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Contributors

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Copy made by Mr. J. H. Jones

Carmarthenshire County Council

EDUCATION COMMITTEE

Annual Report

OF THE

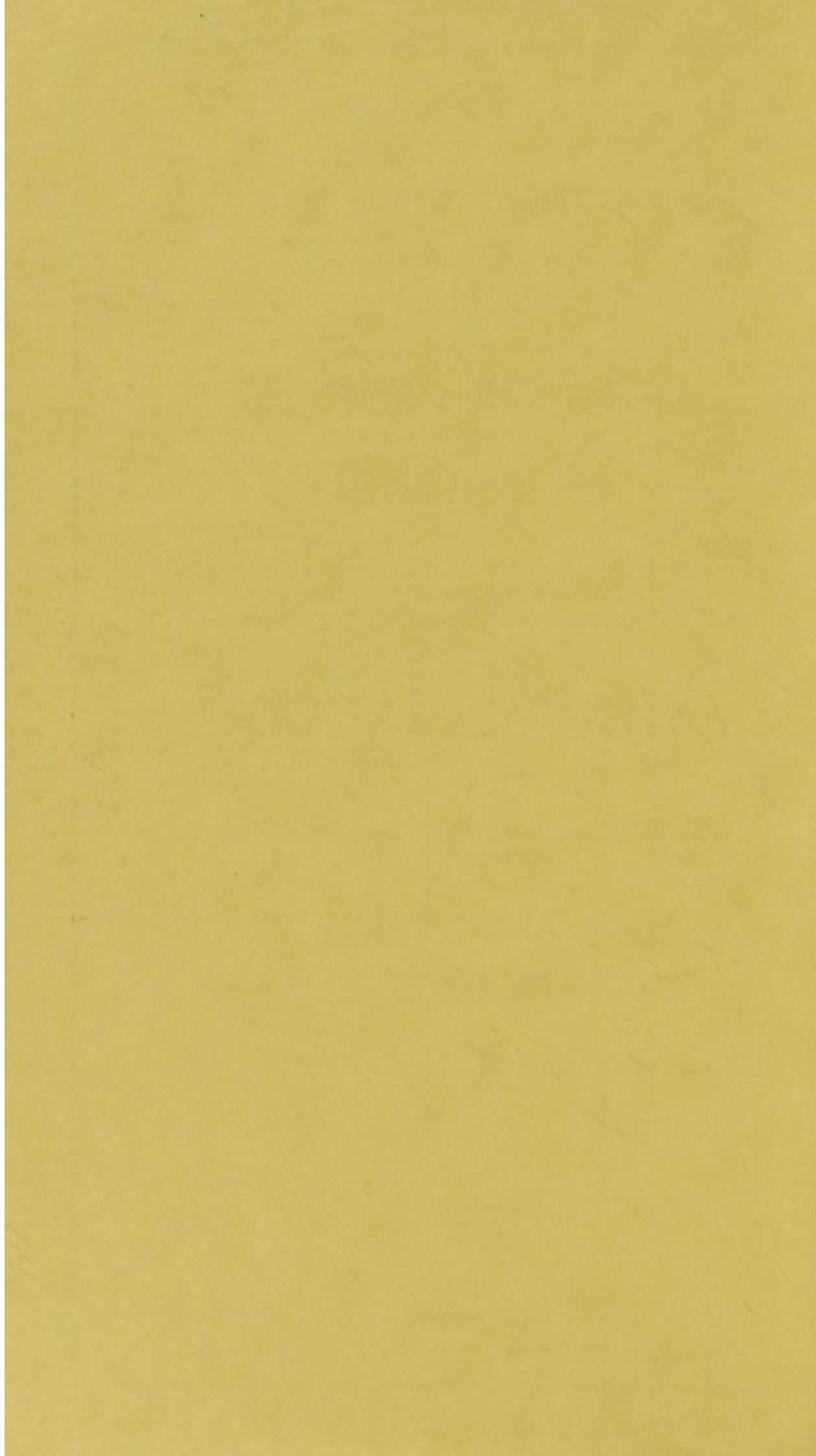
PRINCIPAL

SCHOOL MEDICAL OFFICER

for the Year ended 31st December, 1962

LLANELLY :

Printed by the Llanelly Mercury Printing Co., Ltd.



Carmarthenshire County Council

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CARMARTHENSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE

ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR ENDED 31st DECEMBER, 1962

I beg to submit my report on the School Health Service for the year 1962.

With great pleasure I welcome Dr. M. G. Danaher, Assistant Medical Officer, who was appointed Deputy Principal School Medical Officer and commenced duties in the post on the 19th March. His successor as Assistant Medical Officer had not been appointed at the end of the year.

The long-established practice of routine medical examination of all school children at fixed intervals continued, but I consider that this procedure is now outmoded. A new procedure should be introduced providing for more selective examinations after the initial examination of all pupils on admission to school; the subsequent examinations being dependent on the findings of the first examination coupled with each child's medical history.

Arrangements for selective medical inspection would be closely linked with the general physical well being of children constantly throughout school life.

I am convinced that the curriculum of schools is too intense and that the physical well-being of children is considered to be secondary to academic success. Physical training and sporting activities are essential to the proper development of the child and are important factors in character building and school curricula should recognise this. In my opinion, at least one period a day should be devoted to physical activities. I am also still concerned about the footwear of some of teenagers, and I am of the opinion that all children should conform to school standards in this respect.

The accommodation available in most schools for medical examination is unsatisfactory but with the full co-operation of the County Architect, proper facilities are incorporated in the planning stage of new schools. I would like to thank the head-teachers for their co-operation in providing facilities for medical examination, especially where the accommodation is limited.

As usual there was during the year full liaison with officers of the Education Department and every effort made to provide adequately for the handicapped child.

The unit for children with partial hearing which was established in 1960 has fully justified itself and in my opinion serious consideration should now be given to the possibility of extending the unit to provide for secondary education. To meet this need a larger building is required and ideally it should be sited in close proximity to both a primary and secondary school so as to enable the children of the unit to participate, so far as possible, in a normal hearing environment. The extension of the unit would necessitate an increase in the specialist staff employed whose services could if necessary be used partly in a peripatetic capacity to deal with children with impaired hearing who could not attend the unit. All completely deaf children are attending the residential school at Llandrindod Wells.

With regard to the ascertainment of children with impaired hearing, a fully staffed Audiology Unit has now been established at a Cardiff Children's Hospital where cases are referred for assessment.

Child psychiatry is a growing and increasingly important branch of the school health service and the child guidance clinic established at Llanelly is not adequate to serve the needs of the whole County. A child psychiatric service based on St. David's Hospital, Carmarthen, to serve the western area of the County, is an urgent necessity.

The report of the educational psychologist which is included in this report indicates the progress that is being made in providing for the educationally sub-normal and maladjusted.

The work of the School Dental Service is reported on by the Principal Dental Officer. Attention is drawn to the continuing high percentage of children found to require treatment, and the Principal Dental Officer has complained of the apathetic attitude of parents to the preservation of their children's teeth.

The close liaison developed with general practitioners is fully maintained.

I am grateful to the Chairman, Vice-Chairman and members of the Education Committee for their help, encouragement and the kind consideration they have shown me, and to the teachers for their continued interest and valuable assistance. I would also record my appreciation of the loyal co-operation of members of the professional, nursing and administrative and clerical staff.

D. G. G. JONES,

Principal School Medical Officer.

STAFF

Principal School Medical Officer:

D. G. G. Jones, M.B., B.S., D.P.H. (commenced 6th February).

Deputy Principal School Medical Officer and Divisional School Medical Officer:

M. G. Danaher, M.B., B.Ch., B.A.O., L.M., D.P.H. (commenced 19th March).

School Medical Officers:

E. T. Davies-Humphreys, M.R.C.S., L.R.C.P.

D. O. Davies, M.R.C.S., L.R.C.P.

J. G. E. Collins, M.R.C.S., L.R.C.P., D.P.H.

C. I. Morgan, M.R.C.S., L.R.C.P.

E. Lynette Davies, B.Sc., M.B., B.Ch., D.R.C.O.G.

*E. H. Beynon-Hopkins, M.R.C.S., L.R.C.P., D.P.H. (part-time).

