

[Report 1924] / School Medical Officer of Health, Brighouse Borough.

Contributors

Brighouse (England). Council. nb2008024084

Publication/Creation

1924

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Borough of



Brighouse.



EDUCATION DEPARTMENT.

REPORT OF
SCHOOL MEDICAL OFFICER
FOR 1924.

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BOROUGH OF BRIGHOUSE.

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SCHOOL MEDICAL DEPARTMENT.

S T A F F .

F. A. BELAM, M.D., Ch B., D.P.H., School Medical Officer.

W. F. GREGORY, L.D.S. (Manchester), School Dentist.

Miss S. L. G. KING, Cert. R. San. I., School Nurse.

REPORT OF THE SCHOOL MEDICAL OFFICER FOR 1924.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION
COMMITTEE.

ORGANIZATION.

The vesting of the posts of School Medical Officer and Medical Officer of Health in one appointment has again this year had the excellent effect of co-ordinating the medical work in the schools with the health work of the Borough. 1924 may be regarded as a normal year so far as regards the work of school medical inspection. A new scheme of inspection was initiated with a view to setting free the School Nurse as far as possible for the important work of following-up. Under this arrangement the different code groups of children who are medically examined as routine cases were each allotted a school term—that is: all leavers were examined in the winter term, commencing in January; the entrants were seen in the summer term, as the weather is then supposed to be warm, and thus these small children can be stripped without fear of catching cold, that bugbear of the mothers of the very tiny ones. The intermediates were examined in the autumn term. At each of these three visits to the schools, special cases and re-examinations were also seen. By this means the School Nurse was enabled to get through a very considerable amount of house visiting, which she loyally carried out, and the effect is shewn in the much improved figures of those children who have received treatment for the defects discovered. The School Nurse thoroughly entered into the spirit of this endeavour, and deserves very great credit for the work that she has accomplished. As mentioned in my last report, a talk from one whom every mother knows and respects, after her eight years' intimate knowledge of all the parents in the town, is of infinitely more value than any number of notes or notices. And more and more parents are realising that the School Medical Service is out to help them and only advise them to do what is best for their own children, and that they are free agents, and in place of the children being taken out of their hands, as some say, more responsibility is being placed on the parents. They can no longer say they do not know what they ought to do—the advice is there for the taking, and if they do not choose to follow it, theirs alone is the responsibility.

Two half-days per week the schools are visited for the medical inspection by the School Medical Officer until all have been covered.

The numbers of those children medically examined in routine code groups will be seen to be considerably less than last year. This is due to several factors: chiefly to the fact that as the medical examination of 1923 took place during the last three months of the year every child was then seen, which naturally left a very small number of children for the first term's examination of 1924. Another factor is the decreasing number of children admitted to the schools. Each year less entrants are recorded, owing to the rapid fall of the birth rate in the last few years. Naturally this affects the entrants group. A check of all children admitted under 8 years old has confirmed this.

One afternoon per week was devoted to eye treatment, and the numbers of acceptances of glasses has been most encouragingly high. Very few refusals are received, and often these can be over-persuaded later.

The number of children who have received treatment for enlarged tonsils and adenoids is also most satisfactory. Although the arrangement is still in existence between the Borough of Brighouse and the City of Bradford, by which the Education Committee of the latter city provides treatment for these conditions (enlarged tonsils and adenoids) at a fixed fee chargeable to Brighouse, yet of this not much advantage is taken. The reason is that the parents object, not unnaturally, to the very necessary enquiries about their income, and the form to be completed; when by obtaining a "recommend" they can take the children to the Bradford Eye and Ear Infirmary, and have a most satisfactory operation performed. It really does not seem to be of moment how treatment is obtained so long as it is satisfactorily carried out, and reference is only made to this point to explain the reason for no case being treated this year under the Authority's scheme. Moreover, I am not at all sure that this does not show a spirit of independence which is quite praiseworthy, and besides, the children are treated, which is after all the main thing.

The School Dentist has carried out dental inspections at all the schools, and treated all those children whose parents accepted it.

SANITARY CONDITION OF SCHOOLS.

Every school was inspected by the School Medical Officer, and its sanitary condition noted. The recommendations made last year have practically all been carried into effect, which shews an enlightened outlook upon the part of the Education Committee and School Managers, and a really earnest desire to make the schools as healthy

as possible, which is very praiseworthy, and which ought to be realised by every parent in the Borough. The two chief improvements which have taken place during the year are mentioned. Other minor details have also received attention.

RASTRICK COMMON.—New windows have been put in, and have brought the lighting of this school to a satisfactory standard.

ST. JOSEPH'S.—The conveniences are now converted to water carriage system.

The general cleanliness of school buildings and classrooms has improved, though constant attention is always required to keep up to the mark.

The following defects are receiving attention :—

Insufficient lighting (natural)	..	..	..	2
" " (artificial)	..	..	..	1
" ventilation	..	..	..	4
Conveniences— Tub system	..	..	..	4
" Trough closets	..	..	..	2
Defective playground	..	..	..	1
" paving of conveniences	..	..	..	3

MEDICAL INSPECTION.

