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BOROUGH OF TODMORDEN

EDUCATION COMMITTEE



ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

ON THE

Medical Inspection of School Children,

FOR THE

YEAR ENDED 31ST DECEMBER, 1934.

J. H. KITSON, M.B., M.R.C.S., D.P.H.



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BOROUGH OF TODMORDEN EDUCATION COMMITTEE

SCHOOL MEDICAL OFFICER'S REPORT

For the year ended 31st December, 1934.

Number of Schools	...	...	...	15
Number of Departments	...	...	...	21
Number of School Places	...	...	...	3,932
Average Number of Children on Registers	...	...	...	2,616
Average in Attendance	...	...	...	2,342

Education Committee.

**Alderman Wilson Greenwood, J.P., Chairman ;

**His Worship the Mayor (Councillor W. Fielden) ;

ALDERMEN :

*Crabtree ; Pickles, J.P., C.C. ;
**Goucke ; **Woodhead.

COUNCILLORS :

Costelloe ; Jackson, J.P.
Egerton ; **Spendlove ;
**Gilmartin, J.P. P. Sutcliffe ;
**Healey ; **Webster ;
**Hirst, J.P. ; Whitaker, J.P. ;
**Jackman ;

Mrs. Bessie Wrigley.

* Chairman of School Attendance and Medical Inspection
Sub-Committee.

** Members of School Attendance and Medical Inspection
Sub-Committee.

TODMORDEN EDUCATION COMMITTEE

ANNUAL REPORT

of the School Medical Officer

1934

TO THE MEMBERS OF THE EDUCATION COMMITTEE.

MR. CHAIRMAN, MRS. WRIGLEY AND GENTLEMEN,

I have the honour to submit the Annual Report on Medical Inspection and Treatment of School Children in the Borough of Todmorden for the year ending 31st December, 1934.

The report is a summary of the work carried out during the year under review, and furnishes information as to the conditions found in school children.

The outstanding features of the report are :—

- (1) The improvement in the cleanliness of the children has continued.
- (2) The few cases of Diphtheria and Scarlet Fever notified during the year.
- (3) A scheme for supplying milk at the schools was introduced.
- (4) The number of attendances for treatment at the school clinic continues to increase.
- (5) The accommodation at the school clinic remains unsatisfactory.
- (6) The number of objectors to Medical Inspection shows a marked fall.

My thanks are given to my staff, all the members of which have been very loyal and zealous in carrying out their duties ; also to the teaching staff for their co-operation and help.

In conclusion I should like especially to thank the Chairman and Members of the School Attendance Sub-Committee for their encouragement and assistance.

I am,

Your obedient servant,

J. H. KITSON,

School Medical Officer.

THE STAFF OF THE SCHOOL MEDICAL SERVICE.

Medical Officer of Health and School Medical Officer—

J. H. KITSON, M.B., M.R.C.S., D.P.H.

School Dentist—

E. B. GIBSON, L.D.S. Manch. (part time).

Nursing Staff—

MRS. A. N. GEE, S.R.N., C.M.B., A.R.San.I. (part time).

MISS J. HOYLE, S.R.N., C.M.B. (part time).

MISS E. FIELDEN, S.R.N., C.M.B. (part time).

Clerical Staff—

MISS M. BARKER, duties divided between L.S.A. and L.E.A.

MISS M. E. TUCKER.

MISS W. FIELDEN, Dental Clerk (part time).

Staff—

Dr. F. Asker resigned on March 31st, 1934, on being appointed Medical Officer of Health and School Medical Officer to the Borough of Rowley Regis.

Mrs. H. Shackleton resigned her appointment as part-time clerk to the School Dental Officer on September 30th, 1934.

Co-ordination—

As stated in previous reports, the School Medical Officer in this Borough is also the Medical Officer of Health, so that all matters pertaining to the health of children come at some stage within his purview. This is an ideal arrangement and prevents much overlapping and divergent views.

MEDICAL INSPECTION.

The Board of Education has made no change in the three statutory age groups required to be medically examined annually. These are (1) Entrants. (2) Intermediates. (3) Leavers.

A school nurse is in attendance and she prepares the children for examination. In addition she weighs and measures the children and tests their vision. Parents are invited to attend the Routine Medical Inspection of their children and during the past year 472 attended (56·1%). The parents of the younger children almost invariably attend, but the older scholars are frequently unaccompanied by an older person. The presence of the parents facilitates the work as a more accurate history can be obtained, any appropriate advice can be given and explained, and if treatment is required the necessary consent can be obtained—treatment in consequence being expedited.

