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DENBIGHSHIRE EDUCATION COMMITTEE



ANNUAL REPORT

of the

Principal School Medical Officer

for the year

1956

M. T. ISLWYN JONES,

M.D., D.P.H.,

Principal School Medical Officer.

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Principal School Medical Officer

for the year

1915

BY J. L. L. L. L.

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CONTENTS

	Page
Foreword	3
Staff	7
Statistics	10
Medical Inspection	10
Ophthalmic Service	19
Speech Therapy	21
Education in Hospital	23
Infectious Diseases	26
Vaccinations	27
Immunisations	27
Tuberculosis	27
Miscellaneous Services—Examination of Teachers, Student Teachers and School Meals Service Staff	30
Employment of School Children	30
Handicapped Pupils	30
Child Guidance	35
Report of Principal School Dental Officer	38
Physical Education	42
School Health Service and School Clinics	50
Index	57
Tables	59

	Members
Composition: Chairman and Vice-Chairman of the Education Committee	2
Local Education Authority .	10
Wrexham R.D. Council	8
Wrexham Borough Council	6
Co-opted Members	4
	<hr/> 30

FOREWORD

I have the honour to present the Annual Report on the School Health Service for the year 1956.

As is generally known the total school population has been increasing steadily and this trend continued in 1956. It follows that the School Health Service has had to cope with greater demands both in the volume and variety of the service it has had to provide. This is substantiated by perusal of the statistical tables, exemplified particularly by Table No. 2 which shows the comparative medical inspection over a period of 5 years. It was therefore a very welcome relief when the Ministry of Education simplified the classification of General Condition by replacing Groups A, B and C by Satisfactory or Unsatisfactory. This not only reduced administrative procedure but eradicated a subdivision which seemed to have a different connotation to each School Medical Officer and also confused members. The small percentage of children found to be unsatisfactory, 0.2% is most gratifying. Of children found at medical inspection to have defects the greatest number suffered from defective vision and once again it is pleasing to acknowledge the excellent work of both County and Hospital Ophthalmologists. Experience has fully vindicated the part-time appointment of a County Ophthalmologist for not only has the waiting time been reduced to negligible proportions, but by having clinics at Chirk and Llanrwst adequate facilities are provided for the rural children.

At the request of the Ministry of Education it was ascertained that out of 8,450 children examined 696 had had their tonsils removed; approximately 8%. This indicates the conservative attitude to tonsillectomy of the medical profession in this area.

Another service which has developed rapidly since its inception is Speech Therapy. Originally it was estimated that a part-time therapist would have sufficed but a perusal of Miss Coles' report supports irrefutably not only that there is ample work for one but that there is scope for an additional

therapist. The final success of this service depends to a considerable degree on a close liaison between therapist, teacher and parent. Due to the heavy case load it is not possible for Miss Cole to maintain a constant close contact with the teachers and parents and therefore full benefit is not being derived from her services.

Miss Morris Jones has again reported on her teaching in the paediatric wards of the Maelor Hospital. Her contention, supported by results, that sick children benefit medically and educationally from the tuition they receive is heartily endorsed by the Paediatrician.

Apart from an outbreak of Dysentery in Llangollen, which involved a primary school, there was no marked incidence of infectious disease. Sonne Dysentery seems to be endemic in some areas but this epidemic was an unusual occurrence in Llangollen. This disease was first discovered in the town, but in view of its predilection for young children it quickly centred on a primary school, where conditions were conducive to its spread. On previous occasions I have indicated the unsatisfactory sanitary arrangements at some of the schools and but for prompt action and excellent team work on behalf of all concerned the epidemic would not have terminated so quickly. This episode emphasises the need for constant vigilance especially while the unsatisfactory hygienic conditions are allowed to persist, particularly in the old schools.

During 1956 the Food Hygiene Regulations became effective and strenuous efforts had to be made to bring up some canteens to the standards laid down by legislation. However no adjustment or re-equipping can bring some canteens up to the necessary standards.

Following a visit to the Ministry of Education approval was received to build a special day school for Educationally Sub-normal Children in Wrexham. This will meet a need that becomes more manifest as ascertainment becomes more comprehensive. A Special Residential School for Physically Handicapped Children from North Wales will be built at Llandudno. This should overcome the objections of many parents to sending their children too far away from home. There are many children in Denbighshire who will benefit from this type of school but as ascertainment has not been complete it is not possible to give precise figures.

By comparing previous years it can be seen how the ability of the School Health Service to detect and deal with the handicapped child has grown appreciably and herein lies the measure of success or failure of the service. Although the various medical and hospital services have served the County, in their present form since 1948, the ascertainment of the handicapped children in Denbighshire has advanced commensurately with the development of the School Health Service and during the past 5 years there has been well over 50% increase in the ascertainment of these children. Regrettably not all the handicapped children have received the highly specialised educational treatment that their condition warranted but the School Health Service can claim to have ensured that the utmost possible, under existing circumstances, has been done for them. The primary consideration of the service has been the health and development of the school child and this has entailed some struggles against apathy, indifference and neglect of parents and others. Fortunately such instances are few and growing fewer but members of the staff devote much of their energies to making quite sure that advice and treatment is obtained and carried out. I cannot over stress the importance of this function of the School Health Service for without such supervision children often pass on to adult life so handicapped that their prospect of success are considerably diminished, resulting in an anti-social attitude leading to conflict with moral and legal codes. Another reason why I stress the importance of ascertainment is that the School Health Service has a close liaison with the Youth Employment Officer and the correct placing in employment of a handicapped child is of vital importance. The School Health Service can help to avoid the placing of square pegs in round holes.

The School Health Service formed under the Education Act, 1907, has during its 50 years of existence, constantly changed its line of attack. Initially it was created to deal with the abysmally low physical standards of recruits entering H.M. Services—how well that objective has been achieved can be inferred by a glance at Table 3 General Condition where it will be seen that only 0.2% of children are classed as unsatisfactory. Today, gross bony deformities, under-nourishment and child neglect are rare and the School Health Service can claim a fair share of the credit for this felicitous state of affairs. In retrospect, over half a century, the progress made on a wide front is easily discernible but could this advance have been predicted even after the first decade? The present day service has changed its emphasis—to the handi-

capped child—with School Medical Officers becoming more highly specialised in detecting deviations from normal development whether physical or mental and ensuring prompt correction and treatment. An immediate evaluation of this type of service is merely indicative but, in my opinion, the value of the work of the School Health Service cannot be over estimated. Instances—unrecorded—come to my notice where the School Medical Officers have succeeded in resolving problems affecting both the health and education of children. Puberty and adolescence are often difficult and the advice of the lady doctors at senior girls' or male doctors at senior boys' schools are constantly sought.

A comparatively recent important development in the specialist services has been the establishment of a Child Guidance Service. In North Wales this service combines both hospital and Local Education Authority personnel to their mutual benefit. This service works in close co-operation with the School Health Service and recorded in Tables 17-20 are details of the work done during 1956. The bare statistics cannot possibly reveal the human suffering alleviated nor more than hint at the benefits of re-establishing normality in a disturbed child. Health is priceless, education of inestimable value and with both, the school leaver has the world at his feet. For this, no service can claim full responsibility but each successive generation will progress so that in 50 years time the efforts of today will be seen in their true perspective, and I feel confident that the achievements of the School Health Service in 1956 will appear as outstanding then as that of 1907 does today.

