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BOROUGH OF CHESTERFIELD



ANNUAL REPORT

OF THE

School Medical Officer

For the Year 1933.

J. A. STIRLING, D.S.C., M.B., D.P.H., School Medical Officer.



BOROUGH OF CHESTERFIELD



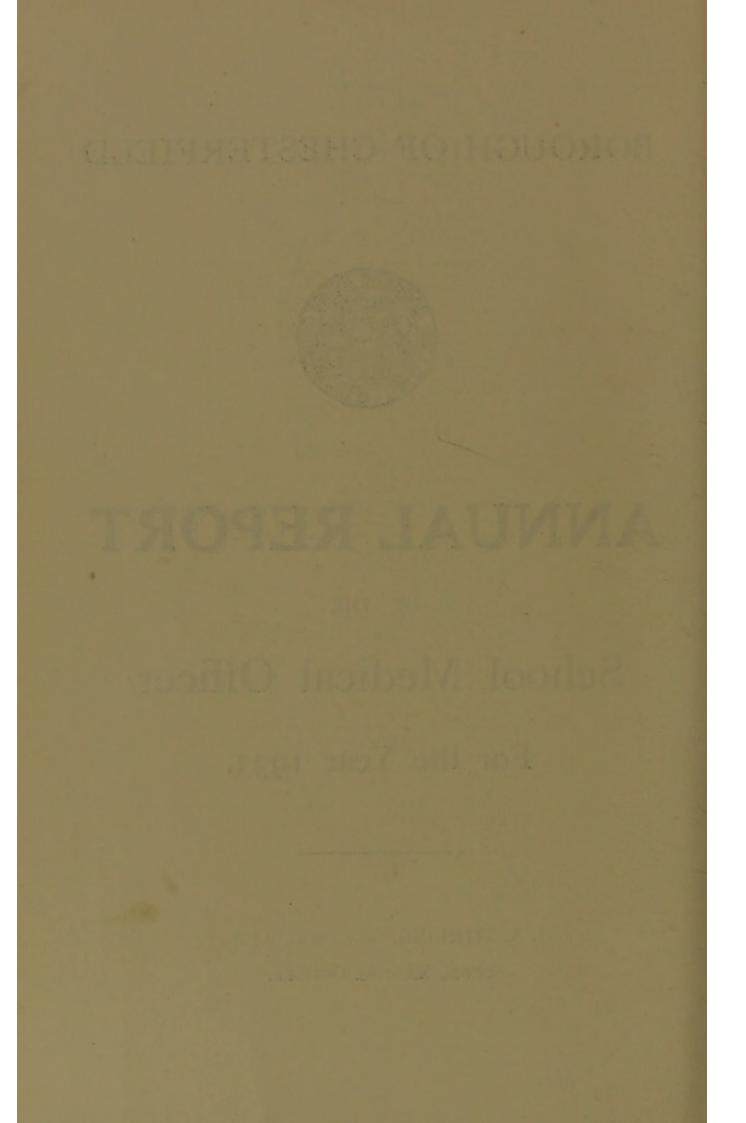
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BOROUGH OF CHESTERFIELD.

Education Committee, 1933-34

THE MAYOR (Councillor R. A. MCCREA, M.B., CH.B.)

Chairman : ALDERMAN H. CROPPER, J.P.

Vice-Chairman : MISS VIOLET MARKHAM, C.H., J.P.

Members :

ALDERMAN ROBINSON. COUNCILLOR BAINES. COUNCILLOR EASTWOOD, J.P. COUNCILLOR EVANS, M.D. COUNCILLOR HODKIN. COUNCILLOR W. B. MITCHELL. COUNCILLOR OAKLEY. COUNCILLOR ROBINSON. COUNCILLOR SHORT. COUNCILLOR SHORT. COUNCILLOR THOMPSON. COUNCILLOR WICKS. COUNCILLOR A. WRIGHT.

Co-opted Members :

ALDERMAN SPENCER, J.P. COUNCILLOR BROUGH. MISS J. F. HARDY. MR. A. C. BESCOBY, M.A. MR. J. W. NOTT. MR. T. TURNBULL, B.Sc.



5

Borough of Chesterfield.

School Medical Officer's Report for 1933.

To the Chairman and Members of the Education Committee of the Borough of Chesterfield.

Mr. Chairman, Ladies and Gentlemen,

I have the honour, as School Medical Officer, to submit my Fifth Annual Report on the Medical Inspection and Treatment of School Children in the Borough during the year ended December 31st, 1933.

The report follows the form suggested by the Board of Education for such reports.

