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County Borough of Eastbourne.



Local Education Authority.

Medical Officer's Annual Report

for 1923.

W. G. WILLOUGHBY, M.D., Lond., M.R.C.S., D.P.H., School Medical Officer.

E. H. B. COGHILL, L.R.C.P., L.R.C.S., L.F.P.S.,

Assistant School Medical Officer,

(Inspecting Officer.)

EASTBOURNE:
V. V. SUMFIELD, Printer, Station Street.



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County Borough of Eastbourne

To the Chairman and Members of the Education Committee

LADIES AND GENTLEMEN,

I beg to submit herewith the Fourteenth Annual Report on the work of the School Medical Department.

The Report for 1923 shows an increased amount of work done. More children were inspected and there was more attention to the remedying of the defects found.

Fortunately the Department was in practically full order before the pressure for "economy" became so great, and the Board has allowed us to deal with almost every case, and where, as in the case of a Deformity Clinic, we have not been able to start our own, we have received the valuable voluntary help referred to in the body of the Report.

Practically every form of defect has shown a tendency to diminish, the only serious exception being defective vision. The causes of this are being specially studied, the aim of the Department being to prevent rather than to have to try to remedy defects.

An important variation during 1923 has been the introduction of charges to parents in all the branches of treatment where it was felt that they could and should be made. It is too early to report on the effect. It is easy to see that the good work of the Clinics might be quite spoiled if the Board of Education had not allowed us to have a latitude in this respect and to gradually follow the spirit rather than the exact law of the Regulations.

The Census figures of 1921 being now available, I have arranged a Table for the Report showing the numbers of children attending and not attending Educational Institutions.

The Inspections have been made by Dr. Coghill, with the aid of the Nursing Staff, and they have also had the work of the Clinics to carry out. Their work, as shown in the Report, speaks for itself as to its value.

I have to thank the Secretary's Department and the Head Teachers for their kind assistance in the work throughout the year. To Miss M. G. Beney I am indebted for the statistical and other work, especially in the preparation of this Report.

I beg to thank you, Ladies and Gentlemen, for your very kind consideration in connection with my duties.

I am, Ladies and Gentlemen,

Your obedient Servant,

W. G. WILLOUGHBY.

School Medical Officer.



SCHOOL STATISTICS.

Central Schools (4)		Accommodation.	Average No. on roll. 808	Average attendance.	Percentage. 94.8
Junior Schools (13)		3228	2903	2748	94.6
Infant Schools (10)		1855	1198	1081	90.2
Special Schools (2)	10	145	140	123	88.0
Totals		6313	5049	4718	93.4
		-	-		The state of the s

NUMBER OF ELEMENTARY SCHOOL CHILDREN.

The average number on the books shows a decrease since the last Report of 16. In the previous year the decrease was 294, mainly in the Infants' Departments.

In spite of the steady increase in the population of Eastbourne, the number of children of school age is diminishing yearly.

The number of Elementary School children on the school rolls has diminished by 858 since 1913, but allowance must be made for a certain number at the Municipal Secondary Schools. The largest part of this decrease is in Infants' Departments.

The effect of the low birth-rate during the War is beginning to show itself as regards the younger children, but apart from this the proportion of child-life in the population of this country has steadily diminished annually.

The proportion of children of school age in the total population of Eastbourne in recent Census returns is as follows:—

1921	 16.40	1901	 19.57
1911	 17.51	1891	 21.19

PERCENTAGE ATTENDANCE.

The percentage of children on the rolls attending School has steadily improved and in 1923 was the best on record, viz., 91 for infants and 95 for others. The averages for the previous ten years were 86 and 92.5 respectively, an improvement of 5 per 100 in infants and 2.5 per 100 in other ages.

In the Central Schools percentages of 94 to 96 were obtained, in the Junior Schools 93 to 96, and in the Infants' Schools from 87 to 93.

As the only reason for non-attendance should be illness, the difference is accounted for mainly by improved health.

A table of causes of absence is given in the Report. The cases referred to are of those children excluded from school by your Medical Officers. Other absences are due to illnesses which are attended by Medical Practitioners and do not specially come before the Department.

The subjoined Table shows the numbers on the books and the percentage attendance since 1908.

Infant D			partments.	*Senior De	epartments.	
Year.		Number on Books.	Percentage Attendance.	Number on Books.	Percentage Attendance.	
1908		1799	84	4142	92	
1909		1707	86	4159	92	
1910		1706	87	4221	93	
1911		1848	86	4171	92	
1912		1715	86	4259	92	
1913		1630	89	4261	93	
1914		1757	89	4105	93	
1915		1751	86	4060	91	
1916		1598	88	4128	93	
1917		1714	85	4000	93	
1918		1722	83	3888	91	
1919		1722	83	3888	91	
1920		1707	83	3679	93	
1921		1631	90	3613	94	
1922		1302	84	3731	93	
1923*		1198	91	3851	95	

^{* &}quot;Senior" includes Central and Junior Schools.

CENSUS 1921. SCHOOL ATTENDANCE.

Compiled from Census returns and from figures obtained from the Registrar General, I submit the following Table:—

													-,
	Not accounted for.	Females.	114	57	45	25	31	21	19	15	21	348	658
tutions.	Not acco	Males.	116	54	27	22	17	21	20	14.	19	310	
Persons attending Educational Institutions.	time.	Females.	18	20	18	13	16	14	15	4	4	122	217
attending Ed	Part-time.	Males.	91	27	15	15	6	4	¢1	10	13	95	22
Persons	-time.	Females.	243	311	360	389	417	448	461	999	929	3750	83
	Whole-time.	Males.	258	319	397	489	464	557	621	647	631	4413	8163
pulation.	Fomolog	r ciliates.	375	388	423	427	464	483	495	585	580	4220	9038
Total Population.	Moloc	Marcs.	390	400	439	526	520	582	643	999	652	4818	06
	Age last	Dirtings.		9	7	:	6	01		12	13	Total	

From this Table it will be seen that of children aged 5 to 13 inclusive, the ages of compulsory education, 658, or 7 per cent., are unaccounted for.

This is not so serious as it might seem to be at first sight, for 341 of these were under seven years of age, and at age 12 only 29 were not attending an Educational Institution.

It is not unusual for parents to prefer to educate children at home, especially at early ages, and a number of parents object to systematic school education for children of 5 to 7 years of age.

Medical Department Staff, 1923.

(a) OFFICERS OF THE COUNCIL.

School Medical Officer:

W. G. WILLOUGHBY, M.D., Lond., D.P.H.

Assistant School Medical Officer (Inspecting Officer):

Miss E. H. B. COGHILL, L.R.C.P., L.R.C.S., L.F.P.S.

School Nurses:

Miss R. Clark (Superintendent).

Miss M. L. RICHNELL.

Miss I. M. SIMMONDS.

MRS. L. FORWARD.

Miss L. Curtis (from October 24th).

(All part-time only).

Clerks:

The Staff of the Public Health Department, and especially Miss M. G. Beney. Miss M. Fry.

(b) CONSULTING STAFF.

Ophthalmic Surgeon:

A. HALLIDIE, F.R.C.S., Eng.

Aural Surgeon:

J. N. DONNELLAN, M.B., B.CH., B.A.O.

Physicians for X-Ray Work:

H. GOODWYN, F.R.C.S., L.R.C.P., L.R.C.S.

S. P. NORMAN, M.D., M.B., Ch.B.

Surgeons for Nose and Throat Operations:

J. N. DONNELLAN, M.B., B.CH., B.A.O.

R. C. MACQUEEN, F.R.C.S.

Anæsthetist for Nose and Throat Operations:
M. V. McKechnie, L.R.C.P., L.R.C.S.

Boys' Secondary and Continuation Schools, Inspecting Medical Officer:

T. TURNER, M.B., B.S., M.R.C.S., L.R.C.P.

Dentist:

A. H. PICKETT, L.D.S., D.D.S.

STAFF.

The changes in 1923 were as follows:—An additional half-time Nurse from October 24th, and an additional Clerk from 23rd April, 1923, necessitated by the extent of the work and the contemplated additional Clinic at the East End, and the appointment of Dr. Hardman's successors in his practice of X-ray work in Ringworm.

CO-ORDINATION.

The School Medical Officer and the Assistant School Medical Officer are also Medical Officer of Health and Assistant Medical Officer of Health respectively.

The Nursing Staff of the Education Authority is also engaged in the work of the Sanitary Authority, so that co-ordination is complete. Four of the five nurses are part-time Infant and Child Welfare Nurses; thus the care of debilitated children under School age is provided for through the same nurses and medical staff.

The Borough is divided into districts for nursing purposes and the nurse in any particular area is both Infant Welfare Nurse and School Nurse.

SCHOOL HYGIENE.

