

[Report 1962] / School Medical Officer of Health, Essex County Council.

Contributors

Essex (England). County Council.

Publication/Creation

1962

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COUNTY COUNCIL OF ESSEX



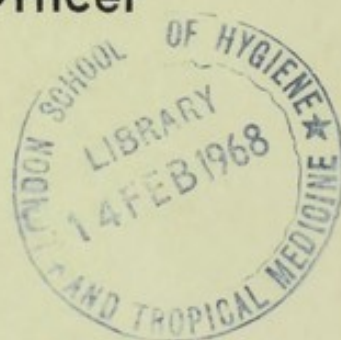
ANNUAL REPORT

OF THE

Principal School Medical Officer

FOR THE YEAR

1962



GEORGE G. STEWART, M.R.C.S., L.R.C.P., D.P.H.

PRINCIPAL SCHOOL MEDICAL OFFICER



COUNTY COUNCIL OF ESSEX



ANNUAL REPORT

OF THE

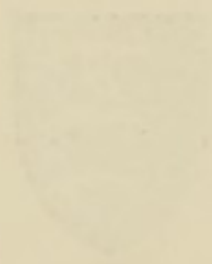
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FOR THE YEAR

1962

GEORGE G. STEWART, M.R.C.S., L.R.C.P., D.P.H.

PRINCIPAL SCHOOL MEDICAL OFFICER



ANNUAL REPORT

OF THE

1881

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P R E F A C E

COUNTY HALL, CHELMSFORD

Telephone: Chelmsford 3231

April, 1963

To the Chairman and Members of the Education Committee

Madam Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report as Principal School Medical Officer for the year 1962.

As from 1st August, 1962, a scheme of Divisional Administration made under the Education Act 1944, with regard to primary, secondary and further education was brought into operation in Harlow, which was formerly part of the Forest Division, but this report (including the report of the Principal School Dental Officer) which has been prepared with the assistance of material submitted by the Divisional School Medical Officers and other senior members of the staff concerned, relates to the Administrative County as a whole.

It is pleasing to note that the health of our school children continues to improve, a fact illustrated by the general statistics which reveal that of all the children examined at periodic medical examinations during the year, only 175 (0.2%) were found to be in the unsatisfactory category. This, however, probably includes a "hard core" of children belonging to problem families and it is therefore doubtful whether the figure indicated will reach a much lower level in the foreseeable future, although every effort will continue to be made to this end.

Reference was made in my previous reports to the fact that the dental staffing position was a matter of concern. As will be seen from the Report of the Principal School Dental Officer, however, the position has improved considerably over the past twelve months and there is every indication that this improvement will continue. This augurs well both for the provision of a priority service for all school children and the successful continuance of the Dental Health Education Campaign at present being undertaken in Harlow.

It is again a pleasure to record my appreciation to the Education Committee for their consideration and support throughout the year. My thanks too are due to the Chief Education Officer and his staff for their co-operation and assistance in all matters relating to the health of the school child, to my own Staff and to all others who have helped in any way in connection with the School Health Service.

I am, Ladies and Gentlemen,
Your obedient Servant,

GEORGE G. STEWART,
Principal School Medical Officer

County Council of Essex

EDUCATION COMMITTEE

(as at 31st December, 1962)

Chairman : Alderman Mrs. E. F. M. Hollis, M.B.E.

Vice-Chairman : Alderman P. S. Powell

COUNTY COUNCIL MEMBERS

Aldermen :

W. J. Bennett, C.B.E., D.L., J.P.
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 Sir George F. Chaplin, C.B.E., J.P.
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S. W. Millard
 Mrs. E. M. Ström Olsen, O.B.E.
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 G. E. Rose, J.P.
 W. A. Sibley

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 R. R. Batey
 R. W. Blythe
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 A. F. J. Chorley, M.B.E., J.P.
 Mrs. E. Coker, B.Sc.
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 F. J. Davis
 R. J. P. Eden
 Mrs. L. Fallaize, J.P.
 Miss D. D. Forster, M.A.
 L. F. Grant, O.B.E.
 Mrs. O. Hall
 Mrs. M. J. Harvey

F. R. Hutton
 Mrs. L. A. Irons, J.P.
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 A. C. Mason
 L. L. Ogier
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 H. R. Turner
 Brig. J. T. de H. Vaizey
 C. Verdult
 Mrs. A. E. Welsh
 Mrs. I. M. Brockelbank

REPRESENTATIVES OF DIVISIONAL EXECUTIVES

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 F. G. Carrick
 A. L. Chamberlain
 G. Colvin, C.B.E., F.C.I.S.
 D. W. Day
 Mrs. W. M. Palethorpe
 D. J. Maidment

A. C. Moles
 W. A. Nichols
 Mrs. F. F. Woods
 C. J. L. Fox
 A. McRae
 H. G. Pembroke

REPRESENTATIVES OF UNIVERSITIES

F. F. C. Edmonds, M.A.
 A. F. Joseph, M.A.

R. P. Tong, O.B.E., M.A.

PERSONS OF EXPERIENCE IN EDUCATION

S. N. Chaplin
 The Venerable A. V. G. Cleall
 G. C. S. Curtis, O.B.E., M.A.
 The Venerable J. E. Elvin
 J. W. Gofton, O.B.E.

H. B. Jenkins
 Mrs. R. C. Littlejohn
 The Rev. F. J. Saurin
 L. S. Webb

REPRESENTATIVES OF TEACHERS

O. J. Ellis
 M. G. Hughes, M.A.
 A. C. Hutchinson

Miss A. I. Walker
 Miss D. A. Williams

STAFF OF THE SCHOOL HEALTH SERVICE

(as at 31st December, 1962)

CENTRAL OFFICE

Principal School Medical Officer:

GEORGE G. STEWART, M.R.C.S., L.R.C.P., D.P.H

Deputy Principal School Medical Officer:

J. A. C. FRANKLIN, M.B., B.S., D.P.H

Principal Senior Medical Officer:

CHRISTINA GRANT, M.B., Ch.B., D.P.H., Barrister-at-Law

Senior Medical Officer:

I. B. MILLAR, M.D., B.Ch., B.A.O., D.P.H

Principal School Dental Officer:

J. BYROM, L.D.S

Superintendent Nursing Officer:

Miss F. S. LEADER, S.R.N., S.C.M., Q.N., H.V.Cert

County Health Inspector:

S. E. WILLIS, M.A.P.H.I

Statistician:

W. H. LEAK, B.A., F.S.S

Health Education Organiser:

C. E. WILLIAMS

DIVISIONAL STAFF

<i>Divisions</i>	<i>Divisional School Medical Officers</i>
North-East Essex	JOHN D. KERSHAW, M.D., B.S., D.P.H
Mid-Essex	J. L. MILLER WOOD, V.R.D., M.R.C.S., L.R.C.P., D.P.H
South-East Essex	A. YARROW, M.B., Ch.B., D.P.H
South Essex	R. D. PEARCE, M.R.C.S., L.R.C.P., D.P.H
Forest	F. G. BROWN, T.D., M.B., Ch.B., B.A.O., D.P.H
Romford	F. GROARKE, M.B., L.M., D.C.H., D.P.H
Barking	MARGARET I. ADAMSON, M.B., Ch.B., D.P.H
Dagenham	J. ADRIAN GILLET, M.B., Ch.B., D.P.H., F.R.S.H
Ilford	I. GORDON, M.D., Ch.B., M.R.C.P., D.P.H
Leyton	E. W. WRIGHT, M.B., Ch.B., D.P.H
Walthamstow	M. WATKINS, M.R.C.S., L.R.C.P., D.P.H
Harlow	I. ASH, M. D., D.P.H
Basildon	P. X. O'DWYER, M.B., B.Ch., D.P.H

Other Divisional Staff
(excluding staff employed by Regional Hospital Boards)

				Number employed	Aggregate of time given to School Health Service (in terms of whole-time officers)
School Medical Officers	.....	.....	.....	105*	40.1
Area Dental Officers	.....	.....	.....	10 }	48.55
Dental Officers	.....	.....	.....	91* }	
Dental Auxiliaries	.....	.....	.....	1	0.9
Health Visitors/School Nurses	.....	.....	.....	292	111.91
Nursing Assistants	.....	.....	.....	51	16.10
Dental Attendants	.....	.....	.....	75	54.54
Speech Therapists	.....	.....	.....	33	28.29
Psychiatric Social Workers	.....	.....	.....	13	12.0
Physiotherapists	.....	.....	.....	3	2.16
Chiropodists	.....	.....	.....	13	3.24
Occupational Therapist	.....	.....	.....	1	1.0

* includes sessional officers

GENERAL STATISTICS

The Registrar General's estimate of population for the Administrative County at mid-year 1962 was 1,895,600, of whom approximately 285,565 were children of school age.

School Population 1962

	Primary Schools	Secondary Schools	Total
North-East Essex	15,460	12,317	27,777
Mid-Essex	20,008	14,345	34,353
South-East Essex	8,600	5,697	14,297
South Essex	28,210	21,321	49,531
Forest	14,911	11,782	26,693
Romford	11,578	9,919	21,497
Barking	5,989	5,127	11,116
Dagenham	9,660	8,465	18,125
Ilford	12,518	9,758	22,276
Leyton	5,429	5,275	10,704
Walthamstow	7,498	8,459	15,957
Harlow	9,203	5,429	14,632
Basildon	11,187	6,753	17,940
Boarding Schools		667	667
Total 1962	160,251	125,314	285,565
Total 1961	159,304	130,884	290,188

Number of Schools

Primary Schools	729
Secondary Schools (including grammar schools)	205
Technical Colleges	10
Nursery Schools	3
Special Schools for handicapped children	24

Distribution of Special Schools

The 24 special schools in the Administrative County cater for handicapped pupils in the following way :—

<i>Category of handicapped pupil</i>	<i>Divisional Executive</i>	<i>Day Schools</i>	<i>Residential Schools</i>	<i>Sex</i>	<i>Accommodation</i>
Educationally subnormal	N.E. Essex	1	—	Mixed	100
	Mid-Essex	—	1	Male	58
	Mid-Essex	—	1	Female	65
	Basildon	1	—	Mixed	140
	South Essex	1	—	Mixed	160
	South Essex	1	—	Mixed	70
	Forest	—	1	Male	120
	Harlow	1	—	Mixed	45
	Barking	1	—	Mixed	100
	Dagenham	1	—	Mixed	150
	Leyton	1	—	Mixed	200
	Romford	1	—	Mixed	100
	Walthamstow	1	—	Mixed	100
	Total	10	3	—	1,408
Maladjusted	N.E. Essex	—	1	Male	45
	Forest	—	1	Mixed	42
	Leyton	1	—	Mixed	60
	Total	1	2	—	147
Delicate and/or physically handicapped	N.E. Essex	—	1	Mixed	90
	South Essex	1	—	Mixed	100
	Barking	1	—	Mixed	80
	Dagenham	1	—	Mixed	50
	Ilford	1*	—	Mixed	120
	Walthamstow	1	—	Mixed	95
	Total	5	1	—	535
Partially sighted	Walthamstow	1	—	Mixed	48
	Total	1	—	—	48
Deaf	Walthamstow	1	—	Mixed	55
	Total	1	—	—	55

* A unit for cerebral palsied children is attached to this school

Children in Hospital Special Schools at end of 1962

Essex

Mid-Essex Hospital School (Black Notley)	.....	.....	72
Other Counties	.....	.....	19
Total	.....	.....	91

Number of School Clinics

Minor ailments	.....	.....	.....	.....	.....	.....	84
Dental	.....	.....	.....	.....	.....	.....	63
Ophthalmic	.....	.....	.....	.....	.....	.....	39
Ear, Nose and Throat	.....	.....	.....	.....	.....	.....	4
Orthopaedic	.....	.....	.....	.....	.....	.....	16
Paediatric	.....	.....	.....	.....	.....	.....	2
Speech Therapy	.....	.....	.....	.....	.....	.....	89
Physical Medicine	.....	.....	.....	.....	.....	.....	28
Orthoptic	.....	.....	.....	.....	.....	.....	11
Sunray (Ultra Violet Light)	.....	.....	.....	.....	.....	.....	5
Chiropody	.....	.....	.....	.....	.....	.....	17
Enuresis	.....	.....	.....	.....	.....	.....	2
Dermatology	.....	.....	.....	.....	.....	.....	1

Further details are referred to in Appendix H.