No changes have taken place during the year either in the personnel of the School Medical Staff or in the scheme of Medical Inspection and Treatment.

I have pleasure in reporting that the work has been carried out with smoothness and I wish to take this opportunity of expressing my thanks to Dr. Mackay, Dr. Stead and his staff, and the Head Teachers of the various schools, the clerical staff at the School Clinic and to the School Nurses for the assistance they have freely given at all times and to you Ladies and Gentlemen for your unfailing support which I have greatly appreciated.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

J. A. STIRLING,

School Medical Officer.

Staff of the School Medical Service.

School Medical Officer and Medical Officer of Health : J. A. STIRLING, D.S.C., M.B., Ch.B., D.P.H.

Assistant School Medical Officer and Assistant Medical Officer of Health :

BELL C. MACKAY, M.B., Ch.B., D.P.H.

Ophthalmic Surgeon : WM. M. MUIRHEAD, M.B., Ch.B., D.O.M.S., R.C.P.S.

School Dental Officer :

A. ROYDEN LITTLAR, L.D.S.

School Nurses and Health Visitors :

MRS. E. A. JOHNSON MRS. P. A. ELLOR. MRS. S. M. STREET. MISS O. M. PARKER. MISS E. E. PASSEY. MISS F. SMITH MISS E. M. HUGHES.

Clerical Staff:

G. S. BROWN. MISS E. M. ELLIOTT. MISS N. GILL. MISS E. REYNOLDS.

CO-ORDINATION.

The closest co-ordination exists between all the health services of the Borough, the Medical Officer of Health being also the School Medical Officer, while the Health Visitors also act as School Nurses.

The care of debilitated children under school age is undertaken by the Maternity and Child Welfare Committee.

SCHOOL HYGIENE.

As indicated in previous reports, the building of several new schools and the reconstruction of others has taken place during the last four years. These buildings are all of excellent design, and are in accord with modern ideas for securing the maximum of light and fresh air, and are undoubtedly having a very beneficial effect on the general health of the children.

MEDICAL INSPECTION.

Every child is examined at least three times during its school career, as an "Entrant," as an "Intermediate" when eight years of age and as a "Leaver" at the age of twelve.

"Exceptional Cases," that is to say children suffering from various conditions such as Heart Disease, Epilepsy, Crippling, etc., sufficiently severe to interfere with an ordinary mode of life are examined at least once a year.

In addition to this, any child who is ailing or who has recovered from some condition which is likely to recur is examined at regular intervals during its school life.

FINDINGS OF MEDICAL INSPECTION.

The defects discovered during the School Medical Inspections will be found summarised in Table 2 at the end of this report and as will be seen from this Table consist mainly of dental defects, visual defects, and defects of the Ear, Nose and Throat.

UNCLEANLINESS.

In addition to the routine medical inspections, periodical examinations for cleanliness are made by the School Nurses during the year. During the period under review 39,585 children were examined in the schools and of this number 1,286 were found unclean, a decrease of children found unclean of 800 on last year's figures. In cases where uncleanliness exists notice is sent to the parent calling attention to this fact and giving instructions for cleansing. If at a subsequent re-examination the condition is found to persist, a more strongly worded notice is sent, but it is found that in the majority of cases the condition is remedied after receipt of the first notice. In bad cases the child is immediately excluded from school, the home is visited, the necessary instructions given and the child told to report to the Clinic within 48 hours. All children thus excluded are inspected at the Clinic before being allowed to return to school, and in every case during the period under review a sufficient improvement has been effected without resort to prosecution, although the kindly assistance of the inspectors of the N.S.P.C.C. has been invoked on occasions, with good effect.

INFECTIOUS DISEASE.

The arrangements under this heading remain as in previous years, and have again worked very satisfactorily during the period under review.

It is pleasing to be able to again report a low prevalence of Infectious Disease this year amongst the Borough school children. No school closures were necessary during the year.

A summary of the incidence of infectious disease is given below :---

			1933	1932
Scarlet Feve	r		 92	 44
Diphtheria			 12	 14
Pneumonia			 4	 26
Erysipelas			 _	 2
Cerebro Spin	al Me	ningitis	 5	 4
			113	90

FOLLOWING UP.

Medical Inspection is obviously of little use unless an efficient scheme of "following up" is in operation, that is, satisfactory arrangements made for the school and subsequent home visiting of cases, found at either routine or special examinations in school, to be suffering from some disease or defect. Such arrangements which were made in the Borough in 1931 continue to prove very satisfactory and effective.

