

**[Report 1912] / School Medical Officer of Health, Chorley Borough.**

**Contributors**

Chorley (England). Borough Council.

**Publication/Creation**

1912

**Persistent URL**

<https://wellcomecollection.org/works/d26y796u>

**License and attribution**

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

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

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



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

CI AC. 4485(1) CHORLEY  
BOROUGH OF CHORLEY.

---

EDUCATION AUTHORITY.

---

*Medical Inspection of School  
Children.*

---

ANNUAL REPORT  
1912.

---

CHORLEY :

ELLIS & SONS, Printers, Market Place.



BOROUGH OF CHORLEY.

---

EDUCATION AUTHORITY.

---

*Medical Inspection of School  
Children.*

---

ANNUAL REPORT  
1912.

---

CHORLEY :

ELLIS & SONS, Printers, Market Place.



BOROUGH OF CHORLEY.

EDUCATION AUTHORITY.

Minutes of the Education Committee.

1900-1901.

ANNUAL REPORT.



Printed by the Borough of Chorley.

CHORLEY, JANUARY, 1913.

*TO THE CHORLEY EDUCATION AUTHORITY*

LADIES AND GENTLEMEN,

I have much pleasure in presenting the fifth Annual Report of the results of the Inspection of Children attending the Elementary Schools in the Borough of Chorley, and in recording two distinct and marked improvements during the year 1912.

In the first place you have engaged the services of Miss Unsworth as School Nurse, for the purposes of (a) assisting the School Medical Officers in the work of Inspection of the Children; (b) visiting the school periodically to find out any children who are present in a dirty or uncared for condition, and going to the homes of such children to give advice to the parents, and (c) "following up" every child in whom there has been found any marked physical defect to their own homes, to see whether the recommendations made by the Inspecting Medical Officer have been carried out or not.

Nurse Unsworth entered upon her duties in October, and I have been thoroughly satisfied with the manner in which she has done her work, and am sure that she will continue to evince the same zeal, method, and tact that she has done hitherto.

Secondly, in accordance with a resolution of your Authority, a Circular was issued to the Managers and Head Teachers of each of the Elementary Schools, asking them to notify to the School Medical Officers prior to each Inspection



of the Entrants and Leavers, any Children in the School who would not be included in either of these classes, but who appeared to the Head Teachers to be suffering from any physical or mental defect, so that these children might be examined at the same time as the Entrants or Leavers, and, if any defect were found, that the parents might be informed and recommended to take such advice as seemed necessary.

As you will see in Table C and F, one hundred and fifty (150) such children have been medically examined at ages varying from six to eleven years, who, otherwise, would not have been inspected until the year of leaving school, and whose defects, in a majority of instances, would not have been brought to the notice of their Parents or Guardians until the last year of School life, and valuable time for the remedying such defects would have been lost.

Special Children were presented for inspection in every School except one.

I strongly advise you, until the Board of Education Scheme is extended to the compulsory inspection of all Children, to continue your authorization to your School Medical Officers to examine all children who, in the opinion of the Teachers, are subjects of some physical or mental defect. I have generally found that the Teachers are very anxious to point out such cases, and your Assistant School Medical Officer has, in by far the large majority of instances, found that their recommendation for examination has been fully warranted.

The total number of Children medically inspected during 1912 was 1,418, and comprised the following:—



## ENTRANTS.

Boys...356      Girls...361      Total Entrants...717

## LEAVERS.

Boys...263      Girls...288      Total Leavers...551

## SPECIALS.

Boys...69      Girls...81      Total Specials...150

The Inspections of Infants were held in each School twice during the year, whilst each School was visited once for the Inspection of Leavers and Specials during the latter half of the year.

An average number of twenty-one (21) Leavers or Specials were examined at each Inspection, and an average number of twenty-two (22) Infants per session were inspected.

Since the commencement of the Medical Inspection of Children, six thousand seven hundred and twenty-two (6,722) Children have been medically examined, as you will see from the following Table.

Year.	Entrants.	Leavers.	Second Inspection.	Special Inspection	Totals.
1908	569	505			1074
1909	590	592	488		1670
1910	765	571			1336
1911	640	584			1224
1912	717	551		150	1418
Totals...	3281	2803	488	150	6722

Very few Leavers absented themselves from Inspection—under ten in all—and the same may be said of the Specials.



The second examination of Infants was much interfered with by an epidemic of Mumps, but we endeavoured to fix the days of Inspection either before or after the cases became numerous in such School. Had it not been for this epidemic I believe the number inspected would have been at least as many as those in 1910.

The Ages of the Children inspected during 1912 were as follows:—

#### ENTRANTS.

Age.	Boys.	Girls.	Totals.
3 to 4 years	44	53	97
4 to 5 „	137	122	259
5 to 6 „	138	145	283
6 to 7 „	25	27	52
Above 7	12	14	26
Totals ...	356	361	717

#### LEAVERS.

Age.	Boys.	Girls.	Totals.
12 to 13 years	244	246	490
13 to 14 „	19	41	60
Over 14 „	—	1	1
Totals ...	263	288	551

#### SPECIALS.

Age.	Boys.	Girls.	Totals.
6 to 7 years	2	4	6
7 to 8 „	9	3	12
8 to 9 „	14	14	28
9 to 10 „	21	27	48
10 to 11 „	9	15	24
11 to 12 „	14	18	32
Totals ...	69	81	150

As I remarked in my last Report, the great majority of the Children leave school as soon as they are legally able to do so. I found that less than eight (8) per cent. of the boys, and about fifteen (15) per cent. of the girls were found attending school after the age of thirteen had been attained. The percentage of the boys inspected for a second time as Leavers on account of being over thirteen years, was considerably less in 1912 than in 1911. I hope the time will soon come when no child will be allowed to leave school until he or she is FULLY fourteen years old.

The results of the Inspection of the Entrants, Leavers and Specials are given in Tables at the end of this Report.

These Tables are on the same lines as those given in my previous Reports, viz, Tables A, B and C give particulars as to School Attendance, Standard of Attainment, Previous Medical History, Family History as regards Tuberculosis, present condition of child in reference to adequacy and condition of Clothing, Foot-gear, Cleanliness, Nutrition, Teeth, etc., and any defects in Vision, Hearing, or any other disease discovered at the Inspection are noted.

Tables D, E, F give the average height and weight of the boys and girls at the same ages attending at each of the Schools, and also the average height and weight of the whole of the boys and girls of the same ages Inspected in each class (Entrants, Leavers, and Specials), and I compare these heights and weights with the average heights and weights of boys and girls as given by the Anthropometrical Committee of the British Association.

Furthermore, I give in each School the number of Children whose height or weight are above, about, or below the



average. Most of these matters given in detail in the Tables will receive further comment in my Report.

PARENTS, ETC., PRESENT.—The Parents, Relatives, or Guardians of six hundred and fifty-one (651) children were present at the Inspection, that is to say, that only about 46 per cent. of the children were accompanied by a responsible person to whom any information as to the health or defects found in the children could be directly communicated. The percentage of parents present was highest in the Inspection of Entrants, viz, 60, and lowest in the case of the Leavers, viz, 29, whilst in the Specials who had been Inspected on account of a suspected defect only 43 per cent. of the Children were brought by the Parents.

The number of Parents present at the Inspection of 1912 was about the average of that obtaining since the first institution of Medical Examination. I regret that, except in a comparatively few instances, more interest is not taken in the Inspections, though in the Notices to Parents, sent prior to each Inspection, special stress is laid upon the advisability of one of the Parents, or a responsible Relative or Guardian attending. Where a Parent sees or hears the evidence of a defect in his or her child, the impression of the desirability and necessity of remedying such defect is much deeper than can be produced by the sending of a letter.

