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EAST SUSSEX COUNTY COUNCIL

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# ANNUAL REPORT

OF THE

PRINCIPAL

SCHOOL MEDICAL OFFICER

FOR THE

YEAR 1957

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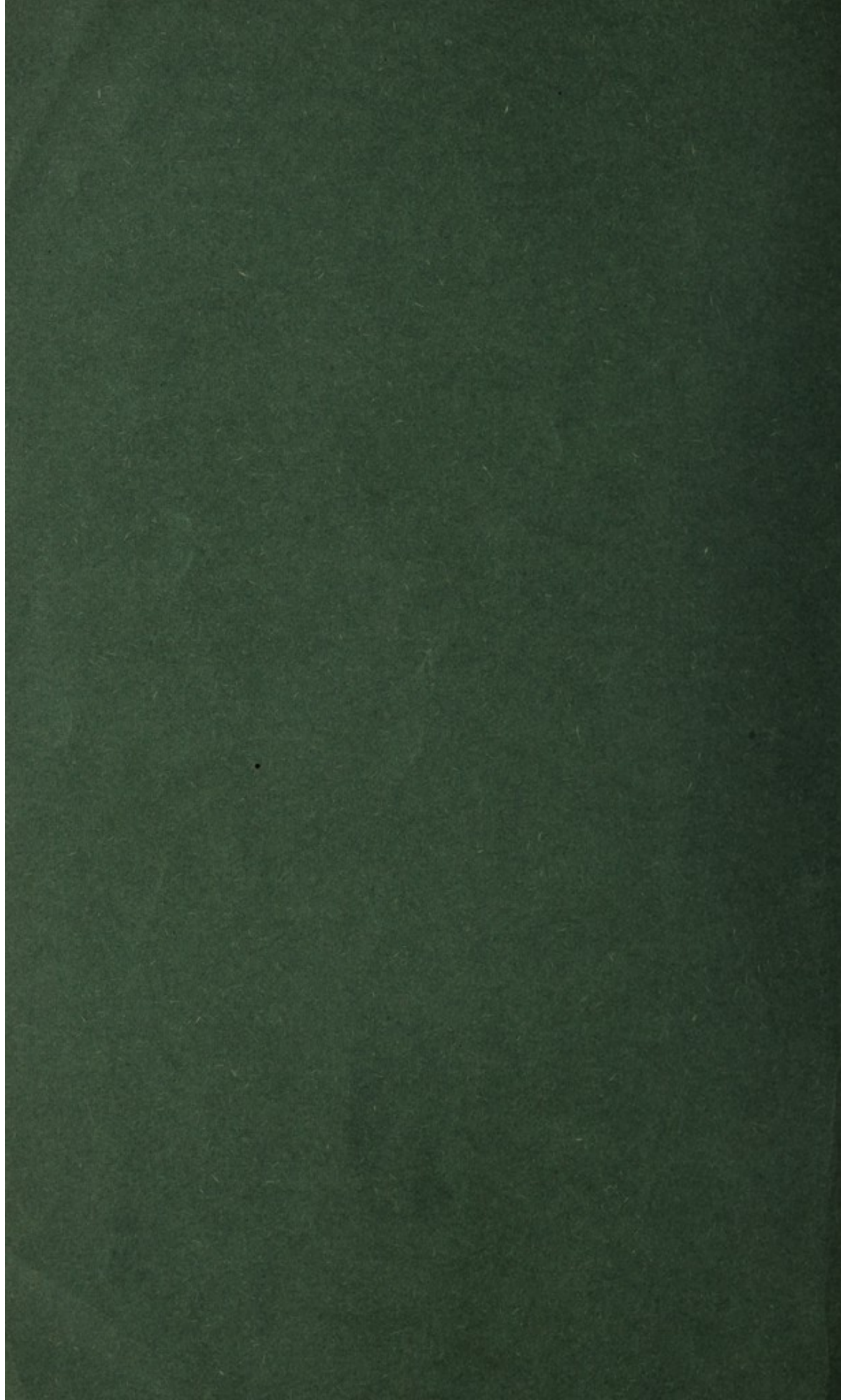


**FRANK LANGFORD**

M.B., Ch.B., F.R.C.S., L.R.C.P., D.P.H.

*County Medical Officer of Health and  
Principal School Medical Officer*

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## STAFF OF THE SCHOOL HEALTH SERVICE DURING 1957

### Principal School Medical Officer

F. Langford, M.B., Ch.B., F.R.C.S., L.R.C.P., D.P.H.

### Deputy Principal School Medical Officer

R. G. Brims Young, M.B., Ch.B., D.P.H.

### School Medical Officers

- I. S. Bingeman, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
  - \* L. A. Collins, M.A., M.B., B.Chir., M.R.C.S., L.R.C.P., D.P.M., D.P.H.
  - A. P. Gorrie, M.B., Ch.B., (commenced 3rd August, 1957)
  - \* J. Petrie, M.B., Ch.B., D.P.H.
  - \* M. I. Silverton, M.R.C.S., L.R.C.P., D.P.H.
  - † R. A. Stenhouse, L.M.S.S.A., C.P.H. (resigned 31st March, 1957)
  - Anne D. Surtees, M.B., Ch.B., D.C.H.
  - \* R. J. Toleman, M.B.E., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
  - Janet F. Waugh, M.B., B.S.
  - \* N. E. Chadwick, M.A., M.D., B.Ch., M.R.C.S., L.R.C.P., D.P.H.
- (Divisional Medical Officer)
- Nulece C. Eyles, M.B., Ch.B., D.P.H.
- R. W. Martin, L.R.C.P. & SI., L.M., D.P.H.

} Hove and  
Portslade  
Division

\* District Medical Officer of Health

† Assistant Port Medical Officer

### Principal School Dental Officer

P. S. P. Jenkins, B.Sc., L.D.S., R.C.S.

### School Dental Officers

- C. Allmark, L.D.S., R.C.S. (part-time): commenced 1st October, 1957
- E. S. Butt, L.D.S., U. Liverpool
- C. Coppelman, B.D.S., L.D.S., R.C.S. (part-time) (resigned 1st February, 1957)
- W. Eddings, L.D.S., R.C.S.
- J. V. Goldie, L.D.S., R.C.S.
- R. H. Hamlyn, L.D.S., R.C.S. (resigned 30th September, 1957)
- Miss S. A. Hutchinson, L.D.S., R.C.S. (commenced 2nd December, 1957)
- P. H. S. Lahaise, B.D.S., L.D.S., R.C.S. (part-time)
- Miss S. J. M. Passat, L.D.S., R.C.S.
- Miss H. M. Phillips, L.D.S., U. Leeds
- F. P. Rikovsky, L.D.S., R.C.S. (resigned 27th April, 1957)
- A. P. Spackman, L.D.S., R.C.S.
- R. C. Virgo, L.D.S., R.C.S. (part-time from 21st January, 1957)