I have in other reports dealt fully with the Hygiene of the premises of the various Schools. The provision of more up-to-date desks in some of the Schools is being proceeded with and should be completed as soon as possible. The improved artificial lighting at St. Andrew's has not been provided.

Physical Drill in the Central Schools would be aided by the provision of a covered area in the playgrounds, which could also be utilised for open-air teaching.

The playgrounds of some of the Schools leave much to be desired; that of St. Mary's Central Girls' School has been satisfactorily re-made. The others are receiving the attention of a Special Sub-Committee.

MEDICAL INSPECTION OF ELEMENTARY SCHOOL CHILDREN.

The first Table in the Appendix shows the numbers inspected and the ages at inspection.

The number of children examined at Routine Inspections was 2,073. In addition, 1,607 special cases were examined, making a total of 3,680. There were also 5,817 re-examinations of children.

The total number of children examined was therefore 9,497. This is a larger number than usual.

At 43.3% of the examinations parents attended.

There were 10 refusals for examination.

In my previous report it was mentioned that a number of children whose inspections were due in 1922 had been overlooked owing to special circumstances. All these children have been looked up and examined and the figures are included in the routine figures of 1923. Arrangements have been made to prevent a re-occurrence of such omissions.

Cases of defect found are referred to the Clinics for more thorough examination and treatment.

The schedule used for recording the results of inspection is that suggested by the Board of Education with one additional, viz., particulars as to vaccination.

The special cases represent those brought to our attention by teachers and parents.

Very little disturbance of School routine is occasioned by the inspections. The convenience of the teachers is followed as far as possible.

Where possible the children are examined in the Schools and all in School hours. In some Schools there is no accommodation for medical inspection, and the children of these are examined as follows:—

St. Andrew's ... Parish Room.
St. Saviour's ... Town Hall.
All Souls' ... Parish Room.
Christ Church ... Parish Room.

FINDINGS OF MEDICAL INSPECTION.

Of the children examined in routine examination 1,031, or 50%, had some defect. The defects are set out in a Table in the Appendix.

Malnutrition.—The number of cases was again large, viz., 98, as compared with an average of 53 yearly in the previous five years. Besides the 98 found at the routine inspections, 49 of whom were bad enough for treatment, 28 special cases were also brought to notice. It is for these cases and the allied anæmic cases that the Open-Air School is so useful. The extension of this School from 50 to 75 places is satisfactory.

Uncleanliness.—The figures as to this condition are steadily diminishing, due largely to the frequent visits of the Nurses both to the Schools and homes. Of 2,073 children examined by routine, 95 required attention, 3 being bodily dirty. In 28 cases there were fleas, in 58, nits, and in 6, lice.

The interest of the Head Teachers is very important. Towards the end of 1923 an examination of the whole of the children in one Central School did not disclose the existence of a single case of this defect.

There is also a decrease in the number of cases of Scabies or Itch during 1923. One only was found in routine inspection and there were 15 specials.

Number of visits to Schools by Nurses, to exa	mine	
children as regards cleanliness		433
Average number of visits to each School		28.8
Number of children found unclean		279
Number cleansed at Cleansing Station after n	otice	21

Ringworm of Head.—One case was found at the inspections, 22 others were reported specially and dealt with. Details are given later on in the Clinic reports.

Minor Ailments will be found detailed in the report on the Clinic for Minor Ailments on page 20.

Tonsils and Adenoids.—See Clinic Report on page 22.

Tuberculosis.—Three cases of pulmonary tuberculosis were discovered at inspections. They were not active but

were retained under observation. There is a special clinic for such cases combined with malnutrition cases.

Skin Diseases.—These were rather prevalent. Excluding Ringworm, thirteen only were found in routine inspections, but 147 specials were seen, all but 8 requiring attention. Impetigo (95) accounted for most. One child who had suffered from Psoriasis for two years was sent to a London Skin Hospital and returned cured after 7 weeks.

External Eye Diseases.—The number of cases was rather large in 1923, as will be seen in the Table in the Appendix. While in every other respect the health of the children improves, ophthalmic troubles are on the increase.

Vision.—Two hundred and eighteen cases of defective vision were found, and 48 of squint. Over half of these were discovered at the ordinary inspections. The numbers are disquieting. This defect is the one in which improvement does not take place as the years go on and calls for special investigation. This will be specially made in the current year. Such items as the lighting of Schools and the print of the books are most important.

Ear Diseases and Hearing.—Seventy cases were found at inspections. Some of these are very difficult cases, hence the appointment of a consultant in 1920 to assist us has been very useful. Details are given in the Clinic Table.

Dental Diseases.—At the ordinary inspections, 175 cases were found that required immediate attention. The cases are, however, dealt with specially, the School Dentist making examinations of children, especially at age six. Parents think too lightly of dental defects, and as the young children naturally object to pain of treatment, there are many refusals as the Tables show.

Crippling Defects.—These are mainly specially reported and dealt with. In the routine inspections, 9 cases were found requiring immediate attention, 31 others required to be kept under observation.

Anæmia.—Seventy-six cases were found, 40 of which required treatment at once.

A Table in the Appendix shows the ailments from which School children suffer. It is unsatisfactory that of the 2,073 children examined in ordinary routine no fewer than 1,031 had some defect, or just under 50%. The percentage in 1922 was just over 50%.

INFECTIOUS DISEASES.

As the School Medical Officers are also the Public Health Medical Officers, the occurrence of Infectious Disease is known at once to them and steps taken accordingly.

Code Art. 45 (b) and 57.—No Schools were closed during 1923 for infectious illness.

EXCLUSIONS FROM SCHOOL.

Code Art. 53 (b).—Under this Article 405 children were excluded from School during 1923, on the advice of the School Medical Officers. A list is submitted showing the causes and the average length of the exclusions.

The number excluded in the previous year was 462.

Diseases and Time for which Children were excluded during the year 1923.

Disease.			al period xclusion.	No. of Cases.	excl	age Time uded in h case.
Anæmia		7	weeks	3	2.3	weeks.
Debility		58	,,	6	9.6	,,,
Heart			months	1		months
Fainting Attacks		2	weeks	1	2	weeks
Throat Operations		1424	days	116		days
Pleurisy		3	weeks	1	3	weeks
Chest		34	,,	4	8.5	,,
Tuberculosis		14	months	4		months
Post T.B. Meningitis		0	,,	1	6	,,
Post Meningitis		3	,,	1	3	,,
Asthma		16	weeks	4	4	weeks
Bronchitis		6	,,	2	3	,,
Bronchial Pneumonia			",	1	2	
Bronchial Catarrh		2 8	,,	4	2	"
Aural Discharge		2	,,	1	2	",
Tonsils		2		1	2 2 2 2	
Colds		53	days	6	8.8	days
Cough		8	weeks	3	2.6	weeks
Croup		2	days	1	2	days
Tonsilitis		15		3	2 5	
Cervical Glands		1	week	1	1	week
Whooping Cough		90	weeks	13		weeks
Post Whooping Cough		1	week	1	1	week
Pertussis		6	weeks	î	6	weeks
Sore Throat		17	days	2		days
Contact Whooping Cough		3	weeks	1	3	weeks
37 ' 11-		3		i	3	
Mumps		11	,,	4	2.75	"
Chicken Pox		9	,,	3	3	
Encephalitis Lethargica			months	4		months
Diphtheria		24	weeks	5		weeks
Diphtheria Contacts			days	21		days
Scarlet Fever		83	weeks	12	6.9	weeks
Scarlet Fever Contacts		224	days	23	9.6	days
Post Scarlet Fever		10		1	10	
Rheumatism		6	weeks	3	2	weeks
Epilepsy		7.5	months	2	3.7	months
Petit Mal		2	weeks	2 1	2	weeks
Nervous Twitching	::	12		2	6	
Chorea		42	"	2 3	14	"
Gastritis		7	",	3	2.3	,,
Abdominal Pain		5	days	1	5	days
Stomatitis		5		1	5 5	
Colitis		3	"	1	3	11
Diarrhoea		1	week	1	1	week
		22	weeks	13	1.7	
Conjunctivitis	• •	2		13		weeks
Styes		4	days	1	2	days

DISEASES AND TIME EXCLUDED-Continued.

