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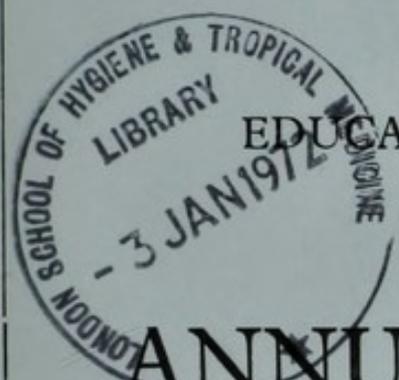
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EDUCATION COMMITTEE

ANNUAL REPORT

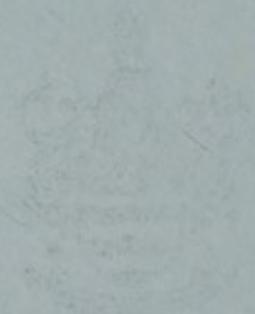
UPON THE
SCHOOL HEALTH SERVICE

FOR THE YEAR 1970

BY

ROBERT MITCHELL
B.Sc., M.B., Ch.B., D.P.H.

PRINCIPAL SCHOOL MEDICAL OFFICER



THE

REPORT

OF

THE

COMMISSION

ON THE

PROVISIONS OF THE

ACT OF 1908 RELATIVE TO THE



County Borough of Burton upon Trent

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Annual Report of the Principal School Medical Officer For the Year 1970

To the Chairman and Members of the Education Committee.

I have the honour to present my Annual Report for the year 1970.

There were no serious outbreaks of infectious disease in school children during the year. There were 122 cases of measles compared with 154 cases in 1969. There was only one case of scarlet fever compared with 29 in 1969, 20 cases of infective jaundice compared with 33 in 1969, and 7 cases of whooping cough compared with 2 in 1969.

The infestation of scabies is still prevalent. 81 cases were treated during the year, compared with 67 in 1969. 150 children were found to be infested with head lice compared with 103 in 1969, and hence the improvement noted last year has not been maintained, despite the constant vigilance of the School Nurses. The current hair fashions of both sexes do not help in the eradication of infestation by head lice.

The scheme for B.C.G. Vaccination against tuberculosis for school children between 11 and 13 years of age has had an excellent response from parents. During the year 753 children were Heaf tested and of these 25 were found to be positive and 634 negative, who received B.C.G. Vaccination.

All attempts to recruit an additional Dental Officer during the year were unsuccessful. We were fortunate in having the part-time assistance of Mrs. M. C. Reade, L.D.S. up to 30th May, 1970, and of Mrs. S. Buckley, L.D.S. from 28th February, 1970. I also have to report that we have been unable to recruit an assistant for Mr. F. Brook, F.C.S.T., our Senior Speech Therapist.

I wish to express my thanks to the Committee for their support during the Year, to the Director of Education and his staff, to the Heads of the Schools for their valuable assistance, to the general practitioners for their co-operation, and to Dr. G. M. Curtois, who has been largely responsible for the preparation of this report.

I am,

Your obedient Servant,

ROBERT MITCHELL,

Principal School Medical Officer.

Staff of the School Health Service

Principal School Medical Officer :

ROBERT MITCHELL, B.Sc., M.B., Ch.B., D.P.H.

School Medical Officers :

G. M. CURTOIS, M.R.C.S., L.R.C.P., D.P.H.

P. K. RAY, M.B.B.S., D.P.H. (Cal.)

Principal Dental Officer :

A. NOEL STANNARD, L.D.S.

Consultant Anaesthetist :

GEORGE QUAYLE, M.R.C.S., L.R.C.P., F.F.A.R.C.S. Eng., D.A.
(Part-time)

Dental Officers (Part-time) :

ROY THOMPSON, L.D.S., B.D.S.

MRS. M. C. READE, L.D.S.
(Resigned 30/5/70)

MRS. S. BUCKLEY, L.D.S.
(Commenced 28/2/70)

Senior Speech Therapist :

F. BROOK, F.C.S.T.

Orthoptist :

MRS. L. GANNON (Part-time)

School Nurses :

MISS O. D. MARKS, S.R.N.

