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HEREFORDSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE



ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR

1947

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report relating to the year ended 31st December, 1947, on the work of the School Health Services in the area administered by the Education Committee of the Herefordshire County Council.

The routine medical inspection of school children was carried out on rather different lines than in previous years since the Handicapped Pupils and School Health Services Regulations required the medical inspection of pupils to be undertaken at certain specified times in school life, when the pupil is admitted for the first time to a maintained school, during the last year at a primary school and during the last year at a secondary school. This means that there is a long gap between the ages of five and ten years, so arrangements have been made to make an additional examination of all pupils at eight years of age. During the year the services were extended to a Nursery School and an Independent School.

The routine dental inspection was carried out as in previous years. It will be seen from the report of the School Dental Officer that 20,397 children were inspected, somewhat lower than in 1946, but 5,484 children actually received treatment, a higher number than last year. It is gratifying to note that there is a great increase in conservative treatment, some 3,750 permanent teeth were filled compared with 2,293 in the previous year.

The assessment of nutrition was discontinued and replaced by a statement of general physical condition of the children, 18.6% being described as good, 73.7% as fair, and 7.7% as poor. These cannot be compared with the record of assessment of nutrition as different standards are used. The catering services of the Committee continued to expand and at the end of the year 73.1% of all children were taking school meals compared with 70.2% in 1946. In addition 81.3% of the pupils were receiving milk in school. A very great contribution to the physical condition of the children was made by these services.

Since it is now the duty of the Committee to provide free medical treatment, short of domiciliary care, for all children attending maintained schools, arrangements have been made with the voluntary hospitals in the county to provide such care. Following representations the Hospital authorities are providing reports on children on discharge from hospital. This information is most helpful at the time of subsequent routine medical inspection and from the point of view of record purposes the information is invaluable.

During the year the treatment of Minor Ailments has increased by extending the facilities to Ledbury and Leominster but up to the present it has not been possible to find suitable premises in Ross-on-Wye.

A special survey has been made of Handicapped Pupils and the statistical tables show the number of children falling into the various categories. From this it is clear that the Educationally Sub-Normal Pupils and Delicate children are the most in need of special educational treatment.

The School Nurses made 92,715 examinations for the determination of infestation and 1,063 children were found to be unclean. Instructions were given to the parents but in no case was it necessary to take formal action.

In conclusion I should like to record my appreciation of the loyal assistance given to me by all members of the staff throughout the year.

I am,

Your obedient Servant,

J. S. COOKSON,
School Medical Officer.

County Health Department,
35, Bridge Street, Hereford.

February, 1948.

STAFF—**(a) MEDICAL—***School Medical Officer—*

J. S. COOKSON, M.A., M.D., D.P.H., Barrister-at-Law.

Deputy School Medical Officer—

S. HEWITT, M.B., B.S., B.Hy., D.P.H. (Appointed 1/7/47.)

Assistant School Medical Officers—

H. F. GREEN, M.B., B.Ch., D.P.H.

W. HOGG, M.B., B.S., D.P.H.

MARY M. MCKELVIE, M.B., Ch.B.

(b) DENTAL—*Senior School Dental Surgeon—*

J. B. HEAP, L.D.S.

Assistant School Dental Surgeons—

L. H. CHALLENGER, L.D.S.

ANNIE MCA. DOUGLAS, L.D.S. (Resigned 30/6/47.)

R. B. STEEL, L.D.S.

Q. H. MILLER, L.D.S. (Part-time.) (Resigned 1/4/47.)

JESSIE ROTHERA, L.D.S. (Appointed 1/10/47.)

(c) NURSING—*County Nursing Superintendent—*

MISS B. SHENTON, M.B.E., S.R.N., S.C.M.

There are two Assistants and one Deputy County Nursing Superintendent.

School Nurses—

The staff of sixty Nurses in the County carry out the School Nursing in addition to their other duties.

In the City of Hereford there are six full-time Health Visitors who devote half of their time to School Nursing duties.

MEDICAL INSPECTION**MAINTAINED SCHOOLS**

Number of Schools	...	...	...	...	...	...	...	188
Number of Pupils on School Register—Primary	...	...	...	...	...	...	...	8985
							Secondary	6009
							Total	14994

(A) Periodic Medical Examinations—

<i>Primary.</i>	Entrants	...	...	...	...	2227	
	2nd Age Group	...	...	...	...	1579	
	Other Group	...	...	...	...	1109	
							Total	4915
<i>Secondary.</i>	Entrants	...	...	...	...	169	
	3rd Age Group	...	...	...	...	917	
							Total	1086
	Total Pupils examined			6001

(B) **Other (Non-Periodic) Examinations—**

<i>Special Examinations.</i>	Primary	906
	Secondary	686
	Total	1592
<i>Re-Examinations.</i>	Primary	—
	Secondary	180
	Total	180

TABLE I.—Number of Individual Pupils found at Periodic Medical Inspection to require treatment (excluding malnutrition, dental diseases and infestation with vermin).

<i>Group</i>	<i>For defective vision (excluding squint)</i>	<i>For any other condition</i>	<i>Total individual pupils</i>
PRIMARY			
Entrants ...	24	433	450
2nd Age Group	101	224	315
Other Group ...	66	205	258
Total	191	862	1023
SECONDARY			
Entrants ...	12	35	46
3rd Age Group...	78	98	168
Total	90	133	214
Grand Total ...	281	995	1237

GENERAL OBSERVATIONS ON DEFECTS FOUND AT MEDICAL INSPECTION

Tables III and IV show the defects found by the Assistant School Medical Officers to require treatment and observation amongst pupils inspected both in the routine age groups and as special examinations.

Skin Diseases

The combined incidence to a degree which requires immediate treatment of the common contagious skin diseases, Ringworm (Scalp and Body), Scabies and Impetigo is at present 6.8 cases per 1,000 children examined as compared with 7.6 per 1,000 during 1946.

