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Contributors

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MONMOUTHSHIRE EDUCATION COMMITTEE.

REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1959.

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. 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.I (Ophthalmic). D. N. Rocyn Jones, M.A., M.D., F.R.C.S. (Orthopaedic).

D. B. Sutton, F.R.C.S., L.R.C.P. (Ear, Nose & Throat). R. Vaughan-Jones, M.B., Ch.B., D.O.M.S., F.R.C.S.

Professor A. G. Watkins, M.D., M.R.C.S., F.R.C.P. (Heart and Rheumatic).

D. F. V. Johnston, B.Sc., M.B., B.Ch. (Child Psychiatric).

David Thomas, B.Sc., M.B., M.R.C.P., D.P.M. (Child Psychiatric)

DISTRICT AND AREA MEDICAL OFFICERS OF HEALTH AND AREA SCHOOL MEDICAL OFFICERS.

Rhymney U.D.C. Tredegar U.D.C. Area No. 1 M. J. Donelan, M.B., B.Ch., D.P.H. Bedwellty U.D.C. Area No. 2 R. A. Hoey, M.R.C.S., L.R.C.P., D.P.H. **** Abercarn U.D.C. ... Mynyddislwyn U.D.C. Area No. 3 H. V. M. Jones, M.B., B.S., D.P.H. Ebbw Vale U.D.C. ... Area No. Thomas Stephens, M.C., B.Sc., M.R.C.S., L.R.C.P., D.P.H. ---Nantyglo & Blaina U.D.C. ... J. Walters Bowen, M.B., B.Ch., D.P.H. Area No. 5 Abertillery U.D.C. Magor & St. Mellons R.D.C. Bedwas & Machen U.D.C. Risca U.D.C. K. P. Giles, M.B., Ch.B., D.P.H. Area No. 6 ... *** *** Pontypool U.D.C. ... Blaenavon U.D.C. ... Cwmbran U.D.C. ... Area No. 7 F. J. Hallinan, M.B.E., M.B., B.Ch., B.A.O., D.P.H. *** 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. Monmouth U.D.C. Monmouth R.D.C. *** *** Area No. 9 E. N. Dowell, M.R.C.S., L.R.C.P., D.P.H. 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. James (nee 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). (Resigned 14-11 59). Rhiannon Morgan, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. (Commenced as S.M.O.H. 9-12-59).

Mary Wells Jenkins, B.Sc., M.B., B.Ch., D.P.H. (Resigned 29-8-59).

Esther Hughes Rees, M.B., B.Ch. (Commenced as S.M.O.H. 1-9-59).

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.
William L. P. Gould, T.D., L.M.S.S.A. (Lond.).
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.
Elfreda Alice Davies, M.B., B.Ch. Margaret May Salmon, M.B., B.Ch., D.Obst., R.C.O.G. (Commenced 1-1-59).

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.

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.

ASSISTANT SUPERINTENDENT OF HEALTH VISITORS AND SCHOOL NURSES. Miss L. Tristram (Commenced 1-7-59).

Mrs. U. E. Billinghurst, L.C.S.T. (R.M.A.). Miss K. B. Powell, L.C.S.T. (R.M.A.) (Resigned 31-8-59). Miss Patricia Powell, L.C.S.T. (R.M.A.). Miss Enid W. Iles, L.C.S.T. (R-M.A.).

ORTHOPTISTS: Miss J M. Burston, D.B.O. (Commenced 21-9-59)

Miss Margaret Ericson, D.B.O. (Resigned from M.C.C. Staff 31-5-59, but continued part-time as R.H.B. Staff).

Bowen, A. M.
Camm, E. M. (Commenced 2-11-59).
Cooper, M. S.
Davies, E. M. (Commenced 1-6-59).
Delahay, M.
Dredge, M. W.
Edwards, E. M.
Edwards, M. Fraser, E. Giles, H. (Resigned 16-5-59). Giles, M. R. Gilford, M. Golding, G. I. Harvey, R. Harvey, B.
Hockaday, S.
Holland, J.
Hopkins, F.
Jackson, J. P.

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

> TEACHER OF THE DEAF : Miss Audrey Guy.

L NURSES (Co-ordi Lewis, R. Meyrick, J. Morgan, C. Morgan, G. J. (Com-menced 9-5-59). Prosser, I. (Ceased as H.V. 30 11-59). Pulsford, M. Reade K. (Com-menced 16-2-59). Rogers, G. M. James, E. N. Jones, A. Jones, E. Jones, I. Jones, B. Jones, M. J.
Jukes, M. S. (Commenced 13-10-59).
Kavanagh, P. G.
Lewis, M.

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

REFRACTION UNIT NURSE: Mrs. G. Sillman, S.R.N.

DENTAL ATTENDANTS.

Mrs. O. Church. Mrs. R. Fiveash.

LADY HEALTH VISITORS AND SCHOOL NURSES (Co-ordinated Service). nated Service).
Rowlands, L. M.
Simms, C. D.
Smith, H. M.
Sparkes, E. S.
Stevens, S. L.
Stinchcombe, N. G.
Tristram, L. (Ceased
as H.V. 30-6-59).
Walters, M.
Walters, W. I.
(Com'd 13-10-59). Watson, M.
Webb, E. (Resigned
30-9-59).
Wibberley, N. E.
Wilcox, D. G.
Williams, F.
Williams, N.
Wixey, N. A.
Wright, O. P. (Commenced 9-3-59).

ORAL HYGIENIST : Mrs. P. Schofield.

CHILD PSYCHOTHERAPIST : Miss Marie H. Dundas, B.A. (Hons.), Psych. Dip. I.C.P.

Mrs. S. M. Morgan. Mrs. Olwen P. Brodie. Miss C. F. Bufton

Mrs. Carol Huggett, S.R.N. Mrs. M. Evans Miss Betty Wynn.

MONMOUTHSHIRE EDUCATION COMMITTEE.

REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1959.

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, 1959.

The statistical tables of details of the general scheme of medical and dental inspection and treatment have been compiled in accordance with those set out by the Ministry of Education.

The number of pupils on registers of maintained primary and secondary schools (including Nursery and special schools) in January, 1960, was 57,673.

Staff.

Of the 29 Medical Officers on the Staff on 31st December, 1959, 28 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, 1959, there were 48 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 15.4 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 year commenced with a staff of 4 Speech Therapists, but Miss K. B. Powell resigned on 31st August, 1959, and it was not possible to obtain replacement.

Miss M. Ericson our Orthoptist, resigned on 31st May, 1959, and joined the Staff of the Welsh Regional Hospital Board, which allocated part of her services to our School Clinics. Miss J. M. Burston joined our Staff as full-time Orthoptist on 21st September, 1959.

The Teacher of the Deaf continued her services throughout the year.

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 were:-

	(e Abe	excluding ertillery and bbw Vale			
	Div.	Executive)	Abertillery	Ebbw Vale	Total
Periodic Inspections		111,687	908	1,617	14,212
Re-examinations and Specials	5 nd	3,628	371	1,040	5,039

Manmouthshire

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

Monmouthshire (excluding Ebbw Vale, Total including Abertillery) Ebbw Vale 40,761 2.261 43,022

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

	(excluding Ebbw Vale,	458507.5	
	including Abertillery)	Ebbw Vale	Total
Examinations made were	76,330	9,730	86,060
Number of individual pupils found	swit A to here a diffe		
unclean	3,640	203	3,843

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 2 months.
	D. B. Sutton, F.R.C.S., M.R.C.S., L.R.C.P	
	J. T. Rice Edwards, F.R.C.S., M.R.C.S., L.R.C.P	
Orthopaedic	D. N. Rocyn Jones, M.A., M.D., F.R.C.S	One per week.*
Ophthalmic	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 98.

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.

The School Clinic at The Grove, Tredegar, was closed at the end of the year for the purpose of structural alterations, and it was anticipated that re-opening would take place in 1960.

Details of School Clinics as at the end of 1959 and their situation and types of cases treated or examined are as follows:—

ment.

