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CITY OF LIVERPOOL.



SEEN BY THE
MEDICAL OFFICER

EDUCATION COMMITTEE.

REPORT

ON THE WORK OF THE

SCHOOL MEDICAL SERVICE

FOR THE YEAR

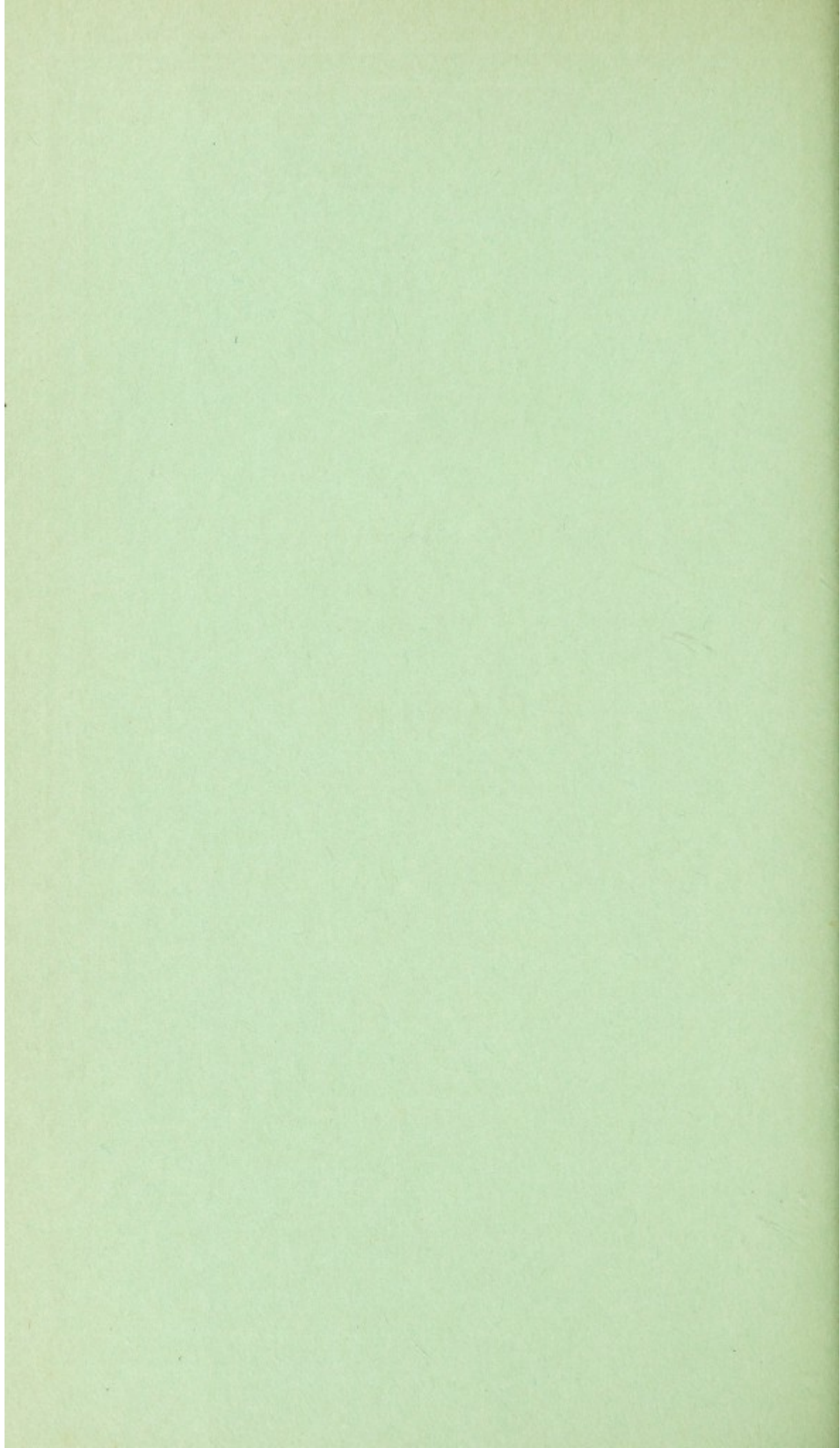
1939

BY

W. M. FRAZER, O.B.E., M.D., Ch.B., M.Sc., D.P.H.,
Barrister-at-Law,

Medical Officer to the Education Authority

Received by the Education Committee, 27th May, 1940.



CITY OF LIVERPOOL.



EDUCATION COMMITTEE.

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CITY OF LIVERPOOL



EDUCATION COMMITTEE

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W. M. THORNTON, Esq., M.A., F.R.S., M.D., F.R.C.P.

Secretary

Medical Officer to the Education Committee

Received by the Education Committee, 27th May, 1889.

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STAFF.

Medical Officer to the Education Authority.

W. M. FRAZER, O.B.E., M.D., Ch.B., M.Sc., D.P.H., Barrister-at-Law, (*Medical Officer of Health*).

Chief Assistant School Medical Officer.

R. GAMLIN, M.A., M.B., B.C., M.R.C.S., L.R.C.P., D.P.H., M.H.

Senior Assistant School Medical Officers.

G. S. ROBERTSON, M.D., L.R.C.P., L.R.C.S., L.R.F.P.&S. ETHELWYN M. WALTERS, M.B., Ch.B.

Assistant School Medical Officers.

A. T. BURN, M.B., B.S.	A. R. KENNEDY, M.B., Ch.B., M.R.C.S., L.R.C.P.
G. S. CLOUSTON, M.D., Ch.B. (<i>Resigned 28/2/39</i>).	MARY F. LACEY, M.D., Ch.B.
S. V. CULLEN, M.B., Ch.B. (<i>From 1/3/39</i>).	GRACE E. McCONKEY, M.B., Ch.B., B.A.O., D.C.H.(Lond.).
M. GODWIN, M.B., Ch.B.	MARGARET G. ORMISTON, M.A., M.B., Ch.B.
S. HOWARD, M.B., Ch.B.	R. M. A. ORMSTON, L.R.C.P., L.R.C.S., L.R.F.P. & S., (<i>From 1/4/39</i>) D.P.M.
CLARICE HUGHES, M.B., Ch.B.	J. E. POWER, M.B., B.Ch., B.A.O., D.P.H.
F. P. IRVINE, M.B., Ch.B.	HONORA J. TWOMEY, M.D., Ch.B., D.P.H.
B. S. JARVIS, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.	
HELEN KEITH, M.B., Ch.B.	
J. P. KELLY, M.B., Ch.B., B.A.O., D.P.H.	

Senior School Dental Officer.

T. H. PARSONS, L.D.S., R.C.S.

Assistant School Dental Officers.

A. BREWER, L.D.S.	G. E. NEVINS, L.D.S.
L. BROMLEY, L.D.S.	D. B. OWEN, L.D.S.
E. CROSBIE, L.D.S.	J. E. ROBERTS, L.D.S.
A. P. FINLAY, L.D.S., R.F.P.S.	J. TYSON L.D.S.
L. A. JONES, L.D.S.	I. WILLIAMS, L.D.S.
F. C. LITTLETON, L.D.S.	L. C. WINSTANLEY, L.D.S.
J. W. MARTIN, L.D.S.	J. A. WOOD, L.D.S.

Part-time Specialist Officers.

W. Murray Cairns, C.B.E., M.D., C.M.
(*Certifying Officer for Physically Defective Children*).

A. Dingwall Fordyce, M.D., F.R.C.P. (Edin.)
(*Certifying Officer for Mentally Defective Children*).

W. E. Livsey, M.D., B.Ch., M.R.C.S., L.R.C.P. (Lond.).
(*Oculist*).

D. Rankine, M.B., Ch.B. (*Oculist*).
(*Also Oculist for Crown Street School for the Deaf.*)

Courtenay Yorke, M.D., F.R.C.S.
(*Surgeon to Tonsils and Adenoids Clinic and Surgeon i/c of Aural Scheme. Aurist for Crown Street School for the Deaf.*)

T. E. Jones, B.A., M.D. (*Anæsthetist at Tonsils and Adenoids Clinic*).

T. P. McMurray, M.Ch., F.R.C.S. (*Consulting Orthopædic Surgeon*).

B. L. McFarland, M.D., M.Ch.(Orth.), F.R.C.S. (*Orthopædic Surgeon*).

W. J. Eastwood, M.Ch.(Orth.), F.R.C.S. (*Orthopædic Surgeon*).

W. S. Diggle, M.B., Ch.B., F.R.C.S. (*Orthopædic Surgeon*).

Speech Therapist.

Miss E. Osmond.

Superintendent of School Nurses.

Miss M. L. Nickson.

Chief Clerk.

Mr. F. J. Geldart.

Also :— 71 Whole-time school nurses.

4 Part-time school nurses.

2 Orthopædic nurses.

12 Clinic helpers.

5 Dental attendants.

34 Clerks.

CITY OF LIVERPOOL.

EDUCATION COMMITTEE.

REPORT of the MEDICAL OFFICER to the Education Authority for the Year ended 31st December, 1939.

1. The Medical Officer submits herewith his Report on the work of the School Medical Service for the year 1939, which, of necessity, has been much condensed.

In submitting this report, the Medical Officer of Health would like to record his appreciation of the services of Dr. R. Gamlin, the Chief Assistant School Medical Officer during the year, and especially in connection with the large amount of administrative responsibility which he has undertaken in connection with the evacuation of the child population of this City.

