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BEDFORDSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE



REPORT

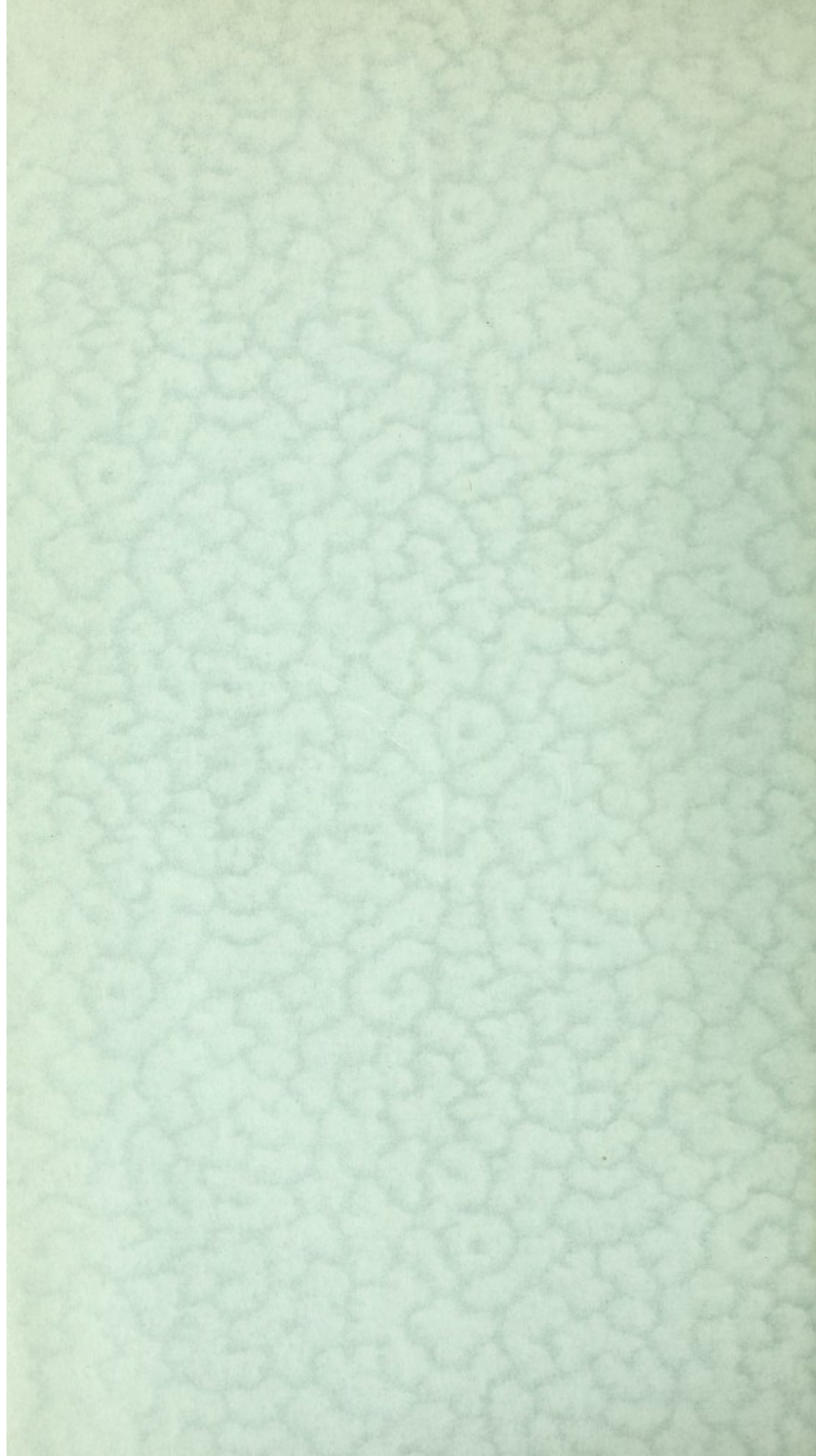
of the

Principal

SCHOOL MEDICAL OFFICER

for the Year ended

31st December, 1959



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TO THE CHAIRMAN AND MEMBERS OF THE BEDFORDSHIRE EDUCATION COMMITTEE

I beg to submit the Annual Report on the School Health Service for the year 1959.

There were changes in the Medical Staff. Dr. Margaret Brothwood and Dr. Isobel Troup resigned, both of them for domestic reasons. They were succeeded by Dr. A. Darlow and Dr. G. Slocombe.

The School Dental Service continues to be understaffed, but as the Principal School Dental Officer suggests in his report this fact need not cause undue alarm for more and more schoolchildren are being treated by private dental practitioners. During the year the service lost one part-time dental surgeon, Mr. P.A. McGuckin, but we were successful in recruiting another, Mrs. F.D. Morris.

With regard to routine Medical Inspection, nearly all the schools were visited during the year, and this was achieved in spite of the vast poliomyelitis vaccination programme.

The Child Guidance Service now has an establishment which should be adequate to meet all reasonable demands made upon the service, if all the posts can be filled.

Vigorous steps were taken to protect children against certain Infectious Diseases. The Poliomyelitis Vaccination campaign was very successful. There was, however, some falling off in the number of children receiving re-inforcement injections against diphtheria. There is a very real danger in this as has been well illustrated in the area of another Authority.

I desire to thank my professional colleagues, the teachers, and the clerical staff for their most helpful co-operation. I am particularly grateful to Dr. H.S. Bury who has done so much to help in the administration of the service.

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, 1960.

STAFF 1959Principal 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.
 (resigned 31.10.59)
 H.S. Bury, M.R.C.S., L.R.C.P., D.P.H.
 A.R. Darlow, T.D., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
 D.C.H., D.T.M.&H. (appointed 1.11.59)
 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.
 G. Slocombe, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
 (appointed 1.9.59)
 Cicely Steer, M.B., B.S., D.C.H.
 Isobel R.S. Troup, M.B., Ch.B., D.P.H.
 (resigned 31.8.59)

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)
 (resigned 31.1.59)
 Frances D. Morris, L.D.S., R.F.P.S. (part-time)
 (appointed 2.2.59)
 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

Mary P. Joyce, B.Sc., (appointed 1.1.59)

Psychiatric Social Worker

Gillian Corsellis

Orthoptist

Elizabeth C. Taylor, D.B.O.S. (resigned 31.3.59)
 (Post vacant since 1.4.59)

Speech Therapist

Bridget A. Pentland, L.C.S.T. (resigned 31.7.59)
 Monica M. Field, L.C.S.T. (appointed 1.9.59)

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.

The Registrar General's estimated home populations of the Administrative County and these Boroughs at the 30th June, 1959, were as follows :-

County Area	...	...	...	170,010
Bedford Borough	...	...	...	60,190
Luton Borough	...	...	...	120,500
Administrative County	...	...	...	<u>350,700</u>

The following statement shows the number of schools in the County, excluding Bedford and Luton, on the 31st December, 1959, 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	113
Primary	130	16,035
Secondary	17	6,814
Technical and Grammar	5	2,380
Special	1	103
Totals	<u>155</u>	<u>25,445</u>

MEDICAL INSPECTION AND TREATMENT

Although there was no change in the arrangements for the medical inspection of pupils attending maintained schools in Bedfordshire, the work was curtailed in the early part of the year by the very considerable increase in the number of sessions given to poliomyelitis vaccination.

Despite this additional work, 149 schools were fully inspected during the year out of a total of 155. The number of children examined was 10,757.

