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BOROUGH OF JARROW
EDUCATION COMMITTEE.

REPORT
OF THE
School Medical Officer
FOR THE
Year ended December 31st, 1935.

P. A. DORMER, M.A., M.D., D.P.H.,
SCHOOL MEDICAL OFFICER.

JARROW-ON-TYNE :
Printed by SMITH BROS. (Hebburn & Jarrow), Ltd.
Walter Street.

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HEALTH DEPARTMENT,

JARROW,

FEBRUARY, 1936.

TO THE MEMBERS OF THE BOROUGH OF JARROW EDUCATION
COMMITTEE.

I submit herewith my report on the work of the School Medical
Service during the year 1935.

I am,

Your obedient Servant,

P. A. DORMER.



ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER.

1. STAFF.

School Medical Officer—P. A. Dormer, M.A., M.D., B.Ch., D.P.H.,
U.Dubl.

Assistant School Medical Officer.—Jessie S. Dunlop, M.B., B.S., B.Hy.,
D.P.H., *U.Durh.*

Specialist for Operative Treatment of Tonsils & Adenoids (part-time)—
D. R. Macgregor, B.Sc., *U.St. And.*, M.B., Ch.B., *U.Ed.*, D.L.O.,
R.C.P.S. Eng.

School Dentist (part-time)—Geo. G. Clark, L.D.S., *U.Durh.*

School Nurses—Mrs. Waldie, State Registered Nurse, Registered
Fever Nurse.

Miss M. Graham, State Registered Nurse.

Clerk (part-time)—Miss I. Besford.

2. CO-ORDINATION WITH OTHER HEALTH SERVICES.

The School Medical Officer is also Medical Officer of Health. The Assistant School Medical Officer is also Assistant Medical Officer of Health, and attends all Maternity and Child Welfare Clinics.

The School Medical Department Clerk devotes 40% of her time to Maternity and Child Welfare duties.

The same building is used as School Clinic and Maternity and Child Welfare Centre. The artificial light clinic is used for the treatment of children under the Maternity and Child Welfare Scheme, as well as for public elementary school children.

No nursery schools have been established by the Authority.

3. SCHOOL BUILDINGS.

The following table shows the accommodation, average number of children on the register, and the average attendance at each school during the financial year ended March 31st, 1935, contrasted with the previous year.

School.	Accommodation.	Average No. on Registers.	Average Atten- dance.
Central	468	387	371
Grange—Boys	400	301	286
Girls	350	257	240
Infants	400	216	197
Dunn Street—Boys	422	380	363
Girls	422	402	381
Infants	444	235	212
Croft Terrace—Mixed	720	538	506
Infants	436	187	169
Bede Burn	342	210	195
Ellison—Boys	240	233	221
Girls	230	218	203
Infants	242	182	169
St. Peter's—Mixed	468	415	398
Infants	148	119	111
St. Bede's—Central Girls	150	155	148
Senior Boys	379	370	350
Senior Girls	462	413	380
Junior Boys	528	521	484
Junior Girls	525	442	415
Monkton Road Infants ...	348	315	286
Grant Street Infants	310	251	228
TOTALS—1935	8,434	6,747	6,313
TOTALS—1934	8,434	7,115	6,530

4. MEDICAL INSPECTIONS.

The three age groups examined during the year were as follows:—
(Statistical particulars are given in the tables at the end of the report).

(a) Children admitted.

(b) All children between 8 and 9 years of age.

- (c) All children between 12 and 13 years of age, together with children over 13 years of age, who had not already been examined after reaching the age of 12.

The total number of routine inspections in these three age groups was 1,363; in addition 216 other inspections were made of children prior to their admission to school camps.

5. FINDINGS OF MEDICAL INSPECTION AND TREATMENT.

(a) Malnutrition.—Four hundred and two children were classified as suffering from malnutrition. Many of those found to be anaemic or to have enlarged cervical glands or conjunctivitis (313 in all) might also be described as being malnourished. These patients are referred to the artificial light clinic, advised to apply for school meals, recommended appropriate home treatment or to consult their private medical attendant, according to the circumstances of each case.

Tables at the end of the report give the height and weight of the children examined, classified by schools. It will be seen from these that as far as height and weight is concerned the nutrition of the children remains satisfactory in spite of the long continued depression and resulting poverty in the Borough.

