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BEDFORDSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE



REPORT

of the

Principal

SCHOOL MEDICAL OFFICER

for the Year ended

31st December, 1957



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TO THE CHAIRMAN AND MEMBERS OF THE BEDFORDSHIRE EDUCATION COMMITTEE

I beg to submit the Annual Report on the School Health Service for the year 1957.

There were no changes in the medical staff during the year. This is fortunate in a number of ways. There were changes, however, in the dental staff. The School Dental Service received a severe blow by the resignation of Mrs. Milnes in the middle of the year and Mr. Atkins at the end of the year. The latter will, however, do some sessional work for the Authority. The Principal School Dental Officer refers to the shortage of dentists in his Report which is found in the body of this Report. There were changes, too, in the Child Guidance Service. Dr. Nina Meyer, who had done much to consolidate the reputation of the Service, left at the beginning of the year. Dr. Judith Waterlow succeeded her at once, and later in the year an additional Psychiatrist, Dr. Dorothea Norman Jones, was appointed. At the beginning of the year, Miss G. Corsellis joined the Service as a Psychiatric Social Worker, following a vacancy which had existed for seven months. Miss Elizabeth Hitchfield, the Educational Psychologist, resigned at the end of August, and at the time of writing a successor has not been found. After a very short period of service Miss Leston, the Speech Therapist, resigned at the beginning of the year, being replaced in September by Miss Pentland. It was fortunate that, for the interregnum, it was possible to secure the services of Mrs. Daisy Perkins, a pioneer in Speech Therapy.

The Report follows the general pattern of its immediate predecessors, but as the year 1957 was the Jubilee Year of the School Health Service, Dr. H.S. Bury and Mr. F.R. Puckett, who have been responsible for the compilation of this Report, have added an interesting feature on the conditions in Bedfordshire schools fifty years ago. These have improved greatly, but other matters of importance have arisen to occupy the attention of the School Health Service. For example, the number of children now found with behaviour problems is much greater. It is virtually certain that the increase is real, and not due merely to better ascertainment.

An account of the Child Guidance Service appears in the text of this Report. Reference to the staffing changes is made above, where it is pointed out that the Educational Psychologist resigned after only a short period of service and no successor has yet been appointed. This is a great handicap to the remaining members of the service, who have a difficult task to perform even in normal circumstances, and who have asked repeatedly that steps shall be taken to fill the vacancy. In last year's Report I set out Recommendation 18 of the Report of the Committee on Maladjusted Children (1955). It reads:- "Local Education Authorities should plan on the assumption that a Child Guidance team, consisting of one full-time Psychiatrist, two Educational Psychologists, and three Psychiatric Social Workers, can adequately serve 45,000 children". The school population of Bedfordshire is now 50,000. The professional staff comprises:- (a) two Psychiatrists (part-time) provided by the Regional Hospital Board, and (b) two Psychiatric Social Workers, one of whom was recently appointed. There is no Educational Psychologist.

Particulars regarding Infectious Diseases are given in the text. The Dysentery figures are disturbing. Attempts are being made to improve standards of hygiene, particularly in primary schools and a close watch is being kept on food-handlers. Measles continued to be by far the commonest of the notifiable infectious diseases. Fortunately most cases are mild. I regret to have to report the death from Diphtheria of a non-immunised pre-school child who had only been in this Country a very short time. Before this there had been no death from

Diphtheria for ten years, and there had been no case for five years.

The Vaccination and Immunisation schemes continued. Vaccination against Poliomyelitis is now available for all children under the age of 15 years. Much has been done, but much remains to be done. B.C.G. vaccination has commenced. The cumulative effect of the several immunisation procedures has been to slow down certain routine work, notwithstanding the employment of part-time medical officers. It may be necessary soon to review the medical establishment.

I desire to thank my professional colleagues, the teachers, and the clerical staff for their most helpful co-operation.

To the members of the Education Committee I desire to tender, on behalf of the School Health Department, our most grateful thanks for their continued support and encouragement.

I have the honour to be,
Your obedient servant,

W.C.V. BROTHWOOD,
Principal School Medical Officer.

PHOENIX CHAMBERS,
HIGH STREET,
BEDFORD.

April, 1958.

STAFF 1957

Principal School Medical Officer

W.C.V. Brothwood, M.A., M.D., D.P.H.

Deputy Principal School Medical Officer

C.A. Harvey, M.B., Ch.B., D.P.H.

School Medical Officers

Brenda N. Akeroyd, M.R.C.S., L.R.C.P.
 Elizabeth E. Brown, M.B., Ch.B., B.Hy., D.P.H.
 H.S. Bury, M.R.C.S., L.R.C.P., D.P.H.
 Dora S. James, M.B., B.S., D.Obst.R.C.O.G.
 Irene E. Sandford, M.R.C.S., L.R.C.P., D.P.H.
 Cicely Steer, M.B., B.S., D.C.H.

Principal School Dental Officer

R.B.T. Dinsdale, L.D.S.

School Dental Officers

A.P. Atkins, L.D.S.
 F. Brabington-Perry, L.D.S. (part-time)
 A.A. Gardner, B.D.S.
 P.A. McGuckin, L.D.S. (part-time)
 Lily T. Milnes, L.D.S. (resigned 30.6.57)
 H.H. Revill, L.D.S.

Psychiatrists (part-time)

Nina A. Meyer, M.A., B.M., B.Ch., D.P.H.
 (resigned 10.1.57)
 Dorothea Norman Jones, M.A., M.B., B.Chir., D.P.H., D.P.M.
 (appointed 19.9.57)
 Judith Waterlow, M.B., B.S.
 (appointed 7.1.57)

Educational Psychologist

Elizabeth M. Hitchfield, M.A., Dip.Ed.
 (resigned 31.8.57)

Psychiatric Social Worker

Gillian Corsellis (appointed 7.1.57)

Orthoptist

Elizabeth C. Wild, D.B.O.S.

Speech Therapist

Diane E. Leston, L.C.S.T. (resigned 10.2.57)
 Bridget A. Pentland, L.C.S.T. (appointed 2.9.57)

THE SCHOOL HEALTH SERVICE

The year 1957 marked the Jubilee of what is now called the School Health Service, and this report affords an opportunity of looking back and assessing the changes which have occurred during the half-century since the foundation of the Service.

The Education Administrative Provisions Act, 1907, gave local education authorities power to provide for the medical inspection of children at the time of or as soon as possible after their admission to a public elementary school.

The Education Act, 1918, made that power a duty, authorities being then obliged to make arrangements for attending to the health and physical condition of the children, as well as for providing inspection.

There appear to have been two main reasons for the establishment of medical inspection of schoolchildren at this time. One was the reports from teachers indicating that many children failed to reap the full advantages of the system of free national education because of physical disabilities, and the other was found in the report of the Interdepartmental Committee on Physical Deterioration which was set up to investigate reasons for the fact that out of every five men wanting to enlist in the army at the time of the Boer War, only two remained in the army as effective soldiers at the end of two years due to ill-health. This Report pointed to the fact that the poor state of health of the population of this country had its origin in the neglect of the health of the children at the time, a state of affairs which to some extent at least was considered preventable.

The first Annual Report of the School Medical Officer of Bedfordshire was for the year 1908, and it was presented to the Education Committee in February 1909 by Professor Henry Kenwood, who was then Medical Officer of Health to the Bedfordshire County Council, and who was also appointed as School Medical Officer. Dr. W.J. Butcher, who was appointed as Assistant County Medical Officer, and carried out most of the school work, compiled the first report, and in it he mentions that the first step taken towards the organisation of school medical inspection in the County of Bedford was a conference of teachers, who were asked how the service could be conducted with the minimum of inconvenience to the ordinary school routine.

The teachers were very co-operative, and they expressed the view that there were many children in the schools about whom they would be greatly relieved to have a medical opinion. It may be of interest to readers to see what the report had to say about such matters as subnormal nutrition, clothing and cleanliness at that time. Extracts from the Report of 1908 are given below.

Subnormal Nutrition

The cases of subnormal nutrition in many of the children examined were said to be :-

- "(1) Inherent Lack of Vitality. A child, for various reasons which need not be stated, may start life with an insufficient capital of vitality. As a rule in these cases death in infancy results, but not always, and when the latter happens the child passes through infancy ever ailing, and eventually reaches school age as a delicate child. Not infrequently has such a history been retailed to me. 'He has never been like other children since birth, and though he has had more care and attention and doctoring than all my others he is never really well.' These words represent the account given by the mother. Such a

child is thin, pale, anaemic, and has 'delicate' written all over his or her face. The cause is probably associated with the health and conditions of the mother prior to birth, and is not one that can come within the scope of school inspection for removal, and so here I leave it.

"(2) Insufficient Feeding. This cause is due to an obvious one and needs no explanation.

"(3) Improper Feeding. The ignorance of parents in this respect is astonishing; such income as they have to lay out on food is expended with no thought (probably because of no knowledge) of what forms of food will provide the best nourishment. I have been struck by the small amount of milk many children get in the country. In some country districts where there is a ready town market at hand I am informed it is difficult to purchase milk, even if able and willing. I have often been told by teachers after examining a 'Below Normal' child that bread and lard for breakfast, dinner, and tea, was probably the only diet it got. Accurate statistics on the question of diet are not easily obtainable during medical inspection. I have largely refrained from inquiries lest apparent curiosity might ruffle the parents, but when I have felt it safe to ask such questions my suspicions have always been confirmed by the admissions obtained.

"(4) Mal-Assimilation of Food. This is due to an abnormal state of health. This cause is often associated with cause (3), thereby accentuating the trouble, for the state of digestion in such children requires more special care than usual in the selection of food. In these cases (generally anaemia and debility), parents have been recommended to seek medical advice.

"(5) Unhealthy Home Conditions. Often in the 'Below Normal' cases the general appearance of the child leaves no doubt that neglect is the habit of its parents and when this is the case we may be sure that the home conditions are bad.

"(6) Insufficient Sleep. It is impossible to furnish proof in support of this cause, but I am convinced from the inquiries I have made that the majority of school-children obtain an inadequate amount of sleep, and that this is often an important, if not the only factor, in maintaining a below-normal state of nutrition.

"(7) Work done outside School Hours. In a few instances there has been reason to suspect this as a cause."

In the year 1908, 2,680 children were examined, of whom 2,191 were normal or above normal, and 488 were below normal or worse, i.e., 18.2 per cent, the comparable figure for 1956 being 2.7 per cent.

Clothing

On the question of clothing, Dr. Butcher commented as follows :-

" The clothing and footgear of each child inspected has been classified as good, average or bad. This record has been made by the head teacher in accordance with what is the usual state of the child in this particular. If the note had been made by the Medical Inspector at the time of inspection, the figures would have conveyed a very incorrect impression, as most children have their best clothing on when inspected.

" Out of the 2,680 children examined, 153 were described as bad. In the very worst of these, usually the cases of general neglect, the clothing and footgear have often been pitiable. No communications whatever have been made to parents in regard to insufficiency of clothing. When such insufficiency has been great enough to expose parts of the body, a private communication has been made to the Inspector of the Society for the Prevention of Cruelty to Children."

Cleanliness

Of the 2,680 children inspected in 1908 by the School Medical Officer, 2,289 were described as clean, 278 as somewhat dirty, and 113 as dirty. This assessment was based on reports from the head teacher on the day-to-day condition of the child, and not on the rather better state which might be expected on the day of a medical inspection of which notice had been given to the parents.

