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Contributors

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MONMOUTHSHIRE EDUCATION COMMITTEE.

REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1958.

GWYN ROCYN JONES,

M.A., M.D., B.Chir., D.P.H.,
Principal School Medical Officer.

COUNTY HALL, NEWPORT, MON.

THE STAFF OF THE MONMOUTHSHIRE COUNTY COUNCIL SCHOOL HEALTH DEPARTMENT.

PRINCIPAL SCHOOL MEDICAL OFFICER-G. Rocyn Jones, M.A., M.D., B.Chir., D.P.H.

DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER-William Panes, M.R.C.S, L.R.C.P., D.P.H. CONSULTANT MEDICAL STAFF. D. B. Sutton, F.R.C.S., L.R.C.P. (Ear, Nose & Throat). J. T. Rice Edwards, F.R.C.S., L.R.C.P. (Surgical). G. W. Hoare, M.A., M.B., F.R.C.S. L.R.C.P. R. Vaughan-Jones, M.B., Ch.B., D.O.M.S., F.R.C.S. (Ophthalmie), Ophthalmic). D. N. Rocyn Jones, M.A., M.D., F.R.C.S. (Orthopaedic). Professor A. G. Watkins, M.D., M.R.C.S., F.R.C. (Heart and Rheumatic) David Thomas, B.Sc., M.B., M.R.C.P., D.P.M. D. F. V. Johnston, B.Sc., M.B., B.Ch. (Child Psychiatric).

(Child Psychiatric) DISTRICT AND AREA MEDICAL OFFICERS OF HEALTH AND AREA SCHOOL MEDICAL OFFICERS. Rhymney U.D.C. ... Area No. 1 M. J. Donelan, M.B., B.Ch., D.P.H. Tredegar U.D.C. Bedwellty U.D.C. R. A. Hoey, M.R.C.S., L.R.C.P., D.P.H. Area No. 2 Abercarn U.D.C. ... H. V. M. Jones, M.B., B.S., D.P.H. Area No. Mynyddislwyn U.D.C. Ebbw Vale U.D.C. Thomas Stephens, M.C., B.Sc., M.R.C.S., L.R.C.P., D.P.H. Area No. Nantyglo & Blaina U.D.C. J. Walters Bowen, M.B., B.Ch., D.P.H. Area No. Abertillery U.D.C. Magor & St. Mellons B.D.C. Area No. 6 K. P. Giles, M.B., Ch.B., D.P.H. Bedwas & Machen U.D.C. Risca U.D.C. Pontypool U.D.C. ... F. J. Hallinan, M.B.E., M.B., B.Ch., B.A.O., D.P.H. Area No. 7 *** Blaenavon U.D.C. Cwmbran U.D.C. Evelyn D.Owen, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. Area No. 8 Caerleon U.D.C. Chepstow U.D.C E. N. Dowell, M.R.C.S., L.R.C.P., D.P.H. Chepstow R.D.C. Area No. 9 Monmouth U.D.C. Monmouth R.D.C ... *** ... Abergavenny U.D.C. Abergavenny R.D.C. ... Usk U.D.C., Pontypool R.D.C. ... Area No. 10 Sadie M. R. Harvey, M.B., B.Ch., B.Sc., D.P.H.

SENIOR MEDICAL OFFICERS. L. Anne Wilson, M.D., Ch.B., B.Sc., D.P.H., D.C.H. (Maternity and Child Welfare). Mary Wells Jenkins, B.Sc., M.B., B.Ch., D.P.H.

MENTAL HEALTH OFFICER-Mary E. Cochrane-Dyet, M.B., B.Ch.

SCHOOL MEDICAL OFFICERS.

Mary Rose MacQuillan, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. A Joan Lewis, M.R.C.S., L.R.C.P. Anna Gregory, M.R.C.S., L.R.C.P. Margaret C. Jenkins, M.R.C.S., L.R.C.P. Mary Stewart, B.Sc., M.B., B.Ch. Mary Ll. Williams, M.B., B.Ch. Glenys G. Trenhaile, L.M.S.S.A. Nano Joyce Sumption, M.B., B.Ch., B.Sc.

Esther Hughes Rees, M.B., B.Ch William L. P. Gould, T.D., L.M.S.S.A. (Lond.) (Permanent from 22-9-58). Hywel G. Jenkins, M.B., B.S. (Lond.), D.P.H Cicely Waters, M.D., B.Sc., D.P.H., R.C.P.S. Lilian J. Powell, M.B., B.Ch., B.Sc. Rhiannon Morgan, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. Elfreda Alice Davies, M.B., B.Ch.

PRINCIPAL DENTAL OFFICER-E. F. J. Sumner, L.D.S., R.C.S. SCHOOL DENTAL OFFICERS.

J. C. Morley, L.D.S. Greta McHarg, L.D.S. W. S. Hazell, L.D.S., R.C.S. (Part-time). Ruth G. Phillips, B.D.S. (Commenced 28-4-58).

D. J. Coughlin. R. V. Clarke, L.R C.P. & S., L.D.S. (Ed.). Maureen F E. Vaughan-Jones, L.D.S.

SUPERINTENDENT OF HEALTH VISITORS & SCHOOL NURSES (Co-ordinated Service). Miss E. Morgan, S.R.N., S.C.M., H.V.

SPEECH THERAPISTS.

Mrs. U. E. Billinghurst, L.C.S.T. (R.M.A.). Miss K. B. Powell, L.C.S.T. (R.M.A.).

Miss Patricia Powell, L.C.S.T. (R.M.A.). Miss Enid W. Iles, L.C.S.T. (R.M.A.). (Commenced 3-2-58).

Teacher of the Deaf — Miss Audrey Guy (Commenced 1-5-58). ORTHOPTIST—Miss Margaret Ericson, D.B.O.

LADY HEALTH VISITORS AND SCHOOL NURSES (Co-ordinated Service). NURSES (Co-ordin Morgan, C. Prosser, I. Pulsford, M. Redwood, M. A. (Retired 26 11-58) Rogers, G. M. Rowlands, L. M. Silk, J. (Resigned 31-8-58) Service).

as, C. D.

b, H. M.

kes, E. J. (Commenced 1-9-58)

as, S. L.

wilberley, N. E.

williams, F.

williams, N.

williams, N. Baldwin, M.
Bevan, J. I.
Cooper, M. S.
Davies, M. J.
Delahay, M.
Dredge, M. W.
Edwards, E. N
Edwards, M.
Flise M. Fraser, E.
Giles, H.
Giles, M. R.
Gilford, M.
Golding, G. I.
Hockaday, S.
Harvey, B.
Hopkins, F.
Jackson, J. P. Simms, C. D.
Smith, H. M.
Sparkes, E. J. (Commenced 1-9-58)
Stevens, S. L.
Stinchcombe, N. G.
Tristram, L.
Wolter, M. James, E. N. Jones, A. Jones, E. Jones, I Jones, B. Kavanagh, P. G. Lewis, M. Lewis, R. w. Tristram, L. Walters, M. Watson, M. (Resigned 31-8-58) Elias, M.

ORTHOPAEDIC SISTER: Miss M. M. Pugh, S.R.N., S.C.M., H.V.

AUDIOLOGY UNIT NURSE: Mrs. Betty Pearce, S.R.N. (Commenced 1-2-58),

ORAL HYGIENIST : Mrs. P. Schofield.

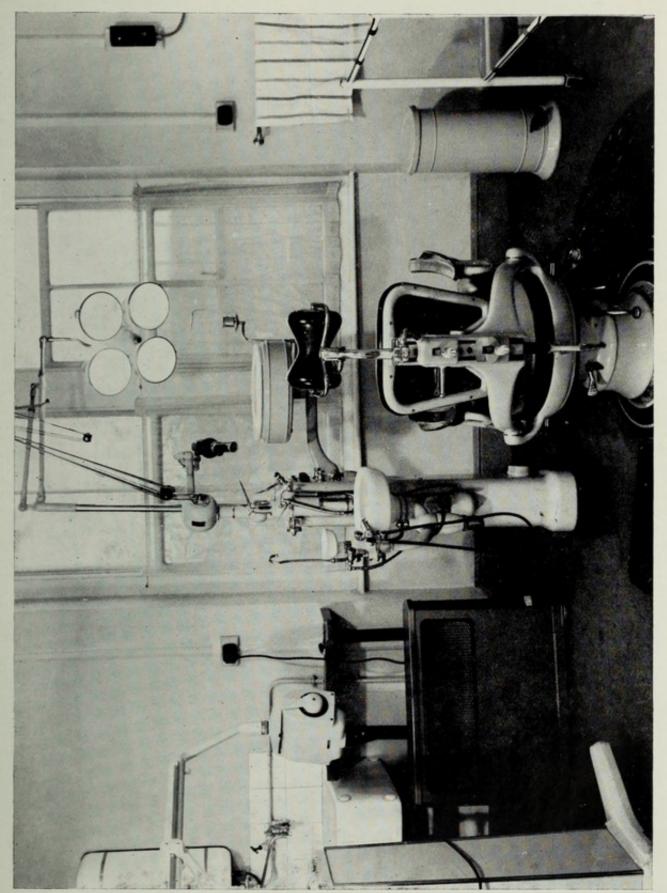
REFRACTION UNIT NURSE : Mrs. G. Sillman, S.R.N. (Commenced 8-9-58).

CHILD PSYCHOTHERAPIST: Miss Marie H. Dundas, B.A. (Hons.), Psych. Dip. I.C.P. (Commenced 1-9-59).

Miss O. Joan Annetts, B.E.M. (Resigned 28-2-58) Mrs. Carol Huggett, S.R.N.

DENTAL ATTENDANTS, Miss Betty Wynn. Mrs. O. Church, Mrs. R. Fiveash.

Mrs. S. M. Morgan. Mrs. Olwen P. Brodie. Miss C. F. Bufton (Commenced 23-6-58)



School Dental Clinic, Stanley Road, Newport.

PHYSICALLY HANDICAPPED, SPECIAL SCHOOLS types of handicapped children EPILEPTIC DEAF. DELICATE, BLIND, BACK WARD, BE BRIGHT SPASTIC and ORTHOPAEDIC CLINIC PHYSIOTHERAPY CLIMIC TRAINING NURSING CLINIC SPEECH SERVICE SCHOOL HEALTH MUST BE RIGHT FOR A CHILD EXTRACTIONS SCALINGS REGULATION DENTURES DENTAL INSPECTIONS of SCHOOLS SCHOOL HEALTH SERVICE MEDICAL INSPECTION AT SCHOOL MONMOUTHSHIRE COUNTY COUNCIL SCHOOL DENTAL TRAVELLING DENTAL CLINIC SERVING THE RURAL AREAS ON HOSPITAL SERVICE PREATMENT - ZZ DEAF CAR NOSE L'THROAT CONSULTATION HEART and RHEUMATIC SURGICAL CLINIC CLINIC

Coloured and Illustrated Board exhibited at National Eisteddfod of Wales.

