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COUNTY BOROUGH OF BURY.

REPORT

ON THE

Medical Inspection of School Children,

For the Year ended December 31st, 1920.

G. GRANVILLE BUCKLEY, M.D., D.P.H.,

SCHOOL MEDICAL OFFICER, MEDICAL OFFICER OF HEALTH,
AND
CHIEF TUBERCULOSIS OFFICER.

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PUBLIC HEALTH DEPARTMENT,

CLOUGH STREET, BURY,

May 18th, 1921.

*To the Chairman and Members of the Education Committee,
County Borough of Bury.*

LADIES AND GENTLEMEN,

I beg to submit for your consideration my Annual Report on the Medical Inspection of School Children during the year ended December 31st, 1920.

The classes of children examined are the same as in previous years, except that for the first time children of the Secondary Schools have been medically examined. The total number of children examined during the year 1920 shows a considerable increase upon that of any previous year.

This Report also for the first time gives an account of a full year's work of the Minor Ailments Clinic, which was opened towards the end of the year 1919.

The additional work consequent upon the expansion of the School Medical Service has necessitated the appointment of a second School Nurse, who commenced her duties in May last.

I take this opportunity of expressing my thanks to the Director of Education and his staff, the Head Teachers of the various schools, the clerical staff of the Health Department, and to the School Nurses for the assistance they have given me, and to you, Ladies and Gentlemen, for your courtesy and kind sympathy.

I should also like to express my appreciation of the valuable assistance rendered by the Assistant School Medical Officer, Dr. C. S. Harwood, and by his predecessor, the late Dr. H. F. Hutchinson.

I am, Ladies and Gentlemen,

Your obedient Servant,

G. GRANVILLE BUCKLEY.

County Borough of Bury.

MEDICAL INSPECTION OF SCHOOL CHILDREN.

STAFF.

The School Medical Staff consists of :—

The School Medical Officer, who also acts as Medical Officer of Health and Chief Tuberculosis Officer.

One Assistant School Medical Officer, who also acts as Assistant Medical Officer of Health and Assistant Tuberculosis Officer.

Two School Nurses. (During the earlier part of the year one Nurse only was employed. An additional Nurse was appointed and commenced her duties on May 17th, 1920.)

The clerical work is performed by the clerical staff of the Health Department.

Co-ordination of the work of the School Medical Service with that of the other Health Services is assured owing to the fact that the School Medical Staff is also responsible for the control of the various activities of the Health Department.

ELEMENTARY SCHOOLS.

MEDICAL INSPECTION.

Four groups of children are inspected annually, viz. :—

1. "Entrants."
2. "Intermediates" (aged 8 years).
3. "Leavers" (aged 12 years).
4. "Specials" (children brought to the notice of the School Medical Officer by the Teachers or Nurses as suffering from some palpable disease or defect).

All children in the above groups who have been referred either for treatment or observation are re-examined after a suitable interval has elapsed.

The Schedule of Medical Inspection issued by the Board of Education has been followed throughout.

The Teachers and School Nurses have been instructed to bring to the notice of the School Medical Officer any children who, in their opinion, are abnormal in any way. Such children are specially examined and early information as to crippling and other defects is thus obtained. These cases are examined not only on the occasion of the Medical Officer's visits to schools, but may be sent to the office on any morning. Valuable information is also received from the School Attendance Officers.

When carrying out Medical Inspection, every effort is made to avoid unnecessary disturbance of the school arrangements. In a few schools there are one or more rooms which are not used as classrooms, and these are always used for Medical Inspection. In the majority of the schools, however, it is necessary to make use of a classroom for the purpose.

REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

Uncleanliness.—There has been considerable improvement in the cleanliness of school children during the past few years, but the condition of many children still leaves much to be desired. Occasionally a child is found whose body is covered with the bites of vermin or whose head is verminous and covered with sores. Strong action is taken with these children, but only too often a relapse takes place. Such children constantly require the attention of the School Nurses.

During the year the following cases of uncleanliness were dealt with :—Head, 165 ; Body, 58.