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

School Nursing Service

In some parts of the County the School Nursing Service is carried out by Health Visitor/School Nurses. In Bedford and Dunstable full-time School Nurses are employed and two part-time 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 conditions, unusual pallor, listlessness, anxiety, as well as suitability of clothing and footgear 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	3,007
Second age group	3,264
Third age group	<u>1,775</u>
Total	8,046
No. of special inspections	<u>2,711</u>
Grand Total	<u>10,757</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
1955 and later	193	138	71.50	55	28.50
1954	1,084	948	87.45	136	12.55
1953	1,189	1,068	89.82	121	10.18
1952	359	344	95.82	15	4.18
1951	113	104	92.04	9	7.96
1950	69	65	94.20	4	5.80
1949	874	852	97.48	22	2.52
1948	1,334	1,310	98.20	24	1.80
1947	821	816	99.39	5	0.61
1946	235	231	98.30	4	1.70
1945	632	616	97.47	16	2.53
1944 and earlier	1,143	1,132	99.04	11	0.96
Totals	8,046	7,624	94.76	422	5.24

TABLE II -- NUMBER OF DEFECTS FOUND TO REQUIRE TREATMENT OR OBSERVATION AT MEDICAL INSPECTIONS DURING 1959

A -- PERIODIC INSPECTIONS

Defect or Disease	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin ...	9	33	12	34	21	44	42	111
Eyes --								
(a) Vision ...	116	506	242	21	417	67	775	594
(b) Squint ...	54	23	7	1	31	3	92	27
(c) Other ...	3	5	4	5	4	8	11	18
Ears --								
(a) Hearing ...	19	82	2	13	7	35	28	130
(b) Otitis Media	9	34	--	6	3	15	12	55
(c) Other ...	3	27	--	6	2	7	5	40
Nose and Throat	95	345	9	22	37	138	141	505
Speech ...	15	85	2	4	9	11	26	100
Lymphatic Glands	9	259	1	6	4	126	14	391
Heart ...	4	22	1	12	7	17	12	51
Lungs ...	21	84	9	19	25	33	55	136
Developmental --								
(a) Hernia ...	3	8	--	3	1	4	4	15
(b) Other ...	4	62	2	17	8	65	14	144
Orthopaedic --								
(a) Posture ...	3	10	2	28	4	53	9	91
(b) Feet ...	9	92	5	38	24	72	38	202
(c) Other ...	8	142	6	22	16	51	30	215
Nervous System --								
(a) Epilepsy ...	--	4	--	6	1	8	1	18
(b) Other ...	--	7	--	--	--	7	--	14
Psychological --								
(a) Development	5	26	--	6	7	30	12	62
(b) Stability	3	94	3	4	9	45	15	143
Abdomen ...	2	19	--	4	2	11	4	34
Other ...	2	20	--	11	3	15	5	46
Totals ...	396	1,989	307	288	642	865	1,345	3,142

TABLE II (Continued)

B -- SPECIAL INSPECTIONS

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring Treatment	Requiring Observation
Skin	14	38
Eyes --		
(a) Vision	525	133
(b) Squint	76	20
(c) Other	4	8
Ears --		
(a) Hearing	19	60
(b) Otitis Media	6	15
(c) Other	--	10
Nose and Throat	81	235
Speech	38	34
Lymphatic Glands	21	210
Heart	6	23
Lungs	17	77
Developmental --		
(a) Hernia	5	3
(b) Other	8	59
Orthopaedic --		
(a) Posture	2	31
(b) Feet	14	46
(c) Other	16	62
Nervous System --		
(a) Epilepsy	2	7
(b) Other	--	5
Psychological --		
(a) Development	30	62
(b) Stability	8	80
Abdomen	--	13
Other	3	17
Totals	895	1,248

The number of individual children found to require treatment at periodic and special inspections was 1,975.

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 1957 to 1959.

TABLE III -- DETAILS OF CLEANLINESS INSPECTIONS CARRIED OUT BY THE SCHOOL NURSES DURING THE YEARS 1957 TO 1959

	1957	1958	1959
Number of examinations	59,107	65,568	56,159
Number of instances of uncleanliness	135	169	174
Number of individual pupils found unclean ...	113	119	137
Percentage of individual pupils found unclean of total school population	0.5	0.5	0.5
Number of visits to schools by school nurses for cleanliness inspections	444	415	417

INFECTIOUS DISEASES

TABLE IV -- NUMBER OF CASES OF INFECTIOUS DISEASE IN CHILDREN AGED 5 - 14 YEARS NOTIFIED AND CONFIRMED DURING 1959

	Bedford Borough		Luton Borough		Remainder of County		Totals	
	M.	F.	M.	F.	M.	F.	M.	F.
Scarlet Fever	32	28	8	9	77	66	117	103
Whooping Cough	6	11	7	14	26	16	39	41
Acute Poliomyelitis --								
Paralytic	--	--	--	--	--	--	--	--
Non-Paralytic	1	--	--	--	--	--	1	--
Measles	131	136	278	236	852	807	1,261	1,179
Diphtheria	--	--	--	--	--	--	--	--
Acute Pneumonia	6	3	4	--	5	3	15	6
Erysipelas	--	--	--	--	3	2	3	2
Acute Infective Encephalitis	--	--	--	--	--	--	--	--
Dysentery	--	1	1	2	10	6	11	9
Enteric or Typhoid Fever	--	--	--	--	--	1	--	1
Paratyphoid Fevers	--	--	--	--	1	--	1	--
Meningococcal Infection	--	--	--	--	--	--	--	--
Food Poisoning	--	--	1	--	3	--	4	--

Acute Poliomyelitis

There was one case of non-paralytic poliomyelitis notified among schoolchildren in Bedfordshire during 1959. This case had not been vaccinated.

Vaccination against Poliomyelitis

The response to the recommendation contained in the Ministry of Health Circular 20/58 of the giving of a third injection of the vaccine at an interval of at least seven months after the second has been very gratifying, showing that parents have become convinced of the value of the protection afforded to their children. The number of children notified as suffering from poliomyelitis since 1956, the year in which vaccination was introduced, is as follows :-

1956	...	11	1958	...	5
1957	...	5	1959	...	1

Diphtheria

No case of diphtheria was notified amongst children of school age during the year, a happy circumstance which has been recurring now for many years in the County. The majority of children have had the initial immunisation against diphtheria prior to entering school either by the family doctor or by the medical officer at the Child Welfare Clinic, and are given a booster dose during their first year at school. The parents of those children who have not had any initial protective treatment are invited to have it done at this stage. Owing to the almost complete absence of diphtheria from the County for so many years there are today many young parents who have never known of anyone suffering from the disease and consequently have no knowledge of the serious form it can take. These parents may, as a consequence, be inclined to postpone or even avoid having their children immunised. It is necessary to stress that the continued absence of diphtheria amongst the school population can only be ensured when all children are adequately protected against this disease.

Whooping Cough

The number of cases of whooping cough notified is the lowest recorded, the notifications since 1954 being :-

1954	...	437	1956	...	364	1958	...	177
1955	...	200	1957	...	257	1959	...	80

For some years the County Council have made provision for the immunisation of young children against whooping cough which can be given alone or in combination with immunisation against diphtheria. While it is probably too early to assert confidently that the fewer notifications are due entirely to immunisation, there would seem to be a definite association.

Scarlet Fever

The cases of scarlet fever notified showed no increase over those for 1958. This is now a relatively mild disease and most of the cases are treated at home. In addition, it is now rare for children to suffer from the sequelae of ear and kidney involvement which were frequently seen prior to the advent of antibiotics and sulpha drugs.

Tuberculosis

There has again been a decrease in the number of notifications of all forms of tuberculosis in schoolchildren and in addition the number of cases on the tuberculosis register at the 31st December, 1959 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. vaccination was continued during 1959. Altogether 1,533 children were skin-tested and in the case of 93 of these children the results could not be ascertained at the appropriate time. Of the remaining 1,440 children, 231 were found to be positive and 1,209 to be negative. Of the latter group, 1,204 were vaccinated.

