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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.,

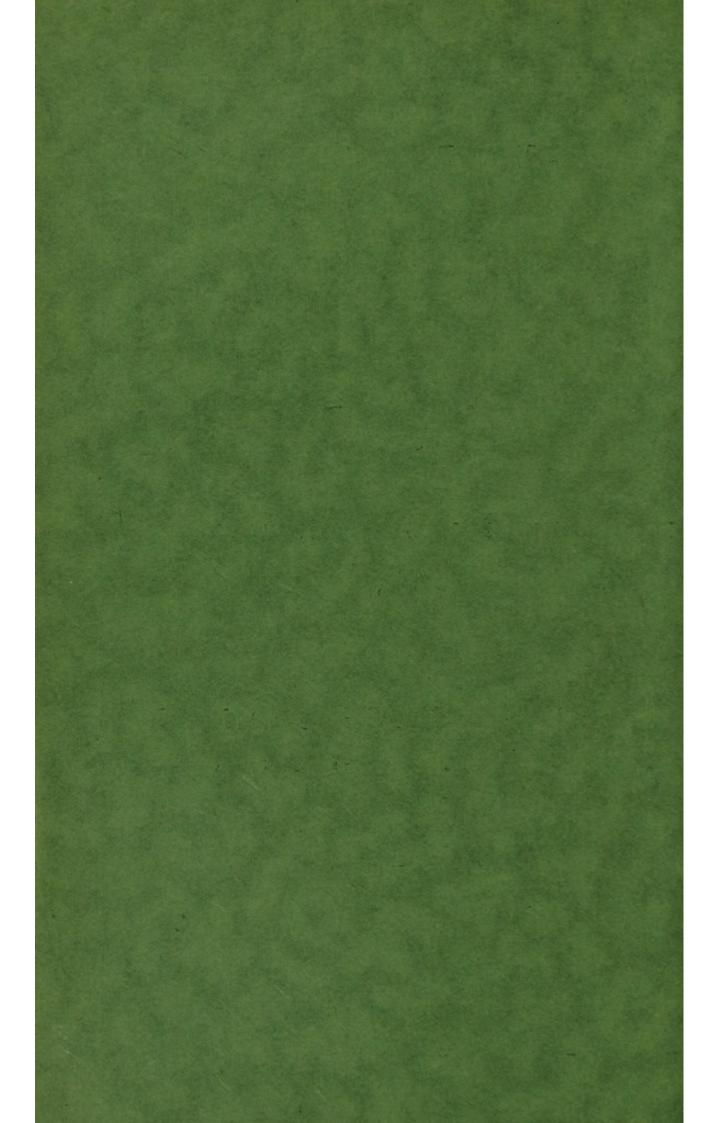
ON THE

MEDICAL INSPECTION OF SCHOOL CHILDREN

FOR THE YEAR ENDED DECEMBER 31st, 1948

CARLISLE:

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



CUMBERLAND COUNTY COUNCIL

County Health Department, 11, Portland Square, Carlisle.

June, 1949.

To the Chairman and Members of the Education Committee.

Mr. Chairman, My Lord, Ladies and Gentlemen,

I beg to present the Annual Report on the Medical Inspection and Treatment of School Children for the year ended 31st December, 1948.

STATISTICS

The statistical returns of the work undertaken are set out in the appropriate parts of the Report. These tables call for little comment, except, perhaps, in two respects. The first is that there is a substantial fall in the number of cases found to be unclean at school. Last year there was a rather disturbing rise in this connection, which seems only to have been a passing phase. The second point is the rather striking gap between the number of children with eye defects referred for treatment, and the number of children for whom glasses are known to have been supplied. The relative figures are 1,666 and 470. The answer, of course, lies in the fact that many more glasses may have been supplied, but the information has not reached us. As an Education Authority we have, in fact, no really reliable source of information in this matter, which is an unsatisfactory position. This has a considerable bearing on what is said later.

On the subject of the provision of glasses for school children it may be worth saying that, in common with other sections of the community, school children for whom glasses are prescribed have at present to wait long periods before the glasses are actually provided. We receive many complaints about this, perhaps particularly in the case of older children who are studying for examinations and who may have broken their glasses, or who may require a change of glasses. There is nothing, of course, that we can do about it.

