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Borough of Harrogate.

ANNUAL REPORT

OF THE

SCHOOL

MEDICAL OFFICER

FOR

1924

BY

JAMES MAIR, M.B., D.P.H.

School Medical Officer.

*To the Chairman and Members of the
Harrogate Education Committee.*

LADIES AND GENTLEMEN,

I have the honour to submit to you for your information and consideration my Annual Report on the work of the School Medical Service for the year ended 31st December, 1924.

The report is on the lines indicated by the Board of Education, and while it has been condensed as much as possible it is believed to contain all essential information.

I have to thank the Members of the Education Committee, the Director of Education, and his Staff for the courtesy and help always shown to my department and myself.

I have also to thank the members of my own Staff, without whose loyal assistance, always willingly given, the work could not be carried on.

I am, Ladies and Gentlemen,

Your obedient servant,

JAMES MAIR,
School Medical Officer.

5 Haywra Crescent,
Harrogate,
April, 1925.

THE EDUCATION COMMITTEE.

Chairman :

COUNCILLOR A. L. FOSTER.

Vice-Chairman :

COUNCILLOR J. A. WHITEOAK.

Members of Committee :

THE MAYOR (COUNCILLOR C. E. CARTER.)

ALD. ANNAKIN	COUN. FOSTER	COUN. SCHOFIELD
„ LOFTHOUSE	„ LEEMING	„ WEBSTER
„ RAWORTH	„ MACKAY	„ WHITEOAK
„ SHEPHERD	„ NEWSOME	„ WOOD
COUN. BROADBANK	„ POHLMANN	

Co-opted Members :

MR. G. BALLANTYNE	MR. W. P. WELPTON, B.Sc.
„ J. FAWCETT	MISS BIRD, B.A.
„ C. HAWKINS	MISS NORTHROP
„ W. TOPHAM	

School Medical Staff.

School Medical Officer :

JAMES MAIR, M.B., D.P.H.

Ophthalmic Surgeon :

W. J. FORBES, M.B.
(Part-time)

School Dentist :

F. C. WILSON, L.D.S.
(Part-time)

Senior School Nurse :

MISS A. WARDLE. *

School Nurses :

MISS M. NIBLETT * MISS M. WRATHER * †
MISS M. B. WILSON *

Clerk :

MISS D. CHERRITT (Part-time)

* Are also Health Visitors.

† Resigned, with effect
from Jan. 31st, 1925.

Staff.

The names of the Staff will be found on the preceding page ; there has been no change during the year.

Co-ordination.

(a) *Infant and Child Welfare* :—The School Medical Officer is also Medical Officer of Health, and as such is responsible for the administration of the whole of the Infant and Child Welfare work in the Borough ; and the School Nurses act also as Health Visitors, so that there is the closest possible co-ordination between the two services.

(b) *Nursery Schools* :—There are no nursery schools in the Borough, nor does there at present seem to be any great need for such.

(c) *The care of Debilitated Children under school age* :—These children are under the care of the Maternity and Child Welfare Committee through the medium of their Health Visitors, Welfare Centres, and the Municipal Babies' Hospital.

School Hygiene.

Generally speaking the hygienic conditions of the Harrogate Schools are satisfactory. With the exception of one small school where lamps are used, artificial lighting is by electricity, and is generally satisfactory. One school is heated by stoves ; the others have central heating installed and it also is found to be satisfactory. Town's water is laid on to every school and the water carriage system is in use throughout. Two schools and one department of another school are provided with hand flushed closets ; in the others some form of automatic flushing is in use. The former is the much more satisfactory system, and when circumstances permit it is hoped to instal it in all the Schools.

The Local Education Authority controls ten elementary schools of which six are "provided" and four are "non-provided." There is also a special school for mentally defective children.

These schools provide accommodation for 5,667 scholars and at the end of the year there were 3,333 names on the roll—160 less than the previous year.

Medical Inspection.

(a) The children inspected during the year fall into two classes, routine and non-routine. The routine class comprises the following age groups, viz:—

- (1) Entrants, i.e., children newly admitted to school and aged between 5 and 6 years.
- (2) Intermediates, i.e., children born in 1916.
- (3) Leavers, i.e., children born in 1911 and older children who had not been inspected since reaching 12 years of age.
- (4) A group of children of other ages who for various reasons have never previously been inspected e.g., transfers from other schools, late entrants, etc.

The non-routine class comprises children who are known or suspected to be suffering from any defect and who are presented by teachers, parents, nurses, etc., for examination by the School Medical Officer as "Special" cases at the Schools or School Clinic. All children who as the result of routine or special examination are found to be suffering from any defect are re-inspected at regular intervals until the defect is remedied or they have left school.

The number examined in each group was as follows:—

ROUTINE.

Entrants	...	...	...	...	256
Intermediates	...	...	...	...	327
Leavers	...	...	...	...	402
			Total	...	985
Other Routine Cases	...	...	...	...	72
			Grand Total	...	<u>1,057</u>

NON-ROUTINE.

Special Inspections (individual children)...	540
Number of re-inspections ...	1,074
Number of individual children (routine, special, and re-inspections) examined during the year ...	<u>1,946</u>

From the above figures it will be seen that approximately one third of the children on the school registers were examined as routine cases during the year, and that in addition 900 other

children (about one fourth of the total number on the register) were examined for other reasons.

(b) The Board's Schedule of Medical Inspection has been followed throughout.

(c) At each routine inspection the School Medical Officer examines all children admitted to the school since the previous inspection. The Teachers, Attendance Officers, and School Nurses also send cases not previously discovered by the School Medical Officer to the School Clinic for examination. In one or other of these ways the majority of children suffering from crippling defects are ascertained. As an additional safeguard Head Teachers send a return twice a year to the School Medical Officer of all crippled children on their registers; and Attendance Officers make a similar return of such children, who, although of school age, are not upon any school register. It is believed that through these channels the School Medical Department has knowledge of practically every crippled child in the area.

These children are kept under observation throughout their school life, and everything practicable is done to secure the requisite treatment.