### Dental Anaesthetists (Part-time)

- V. M. Eggo, M.R.C.S., L.R.C.P.
- J. Terry, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

### Child Guidance Service.

#### PSYCHIATRISTS

- Doris K. Small, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M., D.P.M. (Part-time)
- Lamorna Hingston, M.B.E., M.R.C.S., L.R.C.P., D.P.M. (Part-time)
- Michael G. D. Davys, M.A., B.M., B.Ch., D.P.M. (Part-time)
- H. V. W. Elwell, M.A., M.R.C.S., L.R.C.P., D.P.M. (Part-time)

#### EDUCATIONAL PSYCHOLOGISTS

- Miss M. P. Logg, B.A.
- N. W. Wilkinson, M.A., B.Ed.

#### SOCIAL WORKERS

- Miss J. W. Hasler
- Mrs. P. Heslop (resigned 12th October, 1957)
- Mrs. M. Scott
- Mrs. A.I.C. Pember (commenced 7th January, 1957)

## SPEECH THERAPISTS

Miss B. J. Bentley, L.C.S.T. (part-time) (commenced 1st May, 1957)  
Miss A. Hayman, L.C.S.T. (resigned 31st August, 1957)  
Mrs. K. G. Hansford, L.C.S.T. (part-time) (resigned 30th April, 1957)  
Miss C. R. Wheatland, L.C.S.T.  
Miss M. J. Ingram, L.C.S.T. (commenced 2nd December, 1957)

## NURSES, ETC.

School Nurses (part-time), 91;  
Dental Attendants, 10.

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**TO THE CHAIRMAN AND MEMBERS OF THE EAST SUSSEX EDUCATION COMMITTEE**

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MR. CHAIRMAN, MY LORDS, LADIES AND GENTLEMEN,

As will be seen from the figures which open this Report, the number of pupils rises substantially year by year, the percentage increase during the last ten years being over 40%. As in other counties, these rising figures give rise to continuing staffing problems, both medical and others. In spite of these it will be seen that routine inspections are being fully carried out and that with the understanding support of your Committee more attention is being paid to the needs of those pupils who need special help, if they are to benefit fully from the education provided and are to be ready to take a proper part in the life before them.

It will be seen on Page 7 that serious attempts are being made to meet the challenge of the partially-deaf pupil and I sincerely hope that your Committee will approve the establishment of an audiometer operator, equipped with suitable apparatus. If any of you are hard of hearing you will appreciate all the better what a handicap it must be to a pupil, perhaps very young and shy, not to be able to hear quite perfectly, and the fact that although we know of 33 deaf pupils but only 10 partially-deaf is strong presumptive evidence that other partially-deaf pupils unknown to us are still labouring under their handicap.

Another special service whose recent expansion will help children in general life as well as in school is speech therapy and I am convinced that it gives, and will continue to give, very good value in the preparation of a child for adult conditions.

An interesting development is the increasingly clear realization (see Page 9) during recent years that at least one quarter of the pupils ascertained as educationally subnormal have educational attainments at a lower level than their innate abilities would indicate, owing to emotional disturbance of one kind or another. It is not difficult to believe that a child of modest ability, handicapped both by this and by emotional upsets of domestic or other origin, would score far lower than he would if he were helped to adjust himself to his surroundings.

Two other matters of importance to pupils remain less than fully satisfactory. There are still village schools whose sanitary conditions are defective, and it is to be regretted that national needs prevent the proper steps being taken to remedy the faults. The Dental Service continues to run short of dental surgeons and the tendency is, if anything, for the position to deteriorate. I am the more grateful therefore to our existing staff and those dental surgeons in private practice who, from time to time, find it possible to join our service as part-time officers.

May I also thank all members of the Education Committee and their staff for their interest in and support of the School Health Service, and for the hard work put in by my staff, especially my Deputy, Dr. R. G. Brims Young, who has prepared the body of this Report.

I am, My Lords, Ladies and Gentlemen,  
Your obedient Servant,

F. LANGFORD,

Public Health Department,  
County Hall, Lewes.

County Medical Officer of Health and Principal  
School Medical Officer

May, 1958.



### Schools

The number of maintained schools in the county is 220, composed of :-

Grammar Schools . . . . .	8
Secondary Modern Schools . . . . .	26
Primary Schools (including 12 all-range) . . . . .	180
Special Schools . . . . .	4

The number of children on the registers of the Authority's schools during the Autumn Term, 1957, was 40,695, an increase of 11,776 since 1947.

### Medical Inspection

There were no changes during the year in the arrangements for medical inspection.

The system of employing a part-time School Medical Officer whose primary occupation is that of District Medical Officer of Health has been continued in the majority of areas. On 31st March Dr. R. A. Stenhouse, primarily an Assistant Port Medical Officer at Newhaven but devoting two sessions a week to work as a School Medical Officer in the Newhaven and Seaford area, resigned his appointment. As the Newhaven Port Health Authority did not appoint a successor to Dr. Stenhouse his school health service duties temporarily became the responsibility of another School Medical Officer.

Partly to meet this staff deficiency and partly on account of increased work falling on the service because of an increased school population, Dr. A. P. Gorrie commenced duty as an additional part-time school medical officer on 3rd August. The remainder of Dr. Gorrie's time is also spent amongst school children, but on behalf of the Health & Housing Committee, as he is responsible to the County Medical Officer of Health for carrying out the Health Authority's programme for the vaccination with B.C.G. of school leavers.

School nurses also devote only a part of their time to school work, some combining school nursing with health visiting and others doing, in addition, midwifery and district nursing.

The examination of handicapped pupils occupies a steadily increasing proportion of the time of school medical officers and 393 pupils were classified during the year (including 12 ineducable children, whose names were subsequently notified to the Local Health Authority). The total number of children on the register of handicapped pupils at the end of the year was 960.

A total of 11,782 children were submitted to periodic medical inspection and 1,839 to special examination, 8,519 were re-examined, having been found to be suffering from one or more defects at the time of the previous examination.

### Findings at Medical Inspection

*Physical Condition of Children.* - Last year comment was made on the apparent rise in the proportion of pupils deemed to be in unsatisfactory physical condition, consequent upon a reduction of the categories from three to two. The figure for 1957 shows a closer approximation to the 1955 proportion of 0.53 per cent. by falling from 1.02 per cent. in 1956 to 0.71 per cent. By the end of 1958 the school medical officers should have become sufficiently accustomed to the use of two categories only to permit a fair year-to-year comparison, which at present cannot be made.