MEDICAL INSPECTIONS

(See also Appendix A)

A total of 78,301 pupils were examined at periodic medical inspections during 1962, this being a decrease of 1,290 as compared with the number of such examinations carried out during the previous year. In addition 47,143 special or re-inspections were carried out in 1962, this figure being 8,051 less than the figure for 1961.

Periodic Medical Inspection—Experimental Modifications

The alternative experimental schemes of selective medical inspections which might replace periodic medical inspections, referred to in previous Reports, continued satisfactorily in the North-East Division and Harlow. The experiment in the North-East Essex Division continued to expand during 1962 and now includes

approximately half the schools in Colchester. The findings of the Divisional School Medical Officer concerned are that though the number of defects detected is much the same as with the Periodic Medical Inspections, there is a tendency to detect them earlier and in addition more information regarding emotional difficulties is obtained.

Reference was made in last year's report to the fact that the experiment introduced in certain parts of the South Essex Division was discontinued at the end of 1961 as being unsatisfactory. Subsequently, from January 1962, the conventional system (with a variation) was reverted to for a trial period of one year in certain schools in the Division. Under this scheme, at the time children would receive their second medical examination before leaving the junior school, only those who were found by a visiting school doctor or nurse to be in need of examination, or those referred by head teachers, were brought forward and examined. From the reports received however, the Divisional School Medical Officer came to the conclusion that the second medical examination should be retained in the interests of the school children and it is proposed to re-introduce the second medical examination for all pupils.

FINDINGS AT MEDICAL INSPECTIONS

(See also Appendix A)

Physical Condition of School Children

Of the 78,301 children inspected during 1962 only 175 (0.2%) were found to be unsatisfactory as regards their physical condition. This represents a further improvement in the general condition of the children and the following tables show the improvement over the last six years:—

Year	Percentages of children free of defects requiring treatment	Percentages of children unsatisfactory
1957	85.9	1.5
1958	84.6	1.0
1959	84.0	0.7
1960	84.3	0.5
1961	84.7	0.3
1962	85.6	0.2

Details relating to the numbers of children inspected at periodic medical inspections during 1962 as compared with 1961 and the number of those children found to have defects requiring treatment are shown in the following tables:—

Periodic medical inspections : number of children with defects :—

Age Groups Inspected (by year of birth)	Number of children inspected	Number of children with defects requiring treatment	Ratio of children with defects to children inspected	Percentage of children defined as "unsatisfactory"
1961				
1957 and later	336	61	1 : 5.5	—
1956	10,176	1,256	1 : 8.1	0.4
1955	10,805	1,293	1 : 8.4	0.5
1954	1,961	257	1 : 7.6	0.3
1953	613	113	1 : 5.4	0.5
1952	987	219	1 : 4.5	0.6
1951	3,966	602	1 : 6.6	0.3
1950	12,887	2,122	1 : 6.1	0.3
1949	6,315	1,126	1 : 5.6	0.3
1948	1,641	293	1 : 5.6	0.2
1947	8,929	1,406	1 : 6.4	0.3
1946 and earlier	20,975	3,296	1 : 6.4	0.1
1962				
1958 and later	604	38	1 : 15.9	0.5
1957	10,739	1,489	1 : 7.2	0.2
1956	12,481	1,505	1 : 8.3	0.4
1955	2,262	302	1 : 7.5	0.5
1954	613	136	1 : 4.5	0.8
1953	898	200	1 : 4.5	0.4
1952	3,295	509	1 : 6.5	0.2
1951	10,896	1,533	1 : 7.1	0.1
1950	5,950	920	1 : 6.5	0.3
1949	1,676	329	1 : 5.1	0.4
1948	7,117	997	1 : 7.1	0.1
1947 and earlier	21,770	3,325	1 : 6.5	0.1

Cleanliness Inspections

Although the total of 330,944 individual examinations of pupils in schools by school nurses and other authorised persons carried out in 1962 was a reduction of 7,967 on the figure for 1961, there was a proportionate reduction in the number of individual pupils found to be infested.

This illustrates the progressive improvement in head cleanliness over the years and has resulted in most Divisional School Medical Officers gradually reducing the frequency of cleanliness inspections in the majority of schools, though these are still held in certain schools in which inspection once a term is considered to be well justified.

During the year under review it was necessary to issue 13 cleansing notices under Section 54(2) and 2 cleansing orders under Section 54(3) of the Education Act 1944.

The general improvement in this connection over the last 10 years is shown in the following table :—

Infestation with Vermin

	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
Children found to be infested with vermin	3,097	2,535	1,826	1,569	1,417	1,648	1,213	1,200	1,187	1,051
Percentage of school population infested	1.3	1.0	0.7	0.6	0.5	0.6	0.4	0.4	0.4	0.37
Percentage of inspected children infested	0.55	0.42	0.32	0.28	0.24	0.37	0.33	0.35	0.35	0.32

(Further details are set out in Appendix A.)

School Meals Service and School Milk Scheme

I am grateful to the Chief Education Officer for the report on the school meals service and milk in schools scheme, which appears in Appendix G to this report.

TREATMENT OF DEFECTS

(See also Appendix A)

Diseases of the Lungs

A total of 314 children (as compared with 376 last year) examined at periodic medical inspections were referred for treatment because of defects of their lungs and a further 1,028 children were referred for observation because of these defects. Of the number found to require treatment, 121 were examined as entrants, 133 at intermediate examinations (generally at 10-11 years of age)

and 60 as school leavers. In addition 206 children were examined at special inspections carried out during the year because of lung defects and of these, 105 were referred for treatment and 101 required observation.

Children ascertained as physically handicapped pupils because of lung defects were admitted to special schools for the delicate or physically handicapped and in this respect, the County as a whole was served by the Ogilvie School, Clacton-on-Sea.

Heart Disease

During the year, 176 children examined at periodic medical inspections were referred for treatment because of heart defects.

In addition 33 children brought forward for special examination were found to require treatment because of defects of this nature and 66 were recommended for observation.

Diseases of the ears

Hearing. Of the 252 children discovered at periodic medical inspections to require treatment because of hearing disabilities 48 were found among the leaver group and 118 as entrants. These figures further illustrate the view that hearing defects are being detected earlier in school life, with obvious advantages to the children concerned.

Otitis Media. The number of children examined at periodic medical inspections and found to require treatment because of otitis media again showed a significant reduction compared with the previous year. During 1962, 124 children were found to need treatment, compared with 144 during 1961.

Other. Though there was a slight increase in the number of children found at periodic medical inspections to require treatment for other defects of the ear, 153, compared with 109 in 1961, the number of children referred for treatment following special inspections dropped from 270 in 1961 to 136 in 1962.

Orthopaedic defects

Posture. As in previous years 1962 showed a continuing improvement in the number of children discovered at periodic medical inspections to require either treatment or observation because of postural defects. During the year a total of 1,234 children were found to have postural defects, a reduction of 259 on the total for 1961.

Feet. It is pleasing to note that during 1962 there was a welcome decrease in the number of children found to have defects of the feet. The total of 2,139 children referred for either treatment or observation during the year included 1,001 in their first year of school life and 456 leavers.

Other. During 1962 the number of other orthopaedic defects detected at periodic medical examinations totalled 2,275 of which 566 required treatment and 1,709 were referred for observation.

Skin Conditions

During the year under review, a total of 5,818 children required treatment or observation because of skin diseases and of these, 3,321 were examined at special inspections. Of the number of cases treated, only 7 were cases of ring-worm of the scalp or body, 6 of scabies and 79 of impetigo.

Chiropody

A directly provided chiropody service operates for school children in Barking, Dagenham, Leyton and Walthamstow Divisions but in the remainder of the County chiropody treatment remains at present limited to the elderly, the physically handicapped and expectant mothers. In these four Divisions, 1,751 children (who made a total of 5,595 attendances) were treated during the year.

Minor Ailments

The decline in the demand for the treatment of minor ailments at school clinics continued during 1962, and more use was made of these premises for consultation purposes and special medical examinations, the atmosphere of the clinics being more conducive to such examinations than the school premises where periodic medical inspections are carried out.

The following table shows the trend of some of the defects treated at these clinics:—

Conditions for which treatment given	No. of children treated		
	1960	1961	1962
External and other eye diseases, excluding errors of refraction and squint	1,557	1,298	1,146
Diseases of the ear, nose and throat (non-operative treatment)	1,203	1,056	914
Skin diseases, excluding uncleanness	5,550	5,251	4,561
Other miscellaneous minor ailments including enuresis	5,629	4,593	3,726
TOTAL	13,939	12,198	10,347

Enuresis

During the year the arrangements whereby children suffering from nocturnal enuresis could have the use of enuresis alarms free of charge under Section 28 of the National Health Service Act, 1946 were continued.

Special Enuresis Clinics provided in Harlow and Ilford continued as in previous years. The following details give an indication of the work undertaken and results achieved.

Harlow Enuresis Clinic:—

Number of sessions	—	24
Number of patients seen	86	

(consisting of 10 brought forward from 1961

65 new cases

11 relapsed during the year)

Source of referral (new and relapsed cases) :

(1) Family doctors	34
(2) School Medical Officers	30
(3) Child Guidance Clinic	3
(4) Others (1 Headteacher; 1 mother)	2
(5) Cases relapsed	11

Number of patients discharged :

	New Patients	Old Patients	Receiving further treatment after relapse
Cured	9	4	3
Greatly improved	8	1	1
Improved	12	—	3
Slightly improved	8	2	—
Failed to continue treatment	8	2	1
Spontaneous recovery	4	—	—
Withdrawn before commencement of treatment	4	—	—
Referred to Child Guidance Clinic	4	1	1
Still under treatment	12	—	2
	69	10	11

Controlled blind clinic trials were carried out with various drugs, but all proved to be ineffective and it was concluded that the electric buzzer remains the best method of treatment.

Ilford Enuresis Clinic

At this Clinic 33 sessions were held compared with 22 in the previous year and the number of new cases were 70 as compared with 55 in 1961.

A total of 358 attendances were made during 1962 by old and new cases and by the end of the year 48 children had been discharged as completely cured whilst 26 were self discharged or their treatment was not completed.

The following table shows how the 70 new cases came to be referred:—

<i>Recommended by</i>	<i>Under 5 years</i>		<i>Over 5 years</i>	
	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>
Infant Welfare Officers	5	2	—	—
School Medical Officers	—	—	25	7
General Practitioners	6	—	8	5
Parents	1	—	2	3
Health Visitors	1	—	—	1
Consultants	—	—	—	2
Head Teachers	—	—	2	—
Total	13	2	37	18

Diseases of the Eye and Defective Vision

The number of children examined at periodic or school inspections during 1962 who were recommended for treatment or observation because of diseases of the eye and defective vision totalled 9,897, this being 1,818 less than the total for the previous year. Of this total no less than 8,403 were cases of defective vision and in view of the continuing high incidence of visual defects in school children the arrangements with the Regional Hospital Boards for the staffing and provision of specialist ophthalmic clinics have continued to be kept under review.

