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ESSEX EDUCATION COMMITTEE.



REPORT

OF

SCHOOL MEDICAL OFFICER

ON THE

MEDICAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN

FOR THE

Year ended December 31st, 1931.

CHELMSFORD :

Printed by John Dutton, 8, Tindal Street and 91, High Street.



ESSEX EDUCATION COMMITTEE.

PREFACE.

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ESSEX EDUCATION COMMITTEE.

PREFACE.

To the Chairman and Members of the Essex Education Committee.

In accordance with the requirements of the Board of Education, I have the honour to submit to you the Twenty-third Annual Report on Medical Inspection and Treatment for the year ended 31st December, 1931, in the part of the Administrative County of Essex for which the County Council is the Education Authority under the Education Act, 1902.

In the interests of economy, the report for this year is curtailed, whilst in this preface I have endeavoured to refer to the more important factors, making the body of the report mainly a statement of statistical information necessary for continuity of records.

Much of the work of School Medical Inspection is of a routine nature and therefore remarks I have made in my reports of previous years may be taken to apply unless the contrary is indicated.

One omission from the report which I greatly regret is the extracts from the Annual Reports of the individual district School Medical Inspectors who are actually carrying out the work and are in close touch with existing conditions. I hope that in some future year circumstances will be such as to enable the doctors to be given another opportunity of representing their views.

School Population.

Advantage has been taken to include the Census figures in the report. Briefly, the growth of the population and the number of school children may be summarised as follows :—

COUNTY ELEMENTARY EDUCATION AREA.

	1921.	1931.	Increase.	Percentage Increase.
Population (Census) ..	464,330	667,152	202,822	43.7
Average school attendance	56,702	82,979	26,277	46.3

In addition, the medical inspection of 7,779 scholars in secondary and 892 scholars in trade schools is undertaken.

The above figures emphasise the tremendous increase of school population in Essex during the past ten years and the magnitude of the task set your Committee in coping with the demands for school accommodation, staffing and medical inspection.

Staff.

(a) *Medical.* A considerable number of changes occurred in the medical staff but at the end of the year the equivalent whole-time medical staff available was nine School Medical Inspectors.

The County Medical Service suffered a severe loss in December by the death of Dr. A. Gardiner, First Assistant County Medical Officer, who was formerly School Medical Inspector in the Romford and Chingford areas.

(b) *Nursing Staff.* The Nursing Staff was strengthened by the appointment of a relief Health Visitor and an additional Health Visitor in the Rochford area. Nevertheless, owing to the continued growth of the school population, further additional nursing staff will be required and provision has been made in the Estimates for the year 1932-3.

A second Orthopædic Masseuse was appointed in 1931 in connection with the county scheme for the treatment of children suffering from orthopædic conditions.

(c) *Co-ordination.* As in previous years, complete co-ordination and interchange of information have been available between all branches of the County Health service. With the coming into force of the Local Government Act, 1929, every opportunity has been taken to ensure the co-operation of the school medical inspection work with that of the Public Assistance Committee.

Medical Inspections.

Comparative figures showing the number of examinations carried out during 1930 and 1931 are given below :—

			Number examined.	
			1930.	1931.
Three Code Groups	..	..	30,768	32,143
Specials	..	..	7,623	7,182
Re-inspections	..	..	29,851	22,551
			<hr/>	<hr/>
			68,242	61,876
			<hr/>	<hr/>

It will be noted that, despite the changes in the Medical and Nursing Staffs, there has been an increase of 1,375 in the number of examinations in the three routine groups compared with 1930, though the number of re-inspections has fallen from 29,851 in 1930 to 22,551 in 1931. Further particulars can be obtained on reference to Tables IA. and IB. on page 22.

Findings of Medical Inspections.

The Board of Education Tables are given at the end of the report and a perusal of the figures will indicate to some extent the volume of work which has been carried out by the Medical and Nursing Staffs.

Table II A gives particulars of the defects found in the school children examined. The majority of these defects, with suitable treatment, could be ameliorated or removed altogether with advantage to the health of the children and their future education.

Table II B shows a remarkable increase in the number of children found to require treatment. I give below comparisons with the years 1924 and 1930 :—

Code Groups.			Percentage of Children found to require treatment.		
			1924.	1930.	1931.
Entrants	..	..	8.56	12.06	31.54
Intermediates	..	..	11.92	21.59	30.21
Leavers	..	..	10.81	15.43	27.14
All Code Groups	..	..	10.35	17.09	29.84

The reasons for this large increase may be summarised as follows :—

- (a) The introduction of new members of the Medical Staff, many of whom had not had much previous experience of school medical work.
- (b) The further raising of the standard of normal health by the School Medical Inspectors, resulting in an increase in the number of children referred for treatment, with a corresponding reduction in the numbers of children referred for observation. This is illustrated by the following table :—

Year.	No. Examined.	No. referred for Treatment.	No. referred for Observation.	Total.	Percentage.
1930	30,768	5,259	5,446	10,705	34.79
1931	32,143	9,593	3,050	12,643	39.30

- (c) Change in the type of school population by immigration into the County.
- (d) Continued conditions of unemployment and financial stress.

School Hygiene.

It is a pleasure to report that steady progress has been made in the standard of hygiene, both as regards the school buildings and personal hygiene of the scholars. With regard to the latter, much of this is necessarily dependent on careful supervision and encouragement by the teaching staff.

It may not be inopportune to raise here the question of suitable provision being made in the schools for medical inspections. At present in many schools, where all the rooms are in use, considerable disorganisation and inconvenience are caused during the medical inspection. The room provided should be of sufficient size and suitably lighted and heated to enable the inspection to be carried out conveniently and with comfort to the doctor and the child. Moreover, it might be advisable to consider the provision of suitable waiting accommodation for parents, particularly in the larger schools, where such accommodation might be made use of for dealing with minor ailments and thus relieve the strain on the existing clinics.

Minor Ailment Clinics.

Despite the increased clinic accommodation mentioned in the body of the report, additional accommodation is urgently required in the Dagenham area, as well as in other parts of the County. In this connection a scheme is being drawn up in conjunction with the Public Health and Housing Committee for the provision of three

new combined treatment centres each year during the next few years. Suitable sites have been selected at Chingford, Hornchurch and Hadleigh for the first three centres under the scheme. These are in addition to the new combined treatment centre at Laindon, which was approved last year, and the erection of which will shortly be commenced.

Mid-day Meals and Milk Clubs.

Steps have been taken during the year to encourage the provision of mid-day meals in all Central Schools and where there is some concentration of senior pupils.

