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COUNTY COUNCIL OF DUNBARTON



ANNUAL REPORT

BY

SAMUEL HARVEY, M.B., Ch.B., D.P.H., M.R.C.P.(Edin.)

ON THE

Medical Inspection of School Children

1948-1949

(Year ending 31st July, 1949)

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COUNTY COUNCIL OF DUNBARTON

SCHOOL MEDICAL STAFF

Supervising School Medical Officer.

SAMUEL HARVEY, M.B., Ch.B., M.R.C.P.(Edin.), D.P.H.

School Medical Officers.

MILDRED M. L. CATHELS, M.B., Ch.B., D.P.H. (Retired 9/10/48.)

ANDREW D. COWAN, M.B., Ch.B., D.P.H. (Retired 23/7/49.)

CHARLES C. SLORACH, M.B., Ch.B., D.P.H. (Part-time.)

ELLEN CUSH, M.B., Ch.B., D.P.H.

IAIN MACLEOD, M.B., Ch.B., D.P.H. (Commenced 1/9/48.)

Chief Dental Officer.

FELIX A. CASSIDY, L.D.S., D.D.S. (M'Gill).

Dental Surgeons.

ELIZABETH M'KENDRICK, L.D.S.

MRS. MARY W. DINN, L.D.S.

JOHN H. N. MACDONALD, L.D.S.

SHEILA S. SPEIRS, L.D.S.

AGNES E. MACLENNAN, L.D.S. (Resigned 31/1/49.)

DAVID BROWN, L.D.S. (Resigned 15/4/49.)

HALINA WAGNER. (Commenced 18/10/48—Resigned 29/10/48.)

Ophthalmic Surgeon.

JAMES N. TENNANT, M.B., Ch.B., D.O.M.S., B.Sc.

Ear, Nose and Throat Specialist.

S. FULTON CHRISTIE, M.B., Ch.B., F.R.F.P.S.

Anæsthetist.

A. FERGUS M'INTYRE, M.B., Ch.B.

Nurse in Charge of Orthopædic Clinics.

MORAG T. GALLOWAY.

Instructresses at Orthopædic Clinics.

AGNES M'F. MALCOLM.

JEAN S. A. HOWATT.

ANNA G. THOMSON. (Commenced 23/10/48—Resigned 15/11/48.)

MRS. M. M'CLAGGAN. (Commenced 19/11/48—Resigned 13/5/49.)

SCHOOL MEDICAL STAFF—*Continued.*

Nursing Staff.

C. M. JEFFREY.	A. TAYLOR.
J. P. SCOTT.†	C. DEMPSEY.
C. T. GAVIN.	M. G. MILLER.
J. M'HAFFIE.	A. GEE.
H. STIRLING.	C. KING.
M. GILMOUR.†	M. CALLANDER.
K. STEVENSON.	E. A. SANDILANDS.
M. MACDONALD.†	M. CALLAGHAN.
E. M. RANKIN.	

†Employed solely on School Medical duties.

Dental Attendants.

ANNIE S. RAE.	ELIZABETH ROLLO.
J. M'GREGOR.	FLORENCE M'GEACHY
MRS. M. SAMSON.	E. J. GRANT.*
M. HAVERN.	C. P. ROGERS.

*Resigned 15/12/48.

Attendant at Orthopaedic Clinics.

MARGARET BLACK.

Clerks.

MARY BUCHANAN.	AGNES KINLOCH.
JANET M'MANUS.	MARGARET D. B. MELDRUM.*
JAMES GALLACHER.	

*Commenced 16/9/48.

PREFACE.

To the County Council of the County of Dunbarton.

LADIES AND GENTLEMEN,

I herewith submit the Thirty-eighth Annual Report on the Medical Inspection and Treatment of Children attending Schools in the County, as prepared by the School Medical Officers.

I am, Ladies and Gentlemen,

Your obedient Servant,

SAMUEL HARVEY.



REPORT

ON THE

MEDICAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN IN THE COUNTY OF DUNBARTON.

I.—LIST OF STAFF.
(See pages 3 and 4.)

2.—(a) NUMBER OF SCHOOLS.

School Management Area—

Cumbernauld,	-	-	-	-	-	4	
Kirkintilloch,	-	-	-	-	-	6	
New Kilpatrick,	-	-	-	-	-	5	
Old Kilpatrick,	-	-	-	-	-	11	
Dumbarton,	-	-	-	-	-	7	
Vale of Leven,	-	-	-	-	-	12	
Helensburgh,	-	-	-	-	-	10	
						—	
						55	
						—	

(b) NUMBER OF CHILDREN ON REGISTER AND IN AVERAGE ATTENDANCE
DURING SESSION 1948-49.

School Management Area.	Average on Roll.	Average Attending.	Per Cent.
Cumbernauld	822.7	762.6	92.6
Kirkintilloch	3606.5	3275.9	90.8
New Kilpatrick... ..	1845.9	1670.9	90.5
Old Kilpatrick	7630.0	6818.7	89.2
Dumbarton	4449.4	3991.4	89.7
Vale of Leven	3303.6	2992.3	90.5
Helensburgh	1734.2	1512.1	87.1
Total	23,392.3	21,023.9	89.9

NUMBER OF VISITS FOR SYSTEMATIC EXAMINATIONS.

Note.—One whole day spent in school counts as two visits (morning and afternoon sessions).

Number of visits as above, - - - - -	522
--------------------------------------	-----

NUMBER OF SPECIAL VISITS BY MEDICAL OFFICERS.

For re-examination of defective children, - - -	54
For re-examination of backward, mentally, or physically defective children, - - -	36
Attendances at School Clinics, - - -	526
Attendances for office work, &c., - - -	68
For inquiry regarding infectious diseases (including scabies), - - -	1
Diphtheria Immunisation, - - -	104
Others, - - -	103
Total, - - -	892

SANITARY CONDITIONS OF SCHOOLS.

Many of the materials required for this work are still under control: and there is, of course, a definite shortage of labour in the building trades. These factors, which are known to the Committee, have made it very difficult to carry out major schemes of improving and modernising school lavatories. The present sanitary fittings within the offices have, however, been maintained in good working order; and replacements have been provided, where necessary.

As in former years, particular attention has been given to limewashing and the painting of the woodwork, and these outbuildings have, in general, been kept in a reasonably good state of repair and cleanliness.

The washing down of classroom walls has been carried out, as approved by the Visiting Committee: and a considerable amount of painter work was carried out last year.

The Property Committee are, of course, very conscious of the fact that considerably more money could be spent, to good purpose, on the school buildings; but the very high cost of repairs, alterations and improvements necessitates the spreading of this expenditure over a number of years. Everything possible is, however, being done to keep the properties in as good a state of repair and cleanliness as possible.

ORGANISATION AND ADMINISTRATION.

A—System and Extent of Medical Inspection and Treatment.

The School Health Scheme provides for the routine examination of children in the following age-groups:

1. Entrants.
2. 7—11 Years.
3. $11\frac{1}{2}$ —14.6/12 Years.
4. 14.7/12—17 Years.

The routine examination is of a detailed nature, heights and weights being taken, condition of clothes and footgear noted, special senses examined, and a general survey made of alimentary, respiratory and nervous systems.

Results of the routine examinations are recorded on Record Cards and any abnormalities noted. The cards are kept in each school, the same card being used throughout the child's school career to form a concise record, giving details of medical history, medical examinations, advice and treatment.