The work of the School Nurses during the year is shown in the following analysis :—

(1)	Visi	its to Schools	 	1726
	(a)	For Infectious Disease	 	
		Other Visits	 	1445
	(c)	For Verminous Surveys	 	281

(2) Visits to Homes of School Children 690

	ason of					No. of Visits.
Verminous (Children	1				102
Scabies						2
Ringworm						13
Eye Disease						155
Other Medic	al Defe	ects	*****			353
Enlarged To		nd Ader	noids		.teres	15
Infectious D	isease				*****	
Other Visits	and Re	e-visits		*****		50

MEDICAL TREATMENT.

At the end of 1932 it was felt that the waiting room accommodation at the Saltergate Clinic was totally inadequate for the increasing volume of work being done at the Clinic and an old kitchen was converted into an extra waiting room. I would like to thank the committee for agreeing to my suggestion that this be done, as it has certainly facilitated and at the same time made the working at the Clinic much more smooth during the year under review. That the Minor Ailments Clinics are continuing to perform a very useful work is evidenced by the fact that during the year under review 2,239 children made 11,279 attendances at the Clinics.

In addition to the above it must be remembered that at the Saltergate Clinic, Ophthalmic, Dental and Doctors' Clinics are carried on, so that it will be seen that these premises are kept pretty fully occupied.

The following table shows the complaints for which the children were treated and contains the figures for both the Saltergate and Old Whittington Clinics.

	100 March 100 Ma	The second	
	F1 73	1.1.	iseases :-
			SCASCS -
۰.		-	

Scabies	*****		19
Impetigo			383
Ringworm (Sca	lp)		21
Ringworm (Bod	A /	** *****	43
Other Skin Dise			108

Eye Diseases :			
Blepharitis			65
Conjunctivitis			28
Corneal Ulcer			4
Other Eye Diseases			100
Ear Diseases :			
Otorrhoea			83
Wax			32
Other Ear Diseases			41
Diseases of the Nose and	Throa	t :—	
Enlarged Tonsils and	d Aden	oids	53
Other Conditions			208
Verminous Heads and B	odies		46
Septic Sores and Abrasio	ns		983
General Examinations			250
Dental Diseases			53
All other Diseases			534

TONSILS AND ADENOIDS.

In previous years all cases under this heading found to require operative treatment were referred to the Royal Hospital where they were operated on free of charge. In the early part of the year the hospital authority approached the Education Committee with a a request that in future payment be made for such operative treatment, and after a meeting between the two authorities a scheme was agreed on, subsequently approved by the Board of Education, and came into force on September 1st, 1933. Under this scheme the Education Authority agreed to pay the Hospital the sum of $\pounds 1$ 11s. 6d. per case referred direct to the Hospital from the School Clinic by the School Medical Officer and in the event of in-patient treatment being found necessary a further payment of 7/6 per night be made by the Education Authority.

Action taken during the year in dealing with cases of enlarged tonsils and adenoids will be found in Table 4, Group 3 at the end of this report.

TUBERCULOSIS.

My best thanks are again due to Dr. Nicholson for the valuable help and co-operation he has given during the year and I herewith append a short report by Dr. Nicholson on the year's working as follows:—The markedly lessened incidence of Tuberculosis, especially Pulmonary Tuberculosis, in children of school age in the Borough of Chesterfield compares more than favourably with any in the United Kingdom and this is naturally a matter for gratification. In my opinion the credit for this falls on :

(1.) The improvement of housing conditions and the provision of modern hygienic conditions in our new and reconstructed local schools.

(2.) The work of the Health Visitors and School Nurses, Mrs. McNulty of the County Staff, and the others from the Borough who assist.

(3.) The exactitude and efficiency of the work done by the Sanitary Staff in disinfection, which is a work of the highest importance in preventing the spread of Tuberculosis.

(4.) The work and aid of the Borough Welfare and After Care Committees.

No cases of Tuberculosis were discovered at routine medical inspection, but during the year two cases of Pulmonary and seven cases of Non-Pulmonary Tuberculosis in children of school age were notified in the Borough.

SKIN DISEASES.

The majority of the cases of Skin Diseases occurring amongst the school population are treated at the School Clinics and fuller particulars under this heading will be found in Table 4, Group I., at the end of the report.

VERMINOUS AND DIRTY CHILDREN.

No proceedings were taken during the year under either the Education Act, 1921, or under the School Attendance Byelaws.

EXTERNAL EYE DISEASES.

Under this heading 197 children were treated at the minor ailments Clinics, this number being mainly made up of children suffering from Blepharitis or Conjunctivitis.