*Gladys M. Herbert, M.R.C.S., L.R.C.P., D.P.H. (part-time).

* Divisional Medical Officer of Health.

Principal School Dental Officer:

W. E. T. Llewelyn, L.D.S., R.C.S.

School Dental Officers:

D. L. Walters, L.D.S., R.C.S.

J. L. T. Davies, L.D.S., R.C.S.

F. G. Day (Retired 16th February).

T. J. Thomas, L.D.S., R.C.S. (commenced 19th February).

P. M. Llewellyn, B.D.S. (part-time).

Dental Attendants:

Mrs. V. M. Arundel.

Miss E. B. Evans.

Miss A. M. Maliphant.

Miss M. A. Thomas.

Miss J. Jenkins.

Senior Orthopædic Sister:

Miss E. R. Buckley, M.C.S.P.

Assistant Orthopædic Sister:

Mrs. O. Turner Evans, M.C.S.P.

Speech Therapist:

Mrs. R. M. Morgan, L.C.S.T.

Chief Nursing Officer:

Miss I. John, S.R.N., S.C.M., H.V.Cert.

Deputy Superintendent Health Visitor:

Miss F. Hughes, S.R.N., S.C.M., H.V.Cert. (ceased 11th July).

Educational Psychologist:

C. B. James, Ph.D., B.A., B.Ed., A.B.Ps.S.

Consultants available for School Health Service:

Orthopaedic Surgeons:

G. D. Rowley, M.Ch. (Orthop.), Swansea.
R. L. Rees, F.R.C.S., Carmarthen.

Ophthalmic Surgeons:

G. S. Forrester, M.B., Ch.B., D.O.M.S., Llanelly.
A. Philipp, L.R.C.P., L.R.C.S., L.R.F.P.S., D.O.M.S.,
Llanelly.

Ear, Nose and Throat Surgeons:

T. I. Williams, F.R.C.S., Llanelly.
S. Morgan, F.R.C.S., Carmarthen.

Plastic Surgeons:

Eric Peet, F.R.C.S., Oxford.
Emlyn Lewis, F.R.C.S., Chepstow.

Pædiatricians:

R. T. Jenkins, M.R.C.P., D.C.H., Swansea.
K. R. Keay, M.D., M.R.C.P., D.C.H., Carmarthen.

Dermatologist:

D. Leighton Rees, M.D., M.R.C.P., Swansea.

Orthodontist:

R. E. Rix, M.R.C.S., F.D.S., R.C.S., London.

Dental Surgeon:

J. R. Gibson, F.D.S., Chepstow.

Chest Physicians:

J. T. Jones, B.Sc., M.B., B.Ch.
D. B. Ll. Morgan, M.D.

Assistant Chest Physicians:

J. Williams, B.Sc., M.B., B.Ch.

Bronwen N. Davies, B.Sc., M.B., B.Ch.

Psychiatrists:

Sidney Davies, M.B., B.S., D.P.M.

J. Farr, M.B., B.S., D.P.M.

E. J. Eurfyl Jones, M.A., B.M., B.Ch., D.P.M.

Child Psychiatrist:

John McDonald, M.A., M.B., Ch.B., D.P.M.

Pathologist:

D. F. Davies, M.D., M.R.C.P.

Bacteriologist under Medical Research Council:

H. D. S. Morgan, M.R.C.S., L.R.C.P., Dip. Bact.

NURSING

District	Nurse	Qualifications
Whole-time Nurses :		
Amman Valley	M. G. Evans	S.R.N., S.C.M., H. V. Cert.
Ammanford	A. Howells	S.R.N., S.C.M., H.V. Cert.
Burry Port	R. M. Walters	S.R.N., S.C.M., H. V. Cert.
Trimsaran	G. M. Williams	S.R.N., S.C.M., H. V. Cert.
Llangennech	E. Edwards	S.R.N., S.C.M., H. V. Cert.
Carmarthen Borough	G. I. Evans	S.R.N., S.C.M., H. V. Cert.
	D. Murray	S.R.N., S.C.M., H.V. Cert.
St. Clears	M. E. E. Davies	S.R.N., S.C.M., H. V. Cert.
Llanelly Borough	C. Jones	S.R.N., S.C.M., H. V. Cert.
	G. M. Burford	S.R.N., S.C.M., H. V. Cert.
	E. M. Perrott	S.R.N., S.C.M., H. V. Cert.
	M. E. Jones	S.R.N., S.C.M., H. V. Cert.
	D. C. Insley	S.R.N., S.C.M., H. V. Cert.
Felinfoel	E. M. Jones.	S.R.N., S.C.M., H. V. Cert.
Tumble	E. J. M. Jones	S.R.N., S.C.M., H. V. Cert.
Llandybie	M. M. Davies	S.R.N., H. V. Cert.
Pencader	E. N. Morgan	S.R.N., S.C.M., H. V. Cert.
Bancyfelin	E. N. E. Davies	S.R.N., H. V. Cert.
Llandeilo	C. M. Bailey	S.R.N., S.C.M., H. V. Cert.
Nantgaredig	E. Evans	S.R.N., S.C.M., H. V. Cert.
Llangendeirne	M. E. Thomas	S.R.N., S.C.M., H. V. Cert.
Llandovery	J. Jones	S.R.N., S.C.M., H. V. Cert.
Cynwyl Elfed	N. G. E. Baker	S.R.N., S.C.M., H. V. Cert.
Whitland	D. R. J. Edwards	S.R.N., H. V. Cert.
Part-time Nurses :		
Llansawel	M. L. Angel	S.R.N., S.C.M.
Cilycwm	E. G. Cox	S.C.M.
Caeo	S. Jenkins	S.C.M., S.E.N.

COMMUNICABLE DISEASES

No schools were closed during the year on the advice of the Principal School Medical Officer on account of outbreaks of communicable diseases.

The practice of closing schools has long been discounted as an effective means of preventing the spread of infection, and it is only in very exceptional circumstances that it is resorted to.

The communicable diseases mainly affecting school children are measles and whooping cough.

300 cases of measles and two cases of whooping cough were notified to District Medical Officers of Health during the year.

The following comparison of the notifications received during the last five years is of interest:—

	1958	1959	1960	1961	1962
Measles	1731	308	985	1747	300
Whooping Cough	42	34	176	100	2

Acute Poliomyelitis.—There were three cases of paralytic Poliomyelitis (a boy and girl, both aged four years, and a youth age 17 years) in the County during the year as compared with one case in 1961. No record is held of any of them having been vaccinated.

The arrangements for vaccination against poliomyelitis continued and an oral poliomyelitis vaccine (Sabin) was introduced during the year. A full course of the Sabin vaccine consists of 3 doses at intervals of four to twelve weeks. Both vaccines were used during the year and the following is a summary of the children vaccinated:—

By injection with Salk vaccine:—

	Received 2 Injections	Received 1 Injection
Children born 1943—1962	1361	4
Persons born 1933—1942	259	7
Older persons, but under 40 years of age	564	—
Expectant Mothers	42	—

Number of persons who received 3rd injection ... 4437

Number of persons who received 4th injection ... 600

By administration of Sabin Vaccine:—

	Received 3 doses	Received 2 doses	Received 1 dose
Children born 1943—1962	612	27	182
Persons born 1933—1942	45	—	—
Older persons, but under 40 years of age	127	—	—
Expectant Mothers	—	—	—

Number of persons given one dose of Sabin after
two doses of Salk 664

Number of persons given one dose of Sabin after
three doses of Salk 591

MEDICAL INSPECTION AND FINDINGS

All the Primary and Secondary Schools in the County were visited during the year for medical inspection in accordance with the requirements of the Ministry of Education. In addition one school was visited for the re-examination of children previously referred for treatment or observation. 7,964 children were examined in the routine age groups and 2,954 special inspections and re-inspections were made. A summary of the findings of medical inspection is given in Part II. of the Tables at the end of this report. The following are notes on some of the defects found:—

Skin Diseases.—70 cases required treatment and 174 cases were referred for observation.

