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INSTITUTE OF SOCIAL
MEDICINE


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OXFORD

ISLE OF ELY COUNTY COUNCIL.

EDUCATION COMMITTEE.

Annual Report
of the
School Medical Officer
for the
Year ending 31st December, 1949.

LITTLEPORT, ISLE OF ELY :
G. T. WATSON, PRINTER, VICTORIA STREET.
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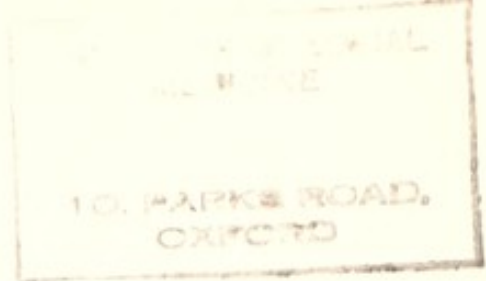
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*To the Chairman and Members of the Isle of Ely
Education Committee.*

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the School Health Service for the year 1949.

As the work detailed in this Report took place before I assumed the office of School Medical Officer I do not feel competent to make any comment on the year's working of the service other than to say that it is clear that, within the limits of a somewhat depleted staff, much good work was accomplished.

I am sure that my predecessor, Dr. Hilda. Hay, would desire me to record on her behalf her grateful appreciation of the good team work and loyal service of the whole staff of the department, and also of the Chief Education Officer and his staff, and to couple with this appreciation of the interest shown in and encouragement given to the work by the Chairman and members of the School Medical Services Sub-Committee.

I have the honour to be, Ladies and Gentlemen,

Your obedient servant,

(Signed) M. E. HOCKEN,

School Medical Officer.

STAFF.

School Medical Officer.

HILDA. R. HAY, M.B., Ch.B., D.P.H. (resigned 31/1/50).

M. E. HOCKEN, M.B., Ch.B., D.P.H. (appointed 1/2/50).

Assistant School Medical Officers.

G. P. BARCLAY, M.B., Ch.B., D.P.H.

P. COGGIN BROWN, M.R.C.S., L.R.C.P., D.P.H.

Senior School Dental Surgeon.

I. O. ENOS, L.D.S. R.C.S. (Eng.)

Assistant School Dental Surgeon.

S. W. FELCE, L.D.S., R.C.S. (Eng.)

Speech Therapist.

Mrs. F. B. L. WOOD, L.C.S.T. (appointed 3/1/49) (resigned 30/6/49).

Miss H. WESTRUP, L.C.S.T. (appointed 12/9/49.)

Orthopaedic Physiotherapist.

VACANCY.

Oculists.

Miss M. PERRERS TAYLOR, M.R.C.S., L.R.C.P., D.P.H., D.O.M.S., Ely.

Mr. W. A. D. LAWSON, M.D., D.P.H., D.O.M.S., March.

Dr. C. H. GUNSON, M.B., Ch.B., Wisbech.

Dr. J. M. KODICEK, M.B., B.S., M.R.C.S., L.R.C.P. (temporary).

Superintendent Nursing Officer.

Miss G. M. SANDERS, S.R.N., S.C.M., H.V. Cert.

School Nurses.

Miss E. CORNISH, S.R.N., S.C.M., H.V. Cert. (March) (appointed 2/5/49).

Miss I. P. LUCAS, S.R.N., S.C.M., H.V. Cert. (Ely) (appointed 3/1/49).

Miss C. A. NEW, S.R.N., S.C.M. (March) (resigned 31/5/49).

Miss E. E. REDHEAD, S.R.N., S.C.M., H.V. Cert. (Wisbech).

Mrs. M. E. ROSE, S.R.N., S.C.M., H.V. Cert., Bd. of Ed. (Whittlesey).

Miss E. T. TAYLOR, S.R.N., S.C.M. (Wisbech).

School Nurses—Part-Time.

Miss C. M. BIART, S.R.N., S.C.M., H.V. Cert. (Littleport D.N.A.).

Miss K. M. RAILTON, S.R.N., S.C.M., H.V. Cert. (Littleport D.N.A.).

Miss E. A. B. GEORGE, S.R.N., S.C.M., H.V. Cert. (Chatteris).

Dental Attendants.

Mrs. A. M. HILL (resigned 12/7/49). Miss J. LINDFORD (appointed 18/7/49).

Miss B. E. M. HINDE (resigned 19/6/49).

Miss F. M. BUNNING (appointed 25/7/49) (resigned 27/12/49).

Clerical Staff.