Defective Vision

An improvement has occurred during the year. 455 or 6% of the pupils examined were found to require treatment as compared with 7.2% in the previous year.

Facilities are available under the Authority's Scheme for children to receive treatment under Dr. H. W. Barnes, Consultant Ophthalmologist at the Hereford Victoria Eye Hospital or under Dr. A. H. S. Richardson, Consultant Ophthalmologist at Clinics held as and when required at Kington, Leominster and Ross-on-Wye.

It will be seen from Table VI that spectacles were prescribed in 455 cases and of this number only 17 children did not receive same.

Squint

There is no significant change. 6.5 cases per 1,000 children examined required treatment compared with 6.6 cases per 1,000 in 1946.

Defective Hearing

The number of children ascertained to require treatment was 2.5 per 1,000. This shows an increase of 0.7 per 1,000 over the previous year.

Ear Disease

The incidence of chronic suppurative otitis media found to require treatment at 2.9 cases per 1,000 compares unfavourably with 1.8 per 1,000 in 1946.

Arrangements are in force whereby all cases can be examined and treated by Mr. Ogilvy Reid, F.R.C.S., Consultant Otolaryngologist at the County Council Hospital, Hereford.

Adenoids and Tonsils

TABLE II—This table shows comparison between 1947 and 1946.

Year	Children examined	Requiring surgical treatment		Requiring observation	
		No.	%	No.	%
1947	7593	529	6.9	323	4.3
1946	6554	414	6.3	330	5.0

Contractual arrangements of long standing are in operation whereby children can receive out-patient and operative treatment at the following hospitals:—

- Hereford County Council Hospital.
- Kington Cottage Hospital.
- Ledbury Cottage Hospital.
- Leominster and District Hospital.
- Ross-on-Wye Cottage Hospital.
- Tenbury and District Hospital.
- Worcester Royal Infirmary.

It will be seen from Table VII that 297 children received operative treatment during 1947 under the Authority's Scheme as against 305 in 1946. The figure for 1947 would have been far in excess of 297 had not all operative treatment on the nose and throat been suspended for a considerable period on account of the prevalence of poliomyelitis. Consequently a considerable waiting list will be carried forward into 1948.

Speech Defects

During the year 27 children have been recommended for speech therapy on account of defects of articulation as against 4 in 1946. This large increase is due to a number of pupils being specially referred by Head Teachers as suffering from speech defects.

Orthopædic

(a) Posture.—The incidence of children suffering from postural defects which required treatment was 7.1 per 1,000 of those examined during the year as against 6.3 per 1,000 in 1946.

(b) Flat Foot.—The incidence rate for children suffering from flat foot and recommended for treatment was 11.9 per 1,000 which compares favourably with 14.0 per 1,000 during 1946.

Details of all orthopædic treatment carried out during the year will be found on page 17. In addition to the Clinics at Hereford, Ledbury and Leominster which are run in conjunction with the British Red Cross Society and attended by Orthopædic Specialists from the Robert Jones and Agnes Hunt Orthopædic

Hospital, Oswestry, Mr. Brian Thomas, F.R.C.S., was, on the 1st August, appointed County Orthopædic Surgeon on the staff of the Herefordshire County Council Hospital.

Remedial exercises for slight defects of posture, flat feet, etc., are carried out under the supervision of Physiotherapists at the County Council Hospital or at school under the supervision of teachers and district nurses.

INFESTATION WITH VERMIN

In the County area the schools are visited every month. Any child found to be suffering from nits or vermin is excluded for three days. On the date of exclusion a home visit is paid by the Health Visitor who takes with her a supply of D.D.T. preparation and instructs the mother how this should be used. The child is visited at home the two succeeding days for observation and returns to school on the fourth day.

Cleansing stations have never been found necessary as School Nurses are all trained District Nurses who assist the mothers to clean the children at home.

In the City area any child found to be verminous is excluded for three days, and the parent notified to take the child to the Clinic for treatment the day following exclusion and on two succeeding days.

Average number of visits per school made by Nurses during the year	8.7
Total number of examinations in the Schools by the School Nurses or other authorised persons	92715
Total number of individual pupils found to be infested	1063
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	Nil
Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944)	Nil

TABLE III.—PERIODIC MEDICAL EXAMINATIONS

A return of (a) Defects found to require treatment.
 (b) Defects requiring to be kept under 'observation' but not requiring specific medical treatment.

Defect or Disease	Number of Defects requiring treatment			Number of Defects requiring observation		
	Primary	Secondary	Total	Primary	Secondary	Total
Skin... ..	80	9	89	4	—	4
Eyes (a) Vision	191	90	281	111	24	135
(b) Squint	30	2	32	17	1	18
(c) Other	14	1	15	2	1	3
Ears (a) Hearing	10	1	11	10	2	12
(b) Otitis Media	16	2	18	9	1	10
(c) Other	3	1	4	3	—	3
Nose or Throat	369	35	404	264	13	277
Speech	12	1	13	6	2	8
Cervical Glands	5	3	8	20	—	20
Heart and Circulation	108	14	122	30	9	39
Lungs	51	9	60	25	3	28
Developmental—(a) Hernia	3	1	4	4	—	4
(b) Other	13	2	15	3	—	3
Orthopædic — (a) Posture	30	13	43	15	4	19
(b) Flat foot	47	21	68	3	2	5
(c) Other	34	4	38	7	—	7
Nervous system—(a) Epilepsy	3	1	4	9	—	9
(b) Other	4	2	6	6	—	6
Psychological—(a) Development	13	2	15	2	—	2
(b) Stability	3	—	3	1	—	1
Other	92	20	112	46	9	55

TABLE IV.—SPECIAL EXAMINATIONS

A return of (a) Defects found to require treatment.
 (b) Defects requiring to be kept under 'observation' but not requiring specific medical treatment.