Indeed, I have found in many instances that the letters written to the Parents of a defective child have no result, as they have not previously noticed that defect, and are more or less naturally inclined to disbelieve that any such defect exists. This neglect would be much lessened if the parents were present at the Inspections, and thus were able to *see for themselves* that something was wrong.

REGULARITY OF ATTENDANCE.—This estimate is obtained by the kind aid of the Head Teachers, who enter upon each Schedule the character of each child's attendance, whether Regular, Fairly Regular, or Irregular. Roughly speaking, 78 per cent. of the Children Inspected were Regular in their attendance at School; 10 per cent. Fairly Regular, and 12 per cent. Irregular.

The Regularity of Attendance was, as might be expected, lowest amongst the Infants and highest amongst the Leavers; whilst the Specials attended School nearly as well as the Leavers.

	Regular.	Fairly Regular.	Irregular.
Infants ...	66 per cent.	13 per cent.	21 per cent.
Leavers ...	90 „	7.4 „	2.6 „
Specials ...	89.3 „	8.6 „	2 „

Compared with the classification of attendance of the Leavers given by the Teachers in my Report for 1911, that of 1912 shows some improvement, as you will notice from the following percentages.

	Regular.	Fairly Regular.	Irregular.
1911 ...	85.5	9.9	4.6
1912 ...	89.3	7.4	2.6

This improvement has occurred amongst the Girls who have attended School more regularly in 1912 than in 1911.

The statistics of attendance are given in Tables A, B and C.

STANDARD.—In the Schedules of the Leavers and Specials, the Head Teachers insert in the case of each child the Standard in which he or she is placed at the time of Inspection,



and in Tables B and C the number of Children in each Standard in each School are given.

The number of Leavers in each Standard in 1912 compare closely with similar statistics in the previous three years.

You may notice, however, that nineteen (19) Children were only sufficiently educated in the last year of their attendance at School to be placed in Standard III., or a still lower standard, that is, 3.5 per cent. of the Leavers were classified in Standards I., II. or III. This percentage, though not satisfactory, is better than that of any of the preceding three years, 1911, 1910 and 1909, when the percentage of Leavers in a standard below the fourth were 5.6, 6.3, and 4.6 respectively.

**PREVIOUS MEDICAL HISTORY.**—In the Notices sent to the Parents or Guardians of all Children to be Inspected at a certain date, a request is made to these Parents to answer in writing, certain specific questions as to whether the child has suffered from one or more of the more usual Infectious Diseases incidental to Childhood, and also generally as to any other Disease of Injury to which the Child has been subjected.

As a rule these answers are properly inserted in the Notices and brought to your School Medical Officers at the time of inspection, but in a comparatively small proportion of instances either the notices are not brought back, or no or incomplete answers returned.

Consequently the results obtained are only approximately correct, but still they are sufficiently so to give valuable information as to the incidence of the usual Children's Diseases amongst the children examined,



All these Statistics are given in Tables A, B and C, for each School and I summarize below for each Disease.

**MEASLES.**—Four hundred and sixty seven (467) Infants or 65 per cent., five hundred and eleven (511) Leavers or 92.7 per cent, and one hundred and forty (140) Specials or 93.3 per cent. had had Measles before Inspection.

From these figures you will see that there is not the same necessity for excluding all the Children from a house infected with Measles from attending the Upper Schools, that there is for preventing Infants going to School when there is a case of Measles in the same house. There is a much greater number of Children in the Infant Schools than in the Upper Schools liable to the infection of Measles, and consequently able to convey the Disease to other Children in School whilst they themselves are not only in the pre-eruptive but highly infective stage of this Disease. I have, accordingly, acted upon the recommendations of the Chief Medical Officers of the Local Government Board, and Board of Education jointly and requested the Teachers to send all Infants coming from a house infected with Measles home, but in the Upper Schools only those who have not had a prior attack of Measles.

**WHOOPING COUGH.**—Three hundred and twelve (312) Infants or 43.5 per cent., two hundred and twenty (220) Leavers or 40 per cent, and seventy seven (77) Specials or 51 per cent. had suffered from Whooping Cough prior to Inspection.

**CHICKEN POX.**—This Disease is usually very trivial but ninety eight (98) or 13.7 per cent. of Infants, one hundred and eighteen (118) or 21.4 per cent. of Leavers, and forty three (43) or 28.6 per cent. of the Specials had had an attack of Chicken Pox.

SCARLET FEVER.—Fifty-one (51) Infants, or 7.1 per cent., ninety six (96) Leavers or 17.4 per cent., and twenty three (23) Specials or 15.3 per cent. had suffered from Scarlet Fever prior to Inspection.

On account of the large proportion of Children in the Upper Schools not having had a previous attack of Scarlet Fever, and not, therefore, more or less immune to an attack, I have requested the Teachers to exclude from School Attendance all Children, Infants or otherwise, coming from a house infected with Scarlet Fever.

DIPHTHERIA.—Only twelve (12) Infants or 1.7 per cent., and twelve (12) Leavers or 2.2 per cent., and eight (8) Specials or 5.3 per cent. were reported to have suffered from Diphtheria.

All Children coming from a house infected with Diphtheria are required to be excluded from School.

OTHER DISEASES OR INJURIES.—One hundred and sixty two (162) Infants or 22.6 per cent., one hundred and thirty two (132) Leavers or 24 per cent., and thirty five (35) Specials or 23.3 per cent. were stated to have suffered from some one or more Diseases other than those already enumerated before Inspection.

TUBERCULOUS FAMILY HISTORY.—As far as possible your Officers have endeavoured to find out in the case of all Children inspected by them, whether there had been any instances of Consumption amongst the families or immediate relatives of such Children. This question was requested to be answered by the Parents or Guardians of the Children on the Notices sent prior to the day of Inspection.



A large majority of the Notices contained this information, and when the parents, etc., who had not answered were present, they were questioned on the matter, but in a number of instances where no answer was written or the Parent present, we failed to get any light upon the matter.

I am inclined to think that in some cases this Question was purposely left unanswered, and that the proportion of Children with a tuberculous family history is somewhat higher than that revealed by the statistics in Tables A, B, C.

Roughly speaking, one child in every twenty inspected came from a family in which there had been one or more cases of Consumption, either on the father's or mother's side, or both, the numbers and percentages being as follows:—

Infants	42	or	5·9	per cent.
Leavers	28	or	5·0	„
Specials	6	or	4·0	„

The proportions of Children with Tuberculous family history to those without such history has been about the same during the years since the Inspection of School Children has been carried out.

I think it a matter of considerable importance that the facts regarding the family history of Tuberculosis should be ascertained, and, more especially, where there is a person suffering from Consumption in the same house with School Children.

That Consumption is an infectious and not strictly hereditary disease does not militate against the fact that children born to Tuberculosis parents are predisposed to being subjected to that disease, and require careful watching. The children with Tuberculous family history were more carefully examined, but in only a very few instances was there any evidence of the existence of the disease.



In February, 1913, the Compulsory Notification of all forms of Tuberculosis (not only Tuberculosis of Lungs) will come into operation, and by that means all cases of Tuberculosis amongst School Children will come to the knowledge of your School Medical Officer.

**CLOTHING AND FOOTGEAR.**—Generally speaking the results of Inspection of the Clothing and Footgear were satisfactory. A very large majority had sufficient clothing and good boots or clogs so as to keep the children warm and dry.

The full statistics for each School are given in Tables A, B and C, Clothing and Footgear being described as Good where it was sufficient for the essential requisitions of the children, and was reasonably clean and neat. Fair were though ragged and dirty it was sufficient to keep the children warm and dry, and Bad where the Clothing or Footgear was insufficient for these purposes. I summarise below the statistics in the Tables A, B, C.