As above explained, the numbers presented for examination in the entrant and leaver groups were not so high as those of last year. The probable reasons have also been given. This year numbers are as follows :—Entrants, i.e., children up to and including 7 years old, 193, of these 96 being boys and 97 girls. 101 children of the entrant group were under 5 years of age ; this is 8 more than last year. Of these 27 were only 3 years old, mere babies. The children under 5 are a constant source of trouble to teachers and Attendance Officer alike, as they are frequently absent from school, and of course this attendance cannot be enforced, thus making accurate attendance registering complicated, and numbers attending uncertain. No doubt this spasmodic school attendance relieves the mothers of their care and worry, but I cannot see how it benefits the children, except to keep them out of the gutter. It is a useful arrangement for a bad home, but not for a good one, and, as stated last year, the increased risk of developing infectious disease, with which they are too young to cope, is considerable.

The eight year old group numbered 288, an increase of 24 over last year's figure, of which 148 were boys and 140 girls. There were 99 leavers and others, being 45 boys and 44 girls, the smallness of this figure having been previously explained.

In all 570 children were medically examined as routine cases. 53 children were seen as special cases. The School Nurse made 281 visits to children's homes in following up defects—more than four times the number of last year.

FINDINGS AT ROUTINE MEDICAL INSPECTION.

(a) UNCLEANLINESS.—The classification adopted is :—

A.	..	Quite satisfactory.
B.	..	Few nits.
C.	..	Many nits.
D.	..	Live vermin.

Those children in D. section are excluded from school, with a card to the parent containing instructions for cleansing. Those in C. section are given a card of instructions, but not excluded. The children were not quite so satisfactory as last year, but still compare very favourably with those of other towns, and the vast majority are kept clean.

UNCLEANLINESS.

Group.	No. Examined.	A.	B.	C.	D.	Percentage of C. & D.
Head—						
Entrants ..	193	131	39	9	14	11.9
Intermediates ..	288	210	57	14	7	7.3
Leavers & others	89	76	7	4	2	6.7
Total ..	570	417	103	27	23	8.8
Body—						
Entrants ..	193	140	42	10	1	5.7
Intermediates ..	288	238	45	5	0	1.7
Leavers & others	89	77	11	1	0	1.1
Total ..	570	455	98	16	1	2.9

The state of cleanliness of school children's heads as ascertained by the class-to-class inspections carried out by the School Nurse thrice annually in each school is as follows :—

RESULTS OF SPECIAL INSPECTIONS FOR VERMINOUS CHILDREN.

School.	Dates.	No. in-spected.	A. Clean.	B. Few Nits.	C. Many Nits.	D. Ver-minous.	Per-centage affected.
St. Chad's..	8/1/24	92	79	12	1	—	14
	1/5/24	96	75	20	1	—	21.8
	16/9/24	82	63	14	3	2	23.1
St. Andrew's Girls'	11/1/24	185	111	73	—	1	40
	6/5/24	193	125	60	8	—	35.2
	26/9/24	215	153	57	5	—	28.8
St. Andrew's Boys'	15/1/24	230	221	9	—	—	3.9
	13/5/24	225	208	17	—	—	7.5
	14/10/24	227	210	17	—	—	7.4
St. Andrew's Infants'	22/1/24	76	66	10	—	—	13.1
	20/5/24	117	97	15	3	2	17
	29/9/24	120	93	21	2	4	22.4
St. Martin's Infants'	29/1/24	212	149	58	4	—	29.2
	5/2/24	83	56	27	—	—	32.5
	3/6/24	109	78	30	1	—	28.4
	15/10/24	114	80	32	2	—	29.8
St. Martin's Mixed	1/2/24	69	42	25	1	1	38.2
	27/5/24						
	29/5/24	311	203	93	12	3	34.7
	25/10/24	294	211	67	15	1	28.2
St. Joseph's	19/2/24	81	48	31	2	—	40.77
	17/6/24	86	53	27	3	3	38.3
	27/10/24	81	46	26	7	2	43.2
St. James' ..	26/2/24	121	59	61	—	1	51.2
	18/6/24	160	89	55	10	4	43.1
	4/11/24	143	77	53	10	3	46.1
(*1 Impetigo and 1 Eczema)							
Longroyd Mixed	11/3/24	203	104	84	14	1	48.7
	24/6/24	212	110	87	11	4	48.1
	11/11/24	220	156	60	4	—	29

School.	Dates.	No. in- spected.	A. Clean.	B. Few Nits.	C. Many Nits.	D. Ver- minous.	Per- centage affected.
Longroyd Infants'	12/3/24	87	56	29	2	—	35.6
	1/7/24	118	83	31	2	2	29.6
	13/11/24	119	97	20	2	—	18.4
Carr Green Mixed	18/3/24	239	181	50	6	2	24.2
	2/7/24	252	196	44	10	2	21.8
	25/11/24	266	231	33	2	—	13.1
Carr Green Infants'	25/3/24	73	55	17	1	—	24.5
	8/7/24	74	55	18	1	—	24.3
	2/12/24	75	60	14	1	—	20
Victoria Central	1/4/24	127	104	21	2	—	17.3
	15/7/24	116	97	18	1	—	16.3
	11/12/24	109	91	17	1	—	16.5]
Victoria Infants'	8/4/24	82	60	20	2	—	26.8
	22/7/24	101	77	23	1	—	23.7
	9/12/24	68	59	9	—	—	13.2
Rastrick	2/4/24	190	169	19	—	—	10.5
			(*1 Impetigo and 1 Eczema)				
Common	16/7/24	213	200	13	—	—	6.1
	8/12/24	210	205	5	—	—	2.3
		6876	5138	1542	153	38	25.2

* Impetigo 3, Eczema 2.