The measurement of the height and weight is not by any means an entirely satisfactory guide to nutrition, and it is quite possible for a patient's height and weight to be up to average and for that person to be malnourished. Nevertheless, these measurements are the most satisfactory single guide to nutrition and they have the great advantage that no personal factor is involved.

(b) Uncleanliness.—During routine surveys of uncleanliness 10,416 examinations were made by the school nurses, 518 or 4.97% children were found to be affected by nits and vermin or to be otherwise unclean. Whenever any nits, even a single one, is discovered, the child is classified as "unclean" for statistical purposes; this is done so that a comparison may be made between different areas, as otherwise with so many different nurses carrying out the surveys, the personal factor would make comparison useless.

(c) Skin Disease.—As shown in table II, the vast majority of cases of skin disease found are impetigo; there were 43 cases of scabies and 3 cases of ringworm of the scalp. The arrangements for the cure of ringworm of the scalp by X-rays continue to prove very satisfactory. There is no difficulty now in persuading parents to agree to their children undergoing this treatment.

(d) Eye Defects and Diseases.—Excellent results have been obtained from a course of artificial light treatment in cases of phlyctenular conjunctivitis which do not quickly respond to local treatment and the provision of spectacles if there is any error of refraction.

Arrangements have been made for the admission to the Eye Hospital, Newcastle-on-Tyne, of several children suffering from severe corneal ulceration and requiring in-patient institutional treatment.

Four hundred and fifty-eight children were submitted to refraction on account of defective vision and/or squint; 368 of these were found to require spectacles. Three hundred and seventy-six children obtained or received spectacles during the year. In every case for whom spectacles are prescribed the School Medical Officer checks the lenses and the fitting of the frame.

(e) Ear Diseases and Defects.—Otitis media is the only disease frequently met with. This is treated by swabbing away the discharge and by the instillation of antiseptic drops. Occasionally it is possible to arrange to have a radical mastoid operation done at one of the Newcastle-on-Tyne hospitals.

(f) Nose and Throat.—One hundred and fifty-seven children were found during routine inspection to require treatment for tonsils and adenoids, and 196 noted to be kept under observation. Of the special inspections 130 were found to require treatment for enlarged tonsils and adenoids.

It is most unusual for us to recommend operative treatment for a patient when seen for the first time to have enlarged tonsils and adenoids; the usual procedure is to record the abnormality "for observation" at the same time recommending suitable medical treatment. Subsequently that patient may be recommended operative treatment if the abnormality and disability are found to persist in spite of medical treatment.

(g) Dental Defects and Diseases.—Thirteen sessions were spent doing routine inspection in schools, 33 sessions were devoted to extractions under a general anaesthetic (ethyl chloride) and 153 sessions to conservative work and extractions under local anaesthesia.

(h) Heart and Circulation.—Diseases and defects of the heart and circulation are as a rule referred to the family doctor for treatment, and in addition parents and teachers are advised with regard to exercise, drill, games, etc., when special care is required. Really bad cases of organic heart disease are classified as physical defectives on the register

of exceptional children. Such cases are re-examined by the School Medical Officer as a routine at least once a year.

(i) **Tuberculosis.**—All cases of tuberculosis discovered are referred to the District Tuberculosis Officer for treatment. That Officer also advises the School Medical Officer as to the fitness of children suffering from tuberculosis to attend school.

6. INFECTIOUS DISEASES.

All cases of infectious diseases or suspected infectious diseases that are not under the care of a doctor are visited by the School Nurses, who give advice with regard to treatment and exclusion from school. During the year the School Nurses paid 9 visits to homes of children suffering from infectious diseases.