In conclusion it is pleasant to record my appreciation to all my colleagues, the staff of the School Health Service, and particularly to Dr. Thomas who has been mainly responsible for the compilation of this report.

Finally, I acknowledge my indebtedness to the Chairman, Councillor Mrs. Dodd, Vice-Chairman, Councillor A. W. Lloyd, and members of the Medical Inspection Subcommittee for constant inspiration, encouragement and support.

M. T. ISLWYN JONES,

Principal School Medical Officer.

County Health Department,
16 Grosvenor Road,

WREXHAM.

March, 1957.

STAFF

Principal School Medical Officer:

M. T. Islwyn Jones, M.D., D.P.H.

Deputy Principal School Medical Officer:

H. Mervyn Thomas, M.B., Ch.B., D.P.H., D.C.H.

School Medical Officers

and District Medical Officers of Health:

W. McKendrick, M.D., D.P.H.

M. Jones-Roberts, M.B., Ch.B., D.P.H.

T. Kenrick Hughes, M.B., Ch.B., D.P.H.

Evan Williams, M.R.C.S., L.R.C.P., D.P.H.

School Medical Officers:

S. O. Edwards, M.B., Ch.B., D.P.H.

A. J. Smith, M.B., Ch.B.

D. Lloyd Williams, M.B., Ch.B., D.P.H.

J. Williams, M.R.C.S., L.R.C.P.

Principal School Dental Officer:

J. G. Roberts, L.D.S.

Assistant Dental Officers:

H. E. Fussell, L.D.S.

J. P. Reid, L.D.S.

D. O. Thomas, L.D.S.

N. A. James, L.D.S.

T. H. M. Wynne, B.D.S.

R. H. N. Osmond, L.D.S., R.C.S. (Part-time).

Consultant Orthodontist:

B. T. Broadbent, F.D.S., B.D.S.

County Ophthalmologist:

Mary Rowland Hughes, M.B., Ch.B., D.O.M.S.

Psychiatrist:

E. Simmons, M.D., D.P.M.

Educational Psychologist:

G. A. V. Morgan, Ph.D.

Psychiatric Social Worker:

Miss M. K. Pretty.

Speech Therapist:

Miss S. M. Cole, L.C.S.T.

Superintendent Nursing Officer:

Miss W. M. Chune, S.R.N., S.C.M., H.V.,
Queen's Nurse.

Deputy Superintendent Nursing Officer:

Miss Eirlys Jones, S.R.N., S.C.M., H.V.,
Queen's Nurse.

School Nurses and Health Visitors:

Miss K. Jones, Miss E. A. Bodsworth (resigned 31/12/56), Miss M. E. Jones, Miss E. Griffiths, Mrs. E. A. Beech Davies, Miss S. C. Evans, Mrs. I. E. Garner, Miss M. Wynne Evans, Miss A. M. Lloyd, Miss E. Foulkes, Miss D. Brown, Miss M. E. Jones, Mrs. J. W. Molloy (resigned 30/11/56), Miss E. Walker, Miss E. J. Moss, Miss C. J. Davies (commenced 4/9/56), Miss E. B. Jones (commenced 21/8/56), Miss J. H. Williams (commenced 1/3/56, resigned 31/8/56).

School Nurses:

Mrs. A. Martin, Mrs. V. Richards.

Dental Attendants:

Mrs. M. Jarvis, Miss I. E. Sanderson, Miss A. Cudworth, Mrs. J. H. Burton, Miss B. Bailey, Miss E. M. Voyce, Miss H. Davies.

Administration.

Senior Administrative Officer:

G. L. Britton, D.P.A.

Deputy Administrative Officer:

Gwilym Davies.

Senior Section Clerk:

Gerald E. H. Howard.

Denbighshire Education Committee

Report of the Principal School Medical Officer for the Year 1956

General School Statistics.

Total number of schools 193

Total school population 28,647

Type of School.	No. of Schools	No. of children in attendance
Primary Schools	164	19,358
Secondary Modern School	17	5,086
Secondary Grammar Schools	9	3,958
Secondary Technical School (students in full-time attendance)	1	193
Special Schools:		
Llangwyfan Hospital Special School	1	32
Alexandra Special School for Educationally Sub - Normal Children, Wrexham	1	20

Medical Inspection.

As in previous years children in three age groups were submitted to periodic medical examinations—entrants to the infant schools, those in their last year of attendance at junior schools and those approaching the end of their school life in secondary schools.

Special examinations were made of children on request by parents, school teachers and school nurses, and of those under observation following previous examinations.

Table No. 1.

Children Medically Examined at School

Age Group	No. Examined
(a) Periodic Medical Inspections.	
Entrants	3074
Second-age group	2018
Third-age group	1864
Other periodic inspections	1494
	<hr/> 8450 <hr/>
(b) Other Inspections.	
No. of special inspections	433
No. of re-inspections	2776
	<hr/> 3209 <hr/>

Table No. 2.

**Comparative Table of Annual Total Examinations
for the years 1952-1956**

	1952	1953	1954	1955	1956
Periodic Medical Inspections ...	7962	8344	9342	7459	8450
Other Inspections ...	1060	1410	2227	3068	3209
Totals	9022	9754	11569	10527	11659

General Condition.

It will be noted in Table No. 3 that only a very small percentage of children (0.2%) were classified as "unsatisfactory"—an indication of the high standard of health being enjoyed generally.

Table No. 3.

	No. of pupils inspected	No. satisfactory	% of Column No. (2)	No. unsatisfactory	% of Column No. (2)
(1)	(2)	(3)	(4)	(5)	(6)
Entrants	3074	3068	99.8	6	0.2
Second age group	2018	2015	99.8	3	0.2
Leavers	1864	1861	99.8	3	0.2
Additional periodic inspections	1494	1491	99.8	3	0.2
TOTAL	8450	8435	99.8	15	0.2

Table No. 4.

Analysis of defects found at medical inspections during the year ended 31st December, 1956.

A.—Periodic Inspections.

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS				TOTAL (incl. all other age groups inspected)	
		Entrants		Leavers		Requiring Treatment	Requiring Observation
		Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
4	Skin	4	32	2	9	5	91
5	Eyes:						
	(a) Vision	39	112	83	174	284	614
	(b) Squint	15	61	1	2	18	80
	(c) Other	3	19	1	6	9	39
6	Ears:						
	(a) Hearing	4	25	3	14	11	59
	(b) Otitis Media	1	14	—	5	4	27
	(c) Other	—	5	1	9	1	22
7	Nose and Throat	40	379	6	56	71	613
8	Speech	21	41	3	5	32	79
9	Lymphatic Glands	1	97	1	5	2	112
10	Heart	1	16	1	9	4	41
11	Lungs	6	97	—	22	12	169
12	Developmental:						
	(a) Hernia	—	7	—	—	—	9
	(b) Other	2	13	—	1	2	17
13	Orthopaedic:						
	(a) Posture	1	11	1	30	2	82
	(b) Feet	13	42	10	26	37	145
	(c) Other	7	53	1	19	13	104
14	Nervous System:						
	(a) Epilepsy	1	5	—	—	1	13
	(b) Other	1	16	—	5	1	40
15	Psychological:						
	(a) Development	2	10	—	5	6	32
	(b) Stability	—	6	—	2	2	14
16	Abdomen	2	15	—	5	5	39
17	Other	—	51	1	19	3	114

Table No. 5.

