Contributors

Isle of Ely (England). County Council. n 78027969

Publication/Creation

1961

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ISLE OF ELY COUNTY COUNCIL.

EDUCATION COMMITTEE

ANNUAL REPORT

of the

PRINCIPAL SCHOOL MEDICAL OFFICER

for the

Year ending 31st December, 1961.

With the Compliments of the County Medical Officer for the Iste of Ely County Health Department. County Hall, March, Cambs.

ISLE OF ELY COUNTY COUNCIL.

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Sharman & Co., Ltd., High Street, March.

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To the Chairman and Members of the Isle of E!y Education Committee

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report on the School Health Service for the year 1961.

I wish to record my most sincere appreciation of the good team work and loyal service of the whole staff of the department, of the full co-operation of the Chief Education Officer, his staff, and the teachers of the Isle, and of the interest and encouragement of the Chairman and Members of the School Medical Service Sub-Committee.

I have the honour to be, Ladies and Gentlemen.

Your obedient servant,

M. E. HOCKEN,

Principal School Medical Officer.

STAFF

Principal School Medical Officer M. E. HOCKEN, MB ChB DPH Deputy: J. C. BURNS, MB BCh BAO DPH

School Medical Officers

M. E. HANLON, MB ChB (resigned 24/1/61)
L. MARCZEWSKI, Med. Dip. (U Lwow) (resigned 31/3/61)
W. A. GARSON, LMSSA (appointed 10/4/61)
J. L. STEWART, MD MB CHB (appointed 24/4/61)

Principal School Dental Officer

N. J. ROWLAND, LDS RCS (Ed.)

School Dental Officers ONE VACANCY

G. F. WHEELER, LDS MRS. O. FOULDS, LDS (part time)

Speech Therapist D. HALDEN, LCST (resigned 10/1/61)

Speech Therapist—Part-time J. A. ECKERSLEY (appointed 11/1/61)

> Orthopaedic Physiotherapist VACANCY

Oculist-Part-time

M. PERRERS TAYLOR, MRCS LRCP DPH DOMS H. L. BACKHOUSE, BA BM BCh DO

> Orthoptist—Part-time S. HYND

Educational Psychologist E. C. GRAY (appointed 17/4/61)

G. M. SANDERS, Queen's Nurse SRN SCM HV Cert

Assistant Supt. Nursing Officer

M. HARRIS, Queen's Nurse SRN SCM HV Cert (resigned 31/3/61)

Health Visitors and School Nurses
I. F. BOXOLD, SRN SCM HV Cert
J. BRIGHTON, SRN SCM HV Cert
M. B. GUDGEON. SRN SCM HV Cert
M. E. JOYNT, SRN SCM HV Cert
R. WARD, SRN SCM SRFN HV Cert
B. WEBB, SRN SCM HV Cert
F. B. WEST, SRN HV Cert (resigned 30/4/61)

School Nurses-Part-time

S. BARNES, SRN SCM (died 12/7/61) H. BROADHEAD, SRN SCM HV Cert E. CHEVANNES, Queen's Nurse SRN SCM HV Cert E. HARRIS, Queen's Nurse SRN SCM HV Cert (left 9/1/61) G. HARRIS, Queen's Nurse SRN SCM HV Cert E. HATFIELD, Queen's Nurse SRN SCM HV Cert A. HENEY, Queen's Nurse SRN SCM HV Cert K. M. RAILTON, Queen's Nurse SRN SCM HV Cert B. M. S. ROBINSON, SRN SCM D. M. RUSSELL, Queen's Nurse SRN SCM HV Cert (appointed 11/9/61) P. SMITH, Queen's Nurse SRN SCM

P. STITT, SRN SCM

S. M. WRIGHT, Queen's Nurse SRN SCM HV Cert (appointed 4/6/61)

Clinic Nurses

J. R. SHAW (resigned 26/10/61)
M. HOYLES (resigned 1/6/61)
M. M. REID (appointed 10/7/61)
E. WHITWELL (appointed 2/11/61)