	Average No. of	
Situation.	Weekly Sessions	. Nature of School Clinics held.
Central School Clinic,	2.5	Ophthalmic, treatment and consultation.
Stanley Road,	0.25	General Surgical, consultation.
Newport.	4.0	Ear, Nose and Throat, consultation and treats Audiology.
	0.2	Orthopaedic, treatment and consultation.
	0.12	Heart and Rheumatic, consultation.
	10.0	Orthoptic, treatment.
	6.0	Speech Therapy, treatment.
	10.0	Dental (including Orthodontic).
	10.0	Physiotherapy.
	1.0	Miscellaneous medical examinations.
	3.0	Defective vision, refractions.
	1.5	Child Guidance.
Ashgrove House,	9.0	Dental (including Orthodontic).
George Street,	2.0	Defective vision, refractions.
Pontypool.	2.0	Speech Therapy.
the request of Assistances	0.2	Orthopaedic.
Beaumont House,	10.0	Dental (including Orthodontic).
Bloomfield Road	2.0	Defective vision, refractions.
Blackwood		Orthopaedic.
at the different Clinics of	2.0	Speech Therapy.

Avera	ge No.	midence D. F. V. Johnson, P. Sc., to
	y Sessio	THE RESERVE OF THE PARTY OF THE
School Clinic,	7.0	Dental
59, Commercial Street,	2.0	Defective vision, refractions.
Abertillery	0.2	Orthopaedic.
	2.0	Speech Therapy.
	2.0	Minor Ailments,
School Clinic,	3.0	Dental.
Brynglas,		
Ebbw Vale.		
School Clinic,	2.0	Defective vision, refractions.
Armoury Hill,	0.2	Orthopaedic.
Ebbw Vale.	2.0	Minor Ailments.
	2.0	Speech Therapy.
School Clinic.		Closed for structural alterations.
The Grove,		and a structural alterations.
Tredegar.		
School Clinic, Church Street,	2.0	Dental.
Tredegar.	2.0	Defective vision, refractions.
		to av agessited by the Sekon Dunther
	1.5	Dental.
Boverton House,	0.2	Orthopaedic.
Chepstow.	0.5	Defective vision, refractions.
and Throat, consultation and tues		Speech Therapy.
School Clinic,	1.0	Dental.
Old Barclay's Bank Building	B,	
Rhymney.		
School Clinic,	4.0	Dental.
Health Centre,		
Blaenavon.		
School Clinic,	3.0	Dental.
Park Place,	0.25	Defective vision, refractions.
Risca.		
Workmen's Hall,		
Llanhilleth.	1.0	Minor Ailments.
Leven House,	2.0	Speech Therapy.
Abergavenny.	2.0	Mobile Clinic visits for Dental Treatment.
	0.25	Defective vision, refractions.
School Clinic,	0.25	Mobile Clinic visits for Dental Treatment.
Ty Brith,	0.25	Defective vision, refractions.
Usk.	2.0	Speech Therapy.
School Clinic.	4.0	Dental.
Ashfield Road.	1.0	Speech Therapy.
Newbridge.	0.2	Orthopaedic.
	Elite E	

The Clinic,	2.0	Speech Therapy.	
Ty Brith,			
20, Oak Street,			
Cwmbran			
The Ambulance Hall,	1.0	Speech Therapy.	
Monmouth.	2.0	Dental, by Mobile Clinic.	
	0.25	Defective Vision, refractions.	

MOBILE SCHOOL CLINIC.

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

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.

At the beginning of 1959 the Speech Therapy Staff consisted of four full-time Speech Therapists, working at 14 Centres throughout the County. The resignation of Miss K. B. Powell at the end of August reduced the staff to three, no replacement being available.

Cerebral-Palsied children suffering from speech defects were given speech therapy at a much earlier age than heretofore, but the benefits from this earlier approach may not become apparent for some while. The results so far, however, are very promising. A Speech Therapist works with the Physiotherapist in the treatment of these cases, 28 of whom were treated in 1959.

The Speech Therapists work under the direction of the Medical Officer in charge of the Ear, Nose and Throat Clinics, and introduction of Diagnostic Clinics in October, 1959, has enabled a new attitude to be taken to cases referred for Speech Therapy and to the overall problem. At these Clinics, all new cases were assessed regarding type of speech present and treatment required, examinations being also carried out by appropriate Medical Officers of the Ear, Nose and Throat Clinic with measurement of hearing, and, if necessary, the Child Guidance Clinic including ascertainment of level of intelligence. During the last quarter of 1959, eight of the Diagnostic Clinics were held and 93 new cases were investigated.

The value of the tape-recorders obtained last year, has been proved both in the treatment of difficult cases and as a means of reference. A library of tapes recording the progress and results of treatment of different types of cases is being built up at each of the main Clinics.

Regular visits were paid by a Speech Therapist to the Special Residential School for Educationally Sub-normal Pupils at Hilston Park, Monmouth, where six boys were treated. Four pupils from the Mounton House Special Residential School for Delicate Pupils were treated at the Chepstow Clinic, whilst at the request of Glamorganshire Education Committee, special arrangements were made to treat at the Monmouth Clinic six boys from their Special Residential School for Educationally Sub-normal Pupils at The Hendre, near Monmouth.

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 1959 the numbers of sessions given to Speech Therapy at the different Clinics were as follows:—

Abertillery		VI.0120	T. door	2	half-day	session	per	week	(average).
Blackwood				2	"		,,	,,,	J. B.
Pontypool				2	,,	,(o e))	2,,	20,0	**
Ebbw Vale	more and Sa			2		dev. my	.,	,,	,,
Newport			1	6	,,	,,	,,	H gon	aludinA s
Tredegar	Julio ali			100	4,5	.,,	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Monmo
Newbridge	refraction	V		- 1	25,0	,,	,,	,,	,,
Usk				2	,,	,,	,,	• • •	
Chepstow	ul			2	.,	.,,	,,	,,	,,
Monmouth				1	,,		,,	,,	
Abergavenny				2	.,	.,	**		**
Cwmbran	THE REAL REAL			2	.,	.,	.,	.,,	in the car
Neville House,	Garndiffa	ith		2	,,	**	,,	,,	ban month
Sunninghill, Tr	edegar			2	,,	**	,,	,,	IntligW bl
School Visits	lo ceso ed		· i	2	,,	7,7.6	,,	116,,00	tool anilds

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 1959, 8,318 appointments were made. 6,136 of which were kept.

331 new cases were treated during the year. 115 were discharged for non-attendance, 3 as unsuitable for treatment, 117 as cured, whilst 5 left school. There were 14 discharges for other reasons.

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

Orthoptic Treatment.

The Orthoptic Clinic was served by one full-time Orthoptist from the beginning of 1959 to 31st May, 1959, when this officer resigned. She joined the staff of the Welsh Regional Hospital Board who agreed to her attendance, as part of ner duties, for seven half-day sessions per week. On 21st September Miss J. M. Burston joined the Council's Staff as full-time Orthoptist and this comprised the staff until the end of the year.

During the early part of the year the Orthoptist paid visits to the School Clinic at The Grove, Tredegar, which had been opened on a temporary basis, pending structural alterations, but when that Clinic was taken over by the contractors, all Orthoptic activities were centred on the Stanley Road Clinic, Newport.

The Orthoptic Clinic was conducted, as formerly, under the direction of Ophthalmic Surgeons attending our Ophthalmic Clinic, and 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 3,371 appointments were sent for attendance at the Clinic, of which 718 were not kept, 339 new cases were seen and in addition 1,117 treatment periods were given to old cases. A further 518 attendances were made for occlusion and 701 for observation, whilst 47 cases were discharged from the Clinic. Of the cases discharged, 20 were cured, 18 were improved and not likely to benefit from further treatment, and 9 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. 99 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 852 children were refracted during their examination and spectacles were prescribed in 769 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 1959, 3,762 refractions were carried out at the Refraction Clinics and in 2,508 cases, spectacles were prescribed.

Colour Vision.

The scheme commenced in 1957 for the detection of colour-blindness in scholars continued during 1959. Head Teachers were asked to carry out tests by means of the Isihara Book, which had been previously demonstrated to them, upon children in their last year prior to transfer to Secondary Schools. The scheme was somewhat handicapped by the small number of Isihara books available, but a further 50 books were obtained, and this difficulty has been removed for next year.

Cases reported by Head Teachers as being suspected of suffering from colour-blindness were referred to Eye Clinics, and if confirmed, notifications were sent to parents and also Head Masters of the concerned Secondary Schools so that this defect could be taken into consideration when training was being decided upon

Defective Vision Survey.

During 1959 a new vision survey was commenced in schools by a Special School-nurse who was appointed to assist in refraction work. This nurse was trained in methods of vision testing, including the application of the Cover Test to detect squints, latent divergency, etc. All cases with visual acuities 6/9, 6/9 and worse, were referred for examination at the refraction clinics, as also were any children with better responses but suffering from headache or squint. Children referred by teachers were similarly dealt with. The children chosen for testing were those (a) who reached their sixth birthday during the school year and (b) who reached their ninth birthday during the school year.