Parents are advised beforehand of the date and time of examination, and invited to be present. Where on routine inspection a child is found to require any form of treatment, the School Medical Officer completes a Consent to Treatment Form in duplicate (numbered). The parent's signature is obtained and original and duplicate forms are returned to the Central Office.

Where a parent is not present at the examination the child is given the original Consent to Treatment Form to take home for signature, and return to the Head Teacher. The book containing the duplicate forms is left at the school and the Head Teacher "marries" the acceptance with their duplicates and returns both forms to the Central Office.

The School Nurses call periodically at the Schools, and note the outstanding duplicates for the purpose of following up.

From the Central Office, the duplicate copy is forwarded to the nurse in charge of the clinic concerned who is responsible for the call up of children for treatment.

In addition to routine examinations special cases are examined by the Medical Staff at each routine and Non-routine visit to schools. These cases are selected by teachers, School Nurses and Medical Officers, as suffering from some defect. Except in special circumstances the examination of these children is confined to the establishment of the defect and the results are noted on the child's Record Card. Where treatment is required Consent to Treatment Forms are issued as in ordinary routine examinations.

Children are also examined at the request of the parents either in school, or in school clinics, which are held weekly in the larger areas, and any necessary treatment is given.

In addition the School Medical Officers visit and examine at regular intervals the children in the Special Schools and Classes within the County.

Treatment and Inspection Clinics are situated in:—Alexandria; Helensburgh; Bearsden; Kirkintilloch; Clydebank; Dumbarton; Duntocher; Cumbernauld; Twechar; and the following services are available:—Minor ailments, Oculist, Ear, Nose and Throat Treatment, Ultra Violet Light, Remedial Exercises; Speech Therapist, Psychologist, Dental Treatment. An Audiometer with Peepshow has recently been purchased and an Audiometrician appointed to carry out individual and mass testing of hearing and to work in conjunction with the Ear, Nose and Throat Specialist and Speech Therapy staff.

B—Report by Chief Dental Officer on System and Extent of Dental Inspection and Treatment.

The staff, at the commencement of the school year, consisted of a chief and seven assistant Dental Officers all of whom were employed on a whole-time basis.

Each Dental Officer had the assistance of an attendant for chairside and clerical duties.

The County was divided into eight districts, one being allotted to each dentist, the Chief Dental Officer in addition, being responsible for the organisation, development and technical efficiency of the Dental Service. Two of the districts were located within the Burgh of Clydebank, the dividing line being Kilbowie Road, a treatment clinic being located in each division.

It is hoped that with the opening of the new Burgh Clinic at Castlehill, Dumbarton, which contains a fully equipped Dental Surgery, similar benefits will occur both with regard to greater road safety for the children and a saving of school-hours.

All the Clinics are supplied with patients in five ways:—

- (a) As a result of Routine Inspection of the various age groups by the Dental Officers.
- (b) Children who are referred by the School Medical Officers, e.g., Emergency Cases.
- (c) Children referred by Head Teachers or Parents for Emergency Treatments.
- (d) Those children who are referred by the Nose and Throat Specialist usually for Orthodontic Treatment.
- (e) Patients referred by the Speech Therapists mainly for Orthodontic Treatment.

When the Education Act (Scotland), 1946, came into operation with the provision that Dental treatment be free to all school children, it became no longer necessary to refer all acceptance forms to the School Management Committee for

assessment purposes. This helped to curtail to a minimum the period between acceptance of treatment and the treatment being carried out.

The new Dental Record Cards, as recommended by the Department of Health, were adopted and put into use. At the routine Inspection a card is made out for each child called up for inspection. Should a child be absent this is recorded on the card. In the case of those children requiring treatment, the type of treatment, e.g., Fillings, Extractions, is recorded, as also is the date of inspection. A detailed inspection is not made until the child's visit to the clinic for treatment, when the entire dental conditions are recorded. When the forms notifying the parent of the child's need of treatment are returned the information thereon, i.e., either acceptance of treatment or refusal, is also recorded on the card. Should it be deemed advisable to carry out treatment under a General Anæsthetic, a separate consent form is issued for this.

Our policy at the commencement of the year was to carry out complete treatment for every child whose parents had given consent. As the dental staff was inadequate to achieve this it was decided to concentrate on certain age groups. These groups were chosen with a view to checking at the earliest possible moment any decay which might be obvious in the newly erupted permanent teeth, and also to supervise the proper positioning of these newly erupted teeth.

The ages chosen were:—5, 7, 9, 12, 14.

In the smaller schools with 200 or less on the roll all age groups were inspected. Those children who came within the chosen age groups were to be assured of an inspection and treatment at least every two years during their school life.

Unfortunately the loss of dental personnel (three dentists) within the year coupled with the demands made for treatment by the "Priority Classes," particularly the pre-school children, completely upset our plans.

General Anæsthetics.—Dr. F. M'Intyre, Specialist in Anæsthesia, carried out the administration of General Anæsthetics, for dental purposes. These were mainly carried out at three

clinics, Dumbarton, Kirkintilloch and Clydebank, use being made of the beds in the wards for the recovery of the patients. Later on in the session administrations of General Anæsthetics were also carried out at Hillfoot Clinic, the Orthopædic Room being temporarily converted, on such occasions, into a little ward, folding camp beds being used.

Definite weekly sessions were reserved for each district so that each dentist coming across an emergency case seeking treatment was able to satisfy the mother as to when the treatment would be carried out. In two cases of extreme urgency, the children concerned were referred to and treated at clinics outside their district.

Orthodontics.—Irregular or crowded teeth are to-day recognised as being pre-disposing factors in the production of pyorrhoea in early adult life. This is equally true of children who are mouth breathers.

The correction of such conditions, apart from the disfigurement caused to the patient, is an essential feature of any service claiming to be interested in the dental well being of children. The prevention of such conditions is even more important and this is daily becoming a greater possibility owing to the increasing number of pre-school children attending the clinics.

Irregular teeth and mouth breathing, &c., apart from their dental significance, are frequently disabilities which loom up in the province of the Nose and Throat specialist or the Speech Therapists and contribute to the abnormalities which these specialists are endeavouring to correct. Thus we find whole-hearted co-operation, between all three services with the greatest benefit to the patient's well-being.

C—School Nursing arrangements for following up.

The nursing staff now consists of 17 full-time nurses and three part-time nurses who do night duty at the Operation Clinic one night per week, accompanied by one full time nurse selected on a rotating basis. Each nurse has a special area with a clinic for the treatment of minor ailments, one

session weekly. She is responsible for the following up of the schools in her own area, visiting at intervals to examine children reported for unsatisfactory cleanliness, poor nutrition, &c. The nurses also attend at dental anæsthetic sessions. Operation cases are visited before operation and at least twice afterwards. The nurses also follow up on the School Medical Officer's inspection by visiting the parents of those children who required treatment and who failed to return the Consent to Treatment Form, and parents are urged to obtain treatments either privately or at the School Clinics. These visits are also utilised by the nurses to satisfy themselves that the child has not developed any further defects.

D—Co-ordination with the Public Health Services and with other Departments which render service to children.