Eye Defects.—Treatment was advised for 759 children with defective vision and 114 children with squint, while 882 cases of defective vision and 102 cases of squint were referred for observation.

Ear Conditions.—40 cases of defective hearing were referred for treatment and 29 for observation. Treatment was required for 21 cases of Otitis Media (ear discharge) and a further 44 cases were referred for observation. 3 cases of other ear conditions were also referred for treatment and 6 for observation.

Nose and Throat Conditions.—There were 238 cases of nose and throat defects (including enlarged tonsils and adenoids, sinusitis, antral conditions, etc.) requiring treatment, and a further 598 were referred for observation.

Speech.—Treatment was advised for 156 cases of defective speech and 90 cases were referred for observation.

Nutrition.—Of the 7,964 children examined at routine medical examination one was considered to be in an unsatisfactory physical condition.

FOLLOWING-UP

Much of the success of the School Health Service depends on the " field work " undertaken by the School Nurses. They follow up in the homes those cases found to be defective at medical inspection, and also visit the homes of children suffering from communicable diseases, uncleanness, etc. 968 surprise visits to Schools were made by the School Nurses during the year to make cleanliness surveys. Table C., Part I. of the Tables at the end of this report summarises this work. In addition, the Nurses made 2,209 home visits.

" Following-up " is also carried out by the School Medical Officers by periodic re-inspections, and many special visits were made to Schools to examine special cases. During the year one School was re-inspected by a Medical Officer and six children were re-inspected.

MEDICAL TREATMENT

Minor Ailments.—91 attendances were made at the Brynmair Minor Ailments Clinic during 1962. Many cases were also treated privately by medical practitioners, at hospitals and at the homes of children under the supervision of School Nurses. A total of 179 children were known to have been treated during the year.

Vision.—The specialist ophthalmic examination of children was undertaken by the Regional Hospital Board through the Hospital Management Committees. Mr. A. Philipp held sessions at the Ophthalmic Centre at the West Wales General Hospital, Carmarthen, and Mr. G. S. Forrester held sessions at Llanelly and at the Amman Valley Hospital. Sessions at Llanelly were held at the Brynmair School Clinic, but cases were also seen at the Out-patient Department of the Hospital.

1,975 children were dealt with by the Eye Specialists during the year, viz.:—

	Outpatients	Inpatients	Total
West Wales Hospital	714	124	838
Brynmair Clinic and Llanelly Hospital	895	32	927
Amman Valley Hospital	198	—	198
Other Hospitals	10	2	12
Totals	1817	158	1975

Glasses were prescribed for 424 children and records held by the School Medical Officer showed that 331 had been provided with glasses at the end of the year.

124 children were on the waiting lists for specialist ophthalmic examination on the 31st December, 1962, viz.:—

Carmarthen	...	72
Llanelly	...	45
Amman Valley	...	7
Other Hospitals	...	—
Total	...	124

Ear, Nose and Throat Defects.—Children with ear, nose and throat defects are referred for specialist examination at the West Wales, Llanelly and Amman Valley Hospitals. With the exception of the Llanelly Hospital, where children are directed by the School Medical Officer to attend for these examinations, the arrangements are made by the Hospital Secretary. Hospitals of course, also dealt with children referred to them directly by general medical practitioners.

Children found to require inpatient treatment were placed by the specialists on the Hospital waiting lists, and the arrangements for admission were made by the Hospitals. Cases recommended for surgical treatment at Llandovery Hospital are treated at the West Wales General Hospital. The following Table gives information as to the number of children who received operative treatment during the year:—

	Ear Diseases	Adenoids and chronic tonsillitis	Other nose and throat conditions	Total
West Wales Hospital	46	361	353	760
Llanelly Hospital	86	209	47	342
Amman Valley Hospital	5	104	2	111
Other Hospitals	8	55	2	65
Totals	145	729	404	1278

Comparison of the waiting lists at the end of 1961 and at the end of 1962 is as follows:—

Hospital	Waiting for Specialist Examination		Waiting for admission to Hospital		Total	
	At 31 Dec., 1961	At 31 Dec., 1962	At 31 Dec., 1961	At 31 Dec., 1962	At 31 Dec., 1961	At 31 Dec., 1962
West Wales and Llandovery	21	22	178	65	199	87
Llanelly	—	—	58	56	58	56
Amman Valley	8	13	79	21	87	34
Other Hospitals	—	—	1	3	1	3
Total	29	35	316	145	345	180

Nine miscellaneous cases received non-operative treatment at Hospital Outpatient Departments.

Partially Deaf Children.—33 children were submitted to audiometric tests and four of them were found to be suffering from defective hearing and were fully investigated.

Five children are known to have been provided with hearing aids during the year and 21 were known to have been supplied with them in earlier years.

Partially Deaf Unit.—At the end of the year, there were nine pupils on the register of the Unit for the Partially Deaf at Tumble County Primary School.

Plastic Treatment.—The arrangements for the plastic treatment of children at the Churchill Hospital, Oxford, continued, but cases were also treated at St. Lawrence Hospital, Chepstow. Children for examination were also referred to the West Wales and Morriston Hospitals. During the year:—

One case of cleft lip and palate was treated at St. Lawrence Hospital.

Two cases of cleft palate reviewed at Churchill Hospital and one at Morriston Hospital.

One case of nævus examined at West Wales Hospital and treated at St. Lawrence Hospital.

Asthma.—The Asthma Clinics at Ammanford, under the care of the Principal School Medical Officer, and at Llanelly and Carmarthen, under the care of Dr. E. T. Davies-Humphreys, continued to function successfully. One session per week is held at Llanelly and Carmarthen and one monthly at Ammanford. 563 attendances were made at the Clinics during the year. There were 62 new cases. Further information is given in the following table:—

	Ammanford	Llanelly	Carmarthen	Total
No. of cases on 1st January, 1962	27	204	64	295
No. of new cases	2	29	31	62
No. withdrawn	—	17	—	17
No. of cases on 31st December	29	216	95	340
Total attendances	23	358	182	563
No. of individual cases treated	4	41	31	76

Treatment was on the same lines as for past years and there are no special observations to make.

Orthopædic Treatment.—The Education Committee continued to administer the Clinics for the orthopædic supervision and after-care of children. The charge for the supervision of the cases of other Authorities remained at 31/6d. per case per annum, but the Health and Public Health Committee paid a fixed lump sum in respect of children under school age.

On the 31st December, 1962, 2,383 cases were being attended to for all Authorities, viz.:—

County Education Committee	...	1442
County Health and Public Health Committee	...	914
West Wales Hospital Management Committee	...	10
Glantawe Hospital Management Committee	...	17

An analysis of these cases according to diagnosis is as follows:—

	County Education Committee	Other Authorities	Total
Paralysis :			
Infantile	20	15	35
Spastic	28	7	35
Obstetrical	—	—	—
Other	—	1	1
Congenital Deformities	104	64	168
Infective Conditions of Bones and Joints	—	2	2
Non-Infective Conditions of Bones and Joints :			
Rickets	—	—	—
Other	5	3	8
Static and Postural Defects	1266	832	2098
Traumatic Deformities	1	1	2
Multiple Defects	—	—	—
Miscellaneous	18	16	34
Totals	1442	941	2383

Mr. Gordon Rowley, the Orthopædic Surgeon, treated 16 of the Authority's cases as inpatients at Morriston or Gorseinon Hospitals, and Mr. R. L. Rees, Orthopædic Surgeon, treated three cases at the West Wales General Hospital. Cases for special X-Ray examination were referred to the Outpatients Department of Morriston, Llanelly and West Wales General Hospitals.

On the 31st December, six children referred from the Orthopædic Clinics were on the waiting list for hospital inpatient treatment, as compared with five on the 31st December, 1961.