*Diseases and Defects.* - Of the 11,782 children examined at periodic medical inspection 1,743, or 14.8%, were found to require treatment of defects other than dental disease or infestation. The total number of defects was 1,909, and the following table shows the commonest defects over the last four years :-

	1954	1955	1956	1957
Defective Vision . . . . .	615 (36%)	743 (38.3%)	799 (41.5%)	834 (43.7%)
Orthopaedic Defects . . . . .	495 (29%)	504 (26%)	552 (28.6%)	440 (23.6%)
Nose and Throat Defects . . . . .	148 (8.8%)	145 (7.5%)	188 (9.7%)	83 (4.4%)

*Ophthalmology.* - For the last three years the Local Education Authority has been unable to provide specialist ophthalmological treatment in the Lewes Area, as the South-east Metropolitan Regional Hospital Board has had no specialist available to undertake this work and no specialist could be found willing to do so under the aegis of the Supplementary Ophthalmic Services. Children requiring ophthalmic treatment in this area have had to depend on arrangements made by their family doctor with the Sussex Eye Hospital or local opticians.



Since 1st November, 1957, however, an increased establishment of ophthalmologists employed by the South-east Metropolitan Regional Hospital Board has permitted the Board to make available to the Local Education Authority the services of a consultant ophthalmologist.

This specialist holds a clinic once a week in the main Brighton School Clinic, by courtesy of the Brighton Local Education Authority.

**Tonsillectomy.** - The Principal Medical Officer of the Ministry of Education asked Local Education Authorities in 1956 to record the number of pupils examined in the periodic groups who had at any time previously had their tonsils and/or adenoids removed, as the Medical Research Council on Social and Environmental Health were investigating "Tonsillectomy Rates" of the whole country generally.

As approximately one-third of the child population attending maintained schools is seen annually at periodic medical inspection the Ministry can obtain sufficient information from returns of each Local Education Authority to enable a study to be made.

I give below information concerning the 11,782 East Sussex scholars examined during 1957, together with the figures for 1956 for comparison :-

	Number Examined		Tonsillectomy Performed		% Treated	
	1956	1957	1956	1957	1956	1957
Entrants .. .. .	4419	3955	502	459	11.36%	11.61%
Second Age Group .. .. .	3365	4140	1031	1206	30.54%	29.13%
Leavers .. .. .	2987	2986	928	859	31.07%	28.76%
Other Periodics .. .. .	625	701	197	278	31.82%	39.23%
	11,396	11,702	2,658	2,799	23.32%	23.76%

It will be noted that there is no significant difference between the figures for 1956 and 1957.

**Infestation with Vermin.** - The School Nurse is responsible for the measures to be taken to detect and treat verminous conditions in the schools in her area. A visit is made to the school each term and an inspection is usually carried out in the first few weeks of the term.

As a result of the excellent work done by the school nurses and of improved standards of the county population, the incidence of infestation has been considerably reduced during recent years. In the year under review 96,676 examinations were conducted, to find only 152 individual cases of infestation. In no case was the issue of a Cleansing Order required.

These figures maintain the trend towards freedom from infestation which has been noted in previous years, but the annual figures also show that as the prevalence of pediculosis decreases so does any subsequent improvement become more difficult. Continued vigilance by the school nurses is essential if infestation with vermin is to be eradicated.

**Arrangements for Treatment.** - The arrangements, whereby all treatment, other than Child Guidance, Speech Therapy and Minor Ailment Treatment is carried out by the National Health Service, have continued to work successfully, with the possible exception of physiotherapy for minor orthopaedic disabilities which in certain areas involved the loss of an undue proportion of school time.

The following table indicates the extent of the treatment services provided by the Authority :-



WEEKLY SESSIONS					
	<i>Child Guidance</i>	<i>Minor Ailment</i>	<i>Speech Therapy</i>	<i>Dental</i>	<i>Ophthalmic</i>
BURGESS HILL County Clinic, "Windermere," Mill Road	2	Daily	1	6	-
EAST GRINSTEAD County Clinic, "Moat View," Moat Road	2	Daily	2	7	-
HAILSHAM Church Room, Victoria Road	-	-	-	2	-
HAYWARDS HEATH County Clinic, "Oaklands," Boltro Road	-	as required	2	7	-
NEWHAVEN County Clinic, Hillcrest Road	-	Daily	1	7	-
RYE County Primary School	-	as required	1	2	-
SEAFORD County Modern School	-	as required	-	-	-
BEXHILL County Clinic, London Road	-	Daily	2	11	-
HOVE Hangleton Clinic	-	as required	1	11	1
Shirley Street Clinic	-	as required	1	11	-
PORTSLADE Sellaby House, Old Shoreham Road	-	1	-	4	-
LEWES Castlegate House	2	Daily	3	11	-
UCKFIELD Old Grammar School High Street	-	-	-	4	-

#### Handicapped Pupils

The examination of handicapped pupils continues to occupy an increasing proportion of the time of the school medical officers, as shown by the rise in the number of ascertained handicapped pupils from 275 to 960 in the last eleven years. During 1957 the following numbers of pupils were classified as handicapped in the various recognised categories :-

Blind Pupils	1
Partially-sighted pupils	4
Deaf pupils	2
Partially-deaf pupils	1
Educationally subnormal pupils	321
Epileptic pupils	1
Maladjusted pupils	13
Physically Handicapped pupils	23
Pupils suffering from speech defect	-
Delicate pupils	15



In addition, 12 children were reported to the Local Health Authority as ineducable and 37 as likely to require supervision, by reason of a disability of mind, after leaving school.

The Chief Education Officer is responsible for arranging the provision of special educational treatment and I am indebted to him for much of the following information about the handicapped pupils for whom the Authority was responsible during 1957.

*Blind Pupils.* - These children can be educated satisfactorily only in a residential special school and this type of education was being supplied for 16 out of the 18 known blind pupils in the county. Of the remaining 2 pupils, one was receiving home tuition, as he had been withdrawn from a special school on account of his state of health, and the other pupil, who had not yet attained 5 years of age, was awaiting a vacancy at a residential school.

*Partially-Sighted Pupils.* - There were 17 pupils in the county whose vision was such that they required education in a special school for partially-sighted pupils. The small number, and their scattered location, precluded the possibility of a day special school. At the end of the year 14 were at special residential schools, 2 were on the waiting list and in the case of the remaining child consent to special school education had not been received from the parents.

*Deaf Pupils.* - Deaf pupils, like blind pupils, require education in a residential special school and this type of education was provided for all of the 33 deaf pupils for whom the Authority are responsible.

