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## COUNTY BOROUGH OF BURY

**EDUCATION COMMITTEE** 

# ANNUAL REPORT

ON THE WORK OF THE

### SCHOOL HEALTH SERVICE

FOR THE YEAR

1963



K. K. WOOD, M.B., M.R.C.S., D.P.H.

Principal School Medical Officer

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### Members of Education Committee.

The Mayor (Councillor Mrs. DORA BUTLER, J.P.)

Alderman SHAW, M.A., J.P. (Chairman),

Alderman MANNERS (Deputy Chairman),

Alderman LORD,

", SPENCER, J.P.

Councillor ADCOCK, M.B.E.,

- ,, BROWN,
- " DAVIES,
- ,, DERBYSHIRE,
- ,, HOULGRAVE
- ., KERSHAW
- ,, J. KIRKMAN,
- " W. KIRKMAN,
- " KNOWLES,
- ., F. LORD,
- " McEWEN,
- " PATERSON,
- " SKELLERN,
- ,, SPURR,
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Prof. D. P. COSTELLO,

Mr. E. THOMASON,

Mr. T. WILLIAMS, B.Sc.,

Mrs. M. PARKER,

Mrs. H. B. WEBB, B.A., J.P.

### Staff.

Principal School Medical Officer:-K. K. Wood, M.B., M.R.C.S., D.P.H

Deputy P.S.M.O.:—
G. A. Levell, M.R.C.S., D.P.H.

School Medical Officers:-

E. W. M. Shaw, M.R.C.S. \*A. J. Maclean, L.R.C.P.I.

S. B. Diggle, M.B., M.R.C.S. (from 18.2.63.) \*T. K. J. Leese, M.B. (from 8.1.63.)

Ophthalmic Surgeon:—

\*J. McLenachan, M.B., D.O.M.S.

Orthopædic Surgeon:—
\*A. P. Gracie, F.R.C.S. (Ed.), M.B.

Ear, Nose and Throat Surgeon:—
\*A. I. Goodman, M.D., F.R.C.S.(Ed.)

Psychiatrist:—

\*L. Grimshaw, D.F.C., M.D., D.P.M.

Paediatrician:—
\*B. Wolman, M.D., M.R.C.P., D.C.H.

Principal School Dental Officer:-R. B. Keighley, L.D.S.

School Dental Officer:-

Physiotherapist:—
\*Mrs. J. M. Fishwick.

Speech Therapist:-

Orthoptist:\*Mrs. K. M. Rogerson.

\*Mrs. J. Shepherd, B.A. (Cantab.)

Chiropodist:— \*H. Cocker

Superintendent School Nurse:-

Deputy Superintendent School Nurse:

Mrs. B. Dunleavy

School Nurses:—
Mrs. W. Stansfield
Mrs. R. Bullock
Mrs. J. C. Brandon

Nursing Assistant:— Miss M. E. McGuinness.

Senior School Medical Clerk:

Miss N. Hargreaves,

School Medical Clerks:-

Miss J. Porter Mrs. F. Bleackley (from 8.4.63).

Dental Attendant:—

Miss B. Bretherton (to 25.7.63).

Mrs. A. J. Bardsley (from 25.9.63)

\* Part Time.

### ANNUAL REPORT FOR 1963

To the Chairman and Members of the Education Committee,

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you the Annual Report on the work done in the School Health Service.

This year the medical staff has been increased so that we have been able to give more attention to following up cases. The number of special inspections has increased from 2,433 last year to 5,326 this year and the re-inspections from 1,231 to 3,576. As a result of this there have been increased attendances in the various treatment sections.

The general physical, nutritional and cleanliness standards are high and there has been no unusual incidence of disease. The level of infectious disease was high compared with last year. There were 953 cases of measles; other infectious diseases were few in number.

The development of the Mental Health Service continues. The work done here is linked up with the Local Authority Health Department and the Hospital Services. When reading the relevant part of this report it should be read as a continuation and extension of the reports in this Section of the previous reports since 1958. We are anxious to give more help to teachers in the assessment and treatment of difficult cases and are finding that more and more queries are referred to us by teachers. A great deal of time is spent in investigating and making reports upon cases which have been referred by the Children's Courts. This has been very time consuming. Our main efforts must be made at a time previous to the child getting into Court. An outstanding fact appears to be the large number of children who have never been referred for any behaviour problem until some quite serious occurrence has taken place and the cases referred to us by the Magistrates.

The Chiropody Service can now cope with any demands made for the treatment of school children. A chiropodist is available each morning to see children referred from the Minor Ailment Clinic, There has been an increase in the work done at The Wylde Clinic by the Physiotherapist. Many more minor orthopaedic cases are now referred to her either from the Hospital or General Medical Practitioners and they are dealt with.

Good work continues to be done at the Orthoptic Clinic at Huntley Mount Clinic. As well as our own cases we do orthoptic work for the Hospital Service.

Audiometry and the other special services have continued with the exception of speech therapy. There has been a vacancy for a whole time Speech Therapist during the whole of the year. There has also been a vacancy for a whole time Dental Surgeon.

Plans have been drawn up and a site chosen for a combined clinic in the Sunnybank district. When this is built a much needed want will be provided in this area. It is hoped that School Health Services will be available there.

We continue to receive much help from the children's private doctors who attend the children in their homes and also from the hospital staffs. There is close liaison with the hospitals and we have received much assistance which has been of great benefit to the children.

I would like to thank the Staff for their hard work which has made it possible to present such a satisfactory report. This is fully appreciated by me.

To the Chairman and Members of the Committee I would again like to express my thanks for their encouragement of the work during the year.

I am,

Your obedient Servant,

Principal School Medical Officer.

K. K. Wood.

18th March, 1964.