B.—Special Inspections

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
(1)	(2)	(3)	(5)
4	Skin	—	3
5	Eyes:		
	(a) Vision	42	66
	(b) Squint	1	10
	(c) Other	—	3
6	Ears:		
	(a) Hearing	4	10
	(b) Otitis Media	1	1
	(c) Other	1	1
7	Nose or Throat	6	40
8	Speech	11	16
9	Lymphatic Glands	1	5
10	Heart	—	6
11	Lungs	1	13
12	Developmental:		
	(a) Hernia	—	—
	(b) Other	—	—
13	Orthopaedic:		
	(a) Posture	—	6
	(b) Feet	—	6
	(c) Other	—	11
14	Nervous System:		
	(a) Epilepsy	1	4
	(b) Other	—	6
15	Psychological:		
	(a) Develop- mental	3	15
	(b) Stability	2	3
16	Abdomen	1	—
17	Other	1	11

Cleanliness Inspections.

School nurses made 48,348 inspections of schoolchildren during the year and 1,938 children were found to have head infestation.

Diseases of the Skin.

Table No. 6.

	No. of cases treated or under treatment by the authority during the year
Ringworm:	
(1) Scalp	—
(2) Body	—
Scabies	—
Impetigo	73
Other skin diseases	63
Total	136

Again there were no cases of ringworm or scabies.

Defects of the Ear, Nose and Throat.

Specialist consultation and operative treatment for ear, nose and throat conditions are provided entirely by the hospital service.

Table No. 7.

	No. of Schoolchildren treated
A. Received Operative Treatment:	
(1) For diseases of the ear	18
(2) For adenoids and Chronic tonsilitis	272
(3) For other nose and throat conditions	48
B. Other forms of treatment	123
Total	461

Tonsillectomy.

All Principal School Medical Officers were asked by the Ministry to arrange for the numbers of children, who have at some time in their lives undergone an operation for removal of tonsils and adenoids, to be recorded at the time of medical examinations. This information will provide the basis of an investigation by the Medical Research Council's Committee for Research on Social and Environmental Health.

Table No. 8.

Number of Schoolchildren who have undergone Tonsillectomy

No. Examined		No. found to have had tonsillectomy		Total Examined	Total No of Tonsil- lectomies
Entrants.					
Boys	Girls	Boys	Girls		
1767	1307	102	72	3074	174
2nd Age Group					
1024	994	110	99	2018	209
Leavers					
965	899	75	64	1864	139
Additional Periodic Inspections					
762	732	99	75	1494	174
Grand Total					
4518	3932	386	310	8450	696

Defects of Hearing.

15 schoolchildren were found to require further investigation and treatment for defective hearing and 69 others required to be kept under observation.

The importance of early detection of deafness or partial deafness cannot be over emphasised. Now that approval for the acquisition of a pure tone audiometer has been given it is intended that as soon as a suitable operator is available that regular audiometric sweeps be made in schools throughout the County.

Defects of the Eyes.

(a) **Refractive Errors.**

During the year 32⁴ schoolchildren were found to require further investigation for errors of refraction detected at school medical examinations.

(b) **Squint.**

19 cases of squint were referred by the School Medical Officers for further investigation and treatment. As has been stressed in previous reports early treatment of this condition is of great importance.

Dr. Mary Rowland Hughes, the County Ophthalmologist, reports:—

“During the year 1956 School Eye Clinics have been held in Colwyn Bay, Wrexham, Denbigh, Llanrwst, and Chirk and have been well attended. All children as far as possible have their vision taken on entering school and in this way some eye defects are discovered early. The school teachers are very co-operative and bring forward other children whom they consider need attention. In many instances a child is said to be looking too near at books but in most cases this is merely a bad habit—it is in fact an extraordinary common bad habit of childhood.

One child in the county who is partially-sighted is progressing very favourably at an ordinary school with special lighting and a near-vision aid. She is unsuitable to be sent away to a special school for the partially-sighted for other health reasons and she has now learnt to read.

Several children have been referred to hospital centres for operative or orthoptic treatment for squint and it is hoped that, as parents become more and more aware of the advantages of these forms of treatment, eventually no child will leave school in Denbighshire with an unsightly disfigurement that could have been treated.

The vigilance of the Health Visitors over the very young children is to be praised as several early cases of strabismus have been brought forward by them in children who are too young to be at school, and so treatment can be started early.

One case of unilateral congenital cataract has been referred for hospital treatment and surgical treatment has been begun."

Table No. 9.

Eye Defects.

	No. of Schoolchildren dealt with by the	
	Authority	Otherwise
External and other, excluding errors of refraction and squint	1	10
Errors of refraction (including squint)	1463	515
Total	1464	525
Number of pupils for whom spectacles were:		
(a) Prescribed	454	254
For operation	—	5

Orthopaedic Defects.

Orthopaedic treatment is provided by the hospital service and out-patient clinics are held at Cefn, Llanrwst, Colwyn Bay and Denbigh. During the year 62 children were treated as in-patients at Gobowen hospital.

Minor Ailments.

Treatment of minor ailments is administered by the school nurses at the set clinics; 628 children having attended for treatment during the year.

Speech Therapy.

It is now possible to review the first complete year since the inception of this service, appreciation of which has grown to such an extent that the demand for treatment cannot be met adequately by one speech therapist.

It is essential for the speech therapist to have sufficient time to establish close contact with parents and school teachers if full benefit is to be derived from her services, but owing to the pressure of work it has not even been possible to reduce the long list of children awaiting attention. The appointment of an additional speech therapist is therefore considered essential.

The necessary equipment has been obtained as and when required to meet the needs of this expanding service. It remains now for a tape recorder to be acquired for the service to function with maximum efficiency.

Miss Cole, the speech therapist, reports:—

“During the past year progress has been made in spite of variable conditions. Statistics show, however, that the work of 1956 has not been in vain, and the results are very encouraging.

Clinics at Colwyn Bay, Cefn, Wrexham and Rhos are attended regularly by school children requiring treatment, and many parents co-operate with the Speech Therapist by accepting advice gladly and by helping their children with exercises at home. The results in these cases are, on the whole, very satisfying, showing parental interest and encouragement to be invaluable to progress.

Speedier results could be obtained if the therapist were in a position to make regular visits to all the schools, and thus solicit the help of the teachers. However, being single-handed and having such a wide area to cover, it is impossible to visit either the schools or the homes as often as is necessary.

Another measure whereby speedier results could be obtained would be the acquisition of a tape recorder. This necessary piece of equipment is an accurate aid in diagnostic purposes. It also encourages both the children and parents, and assists the therapist in keeping a constant and precise check on all cases.

It is inevitable that for a while, there will still be a long waiting list, but wherever possible, pre-clinic advice is being given to parents and teachers of speech defective children. By giving this advice valuable time is saved when treatment eventually commences, as parents often complicate the work of the speech therapist by ignorance and mishandling of the situation in the home.