VISION.

The work of the Ophthalmic Clinic has again gone very smoothly, the number of children attending being in excess of last year.

914 cases of defective vision and squint were seen by the School Oculist during the year, these children making 2,341 attendances. As a result of these examinations 402 pairs of glasses were prescribed and of this number 373 pairs were obtained.

I am indebted to Dr. Muirhead, the School Oculist, for the following comments on his work at the Ophthalmic Clinic during the current year. School children requiring an eye examination are referred to the School Eye Clinic, where they are examined. Urgent cases reporting to the School Clinic on a day on which the Eye Clinic is not sitting are referred to the Ophthalmic Department of the Chesterfield Royal Hospital. Therefore, a more or less continuous eye service is provided throughout the week, both during the school term and the holidays.

Glasses or local treatment, or both, are prescribed at the Eye Clinic when necessary, and children requiring special local treatment or operations are referred to the Hospital for outpatient or inpatient treatment.

The number of inflammatory cases is comparatively small. Rarely are they severe, and generally improve quickly with treatment. Credit must be given to the vigilance of the teaching staff, who insist on children with inflamed eyes reporting at the Clinic without delay.

All cases of squint, at whatever age, should be referred to an Ophthalmic Surgeon without delay. Parents are encouraged to bring their children when they suspect squint, even if they have not attained school age. Too often it is too late to commence treatment of a squint after the child has commenced its school career.

The Child Welfare Clinic is very helpful in referring suspected cases. The earlier the treatment is commenced the better the progress. One hopes by such methods to reduce considerably the number of squint operations, and also to avoid the long drawn out conservative methods of the treatment of squint.

The attention given to the eyes appears to be appreciated by the majority of the parents, and they are willing to co-operate as far as possible.

In some cases, the explaining of the eye defects in a simple way to the parents, and even to some of the children is very helpful. The parents accompany their children more frequently than formerly.

The School Teachers render considerable assistance, which is much appreciated, in helping to detect cases of defective vision, and also in the supervision of the children in the wearing of the spectacles.

The following is a summary of the year's work at the Ophthalmic Clinic :—

Number of Attendance Number of new cases	attandad	 		2,341
under Atropine	 	 		240
Number of new cases without Atropine			tested	45

	Number of Prescriptions	s given	for gla	asses				188
	Number who obtained g							162
	Number who required no	o glass	es					96
	Number found wearing of	correct	glasse	S				1
	Number of cases referred							22
	Number of cases in which						d	12
	Number of cases who ha							3
	Number of old cases v	who a	ttended	d and	were	re-		
	examined under Atr	opine						229
	Number of old cases v							
	examined without A	tropin	ne					462
	Number of old cases in w							
	after re-testing							206
	Number of old cases who	o obtai	ined gla	asses or	dered			174
	Number of cases for who	om gla	sses we	ere pres	scribed	in		
	1932 and did not ob	tain th	nem unt	til 1933				24
	Number of cases for which	ch pres	cription	ns were	repeat	ted		
	in respect of broken							5
	Number of necessitous							
	obtained by the Lo							
	Free							8
	Part Payment .							147
	Full Payment .							208
	Number of cases referre							
	Minor Ailments Clin							24
			0	-				
2	following table gives an a	analys	is of th	0 00000	treate	d .		
-								
	Hypermetropia						151	
	Hypermetropic Astigmat	tism					335	
	Myopia						91	
							1	
							63	
					•••••		36	
	Astigmatism						6	
	Concomitant Strabismus						123	
	0						2	
	Nebulæ					*****	7	

3

19

14

26

7

3

4

2

-----22

1

.....

Th

Nystagmus

Blepharitis

Corneal Ulcer

Chalazion

Keratitis

Emmetropia Amblyopia

Conjunctivitis

Styes, Abscess, etc.

Blepharospasm

Phlyctenular Conjunctivitis

Traumatic Chor	oidal S	Scars					1
Asthenopia							7
Epicanthus							3
Anismetropia					*****	4	37
Dacryocystitis							-
Cataract							2
Epiphora							2
Spasm of Accor	nmoda	tion					3
Ptosis							1
Foreign Body					*****		
Medical							10
Coloboma							1
Adherent Leuco	oma						1
Choroiditis			*****	*****			1
Pupillary Memb	orane		*****		*****		1

986

DENTAL DEFECTS.

6,886 children were examined by the School Dental Officer during the year ended December 31st, 1933, and of this number, 3,676 were found to require treatment and 2,693 were actually treated.

