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Radcliffe Education Committee.

Annual Report

OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR 1934.

W. S. HAYDOCK, B.A., M.D., D.P.H.,

School Medical Officer.

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TOWN HALL,
RADCLIFFE,
March, 1935.

*To the Chairman and Members of the Radcliffe
Education Authority.*

LADIES AND GENTLEMEN,

I have the honour to submit to you my Annual Report on the School Medical Service in the district for the year 1934, which has been prepared in accordance with the memorandum of the Board of Education. The results of the findings at the Medical Inspections are shown in the tables at the end of this report.

Children are unable to reap the full benefit from the education provided for them, unless their general health is satisfactory, and hence the main object of the School Medical service is prevention of disease.

The routine inspections and the various schemes in operation have been designed with a view to the early detection of sickness and the discovery of causes which might affect adversely the well-being of the children, and to prevent minor ailments from growing into major illnesses.

There have been rather more cases than usual of Diphtheria, but with the exception of minor outbreaks of measles and whooping cough early in the year, and chicken-pox in November and December, none of the infectious diseases were present in epidemic form.

The health of the children generally has been good.

Health Week was held from 4th February, to 11th February, and, as in previous years, special arrangements, including cinematograph displays and short talks on health matters, were made for school children.

I desire to thank the Chairman and members of the Committee for their support and encouragement, and I gratefully acknowledge the valuable assistance rendered by the Staff of the School Medical Department, and the keen interest they have shown in their work.

I am, Ladies and Gentlemen,

Your obedient servant,

W. S. HAYDOCK,

School Medical Officer.

(1) SCHOOLS IN AREA.

In addition to the Central Senior School there are 14 Elementary Schools in the area. There is also a Junior Technical School, but the Medical Inspection of pupils attending this school is under the control of the County Council.

The average number on the registers of the Elementary Schools in December 1934 was 3420, consisting of 913 in the Infant Departments and 2507 in the Mixed Departments. 344 of the infants were under the age of 5 years.

Of the children in the Mixed Departments, 497 boys and 487 girls are in attendance at the Central Senior School.

St. Anne's (Infants) Church of England School was closed during the year.

(2) SCHOOL MEDICAL SERVICE STAFF.

School Medical Officer : W. Stanley Haydock, B.A., M.D., D.P.H., appointed June 1st, 1926. Also Medical Officer of Health. Whole time appointment.

Co-ordination with other departments of the local Authority and with outside organisations has been described in previous reports and has been continued on similar lines.

(4) SCHOOL HYGIENE.

Some of the School buildings are old and have not the advantages and conveniences of those erected in recent years. Their general hygienic conditions are, however, satisfactory, but considerable improvement could be effected by installing modern sanitary conveniences and scrapping the old and antiquated desks still in use in certain schools.

A number of children have sustained injuries received from splinters from the seats of the desks, and though accidents of this kind are not so common as they were a few years ago, they are avoidable, and I suggest that steps be taken to deal with this type of dangerous, and not very serviceable equipment.

(5) MEDICAL INSPECTION

The Board's Schedule of Medical Inspection has been followed in detail. The specified age groups have been examined and the full statistical findings are recorded in the Tables at the end of this report.

(b) **UNCLEANLINESS.**

In the first School Medical Report for Radcliffe published in 1909, the findings of the examinations in that year showed that more than one third of the girls' heads were unclean. To-day only 3 per cent are unclean, but even this figure is too high.

The great majority of parents now realize that it is just as much an offence against Society to send a child to school dirty, or infested with vermin, as it is to allow one suffering from infectious disease to mix with other children: special combs are available on loan from the School Clinic and except in the rare cases of occasional uncleanliness due to illness of the parents, there is little excuse for any child to suffer from verminous conditions.

(c) **MINOR AILMENTS.**

Table II shows the number and type of defects found at the Medical Inspections and at the Clinic.

(d) **VISUAL DEFECTS AND EXTERNAL EYE DISEASE.**

At the Routine inspections 89 children were recommended for examination by refraction on account of Defective Vision or Squint. 56 were referred for examination at the special inspections.