(d) The routine inspections are in all cases carried out in the school premises and during school hours. It is therefore impossible to avoid some disturbance of school arrangements, but every effort is made to reduce this to the minimum.

Findings of Medical Inspection.

The nature and number of the defects discovered are set out in Table II. in the Appendix, but it is convenient here to refer to some of these in more detail:—

(a) Uncleanliness.

By this term is meant pediculosis of the head as revealed by the presence of pediculi or nits in the hair. For the purpose of dealing with this condition the schools are visited regularly by the School Nurses, who paid 83 such visits during the year, and made 10,437 inspections of children; (8,599 girls and 1,838 boys). They found that 438 children (416 girls and 22 boys) had vermin or nits in their hair at some time or other during the year. These figures are much the same as in the previous year, and show that practically every fourth girl has at some time or other during the year, nits or vermin in her hair. This is of course anything but satisfactory, but never-the-less a great improvement on former years; in 1911 for instance nearly every second girl was more or less affected. There has been an even greater diminution in the

severity of the condition as compared with former years. The great majority of the cases now discovered are only slightly affected, and it is seldom that one comes across the bad cases which were at one time quite common. There is no doubt that the work of the nurses is having effect, but it is also obvious that there is still room for improvement. The standard aimed at is absolute cleanliness and there is no reason whatever why this standard should not be attained. If the means which have so far been adopted do not prove effectual, then resort must be had to stronger measures.

(b) Tonsils and Adenoids.

In 66 children the presence of enlarged tonsils and/or adenoids was noted. In 22 children the condition was deemed sufficiently serious to call for immediate treatment; in the remaining 44 cases the condition was less marked and these children are being kept under observation.

(c) Tuberculosis.

Two definite and thirteen suspected cases of pulmonary tuberculosis were discovered among "routine" children. Two cases of glandular and two of joint tuberculosis were also noted. These children are all kept under close observation by the School Medical Officer or the Tuberculosis Officer, and are only allowed to attend School with consent of the latter.

(d) Skin Diseases.

The skin disease of most importance from the point of view of school attendance is ringworm of the scalp. Of this one case was discovered among "routine" cases, and in addition nine other cases attended the clinic. These are below the figures for the previous year, which were 6 and 11 respectively.

Scabies or itch was less prevalent, only 2 cases having been discovered as compared with 13 during the previous year.

(e) External Eye Diseases.

These are not very common, 27 cases were noted; of which 16 were referred for treatment.

(f) Vision.

The eyesight of all children in the "intermediate" and "leavers" group is examined at the routine examinations, and it was found that 136 suffered from more or less defective eyesight; of these 60 were already provided with suitable spectacles, the remaining 76 were referred for treatment.

In addition 40 children were found to be suffering from squint, and of these 18 were referred for treatment, the remaining 22 being already provided with suitable spectacles.

(g) Ear Disease and Hearing.

Otitis, or inflammation of the middle ear, was the principal ear disease discovered, and of this only 6 cases were noted among routine children, all of whom were referred for treatment.

16 children suffered from more or less defective hearing, and of these 7 were referred for treatment.

(h) Crippling Defects.

These are not common; 11 cases were noted, but most of them were comparatively slight, and it was only considered necessary to refer 3 cases for treatment.

Infectious Diseases.

The arrangements for the control of infectious disease at schools are similar to those that have been in force in previous years.

The number of cases which occurred among school children during the year was :—

Scarlet Fever	... 52	Measles	... ... 11
Diphtheria	... 24	Chicken Pox	... 80
Whooping Cough	... 129	Mumps	... ... 307

SCARLET FEVER, of which there were 52 cases, gave a certain amount of trouble in two schools. In Grove Road Council School 13 cases occurred between the 11th May and the 2nd July; of these 8 cases occurred in the same class in the Girls' Department, during the week ended the 19th of May. As it seemed evident that the infection was being contracted at school, the whole of the girls attending this Class were excluded from school for a period of 10 days from the 20th May. The school remained free from the disease until about the end of June when 5 more cases occurred. This latter group of cases occurred in different classes, and the infection appears to have been derived from two "return" cases which occurred in the household of two of the original group cases. Since the beginning of July the school has been free from Scarlet Fever.

In the Starbeck Council School, Scarlet Fever also gave a certain amount of trouble. 16 cases occurred among children attending this school of which 9 cases occurred between the beginning of October and the middle of December. These cases were scattered throughout the school, and there is reason to believe that the infection was contracted from a "missed" case outside the school, but this could not be definitely proved. Since the beginning of the present year this school also has been free from infection.

DIPHTHERIA, of which there were 24 cases, was also somewhat more prevalent than in the previous year. The cases occurred pretty regularly throughout the whole of the year, and in only one school (Skipton Road Council) was there any reason to suppose that the school was responsible for infection. In this school 5 cases occurred between the 17th and 29th September. The source of infection of these cases could not however be definitely ascertained.

Since the beginning of the present year the schools have been entirely free from Diphtheria.

MEASLES was almost entirely absent from the schools during the year, only 11 cases having been notified from the schools.

WHOOPING-COUGH was more prevalent than in the previous year, 129 cases having been notified. These occurred almost entirely during the first three months of the year, 108 cases being notified during this period. The schools mainly affected were Skipton Road, Grove Road Council, and Church Square Schools.

CHICKEN POX was also more prevalent than in the previous year, 80 cases having been notified. The majority of these also occurred during the first quarter, 34 cases being notified during that period. Odd cases kept cropping up throughout the remainder of the year. The school principally affected was Western Council School.

MUMPS was most prevalent during the latter half of the year, 279 cases having been notified during the last six months. The schools principally affected were Grove Road Council and Church Square Schools.

It was not considered necessary to close any school department during the year.

Following Up.

The arrangements for following up defective school children are similar to those carried out in previous years. The bulk of the work is carried out by the School Nurses, but the School Attendance Officers and School Teachers rendered valuable assistance. During the year the School Nurses paid 1,830 visits for this purpose to the homes of children.

Medical Treatment.