MONMOUTHSHIRE EDUCATION COMMITTEE.

REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1958.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit my Annual Report upon the work of the School Health Service for the year ended 31st December, 1958.

The statistical tables of details of the general scheme of medical and dental inspection and treatment have been compiled in accordance with hose set out by the Ministry of Education, but are in fact slightly different from previous years.

Last year I commented upon the fact that the Poliomyelitis Vaccination Scheme was administered by my School Health Department, and this arrangement continued through 1958. Largely increased stocks of the vaccine became available during the second half of the year, which further increased the amount of work involved.

The average daily attendance at Schools, including day nursery schools and special residential schools, for the whole of 1958 was 57,357.

Staff.

Of the 30 Medical Officers on the Staff on 31st December, 1958, 29 were engaged in the joint work of the School Health Service and Maternity and Child Welfare. The other Medical Officer was in charge of Mental Health, but undertook responsibility for the conduct of the Child Guidance Clinic.

During the whole year the services of 8 Consultants were available, and details of the Clinics held are mentioned later.

The School Nursing and Health Visiting Services of the Council are co-ordinated and on 31st December, 1958, there were 47 School-Nurse Health Visitors on the Staff working under the direction of a full-time Supervisor. There was also one School-Nurse Health Visitor acting as Orthopaedic Sister at the School Orthopaedic Clinics. The actual time devoted to School Nursing was equivalent to that of 15 full-time nurses.

The School Dental Staff comprised the Principal School Dental Officer and 7 Dental Officers one of whom was part time. There was also 1 Oral Hygienist and 8 Dental Attendants.

The Speech Therapy Clinics were staffed by 4 officers.

For the whole of the year, the Orthoptic Clinic was staffed by a full-time orthoptist, as mentioned under "Orthoptic Treatment."

SCHEME FOR MEDICAL INSPECTION.

This has been carried out in conformity with the requirements of the Ministry of Education, a full medical examination of each child being arranged at each of three periods of school life. Infants are examined during their first year of school life and where this occurs before the child reaches the compulsory school age of five years, the examination is repeated the following year. Children at Nursery

Schools are medically examined at intervals of four months, and are constantly under supervision of health visitors.

During the last year at a primary school, children receive another full medical examination before proceeding to a secondary school. A further examination is carried out during the last year of compulsory school life. In the case of these leavers the examinations are arranged early in the school year so that any medical recommendations made may be dealt with before the pupil leaves school. Any pupils who continue to attend school after the age of fifteen years are medically examined each year afterwards.

In cases where defects are reported at medical inspection, action is taken to obtain further examination and treatment by reference to Consultants at our School Clinics or at Hospitals.

Inspection.

MEDICAL INSPECTIONS.—The numbers of children examined in the Primary and Secondary Schools

Monmouthshire (excluding Abertillery and Ebbw Vale

Periodic Inspections 11,823 721 1,306 13,850
Re-examinations and Specials ... 3,498 366 1,196 5,060

DENTAL INSPECTIONS.—The numbers of school children examined by the School Dentists were:

Monmouthshire (excluding Ebbw Vale,

including Abertillery) Ebbw Vale Total 37,934 3,061 40,995

CLEANLINESS .- The usual survey of school children was carried out by the Health Visitors :-

Monmouthshire (excluding Ebbw Vale,

Examinations made were 65,538 10,104 75,642

Number of individual pupils found unclean 2,125 138 2,263

During 1958, 592 children in the Ebbw Vale Area, and 682 children in the Abertillery Area were examined for physical fitness to receive swimming instruction. The Abertillery figure is in addition to the "Special Examinations" mentioned above.

Treatment.

The following Specialist Services were available during the year for treatment at School Clinics of children referred by School Medical Officers during their routine work:—

Clinic.	Specialist.	No. of Sessions held.
Rheumatic and Heart	Professor A. G. Watkins, M.D., M.R.C.S., F.R.C.P	One per month.
Ear Nose and Throat	D. B. Sutton, F.R.C.S., M.R.C.S., L.R.C.P	I wo per month.
Surgical	I. T. Rice Edwards, F.R.C.S., M.R.C.S., L.R.C.P	One per month.
Orthopaedic	D. N. Rocvn Jones, M.A., M.D., F.R.C.S	One per week.
	1 G. W. Hoare, M.A., M.B., F.R.C.S., L.R.C.P.	One per week.
Ophthalmic ,	R. Vaughan Jones, M.B., CH.B., D.O.M.S., F.R.C.S	One per week.*

Child Guidance ... D. F. V. Johnson, B.SC., M.B., B.CH. Two per month.
David Thomas, B.SC., M.B., M.R.C.P., D.P.M. ... One per week.

*In addition to the above routine clinics, Mr. Nathan Rocyn Jones held certain additional sessions bringing his total number of sessions for the year up to 79.

Mr. G. W. Hoare and Mr. R. Vaughan Jones also held a number of additional clinics.

The above Specialists held their clinics at the Central Clinic, Stanley Road, Newport, with the exception of Mr. D. N. Rocyn Jones, who visited various County Clinics as the demand arose.

Children requiring plastic surgery for defects such as hare-lip, cleft-palate, severe scarring, etc., were referred to Mr. Emlyn Lewis, F.R.C.S., who held out-patients clinics at St. Lawrence Plastic Surgery Hospital, Chepstow, and also at the Royal Gwent Hospital, Newport. The operations were carried out at the St. Lawrence Hospital.

School Clinics.

In the Autumn of 1958 a new School Clinic was opened at The Grove, Tredegar, Provision was made for an Eye Clinic, Orthoptic Clinic, Audiology Clinic, Speech Therapy Clinic, Orthopaedic Clinic etc. Certain structural alterations still required to be carried out, and when these are completed the whole will constitute an up-to-date School Clinic.

Details of School Clinics as at the end of 1958 and their situation and types of cases treated or examined are as follows:—

a	are as follows.		
	Situation.	Average No. of Weekly Sessions	Nature of School Clinics held.
	Central School Clinic, Stanley Road,	2.5	Ophthalmic, treatment and consultation. General Surgical, consultation.
	Newport.		Ear, Nose and Throat, consultation and treatment Audiology.
		0.2	Orthopaedic, treatment and consultation.
			Heart and Rheumatic, consultation.
			Orthoptic, treatment.
			Speech Therapy, treatment.
			Dental (including Orthodontic).
		10.0	Physiotherapy.
		1.0	Miscellaneous medical examinations.
		3.0	Defective vision, refractions.
		0.5	Child Guidance.
	Ashgrove House,	9.0	Dental (including Orthodontic).
	George Street,	2.0	Defective vision, refractions.
	Pontypool.	4.0	Speech Therapy.
	its for Detective Wilder	0.2	Orthopaedic.
	Beaumont House,	10.0	Dental (including Orthodontic).
	Bloomfield Road,	2.0	Defective vision, refractions.
	Blackwood.	0.2	Orthopaedic.
		2.0	Speech Therapy.

Averag	e No. of	
Situation. Weekly	Sessions	Nature of School Clinics held.
School Clinic,	7.0	Dental
59, Commercial Street,	2.0	Defective vision, refractions.
Abertillery	0.2	Orthopaedic.
	4.0	Speech Therapy.
	2.0	Minor Ailments.
School Clinic,	4.0	Dental.
Armoury Hill,	2.0	Defective vision, refractions.
Ebbw Vale.	0.2	Orthopaedic.
	2.0	Minor Ailments.
	4.0	Speech Therapy.
School Clinic,	2.0	Audiology.
The Grove,	2.0	Orthoptics.
Tredegar.	1.0	Child Guidance.
	2.0	Speech Therapy.
School Clinic,	2.0	Dental.
Church Street,	2.0	Defective vision, refractions,
Tredegar.		
School Clinic,	1.5	Dental.
Boverton House,	0.2	Orthopaedic.
Chepstow.	0.5	Mobile Clinic visits for defective vision refractions.
	2.0	Speech Therapy.
School Clinic.	1.0	Dental.
Old Barclay's Bank Buildings		
Rhymney.	Sur A	
School Clinic,	4.0	Dental.
Health Centre,	no heat	
Blaenavon.		
School Clinic,	3.0	Dental.
Park Place,	0.25	Defective vision, retractions.
Risca.	of the state of	
Workmen's Hall,		
Llanhilleth.	1.0	Minor Ailments.
Leven House,	2.0	Speech Therapy.
Abergavenny.	2.0	Mobile Clinic visits for Dental Treatment.
and the state of t	0.25	Mobile Clinic visits for defective vision refractions.
School Clinic,	0.25	Mobile Clinic visits for Dental Treatment.
Ty Brith,	0.25	Mobile Clinic visits for Defective vision refractions.
Usk.	2.0	Speech Therapy.
School Clinic,	4.0	Dental.
Ashfield Road.	1.0	Speech Therapy.
Newbridge.	0.2	Orthopaedic.

The Clinic,	2.0	Speech Therapy.
Ty Brith,		
20, Oak Street,		
Cwmbran		
The Ambulance Hall,	2.0	Speech Therapy.
Monmouth.	2.0	Dental.
	0.25	Defective Vision, refractions.

MOBILE SCHOOL CLINIC.

A modern travelling School Clinic was used entirely for Dental Treatment in country areas.

A similar vehicle, equipped for refractions, was used in similar areas for treatment of defective vision.

Except in the cases of the School Clinics at Ebbw Vale, Church Street, Tredegar, Victoria Hostel, Park Place, Risca, and the Mobile Dental Clinic, all the premises were also used for the work of Maternity and Child Welfare.

All school children attended the Clinics by appointment. In the case of certain emergency dental treatment, however, every effort was made for the treatment to be given with as little delay as possible.

Speech Therapy.

During 1958, Speech Therapy Clinics were held at 14 Centres, situated in convenient parts of the County. The year commenced with a staff of three full-time speech therapists but on February 3rd, 1958, Miss Enid lles joined the staff and for the remainder of the year there were four-full-time officers on duty.

It would appear that parents are becoming increasingly aware of the existence of facilities for the correction of speech defects, and many requests for treatment are received from the parents themselves in respect of their children. Some parents, however, do not realise that their interest and cooperation is of the utmost importance if good results are to be obtained. Progress is hindered, and length of treatment prolonged, if attendance is irregular and/or there is a lack of interest at home.

With the fuller staff available it has been possible to give appointments for treatment without delay, with improved results. It has also been possible to increase the number of visits to schools.

Speech therapy has been made available to spastic children, a speech therapist being present at each clinic at which spastic children attend for special treatment.

In July, 1958, authorisation was obtained for the purchase of four tape-recorders, and one was placed at the disposal of each of the four speech therapists. This has made possible the initiation of a record library of the more severe cases in each clinic. The benefit of this will become apparent in 1959.

