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CHESHIRE COUNTY COUNCIL

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EDUCATION COMMITTEE





REPORT

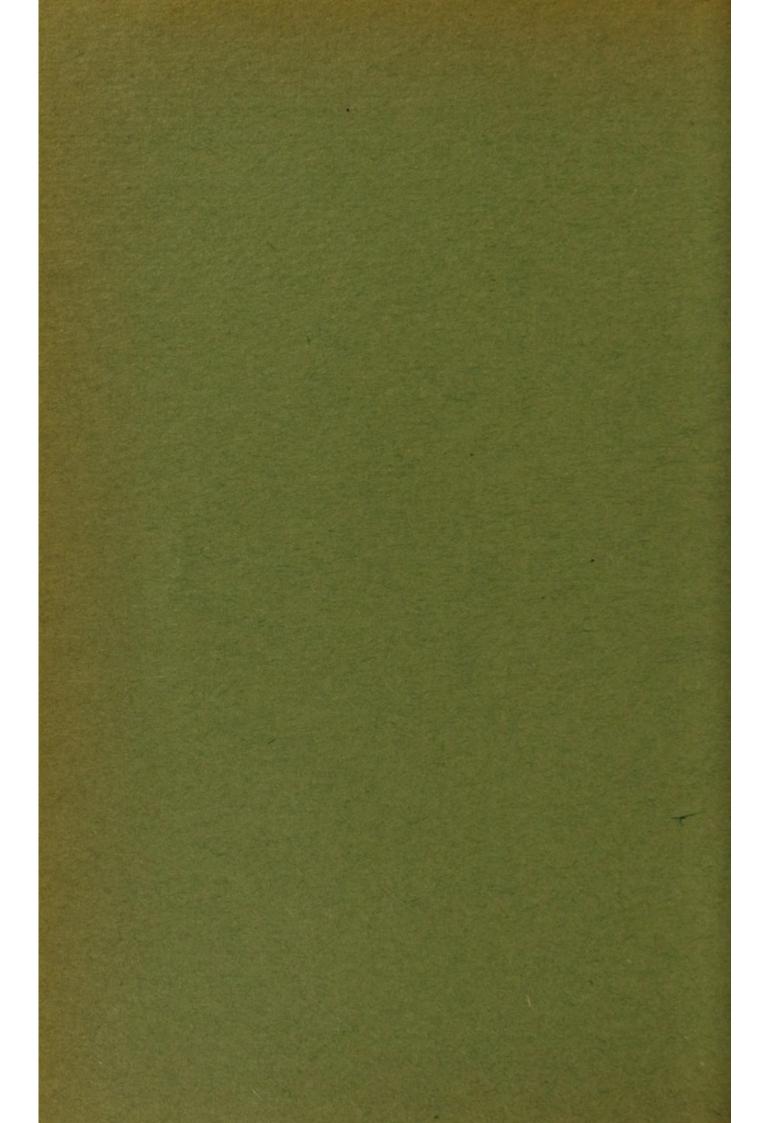
for the year 1957

BY

The Principal
School Medical Officer

:::

CHESTER:
PHILLIPSON AND GOLDER LTD., FRODSHAM STREET



STAFF

Principal School Medical Officer:
ARNOLD BROWN, M.B., CH.B., D.P.H.

Deputy Principal School Medical Officer:

B. G. GRETTON-WATSON, M.A., M.B., B.CH., D.P.H., Barrister-at-Law

Senior School Medical Officer: H. CRAIG, L.R.C.P. & S., L.R.F.P.S.

Assistant County Medical Officers:

R. A. BLYTH, M.B., CH.B., M.R.C.S., L.R.C.P.

R. CARGILL, M.B., CH.B. MARGARET CATON, M.R.C.S., L.R.C.P.

R. J. CLARK, M.B., CH.B., D.P.H.
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BARBARA JONES, M.B., CH.B.

CHRISTINA LAING, M.B., CH.B., D.P.H.

HILDA LEVIS, M.R.C.S., L.R.C.P., M.B., B.S., D.P.H.

ELIZABETH LLOYD-JONES, M.B., B.CH.

ALTA RAVENSCROFT, M.B., CH.B. H. SUMMERS, M.SC., M.B., CH.B. JESSIE TOUGH, M.B., CH.B., D.P.H.

Divisional School Medical Officers:

Altrincham—D. LONGBOTTOM, M.B., CH.B., D.P.H.

Bebington—F. S. MELVILLE, M.B., CH.B., D.P.H.

Cheadle and Wilmslow—D. G. ANDERSON, M.B., CH.B., D.P.H.

Crewe—D. G. CRAWSHAW, M.B., M.R.C.S., D.C.H., D.P.H.

Deeside—J. HATTON, M.D., D.P.H. Hyde—F. W. C. BROWN, M.D., D.P.H.

Macclesfield—H. R. DUGDALE, M.B., CH.B., D.P.H.

Mid-Cheshire—W. S. SLATER, M.B., M.R.C.S., D.P.H.

Nantwich—R. K. HAY, M.D., B.CH., B.A.O., D.P.H.

N.E. Cheshire—T. W. BRINDLE, M.B., CH.B., D.P.H.

Runcorn—E. N. H. GRAY, L.R.C.P. & S., L.M., D.P.H.

Sale and Lymm—E. H. GORDON, M.D., B.CH., B.A.O., D.P.H.

S.E. Cheshire—L. RICH, M.B., CH.B., M.R.C.O.G., D.P.H.

S.W. Cheshire—W. J. BIRCHALL, M.B., M.R.C.S., L.R.C.P., D.P.H.

Stalybridge and Dukinfield— T. HOLME, M.B., CH.B., D.P.H.

Paediatrician (Part-time):
J. D. ALLAN, M.D., F.R.C.P.

Ophthalmic Surgeons (Part-time):

B. BOAS, M.D.

P. J. DEVLIN, M.B., CH.B., D.O.M.S.

A. HOLMES-SMITH, M.A., M.B., B.CHIR., D.O.M.S.

C. JACOBS, M.D., M.B., B.S. E. RILEY, M.B., CH.B., D.O.M.S. L. R. C. ROSE, L.M.S.S.A., D.O. DOROTHY SIMMONS, M.B., CH.B.

Orthopaedic Surgeons (Part-time):

T. JACKSON, M.R.C.S., L.R.C.P.

E. M. KUPFER, M.B., B.S., F.R.C.S.

J. L. MANGAN, F.R.C.S.I.

K. MARKS, f.r.c.s., M.CH.

T. McSWEENEY, M.B., M.CH., F.R.C.S.

A. G. O'MALLEY, M.CH., F.R.C.S.

G. T. PARTRIDGE, M.A., M.B.. F.R.C.S.

R. ROAF, M.A., F.R.C.S.

G. A. WETHERELL, M.B., M.CH., F.R.C.S.

Ear, Nose and Throat Surgeon (Part-time):

School Dental Surgeons:

E. M. INNES, B.SC., M.B., CH.B., F.R.C.S., D.L.O.

A. F. HELY, C.B., L.D.S. (Principal)

EDITH ANDREW, L.D.S.

J. B. ANDREW, B.D.S., R.C.S.

E. BRADLEY, L.D.S.

DOROTHY COATES, L.D.S.

G. H. CRAINE, B.D.S.

D. M. DODD, B.D.S.

G. J. HARTLEY, L.D.S.

H. S. HOLLAND, B.D.S., L.D.S.

J. P. HUGHES, L.D.S.

R. H. HURST, L.D.S.

H. JACKSON, L.D.S.

LISBETH KIPPEN, L.D.S., D.P.D.