Child patients not under the County Orthopædic Clinics were attended to by Hospitals under their own arrangements, and the following table summarises those cases so far as known to the School Medical Officer:—

Hospital	Inpatients		Outpatients	
	Crippling Defects	Fractures	Crippling Defects	Fractures
West Wales General Hospital	—	98	96	141
Swansea Hospital	—	13	1	—
Totals	—	111	97	141

In addition, 193 children (177 outpatients and 16 inpatients) were treated at Morriston Hospital.

During the year, there were 14,100 attendances at the Clinics in the County, and the following table shows the case-loads of the various Clinics at the end of the year:—

Llanelly	... 516	Tumble	... 120
Garnant	... 54	Llandeilo	... 98
Pontyberem	... 87	Carmarthen	... 426
Llandovery	... 105	Burry Port	... 115
St. Clears	... 79	Pencader	... 35
Trimsaran	... 28	Brynamman	... 54
Ammanford	... 291	Llandybie	... 91
Whitland	... 52	Pontyates	... 56
Kidwelly	... 56	Llwynhendy	... 120

A summary of the work undertaken under the orthopaedic arrangements during 1962 is given in the following table:—

	County Education Committee	Other Authorities	Total
Number of individual cases under Scheme on 1st January, 1962	1560	936	2496
Number of new cases during the year	430	453	883
Number of individual cases dealt with during the year	1990	1389	—
Number of cases withdrawn from Scheme	548	448	996
Number of cases under the Scheme on the 31st December	1442	941	2383
Total Number of attendances made at the Clinics	9456	4644	14100
Number of individual cases received remedial exercises by Sisters	192	—	192
Number of individual cases massaged by Sisters	—	1	1
Number of home visits by Sisters	489	302	791
Number of cases examined by visiting Orthopaedic Surgeons	197	116	313
Number of cases recommended in-patient hospital treatment by Surgeons	17	4	21

Speech Therapy.—The four Speech Therapy Clinics established by the Committee continued to function successfully, and a fifth Clinic was opened at Llandovery during the year. An occasional session is devoted by the Speech Therapist to the follow-up of cases at schools.

At the end of the year, sessions as follows were held at each clinic:—

Clinic.	Number of Sessions.
Carmarthen	... 2 weekly
Llanelly ...	... 4 weekly
Ammanford	... 2 weekly
Llandeilo ...	... 2 monthly
Llandovery	... 2 monthly

Four sessions a month are held at the Highmead Residential School for Educationally Subnormal Children.

87 new cases were referred to the clinics and treatment was recommended for 78 of them. Eight did not require treatment and treatment was deferred until later in four instances. The following is a summary of the defects found to require treatment during the year:—

	Carmarthen	Llanelly	Ammanford	Llandeilo	Llandovery	Highmead	Total
Defects of Articulation	12	18	9	4	4	1	48
Stammer	4	7	1	—	1	—	13
Excessive or inadequate nasal resonance	2	4	2	1	1	—	10
Rhotacism	2	2	2	—	1	—	7
Totals	20	31	14	5	7	1	78

234 cases received treatment at the clinics, 104 of which were treated for the first time during the year. 2,457 attendances were made at the Clinics as follows:—

Clinics	Sessions	Treated	Attendances
Carmarthen	88	51	477
Llanelly	199	87	1142
Ammanford	92	45	495
Llandeilo	22	19	114
Llandovery	13	14	47
Highmead	26	18	182
Totals	440	234	2457

107 cases were discharged from the clinics:—

50 with their defects cured, 34 sufficiently improved as not to warrant further attendances, 21 for lack of co-operation and unsatisfactory attendances, and two attained school-leaving age.

Generally, the speech of the children who attended the Clinics regularly, and whose parents showed intelligent co-operation, improved considerably.

A summary of the waiting lists on the 31st December is as follows:—

Carmarthen	...	...	23
Llanelly	...	...	91*
Ammanford	...	...	6
Llandeilo	...	...	3
Llandovery	...	...	5
Total ...			128

* 31 of these had been seen by the Speech Therapist but had not commenced treatment at the end of the year.

Heart Supervisory Clinics.—The Clinics for the supervision of rheumatic and heart complaints in children were continued at Llanelly, Carmarthen and Ammanford. Dr. M. G. Danaher, Deputy Principal School Medical Officer, was in charge of the Clinics, and regular monthly sessions were held at each centre.

Children showing abnormal cardiac physical signs, or giving a history of rheumatism or chorea, were referred to the Clinics by School Medical Officers.

Cases of congenital heart disease seen at the Clinics are provisionally classified. In general, such cases require hospital investigation, many of them demanding the application of an exacting technique for diagnosis and treatment.

Rheumatic children, however, require protection against recurring infection and the observation of children who have had acute rheumatism is an important aspect of the work. Relapse is a frequent feature of rheumatic disease in childhood and its early recognition is of prime importance.

The main work of the Clinics is, therefore, concerned with the observation of children who have had "juvenile rheumatism," with an effort to prevent recrudescence of a disease which can exert such a progressively incapacitating influence.

The intelligent co-operation of parent and child in regard to precautions to be observed is most desirable. It is important, wherever possible, that the child leads a normal life in relation to games and exercise, endeavouring to maintain a proper balance between excessive fatigue and undue restriction.

The following is a summary of cases seen at the Clinics:—

	Llanelly	Carmarthen	Ammanford	Total
Observation following acute Rheumatism	13	6	3	22
Chorea	2	2	3	7
Congenital Lesions	12	8	9	29
Anaemia	2	2	3	7
Undergoing Investigation	16	10	5	31
Conditions of no organic significance and others	11	15	18	44
Total	56	43	41	140

The congenital lesions were classified as follows:—

	Llanelly	Carmarthen	Ammanford	Total
Ventricular Septal Defect	8	4	4	16
Pulmonary Stenosis	1	2	5	8
Fallots Tetralogy	2	—	—	2
Patent Ductus Arteriosus	—	1	—	1
Aortic Stenosis	1	1	—	2
Total	12	8	9	29

217 attendances (92 at Llanelly, 62 at Carmarthen, and 63 at Ammanford) were made at the clinics.

The number of cases on books at the clinics were as follows:—

	Llanelly	Carmarthen	Ammanford	Total
No. on books 31st December, 1961	37	29	24	90
No. of new cases, 1962	22	14	17	53
No. of cases withdrawn, 1962	21	14	22	57
No. on books 31st December, 1962	38	29	19	86

Tuberculosis.—Treatment of tuberculous children is the responsibility of the Regional Hospital Board, to whom all suspected cases are referred.

The following shows the number of children referred by School Medical Officers and private medical practitioners for examination by the Chest Physicians during the year:—

	Dr. D. B. Ll. Morgan	Dr. J. T. Jones	Others	Total
Total number of children examined during 1962	531	231	3	765
Number of these children who were :				
(a) Contacts	235	64	1	300
(b) Under school age	113	77	1	191
(c) Found to be suffering from :				
(i) Respiratory Tuberculosis	4	3	—	7
(ii) Non-Respiratory Tuberculosis	—	—	—	—
(d) Still under observation but not diagnosed at 31/12/62	8	11	1	20
(e) Found with no evidence of active tuberculosis	519	217	2	738
Analysis of Non-Respiratory cases :				
(a) Spine	—	—	—	—
(b) Hip	—	—	—	—
(c) Knee	—	—	—	—
(d) Abdomen	—	—	—	—
(e) Glands	—	—	—	—
(f) Shoulder	—	—	—	—
(g) Other sites	—	—	—	—
Treatment :				
(a) Number treated in Sanatoria	—	5	—	5
(b) Number treated in Hospital	4	4	1	9
(c) Number treated in Surgical Hospital	—	—	—	—
(d) Number treated in Open-Air School	—	—	—	—

BCG Vaccination.—The arrangements of the Authority provide for the BCG vaccination of the following groups:—

- (1) School children of 13 years of age and over.
- (2) Pupils of independent schools of 13 years of age and over.
- (3) Students attending further education establishments.