Mr. Littlar, the School Dental Officer, gives the following report on the School Dental Inspections and Treatment.

In the routine inspections this year children up to 14 years of age were included in the Dental Scheme. These children from 12 to 14 years of age have not been examined for some little time, and since they have been included in the Authority's Scheme it has not been possible to examine every child in the twelve months as was hoped. I estimate that it will take fifteen months to make a complete inspection of all the schools. I think it is essential that these older children should be kept under observation and receive any treatment necessary so that they can leave school Dentally fit, especially as employers are getting more strict as regards Oral Hygiene.

53% of the children examined required treatment, which figure, although very high, compares very favourably with the statistics of other Authorities. There was an increase of 145 children treated over last year's number and an increase of 218 attendances.

The work undertaken has been of a similar nature to that of previous years namely, fillings and extractions, no denture or orthodontic appliances being undertaken. A large proportion of permanent extractions were done for regulation purposes, in most cases the tooth lost was the first upper bicuspid to allow the canine tooth to erupt in a normal position. Very little conservative treatment has been done on the Temporary Dentition, all efforts being concentrated on putting the mouth in a healthy condition. It has always been our aim to make the Dental Clinic as much like private practice as possible, each child being treated as an individual and not as just one of a mass, and every care is taken to make every operation as painless as possible.

It is gratifying to note the increasing number of parents who are taking more interest in their children's teeth and who come up for advice.

I wish to thank the teaching staff for the work they have done in teaching the children Dental Hygiene, also for urging the parents and children to take advantage of the treatment provided at the Clinic.

The Maternity and Child Welfare Clinic for children of preschool age is doing useful work.

CRIPPLING DEFECTS AND ORTHOPÆDICS.

The arrangements under this heading remain the same as in former years, and I wish to express my grateful thanks to Mr. Garrick Wilson and the Staff of the Royal Hospital for their continued help and co-operation.

OPEN AIR EDUCATION.

Stone Hay Camp was used once again this summer with markedly beneficial effects to all the children who were lucky enough to have the opportunity of going there. Five parties of boys were sent there during term time each party which consisted of 18 boys and 2 teachers remaining at the camp for two weeks. There was also a holiday camp there during three weeks of the summer holidays, parties of boys going there for two of the weeks and a party of girls for the remaining week.

The number of children able to be sent to the camp this year was slightly lessened by an increased expenditure, but this expenditure which, in addition to a thorough renovation of the camp, also included the installation of a more efficient ventilating system in the sleeping quarters and in addition, an overhaul of the sanitary arrangements which included the provision of new up-to-date hygienic lavatories, will greatly enhance the value of the camp from a sanitary point of view. Other camps were held as follows :---

- (1) Settlement Class at the Settlement Hut, Darley Dale, at the end of June.
- (2) "William Rhodes" Boys' at Llanfairfechan, week beginning May 5th.
- (3) Brampton Senior Girls at Cleethorpes, week beginning June 30th.
- (4) Camp run at Darley Dale for New Whittington Senior Boys (voluntarily organised by Staff) during part of summer holidays.

SWIMMING AND SCHOOL BATHS.

During the past swimming season 10,529 children's visits were paid to the Central School Baths as part of the school curriculum, and children who were able to swim also paid 8,101 visits with privilege tickets outside school hours.

During the summer of 1933 I am afraid that these baths were much overused, but excuse can be found for this in the abnormally hot summer combined with the lack of adequate swimming facilities generally throughout the Borough, but I do feel most strongly that in future years these baths should only be used to a proper capacity and the number of people using them reduced if need be to suit these requirements. At the same time it must also be remembered that the claims of the school children of the Borough must be the first consideration, as when all is said and done, the Central School Swimming Baths are provided by the Education Committee for the specific purpose of school baths.

PHYSICAL TRAINING.

Conditions under this heading remain as in previous years. The School's Athletic Association still continues its valuable work in this direction and I am again indebted to the Secretary of the Association, who has furnished the following report on its activities.

The Athletic Sports were held on June 14th in the Queen's Park and the number of entries were increased largely owing to the number of competitors from Junior schools in senior events. It is pleasing to note that the standard of the athletics was higher than ever, seven new records being put up. Letters from visitors only confirm what was obvious to everyone present, that the quality of the athletics and the success of the arrangements reflected the work of all the teachers concerned in training the competitors and in the organisation of Sports Day.

In July the Association's Athletic Team competed at Blackwell in the County Championship and it is very gratifying to note that the Girls' Team won the "Archer" Trophy for the 3rd year in succession and in so doing set up four county records. The Boys' Team narrowly lost the "Derbyshire Times" Trophy and the combined teams easily won the "Jackson" Shield for the third year in succession.