The School Medical Officer made the comment that it was evident that the very large bulk of children attending schools in the County were clean, although medical inspection had not been long in operation. Many parents of clean children had expressed their hope that one result of it might be to lessen the number of dirty and verminous scholars, and in that year the Education Committee issued the following letter for distribution to all parents :-

"

Cleanliness of Schoolchildren

The Education Committee at the commencement of another holiday, desire to again impress upon parents, that children attending Public Elementary Schools are required to present themselves daily in a clean and satisfactory state. They are happy to be able to say that the great majority of children do so present themselves at the present time, but there are a few who still come with evidence of vermin about them, that is to say, with nits in their hair or with flea bites on their skin. The Education Committee wish the parents of these children clearly to know that they have again instructed their Head Teachers to carry out their Regulations in regard to such children, and that these Regulations will be rigorously enforced.

" The Committee regret that during the past term a few Head Teachers have been subjected to abuse from parents after their attention has been called to the condition of their children. Such abuse is grossly unjust, as the teacher is only doing what the Committee require to be done.

" The Committee earnestly hope that the parents who send their children to school in a clean state and who constitute such a very large majority, will by every influence they can bring to bear on the others, support both the committee and their Head Teachers in their efforts.

" The Committee sincerely trust that when the School re-opens in January, every child will return in a perfectly satisfactory condition."

In 1957, only 0.5 per cent of children were found to be verminous, and children with dirty bodies or dirty clothes were very rarely seen.

Environmental Hygiene

In the 1909 report there is a general review of the hygienic conditions in schools. It deals with such matters as ventilation, lighting, heating and sanitation, including observations on the type and condition of sanitary conveniences and lavatories, water supply

for washing and drinking purposes, and the cleanliness of schoolrooms and cloakrooms, arrangements for drying children's cloaks and boots, and the relation of the general arrangement of the school to the health of the children.

The review covered 138 schools, comprising 180 departments, 32 of which were provided with water closets, 42 with earth closets, 64 with pail closets, and 42 with privies. At the present time, out of a total of 174 school departments, 114 have water closets, and the rest have pail closets, and by 1959 it is expected that 11 more schools will change from pail closets to water closets.

The findings at school medical inspections are very different today from those which were common even 25 years ago. Malnutrition and various septic conditions such as impetigo, scabies, running ears, and blepharitis, which were once common findings, are now rarely seen. Defects resulting from faulty nourishment, like rickets, or neglect to obtain early treatment, like talipes, the results of tuberculous infection, and rheumatic infection, are now rarities, and the school clinics which were set up to provide treatment for minor ailments, which were once very crowded, are now virtually empty, and used mainly for the carrying out of special examinations and immunisations.

One of the most striking facts is that children of today at the age of ten are on the average 3" taller and 4-lbs. heavier than their parents were at the same age.

GENERAL STATISTICS

The area of the Administrative County of Bedford is 302,940 acres. Schemes of Divisional Administration operated in the Boroughs of Bedford and Luton.

According to the Registrar General, the estimated home populations of the Administrative County and these Boroughs at the 30th June, 1957, were as follows :-

County Area	162,020
Bedford Borough	57,580
Luton Borough	115,900
Administrative County	<u>335,500</u>

The following statement shows the number of schools in the County, excluding Bedford and Luton, on the 31st December, 1957, and the number of children on the rolls.

<u>Type of School</u>	<u>No. of Schools</u>	<u>No. on Roll</u>
Nursery	2	114
Primary	129	16,371
Secondary	13	4,873
Technical & Grammar	4	1,975
Special	1	105
Totals	<u>149</u>	<u>23,438</u>

MEDICAL INSPECTION AND TREATMENT

The arrangements for the medical inspection of pupils attending maintained schools in Bedfordshire are in accordance with the School Health Service and Handicapped Pupils Regulations, 1953.

Every pupil is examined three times during the period of compulsory school life. In Bedfordshire these examinations are held on entry to school as an infant, during the last year in a primary school or the first year in a senior school, and during the last year at school. In addition to these groups, any child the head teacher or parents wish to bring forward for special examination, all boarded-out, employed, and handicapped pupils, and all children who were referred at the last medical inspection as needing treatment or observation, are examined.

In all new schools suitable accommodation is provided for the inspection and treatment of pupils by doctors, dentists and nurses. In some of the old schools, however, there is no suitable place for the medical inspection to be held, and it is necessary to hire premises for the purpose.

Each School Medical Officer is assisted by a Health Visitor/School Nurse. The medical records of pupils are kept at schools in locked metal containers. After medical inspection the cards are brought into the central office where appropriate action is taken to secure treatment for children with defects. Such treatment may take the form of reference to the family doctor, attendance at one of the Authority's Clinics, or reference to Hospital Out-Patient Departments after consultation with the family doctor. Appointments are made with ophthalmologists for children with eye defects.

While the cards are in the central office statistical information required by the Ministry of Education on medical inspection and treatment of schoolchildren is collated.

When the cards are returned to the school a list is enclosed of those children who have been referred for treatment or observation so that they may be seen again at the next inspection.

Parents are encouraged to attend at the inspection of their children, and during 1957, 66 per cent attended.

Throughout the County the teachers have, as in other years, given every help to the School Medical Officers in the conduct of medical inspections. Their work in this connection is very much appreciated by the department.

School Nursing Service

In some parts of the County the School Nursing Service is carried out by Health Visitor/School Nurses. In Bedford and Dunstable full-time School Nurses are employed and two part-time Clinic Nurses have been appointed to assist at School Clinics, Immunisation Clinics, School Medical Inspections, and Hygiene Surveys.

The School Nurse carries out at the beginning of each term a survey of the children attending school. The object of this survey is primarily concerned with the detection at an early stage of deviations from normal health. Observations are made of posture, gait, skin condition, unusual pallor, listlessness, anxiety, as well as suitability of clothing and footwear and general cleanliness.

This routine survey is also used to promote health education; it provides opportunities for informal health teaching to individuals and to groups.

The incidence of verminous conditions is low in this county, but there still exists a hard core of offending families who constitute a perpetual challenge to the staff. A great deal of time and energy is spent in trying to demonstrate and teach treatment and preventive measures to individual families in their own homes and in the clinics. It is hoped that by these methods the children will learn to reject infestation and prevent it when they themselves have families. Repeated cleansing of families at cleansing stations, while sometimes necessary, is not the ideal solution to this problem.

The School Nurse attends at the periodic school medical inspections, assisting the doctor by her knowledge of the home circumstances, and helping the mother to understand any instructions given to her. She visits the homes when necessary to help the mother by advising her on preventive measures or the means of obtaining any necessary treatment in co-operation with the family doctor. She acts as a link between the teaching staff and the homes of the children, and the mutual understanding that ensues is of benefit in dealing with the special needs of any individual child.

MEDICAL INSPECTION RETURNS

The following statement gives details of the age groups inspected and the number of pupils examined in each :-

Entrants	2,648
Second age group	2,518
Third age group	<u>1,358</u>
Total	6,524
No. of Special inspections	<u>2,321</u>
Grand Total	<u><u>8,845</u></u>

TABLE I -- CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE ROUTINE AGE GROUPS, 1957

Age Groups Inspected (1)	Number of Pupils Inspected (2)	Satisfactory		Unsatisfactory	
		No. (3)	% of Col. (2) (4)	No. (5)	% of Col. (2) (6)
Entrants ...	2,648	2,458	92.82	190	7.18
Second age group	2,518	2,480	98.50	38	1.50
Third age group	1,358	1,348	99.26	10	0.74
Totals ...	6,524	6,286	96.35	238	3.65

Compared with 1956, when the figure was 2.7 per cent, there is a rise of nearly one per cent in pupils considered to be in an unsatisfactory physical condition. It must be borne in mind that the figures are composite, being derived from the returns of several medical officers.

TABLE II -- NUMBER OF DEFECTS FOUND TO REQUIRE TREATMENT OR OBSERVATION
AT MEDICAL INSPECTIONS DURING 1957

A -- PERIODIC INSPECTIONS

Defect or Disease	PERIODIC INSPECTIONS				TOTAL (Including all other age groups inspected)	
	Entrants		Leavers		Requir- ing Treat- ment	Requir- ing Obser- vation
	Requir- ing Treat- ment	Requir- ing Obser- vation	Requir- ing Treat- ment	Requir- ing Obser- vation		
Skin	2	32	--	14	5	72
Eyes --						
(a) Vision ...	93	422	83	64	364	679
(b) Squint ...	18	66	2	2	25	89
(c) Other ...	2	10	1	4	4	30
Ears --						
(a) Hearing ...	4	60	4	12	15	108
(b) Otitis Media	--	14	1	2	3	23
(c) Other ...	--	13	2	3	2	20
Nose and Throat	65	346	9	16	89	514
Speech	9	65	2	4	15	80
Lymphatic Glands	16	260	--	10	22	413
Heart	--	14	2	5	2	34
Lungs	5	99	2	15	7	176
Developmental --						
(a) Hernia ...	--	7	--	2	3	14
(b) Other ...	--	37	--	1	2	63
Orthopaedic --						
(a) Posture ...	3	25	1	16	14	115
(b) Feet ...	3	73	5	26	16	132
(c) Other ...	10	198	3	23	18	298
Nervous System --						
(a) Epilepsy ...	--	4	--	--	--	9
(b) Other ...	--	5	--	--	--	11
Psychological --						
(a) Development	7	31	1	10	12	65
(b) Stability	1	74	2	6	6	119
Abdomen	--	9	1	3	1	22
Other	--	27	--	18	4	70
Totals	238	1,891	121	256	629	3,156

TABLE II (Continued)

B -- SPECIAL INSPECTIONS

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring Treatment	Requiring Observation
Skin	1	36
Eyes --		
(a) Vision ...	189	294
(b) Squint ...	20	76
(c) Other ...	2	10
Ears --		
(a) Hearing ...	9	44
(b) Otitis Media	2	17
(c) Other ...	--	7
Nose and Throat	57	255
Speech	17	35
Lymphatic Glands	11	194
Heart	--	26
Lungs	3	97
Developmental --		
(a) Hernia ...	1	6
(b) Other ...	3	30
Orthopaedic --		
(a) Posture ...	3	32
(b) Feet ...	8	41
(c) Other ...	4	84
Nervous System --		
(a) Epilepsy ...	--	14
(b) Other ...	--	4
Psychological --		
(a) Development	12	74
(b) Stability	2	68
Abdomen	--	11
Other	2	40
Totals ...	346	1,495

The number of individual children found to require treatment at periodic and special inspections was 871.

CLEANLINESS OF HEAD AND BODY

Nowadays the children in each maintained school are inspected by the school nurse at least once a term. The majority of the children inspected are found to be clean. In 1957 there were 113 individual pupils found unclean, representing 0.5 per cent of the total school population.

It is regrettably still sometimes necessary in the case of the few persistent offenders to issue Statutory Cleansing Notices and Cleansing Orders. Two Cleansing Notices, but no Cleansing Orders,

were issued during 1957 under Section 54(2) of the Education Act, 1944.

The following table gives details of the Cleanliness Inspections carried out by the School Nurses during the years 1955 to 1957.