A. N. LEICESTER, B.D.S.

J. G. McCRACKEN, B.D.S.

H. P. MEED, L.D.S. RUTH OWEN, L.D.S.

BARBARA PETRIE, L.D.S.

(part-time)

E. S. POULTER, L.D.S.

J. A. REECE, L.D.S.

H. W. S. SHEASBY, L.D.S.

E. J. TAYLOR, L.D.S.

DOROTHY WALKER, L.D.S.

Health Visitors and School Nurses: 110.

Dental Nurses and Attendants: 25.

Clerk-Attendants: 12.

Speech Therapists:

JOYCE DAVENPORT, L.C.S.T. RAYLEEN EATON, L.C.S.T. KATHLEEN JONES, L.C.S.T.

VALMAI KENYON, L.C.S.T. JOAN WREN, L.C.S.T.

Chief Administrative Assistant: B. O'CONNOR, M.A., Barrister-at-Law

> Occupational Therapist: MARGARET BACON. †

Physiotherapists: CHRISTINA COOKE JOYCE URMSON. †

†Appointed for treatment of children suffering from cerebral palsy.

INTRODUCTION

To the Chairman and Members of the County Education Committee.

Mr. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the School Health Services for the year 1957.

I regret to have to report the death of Mr. F. C. Littleton, a Dental Surgeon of considerable ability and experience, who had given sterling service for many years in the Wirral area.

The number of pupils enrolled was 121,103 at the end of the year, an increase of 812 over the previous year. The percentage of pupils receiving school milk dropped to 69.7% whilst that for pupils in receipt of school meals fell to 45.3%.

A full staff of Assistant Medical Officers was maintained during the year. Dr. Gladys Wilkinson retired from active service at the end of the year. She had been a School Medical Officer in Cheshire for 29 years and was one of the few school doctors who had both a nursing and medical qualification, having served Cheshire as a Health Visitor for four years before enrolling as a medical student. She also served the St. John Ambulance Brigade for many years and was a member of the committee of the Schools Health Service group of the Society of Medical Officers of Health. I am glad to pay a tribute to her long, faithful and conscientious care for the health of Cheshire school children.

The general physical condition of the 34,713 children inspected remained good in that only 412 or 1.2% were considered to be unsatisfactory in this regard. Although the proportion of children who were found by the Health Visitors to be infested with vermin (3,955 cases found in 275,179 inspections) was quite low, it was nevertheless higher than in the previous year, whilst the number of cleansing orders issued (222) was almost double that in 1956. The number of children known to have been operated upon for adenoids and chronic tonsillitis declined during the year.

As the establishment of 28 whole-time dental surgeons is not complete, there being only 21 in post, great difficulty was experienced in maintaining an adequate dental service. The percentage of children accepting treatment through the School Dental Service was raised from 72% in 1956 to 76% in the year under review which shows the confidence felt by the parents of Cheshire children in the professional work of the County Dental Surgeons; it is also an indication of the support which the Dental Service receives from the head teachers of the schools, a support which is always greatly appreciated. The total amount of work done was less than in previous years and attention is drawn to the remarks of the Principal School Dental Officer regarding the unlikelihood of being able to recruit up to establishment during the next few years. The plain truth is, as pointed out by the McNair

Committee, that there are insufficient places in Dental Schools to train sufficient dental surgeons to satisfy the national need.

Arrangements are now in hand for informing a school leaver's family doctor of defects noted by School Medical Officers at medical inspection.

It will be noted in the section of this report contributed by Dr. Allan on the Paediatric Service that the work of the cerebral palsy team has enabled certain spastic children to go to an ordinary school which would not have been possible before the inception of this service. The team has been augmented by Dr. Cargill, a School Medical Officer who has undergone special training in the assessment of intelligence of handicapped pupils. A good working liaison has been established with the cerebral palsy unit at the Duchess of York Hospital, Manchester.

An interesting development in connection with testing of visual acuity amongst school entrants has been the adoption of the Sjogren test cards which have enabled a reasonable assessment to be made of the vision of those young children who cannot recognise letters. School Medical Officers are now supplied with Ishihara material for detection of colour blindness.

Both Grappenhall and Capenhurst residential special schools for educationally subnormal pupils are now in operation and I can only express the highest satisfaction with the efforts being made at these schools to produce responsible adult citizens out of those educationally subnormal children who for various reasons have been considered to need special education of a boarding type.

Selected Health Visitors have attended courses, arranged through the County Health Committee, at the Manchester University Department for the Education of the Deaf on early ascertainment of deafness and the use of the pure tone audiometer. Other courses on early ascertainment of deafness have been organised at county clinic centres, so that facilities are now available throughout the county for the testing of the hearing of children before they reach school age. When the necessary appointments of specialist teachers of the deaf have been made, it is hoped that it will be possible, with the co-operation of Professor Ewing and his staff working from Manchester University and with additional speech therapy, to arrange for a large proportion of partially deaf children to attend county clinic centres for tuition in lip-reading and help in the use of hearing aids, and to attend ordinary schools.

Samples of school milk are collected at the schools. During 1957, 944 samples were subjected to the phosphatase and Aschaffenburg-Mullen tests to determine efficiency of pasteurisation. Twelve samples failed the tests and appropriate action was taken by the County Health Department in the seven instances when the dairy concerned was within the county Food and Drugs Act area. In the remaining five cases, the responsible authorities under the Food and Drugs Act were informed. Out of 288 school milk bottles examined bacteriologically for cleanliness in the county laboratory, four were found to be either unsatisfactory or only fairly satisfactory, and in each case special

attention was paid to the bottle cleansing arrangements in the dairies concerned.

Head teachers of schools throughout the county have been asked to arrange for clinics to be held in schools for vaccination against poliomyelitis, tuberculosis and whooping cough and immunisation against diphtheria. Their attitude has been most co-operative and much of the success of these schemes is undoubtedly due to their help and support.

The establishment of a County Psychological Service is a pressing need. Whilst the Regional Hospital Boards have set up out-patient psychiatric clinics in many parts of the county, outside mental hospitals but working in close connection with them, and a child psychiatric unit is now operating at Clatterbridge Hospital, they cannot cope with the multitude of psychological disorders amongst children which are not psychoses and these become the responsibility of the School Health Service. Dr. Hugh Craig touches on this in his section of this Annual Report and one cannot escape the conclusion that only when the proposed psychological teams have been formed and are working, and not until then, will the problem of the psychological needs of Cheshire school children be met. This is work, not only of great importance to school children and education, but of a high preventive value when pupils leave school and enter adult life.

A total of 75 children were reported during the year as requiring examination to determine educability or otherwise. At the subsequent examinations 61 were found to be ineducable and thereupon reported to the County Health Committee, a decision was deferred for subsequent review in seven cases, six were considered able to attend school and home tuition was arranged in one case. In two cases, when a child had previously been reported to the County Health Committee as ineducable, improvement was subsequently noticed and the question of educability re-opened; in both cases the child concerned was then considered to be educable and attended school.

It would not be possible to maintain an efficient School Health Service without the willing and effective co-operation of the Director of Education, his administrative staff, the Head Teachers and indeed all members of the teaching staff. Such co-operation has been constantly given and I tender to them all, my grateful thanks.

I acknowledge with deep gratitude the continued help and cooperation which I have received throughout the year from the members of the Education Committee, the Clerk of the County Council, the County Treasurer and County Architect and the members of their staffs, and lastly I thank most sincerely the members of my own staff, both professional and lay, without whose unfailing efforts and friendship the work of the Schools Health Service could not be properly done.

I beg to remain,

Your obedient servant,
ARNOLD BROWN,
Principal School Medical Officer.

August, 1958.