It will be observed from these large figures of the numbers of children inspected that every child in school was seen at each visit, and if note is made of the percentage affected in the last column the effect of this is well seen, for on the whole the percentage found affected is less at subsequent inspections than at the first. Of course, as in every town, there are some hard cases who always require constant "gingering-up," but these are not many in this Borough. Although 25% affected appears very high, it must be realised that this figure includes all children not quite clean, the vast majority of whom only have a few nits. Taking the percentage of those actually found with verminous heads, it is only 0.55%, and adding those found with many nits only brings the percentage up to 2.80%, which cannot

be called bad. I think the figures again emphasize what I mentioned last year, that taken as a whole Brighthouse children are remarkably well cared for. I cannot pass from this subject without drawing attention to the good, hard work done by the School Nurse in carrying out all these additional inspections. For the first time all boys' heads were inspected as well as girls, and I think the number of children inspected will compare favourably with those of any other town taken in proportion.

(b) **MINOR AILMENTS.**—Only nine minor ailments were discovered at routine medical inspection, and the School Nurse found an additional five during her class-to-class inspection. As before, teachers send all children to the School Clinic as soon as they discover any sore, etc.

(c) **TONSILS AND ADENOIDS.**—37 children were advised to obtain operative treatment for enlarged tonsils. A further 49 had tonsils sufficiently enlarged as to require observation. Three had adenoids needing removal, and 12 others were marked for observation. Nine children required tonsils and adenoids removed, and two more needed observation for the same condition. As before, handkerchief drill was advocated as well as breathing exercises, and several parents have testified to the marked improvement in health of their children subsequent to operation for these throat and nose conditions. The teachers thoroughly appreciate the importance of handkerchief drill and breathing exercises, and promised co-operation.

(d) One case of suspected **PULMONARY TUBERCULOSIS** was found, and referred to the Dispensary.

(e) **SKIN DISEASES.**—One case of ringworm of the body, and one case of impetigo were found, and referred for treatment.

(f) **EXTERNAL EYE DISEASE.**—Two cases of blepharitis required treatment, and two more slight cases were found. Three children with conjunctivitis were recommended treatment.

(g) **VISION.**—54 cases of defective vision were found to require glasses, and a further 18 were referred for subsequent observation, in case their sight should deteriorate and glasses eventually be needed. In addition, 20 special cases were seen for whom glasses were considered necessary.

(h) **EAR DISEASE AND HEARING.**—Two children with otitis media required treatment, and one old case was referred for observation, as there was no discharge then apparent.

(i) **DENTAL DEFECTS.**—At medical inspection 74 children were advised dental treatment, and a further 34 had three decayed teeth

each. The School Dentist examined 1147 children of between 5 and 16, and offered treatment to 452, of whom 340 were actually treated. The fact that these are smaller figures than those of last year in his opinion indicates the improvement already effected by treatment of the young children, so that their teeth are sound and require no further attention later.

(j) CRIPPLES.—At routine inspection only two children were found with rickety deformity, so bad as to need treatment; one other was placed under observation. Two other cases of deformity required treatment.

As specials, one child deformed by rickets and one with a spinal curvature were found to need treatment. Of course all the cripples seen last year were again re-inspected, but do not come under the category of new cases. The Board of Education have held up the commencement of remedial work by massage for these cases up to the present, but I believe the inspector sent down to investigate this scheme seemed favourably disposed, so possibly we may be permitted to start before long. At present parents are advised to consult their own doctor or go to a hospital.

(k) CLOTHING AND FOOTWEAR.—Again this year it is satisfactory to find so few children unsatisfactory in either of these two respects. Out of 193 entrants, 4, or 2.1% only, had very unsatisfactory boots, and 6 (3.12%) were deficient as to clothing, but none were so bad as to be very unsatisfactory. Of 288 intermediates, 6 (2.1%) had poor, and 2 (0.7%) very poor boots, while 16 (5.5%) were deficient as to clothing, and only 1 (0.3%) was very deficient in this respect. Among 67 leavers, only 1 (0.4%) had faulty footwear, and 2 (3%) faulty clothing, but these could not be described as being very unsatisfactory. These figures are decidedly promising, and indicate the decrease of unemployment quite well. The Education Committee supply clogs if necessity demands, and clothing is found by the ever-willing teachers.

(l) VACCINATION.—Though not quite so bad as last year, the percentage of children unprotected by vaccination is far too high. During the past year it has been seen in Canada that the mild type of smallpox can suddenly change to a virulent form, and there have been some severe cases in this country. So that the importance of protection against this disease is again emphasized, but I well know that no attention will be paid unless and until a severe epidemic comes along. Let us hope that it will not then be too late. Again, the disease has been in Huddersfield, with contacts in Brighouse. Of those children medically examined as routine cases the figures are as under:—

	No. Examined.	No. Vaccinated.	Percentage Vaccinated.
Entrants ..	193	45	23.3
Intermediates	288	86	29.8
Leavers ..	67	20	29.8

(m) PHYSICAL MEASUREMENTS.—The subjoined table shows the average height and weight of the Brighthouse children of 8, 12 and 13 years of age, as compared with the same figures relative to the children in the general population. Analysis of these figures shows that Brighthouse children are just under the average height as regards boys of all three ages, and girls of 12. Girls of 8 and 13, however, are alone over the average this year, though last year all were up to the average. As to weight, Brighthouse children are in most cases considerably below standard—in fact, as much as five pounds in respect of the girls of 12 and 13. This is more marked even than it was last year. The cause is not very easy to ascertain. It is probably due to more than one. Probably overcrowding and unsuitable houses have a good deal to do with it, as well as unsuitable food and late hours.