*Partially-deaf Pupils.* - 8 out of 10 partially-deaf pupils were receiving education in special schools. The remaining 2 were continuing in the ordinary school with special arrangements to ensure the adequacy of their education.

The detection of partial deafness is recognised to be extremely difficult without the use of special apparatus for testing hearing. In East Sussex, where no special testing apparatus is in use, the percentage of pupils known to have defective hearing is very considerably below that in areas using special apparatus. During 1957 the Education Committee was asked to approve the purchase of a suitable audiometer and the appointment of an operator. The Committee decided to defer a final decision until 1958, although the proposal was approved in principle.

*Educationally Subnormal Pupils.* - This is by far the largest category of handicapped pupil and the one for which there is relatively the least provision of special educational treatment. 197 out of 293 pupils recommended for education in a special school were receiving this form of education. Of the remaining 96, 4 were receiving home tuition. Of 79 pupils recommended for special school education, or education in a special class for E.S.N. pupils in the ordinary school, 23 were receiving this education. In addition to these figures, 368 children were recommended for special educational treatment in the ordinary school. In 4 other cases a decision with regard to special education has been deferred.

During the year the Downs Special School was opened in temporary premises in Hove to supply day special education for senior girls and junior boys and girls, and at the end of the year 36 pupils were in attendance.

Approval was given by the Education Committee to the establishment of 9 additional special classes in secondary modern schools.

As the number of pupils classified as educationally subnormal is considerably below the expected total the Education Committee authorised in 1956 a survey of the secondary modern schools in the area to ascertain the true extent of this handicap in the senior age group. Heads of schools were asked to submit the names of all pupils 20% or more retarded in their educational attainments. The Educational Psychologist was asked to estimate the intelligence quotient and the Principal School Medical Officer to arrange for the medical examination of each of these pupils.

This survey was continued throughout 1957 and although not completed by the end of the year it has demonstrated that the need for special educational treatment, particularly special classes, is much greater than was previously realised.

*Epileptic Pupils.* - Of the 13 pupils whose epilepsy was sufficiently severe to warrant classification as epileptic pupils, 9 were in special schools, 1 was in a boarding home and one was receiving home tuition. The remaining 2 pupils were attending ordinary school, with appropriate modifications of the curriculum.



**Maladjusted Pupils.** - The great majority of the known maladjusted pupils are dealt with by the Child Guidance Service while they continue to attend the ordinary school. During the year 240 new cases were referred to this service and a summary of the problems involved, by whom they were referred and the manner in which they were dealt with is given below :-

*Referred by:*

School Medical Officers .. .. .	87
Private doctors .. .. .	64
Schools .. .. .	16
Hospitals .. .. .	19
Juvenile Courts .. .. .	1
Probation Officer .. .. .	2
Chief Education Officer .. .. .	6
Children's Officer .. .. .	34
Other sources .. .. .	11

*Problems:*

Personality problems and nervous disorder .. .. .	81
Habit disorders .. .. .	28
Behaviour disorders .. .. .	82
Educational and vocational difficulties	26
Special examinations for Juvenile Courts .. .. .	3
Special examinations for advice re placement .. .. .	20

*How dealt with:*

Advice .. .. .	60
Psychiatric treatment .. .. .	54
Psychiatric treatment and coaching ..	7
Periodic supervision .. .. .	22
Withdrawn before completion .. .. .	28
Awaiting diagnosis .. .. .	64
Placed in special school .. .. .	1
Transferred .. .. .	4

The total number of children treated by the service throughout the year was 345, but this figure includes children whose treatment commenced before 1957. An analysis of the figure is given to show the progress made by these children :-

*Analysis of Treatment:*

Recovered .. .. .	6
Improved .. .. .	57
Not improved .. .. .	9
Transferred .. .. .	11
Cases closed (withdrawn or unco-operative) .. .. .	24
Still receiving psychiatric treatment, coaching or supervision .. .. .	217
Transferred to schools for maladjusted children .. .. .	2
Admitted to hospital for intensive treatment .. .. .	2
Left area .. .. .	15
Advice for Juvenile Courts .. .. .	2

The following summary indicates the amount of work involved in dealing with these cases :-

*Psychiatrists:*

Diagnostic interviews .. .. .	208
Treatment interviews .. .. .	1214

*Educational Psychologists:*

Diagnostic interviews .. .. .	293
Coaching interviews .. .. .	456
School visits .. .. .	80



*Psychiatric Social Workers:*

Interviews at clinics .. .. .	1141
School visits .. .. .	65
Home and other visits .. .. .	969

During the year 34 maladjusted pupils were receiving special school education; 5 were receiving treatment in a hostel and attending the ordinary school, 4 were receiving home tuition and 3 at the end of the year awaited placement in a special school.

These summaries show that the Child Guidance Service is kept fully occupied and that the vast majority of the children dealt with are referred because of a disorder which has manifested itself in some way other than lack of educational progress. The survey being conducted in secondary modern schools to ascertain the number of educationally subnormal pupils indicates that there is a considerable number of pupils who are educationally retarded despite average intelligence and no detectable physical disability.

Indeed, in over 50% of the pupils ascertained as educationally subnormal during 1957 it was found that their educational attainments were considerably below the level expected from their intelligence rating, as estimated by intelligence tests and in approximately half of this number the cause was almost certainly due to emotional disturbance. It is likely that a further quarter of those whose attainments fell below potential suffered from emotional disturbance, but the examining medical officer failed to find any direct evidence of this or any other reason.

Except in the eastern part of the county, where the clinic is without the services of a Psychiatric Social Worker, the Child Guidance Service has functioned satisfactorily.

A clinic was opened at Burgess Hill on 7th January, 1957, primarily to deal with cases referred from Marle Place Reception Centre, and one half day session was held each week. At the latter end of the year the services of Dr. H. V. W. Elwell were made available to the Local Education Authority, with the approval of the Regional Hospital Board for a further two sessions per week and the sessions at Burgess Hill and East Grinstead clinics were therefore increased to two weekly.

*Physically Handicapped pupils.* - As far as possible these pupils are retained in the ordinary schools, the curriculum being modified according to the nature and extent of the child's disability, and transport to and from school being provided where necessary. 23 pupils were being educated in this manner. Of those whose disability was sufficiently severe to preclude attendance at an ordinary school, 7 were in special residential schools, 9 in a hospital school, 18 were receiving home tuition and 1 was too severely disabled to permit any form of education.

*Pupils with Speech Defects.* - There were no pupils sufficiently handicapped by defective speech to require education in a special school during the year under review.