The following is a summary of the work carried out during 1962:—

	School Children	Pupils attending independent schools	Students
(1) No. eligible	3124	283	—
(2) No. of (1) skin tested	2060 (65.94%)	276 (97.53%)	—
(3) No. of (2) who were :—			
(a) found to be negative	1723 (83.64%)	190 (68.84%)	—
(b) found to be positive	239 (11.60%)	81 (29.35%)	—
(c) Failed to attend for read- ing of skin test	98 (4.76%)	5 (1.81%)	—
(d) Had BCG vaccination	1717 (83.35%)	187 (67.75%)	—
(e) Refused vaccination after having skin test	6	3	—

Child Guidance.—The Child Guidance Clinic established by Cefncoed Hospital Management Committee continued on a weekly basis at the Brynmair Clinic, Llanelly, the Consultant Child Psychiatrist being Dr. J. McDonald.

74 clinical sessions were held and 37 new patients were seen. The total attendance was 184.

REPORT OF THE PRINCIPAL DENTAL OFFICER.

The recruitment of staff for the School Dental Service continues to be a problem although, as I intimated in my last report, one male dental practitioner was appointed early in 1962 and commenced duties on the 19th February. This appointment resulted in the release of Mr. Frank G. Day, one of the two officers over retiring age retained on the staff. Mr. Day had been a member of the staff since 24th March, 1941, and record should be made of his faithful service.

Later in the year Miss P. M. Hitchings resigned her appointment as a full-time dental officer on marriage, but her services have been retained in a part-time temporary capacity. Efforts are still being made to recruit staff.

Routine inspection and treatment in the County is confined to the primary schools (aged 5—11) although treatment is available at clinics for children attending the secondary schools.

The majority of the primary schools were visited for dental inspection during the year and 18,349 children were examined. Of that total 16,300 were found to require treatment, a percentage of 88.81 as compared with 89.5 per cent. for the year 1961.

Consents to treatment were received in respect of 11,147 of the 16,300 children requiring treatment, but 4,988 of those who consented either refused treatment or failed to attend when appointments were made. The net number of consents was 6,159, a percentage of 37.80 as compared with 39.70 per cent. for the preceding year.

While it is appreciated that many school children do receive treatment with private dental practitioners these figures denote that far too many parents still have no interest in the condition of the teeth of their children unless toothache intervenes. They just do not appreciate the value of early conservative treatment which is the aim of the service.

Despite this, much good work was undertaken during the year as the following summary shows :

No. of sessions for inspection ...	...	...	332
No. of treatment sessions at the four fixed clinics ...	...	...	968
No. of treatment sessions at schools and other temporary clinics ...	...	...	671
No. of individual children treated ...	...	...	6159
No. of attendances for treatment ...	...	...	10444
No. of teeth extracted ...	...	...	6724
No. of teeth saved by filling ...	...	...	5256
No. of teeth received minor treatment ...	...	...	2209
No. of administrations of general anæsthetic ...	...	...	3237

46 children were supplied with artificial teeth as compared with 47 in 1961.

The ratio of teeth extracted to those filled during the year was 1.28 to 1. Over the last 10 years there has been a considerable improvement in this respect. The ratio for 1952 was 5.88 to 1. For subsequent years it has been as follows:—

1953	3.40 to 1	1957	1.24 to 1
1954	2.27 to 1	1958	1.90 to 1
1955	1.94 to 1	1959	1.78 to 1
1956	1.96 to 1	1960	1.68 to 1
		1961	1.55 to 1

There is still room for improvement in the proportion of conservative work undertaken, but the difficulty lies in convincing parents of the beneficial effects of conservation.

Orthodontic treatment was undertaken for 114 new cases and 72 cases whose treatment had been commenced before attended for further treatment and review.

The following is a summary of the treatment undertaken:—

(a) Cases commenced during the year	...	...	114
(b) Cases carried forward from previous year	...	...	72
(c) Cases completed during the year	...	...	49
(d) Cases discontinued during the year	...	...	38
(e) Cases treated with appliances	...	...	90
(f) Removable appliances fitted	...	...	107
(g) Fixed appliances fitted	...	...	—
(h) Number of cases supplied with artificial teeth	...	...	46

I should like to record my thanks to Mr. R. E. Rix, M.R.C.S., F.D.S., our Consultant Orthodontist, for all his assistance in connection with the various difficult orthodontic cases. Also I should like to thank Mr. J. R. Gibson, F.D.S., Consultant Dental Surgeon, of the Plastic Surgery Centre, Chepstow, for his advice and treatment of the cases which have been referred to him.

In conclusion, may I express my thanks to the Chairman and members of the Education Committee for their support during the past year.

Reference must also be made to the ready co-operation and assistance received during the year from my colleagues in the dental service, the medical staff and headteachers.

WILLIAM LLEWELLYN,

Principal Dental Officer.

SCHOOL MILK AND MEALS

The latest information available at the end of the year showed that out of a total attendance of 24,220 on a particular day, milk and meals were being supplied as follows:—

Milk	...	17,620 children (72.75%)
Meals	...	16,884 children (69.71%)

This compares with percentages of 74.75 and 66.81 respectively for milk and meals a year ago.

Every effort is made to ensure that milk supplied to Schools is of a satisfactory standard, and whenever possible Pasteurised or Tuberculin Tested milk is provided. Where these grades of milk are not available, satisfactory samples are obtained before the proposed supplies are approved. Samples of all school milk are regularly taken for analysis by the Staff of the Chief Inspector of Weights and Measures.

The following table gives the number of School Departments (including non-maintained schools) receiving the different grades of milk at the end of the year:—

Pasteurised	...	...	...	170
Tuberculin Tested	...	...	...	45
Raw	...	...	...	—
Reconstituted Dried Milk	...	...	...	3

Under the Milk (Special Designation) Regulations, 1960, pasteurised milk could only be sold as such if it was delivered to the consumer in the bottles or containers in which it was pasteurised. Some retailers purchase pasteurised milk in bulk and bottle it themselves or transfer it to other containers for retail.

With regard to tuberculin tested milk it is only in exceptional circumstances that the Minister of Education is prepared to approve for grant purposes expenditure on milk the purchase price of which is more than the maximum price for pasteurised milk.

All appointments to school kitchen and canteen staffs were subject to satisfactory medical, including Chest X-ray examinations and to satisfactory faecal and urine bacteriological examinations.

CO-OPERATION OF PARENTS, TEACHERS, AND VOLUNTARY ORGANISATIONS

Generally, parents display an active interest in the medical inspection and treatment of their children, and are eager to follow the advice given by Medical Officers. 2,953 parents were present at the medical inspections during the year, equivalent to a percentage of 27.06. Greater efforts should be made by parents to attend the first medical examination of children at school.

Appreciation of the keen interest and active co-operation of Headteachers and their staffs must again be recorded. The importance of their influence in matters relating to the children and also to the parents cannot be over-estimated, and the activities of the School Health Service would be seriously handicapped without that help and co-operation.

A good deal of assistance is also rendered by the Inspectors of the National Society for the Prevention of Cruelty to Children, but their work relating to problem families and neglected children is now undertaken through the Children's Officer.

HANDICAPPED PUPILS

The Education Committee have a duty to provide handicapped pupils with an education suited to their needs, and the ascertainment and classification of handicapped children is one of the main functions of the School Health Service. The work in the County has been undertaken satisfactorily over the years except that in connection with the educationally subnormal.

Three pupils were reported to the Local Health Authority during the year as being unsuitable for receiving education at school. 159 handicapped children in the County have been ascertained to require special educational treatment. 66 of these were on the 31st January, 1963, pupils at Residential Special Schools, while 25 were receiving home tuition. Nine were pupils at the Unit for the Partially Deaf and 8 at the Unit for Maladjusted Children. A classification of the handicapped pupils is as follows:—

Handicap	At Special Schools	Receiving Home Tuition	Requiring places at Special Schools	
			Day	Board- ing
Blind	3	—	—	—
Partially Blind	1	—	—	—
Deaf	8	—	—	—
Partially Deaf	10†	—	—	—
Delicate	4	3	—	—
Physically Handicapped :				
(a) Heart	—	2	—	—
(b) Spastics	4*	3	—	1
(c) Others	4	13	—	4
Educationally Subnormal	40	2	—	50
Maladjusted	9 ^a	2	—	1
Epileptics	—	—	—	—
Totals	83	25	—	56

† 9 at the Unit for Partially Deaf Children at Tumble C.P. School.

