## Contributors

West Bromwich (England). Council.

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## COUNTY BOROUGH OF WEST BROMWICH.



EDUCATION COMMITTEE.

# Annual Report

# FOR THE YEAR 1930,

#### ON THE

## MEDICAL INSPECTION

AND

## TREATMENT OF SCHOOL CHILDREN

(23rd OF THE SERIES).

West Bromwich, March, 1931,

Bates, Printer, West Bromwich.



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#### ATTENDANCE AND MEDICAL SERVICES SUB-COMMITTEE.

The Mayor (C	ouncillor W. T. Poultney)	Councillor	S. Crump, J.P.
Mr. J. P. Mi	llward, Chairman .	,,	T. Mercer
Alderman J.	Bell, J.P.	,,	E. Mynett
,, J.	E. Cox, J.P.	,,	H. H. Prince
,, J.	A. Kenrick, J.P.	,,	A. D. James
Councillor Mr	s. Grace E. Cottrell, J.P.	Mr. J. La	wley
,, ,,	E. A. Smallman		

Director of Education: ARTHUR LEWIS, B.A. (Barrister-at-Law).

## STAFF OF SCHOOL MEDICAL DEPARTMENT.

School Medical	Officer			W. Stott, M.B., B.S., D.P.H.
Deputy ,,	,,			R. N. Curnow, M.B., B.S., D.P.H.
Assistant "	,,		÷ .	A. Anderson, M.B., Ch.B., D.P.H.
Consulting Oph	thalmic :	Surgeo	m	Charles Rudd, M.B., Ch.B.
Dental Surgeon				Mrs. E. R. Hadley, L.D.S. (Edin.).
School Nurses			Miss	C. Twist Miss M. W. Pole
			,,	A. Clegg ,, S. A. Smith
			,,	W. K. Brazier Mrs. L. A. Bryan
			,,	L. A. Powell Miss M. M. Byard
				,, B. Wearing
Clinic Nurses			,,	B. E. Fisher , H. M. Hayes (Appointed 1/4/30).

Superv	isors o	of Phy	sical	Instruc	tion {	••••	Mr. Albert F. Probst Miss W. V. Steel
Masseu	ise (fo	r Ren	nedial	Exerci	ses)		Miss E. Fisher
Chief (							Miss D. Bromley (Appointed 1/5/30).
Clerk a	and De	atal A	ttend	ant			Miss G. M. Lupton
.,							Miss R. I. Turner
"							Miss D. Matthews (Appointed 1/4/30)

## To the Chairman and Members of the Education Committee.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in presenting you with the Report on the School Medical Services for the year 1930.

Throughout the year this work has progressed smoothly, and there has been an increase in the work generally.

Special efforts were made to ascertain as many as possible of the crippled, mentally deficient and delicate children in attendance at the schools; this accounts for the apparent enormous increase of the exceptional children, as found in the exceptional tables at the back of the Report. Once again I bring to your notice the necessity for open-air classes and would urge that such be given serious consideration: such classes would solve to some degree the problem of the delicate child.

I desire to express my appreciation of the goodwill shown to me by the Chairman and Members of the School Medical Committee; the invaluable assistance given to me by the Director of Education and Teachers, and of the loyalty and high quality of the work of the Assistant Medical Officers, Dentist, Nursing and Clerical Staffs.

I am, Ladies and Gentlemen,

Yours obediently, W. STOTT, School Medical Officer.

March, 1931.

## LIST OF ELEMENTARY SCHOOLS AND ACCOMMODATION.

Offi	cial						
No.	Name of School.		В.	G.	М.	Ι.	Total
1	Beeches Road Council		351	422	-	315	1088
2	Black Lake Council		330	341	-	308	979
2a	Bratt Street Council		_	_	470	161	631
3	Bull Lane Council			_	-	270	270
24	Charlemont Council		_		400	350	750
14	Christ Church Council		_	_	369	178	547
22	Cronehills Central Council		400	400		_	800
15	Fisher Street Council		-	-	270	190	460
4	Golds Hill Council		-	_	291	183	474
5	Greets Green Council		323	403	_	262	988
	,, ,, Temporary		160			_	160
6	Guns Village Council		356	361	_	327	1044
27	Harvills Hawthorn Counci	1	300	0-	-		300
~ 1	marvins mawmorn counci		000				000
~1				S.374			500
-1	Hill Top Council					380	1502
	Hill Top Council " Joseph Edward Cox "		374	S.374 J.374	-		1502
16 28	Hill Top Council '' Joseph Edward Cox '' (Friar Park) Cour	 ncil	374	S.374 J.374		200	1502 200
16 28 7	Hill Top Council '' Joseph Edward Cox '' (Friar Park) Cour Lodge Estate Council	 ncil	374 	S.374 J.374 — 435		200 350	1502 200 1220
16 28 7 8	Hill Top Council '' Joseph Edward Cox '' (Friar Park) Council Lodge Estate Council Lyng Council	 ncil 	374 	S.374 J.374 — 435 307		200 350 265	1502 200 1220 972
16 28 7 8 11	Hill Top Council '' Joseph Edward Cox '' (Friar Park) Council Lodge Estate Council Lyng Council Spon Lane Council	 ncil 	374 435 400 426	S.374 J.374 		200 350 265 468	1502 200 1220 972 1294
16 28 7 8 11 20	Hill Top Council " Joseph Edward Cox " (Friar Park) Council Lodge Estate Council Lyng Council Spon Lane Council St. Peter's Council	 ncil  	374 435 400 426	8.374 J.374 	  197	$200 \\ 350 \\ 265 \\ 468 \\ 161$	1502 200 1220 972 1294 358
16 28 7 8 11 20 13	Hill Top Council "Joseph Edward Cox" (Friar Park) Cour Lodge Estate Council Lyng Council Spon Lane Council St. Peter's Council All Saints' C.E. Non-provi	 ncil  	374 435 400 426	8.374 J.374 		200 350 265 468	1502 200 1220 972 1294
16 28 7 8 11 20	Hill Top Council "Joseph Edward Cox" (Friar Park) Council Lyng Council Spon Lane Council St. Peter's Council All Saints' C.E. Non-provi Holy Trinity C.E.	ncil   	374 $435$ $400$ $426$ $ 360$	8.374 J.374 	  197	200 350 265 468 161 300	1502 200 1220 972 1294 358 940
16 28 7 8 11 20 13 17	Hill Top Council "Joseph Edward Cox" (Friar Park) Council Lodge Estate Council Lyng Council Spon Lane Council St. Peter's Council All Saints' C.E. Non-provi Holy Trinity C.E. Non-provi	ncil   	374 $435$ $400$ $426$ $ 360$	8.374 J.374 	  197	$200 \\ 350 \\ 265 \\ 468 \\ 161$	1502 200 1220 972 1294 358
16 28 7 8 11 20 13	Hill Top Council "Joseph Edward Cox " (Friar Park) Cource Lodge Estate Council Lyng Council Spon Lane Council St. Peter's Council All Saints' C.E. Non-provid Holy Trinity C.E. Non-provide St. Michael's R.C.	ncil   ided ded	374 435 400 426 360	S.374 J.374 	  197  319	200 350 265 468 161 300 146	1502 200 1220 972 1294 358 940 465
16 28 7 8 11 20 13 17 19	Hill Top Council "Joseph Edward Cox " (Friar Park) Council Lodge Estate Council Lyng Council Spon Lane Council St. Peter's Council All Saints' C.E. Non-provi Holy Trinity C.E. Non-provi St. Michael's R.C. Non-provi	ncil   ided ded ded	374 435 400 426 360 —	S.374 J.374 		200 350 265 468 161 300 146 	1502 200 1220 972 1294 358 940 465 112
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Average number of Children on the Registers 1930 :---