School	Dept.	No. examined	No. of Parents who attended	Percentage of Parents who attended
Cornholme Cl.	...M & I ...	87	... 61	... 70·1
Vale Cl. ...	...J & I ...	38	... 30	... 78·9
Robinwood Cl.	...J & I ...	30	... 13	... 43·3
Todmorden C. of E.	...Infts. ...	24	... 17	... 70·8
Todmorden C. of E.	...Mixed ...	74	... 18	... 24·3
Eastwood Cl.	...J & I ...	26	... 18	... 69·2
Lumbutts Cl....	...J & I ...	12	... 6	... 50·0
Castle Hill Cl....	...Infts. ...	41	... 35	... 85·4
Castle Hill Cl....	...Junrs. ...	39	... 21	... 53·8
St. Joseph's R.C.	...M & I ...	57	... 32	... 56·1
Roomfield Cl....	...Infts. ...	45	... 37	... 82·2
Roomfield Cl....	...Junrs. ...	47	... 34	... 72·3
Roomfield Cl....	...Senrs. ...	91	... 21	... 23·1
Lanebottom Cl.	...Infts. ...	3	... 2	... 66·6
Cloughfoot Cl.	...J & I ...	12	... 12	...100·0
Walsden C. of E.	...J & I ...	19	... 10	... 52·6
Walsden Cl. ...	...Infts. ...	22	... 21	... 95·5
Walsden Cl. ...	...Mixed ...	74	... 27	... 36·5
Shade Cl. ...	...Infts. ...	37	... 28	... 75·7
Shade Cl. ...	...Mixed ...	63	... 29	... 46·0
TOTAL ...		841	... 472	... 56·1

During the year the number of objectors to Medical Inspection has shown a marked fall. The numbers of objectors for the past seven years are : 1928, 114 ; 1929, 83 ; 1930, 97 ; 1931, 76 ; 1932, 76 ; 1933, 92 ; 1934, 46. Here head teachers have been a great help. They have interviewed parents at school, explained the purpose of routine Medical examinations and in many cases persuaded parents to consent. As in previous years the majority of these objectors attend the mixed department of Shade Council School but the action taken by the Headmaster has resulted in reducing the number from 29 to 22.

In most cases no reason for the objection is given.

The findings of the Medical Inspections will be found in Tables IIa and IIb. By reference to the latter table it will be seen that there has been a reduced percentage in the number of children requiring treatment in the "Entrants," and an increased percentage in the number requiring treatment of "Intermediates" and "Leavers" inspected. More children were found to be suffering from defective vision, defective hearing and otitis media (discharging ears) and requiring treatment.

Nutrition.—The number of badly nourished children in the Todmorden Schools is not large. In some families I had expected to find cases of malnutrition ; but there is a tendency for mothers to sacrifice themselves by under-feeding in order to provide their children with more substantial meals. Of the 841 children examined at the Routine Inspections the nutrition of 655 was satisfactory, in 180 slightly sub-normal, and in 6 children, bad. The classification was made on clinical grounds and not based solely on the height and weight. In addition to age, sex, height and weight, the general appearance, the condition of the muscles, the amount of subcutaneous fat, and the child's expression, are considered. It is the general impression which decides into which group the child is to be placed.

Of the 6 cases 2 were receiving free meals provided by the Local Education Authority.

Uncleanliness.—Surveys of all the schools in the Borough in respect of uncleanliness were undertaken at intervals throughout the year by the school nurses. The percentage of children found unclean show a decrease (10%—8·3%), but it is still far from satisfactory.

576 children were found to be unclean during the year and 69 children were cleansed at the Clinic. In the latter cases should the parents allow them to become again infested they will be liable to prosecution under Section 87 of the Education Act.

The following Table shows the extent of uncleanness in your Schools.

School	Dept.	No. of Surveys.	No. of Children Examined.	Percentage Number with Nits Unclean, or Vermin
Cornholme Cl.	...M & I	... 3	... 643	... 87 ... 13.5
Vale Cl. ...	...J & I	... 3	... 287	... 42 ... 14.6
Robinwood Cl.	...J & I	... 3	... 295	... 84 ... 30.0
Todmorden C. of E.	Infsts.	... 3	... 184	... 26 ... 14.1
Todmorden C. of E.	Mixed	... 3	... 690	... 54 ... 7.8
Open Air School	...M & I	... 3	... 137	... 18 ... 13.1
Eastwood Cl.	...J & I	... 3	... 217	... 11 ... 5.1
Lumbutts Cl.	...J & I	... 3	... 108	... 3 ... 2.8
Castle Hill Cl.	...Infsts.	... 3	... 187	... 8 ... 4.3
Castle Hill Cl.	...Junrs.	... 3	... 288	... 12 ... 4.2
St. Joseph's R.C.	...M & I	... 3	... 379	... 56 ... 14.8
Roomfield Cl.	...Infsts.	... 3	... 275	... 16 ... 5.8
Roomfield Cl.	...Junrs.	... 3	... 626	... 26 ... 4.2
Roomfield Cl.	...Senrs.	... 3	... 838	... 18 ... 2.2
Lanebottom Cl.	...Infsts.	... 3	... 40	... 1 ... 2.5
Cloughfoot Cl.	...J & I	... 3	... 50	... 0 ... —
Walsden C. of E.	...J & I	... 3	... 106	... 10 ... 9.4
Walsden Cl. ...	...Infsts.	... 3	... 118	... 7 ... 5.9
Walsden Cl. ...	...Mixed	... 3	... 654	... 42 ... 6.4
Shade Cl. ...	...Infsts.	... 3	... 186	... 11 ... 5.9
Shade Cl. ...	...Mixed	... 3	... 652	... 44 ... 6.8
TOTALS			... 6960	576 *8.3