2. During the course of the year, three of the Committee's valued part-time officers, namely, Dr. Murray Cairns, Dr. T. E. Jones, and Dr. W. E. Livsey, relinquished their services to the Department owing to their having attained the age limit.

For 21 years Dr. Murray Cairns had been attached to the Special Schools, where he acted as certifying officer for physically defective children, in which work he was keenly interested. His sympathetic attitude and unfailing kindness contributed largely to the smooth carrying out of the work, and his official visits to the Special Schools will be missed by all those teachers with whom he came in contact.

Dr. T. E. Jones for the past 20 years acted as anaesthetist at the Committee's Tonsils and Adenoids Clinic, during which time he administered well over 20,000 anaesthetics without a single mishap, itself an outstanding testimony of his proficiency.

Dr. Livsey has been closely associated with the ophthalmic work at the Committee's Clinics since 1913. During this time he has also been responsible for supervising, from the ophthalmological

point of view, the children in the partially sighted classes. His expert knowledge on the question of defective vision in children was such that he was invited by the Board of Education to participate in some research work which they organised in 1923 for the purpose of enquiring into the factors in childhood leading to the development or aggravation of defective vision and squint. His advice was also sought by the Board of Education when they were enquiring into the problems connected with partially sighted children. Dr. Livsey was always most conscientious in his work, and his clinical records were of an exemplary high standard.

3. In January, 1940, the department suffered a severe loss in the death of Dr. Dingwall Fordyce who for 15 years had acted as certifying officer for mentally defective children, in which capacity he was an acknowledged expert. Dr. Fordyce was for many years Honorary Physician to the Royal Liverpool Children's Hospital where he was widely recognised as an expert in the treatment of heart conditions, in which connection he always stressed preventive treatment. He was a strong advocate of residential schools of recovery for rheumatic children. His enthusiasm for preventive treatment led him to accept the post of Honorary Director of the Liverpool and District Child Guidance Clinic and his services were eagerly sought by, and freely given to, many institutions. Dr. Fordyce was most enthusiastic in the work which he carried out for the Education Committee's special schools, and his charm of manner not only endeared him to all officials with whom he came in contact but made him much loved by the children and respected by their parents.

4. Some months prior to the outbreak of war, the Medical Officer of Health appealed for volunteers from the full-time medical staff and health visitors to organise first aid posts and train volunteers who had offered their services to these posts, to which appeal a most gratifying response was made.

On the declaration of war, it became necessary to fully equip and man on a war-time basis all these first aid posts for the reception of casualties in case severe raiding should occur, accordingly

it was considered advisable at once to send the doctors and health visitors to their respective posts. Despite great inconvenience, such as lack of sleeping accommodation and cooking facilities, they remained at the posts day and night. They showed great ingenuity in preparing the posts for any emergency which might arise and, subsequently, as arrangements became more organised, they administered them with a very commendable degree of efficiency. Many of the volunteers had no idea of first aid work and it was no easy task for the professional staff to train them and maintain their interest by lectures, demonstrations and practice classes, whereby they established a spirit of good-fellowship which has been so effective in keeping the classes together.

The Medical Officer of Health would like to express his appreciation of the co-operation which these members of the staff have shown and their constant devotion to duty.

5. Since it was considered that upon the outbreak of war air raids on a large scale would probably be made at once upon vulnerable areas, immediate evacuation was planned as an urgent administrative measure to be carried out as speedily as possible.

About noon on the 31st August the local authority received notice that they should put into operation their evacuation scheme and evacuation was commenced early the following day. Approximately 150,000 persons had registered for evacuation and train accommodation had been provided for this number. Actually, however, only 95,000 presented themselves for evacuation, some 70,000 of these being school children, the remainder being mothers with children under school age.

6. Subsequent to evacuation a good deal of criticism was received from the reception areas concerning the unsatisfactory condition of some of the children and their parents and opinions expressed that the evacuees should have been examined and the necessary steps taken to carry out whatever cleansing was necessary before the evacuees were allowed to travel. What such a procedure would have involved in the case of Liverpool may be envisaged when it

is realised that the numbers concerned approximated the numbers attending a Wembley Cup Final. Quite clearly to have examined and cleansed, where necessary, such enormous numbers of individuals would have taken so long that it would have caused a complete breakdown in the transport arrangements as planned.

It might be thought that in anticipation of probable evacuation that for some weeks previously special efforts should have been made to inspect and cleanse, where necessary, the proposed evacuees, but for some weeks prior to the commencement of evacuation the schools had all been closed for the summer vacation.

Furthermore, during the last weeks of August when the international situation was appearing more serious it was considered advisable, because of the probability of evacuation having to be carried out, to pay home visitations to those expectant mothers who had registered in previous months for evacuation, in order to obtain an up-to-date census. As nearly 4,000 visits had thus to be made, the staff of the Maternity and Child Welfare Health Visitors was inadequate for the purpose and every available school health visitor was loaned to them for a period of 12 days to assist in the work. With this assistance the revised census was successfully carried out in time, though the health visitors, in order to complete the work had to carry on until late in the evenings, and also work on Saturday afternoons and Sundays. Naturally during this intensive survey the usual work of the school nurses had of necessity to be largely suspended.

7. Ever since school medical work commenced in 1907 attention has been drawn to the prevalence of verminous infestation amongst school children in the school medical reports of every local education authority as well as in the annual reports of the Chief Medical Officer of the Board of Education.

The question might be asked, why after all these years such conditions continue to exist; the answer is that verminous infestation is not confined to school children only, but is invariably a family affair. Experience has shewn that certain school children

after being cleansed, often become rapidly re-infested because adolescent members of the family and pre-school children, over whom the school medical department have no control, are similarly infested. The examinations at Junior Instruction Centres have shewn that the juveniles, and particularly the girls, are often verminous, but no powers exist to enable the school medical officers and nurses to examine, without their consent, let alone cleanse, such infested juveniles attending the Education Committee's centres.

Another difficulty encountered in dealing with this problem is the effect of parental neglect during school holiday periods. At the beginning of each term many children are found in a school in a state of unsatisfactory cleanliness, all of which conditions had by the end of the previous term been remedied as a result of hard work on the part of the nurses.

The staff of medical officers and nurses, however, despite such disheartening setbacks and the limited powers which they possess to deal with such conditions, have undoubtedly already accomplished a great deal in raising the standard of cleanliness amongst school children, a statement that can be verified by a perusal of previous annual reports.

Now that public opinion has at last been aroused, no doubt the hands of those who have to deal with this problem, will, for the future, be strengthened, their unpleasant task made easier, and the public learn to welcome the activities of the nurses. Parents of cleanly habits should now realise and be thankful that cleansing surveys, which include the examination of their children, are being carried out in order to protect their children from others who may be harbouring vermin.

The question of asking Parliament for additional legal powers to deal more effectively with uncleanly conditions should also receive attention.

8. For the first few weeks after the outbreak of war, the activities of the School Medical Service were largely suspended. For one

thing the schools were closed, in view of anticipated air raids, and it was not considered advisable to allow numbers of children to gather at school clinics which were accordingly closed. Under these circumstances the services of the school medical officers and health visitors were utilised at the First Aid Posts.

9. After the first few weeks, however, when experience had shown that the anticipated air raids had not materialised the activities of the School Medical Services were gradually resumed. At the end of the year the disposition of the school medical staff was as follows:—

(a) Permanently engaged on School Medical work:—

- 6 School Medical Officers.
- 6 School Dental Officers.
- 41 School Health Visitors.
- 3 Dental Attendants.

(b) Seconded to Reception Areas:—

- 1 School Medical Officer (another two had been promised).
- 6 School Dental Officers.
- 3 School Health Visitors.
- 2 Dental Attendants.

(c) Seconded to A.R.P. Service:—

- 8 School Medical Officers.
- 27 School Health Visitors.

(d) Joined H.M. Forces:—

- 2 School Medical Officers.
- 3 School Dental Officers.
- 1 School Health Visitor.

By the end of the year all the minor ailments clinics, with the exception of the Old Swan Clinic, which had been occupied by the Military, were open, as well as all the dental clinics except one which was occupied as a First Aid Post, and in which case alternative accommodation was obtained in the area. All the facilities for the treatment of special cases, such as Defective Vision, Aural, Orthopaedic, etc., were available.

The services of the 8 doctors attached to First Aid Posts were utilised for attendance at the minor ailments clinics.

All the usual School Health Services were available for the children, but naturally, with the schools being closed, some difficulty was experienced in organising the desired medical supervision. The doctors attended at the minor ailments clinics at the customary times, and inspection clinics were held at the Office and other convenient centres, where children, referred by teachers, school health visitors and school attendance officers, were examined.

Of the 41 school health visitors who were at the end of the year engaged whole-time in school medical work, approximately 30 were dealing with the problem of uncleanliness, in home visiting and in inspecting groups gathered together for home teaching. During these visits the nurses listed cases which were subsequently seen for medical or dental treatment and for examination with regard to the need for free meals.

10. The Medical Officer is indebted to the Director of Education for information supplied with regard to certain sections of this Report relating, in particular, to the work in connection with the Special Schools, Provision of Meals, and Juvenile Employment.

11. The statistical tables required by the Board of Education concerning the work carried out appear in Appendix "A" and Appendix "B", but a summary of the work undertaken, together with certain other information, is here given.

