

[Report 1967] / School Medical Officer of Health, Blackburn County Borough.

Contributors

Blackburn (England). County Borough Council.

Publication/Creation

1967

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COUNTY BOROUGH OF BLACKBURN

EDUCATION COMMITTEE

ANNUAL REPORT

ON THE

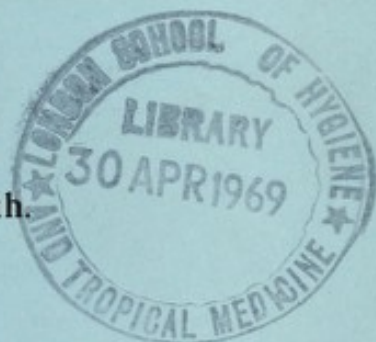
School Health Service

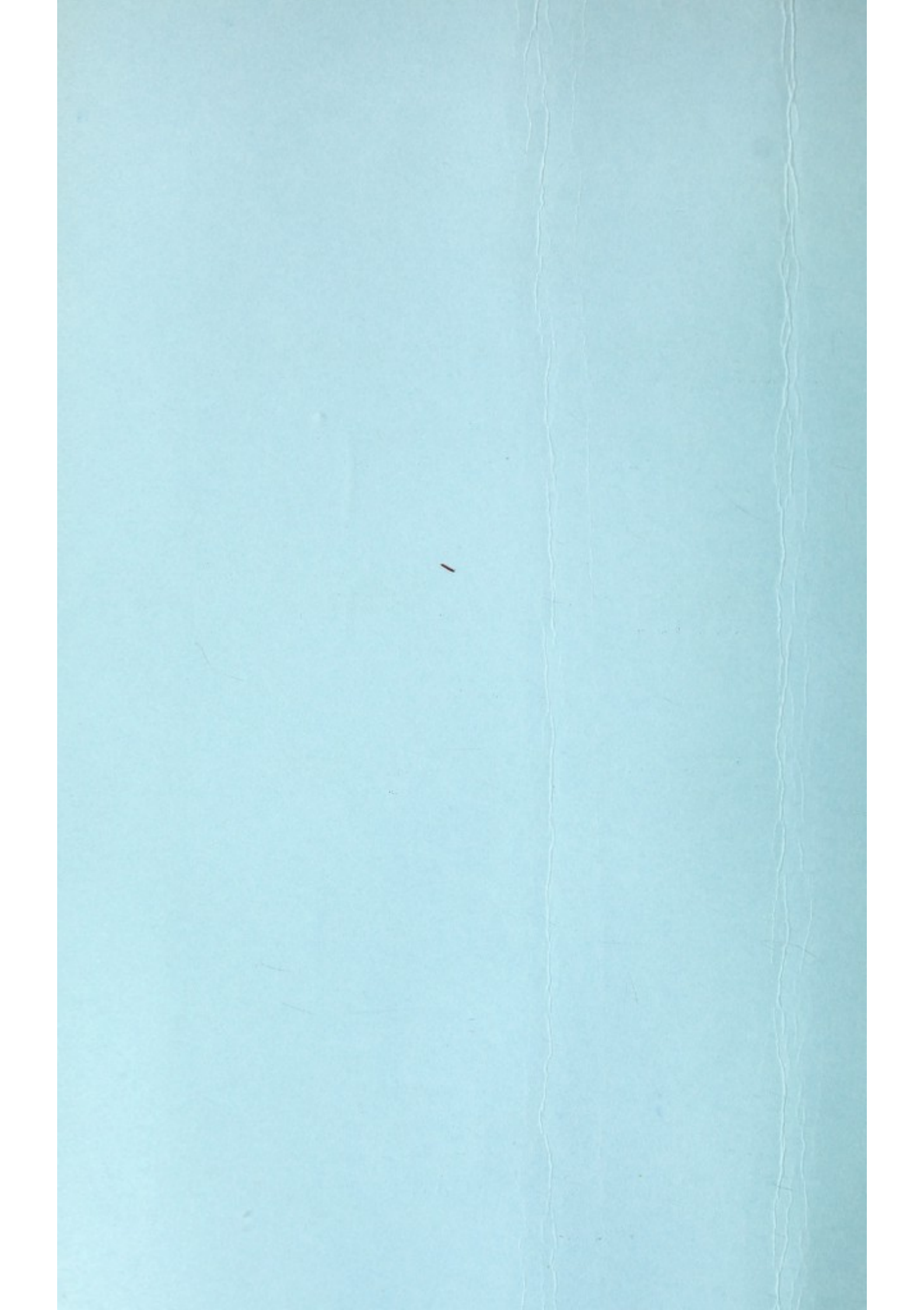
FOR THE YEAR

1967

J. ARDLEY,
M.B., B.S., D.P.H.

Medical Officer of Health.







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EDUCATION COMMITTEE

1967 - 68

THE MAYOR

(Councillor Miss F. G. LEWIS)

Alderman Sir	G. B.	EDDIE, O.B.E., J.P.
Mr. Alderman	W. A.	HENSHALL, M.C. (Vice-Chairman)
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„	R. H. G.	HORNE
Alderman Mrs.	M. A.	McNAMEE
Mr. Alderman	R. F.	MOTTERSHEAD, C.B.E., J.P.
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The Rev. Canon	L. E. H.	SWAN
	J.	ROTHWELL, Esq.
	J.	BOLTON, Esq.
	H.	GREEN, Esq.

OFFICERS EMPLOYED IN THE SCHOOL HEALTH SERVICE

Principal School Medical Officer :

J. ARDLEY, M.B., B.S., D.P.H.

Deputy Principal School Medical Officer :

J. Q. MOUNTAIN, B.Sc., M.D., D.P.H.

School Medical Officers :

BERYL SEPHTON, M.B., Ch.B., D.P.H.

SARAH N. JOSEPH, M.B., B.S., D.R.C.O.G., M.M.S.A., D.P.H.

P. S. AGARWAL, M.B., B.S., D.C.H.

SARAH A. FERGUSON, M.B., Ch.B. (from Jan.).

Assistant Medical Officers (Part-time) :

E. CARTER, M.B., Ch.B., D.P.H.

C. Y. HOWARTH, M.B., Ch.B.

S. V. JOSHI, M.B., B.S., D.C.H., D.P.H.

M. A. BARI, M.B., B.S.

HELEN B. KELLY, M.B., B.Ch.

R. PENDLEBURY, M.B., Ch.B. (from September).

Part-time Consultant Medical Officers :

J. EVANS, M.D., F.R.C.S. (Oto-Rhinology).

R. WARD, M.D., M.R.C.P. (Chest Physician).

P. R. STEVENS, M.R.C.S., L.R.C.P., D.O. (Ophthalmology).

Part-time Consultant Orthodontist :

L. C. G. HODGKINS, L.D.S.

Dental Officers :

J. RIGBY, L.D.S., Principal School Dental Officer.

J. GREGSON, B.D.S.

Superintendent Nursing Officer :

Miss L. M. BROWN, S.R.N., S.C.M., H.V.Cert., Cert. R.S.H.

Deputy Superintendent Nursing Officer

Miss M. E. THOMAS, S.R.N., S.C.M., Q.S., H.V. Cert.