Including re-examinations 203 cases of Defective Vision and Squint were refracted at the School Clinic.

In the great majority of the cases where glasses are prescribed, these are obtained and worn regularly. There is, however, still a prejudice in the minds of some parents, now fortunately few in number, against the wearing of spectacles, and, although fully aware of the possible danger, they are prepared to risk the consequences and impose a handicap on the child, merely because they think glasses may detract from its appearance.

The arrangements in force for the past few years for the supply of glasses have been continued with satisfactory results.

(e) **NOSE AND THROAT.**

The number of children found at the Routine and Special Inspections to have enlarged Tonsils, Adenoids, or both combined and requiring treatment was 57, whilst a further 274 were recorded to be kept under observation for the same cause.

At the re-inspections a number who had previously been under observation were recommended operative treatment.

Inspections and all received appropriate treatment, either from the family physician, the Clinic or at Hospital.

(g) DENTAL DEFECTS.

Table IV. Group 4, shows the amount of work carried out at the Dental Clinic.

(h) ORTHOPAEDIC AND POSTURAL DEFECTS.

The Orthopaedic scheme is one which is appreciated and full opportunities are taken of the facilities available: the excellent, and in many cases, striking improvements resulting from treatment have no doubt contributed largely to the popularity of this clinic.

The new cases of School age referred during the year included:—

Talipes	...	...	...	...	...	7
Genu Valgum	...	...	...	...	...	1
Kyphosis	...	...	...	...	...	2
Torticollis	...	...	...	...	...	2
Deformities fingers and toes	...	...	...	...	...	2
Other deformities	...	...	...	...	...	1

(i) HEART DISEASE AND RHEUMATISM.

There are 16 children suffering from Heart disease of a severe or moderately severe type. These children are all at school though a number of them are irregular in their attendance owing to their disability.

(j) TUBERCULOSIS.

Two new cases of Tuberculosis amongst children of school age were notified during the year. One was a case of Tubercular Glands and the other Abdominal Tuberculosis.

(7) FOLLOWING UP.

Following up is one of the most important duties of the School Nurses and unless steps are taken to ensure that the treatment advised at the School Inspections or at the Clinic is carried out, much of our work would be in vain.

The following is a list of visits paid and the disabilities from which the children suffered :—

Minor Injuries	24
Uncleanliness	102
Impetigo	7
Other Skin Diseases	15
Blepharitis .....	...
Conjunctivitis .....	...
Corneal Ulcer .....	...
Defective Vision and Squint	172
Defective Hearing	4
Otitis Media.....	5
Enlarged Tonsils and Adenoids	193
Other Diseases of Nose and Throat	105
Enlarged Glands	10
Anaemia	13
Heart Diseases	24
Bronchitis	51
Suspected Tuberculosis	14
Measles	21
Whooping Cough.....	35
Chicken Pox	21
Mumps	4
Convalescent Diphtheria.....	14
" Scarlet Fever.....	36
Colds	53
Dental Defects	43
Other Defects and Diseases.....	87
Schools	269
	<hr/>
	1322
	<hr/>

Visits paid to Manchester Children's Hospital, Gartside Street.....	13
Number of Children taken " " 	80
Number of Children who had operation.....	80

(8) TREATMENT.

The arrangements and schemes provided by the Local Education Authority, for the treatment of disabilities amongst School Children were described in last year's report and have been continued on similar lines.

DENTAL DEFECTS.

The School Dental Officer reports as follows:—

"I again present my Annual Report for 1934, which compares most favourably with past years.

As it is my first year in the treatment of the children of Ainsworth, I wish to report that the response from Ainsworth has been very satisfactory.

We are still having many refusals of parents regarding treatment of their children and it is generally those children who most require treatment.

A number of parents refuse preventative dentistry for their children, but send them for emergency treatment on the recurrence of toothache. This is neither fair to the children nor to the School Dental Department, and in the end is likely to bring discredit to the service.

So long as a child can receive treatment, when in pain, then the tendency will be to ignore the opportunities of our routine treatment on the grounds that when the need becomes obvious to the parents the child can be treated.

