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COUNTY BOROUGH OF EASTBOURNE

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**LOCAL EDUCATION AUTHORITY**

# ANNUAL REPORT

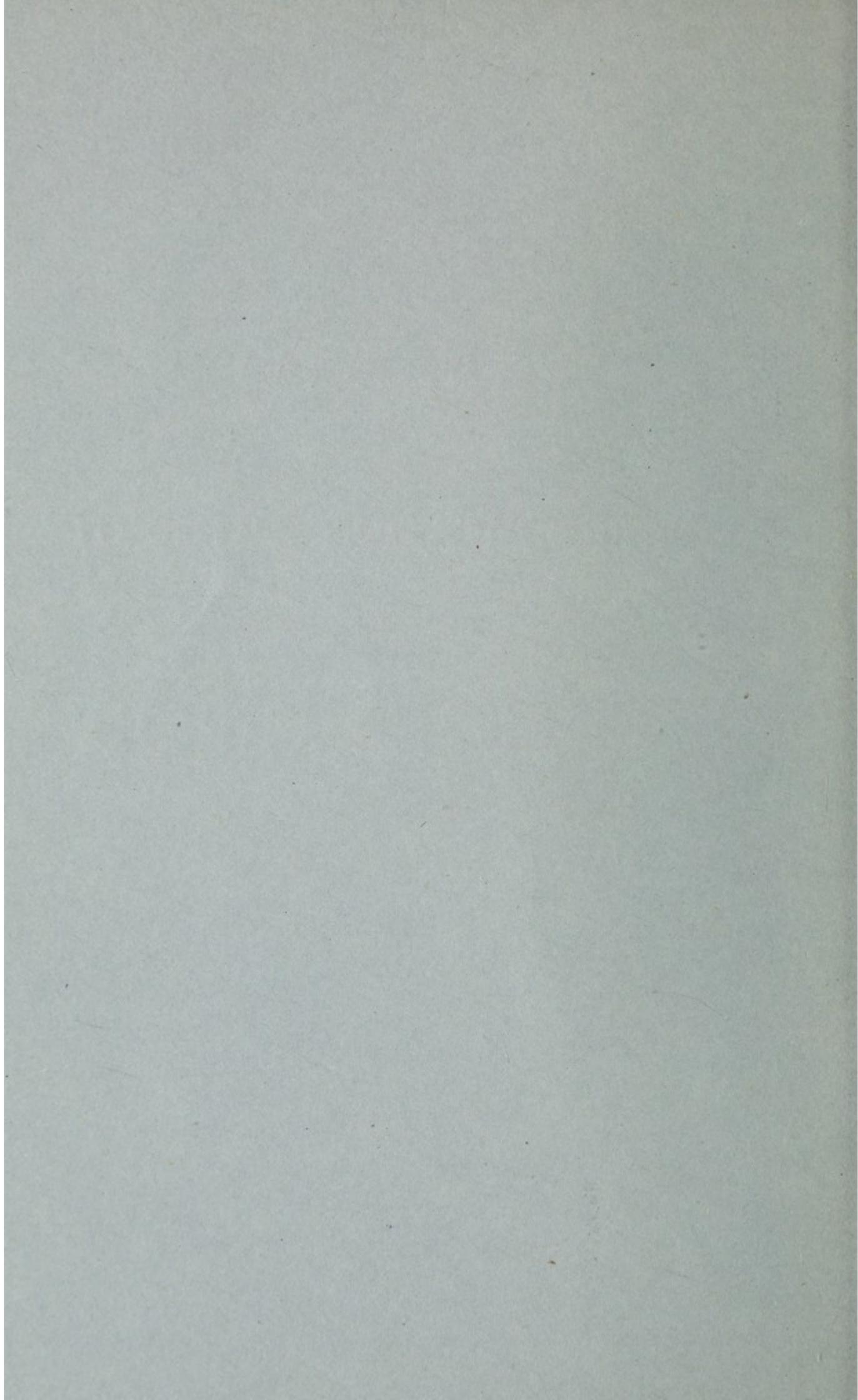
of the

**SCHOOL MEDICAL OFFICER**

*for the year 1950*



JOHN FENTON, M.B., B.Ch., B.A.O., D.P.H.  
School Medical Officer



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SCHOOL HEALTH DEPARTMENT,  
AVENUE HOUSE,  
EASTBOURNE.

*May, 1951.*

*To the Chairman and Members of the Education Committee.*

LADIES AND GENTLEMEN,

I have the honour to submit my Annual Report on the health of the school child in Eastbourne and on the work of the School Health Department for the year 1950. This is the forty-third Report in this series, and the twelfth which it has been my privilege to present.

It gives me much pleasure to report that the health of our school children was found to be well up to the high standard of recent years. The overwhelming majority of parents made very satisfactory provision for the general welfare of their children, and all credit is due to them for maintaining a high standard of clothing and footwear, despite the continuing rise in the cost of living.

A good deal of the time of the staff is devoted to the less fortunate children, and especially to those who come within the handicapped categories. The Open Air Day School in Beechy Avenue provides excellent accommodation for the delicate class of child, as well as for some who fall within the physically handicapped category. The accommodation at St. Aidan's Day School in Whitley Road for the educationally sub-normal group of children falls far short of the requirements for a school of this type according to reasonable modern standards. The Education Authority's Development Plan visualises that the St. Aidan's Special School shall be eventually discontinued, and that educationally sub-normal pupils shall be generally accommodated in special classes in primary and secondary schools, with suitable cases being placed in Boarding Special Schools. In view, however, of the school building situation, consideration is now being given to the transfer of St. Aidan's to other premises, and it is hoped that no undue delay in finding suitable alternative accommodation will take place.

The position in regard to securing vacancies in Boarding Special Schools for the more seriously handicapped type of child has improved. In the year under review we were successful in placing one epileptic child, and in the current year to date, one partially sighted, one deaf and two physically handicapped children have been placed. This type of education is costly, and only children who cannot be otherwise satisfactorily dealt with are so accommodated. The education, training and care provided in schools of this type go a long way towards fitting these less fortunate children for self-supporting careers in adult life, and I am satisfied that the expenditure involved is well worth while.

In a County Borough of the size of Eastbourne, with the staff available, it is possible for very close contact to be maintained between the officers of the Department and the teachers and the children in our schools; also, and of even greater importance, is the maintenance of contact with parents. The members of the staff of the School Health Service are also engaged in duties under the National Health Service Act, and this is a matter of very real significance: the same persons are dealing with pre-school children and their parents, as well as with children of school age. The records of both groups of children are in the same Department, and full information regarding health and circumstances is readily available when a child leaves the security of home life to enter school.