The following table gives the number of children excluded from each school during 1935 on account of infectious diseases:—

School.	Measles.	Mumps.	Whooping Cough.	Chicken Pox.	Scabies.	Small Pox.	Influenza.	Scarlet Fever.	TOTAL.	Percentage of Average on Register.
St. Bede's Infants,										
Grant Street	6	1	...	2	1	10	3.9%
Monkton Rd.	2	1	...	28	1	...	1	7	40	12.6%
„ Jun. Boys	8	6	...	1	3	18	3.4%
„ „ Girls	1	...	...	1	7	9	2.0%
„ Sen. Boys	1	7	...	4	2	14	3.7%
„ „ Girls	1	5	...	2	5	13	3.1%
„ Central	1	2	3	1.9%
Grange Infants	...	3	...	4	1	...	5	3	16	7.4%
„ Boys	3	...	...	5	8	2.6%
„ Girls	2	2	...	1	8	13	5.0%
Dunn Street Infants..	...	1	2	4	2	...	...	3	12	5.1%
„ Boys	8	...	1	3	12	3.1%
„ Girls	2	2	...	1	7	12	2.9%
Ellison Infants	1	2	3	1.6%
„ Boys	1	...	...	5	6	2.5%
„ Girls	2	4	...	1	1	8	3.6%
St. Peter's Infants ...	1	2	...	8	3	...	3	...	17	14.2%
„ Mixed	1	8	...	1	3	13	3.1%
Bede Burn Council	14	14	6.6%
Croft Terrace Infants	1	10	11	5.8%
„ Mixed	3	15	18	3.3%
Central	1	1	.2%
Totals	3	7	2	68	54	...	30	107	271	

The following table gives the number of exclusions during 1935 by the School Medical Officer, the cases being classified under the defect which necessitated the exclusion. The total number of exclusions in 1934 was 2,072.

Septic Skin Diseases	132
Ringworm	14
Eye Diseases	83
Impetigo	128
Measles	3
Mumps	8
Whooping Cough	5
Chicken Pox	70
Scarlet Fever	107
Small Pox	—
Influenza	31
Contacts with Infectious Diseases	—
Tonsils and Adenoids (after operation)	183
Scabies	77
Tuberculosis	31
Verminous	9
Miscellaneous	533
Total	<u>1,414</u>

7. EXCEPTIONAL CHILDREN IN THE AREA.

Table III. at the end of the report gives the number of exceptional children in the area.

The 7 children suffering from multiple defects are as follows:—

- One—Epilepsy and Mental Defect.
- Four—Mental Defect and Crippling.
- One—Epilepsy and Crippling.
- One—Blindness and Mental Defect.

One child suffering from mental defect and crippling attends a public elementary school, the remaining 6 children suffering from multiple defects are at no school or institution.

8. FOLLOWING UP.

Special registers are kept of children requiring treatment of defective vision, operations for tonsils and adenoids and dental treatment. All cases for which treatment is required which fall into the above

categories are followed up systematically by notes to parents, visits to schools and home visits, and if these methods fail, by referring to the National Society for the Prevention of Cruelty to Children.

The following cases were referred to the Society:—

Failure to provide spectacles	16
Failure to cleanse verminous children	3
General neglect	2

Very valuable help is given to the School Medical Department by the Society's Inspector (Inspector Williamson), his excellent typewritten reports on the cases referred to him being especially appreciated.

9. ARTIFICIAL LIGHT CLINIC.

Dr. J. S. Dunlop, who is in charge of the Artificial Light Clinic, reports as follows:—

"The work of this clinic has been continued along the same lines as last year—the children attending twice a week for a course of ten exposures.

"During the year the waiting list for this clinic reached large dimensions and consequently the number treated is almost double that of last year.

"The importance of regular attendance was impressed upon the mothers, and so much is the treatment appreciated by them that the percentage of children who completed the course reached the really excellent figure of 87 per cent.,

"As in previous years, the most striking results are seen in those children suffering from various eye conditions and general debility.

"Mr. Lishman and Mr. Palmley Graham again visited us as representatives of the West Line Committee of the Tyneside Council of Social Service. Their continued interest and practical help is much appreciated.

"Appended is a list of the cases treated."

No. of Public Elementary School Children treated ...	146
Boys	58
Girls	88
New cases	122
Others	24

Disease.	Cured.	Improved.	Condition unchanged.	Deteriorated.	Incomplete.	Total.
Nervousness, night-terrors, etc.	4	7	2	—	1	14
Cervical Glands	5	4	—	1	2	12
Bronchitis, Incipient Pulmonary Tuberculosis	3	6	1	—	1	11
Anaemia, Malnutrition	4	7	2	—	—	13
Tuberculosis Contacts	2	—	—	—	—	2
Recuperation	4	4	—	—	2	10
Rickets	2	3	2	—	1	8
Rheumatism and Chorea	5	1	1	—	—	7
Eye Conditions	16	4	—	—	6	26
General Debility	11	19	4	1	8	43
Total ...	56	55	12	2	21	146

10. Miscellaneous.

School Clinic.—The total number of attendances at the School Clinic (excluding cases attending the dental clinic) was 7,289. The number of treatments was 3,062. New cases inspected for the first time 2,647 and cases re-inspected numbered 2,672.