The Medical Officer of Health for the County is also the Chief Administrative Medical Officer for the School Medical Services, while the School Medical Officers are also Assistant Medical Officers of Health for purposes of Administration. The utmost co-operation is maintained between the School Medical Service and the Health Departments in the large burghs. There exists also a close co-ordination between the School Medical Services and the County Education Department particularly with the Speech Therapy and Psychological Staffs.

By arrangement, ailing School Children are admitted to Cardross Park Home for a period of convalescence, during which time their education is continued by a teacher, specially seconded to the Home by the Director of Education.

E—Co-ordination with Voluntary Bodies and other outside agencies.

Arrangements exist whereby children about to leave Special Schools are medically examined as to their suitability for certain types of employment and the Ministry of Labour is notified accordingly.

Liaison is also maintained with the Child Guidance Clinic

(Voluntary),— cases being specially referred by the School Medical Officers or the Psychologists.

F—Co-operation with teachers and parents with special reference to the attendance of parents at inspections.

The existing co-operation with the teaching staffs cannot be too highly valued. The Head Teachers make themselves responsible for sending out the preliminary letters to parents and also for the arrangements for the actual examinations. In cases where the parents are not present at the examinations, the Head Teacher makes the return of Consent to Treatment Forms to the Central Office, and are most helpful in seeing that children are sent regularly to the clinic for treatment.

The number of parents who attend with their children at the routine examinations and also at the clinics is most gratifying. During the year the average for the whole county was close on 49 per cent. In some schools with the younger children the number has reached 100 per cent. The general attitude of the parents is one of real co-operation with the School Medical Officer.

Propaganda work has been carried out on a small but nevertheless effective scale by this contact with the parent and by several talks by the Medical Staff to Parent-Teacher Associations in different parts of the county.

PARENTS PRESENT AT INSPECTION.

School Management Area.	Number of Children Examined.	Number of Parents Present at Routine Examinations.	Per Cent.	Number of Parents Present at Non-Routine Examinations.
Cumbernauld ...	206	77	37.3	38
Kirkintilloch ...	1194	433	36.2	133
New Kilpatrick ...	622	301	48.3	17
Old Kilpatrick ...	2233	1186	54.0	144
Dumbarton ...	1259	585	46.4	252
Vale of Leven ...	970	598	61.6	126
Helensburgh ...	509	226	44.4	305
Total ...	6993	3406	48.6	1015

GENERAL REVIEW.

During the session, the total number of children examined in routine inspections was 6993 (boys 3538 : girls 3455). This represents an increased school population coming within the necessary age groups for examination. There was an increase of 434 children examined over 1947-1948 totals and of 476 children examined over previous years figures. Kirkintilloch, New Kilpatrick and Old Kilpatrick areas showed the most substantial increase in numbers.

Non-routine cases examined totalled 2251—a decrease of 294 cases over previous year. It is to be noted in this connection, that, with the introduction of the National Health Scheme, a fall was expected but was not so great as was anticipated. Recently attendance at clinics has increased.

PHYSICAL CONDITION.

The number of children free from all defect is—

Of the entrants to schools 56.4 per cent. were free from defect.
Of the 8 year-old group 57.2 per cent. were free from defect.
Of the 13 year-old group 64.1 per cent. were free from defect.
Of the 16 year-old group 70.2 per cent. were free from defect.

As the word defect includes minor conditions upsetting health and educational capacity, the position can be seen to be reasonably good.

The average physical measurements showed slight but general increases with the exception that those of adolescent girls of 13 years showed a perceptible decrease in average height and weight from last year's figures (see pages 24-25). On the other hand there was rather a marked increase in the average height and weight of 13 year old and 16 year old boys.

DEFECTS AND DISEASES.

Clothing—Children examined on the whole are sensibly and suitably clad, with, in many cases, evidence of special care in this direction by the mothers. There was a decrease in the number of children with unsatisfactory clothing.

Footgear—(Which was a troublesome problem in years of

"coupons") shows a definite improvement over last year's figures.

Vermin—Generally speaking the verminous conditions of head are not so satisfactory in certain areas but here again the trend is towards improvement.

SKIN DISEASES.

There were again no cases of *Tinea Capitis* brought to our notice but 13 cases of Ringworm of the body were treated. The number of cases of *Impetigo Contagiosa* remains fairly constant at 89 cases. There was a further satisfactory decline in the number of cases of scabies seen—nor were the individual cases so severe as these seen in previous years in most cases.

DEFECTIVE NUTRITION.

A minor degree of defect in nutrition was detected in 497 children. This represents a definite increase over last year's figures in this connection. But bad nutrition was encountered in only six cases.

DISEASES OF CHEST.

Bronchial catarrh seemed to be more prevalent throughout the past session than in the previous year with 304 cases against 242 cases previously. Number of cases suspected of having pulmonary tuberculosis was 18. These were sent for further investigation. Mass Radiography of boys and girls over 13 years in the Clydebank area was carried out by the Western Regional Hospital Board Mass Radiography Service and results which are shown on page 27 reveals an exceptionally low tubercle rate (0.9 per 1000).

DIPHTHERIA IMMUNISATION.

Of the 6993 cases examined at routine inspections 5513 were known to have been immunised prior to the examination. This was 73.6 per cent. of the total compared with 67.0 per cent. last session. The parents of any entrants found not to be immunised are offered the chance of having the child done, and in many cases advantage is taken of this offer.

The number of children immunised by the School Medical

Officers (including the pre-school children of the County and excepting the pre-school children of the Burghs of Dumbarton and Clydebank) was as follows:—

No. of children who completed a full course of immunisation during the period—1733.

No. of maintenance inoculations given during the period—2280.

We would like to draw attention to the valuable work done by the Nursing Staff at the Clinics. In this session a total of 9399 visits by children were made to the nurses' clinics. Home visits by the Nursing Staff were 339, while clinic and school visits totalled 574.

The work of the Orthopædic Staff shows a marked increase during the past session. The new clinic at Bearsden is much appreciated and well attended.

SPECIAL SCHOOLS AND CLASSES.

Milton Special School (including Annexe at College Street, Dumbarton, for physically handicapped children).

This school caters for mentally handicapped and physically handicapped pupils from the Western portion of the County. There are four classes at Milton School for mentally handicapped pupils with 92 pupils on the roll, and two classes for physically handicapped pupils in the College Street Annexe of the school with 24 on the roll.

SPECIAL CLASSES.

- (a) For mentally handicapped children—Lairdsland School, Kirkintilloch, with 16 on the roll (one class).
- (b) For conservation of Vision—Whitecrook School, Clydebank, with 9 on the roll (one class). (*Note*—This class was accommodated at Elgin Street School, Clydebank, from the beginning of Session 1948-49 until Easter 1949); Hartfield School, Dumbarton, with 14 on the roll (one class); Lairdsland School, Kirkintilloch, with 6 on the roll (one class). Total number of pupils—29.

- (c) For deaf-mute children—Hartfield School, Dumbarton, with 4 on the roll (one class). Deaf Mute children from the parishes of Cumbernauld and Kirkintilloch are by arrangement with the Glasgow Education Committee, taught in the Glasgow Schools for Deaf-Mutes.

The following are the totals for the County :—

Mental Defectives,	-	-	-	108
Physical Defectives,	-	-	-	24
Deaf-Mutes,	-	-	-	4
Conservation of Vision,	-	-	-	29
Total,	-	-	-	165

- | | |
|--|-----|
| 1. Number of Physically Handicapped children in Institutions paid for by the County Council, | 2 |
| 2. Number of Mentally Handicapped children in Institutions paid for by the County Council, | Nil |
| 3. Number of Blind Persons in training under the Blind Persons Act, 1920 (cost of training borne by the County Council and maintenance by the Local Authority, | Nil |
| <hr/> | |
| Total, | 2 |
| <hr/> | |

Medical Inspection of Special Schools.