The task of establishing clinics and introducing speech therapy in this area has been made easier by the helpful co-operation of the Medical and Office Staffs of Wrexham and Colwyn Bay."

Table No. 10.

Analysis of Work Performed by the Speech Therapist

Clinic	No. of Half Day Sessions	No. of Cases Treated	No. of Cases Discharged	No. of Cases awaiting Treatment
1 Grosvenor Road, Wrexham	82	55	53 (incl. Gate- field)	32 (incl. Gate- field)
Gatefield, Wrexham ...	79	36		
Rhos	39	19	11	8
Colwyn Bay	105	37	25	10
Cefn	77	36	21	10
Total	382	183	110	60

No. of Visits to School ... 14 No. of Home Visits ... 22

Analysis of Cases

Defects of Organic Origin

(a) Cleft Palate	15
(b) Spasticity	2
(c) Deafness	5
(d) Dysphonia	—

Defects of Functional Origin

(a) Stammerers	76
(b) Dyslalia	68
(c) Dysphonia	5
(d) Sigmatism	24

Liaison with Hospital and General Medical Practitioner Services.

It is again a pleasure to report the close co-operation which has existed between the department and the various hospitals. Copies of all reports on children who have received hospital in-patient treatment or who have been examined and treated as out-patients are sent to the school health department for the information of the medical and nursing staff, and the department readily provides the hospitals with useful information relating to children referred for treatment.

More and more General Medical Practitioners are coming to recognise that close friendly contact with the School Health Department can be of great benefit to all concerned and the year has been notable for the extent to which co-operation has grown between the two services.

Education in Hospital.

The teaching of in-patients at the Paediatric Unit of the Maelor General Hospital, Wrexham, was continued and it is a great pleasure to give below the report of Miss Morris Jones, the hospital tutor.

"During the year 1956 I have taught 116 children—64 resident in Denbighshire, and 19 from the other districts served by the Hospital (parts of Flintshire, Merionethshire and Montgomeryshire). The ages of the children range from 5 years to 15 years, the majority being between 7 years and 11 years.

6 children were from Grammar Schools

10 " " " Modern Secondary Schools

96 " " " Primary Schools

2 " " " Special School

2 " " " Private Schools

This year, there have been more "bed cases" than there were last year, and they have been taught at their bedside. These children seem to need companionship at their lessons, and they often ask whether the children who are able to walk about may stay near them. The Sister and Nurses are very

helpful. They allow me to move the beds closer together and to bring a table into the space between the beds. Thus, those confined to their beds do not feel that they are missing anything. They want, above all, to act as much like normal, healthy children as possible.

Certain cases are obliged to lie flat on their backs; they are not allowed to write, but they are able to do oral work—e.g. to answer questions on a passage they have read; and mental arithmetic.

Most of the children are in the wards on the ground floor, and those who are not well enough to walk upstairs to the school room, are taken in a wheel-chair in the lift. They quite enjoy this little journey, and they appreciate the change of view from the schoolroom windows.

We were not able to have many lessons on the lawn this summer, owing to the weather, but we went out whenever possible. One or two of the children have had cameras, and they loved taking snaps of their friends when they had lessons out of doors.

When they are well enough, the children are allowed to wear their ordinary clothes, and on some days, the little class looks just like a class in an ordinary school.

One does not of course expect these little patients to work as strenuously as their friends at an ordinary school, but generally speaking, they are eager to work as hard as their strength permits.

Most of the pupils are of average intelligence and attainment—some are particularly bright. It was very encouraging to hear, last July, that one ex-patient, a girl, had gained a Special Place at the Llangollen Grammar School. She had been a patient for 8 months during the previous year. One of the girls in Hospital at present—and likely to be there for some time—hopes to sit the examination for admission to Grove Park, next May."

Miss Morris Jones goes on to acknowledge the support given by the staffs of the hospital and the education authority.

Deaths of Schoolchildren.

The mortality of schoolchildren due to the various causes was as follows:—

Toxaemia due to Peritonitis and Appendicitis	1
Uraemia	2
Road Accidents	2
Burns	1
Sarcoma	2
Leukaemia	1
	—
Total	9
	—

Infectious Diseases.**Table No. 11.**

Incidence of Infectious Diseases affecting schoolchildren during 1956 (excluding Tuberculosis).

Disease	No. of Cases
Meningococcal Infection	1
Whooping Cough	66
Measles	215
Scarlet Fever	101
Pneumonia	10
Food Poisoning	2
Dysentery	89
Total	484

Dysentery.

The comparatively high total of 89 cases of Dysentery was notified during the year. Most of these occurred during the troublesome epidemic which struck Llangollen at the beginning of the year.

The source of this explosive outbreak was not ascertained, but the infection was somehow introduced into the local infants school and there spread with great rapidity.

There is no doubt that the overcrowded conditions and poor toilet facilities at this school were an important factor in the spread of infection from one child to another. From each of the 154 children and the staff at this school specimens were obtained for laboratory examination. Those found to be infected were excluded from school, their home contacts investigated and treatment given where necessary.

Special precautionary measures were instituted at the school to prevent further spread of infection. The disease was completely eradicated from the town in good time for the International Eisteddfod.

The prompt and effective control of this epidemic reflects much credit on the Departments and individuals concerned; the District Medical Officer of Health, the Sanitary Inspector and local General Medical Practitioners, for their willing co-operation; the Public Health Laboratories at Shrewsbury and Conway for the readiness with which their resources were placed at our disposal; the Head Teacher and her staff for their great help and forbearance during what amounted to a major disruption of normal school routine, and not least the School Nurse for her diligence in ensuring that the necessary advice and instructions were transmitted to parents and children.

Vaccination against smallpox.

36 schoolchildren were given primary vaccination and 29 were revaccinated.

Immunisation against diphtheria.

451 schoolchildren were given primary immunisation and 3,292 given reinforcing injections against diphtheria.

Tuberculosis.

Table No. 12 illustrates the continued decline in the incidence of tuberculosis over the past five years, the yearly number of notifications have fallen from 41 in 1952 to 14 in 1956.

The total number of children on the tuberculosis register at the end of 1956 was 186.

It is intended in the coming year to introduce a scheme for the B.C.G. vaccination of children between the ages of 13 and 14 years.

Table No. 12.

Incidence of Tuberculosis in School Children

	Notifications Received				
	1956	1955	1954	1953	1952
Pulmonary Tuberculosis	8	16	20	29	32
Non-Pulmonary Tuberculosis	6	6	18	14	9
Total	14	22	38	43	41

Table No. 13.

Mass Radiography Service

Details of Surveys at Individual Schools in Denbighshire during 1956.

School	Total number examined			Total number abnormal			Needing further observation			Other pulmonary abnormalities		
	T.	B.	G.	T.	B.	G.	T.	B.	G.	T.	B.	G.
Llangollen Grammar	218	109	109	7	4	3	4	2	2	3	2	1
Llangollen Secondary Modern	58	31	27	2	1	1	—	—	—	2	1	1
Llanrhaeadr Y.M. Secondary Modern	34	15	19	—	—	—	—	—	—	—	—	—
Llanrhaeadr Y.M. C.P.	2	2	—	—	—	—	—	—	—	—	—	—
Glynceiriog P.C.	26	13	13	1	1	—	—	—	—	1	1	—
Pontfadog	6	4	2	—	—	—	—	—	—	—	—	—
Chirk Junior	30	20	10	1	1	—	—	—	—	1	1	—
Chirk Pentre	14	9	5	1	1	—	1	1	—	1	1	—
Total	388	203	185	12	8	4	5	3	2	7	5	2

School Milk.