The new cases inspected for the first time and the routine cases examined during the year, make a grand total of 4,010 children or 63.5% of the average attendance, examined by the school doctors during the year.

These figures do not include all the cases examined and treated at the dental, artificial light and refraction clinics, though most of the cases attending the artificial light and refraction clinics are included in the total, as they would have been seen previously either as routine cases or as special cases at the general clinics.

Work of School Nurses.—In addition to the work at the general, artificial light, refraction and dental clinics, the nurses paid 9 visits to homes of children suffering from infectious diseases, and 64 home visits to children suffering from other defects and diseases. Also 39 sessions were devoted to cleansing inspection in schools, 74 sessions to routine medical inspection and 13 to routine dental inspection.

Children and Young Persons Act, 1933.—Section (35) (2) of the Children and Young Persons Act, 1933, provides that a local education authority shall, except in cases which appear to them to be of a trivial nature, make investigations and furnish the Juvenile Court with information as to the home surroundings, school record, character and medical history of any child or young person summoned to appear before the Court, in order to enable the Court to deal with the case in the best interests of the child or young person. The Act came into operation on the 1st November, 1933, and at the outset a detailed medical certificate was furnished in respect of each case, but as this entailed a very serious amount of work upon the medical staff, and was obviously quite unnecessary in the bulk of the cases, an arrangement was made that medical certificates should be furnished, as a general rule, only in respect of young persons or children appearing before the Court for a second offence, or who were likely to be sent to a Remand Home or Approved School. Under this arrangement the Court appears to obtain all the information it requires, and valuable time is saved to the medical staff.

Employment of Children and Young Persons.—The following children were medically examined and found fit for employment in the occupations stated:—

Errand Boys and Girls	4
Delivering Newspapers	5
No street traders licences were issued.	

Co-operation with Parents.—There were 1,363 children examined as routine cases; parents were present in 1,022 of these cases. In the vast majority of cases examined or treated at the general, refraction or dental clinics a parent accompanies the child.

Co-operation with Teachers and School Attendance Officers.—The teachers arrange for the attendance of children for routine inspection, and at the refraction and dental clinics. All cases attending the general clinics must, in the first instance, bring a note from the Head Teacher or School Attendance Officer. Lists of names of children on the dental and refraction waiting lists are sent to the Head Teachers with a request that arrangements be made for the children to attend the clinic on the dates given; the teachers then communicate with the parents.

The School Attendance Officers, in addition to the help previously mentioned, are of considerable help in following up cases excluded on account of verminous conditions. They also superintend the service of the school meals.

The help and interest of the Teachers and School Attendance Officers is much appreciated.

Vaccination.—Of the routine cases examined 763 or 55.9% had been vaccinated.

School Meals.—The number of individual children in receipt of school meals was 558; 38,255 breakfasts and 69,447 dinners were supplied during the year.

Supply of Milk in Schools.—Milk has been made available to school children for consumption on the school premises at a charge of $\frac{1}{2}$ d. for $\frac{1}{3}$ pint. On the 29th March, 1935, 4,512 children were in receipt of milk under this scheme.

P. A. DORMER.

HEIGHT AND WEIGHT—BOYS.

