Contributors

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EDUCATION COMMITTEE

Annual Report

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

for the Year ended 31st December, 1964

LLANELLY : Printed by the Llanelly Mercury Printing Co., Ltd.



Carmarthenshire County Council

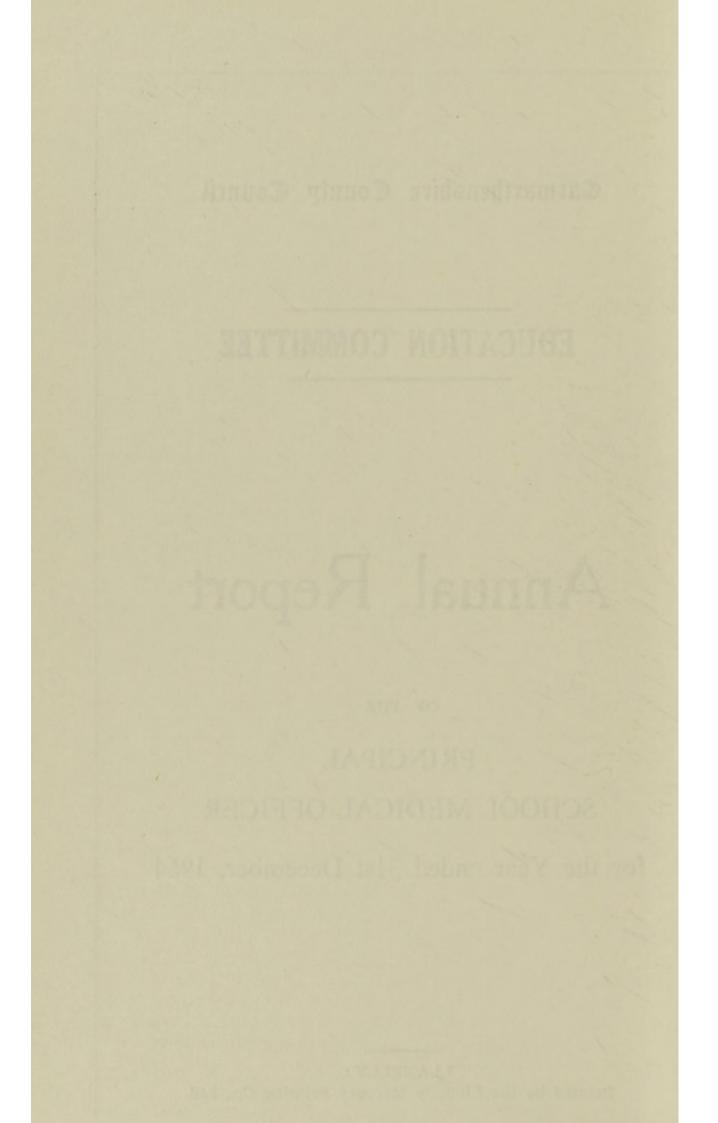
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CARMARTHENSHIRE COUNTY COUNCILIBRARY

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EDUCATION COMMITTE

ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR ENDED 31st DECEMBER, 1964.

Mr. Chairman, Aldermen and Councillors,

I have the honour to present my annual report on the School Health Service for 1964.

The position of the medical staff remains satisfactory. With the resignation of Dr. Anna Davies it was a case of hail and farewell as she was only appointed last year. However, the vacancy was soon filled with the appointment of Dr. Audrey Jones who has done good work for the Authority in a temporary and relief capacity for a number of years. An additional Dental Officer, Mrs. M. N. Davies, joined the staff in October, 1964.

The pattern of routine medical inspection has remained much as before and all the schools were covered. With regard to referrals for further investigation, we have had full co-operation from the consultants, and the general medical practitioners.

In the infectious disease field no cases of poliomyelitis were notified. There was a drop in the incidence of measles. Cases of verrucae (plantar warts) were reported in increasing numbers in the Secondary Schools in the Llanellv Divisional area, and a survey was under way at the end of the year. The need for extending the survey to other parts of the County will be assessed later. Recommendations were made with regard to preventive measures in the spread of the disease.

It is most difficult to assess how many school children smoke in the County. The Central Council for Health Education sent a mobile unit into the County to show films and to discuss with pupils in secondary schools the incidence of disease as a result of smoking. Such a campaign should be repeated possibly every two or three years to get at the impressionable ages.

Although the children in our schools are in a satisfactory physical condition, I still feel that not enough time is devoted to physical education. I would like to see each secondary school with more facilities, in particular, swimming pools which I consider a necessity. Certain schools have primitive changing facilities, lack of baths, showers and hot water. The child psychiatric service is still inadequate and the Welsh Hospital Board has not yet appointed a Child Psychiatrist for South West Wales in spite of the promises made. The position is tragic in that there is a long waiting list and not a hope of consultation and treatment.

The work of the school dental service is reported on by the Principal Dental Officer. I need only endorse his comments on the service.

I am grateful to you for your help, encouragement, and the kind consideration you 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, 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.

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.

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.

Anna Ll. Davies, B.Sc., M.B., B.Ch. (resigned 8th March).

Audrey A. Jones, M.B., Ch.B. (commenced 20th April).

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

*Gladys M. Herbert, M.R.C.S., L.R.C.P., D.P.H. (parttime).

*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.

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

Mrs. M. N. Davies, B.D.S., L.D.S., R.C.S. (commenced 19th) October).