H. A. HOUSE (Administrative Officer).

F. RITCHIE. A. G. BALL (called up for service 13/5/49).

Miss E. PENDLE (resigned 31/12/49). I. R. BENSON (appointed 13/6/49).

ANNUAL REPORT.

1949.

No. of Children on Roll:—

County Primary	....	....	....	....	8159
County Secondary Modern	2385
Secondary Grammar	1648
					<hr/>
					12192
					<hr/>

No. of Schools	81
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PERIODIC MEDICAL INSPECTIONS.

Routine visits of inspection had been paid to all schools except 10. It was found that fewer inspections could be completed per session when the new medical records (Form 10M) were used, and as the staff had not increased, the total number of sessions allocated to such work had to be somewhat curtailed in order to devote adequate time to the ascertainment and certification of handicapped pupils, and to the performance of intelligence tests in particular. Although it has never been possible to arrange such examinations at intervals of less than one year, the value of this part of the health service could scarcely be over-stressed, leading, as it so often does, to effective treatment of a variety of defects and diseases and entailing a close link-up with general practitioners and consultants.

With regard to the completed medical records, the medical staff and, to a lesser extent, the nursing and teaching staffs who assist in their compilation and the administrative staff who file them, all suffer from a sense of frustration that more use is not made of the information they contain. Ideally they should be linked with the records of the pre-school period passed on from the Maternity and Child Welfare department and, when completed at the end of a pupil's school career, transmitted either to the appropriate health authority or to the general practitioner who will actually provide the subsequent personal medical service. A system is at present in operation whereby the health visitors records of pre-school children are attached to the school medical records, but it is doubtful if the system could ever operate fully between separate health authorities. The subsequent utilisation by the state, or otherwise, of completed medical record cards when pupils leave school would be a colossal administrative task involving meticulous office routine. Yet it cannot be denied that these records should not be allowed to lie for

years in dusty archives, only to be destroyed eventually, when they could provide so much useful information to general practitioners responsible for the personal health services.

A. Periodic Medical

<i>Inspections</i>	1949	1948	1947	1946	1945
Entrants....	1,584	1,513	1,548	1,501	1,194
Second Age Group	1,386	1,139	1,295	1,607	1,149
Third Age Group	639	912	986	1,271	825
Other periodic inspections	63	112	110	214	231
Total	3,672	3,676	3,939	4,593	3,399

B. Other Inspections

Special Inspections— children specially referred by par- ents and teachers	41	73	88	20	15
Re - inspections— all children found to have defects at the previous ex- amination	2,564	3,150	2,358	2,488	1,854
Total	2,605	3,223	2,446	2,508	1,869

FINDINGS OF MEDICAL INSPECTION.

General Condition.

The classification of pupils into three categories, instead of four as formerly, has not in any way made it easier for medical staff to assess the general condition more accurately, and comparisons of reports from different areas are still as unreliable as before. The real difficulty in this connection is often the lack of experience among medical staff in the study of healthy children and the difficulty of defining "normal," a term which occurs in the official definition of each of the new categories. It has never been possible to lay down a close definition based upon scientific data and, as the personal factor must still enter into any assessment of physical condition, wide variations in final decisions occur.

The results listed in the table to be found at the end of this report show that a high standard has been set, and I feel that the percentages set forth have regard to what is normal in this locality only. I am fully convinced that the local children derive from healthy stock and, as they are among the most happily situated in the whole country as regards climate and social conditions, they are consequently better nourished.

Incidence of defects.

A comparison of the number of defects discovered at the periodic inspections in 1949 with the findings of the previous year shows minor fluctuations only under each heading.

ACTION FOLLOWING INSPECTION.

When treatment of any description is recommended by the school medical officers, letters are sent to parents and appropriate suggestions made as to facilities available. Should no response ensue follow-up visits are paid by the school nurses, and if no action is taken after a first visit, repeat visits are paid wherever possible. The rate of acceptance of treatment is very high and the majority of parents are found to be most co-operative in accepting any advice given by the staff.

Work of School Nurses—Cleanliness inspections.

In addition to follow-up visits paid to the homes, the school nurses carried out their routine work as set out in the accompanying table. Owing to vacancies for two full-time health visitors and school nurses, the number of home visits following school medical inspections decreased. In order to maintain the service in clinics and at the school medical inspections, the Assistant Superintendent Nursing Officer attended sessions when it was impossible to provide a school nurse, and a part-time nurse was appointed in the Chatteris area. In addition, an arrangement was made for a sessional attendance of another nurse at the Whittlesey school clinic.

