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BEDFORDSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE



# REPORT

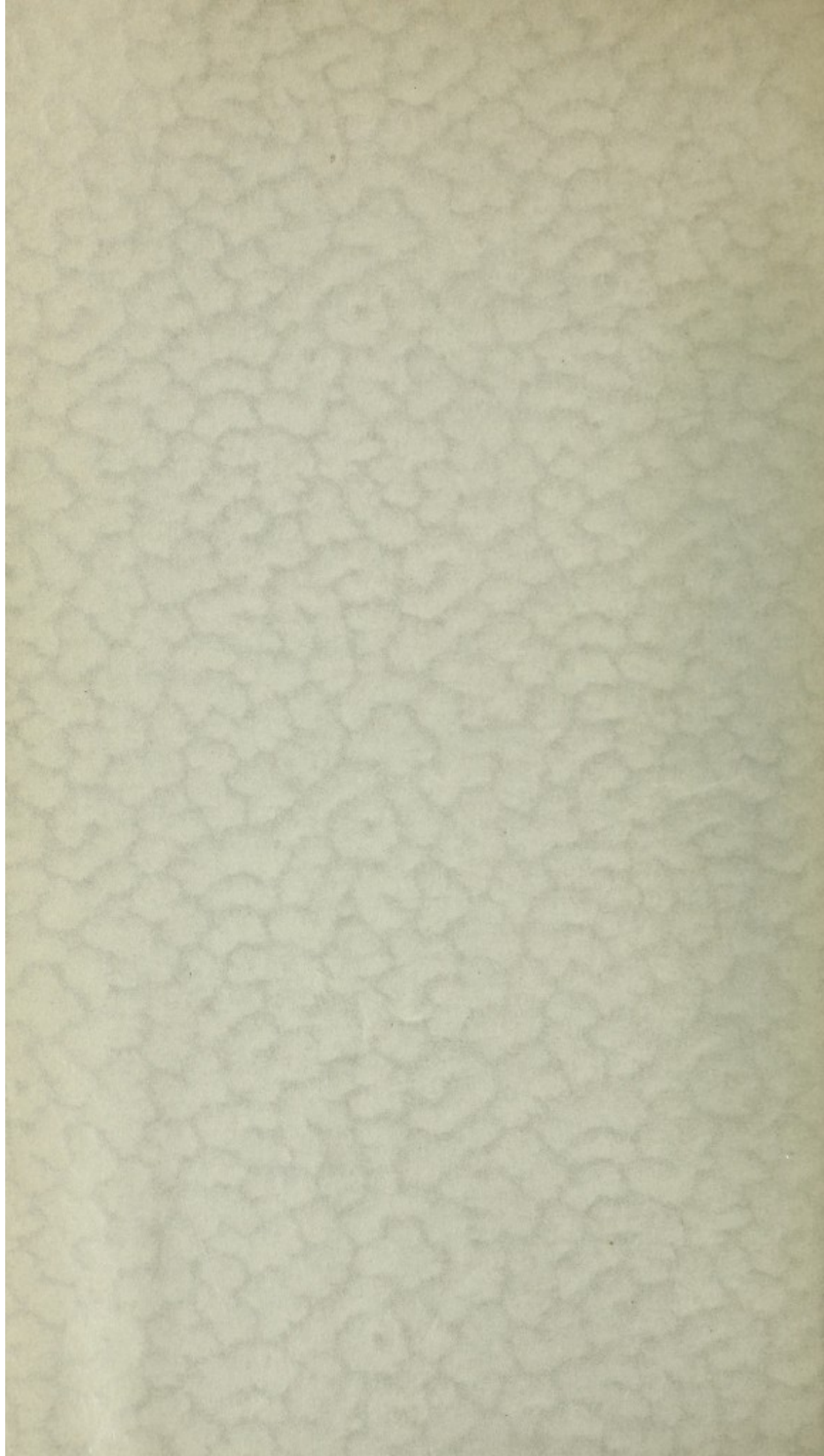
of the

Principal

SCHOOL MEDICAL OFFICER

for the Year ended

31st December, 1958



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CONTENTS

	<u>Page</u>
Introduction ... ..	2
Bedford, Report of the Divisional School Medical Officer ... ..	35
Care of Physically Handicapped Children in a Rural Community ... ..	24
Child Guidance ... ..	15
Cleanliness ... ..	8
Education of Patients in Hospitals ...	30
General Statistics ... ..	4
Handicapped Pupils ... ..	18
Infectious Diseases ... ..	9
Medical Examination of Teachers and Entrants to Training Colleges ... ..	30
Medical Inspection and Treatment ... ..	4
Milk in Schools Scheme ... ..	32
School Buildings ... ..	32
School Canteens ... ..	33
School Clinics ... ..	14
School Dental Service ... ..	33
School Nursing Service ... ..	5
Treatment of Defects:	
Minor Ailments ... ..	11
Ophthalmic ... ..	11
Orthoptic ... ..	12
Speech ... ..	13
Ear, Nose and Throat ... ..	14

## 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 1958.

There were changes in Medical Staff. On the 30th September, Dr. Elizabeth E. Brown retired. She had given sterling service to this Authority for nearly nineteen years, mainly in the field of maternal and child welfare, but also in the School Health Service. There were two newcomers to the staff, Dr. Margaret S. Brothwood and Dr. Isobel R.S. Troup, who commenced duty on the 1st October. The Principal Dental Officer draws attention to the staffing situation in the School Dental Service, which is seriously depleted. He says, "The whole position is one of frustration, and under present conditions there seems to be no way of escape from it". The incomplete Child Guidance team continued unchanged throughout the year, but there was a welcome re-inforcement when on the 1st January, 1959, Miss Mary P. Joyce took up duty as Educational Psychologist.

There were no changes in the arrangements made for medical inspection and 142 out of 153 school departments were inspected. The general physical condition of 95.9 per cent of the pupils inspected was satisfactory. 0.5 per cent of the school population was found to be unclean; the national percentage was 4.

During the year much time was devoted to immunisation against Poliomyelitis and Diphtheria. At the end of the year, 56,684 children aged 6 months to 15 years had been registered for vaccination against poliomyelitis and 52,310 of these had received at least two injections. Only 2,532 had received none. The results so far achieved are very encouraging.

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, 1959.

STAFF 1958Principal 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.  
 Margaret S. Brothwood, M.B., B.S., M.R.C.S., L.R.C.P., D.C.H.  
 (appointed 1.10.58)  
 Elizabeth E. Brown, M.B., Ch.B., B.Hy., D.P.H.  
 (retired 30.9.58)  
 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.  
 Isobel R.S. Troup, M.B., Ch.B., D.P.H.  
 (appointed 1.10.58)

Principal School Dental Officer

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

School Dental Officers

A.P. Atkins, L.D.S. (part-time)  
 F. Brabington-Perry, L.D.S.R.C.S. (part-time)  
 A.A. Gardner, B.Dent.Sc.  
 P.A. McGuckin, L.D.S. (part-time)  
 H.H. Revill, L.D.S.R.C.S.

Psychiatrists (part-time)

Dorothea Norman Jones, M.A., M.B., B.Chir., D.P.H., D.P.M.  
 Judith Waterlow, M.B., B.S.

Educational Psychologist

(Vacant)

Psychiatric Social Worker

Gillian Corsellis

Orthoptist

Elizabeth C. Taylor, D.B.O.S. (nee Wild)

Speech Therapist

Bridget A. Pentland, L.C.S.T.



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, 1958, were as follows :-

County Area	...	...	...	166,220
Bedford Borough	...	...	...	59,480
Luton Borough	...	...	...	<u>118,300</u>
Administrative County	...	...	...	<u><u>344,000</u></u>

The following statement shows the number of schools in the County, excluding Bedford and Luton, on the 31st December, 1958, and the number of children on the rolls.

<u>Type of School</u>	<u>No. of Schools</u>	<u>No. on Rolls</u>
Nursery	2	112
Primary	129	15,600
Secondary	17	6,409
Technical and Grammar	4	2,162
Special	1	106
Totals	<u>153</u>	<u><u>24,389</u></u>

MEDICAL INSPECTION AND TREATMENT

There was no change in the arrangements for the medical inspection of pupils attending maintained schools in Bedfordshire during the year; they are restated below and 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, 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 action 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 1958, 67 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.

Throughout 1958 a considerable amount of extra work was done by the school medical officers in connection with Poliomyelitis vaccination, B.C.G. skin testing and vaccination, and Diphtheria immunisation. Notwithstanding this extra work, out of a total of 153 schools in the County area, 142 were inspected in 1958.