Medico-Social Work, Health Visiting and Clinic Nursing :

Medico-Social Workers	25
Health Visitor/School Nurses	8
Clinic Nurses (including part-time)	10

Physiotherapy :

Senior Physiotherapist	Mrs. M. Kempton, C.S.P.
Physiotherapists	2 (one part-time)

Orthoptists :

Miss A. Greenwood, D.B.O.
Miss M. Watt, D.B.O.
Mrs. E. A. Ainsworth, D.B.O., (part time)

Speech Therapist :

Miss E. V. Grimshaw,

Dental Attendants :

Senior Dental Attendant	Miss L. E. Walsh
Attendants	2 (one part-time)

Clinic Attendants :

2

Health and Welfare Department,
Victoria Street,
Blackburn.

February, 1969.

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting my 9th Annual Report and the 62nd of the series, on the work of the School Health Service during 1967.

It is such an important landmark that after 60 years of development following the Education (Administrative Provisions) Act 1907, I should relate some of the historical background to bring the present picture into perspective. Following the manifest defects in community living consequential upon the Industrial Revolution, there had been half a century of pioneering work to eradicate some of the environmental conditions so detrimental to health. This obsession with environment by exponents of the 'Sanitary' philosophy of approach helped to reduce mortality and morbidity from the intestinal group of diseases but had its limitations.

Although there were definite manifestations of improved health and conditions of living at the end of the nineteenth century, there were still many disquieting symptoms which caused concern amongst social workers and the Public Health Departments.

Investigations carried out by Charles Booth, in London, and Rowntree, in York, into the conditions of the working classes, showed that a substantial proportion of the labouring population was living on incomes below the 'poverty line' and that the standard of nutrition of the families was well below that necessary for health and physical fitness. This was confirmed by the figures produced by the Director General of the Army Medical Services and the Inspector General of Recruiting, which indicated that 40% of all recruits examined in 1901 and 1902 were unfit for Army service. The major defects were want of physical development, defective vision, diseases of the heart, bad dentition, etc.

Evidence was presented to an Inter-departmental Committee on Physical Deterioration and many witnesses referred to the fact that children went to school without breakfast and some appeared to be so undernourished that they were unable to make adequate progress in their lessons. There were many cases of skin diseases, infestation with lice, debility and anaemia and rickets and these conditions and the poorness of the clothing—often the absence of boots or shoes—gave much concern to teachers.

The Inter-departmental Committee made a number of recommendations some of which were embodied in legislation, for example :—

- (1) the systematic medical examination of children at school to be imposed as a statutory duty on every school authority.
- (2) Provision for the feeding of school children by local authorities.
- (3) Systematic dental examination and lessons in the care of the teeth.
- (4) Instruction to older girls in cookery, hygiene and domestic economy.
- (5) Instruction to older girls in the processes of infant feeding and management.

The first result of the recommendations was the passing of the Education (Provision of Meals) Act, 1906, which authorised local education authorities to associate themselves with any voluntary committee which would undertake to supply food or to provide themselves meals up to the value of a $\frac{1}{2}$ d. rate. The Education (Administrative Provisions) Act, 1907, envisaged the development of a full medical inspection service and the organisation of a medical department at the central offices of the Board of Education. A code of regulations was produced and by 1912 arrangements were made in public elementary schools for the medical inspection of the entrant and leaver groups. At the same time it was the practice to examine any children referred by the teachers at the time of the doctor's visits. Many foresighted authorities made arrangements on a voluntary basis for doctors also to attend secondary schools.

For the first time a vast amount of information not available from any other sources about the physical condition of children aged 5-14 years was sifted and analysed, and principles were established for executive action to correct defects either incipient or apparent and the beginnings of 'preventive' personal health emerged. Many morbid conditions were discovered and dealt with, such as heart disease, rickets, rheumatism, tuberculosis, malnutrition, defective vision, etc., and in 1912 the Board of Education issued regulations to link medical treatment of a limited nature with diagnosis as a permissive duty of local authorities. The school dental service was given a firm bias in favour of conservative and constructive preventive work.

Within a year or two special schools were being established to cope with special defects, *e.g.*, the blind and partially-sighted, the deaf and epileptic, etc., and particular attention was given to providing appropriate education for mentally retarded children in special schools with classes of limited size and training by repetitive manual handwork, sense training, and learning by doing. The development of open-air schools went ahead at which fresh air, sunlight, sufficient diet, daily rest, attention to personal hygiene, physiotherapy, etc. were available for debilitated, anaemic or undernourished children.

The intervening years of the first World War retarded progress seriously but in 1918 a further Education Act, 1918, made it the positive duty of all education authorities to provide to the satisfaction of the Board of Education treatment facilities for certain defects found, namely, minor ailments, dental defects, defective vision, enlarged tonsils and adenoids and ringworm.

In 1920 the Board of Education's estimate of the number of handicapped children other than dull and backward was 164,500. The period up to 1920 may be said to be the experimental phase of development and to have been very fruitful and to have stimulated a general and progressive improvement in the service continuing to the present day, with again a wartime intervening period, with its associated difficulties.

The post 1920 awareness of the special problem of maladjustment in the school child was met in only very limited manner by the development of the Child Guidance service which consisted essentially of teams each compounded of child psychiatrist, educational psychologist and psychiatric social worker. The high degree of specialisation of team members has tended even to the present time to place difficulties in the way of organisation of such services.

Nutrition was a subject causing much heartburning up to the 1920s and deficiency diseases were extremely common in most industrial towns to the extent that some observers reported manifestation of rickets in up to 80% of London school children. The introduction of dietetic supplements like cod liver oil into Infant Welfare Clinics in 1918 and in 1934, the provision of cheap milk in schools together with other measures, gradually improved this sad state of affairs so that by 1939 there was a significant change for the better in heights and weights physique and general condition of children of school age.

One infectious disease which seemed repeatedly to produce many deaths of school children was diphtheria and it was not until the post-war period that immunisation was exploited to the full and systematic campaigns in infancy and childhood reduced the mortality and morbidity to the present low state.

Tuberculosis received much attention in the inter-war years but there were two landmarks in the service for its eradication ; first, the introduction of practically universally Pasteurised milk dispensed with the vast amount of non-pulmonary bovine infection in children and so saw a fast declining incidence of tuberculosis of bones and joints, meningitis, glands, peritonitis, kidneys and miliary tuberculosis: secondly, the introduction of mass radiography, coupled with tuberculin testing of contacts, and the use of B.C.G. prophylaxis in contacts and 13 and 14-year old school children.

It is interesting to look at the situation with regard to mortality and morbidity in the early years of the School Medical Service and compare with to-day :—

In 1907 Deaths	Causes	1957	1967
6	Scarlet Fever	} Nil.	} Nil.
2	Whooping Cough		
7	Diphtheria		
2	Enteric Fever		
1	Diarrhoea		
13	Tuberculosis		

Cases occurring (not death) 1907—

Diphtheria	150
Scarlet Fever	— 544
Typhoid	61

1907 HALF-TIME LABOUR

Two thousand school children worked 6.0 a.m.—12.30 p.m. (30 minute break at 8.0 a.m.) next week worked 1.30 p.m.—5.30 p.m. (no break) plus Saturday shift. None working a.m. or p.m. devoted to school. Wages 2/6d. to 2/9d. per week.