With regard to the cleansing of verminous heads, revised instructions were issued to parents and to the nursing staff and a new D.D.T. preparation was adopted in place of lethane and found to be very effective in practice. Advisory work in this connection was felt to be efficacious, especially when followed by actual cleansings carried out in the school clinics. Electric hair dryers are available in each of the clinic premises and the work of the nurses has been eased. Steps had to be taken to initiate proceedings under Section 54 against the parents of three chronic offenders.

TABLE.

Sessions spent at routine medical inspection	Average number of visits per school for verminous inspection	No. of children examined for cleanliness	No. of individual children found unclean	Follow-up visits in homes for all purposes	Attendances at minor ailment and eye clinics
224	3.4	15,684	412	750	975

ARRANGEMENTS FOR TREATMENT.

Minor Ailment Clinics.

There was no change in the arrangements for treatment at these clinics during the year. The total attendances were lower than those recorded during 1948. The failure to fill the vacancy of health visitor and school nurse in Chatteris hampered the services there in every field.

Regular visits by the school nurse were continued to the Duke of Bedford School, Thorney, and to Elm Road School, Wisbech, for the purpose of treating any minor ailments on the spot and it is proposed to enlarge this very useful branch of the work as soon additions are made to staff.

Arrangements were also made for a health visitor and school nurse to visit the Christchurch school to treat minor ailments and her services have been of great value.

It is felt that there is still much scope for developing the usefulness of minor ailment clinics without in any way encroaching on the personal medical services provided by general practitioners. Many daily applications and dressings could be carried out by the expert nursing staff, and such an arrangement would prove time saving, not only for the pupils, but also for the general practitioners and the busy district nurses, and the treatment given would often be more quickly effective than attempts carried out at home. The system could only operate when a full measure of co-operation was established between the Part IV. services and the School Health Service.

MINOR AILMENT CLINICS.

CLINIC	ADDRESS		DOCTOR PRESENT
WISBECH	..	County Clinic, Lynn Rd., .. Wisbech	Each Friday morning
MARCH	..	County Clinic, County .. Hall, March	Each Wednesday morning
ELY	..	County Clinic, Downham .. Rd., Ely	Each Wednesday morning
CHATTERIS	..	Cromwell Cty. Sec. Mod. .. School	Each Friday morning
WHITTLESEY	..	Former C.D. Report Centre, .. Whittlesey	Each Wednesday morning
LITTLEPORT	..	Oddfellows' Hall, .. Littleport	1st and 3rd Tuesday mornings each month
THORNEY	..	Duke of Bedford C.P. .. School	1st and 3rd Wednesday afternoons
OUTWELL	..	Beaupré School ..	Each Wednesday afternoon

TREATMENT OF MINOR AILMENTS IN THE CLINICS FOR THE YEAR 1949.
(Individual number of children treated).

	Wisbech	March	Ely	Chatteris	Littleport	Whittlesey	Thorney	Outwell
Ringworm (head)	1	..	..	..	..	..	..	..
Ringworm (body)	..	4	..	..	1	..	3	..
Scabies	3	..	2	2	..	11	..	..
Impetigo	83	22	8	1	8	36	22	..
Other skin diseases	9	31	35	7	23	6	..	..
Minor eye defects	67	13	11	13	8	23	5	1
Minor ear defects	36	16	13	6	..	17	4	1
Miscellaneous ..	401	114	163	78	56	219	174	28
TOTALS ..	600	200	232	107	96	312	208	30

GRAND TOTAL: 1785.

Total attendances made by children: 6,747.

Visual Defects and Diseases of the Eye.

Miss M. Perrers Taylor, M.R.C.S., L.R.C.P., D.P.H., D.O.M.S., was appointed in 1946 to be consultant in diseases of the eye under Reg. 53 of the Handicapped Pupils and School Health Service Regulations.

Mr. W. A. D. Lawson, M.D., D.O.M.S., was approved as an additional consultant in March, 1948.

All pupils with defective vision or squint ascertained at inspection are given an opportunity of attending one of the following clinics:—

Wisbech	Dr. Gunson	2nd and 4th Wednesdays and 3rd or 4th Thursdays.
Ely	Miss Perrers Taylor	alternate Thursdays.
„	Dr. Kodicek	alternate Mondays.
March	Mr. Lawson	2nd and 4th Thursdays.
Whittlesey	„	1st Tuesday in month.
Chatteris	„	2nd Tuesday in month.

There were altogether 133 sessions held during the year, 551 individual children being seen, making a total of 1,083 attendances. The figures show a marked increase on the previous year.