*10.0% in 1933.

Skin Diseases.—During the year there were no cases of Ringworm of the Scalp and no cases of Scabies.

3 cases of Ringworm of the body were treated at the School Clinic.

Of the other skin diseases Impetigo was the most common—23 cases being treated at the Minor Ailment Clinic.

Defective Vision and External Eye Disease.—57 cases of defective vision and 11 cases of squint requiring treatment were discovered at Routine Medical Inspection—equivalent to 8.1% 102 children were refracted by me at the Clinic

and 81 were found to be in need of glasses. In 11 cases the glasses were satisfactory and in the remaining 10 cases glasses were not required. 79 actually received glasses through the Authority's Scheme—72 obtaining them at cost price—the remaining 7 receiving them free. I find that, once the defect has been pointed out and the necessity for wearing glasses explained, the parents, in practically every instance, are ready to provide glasses and to see that the child wears them.

After a child has been refracted and glasses have been provided it is kept on the observation list and seen on every occasion the school is visited for Routine Medical Inspection.

Ear Diseases.—There were 10 cases of Otitis Media (discharging ears) discovered at Routine Medical Inspection which were referred to the Clinic for treatment. After a course of treatment two cases were referred for operative treatment to the Burnley Victoria Hospital. Discharging ears are apt to be taken too lightly by the general public who regard them as a trivial complaint, whereas they may give rise to serious and sometimes fatal complications. On this account it is of the utmost importance that treatment should be obtained in all cases and persevered with until a cure is effected.

Deafness of some degree was present in 14 cases, of whom 10 were referred for treatment. In none of these was the deafness sufficient to warrant admission to a special class but in a few cases the teacher was notified of the condition and asked to place the child in the most favourable position for hearing.

Tonsils and Adenoids.—9 cases of enlarged Tonsils and Adenoids were found at Routine Inspection to be in need of operative treatment and in 54 cases it was thought advisable to keep them under observation. There is no local hospital where Tonsils and Adenoids can be removed and cases are sent to Bradford and the operation performed at the Leeds Road Hospital by arrangement with the Bradford Corporation at a cost of £2 per case. There is a scale of charges—parents paying the full amount or less according to their income. 23 cases were operated on under this scheme, of these :—

0 paid the full amount,
4 paid part of the cost,
19 paid nothing.

Six cases are taken at a time by one of the School Nurses to Bradford and remain three nights in Hospital—one before and two after operation. They return home, again accompanied by a nurse, who visits their homes at intervals to

see that they are progressing satisfactorily. At the end of three weeks they are seen by me at the Clinic and are passed back to school if their condition is satisfactory. At the same time advice is given to the parents about nose breathing and nasal hygiene.

Heart and Circulation.—There were five cases of Organic Heart Disease discovered at Routine Medical Inspection.

Deformities.—There were 13 cases of deformities discovered at Routine Medical Inspection—9 requiring treatment and 4 to be kept under observation. The cases requiring treatment were :—

Rickets, 4; Flat-foot, 3; Torticollis, 2.

Eight cases received the necessary treatment during the year.

INFECTIOUS DISEASES.

The arrangements for the control of infectious diseases in schools remain as in former years, and continue to work smoothly.

The number of cases known to have occurred among elementary school children during the year was :—

DISEASE	No. of Cases 1933	No. of Cases 1934
Measles	79 ..	501
Scarlet Fever	25 ..	13
Whooping Cough	83 ..	33
Chicken Pox	104 ..	57
Mumps	11 ..	20
Diphtheria	8 ..	1
German Measles	8 ..	2
Small Pox	— ..	0
Totals	318 ..	627

Measles was distinctly more prevalent than in the previous year but it was not necessary to close any School or Department—the usual procedure of excluding individual cases and contacts being all that was required. Of the 501 cases known to have occurred, 87 were in February, 291 in March and 102 in April.

Only 1 case of diphtheria and 13 cases of Scarlet Fever amongst school children were notified during the year.

FOLLOWING UP.