MRS. M. T. POPIKAS, S.R.N., S.C.M.

Dental Auxiliary :

MISS C. DODD

Dental Attendants :

MRS. E. M. ROULSTONE
(Retired 30/11/70)

MRS. E. CLAMP

MISS C. HOWELL

MRS. R. BROWN

Clerks :

MRS. J. BENTLEY

MRS. M. B. M. HAMP (*Part-time*)

MISS E. HARVEY

Cleansing Assistant (Part-time) :

MRS. I. TAYLOR

1. Staff Changes. There were no changes in the Staff to report during the year. This has contributed considerably towards the smooth running and greater efficiency of the School Clinic.

2. Medical Inspections. The School Medical Officers have carried out routine examinations of infants during their first year at school.

In Junior schools, inspections were once again confined to the re-inspection of children with known defects and to such children as were referred with suspected defects by school staff or school nurses to the medical officer.

At the school leaver stage, all children were seen, weighed and measured and had their vision and colour vision tested by the school nurses. As a result of this a number of children were brought forward for a more detailed examination. School staff and parents also requested that a further proportion of them be examined for suspected defects by the School Medical Officers. Parents of all children in this age group are offered an appointment with the School Medical Officer, but only a small number of parents availed themselves of this opportunity. An increasing number of children in this age group are seen each year in connection with continental journeys and other courses of a residential or camping nature arranged by their respective schools.

The school nurses visited each school at least once a term for the purpose of performing either vision testing and/or head inspections. Any defects noted at these visits are reported to the School Medical Officers for appropriate action.

Visits have also been made to schools by the Principal Dental Officer and to a few schools by the Senior Speech Therapist.

An ever-increasing number of children are referred each year to the school medical service by parents, G.P.s., school staff and other interested bodies.

As in previous years a number of children have been referred with psychological problems. We are very fortunate in Burton upon Trent, however, in being able to call upon Mr. Henry, our Educational Psychologist, whose assistance in solving psychological problems has proved most useful.

The attendance of parents at routine medical examinations of school entrants remains on the whole good. At a few schools, however, the attendance leaves much to be desired and, unfortunately, it is usually in the cases where the parents do not attend that there is most need for consultation between doctor and parent. This often necessitates making repeated appointments at the School Clinic and school nurses and welfare officers having to pay repeated visits to the homes.

For many years there has been a shortage of accommodation at the School Clinic but the closing of the Old Technical College next door will mean that additional rooms will be available. This will provide much needed space for the Speech Therapy Department, and it is hoped that a quiet room for audiometry will also be possible. Plans have been made for redecorating and additional heating for these rooms, and it is hoped that they will be available sometime in Spring 1971.

Accommodation in schools remains good, in fact most schools have a special medical room which proves most useful for routine medical examinations, vision testing and head inspections. They are more important than ever now that so much preventive vaccinations are carried out in the school.

I am happy to say that the co-operation between the Schools, Clinic Staff and Head Teachers and their Staff is if possible better than ever and is of much assistance in carrying out the routine Inspections and Immunizations which have become part of every school-child's life.

3. Findings of the Medical Inspection and Treatment of Defects.

(a) **General Condition.** On examination, the children are divided into two categories: "Satisfactory" and "Unsatisfactory", according to their physique, height-weight ratio and present state of health.

The general condition of entrants during 1970 is shown below:

Satisfactory	Unsatisfactory
99.95%	0.05%

On the whole, the standard of nutrition is high and the general condition of the children can be regarded as satisfactory.

With the co-operation of the General Practitioners, Specialist opinion and care has been obtained where considered desirable. Co-operation with the Burton District Hospital Centre has also been well maintained, and copies of reports of all school children seen by the Specialists at the Hospital are received by the School Medical Service. This is a great help to the Medical Officer concerned.

