

**[Report 1933] / School Medical Officer of Health, Burton-upon-Trent  
County Borough.**

**Contributors**

Burton upon Trent (England). County Borough Council.

**Publication/Creation**

1933

**Persistent URL**

<https://wellcomecollection.org/works/j45vc4jn>

**License and attribution**

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>

A224938



County Borough of Burton upon Trent.

---

EDUCATION COMMITTEE.

---

# ANNUAL REPORT

UPON THE

## SCHOOL MEDICAL SERVICE

FOR THE YEAR 1933,

BY

**JAMES M. COWIE,**

M.D., D.P.H.,

SCHOOL MEDICAL OFFICER.







County Borough of Burton upon Trent.

---

EDUCATION COMMITTEE.

---

# ANNUAL REPORT

UPON THE  
SCHOOL MEDICAL SERVICE

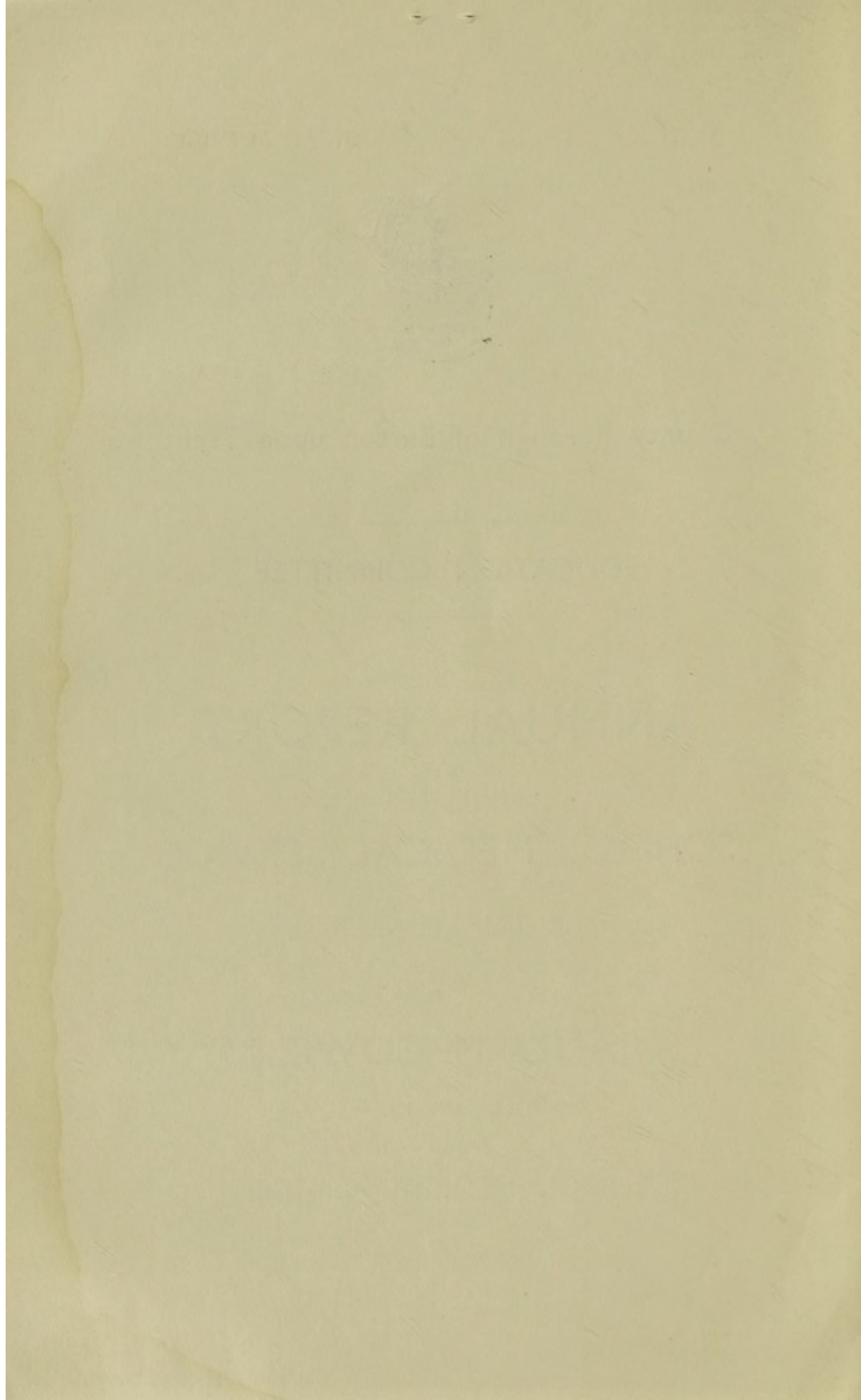
FOR THE YEAR 1933,

BY

**JAMES M. COWIE,**

M.D., D.P.H.,

SCHOOL MEDICAL OFFICER.



## Staff of the School Medical Service.

---

School Medical Officer :

JAMES M. COWIE, M.D., Ch.B., D.P.H.

Assistant School Medical Officer :

GEORGE F. BRAMLEY, M.D., Ch.B., D.P.H. (Com'n'd Mar., 1933)

JOHN C. H. MACKENZIE, M.D., D.P.H. (Left Feb., 1933)

Orthopædic Surgeon :

J. H. MOIR, D.S.O., M.C., M.D., Ch.B., D.P.H.  
(Part Time).

School Oculist :

EDWIN R. JAGGER, M.R.C.S., L.R.C.P., D.O.M.S.  
(Part Time).

School Dentist :

Miss J. H. W. HEPBURN, L.D.S.

School Nurses :

Miss M. E. COLEMAN, Certified and Registered Nurse and  
Certified Midwife.

Miss W. JAMES, Certified and Registered Nurse and Certified  
Midwife.

School Dental Nurse :

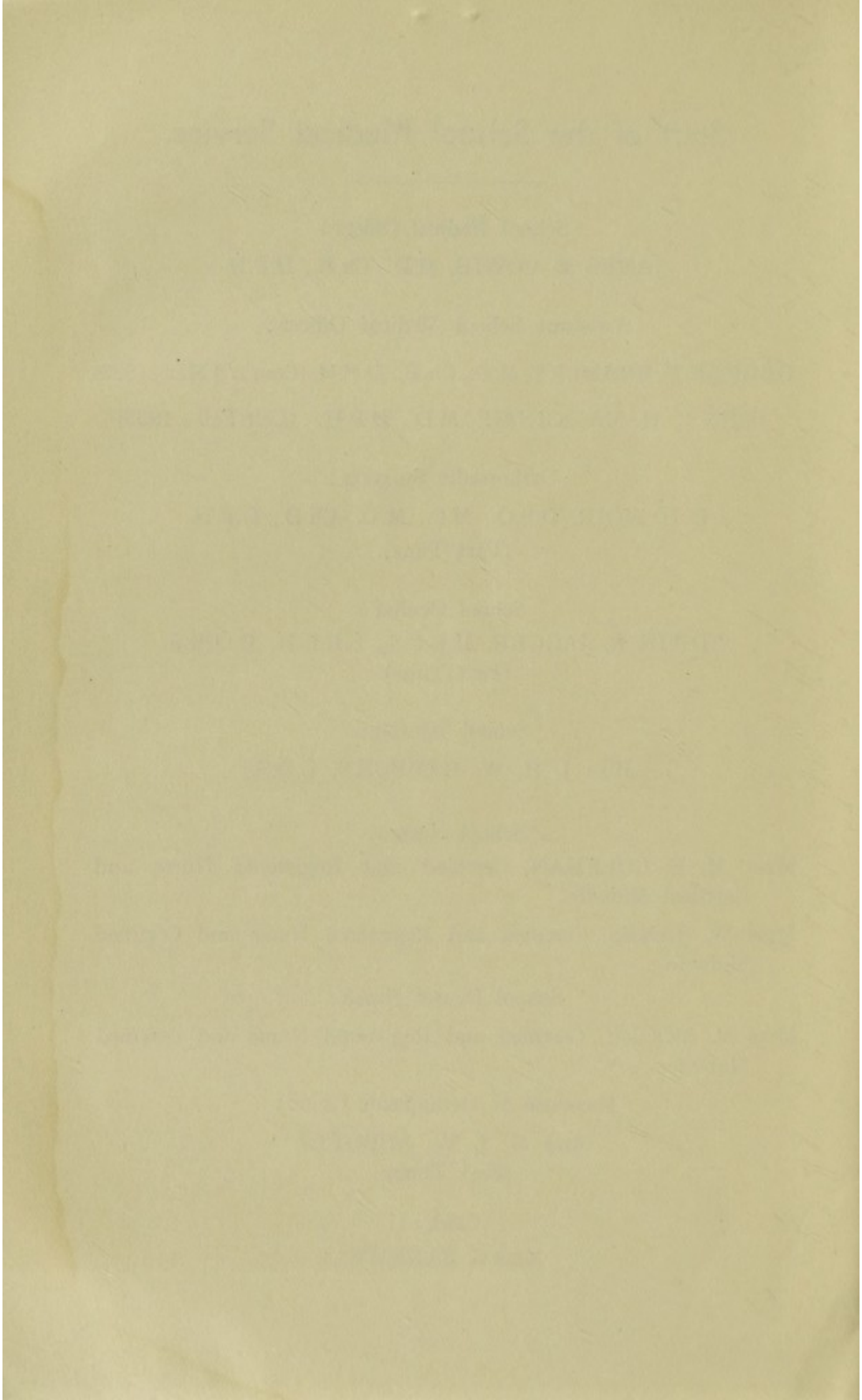
Miss M. MOORE, Certified and Registered Nurse and Certified  
Midwife.

