

Contributors

Monmouthshire (Wales). County Council. School Health Service.

Publication/Creation

1927

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Monmouthshire County Council.

Education Committee.

ANNUAL REPORT

OF THE

MEDICAL INSPECTION DEPARTMENT

FOR THE YEAR 1927.

Monmouthshire Education Committee

MEDICAL INSPECTION.

Annual Report for 1927.

MR. CHAIRMAN, MY LORDS, LADIES AND GENTLEMEN,

I have pleasure in submitting for your consideration the Annual Report upon the Medical Inspection of School Children under your jurisdiction for the year ended December 31st, 1927.

The Report is arranged upon the lines suggested by the Medical Department of the Board of Education, in the circular letter, dated 15th November, 1927, and Schedule to Form 6M., dated 30th November, 1925. The statistical tables contained in the Appendix have been compiled in accordance with the Board's request in the latter circular.

ELEMENTARY SCHOOLS.

POPULATION, ETC.

Area of the County of Monmouth (excluding autonomous areas of Abertillery, Ebbw Vale and Newport):—331,696 acres.

Estimated population at 31st December, 1927 (excluding autonomous areas)—298,750.

Number of Schools 196, with 289 departments.

Number of children on registers of Elementary Schools at 31st December, 1927—53,910.

School accommodation, 31st December, 1927:—61,284.

1. MEDICAL INSPECTION STAFF.

The County Medical Officer is also School Medical Officer. There are ten Assistant Medical Officers, viz. :—

Henry W. Catto, M.B., B.S., D.P.H., County Bacteriologist and Pathologist, and Deputy County Medical Officer.

Mary Scott, M.B., Ch.B.
 Winifred Austin, B.A., M.B., B.S.
 Evan W. Griffith, M.k.C.S., L.R.C.P.
 Philomene R. Whitaker, M.B., B.S.
 Margaret M. Proudfoot, M.B., Ch.B., D.P.H.
 Gladys Russell, M.B., Ch.B., D.P.H.
 Mary H. M. Gordon, M.B., Ch.B., D.P.H.
 Annie Roberts, M.A., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.
 Herbert M. Ayres, M.R.C.S., L.R.C.P. (Resigned 31st July, 1927)
 Teresa M. O'Riordan, B.A., M.B., B.Ch., D.P.H. (commenced
 duties 26th July, 1927).

Three School Dentists are engaged, viz. :—

C. J. Hurry Riches, L.D.S., R.C.S. (part time).
 C. G. Saxon, L.D.S., R.C.S., (whole time).
 Ness Stewart Muir, L.D.S., R.C.S. (whole time).

The services of the following Specialists were again available during the year under review :—

A. Rocyn Jones, F.R.C.S.	Orthopædic treatment.
R. J. Coulter, M.B., F.R.C.S.	Special Refraction and Ophthalmic work.
J. A. Lee, M.B., F.R.C.S.	Nose and Throat treatment.
J. McGinn, F.R.C.S.	X-Ray treatment of Ringworm.

There are thirty-one health visitors devoting their time to School Medical Inspection work, in conjunction with Maternity and Child Welfare work, and one engaged jointly with the work of these two sections, and upon inquiry work for the County Mental Deficiency Committee. The Lecturer in Nursing under the Higher Education Committee also gives one or two days a week to School Medical Inspection work.

2. CO-ORDINATION.

(a) *Maternity and Child Welfare.*

The Co-ordination of the School Medical and the Maternity and Child Welfare services was inaugurated in the year 1920, and has been continued during the year under review. The Assistant Medical Officers undertake the supervision of Maternity and Child Welfare Centres in addition to the medical inspection and treatment of school children.

The thirty-one health visitors have been allotted districts, in which they reside, and they are responsible for home visiting of infants from birth to five years of age under the Maternity and Child Welfare Scheme, and of children of school age under the scheme of Medical Inspection. They also assist at Maternity and Child Welfare Centres and School Clinics.

Several of the Health Visitors also help at Tuberculosis Dispensaries.

(b) Nursery Schools.

No Nursery Schools have been established in the Administrative County.

(c) Care of Debilitated Children.

The majority of debilitated children under school age are supervised at the Maternity and Child Welfare Centres.

Debilitated children of school age come to the notice of the Medical Inspectors during school inspection and are examined at the schools, and when attendance at School is impossible, they are seen at their homes. Observation is kept upon the child from birth to the school leaving age.

THE SCHOOL MEDICAL SERVICE IN RELATION TO ELEMENTARY SCHOOLS.

3. SCHOOL HYGIENE.

The special survey of School buildings by the Assistant Medical Officers, commenced in 1925, was continued during the year 1927, when 49 school buildings were inspected. The following is a summary of the reports:—

Environment	Satisfactory	...	...	...	...	49
Type of Building.	The prevailing type of building is stone built with slate roof. There are also in use buildings of brick, slate roofed. In two or three districts, pending the erection of new premises, some of the departments are accommodated in galvanised iron buildings. The later designed schools are built on the corridor and central hall system, and are substantial, commodious, airy and well lighted.						
Sanitation.	Satisfactory	...	...	...	...	47
	Traps outside not draining properly	...	...	...	...	1
	Eight gullies choked	...	...	...	...	1
Sanitary Conveniences	Satisfactory	...	...	...	...	40
	Unsatisfactory conditions:—						
	Flushing inadequate	...	4	Not properly flushed	...	2	
	Defective flushing pipe	...	1	Floor of urinal needs	...		
	Cistern out of order	...	1	repairing	...	1	
Lighting.	Natural	...	...	Insufficient windows	...	1
				Some classrooms dark	...	1	
	Artificial	...	...	Satisfactory	...	46
				No artificial light	...	1	
				Gas not good	...	1	
				Lamps wrongly situated	...	1	
Water Supply.	Satisfactory	48	No water supply	...	1
Heating.	Satisfactory	46	Inadequate	...	3
Lavatories.	Satisfactory	...	...	...	...	41
	Unsatisfactory conditions:—						
	Washbasins not satisfactory	1	Insufficient washbasins	...	5		
	No drinking mugs	...	1	Broken Tap	...	1	
Cloak Rooms	Satisfactory	...	...	...	...	46
	Unsatisfactory conditions:—						
	Too small	...	...	1	Accumulation of old desks	1
	Pegs inadequate	...	...	1		

Ventilation.	Satisfactory	...	...	...	...	46			
	Unsatisfactory conditions:—								
	Window needs to be opened	1	No window cords	...	...	2			
Desks.	Satisfactory	...	...	48	Old fashioned	...	...	1	
Cleanliness of Premises.	Satisfactory	...	...	48	Not good	...	...	...	1
Playground.	Satisfactory	...	...	38	Needs repair	...	...	...	11
Miscell- aneous Defects.	Old fashioned classrooms			1	Walls requiring relining			1	
	Leaking roof	...	...	1					

The conditions found to be unsatisfactory were notified to the County Sites and Buildings Committee.

The Board of Education in the Circular 6 M., issued in November, 1925, suggested that in the review of the hygienic conditions of schools, note should be made of the arrangements for (i) the warming up of meals brought to school by the children (ii) the supervision of children during the meals, and (iii) the service of meals.

Investigations were made at a number of schools during the year and it was found that the arrangements varied considerably. In only a few of the schools is provision made for the warming up of meals brought by the children, and at no school was there any service of meals. Hot tea or cocoa is supplied at some of the schools. In all cases where children stay in school for meals, a teacher remains to exercise supervision.

The report of the County Education Architect is as follows:—

“ The condition of the schools of the County may continue to be classed as fairly satisfactory. All sanitary defects are remedied immediately they are discovered. A new school was opened during the year at Markham Village. A new boys' school is in course of erection

at Newbridge. The new buildings at the Agricultural Institution, Usk, were opened. Progress was made with the building of the Mining Centre at Abersychan, which will be opened early in 1928, and plans are being prepared for Mining Centres at Abertillery and Ebbw Vale."

4. MEDICAL INSPECTION.

(a) Scheme of Inspection.

The Board of Education's schedule of medical inspection was followed during the year, viz. :—

- (i) All children on their first admission to Public Elementary Schools.
- (ii) All children on their attaining the age of eight years.
- (iii) All children on their attaining the age of twelve years.
- (iv) Special cases.
- (v) Re-examination of children found at previous inspections to have defects requiring attention.
- (vi) Examination of all mentally and physically defective children.
- (vii) Examination of children irregular in attendance at school (Attendance Officers' cases).
- (viii) Re-examination at school of children for whom spectacles have been prescribed at the School Clinic.

In addition special examinations were made of school children who had met with accidents upon school premises.

(b) Steps taken to secure the early ascertainment of crippling defects.

The Medical Officers in charge of the County Maternity and Child Welfare Centres notify the County Medical Officer of all children under five years of age suffering from crippling defects who are seen at the Clinics. The Health Visitors urge the mothers of any such children who may come to their notice to take the infants to the Centres.

All parents are given an opportunity of having the children examined by the Consulting Orthopædic Surgeon with a view to early treatment of suitable cases at the Royal National Orthopædic Hospital under the provisions of the County scheme.

(c) Disturbance of School arrangements.

At schools where there are Head Teachers' rooms there is practically no disturbance of school arrangements. At the majority of the schools a classroom is freed for the use of the medical inspector, the scholars being placed

with another class for the time being. At single-roomed schools there must of course be some slight interference with the school routine work during medical inspections.

5. FINDINGS OF MEDICAL INSPECTION.

During the year a total of 13,489 children were examined at routine inspections. Of this number there were actually 1,232, or 9·1 per cent., children who were, at time of examination, physically fit,—boys 648, or 11·0 per cent., and girls 584, or 7·6 per cent.

A high standard has been fixed in classifying the children physically fit. A child found to have one carious tooth has been considered physically defective.

The number of special cases examined was 1,802.

Re-examinations were carried out in 7,611 cases.

The number of individual children inspected was 23,020, including 118 children specially examined owing to accidents upon school premises.

In addition the School Dentists examined 28,297 children.

Complete totals are given in the appended statistical tables.

The number of examinations made by the Assistant Medical Officers showed a decrease compared with the previous year, due to the epidemic of smallpox in the County which commenced in February and prevailed throughout the year. This necessitated the transfer, for a long period, of one of the Assistant Medical Officers for work in connection with the diagnosis of smallpox cases, and also the frequent allocation of an Assistant Medical Officer to visit schools attended by children who had contracted the disease, for the purpose of searching for suspicious cases.

(a) UNCLEANLINESS.

Clothing and Footgear at Routine Medical Inspections.

Year.	Unclean. Per Cent.	Ragged. Per Cent.	Excessive. Per Cent.	Insufficient. Per Cent.	Bad Footgear. Per Cent.
1912.	2·7	·5	·3	·05	·9
1913	2·8	·6	·4	·04	·1
1914.	2·8	·4	·3	·04	·9
1920.	·97	·3	·19	·05	·89
1921.	·42	·17	·07	·13	1·1
1922	·30	·32	·13	·31	1·1
1923	·38	·43	·05	·15	·98
1924	·14	·25	·03	·14	·80
1925	·13	·19	·09	·05	·51
1926	·25	·90	·05	·18	1·65
1927	·28	·52	·02	·08	1·22

Dirty and Verminous Children.

The dirty and verminous children discovered at routine inspections are here tabulated for facility of comparison.

	HEAD.		BODY.		
	Nits. Per Cent.	Dirty. Per Cent.	Dirty. Per Cent.	Pulices. Per Cent.	Pediculi. Per Cent.
Entrants—Boys	3.6	.06	1.3	3.1	.10
„ Girls	15.6	.06	.65	3.1	.52
8—9 yrs.—Boys	2.5	.21	1.6	2.9	.05
„ Girls	20.1	.05	.68	4.1	.11
Leavers—Boys	1.9	.15	2.1	3.5	—
„ Girls	17.8	.32	.54	4.0	.32

A more comprehensive survey of the cleanliness of school children is made by the Health Visitors. They paid an average of .81 visits to each school in the County during the year when they examined all the children in attendance. Re-visits were paid to the schools after each cleansing examination to inspect the children previously found to have defects. The average number of visits paid to the schools in normal years is considerably under the standard set by the Board of Education, and it is impossible to increase them without augmenting the number of Health Visitors. During the year under review there was a considerable drop in the numbers of visits paid by the Health Visitors, compared with the previous year. This was due to the fact that during the smallpox epidemic which broke out in the County it was found necessary, through the difficulty in obtaining other nurses, to requisition the services of several health visitors to staff the Isolation Hospitals run by the County Council.

Altogether 41,914 children were seen at the cleansing examinations, and 4,926 defects as regards uncleanness, etc., were found—11.7 per cent. This percentage is the lowest for a number of years.

The defects, which include also minor ailments, are set out below and the figures for the two previous years are given for the purpose of comparison.

The number of individual children found unclean was 4,926.

Chief defects found.	1927.		1926.		1925.	
	No.	Per-centage	No.	Per-centage	No.	Per-centage
Nits of head (mild) ...	1629	3.9	2155	3.7	2356	3.5
Do. (bad) ...	929	2.2	1330	2.3	1171	1.7
Body vermin ...	311	.7	626	1.1	1087	1.6
Dirty body ...	430	1.2	615	1.0	989	1.5
Ragged and dirty clothing ...	392	.9	611	1.0	908	1.3
Insufficient clothing ...	86	.2	112	.1	187	.2
Excessive Clothing ...	25	.06	10	.01	46	.06
Poor footgear ...	283	.6	398	.7	704	1.0
Poor nutrition ...	44	.1	102	.1	134	.2
Skin diseases ...	548	1.3	545	.9	636	.9
External eye diseases ...	103	.2	58	.1	171	.2
Otorrhoea ...	73	.1	66	.1	135	.2
Miscellaneous ...	304	.7	781	1.3	1234	1.8
Total defects ...	5157	12.3	7409	13.1	9158	14.8

No. of children examined, 1927, 41,914; 1926, 56,244; 1925, 65,815.

