# [Report 1936] / School Medical Officer of Health, Burton-upon-Trent County Borough.

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County Borough of Burton upon Trent.

EDUCATION COMMITTEE.

# ANNUAL REPORT

UPON THE

# SCHOOL MEDICAL SERVICE

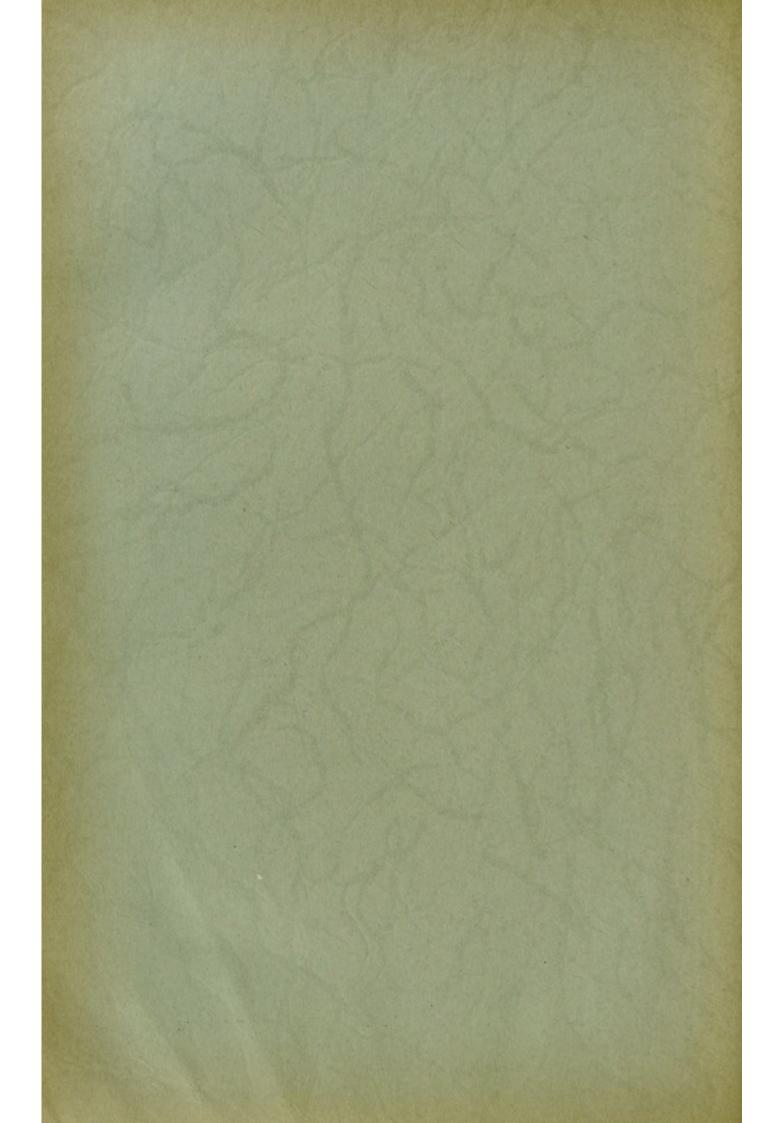
FOR THE YEAR 1936.

BY

JAMES M. COWIE,

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

SCHOOL MEDICAL OFFICER.





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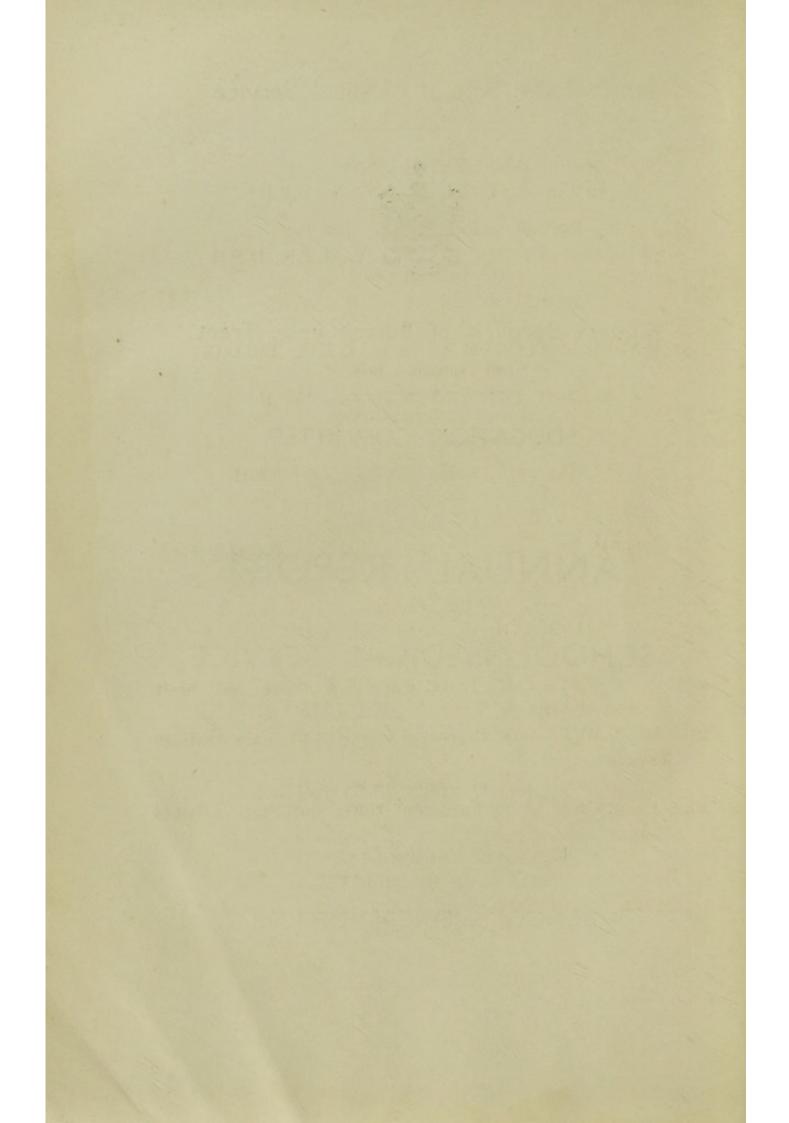
FOR THE YEAR 1936,

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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 Officers:

WILLIAM ALCOCK, M.B., Ch. B., B.Hy., D.P.H. (Left October, 1936).

THOMAS ROSS, M.B., Ch.B., D.P.H. (Commenced November, 1936).

ISABEL TAYLOR, M.B., Ch. B., D.P.H., D.C.O.G. (Left September, 1936).

E. ANNE PERROTT, M.B., B.S., D.P.H. (Commenced October, 1936).

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, State Registered Nurse and State Certified Midwife.

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

School Dental Nurse:

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

Masseuse at Orthopædic Clinic:

MISS M. J. W. ABBOTTS

Cert. Ch. Soc. of Massage and Medical Gymnastics and M.E. (Part Time)

Clerk:

MISS G. BAKEWELL.

ATTENDED TO STREET, ST

# Annual Report of the School Medical Officer.

#### TO THE LOCAL EDUCATION AUTHORITY, BURTON UPON TRENT.

I have pleasure in submitting the Annual Report of the School Medical Officer for the year 1936.

The report is a commentary on the results of the statutory Medical Inspections of school children and of supplementary inspections and treatment provided by the School Medical Service.

There is no significant change in the state of nutrition of the school children, the total incidence and degree of malnutrition being almost the same as in 1935.