SCHOOL.	Central.	Grange.	Dunn Street.	Croft Terrace.	Bede Burn.	Ellison.	St. Peter's.	St. Bede's.	St. Bede's Grant Street.	Total No. Examined.	Average for 1935.	Average for Jarrow children 1910—1914.	Average for England & Wales (Greenwood Table).
Entrants.	No. examined.	...	34.	38.	25.	13.	34.	20.	67.	34.	265.	...	...
	Height—inches.	...	40.09	40.2	41.52	43.3	41.41	41.31	40.64	41.2	41.21	39.84	40.68
	Weight—lbs.	...	42.2	38.6	38.83	43.4	40.1	39.93	39.62	38.83	40.18	37.06	38.68
Intermediates.	No. examined.	...	16.	17.	34.	8.	14.	20.	56.	...	165.	...	...
	Height—inches.	...	48.	46.5	47.32	48.25	45.25	46.69	45.98	...	46.85	46.78	47.39
	Weight—lbs.	...	52.5	50.5	54.42	56.5	49.25	49.61	50.53	...	51.9	49.57	52
Leavers.	No. examined.	24.	37.	27.	16.	3.	30.	20.	68.	...	225.	...	...
	Height—inches.	56.75	55.25	55.	57.	56.75	53.8	52.75	55.6	...	55.36	54.16	54.88
	Weight—lbs.	72.	78.07	70.1	79.25	77.5	72.2	70.	74.95	...	74.26	65.72	72.

HEIGHT AND WEIGHT—GIRLS.

SCHOOL.	Central.	Grange.	Dunn Street.	Croft Terrace.	Bede Burn.	Ellison.	St. Peter's.	St. Bede's	St. Bede's Grant Street.	St. Bede's Central.	Total No Examined, 1935.	Average for 1935.	Average for Jarrow children 1910—1914.	Average for England & Wales (Greenwood Table).
Entrants.	No. examined.	..	27.	30.	25.	14.	42.	25.	59.	33.	255.	...	...	...
	Height—inches.	...	41.	40.67	41.45	43.2	39.92	41.03	39.93	41.16	...	41.04	40.07	40.74
	Weight—lbs.	...	39.5	36.65	38.36	39.	37.22	39.09	37.13	37.96	...	38.11	37.12	37.74
Intermediates.	No. examined.	...	23.	33.	21.	10.	19.	13.	49.	...	168.	...	...	...
	Height—inches.	...	46.75	46.75	49.06	49.25	46.	46.91	46.37	...	...	47.29	45.39	46.94
	Weight—lbs.	...	49.	49.75	53.5	56.	50.	47.75	48.25	...	...	50.6	47.69	49.55
Leavers.	No. examined.	28.	27.	40.	25.	3.	25.	13.	105.	...	285.	...	...	...
	Height—inches.	57.5	55.	56.28	55.6	55.	55.1	53.1	53.8	...	56.4	55.3	54.63	55.48
	Weight—lbs.	82.6	78.8	71.9	77.2	75.5	73.	63.2	71.1	...	80.9	74.97	70.88	73.86

STATISTICAL TABLES.

TABLE 1.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC ELEMENTARY SCHOOLS.

A.—Routine Medical Inspections, 1935.

Number of Inspections in the prescribed groups—

Entrants	...	...	...	...	520
Second Age Group	...	...	...	...	333
Third Age Group	...	...	...	...	510
Total	...	...	...	...	<u>1,363</u>

Number of other Routine Inspections	...	...	...	...	—
Grand Total	...	...	...	...	<u>1,363</u>

B.—Other Inspections.

Number of Special Inspections	...	...	...	...	2647
Number of Re-Inspections	...	...	...	...	2672
Total	...	...	...	...	<u>5,319</u>

C.—Children Found to Require Treatment.

Number of *individual children* found at *Routine* Medical Inspection to
Require Treatment (**excluding Uncleanliness and Dental
Diseases**).

Prescribed Groups—

Entrants	...	...	...	...	200
Second Age Group	...	...	...	...	94
Third Age Group	...	...	...	...	183
Total (Prescribed Groups)	...	...	...	...	<u>477</u>

Other Routine Inspections	...	...	...	...	—
Grand Total	...	...	...	...	<u>477</u>

TABLE II.

A.—Return of Defects found by Medical Inspection in the Year ended 31st December, 1935.