General Statistics

The Administrative County of Cheshire comprised 42 County Districts, namely 10 Municipal Boroughs, 22 Urban Districts and 10 Rural Districts.

The population estimated by the Registrar-General at mid-1957 was 861,800.

The total number of Schools in the educational area at 31/12/57 with their enrolments was as follows:—

Primary		******	******	 463	80,830
Secondary	(Grammar)			 22	13,777
Secondary	(Modern)			 66	26,696

At the end of 1957, there were 84,384 children receiving school milk, and 54,831 receiving school meals.

One school was closed by the Principal School Medical Officer in 1957 on account of infectious disease.

The School Dental Service in 1957.

(from Mr. A. F. Hely)

(1) General

The year 1957 produced an unusual number of disturbing factors which operated against the smooth running of the School Dental Service.

The death of Mr. H. R. Parry, the Principal School Dental Officer was a great shock. The whole of his professional life had been spent in the service of the county and the Dental Scheme as it now exists was his life's interest and work. He had seen it grow from a small number of dental officers, operating with portable equipment, to the present organisation of 21 dental officers and 39 equipped dental clinics. The service and staff owe much to him.

Mr. Littleton's death, which occurred later in the year, was also a shock. He had spent a long and useful life as a public dental officer and men of his experience and calibre are difficult to replace.

There were two resignations of dental surgeons and two appointments during the year.

(2) Recruitment

The problem of recruiting suitable dental officers is increasingly difficult, and the immediate prospect of bringing the dental staff up to its establishment of 28 is not encouraging.

During the year 1958, a number of general dental practitioners in the Health Service will become eligible for retirement, and a national shortage of dental surgeons is to be expected for the next few years. The dental schools are now generally filled to capacity, but the effect on the dental man-power situation will not be appreciable for some years.

The school dental service is not attracting young dental surgeons for three main reasons:—

- (a) The initial pay is less than that offered in private practice, and the increments offered are not attractive.
- (b) There is a feeling that full scope cannot at present exist in public service for their professional skill, although it would be quite untrue even to imply that this obtains in Cheshire.
- (c) The lack of promotion in the service is a deterrent.

The average number of children per dental officer in Cheshire county is about 6,000. On the other hand the Chief Medical Officer of the Ministry of Education states in a recent Annual Report that at the present time a ratio of at least one dentist to 3,000 children would be required for a complete service, though this can only be regarded as an ideal. Every effort is being made to increase staff up to the present establishment of 28.

(3) Clinics

- (a) The Principal Dental Officer has surveyed the clinics and equipment in the health centres in the county and intends to make a detailed survey during 1958; although most of the equipment is in good order, there will be some recommendations for the replacement of some major items during 1958.
- (b) An X-ray apparatus has been installed in the Bebington clinic and it is proving a great boon. It has supplied a long felt need in the Wirral, and Mr. Andrew, in whose surgery it is installed, is making excellent use of it, not only for his own cases but also for those of his colleagues in Wirral.

(4) Statistics

Staff

Including the Principal Dental Officer, the dental staff, expressed in terms of whole-time dental officers, numbered 21 in 1957. This is three less than the number employed in 1956 and means that each dental officer was responsible for nearly 6,000 children which is not a happy state of affairs.

Despite this discouraging position the dental staff have tackled the problem with cheerfulness and a determination to do the best possible

under existing conditions.

Work done

(a) With the exception of one area the normal routine inspections have been carried out during the year and 63% of the school population has been inspected. An emergency clinic was held once a week in the

area (Winsford) which is at present without a dental officer.

- (b) The figures presented in this report are for school children only and do not include work done on behalf of expectant and nursing mothers nor children under the age of five years.
- (c) The number of children inspected and the amount of treatment per dental officer shows an increase on last year's figures.
- (d) In 1956 the average number of children inspected per dental officer was 3,479, whilst in 1957 this number increased to 3,762.
- (e) There were 1,451 children treated per dental officer in 1956 compared with 1,509 in 1957. Attendances for treatment rose from 2,344 in 1956, to 2,541 in 1957.
- (f) The number of fillings inserted in teeth increased from 1,923 fillings in 1,435 teeth in 1956, to 1,985 fillings in 1,639 teeth in 1957, per dental officer.
- (g) For the first time in many years the extraction figures are greater than those for fillings, the figures for 1956 and 1957 being respectively 1,831 and 2,116 per dental officer.
- (h) Expressed as operations per 100 children the foregoing figures show that 128 fillings per 100 children were inserted during 1956 compared with 134 fillings per 100 children in 1957 and 124 teeth per 100 children were removed in 1956 compared with 140 per 100 children in 1957.

The increase of extractions over fillings is inevitable as routine inspections drop behind and more sessions are spent in relieving urgent emergency cases of painful conditions.

(5) Orthodontic and Other Treatments

- (a) It is satisfactory to note that some time has been found for the specialised forms of dental treatment. In all 1,822 attendances were made by children for orthodontic treatment to clinics in the county. A further 178 children were referred for particularly specialised advice to dental hospitals.
- (b) Crowns fitted numbered 24 and 144 X-ray photographs were taken during the year.
- (c) Artificial dentures were fitted to 200 children, an increase of 14 from 1956 when the number was 186. The increase gives me no satisfaction to report.

(6) Holiday appointments

The number of dental appointments which were kept during the school holidays in 1957 showed a considerable rise. In 1956 appointments kept were 58% of those made. In 1957 the number increased to 65%. The very inclement weather which was experienced throughout the school holidays may have had much to do with this rise.

School Buildings

The following major works were completed or in progress during 1957. In addition to these works a large number of minor works of alterations, additions and improvements were carried out as well as the normal maintenance work to schools throughout the County:

WORKS COMPLETED

New Schools

Congleton Grammar School for Girls
Eastham Junior School
Ellesmere Port Stanney Secondary School
Grappenhall Hall Special School
Great Sutton Junior School
Lymm Grammar School
Mid-Cheshire Technical College
Neston Secondary School
North-Cheshire Technical College
Northwich Grammar School for Girls
Stalybridge Primary School
Shavington Secondary School
Tarporley Secondary School

Extensions and Alterations

Cheadle Broadway Secondary School Helsby Grammar Schools Marple Secondary School Nantwich & Acton Grammar School

IN COURSE OF ERECTION

New Schools

Barnton Secondary School
Christleton Secondary School
Crewe Grammar School for Girls
Crewe Secondary School for Girls
Ellesmere Port Grammar School
Macclesfield Secondary School for Boys
Marple Primary School
Huntington Primary School
Partington Primary School
Runcorn Secondary School

Extensions and Alterations

Altrincham Wellington Road Secondary Schools Bredbury Secondary School Bebington Secondary School Crewe County Training College Hyde Flowery Field Secondary School
Lymm Controlled Grammar School
Macclesfield High School for Girls
Poynton Primary School
Sale Moor Secondary School
Sale County Grammar School for Girls
Tattenhall Secondary School
West Kirby County Grammar School for Girls
Winsford Verdin Grammar School
Wistaston Primary School

SPECIAL SERVICES REPORTS

Ear, Nose and Throat Service.

(from Mr. E. Innes).

There is not much to note as regards this Speciality last year.

The waiting time for removal of tonsils and adenoids was about the same as the previous year. This is probably because a balance has been reached between the cases placed on the waiting list and those admitted to hospital.

Those cases which merited early admission were given priority.

The question of priority admission always brings the risk of complaints from the parents of the other children, who do not understand why the priority cases were admitted early. Happily there has been little trouble as regards this so far.

It is gratifying to see the waiting list in the Dukinfield, Hyde and Stalybridge areas being reduced.

I think that the rather uneconomic method of admitting these children to Macclesfield has been well worth while as many of them urgently required treatment.