#### 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 and one full-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 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 ... ..	2,591
Second age groups ...	2,838
Third age group ... ..	<u>1,440</u>
Total ...	6,869
No. of Special inspections	<u>2,139</u>
Grand Total ...	<u>9,008</u>

TABLE I -- MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col.2	No.	% of Col.2
1954 and later	98	83	84.69	15	15.31
1953	1,093	1,021	93.41	72	6.59
1952	1,051	945	89.91	106	10.09
1951	191	170	89.01	21	10.99
1950	87	78	89.66	9	10.34
1949	71	68	95.77	3	4.23
1948	769	757	98.44	12	1.56
1947	1,450	1,437	99.10	13	0.90
1946	566	558	98.59	8	1.41
1945	53	51	96.23	2	3.77
1944	608	603	99.18	5	0.82
1943 and earlier	832	817	98.20	15	1.80
<b>Totals</b>	<b>6,869</b>	<b>6,588</b>	<b>95.91</b>	<b>281</b>	<b>4.09</b>

TABLE II -- NUMBER OF DEFECTS FOUND TO REQUIRE TREATMENT OR OBSERVATION AT MEDICAL INSPECTIONS DURING 1958

A -- PERIODIC INSPECTIONS

Defect or Disease	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin ... ..	2	40	4	11	8	28	14	79
Eyes --								
(a) Vision ...	87	518	151	31	299	87	537	636
(b) Squint ...	32	28	7	--	23	13	62	41
(c) Other ...	1	13	2	1	4	10	7	24
Ears --								
(a) Hearing ...	11	46	2	17	6	28	19	91
(b) Otitis Media	2	16	1	12	--	10	3	38
(c) Other ...	--	6	--	3	1	7	1	16
Nose and Throat	77	329	7	22	25	141	109	492
Speech ... ..	14	48	2	4	6	8	22	60
Lymphatic Glands	17	290	2	13	4	145	23	448
Heart ... ..	--	16	1	8	3	13	4	37
Lungs ... ..	6	88	3	26	4	55	13	169
Developmental --								
(a) Hernia ...	2	6	1	1	1	3	4	10
(b) Other ...	3	46	1	7	6	57	10	110
Orthopaedic --								
(a) Posture ...	2	28	3	21	5	75	10	124
(b) Feet ...	13	75	3	30	14	45	30	150
(c) Other ...	14	135	3	23	11	73	28	231
Nervous System --								
(a) Epilepsy ...	--	4	--	4	--	2	--	10
(b) Other ...	--	4	--	1	--	2	--	7
Psychological --								
(a) Development	4	22	--	6	9	28	13	56
(b) Stability	2	54	--	4	3	30	5	88
Abdomen ... ..	1	15	--	--	2	14	3	29
Other ... ..	2	17	--	6	2	19	4	42
Totals ... ..	292	1,844	193	251	436	893	921	2,988

TABLE II (Continued)

## B -- SPECIAL INSPECTIONS

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring Treatment	Requiring Observation
Skin ... ..	4	26
Eyes --		
(a) Vision ... ..	316	148
(b) Squint ... ..	5	32
(c) Other ... ..	3	5
Ears --		
(a) Hearing ... ..	7	45
(b) Otitis Media ... ..	1	11
(c) Other ... ..	--	5
Nose and Throat ... ..	52	213
Speech ... ..	23	43
Lymphatic Glands ... ..	11	166
Heart ... ..	1	22
Lungs ... ..	2	80
Developmental --		
(a) Hernia ... ..	3	9
(b) Other ... ..	7	40
Orthopaedic --		
(a) Posture ... ..	1	35
(b) Feet ... ..	7	41
(c) Other ... ..	8	72
Nervous System --		
(a) Epilepsy ... ..	--	10
(b) Other ... ..	--	4
Psychological --		
(a) Development ... ..	15	67
(b) Stability ... ..	9	71
Abdomen ... ..	--	11
Other ... ..	1	27
Totals ... ..	476	1,183

The number of individual children found to require treatment at periodic and special inspections was 1,283.

CLEANLINESS OF HEAD AND BODY

The incidence of verminous conditions is low in this county, but the rate has not been reduced in the last twelve months in spite of the use of the most modern methods for this purpose, as well as constant visits to schools and to the homes of offending families. Some immigrants have added to the difficulties that already existed because of language barriers. The school nurse continues to try to educate the hard core of offending families.

The following table gives details of the Cleanliness Inspections carried out by the School Nurses during the years 1956 to 1958.

TABLE III -- DETAILS OF CLEANLINESS INSPECTIONS CARRIED OUT BY THE SCHOOL NURSES DURING THE YEARS 1956 TO 1958

	1956	1957	1958
Number of examinations ... ..	65,008	59,107	65,568
Number of instances of uncleanliness ... ..	216	135	169
Number of individual pupils found unclean ... ..	133	113	119
Percentage of individual pupils found unclean of total school population ... ..	0.6	0.5	0.5
Number of visits to schools by school nurses for cleanliness inspections ... ..	483	444	415

#### INFECTIOUS DISEASES

TABLE IV -- NUMBER OF CASES OF INFECTIOUS DISEASE IN CHILDREN AGED 5 - 14 YEARS NOTIFIED AND CONFIRMED DURING 1958

	Bedford Borough		Luton Borough		Remainder of County		Totals	
	M.	F.	M.	F.	M.	F.	M.	F.
Scarlet Fever ... ..	13	14	14	9	36	33	63	56
Whooping Cough ... ..	21	42	9	8	53	44	83	94
Acute Poliomyelitis --								
Paralytic ... ..	--	--	--	--	--	1	--	1
Non-Paralytic ... ..	3	2	--	--	--	--	3	2
Measles ... ..	73	83	245	209	268	263	586	555
Diphtheria ... ..	--	--	--	--	--	--	--	--
Acute Pneumonia ... ..	6	4	3	2	15	7	24	13
Erysipelas ... ..	--	--	--	--	--	--	--	--
Acute Infective Encephalitis ... ..	--	--	--	--	--	--	--	--
Dysentery ... ..	2	3	3	7	29	24	34	34
Enteric or Typhoid Fever ... ..	--	--	--	--	--	--	--	--
Paratyphoid Fevers ... ..	--	--	--	--	1	--	1	--
Meningococcal Infection	--	1	--	--	--	--	--	1
Food Poisoning ... ..	1	24	3	--	1	--	5	24

### Acute Poliomyelitis

During 1958 six cases of poliomyelitis, three boys and three girls, were notified among schoolchildren in Bedfordshire, excluding Luton. A slight degree of paralysis, which cleared up entirely, was observed in one case only. In 1957 three cases out of five had paralysis of a severe degree. All six cases had had two injections of poliomyelitis vaccine which may possibly be the reason for the absence of any severe paralysis.

### Vaccination against Poliomyelitis

The campaign for vaccination was continued during the year. In September 1958, Ministry of Health Circular 20/58 was received recommending the giving of a third injection of the vaccine at an interval of at least seven months after the second, and arrangements were made to implement the recommendation. Judging from the response so far, it would appear that the great majority of parents are willing for their children to have this further protection against poliomyelitis.

### Diphtheria

No cases of diphtheria were notified amongst schoolchildren during the year. The arrangements for immunisation continued as in previous years, but were somewhat curtailed owing to the large amount of work connected with vaccination against poliomyelitis, which, however, can now be expected to diminish, and thus allow a full resumption of immunisation against diphtheria.

### Food Poisoning

A limited outbreak of food poisoning affected 24 girls attending an independent girls' school in the borough of Bedford. The illness was slight and of short duration. Five isolated cases affecting boys were also notified.

### Dysentery

The number of notified cases of dysentery in 1958 was very much less than the number notified in 1957. The cases were scattered throughout the county, there being no particular local outbreak of the disease.

### Tuberculosis

There was a slight decrease in the number of notified cases of tuberculosis, particularly of the respiratory type, in children under the age of fifteen years, while the number in the tuberculosis register at the 31st December, 1958 also showed a decrease.

### B.C.G. Vaccination of Schoolchildren

The scheme of vaccination against tuberculosis of schoolchildren by the use of B.C.G. was continued during 1958. 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 5,250 in this age-group, consents had been received in respect of 3,312 children. These children were tested; 2,843 were found to be non-immune and 469 were immune. Of the children who were non-immune, 2,790 received protection with the B.C.G. vaccine.

TABLE V -- NUMBER OF CHILDREN UNDER THE AGE OF 15 YEARS NOTIFIED FOR THE FIRST TIME DURING 1958 AS SUFFERING FROM TUBERCULOSIS, RESPIRATORY AND NON-RESPIRATORY

District	Respiratory			Non-Respiratory		
	Boys	Girls	Total	Boys	Girls	Total
Bedford Borough ...	2	1	3	--	1	1
Luton Borough ...	4	4	8	2	1	3
Remainder of County	2	6	8	1	3	4
Totals ...	8	11	19	3	5	8

TABLE VI -- NUMBER OF CHILDREN UNDER THE AGE OF 15 YEARS ON THE TUBERCULOSIS REGISTER AT 31ST DECEMBER, 1958

District	Respiratory			Non-Respiratory		
	Boys	Girls	Total	Boys	Girls	Total
Bedford Borough ...	15	20	35	5	9	14
Luton Borough ...	38	22	60	5	8	13
Remainder of County	31	32	63	14	22	36
Totals ...	84	74	158	24	39	63

#### TREATMENT OF DEFECTS

##### Minor Ailments

During the year Minor Ailments Clinics were held at Dunstable and Leighton Buzzard. These clinics opened on one morning a week, a medical officer attending fortnightly. The figures for the past ten years of the number of children who attended the clinics are given below :-

1949 ...	690	1954 ...	527
1950 ...	695	1955 ...	418
1951 ...	963	1956 ...	323
1952 ...	653	1957 ...	243
1953 ...	532	1958 ...	197

The total number of attendances in 1958 was 239.

The clinics are also used for 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. Sessions for poliomyelitis vaccination were also held at the Minor Ailments Clinics.

##### Ophthalmic Treatment

During the year, 741 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.