P. M. Llewelyn, 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. (resigned 30th June). Mrs. J. V. Jones, L.C.S.T. (commenced 1st September). Chief Nursing Officer: Miss I. John, S.R.N., S.C.M., H.V.Cert. Educational Psychologist: C. B. E. James, B.A., B.Ed., Ph.D., F.B.P.S. Consultants available for School Health Service: Orthopædic Surgeons: G. D. Rowley, B.Sc., 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., Carmarthen. R. E. Packer, M.B., B.Ch., D.O.M.S., Llanelly. Ear, Nose and Throat Surgeons: T. I. Williams, F.R.C.S., Llanelly. S. Morgan, B.Sc., 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, B.Sc., 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., L.R.C.P., F.D.S., R.C.S., D.D.O, R.F.P.S., London.

Dental Surgeon:

E. J. R. Morgan, M.B., F.D.S., R.C.S.

Chest Physicians:

J. T. Jones, B.S.c., 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:

J. Farr, M.B., B.S., D.P.M. E. J. Eurfyl Jones, M.A., B.M., B.Ch., D.P.M. N. J. C. McGill, M.B., B.S., D.P.M. C. C. Beresford, M.B., B.S., 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., M.C.Path., Dip. Bact.

NURSING

District	Nurse		Qualifications
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	 G. M. Burford		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.
	R. M. Walters		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	 D. R. J. Edwards		S.R.N., 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		
Llangendeirne	 (Ceased duti M. E. Thomas	ies 3	S.R.N., S.C.M., H.V.Cert.
Llandovery	 J. Jones		S.R.N., S.C.M., H.V.Cert.
Cynwyl Elfed	 A. E. Jones		S.R.N., H.V.Cert.
Whitland	 M. L. Morris		S.R.N., S.C.M., H.V.Cert.

COMMUNICABLE DISEASES

For many years, communicable diseases mainly affecting children have been confined to measles and whooping cough, but it is pleasing to note that in recent years the incidence of whooping cough in the County has decreased. Immunisation against the disease has been a major factor in this decrease, and 108 cases of whooping cough were notified during 1964; only four were notified in 1963.

Notifications of measles and whooping cough in the last ten years were as follows:---

		Measles.	Whooping Cough.
1955		 3094	 130
1956	M.1.2	 577	 227
1957		 117	 134
1958		 1731	 42
1959		 308	 34
1960		 985	 176
1961		 1747	 100
1962		 300	 2
1963		 1257	 4
1964		 844	 108

Acute Poliomyelitis.—There have been no cases of acute poliomyelitis for the last two years. There were three cases in 1962.

Vaccination against poliomyelitis was introduced in 1956, and there have been only 10 cases (7 of which were children) of acute poliomyelitis in the County in the following seven years. None of these patients had been vaccinated.

Between 1951 and the introduction of vaccination in 1956, 104 cases of acute poliomyelitis occurred as follows:---

	1 Marian	N 10 1		Number		
	Year		A Actor	Children under 15 years of age	Others	Total
1951	2.8 <u>.</u>			31	6	37
1952	CR	·····		17	12	29
1953			ar all	9	5	14
1954				2	I	3
1955				II	8	19
1956				-	2	2
	Total			70	34	104

Verrucæ.—During the Autumn term an increasing number of reports were received of school children in the Llaneily Divisional area being infected with verrucæ. As a result it was decided to conduct a survey of secondary schools in the area to determine the extent of the outbreak. The survey was in progress at the end of the year and a full report on the outbreak will appear in my next report.

Immediate preventive measures were undertaken, i.e., the treatment of floors of gymnasia, shower baths, footbaths and changing rooms daily with a suitable disinfectant.

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 Department of Education and Science. 8,810 children were examined in the routine age groups and 2,979 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.—88 cases required treatment and 252 cases were referred for observation.

Eye Defects.—Treatment was advised for 743 children with defective vision and 134 children with squint, while 974 cases of defective vision and 145 cases of squint were referred for observation.

Ear Conditions.—62 cases of defective hearing were referred for treatment and 63 for observation. Treatment was required for 32 cases of Otitis Media (ear discharge) and a further 105 cases were referred for observation. 3 cases of other ear conditions were also referred for treatment and 5 for observation.

Nose and Throat Conditions.—There were 247 cases of nose and throat defects (including enlarged tonsils and adenoids, sinusitis, antral conditions, etc.) requiring treatment, and a further 965 were referred for observation.

Heart Diseases.—121 cases with suspected heart disease were referred for specialist advice and 343 cases referred for observation.

Chest Diseases.—175 cases of various chest diseases were referred for treatment and 335 for observation.

Orthopædic Defects.—Treatment was advised for 757 orthopædic defects, 568 of which were foot defects, and 727 cases, 420 of which were foot defects, were referred for observation. Diseases of the Nervous System.—68 cases suffering from diseases of the nervous system, 52 of which were epileptics, were referred for specialist advice and 85 cases (51 epileptics) were referred for observation.

Psychological Cases.—Specialist advice was recommended in 98 cases of psychological disorders and 230 cases were referred for observation.

Speech.—Treatment was advised for 177 cases of defective speech and 179 cases were referred for observation.

Physical Condition.—All the 8,810 children examined were considered to be in a satisfactory 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, uncleanliness, etc. 811 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 2,533 home visits.

"Following-up" is also carried out by the School Medical Officers by periodic reviews, and many special visits were made to Schools to examine special cases.