The number of milk clubs formed by the Head Teachers has also increased and there are now 213 established in the County. Valuable work is being done in this direction and the Head Teachers concerned are to be congratulated on their efforts to promote the health of these scholars by regular consumption of clean milk. It is hoped that special arrangements will be made to provide milk for malnourished children of parents unable to pay for it.

Tonsils and Adenoids.

It will be noted from the figures given on page 28 that there has been a diminution in the number of children receiving operative treatment for tonsils and adenoids, mainly due to want of provision in the Rochford area and southern part of the Billericay area. Negotiations are at present taking place with a view to suitable facilities being made available at Public Assistance Institutions in these areas.

Eye Diseases.

In the report for 1930 I referred to the desirability of the appointment of a Specialist Ophthalmic Surgeon who would be available for examination of difficult cases, and another year's experience tends to confirm the necessity for such an appointment. It may be found possible to co-operate with the Public Assistance and other Committees in regard to such an appointment.

Ear Defects.

An increasing number of children are being referred for treatment in connection with defects of the ear and a more complete and intensive treatment scheme is now necessary. Frequently such conditions are neglected leading to serious results and may in some cases cause death. Undoubtedly, difficult cases of ear disease should be dealt with under the supervision of a specialist.

Dental Treatment.

Early in 1931 your Committee approved of a proposal to amplify the Dental Scheme by the appointment of two whole-time School Dentists and two Dental Attendants. Unfortunately, owing to the financial crisis it was not possible to proceed with the full scheme but in March, 1932, one whole-time Dentist and one Dental Attendant commenced duty. Steps are also being taken to arrange for the appointment of the second Dental Surgeon. In spite of the delay in connection with the whole-time dentists, from page 29 it will be noted that nearly 4,000 more children have received treatment than in 1930.

Open-air Schools.

(a) Day Schools. The Grays Open-air School, which accommodates 60 children, has carried out another year's useful work, as will be seen from the following comments by Dr. W. T. G. Boul, who is responsible for the medical supervision of the children in this school :—

“The value of the school to this district is unquestionable. Many expressions of gratitude have been received from parents, who show a pleasing co-operation with the medical and teaching staffs. Parents of children discharged from the school receive a letter setting out the health routine thereof and explaining how it could be continued at home, emphasis being placed upon the need for its regular observance. Cases of malnutrition coming from homes where unemployment and poverty exist are frequent, and the improvement wrought in the children's health by a course of open-air instruction is very satisfactory.

“In a school where no two children may be suffering from the same condition, knowledge of the domestic circumstances, &c., is very useful, and owing to the keen interest displayed by the teaching staff in each individual scholar, this is usually available. Credit is due to them for their help in this direction.”

It has been said that the value of an open-air school lies mainly in the mid-day meal.

(b) Residential Schools. With the increase in the school population, full use has been made of the beds available at the Ogilvie School of Recovery, Clacton-on-Sea, but it would be of great assistance if additional accommodation were provided in conjunction with the Public Assistance Committee by utilising accommodation in the Tendring area.

Conclusion.

I wish to take this opportunity of again expressing my sincere thanks to the Chairman and Members of the Education Committee and the School Medical Sub-Committee for their kindly advice and assistance during the year. My thanks are also due to the Director of Education, Head Teachers, Clerks to District Education Sub-Committees, as well as to the Medical, Dental, Nursing and Clerical Staffs, for their valuable co-operation and assistance.

I particularly desire to thank the Deputy County Medical Officer, Dr. T. P. Puddicombe, for compiling this report and for his help throughout the year.

W. A. BULLOUGH,

School Medical Officer.

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
CHELMSFORD.

April, 1932.

ESSEX EDUCATION COMMITTEE.

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER FOR 1931.

1. Area and Population.

The population of the Geographical County of Essex according to the Census of 1931 was 1,755,240, allocated as follows:—

(1) Administrative County area, within which the Essex Education Committee is responsible for—

(a) Elementary (and also Secondary) Education .. 667,152

(b) Secondary Education only 531,449

(2) County Boroughs 556,639

In area (1) (a) with an acreage of 927,500 there are 439 elementary schools, the same number as in 1930, consisting of 239 Non-provided and 200 Council. The Council Schools include three special schools for the mentally defective, one open-air class, one special class for the physically defective, and one special class for the partially blind. There are 556 departments and the average attendance for 1931 was 82,979, an increase of 4,167 over that for 1930. There are nine secondary schools with an accommodation for 3,420 pupils.

Area (1) (b) contains 10 secondary schools with an accommodation for 4,290 pupils, also four trade schools with 892 pupils on books.

In the Administrative County there are also 11 aided secondary schools with a total number on books of 3,481 together with a further nine recognised secondary schools with 1,887 pupils on books. Routine medical inspection under the County Scheme is carried out in only one (an aided school) of these 20 schools.

2. Staff, &c.

The following changes in the Medical, Dental and Nursing Staffs took place during 1931:—

*School Medical Inspectors.**(a) Appointments.*

Miles, E., Dobson, O. C., Harper, J. S., Sleigh, J. C., Nelson, F. A. M., Mackenzie, (Mrs.) A. A., Goodwill, (Mrs.) S. D., Fox, (Miss) M. E., Boyle, (Mrs.) S., Ormerod, T. L., Gardiner (Mrs.) A., Bartlett, (Miss) M.

(b) Resignations.

Dobson, O. C., Lobban, G. M. D., Gardiner, A., Haler, D. H., Brown (Mrs.), C. R., Smith (Miss), E. L.

*Dental Staff.**Appointments.*

Weir, D. H., L.D.S., and Weir, R., L.D.S. (Partners) replaced Hawkins, L. G., L.D.S., R.C.S. (deceased).

Cresswell, A. G., L.D.S., Partner to Ritchie, F. C., L.D.S., R.C.S.

*School Nurses.**(a) Appointments.*

Thickens, L., Francis, N. M., Hughes, M. A., Nixon, H. M., Kelly, N. D., Trounce, A., Darrall, E., Plummer, E.

(b) Resignations.

Brown, R. A., Anderson, J., Franks, E. L., Hinde, K.

White, G. M. was transferred to the Central Staff to act as Relief Health Visitor.

3. Co-ordination of Health Work.*(a) Medical Services.*

The total services rendered by the Medical Staff for school medical duties, including administrative duties, represent the equivalent of nine whole-time medical officers. Owing to the various changes of staff during the year, it has been difficult at times to cope with the increasing work but, except in one area, the inspections were practically up to date at the end of the year.

(b) Infectious Disease.

The arrangements continue as in previous years with a view to control and supervision of these diseases.

(c) Nursing Services.

Re-organisation of areas necessitated the appointment of an extra Health Visitor for part of Rochford and Billericay Districts and the employment of part-time services at Waltham Abbey.