A total of 394 children received treatment by the Authority's speech therapists, either at one of the county clinics or at home, and continued to attend the ordinary school.

The speech therapists report a continued high level of co-operation from parents and teachers, both in supervising speech practice and ensuring regular attendance for treatment, but suggest that some cases are not referred for treatment immediately the existence of a speech defect is known. Any such delay appreciably extends the period of therapy necessary and militates against a successful result.

The following table shows the main types of speech defect dealt with and summarises the effect of the therapy provided :

	DISCHARGED		UNDER TREATMENT		Total
	Improved	Not Improved	Improved	Not Improved	
Stammering .. .. .	23	2	52	8	85
Dyslalia .. .. .	104	1	162	23	290
Cleft Palate .. .. .	1	-	6	1	8
Other conditions .. .. .	4	-	4	3	11
	132	3	224	35	394

No cures are claimed as any speech defect is liable to return in times of stress.



Surveys carried out during the year in Hove and Portslade and in the eastern part of the county indicated that the case load is now too heavy for the existing speech therapy staff. In order to meet the demand for treatment and also in order to provide group therapy sessions at the Authority's special schools for educationally subnormal pupils, an increase in the establishment of therapists from 2½ to 4 was asked for. Consideration of this request was, however, deferred by the Council until 1958.

I give below a report submitted by Miss C. R. Wheatland, the Speech Therapist for the eastern half of the county :-

"An interesting comparison may be seen in the discharge figures for the years 1956 and 1957. There were 20 more discharges in 1957. The proportion of stammerers to dyslalics was similar. Perhaps this increase may be accounted for by the fact that cases have been treated continuously over the last two years by the same therapist. Speech defective children in particular seem to dislike changes, perhaps because many of them are already "insecure".

Two formerly cleft palate cases were discharged in 1956. There are now no cases of cleft palate amongst my patients.

The proportion of stammering children to dyslalic children has remained constant. The number of discharged stammerers has remained low, however. Much time continues to be spent on these cases, however, as they all, with very few exceptions, need reviewing from time to time until they leave school.

Cases continue to be referred by all who have anything to do with the children. Some, however, are not referred soon enough. Where there is an obvious defect it seems wiser to seek advice rather than leave it for a term or a year, as does seem to happen fairly frequently. Delay may be actually harmful in the case of young stammerers. Whether treatment is begun at 5 years of age or not, advice to the parents may obviate future difficulty.

The difficulties of running a very large area may be shown by the fact that some head teachers may produce quite a formidable list of names when the therapist calls to see the child whose name has come up on the waiting list. Presumably, these names are not put forward as soon as they arise because the head teachers forget the existence of the speech therapist, who cannot call unless on "urgent business". Or perhaps they expect a "routine visit" for which, unfortunately, there is never any time. Should all these children need treatment they, in their turn, have to be relegated to the waiting list as time cannot be stretched sufficiently to accommodate half a dozen where one case was expected. This is very difficult to carry out in practice!

The problem of finding suitable accommodation is a constant one. It is often extremely difficult to acquire the use of a room where treatment will not be interrupted, and which is also quiet enough for the work. Even the medical rooms of the schools are not always available, and much of the work has to be done in the homes, which would be far better done away from them.

Parental co-operation has improved during the year 1957. The children have been more diligent in practising work given to them. It is to be hoped that this is a trend and not due simply to good fortune with that particular group of patients."

*Delicate Pupils.* - This category is somewhat different from the others in that the disability which makes special educational treatment necessary is unlikely to be permanent, and the great majority of delicate pupils can return to the ordinary school after a few months of recuperation in a special school.

At the end of the year 8 pupils were being provided with a period of special educational treatment in residential schools. 3 diabetic pupils were in special hostels, from which they attended ordinary schools.



*Education in Hospitals.* - Education for children undergoing long-stay treatment at the Queen Victoria Hospital, East Grinstead, Heritage Craft Schools and Hospitals, Chailey, and at Haldane House, Bexhill, continues to be provided by the Authority and financial responsibility was also accepted for education provided for East Sussex children in hospitals in other counties.

The tuition provided for children in other hospitals in the county continued to be limited to a maximum of two hours daily for children over 9 years of age, whose stay in hospital exceeded four weeks.

In addition, approval was also given to home tuition for pupils who were absent from school through illness provided such tuition was recommended by the Principal School Medical Officer and the child was not expected to be able to resume school attendance for at least two months.

*B.C.G. Vaccination of School Children.* - The County Council, with the approval of the Minister of Health, offered B.C.G. vaccination throughout the county to school children, who had reached their 13th birthday, but were not yet 14.

To carry out this work, which must be done only by a medical officer approved for this purpose by the Minister of Health, Dr. A. P. Gorrie was appointed. He visits each school during one week each year, the date and time having been arranged before-hand with the Head Teacher. On the Monday or Tuesday he carries out the Mantoux skin test and on Thursday or Friday of the same week he re-visits to read the results of the test and vaccinates those children who show negative reaction, which indicates that protection is desirable. About six weeks later he pays a short visit to read the results of the B.C.G. vaccination. The children who show a positive reaction to the skin test are sent to the Chest Physician for an X-ray of the chest, to make sure they are not developing early tuberculous disease, or to ascertain if they are a "pointer" to a tuberculous patient among those around them.

A start was made in October and by the end of the year 22 schools were visited, 1,084 children were skin tested and 838 vaccinated. The X-raying of the children who showed positive skin tests was carried out expeditiously by the whole-hearted co-operation of the Chest Physicians in the county.

Six children who were X-rayed by the Chest Physician were required to undergo further X-rays and investigation for various abnormal findings.

*Employment of Children.* - One of the conditions regulating employment of school children in the administrative area of the county is that the Principal School Medical Officer should supply to the employer a certificate that the employment will not be prejudicial to the health or physical development of the child and will not render him unfit to obtain proper benefit from his education. During the year 992 children were examined for this purpose, and in only one case was a certificate refused.

*Medical Examination of Teachers.* - During the year 13 teachers were medically examined on behalf of the Ministry of Education prior to taking up their first teaching post, and 121 East Sussex students prior to their admission to teachers' Training Colleges. Medical examinations, including chest X-rays, were arranged for 159 teachers on taking up posts in this county, including temporary teachers. As a result of the chest X-ray of one of the temporary teachers she was found to be in the first stages of pulmonary tuberculosis. As a result of this early diagnosis she was given immediate treatment and is now making excellent progress.

29 X-rays only were arranged for East Sussex teachers on appointment to a fresh post within the county.

*Mothercraft.* - Instruction in this subject was given by the Assistant County Nursing Superintendents and certain nurses to the senior girls in 16 schools. The course continues to be received with enthusiasm, and of 497 girls entering the examination 410 were awarded certificates of proficiency, of whom 173 passed with credit.