		Height in inches.		Weight in lbs.	
		Average Brighthouse.	Average Population.	Average Brighthouse.	Average Population.
Boys ..	8	44.9	47.05	53.7	54.9
	12	54.5	54.99	71.04	76.7
	13	56.5	56.91	82.46	82.6
Girls ..	8	47.4	46.6	51.4	52.1
	12	54.3	55.66	71.9	76.4
	13	58.0	57.77	82.5	87.2

(n) NUTRITION.—No children were referred for treatment on account of malnutrition. Some fifteen were sufficiently below the average as to be placed under observation. The comments I made last year on this subject probably again apply. I have again mentioned briefly in the previous paragraph the points in question.

INFECTIOUS DISEASES.

As mentioned last year all cases of infectious disease in school children are known to the School Medical Officer, owing to his position a sMedical Officer of Health, should they be notifiable, and from the report of the School Attendance Officer in the case of non-notifiable infectious disease.

INCIDENCE OF INFECTIOUS DISEASES AT THE VARIOUS SCHOOLS.

Schools.	Chicken Pox.	Diph- theria.	Scarlet Fever.	Measles.	Whoop- ing Cough.	Mumps.	Total.
Longroyd Mixed ..	3	1	3	—	1	—	8
Longroyd Infants' ..	5	—	1	—	2	—	8
Rastrick Common ..	2	—	2	1	3	1	9
Victoria Central ..	—	—	2	—	—	1	3
Victoria Infants' ..	2	—	4	—	23	26	55
Carr Green Mixed ..	11	—	5	—	2	—	18
Carr Green Infants' ..	24	—	6	—	17	—	47
St. Martin's Mixed ..	—	—	1	1	—	—	2
St. Martin's Infants' ..	—	—	—	—	1	5	6
St. Andrew's Boys' ..	2	1	6	—	—	3	12
St. Andrew's Girls' ..	1	—	4	—	—	8	13
St. Andrew's Infants' ..	—	1	5	2	—	26	34
St. James' Mixed ..	17	—	4	—	7	4	32
St. James' Infants' ..	—	—	—	—	—	—	—
St. Joseph's ..	—	—	—	—	8	—	8
St. Chad's ..	—	1	—	—	2	18	21
Totals ..	67	4	43	4	66	92	276

A glance at the table shows the numbers of children in each school affected by the various diseases in question.

Compared with last year it will be seen that we had more chicken pox, less diphtheria and scarlet fever, hardly any measles, and much less whooping cough, but a small epidemic of mumps. This is all to the good, as mumps is almost invariably a mild disease, and is not a cause for anxiety.

SCARLET FEVER.—During the year there was no epidemic of this disease, but the 43 cases occurred sporadically, a small number each month. A certain grouping was at times noticeable, for instance a small group of cases was found in Rastrick and another at Carr Green end of the town. No school department had more than six cases throughout the year. Though on the whole the cases were straightforward and uncomplicated, some were very slight and others well marked. There was one death in a very severe case of septic scarlet in a boy of 5.

DIPHTHERIA.—Only four cases of this dread disease took place, but they were severe cases, and two died. The condition was very virulent, accompanied by much swelling of the throat.

NON-NOTIFIABLE INFECTIOUS DISEASES.

Whooping Cough, as noted in my report for last year, was in epidemic form during the winter 1923-24, and so most of the 66 cases of this disease were in the early part of the year. No deaths were recorded among school children, though there were several severe cases.

Measles only affected four children throughout the year. This was a very welcome fall from last year's figure of 74 cases.

Mumps gave the highest number of cases this year, affecting 92 children, but all were mild cases.

Chicken Pox followed it in number with 67, but these were also all mild, and there was no doubt as to the correctness of the diagnosis, nor was there a missed smallpox case.

FOLLOWING-UP.

During 1924 every case of defect was visited at home, including all cases of defective teeth found at routine medical inspection. The School Nurse made 281 visits to homes, and succeeded in persuading many parents to obtain treatment for their children who previously had not appreciated the benefit to be derived therefrom nor the necessity thereof. As this district is a very hilly one, visiting is a procedure involving considerable exertion, and I think the number of visits carried out is most satisfactory. An inspection of the tables dealing with cases treated during the year will show what these visits have accomplished this year, though no doubt those carried out at the latter end of the year will not fructify until 1925.

Re-examinations of all children previously found defective in some respect were carried out at each school by the Medical Officer, and the figures appear elsewhere in this report.

MEDICAL TREATMENT.

(a) THE SCHOOL CLINIC.—All children, whose parents so desire, who are suffering from ringworm, impetigo, eczema, otorrhœa, and external eye disease and other skin affections are treated at the School Clinic. Those with trivial abrasions or whose mothers seem capable of carrying out treatment are advised to be attended at home, and return for inspection at the Clinic at intervals. This is done so that the time of the School Nurse may not be wasted. Any lack of success on the parents' part is met by their being advised to let the child attend at the Clinic daily for treatment there. Of course due discretion is exercised, and all cases requiring it are treated at the Clinic.

(b) 493 cases were treated by means of the Clinic during the year, and there was an average daily attendance of about 25 on Mondays, Tuesdays, Thursdays and Fridays; about 15 on Wednesdays, and 8 on Saturdays, as on this day only special cases are told to attend. There were 4142 attendances of children at the Clinic during the year.