The percentage of defects of uncleanliness (apart from minor ailments) found by the Health Visitors during the year was 8.8 per cent., as compared with 9.9 per cent. for 1926, 10.8 per cent. for 1925, 11.3 per cent. for 1924, and 11.0 per cent. for 1923.

The parents were notified of the defects, and a re-examination of the children was made by the Health Visitors after a month's interval. 4,727 cases were re-examined, and 3,273 (71.3 per cent.) were found to have improved, and 1,454 (30.8 per cent.) to have not improved. The homes of the children who had shown no improvement were again visited, and instructions given to their parents or guardians in the methods of remedying the defect complained of. Further examinations were made of 3,880 children, and 2,227 (57.3 per cent.) were found to have improved by the time of this subsequent visit. 1,466 (37.7 per cent.) were undergoing treatment, and 187 (4.8 per cent.) showed no improvement, and no satisfactory promises of treatment were received from the parents or guardians. The homes of these children were again visited. In 1926, the figures were further examined, 6,987; improved, 3,943 (56.4 per cent.); undergoing treatment, 2,624 (37.5 per cent.); no improvement, 420 (6.0 per cent.).

The decided increase in the number of children whose condition has been found to have improved between the time of the examination at school and the re-examination by the Health Visitors, which has been apparent during the past few years, was maintained during the year 1927.

There were no legal proceedings taken during the year 1927. Thirty cases of neglect were referred to the local inspectors of the National Society for the Prevention of Cruelty to Children, who followed them up and took the necessary steps to ensure that the conditions were remedied.

(b) NUTRITION.

		1927.		1926.		1925.	
		Below normal.	Bad.	Below normal.	Bad.	Below normal.	Bad.
		Per Cent.		Per Cent.		Per Cent.	
Entrants	Boys	8.0	.8	7.9	.9	8.9	.8
"	Girls	7.0	.7	7.2	.8	6.8	.7
8—9 period,	Boys	11.2	.9	11.7	.9	12.6	1.1
"	Girls	9.8	1.1	9.7	1.0	11.3	1.0
Leavers	Boys	8.7	.0	8.3	1.0	9.7	.8
"	Girls	8.2	.7	7.5	.6	10.5	.9

From the above figures it would appear that in the administrative County as a whole there was no change in the nutrition of the school children, notwithstanding the distress which prevailed in many of the industrial areas, but in view of the exceptional poverty of the district of Nantyglo and Blaina special investigations with regard to the nutritional condition of the school children were made by the Assistant Medical Officers, Dr. H. M. Ayres and Dr. D. Nathan Rocyn Jones (in July, 1927), Dr. M. Proudfoot and Dr. G. Russell (in December, 1927). Their reports were as follows:—

Report of Drs. H. M. Ayres and D. Nathan Rocyn Jones (July, 1927).

“ In accordance with instructions to examine the school children in the Nantyglo and Blaina district with regard to the nutritional condition at the present time, the following statistics and observations are submitted:—

1. Generally speaking, the nutrition is below that of the Blaenavon school children.
2. Considering the industrial disturbance, the percentage of normal children is good, for out of a total of 3,600, only 673 are sub-normal for any reason, giving a percentage of 18.7 sub-normal children.
3. However, it is not suggested that this good condition will be, or could be maintained during the forthcoming winter months, when more food and better clothing and boots would be necessary.

4. In the detailed analysis of the sub-normal it is noted that the condition of 253, or 7 per cent. of the total children is directly due to poor family circumstances, undoubtedly produced by the present abnormal industrial conditions.
5. However, on the other hand it is noted there are 356, or 9.9 per cent. of the total children whose sub-normal condition, after exhaustive enquiry, cannot be included in medical or economic categories. It is a striking fact that at least half of these children come from good homes of parents who are unaffected by the local industrial conditions,

The indefinite sub-normal children included all those—

- (a) where no medical reason could be attributed,
- (b) where the financial circumstances were apparently satisfactory,
- (c) where the financial resources were small, and the dependents were few.

This information was obtained, where possible, from the children themselves, and co-related with information obtained from the teaching staff and attendance officer.

6. For medical reasons there were 64, or 1.8 per cent. of the total children—sub-normal—but where there were co-existing poor family circumstances, these children were included in the latter category.
7. On the whole, the clothing and boots were good, but there were a few definite cases of hardship. Undoubtedly this condition will become more acute during the winter months, as a number of children were wearing cheap plimsoll shoes.
8. It was pleasing to note that in many cases where the Headmaster or class teacher submitted an adverse report about the family circumstances, the children were clean, well clothed and shod, and it was not possible to say that their physical condition was sub-normal.

In conclusion we draw attention to paragraph 3 above, and recommend another exhaustive examination be carried out next November when the true nutritional condition of the school children in these areas will be more definitely established."

Report of Drs. M. M. Proudfoot and C. Russell upon a re-examination of the school children of Nantyglo and Blaina (December, 1927).

“ The following statistics and observations are submitted:—

Out of a total of 3,245, 423 are sub-normal for all reasons, giving a percentage of 13 per cent. sub-normal children. In addition to those, a large number of the children show rather poor muscle tone, which may later on develop into definite malnutrition.

In the detailed analysis of the sub-normal, it is noted that the condition of 250, or 7·7 per cent. of the total children, is directly due to poor family circumstances.

There are 102, or 3·1 per cent. of the total children whose sub-normal condition is due to no definite medical cause, and the financial circumstances are apparently satisfactory.

For medical reasons there are 71, or 2·2 per cent., of the total children sub-normal. The cases where medical reasons might have been due to the poor family circumstances are included in the latter.

Most of the children have good clothing and strong boots, but there are a few cases where these are unsatisfactory. That the boots have been so good on the whole can be accounted for by the fact that there have been considerable free gifts of boots to school children.

Comparing the present findings with those of July, the percentage of sub-normals has decreased 4 per cent. Part of this decrease is due to the fact that in July one school was just recovering from an epidemic, and those children who were on that account below par then, have improved.

However, we regret to state that the number of sub-normal children whose condition is due to impoverished family circumstances has doubled since the investigation conducted in July last by Dr. H. M. Ayres and Dr. D. N. Rocyn Jones.”

(c) MINOR AILMENTS.

Routine inspections disclosed minor ailments in 7·1 per cent. of the children examined. Details of the nature of the minor ailments are given in the statistical tables appended.

There is need for the establishment of Minor Ailments Clinics in the industrial townships of the County, but a scheme to provide these would entail additional medical and nursing staff.

(d) NOSE AND THROAT CONDITIONS DISCOVERED AT ROUTINE INSPECTIONS.

Nose and throat conditions, discovered at the routine inspections are perhaps the most important of all, as by their persistence, other, and intrinsically far more serious conditions are liable to supervene.

The numbers per cent. are given where throat conditions were met with, tabulated as "Entrants," "8—9 years period," and "Leavers."

	No. Examined	Mouth Breathers	Enlarged Tonsils.		Adenoids		Tonsils and Adenoids	Conditions due to other causes
			Slightly	Much	Slight	Obstructive Adenoid Growth		
Boys—Entrants	3085	p.c. 1.9	p.c. 22.1	p.c. 5.0	p.c. .3	p.c. .06	p.c. 6.9	p.c. 2.5
Girls—Entrants	3039	.9	23.4	5.2	.3	.06	6.9	2.5
Boys—8-9 ...	1855	1.4	18.8	5.3	.9	.1	4.4	2.8
Girls—8-9 ...	1756	1.3	19.1	5.4	.3	.05	6.2	2.5
Boys—Leavers...	1929	1.7	15.7	2.4	.7	—	2.7	3.6
Girls—Leavers..	1825	1.1	20.4	5.3	.5	.1	4.0	7.1

From the foregoing tabulated list it will be seen that a considerable number of children had affections of the nose and throat prior to their entering upon school life. The number of children with adenoids as well as enlargement of the tonsils has again risen considerably.

The following is a tabulation of the percentages of glandular conditions discovered at routine inspections. The condition, especially that of the submaxillary and anterior cervical glands, is closely allied with, or secondary to tonsils and adenoids aetiologically, while the posterior cervical glandular enlargement is in many cases due to dirty, verminous or septic condition of the scalp.

		Submaxillary. Enlarged. Per Cent.	Anterior Cervical. Enlarged. Per Cent.	Posterior Cervical. Enlarged. Per Cent.
Entrants,	Boys	.5	.7	.6
"	Girls	.5	.8	.4
8—9,	Boys	.05	1.3	.05
"	Girls	.1	.9	.2
Leavers,	Boys	.05	.4	—
"	Girls	.1	.1	.1

(e) TUBERCULOSIS.

Tuberculous conditions were discovered in .06 per cent. of the children examined at routine inspections. .02 per cent. of the children inspected had pulmonary tuberculosis, .02 per cent. had tuberculous disease of bones or joints, .007 tubercular glands, and .007 other forms of tuberculosis.

.17 per cent. of children inspected were suspected of being affected with pulmonary tuberculosis.

Of non-tuberculous chest conditions, .3 per cent. of the children inspected had catarrhal conditions of the lungs, while .71 per cent. had chest trouble due to other causes.

These figures cannot be taken as a reliable incidence of tuberculosis in school children, as all children showing the least suspicion of the trouble are referred to the Tuberculosis Physicians. A statement of their findings is included later in this report.

(f) SKIN DISEASES.

Of the total children examined at routine inspections 3.6 per cent. were found to have skin diseases, due to:—

	Per Cent.
Ringworm of the Scalp ... ..	.18
Ringworm of the Body ... ..	.02
Scabies ... ..	.14
Impetigo ... ..	.67
Skin Diseases from other causes	2.6

Full details of the " other causes " are in the table dealing with the subject.

111 hair specimens were examined for ringworm microscopically at the County Laboratory, 72 being returned as positive and 39 negative.

X-Ray treatment for Ringworm is available for those cases which are likely to benefit by such treatment.

(g) EXTERNAL EYE DISEASES.

Disease of the external eye was discovered in 2.5 per cent. of the children seen at routine inspection, viz.:—

	Per Cent.
Blepharitis	1.7
Conjunctivitis ... ..	.33

while other diseases accounted for .39 per cent. of external eye conditions in all children examined.

(h) DEFECTIVE VISION.

The children are normally examined as to their vision in the course of routine inspection in the two groups, eight years of age and 12 years of age respectively.

The "Entrants" are only examined as to vision with Snellen's Type, where defect is evident or strongly suspected, or where a squint is perceptible.

For simplification, the results of routine examinations as regards defective vision, are tabulated. There is again this year a reduction in the number of cases. The table shows a slight increase in the number of squint cases.

Groups	No. of Children Examined	Only One Eye Defective				Cases where both Eyes were equally Defective		Cases of Unequal Error				Squint
		Right		Left				Right		Left		
		$\frac{6}{24}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	$\frac{6}{24}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	$\frac{6}{24}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	$\frac{6}{24}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	$\frac{6}{24}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	
		p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.
Entrants—Boys ...	3085	·03	...	·12	·03	·16	·06	...	..	...	...	1·2
„ Girls ...	3039	·06	·03	·09	·03	·62	...	·09	·03	·06	·09	1·4
8·9—Boys ...	1855	2·0	·80	2·1	1·2	4·9	1·2	2·0	·80	2·1	·80	1·6
„ Girls ...	1756	3·1	·39	2·1	1·3	7·5	2·1	2·1	·54	2·1	·54	1·3
Leavers—Boys ...	1929	2·7	·93	1·7	1·3	3·2	1·7	2·0	1·1	2·1	·73	·46
„ Girls ...	1825	2·5	1·5	2·4	1·0	5·7	2·5	3·2	1·5	3·1	1·7	·65

MYOPES.

The records of examinations of children at the Eye Clinics show that there are many children whose eyes are unfit to stand the strain of education in ordinary elementary schools. Some have to be excluded from school altogether, whilst others have to be taught orally.

The suitable method of dealing with these cases is by the establishment of "Myope Classes," to be held at the elementary schools, where the oral teaching and physical exercises given in the ordinary classes would be available for the children.

There are over a hundred children who would greatly benefit by instruction in Myope classes, but they are scattered throughout the County, and if classes were formed, rail or 'bus journeys would be necessary to obtain sufficient numbers to form a satisfactory class.

(i) EAR DISEASES.

The conditions discovered at routine inspection are given in percentages of numbers examined in each group. The percentage of defects is, on the whole, about the same as in the past few years.

		Number examined.	Otorrhoea. Per Cent.	Other Diseases. • Per Cent.	Defective Hearing.
Entrants,	Boys	3085	1.1	.45	.38
"	Girls	3039	.95	.26	.42
8—9 period,	Boys	1855	1.1	.43	.64
"	Girls	1756	.39	.11	.45
Leavers,	Boys	1929	.41	.72	.41
"	Girls	1825	.87	.16	.21

(j) DEFECTIVE TEETH.

Apart from the inspections carried out by the School Dentists at the elementary schools, defective teeth were observed and noted during routine medical inspection.

The results are tabulated in percentages for numbers examined in each group.

		Number of defective teeth.			
		Number examined.	under 4. Per Cent.	4 and over. Per Cent.	Dirty Teeth. Per Cent.
Entrants,	Boys	3085	41.0	28.9	1.3
"	Girls	3039	42.6	25.7	1.2
8—9 period,	Boys	1855	46.7	30.6	4.4
"	Girls	1756	50.1	28.3	2.7
Leavers,	Boys	1929	43.8	10.5	2.7
"	Girls	1825	47.7	9.4	1.4

The number of children examined by the School Dentists was 28,297. Details will be found in the appended statistical table IV., group IV.

(k) CRIPPLING DEFECTS.

In the course of the routine inspections, 167 cases of deformities requiring treatment and 141 needing to be kept under observation, were discovered, an incidence for definite cases of 12.3 per 1,000 of children inspected. This figure does not indicate the total number of crippled children, an estimate of which is given later in this report.