The figures show a great decrease on those for the previous years as far as the head is concerned, but a slight increase in cases of uncleanliness of the body.

In this connection it must be remembered that the standard of cleanliness required is constantly being raised. The general condition of the children shows a great advance on that of a few years ago.

Minor Ailments.—The cases of Minor Ailments met with are included under their respective headings, viz. :—Skin Diseases, External Eye Diseases, &c.

Tonsils and Adenoids.—During the year 78 children were found to be suffering from enlarged tonsils to such a degree as to require treatment, while 100 were suffering from slight enlargement and were referred for observation.

Sixty children were referred for treatment for adenoids and 55 for observation, while the corresponding figures for children suffering from both conditions together were 33 and 17 respectively.

Tuberculosis.—No cases of definite Pulmonary Tuberculosis were discovered, but eight suspicious cases were referred for observation. Other forms of Tuberculosis found were :—Glandular : Three referred for treatment and four for observation. Skin : Four cases referred for treatment. Other forms : Three referred for observation.

Skin.—Apart from such conditions as Ringworm and Impetigo, cases of Skin Disease were comparatively rarely found. Among the cases of Skin Disease found were :—

Ringworm, Head	1
Ringworm, Body	4
Scabies	6
Impetigo	12
Other Skin Diseases (Non-Tubercular)	7

External Eye Diseases.—Twenty-two cases of external eye disease requiring treatment were found during the year, whilst two further cases were referred for observation only. The following table shows the nature of these cases :—

Blepharitis	12
Conjunctivitis	7
Corneal Opacities	1
Other conditions	4

Defective Vision and Squint.—208 cases of defective vision (less than $\frac{6}{12}$ in either eye) and squint were found. Of these, 190 were cases of defective vision and 18 cases of squint. All these children were referred for treatment, with the exception of 18 referred for observation only.

Ear Diseases and Hearing.—Fourteen children were suffering from defective hearing, 23 from Otitis Media, and two from other ear diseases.

Dental Defect.—A very large proportion of the children examined were found, on cursory examination, to be suffering from dental caries, and no doubt, if a careful examination were made by a skilled dentist, the proportion would be higher still. Notification of the defect is only sent to the parent if four or more carious teeth are found. Parents do not realise the importance of the treatment of this condition, and it is extremely difficult to get them to take any action.

Crippling Defects.—Comparatively few cases of crippling defects were discovered. The total number of children found to be suffering from defects which may fairly be classified under this heading was 23. Nine of these were cases of rickets, and many of the remainder were congenital.

INFECTIOUS DISEASE.

The number of cases of infectious disease in the schools has been somewhat less than usual. The School Medical Officer receives as Medical Officer of Health notification of all cases of notifiable Infectious Disease occurring in the Borough, and is thus enabled to take prompt action.

Arrangements are in force whereby the teachers notify to the Medical Officer all cases of non-notifiable infectious disease occurring among their scholars. During the year the following schools have been closed owing to the prevalence of infectious disease among school children :—

Birtle School : Both Departments, 16th March to 1st April,
owing to the prevalence of Measles and Whooping Cough.

Warth School : Infants' Department, noon, 21st May to 26th May, owing to prevalence of Chicken-pox.

St. Thomas's School : Infants' Department, 22nd November to 10th December, owing to prevalence of Measles.

" FOLLOWING UP."

Medical Inspection is obviously of very little use unless those children who are found to be suffering from some disease or defect are " followed up " in order to ensure that the necessary treatment is obtained. The procedure adopted in this Borough is as follows :

A note is at once sent to the parent informing him of any abnormal condition discovered, and urging him to obtain appropriate treatment. After an interval the house is visited by the nurse and enquiries made as to whether treatment has been obtained. If not, a further note is sent, and after another interval the house is again visited. These visits are repeated as often as necessary. In certain special cases (defective vision, &c.) arrangements are made, where necessary, for the child to receive treatment under the scheme of the Local Authority. Such schemes at present in operation are detailed in a succeeding paragraph.