We live in an era of many changes, and in no sphere has a greater upheaval taken place than in the medical world. It is now nearly three years since the coming into operation of the National Health Service Act of 1946. The many weaknesses, inevitable in a measure of such magnitude, have come to light and serious attempts to overcome them are being made. Many people are of opinion that the Act has placed too much emphasis on the curative aspects of medical work, to the detriment of preventive medicine which has played such an important part in the welfare of our people throughout the last century. In the changes that have taken place, the School Health Service has been stripped, prematurely it is thought by a number of people, of many of its former functions. There, indeed, are those who hold the view that the whole Service has outlived its usefulness in the light of the general medical, hospital and dental facilities now available, theoretically at any rate, to every member of the community. Those of us working in the field of social and preventive medicine do not accept this view, and feel that the School Health Service has still an important role to play in helping to ensure that our children grow up to manhood and womanhood endowed with the great gifts of health and physical and mental fitness which are essential to normal, healthy and productive living. It is no easy task to assess in terms of finance the actual return received from the various social and preventive medical services provided. In one section, at least, namely the School Dental Service, it must be apparent to the most superficial observer that money spent on the care of children's teeth will result ultimately in the saving to the State of very considerable sums of money. Here in Eastbourne we are fortunate in retaining the services of two whole-time Dental Surgeons for work in the School Dental Service and for the dental care of nursing and expectant mothers and pre-school children.

To obtain the best results for our children, it is essential for the closest co-operation to be maintained between the School Health Department and the various bodies concerned with the administration of the National Health Service Act. In this connection, I am happy to acknowledge the cordial co-operation I received throughout the year from the local medical practitioners and from the officers of the Local Executive Council. The officers of the Hospital Management

Committee, with whom we have almost daily contact, have given the Department every help and I take this opportunity of expressing my best thanks to them.

Once again it gives me pleasure to tender to the Chief Education Officer and his staff and the Head Teachers my gratitude for their help throughout the year.

To you, Mr. Chairman, to the members of the Education Committee, and, in particular, to the Chairman and members of the School Attendance and Children's Care Sub-Committee to whom I make my monthly report, I tender my best thanks for the whole-hearted co-operation and consideration which I again received.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

JOHN FENTON,

*School Medical Officer.*

## 1. STATISTICS

The number of children on the school registers in January was 5,680 and in December, 5,689. The average attendance of children throughout the year was 5,194, a percentage of 90.92. At the end of the year children were in attendance at the various schools as follows :—

PRIMARY SCHOOLS	Children
Bourne Infants .. .. .	186
Bourne Junior Mixed .. .. .	316
Christ Church Infants .. .. .	93
Christ Church Junior .. .. .	219
Friday Street Infants and Junior Mixed .. .. .	75
Grammar School Preparatory .. .. .	57
Hampden Park Infants .. .. .	163
Highfields County Primary .. .. .	306
High School Junior .. .. .	180
Meads Junior Mixed and Infants .. .. .	107
St. Andrew's Infants .. .. .	156
St. Andrew's Junior Mixed .. .. .	243
St. Joseph's R.C. School .. .. .	155
St. Mary's Boys .. .. .	246
St. Mary's Girls .. .. .	173
St. Mary's Infants .. .. .	284
St. Philip's Infants .. .. .	167
Trinity District .. .. .	137
	3,263
SPECIAL SCHOOLS	
Open Air .. .. .	60
St. Aidan's .. .. .	43

## SECONDARY SCHOOLS

Bedewell .. .. .	486
Bourne County .. .. .	590
Friday Street .. .. .	23
Hampden Park .. .. .	221
St. Joseph's R.C. .. .. .	56
Grammar .. .. .	349
High School .. .. .	350
Commercial .. .. .	136
Technical .. .. .	112
Total .. .. .	<hr/> 5,689 <hr/>

## 2. STAFF

Dr. R. N. Chamberlain, Assistant School Medical Officer, left the service of the local authority on the 30th June and Dr. J. Griffin, who was appointed to fill the vacancy, took up duty on August 1st. Miss J. D. Oswald was appointed to fill the vacant post of Assistant Dental Officer and she took up duty on January 2nd. The vacancy for a Health Visitor and School Nurse was filled by Miss I. P. Lucas, who took up duty on June 1st.

## 3. SCHOOL HYGIENE

Following established custom, the Medical Officers and Sanitary Inspectors made periodic visits to the schools. A survey was made of the washing facilities available and of the provision of towels. The arrangements for the issue of sanitary towels in girls' schools were reviewed.

After being out of use for some years, the old Trinity School Building in Seaside Road was reconditioned and opened in September, 1949. Entirely new sanitary accommodation was installed, and a kitchen-dining room provided. The School now provides, in five classrooms, accommodation for a maximum of one hundred and eighty junior boys and girls.

Over the past two or three years, improvements to the sanitary accommodation have been carried out at the Grammar and Technical Schools and also at the Bourne and Bedewell Schools and at St. Andrew's Junior.

The first section of the new Highfield Primary School at Hampden Park, providing a maximum of 320 places, was opened in November, 1949. The second instalment, now nearing completion, will comprise school hall, three additional classrooms, administrative unit and school health service accommodation, as well as kitchen and dining room.

The new Motcombe Infants School will be completed in the near future and open in September with places for a maximum number of 240 children.

The Technical School will, next Autumn, extend its activities by the opening of a department for training in Catering and House Craft. This unit will be accommodated in a house in Selwyn Road adjoining the existing Technical Institute Buildings.

#### 4. MEDICAL INSPECTION

The practice established in 1947 in regard to the periodic medical inspection of pupils was continued, and the following age groups were inspected :—

- (a) Every pupil admitted for the first time to a maintained school.
- (b) Every pupil attending a maintained Primary School on attaining the age of ten years.
- (c) Every pupil attending a maintained Secondary School in the last year of his or her attendance.
- (d) Every pupil attending a maintained school on attaining the age of seventeen years.

In these groups, 1,555 children were inspected and 217 children were examined under the heading of "other periodic inspections". In addition, children to the number of 1,160 were inspected as "specials" at the request of parents, teachers or school nurses and 3,474 children who at previous examinations were found to have one or more defects were "re-inspected".

Of the 1,772 children examined at periodic inspections, 270, a percentage of 15.24, were found to have one or more defects, other than dental disease or infestation with vermin, requiring treatment.

Parents are invited to be present at the periodic medical inspection of their children : 1,177, a percentage of 62.42, did attend. Three parents refused to submit their children for medical inspection.

GENERAL CONDITION.—The general condition, that is, the general physical fitness, of children examined at periodic medical inspections, was recorded by the inspecting medical officers as follows :—

GOOD	in	635	cases,	a	percentage	of	35.83
FAIR (SATISFACTORY)	in	1,040	„	„	„	„	58.70
POOR	in	97	„	„	„	„	5.47

There are no officially recognised standards for measuring general physical fitness and the nutritional state : as a result, the category in which a child is placed may well vary with the opinion of the inspecting Medical Officer. The 97 children placed in the "poor" group were, in the main, children whose physical condition and general state of health did not quite reach the standard regarded as average.