Spectacles were prescribed under the Authority's Scheme for 496 children and were obtained by 372.

Miss Perrers Taylor reports:—

“The Ophthalmic Clinic at Ely has run smoothly during the year, and attendances have been good. Some 450 children have been seen, nearly half of these being new cases.

Eleven children have been operated on for squint and one for congenital cataract, and there are at present only a few awaiting operation. The one serious defect is the lack of Orthoptic treatment.

I understand that arrangements for Orthoptic treatment are being made, and I trust it will be possible to start a Clinic in the near future. Orthoptic exercises are so essential for many of the children, both pre-operatively and post-operatively.”

(Signed) M. Perrers Taylor.

Mr. Lawson reports:—

“48 Ophthalmic sessions have been held in that part of the Isle of Ely under my care, with an average of exactly 10 cases seen at a session. Of the 480 so seen, over a quarter were new cases—the rest, of course, being follow-ups, supervisions, post-mydriatic tests, etc. Approximately 40% of the total seen required, and were given, a prescription for glasses.

35 cases failed to attend on the date of their original appointment but only 8 defaulted entirely.

The school nurses, by following up can, and do help considerably in these cases, and also in seeing that the child is wearing the glasses ordered or carrying out any treatment prescribed, such as occlusion for squints.

Cases of squint, actual or suspected, are being referred for advice much earlier, often from the Infant Welfare Centres, and satisfactory results are being obtained by corrected glasses, orthoptic exercises, and operation in a fair proportion of cases.

The most unhappy feature of school ophthalmic work is the long delay between examination and supply. As many of the prescriptions are simple plus or minus spheres, it is hard to condone tardiness when it may be harmful to the child. It has been my practice to ask for re-examination every one or two months in some of these cases, merely to discover if the child had obtained the glasses and to advise the sending of strong letters by the Authority after three or four months delay, but even this produces little or no satisfaction."

(Signed) W. A. D. Lawson.

Squint.

Operations for squint have been performed by Miss Perrers Taylor in eleven cases.

Orthoptic Treatment.

As stated in the last report, delay has occurred in the setting up of orthoptic clinics by the Regional Hospital Board, and while certain Hospitals have provided facilities, it was felt that the distance to be travelled would prevent a number of children from obtaining treatment.

The Education Committee therefore decided to secure the services of a specialist and, at the time of writing this report, a clinic has been opened in the Ely area.

Operative Treatment for Defects of Nose and Throat.

Operative treatment of unhealthy tonsils and/or adenoids is provided at Addenbrooke's Hospital, Cambridge, Peterborough and District Memorial Hospital, and the North Cambs. Hospital, Wisbech, and in addition increased use was made of the facilities at the County Hospital, Doddington, where the two consultants are responsible for regular out-patient clinics and subsequent treatment.

The total number of cases receiving operative treatment was 176 during 1949.

Eight cases received other forms of operative treatment and 92 other conditions were dealt with, either at the minor ailment clinics or at the hospitals.

Close liaison was maintained with the Speech Therapist in after-care work.

Diseases of the Ear, Nose and Throat.

Mr. Walford, of Cambridge, was appointed in 1946, to act as Consultant attached to the School Health Service for the ascertainment and treatment of these diseases.

In May, 1947, Mr. Kenneth Wilsdon, also of Cambridge, was appointed as an additional consultant under Reg. 53.

Orthopaedic Scheme.

Consultants attended clinics as under:—

Wisbech North Cambs. Hospital—Mr. Weeden Butler—1st and 3rd Thursday in month.

Ely Dispensary (St. Mary's Street)—Mr. Weeden Butler—2nd Thursday in month.

Peterborough Memorial Hospital—Mr. Dockerill—2nd Tuesday in month.

It was not found possible to fill the vacancy caused by the resignation of Miss Parris, the Orthopaedic Sister, with the result that children requiring treatment are referred to Hospitals and no home visiting or supervision can be undertaken.

Institutional Treatment.

During the year 14 school children were admitted to various hospitals for surgical treatment under the Orthopaedic Scheme.

TUBERCULOSIS.

100 examinations of school children were carried out at the Dispensaries by the Tuberculosis Officer during 1949. Of this number 14 were new cases, the remainder being re-examinations. 123 X-ray examinations of school children were carried out at the weekly diagnostic clinic at Doddington Hospital, and of these 53 were new cases, the remainder being re-examinations of old cases. 10 cases of tuberculosis were notified as occurring among school children during 1949, 2 pulmonary and 8 non-pulmonary in type. During the year 3 school children received institutional treatment, 1 being admitted to Lord Mayor Treloar Cripples' Hospital, 1 to the Children's Sanatorium, Holt, and 1 to the Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry.