6. INFECTIOUS DISEASE.

Head Teachers are provided with forms upon which they notify to the School Medical Officer and to the District Medical Officer of Health all cases of infectious disease which arise amongst their scholars. A health visitor, specially trained in infectious diseases, conducts any inquiries which may be necessary at the schools and homes.

Measles and Whooping Cough were prevalent during the year.

Several virulent epidemics of diphtheria arose and special attention was paid to the swabbing of contacts in the affected schools and examination of the milk and water supplies of the district, with a view to tracing the cause of the outbreaks.

The notifications received from Head Teachers were:—

Measles	...	...	1848	Scabies	...	...	...	3
Whooping Cough	...	...	358	Impetigo	...	...	...	20
Scarlet Fever	...	...	115	Influenza	...	...	...	708
Chicken Pox	...	...	945	Smallpox	...	...	...	89
Mumps	...	...	144	Do. Contacts	...	...	...	77
Diphtheria	...	...	78	Do. Suspected	...	...	...	7
German Measles	...	...	3	Other Diseases	...	...	...	34
Ringworm	...	...	15					
Total								4,447

During the year 2,001 swabs were taken by the School Medical Staff and examined for diphtheria bacilli at the County Laboratory, 9 schools being involved. The examination of the swabs gave 23 positive and 1,978 negative results.

When the diphtheria bacillus was found in a swab, the parents of the child were notified and advised to call in a medical practitioner; the child was excluded from school and the Medical Officer of Health of the area in which the child resided was notified. The positive cases were re-swabbed until two consecutive negative results were obtained.

There were in addition 15 specimens of urine, and 1 eye swab from school children examined at the laboratory.

It was found necessary to close 46 departments on account of the prevalence of infectious or other diseases as follows:—Measles, 4; Whooping Cough, 2; Influenza, 40. Authority is now given to Head Teachers whereby

registers need not be marked when, through the prevalence of infectious disease amongst the scholars, the percentage of attendance for any week falls below 60 per cent.

Certificates were given to 165 departments on account of the following conditions:—

Measles	...	...	...	23	Mumps	...	...	...	1
Whooping Cough	...	...	...	3	Influenza	...	...	...	138

Disinfection of school premises is undertaken by the County Sanitary Inspector after every epidemic.

An epidemic of smallpox commenced in the County in February and continued throughout the year. Many school children were affected. Of a total number of 1,900 cases notified to the 31st December, 1927, 554, or 29 per cent. were children of school age. The numbers in each age group were:

Years	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12	12-13	13-14	Total
Number	41	73	66	62	52	63	52	44	54	47	554

Seventy-nine of these cases were from the autonomous areas of Ebbw Vale and Abertillery. The districts affected in the Administrative County were:—Abercarn, 15; Abersychan, 237; Bedwellty, 54; Blaenavon, 71; Mynyddislwyn, 7; Nantyglo and Blaina, 33; Panteg, 7; Pontypool, 47; Risca, 1; Llantarnam, 1; St. Mellons, 1.

An inquiry into the vaccinal condition of school children was conducted by the County Medical Staff in September, 1927, when the following was the position:—

Number of children on register, 53,381.

Number vaccinated in infancy, 19,187, or 35·7 per cent.

Vaccinated during epidemic for first time, 11,222, or 21·20 per cent.

Total number vaccinated, 30,409, or 56·9 per cent.

Unvaccinated, 22,972, or 43·05 per cent.

Number of cases of smallpox notified to the 30th September, 1927, 294

Number of these cases—

Vaccinated satisfactorily	...	...	—
Vaccinated in incubation period	...	...	17
Unvaccinated	...	...	277

The report of the inquiry emphasised the orthodox opinion that vaccination does protect against small-pox. Briefly, among 30,409 vaccinated children there was not a single case of small-pox. Among 22,972 unvaccinated

school children (and some vaccinated in the incubation period) there were 294 cases of smallpox.

The protection against smallpox at the beginning of the epidemic was quite inadequate, since only 35.75 per cent. of the children were vaccinated. In view of this, the epidemic, once started, was bound to spread.

During the epidemic only 11,222 unvaccinated children were vaccinated out of a total of 34,194 unvaccinated (up to 30th September, 1927). This again helps to explain the difficulty in controlling the spread of the epidemic.

Vaccination seems to provide a longer period of immunity to smallpox, or at any rate, to the type prevalent in Monmouthshire, than is usually taught. There was no case recorded of smallpox in a child under the age of 14, who was vaccinated in infancy; and out of the 19,187 children vaccinated in infancy, only 4,552 were revaccinated. This leaves a total of 14,635 children vaccinated in infancy only among whom no case of smallpox occurred.

The greatest number of cases of smallpox occurred in a district in which the percentage of vaccinated children was almost the lowest. However, the comparatively low percentage of vaccinated children in most groups makes it impossible to compare the relation of the percentage of vaccinated children to the smallpox incidence in one group with that of any other group of schools.

The rural areas are better protected against smallpox by vaccination than are the industrial areas, but perhaps not sufficiently so to explain their absolute immunity from infection. Other factors, such as lack of inter-communication between rural and industrial areas owing to geographical situation must also be considered.

Vaccination during the incubation period of smallpox cannot be guaranteed absolutely to prevent an attack of smallpox, as there were 17 cases of the disease amongst children vaccinated during the incubation period.

7. FOLLOWING UP DEFECTS DISCOVERED AT ROUTINE INSPECTION.

Re-examination of all children (whether of the routine inspection group or of the special examination group), found defective, is made by the Medical

Inspectors, and children who were referred for re-examination on account of doubtful signs are seen again.

The following table gives the number of re-examinations made by Medical Inspectors and the result thereof:—

Condition	No. of defects for which treatment was considered necessary.			No. of defects for which no report is available	No. of defects treated	Results of Treatment			No. of defects not treated	Percentage of defects treated
	Old Routine Cases	Special Cases.	Total.			Remedied	Improved	No improvement		
Nutrition	1180	438	1618	439	1179	323	402	454	...	72.9
Uncleanliness { Head	211	70	281	83	127	70	39	18	71	45.2
{ Body	71	18	89	23	41	32	8	1	25	46.0
Clothing { Dirty or Ragged	16	2	18	4	11	8	2	1	3	61.1
{ Excessive	1	...	1	...	1	...	1	...	...	100.0
{ Insufficient	5	...	5	...	4	2	...	2	1	80.0
Poor Footgear	29	3	32	7	23	16	3	4	2	71.8
Skin { Ringworm { Head	24	10	34	10	24	15	6	3	...	70.6
{ Body	4	1	5	1	4	4	...	...	...	80.0
{ Other Infectious Skin	61	10	71	14	57	51	4	2	...	80.8
{ " Skin Diseases	108	43	151	43	108	50	17	41	...	71.5
Eye { Vision and Squint	951	284	1235	322	837	402	134	301	76	67.8
{ External Eye diseases	262	71	333	97	235	130	41	64	1	70.6
{ Otorrhoea	129	46	175	58	116	51	10	55	1	66.3
Ear { Defective Hearing	78	52	130	30	100	28	31	41	...	76.9
{ Wax	15	6	21	3	18	10	4	4	...	85.7
Nose and Throat { Enlarged Tonsils	2114	369	2483	617	1607	261	248	1098	259	64.7
{ Adenoids	136	34	170	40	126	63	20	43	4	74.1
{ Tonsils & Adenoids	744	111	855	188	549	140	100	309	118	64.2
{ Other Diseases	397	109	506	143	363	118	70	175	...	71.7
Enlarged Glands	503	110	613	165	448	211	42	195	...	73.1
Defective Speech	65	48	113	26	87	27	26	34	...	77.0
Teeth	1332	347	1679	397	1164	406	418	340	118	69.3
Heart and { Heart Disease	884	170	1054	288	766	132	92	542	...	72.7
Circulation { Anæmia	504	204	708	221	487	144	171	172	...	68.8
Lungs { Bronchitis	128	28	156	42	114	70	12	32	...	73.0
{ Bronchial Catarrh	377	108	485	111	374	212	60	102	...	77.1
Tuberculosis { Definite	5	18	23	11	12	3	4	5	...	52.2
{ Suspected	39	88	127	55	72	20	17	35	...	56.7
{ Other Forms	23	65	88	47	41	9	16	16	...	46.6
Nervous System { Epilepsy	7	13	20	14	6	...	3	3	...	30.0
{ Chorea	17	17	34	16	18	9	6	3	...	52.2
{ Other Forms	32	16	48	19	29	7	9	13	...	60.4
Deformities	88	101	189	88	101	5	42	54	...	53.4
Other Diseases or Defects	593	297	890	322	551	176	108	267	17	61.9
Totals	11133	3307	14440	3944	9800	3205	2166	4429	696	67.9

Number of children re-examined = 7,611 with 14,440 defects.

Defects of school children which require attention are notified by letter to the parents and 18,423 notices were forwarded during the year in regard to 18,169 children. The figures include defects notified by the Dental Surgeons, but not cleansing examinations. In these cases Health Visitors visit the homes of such children to point out to the parents the necessity of treatment, if this has not already been obtained. 7,581 defects were investigated at the homes by the nurses and the following information was elicited from the parents:—Actually receiving attention, 1,802; promised to obtain attention, 3,697, no satisfactory reply received, 2,082.

8. MEDICAL TREATMENT.

School Clinics.

There are ten School Clinics in the Administrative County, as follows:—

				Defects Treated.
Rhymney Cottage Hospital	...	...	...	Teeth, Vision, Tonsils, and Adenoids.
Nantyglo and Blaina Hospital	...	...	...	Ditto.
Pontypool and District Hospital	...	...	...	Ditto.
Crumlin, Hafodyrynys Road	...	...	...	Teeth and Vision.
Abercarn, The Surgery	...	...	...	Ditto.
Blaenavon, The Surgery	...	...	...	Ditto.
Tredegar, The Surgery	...	...	...	Ditto.
Pengam, Vine House	...	...	...	Ditto.
Newport, Stanley Road	...	...	...	Teeth, Vision, Tonsils, Adenoids and Minor Ailments.
Travelling School Clinic	...	...	...	Teeth and Vision.

Travelling Clinic.

The advantage which parents in the rural areas have taken of the facilities for treatment of defects of vision and teeth in their children, continues to justify the provision of the Travelling Clinic.

During the year 590 children were treated for defective teeth (752 attendances), and 63 children attended for correction of errors of refraction. Since the inauguration of the Travelling Clinic, 9,841 children have received the benefit of attention to these two defects, and it can safely be asserted that but for the provision of this Clinic the vast majority of these children would not have had the slightest treatment.

It is unfortunate that the epidemic of smallpox which raged in the County during the year necessitated the suspension of the work of the Travelling School Clinic.

Payment Scheme.

The payment scheme, which was set out in the report for 1924, continues to operate.

The amounts received during the year 1927 were as follows:—

Treatment Received.	Amount Received.	Total amount still outstanding to be collected from parents.	
		£ s. d.	£ s. d.
Dental	32 1 6	5 5 6	
Tonsils and Adenoids ...	6 10 6	0 6 6	
Total	£38 12 0	£5 12 0	

Amounts received for 1924 £34 11s. 6d.

Amounts received for 1925 £45 14s. 6d.

Amounts received for 1926 £51 14s. 6d.

The following Table shows the numbers treated at the Clinics during the year 1927.

Clinics	Number of Appointments made.	Number of Appointments kept.	Percentage of Appointments kept	NUMBER OF CHILDREN TREATED					
				Teeth.	Vision	Tonsils and Adenoids	X-Ray	Minor Ailments	
								Actual Cases	Visits Paid to Clinic
Abercarn	292	231	79·1	138	44	...	...	...	...
Blaenavon	499	342	68·5	198	54	...	...	...	...
Blaina	850	591	69·6	285	117	33	...	...	...
Crumlin	426	286	67·1	175	46	...	...	...	...
Pontypool	184	115	62·5	63	27	...	...	...	...
Rhymney	522	326	62·4	123	115	26	...	...	...
Tredegar	570	415	72·8	144	166	...	...	...	...
Pengam	1272	797	62·7	441	146	...	...	...	...
Newport	2405	1486	61·7	362	265	160	31	176	401
Travelling Clinic ...	931	752	80·7	446	63	...	...	...	...
Totals	7951	5341	67·1	2375	1043	219	31	176	401

(a) MINOR AILMENTS.

The number of children who received treatment for minor ailments during the year was 855. Of these cases, 193, or 21.1 per cent., were treated at the Clinic, Newport, and 662, or 78.8 per cent., by the parents' own medical attendants.

The Report of the Medical Officer in charge of the Newport Clinic, Dr. M. H. Gordon, is as follows:—

“ The Minor Ailment Clinic is held at Newport on Wednesday mornings and every alternate Saturday morning.

The attendance during the year under review has been satisfactory on the whole. Largely owing to the smallpox epidemic fewer cases were treated at the Clinic this year than last year, as at the commencement of the outbreak it was thought to be unwise to bring children from the affected areas down to Newport.

Of the total number of cases seen at the Clinic during the year, those of Otorrhœa formed the largest group. In each case the parent was advised as to constant daily treatment, the method of procedure being carefully shown. The cases then reported at the Clinic at intervals till cured. Many cases of Otorrhœa were found to be associated with enlarged Tonsils and Adenoids. Wherever possible these cases were sent for operative treatment to the County Tonsils and Adenoids Clinic. Very resistant cases of Otorrhœa were referred for further advice to Mr. J. A. Lee, the Consulting Ear, Nose and Throat Surgeon.

As usual, skin diseases bulked largely among the ailments treated. Of these, Ringworm and Eczema formed the largest proportion. Some of the severe cases of Ringworm were referred for X-Ray treatment. For the successful cure of Ringworm by local applications, the closest attention to details of treatment is required on the part of the parent or guardian and too often this care is not given and the disease spreads, and becomes very resistant to treatment. Cases of Eczema, too, require great care with the daily dressings. If attended to, these cases as a rule clear up satisfactorily, but more often insufficient care and attention are given and the cure becomes a difficult matter.