#### 5. WELFARE

When parents are present at medical inspections, they are advised on the matter of any treatment considered necessary. Where parents are not present they are sent a note of any defect found to require

treatment and are advised to take the child to the family doctor. The doctor is also sent a note of the findings. Follow-up visits are made to the homes by the School Nurses where necessary.

Number of visits by nurses to schools .. .. .	573
Number of visits by nurses to schools for medical inspection .. .. .	158
Number of visits to homes of children by nurses ..	785

## 6. PERSONAL HYGIENE

As in former years, children were inspected by the school nurses for head and general cleanliness at the commencement of each term, and those found to be unsatisfactory were followed up in their own homes as well as at school. The 14,451 inspections made resulted in verminous conditions being found in 22 cases, and 174 children were found to have nit infestation. In all cases of infestation parents were seen and given advice on treatment and prevention. Where there was failure or inability to deal with the condition, arrangements were made for cleansing to be carried out in the Department's Cleansing Centre.

School children were treated at the Centre as follows :—

	<i>Children Attendances</i>	
Nit infestation .. .. .	15	34
Verminous conditions .. .. .	3	13
	—	—
	18	47
	—	—

Washing the hair, preferably with an antiseptic Soap Shampoo, application of a D.D.T. Cream or Emulsion, and combing with a Sacker's Comb, was found to be a very effective treatment.

One Cleansing Notice under Section 54 (2) of the Education Act, 1944, was issued.

On the whole, the standard of cleanliness of our school children was satisfactory. The constant offenders were fewer than in recent years, but it was necessary to give close attention to children from some 26 families.

## 7. EXCLUSION FROM SCHOOL

In addition to the children excluded from school by medical practitioners, 160 children were excluded by the medical staff of the Department. The diseases, number of cases and periods of exclusion, were as follows :—



Speech Defect	..	..	..	..	20
Heart and Circulation (including anaemia)	..	..	..	..	16
Lungs (non-Tuberculous)	..	..	..	..	19
Diseases of gastro-intestinal tract	..	..	..	..	8
Nutritional disorders	..	..	..	..	10
General debility	..	..	..	..	63
Nervous system—					
Epilepsy	..	..	..	..	3
Other	..	..	..	..	41
Educationally retarded	..	..	..	..	33
Psychological disorders	..	..	..	..	53
Orthopaedic—					
Posture	..	..	..	..	17
Genu valgum and varum	..	..	..	..	7
Flat foot	..	..	..	..	13
Other	..	..	..	..	40
Developmental—					
Hernia	..	..	..	..	3
Other	..	..	..	..	6
Tuberculosis—					
Contacts	..	..	..	..	3
Bones and joints	..	..	..	..	1
Glands	..	..	..	..	1
Rheumatism and Chorea	..	..	..	..	3
Debility following Infectious Diseases	..	..	..	..	35
Minor injuries	..	..	..	..	169
Miscellaneous	..	..	..	..	84
					<hr/>
			Total	..	1,134
					<hr/>

Nutrients and Medicaments to the following amounts were, on the advice of the Medical Officers, supplied to children attending Clinics :

Cod Liver Oil and Malt	..	..	1,456 cartons (1 lb.)
Virol	..	..	810 cartons (8 oz.)
Cod Liver Oil	..	..	168 bottles

Fersolate Tablets and Syrup Ferri Phosphate were also supplied.

(b) MINOR AILMENTS CLINIC.—A Minor Ailments Clinic was held daily at Avenue House Clinic. During school terms, daily clinics were held at Hampden Park Hall, Acacia Villa, and on alternate days at the Open Air School.

Number of individual children attending Clinics	..	1,361
Attendances—		
Avenue House Clinic	..	1,612
Acacia Villa	..	492
Hampden Park	..	404
Open Air School	..	283
Total number of attendances	..	2,791
Total number of defects treated	..	1,366

CONDITIONS TREATED

Eyes—					
Blepharitis, styes and other disease of lids				55	
Conjunctivitis	..	..	..	33	
Foreign bodies and other eye ailments	..			77	
				—	165
Ears—					
Otitis	..	..	..	33	
Otitis externa	..	..	..	10	
Wax	..	..	..	16	
				—	59
Skin—					
Impetigo	..	..	..	65	
Other septic skin conditions	..	..	..	90	
Scabies and post-scabies irritation	..			7	
Ringworm of body	..	..	..	23	
Boils and carbuncles	..	..	..	49	
Other skin conditions	..	..	..	109	
				—	343
Injuries—					
Sprains and bruises, etc.	..	..	..	159	
Cuts and abrasions	..	..	..	175	
Other minor injuries	..	..	..	39	
Burns	..	..	..	13	
				—	386
Infestation—					
Pediculosis	..	..	..	8	
Other (Nits)	..	..	..	14	
				—	22
Miscellaneous	..	..	..	..	391
					1,366

(In 1949, 1,701 children made 3,340 attendances for 1,771 defects).

(c) SPEECH THERAPY.—During school terms four sessions were held weekly at Avenue House and two sessions each month were spent visiting children's homes and schools concerned.

Number of cases under treatment at beginning of year	22
Number of cases awaiting treatment at beginning of year	7
New cases referred during the year	22
Number of clinic sessions	162
Number of attendances	814
Number of visiting sessions by Speech Therapist to schools and homes	19
Number of cases discharged	24
Number of cases under treatment at the end of the year	25

(NOTE—Two of the 22 cases referred did not attend for treatment).

Defects treated—						
Deafness	..	..	..	..	..	4
Cleft palate	..	..	..	..	..	1
Sigmatism (inability to pronounce "S")	..	..	..	..	..	11
Dyslalia (defective articulation)	..	..	..	..	..	18
Stammer	..	..	..	..	..	14
Nasal speech	..	..	..	..	..	1
						—
						49
						—
Discharged—						
Dyslalia—Cured	..	..	..	..	..	10
Failed to continue treatment	..	..	..	..	..	1
Cleft palate—Fair speech result	..	..	..	..	..	1
Sigmatism—Cured	..	..	..	..	..	5
Nasal Speech—Satisfactory result	..	..	..	..	..	1
Stammering—Cured	..	..	..	..	..	3
Much improved	..	..	..	..	..	1
Referred to Child Guidance Clinic..	..	..	..	..	..	1
Failed to continue treatment	..	..	..	..	..	1
						—
						24
						—

During the school clinic sessions the following cases were also treated—

Children Under School Age—						
Deafness	..	..	..	..	..	1
Dyslalia	..	..	..	..	..	4
Cleft palate	..	..	..	..	..	1
Delayed speech	..	..	..	..	..	1
						—
						7
Children Over School Age—						
Stammer	..	..	..	..	..	1
Deafness	..	..	..	..	..	1
						—
						2

These cases made 104 attendances.