Minor Ailments.—The arrangements of the Authority for the treatment of cases of minor ailments at local authority clinics were discontinued during the year as the numbers involved did not justify special arrangements. Treatment is now undertaken either at hospital out-patient departments or at the surgeries of general medical practitioners. 78 cases of skin diseases 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. G. S. Forrester and Mr. A. Philipp held sessions at the Ophthalmic Centre at the West Wales General Hospital, Carmarthen, and Mr. G. S. Forrester and Mr. R. E. Packer 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.

Chrone See	Outpatients	Inpatients	Total
West Wales Hospital	827	22	849
Brynmair Clinic and Llanelly Hospital	912	27	939
Amman Valley Hospital	213	-	213
Other Hospitals	4	2	6
Truch			
Totals	1956	51	2007

2,007 children were dealt with by the Eye Specialist during the year, viz:-

Glasses were prescribed for 454 children and records held by the School Medical Officer showed that 421 had been provided with glasses at the end of the year.

258 children were on the waiting list for specialist ophthalmic examination on the 31st December, 1964, viz:—

Carmarthen	 213
Llanelly	 40
Amman Valley	 4
Other Hospitals	 I
Total	 258
Total	 230

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 Secretaries. 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	13	222	67	302
Llanelly Hospital	35	224	80	339
Amman Valley Hospital	-	87	II	98
Other Hospitals	5	31	9	45
Totals	53	564	167	784

Comparison of the waiting lists at the end of 1963 and at the end of 1964 is as follows:---

Hospital		Waitir Spec Exami	ialist	Waitin admi to Ho	ssion	Total		
		At 31 Dec., 1963	At 31 Dec., 1964	At 31 Dec., 1963	At 31 Dec., 1964	At 31 Dec., 1963	At 31 Dec., 1964	
West Wales and Llandovery	1	20	_	45	116	65	116	
Llanelly		-	-	49	22	49	22	
Amman Valley		8	5	36	9	44	14	
Other Hospitals		8	15	I	8	9	23	
Total		36	20	131	155	167	175	

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

Partially Hearing Children.—53 children were submitted to audiometric tests and 9 of them were found to be suffering from defective hearing and were fully investigated.

Nine children are known to have been provided with hearing aids during the year, and 23 were known to have been supplied with them in earlier years. Partially Deaf Unit.—At the end of the year, there were 12 fulltime and two part-time 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.

Asthma.—The Asthma Clinics at Llanelly and Carmarthen, under the care of Dr. E. T. Davies-Humphreys, and at Ammanford under the care of Dr. J. G. E. Collins, continued to function successfully. One session per week is held at each clinic. 1,417 attendances were made at the Clinics during the year. There were 55 new cases. Further information is given in the following table:—

Terminon with a state to the	Ammanfo	rd	Llanelly	Ca	armarth	ien	Total
No. of cases on 1st January, 1964	20		237		III		368
No. of new cases	13		29		13		55
No. withdrawn	8		124		73		205
No. of cases on 31st December	25		142		51		218
	371		723		323		1417
No. of individual cases treated	15		48		25		88

Treatment was on the same lines as for the 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, 1964, 2,600 cases were being attended to for all Authorities, viz.—

County Education Committee	 1182
Health and Public Health Committee	 1389
West Wales Hospital Management Committee	 II
Glantawe Hospital Management Committee	 18

shatic rreatment	School, for the p	Canana Canana Canana		County Education Commit	on	Other Authorit		Total
Paralysis :	rat. Char	iqual	renice	mal 1	8.31	houses	C osti	
Infantile	· ·····			15		15		30
Spastic				23		6		29
Obstetrical				-		-		-
Other	Chine .							-
Congenital Deform				80		79		159
Infective Condition				-		I		I
Non-Infective Co	nditions o	of Bon	es and					
Joints :						10.339		
Rickets				17 2011		in Z s		obuto
Other Statis and Destruct	Defeate			3		1		4
Static and Postura				1038		1286		2324
Traumatic Deform	nties			2		I		3
Multiple Defects						-		_
Miscellaneous				21		29		50
21 63	Total	s		1182		1418		2600

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

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 3 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, three children referred from the Orthopædic Clinics were on the waiting list for hospital inpatient treatment, as compared with five on the 31st December, 1963.

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:—

Land Line	Inpat	tients	Outpatients		
Hospital	Crippling Defects	Fractures	Crippling Defects	Fractures	
West Wales General Hospital		_*	69	135	
Llandovery Hospital	-	-	26	22	
Swansea Hospital		I	3	20	
Morriston Hospital	12	25	24	62	
Totals	12	26	122	239	

50 children with orthopaedic conditions were treated as inpatients at West Wales Hospital.

During the year, there were 14,758 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	 499	Llandeilo		136
Garnant	 54	Carmarthen		509
Pontyberem	 81	Burry Port		133
Llandovery	 106	Pencader		28
St. Clears	 103	Brynamman		53
Trimsaran	 26	Llandybie		78
Ammanford	 365	Pontyates	1	57
Whitland	 53	Llwynhendy		142
Kidwelly	 38	Llanybyther		35
Tumble	 104			

A summary of the work undertaken under the orthopædic arrangements during 1964 is given in the following table:—