Treatment of defective school children is provided by the local education authority, partly through the medium of school clinics and partly through an arrangement with the Harrogate Infirmary for the treatment of diseases of the eye, ear, nose, and throat.

A charge is now made for certain forms of treatment, and the following is the scale of charges which has been approved by the Board of Education, and which has been in operation throughout the year:

Dental Treatment	...	...	1/- per tooth.*
Diseases of the Eye, Nose, and Throat (Infirmery treatment)	...	...	3/6 per case.
X Ray treatment of Ringworm	...	...	7/6 per case.
Defective vision	...	...	Actual cost of spectacles.
Minor ailments...	...	...	Free.

* Reduced to 6d. per attendance on November 11th, 1924.

The whole or part of the cost of treatment may be remitted by the Committee in cases where the family income falls below a certain figure.

The amount received during the year was as follows:

Dental treatment	...	...	£29	6	0
Infirmery treatment	...	...		14	0
Defective vision (provision of spectacles)	...	...	39	15	9
Total			£69	15	9

There seems to be little doubt that the adoption of a scale of charges for treatment has led to a reduction in the number of children who avail themselves of the treatment arrangements made by the Authority. This has been especially noticeable as regards dental treatment. The proportion of children who received dental treatment during the year was only one third of those referred for treatment; in the previous year the proportion was one half. Since the charge for dental treatment was reduced there has been an increase in the proportion accepting treatment, although it is still below the figure of former years.

In the issue of Infirmery recommends for the treatment of diseases of the ear, throat, and nose there has been an even greater falling off. Only 6 such recommends were issued during the year as compared with 32 in 1923. Here however there has been no, or at any rate, only a very small diminution in the number of children receiving treatment, as parents have obtained recommends free of cost from private subscribers instead of obtaining them from the Committee and paying a small sum therefor.

School Clinics.

(a) GENERAL CLINIC: This Clinic is conducted by the School Medical Officer and is open on one afternoon per week. It

serves the purposes of both an inspection and treatment Clinic, and during the year was attended by 671 children (of whom 547 were new cases), who made 1,157 attendances.

The principal reasons for the attendance of the new cases were:—

Diseases of the eye	38
„ „ ear	38
„ „ nose and throat	28
„ „ heart	1
Epilepsy	2
Chorea	2
Ringworm (scalp)	8
„ (body)	6
Other skin diseases	78
Verminous condition	3
Phthisis	6
Other tuberculosis	8
Infectious disease	43
Defective speech	2
Bronchitis, etc.	20
Other conditions	264
	<hr/>
	547

In addition to the afternoon session the Senior School Nurse attends each morning for the treatment of minor ailments. During the year 1,355 attendances were made at this morning Clinic.

(b) STARBECK CLINIC: The Starbeck Clinic is conducted in a room at the Starbeck Council School by a School Nurse who attends as frequently as is necessary. Only minor ailments are treated; other cases are referred to the Central Clinic.

The number of children who attended during the year was less than in the previous year, namely, 21 as compared with 39. The decrease in the number is due to the fact that skin diseases, which comprise the bulk of the cases, were much fewer.

Ophthalmic Clinic.

This Clinic is conducted by Dr. Forbes on one half day per week at the Central Clinic. It was attended during the year by 183 children, who made 232 attendances. This number includes not only children referred for treatment by the School Medical Officer, but children who had been directed to come up for re-examination by the Ophthalmic Surgeon, and a few brought directly by their parents.

88 were children who attended for the first time, and the refractive errors found in these cases were:—

Hypermetropia	...	...	19
Myopia	...	...	2
Hypermetropic Astigmatism	...	...	44
Myopic Astigmatism	...	...	8
Mixed Astigmatism	...	...	15

The number of spectacles prescribed during the year was 148, and of these 141 had been provided at the end of the year.

In 19 cases a part or whole of the cost was borne by the Education Authority; the total amount so expended being £5 13s. 9d.

Dental Clinic.

Mr. F. C. Wilson continued to act as School Dentist throughout the year, devoting as a rule from two to three half-days per week to the work. Details of the work done are shewn in Table IV. (IV.) in the appendix, and a copy of Mr. Wilson's report is appended.

Report by Mr. F. C. Wilson, L.D.S. (School Dentist).

The examination and treatment of the school children during the year has consisted of 83 half-day attendances by the Dentist, 34 having been given over to inspections at the various schools, and 49 to treatment of the defects found. Again all the schools have been visited twice during the year. The acceptances, in proportion to the number of children found to require treatment, are more disappointing than usual. Out of 1,331 wanting treatment only 490, or about one in three, attended the Clinic, whilst the previous year practically half those found to have defective teeth attended to have them put right; the probable cause of this being that a charge of one shilling per tooth acted as a great deterrent, as formerly the treatment was free. It has now been reduced to sixpence for each patient whatever the amount of work done, though this has been too recent a change to be able to tell if it will have the desired effect.

F. C. WILSON, L.D.S.

Treatment of Tuberculosis.

The School Medical Officer works in close co-operation with the Tuberculosis Officer of the West Riding County Council. All school children known or suspected to be suffering from Tuberculosis are referred to the latter officer, who as a rule keeps definite cases under his own observation and returns the others to the School Medical Officer. No child suffering from Tuber-

culosis is allowed to attend school until the opinion of the Tuberculosis Officer has been obtained.

Treatment of the Diseases of the Ear, Throat, and Nose.

Children suffering from these diseases, as a rule, attend first at the Clinic, and if more radical treatment is considered necessary are referred to the Harrogate Infirmary for treatment under an arrangement which the Harrogate Education Authority has with that Institution. As already pointed out, a considerable decrease in the number of school children obtaining treatment under this arrangement has taken place since the charge was made for Infirmary recommends. This however does not mean that a smaller proportion of children referred for treatment have received treatment—as a matter of fact the proportion who received treatment in 1924 was higher than in the previous year—but what has happened is that parents, instead of paying the Education Authorities for Infirmary recommends, obtain them from private sources.

Open-Air Education. Physical Training and School Baths.