Masseuse at Orthopædic Clinic :

Miss M. J. W. ABBOTTS  
(Part Time).

Clerk :

Miss G. BAKEWELL.





# Annual Report of the School Medical Officer.

---

TO THE LOCAL EDUCATION AUTHORITY,  
BURTON UPON TRENT.

I herewith present the Annual Report of the School Medical Service for the year 1933.

The report shows an analysis of the finding of medical inspection of school children and of the treatment given by the school medical service.

The general standard of health of the Burton school children remains good, although there are more deaths to report amongst children of school age. Rheumatic Heart Disease continues to take its toll upon child life, and the need for preventive care of Rheumatic manifestations is called for. Mumps was the outstanding epidemic amongst school children during 1933, but no sequelae appear to have arisen.

There were few cases of Diphtheria, but the type was very severe, and no case of sore throat could be treated lightly.

The excellent dry summer was responsible very probably to a large degree for the fewer throat cases referred for operation.

The divesting of clothes, associated with the new craze for sun-bathing was responsible for a few blistered backs, but these were worth the general raising of healthful bodily tone amongst the scholars.

1. **Staff.** Dr. J. C. H. Mackenzie, Assistant School Medical Officer, terminated his duties on February 28th, 1933, to take up his new post as Medical Superintendent of the Isolation Hospital and Sanatorium of the City of Leicester, and Dr. G. F. Bramley commenced duties as the Assistant School Medical Officer, on the 1st March, 1933. This was the only change in the staff throughout the year.



2. **Co-ordination.** There has been no change in the methods of administration in the Health, School Medical, Infant Welfare, Tuberculosis, Mental Deficiency, or other health services during 1933, and the system continues to admit of full co-ordination. The Orthopaedic Clinic admits pre school, school and tuberculosis cases of all ages. The School Oculist sees also pre school children, and the School Dentist treats pre school children and pregnant mothers.

There also exists full co-operation with the general practitioners, the staffs of institutions, the Certifying Factory Surgeon, and the various voluntary associations of the area, and I take this opportunity of conveying to them my best thanks.

3. **School Hygiene.** Overcrowding in schools continues in Uxbridge Street, and Christ Church Schools, and the speedy provision of the new school in Clarence Street will be welcomed.

The exceptional dry summer of 1933 allowed of many classes being conducted in the open air, and the teachers are to be congratulated on taking full advantage of the prevailing conditions. Trough closets are in use in some of the schools, and whilst these are not now admitted to be of the most up to date type those examined have been found to be in excellent working condition, clean and the walls recently limewashed. Those, however, in use at Victoria Road School are worn out and no longer hygienic. Their replacement is being considered.

4. **Medical Inspection.** The age groups inspected during the year were those required by the Board of Education :-

1. Entrants—children admitted during the year.
2. Intermediates—children in their 9th year.
3. Leavers—children in their 13th year.

Also special cases referred for some defect by parents or teachers.

Re-inspection of children previously found to be defective was done each term.

The number of routine inspections in all groups was 2632, an increase in each group, but chiefly in the leavers. The number of routine inspections was 20% higher than in 1932.

In 1933 the average number of children on the roll was 8033, and the average number in attendance was 7173.

The School Nurses made 23,090 examinations during twelve visits to each school, these general inspections chiefly being responsible for the detection of uncleanliness, and skin diseases. They also give opportunity for general hygienic advice to scholars and teachers, and for the following up the results of treatment and advice to parents.

There were twenty deaths of school children in 1933. It is more satisfactory to note that there was only one death from accident, in 1933, against three in 1932 and three in 1931.

Cause of Death	Number
Oedema Glottidis—Septic Throat .. .. .	I
Cerebral Abscess—Broncho pneumonia .. .. .	I
Influenza .. .. .	I
Cerebral Abscess—Otitis Media .. .. .	I
Diabetes Mellitus .. .. .	I
Status Epilepticus .. .. .	I
Haemophilia .. .. .	I
Heart Disease (Rheumatic) .. .. .	2
Nephritis .. .. .	2
Tuberculosis—Pulmonary .. .. .	I
Cerebro Spinal Fever .. .. .	I
Accident .. .. .	I
Peritonitis and Appendicitis .. .. .	4
Hypernephroma .. .. .	I
Diphtheria .. .. .	I
	—
Total .. .. .	20

### 5. Findings of Medical Inspection.

(a) **Malnutrition.** Fortytwo children out of 2632 examined were noted at routine inspections as requiring treatment for malnutrition, and seventeen at special inspections. Whilst of the fifty-nine children noted above only eight are classified as badly nourished, it was felt that extra nourishment chiefly in the form of extra milk



for the others was essential as a practical prophylactic measure both against general disease and debility, and against infection. The term malnutrition including, as it must, more than mere weight has to be construed widely by the medical inspector and the preventive aspect of this work borne in mind.

Undernourishment, as such, is a condition very rarely met in the schools but wrong feeding is not uncommon. Amongst the entrants one is frequently told by the parents that the child refuses breakfast and never eats at meal times. The truth here lies in faulty training, and in some cases ignorance. There is an urgent need of still further teaching and education of the public in the value of regular meal times and no food, only water, between meal times, and strict training and development of healthy habits in the child. Food values are also little recognised, and parents and teachers should make it their duty to become acquainted with these, for their own economic benefit, and the well being of the children in their care.

(b) **Uncleanliness.** 729 children were discovered to be in an unclean condition resulting in 891 exclusions during the year.

Most of these exclusions were of children with "nits" which should be recognised by the parents as potential vermin. The fullest co-operation with parents is required in this matter, a condition which with reasonable care should not occur.

(c) **Minor ailments and diseases of the skin.** Under this heading 993 cases were observed, of which 15 were cases of Scabies. There were 86 cases of skin disease other than Scabies which were referred for treatment.

(d) **Visual defects and external eye disease.** There were 339 cases of external Eye Disease. This number is included in the total number of Minor Ailments in paragraph C above. These cases were chiefly Blepharitis, Styes, and Conjunctivitis. There appeared to be an increase in the number of cases of Conjunctivitis in the summer months, but these were not localised to one School nor was it noticed that these cases had been attending the Swimming Baths. Enquiries were made at the time, especially in view of



the concern which was being shown in certain quarters as to the spread of disease by Swimming Bath water, but no evidence was forthcoming in this direction.

Some of these cases of Conjunctivitis went to the stage of Marginal Ulceration, and these were seen by the Ophthalmic Surgeon at the School Clinic, or referred to the Infirmary Eye Department.

(e) **Nose and Throat Defects.** Only 32 children were referred from the routine inspection for treatment of disease of the Tonsils and Adenoids. Thus for two years in succession fewer cases referred for operation are reported. Unless the condition was associated with a history of frequent colds or sore throat, nasal obstruction or enlarged Cervical glands, the cases were referred for 3-monthly re-examination. The policy of referring these cases for observation associated with instruction in general hygiene and dental care, has in many cases precluded the necessity for operation, and in the case of children who have been observed in the older age groups, regression of the Tonsillar and Adenoid tissue has been noticed, the child in the meantime having maintained general good health.

The long dry periods prevailing during 1933, accompanied by many hours of sunshine probably also accounted for fewer cases being referred for treatment.

(f) **Ear Disease and Defective Hearing.** There were 25 cases of defective hearing noted at the routine inspections. 17 of these were due to wax impaction, and these were referred to the School Clinic. The remaining cases were referred for observation. The number of cases of Otorrhoea was 46. This condition does not appear to cause parents the alarm which it merits, and there were cases of real neglect.