SPEECH THERAPY.

Miss Westrup reports as follows:—

“As a result of information from Head Teachers and members of the School Health Service, and visits to twenty-five schools, one hundred and thirty six (136) children were found to be in need of speech therapy; of these:—

99 children received treatment.

37 children are awaiting treatment.

15 children have been discharged.

Clinics were arranged according to the number requiring treatment in each area. One session per week has been devoted to the Palace School, Ely.

<i>Place.</i>	<i>No. of children who received treatment.</i>			<i>No. of children awaiting treatment.</i>
Ely	31	12
March	19	2
Wisbech	25	9
Chatteris	13	10
Littleport	11	4
			—	—
			99	37
			<u> </u>	<u> </u>

Analysis of types of cases that received treatment.

Dyslalia (slight) ....	....	....	....	43
Dyslalia (severe) ....	....	....	....	8
Stammering ....	....	....	....	29
Neurogenic defects ....	....	....	....	12
Dysphonia ....	....	....	....	4
Cleft Palate Speech ....	....	....	....	3

Good co-operation from parents and regular attendance by the children have facilitated treatment. Interest shown by medical, educational and administrative staffs has been of assistance in re-establishing this service and it is planned to extend it to outlying districts in the New Year.”

(Signed) Hilary Westrup, L.C.S.T., L.C.S.M.,
Speech Therapist.

SCHOOL DENTAL SERVICE.

During the year regular sessions were held at the clinics in Ely, March and Wisbech. The dental trailer was also in use at the outlying schools in the southern part of the County.

As noted in the previous report, the dental van became unfit for use and the Committee decided to replace it by a modern type of trailer.

In view of the uncertain position regarding the dental staff the placing of an order was postponed and, as at the time of writing this report the Authority is without a single dentist, this action would appear to have been justified.

REPORT ON THE DENTAL TREATMENT SCHEME FOR 1949.

Administration of the Scheme.

The general character of the Dental Inspection and Treatment Scheme has remained unaltered during the year. At no time during 1949 were the services of a full staff available. The progress made in the development of the dental scheme in the South of the Isle was maintained, but much ground was lost in the Central and Northern areas. The statistics, again, emphasize that two dental officers can only give an inspection and treatment service to about one-third of the County's school population.

Dental Inspections.

These were carried out on school premises during school hours, and 3,850 school children were inspected during $41\frac{1}{2}$ half-day sessions, which gives an average of 93 children inspected per session.

Dental Treatment.

Of the 3,850 school children inspected, 2,779 (seventy-two per cent.) were referred for treatment, and of this number 2,032 (seventy-three per cent.) received treatment from the School Dental Officers. This is a considerable increase on the acceptance rate for 1948. It shows an increased appreciation of our services by parents, school teachers and the children, a very encouraging sign for those of us engaged in this important work.

It can be seen from the comparative table given below that only about one third of the school population of 12,000 can be offered treatment if the staff consists of only two dental officers. It follows, therefore, that to give a really satisfactory dental service to the schoolchildren, the staff should consist of one Senior Dental Officer and five Assistant School Dental Officers. The figures for 1947, 1948 and 1949 appear to support this contention.

COMPARATIVE TABLE OF TOTAL NUMBERS OF CHILDREN
INSPECTED AND TREATED DURING THE PAST SIX YEARS.

	1944	1945	1946	1947	1948	1949
Number Inspected	3,019	5,201	1,637	3,078	4,110	3,850
Number Treated	1,131	1,431	820	2,612	2,005	2,032
Number of Inspections and Treatment Sessions	847	844	505	863	953½	849

Orthodontics.

As anticipated in the last annual report, it has not been possible to make any progress with this very necessary and important form of treatment. Seven cases only were treated during the year. For the children to benefit from the modern technique of orthodontics, a part-time consultant orthodontic specialist should be employed in addition to the School Dental Officers.

Artificial Dentures.

It was found necessary to supply twenty-two partial dentures during the year; one such denture was repaired. This number is double that of last year, and further emphasises the fact that with the present staff it is becoming increasingly difficult to save the children's teeth. Last year's remarks must be repeated, that "it reflects no particular credit on our service that the prosthetic work has so increased." The increase of prosthetic work is being accelerated, and it will continue to do so as long as there is insufficient staff to give adequate conservative treatment to the children. The children's teeth are being lost through the lack of timely measures to save them.

X-rays.

