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County Borough of Barrow-in-Furness

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# Annual Report

of the

Principal School Medical Officer

JAMES MACLACHLAN,  
M.B., Ch.B., D.P.H.

1955.

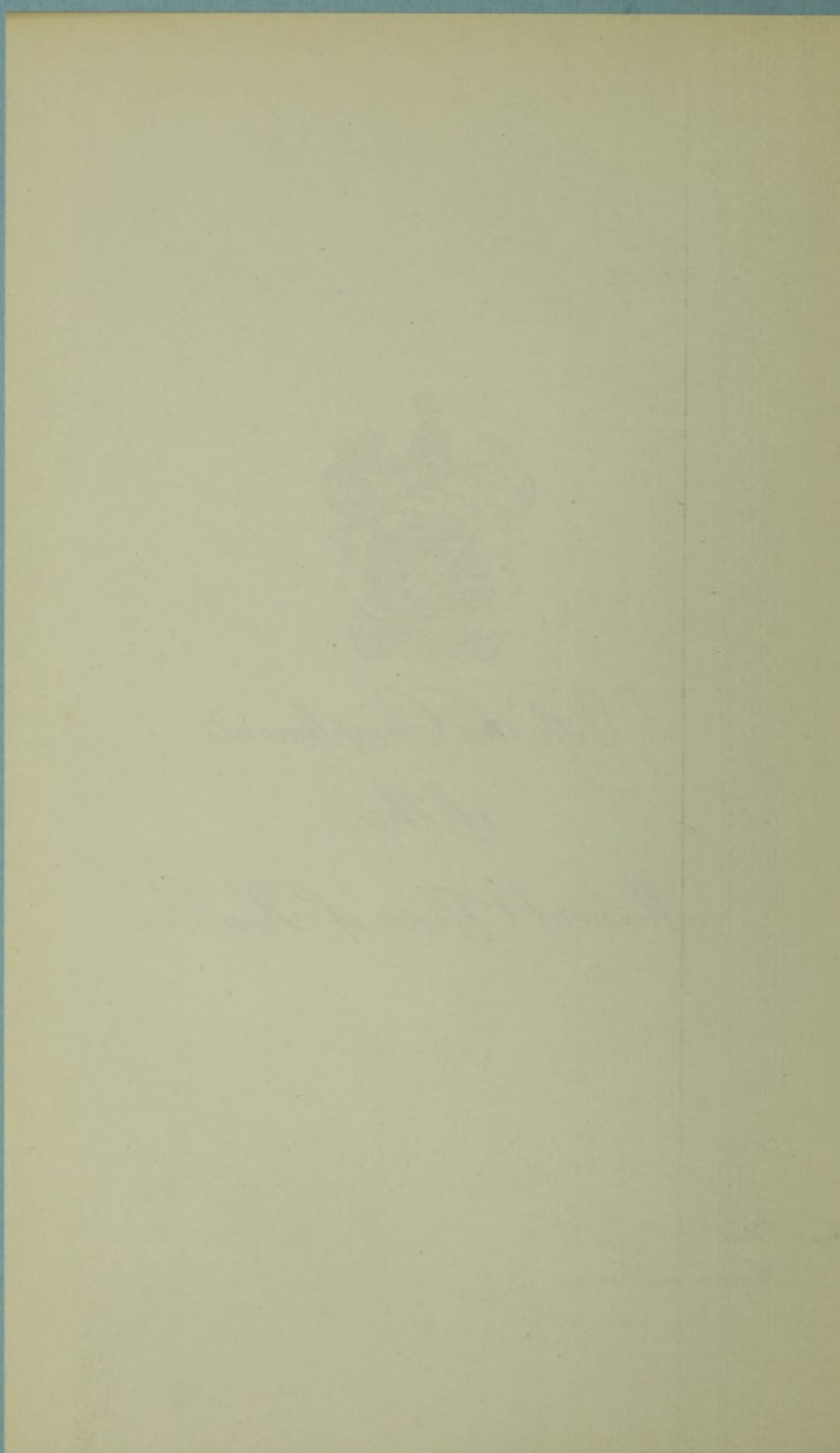






*With the Compliments  
of the  
Medical Officer of Health*

*Town Hall,  
Barrow-in-Furness.*



# REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE  
YEAR ENDED 31st DECEMBER, 1933.

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# REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE

YEAR ENDED 31ST DECEMBER, 1955.

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TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION  
COMMITTEE OF THE COUNTY BOROUGH OF  
BARROW-IN-FURNESS.

Ladies and Gentlemen,

It is with pleasure that I submit the Annual Report on the work of the School Health Service for the year 1955.

Statistics relating to the nutritional standards of the various age groups of school children show that their general physique has been maintained. Pupils inspected routinely at school were in good general condition and their health was satisfactory.

Amongst infectious diseases the number of notifications of measles was the highest yet recorded. There were six cases of poliomyelitis in school children, all being of a minor nature and non-paralytic. Of the ten cases of clinical tuberculosis, five came to our notice in the same school as the result of a thorough investigation therein following a notified case among the school staff. Once again there were no cases of diphtheria and, for the first time, no notified cases of whooping cough. It will be remembered that the Public Health Department started immunisation against whooping cough some three years ago.

A large amount of work has been carried out by the school dental staff this year, and an extensive programme of routine inspection and routine, as opposed to emergency treatment, has been completed. Now that it has been decided to construct a third dental surgery and to staff it, the goal of preventive dentistry may be reached. A new scheme of dental talks, given by the Principal School Dental Officer, promises to reap rewards in the better care of children's teeth. In the field of health propaganda generally, talks were given by the Principal School Medical Officer on school health subjects and on B.C.G. immunisation, and by the speech therapist, in addition to the continuous instruction and advice given by school nurses and other members of the staff.



The individual needs of the handicapped child are carefully investigated, the aim being to lighten and improve his particular disability and to provide the education for which he is most suited. Barrow is fortunate in possessing Day Schools for delicate and physically handicapped and for mentally sub-normal children, and such facilities permit nearly every child to be placed in these schools in the same year as he is ascertained. At one end of this group of children, the slightly retarded or slightly maladjusted child already receives help for his handicap at the Child Guidance Centre, whilst at the other end the ineducable child may shortly benefit from the probable provision of an Occupation Centre by the Local Health Authority.

During the year, Dr. Morison, one of our School Medical Officers, obtained a post elsewhere and was succeeded by Dr. Wharton.

The real interest shown in the work of the School Health Service throughout the year by the members of the Children and Young Persons Welfare Subcommittee has been most encouraging to me, and I am grateful for their assistance and support. My thanks are also due to the Chief Education Officer and the teaching staff of the schools, whose co-operation is so essential to the successful conduct of our work. Finally, I am indebted to the staff of my Department, on whose loyalty, efficiency and help, I can at all times depend.