TABLE III -- DETAILS OF CLEANLINESS INSPECTIONS CARRIED OUT BY THE SCHOOL NURSES DURING THE YEARS 1955 TO 1957

	1955	1956	1957
Number of examinations	64,899	65,008	59,107
Number of instances of uncleanness ...	170	216	135
Number of individual pupils found unclean	137	133	113
Percentage of individual pupils found unclean of total school population ...	0.6	0.6	0.5
Number of visits to schools by school nurses for cleanliness inspections ...	509	483	444

INFECTIOUS DISEASES

TABLE IV -- NUMBER OF CASES OF INFECTIOUS DISEASE IN CHILDREN AGED 5 - 14 YEARS NOTIFIED AND CONFIRMED DURING 1957

	Bedford Borough		Luton Borough		Remainder of County		Totals	
	M.	F.	M.	F.	M.	F.	M.	F.
Scarlet Fever	27	26	8	5	19	12	54	43
Whooping Cough	8	6	39	37	87	80	134	123
Poliomyelitis	1	1	--	--	--	3	1	4
Measles	265	266	178	178	500	477	943	921
Diphtheria [#]	--	--	--	--	--	--	--	--
Acute Pneumonia	5	3	1	3	6	15	12	21
Erysipelas	--	--	--	--	1	--	1	--
Acute Infective Encephalitis	--	--	--	--	--	--	--	--
Dysentery	34	24	104	105	28	24	166	153
Enteric or Typhoid Fever	--	--	--	--	--	--	--	--
Paratyphoid	1	--	--	--	--	--	1	--
Meningococcal Infection	--	--	--	--	--	1	--	1
Food Poisoning	1	--	3	--	3	2	7	2

[#]There was one death from diphtheria in a pre-school child.

Poliomyelitis

During 1957 there were five cases of poliomyelitis notified among schoolchildren in Bedfordshire, excluding Luton, four girls and one boy. All but one girl suffered some degree of paralysis. In three children

it was severe. Two of these will almost certainly need to be educated as physically handicapped pupils.

Vaccination against Poliomyelitis

Vaccination against poliomyelitis continued during the year. In addition to the 11,970 children between the ages of two and nine years who registered under the first scheme, a further 3,201 were registered in the subsequent registration of children between the ages of six months and two years, making the total number of children registered in these groups 15,171.

At the end of the year, 10,271 of these children had received two injections and 1,005 had received one injection.

On the 19th November, 1957, Ministry of Health Circular 16/57 was received. It extended the age-group of children eligible for vaccination to include all children under fifteen years of age, in addition to bringing in for the first time expectant mothers and other persons at special risk. This brought within the scheme an additional 34,000 children and about 5,000 expectant mothers, and actually, on the 31st December, 1957, a total of 24,044 children were registered.

It was expected that large quantities of the Salk-type vaccine would be imported from Canada and the United States during the first quarter of 1958 and the Minister asked that the use of this and British vaccine should be given priority over routine work. Expectations unfortunately have not so far been realised but it still may be that some School Medical Inspection work will have to be postponed as a result of increased vaccination activity in the near future and later in the year. The imported vaccine is subject to the same safety tests as the British vaccine before distribution. It is not claimed that the vaccines afford complete protection, but they substantially reduce the risk of getting the disease and of having a serious attack if the disease is acquired.

B.C.G. Vaccination of Schoolchildren

Last year it was reported that the Health Committee had decided to introduce a scheme of vaccination against tuberculosis of school leavers by the use of B.C.G. During the latter part of the year a start was made on this scheme. Invitations were sent to the parents of 13-year-old schoolchildren attending schools in the County.

At the end of the year, out of an estimated population of about 4,500 in this age-group, consents were received in respect of 3,054 children. Testing and vaccination of these children were undertaken in Luton during the year, and in the other Divisions the work is commencing.

The experience in Luton was that out of 1,258 children tested, 140 were found to be positive, showing that they had already acquired a natural resistance through contact with the disease. The remaining 1,118 children received protection with the B.C.G. vaccine.

Diphtheria

Most children when they first attend School have already been immunised against diphtheria by the Child Welfare Clinic Medical Officer or family doctor, and are given a booster dose during their first year at school. The parents of the few who have not received primary protection are invited to have it done at this stage. *Child*

ren are offered further booster doses at nine years and thirteen years.

During 1957, the number of schoolchildren immunised for the first time was 565. The number of children who received booster injections was 4,786. These figures refer to the whole Administrative County.

During 1957, there was a severe reminder of the importance of diphtheria immunisation when a fatal case occurred in the Borough of Bedford in a non-immunised pre-school child who had recently entered the country.

Food Poisoning

None of the cases of food poisoning which occurred in children of school age during the year was associated with the schools, the infection in each case having been acquired outside the schools.

Influenza

The epidemic of influenza which affected this country in the second half of the year is believed to have started in Hong Kong in November, 1956. It travelled through a large part of South East Asia. In general, the form of influenza last year was milder than the type usually experienced in this country. The Asian-type virus strain was recovered from a number of patients.

So far as the schools in the Bedford County area were concerned, it was not found necessary to close any, although most were affected to a greater or lesser degree with both pupils and staff suffering from the infection.

The following statement shows how the percentage of attendance for the Autumn term 1957 fell in comparison with the percentage for the Autumn term 1956. The figures relate to the County, excluding Bedford and Luton.

		Autumn Term	
		1956	1957
Primary	...	92.6%	87.2%
Secondary	...	93.5%	86.5%

Dysentery

There was a very marked increase in the number of notified cases of dysentery during 1957, and even these figures do not give the full picture, as many cases go unnotified. A particularly widespread outbreak was centred in the Infants' Department of Ampthill County Primary School during March, 1957, during which time every child in the Department was affected.

Shigella Sonnei, which generally causes mild illness, although it can be dangerous to young infants and the old and infirm, has a high nuisance value in schools and institutions.

The spread of this disease is notoriously difficult to control, as many cases are so mild that they do not come to notice, and during an outbreak many symptomless carriers are present.

The incidence of this disease has been increasing rapidly over the last few years throughout the country, and experience in this Authority's area is not exceptional. The mechanism of infection presents no complications, the organism passing directly or indirectly

from the faeces of the infected individual to the mouth of another, and it should therefore theoretically be very easy to prevent the spread of infection by insistence on a higher standard of personal hygiene. Direct contact through infected hands is of particular importance, especially in children, and indirect contact through lavatory seats, chain handles, taps, crockery, and door handles, are also possible causes of spread. Infected food handlers may contaminate food, but there is no evidence that the disease can be transmitted by water.

It is becoming increasingly apparent that primary schools, particularly infant departments, are of great importance in the dissemination of the infection, and it is most important that the standards of hygiene in school buildings should be high, and that good personal hygiene should be taught to the children from an early age.

Towards the latter end of the year, the picture was complicated by the appearance of another infection, with similar symptoms, of stomach-ache, vomiting and diarrhoea, and a particularly severe form of this disease was prevalent in the village of Cranfield at the end of the year, which necessitated a premature closure of Cranfield County Primary School at the end of the Christmas term. The evidence so far available suggests that this is a virus infection, and its occurrence has been noticed with increasing frequency all over the country in the last few years. It is fortunately generally extremely mild, and is often referred to as "epidemic winter vomiting". Some of the cases in Cranfield this year, however, were more severe than have previously been seen. Extensive investigations failed to reveal any special reason for the spread of the infection in Cranfield.

Neighbouring authorities have reported similar outbreaks.

Tuberculosis

For the third successive year there have been no deaths from tuberculosis below the age of 15 years and although the number of cases notified are a little higher than last year, many of these cases are very mild infections and the prognosis in almost all cases is very good.

TABLE V -- NUMBER OF CHILDREN UNDER THE AGE OF 15 YEARS NOTIFIED FOR THE FIRST TIME DURING 1957 AS SUFFERING FROM TUBERCULOSIS, RESPIRATORY AND NON-RESPIRATORY.

District	Respiratory			Non-respiratory		
	Boys	Girls	Total	Boys	Girls	Total
Bedford Borough ...	3	6	9	--	1	1
Luton Borough ...	7	7	14	--	--	--
Remainder of County	2	2	4	1	1	2
Totals ...	12	15	27	1	2	3

TABLE VI -- NUMBER OF CHILDREN UNDER THE AGE OF 15 YEARS ON THE TUBERCULOSIS REGISTER AT 31ST DECEMBER, 1957.

District	Respiratory			Non-respiratory		
	Boys	Girls	Total	Boys	Girls	Total
Bedford Borough ...	14	22	36	6	9	15
Luton Borough ...	46	25	71	4	7	11
Remainder of County	29	30	59	16	20	36
Totals ...	89	77	166	26	36	62

TREATMENT OF DEFECTS

Minor Ailments

During the year Minor Ailments Clinics were held at Dunstable and Leighton Buzzard. These clinics opened on two mornings a week, on one of which a medical officer attended.

The figures for the past ten years of the number of children who attended the clinics are given below.

1948 ...	723	1953 ...	532
1949 ...	690	1954 ...	527
1950 ...	695	1955 ...	418
1951 ...	963	1956 ...	323
1952 ...	653	1957 ...	243

The steady decline since 1951 in the number of children who received treatment is due to the fact that some of the more common minor ailments, e.g. impetigo, are now rarely seen.

The clinics are also used as places to carry out special examinations, e.g. children examined at the request of the Courts, examinations of children who are employed out of school hours and examinations under Section 34 of the Education Act, 1944.

TABLE VII -- TREATMENT OF MINOR AILMENTS AT SCHOOL CLINICS DURING 1957

Defect	Number Treated
Skin --	
Ringworm (body)	--
Scabies	--
Impetigo	--
Eye Diseases --	
(External and other, but excluding errors of refraction, squint and cases admitted to hospital) ...	--
Ear Defects	--
Miscellaneous --	
(e.g. minor injuries, bruises, sores, chilblains, etc.)	243
Total	243
Total number of attendances	285

Ophthalmic Treatment

During the year, 657 appointments were made through the School Health Service for schoolchildren in the County area to be examined by the Ophthalmic Surgeons for errors of refraction, squints and other eye conditions. The following statement, which is for the whole Administrative County, gives details of the number of cases known to have been dealt with by the Authority. The figures include children seen by Dr. Bentley and Dr. Wood for the County Area.

		<u>Number of Cases seen by Ophthalmic Surgeons</u>
External and other, excluding errors of refraction and squint		--
Errors of refraction, including squint	... ..	1,541
Total	...	<u>1,541</u>
Number of pupils for whom spectacles were prescribed	...	1,174

Replacement or Repair of Glasses for Schoolchildren

The Head Teachers and School Nurses are issued with forms which they can give to the parents when a child's glasses need repair or replacement. The form requires a brief statement signed by the parent, guardian or other person having charge of the pupil, of the cause of loss or damage. When the form is completed by an authorised officer of the Local Education Authority, i.e. Medical Officer, Head Teacher, School Nurse, the optician is authorised to proceed with the repair or replacement of the glasses without seeking the prior approval of the Ophthalmic Services Committee and without the payment of a deposit by the parent. When a school child breaks his glasses, therefore, this service enables repair or replacement to be carried out quickly.

Orthoptic Treatment

The work of the department continued satisfactorily during the year. Six sessions were held weekly at St. Peter's, Bedford, and four at Dallow Road, Luton, where one session was reserved for children not resident in Luton itself. Attendances were good except during school holidays when they tended to decline, especially in the summer.

Four parents refused permission for operation, and the children were subsequently discharged.