#### STATISTICS.

Area of Bury	in acre	s						7,434
Population (R.	G. Est	imate	for 196	2)				60,270
Number of end of 1963:—		n on r	egisters	s of	mainta	ined	schools	at the
Infants							1,995	
Juniors							3,203	
Seniors							3,326	
							8,524	

The number of children attending Direct Grant Schools is 2,079.

#### SCHOOLS IN THE BOROUGH.

Primary Schools or Departments:	
County	9
Controlled	9
Aided	11
Secondary Schools:	
County	5
Aided	1
Special Agreement	1
Nursery School	1
Special School (E.S.N.)	1

In addition there are three Direct Grant Grammar Schools, Bury Grammar School for Boys, Bury Grammar School for Girls, and the Convent High School for Girls, for which the Bury Education Committee provide school health services.

#### SCHOOL BUILDINGS.

Internal decoration was undertaken at the following schools:

#### Primary.

Brandlesholme County Primary.

East Ward County Junior.

St. Thomas's C.E. Junior and Infant Schools.

Unsworth C.E.

Pavilion at Hoyle Playing Fields.

#### Secondary.

The Derby (part).

East Ward Secondary Modern-prefabricated classrooms and gymnasium.

External painting was undertaken at the following schools:

#### Primary.

Brandlesholme County Primary.

St. John's C.E. Junior and Infants.

St. Mark's C.E. Junior and Infants.

St. Peter's C.E.

Unsworth, Hollins C.E.

Pavilion at Hoyle Playing Fields.

#### Secondary.

The Derby.

Church Central C.E.—prefabricated classrooms.

Wellington Secondary Modern.

On September 30th, the St. Joseph's R.C. Schools moved into new school buildings.

#### MEDICAL INSPECTIONS

The following are the arrangements which are at present being carried out.

- Routine medical inspections are carried out in the case of all Entrants and Leavers.
- 2. All cases requiring reinspection are noted on the card and the period within which the case is to be reinspected is noted on the card. In practice little coloured metal tags are attached to the top of the card so that the records can be readily removed from the file when required. The periods for reinspection are in thirds of a year (i.e. 4, 8 or 12 months). These periods fit in with the terms of the school.

The above system is used for defects found both at routine and special inspections.

At each visit to schools by a school medical officer the appropriate bunch of tagged cards is taken along. These cases are seen at the end of a routine medical inspection or at other visits specially made.

- 3. Periodically (at least once a term) the school nurse visits the schools and she
  - (i) carries out a vision test with test type cards, and
  - (ii) sees any cases referred by the teacher and makes appropriate arrangements for the child to be seen by a school medical officer if necessary. If the number is small these can be seen at the daily School Medical Officer's Inspection Clinic at the Central Clinic, or the child referred to his own General Medical Practitioner, and this is followed up later to ascertain as to whether the child was attended by his own doctor.

During visits to school by the School Medical Officer and nurse a discussion is always held with the head teacher at the end of each session. Any cases referred by the head teacher are seen or special arrangements made.

The Junior Schools are all within the same curtilage or in close proximity to an Infant School so that these are visited for rapid surveys and examination of referred cases on the same occasions as the routine visits are made to the Infant departments.

The school nurse visits each term the Junior School for spot checks and arranges for medical examination of cases referred.

Questionnaires are used to send out to parents before all routine examinations and these are to be modified for completion of all children attending at Junior Schools.

In addition separate visits are made by a special school nurse (a S.E.A.N.) for cleanliness surveys. She would also make arrangements for any case that was brought before her.

It will be seen that there is ample and frequent contact between the school and the School Health Department.

The degree of efficiency obtained is helped in those schools where there is a keen and observant teacher to assist in bringing forward cases.

The number of entrants examined was 925. The number of school leavers examined was 574. This decrease from last year's figure is due to the fact that there are now no leavers at Christmas; these children will be examined before Easter next year. In addition 169 children in other groups were examined, giving a total of 1,668.

There were 600 other periodic inspections made, these were at the Bury Grammar Schools (472) and the Convent Grammar School (128).

In addition School Medical Officers made 5,326 special inspections and reinspections, carried out either at the schools or at the clinics. All these examinations were carried out by the Authority's whole-time staff.

## REVIEW OF THE MAIN FACTS DISCLOSED BY MEDICAL INSPECTION.

Table A at the end of the report gives details of the defects found which required either treatment or observation.

**Nutrition.**—The nutritional state of the child is estimated in general inspection and examination of the child. The general level remains high and none of the children examined have shown any crude physical signs of nutritional defect. Any nutritional deficiences are liable to be due to wrong balance of diet rather than deficiency.

**Skin conditions.**—There continues to be a large number of defects found. At routine 40 were found to require treatment and 83 observation and during Special inspection 341 required treatment.

Ear, Nose and Throat.—Most of these are observation cases, associated with enlarged tonsils. Ear infections require to be specially treated or watched, as this condition may lead to deafness in later life. During recent years there has been a sharp decrease in the frequency of ear infections attending the Clinic.

**Orthopaedic conditions.**—The majority of the cases were to do with minor foot conditions. The provision of a Chiropody Service at the Clinic is of great service.

Psychological.—Much more attention is now given to the psychological changes associated with growing up. Parents, teachers and even the children themselves appreciate and ask for guidance in these matters. These services continue to develop rapidly and more trained staff is gradually becoming available.

One of the functional conditions which is brought before the School Medical Officer is Nocturnal Enuresis. The majority of these cases manifest no obvious physical cause, and they are basically psychological problems. Some cases may be aided by relaxation exercises such as those used for speech therapy; others have responded to treatment with a nocturnal enuresis alarm apparatus. Three outfits have been purchased by the Health Department Loans Section and are loaned free to suitable cases. The results have been satisfactory.