During the present session 96 children—44 Boys and 52 Girls—were examined. Of these 71 were mentally defective and 25 physically defective. Of these children 12 were classed as having slightly defective nutrition, 16 had tonsils and adenoids removed, none of the children had more than 5 teeth decayed, while 13 had bad eyesight.

Special Appliances Supplied to Pupils.

With the advent of the National Health Service (Scotland) Act, 1947, the provision of Special Appliances became the

responsibility of the Regional Hospital Board, and consequently no appliances have been supplied by this local authority during the past year.

ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE IN SCHOOLS.

Accommodation in Schools and Playgrounds.

There exists an acute shortage of suitable premises for Physical Training in both Secondary and Primary Schools in the County. In Secondary Schools the raising of the School-leaving age has overtaxed existing accommodation, and in some instances where a school hall is available its use for physical training purposes is restricted because of meals being served there.

In the more modern type of School facilities are adequate and by conversion of classrooms, where possible by renting of outside Halls, and the part use of Dining Huts, an endeavour has been made to meet the minimum requirements of the older type of school with no central hall.

Playground space is in most instances fairly adequate and the surfacing with concrete or asphalt of extra areas is found advantageous. This enables pupils to take part in minor team games on a suitably marked area.

Training out of doors is encouraged and recommended whenever weather conditions permit.

- (a) Children are encouraged to wear the minimum amount of clothing when taking part in the physical training lesson or games but, with the exception of three, Primary Schools have no separate room for changing of shoes and clothing. This is done either in the classroom or on entering the Hall. In the Secondary Schools dressing accommodation is provided and adjoins the Gymnasium. At present Lenzie Academy, Miller Street School, and Dalmuir School lack this provision.

- (b) In only three Primary Schools are there sprays avail-

able, while seven Secondary Schools are equipped with sprays, and advantage of these is taken whenever possible.

- (c) Facilities are provided in all schools for washing of hands, &c., and towels are provided.

Swimming Baths.

The County as a whole is very poorly served with Swimming Baths. No school swimming ponds exist and public baths are only available at the following centres:

Helensburgh Pond — (Seasonal)

Dumbarton Baths

Clydebank Baths (2) —

For Helensburgh pupils the pond is available during the summer term, while Secondary School pupils in the Alexandria Area are conveyed to Dumbarton Baths. Primary and Secondary pupils in Clydebank attend Clydebank Baths. Secondary School pupils in Milngavie and Bearsden are conveyed to Clydebank Baths, and both Primary and Secondary School pupils in Dumbarton attend Dumbarton Baths. Unfortunately it has been found impossible to obtain facilities for swimming in the Kirkintilloch area.

Playing Fields.

The necessity for more and better School Playing Fields is fully recognised and efforts are being made to meet the requirements of Schools in this respect. At present all the large Secondary Schools suffer from a lack of a really satisfactory field. Where fields have been provided they are usually at some distance from the school, and are unfit for use during the winter months owing to poor drainage and lack of regular care and attention. The general scarcity of fields too, means that the few in usable condition in each area are played on too often. The development of grounds secured for new school sites and playing fields is contemplated with a view to easing the existing shortage.

Summer Camps.

Successful Camps were held at Helensburgh and Kilcreggan, school premises being used in both areas. Numbers attending were:—

Kilcreggan : 98 boys.

Helensburgh : 72 girls, 23 boys. —

Practical Instruction in Personal and Communal Hygiene.

In the Primary Schools the instruction given is in accordance with the scheme approved by the Education Committee. In addition instruction is made an incidental part of the physical training lesson. As far as the younger classes are concerned instruction is in the main of a practical nature.

In the Secondary School, instruction in Hygiene is an integral part of the Physical Education Scheme and is both theoretical and practical in character. It is made an incidental part of the physical training lesson and in addition the scheme of instruction in Hygiene outlined in the County "Scheme of Physical Education" is given during the course of the session.

Exemption from Physical Exercises and/or Baths.

Children for whom exemption from Physical Exercises, and/or Baths was asked were examined by the School Medical Officers and exemption was granted if sufficient reason was found. In addition to these, a number of children who were found by the School Medical Officers in the course of routine examinations to be suffering from such physical defects as demanded exemption from drill and/or baths were exempted.

The reasons for exemption were as follows:—

Heart Conditions, - - - - -	9
Recent Illness or Operation, - - - - -	5
Other Conditions, - - - - -	11

MILK IN SCHOOLS.

I am indebted to the Director of Education for the following details in connection with the Milk in Schools Scheme. The average number of pupils taking milk during the session 1948-49 was 19,870 (approximately 82 per cent. of the roll).

EMPLOYMENT OF CHILDREN (SCOTLAND) ACT, 1932.

Under the Children and Young Persons Act, 1937, Dunbarton County Council made certain bye-laws relating to the employment of children within the County which have to a great extent curtailed the employment of children. Consequently no applications were received for permits under the above Act.

ADMISSION OF CHILDREN TO APPROVED SCHOOLS.

During the year 54 children were examined with special regard to their suitability, physically and mentally, for admission to Approved Schools. Of these 21 were committed by the Sheriff to institutions.

X-RAY TREATMENT OF RINGWORM.

There were no cases of ringworm of the scalp diagnosed during the present session.

ULTRA VIOLET LIGHT TREATMENT.

The following are the details of the work done at the clinics in the county :—

No. of patients treated,	-	-	222
Total number attendances,	-	-	3996
Average number treatments,	-	-	18

Cause of Reference	No of patients	Condition	
		Improved	unchanged
Adenitis, - - - -	11	9	2
Asthma, - - - -	4	3	1
Bronchitis, &c., - - -	42	38	4
Debility, - - - -	120	111	9
Anæmia, - - - -	3	2	1
Skin Conditions, - - -	11	9	2
Glands, - - - -	10	8	2
Malnutrition, - - - -	9	9	—
Others, - - - -	12	11	1
Totals, - - - -	222	200	22

PREVIOUS ILLNESSES.

	No. of Routine Cases Exa- mined	Measles		Whooping Cough		Chicken Pox		Mumps		Scarlet Fever		Diphtheria		Infantile Paralysis		Rheuma- tism		Fits		Others	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Entrants ...	2561	1846	72.1	1131	44.1	624	20.4	520	20.3	144	5.5	36	1.4	-	-	1	.03	1	.03	752	21.5
Second Age- Group	2154	1856	86.1	1300	64.9	936	43.4	772	31.1	299	13.8	107	4.9	-	-	17	0.7	1	.04	743	34.0
Third Age- Group	2066	1827	88.4	1309	63.3	1025	49.6	1066	51.1	325	15.7	185	8.9	-	-	29	1.4	-	-	800	38.7
Fourth Age- Group	212	204	96.2	146	68.9	141	66.5	119	56.2	38	18.0	14	6.6	-	-	8	3.5	-	-	100	47.1
TOTAL	6993	5733	81.9	3886	55.5	2726	38.9	2477	35.4	806	11.5	342	4.9	-	-	55	0.7	2	.02	2395	34.2

The following table summarises on an area basis the number of children showing evidence of Verminous conditions of the head, or body, or both:—

VERMINOUS CONDITIONS.