Of the cases of Blepharitis (sore eyes) seen at the Clinic, most were cured after one or two visits; some were referred to their local doctor for continuance of the treatment.”

The following are particulars of the cases which received attention at the Minor Ailments Clinic during the year:—

	No. of Cases treated			Results of Treatment.							No. of visits necessary to cure defects									
	Brought forward from last year.	New Cases	Total	No. of visits paid to Clinic.	Cured	Declined further appointment.	Obtained treatment from local doctor	Still under treatment	Referred to Hospital	Referred for X Ray	1	2	3	4	5	6	7	8	9	10
Ringworm	3	19	22	58	3	2	3	6	8	...	...	2	1	...	...	...	...	...	...	...
Impetigo	...	2	2	7	1	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...
Seborrhœa	...	8	10	17	3	2	4	1	...	...	...	3	...	...	...	...	1	...	...	...
Eczema	3	4	7	20	4	...	1	2	...	...	...	...	1	...	...	...	...	...	...	...
Scabies	...	1	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Skin Diseases	6	13	19	38	7	5	1	6	...	...	3	2	...	1	1	2	...	...	...	1
Blepharitis	8	19	27	56	16	4	2	4	...	1	7	4	...	1	...	...	...	...	...	...
Conjunctivitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Corneal Ulcers	...	1	1	2	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Phlyctenular Ulcers	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Eye Diseases	...	4	4	14	3	...	...	1	...	...	3	...	...	...	...	...	...	...	...	...
Otorrhœa	30	39	69	144	19	6	16	27	...	1	4	5	2	1	4	...	3	...	...	...
Wax in Ears	2	4	6	27	3	1	2	2	...	...	...	...	3	...	...	...	...	...	...	...
Other Ear Diseases	1	5	6	15	2	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...
Enlarged Glands	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Clinical examination only	...	2	2	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	55	121	176	401	62	21	31	52	8	2	18	20	7	3	6	2	5	...	...	1

48 sessions were held, 776 appointments were made and 401 kept, a percentage of 51·6.

The Committee paid the rail fares on 316 occasions, at a total cost of £56 19s. 8d.

(b) TONSILS AND ADENOIDS.

During the year, 1,980 children in whom nose and throat defects (routine and special cases) were discovered, were referred for treatment.

Pronounced cases are referred for immediate surgical treatment, but otherwise the procedure adopted is as follows:—

1. Where the amount of the obstruction is slight, but accompanied by a certain amount of mouth breathing and poor chest development, such children are not necessarily referred for operative treatment, but an attempt is made with the co-ordination of the Instructors in Physical Training to improve the condition so that operative measures may be unnecessary.
2. When on subsequent inspection or inspections, the foregoing has proved to have had no beneficial effect, then these children are referred for operative treatment.
3. After operative interference the child is again examined, and is specially referred to the Instructors for training in breathing exercises. In many cases it is found that children persist in the mouth breathing habit even after the cause has been removed.
4. A few cases still persist as mouth breathers and in poor condition physically. In such it is often found that a nasal obstruction co-incident with the other condition causes the trouble on its own account. In such cases the child is referred for nasal treatment.

In a few cases it was found that the adenoids, owing to the persistence of the mouth breathing habit, developed again, and necessitated further treatment.

The following cases received attention at the County Tonsils and Adenoids Clinics, the operations being performed by Mr. J. A. Lee, the Consultant Ear, Nose and Throat Surgeon.

Name of Clinic.	NEW CASES.						RE-EXAMINATIONS.				No. of Sessions.
	No. of ap- points. made	No. kept.	Tonsils removed	Adenoids removed	Tonsils and Adenoids removed	Remarks.	No. of ap- points. made	No. kept	No. not kept	Satisfactory	
Blaina ...	45	33	...	...	33	...	...	...	...	...	4
Newport ...	236	161	...	...	160	1 deferred	...	...	...	...	19
Pontypool ...	...	...	...	...	...	...	...	...	...	...	...
Rhymney ...	36	26	...	...	26	...	...	...	...	...	3
Total	317	220	...	...	219	1 deferred	...	...	...	...	26

In addition to the above, 43 ear, nose or throat cases were specially examined and advice given by Mr. Lee at his consultation clinics.

The Committee paid the rail fares on 52 occasions at a total cost of £9 2s. 11d.

Mr. Lee has submitted the following report upon his work during the year:—

“ During the year 1927, 219 children were operated upon for tonsils and adenoids at the Stanley Road Clinic, Blaina and Rhymney Hospitals and in addition, 43 cases were sent for consultation.

The Sluder method was the one carried out, which consists in shelling out the tonsils completely and consequent non-recurrence; whereas by the old method, which consisted in snipping off the top, a large proportion recur, as the tonsillar follicles (where the disease usually originates) are situated deep down in the substance of the tonsil and were often left untouched by this method, with the result that a large proportion recurred and the child was often very little, if any, benefited by the operation.

It is now recognised by the chief Tuberculosis Authorities that if the best results are to be obtained, the whole of the tonsil should be removed as it is undoubtedly the chief port of entry of tubercular disease into the system, and it is hoped by this means to lessen the incidence of Phthisis as it has certainly lessened the number of cases suffering from tubercular glands in the neck, which are now compara-

tively rarely seen in the out-patient departments of the large General Hospitals in this country.

Unfortunately, we have a very large waiting list, with the result that many cases have to wait a considerable time, while some leave school, before they have the opportunity of being operated upon and consequently do not develop as they otherwise would, both mentally and physically."

(c) TUBERCULOSIS.

Of the 23,020 children examined during the year (Routine, Specials and Re-examinations), 300 cases, or 1.30 per cent., were referred to the Tuberculosis Physicians of the King Edward VII. Welsh National Memorial Association for diagnosis and, if necessary, treatment.

The results of the Tuberculosis Physicians' findings are as follows:—

			Referred by Medical Inspectors.		Not so referred.	
			Males.	Females.	Males.	Females.
Diagnosed as Definite Cases:—						
Pulmonary	...	...	10	5	5	4
Glands	...	...	8	5	5	4
Other Forms	...	...	5	4	2	1
			—	—	—	—
			23	14	12	9
			—	—	—	—
No definite signs of Tuberculosis, but cases to be kept under						
Observation	...	...	43	38	7	13
Non-Tubercular	...	...	67	58	6	4
Appointments not kept	...	...	10	7	—	—
			—	—	—	—
			120	103	13	17
			—	—	—	—

Total number of reports received, 357.

From the above table it will be seen that reports were received from the Tuberculosis Physicians upon 223 of the 300 cases notified to them and that 37 were definite cases in which Institutional treatment was indicated. The majority of these cases, together with some of the cases which were referred to the Tuberculosis Physicians in previous years and the cases which otherwise came to their notice were admitted to Hospital or Sanatorium during the year.

The following is the Tuberculosis Physicians' report in this connection:—

Admission to Hospitals and Sanatoria.

				Males.	Females.
Pulmonary	...	...	...	9	12
Glands	...	...	...	1	2
Other Forms	...	...	...	5	5
Suspicious Tuberculosis	...			4	4
				—	—
				19	23
				<u>19</u>	<u>23</u>

(d) SKIN DISEASES.

The parents of the 65 children suffering from Ringworm of the scalp were notified that treatment was required. Forty-six, or 70·7 per cent., are recorded as having undergone treatment, of whom 31, or 47·6 per cent., received X-Ray treatment under the Local Education Authority's scheme. They were treated by Dr. J. McGinn, whose report for the year is as follows:—

The report for the year is as follows:—

Number of Cases referred from 1926	Number of New Cases.	Number of Appointments made	Number of Appointments kept	Number Cured	Number Declined Treatment	Number still under Treatment	Number of Visits Necessary to Cure								
							1	2	3	4	5	6	7	8	9
16	15	162	135	20	2	9	...	2	3	1	3	1	3	3	4

“ Since 1921, when the County Council approved of X-Ray treatment of their school children suffering from ringworm of the scalp, 192 children were successfully treated by X-Ray epilation.

The procedure adopted is, the scalp must be mapped out into five areas, and each area affected is treated by the Kiemboch-Adamson tripod method; the dose of X-Ray is measured by a Sabouraud et Noiré pastille placed midway from X-Ray tube target to scalp. The time required for the treatment of each area would be 6 to 8 minutes, about one hour for each child's complete scalp.

Epilation commences on the 14th day, and is usually completed in 30 days should no complication occur. In many children a troublesome

delay in returning to school is caused by seborrhœa sicca, a dermatitis which stubbornly resists treatment for several weeks, when it responds to ultra-violet light administered weekly from the carbon tungsten arc light or mercury vapour lamp.

Occasionally a pustular eruption develops, due to greasy applications rubbed on the scalp for some time previous to the X-Ray treatment. Some of these pustules become large and tender to touch, and are very distressful to the child. These complications also clear up by U.V. light.

A few cases, three in number, were threatened with permanent alopecia, but by persistent light therapy after a lengthy period, the hair was eventually restored.

Some children are very sensitive to X-Rays, and a slightly under-dose is to be favoured in all fair children.

In many of those rayed, a fine crop of curly or wavy hair grew on the head, much to the parents evident admiration.

The ages of children treated were mainly between 5 and 12 years. The younger children demanding much patience and coaxing in order to secure perfect stillness and confidence in the operation during the electrical application.

This special treatment had the effect of yearly diminishing the number of ringworm children, and of minimising the danger of infection by child to child contact. In 1921-22, 34 and 40 cases were thus treated, and in 1927, only 12 children were notified for X-Rays. A similar reduction was observed among the number of Newport Borough children treated by X-Rays.

After X-Ray treatment, it is advisable from the first day to have the scalp washed daily by mild antiseptic soap, 5 per cent. carbolic for instance, to destroy the effect of broken or shed hairs, and the scalp to be clothed by covering, which could be burned after a month's use of it. Strict segregation must be observed during the infective period, until complete shedding of diseased hairs."

The Education Committee paid the rail fares on 81 occasions at a cost of £14 7s. 11d.

4, or 100·0 per cent., of the cases of ringworm of the body referred, were found to have been treated.

One chronic intractable case of scabies was treated at the Newport Minor Ailments Clinic.

Of other skin diseases referred, 38, or 10·6 per cent. were treated at the Clinic.

(e) EXTERNAL EYE DISEASE.

During the year 1,756 children were referred for treatment on account of external eye trouble. Of this number 235, or 31·0 per cent., followed the advice given and sought treatment, 51, or 6·7 per cent., of whom were treated at the Clinic. 264, or 29·7 per cent., made other arrangements.

(f) VISION.

For errors of refraction, squint, and other defects of vision, 2,326 children were referred for treatment. In 1,043 cases the offer of further investigation and if necessary, treatment at the Clinic, was accepted.

Children for whom spectacles were prescribed at the School Clinics were re-examined at the next visit of the Medical Inspector to the School.

In some cases where there was a high error of refraction, especially if myopic in character, the children were periodically re-examined at the Clinic.

In cases where the error, especially if due to myopia, is a very high one, it is sometimes found necessary to exclude the child from school, so that the limited vision the child possesses shall be conserved.

In other cases it is found to be sufficient to advise the Head Teacher that it is necessary for the child to refrain from using the eyes for near work until otherwise advised.

Those of the Assistant School Medical Officers who have had experience in the correction of errors of refraction are in charge of the eye clinics and they deal with the majority of the cases which are examined. Children suffering from bad squint and severe defects of vision are referred to Mr. R. J. Coulter, the Consultant Ophthalmic Surgeon, who attends a Clinic at Newport once a week. Dr. Coulter examined 159 cases during the year, and, in addition re-examined 27 squint cases and advised that spectacles should be changed in 6 cases, and recommended operation for 10 others. He has supplied the following report:—

" A clinic is held on Monday afternoon for the examination of difficult cases and children suffering from squint. The attendance was satisfactory, 193 cases being dealt with.

Glasses were prescribed where required and arrangements were made for treatment or continued observation when indicated. In a number of cases operations were desirable for squint, congenital cataract and other conditions; advice was given as to how to get them performed."

The record of work accomplished at all the Clinics during 1927 is:—

Number of children examined:—

New cases	...	...	...	...	726
Re-examinations	...	...	...	...	317
					<hr/>
					1,043
					<hr/>

The number of appointments made was 1,389 and the number kept, 1,043, a percentage of 75.7.

Conditions found on examination:—

Defective Vision (one eye)	...	...	...	156
Defective Vision (both eyes)	...	...	...	492
Total Squints	...	...	...	55
Defective Vision and Squint	...	...	...	23
Myopia	...	...	...	60
Simple Myopia Astigmatism	...	...	...	24
Myopia and Myopia Astigmatism	...	...	...	69
Hypermetropia	...	...	...	120
Progressive Myopia	...	...	...	6
Simple Hypermetropia Astigmatism	...	...	...	82
Hypermetropia and Astigmatism	...	...	...	141
Mixed Astigmatism	...	...	...	52
Conjunctivitis	...	...	...	—
Blepharitis	...	...	...	14
Corneal Opacities	...	...	...	2
Amblyopia (one eye)	...	...	...	1
Photophobia	...	...	...	5
Nystagmus	...	...	...	1
Other forms	...	...	...	9
Conjunctivitis and Blepharitis	...	...	...	3
Phlyctenular Ulcers	...	...	...	—
Myopia Crescents	...	...	...	4

Action taken:—

New cases:—

Spectacles recommended	...	...	554
Spectacles not needed	...	...	172

Re-examinations:—

Change of spectacles recommended	...	214
No change necessary	...	103

Four children were excluded from school during the year for eye complaints as a result of examinations at the eye clinics.

Pairs of spectacles provided by Committee on account of poverty of parents, 321, with repairs to 21 pairs, at a cost of £88 8s. 4d.

Train fares of children and guardians paid by Committee on account of poverty of parents, 87 cases, at a cost of £13 18s. 10d.