I am, Ladies and Gentlemen,

Your Obedient Servant,

JAMES MACLACHLAN,

Medical Officer of Health and  
Principal School Medical Officer.

### MEDICAL, DENTAL AND NURSING STAFFS.

Principal School Medical Officer : JAMES MACLACHLAN, M.B., Ch.B., D.P.H.

School Medical Officers : DOROTHY G. STEWART, M.B., Ch.B.

MAUDE W. SMITH, M.D.

ROBERT A. H. MORISON, M.B., Ch.B.  
(Resigned 23/7/55).

RALPH WHARTON, M.B., Ch.B.  
(Appointed 10/10/55).

Principal School Dental Officer : DEV DATTA WATTS, L.D.S.

Dental Officer : WINIFRED G. SIVEWRIGHT, L.D.S.

School Nurses : NURSE L. JACKSON, S.R.N. (Temp.).

NURSE N. MCFARLANE, S.R.N., S.R.F.N.,  
S.C.M., (H.V. CERT.).

NURSE A. QUINN, S.R.N., (H.V. CERT.).

NURSE S. SCOTT, S.R.N., S.C.M. (H.V. Cert.).

Speech Therapist : Miss M. HALL, L.C.S.T.

Ophthalmic Surgeon (part-time) : HERBERT C. KODILINYE, M.B., Ch.B.  
D.O.(Oxon), D.O.M.S.(ENG.).

### SCHOOL PROVISION.

Average number of children on the school register :—11,635.

#### COUNTY SECONDARY SCHOOLS—

Grammar School for Boys.

Grammar School for Girls.

Technical School for Boys.

Holker.

Victoria.

Walney.

Risedale.

Alfred Barrow Boys.

Alfred Barrow Girls.

#### VOLUNTARY SECONDARY SCHOOLS—

Our Lady's R.C.

St. Aloysius' R.C.



## COUNTY PRIMARY SCHOOLS—

Barrow Island Infants  
 Barrow Island Junior.  
 St. James's Infants.  
 Abbotsmead Infants.  
 Abbotsmead Junior.  
 Ormsgill Infants.  
 Ormsgill Junior.  
 Victoria Junior.  
 Greengate Infants.  
 Greengate Junior Boys.  
 Greengate Junior Girls.  
 Roose Primary.  
 Ramsden Infants.  
 Vickerstown Primary.  
 Victoria Infants.  
 South Walney Infants.  
 South Walney Junior  
 South Newbarns Infants  
 South Newbarns Junior

## VOLUNTARY PRIMARY SCHOOLS—

Sacred Heart R.C. Primary  
 St. George's C. of E. Primary.  
 St. Paul's C. of E. Junior.  
 St. James's C. of E. Junior.  
 St. Columba's R.C. Primary  
 St. Mary's R.C. Infants.  
 St. Mary's R.C. Junior  
 St. Patrick's R.C. Primary

## OTHER SCHOOLS—

Roa Island Special.  
 Bram Longstaffe Nursery.  
 Ramsden Special.

## INDEPENDENT SCHOOLS—(To whom the facilities afforded by the School Health Service are extended).

Our Lady's Preparatory School.

Average number of children on the school register :—130.

## SCHOOL CLINICS.

MINOR AILMENT AND SPECIAL INSPECTION CLINIC.	Arndene, Abbey Rd.	Treatment of defects and diseases of skin, ear, eye, nose and throat, etc. Exam- ination of all cases referred from routine medical inspections, by Head Teachers, Nurses, Attendance Officers, etc., or at parents' request.	9-0—12 noon, Monday to Friday.
OPHTHALMIC CLINIC.	do.	Examination, refraction and treatment of all cases referred from routine inspection and minor ailment and special inspection clinics, by Head Teachers, Nurses, etc., or at parents' request.	Tuesday and Wednesday, 2-0—5-0 p.m. Thursday, 9-0—12 noon.
IMMUNISATION CLINIC.	Municipal Clinic, Abbe/ Rd.		3-0 p.m. Tuesday and Thursday
SPEECH CLINIC	do.	Investigation and treatment of all pupils with speech disorders referred from routine medical inspections or minor ailment and special inspection clinics.	9-0—12 noon. 1-30—5-0 p.m. Monday to Friday
DENTAL CLINIC.	do.	Examination and treatment of all cases referred from routine medical and dental inspections, by Nurses, Head Teachers, etc., or at parents' request.	9-0—12 noon. 2-0—5-0 p.m. Monday to Friday.
ORTHOPÆDIC CLINIC	do.	Examination of all cases with crippling defects and deformities referred from routine medical inspections or minor ailment and special inspection clinics.	Every six weeks under arrangements made with the Medical Superinten- dent, Ethel Hedley Hos- pital, Wind- mere.



ULTRA VIOLET RAY CLINIC.	do.	Treatment of all cases of malnutrition, anæmia, etc., referred from routine medical inspections or minor ailment and special inspection clinics.	2-0 p.m. Monday & Thursday.
MASSAGE AND REMEDIAL EXERCISES CLINIC.	do.	Treatment of all cases with postural defects, flat foot, etc., referred from orthopædic clinics, routine medical inspections or minor ailment and special inspection clinics.	2-0 p.m. Tuesday and Friday.
	North Lonsdale Hospital		2-0 p.m. Wednesday.

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## SECTION 1.

### CO-ORDINATION.

The Medical Officer of Health is also Principal School Medical Officer, thus ensuring complete co-ordination of the School Health and General Public Health Services. The Assistant Medical Officers, moreover, have duties in both Services, thus enabling them to gain all round experience and to correlate their various duties.

All School Nurses, with one exception, are also Health Visitors, but they work in their respective departments. It has not been possible to completely integrate the two services and thereby give each nurse an area of the Borough where she could be responsible for all children in her area from birth until they leave school. The raising of the school leaving age and the shift of the population due to new housing has imposed a strain on the resources of certain schools, with the result that artificial boundaries of areas for Health Visiting do not coincide with the boundaries of the school population.

The records from the Maternity and Child Welfare Department are transferred to the School Health Service when the child commences school, thereby ensuring a complete record of the child's health from birth until leaving school.

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## SECTION 2.

### MEDICAL INSPECTION.

The School Health Service and Handicapped Pupils Regulations, 1953, which came into effect in August, 1953, introduced certain changes in the requirements regarding medical inspection.