TABLE V -- NUMBER OF CHILDREN UNDER THE AGE OF 15 YEARS NOTIFIED FOR THE FIRST TIME DURING 1959 AS SUFFERING FROM TUBERCULOSIS, RESPIRATORY AND NON-RESPIRATORY

District	Respiratory			Non-Respiratory		
	Boys	Girls	Total	Boys	Girls	Total
Bedford Borough ...	2	1	3	--	--	--
Luton Borough ...	2	--	2	--	--	--
Remainder of County	2	3	5	3	2	5
Totals ...	6	4	10	3	2	5

TABLE VI -- NUMBER OF CHILDREN UNDER THE AGE OF 15 YEARS ON THE TUBERCULOSIS REGISTER AT 31st DECEMBER, 1959

District	Respiratory			Non-Respiratory		
	Boys	Girls	Total	Boys	Girls	Total
Bedford Borough ...	13	15	28	1	4	5
Luton Borough ...	32	16	48	4	5	9
Remainder of County	20	20	40	10	11	21
Totals ...	65	51	116	15	20	35

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 :-

1950 ...	695	1955 ...	418
1951 ...	963	1956 ...	323
1952 ...	653	1957 ...	243
1953 ...	532	1958 ...	197
1954 ...	527	1959 ...	62

The total number of attendances during 1959 was 78.

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, 916 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.

Number of cases seen by
Ophthalmic Surgeons

Errors of refraction, including squint	1,664
Number of pupils for whom spectacles were prescribed	1,338

Orthoptic Treatment

Mrs. Elizabeth Taylor, the Orthoptist, resigned her appointment on the 31st March, 1959. Despite repeated efforts to recruit a successor, by the end of the year the post was still vacant.

The following statement gives details of the work for the quarter ended the 31st March, 1959.

No. of children seen for the first time ...	19
No. of children who received treatment ...	10
No. of treatments given	34
No. of tests performed	160
Total number of attendances	213
Discharges during the quarter :-	
Cured	8
Improved	5
Failed to attend	4
Good cosmetic result	10
Nothing abnormal discovered ...	1
Left district	1
	29

Speech Therapy

Miss Monica M. Field, the Speech Therapist, contributes the following :-

" Speech therapy is concerned with defective speech and should not be confused with elocution which aims at perfecting and raising normal speech to its highest level. Children are admitted to the Speech Clinic only if their speech calls unwanted attention to itself, interferes with communication or causes its possessor to be maladjusted. Into this category fall varying degrees of stammering, cleft palate, nasality, delayed speech, baby talk, lisps, huskiness, abnormal pitch and sound omission and substitution.

" Speech is our main means of communication and as soon as this is impeded a personality problem may develop. For example, a speech defective child who has been continually misunderstood may eventually refuse to talk. School work too may be affected in that the child may pretend not to know the answer to a question rather than have his speech attempt laughed at by the other children.

" A speech defect is often associated with other difficulties such as poor spelling, reading and writing due to confusion in sounds, and an improvement in speech will often give rise to an overall improvement. When treating such children the advice of the Educational Psychologist has proved invaluable in discovering the extent of these associated difficulties.

" The treatment of a speech defect takes the form of a weekly visit to the Clinic for a half-hour session. At the first of these sessions the parents are interviewed, a case history is taken, and the child's speech is tested. From the information collected a plan is worked out

and the parents are advised on the carrying out of home practice which is set after each weekly session. It has been noticed how the rate of progress is affected if this home practice is carried out regularly, and unco-operative parents have themselves to be "treated" in the form of explanation of the treatment before the child is admitted to the Clinic.

" Some children are found to have physical causes of a speech defect, e.g., tongue tie, brain injury, large tonsils or adenoids, and with these cases medical advice is sought before speech therapy is commenced. More commonly, however, the speech defect is of emotional origin.

" It has been interesting to notice the barrier between the child and the Speech Therapist if the speech defect is of some deep-seated emotional origin; and until the cause is discovered the child's speech does not respond to therapy. Sometimes the cause can be discovered by the Speech Therapist but if not, the advice of the Child Guidance Clinic has been sought. Once the underlying cause is removed the speech defect will then respond to treatment. For example, a child with a simple lisp continued to lisp despite extensive treatment until it was discovered that "Daddy thinks it sounds sweet". Daddy having been "treated" the lisp disappeared.

" Emotional conflicts from varying sources can also interfere with treatment and until these difficulties are discovered and solved little or no progress is made. For example, one child who substituted "w" for "r" appeared very anxious during treatment and made no improvement until it was found that he had a very critical father who continually punished the child for "speaking like a baby".

" School visits are carried out regularly and have proved to be very helpful and I am grateful for the co-operation of head teachers and teachers who have assisted in correcting specific sounds in school. It has been found that many teachers are willing to help but have not quite known where to begin. A visit to such teachers and an explanation of which sounds to correct has proved most beneficial. The children too respond well to a word of praise and encouragement from an interested teacher.

" There are still waiting lists at all the clinics but the situation has improved considerably during the year with the exception of Dunstable where only two sessions are held weekly. There is a need here for more clinic sessions but this unfortunately is not possible.

" There is also a need for a Speech Therapy clinic in North Bedfordshire as transport from this area is limited and many appointments are not kept.

" The Speech Therapy Clinic has obtained some new equipment during the year and this has made treatment much more enjoyable for both children and the Speech Therapist. Colourful story books and games have made speech work more interesting and therefore good results are easier to obtain.

" The tape recorder has proved useful as a means of enabling the child to hear his own mistakes and also as a means of recording progress. It can be very encouraging for both child and parent to hear an old recording and to compare it with the child's improved speech standard.

" Working with these children I realise how much we do not yet know about speech defects and that there is considerable scope for research."

Condition	No. Treated	Deferred and under observation	Discharged	Condition on Discharge		
				Cured	Improved	No Improvement
Dyslalia (not associated with mental retardation)	58	4	25	21	4	--
Dyslalia (associated with mental retardation)	12	2	3	1	2	--
Stammer	28	5	14	8	6	--
Developmental aphasia (language disorder)	1	--	--	--	--	--

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 1959.

	<u>Bedford Hospital</u>	<u>Luton and Dunstable Hospital</u>
Received operative treatment :-		
(a) for diseases of the ear ...	17	9
(b) for adenoids and chronic tonsillitis	368	625
(c) for other nose and throat conditions	57	12
Received other forms of treatment	18	28
Totals ...	<u>460</u>	<u>674</u>

School Clinics

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

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

/ The post of Orthoptist has been vacant since 1st April, 1959.

Child GuidanceBedford St. Peter's Child Guidance Clinic

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

" This year has been notable for a huge increase in the number of new referrals to the Clinic. In 1958, 82 new cases were referred, and in 1959, 141.

" In spite of strenuous efforts to deal with these in the time at present available, the result has been a long wait for treatment for some and no prospect for others.

" We have been fortunate in having an Educational Psychologist since the 1st January, 1959. During the year, Miss Joyce has taken a specialised part in the assessment of all new cases referred to the Child Guidance Clinic, made visits to the schools of the children concerned to discuss their problems, and has also undertaken certain cases both for remedial teaching and treatment. Miss Joyce has also seen 26 cases, 12 of which were referred by her for full Child Guidance investigation, and the remainder handled apart from the Clinics.

" Although for the first time the Clinic has now got a part-time Psychiatrist, a Psychologist and Psychiatric Social Worker, there is more work than can be done, and the Psychiatric Social Worker, who has been the main-stay of the Clinic for the last three years, is grossly overloaded.

" During the year we have made vigorous efforts to shorten the waiting list, and in all 78 new cases were seen. For the second half of the year the average wait was three months, and urgent cases were seen within one month. However, at present there are 62 cases on the waiting list for diagnostic interviews.

" It is perhaps interesting to compare figures for 1955 and 1959 to show the increase in the work over the last four years. In 1959 there were 869 attendances, the Psychiatrist held 172 sessions, which compares with 302 attendances in 1955 when the Psychiatrist held 90 sessions. In 1959, 78 new cases were seen; in 1955, 46. In 1959, the case load was 214; in 1955 it was 114. It will be seen that the work has increased by about 100 per cent over the last four years, and by the latest referral figures it seems as if it is again going to do this during the next four!

" During the last three months of the year, new referrals have reached flood proportions. It seems probable that this is not due to increased disorder of the child population, but to a greater awareness of the causes of disturbed behaviour and of psychogenic illness in the children.