In (a) 4,882 children were screened by the nurse, and 729 referred to refraction clinics. 521 kept the appointments offered and of these 314 needed immediate treatment with spectacles. A further 150

required to be kept under observation, and 57 were discharged as not in need of treatment. In (b) 4,803 children were screened and 350 referred to the refraction clinics. Only 122 were found to require glasses.

In both groups, cases referred to refraction clinics did not include those Children wearing glasses or already attending other treatment centres for eye defects. It is evident that this work is well worth while, and it has secured the interest and co-operation of the Primary School teachers who have noticed marked improvement in the school work of the children treated. Further, in the case of the nine-year-olds it was invaluable in that it has ensured that children in need had their vision corrected for the two years covering their approach to the grading examination.

At this stage is was thought possible that the milder forms of myopia would not necessarily be detected at 6 years, and so it was envisaged that at least for the first three years, 2 groups of children would require to be tested annually, the 6 year olds and the 9 year olds. When the first group of 6 year olds become 9 year olds and have their second screening, it is hoped to establish clearly whether the two separate screening tests are necessary, or whether the initial test is adequate.

It will be appreciated that this is only an interim report on the first 12 months' work related to the 6 year old group. A further assessment will have to be made on the third year's figures, with special reference to the then 9-year-old group. It will be interesting to note if the cases in the present? early myopia section of the Observation group (of 6 year olds) become overt myopia by that time, and also if the only untreated cases of visual defect found at the 9 year old filter come out of this present Observation group as a whole. If this proves to be the case, and it seems reasonable to anticipate it, then the initial examination may be the only school vision test needed in the future

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 1959, 75 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. 615 cases were operated upon, these including proof-puncture of antrum where required. 119 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 65 preliminary Consultation sessions at which 858 children were examined for the first time and 123 children were re-examined.

The number of names added to the Waiting List at the County Hospital during 1959 was 613, as compared with 812 in 1958. The number of names on the waiting list on 31st December, 1959, was 67. compared with 207 at the end of 1958.

At the Aberbargoed and District Hospital 67 operations were carried out for removal of tonsils and/or adenoids during the year.

A further 68 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 1959, 75 new cases were examined at the School Surgical Consultation Clinic, and there was a total of 124 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 had no Paediatric School Clinic. Most of the cases were 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 were 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. In 1957 and 1958 I referred to the downward trend in the number of new cases of suspected heart disease and this movement continued in 1959, as is shown:—

1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
164	166	57	101	60	95	57	58	37	30	21	17	9

There was a total of 108 attendances during 1959.

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 223 cases during the year.

Mr. D. Nathan Rocyn Jones examined at his Clinics, 406 new cases with a total attendance of 2,147.

47 new cases attended the Physiotherapy Clinic at Stanley Road, and there was a total of 2,058. attendances.

20 children were admitted as Orthopaedic In-patients to the County Hospital, Griffithstown, during 1959, and 39 cases attended for Physiotherapy.

Tuberculosis.

35 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.

During the whole of the year 1959, the Staff of School Dental Officers remained constant at one Principal School Dental Officer with six full-time School Dental Officers and one part-time officer who worked in the Ebbw Vale area of the Ebbw Vale, Abertillery and Nantyglo and Blaina Divisional Executive Committee. There still remained one unfilled vacancy for a School Dental Officer.

There was one Oral Hygienist on the staff.

The School Dental Service was carried on by the same general methods as of recent years. This Service was a comprehensive one, embracing all aspects of inspection and treatment, including provision of dentures, radiological investigations and orthodontic treatment. The County was very well served by up-to-date School Dental Clinics, situated in convenient parts of the area, with the addition of a Mobile Clinic for attending to the outlying schools.

Scaling and polishing and also gum treatment were undertaken by the Oral Hygienist under the supervision of the Principal School Dental Officer.

In June, 1959, a Sub-Committee of the Special Services Committee adopted a report which had been submitted by the Principal School Dental Officer recommending the provision of six High-Speed Turbine Dental Drills for use in School Dental Clinics. Approval was given for the purchase of these instruments and it was hoped to have them installed at the principal Clinics early in 1960. The advantages expected to accrue from the use of these machines were that due to the painlessness of the treatment with them, filling appointments would be more readily kept by the children, resulting in subsequent diminution in the need for extractions, and also the fact that more fillings per sitting could be carried out. A further point was that they may encourage the recruitment of young School Dentists who may have been otherwise discouraged by the prospect of not having up-to-date equipment.

The problem of the recruitment of young School Dentists has been considered and the Special Services Committee decided to authorise its Chairman and Vice-Chairman to interview any final-year Dental Students from this County with a view to offering appointment subject to the passing of the necessary qualifying final examination in dentistry. It was also decided to advertise in Training Schools for Dentistry any vacancies on our Dental Staff. So far these steps have not borne fruit but in one or two cases complications arose over National Service. It remains to be seen whether the cessation of this compulsory service will have any effect.

It was further thought that a drive should be made to increase the number of Monmouthshire school-girls entering the dental professional and the matter was referred for consideration by the Secondary Education Committee.

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 251 X-ray examinations were made during 1959.

During 1959, 43,022 pupils were dentally inspected and 31,613 were found to require fillings or extractions. Acceptances of offers of treatment were received from the parents of 27,732 and appointments for treatment were sent, but only 21,596 pupils attended for treatment.

The Oral Hygienist, working under the supervision of the Principal School Dental Officer, treated 3,554 children by scaling and polishing during the year under review and there were 3,782 attendances for this purpose. Many of the cases were treated at the same time as attendance was made for other treatment.

Courses of sodium fluoride application, for which children attended weekly for four weeks, were carried out by the Oral Hygienist and 65 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 258 School Canteens providing meals, free of charge or on payment, to School Departments.

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

Free	 			 		 2,271
On Payment	 	***		 	***	 15,751
		-	r . ı			10.022
			lotal	 		 18,022

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 1959, 136 pupils were examined for the first time under Section 34 of the Education Act, 1944, with regard to educational subnormality, and 43 children were re-examined under this Section. 121 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, 34 pupils (16 boys and 18 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 27 (20 boys and 7 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.

Course for Teachers.

During 1959-60 a special one-year course was held at the Monmouthshire Training College, Caerleon, for certificated school teachers intending to take up teaching of Handicapped Pupils at Special Day or Residential Schools or at ordinary schools with a special class. This was arranged under the auspices of the University School of Education of the University of Wales and the Senior Lecturer was Mr. Arthur Gray-Jones, and catered for sixteen students from various parts of Wales. As part of the course, facilities were given to observe the methods adopted for detection and treatment of children with special defects and those likely to be registered as Handicapped Pupils. The School Health Department, in co-operation with the Education Department, arranged for a series of visits to be made and these in all took ten days, six of which were in 1959 and four in early 1960. Visits were paid to a Nursery School, Infants' School, Junior Mixed School, a Special Residential School for Delicate Pupils, a Special Residential School for Maladjusted Boys, and a Special Residential School for Educationally Sub-normal Boys. Opportunities were given to see in operation routine sight-testing in school carried out by a special trained school-nurse, a deaf sweep, and preliminary tests by Head Teachers, for colour-blindness Demonstrations at Clinics were given covering audiology, refractions, orthoptics, ear, nose and throat investigations, ascertainment of deafness in the very young, mental ascertainment, speech therapy, physiotherapy, teaching of the deaf and examination of backward babies. Further, a visit was made to an Occupation Training Centre.

Talks were given by Medical Officers and Headmasters on the Medical, educational and administrative aspects on the overall problem of Handicapped Pupils.

Handicapped Pupils, 1959.

throughout 1959 in condition in condition in consultant Architect Officer of Succession in cases were	No. admitted to Special Schools during 1959. (a)	No. in Special Schools on jan. 1st, 1959, and for whole or part of 1959. (b)	No. not in Special Schools. (e)	Tota	al on Registe	netion ar, No	
Blind Pupils ,	d distribution	10	3	gor s a	The following is a reg		
Partially Sighted	Cayongs at risk half-yes Japus	the Obstetre	more ended to special tends	study e	qu-v10ol		
Deaf	T were 1c-er	21	3 0 10	supervi	24		
Partially Deaf	December, 19	2	ies bord in the	observation, Of the bal			
Delicate	27	24	60	delili maned with			
Epileptic	4	4	8	16			
Physically Handicapped	9	19	25	iuctive e. Doss	53		
Speech Defect	THE REPORT OF THE	maria -: 9691 ni	8	or Court	8 Adea		
54 159 75 110 654-0[8 2] 23	June 3 School	nes	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	10	70	90	89	254	513	
Maladjusted	14	22	14	24	7	81	

EARLY DIAGNOSIS AND TREATMENT OF DEAFNESS AMONG CHILDREN.