CITY OF LIVERPOOL.

GENERAL STATISTICS.

Number of Public Elementary Schools	201
Accommodation (at end of June)	162,280
Average number on rolls (at end of June)	126,442
Average attendance (at end of June)	113,406 (89.7%)

GENERAL SUMMARY OF WORK CARRIED OUT.

1. By School Medical Officers :—

(a) Medical Inspections :

	Public Elementary Schools.	Higher Schools.	Special Schools.	Nursery Schools.	Junior Instruction Centres.	TOTALS.
Routine Inspections	31,060	968	269	144	1,736	34,177
Special Inspections	43,765	365	783	1	344	45,258
Re-inspections ...	89,942	3,990	18	17	736	94,703
TOTAL INSPECTIONS	164,767	5,323	1,070	162	2,816	174,138

(b) Treatment carried out :

Cases of miscellaneous minor ailments	23,418
„ „ skin diseases	2,886
„ „ eye diseases	2,052
„ „ ear diseases	2,161
TOTAL	30,517

2. By Specialist Officers :

Treatment carried out :

(a) No. of cases operated upon at Tonsils and Adenoids Clinic ...	850
(b) „ „ „ dealt with by Surgeon at Orthopaedic Clinics ...	1,105
(c) „ „ „ of defective eyesight treated by Oculists at Clinics or own rooms	6,068
(d) „ „ „ treated by X-rays	13
(e) „ „ „ dealt with at Aural Clinics	1,105
TOTAL TREATED BY SPECIALISTS	9,141

3. By School Dental Officer :

Elementary School Children treated at Clinics	22,388
Special and Approved School Children treated	647
Maternity and Child Welfare cases treated	454

List of School Clinics showing the Treatment carried out.

	TREATMENT CARRIED OUT.						
	Aural.	Cleansing.	Defective Vision.	Dental.	Minor Ailments.	Ortho-pædic.	Tonsils and Adenoids.
Balfour Institute	X	...	...
Burlington Street	X	...	...	...
Clifton Street, Garston	X	X	X	X	...	...
Dingle House	X	...
Dovecot	X	X	X	...	...
Eldon Place	X	...	...	...	...	...
Everton Road ...	X	X	X	X	X	X	...
Fazakerley	X	X	...	...
Moss Street	X	...	...
Norris Green ...	X	X	X	X	X	...	...
North Corporation ...	X	...	...	...	X	...	...
North Dispensary	X
Northumberland Street	X	X	...	...
North Way	X	...	...	...
Old Swan	X	...	...
Gt. George Square	X	...	...	...	...	...
St. Anne Street	X	...	...	...	...
Sugnal Street	X	X	...	...
Walton	X	X	X	X	...
Westminster Road	X	...	...

NOTE.—A cross indicates the activities carried out at the respective clinics.

NUTRITION.

12. The table showing the classification of the nutrition of children inspected in the routine age groups during the year appears on page —.

From this table it will be seen that 7·7 per cent. were regarded as of excellent nutrition, 87·9 per cent. as of normal, 4·3 per cent. as slightly subnormal and ·09 per cent. as bad. Considering that these figures are not based on any scientific measurements but solely on the opinions of the doctors it is surprising that they correspond so nearly to the figures of 1938, although they differ from the figures for the country as a whole as shown in the Board's report for 1938, the chief difference being the Board's larger figures of 10·8 per cent. for slightly subnormal as against Liverpool's 4·3 per cent. and 14·5 per cent. of excellent nutrition as against Liverpool's 7·7 per cent. Though if the percentages of excellent and normal be added together the figures for Liverpool show a superiority over the average figure for the whole country of 6·9 per cent.

13. Full nutrition surveys were carried out in 34 schools, in the poorer neighbourhoods, at the time of the routine inspections of these schools. It was found that out of 26,000 children examined, 6,131 (23·53 per cent.) were already in receipt of free milk, 134 (·51 per cent.) free meals, and 3,047 (11·69 per cent.) both free meals and milk. Of the subnormal children 1,494 were paying for the milk.

As a result of the surveys, 35 additional children were recommended for free meals, 49 for free meals and milk, and 671 for free milk, whilst in 1,706 instances the medical officers reported that, on medical grounds, the provision of free meals, free milk, or both, was no longer considered necessary.

In those schools in which a full nutrition survey was not carried out, 387 children were recommended for free milk, or free meals, or both, in addition to those who were not already receiving these. In

2,531 instances the medical officers reported that on medical grounds the continuance of the free meals, free milk, or both, was no longer considered necessary.

PROVISION OF MEALS AND MILK.

14. The total number of dinners supplied was as follows:—

1st January to 31st August...	...	...	...	...	1,731,497
1st September to 31st December	...	...	...	...	171,147
					<hr/>
					1,902,644
					<hr/> <hr/>

The highest number of individual children who were provided with dinners during any one week was 11,883, i.e. about 9·3 per cent. of the average number of children on the rolls of the elementary schools.

Owing to the evacuation of the school children 17 of the 31 dining centres were closed from September 7th, 1939. Dinners were served at the 14 dining centres which remained open during the whole of the year. The highest number of individual children receiving dinners during any one week since the declaration of war was 2,103.

15. Milk was supplied at the schools during term time under the 'Milk Club' scheme drawn up by the Milk Marketing Board and adopted by the head teachers of the schools. **Milk Scheme.**

The source and quality of the milk issued to the children was approved by the Medical Officer of Health. The provision of pasteurised milk only was approved of.

Milk was not issued to school children from September to December 31st. The total number of bottles of milk given free of charge during the first eight months of the year was 4,346,307. The highest number of individual children provided with free milk in any one week was 33,714 (26·4 per cent. of the average number of children on the rolls of the schools).

DENTAL INSPECTION AND TREATMENT.

16. The following Table shows the work carried out under the Dental Scheme for children attending the public elementary schools, together with the corresponding figures for the previous two years:—

TABLE 1.

	1937	1938	1939
Number of children examined in school	73,620	71,711	54,600
Number of children requiring treatment	59,470 (80·7%)	58,057 (80·8%)	43,386 (79·4%)
Number of cases accepting treatment under the Dental Scheme	27,380 (46·0%)	32,265 (55·6%)	22,457 (51·8%)
Number of cases treated	25,293	29,985	22,388
Number of schools concerned	136	131	105

Up to the outbreak of war the improvement in the proportion of acceptances of routine dental treatment, which was commented upon in the last report, had been maintained. Attendances at the clinics had improved, whilst the increased acceptance rate of recent years had, as anticipated, made possible a higher proportion of permanent teeth being saved.

Unfortunately, the commencement of hostilities, resulting in the evacuation of children from the priority area and the temporary closing of all schools, interfered very seriously with the scheme of dental treatment.

Three dental officers were called up for military service: Captain Bromley in the Royal Welch Fusiliers and Lieuts. Winstanley and Martin in the Army Dental Corps. Furthermore, in response to requests from the Medical Officers of the reception areas for assistance in dealing with the evacuated children, 6 dental officers and 2 dental attendants were loaned to these authorities.

All the dental clinics situated in the priority area of Liverpool were temporarily closed on the outbreak of war, but the three clinics in the non-priority zone, viz.: Norris Green, Dovecot and North Way, remained open to treat the children in those districts who had not, up to that time, received treatment as a result of recent dental inspections. These were the only children in the City who were available for summoning as appointment cases, but all non-evacuated children who applied for treatment, or of whom knowledge came to the staff that treatment was required, were invited to attend these clinics for treatment irrespective of the areas in which they lived.

A scheme of house to house visitation was arranged in certain districts and the nurses were instructed to report all cases of children requiring dental treatment which they discovered, and the teachers in charge of home-teaching groups also gave valuable assistance in this respect.

In these ways it was found possible to obtain sufficient cases to fully utilise the services of the depleted dental staff at the three available clinics. With the re-opening of the schools and of the clinics in the priority areas it will, however, be impossible, with the remaining staff, to provide dental treatment for all the children who require it. Additional temporary dental officers to replace those on military service will, therefore, be required in 1940.

17. Considerable delay was at first experienced in the treatment of the evacuated children in the reception areas, and a large amount of correspondence incurred, because of the necessity of obtaining in Liverpool parental consent in respect of each child found to require treatment. In order to obviate this difficulty a form of permanent parental consent to dental treatment which should cover the whole period of evacuation has been devised, and, by arrangement with the Public Health Department, this form also contains a clause giving consent to diphtheria immunisation if recommended by the Medical Officer.

In addition to obtaining this permanent consent in respect of those children who have already been evacuated, it is proposed to obtain this signature, where possible, as a routine measure before the departure of the children, if any further evacuation scheme becomes necessary.

EAR, NOSE AND THROAT CONDITIONS.

18. Mr. Courtenay Yorke reports as follows:—

Mr.
Yorke's
Report re
Aural
Clinics.

“ Until the commencement of the war the aural clinics were very busy, the organisation providing for the early discovery of cases which are provided with continuity of treatment. I am strongly of the opinion that the co-operation of the parents in the routine cleansing of the ear is often very desirable, both because much educational time is saved by the avoidance of daily visits to the minor ailments clinics, and also because there need then be no intermission in the treatment. If therefore, in a prolonged case, the parent is intelligent and likely to co-operate it has been the practice to give instruction in the use of a small all-rubber aural syringe. These home cases are, of course, required to attend at the aural clinics at regular intervals for re-examination.

