[Report 1945] / School Medical Officer of Health, Cumberland County Council.

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CUMBERLAND COUNTY COUNCIL

EDUCATION COMMITTEE

REPORT

OF THE

SCHOOL MEDICAL OFFICER

KENNETH FRASER

M.D., F.R.S.E., D.P.H., D.T.M.,

ON THE

MEDICAL INSPECTION OF SCHOOL CHILDREN

FOR THE YEAR ENDED

DECEMBER 31st, 1945

CARLISLE:

STEEL BROS. (CARLISLE), LTD., 60 ENGLISH STREET.

—

1946

CUMBERLAND COUNTY COUNCIL

County Health Department,
11 Portland Square,
Carlisle.
February, 1946.

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I beg to present the Annual Report on the Medical Inspection of School Children for the year ended 31st December, 1945. The report is again more or less of a skeleton nature, because we are passing through a period of transition and some time must elapse before a new form of Annual Report, which will provide an adequate picture of the changes taking place or impending in the National Schemes for the Medical Inspection of children—either as School children or as part of the new National Health Services—can be brought into operation.

STAFF.

Staff changes during the year have been as under:—

The Authority lost by the death of Mr. Gordon Towers a very valued officer. The Senior Dental Officer later in this report has referred to the loss sustained by the Dental Service of the County through his tragic and premature death.

Other changes in the staff were few. Two Dental Attendants — Mrs. Robinson and Miss Thompson resigned, and their places were filled by Miss Wilson and Miss Smith.

STATISTICS.

The statistical returns attached do not vary very much from those of preceding years, except that in most sections there is a substantial rise, due to the transfer to the County Council of the School Medical Services in the Boroughs of Workington and Whitehaven as from 1st April, 1945, from which date all figures include Workington and Whitehaven.

The classification of the nutritional standard of the children, as set out in one of the tables at the end of this report, remains practically unchanged from the previous year, some 91 per cent. of the children being classified as normal or above normal in nutrition for their respective age groups.

There is again a fairly substantial increase in the number of children found unclean, whether at the school medical inspection, at the school clinics, or at the "surprise visits" by the School Nurses to the schools, at which every child is examined for cleanliness at a general march past. It is to be remembered that in taking over the School Medical Inspections in Workington and Whitehaven we have added about 6,000 elementary school children to the total school population under review, but the increase in uncleanliness is considerably more than proportionate to this. What the explanation is I do not know. I pointed out last year that the incidence of uncleanliness had risen substantially in the County as a whole, and this is most disturbing, because we have, over a long period of years, had a good record in this respect. I suppose the plain truth is that it is due to war-time conditions and the aftermath of these—less supervision at home, overcrowding, and all the rest of it.

There has, too, been a substantial increase in the number of skin diseases and in the general incidence of minor defects and diseases—again higher than the proportional increase to be expected by the acquisition of a substantial additional school population. Skin diseases are frequently an index of malnutrition even in its mildest form, but, as the figures have shown, there is little or no malnutrition in the County. I fancy that the absence of an adequate supply of fresh fruit, with its Vitamin C. content, from the dietary of the average child may be responsible for this increased incidence in skin diseases, and therefore one would hope that before long this matter may rectify itself. The increased incidence of uncleanliness may also have some bearing on the matter.

Apart from these comments the statistics for the year do not call for any detailed comment. It will be noted that for the first time attendances at School Clinics have risen well over the 20,000 mark.

THE EDUCATION ACT, 1944.

The passing of this Act, to which I made a brief reference in my last Annual Report, has brought about, or will bring about, many important changes in the School Medical Service.

The first of these is that new age groups are to be examined. Children are now to be examined (a) on admission to school (b) at the age of 10 to 11—that is to say the last year in the primary school—and (c) in the last year at the Technical or Secondary School. These changes are I think regrettable so far as this County is concerned—three examinations undertaken compared with the existing routine examinations at the age of 5, 8 and 12 in the Elementary Schools, and on admission to and at the age of 15 in the Secondary Schools. I think it is a pity that the year in which the examination in the Secondary Schools—using this term in its widest sense—is to take place is to be the *last* year in the child's Secondary School life, because it seems to me that there is too big a gap between age 10 and age say 17, and I think it would have been better to have fixed the age group much earlier in the child's Secondary School life so that any defects found might have been appropriately dealt with.

We have hitherto been accustomed to examine children for defects of vision at the age of 8, and obviously this cannot wait until age 10. I am therefore arranging for these examinations to be undertaken at the age of 8, making as it were a special category. Many people think that the examination of a child's eyes should be undertaken at a much earlier age.

Another change not yet established but impending is the institution of a National card for the recording of School Medical Inspections. The idea will I think be generally welcomed. The idea of a standard card is a good one, especially having in mind the transfer of these cards from one area to another, but the draft of the card which is at present on trial in various areas of the country is much more elaborate than the card which has hitherto been in use in this area, and I think in most areas, and the completion of this will take a good deal longer. This will in turn envisage, as I see it, a substantial increase in the staff of the School Medical Service.