The number of sessions arranged at the various centres varied according to the demand and lengths of the respective waiting lists. At the end of 1958 the numbers of sessions given to Speech Therapy at the different Clinics were as follows:—

Abertillery		 10	4	half-day	sessions	per	week	(average).
Blackwood	ollo	 	2	slife ,, das	ine ,, ion	,,	,,	
Pontypool	Bible	 	4	molt, van	the, Cou	,,	.,,	o dollasmos
Ebbw Vale		 	4	,,	ne 0 de	,,	.,	a mili, plantain
Newport		 	6		.,,	,,	sp.edo	ideas of sloot
Tredegar		 	2	,,	,,	,,	.,	the Continue
Newbridge		 	.1	,,	,,	,,	,,	.,

Usk			 2	half-day	sessions	per	week	(average).
Chepstow			 2	,,	,,	***	,,	18.00
Monmouth			 2	,,	,,	"		.,
Abergavenny			 2	,,	.,,	,,	,,	.,
Cwmbran			 2	,,	,,	,,	,,	
Neville House,	Garndiffa	ith	 2	,,	,,	,,	***	mad
Sunninghill, Tr	edegar		 2	,,	,,	,,	,,	**
School Visits			 3	,,	.,	**	,,	,,

Treatment was by appointment and in general was given in periods of half-hour at weekly intervals. Where necessary and possible bi-weekly appointments were given. In some cases the period of treatment was a few months, but others extended to years, according to the type of defect to be remedied.

During 1958, 8,212 appointments were made, 5,726 of which were kept.

370 children were treated during the year. 92 were discharged for non-attendance, 5 as unsuitable for treatment, 104 as cured, whilst 4 left school. There were 30 discharges for other reasons.

102 visits to Schools were made by Speech Therapists for purposes of examination and treatment of pupils.

Orthoptic Treatment.

One full-time Orthoptist served the Orthoptic Clinic for the whole of 1958, and there was an unfilled vacancy for one part-time Orthoptist.

The Orthoptic Clinic was held at Stanley Road, Newport, and was conducted under the direction of the Ophthalmic Surgeon attending the Ophthalmic Clinic. Cases were referred by the latter for the assessment of squint with a view to operative treatment in hospital or to correction by means of exercises, etc., at the Orthoptic Clinic itself.

During the year 3,730 appointments were sent for attendance at the Clinic, of which 771 were not kept. 239 new cases were seen and in addition 992 treatment periods were given to old cases. A further 385 attendances were made for occlusion and 1,292 for observation, whilst 51 cases were discharged from the Clinic. Of the cases discharged, 21 were cured, 20 were improved and not likely to benefit from further treatment, and 10 were found to have no squint. There were also cases discharged as having a cosmetically satisfactory result, but these only received supervision in the Orthoptic Clinic, pre- and post-operatively on behalf of the Ophthalmic Clinic, and did not receive actual orthoptic treatment, because of the absence of binocular vision.

Consultant Ophthalmic Clinic.

Mr. G. W. Hoare and Mr. R. Vaughan Jones, each held Consultant Ophthalmic Clinics at the Stanley Road premises for a half-day session per week, with extra sessions arranged as required by the length of the Waiting List. At this Clinic all new cases of squint were examined and the necessary treatment instituted. The Clinic was also attended by a Medical Officer of the School Health Department and as the Orthoptic Clinic was held in an adjacent room at the same time, cases were dealt with in the most comprehensive manner. Suitable children were referred for orthoptic treatment or for operative correction of squint at the County Hospital, Griffithstown. 123 children were operated upon for squint during the year at the County Hospital.

Difficult refractions or other eye conditions were referred by School Medical Officers for examination at the Ophthalmic Clinic, as also were any severe external eye conditions. Children suspected

of being blind or partially sighted were also examined and if necessary certified as Handicapped Pupils.

During the year 1,066 children were refracted during their examination and spectacles were prescribed in 992 cases.

Refraction Clinics.

In addition to the Consultant Ophthalmic Clinic, School Medical Officers held refraction clinics at a number of premises in the County. Here ordinary refractions were carried out, and any difficult cases or cases of squint which were encountered were referred to the Consultant Clinic. In 1958 1,916 refractions were carried out at the Refraction Clinics and in 1,604 cases, spectacles were prescribed.

Colour Vision.

In 1957 there was instituted a scheme for detection of defective colour vision in school children of a certain age group. The selected children were those in the year prior to transfer to secondary schools. Demonstrations had been given to Head Teachers in the use of the Isihara Book with its special coloured panels, and a book was sent to each Head Teacher for a short period in which he/she applied the tests to the eligible pupils. Lists of pupils found to have defective colour vision were sent to the School Health Department for reference to eye clinics.

This procedure was continued in 1958 and confirmed cases were notified to the Secondary School Head Teacher for his guidance in view of the bearing that the defect may have on the choice of career. Parents were also notified.

Ear, Nose and Throat Ailments.

The Ear, Nose and Throat Clinic at Stanley Road, Newport, was held once or twice weekly throughout the year for the diagnosis and treatment of school children. Here cases were primarily examined by a School Medical Officer who has had considerable experience in the work. Treatment was either instituted immediately or in suitable cases the children were referred for examination at the Clinic by the visiting Consultant Aural Surgeon, Mr. D. B. Sutton. Arrangements were made when required for hospital treatment.

Many cases of children requiring operative treatment for tonsils and/or adenoids, were notified direct to this department by general medical practitioners and were referred direct to the County Hospital, Griffithstown, or The Aberbargoed and District Hospital, for examination by their visiting Consultant Aural Surgeon.

During the year 1958, 69 operative sessions were held at the County Hospital, Griffithstown, by Mr. J. L. D. Williams, F.R.C.S., for removal of tonsils and/or adenoids. 504 cases were operated upon, these including proof-puncture of antrum where required. 157 names were removed from the Waiting List following a preliminary examination by the surgeon, when operation was found to be unnecessary, or for other reasons. There were 60 preliminary Consultation sessions at which 608 children were examined for the first time and 120 children were re-examined.

The number of names added to the Waiting List at the County Hospital was 812, as compared with 872 in 1957. The number of names on the waiting list on 31st December, 1958, was 207 compared with 123 at the end of 1957.

At the Aberbargoed and District Hospital 181 operations were carried out for removal of tonsils and/or adenoids by Mr. Peter Thorpe, F.R.C.S.

A further 147 operations were carried out in the area of the Divisional Executive.

General Surgical Treatment.

Mr. J. T. Rice Edwards, F.R.C.S., held a monthly clinic at the Stanley Road, Newport, premises at which he examined all children referred by School Medical Officers for the opinion of a surgeon. Where surgical treatment was recommended arrangements were made for this to be carried out at the County Hospital, Griffithstown, I must express to Dr. W. M. Parry-Jones, the Medical Superintendent of that Hospital, my gratitude for his help and co-operation and for the expeditious way in which these cases were dealt with.

In 1958, 76 new cases were examined at the School Surgical Consultation Clinic, and there was a total of 115 attendances.

Paediatric Cases.

All cases of children in need of the opinion of a Paediatrician with regard to obscure diseases were referred to local Hospitals as the County Council has no Paediatric School Clinic. Most of the cases are examined by Dr. T. A. Brand, and I am most grateful to him and the other Paediatricians for their kindness in forwarding to me copies of their reports. The reports are added to the children's School Medical Record Cards and the information is invaluable at School Medical Inspections.

Heart and Rheumatic Clinic.

Professor A. G. Watkins continued to hold clinics at Stanley Road, the frequency depending upon the demand. Last year I referred to the downward trend in the number of new cases of suspected heart disease and this movement continued in 1958, as is shown:—

1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958
164	166	57	101	60	95	57	58	37	30	21	17

There was a total of 139 attendances during 1958.

Orthopaedic Clinic.

A large number of Orthopaedic defects are referred to the School Orthopaedic Clinic and are dealt with by Mr. D. Nathan Rocyn Jones, F.R.C.S., the Consultant Orthopaedic Surgeon. In addition to the more serious orthopaedic defects a large number of cases of flat feet or of postural defects are also met with. Those cases requiring hospital treatment are dealt with at the Royal Gwent Hospital, Newport, the County Hospital at Griffithstown, or the Prince of Wales Orthopaedic Hospital, Cardiff. Between the Orthopaedic Clinic and these three hospitals there is close liaison and very satisfactory results are obtained.

At the Stanley Road Clinic, there is a Physiotherapy Department under Miss M. Walker, an Orthopaedic Sister who has had special experience with Physiotherapy in cases of cerebral palsy and whose services are provided by the Regional Hospital Board. At this Clinic are dealt with those cases referred by the Orthopaedic Surgeon for Physiotherapy, whilst once per month the surgeon holds a special clinic there for the examination of spastic cases and reviews with the Sister the old cases.

Surgical appliances are prescribed and obtained where necessary.

Miss M. Pugh, an Orthopaedic Sister employed by the County Council attends the Orthopaedic Clinics and holds special exercises clinics at Blackwood and Rhymney. She also holds a weekly clinic at Stanley Road, Newport, for the supervision of supplied appliances, etc.

Owing to the large number of cases requiring observation or follow-up examinations, Dr. Rhiannon Morgan held follow-up clinics of her own, thus relieving the considerable pressure on the Consultant Orthopaedic Clinic. Dr. Morgan examined 210 cases during the year.

Mr. D. Nathan Rocyn Jones examined at his Clinics, 839 new cases with a total attendance of 2,216.

46 new cases attended the Physiotherapy Clinic at Stanley Road, and there was a total of 1,957 attendances.

20 children were admitted as Orthopaedic In-patients to the County Hospital, Griffithstown, during 1958, and 36 cases attended for Physiotherapy.

Tuberculosis.

12 cases were referred by School Medical Officers for examination by Chest Physicians. None of the children revealed any evidence of tuberculosis.

Other Treatment.

Details of other treatment given may be found in later pages.

REPORT OF PRINCIPAL SCHOOL DENTAL OFFICER.

At the end of April, 1958, the Staff of School Dental Officers was increased when Ruth Phillips (nee Jenkins) commenced duties. The 1957 Staff still remained in office so that from April 28th, 1958, to the end of 1958, in addition to the Principal School Dental Officer there were six full-time School Dental Officers, and also one part-time officer who worked in the Ebbw Vale area of the Ebbw Vale, Abertillery, Nantyglo and Blaina Divisional Executive Committee. There remained one unfilled vacancy for a School Dental Officer and there was no applicant for this.

Comprehensive facilities for attaining dental health are available to every child in the County's maintained schools by means of the School Dental Service. Regular Routine Dental Inspections at the schools bring to light the defects which are present in children's teeth, and in every case where treatment is required a notice is sent to the parent. The parents are requested to give written permission for treatment to be carried out by the School Dental Service. Appointments are sent for children of consenting parents as soon as possible after the inspection.