(g) **Dental Defects.** 7,496 children were examined at School Dental Inspections, 4,919 (65.6%) being referred for treatment. Of these 2,250 were treated at the School Dental Clinic.



(h) **Orthopaedic and Postural Defects.** In this connection the orthopaedic surgeon has remarked on the increase in the number of cases which have been referred to him at an early stage of the defect. The Orthopaedic Clinic has now been in use 5 years, and as the more pronounced cases have been dealt with it is now possible to make provision for the child with an early stoop etc.

(i) **Heart Disease and Rheumatism.** Below is a table taken from the Rheumatism register. Children with a history of Chorea, Rheumatic Fever, or minor manifestations of Rheumatism, are referred for 3-monthly observation, or treatment if necessary.

#### CHILDREN SUFFERING FROM HEART OR RHEUMATIC DISEASES.

	Males	Females	Total
Congenital heart disease .. .. .	2	4	6
Acquired heart disease			
(1) With no antecedent rheumatism ..	13	21	34
(2) Following Chorea .. .. .	2	4	6
(3) Following sub-acute or chronic rheumatism .. .. .	7	13	20
(4) Following rheumatic fever .. ..	—	2	2
No signs of heart disease but			
(1) History of Chorea .. .. .	3	8	11
(2) History of rheumatic fever .. ..	2	2	4
(3) History of sub-acute or chronic rheumatism .. .. .	10	9	19
	—	—	—
	39	63	102
	—	—	—

(j) **Tuberculosis.** Four cases of non-pulmonary tuberculosis were discovered at routine inspections, and dealt with by the Tuberculosis service. There is a system whereby all tuberculosis contacts are seen at school each term. No case of pulmonary Tuberculosis was discovered in the schools.

(k) **Crippling Defects.** During the year 1933, 45 new names were added to the register of physically defective children, and 54 cases

were removed, the total number now being 122. This number includes many cases with organic heart disease, and where full compensation of the cardiac disease has not been attained, physical exercises and games are forbidden, and the definition "Crippled Children" has been applied, because full advantage cannot be taken of the educational facilities.

All the children removed from this register suffer from some defect which no longer interferes with the child's normal life.

	Number added in 1933	Total number on Register
Organic Heart Disease (compensation not fully acquired) .. .. .		
(a) Congenital .. .. .	2	3
(b) Acquired.. .. .	19	22
Tuberculosis of Bones and Joints .. .. .	1	4
Tuberculosis of Other parts .. .. .	6	16
Deformities following Poliomyelitis .. .. .	4	25
Defective Vision (High Myopia, etc.) .. .. .	3	19
Defective hearing.. .. .	4	11
Congenital deformities .. .. .	3	10
Miscellaneous .. .. .	3	12
	—	—
	45	122
	—	—

### Exclusions from School.

	No. of exclusions
UNCLEANLINESS .. .. .	891
SKIN DISEASES Impetigo and Sores .. .. .	314
Scabies .. .. .	15
Ringworm: Scalp .. .. .	9
Body .. .. .	5
Herpes.. .. .	43
Miscellaneous Dermatitis .. .. .	23
EAR DISEASES Otorrhoea .. .. .	23
Furunculosis .. .. .	5



EYE DISEASES	Keratitis and Corneal Ulcers ..	5
	Conjunctivitis .. .. .	134
	Blepharitis and Hordeola ..	17
	Myopia and Ophthalmia and Optic Neuritis .. .. .	11
THROAT	Tonsilitis and Sore Throat ..	35
	Enlarged Glands .. .. .	24
OTHER DISEASES	Bronchitis .. .. .	5
	Rheumatism and Chorea ..	10
	Tuberculosis .. .. .	8
	Epilepsy .. .. .	2
	Miscellaneous .. .. .	139
	Total ..	<hr/> 1718 <hr/>

6. **Infectious Diseases.** A table of the common infectious diseases and their distribution throughout the schools is presented below:

### SCHOOLS AND INFECTIOUS DISEASES

SCHOOL	Whoop- ing Cough.	Chicken Pox.	German Measles and Measles.	Scarlet Fever.	Diph- theria.	Mumps.
Winshill .. .. .	13	5	0	1	1	158
Horninglow .. .. .	0	4	1	4	0	136
Broadway .. .. .	21	2	22	0	1	47
Mission Room, Stapenhill ..	0	21	1	0	0	42
Victoria Road .. .. .	1	82	1	4	3	18
Grange Street .. .. .	0	10	0	2	0	86
Holy Trinity .. .. .	0	5	4	2	5	46
Christ Church .. .. .	1	11	0	5	4	6
Shobnall Road .. .. .	0	10	1	0	0	10
Hill Street and St. Peter's Street	6	55	1	2	1	87
Guild Street .. .. .	0	9	0	3	0	20
Wetmore Road .. .. .	0	12	0	0	12	38
Uxbridge Street .. .. .	17	7	12	6	2	63
St. Modwen's .. .. .	3	23	1	0	0	10
Goodman Street and Stafford St.	0	22	1	1	1	53
High School (Girls) .. .. .	0	0	0	1	1	0
Grammar School .. .. .	0	0	0	0	1	0
No School .. .. .	26	42	9	32	25	6
Private School .. .. .	0	0	0	1	0	0
Bond Street .. .. .	2	5	0	1	0	16
Totals ..	90	325	54	65	57	842



1933 was a year in the schools relatively free from the severer infectious diseases. Diphtheria appeared towards the end of the year in the Wetmore Road School, and although the number of cases was small, the type was of the malignant "gravis" type. Following the usual system contacts were excluded, and swabs taken from the nose and throat. Also the school was visited by the Assistant School Medical Officer, who saw each child in the school and took swabs from any child with a suspicious nasal discharge. A few "carriers" of the diphtheria organism were detected and provision for isolation and treatment made.

There were many cases of mumps in the early part of the year. Whooping Cough remained endemic, and the number of cases of Chicken Pox increased towards the end of the year.

1933 was the "trough year" for measles, many cases having occurred in 1932, and many cases being expected in 1934.

No schools were closed under Articles 22 and 23 (b) of the Code Grant Regulations No. 8.

### VACCINATION TABLE, 1933.

Age Period.	Unvaccinated per cent.	Vaccinated per cent.	
		Under 4 Marks.	4 or more Marks.
Entrants ..	71.9	10.2	17.9
Intermediates	60.0	8.8	31.2
Leavers ..	66.5	8.4	25.1

The percentage of unvaccinated children continues to increase.

7. **Following up.** This is an essential part of the School Medical Service, and although on the whole the parents of Burton school children are only too anxious to join in every measure to ensure the best health of their children 137 visits to homes by the School Nurses were made during the year. In addition the School Nurses



made 138 home visits for other purposes. Home visiting undertaken by the School Nurses is of infinite help in assessing a child's condition associated with its environment.

The opportunity must be taken at this point to again thank the Local Inspector of the National Society for the Prevention of Cruelty to Children for his unfailing help in procuring co-operation from parents who would appear at first to be unwilling to provide treatment for their children. Below is a summary of the Inspector's work in connection with the School Medical Service.

Failure to provide spectacles..	..	..	..	26
Failure to provide treatment for				
Defective vision..	..	..	..	3
Ringworm	..	..	..	1
Otitis Media	..	..	..	3
Impetigo..	..	..	..	1
Malnutrition	..	..	..	1
Dental Defects	..	..	..	4
Miscellaneous	..	..	..	5
				—
			Total	44
				—

The number of children affected was 52. All the above cases except one, which was not pressed, were brought to a successful issue.

Further following up is done at Medical Re-inspections undertaken each term in the schools when the success and end results of treatment can be assessed.

#### 8. Arrangements for Treatment.

(a) **Malnutrition.** This is dealt with under Section II.

(b) **Uncleanliness.** Parents are made responsible for this and each child excluded is required to attend at the School Clinic for inspection each morning at nine o'clock re-admission to the school not being allowed until cleanliness is attained.

(c) **Minor ailments and diseases of the skin.** 946 cases attended the School Clinic, nearly 200 more than in 1932, that year, however, produced unusually few cases. The number of attendance of these cases was 11,501. This large volume of work is dealt with chiefly between 9 and 9-30 by the school nurses, co-operation by the parents in such matters as further and repeated bathings at home is required. Fifteen cases of scabies were treated at the School Clinic with good results. 238 cases of skin diseases were also treated.

(c) i. **External Eye Disease.** 308 cases of minor external eye condition were treated at the School Clinic.