In many instances the removal of granulations or polypi or the enlargement of perforations have given good results and averted the need for a major operation. We do not, therefore, too readily send children to hospital for the radical mastoid operation and, the more so, because this operation is not always very satisfactory.

Zinc ionisation treatment has been used during the year, but has not by any means in our experience fulfilled all the claims made for it. It must be confessed that not a few cases of chronic ear discharge seem to baffle all efforts. In many such cases the mastoid operation is not indicated, and we can only hope to find some new method of attack.”

The following Table gives the types and numbers of cases treated at the aural clinics:—

TABLE 2.
AURAL CLINICS.

Number of children who attended for examination and treatment ...		...		...		1105	
Total number of attendances at clinics ...		...		...		4418	
External Ear Conditions.	No. of ears treated.	No. of ears treated.	External Ear Conditions.	No. of ears treated.	No. of children.		
Impacted wax ...	68	...	Wax and other conditions cured ...	78	78		
Other conditions ...	15	...	Cases still attending clinic ...	3			
		...	Referred to hospital ...	1			
		...	Failed to complete treatment ...	1			
Middle Ear Conditions.	No. of ears treated.	No. of ears treated.	Middle Ear Conditions.	No. of ears treated.	No. of children.		
Suppurating otitis media—acute ...	64	...	Suppurating otitis media—acute; cured	36	389		
Chronic simple tympanic sepsis ...	434	...	Chronic simple tympanic sepsis—cured	193			
		...	Cases still attending clinic ...	60			
		...	Referred to hospital ...	7			
		...	Failed to complete treatment ...	202			
Chronic Conditions with Complications.	No. of ears treated.	No. of ears treated.	Chronic conditions with Complications.	No. of ears treated.	No. of children.		
Granulations, polypi and attic suppuration ...	212	...	Cured ...	46	211		
Old mastoid trouble ...	44	...	Condition improved ...	54			
		...	Still attending clinic ...	51			
		...	Referred to hospital ...	21			
		...	Failed to complete treatment ...	84			
Condition Quiescent—No Treatment Required ...	...	...	...	...	...	84	
No. of Children Specially Examined for Hearing Defects ...	...	...	...	...	...	135	
Cured ...	27	...	...	...	...
Improved ...	46	...	...	...	...
Not improved ...	56	...	...	...	...
No special treatment required ...	6	...	...	...	...

18 children were treated by zinc ionisation, one child receiving treatment for both ears. In 8 cases the condition was cured, 7 were not yet dry, whilst in 4 cases the children failed to complete the treatment.

A considerable number of children who are included in the above table were also found to have some associated nose and throat conditions, whilst others were referred to the aural clinics merely for treatment for nose and throat conditions and the following is a summary of the defects found and the treatment given in these conditions:—

Chronic nasal catarrh—treated by diastolisation and advised re breathing exercises and home treatment	...	...	...	...	...	...	...	189
Enlarged tonsils and adenoids—operation advised	...	...	...	...	...	...	...	17
Atrophic rhinitis treated	...	...	...	...	...	...	...	4
Nasal polypi removed	...	...	...	...	...	...	...	1
Other defects treated	...	...	...	...	...	...	...	21
No defect found	...	...	...	...	...	...	...	57
Referred to hospital	...	...	...	...	...	...	...	2
								<hr/>
								TOTAL
								...
								...
								...
								...
								291

**Tonsils
and
Adenoids
Clinic.**

19. At the routine examinations of the public elementary school children, the number found to require treatment for unhealthy tonsils or adenoids was 603 which represents a percentage of 1.94 of the children examined.

Apart from the cases discovered at the routine examinations, 233 other children were found to require treatment for one or both of these conditions. In cases where the school medical officers are uncertain whether or not to recommend operative treatment, arrangements are made for them to be seen at the clinic by the specialist. Altogether, 488 of these doubtful cases were referred to him during 1939, and in 234 cases an operation was advised.

The treatment was carried out at the Committee's clinic at the North Dispensary, Vauxhall Road, which was opened on 79 occasions during the year. The total number of cases treated was 850, which number included 12 cases from the special schools.

The operations were as follows:—

Tonsils only	...	...	...	...	640
Adenoids only	...	...	...	...	69
Tonsils and Adenoids	...	...	...	...	141
					<hr/>
					850
					<hr/>

20. Mr. Yorke reports:—

“ The surgeon in charge of a tonsils and adenoids clinic has two principal aims, viz. : (i) to select, wisely, the cases for operation, and (ii) to operate with the maximum of efficiency and safety. Very little could be said in criticism of the modern surgical procedure and, in fact, the operations are done with such facility and safety that there is, perhaps, a tendency to have recourse to them too frequently, and, again, many surgical successes are so outstanding that one may unconsciously, borrow credit from them to uphold the surgical treatment in general, or to redeem disappointing results. The selection of cases on the other hand is a question on which opinion is much divided and, as great numbers of children are concerned, must be regarded as a responsibility of the first importance. A more conservative attitude is certainly growing, thanks largely to the repeated strictures in the annual reports of the Board of Education. The surest indication of an excessive zeal in operating is the very high percentage of combined operations, in which both tonsils and adenoids have been removed. The problem is a very complex one and no fixed criteria are possible, but, in my opinion, a valuable asset in a surgeon is a disposition to avoid operations if possible.

**Mr.
Yorke's
Report re
Tonsils
and
Adenoids
Clinic.**

The cases which occasion most difficulty are probably those with chronic or recurrent nasal symptoms. Very many children, especially amongst the poor, suffer from chronic nasal catarrh, causing mouth breathing. There are numerous causes for this condition besides adenoids, and the removal of adenoids in such cases may not only fail to give benefit but may actually do harm. We are giving increased attention to these nasal cases, both at the tonsil and adenoid clinic and at the aural clinics. Many of these catarrhs

result from bad home conditions and are the most difficult to treat since advice to parents as to diet, foot-wear and general habits of life is often very unfruitful.

There is undoubtedly an important field of action for the school medical service in regard to these chronic nasal affections, which produce so much discomfort and ill health.

DEFECTIVE VISION.

21. The number of children with defective vision, found at the routine examinations of the second and third age groups, was 3,625 (17·85 per cent.), but only 1,629 of these, or 8·0 per cent. of the total, were found to be in need of treatment, most of the remainder having been already supplied with glasses. Altogether, 635 of the entrants were suspected of having defective vision, 546 of these showing evidence of squint. In addition to the cases found amongst the children in the routine age groups, 1,363 were seen as special cases.

All cases of defective vision were kept under regular supervision at the medical re-inspections, and 7,891 children, who had been provided with glasses, were re-inspected with a view to finding out whether the time had arrived for them to be sent to the clinics for re-examination by the oculist. At the re-inspections in the schools, 2,644 (33·5 per cent.) were found not to be wearing their glasses.

22. The number of new cases treated under the Committee's scheme was 2,073, whilst 152 children were treated privately or at hospitals. The number re-examined at the clinics was 3,094. These numbers do not represent the total number of attendances since many children with amblyopia received intensive treatment, attending weekly, or oftener, for many weeks.

23. Under the arrangements made with the Hospitals and Port Health Committee for the treatment of squint in pre-school children, 223 children were examined by the oculist, and glasses were provided in 164 of these cases.

The school medical officers reported that, in the course of their inspections, they had examined 23 children who had been operated upon for the correction of squint, such operations having been carried out at the various hospitals in the city.

24. Dr. David Rankine reports that special attention is being given to the two most serious classes of defective vision, viz., myopia and amblyopia, conditions which account for much more disability in education and subsequent life than is generally recognised.

Dr.
Rankine's
Report.

The myopes, or near-sighted children, are being observed at more frequent intervals than previously, so that should any signs of serious deterioration of vision be detected prompt measures could be taken to deal with it. Two children, for instance, were recommended for transfer for a period to the open-air school at Torpenhow, in the hope that the building up of their general health and physique might help to arrest the deterioration of their sight.

In the condition known as amblyopia one eye is more or less useless, not through disease, but as the result of subconscious suppression of its vision. Amblyopia can practically always be anticipated and completely prevented, and even when established it can be lessened and sometimes cured in children if treatment is commenced sufficiently early. The treatment is often long and arduous, and calls for great patience on the part of all concerned. In a number of cases during the year a cure was effected, whilst many others were improved to the extent of having useful sight.

ORTHOPÆDIC SCHEME.

25. There were 1,105 children under supervision at the clinics, 432 of these being new cases, of which number 146 were seen at the Walton clinic, 176 at the Everton Road clinic, and 110 at the Dingle House clinic. Altogether the cases made 11,120 attendances, either for examination by the surgeons or for massage or exercises, the average number of attendances per case for massage or remedial exercises being 19·1.

Arrangements were made for 42 of the cases to be admitted to hospital, whilst 25 cases were referred to hospital for X-ray examination.

26. The following is a summary of the treatment carried out at the hospitals on the cases referred from the clinics :—

SUMMARY OF HOSPITAL TREATMENT, 1939.

Correction of deformities of feet or toes	...	...	...	13
Tenotomies or stretching	...	...	...	5
Osteoclasis	...	...	...	1
Osteotomies	...	...	...	6
Reduction of congenital dislocation of hip	...	...	...	1
Treatment of torticollis by operation	...	...	...	2
Other operations	...	...	...	6
General treatment...	...	...	...	8
				42
				42

**Mr.
McFarland's
Report.**

27. Mr. McFarland, one of the Surgeons-in-charge of the clinics, reports that the continued success of the orthopædic clinic system in Liverpool is shewn by the figures of attendance on the accompanying table. What the table does not shew is the increasing satisfaction, confidence and co-operation of the people.