Disease.			al period xclusion.	No. of Cases.	Average Time excluded in each case.		
				1 - 1			
Headaches		7	weeks	5	1.4	weeks	
Scabies		43.5	,,	14	3.1	,,	
Abscess		4	,,	2	2	**	
Abscess in Neck		12	,,	1	12	,,	
Dental Abscess		41	days	3	15.6	days	
Impetigo		28	weeks	15	1.8	weeks	
Sores		65	days	6	10.8	days	
Boils		5.5	weeks	2	2.75	weeks	
Rash		31	days	4	7.7	days	
Skin Trouble		9	"	1	9		
Ringworm		95	months	37	2.5	months	
Ringworm, suspected		33	days	3	11	days	
Jaundice—Post		2	weeks	1	2	weeks	
İnjuries		102	days	8	12.75	days	
Tinea Capitis		2	weeks	2	1	week	
Run Down		9	,,	4	2.5	weeks	
Constipation		9	,,	. 2	4.5	days	
Dirty Habits :.		3	,,	1	3	weeks	
Threadworms		10	days	2	5	days	
Shingles		1	week	1	1	week	
Pains in Neck		î		1	1		
Psoriasis		4	weeks	Î	4	weeks	
D: 1		4		2	2	WCCAS	
Bilious Attack		4	days	ī	4	davs	
T		2	weeks	1	2 4 2 3	weeks	
		3	The state of the s	1	3		
Quinsy Post Throat Operation		3	"	1	3	"	
Incontinence		1	month	Î	1	month	
	poral	1	month	1	1	montu	
		2	weeks	1	2	weeks	
Artery	olid	3		1	3	Weeks	
Oedema of Right Ey			onths	1	6	months	
Swelling in Tibia				1	2		
Acute Wry Neck		2 d	ays	1	2	days	

Number of exclusions during 1923, 416.

The cases of Encephalitis Lethargica, or "Sleepy Sickness," are dealt with at length in a special report in the Board of Education's Medical Officer's Report, published in 1923. A noteworthy fact is that they were brought early to notice, owing to the care and observance of the Head Teachers of Christ Church and St. Joseph's Schools.

EXCEPTIONAL CHILDREN.

A Table in the Appendix shows the numerical return of exceptional children and how their education as far as possible receives attention.

FOLLOWING UP.

Arrangements for following up cases of defect found are as follows:—The child has to attend the Tuesday or Thursday Clinic, or is seen at its own home. Cases are not lost sight of, and parents are as a rule quite anxious as to the cure of the defect. Attendance cards are issued at the Clinics, when children are able to attend School during treatment. The numbers attending these Clinics will be seen on reference to the Clinic figures.

Records on the card system are kept of all such cases, their progress and treatment.

SCHOOL NURSES.

A summary of the work of the School Nurses is as follows:—

Number of visits by School Nurses to Schools									
Number of visits to Schools by Nurses	for	Medical							
Inspection			176						
Number of Home Visits by Nurses			1335						
Number of children cleansed			21						
Number of Cleansing Notices sent			148						
Attendance at School Clinics		(see Cl	linics)						

MEDICAL AND SURGICAL TREATMENT.

The presence of defects having been ascertained, provision is made for treatment as follows:—

The parents of the children with defects are notified as to what has been found and requested to consult their own Medical Attendants.

There are, however, numerous conditions, minor ailments especially, which would escape attention unless the Authority arranged for official attention.

The number of cases referred for treatment will be found in detail in the sub-divisions of Table IV.; the numbers treated and whether by the Authority's Schemes or not, are there set forth. These Tables refer to treatment as a result of the inspections.

The measures adopted to secure treatment are the consistent following up of cases, the provision of Clinics set forth in detail herewith and other items referred to in this report, such as transference to the Open-Air School.

In regard to dental work, there are too many refusals. Parents do not yet appreciate the necessity of proper attention to teeth.

It has not been necessary to institute any legal proceedings in 1923, but much pressure has been necessary in some cases to secure that treatment is given, even when offered free.

The various Clinics established by the Authority include:—

- A Minor Ailments Clinic. Town Hall. Mornings at 9, except Saturdays and Sundays.
- 2. Ophthalmic Clinic; mainly for Refractions. Town Hall. Half-day, usually about once a month, when sufficient cases, *i.e.*, about 15, have accumulated.
- 3. Throat and Nose Clinic. Adenoid operations at the Ear, Nose and Throat Hospital on Thursdays at 10 a.m., when four cases have accumulated.

When specially requested by parents, the operation is performed at the Leaf Hospital.

- Examination Clinic. Town Hall. Tuesday afternoons. For the further examination of special cases and cases referred from routine inspections. This includes backward children.
- 5. Dental Clinic. Town Hall. Tuesday and Thursday forenoons.
- 6. Tuberculosis and Malnutrition Clinic. Town Hall. Thursday afternoons.
- Ringworm Clinic. Attendance at the Consulting Rooms of the X-Ray operator by arrangement.
- 8. Ear and Hearing Clinic. Town Hall once monthly and in special cases when required. Last Monday in the month.

Skin diseases, external eye diseases, and crippling defects are included in the one of the above Clinics found most suitable.

There is also unofficial Massage work kindly undertaken by Miss Mackern and Miss Fowler. Miss Dorman kindly did much successful work in this respect at the Open-Air School, but has had to discontinue.

Arrangements are pending for the provision of an additional Clinic Centre at the East end of the Borough. Negotiations with the Board of Education are taking place, the necessary premises having been found.

By the instructions of the Board of Education the following Scale of Charges has been prepared and exhibited in the Clinics. It is too early yet to give the results, as the charges are being made gradually, with a view to non-interference with the work. Much of the cost of spectacles and of X-ray applications has been refunded.

COUNTY BOROUGH OF EASTBOURNE.

SCHOOL MEDICAL SERVICE.

In accordance with the instructions of the Board of Education, notice is hereby given that those who can afford to do so should contribute to the cost of Medical Services.

SCALE.

Spectacles.—Actual cost.

Adenoid and Tonsil Operations .- 5/- to 7/6.

X-Ray Treatment .-

£1 1s. 0d. for Partial Exposure.

£3 3s. 0d. for Full Exposure.

Minor Ailments .--

Free for First Fortnight.

1/- for Three Months.

2/- for Six Months.

Dentistry.—

6d. per Attendance, or

1/- for Treatment.

Free Medical Treatment will continue to be given in cases where parents cannot afford to pay for it.

For the Education Committee,

W. G. WILLOUGHBY, School Medical Officer.

CLINICS.

The numbers attending in 1923 were as follows:-

Clinic.	Ch	ildren.	Atten	dances.
Minor Ailments	 300	(246)	2358	(1937)
Ophthalmic	 241	(164)	245	(164)
Nose & Throat (Operation)	 138	(122)	138	(122)
Do., Leaf Hospital	 5	(1)	5	(1)
Examination	 870	(843)	2039	(1882)
Dental	 1723	(1540)	2188	(2042)
Tuberculosis, etc	 54	(60)	160	(180)
Ringworm (X-Ray)	 21	(27)	21	(27)
Ear Diseases	 108	(80)	225	(189)
	3,460	(3083)	7,379	(6544)

The numbers in brackets are the totals for 1922. It will be noted that there is a large increase in 1923. The figures for 1920 and 1921 were 3520-3508 children, 8193-7357 attendances, respectively. The increase in 1923 is partly attributable to the increased number of inspections.

The children at the Open-Air School are not examined at the Clinics. They have a regular frequent examination in each case at the School.

MINOR AILMENTS CLINIC.

Town Hall. The School Medical Officer when required. Daily at 9 a.m., except on Saturdays and Sundays.

Number of days Clinic was op	en	 259
Total number of attendances		 2358
Daily average attendance		 9.1
Number of cases treated		 300
AILMENTS.		
Cyes—		
Blepharitis		 1
Conjunctivitis		 5
Others		8

E

 	 	59
 	 	8
 	 	21
 	 	44
 	 	71
 	 	83
		300

Total in 1922, 246.

This Clinic is gradually lessening in time and number the absences of children from School.

OPHTHALMIC CLINIC.

Town Hall. When required. Medical Officer: Mr. A. Hallide, F.R.C.S. During 1923, 13 Ophthalmic Clinics were held. There were 241 children examined, and of these, 78 were re-examinations. (In 1922, 164 children).

In 134 cases spectacles were prescribed for constant use, and in 65 cases for use when reading. In 18 cases no spectacles were necessary. In 15 cases there was no change, in three cases treatment was prescribed, in one case change of frames, and one had lenses re-adjusted. The remaining four cases of defect were recommended for operation and are under the care of the Ophthalmic Hospital.

Provision of spectacles:-

Provided free in 35 cases.

Provided on part payment in 6 cases.

Repairs to spectacles:-

Provided free in 10 cases.

Note.—In 21 cases the patients were not actually attending Elementary Schools, viz.:—

Secondary School		18
Day Continuation School		 2
Infants	/	 1

NOSE AND THROAT CLINIC.

At the Ear, Nose and Throat Hospital. Thursdays at 10 a.m. Medical Officers: Drs. Donnellan, MacQueen and McKechnie.

Number of Clinics held, 34.

Number of children attending, 138.