Dental Attendants

V. BRADLEY, J. MELLOY

Dental Attendant-Part-time

MRS. J. GOTHARD

Clerical Staff

H. A. HOUSE (Administrative Officer) J. GIPSON, A. MILLER, J. ORBINE

ANNUAL REPORT 1961

No. of Children on Roll:---

Primary Schools	*******			BROOMS	8526
Secondary Schools	*******	·			5940
Special Schools			*******		56
					14522
No. of Schools					72

MEDICAL INSPECTIONS

Routine visits of inspection were paid to 31 schools.

	1961	1960	1959	1958	1957
Periodic Inspection	3706	1282	2614	2216	4215
Special Inspections	38	41	45	45	91
Re-inspections	528	256	1026	1321	2479
Total	4272	1579	3685	3582	6785

It is hoped to give every child three periodic medical examinations during his school career, the first as soon as possible after admission to school, the second while he is in the junior school, and the third during the year prior to his fifteenth birthday.

WORK OF SCHOOL NURSES-CLEANLINESS INSPECTIONS

Sessions spent at routine medical inspection	Average number of visits per school for cleanliness inspection	No. of children examined for cleanliness	No. of individual children found unclean	Follow- up visits for all purposes	Attendances at minor ailment and eye clinics
187	3.1	26321	381	1083	198

HEALTH EDUCATION.

School medical officers and nurses use every opportunity to teach individual pupils on health matters.

A course on hygiene, housewifery and mothercraft is given every term by the assistant superintendent nursing officer at the Sir Harry Smith School, Whittlesey. By arrangement with the headmaster eight sessions of about half an hour each are devoted to short talks, films and demonstrations for senior girls. They have proved very popular and it is hoped other schools will consider the introduction of a similar series of instruction for their pupils.

CLINIC	ADDRESS DOG	DOCTOR PRESENT		
WISBECH	County Clinic, Lynn 1st & 3r Rd., Wisbech	d Friday mornings		
MARCH	County Clinic, County 4th Thu Hall, March			
ELY	County Clinic, Down When re ham Rd., Ely	quired		
THORNEY	Duke of Bedford C.P 3rd Thus School	rsday afternoon		
WHITTLESEY OUTWELL CHATTERIS	Sir Harry Smith School 1st Thur Beaupre School 3rd Mond	sday afternoon lay afternoon ly morning		

MINOR AILMENT CLINICS

TREATMENT OF MINOR AILMENTS IN THE CLINICS FOR THE YEAR 1961. (Individual numbers of children treated)

	Wisbech	March	EIJ	Chatteris	Thorney	Outwell	Whittlesey
Ringworm (head)	:	:	:	:	:	:	:
Ringworm (body)	:	1	:	:	:	:	:
Scabies	:	:	:	:	:	:	:
Impetigo	ŝ	ŝ	:	2	:	73	1
Other skin diseases	:	:	:	36	11	:	52
Minor eye defects	1	11	:	5	15	20	6
Minor ear defects	:	:	:	2	9	2	1
Miscellaneous	33	00	4	28	69	484	70
TOTALS	37	23	4	73	101	513	133

GRAND TOTAL: 884 Total attendances made by children: 1174

	Number of Clinics			Total Attendances
Doddington Hospital	41	264	(62)	367
Wisbech Clarkson Hospital	37	221	(99)	337
Ely School Clinic	47	285	(73)	548
Total	125	770 (234)	1252

ATTENDANCES AT EYE CLINICS DURING 1961

New Cases shown in Brackets

Ophthalmic Treatment

Miss Perrers Taylor reports as follows:

In making my annual report on the Ely ophthalmic clinic I am pleased to report that attendances have been good and we now have very few defaulters. There have been 293 attendances, including 34 new cases. Much of the work is refraction work. There are a considerable number of cases of squint in the area and these have been dealt with by glasses, orthoptic treatment, and surgery when required. Treatment has been needed for chronic lid infections, obstructed tear passages, and conjunctivitis. In addition, a few cases are under observation for certain hereditary conditions, and guidance is given to some school leavers on suitable occupations.