Upper Dep	artments-	-Boys	 	5080
tensily and in		Girls	 	4867
Infants			 	3899
		Total	 	13846

#### CO-ORDINATION.

The School Medical Officer continued to direct the work of the School Medical Service in close co-operation with the Public Health and Education Departments, also with other local agencies, voluntary or otherwise, for the treatment and supervision of children.

As your Medical Officer is also Medical Officer of Health, Administrative Tuberculosis Officer and Medical Officer for Maternity and Child Welfare, the whole of the Public Health Service is co-ordinated in and directed from my office.

#### SCHOOL HYGIENE.

The Hygiene of the Schools was described fully in my Report for the year 1929, and as I intend only to give the Hygiene of the Schools in detail every five years it is not my intention to repeat this year.

The Authority have already taken steps to deal with some of the defects, particularly at Beeches Road, where the galleries have been removed in the classrooms, and

#### CHRIST CHURCH SCHOOL.

This School, which last year was described as crowded, dark and dismal, has been almost completely reconstructed, and those responsible for the alterations are to be congratulated on its conversion into what it is now, a bright and airy building.

The classrooms have been completely rebuilt. In the cloakrooms sufficient pegs have been provided, and there is now a drying apparatus for wet clothes. The washing accommodation has been considerably improved; four wash-bowls each have been provided for boys and girls, and six for the Infants. A new corridor has been made into which each classroom opens, thus preventing the movement of one class interfering with the rest of the school, and giving easy egress in case of fire. The light and ventilation has been greatly improved by the introduction of this corridor with its large windows, and by extensive alterations involving the substitution of steel frame windows capable of opening in each section; a great advantage over the old small heavily framed ones. In the classrooms several entirely new windows have been inserted. A new sky-light in the Infants' room, and the increased size of Standard 3 classroom have all contributed to the general improvement. The playground is new and has a hard welldrained surface. The artificial light has been brought up to date by the introduction of electric light. The floors have been re-laid throughout the whole school, and every room has been repainted with fresh bright colours.

The Headmaster and the Staff have each been provided with private rooms and separate sanitary accommodation.

I trust that similar improvements will gradually take place in all schools which were adversely reported upon last year.

#### INSPECTIONS.

Routine medical examination of children at the elementary schools in accordance with the requirements of the Board of Education. The number of individual children so examined was 3,942. 661 children were found to require treatment. Of these, 596 children found to be suffering from 759 defects were re-examined at the School Clinic.

Special inspections and re-inspections made at the Central Clinic numbered 7,697.

The number of individual children examined by the School Dentist at routine inspections was 7,594.

The number of examinations of children in Schools for uncleanliness by nurses was 47,076.

#### FINDINGS AT ROUTINE MEDICAL INSPECTION.

The details of defects ascertained will be found in Table II. of the statistical appendix.

It is satisfactory to note that the percentage of children found to require treatment is considerably lower than ever previously recorded: --13% Entrants, as against 19%; 15% Intermediates, as against 27% the previous year. The only unsatisfactory findings are those of the Leavers-22.5% as against 22.2% were found to require treatment. This is much too high a percentage for children who are supposed to have had at least two previous medical examinations during their school life. On referring to the Routine Inspection tables, under the heading of Leavers Group, one finds that 165 of these children were found to be suffering from Defective Vision, defects which should have been discovered years previously.

The number of children found, as the result of routine medical inspection, to require treatment (apart from uncleanliness and dental defects) was 661. The chief defects for which treatment was found necessary were Defective Vision, Enlarged Tonsils and Adenoids and Chest complaints.

#### MUNICIPAL SECONDARY SCHOOL.

Routine Inspections were carried out at the above School; a total of 135 children being examined: 55 boys, 80 girls. Only 12 defects, all minor ones, were discovered among the

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boys, but amongst the girls 50 defects were found to require treatment, 7 of which were defective vision, 8 enlarged tonsils and adenoids, and 16 postural defects.

#### KENRICK JUNIOR TECHNICAL COLLEGE.

The School was inspected for the first time this year. Thirty-nine boys were examined, and 17 defects discovered, 4 of which were defective vision and 12 defective teeth.

#### FOLLOWING-UP.

The work of "following-up" was the combined efforts of the Medical Staff, School Nurses, Head Teachers and Attendance Officers, supplemented by the co-operation of the General Practitioners and Hospital Staffs. There can be no reason or excuse for any child failing to receive adequate medical attention by reason of the ignorance or poverty of his parents or inability, through any other reason, to provide for his When a child was discovered to have a defect the needs. parent was notified of the fact and requested to attend at the School Clinic or take such other action as lay within his power to obtain suitable treatment. In cases where the child was not brought to the Clinic a School Nurse visited the home to obtain evidence that the requisite treatment had been obtained; repeated visits were paid when necessary. This also applied in cases where the child was not brought to the Clinic at stated periods for re-examination.