Head Teachers were advised that children should do no near work in 15 cases.

Results of re-examination at School of children seen at Eye Clinics:—

	Cases in which parents defrayed expenses of visit to Clinic.	Cases in which Committee paid expenses.	Totals.
No. Examined	625	417	1042
Glasses worn and found to be satisfactory	144	116	260
Glasses requiring repairs	41	60	101
Glasses obtained but not worn on day of examination	57	40	117
Change of lenses necessary	...	2	2
Glasses not obtained	28	3	31
Vision improved, no need to wear Glasses	133	38	171
Referred for Re-Examination	204	124	328
Frames requiring changing	1	8	9
Glasses lost	3	6	9
Frames broken or bent	14	20	34

It will be noticed from the above table that in 28 cases glasses were not obtained after prescriptions had been given. The provision by the Committee of free spectacles in necessitous cases has not only been of the greatest assistance to the child, but has proved a great economy in the time of the examining doctors.

(g) EAR DISEASE AND HEARING.

Treatment for ear disease was carried out at the Clinic, Stanley Road, Newport.

326 cases of ear disease were referred for treatment. Of this number 81, or 24·8 per cent., were brought to the Clinic. As will be observed in the tabulated list, otorrhœa is the most prevalent factor in ear trouble among the children, and it is essentially one that requires careful supervision in its treatment, otherwise regrettable sequelæ might follow.

57 cases of defective hearing were referred to the local medical practitioners.

(h) DENTAL DEFECTS.

The following table shows the dental work done during 1927:—

Clinic.	Number of Children treated.	Percentage of appointments kept.	No. of Fillings.	No. of Gas Cases.
Abercarn ...	138	76·9	87	110
Blaenavon ...	198	67·2	163	140
Blaina ...	285	65·8	241	263
Crumlin ...	175	65·7	145	139
Newport ...	362	63·1	320	280
Pengam ...	441	60·8	482	283
Pontypool ...	63	64·7	66	30
Rhymney ...	123	53·3	111	81
Tredegar ...	144	68·4	189	102
Travelling Clinic ...	446	80·6	554	223
	2375	66·7	2358	1651

Train fares of children and guardians were paid by the Committee on account of poverty of parents in 38 cases at a cost of £3 14s. 11d.

(i) CRIPPLING DEFECTS.

The following are the cases at present on the County Register between the ages of five and 16 years:—

Surgical Tuberculosis	...	...	...	35
Paralysis	...	...	...	117
Rickets	...	...	...	15
Congenital Deformities	...	...	...	143
Crippling caused through accidents, etc.				24
				<hr/> 334 <hr/>

Mr. Arthur Rocyn Jones, F.R.C.S., the Consulting Orthopædic Surgeon, visits the Central Orthopædic Clinic, Newport, once a month for the purpose of examining new cases and re-examining children who have received treatment at the Royal National Orthopædic Hospital. The following cases were seen by him in the year.

NEW CASES.

Poliomyelitis	...	...	6	Fracture lower end humerus	1
Genu Valgum	...	...	4	Sprengel's shoulder	1
Scoliosis	...	...	4	Pseudo Hypertrophic, muscular	
Talipes Equino Varus	...	...	4	Paralysis	1
Hemiplegia	...	...	3	Angioma	1
Infantile Paralysis	...	...	2	Cleft Palate	1
Congenital Dislocation of Hip	...	...	2	Pes Plano Valgus	1
Birth Palsy	...	...	2	Tubercular Elbow	1
Coxa Vara	...	...	2	Torticollis	1
Congenital Equino Varus	...	...	2	Symmetrical Oedema	1
Pes Planus	...	...	2	Old Fracture Leg	1
Deformity of toes	...	...	2	Encephalitis Lethargica	1
Protruding bone after operation	...	...	1	Paralysis of legs and arms	1
Hemiplegia and Pes Cavus	...	...	1	Paresis	1
Dislocated elbow	...	...	1	Paralysis lower limbs	1
Paralysis of left arm	...	...	1	Weakness of legs	1
Progressive muscular Atrophy	...	...	1		
Rickets	...	...	1		57
Spastic Paraplegia	...	...	1		—

Recommendations.

Admission to the Royal National Orthopædic Hospital, Great	
Portland Street	15
Admission to the Royal National Orthopædic Hospital,	
Country Branch, Brockley Hill	12
Splint ordered	1
Boots to be altered	10
Massage or Electricity treatment at Newport Clinic	3
Referred to Welsh National Memorial Association	1
Referred for X-Ray examination	2
Referred to Neurologist	1
Artificial leg recommended	1
Crutches recommended	4
Home treatment recommended	1
Continue with present Calipers for 9 months	1
Continue treatment at Royal Gwent Hospital	1
Exercises advised	1
Re-examine	2
No treatment recommended	1

In addition, 28 children previously seen by the Consultant Orthopædic Surgeon were re-examined at the Newport Clinic.

Nine children of school age were at the Royal National Orthopædic Hospital, or its Country Branch at Brokley Hill, on the first day of the year, and 15 new cases were sent there during the year under the scheme whereby 12 beds have been retained for crippled children (of school age and under that age) of this County.

The defects from which these 15 children suffered were:—

Congenital Equino Varus	...	...	...	2
Tubercular Knee	...	...	...	1
Spastic Paraplegia	...	...	...	1
Infantile Paralysis	...	...	...	3
Congenital Equino Varus left and Right				
Pes Planus	...	...	...	1
Poliomyelitis right lower limb	...	...	...	1
Hemiplegia and Birth Palsy	...	...	...	1
Congenital dislocation of Hip			...	1
Multiple deformities	...	...	...	1
Dorsal Scoliosis with rotation of right ribs				1
Right Infantile Hemiplegia	...	...	...	1
Congenital Dislocation, left hip			...	1
				—
				15
				—

On the last day of the year there were eleven school children at the hospitals.

Upon their discharge from the Orthopædic Hospital the County Medical Officer takes charge of their after care. He sees them periodically at the Central Orthopædic Clinic, Newport, and supervises massage and electrical treatment, when this is necessary. A close watch is kept upon the surgical boots and instruments which have been supplied to the children, to see that these are worn constantly and continue to be suitable. Seventy-four examinations were made by him during the year.

Seventeen children attended the Clinic for massage and electrical treatment during the year, making 627 attendances.

Eight surgical boots, two walking instruments and five other surgical appliances for physically defective children were supplied by the Committee. Alterations to boots and instruments were made in sixteen cases.

The sum of £8 4s. 11d. was received from parents towards the cost of these appliances, for which the Education Committee paid £58 13s. 6d.

Ten children with surgical tuberculosis were treated at the hospitals of the Welsh National Memorial Association.

The district orthopædic clinics at Crumlin and Pengam School Clinics were used for the examination of cases by the County Medical Officer.

It was intended that a special report upon the orthopædic department and its work should be written up, but owing to the outbreak of Small Pox in the County this report has had to be deferred. It will be supplied at the earliest favourable opportunity, and the Medical Officer is confident that it will afford the Committee much satisfaction that they have undertaken this work, for some remarkable cures have been effected.

9. OPEN-AIR EDUCATION.

The provision already made for open-air education was continued during the year. It is to be regretted that the financial condition of the County has not permitted any extension of this valuable work.

(a) *Playground Classes.*

In fine weather playground classes are arranged at most of the Schools where facilities are available.

(b) *School Journeys.*

These are part of the curriculum of every School and take the form of a Nature Study lesson.

(c) *School Camp.*

Under present financial conditions the institution of a school camp is not possible.

(d) *Open-air Classrooms.*

Open-air classes were held at four of the Authority's Schools, and consisted of six departments, viz. :—

School.	Department.	No. selected from school for open-air class.		
		Boys.	Girls.	Total.
Aberbargoed	Mixed ...	—	38	38
Libanus (Blackwood)	Mixed ...	21	16	37
Do.	Infants ...	22	21	43
Pentwyn	Mixed ...	10	10	20
Do.	Infants ...	11	11	22
Tynywern (Trethomas)	Mixed ...	15	10	25
	Totals	79	106	185

It was not possible to utilise the Open-air Classrooms at Pontllanfraith, Cefn Forest, Glanhwy, Gwyddon, and Phillipstown owing to the demands for additional accommodation at the Schools for elementary education.

The advantages of these classrooms to weakly children are so great that steps should be taken to increase the ordinary accommodation rather than commandeer any of the few rooms that are suitable for the purpose.

The reports of the Medical Officers in charge of the classrooms are as follows:—

ABERBARGOED:—DR. A. ROBERTS.

This department was visited in February and November of 1927. All children examined on both dates gained weight, some of them to quite a large extent. The department has accommodation for 40 children and is usually kept up to the total.

Attendance in February (on exam.)	...	...	32
Attendance in November (on exam.)	...	...	29
Average attendance for the year	...	...	33
Average number on roll for the year	...	...	39

No children in the department show definite evidence of tuberculosis, but are mainly those suffering from malnutrition, cardiac trouble and general debility.

PENTWYN:—DR. M. M. PROUDFOOT.

There are two open-air classrooms in this school, one in the Infant department, and one in the mixed. The children selected for the open-air department are those suffering from malnutrition, anæmia, bronchial catarrh, enlarged tonsils, etc. They are selected during the ordinary school Medical Inspection. The results continue to be very satisfactory. At the end of the year there were 22 children in the Infant classroom, and 24 in the Mixed. At the last inspection it was found that all were gaining steadily in weight, and improving in general health. A few were found fit to be transferred to their ordinary classes. The attendance was good in both departments throughout the year.

LIBANUS:—DR. P. R. WHITAKER.

There are two open-air classrooms in this school, one in the Infants and one in the Mixed Department. Both are kept at their full capacity, i.e., 40 in each.

As in previous years, the children are selected during the routine medical inspection by reason of some defect, such as, heart disease, bronchial catarrh,

tonsils or anaemia. They are then inspected at intervals and those who are fit are transferred to the ordinary class. The progress made by the children was quite satisfactory, and the attendance good.

10. PHYSICAL TRAINING.

The School Medical Service is closely co-ordinated with the work of physical training in the Schools and the Assistant School Medical Officers have been instructed to note all children who are likely to derive benefit from a course of physical exercises. These cases as they arise are referred to the County Organisers of Physical Education, Mr. F. Johnston and Miss E. A. John, who make the necessary arrangements for the children to receive instruction.

The joint report of the Organisers is as follows:—

“ **General.** The Organisers of Physical Training have pleasure in submitting their report for the year 1927. During the year visits were made by us to the schools as under:—

Mixed Departments	...	...	382
Boys' Departments	...	...	42
Girls' Departments	...	...	34
Infants' Departments	...	...	88
Secondary Schools for special work and remedial cases	...	...	12
Unemployed Youths Centres	...	...	6

In addition 20 visits were made to Swimming Baths, for the purpose of organising instruction, giving assistance and holding tests for certificates.

Twelve meetings held in connection with the organising of athletic events were attended; assistance was given at 18 School Sports and at 2 Swimming Galas; attendance has also been made at school football matches, Rugby and Association.

During the year our work has proceeded along the usual lines; one departure which should be mentioned, is the holding of Refresher Courses for men teachers as recommended by the Board of Education. At present two classes are being held at Risca on Tuesdays, and Blackwood on Thursdays; although only one hour per week is set apart for this work beneficial results are already noticed.

We have been able in many schools to obtain the requisite time and attention for the successful carrying out of the physical training lesson.

Despite formidable handicaps through lack of indoor and outdoor accommodation, paucity of apparatus, fewness of playing fields and open spaces; with the co-operation of the teachers as a body, we have been able to do good work.

Very few schools visited failed to do meritorious work in one direction or another, some are doing work of much excellence.

His Majesty's Inspector visited the County during November and saw a number of schools of different types at work.

Physical Exercises. An appreciable advance has been made in the general construction of lessons, as a result of much patient effort; the objective being to delete formal drill and make the lesson more interesting and refreshing to the children; there is evidence of careful preparation on definite lines, great care of sequence and progression.

On the other hand, in some schools, there is a tendency to depend too much on general knowledge of the subject in the construction of the lessons without due reference to any particular table, as set out in the Board of Education Syllabus; this is undesirable; the memory cannot be relied upon to arrange tables in progression and according to established principles; just as in any other lesson, the best results can only be obtained by due preparation. It is most important that special attention should be paid to accurate starting positions, especially in the performance of the formal exercises of the Syllabus; every school visited has had corrected positions explained and demonstrated with consequent benefit to the posture of the children.

Team Work. The principles of the Team System are gaining ground, that is, the method of organising a class in teams which work together under their leaders in many of the exercises and games, and often in competition with other teams; this method furnishes the children with the most intelligible motive for co-operation and effort and they eventually realise that the resultant enjoyment arises through submitting to a leader, in this way discipline is stimulated.

The training received in developing the team system provides a series of lessons in citizenship; the wearing of a team badge impresses upon the child the importance and responsibility of his or her team as a unit, with definite aims and objectives.

The keeping of team records are essential for marking progress and encouraging the members of a team to do better, this work could be relegated to team leaders; many teachers are following this plan with excellent results.

Rural Instruction. Owing to the fact that in many small rural schools children of different ages have to be taught together, the most satisfactory course of physical training consists of the maximum amount of general activity, to fulfil the instinctive desire for activity, and care with fundamental positions, especially those bearing on correct posture. Demonstrations, corrections, special games and exercises based on the Board of Education Rural Syllabus have been given during our visits. It is noticeable that many rural school children show marked improvement in alertness and quick response to orders.

Athletic Organisation. The scheme of group athletic sports, inaugurated in 1922, is still in operation.

Successful meetings were held at Cwmcarn, Cwmbran, Blackwood, Abergavenny, Risca and Rogerstone, Panteg, Caerleon, Wentlooge, Newbridge and Crumlin and Pontypool.