	_
AGES OF	CHILDREN.
TEGEN OF	OTTENDED TO

	11020	· OHELD ALL III	
Years.		Years.	
3	 7	10	 14
4	 10	11	 2
5	 18	12	 10
6	 17	13	 5
7	 26	14	 4
8	 15		
9	 10	nuclei inin	138

The children operated on are kept in the Hospital for at least one night and are afterwards examined at their homes and at the Examination Clinic at the Town Hall.

Others-

Promised private	treatmer	nt	 6
Refused treatmen	t		 33
Brought forward			 63
Left School	VAV		 2
Left Town	4		 3
Referred for obser	rvation		 10
Had treatment at	Infirma	ry	 1

At the Leaf Hospital. Medical Attendant: Dr. A. H. CROUCHER.

	Age.
5	 1
6	 2
8	 1
14	 1

EXAMINATION CLINIC.

Town Hall, Tuesdays at 2 p.m. Dr. E. H. B. COGHILL.

The attendances of 870 children for 979 ailments amounted to 2,039.

The defects for which the children attended were as follows:—

Nose and Throat Affect	tions		191
Scabies			18
Errors of Refraction			61
Anæmia			51
Impetigo			65
Defects of Heart and (Circula	tion	7
Ear Diseases			47
Incontinence			6
Skin Diseases			91
Dental Diseases			39
Enlarged Glands			13
Septic Sores			20
External Eye Disease			56
Injuries			41
Other Ailments		=	273
			979

Figures for 1922, 843 children with 872 ailments, attendances, 1,882.

DENTAL CLINIC.

Town Hall. Tuesdays and Thursdays at 10 a.m. Mr. A. H. Pickett.

Number of Clinics, 98. Number of Attendances, 2188. Average, 22.3. Number of Children, 1723.

				-	
Age.	First Cases.	Re- examina- tions.	Teeth good.	Child refused treatment (re-exam.)	Totals.
3	3	-	-	- 18	3
4	16	1	_	-	17
5	18	6	-	-	24
6	161	39	14	3	200
7	56	92	. 15	2	148
8	34	189	35	3	223
9	25	151	37	_	176
10	32	210	48	2	242
11	24	149	45		173
12	86	163	66	2	249
13	26	126	63	2	152
14	14	85	45	m -	99
15	1	13	6		14
16	2	1	_	-	3
Totals	498	1225	374	14	1723

CASES INVITED TO ATTEND DENTAL CLINIC 1923 AND NOT ATTENDING—PRIMARY CASES.

Age.	No reply.	Promised private treatment	Left Town.	Failed to attend.	Totals.
5	_	7-	_	4	4
6	34	39	7	9	89
7	14	21	4	10	49
8	- 1	2	_	15	17
9	-	-	_	4	4
10	_	-	_	- 78	-
11	-	-	-	1	1
12	38	42	2	12	94
13	-1.	2	_	2	4
14		-	-	_	-
15	_	-	-	_	-
16	-	-	_	-	-
Totals	86	106	13	57	262

6-year old children were inspected from 11 Schools.

Number inspected, 362.

Number with good teeth, 79.

12-year old children were inspected from 12 Schools.

Number inspected, 354.

Number with good teeth, 138.

Children inspected from Special School, 42.

Number with good teeth, 22.

Cases for Re-examination.
Attended 1922—Not Attended 1923.

Age.	Reason Un- known	Left Town.	Left School.	Promised private treatment	Parent refused treatment	Totals.
5	4	_	_	_	_	4
6	6	_	*****	-	2	8
7	34	1	1	1	1	38
8	59	5	-	3	-	67
9	31	-	-	1	_	32
10	55	5	-	1	1	62
11	38	-	-	1	2	41
12	35	3	1_	4	1	43
13	44	1	_	3	1	49
14	1	1	87	-	_	89
15	-	_	29	-	-	29
16	-	_	_	-	-	-
Totals	307	16	117	14	8	462

TUBERCULOSIS AND MALNUTRITION CLINIC.

Town Hall. Thursdays, 2.30 p.m. Medical Officer: Dr. E. H. B. Coghill.

Attendances, 160 of 54 children. (In 1922, 60 children). Old cases, 31.

New cases, 23.

At this Clinic, Tuberculosis Contacts and Malnutrition Cases are examined.

Of the children examined, 18 were suffering from Pulmonary Tuberculosis or Consumption, and 13 had Tuberculosis elsewhere, as follows:—glands, 7; hip, 1; abdomen, 1; spine, 2; ears, 1; knee, 1.

RINGWORM CLINIC.

X-Ray Medical Officer: Dr. HARWOOD-HARDMAN.

Cases of Ringworm are seen at the Tuesday and Thursday Clinics at the Town Hall by Dr. Coghill.

Where parents consent, cases of Ringworm of the head receive X-Ray treatment at a private Clinic in Eastbourne.

Number of cases at beginning of 1923:—15 cases in 11 families, 9 boys and 6 girls.

Cured during the year, 34 cases, 20 boys and 14 girls.

Fresh cases during year, 22 cases in 20 families, 12 boys and 10 girls.

Cases at end of the year, 3 cases in 3 families, 1 boy and 2 girls.

Cases receiving X-Ray treatment during the year 21.

The following additional cases were sent for X-Ray treatment:—1 boy from Secondary School; 1 boy not yet at School.

Average length of absence in cured X-Ray cases, 3.27 months; average length of absence in other cases, 7.25 months. The long average absence in X-Ray cases is due to two cases of very troublesome Eczema and Impetigo. Apart from these, about six weeks is the average time of absence.

EAR DISEASES.

Town Hall. Monthly as required. Medical Officer: Dr. J. N. Donnellan.

The Clinic was commenced in April, 1920, for specially difficult cases.

Eleven Clinics were held during the year. There were 225 attendances of 108 children. (1922, 189 attendances of 80 children).

The ages of the chil	dren attending	were as follows :-
----------------------	----------------	--------------------

Years.		Years.	
3	 5	11	 5
4	 6	12	 10
5	 7	13	 10
6	 8	14	 8
7	 11	15	 2
8	 11		
9	 10		108
10	 15		

Twenty-nine cases were referred for operation, 67 for Clinical treatment, 4 for treatment at home, 1 to the Ear, Nose and Throat Hospital, and 7 required no treatment.

Ordinary Ear cases are seen at the Minor Ailments and Examination Clinics.

MASSAGE AND ELECTRICAL CLINIC.

Owing to economic conditions permission to establish a Clinic was refused by the Board of Education. Work has been carried on, however, both in a voluntarily established Clinic (Miss Mackern and Miss Fowler), and particularly at the Open-Air School (Miss Dorman).

We are much indebted to these three ladies for their kind assistance. Miss Mackern remarks:—

"We have three children over School age coming for treatment, making 20 in all coming regularly. There are one or two small children who do not come regularly, but on the whole the attendances are most satisfactory, and also the progress made by all the children has been most satisfactory this last year, due, I am certain, to having a proper work room well heated, also to the ladies who give the school children tea in the afternoons, when they come from School and before they have treatment."

Number of Elementary School children attending during year, 16.

Number of children under School age attending during year, 1.

			Un	der			
	School Age.		Schoo	School Age.		tal.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
Spinal Curvature	_	-	-	-	ma_w	-	
Post Infantile Paralysis.	. 2	3	-	-	2	3	
Deformities of Foot	. 2	-	-	104	2	-	
Rickets		-	-	1	11-70	1	
Spatulate Shoulder-blades	s 1	3	-	-	1	3	
Wasted Arms	. 1	2	-	-	1	2	
Spastic Paralysis .	. 2	-	-	-	2	-	
					- 1	-	
					8	9	
					-	-	

Miss Dorman attended to five patients, all Spinal Curvature Cases.

UNCLEANLINESS AND SCABIES.

There is a special attendant for bathing the children, under the direction of the Superintendent Nurse. There were no attendances for special baths for scabies during 1923.

The reduction of uncleanliness and verminous conditions in the Schools is marked in recent years.

TREATMENT OF UNCLEANLINESS.

The School Nurses periodically visit each School to examine children as regards cleanliness, the average number of visits to each School for the year being 28.8, the total number of examinations being 433.

Two hundred and seventy-nine children were found to be unclean, and the usual procedure is to serve a cleansing notice on the parents. Where this is found to be ineffective, the children are sent to the Cleansing Station at Seaside Baths and cleansed, the number so dealt with during the year being 21.

The Cleansing Station is a bath room used for no other purpose, and attached to the Public Baths. It has a bath, a disinfecting apparatus for clothes, and arrangements for making light refreshments such as cocoa. While the child is having its bath, the clothes can be disinfected and dried. The Local Authority employs an attendant who

bathes the children under the supervision of the chief nurse, and payment is made at the rate of sixpence per child. The Cleansing Station is used for others besides Elementary School children.

LEGAL PROCEEDINGS.

No legal proceedings were necessary.

BACKWARDNESS AND MENTAL DEFECT.

Medical Officers: Drs. WILLOUGHBY and COGHILL.