All children who have been discovered suffering from disease or defect are regularly followed up to ascertain what action the parents have taken to have the condition remedied.

A complete record of these cases is kept at the Central Office. Below is a tabular statement of the work done during the year by your nurses in their capacity as school nurses. In addition they have a large volume of work to get through as Health Visitors.

THE SCHOOL NURSES.					1933	1934
Number of times School Clinic open ...					220	221
Number of attendances for minor treatment					3127	3592
Number of Consultations					2042	1582
Average attendance for treatment per						
Clinic					14.2%	16.3%
Number of Children followed up by Nurses					942	1032
Visits to homes by Nurses					864	930
Visits to Schools by Nurses... ..					254	271
Number of children examined at Vermin						
Surveys					7276	6960
Infectious disease enquiries (home) ...					236	447
" " " (school) ...					227	156
Special visits, Bradford					10	8
Number of attendances for Artificial Sun-						
light Treatment... ..					677	269
Number of children treated					63	26

MEDICAL TREATMENT.

The treatment provided by the Local Education Authority is set out in Table 4 of this report. It includes the treatment of minor ailments, diseases of the eyes and ears, defective vision and squint, diseases of the nose and throat, skin diseases, minor injuries and dental defects. Treatment by Artificial Sunlight is also provided and arrangements have been made with the Manchester and Salford Skin Hospital for the treatment of ringworm of the scalp by X-Rays. No case of ringworm of the scalp has required treatment by X-Ray during the year.

The Local Education Authority makes no charge for treatment at the minor ailment clinic or for artificial sunlight treatment. A nominal sum of 3d. per visit is charged for dental treatment, and £1 1s. 0d. per case for X-Ray treatment of ringworm of the scalp. The removal of enlarged tonsils and adenoids is carried out at the Leeds Road Hospital, Bradford, at a cost of £2 per case. Parents contribute to the cost in accordance with the Local Education Authority's scale.

ORTHOPAEDIC TREATMENT.

Orthopaedic cases are dealt with by the Rochdale Crippled Children's Union either at the Rochdale Clinic or at the Bamford Memorial Hospital. There were no cases having Hospital treatment at the beginning of the year but one new case was admitted. This child made two attendances at the Rochdale Clinic for consultations.

ARTIFICIAL SUNLIGHT TREATMENT.

The Artificial Sunlight Clinic was held during the first three months of the year, the majority of children treated being those in attendance at the Open-Air School.

The results of the treatment are tabulated below :—

Condition for which treatment was given	Number treated	Cured or greatly Improved	Improved	Slightly Improved	No Improvement	Worse
1. Debility, anæmia and malnutrition	9	3	3	2	1	0
2. Rickets	2	0	0	2	0	0
3. Enlarged glands	4	0	3	1	0	0
TOTALS . .	15	3	6	5	1	0

Number of attendances for artificial sunlight treatment :

Boys, 132. Girls, 137. Total, 269.

Number of children treated : Boys, 12. Girls, 14. Total, 26.

In 11 cases the course was not completed.

DENTAL TREATMENT.

The School Dentist devotes three mornings a week to the inspection and treatment of School Children.

He reports as follows :—

Annual Report of the School Dental Officer for the Year Ended 31st December, 1934.

During the year I have again been able to examine all children of six years of age and upwards, and the improvement found in previous years has been maintained.

This year the percentage of children with sound teeth was 37·7, which is 5½% better than last year, and contrasts with less than 3% the first year dental inspection was undertaken. In a large number of those requiring treatment only one or two teeth were affected, and one visit to the clinic restored dental health.

There are still many parents who refuse to give consent for treatment to be carried out at the Dental Clinic, and very few of these ever visit other Dentists except for the extraction

of troublesome teeth, so the condition still persists that some ten per cent. or so of the children in the schools have bad teeth, very often many in number, and are carried forward year after year making the general condition for the Borough much worse than would be the case if consent for treatment could be obtained. Although the area compares very favourably in this respect with other places, the percentage of consents this year is only 67·23, so treatment has been denied to one third of the children requiring it. Appended hereto is a table giving particulars for each school in the Borough, the consents varying from 42·2 to 85·5.

The condition of the teeth of the younger children is still bad, hence the low percentage with sound teeth in the Infants' and some of the Junior Schools. During the year 274 children aged five and six years were examined, and of these 48 or 17·5% had sound teeth, but of the latter seven had previously received treatment at the Clinic under the Maternity and Child Welfare Scheme, or on the recommendation of the School Medical Officer, and 18 had had multiple extractions elsewhere so the number with apparently naturally sound teeth is reduced to 23 or 8·4%. On the other hand the number of these children with very bad teeth, eight or more diseased was 25 or 9·1%, compared with a general average 3·5% in this condition in the area. These figures emphasise the desirability of consideration being given to commencing inspection and treatment of children on entering school at five years of age instead of six as at present.