There was experienced during the year the periodic epidemic of Measles with a great increase in cases of the disease amongst school children, with no deaths. Scarlet Fever and Diphtheria continued at high rates of incidence and one death resulted from the former and three deaths from the latter amongst school children On the whole there has been but little advantage taken of the provision of facilities for immunisation of children against Diphtheria. Admittedly the procedure is unavoidably time absorbing but considering the benefit conferred that should be a small matter.

 Staff. Dr. W. Alcock, Assistant School Medical Officer, terminated his duties on 31st October, 1936, to take office as Deputy Medical Officer of Health and Tuberculosis Officer to the Metropolitan Borough of Greenwich.

Dr. Thomas Ross began duties on 2nd November, 1936.

Dr. Isabel Taylor resigned on 30th September, 1936.

Dr. E. Anne Perrott began duties on 1st October, 1936.

Co-ordination. No change has taken place in the administration of the School Medical Service during the year, and close co-operation with the Health, Infant Welfare, Tuberculosis, Mental Deficiency and other services continues.

The assistance of the General Practitioners, the Factory Surgeon, the staffs of the Institutions and the Voluntary Associations has been valuable, and I again express thanks for their co-operation.

3. **School Hygiene.** The new school in Clarence Street was completed in 1936 ready for use in 1937. There will be noticeable relief of overcrowding in other schools serving the area.

There are in Burton 35 departments and 18 separate buildings.

The following indicates attendance and average number on roll:

Accommodation ... 9017 Average number on roll ... 7301 Average attendance ... 6451

- 4. **Medical Inspection.** Medical Inspection consists of two main divisions:—
  - (1) Routine or Statutory Inspection of :-
    - (a) Entrants—children admitted during year usually aged 4-6 years.
    - (b) Intermediates—in 9th year of age.
    - (c) Leavers-in 13th year of age.

(2) Supplementary Inspection of defects either specially referred for investigation by parents or teachers or found at previous routine examination. Such inspections are repeated each term until defect is remedied or further supervision is not required.

The number of routine inspections in the required groups was as under :—

	Total	 2199
Leavers	 	 773
Intermediates	 	 721
Entrants	 	 705

# AVERAGE HEIGHT AND WEIGHT OF CHILDREN ROUTINE **EXAMINED DURING THE PAST 8 YEARS.**

# Boys.

36	W'ht	17.7	18.9	20.4	25.5	27.5	37.1	38.8
19	H'ght	103.9	108.1	112.7	.0 125.4	129.6	144.0	145.9
35	W'ht	17.5	18.9	19.9	25.0	26.2	36.2	39.4
1935	H'ght	103.3	9.801	112.3	125.5	127.7	143.5	147.5
14	W'ht				25.7			
1934	H'ght	.0 103.3	107.7	112.1	124.8	129.6	143.8	146.3
3	N.	17	18	19	25	26	36	38
1933	H'ght	.4 102.2	9.701	111.0	125.4	127.7	143.5	146.1
12	W'ht	17.4	18.7	20.2	25.2	27.2	36.1	38.2
193	H'ght	103.8	107.5	112.1	125.1	129.0	143.4	146.2
11	W'ht	17.2	18.4	20.0	25.4	26.5	35.3	38.5
1931	H'ght	102.1	106.7	112.3	124.4	127.5	141.6	145.5
30	W'ht	17.1	18.5	20.4	24.7	26.3	35.1	37.0
198	H'ght	101.9	106.7	113.2	123.3	127.6	141.7	146.2
67	W'ht	17.2	18.5	19.7	25.1	26.9	*	0
192	H'ght	101.9	106.8	112.3	124.2	127.8	141.7	145.8
Age		4 yr.	5 yr.	S yr.	S yr.			
-							12	11

# Girls.

36	W'ht	17.6	18.1	1.61	25.2	27.4	38.1	42.1
19:	H'ght W	103.2	107.2		125.8	129.0	-	150.7
35	W'ht	17.3	18.3	19.8	24.5	25.8	38.9	42.2
1935	H'ght	102.9	107.1	112.0	125.0	127.4	147.8	150.6
34	W'ht	16.3	18.1	20.1	24.6	26.5	37.4	38.7
1934	H	101.3	700	2000	-	128	143	200
38	-	16.7	18.2	19.8	24.9	25.9	37.6	39.5
1933	H'ght	102.0	106.4	111.9	125.4	128.1	146.4	148.6
32	W'ht	16.7	18.4	19.4	24.4	26.1	36.0	38.5
1932	H'ght	103.3	107.7	111.0	124.1	128.4	143.6	149.6
11	W'ht	16.9	18.0	19.6	24.7	25.5	35.4	43.2
1931	H'ght	102.3	105.9	111.7	124.9	126.2	143.7	150.3
30	W'ht	16.8	18.2	19.8	24.4	25.8	36.9	40.6
1930	bo	102.5	9.901	112.0	123.8	127.4	144.4	148.5
67	W'ght				24.3			
192	H'ght	100.3	105.7	110.2	123.9	126.4	144.4	147.3
Age	,	VI.	VI.					yr.
A		4	S	9	80	6	12	13

The Height is in centimetres.

The weight is in Kilogrammes.

The School Nurses made 20,970 examinations during 12 visits to each school. These general inspections are made for detection of uncleanliness and skin diseases, for hygienic advice to scholars and teachers and the following up of the results of treatment and advice given by them and the School Medical Officers to parents.

This indicates a slight decrease in each group, as expected from a declining birth rate, coupled possibly with a decreasing occurrence of defects.

#### 5. Findings of Medical Inspection.

#### (a) Nutrition.

Following the recommended classifications of nutrition four grades of nutrition are recognised, viz. :—

- (a) Excellent
- (b) Normal
- (c) Slightly subnormal
- (d) Bad

The basis of assessment of nutritional state is again clinical rather than on rigid application of an age-height-weight ratio.

Table II. B. at end of report shows the absolute numbers and percentages falling under each of above headings. The essential fact emerging from study of the table is that slightly over 9% of the children examined at routine inspections are unsatisfactory from a nutritional point of view, although only one child was markedly under-nourished.

(b) Cleanliness. There is but little change to note in respect of cleanliness compared with 1935, 519 children having been found in an unclean condition necessitating 754 exclusions during the year.

As hitherto, verminous conditions of the head constitute the greater part of the exclusions. The failure to recognise the importance of "nits" remaining in the hair even in small numbers and in

the absence of live lice accounts in some measure for the continuance of this form of uncleanliness. Undoubtedly another factor is the verminous state of the heads of members of the family not attending school, and therefore not supervised or coerced into cleanliness, and I feel that until such persons are cleansed there will remain a hard core of persistently unclean children attending elementary schools.

Verminous heads predispose to Impetigo of scalp and inflammation of the eyelids.

- (c) Minor ailments and diseases of the skin. 834 cases were referred for treatment as a result of routine special and general inspections. 10 were cases of scabies and 89 of skin disease other than scabies.
- (d) Visual defects and external eye disease. Errors of refraction, including 23 cases of squint, treated by the Ophthalmic Surgeon number 323 and involved 1,017 attendances at the Eye Clinic. 188 cases of external eye disease were treated at the minor ailments clinic; of these 46 were cases of Conjunctivitis, that is about the same as in the previous year. The Ophthalmic Surgeon's Report on the year's work is included later and shows a generally satisfactory response on the part of the parents to the offer of treatment.
- (e) **Nose and Throat Defects.** Chronic tonsillitis as indicated by enlarged and or inflamed tonsils still constitutes the greater part of the total of nose and throat defects, but only those cases in which the health and efficiency of the child are obviously being impaired are recommended to have surgical treatment and this usually after prolonged observation of the case. In view of the care exercised in observation of the cases and the decided tendency to conserve the tonsils if at all possible, it is regrettable that in many cases delay occurs in having surgical measures carried out, when recommended. 16.3% of all children seen at routine inspections were found to have defective tonsils or adenoids but only one fifth of these were recommended for surgical treatment.