Children aborning aborning cert	County Education Committee	Other Authorities	Total
			CONTRACTOR
Number of individual cases under			-
Scheme on 1st January, 1964		1174	2498
Number of new cases during the year	296	480	776
Number of individual cases dealt with	1620		0
during the year Number of cases withdrawn from	1020	1654	224
Scheme	438	236	674
Number of cases under the Scheme on	450	230	0/4
the 31st December	1182	1418	2600
Total Number of attendances made at		-4	
the Clinics	9639	5119	14758
Number of individual cases received			
remedial exercises by Sisters	306	_	306
Number of individual cases massaged			
by Sisters			-
Number of home visits by Sisters	477	447	924
Number of cases examined by visiting		11 A.	in manual a
Orthopaedic Surgeons	195	149	344
Number of cases recommended in-		State of the state	
patient hospital treatment by		8	
Surgeons	II	0	19
and a second s	3	הפטידבוב כו	AL ADDO

Speech Therapy.—Five speech therapy clinics are held regularly in the following centres:—

Carmarthen			weekly
Llanelly	 	4	weekly
Ammanford		2	weekly
Llandeilo	 	2	monthly
Llandovery		2	monthly

Since 1958 four sessions a month had also been held, by arrangement with Cardiganshire County Council, at Highmead Residential School for educationally subnormal children. It is a matter of regret, however, that pressure of work in the County, with a continuing long waiting list of cases, made it necessary to discontinue these sessions. The additional sessions available have enabled the speech therapist to visit more schools to discuss cases with teachers and to keep the waiting list under review.

130 new cases were referred to the clinics and treatment was recommended for 116 of them. Fourteen 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:—

	C	Carman then					High- mead	Total
Defects of Articulation Stammer Excessive or inadequate		10 3	 25 11	 7 1	 4 1	 2 I		 48 17
		3 12	 7 10	 6 6	 I	 2 4	 -	 18 33
Totals		28	 53	 20	 6	 9	 _	 116

224 cases received treatment at the clinics, 52 of which were treated for the first time during the year. 1,916 attendances were made at the Clinics as follows:—

Sessions		Treated		Attendances
 70		57		384
 142		65		384 884
 68				378
 16				378 69
 17				76
 18		20		125
 331	No. 5	224	· ·····	1916
	70 142 68 16 17 18	70 142 68 16 17 18	70 57 142 65 68 50 16 13 17 19 18 20	70 57 142 65 68 50 16 13 17 19 18 20

77 cases were discharged from the clinics:-

31 with their defects cured, 25 sufficiently improved as not to warrant further attendances, 16 for lack of co-operation and unsatisfactory attendances, 3 attained school-leaving age and 2 left County.

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		 	55
Llanelly		 	55 115*
Ammanford		 	5
Llandeilo		 	2
Llandovery		 	7
	Total	 	184

*83 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.

	Llanelly	Ca	rmarth	nen Ar	nmanfo	ord	Total
Observation following acute				apla	nell		
Rheumatism	4		5		3		12
Chorea	2		2		2		6
Congenital Lesions	13		8		7		28
Anaemia	2		-		I		3
Undergoing Investigation Conditions of no organic	16		18		18		52
significance and others	24		14		10		48
Total	61		47		41		149

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

The congenital lesions were classified as follows:-

	Llanelly	Ca	Total			
Ventricular Septal Defect	 7		4	 6		17
Dulmanany Stangeig	 2		3	 I		6
Fallate Tatralogy	 I		-	 -		I
Patent Ductus Arteriosus	 		-	 		
Aortic Stenosis	 3		I	 -		4
Aortic Incompetence	 -		-	 -		_
Total	 13		8	 7		28

187 attendances (71 at Llanelly, 56 at Carmarthen, and 60 at Ammanford) were made at the clinics.

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

	Llanelly	Ca	armarth	nen Ar	nmanfo	ord	Total
No. on books 31st Decem-	s theref	ics.	nito s	8: 10	ATOW	-	odr
ber, 1963	25	Tim	28	and -	22	im	75
No. of new cases, 1964 No. of cases withdrawn,	25 36		17		22		75
1964	26		19		23		68
No. on books 31st Decem-			and the second		Innel		
ber, 1964	35		26		21		82

Tuborculos's .-- 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
T	'otal number of children examined			191212	
	during 1964	596	231	2	829
N	lumber of these children who were :			6 1170	-14. 51
	(a) Contacts (b) Under school age	191	64	-	255
2	(c) Found to be suffering from :	188	76	-	264
	(i) Respiratory Tuberculosis	2	3		5
	(ii) Non-Respiratory		,		,
	Tuberculosis	-	_	-	-
	(d) Still under observation but not	and the state			
	diagnosed at 31/12/64	27	3	and the second	30
	(e) Found with no evidence of active tuberculosis	567	225	2	794
	active tuberculosis	507	223	2	/94
A	nalysis of Non-Respiratory cases :				
	(a) Spine		-	-	-
	(b) Hip	-	-	-	-
	(c) Knee		States and the second		
	(a) Clanda	Street Longs	the second second second		_
	(f) Shoulder	-		-	-
	(g) Other sites	-		-	-
_			in sites of	Cal Longer	
1	reatment :	- Aleranda		eliseala -	
1	(a) Number treated in Sanatoria(b) Number treated in Hospital	2	6 1	I	7
	(c) Number treated in Surgical	2	-		3
	Hospital	-	- 0	-	_
	(d) Number treated in Open-Air				
	School	for t he Grad	and the second		
-					

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

- School children of 13 years of age and over.
 Pupils of independent schools of 13 years of age and over.
 Students attending further education establishments.