The number of visits paid by Nurses during the year is as follows : ---

To	Schools	 	 345
To	Homes	 	 1,921

#### CLEANLINESS SURVEYS.

Number of examinations of cl	nildren 40,091
Number of re-examinations o	f children 6,985
	47,076
Number of individual childre	n found unclean 2,810
Number of visits to Schools	349
Number of visits to Homes	908

During the year it has been satisfactory to note an improvement in the quality of uncleanliness, if one may so term it.

The efforts of the Nurses and School Teachers are having their desired effect but progress is, naturally, slow. The quantity of uncleanliness remains more or less stationary, so



far as the actual number of unclean children is concerned. I would here like to record my thanks to all Teachers for the efforts which they have made to assist in this rather unpleasant task.

My thanks are also due to Inspector Pine, of the N.S.P.C.C., to whom several of the worst cases were referred to avoid, if possible, prosecutions under the Children Act for neglect. Although every effort was made to avoid court proceedings, it was necessary to prosecute parents in the following cases:—

(a) Under the Education Act ... 2

(b) Under School Attendance Bye-Laws 6

#### **EXCEPTIONAL CHILDREN.**

Particulars of ascertained defects of blind, deaf, tubercular, epileptic, crippled and rheumatic children will be found in Table III. at the back of the Report.

It will be noted that there is a great increase in the findings, particularly of the delicate children. This is due to the fact that your Medical Staff have increased their efforts during the year to ascertain as many as possible of these children in the schools. It must be realised that these children are not a sudden acquisition of the Authority, but have existed all along. The numbers have grown from 167 to 522. The crippled children group has also increased from 142 to 224. The mentally defective group is rapidly increasing. It is chiefly the exceptional children who cause the lowering of the percentage attendance; many of them are absent for weeks, or even months, at a time. The only means of dealing with them satisfactorily is by way of a Special School worked on openair principles, and where the education is based upon the physical and mental capacity rather than on the age of the pupils.

#### INFECTIOUS DISEASES.

Every possible measure was taken to restrict the spread of infectious diseases. There was no closure of schools for epidemic disease, and it was not found necessary to issue any certificates for low attendance under the special provision of Article 23 (b) of the Code. In the early part of the year there was a mild outbreak of Measles and Chickenpox, and from September onwards there was a fairly extensive, but mild, outbreak of Scarlet Fever. Apart from these the health of the school children has been particularly good during the year.

#### Infectious Diseases Notified from Schools.

Measles				965
Whooping Co	ugh			73
Chicken Pox				554
Mumps				47
Scarlet Fever				222
		Total	1	,861

#### Deaths of School Children from Infectious Diseases, etc.

T.B. Pulmona	ry		 2
Other T.B. Dis	seases		 2
Heart Disease			 1
Pneumonia			 6
Accidents			 2
Appendicitis			 1
Others			 5
		Total	 $\overline{19}$

## BACTERIOLOGICAL EXAMINATIONS.

Two hundred and two swabs taken from school children were examined during the year.

#### MEDICAL TREATMENT.

The Local Authority has provided facilities for the treatment of various minor ailments at : —

#### The Central Clinic,

Lombard Street West. Open daily.

#### Sub-Clinics,

- Hill Top. Open Monday morning and Friday afternoon.
- Boulton Road. Open Tuesday & Thursday morning.
- Greets Green. Open Tuesday morning and Thursday afternoon.
- Charlemont. Open Monday afternoon and Friday morning.

Hamstead. Open Friday morning.

The following Special Clinics are held at the Central Clinic: --

- (1) **Ceneral Clinic.** Tuesday and Friday afternoons, at which the following groups of cases are seen and examined and the necessary advice given :
  - (a) Cases found to require treatment or observation at Routine School Medical Inspection.
  - (b) Cases referred by the School Nurses.
  - (c) Cases referred by the School Teachers.
  - (d) Cases referred by the School Attendance Officers.
  - (e) Cases brought for advice by parents.
- (2) Ear Clinic. Mondays at 10 a.m.
- (3) **Ophthalmic Clinic.** Thursday morning at 9-30 a.m., at which cases of defective vision and special eye diseases are dealt with.
- (4) Heart and Rheumatic Clinic. Wednesdays at 10 a.m.
- (5) **Remedial Exercises Clinic.** Monday and Friday afternoons and Wednesday mornings.
- (6) **Dental Clinic.** Each morning of the week and Monday and Thursday afternoons.

Other arrangements are as follows : ---

- (1) Operative Treatment for Diseases of Nose and Throat. West Bromwich and District Hospital, Hallam Hospital.
- (2) Orthopædic Treatment. Royal Cripples Hospital, Birmingham, and West Bromwich and District Hospital.
- (3) X-Ray Treatment for Ringworm. Dr. Black, 22, Newhall Street, Birmingham.
- (4) Ultra Violet Light Treatment. Health Department, Lodge Road.

Owing to the increase in work at the Clinics, it was found necessary, early in the year, to increase the Nursing Staff, and accordingly the Committee appointed two School Nurses to be entirely responsible for the minor ailments, dressings, and routine treatment.

As will have been noted from the Statistical Tables, 661 children were found to be suffering from defects which required treatment. Each one was, in turn, called to the Central Clinic to obtain the necessary treatment or to be referred to one of the local hospitals for operative treatment where such was found to be necessary. 596 children, presenting 759 defects, were thus dealt with. Other children, whose parents refused to bring them to the Clinic, received treatment at the hands of their own Private Practitioner; 200 defects were thus treated. 63 cases remained over to be treated this year; these were 63 cases of Defective Vision. This is highly satisfactory when it is remembered that practically 200 Vision cases remained over from the year 1929 to be dealt with during 1930.

#### Minor Ailments.

Under this heading are included a variety of defects and diseases which are generally capable of remedy by treatment which can be administered by School Nurses under medical supervision. Some of these conditions—contagious skin diseases, external eye defects, etc.—are responsible for much loss of school attendance, and the minor eye and ear conditions may do irreparable injury if neglected. The number of such cases treated during the year was 3,207, an increase of 732 compared with the previous year.

#### **Tonsils and Adenoids.**

556 children received treatment for defects of Nose and Throat, 231 had operations, and 325 other forms of treatment. This is an increase of 215 compared with the previous year.

