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COUNTY BOROUGH OF WEST BROMWICH.



EDUCATION COMMITTEE.

Annual Report

UPON THE

SCHOOL MEDICAL SERVICE

FOR THE

Year ended 31st December, 1938.

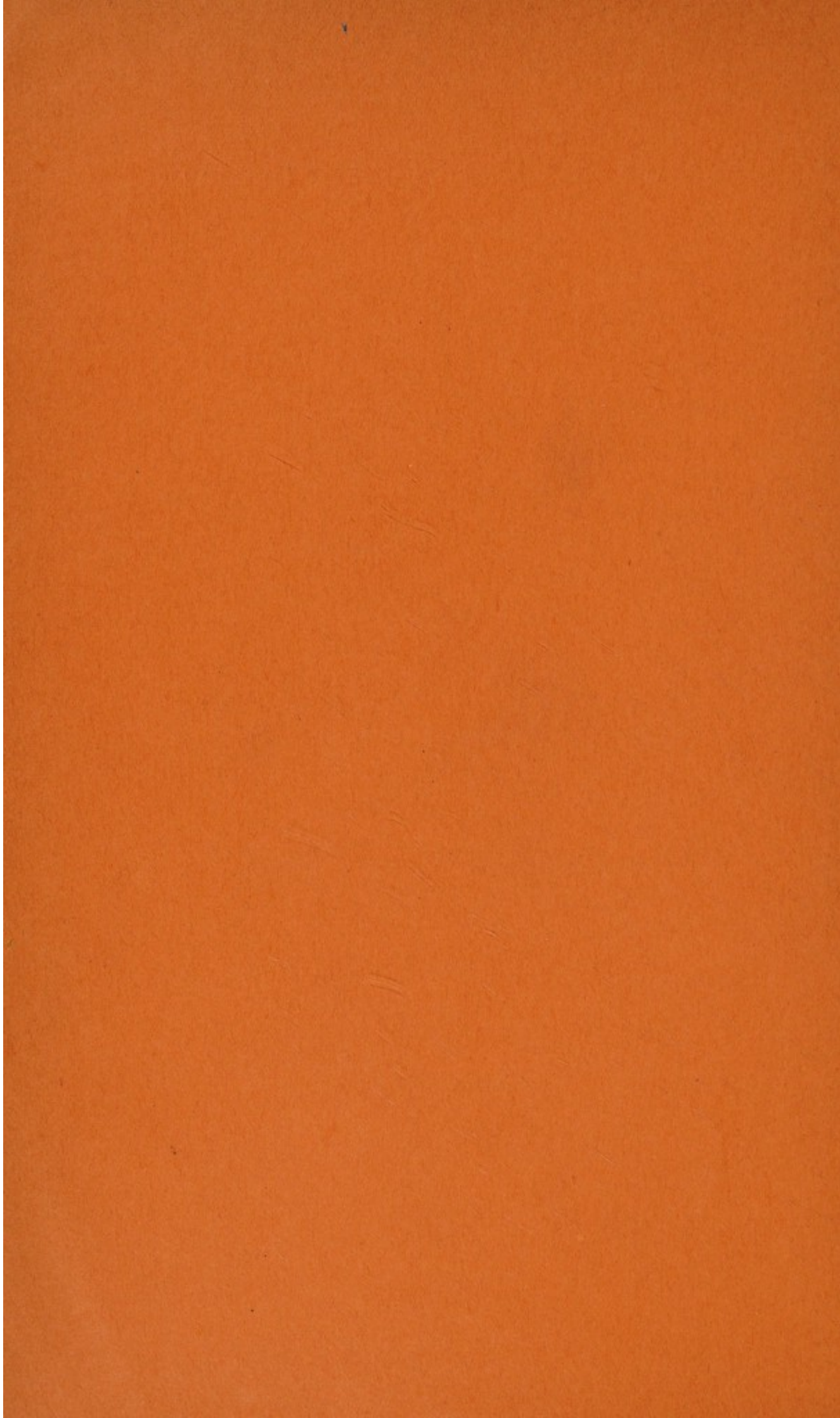
W. S. WALTON, M.D., B.Hy., D.P.H.,

School Medical Officer.

(31st of the Series.)

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INDEX.

	PAGE
Blind Children	27
Clinics	12-13
Co-ordination	9
Co-operation	25-27
Cost of School Medical Service	6
Crippled Children	28
Deaf Children	27
Delicate Children	28
Dental Defects	11, 14-15
Ear Disease and Defective Hearing	11, 13-14
Education Committee	4
Employment of Children	32-33
Epileptic Children	28
Following-up	12
Full-time Courses of Higher Education	30
General Information	6
Health Education	32
Heart Disease and Rheumatism	11, 17
Infectious Diseases	19
Light Treatment	18
Malnutrition	10, 12
Meals, Provision of	22-25
Medical Inspection	9-12, 31
Mentally Defective Children	27, 28-30
Minor Ailments and Diseases of the Skin	11, 12
Miscellaneous	32-33
Mortality in School Children	20
Nose and Throat Defects	11, 13
Open-Air Education	20
Orthopædic and Postural Defects	11, 15-16
Other Defects and Diseases	12
Parents' Payments	31
Physically Defective Children	27-28
Physical Training	20-22
School Hygiene	9
Secondary Schools	30-31
Special Inquiries	32
Special Schools	29-30
Staff	5, 9
Summary of Work	6
Tables	34-43
Treatment	12-18, 31
Tuberculosis	11, 17, 28
Uncleanliness	10-11, 12
Visual Defects and External Eye Disease	11, 13

WEST BROMWICH EDUCATION COMMITTEE,

at 31st December, 1938.

Chairman—

Alderman C. S. BACHE, J.P.

*Deputy-Chairman—*Councillor C. B. ADAMS, J.P.

**ATTENDANCE AND MEDICAL SERVICES
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Mr. J. LAWLEY.

Director of Education—

LEONARD G. ROSE, B.Sc.

STAFF OF SCHOOL MEDICAL DEPARTMENT.

School Medical Officer	...	...	W. S. WALTON, M.D., B.Hy., D.P.H.
Deputy School Medical Officer	...	...	J. G. S. McQUEEN, M.D., Ch.B., D.P.H.
Assistant	„	„	W. W. WILDMAN, M.B., Ch.B., D.P.H. (Till 30/9/38)
Assistant	„	„	L. R. L. EDWARDS, M.R.C.S., L.R.C.P., D.P.H. (From 1/11/38)
Consultant Ophthalmic Surgeon			CHARLES RUDD, M.B., Ch.B.
„	Aural Surgeon	...	F. BRAYSHAW GILHESPY, M.R.C.S., L.R.C.P.
„	Orthopædic Surgeon	...	J. B. LEATHER, F.R.C.S., M.R.C.S., L.R.C.P.
Dental Surgeons	...	...	B. D. BRITTEN, L.D.S. MISS M. COOK, L.D.S.
School Nurses	...	...	MISS C. TWIST (Superintendent). „ M. W. POLE. MRS. L. A. BRYAN. MISS A. CLEGG. „ M. E. GREASLEY. „ M. E. JONES. „ E. J. JACKSON. „ A. WILSON. „ G. GEDRYCH.
Clinic Nurses	..	...	MISS B. E. FISHER. „ H. M. HAYES.

Clerical Staff.

Clerk	...	...	MISS D. BROMLEY.
„	...	...	„ R. I. TURNER (Till 17/9/38).
„	...	...	„ E. SHAKESPEARE
Clerk and Dental Attendant	...	„	D. MATTHEWS.
„	„	„	„ M. ADAMS.

SUMMARY OF WORK.