- (f) Ear disease and defective hearing. Defective hearing as found in school children at routine and special inspections is often due simply to blockage of the external ear with wax, and is, therefore, readily relieved in such cases by removal of the obstruction. The removal of the impacted wax sometimes requires several days treatment at the School Clinic. Defective hearing due to past middle-ear disease is not likely to improve and therefore the more importance attaches to the early treatment of existing Otitis Media to prevent the onset of deafness or limit its severity. Eight cases of defective hearing were found at inspections and 30 cases of Otitis Media; 29 of the latter were referred for treatment and 1 for observation.
- (g) **Dental defects.** 6,973 children were examined at School Dental Inspections, 4,497 (64.4%) being referred for treatment. 2,139 of these received treatment at the School Dental Clinic.
- (h) Orthopædic and Postural defects. Satisfactory results of treatment of this type of defect continue to be obtained at the Orthopædic Clinic.
- (i) Heart disease and Rheumatism. In recognition of the insidious advance of rheumatic damage to the heart which so frequently follows any of the manifestations of rheumatic affection, i.e., Rheumatism, "Growing Pains," Rheumatic Fever, Chorea (St. Vitus Dance), all children with a history of such affection are examined at 3 monthly intervals. The following table shows the incidence of heart disease amongst the school children.

## Children suffering from Heart or Rheumatic Diseases.

		Males	Females	Total
Congenit	al heart disease	1	3	4
Aquired	heart disease			
(1)	With no antecedent rheumatism	5	5	10
(2)	Following Chorea	2	8	10
(3)	Following sub-acute or Chronic			
	Rheumatism	5	7	12
(4)	Following Rheumatic Fever	4	3	7
(5)	Following Rheumatism and Chor	rea 1	2	3
No sign o	of Heart Disease but,			
(1)	History of Chorea	5	8	13
(2)	History of Rheumatic Fever	5	3	8
(3)	History of sub-acute or Chronic			
	Rheumatism	11	16	27
(4)	History of Rheumatism and Cho	rea 1	2	3
		40	57	97

(j) **Tuberculosis.** Three cases of Non-Pulmonary Tuberculosis were found at inspection to require treatment.

One case of Pulmonary Tuberculosis was found in a child of school age during the year.

The system of examining each term all children, who have at any time, been in contact with a case of Pulmonary Tuberculosis has been continued.

(k) **Crippling Defects.** During the year 1936, 6 new cases were added to the Register of physically defective children, the total now being 62.

## The following table gives an analysis of these figures :—

	Number added 1936.	in Total number on Register
Organic Heart Disease		
(Compensation not fully acquired)	· mgag	
(a) Congenital		2
(b) Acquired	1	10
Tuberculosis of Bones and Joints	1	3
Tuberculosis of other parts	2	13
Deformities following Poliomyelitis	2	9
Defective Vision (High Myopia etc	c.) –	9
Defective Hearing		- 4
Congenital Deformities		7
Miscellaneous		5
	-	_
	6	62
	_	_
Exclusions from School.		
Exclusions from School.		No. of exclusions
Uncleanliness		. 754
Skin Diseases—Impetigo and Sore	s	. 186
Scabies		. 10
Ringworm: Scal		. 1
Body		. 8
Herpes		. 25
Miscellaneous Der	matitis	. 28
P. D. C. I		13
Ear Diseases—Otorrhoea		. 27
Furunculosis		

Eye Diseases—	Keratitis and Corneal Ulcer	rs		3
	Conjunctivitis			49
	Blepharitis and Hordeola			11
	Suppurating Chalazion			1
	Myopia			4
Throat	Tonsillitis and Sore Throa	at		40
	Enlarged Glands			9
Other Diseases	Bronchitis			11
	Rheumatism and Chorea			8
	Tuberculosis			1
	Epilepsy			13
	Miscellaneous			118
	Te	otal	1	307

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

SCHOOLS AND INFECTIOUS DISEASES

scho	OOL		Whoop- ing Cough.	Chicken Pox.	German Measles and Measles.		Diph- theria.	Mumps.
Winshill			 20	13	97	21	2	1
Horninglow			 15	65	46	4	1	43
Broadway			 2	25	127	5	6	4
Mission Room, Sta	penhi	111	 0	35	51	1	4	7
Victoria Road			 8	70	69	10	10	3
Grange Street			 2	32	79	13	12	1
Holy Trinity			 8	5	38	2	3	1
Christ Church			 4	39	118	3	4	12
Shobnall Road			 1	0	3	11	0	0
Hill Street and St	. Peter	r's Street	1	43	70	6	19	28
Guild Street			 1	3	5	19	3	2
Wetmore Road			 18	5	18	3	0	0
Uxbridge Street			 4	25	201	10	31	3
St. Modwen's			 1	0	16	0	1	- 0
Goodman Street a	nd Sta	afford St	3	5	76	5	3	6
High School (Girls	;)		 0	1	0	1	1	0
Grammar School			 0	0	0	1	0	0
No School			 15	41	84	74	29	4
Private School			 0	0	0	1	0	0
Bond Street			 0	1	41	2	2	0
		Totals	 103	408	1139	192	131	115

Measles was by far the most important epidemic disease affecting school children during the year, although the incidence of cases of Scarlet Fever, Diphtheria, Whooping Cough, and Chicken Pox continued at the high level of the previous year. Scarlet Fever caused the death of one school child from Meningitis following Mastoiditis, while four fatal cases of Diphtheria including one child under school age occurred.

Three visits to schools were made during the year with a view to the detection of possible missed cases of Scarlet Fever, when an unduly large number of cases of Scarlet Fever were being notified from the schools in question.

There were 11 deaths amongst children of school age during 1936.

Cause	of dea	th.			1	Number.
Diphtheria					 	3
Heart Disease_	congen	ital			 	1
	Myocai	rdial de	genera	tion	 	1
Ear disease					 	2
Epilepsy					 	1
Tuberculous Kie	dneys				 	1
Pneumonia					 	1
Scarlet Fever					 	1

#### **VACCINATION TABLE, 1936.**

1	Unvaccinated	Vaccinated per cent.				
Age Period.	per cent.	Under 4 Marks.	4 or more Marks.			
Entrants	85.7	13.9	0.4			
Intermediates	72.5	8.2	19.3			
Leavers	59.6	8.0	32.3			

The percentage of unvaccinated children continues to increase.

7. **Following up.** This essential part of the service necessitated 101 home visits by the School Nurses during the year. Where repeated efforts have failed to produce the necessary action on the part of the parents a home visit usually produces the desired results. In addition valuable information concerning the child's environment is frequently obtained. The School Nurses made 27 visits for other purposes.

I desire once more to thank the Local Inspector of the National Society for the Prevention of Cruelty to Children. His active cooperation in securing for the children the necessary treatment which the parents had failed to obtain has been most valuable.