All children found to be defective on inspection are re-examined by the Medical Officer on his next visit to the school in order to ascertain whether treatment has been obtained, and, if so, the result of same.

In addition to the Routine Medical Inspections periodical examinations for cleanliness are made by the school nurses, special attention being paid to the heads of the girls. In cases where uncleanness exists, a card is sent to the parent calling his attention to the fact and giving instructions for cleansing. If, on subsequent examination, the condition is found to persist, a card of a different colour and more strongly worded is sent. If on a third examination the condition still persists the child is excluded, and in some cases prosecutions have been instituted. In bad cases the child is excluded at once.

The institution of the School Clinic has greatly facilitated the work of " following up." Frequently, parents who have received

notice of defect or disease in their children, and who have not been present at the inspection, have attended at the Clinic to obtain further particulars as to what treatment is required. It is thus possible to explain the condition much more fully than can be done by letter, with the result that treatment is often obtained in cases which would otherwise remain untreated.

During the year the School Nurses have carried out the following visits, &c. :—

Number of visits to schools departments in connection with medical inspection	218
Number of visits to schools to examine children for cleanliness	228
Number of visits and re-visits to homes	1,579
„ children examined for cleanliness	12,994
„ visits with children to Ophthalmic Surgeon's rooms	44

MEDICAL TREATMENT.

Minor Ailments.—In November, 1919, a Clinic for the treatment of Minor Ailments was opened at the Public Health Office in Clough Street. An entrance was cut into Henry Street for the use of children attending. The accommodation consists of a waiting and treatment room. The necessary sterilising and minor surgery appliances and a weighing machine were provided.

The Clinic is open six days a week during school terms. Children attend from 9 to 10 a.m., when they are seen by the Medical Officer. They are either treated or referred to their own doctor in the case of children having a regular medical attendant.

The School Nurse on duty deals with cases requiring special treatment and excluded children after 10 a.m., and is frequently so engaged until after 11 a.m. Specials and children requiring more than one daily treatment are seen by appointment later in the day.

An arrangement has been made by which children are provided with a small attendance card which they bring to and from school.

On this card, which is available for a month, is noted the date of each attendance and the time of arrival and departure, and when the child is to re-attend.

The records of the Clinic are kept on a Card Index system. On each card are the particulars of the child, its defect, and whether attending as result of school inspection or sent by teacher, doctor, or parent. On the card are also recorded the treatment and condition on discharge, with the date of each attendance, the time of arrival and departure, and the period of any exclusion.

To reduce the period of absence from school in the case of excluded children to a minimum every school exclusion is recorded on a chart, so that it is under constant observation till the child is fit to return.

One of the nurses on duty is in charge of the booking while the Clinic is open, and a monthly summary is made of all attendances in accordance with the above particulars.

The number of children who attended during the year is as follows, a statement of defects being given in Table IV.—A. at the end of this Report :—

Number of children attending from 1919	27
„ „ discharged	277
„ „ still attending at end of 1920... ..	27
„ „ who attended during 1920	304
„ attendances	2,531
Clinic open days	252
Average attendance per child	8.3
Average daily attendance... ..	11.8

With the increase in the number of children attending at the Clinic during the year the average in the latter part was considerably in excess of 11.8.

In addition to the above, 226 children attended on two successive days for mydriatic application before seeing the School Oculist for purposes of refraction.

Much of the Nurses' time at the School Clinic has been taken up by the treatment of dirty conditions. In many cases the parent has attended the Clinic with her child, and has cleansed the latter under the supervision of the Nurse. In other cases the Nurse has carried out the treatment personally.

Tonsils and Adenoids.—Many of the cases requiring operative interference are treated by general practitioners. Arrangements have now been made with the Board of the Bury Infirmary under which certain cases are treated at that Institution and the fees paid by the Education Committee. When the Education Committee considers that the parents are able to pay the whole or part of the cost, efforts are made to recover the amount.