(b) **Nose and Throat Defects.** Medical Inspection revealed 174 defects of the nose and throat, the great majority being either enlargement of tonsils and adenoids or persistent nasal catarrh.

The improvement noted previously has been well maintained by Mr. Hingorani who has carried on Mr. Ghanekar's good work. 131 school children were seen and treated at the Burton District Hospital Centre.

(c) **Ear Defects.** During 1970, 7 children from Burton upon Trent were in special residential schools for deaf or partially hearing children. One girl was in Needwood School for the Partially Hearing, and three boys and three girls were in the Derby Royal School for the deaf. During the year three pupils were equipped with a hearing aid, bringing the number of children in Burton equipped with such apparatus to 22. With hearing aids these children have been able to continue their education at ordinary schools in the Borough. All such children are seen at least once a year by one of the School Medical Officers.

(d) **Defects of Vision.** The special Eye Clinic provided at Burton District Hospital Centre has continued to function well.

Mrs. L. Gannon, Orthoptist seconded now for three sessions a week from the Burton District Hospital Centre has been of great assistance. In addition to her work at the School Clinic she now carries out sessions in the schools. In all she saw 2,043 cases during the year. Out of these she referred 253 to the Consultant Ophthalmologist at the Burton District Hospital Centre for further opinion and treatment where necessary. 3,102 children had their vision tested by the School Nurses in schools and 264 cases were referred to the Ophthalmologist. 139 school children had spectacles prescribed for them during 1970. We have been very fortunate in obtaining a

Keystone Vision Tester which has proved most useful and accurate in testing children's vision, colour vision and helping to confirm the presence of squints.

As previously, the parent of a child found with defective vision is given the option of attending his or her own doctor, or the Eye Clinic for school children held at the Burton District Hospital Centre, or to attend an optician of his or her own choice.

(e) **Orthopaedic Defects.** Children suffering from orthopaedic abnormalities requiring active treatment are referred to the Burton District Hospital Centre, with the assent of the child's own doctor.

Advice is given at the School Clinic for minor defects.

As previously, flat feet and knock knees are the commonest orthopaedic defects found in school children, often associated with obesity.

118 children were found with orthopaedic defects at the school routine examinations.

(f) **Diseases of the Skin.** As usual scabies was the most prevalent skin condition seen at the School Clinic. 81 cases were treated during the year.

The number seen in the previous ten years were :

1969—67.	1968—130.	1967—91.	1966—86.	1965—18.
1964—20.	1963— 0.	1962— 0.	1961— 0.	1960— 0.

The routine treatment consists of a series of three baths followed by the application of Benzyl Benzoate Emulsion which is given to all affected patients. Children of school age are excluded from school until free from infection when a fitness certificate is issued by the School Medical Officers.

It is not always possible to get all the members of an infected family to attend for treatment, but it has been achieved in the majority of cases. This has proved most useful in preventing the children being re-infected at home, often a problem in the past.

Although this is an increase in the number of cases treated in the School Clinic last year the numbers are probably much the same over the past few years as a considerable number are still being treated by their own doctors. In other words the increase this year may well be due to an increase in the referrals to the School Clinic.

Only 3 cases of impetigo were treated at the School Clinic during the year. This was a marked decrease on the number seen in the previous year, and is probably due to more cases being treated by their own doctors.

(g) **Speech Therapy.** There have been no applicants for the vacancy of full or part-time Speech Therapist and Mr. F. Brook, F.C.S.T., has been without assistance during the whole of the year. He reports as follows :

A quick look at the figures for 1970 does not suggest that there has been much change from the previous year. The number of children referred during the year at 94 shows a decrease of 32 on 1969. This is due to the Speech Therapist having insufficient time to visit all the schools in the County Borough once a year. Only seven school visits have been made during 1970 but this excludes many half days spent at Bitham School for the purpose of providing speech therapy on school premises to selected children. Most of the referrals are made by School Medical Officers and Nurses following the Routine Infants Medical Examination of the five year old entrants. Many other speech defects may not be discovered until the child is older and whilst Head Teachers do refer children to the Speech Therapist there are inevitably those which are overlooked. These may be found much later when the Head Teacher asks his staff to make a note of children they think should be seen by the Speech Therapist who is expected to call within the next week. Because he feels that some children are being overlooked the Speech Therapist is making arrangements to visit many more schools during 1971.