	<u>Number of Cases seen by Ophthalmic Surgeons</u>
Errors of refraction, including squint	1,589
Number of pupils for whom spectacles were prescribed ... ..	1,282

#### Replacement or Repair of Glasses for Schoolchildren

The National Health Service (Supplementary Ophthalmic Services) Regulations, 1948, provide for the replacement or repair of schoolchildren's glasses by opticians without seeking the prior approval of the Local Ophthalmic Services Committee and without asking for the payment of a deposit by the parent or guardian. This service ensures that, when necessary, children's glasses are repaired or replaced without delay. Parents may obtain forms for the replacement or repair of glasses for schoolchildren from head teachers and school nurses or from the Health Department. The parent or guardian or other person having charge of the pupil is required to give a brief statement on the form of the cause of loss or damage.

If, on investigation of the circumstances necessitating the replacement of the glasses, the Ophthalmic Services Committee determine that they involved lack of care on the part of the pupil, the Executive Council is, after giving written notice, entitled to recover the cost of the service from the Local Education Authority. This provision enables the Education Committee to fulfil its statutory duty to provide free medical treatment for pupils attending maintained schools. The amount claimed from the Education Committee by the Bedfordshire National Health Service Executive Council under these Regulations for the financial year 1957/58 was £56 18s. 7d. Of the 73 cases of repair or replacement of glasses charged to the Education Committee, 53 were boys and 20 were girls.

#### Orthoptic Treatment

During the year attendances were fairly good in the department, six sessions being held at St. Peter's Clinic each week, and four at Dallow Road, Luton. There is again a waiting list at Luton, and scope for a full-time Orthoptist to treat the large number of children attending -- four sessions a week is inadequate.

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

Number of tests ... ..	835
Number of treatments given ... ..	112
Number of new cases ... ..	76
Number of children treated ... ..	29
Total number of attendances ... ..	1,023
Discharges --	
Cured ... ..	26
Improved ... ..	20
Good cosmetic result ... ..	10
Refused operation ... ..	3
Failed to attend ... ..	11
Nothing abnormal discovered ... ..	3
Left district ... ..	3
Not improved ... ..	2
Unsuitable for treatment ... ..	3

Speech Therapy

Children with speech defects, residing in the County area of Bedford, received treatment at the following Clinics :-

Bedford, St. Peter's	...	Monday and Wednesday
Biggleswade, The Lawns	...	Thursday
Dunstable, Kingsway	...	Friday

A weekly average of 40 children from this area has received regular treatment. Prospective patients and their parents are also seen by appointment. Of the cases selected, a large number have articulatory disorders of speech (dyslalia), varying in severity from multiple defects resulting in almost unintelligible speech to a single consonant drawing unnecessary attention to speech. These defects are only occasionally associated with abnormal anatomical structure so readily suggested by many parents.

A partial loss of hearing has been queried in several cases for which audiometer tests have been requested. Some of these have revealed a slight loss of hearing, though in no case sufficient for an aid to be recommended. The advice of the Child Guidance Clinic has been valuable in several cases.

Disorders associated with mental retardation are, of necessity, longer-term cases though results on a comparative basis have been encouraging. The child with a stammer also attends for a longer period as any permanent improvement in fluency is such a gradual process. In all the cases the results of treatment depend largely on the co-operation of the parents concerned.

Schools in the area still continue to be visited. Head teachers have been helpful and in many cases anxious for pupils to commence treatment. Unfortunately the waiting list is such that delay in treatment is inevitable. The list continues to increase. Throughout the year there has been, as usual, a noticeable fall in attendances during school holidays. It is to be regretted that parents in spite of requests do not always notify the Clinic in cases of absence.

Condition	No. Treated	Deferred and under observation	Discharged	Condition on Discharge		
				Cured	Improved	No Improvement
Dyslalia (not associated with mental retardation)	48	7	20	15	5	--
Dyslalia (associated with mental retardation)	10	1	3	1	1	1
Stammer	23	4	8	5	3	--
Developmental aphasia (language disorder)	1	--	--	--	--	--
Partially deaf	2	1	--	--	--	--

Total attendances: 1,231

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 1958.

<u>Received Operative Treatment</u>	<u>Bedford Hospital</u>	<u>Luton and Dunstable Hospital</u>
(a) for diseases of the ear	9	10
(b) for adenoids and chronic tonsillitis ... ..	325	628
(c) for other nose and throat conditions ... ..	43	4
(d) received other forms of treatment ... ..	<u>19</u>	<u>54</u>
Totals ...	<u>396</u>	<u>696</u>

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 <sup>b</sup> 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 1 session weekly 2 sessions weekly By arrangement
1 Grovebury Road, Leighton Buzzard	Dental* Minor Ailments	Sessions as required 1 session 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.

<sup>b</sup> Orthoptic 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 GuidanceBedford St. Peter's Child Guidance Clinic

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

" The Child Guidance Clinic's work is aimed at finding out why children are showing disturbances of health or behaviour or school work, which prevent them from living a normal and happy life, and cause concern to parents, teachers and all those responsible for their welfare. The Clinic aims, where possible, to give advice and treatment designed to relieve the stresses which cause these disturbances, and to enable the children to make full use of their opportunities.

Owing to shortage of time which can be spared for treatment, the Clinic has been unable to take on more than a small proportion of urgent cases for treatment during the year. Many more children than can be treated with our present staffing facilities require therapy, and we constantly regret having to deny parents and children this help.

This has been a better year in some ways for the Bedford Child Guidance Clinic, as there has been a Psychiatrist two days a week and a Psychiatric Social Worker three days a week for the whole year, but the work has been hampered as educational problems could not be dealt with owing to the lack of an educational psychologist, the third member of the Child Guidance Team. The School Medical Officers gave valuable help in testing during this gap.

We are looking forward to 1959, when on the 1st January, Miss Joyce, Educational Psychologist, takes up her appointment, and there will be a full team in the Child Guidance Clinic for the first time.

The length of time children have to wait before being seen has been reduced considerably. In December 1957 there were 42 cases on the waiting list; the average wait of those eventually seen was 11½ months, two had waited for two years and nine had been waiting for over one year. In December 1958 there were 34 cases on the waiting list and their average wait was 3½ months. Some very urgent cases have, of course, been seen at very short notice.

There were 58 new cases seen during the year, the reasons for referral being as follows :-

<u>Reason</u>	<u>Number Seen</u>
Behaviour disorder ... ..	20
Anxiety state ... ..	3
Educational difficulties ... ..	6
Delinquency ... ..	5
Depressive illness ... ..	3
Refusal to attend school ... ..	4
Bedwetting and soiling ... ..	7
Brain damage or psychotic ... ..	5
Psychosomatic ... ..	2
Obsessional state ... ..	1
Parental difficulties... ..	2
Total ... ..	<u>58</u>

Of the new cases seen during 1958, the sources of referral were :-

	<u>Number</u>
School Medical Officers ... ..	19
Hospital Specialists ... ..	17
Family Doctors ... ..	10
Director of Education and staff ... ..	3
Juvenile Courts ... ..	4
Parents ..1 ... ..	2
Probation Officers ... ..	2
N.S.P.C.C. ... ..	<u>1</u>
Total ...	<u>58</u>

The recommendations for new cases seen were :-

	<u>Number</u>
Therapy ... ..	19
Supervision ... ..	18
Residential placement ... ..	4
Refer to Educational Psychologist ... ..	5
Consultation only ... ..	<u>12</u>
Total ...	<u>58</u>

At the end of the year there were 17 children under treatment, 92 under supervision, 16 under supervision at residential schools, and three under supervision at "Heathwood".

#### Placements

- 3 children were recommended for admission to "Heathwood".
- 7 children were recommended for admission to other special schools or hostels for maladjusted children.
- 6 children were recommended for discharge from "Heathwood" as "improved".
- 4 children were recommended for admission to Psychiatric Hospitals.

#### Cases Closed

59 cases were closed during the year, for reasons as under :-

	<u>Number</u>
Consultation only ... ..	12
Improved ... ..	30
Over School age ... ..	2
Moved from the district ... ..	5
Transferred to other agencies ... ..	<u>10</u>
Total ...	<u>59</u>

We were very sorry to lose Miss Smith, our Secretary, who had served the Clinic so well for five years, though glad to report that she was accepted for training as a teacher. Her place has been ably taken by Miss Kelly."

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 :-

" The work of the Child Guidance Clinic at Dunstable proceeded as usual throughout the year. The work was handicapped by the lack of help from an Educational Psychologist, and the appointment of one at the beginning of 1959 is greatly welcomed. Owing to shortage of psychiatric time, the waiting list of cases for diagnosis remained a long one, 19 being still on the list at the end of the year as compared with 18 at the end of the previous year. The average time of waiting of new cases was 6½ months, but a number of urgent problems were seen after a very short wait only.

22 new cases were seen during the year. The reasons for referral of these were :-

<u>Reason</u>	<u>Number</u>
Behaviour disorder ... ..	9
Anxiety state ... ..	2
Educational difficulties ... ..	3
Delinquency ... ..	1
Depressive illness ... ..	3
School refusal ... ..	3
Parental difficulties ... ..	<u>1</u>
Total ...	<u>22</u>

The sources of referral of these cases were :-

	<u>Number</u>
School Medical Officers ... ..	5
Hospital Specialists ... ..	7
Director of Education and his staff ... ..	4
Juvenile Court ... ..	1
Probation Officers ... ..	2
Parents ... ..	2
Welfare Officer ... ..	<u>1</u>
Total ...	<u>22</u>

The outcome of these cases was as follows :-

	<u>Number</u>
Consultation and advice only ... ..	3
Taken on for treatment ... ..	3
Taken on for supervision ... ..	10
Referred to Educational Psychologist ... ..	1
Recommended for residential placement ... ..	3
Recommended for treatment when available ... ..	<u>2</u>
Total ...	<u>22</u>

At the end of the year six children were under active treatment, and 55 were under supervision. A number of these were seen at fairly frequent intervals, but really needed intensive treatment, which was not possible owing to the lack of time available for therapy.