Miss G. M. White, who had been in the Billericay District since 1921, was transferred to the Central Office Staff in order to act as Relief Health Visitor in September, 1931.

The number of Health Visitors now occupied in combined duties is 38. In addition, a proportion of the time of the Chief and Assistant Chief Health Nurse is available.

Four Nurses act as whole-time School Nurses in the Dagenham Urban District.

The additions during the year bring the equivalent number of whole-time School Nurses to 19 and this gives an average elementary school population of 4,367 per Nurse.

The number of District Nurse Midwives is 162, an increase of five for 1931. They render useful assistance in most areas.

(d) *Infant and Child Welfare Centres.*

During the year five additional Centres have started at Great Bardfield, Stebbing, Tillingham, Wickham Bishops and Wethersfield. A further four Centres, viz. Aveley, Purfleet, South Ockendon and West Thurrock have been taken over from the local Councils, making the total number of Centres under the County Council 68, an increase of nine for the year. Ante-natal Clinics are also established by the County Council at Braintree, Chingford, Laindon, Hadleigh, Maldon and West Thurrock.

When possible, the services of the Medical Officers already employed on the County Staff are utilized at these centres and clinics.

(e) *Nursery Schools* have not been established.

(f) *Care of Delicate Children under School Age.*

There is no definite scheme for the supervision of the child under five years of age but any ailing child brought to notice is medically examined at either the home, school clinic or welfare centre and advice given the parent. All children in the County child welfare areas who are suffering from physical deformities can be dealt with under the orthopædic scheme.

4. Facilities provided for Children partaking of the Mid-day Meal in School.

The arrangements referred to in previous reports have continued. Milk clubs have been established in 213 schools.

In order to make the scheme a complete success it will be necessary to assure that financial assistance is available for the provision of milk for certain children whose parents cannot afford to pay for it. Such children are frequently more in need of this extra quota of milk than are some of those whose parents can pay.

5. School Hygiene.

The School Medical Inspectors continue to supervise the general hygiene of school buildings as well as the personal hygiene of scholars.

Defects in structure of equipment are reported to the Director of Education.

The following new Schools or departments have been opened :—

Chingford Council Senior.

Clacton Council Senior.

Grays (John Henry Burrows) Central Council.

Dagenham South Wood Lane Council

„ Five Elms Council

Romford Havering Road Council

} Additional departments.

Two schools were permanently closed :—

Earls Colne Coggeshall Road Council.

Leaden Roothing C. of E.

6. Medical Inspection.

(a) *Groups inspected.*

Provision is made for the inspection of the three age groups, the re-inspection of all who require it, and the examination of "specials" brought forward by teacher, nurse or parent.

Tables I A and B record the total examinations made. The grand total shows 61,876 examinations, this being 6,366 less than for 1930. The total school routine examinations were 32,143 or 1,275 in excess of the figures for 1930.

(b) *Ascertainment of Cripples.*

For details of the orthopaedic scheme, see para. 10 (i) on page 14.

(c) *Holding of Inspections off the School Premises.*

This was found a convenience or a necessity in the case of 12 schools.

7. Findings of School Medical Inspection.

The Standard Tables are recorded at the end of this Report in the form required by the Board of Education.

8. Infectious Diseases.

Cases of Smallpox (*variola minor*) continued to occur in Dagenham during the first half of the year; 23 children were reported as having contracted the disease, involving the exclusion of other children as contacts; 11 schools were affected.

Five schools only were closed, three being closed by the Local Sanitary Authority (Measles 1, Diphtheria 1 and Influenza 1), and two on the advice of the School Medical Officer (Measles 1, Whooping Cough 1).

Certificates under para. 15 (ii) of the Board of Education Administrative Memorandum No. 51 in respect of reduced attendance, due to the prevalence of infectious diseases, were issued by the School Medical Officer in the case of 79 schools, the diseases being as follows:—Measles 10, Mumps 5, Chickenpox 15, Scarlet Fever 3, Whooping Cough 8, Influenza 35 and Paratyphoid 3.

9. Following-up.

During 1931, 30,433 visits were made to homes by the School Nurses and a further 8,200 visits by the District Nurse Midwives.

10. Medical Treatment.

In all major conditions requiring treatment similar arrangements to previous years have been followed.

(a) *Minor Ailment Clinics.*

These clinics continue to increase in number. In April, 1931, a Combined Centre was opened at the King George's Hospital, Out-Patient Department, Five Elms, Dagenham.

The number of children in attendance at the clinics shows an increase and especially is this so at Dagenham, where further clinic facilities must be arranged in the near future. It is proposed to commence clinics during 1932 at Hornchurch, Stanford-le-Hope and Laindon.

During 1931 at the 25 Minor Ailment Clinics 14,133 individual children made 28,830 attendances.

(b) *Treatment of Tonsils and Adenoids.*

Table IV Group III shows that 2,120 children received operative treatment (including 1,526 carried out under the Committee's Scheme) a decrease of 793 on the figure for 1930. 848 additional children received other forms of treatment for these conditions.

(c) *Tuberculosis.*

During 1931, 174 scholars (boys 95, girls 79) classified as follows, received sanatorium treatment:—

	Boys.	Girls.	Total.
Pulmonary conditions	12	9	21
Non-pulmonary conditions	67	55	122
For observation	16	15	31
	<hr/> 95	<hr/> 79	<hr/> 174

(d) *Skin Diseases.*

Cases of scabies were comparatively few, being only 197. Impetigo has again been prevalent, 2,740 cases being treated. This is, however, 664 less than for 1930. Cases of ringworm of the scalp treated were 141 and ringworm of the skin a similar number. Eight cases of the former were treated by epilation by X-rays with satisfactory results.

(e) *External Eye Diseases.*

864 children received treatment, all except 22 being dealt with under the Committee's scheme.

(f) *Vision.*

Table IV, group II, shows that 3,957 received treatment, 3,270 being treated under the Committee's scheme. In all, glasses were prescribed for 1,655 children, and 1,487 are recorded as having actually obtained them.

(g) *Minor Ear Defects.*

950 children received treatment, 860 of these being under the Committee's scheme.

(h) *Dental Treatment.* (See Table IV, group IV).

The Dentists have devoted 979 half-day sessions to the work, an increase of 139 (inspections, 32, treatment, 107). The result of these extra sessions is shown by the following figures:—21,108 children were inspected (an increase of 3,639) of whom 72 per cent. were recommended treatment. 13,011 children actually received treatment under the Committee's scheme, an increase of 3,909 on the previous year. There has thus been some appreciable progress, the numbers of attendances for treatment being 13,951.

Extractions continue in excess of fillings, being 28,781 (4,170 permanent teeth) as compared to 3,504 (2,895 permanent teeth) fillings; i.e. a ratio of 8.2 extractions to one filling. Taking permanent teeth alone, extractions still exceed in the ratio of 1.4 extractions to one filling.