#### Vision.

The number of children refracted at the School Clinic was 512 and spectacles were prescribed for 397. Although these figures exceed our past attainments the work is still somewhat in arrears. The following figures show the number of children refracted at the Clinic in each of the past five years, and clearly indicate an attempt to cope with the requirements in this sphere of our work as far as available time has permitted :—

1926.	1927.	1928.	1929.	1930.
190	184	170	383	512

#### Ear Disease.

There was no change in the method of treatment. The Special Ear Clinic on Monday mornings was continued; 167 children attended, of whom 48 were cured. The total number of children treated for ear defects at the Clinics was 363.

#### **Dental Defects.**

Details of inspection and treatment carried out during the year will be found in Table IV., Group IV., of the Statistical Appendix. On account of the distance from the Central Clinic all the children at Hamstead St. Paul's School were examined and the requisite sessions set apart for their treatment. The journeys to and fro were made by Corporation omnibus.

The percentage of children found to require treatment at the Dentist's routine inspections was 57.4, as compared with 55.8 for 1929.

The Dentist is now working to her full capacity and each year in the future will mean an accumulation of cases awaiting treatment. I drew the attention of the Authority to this a few months ago and they have decided to make additional arrangements for the forthcoming year.

#### **Crippling Defects and Orthopædics.**

It is to be hoped that an Orthopædic Clinic will be commenced this year, although up to the present time it has not been found practicable to make the necessary arrangements.

The following table shows the work done at the Remedial Exercises Clinic : —

#### Remedial Clinic, 1930.

Number of Sessions		 126
Number of Attendances		 1941
Number of Patients (Girls 29, Boys	24)	 53
Discharged		 30
Left School or District		 5
Remaining on Books		 18

#### **Disabilities Treated.**

Kyphosis			 12	
Torticollis			 2	
Lateral Curves			 14	
			-	28
Mouth Breathers			 	15
Old Infantile Paralysis			 	3
Flat Feet and Sprained	Ankles	3	 	6
Fractured Forearm			 	1

#### Tuberculosis.

SPINAL.

All cases of definite or suspected Tuberculosis were referred to the Dispensary, except those already receiving hospital treatment. The following table shows the number of children of school age having tubercular disease at the end of the year : ----

	Boys.	Girls	Total.
Lungs	1	5	6
Glands	44	22	66
Bones and Joints	12	8	20
Other forms	7	7	14
	$\overline{64}$	42	106
	-	-	-

#### Ultra Violet Light.

The Ultra Violet Ray Clinic again proved of much value to the School Medical Service during the year. In all, 44 children, apart from the Tuberculous school children, were given treatment at this Clinic. 740 attendances were made, Of the 44, 35 children were discharged during the year; the remainder continue treatment.

The following table indicates the conditions for which treatment was given and the improvement made.

				Much		No	Un-	Failed to	Refd.
			Cured.		Impd.		able.		Hsptl.
Alopecia			1	1	3	2	-		
Anæmia			1	-	1	—	-	_	_
Debility			1	1	1			—	-
Fragilitas	ossium		-	_	-	—	1	-	-
Glands of .	Neck (non-T.	B.)	. 4	4	3	_	-	4	_
Goitre			_	_	_	1	_	-	-
Photophob	ia		_	-	_	-	1	_	_
Psoriasis			-	-			-	—	1
Rheumatis	m		-		_	1	-	—	—
Septic Ras	h		1	-	-	_		-	—
			8	6	8	4	2	4	1
					_			-	

#### MENTAL DEFICIENCY.

Last year I drew the attention of the Authority to the principal recommendation of the Mental Deficiency Committee as drawn up in the "Wood" Report, and indicated the lines on which these cases could be dealt with in West Bromwich. I do not intend to repeat this, but refer you to last year's report. Ascertainment has proceeded apace. Mentally Defective children have been graded, and recommendations made regarding each, but the efforts of the Education Authority and of your Medical Staff are rendered more or less valueless by lack of machinery—I refer particularly to the lack of machinery on the part of the Local Control Authority whose duty it is to supervise the Mentally Defective children who have not been placed in institutions on attaining the age of sixteen years.

The Education Authority realises full well that they are responsible for all educable Mentally Defectives until they become sixteen years of age, and a beginning has been made in opening a small Special Day School. This is the beginning but certainly not the end. To be of any value, this Special School must grow into a School at which the educable deficients can remain until they attain the age of sixteen years, and where they can be taught Domestic Work, Tailoring, Boot-making and the like, in order to equip them, so far as possible, with the means to support themselves.

At the age of sixteen years—what then? The majority of these children will be referred to the Local Control Authority for supervision, and unless there is an officer, whose duty it is to supervise them continually, they will be forgotten and eventually lost, and, what is probably worse, they will marry; drift to the slums; propagate their species and thus throw additional burdens on the Education Authority and the Town generally. This is, broadly speaking, the lack of machinery referred to above.

The position at the end of the year was as follows :---

Feebleminded Children vision of the Educa				Boys.	Girls.	Total.
Attending Certific Attending P.E. S	ed Scho schools	ols		$1 \\ 48$	1 58	$\frac{2}{106}$
At no School or 1	Instituti	ion		2	1	3
Cases notified to Loca Authority during th						
Idiots				1	-	1
Imbeciles				4	4	82
Feebleminded	•••			1	1	2
		Т	otals	57	65	122

#### PHYSICAL TRAINING.

I have received the following report for inclusion in the Annual Report from the Organisers of Physical Training : —

#### A. Physical Education.

Notwithstanding the variable weather conditions, we beg to report that the programme of work in the playgrounds and playing fields has gone on more or less regularly throughout the year.

The Organisers feel that the majority of Teachers have co-operated with them in trying to inculcate in the scholars under their care, a love of out-door exercise and healthful activity. It is felt, however, that there are cases where the advantage of the time allotted for Physical Education is not used to the maximum value.

This is, without doubt, a very short-sighted policy. In all cases, when and where possible, children should have their physical exercises in the fresh air. Assuming that the Physical Training lessons are adapted in accordance with weather conditions, we think that it is a mistaken idea to "coddle" children suffering from minor colds and ailments. Fresh air is Nature's most powerful antidote against illhealth.

Playground surfaces, in some cases, are not all that could be desired. Children shod in worn footwear need consideration, and it is only these children who should be allowed to remain in classrooms, other than those excused by the School Medical Staff and private practitioners. The importance of developing and fostering the habit of outdoor recreations and wholesome activities for leisure time cannot be over emphasised. If we can produce "active" players by providing games and athletics for all, in order that all may receive benefits, we are thereby developing some of the essential factors which go to make good citizens.