New Regulations have been issued with regard to handicapped pupils of all kinds, that is to say children suffering from gross defects of sight and hearing, children seriously crippled, or suffering from sub-normal educational attainments, or suffering from general conditions which may constitute a serious handicap as the child grows up. Such cases have now to be recorded

on a special form and appropriate registers will be kept. The procedure for dealing with the education of sub-normal children—the term mentally defective has now no longer to be employed—has been considerably altered and I think simplified, which will be generally appreciated.

This close interest in seriously handicapped children should prove most valuable. The object is by a combination of treatment, education, and vocational training, adapted to the circumstances of the case, to enable, as far as may be practicable, the child in due course to take his or her place in ordinary economic life. It is a practical example of " helping lame dogs over stiles " and it must not be forgotten that our estimation of the value of handicapped persons in industry is belatedly now being drastically revised. In my Annual Report on the Health Services for 1943 I drew attention to some surprising figures and facts taken from the Annual Report of another County Medical Officer regarding the employment of disabled persons in industry. It may be worth while quoting two short paragraphs:—

" The view that re-settlement of the disabled must be a matter of philanthropy and goodwill is wholly out of date. A large proportion of disabled persons are capable, or can be made capable, of taking their place in industry on normal terms.

" Dr. Ash points out that the Ford Motor Company in the United States of America, at their River Rouge factory, employ up to 10 per cent. of disabled persons. Of these 687 are blind, 80 have one arm only, 12 have had both arms amputated, 91 have only one leg. Altogether nearly 12,000 men in various stages of disability are receiving full pay. None of these men have reason to regard themselves as receiving any favour. The Ford Motor Company makes it distinctly understood that this is neither charity nor altruistic humanitarism. Each one of these workers is expected to give, and does give, full value for his wages."

Recent legislation on the employment of disabled persons, and this new interest in handicapped children, all hangs together. It does not matter one iota whether the handicap is a result of war injury or a civil disability in childhood or adult life. The plain fact is that the State must do everything possible to settle these persons in economic employment, not as an act of

charity but as plain common sense. The regulations provide for collaboration between the School Medical Service and the Ministry of Labour on the settlement of handicapped children in industry on leaving school.

Education Authorities may now by arrangement with private schools provide for the medical inspection and treatment of children attending such schools.

These are the principal changes in procedure. There is however another matter of the first importance. Education Authorities are now responsible, under the provisions of the Act, for the provision of all treatment of children of school age, other than domiciliary. This includes treatment in hospital, and negotiations are at present in progress between the British Hospitals Association and Education Authorities as to the financial basis of the liability of the Authorities.

The question of the treatment of children by general practitioners—other than domiciliary—is another complicated matter which has yet to be cleared up, but I think it well to mention it in passing.

WORKINGTON AND WHITEHAVEN

As noted earlier, as a direct consequence of the Education Act, the County Council on April 1st, 1945, took over among other matters the responsibility for the school medical inspection and treatment of the children in the two Boroughs, and we were glad to welcome to our staff a number of transferred officers. This transfer, representing the school population in a total population of some 50,000, including three school clinics, was quite a substantial addition to the work of the department. The change-over was effected smoothly, and I trust efficiently, and to the satisfaction of all concerned, and I am grateful to my Headquarter's staff and to the transferred Officers for this satisfactory result.

In the Borough of Whitehaven, too, during the year we took over the responsibility for the medical inspection and treatment in the Whitehaven Secondary School, in respect of which private medical arrangements had previously been made. I thought it well to start as it were from scratch, and every child — some 700— was examined at this first official inspection.

SCHOOL MILK.

The number of children in our schools taking milk has again fallen substantially. This is much to be regretted because it has been proved beyond argument that there is no item so important in the diet of the growing child as milk. The figures are a little bit complicated owing to the intake of the Workington and Whitehaven children, and owing to the re-grouping between primary and secondary schools, but the following table shows, I think, as accurately as possible, the comparison between 1945 and the preceding years.

There are two lines of distribution. A great majority of the children buy their milk under the Milk Marketing Board Scheme. The remainder, when financial circumstances justify this, and if recommended on medical grounds, obtain the milk free.

The free issues are mostly two-thirds of a pint daily. The issues under the Milk Marketing Board purchase scheme are mostly one-third of a pint daily.

The figures referred to are as under:—

PRIMARY SCHOOLS

	1941	1942	1943	1944	1945
(a) Free (2/3rds pint)	2590	2293	414	1116	1932
(b) By Purchase ..... (M.M.B. Scheme).	11987	11271	11290	9780	8333
Totals	14577	13564	11704	10896	10265

GRAMMAR SCHOOLS.

	1941	1942	1943	1944	1945
(a) Free (2/3rds pint)	28	20	10	11	18
(b) By Purchase ..... (M.M.B. Scheme).	2572	2625	2464	1658	1332
Totals	2600	2645	2474	1669	1350

The above table shows the very great reduction in the numbers of children taking milk over the last 5 years. The total as will be noted, including both Primary and Grammar Schools, has fallen from 17,177 in 1941 to 11,615 in 1945. That is a tremendous and regrettable fall in what most of us regard as a vital service.