I he Audiology Clinic which was started in 1957 continued to function throughout 1959 in conjunction with the Ear, Nose and Throat Department, under the direction of Mr. D. B. Sutton, Consultant Ear, Nose and Throat Surgeon. The staff consisted of a Senior Medical Officer, Assistant Medical Officer, Special Nurse and a qualified Teacher of the Deaf.

In addition to cases referred directly to the Audiology Clinic for hearing assessment, cases were drawn from the Ear, Nose and Throat Clinic where deafness was discovered as a complicating factor.

The following is a report on the work of the Audiology Unit during 1959:-

A. Deafness in the Recently-born.

The survey of babies born in the Obstetric Groups at risk in 1958 was continued. A follow-up study of those already examined for the half-year January to June, 1958, was made. As a result, one child was found to be severely deaf, issued with a hearing aid and placed under the supervision of the Teacher of the Deaf. 7 were re-examined and their hearing found to be satisfactory. 3 were found to have a slight degree of hearing loss and kept under observation.

Of the babies born in the half-year July to December, 1958—237 were examined. 19 failed the first screening test and were kept under observation. 2 were found to be severely deaf, issued with hearing aids and placed under the supervision of the Teacher of the Deaf.

B. Deafness in the Pre-School Child.

Cases seen in the Audiology Clinic:			
	New.	Old.	Total.
Conductive Deafness	 3 8		3
Surgery for Conductive Deafness in 1959:— Adenoids removed	 2	oducatio	nosloC 2
C. Deafness in School Children.			
Cases seen in the Audiology Clinic:-			
Total children aged 5-10 years	 85	54	139
Total children aged 10-15 years	 35	75	110
Cases of nerve deafness in 5-10 Age Group	 5	18	23
Cases of nerve deafness in 10-15 Age Group	 5	27	32

All the cases mentioned above had a hearing loss of over 20 Db in one or both ears.

116

48

Survey for Conductive Deafness in School Children.

Cases of conductive deafness in 5-10 Age Group 80

Cases of conductive deafness in 10-15 Age Group 30

	1	Vew.	Old.	Total.
Proof Puncture of Antra		-1	2	3
Tonsils and Adenoids removed		9	3	12
Tonsils and Adenoids and Proof Puncture		9	3	12
Removal of Adenoids		3	-	3
Removal of Adenoids and Proof Puncture		7	1	8
Politzerisation		10	2	12
Proof Puncture and Politzerisation			- 1	1
Mastoidectomy			2	2
Syringing		3	3	6

D. Prevention of Conductive Deafness.

In addition to the surgical treatment of conductive deafness, early diagnosis and treat ment of otitis media was carried out in the Otorrhœa Clinic as an important part of the prevention of conductive deafness.

The Clinic was held weekly at the Stanley Road Clinic, Newport. Children undergoing treatment attended the Clinic monthly. When the otorrhoea had responded successfully to treatment they were seen in three months, then six months and then will be seen at annual intervals for hearing tests. Recurrences were seen immdiately they were reported. Treatment was carried out daily by the District Nurse.

E. Hearing Aids Prescribed by the Audiology Clinic in 1959.

Commercial Aids				 	 16
National Health Service	Medres	co Aid	ls	 	 10

F. Work of the Teacher of the Deaf.

The peripatetic Teacher of the Deaf has proved invaluable to the Audiology Unit.

In addition to her work with the severely deaf children in the pre-school age-group, she has assisted with the diagnostic work of the Audiology Clinic. She has also rendered valuable service as a liaison between the unit and those moderately deaf children in normal schools.

During the year, 80 children were under the supervision of the Teacher of the Deaf, and 68 of these were using hearing aids. 43 children were visited at school, and of these lil were in need of special training.

The following visits were made to Schools by the Feacher of the Deaf:-

Nursery School	 	 	3
Infant Schools	 	 	6
Junior Schools	 	 	4
Senior Schools	 	 	7

15 pre-school children were visited regularly; of these 1 was later transferred to Nursery School, 2 to Infants' Schools and 2 to Occupation Centres. 4 of the 15 were cases of cerebral palsy, and 3 were later found to be not deaf.

Under facilities for further education, 4 adult cases were also treated

Mobile Clinic.

During 1959, a report was submitted jointly to the Special Sub-Committee of the Mon-mouthshire Education Committee and the Health Committee, recommending the provision of a Mobile Clinic for use in the early detection and treatment of deafness in children. It was pointed out that such a vehicle would require to be sound-proofed and fitted with special equipment and could be used for small group teaching in rural areas. The vehicle was to be so designed as to enable it to be used, when not required otherwise, as a Mobile Maternity and Child Welfare Clinic. It was decided to proceed with the provision of this Clinic, and it was hoped that it would be in service during 1960.

CEREBRAL PALSY-" SPASTICS."

The Cerebral Palsy Scheme which was started in 1954 continues to operate throughout the County with great benefit to afflicted children and their parents. It will be noted from the Table below that there has been a gradual increase in the incidence of this condition since the scheme was inaugurated.

		TABI	EI				
			1955	1956	1957	1958	1959
A. School Age			79	89	89	94	109
B. Under School Age	12.00	111,000	32	32	34	46	54
C. Over School Age	ouDo	1 44.	24	22	41	36	43

This increased incidence, which is nation-wide, can be attributed to several factors:-

- 1. The greater awareness on the part of parents and doctors of a child's handicap.
- The Developmental Diagnostic Clinic which is now an established feature of the County Health Service and which seeks out retarded very young children for diagnosis and early treatment.
- 3. The improved Maternity and Child Welfare Services which have resulted in the saving of baby lives, albeit handicapped, which in former times did not survive birth or infancy.

It is, however, gratifying to note that of our spastic children of School age, only 24.8% have been ascertained to be ineducable in accordance with the Education Act, 1944, Section 57 (3) compared with the national figure of 40%. Moreover it is a great relief to the parents of the severely handicapped children to have available places for all who want them in Occupation Centres which the children attend daily as their more fortunate brothers and sisters attend school.

It continues to be of this County policy to retain and educate these brain-damage children in their own homes and local schools, and the Education Comittee co-operates wholeheartedly in providing special facilities which may be necessary to achieve this end. 53 are therefore attending ordinary day school, 10 have home teaching and 15 are at special residential schools, and 4 had not begun formal education being yet too immature.

We again acknowledge our appreciation of the services of the Consultant Surgeon, Mr. N. Rocyn Jones, F.R.C.S., and physiotherapist, whose services are made available to the County by the Regional Hospital Board, and who provide highly specialised service to children attending school and Occupation Centres, and children of pre-school age.

With the establishment of the Audiology Unit incorporating Speech Therapy and re-organisation of the Vision Unit, arrangements are also made for the further specialised examination of infants born at risk, so that cerebral palsy affecting the special senses can be diagnosed and treated at the earliest possible age.

The comprehensive team service for Cerebral Palsied children is probably a unique development in a Local Authority Health Service.

CHILD GUIDANCE SERVICE.

The Child Guidance Service aims to diagnose and treat all forms of maladjustment in children. The symptoms of maladjustment present in three main categories:—

- 1. Emotional—characterised by problems of behaviour, e.g., temper tantrums, personality change, uneven school performance.
- Psycho-somatic—where the child complains of aches and pains for which there is no physical basis.

3. Delinquent-which may lead to appearance in Children's Courts.

If these disabilities can be diagnosed and treated in childhood there is promise of mental stability in later life. Child Guidance is, therefore, an essential part of any preventive mental health service.

The work of the Child Guidance Service has been somewhat hampered throughout the year on account of structural alterations at the Grove, Tredegar.

The limited services of psychiatrists provided by the Welsh Regional Hospital Board, too. has resulted in an over-long waiting list and delay in providing treatment in many cases.

There has been one staff change during the year, as the Assistant Educational Psychologist left in July and not being immediately replaced, a heavy burden has been carried by Mr. Jones. Educational Psychologist.

Child Guidance Clinic, Newport-Report for 1959.

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.

Miss Edwardson, Assistant Educational Psychologist, Monmouthshire County Council. (Resigned July, 1959).

Mr. Jones, Educational Psychologist, Monmouthshire County Council.