The following statement gives details of the year's work :-

Number of tests	... ..	811
Number of treatments given	... ..	199
New cases	... ..	68
Number of children treated	... ..	46
Total number of attendances	... ..	1,074
Discharges :-		
Cured or improved	... ..	43
No progress	... ..	1
Unsuitable	... ..	2
Left district	... ..	2
Good cosmetic result	... ..	7
Refused operation	... ..	4
Failed to attend	... ..	13

Speech Therapy

Clinic sessions were held weekly as follows :-

Bedford, St. Peter's	Four sessions
Bedford, Barford Avenue	One session
Dunstable, Kingsway	Two sessions
Biggleswade, The Lawns	Two sessions

One session weekly was devoted to domiciliary and school visits.

The clinic re-opened fully on the 2nd September, 1957. Former patients and those on the waiting list were interviewed for assessment. Of this group, six were discharged, six deferred, and one was transferred. Forty-nine were accepted for treatment. During the last quarter, 13 other children were selected for treatment.

A number of Borough and County schools have been visited in order to discuss children with speech problems.

Visits will be made to as many schools as possible in the coming year.

There is now a waiting list for attendance at the Bedford and Biggleswade clinics.

TABLE VIII --- NUMBER OF CHILDREN TREATED FOR SPEECH DEFECTS DURING 1957 (SEPTEMBER - DECEMBER), TOGETHER WITH RESULTS OF TREATMENT

Condition	No. Treated	No. Discharged	Condition on Discharge		
			Cured	Improved	No Change
Dyslalia (with no mental retardation)	34	3	3	--	--
Dyslalia (with mental retardation)	8	1	--	--	1
Stammer	18	2	--	2	--
Partially deaf	2	--	--	--	--

Minor Orthopaedic Defects

The Bedford College of Physical Education takes schoolchildren for remedial exercises and a Clinic is held at the College on Monday and Thursday afternoon.

Corrective exercises are given for all postural defects, breathing exercises for asthma, and other conditions. The children are also given exercises which they can do at home during the school holidays.

The following statement gives the number of children referred and the condition for which they were referred :-

Poor posture	9
Flat feet	4
Genuity and knock knees	1
Mild scoliosis	2
Flat feet, poor chest development	1
Deformity of chest wall	3

Diseases and Defects of the Ear, Nose and Throat

The following statement gives details of the number of children of school age in the County who received operative treatment for diseases and defects of the Ear, Nose and Throat at the Bedford and Luton General Hospitals during 1957.

<u>Received Operative Treatment</u>	<u>Bedford Hospital</u>	<u>Luton and Dunstable Hospital</u>
(a) for diseases of the ear	2	9
(b) for adenoids and chronic tonsillitis	350	435
(c) for other nose and throat conditions	29	--
(d) received other forms of treatment	8	--
Totals ...	<u>389</u>	<u>444</u>

Treatment of Other Defects

Where children need special investigation, other than ophthalmic examinations, they are referred to hospital out-patient departments only after prior consultation with the family doctor, upon whom rests the responsibility for general medical care.

School Clinics

Particulars are given below of Clinics held for children in the County, excluding the Boroughs of Bedford and Luton.

<u>Name and Address</u>	<u>Type of Treatment provided</u>	<u>Frequency of Session</u>
St. Peter's Clinic, 3 St. Peter's street, Bedford	Child Guidance Dental (2 surgeries)* Orthoptic Speech Therapy Sunlight	4 sessions weekly Sessions as required 6 sessions weekly 4 sessions weekly By arrangement
The Health Centre, The Lawns, The Baulk, Biggleswade	Dental* Speech Therapy	Sessions as required 2 sessions weekly
The Health Centre, Kingsway, Dunstable	Child Guidance Dental* Minor Ailments Speech Therapy Sunlight	2 sessions weekly Sessions as required 2 sessions weekly 2 sessions weekly By arrangement
1 Grovebury Road, Leighton Buzzard	Dental* Minor Ailments	Sessions as required 2 sessions weekly

*In addition to the sessions held at the fixed Clinics the School Dental Surgeons inspect children at the schools, and in rural areas mobile dental units are used for treating the children.

^bOrthoptic treatment for children in the South of the County, excluding the Borough of Luton, is given on one session a week at Dallow Road Clinic, Luton.

Child Guidance

Bedford St. Peter's Child Guidance Clinic

Dr. Dorothea Norman Jones, the Consultant Psychiatrist for the North of the County, contributes the following :-

" This year has been a most abnormal year for a Child Guidance Clinic, owing to the fact that Dr. Nina Meyer left in January and then no psychiatrist visited regularly until the 19th September, although Dr. Judith Waterlow visited at such times as she could spare from the Luton and Dunstable Clinics, and I visited for four sessions weekly in July.

Unfortunately, since the end of July, when Miss Hitchfield left, we have been without the services of an Educational Psychologist, and this has proved a severe handicap, both in diagnosis and in carrying out any necessary remedial work with the children referred.

Miss Corsellis came to the clinic as Psychiatric Social Worker in January and dealt with any urgent problems, but of necessity the waiting list grew to alarming proportions. During the last three months of the year a vigorous effort was made to review it and see the most urgent cases, and we start the New Year with a waiting list of 42 cases.

Thirty-nine children were seen by the psychiatrist for diagnosis during the year :-

<u>Reason</u>	<u>Number seen</u>
Delinquency	5
Difficult behaviour	16
Educational difficulties	3
Anxiety	11
Refusal to attend school	3
Brain damaged or psychotic	1
Total ...	<u>39</u>

Four of these cases were seen at the request of the Juvenile Courts.

Twenty-two cases were closed during the year :-

<u>Reason</u>	<u>Number</u>
Consultation only	3
Improved	12
Unco-operative	1
To Approved School	1
Over school age	1
Moved from district	4
Total ...	<u>22</u>

Five children were recommended for admission to Heathwood, the County Hostel for maladjusted children at Leighton Buzzard.

Seven children were recommended for placement in other Special Schools or Hostels.

Treatment

It has not been possible to carry out much treatment except on a few urgent cases, because of the length of the waiting list and the priority given to diagnosis. During the six months when no psychiatrist was available for treatment, urgent cases were seen by Miss Hitchfield.

Number of cases at present under treatment	16
Number of cases under supervision ...	77
Number of cases at residential schools supervised during holidays	10
Number of cases awaiting placement at residential schools	5

Regular monthly visits to Heathwood Hostel were made by me. Miss Corsellis also visited frequently.

Of the new cases seen during 1957, the sources of referral were :-

	<u>Number of Cases</u>
School Medical Officers	4
Hospital Specialists ...	4
Family doctors	7
Director of Education	7
Educational Psychologist	2
Schools	3
Juvenile Courts ...	4
Parents	4
Probation Officers ...	2
Citizens' Advice Bureau	1
N.S.P.C.C.	1
Total	<u>39</u>

In spite of great difficulties during the year, the service has been maintained owing to the efforts of the Psychiatric Social Worker and the almost full-time services of Miss Smith, the Clinic secretary.

We look forward to the establishment of a full Child Guidance Clinic team in 1958."

Dunstable Health Centre Child Guidance Clinic

Dr. Judith Waterlow, the Consultant Psychiatrist for Luton and the South of the County, contributes the following in respect of the Dunstable Clinic :-

" Eighteen new cases were seen during the year. The presenting problem among these was as follows :-

<u>Reason</u>	<u>Number Seen</u>
Behaviour disorder	7
Anxiety state	3
Educational difficulty	1
Delinquent	1
Depressive illness	4
Obsessional state	1
Parental disturbance	1
Total ...	<u>18</u>

It will be appreciated that the problem in many of the cases is too complex to be adequately summarised by a single diagnostic label.

Five of the new cases required diagnosis and advice only. The remainder were taken on either for active treatment or further supervision and supportive help.

At the end of the year, five children were receiving regular psychotherapy and 19 were under supervision.

One case was closed, having moved from the district.

One case was closed, having improved after a period of supervision and supportive help.

One case was closed because the parents did not wish further help.

Probably quite a number of cases who are seen only at long intervals could now suitably be closed.

Nineteen cases are awaiting diagnosis.

One child is at a Residential School for maladjusted children and seen annually during the holidays.

Two children have been recommended for residential placement and are awaiting vacancies."

Heathwood Hostel

The Hostel has been used to its capacity during the last twelve months. Close co-operation has been maintained with local schools, where the teachers continue to be of great help, and with youth groups.

In past years students from Bedford Training College and the London School of Economics have spent a month at Heathwood as part of their training. In 1958 eight students from the Institute of Education, University of London, will stay on consecutive week-ends as part of the Course for Teachers of Maladjusted Children.

Former residents at Heathwood still visit in some instances, or otherwise maintain contact. The physical health of the children has been good but the difficulty of obtaining a full complement of suitable staff remains a constant problem.

TABLE IX -- PARTICULARS OF CHILDREN ADMITTED TO HEATHWOOD DURING 1957

Sex and Age	Reason for Admission
Girls --	
13 years	Inability to attend school. Poorly adjusted socially.
13 years	Poorly adjusted socially. Retarded.
14 years	Pilfering. Difficult. Expelled from private school.
14 years	Unsatisfactory progress and adjustment in previous Homes. Retarded.
Boys --	
8 years	Behaviour difficulties at home and school.
9 years	Behaviour difficulties at home and school. Soiling and wetting day and night.

HANDICAPPED PUPILS

During 1957, 145 children thought to require special education were examined by School Medical Officers.

The Handicapped Pupils and School Health Service Regulations 1953 define the categories of handicapped pupils.

The definition for each category is given, together with comment.

Category (a) Blind Pupils, that is to say, pupils who have no sight or whose sight is or is likely to become so defective that they require education by methods not involving the use of sight.

Category (b) Partially-Sighted Pupils, that is to say, pupils who by reason of defective vision cannot follow the normal regime of ordinary schools without detriment to their sight or to their educational development, but can be educated by special methods involving the use of sight.

These categories are ascertained by Consultant Ophthalmologists, very often before the child reaches school age. Most of the children are admitted to special schools before they reach school age, and there is no particular difficulty in obtaining places for them. No new ascertainment in these categories were made during the year.

Schools which Blind and Partially-Sighted Pupils from Bedfordshire, excluding Luton, are attending :-

	Boys	Girls
Bernhard Baron Sunshine House Nursery School, Kingswinford, Staffs.	--	1
Dorton House School, Seal, Sevenoaks, Kent	--	2
Pirates Spring, St. Mary's Bay, New Romney, Kent	--	1
Exhall Grange School, Exhall, Coventry ...	1	2
Overley Hall Sunshine Home Nursery School for Blind Children, Wellington, Salop ...	1	--
Leasowe Children's Hospital, Moreton, Cheshire	1	--

- Category (c) Deaf Pupils, that is to say, pupils who have no hearing or whose hearing is so defective that they require education by methods used for deaf pupils without naturally acquired speech or language.
- Category (d) Partially-Deaf Pupils, that is to say, pupils who have some naturally acquired speech and language, but whose hearing is so defective that they require for their education special arrangements or facilities though not necessarily all the educational methods used for deaf pupils.

When a child is suspected of deafness by the School Medical Officer, or in the case of pre-school children by the Infant Welfare Medical Officer, he is referred to the Ear, Nose and Throat Department of the hospital with the consent of or through the family doctor. Some children are referred to the Audiology Unit at the Royal National Throat, Nose and Ear Hospital, London.

Every effort is made to ascertain these children before school age so that they may be given training as soon as possible.