During the Educational Year—April, 1924, to March, 1925, no special arrangements have been in force for open air classes, but the Teachers have taken every advantage of fine weather to teach their classes in the open air.

The Swimming Baths have been reserved for three half-days a week for use by the school children, who have attended under the supervision of their teachers, and been instructed in swimming. This arrangement has resulted in a continued large number of attenders at the baths at other times, and a further increase in the number of children able to swim. A Swimming Gala was held in July, 1924, which was a greater success than the successful ones held in 1922 and 1923. The Swimming Committee, which consists of teacher and a few friends, has under consideration various means whereby swimming can be further popularised among children out of school hours.

Physical training has formed part of the curricula of the schools, and been taken in the playgrounds as far as possible. Its appropriate place in the time table, and the time devoted to it have received considerable attention, and a number of consultations between the Director of Education, H. M. Inspectors, and Head Teachers have been held. For those schools not conveniently near the Stray, the Education Committee has rented playing-fields, and organised games have been taken in all

schools. Cricket, football, hockey, and net-ball, have been the principal games taught and played out of doors.

The encouragement of Organised Games out of school hours has been undertaken by the Elementary Schools' Football Association and Elementary Schools' Girls' Sports Committee, both of which consist of teachers and friends who give freely of their own time in the interest of sport among school children and adolescents. The result has been a series of Football Matches against York, Scarborough, Sheffield, Bradford, Ripon, Otley, and other teams on the part of the boys, and organised visits to Aldborough and other places by the girls. Mr. T. W. Bell, of Woodlands, and the Starbeck Association Football Club, are deserving of special mention for their generous support of the Football Association, and the Harrogate Football Club, and District Association for their help on the occasion of the Inter-County Match.

Folk-Dancing is taught in the schools, and further classes out of school hours have been arranged by the Folk Dance Committee. These have been well attended and taught by teachers from the schools. The Folk Dance Committee, like the other Committees mentioned, consists of teachers and friends.

During the year some efforts have been made to link up the Social Organisation for Adolescents, and all children who have left school during the year and lived conveniently near have been approached by one or two organisations with promising results. The Council of Christian Congregations has had under consideration the formation of a Co-ordinating Committee, and approved the principle of such a Committee. A representative meeting of all Social Organisations in Harrogate will be held in the near future when it is hoped a Council of Social Service or Juvenile Organisations Committee will come into being to carry out the work of this Co-ordinating Committee. What has been done and the success with which it has met leads one to think that nothing but good can come of such a Committee.

In conclusion I feel that an expression of appreciation of the work done by the teachers who have given voluntarily and generously of their own time will not be out of place here, and in this I wish to include those who have rendered them assistance.

W. E. C. JALLAND.

Provision of Meals.

The Authority has no arrangements for the provision of meals for school children, nor does there at the moment appear to be any great need for such provision.

Co-operation of Parents.

Parents are always notified of the time of routine inspection, and invited to be present. They are also invited and encouraged to accompany their children to the Clinic, and a large number do so.

The percentage of parents attending at the routine inspections during the year was :

	ENTRANTS		INTERMEDIATES		LEAVERS	
	Boys	Girls	Boys	Girls	Boys	Girls
1922	52	57	55	55	27	21
1923	64	72	60	53	34	49
1924	56	72	44	61	32	38

In addition to the above 306 parents attended at the schools at the re-examination of their children.

Co-operation of Teachers and Attendance Officers.

The co-operation between the School Medical Service and the teachers continue to be very cordial, and the teachers give very valuable assistance in the carrying out of the work. In addition to sending out the medical history cards and making certain entries on the medical inspection card, they are of considerable assistance in obtaining treatment of certain defects. School Attendance Officers are also of great assistance. They arrange for attendance at the Clinic, and also bring to the notice of the School Medical Officer children absent from school on account of sickness who are not receiving medical attention, and in various other ways render valuable help.

Co-operation of Voluntary Bodies.

(a) The National Society for the Prevention of Cruelty to Children gives frequent and willing assistance in various ways. During the year it has been very helpful in obtaining treatment for several cases of defective eyesight.

(b) The Citizens Guild of Help has also been of valuable assistance. During the year the Guild was instrumental in sending 11 debilitated and delicate children to Convalescent Homes, and also provided boots and clothing for most of these children. Two children were also provided with surgical appliances.

(c) The War Distress Fund has also provided boots and clothing for a number of necessitous children.

Blind, Deaf, and Epileptic Children.

There has been no change in the methods adopted for ascertaining these children. They appear to be adequate, and there are few, if any, such children who do not come within the purview of the Authority.

No school is provided for these children, but they are maintained by the Education Authority in residential schools in other areas. At the end of the year 4 deaf children (3 girls and 1 boy) were being so maintained. In addition 1 deaf girl who is in attendance at a public elementary school will be sent to a special school as soon as she reaches a suitable age.

Grove Road Special School.

Mentally defective children attend Grove Road Special School, and at the end of the year there were 9 boys and 4 girls on the register, and 1 boy was attending for the purpose of observation. During the year 1 boy was admitted to the School, 1 girl left the district, and 1 boy died.

No doubt this School serves a useful purpose, but further experience only strengthens the opinion that it is too small to allow of the proper grading of the children, and that the best results cannot be expected.

Special Enquiries.

The only special enquiry during the year was one made at the request of Sir George Newman, Chief Medical Officer, Board of Education, into the incidence of enlargement of the thyroid gland in school children belonging to the "Leavers" age group.

The result of that enquiry was as follows :—

Number Examined	168 Girls	171 Boys
Slight Enlargement	23 ,,	10 ,,
Distinct Enlargement	4 ,,	1 ,,

Statistical Tables.

The statistical tables required by the Board of Education are appended.

MEDICAL INSPECTION RETURNS.

TABLE I.
RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections.

Entrants	...	...	...	...	...	...	356
Intermediates	...	...	...	...	...	...	327
Leavers	...	...	...	...	...	...	402
Total	...	...	...	...	...	...	985

Number of other Routine Inspections 72

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	...	540
Number of Re-Inspections	...	...	...	...	...	1,074
Total	...	...	...	...	...	1,614

TABLE II.