(c) ii. **Visual Defects.** Ophthalmic Report by the School Oculist, Edwin R. Jagger, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.O.M.S. (Lond.).

It is customary to tabulate the varieties of refractive errors met with during a period of twelve months, and in reviewing the types seen at the School Clinic in Burton upon Trent during 1933 one is impressed by the comparatively few visual defects resulting from myopia. It is a matter for congratulation that (compared with other industrial parts of the country) we have so few of this particularly harmful variety. On account of this happy position it has not been found necessary to establish any special "sight saving class" for myopes.

Keratomalacia is a severe eye disease caused chiefly by malnutrition, and happily is a rare condition in normal times. This disease is being reported on the increase in some of our distressed areas. It is again a matter for congratulation that not a single example of this disease has been referred to me during 1933, either at the School Clinic or at the Burton General Infirmary.

The work of the School Clinic, quite apart from treating refractive defects and diseased eyes, consists essentially in carrying on a certain amount of teaching and propaganda work. This is an attempt to interest parents, scholars, and teachers alike in the importance of ophthalmic hygiene in the prevention of eye defects and the maintenance of good vision. It is not out of place in this



connection to draw the attention of parents once again to the importance of insisting on a child using its glasses constantly when instruction has been so given.

I beg to acknowledge in this report, the help, goodwill and sustained interest of Dr. James Cowie, Medical Officer of Health, and of his staff of workers.

EDWIN R. JAGGER.

#### TREATMENT OF DEFECTIVE VISION, 1933.

Total number of children attending refraction clinics	331*
Total number of attendances.. .. .	941
Number prescribed glasses .. .. .	273‡
Number referred to Infirmary .. .. .	2
Number found not to require glasses .. .. .	41
Present glasses suitable .. .. .	5

\* Includes 11 Secondary School children.

‡ includes 11 Secondary School children.

#### ANALYSES OF FINDINGS

Hypermetropia .. .. .	40
Hypermetropic Astigmatism .. .. .	108
Myopia .. .. .	28
Myopic Astigmatism .. .. .	56
Mixed Astigmatism.. .. .	21
Marked Anisometropia .. .. .	1
Squint and Hypermetropia .. .. .	21
Squint and Hypermetropia Astigmatism.. .. .	7

#### SPECIAL DEFECTS

Corneal scars following Keratitis .. .. .	2
Optic Neuritis .. .. .	1

(e) **Nose and Throat Defects.** Children requiring treatment for Enlarged Tonsils and Adenoids are referred to their private practitioners. Coincident with the number of cases referred for treatment the number of cases operated upon in the Infirmary, supplied by the courtesy of that Authority, shows a decrease. The number was 77 as compared with 129 in 1932.



(f) **Ear Disease and defective hearing.** The treatment of these conditions continues to occupy a major portion of the Assistant Medical Officer's time at the School Clinic. Frequent treatment and the attempt to keep the discharging ear clean and dry requiring almost daily treatment in each case which is undertaken by the Assistant School Medical Officer personally.

No treatment by Zinc Ionisation was done in 1933. The cases which did not yield to ordinary treatment (usually the dry methods) within a reasonable period were long standing cases which in some cases had had four treatments by the Zinc Ionisation method or cases where cauterisation or operative treatment was required.

The tabular list shows the results of treatment.

Number of ear examinations .. ..	821
(1) Minor Conditions	
Wax Impaction .. .. .	31
Catarrhal Deafness .. .. .	1
Furunculosis.. .. .	6
Foreign body removed .. .. .	1
Otitis Externa .. .. .	3
	—
	42
	—
(2) Otorrhoea. Results of Treatment.	
ROUTINE TREATMENT..	
Ears dry .. .. .	33
Improved (still attending) .. .. .	11
No effect .. .. .	0
Ceased attending .. .. .	2
Transferred to private doctor .. .. .	2
Transferred to Infirmary .. .. .	4
	—
	52
	—

(g) **Dental Defects.** 2,250 children obtained treatment at the School Dental Clinic. 169 administrations of nitrous oxide gas anaesthesia being required for extractions.



(h) **Orthopaedic and Postural Defects.** The orthopaedic clinic still continues to do excellent work under difficult conditions. Strong hopes for more suitable premises where further necessary apparatus could be provided are still held. Meanwhile the requirement becomes more urgent. The work done during the year 1933 reveals a twenty per cent increase in attendances.

The following table shows the work done for the year:-

	Number of new cases	Total number of attendances
Health	5	41
Maternity and Child Welfare ..	6	50
Education .. .. .	23	2731

**Hospital Treatment.** Cases requiring operative treatment are referred from the Orthopaedic Clinic to the Warwickshire Orthopaedic Hospital for Children at Coleshill. Three new cases were sent to that Institution, one of whom was discharged during the year. Another case admitted in 1932 was also discharged.

(i) **Heart Disease and Rheumatism.** No actual treatment for this condition is undertaken except in so far as encouragement for rest is given where cases require it, and recommendations for hospital treatment through the Childrens' Care Committee. It comes to our notice repeatedly, however, that parents do not fully realise the warning note of rheumatic ailments, and the necessary call for medical treatment and rest, which is of necessity often prolonged. Heart disease is responsible in later life for much inefficiency, and is a major item in the Death Returns, and care of the Rheumatic child is at present our only preventive. Loss of school attendance is unavoidable as we have no hospital school such as are now being utilised by large authorities, but this must be accepted in the attempt to obtain the least damage to the heart.

(j) **Tuberculosis.** Five children of school age were admitted to the Sanatorium through the Tuberculosis service, two cases were for observation, and after a period were discharged as non-tuberculous, the three other cases were retained, and treated for non-pulmonary tuberculosis. 19 cases of non-pulmonary tuberculosis



in school children were given Sunlight treatment at the Sanatorium by the Tuberculosis Service.

**9. Open Air Education.**

(a) Full advantage was taken of the suitable weather during 1933 for playground classes, and benefit was undoubtedly derived from this, as seen at medical re-inspections by the absence of symptoms in children with enlarged tonsils and adenoids, and in children who suffer from chronic bronchitis, not to mention the sun tanning of the skin, the latter being almost the most marked new feature of the year.

(b) There are no open air classrooms in the public elementary schools in the Borough.

(c) Some of the scholars of Broadway Central School have attended School camps during the summer holidays for the past three years. It is hoped that this idea will spread to other schools.

(d) School journeys are undertaken by the older children under care of the school teachers to places of interest and educational gain.

**10. Physical Training.** A Remedial Exercise class is held in conjunction with the Orthopaedic Clinic. There is no Area Organiser of Physical Training in the Borough, but each year teachers attend 12 sessions under a physical training expert; in 1933 women teachers attended this special course.

**11. Provision of Meals.** The extra nourishment provided for the scholars in need of it, is financed principally through voluntary funds. The scholars so provided for are recommended by the School Medical Officer, or the Head Teacher. During the year 46,671 meals (all free breakfasts) were provided for 400 children. These children include those needing extra nourishment either on grounds of malnutrition, or poor home conditions. Those recommended by the School Medical Service are re-examined each term, and the effect and necessity for continuation considered.

Very few cases derive no benefit as judged from a "nutrition" standpoint, the benefit in the majority being early and maintained.

The approval of the dietary by the School Medical Officer is not sought, but the adequacy and suitability as judged by results is good.



Several schools have their own organisation for provision of milk meals at a small cost to the parents.

12(a) **Co-operation of Parents.** As a whole parents continue to co-operate well, although there is a slight decrease in the percentage of parents present at Routine Inspections. The benefit to be gained by the presence is to both the parent, in recommendations, as to the child's bodily and mental health from the doctor, and to the Medical Inspector with respect to the child's history and environment. The cares of a large family prevent many parents from attending, but better attendance is required in the "Leavers" group for then the child's future with regard to future work from a medical aspect can be discussed.

PERCENTAGE OF PARENTS PRESENT AT ROUTINE INSPECTIONS, 1933.