Recuperative Holidays

Arrangements were made during the year for 435 children to have recuperative holidays. This shows a slight increase on the figure of 404 for 1961.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER FOR 1962

Staff

On the 31st December, 1962, the number of dental officers in post for all the dental services of the County Council was the equivalent of 55.6 dental surgeons. As a result of voluntary evening sessions the figure was increased by about the equivalent of 3 whole-time officers. Approximately one eleventh of the time available was devoted to the treatment of expectant and nursing mothers and children under school age. There is a need for about 100 dental officers to provide basic treatment for the priority classes in the Administrative County.

The following Health Areas now have Area Dental Officers—North-East Essex, Mid-Essex, South-East Essex, Forest, Romford, Ilford, Leyton, Walthamstow and also the Borough of Colchester and it is a pleasing factor to note that the Staffing position has improved considerably over the past twelve months—in fact the increase is approximately 55%, and the situation is still improving.

The following table shows the staffing position of the past few years:—

<i>Year</i>	<i>Whole-time</i>	<i>Part-time and Sessional</i>	<i>Equivalent Whole-time</i>
1950	18	16	23.0
1958	20	51	36.2
1959	20	57	36.5
1960	17	46	32.5
1961	19	55	35.75
1962	33	66	55.6

Statistics

During the year under review 127,489 children were inspected, 72,719 required treatment, 62,606 were offered treatment and 32,440 were actually treated. Of the children inspected 12½% were emergency cases for the relief of pain or other emergency states. It is clear that the number of children treated under the National Health Service is increasing year by year.

The ratio of permanent teeth filled to permanent teeth extracted was 7.4 : 1 in 1962 as compared with 6.6 : 1 in 1961, 6.0 : 1 in 1960 and 6.0 : 1 in 1959. Most of the dental officers' time is spent on conserving teeth.

These statistics all compare favourably with last year and reflect the improved staffing position. In interpreting these figures it should be borne in mind however that less than half of the children in maintained schools were inspected, so there are still no grounds for complacency.

A detailed statistical return will be found in Appendix A.

Premises and Equipment

New Dental Suites were built at the County Health Services Clinics at Clacton-on-Sea, Maldon and Hulse Avenue, Romford, and opportunity was taken to provide new dental equipment for these Centres. Many of the other dental surgeries have had additional modern equipment and the general picture throughout the County in this respect is good.

Orthodontics

The Consultant appointed by the North-East Metropolitan Regional Hospital Board in this highly specialised branch of dentistry has now added a clinic at the Chelmsford and Essex Hospital, London Road, Chelmsford, to those already being held at Whipps Cross Hospital, Leytonstone, Essex County Hospital, Colchester and Southend-on-Sea. The north-west of the County continues to be covered by the Orthodontist employed by the East Anglian Regional Hospital Board. 629 cases were completed by the dental officers, compared with 688 last year.

General Anaesthetics

Assistant County Medical Officers continue to attend courses on General Anaesthetics at the Eastman Dental Hospital as necessary. Eleven thousand four hundred and fifty administrations were undertaken for school children during the year and in addition teeth were extracted under general anaesthetic for 104 mothers and 579 pre-school children. It is highly important that the calibration of the general anaesthetic machines is maintained correctly and the regular servicing of the machines by the makers continues.

Dental Appliances

The County Dental Laboratories at Walthamstow and Barking continue with the work of making dentures, orthodontic appliances and many other items. The two laboratories produced during the year 659 orthodontic appliances, and 206 dentures for school children along with other pieces of work such as crowns and inlays. In addition to this work for school children the laboratories undertake prosthetic work for mothers who are treated by the authority under Section 22 of the National Health Service Act 1946. Some work is also let out to mechanics to the profession.

Dental Research

Members will recall that they granted permission for the Research Staff of the London Hospital Dental School to carry out research with medicated tooth paste for children in some grammar schools in the County, over a period of four years. The work is being carried out in the precincts of the schools in a specially designed mobile dental unit equipped with X-ray apparatus. This saves time-consuming visits by the children to local clinics. Professor Geoffrey L. Slack, O.B.E., T.D., F.D.S., R.C.S. Dip. Bact., Professor of Dental Surgery at the London Hospital Dental School, who is in charge of the investigation, has reported that the initial inspections have been completed.

Dental Auxiliaries

Two posts of Dental Auxiliary were created in January 1962 and authority given for application to be made to the Director of the School of Dental Auxiliaries for two candidates to be allocated from the first course of training for duty in the Administrative County.

One of these Auxiliaries took up duty in Leyton in September 1962 working under the direct supervision of the Area Dental Officer. The first report received indicates that the duties undertaken by the Dental Auxiliary are being carried out in a most satisfactory manner.

Fluoridation of Water Supplies

The report of the five-year investigations into the efficacy of adding up to 1 p.p.m. of fluoride to drinking water to prevent dental decay has now been published jointly by the Ministry of Health, the Scottish Office and the Ministry of Housing and Local Government. The results of these investigations show that reduction in dental decay amounted to 66% in the 3 year old children, 57% at 4 years, and 50% at 5 years. In children at 6 to 7 years whose teeth had not had the full benefit of fluoride, reduction was 26% and 14% respectively. It seems logical to give all children a chance to benefit similarly.

Dental Health Education

The Dental Health Education campaign in Harlow referred to in last year's report has entered its third year and the lack of suitable staff has been satisfactorily overcome and the work is now proceeding normally. During the year initial Dental Health weeks were held in 17 schools and follow-up talks given in other schools in Harlow.

In addition Dental Health weeks were held at two junior schools in Barking. Increases in the dental staff at Barking resulted in Dental Inspections in schools which have been without dental cover for a considerable time and these two

Dental Health weeks were arranged specifically to stimulate interest in the benefits accruing from dental treatment. Our efforts in all this work have been helped by the ready co-operation of the teachers.

At the invitation of the British Dental Association a display of our Dental Health material was staged at the Association's Annual Conference at Nottingham University in July 1962. The subject of the display was "Dental Health Education Teaching in Essex." A letter of thanks was subsequently received from the British Dental Association.

"By no means sufficient consideration has been given to the question of prevention. If we are to obtain an improvement in the condition of the teeth of the nation, it will be by teaching the individual to prevent the condition and not rely on a cure." This is a quotation from the *Lancet* of August 23rd 1919 and it is still only too true. It is only relatively recently that dental health education has been undertaken on any appreciable scale and the local authority dental service is in a unique position to carry out this preventative work. It is encouraging to be able to say that this local authority is in the forefront.

J. BYROM.

SPEECH THERAPY

The table below gives details of those children with speech defects who were receiving treatment at the end of 1962 at speech therapy clinics provided by the County Council

Analysis of Children receiving Speech Therapy at the end of 1962

Speech Defect	Number of Children						
	Under 5 years of age	Attending infant schools	Attending junior schools	Attending secondary schools	Attending special schools	TOTALS	
Delayed development, including aphasia	82 (79)	142 (86)	59 (15)	11 (6)	88 (66)	382	249
Defect of articulation	87 (104)	641 (717)	326 (390)	62 (100)	78 (98)	1,194	1,282
Stammer	12 (7)	51 (51)	115 (143)	134 (159)	13 (20)	325	431
Stammer and articulation defect combined	3 (3)	24 (29)	27 (26)	4 (7)	8 (5)	66	81
Defect associated with hearing loss	4 (3)	19 (14)	19 (17)	4 (6)	9 (6)	55	41
Disorder of voice	6 (5)	14 (17)	19 (14)	14 (9)	9 (6)	62	32
Unclassified	10 (15)	15 (10)	16 (13)	4 (4)	33 (16)	78	77
TOTAL	204	906	581	233	238	2,162	—
1962	216	919	618	291	217	—	—
1961	148	811	692	322	220	—	—
1960						—	2,193

NOTE: Figures in parenthesis relate to 1961

CHILD GUIDANCE SERVICE

In my Report for the year 1961 reference was made to the proposed establishment of a separate Child Guidance Clinic in Leyton and arrangements that were being made for the consultant psychiatrist in charge of the Unit for Disturbed Children at Whipps Cross Hospital to also be in clinical charge of the Clinic.

The appointment of Dr. W. R. Little to the post of part-time Consultant Psychiatrist to Leyton Child Guidance Clinic and the Whipps Cross Hospital Paediatric/Psychiatric Unit coincided with the opening of the Leyton Child Guidance Clinic on 1st October and I am indebted to both Dr. Little and the Educational Psychologist for the following reports:—

Dr. W. R. Little reports:—

"Since beginning work there, 39 patients have passed through my hands mostly coming from Child Guidance units in Essex and north-east London, referred directly to me; and from my paediatric colleague Dr. Hinden most of whose patients reach me through their family doctors.

There are over twice as many boys as girls, and the common median ages are nine to eleven for boys and seven to nine for girls.

The median period of admission is between one and three weeks although there are variations in this, some patients awaiting suitable plans to be implemented although their treatment is complete. The majority of the patients suffer from primary habit disorders (as represented by difficulties with elimination, sleeping and eating). Other common diagnoses include intellectual handicap, motor over-activity and neurosis (obsessive, compulsive and hysterical states); somatic symptoms occur frequently in patients referred by Dr. Hinden.

More staff is needed and I have asked for trained nurses, an occupational therapist and a psychiatric social worker.

From the point of view of the education of these children, most of whom are up-patients, a full-time teacher is needed (with relief during school holidays because the unit remains open throughout the year).

The services of an educational psychologist are also needed or the unit will be less well equipped than the clinics who refer patients for admission.

With the increase in staff, more space both in and out of doors will be needed especially for the teacher and the occupational therapist and I will refer again to this when I have discussed it further with the Hospital Management Committee."

Miss A. M. Marshall, Educational Psychologist reports:—

"The opening of the new Child Guidance Clinic in Dawlish Road,

Leyton, has been a great step forward. As a result the number of children referred jumped from 37 in the second quarter of the year (the third quarter has the long summer holiday in it and so is not comparable) to 45 in the last three months of the year. There will be difficulties for some time until a full staff is appointed and while the psychologist has to do her work from two clinics (Forest Area is still attached to the Walthamstow Child Guidance Clinic), but there is a great promise in the closer integration of work for the mental health of children in Leyton now made more possible. Leyton has its own Child Guidance Clinic, a close link with the local hospital children's wards and a unit for psychiatric patients in the children's department there, a day school for maladjusted children and a remedial reading scheme in the Junior Schools. There are already close links with the Infant Welfare and School Medical Service and during 1962, a teachers' discussion group on maladjustment was inaugurated and was received with such an excellent response that it had to be split into three groups. The Psychologist leads one group and two psychiatric social workers from the Walthamstow clinic lead the other two."

Staffing

The establishment and staff in post at the end of December 1962 are shown in Appendix H.

Referrals

The following table shows how cases were referred to Child Guidance Clinics during the year:—

Source of Referral	1960	1961	1962	Expressed as percentages		
				1960	1961	1962
School Medical Officers and Health Visitors	496	487	612	29.8	29.1	31.3
General Practitioners	278	263	335	16.7	15.7	17.1
Consultants	116	129	135	7.0	7.7	6.9
Educational Psychologists.....	199	205	227	11.9	12.2	11.6
Head Teachers	141	152	142	8.5	9.1	7.3
Children's Officer	74	45	63	4.4	2.7	3.2
Probation Officers	69	66	57	4.1	3.9	2.9
Magistrates	93	104	126	5.6	6.2	6.4
Direct Referrals (parents, etc.)	184	217	228	11.0	13.0	11.7
Others	13	7	29	1.0	0.4	1.5
Totals	1,663	1,675	1,954	100	100	100

Further information about pupils dealt with is to be found in Appendix B to this report.