MENTAL DEFICIENCY.

Sixteen children were specially examined, viz., 10 boys and 6 girls, 13 were found suitable for the Special School, and 3 have been sent to a private school.

The figures for the Special School in Whitley Road are as follows:—

During 1923, 10 boys and 5 girls were admitted; 12 boys and 7 girls left.

The numbers on the books at the end of the year were:—boys, 43; girls, 34; total, 77.

The causes of leaving of the boys were as follows:-

To go to work	 6
16 years of age	 2
Residential School	 1
Transferred to ordinary School	 2
Excluded for ill-health	 1

12

The causes of the leaving of the girls were :-

0	0	
To go to work		2
Residential School		1
Excluded for ill-health		1
Left neighbourhood		1
16 years of age		2

7

I submitted in my report for 1921 an account by Miss March as to the after-care of children who have left the School.

The after-care Committee was formed in 1910, and its members kept in close touch with the children, not only while they were at School, but also when they left, and visited them in their homes. The Committee also helped to find suitable situations for the children.

This Committee, replaced in 1914 by a Voluntary Association, was successfully re-formed in 1922 as a more useful aid to ex-scholars of the School.

One of the immediate results is the formation of a successful Social Club for old pupils. The continued satisfactory results of the special teaching and personal influence of Miss March are obvious.

OPEN-AIR SCHOOL.

The Open-Air School formed by the necessary alterations of Army Huts and opened on 7th June, 1920, fully justified its existence. During 1923 the numbers on the books were increased, and the School is now certified for 75 pupils. The Head Mistress, Miss E. G. Martin, and her assistants have been most successful and the children who have had the opportunity of attending there have done well.

The figures for 1923 have been as follows:-

	Boys.	Girls.	Total.
On books at commencement			
of year	34	30	64
Admitted during the year	32	25	57
Attending at the end of year	33	31	64

(Note.—The number on the books at the end of the year was 73, the difference being made up by the children due for transfer.)

The reasons for admission have been as follows:-

Anæmia and I	Malnutriti	on	 26	
Anæmia			 15	
Malnutrition			 7	
Arrested Tube	rculosis		 3	
Debility		.:	 14	
Asthma			 1	
Blepharitis			 1	
Conjunctivitis			 1	
Spinal Curvat	ure		 3	
Heart Disease			 2	
"Nerves"			 1	
Post Chorea			 1	
Outgrowing st	rength		 1	
Old Spinal Car			 1	
•			_	
			77	

Note.—Some children had two of the above ailments.

The results at the end of the stay of the children discharged during 1923 have been :—

Cured	 	32
Improved	 	16
Refused treatment	 	2
Left for other treatment	 	7

Miss Dorman has given massage treatment to 4 boys and 1 girl who had spinal curvature.

PHYSICAL TRAINING.

The re-arrangement of the Schools led to improved physical training, especially in the Central Schools. A Supervisor of Physical Training has been appointed. Physical training is a most important factor in children's health.

PROVISION OF MEALS.

A certain amount of provisions of meals, nearly independent of rate-aid, has been made as follows:—

- (a) At the Special School for backward children.
- (b) At the Open-Air School.

(a) Special School.

At the Special School the children are provided with the mid-day meal. In addition to these children, a certain number of those attending other Schools and suffering from malnutrition were also given a mid-day meal at the Special School.

The report has been kept by the Head Mistress. I submit her figures from 1st Jan., 1923, to 31st Dec., 1923.

The number of dinners provided for the School children was 6,913; for children suffering from malnutrition and not belonging to the School, 896; a total of 7,809.

The average cost per meal for these meals was $2\frac{3}{4}d$. The total cost was as follows:—

て こ	٥.	u.	
 75	8	0	
 4	7	0	
 6	2	10	
	4	75 8 4 7	75 8 0 4 7 0 6 2 10

£85 17 10

Of the money received during this period, £69 4s. $4\frac{1}{2}d$. was paid by the parents and guardians of the children, and the balance was obtained from the Mayor's Poor Fund.

The number of children receiving free meals was nine.

(b) OPEN-AIR SCHOOL.

Every child at this School receives a substantial dinner daily at a charge of 4d. The number of meals served during 1923 was 14,443.

The cost worked out at 4.17d. per meal.

In a few cases children whose parents could not afford the 4d. received free meals. All children also received cocoa during the Winter, and 30 to 40 received milk during the Summer.

The following are the accounts for th	e y	ear :	_	
		£	s.	d.
Stock in Hand, 1st January, 192	3	4	7	11
Purchases		253	1	2
		257	9	1
Stock in Hand, 31st December, 19	23	6	11	1
Amount expended during 1923		250	18	0
Received in fees		226	19	5
Balance of cost to Educati	on			
Authority		£23	18	7

SCHOOL BATHS.

There are no baths provided at the Schools. In connection with verminous conditions and scabies, special baths are provided free. There are Public Baths at each end of the Borough provided by the Corporation, and these have been much used by School children during the year. The new houses erected by the Corporation are all provided with baths.

SWIMMING BATH.

The municipal swimming bath has been extensively used by Elementary School children during the year.

Swimming Certificates, provided by Mr. Councillor Hollins, are annually awarded to Elementary School children who, having learned to swim during the year, swim the length of the bath from the deep end. 146 of these certificates were awarded in 1923, 86 to boys and 60 to girls.

With the kind assistance of the Swimming Club, who presented also various prizes, an Annual Gala for Elementary School children is held. The Education Committee gave prizes in 1923.

The number of times children used the municipal swimming bath in 1923 was 7,378 boys, 6,229 girls, total 13,607. These were not exclusively Elementary School children.

CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS & VOLUNTARY BODIES.

The attendance of parents at the medical inspections reached a percentage of 43.3 during 1923. At the Clinics parents nearly always attend.

The teachers take a kind interest in the work in spite of the occasional interruption of the course of duties, and their help is most valuable.

Communication and mutual assistance is constant between the Medical Staff and the School Attendance Department.

FREE CONVEYANCE.

Many of the Children of the Whitley Road Special School and of the Open Air School are conveyed to and from School by 'bus. Certain of the "infants" of St. Mary's School are also conveyed similarly.

TABLE I

	1 1	ARLE 1			
(A) ROU	TINE MI	EDICAL	INSPEC	CTIONS.	
Number of Code Group	Inspect	ions			
Entrants					 555
Intermediates					 470
Leavers					 623
Total					 1648
Number of other Rout	ine Inspe			 425	
(в) OTHE	R INSPI	ECTIONS	S.	
Number of Special Ins	pections				 1607
Number of Re-inspect	ions				 5817
Total					 7424

TABLE II.

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1923.

Defect or Disease.	,	-				
MALNUTRITION			Inspec	ctions.	Inspec	ctions.
UNCLEANLINESS—Head	Defect or Disease.		No. referred for Treatment.	No. to be kept under observation.	No. referred for Treatment.	No. to be kept under observation.
UNCLEANLINESS—Head	MAINUTRITION		49	49	24	4
Body Composition Composi				-	~ 1	_
Skin		• •				
Skin— Ringworm—Head 1				10000000		
Ringworm—Head 1						
Body			1	_	22	-
Scabies	Body			-		-
Impetigo				_	15	_
Other Diseases (Non-Tubercular) 1 3 37 8 EYE—			8	_	87	_
Eye			1	3	37	8
Conjunctivitis	EYE-					
Keratitis	Blepharitis					3
Corneal Ulcer — 1 —			5	1	24	-
Corneal Opacities — 1 — — Defective Vision 84 48 83 3 Squint 15 20 13 — Other Conditions 1 3 35 3 EAR— Defective Hearing 37 33 43 1 Otitis Media 9 6 1 — Other Ear Diseases 4 4 16 1 Nose AND Throat— 65 397 49 15 Adenoids 6 4 7 2 Enlarged Tonsils and Adenoids 21 8 31 1 Other Conditions 4 11 6 14 ENLARGED CERVICAL GLANDS (Non- 4 150 8 7 DEFECTIVE SPEECH	A PROPERTY OF THE PROPERTY OF		-		-	-
Defective Vision			-		1	-
Squint 15 20 13 — Other Conditions 1 3 35 3 EAR—			-	The state of the s	-	-
Other Conditions 1 3 35 3 EAR—						3
Defective Hearing 37 33 43 1						-
Defective Hearing			1	3	35	3
Otitis Media 9 6 1 — Other Ear Diseases 4 4 16 1 Nose AND Throat— Enlarged Tonsils 65 397 49 15 Enlarged Tonsils 6 4 7 2 Enlarged Tonsils and Adenoids 21 8 31 1 Other Conditions 4 11 6 14 Enlarged Tonsils and Adenoids 21 8 31 1 Other Conditions 4 11 6 14 Enlarged Tonsils and Adenoids				00	40	
Other Ear Diseases				100000	100000000000000000000000000000000000000	1
Nose and Throat—						-
Enlarged Tonsils			4	4	16	1
Adenoids			05	207	40	15
Enlarged Tonsils and Adenoids						
Other Conditions 4 11 6 14 ENLARGED CERVICAL GLANDS (Non-Tubercular) 4 150 8 7 DEFECTIVE SPEECH 18 TEETH—Dental Diseases 63 HEART AND CIRCULATION—Functional <td< td=""><td>Adenoids</td><td></td><td></td><td></td><td></td><td></td></td<>	Adenoids					
ENLARGED CERVICAL GLANDS (Non-Tubercular) 4 150 8 7 DEFECTIVE SPEECH - - 18 - - TEETH—Dental Diseases . . 175 - 63 - HEART AND CIRCULATION—Heart Disease—Organic . 2 20 - 1 Functional . 1 29 1 - Anæmia . . 40 36 61 6 Lungs—Bronchitis - - - 5 -	Other Conditions					
TUBERCULAR) 4 150 8 7 DEFECTIVE SPEECH - 18 - - TEETH—Dental Diseases 175 - 63 - HEART AND CIRCULATION— 2 20 - 1 Functional 1 29 1 - Anæmia 40 36 61 6 Lungs— - - 5 -			4	11	0	14
Defective Speech			4	150	Q	7
TEETH—Dental Diseases			-		_	
HEART AND CIRCULATION— Heart Disease—Organic 2 20 — 1 Functional 1 29 1 — Anæmia 40 36 61 6 Lungs—		1	175	100000000000000000000000000000000000000	63	1
Heart Disease—Organic			110		00	
Functional 1 29 1 — Anæmia 40 36 61 6 Lungs— Bronchitis — 5 —			2	20	_	1
Anæmia 40 36 61 6 Lungs— Bronchitis					1	_
Lungs— Bronchitis — 5 —						6
	D 1111		-	_	5	_
			2	10		21