School	Infants	Intermediates		Leavers		Total
		Boys	Girls	Boys	Girls	
Bond Street ..	69.7	66.7	57.1	—	—	65.3
Broadway ..	56.9	—	—	16.7	23.2	34.3
Christ Church ..	68.4	58.8	40.0	20.0	26.2	46.5
Goodman and Stafford St. ..	75.0	43.5	66.7	—	28.8	46.5
Grange St. ..	79.5	8.2	53.2	—	—	49.8
Guild St. ..	—	—	—	15.9	63.3	38.3
Holy Trinity ..	61.9	23.5	12.5	—	—	35.2
Horninglow ..	74.4	31.8	45.9	—	—	55.7
Shobnall ..	73.1	37.5	60.0	20.0	50.0	50.7
Stapenhill ..	62.8	43.8	73.1	15.6	13.6	42.0
Stap'nhill Miss'n Room ..	72.5	—	57.1	—	51.9	62.5
St. Modwen's ..	48.5	33.3	0.0	0.0	0.0	21.9
Uxbridge St. ..	76.3	34.3	44.4	4.1	5.2	33.1
Victoria Rd. ..	74.7	45.8	50.0	10.3	—	37.4
Wetmore Rd. ..	47.8	38.9	75.0	—	—	48.9
Winshill ..	78.8	50.0	70.4	10.7	5.0	52.5

Total percentage of Infants .. ..	70.6
Total percentage of Intermediates .. ..	43.2
Total percentage of Leavers .. ..	20.5
 Total percentage .. ..	 43.4



12. (b) **Co-operation of Teachers.** We have again to record full co-operation of the Teachers and to thank them for the smooth running of the Inspections and the early detection and reference of special cases not normally coming along for medical inspection. Teachers also take full opportunity in assisting in the following up of cases.

12. (c) **Co-operation of School Attendance Officers.** The reports of these officers continue to be of helpful assistance in the estimation of non-notifiable infectious disease, and in information concerning the health of absentees. This opportunity is taken of thanking these officers.

12. (d) **Co-operation of Voluntary Bodies.**

To the voluntary charitable organisations and members of the Children's Care Committee we have again to express our thanks for their helpful consideration. The work done by these bodies forms an essential part in the School Medical Service in providing convalescent home treatment, on the recommendation of the School Medical Officer, through the Children's Care Committee, and the "Burton Observer" Uncle Jack Fund; and in the provision of orthopaedic appliances, the provision of hospital treatment and railway fares to Institutions through the Children's Care Committee, and the Voluntary Aid Association.

## CHILDREN'S CARE COMMITTEE.

### Report for 1933.

The Children's Care Committee was re-appointed by the Education Committee in November, 1932, and constituted as follows: Miss Evershed, Mrs. Lyon, Mrs. Oakden, Mrs. Piddocke, Mrs. Rowland, Mrs. Sanders, Mrs. Slator, Mrs. Templeman, Mrs. Walley, and Mrs. Williams.

The Officers were re-elected for 1933, viz., Chairman, Mrs. Oakden, Vice-Chairman, Mrs. Sanders; Hon. Secretary and Treasurer, Miss Evershed.

During the year 84 cases were reported to the Committee and were dealt with as follows:-

- |      |              |   |                           |
|------|--------------|---|---------------------------|
| 1.   | Girl aged 11 | Operation in Birmingham Children's Hospital.                              |                           |
| 2.   | Boy          | Provided with surgical boots.   |                           |
| 3.   | Girl „ 12½   | Provided with treatment as an In-patient at the Birmingham Skin Hospital. |                           |
| 4.   | Boy „ 14     | Sent to Convalescent Home, Bournemouth.                                   |                           |
| *5.  | Boy „ 13     | do.   |                           |
| 6.   | Girl         | do.   | Rhyl.                     |
| *7.  | Girl „ 5     | do.   | do.                       |
| *8.  | Girl „ 9     | do.   | do. for 7 months.         |
| 9.   | Girl „ 12    | do.   | do.                       |
| 10.  | Boy „ 9      | do.   | do.                       |
| *11. | Boy „ 13     | do.   | Bournemouth for 2 months. |
| 12.  | Boy „ 12     | do.   | Rhyl.                     |
| 13.  | Girl „ 10¼   | do.   | do.                       |
| *14. | Boy „ 12     | do.   | do.                       |
| 15.  | Boy „ 13     | do.   | Bournemouth.              |
| *16. | Boy „ 9      | do.   | Rhyl.                     |
| 17.  | Boy „ 11     | do.   | do.                       |
| 18.  | Boy „ 11     | do.   | do.                       |
| 19.  | Boy „ 10     | do.   | do.                       |
| 20.  | Boy „ 6      | do.   | do.                       |
| 21.  | Girl „ 8     | do.   | Bournemouth.              |



22.	Boy	„		Provided with surgical boot.
23.	Girl	„		Provided with transport to Coleshill Hospital.
24.	Girl	„	5	Sent to Convalescent Home, Rhyl.
25.	Girl	„	12	Provided with transport to Coleshill Hospital.
26.	Girl	„	5	Sent to Convalescent Home, Rhyl.
*27.	Girl	„	10	do. do.
*28.	Girl	„	10	do. do. for two months.
29.	Girl	„		do. do.
*30.	Girl	„	10	do. do.
31.	Girl	„	11	Sent to Devonshire Hospital, Buxton, for 6 weeks.
32.	Boy	„	6	Sent to Convalescent Home, Rhyl.
33.	Girl	„	13	do. Southport.
34.	Girl	„	8	do. Rhyl.
*35.	Boy	„	13½	do. Bournemouth.
*36.	Girl	„	13	do. Rhyl.
37.	Boy	„	10	do. do.
38.	Girl	„	11½	do. do.
*39.	Boy	„	7	do. do.
*40.	Boy	„	13	do. Bournemouth.
*41.	Girl	„	7	do. Rhyl, for 6 weeks
*42.	Boy	„	8	do. do.
43.	Girl	„	13	Sent to Birmingham Specialist and treatment provided.
*44.	Boy	„	11	Sent to Convalescent Home, Rhyl.
45.	Girl	„	8	do. do.
*46.	Boy	„	5	do. do.
*47.	Girl	„	7	do. do.
*48.	Girl	„	12	do. do.
49.	Boy	„	11	do. do.
*50.	Boy	„	9	do. do.
51.	Girl	„	11	do. do.
52.	Girl	„	10	do. do.
*53.	Girl	„	7½	do. do.

*54.	Girl	„	8	do.	Bournemouth.
*55.	Girl	„	5	do.	do.
56.	Boy	„	12	do.	Rhyl.
*57.	Boy	„	12 $\frac{1}{2}$	do.	do.
*58.	Girl	„	11	do.	do.
59.	Girl	„	10	do.	do.
*60.	Boy	„	12 $\frac{1}{2}$	do.	do.
*61.	Boy	„	11	do.	do.
*62.	Boy	„	10 $\frac{1}{2}$	Recommended for Convalescent Home treatment, but unable to go.	
63.	Boy	„	13	Sent to Convalescent Home, Bournemouth.	
*64.	Girl	„	6	do.	Southport.
65.	Boy	„	10	do.	Rhyl.
*66.	Girl	„	13	do.	do.
67.	Boy	„	4 $\frac{3}{4}$	Sent to Birmingham Specialist.	
*68.	Girl	„	5	Sent to Convalescent Home, Rhyl.	
*69.	Boy	„	12 $\frac{3}{4}$	do.	Southport for 6 weeks.
*70.	Girl	„	9	do.	Rhyl.
*71.	Boy	„	13	do.	Southport.
*72.	Girl	„	7	do.	Bournemouth.
73.	Girl	„	7	do.	Rhyl.
74.	Boy.	„	7	do.	do.
75.	Boy	„	9	do.	do.
*76.	Boy	„	7	do.	Southport
77.	Boy	„	12	do.	Rhyl for 2 months.
*78.	Boy	„	13	do.	Bournemouth
79.	Boy	„	6	do.	Rhyl for 2 months.
80.	Girl	„		Provided with transport to Coleshill Hospital.	
*81.	Girl	„	14	Sent to Convalescent Home, Rhyl.	
82.	Boy	„	11	do.	do.
83.	Boy	„	6	Recommended for Convalescent Home Treatment, unable to go until later in year.	
84.	Girl	„	10	Sent to Convalescent Home, Rhyl.	



The cases marked \* were sent by the "Burton Observer" Uncle Jack Fund to Convalescent Homes, the Children's Care Committee visiting them, after examination at the Clinic by the School Medical Officer.

The help of the Voluntary Aid Association in providing railway fares where necessary, and the Public Assistance Committee, in providing a Convalescent Home ticket and railway fare, is much appreciated.

The Mayoress' Needlework Guild provided garments for many children being sent to Convalescent Homes, and this help is gratefully acknowledged.

The Annual Grant of £25 from the Feoffees, and their provision of 39 tickets for Convalescent Homes, enabled the Committee to carry out the treatment recommended by the School Medical Officer and the Committee wish to acknowledge this generous help.

During the year many letter of appreciation of the benefits derived by the children have been received from Parents.