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)
Skin	{	Ringworm :						
		Scalp .. ..			..	..	3	..
		Body			2	..	14	..
		Scabies			4	..	39	..
		Impetigo			19	..	191	..
Eye	{	Other Diseases (non-Tuberculous)			26	3	430	..
		Blepharitis			8	..	15	..
		Conjunctivitis			6	..	50	..
		Keratitis			1	..	5	..
		Corneal Opacities .. ..			..	..	..	..
		Other Conditions (excluding Defective Vision and Squint)			3	..	53	..
		Defective Vision (excluding Squint)			135	..	85	..
		Squint			32	1	15	..
Ear	{	Defective Hearing			6	..	18	..
		Otitis Media			11	..	14	..
		Other Ear Diseases			6	..	55	..
Nose and Throat	{	Chronic Tonsillitis only			24	140	34	..
		Adenoids only			12	12	11	..
		Chronic Tonsillitis and Adenoids			121	44	85	4
		Other Conditions			13	4	148	..
Enlarged Cervical Glands (non-Tuberculous) ..					19	76	80	..
Defective Speech .. ..					..	9	2	..
Heart and Circulation	{	Heart Disease :						
		Organic .. ..			..	10	2	..
		Functional .. ..			..	9	1	..
Lungs	{	Anæmia			36	13	33	..
		Bronchitis			40	43	38	..
		Other non-Tuberculous Diseases			2	5	21	..
Tuberculosis	{	Pulmonary :						
		Definite			1	..	2	..
		Suspected			3	2	1	..
		Non-Pulmonary :						
		Glands			3	..	6	..
		Bones and Joints			1	..	..	..
		Skin .. ..			..	..	..	..
Nervous System	{	Other Forms .. ..			..	..	1	..
		Epilepsy			1	..	..	..
		Chorea .. ..			..	..	7	..
		Other Conditions			4	1	2	..
Deformities	{	Rickets			12	14	..	..
		Spinal Curvature			1	4	..	..
		Other Forms .. ..			..	2	1	..
Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ..					101	8	460	..
TOTAL ..					653	400	1922	4

B.—Classification of the Nutrition of Children Inspected during the Year in the Routine Age Groups.

Age-groups.	Number of Children Inspected	A (Excellent)		B (Normal)		C Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants	520	113	21.73	258	49.61	109	20.96	40	7.7
Second Age-group	333	63	18.9	137	41.2	96	28.8	37	11.1
Third Age-group ...	510	136	26.7	252	49.4	107	21	15	2.9
Other Routine Inspections ...									
TOTAL ...	1363	312	22.9	647	47.5	312	22.9	92	6.7

TABLE III.

Return of all Exceptional Children in the Area.

Blind Children.

A blind child is a child who is too blind to be able to read the ordinary school books used by children.

In this Section only children who are so blind that they can only be appropriately taught in a school for blind children are included.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
Nil.	Nil.	Nil.	Nil.	Nil.

Partially Sighted Children.

Entered in this Section are children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially sighted.

Children who are able by means of suitable glasses to read the ordinary school books used by children without fatigue or injury to their vision are not included in this Table.

TABLE III—(Continued).

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	—	3	—	—	4

Deaf Children.

A deaf child is a child who is too deaf to be taught in a class of hearing children in an elementary school.

Entered in this Section are children who are so deaf that they can only be appropriately taught in a school for the deaf.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	—	—	2	5

Partially Deaf Children.

Only children who can appropriately be taught in a school for the partially deaf are included in this table.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	—	—	—	—

Mentally Defective Children.**Feeble-Minded Children.**

Mentally Defective children are children who, not being imbecile and not being merely dull or backward, are incapable by reason of mental defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for mentally defective children.

TABLE III—(Continued).

This table includes all such children except those who have been notified to the Local Authority under the Mental Deficiency Act in accordance with Article 3 of the Mental Deficiency (Notification of Children) Regulations, 1928.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	36	—	3	39

Epileptic Children.

Children suffering from Severe Epilepsy.

In this part of the Table only those children are included who are epileptic within the meaning of the Act, i.e., children who, not being idiots or imbeciles, are unfit by reason of severe epilepsy to attend the ordinary Public Elementary Schools.

For practical purposes the Board are of opinion that children who are subject to attacks of major epilepsy in school should be recorded as "severe" cases and excluded from ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	1	—	4	5

Physically Defective Children.

Physically Defective children are children who, by reason of physical defect, are incapable of receiving proper benefit from the instruction in the ordinary Public Elementary Schools, but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for physically defective children.

A.—Tuberculous Children.