The number of cases of ear infection, both acute and chronic, was about the same as the previous year but there was an increase in the number of cases of partial deafness seen.

I think the reason for this is that the teachers now report cases which they suspect to be deaf sooner than they used to do.

There is nothing to report in the other aspects of the Speciality.

ATTENDANCES AT E.N.T. CLINICS, 1957

Alsager .		 	40	Hazel Grove		 12
Cheadle		 	43	Macclesfield		 33
Congleton .		 	19	Northwich		 60
Crewe		 *******	39	Poynton		 28
Dukinfield .		 	87	Sandbach		 61
Ellesmere Po	ort	 	59	Winsford	********	 28

Ophthalmic Service

(from Dr. A. Holmes-Smith).

The end of this year marks a period of ten years since your Committee appointed their Ophthalmologist-originally on a full time basis. It is, perhaps, a convenient time to review the progress of the Ophthalmic clinics in the County.

One of your Ophthalmologist's early tasks was to advise upon the design of a simple but inexpensive test-type cabinet for use in the clinics. The result of this is that the ophthalmic examination records of the various clinics are now comparable, having been made with similar apparatus regardless of the clinic in which the patient is examined. This is most useful at the present day when changes of abode are common.

A new record card which matches the general health record of the pupil has also been devised and is of adequate size to contain all the details of a patient's ophthalmic treatment during his school career. With this has gone a steady increase in the co-ordination of the work of the clinics with that of the General Practitioner—this is now reflected in the growing number of patients who attend your Ophthalmologist's hospital clinics after leaving school—thus achieving continuity of treatment.

Your committee has also in this period agreed to provide splinterless lenses at no added expense to the parent in those cases in which the Ophthalmologist considers this feature desirable for the safety of the eyes—i.e. in certain patients who need to wear glasses constantlys This measure not only results in patients wearing their glasses ae advised but relieves the anxiety which many patients feel about damage to the eyes from the breakage of lenses. This is fortunately a rart occurrence but one which will usually result in the loss of the sigh. of any eye so injured.

The far-seeing policy of your Committee in appointing Ophthal-mologists associated directly with hospitals wherever possible has borne fruit in the ease of access of patients to hospital treatment—either operative or medical—and to Orthoptic treatment which is now reasonably available in the greater part of the County. Any patient who requires operation and whose parents desire this, may expect to have operation before leaving school.

During 1957 there has been steady progress of the work of the Ophthalmic Clinics incorporating the items mentioned above. The statistics relating to the work will be found elsewhere in the Report. Your Ophthalmologist would like, in particular, to comment upon the interested help which he has had from the Health Visitors connected with his clinics.

ATTENDANCES AT EYE CLINICS, 1957.

Alsager		 	205	Macclesfield		984
Bollington		 	128	Marple		128
Bredbury		 	209	Middlewich		158
Cheadle		 	208	Nantwich		414
Cheadle Hu	ılme	 	117	Neston		178
0 1.		 	290	New Ferry		811
Disley			10	Northwich		990
Dukinfield		 	505	Poynton		68
Ellesmere F	ort		669	Runcorn	1	582
Frodsham		 	246	Sale		439
Hale	-	 	448	Sandbach		570
Hazel Grov	e	 	106	Stalybridge		328
Heswall		 	318	Stockton Heath		192
Hoole		 	161	Tarporley		130
Hoylake		 	335	Weaverham		224
Hyde		 	393	Wilmslow		177
Knutsford			90	Winsford	-	295
Lymm		 	239			

Paediatric Service

(from Dr. J. D. Allan).

The County Paediatric Service has retained the same basic framework as in previous years, i.e. in each calendar month three consultative clinics for general cases are held, two in Crewe and one in Northwich. These are relatively well attended, particularly Northwich and the service is appreciated by the local practitioners. As in previous years, as far as possible hospital facilities available either in Crewe or Northwich are used to avoid unnecessary expense on transport, but, at the same time, in cases in which special investigation is necessary, admission to the Paediatric Unit in the Macclesfield Hospital is arranged. As in previous years there has been a steady admission to Macclesfield of cases requiring special investigations and the entire service has, therefore, continued to prove invaluable for the child population of Crewe and Northwich; two towns for which there is no Regional Board Paediatric cover.

In addition to the general medical consultative clinics, there is now a smooth-running peripatetic Cerebral Palsy team. This is headed by a Paediatrician and composed thereafter of a specially trained physiotherapist, an occupational therapist, a speech therapist and a School Medical Officer, who is now fully trained in the intellectual estimation of the cerebral palsy child and in the intelligence testing of children under the age of 2. There is, of course, also available the County Ophthalmologist and the E.N.T. Consultant, but in particular a working liaison has been arranged with Professor Ewing of Manchester University in respect of hearing defects in these

children. The specialised knowledge of the School Medical Officer, in my opinion, is proving increasingly valuable as one of the most difficult aspects of the cerebral palsy child in this younger age period This whole team, of course, is sponsored and re-inforced by the County Medical Officer and his deputy and the basic project, as envisaged by our sponsors, has been to diagnose and assess and treat cases of cerebral palsy as early as possible. To this end, in the past year, attempts have been made to increase liaison with and enhance the knowledge of not only the School Medical Officers in general but the Health Visitors in particular. A series of short papers and demonstrations to this end have been given to the County Health Visitors and School Medical Officers.

In addition, during the past year, following on the growing interest in the whole subject of cerebral palsy, there has been a Regional meeting of the Manchester Region under the chairmanship of Professor Gaisford. At this meeting of people in the Manchester region interested, concerned and working on cerebral palsy, cases were demonstrated. The County Paediatrician had the honour of opening the meeting with a paper on "The Paediatrician and cerebral palsy".

In so far as objective factors are concerned, our team operates at Crewe and Macclesfield, Cheadle and Northwich and the Paediatrician holds a consultative clinic once a month at Macclesfield, Cheadle and Northwich and twice a month at Crewe. There is liaison again with the local Orthopaedic Consultant from the point of view of orthopaedic measures necessary for any individual case.

The total number of cases on the register at the time of writing is 34 of which upwards of 65% are under the age of 5 years and of this total number 10, I am glad to say, attend ordinary school. We have found that through the intermediary of the School Medical Officers we have been able to persuade, in several instances, the headmasters and mistresses to take cases to ordinary school, cases which previously would have simply languished at home.

The parents in general undoubtedly greatly appreciate what is being done and the attendance of children is invariably in the region of 100%.

On the first Monday of each month, the ward round tutorial at West Park Hospital for School M.O.'s is held as before.

The only recommendation is that clearly there is still need for better provision in the County for disposal of mentally retarded, ineducable children and probably, in addition, for facilities for convalescence for the child under the age of 2 years.

ATTENDANCES AT PAEDIATRIC CLINICS, 1957.

Crewe, Ludford Street ___ 34 Northwich, Darland House 62 Crewe, Stalbridge Road ___ 45

Orthopaedic Service

The orthopaedic service is the financial responsibility of Regional Hospital Boards under the National Health Service Act. The methods of ascertainment remain the same, children being referred to the surgeons by private doctors, or (with the approval of the private doctor) by School Medical Officers after medical inspection at schools or minor ailment clinics.

ATTENDANCES AT ORTHOPAEDIC CLINICS, 1957

Dukinfield	 	1287	Northwich		480
Ellesmere Port	 *******	199	Runcorn	*******	872
Hyde	 	1018	Stalybridge		1336
New Ferry	 	491	Stockton Heath		517

Children attending for sunlight treatment are the responsibility of the local authority unless referred for it by the specialist. The following were the attendances during 1957 by school children at the clinics specified:—

Dukinfield		1555
Ellesmere Port		19
Hyde	*******	1246
New Ferry		260
Sale		561
Stalybridge		943

Psychological Service.