The L. T. Cohen I Torner		School Children	Pupils attending independent schools	Students
(I) No. eligible		2905	33	107
(2) No. of (1) skin tested		2495 (85.89%)	30 (90.91%)	107 (100%)
(3) No. of (2) who were :			amadims por	to hmar (*(*)
(a) found to be negative		2132 (85.45%)	26 (86.67%)	32 (29.91%)
(b) found to be positive		236 (9.46%)	3 (10%)	72 (67.29%)
(c) Failed to attend for read of skin test	ding 	127 (5.09%)	I (3.3%)	(2.80%)
(d) Had BCG vaccination		2120 (84.97%)	26 (86.67%)	31 (28.97%)
(e) No. refused vaccination having skin test or medically unfit for cination	were	12		I

The following is a summary of the work carried out during 1964:—

CHILD GUIDANCE.

REPORT OF THE CONSULTANT CHILD PSYCHIATRIST.

The Consultant Child Psychiatrist provides a specialist medical service in this field. This specialist opinion is available to the School Medical staff and to the General Medical Services. It is hoped to reach all children at school who are maladjusted to the extent of requiring specialist help. Lesser degrees of maladjustment, of course, are treated by the School Medical Officers themselves or by the family doctor.

Unfortunately the services of the Consultant Child Psychiatrist are shared with Swansea and Pembroke. This means that he does not have the time to provide a comprehensive service for all areas. He is based in Swansea, and the geographical distance prevents him from giving a proper service for Carmarthenshire children. It is to be hoped that a Consultant Child Psychiatrist will be soon appointed by the Welsh Hospital Board to serve West Wales. A Consultant Child Psychiatrist based in West Wales would then be able to provide more continuous care for the children of Carmarthenshire. Many types of personnel within the education system may, of course, observe difficulties in a child which might suitably be investigated by the Child Guidance Service. It is possible that some of these potential referring agencies are unaware of the provisions of the Service, and it may be that many cases remain unseen. For this reason I would like to give a short description of the type of case which I think should be referred through school medical channels to the Clinic:

- 1. Behaviour Disturbances and not simply when they are aggressive in type.
- 2. Neurotic States where there is clearly a subjective disturbance in the child, but where, nevertheless, there may be no behaviour disturbance.
- Developmental Errors in terms of general personality attributes and not just in terms of intellectual development.
- Educational Retardation insufficiently explained by poor intellectual endowment or extraneous causes such as school absence through physical illness.
- 5. Physical Disorders commonly accepted to have emotional origins such as habit spasms, incontinence of urine, faeces, etc.
- 6. Delinquency, particularly when there is marked inconsistency with family moral values.

It will be appreciated that cases are referred to the Clinic from other than school medical sources. These other referring agents include other consultants, general practitioners, the Children's Department, and the Probation Service. In that children may reach the clinic from so many sources it will be seen that there is a paramount need for co-operation in work done with any one child. The appointment of a Consultant Child Psychiatrist in the area would facilitate this co-operation.

I append statistics about the patients seen during the last year, although with a serious misgiving that many of these patients were not seen intensively enough:—

Sessions	New Cases	Total Attendances
19	 20	 119

J. McDONALD, M.A., M.B., Ch.B., D.P.M.

Consultant Child Psychiatrist.

REPORT OF THE PRINCIPAL DENTAL OFFICER.

The dental staff employed by the County during 1964 consisted of myself, four full-time dental officers and one part-time dental officer, who recommenced duties in April for 2 sessions per week. One of the full time dental officers is over the retiring age and is retained in a temporary capacity. Mrs. M. N. Davies joined the Couny staff as a full-time dental officer in October.

The total school population consisted of 26,958 children (16,510 primary and 10,448 secondary). In view of the ratio of dental officers to children, routine inspections and treatment were confined to the primary schools, although treatment was available for secondary school children who requested it at the clinics.

All the primary schools in the rural area of the County were visited for inspection. In the Llanelly divisional area about a third of the schools were visited, but requests for treatment continued to increase and a large number of secondary school children attended for treatment.

11,506 children were examined, of whom 9,767 were found to require treatment, a percentage of nearly 85 per cent.

Consents to treatment were received in respect of 7,237 of the 9,767 children found to require treatment, but 2,235 of those who consented either refused treatment or failed to attend when appointments were made. The net number of consents was reduced to 5,002 a percentage of 51.2 per cent. as compared with 48.2 per cent. for the preceding year.

While it is appreciated that many school children receive treatment from general dental practitioners, these figures show that a number of school children do not receive regular dental treatment from either the school dental service or from general dental practitioners.

It is hoped in the next few years to introduce, gradually, a scheme whereby all the school children will be transported, if necessary, to fully equipped new dental clinics for treatment and to discontinue the very unsatisfactory practice of dental officers having to work with portable equipment in school clinics not equipped for dental work, in school classrooms, chapel vestries and memorial halls.

The following work was undertaken during the year:---

Sessions for inspection		11553 1000	168
Treatment sessions at the four fixed cl			904
Treatment sessions at schools and temp	orary	clinics	553
			5,450
Attendances for treatment			8,752
			4,832
			4,970
Teeth received minor treatment		7 N	1,217
Administrations of general anaesthetics			2,232

28 children were supplied with dentures as compared with 42 in 1963.