Arrangements have been made during the year for the use of the Dental Surgery at the Essex County Hospital, Colchester, when needed, for extraction clinics. Arrangements have also been made with the Education Committee of the Boroughs of Leyton and Walthamstow for treatment to be available at the local clinics for scholarship-holders who reside in these Boroughs.

(i) *Crippling Defects.*

Crippling defects due to tuberculosis are referred to in para. 10 (c). In addition, 15 children (boys 13 girls 2) are accommodated in Residential Cripple Schools. The Physically Defective Class at Halbutt Street, Dagenham, continues to be of great benefit to children suffering from physical defects and at the end of the year 108 children (58 boys, 50 girls) were in attendance. These include 38 (16 boys, 22 girls) with heart conditions.

Work under the Orthopædic Scheme has increased and in September, 1931, a second whole-time Orthopædic Masseuse, Miss M. Scott, was appointed to carry out after-treatment in the southern part of the County, thereby replacing certain part-time assistants.

After-treatment centres have been carried on as in the previous year. Arrangements with Colchester Hospital for after-treatment have terminated, and arrangements have been made temporarily with the Colchester Borough Committee for the County Masseuse to continue after-care at the Borough Clinic. A Centre has been commenced at Braintree.

Mr. B. Whitchurch Howell, F.R.C.S., has continued his work in the County.

Refusal of treatment is still met with in a few cases.

A summary of the work carried out during 1931, is as follows :—

63 ascertainment and advisory clinics were held, viz., 7 at Woodford; 6 each at Dagenham, Grays and Tilbury; 4 each at Colchester, Clacton and Harwich; 3 each at Romford, Braintree, Halstead, Brentwood, Maldon and Chelmsford; 2 each at Epping, Saffron Walden, Stansted and Southend.

881 children (470 boys, 411 girls) were examined and reported on at these clinics; including 152 (87 boys, 65 girls) new cases, and 729 (383 boys, 346 girls) who had been examined previously by the Surgeon.

These examinations are classified as follows :—

Congenital defects, club foot, &c.	..	..	296
Infantile paralysis and after effects of..	..	..	165
Spinal curvature, &c.	..	..	142
Paralysis (Hemiplegia, &c.)..	..	..	32
Cleft palate—including hare lip	..	..	6
Other deformities, &c., including injuries, &c.	..	..	224
			<hr/>
			865
			<hr/>

A summary of the history of cases and advice given shows the following :—

With history of having already had hospital treatment	237
To continue present form of treatment	116
Advised admission to hospital	77
Advised apparatus or modified boots	155
Advised massage or exercises, &c.	64
Advised observation	283
No treatment required	113
Discharged cured	57

In addition, 143 children (80 boys, 63 girls) under school age were examined under the County Scheme, and 229 for other local Authorities, making a total number of 1,253. Many of these were presented for examination more than once. 44 school children (25 boys, 19 girls) completed a course of hospital treatment under the County scheme, and 12 (5 boys, 7 girls) remained in hospital at the end of the year; whilst 26 children awaited hospital treatment as compared to 21 at the end of 1930. These figures do not include cases where the parents definitely refused treatment.

11. Open-air Education.

(a) *Open-air Classes.*

In many schools classes are from time to time held in the playgrounds and every facility should be rendered to increase this practice in suitable weather.

(b) *School Journeys.*

Arrangements have been made during the year by several schools to organise school journeys or school camps during the Easter or Summer Holidays and these visits have included Belgium, Dymchurch, Shanklin, and parts of the County. In addition, a good many educational visits have been undertaken mainly to places of interest in London.

(c) *School Camps.*

Nil.

(d) *Open-air Classrooms.*

Nil.

(e) *Open-air Day Schools.*

The Grays School, with accommodation for 60 children (mixed), has shown good results during the year and there has been little difficulty in keeping the places filled with suitable children. The routine of the school continues to be carried out on the lines set out in the Report for 1930, with the exception that there has been a modification in charges for meals.

There has been no addition to the washing facilities. This should be arranged and also it would add greatly to the benefits if a larger space could be provided for recreation.

During the year 67 scholars were admitted whilst 58 were discharged.

(f) *Residential Open-air Schools.*

The 15 beds at the Ogilvie School, Clacton, have been kept occupied. 28 children (boys 18, girls 10) have had periods of treatment there during the year and of these 15 were new entrants.

Various short periods of treatment have been given to children in Open-air Schools outside the County.

The child population has now increased to such proportions that it would undoubtedly be of great assistance if a Residential Open-air School were available somewhere near the sea under the control of the Essex County Council, thereby providing extra beds as well as having complete control of admissions and discharges.

12. *Physical Training.*

The Director of Education has kindly supplied the following information :—

The arrangements made by the Committee for the inspection and supervision of the Physical Training in the schools have continued, and the advice and help given to the teachers responsible for the subjects are still much appreciated. Miss F. A. Morgan, Physical Training Instructress at the Saffron Walden Training College, assisted by Miss Collman, Physical Training Instructress at the Clacton and Harwich County High Schools, and Miss Craig, Physical Training Instructress at the Braintree County High School, have all carried out their duties with a large measure of success.

Their work is directed to the demonstration of right methods to be followed by the teachers in their training and to the actual teaching, where needed, of the scholars in the schools visited. Following up visits are made as frequently as possible in order to watch and report progress and there is every reason to believe that not only are the advice and help given by the Instructresses much welcomed, but also that the work being done by them is leading to a gradual uplift in the quality of the Physical Exercises done.

During the year several senior schools where a member of the staff is specialising in Physical Training have been provided with special apparatus for teaching purposes.

13. Provision of Meals.

The arrangement for the provision of meals at three Centres, viz., St. Mary's Church Hall, Goresbrook Road, St. Mary's Church Hall, Grafton Road, and Halbutt Street School, Dagenham, have continued during the year. The following are particulars for 1931 :—

Dagenham area.

(i) Average cost per meal for food only	..	..	1.67d.
(ii) Average total cost per meal	..	..	3.81d.
(iii) No. of individual children for whom meals provided :—			
(a) free	..	..	(see below) *
(b) for payment	..	..	43
(iv) No. of dinners provided :—			
(a) free	..	..	81,161
(b) for payment	..	..	1,228

*320 in January, increasing gradually to 470 in March, decreasing to 330 in September and rising again to 500 in December.

14. School Baths.

During the year 2,660 baths were given at Grays and 4,601 at Tilbury Baths. This is 3,201 less than in 1930.