A very interesting and successful County Championship Sports was held at Caerleon on Saturday, July 16th—chief honours were obtained by the Caerleon and district Schools, they retain the Championship Shield, subscribed for by the teachers of the County, until the next meeting.

Owing to local circumstances St. Mellons, Goytre, Glascoed and other schools held their own Sports.

Successful meetings were also held at Tredegar and district, Blaenau and District.

It is hoped during the next Sports season to obtain the co-operation of outside meetings in order to make the County Championship truly representative.

Every credit is due to those Teachers, Heads and Assistants who devote much of their leisure time to training children and arranging the Local and County Meetings.

The Rugby and Association Football Leagues are still flourishing in the County, the organised games as played in the school playgrounds and on available open spaces prove a valuable training in leading up to these higher games of skill.

The Sports and Games as a whole were more successful than in 1926, a greater number of schools and children taking part.

Indoor Work. In order to make progress, foster continuity, and to combat the prevalence of wet weather, indoor work is a necessity, despite

poor accommodation, lack of shed space, and the difficulties of using Central Halls for physical training, much work has been accomplished.

The syllabus tables can be adapted; of necessity, they have to be less active, but the lesson can follow the ordinary plan.

Many changes of position can be made use of even in desks. Part of the time may be occupied in dealing with special points which it is perhaps less convenient to practice in the playground, as, for example, (a) securing improvements in positions and movements which are not as correct as they should be. (b) Teaching and practising new movements, especially correcting common faults. (c) Use of the blackboard for explaining a new game, march or dancing steps.

If a game is suitably chosen, no noise or undue disturbance such as would disorganise other classes at work is necessary. Demonstrations of correct positions by pupils in front of the class can be made use of so that the children visualise a position or movement, and better work is done when taken out doors; all these points have been demonstrated during our visits and some schools have obtained excellent results.

Pamphlets, Circulars and Publications. A Pamphlet of hints and suggestions for the carrying out of physical training and games in Infants' Departments has been issued.

Circulars dealing with different aspects of training in connection with "breaks," playground games, playground markings, tabloid or playground sports and athletics, organised games adapted for small and sloping playgrounds, country dancing, swimming and land drills, posture.

Several publications with reference to Physical Training have been issued by the Board of Education during the year; (a) Memorandum on Physical Education in certain schools and classes which are able to give a more extended training than that provided for in the Board's Syllabus of Physical Training.

This memorandum is issued to meet the needs of different types of schools; as far as the County is concerned its Central and Senior Schools would be affected—"by virtue of keeping or receiving their pupils over the age of 14, require to give a more advanced training than that provided in the Board's Syllabus of Physical Training for the ordinary elementary school course. This Memorandum sets out a number of points for the consideration of those responsible for organising and teaching physical exercises to boys and girls in these schools. The provision of apparatus permits of a broader and more varied training than is possible with free standing exercises alone."

As the Central and Senior Schools affected possess no apparatus the work done has been on the free standing exercise basis.

(b) Syllabus of Physical Training, extension for Older Girls. This is a supplement to the 1919 Syllabus of Physical Training for schools and contains work for pupils older than those catered for in the earlier publication. It is intended for use in Elementary, Central and Higher Schools which have not the services of a Teacher trained specially in this subject. Work on this syllabus has been demonstrated and interpreted during our visits.

(c) Reference Book of Gymnastic Training for Boys. The book establishes a sound and uniform basis of work with older boys in Secondary and Continuation Schools and covers the age groups from 8 to 18. As a guide to regular school work and as a reference book it is most valuable.

Teachers' Classes. During the year classes in Physical Training, Organised Games and Folk Dancing have been held for women teachers at Pontypool, Chepstow, Monmouth and Abergavenny. The instruction given was based on the Board of Education Syllabus; in consequence, there was an improved technique, better lessons through more careful preparation with a decided improvement in the outlook and response of the child.

Open Air Classes. To cater for exceptional circumstances, through variety of age and disability, modified tables from the Board's Syllabus are taught in these classes.

Where possible, the child joins its own age group for physical training and the extra periods are devoted to less formal work, care being taken with respiratory movements.

Remedial Exercises. Since the 1926 Report, 102 children requiring remedial exercises were examined. Of these 34 were "mouth breathers," 18 were suffering from scoliosis, 22 were round shouldered and 28 had kyphosis and other slight trunk deformities.

The system of inspecting the child during our visits and putting them through special exercises to suit the individual case and then compiling an illustrated list of the exercises to be handed on to the parents, where home conditions are favourable, has been followed.

Should home conditions be known and to be unsuitable, then the Head Teacher arranges for a member of the staff to give the special attention necessary, particularly the sitting position when engaged on ordinary school work.

Follow up visits and altered exercises are given from time to time, according to the child's progress.

Accommodation. The inadequate seating accommodation sometimes met with, particularly seats lacking the proper back support, seriously handicaps the good postural effects obtained through physical training.

The subject cannot be efficiently taught in a school improvided with a hall or large classroom and a commodious shed.

Physical training being the main health subject on the curriculum, it is important to keep these necessities in mind when future schools are erected and equipped.

Games Equipment. Many schools have accomplished meritorious work in connection with the collection of apparatus for organised games; coloured tapes, bean bags, broom sticks, tennis balls, footballs, net-ball posts, stool-ball and rounders outfits, hockey sticks having been obtained.

The games atmosphere is insured when schools can produce apparatus which is essential for the efficient carrying out of a successful lesson.

Many Education Committees of important areas give a grant towards the cost of providing such equipment.

Swimming. Substantial progress has been made in this branch of training during the past year.

The granting of certificates by the Education Committee has given a fillip to the work.

As an essential part of a child's education, it is gaining the support its advantages merit.

Despite the unfavourable climatic conditions, tests were held at the following baths:—Pontnewynydd, Abersychan, Griffithstown, Risca and the river at Abergavenny and Monmouth. Certificates were obtained by pupils at the following schools:—Pontnewynydd, Pentwyn, Abersychan, Pontnewydd, Cwmffrwdor, Pontypool George Street, Charity and Park Terrace, Pontymoile, New Inn, Cwmbran, Upper Cwmbran, Risca Town, Pontymister, Dan-y-graig, Wattsville, Abergavenny R.C., Hereford Road, Victoria Street, Monmouth Boys and Jones' Endowed. Altogether there were 150 certificates obtained. Boys elementary, 118; advanced, 22; Girls elementary, 10.

The Aquatic Sports held at the Abersychan Baths, lent by permission of the local Council, were a great success and stimulated inter-school competition and ambition.

Demonstrations. Throughout the year several demonstrations, to which parents were invited, were held; new games, dances and special exercises were indulged in, to the advantage of those teachers who were present.

Many children obtained shoes, tunics and blouses—this is a step in the right direction, as freedom is essential for sound physical development.

In connection with the National Playing Fields Association, the co-operation and assistance of the National Association of Organisers of Physical Training has been sought. As yet no branch of the N.P.F.A. has been formed in this County.

Country and Folk Dancing. This branch of the subject has increased its popularity and there is a keenness and interest in a larger number of schools than formerly.

At the Chepstow Fete this year the standard of work was high; the winners in the competition open to schools with under 80 on register, of which 8 competed, was won by the Undy Non-Provided School.

At the Griffithstown Competition thirteen teams competed. The standard of performance was good.

At Pontypool on Whit Monday 5 teams entered. There would have been a larger entry but for the fact that Sunday School Demonstrations took place on the same date, the winning school being Crumlin High Level for the second time.

A very successful Country Dance Meeting was held at Magor during the first week in August.

The Monmouthshire Branch of the English Folk Dance Society is doing excellent work at the many District Branches of this Society throughout the County; as the membership of these branches consist mostly of men and women teachers the subject has received great stimulation and considerably benefited the children.

In conclusion the Organisers of Physical Training desire to thank the members of the Education Committee and the Director of Education for their practical support of the Organisers efforts, and the Head and Assistant Teachers for their interest and co-operation."

11. PROVISION OF MEALS.

The prevailing industrial conditions necessitated the continuance of the provision of meals in the Ynysddu and Cwmfelinfach Districts until the 12th February, 1927. It was also found necessary to recommence the provision of meals in the Nantyglo and Blaina Area as from the 21st November, 1927. A few scholars were supplied throughout the year at the Coedypaen and Llandenny Non-provided Schools.

Altogether 8,314 meals (7,724 dinners, and 590 breakfasts) were provided to 350 individual scholars. The highest number provided for in any one week being 229 during the week ended 23rd December, 1927.

The arrangements made in connection with the provision of meals during the year, have been on the lines previously adopted, and the dietary previously prepared has been again in use.

Every endeavour has been made to provide a nutritious meal at low cost, and this has been accomplished. The cost per meal throughout the year did not exceed 2·5d.

12. SCHOOL BATHS.

There are no facilities for school baths.

13. CO-OPERATION OF PARENTS.

Parents are invited to and welcomed at all medical inspections and it is gratifying to note that they avail themselves of the opportunity in satisfactory numbers. The inspecting Medical Officers have become known to the parents through the medium of the local Eye, Dental and Infant Welfare Clinics, and their advice in regard to the children's health is eagerly sought.

14. CO-OPERATION OF TEACHERS.

The valuable help afforded by Head Teachers and their Assistants continues. They are called upon to assist very largely in the arrangements for the inspections, making a return of the children eligible for examination, preparing the cards of new cases, weighing and measuring the children, notifying the parents of the date of the inspection, and arranging a room for the use of the inspector.

The latter function is very often the cause of considerable inconvenience to the Head Teachers, for in only a few of the schools of the County is there a room to spare for the inspection. Yet they are always courteous and willing to oblige.

Practically the same routine is followed with the visit of the School Dentist, the exceptions of course, being the weighing and measuring of children and the notification of parents.

In many other ways the teachers are of assistance. They attend at the inspections and give information to the doctor from their own observation of the children, which is of value in the diagnosis of difficult cases. Their influence with the parents is of great service when the question of treatment of defect arises.

15. CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

There is very active co-operation between the Medical Inspectors and the School Attendance Officers. The Superintendent Attendance Officer writes each week to the Attendance Officers in whose districts the Medical Inspector is due to visit, instructing them to arrange that any absentees on the ground of ill health shall meet the Inspectors at the Schools. In addition, many special visits are paid to the schools for the purpose of examination of cases referred by the Attendance Officers. Medical certificates are given to the officers for production to the Magistrates and occasionally the Medical Inspectors attend Police Courts to tender evidence in school attendance prosecution cases.

16. CO-OPERATION OF VOLUNTARY BODIES.

There are at present no voluntary bodies in the Administrative County interested in the welfare of school children, with the exception of the National Society for the Prevention of Cruelty to Children. The three local Inspectors of the N.S.P.C.C. work in hearty co-operation with this department, and all cases referred to them receive prompt and effective attention. The bulk of the cases referred to the Society are verminous and neglected children. Thirty cases were referred to the Society in the year 1927.

17. BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

By powers conferred on the Education Authority under the Elementary Education (Defective and Epileptic Children) Act, 1899, a number of children are maintained at Special Schools.

They are as follows:—

Blind—

Royal Normal College, London	...	...	2
Swansea Institution for the Blind	...	...	16
Sunshine Homes	...	...	2

Deaf and Dumb Institutions—

Swansea	...	...	...	...	...	11
Derby	...	...	...	...	...	4
Margate	...	...	...	...	...	1
Bristol	...	...	...	...	...	3
Homerton School, Bucks	...	...	...	...	...	1
Oral School for Deaf, Cardiff	...	...	...	...	...	1
Mentally Defective—Attending Certified schools for						
Mentally Defective children, Feeble-Minded						4
Epileptic—Attending Certified Special Schools for						
Epileptics						2

Particulars of the numbers of children in these classes are given in the statistical tables at the end of this report.

Blind.

There were at the end of the year eleven blind children not at a special school or institution. Of these, one was awaiting a vacancy at Swansea Institution at that time, whilst four were under the age of seven years. There is difficulty in obtaining admission to institutions for this class of child. Four cases were unsuitable for admission to an Institution. In the other two cases efforts are being made to persuade the parents to allow the children to be admitted to an Institution.

There are sixteen partially blind children not in institutions. Two of them were awaiting vacancies at the end of the year, two were too young for admission, and two were also mentally defective. The parents' permission was awaited in ten cases, while the remaining nine cases were not suitable for a Blind Institution.

Deaf and Dumb.

Fifteen deaf and dumb and 14 partially deaf and dumb children suitable for institutional training had not been sent away, the reasons being as follows:—

Wholly Deaf:—Parents unwilling, two; awaiting admission at end of year, four; not suitable for institutions, three; replies awaited from parents, six.

Partially Deaf:—Parents refused, one; children showing signs of improvement, 13.

Action is taken to force unwilling parents to send their children to an institution, when circumstances warrant that course.

Mentally Defective.

There are 247 known mentally defectives between the ages of five and 16 years, and 45 (severe) and 24 (mild) epileptics.

In accordance with the suggestion contained in Circular 1349 of the Board of Education, dated 12th January, 1925, arrangements have been made for the supervision of these children by the Inquiry Officer of the County Mental Deficiency Committee, in conjunction with her duties under the mental Deficiency Act, 1913, but owing to the sharp epidemic of smallpox it was found impossible to carry on the above arrangements owing to the Inquiry Officer being placed in charge as Matron of one of the isolation hospitals. It is hoped this year to fulfil the obligations cited above.

The epileptic child is another type for which the provision of Special School education is difficult by reason of the shortage of accommodation.

Cases of mental deficiency, idiots and imbeciles, and defectives who by virtue of age cease to come under the jurisdiction of the Education Committee are referred to the County Mental Deficiency Committee under the Mental Deficiency Act, 1913.

Eleven imbeciles (six boys and five girls), and three idiots (two boys and one girl) were notified to the County Mental Deficiency Committee by the Education Committee during the year.

There is a shortage of accommodation at Special Schools for mentally defective children, although there are many who would benefit by such training. No further progress has been made in regard to the Special School for Mentally and Physically Defective Children which it is proposed to erect at Caerleon. Financial considerations appear likely to hold up the matter indefinitely.

