Authority. The employment of the class teacher for physical training is only an economy in small country schools.

B. Baths.—There are no swimming, plunge or spray baths in the schools. Arrangements were previously made with the Corporation Swimming Baths, and probably these will be again introduced. The reason why they fell into abeyance was on account of the insufficiency of special attendants while the children were in the baths.

These questions will all be renewed after the appointment of the Organiser of Physical Education.

C. Practical instruction in personal hygiene is not yet receiving sufficient attention. At present the Health Committee are dealing with the cleansing of the school premises, which is the first step in practical instruction. The educative value of the school in personal hygiene is not yet sufficiently appreciated.

10. ARRANGEMENTS FOR FEEDING OF CHILDREN.

A. Administration.—Meals continued to be provided by the Authority in Perth City, and the arrangements were as detailed in page 30 of the Perth School Board Report for the year ending July 31st, 1915. Dinners were served every school day from 5th November, 1919, to 11th June, 1920—141 days.

B. Nature of Meals.—See page 30 Perth School Board Report for year ending July 31st, 1915.

C. Number and Cost of Meals.—The total number of meals supplied was 10,610, an average of 75·2 per day, 3,935 fewer than last year.

The total cost to the Authority was	£531	9	1
Less collected from Children,	...	20	10 7½
Net total,	...	£510	18 5½

The price of the dinners was slightly over 11½d. per meal.

1,857 dinners were served at Craighend School from 3rd November to 1st April—100 school days.

The total cost was	...	£14	10	0
Less collected from children at 1d.				
per meal,	...	7	1	0
Net cost to Authority,		£7	9	0

Vegetables were provided free from the school garden.

The system of supplying meals in Perth is being altered for next session, and the cost will be substantially less.

In many country schools mid-day meals are served. The institution of these is mainly due to the energy of individual teachers.

Soup is provided in 23 schools, the children bringing their own bread. Cocoa is provided in 16 schools.

A considerable number of schools limit the provision to the facilities for heating milk or making cocoa, the children providing all the ingredients.

54 schools appear to make no provision of any kind for the mid-day meal.

The cost is met by contributions from children, usually ½d. to 1d. per day for soup, or 2d. per week for cocoa, by contributions of money or of potatoes and other vegetables given locally, and the deficit if any is often cleared by concerts usually organised by the teachers. One concert is often sufficient to cover the deficit of several years. A total deficit of £32 14s. 10d for all the country schools was paid by the Authority.

11. ARRANGEMENTS FOR MEDICAL TREATMENT.

A Clinic is provided in Perth City. A small Clinic has also been opened in one of the schools in Crieff, where Nurses treat minor ailments. Periodic visits are made to this school by the Medical Staff.

A certain amount of treatment of minor ailments has also been carried out by the district Nurses throughout the County, and this work will be greatly extended when the County Nursing Scheme is settled.

The details of the cases treated at the Perth Clinic are given under the following heads :—

A. Minor Ailments.

1. DISEASES OF THE EAR—

Cases treated during year,	83
Cases ceasing to attend { Cured,	35
{ Improved,	15
{ Unchanged,	5
Cases remaining under treatment at 31st July,	28
Number of Attendances,	3034

These have been mainly chronically discharging ears which have been thoroughly treated during the year.

To deal with these and with the Ringworm cases, the Clinic in Perth was kept open during the summer holiday months.

2. DISEASES OF THE EYE (not including Defective Vision)—

Cases treated during the year,	49
Cases ceasing to attend { Cured,	41
{ Improved,	4
{ Unchanged,	—
Remaining under treatment at 31st July,	4
Number of Attendances,	408

These are mainly Blepharitis and Conjunctivitis.

3. DISEASES OF THE SKIN (not including Ringworm and Favus)—

Cases treated during the year,	434
Cases ceasing to attend { Cured,	367
{ Improved,	60
{ Unchanged,	5
Remaining under treatment at 31st July,	2
Number of Attendances,	1967

Impetigo, Scabies and Septic Sores formed the majority of the cases.

4. RINGWORM AND FAVUS—

(a) *X Ray Treatment*.—During the year X Ray treatment of Ringworm was introduced for a proportion of the cases, and 37 cases were submitted for treatment up to the end of July.

(b) *Drug Treatment*.—All other cases of Ringworm had drug treatment either at the Clinic or from their own practitioner. The majority of cases treated privately were seen at the Clinic periodically.