There are, of course, various explanations. The first is the difficulties of labour and supplies. Producers are less willing now to take over school milk contracts than they were before the war or in the early years of the war. There are labour and petrol difficulties, and bottles are unobtainable. This, in its turn, requires a great increase in the quantity of milk delivered in bulk, which throws heavy additional work on the Head Teachers.

Another factor which may have had a considerable bearing is the change-over some years ago to what in effect was a means test, whereby children requiring milk on medical grounds no longer obtain it free without consideration of the financial circumstances. The third factor possibly is the start of canteen meals. Children having an adequate mid-day meal at school may perhaps be less inclined to take milk, either with the meal or at some other part of the school day. Nevertheless, I do not put much on this point, because the numbers had shown a large fall before canteen meals came into the picture.

However it may be, all these and no doubt other factors are playing a part in reducing the daily consumption of milk in our schools. Equally no doubt the effect of these factors will be felt in other areas. What is not easy to understand is why, in the return issued by the Ministry of Education in February, 1945, Cumberland—one of the largest milk producing areas in the country—was almost at the bottom of the list of English counties in this matter of milk consumption in schools. Actually, of the 48 English counties, there were only five showing lower figures than we did. With this further fall in mind to which I have referred, it is quite likely that in the next return we may actually be at the bottom of the list. It will be noted that the fall has been almost parallel in primary and secondary schools.

In order that we may have a basis of comparison for future years it is necessary to place on record the figures for the whole county, including Workington and Whitehaven, which are excluded from the above table, and including all schools in the county both primary and secondary.

The figures in this connection for future reference are:—

(a) Free	2,881
(b) By Purchase (M.M.B. Scheme)	13,299
	16,180

SCHOOL MEALS.

The hopes expressed last year of steady expansion in the provision of meals have in many directions been fulfilled.

With the Penrith Central Kitchen serving a very wide area, including many small schools, and the opening of the Flimby Central Kitchen the number of school departments served has risen to 146. This number, however, includes the schools in the Workington and Whitehaven Boroughs which did not appear in last year's report. Even excluding these schools there is a notable advance in the number of school departments being served with meals, an advance which is not wholly demonstrated in the grand total served, since so many of the schools have been remote one or two teacher departments.

The heavy load on the former Workington Kitchen at Stainburn which has caused some deterioration in the quality of food has now been eased by the promised opening of the Flimby Central Kitchen which is not only covering the schools in its area, but feeding several of the Workington School departments. One of the immediate problems will be to re-construct the Stainburn Kitchen so that its standards of equipment and food production come into line with those in the more recent Central Kitchens. A like problem is also to be met at Hensingham Kitchen which it is proposed to take over from the Whitehaven Corporation.

Two large schemes are in an advanced state of preparation and in each case an important gap will be filled. Within the next few months Egremont will be in operation with a capacity of some 400 meals daily, and this will be followed at an early date by Wigton which will not only cater for the children in the town

but is intended to distribute food through the thinly populated Wigton countryside.

During the year under review self-contained canteens have been opened at Burgh-by-Sands, Bewcastle, Borrowdale, Legburthwaite, Stapleton and Irton. Dining centres arranged round Penrith, Flimby, and Whitehaven have been much more numerous, and the Ministry of Works has in hand proposals for canteens at Threlkeld, Parton, Distington, Dalston, Eaglesfield, Cotehill and Millom. This last proposal will replace the present arrangement whereby our school meals are supplied from the British Restaurant in Millom.

The benefit to the children taking school meals is indisputable and always a matter of comment after the first few weeks. In general, support for a canteen tends to grow, even if the start has been somewhat hesitant, although there is, of course, some seasonal usage of the service. The present position in the county is shown by the following table, from which it can be seen that on a check recently taken for returns to the Ministry, the total number of meals served was 10,483 for a school attendance of 26,144; this gives a county percentage (all schools) of 40, which is a substantial advance upon last year's check.

To progress in this matter in a rural county with many small schools, is a much greater problem than in urban areas. Arrangements have been made during the year which cover 33 new schools or departments representing some 1,600 additional children taking school dinners. This represents real progress in the face of difficulties which will be generally understood. The lists which follow give a complete picture of the position to date.

Gaps still exist in important places such as Brampton and Aspatria, and during the coming year the temporary arrangements made in Keswick to meet war time needs will break down. In each case building or conversion of buildings will be necessary, and the completion of schemes will depend upon the availability of building materials and labour.

SCHOOL MEALS BEING SERVED ON WEDNESDAY, 13TH FEBRUARY, 1946.