The ratio of teeth extracted to those filled during the year was 0.97 to 1. Over the last 10 years there has been a considerable improvement in this respect. The ratio for 1954 was 2.27 to 1. Orthodontic treatment was undertaken for 45 new cases and 96 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		 45
(b) Cases carried forward from previous	year	96
(c) Cases completed during the year	in printinges k	 26
(d) Cases discontinued during the year		 19
(e) Cases treated with appliances	the shift	72
(f) Removal appliances fitted	b	53
(g) Fixed appliances fitted		 _
(h) Number of cases supplied with dent	ures	 28

I should like to record my thanks to Mr. R. E. Rix, M.R.C.S., L.R.C.P., F.D.S., R.C.S., D.D.O., R.F.P.S., our Consultant Orthodontist, for all his assistance in connection with the various difficult orthodontic cases. I should also like to thank Mr. E. J. R. Morgan, M.B., F.D.S., R.C.S., Consultant Dental Surgeon, 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.

Finally, I should like to thank my colleagues in the dental service, the medical staff, headteachers and the administrative staff for their ready co-operation and assistance received during the year.

WILLIAM LLEWELYN,

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 24,670 on a particular day, milk and meals were being supplied as follows:—

Milk	 18,716	children	(75.86%)
Meals	 18,497	children	(74.98%)

This compares with percentages of 74.63% and 72.95% 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			 	164
Sterilized			 	-
Untreated			 	49
Reconstituted	Dried	Milk	 	I

Under the Milk (Special Designation) Regulations, 1963, 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 fæcal 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. 4,093 parents were present at the medical inspections during the year, equivalent to a percentage of 34.54. 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

Ascertainment

During 1964, 24 children (16 boys and 8 girls) were assessed as needing special educational treatment at special schools. Their classification was as follows:—

	Boys	Girls	Total
Physically handicapped	I	 I	 2
Delicate	2	 I	 3
Educationally Subnormal	13	 5	 18
Epileptic	-	 I	 I
	-	-	-
Total	16	8	24
		/	

Admissions to Special Schools

16 children as follows were admitted to Special Schools:-

	Lis	aiting t at 2/63	Asse 19	and the second	Total
a a girla) warmalaniga years	B.	G.	B.	G.	te dalarage
Physically handicapped	I	_		I	2
Delicate	-	_	I	I	2
Educationally Subnormal	5	3	2	2	12
Total	6	3	3	4	16

Number at Special Schools

On the 21st January, 1965, the number of children at residential special schools was as follows:---

	Boys	Girls	Total
Blind	I	 I	 2
Deaf	3	 4	 7
Partially Hearing		 2	 2
Physically handicapped:			
Spastics	I	 2	 3
Others	4	 3	 7
Delicate	I	 2	 3
Maladjusted		 I	 I
Educationally Subnormal	25	 18	 43*
	-	_	-
Totals	35	33	68
	and the second second	A DECEMBER OF	No. of Concession, Name

*All at Highmead Residential Special School.

In addition one diabetic was boarded in a home and attended an ordinary school.

Waiting List

The waiting list for special school accommodation on the 21st January, 1965, was as follows:—

	Physically Handicapped	Delicate	E.S.N.	Epileptic	Total
1. Total number requiring places	B. 2 G. —		41 26	ī	44 27
2. Number (of (1)) whose parents had refused consent.	В. 1 G. —	-	2 7	r.	3 8
3. Number (of (1)) who had been on waiting list for more than year.	В. 1 G. —		29 22		30 22

All the educationally subnormal children requiring places at special schools, 9 of whom (5 boys, 4 girls) were under 10 years of age, were receiving special educational treatment at ordinary schools pending admission.

Education in accordance with Section 56 of the Education Act, 1944

10 physically handicapped children were being educated in hospitals on the 21st January, 1965, while 26 children, as follows, were receiving home tuition:—

5		Boys	Girls	Total
Physically handicapp	ed:			
Heart		2	 2	 4
Spastics		I	 -	 I
Others		II	 4	 15
Delicate		I	 3	 4
Educationally Sub	normal	-	 I	 I
Epileptic		-	 I	 I
		-	-	-
Totals		15	II	26
		-	-	-

Special Classes and Units

There were, on the 21st January, 1965, 14 pupils (6 boys and 8) girls) at the Partially Hearing Unit, Tumble County Primary School, 12 (5 boys and 7 girls) being full-time pupils.

At the Maladjusted Unit, Old Road, Llanelly, there were 3 pupilss (2 boys, 1 girl) full-time and 6 pupils (4 boys and 2 girls) attending; part-time.