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.

lo. of Cases on Waiting List at 1	-1-1959			 	 0		19
Continuing Cases from 1955				 	 		52
lew Cases referred, 1959				 	 		88
							159
							-
No. of Cases attending Clinic, 1	959	11.0					9.1
No. of Cases under supervision	,,,	1.		 	 		35
io. of Cases offered appointmen	nt, not l	cept,	1959 :-	 	 	•••	.55
(a) No parental co-operation				 	 		9
(b) Problem resolved			F	 	 ***		4
(c) Gone away				 	 		4
No. of Cases on Waiting List at	31-12-19	59		 	 - Selling		23

	Ca	ses closed during 1959:—										
		(1) Problem resolved										13
		(2) Recommended/adn (3) Improved									•••	10
		(4) Transferred to Loc		horisy			3)			225		4
		(5) No parental co-ope) , C III	"		***	Diese In		10
		(6) Gone away								***	1	1
		(7) For diagnosis only										22
		berto de la lance la salecta porte								подпор	4 144	6730
												67
	NI.	-1 C 1 1 1	11								Tomas .	12
		of Cases attending for Ps of Treatments given			•••							120
					***	***		***	•••		***	486
our	es of	Referral.										
	A.	Medical.										
		School Medical Officers,	Infant	Welfa	re Cl	inics						42
		Family Doctors			//					3		4
		Hospital Consultants				Jak m						19
	B.	Educational.										65
												1
		Education Psychologists Head Teachers		3/1								10
		Education Welfare Office	AYC.	· · · · · · · · · · · · · · · · · · ·								1
		Education wehate One	013	-dam					d and	200	10 6	
												15
	C.	Other Agencies.										
		Probation Officers				-						3
		Children's Officers						1 y				5
											admi	
												8
ases	carr	ied forward to 1960.										
		Continuing Cases		•••	•••			•••				52
		Waiting List		•••			***	***				23
												75
											00 10	13

Tredegar Clinic-Report for 1959.

Staff: Dr. David Thomas, B.Sc., M.B., M.R.C.P., D.P.M., Consultant Psychiatrist, Pen-y-val 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. (Resigned July, 1959).

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

Clinics were held each Wednesday 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 1-1-1959	9							22
No. of Cases continuing from 1958								60
No. of New Cases referred, 1959								106
					opini,	morno	077	
								188
N 66 1:1 1 16:: 105	0							125
No. of Cases which attended Clinic, 195	9		•••		•••			125
No. of Cases offered appointment, not l	kept:-	_						
(a) No parental co-operation								12
(b) Problem resolved					***			23
(c) Gone away			***	2000		10(0)		6
				1500	3100			
No. of Cases on Waiting List 31-12-1959	****	***	10.00	E				22
								100
								188
								1000
No. of Cases attending for Psychotherap	у		***					151
No. of Treatments given	nd				ou.9.			380
Cases Closed during 1959:—								
(I) Problem resolved						- 20	10000	37
(2) Recommended/admitted to sp	ecia!	school	9					16
(3) Improved			i sale			and it is		12
(4) Transferred to Local Authority		r Sect	ion 57			le l'ibe		5
(5) Lack of parental co-operation				(2)				5
10.0						***		3
(7) For diagnosis only, and treatme					***	- W	***	7
(7) For diagnosis only, and treatme	ent eis	ewner	C			113.10		,
								05
								85
es of Referral.								
A. Medical.								
and united the same of some same are	2022	2000						HINNE .
School Medical Officers, Infant W	elfare	Clinic		***		•••		54
Family Doctors		***	***	***	***	***		14
Hospital Consultants							,	23
								91

B. Educational.

	Education Psychologic Head Teachers	sts	 				 		4 3
								in the	7
C.	Other Agencies.								
	Probation Officers		 	***	988	,	 	V. 10	4
	Children's Officers		 	***	•••	***	 		4
								23.340	8

Enuresis.

During 1959, six alarm-bell sets were purchased for use in the treatment of nocturnal bed-wetting.

The alarm-bell set is a device consisting of a small "mat" connected by wires to a battery-operated electric bell. The "mat" is placed in the bed underneath the patient and immediately urine starts to flow the bell rings and awakens him/her. The patient then has to rise from bed in order to switch off the bell. The apparatus is safe and cannot cause electric shock.

The sets were placed in the care of the Medical Officer in charge of the Child Guidance Service, who distributed them on trial between two Area Medical Officers for use on patients in their areas, patients dealt with by the Child Guidance Service and at Hilston Park Special Residential School for Educationally sub-normal Pupils. Success has to be recorded in some cases after only a few weeks, where children had never previously been dry.

Results at the Special School were not so good, probably owing to the lower mental reaction of some of the pupils, but in some cases improvement has been recorded.

These are gratifying results in the treatment of a most vexing condiiton, and it was noted that after a cure had been effected the instrument could be withdrawn and issued to another patient.

EPILEPSY.

A register of all epileptics is kept in the Department. Their medical needs are attended to at Hospital out-patient Clinics and the paediatricians send copies of all their reports to my department. Health Visitors exercise domiciliary supervision to ensure that children take the drugs prescribed and provide a family counselling service for the parents, advising them of the attitude to be cultivated towards an epileptic child and how to maintain emotional stability in facing a situation imbued with anxiety. This service of the health visitors is of great importance in preventing parental mental overanxiety and maintaining good mental health. It is appreciated, however, that the epileptic child is prone to behaviour disorder and such children pass to the Child Guidance Clinic which works in friendly co-operation with the general practitioner, paediatricians and education department to fulfil the special needs of these handicapped children.

E.E.G. examinations are carried out at St. Cadoc's Hospital and Pen-y-val Hospital under the aegis of the consultant psychiatrists to the Child Guidance Clinics.

CONVALESCENCE.

There were no children in Convalescent Homes during the year.

POLIOMYELITIS VACCINATION.

Vaccination against paralytic poliomyelitis continued and during 1959 20,838 children completed their course of two injections, making a total of 65,978 since the commencement of the scheme in May, 1956.

On the 1st January, 1959, there were 2,050 children awaiting their first injection, but by the end of the year this figure was 350. At the commencement of the year 2,460 children had received their first injection only, and at the end of the year there were 600.

By 31st December, 1959, a total of 44,771 children had received their third injections.

B.C.G. VACCINATION.

During the year B.C.G. Vaccination was continued as previously for children. Preliminary tuberculin skin tests were carried out on 2,569 children and 2,179 yielded negative results. Of the latter cases, 1,956 were vaccinated with B.C.G. Vaccine. Post-B.C.G.-Vaccination skin tests were performed on 1,651 children and 1,341 of these gave positive results, indicating successful vaccination. 1811 children were absent at the time of testing. 129 tests gave negative results and these were listed for re-test, and re-vaccination if necessary.

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 completed 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	67	92
A.2	18	48
B.1	194	-
B.2	1945	_
C.	Le Les	
Total	85	140

033	On Form 28 R.Q.								
Medical Category.	Males.	Females.							
A.1	19	5							
A.2	14	4							
B.1.	1	-							
B.2.	- 10	_							
Total	34	9							

247 medical examinations were carried out, 96 males and 142 females, on teachers where Form 28 RQ was not required. All were found to be physically fit.

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, 238 children were medically examined by School Medical Officers during the year 1959. 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. 247 examinations were carried out in 1958.

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. 628 such visits were made during the year.

MISCELLANEOUS MEDICAL EXAMINATIONS

During 1959, 482 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 examinations 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 482 compares with 395 for 1958.

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

EXHIBITIONS.

During 1959, the Monmouthshire County Council, as part of its Health Education programme, took stands at two Agricultural Shows in the County for the purpose of staging exhibitions of material illustrating the work of the Health Department. The Shows selected were the Monmouth Agricultural Show in August, and the Bedwellty Agricultural Show held at Blackwood in September. The Exhibitions included sections dealing with the School Health Department, and effectively brought to the notice of the general public the nature and value of the work carried out.

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.-Periodic Medical Inspections.