(from Dr. H. Craig).

This year has been one of the heaviest in the demands made on the Psychological Services, and one cannot escape the impression that the demands would have been even greater were the facilities available. More requests have come from the Magistrates of Juvenile Courts for psychiatric reports than in previous years—there were 38 boys and 5 girls of school age. There are 134 cases on the books and the waiting list at the time of writing stands at 72.

I look forward to the establishment of a first psychiatric team, and in particular to the help that can be given to parents who will have available to them the advice of a trained Psychiatric Social Worker.

The following list gives some indication of the types of problem dealt with during the year, and once again I would take this opportunity of expressing a sincere thank you to all who have co-operated in any way.

- (1) BEHAVIOUR PROBLEMS:—truancy 7, stealing 30, wandering 8, difficult behaviour 15, lying 5, others 2.
- (2) PSYCHOSOMATIC:-enuresis 4, asthma 1, others 6.
- (3) EDUCATIONAL:—backwardness 6, home tuition 1, school

- difficulties 4, suitability for grammar school 2, boarding school 6.
- (4) PERSONALITY DISORDERS:—cruelty and aggression 8, fears and nervousness 6, sex difficulties 5, others 1.
- (5) OTHERS:—suitability for adoption 1, speech difficulties 3, E.S.N. 10, M.D. 11, early psychosis 5.

Torpenhow Open Air School

The school is situated on the hill at Frankby overlooking the estuary of the River Dee.

There is accommodation for 78 pupils suffering from malnutrition, general debility and chest conditions such as asthma, bronchitis, and bronchiectasis. In addition, children who are contacts of cases of open pulmonary tuberculosis are segregated from the source of infection by being admitted to the school. School children of both sexes within the age range of 7-11 years are admitted.

Children suitable for admission are selected by the School Medical Officers at medical inspections and enter Torpenhow Open-Air School initially for a period of six months, this being renewed if found to be necessary. Pupils remain at Torpenhow throughout the year, with the exception of the month of August, and attend the school during the normal school term. During the school holidays a number of recreational activities such as walks, picnics, games and visits to places of interest are organised.

Owing to the general improvement in the health of children and housing conditions generally over the past few years it will be noted that the demand for open-air school education by Cheshire children has declined, and the occupancy of the school during the year has fallen. In consequence of this, a number of local Education Authorities have been given particulars of the school with a view to inviting applications for suitable children residing within their areas. A number of authorities are showing a desire to take up these places and the occuppancy has risen considerably since the end of 1957.

During the year 117 children were admitted and 125 were discharged. They were classified according to their various disabilities as follows:—

		Admissions		Discharges	
		Boys	Girls	Boys	Girls
General Debility	 *******	39	42	52	34
Asthma	 	13	2	17	3
Bronchitis	 	9	- 6	12	6
Bronchiectasis	 	-	-	-	_
Tuberculosis contacts	 	2	1	1	-
Eczema and Asthma	 	1	2	-	-
		64	53	82	43

Mary Dendy School

In January, 1957, 64 boys at the Mary Dendy School were transferred to Grappenhall Hall School and in January, 1958, 34 girls were transferred to Capenhurst Grange School.

Grappenhall Hall School

This school has 100 places for educationally sub-normal boys generally within the I.Q. range of 55–75 aged 8–16 years, who suffer from additional difficulties such as poor environment, maladjustment, delinquent tendencies. In certain cases boys are admitted for a trial period in order to determine whether or not they are educable when this is in doubt.

The progress of the boys is kept under constant review and those who prove to be ineducable are excluded. At the other end of the scale a watch is constantly kept for the boy who makes exceptionally good progress which may justify his re-entry to an ordinary school. As a result of this constant review, there is an indication that the majority of boys remaining at the school to the age of 16 years will be able to take up ordinary employment.

The increased number of places for boys (100 at Grappenhall compared with 67 at the Mary Dendy) was welcomed, and the waiting list was considerably reduced, at least temporarily.

Capenhurst Grange

In January 1958, 34 girls were transferred from the Mary Dendy School. The school accepts the same type of child, and is conducted on the same general lines as Grappenhall Hall.

Unfortunately the number of residential places for educationally sub-normal girls has not materially increased (38 at Capenhurst, compared with 37 at the Mary Dendy), consequently the waiting list remains long.

HANDICAPPED CHILDREN

Numbers Attending Special Schools, 1957.

	BLIND AND PARTIALLY SIGHTED	Boys	Girls	Total
	Birkenhead, Sight Saving Classes	3	-	3
	Chorley Wood, College for the Blind	-	2	2
	Coventry, Exhall Grange School for Partially Sighted Kingwinsford, Sunshine House	1		1
	Liverpool, St. Vincent's School for Catholic Blind	3	2 2	5
	Liverpool, Wavertree School for the Blind	8	2	10
	Old Trafford, Henshaw's Institution for the Blind — Preston, Fulwood School for the Partially Sighted —	5	1 5	10
	Shrewsbury, Condover Hall	1	1	
	Wellington, Overley Hall Sunshine Home	1	1	2 2 2
	Worcester, College for the Blind	2	-	2
1	DEAF AND PARTIALLY DEAF			
	Boston Spa, St. John's School for the Deaf	-	2	2 5
	Burton-on-Trent, Needwood School for the Partially Dear Liverpool, Crown Street Day School for the Deaf	1	5	5
	Manchester, Royal Residential Schools for the Deaf	38	32	70
	Newbury, Donnington Lodge School	_	1	1
	Newbury, Little Abbey School	1	-	1
	Newbury, Mary Hare Grammar School Oxford, St. Edward's School	1	1	1
	Preston, Royal Cross School for the Deaf		1	1
	Southport, Liverpool School for Partially Deaf	12	6	18
	Stoke-on-Trent, North Staffordshire School for the Deaf	2	-	2
	an rates that was a second			
1	DELICATE AND VARIOUS			
	Ashton-under-Lyne, General Hospital	3	3	6
	Aylesbury, Stoke Mandeville	_	3	3
	Bebington, Clatterbridge Hospital	139	159	298
	Birkenhead, St. Catherine's Hospital	1	4	5
	Birkenhead, Thingwall Hospital	1	_	1
	Brecon, The Penoyre House School	1		1
	Darzhulme Park Haspital	1	2	2
	Durham, Dryburn Hospital School	1	_	1
	Frankby, Torpenhow Open-Air School	100	68	168
	Heswall, Cleaver Sanatorium	4	_	4
	Heswall, Royal Liverpool Children's Hospital	9	7	16
	Leasowe, Open-Air School	1	3	4
	Liverpool, Alder Hey Hospital	10	2	12
	Liverpool, The Underlea School	1	-	1
	Macclesfield, West Park Hospital	39	50	89
	Manchester, Booth Hall Hospital	3	8	11
	Manchester Royal Children's Hospital	3	3	6
	Stockport, Longfield Open-Air School	1	-	1
	West Kirby, Children's Convalescent Home Wythenshawe, Hospital School	5	1 9	6
	wythensnawe, Hospital School	19	9	28