(c) EYE CLINIC.—During 1924 the prescribing of glasses was carried out at the School Clinic on Friday afternoons. All those parents whose children require glasses are advised to obtain them either from their own doctor or failing him are informed that for a nominal fee they can be supplied by the Education Authority. All parents desirous of availing themselves of this arrangement fill in a form of application. Enquiries into their means are then made by the School Attendance Officer, and the charge fixed accordingly. Then a notice is sent to the school at which is the child requiring glasses, asking the teacher to arrange its attendance on the Friday afternoon fixed. All cases are dealt with in rotation, and the usual number of new cases is six per session. The children are then atropised and refracted. The following week they are again seen as deferred cases, and the lenses found suitable under atropine again tried. If suitable, a prescription is given, and the following week the glasses are to hand and fitted on to the child, being previously tested to ensure their accuracy. During the year 88 children obtained glasses under this scheme, and a further 20 were dealt with privately under some parental arrangement made with doctor or hospital. Occasionally complicated defects of vision are referred for specialist advice to Bradford Eye and Ear Infirmary. As can be inferred from the numbers treated, the following-up of these cases has borne very good fruit, and parents do appreciate the facilities offered.

(d) Most of our operations for enlarged tonsils and adenoids are performed at the Bradford Eye and Ear Infirmary, but a small number are carried out privately, and some at other hospitals. Use is also made of the Authority's scheme, but this is only in certain cases, especially those children in homes, though of course the arrangement is open to be employed by all. A previous note explains the situation.

During the year 23 operations for tonsils and adenoids were performed in hospital, and 2 by private practitioners. Operations were also performed for nasal polypus 1, mastoid 1, and both conditions combined 1.

(e) TUBERCULOSIS DISPENSARY.—All suspected cases of tuberculosis are referred to the County Tuberculosis Officer, and he has been most helpful throughout the year in expediting necessary sanatorium treatment and examining the cases. His co-operation is very

willing and wholehearted. During the year, at my request, he kindly furnished me with a complete list of all children from Brighthouse under his care. This has been most useful, and accounts for the apparently large number of 22 cases of pulmonary tuberculosis among the specials. Of course these cases are not infectious, and the majority have clear chests. Any infectious case is excluded from school.

OPEN-AIR EDUCATION.

Very great strides have taken place during the year in this respect. After visiting several open-air schools in different towns, and noting all their points, both good and bad, finally a plan was made of what we think is the ideal open-air school. A site was then selected, also with great care. Finally the Board of Education gave consent after the Council had approved, and now all is in order for the erection of a first-class school for Brighthouse. The architect has avoided all the mistakes we thought others had made, and taken all their good points and elaborated upon them, until we think we shall have the best Open-Air School for its size in the country. It will accommodate 50 children, who will be selected by the School Medical Officer from those children whose numbers appear in Table III at the end of this report. It will be seen that there are 100 of them. In addition, those debilitated by illness, such as whooping cough, when free from infection, will be recommended for admission for a month or so, to give them the building up which a Convalescent Home ought to do were one available. By this means children who would not have been fit for re-admission to an ordinary school for several more weeks will get some teaching.

Meals will be provided, and thus the ill-nourished will benefit, also the anæmic and debilitated. Teaching will be subordinated to treatment, of which rest forms an important point, and this will be allowed for by provision of canvas beds, on which the children will sleep each afternoon. Open-air of course is the sine qua non, and the whole front of the classrooms is of moveable glass doors. The building is to be a permanent one of red brick, and on plan looks most prepossessing and handsome. Attention will be paid to its adequate warming, and gardens will be laid out by the children on specially arranged plots of ground.

Lighting will be electric, and conveniences—of course on the water carriage system—of the automatic flush type.

Bathrooms and lavatories all have their place, also cupboards and shelves, where each child may keep its own numbered things, such as tooth brushes, face flannels, towels and blankets.

I am confident that we shall have a school of which Brighthouse will be justly proud, and moreover we shall be able to say that our Education Committee have left no stone unturned in order that they may find means to benefit the children of our Borough. Great credit also must be given to the Director of Education for the way in which he has pushed the scheme and done his utmost to ensure its success, which I think is now certain.

PHYSICAL TRAINING.

A full report of this work is given by the supervisor on a later page. This lady is most enthusiastic and takes every pains to push forward her work and make certain that the physical welfare of the children of this Borough receives due attention. She still carries out remedial exercises for the Secondary School girls, and we hope ere long to extend her valuable assistance to those children who require it who have not succeeded in attaining the exalted heights of a Secondary School. We still await the Board's decision on this matter.

PROVISION OF MEALS.

During 1924, 14 children from five families were supplied with 360 breakfasts and 362 dinners, as well as 38 pints of milk, in all 722 meals. In 1923, 540 meals were given to 10 children, so that the figures are seen to be somewhat higher, an additional family being supplied this year to last. Special enquiries are made as to the actual necessity of each case before the meals are granted.

SCHOOL BATHS.

The school children attend regularly and receive instruction in swimming and life-saving, interest in which is stimulated by a gala and swimming sports. The Organiser of Physical Training deals with the subject in her report below.

CO-OPERATION OF PARENTS.

As before, the parents have been duly notified of the date upon which their children are to be medically inspected, but their attendance at such examination remains practically identical with that of last year. As compared with other towns, it is not bad, but still it could be considerably bettered. It is generally easier to explain any defect found and the necessity for its treatment verbally than by means of an official notice, and the parents' doubts and fears can be much better cleared up by a little talk. The attendance of parents at routine medical inspection is shown below in tabular form.