There is no difficulty in placing children of school age in special schools, but there is some delay in obtaining places in nursery schools for deaf children under the age of five years.

Some partially-deaf children are able to continue their education in an ordinary school with the help of a deaf aid. Seven such children were kept under supervision during the year, and where necessary received instruction in lip reading. One deaf pupil and one partially deaf pupil were ascertained in these categories during the year.

Schools which deaf and partially-deaf pupils from Bedfordshire, excluding Luton, are attending :-

	<u>Boys</u>	<u>Girls</u>
Royal Institute for the Deaf, Friars Gate, Derby	1	--
Llandrindod Wells School, Llandrindod Wells, Radnor	1	--
Lawns House School, Farnley, Leeds ...	3	--
Royal School for Deaf Children, Margate, Kent	4	3
Donnington Lodge School, Newbury, Berks. --	--	3
Royal Cross School for the Deaf, Preston, Lancs.	1	--
Hamilton Lodge School, Brighton, Sussex ...	1	--
Mary Hare Grammar School for the Deaf, Newbury, Berks.	1	--
Tewin Water School, Herts.	1	1

- Category (e) Educationally Sub-Normal Pupils, that is to say, pupils who, by reason of limited ability or other conditions resulting in educational retardation, require some specialised form of education wholly or partly in substitution for the education normally given in ordinary schools.

Sixty-two new ascertainties were made in this category during the year; 42 were recommended to attend special schools; 17 were recommended for special educational treatment in ordinary schools, and three were recommended for home tuition. In addition, under Section 57(3) of the Education Act, 1944, four children were found to be suffering from a disability of mind of such a nature or of such an extent as to make

them incapable of receiving education at school, and reports to this effect were passed to the Health Committee. Examination of school leavers made under Section 57(5) of the Education Act, 1944, resulted in seven children being recommended for supervision after leaving school.

There are no day special schools in the County area for this largest category of handicapped pupils, but the Authority has its own residential special school at St. Margaret's, Great Gaddesden, which is just outside the County boundary in Hertfordshire.

When children are reported to the School Medical Officer as having educational difficulties, they are examined with a view to ascertaining the cause, which may be (1) some physical defect which interferes with their ability to learn, such as partial deafness, poor vision or chronic ill-health; (2) emotional maladjustment, which may interfere with the child's ability to learn; (3) limited intelligence as measured by one of the usual tests of intelligence. Occasionally there is a combination of two or more of these factors, and a solution is then sometimes difficult to find.

Schools which Educationally Sub-Normal Pupils from Bedfordshire, excluding Luton, are attending :-

	Boys	Girls
St. Margaret's School, Great Gaddesden, Herts.	50	21
Hilton Grange, Bramhope, Yorks.	1	--
Besford Court School, Worcester	1	--
Rudolf Steiner School, Camphill, Aberdeen	4	--
The Sheilings School, Ringwood, Hants.	2	2
Osborne Road Day Special School, Luton, Beds.	2	1
Miss Perkins' Day School, Bedford	2	--
Pield Heath House Roman Catholic School, Hillington, Middlesex	--	1
Eldon Day School, Arlesey, Beds.	--	1
Stotley Rough School, Haslemere, Surrey	1	--
The Thomas More School, Frensham, Surrey	1	--
Spring Hill School, Ripon, Yorks.	1	--
St. Christopher's School, Bristol, Glos.	1	--
Meadows House, Southborough, Kent	5	--
Thornbury Park School, Bristol, Glos.	3	--

Category (f) Epileptic Pupils, that is to say, pupils who by reason of epilepsy cannot be educated under the normal regime of ordinary schools without detriment to themselves or other pupils.

Children who suffer from epilepsy are ascertained at as early an age as possible, so that education suited to their disability may be provided if they prove unsuitable for education in an ordinary school. No child is labelled an epileptic without a period of observation, and in doubtful cases the help of the diagnostic department of the Hospital Service is sought.

Epileptic children are assessed at school-leaving age, with particular regard to suitability for employment. At this stage there is close co-operation with the Youth Employment Service and the Welfare Department.

One child was ascertained during the year as requiring education in a Special School but before he could be placed the family moved abroad.

At the end of the year, in the County excluding Luton, five

epileptic schoolchildren were ascertained as requiring special educational treatment; all were attending boarding schools. A further 47 children known to suffer from fits of an epileptiform type were attending ordinary schools.

Schools which Epileptic Pupils from Bedfordshire, excluding Luton, are attending :-

	<u>Boys</u>	<u>Girls</u>
Lingfield School for Epileptics, Surrey ...	2	--
Salesian School, Blaisdon Hall, Longhope, Glos.	1	--
Chalfont St. Peter Colony, Bucks.	--	1
Colthurst House School (David Lewis Colony), Warford, Cheshire	1	--

The Chalfont Colony was closed in July, 1957, and pupils were transferred to the Lingfield Colony in Surrey. The Colony continues to provide vocational treatment for adolescents, and one Bedfordshire girl is being trained there in domestic science.

Category (g) Maladjusted Pupils, that is to say, pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment in order to effect their personal, social or educational re-adjustment.

When the Child Guidance Service recommends that a child needs special educational treatment on account of his handicap, he is ascertained under this category and placed in a special school for maladjusted children. Recognised schools of this type are few, and most of these children are placed in carefully selected independent schools, the Ministry of Education being informed annually of the placements.

Twelve cases in this category were ascertained during the year.

Schools and Hostels which Maladjusted Pupils from Bedfordshire, excluding Luton, are attending :-

	<u>Boys</u>	<u>Girls</u>
The Caldecott Community School, Marsham-le-Hatch, Ashford, Kent	1	--
Odian Hill School, Romansleigh, Devon	1	--
Badby Vicarage School, near Daventry, Northants	2	--
Bylands School, Stratfield Turgis, near Basingstoke, Hants.	1	--
Sutcliffe School, Winsley House, Winsley, near Bradford-on-Avon, Wilts.	2	--
Horncastle, East Grinstead, Sussex	1	--
Morley Hall Hostel, Wymondham, Norfolk	1	--
Finchden Manor, Tenterden, Kent	1	--
Redhill School, East Sutton, Kent	1	--
St. Joseph's School, Finchley, London	--	1
Heathwood Hostel, Leighton Buzzard, Beds.	3	8

Category (h) Physically-Handicapped Pupils, that is to say, pupils not suffering solely from a defect of sight or hearing who by reason of disease or crippling defect cannot, without detriment to their health or educational development, be satisfactorily educated under the normal regime of ordinary schools.

For the ordinary crippling defects facilities are now adequate. The only problem in placement has been with children suffering from cerebral palsy, particularly in those cases where a physical handicap

is combined with a mental handicap. The great interest shown in this particular defect in recent years has resulted in better provision being made.

Three children were ascertained during the year in this category and recommended for special schools.

In the county, excluding Luton, the names of 44 children were on the register of physically handicapped children at the end of 1957. They may be grouped as follows :-

Tuberculosis	3
Cerebral Palsy	16
Post Polio Paresis	4
Other Orthopaedic conditions	3
Heart and circulation ...	6
Congenital abnormalities ...	11
Nephritis	1
	<hr/>
Total ...	44
	<hr/>

School which Physically-Handicapped Pupils from Bedfordshire, excluding Luton, are attending :-

	<u>Boys</u>	<u>Girls</u>
Alexandra Hospital School, Stockwood Park, Luton, Beds.	2	1
Barleythorpe Hall School for Crippled Girls, Oakham, Rutland	--	1
Heritage Craft Schools and Hospitals, Chislehurst, East Sussex	2	1
The Wilfred Pickles School (National Spastics Society), Tixover Grange, Duddington, Stamford, Lincs.	1	--
The School of Stitchery and Lace, Bookham, Surrey	--	1
Pawling Home Hospital for Children, Barnet, Herts.	--	1
Queen Mary's Hospital School, Carshalton, Surrey	--	1
Hawkesworth Hall School, Guiseley, nr. Leeds	--	1
Elmfield School, Harpenden, Herts.	--	2
Goldie Leigh Hospital School, Abbey Wood, Woolwich, London	1	--
The Palace School, Ely, Cambs.	--	1
The John Greenwood Shipman Home, Northampton	1	--
Penhurst Residential Special School, Chipping Norton, Oxon.	1	--

It is noted with regret that the Alexandra Hospital, Stockwood Park, Luton, is closing at the end of the financial year, and although this is no doubt justified from the economic point of view it is unfortunate as far as this Authority is concerned, as it enabled many severely handicapped pupils to remain near enough to their homes to see their parents at frequent intervals.

Category (i) Pupils suffering from Speech Defects, that is to say, pupils who on account of defect or lack of speech not due to deafness require special educational treatment.

At the end of the year one child was in attendance at the Moor House School, Oxted, Surrey, which is a special school for pupils in this category.

No new ascertainties were made during the year.

Category (j) Delicate Pupils, that is to say, pupils not falling under any other category, in these Regulations, who by reason of impaired physical condition need a change of environment or cannot, without risk to their health or educational development, be educated under the normal regime of ordinary schools.

Most of these pupils need relatively short periods away from home. They are sent to Special Schools and Convalescent Homes, usually on the South and East coasts.

Thirty-eight children were newly-placed in this category during the year and were recommended for Open Air Schools or Convalescent Homes.

Schools or Homes which Delicate Pupils from Bedfordshire, excluding Luton, are attending :-

	Boys	Girls
Fairey Cottage School, Harrold, Beds. ...	--	1
Pilgrims School, Seaford, Sussex ...	1	--
St. Patrick's Open Air School, Hayling Island, Hants. ...	--	2
St. Vincent's Open Air School, St. Leonards-on-Sea, Sussex ...	--	1
St. Catherine's Home, Ventnor, Isle-of-Wight ...	6	2
Eden Hall Special School for Delicate Children, Bacton, Norfolk ...	1	--
Brentwood School of Recovery, St. Leonards-on-Sea, Sussex ...	--	1
Holy Cross Open Air School, Broadstairs, Kent ...	1	--
St. John's Open Air School, Woodford Bridge, Essex ...	1	--

Further Education and Training

On reaching school leaving age handicapped pupils are treated as far as possible as normal young people, with the emphasis on their abilities rather than on their limitations.

The following extract from the Annual Report of the Director of Education on the Youth Employment Service for 1956/57 indicates the assistance given to handicapped children of school leaving age.

" In the two special schools which the Authority maintains for educationally sub-normal children, the appropriate programmes of vocational guidance were continued. At St. Margaret's Residential School the boys and girls were interviewed during their penultimate term, and again, if necessary, during their last school holiday. In this way 20 boys and girls were interviewed at school. In seven cases where the children lived outside the County, the records were forwarded to the appropriate authorities in time for the home Youth Employment Officers to take whatever action might be necessary before the beginning of the last school term. Of children living in the County, most were interviewed again in the bureaux during their last holiday, and in some cases visits to places of employment were arranged. Most of those who left school during the year were placed in employment, mainly in factory or land work. At Osborne

Road Day Special School in Luton seven boys and girls were interviewed during their last term at school.

" The Service was informed in good time of a number of children whose homes are in the County and who were due to leave special schools in other areas. After an invitation to call at the bureau, most of the children were interviewed with their parents just before their last term at school.

" Registrations under the Disabled Persons (Employment) Act, 1944, totalled 15 and on 30th September, 1957, there were 32 boys and girls on the Register. One disabled girl who was unable to walk was placed with a firm of hat manufacturers, an epileptic boy was settled as a silk screen printer after he had been trained in this trade at a special school. Another boy was accepted by Sherrards Training Centre for Young Spastics.