Reigate, Salmon's Cross School	ner)	Boys 1 1 1 1 91 2 1 1	Girls 1 34 -2 1 1	Total 2 1 1 34 91 2 1 2 1 1 1 1 1
Lingfield, School for Epileptics	2000000 2000000 2000000 2000000	5 1 1 3	5 1 2	10 1 2 5
Dulwich, Rudolf Memorial School Harmer Hill, Shotton Hall School Hooke, St. Francis School Market Drayton, Cloverley Hall Old Alresford, Alresford Place Stow in the Wold, St. Hilliards Thelwell, Chaireley	**************************************		1 1 - - 1 -	1 1 3 1 1 1 1 1
PHYSICALLY HANDICAPPED Crippled (non-tuberculous) Biddulph, Orthopaedic Hospital Bebington, Clatterbridge Hospital Carshalton, Queen Mary's Hospital Chailey, The Heritage Craft School Harpenden, Elmfield School Hartshill, Orthopaedic Hospital Heswall, Royal Liverpool Children's Hospital Killinghall, Ian Tetley Hospital School Leasowe, Open-Air Hospital Liverpool, Alder Hey Hospital Liverpool, Children's Rest School of R London, Halliwick Cripples' School Manchester, Booth Hall Hospital Marple, Children's Orthopaedic Hospit Mobberley, Margaret Barclay Special S Oswestry, Orthopaedic Hospital Oswestry, Orthopaedic Hospital Oswestry, Derwen Cripples' Training O Oxford, Wingfield Orthopaedic Hospit Salford, Bethesda Home Silverdale, Bleasdale House Special Sc	ecovery al College al hool Hospital ital Special S School Day School	1 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 -2 1 2 1 8 1 2 1 1 5 3 41 - 1	4 39 3 1 2 1 4 2 15 1 4 1 3 11 7 97 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Ashton-under-Lyne, General Hospital		Heart		Boys	Girls	Total
Leasowe, Open-Air Hospital — 1 1 Rainhill, St. Joseph's Heart Hospital School — 2 1 3 Salford, Hope Hospital — — 1 1 West Kirby, Children's Convalescent Home — 1 1 Tuberculous Abergele Sanatorium — 13 6 19 Bebington, Clatterbridge Hospital — 4 1 5 Heswall, Cleaver Sanatorium — 37 37 74 Heswall, Royal Liverpool Children's Hospital — 4 — 4 Leasowe, Open-Air Hospital — — 1 1 Macclesfield, West Park Hospital — — 1 1 Manchester, Booth Hall Hospital — — 1 1 Marple, Children's Orthopaedic Hospital — 1 — 1 Marple, Children's Orthopaedic Hospital — 4 2 6 Wigan, Wrightington Hospital School — 1 — 1 Resident in Boarding Homes and Attending Ordinary Schools, 1957 </td <td>ı</td> <td></td> <td></td> <td>-</td> <td>1</td> <td>1</td>	ı			-	1	1
Rainhill, St. Joseph's Heart Hospital School	ı		-	2	1	
Salford, Hope Hospital	ı			-2	1	
West Kirby, Children's Convalescent Home					1	1
Abergele Sanatorium	ı			_	1	1
Abergele Sanatorium	ı					
Bebington, Clatterbridge Hospital		Tuberculous				
Heswall, Cleaver Sanatorium		Abergele Sanatorium		13	6	19
Heswall, Cleaver Sanatorium	ı	Bebington, Clatterbridge Hospital	*******	4	1	5
Leasowe, Open-Air Hospital	ı			37	37	74
Macclesfield, West Park Hospital	١	Heswall, Royal Liverpool Children's Hospital		4	-	4
Manchester, Booth Hall Hospital	ı	Leasowe, Open-Air Hospital		-	1	1
Manchester, Royal Children's Hospital	١	Macclesfield, West Park Hospital		_	1	1
Marple, Children's Orthopaedic Hospital	ı	Manchester, Booth Hall Hospital		-	1	1
Wigan, Wrightington Hospital School	ı		-	1	-	1
Resident in Boarding Homes and Attending Ordinary Schools, 1957 DIABETIC Frodsham, Fir Bank Home MALADJUSTED MALADJUSTED	ı			4	2	6
Attending Ordinary Schools, 1957 DIABETIC Frodsham, Fir Bank Home DIABETIC Boys Girls Total 2 — 2 MALADJUSTED	ı	Wigan, Wrightington Hospital School	-	1	-	1
Attending Ordinary Schools, 1957 DIABETIC Frodsham, Fir Bank Home DIABETIC Boys Girls Total 2 — 2 MALADJUSTED						
Attending Ordinary Schools, 1957 DIABETIC Frodsham, Fir Bank Home DIABETIC Boys Girls Total 2 — 2 MALADJUSTED		Posident in Poseding Homes	and bea			
Frodsham, Fir Bank Home 2 2 MALADJUSTED						
MALADJUSTED		DIABETIC		Boys	Girls	Total
D III D . W II		Frodsham, Fir Bank Home	-	2	-	2
D III D . W II						
Rochdale Dunsterville Home 1 1		MALADJUSTED				
		Rochdale Dunsterville Home			1	1

MEDICAL INSPECTION RETURNS

Year ended 31st December, 1957

TABLE I

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools

A.—PER	IODIC	MEDI	CAL	INSPECT	IONS	
Age Groups inspected and	Number	of Pup	ils exan	nined in ea	ch	
Entrants			-	100	_	11322
Second Age Group Third Age Group		-	-		-	13307
Tillia Age Gloup		-	-			9558
			Total	CONTRACT NO.	-	34187
Additional Periodic Inspec	ctions			11/11/2014		391
			Grand	Total		34578
			Grand	Total		3+3/0
В.—	OTHER	INS	PECTIO	ONS		
Number of Special Inspec			-	-		6353
Number of Re-Inspections	3				-	11032
			Total			17385
			Total	Car Comment	-	17303

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to require Treatment (excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (1)	For defective vision (ex- cluding squint)	For any of the other conditions recorded in Table III (3)	Total individual pupils (4)
Entrants Second Age Group Third Age Group	129 1052 774	1513 1268 646	1642 2334 1379
Additional Periodic	1955 44	3427 24	5355 65
Grand Total .	1999	3451	5420

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

Age	No. of	Satisf	actory	Unsatisfactory		
Groups Inspected	Pupils Inspected	No.	% of col. 2	No.	% of col. 2	
(1)	(2)	(3)	(4)	(5)	(6)	
Entrants Second Age Group Third Age Group Additional Periodic Inspections	11322 13307 9558 391	11166 13122 9484 390	98.6 98.6 99.2 99.7	156 185 74	1.4 1.4 .8	
Total	34578	34162	98.8	416	1.2	

TABLE II. Infestation with Vermin

(i)	Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	270745
(ii)	Total number of individual pupils found to be infested	3515
iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	1264
iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	114

TABLE III

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1957 A-PERIODIC INSPECTIONS

observation Requiring 26 265 age groups inspected) 224 87 50 2043 170 713 188 426 50 347 363 329 318 192 86 223 (including all other Requiring treatment 189 461 203 85 34 63 809 809 33 33 55 128 54 666 323 363 observation Requiring 41 41 9 50 15 55 54 54 101 Leavers PERIODIC INSPECTIONS Requiring treatment 92 89 52 (5) 106 observation Requiring 38 70167 31 1113 537 51 228 30 131 52 22 392 104 9 Entrants Requiring treatment 26 167 67 3 129 181 38 523 223 23 223 223 111 (a) Development Lymphatic Glands (b) Otitis Media Defect or Disease Nose and Throat Nervous System Psychological— (c) Other -(a) Epilepsy (b) Other Developmental (b) Other -(a) Vision ___ (c) Other -Orthopaedic-(c) Other _ (a) Posture (a) Hearing (a) Hernia Squint (b) Feet (2) Speech Lungs Heart Eyes-9 Ears-Skin Defect Code 15 14 oZ. 7860112 13 3 9

TABLE III. (Continued)

B.—SPECIAL INSPECTIONS

Defect	Defeat on Disease		Special Inspections		
Code No.	Defect or Disease	1	Requiring Treatment	Requiring Observation	
(1)	(2)		(3)	(4)	
4	Skin		54	37	
5	Eyes—a. Vision — b. Squint — c. Other —		706 82 20	463 29 13	
6	Ears—a. Hearing — b. Otitis Media c. Other —	_	26 7 4	57 12 6	
7	Nose and Throat		115	375	
8	Speech		62	66	
9	Lymphatic Glands		5	74	
10	Heart		8	62	
11	Lungs — —		20	98	
12	Developmental— a. Hernia — b. Other —		5 11	10 26	
13	Orthopaedic— a. Posture — b. Feet — c. Other —	**************************************	26 73 46	36 88 44	
14	Nervous system— a. Epilepsy — b. Other —		10 8	8 17	
15	Psychological— a. Development b. Stability —		31 6	155 29	
16	Abdomen		1	3	
17	Other		57	59	

TABLE IV.