Six of the nine cases were discharged—

Dyslalia—Cured	..	..	..	..	..	3
Cleft palate—Good speech result	..	..	..	..	..	1
Stammering—Speech greatly improved	..	..	..	..	..	1
Deafness—Admitted to a School for Deaf Children	..	..	..	..	..	1

(d) CHILD GUIDANCE CLINIC.—The continued increase in the number of cases referred resulted in 16 cases awaiting investigation at the end of the year, as against 8 for the previous year.

Pressure of work in the Mental Health Section necessitated the withdrawal, in November, of the services of Miss Fuller, the part-time Social Worker. The close liaison she maintained between the two

Sections was of great administrative and practical value to the Clinic. We were fortunate in securing the services of Miss Craggs as a locum part-time Psychiatric Social Worker.

The present authorised establishment includes of one part-time Psychiatric Social Worker. This is no longer adequate to deal satisfactorily with the increasing demand on the Clinic, and it was recommended that this should be raised to a full-time appointment.

Miss Garson, Educational Psychologist, joined the team in February. This post had been vacant for the latter part of the previous year.

The work undertaken by the team during the year was as follows :—

1. Number of Sessions .. .. .	148
Cases seen—	
Old .. .. .	28
New .. .. .	92
	— 120
Total Attendances .. .. .	701
New cases referred during 1950 .. .. .	98
Cases treated—	
By Psychiatrist .. .. .	45
By Psychologist (excluding those seen by Psychiatrist) .. .. .	15
	— 60
2. <i>Waiting List</i> —	
1st January, 1950 .. .. .	8
31st December, 1950 .. .. .	16
3. <i>Analysis of New Cases</i> —	
A. <i>Source</i> —	
School Health Service .. .. .	85
Parents .. .. .	6
Probation Officer .. .. .	1
Medical Practitioners .. .. .	4
Other Agencies .. .. .	2
	— 98
B. <i>Reasons</i> —	
Nervous Disorders .. .. .	10
Habit Disorders .. .. .	18
Behaviour Problems .. .. .	17
Educational and Vocational Problems .. .. .	49
Delinquency .. .. .	4
	— 98
4. <i>Analysis of Cases seen during 1950</i> —	
A. <i>By Psychiatrist</i> —	
For diagnosis .. .. .	39
For treatment .. .. .	45
(NOTE—13 Parents were seen by the Psychiatrist. Number of attendances, 29.)	

<i>Analysis of Diagnostic Cases—</i>			
Diagnosis and advice .. ..			16
Treatment and case closed .. ..			5
Under treatment .. ..			14
Awaiting treatment .. ..			4
<i>Analysis of Treatment Cases—</i>			39
Satisfactorily adjusted .. ..			8
Much improved .. ..			9
Slightly improved .. ..			2
Still under treatment .. ..			20
Withdrawn—(a) Transferred .. ..			4
(b) Non-co-operative .. ..			2
B. <i>By Psychologist—</i>			45
(a) For ascertainment of I.Q. .. ..			72
<i>Analysis of ascertainment cases—</i>			
Advice regarding education .. ..			33
Vocational guidance .. ..			5
Maladjustment .. ..			32
Advice <i>re</i> emigration .. ..			2
(b) <i>Coaching Cases—</i>			72
Received coaching at end of year			13
Discharged—Satisfactory .. ..			2
			15
(c) Home Visits .. ..			2
School Visits .. ..			6
C. <i>By Psychiatric Social Worker (part-time)—</i>			
Case histories .. ..			15
Interviews .. ..			156
School visits .. ..			42
Home and other visits .. ..			142

(c) OPTHALMIC TREATMENT.—Twenty-six special sessions for Eastbourne schoolchildren were held at the Princess Alice Hospital. Four hundred and thirty children made 500 attendances. Of these, 171 were new cases and 259 were for re-examination.

This Service is provided by the Eastbourne Hospital Management Committee, but the records are kept in the School Health Department and appointments are made by the staff.

<i>Defect—</i>	NEW CASES			
Myopia .. ..				46
Hypermetropia .. ..				35
Squint .. ..				19
Astigmatism .. ..				29
Inflammatory conditions .. ..				3
Other .. ..				2
No refractive error found .. ..				39
				173

*Treatment—*

Glasses prescribed .. .. .	75
Orthoptic treatment .. .. .	3
Drops, Lotions, etc. .. .. .	3
Observation .. .. .	64
No treatment necessary .. .. .	25
	170

NOTE—Two children suffered from two of the above defects. Treatment in one case was refused by the parent and the child was referred to her own doctor.

### 9. DENTAL SERVICES

GENERAL SERVICES.—Forty sessions were devoted to periodic dental inspections and 5,154 children were seen in the following age groups :—

Age	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Total
No.	90	419	516	462	487	464	467	417	514	487	491	214	81	23	20	2	5,154

In addition, children to the number of 470 were seen at the special request of parents. Of the total of 5,624 children inspected, 3,264 were found to require treatment, a percentage of fifty-eight. At the 872 treatment sessions held, 2,495 children made 8,120 attendances for treatment as follows :—

Fillings—

Permanent teeth .. .. .	3,038
Temporary teeth .. .. .	192
	3,230

Number of teeth filled—

Permanent teeth .. .. .	2,532
Temporary teeth .. .. .	160
	2,692

Extractions—

Permanent teeth .. .. .	717
Temporary teeth .. .. .	3,386
	4,103

Administrations of General Anaesthetics .. .. . 1,757

Other Operations—

Permanent teeth .. .. .	4,417
Temporary teeth .. .. .	682
	5,099

ORTHODONTIC TREATMENT.—At Mr. Norman Gray's weekly clinic session, 922 attendances were made by 120 children. At the end of the year, 25 children were awaiting treatment.

Number of cases under treatment at the beginning of the year .. .. .	98
New patients .. .. .	22
Treatment completed .. .. .	11
Left school and treatment not completed .. .. .	6
Failed to complete treatment .. .. .	11
Number of cases under treatment at end of year .. .. .	92

Children to the number of 77 received orthodontic treatment at the ordinary clinics : they made 721 attendances.

Dentures were supplied to 31 children.

REPORT OF THE SENIOR DENTAL OFFICER.—Mr. Berry writes :—

“During the year, routine dental inspections were carried out at all schools maintained by the Authority. At these inspections 5,154 children were examined. These, together with the 470 special applications for treatment, made a total of 5,624 children seen.

Of these, 3,264 or 58 per cent., were found to require treatment, the percentage referred remaining the same as in the previous year. On the introduction of the National Health Service Act in 1948, it was felt that, owing to the facilities under the General Dental Services Scheme, there might be a falling off in the demands on the School Dental Service. The experience, however, of the last two years has definitely proved otherwise, and the acceptance rate for treatment which rose to 80 per cent. in 1949 remained at the same high level in 1950. This figure is well above the average for the whole country and emphasises the interest of Eastbourne parents in the dental health of their children.