A C	No of Dunil	Phys	ical Condition o	of Pupils Inspected.			
Age Groups Inspected	No. of Pupils Inspected.	SATIS	FACTORY.	Unsatisfactory.			
(By year of birth)	619	No.	% of Col. 2.	No.	1% of Col 2		
(1)	(2)	(3)	(4)	(5)	(6)		
1955 and later	342	340	99.4	2	0.6		
1954	1,945	1,917	98.6	28	1.4		
1953	2,084	2,055	98.6	29	1.4		
1952	279	273	97.5	6	2.5		
1951	108	108	100.0	_	0.0		
1950	64	63	98.4	1	1.6		
1949	241	241	100.0	19-	nostT		
1948	1,381	1,376	99.6	5	0.4		
1947	799	797	99.8	2	0.2		
1946	76	75	98.7	1	11.3		
1945	1,203	1,181	98.2	22	1.8		
1944 and earlier	3,165	3,157	99.4	8	0.6		
Total	11,687	11,583	99.1	104	0.9		

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)
1955 and later	_	6	5
1954	11	275	266
1953	13	365	345
1952	4	54	56
1951	5	116	15
1950	8	8	15
1949	12	20	31
1948	83	142	196
1947	36	82	97
1946	6	8	13
1945	62	133	171
1944 and earlier	174	184	338
Total	414	1.288	1,548

Table C.-Other Inspections.

Monmouthshire (excluding the Divisional Executive Area).

Number of Special Inspections	 		 289
Number of Re-inspections	 		 3,339
Total	 	01	 3,628

Table D.-Infestation with Vermin.

Monmouthshire (excluding the Ebbw Vale Area of the Divisional Executive).

(a)	local number of individual examinations of pupils in schools by school nurses or other	
	authorised persons	76,630
(b)	Total number of individual pupils found to be infested	. 3,640
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section	
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section	
	54(3) Education Act 1044	

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

Monmouthshire (excluding the Divisional Executive Area).

Defect				PE	RIODIC	INSPEC	TIONS		- 40
Code No.	Defect or Disease	Ent	rants	Lea	vers	Oti	hers	To	tal
(1)	(2)	(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O)
4.	Skin	12	58	6	71	12	63	30	19
5.	Eyes— (a) Vision (b) Squint (c) Other	28 24 7	99 51 10	222 36 5	318 35 17	164 12 4	204 39 20	414 72 16	62 12 4
6.	Ears— (a) Hearing (b) Otitis Media (c) Other	35 36 4	20 39 16	12 10 2	28 19 8	29 13 	18 33 13	76 59 6	6 9 3
7.	Nose and Throat	99	341	61	163	88	232	248	73
8.	Speech	36	49	9	20	7	23	52	9
9.	Lymphatic Glands	14	117	_	38	4	31	18	18
10.	Heart	4	50	10	56	4	64	18	17
11.	Lungs	20	113	- 5	77	12	82	37	27
12.	Developmental— (a) Hernia (b) Other	3 5	4 31	2 5	6 36	1 7	7 36	6	1 10
13.	Orthopaedic— (a) Posture (b) Feet (c) Other	7 313 30	25 121 78	56 29 16	149 53 63	37 60 37	94 70 74	100 402 83	26 24 21
14.	Nervous System— (a) Epilepsy (b) Other	2 4	15 35	-3	9 13	<u>-</u> 6	10 26	2 13	3
15.	Psychological— (a) Development (b) Stability	6 2	17	1	17 7	10 2	26 20	17 5	6
16.	Abdomen	3	21		1 7	5	7	8	3
17.	Other	2	9	2	5	5	1	9	1

T-Pupils found to require treatment.

O-Pupils found to require observation.

Table B.—Special Inspections.

Monmouthshire (excluding the Divisional Executive Area).

Defect Code	D		SPECIAL IN	SPECIAL INSPECTIONS				
No. (1)	Defect or D (2)	Isease	Requiring Treatment (3)	Requiring Observatio				
4.	Skin	. (1 (391)	D -	1				
5.	Eyes— (a) Vision (b) Squint (c) Other		16 4	16 7				
6.	Ears— (a) Hearing (b) Otitis Media (c) Other		12 5 1	5 2 2				
7.	Nose and Throat	85 85	10	11				
8.	Speech		24	15				
9.	Lymphatic Glands	,	3	1				
10.	Heart		1	10				
11.	Lungs		shan 2 shadee	10				
12.	Developmental— (a) Hernia (b) Other		3	5				
13.	Orthopaedic— (a) Posture (b) Feet (c) Other		2 7 2	8 5 6				
14.	Nervous System— (a) Epilepsy (b) Other		3	7.5				
15.	Psychological— (a) Development (b) Stability		12	7 4				
16.	Abdomen)))	— las golo de	II.				
17.	Other		na la dia dell'annia di	2				

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.

February 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
Errore of refraction (including equint)		107 †3,479
	Total	3,586
Number of pupils for whom spectacles were prescribed		2,721

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

						Di	Number of cases known to have been dealt with.
Received operative treatment:— (a) for diseases of the ear. (b) for adenoids and chroni (c) for other nose and throa Received other forms of treatment	c tonsillitis						682 203 693
					Tot	al	1,578
11.	who are ki	nown 	to ha	ve bee	en provi	ided 	†26 †65

^{*}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.

		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	 	†745 —
	Total	†745

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

Ringworm—(i) Scalp	(excludi	ng unclear	liness,	for wh	nich se	e Table	D of Part I).
Ringworm—(i) Scalp (ii) Body Scabies Impetigo Other skin diseases Total Total IO Table E.—Child Guidance Treatment. Number of cases known to have been treated. Pupils treated at Child Guidance Clinics Table F.—Speech Therapy. Number of cases known to have been treated. Pupils treated by Speech Therapists Table G.—Other Treatment Given. Number of cases known to have been treated. Pupils with minor ailments (a) Pupils with minor ailments (b) Pupils who received convalescent treatment under School Health Service arrangements (c) Pupils who received B.C.G. vaccination (d) Other than (a), (b) and (c) above (specify):— General Surgical Otthoptic Rheumatism and Cardiology Rheumatism and Cardiology Holidical Holid		Squint ve Aner	ban nois	New No.	Defect debe	icases, include	effect point	
Scabies								
Scables Impetigo								10
Total 10 Table E.—Child Guidance Treatment. Number of cases known to have been treated.	Sanking							CHICAGO ON THE CALL CALLED CALL
Table E.—Child Guidance Treatment. Number of cases known to have been treated.					19.00			DESCRIPTION OF THE PROPERTY OF STATES
Table E.—Child Guidance Treatment. Number of cases known to have been treated.	Other skin diseases		Tolar					. —
Pupils treated at Child Guidance Clinics	2721			600	bedia	2010 0100	Total	lange and was all all and
Pupils treated at Child Guidance Clinics			Table E	-Child	Guid	ance 7	Freatmen	t.
Table F.—Speech Therapy. Number of cases known to have been treated.	July	eT bas	Sur, None	l-lo els	Dafe	ras-101	mile.	
Pupils treated by Speech Therapists	Pupils treated at Child Gu	uidance	Clinics					†137
Pupils treated by Speech Therapists	203		Tab	le F.—:	Speech	Thera	ару.	
Table G.—Other Treatment Given. Number of cases known to have been dealt with.								have been treated.
Number of cases known to have been dealt with. (a) Pupils with minor ailments	Pupils treated by Speech	Therapi	sts					†331
(a) Pupils with minor ailments	126		Table G	.—Oth	er Tre	atmen	t Given.	alopdos at alique to vocamen tero t —t abla gainend driv
(b) Pupils who received convalescent treatment under School Health Service arrangements								Number of cases known to have been dealt with.
(c) Pupils who received B.C.G. vaccination	(b) Pupils who received	conva		 eatment	under	Scho	ool Healt	—
(d) Other than (a), (b) and (c) above (specify):— General Surgical								
General Surgical								11,750
Rheumatism and Cardiology	General Surgical							
Medical †10								+0
								410

Total (a)—(d)

†2557

PART IV.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

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

	(a) At Periodic In	nspections				ficers—				39,827
	(b) As Specials	N				b	ottil.es			934
							То	otal (1)		40,761
2)	Number found to requir	re treatment								30,134
3)	Number offered treatm									26,330
4)	Number actually treate Attendances made by p		ent inc	luding				diest		20,717
	those recorded at 1									31,144
5)	Half-days devoted to:	Inspection								274
,		Treatment			,					2,756
							To	otal (6)		3,030
	186									
7)	Fillings: Permanent Temporary T						***			12,469
							Т.	tal (7)		12,469
							10	otai (/)	•••	12,40
8)	Number of teeth filled									11,446
		Temporary 7	eeth			•••			•••	
							To	tal (8)	***	11,446
9)	Extractions: Permanen		,							5,688
	Temporar	y Teeth		***		•••			***	11,950
							To	otal (9)		17,638
	Administration of gener									10,784

(11) Orthodontics:

(a) Ca	ses commenc	ed during th	he year							410
(b) Ca	ses carried fo	rward from	previous	year				10.	13.50	140
(c) Ca	ses completed	during the	year							96
	ses discontinu		COLUMN TO FREE P.	olu Wina	Vi , UT	ADMINION OF	A WAY	pag pur	- Di	44
2020	pils treated v			O. Kel	noden	A pair	(1)	ospeni	diguer	410
	movable appl							-1b	onal s	230
	red appliance									150
	tal attendanc									2,260
(i2) Number of I	oupils supplie	d with artif	icial teeth	ı						187
(13) Other opera	ations:					inom				or real marks
Perma	nent teeth									8
Temp	orary teeth									310
										-
							T	otal (13	3)	318

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.