THE PRESENT AND THE FUTURE OF THE SCHOOL MEDICAL SERVICE

School Medical Officers are asked to comment on the effects of the impact of the National Health Service Act, 1946, on the School Medical Service. The answer, I think, is simple and straightforward, and is to the effect that School Medical Officers have inevitably to a large extent lost their grip on the School Medical Service. They have certainly lost their grip from the aspects of treatment and the results thereof. One reason is that many cases are now being sent to hospital by general practitioners direct, which formerly were sent through the medium of the School Medical Service. In addition, there has not yet been established a real and true liaison between hospital management committees and education authorities for the exchange of information about children entering hospital for treatment, or leaving hospital on the completion of treatment. think this problem will, in this area, solve itself, at least to some extent, in the future, because we have the goodwill of the hospital management committees to assist us in finding a satisfactory solution.

The future of the School Medical Service must be regarded as in the air. There have been many indications that before long at least the treatment side of the service may pass into the ambit of the National Health Service. Answers in Parliament and other sources of information make it quite clear that a movement is tending in this direction, and there is some reason to believe that some bodies associated with local government would, simply on financial grounds, favour such a transfer. My own view is that the effect on the work of the School Medical Service would be, from all angles, unfortunate. The service, by its very nature, is one which must be a personal service, and is largely a team matter in each area, the team being made up of the teachers, the parents and the medical and dental and other officers. I think it is generally recognised that the School Medical Service as at present organised, has done extraordinarily good work throughout the country since its inception, and to return to the status quo before 1918, when the work was limited to the ascertainment of defects, would be a retrograde step and likely to have undesirable results. One of the recognised channels of entry of medical officers into the Local Government Public Health Service would be largely abolished, or

at least would cease to be attractive, and in all conscience it is going to be hard enough to keep the Public Health Service supplied in future with recruits of a sufficient standard without adding any new complications.

We live in an age in which there is a mania for change, and the reason for these changes is not always easy to understand, nor are the benefits arising from them always apparent. Not long ago I was mildly rebuked at a meeting for continuing to use the phrase, 'School Medical Service.' Apparently this phrase is now demoded, and the correct description is 'School Health Service.' I am unable to appreciate the distinction. I cannot see that 'School Health Service' means anything different from 'School Medical Service.' That, however, is an unimportant matter. The disintegration of the School Medical Service as we have known it for so many years, which has undoubtedly already begun, is something on quite a different level which would be a change which might well have disastrous and farreaching effects.

MENTAL HEALTH SERVICE

During the year we have opened two child guidance clinics, one at Workington and one in Carlisle, and a third will open shortly at Whitehaven. The Whitehaven clinic will also provide an occupation centre, but that is a matter which really concerns the Health Report rather than this report.

We are fortunate in that our teams for these important clinics are now complete. The clinics in the West and East will be respectively under the charge of Dr. Ferguson, Medical Superintendent of Dovenby Hospital for Mental Defectives, and Dr. Braithwaite, Medical Superintendent of Garlands Mental Hospital, as the psychiatrists. This arises as a result of negotiations with the Regional Hospital Board, and represents a very useful liaison between the two bodies.

We are also fortunate in having experienced psychiatric social workers in Mrs. Campbell and Miss Lamb in the West and East respectively, and since Miss Burrows joined our staff as Educational Psychologist, the teams are complete.

It is too early yet to say much about these child guidance clinics, but it is already obvious that they are filling a gap in the School Medical Service which makes it clear that they will serve a very useful purpose in the years ahead.

SPEECH THERAPY

Unfortunately, in spite of all the efforts we have been able to make, we have not yet been able to obtain the services of a speech therapist.

SCHOOL MEALS

The provision of school meals has steadily expanded throughout the year. On a check day in October, 1947, 51.51 per cent. of the children in attendance at school were served with a midday meal. This percentage was increased to 57.62 per cent. in October, 1948, representing an increase of 2,200 dinners a day. The total number of dinners served to children on this day was 16,664.

During the year the canteen facilities have been greatly expanded by the provision of new buildings or by adaptations, and this expansion still continues. At the moment building work is in progress at some 38 schools, and contracts have been, or shortly will be, accepted in respect of another 12 schools or thereabouts. The building programme for 1949, now in the course of preparation, will show still further expansion.

An experiment was tried during the year in respect of one or two schools where there was a demand for a mid-day meal, but where neither canteen nor washing up facilities were available, by the provision of sandwich meals.