" There was some difficulty in finding suitable openings for disabled boys and girls, but employers continued to be both sympathetic and co-operative."

TABLE X -- NUMBER OF HANDICAPPED PUPILS IN THE COUNTY, EXCLUDING LUTON, WHO IN 1957 WERE EITHER NEWLY-PLACED BY THE AUTHORITY IN BOARDING OR HOSPITAL SPECIAL SCHOOLS OR HOMES; OR NEWLY ASCERTAINED AS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN HOMES

Category	No. of Handicapped Pupils who in 1957 were :-	
	Newly placed	Newly ascertained
Blind	1	--
Partially Sighted ...	1	--
Deaf	1	1
Partially Deaf ...	--	1
Delicate	38	38
Physically Handicapped	3	3
Educationally Subnormal	12	42
Maladjusted	10	12
Epileptic	--	1
Totals ...	66	98

Section 59

Every child proposed to be employed must be medically examined to ensure that the employment will not be prejudicial to his health or physical development and will not render him unfit to obtain proper benefit from his education.

302 children were examined during 1957 and certificates of fitness were granted in all but one case.

TABLE XI -- EDUCATIONAL ARRANGEMENTS FOR HANDICAPPED PUPILS IN THE COUNTY, EXCLUDING LUTON, 1957

Category	(A) Attending Boarding Special Schools	(B) Boarded in Homes	(C) Attending Independent Schools under arrangements made by the authority	(D) Totals of (A) (B) and (C)	(E) Receiving education at home under Section 56 of the Education Act, 1944	(F) Requiring places in Special Schools, including those unplaced children who were receiving home tuition
Blind	5	--	1	6	--	1
Partially Sighted ...	3	--	--	3	--	--
Deaf	13	--	2	15	--	--
Partially Deaf ...	5	--	--	5	--	--
Delicate	15	--	2	17	--	--
Physically Handicapped	5	--	8	13	9	3
Educationally Subnormal	85	--	17	102	9	66
Maladjusted	4	11	8	23	1	2
Epileptic	4	--	1	5	--	--
Totals ...	139	11	39	189	19	72

Note: Children suffering from multiple disabilities are classed under the major disability.

Other Examinations

Fifteen children were examined at the request of the Juvenile Courts.

Examination of Candidates for Admission to Courses of Training for Teaching and to the Teaching Profession

In accordance with Ministry of Education Circular 249, students and school teachers are medically examined. The following statement shows the number of medical examinations carried out during 1957 :-

Entrants to Training Colleges (Form 4 RTC)	83
Employment as teachers by the Bedfordshire Education Committee (Form 28 RQ)	24
Forms 28 RQ completed for other Education Authorities	2
Total ...	<u>109</u>

EDUCATION OF PATIENTS IN HOSPITALS

Table XII gives details of Bedfordshire children for whom education was provided in Hospitals, Hospital Special Schools and Convalescent Homes. Appropriate hospitals in Bedfordshire have been asked to notify the Director of Education of the admission of any child who is likely to remain in hospital and be well enough for some teaching.

TABLE XII -- EDUCATION PROVIDED UNDER SECTION (6) EDUCATION (MISCELLANEOUS PROVISIONS) ACT, 1948

Name of Authority providing Education	Name of Hospital, Hospital Special School or Convalescent Home	Number of children for whom education was provided in 1957
Middx.	Harefield Hospital School	4
"	Royal National Orthopaedic Hospital School, Stanmore	6
"	Mount Vernon Hospital, Northwood	2
"	Clare Hall Hospital Special School	5
"	Winifred House Hospital Special School	1
L.C.C.	University College Hospital Special School	1
"	Westminster Children's Hospital	1
"	Evelina Children's Hospital School, (Guy's Hospital), London, S.E.1.	2
"	Hospital for Sick Children Hospital School, Great Ormond Street, London, W.C.1.	2
"	Goldie Leigh Hospital School, Abbey Wood	1
"	Maudsley Hospital School, Camberwell	2
Bucks.	Canadian Red Cross Memorial Hospital, Taplow	1
"	Stoke Mandeville Hospital	2
Cambs.	Addenbrookes Hospital, Cambridge	2
Surrey	Queen Mary's Hospital for Children, Carshalton	1
"	Tadworth Court Hospital School, Tadworth	2
Wilts.	Marlborough Children's Convalescent Hospital, Marlborough	4
Total		<u>39</u>

BACTERIOLOGICAL EXAMINATION OF MILK

During the year 279 samples of milk were taken from retailers supplying milk to the 148 maintained Schools in the County, excluding Bedford and Luton.

TABLE XIII -- NUMBER OF SAMPLES OF MILK SUBMITTED FOR BACTERIOLOGICAL EXAMINATION DURING 1957

Classi- fication	Routine Samples			First Follow-Up			Second Follow-Up			Total No. of Samples taken
	Satis- factory	Unsatis- factory	Total	Satis- factory	Unsatis- factory	Total	Satis- factory	Unsatis- factory	Total	
Samples taken from Schools	252	12	264	6	5	11	4	--	4	279

MILK IN SCHOOLS SCHEME

Under the Milk in Schools Scheme all pupils attending schools are entitled to receive one-third of a pint of milk free of charge. At the end of 1957, 146 schools received heat-treated milk and two received tuberculin-tested milk. All schools in the County area, therefore, received a supply of designated milk. Approximately 78 per cent of schoolchildren take milk in school.

Under the Welfare Foods Service children between the ages of 5 and 16 who are unable, by reason of disability of mind or body, to become registered pupils of a primary or secondary school or Special School may apply for a certificate authorising them to receive one pint of milk a day at a reduced price.

SCHOOL HYGIENE AND SANITATION

A new technical school at Dunstable, and a new primary school at Shortstown, were opened during the year, which relieved some overcrowding in the older schools.

Three county primary schools and one secondary school were connected to a public sewer which had become available in the district. Two primary schools were converted from bucket to water carriage system of sanitation, and several minor improvements were carried out, as seen in the list of improvements which is given below :-

<u>Name of School</u>	<u>Improvements Carried Out</u>
Sharnbrook County Primary. Felmersham County Primary. Harrold County Primary & Secondary	Connection to sewer.
Biggleswade Voluntary Primary. Northfields County Secondary, Dunstable.	Improvements to staff sanitation.
Mary Bassett County Secondary, Leighton Buzzard.	New classroom and new lavatory block.
Pavenham County Primary.	New sanitary block with water closets.
Southill County Primary.	Conversion to water closets.
Great Barford County Primary. Haynes County Primary.	Conversion to water closets being carried out.
Biggleswade County Primary Infants.	Additional wash basins.
Steppingley County Primary.	Additional urinal and drainage. Water heater.
Caddington Slip End County Primary. Maulden County Primary. Hyde County Primary. Millbrook County Primary. Caldecote Voluntary Primary. Milton Ernest Voluntary Primary. Mogerhanger County Primary. Stagsden Voluntary Primary.	Water heater has been supplied in all these schools.

<u>Name of School</u>	<u>Improvements Carried Out</u>
Turvey County Primary.	Water heater.
Ridgmont County Primary.	Water heater and additional wash basins.
Thurleigh County Primary.	Water heater and new hand basin.

SCHOOL CANTEENS

Inspection of the school canteens is carried out by Health Inspectors of the County Districts concerned, in the company of the County Health Inspector. Reports are sent to the County School Meals Organiser.

The following improvements were carried out at many of the canteens, as listed below :-

<u>Name of School</u>	<u>Improvements Carried Out</u>
Campton County Primary.	
Riseley Voluntary Primary.	
Shillington County Primary.	
Stagsden Voluntary Primary.	
Thurleigh County Primary.	
Caldecote Voluntary Primary.	
Clapham Voluntary Primary.	
Cople County Primary.	New hand basins provided in canteens.
Everton County Primary.	
Harrold County Primary.	
Harrold County Secondary.	
Derwent County Primary, Henlow Camp.	
Langford Voluntary Primary.	

The County Architect has also provided "Wash Your Hands" notices in all kitchen toilets.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

There are no major changes to report for the year under review. Routine inspection and treatment continued to be carried out as far as staff would permit, both static and mobile clinics being used.

While the staff shortage continues, full regular and continuous treatment cannot be given. During the year Mrs. Milnes and Mr. Atkins resigned. Mrs. Milnes left the area for family reasons and joined another authority; Mr. Atkins left the public service to engage in private practice. He is, however, undertaking sessional work for the Authority. The loss of the two Dental Officers is much regretted as the two clinics for which they were responsible, Leighton Buzzard and Biggleswade, have been built up over the years into two of the most successful clinics in the County. It is no longer possible to provide a continuous service at these clinics.

During the year the Luton Education Committee succeeded in recruiting a full-time Dental Officer -- the first appointment of this nature for ten years. There is sufficient work in Luton for at least four dentists. The regular assistance given by the County

dentists on one day a week for the treatment of emergency cases has now been discontinued, but some assistance will again be given if urgently required.

The dental clinics are now fully furnished with modern and up-to-date equipment. During the year the Bromham Road Clinic was re-equipped. No further expenditure on equipment except for repair, maintenance or replacement should be required for some time.

Special Orthodontic clinics continue to be held as required. The Principal Dental Officer and Dental Officers responsible for treatment, inspect and consider new cases, a line of treatment is decided upon and carried out, old cases and cases under treatment are inspected periodically, and progress noted.

The attention of the Committee is drawn to the McNairn Committee Report on the shortage and recruitment of dentists. This shortage, so far as can be seen, will last for years. It underlines the need for every effort to be made to reduce the incidence of dental caries, e.g. by fluoridation of drinking water and education in the care of teeth. It is difficult to persuade the public that their children's teeth can be affected adversely by an injudicious dietary, particularly one containing too much carbohydrates, by eating between meals, especially sweets and cakes and by lack of oral hygiene. The need for co-operation by the public, especially in increased oral hygiene, is great. It is one certain way of reducing demand on professional time. The need for dental fitness cannot be over-emphasised. Dental disease in itself is not a killing disease, but it can and does contribute in reducing the body resistance to those diseases which do kill.

The Dental staff are always ready to give talks on dental health subjects, and Mr. Guy, the Health Education Officer, is always ready to make the necessary arrangements. A supply of films, both talking and silent, film strips (with commentary), pamphlets and posters are available to assist in teaching the essentials of dental health.

The School Medical Service has just completed its first fifty years, but the School Dental Service was not introduced until 1919 when Mr. F.S. Cooper was the first dental surgeon appointed in Bedfordshire. The report of the School Doctor on dental matters makes interesting reading, in that "he found the teeth well constructed, arches well formed -- but rampant decay, lack of conservative work, lack of oral hygiene and general neglect". His examination was produced as a statistical return, and I asked the Dental Officers to do a similar inspection as it would have been carried out by the examining doctors in those early days.

A comparison of these results reduced to a percentage is as follows :-

Year	Fit or one cavity. Very Good	Two cavities. Good	Three cavities. Fair	Neglected and Carious. Very Bad
1908 - 1910	17%	37%	28%	16%
1957	39%	20%	27%	5%

It was only to be expected that a considerable improvement would be noticed. The most important fact shown is the reduction in "very bad". More children now clean their teeth and have a developed sense of Oral Hygiene, brought about by a combined effort of teachers, parents, commercial advertising, the Health Service, and a natural

instinct of imitation, the latter, I am sure, playing a big part, stimulated by the apparent good oral condition of film and television stars.