* 2 at Independent School.

^a 8 at the Unit for Maladjusted children at Old Road C.P. School.

On the 31st January, 1963, there were 40 Carmarthenshire children (25 boys and 15 girls) at the Highmead Residential Special School for educationally subnormal children. There was a waiting list of 50 children, 8 of whom were under 10 years of age. Arrangements were made for them to receive special educational treatment at ordinary schools pending admission to Highmead. The parents had refused residential special educational treatment for six educationally subnormal children and two physically handicapped children.

The following is the report of the Educational Psychologist for the year 1962:—

REPORT OF EDUCATIONAL PSYCHOLOGIST

The School Psychological Service in Carmarthenshire, as in previous years, has continued to function in close association with the School Health Service and the teaching staff of the schools. The Psychologist also works as a member of the Child Guidance Team in co-operation with the Consultant Child Psychiatrist and the Psychiatric Social Workers.

The Clinical and Advisory work together form a psychological service to schools which aims at contributing to the healthy development of children through the application of psychological knowledge to education and mental health—including the development and operation of facilities for ordinary as well as for handicapped pupils.

Details of children clinically examined by the Educational Psychologist during 1962 and recommended for various forms of Special Educational Treatment are given below:—

TABLE I. PSYCHOLOGICAL/CLINICAL EXAMINATIONS, 1962.

		Boys	Girls	Total
(i)	Educationally (a) Retarded	11	2	13
	(b) Backward	7	2	9
	(c) Dull	5	6	11
		23	10	33
(ii)	Subnormal (unsuitable for education at school)	3	2	5
(iii)	Maladjusted (Wholly)	4	2	6
(iv)	Educational Guidance	1	—	1
		31	14	45

Of the educationally sub-normal children examined during 1962 another group of 10 boys and 5 girls were referred for psychiatric opinion in addition to 1 girl who was wholly maladjusted. Among the children were 4 boys who were Juvenile Delinquents.

The following children were recommended by the psychologist for various types of treatment:—

TABLE II.—SPECIAL EDUCATIONAL TREATMENT.

		Boys	Girls
(i)	Residential Special School	4	6
(ii)	Ordinary School (Remedial Unit)	10	9
(iii)	Ordinary School (Observation)	21	15
(iv)	Junior Training Centre	—	—
(v)	Medical Examinations (Phys. Hand.)	5	3
(vi)	Audiometric Examinations	—	—
(vii)	Speech Therapy	4	—
(viii)	Psychiatric Referral	9	6
(ix)	P.S.W. Supervision	1	—
(x)	Remedial Teaching	6	2
(xi)	Vocational Guidance	3	1

Of the educationally sub-normal (Dull/Backward) children 10 boys and 9 girls were recommended for special educational treatment at Remedial Units (Secondary Modern School) in lieu of Highmead Residential Special School.

In addition to the above children examined by the psychologist during 1962 action has been taken in respect of certain number of children examined in previous years. Such action has taken the form of discussions between the headteachers, the respective class teachers and the psychologist during his routine visits to schools as well as a review of periodic progress reports submitted by the headteachers.

During the year the work of reviewing children for admission and discharge from Highmead Residential Special School for educationally sub-normal pupils was carried out systematically by the psychologist. Regular discussions took place between the psychologist and Headteacher of Highmead Residential Special School in order that the cases of Carmarthenshire children could be considered individually as being subject to either remaining at a Residential School or being transferred to a Remedial Unit in a Secondary Modern School. It should be noted that all children attending Highmead are constantly under review in so far as their progress reports are scrutinized by the Psychologist and discussed with the Medical Officer and the Headteacher.

In 1962 Highmead School had its full complement of Carmarthenshire pupils (aged eleven plus).

**TABLE III.: S.E.T. AT HIGHMEAD R.S.S. SCHOOL
FOR E.S.N. PUPILS.**

	Boys		Girls		Total
Discharges, 1962	2	.....	4	.....	6
Admissions, 1962	3	.....	3	.....	6
<hr/>					
No. resident in Autumn Term, 1962	26	.....	16	.....	42

The school has maintained its good reputation and pupils have shown evidence of relatively satisfactory progress, having regard to the nature of their specific disabilities. During 1962 the school received a full inspection from Her Majesty's Inspectors, who appeared to be satisfied with the general arrangements. Further successful overtures were made to the Ministry of Education to increase the number of places at the school in order to give Residential treatment to a minimum number of E.S.N. (Dull) children on the waiting list who suffered from sociological, in addition to educational difficulties.

During the year the Highmead Joint Sub-Committee put forward a proposal for the establishment of a Residential Special School for maladjusted pupils in Carmarthen.

Through the joint consultation of the Principal School Medical Officers of the three Authorities, the services of a trained audiometrician (Health Visitor) and speech therapist have continued, whilst the respective Youth Employment Officers have arranged for school leavers to receive vocational guidance. The need was felt for the continued supervision of the pupils through a system of 'after care' and the establishment of a 'Sheltered Workshop.'

A valuable development in Carmarthenshire has been the establishment of Remedial Units (including special classes) in the Secondary Modern Schools where the following number of pupils receive special educational treatment at the age of eleven plus.

TABLE IV.—S.E.T. AT REMEDIAL UNITS (SECONDARY MODERN SCHOOLS) 1962.

Secondary Schools	Boys	Girls	Total
Carmarthen	12	—	12
Ammanford	46	14	60
Llandybie	5	3	8
Llandovery	15	3	18
Gwendraeth	16	6	22
Emlyn	13	5	18
Burry Port	4	2	6
Stradey	71	46	117 117
Coleshill	2	14	16
Stebonheath	13	4	17
	197	97	294

These Remedial Units for the special educational treatment of educationally sub-normal children in the secondary schools are complementary to Highmead Residential Special School provision since it is the policy of the Carmarthenshire Authority to treat handicapped pupils as far as possible within the context of the ordinary school.

In addition to the above, arrangements for the special educational treatment of children under the age of eleven continue to work well at Old Road School Remedial Unit where there is a class for dull pupils and another for retarded/maladjusted pupils.

TABLE V.—CLASS FOR EDUCATIONALLY SUB-NORMAL (DULL AND BACKWARD CHILDREN).

(I.Q. Range 50—80: Age range 8—12).

	Boys	Girls	Total
No. on Register at beginning of year	8	6	14
No. of leavers	1	1	2
No. of admissions	2	2	4
No. at end of year 1962	9	7	16

The class-teacher covers the full range of work applicable to the special educational treatment of slow leavers including hand-work music, drama and religious instruction. Time is given for leisure activities, and emotional play. The children are taken for walks for enjoyment and observation of simple nature studies. Much time is given to the preparatory work leading to reading in order to foster the desire to read. Much of the work is done in an incidental way through songs, games, public notices and handwork, which invite the children to understand what the word 'says.' This involves an emphasis on the oral approach and the gradual building up of vocabulary before introducing them to the book. Thereafter changes to new books provoke expressions of delight on the part of children who note each other's progress.

**TABLE VI.—TUTORIAL CLASSES FOR RETARDED/
MALADUSTED PUPILS**

(I.Q. Range 90—140+ : Age Range 6—17).

	[No. Admitted			No. Discharged			No. on Register in 1962		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Primary	3	1	4	3	1	4	3	1	4
Secondary.....	2	1	3	2	1	3	6	4	10
Total	5	2	7	5	2	7	9	5	14

These children, after initial diagnosis by the Psychologist, in consultation with the Medical Officer, and when necessary with the consultant psychiatrist, are arranged in structured groups by the teacher or they may be given sessions of individual tuition. As their condition improves, the children are either discharged completely to their ordinary school or attend on a part-time basis.

The interesting feature of this class is that it is supplied with an abundance of creative material which, in turn, allows the children to carry out a variety of activities in carefully structured groups but yet in a permissive atmosphere of benevolent discipline. The result is that the children are able to give free play to their emotions and express their difficulties in an environment specially designed to improve their mental health and educational development.