It has been a satisfactory year, and I am grateful for the able assistance of Miss Hynd, our orthoptist, and the very efficient organisation of the clinics by Nurse Gudgeon.

Dr. Backhouse reports as follows: ----

The eye clinic has had a year without changes of staff, though Miss Hynd having exchanged her year old red Minicar for a blue one talked of going to New Zealand.

Many more new cases, including several under 5 years old, have been referred this year and this is in Ene with the policy of early active treatment practised at Addenbrooke's where recently a girl of 12 months was discharged after a successful operation for marked strabismus. Last year I reported the first local case of toxocara infection to be diagnosed in this area. Several more cases have now been diagnosed all in association with keeping dogs.

ELY ORTHOPTIC CLINIC

Miss Hynd reports as follows : ----

Again sessions have been worked each Thursday morning and afternoon. Attendances and notification of absence have improved this year.

More patients have been discharged though the figures show a number had no defect. This perhaps proves greater interest taken on the part of the patients.

Personal	10.5					
New cases					37	
Number of paties	nts disch	narged :				
Cured					8	
Improved			*******		3	
Failed to att	tend				1	
No defect				*******	4	
Left district		x	4041111	*******	3	
			T	otal	19	
Number of paties	ats admi	tted to	hospit	al for	operation	, ·
To Newmar		tica to	nospia		4	
To Addenbr			*******		1	
			-			
			Т	otal	5	
Number of paties for operation		aiting l			5	
Number of patie regular orth	ents atte	nding f	or		50	
Number of patie					73	
I differ of Party				otal	123	
			1	otai		
Number of sessi	ons				86	
Number of appo	intments	given			664	
Number of atten	dances				524	
Percentage of de	efaulters				21.1	
Average number					6.1	

8

AUDIOMETRY

Some children suffer from a slight deafness sufficient to cause educational backwardness and in order to discover these children early in their school life every pupil has his hearing tested audiometrically at the time of his first medical examination in school. In 1961 routine audiometry sweep tests were carried out on 880 boys and 1,010 girls and, of these, 99 boys and 106 girls (10.84%)were found to require further investigation. In addition pupils referred by headteachers, school nurses and at the parent's request were examined.

A failure in the 'sweep' test is registered if there is a hearing loss of more than 20 decibels for a sound at any frequency between 250 and 4000 cycles per second. Those children who fail are retested and, if still found to be defective and requiring treatment, are referred to their general practitioner, or through him to the local ear, nose and throat surgeon.

CHILD GUIDANCE CLINIC

Under the auspices of the regional hospital board, a child guidance clinic is held every week at the county clinic in March under the direction of the consultant child psychiatrist, Dr. R. E. Glennie.

Cases From The Isle Of Ely, 1961

A. New Cases Seen

			Notified
	1. At March clinic	cases	to SMO 13
	2. At Child Psychiatric Clinic, Chesterton, Cambridge		2
	3. At Addenbrooke's Hospital, Cambridge	5	0
		27	15
	Sources of cases		
	(a) School medical officers		
	(b) Genera! practitioners	15	
	(c) Magistrates and probation officer		
	(d) Consultants		
	(e) Others	2	
		27	
	Chesterton, Cambridge 3. At Addenbrooke's Hospital, Cambridge	<u>5</u> 	
	Number of clinics held at March in 1961.	: 39	
D.	Total number of cases seen		
	MARCH CI	HESTER-	ADDEN-
	No. of times child seen	TON	BROOKE'S
	by psychiatrist 158 No. of times parents seen by	62	34
	No. of times parents seen by social worker or psychia-	37	14
	tric social worker 41 No. of times child seen by	14	27
	psychologist	61	3
	322	174	78

Mr. N. J. Rowlands, the principal school dental officer, has submitted the following report:—

At the beginning of the year we were able to utilise both the March and Whittlesey clinics to their fullest extent as Mr. G. F. Wheeler had recently taken up his duties as a full time officer. We were unsuccessful in our attempts to add further to our staff during the year.