The Annual Swimming Sports were held in September in the Central School Swimming Baths. Although the entries were not so numerous as in previous years, the sports were highly successful, a high standard of performance being attained by both the boys and girls competing.

The cricket section had a highly successful season as owing to the fine summer all competing teams in all sections of the league were enabled to complete their fixtures. "Mary Swanwick" and Central were champion of their respective sections and in a final championship match "Mary Swanwick" won, thus becoming the first school champions.

The Junior Boys' Football section has been reformed, but at present only a few matches have been played as most of the fixtures will take place when the lighter nights come in 1934.

The netball section has also been formed, eight schools having joined, and many matches have been played.

PROVISION OF MEALS.

During the year it was found necessary to provide 33,261 milk meals to school children and of this number 27,133 were provided free, 3,941 at half cost, and 2,187 at no cost to the Education Committee.

The cases were selected by the School Medical Department and were then subjected to a scale, approved by the Board of Education, taking into consideration income and number in family.

In addition to milk meals certain children selected by the School Medical Officer and his Assistant were given Adexolin, but as this was only commenced in November it is too early yet to base any deduction on its use and fuller information will be given on this subject in the Annual Report for 1934.

CO-OPERATION OF PARENTS.

It is to be regretted that, except in the case of the Infant Departments, the attendance of parents at the routine inspections has been rather small. The few who took advantage of their invitation to attend were helpful in giving a history of the child, and further, where defects were found, they could be personally advised as to what steps were necessary to put the matter right, and for these reasons I trust that the attendance of parents in 1934 will show a large increase.

CO-OPERATION OF TEACHERS.

It is pleasing to report the continued and heartiest co-operation of the teaching staff in the work of School Medical Inspection.

CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

The closest co-operation between this department and the School Attendance Officers still happily continues, and is, I venture to think, of great mutual benefit.

CO-OPERATION OF VOLUNTARY BODIES.

The Borough Welfare Department continues its very useful and most helpful work in dealing with crippled and debilitated school children and I would like to express my grateful thanks to Miss Jones and her staff for their continued and most valuable cooperation.

Grateful mention is made here of Messrs. Jarvis and Wills, Inspectors of the National Society for the Prevention of Cruelty to Children. The Inspectors pay regular visits to the School Medical Officer and discuss with him cases which it is thought advisable to keep under observation. Their work is most valuable and helpful and is much appreciated by all the School Medical Staff. Mr. Kingwell, the Senior Inspector, retired during the year and we all wish him many years of happy retirement after his labours which our staff always greatly appreciated.

BLIND, DEAF AND DUMB, DEFECTIVE AND EPILEPTIC CHILDREN.

At the end of 1933 there were 14 children receiving care in special residential schools and in addition to this number there were 65 mentally defective children receiving training in special classes attached to five of the elementary schools in the Borough.

NURSERY SCHOOLS.

There are no Nursery Schools in the Borough, but Nursery Classes have been successfully carried on at the following schools :— Highfield Hall, Whittington Moor Infants', Brampton Infants', Hipper Street Infants,' and Edmund Street Infants.'

SECONDARY SCHOOLS.

The arrangements under this heading remain the same as in previous years.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

72 Employment Certificates were issued during the year, and no applications were refused.

SCHOOL CLINICS.

The following is the programme of Clinics which has been in force during the period under review :—

(1)	Minor Ailments
	Clinic

(2) Dental Clinic

Saltergate Clinic.

Daily 9-30-12-0

Clinic at "Mary Swanwick" School.

Daily 2-30-4 p.m.

(noon). Daily by appointment

Will be open during periods of the year when Whittington Area is being inspected and treated, and appointments will then be made.

(3) Ophthalmic Clinic.....

Tuesday and Saturday mornings by appointment.

GENERAL INFORMATION.

The total accommodation of Elementary Schools in the Borough for the year 1933-34 was 12,172, and the number of children on the register at the end of December, 1933, was 10,745.