15. Co-operation of Parents.

Whilst co-operation on the whole is good, and especially so if treatment can be provided free, there are cases in which every effort is required on the part of the staff to stimulate the parent to obtain any necessary treatment.

The attendance of parents at routine examinations was 69 per cent.

Refusal to present the child for examination was made in 112 cases.

16. Co-operation of Teachers.

The Teachers, as a general rule, render valuable assistance, and in many cases are influential in obtaining the parents' consent to treatment.

17. Co-operation of Attendance Officers has continued as previously reported.

18. Co-operation of Voluntary Bodies, &c.

Thanks are due to the following Voluntary Agencies for assistance :—Certain Voluntary and Special Hospitals for treatment of Essex school children, Care of

Children's Committees, County Nursing Association, County Association for the Care of the Blind, Essex Voluntary Association for Mental Welfare, Public Assistance Committee, National Society for Prevention of Cruelty to Children, British Red Cross Society, Society of the Order of St. John, Invalid Children's Aid Association and Almoners of Voluntary Hospitals.

Care of Children Committees.

In the ten areas in which there are Care Committees, most excellent and invaluable work is being done by these Committees in assisting necessitous cases from funds available. Help given consists of assistance with surgical appliances, spectacles, food adjuvants, clothing, boots, transport fares to clinics, hospital, &c., together with general supervision of the school child.

19. Blind, Deaf and Epileptic Children.

Table III shows the number of children as at present ascertained and the type of education afforded.

(a) *Multiple defects*, sufficiently severe to be noted, show that there are 23 cases (boys 12, girls 11), and these are catered for as shown in Table III.

(b) *Blind.*

There are 44 children certified as blind under the Education Act, and of these 38 (boys 24, girls 14) are at certified Special Schools, and the remainder await vacancies; the Residential School receiving the majority of cases is the East Anglian School, Gorleston and there are a few cases at the Brighton Blind School.

Of the partially blind, which number 66, the majority, viz., 39, remain in elementary schools with supervision, and, as far as possible, special facilities such as sitting in the front seat of the class, &c. Of the remainder, 20 are in attendance at the Grays Myope Class and thus suitably catered for. The following is an extract from the Medical Officer's report on the year's work in connection with this class:—

Sight Saving (Myope) Class.

This is held at Quarry Hill School, Grays, and children from all parts of the Orsett District are admitted.

Classification of Visual Defects.

Myopia 12, cataract 2, dislocation of lenses 1, dislocation with myopia 1, nystagmus 1, nystagmus with myopic astigmatism 1, strabismus 1, ophthalmia neonatorum, myopia and cataract 1.

The children are divided into Division 1 (Infants), Division 2 (Juniors 8-11 years) and Division 3 (Seniors over 11 years).

(c) *Deaf.*

Fifty-three children are classed as deaf, and of these 31 (boys 16, girls 15) are receiving the necessary education by being in attendance at Special Schools.

There are only three children classed as partially deaf.

d) *Epileptics.*

Twenty-one children are registered as suffering from epilepsy, and of these, nine only are in certified schools.

The sufferer from severe epilepsy is essentially one who should be provided with residential accommodation where continued treatment and education can be combined. These cases in a very large percentage are permanently afflicted.

There are 60 children registered as suffering from minor epilepsy, and in all probability 50 per cent. of these should be in Residential Schools, as their future is certainly more hopeful than that of the 'grand mal' cases.

(e) *Mentally Defective Children.*

There are now 487 children (boys 322 girls 165) on the register, an increase of 46 on the previous year. Of these, 164 (boys 111 girls 53) are in attendance at special schools, 39 (boys 24 girls 15) being in residential schools.

The numbers attending at the three day special schools under the Essex Education Committee were as follows:—

			Boys	Girls.	Totals.
Grays	..	..	22	12	34
Woodford	..	..	25	11	36
Romford	..	..	37	9	46
Totals			84	32	116

Nine children (3 boys and 6 girls) attended the Walthamstow Day Special Class.

The rather unsatisfactory temporary quarters continued at the Romford Special School and there is still need for the provision of accommodation for mentally defective children in the Dagenham area.

Forty-three children were notified to the County Committee for the Care of the Mentally Defective as Feeble-minded (17), Imbeciles (20), Idiots (3), others (3).

The Head Teachers of the Grays and Romford Special Schools, as in previous years, follow up the scholars after they leave school and give assistance in obtaining employment. Of 13 children leaving the Grays Special School, 3 left the district, 3 girls are employed as Factory-hand, Nursemaid, and at home respectively, 2 boys on paper rounds and in a coal yard, 2 boys casually employed and 3 boys unemployed.

With regard to those who have left the Romford Special School, the Head Teacher reports on 20 boys and 11 girls who are regularly employed in various situations and giving satisfaction. Two boys and 1 girl are reported as not giving satisfaction.

20. **Nursery Schools** are not established.

21. **Secondary Schools** (see also Para. 1).

There has been increased accommodation provided in the Secondary Schools maintained by the Committee during the year, the present accommodation for pupils being 7,710 places as compared to 7,460 for 1930.

	No.	Accommodation.	No. on Books.	
			Boys.	Girls.
Schools in Part III area ..	10	.. 4,290 ..	1,931	.. 2,355
Schools in remainder of County ..	9	.. 3,420 ..	1,239	.. 2,254
Totals ..	19	.. 7,710 ..	3,170	.. 4,609

Trade Schools in Part III area number four with 892 pupils on books (boys 669, girls 223).

Arrangements are made for the medical examination of the following pupils :—

(1) *Routine* :—

(a) Entrants.

(b) Those attaining the age of 12 years.

(c) Those attaining the age of 15 years.

(2) *Specials*.

(3) *Re-inspections*, i.e., those referred for treatment or observation at previous inspections.

Routine medical examinations have been carried out in the above schools and one aided school, resulting in 1,632 pupils being examined together with 1,027 re-examinations and 21 specials. Details of these are set in Table II S. on page 31.

The number of individual pupils found at routine inspections to require treatment was 556 (exclusive of uncleanliness and dental defects) showing 34 per cent. as against 20 per cent. for 1930, an increase of 14 per cent. of defects. This increased percentage coincides with the increase shown in the elementary school children, is significant and would tend to indicate that the same factors predominate in the child population throughout the County. As in the case of the elementary school children it is noticeable that there has been an increase in the number referred for treatment and a decrease in the number referred for observation. When both figures are taken together, the total increase percentage over that for 1930 is only 2 per cent.

Of the scholars referred for treatment, defective vision, nose and throat conditions and dental defects are again prominent showing percentages of 12.3, 6.7 and 18.7 respectively.

The Committee have no arrangements for treatment of secondary scholars except in necessitous cases, when special consideration is given.

Parents are referred to their own medical attendant in cases where children are found to need treatment.