	1937.	1938.
A. Medical Officers at Schools—		
Routine inspections at Elementary Schools ...	3,702	3,661
Routine inspections at Secondary Schools ...	359	373
Special inspections at Elementary Schools ...	82	104
Re-inspections at Elementary Schools ...	2,117	1,002
Re-inspections at Secondary Schools ...	27	68
B. Medical Officers at Clinics—		
Inspections at Clinics ...	3,376	3,335
Re-inspections at Clinics ...	3,551	3,579
Inspections under Employment of Children Bye-laws ...	1	3
C. Dental Officers—		
Routine inspections at Elementary Schools ...	8,829	9,766
Special inspections at Schools and Clinics ...	61	69
Attendances for treatment ...	6,444	6,996
D. School Nurses' Visits, etc.:—		
Visits to Schools ...	677	664
Examinations in Schools (including cleanliness inspections) ...	32,113	30,413
Visits to Homes ...	918	865
Treatments of minor ailments in Clinics ...	21,973	22,553
Treatments of orthopædic defects in Clinic ...	1,244	1,648

GENERAL INFORMATION.

	1937.	1938.
Population (estimated mid-year) ...	82,330	not available
Elementary Schools (including Special Schools)—		
Number of Schools ...	21	21
Number of Departments ...	48	46
Number on Rolls ...	12,906	12,543
Average Attendance ...	11,620	11,556
Schools for Higher Education—		
Boys ...	1	1
Mixed ...	2	2
Number on Rolls ...	500	533

	1936-37.	1937-38.
Cost of School Medical Service—		
Total Cost (Gross) ...	£4,913	£5,022
Government Grant ...	£2,294	£2,389
Cost to Rates ...	£2,345	£2,390
Product of a Penny Rate ...	£1,376	£1,387
Cost in terms of a Penny Rate ...	1.704d.	1.723d.

SCHOOL MEDICAL SERVICE.

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



MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit to you the Annual Report on the work of the School Medical Service during 1938.

Infectious disease was generally less prevalent than in the previous year. As far as the West Bromwich Schools are concerned the spot-light of possible prevention, though not obvious to all parents, remains focussed on diphtheria. There were 127 cases of which 8 proved fatal. In March an immunisation campaign was commenced and with the excellent help of head teachers approximately 2,000 children were immunised, or practically one sixth of all the school children in the town.

The recommendations of the Board of Education, following on the inspection made in late 1937, were considered further. It was decided not to hold periodical nutrition surveys but to rely on a regular graphic recording of heights and weights of all school children. This scheme involves the plotting of both height and weight measurements each term. Importance is attached to the maintenance, throughout school life, of a normal increment and a "West Bromwich" normal curve is printed on each card for comparative purposes. The "West Bromwich Normal" was calculated over a large number of cases and was described in my annual report for the year 1936. The scheme has proved of great interest to teachers and to the children; the value has been shown in the improved ascertainment and reference of children by head teachers to the medical officers.

The orthopaedic scheme was transferred to Hallam Hospital at the suggestion of the Board of Education, and Mr. J. B. Leather was appointed part-time Consultant and Operative Orthopaedic Surgeon. A further recommendation

was carried out when two electric dental engines were installed. The possibility of providing an open-air school was considered, but deferred for twelve months.

I would draw your attention, once again, to the number of children who were found to fall much short of the general average standard of nutrition (Table "B", Page 36). The sub-normal group numbers 642 against 583 last year, but the "D" group, or those who fall very much short of the average nutrition, numbers 72, while 43 was the figure for 1937. You have amended the income scale for free milk, which now brings in many cases previously excluded, but I am doubtful whether even this will prove sufficient and it may become necessary, after further trial, to investigate other means of solving this serious problem. The Manager of the Unemployment Exchange informs me that within the Borough there are over 2,000 persons unemployed and another 2,000 persons on short time.

It is with regret that I have to report that the erection of the much needed Stone Cross Clinic has not yet commenced. The preparations have been completed and loan sanction obtained.

The cost to the rates of the School Medical Service, for the financial year 1937-1938, was £2,390, or £45 more than in 1936-37, and £81 less than in 1935-36. The number of children on the rolls has fallen from 12,864 in 1936 to 12,543 in 1938.

I have to thank the Director of Education (Mr. L. G. Rose) and his staffs for supplying certain information relevant to this report. It is also my pleasant duty to place on record acknowledgment of the help and courtesy which I have received from members of the Committee and also the efficient service of my staff.

I have the honour to remain,

Your obedient servant,

W. S. WALTON.

2, LODGE ROAD,
WEST BROMWICH.

School Medical Officer.

REPORT.

I.—STAFF.

Owing to marriage the clerical staff was deprived in September of the services of Miss R. I. Turner. By a slight rearrangement the vacancy was filled by Miss Shakespeare, who until then was Dental Attendant. Miss M. Adams, Junior Clerk, was promoted to this latter post.

II.—CO-ORDINATION.

The arrangements for the co-ordination of the School Medical Department with other Health Services and Voluntary Agencies in the Borough were given in detail in the Report for 1932 and have continued on the usual lines.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

III.—SCHOOL HYGIENE.

During the year the Local Education Authority completed the programme of modernising the old Council Schools in the Borough, under the provision of Circular 1444.

Consequent on Slum Clearance and reduced numbers the Board of Education gave their consent to the re-modelling and re-organisation of Greets Green School in two Departments for Junior Mixed and Infant pupils.

A re-allocation of accommodation has been effected; electric light has been installed; interior sanitation for the Staff and separate flush pedestals have been provided for the pupils, and ventilation and light have been improved.

The roof of the School has been re-tiled, cloak-room accommodation has been improved and extended, and provision made for Nursery Instruction in the Reception Room in the Infants' Department.

IV.—MEDICAL INSPECTION.

The arrangements for medical inspection were similar to previous years. The three code groups, Entrants, Intermediates, and Leavers were dealt with. The number of visits to schools for the purpose of carrying out routine inspection was 143.

The figures relating to medical inspection are shown in Table I., page 34. The number of routine medical inspections was 3,661, as compared with 3,702 during 1937, and the number of special inspections and re-inspections was 8,818 in 1938, against 9,126 during 1937. 1,002 children were re-examined during the year, of whom 483 showed improvement.

V.—FINDINGS OF MEDICAL INSPECTIONS.

The detailed figures relating to the number of defects found as a result of medical inspection are printed in Table II., pages 35-36. The term "special" refers to medical examinations, at either schools or clinics, of children presented for some reason other than for routine medical inspection. Practically all such cases were dealt with at the inspection clinics held two afternoons per week at the Central Clinic, one afternoon at Hamstead, and one morning at Charlemont.

Routine Medical Inspections.

The following table shows, over a period of three years, the percentages of children found to have defects requiring treatment (excluding malnutrition, dental diseases and uncleanliness).

Code Groups.	West Bromwich.		
	1936.	1937.	1938.
Entrants	11.69	13.73	12.57
Intermediates	12.72	14.62	15.01
Leavers	19.33	19.04	20.38
All Groups	14.35	15.99	16.12

The table set out below shows the percentages (excluding uncleanliness and dental diseases) for the corresponding three-year period ten years ago.

Code Groups.	West Bromwich.		
	1926.	1927.	1928.
Entrants	30.5	20.2	21.9
Intermediates	24.3	23.7	27.8
Leavers	29.8	23.7	24.7
All Groups	28.5	22.2	25.1

(a) Malnutrition.

It will be seen from Table II. B. that out of 3,661 children examined, 642 or 17.54% were of slightly subnormal nutrition while 72 or 1.97% were badly nourished. The comparative figures for 1937 were 583 or 15.75%, and 43 or 1.13%.

(b) Uncleanliness.

In view of the arrangements for routine cleanliness inspections by the nursing staff, figures showing the state of cleanliness at routine medical inspection are not given in

Table II. A clearer conception of the work undertaken, and the findings at such surveys compared with 1937, will be obtained from a review of the following summary in conjunction with the figures given in Table VI., page 42.