Dental treatment is provided at modern surgeries situated in various parts of the County and the most up-to-date equipment is used. Conservation is the prime object of the Service, but extractions form a considerable part of the treatment given. It is to be regretted that so many children fail to attend for dental fillings, this contributing substantially to the demands for extractions, frequently at short notice owing to toothache. Scaling and polishing and gum treatment is also carried out by an Oral Hygienist. Special Clinics are held for the purpose of orthodontic treatment and these measures for the correction of dental irregularities are very much appreciated.

A mobile dental surgery carries facilities for dental treatment to children in the rural areas by attending at the schools.

X-ray facilities were also available, and 240 X-ray examinations were made during 1958.

During 1958, 40,995 pupils were dentally inspected and 30,309 were found to require fillings or extractions. Acceptances of offers of treatment were received from the parents of 25,800 and appointments for treatment were sent, but only 19,151 pupils attended for treatment.

The Oral Hygienist, working under the supervision of the Principal School Dental Officer, treated 3,389 children by scaling and polishing during the year under review and there were 3,579 attendances for this purpose. Many of the cases were treated at the same time as attendance was made for other treatment. 1,005 cases were referred from School Dental Inspections as requiring treatment by the Oral Hygienist only.

Courses of sodium fluoride application, for which children attended weekly for four weeks, were carried out by the Oral Hygienist and 75 children received this treatment.

Every endeavour is made to impress upon the older pupils, and the parents of the younger ones the importance of dental health and the necessity for early treatment of any detected defects. It is to be feared, however, that much of the advice falls upon stony ground.

PROVISION OF SCHOOL MEALS AND MILK (INCLUDING THE DIVISIONAL EXECUTIVE AREA).

There are at present 254 School Canteens providing meals, free of charge or on payment, to 333 School Departments.

The average daily number of children provided with meals is as follows:-

Free	 		 	 	 1,884
On Payment	 	0	 	 (0	 15,756
		Total	 	 	 17,640

Milk is supplied free of charge for drinking purposes.

HANDICAPPED PUPILS.

The sub-joined table gives details of the Handicapped Pupils on the register.

Arrangements for dealing with Handicapped Pupils are unchanged from last year.

During the year 1958, 124 pupils were examined for the first time under Section 34 of the Education Act, 1944, with regard to educational subnormality, and 55 children were re-examined under this Section. 42 examinations were carried out under Section 57.

As a result of examinations by specially approved School Medical Officers under Section 34 of the Education Act, 1944, and re-examination under Section 57(3) of the same Act, 18 pupils (10 boys and 8 girls) were transferred to the care of the Local Health Authority as being incapable of receiving education at school. Under Section 57(5) of the same Act, certain pupils were specially examined during the last two terms of attendance at school, and 20 (16 boys and 4 girls) transferred to the care of the Local Health Authority as requiring supervision after leaving school.

In cases of children suffering from more than one defect difficulty is sometimes encountered in placing them in suitable special schools. Where there is mental retardation, particular difficulty is experienced as normal intelligence is usually required to enable the pupil to benefit from the special methods of education. As a general rule, in cases of multiple defects attempts are made to place the children in schools where their major handicap is catered for.

Handicapped Pupils, 1958.

post maderal to manner post admir more a sta post B vanication in the state and state in	No. admitted to Special Schools during 1958.	No. in Special Schools on Jan. 1st, 1958, and for whole or part of 1958. (b)	No. not in Special Schools. (6)	Total on Register.			
Blind Pupils	2	9	4		15		
Partially Sighted	ome	7	5	and the land	13		
Deaf	lange all navel a	22	10	33			
Partially Deaf	tine gliz on a	2	2	4			
Delicate	23	34	60		117		
Epileptic	3	4	9	16			
Physically Handicapped	6	16	41	la su manage	63		
Speech Defect			10		10		
to Dr. Favlar paid another the bar and a second another the bar and a second a secon	Bit weldt deat i	O the Jee digital behavior and behavior to be a second and behavior an	Total number on register recommended for Special School.	No. under observa- tion.	Recommended for Tuition in ordinary schools and not requir- ing Residential Treatment.	Total on Register.	
Educationally Sub-normal	16	62	102	187	210	577	
Maladjusted	5	19	13	31	9	77	

EARLY DIAGNOSIS AND TREATMENT OF DEAFNESS AMONG CHILDREN.

Further to my report for 1957, the Scheme for Early Diagnosis and Treatment of Deafness among children proceeded, the necessary technical equipment having been obtained. A room at the School Clinic, Stanley Road, Newport, was rendered sound-proof and on 1st February, 1958, Sister B. Pearce commenced duties as special nurse attached to the Audiology Unit. On the 1st May, 1958, Miss Audrey Guy, who was specially qualified, joined the staff as a Teacher of the Deaf.

Most of the clinic work was carried out at the Stanley Road Clinic, Newport, but towards the end of the year some preliminary testing was carried out at the clinic at "The Grove," Tredegar. Arrangements were commenced for the provision at "The Grove," of the special requirements of the Audiology Clinic and it was hoped that this work would be completed in 1959.

The Audiology Unit worked under the direction of Mr. D. B. Sutton, Consultant Ear, Nose and Throat Surgeon, and was staffed by a Senior Medical Officer of the Council's Staff and who had received special training in the work, a special clinic nurse, and later, a specially qualified Teacher of the Deaf. Hearing aids were provided according to individual needs and included aids supplied under the National Health Service and also commercial aids which were specially suited for certain cases of selective deafness. The Minister of Education had given his sanction for the provision of the latter type, subject to his approval in every individual case. The cost of the commercial hearing aids was borne by the Monmouthshire County Council and the expenditure ranked for grant. A substantial discount was obtained in the purchase of the instruments.

It was anticipated that Health Visitors would contribute to the success of the scheme for detecting deafness at a very early age, and with this in mind, negotiations were carried out with the Department for the Education of the Deaf at Manchester University, for a visit by Dr. Ian Taylor for the purpose of giving instruction to Health Visitors.

Dr. Taylor attended at the School Clinic, Stanley Road, Newport, on 14th and 15th January, when he lectured to a number of Health Visitors on testing young children for deafness. The Health Visitors were requested to apply the knowledge they had gained and refer any suspected cases of hearing defects to the Medical Officer of the Audiology Unit. On 10th July, 1958, Dr. Taylor paid another visit to the Stanley Road Clinic and observed the methods of the Health Visitors, who had by now been able to obtain some experience of testing their own infant welfare clinics. Following this he gave further instruction.

The following is a report upon the work of the Audiology Unit during 1958:-

A. Deafness in the Recently-born.

Monmouthshire has a population of 327,500 and there were approximately 2,790 live births in the Administrative County during the half-year January to June, 1958. During 1958 a survey of all babies in the obstetric groups at risk, born in the County during the six months was carried out. Information regarding abnormal ante-natal history or birth was obtained by the Medical Officer of the Audiology Unit by inspection of the Domiciliary Midwives' Register of Births and also by visits to Hospitals with maternity accommodation.

286 babies were selected for testing for hearing loss, and these were screened by the Medical Officer, with the help of one or other of the Audiology team. The method of testing was the one commonly known as the Distraction Technique. One tester acting in the roles of Observer and Distractor faced the baby while the other examiner tested the acuity of hearing on both sides, by means of the human voice, cup and spoon, and high-pitch rattle, screened to exclude all sounds below 4,000 cycles. Lack of response to these sounds within normal

range of hearing, i.e., 3 feet for the younger babies of 6-9 months of age; 4 feet for the older babies of 9-12 months of age, together with satisfactory testing conditions, was deemed sufficient to qualify the child for a re-test.

Number of babies screened				256
Number of babies failing first screening .				27
Number of babies failing clinical examinat	ion			13
Number of babies visited but not seen (died,	moved,	refused	l, etc.)	27

The babies which failed to pass the initial screening and a repeat test, and also failed to pass the subsequent clinical examination were found to fall into the following obstetrical groups:—

Toxæmia of pregnancy. Asphyxia. Prematurity.

B. Deafness in the Pre-School Child.

Cases seen in the Audiology Clinic, for Diagnosis in 1958.

				New.	Old.	Total.
Conductive Deafness				8	3	.11
Nerve Deafness				15	5	20
Total cases investigated				22	9	31
Surgery for Conductive Deafness in	1958.					
Tonsils and Adenoids remove	d	-5		3	(5/8) 1	4
Tonsils and Adenoids and Pro	of Pur	ncture o	f Antr	a 1	1	2
In each case the result was sati	isfactor	ry and n	ormal	hearing w	as restored.	

Nerve Deafness.

Number of cases of Nerve Deafness under continual supervision by the Teacher of the Deaf and Audiology Unit in 1958.

Children of normal intelligence, with no other handicap	,	,	 	11
Children with Cerebral Palsy			 	8
Children severely retarded, mentally and physically	d Forei	and the		7

C. Deafness in School Children.

Cases seen in Audiology Clinic for Diagnosis in 1958..

	New.	Old.	Total.
Total children aged 5-10 years	45	34	79
Total children aged 10-15 years	29	39	68
Cases of Nerve Deafness in 5-10 years group	. 8	11	19
Cases of Nerve Deafness in 10-15 years group	4	12	16
Cases of Conductive Deafness in 510 years	36	24	60
Cases of Conductive Deafness in 10-15 years	24	28	52

Nerve Deafness.

Number of nerve deafness, under continual supervision of the teacher of the Deaf, and the Audiology Unit:—

(i)	Children of normal into	elligen	ce, in So	hool:			
	5-10 years of age				 	 	24
	10-15 years of age				 	 	30
(ii)	Children with Cerebral	Palsy	:				
	5-10 years of age				 	 	4
	10-15 years of age				 	 	1
(iii)	Children with Mental R	etarda	tion:				
	5-10 years of age				 	 	6
	Over 10 years of age				 	 	7
onductiv	e Deafness.						

Co

Surgery for conductive deafness in 1958:-

	New.	Old.	Total.
Proof Puncture of Antra	1	11	12
(Still requiring supervision thereafter)	0	0	0
Tonsils and Adenoids removed	4	3	7
(Still requiring supervision thereafter)	3	3	6
Tonsils and Adenoids and Proof Puncture of Antra	12	0	12
(Still requiring supervision thereafter)	2	0	2
Removal of Adenoids	1	2	3
(Still requiring supervision thereafter)	0	0	0
Removal of Adenoids and Proof Puncture of Antra	100	2	3
(Still requiring supervision thereafter)	0	2	2
Politzerisation	1	l south	2
(Still requiring supervision thereafter)	0	0	0
Mastoidectomy	0	3	3
(Still requiring supervision thereafter)	0	3	3
Tympanoplasty	0	- 10 25 11 1 2 1 1 1	1
(Still requiring supervision thereafter)	0	DEV CASE 13	1
Cerumen and Foreign Bodies	2	0	2
(Still requiring supervision thereafter)	0	0	0

D. Conductive Deafness (Otitis Media) in School Children.

All first-occasion discharges from the ears were notified to the Audiology Unit by the Staff of the Health Department within the first few weeks of occurrence. The Audiology Unit gave instruction to Home Nurses in the technique of treatment, as prescribed by the Director of the Unit and also in the use of auriscopes, which were supplied to each Nurse. Verification was obtained that the initial discharge had ceased, thus for the time being, preventing progress towards chronic ear discharge and subsequent deafness.