#### UNCLEANLINESS.

On the average each school was visited on 9 occasions by the School Nurses for the purpose of cleanliness inspections. The number of examinations of children for this purpose was 14,481. As a result of these inspections 7.1% of the children were found to be infested, either with nits or lice. It is only by constant head inspections that the persistent source of reinfestation can be dealt with, and this nuisance kept under control.

There are baths and cleansing facilities at the Huntley Mount Clinic to assist in bad cases and also for the treatment of Scabies. The sale of special metal combs for nit treatment has been continued.

#### FOLLOWING UP.

Medical Inspection loses much of its value if those children found to be suffering from some defect are not "followed up" in order to ensure that the necessary treatment advised has been obtained either from the child's own medical practitioner, the Hospital service, or from the services provided by the Local Authority.

If the child is not accompanied by the parent, a note is sent drawing their attention to the defect, and suggesting that treatment be obtained either from their private doctor or clinic services. This is followed up either by a visit to the child at school by the Nurse, or by home visits to the parent. Arrangements are made for re-inspection of children with defects to be made by the School Medical Officers. The appointment of an additional Medical Officer, to commence duties in 1963 will assist in more adequate following up and detection of defects and also help to raise the immunisation acceptance rate.

These reinspections have been carried out both at the School clinics and also at the Schools. Last year the figure was 1,231, whilst this year it was 3,576. Only by constant and close following up can one be sure that the defects discovered are adequately dealt with. In the majority of cases little difficulty has been experienced in obtaining treatment for the children.

We now try to reinspect at Schools all defects previously found or to inspect any special case referred to the Medical Officer.

#### WORK OF SCHOOL NURSES.

During the year the School Nurses have carried out the following visits.

Home Visiting by Nurses:-	
Homes of Ophthalmic Cases	17
" Minor Ailments	12
,, Infectious Disease	11
" re Cleanliness	139
Other visits	103
Total	282
Visits to Schools with Medical Officers	220
Other visits to Schools by Nurses-	
(a) For cleanliness	286
(b) Other visits	
Children examined re cleanliness	14,481
Number of above unclean	1,030

## ARRANCEMENTS FOR TREATMENT OF SCHOOL CHILDREN.

NAME OF CLINIC.	WHERE HELD.	TIME.
Minor Ailments.	The Wylde Clinic.	Daily—9 a.m. to 10 a.m.
Minor Ailments.	Huntley Mount Clinic.	Daily—9 a.m. to 10 a.m. (during Term)
Medical Officer's Inspection Clinic.	The Wylde Clinic.	Daily—9 a.m. to 10 a.m.
Scabies Clinic.	The Wylde Clinic	As required.
Orthopædic Clinic (Exercises).	The Wylde Clinic.	Tuesday—9 a.m. to 12-30 p.m. Friday—1-30 to 5 p.m.
Orthopædic Clinic (with Lancs. C.C.)	The Uplands, Whitefield.	Orthopædic Surgeon attends 2nd Friday each month at 10-30 a.m.
Ultra Violet Light Clinic.	The Wylde Clinic.	Tuesday—9-30 a.m.
Diphtheria, Poliomy- elitis & Vaccination Clinic.	The Wylde Clinic.	As required.
Ophthalmic Clinic.	The Wylde Clinic.	Tuesday—9-30 a.m.
Dental Clinic.	The Wylde Clinic.	By appointment.
Ear, Nose, and Throat.	The Wylde Clinic.	2nd and 4th Fridays. 2 p.m.
Audiometric Clinic	The Wylde Clinic	By Appointment
Orthoptic	Huntley Mount Clinic.	Tuesday—9 a.m.to 12 noon 2 p.m. to 4 p.m.
Speech Therapy	(Vacant)	
Psychologist	The Wylde Clinic	Thursday Mornings and Afternoons, By Appointment
Psychiatrist	The Wylde Clinic	Alternate Thursdays By Appointment
Chiropodist	The Wylde Clinic	By Appointment MonThurs.—9 a.m. to 10 a.m.
	Huntley Mount Clinic	By appointment. Friday—9 a.m. to 10 a.m.

#### MINOR AILMENTS CLINICS.

		The Wylde	Huntley Mount
No. of Children attending from 1962		23	_
" discharged during 1963	****	650	48
" still attending at end of 1963		18	_
" fresh children who attended during 1963	****	645	48
" attendances		1,870	122
Clinic open		289 days	203 days
Average attendance per child		2.8	2.6
Average daily attendance	****	6.5	0.5

Altogether 464 parents were seen at the Clinics during the course of the year.

#### CASES ATTENDING CLINICS.

The nature of the cases treated at both Minor Ailments Clinics are given below :—

Ringworm,	Sca	dp	4.000			 	 				_
Ringworm,	Во	dy				 	 		****		_
Scabies		****				 	 				20
Impetigo					****	 	 				52
Other skin	dise	eases				 	 	20.00			269
Minor Eye vision an								-		tive	41
Minor Ear			,								64
		cts		****	****		 0.110	****			
Miscellaneo	us	****		0.000		 	 				97

#### COMMUNICABLE DISEASES

This has been a "measles" year. There were 953 cases of measles, 26 of whooping cough, 3 of Sonne dysentery and 16 cases of Scarlet Fever notified in children of school age. Of the more serious diseases, no cases of poliomyelitis, meningitis or tuberculosis were notified. There were no cases of diphtheria.

We have pressed forward with our campaign for immunisation against certain diseases; the details of the amount done is given in the next paragraph. Full facilities are available and parents are urged to use these provisions and so help to raise the percentage of children protected in the town.