Defect or Disease	Number of Defects requiring treatment			Number of Defects requiring observation		
	Primary	Secondary	Total	Primary	Secondary	Total
Skin... ..	4	4	8	—	1	1
Eyes (a) Vision	70	104	174	28	21	49
(b) Squint	10	7	17	4	—	4
(c) Other	6	3	9	—	1	1
Ears (a) Hearing	5	3	8	1	—	1
(b) Otitis Media	2	2	4	2	—	2
(c) Other	1	1	2	—	—	—
Nose or Throat	128	26	154	51	10	61
Speech	12	2	14	2	—	2
Cervical Glands	3	1	4	3	1	4
Heart and Circulation	12	13	25	1	3	4
Lungs	6	7	13	4	3	7
Developmental—(a) Hernia	—	—	—	—	1	1
(b) Other	1	—	1	1	1	2
Orthopædic—(a) Posture	6	5	11	—	—	—
(b) Flat foot	10	12	22	—	—	—
(c) Other	12	7	19	1	1	2
Nervous System—(a) Epilepsy	1	—	1	—	3	3
(b) Other	1	3	4	1	2	3
Psychological—(a) Development	6	7	13	—	—	—
(b) Stability	1	—	1	—	1	1
Other	16	10	26	5	1	6

TABLE V.—Classification of the General Condition of Pupils inspected during the year in the age Groups.

Age Groups	Number of Pupils Inspected	A (Good)		B (Fair)		C (Poor)	
		No.	%	No.	%	No.	%
PRIMARY							
Entrants	2227	462	20.7	1619	72.7	146	6.6
2nd Age Group	1579	247	15.6	1192	75.5	140	8.9
Other Group	1109	131	11.8	884	79.7	94	8.5
Total	4915	840	17.1	3695	75.2	380	7.7
SECONDARY							
Entrants	169	38	22.5	120	71.0	11	6.5
3rd Age Group	917	239	26.1	610	66.5	68	7.4
Total	1086	277	25.5	730	67.2	79	7.3
GRAND TOTAL	6001	1117	18.6	4425	73.7	459	7.7

TABLE VI.—DEFECTIVE VISION AND SQUINT (excluding Eye Diseases treated as Minor Ailments).

	<i>Number of Pupils dealt with during the year</i>																	
	<i>Under the Authority's Scheme</i>						<i>Otherwise</i>						<i>Total</i>					
	Primary		Secondary		Total		Primary		Secondary		Total		Primary		Secondary		Total	
	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.
Errors of Refraction and Squint (other than Orthoptic and Operative treatment) ...	134	168	112	227	246	395	5	4	10	13	15	17	139	172	122	240	261	412
Other Defects or Diseases of the Eyes ...	-	-	-	-	-	-	4	4	1	4	5	8	4	4	1	4	5	8
Total ...	134	168	112	227	246	395	9	8	11	17	20	25	143	176	123	244	266	420
SPECTACLES ...																		
Number of children for whom spectacles were:																		
(a) prescribed ...	102	111	78	164	180	275	5	4	10	13	15	17	107	115	87	177	194	292
(b) obtained ...	94	111	73	160	167	271	5	4	9	13	14	17	99	115	82	173	181	288
Total number of attendances of pupils for treatment ...	150	188	117	249	267	437	7	4	10	13	17	17	157	192	126	262	283	454

TABLE VII.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

	<i>Number of Pupils dealt with during the year</i>																	
	<i>Under the Authority's Scheme</i>						<i>Otherwise</i>						<i>Total</i>					
	Primary		Secondary		Total		Primary		Secondary		Total		Primary		Secondary		Total	
	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.
Received operative treatment for:																		
(a) Enlarged adenoids ...	5	2	1	4	6	6	-	4	-	-	-	4	5	6	1	4	6	10
(b) Unhealthy tonsils ...	6	6	2	3	8	9	-	-	2	-	2	-	6	6	4	3	10	9
(c) Adenoids and tonsils ...	108	128	11	21	119	149	64	44	5	14	69	58	172	172	16	35	188	207
(d) Other nose and throat conditions ...	2	1	1	2	3	3	2	3	-	-	2	3	4	4	1	2	5	6
Received other forms of treatment ...	3	3	5	1	8	4	5	4	1	3	6	7	8	7	6	4	14	11
TOTAL ...	124	140	20	31	144	171	71	55	8	17	79	72	195	195	28	48	223	243

TABLE VIII.—TREATMENT OF EAR DEFECTS.

In addition to the number of Ear Defects shown in Table IX as having received treatment as Minor Ailments, 25 children were admitted to Hospital for operative treatment on account of the following defects.

	<i>Primary</i>		<i>Secondary</i>		<i>Total</i>	
	B.	G.	B.	G.	B.	G.
<i>Under the Authority's Scheme</i>						
Mastoid	2	-	-	1	2	1
<i>Otherwise</i>						
Mastoid	2	8	-	2	2	10
Cyst of Ear	-	-	-	1	-	1
Otitis Media	6	2	-	-	6	2
Oedematous Left Ear	1	-	-	-	1	-
TOTAL	11	10	-	4	11	14

OPERATIVE TREATMENT FOR SQUINT

Two pupils (girls) from Secondary Schools have during the year had operations on account of squint otherwise than under the Authority's scheme. These cases have not been included in the table dealing with defective vision and squint.

ORTHOPTIC TREATMENT

This Authority at present has no scheme whereby Orthoptic treatment can be given. Arrangements have, however, been made during the year for two cases to receive treatment at Clinics conducted in neighbouring counties.

TABLE IX.—TREATMENT OF MINOR AILMENTS.