Although there is usually a waiting list of children there may be others in urgent need of Speech Therapy who would normally be given precedence immediately their need became known.

F. BROOK, F.C.S.T.,

Senior Speech Therapist.

Number of children treated :	Boys	..	..	..	158
	Girls	..	..	..	62
					<hr/>
					220
					<hr/>
(a)	Stammerers	..	..	..	34
(b)	Defects of articulation	..	..	..	133
(c)	Delayed Language/Speech Development	..			35
(d)	Cleft Palate Speech	..	..	..	8
(e)	Voice disorders	..	..	..	1
(f)	Supra Bulbar Pareisis	..	..	..	1
(g)	Articulatory dyspraxia	..	..	..	5
(h)	Speech defect associated with hearing loss	..			3
					<hr/>
					220
					<hr/>
Discharged :					
	Adjusted	..	..	..	51
	Partly adjusted	..	..	..	11
	Unadjusted (chiefly because of parents' inability to co-operate)	..	..	..	10
	Uneventuated (e.g. chiefly those who made a spontaneous recovery whilst awaiting treatment)				5
	Transferred, e.g., to residential schools and to Educational Psychologist	..	..	..	4
	Advised	..	..	..	10
					<hr/>
					91
					<hr/>
	Total attendances	..	..	..	1,416
	Total on roll receiving treatment at 31st Dec., 1969	..	..	..	139
	No. of children on waiting list at 31st Dec., 1969	..	..	..	36
	No. of children referred during year	..	..	..	94
	No. discharged during year	..	..	..	91
	No. of children on waiting list at 31st Dec., 1970	..	..	..	34
	No. of children receiving treatment at 31st Dec., 1970	..	..	..	144
	No. of school visits made	..	..	..	7
	No. of children seen during school visits	..	..	..	64

(h) **Infestation with Vermin.** The total number of examinations by School Nurses during 1970 was 25,083. 150 persons were found to be infested with vermin and 27 in a generally dirty condition which was a marked increase on the previous year. The number of exclusions increased also from 77 in 1969 to 81 in 1970. The services of the Cleansing Assistant every morning during term time, and occasionally during the holiday periods, has been of great assistance.

Treatment for infested and dirty children is available at the School Clinic. Many children are allowed to continue attending school, provided that they also attend regularly at the School Clinic for any necessary treatment. A child who is heavily infested, who has scabies or impetigo, or is so dirty as to be offensive to others, or does not attend the School Clinic for treatment, is excluded from school until certified fit to resume attendance by the School Medical Officers. During 1970 it was found necessary to issue 2 Cleansing Notices, nil Cleansing Orders.

(i) **Plantar Warts.** The number of children attending the School Clinic for treatment of this painful complaint showed an increase from 144 cases during 1969 to 153 cases during 1970. The routine treatment with Chlorosal proved satisfactory in the majority of cases. The remainder were treated with Salicylate paint, although this method of treatment needed to be fairly prolonged to achieve a satisfactory result.

(j) **Enuresis.** Treatment with the buzzers was still being used in carefully selected cases of enuresis. In all, 47 cases have been investigated by the School Nurses during the year, and of these 42 were found to be suitable for a trial with a buzzer. Of these 20 were cured; 6 improved; 1 failed to respond; and 15 were still under treatment at the end of the year. From the experience gained over the past years with this type of treatment, it would seem that alarm buzzers have a definite part to play in the treatment of this distressing condition. It is important, however, that full co-operation is obtained from both the affected children and their parents, and it is often lack of this essential co-operation which is found to be a most significant factor in the failure of treatment. At the end of the year, 4 children were still awaiting investigation.