#### B.C.C. VACCINATION. (Against Tuberculosis).

#### School Children's Scheme (under 14 years of age).

1.	Number	skin tested	 	,,	 551
2.	Number	found positive	 		 82
3.	Number	found negative	 		 449
4.	Number	vaccinated	 		 447

Arrangements are made to vaccinate school children of 13 years of age against tuberculosis thus giving them a certain degree of protection during early adult life, where experience has shown the disease is most likey to occur. The procedure is carried out either at School or the Clinic, and involves a single skin test in the forearm, which causes no upset, and by which the Doctor can tell if the child requires vaccination. The B.C.G. vaccination is done on the upper part of the arm, just like smallpox vaccination, although the reaction is slower and the resulting scar normally much smaller.

Consent forms have been circulated to all the parents of children of the appropriate age for them to indicate whether or not they wish their children to be protected.

The figures above give the number immunised. All for whom we received parental consent were completed by the end of the year.

#### DIPHTHERIA IMMUNISATION

	CHILDREN BORN IN YEARS:							
	1963	1962	1961	1960	1959	1954- 1958	1949- 1953	Тота
A. Number of children who completed a full course of Primary Immunisation in the Authority's area (including temporary residents) during the 12 menths ended 31st December, 1963	383	388	33	7	3	28	0	842
B. Number of children who received a secondary (reinforcing) injection (i.e. subsequently to primary im- munisation at an earlier age) during the 12 months ended 31st December, 1963	_	1	4	1	16	322	3	347

#### POLIOMYELITIS VACCINATION

The number of children and Young persons born in years 1943-1963 at 31.12.63

Who had been vaccinated with two injections or doses was 12,388 Who had been vaccinated with three injections or doses was

11,826

Who had been vaccinated with four injections or doses was 4,506
Who had been vaccinated with five injections or doses was 2

#### SCABIES.

During the year 20 cases of Scabies were discovered and treated at the Clinic.

#### RINGWORM.

The Education Committee has an arrangement with the Manchester Skin Hospital for the X-Ray treatment of Ringworm, No cases were sent this year.

#### HEART CONDITIONS.

On the defects register at the School Clinic there are records of 199 children who have been discovered to be suffering from some lesion of the heart.

Congenita	l Heart	Vaivular of the		Other Conditions.		
Requiring observation	Requiring treatment	Requiring observation	Requiring treatment	Requiring observation	Requiring treatment	
19	5	12	1	162		

Assistance is available in dealing with many of these cases from the Hospital Service, where electrocardiograms and specialist advice is available. The closest co-operation has been sought in these cases, also with the child's own doctor.

Advice is given to Schools as to whether there should be any limitation of activities.

#### DIABETES.

There are no children who require special residential care.

There are 2 children on Diabetic register at Bury General Hospital.

#### X-RAY EXAMINATIONS.

X-ray examinations of School Children referred from the Clinic are made at the Bury General Hospital.

Most of these have been suspected fractures which have come to the Minor Ailment Clinics. Chest X-Rays have been taken at the Chest Clinic which is now at Bury General Hospital.

#### ORTHOPAEDIC CLINIC.

Bury County Borough participates in the Lancashire County Council Orthopaedic scheme. The clinic sessions are held at the Whitefield Clinic on Fridays. Nine children made 22 attendances.

In addition to the above Bury School children attend the Orthopaedic department at the Bury General Hospital. This place is frequently more convenient for the children to attend and very satisfactory service has been obtained for any cases referred by the School Health Service.

There is, at the Wylde Clinic, a Physiotherapist who provides physiotherapy and ultra-violet ray therapy. This centre is frequently used by the Consultant for follow-up treatment of school children who have attended the Orthopaedic Clinic at Bury General Hospital.

The work done by the Physiotherapist at the Wylde Clinic was as follows:—

Number of cases attending for physiotherapy	115
,, electrical treatments	20
", " treatments given	798
Average number of attendances per child	7
No. of cases attending for U.V.L	13
No. of treatments given	221
Average attendance per child	17

These figures are a considerable increase on last year's figures.

When a child first attends for treatment the parent is requested to accompany the child. In this way the parent may be instructed as to what treatment is necessary, and can, if advisable help the child with exercises at home.

No new cases have been submitted to this Clinic during the year. In view of this fact and also that there are adequate facilities nearer either at the Bury General Hospital or the Wylde Clinic, it is doubtful if any useful function is being served by continuing to participate in the Lancashire County Council Orthopaedic Scheme.

#### EYE DEFECTS.

The commonest condition dealt with is defective vision due to errors of refraction. At every routine medical inspection the School Nurse carries out a test of vision with test types. In addition the School Nurse visits the Schools for testing of all eleven year old children.

If any error is discovered the case is referred to the Ophthalmic Surgeon. If the parent wishes, the child can be taken to his own Optician,

478 cases were seen at the Ophthalmic Clinic at The Wylde, and in 359 cases glasses were prescribed. In addition to these figures we know that 422 other children have received glasses. The Ophthalmic Surgeon has two sessions weekly at the Clinic.

In appropriate cases the Eye Specialist refers cases to the Orthoptic Clinic. Many of these cases are children with squints. It is essential to start treatment as early as possible, and an effort is made to commence treatment before school attendance begins. The Child Welfare Centres have discovered and commenced treatment in many cases before school attendance commences.

#### ORTHOPTIC CLINIC.

Held at the Huntley Mount Clinic, Tuesdays, by appointment.

I am indebted to Mrs. K. M. Rogerson for the following report:—

During 1963 a total of 194 Bury children received treatment or observation for squint. Of these 66 were new cases.

The children are referred here by Mr. McLenachan, the Consultant Surgeon, after refraction, at any age from 12 months upwards, the most common age being  $2\frac{1}{2}$  to  $3\frac{1}{2}$ , when the majority of squints either begin or cannot be ignored any longer.