During the year 171 cases of Enlarged Tonsils and Adenoids were referred for treatment, and 65 were carried forward from the previous year—a total of 236. As far as can be ascertained, 56 of these received operative and 98 other forms of treatment. Although some of these cases were treated at the Bury Infirmary, they were not sent by order of the Education Committee, and consequently do not come under the scheme.

Tuberculosis.—Cases of Pulmonary Tuberculosis occurring in the Borough are sent for treatment to the Institutions of the Bury and District Joint Hospital Board, but the Board does not admit children under 14. The majority of such cases are treated at the Bury Tuberculosis Dispensary, and a few find their way to outside institutions.

An agreement was entered into between the Bury Corporation and the Bury Infirmary in July last, under which cases of Non-Pulmonary Tuberculosis occurring in the Borough are treated at that Institution. Such treatment is available for school children.

A certain number of cases are treated at the Manchester Children's Hospital.

The following table shows the number of Tuberculous children treated during the year :—

Pulmonary Tuberculosis.

At the Bury Dispensary :		No.	Total No. of Days.
Boys		4	317
Girls		5	519

Non-Pulmonary Tuberculosis.

Bury Infirmary, Girls	1	11
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Arrangements have lately been made with the Manchester Skin Hospital under which patients from the Borough suffering from Tuberculosis of the Skin are treated at that Institution. This provision extends to school children, but only came into force at the beginning of 1921.

Skin Disease.—The majority of the cases of Skin Disease occurring among school children were treated at the Minor Ailments Clinic. Further particulars will be found in Table IV.—A. at the end of this Report.

External Eye Disease.—The same remarks apply to cases of External Eye Disease. Particulars of cases treated will be found in the same table (IV.—A.).

Vision.—The majority of children suffering from defective vision are now examined by the Ophthalmic Surgeon to the Local Authority.

On the day preceding the examination the nurse introduces atropine into the eyes of the children, and is present at the examination.

During the year 226 children have been submitted to refraction, and spectacles prescribed in the case of 201. Twenty-five children were found not to require spectacles.

Of the 201 children for whom spectacles were prescribed, 127 had obtained them by the end of the year.

In cases where the parent cannot afford to pay for glasses the Education Committee pay the cost wholly or in part. The number of cases in which such assistance was rendered was 12.

Ear Disease and Hearing.—No special treatment is provided apart from the Minor Ailments Clinic. Table IV.—A. gives particulars of the cases treated.

Dental Defects.—No Dental Clinic has up to the present been provided. Treatment is, therefore, not satisfactory, very few parents taking the trouble to consult a dentist. Even where treatment is obtained it usually consists of one or more extractions, and very little conservative treatment is carried out.

Crippling Defects and Orthopædics.—No special provision is made for dealing with these defects. Many of the sufferers attend the local Infirmary or the Manchester Children's Hospital.

OPEN-AIR EDUCATION.

There are no open-air day or residential schools in the Borough. In summer many of the classes are held in the playgrounds, and visits are made to the various recreation grounds.

PHYSICAL TRAINING.

Physical Training was included in the time tables of all schools. The Local Education Authority have encouraged teachers to qualify themselves to give instruction in an efficient manner. An Organiser and Instructor of Physical Training was appointed and commenced duties on January 1st, 1920. He visited the schools to ascertain the conditions then obtaining and the improvements necessary to bring the instructions to an efficient standard. The Instructor has conducted a number of classes for the instruction of teachers in the Board's Syllabus of Physical Training, including Formal Exercises, Playground Sports, Organised Games, &c.

PROVISION OF MEALS.

During the year 1920 it was found necessary to provide 2,415 meals to school children. All were dinners, and were provided by and served at four restaurants in various parts of the town. The average total cost per meal was 9.2d. The cases were selected by a Sub-Section of the Care of Children Section of the Education Committee, taking into consideration rent, family income, and number in family.

SCHOOL BATHS.

No baths are provided at any of the schools. The children, however, visit the Corporation Baths during the school hours, in accordance with an arranged time table, and receive instruction in swimming. During the year 63 classes, each consisting of 30 children, were held during July and September.