Report of the Principal School Dental Officer

Over the year there have been a number of changes in staffing. These are noted elsewhere. Advertisements for full-time Dental Officers published in professional journals and in various newspapers have produced a "nil" return. All improvements in professional staff are in "part time" and as mentioned in previous reports these appointments are usually over a comparatively short period of time. The vital factor of continuity is therefore lost. The full time Dental Officer Equivalent for the County Borough at the year end is 1.5 plus one full time Dental Auxiliary.

School inspections have continued in the year under review and have been confined to the Infant and Primary schools. The Dental Auxiliary has accompanied the inspecting Dental Officer on these inspections for the purpose of giving talks and demonstrations in Dental Health and Hygiene. The Heads and Staff of the schools visited have welcomed this Dental Health Education. These talks are further augmented by personal and individual chats on the same subject when scholars have elected to receive Dental Treatment at the School Clinic.

Continued close association has been maintained with the Hospital Dental Consultant Service who have been helpful with the more sophisticated surgical and orthodontic problems.

All our Prosthetics and Orthodontic appliances continued to be processed by the Dental Technicians attached to Burton District Hospital Centre.

General Anaesthetics continue to be administered by the Consultant Anaesthetist, Deputy Medical Officer of Health and Assistant Medical Officer of Health.

A. N. STANNARD, L.D.S.,

Principal School Dental Officer.

4. Handicapped Pupils. The distribution of Handicapped Pupils in this area is shown in the following table.

Handicap	Attending special School	At ordinary School	At no School	Total not attending special School
Blind	—	—	—	—
Partially Sighted	1	—	—	—
Deaf	6	—	—	—
Partially Hearing	1	—	—	—
Delicate	3	7	—	7
Educationally Sub-normal	134	107	2	109
Epileptic	1	12	—	12
Physically Handicapped	7	29	2	31
Maladjusted	5	—	—	—
Speech Defect	—	220	—	220
	158	375	4	379

Ascertainment of Educationally Sub-normal Children was continued throughout the year. 45 children were assessed during 1970 with the following results :—

Children examined under Section 57 (5)	—
Children examined under Section 57 (3)	8
Children examined and found E.S.N. :—	
(formally ascertained)	8
(informally ascertained)	16
E.S.N. Children re-examined	9
Children examined and found maladjusted	3
S.S.N. re-examined and found E.S.N.	1

Bitham School for E.S.N. children has proved most successful and has shown that there is a real need for a larger school to cope with all the children in Burton upon Trent who are in need of special educational treatment.

Child Guidance Clinic. The Child Guidance Clinic at Lichfield has again proved most useful. In all 30 cases from Burton upon Trent have been seen by Dr. Baker.

5. Infectious Diseases. A revised schedule for vaccination and immunization of school children has been introduced. Children are now offered Diphtheria/Tetanus antigen together with oral polio vaccine as reinforcing doses at school entry.

B.C.G. vaccination is now offered to children between 11 and 13 years of age. Finally children are offered a reinforcing dose of oral polio vaccine and tetanus toxoid on leaving school.

The number of children immunised by the School Health Service during 1970 was as follows :

(1)	Number of children who received a full course of Diphtheria/Tetanus antigen	114
(2)	Number of children who received a reinforcing or booster dose of Diphtheria/Tetanus antigen ..	664
(3)	Number of children who received a full course of Diphtheria antigen	4
(4)	Number of children who received a reinforcing or booster dose of Diphtheria antigen	32
(5)	Number of children who received a reinforcing or booster dose of Polio/Tetanus antigen	428
(6)	Number of children who received a reinforcing or booster dose of Polio antigen	384
(7)	Number of children who received a full course of tetanus antigen	—
(8)	Number of children who received a reinforcing or booster dose of tetanus antigen	6
(9)	Number of children receiving Measles immunisation	3

The number of cases of Infectious and other Notifiable Diseases occurring in School children during 1970 was as follows :—

<i>Disease</i>	<i>Number notified</i>	<i>Admitted to Hospital</i>
Measles	122	—
Scarlet Fever	1	—
Infective Jaundice	20	—
Meningococcal Meningitis	1	1
Whooping Cough	7	—
Respiratory Tuberculosis	1	—

6. B.C.G. Vaccination.

Contact Scheme. Dr. M. B. Paul, the Chest Physician, carried out Heaf Skin testing of child contacts of cases of Tuberculosis. He gave B.C.G. Vaccination to those with negative skin reactions. 13 were successfully vaccinated under this scheme in 1970.