Under the 1945 Regulations, 3 general medical inspections were prescribed during a pupil's attendance at school at specified periods in his school career. Additional general medical inspections were permissible with the Minister's approval. By the new Regulations a minimum of 3 medical inspections is prescribed during the period of school life, but it is left to the Authority's discretion when to arrange these and also whether to arrange for additional general inspections. Provision is also made by the new Regulations for the Minister's approval to less than 3 general inspections being conducted during the period of compulsory school age, the provision being included to enable Authorities who wish to do so to experiment with other arrangements not based on periodical medical inspections, e.g. where it is possible for a School Doctor to visit schools regularly (at least two or three times a term) it might be preferable for him to see on each occasion such children as are brought to his attention by parents, teachers, or the school nurse, instead of seeing all the children of a particular age group at infrequent intervals.

It was felt however that within the limitations of the present establishment of Medical Officers and the adequate facilities available for "follow up" at the Special Inspection Clinic, the existing arrangements for periodic medical inspection (which incidentally provide for 3 medical inspections per annum at the Open Air School) were the most satisfactory and the medical inspection of the following classes was accordingly carried out throughout the year.

- (a) "Entrants"—pupils admitted for the first time to a maintained school.
- (b) "Second Age Group"—pupils in the last year of attendance at a maintained Primary School.
- (c) "Third Age Group"—pupils in the last year of attendance at a maintained Secondary School.
- (d) "Other Routine Inspections"—8-year olds, pupils attending the Authority's Nursery, Special (E.S.N.) and Open Air Schools, the examination in accordance with the above age groups of children in attendance at Our Lady's Preparatory School, and the inspection of pupils, other than "leavers" in attendance at the Grammar and Technical Schools whose examination was considered necessary by the School Nurse or Head Teacher.
- (e) "Specials"—pupils examined at the request of Head Teachers, School Nurses, parents, etc., or for ascertainment as Handicapped Pupils.
- (f) "Re-inspections"—Those pupils who at the last routine or special inspection had been marked down for further observation or treatment.

Prior to the medical inspection of the children referred to in classes (a), (b), (c) and (d) above, the School is visited by the School Nurse who weighs and measures the children and tests the vision of the 8-year-olds and upwards. At the actual inspection the Medical Officer is accompanied by the School Nurse, and parents are invited to be present so that instructions can be given regarding any necessary treatment.

#### OBSERVATIONS ON MEDICAL INSPECTIONS.

No pathological condition or group of conditions was found to be unduly prevalent throughout the year.

#### NUTRITION.

The classification of the general nutrition of children remains in force as follows:—

- A. Good.
- B. Normal.
- C. Poor.



This form of classification, although useful for purposes of review, is open to differences of opinion on the part of individual Medical Officers and is not of great value for comparative purposes.

#### STATISTICS RELATING TO NUTRITION.

Tables showing the average height and weight of each age group for the years 1950, 1951, 1952, 1953, 1954 and 1955 are given below.

It can safely be stated that no great change in physique has taken place during the years under review.

#### Average Height in Inches.

Age Group	GIRLS						Boys					
	1950	1951	1952	1953	1954	1955	1950	1951	1952	1953	1954	1955
4	40.3	40.9	41.1	40.9	42.6	40.4	40.4	41.4	41.7	41.0	41.3	41.3
5	42.4	42.3	42.7	42.4	42.6	41.8	42.7	42.8	42.8	42.8	42.5	42.9
6	43.6	44.9	44.2	44.6	45.7	44.0	44.4	44.8	45.1	45.1	45.3	45.5
7	47.4	47.5	47.1	47.4	47.5	47.6	47.8	47.7	47.8	47.8	47.9	47.8
8	48.9	49.0	49.0	49.1	49.0	49.0	49.4	49.1	52.8	49.1	48.9	49.5
9	52.5	53.0	50.3	51.1	52.4	50.9	53.2	52.0	51.5	51.5	51.2	52.3
10	54.0	54.8	53.7	53.8	53.8	53.9	54.7	53.5	53.9	53.7	53.4	53.7
11	54.7	55.1	55.7	55.0	55.5	55.6	55.1	54.7	55.4	55.3	55.3	55.2
12	57.3	57.5	59.4	56.5	58.0	58.4	57.4	57.7	56.7	56.1	57.6	57.5
13	59.7	60.6	59.8	60.3	60.5	60.3	59.8	59.2	59.1	60.2	60.0	59.2
14	61.1	61.0	61.5	61.3	61.4	61.3	62.4	61.9	62.2	63.3	62.6	62.1
15	62.9	63.1	63.5	63.5	62.6	62.7	65.1	65.3	64.8	65.9	65.2	64.6
16	63.7	63.9	64.1	63.6	—	63.4	67.2	67.5	67.4	66.8	66.8	67.1
17	68.1	65.0	64.0	63.9	—	64.2	69.4	68.1	68.8	69.2	—	70.0

#### Average Weight in lbs.

Age Group	GIRLS						Boys					
	1950	1951	1952	1953	1954	1955	1950	1951	1952	1953	1954	1955
4	38.4	38.6	38.8	37.8	39.8	38.0	39.7	40.3	40.8	39.5	41.0	40.2
5	40.9	40.7	40.4	40.8	41.0	41.4	42.8	42.8	42.1	41.9	42.2	42.5
6	43.1	46.9	41.7	45.5	46.8	45.2	45.7	47.0	46.4	47.4	50.5	46.9
7	51.2	51.6	50.0	51.0	52.8	52.2	52.8	52.5	52.2	52.8	53.5	53.1
8	54.4	55.0	54.8	55.9	54.9	55.0	56.4	56.1	56.2	57.8	56.5	56.4
9	62.2	65.0	61.0	60.4	69.6	60.4	62.6	58.3	60.0	62.8	62.3	67.6
10	70.0	72.2	68.8	69.0	70.6	71.0	71.2	69.3	69.7	70.5	70.5	72.2
11	73.9	74.0	73.4	73.3	76.4	77.2	74.4	73.7	72.1	73.0	75.2	75.5
12	85.0	81.9	91.6	99.6	85.4	94.7	82.4	85.7	79.2	72.7	84.5	79.8
13	94.7	97.7	95.2	97.8	102.6	101.2	95.3	93.6	92.4	95.1	96.2	91.7
14	105.5	106.0	107.0	105.7	106.6	107.5	106.1	103.9	103.4	108.0	106.6	103.5
15	115.0	114.4	118.5	117.2	110.2	115.1	120.7	122.1	116.7	121.1	127.5	115.0
16	120.7	119.1	120.2	123.3	—	116.6	131.3	131.9	130.2	128.4	129.8	131.1
17	120.7	128.5	122.1	122.0	—	142.4	145.1	138.0	145.3	144.3	—	147.4

#### NUTRITIONAL ANALYSIS.

Once again a comparison was made between the children receiving both school milk and school dinners who were in the different categories of general condition, and the results (see tables) show that of those children having neither school dinners nor school milk, approximately half are of Nutritional Standard A, and only one-ninth are of Nutritional Standard C. Conversely, only 21% of Group A children as against 32% of Group C children have both school dinners and school milk.