Eight children were placed away from home :-

3 at "Heathwood"

- 3 in Special Residential Schools for Maladjusted Children
- 1 at St. Margaret's E.S.N. Residential School
- 1 was admitted to the Juvenile Unit, St. Ebba's Mental Hospital

The children at "Heathwood" were seen there frequently and are making good progress, and the children at boarding schools were seen during the holidays.

The secretarial help of Mrs. Edwards throughout the year has been very greatly appreciated."

#### Heathwood Hostel

Heathwood Hostel has once more proved itself during this year as being of very great value for the placement of children in a homely and tolerant group-atmosphere, when their own home conditions have been such as to make any progress at home impossible.

Eight children were admitted during the year, two from the Bedford area, three from Dunstable and three from Luton. Eight were discharged, six of these from Bedford had much improved and have since continued to do well; one from Luton had also much improved, but has subsequently relapsed under difficult home circumstances and is under treatment at the Luton Clinic; and one girl, in Care with the Children's Department, had reached leaving age, returned to the care of the Children's Department, and is holding her own in the community. One very acutely disturbed girl had to be transferred to Three Counties Hospital, and later to the Adolescent Unit at Maudsley Hospital. At the end of the year four children were still at "Heathwood" who had been admitted before this year. Three children who were admitted because of failure to attend school are now attending regularly and without difficulty.

The two psychiatrists visit "Heathwood" regularly, and very close contact is maintained by the Psychiatric Social Workers with the "Heathwood" staff, all with the object of allowing for the fullest possible individual attention to each child and family concerned. At "Heathwood" itself, in addition to the general homeliness and friendliness of the atmosphere, each individual child has the opportunity and encouragement to develop his or her own pattern of relationships with the staff and other children, with the opportunity of working through their difficulties in this respect in a more stable and controlled setting than had been possible at home, and with much understanding and help over their personal difficulties. Great credit must be given to the unflagging interest and patience of the staff, the more so because a number of the children admitted have exhibited difficult disturbances of behaviour which cannot be expected to improve rapidly. Much time and help is also given by the staff to parents, whose visits are encouraged.

Inevitably some of the children carry their difficulties into the school setting. The co-operation of the local head teachers concerned and the help they give these children is very much appreciated.

#### HANDICAPPED PUPILS

During 1958, 211 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. During the year one blind child was newly assessed as needing special educational treatment at a special school.

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

	<u>Boys</u>	<u>Girls</u>
Bernhard Baron Sunshine House Nursery School, Kingswinford, Staffs. ... ..	--	1
Dorton House School, Seal, Sevenoaks, Kent	--	2
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-schoolchildren 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.

Some partially-deaf children are able to continue their education in an ordinary school with the help of a deaf aid. Eight such children



were kept under supervision during the year, and where necessary received instruction in lip reading. Two partially deaf pupils were ascertained during the year.

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

	Boys	Girls
Wessington Court, Woolhope, Hereford ...	1	--
Summerfield House School, Malvern, Worcs.	1	--
St. John's School for the Deaf, Boston Spa, Yorks. ... ..	1	--
Llandrindod Wells School, Llandrindod Wells, Radnor ... ..	1	--
Leems House School, Farnley, Leeds ...	3	--
Royal School for Deaf Children, Margate, Kent ... ..	2	2
Donnington Lodge School, Newbury, Berks.	--	2
Royal Cross School for the Deaf, Preston, Lancs. ... ..	1	--
Hamilton Lodge School, Brighton, Sussex	2	--
Mary Hare Grammar School for the Deaf, Newbury, Berks. ... ..	1	--
Tewin Water School, Herts. ... ..	1	2
Miss Fearnley's School, Watford, Herts.	--	1
Portley House, Caterham, Surrey ...	--	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.

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
Farmhill House, Stroud . Gloucestershire	2	2
Knotty Green School, Beaconsfield, Bucks.	--	1
St. Margaret's School, Great Gaddesden, Herts. ... ..	53	25
Hilton Grange, Bramhope, Yorks. ...	1	--
Besford Court School, Worcester ...	1	--
Rudolf Steiner School, Camphill, Aberdeen	1	1
The Sheilings School, Ringwood, Hants.	2	3
Osborne Road Day Special School, Luton.	2	1

	<u>Boys</u>	<u>Girls</u>
Miss Perkins' Day School, Bedford ...	1	--
Pield Heath House Roman Catholic School, Hillingdon, Middlesex ... ..	--	2
St. Christopher's School, Bristol, Gloucs.	2	--
Meadows House, Southborough, Kent ...	4	--
Thornbury Park School, Bristol, Gloucs.	2	1
Potterspury Lodge, Towcester, Northants.	1	--

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.

At the end of the year, in the County, excluding Luton, three epileptic schoolchildren were receiving special educational treatment in boarding schools. A child who had for some years attended a boarding school, improved sufficiently to enable him to attend a small independent day school in Bedford. 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, Gloucs. ... ..	1	--
Miss Perkins' School, Bedford ... ..	1	--

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.

Nine 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>
St. Francis Home, Shefford, Beds. ...	1	--
Colne Cottage Hostel, Cromer, Norfolk ...	--	1
The Caldecott Community School, Mersham- le-Hatch, Ashford, Kent ... ..	1	--
Odam 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	--
Horrcastle, East Grinstead, Sussex ...	1	--
Morley Hall Hostel, Wymondham, Norfolk	2	--
Finchden Manor, Canterbury, Kent ... ..	1	--
Redhill School, East Sutton, Kent ...	1	--
St. Joseph's School, Finchley, London ...	--	1
Heathwood Hostel, Leighton Buzzard, Beds.	3	8
Aethelmar School, Fivehead, near Taunton, Somerset ... ..	2	--

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.

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

In the county, excluding Luton, the names of 49 children were on the register of physically handicapped children at the end of 1958. They may be grouped as follows :-

Tuberculosis ... ..	3
Cerebral Palsy ... ..	18
Post-Polio Paresis ... ..	4
Other Orthopaedic Conditions	11
Heart and Circulation ...	5
Congenital Abnormalities ...	<u>8</u>
Total ...	<u>49</u>

Special Schools and Hospital Special Schools which Physically-Handicapped Pupils from Bedfordshire, excluding Luton, are attending :-

	<u>Boys</u>	<u>Girls</u>
The Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry, Salop ... ..	--	1

	<u>Boys</u>	<u>Girls</u>
Barleythorpe Hall School for Crippled Girls, Oakham, Rutland ... ..	--	1
Heritage Craft Schools and Hospitals, Chailey, East Sussex ... ..	1	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
Elmfield School, Harpenden, Herts. ... ..	--	2
The Palace School, Ely, Cambs. ... ..	--	1
The John Greenwood Shipman Home, Northampton ... ..	1	--
Penhurst Residential Special School, Chipping Norton, Oxon. ... ..	1	--
Royal National Orthopaedic Hospital, Stanmore, Middlesex ... ..	2	--

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.

The Moor House School, Oxted, Surrey is a special school for pupils with speech defects. One child is on the waiting list for admission to this School.

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.

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

	<u>Boys</u>	<u>Girls</u>
St. Catherine's Home, Ventnor, Isle-of-Wight ... ..	1	2
St. Vincent's Open Air School, St. Leonards-on Sea, Sussex ... ..	--	1
St. Patrick's Open Air School, Hayling Island, Hants. ... ..	--	2
Miss Perkins' School, Bedford ... ..	--	1
Ogilvie School, Clacton-on-Sea, Essex ... ..	--	1
St. John's Open Air School, Woodford Bridge, Essex ... ..	1	--
Palingswick House Home Diabetic Unit, Hammersmith, London ... ..	1	--

	<u>Boys</u>	<u>Girls</u>
Broomhayes Nursery, Northam, Devon ...	--	1
Fairey Cottage School, Harrold, Beds. ...	---	1

The following article on "The Care of Physically Handicapped Children in a Rural Community" by Dr. Cicely Steer was published in the March 1959 issue of the *Woman Health Officer*, and it is reproduced by kind permission of the Editor.

" Looking after physically-handicapped children in a rural community presents different and more varied problems from those encountered in the larger towns. As in urban areas, the problem of physically defective children may be complicated by mental retardation, but I do not propose to deal with this problem here.

" Although the Education Authority is responsible in theory for seeing that these children receive all necessary treatment, in practice the school doctor is mainly concerned in making recommendations to the Education Authority in order that an adequate education may be provided for them.