Mental Defectives under School Age.

At present where the deficiency is evident, the children are observed and note of them made either (i) by the Medical Officers at Maternity and Child Welfare Centres, or (ii) by Health Visitors when visiting the homes in their respective districts.

18. NURSERY SCHOOLS.

No Nursery Schools are in existence in this County.

19. CONTINUATION SCHOOLS.

Medical inspection of pupils attending these schools has not been commenced.

20. CHOICE OF EMPLOYMENT.

No call upon the services of the County Medical Officer under the Education (Choice of Employment) Act, 1920, was made during the year.

21. SPECIAL INQUIRIES.

An enquiry was conducted in July by Dr. H. M. Ayres and Dr. D. Nathan Rocyn Jones, and in December, 1927, by Dr. M. M. Proudfoot and Dr. G. Russell, upon the nutritional condition of the school children in the Nantyglo and Blaina district. The statistics and observations will be found on page 10.

22. MISCELLANEOUS.

The following candidates for the teaching profession, etc. were examined by the School Medical Inspectors during the year:—

Technical Free Student Teachers	4
---------------------------------	-----	-----	---

Four Teachers and one School Cleaner, absent from duties through illness, were also examined.

2. SECONDARY SCHOOLS.

The medical inspection of pupils attending secondary schools in the County was commenced in March, 1921. The pupils at the following schools come within the scheme of inspection:—

Abergavenny County School (Girls).
 Abergavenny Grammar School (Boys).
 Abertillery County School (Boys and Girls).
 Ebbw Vale County School (Boys and Girls).
 Newbridge Secondary School (Boys and Girls).
 Pontllanfraith Secondary School (Boys and Girls).
 Pontypool County School (Girls).
 Pontywaun County School (Boys and Girls).
 Tredegar County School (Boys and Girls).
 Maesycwmmmer Secondary School (Boys and Girls).
 Abersychan Secondary School.
 Chepstow Secondary School (Boys and Girls).
 Nantyglo Secondary School (Boys and Girls).
 Rhymney Secondary School (Boys and Girls).

The general scheme of inspection being carried out is:—

- (i) Examination of all children upon admission, the character of the examination to depend upon the date of the last examination made in the Elementary School.
- (ii) Full examination of all children at 12 years of age.
- (iii) Subsequent to the age of 12, yearly examination, the degree and extent varying according to the previous record and other circumstances of the child.
- (iv) At the age of 15 a full routine examination to be made of each pupil, and the annual re-examination to continue so long as the pupil remains at School.

A visit of the School Medical Inspector is made each term. A male medical inspector examines boys and a lady inspector the girls. The instructions given to the School Medical Inspectors embody all the suggestions set out in the Memorandum of the Board of Education dealing with this subject.

Power is given to the Committee to extend to pupils of Secondary and other schools under this section of the Act the facilities for treatment which are already available for Elementary School children, viz.:—

Examination of eye defects and the provision of spectacles.
 Dental inspection and treatment.
 Operative treatment of tonsils and adenoids.
 Treatment of minor ailments and defects (e.g., skin diseases, running ears and sore eyes).
 Remedial exercises.

It has been decided that such treatment shall be available for Secondary pupils at the Committee's School Clinics. The Higher Education Committee has approved the same scale of charges as has been fixed for Elementary School children and which was detailed in the report for 1924.

Table showing the number of re-examinations made by Medical Inspectors and the result thereof:—

Condition	No. of defects for which treatment was considered necessary.			No. of defects for which no report is available	No. of defects treated	Results of Treatment.			No. of defects not treated	Percentage of defects treated
	Old Routine Cases	Special Cases	Total			Remedied	Improved	No improvement.		
Nutrition	84	...	84	30	54	19	23	12	...	64.2
Uncleanliness { Head	48	...	48	15	31	26	5	...	2	64.5
{ Body	...	...	...	...	...	...	...	...	...	...
Clothing { Dirty	...	...	...	...	...	...	...	...	...	...
{ Excessive	...	...	...	...	...	...	...	...	...	...
{ Ragged	...	...	...	...	...	...	...	...	...	...
Poor Footgear	...	...	...	...	...	...	...	...	...	...
Skin {	Ringworm { Head	...	...	...	...	...	...	...	...	...
	{ Body	...	...	...	...	...	...	...	...	...
	Scabies	...	...	...	...	...	...	...	...	...
	Impetigo	2	2	2	2	1	...	1	...	100.0
	Other Diseases	14	14	2	12	9	...	3	...	85.7
Eye {	Vision	184	184	51	127	62	26	39	6	69.0
	Squint	11	11	3	8	2	3	3	...	72.7
	External Eye disease	24	24	10	14	11	2	1	...	58.3
Ear {	Otorrhoea	8	8	4	4	1	...	3	...	50.0
	Defective Hearing	9	9	3	6	2	2	2	...	66.6
	Wax	3	3	...	3	2	...	1	...	100.0
Nose and Throat {	Enlarged Tonsils	145	145	49	93	30	16	47	3	64.1
	Adenoids	6	6	3	2	2	...	...	1	33.3
	Tonsils & Adenoids	22	22	7	13	4	2	7	2	59.0
	Mouth Breathing	22	22	6	16	9	2	5	...	72.7
	Other Diseases	...	...	...	...	...	...	...	...	...
	Enlarged Cervical Glands	45	45	16	29	17	8	4	...	64.4
	Defective Speech	14	14	6	8	2	2	4	...	57.1
	Teeth	137	137	44	74	35	24	15	19	54.0
	Heart and Heart Disease	99	99	37	62	10	9	43	...	62.6
	Circulation { Anæmia	56	56	17	39	18	9	12	...	69.6
Lungs {	Bronchitis	7	7	...	7	7	...	...	...	100.0
	Bronchial Catarrh	15	15	5	10	9	1	...	...	66.6
Tuberculosis {	Definite	...	...	...	...	...	...	...	...	...
	Suspected	2	2	1	1	...	1	...	...	50.0
	Other Forms	1	1	1	...	...	...	...	...	...
Nervous System {	Epilepsy	1	1	1	...	...	...	...	...	...
	Chorea	...	...	...	...	...	...	...	...	...
	Other Conditions	5	5	2	3	...	2	1	...	60.0
	Deformities	41	41	17	24	9	10	5	...	58.5
	Miscellaneous	169	169	57	112	29	29	54	...	66.2
Totals	1174	...	1174	387	754	316	176	262	33	64.2

No. of children re-examined—738 with 1,056 defects.

FINDINGS OF MEDICAL INSPECTION OF SECONDARY SCHOLARS.

The number of individual children inspected during the year was 1,282 first examinations, and 55 special cases: 517 re-examinations were also made.

Exclusive of the 738 re-examinations, 1,282 children had 476 defects which required treatment, and 1,049 defects needing to be kept under observation. These latter defects were not referred for treatment.

In reviewing the defects found amongst Secondary School pupils it is observed that out of the 1,282 pupils medically inspected, 249 were found at the time of their examination, to be physically fit. Of the remainder, 1,033 children had defects to the number of 424 needing remediation, and 1,040 defects requiring to be kept under observation, making an average of 1.00 defect per child. In extracting these figures a severe standard has been set, e.g., a child found with one decayed tooth was recorded as defective.

UNCLEANLINESS.

Unsatisfactory bodily cleanliness was found in two cases (one boy and one girl), i.e., .3 per cent. of all examined.

Only one pupil was found to have unclean clothing.

In 19 cases among the girl scholars, unsatisfactory head conditions (nits) were found, that is, in 3.3 per cent. of girls inspected. When compared with the figures of the previous year, a very marked improvement is shown in the conditions under this heading.

NUTRITION.

Nutrition was below normal in 94 cases, 7.3 per cent. of all the scholars seen at routine inspections.

42 boys—7.3 per cent. of the 569 examined.

52 girls—7.2 per cent. of the 713 examined.

NOSE AND THROAT CONDITIONS.

Abnormal nose and throat conditions which were discovered at the routine inspections were as follows:—

			Tonsils		Tonsils.		
	Number		and	Mouth	Slightly	Much	Slight
	Examined		Adenoids.	Breathers.	Enlarged.	Enlarged.	Adenoids.
			Per Cent.	Per Cent.	Per Cent.	Per Cent.	Per Cent.
Boys	... 569		1.7	.7	8.2	1.2	.1
Girls	... 713		.2	1.5	12.9	1.5	.1

Miscellaneous diseased conditions of nose and throat were found in 4.9 per cent. of all scholars examined.

Thirty cases (2·3 per cent. of those examined) required operative treatment for either tonsils or adenoids, or both.

GLANDULAR CONDITIONS.

The following table shows the extent of glandular conditions in the scholars examined at routine inspections:—

		Number Examined.	Submaxillary. Enlarged. Per Cent.	Anterior Cervical. Enlarged. Per Cent.	Posterior Cervical. Per Cent.
Boys	...	569	4·0	2·1	15·1
Girls	...	713	1·9	4·2	—

LUNG DISEASES.

There was one child (·07 per cent.) suffering from Bronchitis. Bronchial catarrh was discovered in one case (·08 per cent.), whilst other conditions accounted for three, or ·2 per cent. of those examined.

SKIN DISEASES.

No cases of Scabies or of Impetigo were found, but other skin diseases were present in 54 cases (4·2 per cent.).

EXTERNAL EYE DISEASES.

Thirteen cases of Blepharitis (1·0 per cent.) were found, and one case of Conjunctivitis. There was one, or ·07 per cent. cases of other forms of eye disease.

DEFECTIVE VISION.

143 cases of defective vision (11·1 per cent.) were recorded. The extent of defect is shown in the following table:—

	No. Examined	Only one eye defective.				Cases where both eyes were equally defective.	Cases of unequal error.				Squint	
		Right		Left			Right		Left			
		$\frac{5}{8}$ to $\frac{5}{8}$	$\frac{5}{8}$ and less	$\frac{5}{8}$ to $\frac{5}{8}$	$\frac{5}{8}$ and less		$\frac{5}{8}$ to $\frac{5}{8}$	$\frac{5}{8}$ and less	$\frac{5}{8}$ to $\frac{5}{8}$	$\frac{5}{8}$ and less		
Boys ...	569	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.
Girls ...	713	2.4	1.7	2.4	1.7	2.6	1.5	1.5	.7	1.5	.7	.1
		2.8	1.5	3.2	1.5	4.0	.8	1.9	1.5	2.2	1.2	.5

DEFECTIVE TEETH.

Defective teeth were found in 44·5 per cent. of children examined, as follows:—

	Number Examined.	Less than four decayed. Per Cent.	Four or more decayed. Per Cent.	Dirty Teeth. Per Cent.
Boys	... 569	42·3	4·5	·8
Girls	... 713	40·2	5·1	·4

DEFECTS OF SPEECH.

Defects of stammering occurred in 3 cases (·2 per cent.), and one case had defective articulation.

HEARING.

The hearing was defective in three cases (·2 per cent.), two cases occurring amongst the girls, and one boy.

DEFORMITIES.

Deformities due to Rickets were evident in three cases (·2 per cent.), two boys and one girl. Deformities due to various causes other than Rickets occurred in 77 cases (6·0 per cent.) of the children examined.

CARDIAC AND CIRCULATORY DEFECTS.

Organic heart disease was found in sixteen (1·2 per cent.) of the boys examined, and in fifty-one (3·1 per cent.) of the girls. Twelve (·9 per cent.) of the scholars brought for routine inspection were anæmic.

Miscellaneous diseases accounted for defects in 3 cases (·2 per cent.) of those examined at routine medical inspection.

TREATMENT.

Parents were notified by post of the defects discovered in their children. They were advised to consult their medical attendants and were notified that the treatment at the Committee's school clinics was available for those who could not afford to obtain such treatment.

The Committee's Health Visitors followed up the cases of defects requiring attention, and it was discovered that 64·2 per cent. of the defects had been treated.

The following work was undertaken at the Clinics:—

Twelve pupils made application for dental treatment, of whom nine were treated at the School Clinics.

Forty-seven appointments were made for errors of refraction and 39 pupils were examined:—

Spectacles were recommended in	35 cases
Spectacles not needed in	3 cases
Changes of spectacles necessary in	1 case

The following pupils are maintained at Special Schools:—

Blind—

	Male.	Female.	Total.
Royal Normal College, London ...	2	—	2
Royal School of Industry, Bristol ...	—	1	1
Swansea Institution for the Blind	3	3	6
College for the Blind, Worcester ...	1	—	1

Epileptic—

Epileptic Colony, Maghull ...	1	—	1
-------------------------------	---	---	---

Cripple—

Hedington Orthopædic Hospital ...	1	—	1
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I desire once more to express my appreciation of the valuable co-operation of the Headmasters, the Headmistresses and their Staffs. To their diligence in notifying to this department cases which required special examination, and to their efforts to facilitate the work of the Medical Inspectors and the Health Visitors whilst visiting the Schools, is due a very large part of the success which School Medical Inspection has attained in this County.

To my colleagues for their loyalty in carrying out the policy of the Department, I am greatly indebted.

I am,

Your obedient Servant,

D. ROCYN JONES,

School Medical Officer

6th June, 1928.

APPENDIX I.

STATISTICAL TABLES.

A. ELEMENTARY SCHOOLS.

Table I.—Return of Medical Inspections.