(Signed) EDITH E. OAKDEN, Chairman.

PHYLLIS M. EVERSLED, Hon. Secretary.

10th January, 1934.

### **Blind, Deaf, Defective and Epileptic Children.**

13. There are no Blind Children in the County Borough, but there are 19 partially blind children. 14 are in Public elementary schools and are taught by means of a special curriculum. Three of these partially blind children are in the Birmingham Royal Institution for the Blind, and one has been admitted to the Kindergarten branch of this Institution. The other child is at no school.

There are two deaf children, one in a certified school for the Deaf, the other being under the age of 7 is at no school. Nine partially deaf children attend elementary schools.

34 children were examined in 1933 with special reference to mental defect, and 13 cases were found to be mentally defective. There are now 44 feeble-minded school children in the borough, 30 attend the ordinary elementary schools. The remainder below the age of 7 and between 14 and 16 years of age are periodically visited by the school nurses. One idiot and 6 imbeciles were reported to the Local Education Authority as unfit for education in a special school or class.

There are 15 epileptic children in the borough, 13 of these being in the Elementary Schools, and 2 at no school.

There are no special schools in the Borough.

15. **Nursery Schools.** These are not provided in the Borough.

16. **Secondary Schools.**

#### **I. Medical Inspection.**

The Girls' High School and the Grammar Schools controlled by the Governors of the Endowed Schools, by aid from the Local Education Authority were inspected three times during the year, the following age groups being examined:-

1. Children on admission.
2. Children at the age of 8 years.
3. Children at the age of 12 years.
4. Children at the age of 15 years.
5. All other children over 12 years were also examined, special attention being paid to defects previously noted.



In addition to the above routine examinations all children with known defects were re-examined to discover if treatment had been adopted, or if the defect had become aggravated.

A table is appended at the end of this report, showing a detailed return of defects found at medical inspections. The principal defects observed were defective vision and dental disease. There was an absence of naso pharyngeal obstructions.

## II. Medical Treatment.

### (a) Forms of Treatment provided.

The following forms of treatment are provided by the Local Authority, viz.:-

Dental Treatment.

Orthopaedic treatment.

Eye testing.

X-Ray treatment for Ringworm of the Head.

Treatment for minor ailments.

### (b) Types of pupil for whom treatment is available.

Treatment is available for all types of pupils, but in most of the fee paying pupils treatment is arranged privately.

### (c) Arrangements for recovering the cost of treatment from parents.

All Scholarship children attending the secondary schools may receive treatment provided by the Local Authority on the same terms as children attending the elementary schools, i.e., all the treatment is free except dental treatment, for which 1/- per annum per case is charged.

For children other than scholarship children the charges have been fixed as follows:-

For dental treatment	..	..	..	5/- per annum.
For orthopaedic treatment	..	..	..	5/- per annum.
X-Ray treatment for Ringworm of the				
Head	..	..	..	Full charge.
For eye testing	..	..	..	No charge.
For treatment of minor ailments	..	..	..	No charge.

17. **Employment of School Children.** Seventy-four children were certified as fit and six were rejected as unfit for employment outside school hours in conformity with the Byelaws. There was no contravention of Bye-laws during the year.

Employment	Boys	Girls	Total
Newspaper delivery .. ..	69	0	69
Errands .. ..	18	0	18
Milk Delivery .. ..	6	0	6
Parcel Delivery .. ..	2	0	2
	—	—	—
	95	0	95
	—	—	—

18. During 1933 no teacher bursars were examined.

Dr. G. F. Bramley, Assistant School Medical Officer, has been responsible for the preparation of this report, and his assistance in this respect is hereby acknowledged.

J. M. COWIE,  
School Medical Officer.



# ELEMENTARY SCHOOLS.

**TABLE 1.**

**RETURN OF MEDICAL INSPECTIONS.**

**Year ended 31st December, 1933.**

**A.—ROUTINE MEDICAL INSPECTIONS.**

Number of Inspections in the prescribed Groups—

Entrants .. .. .	833
Second Age Group .. .. .	820
Third Age Group .. .. .	979
Total .. .. .	2632
Number of other Routine Inspections .. .. .	—

**B.—OTHER INSPECTIONS.**

Number of Special Inspections .. .. .	1176
Number of Re-Inspections .. .. .	6739
Total .. .. .	7915

ELEMENTARY SCHOOLS.

TABLE II.

A. Return of Defects found by Medical Inspection in the Year ended 31st December, 1933.

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	
(1)	(2)	(3)	(4)	(5)	
Malnutrition .. .. .	42	30	17	0	
Skin {	Ringworm—Scalp	0	0	7	0
	Body	0	0	7	0
	Scabies .. .. .	4	0	11	0
	Impetigo .. .. .	4	0	6	0
	Other Diseases (Non-tuberculous) ..	10	17	33	6
Eye {	Blepharitis .. .. .	38	3	15	1
	Conjunctivitis .. .. .	4	0	52	2
	Keratitis .. .. .	0	0	1	0
	Corneal Opacities .. .. .	0	0	0	0
	Defective Vision (ex.squint)	167	235	47	29
	Squint .. .. .	23	46	11	11
	Other Conditions .. .. .	5	1	12	1
Ear {	Defective Hearing .. .. .	0	6	17	2
	Otitis Media .. .. .	13	8	33	0
	Other Ear Diseases .. .. .	0	2	11	6
Nose and Throat {	Chronic Tonsillitis only ..	14	179	8	4
	Adenoids only .. .. .	5	12	1	1
	Chronic Tonsillitis and Adenoids .. .. .	12	19	1	3
	Other Conditions .. .. .	3	10	43	7
Enlarged Cervical Glands (Non-Tub.)	1	28	24	10	
Defective Speech .. .. .	0	9	0	10	
Heart and Circulation {	Heart Disease :				
	Organic .. .. .	0	3	1	0
	Functional .. .. .	0	57	1	2
	Anæmia .. .. .	4	3	11	4
Lungs {	Bronchitis .. .. .	2	100	10	5
	Other Non-Tuberculous Diseases .. .. .	0	26	6	5
	Pulmonary :				
Tuber- culosis {	Definite .. .. .	0	0	0	0
	Suspected .. .. .	0	0	0	0
	Non-Pulmonary :				
	Glands .. .. .	0	2	4	0
	Bones and Joints .. .. .	0	0	0	0
	Skin .. .. .	0	0	0	0
	Other Forms .. .. .	0	2	0	0
Nervous System {	Epilepsy .. .. .	1	5	0	2
	Chorea .. .. .	1	2	7	0
	Other Conditions .. .. .	0	22	4	44
Defor- mities {	Rickets .. .. .	0	0	0	0
	Spinal Curvature .. .. .	2	1	0	0
	Other Forms .. .. .	18	26	11	3
Other Defects and Diseases (excluding Uncleanliness and Dental Diseases)	26	75	99	26	



## ELEMENTARY SCHOOLS.

### TABLE II.—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	
PRESCRIBED GROUPS :—			
Entrants .. ..	833	78	9·36
Second Age Group ..	820	145	17·67
Third Age Group ..	979	134	13·68
Total (Prescribed Groups) ..	2632	357	13·18
Other Routine Inspections	0	0	0·0

BURTON UPON TRENT

**Children Suffering from Multiple Defects.**

**MALES at Public Elementary Schools.**

- 1 1. Spastic paraplegia, feeble-minded and Epileptic.
- 2 1. Heart Disease and Epileptic.

**MALE at no School or Institution.**

- 3 1. Feeble-minded and Epileptic.

**FEMALE at Public Elementary School.**

- 4 1. Feeble-minded and Epileptic.

**FEMALE at no School or Institution.**

- 5 1. Feeble-minded and Epileptic.