The occasional recurrences of the initial ear discharge (less than 10% of the total) were reported again to Audiology Unit within a week of recurrence and repetition treatment dried the discharge in less time than the initial attack.

The initial treatment consisted of aily dry swabbing and instillation of spirit drop and no case was prescribed antibiotic treatment without first ascertaining the sensitivity of the causative organisms.

52 cases of children who had long-standing otorrhoea prior to attendance at the Audiology Clinic and had a hearing loss of 20 decibels or more in one or both ears were dealt with during the year and 13 were provided with the National Health Service Monopak Hearing Aid and one with a Commercial Aid.

E. Survey of Hearing Acuity in an Occupation Centre	for Mentally Handicapped
---	--------------------------

Number of children seen	 	 92
Number of cases of intermittent otorrhoea and deafness	 	 2
Number of children with perceptive and executive asphasia	 	 3
Number of spastic children with nerve deafness	 	 5
Others under observation as possibly deaf	 c	 1
Number for whom hearing aids were subsequently ordered	 	 4

The Teacher of the Deaf keeps the defective children under supervision, and pays weekly visits to the Centre.

F. Survey of Hearing Acuity in Hilston Park Residential School for Educationally Subnormal Boys.

Number of boys seen	
Number of boys with normal audiographs (less than 20 db, loss in any frequency)	14
(i) Number of boys with one ear defective (i.e., more than 30 db. loss in	
2 or more frequencies)	14
Number of boys in (i) with more than 40 db. loss in 2 or more frequencies	
(ii) Number of boys with both ears defective (i.e., more than 30 db.	
loss in 2 or more frequencies	13
Number of boys in (ii) with more than 40 db. loss in 2 or more frequencies	8
Number of boys in (ii) with more than 40 db. loss in 2 or more frequencies	0

Subsequent testing of these cases six months later, confirmed these patterns. The method of testing was one suitable to children with a mental age of five years or over i.e., by conditioned reflexes to pure tones. Furthermore there was no correlation between the lower intelligence indices and defective hearing; and where there was only one defective, it was frequently found to be the second ear tested, when it would have been thought that the child should have become more familiar with the testing situation.

A further re-test, a year later, confirmed the original pattern.

G. Hearing Aids Prescribed in 1958.

Alus I lescribed in 1996.	Trational Freath	
	Service. Commercial	1.
Audiology Unit	19 18	
to have been prescribed otherwise	4	

H. Sources of Reference of Cases in 1958.

Categories: Possible deafness; discharging ears.

Cases referred by:-

By the Known

Area Medical Offi	cers		 	20
Assistant Medical	Office	ers	 	75
Health Visitors			 	17
Consultants			 	14
Physiotherapist			 	4
Child Guidance C	linic		 	9

Speech Therapists	;			od.	10
Infant Welfare C	linics				15
Parents				- E	10
Head Teachers					4
Audiology Team	'(Obste	etrical	Group	Survey)	286
		T	otal	W22221	464

CEREBRAL PALSY-" SPASTICS."

The Cerebral Palsy Scheme which has been in operation since 1954 continues to operate to the benefit of many children and their parents. Numbers on the Register at 31-12-58 are as follows:—

1. Pre-School Age		46
2. School age		94
3. Over School age	- Hill will will	36

1. Pre-School Age.

The increase in number of pre-school age cases may reflect a slight increase in incidence or it may be a reflection upon the new awareness of this affliction, whereby children are referred at an earlier age for diagnosis. The value of early assessment, early treatment and early training is shown by the following figures relating to cerebral palsied children seen at an early age at the Backward Babies Clinic, and now of school age. Of the 39 children assessed, 9 are attending normal schools (4 educationally sub-normal) 4 are attending or waiting for places in special residential schools; 6 are having education at home; 8 have been transferred to the Local Authority and are attending or awaiting places in Occupation Centres; and 2 have left the district. National statistics imply that over 40% of cerebral palsied children are mentally defective—whereas only 23% of the children referred to above have proved to be mentally defective.

2. School Age.

It is our policy to retain and educate handicapped children in their own homes and local schools so that they may take their places in a normal social environment. 44 are therefore attending the Authority's own schools; 8 are receiving education in school subjects in their homes; 17 have places in residential schools which cater for specific disabilities. 23 have been transferred to the Local Authority as mentally defective and of these 17 are attending or awaiting places in Occupation Centres, 2 are at home and 4 have been placed in institutions at their parents' request.

3. Over School Age.

Of the total number known to us, 16 have been ascertained to be mentally defective and attend or are awaiting places in Occupation Centres. Of the remainder 10 are in employment, 6 are in residential training establishments and 4 are at home.

There is a need in the County for the provision of training facilities for handicapped persons.

Child Guidance.

The Child Guidance Service for the diagnosis and treatment of maladjustment in children is the joint effort of the School Health Service and the Welsh Regional Hospital Board. Two Clinics have functioned throughout the year, as formerly—Newport and Tredegar. The retirement of Dr. Cox, Edu-

cational Psychologist, early in the year and the period elapsing before his successor Mr. Jones took over, caused heavy demand on the services of Miss Edwardson the Assistant Psychologist. We were pleased to welcome Miss Dundas, Child Psychotherapist, in May, and since her appointment she has done very valuable work for the children assigned her for treatment by the Psychiatrists at both Clinics.

Child Guidance Clinic, Newport—Report for 1958.

Staff: Dr. D. F. V. Johnston, B.Sc., M.B., B.Ch., Assistant Psychiatrist, St. Cadoc's Hospital.
Dr. Mary E. Cochrane-Dyet, Senior Medical Officer, Mental Health, who is responsible for

the day to day administration.

Dr. J. W. Cox, Educational Psychologist, Mon. County Council, retired 16th January, 1958.

Miss Edwardson, Assistant Educational Psychologist, Monmouthshire County Council.

Mr. Jones, Educational Psychologist, Monmouthshire County Council, appointed June, 1958.

Miss S. Readman, seconded from duty as Mental Health Social Worker for Psychiatric

Social Worker duty shared with

Mr. James, Psychiatric Social Worker, Education Department, Monmouthshire County Council.

The Team met on alternate Tuesdays and Clinic sessions were held at the School Clinic, Stanley Road, Newport, the Mental Health Department providing clerical assistance. As was anticipated the appointment of the lay psychotherapist has meant that much remedial work has been undertaken at the Clinic and Dr. Johnston has continued to treat a number of cases at St. Cadoc's Hospital, Dr. Johnston has continued to visit the Mount School for Maladjusted Boys at Chepstow, once a month, where his specialised advice has been much appreciated by the Headmaster. His advice is also available at all times to the Headmaster Crick Remand Home.

No. of Cases on Waiting List at 1-1-58		M	47011	or Labry	a Charle	23
Continuing Cases from 1957				. s. ge	oH	46
New Cases referred, 1958	beld. voin	ve5e	O v	500.VI	Va	84
dministration						
tional Psychologist, Monmouthablee County						153
No. of Cases attending Clinic, 1958	mW. Island	o observi	dage!	ment to	nia vi	106
No. of Cases offered appointment, not kept,						
(a) No parental co-operation						
(b) Problem resolved						14
(c) Gone away						
lo. of Cases on Waiting List at 31-12-58	. 82 1-1	11.4 mi		17 85 m		19
3			antine E			100
				v Cases		153
Cases closed during 1958:—						
(1) Problem resolved						27
(2) Recommended/admitted to Special						18
(3) Improved		1172-11				2
(4) Transferred to Local Authority Sect			P		10000	0
(5) No parental co-operation			oggo b	energe en		10000
		datodo	oo Into	o pare	1 (1)	4
(6) Gone away			resolve	moldor	1	2
						53
Windows Indian service to an a transition of						-
No. of Cases attending for Psychotherapy				***		19
No of Cases carried forward to 1959						53

Sources of Referral.

	School Medical Officer Family Doctors	s, Infant	Welfa	re Clincs.		da eith i	d itow	alditale	
	Hospital Consultants			380.1.301	1	-:-	Addi.ol	10	
	chinging St. Cadoc's l-								1-
D	Educational.								
D . 1	Sancational.								
	Educational Psycholog	ists		man.				11	
	Head Teachers			angi-ton			100.20		
	Education Welfare Off	cers		old . told					
									1
C. (Other Agencies.								-
	Probation Officers					10		moSt.	
	Children's Officers	or accion		O beer st	abanaT	temate	le 100 19	m .mea	
	Parents	and the				Constitution of			

	Youth Employment Of	ncer							
	Other								
								d, haserill	-

Staff: Dr. David Thomas, B.Sc., M.B., M.R.C.P., D.P.M., Consultant Psychiatrist, Maindiff Court Hospital.

Dr. Mary Cochrane-Dyet, Senior Medical Officer, Mental Health, Mon. County Council, who is responsible for day to day administration.

Miss Edwardson, M.A. (Hons.) Educational Psychologist, Monmouthshire County Council, Educational Department.

Mr. Noel James, Psychiatric Social Worker, Mon. County Council, Education Department.

Clinics were held each Welnesday morning at the Market Street Clinic until September, when permanent accommodation became available at The Grove, Tredegar, Here it was possible to equip a play therapy room for the lay psychotherapist, Miss Dundas, so that the long journey from the top of the valleys to Newport has become no longer necessary—a great benefit to children and their parents.

No. of Cases on Waiting List at 1-1-58			 		 10
No. of Cases continuing from 1957			 		 56
No. of New Cases referred, 1958			 		 89
					155
					155
101-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	C this				
No. of Cases which attended Clinic, 195	8		 	•••	 109
No. of Cases offered oppointment, not k	ept:-	dinouth			
(a) No parental co-operation			 		 12
(b) Problem resolved			 		 12
No. of Cases on Waiting List 31-12-58			 		 22
					-
					155
22					100
No. of Cases attending for Psychotherap	у		 		 56

Cases	Closed	during	1958:-
Cases	CIUSCU	duiting	1//0.

Source

	oo orooca daring 17501				
	(1) Problem resolved				24
	(2) Recommended/admitted to special schools				13
	(3) Improved				4
	(4) Transferred to Local Authority under Section	57(3)			5
	(5) Lack of parental co-operation		0.00		6
	(6) Gone away	E mebr	00m2 V		2
	Males Parades Mar			11 -5	008.5
					54
				magn .	
es of	Referral.				
A.	Medical.				
	School Medical Officers, Infant Welfare Clinics				37
	Family Doctors	dili on	TOURS A	roid or	19
	Hospital Consultants	Indi be	Lairri sai	DIE	15
		in add	.unoif	wini s	wil b
					71
				B.EE .	
B.	Educational.				
	Educational Psychologists				4
	Head Teachers	delle.	1000		4
	Trong Touchers			1997	2701
					8
					1720
C.	Other Agencies.				
	Probation Officers	and 9	riges los	40.5	7
	Children's Officers	1030, 200		100	2
	Parent	un eines	100	dour vo	I
	and the state of the second state of the secon	20029/1	1111	ORI TO	2115
					10

It is significant to note the high proportion of cases which are referred through family doctors and how few come from the Education Department. It would appear therefore, that the main causes of maladjustment in children are to be found in the home and that symptoms are seldom exhibited in school.