Further following up is done at the Medical Reinspections carried out each term at all the schools.

#### 8. Arrangements for treatment.

- (a) Malnutrition. This is dealt with under Section 5.
- (b) **Uncleanliness.** The responsibility for keeping a child clean rests upon the parents. Children found in an unclean condition are excluded from school and examined at the School Clinic; re-admission not being permitted until the child is clean.
- attended the School Clinic for treatment whilst 51 obtained treatment from other sources. This resulted in 10,141 attendances at the School Clinic for the treatment of these minor conditions and for head examinations. 167 were cases of skin disease including 10 cases of Scabies treated at the School Clinic.
- (d) i. External Eye Disease. 188 cases chiefly of conjunctivitis were treated at the School Clinic whilst 18 were treated elsewhere.

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

#### Report on Refraction Clinic for 1936.

The total number of attendances at the Eye Clinic during 1936 was 1,017. It is customary to tabulate the various forms of refractive error found and such a list is appended hereto.

The work has been carried out with remarkable smoothness due to the kind co-operation of the School Medical Officer and his Staff, and a gratifying willingness on the part of parents in bringing their children for examination.

The introduction of a new prescription form has facilitated in imparting more definite instructions to parents regarding the hygiene of vision. This latter point is one which the members of the staff of the Eye Clinic regard as of first class importance, and it is ever their concern to teach patients and those responsible for them the importance of the correct use of glasses, illumination and the simple rules of hygiene so necessary in growing children. One feels that 1936 has been a successful year.

#### TREATMENT OF DEFECTIVE VISION 1936.

Total number of children attending R	efraction	Clinic	s	382*
Total number of attendances	ng vina			1017
Number prescribed glasses				320‡
Number referred to Infirmary				2
Number found not to require glasses				26
Present glasses suitable	1			3

<sup>\*</sup> Includes 22 secondary school children.

<sup>‡</sup> Includes 22 secondary school children.

#### ANALYSES OF FINDINGS.

Hypermetropia		 	212
Hypermetropic astigmatism		 .,.	265
Myopia		 	68
Myopic astigmatism		 	85
Mixed astigmatism		 	30
Squint and Hypermetropia		 	19
Squint and Hypermetropic Astigmati	ism	 	4
Emmetropia		 	7

For the purpose of the analyses each eye has been taken into consideration separately.

There were six cases of marked Anisometropia.

(e) Nose and Throat Defects. The Local Education Authority has no special scheme for the treatment of diseased tonsils and adenoids. The majority of cases obtain operative treatment at the Burton upon Trent General Infirmary, a few being treated by private practitioners.

Through the courtesy of the Infirmary Staff, I am informed that 92 operations upon school children for diseased tonsils and/or adenoids were performed during 1936.

(f) Ear Disease and Defective Hearing. Treatment of Ear disease is carried out at the School Clinic by the Assistant School Medical Officers personally. All cases are reviewed once a week. In addition to the usual ear toilet, followed by the insufflation of iodine and boric powder mixture, a number of cases were treated by Zinc Ionisation. This was carried out according to the method recommended by Friel.

During the year 11 cases were so treated the number of treatments given being 22.

Results :- Cured 9 (81.8%). Not cured 2 (18.2%).

The proportion of cases cured is low compared with results which have been claimed for this treatment, but it should be pointed out that several of the cases were of long standing and were really cases of mastoid sepsis.

Two cases not cured were transferred to their own Doctors.

To summarise, Zinc Ionisation treatment is valuable in the acute, or not too chronic running ear. If it fails after repeated trials, it is an indication that deep seated mastoid trouble exists necessitating operative measures.

The following table summarises the wor	k of	the Ear	Clinic :-
Number of ear examinations			719
(1) Minor conditions			
Wax Impaction			43
Defective hearing			_
Furunculosis			6
Foreign bodies			_
Polypos			1
			-
			50
(2) Otorrhoea. Result of treatment			
(a) Routine treatment			
Ears dry			22
Improved but still attending			6
Ceased attending			3
Transferred to own Doctor			2
Transferred to Infirmary			2
			35
(b) Special Treatment. (Zinc Ionis	ation	1)	
Cured			9
Not cured			2
			11

- (g) Dental Defects. 2,139 children obtained treatment at
   the School Dental Clinic. 293 administrations of Nitrous Oxide
   gas anæsthesia were required for extractions.
- (h) Orthopædic and Postural Defects. With the opening of the new Maternity and Child Welfare Centre in Cross Street, and the transferrence thereto of the Orthopædic Clinic from its cramped quarters in the School Clinic, the scope of this highly important branch of work has been greatly enhanced. The Department has been fitted with new modern apparatus and nothing has been spared to ensure that it fulfills all the requirements of a well-equipped Orthopædic Clinic.

The following table shows the number of cases dealt with during the year:—

	Number of New Cases		Total number of attendances	
Health	 	6	95	
Maternity and Child Welfare	 	34	152	
Education	 	51	2910	

Hospital Treatment. Cases requiring hospital treatment are referred from the Orthopædic Clinic to the Warwickshire Orthopædic Hospital for Children at Coleshill. Three new cases were sent during 1936, and in all, six children were treated at Coleshill. In addition two children were sent to Bretby Hall Orthopædic Hospital.

(i) Heart Disease and Rheumatism. No actual treatment for these cases is carried out by the Local Authority, but parents are urged to seek medical treatment for such cases as require it. The importance attaching to recurrent mild attacks of pains in muscles and joints "growing pains" must again be emphasised since they are so frequently indications of sub-acute rheumatic fever.

The ultimate danger being of course, permanent damage to the heart with its attendant disabilities.

(j) Tuberculosis. Five children of school age were admitted to the Outwoods Sanatorium through the Tuberculosis Service in 1936; Four Non-Pulmonary and 1 Pulmonary.

12 cases of non-pulmonary tuberculosis or suspected tuberculosis in school children were given Artificial Sunlight Treatment at the Sanatorium by the Tuberculosis Service.

- 9. **Open Air Education.** No provision is yet made for an open air school in the Borough. Playground classes have been continued, however, and school camps and journeys to places of interest held as in previous years.
- 10. Physical Training. Remedial exercise classes are held at the Orthopædic Clinic and children found with defects of physique and posture are referred to it.
- 11. **Provision of Meals.** Milk was supplied to necessitous children out of voluntary funds until 31-3-36, after which date the Milk Marketing Board Scheme for the provision of cheaper milk in school was adopted. The number of children supplied out of voluntary funds with milk and/or meals in school is estimated at 450, the number of meals provided being 40,169.

The following particulars indicate the scope of the scheme for the provision of milk since 1st April, 1936.

Number of individual children supplied with free milk							
Average number of children supplied with milk in							
school at special price		2571					
Number of 1/3 pint bottles supplied free		58846					
Number of 1/3 pint bottles supplied in payment		328040					

The children receiving free milk and those paying for milk on recommendation of the Assistant School Medical Officers are examined at 3 monthly intervals, weight and general condition being ascertained. Generally speaking an improvement is noted.

It is noteworthy that milk is poor in Iron content and for that reason many children having free milk tend to remain anæmic while gaining weight, and since iron containing foods are on the whole the more expensive these children are not likely to obtain sufficient iron from such food as is supplied at home.

Insufficient sleep is another powerful factor tending to malnutrition in younger school children, and parents in many cases appear apathetic when asked to arrange an earlier bedtime.