By early detection much deformity is being prevented. By quick admission to hospital the length of treatment is minimised, and by prolonged and regular observation recurrence is avoided. Only by these means can the purpose of the Orthopædic Scheme be fully achieved. They are the three pillars which support a successful scheme. They in turn rest on a foundation of good staff work and willing co-operation by the mothers. As long as these can be maintained the scheme will continue to be effective.

28. The accompanying Table shows in detail the work carried out at the clinics :—

TABLE 3.

Cases dealt with under the Orthopaedic Scheme during 1939.

Defect	Cases seen at Surgeons' Visits.				Massage and Remedial Exercises Department.						
	NO OF CASES		NO. OF ATTENDANCES		NO. OF CASES.		NO. OF ATTENDANCES.				
	Clinic		Clinic		Clinic.		Clinic.				
	Dingle House	Everton Road	Dingle House	Everton Road	Dingle House.	Walton.	Everton Road.	TOTAL.			
Infantile Paralysis	17	23	34	47	12	16	12	341	171	877	
Birth Palsy ...	1	3	2	5	1	1	2	8	5	70	
Spastic Paralysis	26	20	45	38	19	15	28	575	473	1,457	
Rickets ...	52	38	81	57	6	4	8	70	41	207	
Talipes ...	7	17	9	26	2	2	8	61	53	237	
Spinal Curvature	18	25	31	46	15	18	26	407	451	1,378	
Torticollis ...	3	6	5	10	1	4	1	2	144	169	
Flat Feet ...	81	141	134	239	30	71	50	590	1,200	2,575	
Other deformities	30	38	45	58	9	9	6	118	216	427	
Other defects ...	40	69	59	108	22	38	57	508	891	2,016	
No orthopaedic defect found ...	3	7	3	7	—	—	—	—	—	—	
TOTALS ...	278	387	448	641	117	178	198	2,680	3,839	2,894	9,413

STAMMERING AND REMEDIAL SPEECH CLASSES.

29. The classes were closed at the end of August and were still closed at the end of the year.

Whilst the classes were open some research had been commenced in which Miss Osmond, the speech therapist, co-operated. This work was naturally interfered with by the closure of the class. So far as the investigations had gone there were indications shewing that the practice of teaching relaxation at these classes was of definite value.

There was also some evidence adduced pointing to the rather curious fact that in those cases where any stammering, left handedness or squint existed amongst the near relatives, the child's prospects of cure appeared to be increased.

MINOR AILMENTS.

30. During the year, 29,483 cases were treated at the minor ailments clinics, necessitating 318,617 attendances being made by the children, the average number of attendances being 10·8 per child.

Scabies.

31. Scabies remain prevalent, 1,146 new cases amongst school children being reported. There were discovered 2·1 cases of scabies per thousand children examined as routines, as compared with 1·9 per thousand in 1938. Treatment facilities were provided at four of the Health Committee's cleansing stations, where in addition to school children, there were also treated any pre-school children or older female members of the families who were affected. In all 633 school children, 25 adults, and 128 children under school age, were treated at these clinics.

The children affected were kept under regular medical supervision, the doctors usually seeing them on Saturday mornings, 1,685 examinations of these children being made, and 1,321 of them re-admitted to school.

NOTIFICATION OF DEFECTS AND ARRANGEMENTS FOR FOLLOWING UP.

34. The percentages of parents attending at the examinations of their children as entrants, second age group, and leavers were 87·8, 60·4 and 28·8 respectively.

In connection with the following up of cases and in arranging appointments for treatment 55,724 notices were sent from the office to parents.

PARENTS' PAYMENTS.

35. The charges made by the Committee for the various forms of treatment provided in Liverpool remain as stated in the 1938 report.

The following amounts were received during the year 1939 as parental contributions towards the cost of treatment for:—

	£	s.	d.
Defective vision	833	3	6
Dental defects	458	6	3
Tonsils and adenoids	303	13	9
Ringworm of the scalp	2	5	0
TOTAL	£1,597	8	6

THE LIVERPOOL CHILD GUIDANCE CLINIC.

36. Altogether 39 cases were referred to the Liverpool Child Guidance Clinic by the School Medical Department and 75 cases of school children were referred from other sources, such as, school teachers, hospitals, probation officers and social agencies. There were also 20 pre-school children referred from various sources in the Liverpool area.

At the beginning of the year there were 99 children of school age under treatment from the previous year, who, together with the 114 new cases, made a total of 213. (147 boys and 66 girls). Practically all the cases investigated were found to present not one but several symptoms, e.g., "enuresis, truancing or temper tantrums", "stealing and fears", etc.

CHILDREN AND YOUNG PERSONS ACT.

37. In accordance with the arrangements made under Section 35 of the Children and Young Persons Act (1933), medical reports were submitted for the information of the magistrates in the Juvenile Court on 1,656 cases. This figure includes 50 of the evacuated children who were brought before the Juvenile Courts in the Reception Areas.

An increase in the number of cases appearing before the Juvenile Courts was noticed in the last quarter of 1939 when medical reports were submitted on 489 cases.

EMPLOYMENT OF SCHOOL CHILDREN.

38. At the end of the year there were 1929 school children (1,911 boys and 18 girls) employed out of school hours. The school medical officers examined 726 children as to their fitness to undertake work before school hours and in 5 cases certificates were refused on medical grounds.

During the year, the Sub-Committee, dealing with the licensing of children, granted 51 theatrical licences.

CHILD WELFARE ASSOCIATION.

39. The Child Welfare Association have continued to render very valuable assistance in the direction of securing convalescent treatment, surgical treatment, or appliances, and providing special tonics or extra nourishment for children requiring such treatment. They also supplied, on the recommendations of school medical officers, milk to school children who were not in attendance at school. In all, 516 cases were referred to the Association during the year.

EVERTON ROAD NURSERY SCHOOL.

40. The nursery school was evacuated to Hightown on 1st September, 1939. Of the 116 children in attendance at the end of June, 63 went with the school. Besides the teaching staff there is a nurse in residence.

There were 23 cases of infectious fevers amongst the 63 children between the 20th September and the end of November, which resulted no doubt from the bringing of these children into closer contact at a susceptible age.

41. The benefit of residential life and a more healthy environment is indicated by the following extracts from the Head Teacher's and Dr. Howard's reports:—

“ There were 30 cases of enuresis in September but only 2 cases now ”.

“ The parents are delighted with the progress of their children, not only physically, but also in speech and behaviour ”.

“ I was impressed by the general appearance of fitness exhibited by the children, all of whom appear very happy ”.

UNCLEANLINESS.

42. The school nurses made 253,406 examinations of school children with regard to cleanliness, and altogether 20,972 children were found to shew some evidence of verminous infection or were very dirty. In the case of 27 children, statutory notices were served upon the parents owing to their failure to cleanse their children after previous notifications, and 9 children had to be compulsorily cleansed by the staff.

The total number of attendances made at the 5 cleansing stations during the year was 21,920, of which number 20,480 were on account of verminous conditions.

TUBERCULOSIS.

43. At the routine inspections in the schools there were discovered 50 cases of tuberculous glands, and 55 cases of other forms of tuberculosis, a total of 105 cases, or 0·34 per cent. amongst the routine cases examined.

There were also seen at the inspection clinics, or as special cases at the schools, 12 definite or suspected pulmonary cases, and 41 cases of other forms of tuberculosis.

All the cases of actual or suspected tuberculosis discovered by the school medical officers were referred to the tuberculosis officers for examination. The number of references so made was 93 whilst the Tuberculosis Department supplied information with reference to 1,207 school children who had been reported from other sources as possible cases of tuberculosis. Of these, 556 were new cases for the year and 423 were reported as non-tuberculous.

INFECTIOUS DISEASES IN SCHOOLS.

44. There was a marked decrease in the number of cases of infectious disease reported amongst children of school age during the year; 3,964 cases, a decrease of 2,268, being reported as against 6,232 in 1938 and 8,329 in 1937. This was a real and not an apparent decrease due to the closure of the schools as for the first eight months of the year there was a decrease of 1,276 cases as compared with the corresponding period of 1938.

During the period the schools were open measles shewed the greatest reduction, namely, that of 1,460 cases, and diphtheria a reduction of 309 cases.

It was not necessary to close any school or department on account of infectious disease. The arrangements for the inoculation of children attending the infants' departments of the public elementary schools were carried out as in previous years. For this purpose visits were paid to 45 schools. The response varied considerably in the different schools, but taking the schools as a whole, approximately 27 per cent. of the infants attending were inoculated. The total number of school children inoculated at the schools was 2,978. In addition, a considerable number of children of school age were inoculated at the two immunisation clinics, held at the Carnegie Welfare Centre and the Norris Green Clinic.

SCHOOL PREMISES.

45. The periodic inspections of school premises by the school medical officers and the inspection of the sanitary arrangements by the district sanitary inspectors were continued as formerly.

The Surveyor has kindly supplied details relating to all the improvements made in connection with public elementary schools during the year, which may be summarised as follows:—

List of improvements made in various Schools during 1939.