Cleanliness Surveys.		1937.	1938.
Number of examinations of children		32,113	30,413
Number of individual children found unclean		1,264	1,030
Number of visits to Schools		201	183
Number of visits to Homes		285	199

(c) **Minor ailments and diseases of the skin.**

As stated in Table II., pages 35-36, 29 defects of this nature were found at Routine Inspections and 380 at Special Inspections. Two cases of ringworm of the scalp were found but impetigo and scabies were, unfortunately, rather prevalent.

(d) **Visual defects and external eye disease.**

Out of 3,661 children examined at Routine Inspections, 267, or 7.29%, were found to have squint or defective vision; 43, or 1.17%, had external eye disease.

(e) **Nose and throat defects.**

Details are shown in Table II., pages 35-36. It will be observed that of 3,661 children examined at Routine Inspections, 364 were found to have defects of this nature.

(f) **Ear disease and defective hearing.**

Details are shown in Table II., pages 35-36.

(g) **Dental defects.**

A perusal of Table V., page 42, shows that the dentists devoted 50½ half days to inspection and inspected 9,766 children; of these 6,588 required treatment.

(h) **Orthopædics and postural defects.**

Nine cases of spinal curvature were discovered during the year. These were postural defects of slight character and were recommended for remedial exercises at Hallam Hospital.

(i) **Heart disease and rheumatism.**

3,661 children were examined at Routine Inspections, 36 cases of organic heart disease and 45 cases of anaemia were discovered.

(j) **Tuberculosis.**

Ten cases of either definite or suspected pulmonary tuberculosis and 6 cases of non-pulmonary tuberculosis were discovered as a result of routine or special inspections during the year. All of these were notified to the Tuberculosis Department for appropriate action.

(k) **Other defects and diseases.**

Details of the incidence of other defects are to be found in Table II.

VI.—FOLLOWING-UP.

Medical Officers, School Nurses, Head Teachers and Attendance Officers shared in the work of following-up defects.

The number of visits by Nurses to homes in this connection was 666; 330 visits were paid to schools.

Under the scheme for cleanliness inspections, Nurses made 199 visits to homes, and carried out 1,764 re-examinations in schools.

Thanks are due to the Head Teachers for the personal interest they have taken in the children recommended for treatment, and for the efforts made in persuading hesitant parents to accept the treatment offered.

VII.—ARRANGEMENTS FOR TREATMENT.(a) **Malnutrition.**

All cases of malnutrition requiring additional nourishment falling within the Authority's income scale were recommended for free milk under the Scheme, particulars of which were given in the Report for 1934.

(b) **Uncleanliness.**

It was not found necessary during the year to treat any cases at the Cleansing and Disinfecting Station. No legal proceedings were taken by the Education Committee in connection with cases of uncleanliness.

(c) **Minor ailments and diseases of the skin.**

The Education Committee provided treatment for minor ailments and skin diseases at the following centres:—

THE CENTRAL CLINIC.

Lombard Street West. Open Daily.

SUB-CLINICS.

Hill Top	...	...	Monday afternoon. Friday morning.
Boulton Road	...	...	Tuesday morning. Thursday morning.
Greets Green	...	...	Tuesday morning. Thursday afternoon.
Charlemont	...	...	Monday morning. Wednesday morning. Friday morning.
Hamstead	...	...	Friday morning.

Nurses carry out treatment at all these Clinics. On Tuesday and Friday afternoons a Medical Officer attends at the Central Clinic, on Wednesday morning at Charlemont, and alternate Friday afternoons at Hamstead. The Sessions each week at which a Medical Officer attends are combined Inspection and Minor Ailments Clinics.

From Table IV., Group 1, page 40, it will be seen that 2,328 cases of minor ailments and 1,338 cases of skin disease were treated during the year, compared with 1,890 and 1,208 respectively during the previous year.

The arrangements for treatment of ringworm by X-ray were amended during the year. This work is now carried out at the Birmingham & Midland Skin Hospital. Two cases were treated in 1938.

(d) Visual defects and external eye disease.

An Ophthalmic Clinic is held at the Central Clinic eight times during the year, at which cases of defective vision and special eye diseases are dealt with by the Ophthalmic Specialist. In addition, the Deputy School Medical Officer carries out refractions on one session per week at the Central School Clinic.

From Table IV., Group II., it will be observed that out of a total of 423 cases of defective vision and squint dealt with during the year, 416 accepted treatment under the Authority's Scheme. This compares with the previous years, as follows:—

1933.	1934.	1935.	1936.	1937.	1938.
665	655	559	470	424	416

During 1938, 310 pairs of spectacles were supplied under the scheme.

The treatment of external eye diseases is carried out at the Minor Ailments Clinics, 315 defects were dealt with (vide Table IV., Group 1).

(e) Nose and throat defects.

Particulars were given in detail in the Report for 1932. During the year 131 cases were dealt with at Hallam Hospital.

(f) Ear disease and defective hearing.

The Ear Clinic was continued on Monday mornings at the Central Clinic by the School Medical Officer: 177 children attended, of whom 38 were reported as cured. The total number of children treated for ear defects at the various clinics was 315.

Very favourable results were attained in the treatment of ear disease by zinc ionisation. There is no doubt that the period of treatment is very definitely shortened. The number treated by this method during the year was 28, of whom 15 were cured.

(g) **Dental defects.**

The Dental Surgeons report as follows:—

The outstanding feature of the School Dental Service during the year has been the increase in the conservancy work. The total number of fillings done in the year was 7,115, an increase of 1,676 since 1937, and compared with 1935 the figure has risen from 2,593, while the number of extractions has diminished by 600 during the same period. These remarkable figures are a sure indication that the parents of West Bromwich are realising the value of conservative treatment. As it was impossible to finish the treatment of many cases in one visit there was a corresponding rise in the number of attendances made.

The children now in the Junior Schools are showing the good results of constant care of the teeth from babyhood, first at the Infant Welfare Centres and then in the Infant Schools. These children should pass into the Senior Schools with their teeth in good condition and the need for dental treatment, with consequent loss of school time, will be much lessened as time goes on. Already, since the present dental scheme was inaugurated in 1935, the number of children found at the inspections to have perfect teeth has increased considerably, and this is most noticeable round about the 10 and 11 age groups.

The parents, too, are becoming more interested in the care of the children's teeth. Thanks for co-operation are due to the School Medical Officers, who are able to point out the injurious effects of bad teeth on general health. It is very noticeable that parents who "do not believe in dental treatment" often are converted to it by a doctor's advice.

The treatment of pre-school children was continued, 186 cases being dealt with during the year. All children treated under the Maternity and Child Welfare Scheme will start their school life without any dental troubles, consequently they will be less liable to minor ailments such as colds, and to infectious diseases, thus avoiding loss of school time.

Again, several children have been fitted with dentures. In these cases it is usually found that some defect in the diet is a contributory cause of bad calcification of the teeth. On enquiry there is generally a history of refusal to eat fruit and

green vegetables. This may not be the cause of the poor dentition but it seems to be a feature which is present in almost every case.

There has been an improvement this year in the keeping of appointments, though greater punctuality would save much waste of the children's school time.

(h) **Orthopædics and postural defects.**

The treatment of orthopaedic defects at the West Bromwich and District Hospital was continued until the latter part of the year, when the scheme was amended and transferred to the Hallam Hospital, still under the supervision of Mr. J. B. Leather, the Orthopaedic Surgeon.