Although a large proportion of cases are cured by glasses and orthoptic treatment alone, the larger or more rigid types of squint require surgery to put the eyes straight. This is performed by Mr. McLenachan at Birch Hill Hospital.

During 1963, 28 children were operated on, and a further 7 were waiting for admission.

In addition to Bury school children, patients attend here from a very wide area, as cases are sent from the Lancashire County School Clinics and from Bury General Hospital.

#### EAR DISEASE AND HEARING.

The treatment of middle ear disease and of the various degrees of deafness is a matter of great concern. A Consultant Ear, Nose and Throat Surgeon (Dr. A. I. Goodman) has held a clinic at the Wylde, on 2nd and 4th Fridays of the month, at 2 p.m.

Five children were referred for Hearing Aids at Manchester. Audiograms were done by our own staff at the Wylde.

The Consultant Surgeon paid 20 visits to the School Clinic during the year.

Attendances were as follows:-		
First consultation with Surgeon	100	
Second or subsequent consultations with Surgeon	115	
Total	215	
Analysis of new cases:		
Enlarged tonsils and/or adenoids	43	
Otorrhoea	10	3
Otitis Media	4	
Partial deafness	23	18
Colds	1	
Cervical adenitis	2	
Sore throat	2	
Earache	6	6
Other conditions	9	
Total	100	

#### AUDIOMETRY.

A Peter's Basic Diagnostic audiometer is available in the Department. This is provided with a Peepshow for the use with small children.

It is the intention to visit every school to screen all the children. This year 2,374 children were examined at school. In addition 263 pure tone tests were carried out at the Wylde Clinic in cases referred by the Medical Officers.

#### SPEECH THERAPY.

We have been unable to fill the vacancy for a full-time speech therapist.

#### CHIROPODY.

The L.A. whole time Chiropodist is available each morning either at the Wylde Clinic (Monday to Thursday) or Huntley Mount Clinic (Friday) between 9 a.m. and 10 a.m. to deal with cases referred by the School Medical Officers.

76 children made 308 attendances. 68 of these were suffering from Veruccas.

#### SPECIAL SCHOOLS (RESIDENTIAL),

The following handicapped school children were maintained for some part of the year in special schools, hospital schools, or convalescent homes:—

Blind	2
Deaf	0
Partial Hearing	3
Delicate	2
Physically handicapped	7
Maladjusted	3
Educationally sub-normal	2
Epileptic	1

HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES.

		2. Partially sighted (1) (2)	artially hted (2)	4. Par he (3)	Partial hearing (+)	Handicapped 6. Delicate (5) (6)	dicapped Delicate (6)	8. E	8. E.S.N. (7) (8)	10. Speech Defects (9) (10)	peoch cts (10)	cols. (11)
V	How many handicapped pupils were newly assessed as needing special educational treatment at special schools or in boarding homes?		1	i	*****	1	2	1	80	1-	1	11
	(i) of the children included at A, how many were newly placed in special schools (other	1.	1	1	1	1	1	1	œ	1	1	6
В	(ii) of the children assessed prior to 1st January, 1963, how many were newly placed in	1	1	1	1	1	1	1	2	1	1	2
	special schools (other than hospital special schools) or boarding homes ( Total (B(i) and B(ii))	1	1	1	1	1	1	1	10	1	1	11
n or a	On or about 20th January, 1964, how many handicapped pupils from the Authority's area-											
	(i) were requiring places in special schools — TOTAL—  (a) day		1	1	1	1	10	1	71	1	1	616
	(ii) included at (i) had not reached the age of 5 and were waiting		!	ı	1	ı	4	ı		1	1	4
o	(a) day places	11	11	11	11	11	11	11	11	11	11	11
			1	1	1	1	1	1	1	1	1	1
	special school, were awaiting—  (b) boarding places	1	1	1	1	ı	-1	1	1	1	1	1
	(i) were on the registers of (1) maintained special schools as-								6.9		7	07
	(a) day pupils (b) boarding pupils		11	H		1.1	11	77	5 1	1	11	94
	(a) day pupils (b) boarding pupils	2	11	11	11	7	11	11	121	11	11	11
D	TOTAL	2	1	ı	2	7	1	61	202	1	1	84
	(ii) were on the registers of independent schools under arrangements made by the Authority	1	1	1	1	1	1	1	1	1	1	1
	Total (D(i) and D(ii))	2	1	ı	2	7	1	2	70	1	1	84
	(iii) were boarded in homes and not already included under (i) and (ii) above	ı	ı	ı	1	1		1	1	1	1	1
	Total (D(i), (ii) and (iii))	2	1	!	2	7	1	61	7.0	-	1	84
20	On or about 20th January, 1964, how many handicapped pupils (irrespective of the areas to which they belong) were being educated under arrangements made by the Authority in accordance with Section 56 of the Education Act, 1944.											
		111	111	111	111	111	114	111	111	111	111	110

## 

This year has seen an increased referral of cases of faecal soiling. The symptom, distressing to parents and child, is usually regarded as evidence of a section deep-seated emotional disturbance. Experience at the child guidance clinic over the last year, however, has taught us that, in many cases, simple habit training often remedies the situation. Counselling of parents to ensure the child visits the toilet regularly, especially before going

Pupils treated at Clinic ... ... 38
Total No. of Attendances ... ... 117

to school or out to play, has often been all that was necessary.

#### New Cases:

Referred by School Medical Officer	6
Referred by Juvenile Court	1
Referred by Psychologist	3
Referred by Head teachers	1
Referred by General Practitioners	3
Referred by Co-ordinating Committe	e
	1
Referred by Hospital Consultants	4
Referred by Lancashire County	
Council Medical Officer of Health	2

Total ... 21

Each session one new child and 5 follow-up cases.

#### PSYCHOLOGIST'S REPORT

I am indebted to Mrs. J. Shepherd for the following report.