" In nearly all cases medical treatment has been provided through the normal health services before the child is brought to the notice of the School Medical Officer. But in some instances in country districts the school doctor may have to help arrange for this with the co-operation of the family doctor, as even nowadays the countryman is often inclined to accept disabilities in his children in a fatalistic way, and to be unwilling to undertake long and tedious treatment. He is often less willing to allow his children to go into hospital, and more wary of operations, than his town counterpart. In this connection I sometimes contrast the months of patient persuasion which are needed to persuade country people to agree to the least dangerous heart operations with the alacrity with which some parents will rush their children to America for last-chance 'hole-in-the-heart' operations; at least according to the *Daily Press*! So it is not uncommon, even today, in country districts, to find children who have reached school age without having had adequate or full treatment for their defects. The first concern of the medical officer and health visitor under these circumstances must be to gain the confidence and co-operation of the parents, and to persuade them into obtaining the necessary treatment.

" But usually it will be found that the health visitor of the district has known all about any physically-handicapped children from birth, and has taken steps to inform the school medical officer about them before the question of their education arises; indeed, in the case of blind, deaf and some spastic children, the health authorities will probably be taking an active interest in them from a very early age.

" Many of these children, besides being unable to attend ordinary schools because of the defect, will also require continuous treatment such as physiotherapy or specialised care and training, as in the case of the blind or deaf. In country districts these requirements can often only be met by getting the child admitted to a residential school. This suggestion usually meets with rigid opposition from the parents, and all aspects of the question must be carefully considered before such a course is insisted on. It is nearly always possible to arrange for any physical treatment necessary, although distances and difficulty of transport may make this difficult. In most cases I venture to say that most mothers are able to master the simple movements and exercises needed by their children, and will do so if encouraged to believe they can. With the continuous interest of all concerned with the care of the child, and supervision from the physiotherapist occasionally, it is

in my opinion quite possible for children such as spastics to progress quite as well at home as those receiving daily treatment in residential institutions.

" The blind and the totally deaf will almost certainly have to go away from home in country districts when they reach the age of five years. Before this age it may be unavoidable if the home conditions are poor and the parents of too low intelligence to be able to follow suggestions and ideas for training their children. Often pressure is brought to bear upon parents of this type of child to part with them at a very early age, but the possible benefits of life in a specialised institution for such young infants are to my mind outweighed by the grave disadvantages of loss of home life and mother-love. It is sometimes possible to arrange for the mother and child to go away together for a short period (in the case of deaf children), and for the mother to be trained how best to help her child when she brings him home again. This is much to be preferred to sending an infant away alone, and it must also be remembered that children removed from their homes are much more likely to be rejected by their parents later on than those who have been dependent on their parents and have needed much care and many sacrifices in their early years.

" It will be seen from the foregoing that in my opinion a child, even those living in remote country districts, should only be sent to a residential school as a last resort while he is still very young, and it is worthwhile to go to much trouble to ensure that he is able to receive proper care and education at home in his early years. This is of course more difficult in country districts, but not impossible. Usually no day special school is available, even at the cost of a long daily journey by car or ambulance. So either education by means of a home teacher must be provided, or arrangements must be made for the child to attend the ordinary school. In small village schools the latter is by no means an impossibility, even with grossly disabled children, particularly if they are of normal intelligence. Although at first the teacher may require much persuasion to take the task on, having done so he will usually find it very worthwhile. If it is possible for the child to attend the ordinary school this also helps to keep him within the framework of the local community. Other children brought up there with him soon treat him as one of themselves, and are friendly and protective towards him; and as he grows older he is not looked upon as a freak or somebody to be frightened of.

" Sometimes it will be necessary to arrange transport to school, and occasionally it will be found possible to fit a disabled child into a smaller, or more convenient school than the one he would normally attend, although this school may be further away from his home.

" A mother who is anxious to keep her child at home will often arrange to attend at the school during the day at 'break' to help with the child. All this puts a strain on the teacher, and is only possible in schools where they are not already overworked. It is unreasonable to expect too much attention to any one child in a large school. But in the area in which I work we have children paralysed from poliomyelitis, and several cerebral palsied children of fairly normal mentality, attending the rural schools; also several children suffering from heart lesions, and two or three partially-sighted children and partially-deaf children. Special arrangements have sometimes to be made for them, and special apparatus provided. It is my opinion that these children develop more normally than those sent to specialised institutions.

" However co-operative the village schools are, there will still remain some children whom it is impossible to fit into the ordinary school and for whom arrangements must be made either in residential schools or at home. Deaf or blind children can usually only be educated in special schools when they reach school age, and the very

badly disabled or incontinent cannot usually be accommodated in normal schools.

" Many crippled children will progress very well if a home teacher can visit them, even if only for a few hours weekly, and for the young crippled child this appears to me to be preferable to life in a residential school. Often retired and married women teachers or teachers at the local school will undertake this work, and can often help the child considerably in his general development, by seeing that he is included in the general life of the village

" If it is decided that a child is to remain at home, one must ensure that he does not become isolated from other people, especially other children. Sometimes parents, from false feelings of shame or guilt, will try to keep their child out of the public eye and away even from friendly neighbours. Others cannot bear their child to be pitied; so it must be the task of all health officers to see that the parents are brought to understand that this over-protective attitude is not good for the child. Fortunately in the country the barrier can be broken down more easily than in towns, as a small community soon accepts the disabled child, and curious glances and hurtful remarks soon cease. However, it is often quite difficult to persuade the parents of this, and for them to allow other children to play with the child in as normal a way as possible.

" In all cases it is certain that these children and their parents greatly appreciate a warm and friendly interest from all those 'officers' engaged in trying to help the child, and whatever benefits can be arranged for the child are of secondary importance to the feeling that a genuine interest is being taken in his welfare".

#### Examinations under Sections 34 and 57 of the Education Act, 1944

Section 34 of the Act places a duty on local Education Authorities to discover those children who require special educational treatment, and to provide such treatment as may be necessary unless the parents make suitable provision themselves.

Some children are discovered by school medical officers at the annual medical inspections at the schools; some are reported by teachers; some are referred by hospital specialists even before they reach school age. Reports on handicapped children are also received from health visitors and school enquiry officers, and also from family doctors.

These examinations are undertaken by the school medical officers and form the basis of the advice given to the Education Authority by their approved medical officers both as to the need for and the type of special educational treatment that should be given to the child and also on the question whether a child is ineducable and should be reported to the Local Health Authority. The child's future welfare in all its aspects may depend on the result of these examinations.

53 children thought to have a disability of mind were examined during 1958. They were referred to the School Health Service by head teachers because of retardation at school. Before the examinations took place reports were obtained from the head and class teachers. The following recommendations on the 53 children examined were placed before the Education Committee. 24 were recommended for admission to residential special schools for educationally sub-normal pupils, 26 were recommended for special educational treatment in ordinary schools, and three were recommended for home tuition.

The majority of these children were examined in their own homes. Where, however, this was not convenient the head teacher of the school concerned provided a room or the examinations were held at one of the

school clinics.

Parents are told at the time of the examination the recommendation of the doctor on their children. If the recommendation is accepted by the Education Committee then they are notified by post and told what steps can be taken to implement the recommendation.

Section 57 of the Education Act, 1944, is concerned with the duty of local Education Authorities to report to the local Health Authority those children who have a disability of mind which makes them incapable of receiving education at school.

If a child, though severely mentally retarded, is sufficiently developed to attend school, he is given a trial in an ordinary or a special school, and he is re-examined at appropriate intervals. Only after such a trial period, and when it is manifest that the child is making no progress at all, are arrangements made for his examination in accordance with the provisions of Section 57 of the Education Act, 1944.

Before any child is medically examined under this section of the Act the Committee considers the available evidence and if it appears to them that a child is suffering from a disability of mind of such a nature and to such an extent as to make him incapable of receiving education at school it is their duty by notice in writing served upon the parent to require the parent to submit the child for examination. Following the examination the Principal School Medical Officer advises the Committee. If, after considering this advice and any other reports or information from teachers and other persons with respect to the child's ability and aptitudes, the Committee decide the child is ineducable, the parents are given 14 days' notice in writing of their intention to issue a report to the local health authority that the child is considered to be ineducable. This gives the parents an opportunity of lodging an appeal with the Minister against the decision of the Authority.

A number of appeals made by parents to the Minister of Education arise apparently out of fear of the child's removal from home. Ministry of Education Circular 146 dated June 1947 suggested that it would save parents distress and anxiety if the formal notifications of these examinations were taken to the parents by an officer of the Authority. In Bedfordshire this has been done for some years, the parents being visited by one of the mental health workers. This visit enables him to make an early contact with the family and explain to them the facilities that are available for mentally retarded children.

If the Education Committee are satisfied that any child attending a maintained school will require supervision after leaving school, Section 57(5) of the Education Act, 1944 makes provision, before the child leaves school, for a report to be issued to the local health authority and to the parent that by reason of a disability of mind the child may require supervision after leaving school.

The supervision takes the form of visits to the home by the mental health workers who give such help, advice and practical assistance as may be necessary both to the child and the parents.

During the calendar year ended the 31st December, 1958, nine children were reported to the local health authority under Section 57(3) and under Section 57(5) five children were reported.

#### Further Education and Training

On reaching school leaving age handicapped pupils are treated as far as possible as normal young people, with 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 1957/58 gives details of what is done for handicapped pupils when they are old enough to leave school. Despite the sympathetic and co-operative attitude of employers it was a little more difficult during 1958 to find suitable work for handicapped boys and girls.

" Apart from the pupils who although handicapped, attended normal schools, the Authority continued its arrangements for boys and girls who were due to leave Special Schools. Young people attending Special Schools outside the County were, wherever possible, interviewed with their parents during their last school holiday.