A. Return of Defects found by Medical Inspection in the Year ended 31st December, 1924.

DEFECT OR DISEASE					Routine Inspections		Special Inspections	
					No. of Defects		No. of Defects	
					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					59	90	4	—
Uncleanliness : (See Table IV., Group V.)					—	—	3	—
Skin	{ Ringworm—Scalp				1	—	9	—
	{ " Body				—	—	6	—
	{ Scabies				—	—	2	—
	{ Impetigo				—	—	45	—
	{ Other Diseases (Non-Tuberculous) ...				16	2	33	—
Eye	{ Blepharitis				10	4	14	—
	{ Conjunctivitis				3	—	1	—
	{ Keratitis				—	—	1	—
	{ Corneal Opacities				—	4	1	—
	{ Defective Vision (excluding Squint)				76	60	25	1
	{ Squint				18	22	2	—
Ear	{ Other Conditions				3	3	5	—
	{ Defective Hearing				7	9	10	2
	{ Otitis Media				6	—	28	1
Nose and Throat	{ Other Ear Diseases				2	—	9	—
	{ Enlarged Tonsils only				20	40	2	2
	{ Adenoids only				1	4	1	—
	{ Enlarged Tonsils and Adenoids ...				1	—	3	—
{ Other Conditions					2	1	16	7
Enlarged Cervical Glands (Non-Tuberculous)					1	7	3	12
Defective Speech					—	11	—	2
Teeth—Dental Diseases (See Table IV., Group IV.)					—	—	—	—
Heart and Circulation	{ Heart Disease—Organic				1	10	1	1
	{ " " Functional ...				—	4	—	—
	{ Anæmia				18	1	—	—
Lungs	{ Bronchitis				10	4	8	—
	{ Other Non-Tuberculous Diseases ...				—	2	9	4

TABLE II.—Continued.

DEFECT OR DISEASE						Routine Inspections		Special Inspections	
						No. of Defects		No. of Defects	
						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)
Tuber- culosis	Pulmonary :								
	Definite					2	—	2	—
	Suspected					10	3	5	—
	Non-Pulmonary :								
	Glands					2	—	6	—
	Spine... ..					—	—	—	—
	Hip					1	—	—	—
	Other Bones and Joints					1	—	—	—
Nervous System	Skin					—	—	—	—
	Other Forms					—	—	—	—
Deform- ities	Epilepsy					1	1	2	—
	Chorea					—	—	2	—
	Other Conditions					2	2	3	1
Other Defects and Diseases	Rickets					—	3	—	—
	Spinal Curvature					—	—	—	—
	Other Forms					3	5	3	—
Other Defects and Diseases						25	14	203	49

B. Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).

GROUP	Number of Children		Percentage of Children found to require Treatment
	Inspected	Found to require Treatment	
(1)	(2)	(3)	(4)
CODE GROUPS:			
Entrants	256	53	21
Intermediates	327	98	30
Leavers	402	104	26
Total (Code Groups)	985	255	26
Other Routine Inspections	72	24	33

TABLE III.

Return of all Exceptional Children in the Area.

			Boys	Girls	Total
Blind (including partially blind)	(i.) 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	—	—	—
	(ii.) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind ..	—	—	—
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution.	—	—	—
Deaf (including deaf and dumb and partially deaf)	(i.) Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf ...	3	1	4
		Attending Public Elementary Schools ...	—	1	1
		At other Institutions ..	—	—	—
		At no School or Institution	—	—	—
	(ii.) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ...	—	—	—
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution	—	—	—
Mentally Defective	Feeble-minded (cases not notifiable to the Local Control Authority.)	Attending Certified Schools for Mentally Defective Children ...	9	4	13
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution	1	—	1
	Notified to the Local Control Authority.	Feeble-minded ...	—	—	—
		Imbeciles ...	—	—	—
Epileptics	Suffering from severe epilepsy.	Idiots ...	—	—	—
		Attending Certified Special Schools for Epileptics ...	—	—	—
		In Institutions other than Certified Special Schools	—	—	—
		Attending Public Elementary Schools ...	—	—	—
	Suffering from epilepsy which is not severe.	At no School or Institution	1	3	4
		Attending Public Elementary Schools ...	5	2	7
		At no School or Institution	—	—	—

TABLE III.—Continued.

			Boys	Girls	Total
Physically Defective	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	2	4	6
	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	—	—	—
		At Public Elementary Schools	14	5	19
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Delicate children (e.g., pre- or latent tuberculosis malnutrition, debility, anæmia, etc.)	At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	—	—
		At Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	1	1	2
	Crippled Children (other than those with active tuberculous disease) e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools	—	—	—
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools	—	—	—
		At Public Elementary Schools	12	5	17
		At other Institutions	—	—	—
		At no School or Institution	1	1	2

TABLE IV.

Return of Defects Treated during the Year ended 31st December, 1924.

TREATMENT TABLE.

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

Disease or Defect	Number of Defects treated, or under treatment during the year		
	Under the Authority's Scheme	Otherwise	Total
Skin—			
Ringworm—Scalp	8	2	10
Ringworm—Body	6	—	6
Scabies	2	—	2
Impetigo	45	—	45
Other Skin Disease	38	8	46
Minor Eye Defects (External and other, but excluding cases falling in Group II.)	13	15	28
Minor Ear Defects	47	5	52
Miscellaneous (<i>e.g.</i> , minor injuries, bruises, sores, chilblains, etc.)	193	—	193
Total	352	30	382

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
Errors of Refraction: (including Squint) (Operations for squint should be recorded separately in the body of the Report).	183	11	—	194
Other Defect or Disease of the Eyes (excluding those recorded in Group I.).	—	4	—	4
Total	183	15	—	198

Total number of children for whom spectacles were prescribed

(a) Under the Authority's Scheme	148
(b) Otherwise	9

Total number of children who obtained or received spectacles

(a) Under the Authority's Scheme	141
(b) Otherwise	9

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		
5	18	23	16	39

GROUP IV.—DENTAL DEFECTS.