TABLE TO SHOW THE COMPARISON BETWEEN CLASSIFICATION OF GENERAL CONDITION OF PUPILS AND THEIR CONSUMPTION IN SCHOOL OF SCHOOL DINNERS AND SCHOOL MILK DURING 1955.

Classification of of General Condition		A				B				C			
		Having School Dinners & Milk	Having Dinners Only	Having Milk Only	Not Having Dinners or Milk	Having School Dinners & Milk	Having Dinners Only	Having Milk Only	Not Having Dinners or Milk	Having School Dinners & Milk	Having Dinners Only	Having Milk Only	Not Having Dinners or Milk
2	—	—	—	—	17	2	—	—	24	2	—	—	2
3	8	—	—	—	30	10	—	—	35	4	—	—	4
4	21	—	—	55	35	34	—	—	24	7	—	18	3
5	41	—	2	184	2	92	3	395	11	28	—	125	7
6	8	—	—	18	1	14	—	45	1	11	—	8	—
7	52	—	2	196	9	86	2	256	19	25	3	60	7
8	45	—	5	164	11	55	2	226	12	32	—	79	6
9	3	—	—	12	—	10	—	6	1	8	—	2	—
10	39	—	4	120	27	42	3	122	13	18	—	25	3
11	60	—	10	213	40	57	4	150	35	26	—	40	8
12	11	—	3	9	2	13	1	6	—	12	—	1	—
13	10	—	4	19	4	14	1	12	3	8	1	4	1
14	67	—	11	133	44	60	9	127	27	23	2	26	10
15	23	—	8	36	19	19	8	28	16	9	—	8	6
16	10	—	8	9	10	10	3	4	5	1	—	—	2
17	3	—	—	1	5	1	—	2	1	—	—	—	—
18	3	—	—	1	1	2	—	—	1	—	—	—	—
TOTAL	404	57	57	1170	257	521	36	1452	228	214	6	396	59

SUMMARY					
Classification of General Condition	No. of Children Examined (2)	Having School Dinners and Milk	% of Col. 2	Having Dinners Only	% of Col. 2
A	1888	404	21.4	57	3.02
B	2237	521	23.29	36	1.61
C	675	214	31.7	6	0.89
TOTAL	4800	1139	23.73	99	2.06

	Not Having Dinners or Milk	% of Col. 2
Having Milk Only	257	61.97
Having Dinners or Milk	228	60.4
Having Milk Only	396	58.67
Having Dinners or Milk	544	62.87
Having Milk Only	59	13.61
Having Dinners or Milk	59	10.19
Having Milk Only	59	8.74
Having Dinners or Milk	59	11.33



Since less than 9% of Group C children receive no sustenance from school it would appear to confirm the statement made in last year's Report that the nutritional state of Group C children is not caused by lack of school dinners and milk. Such children may come largely from underdeveloped stock or their home meals may be lacking in quantity or quality.

### SECTION 3.

#### ARRANGEMENTS FOR TREATMENT.

##### MINOR AILMENTS CLINIC AND SPECIAL INSPECTION.

A Daily clinic has continued to be held at Arndene. It is staffed by an Assistant Medical Officer, two School Nurses and one Cleanser, together with a clerical assistant. The Medical Officer in addition to supervising the treatment of minor ailments carries out special examinations of cases referred from routine medical inspection or referred by Head Teachers or at the parents' request. All these cases classified as follows are given an appointment.

- Group 1. Minor Ailment Cases.
- Group 2. Cases referred by Head Teachers or at request of parents.
- Group 3. Those children who were absent at routine medical inspection.
- Group 4. Those children who have been referred from routine medical inspection for some specific defect.

Head Teachers are informed by letter of the results of the special examinations.

During the year, 1,864 children made 5,255 attendances under the different Groups as follows :—

	No. of individual children attending				No. of Attendances
Group 1	....	....	....	862	3947
Group 2	....	....	....	478	784
Group 3	....	....	....	221	221
Group 4	....	....	....	303	303

Several other examinations including the ascertainment of Handicapped Pupils, the initial and routine examination of foster children and the examination of pupils to determine their fitness for employment were also conducted at the clinic and in all 198 children were seen in the 12 months ended 31st December.

The various out-patient clinics of the North Lonsdale Hospital were also available to school children, and during the year 2,301 children made 7,609 attendances.

#### EAR, NOSE AND THROAT DEFECTS.

By arrangement with the Manchester Regional Hospital Board, Mr. John Magill, M.B., Ch.B., D.L.O., has continued to conduct separate Specialist Ear, Nose and Throat Clinics for the benefit of school children.

The clinics are conducted weekly at the North Lonsdale Hospital and during the year, 279 children made 1,112 attendances.

A waiting list of cases requiring operative measures remains but the waiting time for adenoidectomy and tonsillectomy has been considerably reduced.

#### OPHTHALMIC CLINICS.

Arrangements for the examination of children with defective vision and minor eye conditions were the same in substance as in previous years.

The provision of spectacles through the Supplementary Ophthalmic Service was satisfactory, there being no delay between prescription and supply.

The Ophthalmic Surgeon reports :—

" During the year a total of 896 children were examined and treated for various ocular conditions. Of these 847 were of school age and 49 of pre-school age. 1,261 attendances were made, 819 refractions carried out and 694 prescriptions for glasses issued.

Cases which required hospitalisation for surgical or medical treatment were referred to the North Lonsdale Hospital, Barrow-in-Furness. 24 children received operative treatment for squint and 16 for congenital impatency of the naso-lacrimal duct.

The various refractive errors for which glasses were prescribed were as follows :—

Hypermetropic Astigmatism ....	42%
Hypermetropia ....	18%
Myopic Astigmatism....	16%
Myopia ....	16%
Mixed Astigmatism ....	8.6%