It is interesting to note that arrangements were made by the Divisional Executive for some of these children to have a holiday at the Ferryside School Camp.

During the year the Education Unit for the Partially Deaf at Tumble County Primary School continued to do good work under the direction of Miss Skidmore.

**TABLE VII.—S.E.T. OF PARTIALLY HEARING PUPILS
(TUMBLE UNIT)**

Age Range 4—13 years.

	Boys	Girls	Total
No. of children <i>Admitted</i>	3	1	4
<i>Discharged</i>	1	3	4
No. on Register Autumn Term, 1962	4	4	8*

(* including 1 boy and 1 girl part-time).

Arrangements have been made for the two senior children to return to the ordinary school and to attend part-time at the unit for oral instruction. One child has been transferred to Brighton School for the Partially Deaf in order to prepare her for possible entrance to the Mary Hare Grammar School. Another child suffering from multiple defects continues to profit from education at Wessington Court. It is hoped that in 1963 facilities for the special educational treatment of Secondary School pupils will be extended.

A number of physically handicapped children who were unable to attend school for a variety of causes were given home tuition. It is of interest to note the valuable services of the County Librarian in arranging for a systematic range of books to be supplied to the tutors of these children.

**TABLE VIII.—S.E.T. BY WAY OF HOME TUITION
(PHYSICALLY HANDICAPPED)**

	Boys	Girls	Total
No. on Register, January, 1962	12	11	23
New Cases	11	4	15
No. Discharged	8	6	14
No. on Register, December, 1962	15	9	24

A further number of children received tuition at Glangwili Hospital during their limited stay in order that their educational progress might be maintained.

**TABLE IX.—S.E.T. (SHORT TERM) AT GLANGWILI
HOSPITAL
PHYSICALLY HANDICAPPED**

	Boys	Girls	Total
No. of Pupils admitted during the year	111	109	220
No. of children discharged	106	103	209
No. of children on Register	5	6	11

In addition to the above, arrangements were made to give special educational treatment to three maladjusted girls admitted for psychiatric treatment to St. David's Hospital, Carmarthen.

**TABLE X.—S.E.T. AT ST. DAVID'S HOSPITAL,
CARMARTHEN (MALADJUSTED).**

	Boys	Girls	Total
No. of pupils admitted, 1962	—	3	3

Thirty eight (38) other children receive psychiatric treatment under the Child Guidance arrangements made with the Regional Hospital Board.

Furthermore many children who suffered from physical handicaps attended Residential Special Schools outside the Authority.

TABLE XI.—S.E.T. (LONG TERM) AT RESIDENTIAL SPECIAL SCHOOLS

		Boys	Girls	Total
(i)	Blind	2	—	2
(ii)	Partially Blind	—	1	1
(iii)	Deaf	4	4	8
(iv)	Partially Deaf	—	1	1
(v)	Delicate	1	3	4
(vi)	Physically Handicapped	7	6	13
(vii)	Maladjusted	—	1	1
(viii)	Epileptic	—	—	—
		14	16	30

School Welfare Officers who are qualified social workers have provided valuable sociological reports on the home circumstances of educationally sub-normal and maladjusted pupils. They have also facilitated the transport arrangements, through the co-operation of the Transport Officer, for transferring such children to and from special schools and units. They have also fostered a close association between teachers, parents, general medical practitioners and personnel of the School Psychological Service.

During 1962 final arrangements were in hand for the opening of the new Child Guidance Clinic at Llanelly, including ordering of equipment and furniture. It is envisaged that the new diagnostic unit will come into operation in 1963 when it will act as a focal point for the School Psychological Service as well as a base for the Remedial education service of the Local Education Authority and the consultant psychiatric service of the Regional Hospital Board. This unit will also be a centre where serving teachers can fore-gather for discussion and courses. It is of interest to note that the National Association of Mental Health, London, saw fit to publish the Plan of this Education Centre in their Journal. The success of Carmarthenshire's progressive educational policy has continued to excite the interest of outside bodies: regular visits are received from University students, of particular interest has been the visit of senior students of University College of Aberystwyth.

We were also privileged to welcome Mr. James Lumsden, H.M.I., who spent several days in the West Country visiting our establishments.

Finally, it has been possible—by dovetailing school records, including the Order of Merit and Scaled Teachers Estimates of the Eleven-Plus assessment, with the clinical records of handicapped pupils—to facilitate, through the School Psychological Service, the provision of a variety of types of education and special educational treatment, for different categories of pupils according to their age, aptitude and ability—in such a way that the quick, the slow and the handicapped have a chance to profit in accordance with the Carmarthenshire policy statement 'Keeping Open the Door of Educational Opportunity.'

In brief, there has been a close liaison between the School Psychological Service and the School Health Service and the schools Headteachers, as well as with other statutory services of the Local Authority to enable the educational progress and mental health of the children—both the fit and the handicapped to be safeguarded through a comprehensive approach to their personal problems.

CYRIL JAMES, Ph.D., B.A., B.Ed., F.B.Ps.S.

Educational Psychologist.

SCHOOL CLINICS

Location of Clinic	Type of Clinic	No. of Sessions
Permanent Clinics :		
Brynmair Clinic, Goring Road, Llanelly	Orthopaedic	Two weekly
	Asthma	One weekly
	Minor Ailments	Six weekly
	Heart Supervisory	Three monthly
	Speech Therapy	Four weekly
	Dental	As required
The Clinic, High Street, Amman- ford	Orthopaedic	Two weekly
	Asthma	One monthly
	Heart Supervisory	One monthly
	Speech Therapy	Two weekly
	Dental	As required
Pond Street Clinic, Pentrefelin, Carmarthen	Asthma	One weekly
	Heart Supervisory	One monthly
	Speech Therapy	Two weekly
	Dental	As required
The Clinic, Llwynhendy	Orthopaedic	Two fortnightly
	Dental	As required
The Clinic, Old Junior School, Brynamman	Orthopaedic	Two fortnightly
	Dental	As required
Penuel Old Vestry, St. Clears	Orthopaedic	Two fortnightly
	Dental	As required
The Clinic, Laugharne	Dental	As required
5, Broad Street, Llandovery	Orthopaedic	Two fortnightly
	Dental	As required
	Speech Therapy	Two monthly
Temporary Clinics :		
Dynevor Church Hall, Llandeilo	Speech Therapy	Two monthly
Penuel Chapel Vestry, Penuel Street, Carmarthen	Orthopaedic	Two weekly
Salem Chapel Vestry, New Road, Llandeilo	do.	Two fortnightly
The Institute, Memorial Square, Burry Port	do.	do.
Assembly Rooms, Memorial Hall, Llandybie	do.	do.
Memorial Hall, Pontyberem	do.	do.
Welfare Hall, Pontyates	do.	do.
Memorial Hall, Whitland	do.	do.
County Primary School, Garnant	do.	do.
Church Hall, Pencader	do.	do.
Bethania Chapel Vestry, Tumble	do.	do.
The Institute, Trimaran	do.	One fortnightly
Trinity Methodist Schoolroom, Kidwelly	do.	do.

Medical Inspection and Treatment Return for the Year Ended 31st December, 1962.

Number of pupils on registers of maintained primary and secondary schools:—26,133.