12. (a) **Co-operation of Parents.** The number of parents attending at the Routine Inspections is very satisfactory. The personal contact with the parents is extremely valuable for more can be conveyed by a few words at the time of the examination than by any other means; moreover, information is often forthcoming which would otherwise never have been revealed.

Better attendance at the leavers examinations could be desired.

PERCENTAGE OF PARENTS PRESENT AT ROUTINE INSPECTIONS, 1936.

Cahaal	Y-1-4-	Interm	ediates	Leavers		
School	Infants	Boys	Girls	Boys	Girls	Total
Bond Street	85.7	28.6	76.9			69.1
Broadway	75.4	9.1	0.0	12.7	0.0	31.8
Christ Church	64.0	25.0	59.3	4.3	30.3	39.9
Goodman and						
Stafford Street	76.9	44.4	40.0	-	8.7	32.8
Grange Street	71.6	37.5	48.5	-	-	56.1
Guild Street	-	-	_	6.4	42.3	23.8
Holy Trinity	48.2	33.3	25.0		-	39.2
Horninglow	68.2	6.1	8.0	_	_	35.3
Shobnall	71.4	23.1	46.7	0.0	56.3	48.8
Stapenhill	70.4	57.4	48.0	22.6	35.0	48.4
Stap hill Missn. Room	76.9	-	36.8	-	22.2	53.9
St. Modwen's	25.0	18.2	0.0	14.3	12.5	15.2
Uxbridge Street	69.7	41.7	59.5	19.2	15.3	42.2
Victoria Road	64.5	31.6	78.6	6.7	_	32.2
Wetmore Road	60.9	50.0	18.2	_	-	47.4
Winshill	53.7	19.4	20.0	26.1	0.0	28.7

Total Percentage of Infants	 67.9
Total Percentage of Intermediates	 35.6
Total Percentage of Leavers	 16.0
Total Percentage	 39.1

- 12. (b) Co-operation of Teachers. We desire again to express thanks to the teachers for the way they have facilitated the smooth running of the Medical Inspections. By their reference of cases showing some departure from normal, they render extremely valuable service. One recalls cases of serious defect, which, but for the vigilance of the teachers would have gone undetected.
- 12. (c) Co-operation of School Attendance Officers. The reports of these Officers in the cases of non-notifiable diseases, and in matters concerning the health of absentees are exceeding valuable, and deserve the thanks of the School Medical Service.

12. (d) Co-operation of Voluntary Bodies. To the voluntary charitable bodies existing in Burton upon Trent we tender our sincere thanks for the splendid work they have done for the children of the Borough.

The Voluntary Aid Association in necessitous cases provide railway fares to the Convalescent Homes and cost of appliances in certain Orthopædic Cases.

Many children have been sent through the Children's Care Committee and the "Burton Observer" Uncle Jack's Fund to Convalescent Homes, and the benefit so derived has been in many cases extremely gratifying.

A detailed report of the work of the Children's Care Committee is appended.

#### CHILDREN'S CARE COMMITTEE.

#### Report for the year 1936.

The Children's Care Committee was re-appointed by the Education Committee in November, 1935, and was constituted as follows: Mrs. Curzon, Miss Evershed, Mrs. Oakden, Mrs. Piddocke, Mrs. Rowland, Mrs. Sanders, Mrs. Slator, Mrs. Templeman, Mrs. Walley, and Mrs. Williams.

The Officers were re-elected for 1936, viz.,

Chairman-Mrs. Oakden. Vice-Chairman-Mrs. Sanders.

Honorary Secretary and Treasurer—Miss Evershed.

101 cases were reported to the Committee during the year and were dealt with as follows :—

1.	Girl	aged	5	Sent to Convalescent Home,	Rhyl for 2 mths.
2.	Girl	,,	12	do.	do.
3.	Girl	,,	9	do.	do.
4.	Boy	,,	$13\frac{1}{2}$	do.	Southport
5.	Girl	,,	$10\frac{1}{2}$	do.	Rhyl
6.	Girl	,,	$12\frac{1}{2}$	do.	do.
7.	Girl	,,	14	do.	do.
8.	Boy	,,	7	do.	do.
9.	Boy	,,	15	Sent for examination by Bir	mingham Skin
				Specialist	
10.	Girl	,,	8	Recommended for Convale	scent Home Treat-
				ment. Unable to be	admitted owing to
				past history of compla	aint.
11.	Girl	,,	51/2	Sent to Convalescent Home	e, Rhyl
*12.	Girl	,,	13	do.	do.
13.	Boy	,,	101	Sent for examination by	Birmingham Skin
				Specialist. Later ke	ept in the Birming-
				ham Skin Hospital fo	r 7 weeks.

```
Girl aged 13
14.
                     Sent to Convalescent Home, Rhyl
 15.
      Boy
                 8
                                   do.
                                                  do.
 16.
      Girl
                13
                                   do.
                                                  Rhyl for 2 mths.
            ,,
 17.
      Boy
                                   do.
                 8
                                                  Rhyl
      Girl
 18.
                11
                                   do.
                                                  do.
      Girl
 19.
                     Recommended for Convalescent Home treat-
                 8
                           ment. Parents will not allow her to go.
20.
      Girl
                  71 Sent to Convalescent Home, Rhyl
 21.
      Boy
                                   do.
                                                  Southport
                131
*22.
      Girl
                13
                     Sent to Convalescent Home, Rhyl
                     Sent for examination by Birmingham Skin
 23.
      Boy
                           Specialist
24.
      Boy
                 61 Sent to Convalescent Home, Rhyl for 2 mths.
 25.
      Boy
                 51
                                   do.
26.
      Girl
                5mths.
                         Sent for examination by Birmingham Skin
                           Specialist
 27.
      Girl
                  61 Sent to Convalescent Home, Rhyl
*28.
      Boy
                                                  do.
                                   do.
                 61
 29.
      Boy
                 7
                                   do.
                                                  do.
      Girl
 30.
                 13
                                   do.
                                                  do.
 31.
      Girl
                                   do.
                 10
                                                  do.
 32.
      Girl
                 10
                                   do.
                                                  do.
 33.
      Boy
                113
                                   do.
                                                  do.
 34.
      Boy
                                   do.
                                                  do.
                 51
      Girl
                                   do.
 35.
                 10
                                                  do.
      Girl
                                   do.
*36.
                 13
                                                  do.
*37.
      Boy
                12
                                   do.
                                                  do.
      Girl
                                   do.
 38.
                  9
                                                  do.
                 71 Sent for examination by Birmingham Skin
 39.
      Boy
                           Specialist
      Girl
                  91 Sent to Convalescent Home, Rhyl
 40.
 41.
      Boy
                  71
                                   do.
                                                  do.
      Girl
                 111
                                   do.
                                                  do.
 42.
                  7
                                   do.
                                                  do.
*43.
      Boy
                                   do.
*44.
      Girl
                  61
                                                  do.
                                   do.
                                                  do.
      Boy
                  5
 45.
                                   do.
                                                  do.
                  8
 46.
      Boy
```