Routine inspections occupied 40 sessions and 872 sessions were devoted to treatment. Three thousand and thirty-eight fillings were inserted in permanent teeth and one hundred and ninety-two in temporary teeth. Extractions numbered 4,103, of which 3,386 were temporary teeth. A general anaesthetic was administered in 1,757 cases.

In addition, 31 children were fitted with artificial dentures.

In the orthodontic section, there was an increasing demand for treatment. One hundred and twenty children made 922 attendances at the special weekly clinics, and 77 children made 721 attendances for orthodontic work at the ordinary general clinics. At the end of the year, 25 children were awaiting specialist treatment for irregular and over-crowded teeth and 67 children, suffering from mal-occlusion of a less serious nature, were awaiting treatment at the general clinics.

One of the problems of orthodontia, is the protracted nature of the treatment in a large percentage of cases. It is not uncommon for the treatment of gross mal-occlusion to last over three years, necessitating regular attendance for the fitting and adjustment of appliances. It is, therefore, exceedingly difficult to arrange for any speeding up in the intake of new cases, unless there is a corresponding discharge of completed cases. For this reason, it has been found necessary to include many of the minor orthodontic cases for treatment at the ordinary clinics".

## 10. SCHOOL MEALS AND MILK

Mid-day meals were prepared and served as follows :—

Girls' High School	Kitchen Dining Room.
Grammar School	Kitchen Dining Room.
Bourne County Secondary School	Kitchen Dining Room.
Friday Street School	Kitchen Dining Room.
Meads Junior Mixed and Infants' School	Kitchen Dining Room.
Open Air School	Kitchen Dining Room
Technical School	Kitchen Dining Room.
Trinity District School	Kitchen Dining Room.
Hampden Park County Secondary	Kitchen Dining Room.
	A container service catered for children attending Hampden Park Infants' School.
St. Mary's Boys' School	Kitchen serving meals in school hall for children attending this School.
	A container service catered for children attending St. Mary's Infants' School up to September. From September, St. Mary's Infants' used St. Mary's Boys' School Hall.
Alma Road Central Kitchen	Catered by container service for :— Bedewell Secondary School, Bourne Junior and Infants' Schools, Christ Church Junior and Infants' Schools, Highfield County Primary School, St. Aidan's School, St. Andrew's Junior and Infants' Schools, St. Joseph's R.C. School, St. Mary's Girls' School, St. Philip's Infants' School.
Victory British Restaurant	Provided for pupils attending the Commercial School; also for children entitled to free meals during the school holidays.

Hot mid-day meals to the number of 584,164 were served and of that total, 84,479 were provided free. In the previous year, of the 612,940 meals served, 97,268 were provided free.

The following table shows the number of children taking meals and milk in school on a given day in February, June and October.

(Figures in brackets are those for the previous year.)

Date	No. of Children in Schools	MEALS			MILK	
		Free	Paid	Percentage taking meals	Total taking milk	Percentage taking milk
		PRIMA	RY AND	SECONDARY	DEPARTM	ENTS
February	4,786	370	2,455	59% (59.8%)	4,250	88.8% (88.5%)
June	5,333	423	2,552	55.7% (60%)	4,661	87.4% (89%)
October	5,230	369	2,658	57.9% (61.2%)	4,544	86.9% (89.4%)

The income scale for free meals is as follows :—

<i>Number in Family</i>	<i>Children were granted free meals where the income per head of the family after deducting rent, rates and insurance was the following amount or less</i>
Not exceeding 3	17s. per head.
4 or 5	16s. per head.
Exceeding 5	15s. per head.

Miss E. C. Mulcaster, Organiser of School Meals, writes :—

“No new premises have been opened this year. It is hoped that the new Kitchen Dining Room at Highfield County Primary School, and the Kitchen at Motcombe Infants’ will be ready to begin work in September, 1951.

The number of meals served to children this year shows a slight decrease for the first time since 1943. It does appear that sufficient provision has been made for all children who require school meals”.

## 11. PROVISION OF CLOTHING

Under Section 5 of the Education (Miscellaneous Provisions) Act, 1948, forty-nine children, being members of 28 families, were provided with various articles of clothing by the Authority.

## 12. HANDICAPPED PUPILS Special Educational Treatment

The following is a summary of the position in regard to handicapped pupils :—

A. BLIND.—There were no blind children of school age on the Authority's register.

B. PARTIALLY SIGHTED—

- |                    |   |
|--------------------|---|
| Girl born 19.12.35 | Admitted to the Catholic School for the Blind, Liverpool, on 10th December, 1942.   |
| Girl born 1.2.41   | Admitted to the Catholic School for the Blind, Liverpool, on 20th July, 1943.   |
| Boy born 1.8.40    | Admitted to Drayton Manor School, near Tring, in 1947. Transferred to Dorton House, Dorton, Aylesbury, September, 1948.   |
| Girl born 7.9.43   | Admitted to Barclay School for Partially-Sighted Girls, Sunninghill, Berks, April, 1949.  |
| Boy born 14.5.43   | Recommended for admission to the Open Air School pending a vacancy in a Boarding Special School. (Admitted to Exhall Grange Special School, Coventry, on 9.4.51.) |

C. DEAF—

- |                   |  |
|-------------------|--|
| Girl born 30.5.36 | Admitted to the Royal School for Deaf and Dumb Children, Margate, in September, 1944. Left school 28.7.50 and notified to the Local Mental Deficiency Authority. |
| Boy born 11.4.43  | Admitted to the Royal School for Deaf and Dumb Children, Margate, on 6th September, 1948.  |
| Boy born 17.10.45 | At the end of the year was on the waiting list for admission to a Boarding Special School. (Admitted to Portley House Junior Deaf School, Caterham, on 19.2.51.) |

D. PARTIALLY DEAF—

- |                  |   |
|------------------|---|
| Boy born 6.6.42  | Attending Highfield Junior School. At the end of the year was on the waiting list for admission to a Boarding Special School. |
| Boy born 3.12.42 | Attending the Open Air School pending admission to a Boarding Special School.   |

E. DELICATE—

Of the sixty children in attendance at the Open Air School at the beginning of the year, 53 came within the "Delicate" group, and 7 were "Physically Handicapped".

Sixteen boys and 16 girls were admitted for the following conditions :—

Haemophilia .. .. .	1
Partially Deaf .. .. .	1
Bronchitis .. .. .	3
Asthma .. .. .	3
Debility—General .. .. .	16
Nervous .. .. .	5
Sub-acute Rheumatism .. .. .	2
Multiple Congenital Deformities .. .. .	1
	— 32

The children who left during 1950 were placed as follows :—

Transferred to ordinary schools .. .. .	27
Left for hospital treatment .. .. .	1
Transferred to Residential School .. .. .	1
Left district .. .. .	2
Excluded from School .. .. .	1
	— 32

The average stay of those who left was twenty-four months.