The Reports published annually show a rapid improvement in the dental condition of the schoolchildren, particularly in the acceptance of treatment. This I feel has continued, though the school statistics cannot show a continuity of treatment due to the post-war breakdown of the Service.

REGINALD B.T. DINSDALE,
Principal Dental Officer.

Details of the work of the dental surgeons during 1957 are given below :-

Pupils inspected --						
Periodic age groups	...	...	...	...	...	13,820
Specials	...	...	...	...	...	2,800
Total						16,620
Number found to require treatment	...	...	...	...	...	9,446
Number offered treatment	...	...	...	...	...	8,431
Number actually treated	...	...	...	...	...	5,247
Attendances made by pupils for treatment (including orthodontics)	...	...	...	...	...	9,749
Half-days devoted to --						
Inspection	...	...	...	...	...	263
Treatment	...	...	...	...	...	1,331
Total						1,594
Fillings --						
Permanent Teeth	...	...	...	...	...	4,121
Temporary Teeth	...	...	...	...	...	599
Total						4,720
Number of teeth filled --						
Permanent Teeth	...	...	...	...	...	3,778
Temporary Teeth	...	...	...	...	...	597
Total						4,375
Extractions --						
Permanent Teeth	...	...	...	...	...	2,086
Temporary Teeth	...	...	...	...	...	4,513
Total						6,599
Administration of general anaesthetics for extraction						
...	...	...	...	...	...	3,335
Orthodontics --						
Cases commenced during the year	...	...	...	...	...	135
Cases carried forward from previous year	...	...	...	...	...	53
Cases completed during the year	...	...	...	...	...	65
Cases discontinued during the year	...	...	...	...	...	15
Pupils treated with appliances	...	...	...	...	...	110

Orthodontics (continued) --

Removable appliances fitted	...	...	...	138
Fixed appliances fitted	...	...	...	3
Total attendances	...	...	...	825

Number of pupils supplied with artificial dentures 51

Other operations --

Permanent Teeth	...	...	...	...	1,831
Temporary Teeth	...	...	...	...	420

Total ... 2,251

ANNUAL REPORT
of the
DIVISIONAL SCHOOL MEDICAL OFFICER
of the
BEDFORD DIVISIONAL EXECUTIVE
for the Year 1957

STAFF

Divisional School Medical Officer

C.L. Sharp, M.R.C.S., L.R.C.P., D.P.H.

School Medical Officer

Frances Anne Williams, M.B., B.S.(Lond.), M.R.C.S.,
L.R.C.P., D.P.H.(Vict.).

School Nurse

Mrs. D. Davidson, S.R.N.

GENERAL STATISTICS

The following table shows the number of children attending the 19 school departments in the area of the Borough at the end of the year.

<u>Type of School</u>	<u>Number of Schools</u>	<u>Number on Roll</u>
Nursery	1	44
Infant	6	1,177
Primary Junior Mixed	5	2,165
Primary Junior Mixed and Infant ...	2	1,261
Primary Mixed, All Ages, 5 - 15 years	1	415
* Secondary Modern	4	2,170
	<u>19</u>	<u>7,232</u>
* Mixed	2	
Boys	1	
Girls	1	

It will be noted that the number of children in the schools is increasing, from 7,041 in 1956 to 7,232 in 1957.

At the end of the year, 490 foreign children were in attendance at Borough schools.

Educational problems arise with foreign children. Added to the problem of some physical or mental incapacity may be a language difficulty. The solution of these problems raises very great difficulties and the desirability of allowing handicapped children to enter this country is a matter which I think should be most carefully

considered. This matter has already been brought to the notice of the appropriate Ministry and it is hoped that adequate medical inspection of immigrants will be instituted.

SCOPE OF MEDICAL INSPECTION

The following figures show the numbers inspected during the year under review as compared with the previous year.

	<u>1956</u>	<u>1957</u>
Inspection in prescribed groups ...	1,983	2,140
Special inspections at schools ...	13	9
Special inspections at clinics ...	203	190
Re-inspections	367	449

There has been little change in the numbers attending for special purposes at the clinics, and these attendances are mainly limited to special services such as investigations for educational subnormality or child guidance.

MEDICAL TREATMENT

General arrangements continued as in previous years.

There are still two school clinics for the general use of children attending schools of the Divisional Executive, namely 30 Bromham Road for the schools north of the river, and 29 Barford Avenue for schools south of the river; and for certain purposes, children of the Executive also attend the clinic at 3 St. Peter's Street. The work carried out at these clinics may be given in summary form as follows :-

<u>Location of Clinic</u>	<u>Time of Session</u>	<u>Work Carried Out</u>
30 Bromham Road	Tuesdays and Thursdays in term time. 9.0 a.m. to 9.30 a.m. Friday afternoons at 2.30 p.m. Approximately eight sessions weekly. As required. As required.	Treatment of minor ailments by School Nurse. Consultations by School Medical Officer. Treatment by School Dental Officer. Diphtheria immunisation. Poliomyelitis vaccination.
29 Barford Avenue	Tuesdays and Thursdays in term time. 9.0 a.m. to 9.30 a.m. Tuesday mornings at 10.15 a.m. As required. As required. Tuesday afternoons weekly.	Treatment of minor ailments by School Nurse. Consultations by School Medical Officer. Diphtheria immunisation. Poliomyelitis vaccination. Speech therapy.
3 St. Peter's Street	Monday and Thursday afternoons. Mondays and Wednesdays.	Ultra violet light treatment. Speech therapy.

Borough children are treated with County children for orthoptic treatment and child guidance.

Children with defective vision are referred to Dr. H. Bentley.

CONDITIONS FOUND ON INSPECTION

GENERAL

The general health of the schoolchildren remained satisfactory. The parents as a whole were eager to seek advice whether from the family doctor or from the School Health Service.

NUTRITION AND GENERAL PHYSIQUE

The generally good standard of nutrition and physique has been maintained.

I am indebted to the Education Officer for the following figures relating to school milk and meals.

RETURNS MADE TO MINISTRY OF EDUCATION					
Date of Return	Milk		Meals		
	Number receiving milk	Percentage receiving milk	Number receiving meals	Number (included in previous column) receiving meals free of charge	Percentage receiving meals
October 1957	5,350	80.61	3,138	161	47.28
October 1956 (for comparison)	5,437	81.55	3,368	134	50.52

UNCLEANLINESS

The number of children found unclean, that is with nits or lice in their hair, was 81 in 1957 compared with 63 in 1956.

All too often the same families are the source of infection, and in some cases this reflects the poor standards of home care coupled with an inability or unwillingness to co-operate in the necessary measures of control.

MINOR AILMENTS

GENERAL

The following statement shows the number of attendances at the school clinics.

	<u>1956</u>	<u>1957</u>
Attendances	421	191
Number of individual children attending	219	136

RINGWORM

No cases of ringworm were discovered.

SCABIES

No cases were discovered.

IMPETIGO

Only three children received treatment for this once troublesome condition.

HOSPITAL TREATMENTGENERAL

Hospital treatment generally is the responsibility of the Regional Hospital Board. Some institutions which rank as schools or convalescent homes do not come under the hospital scheme and children may be sent to such institutions at the expense of the local education authority.

TONSILS AND ADENOIDS
AND ALLIED CONDITIONS

During the year, 23 children were referred for consultation on these conditions to the Ear, Nose and Throat Department of the Bedford General Hospital. In a number of other cases arrangements for treatment had already been made before entry to school, or after entry, independently of the School Health Service. 32 children were ascertained to have received treatment during the year, of whom 20 were referred for treatment before 1957.

Apart from cases where deafness or ear disease appeared to be associated with diseased tonsils and adenoids, three children were referred to hospital for deafness or ear disease.

As before, children are kept under periodic review when it is thought that the condition may settle down in time without the necessity of hospital treatment.

The possibility of risk in connection with tonsillectomy during the prevalence of poliomyelitis in the area is borne in mind and necessary steps are taken against this if the occasion arises.

INFECTIOUS DISEASESMEASLES

During the year, 531 children of school age were notified as suffering from this disease.

SCARLET FEVER

It is known that 53 cases occurred amongst schoolchildren during the year.

DIPHTHERIA

No cases of diphtheria occurred amongst schoolchildren in this area.

ACUTE ANTERIOR POLIOMYELITIS

Two cases of poliomyelitis were notified during the year.

TUBERCULIN TESTING

The object of this test is to ascertain, as soon as children enter upon the wider contacts of school life, whether there is reason to suppose by their giving a positive reaction to tuberculin that they have been in contact, in the smaller world of the family which they have just left, with any infectious case of tuberculosis. Those children who give a positive reaction to the test are referred to the Chest Clinic for confirmation of the positive findings and if the positive reaction is confirmed by more exact tests investigation can be made among family contacts with a view to discovering hitherto undiscovered cases of active tuberculosis. The whole purpose of the scheme is therefore to ascertain and secure treatment for active cases of tuberculosis at the earliest possible moment.

Consent given	...	...	...	...	457
Consent not given	...	...	...	...	123
(Of this number, 17 had either been tested previously, received B.C.G. vaccination or were under observation at the Chest Clinic)					
Number of children tested	...	...	...	...	432 #
Number found to be negative	...	...	...	...	426
Number found to be positive	...	...	...	...	6
Absent from school at time of test	...	...	...	...	32
Left district	...	...	...	...	15

This number includes 22 children whose parents consented in 1956.

The six children found to be positive were referred to the Chest Clinic at the Bedford General Hospital, and X-rays of five of the children were within normal limits.

One Italian child, also her mother, were found to be suffering from pulmonary tuberculosis, but treatment was refused as they preferred to attend the Italian hospital in London. On further investigation, however, it was found that the family had returned to Italy.

SPECIAL FORMS OF TREATMENT

ULTRA VIOLET LIGHT TREATMENT

Sessions were held at the clinic at 3 St. Peter's Street during the early part of the year.

Due to pressure of work on the poliomyelitis vaccination scheme the ultra violet light clinic had to be stopped. It is hoped to recommence in the winter of 1958.

The following table shows the number of children treated at the clinic.

	<u>Sessions held</u>	<u>Total treatments</u>	<u>Number of individual children treated</u>
3 St. Peter's Street	22	123	14

The following table shows the conditions treated.

<u>Condition for which treatment was given</u>	<u>Number of children treated</u>
Diseases of the ear, nose and throat	5
General debility	4
Bronchitis and other conditions of the lungs	3
External eye complaint	1
Nervous illness	1

ORTHOPAEDIC AND POSTURAL DEFECTS

Treatment for such minor conditions as bad posture, flat feet and knock knee of slight degree is undertaken at the Bedford College of Physical Education. During the year, 38 children were referred for treatment.

Children requiring more special treatment or advice are referred to the Orthopaedic Department at the Bedford General Hospital. Eleven children were so referred.

SPEECH THERAPY

During the year, 21 children received treatment from the Speech Therapist.

Details are given in the following table.

Condition	Number treated	Number discharged	Condition on discharge	
			Cured	Improved
A -- <u>Dyslalia</u>				
Not associated with anatomical defect, hearing loss, or mental deficiency	11	3	2	1
Associated with anatomical defect ...	2	2	2	--
Associated with hearing loss	1	--	--	--
Associated with mental defect	--	--	--	--
B -- <u>Stammer</u>	7	1	--	1

Sessions are held each week at the clinics at 29 Barford Avenue and 3 St. Peter's Street. One session each week is also devoted to interviews, or school and home visits.