RETURN OF DEFECTS.—Continued.

Defect or Disease.			Routine Inspections. No. of Defects.		Special Inspections. No of Defects.	
			No. referred for Treatment.	No. to be kept under observation.	No. referred for Treatment.	No. to be kept under observation.
Tuberculosis—						
Pulmonary—Defi	nite		_	3	6	12
	ected		_	_	-	
Non-Pulmonary-	-Glands			_	1	4 6
	Spine		_	1	2	-
	Hip		-	2	_	1
	Other bones	and				
	joints		-	-	_	1
	Skin		-	-	-	-
	Other Forms			1	_	2
NERVOUS SYSTEM-					- 121	
Epilepsy			1	7	4	3
Chorea			-	-	_	-
Other conditions			1	1	-	-
Deformities-						
Rickets			-	15	-	-
Spinal Curvature			2 7	4	2 7	-
Other Forms			7	12		5
OTHER DEFECTS AND	DISEASES		14	41	190	46

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

	Number o	Percentage of Children	
Group.	Inspected.	Found to require treatment.	Found to require treatment.
Code Groups—			
Entrants	555	72	12.9%
Intermediates	470	68	- 14.4%
Leavers	623	75	12.0%
Total (Code Groups)	1648	215	13.0%
Other Routine Inspections	425	57	13.4%

TABLE III.—RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

		1	
	Boys.	Girls.	Total.
BLIND (including partially blind).			
Suitable for training in a School or Class for the			
totally blind— Attending Certified Schools or Classes for			
the Blind			
Attending Public Elementary Schools			
At other Institutions		-	
At no School or Institution		1	1
Suitable for training in a School or Class for the			
partially blind—			
Attending Certified Schools or Classes for			
the Blind	2		2
Attending Public Elementary Schools	-	-	-
At other Institutions			
At no School or Institution			
DEAF (including deaf and dumb and partially			
dumb).			
Suitable for training in a School or Class for the			
totally deaf or deaf and dumb—			
Attending Certified Schools or Classes for			
the Deaf	1	-	1
Attending Public Elementary Schools		-	-
At other Institutions			-
Suitable for training in a School or Class for the			
partially deaf—			
Attending Certified Schools or Classes for			
the Deaf		_	-
Attending Public Elementary Schools	2	-	2
At other Institutions	-	-	-
At no School or Institution	-	-	
Manager Dannager			
MENTALLY DEFECTIVE. Feeble Minded (cases not notifiable to the Local			
Control Authority)—			
Attending Certified Schools for Mentally			
Defective Children	43	34	77
Attending Public Elementary Schools		-	-
At other Institutions	-	-	-
At no School or Institution	1	2	3
Notified to the Local Control Authority during			1
the year—		1	
Feeble Minded	-	-	-
Imbeciles	-	-	-
Idiots			

RETURN OF EXCEPTIONAL CHILDREN—Continued.

	Boys.	Girls.	Total
EPILEPTICS.			
Suffering from severe Epilepsy-			
Attending Certified Special Schools for			
Epileptics	1	1	2
In Institutions other than Certified Special			
	1		1
Schools Attending Public Elementary Schools		-	
At no School or Institution	1		1
Suffering from Epilepsy which is not severe—			
Attending Public Elementary Schools	4	5	9
At no School of Institution		-	-
Physically Defective.			
Infectious Pulmonary and Glandular Tuber-		0	
culosis—			
At Sanatoria cr Sanatorium Schools		-	
approved by the Ministry of Health or			
the Board	1	1	2
At other Institutions	-		annual .
At no School or Institution	-	-	-
Non-infectious but active Pulmonary and			
Glandular Tuberculosis—			
At Sanatoria or Sanatorium Schools			
approved by the Ministry of Health or			
the Board			
At Certified Residential Open-Air Schools			
At Certified Day Open-Air Schools	4	6	10
At other Institutions	7	0	10
At no School or Institution			
Delicate children pre- or latent Tuberculosis,			
Malnutrition, Debility, Anaemia, etc.—			
At Certified Residential Open-Air Schools			
At Certified Day Open-Air Schools	37	36	73
At Public Elementary Schools			_
At other Institutions	-		-
At no School or Institution	-	-	_
Active Non-Pulmonary Tuberculosis—		-	W.
At Sanatoria or Hospital Schools approved	- 5		
by the Ministry of Health or the Board			-
At Public Elementary Schools		1	1
At other Institutions		-	-
At no School or Institution		1	1
Crippled children (other than those with active			
Tuberculosis Disease), e.g., children suffer-			
ing from Paralysis, etc., and including			1
those with severe Heart Disease—			-
At Certified Hospital Schools			-
At Certified Residential Cripple Schools	-	-	-
At Certified Day Cripple Schools	10		10
At Public Elementary Schools	13	6	19
At other Institutions	2	1	3
At no School or Institution	,		- 3

TABLE IV.—RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1923.

TREATMENT TABLE. GROUP I.—MINOR AILMENTS.

Disease or Defect.	Number of Defects treated or under treatment during the year.			
Disease of Defect.	Under the Authority's Scheme.	Otherwise.	Total.	
Skin— Ringworm—Scalp Body Scabies Impetigo Other Skin Disease Minor Eye Defects (external and other, but excluding cases			23 17 16 95 38	
falling in Group II.)	46 88 185	1 9 8	47 97 193	
Total	508	18	526	

GROUP II.—DEFECTIVE VISION AND SQUINT.

Number of Defects dealt with							
Defect or Disease.	Under the Authority's Scheme.	Submitted to refraction by Private Practitioner or at Hospital apart from the Authority's Scheme.	Otherwise.	Total.			
Errors of Refrac- tion (including Squint) Other Defect or Disease of the	233	9	_	242			
Eyes	-	_	-	-			
Total	233	9	-	242			

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

	Nu	mber of Defe	ects.	
Receive	d Operative Tr	eatment.		
Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital apart from the Author- ity's Scheme.	Total.	Received other forms of treatment.	Total number treated.
138	12	150	10	160

	GROUP IV.—I	DENTAL	DEFECTS	3.	
1.	Number of children who were	_			
	(a) Inspected by the Dent	tist			
	Aged—				
	5				7
	6				200
	7 8				148 189
	9				151
	Routine Age Group				101
	10)5			210
	11				149
	12				249
	13				152
	14				85
	15				13
	16				1
	Total				1554
	Specials				169
	Grand Total				1723
	(b) Found to require treat	ment			1349
	(c) Actually treated				1335
	(d) Re-treated during the	e vear as	the result	t of	
	periodical examinat	tion			837
2.	Half-days devoted to-				
	Inspection				4
	Treatment				98
	Treatment				
	Total				102
3.	Attendances made by children	for treat	ment		2188

4	Fillings						
4.	Fillings—					00.4	
	Permanent Teeth					204	
	Temporary Teeth					189	
	Total					393	
_						-	
5.	Extractions						
	Permanent Teeth					361	
	Temporary Teeth					1225	
	Total					1586	
6.	Administrations of gen	eral ana	esthetics	for extr	actions	345	
7.	Other operations— Permanent Teeth Temporary Teeth			::	$\frac{32}{12} + 7$	regulati	ions.
	Total				51		
	GROUP V.—UNG	TEAN	INECC	AND	EDMIN	OHE	
	GROOT V.—ON		DITIONS		VERMIN	1003	
		CONI	JIIIONS				
(1)	Average number of v by the School Nurses		School 1	nade d	uring the	e year	28.8
(2)				ren in	the Scho	ols by	400
							433
(3)	Number of individual						279
(4)	Number of children cle Local Education Aut			ngemen	ts made	by the	21
(5)	Number of cases in wh (a) Under the E				re taken-	-	_
	(b) Under Schoo						_

Municipal Secondary

AND

Continuation School Reports.