#### **School Meals Service**

The total number of schools in the county with self-contained kitchens is 121 and 93 Schools receive meals from central kitchens, or from other schools. The central kitchens total 6 and serve meals generally in their immediate vicinity. The number of schools receiving meals from central kitchens has been reduced because kitchens were provided during the year at 3 schools.



A recent return by the Chief Education Officer to the Ministry of Education showed that of the 36,724 children at school on the day of the return 30,449 were taking school milk and 20,134 were taking school dinners.

The School Medical Officers supervise the hygienic precautions taken in canteens and kitchens to prevent the occurrence of any food infection.

Medical history sheets continued to be received from all persons taking up employment as school canteen assistants. In all 97 were dealt with and X-rays arranged. As a result of these reports one assistant only had a full medical examination; and it was suggested to one other canteen assistant that in her own interests it was better for her to give up the suggested post.

#### Milk-in-Schools Scheme

All maintained schools participate in this scheme and receive pasteurised milk from approved sources.

Supervision of supplies has been maintained throughout the year and the 204 samples of school milk submitted for examination were reported to be satisfactory.

#### Sanitary Conditions in Schools

Improvements to sanitary facilities were carried out at the following schools during 1957 :-

Etchingham C.E.  
Hurst Green C.P.  
Mountfield & Whatlington C.E.  
Lindfield C.P.  
Nutley C.E.  
Polegate C.P.  
St. Mary's, Horam

Plumpton C.P.  
Maynards Green C.P.  
Jarvis Brook C.E.  
Ticehurst C.E.  
Newhaven Co. Sec.  
Alfriston C.P.  
Peasmarsh C.E.

Lewes, South Malling, C.E.

## REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

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Previous reports have mentioned the difficulty in obtaining new staff and of replacing any officers who, for various reasons, leave the Authority. This difficulty persisted in the year under review and, as far as can be seen now, is likely to increase in the future.

This is not an encouraging outlook in view of the fact that the incidence of dental disease is increasing from year to year, due, according to research workers, to an increasingly refined carbohydrate diet and high intake of sweets - toffees have a particularly bad reputation in this connection.

It is to be hoped that the present programme of "fluoridation" of water on an experimental scale, under Ministry auspices, will be implemented by general application as soon as possible throughout the country, as this is undoubtedly the most promising of all the measures affecting preventive dentistry.

The authorised establishment is 13 full-time officers but the average "effective" strength throughout 1957 was only 9½, the lowest figure since 1952.

This was due to many staff changes during the year, three of them being the loss of three full-time officers. Of these, one transferred to another Authority, one left us for the General Dental Service and one, having reached retiring age, was re-engaged on a part-time basis.

One full-time officer was appointed and commenced work in December and we were also able to make more use of part-time officers than previously. As is inevitable, however, with the system of part-time work, there is a greater turn-over in the staff personnel.

The net result of all the changes was that on 31st December the number of dental officers employed was the equivalent of 9 10/11ths full-time officers, a decrease of 9/11ths compared with last year.

### Premises

Since the provision of specially designed and equipped clinics is still not possible, the alternative of using the medical rooms in the newly-built schools has been adopted, these being as fully equipped as the individual circumstances warrant, or is practicable.

One of the disadvantages of this system, however, is that as the room is not in full-time use by the School Health Service it, logically enough, comes to be regarded as a "spare" room, and is used for any and every purpose, ranging from library, class room, staff diningroom, store-room to secretary's office, with resulting awkwardness and disorganisation when the room is required for its original purpose.

The mobile dental clinic again gave good service and during the alterations at Burgess Hill Clinic enabled dental treatment to be carried on, no other accommodation being obtainable.

### Inspection

25,856 children received routine inspection during 258 sessions, giving an average of 100 children inspected per session. In addition, 2,452 special cases were inspected at treatment sessions, making a total of 28,308. Of these, 15,131 (53%) were offered treatment.

### Treatment

Details of the work done are given in the tables at the end of the report. Of the 15,131 offered treatment 9,934 (66%) received treatment from the School Dental Officers.

The figures in general are less than those for the previous year, due to the overall reduction in staff mentioned earlier.

In conclusion, I want to thank all the members of the Dental Staff, the Nursing Association, the teachers and the hospitals, whose co-operation and help were given during the year.

P. S. P. JENKINS,  
Principal School Dental Officer



## REPORT OF THE ORGANISERS OF PHYSICAL EDUCATION FOR 1956/57

**1. Teachers Courses**

The following refresher courses were held :-

Subject	Area Served	Duration	Attendance
Primary School P.E.	Hove & Portslade	6 sessions	49
Basketball	County	1 day	15 men
Remedials	County	1 day	41
Dancing	Heathfield	4 sessions	25
Primary School			
"Movement" Course	Lewes	5 sessions	32
Athletics	Lewes	1 day	15 women

**2. Staffing**

The year opened with vacancies for men specialists at East Grinstead County, Crowborough, Sackville, Cuckfield and Heathfield Secondary Schools. By Easter all were filled, though at the first three the selected teachers did not take up duties until September, 1957. The men appointed to East Grinstead County, Heathfield and Crowborough Schools are trained to full specialist level. A new vacancy at Haywards Heath Secondary School is unlikely to be filled before Christmas. Lewes Modern Boys' School was served by a temporary teacher in the summer term and a permanent teacher has been secured for September. The permanent specialist teacher at Claverham School has re-joined the staff after completing a year's supplementary course at Cheltenham Training College. His relief for the year has been sent to Loughborough College to take a similar course, starting in September, 1957.

On the girls' side, all the grammar schools have been adequately staffed for P.E. throughout the year. Claverham, Hurstpierpoint, Lewes, Newhaven and Wadhurst Secondary Schools have all been without qualified teachers for the whole year, but all these vacancies have been suitably filled for September, 1957, with the exception of Wadhurst. The resignation of the P.E. teacher at this school (who had been absent on a year's specialist course at Chelsea College) came too late for anything but a supply appointment for this year.

**3. Athletics**

The following are the details of the athletic meetings at which our schools have participated :-

*East Sussex Schools Championships at Bexhill*

379 boys and 226 girls from 25 schools competed at this meeting, at which 15 records were beaten. This compares with a total of 624 from 22 schools in 1956.

*Sussex Schools Championships at Withdean Stadium, Brighton*

72 boys and 36 girls from 19 schools represented East Sussex at this meeting, in which East Sussex finished second in all sections. East Sussex gained 11 first placings (7 boys and 4 girls), 16 second placings (12 boys and 4 girls) and 19 third placings (11 boys and 8 girls). The County still feels the absence of two girls' Grammar Schools in these competitions and it is regretted that they have not yet found it possible to include this branch of Physical Education in their work.