All but one school, which was supplied with dried milk, received either pasteurised or tuberculin tested milk in one-third pint bottles.

Medical Examinations.

(a) School Meals Service.

A total of 564 medical examinations of school canteen workers were performed by the medical staff.

(b) Teachers and Students.

199 teachers and 144 entrants to teachers' training colleges were medically examined.

Employment of Schoolchildren.

The Education Act, 1944 (Section 59) provides that, if in the opinion of the Local Education Authority any pupil is being employed in a manner likely to be prejudicial to his health or render him unfit to obtain the full benefit of the education provided for him, the Authority may prohibit or impose such restrictions on his employment as they consider necessary in the interests of the child.

During the year 138 schoolchildren were medically examined in respect of their suitability for employment out of school hours.

The Handicapped Child

The ascertainment of and provision of special educational treatment for handicapped children are duties imposed upon Local Education Authorities by the Education Act, 1944.

In many cases special education treatment, to be effective, must be instituted at an early age and thus the early recognition of handicapped children and recommendations as to their educational requirements are counted as highly important functions of the School Medical Service.

Cases are brought to the notice of the Department from various sources; some being referred at an early age from child welfare clinics, hospitals and general medical practitioners and others later on from school medical inspections.

There are ten categories of handicapped children and table 14 shows the numbers ascertained during the year according to the various categories. These figures represent cases where final decisions were made and do not include cases under review.

Table No. 14.

Category	No. of pupils ascertained in 1956
Blind	—
Partially sighted	4
Deaf	—
Partially deaf	—
Delicate	3
Physically handicapped	2
Educationally sub-normal ...	69
Maladjusted	—
Epileptic	1
Speech Defect (requiring special schooling)	—
Total	79

Provision for special educational treatment within the County is limited to the small special day school for educationally sub-normal children at Wrexham and the special hospital school at Llangwyfan Sanatorium and the Maelor General Hospital. Table No. 15 shows the number of handicapped

children in the various categories maintained at special residential schools outside the County. The cost of maintenance in respect of these children amounted to £6,270 6s. 5d. during the year.

Table No. 15.

Handicapped children at special schools outside the County.

Type of Handicap	Number
Blind	2
Partially Sighted	6
Deaf	5
Partially Deaf	3
Delicate	3
Physically Handicapped	5
Educationally Sub-Normal ..	27
Maladjusted	6
Epileptic	3
Speech Defect	—

Table No. 16. Position as to Special Educational Treatment on 31st December, 1956.

	Blind	Partially Sighted	Deaf	Partially Deaf	Delicate	Physically Handicapped	Educationally Subnormal	Maladjusted	Epileptic
(1) Requiring places in special schools.									
(b) day	—	—	—	—	—	35	75	—	—
(b) boarding ..	—	6	—	—	18	4	23	1	2
(2) Attending special schools									
(a) day	—	—	—	—	—	—	20	—	—
(b) boarding .	2	6	5	3	3	5	27	6	3
(3) Receiving home tuition ...	—	1	—	—	17	16	4	—	2

Educationally Subnormal.

This is by far the largest group of handicapped children and includes those whose educational attainment is retarded by at least two years compared with the standard expected for their chronological age.

Any child whose scholastic progress is seriously impaired should be carefully investigated and head teachers are encouraged to report such cases to the Department. If a child's backwardness is due to inherent intellectual defect much misery and frustration can be avoided if this defect is recognised at an early age and treated accordingly. Such children must be given special consideration and not expected to compete with those of average intelligence.

During the year 69 children were ascertained by the School Medical Officers as being "educationally subnormal". This number largely represents those who were awaiting ascertainment but could not be dealt with in previous years owing to the shortage of "approved" medical officers.

Fortunately the staff position now is such that the Department can keep abreast of this work.

The position with regard to providing special educational treatment for these children is, however, much less satisfactory. There is a pressing need for a new special day school in Wrexham to accommodate 100 children.

In other parts of the County special "recovery" classes (catering for small numbers of backward children) should be established in ordinary schools and staffed by teachers having a special interest in backward children. An effective link could then be forged and maintained between these teachers, the educational psychologists of the Child Guidance Clinic, and the School Health Department.

Children who are so intellectually defective as to be incapable of benefitting from school education are dealt with under Section 57 (3) of the Education Act and during the year 12 children were so dealt with. 10 children were reported under Section 57 (5) of the Act as requiring supervision after leaving school.

Delicate.

This group includes children who commonly require a temporary period of special schooling, more in the nature of convalescence following illness, to aid complete recovery to full health and vigour.

Physically Handicapped.

It has been apparent for some years that a residential school for physically handicapped children is required to meet the needs of the North Wales Counties, and doubtless members will be delighted to learn that plans are being prepared to establish such a school at Llandudno.

Many of our severely handicapped children are at present receiving home tuition, who would otherwise be suitable for admission to a special school. Unfortunately in these cases either vacancies at schools maintained by other authorities are unobtainable or the schools are situated at such a distance that parents withhold their consent to the children's admission.

North Wales Child Guidance Clinics.

The Child Guidance Service under the direction of Dr. E. Simmons continued its invaluable function and the close association between the staff and the school health department was maintained during the year.

A great deal of the work of this service is done on behalf of the Education authority; cases requiring expert opinion being referred to the various clinics by the school medical staff for further investigation.

Facilities provided for the Child Guidance staff at "Gatefield" Clinic, Wrexham, are unsatisfactory. Improvements to the fabric of the building and redecoration are necessary to bring the premises up to a reasonable standard.

Table No. 17.

**Number of Denbighshire children interviewed at Clinics
during 1956**

Clinic	No. of individual children	Psychia- trist (children)		Psycholo- gist (children)		P.S.W. (parents and/or guardians)	
		First	Further	First	Further	First	Further
Wrexham ...	110	54	230	56	43	60	202
Colwyn Bay	26	14	73	12	61	14	108
Rhyl	18	4	46	5	30	4	28
Bangor	—	—	—	—	—	—	—
	154	72	349	73	134	78	338

Table No. 18.

Number of Visits during 1956

Psychiatric Social Worker		Psychologist	
Home visits	Visits to other social workers	School visits	Visits to other social workers
168	44	48	5

Table No. 19.

Children from other Counties seen at Denbighshire Clinics.

Clinic and County	No. of individual children dealt with during year	Psychiatrist (children)		Psychologist (children)		P.S.W. (parents and/or guardians)	
		First	Further	First	Further	First	Further
Wrexham:							
Flintshire ..	15	13	24	13	15	14	32
Colwyn Bay:							
Flintshire ..	2	1	12	1	—	1	11
Caerns.	39	18	101	25	62	22	121
	56	32	137	39	77	37	164

Table No. 20.

Number of Referrals received during 1956 (Denbighshire)

Name of Referring Agency	Number of Referrals
School Medical Officer	38
General Practitioners	24
Consultant Paediatricians	6
Other Medical Specialists	5
Courts and Probation Officers	9
Other Social Workers	4
Parents	5
(On Waiting List on 31/12/56—9)	
	91

Report of the Principal School Dental Officer

I have pleasure in presenting my report on the year's work.