At the end of the experimental period namely 1920 : 30% of children between 10 and 14 years of age were still gainfully employed.

Diphtheria	caused 10 deaths	(14.5% case mortality)
Measles	„ 18	„
Influenza	„ 59	„
Tuberculosis of lung	„ 82	„
Syphilis (babies only)	„ 5	„

and the Infantile Mortality per 1,000 births was 110.

This year was noteworthy for the fact that Sir Allen Daley, the then Medical Officer of Health, pioneered Health Education in this County in conjunction with Sir Lewis Beard, the Town Clerk, and achieved in the following year the enormous success of having approximately 57,500 people attending lectures during the year.

During the period up to the commencement of the 2nd World War the following special schools or classes were brought into operation to meet specific needs.

BLACKBURN EARLY SCHOOLS

- 1907 Regent Street Special School for Mental Defectives
- 1907 Stammering Class at the Technical School
- 1912 Open Air Class at Bangor Street
- 1913 Open Air Class at Accrington Road School
- 1914 Corporation Park Class
- 1939 Black-a-moor School
Orthoptic Clinic

In 1944, the Education Act of that year consolidated previous legislation and the present School Health Service derives its authority from this Act, its subsequent amendments and regulations. It is concerned with ensuring that each child of statutory school age obtains the education appropriate to age, ability and aptitude and, to this end directs attention to preventing preventable disease or remedying established defects which might lower the capacity for learning. It is interested in positive health as well as the absence of illness and in the whole personality rather than just physical attributes.

In the immediate post-war era a traditional pattern had become established whereby the School Medical Officers carried out systematic medical examination of all 5-year old 'entrants' and 15-year old 'leavers' and either one or two routine examinations of the intermediate age groups. The purpose was to discover conditions that required either therapy or special educational facilities and to mobilise the appropriate resources to meet the need. These arrangements were supplemented by access to hospital consultants specialising in certain fields such as Ophthalmology, Oto-laryngology, Orthodontics, Child Psychiatry and Medical Auxiliaries like Orthoptics, Physiotherapy, Speech Therapy, Chiropody, Audiometry, etc.

In the past decade, there has been a change in this pattern in that whilst the entrant and leaver groups have been examined 'in toto' as hitherto, the intermediate examinations have been modified to a consultative rather than routine medical procedure, allowing for selectivity. This enables the parent to be involved by questionnaire and then the teacher, school doctor and Health Visitor to decide on who is requiring to be examined and at what periodicity.

The Blackburn blue print which was worked out about five years ago is shortly to come to fruition in 1968 with the completion of the two Major Health Centres and envisages the end of the fragmented ascertainment services occurring late in the child's formative years and replacement by a comprehensive assessment service from birth through to the end of school life and then linked to Welfare Services for the Handicapped.

The elements of this scheme are—

- (1) An "At Risk" register is compiled of all Blackburn babies in whom there might be a risk of development of handicap or defect because of genetic, ante-natal, natal or post-natal factors such as familial deafness, Rh factor incompatibility, toxæmia in the mother, abnormal birth, etc. These factors are notified to the Medical Officer of Health with the Statutory birth notification and the birth is followed up by the appropriate Medico-Social Worker so that other factors which might be significant are taken cognisance of, such as the results of phenylketonuria tests at 2nd and 6th weeks, infectious diseases, *e.g.* poliomyelitis, accidents, operations, etc.
- (2) A *Handicapped Register* to which the 'At Risk' names are transferred if anticipated potential handicaps do materialise.
- (3) A "*Handicap Assessment Centre*" in the East and West Major Health Centres to which children on the handicapped register can be referred. This Centre would provide for the Paediatric Consultant, Orthopaedic Consultant and Child Psychiatrist in conjunction with the Family Doctor and Local Authority Staff to make a team assessment of the handicapped person's clinical condition, his requirements by way of therapy, advice and support to the family, recommendations relating to schooling, and subsequently in conjunction with the Youth Employment Officer preparation for employment either 'sheltered' or 'open', with or without reference to training facilities.
- (4) *Supportive therapeutic and diagnostic services*—Supplementing the three consultants named in the Assessment Centre, a second group of consultants dealing with special senses, *e.g.* Ophthalmic, Ear, Nose and Throat and Orthodontics and the Local Authority Medical Auxiliary teams of Physiotherapists, Orthoptists, Speech Therapists, Occupational Therapists, Chiropodists and Educational Psychologist who could be drawn into consultation by the paediatrician according to need.

This brief resume of the very productive and successful first 60 years of the School Health Service is a history of evolution of which the Local Authority may be justly proud and has conferred benefits in association with the Child Welfare Services on the health and welfare of the developing child even beyond the most optimistic expectations. However, it is unlikely that this evolution will be encouraged to continue as the disruptive impact of recommendations in the "Seebohm" and "Green Paper" reports of 1968 may sound the death knell to preventive medicine.

In conclusion, may I express my thanks to you, Mr. Chairman, and to members of the Committee for your continued support during the year.

I remain,

J. ARDLEY,

Your obedient servant,

Principal School Medical Officer.

SCHOOL CLINICS

<i>Designation</i>	<i>Purpose</i>	<i>Where held</i>	<i>Time</i>
Inspection ..	Special Examination of Cases referred by Teachers School Welfare Officers and School Nurses	Richmond Terrace	Wednesday 2.0 p.m. Friday 2.0 p.m.
Ophthalmic	Prescription of Spectacles	„	Monday 8.30 a.m. Tuesday, 2.30 p.m. Thursday, 2.30 p.m. (By appointment)
Dental Clinic	Dental Treatment	„	Every week-day (by appointment).
Minor Ailments	Treatment of Minor Diseases of Skin, etc.	„	Every week-day at 8.45 a. „
Cleansing ..	Treatment of Scabies and Cleansing of Verminous Cases.	Blakey Moor	By appointment
Physiotherapy	Treatment of Postural Defects, Sunlight	Richmond Terrace	Every week-day (by appointment).
Immunisation	Immunisation against Diphtheria, Whooping Cough and Vaccination against Poliomyelitis	„	Monday, 3.45 p.m or by appointment
Vaccination	Vaccination against Small-pox, and Tuberculosis	„	By appointment
Ear, Nose and Throat	Treatment of Deafness, etc.	„	As required (by appointment)
Audiology ..	Diagnosis of Hearing Defects	„	By appointment
Orthoptic ..	Correction of Strabismus	Victoria Street	Every week-day (By appointment)
Speech	Correction of Speech Defects	St. Peter Street	Every week-day (By appointment)
Chiropody ..	Treatment of Foot Defects	King Street and Bridge Street	By appointment

COST OF SCHOOL HEALTH SERVICE

I am indebted to the Borough Treasurer, Mr. L. Wolstenholme, for the following particulars relating to the cost of the School Health Service during 1966-1967.