The number of children on the register at the end of the year was 60 :—

Delicate .. .. .	54
Physically Handicapped .. .. .	5
Partially Deaf .. .. .	1

F. DIABETIC—

Girl born 18.7.35 Admitted to London County Council Hutton Residential School, Brentwood, Essex, on 15th April, 1943. (Responsibility accepted from the London County Council February, 1946). Left school, June, 1950.

G. EDUCATIONALLY SUB-NORMAL—

(a) ST. AIDAN'S SPECIAL SCHOOL—

	<i>Boys</i>	<i>Girls</i>
Number on Roll, January, 1950.. .. .	35	9
Admissions .. .. .	4	1
Leavers .. .. .	5	1

Of the five children admitted, one was a re-admission following hospital treatment, and one was a transfer from the area of another Authority.

Of the five boys who left—

Three were transferred to ordinary schools.

Two left to take up employment.

One girl left to take up employment.

Twenty children were referred to the Department by Head Teachers for advice as to suitability for special educational treatment. Following examination, recommendations were made as follows :—

Three children were recommended for transfer to St. Aidan's School.

Ten children—No change recommended, but the progress of these children to be reviewed in six to twelve months.

Three children were recommended for coaching by the Educational Psychologist.

One child was transferred to the Open Air School.

One child was recommended for Speech Therapy.

Two children—No change recommended.

(b) BOARDING SPECIAL SCHOOLS—

One boy, born 13.3.38, admitted to Besford Court Special School in April, 1948.

INEDUCABLE—

Children notified during the year by the Local Education Authority to the Local Mental Deficiency Authority, under Section 57, Sub-sections 3 and 5, of the Education Act, 1944 :—

(a) Under Section 57 (3) .. .. .	4
(b) Under Section 57 (5) .. .. .	—

H. EPILEPTIC—

Boy born 4.4.36	Discharged from St. Elizabeth's School, Much Hadham, on 1.5.50. Admitted to Lingfield Epileptic Colony on 25.10.50.
Boy born 2.8.37	Admitted to Chalfont Epileptic Colony on 14th January, 1941.
Boy born 20.11.35	Admitted to Lingfield Epileptic Colony, on 12th May, 1947.

I. MALADJUSTED.—None.

J. PHYSICALLY HANDICAPPED—

These children differ from those in the delicate class in that their physical handicap is more severe or more lasting.

(a) DAY SCHOOLS—

Girl born 8.7.38 Bronchiectasis	Transferred from the Open Air School to a Secondary School on 15.9.50.
Boy born 11.12.38 Pseudo-hypertrophic muscular dystrophy	Attended a Secondary School.
Boy born 17.6.37 Multiple congenital deformities	Attended the Open Air School. At the end of the year was on the waiting list for admission to a Boarding Special School. (In the Royal National Orthopaedic Hospital, Stanmore from :— 25.2.50 to 20.3.50 18.4.50 to 2.5.50 4.7.50 to 25.7.50 12.9.50 to 22.9.50 Admitted to Hurst Lea School, Kingsgate, Kent, on 19.3.51.)

Boy born 2.8.36 T.B. hip	Transferred from the Open Air School to a Secondary School on 28.4.50.
Boy born 19.9.42 Congenital heart disease	Admitted to the Open Air School on 12.9.47.
Girl born 9.3.37 Spina bifida	Attended the Open Air School. At the end of the year was on the waiting list for admission to a Boarding Special School. (Admitted to Halliwick Cripples School, Winchmore Hill, N.21, on 5.4.51.)
Boy born 4.9.38 Congenital heart disease	Admitted to the Open Air School on 1.9.43.
Boy born 12.6.38 Osteo Chondro Dystrophy	Attended a Secondary School.
Boy born 8.10.37 Congenital heart disease	Transferred from the Open Air School to a Secondary School on 11.9.50.
Boy born 13.10.42 Skull defect following fracture	Admitted to the Open Air School on 12.9.49.
Boy born 4.10.44 Cerebral palsy	Attended an Infant School.
Girl born 1.2.36 Valvular disease of the heart	Transferred from the Children's Residential School of Recovery, Liverpool, to a Secondary School on 15.9.50.
Girl born 13.4.38 Congenital heart disease	Attended a Secondary School.
Boy born 10.6.45 Haemophilia	Discharged from the Open Air School on 1.5.50. Not fit for school at present.
Girl born 14.11.39 Friedreichs Ataxia	Attended a Junior School.
Boy born 29.11.38 T.B. hip	Attended a Junior School. (Admitted to Royal National Orthopaedic Hospital, Stanmore, on 19.5.50, and discharged on 7.11.50.)

(b) BOARDING SPECIAL SCHOOLS—

Boy born 13.5.38 Severe chronic skin condition	Admitted to Goldie Leigh Hospital Special School, 2.1.49.
Boy born 21.9.41 T.B. hip	Royal National Orthopaedic Hospital, Stanmore :— 10.1.50 to 25.2.50 23.3.50 to 4.6.50 10.10.50 to 17.10.50

Girl born 8.12.46 Congenital dis- location of hip	Admitted to the Royal National Orthopae- dic Hospital, Stanmore, on 10.2.50 and discharged 3.3.50.
Girl born 5.3.36 Pulmonary Tuberculosis	Admitted to Bevendean Hospital, Brighton, on 4.12.50.
Girl born 1.9.40 Chorea	Admitted to the Lancing Heart Hospital School on 12.7.50.
Boy born 9.10.38 Osteomyelitis R. tibia	Admitted to the Royal National Orthopae- dic Hospital, Stanmore, on 10.7.50 and discharged 20.8.50.
Girl born 27.8.42 Ichthyosis	Admitted to Goldie Leigh Hospital Special School on 6.9.50.

### 13. INFECTIOUS DISEASES

Notifications of infectious diseases relating to children of school age were as follows :—

	<i>Scarlet Fever</i>	<i>Whooping Cough</i>	<i>Measles</i>	<i>Pneu- monia</i>	<i>Food Poisoning</i>	<i>Para Typhoid Fever</i>	<i>Sonne Dysentery</i>
January ..	3	4	—	—	—	—	—
February	6	4	—	—	—	—	—
March ..	5	2	1	1	—	—	—
April ..	4	5	17	—	—	—	—
May ..	1	1	18	—	—	—	—
June ..	3	2	12	—	—	—	—
July ..	5	6	4	—	—	1	—
August ..	1	1	7	—	1	—	—
September	2	2	2	—	—	—	—
October ..	3	—	29	—	—	—	—
November	5	3	41	—	5	—	—
December	5	—	184	—	—	—	8
	43	30	315	1	6	1	8

TUBERCULOSIS.—One new case of respiratory tuberculosis, in a girl aged 14 years, and four cases of non-respiratory tuberculosis were notified.

The four cases of non-respiratory tuberculosis were :—

Girl aged 10	..	Gland of right groin.
Boy aged 9	..	Glands of neck.
Boy aged 14	..	Meningitis.
Boy aged 15	..	Glands of neck.