Names of School	Total served.
Braithwaite self-contained canteen	54
Allhallows self-contained canteen	78
Alston Temporary Council dining centre	26
Alston High self-contained canteen	69
Arlecdon Council dining centre	118
Frizington Council dining centre	92
„ St. Joseph's R.C. dining centre	59
„ St. Paul's Voluntary dining centre ...	103
Longtown Council self-contained canteen	92
Longtown Infants' self-contained canteen	83
Bewcastle Bailey self-contained canteen	37
Borrowdale self-contained canteen	44
Bowness self-contained canteen	108
Brigham (Cockermouth) Voluntary dining centre ...	51
Broughton Council dining centre	73
Broughton Council Infants' dining centre	28
Burgh-by-Sands self-contained canteen	83
Cleator St. Mary's R.C. dining centre	54
Cleator Council dining centre	119
Cleator Moor Montreal Voluntary dining centre ...	118
Cleator Moor Montreal Voluntary Infants' dining centre	39
Cleator Moor St. Patrick's R.C. Boys' dining centre	50
Cleator Moor St. Patrick's R.C. Girls' dining centre	62
Cleator Moor St. Patrick's R.C. Infants' dining centre	37
Cockermouth All Saints' Voluntary dining centre ...	59
Cockermouth Fairfield Boys' dining centre	49
Cockermouth Fairfield Girls' dining centre	29
Cockermouth Fairfield Infants' dining centre ...	17
Cockermouth St. Joseph's R.C. dining centre ...	19
Crosby National self-contained canteen	66
Dacre dining centre	22
Newbiggin dining centre	23
Stainton dining centre	15
Ivegill self-contained canteen	52
Distington Mixed dining centre	122
Distington Infants' dining centre	90
Dyon dining centre	63
Dovenby self-contained canteen	36
Bigrigg dining centre	42
Moor Row self-contained canteen	114
Ennerdale dining centre	23
Flimby Council dining centre	65
Flimby Girls' dining centre	41
Flimby Infants' dining centre	45
Maughanby dining centre	9
Gosforth self-contained canteen	81
Great Clifton dining centre	23
Great Salkeld dining centre	18
Greystoke dining centre	42
Lowca Council dining centre	92
Holme St. Cuthbert dining centre	50
Silloth Mixed self-contained canteen	184
Silloth Infants' self-contained canteen	60
Penruddock dining centre	34

Names of School	Total served
Irton self-contained canteen	15
Isel dining centre	27
Keswick, Brigham dining centre	54
Keswick, Crosthwaite Senior Mixed dining centre	42
Keswick, Crosthwaite Junior Mixed dining centre	35
Keswick, St. John's Girls' dining centre	35
Keswick, St. John's Junior dining centre	14
Kirkoswald dining centre	42
Lamplugh Council dining centre	41
Lamplugh Parochial dining centre	47
Langwathby dining centre	14
Lazonby dining centre	45
Little Clifton dining centre	73
Maryport Council Mixed dining centre	54
Maryport Council Infants' dining centre	15
Maryport National Voluntary Mixed dining centre	100
Maryport Christ Church Voluntary Infants' dining centre	14
Maryport Nursery dining centre	37
Maryport R.C. dining centre	69
Netherton dining centre	41
Matterdale dining centre	22
Millom Lapstone Road Boys' dining centre	68
Millom Lapstone Road Girls' dining centre	61
Millom Lapstone Road Infants' dining centre	68
Millom St. James' R.C. dining centre	24
Millom Thwaites dining centre	40
Moresby dining centre	90
Muncaster dining centre	30
Parton Girls' and Infants' dining centre	119
Parton Boys' dining centre	75
Penrith National Boys' dining centre	101
Penrith National Girls' dining centre	63
Penrith National Infants' dining centre	40
Penrith Boys' Council dining centre	134
Penrith Brunswick Road Girls' dining centre	140
Penrith Brunswick Road Infants' dining centre	77
Penrith Robinson's Infants' dining centre	39
Penrith St. Catherine's R.C. dining centre	40
Plumpton dining centre	6
Legburthwaite self-contained canteen	14
St. John's-in-the-Vale dining centre	5
Skelton dining centre	35
Waberthwaite self-contained canteen	48
Watermillock dining centre	8
Stapleton self-contained canteen	33
WORKINGTON—	
Senior Boys' Guard Street dining centre	84
Lawrence Street Mixed dining centre	45
Lawrence Street Infants' dining centre	37
Northside dining centre	65
St. John's Boys' dining centre	78
St. John's Girls' dining centre	26
St. John's Infants' dining centre	39
St. Michael's Boys' dining centre	24
St. Michael's Girls' dining centre	47

Names of School	Total served
St. Michael's Infants' dining centre	54
St. Patrick's Juniors' dining centre	48
St. Patrick's Infants' dining centre	43
Siddick dining centre	25
Westfield Junior Mixed dining centre	86
Westfield Infants' dining centre	83
St. Joseph's Senior Mixed dining centre	135
St. Joseph's Infants' dining centre	20
Central Boys' dining centre	110
Central Girls' dining centre	94
Harrington Church Road dining centre	76
Harrington Infants' dining centre	46
Harrington St. Mary's Infants' and Juniors' dining centre	41
Casson Road Nursery included in Westfield Infants' dining centre	—
Victoria Senior Girls' dining centre	87
Victoria Infants' dining centre	51