MUNICIPAL SECONDARY SCHOOLS.

There are two Municipal Secondary Schools:-

- (a) Boys.-Number on books at end of year, 314.
- (b) Girls.—Seniors, number on books at end of year, 297. Young children.—Boys, 17; Girls, 29; Total, 657. The premises are in each case satisfactory.

MEDICAL INSPECTION OF CHILDREN.

This commenced on 18th June, 1920, in the case of the boys, and on 1st June, 1920, in the case of the girls. All children are inspected annually, except a few who leave before examination in any year. The Staff for Medical Inspection, etc., is the same as in the case of the Elementary Schools, see page 9, with the addition of Dr. T. Turner, as Inspecting Medical Officer for boys.

The arrangements for inspection are similar to those in the case of Elementary Schools.

The schedule used is that suggested by the Board of Education, and differs somewhat from that in use in Elementary Schools.

Re-examinations and following up are carried out as in the case of Elementary Schools.

The results of inspection are set forth in the Tables appended. It will be noticed that the outstanding unsatisfactory items during 1923, as at previous inspections, were:—

- 1. Defects of the eyes, and especially abnormal vision.
- 2. Enlarged tonsils and adenoids.
- 3. Enlarged cervical glands
- 4. Anæmia.
- 5. Deformities.

In the Table summarising these it will be noted that for the most part, especially in the case of deformities, the defects were not sufficient to require actual medical treatment, but rather observation. The conditions named are not acquired at the Secondary Schools, but are the result of a gradual ill health in earlier years as a rule, hence importance of the early work in connection with pre-school age.

The defects mentioned were often multiple in the same child. Of the 658 children inspected, 272 individual children were referred for treatment or observation, i.e., 41.3% of the total. The appended Tables show the defects in detail.

Mr. C. J. Blackburn and Miss C. Adams have kindly given us much assistance in the work.

There were 3 refusals on the part of parents to allow inspection.

Parents were present in 22.3% of the inspections.

MEDICAL TREATMENT.

The children at the Secondary Schools are for the most part in a better position financially than those in the Elementary Schools. The Authority accordingly resolved that only those children promoted by scholarship from Elementary Schools should automatically be treated at the School Clinics, together with those whose parents were able to show they could not afford ordinary medical attention. Accordingly the parents were specially called upon to give the necessary attention, with the results shown in the Tables.

Thirty-three children were treated free in the Authority's Clinics.

TABLE I.—NUMBER OF CHILDREN INSPECTED, 1st January, 1923, to 31st December, 1923.

(A) ROUTINE MEDICAL INSPECTION.

					Enti	rants.		
	Ag	ge-	3	4	5	6	Other Ages.	Total.
Boys			_	-	3	4	6	13
Girls			_	1	-	10	12	23
	Totals		_	1	3	14	18	36

		Intermediate Group.	L	eave	rs.	Other	Total.	Grand Total.
Age—		8	12 13 14 ages. Tota	Total.	Total.			
Boys		9	42	51	66	168	336	349
Girls		22	45	34	47	138	286	309
Totals		31	87	85	113	306	622	658

(B) SPECIAL INSPECTIONS.

	Special Cases.	Re-examinations (i.e., No. of children re-examined).
Boys	 6	196
Girls	 7	214
Total	 13	410

(c) TOTAL NUMBER OF INDIVIDUAL CHILDREN INSPECTED BY THE MEDICAL OFFICER, WHETHER AS ROUTINE OR SPECIAL CASES.

(No child being counted more than once in one year).

1	Number	of	Individual	Children	Inspected.		
	658						

TABLE II.

(A) RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION IN 1923.

	Routine	Special
	Inspections.	Inspections.
Defect or Disease.	No. referred for Treatment. No. to be kept under observation.	No. referred for Treatment. No. to be kept under observation.
MALNUTRITION	1 10	- 1
Uncleanliness—Head	- 1	
Body		_ 2
SKIN-		
Ringworm—Head		
Body		1 -
Scabies		
Impetigo		
Other Diseases (non-tubercular)	1 1	- 1
EYE-	The state of the s	
Blepharitis	4 7	
Conjunctivitis	1 1	- 1
Keratitis		
Corneal Ulcer		- - -
Corneal Opacities		
Defective Vision	14 10	8 -
Squint	2 9	
Other Conditions		
EAR-		
Defective Hearing	4 -	
Otitis Media		
Other Ear Diseases	2 2	2 1
Nose and Throat—		
Enlarged Tonsils	8 51	1 -
Adenoids		2 -
Enlarged Tonsils and Adenoids	4 2	
Other Conditions		
ENLARGED CERVICAL GLANDS (NON-		
TUBERCULAR)	- 100	- 1
DEFECTIVE SPEECH	60	11 -
TEETH—Dental Diseases HEART AND CIRCULATION—	62 —	11 -
Heart Discours Ormania		
Functional	_ 5 _ 6	
A	8 25	5 -
Lungs—	0 20	0 -
Danabitia		
Other Man Tuberenley Discours	_ 7	- 1
Other Non-Tubercular Diseases		

RETURN OF DEFECTS.—Continued.

				tine ctions.	Spe	cial ctions.
Defect or Di	sease.		No. referred for Treatment.	No. to be kept under observation.	No. referred for Treatment.	No. to be kept under observation.
Tuberculosis-				-	-	
Pulmonary—Defini	ite		_	_	1	_
Suspe	cted		_	3	_	_
Non-Pulmonary—(Glands		_	_	_	-
S	Spine		_			_
I	fip			_	_	_
	Other bones	and				
	joints		_		_	_
S	kin		-		_	-
	other Forms		_	-		-
NERVOUS SYSTEM-						
Epilepsy			-	1		_
Chorea			-	-	-	-
Other Conditions			-	-	-	-
DEFORMITIES-						
Rickets			-	4	-	-
Spinal Curvature			4	19	-	-
Other Forms			2 7	4	1	_
OTHER DEFECTS AND I	DISEASES		7	6	1	2

(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT.

	Number o	Percentage of Children	
Group.	Inspected.	Found to require treatment.	found to require treatment.
All Ages	658	65	9.8%

TREATMENT TABLE.

- Minor Ailments.

Disease or Defec	+		Number of Defects treated or under treatment during the year.			
Disease of Defec			Under the Authority's Scheme.	Otherwise.	Total.	
Skin— Ringworm—Scalp			_	-	_	
Body			-	-	-	
Scabies			_	_	-	
Impetigo			-	_	-	
Other Skin Disease			-	1	1	
Minor Eye Defects			1	2	3	
Minor Ear Defects		٠.	2	1	3	
Miscellaneous			_	3	3	
Total			3	7	10	

Defective Vision.

	Under the Authority's Scheme.	Privately.	Total.
Errors of Refraction—Other Defect or Disease	18	7	25

Defects of Nose and Throat.

Under the Authority's Scheme.	Privately.	Total.
4	8	12

Dental.

Under the Authority's Scheme.	Privately.	Total.	
8	44	52	

DENTAL CLINIC, 1923.

Age.	First Cases.	Re- examina- tions.	Teeth good.	Child refused treatment (re-exam.)	Totals.
4	_	-	_	_	_
5	-	_	_	_	_
6	-	-	_	_	_
7	1	_	_	_	1
8	-	1	-	_	1
9	1	i	1	_	2
10	1	2	2	-	3
11	_	7	1		7
12	2	8	2	=	10
13	4	9	2	_	13
14	2	7	-	-	9
15	6	8	3	-	14
16	1	2	1	-	3
Totals	18	45	12	-	63

CASES FOR RE-EXAMINATION.

ATTENDED 1922—Not Attended 1923.