*Inter-County Championships at Southampton*

This meeting was carried out in extremely bad weather. Sussex gained sixth place in a field of forty counties. Of the 60 competitors comprising the Sussex team, 14 were from East Sussex and they gained 23 of the total 99 points for Sussex.

**4. Games***Boys.*

The usual competitions were organised and carried out. In its second season the Sussex County Schools' Cricket Association arranged inter-county matches against Hants, Surrey and Kent. The Primary Football League was dissolved because re-organisation has reduced the available schools to a very small number.

**Basketball:** The development of this game has gone on steadily as more apparatus has reached the schools and it should not be long before a Schools' Association can be established in the Authority. An indication of the interest being shown was the attendance of 21 teams at the tournament held in Lewes in July.



*Girls.*

The East Sussex Girls' Physical Education Association organised the following activities during the year :-

Autumn Term - Area Netball Tournaments at Burgess Hill (6 schools)  
Cuckfield (8 schools)  
Heathfield (20 schools)

Spring Term - Hockey Tournament at Hailsham (7 schools)  
County Netball Tournament at Heathfield (20 schools)  
All-range Primary Schools Rally at Lewes (5 schools)

Summer Term - Rounders Tournament at Lewes (8 schools)  
Stoolball Rally at Burgess Hill (8 schools)  
Tennis Tournament at Bexhill (11 schools)  
Folk Dance at Uckfield (10 schools)

The response to all these activities has been good. Weather caused a postponement of the Hockey Tournament and rain which started as the players were taking the courts meant cancelling the Tennis Tournament, as planned. However, all the schools played two matches on hard courts and it was evident from this that the Secondary Schools are making excellent progress.

**5. Swimming.**

Instruction was given as in previous years and certificates were awarded as follows (1956 awards in brackets):-

1st class	34	(42)
2nd class	196	(112)
3rd class	363	(346)
4th class	970	(857)

It is pleasing to note that some schools find it possible to present candidates for the examinations of the Royal Life Saving Society. The expenses are paid by the candidates.

**6. Camping.***Boys.*

Two schools used the Committee's Camp at Pett Level and recorded 343 camper-nights. One school borrowed the Committee's equipment to run a camp in South Wales for 15 boys for 8 days during the Easter Holidays. This was the only response to the new regulations facilitating "private" camping.

The Children's Officer borrowed all the boys' equipment to run a camp at Pett Level in August for four weeks.

A party from St. Mary's School, Horam, who have for three years used the Committee's camp at Pett, undertook a short walking tour of Youth Hostels.

*Girls.*

One school only organised a camp this season with the Committee's equipment. It was held in the school grounds and was for four days only. Another school had planned well ahead to run a camp and had found a suitable site in Kent. Considerable work had been put into the preliminary planning but the response from the girls proved to be insufficient to make the project worthwhile. It would seem, in this case, and it may be so in other cases, that the girls prefer the youth hostel type of activity which this school has employed for some years.

Though the additional help towards camping which the Committee granted this year has not increased the amount of camping, we would like very much to see the present arrangements and facilities extended for another year.

**7. Further Education .**

The following classes were held at Evening Institutes during the year :-

Keep Fit

9 classes for men:  
Average attendance 14  
3 classes for women:  
Average attendance 10



Recreational Classes (Badminton, Soccer)	2 classes
Dancing	10 classes - average attendance 20

#### 8. Liaison.

As in previous years, we have continued to represent the Education Committee in the various sports associations of the schools and on several of the Committees controlling the adult sports and recreations in the county. Talks on Physical Education have been given to Parent-Teacher Associations during the year.

#### 9. Summary .

Infant and Junior Schools appear to have settled down comfortably on the whole to the modern style of work. The standard of work in the secondary schools is slowly rising and schemes of work are still broadening to cater for a great variety of tastes. There is no doubt, however, that several schools which have suffered prolonged absence of fully-trained staff, or frequent changes of staff in the last few years, have received setbacks, from which it will take several years to recover fully. Probably the greater trouble has been the frequency of staff changes.

## APPENDIX

## Ministry of Education

## MEDICAL INSPECTION RETURNS

Year ended 31st December, 1957

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING SPECIAL SCHOOLS)

## A. - PERIODIC MEDICAL INSPECTIONS

Age Groups inspected and Number of Pupils examined in each:-

Entrants .. .. .	3,955
Second Age Group .. .. .	4,140
Leavers .. .. .	2,986
	<hr/>
TOTAL .. .. .	11,081
Additional Periodic Inspections .. .. .	701
	<hr/>
GRAND TOTAL .. .. .	11,782

## B. - OTHER INSPECTIONS

Number of Special Inspections .. .. .	1,839
Number of Re-Inspections .. .. .	8,519
	<hr/>
TOTAL .. .. .	10,358

## 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 Group Inspected (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Table III (3)	Total individual Pupils (4)
Entrants .. .. .	113	357	448
Second Age Group .. .. .	356	358	657
Leavers .. .. .	255	191	422
TOTAL .. .. .	724	906	1,527
Additional Periodic Inspections .. .. .	110	126	216
	<hr/>	<hr/>	<hr/>
GRAND TOTAL .. .. .	834	1,032	1,743

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

Age Groups Inspected (1)	Number of Pupils Inspected (2)	Satisfactory		Unsatisfactory	
		No. (3)	% of Col. (2) (4)	No. (5)	% of Col. (2) (6)
Entrants .. .. .	3,955	3,924	99.22	31	0.78
Second Age Group .. .. .	4,140	4,113	99.35	27	0.65
Leavers .. .. .	2,986	2,968	99.4	18	0.6
Additional Periodic Inspections .. .. .	701	693	98.86	8	1.14
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL .. .. .	11,782	11,698	99.29	84	0.71



TABLE II. - INFESTATION WITH VERMIN

(i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	96,676
(ii) Total number of <u>individual</u> pupils found to be infested .. .. .	152
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2) Education Act, 1944) .. .. .	152
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944) .. .. .	-

TABLE III. - RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1957.