	<i>Number of defects treated, or under treatment during the year</i>		
	<i>At Authority's Minor Ailment Clinics</i>	<i>Other- wise</i>	<i>Total</i>
SKIN—			
Ringworm—Scalp :			
(i) X-Ray treatment	—	—	—
(ii) Other treatment	1	—	1
Ringworm—Body	2	4	6
Scabies	53	13	66
Impetigo	70	4	74
Other Skin Diseases	52	22	74
EYE DISEASE			
(External and other, but exclud- ing errors of refraction, squint and cases admitted to Hospital)	78	23	101
EAR DEFECTS			
(Excluding treatment in Hospital)	68	56	124
MISCELLANEOUS			
(Minor injuries, bruises, sores, chilblains, etc.)	1081	591	1672
TOTAL	1405	713	2118

Total number of attendances at Authority's Minor Ailment Clinics 5307

REPORT OF SENIOR DENTAL OFFICER

It is encouraging to be able to report progress along several lines during the year 1947. While much remains to be done, particularly in the provision of suitable surgeries, some initial steps have been taken towards building up the dental scheme in a more efficient manner during the coming years.

The staff at the end of the year consisted of the Senior Dental Officer, and three Assistant Dental Officers who are all employed on a full time basis. Mr. Quinton Miller retired from public work on March 31st. He had been employed by the County Education Committee in a part time capacity since April, 1945, in sequence to his service with the City Authority. He was one of the pioneers in school dentistry in this area and it is hoped that he will enjoy his well earned rest.

Miss A. McArthur Douglas resigned in June after ten years of very satisfactory service with this authority, and was replaced by Miss J. Rothera who commenced duty here on October 1st.

The strength of the staff during the year has been equivalent to nearly four dental officers.

The problem of finding a satisfactory surgery in which to carry out treatment is still one of the most difficult points in our scheme. The small isolated country schools with their old fashioned buildings do not provide much room and privacy while the larger schools in the more urban centres already have their accommodation overtaxed. The only central surgery at present in use is that in Hereford City. It is hoped to obtain at least one mobile dental unit to provide a travelling surgery and that it should come into operation during 1948, but this will depend on whether materials and equipment can be supplied. The use of a unit of this type would prove a considerable relief to the small schools as it would bring a reasonably equipped surgery to their doorsteps.

The prolonged spell of bad weather in the early months of 1947 caused a great deal of interference with the dental scheme. Even when and where the dental officers could reach the schools, attendance of children was naturally much lower than normal, and in many cases schools were closed because of floods or lack of fuel. Arrangements for work were made during the whole period but, in all, 200 sessions of inspections and treatment had to be cancelled.

A new feature of the scheme this year has been the following up of cases where no acceptance of the offer of treatment had been given. If no promise of private treatment had been received further consent forms have been distributed in sealed envelopes through the head teachers, which have stressed the advantages to be gained by good dental health. This has caused more work for the office staff and the teachers, but it cannot be disputed that it has been worth while. Many more consents have been obtained and the number receiving treatment of those requiring it throughout the county was 63%. This is a marked improvement on past years and is the first time that more than half the children referred for treatment have been treated since the comprehensive scheme was started in 1937. While no recent figures for the country as a whole are available, it is believed that the average acceptance rate is around 68%.

The country schools for the most part have had two routine visits of inspection and subsequent treatment during 1947. A six-monthly interval between visits is a very good feature of the Herefordshire scheme. If a child accepts treatment when first offered it usually means that there is not so much treatment to be done at a time.

A number of parents did not accept the offer of treatment for their children on the grounds that they would provide it through a private practitioner. There could be no objection raised to this practice provided the promise was kept, but some do use it as a means to evade any treatment.

The total number of children inspected as routine during the year was 20,397 and of these 8,669 were referred for treatment—42.5%. Those who were treated numbered 5,484, slightly more than that for 1946, although the number inspected is about 6,000 less. The effect of an increased acceptance rate was therefore quite marked, less time was given to inspection which, though necessary, of itself is of no benefit, and more of the dental surgeons' time was used in actual treatment. In 1947 approximately one session in four was used for inspecting; in some previous years when the acceptance was much lower, more than one session in three had to be devoted to inspection to find enough patients for treatment. In addition to the routine children, 156 special cases were treated, usually for the relief of urgent pain.

The amount of treatment given during the year included the extraction of 503 permanent teeth and 4,346 temporary teeth. Also 3,750 permanent teeth were filled and 118 temporary teeth. These figures are similar to those of 1946 with the exception of the number of permanent teeth filled which has risen from 2,293 to 3,750.

This increase of conservative treatment is very gratifying. The aim of a school service should be that pupils leave with all their permanent teeth present and in a sound condition. As permanent teeth do decay, often at an early age, this aim can only be realised by the early repair of the teeth as caries commences.

A small beginning has been made with regard to the treatment of children with irregular teeth. Quite a number of children with defects of this type can be remedied at no great expense if there is some central clinic that they may attend as often as required for supervision, and if appliances of a simple character may be provided. In the coming year it is hoped to have this service available at Hereford and Leominster and that the foundations of an efficient service may be established. It has been the experience of other authorities that the successful treatment of regulation cases has had marked propaganda value as its results are far more spectacular than other forms of dental treatment that are normally necessary for school children.

Note has been taken during the year of the number of parents who attend for either the inspection or the treatment of their children. The Education Act, 1944, lays down that parents of children about to receive their first dental inspection shall be informed so that they may attend. The number who did so in 1947 was very small, being 37, while approximately 1,200 children were inspected for the first time. Attendance during treatment was affected by the different procedure at the City Clinic and at county schools. In the city the parents were asked to take their children to the clinic and 729 parents attended while 1,175 children were treated. It is interesting to record that in only one case was any objection raised to the treatment advised, all the remainder were most anxious that whatever was necessary in the view of the dental surgeon should be carried out. In country areas parents were informed that the treatment was to be given at a certain time, but as this was to be on school premises there was not the necessity for the parent to escort the child and, whilst 4,922 attendances of children were made, only 592 parents attended. It is the general experience of school dentists and teachers that a child behaves better during dental treatment if the parent is not present and results in Herefordshire show nothing to change this view. The majority of head teachers in this county do reassure the parent that all will be well with the child and encourage their pupils to take treatment as part of school routine.