The following table shows the names of the schools and the number of children on the register at the end of the year 1933 :----

Hipper Street Junior Mixed	Ĺ				339
Hipper Street Infants					176
St. Helen's Street Junior M	ixed				283
St. Helen's Street Infants				*****	140
Central Boys' Modern					344
Central Girls' Modern					361
Brampton Girls' Modern					229
Brampton Junior Mixed		*****			387
Brampton Infants	*****	*****	*****		231
Spital Infants		*****			29
Old Road Modern Mixed				•••••	310
Old Road Infant and Junio	r	Sec.	*****		536
			*****	*****	162
St. Mary's Catholic (Senior)		*****	*****	*****	179
St. Mary's Catholic (Junior)				*****	297
Hasland Eyre Street (Infan	ts)		*****	*****	183
Hasland Junior	*****				312
Derby Lane Girls' Modern		******	*****		287
Derby Lane Infants	*****	*****		*****	263

Derby Lane Junior Mixed			 474
"Cavendish" Junior Girls'			 259
Edmund Street Infants			 171
Newbold C. of E.			 137
"Gilbert Heathcote" Junior Boys	·		 264
New Whittington Modern Mixed			 196
New Whittington Infant and Junio	r		 338
"Mary Swanwick" Modern, Old W	Thitting	gton	 276
" Mary Swanwick " Primary			 273
Brushes Infant and Junior			 215
"Peter Webster" Boys' Modern			 378
"William Rhodes" Infants			 176
" Violet Markham " Girls' Modern			 413
Highfield Hall Infant and Junior			 454
Whittington Moor Infants			 230
"William Rhodes" Boys' Modern			 465
Tapton House Selective			 375
" William Rhodes " Junior		****	 341
Hasland Hall Modern (Mixed)			 262

TABLE I.

Return of Medical Inspections.

A. ROUTINE MEDICAL INSPECTIONS-

No. of Code Group Inspections :---

Entrants		 	953
Intermedi	ates	 	903
Leavers		 	1086

B. OTHER INSPECTIONS :---

No. of	Special Inspection	15	 70
No. of	Re-Inspections		 3034
			3104

6046

TABLE II.

			and the second se	coutine spection	5	Specials.
				No. of Defects.		No. of Defects.
	Defect or Disease.		Referred for Treatment	Requiring to be kept under observation, but not referred for treatment.	Reterred for Treatment	Requiring to be kept under observation, but not referred for treatment.
	(1)		(2)	(3)	(4)	(5)
	Malnutrition		 	1		
Skin	Ringworm : Scalp Body Scabies Scabies Impetigo Other Diseases (Non-Tubercule	 osis,	1 1 6 8	 17	22	 1
Eye	Blepharitis Conjunctivitis Keratitis Corneal Opacities Defective Vision Squint Other Conditions	· ····································	11 5 2 182 10 1	29 7 2 237 17 12	1 12 2 3	1 3
Ear	Defective hearing Otitis Media Other Ear Diseases	·····	 5 3 6	9 16 1	2 1	1 1 1
Nose and Throat	Chronic Tonsillitis Tonsils only Adenoids only Chronic Tonsillitis a		 2 2	116		3
	Adenoids Other conditions		 $\begin{vmatrix} 1\\ 2 \end{vmatrix}$	1 14	4	7

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

	(1)	in a set into	(2	(3)	(4)	(5)
	Cervical Glands (Non-Tuberculosis)			12		1
Defective	Speech			1		
Teeth-D	ental Diseases		3		2	
Heart and Circula- tion	Heart Disease— Organic Functional Anaemia			7 94 7		 2
	Bronchitis	· ···· · ···		19		*****
Lungs	Other Non-Tubercu Diseases			84		****
Tuber- culosis	Pulmonary : Definite Suspected Non-Pulmonary : Glands Other Bones & Skin Other Forms			· 1 1		 1
Nervous System	Epilepsy Chorea Other Conditions	····· ···		2 1		 1 2
Defor- mities	Rickets Spinal Curvature Other Forms	····· ···		1 1 14		 2
Other det	fects and Diseases		. 3	19	3	9
			256	743	34	36

TABLE II.-continued.

B.—NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING UNCLEANLINESS AND DENTAL DISEASES).

		Number o	Percentage of Children		
Group (1)		Inspected (2)	Found to require Treatment (3)	found to require Treatment (4)	
		(-)	(0)	(-)	
CODE GROUPS :		070		C C C	
Entrants		953	23	2.4	
Intermediates		903	88	9.7	
Leavers		1086	118	10.8	
		2942	229	7.7	

TABLE III.

Return of all Exceptional Children in the Area.