As a general principle, the aim of all teachers responsible for the teaching of games is the maximum good of the greatest number, which implies that all and not the selected few pupils must receive benefits from the special training.

Games showing a wider training of activity and skill have been used as the necessary introduction to the major and national games. The work of the Teachers responsible for this early training is reflected in the higher standard of efficiency of play on the net-ball, football and cricket pitches.

#### B. Fire Drill.

A very careful investigation was carried out in the early part of the year to ascertain the length of time for the quick and safe exit of children from school buildings in case of emergency. The Organisers are satisfied that responsible teachers have taken extreme care to encourage practice in fire drill.

We ascertained that all school premises were evacuated in a rapid and orderly manner.

A full and detailed report dealing with this matter was submitted to the Education Committee in April, 1930.

#### C. Swimming.

The swimming groups made good progress during the summer term.

The usual "Breast Stroke" method of teaching was adopted in all cases, because we have yet to be convinced that the "Crawl" stroke should be generally taught to beginners, and we prefer to await the result of further experiments.

The "Breast Stroke Method " is undoubtedly the ideal one for developing important structural muscles, and is, in our opinion, the best method for exercising the thorax and respiratory organs. It is gratifying to find the number learning to swim each year is on the increase. It is to be regretted that larger numbers cannot be sent from the schools. While the number of swimming baths available is so limited, we think that every advantage should be taken of present facilities. Land drill should be practised a great deal more as part of the physical training lesson with every class from which the swimming groups are drawn. The movements are developmental and educative to the non-swimmer as well as to the hopeful member of the swimming section. It is a pleasure to record that teachers responsible for swimming groups in nearly all cases have worked with enthusiasm and genuine keenness.

Swimming forms an important part in the scheme of Physical Education. We desire to state very emphatically that swimming is introduced into the school curriculum not to find possible speed champions, but to give opportunities to every child in the swimming group to learn to swim with a degree of efficiency and style.

#### **D.** Swimming Results.

The Lodge Estate Girls' School was successful once again in coming top of the list for the "Helen Caddick" Swimming Shield, and is to be congratulated on its achievement.

Greets Green Boys finished first, and are, therefore, the winners of the "Kenrick" Swimming Shield.

The general standard of efficiency on the boys' side has shown a marked improvement.

The Organisers hope that many of the swimmers from the swimming groups will enter the 1931 competition for the Grade Certificates for distance swimming; but it should be pointed out that all pupils attending the Public Elementary Schools are eligible for these tests for Grade Certificates.

#### E. Conclusion.

In summing up the year's work, the Organisers would again emphasise the special recommendation mentioned in Section A, namely, that physical education should be done in the open-air. The Head Teachers' judgment must be exercised as to when weather conditions are suitable. Indoor physical education is, at the best, a poor substitute in crowded and heated classrooms for movement in the fresh air. A few selected exercises can be valuable in correcting postural defects and troubles.

Care must be taken to ensure that children are not exposed to extremes of temperature. Careful use of the classroom ventilators and windows can help to eliminate this danger.

We should like to take this opportunity of expressing our appreciation of the goodwill shown to us by the Director of Education and the Education Committee, and the loyalty and co-operation of the Head Teachers and their Staffs.

### WINIFRED V. STEEL. ALBERT F. PROBST.

(Organisers of Physical Education).

#### PROVISION OF MEALS.

Seven children resident in West Bromwich attending school in the Birmingham area were fed by the Birmingham Authority continuously throughout the year, your Committee refunding the cost of the meals. No other meals were provided.

#### **CO-OPERATION OF PARENTS.**

It is quite apparent that there is an increasing appreciation of the efforts of the School Medical Service for the welfare of the children. The number of parents attending Routine School Medical Inspection and at the Central Clinic is increasing each year. 2,639 parents attended at Routine Medical Inspections. 2,951 attended at the School Clinic without official invitation.

#### **CO-OPERATION OF TEACHERS.**

I have again to express my thanks for the co-operation and assistance of the Head Teachers in the work of the School Medical Service. They have helped very materially, devoting much time and taking considerable pains to ensure that all children requiring examination or supervision were brought to our notice, and in supplying information with commendable promptitude relative to cases of Infectious Diseases, Contacts and Suspected Cases. The success of the School Medical Service depends, to a large extent, on the keenness of the Teachers and the encouragement which they give to parents to submit their children for examination, particularly at the School Clinics. Last year special efforts were made to secure a higher standard of cleanliness amongst children attending the schools, the attainment of which largely depends on the encouragement and efforts on the part of the Teachers, and there is no doubt that the pleasing results obtained in this direction were largely due to the time and efforts devoted to this cause by the teachers themselves.

In the last Annual Report I referred the Head Teachers to the handbook of suggestions on Health Education issued by the Board of Education in 1928. This year I would refer them to the remarks on this subject by Sir George Newman in his Annual Report for the Year 1929, on the Health of the School Child.

#### CO-OPERATION OF VOLUNTARY BODIES.

Our best thanks are due to Inspector Pine, of the N.S.P.C.C., who has assisted us materially during the year with cases of neglect. Also to the Cinderella Club and the Poor Children's Welfare Society for another year's valuable work. The services rendered by all these Societies calls for admiration of all who participate in the Elementary Education work of the Borough.

#### **CO-OPERATION OF ATTENDANCE OFFICERS.**

The Attendance Officers co-operated with the School Medical Officer in the fullest possible manner during the year. Their work of ascertaining and submitting to us cases of long absence from school has helped us to determine a large number of delicate children.

#### SPECIAL SCHOOLS.

There are no Special Schools belonging to the Authority but a Special Day School for Mentally Defective Children will be commenced in the near future.

Under this heading one might remind the Authority of Open-Air Schools. Certain classrooms at the new school, which is now in course of erection at Charlemont, to some extent have the facility of being converted into open-air classrooms, but this, unfortunately, is limited to one school. The Town possesses many excellent school buildings with good playground accommodation, and it would be a great help, not only to the children, but to the School Medical Service, if open-air classes could be organised—particularly for some of the delicate children attending these schools—whenever weather conditions permit. Such classes do not entail a great deal of expense; simple wooden shelters protected from prevailing winds and erected on the "sun-trap" principle, would serve the purpose admirably. I draw the Authority's attention to these facts because they are worth their consideration as soon as ever the present financial difficulties improve.