		Infants.		Leavers.		Specials.	
		Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Clothing	Good	325	357	240	285	58	80
„	Fair	28	4	22	3	9	1
„	Bad	3	—	1	—	2	—
Totals ...		356	361	263	288	69	81
<hr/>							
Foot Gear	Good	321	346	233	253	59	74
„	Fair	24	10	18	23	6	7
„	Bad	10	5	12	12	4	—
Totals ...		356	361	263	288	69	81

The Clothing of the Girls was found more satisfactory than that of the Boys, only 1.1 per cent. being classified as Fair, and in no instance was the Clothing of the Girls described as "Bad." On the other hand, 8.6 per cent. of the Clothing of the Boys was described as "Fair," and .9 per cent. as "Bad." Of course, one expects that the boys' clothing through rougher usage in play, etc., will not present as good an appearance as that of the girls, and most of the cases of "Fair" Clothing in boys meant simply that they were ragged and dirty, but still sufficient for the purpose of keeping their bodies warm and dry.

The Footgear of the Boys and Girls did not show the same marked difference between the sexes as in last year, though the percentage of Boys put into the Fair and Bad classes were somewhat in excess of that of the Girls.

Upon the whole your officers were well pleased with the condition of the Clothing and Footgear, though the condition of the latter was not quite as good as that recorded in my Report for 1911.

Compared with the preceding year the following are the percentages of the Children classified as regards Clothing and Footgear in 1912 and 1911.

	Clothing.			Foot Gear.		
	Good.	Fair.	Bad.	Good.	Fair.	Bad.
1912	94.9	4.7	.4	90.8	6.2	3
1911	94.5	4.6	.9	92.2	5.8	2

CLEANLINESS.—The Children generally appeared clean in the parts uncovered by Clothing, and very few cases were noted of dirty heads and faces. Probably if the Inspection had been carried further there would have been a somewhat different tale to tell in many instances, but as far as your Inspecting Medical Officer saw the children were well attended to.



The condition of the Girls' heads as regards the presence of lice or "nits" has very markedly improved since the Medical Inspection was instituted, though I regret to say that as compared with the statistics of pediculosis of 1911 there was a slight retrogression in 1912.

The following are the percentages of Girls with lice or nits in the hair in 1912, and the three preceding years:—

	Infant Girls.	Leaver Girls.
1912	12 per cent.	27 per cent.
1911	11 „	24 „
1910	31 „	52 „
1909	31 „	50 „

The above figures do not show the full extent of the improvement in the last two years, as in addition to the marked decrease in the number of children with pediculous heads, there is very rarely to be seen now any live lice in the hair, and in almost all the cases noted there were only more or fewer "nits" which are often difficult of removal, and require constant care and attention. There still remains, however, much to be done before the Schools can return a clean bill of health in this particular, and in order to secure that desirable result I have directed Nurse Unsworth to visit the Schools periodically, and examine the heads of such Children as are pointed out to her by the Teachers, and give any child found to be suffering from pediculosis in the hair, the printed instructions for treatment of this condition drawn up by me in 1909.

These instructions are given to the Parents of any children with dirty heads who are present at the Inspection, or sent to the Parents if not present. Nurse Unsworth has visited the homes of most of the Children who have been found to have

their hair infested with "nits," and urged upon the Parents the necessity of attention to and treatment of this condition. I am glad to say that she has had very little difficulty with the Parents, and that her visits have not been resented by them as I feared.

The Nurse has reported to me periodically the result of these visits, and in by far the large majority of cases the Parents are taking active steps to clean the hair, but in the few instances of obstinate neglect, if continued, I shall recommend you to exclude these children from School, and require the presence of the parent before your School Attendance Committee to give an explanation why the child should not be rendered fit to attend School.

If it would not interfere with the School work, I would recommend that the hair of all the Girls in the Elementary Schools be examined from time to time, and I think this could be managed by the Nurse with the willing co-operation of the Teachers.

As the Chief Medical Officer of the Board of Education remarks in his Report for 1911, "Uncleanliness of person in School Children constitutes a seriously adverse commentary on their training and education. It is impossible to consider any system of education as adequate which does not insure, as an early result, implanting in the child feelings of self-respect. In proportion as this fails to be effected in the home does it become necessary for the training to be given in the school."

**HEIGHT AND WEIGHT.**—Each child was measured and weighed in his indoor clothes, but without boots, shoes or clogs.



The results are given in Tables D, E and F for Infants, Leavers, and Specials respectively, the average Height and Weight of Children of the same age, and of the same sex in each School, and the average Height and Weight of all the Boys or Girls Inspected are here noted, and the average Height and Weight determined some years ago by the Anthropometrical Committee of the British Association is given for comparison with the Heights and Weights of the Children of Chorley.

The results of the weighing and measuring the height of the Children are much the same as those obtained in the previous years. The Heights and Weights of the Infants are slightly below the average throughout the country, whilst the Height and Weight of the Leavers are very markedly under the average.

In the case of Leavers, the average Height and Weight of Boys between 12 and 13, were 1.9 inches and 5 lbs. less than the standard, and of Boys between 13 and 14, 2.1 inches and 7.3 lbs. respectively. The same state occurs amongst the Girl Leavers, the Height and Weight of Girls between 12 and 13, being 1.6 inches and 5.4 lbs., and the Girls between 13 and 14, 3.4 inches, and 10.4 lbs. below the standard.

The Height and Weight of the Girls Inspected between 13 and 14 years of age has been unusually low in 1912.

I give in the following Table the average Heights and Weights of the Infants and Leavers at the various ages for each of the years since the Inspection of School Children was instituted, and compare them with the averages at the same ages given by the Anthropometrical Committee of the British Association.

You may notice that the Boy and Girl Leavers between 13 and 14 years of age in Chorley, measured and weighed somewhat less than the average Height and Weight throughout the Country of Boys and Girls between the ages of 12 and 13, that is one year younger.



# "ENTRANTS" BOYS.

# "LEAVERS" BOYS.

Year.	3 Years.			4 Years.			5 Years.			6 Years.			12 Years.			13 Years.		
	Height. ft. ins.	Weight st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.	
1908	2 11.6	2 4.6		3 2.0	2 7.4		3 3.4	2 10.0		3 5.6	3 0.4		4 5.9	5 0.1		4 6.8	5 4.4	
1909	2 11.9	2 5.7		3 2.1	2 7.8		3 3.9	2 11.3		3 6.2	3 0.9		4 5.8	5 0.3		4 7.6	5 8.0	
1910	3 0.6	2 6.1		3 2.4	2 8.6		3 4.1	3 11.5		3 7.1	3 2.6		4 6.2	5 2.2		4 6.5	5 2.2	
1911	2 11.9	2 4.4		3 2.3	2 8.1		3 3.7	2 10.6		3 6.0	3 1.5		4 5.6	4 13.5		4 6.4	5 2.6	
1912	2 11.9	2 4.5		3 2.3	2 8.5		3 4.1	2 11.8		3 6.2	3 0.9		4 5.0	5 1.7		4 6.8	5 5.9	
Average British Associates							3 5.0	2 11.9		3 8.0	3 2.4		4 6.9	5 6.7		4 8.9	5 12.6	

# "ENTRANTS" GIRLS.

# "LEAVERS" GIRLS.

Year.	3 Years.			4 Years.			5 Years.			6 Years.			12 Years.			13 Years.		
	Height. ft. ins.	Weight st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.		Height. ft. ins.	Weight. st. lbs.	
1908	2 11.3	2 3.8		3 1.6	2 7.5		3 4.3	2 10.9		3 5.5	2 13.0		4 6.6	5 3.3		4 7.6	5 9.3	
1909	3 0.1	2 4.5		3 2.0	2 7.3		3 3.7	2 11.2		3 6.6	3 0.0		4 6.1	5 0.5		4 7.4	5 6.7	
1910	2 11.5	2 4.8		3 2.1	2 7.7		3 4.0	2 10.2		3 6.0	2 13.7		4 6.1	5 1.4		4 7.7	5 5.2	
1911	2 11.0	2 3.6		3 2.1	2 7.6		3 3.4	2 8.8		3 5.8	2 13.9		4 6.1	5 0.2		4 8.2	5 9.2	
1912	2 11.4	2 4.6		3 1.9	2 8.4		3 3.7	2 10.1		3 5.9	2 12.8		4 6.0	5 1.0		4 6.3	5 4.8	
Average British Associates							3 4.5	2 11.2		3 6.8	2 13.7		4 7.6	5 6.4		4 9.7	6 3.2	

NUTRITION.—In estimating the character of a child's nutrition, not only are the relative proportions between height and weight noted, but also other factors are taken into consideration, such as the general appearance of the child, the sufficiency of fat, the hardness or flabbiness of the muscles, and the fresh coloured or anæmic countenance.