INCUBATION AND EXCLUSION PERIODS OF THE COMMONER INFECTIOUS DISEASES

Disease	Incubation Period (days)	Interval between onset of illness and appearance of Rash (days)	Period of Exclusion	
			Patient	Contacts
<i>Scarlet Fever</i>	1—7	1—2	7 to 14 days after discharge from hospital. There must be no sore throat, "septic spots" or discharge from the nose or ear. Medical certificate required before admission.	7 days after the removal of the patient to hospital.
<i>Diphtheria</i>	2—7	—	Medical certificate required before admission.	7 days after removal of patient to hospital. Medical certificate required.
<i>Measles</i>	7—14	3—4	14 days after the appearance of the rash if the child appears well.	INFANTS only who have NOR had the disease should be excluded for 14 days from the date of the appearance of the rash in the last case in the house.
<i>German Measles</i>	5—21	0—2	7 days from the appearance of the rash.	NONE.
<i>Whooping Cough</i>	6—18	—	28 days from the beginning of the characteristic cough.	INFANTS only who have NOR had the disease should be excluded for 21 days from the date of onset of the disease in the last case in the house.
<i>Mumps</i>	12—28	—	14 days from onset of the disease or 7 days from subsidence of all swelling.	NONE.
<i>Chicken Pox</i>	11—21	0—2	14 days from date of appearance of rash.	NONE.
<i>Small Pox</i>	10—21	3	Until the patient is pronounced by a medical practitioner to be free from infection. Medical certificate required	No re-admission without the permission of the School Medical Officer.

DIPHTHERIA IMMUNISATION.—The following figures show the number of children between the ages of 5 and 15 who were immunised against diphtheria.

PRIMARY IMMUNISATION—

By Medical Officers of the Department	..	40	
By General Medical Practitioners	..	16	
		—	56

REINFORCING DOSE—

By the Medical Officers of the Department		657	
By General Medical Practitioners	..	67	
		—	724

The immunisation records show that at the end of the year, 5,130 children, living in the Borough, between 5 and 15 years had been immunised :—

<i>Age Group</i>				<i>Number</i>
5-6	..	..	..	501
6-7	..	..	..	641
7-8	..	..	..	567
8-9	..	..	..	519
9-10	..	..	..	438
10-11	..	..	..	448
11-12	..	..	..	491
12-13	..	..	..	493
13-14	..	..	..	474
14-15	..	..	..	558
				5,130

This number represents 71.03 per cent. of the children in these age groups.

Data collected from the School Medical Records indicate that 4,553 or 80.1 per cent. of children attending the Local Authority Schools have been immunised. The percentage figure for 1949 was 76.62.

The immunising re-agent used was Alum Precipitated Toxoid, but for children over 14 years, Toxoid Antitoxin Floccules was preferred. Supplies for the Clinic and for issue to the General Medical Practitioners were obtained from the Public Health Laboratory Service.

VACCINATION AGAINST SMALLPOX.—According to vaccination returns, the number of children between the ages of 5 and 15 years who were vaccinated during the year is as follows :—

PRIMARY VACCINATION—

By Medical Officers of the Department	..	11	
By General Medical Practitioners	..	26	
		—	37

RE-VACCINATION—

By Medical Officers of the Department	..	60	
By General Medical Practitioners	..	14	
		—	74

## 14. SCABIES

Seven children of school age were found to be suffering from Scabies (16 in 1949); six made thirteen attendances for treatment at the Cleansing Section of Avenue House Clinic, and one was treated at a local hospital.

## 15. RINGWORM OF THE SCALP

During the months of September and October, 17 children of school age were found to be suffering from ringworm of the scalp. Eleven families were affected, 5 cases occurring in one family and 2 cases in each of two families. The children concerned were in attendance at six schools.

Ten children were admitted to Goldie Leigh Hospital, Abbey Wood, London, S.E.2, for treatment, where educational facilities were available. Seven children were treated in the Out-Patient Department of the Middlesex Hospital, London.

Intensive measures, including frequent examination of contacts in the schools and homes, as well as examination of domestic animals, were taken to limit the spread of this troublesome complaint. It was not found possible to determine with any degree of accuracy the source of the outbreak.

## 16. DEATHS OF SCHOOL CHILDREN

Three children of school age died during the year from the following causes:—

5 years	..	F.	..	1.	(a) Asphyxia.
					(b) Oedema of Glottis.
				2.	Asthma. P.M.
5 years	..	F.	..	1.	(a) Pulmonary Oedema.
					(b) Convulsions.
					(c) Encephalitis.
12 years	..	M.	..	1.	(a) Tuberculous Meningitis.

## 17. DIFFICULT AND PROBLEM FAMILIES

(a) Some thirty-five families were regarded as coming into the "difficult and problem" category and were given special attention by the School Nurses.

(b) THE NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN.—At my request, seventeen families, involving 55 children, 23 of whom were of school age, were visited by Mr. Banyard, the local Inspector. One hundred and thirty-five visits were made to these families who were classified as follows:—

General neglect	..	..	..	..	13
Advice and help sought	..	..	..	..	4

In addition, Mr. Banyard made 295 visits to 77 families, involving 166 children, of whom 91 were of school age :—

Neglect .. .. .	43
Advice and help sought .. .. .	27
Beyond control .. .. .	6
Ill-treatment .. .. .	1
	—
Total .. .. .	77
	—

(c) JUVENILE CRIME.—I am indebted to the Chief Constable for the following particulars relating to juvenile crime.

	<i>Males</i>	<i>Females</i>
Sent to Approved Schools .. .. .	2	—
Fined .. .. .	2	—
Probation .. .. .	28	1
Convicted—Discharged absolute .. .. .	1	—
Convicted—Discharged conditionally .. .. .	1	—
Dismissed .. .. .	2	—
	—	—
	36	1
Cautioned .. .. .	31	6
	—	—
Total Offenders .. .. .	67	7
	—	—

(The total number of offenders in 1949 was 53 males and 10 females.)

### 18. EMPLOYMENT OF CHILDREN

Under the Byelaws regulating the employment of children, it is a condition of employment that a Certificate from the School Medical Officer is produced to the employer that such 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. Eighty-eight children were examined and provided with the necessary certificates.

In co-operation with the Youth Employment Service, a special medical report is made on all children due to leave school at the end of each term. The object of this is to ensure that children do not take up employment which would be likely to be injurious or dangerous to health. In this connection, reports were made on 180 children who attended for a special and final medical inspection, and also on 143 children who had recently undergone periodic medical inspection.

Since the raising of the school leaving age, it has been noted that boys and girls enter the labour market with a greater sense of responsibility and with more confidence.

**MINISTRY OF EDUCATION**  
**MEDICAL INSPECTION RETURNS**  
**Year ended 31st December, 1950**

TABLE I.