Analysis of cases treated:—

	1937.		1938.	
	Boys.	Girls.	Boys.	Girls.
Number of Cases	24	22	23	20
Number of Consultations	47	40	42	35
Number of Children In-Patient	3	1	7	1
Number of Children on Massage	7	8	10	9
Number of Attendances	310	149	250	413
Number of Children X-Rayed	5	4	4	4
Number of Children fitted with irons, plaster cases, etc.	7	4	5	5

NATURE OF DEFECT.	1938.					
	Boys.			GIRLS.		
	No.	Consul- tation.	Mas- sage.	No.	Consul- tation.	Mas- sage.
Scoliosis	—	—	—	1	3	87
Torticollis	—	—	—	1	1	10
Infantile Paralysis	2	6	137	—	—	—
Hallux Valgus	1	3	—	3	5	101
Bilateral Bunion	—	—	—	1	2	57
Pes Cavus	1	2	8	2	4	103
Genu Valgum	1	2	46	1	2	26
Pes Planus & Genu Valgum	1	3	—	—	—	—
Talipes Equino Varus	1	1	—	—	—	—
Hemiplegia	3	4	—	1	2	—
Perthe's Disease	—	—	—	1	1	—
Old Dislocation—Left Hip	1	1	—	—	—	—
Pathological Dislocation —Left Hip	1	1	—	—	—	—
Congenital Absence —Right Fibula	—	—	—	1	3	—
Osteoma—Right Humerus	1	1	—	—	—	—
Old Tubercular Hip	—	—	—	1	5	—
Spastic Diplegia	2	4	11	—	—	—
Exostoses Femur	1	2	—	—	—	—
Multiple Exostoses	—	—	—	1	1	—
Syndactyly	1	3	18	2	—	29
Miscellaneous	6	9	30	4	5	—
	23	42	250	20	34	413

DETAILS OF IN-PATIENT TREATMENT.							No. of Days In-Patient. 1938.
No. of Children.	Defect.						
1 Boy	Contracture	Plantar	Fascia	...	...	...	4
1 Boy	Pes Cavus	...	...	...	...	...	8
1 Boy	Bilateral	Talipes	Equino	Varus	...	...	12
1 Boy	Infantile	Paralysis	...	...	...	...	5
1 Boy	Osteoma	Right	Humerus	...	...	...	11
1 Boy	Spastic	Diplegia	...	...	...	...	5
1 Boy	Cuneiform	Arthritis	...	...	...	...	10
1 Girl	Syndactyly	...	...	...	...	...	80
Total							135

The Remedial Exercise Clinic was continued in the Massage Department, Hallam Hospital. Children referred attended three times per week. The arrangements worked smoothly and results have been very satisfactory.

SUMMARY OF WORK AT REMEDIAL EXERCISES CLINIC DURING 1938.

Number of Sessions	...	...	...	...	151
Number of Attendances	...	...	...	...	907
Number of Patients, G.12, B.24	...	...	...	...	36
Discharged	...	...	...	...	13
Left School or District	...	...	...	...	3
Remaining on Books	...	...	...	...	20

CLASSIFICATION OF DEFECTS FOR WHICH TREATMENT WAS UNDERTAKEN.

Scoliosis	...	...	...	...	...	2
Kyphosis	...	...	...	...	...	1
Poor Posture	...	...	...	...	...	21
Pes Planus	...	...	...	...	...	3
Hemiplegia	...	...	...	...	...	1
Paresis	...	...	...	...	...	1
Miscellaneous	...	...	...	...	...	7
Total						36

(i) **Heart disease and rheumatism.**

The special clinic was conducted during the year on the usual lines; the cases attending were classified as follows:—

	Cases.		Attendances.	
	B.	G.	B.	G.
(1) Rheumatic pains or Arthritis:				
(a) with heart affection ...	25	19	28	26
(b) without heart affection ...	4	10	7	15
(2) Rheumatic Chorea:				
(a) with heart affection ...	4	6	8	13
(b) without heart affection ...	5	14	7	19
(3) Rheumatic Carditis:				
without (1) or (2) above ...	10	17	19	29
(4) Congenital Heart Disease ...	6	11	5	14
(5) Functional Heart Disorder ...	6	1	7	3
(6) Heart Disease only ...	2	1	7	3
(7) No Rheumatism or Heart Disease or Disorder ...	16	10	19	15
Totals	78	89	107	137

(j) **Tuberculosis.**

The following children were treated under the Orthopaedic Scheme.

	1937.		1938.	
	Boys.	Girls.	Boys.	Girls.
Number of Cases ...	1	1	2	—
Number of Out-Patient Attendances	2	—	8	—
Number of Children In-Patient ...	—	1	—	—
Number of Children on Massage ...	—	—	1	—
Number of Attendances ...	—	—	78	—
Number of Children X-rayed ...	2	—	2	—
Number of Children in Woodlands or Forelands Hospitals for In-Patient Treatment ...	3	1	3	—

The Tuberculosis Committee accepted responsibility for one boy and one girl who received operative treatment at the Woodlands apart from the Orthopaedic Scheme.

(k) Treatment by Artificial Sun-light.

An Ultra-violet Light Clinic is held in the Anti-Tuberculosis Dispensary at the Health Department, Lodge Road. Maintenance charges are borne jointly by the Tuberculosis, Maternity and Child Welfare, and Education Committees. Each Committee contributes according to actual usage based on the number of exposures.

Treatment is administered by the Tuberculosis Sister who is in charge of the Clinic. The Medical Officer of Health attends on Wednesday afternoons, when all new cases are seen and cases under treatment reviewed.

Cases referred by School Medical Officers, except cases of tuberculosis, are treated on Monday and Friday afternoons.

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

SUMMARY OF WORK AND RESULTS OF TREATMENT AT
ULTRA-VIOLET LIGHT CLINIC DURING 1938.

Number on Register on 31st December, 1937	15
Admitted during 1938	51
Discharged during the year	58
Number on Register, 31st December, 1938	8
Number of attendances made	1076

Defect	Cured	Much Impd.	Impd.	No Impt.	Un-suitable	Ceased or Failed to Attend	Ref. own Doctor or Hosp.
Abscess	—	1	—	—	—	—	—
Alopecia	2	—	1	—	—	—	—
Anaemia	1	—	—	—	—	—	—
Asthma	—	—	1	—	—	—	—
Bronchitis	—	7	3	1	—	1	—
Catarrh	—	3	1	—	1	1	—
Chorea	—	1	—	—	—	—	—
Croupy Cough	—	—	1	—	—	—	—
Debility	4	1	1	3	—	1	—
Glands—Cervical	3	1	—	1	—	—	1
Malnutrition	3	3	3	4	—	—	—
Otorrhoea	—	1	—	—	—	—	—
Skin Sepsis	1	1	—	—	—	—	—
TOTAL ..	14	19	11	9	1	3	1

VIII.—INFECTIOUS DISEASES.

There has been no alteration during the year in the arrangements for the control of infectious diseases in schools.

The Diphtheria Immunisation Clinic was continued at the Central School Clinic, on Saturday mornings.

During the early part of the year a campaign advertising the benefits of Immunisation was commenced. Through the medium of head teachers, leaflets and the press, the attention of parents was drawn to the facilities offered by the Corporation. As a result approximately 2,000 children were immunised. Most of the head teachers entered enthusiastically into the promotion of the scheme, and as the organisation of this treatment involved considerable disturbance of the normal routine in the schools, I am very grateful to them for their splendid co-operation. In connection with the control of Diphtheria 430 throat swabs taken from school children were examined bacteriologically by your Medical Officers, of these 44 were positive.

Tabulated below are figures showing the incidence of the Notifiable Infectious Diseases during the four quarters of the year. These refer to school children only. The subjoined part of this table, giving figures for Non-notifiable Infectious Diseases, was compiled from the Weekly Sickness Returns sent in by Head Teachers.

Incidence of Infectious Diseases.