" There were 78 new cases seen during the year, the reasons for referral being as follows :-

<u>Reason</u>	<u>No.</u>
Behaviour disorder	27
Anxiety state	4
Educational difficulties	12
Delinquency	15
Refusal to attend school	5
Bedwetting and/or soiling	7
Psychosomatic	3
Speech disorder	3
Psychotic	1
Depression	1
Total	<u>78</u>

" Of the new cases seen during 1959, the sources of referral were :-

	<u>No.</u>
School Medical Officers	36
Hospital Specialists	7
Family Doctors	11
Director of Education and staff	2
Juvenile Courts	13
Probation Officers	3
Speech Therapist	1
Educational Psychologist	3
N.S.P.C.C.	1
Dr. Barnardo's Homes	1
Total	<u>78</u>

" The outcome of these cases was as follows :-

	<u>No.</u>
Consultation and advice only	19
Taken on for treatment	15
Taken on for supervision	14
Recommended for residential placement ...	8
Recommended for treatment when available	16
Referred to Educational Psychologist ...	6
	<hr/>
Total ...	78
	<hr/>

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 :-

" This year there has been an increase in the volume of work at the Clinic, and it has therefore been a great help having an Educational Psychologist visiting weekly. For the last three months of the year I was not able to come owing to illness, but weekly sessions were held first by Dr. Norman Jones and then by Dr. Barlow, who both did locum work and prevented a breakdown in the service.

" 19 new cases were seen during the year. They can be analysed as follows :-

<u>Reason for referral</u>	<u>No.</u>
Behaviour disorder	7
Anxiety state	1
Educational difficulties	3
Delinquency	1
Refusal to attend school	2
Bedwetting	3
Psychosomatic	2
	<hr/>
Total ...	19
	<hr/>

" The sources of referral of these cases were :-

	<u>No.</u>
School Medical Officers	5
Hospital Specialists	3
Family Doctors	3
Director of Education and staff	3
Probation Officers	1
Parents	1
Health Visitors	2
Speech Therapist	1
	<hr/>
Total ...	19
	<hr/>

" The outcome of these cases was as follows :-

	<u>No.</u>
Consultation and advice only	1
Taken on for treatment	8
Taken on for supervision	3
Recommended for residential placement ...	4
Recommended for treatment when available	3
	<hr/>
Total ...	19
	<hr/>

" At the end of the year 13 children were under active treatment and 83 were under supervision. Four children were placed away from home, two at "Heathwood" and two to special residential schools for maladjusted children.

" As during 1958, "Heathwood" was visited regularly by members of the Child Guidance team.

Heathwood Hostel

Heathwood Hostel continues to play a most useful role in providing a stable and happy home atmosphere for children who, due to adverse conditions frequently related to their home environment, have shown emotional instability or psychological disturbance and who require personal, social or educational readjustment.

At the beginning of the year there were ten children in the Hostel and two more were admitted subsequently. At the end of the year ten children were in residence and at least four were due for admission early in 1960. In April a non-resident cook-housekeeper took up her duties and has proved most valuable. The Deputy Warden resigned in September to begin training for the Probation Service and unfortunately it was not possible to recruit a suitable successor by the end of the year. In the latter part of the year the daily staff was depleted owing to illness. These factors placed additional duties on the Warden and Matron.

During the last three months of the year, Dr. Waterlow, the visiting Psychiatrist, was unfortunately off-duty owing to ill-health. During this period Dr. Norman Jones and Dr. Barlow acted for her.

It is pleasing to report that former residents of the Hostel still keep in touch with the staff. One of the first admissions visited "Heathwood" with her husband and young children and as far as could be judged from a short visit the family appeared to be happy and united. Another of the first admissions paid a visit after returning from National Service in the Far East. Less happy re-visits, which, however, showed the influence of the atmosphere of the Hostel, were made at different times by three adolescent girls over school age who had absconded from their homes. Contact was made with the parents and the girls returned home. Visits were paid by the Psychiatric Social Worker and it appears that the girls are settling down but are still in need of guidance.

During recent years, there have been numerous visitors including social workers, teachers, doctors, students, etc. They have come from Germany, the U.S.A., Holland, Finland, Borneo, India, Nigeria, and Australia. The London School of Economics again sent for a month a student from the Social Science Course.

Members of the Toc H. have taken a personal interest in "Heathwood" and have taken the children out and invited them to their homes.

The following is a list of admissions and discharges during the past year :-

<u>Admissions</u>	<u>Age</u>	<u>Reason for Admission</u>
<u>From the County</u>		
Girl	4½	Difficulties at home.
"	14	Refused to attend school. Refused to eat. Withdrawn.
"	6	Enuresis; pilfering; temper tantrums.
Boy	8	Pilfering; enuresis; no control at home.

<u>Admissions</u>	<u>Age</u>	<u>Reason for Admission</u>
Boy	7 $\frac{1}{2}$	Retarded at school. Behaviour problems at school. Ineffective control at home.
"	4 $\frac{2}{3}$	Problems at home. Temper tantrums.

From Luton

Girl	13	Wandering; pilfering; difficulties at home.
Boy	11	Re-admission pending placement in residential school.

<u>Discharges</u>	<u>Age</u>	<u>Period in "Heathwood"</u>	<u>Reason for Admission</u>	<u>Condition on Discharge</u>	<u>Condition Since</u>
<u>From the County</u> Girl	15	23 months	Refusal to attend school; enuresis; withdrawn, etc. Committed to care of Beds. County Council.	Very much improved.	Improvement maintained.
"	12	9 months	Refused to attend school. Retarded at school; enuresis; overweight; temper tantrums.	Attends school regularly. Making good progress at school. Weight normal. Enuresis improved. No difficulties.	Left against advice. Regressed. Now awaits boarding school.
"	4 $\frac{1}{2}$	1 month	Problems at home.	Improved.	Maintained.
Boy	4 $\frac{2}{3}$	1 month	Problems at home. Temper tantrums.	Greatly improved.	Maintained and improved.
"	12	22 months	Enuresis; encopresis; pilfering; retarded at school.	Greatly improved. Left because of age.	Maintained and improved.
"	11	9 months	Retarded at school. Generally difficult to control at home and school.	Improved. Left because of age.	Maintained.
"	8	12 months	Retarded at school. Difficulties at home. General behaviour problems.	Some improvement. Withdrawn at parents' request.	No change.
<u>From Luton</u> Boy	11	5 months	Re-admission pending placement in Residential School. Discharged from Heathwood 1955. Enuresis; pilfering; violent temper.	Some improvement.	--

HANDICAPPED PUPILS

During 1959, 169 children thought to require special education were examined by School Medical Officers.

The Handicapped Pupils and School Health Service Regulations, 1953, list ten categories of defects in children which require special educational treatment. The following information relates to the progress made during the year in ascertaining and making provision for children who come within the scope of the Regulations.

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.

Children who are blind or partially-sighted are ascertained by Consultant Ophthalmologists at an early age, so that suitable arrangements for their education can be made. During the year two blind children were reported to the Committee as requiring education in a special school for blind pupils, and two partially-sighted children were reported, and recommended for education in a special school for partially-sighted pupils. One child reported by the Bedford Divisional Executive was blind, mentally retarded and physically handicapped. She was recommended for home tuition. There is no particular difficulty in obtaining places in special schools for these children.

The schools which Blind and Partially-Sighted pupils from Bedfordshire, excluding Luton, are attending are :-

	<u>Boys</u>	<u>Girls</u>
Dorton House School, Seal, Sevenoaks, Kent	--	2
Chorley Wood College for Blind Girls, Herts.	--	1
Overley Hall Sunshine Home Nursery School for Blind Children, Wellington, Salop	1	--
The Royal School of Industry for the Blind, Westbury-on-Trym, Bristol	1	--
Birmingham Royal Institution for the Blind, Lickey Grange, Bromsgrove, Worcs. ...	--	1
Exhall Grange School, Exhall, Coventry ...	1	2

In addition to the above, two partially-sighted children were attending an ordinary school with special aids, i.e. desk magnifiers and writing frames.