Thirty-one cases were X-rayed during the year. The Doddington Hospital has given us very efficient service, and thanks are due to the Surgeon Superintendent. The number of cases are approximately the same as last year.

Pre-School Children.

Lack of staff has again postponed the implementation of the provisions of the National Health Service Act, 1946, with regard to the development of a Maternity and Child Welfare Dental Scheme, to which scheme these children properly belong. However, we have continued the same policy as last year. All children under five, on whose behalf application was made, were inspected and treated. There were sixty-nine cases during the year and sixty-seven were treated; this is almost four times as many as were treated last year. The demand for treatment of this age group is increasing and will continue to do so. This increase in demand cannot be met by the existing staff.

Dental Statistics, 1949.

A complete analysis of the children inspected during 1949, and also of the treatment carried out for these children is shown in the following table:—

1.	Total number inspected	....	....	3850
2.	Number referred	....	....	2779
3.	Number actually treated	....	....	2032
4.	Attendances at Treatment Centres	....		5355
5.	Number of Inspection Sessions	....		41½
6.	Number of Treatment Sessions	....		807½
7.	Fillings:			
	Permanent Teeth	....	....	2669
	Temporary Teeth	....	....	696
8.	Extractions:			
	Permanent Teeth	....	....	895
	Temporary Teeth	....	....	3604
9.	General Anaesthetic Cases	....	....	332
10.	Other Operations:			
	Permanent Teeth	....	....	2942
	Temporary Teeth	....	....	696

(Signed) I. O. Enos,
County Senior Dental Officer.

MILK IN SCHOOLS SCHEME.

On a given day in 1949, 8465 pupils in attendance took milk.

The type of milk being supplied has varied but little since 1945. The following table gives details:—

<i>Type of Milk.</i>	<i>No. of schools being supplied.</i>			
Tuberculin Tested	21
Pasteurised	56
National Dried	3

The majority of schools now receive milk in $\frac{1}{3}$ pint bottles. The particulars as compared with previous years are set out below:—

	1944	1945	1946	1947	1948	1949
Schools supplied in $\frac{1}{3}$ pints	23	46	65	67	66	68
„ „ „ I „	29	24	14	14	15	9
„ „ „ bulk	25	10	—	—	—	—

The supply of milk to some of the schools in Ely Rural District has always presented a problem as suppliers have been unable to deliver in $\frac{1}{3}$ pt. containers, but the main source of supply is highly satisfactory, being certified T.T.

Since the 6th August, 1946, all pupils requiring milk are supplied free of charge.

The percentage of pupils taking milk remained as high during 1949.

	<i>July</i> 1945	<i>July</i> 1946	<i>Dec.</i> 1946	<i>Dec.</i> 1947	<i>Oct.</i> 1948	<i>Oct.</i> 1949
No. on school rolls	10,072	10,761	11,433	11,809	11,287	11,264
No. of $\frac{1}{3}$ pints supplied	6,007	8,084	8,949	8,377	8,379	8,465
Percentage receiving milk	59%	75%	78%	71%	74%	75%

SUMMARY OF HANDICAPPED PUPILS.

Category	In Special Schools		In maintained Primary & Secondary Schools		In Independent Schools		Not at School		TOTAL	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Blind	1	..	..	..	..	..	2	..	3	..
Partially Sighted ..	2	..	..	1	..	..	1	..	3	1
Deaf .. ..	..	4	1	..	..	..	1	..	2	4
Partially Deaf .. ..	..	..	1	1	..	..	1	2	2	3
Delicate .. ..	..	..	7	9	..	..	2	1	9	10
Diabetic .. ..	..	..	2	1	..	..	..	..	2	1
Educationally sub-normal ..	4	7	71	47	..	..	3	3	78	57
Epileptic	1	1	4	4	..	..	1	1	6	6
Maladjusted .. ..	..	..	7	5	..	..	..	..	7	5
Physically Handicapped	9	5	16	14	..	..	4	5	29	24
Multiple Defects ..	..	..	..	1	..	..	1	2	1	3
	17	17	109	83	..	..	16	14	142	114

DISPOSAL OF HANDICAPPED PUPILS.

Physically Handicapped.

One crippled girl was admitted to the Palace School for Crippled Girls, Ely.

A vacancy was obtained for a boy at the Cheyne Hospital for Sick Children, Sevenoaks. He was subsequently discharged and admitted to the Victoria Home, Bournemouth, which is a school under the auspices of the Shaftesbury Society.

One boy suffering from congenital heart disease was admitted to the Children's Heart Home, West Wickham, Kent.