#### NURSERY SCHOOLS.

There are no Nursery Schools in the area, but the Authority, realising the importance of this work, have decided to commence Nursery Classes in connection with their Infants Departments as soon as possible.

#### EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

The following table gives particulars of licences and registrations for the year 1930 : ---

#### A.—Employed Children (12-14 years).

No. of Registrations:	Boys.	Girls.	Total.
Delivery of Newspapers or Milk	79	1	80
Errands and Light Duties	39	1	40
Child Performers	-	3	3
No. of Licences surrendered :			
Newspapers or Milk Delivery	61	1	62
Errands, etc	16	-	16
B.—Street Trading by Young Persons.			
No. of Licences issued	4		4
No. of Licences surrendered	2	—	2
C.—Investigating Patrols.			
No. of Patrols undertaken			67
No. of Offences reported			25
No. of Letters (Warning Notices)			19
No. of Offenders interviewed			11

#### D.—CHILD-PERFORMERS.

The Investigating Officer reported two (2) cases in which the Managers of touring Theatrical Companies had failed to notify the Local Education Authority regarding the employment of child-performers.

At the request of the Director of Education the one child was withdrawn from employment. In the second case, the technical omission was rectified, and afterwards the Medical Officer declared the child fit to perform.

#### RHEUMATISM.

The Rheumatic Clinic has continued to function every Wednesday morning, and the work undertaken has increased considerably.

Last year I gave an outline of the methods adopted at this Clinic, and will content myself this year in saying that exactly the same procedure has been carried out during 1930.

Owing to the considerable amount of work thrown upon the Health Staff, as a result of the coming into force of the Local Government Act, it was not possible to continue any special investigations into the rheumatic problem, as was our intention; instead, we contented ourselves by making a special effort to discover, as far as possible, all the rheumatic children in the area. It was while making this investigation that your Medical Officers discovered the large number of delicate children which have already been discussed under the proper heading. Although we have discovered many more rheumatics I cannot say that we have yet found all; we are still finding a few cases.

At the end of December the number of cases on the register were grouped as follows : ---

A.—RHEUMATISM (includes 2 or more of the following—sore throat, growing pains, nodules, abdominal pains, together with recurrent feverish attacks).	F. 103
B.—Rheumatism and Heart Disease	M. 60 F. 63 — 123
C.—Chorea or St. Vitus' Dance	M. 15 F. 30 — 45
D.—CHOREA AND HEART DISEASE	M. 3 F. <u>4</u> - 7
TOTAL OF RHEUMATIC CASES	349
TOTAL CASES OF HEART DISEASE	127

The incidence of Rheumatism amongst the elementary school children according to these figures is therefore 23.5 per thousand.

## STATISTICAL TABLES.

## TABLE I.

## RETURN OF MEDICAL INSPECTIONS.

A. ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections : --

Entrants	 	 1311
Intermediates		 1462
Leavers	 	 1169

Тотал ... 3942

Number	of other Routine Inspections	:—	
	Re-examination of Defects		959
	B. Other Inspectio	ONS.	-
	Number of Special Inspectio	ons	3037
	Number of Re-inspections		4660
	TOTAL		7697

## TABLE II.

#### RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, 1930.

		Routine Inspections						Specials		
		Entr	ants	Interm	nediates	Lea	vers			
Defect or Disease	No. St.	For Treatment	For Observation	For Treatment	For Observation	For Treatment	For Observation	For Treatment	For Observation	
(1)		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
falnutrition		_	6	-	4	_	1	-	_	
Uncleanliness :— Head Body		142	_1	171 2	1	158 3	=	189 1	_	
Skin :— Ringworm—Head Body Scabies Impetigo Other Conditions		5 2 2 7 7				2 		'56 19 27 109 132		
Eyes : Blepharitis Conjunctivitis Keratitis Corneal Ulceration Corneal Opacities Defective Vision Squint Other Conditions		$     \begin{array}{c}       12 \\       2 \\       \\       \\       4 \\       26 \\       10     \end{array} $		$ \begin{array}{c} 10 \\ 2 \\ -1 \\ 108 \\ 6 \\ 10 \end{array} $				$91 \\ 101 \\ 1 \\ 5 \\ \\ 287 \\ 56 \\ 41$		
Ears : Defective Hearing Otitis Media Other Diseases Nose and Throat :		$\begin{array}{c} 4\\22\\14\end{array}$	111	4 17 3	1	$\begin{smallmatrix}&1\\14\\&6\end{smallmatrix}$	1 5 —	$     \begin{array}{r}       10 \\       176 \\       92     \end{array} $	2 2	
Enlarged Tonsils Adenoids Enlarged Tonsils and		<u>36</u>	93 7	27 5	115 7	9 1	124	63 5	31	
Adenoids Other Conditions		$\frac{4}{1}$	$\begin{array}{c} 6 \\ 5 \end{array}$	6 1	9 7		$\frac{6}{20}$	79 161	$\frac{2}{14}$	
Enlarged Cervical Glands		2	12	3	27	2	15	30	16	
Defective Speech		-	-	-	1	-		-	3	
Feeth		99	-	94	-	143	-	85	_	
Carried forward		401	132	489	175	554	172	1816	78	

## TABLE II -continued.

		Routine Inspections							
A Warden and State	Ent	Entrants		Intermediates		Leavers		- Specials	
Defect or Disease.	For Treatment	For Observation	For Treatment	For Observation	For Treatment	For Observation	For Treatment	For Observation	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
Brought forward Heart and Circulation :	401	132	489	175	554	172	1816	78	
Heart Disease- Organic Functional		4 4 5	1	$\begin{array}{c}19\\13\\2\end{array}$	$\frac{1}{-1}$	15 2 15	$\frac{29}{15}$	19 2 2	
Anaemia Lungs : Bronchitis Other Non-tubercular	12	55	3	2 24	3	15	45	10	
Diseases Tuberculosis : PulmonaryDefinite Suspected	-		-	-		-	36 —	$\frac{12}{-1}$	
Non-Pulmonary— Glands Spine	=	-	1	-	-	1	10	1	
Hip Other Bones Skin	=			Ξ	111	1	$\frac{2}{-1}$	=	
Other forms Nervous System : Epilepsy	_	1	- 1		_	1	5	- 5	
Chorea Other Conditions Deformities :—	1	=	2	Ξ	3	1	19 11	10 6	
Rickets Spinal Curvature Other forms	$\begin{array}{c} - \\ 4 \\ 2 \end{array}$	$\frac{-}{2}{3}$	9 3	2 3			4 22	- 2	
M.D	-	1	3	5	-	5	-	4	
Other Conditions	16	12	20	1	21	28	603	162	
Totals	438	222	533	244	596	267	2618	314	

#### TABLE II-continued

#### B. Number of individual children found at Routine Medical Inspection to require treatment (excluding uncleanliness and Dental Diseases).