Re-flooring	...	...	...	...	...	4 Schools.
Heating arrangements	...	...	...	...	...	8 „
Lighting (natural and artificial)	...	...	...	...	...	2 „
Playgrounds	...	...	...	...	...	6 „
Lavatories	...	...	...	...	...	6 „
Alterations	...	...	...	...	...	3 „
Fencing	...	...	...	...	...	2 „

SPECIAL SCHOOLS.

School
for
Blind.

46. The total number of children at the end of the year who had been certified as blind was 23, of whom 16 were attending Wavertree School for the Blind, 5 the Roman Catholic School for the Blind, Brunswick Road, one the Royal Normal College for the Blind, London, and one Court Grange Special School for the Blind, Abbots Kerswell, South Devon.

Classes
for the
Partially
Sighted.

47. Classes for partially-sighted children were maintained until 31st August at the Birchfield Road council school, Christ Church C.E. elementary school, Underlea day open-air school, and Fazakerley day open-air school. The number on the rolls at these classes on August 31st was 112, the average attendance being 107.

School
for the
Deaf.

48. The Committee's School for the Deaf at Crown Street has accommodation for 200 scholars, the average number on rolls being 162. On the outbreak of hostilities this school was transferred to the Underlea open-air school, arrangements being made whereby Liverpool scholars of the school became boarders under the control of the Managers of the school, although arrangements for their education remained in the hands of the Education Committee. In December, because of the overcrowding, more than half of the children were transferred to the Woolton Vale school.

M.D. and
P.D.
Schools.

49. The accompanying return shows the results of the examinations made by the Certifying Officers for the ascertainment of mentally and physically defective children during the year.

Table 4.

	Referred as Physically Defective.	Referred as Mentally Defective.
Passed for M.D. Schools—Day	—	107
Passed for M.D. Schools—Residential	—	1
Passed for P.D. Schools—Day Special	58	—
Passed for P.D. Schools—Day Open air	249	15
Passed for P.D. Schools—Residential	56	9
Passed for Epileptic Schools	3	—
To remain in ordinary schools	33	58
Postponed for further trial in ordinary school or for treatment	26	145
Unsuitable for any school (P.D.)	3	—
Referred for Child Guidance Clinic	1	2
Referred for Mental examination	1	—
Total number of children examined... ...	430	337

**Cases Notified to the Lancashire Mental Hospitals Board
during the Year.**

1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School:—	
(a) Idiots	1
(b) Imbeciles	55
(ii) Children unable to be instructed in a Special School without detriment to the interests of the other children:—	
(a) Moral defectives	—
(b) Others	3
2. Feeble minded children notified on leaving Special Schools on or before attaining the age of 16 years	85
3. Feeble minded children notified under Article 3, of Regulation No. 659, i.e., "Special circumstances" cases	1
4. Children, who in addition to being mentally defective were blind or deaf...	1
TOTAL	146

50. In addition to the examination of new cases referred for ascertainment, 1,361 examinations of children attending the schools for the mentally defective and the physically defective were made as required by the Education Act of 1921, with regard to their suitability for continuing to attend.

51. The following Table shews the accommodation, number on the rolls, and the average attendance in the various types of Special School provided by the Committee up to 31st August :—

Table 5.

Schools for the	Accommodation.	No. on Rolls, Aug., 1939.	Average Attendance Aug., 1939.
Mentally Defectives (Day)	728	594	515
Physically Defectives (Day)	946	947	769
Physically Defectives (Residential)	68	68	68
Partially-sighted (Classes)	160	113	101
Deaf	200	163	146

Medical
Inspection
and
Treatment.

52. The school medical officers carried out the medical inspection and re-inspections at some of the Day Special Schools, and the following is a summary of the number of examinations made by them :—

Routine examinations	...	...	269
Re-inspections	...	...	783
Special inspections	...	...	18
Total	...	...	<u>1,070</u>

Facilities for treatment are available under the Committee's Schemes, 85 cases of defective vision being dealt with, comprising 32 new cases and 53 re-examination cases. In addition, 12 children were operated on at the tonsils and adenoids clinic, 14 were treated at the aural clinics and 17 at the scabies clinics. In the case of children suffering from crippling defects, full use was made of the facilities available at the orthopaedic clinics.

53. The following Table shews the work carried out during the year by the dental staff of the School Medical Department at the Special Schools and the Sankey Approved School:—

Dental
Treatment
at Sankey
and Special
Schools.

Table 6.

	Sankey.	Special Schools.	Total.
Number of inspection sessions	2	12	14
Number of treatment sessions	22	69	91
Total number of sessions	24	81	105
Number of children inspected	143	673	816
Number of children requiring treatment	80 (55·9%)	421 (62·5%)	501 (61·4%)
Number of children treated... ..	109	538	647
Number of attendances made for treatment ...	136	568	704
Number of teeth extracted	165	989	1,154
Number of teeth filled	80	66	146
Number of other operations	8	11	19
Number of administrations of general anæsthetics	82	486	568

54. Advantage was taken of the opportunity afforded by the closing of the elementary schools to concentrate upon the treatment of the children attending the special schools and of those at the approved school. Accordingly, it was found possible to complete the dental inspection and treatment of all those children who had not been evacuated during the early weeks of the war. The apparent anomaly which is shewn in the statistical table, whereby it appears that more children were treated than were found to require treatment, is explained by the fact that, whilst the inspection of a number of these children actually took place late in 1938, the children concerned did not receive their treatment until the beginning of 1939. The figures for these inspections, therefore, have already been included in the return for 1938.

Torpenhow. 55. The Committee retain 36 beds at the Chest Hospital's residential open-air school at Torpenhow, near Frankby.

There were 80 Liverpool children admitted to this school during the year, and during their period of residence there the average gain in weight was $7\frac{3}{4}$ pounds. Following their stay at Torpenhow the children are kept under special supervision by the school medical officers, and when considered advisable they are admitted to one of the day open-air schools, 17 being so transferred.

Evacuation of Special Schools Children.

56. On the outbreak of hostilities, all the physically defective children, who resided in the priority area and who had accepted evacuation, went into residence at the Fazakerley Open-air School, and the mentally defective children, with the exception of the Queensland Street boys at the Margaret Beavan School. In the middle of October, the physically defective children were transferred from Fazakerley, some to "Nant-y-Coed", a holiday home at Llandudno Junction, the remainder to Tyndwr Hall, a Youth Hostel at Llangollen. The more severe cardiac and crippled cases went to "Nant-y-Coed," and the others to Tyndwr Hall. Despite the severe winter, most of the evacuated physically defective children showed marked improvement in health. The mentally defective children at Margaret Beavan were still in residence there at the end of the year.

The boys of the Queensland Street school were evacuated in September to a camp in Birkdale, and, although by the end of the year their numbers had decreased very considerably, those who remained had improved both in physique and general health. The camp was not considered to be entirely suitable for winter occupation, and at the end of the year efforts were being made to find more satisfactory accommodation.

The children from the Fazakerley open-air school who accepted evacuation were evacuated with their previous ordinary elementary schools. The children attending Woolton Vale and Underlea schools were regarded as suitable for billeting and were evacuated to Holywell.

57. In addition to the special schools and the accommodation provided at Torpenhow, the Committee have an option on three beds at the West Kirby Convalescent Home, also on six beds (mainly for heart cases) at the Liverpool School of Recovery, and they are able to secure some places at the Maghull Home for Epileptics. During the course of the year, one case has been in residence at West Kirby, and five at the School of Recovery, whilst thirteen cases have been maintained at the Home for Epileptics.

Other
Residential
Accom-
modation.

Certain mentally defective children require to be admitted to residential special schools, and during the year 12 defectives were maintained by the Committee at "Pontville" Roman Catholic Special School, Ormskirk, 7 at Allerton Priory Roman Catholic Special School, Woolton, and 3 at Dovecot Horticultural School for Mentally Defective Girls, Knotty Ash.

HIGHER SCHOOLS.

58. The arrangements for the medical examination, following-up and treatment remain the same as reported in the 1938 Report.

The number of schools visited during the year was 22, and the numbers of medical inspections carried out were as follows:—

Routine cases	...	...	...	968
Re-inspections	...	...	...	3,990
Special cases	...	...	...	365

The number of routine cases having defects for which they were referred for treatment was 106 (10·9 per cent.), some of these having multiple defects. Defects of the nose and throat were noted in 59 children (6·0 per cent.), ear disease in 24 (2·4 per cent.), and organic heart disease in 1 (0·1 per cent.) of the children.

JUNIOR INSTRUCTION CENTRES.

59. The scheme arranging for the medical inspection of juveniles attending the junior instruction centres and for the provision of medical and dental treatment remains the same as reported in the 1938 report.

During the year 2,117 juveniles were examined, 1,177 of these being boys and 940 girls, and, including re-inspections, 2,816 examinations were made. In the course of these examinations it was found necessary in the case of 96 boys and 117 girls either to prohibit or to make certain modifications with regard to their participation in games.

As a result of the above examinations, 259 juveniles were found to require treatment for defective vision, 26 for orthopaedic and postural defects, 792 for dental caries and 29 for aural conditions. The Committee's schemes for treatment dealt with 201 cases of defective vision, 9 orthopaedic and postural defects, 335 cases of dental caries and 3 aural defects.

From the middle of May, 1939, every juvenile at the junior instruction centres was allowed $\frac{1}{2}$ pint of milk and biscuits each day. All cases of subnormal nutrition were recommended for additional free milk, there being 573 such cases. In 5 cases recommendations for extra nourishment were made to the Public Assistance Committee.