The principle regarding the Dental Clinic as an emergency relief centre is unsound, and is entirely against the whole conception of school dentistry as part of a concerted plan of regular supervision of the health of the children.

Prevention is the main object of our scheme and satisfactory results cannot be obtained by spasmodic attendances at irregular intervals. The administering of gas to the children has become popular and I venture to suggest that no better anaesthetic has been found for the purpose owing to it being so safe and efficient.

I wish to convey my thanks for the courtesy and kindness I have received from all Headmasters and Mistresses during the year."

Summary of Dental Work arranged according to Schools.

SCHOOL	Number Inspected	Number Referred for Treatment	Number Treated at Dental Clinic	Total Attendance at Clinic	Percentage Treated
Radcliffe Hall C.of E.	194	184	90	122	48.9
Close Methodist	74	68	28	72	41.1
St. Anne's	34	31	15	25	48.3
Bolton Road Council	59	54	22	64	40.7
St. Andrew's	169	151	90	147	59.6
St. Paul's	163	161	95	246	59.0
St. Mary's	253	246	187	206	76.0
St. John's	287	280	223	292	79.6
St. Thomas's	305	258	170	253	65.8
Water St. Council ...	58	55	32	39	58.1
New Church	157	155	108	172	69.6
Ainsworth C.E. . . .	186	181	31	37	17.1
Stand Independents	74	69	46	72	66.6
Bridge Methodist ...	146	140	74	139	52.8
Central Senior--Boys	413	320	290	556	90.6
" "--Girls	341	341	341	480	100.0
	2913	2694	1842	2922	68.3

In addition to the children who were treated at the Dental Clinic a number received treatment privately from the various dentists in the town.

These figures are perhaps rather misleading, as in some cases where the inspections were carried out late in the year, all the children had not the opportunity for receiving treatment. A number, too, inspected at the Junior Schools were not treated till after they had left and were in attendance at the Senior Schools.

(9) INFECTIOUS DISEASES.

The number of notifications of Scarlet Fever was about the same as in 1933 but Diphtheria cases showed a slight increase.

School closure was not resorted to as a method of control of infectious disease during the year. When a school is closed particulars with regard to absentees cannot be obtained, and the chief source of information for tracing sick, and possibly infected children is no longer available. The value of this means of keeping in touch with absent children was emphasised during a minor attack of Diphtheria at one of the Schools; at least two children who were

absent, and not under medical care, were, when the parents were visited and persuaded to seek medical advice, diagnosed diphtheria and transferred to Hospital. These were mild cases and on that account all the more dangerous as possible sources of spreading infection.

The following tables show the number of cases of Scarlet Fever, Diphtheria, Measles, Whooping Cough, Chicken Pox, and Mumps reported at the various schools, and their distribution throughout the year.

	Chick- en Pox	Measles	Whoop- ing Cough	Mumps	Scarlet Fever	Diph- theria	Total
St. Andrew's	5	...	2	..	3	2	12
St. Paul's	34	...	4	1	...	...	39
Water St. Council.....	1	1	7	...	1	...	10
St. Thomas' .....	...	3	20	7	10	19	59
St. Mary's	1	14	18	5	2	9	49
Bridge Methodist	1	2	5	1	...	3	12
St. John's .....	...	4	2	3	8	4	21
New Church	1	13	8	6	7	1	36
Stand Independent .....	...	9	9	...	2	...	20
Radcliffe Hall C.ofE.	4	17	11	6	2	3	43
Close Methodist	15	6	4	1	1	1	28
Bolton Road Council .....	...	14	...	...	1	...	15
Central Senior .....	...	3	5	5	3	6	22
Ainsworth C. of E. ....	...	18	...	...	5	5	28
Total	62	104	95	35	45	53	394
Secondary Schools .....	...	...	...	...	3	...	3
Other Schools .....	...	...	...	...	10	1	11
Total	62	104	95	35	58	54	408

	Jan	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Measles	6	3	9	22	16	39	1	7	...	1	...	...	104
Chicken-Pox .....	...	...	...	2	9	9	1	1	1	2	1	36	62
Whooping Cough ...	17	17	12	36	9	4	...	...	...	...	...	...	95
Mumps	25	2	2	...	2	2	...	1	...	1	...	...	35
Scarlet Fever	4	6	1	...	2	8	5	4	6	6	13	3	58
Diphtheria	5	4	5	2	5	1	2	8	1	12	3	6	54
Total	57	32	29	62	43	63	9	21	8	22	17	45	408

(10) OPEN AIR EDUCATION.