EPILEPSY.

Records are kept of all known cases of epilepsy and admission to special schools is arranged where necessary. Information reaches the School Health Department in a number of ways, i.e., via School Medical Officers, Health Visitors, etc., and, also by means of reports from Paediatricians and the Child Guidance Clinic. Arrangements are made for the cases to be followed up by Health Visitors with regard to their general welfare and also to ensure that any medication prescribed is being taken.

CONVALESENCE.

There were no children in Convalescent Homes during the year.

POLIOMYELITIS VACCINATION.

Further to my last year's Report, during the early part of 1958, supplies of Poliomyelitis Vaccine began to be increased by the distribution of imported material which had been tested for potency and safety in this country as well as in the country of origin. In the course of a few months, however, these stocks began to be supplemented by imported vaccine which had not been tested in this country but had been tested in the country of manufacture. In May and June the flow reached its peak, and in spite of a large increase in the number of injections given, on June 30th, 1959, there was a total stock of nearly 45,000 doses, in our refrigerators.

I mentioned in my previous report that considerable economy of time and effort would be effected by carrying out poliomyelitis vaccination of the newly eligible groups of secondary school pupils at their schools. 47 Secondary Schools were visited for this purpose and the vaccinations carried out on the spot.

Welsh Board of Health Circular 20/58 (Wales) dated 2nd September, 1958, intimated that the offer of vaccination against paralytic poliomyelitis should be extended to persons born in the years 1933-1942. A number of persons in this new group would be still at school, and arrangements were made for applicants to be vaccinated at clinics. They were also given the opportunity of being dealt with by their family doctors if they so wished. Display advertisements in the Press brought the offer of vaccination to the new group to the notice of the public.

The Circular also instructed that third injections should now be given to children who had already received two injections. The third was to be offered not less than 7 months after the second, and priority was to be given to persons awaiting first or second injections.

During 1958, 33,826 children completed their course of two injections, making a total of 45,140 since the commencement of the scheme in May, 1956. On January 1st, 1958, there were 25,795 children of school age awaiting their first injection, but by 31st December, 1958, this figure was 2,050. At the commencement of the year 1,352 children had received their first injections only and at the end of the year there were 2,460.

By 31st December, 1958, 11,080 children had received their third injections, all of these being dealt with in the last four months of the year.

PREVENTION OF TUBERCULOSIS.

For a number of years it has been the practice of the School Health Department to arrange for X-ray examination of school entrants and leavers by means of a tour of the County by a Mobile Mass Radiography Unit of the Welsh Regional Hospital Board. In 1958, however, there was heavy pressure upon the staff of the School Health Department owing to the operation of the Poliomyelitis Vaccination scheme, and this, coupled with certain other considerations made it desirable that the mass radiography of school entrants and leavers should be suspended for the year.

However, the B.C.G. Vaccination Scheme was continued and the "tour" commenced in the Autumn of 1957 was completed early in 1958. In early 1958, 628 children were tuberculin skin tested and 518 yielded negative results. Of these 517 were vaccinated with B.C.G. vaccine. During the same months tuberculin skin tests were carried out on 1,929 children who had previously been vaccinated, and 1,835 gave positive results, showing that the vaccination had been successful. In the cases of the 94 children yielding negative skin test, these were listed for further testing later, and re-vaccination if necessary.

In the Autumn of 1958 registration cards were distributed to the schools in order to obtain parental consent for the new eligible children, but the actual testing and vaccination spread into 1959.

MEDICAL EXAMINATION OF ENTRANTS TO COURSES OF TRAINING FOR TEACHING, AND TO THE TEACHING PROFESSION.

In accordance with the directions given in the Ministry of Education Circular No. 249, medical examinations of candidates for admission to Teachers' Training Colleges were carried out and com-

pleted forms 4 R.T.C. were forwarded to the respective Principals. In addition, medical examinations, including X-ray of chest by chest physicans were carried out and reported on Form 28 R.Q. The following tables set out the number of examinations and results:—

(On Form 4 R.	T.C.
Medical Category.	Males.	Females
A.1	68	64
A.2	12	27
B.1	ded, etc.	1
B.2	il a howoda li	dalida landa dizad l an cab
C.	-	_
Total	81	92

	On Form 28	R.Q.
Medical Category.	Males.	Females.
A.1	7	3
A.2	5	5
B.1.	ed animods but	instanted by
B.2.	des from istem	varied enqui
Total	12	8

155 medical examinations were carried out, 61 males and 94 females, on teachers where Form 28 RQ was not required. All were found to be physically fit except one female.

EMPLOYMENT OF CHILDREN.

Under the Byelaws made on the 5th of April, 1949, by the Monmouthshire County Council in respect of employment of children and street trading, 247 children were medically examined by School Medical Officers during the year. The examination was required in order to ensure that such employment would not be prejudicial to a child's health or physical development and would not render him/her unfit to obtain proper benefit from education at school. 694 examinations were carried out in 1957.

ACCIDENTS TO SCHOLARS AT SCHOOL.

Cases in which pupils had sustained accidents within the precincts of the Committee's Schools were notified by Head Teachers to the Director of Education, and a copy forwarded to my Department. In order to safeguard the interests of the Education Committee each child was visited by a School Nurse as soon as possible after the notification in order to see that proper medical attention had been obtained.

473 such visits were made during the year.

MISCELLANEOUS MEDICAL EXAMINATIONS

During 1958, 395 medical examinations were carried out by School Medical Officers, and these included applicants for posts as school canteen workers, etc. There were also a certain number of exam-

inations carried out at the request of the Youth Employment Officer in cases where school leavers had missed the routine School Medical Inspection owing to absence. The figure of 395 compares with 907 for 1957.

175 children awaiting admission to Nursery Schools were visited by Health Visitors/School Nurses prior to actual admission.

NATIONAL EISTEDDFOD OF WALES, 1958.

During the week commencing 4th August, 1958, the National Eisteddfod of Wales was held at Ebbw Vale, and at this the Monmouthshire County Council presented an impressive Health Exhibition as part of its Scheme for Health Education. Included in the Exhibition were sections devoted to the School Health Services, and on show were many items of interest such as a Mobile Dental Clinic, arranged for viewing and with other visual material, with dental staff in attendance; a mock sound-proof room equipped as for a clinic for detection of deafness in children; a model demonstrating psychotherapy in a Child Guidance Clinic; charts showing uses of Physiotherapy for spastics; and also an illustrated board showing the various branches of the services provided, etc.

The Exhibition evoked much interest and the attendant members of the Staff dealt with many and varied enquiries from interested parents. Numbers of school children showed a lively interest in the Exhibition, particularly in the "peep-shows" dealing with dental health.

MEDICAL INSPECTION AND TREATMENT.

Monmouthshire (excluding the Divisional Executive Area).

Part I.—Medical Inspection of Pupils attending Maintained and Assisted Primary and Secondary School (excluding Nursery and Special Schools).

Table A.-Periodical Medical Inspections.

(4)		Phys	ical Condition of	Pupils In	rspected.	
Age Groups Inspected	No. of Pupils Inspected.	SATIS	FACTORY.	Unsatisfactory.		
(By year of birth)	345	No.	% of Col. 2.	No.	% of Col 2	
(1)	(2)	(3)	(4)	(5)	(6)	
1954 and later	459	456	99-3	3	0.7	
1953	2,186	2,158	98.7	28	1:3	
1952	2,500	2,474	99-0	26	1-0	
1951	548	542	99-0	6	1-0	
1950	143	143	100-0	_	0.0	
1949	88	85	96.6	3	3.4	
1948	479	476	99-4	3	0-6	
1947	1,381	1,380	100-0	1	0.0	
1946	738	737	100-0	1	0.0	
1945	103	103	100-0	-	0.0	
1944	839	834	99-4	5	0-6	
1943 and earlier	2,359	2,353	99-7	6	0-3	
Total	11,823	11,741	99-3	82	0-7	

Table B.—Pupils found to require treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

Monmouthshire (excluding the Divisional Executive Area).

Age Groups Inspected (By year of birth) (1)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1954 and later	-1010/18/1	8	5
1953	12	345	325
1952	30	447	423
1951	8 6	91	92
1950	. 5	18	20
1949	2	11	12
1948	28	36	53
1947	73	94	146
1946	38	58	87
00 1945	0-00h	15	150801
1944	68	72	140
1943 and earlier	210	176	366
Total	473	1,371 00	1,684

8	473	1,37	11 053	1,68	349101
	Table C.—C	Other Inspec	tions.		1947
	thshire (excluding of Special Inspect	666	al Executiv	e Area).	
	of Re-inspections		801	3,146	1945
2	Table D.—Infesta	NER-			1944

	Monmouthshire (excluding the Lbbw Vale Area of the Divisional Executive).	
(a)	Total number of individual examinations of pupils in schools by school nurses or other	
	authorised persons	65,538
(b)	Total number of individual pupils found to be infested	2,125
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section	
	54(2), Educaton Act, 1944)	
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section	
	54(3) Education Act, 1944	-

Part II.—Defects Found by Medical Inspection during the Year.

Monmouthshire (excluding the Divisional Executive Area).

Defect	Danasi Jabane	-		PE	RIODIC	INSPEC	CTIONS		10
Code No.	Defect or Disease	Ent	rants	Lea	wers	Ot	hers	T	otal
(1)	(2)	(T) (3)	(O) (4)	(T) ;(5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(0)
014.	Skin	17	60	4	54	4	36	25	15
5.	Eyes— (a) Vision (b) Squint (c) Other	50 43 2	119 87 21	270 6 3	220 9 10	153 14 4	156 31 14	473 63 9	49 12 4
6.	Ears— (a) Hearing (b) Otitis Media (c) Other	26 36 8	38 54 28	8 1	18 13 4	12 13 2	22 13 7	46 50 11	7 8 3
7.	Nose and Throat	161	654	71	176	50	138	282	96
8.	Speech	49	59	2	19	9	20	60	9
9.	Lymphatic Glands	23	231	1	12	6	47	30	29
10.	Heart	8	53	3	57	5	54	16	16
11.	Lungs	30	166	15	63	42	45	87	27
12.	Developmental— (a) Hernia (b) Other	2 6	7 29		9 41	2 3	7 13	4	2 8
13.	Orthopaedic— (a) Posture (b) Feet (c) Other	12 390 50	41 134 97	92 40 17	127 70 52	19 26 14	42 74 40	123 456 81	210 270 180
14.	Nervous System— (a) Epilepsy (b) Other	5 4	9 38	3	6	2 2	8 13	10 6	2:
15.	Psychological— (a) Development (b) Stability	10	24 19	4	10	4	16	18	56
16.	Abdomen	5	28		3	-1	3	5	3
17.	Other	9	12	3	3	-1	1	12	16

T-Pupils found to require treatment.