TABLE X.—DENTAL INSPECTION AND TREATMENT

	<i>Primary</i>	<i>Secondary</i>	<i>Total</i>
Number of Pupils inspected by the Authority's Dental Officers :			
(a) Routine Age Groups	13130	7025	20155
(b) Specials	116	40	156
(c) Total	13246	7065	20311
Number of Pupils found to require treatment ...	5635	3092	8727
Number of Pupils actually treated	3800	1795	5595
Attendances made by pupils for treatment	4031	2016	6047
Half-days devoted to :			
(a) Inspection			314½
(b) Treatment			926½
Fillings :			
(a) Permanent teeth	1778	1900	3678
(b) Temporary teeth	116	2	118
Extractions :			
(a) Permanent teeth	114	386	500
(b) Temporary teeth	3940	398	4338
Administration of general anæsthetic for extraction ...	20	22	42
Other operations :			
(a) Permanent teeth	177	204	381
(b) Temporary teeth	178	12	190

INFECTIOUS DISEASES IN SCHOOLS

No particular outbreaks of infectious disease occurred in primary or secondary schools throughout the year. Only one School was closed on account of infectious disease (Measles).

Absences from School notified by Head Teachers on Account of Infectious or Contagious Disease

Chicken Pox	...	...	...	59
Diphtheria	...	...	...	2
Impetigo	...	...	...	4
Measles	...	...	...	489
Mumps	...	...	...	247
Ringworm	...	...	...	2
Rubella	...	...	...	34
Scabies	...	...	...	11
Scarlet Fever	...	...	...	33
Whooping Cough	...	...	...	111
				—
TOTAL	...	...	...	992
				—

HANDICAPPED PUPILS

A register of handicapped pupils has now been compiled which includes both children to be, and who have been, ascertained as being within the meaning of the Handicapped Pupils and School Health Service Regulations, 1945. It must be pointed out that, up to the present, the existing medical staff has been unable to classify the majority of these children, consequently a considerable waiting list has arisen through the medium of Head Teachers, District Nurses, etc., who have the power to refer to the School Health Services such pupils as they consider require a special examination on account of a suspected disease or complaint and who have attained the age of two years or more up to school leaving age.

Table XIII gives a clear picture of the present situation as regards children who have so far been ascertained.

If a true register of Handicapped Pupils is to be maintained in the County so that no child who needs special educational treatment is overlooked, the whole-hearted co-operation of a number of interested people is required. Those principally concerned are the child's parents, his teachers, the Head Teacher of the School, District Nurses, and Assistant School Medical Officers. In some cases an examination discloses that the disability is too slight to warrant giving special educational treatment, but the sooner the School Medical Officer knows of the child's handicap the better he is placed to adopt remedial medical measures and the more likely the teacher is to receive help in adopting any modification in the child's education that may be desirable.

When the School Medical Officer learns of the suspected presence of a disability and an examination is carried out, it quite often occurs that more than one examination may be necessary if the opinion of a Specialist, e.g., in ophthalmology in the case of eye defects, is required.

Head Teachers are quite willing to co-operate where advice is given by Assistant School Medical Officers regarding certain types of pupils who can remain in ordinary schools, but who may require special facilities.

TABLE XI.—From this table it will be seen that 504 children remain to be classified as Educationally Sub-Normal.

	<i>At maintained Schools</i>						<i>Not at School</i>		<i>Total</i>	
	<i>2 years retarded</i>		<i>3 years retarded</i>		<i>4 years retarded</i>		<i>B.</i>	<i>G.</i>	<i>B.</i>	<i>G.</i>
	<i>B.</i>	<i>G.</i>	<i>B.</i>	<i>G.</i>	<i>B.</i>	<i>G.</i>	<i>B.</i>	<i>G.</i>	<i>B.</i>	<i>G.</i>
2	—	—	—	—	—	—	4	1	4	1
3	—	—	—	—	—	—	2	—	2	—
4	—	—	—	—	—	—	2	3	2	3
5	1	1	—	—	—	—	1	1	2	2
6	2	1	1	1	—	—	—	—	3	2
7	6	2	2	—	—	—	—	—	8	2
8	9	11	5	3	—	—	—	—	14	14
9	27	20	10	7	1	—	—	—	38	27
10	33	12	17	6	4	4	—	—	54	22
11	29	17	17	9	5	6	—	—	51	32
12	21	31	15	8	8	1	—	—	44	40
13	27	24	10	14	9	8	—	—	46	46
14	14	16	4	4	7	—	—	—	25	20
Total	169	135	81	52	34	19	9	5	293	211

Sections 57 (3) and 57 (5) of the Education Act, 1944

TABLE XII—to show the number of children reported by the Education Committee to the Mental Deficiency Committee under Section 57 (3) and (5) of the Education Act, 1944.

	<i>Primary</i>		<i>Secondary</i>		<i>Total</i>	
	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>
Reported under Section :						
57 (3)	4	6	—	3	4	9
57 (5)	—	—	1	—	1	—
Total	4	6	1	3	5	9

MALADJUSTED PUPILS—CHILD GUIDANCE CLINIC

For the treatment of maladjusted pupils, Juvenile Court Delinquents, etc., it is hoped that arrangements will be made for a Child Guidance Clinic to operate in Hereford. The appointment of a Psychiatrist is being arranged in conjunction with the Shropshire Education Committee and the person appointed will devote three-fifths of his time to Shropshire and two-fifths to Herefordshire. In addition a Child Guidance Clinic requires an Educational Psychologist and Psychiatric Social Worker.

PUPILS WITH SPEECH DEFECTS

There is substantial evidence of the needs of speech therapy in the County and in addition to dealing with the children already known it is hoped that the person appointed can act in liaison with the Head Teachers, Dentists and Ear, Nose and Throat Specialists for defects of articulation, and ultimately with the Child Guidance Clinic for stammerers and any others who show emotional reaction to their disability.