## REFRACTIVE ERRORS AND OTHER DEFECTS ACQUIRED AND CONGENITAL.

Anisometropia .....	2
Hypermetropic Astigmatism .....	287
Hypermetropic Astigmatism with Right Amblyopia .....	5
Hypermetropic Astigmatism with Left Amblyopia .....	3
Hypermetropic Astigmatism with Right Congenital Cataract .....	2
Hypermetropic Astigmatism with Congenital Nystagmus .....	1
Hypermetropic Astigmatism with Congenital Ptosis .....	1
Hypermetropic Astigmatism with Right Corneal Scars .....	1
Hypermetropic Astigmatism with Partial Optic Atrophy .....	1
Hypermetropic Astigmatism Left, with Right Microphthalmos .....	1
Myopic Astigmatism .....	108
Myopic Astigmatism with Optic Atrophy .....	1
Myopic Astigmatism with Bilateral Congenital Scars .....	1
Myopic Astigmatism with Bilateral Corneal Scars .....	1
Myopic Astigmatism with Left Corneal Scars .....	1
Myopic Astigmatism with Left Macula Lesion .....	1
Myopic Astigmatism with Congenital Nystagmus .....	1
Myopic Astigmatism Right, with Left Mixed Astigmatism .....	1
Mixed Astigmatism .....	61
Mixed Astigmatism with Bilateral Congenital Nystagmus .....	1
Hypermetropia .....	118
Hypermetropia with Left Amblyopia .....	1
Hypermetropia with Left Cataract .....	1
Hypermetropia with Congenital Cataract and Nystagmus Right and Left .....	1
Hypermetropia with Hereditary Bilateral Ptosis .....	1
Hypermetropia with Congenital Pigmentation of Left Retina .....	1
Hypermetropia with Left Corneal Opacity .....	1
Hypermetropia with Partial Optic Atrophy .....	1
Hypermetropia with Bilateral Epicanthus .....	1
Myopia .....	113
Myopia with Left Corneal Scars .....	1
Myopia with Congenital Cataracts .....	1
Migraine .....	1
Emmetropia .....	14

## SQUINTS.

Right Convergent Concomitant Squint .....	29
Right Convergent Concomitant Squint with Amblyopia .....	5
Left Convergent Concomitant Squint .....	35
Left Convergent Concomitant Squint with Amblyopia .....	10
Alternating Convergent Squint .....	27

## TREATMENTS.

Blepharitis .....	4
Occlusions, Alternating .....	1
Occlusions Right Convergent Concomitant Squint .....	13
Occlusions Left Convergent Concomitant Squint .....	8
Orthoptic Exercises .....	5

## ORTHOPÆDIC CLINIC.

The Medical Superintendent of Ethel Hedley Hospital, Windermere, attends the Municipal Clinic in Barrow every six weeks and sees children with Orthopædic defects ascertained at medical inspection or referred through the family doctor.

The clinic is also attended by the Local Health Authority's Physio-therapist.

Hospital treatment is provided by the North Lonsdale Hospital in the case of short stay cases whilst conditions requiring longer terms of hospitalisation are admitted to Ethel Hedley Hospital.

9 Orthopaedic Clinics were held during the year and 124 school children made 217 attendances.

#### REMEDIAL EXERCISES, MASSAGE AND ULTRA VIOLET THERAPY

A complete service providing Remedial Exercises, Massage and Ultra Violet Therapy has been maintained throughout the year.

The following table shows the number of children who attended the various clinics :—

	Individual No. of children treated	No. of Attendances
Ultra Violet Therapy	108	1319
Massage	3	123
Remedial Exercises	175	1364
Other Treatment (Plasters, etc.)	86	750

#### SPEECH CLINIC.

Patients treated during 1955 include dyslalics and stammerers, together with those suffering from retarded and cleft palate speech.

Comparatively, attendances have been better this year and fewer treatments have been terminated because of persistent absenteeism.

Several infants' and other schools have been re-visited during the year and about 100 new cases are entered on the waiting list ; it is regretted that this list is still a long one.

Statistics relating to the work of the Clinic are shown below :—

Total No. of individual pupils treated	124
Total attendances	1535

No. of individual pupils who ceased treatment during the year :—

(i) Cured	10
(ii) Relieved but unlikely to receive further benefit	8
(iii) Miscellaneous (left town, treatment not desired, etc.)	15

No. of individual pupils summoned for interview

259

No. of individual pupils attending for interview

195

In addition to the routine work of the clinic, two evening lectures were given to about 130 teachers.

The subject of the lecture was " Speech Defects and their Treatment " ; recordings of actual treatment sessions were played. These were followed by a discussion.

In addition to the above, 30 children were discharged from the Clinic after parents had worked with the children at home under the direction of the Speech Therapist.



## HOSPITAL TREATMENT

No change has taken place in the procedure for referring school children for specialist opinion, investigation or treatment. The scheme continues to work well and a harmonious relationship exists between all concerned.

Advice of hospital admissions and discharges continues to be sent to the Principal School Medical Officer for record purposes.

## SECTION 4.

## WORK OF THE SCHOOL NURSES.

The following is a summary of the work done during the year additional to cleansing, preparation of children for medical inspections and assistance at these inspections with the Medical Officers :—

No. of visits to schools (all purposes) ....	432
No. of examinations and re-examinations (cleanliness, etc.)	33807
No. of home visits (all purposes) ....	467
No. of attendances at Minor Ailment and Inspection Clinics, etc.	618

TABLE SHOWING THE RESULT OF CLEANLINESS (HEAD)  
INSPECTIONS IN SCHOOLS.

SCHOOL.	No. of Examinations.	Instances of Uncleanli- ness.	Percentage. Unclean. 1955.	1954.
Abbotsmead County Infants ....	922	68	7.4	5.5
Abbotsmead County Junior ....	1302	78	6.0	8.5
Alfred Barrow Boys ....	1142	4	0.3	0.1
Alfred Barrow Girls ....	1020	39	3.8	5.9
Barrow Island County Infants ....	561	29	5.2	3.1
Barrow Island County Junior ....	832	48	5.8	8.3
Girls' Grammar ....	787	5	0.6	1.9
Greengate County Infants (Annexe) ....	469	47	1.0	9.3
Greengate County Infants ....	578	33	5.7	6.4
Greengate County Boys ....	962	22	2.3	2.1
Greengate County Girls ....	1331	96	7.2	9.5
Holker County Secondary ....	195	10	5.1	1.5
Ormsgill County Infants ....	1506	119	7.9	7.3
Ormsgill County Junior ....	1788	89	5.0	7.5
Our Lady's R.C. Secondary ....	307	6	1.9	3.7
Ramsden County Infants ....	434	12	2.8	3.1
Risedale County Secondary ....	1188	58	4.9	6.5
Roose County Primary ....	534	6	1.1	....
Sacred Heart R.C. Primary ....	600	56	9.3	10.9
South Newbarns County Infants ....	1062	33	3.1	5.7
South Newbarns County Junior ....	1389	50	3.6	4.5
South Walney County Infants ....	669	....	....	0.3
South Walney County Junior ....	1103	....	....	0.2
St. Aloysius' R.C. Secondary ....	747	64	8.6	8.5
St. Columba's R.C. Primary ....	320	12	3.7	6.5
St. George's C. of E. Primary ....	391	144	36.8	17.2
St. James's County Infants ....	590	29	4.9	3.8
St. James's C. of E. Junior ....	1285	27	2.1	7.8
St. Mary's R.C. Infants ....	493	23	4.7	6.5
St. Mary's R.C. Junior ....	729	13	1.8	2.5