(1) Number of Children who were :—		(2) Half-days devoted to :—	
(a) Inspected by the Dentist :		Inspection ...	34 } Total
Age :		Treatment ...	49 } 83
Routine Age Groups	5—	(3) Attendances made by children for treatment ... 512	
	6—209		
	7—420		
	8—595		
	9—634		
	10—723		
	11—842		
	12—686		
Total.. 5430		(4) Fillings :—	
		Permanent teeth ...	555 } Total
		Temporary teeth ...	3 } 558
		(5) Extractions :—	
Specials 72		Permanent teeth ...	39 } Total
		Temporary teeth ...	73 } 112
Grand Total 5502		(6) Administrations of general anaes- thetics for extractions ... Nil	
(b) Found to require treat- ment 1331		(7) Other operations :—	
(c) Actually treated ... 490		Permanent teeth ...	36 } Total
(d) Re-treated during the year as the result of periodical examination 22		Temporary teeth ...	0 } 36

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

- (i.) Average number of visits per school made during the year by the School Nurses 9.8
- (ii.) Total number of examinations of children in the Schools by School Nurses 10,437
- (iii.) Number of individual children found unclean 412
- (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 Nil
- (b) Under School Attendance Byelaws Nil

GROUP III.—TREATMENT OF DISEASES OF NOSE AND THROAT.				
Number of Patients	Number of Operations	Number of Hospital Admissions	Number of Days in Hospital	Number of Days of Sickness
22	31	32	13	3

Hebburn Education Committee.

SEVENTEENTH
ANNUAL REPORT

OF THE

School Medical Officer

FOR THE

Year ending December 31st, 1924,

BY

E. E. NORMAN, M.B., B.S., B.Hy., D.P.H.

HEBBURN :

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Lyon Street.

1925.

**To the Chairman and Members of the Hebburn
Education Committee.**

.....

Ladies and Gentlemen,

I have the honour to present to you my Seventeenth Annual Report as School Medical Officer for the year 1924.

Like 1923 the year was uneventful and the health of the children, like that of the population generally, was unusually good.

Further development in the School Medical Service may be expected in the direction of Dental treatment, Operative treatment of Throat and Nose conditions and provision for children of Defective Mentality.

I am, Ladies and Gentlemen,

Your obedient Servant,

E. E. NORMAN.

SCHOOL MEDICAL REPORT.

.....

STAFF.

The Staff employed in the School Medical Service consists of—

- (1) Part time School Medical Officer.
- (2) Whole time School Nurse.
- (3) Part time Clerk.

ROUTINE.

The children examined at School comprising Entrants, Leavers and the eight year old group totalled 1,500. Of these 562 were Entrants, 482 eight year olds, 456 Leavers.

It will be noted that the eight year old class exceeds in numbers to the Leavers. The discrepancy between the figures is considerably less marked than it used to be before the new system was introduced which requires the list of children to be examined to be prepared by the Teachers and sent into the office before the date fixed for the inspection.

The routine work of Medical Inspection has not been varied in any way. I would like, however, to emphasise once again the extreme inconvenience which is caused at the Roman Catholic School by there being no Teachers' room available. This School is

already densely overcrowded, and when I make my periodic visits one already over full class-room has to find accommodation for the time being for another class. Furthermore, the School is situated at the corner of two main thoroughfares so that the noise of passing traffic makes satisfactory examination difficult always and sometimes impossible. It would, in my opinion, be better in every way if the Roman Catholic School children could attend at the School Clinic (only a few yards from the School), as this procedure would enable the work to be carried out in a more thorough and satisfactory manner and put a stop to the dislocation of the routine work of the School.

DEFECTS NOTED.

The year has been a bad one inasmuch as unemployment has been widespread and industry so depressed that wages have been reduced almost below an economic level. The effect of these conditions is naturally shewn in the lowered standard of clothing which is to be noted. More especially I have observed this deterioration among the children of the mining class, who, in former days were particularly well-clad, but now ragged, mended and patched clothing is as commonly met with in the colliery district as in other parts of the area. A seriously difficult problem for impoverished parents is that of boots, and one constantly notices cheap boots of poor quality being worn in such a condition that bare feet would be more healthy and altogether preferable.

UNCLEANLINESS.

In looking back over the years that have passed since the inception of School Medical work, the most striking feature is, without doubt, the immensely improved condition of the children in respect of personal cleanliness. Formerly, body lice were commonly encountered, and the heads of the girls were in the majority of cases grossly invested with vermin. At the present time body lice are almost never seen, and though the condition of the girls' heads is still capable of improvement, there is no comparison between present day conditions and those of ten years ago.

NUTRITION.

The nutrition of a child is to be estimated by the ratio between its height and weight, by its vigour and by the richness or otherwise of the colouring matter of the blood. Judged by these standards no less than 540 children were found to fall below a reasonable level. Probably no single cause can be held responsible, and one or two exceptional factors have undoubtedly been at work. In the first place all the children under consideration were born during the war time period of stress and anxiety, most have been nursed, fed and brought up during a time of unexampled poverty and distress, and while it would be a mistake to suggest that many children have gone short of food, there can be no doubt that many have had to go without the nutritive and sustaining food which a growing child needs, and have received instead, cheap and not always satisfactory substitutes.

It is significant as indicating the general condition of lowered vitality that Conjunctivitis and Impetigo have been prevalent throughout the whole of the year. Both of these conditions are infectious and especially liable to attack children who for one reason or another are not in the best physical condition.

Of other Skin diseases Scabies has fortunately almost disappeared, but Ringworm is still fairly prevalent, and is, unfortunately, extremely difficult to cure, and therefore interferes seriously with School attendance.

TUBERCULOSIS.

During the year 10 notifications of Pulmonary Tuberculosis in School children were sent in to the Health Department, and also 23 cases of Tuberculosis of other organs.