Educationally sub-normal.

One girl was admitted to the Greenwood School, Halstead, Essex.

INFECTIOUS DISEASE IN SCHOOL.

No schools were closed for epidemics in 1949. The following table gives the incidence of notifiable and other infectious diseases:—

Schools concerned 81	Diphtheria	Scarlet Fever	Whooping cough	Chicken pox	Measles	German measles	Mumps	Total
Cases	69	67	525	328	120	416	1525
Contacts	25	...	1	...	...	1	27

IMMUNISATION.

Diphtheria.

During 1949, 132 school children received two injections of A.P.T. and 131 received a re-inforcing, or 'booster,' injection.

PROVISION OF COOKED MEALS AND HOT DRINKS IN SCHOOLS.

Cooked mid-day meals were provided for 39 schools during 1949, and on a certain day in October 4,287 children took advantage of the scheme.

The total number of pupils receiving free dinners on a certain date was 173.

In place of hot dinners, or to amplify the existing numbers of hot dinners in certain schools where it was impossible to cope with all the children who desired a cooked meal, hot drinks are provided for consumption with the children's packed lunch. It was the custom in those schools where there were in attendance pupils from a distance as well as local pupils to reserve the limited number of hot dinners for those who travelled. The number of schools in which hot drinks were provided was 14 and the average consumption was 350 drinks daily. Two schools previously supplying hot drinks are now providing cooked meals.

HYGIENE IN SCHOOLS.

It was not found possible to embark on the building of any new schools during 1949, but the erection of prefabricated huts on several school premises relieved to a great extent the pressure of overcrowding noted previously. These lightly constructed buildings are highly popular with teaching staff and are found to satisfy all hygienic requirements for light, warmth, space and cleanliness.

A routine hygiene inspection was carried out during the periodic medical inspections at each school and sanitary defects were reported in seven instances. Appropriate action was initiated and the repairs carried out, mainly to school lavatories and urinals.

PHYSICAL TRAINING.

Physical training continues to be carried on by instructors and specially trained members of the teaching staff. When the existing vacancy for an Orthopaedic After-Care Sister is filled, it is hoped once again to link up her remedial work with the physical training and teaching staffs on the same satisfactory lines as existed previously.

Co-OPERATION.

The measure of co-operation which has existed between the Chief Education Officer and his staff and the staff of the School Medical Department continues to be very close and leads to prompt action in any matters which concern either department. The Head Teachers and teaching staffs continue to give valuable assistance at the periodic medical inspections and also in referring pupils with defects. As regards the latter we regard the teachers as our most reliable source of information.

Parents are fully appreciative of the scope of the services and the high acceptance ready for all types of treatment offered is evidence of their co-operation.

The local inspectors of the N.S.P.C.C. have at all times responded promptly to requests for assistance in dealing with problem families and the three School Attendance Officers link up with this department in all investigations concerning prolonged absences of pupils due to health reasons.

TABLE I.

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

A.—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups—

Entrants	....	....	....	....	1584
Second Age Group	....	....	....	....	1386
Third Age Group	....	....	....	....	639
				Total	3609
Number of other Periodic Inspections	....	....	....	....	63
				Grand Total	3672

B.—OTHER INSPECTIONS.

Number of Special Inspections	....	....	....	41
Number of Re-Inspections	....	....	....	2564
			Total	2605

C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with Vermin).

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table II. A.	Total individual pupils
(1)	(2)	(3)	(4)
Entrants	38	59	94
Second Age Group	76	40	110
Third Age Group	60	25	80
Total (prescribed groups)	174	124	284
Other Periodic Inspections	5	3	7
Grand Total	179	127	291

TABLE II.
A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31ST DECEMBER, 1949.

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of defects		No. of defects	
		Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin	19	49	..	5
5	Eyes—				
	a. Vision	179	109	6	7
	b. Squint	26	47	..	3
	c. Other .. ..	..	..	..	..
6	Ears—				
	a. Hearing	1	7	..	..
	b. Otitis Media ..	7	27	..	..
	c. Other	3	19	..	4
7	Nose or Throat ..	62	396	..	5
8	Speech	10	19	..	1
9	Cervical Glands ..	21	200	5	2
10	Heart and Circulation ..	9	75	..	1
11	Lungs .. ..	..	41	..	..
12	Developmental—				
	a. Hernia	3	6	1	..
	b. Other .. ..	..	1	..	..
13	Orthopaedic—				
	a. Posture	2	52	..	8
	b. Flat foot	17	70	..	11
	c. Other	15	136	..	6
14	Nervous system—				
	a. Epilepsy .. ..	..	3	..	..
	b. Other	1	21	..	..
15	Psychological—				
	a. Development ..	..	8	..	..
	b. Stability .. ..	..	12	..	..
16	Other	26	132	3	..