EXPENDITURE

	£	s.	d.	£	s.	d.
Salaries and Fees	39,682	13	9			
Local Government Superannuation—						
Employer's Contribution	2,007	14	3			
Equal Annual Charge	635	14	8			
National Insurances—						
Employer's Contributions	1,303	6	5			
Staff Training	196	1	11			
Travelling Expenses and Subsistence						
Allowances	585	16	4			
Printing, Stationery, Postages and						
Telephones, etc.	353	10	8			
Drugs, Medical Requisites and Apparatus..	1,387	18	6			
Uniforms	347	6	0			
Rents and Insurances	37	16	2			
Upkeep of Buildings	2,576	17	5			
Medical Inspections—Intending Teachers	446	5	0			
Sundries	2	5	7			
Laundry	185	19	1			
				49,749	5	9

INCOME

Recovered from—

Blackburn Executive Council, N.H.S. (Sight testing)	596	5	0			
Regional Hospital Board—						
Orthoptic Clinics	544	7	0			
Lancashire County Council—						
Orthoptic Clinics	500	6	6			
Services to Health Department—						
Dental Sessions	214	4	0			
Services to Welfare Department—						
Physiotherapy Sessions	400	0	0			
Sundries.. .. .	15	11	3			
				2,270	13	9
EXPENDITURE LESS INCOME				£47,478	12	0

The rateable value of the Borough on 31st March, 1967, was £3,375,495. The cost of medical inspection and treatment in schools for the twelve months ended 31st March, 1967, was £47,479, compared with £42,563 in the previous year.

This was equivalent to £2. 17s. 9d. per child on the school rolls, and expressed as a penny rate was 3.62d.

SCHOOL POPULATION

Particulars of children on the rolls at maintained schools are as follows :

3 Nursery Schools	..	..	..	120
53 Primary School Departments	..	..	..	10,383
12 Secondary Schools	..	..	..	5,845
3 Special Schools	..	..	..	307
				<hr/>
Total	..	..	..	16,655
				<hr/>

SECTION ONE

MEDICAL INSPECTION

The programme of Routine Medical Inspection, adopted in 1955, has been continued.

The year's findings are set out on pages 18 to 21 whilst Table 1 below shows the numbers of children examined in years of birth of Groups examined

Table 1.

Year of Birth of Groups Examined	WEST DIVISION	EAST DIVISION	TOTAL
1952 and earlier	257	..	257
1953.....	..	..	..
1954.....	5	..	5
1955.....	177	152	329
1956.....	378	253	631
1957.....	10	1	11
1958.....	14	19	33
1959.....	23	100	123
1960.....	111	393	504
1961.....	282	517	799
1962.....	653	685	1338
1963 and later	345	314	659
TOTALS	2255	2434	4689

ROUTINE MEDICAL INSPECTIONS DURING 1967.

(a) Attendance of Parents at Inspections**Table 2**

Year of Birth of Groups examined	WEST			EAST			COMBINED		
	No. Exam.	Par'nts Pres'nt	%	No. Exam.	Par'nts Pres'nt	%	No. Exam.	Par'nts Pres'nt	%
1952 and earlier	257	12	4.5	..	..	..	257	12	4.5
1953 ..	..	..	..	..	..	..	..	..	..
1954 ..	5	..	..	..	..	..	5	..	..
1955 ..	177	98	55.3	152	87	57.2	329	185	56.2
1956 ..	378	249	64.8	253	138	54.5	631	387	61.4
1957 ..	10	5	50.0	1	1	100.0	11	6	54.3
1958 ..	14	7	50.0	19	9	47.3	33	16	48.4
1959 ..	23	17	73.9	100	94	94.0	123	111	90.1
1960 ..	111	78	70.3	393	311	79.1	504	389	77.1
1961 ..	282	230	81.5	517	408	78.9	799	638	79.6
1962 ..	653	452	69.0	685	590	86.1	1338	1042	77.8
1963 and later	345	302	87.5	314	269	85.6	659	571	86.6
TOTALS ..	2255	1450	63.8	2434	1907	78.3	4689	3357	71.6

(b) General Condition

The general condition of children examined at Routine Medical Inspection during 1967 was again satisfactory.

(c) Visual Defects and External Diseases of the Eye

Of four hundred and forty-five children found to have defective vision, two hundred and seventy-four were referred for treatment.

In addition to those children with defective vision, twenty-one were found with squint, and three with "Other forms of external eye disease." Twenty-three were referred for treatment.

(d) Ear Disease and Hearing Defects

At Routine Medical Inspection, ninety-seven children found to have ear trouble were dealt with as follows :

	Referred for treatment	Referred for observation	Total
Hearing	111	10	121
Otitis media	2	—	2
Other	4	1	5

(e) Nose and Throat

One hundred and ten children were referred for treatment and sixty-four were placed under observation.

(f) Defective Speech

At routine inspection, forty-nine children were found to be suffering from speech defects, twenty-five of whom were referred for treatment.

(g) Orthopaedic Defects

One hundred and fifty-seven children were discovered at routine medical inspection as follows :

	Requiring Treatment	For Observation	Total
Posture	38	6	44
Feet	105	18	123
Other	1	—	1

(h) Heart and Circulation

Five children were referred for treatment and six for observation as a result of defects found at Routine Medical Inspections.

(i) Lungs

Nine children were found to have respiratory defects of varying degree, eight of which required treatment.

(j) Miscellaneous Defects

The following table sets out details of other defects found at Routine Medical Inspection :

Table 3.

DEFECT	Requiring Treatment	For Observation	TOTAL
Skin	13	3	16
Lymphatic Glands	—	1	1
Development			
(a) Hernia	6	2	8
(b) Other	61	104	165
Nervous System			
(a) Epilepsy	1	—	—
(b) Other	—	—	—
Psychological			
(a) Developmental	—	—	—
(b) Stability	1	—	1
Abdomen	1	2	3
Other	141	106	247

Table 4.**(k) Comparative Table of Referrals by Division**

DEFECT	Requiring Treatment			For Observation		
	WEST	EAST	TOTAL	WEST	EAST	TOTAL
Skin	4	9	13	2	1	3
Eyes : Vision	155	119	274	86	85	171
Squint	18	2	20	1	..	1
Other	2	1	3	..	..	..
Ears	56	55	111	9	2	11
Nose and Throat	51	59	110	35	29	64
Speech	10	15	25	18	6	24
Lymphatic Glands	1	..	1	..	..	..
Heart	5	..	5	6	..	6
Lungs	8	..	8	1	..	1
Developmental	27	40	67	72	34	106
Orthopaedic	118	26	144	21	3	24
Nervous System .. .. .	..	1	1	..	..	..
Psychological	1	..	1	..	..	..
Abdomen .. .. .	..	1	1	1	1	2
Other	120	21	141	93	13	106
TOTALS	576	349	925	345	174	519

Heights and Weights.

Table 5.
WEST DIVISION.

Group	BOYS			GIRLS		
	No. Examined	Average Height in Inches	Average Weight in Pounds	No. Examined	Average Height in Inches	Average Weight in Pounds
1952 and earlier	199	64	118	58	62	117
1953	..	..	..	..	..	..
1954	..	..	..	..	..	..
1955	95	56	78	72	56	80
1956	170	54	75	198	56	72
1957	..	..	..	..	..	..
1958	4	48	52	..	..	..
1959	9	48	53	4	47	50
1960	56	46	50	45	47	49
1961	140	46	46	132	44	46
1962	338	42	45	305	42	41
1963 and later	194	40	38	151	39	39

Table 6.
EAST DIVISION.