St. Patrick's R.C. Primary	258	25	9.7	10.1
St. Paul's C. of E. Junior	229	....	....	0.8
County Technical	317	....	....	2.8
Vickerstown County Primary	969	11	1.1	1.7
Victoria County Infants	800	16	2.0	1.2
Victoria County Junior	1128	13	1.6	1.4
Victoria County Secondary	977	65	6.6	4.5
Walney County Secondary	872	8	0.9	0.7
<b>Total</b>	<b>30786</b>	<b>1358</b>	<b>4.4</b>	<b>8.2</b>
Bram Longstaffe Nursery	443	24	5.4	7.0
Our Lady's R.C. Preparatory	389	8	2.1	1.4
Roa Island Special	952	61	6.4	5.2
Ramsden Special (E.S.N.)	167	20	12.0	5.6
Ramsden Special (Annexe)	111	42	37.8	37.8
<b>Total</b>	<b>2062</b>	<b>155</b>	<b>7.5</b>	<b>6.6</b>
<b>Grand Total</b>	<b>32848</b>	<b>1513</b>	<b>4.6</b>	<b>5.1</b>

The number of school children treated during the year for Scabies was 4.

## SECTION 5.

### INFECTIOUS DISEASES.

All cases of infectious disease are notified to the Medical Officer of Health, who is also Principal School Medical Officer. Details of certain of these cases are sent to the Education Department, who notify the Head Teacher of the appropriate school, ensuring that contacts are excluded from school until free from infection.

The exclusion period is that adopted by the Ministry of Education.

The following gives particulars of cases of notifiable disease occurring in school children during 1955 :—

Scarlet Fever	6
Measles	748
Pneumonia	1
Acute Poliomyelitis (non-paralytic)	6
Acute Encephalitis (infective)	1
Dysentery	2
Food Poisoning	1
Tuberculosis	10

#### MEASLES.

The 748 notifications of measles among school children caused a marked reduction in the number of school attendances while the epidemic was at its height, as a considerable number of children who were contacts and had not had the disease, also had to be excluded. This number of notifications is the highest yet recorded and moreover reports from general practitioners indicated that the type of illness was severe. After only 9 notified cases last year a larger number of children may have been susceptible this year, or the virus may have been rather more invasive than usual.

#### POLIOMYELITIS.

The 6 cases of poliomyelitis notified during the year in children of school age were non-paralytic and the signs common to them all were fever, stiff and painful neck and pain or stiffness in either back or limbs. The cases were of a minor nature and complete recovery followed. The children affected came from six different schools and there was no traceable connection between the patients in time or place.



### IMMUNISATION.

Immunisation against Diphtheria is carried out under arrangements made by the Health Committee at special sessions at the Central Clinic.

Ideally each child is immunised before it reaches the age of 12 months and receives a re-inforcing dose of toxoid at the age of four and a half years prior to entering school.

During the year 17 courses of immunisation and 218 re-inforcing doses were administered at the clinic. In addition 8 courses of immunisation and 21 re-enforcing doses were administered by General Practitioners participating in the arrangements made by the Local Health Authority under the National Health Service Act, 1946.

Immunisation against whooping cough is also carried out at the Central Clinic and included in the above figures are children who have received a course of combined diphtheria-pertussis vaccine.

Of the population aged between 5 and 14+ years 20.68% are estimated to have maximum immunity against diphtheria as a result of inoculations given subsequent to 1950. A further 55.36% have been immunised at some earlier date but in these cases immunity has not been re-inforced by the administration of a booster dose in the last five years.

### TUBERCULOSIS.

As mentioned in last year's Annual Report, several cases of tuberculosis were found in children attending three Barrow schools and investigation was commenced immediately. Contacts of cases at the County Grammar School for Girls and at the Risedale County Secondary School were referred to the Chest Clinic, but in only one instance was a family contact found to be a source of infection.

Early this year the notification of an infectious case of pulmonary tuberculosis amongst the staff of the third school, Ramsden Special, led to the discovery of five cases amongst the school children. The staff case was dealt with in accordance with Ministry of Education Circular 248 and Administrative Memorandum 418. The school was temporarily closed to new admissions pending the execution of a thorough investigation. School Nurses visited the homes of all the children and sought parental consent for Mantoux testing, chest X-ray and, if found necessary, B.C.G. vaccination. These procedures were carried out by the staff of the Chest Clinic, with whom the staff of the Public Health Department worked in the closest co-operation. Except in the cases of 4 children kept under surveillance, all the chest X-rays were found to be satisfactory, and of 56 children and 6 teachers Mantoux tested, 17 children giving negative reactions were offered B.C.G. vaccination.

### IMMUNISATION AGAINST TUBERCULOSIS: B.C.G. VACCINATION.

During the year arrangements were made by the Local Health Authority in Barrow to offer B.C.G. vaccination against tuberculosis to children aged 13 years and under 14 years at the end of the current school year, whose parents or guardians gave written consent to this procedure and to the pre-vaccination and post-vaccination tests. Immunisation was carried out in schools to ensure minimum loss of school time and to obviate the need for children to travel.

An explanatory letter with consent form attached was prepared for all parents of children of the appropriate age, and head teachers, whose co-operation in the scheme was most enthusiastically given, arranged for the distribution of these letters to parents through the children concerned and for the collection of the returned consent forms duly completed and signed by the parents. For the guidance of teachers faced with parental enquiries concerning the scheme, written sheets of Questions and Answers were provided and all affected schools were personally visited by the Medical Officer of Health to ensure the smooth running of arrangements made and to advise upon problems specific to each school. Copies of the above literature were sent to hospital and family doctors, with whom liaison was maintained.

Immunisation did not commence until late in the year and the following figures are a survey of the work done.



Name of School	No. of children to whom facilities were offered			No. of children whose parents consented to the arrangements			No. whose susceptibility to tuberculosis was tested (Tuberculin tests)			Results read three days after testing						No. vaccinated (i.e. those whose reaction to the Tuberculin test was negative)		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Positive			Negative			Boys	Girls	Total
										Boys	Girls	Total	Boys	Girls	Total			
Alfred Barrow ....	103	98	201	91	79	170	90	76	166	14	17	31	74	57	131	74	57	131
Grammar ....	87	87	174	80	77	157	75	75	150	14	15	29	59	60	119	59	60	119
Technical ....	60	....	60	46	....	46	41	....	41	5	....	5	36	....	36	36	....	36
Holker County Secondary ....	103	....	103	87	....	87	72	....	72	12	....	12	51	....	51	51	....	51
Roa Island Special ....	6	10	16	6	5	11	6	5	11	2	2	4	4	3	7	4	3	7
	359	195	554	310	161	471	284	156	440	47	34	81	224	120	344	224	120	344

The results of the pre-vaccination Tuberculin Tests show that 19.1% (approximately 1 in 5) of the children had previously acquired a degree of natural immunity to tuberculosis.