In this category are placed only cases diagnosed as tuberculous and requiring treatment for tuberculosis at a sanatorium, a dispensary, or elsewhere. Children suffering from crippling due to tuberculosis which is regarded as being no longer in need of treatment are recorded as crippled children, provided that the degree of crippling is such as to interfere materially with a child's normal mode of life. All other cases of tuberculosis regarded as being no longer in need of treatment are recorded as delicate children.

TABLE III—(Continued).

I.—Children suffering from Pulmonary Tuberculosis.

(Including pleura and intra-thoracic glands.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	7	2	9

II.—Children suffering from Non-Pulmonary Tuberculosis.

(This category includes tuberculosis of all sites other than those shown in (I) above.)

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	32	5	6	43

B.—Delicate Children.

This Section is confined to 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. Such children are included irrespective of the actual provision of Open Air Schools in the area, or of the practicability in present circumstances of sending children to residential Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	24	—	3	27

C.—Crippled Children.

This Section is confined to children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, i.e., children who generally speaking are unable to take part, in any complete sense, in physical exercises or games or such activities of the School curriculum as gardening or forms of handwork usually engaged in by other children.

TABLE III—(Continued).

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	27	—	5	33

D.—Children with Heart Disease.

This Section is confined to children whose defect is so severe as to necessitate the provision of educational facilities other than those of Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	4	—	3	7

Children suffering from Multiple Defects.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
Blind and Mental Defect	1	1
Epilepsy and Crippling	1	1
Mental Defect and Crippling	1	..	3	4
Mental Defect and Epilepsy	1	1

TABLE IV.

Return of Defects treated during the Year ended 31st December, 1935.

TREATMENT TABLE.

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

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—			
(i) X-Ray Treatment	3	..	3
(ii) Other Treatment .. ..	..	..	..
Ringworm-Body	14	2	16
Scabies .. ..	..	43	43
Impetigo	136	74	210
Other Skin Disease	299	157	456
Minor Eye Defects	92	49	141
(External and other, but excluding cases falling in Group II).			
Minor Ear Defects	54	56	110
Miscellaneous	78	483	561
(e.g., minor injuries, bruises, sores, chilblains, etc.)			
Total	676	864	1540

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

	No. of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
ERRORS OF REFRACTION (including squint). ...	458	5	463
Other defect or disease of the eyes (excluding those recorded in Group I)	—	—	—
Total	458	5	463
	Under the Authority's Scheme.	Otherwise.	Total.
No. of Children for whom spectacles were			
(a) Prescribed	368	2	370
(b) Obtained	376	2	378

TABLE IV—(Continued).

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)			
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(4)	(5)
4	—	179	—	—	—	2	—	4	—	181	—	—	185

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and adenoids. (iv) Other Defects of the nose and throat.

TABLE V.

Dental Inspection and Treatment.

(1) Number of children inspected by the Dentist.

(a) Routine age groups

AGE	5	6	7	8	9	10	11	12	13	14	TOTAL.
Number	512	374	180	57	21	3	—	—	—	—	1147

(b) Specials 1006

(c) TOTALS (Routine and Specials) 2153

(2) Number found to require treatment 1847

(3) Number actually treated 1430

(4) Attendances made by children for treatment 1415

(5) Half-days devoted to:—

Inspection	13	} Total	199
Treatment	186				

(6) Fillings:—

Permanent teeth	...	55	} Total	72
Temporary teeth	...	17				

(7) Extractions:—

Permanent teeth	...	737	} Total	3487
Temporary teeth	...	2750				

(8) Administrations of general anaesthetics for extractions 482

(9) Other operations:—

Permanent teeth	...	—	} Total	482
Temporary teeth	...	—				

TABLE VI.

Uncleanliness and Verminous Conditions.

(i) Average number of visits per school made during the year by the School Nurses	...	...	...	...	...	...	...	...	2.7
(ii) Total number of examinations of children in the Schools by School Nurses	10416								
(iii) Number of individual children found unclean	...	...	...	...	...	...	...	...	518
(iv) Number of children cleansed under arrangements made by the Local Education Authority	...	...	...	...	...	...	...	...	489
(v) Number of cases in which legal proceedings were taken :—									
(a) Under the Education Act, 1921	...	...	...	...	...	...	...	...	Nil.
(b) Under School Attendance Byelaws	...	...	...	...	...	...	...	...	Nil.