The results of treatment are as follows:—

Cases treated during the year,	...	167
Cases ceasing to attend	{	Cured, ... 109
during the year,		Improved, 39*
		Unchanged, 10*
Remaining under treatment at 31st		
July,	...	9
Number of Attendances,	...	1978†

Of 90 cases still under observation at the end of the session—

20 were now cured after X Ray treatment.

19 were cured by private practitioners.

17 were cured by drug treatment at the Clinic.

5. OTHER DISEASES—

Cases treated during the year,	...	208
Cases ceasing to attend	{	Cured, ... 207
during the year,		Improved, —
		Unchanged, —
Remaining under treatment at 31st		
July,	...	1
Number of Attendances,	...	709

At the Crieff Clinic there were treated—

Ear Cases,	...	3, with 43 Attendances.
Eye Cases,	...	4, „ 61 „
Skin Cases,	...	7, „ 49 „
Ringworm,	...	2, „ 8 „
Other Diseases,	...	2, „ 17 „
Total,	...	18, „ 178 „

* These cases ceased to attend mainly during the holiday month of July, when the Clinic was kept open.

† This number does not include attendance at the Infirmary for X Ray treatment.

NOTE.—A survey of all Ringworm cases in Perth City, carried out at the end of September, 1920, showed that this complaint was now well in hand, the number actually remaining uncured being 34, and many of these were well on the way to recovery.

B. Defective Vision.—

			TOTAL.
Number examined,	...	...	156
Number of Refractions,	...	...	151

NATURE OF DEFECT :—

Simple Hypermetropia,	...	...	58
„ Myopia,	...	...	15
„ Hypermetropic Astigmatism,	...	...	17
„ Myopic „	...	...	4
Compound Hypermetropic Astigmatism,			30
„ Myopic Astigmatism,	...	...	4
Mixed Astigmatism,	...	...	1
Anisometropia,	...	...	1
Operation for squint advised,		...	4
Corneal Nebula,	...	...	1
R. Eye Ulcer,	...	...	1
Blocked Lach. Sac,	...	...	1

Of the 156 cases seen by the School Oculist, 134 were examined in the Eye Clinic in Perth, and 22 were examined at Crieff, which was the only place outside Perth City where arrangements could be made during the year for the visit of the School Oculist.

Spectacles were advised for 135 children, and were obtained by 104 of these children.

A contract is taken for supply of spectacles, to ensure a flat cheaper rate for all children.

C. Defective Teeth.—During the year Mr. Cross was appointed as dental surgeon to the Authority, and took up duty on April 13th. A summary of the work, during the months of May and June, is given below. It will be noticed that the work is largely inspection, as must necessarily happen during the first months of dental work. At each visit to a school a few words were said to the children about their teeth, and the necessity for care of them. The groups selected for inspection and treatment were children in their 7th and 8th year, *i.e.* 6 year old and 7 year old children. Cases noted by the Medical Inspectors as requiring treatment were also inspected by the dental officer, and treatment was offered to these cases also.

Temporary centres for treatment were established at Coupar-Angus, Blairgowrie, Alyth and Meigle, the children from out-lying schools travelling in to the nearest centre.

This work of arranging for children to come in to the Dental Clinics, and for providing transport for groups of children, is work that could be greatly assisted by Local Care Committees.

SUMMARY OF DENTAL WORK FOR MAY AND JUNE, 1920.

(a) *Inspection*—

1. Number of schools visited,	64
2. Number of children inspected,	2109
3. Number recommended for treatment and notified to parents,	1260
4. Number of acceptances,	542

(b) *Treatment*—

Number of cases treated,	106
„ Attendances,	118
„ Extractions,	333
„ Fillings,	49
„ Dressings,	3

D. Operations.—These were performed privately and at the various hospitals in the County, particularly at the Perth Royal Infirmary. No operations are carried out at the Clinics.

E. Deformities treated by Appliances.—Only one case was treated during the year.

PITLOCHRY HOLIDAY HOME.—14 children are sent to this home every 3 weeks during the summer and every 4 weeks during the winter.

In concluding this First Annual Report on the School Health Administration, I wish to express my thanks to the Health Committee for the helpful way in which they have received any suggestions during the year, to the teachers of the various schools, without whose co-operation no progress could be made, to the attendance officers and to the staff of the Health Department for their willing co-operation during the year.

Your obedient Servant,

D. J. McLEISH,
Principal Medical Officer.

2 ROSE TERRACE,
PERTH, Oct. 11th, 1920.