School Children Scheme. The scheme commenced in 1963 with certain modifications has continued to work satisfactorily. All children of 11 years and over attending schools in Burton upon Trent were offered B.C.G. Vaccination. An excellent response was received from the parents, the vast majority of whom were very pleased to have their children vaccinated. Largely due to the excellent co-operation received from school staffs, and from the children themselves, no difficulty was experienced either in the preliminary skin test or the vaccination, and it is pleasing to note that no severe reactions were reported during the year under review. 753 children were given the Heaf Skin Test. As a result 25 children were found to have a positive reaction and 634 received B.C.G. vaccination.

7. Deaths of Children of School Age.

Six School children died in 1970 :—

- | | | | | | |
|-----|---------------------|----|----|-----|---|
| (1) | Girl, aged 10 years | .. | I | (a) | Metastatic carcinoma. |
| | | | | (b) | Wilms Tumour. |
| (2) | Boy, aged 11 years | .. | I | (a) | Reticulosis. |
| | | | | | (a typical Hodgkins type). |
| (3) | Girl, aged 6 years | .. | I | (a) | Meningococcal Meningitis. |
| | | | | (b) | Meningococcal Septicaemia. |
| (4) | Boy, aged 6 years | .. | I | (a) | Fractured Skull. |
| | | | | (b) | A collision with a motor van while crossing the road on foot. Accidental Death. |
| (5) | Boy, aged 12 years | .. | I | (a) | Bronchopneumonia. |
| | | | II | | Weak respiratory muscles from Muscular Dystrophy. |
| (6) | Boy, aged 8 years | .. | I | (a) | Shock. |
| | | | | (b) | Due to extensive superficial burns. |
| | | | | (c) | Due to explosion of inflammable material placed on a bonfire. Misadventure. |

8. Minor Ailments.

The Authority maintains the School Clinic which is situated in a specially-adapted building at No. 32 Union Street. This building is used for School Medical purposes, and it also contains the Speech Therapy Clinic. Minor Ailments Clinics with a School Medical Officer in attendance are held daily, between 9 and 10 a.m., including those periods when schools are closed for holidays.

All Medical Records of School Children are kept at the School Clinic, and these are frequently referred to by Medical Officers when making special medical examination of children.

During 1970, there were 1,859 attendances at the Clinic for treatment of minor ailments, excluding attendances for disinfestation.

9. Employment of School Children.

The following table shows the number of children examined and passed fit for employment.

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Newspaper Delivery	71	9	80
Shop Assistants	10	24	34
Errand Boys	4	—	4
Clerical	—	2	2
	—	—	—
	85	35	120
	=====	=====	=====

10. School Meals Service and Free Milk Scheme.

The number of meals served was as follows :—

Children	787,411
Staff and Helpers	87,333
Students	—

Total	874,744
	=====

6,396 children were supplied with milk during the year.

**D.—CLASSIFICATION OF THE PHYSICAL CONDITION
OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED
IN TABLE 1 A**

Age Groups Inspected (by years of birth)	Number of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No. (3)	% of Col. (2) (4)	No. (5)	% of Col. (2) (6)
(1)	(2)	(3)	(4)	(5)	(6)
1966 and later	38	38	100	—	—
1965	778	778	100	—	—
1964	250	249	99.6	1	0.4
1963	19	19	100	—	—
1962	5	5	100	—	—
1961	—	—	—	—	—
1960	1	1	100	—	—
1959	—	—	—	—	—
1958	—	—	—	—	—
1957	—	—	—	—	—
1956	—	—	—	—	—
1955 and earlier	861	861	100	—	—
TOTAL	1952	1951	99.95	1	0.05