	Number Examined.	Number Parents.	Percentage of Parents.
Entrants	193	106	54.9
Intermediates ..	288c	103	35.8
Leavers	67	8	11.9

CO-OPERATION OF TEACHERS AND ATTENDANCE OFFICER.

As before recorded, the teachers continue to take great interest in the medical work in the schools, and invariably attend the routine inspections if they possibly can do so. Of course at times the Head Teacher has a class to take, but even then as a rule they look in when they can. The teachers can do so much to help and are, by their position, so much in touch with the parents, that their help is most valuable, and is very much appreciated. Often they have opportunities of recommending medical treatment which are unique, and come better from them than anyone, as some parents still seem to think that the School Doctor gets a percentage on children treated, or something of that kind, judging from what one hears. The teachers can and do correct all this most beneficially. The help of the School Attendance Officer is also freely given, and is invaluable. His knowledge of families is all-embracing, since he has known most of the parents in school themselves, and he is ever ready to give whatever assistance he can.

I should like to again express my gratitude to these willing helpers.

EMPLOYMENT OF CHILDREN.

Thirty-three Certificates were granted during the year to enable children over 12 years of age to take employment. The nature of this was, as a rule, delivering papers, other work consisted in delivering milk or going errands. Their work is done before school in the morning and after school in the evening, as well as on Saturday mornings. Each child receives a medical certificate of fitness from the School Medical Officer, and instructions are given that they should not go out in the morning without first having had some food. As long as this precaution is observed, and the child does not cut the time so close as to have no time for breakfast before going into school, I do not see that this employment can do anything but good. It early engenders industrious habits, and the child likes to feel that he is bringing even a few shillings in to help the home.

DENTAL CLINIC.

A full report of the work done by the School Dentist is appended, and it will be seen that he has carried out routine inspections at all the schools, and treated a large number of children at the Clinic. He gives one whole day per week to the work, keeps himself supplied with cases by periodic inspections, and treats those referred by the School Medical Officer and brought by parents as special cases.

F. A. BELAM, M.D., Ch.B., D.P.H.,
School Medical Officer.

MYOPIC CHILDREN.

Two children found too highly myopic for ordinary school teaching were taken into the School for Myopes at Bradford. The Brighthouse Education Authority is responsible for them, and a special sub-committee is charged with this boarding-out.

TABLE 1.

RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections.

AGE.	ENTRANTS.					Total.
	3	4	5	6	Other Ages	
BOYS ..	12	38	34	9	3	96
GIRLS ..	15	36	31	7	8	97
TOTALS ..	27	74	65	16	11	193

AGE.	INTERMEDIATE GROUP.	LEAVERS.			Other Ages.	Total.
	8	12	13	14		
BOYS ..	148	28	7	—	10	193
GIRLS ..	140	30	2	—	12	184
TOTALS ..	288	58	9	—	22	377

GRAND TOTAL.

	Entrants.	Inter-mediate.	Leavers.	Other Routine Inspec'ns.	Total.
Boys ..	96	148	35	10	289
Girls ..	97	140	32	12	281
Totals ..	193	288	67	22	570

B.—OTHER INSPECTIONS.

	Number of Special Inspections.	Re-Examinations.
Boys	21	255
Girls	32	274
Totals ..	53	529

TABLE II.

**A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1924.**

DEFECT OR DISEASE.		ROUTINE INSPECTIONS.		SPECIALS.	
		Number referred for Treatment.	Number requiring to be kept under observation, but not referred for Treatment.	Number referred for Treatment.	Number requiring to be kept under observation, but not referred for Treatment.
(1)		(2)	(3)	(4)	(5)
	Malnutrition	—	15	1	—
	Uncleanliness :	25	41	—	—
Skin	Ringworm :				
	Scalp	—	—	—	—
	Body	1	—	—	—
	Scabies	—	—	—	—
	Impetigo	1	—	—	—
	Other Diseases (Non-Tuberculous)	—	—	—	—
Eye	Blepharitis	2	2	—	—
	Conjunctivitis	3	—	—	—
	Keratitis	—	—	—	—
	Corneal Opacities	—	—	—	—
	Defective Vision (excluding squint)	54	18	20	—
	Squint	—	—	—	—
	Other Conditions	—	—	—	—
Ear	Defective Hearing	—	—	—	—
	Otitis Media	2	1	1	—
	Other Ear Diseases	—	—	—	—
Nose and Throat	Enlarged Tonsils only	37	49	—	—
	Adenoids only	3	12	2	—
	Enlarged Tonsils and Adenoids	9	2	—	—
	Other Conditions	14	—	2	—
	Enlarged Cervical Glands (Non-Tuberculous)	3	52	4	—
	Defective Speech	—	—	1	—
	Teeth—Dental Diseases	74	34	1	—
Heart and Circulation	Heart Disease :				
	Organic	10	5	2	—
	Functional	—	—	—	—
	Anæmia	2	3	—	—
Lungs	Bronchitis	4	8	—	—
	Other Non-Tuberculous Diseases	1	—	—	—
Tuber- culosis	Pulmonary :				
	Definite	—	—	22	—
	Suspected	—	1	—	—
	Non-Pulmonary :				
	Glands	—	—	2	—
	Spine	—	—	—	—
	Hip	—	—	—	—
	Other Bones and Joints	—	—	—	—
	Skin	—	—	—	—
	Other Forms	—	—	—	—
Nervous System	Epilepsy	—	—	—	—
	Chorea	—	—	1	1
	Other Conditions	—	—	—	—
Defor- mities	Rickets	2	1	1	—
	Spinal Curvature	—	—	1	—
	Other Forms	2	—	—	—
	Other Defects and Diseases	8	37	5	—

B.—NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (excluding Uncleanliness and Dental Diseases).