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.

During the year, the following cases were referred to the Committee :-

One boy who became partially-deaf following meningitis was recommended for auditory training from a teacher of the deaf. This was arranged by the Director of Education. A girl with slight cerebral palsy, who also had a high frequency loss in both ears, was referred to the Royal National Throat, Nose and Ear Hospital. The Otologist strongly recommended that she should be provided with an aid with automatic volume control incorporated. The Medresco Aid supplied through the hospital service was not suitable for her. The Committee agreed, and the girl was provided with a suitable commercial aid. A boy with severe congenital deafness affecting both ears, who was under the care of the Royal National Throat, Nose and Ear Hospital, was recommended for weekly auditory training at the Audiology Unit. Two girls and one boy were recommended for admission to special schools for partially-deaf pupils.

It may be useful to summarise the points which have to be considered in the treatment of a deaf or partially-deaf child.

It is most important to discover these children at a very early age. To understand this the development of hearing, and with it speech, in a normal child must be considered.

Sound waves are picked up by the ear and transmitted in changed form to those parts of the brain which sort out and appreciate them. The ability to do this is known as "auditory discrimination". This auditory discrimination is something which is learnt slowly and unconsciously in the first year of life. The ability to learn auditory discriminations diminishes as the child grows older.

In the first months of life the baby learns to appreciate noises, then changes of quality in noises, (such as a pleased or displeased tone), and so on up to the complexities of speech. It seems important, therefore, to discover any defect, complete or partial, as early as possible.

During the year instructions were issued in a circular letter to all medical officers on paying particular attention to testing hearing in children from the age of six months onwards. Children with a history of prematurity, asphyxia at birth, rhesus incompatibility, etc., need particularly careful investigation.

It is the responsibility of the Local Education Authority to provide special education for deaf and partially-deaf children from the age of two years if the parents so desire.

The youngest child for whom special residential treatment has been provided was diagnosed at nine months and sent to a school at the age of three years.

During the routine school examinations, some children are presented because the teachers or parents suspect deafness. Less obviously deafness may be the cause of backwardness, defects of speech or disturbances of behaviour.

There is a growing feeling that more time should be devoted to

this work and consideration is being given to this point.

Where further special advice is required, children are referred to the Ear, Nose and Throat department of a hospital or to the Audiology Unit of the Royal National Throat, Nose and Ear Hospital.

Treatment falls into one of the following categories :- special arrangements made in ordinary schools; teaching singly or in groups by a teacher specially trained; residential treatment at special schools. Hearing aids are provided where necessary.

Eleven children are known to have hearing aids, and nine of these are in ordinary schools. Sixteen children are in residential schools. A disadvantage of this form of treatment is the loss of home life.

The schools which Deaf and Partially-Deaf pupils from Bedfordshire, excluding Luton, are attending are :-

	<u>Boys</u>	<u>Girls</u>
Nursery School for Deaf Children, Woodford Green, Essex	--	1
Hamilton Lodge School, Brighton, Sussex	1	--
Lawns House School, Farnley, Leeds ...	4	--
Royal School for Deaf Children, Margate, Kent	2	2
Donnington Lodge School, Newbury, Berks.	--	3
Royal Cross School for the Deaf, Preston, Lancs.	1	--
Miss Fearnley's School, Watford, Herts.	--	1
Mary Hare Grammar School for the Deaf, Newbury, Berks.	1	--
Tewin Water School, Herts.	2	1
St. John's School for the Deaf, Boston Spa, Yorks.	1	--
Summerfield House School, Malvern, Worcs.	1	--
Brighton School for Partially-Deaf Children, Ovingdean Hall, Brighton, Sussex ...	--	1

Category (e) Educationally Subnormal 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 (a) some physical defect which interferes with their ability to learn, such as partial deafness, poor vision or chronic ill-health; (b) emotional maladjustment, which may interfere with the child's ability to learn; (c) 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.

The schools which Educationally Subnormal Pupils from Bedfordshire, excluding Luton, are attending are :-

	<u>Boys</u>	<u>Girls</u>
Farmhill House, Stroud, Glos.	3	2
Knotty Green School, Beaconsfield, Bucks.	--	1
St. Margaret's School, Great Gaddesden, Herts.	53	23
Hilton Grange, Bramhope, Yorks.	1	--
Besford Court School, Worcester	1	--
Rudolf Steiner School, Camphill, Aberdeen	1	1
The Sheillings School, Ringwood, Hants. ...	2	3
Osborne Road Day Special School, Luton, Beds.	2	1
Hurstwood House, Haywards Heath, Sussex	--	1
Orton Hall School, Orton Longueville, Hunts.	--	1
Miss Perkins' Day School, Bedford	1	--
Pield Heath House Roman Catholic School, Hillingdon, Middx.	--	1
St. Christopher's School, Bristol, Glos.	2	--
Meadows House, Southborough, Kent	4	--
Thornbury Park School, Bristol, Glos.	1	2
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 suitable education 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 a close liaison with the Youth Employment Service and the Welfare Department.

One epileptic child was ascertained during 1959, and at the end of the year in the County, excluding Luton, two epileptic schoolchildren were receiving special educational treatment in a boarding special school, and one child was attending a small independent day school in Bedford. A further 26 children known to suffer from fits of an epileptiform type were attending ordinary schools.

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

	<u>Boys</u>	<u>Girls</u>
Lingfield School for Epileptics, Surrey	2	--
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 a suitable school is found for him. Recognised schools of this type are few, and most of these children are placed in carefully selected independent schools, the Ministry of Education being informed annually of the placements.

Twelve children in this category were ascertained during the year.

The schools and hostels which Maladjusted Pupils from Bedfordshire, excluding Luton, are attending are :-

	<u>Boys</u>	<u>Girls</u>
Red Hill School, East Sutton, Kent ...	1	--
Mulberry Bush School, Standlake, Oxon ...	1	--
Badby Vicarage School, near Daventry, Northants.	2	--
Bylands School, Stratfield Turgis, near Basingstoke, Hants.	1	--
Aethelmar School, Fivehead, near Taunton, Somerset	2	--
St. Joseph's School, East Finchley, London	--	1
Heathwood Hostel, Leighton Buzzard, Beds.	4	2
Morley Hall Hostel, Wymondham, Norfolk ...	1	--
The Caldecott Community School, Mersham-le- Hatch, Ashford, Kent	1	--
Miss Perkins' School, Bedford	2	--
St. Catherine's School, Almondsbury, Bristol	--	1

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.

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

In the County, excluding Luton, the names of 58 children were on the register of physically-handicapped children at the end of 1959. They may be grouped as follows :-

Tuberculosis	2
Cerebral Palsy	19
Post-Polio Paresis	5
Other Orthopaedic Conditions	11
Heart and Circulation	8
Congenital Abnormalities	13
Total	<u>58</u>

The special schools and hospital special schools which Physically-Handicapped Pupils from Bedfordshire, excluding Luton, are attending are :-

	<u>Boys</u>	<u>Girls</u>
Hawthornth Hall Residential School for Spastic Children, Guisely, near Leeds	1	--
Heritage Craft Schools and Hospitals, Chailey, East Sussex	1	--
The Wilfred Pickles School (National Spastics Society), Tixover Grange, Duddington, Stamford, Lincs.	1	--
Pawling Home Hospital for Children, Barnet, Herts.	--	1
Elmfild School, Harpenden, Herts.	--	1
The Palace School, Ely, Cambs.	--	1
The John Greenwood Shipman Home, Northampton	1	--
Penhurst Residential Special School, Chipping Norton, Oxon.	1	1
Royal National Orthopaedic Hospital, Stanmore, Mdx.	1	--
The Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry, Salop.	--	1
Dedisham Convalescent Nursery School, Slinfold, Sussex	1	--
Miss Perkins' School, Bedford	2	--
Hurst Lea School for Crippled Boys, Whiteness Manor, Kingsgate, Kent	1	--
St. Margaret's School for Spastic Children, Croydon, Surrey	1	--

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, 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.