O-Pupils found to require observation.

Table B.—Special Inspections.

Monmouthshire (excluding the Divisional Executive Area).

Defect				SPECIAL IN	NSPECTIONS
No.	Defect or Disc (2)	ease	shout	Requiring Treatment (3)	Requiring Observatio
4.	Skin	. 1 (7	(0.1.)	3	3
5.	(b) Squint		00	41 5 —	30 10 1
6.	(b) Otitis Media .			12 7 2	9 2 1
7.	Nose and Throat .			21	23
8.	Speech			25	28
9.	Lymphatic Glands .			5	7
10.	Heart			2	5
11.	Lungs			5	18
12.	(L) Och		81. j		14-5
13.	(b) Feet		ě	8 8 6	13 14 6
14.	Nervous System— (a) Epilepsy (b) Other		10	2 4	6 4
15.	(h) Stability		84	19	14
16.	Abdomen			Davelops est	1
17.	Other			1	3

Part III.—Treatment of Pupils Attending Maintained and Assisted Primary and Secondary Schools (Including Nursery and Special Schools).

Table A.—Eye Diseases, Defective Vision and Squint.

Items marked † include the Divisional Executive Area.

(a) Consider the state of the s		Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint Errors of refraction (including squint)		129 †2,982
	Total	3,111
Number of pupils for whom spectacles were prescribed		2,5%

Table B.—Diseases and Defects of Ear, Nose and Throat.

						0 39	Number of cases known to have been dealt with.
Received operative treatmet (a) for diseases of the (b) for adenoids and (c) for other nose and	chronic tonsilli throat conditi	ions					 685 168 591
Received other forms of tre	atment				То	tal	1,444
Total number of pupils in so with hearing aids:— *(a) In 1958 (b) in previous years			to ha	ve bed	en prov	ided 	†41 †24

^{*}A pupil recorded under (a) above should not be recorded at (b) in respect of the supply of a hearing aid in a previous year.

Table C.-Orthopaedic and Postural Defects.

\$114	bove (specify):-	Number of cases known to have been treated.
(a) Pupils treated at clinics or out-patients departments (b) Pupils treated at school for postural defects	The little water	†1,161
888 (b)—(a) latoT	Total	1,151

Table D.—Diseases of the Skin. (excluding uncleanliness, for which see Table D of Part I).

		,
	e Diseases, Defective Vision and Sq. † juclude the Divisional Executive Av	Number of cases brown to
Number of cases known to		
Ringworm— (i) Scalp		3
(ii) Body	Iniuga lens noituatlans	
Scabies		1
Impetigo Other skin diseases	1 T	
Other own discusses	1805 2 10 10 10	
2,596	were prescribed	Total se mode to aliga to todate!
	Table E.—Child Guidance Treat	tment.
d Throat.	decases and Defects of Ear, Nose and	Number of cases known to have been treated.
Pupils treated at Child Guida	ance Clinics	†119
168 168 591	Table F.—Speech Therapy.	Number of cases known to have been treated.
Pupils treated by Speech The	erapists	†370
†41 +24 +24	Table G.—Other Treatment (Given, susy spointed of the Given, G
		Number of cases known to have been dealt with.
(a) Pupils with minor ailment		-
(b) Pupils who received co Service arrangements	nvalescent treatment under School	
(c) Pupils who received B.C.C		±517
(d) Other than (a), (b) and (c)	above (specify):-	
General Surgical Orthoptic		+242
Rheumatism and Car	diology	41,7 37 811913 14
	Total (a)	—(d) 888

PART IV.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(Monmouthshire including the Abertillery, Nantyglo and Blaina Area of the Divisional Executive.)

	(a) Periodic age groups			 1		leas of		37,612
	(b) Specials			 		a llq	abezi	322
					T	otal (1)		37,934
						allique		0 -
)	Number found to require treatment		·	 				28,564
)	Number offered treatment			 				24,096
)	Number actually treated		***	 			innemi.t	18,017
A	attendances made by pupils for treatment	nt incl	uding					
	those recorded at 11 (b)			 				19,295
)	Half-days devoted to: Inspection		14	 9.0		101		277
	Treatment					-		2,395
	Treatment			 				
	1991				ſ	otal (6)		2,672
								-
)	Fillings: Permanent Teeth			 		1447	500	9,755
	Temporary Teeth			 				
	temperary recar			 		337		
					Т	otal (7)		9,755
						(,)		
	1940							
	Number of teeth filled: Permanent			 				9,054
	Temporary T	eeth		 1000				00
					Т	otal (8)		9,054
						0141 (0)		-,,03
)	Extractions: Permanent Teeth			 	-			4,932
	Temporary Teeth			 				13,314
					Т	otal (9)		18,246
)	Administration of general anaesthetics	for ex	xtraction	 				10,275

(11) Orthodontics:

(011110401111001										
	(a) Cases commence	d durin	g the	year							286
	(b) Cases carried for	ward f	rom pi	revious	year	ALC: A	SOUT	QMA	MOU	THREE	94
	(c) Cases completed	during	the ye	ear							80
	(d) Cases discontinue	d duri	ng the	year	ongum	ava .u				The same	21
	(e) Pupils treated w				to C. A.Y	anodis	A sil	vd be	longer!	angue to	197
	(f) Removable applia								701	a sibons	129
	(g) Fixed appliances									Specials	62
	(h) Total attendance										2,965
	37.934 (1) late										
(12)	Number of pupils supplie	d with	artific	ial der	ntures						161
3000											
(13)	Other operations:										
	CHU, PS										radumin
	Permanent teeth	***		***				•••	better	d *** section	4
	Temporary teeth									d ain a	endance
											-
								T	otal (18	3)	4

(8) Extractions: Permanent Testh 4,932

Abertillery and Nantyglo and Blaina Areas of the Divisional Executive.

Part I.—Medical Inspection of Pupils attending Maintained and Assisted Primary and Secondary Schools (Including Nursery and Special Schools).

Table A.—Periodic Medical Inspections.

As- Courts	(8)	Physical Condition of Pupils Inspected.							
Age Groups Inspected	No. of Pupils	SATIS	FACTORY.	Unsatisfactory.					
(By year of birth)	Inspected.	No.	% of Col. 2.	No.	% of Col. 2				
(1)	(2)	(3)	(4)	(5)	(6)				
1954 and later	30	28	93-3	2	6.6				
1953	140	136	97-11	4	2.8				
1952	124	114	91.9	10	80				
1951	22	16	22.7	6	27-2				
1950	1	1	100-0	_	_				
1949		_	0:-	_	_				
1948	7 - 10	_	H	_	-				
1947	50	37	740	13	26-0				
1946	24	18	75-0	6	25.0				
1945		- date		_	_				
1944	103	96	93-2	7	6.7				
1943 and earlier	227	224	98.6	3	1.3				
Total	721	670	92.9	51	7-1				

Table B.—Pupils found to require Treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected (By year of birth) (11)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1954 and later	-sorpenie	9	9
1953	2	56	50
1952	6-	51	48
1951	E-	85 H 68	11
1950	- 11	_	
1949	8-75	OCT _ G-1	_650
1948	6.7	- 81	-2/01
1947	4	7	9
1946	4	4	6
1945	0.00		-600
1944	4	2	6
1943 and earlier	30	26	51
Total	44	166	190

Table C .- Other Inspections.

Number of Special Inspecti	ons	 	 257
Number of Re-inspections		 	 109
	Total	 	 366

Table D.-Infestation with Vermin.

Figures included in Table D on Page 24.

Part II.—Defects found by Medical Inspection during the year.

Table A.—Periodic Inspections.

Defect	all makes proj		Periodic	INSPECTIONS	
Code No.	Defect or Disease	Entrants	Leavers	Others	Total
(1)	(2)	(T) (O) (3) (4)	(T) (O) (5) (6)	(T) (O) (7) (8)	(T) (O) (9) (10)
4.	Skin	22 2	- 1	11 -	23 3
5.	Eyes— (a) Vision (b) Squint (c) Other	2 - 1 1 4 1	34 6 1 —	8 -	44 6 2 1 7 1
6.	Ears— (a) Hearing (b) Otitis Media (c) Other	5 4 1 9 -	1 -		6 5 1
7.	Nose and Throat	34 55	9 4	2 7	45 66
8.	Speech	10 2	1 -	-1-	11 2
9.	Lymphatic Glands	-1-	-1-	-1-	-1-4
10.	Heart	1 2	1: 1	- 1	2 4
11.	Lungs	16 10		-1-	16 10
12.	Developmental— (a) Hernia (b) Other	_ 19	= =	= =	_ <u>-</u> <u>19</u>
13.	Orthopaedic— (a) Posture (b) Feet (c) Other	- - 6 10 11	$\begin{array}{c c} 6 & 2 \\ 1 & - \\ 5 & 1 \end{array}$	$\begin{array}{c c} - & - \\ \hline 5 & 1 \end{array}$	6 2 35 8 15 3
14.	Nervous System— (a) Epilepsy (b) Other	<u>-</u> 5 <u>-</u> 2		= 7	
15.	Psychological— (a) Development (b) Stability	- =	= =	= =	- =
16.	Abdomen	-1-	-1-	-1-	
17.	Other	-1-	-1-	-1-	-1-

T-Pupils found to require treatment.

O-Pupils found to require observation.

Table B.—Special Inspections.

Defect	Dest	D:		SPECIAL I	NSPECTIONS
Code No. (1)	Defect	or Disease (2)		Requiring Treatment (3)	Requiring Observation (4)
4.	Skin		2770	42	29
5.	(101	0	2	- 9 24	- 3
6.	Ears— (a) Hearing (b) Otitis Med (c) Other	dia		- 3	5 32
7.	Nose and Throat			32	15
8.	Speech			1	
9.	Lymphatic Glands	·			
10.	Heart			_	6
11.	Lungs				1
12.	Developmental— (a) Hernia (b) Other		\$	1 2	_
13.	(b) Feet .		<u> </u>	3 26 3	9 16
14.	Nervous System— (a) Epilepsy (^L) Other				116
15.	Psychological— (a) Developm (b) Stability	ent			2
16.	Abdomen			-	_
17.	Other			The Manager West	

Part III.—Treatment of Pupils attending Maintained and Assisted 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 Errors of refraction (including squint)		525
	Total	525
Number of pupils for whom spectacles were prescribed		294
Table B.—Diseases and Defects of Ear	, Nose and	Throat,
Allow Mode, mod about		Number of cases known to have been dealt with.
Received operative treatment:— (a) for diseases of the ear		
(b) for adenoids and chronic tonsillitis		83
(c) for other nose and throat conditions		6
eceived other forms of treatment		3
	T . 1	93
	Total	95
otal number of pupils in schools who are known to have be	en provided	
with hearing aids:— (a) In 1958		Included in figures recorded
(a) in 1996		on Page 27.
Table C.—Orthopaedic and Po	stural Defe	ts.
		Number of cases known to have been treated.
a) Pupils treated at clinics or out-patients departments b) Pupils treated at school for postural defects		Included in figures recorded on Page 27.
Table D.—Diseases of the	Skin	
		of Part 1)
Table D.—Diseases of the		
Table D.—Diseases of the (excluding uncleanliness, for which s		Number of cases known to
Table D.—Diseases of the (excluding uncleanliness, for which s	ee Table D	Number of cases known to
Table D.—Diseases of the (excluding uncleanliness, for which seemed and the control of the contr	ee Table D	Number of cases known to have been treated.
Table D.—Diseases of the (excluding uncleanliness, for which seeming the control of the control	ee Table D	Number of cases known to have been treated.
Table D.—Diseases of the (excluding uncleanliness, for which s	ee Table D	Number of cases known to have been treated.