			Number of			
Group			Inspected	Found to require treatment	<ul> <li>Percentage of Children found to require treatment</li> </ul>	
(1)			(2)	(3)	(4)	
Entrants	📎		1311	173	13.2	
Intermediates			1462	224	15.3	
Leavers			1169	264	22.5	
	TOTAL		3942	661	17.1	

#### TABLE III.

## NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN

#### IN THE AREA.

		Boys	Girls	Total
Blind (including — partially	(1) Suitable for or Classes for the Blind training in a Attending Public Elementary School or Class for the totally At other Institutions Blind Attending Public		1 111	2
	(2) Suitable for training in a School or Class for the partially Blind Attending Certified Schools or Classes for the Blind Attending Public Elementary Schools At other Institutions At no School or Institution	3		9

## TABLE III-continued.

		Attending Certified Schools or	Boys	Girls	Total
	(1) Suitable for		4	6	10
Deaf (including		Schools At other Institutions At no School or Institution			
deaf & dumb and partially	training in a	Attending Certified Schools or Classes for the Deaf Attending Public Elementary	-	-	_
deaf)	for the partially Deaf	Schools At other Institutions At no School or Institution	9	5	14 
	Feebleminded (cases	Attending Certified Schools for Mentally Defective Children Attending Public Elementary	1	1	2
Mentally	the Local Con- trol Authority)		$\frac{48}{2}$	$\frac{58}{1}$	$\frac{106}{-3}$
Defective	Notified to the Local Control Author- ity during the year	Imbeciles	1 4 1	1 	2 8 1
	(1) Suffering from	Attending Certified Special Schools for Epileptics In Institutions other than Certi-	1	-	1
Epileptics	severe Epilepsy			2 	2 
	Epilepsy which	Attending Public Elementary Schools At no School or Institution	<u>11</u>	10	21

#### TABLE III.—continued.

			Boys	Girls	Tota
	(1) Infectious Pul- monary and Glandular Tuberculosis	AtSanatoriaorSanatoriumSchoolsapprovedbytheMinistryofHealthorbyBoardAtotherInstitutionsAtpublicElementarySchoolsAtnoSchoolorInstitution	1 1 1		
	(2) Non-Infectious but active Pul- monary and Glandular Tuberculosis	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open-Air Schools At Certified Day Open-Air Schools At Public Elementary Schools At other Institutions At no School or Institution	1		
Physically Defective	(3) Active Non-Pul- monary Tuberculosis	At Sanatoria or Hospital Schools, approved by the Ministry of Health or by the Board At Public Elementary Schools At other Institutions At no School or Institution	5 49 4 —	$3\\35\\2\\1$	8 84 6 1
	<ul> <li>(4) Delicate Children         <ul> <li>(e.g. Pre or Latent Tuberculosis,</li> <li>Malnutrition,</li> <li>Debility, Rheu- matism, Chorea,</li> <li>Goitre, etc.)</li> </ul> </li> </ul>	At Certified Residential Open-Air Schools At Certified Day Open-Air Schools At Public Elementary Schools At other Institutions At no School or Institution	 234 	 288 	 522 
	with active Tu- berculous disease) children suffering from Paralysis, &c., and includ-	At Certified Hospital Schools At Certified Residential Cripple Schools At Certified Day Cripple Schools At Public Elementary Schools At other Institutions At no School or Institution		1 	1  224 8
	Rheumatic Children ment (including	with no apparent Heart involve- c Chorea and Goitre)	86	171	257

#### TABLE IV.

#### Return of defects treated during the year ended 31st December, 1930. Treatment Table.

	Number of Defects treated, or under treatment during the year.				
Defect or Disease (1)	Under the Authority's Scheme (2)	Otherwise (3)	Total. (4)		
Skin :	12				
Ringworm—Scalp              Ringworm—Body              Scabies              Impetigo              Other         Skin         Diseases	22 29 397	$\begin{array}{c}1\\-\\1\\5\end{array}$	68 22 29 <b>3</b> 98 772		
Minor Eye Defects External and other, but excluding cases falling in Group II	348	1	349		
Minor Ear Defects :	363	4	367		
Miscellaneous :— Minor injuries, bruises, sores, chilblains, etc	. 1196	6	1202		
Тотац	3189	18	3207		

GROUP I. Minor Ailments (excluding Uncleanliness).

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

I have a second	Number of Defects dealt with							
Defect or Disease	Under the Authority's Scheme	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme	Otherwise	Total				
(1)	(2)	(3)	(4)	(5)				
Errors of refraction (including squint). (Operations for Squint should be recorded separately in the body of the Report.)	493	5	_	498				
Other Defect or Disease of the eyes (excluding those re- corded in Group I)	19		_	19				
TOTAL	512	5	-	517				

#### TABLE IV-continued.

Total	number of children	for w	hom Spec	tacles we	ere prese	eribed.
	Under the Authority Otherwise	's Sch	eme			$397 \\ 5$
Tot	al number of children	n who	obtained	or receiv	red Spec	tacles.
$\binom{(a)}{(b)}$	Under the Authority Otherwise	's Sch	ieme			388 5
,	New frames, repairs,					113

GROUP III. TREATMENT OF DEFECTS OF NOSE AND THROAT.

Received	Operative Treatment			and the second sec
Under the Authority's Scheme in Clinic or Hospital (1)	By private Practi- tioner or Hospital, apart from the Authority's Scheme (2)	Total (3)	Received other forms of treatment (4)	Total number treated (5)
219	12	231	325	556

Number of Defects

GROUP IV. TREATMENT OF DENTAL DEFECTS.