School Management Area.	Number of Routine Cases Examined.	Number Showing Evidence of Vermin.	Percentage.
Cumbernauld ...	206	5	2.4
Kirkintilloch ...	1194	20	1.6
New Kilpatrick ...	622	1	0.1
Old Kilpatrick ...	2233	34	1.5
Dumbarton ...	1259	111	8.8
Vale of Leven ...	970	39	4.1
Helensburgh ...	509	16	3.1
Total ...	6993	226	3.2

MASS RADIOGRAPHY SURVEY OF CLYDEBANK SCHOOL CHILDREN.

RESULTS.

	Male	Female	Total
Miniature film examinations, - - -	546	523	1069
Large film examinations, - - -	32	41	73
Clinical examinations, - - -	9	13	22
Active pulmonary tuberculosis, - - -	—	1	1
? Active pulmonary tuberculosis, - - -	—	1	1
Inactive pulmonary tuberculosis, - - -	1	—	1
? Pulmonary tuberculosis, - - -	—	1	1
Healed primary tuberculosis, - - -	7	9	16
Pleural abnormality, - - -	2	5	7
Pulmonary fibrosis, - - -	1	—	1
Root involvement, - - -	1	—	1
Developmental, - - -	1	3	4
*Cardiovascular abnormalities, - - -	9	8	17
Acquired cardiac disease, - - -	—	4	4

ACCEPTANCE RATE.

	Nominal Roll Total	Male	Examined Female	Total	Response
Clydebank High School, -	750	292	299	591	78.6
Dalmuir Secondary School, -	150	72	70	142	94.6
Our Holy Redeemer's School, -	580	182	154	336	58.9
Total, - - -	1480	546	523	1069	72.0

RESULTS OF REMOVAL OF TONSILS AND/OR ADENOIDS.

The following table shows the results of special inquiry into the conditions following the removal of tonsils and/or adenoids. The children are examined one year after operation. The figures shown are the totals since session 1932-33. See Annual Report, 1932-33 pp. 42-43.

As it has been suggested that the removal of tonsils and/or adenoids results in little permanent benefit, an examination was made of pupils who had been operated on a considerable number of years before. During the present session there were 310 children re-examined at the age of fourteen or sixteen years who had had tonsils and adenoids, or tonsils only, or adenoids only, removed previously. Of these 293 were found to be absolutely satisfactory, the remaining 17 showed evidence of rheumatism or chorea, asthma, bronchial trouble, deafness or otorrhoea.

The following tables show details of this investigation:—

TABLE 11 - SYSTEMATIC EXAMINATIONS.
TOTAL EXAMINED AT ALL AGES—6993.

Total Examined in each Age-Group By Sexes	Entrants				Second Age-Group				Third Age-Group				Fourth Age-Group				All Ages				Non-Return time 2251
	Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls		
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
No. showing Defects																					
Nature of Defect:																					
1. Clothing Unsatisfactory ...	4	0.3	—	—	7	0.6	5	0.4	3	0.2	3	0.2	—	—	—	—	14	0.3	8	0.2	—
2. Footgear Unsatisfactory ...	4	0.3	—	—	5	0.4	2	0.1	5	0.4	1	0.1	—	—	—	—	14	0.3	3	0.1	1
3. Underclothing ...	10	0.7	56	4.4	9	0.8	76	7.2	9	0.8	92	8.8	—	—	2	1.8	28	0.7	226	6.5	11
(a) Head ...	8	0.6	10	0.8	9	0.8	10	0.9	13	1.2	15	1.4	1	0.9	—	—	31	0.8	35	1.0	4
(b) Body ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4. Skin—(a) Head:	8	0.6	7	0.5	6	0.6	2	0.1	3	0.2	2	0.1	—	—	—	—	17	0.4	11	0.3	59
Impetigo ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	0.1	4	0.1	1
(b) Body:	2	0.1	1	0.1	5	0.4	1	0.1	—	—	—	—	—	—	—	—	7	0.1	2	0.1	4
Ringworm ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Impetigo ...	4	0.3	1	0.1	3	0.2	3	0.2	5	0.4	4	0.3	—	—	—	—	12	0.3	8	0.2	44
Scabies ...	11	0.8	14	1.1	13	1.1	10	0.9	21	2.0	20	1.9	—	—	—	—	45	1.2	44	1.2	193
5. Defects of Vision:																					
(a) Distance Vision:	77	5.8	83	6.6	76	6.8	70	6.7	50	4.9	60	5.7	1	0.9	—	—	204	5.7	214	6.1	79
(b) Near Vision:	1	0.1	1	0.1	1	0.1	—	—	—	—	—	—	—	—	—	—	3	0.1	1	0.1	2
(c) Bad ... Teeth	38	2.8	38	3.0	18	1.6	13	1.2	16	1.5	23	2.2	—	—	—	—	72	2.0	75	2.1	17
6. Mouth and Teeth:																					
(a) Mouth:	15	1.1	10	0.8	10	0.9	11	1.0	4	0.3	6	0.5	1	0.9	2	1.8	30	0.8	29	0.8	24
(b) Teeth:	37	2.7	37	2.9	23	2.0	22	2.1	14	1.3	14	1.3	—	—	3	2.7	111	3.1	85	2.4	33
7. Nasopharynx—																					
(a) Nose:	15	1.1	10	0.8	10	0.9	11	1.0	4	0.3	6	0.5	1	0.9	2	1.8	30	0.8	29	0.8	24
1. Catarrh ...	57	4.3	45	3.5	31	2.7	23	2.2	22	2.1	18	1.7	12	1.1	—	—	171	4.7	165	4.6	43
2. Tonsils Req. Op.	30	2.3	27	2.1	23	2.0	4	0.3	5	0.4	12	1.1	1	0.9	1	0.9	30	0.8	21	0.6	13
(b) Throat:	13	1.0	4	0.3	4	0.3	5	0.4	12	1.1	11	1.0	—	—	—	—	30	0.8	21	0.6	13
(c) Other Conditions:	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Eye Conditions:																					
(a) Diseases:	79	6.0	90	7.8	63	5.5	61	5.8	42	4.1	44	4.2	4	3.9	1	0.9	188	5.3	196	5.6	8
1. Tonsils Req. Op.	229	16.8	211	16.7	117	10.5	100	9.5	21	2.0	40	3.8	—	—	4	3.6	367	10.3	355	10.2	330
(b) Requiring Op.	18	1.3	14	1.1	6	0.5	8	0.7	21	2.1	16	1.5	1	0.9	1	0.9	46	1.3	39	1.1	35
(c) External Conditions:	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Ear Conditions:																					
(a) Diseases:	8	0.6	5	0.4	10	0.9	18	1.7	18	1.7	12	1.1	—	—	—	—	36	1.0	35	1.0	68
(b) Defective Hearing:	2	0.1	2	0.1	4	0.3	4	0.3	3	0.2	3	0.2	—	—	—	—	5	0.1	7	0.2	4
Grade I ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Grade II ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Grade III ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Defective Speech:	7	0.5	2	0.1	6	0.5	—	—	4	0.3	2	0.1	—	—	—	—	17	0.4	4	0.1	9
Def. Articulation ...	2	0.1	—	—	4	0.3	—	—	2	0.1	1	0.1	—	—	—	—	8	0.2	1	0.1	4
Stammering ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. Mental and Nervous Conditions:																					
(a) Backward ...	—	—	—	—	6	0.5	3	0.2	2	0.1	2	0.1	—	—	—	—	8	0.2	5	0.1	6
(b) Dull (Intrins.) ...	1	0.1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	0.1	—	—	—
(c) Mentally Def. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Educable Def. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(e) Ineducable Def. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(f) Highly Nervous or Unstable ...	2	0.1	0.1	0.1	2	0.1	—	—	—	—	—	—	—	—	—	—	4	0.1	2	0.1	—
(g) Difficult in Behaviors ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Heart Conditions:																					
(a) Organic Heart Disease:	2	0.1	9	0.7	1	0.1	5	0.4	1	0.1	3	0.2	—	—	—	—	4	0.1	17	0.5	4
1. Congenital ...	5	0.4	10	0.8	6	0.5	2	0.1	10	0.9	15	1.4	—	—	—	—	18	0.5	27	0.7	9
2. Acquired ...	—	—	9	0.7	1	0.1	4	0.3	—	—	—	—	—	—	—	—	6	0.1	13	0.3	—
13. Lung Conditions:																					
(a) Catarrh ...	102	7.8	50	3.9	26	2.3	28	2.6	22	2.1	7	0.6	1	0.9	3	2.7	151	4.2	98	2.5	65
(b) Ch. Bronchitis ...	16	1.2	7	0.5	9	0.8	2	0.1	5	0.4	4	0.3	—	—	—	—	30	0.8	13	0.3	81
(c) Suspected ...	2	0.1	2	0.1	2	0.1	1	0.1	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Other Diseases:	4	0.3	4	0.3	8	0.7	1	0.1	5	0.4	4	0.3	2	1.9	—	—	5	0.1	3	0.1	10
14. Deformities:																					
(a) Congenital ...	5	0.4	2	0.1	7	0.6	—	—	10	0.9	5	0.4	3	2.9	—	—	22	0.6	10	0.2	3
(b) Acq. (Infantile ...)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(c) Acq. (Probably ...)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Acq. (Other ...)	4	0.3	2	0.1	—	—	—	—	—	—	—	—	—	—	—	—	4	0.1	2	0.1	—
15. Infectious Diseases:	35	2.6	8	0.6	33	2.9	24	2.3	21	2.0	21	2.0	1	0.9	1	0.9	90	2.2	54	1.5	25
16. Other Diseases & Defects:	40	3.0	37	2.9	37	3.3	37	3.5	28	2.7	20	1.9	1	0.9	2	1.8	106	2.9	96	2.7	504