During the year, 53 new cases have been examined. The distribution of ages and ability are as follows:—

Age Range: Pre School 5
Infant School 23
Junior School 17
Secondary School 8
Ability Range:
I.Q. below 50-Suitable for trial at Training Centre 6
I.Q. 50-70-E.S.N. Suitable for Brunswick
Special School 10
I.Q. 70-75—Border line cases.
2 recommended for Special School.
1 further observation in present school.
I.Q. 75-90—Dull, likely to need special help
in normal school 13
I.Q. 90-105—Average 17
I.O. 105-125—Above average 4

The pattern of referrals is very similar to last year's figures, showing a relatively high number of dull children who need special help within the normal school system, and the number of referrals from Infant departments continues high.

A small number of handicapped young pre-school children were followed up. These were cases which had been seen by the Psychologist at an early age. Although assessment of very young children is often not possible, early contact with the children and their families is of great value, as it allows observations to be made over a period. Parents appreciate the continued interest in their problems and a decision about future education is more easily accepted when the school age is reached.

The problem of providing remedial teaching in the schools is still with us. Special coaching has been arranged by the Education Department for one very intelligent boy who has a specific learning difficulty for mathematics.

#### MEDICAL REPORTS ON COURT CASES.

We have been asked by the Magistrates of the Children's Court on 151 occasions to submit reports on 134 children. It is of interest to note that in 141 of these cases we were unable to give any relevant information which would be of any assistance to the Court. These cases, although many had been seen at periodic medical inspections had no recorded physical defect, nor had they ever been reported to us on account of behaviour problems, educational subnormality or physical defect.

In 10 cases we were able to submit relevant information from our existing records. Two of these children were known to be educationally subnormal.

#### CO-OPERATION OF PARENTS, TEACHERS, Etc.

The percentage of parents attending at routine inspections was:-

"Entrants"	 	 	 	 	87.2%
"Leavers"		 	 	 0.20	7.7%

Parents are encouraged, and previously notified as to time and place of the routine medical inspections, so that the defects found may be pointed out and steps taken to remedy the abnormality discussed. A record of the child's history of infectious and other diseases is asked for from the parents.

The number of parents who have also accompanied their children to the Clinics is 460 at the Wylde, and 4 at Huntley Mount Clinic.

# CO-ORDINATING COMMITTEE— CHILDREN NECLECTED OR ILL-TREATED IN THEIR OWN HOMES.

Joint Circular from the Home Office (157/50), Ministry of Health (78/50), Ministry of Education (225/50).

#### Report of work of the Committee during 1963.

The Co-ordinating Committee under the above-mentioned Circulars met at the Town Hall on six occasions during the year. The average attendance of members was nine.

The circumstances of children in forty-one families have been dealt with since the first meeting of the Committee in May, 1952.

The cases have been referred to the Committee as follows:-

By the	Medical Officer of Health	20
,,	Borough Treasurer (Housing)	7
,,	N.S.P.C.C. Officer	5
,,	Chief Area Officer, N.A.B	2
,,	Children's Officer	3
,,	Director of Education	3
,,	Teachers' Association Representative	1

Two new cases were brought forward during 1963 and thirteen family cases previously reported made a total of fifteen considered during the year. The number of children involved is 59, of which 50 are of school age. The Committee has afforded opportunity for the various cases to be discussed, and in some, collective action to be taken. A meeting once every two months appears to be able to deal adequately with the cases referred.

#### PROVISION OF MEALS AND MILK.

844,441 dinners were supplied in 1963, from 1 Central Kitchen and 10 Kitchen Dining Rooms to 19 Dining Centres. Two new kitchens were brought into operation during October and November, 1963. (St. Joseph's Infants' and St. Joseph's Junior).

1,352,135 ½ pint bottles of milk were supplied.

#### SCHOOL CAMP

No School Camp was held this year.

#### HOME TUITION.

Home tuition was provided for 3 children—one for the whole year, one from January 28th to September 2nd, the other 25th February to 12th April. In addition, another child received special tuition at School from the Home Teacher.

#### NURSERY SCHOOL

Elton Nursery School continued with an average number on roll of 40 children aged 2-5 years.

#### SWIMMING BATHS

#### Water Samples:

The following numbers of samples of swimming bath water have been taken during the year and submitted for Bacteriological examination.

	No.	of Samples.	Satisfactory
Bury Grammar School		3	3
Bury Technical College		3	3
Bury Corporation Baths		12	8
		_	_
		18	14

Two unsatisfactory samples were taken in May, when the sand filter jointly serving the two pools then sampled required cleansing.

Two unsatisfactory samples were taken November/December from one of the same pools when a back flow of partially treated water from a filter was discovered.

On each occasion the defects were immediately remedied and subsequent samples found to be satisfactory.

Eight samples of water were also taken from a public openair swimming pool and submitted for bacteriological examination and chemical analysis. The results were considered to be acceptable for untreated surface water used for this purpose.

#### Attendances:

Number of attendances at the Technical College Bath 33,127 Number of attendances at the Corporation Bath ... 22,572

#### DENTAL SERVICES.

I am indebted to Mr. R. B. Keighley, L.D.S., for the following report:—

During the year 18 schools were inspected and treated.

One staff change took place, namely, that of Dental Surgery Assistant, and for a period of two months no Surgery Assistant was available. It has not yet been possible to obtain the services of a full time Assistant Dental Officer.

A very useful piece of new equipment recently installed is the provision of a dry heat autoclave. Steam sterilization, which it displaces has always caused the problem of excessive condensation, especially in areas of higher than average humidity, which on a damp day would cause the windows and walls to run with moisture. The dry heat method is much healthier and more pleasant for patients and staff.

I would like to thank the School Medical Officers, Nurses and Teachers for their willing co-operation and help.