*47.	Boy	age	d 13	Sent to Convalescent Home	e, Bournemouth
48.	Girl	,,	11	do.	Rhyl
49.	Boy	,,	9	do.	Southport
50.	Boy	,,	9	do.	do.
51.	Boy	,,	7	do.	do.
*52.	Girl	,,	8	do.	Rhyl
*53.	Boy		5	do.	do.
*54.	Boy	,,	5	do.	Southport
*55.	Girl	,,	14	do.	do.
56.	Girl	,,	8	do.	Rhyl for 2 mths.
57.	Girl	,,	6	do.	do.
58.	Girl	,,	11	do.	do.
59.	Boy	,,	7	Sent to Convalescent Home,	Rhyl for 2 mths.
60.	Girl	,,	12	Sent to Rest Home, Liverpo	ol for 4 mths.
*61.	Boy	,,	$9\frac{1}{2}$	Sent to Convalescent Home	, Southport
62.	Boy	,,		Provided with Surgical Boo	t.
63.	Girl	,,	8	Sent for examination by	Birmingham Skin
				Specialist.	
64.	Girl	,,	8	Sent to Convalescent Home	, Rhyl
*65.	Girl	,,	8	Sent to Convalescent Home	, Southport
66.	Boy	,,	11	do.	do.
*67.	Boy	.,,	10	do.	do.
68.	Girl	,,	12	do.	do.
*69.	Boy	,,	$7\frac{1}{2}$	do.	do.
*70.	Girl	,,		do.	do.
*71.	Boy	,,	13	Recommended for treatmen	t in the Rest Home,
				Liverpool, but not ad	mitted
72.	Boy	,,	6	Sent for examination by Bi	irmingham Ear and
				Throat Specialist	
73.	Boy	,,	8	Sent to Convalescent Home	, Southport
74.	Girl	,,	13	do.	do.
75.	Boy	,,	7	do.	do.
*76.	Girl	,,		Recommended for Convale	escent Home treat-
				ment. Not admitted	owing to past his-
				tory of the complaint	
*77.	Boy	.,,	8	Sent to Convalescent Home,	
*78.	Girl	,,	$5\frac{1}{2}$	do.	do.
79.	Boy	,,	8	do.	do.
				00	

*80.	Boy	aged	8	Sent to Convalescent Home, Southport
81.	Boy	,,	7	do. Rhyl
82.	Boy	,,	6	do. do.
*83.	Girl	,,	12	dó. Southport
*84.	Boy	,,	8	do. do.
*85.	Girl	,,	13	do. do.
86.	Boy	,,	$11\frac{1}{2}$	do. Rhyl
87.	Boy	,,	11	do. do.
88.	Girl	,,	6	Sent to the Midland Hospital, Birmingham, for
				four days in-patient treatment.
*89.	Girl	,,	$11\frac{1}{2}$	Sent to the Convalescent Home, Rhyl
90.	Boy	,,	$12\frac{1}{2}$	do. do.
91.	Boy	,,	71/2	Recommended for Convalescent Home Treat-
				ment. Contracted Measles and unable
				to go.
*92.	Boy	,,	71/2	Sent to Convalescent Home, Rhyl
*93.	Boy	,,	$12\frac{1}{2}$	Sent to Convalescent Home, Rhyl
94.	Boy	,,	7	do. do. for 2 mths.
95.	Boy	,,	13	Recommended for Convalescent Home treat-
				ment. Later decided that it would be
				ment. Later decided that it would be better for him to be kept at home.
*96.	Boy	,,	10	
*96. 97.	Boy Girl	,,	10 6	better for him to be kept at home.
				better for him to be kept at home. Sent to Convalescent Home, Rhyl
97.	Girl	,,	6	better for him to be kept at home.  Sent to Convalescent Home, Rhyl do. do.
97. *98.	Girl Girl	,,	6 10	better for him to be kept at home.  Sent to Convalescent Home, Rhyl do. do. do.
97. *98.	Girl Girl	,,	6 10 9	better for him to be kept at home.  Sent to Convalescent Home, Rhyl do. do. do. Sent for examination by Birmingham Skin
97. *98. 99.	Girl Girl Boy	"	6 10 9	better for him to be kept at home.  Sent to Convalescent Home, Rhyl do. do. do. Sent for examination by Birmingham Skin Specialist

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 Assistant School Medical Officer.

Two cases were sent by the Public Assistance Committee to Convalescent Homes, and one railway fare was paid by the War Memorial Trustees.

The assistance of the Voluntary Aid Association in investigating cases where railway fares were required, and in advancing the fares, is gratefully acknowledged.

Gifts of clothing from the Mayoress' Needlework Guild for children going to Convalescent Homes proved of very great help.

A case has been sent for a long period to a special Rest Home at Liverpool. The Home is expensive, but it is hoped that great benefit will be received from the treatment, the child being still at the home.

The Feoffees again gave a grant of £25, provided 64 tickets for the Rhyl and Southport Convalescent Homes, and the expensive maintenance at the Liverpool Rest Home. Thanks are recorded for this generous help.

The number of cases dealt with constitutes a record over the past eight years.

PHYLLIS M. EVERSHED,

Honorary Secretary.

M. A. SANDERS,

Vice-Chairman.

13th January, 1937.

13. Blind, Deaf, Defective and Epileptic Children. There are three Blind Children in the Borough. One of these is at no school or institution. The other two together with three partially blind children are in the Birmingham Royal Institution for the Blind. In addition, there are three partially blind children attending public elementary schools. They are taught by means of a special curriculum.

There are two deaf, and one partially deaf children attending certified schools for the deaf, and one partially deaf child attending a public elementary school.

There were twenty-four children examined during 1936, with reference to their mental condition and 8 of these were found to be feeble-minded and two children were notified to the Local Authority (one Imbecile and one Moral Defective).

There are now 35 feeble-minded children in the Borough, of which 23 attend public elementary schools.

In addition there are two children at no school or institution who are feeble-minded and epileptic.

The remainder and those between 14 and 16 years of age are periodically visited by the School Nurses.

There are 12 epileptic school children, 8 at elementary schools and 4 at no school or institution.

- 14. Nursery Schools. These are not provided in the Borough.
- 15. Secondary Schools.
- i. **Medical Inspection.** The Girls' High School and the Grammar School controlled by the Governors of the Endowed Schools were inspected three times during the year, the following age groups being examined:—
  - 1. Children on admission.
  - Children at the age of eight years.
  - 3. Children at the age of twelve years.
  - 4. Children at the age of fifteen years.
  - All other children over twelve 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.

At the end of this report is a table showing a detailed return of defects found at routine inspections. The principal defects observed were defective vision and dental disease.

#### ii. Medical Treatment.

(a) Forms of treatment provided. The following forms of treatment are provided by the Local Authority, viz. :—

Dental treatment, Orthopædic treatment, Eye testing, X-ray treatment for Ringworm of the head, Treatment of 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 elementary schools, i.e., all the treatment is free except dental treatment, for which 1s. per annum per case is charged.

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

For Dental treatment—5s. 0d. per annum.

For Orthopædic treatment—5s. 0d. per annum.

For X-ray treatment of Ringworm of the Scalp-Full charge.

For Eye testing-No charge.

For treatment of minor ailments-No charge.

16. Employment of School Children. One hundred and seventeen children were certified as fit and 1 was rejected as unfit for employment outside school hours in conformity with the Bye-Laws. There were no contraventions of the Bye-Laws during the year.

#### Employment.

		Boys	Girls	Totals
Newspaper delivery	 	 120	1	121
Errands	 	 41	1	42
Milk delivery	 	 1	1	2
Domestic duties	 	 -	1	1
		-		
		162	4	166

- 17. Teacher Bursars. During 1936 seven teacher bursars were examined in connection with their fitness to pursue the vocation of teaching.
- 18. Dr. T. Ross, 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.

#### TABLE 1.

#### RETURN OF MEDICAL INSPECTIONS.

Year ended 31st December, 1936.