(1) Number of children who were :-----

<i>(a)</i>	Inspected by Dentist	Aged		
		5	-	
		6	1078	
		7	1362	
		8	1380	
		9	492	
		10	489	
	Routine Inspections	11	1297	
		12	1123	
		13	373	
		14	-	
		TOTAL	7594	
	Special Inspection	8	Nil	
	(b) Found to require treatment-			
	Dentist's Routine Ins Medical Officers' Rout Specials		$\begin{array}{c} 4362\\ 336\\ 85 \end{array}$	4783
	(c) Actually treated			3895
	(d) Re-treated during the year periodical examin		10	367

(2)	Half days devoted to—Inspection Treatment		$\begin{array}{c}122\\330\end{array}$	Total	452
(3)	Attendances made by children for	treatm	ent		4307
(4)	Fillings Permanent Temporary		499 589	Total	1088
(5)	Extractions Permanent Temporary		$\begin{array}{c} 630\\ 5836\end{array}$	Total	6466
(6)	Administrations of general anaesthe	etics fo	r extracti	ons	249
(7)	Other operations				941
(1)	GROUP V. UNCLEANLINESS Average number of visits per School				
(1)	School Nurses				3
(2)	Total number of examinations of School Nurses	childr	en in the	Schools	by 47076
(3)	Number of individual children foun	d unch	ean		2810
(4)	Number of children cleansed under Local Education Authority	arrang	gements n	nade by	the 260
(5)	Number of cases in which legal pro- (a) Under the Education (b) Under School Atten (c) Under the Children	on Act, adance	1921 Bye-laws	aken—  	2 6 

#### TABLE IV .- continued.

## MUNICIPAL SECONDARY SCHOOL.

## TABLE V.

## RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, 1930.

	F	Routine Inspections.				
	Bo	ys	Girls			
Defect or Disease.	Requiring Treatment	For Observation	Requiring Treatment	For Observation		
1	2	3	4	5		
Malnutrition		1	-	-		
Uncleanliness :Head		-	-	-		
Body		-		-		
Skin :						
Ringworm—						
Head	· _	-		_		
Body Scabies	and the second	_		-		
Impotino		1				
Other Conditions	1		_			
Eyes :-						
Blepharitis	. 1		-	-		
Conjunctivitis		_		-		
Corneal Ulceration		-	-	-		
Defective Vision :						
6/9	. –		_	-		
6/12-6/24	. —	-	7	-		
6/36 or over			1	-		
6/36 or over (both eyes)		_				
Squint		-	-			
Defective Hearing						
OME	1					
Other Diseases		_	2			
Nose and Throat :						
Enlarged Tonsils	. 1	3	8	5		
Adenoids	. —		-			
Enlarged Tonsils & Adenoids	1	-	1	-		
Other Conditions	. –	1	1	-		
Hands-Enlarged Cervical & Submax		_	-	<u> </u>		
Defective Speech		-	-	-		
Teeth	4	-	6	-		
Carried forward	8	5	26	5		

		Routine Inspections.					
	]	Boys	Girls				
Defect or Disease.		Requiring Treatment	For Observation	Requiring Treatment	For Observation		
(1)		(2)	(3)	(4)	(5)		
Brought forward		8	5	26	5		
Heart and Circulation :					0		
Heart-Organic		-		-	6		
Functional		-	-		1		
Anaemia		1		1	1		
Lungs —Bronchitis Other Non-tubercular		1		1	1		
Diseases				1 Salar	100		
Tuberculosis :-					-		
Pulmonary—Definite	-			1	1		
Suspected							
Non-Pulmonary-Glands				1.1 2100.0	100		
Spine					100		
Hip		_	_	_			
Other Bones and Joints		_			1		
Other		-	-				
Nervous System :			1				
Subnormal Intelligence		-	-				
Epilepsy					-		
Chorea				-			
Other Diseases		-	_	·	-		
Signs of Overstrain							
Deformities :							
Rickets				-			
Spinal Curvature			-	4			
Other forms		1		16	2		
Other Diseases and Defects :			in the second se		and the second second		
Goitre				1			
Digestion		-	-	1000			
Constipation		-	-				
Rheumatism			-	2			
Other conditions		2	1	-			
Totals		12	6	50	15		
rotuis			0	00	10		

TABLE V.-Continued.

Number of Individual Children Examined—Boys 55 Girls 80

135

# KENRICK TECHNICAL COLLEGE.

#### TABLE VI.

## RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, 1930.

#### ROUTINE INSPECTION.

	Boys (only).					
Defect	or Dis	sease.			Requiring Treatment	For Observation
	(1)				(2)	(3)
Malnutrition					-	_
Uncleanliness—Head Body					_	=
Skin-						
Ringworm-Head					anna duran a sta	The later is a second s
Body						_
Scabies						_
Impetigo						_
Other conditions					_	
Eyes-						
DI 1						
Conjunctivitis						-
Corneal Ulceration	n				_	_
Defective Vision_						
810						_
6/12-6/24					4	
6/36 or over						_
6/36 (both eyes)						_
Squint	·					
Ears-						
Defective Hearing O.M.S						-
O.M.S. Other Diseases					100	_
Other Diseases	••••				TRACT	_
Nose and Throat						
Enlarged Tonsils					1	
Adenoids					1	
Enlarged Tonsils a	and A	lenoids			_	and the second
Other conditions					-	
Enlarged Submax. ar	id Cei	rvical G	lands		-	-
Defective Speech					-	-
Teeth					12	-
	Car	ried for	ward		17	Nil

#### TABLE VI.—continued.

T	F
ROTTINE	INSPECTION.
TROUTINE	THOLEDITON.

	Boys (only).				
Defect or Dise	Requiring Treatment	For Observation			
(1)	(2)	(3)			
Bro	ought	forwa	rd	17	Nil
Heart and Circulation_					
Heart_Organic				_	1
Functional				-	-
Anæmia				-	-
Lungs-					
D 11/1					
Other Non T.B. Disease				-	_
Tuberculosis-					
Pulmonary-					
Definite Suspected				_	-
Non-Pulmonary-					
Glands				_	_
Spine				-	-
Hip Other Bones and Join				-	-
Other				_	_
Nervous System—					
Sub-normal Intelligence				-	-
Epilepsy				-	-
Chorea Other Disease			•••	-	-
Signs of over-strain				_	_
Deformities_					
Rickets				-	-
Spinal Curvature Other Forms				-	-
Other Forms		/			_
Other Diseases and Defects-	_				
Goitre				_	_
Digestion				_	_
Constipation Rheumatism		••••			-
Othen conditions		••••		_	-
Other conditions					
	Total			17	1

Number of individual children examined-Boys 39.