## ELEMENTARY SCHOOLS.

### TABLE III.

**Return of all Exceptional Children in the Area for Year 1933.**

		Total
Children suffering from the following types of Multiple Defect, i.e., any combination of Total Blindness, Total Deafness, Mental Defect, Epilepsy, Active Tuberculosis, Crippling (as defined in penultimate category of the Table), or Heart Disease .. .. .		5
<p><i>Blind Children—</i> A blind child is a child who is too blind to be able to read the ordinary school books used by children.</p>	<p>At Certified Schools for the Blind .. .. .</p> <p>At Public Elementary Schools .. .. .</p> <p>At other Institutions .. .. .</p> <p>At no School or Institution .. .. .</p>	<p>—</p> <p>—</p> <p>—</p> <p>—</p> <p style="font-size: 2em;">}</p> <p style="text-align: right;">0</p>
<p><i>Partially Blind Children—</i> Children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially blind.</p>	<p>At Certified Schools for the Blind .. .. .</p> <p>At Certified Schools for the partially Blind .. .. .</p> <p>At Public Elementary Schools .. .. .</p> <p>At other Institutions .. .. .</p> <p>At no School or Institution .. .. .</p>	<p>4</p> <p>—</p> <p>14</p> <p>—</p> <p>1</p> <p style="font-size: 2em;">}</p> <p style="text-align: right;">19</p>
<p><i>Deaf Children—</i> A deaf child is a child who is too deaf to be taught in a class of hearing children in an elementary school.</p>	<p>At Certified Schools for the Deaf .. .. .</p> <p>At Public Elementary Schools .. .. .</p> <p>At other Institutions .. .. .</p> <p>At no School or Institution .. .. .</p>	<p>1</p> <p>—</p> <p>—</p> <p>1</p> <p style="font-size: 2em;">}</p> <p style="text-align: right;">2</p>
<p><i>Partially Deaf Children—</i> Children who can appropriately be taught in a school for the partially deaf.</p>	<p>At Certified Schools for the Deaf or Partially Deaf .. .. .</p> <p>At Public Elementary Schools .. .. .</p> <p>At other Institutions .. .. .</p> <p>At no School or Institution .. .. .</p>	<p>—</p> <p>9</p> <p>—</p> <p>—</p> <p style="font-size: 2em;">}</p> <p style="text-align: right;">9</p>
<p><i>Mentally Defective Children—</i></p>	<p>At Certified Schools for Mentally Defective Children .. .. .</p> <p>At Public Elementary Schools .. .. .</p> <p>At other Institutions .. .. .</p> <p>At no School or Institution .. .. .</p>	<p>—</p> <p>30</p> <p>—</p> <p>14</p> <p style="font-size: 2em;">}</p> <p style="text-align: right;">44</p>
<p><i>Epileptic Children—</i>  Suffering from severe epilepsy</p>	<p>At Certified Special Schools .. .. .</p> <p>At Public Elementary Schools .. .. .</p> <p>At other Institutions .. .. .</p> <p>At no School or Institution .. .. .</p>	<p>—</p> <p>13</p> <p>—</p> <p>2</p> <p style="font-size: 2em;">}</p> <p style="text-align: right;">15</p>

## ELEMENTARY SCHOOLS.

TABLE III.—*continued.*

			Total
<i>Physically Defective Children—</i>			
<p>Physically Defective children are children who, by reason of physical defect, are incapable of receiving proper benefit from the instruction in the ordinary Public Elementary Schools, but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for physically defective children.</p>			
<i>A. Tuberculous Children.</i>			
<i>I.—Children suffering from Pulmonary Tuberculosis</i>  (Including pleura and intrathoracic glands).	At Certified Special Schools ..	—	} 0
	At Public Elementary Schools ..	—	
	At other Institutions ..	—	
	At no School or Institution ..	—	
<i>II.—Children suffering from Non-Pulmonary Tuberculosis</i>			
Tuberculosis of all sites other than those shown in (1) above.	At Certified Special Schools ..	—	} 20
	At Public Elementary Schools ..	—	
	At other Institutions ..	12	
	At no School or Institution ..	5 3	



## ELEMENTARY SCHOOLS.

TABLE III.—*continued.*

			Total
<i>B. Delicate Children—</i>	At Certified Special Schools .. — At Public Elementary Schools .. 85 At other Institutions .. — At no School or Institution .. —	}	85
<i>C. Crippled Children—</i>	At Certified Special Schools .. — At Public Elementary Schools .. 39 At other Institutions .. 3 At no School or Institution .. 4	}	46
<i>D. Children with Heart Disease—</i>	Confined to children whose defect is so severe as to necessitate the provision of educational facilities other than those of the Public Elementary School. At Certified Special Schools .. — At Public Elementary Schools .. 20 At other Institutions .. — At no School or Institution .. 4	}	24

## ELEMENTARY SCHOOLS.

### TABLE IV.

**Return of Defects Treated during the Year ended 31st December, 1933.**

#### TREATMENT TABLE.

**GROUP 1.—MINOR AILMENTS (excluding Uncleanliness, for which see Group VI.)**

Disease or Defect.  (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise (3)	Total. (4)
<i>Skin—</i>			
Ringworm—Scalp (Show separately in brackets the number which were treated by X-Rays) .. .. .	9 (2)	—	9
Ringworm—Body .. .. .	7	—	7
Scabies .. .. .	15	—	15
Impetigo .. .. .	134	4	138
Other Skin Disease .. .. .	73	4	77
Minor Eye Defects .. .. . (External and other, but excluding cases falling in Group II.)	308	31	339
Minor Ear Defects .. .. .	42	—	42
Miscellaneous .. .. . ( <i>e.g.</i> , minor injuries, bruises, sores, chilblains, &c.)	358	8	366
Total .. .. .	946	47	993



**ELEMENTARY SCHOOLS.**  
**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.	By Private Practitioner or at Hospital, apart from the Authority's Scheme.	Otherwise.	Total
(1)	(2)	(3)	(4)	(5)
<b>Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report) .. ..</b>	316	2	—	318
<b>Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ..</b>	3	—	—	3
<b>Total .. ..</b>	<b>319</b>	<b>2</b>	<b>—</b>	<b>321</b>

**Total number of children for whom spectacles were prescribed—**

	Under the Authorities Scheme.	Other-wise
(a) Errors of refraction (including squint) .. ..	260	2
(b) Other defect or Disease of the Eyes .. ..	2	0

**Total number of children who obtained or received spectacles—**

(a) Errors of refraction (including squint) .. ..	253	2
(b) Other defect or Disease of the Eyes .. ..	2	0

**GROUP III.**  
**TREATMENT OF DEFECTS OF NOSE AND THROAT.**

Number of Defects.												Total number treated	
Received Operative Treatment.								Received other forms of Treatment.					
Under the Authority's Scheme, in Clinic or Hospital.				By Private Practitioner or Hospital apart from the Authority's Scheme.				Total				(4)	(5)
(1)		(2)		(3)		(4)		(5)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
—	—	—	—	3	4	70	—	3	4	70	—	—	77

(i) Tonsils only.                      (ii) Adenoids only.                      (iii) Tonsils and Adenoids.  
 (iv) Other defects of the nose and throat.

**ELEMENTARY SCHOOLS.**

**TABLE IV.—***continued*

**GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.**

Number of Children Treated—

Under the Authority's Scheme: (1)

Residential treatment with education .. ..	5
Residential treatment without education .. ..	0
Non-residential treatment at an orthopædic clinic ..	86

Otherwise: (2)

Residential treatment with education .. ..	0
Residential treatment without education .. ..	1
Non-residential treatment at an orthopædic clinic ..	0

Total number treated .. .. . 91

**GROUP V.—DENTAL DEFECTS.**

(1) Number of Children who were :

(a) Inspected by the Dentist :

Routine Age Groups.	Aged 4 .. .. .	89
	5 .. .. .	523
	6 .. .. .	668
	7 .. .. .	839
	8 .. .. .	836
	9 .. .. .	728
	10 .. .. .	766
	11 .. .. .	807
	12 .. .. .	766
	13 .. .. .	702
	14 .. .. .	239
	15 .. .. .	16
	16 .. .. .	1

Total .. .. . 6980

Specials .. .. . 516

Grand Total .. .. . 7496

(b) Found to require treatment .. .. . 4919

(c) Actually treated .. .. . 2250



### ELEMENTARY SCHOOLS.

(2) Half-days devoted to:							
Inspection	..	..	..	..	..	..	33
Treatment	..	..	..	..	..	..	439
							—
Total ..	..	..	..	..	..	..	472
(3) Attendances made by children for treatment .. .. 3864							
(4) Fillings:							
Permanent Teeth	..	..	..	..	..	..	1312
Temporary Teeth	..	..	..	..	..	..	195
							—
Total ..	..	..	..	..	..	..	1507
(5) Extractions:							
Permanent Teeth	..	..	..	..	..	..	439
Temporary Teeth	..	..	..	..	..	..	2877
							—
Total	..	..	..	..	..	..	3316
(6) Administrations of general anæsthetics for extractions 169							
(7) Other operations:—							
Permanent Teeth	..	..	..	..	..	..	567
Temporary Teeth	..	..	..	..	..	..	26
							—
Total	..	..	..	..	..	..	593

### GROUP VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i) Average number of visits per school made during the year by the School Nurses .. .. .	12
(ii) Total number of examinations of children in the Schools by School Nurses .. .. .	23,090
(iii) Number of individual children found unclean ..	729
(iv) Number of children cleansed under arrangements made by the Local Education Authority .. .. .	0
(v) Number of cases in which legal proceedings were taken:—	
(a) Under the Education Act, 1921 .. .. .	0
(b) Under School Attendance Byelaws .. .. .	3

**STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED  
DURING THE YEAR ENDED 31st DECEMBER, 1933, BY THE  
LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL  
DEFICIENCY AUTHORITY.**

Total number of children notified—7.