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age Groups inspected (By year of Birth)	No. of Pupils Inspected.	Physical condition of pupils inspected				Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory		Un-satisfactory		For defective vision (excluding squint)	For any other condition recorded at Part II.	Total Individual pupils
		No.	% of Col. 2	No.	% of Col. 2			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1958 and later	307	307	100	—	—	2	76	78
1957	983	983	100	—	—	4	204	207
1956	486	486	100	—	—	14	92	104
1955	101	101	100	—	—	4	22	26
1954	1829	1828	99.95	1	0.5	116	270	359
1953	137	137	100	—	—	11	28	38
1952	134	134	100	—	—	3	4	7
1951	1079	1079	100	—	—	78	137	203
1950	884	884	100	—	—	79	75	147
1949	154	154	100	—	—	23	14	32
1948	20	20	100	—	—	3	1	4
1947 and earlier	1850	1850	100	—	—	160	134	285
Total	7964	7963	99.99	1	0.01	497	1057	1490

TABLE B.—OTHER INSPECTIONS

Notes—A special inspection is one that is carried out at the Special request of a parent, doctor, nurse, teacher or other person. A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	...	...	2948
Number of Re-inspections	...	...	6
Total	...	...	2954

TABLE C.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	54991
(b) Total number of individual pupils found to be infested	...	294
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	...	17
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	...	—

TABLE D.—SCREENING TESTS OF VISION AND HEARING

1.	(a)	Is the vision of entrants tested ?	.....	Yes.
	(b)	If so, how soon after entry is this done ?	.....	At periodic medical inspection following admission.
2.		If the vision of entrants is not tested, at what age is the first vision test carried out ?	.....	—
3.		How frequently is vision testing repeated throughout a child's school life ?	.....	At periodic medical examinations.
4.	(a)	Is colour vision testing undertaken ?	.....	No.
	(b)	If so, at what age ?	.....	—
	(c)	Are both boys and girls tested ?	.....	—
5.		By whom is vision and colour testing carried out ?	.....	—
6.	(a)	Is audiometric testing of entrants carried out ?	.....	No.
	(b)	If so, how soon after entry is this done ?	.....	—
7.		If the hearing of entrants is not tested, at what age is the first audiometric test carried out ?	.....	Special cases only investigated.
8.		By whom is audiometric testing carried out ?	.....	Specially trained Health Visitor/School Nurse.

**PART II.—DEFECTS FOUND BY MEDICAL INSPECTION
DURING THE YEAR**

TABLE A.—PERIODIC INSPECTIONS.

Defect Code No. (1)	Defect or Disease (2)	PERIODIC INSPECTIONS			
		Entrants	Leavers	Others	Total
4	Skin	T 13	11	24	48
		O 30	39	59	128
5	Eyes—a. Vision	T 24	160	313	497
		O 11	196	286	493
	b. Squint	T 33	4	42	79
		O 20	9	45	74
	c. Other	T 11	7	29	47
		O 9	14	22	45
6	Ears—a. Hearing	T 9	3	12	24
		O 4	—	8	12
	b. Otitis Media	T 5	1	8	14
		O 12	6	10	28
	c. Other	T 2	—	1	3
		O 3	1	1	5
7	Nose and Throat	T 83	10	77	170
		O 220	27	202	449
8	Speech	T 21	10	52	83
		O 17	7	26	50
9	Lymphatic Glands	T 3	—	2	5
		O 89	10	68	167
10	Heart	T 8	15	24	47
		O 51	23	87	161
11	Lungs	T 37	10	59	106
		O 58	24	87	169

Defect Code No. (1)	Defect or Disease (2)	PERIODIC INSPECTIONS			
		Entrants	Leavers	Others	Total
12	Developmental—a. Hernia T O	1	—	2	3
		4	2	3	9
	b. Other T O	8	8	21	37
		42	1	42	85
13	Orthopaedic—a. Posture T O	3	17	15	35
		4	18	27	49
	b. Feet T O	136	21	116	273
		61	13	82	156
	c. Other T O	35	15	40	90
		27	30	45	102
14	Nervous System— a. Epilepsy T O	7	2	3	12
		7	4	13	24
	b. Other T O	2	1	6	9
		7	6	11	24
15	Psychological— a. Development T O	8	—	25	33
		8	2	43	53
	b. Stability T O	2	2	8	12
		2	2	9	13
16	Abdomen T O	3	—	1	4
		13	2	13	28
17	Other T O	10	10	25	45
		23	29	73	125

T.—Pupils requiring Treatment.

O.—Pupils requiring Observation.

TABLE B.—SPECIAL INSPECTIONS

No. (1)	Defect or Disease (2)	Pupils requiring Treatment (3)	Pupils requiring Observations (4)
4	Skin	22	46
5	Eyes—a. Vision	262	389
	b. Squint	35	28
	c. Other	12	18
6	Ears—a. Hearing	16	17
	b. Otitis Media	7	16
	c. Other	—	1
7	Nose and Throat	68	149
8	Speech	73	40
9	Lymphatic Glands	4	50
10	Heart	33	107
11	Lungs	64	83
12	Developmental—a. Hernia	—	3
	b. Other	25	28
13	Orthopaedic—a. Posture	11	10
	b. Feet	104	61
	c. Other	64	40
14	Nervous System—a. Epilepsy	13	21
	b. Other	—	6
15	Psychological—a. Development	41	42
	b. Stability	30	21
16	Abdomen	3	6
17	Other	29	51

**PART III.—TREATMENT OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY
AND SPECIAL SCHOOLS)**

**TABLE A.—EYE DISEASES, DEFECTIVE VISION AND
SQUINT**

	Number of cases known to have been dealt with
External and other, excludng errors of refraction and squint	10
Errors of refraction (including squint)	1971
Total	1981
Number of pupils for whom spectacles were prescribed	424

**TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE
AND THROAT**

	Number of cases known havebeen dealt with
Received operative treatment :—	
(a) for diseases of the ear	145
(b) for adenoids and chronic tonsillitis	729
(c) for other nose and throat conditions	404
Received other forms of treatment	10
Total	1288
Total number of pupils in schools who are known to have been provided with hearing aids :—	
(a) in 1962	5
(b) in previous years	21

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	2405
(b) Pupils treated at school for postural defects	—
Total	2405

TABLE D.—DISEASES OF THE SKIN
(excluding uncleanliness, for which see Table C of Part I)

	Number of cases known to have been treated
Ringworm—(a) Scalp	—
(b) Body	—
Scabies	—
Impetigo	4
Other Skin Diseases	112
Total	116

TABLE E.— CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance clinics	38

TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	248

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	63
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	1904
(d) Other than (a), (b) and (c) above :— Please specify :—	
General Surgical	1191
General Medical	1056
Asthma	76
Total (a)—(d)	4290

4. DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING THE YEAR ENDED 31st DECEMBER, 1962.

Number of pupils on the registers of maintained primary and secondary schools (including nursery and special schools) in January, 1963, as in Forms 7, 7M and 11 Schools, 26,133.

(a) Dental and Orthodontic work

(I) Number of pupils inspected by the Authority's Dental Officers :—

(i) At periodic inspections	16946	} Total	18349
(ii) As specials	1403		

(II) Number found to require treatment

16300

(III) Number offered treatment.....

16300

(IV) Number actually treated

6,150

(b) Dental work (other than orthodontics) (*Note : Figures relating to orthodontics should not be included in Section (b).*)

(I)	Number of attendances made by pupils for treatment, excluding those recorded at (c) (i) below			10,444
(II)	Half-days devoted to :—			
	(i) Periodic (School) inspection	332	} Total	1,971
	(ii) Treatment	1639		
(III)	Fillings :—			
	(i) Permanent Teeth	4676	} Total	6,208
	(ii) Temporary Teeth	1532		
(IV)	Number of Teeth Filled :—			
	(i) Permanent Teeth	3815	} Total	5,256
	(ii) Temporary Teeth	1441		
(V)	Extractions :—			
	(i) Permanent Teeth	1034	} Total	6,724
	(ii) Temporary Teeth	5690		
(VI)	Administration of general anaesthetics for extraction			3,237
(VII)	Number of pupils supplied with artificial teeth			46
(VIII)	Other operations :—			
	(i) Permanent Teeth	1420	} Total	2,209
	(ii) Temporary Teeth	789		

(c) Orthodontics :—

(i)	Number of attendances made by pupils for orthodontic treatment	653
(ii)	Half-days devoted to orthodontic treatment	51
(iii)	Cases commenced during the year	114
(iv)	Cases brought forward from previous year	72
(v)	Cases completed during the year	49
(vi)	Cases discontinued during the year	38
(vii)	Number of pupils treated by means of appliances	90
(viii)	Number of removable appliances fitted	107
(ix)	Number of fixed appliances fitted	—