GROUP. (1)	Number of Children.		Percentage of Children found to require Treatment (4)
	Inspected. (2)	Found to require Treatment. (3)	
CODE GROUPS :—			
Entrants	193	37	19.17
Intermediates ..	288	63	21.87
Leavers	67	16	23.9
Total (Code Groups) ..	548	116	21.16
Other Routine Inspections	22	5	22.72

TABLE III.
RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

		Boys.	Girls.	Total.	
Blind. (including partially blind), within the meaning of the Elementary Education (Blind and Deaf Children) Act, 1893.		Attending Public Elementary Schools			
		Attending Certified Schools for the Blind			
		Not at School			
Deaf and Dumb. (including partially deaf), within the meaning of the Elementary Education (Blind and Deaf Children) Act, 1893.		Attending Public Elementary Schools			
		Attending Certified Schools for the Deaf	0	2	2
		Not at School			
Mentally Deficient.	Feeble Minded.	Attending Public Elementary Schools	5	0	5
		Attending Certified Schools for Mentally Defective Children. Notified to the Local Control Authority by Local Education Authority during the Year ..	1	0	1
		Not at School	1	0	1
	Imbeciles	At School	-	-	-
		Not at School	-	-	-
	Idiots.				
	Epileptics.		Attending Public Elementary Schools	3	1	4
Attending Certified Schools for Epileptics					
In Institutions other than Certified Schools					
Not at School			1	0	1

TABLE III—CONTINUED.

Physically Defective.		Boys.	Girls.	Total
Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	0	0	0
	At other Institutions	0	0	0
	At no School or Institution	0	0	0
Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	0	0	0
	At Certified Residential Open-Air Schools	0	0	0
	At Certified Day Open-Air Schools	0	0	0
	At Public Elementary Schools	6	4	10
	At other Institutions	0	0	0
	At no School or Institution	0	0	0
Delicate children (e.g., pre-or latent tuberculosis, mal-nutrition, debility, anæmia, etc).	At Certified Residential Open-Air Schools	0	0	0
	At Certified Day Open-Air Schools	0	0	0
	At Public Elementary Schools	18	35	53
	At other Institutions	0	0	0
	At no School or Institution	0	0	0
Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	0	0	0
	At Public Elementary Schools	3	1	4
	At other Institutions	0	0	0
	At no School or Institution	0	0	0
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	0	0	0
	At Certified Residential Cripple School	0	0	0
	At Certified Day Cripple Schools	0	0	0
	At Public Elementary Schools	18	16	34
	At other Institutions	0	0	0
	At no School or Institution	0	0	0

TABLE IV.

**RETURN OF DEFECTS TREATED DURING THE YEAR ENDED
31st DECEMBER, 1924.**

TREATMENT TABLE.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group V).

Disease or Defect.	Number of Children.			
	Referred for Treatment.	Treated.		
		Under Local Education Authority's Scheme.	Otherwise.	Total.
SKIN—				
Ringworm—Scalp	—	19	—	19
Ringworm—Body	—	26	—	26
Scabies	—	3	—	3
Impetigo	—	66	—	66
Other skin disease	—	111	—	111
EAR DISEASE ..	—	25	—	25
EYE DISEASE (external and other) ..	—	47	—	47
MISCELLANEOUS ..	—	164	—	164
TOTAL	—	451	—	451

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I).

Defect or Disease.	No. 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).. (Operations for squint should be recorded separately in the body of the Report).	88	20	—	108
Other Defect or Disease of the Eyes (excluding those recorded in Group I)..	—	—	—	—
TOTAL	88	20	—	108

2. PARTICULARS OF TIME GIVEN AND OF OPERATIONS UNDERTAKEN.

No. of Half Days devot'd to Inspection.	No. of Half Days devot'd to Treatment.	Total No. of Attendances made by the Children at the Clinic.	No. of Permanent Teeth.		No. of Temporary Teeth.		Total No. of Fillings.	No. of Administrations of General Anæsthetics inclu'd in (4) and (6).	No. of other Operations.		
			Ex-tracted	Filled.	Ex-tracted	Filled.			Perma-nent Teeth.	Tem-porary Teeth.	Regu-lations
(1.)	(2.)	(3.)	(4.)	(5.)	(6.)	(7.)	(8.)	(9.)	(10.)	(11.)	(12.)
16	66	385	93	196	749	—	196	0	51	9	0

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

- (i.) Average number of visits per school made during the year by the School Nurse 3
- (ii.) Total number of examinations of children in the schools by School Nurse (42 Visits) 6876
- (iii.) Number of individual children found unclean 1733
- (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 —

DENTAL REPORT FOR YEAR 1924.

64 TRINITY STREET,

HUDDERSFIELD,

21ST JANUARY, 1925.

TO THE BRIGHOUSE EDUCATION COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

In the year 1924 the number of children inspected fell from 1550 to 1150 approximately, due largely to a decrease in the 6—8 Group.

All schools were inspected and treatment completed before the end of the year, so we can say that all parents desiring Dental Treatment for their children could have it without delay.

One unsatisfactory feature I have to note is that sometimes children sent as specials do not return for further treatment after a particular offending tooth has been attended to, but return after an interval of a couple of years or so, when the treatment required has increased 50% or more.