22. Convalescent Schools.

Arrangements are made whereby certain children are given various periods of stay in convalescent schools outside the County area and during the year three beds were retained at the Russell-Cotes Convalescent School, Parkstone, Bournemouth.

3. Miscellaneous.

a) Bursar and Scholarship Candidates.

Table II S. gives detail of results found from the examination of 595 candidates. Of these 144 or 24 per cent. show conditions requiring treatment as compared to 14.9 per cent. for 1930. About 8 per cent. are charted as having defects of vision against 10.5 for 1930. In addition, 132 or 22 per cent. as against 21 per cent. for 1930, were referred for dental treatment. It is necessary that these defects should be treated as a preliminary measure before the scholarship is taken up. From the standpoint of obtaining treatment, this is perhaps the most hopeful part of the work of the school medical service. Parents are not only willing but anxious to co-operate when it is a question of the child being accepted for a scholarship.

b) Teachers.

As in previous years, from time to time, examinations of teachers are carried out by the Medical Staff.

During the year 25 teachers, including 19 supplementary, 1 intending, and 5 monitresses were thus examined and reports submitted.

c) Propaganda Lectures, &c.

The Medical and Nursing Staffs have continued to assist in Health Propaganda by lectures, talks to parents, Women's Institutes, &c.

4. Employment of Children & Young Persons Regulations.

The following 592 examinations (an increase of 212 on 1930) have been made, the class of employment being given as set out below :—

			Boys.	Girls.	Totals.
(1) Presented for examination .. ..	..	..	574	22	596
(2) Passed as fit .. ..	..	..	555	22	577
Employments :—					
(a) Farm work .. ..	..	..	8	—	8
(b) Home .. ..	..	..	19	12	31
(c) Gardening .. ..	..	..	18	—	18
(d) Paper delivery .. ..	..	..	291	6	297
(e) Milk .. ..	..	..	43	1	44
(f) Errands .. ..	..	..	65	1	66
(g) Others .. ..	..	..	111	2	113

5. Special Inquiries.

The Medical Staff available have been fully occupied during the year and there have been no special investigations or inquiries worthy of report.

MEDICAL INSPECTION RETURNS.

ELEMENTARY SCHOOLS.

TABLE 1.

RETURN OF MEDICAL INSPECTIONS, YEAR ENDED 31ST DECEMBER, 1931.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections.

	Boys.	Girls.	Total.
Entrants	5,232	4,875	10,107
Intermediates	7,423	6,402	13,825
Leavers	4,487	3,724	8,211
Totals	17,142	15,001	32,143

B.—OTHER INSPECTIONS.

	Boys.	Girls.	Total.
Number of Special Inspections ..	4,096	3,086	7,182
Number of Re-Inspections ..	12,925	9,626	22,551
Totals	17,021	12,712	29,733

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31st DECEMBER, 1931.

Defect or Disease.		Routine Inspections.		Special Inspections.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring Treatment.
(1)		(2)	(3)	(4)	(5)
	Malnutrition	959	199	355	7
	Uncleanliness :	215	52	160	3
	(See Table IV., Group V.)				
Skin	Ringworm :				
	Scalp	6	—	31	—
	Body	5	1	26	—
	Scabies	17	1	75	—
	Impetigo	113	11	1046	—
	Other Diseases (Non-Tuberculous)	198	61	1401	3
Eye	Blepharitis	155	30	108	—
	Conjunctivitis	19	1	90	—
	Keratitis	2	—	2	—
	Corneal Opacities	3	—	7	—
	Defective Vision (excluding Squint)	1852	347	416	11
	Squint	102	17	6	1
	Other Conditions	73	24	156	3
Ear	Defective Hearing	121	49	56	3
	Otitis Media	24	4	159	—
	Other Ear Diseases	115	37	110	—
Nose and Throat	Enlarged Tonsils only	1081	1215	239	22
	Adenoids only	271	151	67	—
	Enlarged Tonsils and Adenoids	1997	155	384	2
	Other Conditions	585	111	244	3
	Enlarged Cervical Glands (Non-Tuberculous)	354	214	193	21
	Defective Speech	12	24	14	—
	Teeth—Dental Diseases	10724	372	558	3
	(See Table IV., Group IV.)				
Heart and Circulation	Heart Disease :				
	Organic	11	44	31	3
	Functional	79	316	34	10
	Anæmia	651	77	124	6
Lungs	Bronchitis	50	28	135	1
	Other Non-Tuberculous Diseases	327	242	119	13
Tuberculosis	Pulmonary :				
	Definite	7	4	5	—
	Suspected	20	39	29	5
	Non-Pulmonary :				
	Glands	6	—	9	1
	Spine	1	—	4	—
	Hip	1	2	2	—
	Other Bones and Joints	1	—	3	—
	Skin	—	—	1	—
	Other Forms	—	—	4	—
Nervous System	Epilepsy	11	6	15	2
	Chorea	21	18	92	1
	Other Conditions	64	57	99	5
Deformities	Rickets	56	19	21	1
	Spinal Curvature	131	25	23	1
	Other Forms	325	101	172	4
	Other Defects and Diseases	885	502	950	19

TABLE II.—continued.

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

GROUP. (1)	NUMBER OF CHILDREN.		Percentage of children found to require Treatment. (4)
	Inspected. (2)	Found to require Treatment. (3)	
CODE GROUPS :—			
Entrants	10107	3188	31.54
Intermediates	13825	4176	30.21
Leavers	8211	2229	27.14
Total (Code Groups)	32143	9593	29.84
Other Routine Inspections	—	—	—

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA IN 1931.

			Boys.	Girls.	Total.
Children suffering from the following types of Multiple Defect, i.e., any combination of Total Blindness, Total Deafness, Mental Defect, Epilepsy, Active Tuberculosis, Crippling (as defined in penultimate category of the Table), or Heart Disease (See page 27).			12	11	23
Blind (including partially blind)	(i) Suitable for training in a School for the totally blind.	At Certified Schools for the Blind ...	24	14	38
		At Public Elementary Schools ...	4	1	5
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	—	1
	(ii) Suitable for training in a School for the partially blind.	At Certified Schools for the Blind or partially blind ...	10	10	20
		At Public Elementary Schools ...	23	16	39
		At other Institutions ...	2	—	2
		At no School or Institution ...	3	2	5
Deaf (including deaf and dumb and partially deaf)	(i) Suitable for training in a School for the totally deaf or deaf and dumb.	At Certified Schools for the Deaf ...	16	15	31
		At Public Elementary Schools ...	5	6	11
		At other Institutions ...	1	—	1
		At no School or Institution ...	5	5	10
	(ii) Suitable for training in a School for the partially deaf.	At Certified Schools for the Deaf or partially Deaf ...	—	—	—
		At Public Elementary Schools ...	1	—	1
		At other Institutions ...	—	2	2
		At no School or Institution ...	—	—	—

TABLE III—continued.