JUVENILE EMPLOYMENT BUREAU.

60. The facilities provided by the Juvenile Employment Committee for giving advice on employment matters to juveniles under 18 years of age and assisting them to secure suitable employment have been available throughout the year and, in spite of the uncertainty of national events culminating in the outbreak of war in September, there has been little change in the employment position on the whole in comparison with last year. Many hundreds of girls, however, became unemployed directly as the result of the war, especially those who had been engaged in Football Pool Organisations and some peace-time manufacturing industries, but it is gratifying to record that by the end of the year the majority of them had been re-absorbed into other forms of employment, some of a war production nature. The outbreak of hostilities had somewhat the reverse effect in the case of boys; comparatively few were turned off, and there was an increased demand for boys in the creation

of vacancies caused by the withdrawal of older youths from civilian life for military service. By the end of 1939, however, it was too early for the change in conditions to have had much effect upon the juvenile employment position generally, and the number of unemployed still remained a high figure for both sexes.

Registrations for employment during the year totalled 25,680 (13,583 boys and 12,097 girls), a figure 3,602 less than that for last year. The number of school leavers, seeking their first situation, included in the total is 9,149 (4,630 boys and 4,519 girls), a figure 579 less than that for last year.

The Bureau services have continued to be extensively used by employers during the year, the total number of vacancies notified being 19,165 (8,984 boys and 10,181 girls), as compared with 19,715 (9,046 boys and 10,669 girls) last year. As a consequence of this slight fall in the number of vacancies notified, the relative placing figure of 15,775 (7,314 boys and 8,461 girls) is 210 lower than that for the preceding year.

Included in the placing figure for the year is a total of 4,768 (2,426 boys and 2,342 girls), who were assisted by the Bureau to secure their first situations on leaving school, and the following table indicates the type of school to which the children belonged, viz. :—

Type of School	Boys	Girls	Total
Secondary	122	171	293
Central	78	147	225
Special	35	38	73
Junior Technical	57	—	57
Elementary	2,134	1,986	4,120
	2,426	2,342	4,768

The monthly average number of juveniles on the "Live" Register at the Bureaux for 1939 was 4,504 (2,958 boys; 1,546 girls) compared with 4,939 (3,100 boys; 1,839 girls) last year. The lowest

figures were recorded on 26th June, 1939, when the total number of juveniles was 3,364 (2,166 boys, 1,198 girls), and the highest figures on 23rd January, 1939, viz., 5,669 (3,573 boys, 2,096 girls).

61. Statutory requirements to attend Authorised Courses of Instruction continued to be issued up to the closing of the Junior Instruction Centres at the outbreak of war.

Non-compliance of juveniles (1,623) with the regulations, either by non-attendance, irregular attendance or serious misbehaviour at the centres was dealt with by the Board of Assessors, and it was also found necessary to institute legal proceedings, sanctioned by the Ministry of Labour, in a number of cases (74).

62. The customary close co-operation between the Bureau and the School Medical Service has been maintained, and reports upon the medical examination of many juveniles in connection with their attendance at junior instruction centres have been of much value to the Bureau officers.

63. During the year Unemployment Insurance Books were issued to 15,971 juveniles who entered industry for the first time. The sum of £34,942 was disbursed to unemployed juveniles (16-17 years) as Unemployment Insurance Benefit or Unemployment Assistance allowances, representing 105,012 individual transactions.

64. The Ministry of Labour's Juvenile Transference Scheme was suspended on the outbreak of war, except for boys willing to undergo training in farm work or seamanship. The Bureau officers, however, whilst the Scheme was in full operation during the first eighth months of the year, had continued the intensified efforts, commenced towards the end of last year, to induce boys, with, of course, their parents' consent, to transfer to employment in other parts of the country. The following transfers were effected during the year, viz.:—

	Boys	Girls	Total
Direct to Employment in London, Birmingham and other parts	318	2	320
Farm Training	63	—	63
Sea Training	64	—	64
Hotel and Domestic Training	34	—	34
Junior Transfer Centres and Camps (excluding Williamson Hostel)	43	—	43
	522	2	524

The large majority of these juveniles were medically examined, prior to transfer, either by Regional officers of the Ministry of Health or by private practitioners. However, in some cases the examination was carried out by school medical officers, who also rendered valuable assistance in all cases where it was found that treatment, e.g., dental, optical, etc., was necessary before transfer.

As provided by the scheme, boys recommended for "restorative" attention at the Williamson Hostel Junior Transfer Centre were required to be examined by school medical officers, and 84 boys were approved for admission during the year. With few exceptions, these boys, together with 17 who were in residence at the hostel at the beginning of the year, completed their training and were satisfactorily settled in employment in other parts of the country under the Ministry of Labour's Transfer Scheme. It was necessary, however, to close the hostel on the outbreak of war, and the 15 boys then in residence were returned to their homes.

65. The After-Care Scheme has been maintained during the year, and "Open Evenings" have been held each Wednesday at the Central and Branch Bureaux. Invitations to be present were extended to 13,851 juveniles (7,028 boys; 6,823 girls) and 3,942

(2,271 boys; 1,671 girls) attended, the majority of the remainder replied by letter to the Committee's enquiries as to their welfare. It was considered desirable, however, to suspend the arrangements for weekly "Open evenings" under the "blackout" conditions imposed on the outbreak of war, but it is intended to resume the meetings, in a modified form, in the spring of next year.

66. During the last four months of the year, the work of the Bureaux has been considerably affected by war-time conditions, and in addition to the suspension or curtailment of activities mentioned earlier, it has not been possible, owing to the closing of schools and the evacuation of school children, to continue the School Leaving Conferences that have been an important feature in the Authority's vocational guidance work for many years past. Contact, however, has been maintained by correspondence with all schools and the individual school records of juveniles as they attain 14 years of age have been supplied to the Bureaux in the large majority of cases by head teachers. It is proposed, however, that school conferences shall be resumed as and when schools are reopened, in view of the many advantages of giving individual advice on employment to scholars on the school premises, in the presence of the head teachers and often the parents, during the term in which the juveniles reach the school leaving age.

W. M. FRAZER,

Medical Officer to the Education Authority.

Appendix A.**MEDICAL INSPECTION RETURNS.**

Year ended 31st December, 1939.

TABLE I.**MEDICAL INSPECTIONS OF CHILDREN ATTENDING
PUBLIC ELEMENTARY SCHOOLS.****A.—Routine Medical Inspections.**

NUMBER OF INSPECTIONS IN THE PRESCRIBED GROUPS:—

Entrants	10,761
Second Age Group	10,441
Third Age Group	9,858
TOTAL	<u>31,060</u>

B.—Other Inspections.

NUMBER OF SPECIAL INSPECTIONS	43,765
NUMBER OF RE-INSPECTIONS	89,942
TOTAL	<u>133,707</u>

C.—Children Found to Require Treatment.

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

Group. (1)	For defective vision (excluding squint). (2)	For all other con- ditions recorded in Table IIA. (3)	Total. (4)
ENTRANTS	48	2,179	2,212
SECOND AGE GROUP	507	1,506	1,933
THIRD AGE GROUP	712	1,239	1,844
TOTAL (PRESCRIBED GROUPS) ...	1,267	4,924	5,989

TABLE II.

Classification of the Nutrition of Children Inspected during the Year in the Routine Age Groups, up to 31st August, 1939.

Age-groups.	Number of Children Inspected.	A. (Excellent).		B. (Normal).		C. (Slightly subnormal).		D. (Bad).	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	10,761	485	4.5	9,747	90.6	513	4.75	16	0.15
Second Age-group	10,441	757	7.25	9,098	87.15	581	5.55	5	0.05
Third Age-group	9,858	1,147	11.64	8,454	85.75	251	2.55	6	0.06
TOTAL ...	31,060	2,389	7.7	27,299	87.9	1,345	4.31	27	0.09

TABLE III.

Return concerning Blind and Deaf Children who are not receiving Education suitable for their special needs.

No. of Children who are totally or almost totally blind and can only be appropriately taught in a school for blind children.	1
No. of Children whose hearing is so defective and whose speech and language are so little developed that they require education by methods used by deaf children without naturally acquired speech or language.	33 (Of these, 24 were receiving home teaching).

ELEMENTARY SCHOOLS.

TABLE IV.

Return of Defects treated during the Year ended 31st December, 1939.

TREATMENT TABLE.

Group I.—Minor Ailments (excluding Uncleanliness,
for which see Group VI.)

Disease or Defect. (1)	*Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	TOTAL. (4)
Skin—			
Ringworm—Scalp—(1) X-Ray Treatment ...	13	1	14
(2) Other Treatment ...	—	38	38
Ringworm—Body	152	5	157
Scabies	633	788	1,421
Impetigo	1,275	25	1,300
Other Skin disease	682	118	800
Minor Eye Defects— (External and other, but excluding cases falling in Group II)	2,032	127	2,169
Minor Ear Defects	2,133	135	2,268
Miscellaneous— (e.g. minor injuries, bruises, sores) chilblains, etc.)	23,115	104	23,219
TOTAL	30,035	1,351	31,386

*The numbers in Group I of this Table refer almost wholly to children treated at the Committee's Clinics. No reliable information is obtainable as to the number of cases treated elsewhere.

ELEMENTARY SCHOOLS.