The School Psychological Service

The Chief Education Officer, to whom I am indebted, has supplied me with the following report on the School Psychological Service for the year 1962:—

“There have been some staff changes during the year, and it has not always been possible to replace a member of the staff immediately, so that the number of children seen has been rather less than in 1961—about 3,000 as against 3,500. This is a little more than 1% of the school population and probably does not represent at all accurately the number of children needing specialised help but only what could be done with the available staff. Miss Bonniface left the South Essex Division in April, after eight years of very valuable service to the County. It has not proved possible as yet to appoint anyone in her place. There was a gap of six months in the South-East Essex and Basildon Divisions after Mr. Hopkins left, but we were very glad to welcome Mrs. Foote in May. We were also very glad to be able to increase the staff in the Mid-Essex Division by the appointment of Mr. Davey in September, as it was impossible to cover the work in so rural and widespread an area with only one Psychologist.

The work of the Psychologists has continued on much the same lines as in former years, with the bulk of cases coming from junior schools, where problems of learning and behaviour are always most pressing. There are interesting signs, however, that teachers are becoming more aware of the value of seeking unobtrusive advice and help for younger children, as the number referred from infant schools seems to be increasing. This may partly have resulted from the discussion groups with teachers which several Psychologists have held during the year, often at the Child Guidance Clinics, and in which the importance of early nurture has been stressed. As in former years, at the junior school stage about twice as many boys as girls are referred for help. The reason for this is probably that the main difficulty for which help is sought remains that of backwardness in reading, which is usually far more pronounced in boys than in girls. The kind of behaviour problems, also, found in boys are often of the outgoing and aggressive type which cause more obvious difficulty to parents and teachers. That girls of the junior school stage also have their problems, although these do not always get the help they should, is reflected in the fact that the number of girls referred at the secondary stage is much larger. The trend noted earlier, of referring to the Psychologist children of better ability, has continued, and will probably increase as more day and boarding school provision for children of limited ability becomes available.

There has been a steady increase in the number of special classes and part-time remedial groups set up throughout the County, but the pace of this increase has necessarily been limited by the shortage of full-time teachers. Some additional day provision has, however, been possible for maladjusted children, thus obviating the need to send them away from home.

The Psychologists have continued to act as Liaison Officers between the Child Guidance Clinics and the schools, keeping the schools informed on children's progress at the clinic and bringing back to the clinic staff valuable information from the teachers about children's progress or continuing difficulties in school. They also continued to refer to the clinics emotionally disturbed children first brought to their notice because of some difficulty of learning or adjustment in school which masked a deeper problem. The proportion of such children varies from year to year according to the way in which the Service is organised locally, but it may be as much as 18% of the children seen.

Lectures and talks have been given as usual to teachers, parents, Women's Groups and house parents, with the aim of keeping the general public informed about the nature of the help which is available and of trying to ensure that the children referred are those most needing help. The County has also once again afforded facilities for the practical work of Psychologists in training."

HANDICAPPED PUPILS

Appendix C to this report gives a summary of the numbers of children ascertained at the end of 1962 as handicapped pupils. The total number so ascertained was 12.3 per thousand of the school population as compared with 12.0 per thousand in 1961 and 11.4 in 1960.

Blind and Partially Sighted Pupils

At the end of 1962 there were 48 children ascertained as being blind and of these children 43 were placed in boarding schools and 5 were awaiting placement. There were 76 school children ascertained as partially sighted pupils, 48 of whom were attending special schools as day pupils, 23 were in boarding schools and 5 were awaiting placement either in day or residential schools.

The following figures show the trend in the incidence of blind pupils over the past ten years:—

1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
0.25	0.23	0.22	0.24	0.23	0.21	0.20	0.20	0.19	0.17

During 1962, five children were newly assessed as needing special educational treatment at special schools or in boarding homes because of blindness, this figure being the same as for 1961.

There was, however, a slight increase in the number of children ascertained as partially sighted, this being 11 as compared with 9 during the previous year.

The Joseph Clarke School for the Partially Sighted continued to meet the demands of its extensive catchment area and though the children attending at the

end of the year numbered 49, this was a decrease of 7 over the previous year. During the year the children came from Barking, Basildon, Canvey Island, Chigwell, Dagenham, Harlow, Hutton, Ilford, Leyton, Loughton, Pitsea, Rainham, Romford, South Ockendon, Walthamstow and Woodford. Some children from Middlesex, (Edmonton, Tottenham and Wood Green) also attended the school.

At the end of the year, the visual acuity (Snellen) after correction in the school was :—

- 7 children had acuity less than 6/60;
- 15 children had acuity of 6/60;
- 7 children had acuity of 6/36;
- 10 children had acuity of 6/24;
- 10 children had acuity of 6/18.

Seventeen children in the school had monocular vision, whilst five children had additional handicaps.

The average number on the roll during 1962 was 53.9 with an average attendance of 46.7. Ten children were admitted during the year and thirteen were taken off roll as follows :—

- 1 moved out of the catchment area;
- 2 transferred to residential schools;
- 10 to employment.

Deaf and Partially Hearing Children

New Developments in the education of children with impaired hearing and in the use of hearing aids and other auditory equipment for stimulating the use of even a small amount of hearing have made it necessary to reconsider the suitability of definitions of pupils with impaired hearing and in September 1962 the Ministry of Education substituted the term "Partially hearing" for "Partially deaf."

The number of children ascertained as requiring special educational treatment during 1962 was four, a reduction of no less than five over the figure for 1961. There was, however, an increase in the number of pupils ascertained as partially hearing, the figure for 1962 being 20 as compared with 13 for the previous year. At the end of the year, five deaf pupils and five partially hearing pupils were awaiting placement either in day or residential schools.

The William Morris School for the Deaf in Walthamstow continued during 1962 to serve a wide catchment area and pupils were drawn from the South-East Essex, South Essex, Forest, Barking, Dagenham, Ilford, Leyton, Romford and Walthamstow Divisions.

When the school re-opened in January 1962, 49 children were on the roll and during the year eight children were admitted and one pupil, a partially hearing girl, left to take up employment in the Bank of England Printing Works.

Mr. K. S. Pegg, the Headmaster of the Special School, reports as follows about the teaching arrangements and equipment used by the pupils :—

“After Whitsun, the two reception classes were transferred to specially prepared and equipped classrooms at Thorpe Hall School. The children, both deaf and partially hearing, now have the opportunity of mixing with hearing children at play and have settled down very happily.

The number of visits to the school has increased and tape recordings have been prepared which show the effects of varying degrees of hearing loss on speech, the acquisition of language, and some of the difficulties experienced by the uses of hearing aids.

Binaural listening experiments are still in progress and we are continuing to co-operate with the Post Office Engineers Department in an attempt to find the most suitable material for hearing aid cases.”

During November 1962, a new unit for deaf children was opened at the Glebe School in Rayleigh and I am indebted to Dr. A. Yarrow, Divisional School Medical Officer, South-East Essex Division, for the following report:—

“It was intended to open for nursery age children only in 1962, and for older children in 1963. From the start, however, children came to light of infant school age who would obviously benefit from transfer to the unit, where special facilities are available. In consequence, it opened with two children in the nursery full-time and three older children attending part-time at the school proper and part-time at the unit. Within a fortnight of opening, two more nursery age children turned up, making four at the nursery plus the infants. Of these, five were from South-East Essex, one from Mid-Essex and one from South Essex.

The Unit itself is equipped with the most modern electronic aids as well as the usual nursery equipment. Its situation is such that a high degree of integration is possible with the children in the normal school.”

Delicate Pupils

As in the two preceding years I am again able to report a reduction in the number of children ascertained during the year as requiring special educational treatment because of their being delicate. During the year under review, a total of 114 children were so ascertained, this being 10 less than during 1961. At the end of the year, 33 delicate pupils were awaiting placement in day or residential schools.

The practice of admitting both delicate and physically handicapped children to special schools continued during 1962 and I am grateful to Dr. R. D. Pearce, Divisional School Medical Officer for the South Essex Division, for the following report on the work undertaken at the Grays Open Air School:—

"Remedial treatments were continued throughout the year. The junior and infant children had a rest period on beds of forty-five minutes each day, whilst the seniors had a quiet period of half-an-hour. A number of children made periodic check-up visits to local hospitals and also some London hospitals at which they are outpatients. Two were recommended for transfer to residential open air schools and two girls received a period of convalescence.

No child made a complete year's attendance but fifteen made one or two full terms attendance.

Throughout the year the greater number of admissions were below eight years of age. Among these were an increasing number of handicapped rather than delicate children.

Unfortunately once again the school suffered the loss by death of one boy suffering from congenital heart disease.

The number of children in attendance throughout the year was 101, of which 23 were new admissions."

Educationally subnormal children

During 1962, 325 children were newly assessed as needing special educational treatment at special schools or in boarding homes because of educational subnormality.

Reference was made in my previous report to the Mead Special Day School, Nazeing, for educationally subnormal pupils. This school had its full capacity of 45 children on the roll at the end of the year and 11 children who had been ascertained as requiring special education were placed on the school's waiting list.

The Margaret Brearley school for the educationally subnormal had 96 children on the register at the end of 1962 and the population of the school apart from one Ilford pupil consists entirely of Walthamstow children.

During the year, there were 16 leavers from this school. Two, at the request of their parents, were transferred to the Loughton Training Centre, while the remainder were placed in some form of employment some having done exceedingly well. Two children were transferred to the Junior Training Centre after a period of trial, two boys were transferred to a residential school and two children were transferred to Secondary Modern Schools.

Reference was made in my previous report to the considerable waiting list for admission to the Corbets Tey Special School in the South Essex Division. It is pleasing to record that during the year accommodation was increased by twenty places which, together with the removal of the children from Romford (transferred to their own school), made possible the admission of 57 children from the waiting list.

The Havering Grange School, Romford for educationally subnormal pupils was opened in September, 1962. The school is designed to cater for 100 children

but owing to staffing difficulties it was not possible to admit more than about half this number. The first entrants consisted largely of Romford children transferred from special schools in neighbouring areas, but several newly ascertained children were also admitted. There is however still a considerable waiting list.

The Treetops School, Grays, for educationally subnormal pupils had 61 children on the roll at the end of 1962, of which 16 were admitted during the year. Alterations have been made to two classrooms in order to provide accommodation for another class. Twelve children left during the year and of these two were excluded because they were found unsuitable for education at school, one died, two were transferred to other schools and seven attained school leaving age. Of the seven who left, five have taken up employment, two boys working in engineering factories, one boy in a garage, one boy in a transport firm and another in a factory.

Maladjusted Pupils

During the year 105 children were newly ascertained as maladjusted pupils. It is interesting to note that this number is exactly the same as for 1961. A total of 88 maladjusted pupils were newly placed at the end of the year and 77 pupils were awaiting placement in residential special schools.

Epileptics

Six children were assessed during 1962 as requiring special educational treatment because of epilepsy, this being a reduction of two over the figure for the previous year. At the end of the year one epileptic child was attending a special school as a day pupil, 27 were at residential schools and 4 were awaiting placement in residential schools.

The incidence of epileptic children continued to fall and in 1962 was 0.11 per thousand school population compared with 0.13 per thousand in 1961 and 0.15 per thousand in 1960.

Physically Handicapped Pupils

During the year 54 children were assessed as requiring special educational treatment at special schools or boarding homes because of physical handicaps, this being 28 fewer than during the previous year. The number of physically handicapped children newly placed during the year totalled 58, an increase of 6 over the figure for 1961. The number of children remaining unplaced at the end of the year was 23, ten of these awaiting placement in day special schools and 13 in residential schools. I am obliged to Dr. D. M. B. Gross, School Medical Officer, for the following report on the Cerebral Palsy Unit at Becontree:—

“During the year in question the number of children on roll varied between 23 on the 31st December, 1961, and 20 on the 31st December, 1962.