WHITEHAVEN—

St. Mary's dining centre	81
St. Gregory and Patrick Infants' self-contained canteen	77
St. Begh's Senior self-contained canteen	165
St. Begh's Junior self-contained canteen	220
Crosthwaite Memorial dining centre	99
Monkwray dining centre	209
Irish Street Central dining centre	111
Irish Street Infants' self-contained canteen	52
Kells Infants' dining centre	148
Kells Central Senior Mixed self-contained canteen ...	126
St. James' Junior dining centre	87
St. James' Infants' dining centre	24
Bransty Junior and Infants' self-contained canteen ...	156
Hensingham Infants dining centre	61

GRAMMAR SCHOOLS—

Alston Samuel King's self-contained canteen ...	95
Cockermouth self-contained canteen	325
Brampton self-contained canteen	130
Keswick self-contained canteen	97
Millom self-contained canteen	126
Nelson School, Wigton self-contained canteen ...	206
Penrith self-contained canteen	229
Whitehaven self-contained canteen	416
Thomlinson Girls', Wigton self-contained canteen ...	163
Workington Grammar self-contained canteen ...	109
Cumberland Technical College self-contained canteen	114

DIPHTHERIA IMMUNISATION

The number of children of *school* age immunised during the year amounted to almost exactly 1,000. The percentage of immunised children in the county schools was estimated in the returns of the District Medical Officers of Health as 85 per cent.

I am,

Your obedient Servant,

KENNETH FRASER,

School Medical Officer.

Children attending elementary schools were examined as under:—

Routine Inspections by age groups—	
Entrants	3181
Second Age Group	2808
Third Age Group	2354
Total ...	8343
Special Inspections and re-inspections	15583
Total of examinations ...	23926

TABLE A.

SUMMARY OF DEFECTS FOUND, AND OF TREATMENT UNDERTAKEN UNDER THE SCHEMES OF THE EDUCATION AUTHORITY.

Condition.	Referred for Treatment.	Treated.
Defects of Nutrition	159	159
External Eye Diseases	215	171
Skin Diseases	2325	2165
Defective Vision and Squint ...	1117	1052
Tonsils and Adenoids	967	678
Other Ear, Nose and Throat Conditions	238	219
Enlarged Cervical Glands ...	68	56
Heart Disease and Anæmia ...	161	127
Bronchitis and other Chest Conditions	209	189
T.B. Pulmonary (Definite) ...	24	24
T.B. (Suspected)	61	61
T.B. (Non-Pulmonary)	50	50
Nervous Diseases	41	33
Uncleanliness	1564	1564
Other Defects and Diseases ...	1943	1746
	9142	8294

Orthopædic and Dental Defects are not included in the above figures,

TABLE B.

SHOWING THE WORK CARRIED OUT BY THE NURSING STAFF IN FOLLOWING UP DEFECTS.

Condition.	No. of Cases.	No. of Visits Paid.
Poor Nutrition	26	103
Malnutrition	2	5
Uncleanliness	106	210
Skin Diseases	38	87
Eye Conditions	10	45
Ear Conditions	10	14
Nose and Throat Conditions	658	1243
Heart and Circulation	30	84
Lungs (Non-tubercular)	11	26
Lungs (Tubercular)	4	18
Pre-Tubercular	1	4
Other tubercular conditions	—	—
Deformities	—	—
Glands	4	12
General cases	57	165
	957	2016

TABLE C.

SHOWING THE ATTENDANCES AT INDIVIDUAL SCHOOL CLINICS.

Clinic.	New Cases.	All Cases. Attendances.
Alston	27	73
Penrith	434	1866
Cockermouth	608	2056
Millom	483	2236
Egremont	261	826
Brampton	194	1008
Carlisle	172	410
Whitehaven	47	107
Wigton	468	1374
Maryport	338	1141
Frizington	385	1802
Cleator Moor	551	2070
Workington	873	3110
Whitehaven (Sandhills Lane)	444	1399
Whitehaven (Woodhouse)	375	2047
	5660	21525

TABLE D.

SHOWING THE DEFECTS TREATED AT THE SCHOOL CLINICS.

Condition for which Child Attended	New Cases	No. of Attendances All Cases
Malnutrition	36	267
Uncleanliness	224	1331
Skin Diseases	2144	9307
Ear Diseases	200	1472
Eye Diseases	523	1427
Nose and Throat Conditions ...	299	517
Enlarged Glands (Non-tubercular)	37	111
Heart and Circulation	94	402
Lungs (Tubercular or suspected)	68	357
Lungs (Non-tubercular) ...	115	436
Tuberculosis (Non - Pulmonary)	25	217
Nervous System	27	87
Other Defects and Diseases ...	1805	5446
Deformities	39	114
Goitre	1	3
Defective Speech	4	5
Dental	19	26
	5660	21525

TABLE E.

SHOWING THE ORTHOPAEDIC TREATMENT UNDERTAKEN DURING THE YEAR.