At certain Schools during the summer months some of the classes are held out of doors, but the atmosphere and general environmental conditions are not encouraging for the development of open air education to any considerable extent.

(11) PHYSICAL TRAINING.

With so many labour saving devices in use, and in this age of motor cars and other easy, and comparatively cheap means of transport, many of us are not compelled to take, and do not get, the amount of exercise which 20 or 30 years ago was unavoidable to those engaged in similar occupations. Hence to-day, there is a greater necessity than ever for developing the system of Physical Training, and it is unfortunate that the splendid work now being done in the schools is not followed up to a wider extent.

Physical training is not merely a training of the body, but a rigorous training of the mind, and gives to those participating in it a feeling of well-being which enables them to tackle with greater confidence, the problems and difficulties of everyday life.

The regular exercises and games organised at the Schools must develop the desire to continue with them when school days are over, and in spite of the excellent efforts undertaken through the various Churches, Sunday Schools, Boy Scouts, Girl Guides, and other organisations, there are many boys and girls who drift either into a life of inactivity as far as games and physical training are concerned, or merely fill the role of spectators on Saturday afternoons: it is for these that there is need for assistance and instruction on the lines I suggested in previous reports.

(12) PROVISION OF MEALS.

The provision of meals and milk has been continued on similar lines to those in force last year. The arrangements are satisfactory.

The following figures show the number of children who received free meals during the past two years:—

	Families assisted	Children fed	Meals provided. Dinners
1933	170	317	51,655
1934	144	373	54,481

Between 1200 and 1300 bottles of milk are purchased by children and consumed daily in schools, in addition to those supplied free under the feeding regulations.

(13) CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

The close co-operation described in previous reports still continues.

I am indebted to the Teachers for the interest they take in the work of the School Medical service, and for the help rendered, not only during the course of the routine inspections, but throughout the year.

Their influence and support make our task easier and in many cases, by reason of their advice, parents are persuaded to procure treatment for defects, which otherwise might have been neglected.

The "8.50" Boys' Association provided 92 pairs of clogs and 2 pairs of boots for poor children.

Under the auspices of the Bealey Memorial Convalescent Charity, 65 children received Convalescent Treatment at St. Annes and Southport for periods ranging from 3 to 6 weeks.

The Charity Organisation Society has helped a number of children, especially those between the ages of 2 and 3 years, for whom milk and meals are not available through any of the Local Authority's Schemes.

The Inspector of the National Society for the Prevention of Cruelty to Children has given us much assistance, not only where there were signs of neglect, but also where poverty and sickness prevented parents from providing for the full needs of the children.

(14) BLIND, DEAF, EPILEPTIC AND MENTALLY DEFECTIVE CHILDREN.

There are no special schools in the area, but as will be seen from the tables at the end of this report, a number of children are in attendance, and maintained by this Authority, at Schools outside the District. Those not at school are visited periodically by the School Nurses.

(15) NURSERY SCHOOLS.

There are no Nursery Schools in the area.

The methods adopted to cater for the needs of children between the ages of 3 and 5 years and attending Public Elementary Schools have been fully described in recent reports and have been continued on similar lines.

(16) PARENTS' PAYMENTS.

The proportion of the cost of treatment to be borne by the parents is determined according to the amount of the family income and the number of dependants, and generally speaking it is paid promptly when asked for.

Recovery of the whole or part cost of the treatment is made in the case of operation for Tonsils and Adenoids, provision of spectacles and Orthopaedic appliances, and In-patient treatment at Biddulph.

(17) HEALTH EDUCATION.

In the schools instruction is given to the children on Hygiene, and the lessons are based on the "Handbook of Suggestions on Health Education" issued by the Board of Education.