Co-operation of Parents.—Notice is sent to the parent of every child of the date and time of inspection, and the parent is invited to attend. The percentage of parents attending was :—

“ Entrants ”		33.50%
“ Intermediates ”		13.45%
“ Leavers ”		9.50%

Particulars of the methods used to obtain the further co-operation of parents in securing treatment for their children are given in another portion of the report.

Co-operation of Teachers.—Many of the teachers render invaluable assistance in connection with the medical inspection and treatment of the children. In many cases the teacher is present at the inspections, and any defects found are pointed out. The teacher is thus enabled to explain to the parent in a subsequent interview the importance of obtaining treatment, and so to assist the Medical Officer very substantially.

Co-operation of School Attendance Officers.—The School Attendance Officers assist the School Medical Officer in many ways, and interviews are constantly taking place between them and the School Medical Staff. Their services are specially valuable in connection with the Minor Ailments Clinic, as they are able to secure the attendance of the children in a way that would be otherwise impossible.

BLIND, DEAF, DEFECTIVE, AND EPILEPTIC CHILDREN.

No schools for the treatment of these children have so far been provided by the Local Education Authority, but Blind and Deaf children are sent to outside institutions. There is no provision for Mentally Defective and Epileptic children, but the question of special arrangements is now under discussion.

During the year three children were inmates of institutions for the Blind, and three others were in institutions for the Deaf.

NURSERY SCHOOLS.

No nursery schools have been provided in the area.

SECONDARY SCHOOLS.

During the year 1920 the children attending the Secondary Schools (the Municipal Secondary School and the Junior Technical School) have for the first time been medically inspected.

The total number inspected was 382, and of these 153 were re-inspected. It is intended to examine all the children in these schools annually. Particulars as to age and sex of the children inspected will be found in Table I. at the end of the Report. As in the case of Elementary School children, the schedule of the Board of Education has been followed in its entirety.

Interference with the school routine was avoided as far as possible, and I have to thank the Head Master for kindly placing his room at my disposal for the purpose of the inspections.

FINDINGS OF MEDICAL INSPECTION.

Uncleanliness.—The standard of cleanliness in the Secondary Schools is very high, only six children out of the 382 inspected being found to require attention in this respect. These were all cases of neglected heads.

Minor Ailments are referred to under their respective headings.

Tonsils and Adenoids.—Fifteen children were found to be in need of treatment for Enlarged Tonsils and Adenoids, whilst 19 cases were referred for observation.

Tuberculosis.—No cases of definite or suspected Tuberculosis were found. The same remark applies also to Skin Diseases and External Eye Diseases.

Vision.—Thirty-nine children were found to be suffering from seriously defective vision and were referred for treatment. In addition to these a number had already been provided with suitable spectacles.

Ear Disease and Hearing.—Three children were found to be suffering from Otitis Media and were referred for treatment. In addition two children were suffering from Defective Hearing, of whom one was referred for treatment and one for observation.

Dental Defect.—Sixty-four children were found to have four or more carious teeth, and were referred for treatment. Many other children had already received conservative treatment from a dentist.

Crippling Defects.—The majority of the cases which could be placed under this heading were cases of Spinal Curvature and Flat Foot. None of these was very marked, but all were referred for remedial exercises.

Eleven cases of Organic Heart Disease were referred for treatment, but all these children were able to attend school regularly.

Infectious Disease.—No action in respect of Infectious Disease was necessary during the year.

“Following Up.”—The method of following up cases referred for treatment has already been detailed in a previous page. The methods employed in connection with the Secondary Schools are identical with those used in the case of the Elementary Schools.

MEDICAL TREATMENT.

Minor Ailments.—No children from the Secondary Schools attended the Minor Ailments Clinic. The few children suffering from such ailments were treated by their own medical attendant.

Tonsils and Adenoids.—Of the fifteen children requiring treatment for Enlarged Tonsils and Adenoids, six were found, on re-examination, to have received attention. Of these, four were

cured and two greatly improved. Of the remaining cases, six had received no treatment, and in three cases no information was available.