Treatment of Pupils attending Maintained Primary and Secondary Schools.

Timary and Secondary Schools.
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 1241 121
Errors of Refraction (including squint) 10153 48
Total 11394 169
Number of pupils for whom spectacles were prescribed — — — — 4102 24
GROUP 2.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.
Number of cases known to
have been treated
Received operative treatment By the Authority Otherwise
(a) for diseases of the ear 6
(b) for adenoids and chronic tonsillitis — — 383
(c) for other nose and throat conditions 9
Received other forms of treatment 1000 7
Total 1000 405
Total number of pupils in schools who are known to have been provided with hearing aids
(a) in 1957
(b) in previous years
GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS.
Number of pupils known to have been treated at clinics or out-patient departments — 477 1016
GROUP 4.—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table II).
Number of cases treated or under treatment

Number of cases treated or under treatment during the year by the Authority

Ringworm-	(i) Sca	alp	 			2
	(ii) Bo	dy	 	-		4
Scabies	-		 _			9
Impetigo			 	-	_	566
Other skin	diseases		 	-	-	1277
				Total		1858

GROUP 5-CHILD GUIDANCE TREATMENT.

No. of pupils treated at Child Guidance Clinics..... 25

GROUP 6-SPEECH THERAPY

B	Total number of sessions at Clinics		1601	
9-	No. of pupils referred for Speech Therapy -		318	
100	No. of pupils treated	_	317	
100	Total attendances at Clinics	-	9223	
	No. of visits to Schools		339	
	No. of children examined at Schools		537	Subject of
300	No. of visits to the homes of pupils		279	
	GROUP 7—OTHER TREATMI	EN	T GIVEN.	
	Miscellaneous Minor Ailments		8592	
	D 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4783	
	Tupis who received biological vaccionation		1700	
	TABLE V			
,	Dental Inspection and Treatment corrier	4	out by the	Authorita
The second second	Dental Inspection and Treatment carried			Authority
(1)	Number of pupils inspected by the Authority Officers—	ys	Dental	
	(a) At Periodic Inspections	_	- 00	70180
	(b) As Specials	_	_	8824
			Total (1)	79004
19			1,0tm (1)	
(2)	Number found to require treatment			46225
The same	Number offered treatment			41508
100	Number actually treated		-	31703
1000		_	-	31703
(5)	Number of attendances made by pupils for including those recorded at heading 11 (53368
(6)	Half-days devoted to : Periodic (School) Insp	pec	tion	714
	Treatment			7984
			T-+-1 (6)	0600
138			Total (6)	8698
(7)	Fillings Permanent Teeth	-	_	35699
12	Temporary Teeth		_	5987
			Total (7)	41686
(8)	Number of teeth filled : Permanent Teeth			28681
	Temporary Teeth			5725
			m . 1 (0)	
		- 3	Total (8)	34406

(9)	Extractions:	Permanent '	Teeth	-	-	13425
		Temporary	Teeth	-	-	31022
				То	tal (9)	44447
(10)	Administration	n of general a	naesthetics fo	r extract	on_	8820
(11)	Orthodontics:					
	(a) Cases con	mmenced dur	ing the year			287
	(b) Cases car	rried forward	from the prev	vious year	r	138
	(c) Cases co	mpleted durin	ng the year			189
	(d) Cases di	scontinued du	iring the year	_		55
	(e) Pupils tr	eated with ap	pliances			213
	(f) Removal	ole appliances	fitted		_	192
	(g) Fixed ap	pliances fitted	i			47
	(h) Total att	endances	-			1822
(12)	Number of pu	pils supplied	with artificial	dentures	3 —	200
(13)	Other Operat	ions: Per	manent Teeth		_	4945
		Ter	nporary Teet	h	-	1467
				Tot	al (13)	6412

TABLE VI.

Number of handicapped pupils examined in School.

Defect	Number of				
Delect	New Cases	Re-exams.			
Blind	1000 - 000	1			
Partially Sighted	14	28			
Deaf	4	7			
Partially Deaf	4	15			
Delicate	17	184			
Diabetic	9	11			
.S.N.	71	375			
Epileptic	19	99			
Maladjusted	2	9			
Physically Handicapped	37	216			
Speech Defect	15	68			

TABLE VII.

Medical Examinations at S	chool C	Clinics		-	_		4130
Number of children exami	ned for	part-ti	ime em	ployme	nt	toman.	1245
Number of Special Reports	s compl	eted on	childr	en exar	nined a	t—	
Schools					152		
School Clinics	*******				324		
Homes of Pupils			-		470		
				_			946

LIST OF SCHOOL CLINICS

	LIST OF S	CHOOL CLINI	CS
Clinic	Address	Type of Clinic	Day held
ALSAGER		Minor Ailment Doctor's Sessions E.N.T. Eye	
ALTRINCHAM	145, Park Road,	Minor Ailment Doctor's Sessions Minor Ailment Doctor's Sessions	Mon. a.m. 2nd and 4th Mon. a.m.
BARNTON	Methodist School Room, Runcorn Road, Barnton.	Minor Ailment	Wed. a.m.
BEBINGTON	Council Offices, Bromborough. 218, Bebington Road, Bebington.	Minor Ailment Doctor's Sessions Speech	
	St. Mark's Parish Room, Grove Street, New Ferry.	Minor Ailment Doctor's Sessions Eye	Mon., Wed., Fri. p.m. Wed. p.m. Fri. a.m. & 3rd Sat. a.m
BOLLINGTON	Wellington Rd., Bollington, Macclesfield.	Minor Ailment Doctor's Sessions E.N.T. Eye	
BREDBURY	Lower Bents Lane, Bredbury.	Minor Ailment Doctor's Sessions Eye	Thurs. a.m. Thurs. a.m. as required 2nd & 5th Thurs. a.m. (whenever necessary)
CHEADLE	Brookfield, Wilmslow Road, Cheadle.	Minor Ailment Doctor's Sessions Eye E.N.T.	Mon. a.m. 1st Mon. a.m. Tues. a.m. Even Months 2nd Mon. p.m. Tues. p.m., Fri. a.m.
CHEADLE HULME	Parish Hall, Church Road, Cheadle Hulme.	Minor Ailment Doctor's Sessions Eye	p.m. Wed. p.m. 4th Wed. p.m. 2nd & 3rd Thurs. a.m.
CONGLETON	Park Street. Congleton.	Minor Ailment Doctor's Sessions E.N.T.	Mon. a.m. 1st, 3rd & 5th. Mon. a.m. Odd Mths. 4th Thurs.
		Eye Speech	a.m. 2nd Wed. p.m. Tues. p.m.