Group	BOYS			GIRLS		
	No. Examined	Average Height in Inches	Average Weight in Pounds	No. Examined	Average Height in Inches	Average Weight in Pounds
1952 and earlier	..	..	..	..	..	..
1953	..	..	..	..	..	..
1954	..	..	..	..	..	..
1955	69	60	75	83	60	78
1956	119	58	68	134	57	69
1957	..	..	..	1	55	60
1958	11	50	53	8	52	60
1959	55	46	48	45	48	51
1960	215	45	47	178	47	49
1961	274	47½	51	243	48	48
1962	345	45	47	340	46	47
1963 and later	149	45	44	165	46	44

Following-up (WEST and EAST Divisions combined) :*Home Visits*

Follow up	2,579
Infectious Diseases	362
Ineffective visits	166

Special Visits

Special Education Examinations	440
Physically Handicapped	245
Maladjusted	263
	<hr/>
	4,055
	<hr/>

Table 7.**Visits to Schools**

Cleanliness	29,248
Infectious Diseases	334
Other reasons	7,717
	<hr/>
	37,299
	<hr/>

School Hygiene Inspections

Children free from infection	28,700
Children requiring treatment	285
	<hr/>
	28,985
	<hr/>
TOTAL CLINIC SESSIONS ATTENDED	1,227
	<hr/>

SECTION TWO

TREATMENT

Clinics.

Location of the various Clinics is shown on Page 13 of the Report.

Inspection Clinic.

During the year, 1,131 children paid 1,198 visits to Inspection Clinics at which the School Medical Officers examine children referred for special examination.

Minor Ailments.

Treatments are given every morning at the School Clinic, by a School Medical Officer assisted by two school nurses.

Table 8.

Complaint	Cases	Attendances
Ringworm (Head) .....	..	..
Ringworm (Body)	3	4
Impetigo	27	139
Scabies	77	319
Other Skin diseases	202	757
Nits and Vermin	92	517
Minor Injuries	81	363
Otorrhoea	1	2
Otitis Media	1	2
Other Ear	19	43
Conjunctivitis .....	..	..
Blepharitis	2	6
Other Eye	6	15
Miscellaneous	48	136
	559	2303

Tonsils and Adenoids.

In all, 327 children were operated upon during the year, 195 at Queen's Park Hospital, 104 at the Royal Infirmary and 27 at Accrington Victoria Hospital. At the end of the year, there were 113 children on the operation waiting list compiled by the School Health Service.

The department is notified of all children operated upon, to ensure follow-up on discharge.

Visual Defects.

The Authority has continued to use the Supplementary Ophthalmic Services for the supply of spectacles to school children. Three clinics are held each week, attended by the Consultant Ophthalmologist, Mr. P. R. Stevens.

During 1967, 1,847 attendances were made at 122 sessions. Of these attenders, 453 were new cases : spectacles were prescribed for 909 children.

Physiotherapy and Remedial Exercises Clinic

PATIENTS TREATED AT THE PHYSIOTHERAPY CLINIC AND
AT THE OPEN AIR SCHOOL

Table 9.

	PHYSIOTHERAPY CLINIC								OPEN AIR SCHOOL	
	REMEDIAL EXERCISES				ELECTRICAL TREATMENT					
	School		Pre-School		School		Pre-School		Cases	Attendances
	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances		
Breathing Exercises	36	274	1	3	..	..	..	..	70	1394
Postural Defects ..	26	190	..	..	..	..	..	..	5	74
Spinal Curvature..	6	78	1	23	1	2	..	..	..	..
Poliomyelitis.....	1	44	..	..	1	44	..	..	..	..
Congenital Defects	4	81	9	165	..	..	..	..	..	..
Defects of the Feet	137	1299	19	259	1	13	..	..	..	..
Genu Valgum	41	296	40	485	..	..	..	..	..	..
Result of Accident	7	36	1	5	1	6	..	..	..	..
Other.....	27	229	3	3	4	14	..	..	..	..
TOTALS	285	2527	74	943	8	79	..	..	75	1468

Ultra Violet Light Treatment

Two hundred and thirty-two children underwent ultra violet light treatment and received a total of three thousand two hundred and nineteen exposures, as follows :

	Cases	Exposures
Physiotherapy Clinic	209	2820
Open Air School	23	399

Orthoptic Clinic

During 1967 the Orthoptic Department continued to function with a staff of two full-time and one part-time Orthoptists.

Full sessions were carried out at the Health Department, and six sessions a week were held at the Infirmary.

Our thanks go to Mr. Stevens, the Consultant Ophthalmologist for his continued interest in the work of the department.

The statistics for 1967 are tabulated below :

SCHOOL CLINIC

	Borough	County
New Cases.....	141	118
Discharged (Functional)	72	52
Discharged (Cosmetically Straight)	33	22
Discharged (Left District, Failed to Attend)		81
Attendances	3911	

BLACKBURN ROYAL INFIRMARY

New Cases.....	401
Attendance—Borough	761
County	1304
Operations	93

Speech Clinic

As in 1966, speech therapy sessions were held daily at the clinic in the Nurses Home, St. Peter Street, and weekly at Blackamoor Special School, Crosshill School and the Dame Evelyn Fox Junior Training School.

From January, 1967, the speech clinic has been used by the Elizabeth Gaskell College, Manchester, as a training clinic. A working student from the College has attended the clinic and the Junior Training School for one day per week, during the college term.

Further developments and increased staff are urgently required for the provision of an adequate speech therapy service to the town.

Number of cases attending for Speech Therapy during the year :

Clinic	156	} 264
Crosshill School	43	
Blackamoor School	27	
Junior Training Centre	23	
Pre-school Children	15	
Cases on books at end of year		214
Discharged		62
Attendances		3204

Child Guidance Clinic.

During the year eighty-three children were seen by the Psychiatrist and Educational Psychologist.

The results of the cases referred were :

	Total
Children for Day E.S.N. School	34
Recommended for Residential School	11
Recommended for Black-a-moor Special School	2
Wilkinson House	8
Family Group Home	6
Deferred action.....	9
No further action	13

Cleansing of Children.

The School Nurses continue to pay regular visits to Schools to examine children for the presence of infestation. During 1967, 28,700 such examinations were made and 285 incidents of infestation recorded.

The Clinic Attendant continued to carry out systematic cleansing, and in all, 6,885 treatments were given to 405 children. All treatments were carried out in school.

Audiometry.