It had been hoped that this year would have seen the School Dental Service back to normal. Unfortunately this is not the case owing mainly to the amount of emergency treatment that has to be given. This has increased greatly, partly due to the fact that the private practitioner is unable to cope with any more work and partly due to the difficulty

of arranging accommodation in the schools especially in East Denbighshire. It had been hoped that more transport facilities might have been made available in order to make more use of fixed Clinics, but so far, except for a limited use this has not been so. I would point out that it is difficult enough to arrange for the use of school accommodation for the purpose of extractions, usually 2 or 3 days but nearly impossible to arrange to have the use of classrooms for 2 or 3 weeks for the purpose of carrying out the necessary conservation work. As it is I feel that we put the teaching Staff to great inconvenience, but I would like this opportunity to thank them for the kindness and co-operation.

Orthodontics.

This service is greatly appreciated and the demands on it are increasing. During the year one session per week was allocated to West Denbighshire. Initially the number referred was small but by the end of 1956 the service was being utilised increasingly and I anticipate that before long an additional session will be needed.

During the year a Dental X-ray machine was installed in the Wrexham surgery and this has greatly facilitated the work of the Orthodontist and this has been reflected in the greater number of patients seen.

Clinics.

It was hoped that during the year, various Ministry of Education and Health recommendations might have been implemented. With this end in view, the Borough Council was approached, regarding a possible redistribution of rooms at No. 1 Grosvenor Road, in order to provide a dental laboratory and 3rd surgery mainly for Orthodontic and X-ray works. Unfortunately the Borough Council could not see its way to accede to our request, but offered the use of the present caretaker's house adjoining. After careful consideration and in view of extensive structural alteration necessary it was reluctantly turned down. It will therefore be necessary in the near future to consider very seriously the question of accommodation.

The remaining Clinics have been made full use of during the year and are in a satisfactory condition. A sum of money has been included in the present estimate to cover replacement of worn out equipment; it will be remembered that

most of the present equipment was purchased secondhand.

Staff.

During the year Mr. T. H. M. Wynne was given twelve months leave of absence to proceed to Birmingham Dental School in order to obtain higher qualifications. Otherwise the Staff remains the same.

In conclusion I would like to thank the Dental and Assistant Medical Officers and the nursing and office staffs for their help and co-operation, and once again thank the teaching staff for their kindness and generous help.

Dental Inspection and Treatment carried out by the Authority

(1) Number of pupils inspected by the Authority's

Dental Officers:—

(a) At Periodic Inspections 12,134

(b) As Specials 1,000

Total (1) 13,134

(2) Number found to require treatment 8,194

(3) Number offered treatment 8,194

(4) Number actually treated 10,656

(5) Attendances made by pupils for treatment ... 12,292

(6) Half-days devoted to:—

Periodic Inspection 130½

Treatment 1,945¾

Total (6) 2,076¼

(7) Fillings:—

Permanent Teeth	4,914
Temporary Teeth	1,433
Total (7)	<u>6,347</u>

(8) Number of teeth filled:—

Permanent Teeth	4,515
Temporary Teeth	1,433
Total (8)	<u>5,948</u>

(9) Extractions:—

Permanent Teeth	4,060
Temporary Teeth	8,419
Total (9)	<u>12,479</u>

(10) Administration of general anaesthetics for extraction

4,428

Total (10)	<u>4,428</u>
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(11) Orthodontics:—

(a) Cases commenced during the year	254
(b) Cases carried forward from previous year	148
(c) Cases completed during the year	55
(d) Cases discontinued during the year	11
(e) Pupils treated with appliances	286
(f) Removable appliances fitted	90

(g) Fixed appliances fitted	113
(h) Total attendances	1,512
(12) Number of pupils supplied with artificial dentures	61
<hr/>	
(13) Other operations:—	
Permanent Teeth	259
Temporary Teeth	—
<hr/>	
Total (13)	259
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Report of the Physical Education Organisers for the year 1955-56

The physical education programme generally can be reviewed with satisfaction. The schools are now reasonably well equipped with small apparatus, playground surfaces with few exceptions are good and well maintained and storage problems in the overcrowded schools are being met. The lack of indoor accommodation, however, in the Primary Schools and properly equipped gymnasia in the Modern and Grammar Schools still remains a handicap. Despite this handicap the daily lesson in the Primary Schools is conscientiously given and the Modern and Grammar Schools are seeking practical ways of broadening the school physical education programme to provide a varied range of physical activities to encourage each pupil to pursue a worth while physical activity.

The Organisers have attempted to visit as many schools as possible during the academic year and the H.M. Inspectors have occasionally accompanied the Organisers on school visits.

Teachers in their year of probation have been assisted as soon as possible after appointment, and time has been spent in the new schools introducing the new equipment and

establishing a smooth organisation.

Last year two male teachers went on a year's supplementary physical education course, and have returned to teach in our schools.

Netball.

County Area Tournaments were held at Pendorlan, Colwyn Bay and Grove Park, Wrexham, and the Final Championship and Trials at Cledfryn, Denbigh. Nineteen schools took part in the Tournament including the All Age Group in the Wrexham Area.

Results:

Wrexham Area Tournament.

Seniors—Grove Park, runner up—Brynteg Secondary Modern School.

Juniors—Brynteg Secondary Modern School—runner up—Acrefair Secondary Modern School.

All Age School—Rossett Controlled.

Colwyn Bay Area Tournament.

Seniors—Cledfryn School, Denbigh—runner up—Abergele Secondary Modern School.

Juniors—Cledfryn School, Denbigh—runner up—Abergele Modern School.

County Championship.

The Ethel Hovey Challenge Trophy for Seniors—Grove Park, Grammar School, Wrexham.

The T.P. Roberts Challenge Cup for Juniors—Brynteg Secondary Modern School.

County Matches and Tournaments.

Dec., 1955 at Grove Park v. Flintshire—lost 9-11.

Dec., 1955, at Grove Park v. Monts.—won 21-5.

Jan., 1956 at Shotton v. Flintshire—lost 13-22.

Feb., 1956 at Bangor v. Caerns.—won 22-4.

N. Wales Schools Tournament at Pendorland, Colwyn Bay—Flintshire 1st, Denbs. 3rd.

Betty Pilling from Abergele Modern School played for the North Wales team against S. Wales at Shrewsbury and two of our County team were selected as reserves.

Hockey.

The County Hockey Trials were held at the Grammar School, Denbigh. Unfortunately the County Tournament had to be cancelled for this season owing to the wintry conditions in February and it was not possible to arrange an alternative date suitable for all the grammar schools in the County.

The Denbighshire team came first in the N. Wales Tournament held at Brynhyfryd, Ruthin. Our County Match against Flintshire ended in a draw 2-2.

The North Wales Coast Tournament played at Llandudno resulted in a win for Colwyn Bay Grammar School with Abergele Grammar School second.

Tennis.

The number of courts available for our Secondary Schools is limited. Most of our Grammar Schools produce teams for Inter-School matches. Pendorlan School, Colwyn Bay Grammar, Caledfryn and Llanrhaeadr-ym-Mochnant continue to use the nearby public courts for coaching purposes.