Number on Aftercare Register at 1/1/45 ...	331
New Cases during 1945 (including transfers from Workington and Whitehaven)	273
Cases re-notified after discharge previously ...	16
Number removed from Register	153
Number on Register 31/12/45	467
Attendances at Aftercare Clinics	424
Seen by Consulting Surgeon (not included in above)	12
Attendances at Intermediate Clinics	700
Home Visits	270

Plasters applied at Intermediate Clinics by Aftercare Sister	130
Plasters applied at homes by Aftercare Sister ...	20
Appliances supplied and renewed	70
Surgical Clogs and Boots	14
Cases in Ethel Hedley Hospital, Windermere, 1/1/45, and admissions during 1945	59
Discharges from Ethel Hedley Hospital, Windermere	41
Awaiting admission to Hospital, 31/12/45 ...	18
X-ray Examinations during 1945	55
Awaiting X-ray	4

TABLE F.

SHOWING THE VARIETIES OF ORTHOPAEDIC CONDITIONS DEALT WITH.

Flat Foot	145
T.B. Joints	48
Congenital Defects	33
Injuries (including Fractures)	33
Poliomyelitis	34
Scoliosis, Kyphosis and Lordosis	21
Rickets	38
Club Foot	34
Osteomyelitis	19
Hemiplegia	26
Congenital Dislocation of Hip	20
Torticollis	12
Pseudo Coxalgia	14
Poor Posture	22
Hallux Valgus and Deformed Toes	17
Paralysis, Birth Injuries, etc.	8
Hydrocephalus	3
Exostosis	10
Amputation	2
Myositis Ossificans	1
Slipped Epiphysis	1
Arthritis	3
Progressive Muscular Distrophy	2
Achondroplasia	2
Pathological Dislocation of Hip	1
Schlatters Disease	2
Other Conditions	69
	620

TABLE G.

SHOWING THE POSITION OF DENTAL INSPECTION AND TREATMENT.

(a) ELEMENTARY SCHOOLS.

(1) Number of Children inspected by the Dentist.

(a) Routine Age Groups:—

Age	5	6	7	8	9	10	11	12	13	14	Total
Number	1395	1389	1778	1735	1908	1732	1708	1531	1542	835	1555

(b) Specials 161

(c) Total (Routine and Specials) 1571

(2) Number found to require treatment 806

(3) Number actually treated 747

(4) Attendances made by children for treatment 1530

(5) Half-days devoted to:—

Inspection	...	170
Treatment	...	1740
		1910

(6) Fillings:—

Permanent Teeth	...	5343
Temporary Teeth	...	—
Total	...	5343

(7) Extractions:—

Permanent Teeth	...	2209
Temporary Teeth	...	10083
Total	...	12292

(8) Administration of anæsthetics for extractions:—

Local	... ...	647
General	... ...	220
Total	... ...	867

(9) Other Operations:—

Permanent Teeth	...	246
Temporary Teeth	...	75
Total	...	321

(10) Orthodontic appliances ... 9

(11) Dentures 2

(12) X-Ray Examinations ... 13

(b) SECONDARY SCHOOLS.

Number of Children Inspected	... ...	668
Number of Children Treated	... ...	800
Number of Fillings:—		
Permanent Teeth	...	1208
Number of Extractions:—		
Permanent Teeth	...	480
Temporary Teeth	...	72
Other Operations:—		
Permanent Teeth	...	703
Temporary Teeth	...	72

Anæsthetics:—

Local	... ...	518
General	... ...	54

Attendances made by Children for Treatment ... 248

Orthodontic Appliances ... 12

Dentures 15

X-Ray Examinations 26

The Senior Dental Officer makes the following comments on the School Dental Service:—

"During the year, the Education Act came into force, resulting in the Dental Services of the two Boroughs of Workington and Whitehaven being taken over by the County, the respective officers, Mr. Askew and Mr. Hopkin, with their Dental Attendants, Mrs. Parker and Miss Field, being added to the County staff.

"The unfortunate accident which resulted in the untimely death of Mr. A. G. Towers necessitated an alteration in districts owing to the impossibility of replacing Mr. Towers, Mr. Hopkin taking over part of the County area in addition to Whitehaven Borough, while other areas were adjusted to cover the whole.

"From the statistical point of view, results are not particularly good, but the year's work has been interfered with in many ways, not the least being the adjustments mentioned above. In addition the increased number of holidays, including the various V-days, has resulted in serious loss of time. It is not sufficiently realised how much difficulty is experienced in arranging clinics for the first day after even a short holiday, and it would be much better, from the clinic point of view at least if school holidays were for longer periods at less frequent intervals.

"It is to be hoped that the more rapid progress of demobilisation will make it possible to bring the staff up to full strength, so that a definite constructive programme may proceed.

"I wish to say how much I appreciate the helpful attitude of the former Workington and Whitehaven staff which has greatly facilitated the absorbing of their areas into the County scheme.

"I should like to add also, how much I have been impressed while working in his district during the year with the quality of the late Mr. Towers' conservative work. His standard in this respect was remarkably high, and I have had tributes from many people, especially Head Teachers of those schools in which he carried out treatment. His loss is much regretted by all concerned."

TABLE H.

SHOWING THE POSITION IN REGARD TO MEDICAL INSPECTION AND TREATMENT IN SECONDARY SCHOOLS.