During 1967, 3,111 children were tested with the following results :

Passed (6 frequencies at not more than 20-db loss)	2258
Referred for further investigation	192
Failed	661

SECTION THREE

DENTAL INSPECTION AND TREATMENT

1. Attendances and Treatment

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First Visits	1578	1167	220	2965
Subsequent Visits	895	1341	315	2551
Total Visits.....	2473	2508	535	5516
Additional courses of treatment commenced	37	44	24	105
Fillings in permanent teeth	677	1294	359	2330
Fillings in deciduous teeth	562	30	..	592
Permanent teeth filled	569	1162	335	2066
Deciduous teeth filled	505	28	..	533
Permanent teeth extracted	166	493	126	785
Deciduous teeth extracted	2537	629	..	3166
General anaesthetics	426	198	26	650
Emergencies	590	327	58	975

Number of Pupils X-rayed	71
Prophylaxis	100
Teeth otherwise conserved	-
Number of teeth root filled	8
Inlays	-
Crowns	-
Courses of treatment completed	2017

2. ORTHODONTICS

Cases remaining from previous year	73
New cases commenced during year	37
Cases completed during year	24
Cases discontinued during year	1
No. of removable appliances fitted	22
No. of fixed appliances fitted	2
Pupils referred to Hospital Consultant.. ..	-

3. PROSTHETICS

	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. .. (first time)	—	—	—	—
Pupils supplied with other dentures .. (first time)	1	14	2	17
Number of dentures supplied	1	16	2	19

4. ANAESTHETICS

General Anaesthetics administered by Dental Officers .. 19

5. INSPECTIONS

(a) First inspection at school. Number of Pupils	11186
(b) First inspection at clinic. Number of Pupils	568
Number of (a)+ (b) found to require treatment	7029
Number of (a)+ (b) offered treatment	4322
(c) Pupils re-inspected at school clinic	845
Number of (c) found to require treatment	405

6. SESSIONS

Sessions devoted to treatment	727
Sessions devoted to inspection	82
Sessions devoted to Dental Health Education	—

SECTION FOUR

INFECTIOUS DISEASES

Information as to the incidence of non-notifiable infectious disease is obtained from teachers, welfare officers, public health inspectors, medico-social workers, health visitors and parents.

The following table gives particulars of cases of infectious diseases occurring in school children during 1967.

Table 10.

Period	Scarlet Fever	Diphtheria	Measles	Whooping Cough	Chicken Pox	Mumps	Dysentery	Primary Pneumonia	Acute Poliomyelitis	Puerperal Pyrexia	Food Poisoning
January-April ..	6	-	68	4	74	38	10	1	-	-	-
May-August ..	-	-	14	7	32	13	3	-	-	-	1
September-December	1	-	2	11	6	6	-	-	-	1	-
TOTALS ..	7	-	84	22	112	57	13	1	-	1*	1

* 15 year old girl

SECTION FIVE

HANDICAPPED PUPILS

Ascertainment

The arrangements for the ascertainment of pupils requiring special educational treatment are covered by regulation of the Minister of Education, and have been detailed in previous reports.

Special School Provision

There are three special schools provided by the Authority, a School for Delicate and Physically Handicapped children, a school for Partially Sighted Pupils in Corporation Park and Crosshill School for Educationally Subnormal Pupils.

Partially Sighted Pupils are admitted to the Special School in Corporation Park. At the end of the year fifteen children (nine boys and six girls) were in attendance.

I append a report of the School's activities by the Headmaster, Mr. H. H. Evans :

There were 15 children on the roll at the beginning of the year (nine boys and six girls). During the year four boys and one girl were admitted and three boys and two girls left. The number on roll at the year's end is fifteen (ten boys and five girls) and the present age range is six to 15+ years.

Of the children who left, two boys and one girl attained 16 years of age, one girl was re-classified as ineducable under Section 57 of the Act, and one boy was transferred to Wavertree School for the Blind.

The problem of placing partially sighted school leavers in employment grows more acute, more so in the case of extra-district children. We suggest a much closer and earlier liaison is necessary between all departments concerned with obtaining suitable jobs or further training for these school leavers. Certainly the difficult task of the Youth Employment Officer could be made easier by improved liaison.

This problem of adequate training and obtaining suitable employment is now being actively studied by the National Bureau for Co-operation in Child Care and, to our minds, this is a very urgent and necessary enquiry. It may well be that the question of children in Special Schools obtaining training of a more specialised nature than that at present falling within the curriculum could arise. This could be given either on the school premises or extra-murally, depending on the facilities available. The need for early liaison and training is particularly vital in the cases of children with considerable secondary disabilities, otherwise they are in danger of becoming second class citizens through no fault of their own, or, for that matter of the school concerned. At the moment we have a majority of such children on roll here.

Closely allied to this question of secondary disabilities is the question of adequate staffing. For some years the average number on roll here has been sufficiently high to place the school in the Group IIS Classification ; this only takes into account the partially-sighted disability. On these grounds alone the services of another full-time teacher in lieu of a part-time teacher are fully justified. Moreover, when one considers that half of the children here have secondary disabilities and their I.Q's range from 50 to just 100, then the appointment of a full-time assistant mistress becomes one of real urgency. We would hope that this appointment will be made early in the New Year.

A good selection of Art and Crafts was submitted for the Children's Section of the Blackburn Agricultural Show and in all nineteen prize cards were gained.

The school entertained a number of visitors during the year including experienced teachers on one year courses concerning handicapped children, also two student Home Teachers for the Blind from Bolton.

In conclusion our thanks are due to the School Nurse and the several departments of the Health and Education Offices for their services during the year. The excellent work done by the auxiliary staff here is also worthy of mention.

H. H. EVANS, *Headmaster.*

Blackamoor School

I append a report by the Headmaster, Mr. T. Harling :

Forty-one children were admitted and thirty-eight discharged during 1967 ; one hundred and forty being in attendance at the end of the year. These figures show an increase on last year in the number of children admitted.

The reasons for the admission of the forty-one new cases were as follows :—

General Debility.....	9	Post Rheumatic Fever	1
Underweight	3	Sinusitis	1
Delicate	7	Recurrent Infection	1
Bronchitis.....	3	Brain Damage	1
Asthma	5	Defect of R. Foot	1
Emotional Disturbance	3	T.B. Hip	1
Epilepsy	3	Bladder Deformity	1
School Refusal	1		

An assessment of categories of handicap taken at the end of the year shows as follows :—

Delicate	102	Partially Hearing	3
Physically Handicapped..	24	Maladjusted.....	4
Epileptic	5	Partially Sighted.....	2

27% of the children on roll were diagnosed as suffering from complaints other than delicate, 21% being physically handicapped.

There were three thousand, four hundred and ninety-one visits to the medical room during the year. Children having fits were attended on forty-four occasions by the school nurse ; four children were sent by ambulance to Blackburn Royal Infirmary.

Children treated by the Physiotherapist were as follows :—

Foot Exercises.....	93	Breathing and Postural Exercises..	700
Sunlights	399	Breathing Exercises for Asthma..	420
Exercises for Individuals	375		

Two members of staff returned to the school in September after a year's course at university. One of the teachers has done the Diploma of Education Course in the Teaching of Handicapped Children, whilst the other has taken the Advanced Diploma of Education Course. This latter course requires one year of academic study at the university followed by a year of research in the field of Special Education.

Special Education must benefit when experienced teachers are sufficiently enthusiastic to extend their knowledge and qualifications. It is refreshing to us all to see them return with renewed interest and vigour.

Average attendances were :	Easter Term	80.1%
	Summer Term	82.2%
	Autumn Term	82.4%

The highest percentage of average attendance was 88.7%.

I would like again to thank the School staff for their ever patient endeavour and they join me in expressing gratitude for the constant help received from the various departments of the Education Office and the School Medical service.