" At St. Margaret's Special School for Educationally Sub-normal children, 20 boys and girls were interviewed in their penultimate term and most of these were also seen during their last school holiday. The records of those whose homes were outside the County, were sent to their respective Youth Employment Officers. At Osborne Road Special School, Luton, eight boys and girls were interviewed.

" New registrations under the Disabled Persons (Employment) Act, 1958, numbered 16 and there was a total of 22 boys and girls on this Register on 30th September, 1958. It was a little more difficult to find suitable openings for disabled boys and girls during the year but employers continued to be both sympathetic and co-operative."

TABLE X -- NUMBER OF HANDICAPPED PUPILS IN THE COUNTY, EXCLUDING LUTON, WHO IN 1958 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 1958 were :-	
	Newly placed	Newly ascertained
Blind ... ..	1	1
Partially Sighted ... ..	--	--
Deaf ... ..	1	--
Partially Deaf ... ..	2	2
Delicate ... ..	13	14
Physically Handicapped ... ..	1	4
Educationally Sub-Normal ... ..	21	35
Maladjusted ... ..	10	9
Epileptic ... ..	1	1
Totals ... ..	50	66

#### 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 bene-

fit from his education.

271 children were examined during 1958 and certificates of fitness were granted in all cases.

TABLE XI -- EDUCATIONAL ARRANGEMENTS FOR HANDICAPPED PUPILS IN THE COUNTY, EXCLUDING LUTON, 1958

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 ... ..	4	--	--	4	1	1
Partially Sighted	3	--	--	3	1	--
Deaf ... ..	11	--	3	14	--	--
Partially Deaf	6	--	2	8	--	1
Delicate ... ..	8	1	3	12	--	1
Physically Handicapped ...	3	--	7	10	11	4
Educationally Sub-normal ...	87	--	18	105	9	63
Maladjusted ...	4	13	13	30	--	1
Epileptic ... ..	3	--	1	4	--	--
Totals ... ..	129	14	47	190	22	71

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

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 teachers entering the profession for the first time are medically examined. The following statement shows the number of medical examinations carried out during 1958 :-

Entrants to Training Colleges (Form 4 RTC)	49
Employment as teachers by the Bedfordshire Education Committee (Form 28 RQ) ... ..	17
Forms 28 RQ completed for other Education Authorities ... ..	<u>3</u>
Total ...	<u>69</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 1958
Middx.	Royal National Orthopaedic Hospital School, Stanmore ... ..	4
"	Mount Vernon Hospital, Norwood ...	2
"	Clare Hall Hospital Special School	3
"	Winifred House Hospital Special School	3
L.C.C.	Westminster Children's Hospital ...	1
"	Guy's Evelina Children's Hospital Special School... ..	2
"	Great Ormond Street Hospital for Sick Children ... ..	1
"	St. Bartholomew's Hospital Special School ... ..	1
"	Maudsley and Bethlem Hospital Special School ... ..	2
Bucks.	Stoke Mandeville Hospital ... ..	2
Cambs.	Addenbrookes Hospital, Cambridge ...	3
Surrey	Queen Mary's Hospital for Children, Carshalton ... ..	1
Wilts.	Marlborough Children's Convalescent Hospital ... ..	3
Berks.	Heatherwood Hospital Special School	1
Northants.	Manfield Hospital Special School, Northampton ... ..	1
"	John Greenwood Hospital Special School, Northampton ... ..	1
Salop.	Orthopaedic Hospital Special School, Oswestry ... ..	1
Herts.	Lister Hospital, Hitchin ... ..	1
	Total ...	<u>33</u>

BACTERIOLOGICAL EXAMINATION OF MILK

During the year 303 samples of milk were taken from retailers supplying milk to the 152 maintained schools in the County, excluding Bedford and Luton.

TABLE XIII -- NUMBER OF SAMPLES OF MILK SUBMITTED FOR BACTERIOLOGICAL EXAMINATION DURING 1958

Classi- fication	Routine Samples		First Follow-Up		Second Follow-Up		Third Follow-Up		Total No. of Samples Taken		
	Sat.	Unsat.	Total	Sat.	Unsat.	Total	Sat.	Unsat.		Total	
Samples taken from Schools	287	7	294	6	1	7	--	1	1	1*	303

\* A Satisfactory sample was subsequently obtained after advice had been given following a thorough investigation of the pasteurising plant at the dairy concerned.

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 1958, all the 152 schools received heat-treated milk. Approximately 79 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 BUILDINGS

The County Architect has supplied the following information on school buildings. During the year two new schools were completed, both with sanitation on the water carriage system. One at Wilstead was opened in September and one at Studham was completed in December. In addition, the following improvements were completed during 1958 :-

<u>Name of School</u>	<u>Improvements carried out</u>
Sharnbrook County Primary	) Connection to sewer.
Felmersham County Primary	
Harrold County Primary & Secondary	
Biggleswade Voluntary Primary	) Improvements to staff sanitation.
Northfields County Secondary, Dunstable	
Mary Bassett County Secondary, Leighton Buzzard	
Pavenham County Primary	) New classroom and new lavatory block.
Southill County Primary	) Conversion to water closets.
Great Barford County Primary	
Haynes County Primary	
Biggleswade County Primary Infants	) Additional wash basins.
Steppingley County Primary	) Additional urinal and drainage. Water heater.

The 1959/60 building programme makes provision for the following improvements to be carried out during the year :-

<u>Name of School</u>	<u>Improvements to be carried out</u>
Maulden County Primary	) Conversion to water carriage system.
Carlton Voluntary Primary	
Odell County Primary	) Conversion to water carriage system in hand. New sanitary block.
Southill County Primary	) Replacement canteen.
Harrold County Primary & Secondary	) New Canteen.
Dunstable Icknield County Primary	) Improvement to staff lavatories.

<u>Name of School</u>	<u>Improvements to be carried out</u>
Dunstable Priory County Secondary	Medical Inspection and Rest Room.
Biggleswade Controlled Voluntary Primary	Medical Inspection Room.

#### SCHOOL CANTEENS

Inspection of hygiene in 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.

#### REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

It is regretted that no change for the better can be reported for the year 1958. Routine inspections have been made and treatment offered where necessary. The static clinics and, to a more limited extent, the mobile clinics have been used. It has not been possible to inspect and treat all the schools in the County; in fact, as the position worsens, due to staff shortage, less time will be available.

In all dental reports throughout the country staff shortage is sure to be the subject of a paragraph at least. This Authority is no exception -- the resignation of Mr. Atkins and Mrs. Milnes over a year ago has made a big difference in our organisation. Repeated advertisements in both the lay and professional press have failed to bring one application for the vacancies. The assistance given by Mr. McGuckin, a part-time officer, at St. Peter's Clinic has gradually been reduced and early in 1959 will cease altogether. It has been found necessary almost to close the Biggleswade Clinic and to put one mobile clinic in store. The whole position is one of frustration, and under present conditions there seems to be no way of escape from it. Young dentists are not attracted to the service as a career; part-time appointments while building up private practices are the principal attraction. There are more dentists over 60 years of age in the Service than under 30, which does not show any promise for the future.

During the difficult period of recruiting dental surgeons to the Service, it is suggested that any more clinics should have provision for a dental surgery, but no consideration be given to equipping in the interest of economy except for a clinic replacing an active clinic.

Orthodontic clinics continued to be held and with our reduced staff it would appear that too much time is devoted to this form of treatment. Orthodontic treatment is prolonged and once started cannot be given up half-way through so that when a member of the staff leaves any cases in hand have to be taken over by the remaining staff, so we get a build-up which is difficult to control. Cases referred by private practitioners, when added to our own cases, set a problem of deciding when to refuse. Lack of orthodontic treatment can handicap a child throughout life and such treatment should rank as priority, but with routine treatment piling up, the problem seems almost insoluble. In our difficulties we should not lose sight of the fact that the parents still want treatment for their children and look to the clinics to provide it.



## ANNUAL REPORT

of the

DIVISIONAL SCHOOL MEDICAL OFFICER

of the

BEDFORD DIVISIONAL EXECUTIVE

for the year 1958STAFFDivisional School Medical Officer

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

School Medical OfficersFrances Anne Williams, M.B., B.S.(Lond.), M.R.C.S.,  
L.R.C.P., D.P.H.(Vict.). (Resigned 13.4.58)R.G. Hendry, M.B., Ch.B., D.P.H., D.R.C.O.G.  
(Appointed 1.5.58)School Nurse

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

Dr. Frances A. Williams resigned her appointment as School Medical Officer to take up work in private practice in the County and I take this opportunity of recording my sincere thanks for her services as a School Medical Officer. Dr. Williams served in this capacity for ten years, and on the death of Dr. G.K. Bowes in October, 1955, she acted as Divisional School Medical Officer in a very able way until my appointment.

On her resignation, Dr. R.G. Hendry was appointed and he commenced duties on the 1st May, 1958.

In view of the coming into operation of the B.C.G. vaccination and poliomyelitis vaccination schemes in the Northern Division of the County it became necessary to engage the services of private doctors on a sessional basis in order to cope with the increased work.

The services of two nurses as part-time school nurses, who were appointed in the latter part of 1957, were retained during the year in view of the vaccination schemes mentioned above.



GENERAL STATISTICS

The following table shows the number of children attending the 21 school departments in the area of the Borough of Bedford at the beginning of January, 1959.