Health Week was again held in February and during this period special efforts were made to interest and instruct the children on health questions by means of special talks, cinematograph displays, Health Exhibits, posters, etc.

(18) EMPLOYMENT OF SCHOOL CHILDREN.

54 children were examined during the year in accordance with the Byelaws which were adopted in 1921 regulating the employment of children, and with one exception all were passed for the duties required of them.

TABLE 1.
RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections :—	
Entrants	330
Second Age Groups.....	260
Third Age Group.....	333
	923
Number of other Routine Inspections 155	

B.—OTHER INSPECTIONS.

Number of Special Inspections	533
Number of Re-Inspections	3204
	3737

TABLE II.
A.—Return of Defects found by Medical Inspection in the year
ended 31st December 1934.

DEFECT OR DISEASE	Routine Inspections		Special Inspections	
	Number of Defects		Number of Defects	
	Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
(1)	(2)	(3)	(4)	(5)
MALNUTRITION	1	...	5	...
SKIN : Ringworm : Scalp .....	...	...	1	...
Ringworm : Body.....	...	...	...	...
Scabies	2	...	4	...
Impetigo	2	...	21	...
Other Diseases (Non-Tuberculous)...	5	1	53	1
EYE : Blepharitis	7	3	6	...
Conjunctivitis	1	...	1	...
Keratitis .....	...	...	...	...
Corneal Opacities .....	...	2	...	...
Defective Vision (excluding squint)	76	77	51	5
Squint	13	24	5	3
Other Conditions	1	3	10	1
EAR : Defective Hearing .....	...	3	...	2
Otitis Media .....	...	5	22	...
Other Ear Diseases	2	3	6	...
NOSE AND THROAT :				
Chronic Tonsillitis only.....	1	132	2	16
Adenoids only	1	50	...	12
Chronic Tonsillitis and Adenoids ..	16	60	37	4
Other Conditions .....	...	3	3	...
ENLARGED CERVICAL GLANDS (Non-Tu-berculous) .....	...	10	3	1
DEFECTIVE SPEECH .....	...	4	...	1
HEART AND CIRCULATION :				
Heart Disease : Organic	7	16	1	2
" " Functional .....	...	39	...	2
Anaemia "	2	1	9	1
LUNGS :				
Bronchitis	2	...	12	...
Other Non-Tuberculous Diseases ...	1	50	2	4
TUBERCULOSIS :				
Pulmonary :				
Definite .....	...	...	...	...
Suspected	2	1	1	1
Non-Pulmonary :				
Glands.....	1	...	1	...
Bones and Joints	1	1	1	...
Skin .....	...	...	...	...
Other Forms .....	...	...	...	...
NERVOUS SYSTEM :				
Epilepsy .....	...	...	...	...
Chorea.....	...	...	...	...
Other Conditions .....	...	...	...	1
DEFORMITIES :				
Rickets .....	...	1	...	...
Spinal Curvature	1	1	...	1
Other Forms	10	17	20	4
OTHER DEFECTS & DISEASES (excluding Uncleanliness and Dental Diseases...	12	56	89	15

TABLE II.—Continued.

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

Group (1)	Number of Children		Percentage of Children found to require treatment (4)
	Inspected (2)	Found to require treatment (3)	
Prescribed Groups :—			
Entrants	330	34	10.3
Second Age Group	260	42	16.1
Third Age Group.....	333	64	19.2
Total(PrescribedGroups)	923	140	15.1
Other Routine Inspections...	155	18	11.6

TABLE III.

Return of All Exceptional Children in the Area.

