

beginning only in 1896, New York has already developed a scheme of school inspection which for comprehensiveness, methods, detail, simplicity, and efficiency goes far ahead of anything elsewhere existing. And it may be permissible to say that to Dr. Charles F. Roberts, sanitary superintendent of the city of New York, more than to any other one man, is due the credit for the magnificent organization which has been created. In the latter part of 1896 he addressed the Board of Health on the subject, showing with incisive clearness that the public schools, from the simple fact that they bring into close physical contact such large numbers of children, coming together out of every sort of sanitary environment, are, and must obviously be, just so many potential agencies for the spread of infectious and contagious diseases. The Board of Health heard and understood; and then, as now, being clothed with powers which a large proportion of the substantial element, alas! describe as tyrannical, so practically indorsed and adopted the plans presented that the system became an accomplished fact.

In 1897 the Board of Health appointed, under civil service rules, one hundred and fifty medical school inspectors to cover what is now the borough of Manhattan.

At the outset only primary public schools, parochial schools, and the schools of the Children's Aid Society were visited. Later the field was enlarged to include the grammar and tenement schools, and those of the American Female Guardian Society and Kindergarten Association.

To-day the corps is very much enlarged, the field including all the boroughs of the "greater" city.

The objective point in the system is *exclusion*; to keep out of the school, out of contact with other

pupils, any child or student who in the grip of any infectious or contagious disease or ailment. Each medical inspector has a certain school or schools (located in easy proximity to each other) assigned to him, and these he is expected to visit on every school day, reaching his post as early as possible between 8.50 and 9.10 o'clock in the morning. The "dangerous" pupil is to be discovered and excluded *before* the general assembly of the scholars; and I may say that in my judgment the greater part of the value of the system would be lost if this early inspection were not insisted upon. From three o'clock in the afternoon, when school children go to their homes, to nine o'clock the following morning, comprises eighteen hours, and among them the hours in which disease is most prone to take hold. An exclusion at nine o'clock in the morning might mean prevention absolute; an exclusion, say, at noon or later might mean locking the stable after the horse had escaped.

On his arrival at his post, the inspector has brought to him all cases suspected to be of a contagious nature. These include measles, diphtheria, scarlet fever, chicken-pox, croup, whooping cough, mumps, contagious eye diseases, parasitic diseases of the head and body, and certain other skin diseases.

If the child is found to have a contagious disease, the inspector gives him a printed form, filled in with the child's name and address, a designation of the school, and a diagnosis of the disease. The child is then sent *home* for proper treatment and is not permitted to return until official proofs of cure are presented.

These official proofs are indicated by the character of the case. The school inspector decides in the following cases: Chicken-pox, para-