B	LIND (HILD	REN.
-	LIND .	UTILD.	MISIN.

and the second					and a state of the	No. Andrew	and the second second	and the second second
At Certifie Schools for Blind.	the second state of the se	At Pul Elemen Schoo	tary		other tutions.		no School or stitution.	Total.
5		· xett.		in the	-		10.TT	5
a and a second		PAR	RTIALL	y Bli	ND CHI	LDRE	EN.	1 . C. 1
Schools for Schools for Eleme		Public entary ools.	At oth Instituti		At no School of Institution			
-		-		1	-		_	1
- nestric	12.11	- and the	Di	eaf Ci	HILDREN			ANG Y TE
At Certified At Public Schools for the Deaf. At Public Elementary Schools.		At other Institutions. At no Scho or Institution		or	Total.			
4		-				4		
		PA	RTIAL	LY DE	EAF CHI	LDRE	N.	
Schools for Schools for Elem		Elem	Public entary ools.	entary Institutions. School		At no School o Institution		
-		-		2			_	2
	MENTALLY DEFECTIVE CHILDREN. FEEBLE-MINDED CHILDREN.							
At Certified Schools for Mentally Defec- tive Children At Public Elementary Schools.		and the second se	other itutions		no School or nstitution.	Total.		
1		10)2	10100	1		-	104

TABLE III.-continued.

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
		_	1	1

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

1. CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS. (including pleura and intra-thoracic glands).

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
-	2	2		4

2. CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
4	10	-	6	20

B. DELICATE CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
-	123			123

C. CRIPPLED CHILDREN.

At Certified Special Schools.	Special Elementary		At no School or Institution.	Total.
	29	-	2	31

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools.	Special Elementary		At no School or Institution.	Total.
-	5	-	-	5

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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 5).

	Number of defects treated or under treatment during the year.			
Disease or Defect (1)		Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
Skin— Ringworm—Scalp Ringworm—Body Scabies Impetigo Other Skin Diseases Minor Eye Defects—		$21 \\ 43 \\ 19 \\ 383 \\ 108$		21 43 19 383 108
(External and other, but excluding cases falling in Group 2) Minor Ear Defects Miscellaneous (e.g minor injuries, bruises, sores, chilblains, etc.)	•••••••	197 156 2063	-	197 156 2063
TOTAL		2990		2990

The number of individual children who attended the Minor Ailments Clinic during 1933 was 2,239, and the number of attendances 11,279.

		N	umber of Defects of	lealt wit	h	
Defect or Disea	se	Under the Author- ity's Scheme	Submitted to refraction by private practitioner or at Hospital apart from the Authority's Scheme	Other- wise	Total	
(1)		(2)	(3)	(4)	(5)	
Errors of Refraction (including squir	1t)	914	2	-	916	
Other Defect or diseas eyes (excluding th recorded in Group	lose	60	10	-	70	
Total		974	12	-	986	
Total number of Children for whom spectacles were prescribed : (a) Under the Authority's Scheme						
GROUP 3.—T	GROUP 3TREATMENT OF DEFECTS OF NOSE AND THROAT.					
NUMBER OF DEFECTS.						
Received Operative Treatment						
Under the Authority's Scheme in Clinic or Hospital (1)	By Priv Practition Hospital a from the Au ity's Scho (2)	er or apart athor-	Received other Forms of treatment (3)	Total Number Treated (4)		
-	15		18	33		

GROUP 2.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments, Group 1).

GROUP 4.—DENTAL DEFECTS.

(1)	Number of Children who were :	
	(a) Inspected by the Dentist :	
	Age 5 723	
	,, 6 712	
	,, 7	
	9 788	
	, 10	
	,, 11 712	
	,, 12 690	
	,, 13 543	
	,, 14 242	
	Total 6886	
	(b) Found to require treatment	3676
	(c) Actually treated	2693
	(d) Re-treated during the year as the result of	
	periodical examination	183
(2)	Half-days devoted to :	
	Inspection	34 405
	Ileatment	
	Total	439
(3)	Attendances made by Children for treatment	2876
(4)	Fillings :	
	Permanent Teeth	824
	Deciduous Teeth	7
	Total	831
(5)	Extractions :	
	Permanent Teeth	969 3679
	Total	4648
(6)	Administration of General Anæsthetics for Extractions	

(7) Other Operations :---

	Total	 	446
Deciduous Teeth	 	 	155
Permanent Teeth	 	 	291

The amount received from parents for Dental Treatment of children was $\pounds 80-0-0$.

GROUP 5.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(1)	Average number of Visits per School made during the year by the School Nurses	4
(2)	Total number of Examinations of Children in the School by the School Nurses	39585
(3)	Number of Individual Children found unclean	1286
(4)	Number of Children cleansed under arrangements made by the Local Education Committee	_
(5)	Number of cases in which legal proceedings were taken :	
	 (a) Under the Education Act, 1921 (b) Under School Attendance Byelaws 	

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