Vision.—Of the 39 cases of defective vision referred for treatment, 24 had undergone ophthalmoscopic examination, 13 had received no treatment, and in two cases information could not be obtained. Spectacles were obtained in 17 cases, but were not prescribed in the remaining seven.

Ear Disease and Hearing.—The three children suffering from Otitis Media received medical attention. Two were found, on re-inspection, to be cured and one was unchanged. The child suffering from deafness had received no attention.

Dental Defect.—Nineteen of the 64 children suffering from Dental Caries had received treatment, 38 had taken no action, and in six cases no information was available.

Crippling Defects.—The cases of deformity, such as Flat Foot and Spinal Curvature, underwent a course of remedial exercises, and on the whole an improvement in this condition was noted.

Co-operation of Parents.—The parents of Secondary School children take a greater interest in the Medical Inspection of their children than do those of Elementary School children.

Eighty-eight girls (45.13%) and 42 boys (22.69%) were accompanied at the inspection by parents.

CONTINUATION SCHOOLS.

There are at present no Continuation Schools in the Borough

TABLE I. Number of Children Inspected 1st January, 1920, to 31st December, 1920.
Elementary Schools.
A—ROUTINE MEDICAL INSPECTION.

AGE.	ENTRANTS.						Intermediate Group.	LEAVERS.					Grand Total.
	ENTRANTS.							LEAVERS.					
	3	4	5	6	Other Ages.	Total.		8	12	13	14	Other Ages.	Total.
Boys	13	135	168	61	19	396	378	320	22	—	—	720	1116
Girls	34	129	161	46	13	383	321	283	17	—	—	621	1004
Totals...	47	264	329	107	32	779	699	603	39	—	—	1341	2120

B—SPECIAL INSPECTIONS.

	Special Cases.	Re-examinations
Boys	125	588
Girls	97	569
Totals	222	1157

Secondary Schools. **A—ROUTINE MEDICAL INSPECTION.**

Age.	11	12	13	14	15	16	17	18	Totals.	Re-examinations.
Boys	19	36	75	50	6	1	...	...	187	81
Girls	20	35	50	34	26	18	11	1	195	72
Totals...	39	71	125	84	32	19	11	1	382	153

TABLE II.
Return of Defects found in the Course of Medical
Inspection during 1920.

DEFECTS OR DISEASE.	Elementary Schools.				Secondary Schools.	
	Routine Inspections.		Specials.		Routine Inspections.	
	Number referred for Treatment.	No. requiring to be kept under observation, but not referred for Treatment.	Number referred for Treatment.	No. requiring to be kept under observation but not referred for Treatment.	Number referred for Treatment.	No. requiring to be kept under observation but not referred for Treatment.
1	(2)	(3)	(4)	(5)	(6)	(7)
Malnutrition	5	18	1	1	...	12
Uncleanliness: Head	165	5	...	...	6	...
Body... ..	57	6	...	...	...	...
Skin: Ringworm, head... ..	1	...	...	...	...	...
Ringworm, body	3	...	1	...	...	...
Scabies	2	4	...	...	...	...
Impetigo	9	...	3	...	...	...
Other diseases (non-tubercular) ...	3	...	3	1	...	...
Eye: Blepharitis	8	2	2	...	...	...
Conjunctivitis	5	...	2	...	...	...
Keratitis	...	...	...	...	...	...
Corneal Ulcer	...	...	...	...	...	...
Corneal Opacities	1	...	...	...	...	...
Defective Vision	125	3	39	12	39	1
Squint	19	3	7	...	...	...
Other Conditions	3	...	1	...	...	...
Ear: Defective Hearing	8	3	3	...	1	1
Otitis Media... ..	19	1	3	...	3	...
Other Ear Diseases	...	2	...	...	...	...
Nose and Throat: Enlarged Tonsils... ..	76	99	2	1	7	18
Adenoids... ..	52	54	8	1	4	1
Enlarged Tonsils and Adenoids... ..	28	17	5	...	4	...
Enlarged Cervical Glands: (Non-tubercular) ...	4	51	1	2	3	5
Defective Speech	...	3	...	...	...	6
Teeth: Dental Diseases	...	...	...	...	64	...
Heart and Circulation: Heart disease, organic	7	7	...	2	11	8
Heart disease, functional	2	23	...	...	...	1
Anæmia... ..	1	7	...	2	3	3
Lungs: Bronchitis	8	28	...	...	...	1
Other Non-Tubercular Diseases... ..	...	3	...	...	...	...
Tuberculosis: Pulmonary—Definite	...	...	...	...	...	...
.. Suspected	...	5	...	3	...	...
Non-Pulmonary—Glands	1	4	2	...	...	...
.. Spine	...	...	...	...	...	...
.. Hip	...	...	...	...	...	...
.. Other Bones and Joints	...	...	...	...	...	...
.. Skin	...	...	4	...	...	...
.. Other Forms	...	1	...	2	...	...
Nervous System: Epilepsy... ..	...	...	...	4	...	...
Chorea... ..	...	...	...	...	...	...
Other conditions	...	2	...	...	...	...
Deformities: Rickets	2	7	...	...	...	...
Spinal Curvature	...	1	...	...	3	8
Other forms	4	4	1	1	5	13
Other Defects and Diseases	9	8	1	2	...	2
Number of INDIVIDUAL CHILDREN having Defects which required treatment or to be kept under observation			971		184	