RESULTS OF REMOVAL OF TONSILS AND/OR ADENOIDS.

Number of years after Operation.	Number of Cases	Satisfactory		Unsatisfactory		Reasons for Classification as Unsatisfactory.						
		No.	%	No.	%	Rheuma- tism	General Health Un- satisfactory	Asthma	Bronchial Conditions	Nasal Catarrh	Deafness	Otorrhoea
10 or more	32	29	90.6	3	9.4	—	—	—	1	1	1	1
9	15	14	93.3	1	6.7	—	—	—	—	1	—	—
8	53	47	88.7	6	11.3	—	—	2	2	1	—	—
7	48	47	97.9	1	2.1	—	—	—	1	—	—	—
6	58	55	94.8	3	5.2	1	—	—	1	1	—	—
5 or less	104	101	97.1	3	2.9	—	—	2	1	—	—	—
	310	293	94.5	17	5.4	1	—	4	6	4	1	1

THROAT, NOSE AND EAR CLINICS.

	CLYDEBANK.			KIRKINTILLOCH.			DUMBARTON.			TOTAL.		
	School	Pre-School	Total	School	Pre-School	Total	School	Pre-School	Total	School	Pre-School	Total
Number of Children Examined ...	401	22	423	124	36	160	597	83	680	1121	141	1263
Number of Children Operated On ...	249	33	282	106	24	130	299	74	373	654	131	785
Attendances with Ambulance ...	249	33	282	106	24	130	299	74	373	654	131	785
Home Visits for After-Care ...	753	69	822	242	48	290	647	160	807	1642	277	1919
Nature of Operations :—												
Excision of Tonsils and Adenoids ...	245	32	277	105	23	129	297	73	370	648	128	776
Excision of Tonsils only ...	—	—	—	—	—	—	—	—	—	—	—	—
Excision of Adenoids only ...	4	1	5	—	1	1	2	1	3	6	3	9
Others ...	—	—	—	—	—	—	—	—	—	—	—	—
Causation :—												
Discharging Ears ...	43	1	44	2	—	2	55	9	64	100	10	110
Tonsils Much Enlarged ...	276	12	288	66	6	72	227	47	274	569	65	634
Deafness ...	27	2	29	2	2	4	22	2	24	51	6	57
Obstructed Breathing and Deafness	31	—	31	2	—	2	38	1	39	71	1	72
Obstructed Breathing ...	170	6	176	14	9	23	278	32	310	462	47	509
Rhinitis ...	200	6	206	—	—	—	4	—	4	204	6	210
Tonsillitis ...	207	6	213	—	—	—	150	25	175	357	31	388
Enlarged Glands ...	215	6	221	1	—	1	224	47	271	440	53	493
Bronchitis ...	14	—	14	—	—	—	20	3	23	34	3	37
Various ...	84	—	84	19	7	26	98	27	125	201	34	235
Results :—												
Progress Definite and Rapid ...	—	—	—	101	24	125	298	74	372	399	98	497
Progress Retarded ...	—	—	—	5	—	5	—	—	—	5	—	5
Still on Books awaiting Treatment	332	25	357	60	18	78	267	39	306	659	82	741
Sent to Hospital ...	—	—	—	—	—	—	—	—	—	—	—	—
Died ...	—	—	—	—	—	—	1	—	1	—	1	1



OPHTHALMIC TREATMENT OF SCHOOL CHILDREN (TABLE A).

[illegible]

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ORTHOPAEDIC TREATMENT.

Deformity or Disease	Clydebank Clinic			Dumbarton Clinic			Kirkintilloch Clinic			Vale of Leven Clinic		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Kyphosis	5	2	7	2	3	5	1	2	3	3	2	5
Lordosis	1	1	2	—	1	1	6	7	13	—	—	—
Kypho- Lordosis	3	6	9	1	—	1	5	5	10	—	2	2
Scoliosis	—	—	—	—	—	—	1	1	2	1	—	1
Chest	2	—	2	4	2	6	—	—	—	1	—	1
Foot	8	11	19	6	3	9	16	19	35	3	8	11
Infantile Paralysis	—	—	—	2	1	3	1	—	1	2	—	2
Asthma	4	—	4	2	1	3	1	—	1	—	1	1
Mouth	34	13	47	17	18	35	12	8	20	13	14	27
Breathing	1	4	5	—	—	—	2	4	6	—	1	1
Rheuma- tism	3	1	4	3	1	4	3	1	4	2	2	4
Others	3	1	4	3	1	4	3	1	4	2	2	4
Total	61	38	99	37	30	67	48	47	95	25	30	55

ORTHOPAEDIC TREATMENT—Continued.