The actual condition of the individual teeth of the children was as follows :—

Temporary Teeth.	Sound	...	...	8,861
	Saveable	...	...	17
	Unsaveable...	...	...	2,662
No. of Temporary Teeth examined 11,540				
	No. of these diseased	...	...	2,679 = 24.09%
Permanent Teeth.	Sound	...	...	31,879
	Saveable	...	...	679
	Unsaveable...	...	...	752
No. of Permanent Teeth examined 33,310				
	No. of these diseased	...	...	1,431 = 4.03%
Total No. of Teeth examined ... 43,419				
	No. of these diseased	...	...	4,110 = 9.46%

SCHOOL	No. Insp.	With Sound Teeth	%	No. requiring Treatment	Giving Consent	%
Roomfield Infnts. ..	57	15	26.3	42	34	80.9
Roomfield Junrs. ..	221	98	44.3	123	82	66.6
Roomfield Senrs. ..	276	101	36.5	175	146	83.4
Vale	84	23	27.4	61	32	52.4
Cornholme	205	75	36.5	130	91	70
Open Air School ..	133	78	58.5	55	47	85.5
Walsden C. E. ..	25	6	24	19	8	42.2
Lumbutts	24	10	41.8	14	10	71.4
Eastwood	60	21	35	39	28	71.8
Castle Hill	129	44	34.1	85	61	70.6
St. Joseph's	111	50	45	61	33	54.1
Cloughfoot	14	4	28.5	10	7	70
Lanebottom	4	2	50	2	1	50
Walsden Council ..	242	89	36.8	153	78	51
Robinwood	72	16	22.2	56	34	60.7
Todmorden C. E. ..	253	82	32.4	171	116	69
Shade	269	107	39.4	162	105	64.8
1934	2179	821	37.7	1358	913	67.23

OPEN AIR SCHOOL.

The Open Air School provides accommodation for 50 children. The children, from 5-14 years of age, admitted to the school are those suffering from some physical disability which prevents their obtaining proper benefit from the ordinary elementary education. They are brought to my notice, either by the teachers, school nurses, or are discovered at Routine Medical Inspections. The parents are urged to get any defects, such as enlarged tonsils and adenoids, or decayed teeth remedied before admission to the school. No child is admitted, who is considered likely to be a source of infection to others.

The teaching staff consists of a head-teacher and one assistant.

Children arrive at school, at 8-45 a.m., and remain the whole day, leaving at 4-15 p.m. Breakfast and dinner are provided, and a cup of milk or cocoa is supplied before leaving school. The meals provided are wholesome, varied and adequate. After dinner the children rest in a recumbent position for one hour, either in the open when weather permits, or under cover when wet.

Each child is provided with towel, tooth brush, comb, and drinking mug. They also have individual blanket and sheet.

A fee of 2s. 6d. per week is charged for each child, but this is remitted in necessitous cases.

During the year the average length of stay was 8·7 months and the average gain in weight 7·2 lbs. It is noticed that the greatest increase in weight generally takes place during the first two months after admission. A steady rise follows during term-time, only to reveal in many cases a decrease during a holiday. Very frequently too a heavy loss of weight is recorded during the months of June, July and August.

The school has been full throughout the year and has been of incalculable benefit to the children in attendance. In fact, there is difficulty in discharging some children, as the parents are so satisfied with the beneficial results that they are loathe to have their children removed even though the physical condition warrants their discharge.

PHYSICAL TRAINING.

During the year Miss M. W. Barrie resigned her appointment as Organiser of Physical Training, and was succeeded by Miss V. M. Kent.

REPORT ON PHYSICAL TRAINING.

Since November, 1933, the Physical Training in all schools has been carried on in accordance with the Board of Education's 1933 Syllabus. The standard of work in the schools showed that the teachers and children were ready for the changes and innovations introduced in the new syllabus. The work is now going ahead with very great enjoyment to the children, and genuine interest on the part of the teachers.

1. **Posture.** The children are beginning to understand what is meant by "good posture." The majority of teachers teach "unrolling" thoroughly, and endeavour to make the aim of the exercise clear to the class so that they may derive the maximum benefit from it. Still more thought should be given to posture in the classroom, especially in the senior classes.

2. **Physical Exercise.** Much effort and thought has been expended in the teaching of the newer types of exercise. The teachers who have actually done the exercises themselves, and who realise that the holding of a position has to be replaced by rhythmic movement, obtain the best results. Too often exercises performed rhythmically lose their effect through bad counting. The counting must allow time for the limit of movement to be reached, but must not be so slow that it interferes with the swing of the movement.