A Child may be relatively below the average of other Children of the same age in Height and Weight, and yet be well nourished, and on the other hand a very tall, overgrown Child may be ill-nourished.

The same classification has been adopted here, as in my previous Reports, viz, into three classes, Good, Fair, and Poor.

As I have previously remarked this classification is somewhat vague and incomplete, but it is all that is possible in the present method of examination in School and amongst other Children and without undressing the Child, and it is possible that too much weight has been given to the smallness of a large number of the Children inspected, and that even a considerable number might have been classified as 'Good' that have been included in the 'Fair' Class. As it is amongst the Infants 53 per cent. of the Children were placed in the 'Good' Class, 46.6 in the 'Fair' Class, and only four (4) Infants or .6 per cent. were classified as 'Poor.'

Of the Leavers 51.7 per cent. were in the 'Good' Class, 43.6 in the 'Fair,' and 4.7 per cent. in the 'Poor' Class, a much larger percentage than I have hitherto recorded, seven (7) of the Boys or 2.7 per cent., and nineteen (19) Girls of 6.6 per cent. having been relegated to this class. Thirteen (13) of these Children were attending one School. Of those "Specially" examined, 34 per cent. were classified as "Good," 56.6 as "Fair," and 9.3 as "Poor."



I hope to keep this latter class under observation, and to be able to report an improvement at a future date.

In my Report to your Authority last year, I gave my opinion as to the causes of the failure of nutrition amongst certain Children in Chorley, and I see no reason to alter these views. I would like to emphasise the necessity of Children sleeping in well ventilated and not overcrowded bedrooms, instead of the close unventilated rooms that are so commonly preferred, the longer time for sleep necessary for the growth and well-being of young children, and the consequent earlier hours of going to bed, and the regular meals of plain, wholesome food, which I think are in the power of most of the parents in Chorley to give.

Another cause, and a very potent one, for the failure in nutrition of the Children in Chorley and other manufacturing towns, is the employment of pregnant women in the factories, and the too early return to work of women who have recently borne Children. It would, I am quite sure, tend greatly to the improvement in nutrition of the children if no woman was allowed to work in a factory for several months both before and after the birth of her child. When a child is, for economic reasons, deprived of its natural food, for which there has never been found an adequate substitute, and is taken out to nurse in all weathers and early in the morning, is it to be wondered that the nutrition of our young people is below that of the country at large?

Except in cases where there is a hereditary tendency to disease, a Child judiciously and regularly fed, spending a good portion of the time when out of School at play in the open-air, and going to bed early in a well-ventilated room, will be sure to grow into a healthy, well-developed man or woman, well fitted for the battle of life.

Chorley is unusually well supplied with playgrounds for Children, and the more these are used, and the less that entertainments in crowded halls are frequented by the Children, the better it will be for their health and growth.

EXTERNAL EYE DISEASES.—Of the whole number of Children examined, one hundred and thirteen (113) or about 8 per cent. were found to be suffering from one or other form of External Eye Disease. Excluding the "Special," a large proportion of whom were inspected on account of defective vision, caused or accompanied by External Eye Disease, the percentage of Children, Infants, and Leavers suffering from External Eye Disease was 5.7. In the case of Infants 4.8 per cent., and of Leavers 7.1 per cent., whilst 26.6 per cent. of the Specials were subjects of some External Eye Disease.

By far the most common disease was Squint, and in some cases two or more Children of the same parents were suffering from this condition. Most of the Children in whom Squint was noticed were also noted amongst the cases of Defective Vision, and recommendation to the Parent to take such Children to their Medical Attendant was sent by your Inspecting Officer.

Next to Squint the most frequent Eye Disease was Blepharitis (Inflammation of the Eyelids), and there were also several cases of Keratitis, Conjunctivitis, Nebula, etc., etc.

Some of these Children were attending School when manifestly unfit to do so, and were accordingly sent home with directions to secure treatment of the Eye Disease.

VISION.—The Vision of the Leavers and the Specials was tested by the reading of Snellen's Types, so that in every case where there was found *prima facie* evidence of defective



vision to any marked extent, the Parents might be informed and requested to take such Children to be thoroughly and carefully examined by their own Medical Attendant, with a view to providing spectacles or such treatment as would be appropriate.

In the Inspection of Infants only those Children who were over six years of age, and could read, were tested as to Eyesight, and as there were very few such cases, I give no statistics in this report, and merely state that where defective Vision was discovered, the Parents of such Children were informed.

Some defect in Eyesight, in a majority of cases only slight, was found in forty-seven (47) per cent of the eyes of the Leavers, viz, 22.7 per cent. in the right eyes, and 24.3 per cent. in left eyes.

The percentage of eyes of Leavers with distinct or very marked defect was 22.9, and the number of Leavers with marked defect in BOTH Eyes was one hundred and one (101), or 18.3 per cent. of the total number of Leavers examined.

In the case of the Specials, a great majority of whom were selected for Inspection on account of suspected defective Vision, 77.7 per cent. of the eyes showed some defect, viz, 38 per cent. in the right eyes, and 39.7 per cent. in left eyes. The percentage of eyes of these Special Children with distinct or very marked defect was 58, and the number of Specials with marked defect in both eyes was seventy-nine (79), of 52.6 per cent.

I give the results for Boys and Girls separately in the next Table.

## LEAVERS.

	BOYS.	GIRLS.	BOYS & GIRLS
Normal Vision.....	56·7 per cent.	49·7 per cent.	53·0 per cent.
Some Defect.....	43·3 „	50·3 „	47·0 „
Very slight, 6/9 ...	25·1 „	23·3 „	24·1 „
Distinct, 6/12 .....	4·4 „	8·0 „	6·3 „
Very marked, 6/18 and above.....	13·8 „	19·0 „	16·6 „
Marked in both eyes	14·4 „	21·9 „	18·3 „

## SPECIALS.

	BOYS.	GIRLS.	BOYS & GIRLS
Normal Vision.....	20·3 per cent.	24·1 per cent.	22·3 per cent.
Some defect .....	79·7 „	75·9 „	77·7 „
Very slight, 6/9 ...	23·2 „	16·6 „	19·7 „
Distinct, 6/12 .....	7·2 „	8·0 „	7·6 „
Very marked, 6/18 and above.....	49·3 „	51·3 „	50·3 „
Marked in both eyes	52·2 „	53·1 „	52·6 „

The defective Vision was found to be slightly more frequent in the Left Eye than in the Right, both in Boys and Girls, whereas in my Report for 1911 I stated that the defects in the case of Girls was more frequent in the Right Eye.