			Boys.	Girls.	Total.
Mentally Defective.	Feeble-minded (cases not notifiable to the Local Control Authority.)	At Certified Schools for Mentally Defective Children ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	111 165 3 43	53 76 5 31	164 241 8 74
	Notified to the Local Control Authority during the year.	Details given in para. 19 (e).	—	—	—
Epileptics	Suffering from severe epilepsy.	At Certified Schools for Epileptics ... At Certified Residential Open Air Schools ... At Certified Day Open Air Schools ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	6 — — 4 1 4	3 — — 1 — 2	9 — — 5 1 6
	Suffering from epilepsy which is not severe.	At Public Elementary Schools ... At no School or Institution ...	25 11	20 4	45 15
Physically Defective	Active pulmonary tuberculosis (including pleura and intrathoracic glands).	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 ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	13 — — 28 — 9	7 — — 22 — 6	20 — — 50 — 15
	Quiescent or arrested pulmonary tuberculosis (including pleura and intrathoracic glands).	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 ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	— — — 24 — 1	— — — 16 — —	— — — 40 — 1
	Tuberculosis of the peripheral glands.	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 ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	10 — — 68 — —	5 — — 41 — —	15 — — 109 — —
	Abdominal 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 ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	2 — — 12 — —	1 — — 11 — —	3 — — 23 — —

TABLE III—continued.

			Boys.	Girls.	Total.
Physical Defective continued.	Tuberculosis of bones and joints (not including deformities due to old tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board ...	12	9	21
		At Public Elementary Schools ...	59	23	82
		At other Institutions ...	—	1	1
		At no School or Institution ...	1	3	4
	Tuberculosis of other organs (skin, etc.).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board ...	1	—	1
		At Public Elementary Schools ...	2	8	10
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	Delicate children (<i>i.e.</i> , all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School.	At Certified Residential Cripple Schools ...	—	—	—
		At Certified Day Cripple Schools ...	16	6	22
		At Certified Residential Open Air Schools ...	15	7	22
		At Certified Day Open Air Schools ...	35	21	56
		At Public Elementary Schools ...	340	202	542
		At other Institutions ...	3	—	3
		At no School or Institution ...	21	29	50
	Crippled Children (other than those with active tuberculous disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Hospital Schools ...	5	7	12
		At Certified Residential Cripple Schools ...	13	2	15
		At Certified Day Cripple Schools ...	26	22	48
		At Certified Residential Open Air Schools ...	—	—	—
		At Certified Day Open Air Schools ...	—	—	—
		At Public Elementary Schools ...	263	244	507 (8)*
		At other Institutions ...	1	2	3 (1)*
		At no School or Institution ...	31	44	75 (—)
	Children with heart disease, <i>i.e.</i> , children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public elementary school.	At Certified Hospital Schools ...	1	4	5
		At Certified Residential Cripple Schools ...	—	—	—
		At Certified Day Cripple Schools ...	16	22	38
		At Certified Residential Open Air Schools ...	—	—	—
		At Certified Day Open Air Schools ...	—	—	—
		At Public Elementary Schools ...	33	28	61
		At other Institutions ...	1	1	2
		At no School or Institution ...	13	13	26

* Figures in brackets show number of children recommended admission to a Residential School.

PARTICULARS OF CHILDREN WITH MULTIPLE DEFECTS.
SEE TABLE III.

		Boys.	Girls.	Total.
Totally Blind and Mentally Defective.	At Certified Schools for the Blind ...	—	1	1
	At no School or Institution ...	—	1	1
Totally Blind, Mentally Defective and Crippled.	At other Institutions ...	—	2	2
Totally Deaf and Mentally Defective.	At no School or Institution ...	1	—	1
Mentally Defective and Crippled.	At Certified Schools for the Mentally Defective	2	—	2
	At Public Elementary Schools ...	4	3	7
	At no School or Institution ...	3	2	5
Mentally Defective and Epileptic.	At Certified School for Mentally Defective ...	1	—	1
	At Public Elementary Schools ...	—	1	1
	At no School or Institution ...	1	—	1
Crippled and Epileptic.	At Certified Hospital School for Physically Defective ...	—	1	1

TABLE IV.

RETURN OF DEFECTS TREATED DURING 1931.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group V.)

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total (4)
<i>Skin—</i>			
Ringworm-Scalp...	132	9	141
Ringworm-Body ...	141	—	141
Scabies ...	195	2	197
Impetigo ...	2732	8	2740
Other skin disease ...	2500	38	2538
<i>Minor Eye Defects</i> ... (External and other, but excluding cases falling in Group II.).	842	22	864
<i>Minor Ear Defects</i> ...	860	90	950
<i>Miscellaneous</i> ... (e.g., minor injuries, bruises, sores, chilblains, &c.)	6996	1403	8399
Total ...	14398	1572	15970

TABLE IV.—*continued.*

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

Defect or Disease.	No. of Defects dealt with.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report)	3270	263	424	3957
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	—	4	—	4
Total	3270	267	424	3961

Total number of children for whom spectacles were prescribed

(a) Under the Authority's Scheme	1515
(b) Otherwise	140

Total number of children who obtained or received spectacles

(a) Under the Authority's Scheme	1351
(b) Otherwise	136

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

Number of Defects.				
Received Operative Treatment.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme—in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
(1)	(2)	(3)	(4)	(5)
1526	594	2120	848	2968

TABLE IV.—continued.

GROUP IV.—DENTAL DEFECTS.

Number of Children who were :—

(a) Inspected by the Dentist :

Routine Age Groups	5 ..	2168	Total ...	21047
	6 ...	2739		
	7 ...	2906		
	8 ...	2399		
	9 ...	2556		
	10 ...	2657		
	11 ...	2431		
	12 ...	1568		
Specials	13 ...	1337	Total ...	21168
	14 ...	286		

Specials 61

Total ... 21168

(b) Found to require treatment ... 15207

(c) Actually treated 13011

(2) Half-days devoted to :—

Inspection	140	Total ...	979
Treatment	839		

(3) Attendances made by children for treatment ... 13951

(4) Fillings :—

Permanent teeth	2895	Total ...	3504
Temporary teeth	609		

(5) Extractions :—

Permanent teeth	4170	Total ...	28781
Temporary teeth	24611		

(6) Administrations of general anæsthetics for extractions ... 7773

(7) Other operations :—

Permanent teeth	578	Total ...	1464
Temporary teeth	886		

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i.) Average number of visits per school made during the year by the School

Nurses 12

(ii.) Total number of examinations of children in the Schools by School Nurses ... 306,063

(iii.) Number of individual children found unclean ... 3,670

(iv.) Number of children cleansed under arrangements made by the Local

Education Authority Nil

(v.) Number of cases in which legal proceedings were taken :—

(a) Under the Education Act, 1921 14

(b) Under School Attendance Bye-laws Nil

SECONDARY SCHOOLS.