Unfortunately a Speech Therapist has not yet been appointed by this Authority but approval has been given by the appropriate Committee for such an appointment to be made. It is hoped that a suitable person will have commenced duty by the spring of 1948.

TABLE XIII—HANDICAPPED PUPILS

The number of Pupils ascertained is given in the following table which shows the position on the 31st December, 1947.

Category	In Special Schools		In Maintained Schools		In Independent Schools		Not at School		Total	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
(a) BLIND										
2-5 years	—	—	—	—	—	—	—	2	—	2
5-10 years	1	—	—	—	—	—	—	—	1	—
11-15 years	1	—	—	—	—	—	—	—	1	—
Over 15	—	1	—	—	—	—	—	—	—	1
(b) PARTIALLY SIGHTED										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	—	2	—	—	—	1	—	3	—
11-15 years	—	—	1	1	—	—	—	—	1	1
Over 15	—	—	—	1	—	—	—	—	—	1
(c) DEAF										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	2	2	—	—	—	—	—	—	2	2
11-15 years	1	2	—	—	—	—	—	—	1	2
Over 15	—	1	—	—	—	—	—	—	—	1
(d) PARTIALLY DEAF										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	1	—	2	—	—	—	1	—	4
11-15 years	—	—	2	—	—	—	—	—	2	—
Over 15	—	—	—	—	—	—	—	—	—	—
(e) DELICATE										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	—	11	9	—	—	1	—	12	9
11-15 years	—	2	2	2	—	—	—	1	2	5
Over 15	—	—	—	—	—	—	—	—	—	—

Category	In Special Schools		In Maintained Schools		In Independent Schools		Not at School		Total	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
(f) DIABETIC										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	—	—	—	—	—	—	—	—	—
11-15 years	—	—	1	—	—	—	—	—	1	—
Over 15	—	—	—	—	—	—	—	—	—	—
(g) EDUCATIONALLY SUB-NORMAL										
2-5 years	—	—	1	—	—	—	—	—	1	—
5-10 years	1	1	19	6	—	—	3	4	23	11
11-15 years	—	3	38	21	1	1	1	1	40	26
Over 15	—	—	—	—	—	—	—	—	—	—
(h) EPILEPTIC										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	—	—	—	—	—	1	—	1	—
11-15 years	—	1	1	3	—	1	—	—	1	5
Over 15	—	—	—	—	—	—	—	—	—	—
(i) MALADJUSTED										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	—	—	—	—	—	—	—	—	—
11-15 years	—	—	1	2	—	—	—	—	1	2
Over 15	—	—	—	—	—	—	—	—	—	—
(j) PHYSICALLY HANDICAPPED										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	1	2	1	—	—	4	3	6	5
11-15 years	—	2	1	1	—	—	—	—	1	3
Over 15	—	—	—	—	—	—	—	—	—	—
(k) SPEECH DEFECT										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	—	18	4	—	—	—	—	18	4
11-15 years	—	—	5	—	—	—	—	—	5	—
Over 15	—	—	—	—	—	—	—	—	—	—
(l) MULTIPLE DEFECTS										
2-5 years	—	—	—	—	—	—	—	—	—	—
5-10 years	—	—	—	2	—	—	—	—	—	2
11-15 years	—	—	—	1	—	—	—	—	—	1
Over 15	—	—	—	—	—	—	—	—	—	—

TABLE XIV. The Special Schools and the number of Boys and Girls from the County in each, together with maintenance fees, are shown hereunder.

	Annual rate per child	January 1st 1947		Admitted during year		Discharged during year		December 31st, 1947	
		B.	G.	B.	G.	B.	G.	B.	G.
BLIND AND PARTIALLY SIGHTED PUPILS									
Birmingham Royal Inst. for the Blind, Edgbaston	£144 0 0	2	1	—	—	—	1	2	—
Chorleywood College for the Blind	£220 0 0	—	1	—	—	—	—	—	1
DEAF AND PARTIALLY DEAF PUPILS									
Royal School for Deaf, Edgbaston, Birmingham	£150 0 0	3	3	—	1	1	—	2	4
Royal Cambrian Inst. for the Deaf, Newbridge-on-Wye	£156 0 0	—	1	—	—	—	—	—	1
Thomasson Memorial Special School, Bolton	£160 0 0	—	—	1	—	—	—	1	—
St. John's Inst. for Deaf and Dumb, Boston Spa, Yorks	£95 0 0	—	—	—	1	—	—	—	1
DELICATE PUPILS									
St. Vincent's Open-Air School, St. Leonards-on-Sea... ..	£109 4 0	—	1	—	2	—	2	—	1
Children's Convalescent Home, West Kirby ...	£109 4 0	—	1	—	—	—	1	—	—
Bradstock Lockett School of Recovery, Southport	£102 0 0	1	—	—	—	1	—	—	—
Port Regis Open Air School, Broadstairs	£120 0 0	—	—	—	1	—	1	—	—
St. Catherine's Open Air School, Ventnor	£109 4 0	—	—	1	—	1	—	—	—
St. Joseph's Heart Hosp. School, Rainhill, L'pool	£128 0 0	—	—	—	1	—	—	—	1
EDUCATIONALLY SUB-NORMAL PUPILS									
Allerton Priory R.C. School, Liverpool ...	£86 0 0	—	3	—	—	—	—	—	3
Monyhull Colony School, King's Heath, Birmingham	£137 0 0	—	2	—	—	—	1	—	1
Nazareth House Home for R.C. Boys, Stoke Bishop (Day School)	£22 0 0	1	—	—	—	—	—	1	—
EPILEPTIC PUPILS									
Maghull Home, Maghull, Liverpool	£108 0 0	1	—	—	—	1	—	—	—
Lingfield Epileptic Colony, Lingfield, Surrey... ..	£137 16 0	—	—	—	1	—	—	—	1
PHYSICALLY HANDICAPPED PUPILS									
Halliwick Cripples Home for Girls, Winchmore Hill, London	£156 0 0	—	1	—	—	—	—	—	1
Wordsley Emergency Hospital, Nr. Stourbridge	£291 4 0	—	—	—	1	—	1	—	—
Robert Jones and Agnes Hunt Orthopaedic Hosp., Oswestry	£255 10 0	2	5	4	5	6	8	2	2