The schools or homes which Delicate Pupils from Bedfordshire, excluding Luton, are attending are :-

	<u>Boys</u>	<u>Girls</u>
Brentwood School, St. Leonards-on-Sea, Sussex	--	1
St. Catherine's Home, Ventnor, Isle-of-Wight	1	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	--

	Boys	Girls
Heathercombe Brake Home, Newton Abbot, Devon	--	1
Winifred House Convalescent Home, Barnet, Herts.	2	2

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 made suitable provision themselves.

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.

The procedure for examining children under these Sections was given in detail in the Report for 1958.

During 1959, 77 children thought to have a disability of mind were examined. 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 77 children examined were placed before the Education Committee. 45 were recommended for admission to residential special schools for educationally subnormal pupils, 27 were recommended for special educational treatment in ordinary schools, and five were recommended for home tuition.

During the calendar year ended the 31st December, 1959, 11 children were reported to the local Health Authority under Section 57(3) and under Section 57(5), seven 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 Youth Employment Service gives details of what is done for handicapped pupils when they are old enough to leave school. The sympathy and co-operation of employers which enables the Service to place the majority of these children is very much appreciated.

" The Youth Employment Service paid particular attention to the needs of handicapped boys and girls. Some proved no more difficult to place than their more fortunate contemporaries, but others took up a considerable amount of the Youth Employment Officers' time, especially as the employment situation was not too favourable to young people. The sympathy and co-operation of employers enabled the majority to be satisfactorily placed.

" Special arrangements were made by the Authority for the interviewing of handicapped children. In St. Margaret's Residential Special School for educationally subnormal children, those due to leave school were interviewed for the first time in their penultimate term. They were interviewed again at the bureaux during their last school holiday. In this way 16 boys and girls were interviewed and their records passed to the appropriate home Youth Employment Bureaux. At Osborne Road Day Special School in Luton, 20 educationally subnormal boys and girls were seen during their last term. Young people at Special Schools outside the County were interviewed wherever possible with their parents during their last school holiday.

" In appropriate cases, the advisability of registration under the Disabled Persons (Employment) Act, 1948, was discussed with young people and their parents. New registrations under the Act, numbered 10, and on 30th September, 1959 there was a total of 19 boys and girls on this register."

TABLE X -- NUMBER OF HANDICAPPED PUPILS IN THE COUNTY, EXCLUDING LUTON, WHO IN 1959 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 HOMES.

Category	No. of Handicapped Pupils who in 1959 were :-	
	Newly placed	Newly ascertained
Blind	1	2
Partially Sighted	--	2
Deaf	--	1
Partially Deaf	1	3
Delicate	27	26
Physically Handicapped	3	2
Educationally Subnormal	21	45
Maladjusted	3	12
Epileptic	1	1
Totals ...	57	94

Section 59

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

311 children were examined during 1959 and certificates of fitness were granted in all cases.

Examination of Candidates for Admission to Courses of Training for Teachers 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 1959 :-

Entrants to Training Colleges (Form 4 RTC)	47
Employment as teachers by the Bedfordshire Education Committee (Form 28 RQ)	45
Forms 28 RQ completed for other Education Authorities	3
Total ...	<u>95</u>

TABLE XI -- EDUCATIONAL ARRANGEMENTS FOR HANDICAPPED PUPILS IN THE COUNTY, EXCLUDING LUTON, 1959

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 ...	6	--	--	6	1	2
Partially Sighted	3	--	--	3	1	2
Deaf ...	9	--	2	11	--	1
Partially Deaf	9	--	2	11	--	2
Delicate ...	10	5	4	19	1	--
Physically Handicapped ...	7	--	5	12	16	1
Educationally Subnormal ...	84	--	21	105	11	79
Maladjusted ...	3	7	9	19	4	3
Epileptic ...	2	--	1	3	--	--
Totals ...	133	12	44	189	34	90

Note:

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

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 1959
Middx.	Royal National Orthopaedic Hospital School, Stanmore	3
"	Clare Hall Hospital Special School	5
"	Winifred House Hospital Special School	1
L.C.C.	Great Ormond Street Hospital for Sick Children	2
"	St. Bartholomew's Hospital Special School	1
"	Maudsley and Bethlem Hospital Special School	1
"	Middlesex Hospital, London	1
Cambs.	Addenbrookes Hospital, Cambridge ...	1
Wilts.	Marlborough Children's Convalescent Hospital	10
Berks.	Heatherwood Hospital Special School	1
N'hants.	Manfield Hospital Special School ...	9
"	John Greenwood Hospital Special School	1
Salop	Orthopaedic Hospital Special School, Oswestry	1
Hants.	Park Prewett Hospital Plastic and Jaw Unit, Basingstoke	1
Surrey	Tadworth Court Hospital Special School	1
Sussex	Queen Victoria Hospital, East Grinstead	1
Total ...		40

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 1959, all the 154 schools received heat-treated milk. Approximately 80 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.

Bacteriological Examination of Milk

A sample of milk is taken from every retailer supplying milk to the 154 maintained schools in the County (excluding Bedford and Luton) once a term. 201 samples were taken during the year, all of which were satisfactory.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

There have been no major changes to report for the year 1959. Routine dental inspection and treatment has been maintained as far as possible with the present staff. The only change to report is that of reduced sessions by Mr. Atkins. Mr. Atkins, who was in charge of the Biggleswade clinic before leaving to enter private practice, has reduced his number of sessions per week to one. This has virtually closed the Biggleswade clinic.

This Authority has and continues to maintain completely up-to-date static clinics. They, along with the mobile clinics, were modernised some time ago and by a regular overhaul by the manufacturers are maintained in excellent condition. It is with a feeling of frustration and dissatisfaction that it cannot be reported that they are fully employed.

Orthodontic clinics continue to be held every month as required when new cases are considered and old ones reviewed and progress noted.

The staffing problem still remains and so far as can be seen will be a major factor in the School Dental Service for years to come. The full establishment for this Authority is twelve -- we have on the staff the equivalent of five. There is a similar shortage throughout the country; in fact a survey carried out by the Principal Dental Officer of East Yorkshire showed only ten Authorities with a full staff -- these with the exception of one had an establishment of below four. The total returned establishment for the country was approximately 1,385 -- actual staff 708, deficit 677.

The shortage of staff in the Service may look as though the school child was being neglected -- this is not so, as more children are seeking treatment privately under the National Health Service. It is understandable that thinking parents are seeking and obtaining full range treatment when the School Dental Service cannot provide it. It is noticeable at each inspection that more and more children are being lost to the Clinic in this way. For this reason it is an opinion that the present establishment figure could well be revised and reduced to give a present-day figure of dental surgeons required.

The General Dental Council are inaugurating a trial scheme for the training of Dental Ancillaries to undertake simple dental operations under supervision within the School Service. Premises have been obtained and staff recruited to undertake this training which is expected to begin about October 1960. The first intake will be 60 girls, followed each year by a fresh 60. The course will be for two years during which time a comprehensive training in children's dentistry will be given. If, say, 40 girls out of each intake make the grade it will make some contribution to the 677 shortage of establishment of dental officers. Whether this assistance will come too late to save the Service remains to be seen. It would appear that a sensible thing to do in view of the number of children seeking private treatment is to admit it has failed to provide a 100 per cent service, reduce the establishment, make the Service more attractive to the younger dental surgeon and try to recruit to the new lower figure of surgeries' requirements. Then this, plus the assistance of dental ancillaries (when available), may keep a service going unless there is

any change in the policy of the provision of dental treatment under the National Health Service. At present all treatment for persons under 21 years of age and expectant and nursing mothers, except the provision of dentures, is free through the private practitioner.

REGINALD B.T. DINSDALE,
Principal Dental Officer.