#### A .- ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in t	he prescribed	Groups—	
Entrants			705
Second Age Group			721
Third Age Group			773
Total			2199
Number of other Routine Is	nspections		–
B.—01	THER INSPEC	TIONS.	
Number of Special Inspection	ons		970
Number of Re-Inspections			7833
Total			8803
C.—CHILDREN FOUNI	TO REQUI	RE TREATM	ENT.
Prescribed Groups:	For defective vision (excluding squint)		
Entrants	3	70	73
Second Age Group	40	74	111
Third Age Group	45	81	119
	-		
Total (Prescribed Groups)	88	225	303

#### TABLE II.

# A. Return of Defects found by Medical Inspection in the Year ended 31st December, 1936.

	enueu 31st Dec	emper,	1930.		
		ROUTING I	NSPECTIONS	SPECIAL I	NEPECTIONS
			Defects		Defects
			Requiring	110. 01	Requiring
	DEFECT OR DISEASE.		to be kept	MARIA	to be kept,
	THE CHARLES	Daniel	under ob	Daniel	under ob-
		Requiring Treatment.	but not	Requiring Treatment.	but not
		catment.	requiring	rieatment.	requiring
			Treatment.		Treatment
	(1)	(2)	(3)	(4)	(5)
			2		
	1 Ringworm—Scalp	0	0	1	0
	2 ,, Body	0	0	8	0
Skin	3 Scabies	2 7	0	8	0
	4 Impetigo	7	0	20	0
	5 Other Diseases (Non-				
	tuberculous)	15	8	38	4
	TOTAL (Heads 1 to 5)	24	8	75	*
	/ C Planks iti	00		0	0
	6 Blepharitis	20	3	9	0
	7 Conjunctivitis	8	0	38	0
-	8 Keratitis	0	0	1	0
Eye	9 Corneal Opacities	0	0	1	0
	10 Other Conditions (excluding			00	-
	defective vision & squint)		4	29	8
	TOTAL (Heads 6 to 10)	33	7	78	8
	II Defecti III	00	0-0		10
	11 Defective Vision (ex.squint)		253	14	18
	12 Squint	17	23	6	,
	13 Defective Hearing	1	3	2	2
Ear	14 Otitis Media	11	1	18	7 2 0 4
	15 Other Ear Diseases	25	9	20	
	16 Chronic Tonsillitis only	42	278_	21	10
Nose and		8	7	1	0
Throat	18 Chronic Tonsillitis and				
	Adenoids	14	9	1	0
00 F-1-	19 Other Conditions	9	8	11	9 7
	rged Cervical Glands (Non-Tub.)	0	110	8	1
21 10010	Heart Disease :	0	3	0	
Heart	(99 Organia	0	1	0	0
and Cir-		0	40	1	0
lation	104 A-muis	12	17	3	3
iation	OF Depolitie	4	40	11	3 5
Lungs	26 Other Non-Tuberculous	4	40	11	0
Langs	Discourse	1	23	2	1
	Diseases	1000	20	0.00	
	Pulmonary:				
	27 Definite	1	0	0	0
	28 Suspected	Ô	ő	ő	ő
	Non-Pulmonary:			1 10 - 1	-
	29 Glands	0	0	2	0
Tuber-	30 Bones and Joints	0	0	1	0
culosis	31 Skin	Ö	0	ō	Ö
	32 Other Forms	0	0	0	0
	TOTAL (Heads 29 to 32)	0	0	3	0
	1				
Nervous		0		STATE OF THE STATE	
System	34 Chorea	0	5	1	1
	35 Other Conditions	0	3	4	2
Defor-	36 Rickets	0	11	2	28
mities	37 Spinal Curvature	0	1	0	0
00 0	38 Other Forms	24	0	1	1
	r Defects and Diseases		29	6	6
	excluding Defects of Nutrition,		12 to 12 to 1		100
1	Incleanliness and Dental Diseases)	17	57	141	41
	m	200	040	400	150
The same of the sa	Total	332	948	430	158

# B. CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR 1936.

## IN THE ROUTINE AGE GROUPS.

Age-groups	Age-groups		Number of Children	A (Excellent)		A (Excellent)		(Excellent) (Normal)		(Sli subn	C ghtly ·rmal)		ad)
		Inspected	No.	%	No.	%	No.	%	No.	%			
Entrants		705	124	17.59	526	74.47	54	7.66	1	0.14			
Second Age-group		721	130	18.0	515	71.42	76	10.54	-	_			
Third Age-group Other Routine		773	193	24.96	503	65.07	77	9.95	-	-			
Inspections		-	-	-	-	-	-	-	-	-			
TOTAL		2199	447	20.33	1544	70.21	207	9.41	1	0.05			

#### TABLE III.

# Return of all Exceptional Children in the Area for Year 1936.

			Total
Blind Children—  A blind child is a child who is too blind to be able to read the ordinary school books used by children.		2 _ 1	3
Partially Sighted Children— 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 Sighted	At Certified Schools for the Blind At Certified Schools for the partially Sighted At Public Elementary Schools At other Institutions At no School or Institution	3 - 3	6
Deaf Children—  A deaf child is a child who is too deaf to be taught in a class of hearing children in an elementary school.	At Certified Schools for the Deaf	2 - -	2
Partially Deaf Children— Children who can appropriately be taught in a school for the partially deaf.	At Certified Schools for the Deaf	1 - 1	2
Mentally Defective Children—	At Certified Schools for Mentally Defective Children At Public Elementary Schools At other Institutions At no School or Institution	23 - 12	35
Epileptic Children—  Suffering from severe epilepsy	At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution	- 8 - 4	12

# TABLE III.—continued.

			Tota
Physically Defective Children—  A. Tuberculous Children.  I.—Children suffering from Pulmonary Tuberculosis  (Including pleura and intrathoracic glands).	At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution	1	1
II.—Children suffering from Non-Pulmonary Tuberculosis  Tuberculosis of all sites other than those shown in (1) above.	At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution	12 2 1	15

#### TABLE III .- continued.

			Total
B. Delicate Children—	At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution		47
C. Crippled Children—	At Certified Special Schools At Public Elementary Schools  At other Institutions At no School or Institution		21
D. Children with Heart Disease—  Confined to children whose defect is so severe as to necessitate the provision of educational facilities other than those of the Public Elementary School.		9 1 2	12
Children suffering from Multiple Defects— Feeble Minded and Epileptic	At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution		} 2

#### TABLE IV.

Return of Defects Treated during the Year ended 31st December, 1936.

#### TREATMENT TABLE.

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

		Defects to	
Disease or Defect.	Under the Authority's Scheme. (2)	Otherwise (3)	Total.
SAin—			
Ringworm—Scalp X-Ray Treatment	 -	1	1
Ringworm—Body	 8	_	8
Scabies	 10	_	10
Impetigo	 102	9	111
Other Skin Disease	 46	7	53
Minor Eye Defects (External and other, but excluding cases falling in Group II.)	 188	18	206
Minor Ear Defects	 49	-	49
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, &c.)	 379	16	395
Total	 783	51	834

#### GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group 1.)

Defect or Disease.	No. o	t Defects deal	t with.	No. of Children for whom Spectacles were				
	Authority's Scheme.	Out	nerwise. Total		ribed	Obtained (2)		
				(i) Under the Authority's Scheme.	(ii) Otherwise.	(i) Under the Authority's Scheme.	(ii) Otherwise.	
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report)	323	6	329	298	6	262	6	
Other Defect or Disease of the  Eyes (excluding those re- corded in Group I.)	heat IRT	2	2	_	-	_	_	
Total	323	8	331	298	6	262	6	

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

	Number o	f Defects.		
Received	Operative Trea		- m	
Under the Authority's Scheme, in Clinic or Hospital. (1)	By Private Practitioner or Hospital apart from the Authority's Scheme. (2)	Total	Received other forms of Treatment	Total number treated
(i) (ii) (iii) (iv)	(i) (ii) (iii) (iv)			
	2 5 85 —	2 5 85 —	-	92

(i) Tonsils only

(iii) Tonsils and Adenoids.