The boys still have great difficulty with "rhythmic jumps" although there has been a marked improvement in the last few months. There is not enough attention paid to "lightness" and "spring." The exercise should be started on the toes, there should be a full stretch of the body in the air, followed by a definite "give" at the ankles and knees on landing. It is this "give" which makes for lightness, and there can be no "give" without the preceding "stretch."

The majority of teachers understand the advantages of "support" for certain exercises, and make good use of walls, railings, etc. Much more attention should be paid to how the children support one another. The correct method of "support" should be made very clear to the class, and no child should be allowed to grip or help his partner in any other way.

3. **Team Work.** More than ever the teachers are realising the advantage of organised purposeful team work. In the junior classes the leaders are well trained, and the

members of the teams work well. With certain activities there is bound to be a short waiting period between the turns. Instead of standing or sitting still for this time, the children should do some individual practise of some exercise or activity. With a well trained class, this individual work will in no way interfere with brisk active team work. The training of leaders has been carried much further in infant classes this year. The senior work is disappointing. The teachers do not give the leaders enough responsibility. The teachers should see the leaders together once a week, tell them what work has to be done during the week, and then the leaders should be responsible for arranging the practises.

4. **Games.** There is an improvement in the standard of games played in the organised games period. The team practises of the Physical Training have made the children keener and more ambitious. The standard of ball play shows a very marked improvement especially in the infant schools. Boys of all ages are learning to skip and are thoroughly enjoying it.

It is a great pity that, for the present, it is impossible to send all the children to a playing field for their games. It is to be hoped that arrangements can be made whereby more use can be made of the Centre Vale Park, part of which is used as a playing field by the National School.

Inter-school netball, rounders, and stoolball matches have been played, and have created much interest and enthusiasm. The standard of play in rounders and stoolball improved very much towards the end of the season.

5. **Tables.** It will sometimes be found necessary in cold weather to adjust the table of exercises. Adaption to temperature should be made by the type of lesson rather than the addition of extra clothing. For example, on very cold days it is essential to start the lesson with a brisk opening activity, the nature of which is already known to the class, to emphasise activity, movement and change of formation throughout the lesson, and to leave the teaching of new exercises involving standing and listening to explanations until a more favourable day.

6. **Ventilation.** Should weather conditions make the outdoor lesson impossible, too much importance cannot be attached to the necessity for adequate ventilation for an indoor Physical Training or dancing lesson. Use should be made of all possible means of ventilation in order to ensure a constant supply of fresh air.

7. **Clothing and Shoes.** Most of the children are suitably dressed, but unfortunately many are unsuitably shod. The wearing of clogs or wellingtons is undoubtedly a great disadvantage to the child. The Teachers' example and tactful suggestions to the children should do much to obtain the necessary footwear. It is of very great importance that the footwear should be flexible in order that the maximum benefit to the child, and the best results from the exercises, be obtained.

8. **Teachers' Classes.** During the Spring Term a course of ten lessons was arranged for infant and standard one teachers on Tuesday evenings, and on Wednesday evenings there was a similar course for Junior and Senior teachers. The aim was to introduce the 1933 syllabus and to give the teachers as much help as possible with the new work. Without the classes the progress that has been made in the last few months would have been impossible. Only a few infant teachers were unable to attend the classes. Some Standard 2 and 3 teachers attended both courses in order to obtain a thorough understanding of the preparatory and fundamental exercises. Many teachers who were unable to attend the classes have received much help by discussing their difficulties with their colleagues who were present.

SCHOOL BATHS.

The swimming bath at Shade School continues to be used by the general public as well as by the school children, but it is inadequate for the needs of the Borough. The water in the swimming bath is changed three times weekly and Chloros (disinfectant) is added.

PROVISION OF FREE MEALS.

Under Section 82-84 of the Education Act, of 1921, power is given to Local Authorities to provide meals for children who are unable by reason of lack of food to take full advantage of the Education provided for them. During the year 187 children were provided with 26,376 dinners. In 1933, 207 children were provided with 32,939 dinners. Free Meals are supplied by arrangement with various caterers at a cost of 6d. per meal. Menus have been prepared and submitted to the various caterers as an indication of the type of meal to be supplied. The question of catering for free meals is under consideration at the present time.

The selection of children is made on an economic basis.

Supply of Milk for Schools. On November 6th, 1934, a scheme was inaugurated for the supply of milk for schools at the price of $\frac{1}{2}$ d. per one-third pint.

As a supply of efficiently pasteurised milk was not available, all the milk is obtained from local dairymen, but all possible precautions are being taken to ensure as far as practicable the safety of the supply.

With the co-operation of the teachers the scheme met with a remarkable response, 84% of the school children participating.

A free supply of milk may be given to those children, properly selected, who show any symptoms, however slight of sub-normal nutrition, and who are unable to pay.