Deformity or Disease	Helensburgh Clinic			Cardross Park Home			Bearsden			Total		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Kyphosis	—	—	—	4	—	4	1	2	3	16	11	27
Lordosis	—	1	1	3	3	6	—	—	—	10	13	23
Kypho- Lordosis	5	4	9	2	—	2	1	—	1	17	17	34
Scoliosis	—	—	—	—	—	—	—	1	1	2	2	4
Chest	1	—	1	1	—	1	1	—	1	10	2	12
Foot	1	1	2	1	1	2	17	—	17	52	43	95
Infantile Paralysis	—	1	1	—	—	—	—	—	—	5	2	7
Asthma	—	—	—	—	—	—	2	5	7	9	7	16
Mouth	7	13	20	—	3	3	6	2	8	89	71	160
Breathing	—	—	—	1	—	1	—	—	—	4	9	13
Rheuma- tism	1	3	4	6	9	15	5	2	7	23	19	42
Others	1	3	4	6	9	15	5	2	7	23	19	42
Total	15	23	38	18	16	34	33	12	45	237	196	433

Orthopaedic Treatment was started in Bearsden Clinic on 5th November, 1948.

ORTHOPEADIC TREATMENT—Continued.

Response to Treatment.

Clinic.	Good.	Fair.	Unsatisfactory.
Clydebank	60	19	18
Dumbarton	36	20	11
Kirkintilloch	54	36	7
Vale of Leven	27	13	15
Helensburgh	22	10	6
Cardross Park Home ...	17	14	3
Bearsden	22	17	6
Total	238	129	66

NUMBER OF TREATMENTS GIVEN.

Clydebank—2902. Dumbarton (with Vale of Leven)—2389. Helensburgh—763. Cardross Park Home—740. Kirkintilloch (Re-opened 12.10.48)—1883. Bearsden (commenced 5.11.48)—980. Total—9657.

1941 AGE GROUP - EYE EXAMINATION.

Slight Visual Defect : 6·9—6·12.

Marked Visual Defect : 6·18 or worse.

(Snellen's Test at 6 Metres.)

	BOYS		GIRLS		TOTAL	
	No.	%	No.	%	No.	%
Total Number of Children Examined	1088	—	1003	—	2091	—
Normal Vision	940	86·4	850	84·7	1790	85·6
Slight Defect (Both Eyes)	52	4·7	69	6·8	121	5·8
Marked Defect (Both Eyes)	26	2·4	32	3·1	58	2·3
Slight Defect (One Eye)	36	3·2	33	3·2	69	3·3
Marked Defect (One Eye)	23	2·1	17	1·6	40	1·9
Unreliable Results	11	1·0	2	0·2	13	0·6
Number of Children found wearing Glasses	10	0·9	13	1·2	23	1·1
Strabismus	12	1·1	10	0·9	22	1·0
Blepharitis	—	—	—	—	—	—
Conjunctivitis	—	—	—	—	—	—
Corneal Ulcers or Opacities	—	—	—	—	—	—
Others	3	0·3	—	—	3	0·1

Note—Where a child has defective vision of slight defect and marked defect together, the defect has been classified according to the better eye grouping.

1941 AGE GROUP - EAR EXAMINATION.

	Total Number of Children Examined.	Normal Hearing.		Defective Hearing.				Otorrhoea	Otitis Media.	Others.
				Grade II.		Grade III.				
		No.	%	No.	%	No.	%			
Boys	1088	1032	94·8	54	4·9	2	0·1	2	—	4
Girls	1003	945	94·2	57	5·6	1	0·1	—	—	1
Total	2091	1977	94·6	111	5·3	3	0·1	2	—	5

Grade II. Children who can hear ordinary conversation voice between 20 feet and 2 feet.

Grade III. Children who can hear ordinary conversation voice at not more than 2 feet, if at all.

TREATMENT OF MINOR AILMENTS.

District	Nurse	No. of Children dealt with	Total No. of Attendances	No. of visits to parents	No. of visits to Clinics or Schools	Eye Cases	Throat and Nose Cases	Ear Cases	Skin Cases	Others	Attendances at Eye, Operation, Dental and other Clinics
Cumbernauld	C. Dempsey ...	—	—	—	—	—	—	—	—	—	—
Kirkintilloch	C. M. Jeffrey ... M. J. Miller ...	303 —	1792 —	35 41	83 50	1 —	— —	46 —	236 —	20 —	103 70
Kirkintilloch (Twechar & Croy)	A. Gee ...	259	2238	42	69	1	—	44	247	459	80
New Kilpatrick	C. King ... K. S. Stevenson	202 10	460 26	25 —	40 —	17 1	3 1	14 5	259 3	74 —	51 61
Old Kilpatrick (Duntocher)	C. T. Gavin ...	497	742	65	37	24	2	56	641	19	130
Old Kilpatrick (Gavinburn and Milton) ...	M. Callaghan ...	—	—	—	—	—	—	—	—	—	—
Clydebank (Clydebank High, Elgin St. O.H.R.)	J. P. Scott ...	244	721	82	41	13	—	76	303	33	161
Clydebank (Dalmauir, Janetia Street St. Stephen's)	M. McDonald ...	440	753	25	42	5	—	59	156	295	144
Dumbarton (all Schools except West Bridgend and Notre Dame, St. Patrick's)	M. Gilmour ...	524	789	8	37	—	—	55	540	6	129
Dumbarton (West Bridgend Notre Dame, St. Patrick's)	M. Callaghan ...	—	—	—	—	—	—	—	—	—	—
Vale of Leven (Academy, Main St., Levenvale, St. Mary's, Luss, Muirlands, Ardoch Bridge, Croftamie)	A. Taylor ... M. Callander ...	42 —	79 —	— —	43 —	1 —	1 —	9 —	15 —	20 —	152 42
Vale of Leven (Bonhill, Jamestown)	J. Stirling ...	61	205	—	60	1	1	42	17	34	71
Renton and Cardross ...	E. M. Rankin ...	778	1295	16	57	7	—	13	2	913	21
Helensburgh	J. McHaffie ... A. S. Sandilands	117 —	299 —	— —	15 —	— —	— —	3 —	36 —	78 —	28 31
TOTALS		3467	9399	339	574	71	8	422	2455	1951	1427

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REPORT BY SCHOOL NURSES.

District	Nurse	No. of children examined	Total No. of Inspections	No. of visits to parents and Schools	Vermin or Nits on Head	Vermin or Nits on Body	Vermin Suspected	Unsatisfactory Clothing	Unsatisfactory Footgear	Minor Ailments
Cumbernauld	C. Dempsey	113	391	46	23	—	—	6	6	5
Kirkintilloch	C. M. Jeffrey M. G. Miller	58 69	322 477	33 20	36 58	— —	22 11	— —	— —	10 5
Kirkintilloch (Croy & Twechar)	A. Gee	88	762	97	78	4	6	11	5	1
New Kilpatrick	C. King K. S. Stevenson	327 289	468 458	25 25	20 37	— —	— —	1 —	— —	10 12
Old Kilpatrick (Duntocher)	C. T. Gavin	287	595	60	61	—	—	3	1	15
Old Kilpatrick (Gavinburn and Milton)	M. Callaghan	280	320	22	32	—	4	3	4	—
Clydebank (Dalmuir, Janetta St., St. Stephens)	M. M. MacDonald	262	1449	131	224	2	14	36	—	8
Dumbarton, (all Schools except West Bridgend, Notre Dame, St. Patrick's)	M. Gilmour	219	885	48	211	—	1	3	2	5
Dumbarton (West Bridgend, Notre Dame and St. Patrick's)	M. Callaghan	307	1100	102	225	10	21	30	21	—
Vale of Leven (Academy, Main Street, Levenvale St. Mary's, Luss, Muirlands, Ardoch Br., Croftamie.)	A. Taylor M. Callander	472 239	2518 239	106 7	238 34	1 —	— —	4 3	29 —	25 1
Vale of Leven (Bonhill and James-town)	J. Stirling	356	2079	55	95	—	—	12	—	12
Renton and Cardross	E. M. Rankin	778	1295	33	74	—	—	18	9	15
Helensburgh	J. McHaffie A. Sandilands	351 629	737 748	16 24	81 53	— —	— —	10 6	— —	20 15
TOTALS		5369	15710	951	1711	19	96	202	71	161

SPEECH THERAPY REPORT.