Disease.	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total 1938	Total 1937
Scarlet Fever ...	19	14	25	54	112	76
Diphtheria ...	33	33	30	31	127	143
Erysipelas ...	—	—	—	1	1	5
Pneumonia ...	9	6	2	3	20	22
Meningococcal Meningitis	—	—	—	2	2	—
Sonné Dysentery ...	4	2	—	—	6	—
Measles ...	8	16	5	5	34	432
Whooping Cough ...	37	22	7	16	82	300
Chicken-Pox ...	23	31	12	69	135	610
Mumps ...	24	17	6	21	68	280
Influenza (including colds) ...	2585	2658	1210	2167	8620	10383

Scarlet fever was more prevalent during the year. The disease was of a fairly mild type and there were no resultant deaths. The number of cases of diphtheria remains high and it is regrettable to report that there were eight deaths. Measles, chicken-pox, whooping cough and mumps were much less prevalent during the year.

It was not found necessary to issue a certificate under Article 23b of the Education Code.

Mortality in School Children.

The table which follows is of interest; it deals with the causes of death of children between the ages of 5 and 15 years.

There was one death from drowning and three from traffic accidents during the year.

Causes of Death in School Children, 1938.

Disease or other Cause.		Number.	Percentage of deaths from all causes	
Common Infectious Diseases	{ Measles	—	21·05	}
	{ Scarlet Fever	—		
	{ Diphtheria	8		
	{ Whooping Cough	—		
Tuberculosis	{ Pulmonary Tuberculosis ...	—	7·89	}
	{ Tuberculous Meningitis ...	1		
	{ Other forms of Tuberculosis	2		
Respiratory Diseases	{ Bronchitis	—	15·79	}
	{ Pneumonia—all forms ...	5		
	{ Other Respiratory Diseases	1		
Diseases of Alimentary Tract	{ Nephritis	2	21·05	}
	{ Appendicitis	1		
	{ Peritonitis	5		
Violence	{ Drowning	1	10·52	}
	{ Traffic Accidents	3		
	{ Burns	—		
Heart Disease	{ Rheumatic	—	5·26	}
	{ Pericarditis	1		
	{ Endocarditis	1		
Asphyxiation	—	—	—	—
Meningitis	—	—	—	—
Other Defined Diseases	7	18·42	18·42	
Total		38		

This compares with 28 deaths in 1937.

IX.—OPEN-AIR EDUCATION.

There are no Open-air Schools in the Borough, but in some cases instruction is given during the summer months in the school playgrounds or in adjacent parks. Such instruction only touches the fringe of what might be possible.

X.—PHYSICAL TRAINING.

Report of the Physical Training Organisers.

(Mr. A. F. Probst and Miss M. B. Harrison).

(a) General.

We are pleased to report that Physical Education continues to develop satisfactorily in the Schools, there being a great improvement in foot-work and foot mobility, which is due to a further supply of plimsolls from the grant made

by the Education Committee for footgear. This provision of suitable foot-gear has been a long felt necessity and already the good results shown, prove its value. The schools which now have a change of clothing for physical training as well as plimsolls are approaching the ideal.

During the year, Refresher Courses were held in the Secondary School Gymnasium on Wednesday afternoons for teachers from Infants, Junior and Senior Schools in the Borough, and the co-operation of Head Teachers in allowing members of their Staffs to leave School early in the afternoon in order to attend, is greatly appreciated.

Attention was given during these classes to special foot exercises both for mobility and strengthening of foot muscles and it is hoped that with their inclusion into the physical training lesson there will be less evidence of flat feet in the Schools.

(b) **Youth Organisation.**

This Organisation in West Bromwich has grown considerably since its establishment about two years ago, most organisations in the town being affiliated to it. The Youth Organisation has been of great help to these clubs, in some cases finding Playing Fields and in others Leaders to take classes.

Much work was put in for the second Rally held in Dartmouth Park last September. Many more enthusiastic young people took part this year than last, and it was very disappointing that heavy rain spoilt the Rally, but the performance was carried through to the end, for which all participating deserved congratulation for their enthusiasm.

During November last, two Representatives from the Central Council of Recreative Physical Training again visited West Bromwich. Their visit was a very useful one and we gratefully appreciate the help they gave in visiting existing classes and also in holding Leaders' and Open Classes in the town.

(c) **Swimming.**

1938 saw the opening of the new Swimming Baths with the extended facilities they now provide for the Elementary Schools. From May until the end of September the "Learners' Bath" and the "Second Class Bath" were reserved throughout the week during School hours for the

exclusive use of school children. In the "Learners' Bath" the number in each class was 25 plus two helpers, and this proved very satisfactory both from the teaching point of view and from results. In the "Learners" section, by the end of the season, 1,307 had been taught to swim. Detailed results are as follows:—

Number to swim two Lengths ("Learners' Bath")	622
" " " one Length	163
" " " one Width	272
" " " a few strokes	250

During the coming Season it is evident that much greater use will be made of the "Second Class Bath" as there are now children in the Schools who are ready to progress to more advanced swimming. The results for the year 1938 in the "Second Class Bath" are as follows:—

Number to swim 100 yards	291
" " " 50	207
	—
Total	498
	—

The Teachers responsible have shown keenness and ability in Class Instruction, and the good results prove the efficiency of their work.

A detailed report on the Swimming Scheme was submitted to the Education Committee in September 1938.

In conclusion we wish to express our sincere appreciation to the Chairman and Members of the Education Committee—to the Director of Education for his helpful advice, and to his Staff for their kind assistance in many ways. Our thanks are extended to all Head Teachers and their Assistants for their close co-operation in all branches of Physical Education.

XI.—PROVISION OF MEALS.

(a) Provision of Milk under the Authority's Scheme.

The scheme for the provision of free milk for necessitous malnourished children continued in operation throughout the year.

Under the scheme each child receives one pint of milk daily—half-a-pint each morning and afternoon. Children receiving free milk are examined at three-monthly intervals

by one of the School Medical Officers and a weekly record of height and weight of each child is kept by the Head Teachers. There is no provision for issue of free meals.

At the end of December, 1938, 222 children were receiving milk under the scheme, as compared with 130 children on the corresponding date in the previous year.

REPORT ON NUTRITION.

By Dr. J. G. S. McQUEEN.

The investigation into the beneficial effect of the provision of milk in school, which was carried out last year, was continued during 1938. Two groups of children were compared, one of which was in receipt of free milk in school while the other had no milk.

As before the letters B. C. and D., represent the Board of Education's classification of "normal," "slightly subnormal" and "bad nutritional state" respectively, and "stationary" means no gain in weight or a gain less than that which is usual over a given period. "Improved" means a gain at least as much as usual, while "Very much improved" means a gain considerably more than is usual.

For the purpose of comparison in the following tables the figures are given for 1937 and 1938.

Comparison of Progress of Children Receiving Milk with those not taking any Milk.

	Stationary				Improved				Very much Improved						
	B.	C.	D.	Total	B.	C.	D.	Total	B.	C.	D.	Total			
On Free Milk															
1937	1	16	8	25	27%	1	27	12	40	42%	2	21	6	29	31%
1938	...	28	16	44	31%	...	39	17	56	39.5%	...	27	15	42	29.5%
Not having any milk in School															
1937	...	2	19	21	40%	...	2	18	20	36%	...	3	8	11	21%
1938	...	7	7	14	54%	...	4	5	9	34.5%	...	3	...	3	11.5%

It will be seen that the figures for 1938 continue to show the superiority of the children having free milk over those not having milk. Thus 69% of the former group showed improvement while only 46% of the latter group improved and 29.5% of the children having milk showed great improvement as against only 11.5% of the children who did not have milk.

Undernourished Children	On Discovery or Brought Forward		Remained in same class		Advanced		Retrogressed C-D.
	C.	D.	C.	D.	C-B.	D-C.	
Having Free Milk							
1937	61	30	88.5%	56.6%	3.28%	43.3%	8.2%
1938	95	47	55.79%	40.42%	42.1%	59.57%	2.11%
Not having any milk in School							
1937	9	53	66.6%	71.7%	11.1%	28.3%	22.2%
1938	14	12	64.28%	50%	35.71%	50%	—

Consideration of the movements of children within the various nutritional classes as shown in the above table, does not yield such conclusive evidence of the superior improvement of the children having milk, but even here the figures are in their favour.