CO-OPERATION OF PARENTS, TEACHERS, ATTENDANCE OFFICERS and STAFF.

I wish to acknowledge my indebtedness and offer my sincere thanks to the above-named helpers. Without their assistance much of my work would be ineffective.

BLIND, DEAF, DEFECTIVE and EPILEPTIC CHILDREN.

By reference to Table III. the number of children under each of the above headings will be seen.

THE SECONDARY SCHOOL.

The School Medical Inspection is under the jurisdiction of the West Riding County Council. At the request of the County Council, 55 candidates successful at the County Minor Scholarships Examination, were offered medical examinations before admission to the Todmorden Secondary School, and 50 accepted.

The following defects were found :—

Dental Caries	10	Defective Vision	5
Defective Hearing	1	Conjunctivitis	1
Blepharitis ...	1	Urticaria ...	1
All accepted treatment at the School Clinic.			

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

The employment of children in Todmorden is not extensive. Those who are employed are first examined by me and provided with the necessary certificate if fit.

STATISTICAL TABLES.

The Statistical Tables required by the Board of Education are submitted herewith.

TABLE I.**RETURN OF MEDICAL INSPECTIONS.****A.—Routine Medical Inspections.**

Number of Code Group Inspections—

Entrants	...	...	...	...	275
Intermediates...	...	...	...	...	279
Leavers	...	...	...	...	255
Total	...	...	...	...	809

Number of other Routine Inspections ... 32

B.—Other Inspections.

Number of Special Inspections... ... 667

Number of Re-Inspections 1,538

Total 2,205

TABLE II.—A.

**RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1934.**

DISEASE OR DEFECT.	ROUTINE INSPECTIONS.		SPECIALS.	
	Requiring treatment.	No. requiring to be kept under observation, but not for treatment.	Requiring treatment.	No. requiring to be kept under observation, but not for treatment.
(1)	(2)	(3)	(4)	(5)
MALNUTRITION	6	26	—	—
SKIN—Ringworm—Scalp	—	—	—	—
Ringworm—Body	—	—	3	—
Scabies	—	—	—	—
Impetigo	1	—	23	—
Other Diseases. (Non-Tubercular)	6	1	68	—
EYE—Blepharitis	1	—	8	—
Conjunctivitis	1	—	24	—
Keratitis	—	—	—	—
Corneal Opacities	1	—	—	—
Defective Vision (excluding squint)	57	69	7	—
Squint	11	9	1	—
Other Conditions	1	—	22	—
EAR—Defective Hearing	10	4	1	—
Otitis Media	10	1	3	—
Other Ear Diseases	2	—	20	—
NOSE AND THROAT—				
Chronic Tonsillitis only	4	32	9	6
Adenoids only	1	4	—	—
Chronic Tonsillitis and Adenoids	4	18	13	6
Other Conditions	6	7	12	—
ENLARGED CERVICAL GLANDS (Non-Tub.)	1	—	4	—
DEFECTIVE SPEECH	—	5	—	—
HEART AND CIRCULATION—				
Heart Disease:				
Organic	1	4	1	—
Functional	—	3	—	—
Anaemia	1	1	2	—
LUNGS—				
Bronchitis	8	3	5	1
Other Non-Tubercular Diseases	1	—	3	—
TUBERCULOSIS—PULMONARY—				
Definite	—	—	—	—
Suspected	—	2	—	1
TUBERCULOSIS—NON-PULMONARY—				
Glands	2	—	—	—
Bones and Joints	1	1	—	—
Skin	—	—	—	—
Other Forms	—	—	—	—
NERVOUS SYSTEM—				
Epilepsy	—	—	—	—
Chorea	—	—	2	—
Other Conditions	—	—	—	—
DEFORMITIES—				
Rickets	4	—	—	—
Spinal Curvature	—	—	—	—
Other Forms	5	4	1	1
OTHER DEFECTS AND DISEASES (excluding Uncleanliness and Dental Diseases)	9	6	274	2
Total.....	155	200	506	17

TABLE II.—B.

NUMBER OF INDIVIDUAL CHILDREN FOUND AT
ROUTINE MEDICAL INSPECTION TO REQUIRE
TREATMENT (excluding uncleanness and dental
disease).

Group (1)	Number of Children.		Percentage of Children found to Require Treatment. (4)
	Inspected. (2)	Found to Require Treatment. (3)	
Code Groups :			
Entrants	275	28	10.2
Intermediates ..	279	62	22.2
Leavers	255	48	18.8
Total (Code Groups)	809	138	17.1
Other Routine Inspections ..	32	3	9.4
Grand Total	841	141	16.8

TABLE III.—RETURN OF ALL EXCEPTIONAL CHILDREN
IN THE AREA.