TABLE I. S.

RETURN OF MEDICAL INSPECTIONS, YEAR ENDED 31ST DECEMBER, 1931.

A.—ROUTINE MEDICAL INSPECTION.

Number of Code Group Inspections.

Age.	Under 12	12	13	14	15 & over.	Totals.
Boys	103	101	97	30	144	475
Girls	292	157	122	105	481	1157
Totals... ..	395	258	219	135	625	1632

B.—OTHER INSPECTIONS.

	Special Cases.	Re-examinations.
Boys	—	56
Girls	21	971
Totals	21	1027

TABLE II, S.
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR
ENDED 31ST DECEMBER, 1931.

Defect or Disease.		Routine Inspections.		Specials.	
		No. referred for Treatment.	No. requiring to be kept under observation, but not referred for Treatment.	No. referred for Treatment.	No. requiring to be kept under observation, but not referred for Treatment.
(1)		(2)	(3)	(4)	(5)
Skin	Malnutrition	30	2	1	—
	Uncleanliness	1	—	—	—
	(See Table IV., Group V.)				
	Ringworm :				
	Scalp	—	—	—	—
	Body	—	—	—	—
	Scabies	—	—	—	—
Eye	Impetigo	1	—	—	—
	Other Diseases (Non-Tuberculous)	12	3	2	—
	Blepharitis	6	—	1	—
	Conjunctivitis	—	—	—	—
	Keratitis	—	—	—	—
	Corneal Opacities	—	—	—	—
	Defective Vision (excluding Squint)	202	50	3	1
Ear	Squint	6	—	—	—
	Other Conditions	2	—	—	—
	Defective Hearing	4	2	1	—
	Otitis Media	12	—	—	—
Nose and Throat	Other Ear Diseases	—	—	—	—
	Enlarged Tonsils only	50	56	1	3
	Adenoids only	3	—	1	—
	Enlarged Tonsils and Adenoids	12	4	—	—
Enlarged Cervical Glands (Non-Tuberculous)	Other Conditions	45	2	—	—
	Defective Speech	4	3	—	—
	Defective Speech	1	—	—	—
	Teeth—Dental Diseases	306	5	4	—
Heart and Circulation	(See Table IV., Group IV.)				
	Heart Disease :				
	Organic	1	—	—	—
	Functional	4	28	—	1
Lungs	Anæmia	21	6	—	—
	Bronchitis	—	—	—	—
	Other Non-Tuberculous Diseases	16	9	—	—
Tuberculosis	Pulmonary :				
	Definite	—	—	—	—
	Suspected	—	—	—	—
	Non-Pulmonary :				
	Glands	—	—	—	—
	Spine	—	1	—	—
	Hip	—	—	—	—
	Other Bones and Joints	—	—	—	—
	Skin	—	—	—	—
Nervous System	Other Forms	—	—	—	—
	Epilepsy	—	—	—	—
	Chorea	1	—	—	—
	Other Conditions	4	1	2	—
Deformities	Rickets	—	1	—	—
	Spinal Curvature	34	4	—	—
	Other Forms	99	12	—	—
Other Defects and Diseases		73	14	4	1

Number of Individual Children found to require treatment (excluding uncleanliness and dental disease) ... 556

TABLE III. S.
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION, YEAR ENDED
31ST MARCH, 1931.
SCHOLARSHIP HOLDERS, BURSARS, ETC.

Defect or Disease.					Routine Inspections.		Special Inspections.	
					Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)					(2)	(3)	(4)	(5)
	Malnutrition	...	...	...	17	8	—	—
	Uncleanliness	...	...	...	—	—	—	—
Skin	Ringworm :							
	Scalp	...	...	...	—	—	—	—
	Body	...	...	...	—	—	—	—
	Scabies	...	...	...	—	—	—	—
	Impetigo	...	...	...	—	—	—	—
	Other Diseases (Non-Tuberculous)	...	...	...	—	1	—	—
Eye	Blepharitis	...	...	...	—	—	—	—
	Conjunctivitis	...	...	...	—	—	—	—
	Keratitis	...	...	...	—	—	—	—
	Corneal Opacities	...	...	...	—	—	—	—
	Defective Vision (excluding Squint)	...	...	...	47	25	—	—
	Squint	...	...	...	—	—	—	—
	Other Conditions	...	...	...	6	8	—	—
Ear	Defective Hearing	...	...	...	1	—	—	—
	Otitis Media	...	...	...	—	—	—	—
	Other Ear Diseases	...	...	...	—	—	—	—
Nose and Throat	Enlarged Tonsils only	...	...	...	26	13	—	—
	Adenoids only	...	...	...	1	—	—	—
	Enlarged Tonsils and Adenoids	...	...	...	7	—	—	—
	Other Conditions	...	...	...	24	—	—	—
	Enlarged Cervical Glands (Non-Tuberculous)	...	...	...	3	3	—	—
	Defective Speech	...	...	...	—	—	—	—
	Teeth—Dental Disease	...	*	...	132	4	—	—
Heart and Circulation	Heart Disease :							
	Organic	...	...	...	—	—	—	—
	Functional	...	...	...	7	10	—	—
	Anæmia	...	...	...	8	—	—	—
Lungs	Bronchitis	...	...	...	—	—	—	—
	Other Non-Tuberculous Diseases	...	...	...	1	3	—	—
Tuberculosis	Pulmonary							
	Definite	...	...	...	—	—	—	—
	Suspected	...	...	...	—	—	—	—
	Non-Pulmonary :							
	Glands	...	...	...	—	—	—	—
	Spine	...	...	...	—	—	—	—
	Hip	...	...	...	—	—	—	—
	Other Bones and Joints	...	...	...	—	—	—	—
Nervous System	Skin	...	...	...	—	—	—	—
	Other Forms	...	...	...	—	—	—	—
	Epilepsy	...	...	...	—	—	—	—
Deformities	Chorea	...	...	...	—	—	—	—
	Other Conditions	...	...	...	—	—	—	—
	Rickets	...	...	...	—	—	—	—
	Spinal Curvature	...	...	...	6	—	—	—
	Other Forms	...	...	...	26	7	—	—
	Other Defects and Diseases	...	...	...	6	3	—	—

Total number examined ... 595

Number of Individual Children found to require Treatment (excluding uncleanliness and dental diseases) ... 144