CHILDREN SUFFERING FROM MULTIPLE DEFECTS 2

	At Certified Special Schools	At Public Elementary Schools	At other Institu- tions	At no School or Institu- tion	Total
Blind Children	1	...	...	...	1
Partially Blind Children...	...	...	...	...	...
Deaf Children	1	...	...	...	1
Partially Deaf Children...	...	...	...	...	...
Mentally Defective Chil- dren—Feeble-minded.....	1	2	...	1	4
Epileptic Children	4	...	...	...	4
Children suffering from severe Epilepsy					
PHYSICALLY DEFECTIVE CHILDREN :					
(a) Tuberculous Children					
1—Children suffering from Pulmonary Tub- erculosis.....	—	...	...	...	...
2.— Children suffering from Non-Pulmonary Tuberculosis .....	...	11	1	...	12
(b) Delicate Children ...	...	18	...	...	18
(c) Crippled Children ...	3	19	1	3	26
(d) Children with Heart Disease .....	...	15	...	1	16

TABLE IV.
Return of Defects treated during the year ended 31st
December, 1934.

TREATMENT TABLE.

GROUP 1.—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
Skin—Ringworm, Scalp			
X-Ray Treatment .....	...	..	...
Other	1	...	1
" Body .....	...	...	...
Scabies	5	1	6
Impetigo	21	2	23
Other Skin Diseases	53	5	58
Minor Eye Defects—(External and other, but excluding cases falling in Group II).	17	9	26
Minor Ear Defects.....	28	2	30
Miscellaneous <i>e.g.</i> , minor injuries, bruises, sores, chilblains, etc	99	12	111
Total	224	31	255

GROUP 2.—DEFECTIVE VISION & SQUINT (excluding Minor Eye Defects Treated as Minor Ailments—Group 1.)

Defect or Disease	Number of Defects dealt with		
	Under the Authority's Scheme	Other-wise	Total
(1)	(2)	(3)	(4)
Errors of Refraction—including Squint.....	203	12	21
Other Defect or Disease of the Eyes (excluding those recorded in Group I). .....	...	...	...
Total	203	12	215

TABLE IV.—Continued.
Number of children for whom Spectacles were :

Prescribed.		Obtained	
Under the Authority's Scheme	Otherwise	Under the Authority's Scheme	Otherwise
166	11	158	3

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)		
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
—	—	80	—	—	—	2	—	—	—	82	—	20	102

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

GROUP 4—ORTHOPAEDIC AND POSTURAL DEFECTS.

Number of Children treated	Under the Authority's Scheme			Otherwise			Total number treated
	Residential treatment with education (1)	Residential treatment without education (2)	Non-residential treatment at an orthopaedic clinic (3)	Residential treatment with education (1)	Residential treatment without education (2)	Non-residential treatment at an orthopaedic clinic (3)	
	6	1	41		1	2	45

GROUP 5.—DENTAL DEFECTS.

1. Number of Children who were :—

	Routine Age Groups										Total	Special
	5	6	7	8	9	10	11	12	13	14		
(a) Inspected by the Dentist	119	231	222	317	275	337	347	370	417	212	2847	66
(b) Found to require Treatment	Grand Total...										2913	...
(c) Actually Treated											2692	...
											1842	...

2. Half-days devoted to	{	Inspection	22	}	Total ... 160
		Treatment	138		
3. Attendances made by children for Treatment					2930
4. Fillings	{	Permanent teeth ...	620	}	Total ... 703
		Temporary teeth ...	83		
5. Extractions.....	{	Permanent teeth.....	500	}	Total ...3653
		Temporary teeth ...	3153		
6. Administrations of general anaesthetics for extractions					147
7. Other Operations	{	Permanent teeth.....	471	}	Total ... 655
		Temporary teeth ...	184		

GROUP 6.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

1. Average number of visits per school made during the year by the School Nurses	3
2. Total number of examinations of children in the Schools by School Nurses	5370
3. Number of individual children found unclean	170
4. Number of children cleansed under arrangements made by the local Education Authority	8
5. Number of cases in which legal proceedings were taken :	
(a) Under the Education Act, 1921	0
(b) Under School attendance Bye-Laws	0

Mental Deficiency (Notification of Children) Regulations, 1928.

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31ST DECEMBER, 1934 BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

Total number of children notified..... 1

Analysis of the above Total.

Diagnosis.	Boys.	Girls.
1. (I) Children incapable of receiving benefit or further benefit from instruction in a Special School :		
(a) Idiots.....	...	1
(b) Imbeciles
(c) Others

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