Yours faithfully,

W. F. GREGORY,

L.D.S., Vict. Univ., Manchester.

REPORT OF THE ORGANISER OF PHYSICAL TRAINING FOR THE YEAR 1924.

TO THE BRIGHOUSE EDUCATION COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

The early part of 1924 will be remembered by the severe wintry weather, which continued well into the springtime. Weather like that in Brighouse means taking the drill lesson in the classroom. This tends to retard the progress of the subject, as only a very modified form of the ordinary drill lesson can then be taken. The lesson, however, is not omitted, and a great amount of useful work can be done by making use of the furniture as supports and in correcting postures in general. In most schools there is now a daily lesson of 20 minutes, and in every school there is a weekly period for games.

Dancing or eurhythmics or both are taught during one of the physical training periods. The educational value of eurhythmics is most marked, even in the Infant Departments. The children listen intently whilst the music is telling them the story, and they write down their impressions or dance to what they think the music tells them. One writer has recently said that "we glut our eyes and starve our ears." Whether that is true or not, the awakening of the aural faculties by the rhythm of music seems to produce an alertness in the child that continues after the lesson is over.

It has the advantage, too, of needing less space than that required for most country dances. Unless there is a spare room or hall, dances for four or six children are generally unsuitable for class work. No dancing lesson should be devoted entirely to one set of children.

The gramophone provided to be shared by the Victoria Central School and Victoria Infants' is proving a great boon, and other schools are now eagerly awaiting the extension of the provision.

PLAYING FIELDS.

In addition to the two netball courts marked out in the Lane Head Recreation Ground, there are now also two on the Rastrick side of the Borough in the new Bramston Street Recreation Ground. We are very glad indeed to have these courts, but now we are on the lookout for some inspired person who can tell us how to harden the surface without incurring the usual heavy expenditure of such a proceeding. Under present conditions after heavy rain the ground is "unplayable" for some days.

REPORT OF THE PHYSICAL TRAINING FOR BOYS' DEPARTMENT

SWIMMING.

An experiment with a mark system was carried out throughout the girls' section this year. A list of progressive movements and marks awarded was posted up in the baths, so that the children knew exactly what they were aiming at, and the points it was possible for them to gain for their group or class. A test was held at the end of each lesson, and as each girl was leaving the bath she gave in to the Swimming Mistress the number of marks, and for what she had earned them. Neat and correct work only was passed. This prevented faulty style from creeping in at the beginning, and a good foundation was laid for future progress. Great enthusiasm for the new system prevailed throughout the session. As the bath is open only on one day a week for girls, their progress is necessarily slow.

Twenty-five Royal Life Saving (Proficiency) Certificates have been gained this year—8 by girls and 17 by boys. This is the first time that the girls have entered for this examination. All candidates, both boys and girls, were successful. The general examination for lengths and Life Saving was held on July 18th. The results and a comparison with the previous two years is given below.

		Life Saving.				
		1 length	2 lengths	4 lengths		Royal Life
		Certs.	Certs.	Certs.	Brighouse.	Saving.
1922	..	33	23	44	13	12
1923	..	36	33	41	18	12
1924	..	41	35	33	24	25
Totals ..		1922—125.		1923—140.	1924—158.	

The Brighouse Swimming Shield was won this year by the Rastrick Common Boys' Department with a progress percentage of 81.4.

Two Swimming Galas were held this year at the Brighouse Baths. The children over ten years of age attending the Senior Schools were allowed to attend on one day. A programme was arranged showing progress from the earliest efforts of the small child to the most advanced of the new strokes by the seniors. Part of the Royal Life Saving Society's Examination for the Proficiency Certificate was taken during the gala. There was also a special display of Life Saving and diving. Great appreciation was shown of the efforts of both the beginner and the most advanced swimmer to don a garment on the "floating stage."

Brighouse can very justly pride itself on the excellent condition of its swimming bath.

TEACHERS' CLASSES.

A class for Eurhythmics, English County and Sword Dancing was started in October, and is being continued throughout the winter.

FOOTBALL.

The local branch of the English Schools' Athletic Association have again carried out a programme of League and Cup Matches. Bailiffe Bridge proved themselves the League Champions, and the Central School carried off the "Wainwright" Cup in the "knock-out" competition.

The Brighouse Town Team played against Harrogate for the Yorkshire Shield, and against Normanton for the English Shield, but lost in the former 3—0, and in the latter 4—0.

CRICKET.

The "Webster" Shield and Medals in the League Competition were won by Rastrick Common Boys, and the "Knock-out" Shield by the Victoria Central School.

NETBALL.

A Netball Committee has been formed. The first meeting was held on November 12th, when a series of inter-school matches (for Juniors and Seniors) were arranged to be played early in 1925.

ECHO FROM SCHOOL CAMP.

At Whitsuntide in 1923 the boys from Hove Edge fraternised with the boys from Acton West London during their respective camps in Kent. The outcome of this was that the Acton children invited the children of Hove Edge to London for a three days' stay, with the object of viewing London and visiting Wembley. Two days were spent at Wembley, and an afternoon and evening in London. The Brighouse children were housed and conducted with the greatest cordiality, thoughtfulness and care by their Acton friends, and a thoroughly instructive and enjoyable time was spent during the brief visit.

This year the Hove Edge boys camped with their Headmaster in tents on the sandhills at Southport.

D. I. MACLACHLAN, C.S.M.M.G.,
 Liverpool and Chelsea Physical Training Colleges.
 Organiser of Physical Training.