No Lung case is allowed to attend School. Other forms of the disease are excluded or permitted to attend according to their condition and largely in accordance with the advice of the Tuberculosis Officer of the County Dispensary at Jarrow. Apart from the definitely diagnosed cases of Tuberculosis, a considerable number of children are in a condition to arouse suspicion that the disease may

be present though not evident, and some of these children do, in fact, develop plain evidence of the disease. For this type of child nothing could be more beneficial than attending at a properly constituted and carefully conducted Open-air School, and one may hope that before long we may have such an Institution in Hebburn.

THROAT DISEASES.

Enlarged Tonsils usually associated with Adenoid growths were, as usual very commonly met with, and in these cases where the condition is having an adverse effect on the child, removal by operation is recommended, in other cases no operative treatment is necessary or is it advised. I am not able to supply exact figures, but I understand that about 50 of our School children underwent operative treatment for this condition at the Newcastle Throat and Ear Hospital during the year. There were also a certain number who received treatment at the Royal Victoria Infirmary. The Committee have under consideration the question of entering into an arrangement with one or both of these Hospitals with a view to securing necessary treatment with the payment of agreed fees in each case.

VISION.

The School Eye Clinic has now been established four years and is attended for a session of two hours each fortnight, during which time ten children on an average are examined. These children are partly discovered suffering from visual defect during the course of the usual routine examination, but as many, if not more, are sent in by their Teachers or by their parents. The result was that the number of children awaiting their turn reached the large total of 96, and the fortnightly visits of the Occulist were insufficient to deal with the new cases and also to overtake the arrears, consequently, with the approval of the Committee, extra sessions were arranged for and at the time of writing the list is again up to date.

TEETH.

Nothing further has yet been done in the direction of providing Dental treatment, and it must be admitted that when this work

is taken in hand, owing to the very wide prevalence of Dental disease, it will prove a big undertaking and a costly one to boot. On the other hand the cleansing of dirty mouths and the purification of septic jaws should be followed by a very great gain in health and physical well-being.

FREE MEALS.

During the year it was found necessary to provide meals for 547 children. The number of meals so provided was 64,121 and was limited to mid-day meals, neither breakfast nor tea being supplied. On four days of each week the meal consists of Soup made from meat and bones, thickened and flavoured with vegetables. It is curious, but true, that quite a number of children entertain a strong dislike to Soup in any form, therefore it was found desirable to substitute sandwiches for Soup for two days in each week. With the sandwiches, which are made from Corn Beef and Polony, Cocoa is supplied, and here again one finds quite a number of children dislike Cocoa with great heartiness. For them Tea is supplied instead. The cost per meal works out at 3·4d. Last year the cost per meal was 2·8d. These figures have interest in indicating that there has been no fall during the last twelve months in the cost of living.

I append the usual comments with which Miss Richardson, our School Nurse, has been kind enough to supply me :—

The duties of the School Nurse have been carried out as in previous years.

Owing to the result of extreme poverty, which still continues, no general improvement has been noticed. The wonder is that the standard of the School child is as high as it is. The large number of families living on the Unemployment Benefit and the small wages of the working men makes it impossible, where there are a few growing children, to keep up the appearance of other years. In many cases children of clean, careful parents, whose pride has always been in their condition, are wearing outer garments cut down

in place of the original underclothing which has become worn out and cannot be replaced. The children of those parents less careful are presenting a ragged, untidy condition, which tends to take away a feeling of respectability which should be encouraged when possible. Trying to keep a home on insufficient money has so disheartened many mothers that they cannot compete with one another in having the cleanest and smartest family which was quite a feature amongst some in better times.

Apart from the above there is nothing special to point out. The girls' heads are still a difficulty. Verminous heads are fewer but the presence of nits in the hair, which the mother thinks of no importance, and it is no easy matter making them understand the condition is objectionable. Verminous clothing is seldom met with. The usual minor ailments have been found in the Schools, most common amongst them being Impetigo, which very soon responds to treatment given at the School Clinic.

N. RICHARDSON.

Appended are the statistical tables required by the Board of Education.

STATISTICAL TABLES.

TABLE I.
RETURN OF MEDICAL INSPECTIONS.

A.—Routine Medical Inspections.

Number of Code Group Inspections—

Entrants	...	...	...	...	562
Intermediates	...	...	...	...	482
Leavers	...	...	...	...	456
					<hr/>
Total	...	...	...	...	1,500
					<hr/>

Number of other Routine Inspections ... Nil

B.—Other Inspections.

Number of Special Inspections	...	...	...	1,877
Number of Re-Inspections	...	...	...	167
				<hr/>
Total	...	...	...	2,044
				<hr/>

TABLE II.

A.—Return of Defects found by Medical Inspection in the Year ended December 31st, 1924.