SCHOOL MILK

From a check taken during October, 1948, the number of children present in all schools and departments was 28,920, of whom 23,842 were taking milk. These figures imply that 82 per cent. of our children are drinking milk, as against last year's figure of 85 per cent. The following table shows the percentage of different grades of milk supplied to 264 schools; corresponding figures for 1947 are shown in brackets.

Type.		Perc	entage.
Pasteurised	 	39	(38)
Tuberculin Tested	 	36	(39)
Accredited	 	6	(6)
Ungraded	 	19	(17)

Drinking straws were supplied to 70 per cent. of the schools receiving milk. At the end of the year only 23 small schools, as against 33 in 1947, were without regular milk supply. Efforts are still being made to find suppliers willing to undertake delivery to these schools.

DIPHTHERIA IMMUNISATION

The number of children of school age immunised during the year was 674. In addition, 2,156 children were given reinforcing injections.

I am,

Your obedient Servant,

KENNETH FRASER,

School Medical Officer

General Statistics.

Estimated population of Administrative	
County	202,460
Number of pupils on school registers	30,689
The number of schools in the County are	as follows:—
Primary 234) Secondary Modern 9) Secondary Grammar and High 12) Secondary Technical 1) Nursery 1)	274 Departments
Medical Inspection.	
Children attending maintained Primar and Grammar Schools were examined as	
Routine inspections by age groups:	
Entrants	3688
Second Age Group	2845
Third Age Group	2030
The building paper amuse for 1549, byte a	- Course t

Special inspections and re-inspections 19298

Total examinations ... 27861

8563

As previously, children were examined at approximately 8 years of age for sight-testing, and an additional examination of children at 13 years of age attending Grammar Schools was also carried out.

TABLE A.

SUMMARY OF DEFECTS FOUND, AND OF TREATMENT UNDER-TAKEN.

	1	Referre	i	
Condition.	for	Treatn	ient.	Treated.
External Eye Diseases		485		410
Skin Diseases		1549	daten	1518
Defective Vision and Squint		1596		1616
Nose and Throat Conditions		1335		889
Ear Conditions		439		357
Enlarged Cervical Glands		61	Canva Canva	40
Heart Disease and Circulation		109		109
Chest Conditions		349		292
Tuberculosis—Non-Pulmonary		14	Totals	14
Nervous Diseases		54	,	47
Uncleanliness		1909		1909
Other Defects and Diseases		1432		1375
Developmental		38		23
		-		
		9370		8599
		-		-

Included in the above figures of treatment undertaken are 15 cases of squint and 7 of mastoid which received operative treatment in hospital.

Orthopædic and dental defects are not included in the above table.

Found Individual obildren strended, 4.914.

TABLE B.
SHOWING THE ATTENDANCES AT INDIVIDUAL SCHOOL CLINICS.

			Al	l Cases.
Clinic.	N	ew Cases.	Atte	endances.
Alston		70		245
Acnotrio		133		356
Bramaton		192		917
Carliela		180		432
Cleator Moor		322		1209
Cockermouth		361	2000	1401
Faroment		299		887
Frizington		255	1.0	1262
Marrinart	anniti.	301		1163
Millom		523		2283
Donnith		366		1643
Whitehaven (Sandhills La	me)	487		2600
Whitehaven (Woodhouse)		429	13. P	1813
Winter		377		1172
		818	,	3710
Workington		010		3/10
Tetale		5119		21002
Totals	"inong"	5113		21093

TABLE C.

SUMMARY OF WORK UNDERTAKEN AT THE SCHOOL CLINICS DURING THE YEAR.

Condition for which child attended.	N	lew Cases.	Att	endances.
General Condition		182		1052
Eye Diseases		643		2768
Skin Diseases		1463		5415
Nose and Throat Conditions		464		916
Ear Conditions		288		2162
Enlarged Cervical Glands		38		158
Heart and Circulation		77		327
Lungs (Non-Tubercular)		155		713
Lungs (Tubercular or Suspecte		88		644
Tuberculosis (Non-Pulmonary)		17		139
Nervous System		36		137
Uncleanliness		129		2171
Other Defects and Diseases		1387		4137
Deformities		106		223
Developmental		40		131
Totals		5113		21093

Total individual children attended, 4,914.

TABLE D.