The 344 children who were vaccinated were subsequently re-tested after an interval of between 6 and 8 weeks which occurred after the year end.



## SECTION 6.

## HANDICAPPED PUPILS.

The ascertainment of Handicapped Pupils was continued during the year.

The following table gives details of pupils ascertained and placed and shows the number of cases at the year end for whom it was impossible to secure places.

	(1) Blind (2) Part- ially sighted		(3) Deaf (4) Part- ially Deaf		(5) Deli- cate (6) Physi- cally handi- capped		(7) Ed- ucation- ally Sub- normal (8) Mal- adjusted		(9) Epi- leptic	TOTAL 1-9
In the calendar year :—	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
A. Handicapped Pupils <b>newly placed</b> in Spec- ial Schools or Homes	1	—	1	—	38	—	24	2	—	66
B. Handicapped Pupils <b>newly ascertained</b> as requiring education at Special Schools or boarding in Homes.	1	—	1	—	44*	—	27†	3‡	—	76

\*—36 included at A. †—22 included at A. ‡—2 included at A.

Number of children reported during the year :—

- (a) under Section 57(3) (excluding any returned under (b) ) .... —  
 (b) under Section 57(3) (relying on Section 57(4) ) .... —  
 (c) under Section 57(5) .... 10

Of the Education Act, 1944.

	(1) Blind (2) Part- ially sighted		(3) Deaf (4) Part- ially Deaf		(5) Delicate (6) Physi- cally handi- capped		(7) Ed- cation- ally Sub- normal (8) Mal- adjusted		(9) Epi- leptic	TOTAL 1-9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
On or about December 1st :—										
C. Number of Handi- capped Pupils from the area—										
(i) Attending Spec- ial Schools as										
(a) Day Pupils	—	—	—	—	118	1	98	—	—	217
(b) Boarding Pupils	3	—	5	1	—	4	8	6	2	29
(ii) Attending inde- pendent schools (under arrange- ments made by the Authority)	—	—	—	—	—	—	1	2	—	3
(iii) Boarded in Homes and not already included under (i) or (ii)	—	—	—	—	—	—	—	—	—	—
TOTAL C.	3	—	5	1	118	5	107	8	2	249
D. Number of Handi- capped Pupils being educated under ar- rangements made under Section 56 of the Education Act, 1944—										
(a) in hospitals	—	—	—	—	—	—	—	—	—	—
(b) elsewhere	—	—	—	—	—	—	—	—	—	—
E. Number of Handi- capped Pupils from the area requiring places in special schools (including any such unplaced children who are temporarily receive- ing home tuition) or whose parents have not yet con- sented to their attending a Special School) :—										
(i) Day	—	—	—	—	—	—	2	—	—	2
(ii) Boarding	—	—	1*	—	—	—	2	—	—	3

\*—Place promised for April, 1955.



## SECTION 7.

### PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT

In spite of a lot of arrears in emergency treatments pending from the previous year, 29 schools were inspected, and routine treatment for 23 schools was completed during 1955. The number of children inspected at schools during the year was 7,931, as compared with 785 in 1954. Such an extensive "Inspection and Routine Treatment Programme" is bound to decrease the demand for "Emergency Calls" in 1956.

It is gratifying to report that the provision of a third surgery and dental officer has now been sanctioned. From next year it is hoped to achieve the ideal of inspecting and treating every school at least once a year as a routine.

A new scheme of giving a talk in every school, soon after the Inspection, was introduced this year. The children were told how and when to brush their teeth, what foods to take for building strong teeth and what foods to avoid. These friendly talks to children and "Parent-Teacher Associations" have proved very successful.

The talks, being of an informal nature, have not only partly shaken off the fear of children in coming to the clinic, but have made the children's parents aware of the dire necessity of developing regular habits regarding the cleanliness of the mouth.

The "Emergency Treatment" has now been so regularised that in cases of complaints of "Acute Toothache" received by telephone before 10-0 a.m. the children receive treatment the same day, and in the case of written requests of parents the children receive treatment within 24 to 48 hours of the receipt of the request at the clinic.

In the inspected schools the rate of acceptance of treatments is very high indeed, and we are glad to note that parents are becoming very particular in seeing that children brush their teeth twice a day, and also in seeing that irregularities in their teeth are set right soon. "Too many sweets and hardly any brushing" has been the root cause of such extensive caries among the school children. A very earnest attempt has always been made to treat and fill the carious teeth, but still the number of extractions far exceeds the fillings because the parents bring the children only when severe toothache develops and then it is usually too late to save the teeth.

During the year 157 children received orthodontic treatment. A great number of cases of irregularities were treated by extraction of "over-retained" milk teeth.

Dentures have been supplied to 98 patients during the year, and 55 cases were referred to the North Lonsdale Hospital X-ray Department. The visiting Consultant Dental Surgeon and the staff of the X-ray Department have on all occasions been most helpful and co-operative.

It must be emphasised again that it is the duty of the parents to see that their children brush their teeth regularly twice a day to avoid such a massive destruction of their teeth.

## SECTION 8.

## MISCELLANEOUS.

## PHYSICAL TRAINING, SWIMMING AND ORGANISED GAMES.

The school curriculum includes periods of physical training and organised games, and, in all the secondary schools and some of the primary schools, attendance at the swimming baths.

All primary schools of the Authority are now equipped with outdoor climbing apparatus in school playgrounds, and all but three now have wire mesh baskets for easy carriage and quick dispersal of small apparatus. In the Summer Term 1955, two well-attended courses in Physical Education, Basic Movement and Modern Dance were arranged for infant school teachers of the Authority.

The hall of Walney County Secondary School has been equipped with a set of "Cave" Southampton Gymnastic apparatus, consisting of climbing ropes, wallbars, window ladders, and balance beams, and during the year the Barrow Schoolgirls' Games Association with senior and junior sections, and the Barrow Schools' Boxing Association, have been formed.

In the three school terms of 1955, a record number of swimming certificates were obtained by the pupils of primary and secondary schools, when 745 beginners, 88 proficiency, 897 distance and 39 speed certificates were awarded.

## PROVISION OF MILK AND MEALS.

(a) Average number of children receiving milk per school day	9306
(b) Number of $\frac{1}{2}$ rd. pint bottles of milk delivered and consumed	1852656
(c) Average number of children receiving meals per school day	2817
(d) Total number of meals supplied during the year	571362
(e) Number of centres supplying meals	29

## SECTION 9.

## STATISTICAL TABLES.

The following statistical returns for the year ended 31st December, 1955, required by the Ministry of Education, indicate the scope of the work of the School Health Service.