SCHO	OL CLINICS	
Location of Clinic	Type of Clinic	No. of Sessions
Permanent Clinics :	ross ynteelder)	economy yearing
Brynmair Clinic, Goring Road,		And
Llanelly		Two weekly
	Asthma	
	Heart Supervisory	
	Speech Therapy	Four weekly
CRIDONICAL SCHOOLS)	Dental	As required
The Clinic, High Street, Amman-		
ford		Two weekly
	Asthma	
	Heart Supervisory	
	Speech Therapy	Two weekly
	Dental	As required
Pond Street Clinic, Pentrefelin	S. Contractor and Store	12 20 19 19 19
Carmarthen		One weekly
	Heart Supervisory	One monthly
	Speech Therapy	Two weekly
	Dental	As required
The Clinic, Llwynhendy	Orthopaedic	Two fortnightly
The Clinic, Llwynhendy	Dental	As required
the chine, Old junior School,		by setting the part of
Brynamman	Orthopaedic	Two fortnightly
	Dental	As required
Penuel Old Vestry, St. Clears	Orthopaedic	Two fortnightly
	Dental	As required
The Clinic, Laugharne	Dental	As required
	Orthopaedic	Two fortnightly
	Dental	As required
	Speech Therapy	Two monthly
The Clinic, Pencader C.P. School	Orthopaedic	One fortnightly
ALL	Dental	As required
The Clinic, Llanybyther	Orthopaedic	One fortnightly
	Dental	As required
Tomporomy Clinics		
Temporary Clinics :		tord, since
Memorial Hall, Whitland	Orthopaedic	Two fortnightly
	Dental	As required
Trinity Methodist Schoolroom,		
Kidwelly	Orthopaedic	One fortnightly
	Dental	As required
Penuel Chapel Vestry, Penuel		
Street, Carmarthen		Two weekly
Salem Chapel Vestry, New Road,		
Llandeilo	Orthopaedic	Two fortnightly
	Speech Therapy	Two monthly
	Dental	As required
The Institute, Memorial Square,		m
Burry Port		Two fortnightly
Assembly Rooms, Memorial Hall,		ANTI DIOI
Llandybie Memorial Hall, Pontyberem	Orthopaedic	Two fortnightly
Memorial Hall, Pontyberem	Orthopaedic	Two fortnightly
Welfare Hall, Pontyates	Orthopaedic	I wo fortnightly
	Orthonsedic	Two fortnightly
County Primary School, Garnant	Orthopacuic	I wo fortinghtly
County Primary School, Garnant		I wo fortingnity
County Primary School, Garnant Bethania Chapel Vestry, Upper Tumble		Two fortnightly

Medical Inspection and Treatment Return for the year ended 31st December, 1964.

Number of pupils on the registers of maintained primary and secondary schools (including nursery and special schools) in January, 1965–26,958.

PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS).

TABLE A.—PERIODIC MEDICAL INSPECTIONS.

oseptene ostyce of planta of planta	No. of pupils	Physical of pupils i		No. of pupils found	Pupils found to require treatment (excluding dental diseases and infestation with vermin)			
Age Groups inspected (by year of Birth)	who have received a full medical examina- tion	Satis- factory	Un- satis- factory	not to warrant a medical examina- tion	For defective vision (exclud- ing squint)	For any other con- dition recorded at Part II.	Total In- dividual pupils	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
1960 and later	739	739		gen 96	2	185	186	
1959	1459	1459	-	aren n	18	322	340	
1958	627	627	-		7	134	141	
1957	86	86	-100	(Benny)	3	22	25	
1956	1807	1807	-		112	279	376	
1955	259	259		a services	19	33	47	
1954	221	221		2	IO	38	46	
1953	1015	1015	-	loons?	53	113	165	
1952	724	724	_	- Leog	75	92	152	
1951	202	202			26	22	46	
1950	350	350		a sources	24	30	51	
1949 and earlier	1321	1321	1.4.		141	113	243	
Total	8810	8810	-		490	1383	1818	

TABLE B.—OTHER INSPECTIONS

	inspection is one that of a parent, doctor,			
A re-inspection periodic medic	n is an inspection ari al inspections or out	sing out of of of a special	one of inspe	the ction.
Number o	of Special Inspections			2955
Number of	of Re-inspections			24
	Total			2979
				18.1

TABLE C.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons... 50851
(b) Total number of individual pupils found to be infested 235
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) 9
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944 —

PART IL-DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS DURING THE YEAR MEDICAL INSPECTION AND TREATMENT

						5-									
1	Inspections (7)	22	60	253	450	34	46	16	13	37	30	5	29	3	
	Total (6)	99	192	490	524	IOO	66	36	36	25	33	27	46	1	9
Ispections	Others (5)	23	98	298	306	42	52	18	18	14	15	6	24	1	3
Periodic Inspections	Leavers (4)	17	24	162	192	3	6	6	3	4	5	4	7	1	11
	Entrants (3)	26	70	30	26	55	38	I2	15	7	13	14	45	1	11
199		H	0	H	0	H	0	H	0	F	0	H	0	H	0;
	Defect or Disease (2)		OKIII	Winian	Бусъ—а. VISIOII	Contract	o. oquut		C. Olici			h Otitis Madia		c Other	
Defect	No.		4		5	<u> </u>				4					-

								5-								
	Snecial	Inspections (7)	67	185 ·	16	72	S	66	40	156	53	136	1	4	26	43
		Total (6)	180	780	86	107	21	539	81	187	122	199	3	8	36	IŞI
	Ispections	Others (5)	67	297	47	41	2	162	40	82	66	90	1	4	25	37
	Periodic Inspections	Leavers (4)	6	25	7	2	I	II	16	22	II	21	1	1	3	2
		Entrants (3)	104	458	32	64	18	366	25	83	45	88	3	4	8	112
-	34	8 84	H	0	H	0	H	0	H	0	H	0	H	0	H	0
the second secon		Defect or Disease (2)		Nose and 1 nroat	Const.	opeccii	T	Lympnauc Giands		ncart	1	rungs	Daralaamaatal a Uamia	Developmentar—a. ricinia	h Other	0. Ottel
-	Defect	No.		2	0	0		6		01	;	11	:	77	-	

loion	Inspections (7)	5	4	106	III	49	72	22	24	3	6	53	88	13	26	5	17	34
	Total (6)	IS	34	462	309	120	197	30	27	13	25	18	16	14	25	61	50	47
Periodic Inspections	Others (5)	6	17	147	141	46	80	15	13	8	15	14	19	7	15	7	29	22
Periodic I	Leavers (4)	I	II	38	61	15	44	2	I	2	4	1	12	2	3	3	2	S
IND ON	Entrants (3)	5	6	277	149	59	73	13	13	3	9	4	18	5	7	6	61	20
1		Ŧ	0	T	0	H	0	н	0	H	0	H	0	H	0	F	0	F
TORRESS INSTRUCT	Defect or Disease (2)	Orthonaedic—a Poetrire	2	h Heat		c Other		Neruous Sustem_a Hnileneu		h Other		Perchological—a Develonment		h Stahility				
Defect	No.	13	C.					1.1	+			TC	C,	00	200	té		