TABLE III.
Numerical Return of all Exceptional Children in the Area in 1920.

			Boys	Girls	Total
Mentally Deficient.	Blind (including partially blind), within the meaning of the Elementary Education (Blind & Deaf Children) Act 1893.	Attending Public Elementary Schools.....	..	..	..
		Attending Certified Schools for the Blind.....	..	3	3
		Not at School	1	..	1
	Deaf & Dumb (including partially deaf), within the meaning of the Elementary Education (Blind & Deaf Children) Act 1893.	Attending Public Elementary Schools.....	1	1	2
		Attending Certified Schools for the Deaf	1	1	2
		Not at School	..	1	1
	Feeble Minded	Attending Public Elementary Schools.....	17	8	25
		Attending Certified Schools for Mentally Defective Children ..	..	..	..
		Notified to Local Control Authority by Local Education Authority during the year	1	..	1
		Not at School	6	4	10
		At School	..	..	..
		Not at School....	2	3	5
Physically Defective.	Idiots	Attending Public Elementary Schools.....	1	..	1
		Attending Certified Schools for Epileptics.....	2	..	2
	Epileptics	Attending Certified Schools for Epileptics.....	..	..	..
		In Institutions other than Certified Schools.....	..	..	..
		Not at School	1	1	2
		Not at School	1	..	1
	Pulmonary Tuberculosis	Attending Public Elementary Schools.....	1	..	1
		Attending Certified Schools for Physically Defective Children..	..	..	..
		In Institutions other than Certified Schools	..	1	1
		Not at School	..	..	..
	Crippling due to Tuberculosis	Attending Public Elementary Schools	2	2	4
		Attending Certified Schools for Physically Defective Children..	..	..	..
		In Institutions other than Certified Schools	..	..	..
		Not at School	..	1	1
	Crippling due to causes other than Tuberculosis, i.e. Paralysis, Rickets, Traumatism. Other Physical Defectives e.g. Delicate and other Children suitable for admission to Open-Air Schools ; Children suffering from severe Heart Disease.	Attending Public Elementary Schools	4	5	9
		Attending Certified Schools for Physically Defective Children..	..	..	..
		In Institutions other than Certified Schools	..	..	..
		Not at School	..	..	..
	Dull or Backward	Attending Public Elementary Schools	2	2	4
		Attending Open-Air Schools	..	..	..
		Attending Certified Schools for Physically Defective Children other than Open-Air Schools..	..	..	..
		Not at School.....	..	1	1
	Retarded 2 years	Retarded 2 years	4	5	9
		Retarded 3 years	5	3	8

TABLE IV.—A. Treatment of Minor Ailments.