TREATMENT OF ORTHOPÆDIC AND POSTURAL DEFECTS

No. of Pupils in hospitals or hospital schools on the 1st January, 1947	...	8
No. admitted during the year	...	17
Total number treated as In-patients	...	25
No. discharged during the year	...	22
No. of Pupils in hospitals or hospital schools on the 31st December, 1947	...	3
Number of Pupils treated at the Orthopædic Clinics:		

	<i>Hereford</i>	<i>Ledbury</i>	<i>Leominster</i>	<i>Total</i>
On books 1/1/47	108	33	27	168
Admitted during the year	45	15	11	71
Total number treated	153	48	38	239
Total number of attendances for treatment	263	138	68	469
Discharged during the year	41	6	12	59
On books 31/12/47	112	42	26	180

In addition 24 pupils were examined by the Orthopædic Surgeon for whom no treatment was advised.

Number of Pupils treated otherwise	...	85
Total number of Pupils treated	...	324

NIEUPORT SANATORIUM

Particulars are given in Table XV of school children who were admitted to, and discharged from, Nieuport Sanatorium, as early tuberculosis, tuberculosis contacts or being cases of sub-normal general health.

The Children's Wing is completely separated from the adults and contains 29 beds which have been fully occupied throughout the year. The average length of stay for all children throughout the year was 182 days. There were no deaths.

TABLE XV

		<i>Observation</i>	<i>Early Pul. T.B.</i>	<i>Non-Pul. T.B.</i>	<i>Total</i>
Admitted during 1947	BOYS	12	—	2	14
	GIRLS	16	5	1	22
	TOTAL	28	5	3	36
Discharged during 1947	BOYS	9	2	4	15
	GIRLS	14	7	2	23
	TOTAL	23	9	6	38

INDEPENDENT SCHOOLS

MEDICAL INSPECTION

Number of Pupils examined	...	...	...	...	...	...	...	...	281
Number of Individual Pupils found to require treatment:									
For defective vision	...	...	...	...	...	...	...	...	34
For any other condition (excluding malnutrition, dental disease and infestation with vermin)	...	...	...	...	...	...	...	...	30
Total individual pupils	...	...	...	...	...	...	...	...	59
General condition of the Pupils examined:									
			' A ' (Good)			' B ' (Fair)		' C ' (Poor)	
Number	...	...	41			240		—	
Percentage	...	...	14.59			85.41		—	

Defects found :

TABLE XVI

The following table shows :

- (a) Defects found to require treatment ;
- (b) Defects requiring to be kept under ' observation ' but not requiring specific medical treatment.

<i>Defect or Disease</i>	<i>Number of defects requiring treatment</i>	<i>Number of defects requiring observation</i>
Skin	5	3
Eyes (a) Vision	34	12
(b) Squint	—	3
(c) Other	—	—
Ears (a) Hearing	1	1
(b) Otitis Media	—	2
(c) Other	—	1
Nose or Throat	10	19
Speech...	—	—
Cervical Glands	1	1
Heart and Circulation	—	4
Lungs	1	2
Developmental :		
(a) Hernia	—	—
(b) Other	—	—
Orthopædic :		
(a) Posture	1	4
(b) Flat foot	7	5
(c) Other	1	2
Nervous System :		
(a) Epilepsy	1	—
(b) Other	—	1
Psychological :		
(a) Development	—	—
(b) Stability	—	1
Other	5	1

MEDICAL TREATMENT OF DAY PUPILS

Defective Vision and Squint—

Under the Authority's Scheme

Number of Pupils treated	...	...	...	...	...	...	...	9
Number of Pupils for whom spectacles were prescribed	...	...	...	...	...	...	...	6
Number of Pupils for whom spectacles were obtained	...	...	...	...	...	...	...	2

By other arrangements

Number of Pupils treated	...	...	...	...	...	...	...	3
Number of Pupils for whom spectacles were prescribed	...	...	...	...	...	...	...	3
Number of Pupils for whom spectacles were obtained	...	...	...	...	...	...	...	3

Defects of Nose and Throat—

Under the Authority's Scheme :

Number of Pupils treated	Nil
--------------------------	-----	-----	-----	-----	-----	-----	-----	-----

By other arrangements :

Received operative treatment for adenoids and tonsils	...	...	...	...	...	...	...	1
Received operative treatment for other nose and throat conditions	...	...	...	...	...	...	...	1

Orthopædic and Postural Defects—

Number treated as In-patients in Hospitals or Hospital Schools (admitted by private arrangements)	...	...	...	...	...	...	...	1
Number treated otherwise	...	...	...	...	...	...	...	3

Minor Ailments—

									<i>Number of Pupils treated</i>
Skin (a) Impetigo	...	...	...	...	...	...	...	...	1
(b) Other	...	...	...	...	...	...	...	...	3
Miscellaneous	...	...	...	...	...	...	...	...	2

DENTAL INSPECTION AND TREATMENT

Number of Pupils inspected	...	...	...	...	...	...	...	242
Number found to require treatment	...	...	...	...	...	...	...	98
Number actually treated	...	...	...	...	...	...	...	45
Attendances made by pupils for treatment	...	...	...	...	...	...	...	50
Half days devoted to (a) Inspection	...	...	...	...	...	...	...	3
(b) Treatment	...	...	...	...	...	...	...	10
Fillings (a) Permanent teeth	...	...	...	...	...	...	...	72
(b) Temporary teeth	...	...	...	...	...	...	...	—
Extractions (a) Permanent teeth	...	...	...	...	...	...	...	3
(b) Temporary teeth	...	...	...	...	...	...	...	8
Administration of General Anæsthetic for extractions	...	...	...	...	...	...	...	—
Other operations (a) Permanent teeth	...	...	...	...	...	...	...	7
(b) Temporary teeth	...	...	...	...	...	...	...	—

NURSERY SCHOOLS

On the 1st November, 1947, the White Cross Day Nursery was transferred to the responsibility of the Herefordshire County Council, having previously been conducted by the Hereford City Council. The Nursery can deal with approximately 40 children at one time of the age range 2-5 years. The 0-2 year group is provided for at the St. Martin's Day Nursery which is still organised by the Hereford City Authorities.