## FOR THE YEAR ENDED 31st DECEMBER, 1963.

Number of pupils on registers of maintained primary and secondary schools (including nursery and special schools) in January, 1964, as in Form 7, 7M and 7N schools

8,524

# Part 1—Medical Inspection of Pupils attending Maintained Primary and Secondary School (Including Nursery and Special Schools).

#### TABLE A. - PERIODIC MEDICAL INSPECTIONS.

Δo	e Group		No. of	F	hysical Conditi Inspec		ipils
I	spected		pupils	SATIS	SFACTORY	Unsat	ISFACTORY
(B)	y years o	01	Inspected -	No.	% of Col. 2	No.	% of Col. 2
	(1)		(2)	(3)	(4)	(5)	(6)
1959 :	and later		66	66	100	_	_
1958	****		797	796	99.9	1	0,1
1957			62	62	100	-	
1956	****	****	38	38	100	_	_
1955	****		26	26	100	_	_
1954	****		20	20	100	****	-
1953	****		23	23	100	-	
1952	****		12	12	100	-	-
1951	****		27	27	100	_	
1950	****		23	23	100	_	
1949	****		28	28	100		_
1948 :	and earli	er	546	546	100	-	
	Total		1,668	1,667	99.9	1	0,1

## Pupils found to require treatment (excluding dental diseases and infestation with vermin).

(by year	groups bected r of birt (1)	h)	For defective vision (excluding squint) (7)	For any of the other conditions recorded at Part II (8)	Total individual pupils (9)
1959 and	later		0	16	9
1958			3	157	154
1957			0	17	14
1956				9	9
1955			2 3	5	6
1954			2	3	
1953			0	3	5 3 3
1952			1	2	3
1951			4	3 3 2 7	10
1950			5	2 8	7
1949			4	8	10
1948 and	earlier		41	71	107
То	tal		65	300	337

#### TABLE B. - Other Inspections.

Notes:—A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections		 	 1,750
Number of re-inspections		 	 3,576
Tot	tal .	 	 5,326

#### TABLE C. - Infestation with Vermin.

Notes:—All cases of infestation, however slight, should be included in Table C.

The numbers recorded at (b), (c) and (d) should relate to individual pupils, and not to instances of infestation.

(a)	Total	number	of indiv	vidua	al exa	minations of	of pupils	
in sch	ools b	y school	nurses	or	other	authorised	persons	14,481

(b)	Total	number	of	11	ndiv	ridu	al	pu	pils	fou	nd	to	be	
	infes	sted												386

# PART II DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR. TABLE A.—PERIODIC INSPECTIONS

Code No.	Defect or Disease		PER	odic I	NSPECTI	ONS
(1)	(2)		Entrants	Leavers	Others	Total
4		T O	15 45	24 27	1 11	40 83
5		T O	3	45 48	17 1	65 52
	b. Squint	T	47 13	_	5	52 13
		T O	4 9	1	1_	6 9
6	Ears—a. Hearing	T O	5 85	6 12	2 10	13 107
	b. Otitis Media	T O	9 69	5 6	2 11	16 86
	c. Other	T O	1 13	8 7	1 4	10 24
7	Nose and Throat	T O	20 203	8 10	4 23	32 236
8	Speech	T O	3 17	<u></u>	=	3 18
9	Lymphatic Glands	T O		=	=	18
10	Heart	T O	1 60	<del>-</del> 11	2 7	3 78
11	Lungs	T O	16 124	5 9	2 12	23 145
12	Developmental—a. Hernia	T O	4 11	<u>_</u>	1	5 12
	b. Other	T O	1 8	1 4		2 14
13	Orthopaedic—a. Posture	T O	2 4	9 7	<u>-</u>	11 12
	b. Feet	T O	40 97	4 34	4 12	48 143
	c. Other	T O	9 22	4 25	<u>-</u>	13 51
14	Nervous System—a. Epilepsy	T O	2 3	1	=	3 3
	b. Other	T O	11	- 5	1 2	1 18
15	Psychological—a. Development	T O	2 32	=	1 1	333
	b. Stability	T O	12		1 1	1 15
16	Abdomen	T O	6 19	1 2	<u>-</u>	7 27
17	Other	T	3 13	2	3 1	8

#### TABLE B. SPECIAL INSPECTIONS

Note:—All defects, including defects of pupils at Nursery and Special Schools, noted at special medical inspections should be included in this Table, whether or not they were under treatment or observation at the time of the inspection.

Defect	Defect	Special Inspections					
Code No. (1)	or Disease (2)	Requiring Treatment (3)	Requiring Observation (4)				
4	Skin	341	_				
5	Eyes— a. Vision	305	86				
	b. Squint	54	33				
	c. Other	41	_				
6	Ears— a. Hearing	15	1				
	b. Otitis Media	12	_				
	c. Other	37					
7	Nose and Throat	13					
8	Speech						
9	Lymphatic Glands		1				
10	Heart	2	1				
11	Lungs	2 3	î				
12	Developmental—	,					
1.4	a. Hernia	1					
	b. Other	1					
13	Orthopaedic—	1	1000				
15	a. Posture						
	b. Feet	11					
	c. Other	35					
14	Nervous system—	33	_				
14							
	a. Epilepsy	11					
15	b. Other	11	_				
15	Psychological—	12	4				
	a. Development	13	4				
16	b. Stability	1	2				
16	Abdomen	3					
17	Other	97	-				

#### PART III

# TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

#### TABLE A .- EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of	
refraction and squint	900
Total	941
Number of pupils for whom spectacles were prescribed	781