It will be noticed that while the number of children in receipt of free milk, whose records are available for analysis, has increased, the number of undernourished children who have no milk in school has decreased to such an extent that it is doubtful whether it is sufficient for the purpose of this analysis. This is undoubtedly due to the higher home-income level at which free milk becomes available for undernourished school children since the scale was revised in March. As a result of this, and of the continued popularity of the Assisted Milk Scheme, there are now very few children indeed who are undernourished and are still not in receipt of milk.

In order to make sure that the ascertainment of malnutrition among school children in the Borough is complete, a scheme has been introduced whereby each child is weighed and measured by the teacher three times each year at intervals of four months, the results being recorded on a card which will follow the child throughout his school life. The reverse side of this card is provided with graphs showing the average height and weight curves of West Bromwich school children. It is intended that each child's own height and

weight curves will also be plotted on the graph and so will be readily comparable with the average curves. Any child whose height and weight shows a marked departure from the average will then be reported to the School Medical Officer for investigation. It is hoped that this card will act as a guide to the teacher in referring cases, but is not intended to preclude the reference of cases for other reasons.

While the primary object of the scheme is the ascertainment of malnutrition, the records provided by the cards will undoubtedly make an interesting study as they accumulate.

(b) **Provision of Milk under the Voluntary Scheme.**

The supply of milk to school children under Section II. (i) of the Milk Act, 1934, was continued during the year and 3,777 children partook of approximately 780,233 bottles of milk which were supplied as against 700,800 bottles during 1937.

Thanks must be given to the Head Teachers for their continued co-operation in the administration of these schemes, which have entailed a substantial addition to the routine work in the schools.

XII.—CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

(a) **Co-operation of Parents.**

The continued and increasing appreciation of parents in the efforts of the School Medical Service for the welfare of their children is clearly manifested by the fact that 74% attended at Routine Medical Inspections. There appears to be a definite desire on the part of parents to have the defects of their children remedied.

(b) **Co-operation of Teachers.**

Once again the greatest tribute must be paid to the valuable assistance rendered by teachers to the School Medical Department. The success of the work of any School Medical Service depends on the support of teachers to an extent which is fully realised only by those connected with that service, and it is pleasing to find that the support accorded in West Bromwich is of a most cordial nature.

1. Medical and Dental Inspections.

Much careful help has been rendered by Head Teachers to the Medical Officers, Dentists and Nurses in ensuring that these inspections run smoothly, and that the parents and children are admitted to the Medical Officer and Dentist in a systematic manner. In this way is the goodwill and co-operation of the parent engendered, the examination carried out with efficiency, and valuable school time saved.

2. *Following-up.*

The painstaking work undertaken by Teachers to encourage parents to have defects corrected is referred to in another part of this Report.

3. *Medical and Dental Treatment.*

There is still a tendency on the part of some Head Teachers to regard the Clinic as being solely concerned with minor ailments. The Clinic, when Medical Officers are in attendance, is also an Inspection Clinic, viz., open to give advice to Teachers and Parents in a very large variety of cases, even although there is no facility for the treatment of certain of these cases at the Clinic.

(c) **Co-operation of School Attendance Officers.**

The School Attendance Officers continue to prove of great assistance in many directions. Lists of cases of long absence from school are submitted periodically and these have proved of the greatest help in bringing to the notice of the Department certain cases of exceptional children.

(d) **Co-operation of Voluntary Bodies.**

During the year the Cinderella Club has rendered valuable assistance to the Department by sending 3 necessitous cases to convalescent homes for periods varying from two to six weeks.

The Poor Children's Welfare Society has given noteworthy assistance by sending 24 cases for a period of one month to the North of England Children's Sanatorium, Southport, during the year. In addition, this Society distributed 396 pairs of boots to necessitous children, making a total of 7,375 pairs since the Society was registered in 1925. The distributions were continued at the Central Clinic, Lombard Street West.

By permission of the Education Committee the members of the Rotary Club again arranged for 40 poor boys to go to a seaside camp.

This Camp is stationed at Swanage in Dorsetshire, and is situated in a very healthy and picturesque position on the Downs above the town, overlooking Swanage Bay and Poole Harbour. The climate is very bracing and it is most gratifying to see the gradual improvement which takes place in the health of the boys after they have been in residence only a few days. To be able to wander over the Downs at will and to enjoy the stretches of good sand, which nearly always are available in Swanage Bay, is a great thrill for boys who are visiting the seaside for the first time.

Numerous excursions are arranged, such as visits to Corfe Castle, Durlston Head, Bournemouth, etc., and every endeavour is made to make the holiday of educational value. The Camp is supervised by Rotarians who volunteer to look after the boys for varying periods during the fortnight they are resident in Swanage.

The Camp is undoubtedly of very great benefit from the health point of view to those boys who are fortunate enough to be selected, and it is hoped that it will be possible in the future to extend the facilities so that a larger number of boys may have the opportunity of enjoying a fortnight's holiday at the Camp.

The boys partaking in this beneficial holiday were selected from eight senior departments by the S.M.O. in consultation with the Head Teachers, and preference was, in each case, given to boys of inferior health.

The National Society for the Prevention of Cruelty to Children continued to give valuable assistance, especially through the medium of Chief Inspector Pine.

XIII.—BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

The number of children within the scope of the above definitions is printed in Table III., pages 37-39. The Table shows the position at 31st December, 1938, and the children referred to are resident within the Borough or are maintained at the expense of the Education Authority in Special Schools or Institutions outside the area.

(a) Ascertainment and Disposal.

This work has continued on the usual lines during the year.

Blind Children.

Two partially blind children are in the Royal Institution for the Blind, at Birmingham.

Deaf Children.

There are 4 cases of total deafness, 2 boys and 2 girls—all of whom are in the Birmingham Royal Institution for the Deaf.

Mentally Defective Children.

Formal examinations as to Mental Deficiency were carried out in 44 cases, and 18 were re-examined; the findings at these examinations were as follows:—

Imbeciles—Notified to Local Control Authority	2	1
Low-grade Feeble-minded—notified to Local Control Authority	1	1
Feeble-minded	19	15
Dull and Backward	18	1
Normal	4	—
Totals	44	18

The 11 children shown in Table III. as being at no school or institution having attained the age of 14 years had left school. Seven had obtained situations, 1 was unemployed, while 3, who are physically unfit to work, remain at home under supervision.

Epileptic Children.

Two children—1 boy and 1 girl—were maintained at Maghull Colony, Liverpool, during the year. One shown at no school or institution remains at home under parental supervision.

Tuberculous Children.

Of the 4 children shown as “at Certified Special Schools” at the 31st December, 1938, 1 was in the Woodlands and 3 in the Forelands Certified Hospital Schools. Of the three shown “at other Institutions” 2 were in the Borough Sanatorium, and 1 in Hallam Hospital.

Delicate Children.

It should be noted that the group of 83 contains the majority of children who, in ideal circumstances, would be accommodated in open-air schools.

Crippled Children.

Of the 2 children shown as being in Special Schools, 1 is maintained by the Authority at the Halliwick Cripples’ Home, London, and 1 at the Heritage School of Arts and Crafts, Chailey. Of the 6 children shown as at no school or institution, 4 are undergoing orthopaedic treatment, which necessitates their temporary exclusion; two are so crippled as to be unfit for any school at present.

(b) **Supervision of Mentally Defective Children not in Special Schools.**

It will be observed from Table III. that 11 presumably educable mentally defective children are at no school or institution, particulars of these cases are given under the heading, “*Mentally Defective Children.*”

The Table below shows the disposal of children who have passed through the Special Day School for Mentally Defective Children.