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

Condition.		No. of Cases.	N	o. of Visits Paid.
Eye Conditions		14		40
Skin Diseases		15		48
Nose and Throat Conditions		1049		2141
Ear Conditions		15		58
Heart and Circulation		20		55
Lungs (Non-Tubercular)		1		2
Glands		-		100
General Cases	1 44	63		160
				2504
		1177		2504
				-

Infestation with Vermin.

The School Nurses made 106,268 examinations of children for verminous conditions and uncleanliness, and of this total 1909 children were adversely reported on.

TABLE E.

SHOWING THE ORTHOPAEDIC TREATMENT UNDERTAKEN DURING THE YEAR.

Number on Aftercare Register at 1/1/48	441
New cases during 1948	279
Cases re-notified after discharge previously	33
Number removed from Register	243
Number on Register at 31/12/48	510
Attendances at Aftercare Clinics	768
Attendances at Intermediate Clinics held by	
Aftercare Sister	655
Home Visits by Aftercare Sister	230
Plasters applied at Intermediate Clinics by After-	
care Sister	134
Plasters applied at home by Aftercare Sister	30
Surgical Boots and Appliances supplied and re-	
newed	68
*Cases receiving Hospital Treatment during 1948	59
Awaiting admission to Hospital, 31/12/48	34
X-Ray Examinations during 1948	68
Awaiting X-Ray	15

^{*} Cumberland Infirmary, Carlisle, and Ethel Hedley Hospital, Windermere.

TABLE F.

SHOWING THE VARIETIES OF ORTHOPAEDIC CONDITIONS DEALT WITH.

Flat	Foot					be		245
T.B.	Joints							26
Cong	enital Defe	cts	511	ottable	Q. 450			30
Injur	ries (includi	ng fra	ctures)	a.lus	HO bo		34
Polic	myelitis			(nall	pradu			39
Scoli	osis, Kypho	sis and	d Lord	osis		0		26
Ricke	ets	11117						58
Club	Foot					8		20
Oste	omyelitis			ing	th Ve	ion mot	10185	9
Hemi	iplegia	FR. 500	bno	UOI				24
Cong	enital Dislo	cation	of the	Hip	of 10	ot aid		11
Torti	collis							7
Pseud	do Coxalgia	ZETAS	0.00	HATOR	o g	ST. DE		16
Poor	Posture	ПАЧ	A SHE	Distund	19			25
Hallu	x Valgus ar	nd Def	ormed	Toes		A mon	-00 m	28
Paral	ysis and Bi	rth Inj	uries	en to	lo bei	1		5
Exost	osis	8	112.6	20		1.00		6
Pes C	avus and T	alipes	Climic diate	978979	A T	mees a		32
Syno	vitis				Side	97.0319		5
Other	conditions	CIM S	eleibar	motel	.ze be	Lagas		84
							362-	700
								730

TABLE G.

SHOWING THE POSITION OF DENTAL INSPECTION AND TREATMENT.

(1)	Number of pupils i	nspected	d by	Authority's Den	tal	
	(a) Periodic Ag	ge Group	os		2155	9
	(b) Specials				5	1
	(c) TOTAL (P	eriodic a	and S	Specials)	21610	0
(2)	Number found to re-	quire tre	eatme	ent	1274	3
(3)	Number actually to	reated			12210	6
(4)	Attendances made b	by pupil	s for	treatment	1978	7
(5)	Half-days devoted to	0—	(8)	Anæsthetics—		
	(a) Inspection (b) Treatment	240 2339		Local General	1051	
	Total (a) and (b)	2579		Total	11614	4
	To planta and	-			100000	-
(6)	Fillings—		(9)	Other Operation	ns—	
	Permanent	0149		Permanent Tee		•
	Teeth Temporary	8142		Temporary Tee	. — 	_
	Teeth	1074		Total	4836	6
	Total	9216				
	ACCOUNTED TO THE STATE OF THE S	CARLO ICA		2101.7 TO JETE		
(7)	Extractions— Permanent		(10)	Orthodontic Appliances	278	2
	Teeth	2142	(11)	Dentures	113	3
	Temporary Teeth	9335	(12) (13)	Inlays Dowel Crowns	69	
	Teeth	9000		Jacket Crowns	11	
	Total	11477	(15)	Splints (cast)	1	-
	motor tone within	and have	(16)	X-Ray Examinations	227	7

The Senior Dental Officer (Mr. A. C. S. Martin) makes the following comments on the School Dental Service:—

"With regard to inspection and treatment, the position is not quite as satisfactory as in 1947, but, as pointed out in the report for that year, staff changes always entail a drop in work till the new officers become used to the district, especially in an area such as Cumberland. The decrease in inspection is almost entirely accounted for in the areas where such staff alterations have taken place, and it is anticipated that

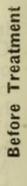
the leeway will soon be overtaken. While there is also a reduction in fillings and extractions, there is at the same time a very important increase in the number of orthodontic appliances fitted (200 to 278).