#### TABLE B .- DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with			
Received operative treatment				
(a) for diseases of the ear	11			
(b) for adenoids and chronic tonsillitis	198			
(c) for other nose and throat conditions	32			
Received other forms of treatment	67			
TOTAL	308			
Total number of pupils in schools who are known to have been provided with hearing aids				
(a) in 1963	6			
(b) in previous years	8			

#### TABLE C-ORTHOPAEDIC AND POSTURAL DEFECTS.

	of cases known to been treated					
(a) Pupils treated at clinics or out-patients departments	99					
(b) Pupils treated at school for postural defects		_				
Total		99				
TABLE. D—DISEASES OF (excluding uncleanliness for which see		f Part 1)				
		Number of case known to have been treated				
Ringworm— (i) Scalp		_				
Scabies		20				
Impetigo		52				
Other skin diseases		269				
	Total	341				
TABLE E.—CHILD GUIDANCE	TREATME	ENT				
		of cases known to be been treated				
Number of pupils treated at Child Guidance Clinics	38					
Texas business and an experience of the control of		50				
TABLE F.—SPEECH TH	ERAPY					
	Number o	f cases known to been treated				
	Number o	f cases known to				
Number of pupils treated by	Number o have	f cases known to been treated				
Number of pupils treated by Speech Therapists	Number o have	f cases known to been treated				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM	Number o have	f cases known to been treated  —  N  Number of cases known to have				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  (a) Pupils with minor ailments (b) Pupils who received convalescent treatment	Number o have	f cases known to been treated  —  N  Number of cases known to have been dealt with				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  a) Pupils with minor ailments b) Pupils who received convalescent treatment School Health Service arrangements	Number o have	f cases known to been treated  —  N  Number of cases known to have been dealt with				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  a) Pupils with minor ailments b) Pupils who received convalescent treatment School Health Service arrangements c) Pupils who received B.C.G. vaccination	Number o have	f cases known to been treated  N  Number of case known to have been dealt with				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  a) Pupils with minor ailments b) Pupils who received convalescent treatment School Health Service arrangements c) Pupils who received B.C.G. vaccination d) Other than (a), (b) and (c) above (specify) 1. U.V.L.	Number o have	f cases known to been treated  N  Number of case known to have been dealt with  97  447				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  (a) Pupils with minor ailments (b) Pupils who received convalescent treatment School Health Service arrangements (c) Pupils who received B.C.G. vaccination (d) Other than (a), (b) and (c) above (specify)  1. U.V.L. 2. Physiotherapy	Number o have	n Number of case known to have been dealt with 97				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  a) Pupils with minor ailments b) Pupils who received convalescent treatment School Health Service arrangements c) Pupils who received B.C.G. vaccination d) Other than (a), (b) and (c) above (specify)  1. U.V.L. 2. Physiotherapy 3. Diphtheria Immunization	Number o have	n Number of case known to have been dealt with 97				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  a) Pupils with minor ailments b) Pupils who received convalescent treatment School Health Service arrangements c) Pupils who received B.C.G. vaccination d) Other than (a), (b) and (c) above (specify)  1. U.V.L. 2. Physiotherapy	Number o have	N Number of case known to have been dealt with 97  447  13 35 353 1,037 194				
Number of pupils treated by Speech Therapists  TABLE G.—OTHER TREATM  (a) Pupils with minor ailments (b) Pupils who received convalescent treatment School Health Service arrangements (c) Pupils who received B.C.G. vaccination (d) Other than (a), (b) and (c) above (specify)  1. U.V.L. 2. Physiotherapy 3. Diphtheria Immunization 4. Polio Vaccination	Number o have	N Number of case known to been treated  Number of case known to have been dealt with  97  447  13 35 353 1,037				

## DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

### The Year ended 31st December, 1963.

a.	Dental and Orthodon	tic w	ork.									
(1)	Number of pupils insp	ecte	d by	the	Auth	ority	's D	enta	Offi	cers	:	
	(a) At Periodic Ins	spect	ions		1771	4000	****					2,813
	(b) As Specials		****			****		1000				966
	Total (1)											3,779
(2)	Number found to requ	ire t	reatr	nent			****			****		2,293
(3)	Number offered treats	nent									****	2,091
(4)	Number actually treat	ted			****	****					****	1,573
b.	Dental work (other th	an o	rtho	dont	ics).							
(1)	Number of attendance	es m	nade	by 1	ounile	s for	tres	tme	nt e	velu	ding	
(1)	those recorded at h	eadi	ng (c	) 1 b	elow						umg	2,543
(2)	Half days devoted to											
	Periodic (School) In	nspec	ction						****			25
	Treatment				1114			****				357
	Total (2)	****		****			,		****	****		382
(3)	Fillings—											
. ,	Permanent Teeth											562
	Temporary Teeth											98
	Total (3)											660
(4)	Number of teeth filled	l—										
	Permanent Teeth				1111					****		532
	Temporary Teeth			****		10100	****					86
	Total (4)											618
(5)	Extractions—											
	Permanent Teeth	1551				****			171.03			484
	Temporary Teeth			****		****	****	****	****			1,702
	Total (5)	****		****					****			2,186

(6)	) 1. Number of general anaesthetics given for extraction									
		o, of half days devoted to the administration of eneral anaesthetics by:								
	(a		-							
	(,	(1 hour session by S.M.O. as required 24 Total 24	+							
(7)	Numb	er of pupils supplied with artificial teeth	1							
(8)	Other	operations: 1. Crowns —								
		2, Inlays —								
		3. Other treatment 806 Total 806	5							
c.	Ortho	dontics.								
	i	turnturent 71	5							
	ii		_							
	iii		2							
	iv		1							
	v		2							
	vi									
	vii	Number of pupils treated by means of applicances	7							
	viii	Number of removable appliances fitted	7							
	ix	Number of fixed appliances fitted	-							
	X	Cases referred to and treated by Hospital Orthodontics —	-							