	1937.		1938.	
	Boys.	Girls.	Boys.	Girls.
Number in employment	24	21	25	23
Number at home—suitable for occupation centre	1	4	2	2
Number at home—no special occupation	3	3	7	4
Number in Great Barr Park Colony	5	3	5	4
Deceased	—	2	—	—
In Approved School	1	—	1	—
Placed in Training Centre	—	1	—	—
In Residential School	1	—	1	—
Returned to Public Elementary School	1	—	1	—
Permanently excluded on account of ill-health	—	1	—	—
Left the District	1	—	—	—
Unable to trace	1	—	1	2

(c) **Special Schools.**

Junior Practical School

Report by MISS D. GRIFFIN (Headmistress).

The Junior Practical School is fed by the various elementary schools of the Borough, with pupils of ages ranging from 7 to 12+, whose abilities are as varied as their ages.

In the teaching of arithmetic a common ground for all methods can be found in counting and picture numbers. In Reading, however, a common ground is difficult to find. Some of the pupils of this school have been taught by the Phonic System; some by the sentence method; some by the Look-and-Say method; some build words; some recognise odd words; some have no knowledge of reading at all. In all cases the child continues to read along the lines in which progress has been made already, and progresses at his own rate. The range of ability and attainments is very great, for among our fifty pupils are children who recognise no more than two or three letters, and others who can read a newspaper intelligently.

The greatest difficulty met with in the teaching of reading is the fact that the older pupils object to the necessary simplicity of the first steps in reading; and some have been failures so long that they are afraid of the initial effort.

Two cases in particular have been taught to read by very irregular methods. The first, a boy, aged 12+ on admission knew a few letters by name but could connect no sounds with them, nor could he build any words. His one interest was football, and the scores and scorers were his chief topics of conversation. An advertisement novelty in the form of a map of England gave him a basis for his football interest. Towns and cities with teams were marked and he could always supply, verbally, the title of United, City, Town, etc. From this reading of town names a desire to read arose, and before leaving school at 14 he could read fluently school readers and items from the daily papers.

The second boy, also aged 12+ on admission, had no knowledge of letters at all and at the sight of a reader became sullen and obstinate. He frequently visited the cinema and went round the various theatres feeling the hoardings—if they were sticky the programme had been changed. In a free modelling lesson he made the words Rin-tin-tin in plasticine and lost some of his nervousness in telling of the dog's tricks. Following this, film stars' names were modelled and then written. From this peculiar beginning, within eighteen months, this boy became a fluent reader.

These two cases were outstanding successes. Our pupils do not always make such spectacular progress, but in every case every child is given a chance to develop to a normal standard of reading, no matter what irregular methods are used.

XIV.—FULL-TIME COURSES OF HIGHER EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

Under arrangements made by the Education Committee, one blind pupil is being trained in the Birmingham Royal Institution for the Blind, and one epileptic at Maghull Colony, Liverpool.

XV.—NURSERY SCHOOLS.

There are no Nursery Schools in the Borough.

XVI.—SECONDARY SCHOOLS AND OTHER INSTITUTIONS OF HIGHER EDUCATION.

(a) The Municipal Secondary School.

This is a mixed school, the ages of the pupils ranging from 11 to 18 years. At the end of the year there were 258 boys and 195 girls on the rolls.

(b) The Kenrick Technical College.

This is a boys' school and the ages range from 13 to 15 years. The number on the roll at the end of the year was 38.

(c) The Ryland Memorial School of Arts and Crafts.

There is a Junior Art Department for full-time day pupils at this school. It is a mixed school and the ages of the pupils in this department range from 12 to 15 years. The number on the roll at the end of the year was 42; 23 boys and 19 girls.

I.—Medical Inspection.

The arrangements were similar to the previous year. Details of the number of pupils examined and the defects found are shown in Table II., pages 42-43.

II.—Medical Treatment.

The Authority does not generally provide any form of treatment for children attending these schools. Necessitous cases are, however, occasionally treated at the Ophthalmic Clinic, and glasses provided at contract prices. The cost of glasses is recovered from the parents. Two such cases were dealt with during the year. In addition, 12 pupils received Dental Treatment.

The attention of the Supervisors of Physical Education is drawn to defects, such as flat feet and postural defects, which are amenable to treatment by special exercises.

XVII.—PARENTS' PAYMENTS.

- (a) 1. **Orthopædic Treatment, Out-patient and In-patient.**
2. **Operative treatment for Tonsils and Adenoids.**

Charges are made for treatment in accordance with family income and collection is in the hands of the Borough Treasurer.

(b) Spectacles and Dental Fees.

The actual cost of spectacles is charged to parents, but financial assistance is given in necessitous cases. Payments are made at the Central School Clinic; arrears are referred to the Borough Treasurer for collection.

Dental fees are charged, except in necessitous cases, at the rate of 3d. per visit, payment being made at the time of treatment.

The following are the amounts received during the year :

	£	s.	d.
Spectacles	90	12	9
Dental	53	8	6
Orthopaedic Defects } Tonsils and Adenoids }	42	2	3

XVIII.—HEALTH EDUCATION.

This work was continued as outlined in detail in the Report for 1933.

In connection with the National Health Campaign, special efforts of publicity were made with regard to bringing to the notice of the general public the provisions of the School Medical Service.

Grateful acknowledgment is made once more to the services rendered by the local Press.

XIX.—SPECIAL INQUIRIES.

There were no Special Inquiries during 1938.

XX.—MISCELLANEOUS.

Employment of Children.

The following Table gives particulars of licences and registrations for the year 1938 :

(a) EMPLOYED CHILDREN (12-14).

No. of Registrations :	Boys.	Girls.	Total.
Delivery of Newspapers or Milk ...	113	—	113
Errands and Light Duties	47	2	49
Child Performers	3	56	59
No. of Licences surrendered :			
Newspapers or Milk Delivery ...	104	—	104
Errands, etc.	37	2	39

(b) STREET TRADING BY YOUNG PERSONS.

No. of Licences issued	—	—	—
No. of Licences surrendered ...	2	—	2

(c) INVESTIGATING PATROLS.

No. of Patrols undertaken	...	...	...	54
No. of Offences reported	...	...	...	33
No. of Warning Notices issued	...	...	...	14
No. of Employers interviewed	...	...	...	19

(d) PROSECUTIONS.

None.

(e) MEDICAL INSPECTION.

(i) Child-performers are inspected by the Medical Officer before being allowed to take part in theatrical performances.

(ii) Employed children whose physical fitness is in doubt are referred to the Medical Officer for examination.

(f) ACCOMMODATION FOR CHILD PERFORMERS.

No complaints have been received regarding lodgings or accommodation for Child Performers.

STATISTICAL TABLES

ELEMENTARY SCHOOLS.

TABLE I.

RETURN OF MEDICAL INSPECTIONS IN ELEMENTARY SCHOOLS FOR THE YEAR ENDED
31ST DECEMBER, 1938.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :—

Entrants	1,161
Second Age Group	1,239
Third Age Group	1,261
Total	3,661

Number of other Routine Inspections None

B.—OTHER INSPECTIONS.

Number of Special Inspections	3,439
Number of Re-Inspections	5,379
Total	8,818

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE
TREATMENT (EXCLUDING DEFECTS OF NUTRITION, UNCLEANLINESS AND DENTAL DISEASES).