(6)	(6)	Physical Condition of Pupils Inspected.							
Age Groups Inspected	No. of Pupils	SATI	SFACTORY,	Unsat	ISFACTORY.				
(By year of birth)	Inspected.	No.	% of Col. 2.	No.	% of Col. 2				
(1)	(2)	(3)	(4)	(5)	(6)				
1955 and later	100	100	100.0	_	53915 -				
1954	136	133	97.8	3	2.2				
1953	212	209	98.5	3	1.5				
1952	91	90	98.9	1	1.1				
1951	5	5	100.0	-	N -				
1950	01_			_	8M I				
1949	Princes 4 861	-		1-	BoT -				
1948	54	42	77.7	12	22.3				
1947	24	22	91.6	2	8.4				
1946	in System—	-	- 1	-					
1945	94	93	98.9	1	1.1				
1944 and earlier	192	182	94.8	10	5.2				
Total	908	876	96.5	32	3.5				

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)	oth	er any of the er conditions ded in Part II (3)	Total individual pupils (4)							
1955 and later	ZORDS DA BRETA		diqu'il lo .o	Inspectal							
1954	18 o <u>r (</u> ot. 2.	No	65	63							
1953	(A) Is	(3)	60 (2)	56 (1)							
1952	0.0 <u>01</u> -	001	30	15124 binn 8891							
1951	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	001	4	1 3							
1950		-		10101-							
1949	285	209	212	1953_							
1948	3	00	6	9							
1947		000	10	3							
1946	0.001	ē	5 1	1951							
1945	5		10	14							
1944 and earlier	10		23	23							
Total	19		198	194							
	P. 67	C		8121							

	Table C.—Other	Insp	ections				
Number of	Special Inspections			15.		285	
Number of	Re-inspections	2004	206		***	86	
	Total					371	

Table D.-Infestation with Vermin.

Figures included on Table D. on Page 24.

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

Table A.—Periodic Inspections.

Defect	page special partie	ioli	Periodic	INSPECTIONS	12000 12000 12000
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 \(\tau \)	19 6	[17	2 -	21 7
5.	Eyes— (a) Vision (b) Squint (c) Other	1 3 6 5 3 2	15 6 - 1 2 -	$\frac{3}{2}$	19 9 6 6 7 2
6.	Ears— (a) Hearing (b) Otitis Media (c) Other	$-\frac{1}{3}$	- - 3 -	_ 3 _	$-\frac{4}{6}$
7.	Nose and Throat	43 .52	7 6	4 6	54 64
8.	Speech	6	2	- 2	6 4
9.	Lymphatic Glands	()	- Ly -	d-1	md- -11
10.	Heart	3	1 4	2	951
11.	Lungs	4 11	4	Toler-	5 15
12.	Developmental— (a) Hernia (b) Other	_ 1i		$-\frac{1}{3}$	_ 1 _ 27
13.	Orthopaedic— (a) Posture (b) Feet (c) Other	73 2 5	5 14 1 — 4 —	4 <u>-</u> 2	9 16 77 5 5 2
14.	Nervous System— (a) Epilepsy (b) Other	- 1 -		_ - - 3	729 181 1 3
_15.	Psychological— (a) Development (b) Stability	= =	= =	e	16. Ab
16.	Abdomen	-1-	-1-	-1-	-1-
17.	Other	-1-	-1-	-1-	-17-

T-Pupils found to require treatment.

O-Pupils found to require observation.

Table B.—Special Inspections.

Defect				SPECIAL INSPECTIONS				
Code No. (1)	Defect or 1	Disease			Requiring Treatment (3)	Requiring Observation (4)		
4.	Skin				41	30		
5.	Eyes—	(9)	(5)	167	(6)	[- (1)		
-	(a) Vision				-	_		
	(b) Squint				7	- Table 1		
	(c) Other		•••		26	4		
6.	Ears—				L Vision coisiV.			
9	(a) Hearing			E	2 10000	1 2 -		
- 1	(b) Otitis Media				1 3500	29		
	(c) Other				_	4		
7.	Nose and Throat			1	36	20		
8.	Speech			\$	3			
9.	Lymphatic Glands			152	14 dT bas s	6 7 6		
10.	Heart				o his — in dos	1 8. Spe		
11.	Lungs				phatic Clauds	Lyst Lyst		
12.	D11					10. 1. Hea		
14.	Developmental— (a) Hernia				2- 1 m	Part III and I and		
15	(b) Other			10	3	males at L		
				-		0 0		
13.	Orthopaedic-				-Ininsmools	add a		
20	(a) Posture				23	5		
1-0	(b) Feet (c) Other				2			
	(c) Other		•••		-	10 0		
14.	Nervous System-				Porture Alleber			
	(a) Epilepsy			٠	3 3000	100 121 -		
	(L) Other				15-ft(0)	7		
15.	Psychological—				angratow? arms	Nee Nee		
	(a) Development				- paralig 1 4	3		
8	(b) Stability			-::	Cher	_		
16						d 11		
16.	Abdomen		•••		- langulons	181 18-		
17.	Other							

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

Table A.—Eye	Diseases, De	fective \	Vision and	Squint,
			Tropelottora	Number of cases known to have been dealt with
external and other, excluding errors of errors of refraction (including squint)	refraction and	squint		662
			Total	662
Number of pupils for whom spectacles	were prescribe	ed		324
Table B.—Disease	es and Defects	of Ear,	Nose and	Throat,
Number of cases brown to have been dealt with.			Tron I	Number of cases known to have been dealt with.
(a) for diseases of the ear (b) for adenoids and chronic ton		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PR	2 32
(c) for other nose and throat cond deceived other forms of treatment	litions			Pupils wild To all the select
			Total	35
OUT BY THE AUTHORITY.	-Orthopaedic	and Pos	stural Defec	
				Number of cases known to have been treated.
a) Pupils treated at clinics or out-paties b) Pupils treated at school for postural				Included in figures recorded on Page 27.
Tab (excluding uncl	le D.—Diseas eanliness, for			
				Number of cases known to have been treated.
Ringworm—(i) Scalp				-
cabies				
mpetigo				1
Other skin diseases				133
			Total	134

Table E.-Child Guidance Treatment.

Calley Conserve and Species Schools) [44] Lyo Diseases, Defective Vision and Squint,	Number of cases known to have been treated.
Pupils treated at Child Guidance Clinics	Included in figures recorded on Page 28.
Table F.—Speech Therapy.	stemal and other, excluding on
Logot Total	Number of cases known to have been treated.
Pupils treated by Speech Therapists	Included in figures recorded on Page 28.
Table G.—Other Treatment Given.	- Hable E.
Number of coses from to have been dealt with.	Number of cases known to have been dealt with.
(a) Pupils with minor ailments	- total teast a series basis
(b) Pupils who received convalescent treatment under School Health	714

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.

Age Groups	119	Phys	ical Condition	of Pupils Inspected.				
Inspected	No. of Pupils Inspected.	SATIS	FACTORY.	Unsatisfactory.				
(By year of birth)	Inspected.	No.	% of Col. 2.	No.	% of Col. 2			
(1)	(2)	(3)	(4)	(5)	(6)			
1955 and later	169	169	100.0	_	-			
1954	187	187	100.0	_	2811			
1953	301	297	98.7	4	11.3			
1952	28	28	100.0					
1951	4	4	100.0		8- N			
1950	- 85	_	81		no 244.			
1949	39	39	100.0	_	JASOT _			
1948	297	268	90.2	29	9.8			
1947	102	84	82.4	18	17.6			
1946	- man	_	_	_	_			
1945	238	233	97.9	5	2.1			
1944 and earlier	252	245	97.2	7	2.8			
Total	1,617	1,554	96.1	63	3.9			

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)
1955 and later	- Townsame	12	12
1954	5	27	30
1953	13	46	51
1952	3	5	7
1951			
1950	2 100.0	187 _ 18	- Stellan
1949	4	6	9
1948	31	62	79
1947	10	22	29
1946	0.00		1201
1945	22	67	76
1944 and earlier	18	33	47
Total	106	280	340

Table C .- Other Inspections.