The graver defects in Vision were found to be considerably more frequent amongst the Girls than amongst the Boys, especially in the case of the Leavers, and the relative number of Girls with markedly defective Vision in both eyes was over fifty per cent. more than that of Boys.

This preponderance of defective Vision in Girls has been found in Lancashire generally.



The frequency of Visual defects varied in the different Schools, and I give in the next Table the number of eyes examined in each School, and the number found to possess normal and the varying degrees of defective Vision.

## Boys.

Name of School.	No. of eyes examined.	Normal Vision.	6/9	6/12	6/18	6/24	6/36	6/60 8 above	Percentage of eyes with distinct visual defect
Parish .....	46	8	29	2	2	1	1	3	19
St. George's ...	132	76	35	3	9	5	1	3	16
St. Peter's.....	58	42	5	2	1	3	2	3	19
St. James' ...	74	46	17	7	—	3	1	—	15
St. Mary's.....	32	19	5	—	1	4	2	1	25
Sacred Heart...	60	40	7	1	4	5	3	—	22
Weldbank ...	24	10	8	3	2	—	—	1	25
Hollinshead St.	48	38	5	3	1	1	—	—	11
Wesleyan.....	52	19	21	2	8	—	—	2	23
Totals ...	526	298	132	23	28	22	10	13	18

## GIRLS.

Parish .....	58	18	18	—	2	9	9	2	38
St. George's ...	124	85	23	4	3	4	1	4	13
St. Peter's ...	56	40	7	3	2	2	—	2	16
St. James' ...	86	37	22	18	1	4	3	1	31
St. Mary's.....	52	20	13	6	3	9	1	—	36
Sacred Heart ..	60	26	10	5	6	9	3	1	40
Weldbank ...	36	13	12	2	1	6	2	—	30
Hollinshead St.	52	35	11	5	1	—	—	—	11
Wesleyan .....	52	12	18	3	6	9	2	2	42
Totals ...	576	286	134	46	25	52	21	12	27

The total number of Children to whose Parents notices of defective Vision were sent was two hundred and forty-seven (247), viz, Leavers one hundred and fifty-three (153), and Specials ninety-four (94), that is to say that 27.7 per cent. of the Leavers, and 62.6 per cent of the Specials had distinctly defective eyesight in one at least, and in the great majority of cases in both eyes.

In several cases, though one eye presented normal Vision the other was distinctly defective, and the Child was practically using the good eye solely, and did not know that the other eye was at all defective. I think this accounts in some measure for the refusal or neglect of some of the Parents to act upon the advice of your Assistant School Medical Officer to secure the careful examination and treatment by their own Medical Attendants.

But it appears to us necessary that properly adjusted spectacles should be provided in these cases, so that both eyes may be used equally, and no unnecessary strain and overwork be laid upon the eye which possesses normal, or nearly normal, Vision.

The result of the sending of these notices will be seen by you on a perusal of the next Table, in which I give in the case of each School the number of notices sent to the Parents, and the action taken or not taken by these Parents.

From this Table you will see that thirty-nine (39) Children, or 15.8 per cent of those referred to their Medical Attendant, have been taken to him for his advice, but have not been furnished with spectacles yet; that sixty-one (61), or 24.7 per cent have already got spectacles; that eighteen (18), or 7.3 per cent. of Parents have said they were too poor to buy spectacles; that ninety-one (91), or 36.8 per cent. of the Parents



have not taken any action whatever; that fifteen (15), or 6.0 per cent. of the Parents have refused to attend to the matter, and that twenty-three (23), or 9.3 per cent. of the Children have left School when the visit was paid by the Nurse.

SCHOOL.	Number of Notices issued.	Visited Doctor.	Secured Spectacles.	Pledged Poverty.	Neglected to take any action.	Refused to take any action.	Children left School.
Parish Leavers.....	17	2	3	1	6	—	5
„ Specials .....	12	1	3	4	3	1	—
St. George's Leavers .....	27	4	8	—	11	2	2
„ Specials .....	15	3	4	—	7	1	—
St. Peter's Leavers .....	12	2	2	—	4	—	4
„ Specials .....	5	2	1	—	2	—	—
St. James' Leavers .....	23	4	7	1	8	1	2
„ Specials .....	11	4	6	—	—	1	—
St. Mary's Leavers .....	15	1	4	1	7	1	1
„ Specials .....	5	4	—	—	1	—	—
Sacred Heart Leavers.....	22	3	6	3	6	—	4
„ Specials ...	13	1	4	—	5	2	1
Weldbank Leavers.....	11	—	2	—	8	—	1
„ Specials.....	14	2	6	2	3	1	—
Hollinshead St. Leavers...	6	2	1	—	2	—	1
„ Specials...No Specials presented at Inspection.							
Wesleyan Leavers .....	20	1	4	4	6	3	2
„ Specials .....	19	3	—	2	12	2	—
Totals—Leavers.....	153	19	37	10	58	7	22
„ Specials ...	94	20	24	8	33	8	1
Totals .....	247	39	61	18	91	15	23

Various reasons have been given by the Parents who have refused to follow the advice of the Inspecting Medical Officer, such as, “Children do not look well in glasses,” “I know

the eyes are wrong, but doctors can't cure them," etc., etc. In the great majority of cases the Nurse has paid two visits to the homes of these Children, and in all cases one visit has been paid.

I am glad to note that there has, however, been a marked improvement in the percentages of Children referred to their Medical Attendant who have been taken to him, and who have secured spectacles.

To show this I give below the comparative results of the recommendations made in 1911 and 1912.

	1911	1912
Number of Notices issued—	139	247
Number of Children provided with Spectacles .....	17 or 12·3 per cent.	61 or 24·7 per cent.
Number of Children consulted Medical Attendant .....	9 or 6·5 per cent.	39 or 15·8 per cent.
Number of Children for whom no action was taken .	71 or 51 per cent.	124 or 50·2 per cent.
Number of Children left School and no action taken .....	42 or 30·2 per cent.	23 or 9·3 per cent.

In 1911 in over 81 per cent. no action whatever was taken by the Parents in response to the notices sent by your Inspecting Medical Officer, whereas in 1912 this percentage has been reduced to 59·5 per cent.

I attribute this improvement chiefly to the employment by you of the School Nurse, who has, by her tact and zeal, persuaded many Parents to follow the advice given at the Inspections.



If you empower your School Medical Officers to have the Inspection Clinics, of which I shall treat later on in my Report, I propose to re-examine the eyes of those Children whose Parents have taken no action, and, if I find that they persist in the refusal or neglect to follow out the advice, I shall report them to your Authority, and shall recommend you to take action in the worst cases under Section 12 (1) of the Children's Act, 1908, especially where the Parents are quite able to afford the cost.

HEARING.—As regards the examination of the power of Hearing, I have the same remarks to make as in my previous Reports, viz, that it is impossible to correctly estimate a Child's hearing power in the School Inspection, amidst the noise, etc., of the other Children and their Parents. One of the Medical Inspectors has recently shown your School Medical Officers a method by which *prima facie* evidence of auditory defect may be ascertained, and we propose to adopt this method, and to re-examine at the Inspection Clinic all Children who appear at the ordinary Inspection somewhat dull of hearing. Several cases of suspected Deafness were brought before us at the Inspection of Special Cases, and your Assistant School Medical Officer found seven Children who were dull of hearing, and six who were markedly deaf. The necessary cases were referred to the Parents to take the advice of their Medical Attendant.

NOSE AND THROAT.—The presence of Enlarged Tonsils (slight or marked), of Enlarged Glands in the Neck (slight or marked), and the probable presence of Adenoids, were inserted in the Schedules of those Children in whom such conditions were found.

The results are given in Tables A, B and C (Infants, Leavers, and Specials respectively), and in those cases, which

were, in the opinion of your Inspecting Officer, requiring treatment, notice was sent to the Parents to consult their Medical Attendant.