T. HARLING, *Headmaster.*

Educationally Subnormal Pupils.

During the year, sixty-two children have been examined regarding their mental conditions, with results as follows :

	<i>West</i>	..	<i>East</i>
Recommended for Special Day Schools.....	43	..	28
Recommended for Special Residential Schools..	6	..	—
Required no action	20	..	16
Decision deferred.....	5	..	4
Unsuitable for education at school.....	3	..	1
Referred to Child Guidance Clinic.....	37	..	5
Discharged from Special School.....	—	..	—

Crosshill Special School

I append the report of the Headmaster, Mr. A. Roberts, on the School's activities during the year :

During the year, 49 children were admitted and 44 left : 17 found employment, 14 left the district, and 12 were sent to Residential or other special forms of education. 158 children were on roll at the end of the year.

This has been an unsettled year from the staffing point of view. Mr. F. Duerden retired in August after 38 years service in Blackburn, 13 years of which were spent as Head of the Special School at Four Lane's End and later at Crosshill. Much of the success achieved at this school is due to his skill, patience and leadership. In September, the new Headmaster (Mr. A. Roberts) took up his appointment, coming to Blackburn from a post as Deputy Head Teacher of Hare Law Special School, Co. Durham. There have been further changes of staff owing to promotion and other reasons. In a school such as this, staff changes are more upsetting since personal relationships are so vital for developing correct attitudes and progress. Great credit is due, therefore, to the staff in general, that the appointment of a new Headmaster and other staff changes have caused little degree of extra unsettledness. Apart from a high professional skill every member of staff shows an awareness of the difficult problems involved and a depth of understanding so necessary for promoting positive progress in all aspects of special education.

ADMISSIONS

Throughout the year the number of children awaiting admission increased. This was due to various factors, one being a shortage of staff. In a school of this type, bearing in mind the restricting effects of the building itself, it is impossible to make any progress whatsoever in classes larger than those advised by the Department of Education and Science, *i.e.*, 20. The social, emotional and educational difficulties of children are such that the sheer physical strains imposed upon staff here are tremendous. Consequently admissions have been made only when these resulted in no extra burden for members of staff. It is hoped that very soon, with an extra staff appointment, the back-log of entrants may be reduced considerably.

It is a disturbing fact to note that, compared with the national situation, the level of intelligence here is far above that expected in an E.S.N. School. 27% of pupils here are above the normal range expected. Low ability should be the deciding factor and other authorities might consider that pupils with low attainment allied with average or just below average intelligence should be dealt with elsewhere.

Much of the work here is concerned with the emotional difficulties of children. It is significant that those who pose the greatest difficulty are children who were admitted after the primary age. It is difficult to absorb these older children. Many of them have severe anti-social tendencies, and one is prompted to consider whether low ability is the main factor in their transfer. The normal pupil-teacher ratio in schools for the maladjusted is 10—1. Here we have most classes containing at least four severely disturbed children. These constitute a heavy demand upon the physical and mental resources of staff.

ACTIVITIES

The normal internal activities were continued during the year including Christmas and Birthday parties, Carol Service and Displays of work. Various visits of particular interest were made to services and factories in Blackburn. Other journeys of an educational and recreational nature were made further afield. All of these, along with more general activities in school are designed to broaden the scope and widen the interest of childrens knowledge.

The first meeting of a Parent-Teacher Association was held in December. This was well attended and augurs well for future developments.

Close liaison with welfare and other local services has continued, often at a personal level, and the assistance given is most encouraging. Great consideration is shown to us by the Education Committee through the Chief Education Officer and his Staff and we are grateful to all concerned.

Personal relationships are so important that great credit is due to all concerned in this school, both teaching and ancillary staff for their intimate sense of involvement for the well being of the children.

**Analysis of Special Schools to which Blackburn Children
have been admitted.**

On 20th January, 1968, 348 children (201 boys and 147 girls) were in special schools as follows :—

	<i>Boys</i>	<i>Girls</i>
BLIND PUPILS		
Wavertree School, Liverpool	3	—
St. Vincent's, Liverpool	1	—
PARTIALLY SIGHTED PUPILS		
Partially Sighted Class, Corporation Park	3	1
Black-a-moor Special School	1	1
DEAF PUPILS		
Mary Hare Grammar School, Newbury	—	1
Royal Cross School for the Deaf, Preston	3	6
PARTIAL HEARING PUPILS		
Thomasson Memorial School, Bolton	2	1
Southport School for Partial Hearing	1	—
Black-a-moor Special School	2	1
DELICATE PUPILS		
St. John's School, Woodford Bridge	1	—
Black-a-Moor Special School	47	54
Linton, Grassington	—	1
EDUCATIONALLY SUBNORMAL PUPILS		
Eden Grove, Appleby	2	—
Crosshill Special School	99	59
Crowthorn, Bolton	2	—
Besford Court, Worcester	1	—
Massey Hall, Warrington	—	1
Pitt House, Devon	1	—
Pontville, Ormskirk	1	—
Jesmond Dene, Newcastle	—	1
Beechwood, Liverpool	—	1
MALADJUSTED		
Pitt House, Devon	2	—
Larches House, Preston	1	—
Eden Grove, Appleby	1	—
Edith Edwards House School, Banstead	1	—
Cotswold Chime, Stroud	1	—
Burnt Norton, Gloucester	1	—
Black-a-moor Special School	3	1
William Henry Smith, Boothroyd	1	—
Wennington Hall, Hornby	1	—
EPILEPTIC PUPILS		
Harrison Home, Maghull	—	1
Black-a-moor Special School	4	1
Colthurst House, Cheshire	1	—
Maghull, Liverpool	—	1
PHYSICALLY HANDICAPPED		
Chailey Heritage, Lewes	1	—
Black-a-moor Special School	11	13
Birtenshaw Hall, Bolton	1	2
Bradstock Lockett, Southport	1	—

SECTION SIX

MISCELLANEOUS

Co-operation

Teachers, parents and School Welfare Officers have fully co-operated in the work of the School Medical department. To them my thanks are expressed.

National Society for the Prevention of Cruelty to Children.

During the year 1967, four cases were reported through the School Health Service, involving the welfare of six children.

All responded to warnings and advice.

Employment of Children and Young Persons.

School Medical Officers examined 257 children for employment during the year.

Three hundred and seven children (196 boys and 111 girls) were newly licensed for employment out of school hours ; no children were licensed to take part in entertainments.

Deaths of School Children.

Pneumonia	..	..	..	1
Accident	..	..	..	1
Respiratory Condition	..	..	..	1
Other	..	..	..	4

Nursery Classes.

There are thirty-three Nursery Classes in the Borough for the accommodation of children between the ages of three and five years. Inspection findings of children in attendance at these classes are incorporated in the appropriate group of Periodic Medical Inspection Tables.

The number of children on the rolls at the end of the year was 937.

School Nurses visit each Nursery Class at frequent regular intervals.

Physical Education.