Swimming.

The attendance at Wrexham and Rhos-on-Sea swimming baths has been satisfactory, and the organisers have taken demonstration lessons for all schools during the first weeks of attendance at the baths.

County Certificates were awarded as follows:—

Colwyn Bay.

Elementary 74

Proficiency 25

Advanced 15

Wrexham Area.

Elementary 205

Proficiency 43

Advanced 6

Junior Schools Gala, Wrexham.

Junior Boys Championship—Church Boys.

Junior Girls Championship—Alexandra.

E. Wilson Trophy Junior Girls Squadron—Alexandra.

Y.M.C.A. Cup Junior Boys Squadron—Victoria.

Senior Schools Gala, Wrexham.

Senior Boys Championship—St. Mary's R.C.

Senior Girls Championship—Alexandra Modern.

J. M. Owens Shield Boys Squadron—Victoria Modern.

C. H. Wilks & Son Challenge Cup—Alexandra Modern.

Folk Dancing.

The standard of folk dancing continues to improve and interest has been maintained throughout the County. Caledfryn School, Denbigh, are now the proud possessors of a beautiful set of Welsh costumes for their boys and girls. These were greatly admired at their public performance given at Garthwin during the summer term.

A number of teachers attended the sixth Annual Residential Course held at Pantyfedwen, Borth, Cardiganshire, and organised by the Welsh Folk Dance Society, also the weekend Course held at Rhyl for the N. Wales area.

The Llansannan and Bylchau group came first of four Welsh parties who took part in the International Eisteddfod at Llangollen. They also took part in the St. David's Day celebrations at the Royal Albert Hall in March.

Folk dance parties arranged by the schools in the Denbigh and Abergele areas were held at Caledfryn School, and the Wrexham schools held their Annual Folk Dance at St. Mary's Institute, Wrexham. The proceeds from these events were in aid of the County Netball and Hockey funds.

Association Football.

Wrexham and District Junior Schools League.

League Cup.

Knock Out Competition.

District Team.

Wrexham and District Senior Schools League.

League Cup—Penygelli Modern School.

Knock Out Competition—Technical College.

Small Schools Competition—Rhostyllen Modern School.

Clwyd and Conway Schools League.

League Cup—Denbigh Grammar School.

Welsh Shield (open to Wales and Border Counties).

Wrexham and District under 15 XI—Lost to Swansea in Final on goal average. Away: lost 4-0. Home: won 4-2.

Clwyd and Conway under 15 XI—Lost in qualifying rounds.

English Cup.

Wrexham and District under 15 XI—4th Round, Stoke. Away: won 2-0. 5th Round, Doncaster. Away: lost 3-0.

Denbighshire Grammar Schools Competition.

East Zone—Ruabon Grammar School.

West Zone—Denbigh Grammar School.

Cup—Ruabon Grammar School.

International Caps.

R. G. Jones (Technical College) v. England and Scotland.

R. Willett (Technical College) v. England.

S. Pugh (Penygelli Modern School) v. England.

Inter-County Cricket.

Played at Grove Park School.

Denbighshire Secondary Schools 36, Montgomeryshire
Secondary Schools 77.

Athletics.**Wrexham Junior Schools Association.**

Alderman Hampson Cup—Tanyfron School.

F. F. Crane Cup—Rossett Controlled School.

Association Cup—Acton Park C.P. School.

Sprint Championship (Girl)—Cynthia Roberts, Tanyfron.

Sprint Championship (Boy)—Barry Williams, Rossett.

Wrexham Senior Schools Association.

Association Cup (Boys)—Rossett Controlled School.

Association Cup (Girls)—Rhos Modern School.

Teachers' Cup—Victoria Modern School.

Vale of Clwyd Schools Athletic Association.

Solly Hyman Challenge Shield—Borthyn Controlled
School.

Evan Roberts Challenge Cup—Rhewl C.P. School.

T. J. Roberts Shield—Llanefydd C.P. School.

Colwyn Bay and Abergele Schools Athletic Association.

W. Knowles Trophy—Colwyn Bay Junior School.

W. Howister Trophy.

L. T. Salts Trophy.

Cerrigdrudion and District Schools Athletic Association.

This meeting is run on an individual and not inter school basis.

Denbighshire Secondary Schools Athletic Association.

Boys: Senior—Colwyn Bay Grammar School.

Middle—Rydal School.

Junior—Grove Park Boys' School.

Aggregate Boys: Aston Shield—Grove Park Boys' School

Aggregate Girls: R. F. Watkins Shield—

Ruabon Girls' School.

Colwyn Bay Grammar School.

C. R. Tucker Cup (Modern Schools) Boys—Dinorben and Rhos Modern Schools.

C. R. Tucker Cup (Modern Schools) Girls—Pendorlan School.

Welsh Championships.

Boys.

1, Glamorgan; 2, Monmouth; 3, Denbigh.

Girls.

No trophy was awarded in the Girls' section, but junior girls won three events out of four.

Courses.

Secondary Modern and All-age Schools.—The content of the gymnastic lecture was the subject of a Course arranged by the Organiser. Demonstration lessons by boys from Victoria Modern and Denbighshire Technical College taken by the Organiser formed a basis for discussion.

Physical Education in Infant Schools.—Demonstration lessons were prepared with classes from Rhos Street, Ruthin; Frongoch, Denbigh; and Ponciau during the Summer term. Unfortunately the demonstration course for the teachers had

to be cancelled at the last moment owing to the absence on sick leave of the woman organiser.

Lecture in Athletics.—A lecture by Geoffrey Dyson, Chief National Coach for the Amateur Athletic Association was arranged by the Organiser.

Young Athletes Coaching Session.—A three-day course for promising athletes of the Wrexham schools was arranged by the Organiser. The principal coach was J. W. L. Alford, National Coach for Wales and he was assisted by the Organiser.

Junior Schools Football Coaching Lesson.—A demonstration lesson was given to the teachers of the junior schools in the Wrexham area.

M.C.C. Cricket Coaching Scheme.—The Organiser was invited by the Denbighshire County Cricket Club to attend a one week's Course during the school holidays at the Lilleshall National Recreation Centre, Shropshire, with a view to qualifying for the M.C.C. Youth Coaching Certificate. The Organiser was successful in the examination and has since conducted a Course for the Denbighshire County Cricket Club and school teachers based on the M.C.C. lines.

Playing Fields Maintenance Service.—This service is operating very successfully despite the terrific pressure of work during the cutting season.

The addition of the further unit recently agreed upon will improve field maintenance considerably.

The Organisers have served on various committees, visited Youth Clubs, Women's Institutes and Parent-Teacher Associations, and the male organiser attended the Conference arranged by the National Association of Organisers held at Loughborough in July.

In conclusion, the Organisers wish to record their sincere appreciation for the whole-hearted support of the Education Committee, the Director of Education, his Deputy and the office staff, Head Teachers and staff in the County.