<u>Type of School</u>	<u>Number of Schools</u>	<u>Number on Roll</u>
Nursery ... ..	1	44
Infant ... ..	7	1,451
Primary Junior Mixed ... ..	6	2,141
Primary Junior Mixed and Infant ...	2	1,170
Primary Mixed, All ages 5 - 15 years	1	442
* Secondary Modern ... ..	<u>4</u>	<u>2,232</u>
	<u>21</u>	<u>7,480</u>
	<u>      </u>	<u>      </u>
* Mixed ... ..	2	
Boys ... ..	1	
Girls ... ..	1	

It will be noted that the number of children in the schools is increasing from 7,232 in 1957, to 7,480 at the beginning of January, 1959.

The number of foreign children in attendance at Borough schools at week ended, the 9th January, 1959, was 686.

SCOPE OF MEDICAL INSPECTION

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

	<u>1957</u>	<u>1958</u>
Inspections in prescribed groups ...	2,140	1,398
Special inspections at schools ...	9	6
Special inspections at clinics ...	190	145
Re-inspections ... ..	449	196

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 :-

Location of Clinic	Time of Session	Work Carried Out
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. As required.	Treatment of minor ailments by School Nurse. Consultations by School Medical Officer. Treatment by School Dental Officer. Diphtheria immunisation. Poliomyelitis vaccination. B.C.G. 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. As required. Tuesday afternoons weekly.	Treatment of minor ailments by School Nurse. Consultations by School Medical Officer. Diphtheria immunisation. Poliomyelitis vaccination. B.C.G. vaccination. Speech Therapy.
3 St. Peter's Street	Mondays and Wednesdays.	Speech Therapy.

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

Children with defective vision are referred by arrangement to Dr. H. Bentley, Ophthalmic Surgeon.

#### 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 1958	5,768	83.95	3,002	149	45.86
October 1957 (for comparison)	5,350	80.61	3,138	161	47.28

#### UNCLEANLINESS

The number of children found unclean, that is with nits or lice in their hair, was 132 in 1958, compared with 81 in 1957.

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>1957</u>	<u>1958</u>
Attendances ... ..	191	231
Number of individual children attending	136	141

##### RINGWORM

No cases of ringworm were discovered.

##### SCABIES

No cases were discovered.

##### IMPETIGO

Only four children received treatment for this once troublesome condition.

## HOSPITAL TREATMENT

### GENERAL

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, three 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. Five children were ascertained to have received treatment during the year, of whom three were referred for treatment before 1958.

Apart from cases where deafness or ear disease appeared to be associated with diseased tonsils and adenoids, two 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 DISEASES

### MEASLES

During the year, 156 children of school age were notified as suffering from this disease.

### SCARLET FEVER

It is known that 27 cases occurred amongst schoolchildren during the year.

### DIPHTHERIA

No cases of diphtheria occurred amongst schoolchildren in this area.

### ACUTE ANTERIOR POLIOMYELITIS

Five cases of poliomyelitis were notified during the year in children of school age.

### FOOD POISONING

There was an outbreak of food poisoning at a large independent school for girls in Bedford. Details of cases forming the outbreak which occurred from the 14th to 15th October, 1958, are as follows :-

Number of cases notified	...	33
Severity of illness	... ..	Slight
Duration of illness	... ..	1 to 2 days
Suspected cause of outbreak	... ..	? Fish cakes

### DIPHTHERIA IMMUNISATION

In view of the necessity for urging parents to have their children vaccinated against poliomyelitis the scheme for the immunisation of children against diphtheria had to be somewhat curtailed during the year under review.

The following table shows the number of children of 5 to 15 years of age who were immunised during 1958.

					<u>Received</u>	<u>Received</u>
					<u>full</u>	<u>"booster"</u>
					<u>course</u>	<u>dose</u>
First quarter	...	...	...	...	82	67
Second quarter	...	...	...	...	14	30
Third quarter	...	...	...	...	50	61
Fourth quarter	...	...	...	...	<u>12</u>	<u>42</u>
					<u>158</u>	<u>200</u>

It is estimated that approximately 63 per cent of all children of school age have received a full course or re-inforcing injections.

### POLIOMYELITIS VACCINATION

The vaccination of schoolchildren was continued. Parents responded very well to the advice given by the Ministry of Health that children should be vaccinated against poliomyelitis.

As the scheme now requires a third injection to be given, and, as at the end of the year this had only just commenced, it is not possible at this stage to give information on the percentage of children who have received protection against this disease.

### B.C.G. VACCINATION

In accordance with the scheme adopted by the Authority, the necessary arrangements were made for B.C.G. vaccination to commence in May, 1958.

The vaccination is available to all children of thirteen years of age.

The following table shows the work carried out during the year.

INITIAL HEAF TEST			B.C.G. VACCINATION	CHILDREN REFERRED TO CHEST CLINIC	
No. of children tested	No. found to be positive and referred to Chest Clinic	No. found to be negative	No. of children vaccinated	No evidence of pulmonary tuberculosis	Failed to attend for x-ray examination
1,007	139	846	793	133	6

The differences in the figures are accounted for by absences from school.

Positive cases are referred to the Bedford General Hospital for a chest x-ray examination and negative cases receive protection with the B.C.G. vaccine.

#### TUBERCULIN TESTING

It was not possible in 1958 to carry out tuberculin testing of the school entrants owing to the demands on the staff by the poliomyelitis vaccination scheme. It is hoped to recommence these tests during the summer term of 1959.

#### SPECIAL FORMS OF TREATMENT.

##### ULTRA VIOLET LIGHT TREATMENT

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

Sessions for ultra violet light treatment recommenced in January, 1959, at the clinic at 29 Barford Avenue, and children from schools both sides of the river now attend there for treatment.

##### 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, 16 children were referred for treatment.

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

##### SPEECH THERAPY

During the year, 46 children received treatment from the Speech Therapist.

Details are given in the following table.

Condition	No. treated	No. deferred and under observation	No. discharged	Condition on discharge		
				Cured	Improved	No improvement
Dyslalia (with no mental retardation)	31	4	13	12	1	--
Dyslalia (with mental retardation)	--	--	--	--	--	--
Stammer	14	--	4	4	--	--
Aphasia (language disorder)	--	--	--	--	--	--
Partially deaf	1	--	1	--	1	--

Total attendances for regular treatment: 583

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.

#### 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

During the year, 48 children were examined from the Borough schools, including private schools, and diagnosis and recommendations are shown in the following table.

Educationally sub-normal	...	...	...	...	...	20
Educationally sub-normal and maladjusted	...	...	...	...	...	4
Maladjusted	...	...	...	...	...	12
Incapable of receiving education at school	...	...	...	...	...	8
For supervision after leaving school	...	...	...	...	...	1
For re-examination later. Formal decision deferred	...	...	...	...	...	1
No disability of mind	...	...	...	...	...	2

These children were referred for examination as follows :-

Examined at request of Head Teacher	...	...	...	...	...	24
Family Doctor	...	...	...	...	...	8
Parent	...	...	...	...	...	7
Hospital Consultant	...	...	...	...	...	3
Co-ordinating Committee	...	...	...	...	...	2
Psychiatrist	...	...	...	...	...	1
School Welfare Officer	...	...	...	...	...	1
Review cases	...	...	...	...	...	2

In addition to the above, one child was examined at the request of

the Magistrates of the Bedford Juvenile Court.

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 sub-normal 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, "Heathwood", Leighton Buzzard, and four at other institutions.

TREATMENT IN CONVALESCENT HOMES  
AND OTHER INSTITUTIONS

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
Male	14	Nervous disposition. Debility	3 weeks
Female	13	Debility	8 weeks
Female	11	Debility	3 weeks
Female	9	Influenza followed by tonsillitis	8 weeks
Female	5	Severe upper respira- tory infection	4 weeks

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

Sex	Age	Disease	Period of treatment
Female	12	Bronchitis	Admitted 22.2.58 Not discharged
Female	11	Asthma	Admitted 2.10.56 Discharged 26.5.58
Male	10	Asthma	Admitted 20.3.58 Discharged 23.12.58
Male	7	Recurrent bronchitis	Admitted 11.2.58 Discharged 29.10.58
Female	7	Incontinent of urine and faeces, also back- ward	Admitted 27.2.58 Not discharged
Female	6	Asthma and allergic rhinitis	Admitted 4.3.58 Not discharged
Male	5	Asthma and vaso-motor rhinitis	Admitted 4.9.57 Discharged 1.8.58



OTHER EDUCATIONAL TREATMENT

Five 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	14	Epileptic	Admitted September, 1958. Still in attendance.
Male	11	Hydrocephalus	Financial responsibility accepted July, 1956. Still in attendance.
Male	9	Ectopia vesicae	Admitted January, 1956. Still in attendance.
Male	7	Maladjusted	Financial responsibility accepted September, 1957. Still in attendance.
Female	6	Cooley's anaemia	Admitted October, 1958. Still in attendance.

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

During the year, 21 students applying for admission to Training Colleges were medically examined. An x-ray examination of the chest is arranged where it is considered desirable.

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

In addition to these examinations, two pre-course students were medically examined at the request of the Children's Officer before commencing duties at the Clevedon Nursery, Ampthill.

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. A number of children, it must be remembered, receive treatment under the provisions of the National Health Service Act independently of the School Health Service.

EMPLOYMENT OF CHILDREN BYELAWS

246 children were medically examined in 1958. Of this number, ten were 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.