Table E.-Child Guidance Treatment.

			Number of cases known to have been treated
Pupils treated at Child Guidance Clinics			Included in figures recorded on Page 28.
Table F.—Speech	The	rapy.	
		Ta Ta	Number of cases known to have been treated.
Pupils treated by Speech Therapists			Included in figures recorded on Page 28.
Table G.—Other Treat	ment	Given.	
of wheel are to something a second to			Number of cases known to have been dealt with.
(a) Pupils with minor ailments (b) Pupils who received convalescent treatment under	Scho	ol Healtl	711
Service arrangements (c) Pupils who received B.C.G. vaccination (d) Other than (a), (b) and (c) above (specify)			. Included in figures recorded
	Total	(a)—(d)	711

PART IV.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

These details are included in the figures given in the Table on Page 29.

Ebbw Vale Area of the Divisional Executive.

Part I.—Medical Inspection of Pupils attending Maintained and Assisted Primary and Secondary Schools (Including Nursery and Special Schools).

Table A.-Periodic Medical Inspections.

		Phys	sical Condition o	Pupils In	spected.	
Age Groups Inspected	No. of Pupils	SATIS	FACTORY.	Unsatisfactory.		
(By year of birth)	Inspected.	No.	% of Col. 2.	No.	% of Col.	
(f)	(2)	(3)	(4)	(5)	(6)	
(1) 1954 and later	187	187	100.0	_	-	
1953	146	144	98.6	2	1+4	
1952	1116	111	100-0		-	
1951	8	8	100-0	_	-	
1950		_		_	_	
1949	1	1	100-0	_	_	
1948	48	46	95.8	2	4-2	
1947	105	95	90-5	10	9-5	
1946	56	56	100-0	-	_	
1945	_	-	_	_	_	
1944	234	228	97-4	6	2.6	
1943 and earlier	410	402	98·1	8	1.9	
Total	1,306	1,278	97.9	28	2·1	

Table B.—Pupils found to require Treatment at Periodic Medical Inspections. (excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected (By year of birth) (1)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1954 and later	_	8	8
1953	1	11	12
1952	1	9	10
1951		1	1(1)
1950			_
1949	1	_	1
1948	7	16	20
1947	16	20	32
1946	14	7	16
1945			
1944	38	73	90
1943 and earlier	56	109	154
Total	131	254	344

Table C.—Other Inspections.

Number of Special Inspection	ons	 	 938
Number of Re-inspections		 	 258
	Total	 	 1,196

Table D.-Infestation with Vermin.

(a) Total number of individual examinations of pupils in schools by school nurses or ot	her	
authorised persons		10,104
(b) Total number of individual pupils found to be infested	. 19.0.	138
(c) Number of individal pupils in respect of whom cleansing notices were issued (Sect	ion	
54(2) Education Act, 1944)		-
(d) Number of individual pupils in respect of whom cleansing orders were issued (Sec	tion	
54(2) Education Act, 1944)		-

Part II—Defects found by Medical Inspection during the year.

Table A.—Periodic Inspections.

Defect	mopall language for		Periodic Inspections						
Code No.	Defect or Disease	Enti	rants	Lea	vers	Otl	hers	То	tal
(1)	(2)	(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4.	Skin	2	4	5	2	1	6	8	12
5.	Eyes— (a) Vision (b) Squint (c) Other	2 1 1	3 _	94 3 —	46 1 2	35 1 —	9 6 7	131	58
6.	Ears— (a) Hearing (b) Otitis Media (c) Other		1 2 -	3 3 —	4 3 5	1 2 1	- 5 1	4 5 1	10
7.	Nose and Throat	4	24	23	61	12	43	39	128
8.	Speech	1	5	3	3		9	4	17
9.	Lymphatic Glands		_	- 1	2	1	3	1	
10.	Heart				7		1	- 1	8
11.	Lungs	2	7	3	1.7	3	14	8	38
12.	Developmental— (a) Hernia (b) Other		1 3	<u>-</u>	13	-3	1 9	<u></u> 5	25
13.	Orthopaedic— (a) Posture (b) Feet (c) Other	-		28 6 5	23 4 10	7 3 6	14 1 12	35 9 12	37
14.	Nervous System— (a) Epilepsy (b) Other	-	4		1 6		2 2		
15.	Psychological— (a) Development (b) Stability		=	-	1	=	3 2	_	4
16.	Abdomen		2	1	-		2		4
17.	Other	6	9	127	5	21	9	154	23

T-Pupils found to require treatment.

O-Pupils found to require observation.

Table B.—Special Inspections.

Defect	D.t. t T			SPECIAL II	L INSPECTIONS		
Code No. (1)	Defect or I	Disease		1	Requiring Treatment (3)	Requiring Observation (4)	
4.	Skin	•••			20	10	
5.	Eyes—	101		(0)			
	(a) Vision				31	3 2 2	
91	(b) Squint			•••	12	2	
	(c) Other			•••	7		
6.	Ears—					2	
Y	(a) Hearing				5	3	
2	(b) Otitis Media (c) Other				8	(3)	
				***	-		
7.	Nose and Throat	1			17	10	
8.	Speech				13	6	
9.	Lymphatic Glands				- word F be	L Need	
10.	Heart				_	1	
11.	Lungs				7	9	
12.	Developmental—						
0	(a) Hernia					-	
	(b) Other	•••					
13.	Orthopaedic—				- Internet		
6	(a) Posture			***	2	4	
25	(b) Feet				8		
	(c) Other				25	6	
14.	Nervous System-					To be a second	
-	(a) Epilepsy	***			2	-	
25	(b) Other					2	
15.	Psychological—				-manyt e	and a second	
	(a) Development		•••		- vagalig	2 2	
Ö.	(b) Stability	***			200		
16.	Abdonien				- 11,000	1	
17.	Other				15	4	

Part III.—Treatment of Pupils attending Maintained and Assisted Primary and Secondary Schools (Including Nursery and Special Schools).

Table A.—Eye Diseases, Defective Vision and Squint).

Squitty.
Number of cases known to have been dealt with.
479
479
276
Throat.
Number of cases known to have been dealt with.
2 64 4
70
d
Included in figures recorded on Page 27.
ects.
Number of cases known to have been treated.
145

Table D.—Diseases of the Skin (excluding uncleanliness, for which see Table D of Part I).

	exciuu							
								Number of cases known to have been treated.
Ringworm-(i) Scalp								
(ii) Body								
Scabies					,			2
Impetigo Other skin diseases					• • • • • • • • • • • • • • • • • • • •			1
Other skin diseases	***	Tido			•••			
- dts 216 - 0 - 1							Total	3
	Janya	Table	E.—	Child	Guidar	ice Tre	eatment.	Table BD
of percent areas by the	movie							Number of cases known to have been treated.
Pupils treated at Child	Guidan	ce Clin	iics					Included in figures recorded on Page 28.
7 To 100 May 1		Intoll	Table	F.—:	Speech	Thera	ару.	
believe seconded	65ht	oyeden	bq nor	od sys	d by so	wani s	in Day el	Number of cases known to have been treated.
Pupils treated by Speech	Thera	pists	in rules	 9 box		node(Included in figures recorded on Page 28.
of national research and	mighted	Ta	ble C	i.—Ot	her Tr	eatme	nt Given.	
	lments	,	nt tre	atmen	t under	Scho	ool Health	24
(a) Pupils with minor ai(b) Pupils who receive		alesce	***					
(a) Pupils with minor ai (b) Pupils who received Service arrange (c) Pupils who received	d conv							Included in figures recorded
(b) Pupils who receive Service arrange	d convents B.C.G.	vaccin	ation					Included in figures recorded on Page 28.

PART IV.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

	(a) Periodic age groups								2,619
	(b) Specials	•••		,					44.
						Т	otal (I)		3,06
2)	Number found to require treatment	,							1,74
(Number offered treatment								1,70
)	Number actually treated								1,13
)	Attendances made by pupils for treatment those recorded at 11 (b)	ent inc	luding						1,23
									-
)	Half-days devoted to: Inspection				,			***	- 1
	Treatment			***					16
						Т	otal (6)		18
73	Pills P. D. T. sk								16
)	Fillings: Permanent Teeth Temporary Teeth			***		***			16
	Temporary Teeth					***			1
						Te	otal (7)		16
3)	Number of teeth filled: Permanent To	eeth							13
	Temporary T								-
						_	1 (0)		
						10	otal (8)	***	13
9)	Extractions: Permanent Teeth								98
	Temporary Teeth				•••				1,73
						Te	otal (9)		2,71
2)	Administration of several are eathering	C							99
U	Administration of general anaesthetics f	ior extr	action	***					
1)	Orthodontics:								
	(a) Cases commenced during the year								2
	(b) Cases carried forward from pre		ear		•••		***		1
	(c) Cases completed during the ye		•••					***	1
	(d) Cases discontinued during the	year							2
	(e) Pupils treated with appliances								2
	(f) Removable appliances fitted		***		•••				2
	(g) Fixed appliances fitted		***				***		

(12) Number of pupils	supplied with artificia	dent	ures			MOTE	INSPER	7
(13) Other operations:	Permanent teeth Temporary teeth			 				45 —
					T	otal (13	3)	45

From the foregoing it will be seen that a comprehensive scheme of medical and dental inspection and treatment is applied to school children, and thanks are due to my medical and dental staff, and general medical practitioners, consultants and hospital staffs for their valuable co-operation and help. School nurses and ancillary medical staff have also played an important part.

I am grateful to my clerical staff for their consistent support and for their efficient, tactful and cheerful fulfilment of their duties.

My sincere thanks are due to the Chairman and Members of the Education Committee for their unfailing co-operation and assistance, and also to the Director of Education and his staff for the help rendered to my Department during the year.

l am,

County Hall,

Newport, Mon. September, 1959. Your Obedient Servant.

G. ROCYN JONES,

Principal School Medical Officer.