Disease and Defect.	NUMBER OF CHILDREN.			
	Referred for Treatment.	Treated.		Total.
		Under Local Education Authority's Scheme.	Otherwise.	
SKIN :				
Ringworm—Head	16	8	8	16
Ringworm—Body	8	4	4	8
Scabies	12	10	2	12
Impetigo	76	76	...	76
Minor Injuries	13	12	1	13
Other Skin Disease.....	65	62	3	65
EAR DISEASE	37	31	6	37
EYE DISEASE (External and Other).....	46	37	9	46
MISCELLANEOUS	31	20	11	31

TABLE IV.—B.

Treatment of Visual Defects.

Referred for Refraction.	NUMBER OF CHILDREN.						
	Submitted to Refraction.			For whom glasses were prescribed.	For whom glasses were provided.	Recommended for treatment other than by glasses.	Received other forms of Treatment.
	Under Local Education Authority's Scheme, Clinic or Hospital.	By Private Practitioner or Hospital.	Otherwise.				
260	226	10	2	201	127	8	4
							17

TABLE IV.—C. Treatment of Defects of Nose and Throat.

Referred for Treatment.	NUMBER OF CHILDREN.			
	Received Operative Treatment			Received other forms of Treatment.
	Under Local Education Authority's Scheme, Clinic or Hospital.	By Private Practitioner or Hospital.	Total.	
236	—	56	56	98

TABLE V.—Summary of Treatment of Defects.

Disease or Defect.	NUMBER OF CHILDREN.			
	Referred for Treatment.	Under Local Education Authority's Scheme.	Otherwise.	Total
Minor Ailments.....	304	260	44	304
Visual Defects	260 *	226	12	238
Defects of Nose and Throat.....	236	..	154	154
Dental Defects	249	...	31	31
Other Defects	66	...	50	50
Total.....	1115	486	291	777

TABLE VI.

**Summary relating to Children Medically Inspected
at the Routine Inspections during the Year, 1920.**

	Elementary School.	Secondary School.
1. The total number of children medically inspected at the Routine Inspections	2120	382
2. The number of children in (1) suffering from—		
Malnutrition	23	12
Skin Disease	22	—
Defective Vision (including Squint)	151	40
Eye Disease	19	—
Defective Hearing	11	2
Ear Disease	22	3
Nose and Throat Disease	326	34
Enlarged Cervical Glands (non-tubercular)	55	8
Defective Speech	3	6
Dental Disease	211	64
Heart Disease—Organic	14	19
„ Functional	25	1
Anæmia	8	6
Lung Disease (non-tubercular)	39	1
Tuberculosis—Pulmonary definite	—	—
„ „ suspected	5	—
„ Non-Pulmonary	6	—
Disease of the Nervous System	2	—
Deformities	18	29
Other Defects and Diseases	17	2
3. The number of children in (1) suffering from defects (other than uncleanliness or defective clothing or footgear) who require to be kept under observation (but not referred for treatment)	427	65
4. The number of children in (1) who were referred for treat- ment (excluding uncleanliness, defective clothing, &c.)... ..	337	119
5. The number of children in (4) who received treatment for one or more defects (excluding uncleanliness, defective clothing, &c.)	234	52

TABLE VI

Deaths related to Legionnaires' disease
in the United Kingdom during the year 1979

Age group	Male	Female	Total
0-4	0	0	0
5-9	0	0	0
10-14	0	0	0
15-19	0	0	0
20-24	0	0	0
25-29	0	0	0
30-34	0	0	0
35-39	0	0	0
40-44	0	0	0
45-49	0	0	0
50-54	0	0	0
55-59	0	0	0
60-64	0	0	0
65-69	0	0	0
70-74	0	0	0
75-79	0	0	0
80-84	0	0	0
85-89	0	0	0
90-94	0	0	0
95-99	0	0	0
100+	0	0	0
Total	0	0	0