School Health Service and School Clinics

Return for 31st December, 1956

I.—Staff of School Health Service

(excluding Child Guidance)

Principal School Medical Officer: Dr. M. T. Islwyn Jones

Principal School Dental Officer: Mr. J. G. Roberts

	Number	Aggregate staff in the service of the L.E.A. in terms of the equivalent number of whole-time officers.
--	--------	--

(a) Medical Officers:

(1) Whole-time School Health Service	—	—
(2) Whole-time School Health and Local Health Service	10	4.06
(3) General Practitioners working part-time in the School Health Service	—	—

	Number	Aggregate staff in the service of the L.E.A. in terms of the equivalent number of whole-time officers.
(b) Dental Officers	7	5.37
(c) Physiotherapists, Speech Therapists, etc.	1	1
(d) (1) School Nurses	20	10.16
(2) No. of the above who hold a Health Visitor's Certificate	15	—
(e) Nursing Assistants	—	—
(f) Dental Attendants	7	6.30

II.—Number of School Clinics (i.e., premises at which Clinics are held for schoolchildren) **provided by the Local Education Authority for the Medical and/or Dental Examination and Treatment of Pupils attending Maintained Primary and Secondary Schools.**

Number of School Clinics 8.

Location of School Clinics and number and type of sessions held in each:

Clinic Location	Eye Clinic	Dental Clinic	Minor Ailment Clinic	Child Guidance Clinic	Speech Therapy Clinic
No. 1 Grosvenor Rd., Wrexham	fortnightly	twice a week	Daily	—	weekly
Gatefield, Wrexham	—	—	weekly	twice weekly	weekly
Rhos	—	daily	weekly	—	weekly
Cefn	—	weekly	weekly	—	weekly
Denbigh	fortnightly	weekly	weekly	—	weekly
Llanrwst	full day once a month	weekly	weekly	—	—
Colwyn Bay	fortnightly	weekly	weekly	weekly	weekly
Abergele	—	weekly	weekly	—	—

III.—Type of Examination and/or Treatment provided at the School Clinics returned in Section II, either directly by the Authority or under arrangements made with the Regional Hospital Board for Examination and/or Treatment to be carried out at the Clinic.

Examination and/or Treatment	Number of School Clinics (i.e., premises) where such treatment is provided.	
	Directly by the Authority	Under arrangements with Regional Hospital Boards
(1)	(2)	(3)
(a) Minor ailment and other non-specialist examination or treatment	8	—
(b) Dental	7	—
(c) Ophthalmic	5	—
(d) Ear, Nose and Throat	—	—
(e) Orthopaedic	—	3
(f) Paediatric	—	—
(g) Speech Therapy	5	—
(h) Others	—	—

IV.—Child Guidance Clinics.

A "Child Guidance Service" is provided in conjunction with the Regional Hospital Board, and four sessions are held weekly.

The following table gives details of the staff:

Staff of Centres	(a) Number Colwyn Bay and Wrexham	(b) Equivalent in number of whole-time Officers*			
		Wrexham		Colwyn Bay	
		To Aug., 56	Sept.-Dec.	To Aug., 56	Sept.-Dec.
(a) Psychiatrists	2	2/11	4/11	3/11	2/11
(b) Educational Psychologists	2	2/11	2/11	2/11	3/11
(c) Psychiatric Social W'ker	3	4/11	5-6/11	3/11	4/11
(d) Child Psycho- Therapist	1	2/11	ill	2/11	ill
(e) Others	—	—	—	—	—

* 11/11ths are given to represent "full-time" in the National Health Service.

Handicapped Pupils requiring Education at Special Schools or Boarding in Boarding Homes.

	(1) Blind	(2) Partially Sighted	(3) Deaf	(4) Partially Deaf	(5) Delicate	(6) Physically Handicapped	(7) Educationally Sub-normal	(8) Maladjusted	(9) Epileptic	(10) Total — (1) - (9)
(a) Handicapped pupils newly placed in Special Schools or Homes	—	1	1	—	2	3	8	—	2	17
(b) Handicapped pupils newly ascertained as requiring education at Special Schools or boarding in Homes	—	4	—	—	3	2	69	—	1	79

Number of children reported during the year:

(a) Under Section 57(3), excluding any returned under (c)	12
(b) Under Section 57(3), relying on Section 57(4)	—
(c) Under Section 57(5) of Education Act, 1944	10

Handicapped Pupils requiring Education at Special Schools or Boarding in Boarding Homes.

(continued)

	(1) Blind	(2) Partially Sighted	(3) Deaf	(4) Partially Deaf	(5) Delicate	(6) Physically Handicapped	(7) Educationally Sub-normal	(8) Dalaadjusted	(9) Epileptic	(10) Total — (1) - (9)
(c) Number of Handicapped Pupils from the area:										
(1) attending Special Schools as:										
(a) Day pupils	—	—	—	—	—	—	20	—	—	20
(b) Boarding pupils	2	6	5	3	3	5	27	6	3	60
(2) Attending independent Schools under arrangements made by the Authority	—	—	—	1	—	—	—	—	—	1
Total (c)	2	6	5	4	3	5	47	6	3	81

INDEX

	Page
Administration	7
Child Guidance Centres	35
Cleanliness Inspections	16
Committees	2
Contents	1
Deaths of Schoolchildren	25
Delicate Children	35
Dental Clinics	39
Dental Staff	40
Diseases of the Skin	16
Dysentery, Outbreak of	26
Ear, Nose and Throat, Defects of	16
Education in Hospital	23
Educationally Subnormal Children	34
Employment of Schoolchildren	30
Eyes, Defects	19
Findings at Medical Inspections	10
Foreword	3
Handicapped Pupils	30
Handicapped Pupils, Returns	55, 56
Hearing, Defects of	18
Hospital, Education in	23
Immunisations	27
Infectious Diseases	26
Mass Radiography	29

	Page
Medical Inspections, Findings at	10
Minor Ailments	20
Nutritional Condition of Pupils	13
Ophthalmic Service	19
Organisers of Physical Education, Report of	42
Orthodontics	39
Orthopaedic Defects	20
Physically Handicapped Children	35
Principal School Dental Officer, Report of	38
School, Child Population	10
School, Clinics	53
School Dental Service	38
School Health Service and School Clinics	50
School Medical Inspection	10
School Milk	30
School Meals Service, Medical Examination of	30
Schoolchildren, Deaths of	25
Schoolchildren, Employment of	30
Skin, Diseases of	16
Speech Therapy	21
Staff	7, 50
Statistics	10
Teachers and Students, Medical Examination of	30
Tonsillectomy	17
Tuberculosis	27
Vaccinations	27
Vision, Defective	19

T A B L E S

	Page
Children Medically Examined at School	10
General Physical Condition	11
Analysis of Defects Found:—	
Periodic Inspections	12
Special Inspections	13
Diseases of the Skin	14
Defects of Ear, Nose and Throat	14
Tonsillectomy	15
Eye Defects	17
Analysis of Work performed by Speech Therapist ...	19
Infectious Diseases	22
Incidence of Tuberculosis in School Children	23
Mass Radiography Service	24
Handicapped Pupils:—	
Ascertained during year	26
At Special Schools	27
General position	28
Requiring Education at Special Schools	45, 46
Child Guidance:—	
Interviewed at Clinics	31
Visits	31
Children seen from other Counties	31
Analysis of Referrals	31

	Page
Dental Inspection and Treatment	34, 35
Staff of School Health Service	41
Location of School Clinics	42
Examination and Treatment at School Clinics	43
Child Guidance Staff	44