DEFECT OR DISEASE.				Routine Inspections.		Special Inspections.	
				No. of Defects.		No. of Defects.	
				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 .. .. .	..	540	..	..	..	..
	Uncleanliness.. .. .	..	..	..	..	..	..
	(See Table IV, Group V).						
Skin	Ringworm :						
	Scalp	10	..	76	..	..	..
	Body .. .. .	..	..	..	..	..	..
	Scabies .. .. .	..	..	7	..	..	..
	Impetigo	22	..	420	..	..	..
Eye	Other Diseases non-Tuberculous	6	..	44	..	..	..
	Blepharitis	25	..	34	..	..	..
	Conjunctivitis	42	..	176	..	..	..
	Keratitis	1	..	6	..	..	..
	Corneal Opacities .. .. .	..	..	6	..	..	..
Ear	Defective Vision (excluding Squint)	164	..	13	..	..	..
	Squint	12	..	..	..	..	..
	Other Conditions .. .. .	..	..	..	..	..	..
	Defective Hearing .. .. .	..	49	..	2	..	..
	Otitis Media	13	..	48	..	..	..
Nose and Throat	Other Ear Diseases .. .. .	..	..	..	..	..	..
	Enlarged Tonsils only	109	..	23	..	..	..
	Adenoids only	26	..	9	..	..	..
	Enlarged Tonsils and Adenoids..	54	..	6	..	..	..
	Other Conditions .. .. .	..	..	..	..	..	..
	Enlarged Cervical Glands (non-Tuberculous) ..	3	..	16	..	..	..
	Defective Speech .. .. .	..	25	..	..	..	..
	Teeth—Dental Diseases .. .. .	..	651	..	19	..	..
	(see Table IV, Group IV)						
Heart and Circulation	Heart Disease :						
	Organic .. .. .	..	11	..	12	..	..
	Functional .. .. .	..	9	..	4	..	..
Lungs	Anæmia	29	..	94	..	..	..
	Bronchitis	82	..	29	..	..	..
	Other non-Tuberculous Diseases	..	..	..	..	..	..
Tuber- culosis	Pulmonary :						
	Definite	5	..	22	..	..	..
	Suspected .. .. .	..	23	..	6	..	..
	Non-Pulmonary :						
	Glands	2	..	10	..	..	..
	Spine .. .. .	..	..	..	..	..	..
	Hip .. .. .	..	..	2	..	..	..
	Other Bones and Joints ..	..	..	4	..	..	..
Nervous System	Skin .. .. .	..	..	..	..	..	..
	Other Forms	6	..	10	..	..	..
	Epilepsy .. .. .	..	1	..	..	..	..
	Chorea	2	..	1	..	..	..
Deformities	Other Conditions .. .. .	..	4	..	..	..	..
	Rickets .. .. .	..	25	..	1	..	..
	Spinal Curvature .. .. .	..	..	..	..	..	..
	Other Forms	3	1	..	1	..	..
	Other Defects and Diseases	36	13	923	22	..	..

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	562	162	28.82
Intermediates ..	482	175	36.3
Leavers	456	177	38.81
Total (Code Groups) ..	1500	514	34.26
Other Routine Inspections ..			

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

			Boys.	Girls.	Total.
Blind (including partially blind).	(i) 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
	(ii) Suitable for training in a School or Class for the partially blind	Attending Certified Schools or Classes for the Blind .. Attending Public Elementary Schools At other Institutions.. .. At no School or Institution ..			
Deaf (including deaf and dumb and partially deaf).	(i) Suitable for training in a School or Class for the totally deaf or deaf and dumb	Attending Certified Schools or Classes for the Deaf .. Attending Public Elementary Schools At other Institutions.. .. At no School or Institution ..	3		3
	(ii) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf .. Attending Public Elementary Schools At other Institutions.. .. At no School or Institution ..			
Mentally Defective.	Feeble-minded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children Attending Public Elementary Schools At other Institutions .. At no School or Institution ..			
	Notified to the Local Control Authority during the year.	Feeble-minded Imbeciles Idiots			
Epileptics.	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics .. In Institutions other than Certified Special Schools .. Attending Public Elementary Schools At no School or Institution ..			
	Suffering from epilepsy which is not severe.	Attending Public Elementary Schools At no School or Institution ..			

TABLE III—(continued).

			Boys	Girls	Total
Physically Defective.	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At other Institutions... .. 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 At Public Elementary Schools At other Institutions... .. At no School or Institution ..			
	Delicate children (<i>e.g.</i> , pre-or latent tuberculosis, mal-nutrition, debility, anæmia, etc).	At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions... .. At no School or Institution ..			
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board At Public Elementary Schools At other Institutions... .. At no School or Institution ..			
	Crippled Children other than those with active tuberculous disease), <i>e.g.</i> , children suffering from paralysis, &c., and including those with severe heart disease.	At Certified Hospital Schools.. At Certified Residential Cripple Schools At Certified Day Cripple Schools At Public Elementary Schools At other Institutions... .. At no School or Institution ..	3		3

TABLE IV.

**Return of Defects Treated during the Year ended
31st December, 1924.**

TREATMENT TABLE.

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

DISEASE OR DEFECT.	Number of Defects treated or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)
Skin—			
Ringworm-Scalp	105		
Ringworm-Body			
Scabies	6		
Impetigo	358		
Other Skin Disease	15		
Minor Eye Defects (External and other. but excluding cases falling in Group II).	216		
Minor Ear Defects	88		
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, etc.) ..	501		
Total	1289		1289

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

DEFECT OR DISEASE.	Number 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).	288	Not known.	Not known.	
Other Defect or Disease of the eyes (excluding those recorded in Group I).				
Total	288			288

TABLE IV—(continued).

Total number of children for whom spectacles were prescribed—

(a) Under the Authority's Scheme	...	181
(b) Otherwise	...	...

Total number of children who obtained or received spectacles—

(a) Under the Authority's Scheme	...	70
(b) Otherwise	...	...

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)
None.	Not available.			

GROUP IV.—DENTAL DEFECTS. (Not applicable.)

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i) Average number of visits per School made during the year by the School Nurse	...	...	...	29
(ii) Total number of examinations of children in the Schools by the School Nurse	...	...	...	4524
(iii) Number of individual children found unclean...	...	...	...	457
(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	...	...	...	Nil.
(b) Under School Attendance Byelaws	...	...	...	Nil.

SCHOOL CLINIC.

1.—INSPECTION CLINIC.—(Tuesday and Thursday, at 3 p.m.) Number of children referred for Examination by Parents, Head Teachers and School Attendance Officers.

Certificates issued—

(1) Fit to attend School	...	...	172
(2) Unfit to attend School	...	...	579
			<u>751</u>

2.—TREATMENT CLINIC (Each Morning at 9 a.m.)

Number of Children treated	...	...	1,289
Total Number of Attendances...	...	...	10,716

Number cured 1,249. Number Improved 34. Number Stationary 6.

3.—SCHOOL NURSE.

No. of Visits to Schools	144	No. of Children Examined	4,524
No. of Visits to Homes	472		
	<u>646</u>		<u>4,524</u>
Total	<u>646</u>	Total	<u>4,524</u>

TREATMENT OF DEFECTIVE VISION.

32 Visits.

288 Children's Eyes Tested.

181 Prescriptions left for Glasses.