Number of	Special Inspections	 			480
Number of	Re-inspections	 	cos:		560
				-	
	Total	 ***		,	1,040

Table D.-Infestation with Vermin.

(a)	Total number of individual examinations of pupils in schools by school nurses or other	
	authorised persons	 9,730
(b)	Total number of individual pupils found to be infested	 203
(c)	Number of individal pupils in respect of whom cleansing notices were issued (Section	
	54(2) Education Act, 1944)	 -
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section	
	54(2) Education Act, 1944)	 -

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

Table A.—Periodic Inspections.

Defect	slopest considered pair	Superi		PER	HODIC	INSPECT	IONS		
Code No.	Defect or Disease	Entr	ants	Leavers		Oth	ers	Total	
(1)	(2)	(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T)	(O) (8)	(T) (9)	(O) (10)
4.	Skin	4	7	1	4	1	4	6	15
5.	Eyes— (a) Vision (b) Squint (c) Other	21 8 -	4 7	40 1 1	14 5 1	45 4 1	23 5 2	106 13 2	41 17 3
6.	Ears— (a) Hearing (b) Otitis Media (c) Other	4 -	3 1	<u></u>	5 3	3 2 2 2	3 1	7 2 3	11 5 —
7.	Nose and Throat	23	48	16	25	21	56	60	129
8.	Speech	- 1	3	_	2	4	9	- 4	14
9.	Lymphatic Glands	- 1	_		I —	1	6	1	6
10.	Heart	- 1	1		7	-1	9	oved	17
11.	Lungs	10	15	3	8	3	16	16	39
12.	Developmental— (a) Hernia (b) Other	<u>-</u>	2 6		1 5	- 3	3 15	<u>-</u> 6	6 26
13.	Orthopaedic— (a) Posture (b) Feet (c) Other	1 5 1	1 4	15 2 —	19 4 4	11 4 4	19 7 16	27 11 5	39 12 24
14.	Nervous System— (a) Epilepsy (b) Other		4		1 3	_	1 6	2009	6
15.	Psychological— (a) Development (b) Stability	_			6	_	5	AND	11
16.	Abdomen	_	4		1 -	- 1	3	_	7
17.	Other	14	8	59	1 1	44	17	117	26

T-Pupils found to require treatment.

O-Pupils found to require observation.

Table B.—Special Inspections.

Defect Code	Defeat on T	· · · · · · · · · · · · · · · · · · ·		SPECIAL INSPECTIONS					
No. (1)	Defect or Disease (2)				Requir	ring Treatment (3)	Requiring Observat		
4.	Skin	8180	Loan	etno	ona	7	100	lo _N	
5.	Eyes— (a) Vision (b) Squint (c) Other	(0)	(1)	(O) (4)	18	37 7 3	Skin	41)	
6.	Ears— (a) Hearing (b) Otitis Media (c) Other	+1	04	# 	15 8	5 4	40 (D) 77 (D)	5 1	
7.	Nose and Throat			ē		14	-arazl	1	
8.	Speech					6	(6) 9	_	
9.	Lymphatic Glands		ð			loosdT ba	Nose	2	
10.	Heart	N				1	Accept.	1	
11.	Lungs					5	amol -	8	
12.	Developmental— (a) Hernia (b) Other				-01	= =	Heard	01	
13.	Orthopaedic— (a) Posture (b) Feet (c) Other		S		- Local	4 9 8	(6) (3)	1 6	
14. 08 21	Nervous System— (a) Epilepsy (b) Other		30		1 5	- dibent	63	11	
15.	Psychological— (a) Development (b) Stability			ļ		2	VISIN (a)	5 2	
16.	Abdon.en				Build	- Libeliante	Jan Flotter	-	
17.	Other					16	(a)	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).

91 RWONS ESSES TO TROMBY		
		Number of cases known to have been dealt with.
External and other, excluding errors of refraction and squint Errors of refraction (including squint)		3 473
	Total	476
Number of pupils for whom spectacles were prescribed		232
Table B.—Diseases and Defects of Ear, N	Nose and T	hroat.
Number of cases known to		Number of cases known to have been dealt with.
Received operative treatment:— (a) for diseases of the ear (b) for adenoids and chronic tonsillitis (c) for other nose and throat conditions	Clinics	mabino blinto = 36 et est elique
Received other forms of treatment	Total	41
Total number of pupils in schools who are known to have bee		
with hearing aids:— (a) In 1959 (b) In previous years		Included in figures recorded on Page 27.
Table C.—Orthopaedic and Pos	tural Defec	rts.
GOther Treatment Giveni of variousal	Table	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	aleacent to	140
	Total	140

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

	CACIGGIII	5							of Fart 1).
									Number of cases known to have been treated.
Ringworm— (i) Scalp (ii) Body Scabies Impetigo Other skin diseases		 				(i)	lo	otal	External and — excluding excluding excluding at 1.
232				4	bedito	वस्य का	DAL RE	Otal	Number of pupils for whom sp
	T	able l	Е.—С	hild G	uidanc	e Trea	tment	Sisteral C	Table BE
er of vases known to see been dealt with.									Number of cases known to have been treated.
Pupils treated at Child	Guidanc	e Clir	nics			ei	nilkwa	1 510	Included in figures recorded on Page 28.
10 10		latel	Table	F.—	Speech	Ther	ару.		
babassa seconded	bulant	podivi	ord us	ad av	d of a	landy	or	lw do	Number of cases known to have been treated.
Pupils treated by Speec		oists	Loring's	od Po	adic a	Line			Included in figures recorded on Page 28.
ser of cases known to	Numb	Ta	ble G	i.—Ot	her Tr	eatmer	nt Giv	ven.	
(a) Pupils with minor at (b) Pupils who received Service arrange (c) Pupils who received	ed convements B.C.G.	vaccii	nation			r Sch	ool H	lealth	Included in figures recorded on Page 28.
(d) Other than (a), (b) ar	id (c) abo	, v C (0)	poorry			Tota	l (a)—		21

PART IV.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

		A A A AVARA	111 01	ANTIVIL	D 00	T E	or IL	E A	DIHORIT
(1)	Number of pupils inspected by the A	uthorit	v's Der	ntal Of	ficers				
100	(a) At Periodic Inspections		, 0 2001						arsqo -adr
	(b) As Specials	:			teets	(25)	Tempo	•••	1,853
		•••			***			•••	408
						T	otal (1)		2,261
(2)	Number found to account to omedica								200
(2)	Number found to require treatment	Sub-	***	•••	***	***	b		1,479
100000	Number offered treatment	1000	of with	***	sotte bar	***	et estoc		1,402
(4)	Number actually treated	diomi	meres		slive vin		e Irriba	021-526	879
(5)	P-P-10 101 troutil	nent in	cluding						
	those recorded at 11 (h)			***	tolinde		my ole	0	954
10	11 1/ 1 1 1 1 1 1								amilitar is
(6)	Half-days devoted to: Inspection				***				14
	Treatment			***					145
						T	otal (6)		159
-	,ma 1								
(7)	Fillings: Permanent Teeth			***					163
	Temporary Teeth					***			. 1
									M dionwe
						T	otal (7)		164
(8)	Number of teeth filled: Permanent To	eeth							141
	Temporary Tempor	eeth							1
						T	otal (8)		142
								7.7.7.	
(9)	Extractions: Permanent Teeth Temporary Teeth								728
									1,149
			1000				37.77	323	
						7	otal 9		1,877
									-1,077
(10)	Administration of general anaesthetics f	or extra	action						750
(11)	Orthodontics:								
	(a) Cases commenced during the ye	ar						1111	16
	(b) Cases carried forward from pre-	vious v	ear					***	5
	(c) Cases completed during the year	ar	***		•••				10
	(d) Cases discontinued during the y	vear		•••	•••	•••			7
	(e) Pupils treated with appliances								16
	(f) Removable appliances fitted			***		•••			16
	(g) Fixed appliances fitted								.10
	Prince into		•••						_
	(h) Total attendances								
			•••			•••			60

(12) Number of pupils	supplied wit	th artificial	teeth		BMEA	SAID.	GNA	HOIT	DISPEC	11
(13) Other operations:	Permanent Temporary		lenns	G e'v	modu.	A self	ed by	a reni	eliquq le	511
	en hard						To	tal (1	3)	51

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.

I am,

County Hall,

Newport, Mon.

October, 1960.

Your Obedient Servant.

G. ROCYN JONES,

Principal School Medical Officer.