"This branch of treatment absorbs a considerable amount of time, many cases requiring months of painstaking work on the part of the dentist, and it might be questioned whether this is really worth while. Actually, there is no doubt regarding this from two points of view: (1) Teeth which are irregular or overcrowded are rather more prone to disease than those in proper alignment, in fact, sooner or later a tooth which is misaligned will suffer from disease of the supporting structures; (2) there is no question that dental irregularities, especially those which cause facial deformities, are frequently responsible for a marked inferiority complex, and it is often a revelation to see the change in attitude of a patient who has been successfully treated. Photographs are shown of one case which was handled by one of the Assistant Dental Officers (Mr. J. V. Inglis), which shows rather dramatically how the facial appearance of a person can be altered. The first and most important part of the treatment consisted in the removal of the upper teeth and of the excess bone in the front of the jaw. Through the courtesy of Professor Bradlaw, this operation was most successfully carried out at the Newcastle Dental Hospital. It is well to mention here how much this County is indebted to Professor Bradlaw and his staff for the many oral surgery cases at present uncovered by the County Scheme they have undertaken for Cumberland children in the past year or two, and for the excellent results they have obtained. This operation was done at the Easter holiday and before the school resumed the pupil had been supplied with an upper denture, so that she was able to return with the other pupils, completely transformed in appearance, and with an outlook on life which she had never known before.

"Partial dentures have also risen in number, while inlays and jacket-crowns also point to a high standard of work being maintained by the Dental Officers.

"In all these items, the dental workshop has shown that there is no type of work that is too complicated to be undertaken, and the staff are to be congratulated







on the way they have supported the officers in improving the Dental Services in the schools in Cumberland.

"In the Report for 1947, reference was made to the Stoneleigh Clinic—this has now been in use for some time and has proved a very successful adaptation of most unlikely premises, so that at long last a start has been made on one of the major problems of treatment in the county—clearing up the results of years of inadequate facilities for the Grammar and Technical Schools in Workington.

"At Whitehaven, also, another surgery has been made available for the same purpose and is proving most useful in dealing with the pupils attending the Grammar School there.

"At the time of writing the position of the School Dental Service seems uncertain; on the one hand on account of the widely publicised shortage of staff, and on the other because of the desire of some Authorities to place the responsibility for this service on the Ministry of Health. It is to be hoped that the Service which has been built up over so many years, and which has functioned without breakdown throughout the war and post-war period, will be retained in its present setting under local control and with local interest. This is especially so in view of its increasing importance as a result of the abnormal situation which has arisen under the National Health Service.

"So far, the staffing problem has not been serious in Cumberland. As indicated last year Mr. Christopher left at the end of January after many years of excellent service, and his going is much regretted by all who had to do with him. It is certain that he has taken with him to Warwickshire the best wishes of those he worked for, those he worked with, and last but not least, those he worked on! After a short period Mr. Fielding was appointed to the staff which was thus brought up to full strength. In view of the responsibility for expectant and nursing mothers and preschool children under the National Health Service Act the staff was increased by the appointment of Dr. T. H. Thompson, who took up duty on November 1st, 1948, but as Miss D. D. Stark left on September 30th, 1948. the increase did not actually take place. So far it has not been possible to fill this vacancy, but it is hoped to do so in the near future."

TABLE H.