Age.	Reason Un- known.	Left Town.	Left School.	Promised private treatment.	Parent refused treatment.	Totals.
5	-	-	-	_	_	-
6		-	-	-	-	-
7	-	_	_	_	-	-
8		_	-		_	_
9	-	_	_	_	_	_
10	-	_	_	-		-
11	_	-	_	_	_	_
12	1	_	_	_	_	1
13	2	_	_	_	_	2
14	3	_	_	_	-	3
15	/_	_	_	_	_	_
16	_	_	_	_	_	-
Totals	6	-	-	-	-	6

MUNICIPAL CONTINUATION SCHOOL.

The Voluntary Continuation School for Boys and Girls beyond School age under the Education Act, 1918, was opened on 22nd September, 1919, at the Technical Institute.

The arrangements made for medical inspection were as follows:—Dr. T. Turner was appointed to examine the boys, and Dr. E. H. B. Coghill to examine the girls.

Eighty one children were medically examined in 1923, three girls refused examination, and eleven other girls did not attend. Parents were invited to be present, and 10 attended. The schedule of inspection was the same as that for the Secondary Schools and as set forth by the Board of Education.

Table II. shows the results of the medical inspection as regards discovery of defects. The percentage of defects is about the same as in the Elementary and Secondary Schools. Forty-five children, or 55%, had defects necessitating treatment or observation.

The arrangements as regards treatment are the same as in the case of the Secondary Schools. Where it is clear that the means of the parents are such that the child cannot receive proper attention and treatment, the Elementary School Clinics are available, but the rule is to call the parents' attention to the defects and to trust to their seeing that the treatment is carried out. The cases are followed up to see what steps the parents take.

TABLE I.—NUMBER OF CHILDREN INSPECTED, 1st January, 1923, to 31st December, 1923.

(A) ROUTINE MEDICAL INSPECTION.

Age—	14	15	16	17	Total.	Grand Total.
Boys	26	13	6	1	46	46
Girls	18	9	4	4	35	35
Totals	44	22	10	5	81	81

(B) SPECIAL INSPECTIONS.

			Special Cases.	Re-examinations (i.e., No. of Children re-examined).
Boys			 	9
Girls			 1	5
	Tot	tal	 1	14

(c) TOTAL NUMBER OF INDIVIDUAL CHILDREN INSPECTED BY THE MEDICAL OFFICER, WHETHER AS ROUTINE OR SPECIAL CASES.

(No child being counted more than once in one year).

Number of	Individual Children Inspected.
	81

TABLE II.

(a) RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, 1923.

	Rou Inspec	tine ctions.	Spe	cial ctions.
Defect or Disease.	No. referred for Treatment.	No. to be kept under observation.	No. referred for Treatment	No. to be kept under observation.
MALNUTRITION	_	1	_	_
UNCLEANLINESS-Head	_	_		-
Body	_	1		-
SKIN-				
Ringworm—Head	-	_		-
Body	_	_	-	- 3
Scabies	-	-	-	_
Impetigo	-	-	_	_
Other Diseases (non-tubercular)	_	2	_	_
EYE-				
Blepharitis	3	-	_	-
Conjunctivitis	-	1	_	-
Keratitis	-	-	-	1111111
Corneal Ulcer	- 1	-	_	-
Corneal Opacities	-	-	-	_
Defective Vision	6	4	-	-
Squint	-	-	-	-
Other Conditions		-	_	-
Ear-				
Defective Hearing	-	-		-
Otitis Media		>	-	-
Other Ear Diseases	-	-	-	-
Nose and Throat-				
Enlarged Tonsils	1	6	-	-
Adenoids	-	-	-	-
Enlarged Tonsils and Adenoids	-	-	1	-
Other Conditions	1	-	-	
ENLARGED CERVICAL GLANDS (NON-				
TUBERCULAR)		14	-	-
DEFECTIVE SPEECH	-	3	-	-
TEETH—Dental Diseases	7		-	
HEART AND CIRCULATION-				
Heart Disease—Organic	-	_	-	-
Functional	-	8	-	-
Anæmia	4	8	-	-
Lungs-				
Bronchitis	-	-	-	-
Other Non-Tubercular Diseases			_	

RETURN OF DEFECTS.—Continued.

				tine etions.	Spe	cial ctions.
Defect or Dise	ase.		No. referred for Treatment.	No. to be kept under observation.	No. referred for Treatment.	No. to be kept under observation.
TUBERCULOSIS-					1	
Pulmonary—Definite	е		_	1	_	_
Suspect	ted		-	_	-	-
Non-Pulmonary—Gl	ands		-	_	-	-
Sp	ine		-	-	-	
Hi	ip			-	-	-
Ot	ther bones	and				
	joints		-	-	-	-
Sk			-	-	-	_
	her Forms		-	-	-	-
NERVOUS SYSTEM-						
Epilepsy				-	-	-
Chorea			-	-	-	-
Other Conditions			-	-	-	-
DEFORMITIES-						
Rickets			-	-	-	-
			-	1		-
			-	2	-	
OTHER DEFECTS AND DI	SEASES		1	-	-	-

(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT.

	Number o	Percentage of Children	
Group.	Inspected.	Found to require treatment.	found to require treatment.
All Ages	81	13	16%

TREATMENT TABLE.

Minor Ailments.

Disease or Defect.				f Defects to treatment d the year.	
Disease of Defec		Under the Authority's Scheme.	Otherwise.	Total.	
Skin— Ringworm—Scalp			_	\ <u>-</u>	_
Body			_	_	-
Scabies			_	-	-
Impetigo			-	-	
Other Skin Disease			_	_	-
Minor Eye Defects				-	-
Minor Ear Defects			-	-	_
Miscellaneous			_	1	1
Total			_	1	1

Defective Vision.

	Under the Authority's Scheme.	Privately.	Total.
Errors of Refraction—Other Defect or Disease	1	_	1

Defects of Nose and Throat.

Under the Authority's Scheme.	Privately.	Total.
-	2	2

Dental.

Under the Authority's Scheme.	Privately.	Total.
1		1

LEFT WITHOUT HAVING HAD TREATMENT.

There is no machinery for following these up. Dental, 5; Anæmia, 4; Ophthalmic, 3; Other Defects and Diseases, 1.

REPORTS OF INSPECTING MEDICAL OFFICERS.

I submit the reports of Dr. Turner and Dr. Coghill on the results of their inspection of the boys and girls at the Secondary and Continuation Schools:—

REPORT ON MEDICAL INSPECTION AT GIRLS' MUNICIPAL SECONDARY SCHOOL.

During the year there were 309 children examined and 214 re-examined. The outstanding defects found were enlarged tonsils, 49 cases, and enlarged non-tubercular cervical glands, 48 cases, the latter appeared in each case to be due either to infection from the teeth or tonsils, or in many cases to both these causes in combination.

The general physique of the School is decidedly good and the very few cases of spinal curvature found is noteworthy and is due to the careful attention given to general deportment and physical training. Two of these cases of spinal curvature unfortunately were of too serious a nature to be treated by the usual School methods and had to be referred for treatment elsewhere. Both these children are receiving the necessary treatment.

Ninety-two parents were present at the examinations and showed an interest in their children's welfare and a keenness to follow the advice given.

H. E. COGHILL.

REPORT ON THE MEDICAL INSPECTION OF GIRLS AT THE DAY CONTINUATION SCHOOL.

Thirty-five girls were examined during the year and there were five re-examined. Ten parents were present for the examination and all showed an anxiety to do what was considered necessary on behalf of the girls; the one case in which it was considered advisable to have the tonsils removed consented to the operation.

A number of the girls object to this examination and make a point of absenting themselves; these numbered 11. In three cases definite refusals were sent in in writing, these were in addition to those who absented themselves from the examination.

The general physique of those examined was good, and no defects of a grave character were found.

H. E. COGHILL.

MEDICAL EXAMINATION OF THE SECONDARY AND CONTINUATION SCHOOLS (BOYS).

I beg to report that I have examined 46 boys in the Continuation School and 329 boys in the Secondary School during the year 1923.

Flat feet show a very gratifying diminution, and this, I believe, is due to the fact that we are now definitely over the period when the boys showed the results of compulsory poor feeding during the War.

Enlarged tonsils and adenoids have now become a negligible quantity, owing to the very efficient examination and treatment of these conditions in the Corporation Schools. By treatment I especially refer to breathing exercises, which are now universal. Spinal curvatures show a definite increase, but this is really due to the fact that a far higher percentage of scholarships have been obtained by boys living in the poorer parts of the town. Dental caries are still far too numerous and there is often great trouble in persuading

parents to allow their children's teeth to be seen to, but I am glad to report that there is some improvement in the matter. Dental caries largely account for the numerous cases of non-tubercular glands seen.

Parents are showing a gratifying increased interest in the examination and ask numerous questions with an evident desire to try and cure the defects found.

In conclusion, I would like to thank Mr. Blackburn and Mr. Primmer for their whole-hearted co-operation in the examinations and for the way in which they have tried to correct the defects found.

T. TURNER, M.B., B.D.