I am indebted to the Chief Education Officer for the following Report on Physical Education in the Schools :—

At the present time much regard is given to the individuality of each child and it is appreciated that all differ in structure, ability, interest, sensitivity and rate of learning. To develop the physical potentiality in each case is therefore no easy task but one which is tackled by teachers in Blackburn with enthusiasm, interest and understanding. In the Primary Schools, the provision of climbing apparatus and other forms of equipment has been built up year by year until at present most schools are reasonably equipped and children are able to develop their own ingenuity and skill at their own rate, guided and encouraged by the teachers. As yet only about one quarter of the Primary Schools have their own playing fields and a broad and enlightened programme of games cannot be planned or carried out. As always, however, great efforts have been made and many teachers take parties of children to fields, near or far, for game periods. The usual programmes of school matches have taken place.

Most Secondary Schools now have their own fully equipped gymnasium and a school hall and the interest in widening the scope of the physical education programme continues to increase. Progress is still hampered in several schools as playing fields on the spot are not yet ready for play. However, keen teachers ensure that as wide a variety of activities as possible is covered, and devote much "out-of-school" time to coaching or umpiring games, matches and outdoor pursuits.

Swimming instruction has been well attended with the usual enthusiasm and good results. A National Technical Officer from the Amateur Swimming Association visited Blackburn in September and gave an excellent one-day Course on the teaching of swimming. Several teachers from practically every school in Blackburn attended.

School Meals Service.

Meals supplied to children during the year, 1st January to 31st December, 1967.

Primary and Secondary Schools :			
	Free	..	147,527
	Paid	..	1,708,578
			<hr/>
			1,856,105
Special Schools :			
	Free	..	7,835
	Paid	..	41,944
			<hr/>
			49,779
Nursery :			
	Free	..	210
	Paid	..	17,622
			<hr/>
			17,832
Junior Training Centre			
			6,412
			<hr/>
			1,930,128

Average daily number fed during each month in 1967 :

January	12,362	May	11,758	September	9,919
February	12,289	June	11,715	October	9,579
March	12,344	July	11,532	November	10,072
April	12,377	August	Nil.	December	11,252

MINISTRY OF EDUCATION

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS

A. PERIODIC MEDICAL INSPECTIONS

Age Group	Number Inspected	Physical Condition		Requiring Treatment		
		Satisfactory	Unsatisfactory	Vision	Any other Condition	Individual Pupils
1963 and later	659	659	..	14	112	123
1962	1338	1338	..	92	224	279
1961	799	799	..	48	119	159
1960	504	504	..	17	51	61
1959	123	123	..	5	9	14
1958	33	33	..	3	7	10
1957	11	11	..	1	5	4
1956	631	631	..	36	85	109
1955	329	329	..	20	45	56
1954	5	5	..	3	..	3
1953	..	..	..	..	..	..
1952 and earlier	257	257	..	21	13	28
TOTAL ..	4684	4684	..	260	670	846

B. OTHER INSPECTIONS

Number of Special Inspections	..	..	..	..	1645
Number of Re-Inspections	..	..	..	..	808
TOTAL	..	..	..	..	2453

C. INFESTATION WITH VERMIN

(i) Total number of individual examinations in the schools by the school nurses or other authorised persons	26720
(ii) Total number of individual pupils found to be infested ..	708
(iii) Number of individual pupils in respect of whom Cleansing Notices were issued (Section 54(2), Education Act, 1944) ..	Nil.
(iv) Number of individual pupils in respect of whom Cleansing Orders were issued (Section 54(3), Education Act, 1944) ..	Nil.

DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

Table 12.

Defect Code No.	Defect or Disease	Periodic Inspections				Special Inspections	
			Entr'nts	Leavers	Others		Total
4	Skin	T	10	-	3	13	4
		O	2	-	1	3	2
5	Eyes— <i>a.</i> Vision	T	196	20	58	274	108
		O	127	4	40	171	30
		T	19	-	1	20	12
		O	1	-	-	1	-
		T	1	-	2	3	3
6	Ears— <i>a.</i> Hearing	T	95	-	16	111	51
		O	10	-	-	10	4
		T	1	-	1	2	-
		O	-	-	-	-	-
		T	4	-	-	4	5
7	Ears— <i>b.</i> Otitis Media ..	T	1	-	-	1	-
		O	-	-	-	-	-
		T	4	-	-	4	5
		O	1	-	-	1	-
		T	95	1	14	110	46
8	Nose and Throat	T	61	-	3	64	6
		O	22	-	3	25	30
9	Speech	T	24	-	-	24	4
		O	1	-	-	1	-
10	Lymphatic Glands	T	-	-	-	-	-
		O	2	-	3	5	3
11	Heart	T	6	-	-	6	6
		O	8	-	-	8	-
12	Lungs	T	-	1	-	1	-
		O	5	-	1	6	-
13	Development— <i>a.</i> Hernia	T	2	-	-	2	-
		O	35	-	26	61	13
		T	83	2	19	104	5
		O	26	-	12	38	7
		T	4	-	2	6	-
14	Orthopaedic— <i>a.</i> Posture	T	77	1	27	105	12
		O	14	-	4	18	1
		T	-	1	-	1	3
		O	-	-	-	-	1
		T	-	-	1	1	2
15	Nervous System— <i>a.</i> Epilepsy	T	-	-	-	-	-
		O	-	-	-	-	1
		T	-	-	-	-	1
16	Psychological— <i>b.</i> Other	T	-	-	-	-	10
		O	-	-	-	-	6
		T	-	-	1	1	-
17	Psychological— <i>a.</i> Development ..	T	-	-	-	-	-
		O	-	-	-	-	-
		T	1	-	-	1	-
18	Abdomen	T	2	-	-	2	-
		O	111	10	20	141	100
19	Other	T	101	-	5	106	45
		O					

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS

GROUP A—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	No. of cases known to have been dealt with
External and other, excluding errors of refraction and squint	36
Errors of refraction (including squint)	1675
TOTAL	1711
Number of pupils for whom spectacles were prescribed ..	954

GROUP B—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	No. of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	40
(b) for adenoids and chronic tonsillitis	386
(c) for other nose and throat conditions	93
Received other forms of treatment	41
Total	560
Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1967	2
(b) in previous years	25

GROUP C—ORTHOPAEDIC AND POSTURAL DEFECTS

	No. of cases known to have been dealt with
(a) Pupils treated at clinics or out-patient departments	367
(b) Pupils treated at school for postural defects ..	75
Total	442

GROUP D.—DISEASES OF THE SKIN

	No. of cases known to have been dealt with
Ringworm—(i) Scalp	—
(ii) Body	3
Scabies	77
Impetigo	27
Other skin diseases	202
TOTAL	309

GROUP E.—CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	83
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GROUP F.—SPEECH THERAPY

Number of pupils treated by Speech Therapists under arrangements made by the Authority ..	246
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GROUP G.—OTHER TREATMENT GIVEN

(a) Number of miscellaneous minor ailments treated by the Authority	250
(b) Pupils who received convalescent treatment under School Health Service arrangements ..	4
(c) Pupils who received B.C.G.	844
(d) Others—	
1. Orthoptics*	688
2. Sunlight	232
3. Cleansing	405
4. Chiropody	219
5. Audiometry	3111
TOTAL (a—d).. .. .	5753

* In addition 573 Lancashire County Council pupils were dealt with during the year.