CHILDREN IN SPECIAL SCHOOLS

Name of School.	Girls.	Boys.
Royal Victoria School for the Blind,		
Newcastle	-	2
Yorkshire School for the Blind, Doncaster		1
Condover Hall School for the Blind,	Works	
Shrewsbury		1
Chorleywood College for the Blind	2	Singer
Northern Counties' Institution for the		
Deaf and Dumb, Newcastle	5	5
Royal Cross School for the Deaf, Preston	-	4
Boston Spa Institution for the Deaf	2	1
Yorkshire School for the Deaf, York	00000	1
Colthurst House for Epileptics, Warford,		
Cheshire	1	1
Maghull Home for Epileptics, Liverpool	1	1
progressive year in its expansion and	<u>A</u> 00	od_en
Totals	11	17
	a - d o	ar-Ja

PHYSICAL TRAINING

I am indebted to the Chief Organisers of Physical Education—Miss Kathleen Sutton and Mr. Lionel Heyworth—for the following report on physical activities during the year:—

"With the change in outlook towards Physical Education, particularly in primary schools, every effort has been made to provide the necessary equipment to implement modern schemes of work. It is reported that one-quarter of the schools in the county have received sufficient apparatus to carry out the work on up-to-date lines. The teachers, fully aware of present-day needs, have done much to overcome the many difficulties arising out of the shortage of basic equipment.

TRAINING COURSES

"Four training days for teachers have been held in Traditional Dancing at Whitehaven, Cockermouth, Keswick and Penrith. The object of these days has been to encourage mixed traditional dancing in our schools as a part of Physical Education, and to help keep alive the English Traditional Dance. Large representative gatherings attended these courses and as a result a marked lively interest in the traditional dance is already showing itself in our schools.

"As the Committee is aware almost all Swimming classes in schools are instructed by teachers trained in the accepted methods of swimming instruction. In order to meet the needs of teachers instructing swimming under the varied conditions and facilities in Cumberland, a special scheme of instruction has been prepared by the Organisers to cover instruction in public baths, rivers, lakes, pools and sea. In order to instruct the men teachers in the methods described in this scheme, refresher courses were conducted at Workington and Whitehaven Swimming Baths.

GAMES AND ATHLETICS

"In the field of School games and athletics, 1948 has been a progressive year in its expansion and improvement in technique. Individual coaching in Association Football, Rugby League Football and Netball has been maintained, demonstration games have been staged by county teams and trial games leading up to inter-county matches have been held to include schools hitherto unable to contribute promising talent.

"A network of activity linking the remotest country schools extends from Millom to the Border Country. In accordance with the County Netball Association's policy of following through to the post-school age, the Junior and Senior County Teams have been very active throughout the season, playing home and away matches with most of our neighbouring counties.

SWIMMING

"Swimming instruction has been carried out successfully at the Whitehaven, Workington and Wigton Baths where the results of the County Swimming tests indicated marked progress, especially at the beginner's stage.

"In spite of very bad weather at our open-air baths and pools, many children braved the adverse conditions throughout the season and were able to take part in the county tests.

FURTHER EDUCATION

The number of classes in all branches of physical education has been doubled this season. A lively interest has been shown in physical training, games, ballroom and traditional dancing, and attendances have indicated a return to pre-war enthusiasm.

RECREATIONAL FACILITIES

"Steps are being taken in many parts of the county to acquire facilities for adult recreation under the Physical Training and Recreation Act, 1937. A number of sites have been inspected by the Organisers, recommendations have been made and it is pleasing to note that responsible bodies are taking advantage of a scheme designed to assist in the provision of playing fields, swimming baths and other recreational facilities."

MEDICAL INSPECTION RETURNS TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY & SECONDARY SCHOOLS

A-PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups:-	
Entrants	3688
Second Age Group	2845
Third Age Group	2030
Total	8563
Number of other Periodic Inspections	Nil
Grand Total	8563
B-OTHER INSPECTIONS	
Number of Special Inspections	13014
Number of Re-Inspections	6284
Total	19298

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)

		of the other conditions recorded in Table IIA.	Total individual pupils.
	23	712	719
	247	291	504
	152	122	259
s)	422	1125	1482
ns	Nil	Nil	Nil
	422	1125	1482
	(exc	defective vision (exclud'g Squint) 23 247 152 es) 422 ens Nil	For defective vision (exclud'g Squint) 23 247 247 152 152 152 152 Nil Nil Nil

TABLE II.

A—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR.