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

#### TABLE IV.—continued

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

U	rer of Children Inder the Author Residential to Residential to Non-resident Itherwise: (2) Residential to Residential	ority's reatme reatme ial trea	Schement with the sent with th	th educhout educat an o	cation lucatio rthopæ cation	dic clin	ic	9 0 97 0 0
	Non-resident	ial trea	tment	at an o	rthopæ	dic clin	ic	0
	Total n							100
				TAL D	EFECT	S.		
,	umber of Childre Inspected by th							
(a)	Aged 4	. Delli						145
	5							419
	6							597
Routine Age Groups.	7							701
ro	8							834
	9							739
Ag	10							657
ne	11							576
uti	12							653
Ro	13							693
	14							279
	15							175
		Tot	al					6160
(b)	Specials	Tot						6468 505
	Specials  Total				••	-	••	6973
(c)	Total				•			
(2) Fo	und to require	treatm	ent					4497
	tually treated							2139
100								

(4) Attendances made by chi	ldren f	or treat	ment			4162
(5) Half-days devoted to:						
Inspection						31
Treatment						452
Total						483
(6) Fillings:						
Permanent Teeth						1696
Temporary Teeth						137
Total				nedstab		1833
(7) Extractions:						
Permanent Teeth						439
Temporary Teeth						2675
Total						3114
(8) Administrations of gen	neral a	næsthe	tics fo	r extra	ction	s 293
(9) Other operations :-						
Permanent Teeth						967
Temporary Teeth						140
Total						1107
GROUP VI. UNCLEANLINE	SS AN	D VEF	RMINO	US COM	IDIT	IONS.
(i) Average number of vis	its per	school	made	during	the	
year by the School N	Turses					12
(ii) Total number of exa	minati	ons of	child	ren in	the	
Schools by School N	urses				2	0,970
(iii) Number of individual of	children	n found	unclea	n		519
(iv) Number of children						
by the Local Educat						
(v) Number of cases in wh		30				
(a) Under the Educa		7				0
(b) Under School At						10

# STATEMENT OF THE NUMBER OF CHILDERN NOTIFIED DURING THE YEAR ENDED 31st DECEMBER, 1936, BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

Total number of children notified—2.

#### 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	-	-
	(b) Imbeciles	-	1
	(c) Others	-	-
	(ii) Children unable to be instructed in a Special School without detriment to the interests of other children:	1	
	(a) Moral defectives	-	_
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	-	-
-	GRAND TOTAL	1	

# SECONDARY SCHOOLS.

# FOR YEAR ENDED 31st DECEMBER, 1936.

#### A. ROUTINE MEDICAL INSPECTIONS.

	Under 9 y	ears		.,		32
	9	,,		//		4
	10	,,				17
	11	,,				63
	12	,,				81
Age	13	,,				101
-	14	,,				89
	15	,,				91
	16	"				33
	17	"				22
	18	,,	/			9
	19	***				1
					-	
			Total			543

#### B. OTHER INSPECTIONS.

Number of Special Inspections	 2	5
Number of Re-Inspections	 47	4
	100	-
Total	 49	19
	-	-

#### C .- INDIVIDUAL CHILDREN

Found to require treatment ... .. 61
(Excluding Uncleanliness and Dental Diseases)

# SECONDARY SCHOOLS.

# MEDICAL INSPECTION RETURNS

#### Table II.

# A. Return of Defects found by Medical Inspection in the year ended 31st December, 1936.

	Routine I		Special Inspections					
	Number of	of Defects	Number of Defects					
Defect or Disease.	Requiring Treatment	Requiring to be kept under observation but not requiring treatment	Requiring Treatment	Requiring to be kept under observation but not requiring treatment				
Skin Disease		2	2	-				
Blepharitis Other Eye Conditions (excluding Defective		2	_	-	_			
Vision and Squint) Squint Defective Vision		1 1 36	<u>-</u> 62	=	=			
Ear— Defective Hearing Otitis Media Other ear diseases Tonsils only Cervical glands enlarged Heart disease—Organic Functl.		- 2 5 1 - -	- - 24 2 - 10	1   	- - 1 - -			
Anaemia		-	6	-	-			
Lungs— Bronchitis Other Chest (Non T.B.)		=	2 2	=	=			
Spinal Curvature		_	3	_	_			
Other Deformities		11	16	_	1			
Teeth		68	11	_	_			
Other defects and diseases		10	11	-				
		The state of the s	Marie Control of the		A STATE OF THE PARTY OF THE PAR			

#### SECONDARY SCHOOLS.

# Return of Defects treated during the year ended 31st December, 1936.

# Defective Vision and Squint.

	Number of Defects dealt with				
	Under Authority's Scheme	Otherwise	Total		
Errors of Refraction (including Squint)	22	12	34		
Number of Children for whom spectacles were		of the same			
(a) Prescribed	22	12	34		
(b) Obtained	21	12	33		

## DENTAL TREATMENT 1936.

## SECONDARY SCHOOLS.

# HIGH SCHOOL.

Number of cases treated				18
Number of attendances				54
GRAMMAR	SCHO	OL.		
Number of cases treated				9
Number of attendances				15
Fillings—Permanent Teeth	n			45
Temporary Teeth	1			-
Extractions—Permanent T	eeth			9
Temporary T	eeth			17
Number of cases in which g				
anæsthetics were given	n for e	xtractio	n	2
Other operations—Perman	ent Te	eeth		20
Temporar	y Teet	h		_

# INDEX.

					P	age.
Arrangements for Treatmen	t					17
Blind, Deaf, Defective and		tic Chi	ldren			31
Children's Care Committee						26
Co-operation of Parents						23
Co-operation of School Atter		Officer	S			24
Co-operation of Teachers						24
Co-operation of Voluntary I	Bodies					25
Co-ordination						6
Crippling Defects and Orthog	pædics					12
Dental Defects				 11	8	21
Ear Disease and Hearing				 11	&	19
Employment of School Child	lren					33
Exclusion from School						13
External Eye Diseases						17
Following up						17
Findings of Medical Inspecti	on					9
Heart Disease and Rheumat	ism			 11	&	21
Height and Weight of Childs	ren—Ta	able				8
Infectious Diseases						15
Malnutrition				 9	&	17
Medical Inspection						6
Minor Ailments				 10	&	17
Nose and Throat				 10	&	19
Nursery Schools						31
Open-air Education						22
Orthopædic and Postural D	efects			 11	&	21
Physical Training						22
Provision of Meals						22
Report by School Oculist						18
School Hygiene						6
Secondary Schools						31
Staff				 4	&	6
Tables—Elementary Schools						34
Tables—Secondary Schools						45
Tuberculosis				 12	&	22
Uncleanliness				 9	&	17
Vision						10
Vaccination						16