There is a waiting list for attendance at the Bedford clinics.

HANDICAPPED CHILDREN

Children from the area of the Borough who require special educational treatment on account of some physical handicap, some defect in the sense organs or mental retardation, are usually dealt with directly by the County Education Committee and are included in the figures given by the Principal School Medical Officer.

DISABILITY OF MIND

The problem of the educationally subnormal child has been carefully considered, and the need for early ascertainment is obviously of great importance. In consultation with the Head Teachers a scheme to achieve this aim was initiated. This consists of a reading test at the age of eight, and for those who are retarded a non-verbal intelligence test. The reports are studied by the School Medical Officer. Further investigations are then made as to whether the children require education in a special school, remedial teaching, alteration in teaching methods, or reference to the Child Guidance Clinic. It is hoped by this means to select children who need education in special schools sufficiently early for effective action to be taken.

The need for a day special school in Bedford has been considered and accepted by the Divisional Executive, but a waiting list of children must be ready for immediate admission when the school is available.

During the year, 32 children were examined from the Borough schools, including private schools, and diagnosis and recommendations are shown in the following table.

Educationally subnormal	...	...	...	22
Maladjusted	...	...	...	4
Incapable of receiving education at school	...	...	...	4
For supervision after leaving school	...	...	...	2

Of this number of examinations, one was undertaken at the request of the Juvenile Court.

The Educational Psychologist resigned during the year and her valuable help in the ascertainment of children was lost. It is hoped that a replacement will soon be forthcoming as there is much work to be done.

At the end of the year, 20 children were resident at St. Margaret's School, Great Gaddesden, which is under the control of the Bedfordshire County Council and is for educationally subnormal children.

Maladjusted children are usually referred to the Child Guidance Clinic, and details are given in the report of the Principal School Medical Officer. Two children received treatment during the year at the Hostel for Maladjusted Children at Heathwood, Leighton Buzzard, and two at other institutions.

TREATMENT IN CONVALESCENT HOMES
AND OTHER CONDITIONS

A number of children who suffer from more or less indefinite forms of ill-health are sent to convalescent homes at the expense of the Local Education Authority for periods of usually a few weeks, and often receive great benefit from such treatment.

The number of children and the cause for which they were sent are as follows :-

Sex	Age	Cause	Period of treatment
Female	12	Debility following jaundice	7 weeks
Female	10	General debility	6 weeks
Male	10	General debility	4 weeks
Male	7	General debility	4 weeks
Male	4	General debility	4 weeks

Other children received treatment for more definite diseases at special institutions as follows :-

Sex	Age	Disease	Period of treatment
Female	11	Bronchitis	Admitted 13.2.1957 Discharged 31.7.1957
Female	11	Asthma	Admitted 2.10.1956 Not discharged
Female	9	Bronchiectasis	Admitted 22.10.1956 Discharged 31.12.1957
Male	4	Asthma and vaso-motor rhinitis	Admitted 4.9.1957 Not discharged

OTHER EDUCATIONAL TREATMENT

Seven children, for whom this treatment seemed best, received education at a private school at the Local Education Authority's expense.

Details are given in the following table :-

Sex	Age	Condition	Period of attendance
Male	15	Spina Bifida. Deformity of left foot. (Originally admitted from the area of the County outside Bedford)	Admitted March, 1952. Left December, 1957.
Female	15	Educationally subnormal.	Admitted September, 1956. Removed by parents, July, 1957.
Male	13	Educationally subnormal.	Admitted February, 1953. Left April, 1957. Now at St. Margaret's School.
Female	12	Educationally subnormal.	Admitted April, 1953. Transferred to St. Margaret's School, October, 1957.
Male	10	Hydrocephalus.	Financial responsibility accepted July, 1956. Still in attendance.
Male	8	Ectopia vesicae.	Admitted January, 1956. Still in attendance.
Male	6	Maladjusted	Financial responsibility accepted September, 1957. Still in attendance.

MEDICAL EXAMINATION OF CANDIDATES FOR ADMISSION TO TRAINING COLLEGES AND TO THE TEACHING PROFESSION

During the year, 38 students applying for admission to Training Colleges were medically examined. An X-ray examination of the chest is arranged where it is considered desirable.

Fourteen candidates for entrance to the teaching profession were examined. Of this number, two examinations were undertaken at the request of other authorities. An X-ray examination of the chest is required in these cases.

DENTAL TREATMENT

The arrangements for dental treatment remained the same. All the dental staff including those working in the area of the Divisional Executive are on the staff of the Principal School Medical Officer. Mr. F. Brabington-Perry gives approximately eight sessions a week to the inspection and treatment of Borough children and some time is also devoted to this work by other dental officers working in the County. A number of children, it must be remembered, receiving treatment under the provisions of the National Health Service Act independently of the School Health Service.

Modernisation of the Dental Clinic at 30 Bromham Road has now been carried out with great benefit.

EMPLOYMENT OF CHILDREN BYELAWS

272 children were medically examined in 1957. Of this number, one was employed in entertainment. No reason was found to reject any of these children.

CONCLUSION

There is no material change to report in the general work of the School Health Service, and the physical health of the children is generally well maintained.

My thanks are due to the members of the Bedford Divisional Executive for their help and sympathy in the work, and to all members of the staff of the Executive, to the staff of the County School Health Department, and to the Heads of all Schools in the Borough for their co-operation in the work.

STATISTICAL TABLES
relating to the work of the
SCHOOL HEALTH SERVICE
(Bedford Divisional Executive)
for the Year 1957

Note: For the purpose of comparison figures relating to previous years are given.

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

Return of Children Inspected 1st January to 31st December, 1957.

A -- Periodic Medical Inspections

No. of Inspections in the Age Groups				1955	1956	1957
Primary Entrants	...	...	...	941	902	945
Primary Leavers	...	...	...	553	708	729
Secondary Leavers	...	...	...	377	373	466
Totals ...				1,871	1,983	2,140

B -- Other Inspections

				1955	1956	1957
Number of Special Inspections	...			276	216	199
Number of Re-Inspections	...	...		411	367	449
Totals ...				687	583	648

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 conditions recorded in Table III (3)			Total individual pupils (4)		
	1955	1956	1957	1955	1956	1957	1955	1956	1957
Primary Entrants	3	8	3	131	190	180	132	195	182
Primary Leavers	28	58	63	49	73	107	74	127	169
Secondary Leavers	20	27	22	15	34	27	35	56	49
Totals	51	93	88	195	297	314	241	378	400

D -- Classification of the Physical Condition of Pupils
Inspected During the Year 1957 in the Age Groups

Age Groups	No. of Pupils Inspected	Satisfactory		Unsatisfactory	
		No.	%	No.	%
Primary Entrants	945	931	98.5	14	1.5
Primary Leavers	729	724	99.3	5	0.7
Secondary Leavers	466	465	99.8	1	0.2
Totals	2,140	2,120	99.1	20	0.9

TABLE II -- INFESTATION WITH VERMIN

	1955	1956	1957
(1) Total number of examinations in the schools by the school nurses	18,286	18,530	17,659
(2) Total number of individual pupils found to be infested ...	71	63	81
(3) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ...	--	--	--
(4) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ...	--	--	--

TABLE III -- RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1957

A -- Periodic Inspections

Defect or Disease	PERIODIC INSPECTIONS					TOTAL (including all other age groups inspected)	
	Entrants		Leavers			Requiring treatment	Requiring observation
	Requiring treatment	Requiring observation	Requiring treatment	Requiring observation			
Skin	16	5	7	3	31	11	
Eyes --							
(a) Vision ...	3	--	22	--	88	--	
(b) Squint ...	12	2	--	--	14	2	
(c) Other ...	2	--	3	1	18	1	
Ears --							
(a) Hearing ...	5	12	1	6	14	22	
(b) Otitis Media ...	6	13	--	--	8	19	
(c) Other ...	--	7	2	--	2	8	
Nose and Throat ...	36	124	3	12	47	159	
Speech	4	1	1	--	6	2	
Lymphatic Glands ...	8	19	--	--	8	19	
Heart	3	11	--	1	5	20	
Lungs	25	14	--	4	32	24	
Developmental --							
(a) Hernia ...	5	1	--	--	6	1	
(b) Other ...	3	18	3	--	10	19	
Orthopaedic --							
(a) Posture ...	22	6	4	3	42	15	
(b) Feet ...	45	4	1	1	71	20	
(c) Other ...	34	13	1	1	44	20	
Nervous System --							
(a) Epilepsy ...	1	1	--	--	1	2	
(b) Other ...	--	1	--	--	1	2	
Psychological --							
(a) Development ...	--	2	--	--	--	3	
(b) Stability ...	--	2	--	--	1	2	
Abdomen ...	2	4	--	--	2	5	
Other	3	12	1	3	10	22	

B -- SPECIAL INSPECTIONS

Defect or Disease	Special Inspections	
	Requiring treatment	Requiring observation
Skin	17	2
Eyes --		
(a) Vision	27	1
(b) Squint	--	--
(c) Other	3	3
Ears --		
(a) Hearing	6	1
(b) Otitis Media	--	--
(c) Other	4	--
Nose and Throat	8	2
Speech	5	--
Lymphatic Glands	--	1
Heart	1	1
Lungs	8	1
Developmental --		
(a) Hernia	--	--
(b) Other	2	--
Orthopaedic --		
(a) Posture	2	--
(b) Feet	3	--
(c) Other	4	2
Nervous System --		
(a) Epilepsy	--	--
(b) Other	3	1
Psychological --		
(a) Development	31	15
(b) Stability	9	5
Abdomen	1	--
Other	20	16

TABLE IV -- TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS

Group 1 -- Eye Diseases, Defective Vision and Squint

	Number of cases dealt with by the Authority		
	1955	1956	1957
External and other, excluding errors of refraction and squint	10	10	7
Errors of Refraction (including squint)	153	196	217
Totals ...	163	206	224
Number of pupils for whom spectacles were prescribed	83	88	95

Group 2 -- Diseases and Defects of Ear, Nose and Throat

	No. of cases treated					
	By the Authority			Otherwise		
	1955	1956	1957	1955	1956	1957
Received operative treatment --						
(a) for diseases of the ear	--	--	--	--	--	--
(b) for adenoids and chronic tonsillitis	--	--	--	67	63	32
(c) for other nose and throat conditions	--	--	--	--	--	--
Received other forms of treatment	65	34	12	3	12	3
Totals ...	65	34	12	70	75	35

Group 3 -- Orthopaedic and Postural Defects

	1955	1956	1957
Number of pupils known to have been treated at clinics or out-patient departments	12	17	49

Group 4 -- Diseases of the Skin (excluding uncleanness, for which see Table II)

	Number of cases treated or under treatment during the year by the Authority		
	1955	1956	1957
Ringworm --			
(a) Scalp 	--	--	--
(b) Body 	5	--	--
Scabies 	3	2	--
Impetigo 	15	9	3
Other skin diseases 	19	14	7
Totals ...	42	25	10

Group 5 -- Speech Therapy

	Number of cases treated by the Authority		
	1955	1956	1957
Number of pupils treated by Speech Therapist 	22	16	21

Group 6 -- Other Treatment Given

	Number of cases treated by the Authority		
	1955	1956	1957
Miscellaneous minor ailments ...	268	172	112