B. 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.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants ..	1584	604	38·13	964	60·85	16	1·01
Second Age Group	1386	399	28·78	967	69·76	20	1·44
Third Age Group	639	233	36·46	394	61·65	12	1·87
Other Periodic Inspections	63	15	23·80	48	76·19	..	..
Total ..	3672	1251	34·06	2373	64·62	48	1·30

TABLE III.
TREATMENT TABLES.
GROUP I.—MINOR AILMENTS
(excluding Uncleanliness, for which see Table V.)

(a)	Number of Defects treated, or under treatment during the year
Skin—	
Ringworm—Scalp—	
(i) X-Ray treatment. If none indicate by dash	—
(ii) Other treatment	1
Ringworm—Body	8
Scabies	18
Impetigo ...	180
Other skin diseases	111
Eye Disease	141
(External and other, but excluding errors of refraction, squint and cases admitted to hospital).	
Ear Defects	93
(Treatment for serious diseases of the ear (e.g. operative treatment in hospital) should not be recor- ded here but in the body of the School Medical Officer's Annual Report).	
Miscellaneous (e.g. minor injuries, bruises, sores, chilblains, etc.)	1233
Total	1785
(b) Total number of attendances at Authority's minor ailment clinics ...	6747

GROUP II.—DEFECTIVE VISION AND SQUINT.

(Excluding Eye Disease treated as Minor Ailments—Group I).

	<i>No. of defects dealt with</i>
ERRORS OF REFRACTION (including squint). (Operations for squint should be recorded separately in the body of the School Medical Officers Report)	613
Other defect or disease of the eyes (excluding those recorded in Group I)	5
Total	<u>618</u>
No. of Pupils for whom spectacles were	
(a) Prescribed	496
(b) Obtained	372

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

	<i>Total number treated</i>
Received operative treatment—	
(a) for adenoids and chronic tonsilitis	176
(b) for other nose and throat conditions	8
Received other forms of treatment	92
Total	<u>276</u>

GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) No. treated as in-patients in hospitals or hospital schools	14
(b) No. treated otherwise, <i>e.g.</i> , in clinics or out-patient departments	197

GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY.

No. of Pupils treated—

(a) under Child Guidance arrangements ...	1
(b) under Speech Therapy arrangements ...	130

TABLE IV.

DENTAL INSPECTION AND TREATMENT.

(1)	Number of pupils inspected by the Authority's Dental Officers—				
	(a)	Periodic age groups....	....	....	3850
	(b)	Specials	....	....	—
	(c)	TOTAL (Periodic and Specials)	....	....	3850
(2)	Number found to require treatment				2779
(3)	Number actually treated				2032
(4)	Attendances made by pupils for treatment				5355
(5)	Half-days devoted to (a) Inspection				41½
	(b) Treatment				807½
	Total (a) and (b)				849
(6)	Fillings:		Permanent Teeth	....	2669
			Temporary Teeth	....	696
			Total	....	3365
(7)	Extractions:		Permanent Teeth	....	895
			Temporary Teeth	....	3604
			Total	....	4499
(8)	Administration of general anaesthetics for ex- traction				332
(9)	Other Operations:		(a) Permanent Teeth	....	2942
			(b) Temporary Teeth	....	696
			Total (a) and (b)	....	3638

TABLE V.

INFESTATION WITH VERMIN.

(i)	Total number of examinations in the schools by the school nurses or other authorised persons					15,684
(ii)	Total number of individual pupils found to be infested					412
(iii)	Number of individual pupils in respect of whom clean- sing notices were issued (Section 54(2), Education Act, 1944)					3
(iv)	Number of individual pupils in respect of whom clean- sing orders were issued (Section 54(3), Education Act, 1944)					3

INDEX.

	PAGE
Defective Vision	13 & 28
Dental Treatment	16 & 29
Ear, Nose and Throat/Treatment	14 & 15
Handicapped Pupils	21
Infectious Diseases	22
Meals in Schools	22
Medical Inspection	7
Milk in Schools	20
Minor Ailment Clinics	10
Orthopaedic Treatment	15
Orthoptic Treatment	14
Physical Training	23
Routine Inspections....	8
Speech Therapy	16
Staff	6
Statistics	7
Tonsils and Adenoids	14
Uncleanliness	29