GROUP.	FOR DEFECTIVE VISION (EXCLUDING SQUINT).	FOR ALL OTHER CONDITIONS RECORDED IN TABLE IIa.	TOTAL
(1)	(2)	(3)	(4)
Entrants	1	145	146
Second Age Group	68	119	187
Third Age Group	121	136	257
TOTAL	190	400	590
Other Routine Inspections	—	—	—
GRAND TOTAL	190	400	590

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED
31ST DECEMBER, 1938.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS		SPECIAL INSPECTIONS		
	No. of Defects.		No. of Defects.		
	Requiring Treatment	Requiring to be kept under observation, but not requiring Treatment	Requiring Treatment	Requiring to be kept under observation, but not requiring Treatment	
(1)	(2)	(3)	(4)	(5)	
Skin	Ringworm—Scalp	—	—	2	—
	" Body	—	—	7	—
	Scabies	7	—	66	1
	Impetigo	6	—	109	—
	Other Diseases (Non-Tuberculous)	13	3	178	17
Eye	Blepharitis	9	11	20	—
	Conjunctivitis	4	3	61	—
	Keratitis	—	—	3	—
	Corneal Opacities	—	—	—	—
	Other Conditions (excluding Defective Vision & Squint)	10	6	36	3
	Defective Vision (excluding Squint)	190	42	15	—
Squint	23	12	12	1	
Ear	Defective Hearing	13	4	6	4
	Otitis Media	21	14	27	—
	Other Ear Diseases	23	14	215	3
Nose and Throat	Chronic Tonsillitis only	83	133	88	10
	Adenoids only	9	13	1	3
	Chronic Tonsillitis & Adenoids	68	19	64	5
	Other Conditions	23	16	201	91
	Enlarged Cervical Glands (Non-Tuberculous)	—	5	16	16
	Defective Speech	1	9	1	1
Heart and Circulation	Heart Disease—				
	Organic	3	33	1	14
	Functional	4	21	—	7
	Anæmia	7	38	17	5

TABLE II.—continued.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS		SPECIAL INSPECTIONS		
	No. of Defects.		No. of Defects.		
	Requiring Treatment	Requiring to be kept under observation, but not requiring Treatment	Requiring Treatment	Requiring to be kept under observation, but not requiring Treatment	
					(1)	(2)	(3)	(4)	(5)
Lungs	Bronchitis	20	167	55	25
	Other Non-Tuberculous Diseases	2	7	16	14
Tuberculosis	Pulmonary—				
	Definite	—	—	—	1
	Suspected	—	1	—	8
	Non-Pulmonary—				
	Glands	—	—	1	3
	Bones and Joints	—	—	1	—
	Skin	—	—	—	—
	Other Forms	1	—	—	—
Nervous System	Epilepsy	—	2	1	3
	Chorea	1	5	10	15
	Other Conditions	4	10	15	17
Deformities	Rickets	—	1	—	—
	Spinal Curvature	2	7	—	—
	Other Forms	18	17	8	1
	Other Defects and Diseases (excluding Defects of Nutrition, Uncleanliness and Dental Diseases) ...	110	116	671	206
	Total	675	729	1924	474

B. CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Age-Groups.	Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly Sub-normal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
		Entrants	1161	196	16.89	701	60.38	229	19.72	35	3.01
Second Age Group ...	1239	241	19.45	695	56.10	272	21.95	31	2.5
Third Age Group	1261	389	30.85	725	57.49	141	11.18	6	0.48
Other Routine Inspections	—	—	—	—	—	—	—	—	—
TOTAL	3661	826	22.56	2121	57.93	642	17.54	72	1.97

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

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

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind	At Certified Schools for the Partially Sighted	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
2	—	2	—	—	4

DEAF CHILDREN.

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

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
—	—	—	—	—	—

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
51	25	—	11	87

EPILEPTIC CHILDREN.
CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
2	—	—	1	3

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
—	10	2	1	13

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
4	7	1	1	13

TABLE III.—continued.

B. DELICATE CHILDREN.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	73	—	10	83

C. CRIPPLED CHILDREN.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
2	14	1	6	23

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	73	—	2	75

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Combination of Defect	At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
Crippled and Feeble-minded	3	1	—	—	4
Feeble-minded and Tubercular	—	—	—	1	1
Epileptic and Feeble-minded	—	—	—	1	1

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER, 1938.

TREATMENT TABLES.

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

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
SKIN—			
Ringworm-Scalp—			
(i.) X-Ray Treatment	2	—	2
(ii.) Other Treatment	—	—	—
Ringworm-Body	5	2	7
Scabies	11	62	73
Impetigo	482	1	483
Other skin disease	838	9	847
MINOR EYE DEFECTS			
(External and other, but excluding cases falling in Group II.)	316	2	318
MINOR EAR DEFECTS	315	1	316
MISCELLANEOUS	1697	21	1718
(e.g., minor injuries, bruises, sores, chilblains, etc.).			
Total	3666	98	3764

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

	No. of Defects dealt with.		
	Under the Authority's Scheme	Otherwise	Total
ERRORS OF REFRACTION (including squint)	416	7	423
Other defect or disease of the eyes (excluding those recorded in Group I)	—	—	—
Total	416	7	423
	Under the Authority's Scheme	Otherwise	Total
No. of Children for whom spectacles were—			
(a) Prescribed	317	7	324
(b) Obtained	310	7	317

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

NUMBER OF DEFECTS.												Received other forms of Treatment	Total number treated
Received Operative Treatment.													
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)		
—	1	130	—	—	—	37	—	—	1	167	—	24	192

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

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

Number of children treated	Under the Authority's Scheme.			Otherwise.			Total number treated
	(1)			(2)			
	Residential treatment with education	Residential treatment without education	Non-residential treatment at an orthopædic clinic	Residential treatment with education	Residential treatment without education	Non-residential treatment at an orthopædic clinic	
(i)	(ii)	(iii)	(i)	(ii)	(iii)		
	5	8	61	—	2	1	73

TABLE II.

A.—RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, 1938.

Defect or Disease. (1)	Routine Inspections.			
	Boys.		Girls.	
	Requiring Treatment (2)	For Observation (3)	Requiring Treatment (4)	For Observation (5)
Skin—				
Ringworm—				
Head	—	—	—	—
Body	—	—	—	—
Scabies	—	—	—	—
Impetigo	—	1	—	—
Other Conditions	2	—	—	—
Eye—				
Blepharitis	—	—	—	—
Conjunctivitis	—	—	—	—
Corneal Ulceration	—	—	—	—
Other Conditions	1	1	—	—
Defective Vision—				
6/9	—	—	—	—
6/12—6/24	—	3	14	5
6/36 or over	1	—	—	—
6/36 or over (both eyes)	—	—	1	—
Squint	—	—	—	—
Ears—				
Defective Hearing	—	—	—	—
Otitis Media	—	—	—	—
Other Diseases	2	—	3	1
Nose and Throat—				
Chronic Tonsillitis	1	—	2	—
Adenoids	—	—	—	—
Chronic Tonsillitis and Adenoids	—	—	—	—
Other Conditions	1	—	1	1
Glands—				
Enlarged Cervical and Submax	—	—	—	2
Defective Speech	—	—	—	—
Teeth	—	—	—	—
Heart and Circulation—				
Heart—Organic	—	2	—	1
Functional	—	1	—	—
Anæmia	—	—	—	1
Lungs—				
Bronchitis	—	1	—	1
Other Non-tubercular Diseases	—	—	—	—
Tuberculosis—				
Pulmonary—				
Definite	—	—	—	—
Suspected	—	—	—	—
Non-Pulmonary—				
Glands	—	—	—	—
Spine	—	—	—	—
Hip	—	—	—	—
Other Bones and Joints	—	—	—	—
Other Forms	—	—	—	—
Nervous System—				
Subnormal Intelligence	—	—	—	—
Epilepsy	—	—	—	—
Chorea	—	—	—	—
Other Diseases	—	1	—	—
Signs of Overstrain	—	—	—	—
Deformities—				
Rickets	—	—	—	—
Spinal Curvature	—	1	1	—
Other Forms	—	2	2	3
Other Diseases and Defects—				
Goitre	—	—	—	—
Digestion	—	—	—	—
Constipation	—	—	—	—
Rheumatism	—	—	—	—
Other Conditions	5	7	5	3

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)	
Detailed Inspections	373	28	8.31