Details of the work of the dental surgeons during 1959 are given below :-

Pupils inspected --							
Periodic age groups	...	...	...	...	...	...	14,450
Specials	...	...	...	...	...	...	<u>1,389</u>
					Total	...	<u>15,839</u>
Number found to require treatment	...	...	...	...	...	...	7,130
Number offered treatment	...	...	...	...	...	...	6,550
Number actually treated	...	...	...	...	...	...	<u>3,651</u>
Attendances made by pupils for treatment (including orthodontics)	...	...	...	...	...	...	6,837
Half-days devoted to --							
Inspection	...	...	...	...	...	...	162
Treatment	...	...	...	...	...	...	<u>1,045</u>
					Total	...	<u>1,207</u>
Fillings --							
Permanent Teeth	...	...	...	...	...	...	3,833
Temporary Teeth	...	...	...	...	...	...	<u>586</u>
					Total	...	<u>4,419</u>
Number of teeth filled --							
Permanent	...	...	...	...	...	...	3,488
Temporary	...	...	...	...	...	...	<u>585</u>
					Total	...	<u>4,073</u>
Extractions --							
Permanent Teeth	...	...	...	...	...	...	1,204
Temporary Teeth	...	...	...	...	...	...	<u>2,607</u>
					Total	...	<u>3,811</u>
Administration of general anaesthetics for extraction							1,982
Orthodontics --							
Cases commenced during the year	...	...	...	...	...	...	46
Cases carried forward from previous year	...	...	...	...	...	...	62
Cases completed during the year	...	...	...	...	...	...	33
Cases discontinued during the year	...	...	...	...	...	...	8
Pupils treated with appliances	...	...	...	...	...	...	80
Removable appliances fitted	...	...	...	...	...	...	84
Fixed appliances fitted	...	...	...	...	...	...	--
Total attendances	...	...	...	...	...	...	394
Number of pupils supplied with artificial teeth	...	...	...	...	...	...	42
Other operations --							
Permanent and temporary teeth	...	...	...	...	...	...	1,576

ANNUAL REPORT

of the

DIVISIONAL SCHOOL MEDICAL OFFICER

of the

BEDFORD DIVISIONAL EXECUTIVE

for the year 1959STAFFDivisional School Medical Officer

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

School Medical Officer

R.G. Hendry, M.B., Ch.B., D.P.H., D.R.C.O.G.

School Nurse

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

During the year, two private doctors were engaged for work in the School Health Service on a sessional basis.

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

GENERAL STATISTICS

The following table shows the number of children attending the 23 school departments in the area of the Borough of Bedford at the beginning of January, 1960.

<u>Type of School</u>						<u>Number of Schools</u>	<u>Number on Roll</u>
Nursery	...	...	...	...	...	1	44
Infant	...	...	...	...	...	7	1,502
Primary Junior Mixed	...	...	...	...	...	6	2,069
Primary Junior Mixed and Infant	...	...	...	...	...	3	1,523
* Secondary Modern	...	...	...	...	...	6	2,456
						23	7,594
						<u> </u>	<u> </u>
* Mixed						4	
Boys						1	
Girls						1	

It will be noted that the number of children in the schools is increasing from 7,480 at the beginning of January, 1959 to 7,594 at the beginning of January, 1960.

The number of foreign children in attendance at Borough schools at week ended, the 11th December, 1959 was 763.

SCOPE OF MEDICAL INSPECTION

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

	<u>1958</u>	<u>1959</u>
Inspections in prescribed groups ...	1,398	2,698
Special inspections at schools ...	6	14
Special inspections at clinics ...	145	155
Re-inspections ...	196	400

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 morning at 10.15 a.m. As required. As required. As required. Tuesday and Friday afternoons. Tuesday afternoons weekly.	Treatment of minor ailments by School Nurse. Consultations by School Medical Officer. Diphtheria immunisation. Poliomyelitis vaccination. B.C.G. vaccination. Ultra violet light treatment. 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					
Milk			Meals		
Date of Return	Number receiving milk	Percentage receiving milk	Number receiving meals	Number (included in previous column) receiving meals free of charge	Percentage receiving meals
October 1959	5,957	84.27	3,471	205	49.11
October 1958 (for comparison)	5,768	83.95	3,002	149	45.86

UNCLEANLINESS

The number of children found unclean, that is with nits or lice in their hair, was 134 in 1959, compared with 132 in 1958.

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>1958</u>	<u>1959</u>
Attendances	231	91
Number of individual children attending	141	63

RINGWORM

No cases of ringworm were discovered.

SCABIES

No cases were discovered.

IMPETIGO

Only one child 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, one child was 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. 13 children were ascertained to have received treatment during the year, of whom 11 were referred for treatment before 1959.

Apart from cases where deafness or ear disease appeared to be associated with diseased tonsils and adenoids, four 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, 267 children of school age were notified as suffering from this disease.

SCARLET FEVER

It is known that 60 cases occurred amongst schoolchildren during the year.

DIPHTHERIA

No case of diphtheria occurred amongst schoolchildren in this area.

ACUTE ANTERIOR POLIOMYELITIS

One case of poliomyelitis was notified during the year in a child of school age.

DIPHTHERIA IMMUNISATION

The scheme relating to diphtheria immunisation generally works well. It depends for its efficient working on the co-operation of the Head Teachers.

The following table shows the number of children of 5 to 15 years of age who were immunised during 1959.

			<u>Received full course</u>	<u>Received "booster" dose</u>
First quarter	...	...	10	63
Second quarter	...	...	151	430
Third quarter	...	...	39	198
Fourth quarter	...	...	138	518

It is estimated that 64.8 per cent of all children of school age have received a full course or re-inforcing injections.

POLIOMYELITIS VACCINATION

The vaccination of children continued during the year, and many received a third injection, in accordance with the recommendation of the Ministry of Health, approximately seven months after the second injection was given.

The following figures show the extent of vaccination undertaken in Bedford in children born between 1943 and 1958 inclusive (the figure is that returned to the Ministry of Health for 1959, and is the nearest one to the school age which is readily accessible).

Number of persons who had received
a third injection during the year ... 8,608

Number of persons who had received two
injections ... 2,827

(Note: some of these will have
received a third injection during
the year and may also be included
in the above figure).

B.C.G. VACCINATION

B.C.G. 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	To be kept under observation at Chest Clinic
617	73	491	489	70	2	1

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

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

Consent given	...	...	...	...	...	667
Consent not given	...	...	...	...	...	125
(Of this number 32 had either been tested previously, received B.C.G. vaccination or were under observation at the Chest Clinic)						
Number of children tested	...	...	...	...	...	590
Number found to be negative	...	...	...	...	578	
Number found to be positive	...	...	...	...	12	
Absent from school at time of test	...	...	...	...	...	62
Left district	...	...	...	...	...	15

SPECIAL FORMS OF TREATMENT

ULTRA VIOLET LIGHT TREATMENT

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.

The following tables show the number of children treated at the clinic and the conditions treated :-

No. of individual children treated	...	22
No. of attendances made by children for treatment	... ..	230
No. of sessions held	... ..	61
<u>Condition for which treatment was given</u>		<u>No. of children treated</u>
Diseases of the ear, nose and throat		11
General debility	... ..	7
External eye complaint	... ..	1
Nervous illness	... ..	1
Other defects and diseases	... ..	2

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, 72 children were referred for treatment.

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

SPEECH THERAPY

During the year, 55 children received treatment from the Speech Therapist.