MEDICAL INSPECTION AND TREATMENT PART III.—TREATMENT OF PUPILS ATTENDING MAIN-TAINED 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, excluding errors of refraction and squint	8
Errors of refraction (including squint)	2006
Total	2014
Number of pupils for whom spectacles were prescribed	454

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

Scatter Marco Transfer State and an	Number of cases known to have been dealt with
Received operative treatment :	SALAT
(a) for diseases of the ear	. 53
(b) for adenoids and chronic tonsilitis	564
(c) for other nose and throat conditions	167
Received other forms of treatment	. 86
Total	870
Total number of pupils in schools who are known to have been provided with hearing aids :	
(a) in 1964	. 9
(b) in previous years	. 23

TABLE CORTHOPA	EDIC AND POST	TURAL	DEFECTS
			Number of cases known to have been treated
(a) Pupils treated at clinics of	or out-patients depa	rtments	1981
(b) Pupils treated at school	for postural defects	ı	-
	Total		1981
120000000000000000000000000000000000000	to a large states		Number of
		2 mi.elly	cases known to have been treated
(b) Body			to have been
(b) Body Scabies Impetigo		7 12 13	to have been treated
(b) Body Scabies Impetigo		0—.s3	to have been treated
(b) Body Scabies Impetigo		0— <i>9</i>	to have been treated
(b) Body Scabies Impetigo	 Total		to have been treated
(b) Body Scabies Impetigo Other skin diseases	 Total		to have been treated

TABLE F.—SPEECH THERAPY

Number of cases known to have been treated

Pupils treated by speech therapists

224

Number of cases known to have been dealt with (a) Pupils with minor ailments 2 (b) Pupils who received convalescent treatment under School Health Service arrangements (c) Pupils who received B.C.G. vaccination 2056 (d) Other than (a), (b) and (c) above :--General Surgical and Medical 1250 Paediatrics 678 Asthma 87 Total (a)-(d) 4073 SCREENING TESTS OF VISION AND HEARING (a) Is the vision of entrants tested? Yes. Ι. (b) If so, how soon after entry is this done? At periodic medical inspection following admission. If the vision of entrants is not tested at what age is the first 2. vision test carried out ? -How frequently is vision testing repeated throughout a child's 3. school life? At periodic medical inspection. (a) Is colour vision testing undertaken? No. 4. (b) If so, at what age? — (c) Are both boys and girls tested? — By whom is vision and colour testing carried out? -5. (a) Is audiometric testing of entrants carried out? No. 6. (b) If so, how soon after entry is this done? — If the hearing of entrants is not tested, at what age is the first 7. audiometric test carried out? Special cases only investigated. By whom is audiometric testing carried out? Specially trained 8. Health Visitor/School Nurse.

TABLE G.—OTHER TREATMENT GIVEN

4. DENTAL INSPECTION AND TREATMENT CAN	RRIED
	YEAR
ENDED 31st DECEMBER, 1964.	
No. of pupils on the registers of maintained primary and secondary schools (including nursery and special schools)	
in January, 1965	26958
(a) Dental and Orthodontic work :	
I. Number of pupils inspected by the Authority's Dental Officers :—	
i. At Periodic Inspections 10487 ii. As Specials 1019 Total	11506
ii. As Specials 1019 f 10tal II. Number found to require treatment	9767
III. Number offered treatment	9767
IV. Number actually treated	5450
(b) Dental work (other than Orthodontics):	
I. Number of attendances made by pupils for treat- ment, excluding those recorded at (c) i. below	8752
II. Half-days devoted to:	
i. Periodic (School) Inspec-	
tions 168 ii. Treatment 1457 Total	1625
Same second as being	
III. Fillings : i. Permanent Teeth 3801 Teeth	
i. Permanent Teeth 3801 ii. Temporary Teeth 1854 Total	5655
IV. Number of Teeth Filled :	
i. Permanent Teeth 3174 ii. Temporary Teeth 1796 Total	4970
ii. Temporary Teeth 1796 f 10tal V. Extractions :	1.57
i. Permanent Teeth 606 Total	4832
	4052
VI. i. Number of general anaesthetics given for extractions	2222
ii. Number of half-days devoted to the administra-	2232
tion of general anaesthetics by :	
A. Dentists B. Medical Practitioners -295 Total	295
	28
VII. Number of pupils supplied with artificial teeth	20
VIII. Other operations : i. Crowns	
ii. Inlays $-$ Total	1217
iii. Other Treatment 1217	

(c) Orthodontics :

i.	Number of attendances made by pupils for	
	orthodontic treatment	504
ii.	Half-days devoted to orthodontic treatment	105
iii.	Cases commenced during the year	45
iv.	Cases brought forward from the previous year	96
v.	Cases completed during the year	26
vi.	Cases discontinued during the year	19
vii.	Number of pupils treated by means of appliances	72
viii.	Number of removable appliances fitted	53
ix.	Number of fixed appliances fitted	_
х.	Cases referred to and treated by Hospital	
	Orthodontics	3