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments, Group I).

Defect or Disease. (1)	NUMBER OF DEFECTS DEALT WITH.		
	Under the Authority's Scheme. (2)	Other-wise. (3)	TOTAL. (4)
ERRORS OF REFRACTION (including Squint)—			
New Cases	2,073	152	2,225
Re-examinations	3,094	39	3,133
TOTAL	5,167	191	5,358
Other Defect or Disease of the eyes (excluding those recorded in Group I)	14	63	77
TOTAL	5,181	254	5,435

Total number of Children for whom Spectacles were prescribed :

(a) Under the Authority's Scheme	3,925
(b) Otherwise	188

Total number of Children who obtained or received Spectacles :

(a) Under the Authority's Scheme	3,892
(b) Otherwise	188

ELEMENTARY SCHOOLS.

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)
Tonsils only	630	69	699	21	720
Adenoids only	67	6	73	—	73
Tonsils and Adenoids ...	141	29	170	4	174
Other defects of the nose and throat	—	5	5	28	33
TOTAL	838	109	947	53	1,000

Group IV.—Orthopaedic and Postural Defects.

	UNDER THE AUTHORITY'S SCHEME.			OTHERWISE.			TOTAL NUMBER TREATED.
	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an Orthopaedic Clinic.	Residential treatment with education.	Residential treatment without education.	Non-Residential treatment at an Orthopaedic Clinic.	
Number of children treated	4	12	739	5	6	47	793

ELEMENTARY SCHOOLS.

Group V.—Dental Defects.

(1) Number of Children

(a) Inspected :—

	Aged				
	5	...	—		
	6	...	6,203		
	7	...	6,584		
	8	...	6,488		
Routine Age Groups	...	9	...	6,501	
		10	...	6,523	
		11	...	6,201	
		12	...	5,558	
		13	...	5,506	
		14	...	1,162	
				TOTAL ...	50,726
Specials	...	...	...	...	3,874
				GRAND TOTAL	54,600
					<hr/>
					43,386
					22,388
					5,009
					37,173
					8,063
					67,455
					24,418
					1,067

* This figure also includes 1,429 sessions in which a Dental Officer acted as Anæsthetist.

ELEMENTARY SCHOOLS.

Group VI.—Uncleanliness and Verminous Conditions.

(1) Average number of visits per school made during the year by the School Nurses	...	...	...	...	...	...	...	...	...	38.0
(2) Total number of examinations of children in the Schools by School Nurses	...	...	...	...	...	...	...	...	...	253,406
(3) Number of individual children found unclean	...	...	...	...	...	...	...	...	...	20,972
(4) Number of individual children cleansed under Liverpool Corporation Act, 1921.	...	...	...	...	...	...	...	...	...	27

Note.—Voluntary cleansings are shewn in paragraph 42 of this Report.

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

(a) Under the Education Act, 1921	...	...	...	...	...	—
(b) Under School Attendance Byelaws	...	...	...	...	...	—
(c) Under Liverpool Corporation Act, 1921	...	...	...	...	...	—

Appendix B.**MEDICAL INSPECTION RETURNS.**

TABLE I.
MEDICAL INSPECTION OF CHILDREN ATTENDING
HIGHER SCHOOLS.

A.—Routine Medical Inspections.

NUMBER OF INSPECTIONS IN THE PRESCRIBED GROUPS—

Age.	Boys.	Girls.	TOTAL.
8 years	9	9	18
9 years	9	14	23
10 years	6	18	24
11 years	23	15	38
12 years	66	61	127
13 years	77	76	153
14 years	125	139	264
15 years	118	72	190
16 years	39	42	81
17 years	13	37	50
TOTAL	485	483	968

B.—Other Inspections.

NUMBER OF SPECIAL INSPECTIONS	365
NUMBER OF RE-INSPECTIONS	3,990
TOTAL	4,355

C.—Children found to require Treatment.

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

Group.	For defective vision (excluding squint).	For all other con- ditions recorded in Table IIA.	Total
(1)	(2)	(3)	(4)
TOTAL ROUTINE INSPECTIONS ...	43	75	108

HIGHER SCHOOLS.

TABLE II.

Classification of the Nutrition of Children Inspected during the Year in the Routine Age Groups, up to 31st August, 1939.

Age-groups.	Number of Children Inspected	A. (Excellent)		B. (Normal)		C. (Slightly subnormal)		D. (Bad)	
		No.	%	No.	%	No.	%	No.	%
All Routine Inspections	968	233	24.1	728	75.2	7	0.7	—	—

TABLE IV.

Return of Defects treated during the Year ended 31st December, 1939.

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—(1) X-Ray Treatment ...	—	—	—
(2) Other Treatment ...	—	—	—
Ringworm—Body	—	—	—
Scabies	—	—	—
Other Skin Disease	—	9	9
Minor Eye Defects—			
(External and other, but excluding cases falling in Group II)	—	2	2
Minor Ear Defects	6	4	10
Miscellaneous—			
(e.g. minor injuries, bruises, sores, chilblains, etc.)	—	9	9
TOTAL	6	24	30

HIGHER SCHOOLS.

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I).

DISEASE OR DEFECT. (1)	NUMBER OF DEFECTS DEALT WITH		
	Under the Authority's Scheme. (2)	Otherwise. (3)	TOTAL. (4)
New Cases	116	52	168
Errors of Refraction (including Squint) Re-examination Cases ...	238	51	289
Other Defect or Disease of the eyes (excluding those recorded in Group I)	—	—	—
TOTAL	354	103	457

Total number of children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme	277
(b) Otherwise	95

Total number of children who obtained or received spectacles :—

(a) Under the Authority's Scheme	276
(b) Otherwise	95

HIGHER SCHOOLS.

Group III.—Treatment of Defects of Nose and Throat.

	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)
Tonsils only	10	2	12	—	12
Adenoids only	2	—	2	—	2
Tonsils and Adenoids ...	—	—	—	—	—
Other defects of nose and throat	—	1	1	—	1
TOTAL	12	3	15	—	15

Group IV.—Orthopaedic and Postural Defects.

	UNDER THE AUTHORITY'S SCHEME.			OTHERWISE.			TOTAL NUMBER TREATED.
	Residential treatment with education.	Residential treatment without education.	Non-Residential treatment at an Orthopaedic Clinic.	Residential treatment with education.	Residential treatment without education.	Non-Residential treatment at an Orthopaedic Clinic.	
Number of children treated	—	—	7	—	1	10	18

HIGHER SCHOOL

Group III - Treatment of Subjects of Jews and Thins

Year	Number of Subjects	Treatment of Subjects		Total
		
1911	10	10
1912
1913
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Group IV - Orthopedic and Dental Subjects

Year	Number of Subjects	Treatment of Subjects		Total
		
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Appendix C.**LIVERPOOL EDUCATION COMMITTEE.**

**PHYSICAL TRAINING FOR ELEMENTARY
SCHOOL CHILDREN DURING 1939.**

Physical training instruction, in accordance with the Board of Education Syllabus, was given in all schools, both in the playgrounds and, where available, school halls and gymnasia. A large number of elementary schools now possess sets of portable gymnastic apparatus which are fully used. An approximate average time of 90 minutes per week is devoted to Syllabus work on school premises.

School Holiday Camps.

148 school camps were organised during the midsummer holidays of 1929, and grants in aid, at the rate of 15/- and 9/- for leaders and scholars respectively, were made by the Committee in respect of 413 leaders and 5,809 scholars. Report by the Organisers and by official visitors testify to the benefits conferred upon large numbers of children who would not otherwise have spent a holiday out of the City.

Evening Play Centres.

While it was unfortunately impossible to hold evening play centres during the winter months of 1939-40, a very successful session concluded at the end of March, 1939. Sixteen centres were conducted in schools in the densely-populated areas, meetings being held on Tuesday and Thursday evenings, and the approximate average nightly attendance at all centres was 7,060 boys and girls.

The samples of craft work (embroidery, woodwork, raffia-work, etc.) submitted for inspection at the end of the session are evidence of the capabilities of the staff and the enthusiasm of the children.

Summer Play Centres.

29 school playgrounds were successfully used as play centres on Tuesday, Wednesday and Thursday evenings during the summer months until the outbreak of war caused an abrupt termination of the scheme. A total approximate number of 2,193 children participated each evening in such activities as cricket, rounders, baseball, etc.

Holiday Games in Parks.

The Committee arranged for organised games to be conducted in seven public parks during the five weeks of the Midsummer holidays. Teachers and other persons qualified in games leadership were engaged to serve on five afternoons each week, and they were responsible for the organisation of a wide variety of games and athletic competitions. Weekly sports meetings were a feature of the programmes.

Use of Playing Fields.

The majority of elementary schools made arrangements for organised games in playing fields and parks during the year, children attending schools in the congested areas again being provided with free tram tickets to enable them to journey to open spaces in the suburbs on one or more occasions each week.

Whilst exact figures are not available owing to the disruption caused by evacuation, and the summary closing of schools on the outbreak of hostilities, it was apparent from unofficial observation that this side of the school curriculum was at least as popular as in previous years.

Swimming Instruction.

All the public baths, by courtesy of the Baths Committee, together with 16 small plunge baths on school premises were used by elementary school children for swimming practice during the year. Instruction in swimming, life-saving and diving was given by the teachers, and the Teachers' Sports Committees were responsible for the organisation of inter-school competitions and galas.