TABLE I -- MEDICAL INSPECTION OF PUBLIC SCHOOLS AND SPECIAL SCHOOLS

Age Groups Inspected (By year of birth) - (1)	No. of Inspected Pupils (2)	Bacteriology (3)		No. of Col. S. (4)	No. of Col. S. (5)
		No. of Col. S. (3)	No. (4)		
1936 and later	107	100	100	0.00	0.00
1935	208	208	208	0.00	0.00
1934	218	218	218	0.00	0.00
1933	22	22	22	0.00	0.00
1932	2	2	2	0.00	0.00
1931	1	1	1	0.00	0.00
1930	1	1	1	0.00	0.00
1929	1	1	1	0.00	0.00
1928	1	1	1	0.00	0.00
1927	1	1	1	0.00	0.00
1926	1	1	1	0.00	0.00
1925	1	1	1	0.00	0.00
1924	1	1	1	0.00	0.00
1923	1	1	1	0.00	0.00
1922	1	1	1	0.00	0.00
1921	1	1	1	0.00	0.00
1920	1	1	1	0.00	0.00
1919	1	1	1	0.00	0.00
1918	1	1	1	0.00	0.00
1917	1	1	1	0.00	0.00
1916	1	1	1	0.00	0.00
1915	1	1	1	0.00	0.00
1914	1	1	1	0.00	0.00
1913	1	1	1	0.00	0.00
1912	1	1	1	0.00	0.00
1911	1	1	1	0.00	0.00
1910	1	1	1	0.00	0.00
1909	1	1	1	0.00	0.00
1908	1	1	1	0.00	0.00
1907	1	1	1	0.00	0.00
1906	1	1	1	0.00	0.00
1905	1	1	1	0.00	0.00
1904	1	1	1	0.00	0.00
1903	1	1	1	0.00	0.00
1902	1	1	1	0.00	0.00
1901	1	1	1	0.00	0.00
1900	1	1	1	0.00	0.00
Total	1,208	1,208	1,208	0.00	0.00

Number of Special Inspections	...	212	197
Number of Re-inspections	...	211	197
Totals	...	423	394

STATISTICAL TABLES  
relating to the work of the  
SCHOOL HEALTH SERVICE  
(Bedford Divisional Executive)  
for the Year 1958

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

TABLE I -- MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

A -- Periodic Medical Inspections

Age Groups Inspected (By year of birth (1))	No. of Pupils Inspected (2)	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2 (6)
1954 and later	108	108	100.0	--	--
1953	586	582	99.3	4	0.7
1952	218	212	97.2	6	2.8
1951	32	32	100.0	--	--
1950	5	5	100.0	--	--
1949	--	--	--	--	--
1948	1	--	--	1	100.0
1947	--	--	--	--	--
1946	--	--	--	--	--
1945	--	--	--	--	--
1944	12	12	100.0	--	--
1943 and earlier	436	435	99.8	1	0.2
Total	1,398	1,386	99.1	12	0.9

B -- Other Inspections

	1956	1957	1958
Number of Special Inspections ...	216	199	151
Number of Re-Inspections ...	367	449	196
Totals ...	583	648	347

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)
1954 and later	2	14	16
1953	5	97	99
1952	--	44	44
1951	1	5	6
1950	--	1	1
1949	--	--	--
1948	--	1	1
1947	--	--	--
1946	--	--	--
1945	--	--	--
1944	--	--	--
1943 and earlier	32	81	108
Total	40	243	275

TABLE II -- INFESTATION WITH VERMIN

	1956	1957	1958
(1) Total number of examinations in the schools by the school nurses ... ..	18,530	17,659	18,453
(2) Total number of individual pupils found to be infested	63	81	132
(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 -- NUMBER OF DEFECTS FOUND TO REQUIRE TREATMENT OR OBSERVATION AT MEDICAL INSPECTIONS DURING 1958

## A -- PERIODIC INSPECTIONS

Defect or Disease	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin ... ..	14	1	12	1	--	--	26	2
Eyes --								
(a) Vision ...	8	--	32	--	--	--	40	--
(b) Squint ...	25	--	8	--	--	--	33	--
(c) Other ...	5	1	4	--	--	--	9	1
Ears --								
(a) Hearing ...	11	7	4	1	--	--	15	8
(b) Otitis Media	6	6	2	1	--	--	8	7
(c) Other ...	1	1	1	--	--	--	2	1
Nose and Throat	28	56	5	6	--	--	33	62
Speech ... ..	7	7	--	--	--	--	7	7
Lymphatic Glands	1	8	--	1	--	--	1	9
Heart ... ..	2	12	1	4	--	--	3	16
Lungs ... ..	14	11	3	2	--	--	17	13
Developmental --								
(a) Hernia ...	3	--	--	--	--	--	3	--
(b) Other ...	5	13	2	--	--	--	7	13
Orthopaedic --								
(a) Posture ...	2	15	16	2	--	--	18	17
(b) Feet ...	14	17	15	--	--	--	29	17
(c) Other ...	16	16	6	2	--	--	22	18
Nervous System --								
(a) Epilepsy ...	3	--	--	1	--	--	3	1
(b) Other ...	4	5	5	--	--	--	9	5
Psychological --								
(a) Development	5	11	--	1	--	--	5	12
(b) Stability	1	5	--	--	--	--	1	5
Abdomen ... ..	1	--	1	--	--	--	2	--
Other ... ..	6	5	8	2	2	--	16	7
Totals ...	182	197	125	24	2	--	309	221

## B -- SPECIAL INSPECTIONS

Defect or Disease	Special Inspections	
	Requiring treatment	Requiring Observation
Skin ... ..	4	2
Eyes --		
(a) Vision ... ..	20	7
(b) Squint ... ..	--	--
(c) Other ... ..	6	1
Ears --		
(a) Hearing ... ..	4	--
(b) Otitis Media ... ..	--	--
(c) Other ... ..	--	--
Nose and Throat ... ..	8	3
Speech ... ..	6	--
Lymphatic Glands ... ..	--	--
Heart ... ..	--	--
Lungs ... ..	3	1
Developmental --		
(a) Hernia ... ..	--	--
(b) Other ... ..	--	--
Orthopaedic --		
(a) Posture ... ..	--	--
(b) Feet ... ..	--	--
(c) Other ... ..	4	1
Nervous System --		
(a) Epilepsy ... ..	3	--
(b) Other ... ..	1	--
Psychological --		
(a) Development ... ..	27	10
(b) Stability ... ..	9	8
Abdomen ... ..	--	--
Other ... ..	11	12
Totals ...	106	45

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

Group 1 -- Eye Diseases, Defective Vision and Squant

	Number of cases dealt with by the Authority		
	1956	1957	1958
External and other, excluding errors of refraction and squint ... ..	10	7	8
Errors of Refraction (including squint) ... ..	196	217	165
Totals ...	206	224	173
Number of pupils for whom spectacles were prescribed ... ..	88	95	75

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

	No. of cases known to have dealt with		
	1956	1957	1958
Received operative treatment --			
(a) for diseases of the ear ...	--	--	--
(b) for adenoids and chronic tonsillitis ... ..	63	32	5
(c) for other nose and throat conditions ... ..	--	--	--
Received other forms of treatment	46	15	3
Totals ...	109	47	8

Group 3 -- Orthopaedic and Postural Defects

	1956	1957	1958
Number of pupils known to have been treated at clinics or out-patient departments ... ..	17	49	21

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

	Number of cases treated or under treatment during the year by the Authority		
	1956	1957	1958
Ringworm --			
(a) Scalp ... ..	--	--	--
(b) Body ... ..	--	--	--
Scabies ... ..	2	--	--
Impetigo ... ..	9	3	4
Other skin diseases ... ..	14	7	24
Totals ... ..	25	10	28

Group 5 -- Speech Therapy

	Number of cases treated by the Authority		
	1956	1957	1958
Number of pupils treated by Speech Therapist ... ..	16	21	46

Group 6 -- Other Treatment Given

	Number of cases treated by the Authority		
	1956	1957	1958
Pupils with minor ailments ... ..	172	112	61



TABLE V -- DENTAL INSPECTION AND TREATMENT

							1958
Number of pupils inspected by the Dental Officer --							
(a)	at Periodic Inspections	...	...	...	...	...	3,631
(b)	as Specials	...	...	...	...	...	512
						Total	4,143
Number found to require treatment							2,456
Number offered treatment							2,456
Number actually treated							1,189
Number of attendances made by pupils for treatment (including orthodontics)							1,803
Half-days devoted to --							
(a)	Inspection	...	...	...	...	...	33
(b)	Treatment	...	...	...	...	...	332
						Total	365
Fillings --							
(a)	Permanent Teeth	...	...	...	...	...	555
(b)	Temporary Teeth	...	...	...	...	...	403
						Total	958
Number of teeth filled --							
(a)	Permanent Teeth	...	...	...	...	...	534
(b)	Temporary Teeth	...	...	...	...	...	377
						Total	911
Extractions --							
(a)	Permanent Teeth	...	...	...	...	...	150
(b)	Temporary Teeth	...	...	...	...	...	1,376
						Total	1,526
Administration of general anaesthetics for extraction							113
Number of pupils supplied with artificial teeth							7
Other operations --							
(a)	Permanent Teeth	...	...	...	...	...	249
(b)	Temporary Teeth	...	...	...	...	...	63
						Total	312