In reviewing the work undertaken throughout this period 6 children were examined in connection with suitability for admission, of these 4 were

accepted and came from the following areas.

Ilford	.....	.....	.....	.....	.....	.....	1
South Essex	.....	.....	.....	.....	.....	.....	2
Dagenham	.....	.....	.....	.....	.....	.....	1

The two children rejected, with the reason for rejection and the responsible Authority concerned, were :—

- South Essex (a) Did not present a true case of cerebral palsy and physically was above the average normally accepted at the Unit.
- (b) Would probably be able to cope at an ordinary school.

The admissions numbered 3, from the following areas :—

Ilford	.....	.....	.....	.....	.....	.....	1
South Essex	.....	.....	.....	.....	.....	.....	1
Dagenham	.....	.....	.....	.....	.....	.....	1

This therefore leaves 2 children on the waiting list, one from the South Essex Division and one from Romford carried over from 1961. In connection with the last-mentioned child, admission has been deferred until such time as it is considered that he will be able to benefit from all the facilities offered at the Unit although meantime he has been having physiotherapy once a week.

The pupils discharged from the roll numbered 4 and the reason together with the Authority concerned is as follows :—

- Forest Division (a) Transferred to a residential special school of the National Spastics Society.
- (b) Removal from area.
- Romford Transferred to a residential special school.
- South Essex Action under Section 57(4) of the Education Act.

It is hoped that in the Autumn of 1963 the present building will be vacated and the Unit transferred to the new school in Barley Lane. The children of Benton and the Unit will then all be under one roof which will make administration and general supervision easier. It also means that much of the therapy will be available to all the children on the spot with minimal loss of time spent in transportation and less interruption of actual education.

Although the Cerebral Palsy children will have their own wing they will now be able to mix with the other children and share as fully as possible in the life of the school as a whole. This is particularly desirable in the

case of such severely handicapped children whose opportunities are inevitably very limited."

At the end of the year there were 89 children on the roll of the Wingfield House School for the Physically Handicapped, Walthamstow, the children being drawn from the Walthamstow, Leyton, Forest and South Essex Divisions and also from Middlesex. The average number on the roll during the year was 89 with an average attendance of 70.7. The 89 children on the roll at the end of 1962 were classified as follows:—

Delicate	19
Physically Handicapped	67
Epileptic	3

B.C.G. VACCINATION

The present arrangements whereby school children from the age of 10 years and students attending training colleges, universities and other establishments for further education are given protection against tuberculosis by vaccination with B.C.G. continued during 1962.

It will be observed from the following table which gives an indication of the work carried out during the year that there was a marked reduction over the preceding year in children who received B.C.G. vaccination. While the acceptance rate remains as high as in previous years, however, the months normally chosen to carry out B.C.G. vaccination in schools coincided with the public concern over cases of smallpox and many parents preferred their children to be vaccinated against smallpox rather than tuberculosis.

Division (1)	Number of children skin tested (2)	Positive reactors at preliminary test		Number of children who received B.C.G. vaccination (5)
		Number (3)	Percentage (4)	
North-East Essex	1,397	100	7.2	1,259
Mid-Essex	1,742	288	16.5	1,454
South-East Essex	1,114	76	6.8	990
South Essex	2,457	212	8.6	1,757
Forest	2,146	152	7.1	1,836
Romford	1,720	71	4.1	1,522
Barking	869	91	10.5	778
Dagenham	815	77	9.4	721
Ilford	1,078	78	7.2	950
Leyton	910	130	14.3	786
Walthamstow	1,136	205	18.0	931
Harlow	694	55	7.9	643
Basildon	913	69	7.6	822
Total	16,991	1,604	9.4	14,449

For purposes of comparison the results of Tuberculin tests of school children carried out prior to B.C.G. vaccination during the last seven years were as follows:—

	1956	1957	1958	1959	1960	1961	1962
Number of positive reactors	1,528	1,353	1,318	1,097	1,903	1,530	1,604
Percentage of positive reactors amongst children tuberculin tested	15.4	12.2	11.0	8.9	9.4	7.6	9.4

During 1961 and extending into 1962, some research was done by Dr. Eileen Martin, School Medical Officer, Barking Division, at the instigation of, and in co-operation with, Dr. T. M. Pollock of the Wellcome Foundation. This was carried out at one of the Barking Secondary Modern Schools during the routine B.C.G. vaccination of school children, the aim being to determine the relative sensitivity to avian bovine and human tuberculin after vaccination with B.C.G.

The results were regarded by Dr. Pollock as of considerable interest and his own research is to be continued, using a group of nurses and students.

I am indebted to Dr. Pollock for his report on this survey which appears as Appendix E.

INFECTIOUS DISEASES

The Table at Appendix D to this report shows the total number of notifications of infectious and other notifiable diseases in school children received during 1962. The total of 5,189 shows a decrease of 14,092 on the total received during the previous year. As pointed out in my previous Report, 1961 was a cyclic "measles year" and the overall reduction for 1962 was in the main due to a reduction in the number of measles notifications.

It is interesting to note however that there was a noticeable drop in the number of dysentery cases notified, 174 in 1962 as against 363 during 1961, and there were also 28 fewer cases of food poisoning.

Some Sonne dysentery occurred in two Ilford schools during the Christmas term. In one of these schools some 60 children were affected and this persisted throughout the whole term.

The Kennylands Residential Secondary Modern School was beset with an extensive outbreak of influenza during the early part of the year, when it became necessary to open one of the dormitories as a sick bay. Outside nursing assistance had to be enlisted and the minor epidemic lasted many weeks.

HEALTH EDUCATION

The extending co-operation of the Schools' teaching staff enabled a further extension of health education to be undertaken. During 1962 a large number of exhibitions and campaigns relating to dental health, personal hygiene and the danger of smoking were staged in the schools, whilst lectures often supported by films, film strips and other visual aids were given on a wide range of subjects including smoking, prevention of accidents, foot health, dental health, general health, personal hygiene, mothercraft, home-making and care of the skin.

The importance of health education teaching in schools has become widely accepted and teaching staff are continually requesting assistance and guidance in health education matters. There was also an increase in the demand for medical and nursing staff to visit schools to give talks to senior pupils. The staff undertaking this work are specially selected to ensure that they are competent in imparting information to the pupils.

PHYSICAL EDUCATION

I am indebted to the Chief Education Officer for supplying the report by the Senior Organisers of Physical Education which is included in this Report as Appendix F.

ROAD ACCIDENTS

Once again I am grateful to the Chief Constable of Essex for letting me have the following information relating to road accidents in the County Police District in which children under 15 years of age were involved.

There were 13 fatal accidents during 1962, a decrease of six on the figure for the previous year. Of the children concerned, seven were killed as pedestrians, four when riding pedal cycles and two when passengers in vehicles.

	1960	1961	1962
Child pedestrians injured	520	542	543
Child pedal cyclists injured	400	399	343
Child passengers injured	307	331	283

Casualties in age groups

<i>Years</i>	<i>Casualties</i>	
	1961	1962
0—1	10	13
1—2	21	23
2—3	37	45
3—4	74	64

4—5	80	106
5—6	91	99
6—7	89	98
7—8	95	69
8—9	98	84
9—10	82	82
10—11	85	79
11—12	101	88
12—13	118	97
13—14	150	111
14—15	160	124
Total	1,291	1,182

The main causes of these accidents and the age groups involved were as follows :—

		Pedestrians	
		0·5 years	5·15 years
Pedestrians crossing road not masked by moving or stationary vehicle	.....	62	202
Pedestrians crossing road masked by vehicle	.....	53	145
		Pedal Cyclists	
		0·5 years	5·15 years
Turning right without due care	.....	1	74
Inattention or attention diverted	.....	1	45

During the peak hours 3 p.m. to 6.0 p.m., no less than 426 accidents occurred and again as in the previous year the peak concentration of accidents (168) occurred between 4 p.m. and 5 p.m.

A total of 203 accidents occurred on Saturdays, 194 on Fridays and 176 on Thursdays.

APPENDIX A

MEDICAL INSPECTION AND TREATMENT

RETURN FOR THE YEAR ENDED 31st DECEMBER, 1962

Part I.—Medical Inspection of Pupils Attending Maintained Primary and
Secondary Schools (including Nursery and Special Schools)

Table A.—Periodic Medical Inspections

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)
1958 and later	604	601	99.5	3	0.5
1957	10,739	10,714	99.8	25	0.2
1956	12,481	12,437	99.6	44	0.4
1955	2,262	2,250	99.5	12	0.5
1954	613	608	99.2	5	0.8
1953	898	894	99.6	4	0.4
1952	3,295	3,289	99.8	6	0.2
1951	10,896	10,880	99.9	16	0.1
1950	5,950	5,930	99.7	20	0.3
1949	1,676	1,669	99.6	7	0.4
1948	7,117	7,110	99.9	7	0.1
1947 and earlier	21,770	21,744	99.9	26	0.1
TOTAL	78,301	78,126	99.8	175	0.2

Table B.—Pupils found to require Treatment at Periodic Medical Inspections
(excluding Dental Diseases and Infestation with Vermin)

<i>Age Groups Inspected (By year of birth)</i> (1)	<i>For defective vision (excluding squint)</i> (2)	<i>For any of the other conditions recorded in Part II</i> (3)	<i>Total individual pupils</i> (4)
1958 and later	13	27	38
1957	267	1,357	1,489
1956	312	1,310	1,505
1955	81	246	302
1954	54	103	136
1953	104	136	200
1952	220	332	509
1951	780	889	1,533
1950	491	529	920
1949	169	194	329
1948	559	526	997
1947 and earlier	2,222	1,308	3,325
TOTAL	5,272	6,957	11,283

Table C.—Other Inspections

Number of Special Inspections	.....	.....	.....	19,808
Number of Re-inspections	.....	.....	.....	27,335
Total	.....	.....	.....	47,143

Table D.—Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	.....	.....	.....	330,944
(b) Total number of individual pupils found to be infested	.....	.....	.....	1,051
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	.....	.....	.....	13
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	.....	.....	.....	2

Part II—Defects Found by Medical Inspection During the Year

Table A.—Periodic Inspections

Defect Code No. (1)	Defect or Disease (2)	PERIODIC INSPECTIONS							
		Entrants		Leavers		Others		Total	
		*(T) (3)	*(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4	Skin	229	420	525	551	387	385	1,141	1,356
5	Eyes— a. Vision	648	1,397	2,717	849	1,907	885	5,272	3,131
	b. Squint	314	224	69	73	180	139	563	436
	c. Other	67	88	63	73	75	129	205	290
6	Ears— a. Hearing	118	508	48	117	86	215	252	840
	b. Otitis Media	71	373	24	84	29	128	124	585
	c. Other	60	126	57	39	36	80	153	245
7	Nose and Throat	650	2,389	127	391	196	782	973	3,562
8	Speech	304	489	28	59	92	145	424	693
9	Lymphatic Glands	65	807	7	109	9	241	81	1,157
10	Heart	71	314	57	181	48	236	176	731
11	Lungs	121	525	60	193	133	310	314	1,028
12	Developmental—								
	a. Hernia	43	112	9	21	29	68	81	201
	b. Other	70	658	69	248	154	591	293	1,497
13	Orthopaedic—								
	a. Posture	33	229	122	364	136	350	291	943
	b. Feet	328	673	144	312	309	373	781	1,358
	c. Other	167	543	182	658	217	508	566	1,709
14	Nervous System—								
	a. Epilepsy	27	52	25	31	45	22	97	205
	b. Other	34	188	37	89	52	153	123	430
15	Psycho'logical—								
	a. Development	70	295	42	111	166	197	278	603
	b. Stability	61	474	26	130	81	316	168	920
16	Abdomen	20	139	9	43	23	72	52	254
17	Other	96	141	101	99	104	144	301	384

*(T)=Treatment.