These conditions have been noticed much less in the recent Inspections than they used to be, and in several cases the diseased growths had been removed prior to Inspection.

Compared with the previous year, the following are the percentages of Children in whom these morbid conditions were found.

#### INFANTS.

	1911	1912
Slightly Enlarged Tonsils ...	2.9 per cent.	1.1 per cent.
Markedly Enlarged Tonsils ...	1.4 „ „	0.4 „ „
Slightly Enlarged Glands ...	7.0 „ „	2.9 „ „
Markedly Enlarged Glands ...	2.4 „ „	0.6 „ „
Adenoids ... ..	2.7 „ „	2.4 „ „

#### LEAVERS.

Slightly Enlarged Tonsils ...	6.3 per cent.	3.5 per cent.
Markedly Enlarged Tonsils ...	2.4 „ „	0.8 „ „
Slightly Enlarged Glands ...	3.6 „ „	1.0 „ „
Markedly Enlarged Glands ...	0.2 „ „	0.0 „ „
Adenoids ... ..	0.2 „ „	0.2 „ „

#### SPECIALS.

Slightly Enlarged Tonsils ...	2.6 per cent.
Markedly Enlarged Tonsils ...	2.0 „ „
Slightly Enlarged Glands ...	1.3 „ „
Markedly Enlarged Glands ...	0.6 „ „
Adenoids ... ..	2.0 „ „

**TEETH.**—As regards the condition and soundness of the Teeth, the Children inspected have been divided into three classes.



Good.—Where all the Teeth were sound and free from disease, or only one tooth was carious.

Fair.—Where more than one tooth was diseased, but not more than four.

Bad.—Where more than four teeth were manifestly carious.

The inspection of the Teeth was a brief one, and made without the aid of dental mirrors, etc., and a prolonged and careful examination of each tooth, such as a dentist would make. Consequently the results stated are only approximate, and do not fully represent the amount of caries present. Had a thorough dental examination been carried out, and each tooth carefully examined, there would have been a large number of cases of incipient caries of teeth detected, and the proportion of Children classified as "Fair" and "Bad" in reference to teeth would have been considerably larger.

I give below the number of children in each class in the Infants, Leavers, and Specials respectively.

			INFANTS.		
			Good.	Fair.	Bad.
			per cent.	per cent.	per cent.
Boys	...	...	262 or 73·6	66 or 18·5	28 or 7·9
Girls	...	...	265 or 73·4	71 or 19·7	25 or 6·9
Total Infants	...	...	527 or 73·5	137 or 19·1	53 or 7·4
			LEAVERS.		
			per cent.	per cent.	per cent.
Boys	...	...	137 or 52·1	104 or 39·5	22 or 8·4
Girls	...	...	189 or 65·6	82 or 28·5	17 or 5·9
Total Leavers	...	...	326 or 59·2	186 or 33·7	39 or 7·1

			SPECIALS.		
			Good.	Fair.	Bad.
			per cent.	per cent.	per cent.
Boys	...	...	29 or 42·0	27 or 39·1	13 or 18·9
Girls	...	...	34 or 42·0	35 or 43·2	12 or 14·8
Total Specials	...	...	63 or 42·0	62 or 41·3	25 or 16·6

The condition of the Teeth of the Leavers was found to be, as usual, much worse than that of the Entrants. I am not able to report any distinct improvement, as the percentages of Leavers in each class have varied very little since the Inspections were instituted.

Considering the various local and general diseases that have their origin in bad teeth, it is greatly to be regretted that so little care is taken of the teeth both temporary and permanent.

I would like to again recommend to your notice the practice of "Tooth Brush Drill," which has been adopted by several Education Authorities. One of the factors in causing decay of the Teeth is the retention in the interstices between the Teeth of particles of food, especially of carbohydrates, which form a suitable breeding ground for bacteria. If the Children were taught to brush their teeth at least once a day, and to wash out the mouth after every meal, a marked improvement would be seen in the character of the Teeth, and the general health of the Children would be much improved. I think the Nurse could conduct this drill with great advantage if you gave her permission to do so, and the question of the provision or sale by instalments of Tooth Brushes might be considered by you. At any rate, a beginning might be made in one School so that the effect might be noticed.

Hitherto your School Medical Officers have not systematically brought the condition of the Teeth in the Children



inspected to the notice of their Parents, but only occasionally have the Parents, when present, been shown the amount of decay in their Children's Teeth.

I think it would be a move in the right direction if you were to direct us to draw up some short and simple Instructions, to be printed and distributed to the Parents whose Children exhibited distinct Dental Caries.

These Instructions might contain advice as to the food most suitable for the prevention of the decay of Teeth, and the necessity of keeping the Mouth and Teeth clean and free from particles of food in the interstices between the Teeth, and might point out the ill effects upon the health of Children resulting from decayed and dirty teeth. An early visit to a dentist would often result in greater comfort to and better health of a Child.

In twenty-nine (29) Education Areas, Dental Clinics are being held, the cost of which is being paid out of the rates, and in a few other Areas Voluntary Dental Clinics have been adopted, the cost of which has been chiefly met by voluntary subscriptions, and to a minor extent by small fees charged to the Parents of the Children who are treated thereat.

OTHER DISEASES.—You will notice that in Tables A, B and C, in addition to the statistics about the Diseases and Defects on which I have already commented, there were several other Diseases, Deformities, etc., noted as being present in some of the Children at the time of Inspection.

These may shortly be summarized in the following Table.

			INFANTS.	LEAVERS.	SPECIALS.
Defects of Speech	...	...	7	3	2
Defective Mental Condition	...	...	4	—	5
Diseases of Heart	...	...	1	4	—
„ Lung...	...	...	2	—	1
„ Nervous System	...	...	2	3	—
Tuberculosis	...	...	3	2	1
Rickets	...	...	6	—	1
Deformities	...	...	6	3	6
Infectious or Contagious Disease			9	—	—
Other Diseases	...	...	16	31	5
Totals	...	...	56	46	21

You may notice that an unusual number of cases of “Other Diseases” have been noted amongst the Leavers. Twenty-two (22) Girls were found to be suffering from Goitre to a greater or lesser extent. The remainder of the cases of “Other Diseases” were mostly of a trivial nature.

INFECTIOUS DISEASES.—The Head Teachers have willingly responded to your request to send me notification of all cases of Infectious Diseases in Children attending the Elementary Schools. By this means the existence or prevalence of other Infectious Diseases, besides those which are compulsorily notifiable under the Notification of Diseases Act, come to my knowledge, viz, such diseases as Measles, Whooping Cough, Mumps, Chicken-pox, Ringworm, etc., etc.

During the year, six hundred and ten (610) cases of Infectious Diseases in Elementary Schools were notified to me by the Head Teachers, and it may be interesting to note the incidence of the respective Infectious or Contagious Diseases in each of the Schools.



	Scarlet Fever	Measles,	D'theria	Whooping Cough	Chicken- pox	Mumps	Ring- worm	Totals
Parish ... ..	10	—	—	40	—	5	—	55
St. George's ...	7	4	—	32	—	97	9	149
St. Peter's ...	2	10	—	1	—	40	2	55
St. James' ...	19	1	1	53	2	55	1	132
All Saints ...	2	—	—	30	—	—	—	32
St. Mark's ...	—	2	—	5	4	—	—	11
St. Mary's ...	6	3	—	15	1	31	10	66
Sacred Heart...	9	—	1	8	2	3	—	23
Weldbank ...	17	—	—	1	—	1	—	19
Hollinshead St.	—	—	—	16	7	16	—	39
Wesleyan ...	4	4	1	18	—	2	—	29
Totals... ..	76	24	3	219	16	250	22	610

The epidemic of Whooping Cough occurred in the early part of the year, whilst that of Mumps was in the last three months, and in the case of two or three Schools rendered the average attendance of Infants very much below the average.