Hol.	Seanness of the	PERIODIC I	NSPECT'NS.	SPECIAL I	NSPECT'NS.
to radining(a) to		No. of defects.		No. of defects.	
Def Co No	de. Disease.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
4 5	Skin Eyes—	. 44	42	1505	41
	/- \ TT!-!	422 60 81	402 67 34	954 160 404	1119 148 42
6	Ears— (a) Hearing . (b) Otitis	21	19	45	13
	(c) Other .	45	39 34	160 143	45 22
8 9	Nose & Throat Speech Cervical Gland	s 21	684 40 69	788 4 40	667 60 34
10 11 12	Heart & Circ'l's Lungs Developmental-	n 14 . 63	106 402	95 286	76 501
13	(a) Hernia	17	23 54	13 5	15 25
	(a) Posture (b) Flat Foot (c) Other	. 8 . 31 . 84	19 16 86	13 67 87	11 67 125
14	Nervous System (a) Epilepsy (b) Other		6 27	4 38	15 20
15	Psychological— (a) Developm	t 27	39	50	95
16	(b) Stability Other	. 80	6 80	23 1352	9 152

B-CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS.

1897 U	No. of Pupils	A. (Goo		B. (Fai	r)	(Po	
Age Groups.	Inspected.	No.	%	No.	%	No.	%
Entrants 2nd Age Group 3rd Age Group Other Periodic Inspections	2845	1056 827 681	28.6 29.1 33.5	2508 1907 1262	68.0 67.0 62.2	124 111 87	3.4 3.9 4.3
Total	8563	2564	30.0	5677	66.2	322	3.8

TABLE III.

Treatment Tables

Troumont Taxio
GROUP I—MINOR AILMENTS (excluding Uncleanliness, for which see Table V.) Number of defects
treated or under treat-
the year.
SKIN—
Ringworm Scalp (i) X-Ray treatment 10
(ii) Other treatment 17
Ringworm, Body 35
Scabies 127
Impetigo 346
Other Skin Diseases 1023
EYE DISEASE—
External and other, but excluding errors of refraction, squint, and cases admitted to
hospital 485
EAR DEFECTS—
Treatment for serious diseases of the ear
(e.g., operative treatment in hospital) is
not recorded under this heading 401
MISCELLANEOUS—
e.g., minor injuries, bruises, sores, chilblains,
etc 1382
Total 3826
10tal 3820
(b) Total number of attendances at Authority's
minor ailment clinics 21063
the state of the s
GROUP II—DEFECTIVE VISION AND SQUINT
(excluding Eye Diseases treated as Minor Ailments-Group I.)
No. of defects dealt with.
Errors of Refraction (including squint) 1597
Other defect or disease of the eyes (excluding those recorded in Group I.) 69
Total 1666
3 170 0.00 0.00 0.00 0.000 0.000
No. of Pupils for whom spectacles were—
(a) Prescribed 1268
(b) Obtained 470

GROUP III.—TREATMENT OF DEFECTS OF NOSE AN	ND
Received operative treatment— Total No. treatment—	tor
	nec
(a) For adenoids and chronic tonsillitis 869	
(b) For other nose and throat conditions 1	
Received other forms of treatment 18	
Total 888	
GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFEC	TS
(a) No. treated as in-patients in hospitals or hospital schools 48	
(b) No. treated otherwise, e.g., in clinics or	
out-patient departments 730	
GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY	
No. of Pupils treated—	
(a) Under Child Guidance arrangements 17	
(b) Under Speech Therapy arrangements	
TABLE IV.	
DENTAL INSPECTION AND TREATMENT	
(1) Number of pupils inspected by the Authority's Dental Officers—	
(a) Periodic age groups 21559	
(b) Specials 51	
(c) TOTAL (Periodic and Specials) 21610	
(2) Number found to require treatment 12743	
(3) Number actually treated 12216	
(4) Attendances made by pupils for treatment 19787	
(5) Half-days devoted to-	
(a) Inspection 240	
(b) Treatment 2339	
Total (a) and (b) 2579	
(6) Fillings—	
Permanent Teeth 8142	
Temporary Teeth 1074	

Total

(7) Extractions—		
Permanent Teeth	2142	
Temporary Teeth	9335	
Total	11477	
(8) Administration of general anæsthe extraction	etics for 1103	
(9) Other Operations—		
(a) Permanent Teeth	4390	
(b) Temporary Teeth	446	
Total (a) and (b)	4836	
TABLE V.		
INFESTATION WITH VE	ERMIN	
(i) Total number of examinations in		
by the school nurses or other	er authorised 10626	8
(ii) Total number of individual pur be infested	100	9
(iii) Number of individual pupils in res cleansing notices were issued (2) Education Act, 1944)	spect of whom d (Section 54 N	il
(iv) Number of individual pupils in res		
cleansing orders were issued (3) Education Act 1944)	Section 54	