(O)=Observation.

Table B.—Special Inspections

Defect Code No.	Defect or Disease	Special Inspections	
		Pupils requiring Treatment (3)	Pupils requiring Observation (4)
(1)	(2)		
4	Skin	3,125	196
5	Eyes—		
	(a) Vision	643	358
	(b) Squint	55	31
	(c) Other	375	45
6	Ears—		
	(a) Hearing	193	117
	(b) Otitis Media	58	28
	(c) Other	136	23
7	Nose and Throat	435	174
8	Speech	314	119
9	Lymphatic Glands	18	27
10	Heart	33	66
11	Lungs	105	101
12	Developmental—		
	(a) Hernia	10	16
	(b) Other	81	79
13	Orthopaedic—		
	(a) Posture	46	64
	(b) Feet	200	131
	(c) Other	382	274
14	Nervous System—		
	(a) Epilepsy	11	49
	(b) Other	108	64
15	Psychological—		
	(a) Development	193	96
	(b) Stability	265	127
16	Abdomen	36	32
17	Other	1,312	437

Part III—Treatment Tables

Table A.—Eye Diseases, Defective Vision and Squint

	<i>Number of cases known to have been treated</i>
External and other, excluding errors of refraction and squint	2,781
Errors of refraction (including squint)	22,465
Total	25,246
Number of pupils for whom spectacles were prescribed	10,889

Table B.—Diseases and Defects of Ear, Nose and Throat

	<i>Number of cases known to have been treated</i>
Received operative treatment—	
(a) for diseases of the ear	29
(b) for adenoids and chronic tonsillitis	1,700
(c) for other nose and throat conditions	74
Received other forms of treatment	1,389
Total	3,192
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1962	57
(b) in previous years	295

Table C.—Orthopaedic and Postural Defects

	<i>Number of cases known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments	4,653
(b) Pupils treated at school for postural defects	147
Total	4,800

Table D.—Diseases of the Skin (excluding uncleanness, for which see Table D of Part I)

	Number of cases known to have been treated
Ringworm—	
(a) Scalp	2
(b) Body	5
Scabies	6
Impetigo	79
Other skin diseases	4,475
Total	4,567

Table E.—Child Guidance Treatment

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	2,701

Table F.—Speech Therapy

	Number of cases known to have been treated
Pupils treated by Speech Therapists	3,733

Table G.—Other Treatment Given

	Number of cases known to have been treated
(a) Pupils with minor ailments	3,513
(b) Pupils who received convalescent treatment under School Health Service arrangements	435
(c) Pupils who received B.C.G. Vaccination	14,449
(d) Other than (a), (b) and (c) above	
Enuresis	213
Total	18,610

Part IV—Dental Inspection and Treatment Carried out by the Authority

(1) Number of pupils inspected by the Authority's Dental Officers—	
(a) At Periodic Inspections	111,430
(b) As specials	16,059
Total	127,489
(2) Number found to require treatment	72,719
(3) Number offered treatment	62,606
(4) Number actually treated	32,440

(5) Number of attendances made by pupils for treatment (excluding those recorded at 13 (i) below)	76,246
(6) Half days devoted to—	
(a) Periodic (School) Inspection	980
(b) Treatment	17,797
Total	18,777
(7) Fillings—	
(a) Permanent Teeth	57,614
(b) Temporary Teeth	22,921
Total	80,535
(8) Number of teeth filled—	
(a) Permanent Teeth	52,080
(b) Temporary Teeth	20,335
Total	72,415
(9) Extractions—	
(a) Permanent Teeth	7,020
(b) Temporary Teeth	22,488
Total	29,508
(10) Administration of general anaesthetics for extraction	11,450
(11) Number of pupils supplied with artificial teeth	206
(12) Other operations—	
(a) Permanent Teeth	22,335
(b) Temporary Teeth	13,963
Total	36,298

Dental Work

(13) Orthodontics—

(i) Number of attendances made by pupils for orthodontic treatment	10,374
(ii) Half days devoted to orthodontic treatment	919
(iii) Cases commenced during the year	953
(iv) Cases brought forward from the previous year	1,862
(v) Cases completed during the year	629
(vi) Cases discontinued during the year	241
(vii) Number of pupils treated by means of appliances	2,616
(viii) Number of removable appliances fitted	857
(ix) Number of fixed appliances fitted	34

APPENDIX B

Child Guidance Tables, 1962

Table 1—Cases referred, treated and closed at each clinic

	Colchester	Chelmsford	Basildon	Grays	Harlow	Romford	Ilford	Leyton	Waltham- stow	All Clinics
Cases referred during 1962	158	316	342	163	157	290	167	45	316	1,954
Cases closed during 1962—										
Treatment complete	39	71	46	39	43	94	46	1	63	442
Treatment incomplete	40	89	33	26	31	124	44	3	82	472
Not treated	45	28	22	28	41	18	107	17	128	434
Total	124	188	101	93	115	236	197	21	273	1,348
Cases on the books at the end of 1962—										
Awaiting first appointment	22	2	63	25	21	78	23	22	63	319
Under treatment	50	513	392	89	163	275	66	71	107	1,726
Others	137	—	377	144	157	28	322	122	132	1,419
Total	209	515	832	258	341	381	411	215	302	3,464

Table 2—Cases referred by age, sex and Division

	<i>Under 5</i>		<i>Over 5</i>		<i>Total</i>
	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	
North East Essex	10	5	102	41	158
Mid Essex Essex	4	9	160	113	286
South East Essex	7	3	74	34	118
South Essex Essex	10	7	176	71	264
Forest & Harlow	20	3	173	77	273
Romford	9	4	81	46	140
Barking	—	1	37	13	51
Dagenham	5	3	53	18	79
Ilford	6	3	80	27	116
Leyton	10	4	78	43	135
Walthamstow	13	6	61	30	110
Basildon	20	12	134	58	224
Total	114	60	1,209	571	1,954

APPENDIX C
Summary of Handicapped Pupils—1962

Category	Newly placed in special schools or homes	Newly assessed as needing special educational treatment at special schools or in Boarding Homes	Number attending special schools		Attending Independent Schools	Number boarded in homes	Educated under arrangements made under Sec. 56		Number remaining unplaced	
			Day Pupils	Boarding Pupils			At home	In Hosp.	Day	Residential
Blind	5	5	—	43	—	—	—	—	—	5
Partially sighted	10	11	48	23	—	—	—	—	3	2
Deaf	4	4	48	36	18	—	1	—	1	4
Partially Hearing	17	20	76	25	25	—	—	—	1	4
Delicate	97	114	174	129	14	5	6	60	8	26
Physically Handicapped	58	54	225	93	13	2	48	80	10	13
Educationally sub-normal	345	335	1,124	344	40	—	20	—	233	70
Maladjusted	88	105	29	113	123	29	8	—	—	77
Epileptic	9	6	1	27	—	—	—	—	—	4
Speech Defects	7	4	1	6	1	—	—	—	—	5
TOTAL	640	658	1,726	839	234	36	83	140	256	210 (466) (parents refused in 31 cases)

APPENDIX D

Notification of Infectious and Other Notifiable Disease in Schoolchildren, 1962

Division	Scarlet Fever	Whooping Cough	Acute Polymyelitis	Acute Polymyelitis Non- Paralytic	Measles	Dysentery	Food Poisoning	Tuberculosis Respiratory	Tuberculosis Other	Acute Pneumonia	Others*	Total
North-East Essex	48	5	—	—	112	65	3	—	2	7	2	244
Mid-Essex	78	54	—	—	618	—	1	4	—	7	—	762
South-East Essex	53	12	—	—	226	3	2	3	—	2	—	301
South Essex	108	15	—	1	657	9	10	9	—	15	1	825
Forest	96	1	1	1	323	8	—	2	—	1	1	434
Romford	29	5	—	1	420	1	1	1	1	2	—	461
Barking	16	30	—	—	72	2	—	2	1	2	—	125
Dagenham	49	28	1	—	112	3	—	2	1	—	1	197
Ilford	102	25	—	—	568	50	13	2	—	5	1	766
Leyton	17	15	—	—	138	25	8	—	—	1	1	205
Walthamstow	51	8	—	—	29	—	4	2	2	1	—	97
Harlow	96	3	—	—	119	6	2	1	—	2	—	229
Basildon	32	14	—	—	493	2	—	—	2	—	—	543
TOTAL—1962	775	215	2	3	3,887	174	44	28	9	45	7	5,189
TOTAL—1961	899	358	2	4	17,462	363	72	34	7	69	11	19,281

* "Others" comprise—Acute encephalitis, post-infectious 3, Erysipelas 2, Meningococcal infection 1, Paratyphoid 1.

APPENDIX E

TUBERCULIN SURVEY IN BARKING SCHOOL CHILDREN

Report of DR. T. M. POLLOCK, of the Wellcome Foundation

During recent years there has been much speculation about the origin of tuberculin sensitivity. One cause of sensitivity is known to be infection by the tubercle bacillus but in recent years there has been some evidence that tuberculin sensitivity may also be caused by other organisms. This supposition has led to misgivings as to the value of the tuberculin test and information about sensitivity is still urgently required.

The basis of the immunological studies which has indicated that tuberculin sensitivity has a dual origin is the hypothesis that tests with tuberculin prepared from the same organism (homologous tuberculin) produces a higher degree of sensitivity than tuberculin prepared from different organism (heterologous tuberculin). Thus when concurrent tests are made on the same individual with tuberculin prepared from—for example—human and avian tuberculin, a larger reaction to the human tuberculin would indicate an infection with a human type bacillus whereas, if the reaction to the avian tuberculin was the larger, it would be concluded that the organism responsible for the sensitivity was an avian bacillus.

Although the greater sensitivity produced by homologous tuberculin has always been assumed, the relative potency of homologous and heterologous tuberculin has been insufficiently investigated in man; accordingly this relationship was examined in Barking school children. The general plan of the investigation was to carry out concurrent post-vaccination tests with bovine tuberculin and avian tuberculin in B.C.G. vaccinated children and to compare the degree of sensitivity produced since B.C.G. vaccine is prepared from a bovine organism and the bovine tuberculin in this case was a homologous and avian a heterologous tuberculin. The vaccinated children were divided into two groups; one of these groups was given their positive vaccination test with bovine tuberculin and the other with avian tuberculin. The proportion who responded to avian tuberculin and to the bovine tuberculin were then compared.

All the tests were made at Park Modern School by Dr. Martin in co-operation with Dr. Pollock. The tuberculin was supplied by the Ministry of Agriculture's Weybridge Laboratories and dispensed by the laboratories of the Wellcome Foundation. At the first study in April and May 1961, 147 children presented themselves for vaccination. One group of these children was tested 12 days after vaccination and the second group was tested 41 days after vaccination. Two doses of tuberculin were used, namely, one tuberculin unit, followed if this test

was negative, by 100 tuberculin units. Of those who were tested 12 days after vaccination 88% were positive to the avian and 100% were positive to the bovine tuberculin. Of those who were tested 41 days after vaccination 21% of those tested with the avian tuberculin were positive, whereas 50% were positive to the bovine tuberculin using 1 tuberculin unit. However, when those who were tuberculin negative were tested with 100 tuberculin units, it was found that 100% reacted to the avian tuberculin and also 100% to the bovine tuberculin. The findings therefore, indicated that the homologous bovine tuberculin was, on the whole, more potent than the avian tuberculin.