Table II

Infestation with Vermin

(i)	Total number of individual examinations of pupils in Schools, by the School Nurses or other authorised persons ..	25,083
(ii)	Total number of individual pupils found to be infested ..	150
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	2
(iv)	Number of individual pupils in respect of whom Cleansing Orders were issued (Section 54 (3) Education Act, 1944)	—

Table III
Defects found by Medical Inspection
A.—PERIODIC INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	Periodic Inspections					
		Entrants (3)	Leavers (4)	Others (5)	Total (6)		
4	Skin	T	5	4	—	9	
		O	37	43	—	80	
5	Eyes—						
		(a) Vision ..	T	2	3	—	5
			O	27	123	3	153
		(b) Squint ..	T	3	—	—	3
			O	59	6	1	66
6	Ears—						
		(c) Other ..	T	3	—	—	3
			O	10	22	1	33
		(a) Hearing ..	T	—	1	—	1
			O	26	4	—	30
7	Nose and Throat	T	—	2	—	2	
		O	13	5	—	18	
		T	—	—	—	—	
8	Speech	O	22	3	—	25	
		T	5	4	—	9	
9	Lymphatic Glands	O	134	25	6	165	
		T	10	—	—	10	
10	Heart	O	120	8	1	129	
		T	—	—	—	—	
11	Lungs	O	25	4	1	30	
		T	1	—	—	1	
12	Developmental—	O	2	1	—	3	
		T	3	—	—	3	
13	Orthopaedic—	O	27	11	—	38	
		T	—	—	—	—	
14	Nervous System—	(a) Hernia ..	T	—	—	—	
			O	3	—	—	3
		(b) Other ..	T	2	—	—	2
			O	80	9	2	91
		(a) Posture ..	T	—	—	—	—
15	Psychological—		O	11	4	—	15
		(b) Feet ..	T	1	—	—	1
			O	45	8	1	54
		(c) Other ..	T	—	1	—	1
			O	33	14	—	47
16	Abdomen ..	T	1	—	—	1	
		O	3	—	—	3	
		T	—	—	—	—	
17	Other	O	48	4	—	52	
		T	—	—	—	—	
		O	9	1	—	10	
18	Psychological—	T	1	—	—	1	
		O	29	8	2	39	
19	Abdomen ..	T	5	—	—	5	
		O	5	—	—	5	
20	Other	T	5	—	—	5	
		O	17	—	—	17	

Table III (continued)

B.—SPECIAL INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Requiring Treatment (3)	Requiring Observation (4)
4	Skin	-	9
5	Eyes—(a) Vision	-	28
	(b) Squint	-	2
	(c) Other	-	1
6	Ears—(a) Hearing	-	12
	(b) Otitis Media	-	-
	(c) Other	-	-
7	Nose and Throat	1	6
8	Speech	1	36
9	Lymphatic Glands	-	-
10	Heart	-	2
11	Lungs	-	3
12	Developmental—(a) Hernia	-	-
	(b) Other	-	5
13	Orthopaedic—(a) Posture	-	3
	(b) Feet	-	2
	(c) Other	-	7
14	Nervous System—(a) Epilepsy	-	-
	(b) Other	-	5
15	Psychological—(a) Development	-	8
	(b) Stability	-	7
16	Abdomen	-	4
17	Other	-	1

Table IV

Treatment Table

Group 1.—Eye Diseases, Defective Vision and Squint

	Number of cases known to have been dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	—	10
Errors of refraction (including squint)	264	32
TOTAL	264	42
Number of pupils for whom spectacles were prescribed	126	13

Group 2.—Diseases and Defects of Ear, Nose and Throat

	Number of cases known to have been dealt with	
	By the Authority	Otherwise
Received operative treatment—		
(a) for diseases of the ear	—	11
(b) for adenoids and chronic tonsillitis	—	70
(c) for other nose and throat conditions	—	20
Received other forms of treatment	9	61
TOTAL	9	162
Total number of pupils in schools who are known to have been provided with hearing aids—		
(a) in 1970	—	3
(b) in previous years	—	19