Where there have been several successive cases of Scarlet Fever in any School, I have caused that School to be fumigated, and requested that desks, etc., should be washed with a disinfecting solution.

VACCINATION.—The Inspections reveal that there is an increasing neglect of Vaccination, which I very much regret. Of the whole number of Children examined over ten per cent. have not been vaccinated, or, if vaccinated, show no marks of the operation.

The percentage of Children entirely unprotected from an attack of Smallpox is highest amongst the Infants, and lowest amongst the Leavers, as you will see from the following Table,

			Never Vaccinated per cent.	Shewing no Marks per cent.	Total Unprotected per cent.
Infants	...	...	65 or 9·0	55 or 7·7	120 or 16·7
Specials	...	...	5 or 3·3	4 or 2·6	9 or 6·0
Leavers	...	...	20 or 3·6	8 or 1·4	28 or 5·0
Totals	...	...	90 or 6·3	67 or 4·7	147 or 10·4

**SUNDAY SCHOOL AND BAND OF HOPE.**—Though not strictly subjects to be entered in a Report of Medical Inspection of School Children, yet it is not wholly irrelevant to note the attendance of the Children under your care for Secular instruction upon other means of giving religious and moral instruction, which have a considerable effect upon the physical welfare of these future men and women by inculcating habits of temperance and a sense of moral responsibility. I am sure that a large number of the present inhabitants of the town feel they owe a debt of gratitude to the Sunday School Teachers and Temperance Workers who have impressed them with a sense of duty when they, themselves, were boys and girls.

I have not this year entered in Tables A, B and C the number of Children attending these schools and classes, but I may tell you that nine hundred and eighty (980), or about 70 per cent. of the whole number of Children are also scholars at the Sunday School, the highest proportion being amongst the Leavers, viz, 95 per cent., and the lowest amongst the Infants, viz, 47 per cent.

The Inspection of School Children is only a preliminary to an end, viz, the improvement in the physique of these Children, and the remedying of any defect or disability discovered at the Inspection.

By your appointment of the School Nurse, you have rendered the practice of "following up" defective Children



practicable, and already much good has been done by the Nurse visiting the homes of these Children, and impressing upon the Parents the necessity of obtaining the medical advice recommended by your Assistant School Medical Officer at the time of Inspection. The Nurse has to report to me all cases where, after two visits to the home of defective Children, she finds that no steps have been taken to secure medical advice, and one of your Medical Officers will then visit the home himself, and, if upon further enquiry, no action has been taken, the case will be reported to you, and it will rest with your Committee to obtain an explanation why nothing has been done, and to proceed under the Chi'dren's Act, if thought advisable.

I think that the time has now arrived when the establishment of an Inspection Clinic would be of the greatest advantage.

As I have remarked in my previous Reports, the physical examination of the Children can not be as complete and thorough as is desirable, in a schoolroom or classroom where there are a number of other Children and their Parents, and where the noise in and outside the room renders certain examinations difficult.

If you could provide the School Medical Officers with two rooms, well lighted and ventilated, one to serve as waiting room, and the other as examination room, valuable results would, I am sure, be obtained. I am not proposing that any medical treatment should be carried out at these Inspection Clinics, but that a more thorough examination of certain Children should be made, and the cases of defective Children should be referred to their own Medical Attendants for advice and treatment.

These Clinics should be held at fixed intervals, say once a week, or once a fortnight, upon days and at hours known by

the Head Teachers and School Attendance Officer, and attended by one of your School Medical Officers and the Nurse.

The following are the cases which I think ought to be examined at these Inspection Clinics.

1. All Children who, at the School Inspection, appear to require a more thorough examination as regards Hearing, Sight, Heart or Lung Disease, etc., etc., than is possible in the Schools.

2. Any Children who are not attending School through reported illness, and who have no Medical Attendant and consequent Certificate of the cause for absence from School.

3. Any Children who, in the judgment of the Head Teacher, are suffering from any physical or mental defect, or who from any skin disease, or otherwise are not fit to mix with other Children in School.

4. All Children whose parents have been recommended to secure medical advice, and who have not done so, in order to ascertain the present condition of such Children.

I recommend this suggestion to your very careful consideration, and I may here state that your Authority have been given to understand that the Board of Education allow a grant for the expenses of such Clinic.

The Scheme will have to be submitted to the Board of Education for their approval prior to making a claim for the grant from the Board.



I cannot conclude my Report without thanking the Head Teachers for their great assistance in the work of Medical Inspection, and their unvarying courtesy to your Medical Officers.

I would like also to bear my testimony to the painstaking and judicious work in "following up" cases done by the Nurse, and I feel now that there is a definite probability of doing good work amongst the defective, diseased, or neglected Children attending your Elementary Schools.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

JAMES A. HARRIS.



Table A. Statistics of Inspection of Infants.

Name of School	Sex	Number Examined	Regularity of Attendance			Parasites, etc.	Percent Tuberculous in Family	Disease previous to inspection.										Defects in Clothing		Defects in Footgear		Nutrition			Defects in Condition of Head or Body	Pellagra	Teeth			Enlarged Tonsils		Enlarged Glands		Abscess	Enlarged Eye	Speech	Mental Condition	Heart & Circulation	Lungs	Nervous Disease	Tuberculous	Rickets	Deformities	Infections or Communicable Disease	Other Diseases or Defects																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
			Regular	Fairly Regular	Irregular			Measles	Whooping Cough	Chicken Pox	Scarlet Fever	Diphtheria	Typhoid	Other Diseases	Not Vaccinated	No Vaccination Marks	Fair	Bad	Fair	Bad	Good	Fair	Poor	Good			Fair	Bad	Slight	M/V/U	Slight	M/V/U																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
Parish ...	B'ys	34	28	4	2	23	3	26	15	1	2	3	5	12	2	3	18	16		1			26	6	2					1	1	4	1																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								

















Table D. Average Heights and Weights—"Entrants."