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Blindness (NOT Partial Blindness), Deafness (NOT Partial
Deafness), Mental Defect, Epilepsy, Active Tubercu-
culosis, Crippling, Heart Disease ... Nil.

BLIND CHILDREN.

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

PARTIALLY BLIND CHILDREN.

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

DEAF CHILDREN.

At Certified Schools for the Deaf	At Public Elementary Schools	At other Institutions	At no School or Institution.	Total.
1	—	—	—	1

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf	At Certified Schools for the Partially Deaf	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
1	—	—	—	—	1

TABLE III. (continued).

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	4	—	10	14

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Day Open Air Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
1	—	—	—	1

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

- (i). Children suffering from Pulmonary Tuberculosis.
(Including pleura and intra-thoracic glands).

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	—	—	—	—

- (ii). Children suffering from Non-Pulmonary Tuberculosis.

At Certified Day Open Air Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
7	8	1	—	16

TABLE III. (continued).

B. DELICATE CHILDREN.

At Certified Day Open Air Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
37	2	—	—	39

C. CRIPPLED CHILDREN.

At Certified Day Open Air Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
3	1	—	—	4

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	1	—	1	2

TABLE IV.
RETURN OF DEFECTS TREATED DURING THE YEAR
ENDED DECEMBER 31st, 1934.
TREATMENT TABLE.
GROUP I.—MINOR AILMENTS (excluding uncleanliness,
for which see Group VI.)

DISEASE OR DEFECT	No. of Defects Treated or under Treatment during the year.		
	Under the Authority's Scheme	Otherwise	Total
Skin—			
Ringworm—Scalp	—	—	—
Ringworm—Body	3	—	3
Scabies	—	—	—
Impetigo	22	—	22
Other Skin Disease	57	—	57
Minor Eye Defects—			
External and other, but exclud- ing cases falling in Group II.	48	—	48
Minor Ear Defects	22	—	22
Miscellaneous—			
e.g. Minor Injuries, Bruises, Sores, Chilblains, etc.	223	4	227
Total	375	4	379

TABLE IV.—Cont.

**GROUP II.—DEFECTIVE VISION AND SQUINT (excluding
Minor Eye Defects treated as Minor Ailments—Group 1.)**

DEFECT OR DISEASE	No. of Defects dealt with		Total
	Under the Authority's Scheme	Otherwise	
(1)	(2)	(3)	(4)
Errors of Refraction (including Squint) ...	102	19	121
Other defect or disease of the eyes (exclud- ing those recorded in Group I.) ...	—	—	—
Total ...	102	19	121

Total number of children for whom spectacles were pre-
scribed:—

(a) Under the Authority's Scheme—81.

(b) Otherwise—18.

Total number of children who obtained or received spec-
tacles:—

(a) Under the Authority's Scheme—79.

(b) Otherwise—18.

TABLE IV.—Cont.**GROUP III. TREATMENT OF DEFECTS OF NOSE AND THROAT.**

Number of Defects received Operative Treatment under the authority's Scheme, in Clinic or Hospital—23. By Private Practitioner or Hospital, apart from the Authority's Scheme—3. Total—26. Received other forms of Treatment—0. Total number treated—26.

GROUP IV. ORTHOPAEDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme			Otherwise			Total number treated
	(1)			(2)			
	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	
Number of children treated.	—	1	—	—	1	—	2

GROUP V.—DENTAL DEFECTS.**1. Number of children who were :—****(a) Inspected by the Dentist, aged :—****Routine Age Groups.**

5 years	29	10 years	269
6 years	245	11 years	244
7 years	277	12 years	238
8 years	269	13 years	271
9 years	259	14 years	37

Specials..... 0.

Total.....2138.

Grand Total.....2138.

(b) Found to require treatment 1358

(c) Actually treated 971

TABLE IV.—Cont.

2.	Half-days devoted to	Inspection, 16.	Total, 132.
		Treatment, 116,	
3.	Attendances made by children for treatment—1515.		
4.	Fillings.—Permanent Teeth	... 150.	
	Temporary Teeth	... 12.	Total, 162.
5.	Extractions.—Permanent Teeth	593.	
	Temporary Teeth	1912.	Total, 2505.
6.	Administrations of local anæsthetics for extractions, 1179.		
7.	Other Operations.—		
		Permanent Teeth, 507.	
		Temporary Teeth, 30.	Total, 537.

GROUP VI.**UNCLEANLINESS AND VERMINOUS CONDITIONS**

Average number of visits per school made during the year by the School Nurses—3.

Total number of examinations of children in the schools by School Nurses—6,960.

Number of individual children found unclean—395.

Number of children cleansed under arrangements made by the Local Education Authority—69.

Number of cases in which legal proceedings were taken.

(a) Under the Education Act, 1921—4.

(b) Under School Attendance Bye-laws—0.