Total Number of County Pupils attending these Schools	3731
NUMBER OF CHILDREN EXAMINED	
Entrants	840
(Of these 481 were free from defects)	
15-year-olds	595
(Of these 342 were free from defects)	
Specials	1176
	2611

NUTRITIONAL SURVEY

	A.	B.	C.	D.
Entrants	223	552	61	4
15-year-olds	273	296	26	—

Defects.	Examined in Current Year:— Defects referred for treatment in previous year. (Routines and Specials).	Found treated or partly Treated	All defects noted in All children at current Medical Inspection R.T.	R.O.
Defective Teeth ...	185	138 ...	251	5
Malnutrition ...	6	4 ...	5	17
Pulmonary Tuberculosis.	—	— ...	—	5
Other Chest Conditions	7	7 ...	6	42
Organic Heart Disease	2	2 ...	3	18
Functional Heart Conditions and Anæmia.	5	5 ...	8	20
Defective Vision ...	118	111 ...	252	386
Squint	7	6 ...	11	18
Defective Hearing ...	4	3 ...	6	11
Tonsils and Adenoids	23	18 ...	40	78
Other Ear, Nose and Throat Conditions.	7	5 ...	8	16
Non - Pulmonary Tuberculosis.	—	— ...	2	11
Spinal and Other Deformities	17	15 ..	33	51
Skin Diseases ...	11	11 ...	20	15
Other Defects and Diseases.	26	23 ...	42	71
Total Defects ...	418	348 ...	687	764

N.B. This return includes the Whitehaven County Secondary School.

TABLE I.

SHOWING THE POSITION IN RESPECT OF MISCELLANEOUS EXAMINATIONS AND TREATMENT, INSTITUTIONAL OR OTHERWISE.

Number of children receiving sanatorium treatment during the year	9
Number of blind or partially blind children in certified schools	5
Number of deaf children in certified schools	16
Number of educationally sub-normal children in certified schools	5
School closures on account of infectious disease ...	—
Number of teachers, pupil teachers, and bursars examined	42

PHYSICAL TRAINING.

I am indebted to the Chief Woman Organiser of Physical Education—Miss Margaret Fraser—for the following condensed report on physical training activities during the year:—

STAFF

"My colleague, Mr. W. S. Gray, Chief Man Organiser, retired in September after many years of enthusiastic service in Cumberland. He carried with him the good wishes of all the County Teachers, and the Education Staff. His successor has not yet been appointed.

FURTHER EDUCATION.

"Classes in Physical Training, Keep Fit, English and Scottish Folk Dancing were held in thirty two centres. Appreciation was shown by the attendance —especially at the Dancing Classes, where students of all ages and sometimes of both sexes, worked happily together.

ORGANISED GAMES.

NETBALL.

"A Cumberland Netball Association was set up at the end of 1944, and a County Team was established. This was proved a stimulus to the playing of Netball, and at the recent Trials an old girl of Braithwaite School was among the selected players.

"The weather last season caused many fixtures to be postponed.

"In North Cumberland, Kingstown School retained the Hugh Jackson Cup for the third successive year by defeating Scotby in the final of the League.

"In West Cumberland, Arlecdon Girls became champions by their victory over St. Begh's in the final of the Whitehaven District Schools League.

"FRIZINGTON DISTRICT SCHOOLS TOURNAMENT was also won by Arlecdon after a good final match against Egremont Central Girls.

"COCKERMOUTH DISTRICT SCHOOLS TOURNAMENT.—Great Broughton defeated All Saints', last year's winners.

"The Tournament arranged for Keswick and District Schools was postponed three times on account of the weather, and had to be finally abandoned.

HOCKEY.

"Hockey at present is mainly played by Secondary Schools. On March 24th a Hockey Tournament was held at Whitehaven County Secondary School, in which eight teams took part from : Keswick, Cockermouth, Millom, Workington, Whitehaven (2 teams), Wigton and Carlisle. Whitehaven 1st team and Carlisle met in the final match which was won by Carlisle and County High School for Girls.

FOOTBALL.

"Despite many difficulties, School-boy football continued to function during the war years through local Leagues, and last season Workington Central School was successful in the County Shield Competition for the first time, while the Moss Shield was won by Whitehaven Central Boys' School.

"A high proportion of players from West Cumberland were selected for the County team.

CRICKET.

"A number of inter-school cricket matches were played during the summer, particularly in North Cumberland—in the West of the County, Cricket is hampered by lack of good pitches.

SPORTS.

"Keswick and District School Sports were held on June 27th. This Association deserves great praise for

the way in which they have so successfully organised these sports without a break for many years.

" Allhallows, Bowness-on-Solway, Broughton and other Schools arranged Sports Afternoons for their own scholars.

SWIMMING.

" Regular swimming instruction was organised for 1,380 boys and girls during 1945, and 402 County Swimming Certificates, 140 of which were First Class, were gained.

" Swimming instruction at Whitehaven and Workington Baths for the children of Maryport and Whitehaven Schools started again on 4th June, after a lapse of three years, owing to transport restrictions.

" At Wigton Baths the children were able to swim at least a length or a width by the end of the season.