TABLE I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

## A PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed groups :

Entrants....	1185
Second Age Group	1003
Third Age Group	758
<b>Total</b>	<b>2946</b>
Number of other periodic inspections	1854
<b>Grand Total</b>	<b>4800</b>

## B. OTHER INSPECTIONS.

Number of special inspections	691
Number of re-inspections	609
<b>Total</b>	<b>1300</b>

## C. PUPILS FOUND TO REQUIRE TREATMENT.

Number of individual pupils found at periodic medical inspection to require treatment (excluding dental diseases and infestation with vermin) :

GROUP. (1)	For defective vision (excluding squint). (2)	For any of the other conditions recorded in Table IIA. (3)	Total individual pupils (4)
Entrants	2	305	216
Second Age Group	88	155	190
Third Age Group	82	86	144
<b>Total (prescribed groups)</b>	<b>172</b>	<b>546</b>	<b>550</b>
<b>Other Periodic Inspections</b>	<b>121</b>	<b>364</b>	<b>353</b>
<b>Grand Total</b>	<b>293</b>	<b>910</b>	<b>903</b>

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION  
IN THE YEAR ENDED 31st DECEMBER, 1955.

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of defects		No. of defects	
		Requiring treatment	Requiring to be kept under ob- servation but not requiring treatment	Requiring treatment	Requiring to be kept under ob- servation but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin ....	53	79	7	—
5	Eyes (a) Vision ....	293	280	246	4
	(b) Squint ....	44	72	21	—
	(c) Other ....	22	13	29	2
6	Ears (a) Hearing ....	8	19	4	1
	(b) Otitis Media ....	7	30	3	2
	(c) Other ....	4	17	2	1
7	Nose or Throat ....	74	424	18	7
8	Speech ....	14	41	9	4
9	Cervical Glands ....	4	136	2	1
10	Heart and Circulation	158	67	11	1
11	Lungs ....	21	93	10	2
12	Developmental—				
	(a) Hernia ....	4	6	—	—
	(b) Other ....	15	38	7	3
13	Orthopaedic—				
	(a) Posture ....	16	18	1	1
	(b) Flat Foot ....	74	41	7	1
	(c) Other ....	45	69	10	1
14	Nervous System—				
	(a) Epilepsy ....	1	10	—	—
	(b) Other ....	13	56	16	1
15	Psychological—				
	(a) Developmental	3	19	5	1
	(b) Stability	2	7	3	2
16	Other ....	22	48	31	2

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS  
INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups	Number of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
	(1)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants ....	1185	337	28.4	654	55.2	194	16.4
Second Age Group ....	1003	500	49.8	407	40.6	96	9.6
Third Age Group ....	758	381	50.3	306	40.4	71	9.3
Other Periodic Inspections	1854	670	36.1	870	46.9	314	17.0
Total ....	4800	1888	39.3	2237	46.6	675	14.1



TABLE III.

## INFESTATION WITH VERMIN.

(i) Total number of examinations in the schools by the school nurses or other authorised persons ....	33688
(Primary, 32798. Re-examinations, 890)	
(ii) Total number of individual pupils found to be infested ....	988
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	69
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—

TABLE IV.

## TREATMENT TABLES.

GROUP I—DISEASES OF THE SKIN (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE III).

						Number of Cases treated or under treatment during the year.	
						By the Authority	Otherwise
Ringworm (i) Scalp	....	....	....	....	....	—	1
(ii) Body	....	....	....	....	....	—	1
Scabies	....	....	....	....	....	4	—
Impetigo	....	....	....	....	....	38	2
Other Skin Diseases	....	....	....	....	....	339	49
Total	....	....	....	....	....	381	53

GROUP II—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

						Number of Cases dealt with.	
						By the Authority	Otherwise
External and other, excluding errors of refraction and squint	....	....	....	....	....	89	23
Errors of refraction (including squint)	....	....	....	....	....	*797	33
Total	....	....	....	....	....	886	56
Number of pupils for whom spectacles were							
(a) Prescribed	....	....	....	....	....	*677	Information
(b) Obtained	....	....	....	....	....	Information not available	not available

\* Including cases dealt with under arrangements with the Supplementary Ophthalmic Service.

## GROUP III—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of Cases treated.	
	By the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear ....	—	4
(b) for adenoids and chronic tonsillitis ....	—	247
(c) for other nose and throat conditions	—	15
Received other forms of treatment ....	22	9
Total ....	22	275

## GROUP IV—ORTHOPÆDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospital	21	
	By the Authority	Otherwise
(b) Number treated otherwise, e.g., in clinics or out-patient departments ....	179	31

## GROUP V—CHILD GUIDANCE TREATMENT.

	Number of Cases treated.	
	In the Authority's Child Guidance Clinic	Elsewhere
Number of pupils treated at Child Guidance Clinic	307	—

## GROUP VI—SPEECH THERAPY.

	Number of Cases treated.	
	By the Authority	Otherwise
Number of pupils treated by Speech Therapist ....	124	—

## GROUP VII—OTHER TREATMENT GIVEN.

	Number of Cases treated.	
	By the Authority	Otherwise
(a) Miscellaneous Minor Ailments ....	261	2045
(b) Others (Specify)		
U.V.R. ....	108	—
Verrucae ....	115	—
Infectious Diseases ....	—	774
Surgical ....	—	259
Medical ....	—	21
Paediatric ....	—	90
	484	3189



TABLE V.  
DENTAL INSPECTION AND TREATMENT.

TABLE V.  
DENTAL INSPECTION AND TREATMENT.

TABLE V.										
DENTAL INSPECTION AND TREATMENT.										
(1)	Number of pupils inspected by the Authority's Dental Officers									
	(a)	Periodic age groups	....	....	....	....	....	....	....	7941
	(b)	Specials	....	....	....	....	....	....	....	3081
	(c)	Total (1)	....	....	....	....	....	....	....	11022
(2)	Number found to require treatment									8867
(3)	Number referred for treatment									6973
(4)	Number actually treated....									5730
(5)	Attendances made by pupils for treatment									12954
(6)	Half days devoted to : Inspection									49½
		Treatment	....	....	....	....	....	....	....	823½
	Total (6)									873
(7)	Fillings	....	....	....	....	Permanent Teeth	....	....	....	4271
						Temporary Teeth	....	....	....	655
	Total (7)									4926
(8)	Number of teeth filled :					Permanent Teeth	....	....	....	4006
						Temporary Teeth	....	....	....	648
	Total (8)									4654
(9)	Extractions	....	....	....	Permanent Teeth	....	....	....	....	2021
					Temporary Teeth	....	....	....	....	8452
	Total (9)									10473
(10)	Administration of general anaesthetics for extraction									107½
(11)	Other Operations					Permanent Teeth	....	....	....	2319
						Temporary Teeth	....	....	....	410
	Total (11)									2729