## A. - PERIODIC INSPECTIONS

Disease or Defect (1)	PERIODIC INSPECTIONS				TOTAL (including all other age groups inspected)	
	Entrants		Leavers		Requiring Treatment (6)	Requiring Observation (7)
	Requiring Treatment (2)	Requiring Observation (3)	Requiring Treatment (4)	Requiring Observation (5)		
Skin .. .. .	18	40	19	17	79	88
Eyes -						
(a) Vision .. .. .	113	167	255	208	834	717
(b) Squint .. .. .	66	40	11	7	108	70
(c) Other .. .. .	7	8	3	3	26	21
Ears -						
(a) Hearing .. .. .	10	14	-	6	22	40
(b) Otitis Media .. .. .	5	13	2	3	7	18
(c) Other .. .. .	1	2	2	1	7	6
Nose and Throat .. .. .	54	226	3	9	83	297
Speech .. .. .	27	49	3	4	38	61
Lymphatic Glands .. .. .	1	60	-	6	5	80
Heart .. .. .	8	27	6	15	21	71
Lungs .. .. .	11	91	4	36	35	201
Developmental .. .. .						
(a) Hernia .. .. .	13	12	-	2	18	24
(b) Other .. .. .	16	70	9	23	57	168
Orthopaedic -						
(a) Posture .. .. .	10	24	41	35	124	122
(b) Feet .. .. .	59	63	32	35	164	199
(c) Other .. .. .	37	113	32	38	152	244
Nervous System -						
(a) Epilepsy .. .. .	3	3	1	4	7	10
(b) Other .. .. .	2	9	4	2	10	15
Psychological -						
(a) Development .. .. .	5	50	12	41	31	134
(b) Stability .. .. .	6	81	3	18	21	159
Abdomen .. .. .	3	9	-	3	10	16
Other .. .. .	12	20	6	9	50	59

## B. - SPECIAL INSPECTIONS

Defect or Disease (1)	Special Inspections	
	Requiring Treatment (2)	Requiring Observation (3)
Skin .. .. .	24	19
Eyes -		
(a) Vision .. .. .	104	44
(b) Squint .. .. .	13	3
(c) Other .. .. .	8	7
Ears -		
(a) Hearing .. .. .	9	10
(b) Otitis Media .. .. .	1	1
(c) Other .. .. .	-	3
Nose and Throat .. .. .	18	25
Speech .. .. .	50	15
Lymphatic Glands .. .. .	1	2
Heart .. .. .	6	29
Lungs .. .. .	16	19

(Cont'd)

## B. SPECIAL INSPECTIONS (CONTINUED)

Defect or Disease (1)	Special inspections	
	Requiring Treatment (2)	Requiring Observ- ation. (3)
Developmental -		
(a) Hernia .. .. .	-	-
(b) Other .. .. .	18	35
Orthopaedic		
(a) Posture .. .. .	25	8
(b) Feet .. .. .	38	13
(c) Other .. .. .	36	20
Nervous System -		
(a) Epilepsy .. .. .	5	2
(b) Other .. .. .	10	28
Psychological -		
(a) Development .. .. .	17	28
(b) Stability .. .. .	33	44
Abdomen .. .. .	1	5
Other .. .. .	10	19

TABLE IV. - TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING SPECIAL 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 .. .. .	71	10 + ?
Errors of refraction (including squint) .. .. .	1,261	184 + ?
TOTAL .. .. .	1,332	194 + ?
Number of pupils for whom spectacles were prescribed	568	164 + ?

## GROUP 2. - DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of Cases known to have been treated	
	By the Authority	Otherwise
Received operative treatment -		
(a) for diseases of the ear .. .. .	-	- + ?
(b) for adenoids and chronic tonsillitis .. .. .	-	15 + ?
(c) for other nose and and throat conditions .. .. .	-	- + ?
Received other forms of treatment .. .. .	18	12 + ?
TOTAL .. .. .	18	27 + ?
(a) in 1957 .. .. .	2	3
(b) in previous years .. .. .	3	6

## GROUP 3. - ORTHOPAEDIC AND POSTURAL DEFECTS

	By the Authority	Otherwise
Number of pupils known to have been treated at clinics or out-patient departments .. .. .	-	825 + ?

## GROUP 4. - DISEASES OF THE SKIN (Excluding UNCLEANLINESS, for which see Table II)

	Number of Cases treated or under treatment during the year by the Authority
Ringworm - (i) Scalp .. .. .	4
(ii) Body .. .. .	2
Scabies .. .. .	1
Impetigo .. .. .	32
Other skin diseases .. .. .	125
TOTAL .. .. .	164



## GROUP 5. - CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics, under arrangements made by the Authority ..	345
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## GROUP 6. - SPEECH THERAPY

Number of pupils treated by Speech Therapists under arrangements made by the Authority .. ..	394
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## GROUP 7. - OTHER TREATMENT GIVEN

(a) Number of cases of miscellaneous minor ailments treated by the Authority .. ..	810
(b) Pupils who received convalescent treatment under School Health Service arrangements .. ..	-
(c) Pupils who received B.C.G. vaccination .. ..	1,202
(d) Other than (a), (b) and (c) above (specify) .. ..	
1. Undescended Testicles .. ..	11
2. Hernia .. ..	5
3. Other .. ..	39
TOTAL .. ..	2,067

TABLE V. - DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of Pupils inspected by the Authority's Dental Officers:-	
(a) At Periodic Inspections .. ..	25,856
(b) As Specials .. ..	2,452
TOTAL (1) .. ..	28,308
(2) Number found to require treatment .. ..	18,772
(3) Number offered treatment .. ..	15,131
(4) Number actually treated .. ..	9,934
(5) Number of attendances made by pupils for treatment, <u>including</u> those recorded at heading 11(h) below .. ..	21,886
(6) Half days devoted to: Periodic School Inspection .. ..	258
Treatment .. ..	3,433
TOTAL (6) .. ..	3,691
(7) Fillings: Permanent Teeth .. ..	12,685
Temporary Teeth .. ..	2,629
TOTAL (7) .. ..	15,314
(8) Number of teeth filled: Permanent Teeth .. ..	11,091
Temporary Teeth .. ..	2,550
TOTAL (8) .. ..	13,641
(9) Extractions: Permanent Teeth .. ..	2,539
Temporary Teeth .. ..	7,055
TOTAL (9) .. ..	9,594
(10) Administration of general anaesthetics for extraction .. ..	3,711
(11) Orthodontics:	
(a) Cases commenced during the year .. ..	88
(b) Cases carried forward from previous year .. ..	141
(c) Cases completed during the year .. ..	62
(d) Cases discontinued during the year .. ..	46
(e) Pupils treated with appliances .. ..	88
(f) Removable appliances fitted .. ..	160
(g) Fixed appliances fitted .. ..	3
(h) Total attendances .. ..	1,276
(12) Number of pupils supplied with artificial dentures .. ..	50
(13) Other operations: Permanent teeth .. ..	4,513
Temporary teeth .. ..	1,558
TOTAL (13) .. ..	6,071