" At Eamont Pool, Penrith, and at Derwentwater Lake, floods and heavy rain caused disappointing interruptions, and at Hunsonby Open Air Bath, where Hunsonby and Langwathby children were instructed, no examination was possible, owing to water difficulties.

" Use was made by Country Schools of any stream or stretch of water in the vicinity, and Legburthwaite children learnt to swim in St. John's Beck.

FOLK DANCING.

" A second week-end Refresher Course, held by the Cumberland Branch of the English Folk Dance and Song Society in Carlisle on March 16th and 17th, was attended by a good number of County Teachers.

YOUTH SERVICES.

" Physical Training and Dancing classes were held in some Clubs during the winter, and in the summer outdoor activities were generally enjoyed. The Swimming Classes at Carlisle Baths were attended by members of ten Mixed Clubs. Six Awards of Merit and Six Bronze Medallions were gained. The season finished with a Swimming Gala where the Cubs competed for ' points.'

" North Cumberland Youth Club Sports Association organised a Netball Tournament during the summer

holidays, which was won by Warwick Bridge. This Committee also organised Sports at Scotby on September 15th. The weather was unfavourable, but it did not damp the ardour of the competitors and the events were well contested, particularly the Half Mile Race.

" A Netball Tournament for Youth Clubs and Old Girls' Teams at Frizington in July attracted an entry of twelve teams, but owing to the weather it had to be postponed three times, before it finally took place on 26th July, when Arlecdon A. Team defeated Cleator Old Timers in the final match by 14—7 goals.

" Miss Sutton reports that Youth Groups at Cockermouth and Keswick attended a course of European Folk Songs and Dances in the summer, which concluded with an open air demonstration in the grounds of the Keswick Hotel, when 60 girls took part.

CAMPS.

" Week-end Camps arranged by the T.C.G. were held at Allonby throughout the summer, and also at St. Bees in August.

A.T.C.

" Amalgamations have been effected at Carlisle and in West Cumberland. Physical Training and sporting activities play an important part in this training."

MEDICAL INSPECTION AND TREATMENT RETURNS

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC ELEMENTARY SCHOOLS.

YEAR ENDED 31st DECEMBER, 1945.

(a) Routine Medical Inspections:—	
(1) No. of Inspections:	
Entrants	3181
Second Age Group	2808
Third Age Group	2354
Total	8343
(2) No. of other Routine Inspections	Nil
Grand Total	8343
(b) Other Inspections:	
No. of Special Inspections and Re-inspections ...	15583

TABLE II.

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Number of Children Inspected.	A. (Excellent) No.	A. Per cent.	B. (Normal) No.	B. Per cent.	C. (Slightly subnormal) No.	C. Per cent.	D. (Bad) No.	D. Per cent.
8343	1805	21.64	5757	69.00	757	9.07	24	0.29

TABLE III.

GROUP I.—TREATMENT OF MINOR AILMENTS (EXCLUDING UNCLEANLINESS).

Total Number of Defects treated or under treatment during the year under the Authority's Scheme ...	4888

GROUP II.—TREATMENT OF DEFECTIVE VISION AND SQUINT.

	Under the Authority's Scheme.
Errors of Refraction (including squint)	997
Other defects or disease of the eyes (excluding those recorded in Group I)	55
Total	1052
No. of Children for whom spectacles were	
(a) Prescribed	948
(b) Obtained	737

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

	Under the Authorities Scheme.
Received Operative Treatment	948
Received Other Forms of Treatment	50
Total Number Treated ...	998

TABLE IV.

DENTAL INSPECTION AND TREATMENT.

(1) Number of Children inspected by the Dentist:—	
(a) Routine age-groups	15553
(b) Specials	161
(c) Total (Routine and Specials)	15714
(2) Number found to require treatment	8515
(3) Number actually treated	7471
(4) Attendances made by the children for treatment	17853
(5) Half-days devoted to:—	
Inspection	208
Treatment	1892
Total	2100

(6) Fillings:—		
Permanent Teeth		6571
Temporary Teeth		—
Total		6571
(7) Extractions:—		
Permanent Teeth		2704
Temporary Teeth		10298
Total		13002
(8) Administrations of general anæsthetics for extractions		2272
(9) Other operations:—		
Permanent Teeth		3178
Temporary Teeth		821
Total		3999

TABLE V.

VERMINOUS CONDITIONS.

(1) Average number of visits per school during the year by the School Nurses or other authorised persons	4
(2) Total number of examinations of children in the schools by School Nurses or other authorised persons	81995
(3) Number of individual children found unclean ...	1198
(4) Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	Nil
(5) Number of cases in which legal proceedings were taken:—	
(a) Under the Education Act, 1921 ...	Nil
(b) Under School Attendance Bye-Laws	Nil

TABLE VI.

BLIND AND DEAF CHILDREN.

Number of totally or almost totally blind and deaf children who are not at the present time receiving education suitable for their special needs.

	(1) At a Public Elementary School.	(2) At an Institution Other than a Special School.	(3) At no School or Institution.
Blind Children ..	—	—	—
Deaf Children ..	—.	—	—