A second study was made among children vaccinated in November 1961. Twenty-four children were tested in January 1962, with avian tuberculin and 24 with bovine tuberculin. In this study there was a reversal of the previous findings. Eight of the children reacted to 1 tuberculin unit of the avian tuberculin whereas only 3 reacted to 1 tuberculin unit of the bovine tuberculin. The size of the reactions was also greater in the avian tuberculin. Those children who gave no reaction to 1 tuberculin unit were retested with 10 units. All responded to this dose but the mean diameter was greater with the avian tuberculin. The results of this study, therefore, were in contrast to that of the previous investigation. That is to say, in this study, the heterologous avian tuberculin was more potent than the homologous bovine tuberculin.

As a result of these findings a further study was undertaken in March of 1962, where children who had been vaccinated the previous January were tested with the very small dose tuberculin 0.1 tuberculin units followed for those who were tuberculin negative with a test of 5 units of the avian and bovine tuberculins. It was found that 13 of the 29 (47%) children tested with bovine (homologous) tuberculin were sensitive to the bovine tuberculin, whereas 23 of 39 (59%) children tested with the avian (heterologous) tuberculin were tuberculin sensitive. Thus in this study also the heterologous tuberculin was more sensitive than the homologous tuberculin.

Taking all the findings of all these studies into account it is evident that a homologous tuberculin is not invariably more potent than heterologous tuberculin. These findings are of great interest to the interpretation of tuberculin sensitivity. They should be confirmed by a further study and then published.

APPENDIX F

The following report by the Senior Organisers of
Physical Education has been submitted by the
Chief Education Officer

The most important aspect of the work of the organisers of physical education is the further training of teachers. This, as usual, has been carried out by conducting courses on the various subjects in different parts of the County. All the courses have been well attended and appreciated, and the work in the schools testifies to their value. In addition, advisory visits have been paid to Youth Centres and Evening Institutes thus encouraging the continuation of physical activities by young people after leaving school.

As well as the basic gymnastics and dances the children have the opportunity of taking part in an ever widening selection of sports. It is interesting to list the summer and winter activities that are now taught and practised in schools.

Winter

Football (Association and Rugby), Hockey, Netball, Basketball, Lacrosse, Badminton, Boxing, Swimming, Cross Country Running.

Summer

Cricket, Tennis, Athletics, Swimming, Rounders, Camping, Sailing, Canoeing.

A few schools introduce golf and others conduct mountaineering expeditions.

With such a wide range of subjects, the organising staff are fully occupied not only in helping and advising but in keeping in touch with modern developments themselves. Advantage has been taken of the services of the National Coaches, and during the year several of them visited Essex to conduct Teachers' Courses in Hockey, Swimming and Canoeing.

The voluntary associations organised and conducted by enthusiastic teachers contribute enormously to the progress in the various subjects. Most of these Associations have their own County teams, some of which compete in the National Championships, and all at County level. Essex teams continue to hold their own against other Counties, and are usually amongst the leaders.

Rugby Football

As well as ordinary matches the annual seven-a-side competitions take place now in several Divisions of the County and great interest and excitement is shown at these close-of-the-season tournaments. The Essex County R.F.U. is now a separate association having broken away from the parent Eastern Counties R.F.U. The Schools County XV has had a very successful season in its inter-county matches.

Sailing

Sailing is still rapidly expanding and the annual regatta held at Heybridge Basin catered for a large number of schools and craft.

Badminton

Badminton is gaining in popularity and the Essex Schools' Badminton Association held inter-school tournaments at Stanford-le-Hope and Walthamstow. Essex children had great success in the National Junior Badminton Championships.

Basketball

The Essex Schools' Basketball Association was formed during the year, and County matches at various ages were played.

Swimming

So many children take part in Swimming, it deserves particular mention.

Three new indoor swimming baths were completed at Sweyne Grammar School, Rayleigh, Barstable Grammar School, Basildon, and the Technical School, Shenfield, making six such baths constructed since the war. They are extensively used for teachers' courses and Youth Service, as well as by the children.

An interesting exhibition was held at the County Show. A swimming bath of the "Purley Pool" type was erected, and classes of primary and secondary school children demonstrated swimming lessons under their class teacher. Boys and girls of youth age showed swimming strokes, and the large crowd also saw how to lift a sailing dinghy into and out of the water.

Parent-Teacher Associations with financial help from the Education Committee continued to install learner pools in primary schools resulting in a big increase in the number of children learning to swim.

An interesting experiment is being made at Kings Road Primary School, Chelmsford. Their bath is an open air "Purley Pool," 40 feet by 20 feet and it has been heated by a commercial firm, as an experiment, both in the water and overhead, and the children were able to continue their swimming lessons until almost the end of November.

A swimming certificate has been instituted for physically handicapped children in order that they may record their achievements in the water, and be encouraged to make still greater efforts.

During 1962 the South-East Essex Women's Keep Fit Association and the

North Essex W.K.F.A. were formed and all classes throughout Essex can now affiliate to one or other of the four associations that serve the County, and can benefit from the Rallies, Courses and Meetings that are organised to help this kind of work.

It would take too long to enumerate the activities of all the Associations, but thanks and congratulations are due to all the teachers who give so freely of their time and skill in conducting them.

Staff

Miss J. Ogden, Assistant Organiser of Physical Education, was appointed Organiser of Physical Education for the County Borough of Southend-on-Sea, and Miss J. Mills was appointed in her place. Mr. R. Morris was transferred from Barking, Ilford and Dagenham to the Forest, Leyton and Walthamstow Divisions. The vacancy will be filled in 1963.

APPENDIX G

Miss A. J. Halsall, the School Meals Organiser, reports as follows :—

The number of schoolchildren having meals on a typical day in September 1962 was 147,569. This figure shows that the percentage of children having meals was 55.3% of school attendance and was the highest since 1951. The charge for school dinners for day pupils at maintained schools has not been increased during the year and remains at 1/-.

The programme for replacing sculleries at old schools has continued. 22 schools have been opened or replaced during the year and all have included new kitchens.

The training scheme which was established in 1961 made considerable progress during the year. 102 staff of all grades have attended full-time courses while short courses varying in length from half a day to one week have been attended by over 1,000 staff. At a special course held at Thurrock Technical College, 25 staff attended for one day a week for a period of eight weeks. Only two of the ten training centres which have been opened have operated for a full year, but already there is evidence that the courses are much appreciated by the majority of staff who attend them. Much real benefit is being experienced in filling gaps in basic knowledge and the interest which is aroused is particularly encouraging. It is hoped that the training scheme will go a long way to assist in the difficulties which have been found in the appointment of suitable staff for supervisory posts in kitchens.

A summary of the relevant figures of the consumption of milk and meals is given below :—

<i>Date of Return</i>	<i>No. of pupils</i>	<i>No. having dinner</i>	<i>Per cent of pupils having dinner</i>	<i>No. having milk</i>	<i>Per cent of pupils having milk</i>
Autumn 1947	169,556	103,372	62.1	153,671	90.7
Autumn 1951	201,129	112,690	56.0	170,658	84.9
Autumn 1955	243,523	124,833	51.3	208,781	85.2
Autumn 1959	268,512	135,443	50.5	226,158	83.9
Autumn 1960	268,317	141,158	52.6	218,427	81.3
Autumn 1961	273,139	143,444	52.5	223,879	81.9
Autumn 1962	266,838	147,569	55.3	220,007	82.2

APPENDIX H

MINOR AILMENT CLINICS

NORTH-EAST ESSEX DIVISION

Health Services Clinic, Shrub End, Colchester	Fridays p.m.
School Clinic, Trinity Street, Colchester	Mondays to Fridays p.m. (not Thursday)
Health Services Clinic, 38 Main Road, Harwich	Tuesdays a.m.
Health Services Clinic, Colchester Road, Halstead	Wednesdays a.m.
Health Services Clinic, 31 Skelmersdale Road, Clacton-on-Sea	Mondays p.m.
New Church Schoolroom, Brightlingsea	Wednesdays p.m. | In conjunction
Great Bentley Village Hall, Great Bentley	4th Friday p.m. | with C.W.C.s

MID-ESSEX DIVISION

Health Services Clinic, Coggeshall Road, Braintree	Tuesdays 10.0 a.m.
Health Services Clinic, Coval Lane, Chelmsford	Mondays 9.30 a.m.
Health Services Clinic, Wantz Chase, Maldon	1st, 3rd and 5th Friday 10.0 a.m.
Health Services Clinic, Melbourne Avenue, Chelmsford	2nd Tuesday 10.0 a.m.
Health Services Clinic, 69 High Street, Saffron Walden	Thursdays 10.0 a.m.
Central Hall, Stansted	2nd Thursday 9.30 a.m.
Health Services Clinic, Guithavon Street, Witham	1st and 3rd Thursday, 9.30 a.m.
Health Services Clinic, 56 New Street, Dunmow	2nd Monday 10.0 a.m.
St. Peter's Room, Coggeshall	4th Monday 10.0 a.m.
St. Mary's, Kelvedon	2nd and 4th Friday 10 a.m.

SOUTH-EAST ESSEX DIVISION

Health Services Clinic, Great Wakering	Mondays a.m.
Health Services Clinic, Rocheway, Rochford	Tuesdays a.m.
Health Services Clinic, Eastwood Road, Rayleigh	Tuesdays and alternate Saturdays a.m.
Health Services Clinic, Kenneth Road, Thundersley	Thursdays a.m.
Health Services Clinic, Furtherwick Road, Canvey Island	Mondays a.m.

SOUTH-EAST ESSEX DIVISION—Contd.

Health Services Clinic, High Road, South
Benfleet
Health Services Clinic, London Road,
Hadhleigh
Health Services Clinic, Spa Road, Hockley

2nd and 4th Fridays a.m.

1st, 3rd and 5th Fridays a.m.

2nd and 4th Wednesdays a.m.

SOUTH ESSEX DIVISION

Health Services Clinic, 39 Queen's Road,
Brentwood
Health Services Clinic, Westland Avenue,
Hornchurch
Health Services Clinic, Abbs Cross Lane,
Hornchurch
Health Services Clinic, 61 Athelstan Road,
Harold Wood
Health Services Clinic, Upminster Road,
Rainham
Health Services Clinic, 230 St. Mary's
Lane, Upminster
Health Services Clinic, Grays Park, Bridge
Road, Grays
Health Services Clinic, Newton Road,
Tilbury
St. Margaret's Hall, Corringham Road,
Stanford-le-Hope
107 South Road, South Ockendon, Near
Grays
Health Services Clinic, Stifford Long Lane,
Grays
Health Services Clinic, River View,
Chadwell St. Mary
Health Centre, Darenth Lane, South
Ockendon
Health Services Clinic, Southend Road,
South Hornchurch, Rainham
Health Services Clinic, Hall Road, Aveley,
Purfleet
Health Services Clinic, London Road,
Purfleet
Health Services Clinic, Cherry Avenue,
Brentwood
Health Services Clinic, Rheidovale,
Princess Margaret Road, East Tilbury
Health Services Clinic, Coram Green,
Hutton, Brentwood
Health Services Clinic, Avon Road,
Upminster

Tuesdays a.m.

Wednesdays a.m.

Thursdays a.m.

1st, 3rd and 5th Fridays only a.m.

1st, 3rd and 5th Thursdays a.m.

Wednesdays a.m.

Wednesdays a.m.

Fridays, 2nd 4th and 5th a.m.

1st, 3rd, 4th and 5th Thursdays a.m.

Mondays a.m.