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, 78 children were examined from the Borough schools, including private schools, and diagnosis and recommendations are shown in the following table :-

Educationally subnormal	... ..	31
Educationally subnormal and maladjusted	... ..	3
Maladjusted	... ..	37

Incapable of receiving education at school	3
For supervision after leaving school	2
For re-examination later. Formal decision deferred	1
No disability of mind	1

These children were referred for examination as follows :-

Examined at request of Head Teacher	40
Family Doctor	5
Parent	7
Co-ordinating Committee	1
Psychiatrist	1
School Welfare Officer	10
Speech Therapist	3
Probation Officer	1
School Medical Officer	1
Chief Executive Officer, Dr. Barnardo's Homes	1
Health Visitor	3
N.S.P.C.C. Inspector	1

Review cases	4
---------------------	---

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

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

TREATMENT IN CONVALESCENT HOMES AND OTHER INSTITUTIONS

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

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

Sex	Age	Cause	Period of treatment
Female	6	Debility	8 weeks
Male	14	Nervous disposition. Debility	9 days in 1959

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 Discharged 28.3.59
Female	11	Bronchiectasis	Admitted 25.11.59 Not discharged.
Female	9	Eczema	Admitted June 1959 Not discharged.
Female	8	Incontinent of urine and faeces; also backward	Admitted 27.2.58 Not discharged.
Female	6	Asthma and allergic rhinitis	Admitted 4.3.58 Discharged 24.3.59

OTHER EDUCATIONAL TREATMENT

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

Details are given in the following table :-

Sex	Age	Condition	Period of attendance
Male	15	Epileptic	Admitted September, 1958. Still in attendance.
Male	12	Hydrocephalus	Financial responsibility accepted July, 1956. Still in attendance.
Male	10	Ectopia vesicae	Admitted January, 1956. Still in attendance.
Male	8	Maladjusted	Financial responsibility accepted September, 1957. Still in attendance.
Female	7	Cooley's anaemia	Admitted October, 1958. Still in attendance.
Male	5	Cooley's anaemia	Admitted September, 1959. Still in attendance.

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

During the year, 32 students applying for admission to Training Colleges were medically examined. An x-ray examination of the chest is arranged where it is considered desirable.

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

DENTAL TREATMENT

The arrangements for dental treatment remained the same. All the dental staff, including those working in the area of the Divisional Executive, are on the staff of the Principal School Medical Officer. Mr. F. Brabington-Perry gives approximately eight sessions a week to the inspection and treatment of Borough children. 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

233 children were medically examined in 1959. Of this number, eight 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.

1959	1958	1957	
233	191	197	Number of Special Inspections
233	191	197	Number of Re-inspections
233	191	197	Total

STATISTICAL TABLES
relating to the work of the
SCHOOL HEALTH SERVICE
(Bedford Divisional Executive)
for the Year 1959

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

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

A -- Periodic Medical Inspections

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
1955 and later	131	130	99.2	1	0.8
1954	671	671	100.0	--	--
1953	227	226	99.6	1	0.4
1952	43	43	100.0	--	--
1951	3	3	100.0	--	--
1950	--	--	--	--	--
1949	--	--	--	--	--
1948	553	552	99.8	1	0.2
1947	252	251	99.6	1	0.4
1946	19	19	100.0	--	--
1945	227	227	100.0	--	--
1944 and earlier	572	572	100.0	--	--
Totals	2,698	2,694	99.9	4	0.1

B -- Other Inspections

	1957	1958	1959
Number of Special Inspections	199	151	169
Number of Re-Inspections ...	449	196	400
Totals ...	648	347	569

C -- Pupils Found to Require Treatment

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Disease and Infestation with Vermin).

Age Groups Inspected (By year of birth)	For defective vision (excluding squint)	For any other conditions recorded in Table III	Total individual pupils
1955 and later	--	16	16
1954	6	110	115
1953	--	44	44
1952	--	5	5
1951	--	1	1
1950	--	--	--
1949	--	--	--
1948	32	84	110
1947	23	42	64
1946	5	5	9
1945	22	37	59
1944 and earlier	54	66	115
Totals	142	410	538

TABLE II -- INFESTATION WITH VERMIN

	1957	1958	1959
(1) Total number of examinations in the schools by the school nurses	17,659	18,153	17,304
(2) Total number of individual pupils found to be infested	81	132	134
(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 1959

A -- PERIODIC INSPECTIONS

Defect or Disease	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin	13	15	21	12	14	--	48	27
Eyes --								
(a) Vision ...	6	6	81	--	55	--	142	6
(b) Squint ...	30	2	1	1	5	--	36	3
(c) Other ...	5	--	2	23	8	--	15	23
Ears --								
(a) Hearing ...	9	4	3	2	3	--	15	6
(b) Otitis Media	6	3	1	2	2	--	9	5
(c) Other ...	3	--	--	1	--	--	3	1
Nose and Throat	27	41	5	6	9	--	41	47
Speech	12	8	8	2	--	1	20	11
Lymphatic Glands	1	9	2	1	--	--	3	10
Heart	3	14	3	7	3	3	9	24
Lungs	23	11	6	5	9	4	38	20
Developmental --								
(a) Hernia ...	4	--	3	--	2	--	9	--
(b) Other ...	1	12	7	5	6	1	14	18
Orthopaedic --								
(a) Posture ...	3	6	19	--	21	3	43	9
(b) Feet ...	10	25	18	2	26	4	54	31
(c) Other ...	14	42	9	5	15	2	38	49
Nervous System --								
(a) Epilepsy	2	--	--	1	1	--	3	1
(b) Other ...	3	3	1	1	2	2	6	6
Psychological --								
(a) Development	1	4	2	1	1	4	4	9
(b) Stability	2	11	--	5	3	--	5	16
Abdomen	5	5	3	1	8	--	16	6
Other	13	12	8	5	3	5	24	22
Totals	196	233	203	88	196	29	595	350

B -- SPECIAL INSPECTIONS

Defect or Disease						Special Inspections	
						Requiring treatment	Requiring Observation
Skin	...	...	...	...	...	2	1
Eyes --							
(a) Vision	...	...	...	...	...	13	2
(b) Squint	...	...	...	...	...	4	--
(c) Other	...	...	...	...	...	4	1
Ears --							
(a) Hearing	...	...	...	...	...	3	3
(b) Otitis Media	...	...	...	...	...	--	--
(c) Other	...	...	...	...	...	--	1
Nose and Throat	...	...	...	...	...	8	1
Speech	...	...	...	...	...	13	--
Lymphatic Glands	...	...	...	...	...	1	--
Heart	...	...	...	...	...	--	--
Lungs	...	...	...	...	...	1	--
Developmental --							
(a) Hernia	...	...	...	...	...	--	--
(b) Other	...	...	...	...	...	--	--
Orthopaedic --							
(a) Posture	...	...	...	...	...	1	--
(b) Feet	...	...	...	...	...	1	1
(c) Other	...	...	...	...	...	1	--
Nervous System --							
(a) Epilepsy	...	...	...	...	...	1	--
(b) Other	...	...	...	...	...	--	1
Psychological --							
(a) Development	...	...	...	...	...	33	9
(b) Stability	...	...	...	...	...	33	5
Abdomen	...	...	...	...	...	--	--
Other	...	...	...	...	...	8	14
Totals						132	39

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

Group 1 -- Eye Diseases, Defective Vision and Squint

	Number of cases dealt with by the Authority		
	1957	1958	1959
External and other, excluding errors of refraction and squint	7	8	9
Errors of Refraction (including squint	217	165	223
Totals ...	224	173	232
Number of pupils for whom spectacles were prescribed	95	75	114

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

	No. of cases known to have been dealt with		
	1957	1958	1959
Received operative treatment --			
(a) for diseases of the ear	--	--	--
(b) for adenoids and chronic tonsillitis	32	5	13
(c) for other nose and throat conditions	--	--	--
Received other forms of treatment ...	15	3	13
Totals ...	47	8	26

Group 3 -- Orthopaedic and Postural Defects

	1957	1958	1959
Number of pupils known to have been treated at clinics or out-patient departments	49	21	81

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

	Number of cases treated or under treatment during the year by the Authority		
	1957	1958	1959
Ringworm --			
(a) Scalp	--	--	--
(b) Body	--	--	--
Scabies	--	--	--
Impetigo	3	4	1
Other skin diseases	7	24	2
Totals ...	10	28	3

Group 5 -- Speech Therapy

	Number of cases treated by the Authority		
	1957	1958	1959
Number of pupils treated by Speech Therapist	21	46	33

Group 6 -- Other Treatment Given

	Number of cases treated by the Authority		
	1957	1958	1959
Pupils with minor ailments... ..	112	61	49