Subsequent to the White Cross Nursery being taken over by the County Council, arrangements were made for all children in attendance to be medically examined every month by an Assistant School Medical Officer and the following particulars are given of the inspections in 1947.

Arrangements have also been made for a Health Visitor from Hereford City to visit the School every morning.

FIRST EXAMINATIONS

Number of children examined	36
Number of children referred for treatment	8
General condition of the children examined :	
' A ' (Good)	1
' B ' (Fair)	35

RE-EXAMINATIONS

Number of children examined	21
Number of children referred for treatment	5

DEFECTS FOUND

TABLE XVII

The following table shows :

- (a) Defects found to require treatment.
- (b) Defects requiring to be kept under ' observation ' but not requiring specific medical treatment.

	FIRST EXAMINATIONS		RE-EXAMINATIONS	
	<i>Number of Defects requiring</i>		<i>Number of Defects requiring</i>	
	<i>Treatment</i>	<i>Observation</i>	<i>Treatment</i>	<i>Observation</i>
Skin	2	1	1	—
Eyes :				
(a) Squint	—	1	1	—
(b) Other	1	—	—	—
Nose or throat	—	8	1	1
Heart and Circulation	2	—	—	—
Lungs	—	2	—	—
Orthopædic—Flat foot	3	—	2	—
Other	1	1	—	—

PHYSICAL EDUCATION

The post of Assistant Organiser of Physical Education (Women) remains unfilled through lack of suitable applicants.

The Authority's Swimming scheme has proved successful in Hereford and by the inclusion of a number of rural schools the Baths are used to capacity throughout the time they are at the Authority's disposal.

The difficulty of supplying suitable equipment to schools has lessened slightly but is still acute and the problem of playing fields still awaits solution.

Proposals for further development of inter-school games are under consideration and in this connection the Authority proposes to authorise limited expenditure on transport.

Arrangements are in hand for the provision of a Training Course for Lawn Tennis Coaches and agreement has been reached with the Football Association regarding the employment of a Coach for Football whose services will be available for schools and Youth organisations.

It is also proposed to hold during 1948 special Refresher Courses for teachers from Emergency Training Colleges who are now in the employ of the Authority.

HOUSECRAFT

The majority of classes receiving Housecraft Instruction after Easter, 1947, were composed of girls who had to remain in attendance at School for an extra year in accordance with the provisions of the Education Act, 1944. The practical work in most cases took the form of "Assignments" of mixed work such as the girls might have to undertake in their own homes, including the cooking of meals suitable for families.

Efforts have been made to widen the instruction by visits to Housing Estates, etc.

District Nurse Health Visitors have continued to give instruction on Child Care to senior girls, and instruction on Personal Hygiene forms part of the course.

Considerable extension of the Housecraft Instruction will be possible when the four Domestic Subject Huts provided under the Horsa Programme are available for use in Bromyard, Hereford (2) and Leintwardine, as the extra accommodation will relieve the pressure on the existing Housecraft Centres. Whenever possible, the Domestic Subjects Teacher will become a member of the School Staff, so that the teaching of Housecraft will be more easily correlated with other school subjects and form part of the social training in the school as a whole.

SCHOOL BUILDINGS

(1) Raising the School Leaving Age

Standard Ministry of Works Huts have been erected at 14 Schools to meet the need for additional accommodation consequent on the raising of the school leaving age. These provide excellent lighting, space and sanitary offices.

(2) Playgrounds

Repairs have been effected to 12 County school playgrounds, and the Authority have agreed to make grants towards the cost of repairs to playgrounds in Voluntary Schools in 10 cases.

(3) Heating

New stoves and grates have been provided and repairs carried out to existing stoves and grates in 53 Schools.

(4) Equipment

539 single locker desks and chairs have been supplied under the Ministry of Education scheme for the supply of furniture required on the raising of the school leaving age.

(5) General Sanitary Arrangements

Drains have been overhauled and repaired in nine schools.

(6) General

Instructions have been given for repairs to be effected to school floors in 18 cases, and general repairs and renovations to be carried out in 64 schools.

PROVISION OF SCHOOL MEALS AND MILK

MEALS

The School Meals service has been extended until it now covers all schools in the county except one. Plans are going forward for the provision of a dining room and kitchen at this one school and in the meantime arrangements have been made for the children here to have a hot drink at lunch time.

The percentage of children having meals is now 73.1 and it is hoped that when building conditions become easier and new kitchens can be provided that the percentage of children taking meals will be still higher.

All kitchens are aiming to provide a meal which contains the full rations by the Ministry of Food and it is hoped that from time to time it will be possible to analyse some of the meals provided.

Dining and cooking arrangements which will be needed when the Development Plan is put into effect are now being considered and it is hoped that in time it will be possible for the majority of schools which are remaining or being built under this plan to have their own kitchens with meals cooked on the spot.

MILK

81.3% of the children in all schools in the county and city are now receiving milk. National Dried Milk has been supplied to some schools where it has not been possible to obtain a supply of fresh milk.

It is hoped eventually to provide a supply of pasteurised or T.T. milk in 1/3rd pint bottles with drinking straws for all schools.

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