1st, 3rd and 5th Thursdays a.m.

Alternate Tuesdays a.m.

Fridays a.m.

2nd and 4th Thursdays a.m.

Thursdays a.m.

1st Tuesday p.m.

1st, 3rd and 5th Tuesdays a.m.

1st Wednesday p.m.

Wednesdays a.m.

Fridays a.m.

FOREST DIVISION

Health Services Clinic, Manford Way, Chigwell	Alternate Thursdays a.m.
Health Services Clinic, Hatch Lane, Chingford	1st and 3rd Mondays p.m.
Health Services Clinic, Marmion Avenue, Chingford	2nd, 4th and 5th Mondays a.m.
Health Services Clinic, Regent Road, Epping	1st and 3rd Tuesdays a.m.
Health Services Clinic, Loughton Hall, Rectory Lane, Loughton	Thursdays a.m.
Health Services Clinic, The Cedars, Sewardstone Road, Waltham Abbey	2nd and 4th Tuesdays a.m.
School Clinic, 93 High Road, South Woodford	Fridays a.m.

ROMFORD DIVISION

Health Services Clinic, Hulse Avenue, Collier Row	Mondays a.m.
Parklands School	Thursdays a.m.
Hilldene School	Tuesdays a.m.
Health Services Clinic, Marks Road	Saturdays a.m.
Health Centre, Gooshays Drive, Harold Hill	Mondays and Tuesdays a.m.

BARKING DIVISION

Central Clinic, Vicarage Drive, Ripple Road, Barking	Each morning
Porters Avenue Clinic, Porters Avenue, Dagenham	Each morning
Woodward Clinic, Woodward Road, Dagenham	Each morning
Upney Clinic, Upney Lane, Barking	Each morning

DAGENHAM DIVISION

Five Elms School	Mondays p.m. and Fridays a.m.
Health Services Clinic, Becontree Avenue	Mondays and Thursdays a.m.
Health Services Clinic, Ballards Road	Mondays p.m.
Health Services Clinic, Ashton Gardens, Chadwell Heath	2nd, 4th and 5th Fridays p.m.
Health Services Clinic, Oxlow Lane	Wednesdays 9.30 a.m.
Health Services Clinic, Marks Gate	1st and 3rd Fridays p.m.

ILFORD DIVISION

Health Services Clinic, Kenwood Gardens, Ilford	Tuesdays and Fridays a.m.
Health Services Clinic, Goodmayes Lane, Goodmayes	Wednesdays and Fridays a.m.

The Tuesday and Wednesday clinics above-mentioned are
combined with Immunisation Clinics.

LEYTON DIVISION

Health Services Clinic, Granleigh Road, Leytonstone	Daily a.m. including alternate Saturdays
Health Services Clinic, Leyton Green Road, Leyton	Daily a.m. including Saturdays
Health Services Clinic, Dawlish Road, Leyton	Daily a.m. including alternate Saturdays

WALTHAMSTOW DIVISION

Town Hall	Mondays, Wednesdays, Fridays and Saturdays a.m.
Health Services Clinic, Silverdale Road, Highams Park	Tuesdays a.m.
Health Services Clinic, Low Hall Lane, Markhouse Road	Mondays and Thursdays a.m.

HARLOW DIVISION

Addison House, Fourth Avenue, Harlow	Alternate Thursdays a.m.
Nuffield House, The Stow, Harlow	Alternate Fridays a.m.
Keats House, Bush Fair, Harlow	Alternate Wednesdays a.m.

BASILDON DIVISION

Health Clinic, Laindon Road, Billericay	Thursdays a.m.
Health Clinic, Craylands, Timberlog Lane, Basildon	Wednesdays a.m.
Health Clinic, Honeypot Lane, Basildon	Fridays a.m.
Health Clinic, Florence Road, Laindon	Tuesdays a.m.
Health Clinic, High Road, Pitsea	Wednesdays a.m.
Health Clinic, Nevendon Road, Wickford	Mondays a.m.

SPECIALIST CLINICS

Type of Clinic	No. of Sessions Monthly	Name of Specialist
North-East Essex Division :		
Ophthalmic	22	Dr. H. S. Sweet
Orthopaedic	13	Mr. D. M. Dunn
Physical Medicine	16	Dr. K. W. Nichols Palmer
Ear, Nose and Throat	1	Mr. J. M. Green

In addition there are 22 Physiotherapy sessions a month

Mid-Essex Division :

Ophthalmic	35	Dr. A. H. Staples Dr. C. A. Gupta Dr. J. J. Reilly Dr. H. S. Sweet Mr. W. Foulds
Orthopaedic	19	Mr. H. A. H. Harris Mr. D. M. Dunn Mr. A. H. G. Murley Mr. H. Osmand-Clarke

In addition there are 4 Physiotherapy sessions a month

South-East Essex Division :

Ophthalmic	7	Dr. B. C. Dench
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South Essex Division :

Ophthalmic	36	Dr. B. G. Dias Dr. W. H. Clark Dr. H. J. Thorne Dr. D. E. Hone Dr. G. R. Bhatia
Orthopaedic	3	Mr. G. Barclay

In addition there are 28 Physiotherapy and 24 Orthoptic sessions a month

Forest Division :

Ophthalmic	18	Dr. G. F. Ensor Dr. W. Laybourne
Orthopaedic	4	Mr. M. Mason Mr. P. Dalliwell

In addition there are 11 Physiotherapy and 7 Orthoptic sessions a week

Type of Clinic	No. of Sessions Monthly	Name of Specialist
Romford Division :		
Ophthalmic	8	Dr. B. G. Dias Dr. D. E. Hone
Orthopaedic	2	Mr. G. Barclay Mr. A. M. A. Moore
Barking Division :		
Dermatology	2	Mr. P. Deville
Ear, Nose and Throat	4	Miss M. Mason
Ophthalmic	16	Dr. R. F. Jamieson
Orthopaedic	2	Mr. Whitchurch-Howell
Paediatric	2	Dr. T. Savage
Dagenham Division :		
Orthopaedic	1	Mr. A. M. A. Moore
Ophthalmic	8	Dr. J. Reilly
In addition there are 39 Physiotherapy sessions a month		
Ilford Division :		
Orthopaedic	7	Mr. M. Mason Mr. H. G. Korvin
Ophthalmic	17	Dr. P. Lancer Dr. H. J. Thorne Dr. M. N. Laybourne
Ear, Nose and Throat	4	Miss M. Mason
Paediatric	2	
Cerebral Palsy Unit	2	Mr. H. B. Lee
Leyton Division :		
Ear, Nose and Throat	1	Mr. A. W. Morrison
Ophthalmic	8	Dr. Logan Adams
Orthopaedic	4	Mr. H. A. Oatley
Walthamstow Division :		
Ear, Nose and Throat	4	Dr. A. Cammock
Ophthalmic	20	Dr. H. Ho
Paediatric	2	Dr. E. Hinden
Orthopaedic	1	Mr. G. Rigby-Jones
Harlow Division :		
Orthopaedic	1	Mr. G. R. Fisk
Basildon Division :		
Ophthalmic	9	Dr. G. F. Foster Smith

CHILD GUIDANCE CLINICS

Address of clinic (1)	Estimated population served (2)	Establishment of staff (3)	Posts filled as at 31.12.62 (4)	No. Weekly Sessions (5)
Winsley House High Street Colchester	28,250	Psychiatrists (Part-time—9 sessions weekly) Psychologists (Full-time—2) Psychiatric Social Workers (Full-time—2) Psychotherapist (Full-time—1) Remedial Teacher (Full-time—1) Clerks (Full-time—2)	2 (5 sessions) 1 1 (part-time) 1 1 2	5 — — — — —
146 Broomfield Road Chelmsford	38,250	Psychiatrists (Part-time—9 sessions weekly) Psychologists (Full-time—2) Psychiatric Social Workers (Full-time—2) Psychotherapist (Full-time—1) Remedial Teacher (Full-time—1) Clerks (Full-time—3)	2 2 2 — 4 (part-time) 3	9 — — — — —
123 Honeypot Lane Basildon	32,367	Psychiatrists (Part-time—6 sessions weekly) Psychologist (Full-time—1) Psychiatric Social Workers (Full-time—1 and Part-time 1 x $\frac{1}{2}$ time). Psychotherapist (Part-time—5 sessions weekly) Tutorial Class teacher (Full-time—1) Remedial Teacher (Full-time—1) Clerks (Full-time—2) Shorthand Typist (Full-time—1)	1 1 1 (full-time) — — — 2 1	6 — — — — — — —
Whitehall Cottage Whitehall Lane Grays	23,000	Psychiatrists (Part-time—6 sessions weekly) Psychologists (Full-time—2) Psychiatric Social Workers (Full-time—2) Psychotherapists (Part-time—8 sessions weekly) Clerks (Full-time—1 and Part-time—1 x $\frac{1}{2}$ time) Peripatetic Remedial Teacher (Full-time—1)	3 (6 sessions) 1 — 1 (5 sessions) 1.8 1	6 — — — — —

Address of clinic (1)	Estimated population served (2)	Establishment of staff (3)	Posts filled as at 31.12.62 (4)	No. Weekly Sessions (5)
Galen House Town Centre Harlow	18,500	Psychiatrists (Part-time—6 sessions weekly) Psychologist (Full-time—1) Psychiatric Social Worker (Full-time—2) Psychotherapist (Part-time—5 sessions weekly) Clerks (Full-time—2)	1 (6 sessions) 1 (6 sessions) Nil 1 (5 sessions) 2 (1 full-time) (1 part-time)	6 6 — 5 — —
62 Western Road Romford	53,000	Psychiatrists (Part-time—11 sessions weekly) Psychologists (Full-time—1 and part-time 2) Psychiatric Social Workers (Full-time—2) Psychotherapist (Full-time—1) Clerks (Full-time—3; Part-time 1)	3 (11 sessions) 1.5 2 1 (5 sessions) 3½	7 — — — —
Loxford Hall Loxford Lane Ilford	36,200	Psychiatrists (Part-time—9 sessions weekly) Psychologists (Full-time—2) Psychiatric Social Workers (Full-time—3) Psychotherapist (Full-time—1) Clerks (Full-time—3)	2 2 (1 Full-time and 6 sessions). 3 1 (6 sessions weekly) 3	9 — — — —
Old Monoux School High Street Walthamstow	52,000	Psychiatrists (Part-time—9 sessions weekly) + 2 additional sessions a week for 12 months from December, 1961 Psychologists (Full-time—1) (Part-time 1) Psychiatric Social Workers (Full-time—3) Psychotherapist (Full-time—1) Clerks (Full-time—3)	2 1½ 3 3 4	11 — — 8 —
133 Dawlish Road Leyton, E.10	10,000	Psychiatrists (Part-time—5 sessions weekly) Psychologists (Full-time) Psychiatric Social Worker (Full-time—2) Psychotherapist (Part-time—5 sessions weekly) Clerks (Full-time—2)	1 1 (6 sessions) Nil Nil 1	5 2 — — —

Experiment No.	Date and Locality	Name of Investigator	Number of Observations	To which Party
(1)	(2)	(3)	(4)	(5)
1	August 21, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
2	August 22, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
3	August 23, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
4	August 24, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
5	August 25, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
6	August 26, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
7	August 27, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
8	August 28, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
9	August 29, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
10	August 30, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
11	August 31, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
12	September 1, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
13	September 2, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.
14	September 3, 1911 Barrow, Alaska	Yellow Mountain (11-9-10-11) observed (11-9-10-11) observed 11-9-10-11 observed Yellow Mountain 2-3-4-5-6-7-8-9-10-11	12/21	Smith and Cox and H. M.

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E. G. ELLIS & SONS
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