Group 3.—Orthopaedic and Postural Defects

	By the Authority	Otherwise
Number of pupils known to have been treated at clinics or out-patients departments	—	372

Group 4.—Diseases of the Skin (excluding uncleanliness)

	Number of cases treated or under treatment during the year by the Authority
Ringworm—(i) Scalp	—
(ii) Body	—
Scabies	81
Impetigo	3
Other skin diseases	41
TOTAL	125

Group 5.—Child Guidance Treatment

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	30
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Group 6.—Speech Therapy

Number of pupils treated by Speech Therapists under arrangements made by the Authority	220
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Group 7.—Other Treatments Given

(a) Number of cases of miscellaneous minor ailments treated by the Authority	218
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	634
(d) Other than (a), (b) and (c) above	—
Total number of attendances at Authority's Minor Ailments Clinics	1,859
Total number of attendances including uncleanliness	3,706

Table V
Dental Inspection and Treatment

Inspections	No. of pupils	
	Inspected	Requiring treatment
(a) First inspection School	4,556	} 2,765
(b) First inspection—Clinic	341	
(c) Re-inspection—School or Clinic	310	159
Totals	5,207	2,924
		Offered treatment
		} 2,765
		—
		2,765

Visits : (for treatment only)

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First visit in the calendar year	1,164	748	99	2,011
Subsequent Visits	2,724	1,980	304	5,008
Total Visits	3,888	2,728	403	7,019

Courses of Treatment

Additional courses commenced	38	48	7	93
Total courses commenced	1,202	796	106	2,104
Courses completed	×	×	×	1,016

Treatment

Fillings in permanent teeth	1,398	1,610	299	3,307
Fillings in deciduous teeth	1,777	249	×	2,026
Permanent teeth filled	1,118	1,386	273	2,777
Deciduous teeth filled	1,609	229	×	1,838
Permanent teeth extracted	63	245	41	349
Deciduous teeth extracted	1,028	323	×	1,351
General anaesthetics	422	172	13	607
Emergencies	142	87	16	245
Number of Pupils X-Rayed				62
Prophylaxis				1,069
Teeth otherwise conserved				58
Teeth root filled				4
Inlays				2
Crowns				2

Orthodontics :

New cases commenced during year				26
Cases completed during year				13
Cases discontinued during year				4
No. of removable appliances fitted				42
No. of fixed appliances fitted				—
Pupils referred to Hospital Consultant				16

Dentures

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
Number of pupils fitted with dentures for the first time :				
(a) with full denture	—	—	—	—
(b) with other dentures	—	9	2	11
Total	—	9	2	11
Number of dentures supplied (first or subsequent time) ..	—	13	2	15

Anaesthetics

General Anaesthetics administered by Dental Officers —

DENTAL AUXILIARIES**Details of work carried out by Dental Auxiliaries and included in main Form****Visits (for treatment only)**

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First visit in the calendar year ..	377	142	6	525
Subsequent visit	1,592	492	23	2,107
Total visits	1,969	634	29	2,632

Courses of Treatment :

Additional courses commenced ..	25	15	1	41
Total courses commenced	402	507	7	916
Courses completed	×	×	×	429

Treatment :

Fillings in permanent teeth	888	508	28	1,424
Fillings in deciduous teeth	989	114	×	1,103
Permanent teeth filled	692	416	23	1,131
Deciduous teeth filled	967	102	×	1,069
Deciduous teeth extracted	234	79	×	313
Prophylaxis	×	×	×	485

Dental Hygienists

Details of work carried out by Dental Hygienists and included in main Form

Visits (for treatment only)

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First visit in the calendar year ..	—	—	—	—
Subsequent visit	—	—	—	—
Total visits	—	—	—	—

Courses of Treatment :

Additional courses commenced ..	—	—	—	—
Total courses commenced	—	—	—	—
Courses completed	—	—	—	—

Treatment :

Prophylaxis	—	—	—	—
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