REWE	201 Edleston Rd. Crewe.	,Speech	Mon. & Wed. a.m. & p.m. Tues. a.m.
	Ludford Street, Crewe.	Minor Ailment Doctor's Sessions E.N.T. Eye	Mon. & Wed. a.m. Mon. & Wed. a.m. 3rd Fri. a.m. 1st, 2nd, 4th & 5th Fri. a.m.
A CHEST OF		Paediatric	3rd Fri. p.m.
	Stalbridge Road, Crewe.	Minor Ailment Doctor's Sessions Eye Paediatric	Tues. a.m. 1st & 3rd Tues. a.m. As Required 1st Fri. p.m.
UKINFIELD	King Street, Dukinfield.	Minor Ailment Doctor's Sessions E.N.T. Eye	Mon. to Thurs. a.m. Tues. a.m., Fri. a.m. 4th Mon. p.m. 1st, 2nd & 4th Fri. p.m.
LLESMERE PORT	York Road. Ellesmere Port.	Minor Ailment Doctor's Sessions E.N.T. Eye Speech	Mon. & Thurs. a.m. Thurs. a.m. Alt. Mon. a.m. Fri. a.m. Tues. a.m.
RODSHAM	The Rock Clinic High Street, Frodsham.	Minor Ailment Doctor's Sessions E.N.T.	As Required Odd Mths. 3rd Thurs. a.m. 4th Thurs. a.m.
The second			2nd Wed. a.m.
IALE	Lister House, 9 Broomfield Lane, Hale.	Minor Ailment Doctor's Sessions Eye	Mon. & Fri. p.m., Wed. a.m. 1st & 3rd Fri. p.m. Tues. a.m.
IAZEL GROVE	253, London Rd. Hazel Grove.	Minor Ailment Doctor's Sessions E.N.T.	Tues. a.m. 2nd Tues. a.m. Even Mths. 3rd Thurs. a.m.
		Eye Speech	1st & 4th Thurs, a.m. Mon. a.m.
HESWALL	Telegraph Road, Heswall.	Minor Ailment	Tues. p.m. 1st & 3rd Tues. p.m. 2nd & 4th Fri. p.m. Fri. a.m. & p.m.
OLLING- WORTH	Wedneshaugh Green. Hollingworth.	Minor Ailment	Tues. p.m.
OOLE	55, Hoole Road, Hoole.	Minor Ailment Doctor's Sessions Eye Speech	2nd Wed. p.m. 2nd Wed. p.m. 2nd & 5th Thurs. p.m. Fri. a.m. & p.m.
HOYLAKE	Broomfield, Meols Drive, Hoylake.	Minor Ailment Doctor's Sessions Eye Speech	Fri. a.m. Fri. a.m. 1st & 3rd Fri. p.m. Mon. a.m. & p.m.

HYDE	Reform Club Buildings, Market Place, Hyde.	Minor Ailment Doctor's Sessions Eye (Specialist) Eye (D.M.O.) Speech	Mon., Wed. & Fri. a.m. Mon. a.m. 1st Tues. a.m. 3rd. Fir p.m. 4th Tues. a.m. Wed., Thurs. a.m. & p.m.
KNUTSFORD	County Offices, Bexton Road, Knutsford.	Minor Ailment Doctor's Sessions Eye	Wed. a.m. 2nd & 4th Wed. a.m. 3rd Thurs. p.m.
LITTLE SUTTON	Chester Road, Little Sutton,	Minor Ailment Speech	Fri. a.m. Tues. p.m., Wed. a.m.
LYMM	29. Eagle Brow, Lymm.		Wed. a.m. 2nd & 4th Wed. p.m. 2nd & 4th Wed. p.m. 4th & 5th Thurs. p.m.
MACCLESFIELD	Sanders Square, Macclesfield.	Minor Ailment	Mon. & Thurs. a.m.
	Pierce Street, Macclesfield.	Minor Ailment	1st Mon. p.m. Thurs. p.m. Tues. & Fri. a.m.
		Doctor's Sessions E.N.T. Eye	
	52, Bridge St., Macclesfield.	Speech	p.m., 4th Thurs. a.m Thurs. a.m. & p.m. & Fri. a.m.
MALPAS	Jubilee Hall, Malpas.	Minor Ailment	Thurs. p.m.
MARPLE	Stockport Rd., Marple.	Minor Ailment Doctor's Sessions Eye	Wed. a.m. 2nd Wed. a.m. 3rd Thurs. a.m.
MIDDLEWICH	The Priory, 85, Wheelock St., Middlewich.	Minor Ailment E.N.T.	Mon. a.m. Even Mths. 4th Thurss a.m. 3rd Tues p.m.
NANTWICH	The Dowery, Barker Street, Nantwich.	Minor Ailment Doctor's Sessions Eye	Wed. a.m. 2nd & 4th Mon. a.m. 2nd, 3rd, 4th & 5th Thurs. a.m.
NESTON	Mellock Lane Neston.	Minor Ailment Doctor's Sessions Eye Speech	Tues. a.m. 1st & 3rd Tues. a.m. 1st Wed. a.m. Thurs. a.m.
NORTHWICH	Parkfield, Middlewich Rd., Northwich.	Minor Ailment E.N.T. Eye	Mon., Wed., Fri. & 1st Thurs. a.m. 2nd Fri. a.m. 1st, 2nd & 3rd Thurs. a.m.
	Darland House, Winnington Hill, Northwich.	Minor Ailment Paediatric Speech	Tues. a.m. Fri. p.m. 4th Mon. p.m. Mon. a.m. & p.m. Thurs. a.m.

POYNTON	Park Lane, Poynton.	E.N.T.	1st & 3rd Tues. p.m. Even Mths. 3rd Wed. p.m.
ROMILEY	Leyfield Ave., Romiley.	Eye Minor Ailment	2nd Thurs. p.m. Mon., Wed. & Fri. a.m.
RUNCORN	28, Halton Road Runcorn.	I,Minor Ailment Doctor's Sessions Eye Speech	Mon. & Fri. a.m. 2nd & 4th Fri. a.m. Tues. p.m. Mon. a.m., Wed. a.m & p.m.
ALE	70, Chapel Road, Sale.	Minor Ailment Doctor's Sessions Eye Speech	Wed. a.m. Wed. a.m. Mon. p.m. Wed. a.m., Thurs. p.m.
ANDBACH	Marriott House, Sandbach.		Fri. a.m. 1st & 3rd Fri. a.m. (9-15 a.m. to 10-30 a.m.) 4th Fri. a.m. 2nd, 3rd & 4th Mon. p.m.
TALYBRIDGE	High Street, Stalybridge.	Minor Ailment Doctor's Sessions Eye	Mon., Wed. & Fri. a.m.
TALYBRIDGE	Huddersfield Rd., Millbrook.	Minor Ailment	Mon. & Thurs. a.m.
TOCKTON HEATH	65 Whitefield Rd Stockton Heath.		Mon.—Fri. 9-10 a.m. 2nd Thurs. a.m. if required 4th Tues. p.m. Thurs. a.m. & p.m.
ARPORLEY	Victory Hall, Tarporley.	Minor Ailment Doctor's Sessions Eye	Fri. a.m. 4th Fri. a.m. 1st Thurs. p.m.
ATTENHALL	Barbour Institute Tattenhall.	,Minor Ailment	Wed. a.m.
/EAVERHAM	Church Lane, Weaverham.	Doctor's Sessions	Fri. a.m. 1st & 3rd Fri. a.m. 3rd Fri. p.m.
TLMSLOW	3, Alma Lane. Wilmslow.	Doctor's Sessions E.N.T.	Even Mths. 4th Wed. p.m.
/INSFORD	98, Weaver St., Winsford.	E.N.T. Eye	Mon. p.m. 2nd Wed. p.m. 1st Thursday a.m. 3rd & 4th Thurs. p.m.