Name of School	Sex.	Total Number Examined	3 Years				4 Years				5 Years				6 Years				Above 6 Years Number Examined	Height			Weight													
			Number Examined	Height		Weight	Number Examined	Height		Weight	Number Examined	Height		Weight	Number Examined	Height		Weight		Above Normal	Normal	Below Normal	Above Normal	Normal	Below Normal											
				ft.	ins.			st.	lbs.			ft.	ins.			st.	lbs.									ft.	ins.	st.	lbs.	ft.	ins.	st.	lbs.			
Parish ...	B'ys	34	12	2	10.8	2	4	2	12	3	2	1	2	7	8	3	4	9	3	0	6	2	3	7	5	3	5	0	—	5	18	11	9	10	15	
St. George's ...	"	69	—	—	—	—	—	—	40	3	1	8	2	9	2	21	3	3	2	2	9	6	6	3	6	0	3	0	8	2	8	32	29	18	21	30
St. Peter's...	"	21	—	—	—	—	—	—	—	—	—	—	—	—	18	3	4	2	2	12	3	2	3	6	2	3	0	5	1	4	8	9	6	8	7	
St. James'	"	30	—	—	—	—	—	—	7	3	2	4	2	9	9	19	3	4	2	2	12	9	3	3	7	4	3	3	7	1	7	14	9	15	7	8
St. Mark's...	"	8	4	2	11.8	2	5	5	—	—	—	—	—	—	2	3	3	3	2	10	0	1	3	4	0	3	3	5	1	1	5	2	3	4	1	
All Saints	"	27	8	3	0	3	2	4	8	3	1	9	2	8	8	8	3	4	7	2	11	1	—	—	—	—	—	3	3	4	16	7	9	6	12	
St. Mary's	"	41	3	3	1	0	2	6	13	3	2	1	2	7	8	19	3	3	2	2	12	1	4	3	5	9	2	13	4	2	17	22	8	15	18	
Sacred Heart	"	37	—	—	—	—	—	—	14	3	2	8	2	9	3	17	3	4	3	2	12	2	4	3	5	1	2	13	1	11	6	20	15	10	12	
Weldbank	"	30	2	3	1	2	2	5	16	3	1	5	2	7	7	12	3	3	3	2	11	3	—	—	—	—	—	—	3	13	14	6	9	15		
Hollinshead St.	"	32	7	2	11	9	2	3	16	3	2	3	2	8	0	7	3	5	9	2	11	6	2	3	7	8	2	12	8	6	20	6	10	8	14	
Wesleyan ...	"	27	8	3	0	7	2	6	11	3	1	2	2	7	0	7	3	4	2	2	12	4	1	3	6	0	3	0	0	—	6	13	8	8	7	12
Totals & Averages...	"	356	44	2	11	9	2	4	137	3	2	3	2	8	5	138	3	4	1	2	11	8	25	3	6	2	3	0	9	12	57	162	137	107	105	144
Average, British Association, etc	"															3	5	0	2	11	9		3	8	0	3	2	4								
Parish ...	G'ls.	28	12	2	11	3	2	5	11	3	1	8	2	8	0	5	3	3	8	2	10	2	—	—	—	—	—	—	—	9	12	7	10	8	10	
St. George's	"	61	—	—	—	—	—	—	28	3	1	6	2	8	1	19	3	2	6	2	8	0	8	3	6	6	3	0	4	6	10	28	23	16	14	31
St. Peter's...	"	26	—	—	—	—	—	—	—	—	—	—	—	—	23	3	4	2	2	11	2	2	3	7	2	3	2	0	1	6	9	11	9	7	10	
St. James'	"	46	—	—	—	—	—	—	12	3	2	3	2	11	1	27	3	3	9	2	10	7	3	3	4	4	2	10	4	7	21	18	18	16	12	
St. Mark's...	"	11	5	2	10	8	2	7	3	3	1	2	2	10	8	1	3	5	0	3	0	0	1	3	8	5	3	3	0	1	2	7	2	7	4	—
All Saints...	"	33	14	2	11	0	2	2	8	3	0	5	2	8	1	9	3	3	5	2	9	0	1	3	7	5	3	2	5	1	3	23	7	8	10	15
St. Mary's	"	38	4	3	0	6	2	4	14	3	2	2	2	7	4	17	3	3	2	2	9	4	3	3	4	7	2	10	3	9	15	14	6	13	19	
Sacred Heart	"	38	—	—	—	—	—	—	15	3	3	0	2	10	3	18	3	4	0	2	12	4	4	3	4	2	2	10	9	1	11	14	13	18	11	9
Weldbank	"	20	2	3	2	5	2	6	11	3	1	7	2	6	0	6	3	3	7	2	9	5	1	3	8	7	3	2	0	—	5	9	6	4	7	9
Hollinshead St.	"	32	7	2	11	1	2	2	9	3	2	2	2	6	6	15	3	4	0	2	8	7	1	3	8	0	3	0	0	—	5	19	8	7	10	15
Wesleyan ...	"	28	9	2	11	5	2	5	11	3	2	0	2	8	0	5	3	5	2	2	10	5	3	3	4	7	2	9	3	—	12	13	3	12	5	11
Totals & Averages..	"	361	53	2	11	4	2	4	122	3	1	9	2	8	4	145	3	3	7	2	10	1	27	3	5	9	2	12	8	14	79	170	112	115	105	141
Average, British Association, etc	"															3	4	5	2	11	2		3	6	9	2	13	7								





**Table E. Average Heights and Weights—"Leavers."**

Name of School	Sex.	Total Number Examined	Number Examined	12 Years				Number Examined	13 Years				Above 13 Years Number Examined	Height			Weight		
				Height		Weight			Height		Weight			Above Normal	Normal	Below Normal	Above Normal	Normal	Below Normal
				ft.	ins.	st.	lbs.		ft.	ins.	st.	lbs.							
Parish ...	B'ys	23	23	4	6·7	5	6·9	—	—	—	—	—	8	6	9	11	1	11	
St. George's ...	"	66	57	4	4·9	4	13·7	9	4	6·9	5	10·6	—	8	17	41	12	11	43
St. Peter's ...	"	29	29	4	5·5	5	1·9	—	—	—	—	—	3	8	18	6	3	20	
St. James' ...	"	37	35	4	4·6	4	12·7	2	4	8·7	5	4·5	—	5	4	28	5	5	27
St. Mary's ...	"	16	14	4	7·1	5	4·0	2	4	5·0	4	13·5	—	6	3	7	5	4	7
Sacred Heart ...	"	30	27	4	6·3	5	1·8	3	4	6·2	5	0·2	—	6	6	18	2	6	22
Weldbank ...	"	12	12	4	5·5	5	3·7	—	—	—	—	—	3	1	8	4	2	6	
Hollinshead St. ...	"	24	23	4	5·4	5	4·8	1	4	5·0	5	4·0	—	4	4	16	7	4	13
Wesleyan ...	"	26	24	4	5·5	4	13·7	2	4	7·8	5	1·5	—	1	7	18	2	6	18
Totals & Averages...	"	263	244	4	5·0	5	1·7	19	4	6·8	5	5·9	—	44	56	163	54	42	167
Average, British Association,	"			4	6·9	5	6·7	4	8·9	5	12·6	—							
Parish ...	G'ls.	29	26	4	5·7	5	0·2	3	4	5·4	5	1·0	—	7	3	19	8	—	21
St. George's ...	"	62	49	4	5·8	5	1·6	13	4	6·4	5	7·7	—	9	21	32	16	7	39
St. Peter's ...	"	28	25	4	6·2	5	4·4	3	4	7·3	5	5·8	—	7	4	17	11	1	16
St. James' ...	"	43	31	4	5·2	4	12·4	12	4	5·6	4	12·6	—	5	7	31	8	6	29
St. Mary's ...	"	26	22	4	5·7	5	1·0	3	4	6·9	5	6·8	1	7	4	15	7	2	17
Sacred Heart ...	"	30	26	4	6·2	5	2·0	4	4	8·8	5	13·5	—	8	5	17	8	—	22
Weldbank ...	"	18	16	4	5·0	4	13·2	2	4	3·5	5	0·5	—	4	3	11	3	5	10
Hollinshead St. ...	"	26	26	4	7·4	5	5·4	—	—	—	—	—	—	8	8	10	7	7	12
Wesleyan ...	"	26	25	4	6·3	5	1·5	1	4	8·2	6	2·0	—	7	6	13	8	6	12
Totals & Averages..	"	288	246	4	6·0	5	1·0	41	4	6·3	5	4·8	1	62	61	165	76	34	178
Average, British Association,	"			4	7·6	5	6·4	4	9·7	6	3·2								



Table I. Average Heights and Weights

1870



Table F. Average Heights and Weights—"Specials."

Name of School	Sex.	Total Number Examined	6 Years				7 Years				8 Years				9 Years				10 Years				11 Years				Height			Weight																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
			Number Examined	Height		Weight	Number Examined	Height		Weight	Number Examined	Height		Weight	Number Examined	Height		Weight	Number Examined	Height		Weight	Number Examined	Height		Weight	Above Normal	Normal	Below Normal	Above Normal	Normal	Below Normal																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
				ft.	ins.			ft.	ins.			ft.	ins.			ft.	ins.			ft.	ins.			ft.	ins.								ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.	ft.	ins.