STAFF.

Principal :—Maud T. Wohl, M.A., L.C.S.T.

Assistants :—R. Elizabeth Stark, L.C.S.T., L.G.S.M.,
L.R.A.M.(Eloc.).

Betsy M'Orist, L.C.S.T.

Nancy R. Main, L.C.S.T.

Irene A. S. Wyatt, L.C.S.T.

Area	Centres	Schools attending	Days per week
Helensburgh	Clyde Street	Clyde St. School	1½
	Clinic	Hermitage School	
		St. Joseph's School	
	Cardross Park	Cardross School	
Vale of Leven	Home	Cardross Park Home	3½
	Bank St. Clinic	St. Mary's School	
		Vale of Leven Academy	
		Main Street—Jamestown	
	Levendale Clinic	Levenvale School	
	Bonhill Clinic	Bonhill School	
	Renton Clinic	St. Martin's School	
		Renton Public School	
Kirkintilloch	Kirkintilloch Clinic	Lenzie Academy	3
		Lairdsland School	
		Townhead School	
	St. Ninian's Clinic	St. Ninian's School	
	Twechar Clinic	Twechar School	
		Holy Cross School, Croy (some of the cases)	

Dumbarton	W. Bridgend Clinic	St. Patrick's High Notre Dame W. Bridgend School	
	Hartfield Clinic	Hartfield School Knoxland School Dumbarton Academy	
	College Street	College St. School	3
Old Kilpatrick Area	Whitecrook Clinic	Elgin St. School Whitecrook School O. H. R. School	
	Miller St. Clinic	Whitecrook School (Infant Classes) O.H.R. (N.Q. pupils) Clydebank High School (N.Q. pupils)	
	St. Stephen's Clinic (A and B)	St. Stephen's School Dalmuir School Gavinburn School	
	Clydebank High School Clinic	Clydebank High School Radnor Park School	5½
	Milton Clinic	Milton Public School Milton Special School	
	Duntocher Clinic	Duntocher Public School St. Mary's School	
New Kilpatrick Area	Hillfoot Clinic	Bearsden Academy Killermont School	

	Milngavie Clinic	Milngavie Public School	
		St. Joseph R. C.	1½
Cumbernauld	Cumbernauld Clinic	Cumbernauld J. S. School	
		Southern District Public School	
		Condorrat School	
		Holy Cross School	1
		(some of the cases)	

PROCEDURE.

See Annual Report for 1947-48, page 55.

STATISTICS SUMMARY, 1948-49

CLINIC.	No. on Roll 30.6.48.	Left.	Discharged		Transferred.		Admitted.	No. on Roll 30.6.49.
			N.C.	Cured.	Out	In		
Bank Street ...	42	1	0	21	18	5	21	28
Bonhill ...	0	0	0	2	1	7	7	11
Cardross ...	0	1	0	4	0	3	7	5
Clydebank High	26	3	3	9	2	1	7	17
College Street...	4	0	0	2	0	0	2	4
Cumbernauld ...	19	0	3	7	3	0	9	15
Duntocher ...	11	1	1	6	0	0	5	8
Hartfield ...	49	4	6	23	3	3	13	29
Helensburgh ...	39	2	3	17	4	1	6	20
Hillfoot... ..	0	0	1	3	1	2	11	8
Kirkintilloch ...	31	3	2	10	9	0	16	23
Levenvale ...	0	1	0	3	2	11	4	9
Miller Street ...	0	0	0	1	4	7	12	14
Milton	13	1	1	1	0	2	6	8
Renton	31	4	2	9	0	0	5	21
St. Ninian's ...	0	1	0	1	0	6	5	9
St. Ninian's ...	37	5	0	9	11	11	7	30
Twechar	18	1	0	6	0	4	9	24
West Bridgend	27	4	4	2	0	0	5	22
Whitecrook ...	41	1	1	24	11	8	22	34
Milngavie	25	4	0	9	2	0	13	23
Total	413	37	27	169	71	71	192	372

Area.	Numbers Examined	Stuttering	Voice Defect.	Cleft Palate.	Defective Articulation.	Totals.	%
Helensburgh ...	1136	16	29	1	85	131	11.5
Vale of Leven ...	2795	33	77	5	199	314	11.2
Dumbarton ...	3983	45	133	0	274	452	11.3
Old Kilpatrick ...	6589	73	213	3	576	865	13.1
New Kilpatrick...	1585	26	26	0	105	157	9.9
Kirkintilloch ...	3122	50	47	4	210	311	9.96
Cumbernauld ...	745	15	49	0	80	144	19.3
Special ...	145	8	3	1	26	38	20.2
Totals ...	20,101	266	577	17	1,555	2412	12.0

TABLE V.

DENTAL INSPECTION AND TREATMENT.

Number of children who were:—

(1) Inspected by Dental Officers:

Age	Systematic Examination	Special and Emergency Cases	Total
5	768	213	918
6	497	216	713
7	872	224	1,096
8	431	227	658
9	858	201	1,059
10	588	202	790
11	480	217	697
12	243	154	397
13	90	160	250
14	114	146	260
15	41	21	62
15†	16	15	31
	4,998	1,996	6,994

(2) Found to require treatment, - 3,981 1,991 5,972

(3) Number accepting treatment,	2,528	2,130	4,658
(4) Actually treated by the School Dental Officers, -	2,448	1,935	4,383
(5) Number of attendances made by children for treatment,	12,441	3,326	15,767
(6) Fillings—			
(a) Permanent Teeth, -	5,463	847	6,310
(b) Temporary Teeth, -	975	41	1,016
(7) Extractions—			
(a) Permanent Teeth, -	805	414	1,219
(b) Temporary Teeth, -	3,493	1,401	4,894
(8) Number of administrations of a General Anaesthetic for extractions, - - -	665	179	844
(9) Other operations—			
(a) Permanent Teeth, -	2,999	854	3,853
(b) Temporary Teeth, -	762	100	862
(10) Half-days devoted to Inspec- tions, - - - -	85	—	85
Half-days devoted to Treat- ments, - - - -	2,197	16	2,213
(11) Number of children treated under private arrange- ments, - - - -	No reliable information available		
(12) Number of attendances for Orthodontic Treatment, -	1,264	—	1,264
Completed Orthodontic Cases,	36	—	36

N.B.—With reference to (6) and (9) *Temporary Fillings* whether in permanent or temporary teeth are recorded as Other Operations.