ANALYSIS OF THE ABOVE TOTAL.

DIAGNOSIS.	Boys.	GIRLS.
1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School :		
(a) Idiots .. .. .	1	—
(b) Imbeciles .. .. .	4	2
(c) Others .. .. .	—	—
(ii) Children unable to be instructed in a Special School without detriment to the interests of other children :		
(a) Moral defectives .. .. .	—	—
(b) Others .. .. .	—	—
2. Feeble-minded children notified on leaving a Special School on or before attaining the age of 16 .. .. .	—	—
3. Feeble-minded children notified under Article 3, i.e., "special circumstances" cases .. .. . NOTE.—No child should be notified under Article 3 until the Board have issued a formal certificate Form 308M) to the Authority.	—	—
4. Children who in addition to being mentally defective were blind or deaf .. .. . NOTE.—No blind or deaf child should be notified without reference to the Board—see Article 2, proviso (ii).	—	—
GRAND TOTAL .. .. .	5	2



# SECONDARY SCHOOLS.

## RETURN OF MEDICAL INSPECTIONS FOR YEAR ENDED 31st DECEMBER, 1933.

### A.—ROUTINE MEDICAL INSPECTIONS.

Age	}	Under 9 years	..	..	..	26	
		9	..	..	..	6	
		10	..	..	..	9	
		11	..	..	..	49	
		12	..	..	..	117	
		13	..	..	..	90	
		14	..	..	..	74	
		15	..	..	..	68	
		16	..	..	..	71	
		17	..	..	..	30	
		18	..	..	..	14	
		19	..	..	..	1	
Total						..	555

### B.—OTHER INSPECTIONS.

Number of Special Inspections	..	..	18
Number of Re-Inspections	..	..	173
Total			..
			191

## SECONDARY SCHOOLS.

### Return of Defects found by Medical Inspection in the Year ended 31st December, 1933.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS		SPECIAL INSPECTIONS		
	No. of Defects		No. of Defects		
	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring Treatment.	
(1)	(2)	(3)	(4)	(5)	
Malnutrition .. .. .	—	—	—	—	
Skin {	Ringworm—Scalp .. .. .	0	0	2	0
	Body .. .. .	0	0	0	0
	Scabies .. .. .	0	0	0	0
	Impetigo .. .. .	0	0	0	0
	Other Diseases (Non-tuberculous) .. .. .	0	1	0	0
Eye {	Blepharitis .. .. .	1	1	0	0
	Conjunctivitis .. .. .	0	0	0	0
	Keratitis .. .. .	0	0	0	0
	Corneal Opacities .. .. .	0	0	0	0
	Defective Vision (ex.squint)	19	65	1	1
	Squint .. .. .	0	0	0	0
Ear {	Other Conditions .. .. .	0	1	0	0
	Defective Hearing .. .. .	0	0	0	0
	Otitis Media .. .. .	0	1	0	0
	Other Ear Diseases .. .. .	0	0	0	0
Nose and Throat {	Chronic Tonsillitis only .. .. .	3	14	0	0
	Adenoids only .. .. .	0	0	0	0
	Chronic Tonsillitis and Adenoids .. .. .	0	0	0	0
Other Conditions .. .. .	0	1	0	0	
Enlarged Cervical Glands (Non-Tub.)	0	1	0	0	
Defective Speech .. .. .	0	2	0	0	
Heart and Circulation {	Heart Disease :				
	Organic .. .. .	0	0	0	0
	Functional .. .. .	0	9	0	0
Lungs {	Anæmia .. .. .	4	1	0	0
	Bronchitis .. .. .	0	3	0	0
	Other Non-Tuberculous Diseases .. .. .	0	4	0	0
	Pulmonary :				
Tuberculosis {	Definite .. .. .	0	0	0	0
	Suspected .. .. .	0	0	0	0
	Non-Pulmonary :				
	Glands .. .. .	0	0	0	0
	Bones and Joints .. .. .	0	0	0	0
	Skin .. .. .	0	0	0	0
Other Forms .. .. .	0	0	0	0	
Nervous System {	Epilepsy .. .. .	0	1	0	0
	Chorea .. .. .	0	0	0	0
	Other Conditions .. .. .	0	1	0	0
Deformities {	Rickets .. .. .	0	0	0	0
	Spinal Curvature .. .. .	0	0	0	0
	Other Forms .. .. .	2	1	0	0
Other Defects and Diseases excluding uncleanliness and dental diseases	0	7	0	0	



## SECONDARY SCHOOLS.

**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	
Total     ..     ..     ..	555	28	5.05

## SECONDARY SCHOOLS.

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

Defect or Disease.  (1)	No. of Defects dealt with.			
	Under the Authority's Scheme.  (2)	By Private Prac- titioner or at Hospital, apart from the Authority's Scheme. (3)	Otherwise.  (4)	Total.  (5)
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report) .. ..	11	10	0	21
Other Defects or Disease of the Eyes (excluding those recorded in Group I.) ..	0	0	0	0
Total .. ..	11	10	0	21

Total number of children for whom spectacles were prescribed—

(a) Under the Authority's Scheme .. .. .	11
(b) Otherwise .. .. .	9

Total number of children who obtained or received spectacles—

(a) Under the Authority's Scheme .. .. .	11
(b) Otherwise .. .. .	9



# SECONDARY SCHOOLS.

## GROUP IV.—DENTAL DEFECTS.

(1) Number of Children who were :—						
(a) Inspected by the Dentist :						
Routine Age Groups	..	..	..	..	..	0
Specials	..	..	..	..	..	0
						—
Grand Total..	..	..	..	..	..	0
(b) Found to require treatment .. .. . 0						
(c) Actually treated .. .. . 21						
(2) Half-days devoted to :						
Inspection	..	..	..	..	..	0
Treatment	..	..	..	..	..	0
						—
Total	..	..	..	..	..	0
(3) Attendances made by children for treatment .. .. 47						
(4) Fillings :						
Permanent Teeth	..	..	..	..	..	32
Temporary Teeth	..	..	..	..	..	0
						—
Total	..	..	..	..	..	32
(5) Extractions :						
Permanent Teeth	..	..	..	..	..	8
Temporary teeth..	..	..	..	..	..	14
						—
Total ..	..	..	..	..	..	22
(6) Administrations of general anæsthetics for extractions .. 2						
(7) Other operations :—						
Permanent teeth	..	..	..	..	..	9
Temporary teeth	..	..	..	..	..	0
						—
Total	..	..	..	..	..	9

# INDEX.

---

	Page.
Arrangements for Treatment ... ..	15
Blind, Deaf, Defective and Epileptic Children ... ..	27
Children's Care Committee ... ..	23
Co-operation of Parents ... ..	21
Co-operation of School Attendance Officers ... ..	22
Co-operation of Teachers ... ..	22
Co-operation of Voluntary Bodies ... ..	22
Co-ordination ... ..	6
Crippling Defects and Orthopædics ... ..	10 & 19
Dental Defects ... ..	9 & 18
Ear Disease and Hearing ... ..	9 & 18
Employment of School Children ... ..	29
Exclusion from School ... ..	11
External Eye Diseases ... ..	16
Heart Disease and Rheumatism ... ..	10 & 19
Following up ... ..	14
Findings of Medical Inspection ... ..	7
Infectious Diseases ... ..	13
Malnutrition ... ..	7 & 15
Medical Inspection ... ..	6
Minor Ailments ... ..	8 & 16
Nose and Throat ... ..	9 & 17
Nursery Schools ... ..	27
Open-air Education ... ..	20
Orthopædic and Postural Defects ... ..	10 & 19
Physical Training ... ..	20
Provision of Meals ... ..	20
Report by School Oculist ... ..	16
School Hygiene ... ..	6
Secondary Schools ... ..	27
Staff ... ..	4 & 5
Tables—Elementary Schools ... ..	30
Tables—Secondary Schools ... ..	42
Tuberculosis ... ..	10 & 19
Uncleanliness ... ..	8 & 15
Vision ... ..	8 & 16
Vaccination ... ..	14