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

A. PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups :—

Entrants .. .. .	718
Second Age Group .. .. .	477
Third Age Group .. .. .	343
Total .. .. .	1,538
Number of other Periodic Inspections .. .. .	234
Grand Total .. .. .	1,772

B. OTHER INSPECTIONS

Number of Special Inspections .. .. .	1,160
Number of Re-inspections .. .. .	3,474
Total .. .. .	4,634

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.)

Group (1)	<i>For defective vision excluding squint)</i> (2)	<i>For any of the other conditions recorded in Table IIA</i> (3)	<i>Total individual pupils</i> (4)
Entrants .. .. .	15	93	97
Second Age Group	27	68	80
Third Age Group ..	25	23	47
Total (Prescribed Groups)	67	184	224
Other Periodic Inspections	16	35	46
Grand Total ..	83	219	270

TABLE II.

## A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1950

Defect Code No.	Defect or Disease	Periodic Inspections		Special Inspections	
		Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin .. .. .	21	39	133	29
5	Eyes— <i>a</i> Vision ..	83	172	74	17
	<i>b</i> Squint ..	8	24	5	2
	<i>c</i> Other ..	6	6	65	3
6	Ears— <i>a</i> Hearing ..	8	13	12	3
	<i>b</i> Otitis Media	2	12	7	1
	<i>c</i> Other ..	5	4	27	1
7	Nose and Throat ..	33	117	78	39
8	Speech .. .. .	14	24	12	9
9	Cervical Glands ..	4	52	1	5
10	Heart and Circulation	2	27	10	6
11	Lungs .. .. .	10	98	15	5
12	Developmental—				
	<i>a</i> Hernia .. ..	2	18	1	2
	<i>b</i> Other .. ..	5	44	2	4
13	Orthopaedic—				
	<i>a</i> Posture .. ..	10	22	7	10
	<i>b</i> Flat foot ..	20	25	9	4
	<i>c</i> Other .. ..	25	59	36	11
14	Nervous system—				
	<i>a</i> Epilepsy ..	—	3	3	1
	<i>b</i> Other .. ..	1	8	17	24
15	Psychological—				
	<i>a</i> Development ..	5	6	23	11
	<i>b</i> Stability ..	10	36	39	14
16	Other.. .. .	28	79	334	48

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

Age Groups	Number of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants .. .. .	718	278	38.72	396	55.15	44	6.13
Second Age Group ..	477	149	31.24	311	65.20	17	3.56
Third Age Group ..	343	134	39.07	191	55.68	18	5.25
Other Periodic Inspections..	234	74	31.63	142	60.68	18	7.69
Total .. .. .	1,772	635	35.83	1,040	58.70	97	5.47

TABLE III.  
INFESTATION WITH VERMIN

(i) Total number of examinations in the schools by the school nurses or other authorized persons .. .. .	14,451
(ii) Total number of individual pupils found to be infested ..	196
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	1
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944)	—

TABLE IV.  
TREATMENT OF PUPILS ATTENDING MAINTAINED  
PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)  
GROUP 1—DISEASES OF THE SKIN (excluding uncleanliness)

	<i>Number of cases treated or under treatment during the year</i>	
	<i>By the Authority</i>	<i>Otherwise*</i>
Ringworm— (i) Scalp .. .. .	—	17
(ii) Body .. .. .	23	—
Scabies .. .. .	6	1
Impetigo .. .. .	65	1
Other skin diseases .. .. .	248	119
Total ..	342	138

GROUP 2—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	<i>Number of cases dealt with</i>	
	<i>By the Authority</i>	<i>Otherwise*</i>
External and other, excluding errors of refraction and squint .. .. .	170	41
Errors of refraction (including squint) ..	—	470
Total ..	170	511
Number of pupils for whom spectacles were (a) Prescribed .. .. .	—	135
(b) Obtained .. .. .	—	Information not available

GROUP 3—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	<i>Number of cases treated</i>	
	<i>By the Authority</i>	<i>Otherwise*</i>
Received operative treatment—		
(a) for disease of the ear .. .. .	—	—
(b) for adenoids and chronic tonsillitis	—	138
(c) for other nose and throat conditions	—	2
Received other forms of treatment ..	59	72
Total ..	59	212

GROUP 4—ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals .. .. .	12	
	<i>By the Authority</i>	<i>Otherwise*</i>
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patient departments ..	—	20

GROUP 5—CHILD GUIDANCE TREATMENT

	<i>Number of cases treated</i>	
	<i>In the Authority's Child Guidance Clinics</i>	<i>Elsewhere</i>
Number of pupils treated at Child Guidance Clinics .. .. .	60	—

GROUP 6—SPEECH THERAPY

	<i>Number of cases treated</i>	
	<i>By the Authority</i>	<i>Otherwise</i>
Number of pupils treated by Speech Therapists .. .. .	49	—

GROUP 7—OTHER TREATMENT GIVEN

	<i>Number of cases treated</i>	
	<i>By the Authority</i>	<i>Otherwise*</i>
(a) Miscellaneous minor ailments ..	391	557
(b) Other (specify)—		
1. Accidents and injuries.. ..	386	39
2. Rheumatism .. ..	—	2
3. Respiratory .. ..	—	12
4. Circulatory .. ..	—	3
5. Genito-urinary .. ..	—	15
6. Tuberculosis.. ..	—	5
7. Nervous system .. ..	—	8
8. Digestive .. ..	—	30
9. Other conditions .. ..	—	11
Total ..	777	682

\* The numbers given in Groups 1 to 4 and 7 under the heading "Otherwise" are not a complete record as it has not been possible for the required information to be obtained in full from the local hospitals.

TABLE V.

## DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers :—				
(a) Periodic age groups	..	..	..	5,154
(b) Specials	..	..	..	470
Total (1)				5,624
<hr/>				
(2) Number found to require treatment	..	..	..	3,264
(3) Number referred for treatment	..	..	..	3,264
(4) Number actually treated	..	..	..	2,495
(5) Attendances made by pupils for treatment	..	..	..	8,120
<hr/>				
(6) Half-days devoted to :—				
Inspection	..	..	..	40
Treatment	..	..	..	872
Total (6)				912
<hr/>				
(7) Fillings :—				
Permanent Teeth	..	..	..	3,038
Temporary Teeth	..	..	..	192
Total (7)				3,230
<hr/>				
(8) Number of teeth filled :—				
Permanent Teeth	..	..	..	2,532
Temporary Teeth	..	..	..	160
Total (8)				2,692
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(9) Extractions :—				
Permanent Teeth	..	..	..	717
Temporary Teeth	..	..	..	3,386
Total (9)				4,103
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(10) Administration of general anaesthetics for extraction	..	..	..	1,757
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(11) Other operations :—				
Permanent Teeth	..	..	..	4,417
Temporary Teeth	..	..	..	682
Total (11)				5,099
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