A. Routine Medical Inspections.

Number of Code Group Inspections:—

Entrants	...	...	...	6,124	
Intermediates	...	...	...	3,611	
Leavers	...	...	...	3,754	
					13,489
Number of other Routine Inspections					—
					13,489
Total Routine Inspections					13,489

B. Other Inspections.

Number of Special Inspections	...	...	1,802	
Number of Re-inspections	...	...	7,611	
		Total		9,413
Number of children specially examined				
owing to accidents upon School				
Premises	...	...	...	118
Total number of Individual Children inspected				
(Routine, Special, and Re-examinations)				23,020

Table II. A.—Return of Defects found in the course of Medical Inspection in 1927.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.
Malnutrition	...	55	1163	23	160
Uncleanliness	...	—	—	—	—
(See Table IV., Group V.).					
Skin	Ringworm—Scalp	25	—	6	—
	„ Body	4	—	—	—
	Scabies	19	—	12	—
	Impetigo	91	—	34	—
	Other Diseases (Non-Tuberculous) ..	357	—	50	—
Eye	Blepharitis	238	—	66	—
	Conjunctivitis	45	—	10	—
	Keratitis	2	—	—	—
	Corneal Opacities	—	—	3	—
	Defective Vision (excluding Squint)	782	549	113	22
	Squint	160	—	36	—
	Other Conditions	53	—	6	—
Ear	Defective Hearing	57	—	28	—
	Otitis Media	10	—	2	—
	Other Ear Diseases	128	—	36	—
Nose and Throat	Enlarged Tonsils only	652	2759	60	222
	Adenoids only	11	72	4	8
	Enlarged Tonsils and Adenoids	742	194	30	19
	Other Conditions	402	26	79	—
Enlarged Cervical Glands (Non-Tuberculous) ..		—	157	53	—
Defective Speech		64	40	26	—

TABLE II—continued.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring be kept under observation but not requiring treatment.
Teeth—Dental Diseases ...		3119	6021	339	55
Heart and Circulation	Heart disease { Organic	22	—	10	—
	{ Functional	—	787	—	136
Anaemia		274	—	99	—
Lungs	Bronchitis ...	114	762	20	—
	Other Non-Tuberculous Diseases ...	—	43	89	—
Tuber- culosis	Pulmonary:—				
	Definite ...	4	—	3	—
	Suspected ...	23	—	22	—
	Non-Pulmonary:—				
	Glands ...	1	—	6	—
	Spine ...	—	—	2	1
	Hip ...	—	—	—	—
	Other Bones and Joints ...	3	—	3	—
	Skin ...	—	—	—	—
	Other forms ...	1	—	2	—
Nervous System	Epilepsy ...	12	—	5	2
	Chorea ...	15	—	8	2
	Other conditions ...	—	19	16	—
Deformities	Rickets ...	8	61	3	—
	Spinal Curvature ...	44	—	14	—
	Other forms ...	115	80	6	—
Other Diseases and Defects ...		33	71	172	—

B.—Number of Individual Children found at ROUTINE Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).

GROUP.				NUMBER OF CHILDREN.		Percentage of children found to require treatment.
				Inspected.	Found to require Treatment.	
Code Groups:—						
Entrants	...	...	...	6,124	1,000	16.3
Intermediates	...	...	...	3,611	304	8.4
Leavers	...	...	...	3,754	387	10.3
Total	...	...	...	13,489	1,691	12.4
Other Routine Inspections ...				—	—	—

Table III. Return of all Exceptional Children
in the Area in 1927.

			Boys.	Girls.	Total.
Blind (including partially Blind).	Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind ...	10	9	19
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	7	4	11
	Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind ...	—	—	—
		Attending Public Elementary Schools ...	2	3	5
		At other Institutions ...	—	—	—
		At no School or Institution ...	5	6	11
Deaf (including Deaf and Dumb and partially Deaf).	Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf ...	12	11	23
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	9	6	15
	Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ...	—	—	—
		Attending Public Elementary Schools ...	7	4	11
		At other Institutions ...	—	—	—
		At no School or Institution ...	2	1	3
Mentally Defective.	Feebleminded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children ...	1	3	4
		Attending Public Elementary Schools ...	88	73	161
		At other Institutions ...	—	—	—
		At no School or Institution ...	41	41	82
	Notified to the Local Control Authority during the year.	Feebleminded ...	—	—	—
		Imbeciles ...	6	5	11
		Idiots ...	2	1	3

TABLE III—continued.

			Boys.	Girls.	Total.
Epileptics.	Suffering from severe Epilepsy.	Attending Certified Special Schools for Epileptics ...	2	—	2
		In Institutions other than Certified Special Schools..	—	—	—
		Attending Public Elementary Schools ...	15	6	21
		At no School or Institution ...	12	10	22
	Suffering from Epilepsy which is not severe.	Attending Public Elementary Schools ...	12	8	20
		At no School or Institution ...	2	2	4
Physically Defective.	Infectious Pulmonary and Glandular Tuberculosis.	At Hospital or Sanatorium approved by the Ministry of Health or the Board ...	13	14	27
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	Non-Infectious but active Pulmonary and Glandular Tuberculosis.	At Hospital or Sanatorium approved by the Ministry of Health ...	5	2	7
		At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Open-Air Schools ...	—	—	—
		At Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	—	1
	Delicate children (e.g., pre- or latent Tuberculosis, Malnutrition, Debility, Anæmia, etc.)	At Certified Residential Open-Air Schools ...	—	—	—
		At Open-Air Departments ...	79	106	185
		At Public Elementary Schools	677	564	1241
		At other Institutions ...	—	—	—
		At no School or Institution ...	42	39	81
	Active Non-Pulmonary Tuberculosis.	At Sanatorium or Hospital approved by the Ministry of Health or the Board ...	7	8	15
		At Public Elementary Schools	2	2	4
		At other Institutions ...	—	—	—
		At no School or Institution ...	3	3	6

TABLE III—continued.

			Boys.	Girls.	Total.
Physically Defective.	Crippled children (other than those with active tuberculous disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools..	9	2	11
		At Certified Residential Cripple Schools ...	—	—	—
		At Certified Day Cripple Schools ...	—	—	—
		At Public Elementary Schools	207	158	365
		At other Institutions ...	—	—	—
		At no School or Institution ...	61	59	120

Table IV. Return of Defects Treated during the year ended 31st December, 1927.

GROUP I.—MINOR AILMENTS.

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin:—			
Ringworm—Scalp ...	22	24	46
Body ...	—	4	4
Scabies ...	1	13	14
Impetigo ...	2	44	46
Other Skin Diseases ...	36	108	144
Minor Eye Defects (external and others) ...	51	235	286
Minor Ear Defects ...	81	234	315
Miscellaneous ...	—	—	—
Total ...	193	662	855

TABLE IV.

GROUP II.—Defective Vision and Squint.

Defect or Disease.	NUMBER OF DEFECTS DEALT WITH.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint) ...	1043	—	12	1055
Other Defects or Disease of the eyes ...	—	—	—	—
Total ...	1043	—	12	1055

Total number of children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme ... 554

(b) Otherwise ... 12

Total number of children who obtained or received spectacles:—

(a) Under the Authority's Scheme ... 523

(b) Otherwise ... 12

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

NUMBER OF DEFECTS.				
RECEIVED OPERATIVE TREATMENT.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or in Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total		
219	—	219	330	549

TABLE IV.**GROUP IV.—Dental Defects.**

(1) Number of children who were:—

(a) Inspected by the Dentists:—

Age Groups—

Number.

5	...	...	...	64
6	...	...	...	2625
7	...	...	...	4912
8	...	...	...	3854
9	...	...	...	3448
10	...	...	...	3413
11	...	...	...	2950
12	...	...	...	2383
13	...	...	...	2796
14	...	...	...	1852
				— 28297
Specials	...	...	...	—
			Total	28297

(b) Notified to require treatment (any permanent teeth defective)

14436

(c) Actually treated (included as above) ...

2375

(d) Re-treated during the year as the result of periodical examination ...

560

(2) Half-days devoted to	...	{ Inspection ... 390 }	Total	894
		{ Treatment ... 504 }		
(3) Attendances made by children for treatment	...		...	3236
(4) Fillings	...	{ Permanent Teeth ... 2094 }	Total	2,094
		{ Temporary Teeth ... — }		
(5) Extractions	...	{ Permanent Teeth ... 980 }	Total	5,704
		{ Temporary Teeth ... 4724 }		
(6) Administrations of general anæsthetics for extractions				1730
(7) Other operations	...	{ Permanent Teeth ... 11 }	Total	11
		{ Temporary Teeth ... — }		

GROUP V.—Uncleanliness and verminous conditions.

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

81

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

41914

(iii.) Number of individual children found unclean ...

4926

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

—

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

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

—

(b) Under School Attendance Byelaws ...

—

B. SECONDARY SCHOOLS.

Table I.—Return of Medical Inspections.

A. Routine Medical Inspection.

Number of Inspections at all ages:—

Boys	...	...	...	...	569
Girls	...	...	...	...	713
					<hr/>
		Total	...	...	1,282
					<hr/> <hr/>

B. Other Inspections.

Number of Special Inspections	...	55
Number of re-inspections	...	517
		<hr/>
Total	...	572
		<hr/> <hr/>

SECONDARY SCHOOLS.

Table II. Return of Defects found in the course of Medical Inspection in 1927.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.
Malnutrition	...	—	94	3	—
Uncleanliness	...	—	—	—	—
Skin	Ringworm—Scalp	—	—	—	—
	Body	—	—	—	—
	Scabies	—	—	—	—
	Impetigo	—	—	—	—
	Other Diseases (Non-Tuberculous)	54	—	3	—
Eye	Blepharitis	13	—	—	—
	Conjunctivitis	1	—	1	—
	Keratitis	—	—	—	—
	Corneal Opacities	—	—	—	—
	Defective Vision (excluding Squint)	143	80	—	—
	Squint	6	—	1	—
Ear	Other Conditions	1	—	—	—
	Defective Hearing	3	—	—	—
	Otitis Media	—	—	—	—
Nose and Throat	Other Ear Diseases	—	—	—	—
	Enlarged Tonsils only	18	139	7	—
	Adenoids only	—	2	—	—
	Enlarged Tonsils and Adenoids	12	15	—	—
Enlarged Cervical Glands (Non-Tuberculous)	Other Conditions	17	46	1	—
		1	—	—	—
Defective Speech	...	3	1	—	—

TABLE II.—Continued.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.
Teeth—Dental Diseases	...	63	528	18	—
Heart and Circulation	Heart disease Organic	7	—	2	—
	Functional	—	60	—	9
	Anæmia	12	—	5	—
Lungs	Bronchitis	13	—	—	—
	Other Non-Tuberculous Diseases	3	—	—	—
Tuber- culosis	Pulmonary :—				
	Definite	—	—	—	—
	Suspected	—	—	—	—
	Non-Pulmonary :—				
	Glands	—	—	—	—
	Spine	—	—	—	—
	Hip	—	—	—	—
	Other Bones and Joints	—	—	—	—
	Skin	—	—	—	—
	Other forms	—	—	—	—
Nervous System	Epilepsy	—	—	—	—
	Chorea	—	—	—	—
	Other Conditions	6	40	—	—
Deformities	Rickets	3	—	—	—
	Spinal Curvature	11	29	1	—
	Other forms	31	6	—	—
Other Diseases and Defects	...	3	—	10	—

B.—Number of Individual Children found at ROUTINE Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).

GROUP.				NUMBER OF CHILDREN.		Percentage of children found to require treatment.
				Inspected.	Found to require Treatment.	
All ages :—						
Boys	...	...	...	569	52	9.1
Girls	...	...	...	713	91	12.0
Total				1,282	143	11.1
Other Routine Inspections				—	—	—

SECONDARY SCHOOLS.

Table III. Return of Exceptional Children.

			Boys.	Girls.	Total.
Blind (including partially Blind).	Suitable for training in a School or Class for the totally blind ...	Attending Certified Schools or Classes for the Blind ...	6	4	10
Deaf (including Deaf and Dumb and partially Deaf).	Suitable for training in a School or Class for the totally deaf or deaf and dumb ...	Attending Certified Schools or Classes for the Deaf ...	—	—	—
Epileptics	Suffering from Epilepsy	Attending Certified Special Schools for Epileptics ...	1	—	1
	Suffering from Epilepsy which is not severe ...	At Public Secondary Schools	1	—	1
Physically Defective.	Non-infectious but active Pulmonary and Glandular Tuberculosis	At Public Secondary Schools	1	1	2
	Delicate Children ...	At Public Secondary Schools	104	60	164
	Crippled Children ...	At Public Secondary Schools	14	25	39
		At Certified Hospital Schools	1	—	1

Table IV. Return of Defects Treated during the year ended 31st December, 1927.

GROUP I.—MINOR AILMENTS.

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin:—			
Ringworm—Scalp ...	—	—	—
Body ...	—	—	—
Scabies ...	—	—	—
Impetigo ...	—	2	2
Other Skin Diseases ...	—	12	12
Minor Eye Defects (external and others) ...	—	14	14
Minor Ear Defects ...	—	13	13
Miscellaneous ...	—	—	—
Total ...	—	41	41

TABLE IV.

GROUP II.—Defective Vision and Squint.

Defect or Disease.	NUMBER OF DEFECTS DEALT WITH.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint) ...	39	—	96	135
Other Defects or Disease of the eyes ...	—	—	—	—
Total ...	39	—	96	135

Total number of children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme ... 31

(b) Otherwise ... 96

Total number of children who obtained or received spectacles:—

(a) Under the Authority's Scheme ... 31

(b) Otherwise ... 1

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

NUMBER OF DEFECTS.				
RECEIVED OPERATIVE TREATMENT.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or in Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
—	—	—	124	124

TABLE IV.

GROUP IV.—Dental Defects.

(1) (b) Notified to require treatment (any permanent teeth defective)	...	...	...	38
(c) Actually treated	...	...	...	9
(d) Re-treated during the year as the result of periodical examination	...	...	...	—
(3) Attendances made by pupils for treatment	...	...	...	9
(4) Fillings	{ Permanent Teeth ... 7 }	Total		7
	{ Temporary Teeth ... — }			
(5) Extractions	{ Permanent Teeth ... 4 }	Total		4
	{ Temporary Teeth ... — }			
(6) Administrations of general anæsthetics for extractions	6
(7) Other Operations	{ Permanent Teeth ... — }	Total		—
	{ Temporary Teeth ... — }			

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