In the March area periodic inspection and treatment was carried out during the year. Certain schools were inspected that had hitherto been denied a service for many years, viz.: Wimblington, Hereward Boys' and Girls' Secondary Modern Schools. From April, numerous evening sessions were worked and this enabled a greater number of children to receive treatment. They were mostly attended by senior pupils, and it was particularly encouraging to see that the headteachers of the Hereward Schools recorded, in their annual reports, their appreciation of the treatment given to their pupils at these sessions.

A great amount of treatment was carried out in the Whittle-We undertook a certain amount of dental health sev area. education at the local schools in the form of talks and film displays. This work, together with the good example shown by the early patients, led to an even greater demand for treatment than we had at first anticipated. It was extremely gratifying to see such a marked improvement on general dental health when some of the schools were re-examined towards the end of the year. It was also interesting to note that a number of parents, who originally refused treatment on behalf of their children, were sufficiently stimulated to accept when re-offered. Again, from April, the dental officer worked two evening sessions per week in addition to the day clinics, and this was greatly appreciated, particularly in view of the fact that the area lost its general dental practice during the year, which left the school clinic as the only place for treatment in the vicinity.

One session per week was set aside at Whittlesey for the treatment of children from the Thorney area who were transported to and from the clinic. In common with most regions of the Isle where there was no dental service, the state of the teeth was appalling, and for the first fourteen treatment sessions, we were confined to extracting the unsavable teeth for those who had accepted treatment. No attempt was made to start conservation work until the mouths were cleared of sepsis. During this short period, over 300 teeth were extracted! Later in the year, systematic conservation work was commenced.

At Ely, the part time dental officer continued to give a valuable service throughout the year working approximately four sessions per week. It is regrettable that other parts of the county remain without a school dental service, but until there is an increase in the professional staff, I am afraid that there is little that can be done. The present staff are doing their utmost to cope with the demands of about half the school population of the Isle.

The policy of maintaining a high standard of dentistry using the most modern equipment was pursued, and high speed airotors were installed in two clinics. Experience has shown that airotors have a decided value with older children, but on the whole, younger children tend to prefer the conventional methods of cavity preparation.

During the year I had the opportunity of visiting the training school (at New Cross Hospital, London) for the experimental group of dental trainees — the dental auxiliaries. These are young ladies who receive a two year course on a limited number of dental procedures. Their purpose is to supplement the small numbers of qualified dental surgeons who, at present, staff the school dental service. When qualified, they will work for local authorities under the supervision of dental officers. I was impressed by their enthusiasm and high standard of training. The first sixty graduates will emerge in July, 1962, but out of this small number no one, as yet, has been allocated to this authority. However, we are hoping to employ at least one auxiliary in the future, to work in conjunction with a dental officer at the proposed new health centre at Wisbech.

It will be seen from the statistics on dental inspections and treatment, that 75% of the children inspected required treatment, as compared with a figure of 82% the previous year. This indicates an improvement in the dental health of the children who were inspected, but it should be borne in mind that these are mainly the children from the established areas fortunate enough to have already received a dental service, and does not take into account all those who we have been unable to inspect because of staff shortage. If the neglected areas were included, I have no doubt that they would raise the percentage requiring treatment to approximately 90. It will be seen, therefore, what a gigantic task faces a pitifully understaffed school dental service.

I must record my thanks to the dental staff, without whose enthusiasm and team work we could not have expanded the service during the year. My thanks are also due once again to the principal school medical officer and the staff of the health department, together with the headteachers, for their valuable help.

Speech Therapy

Miss Eckersley reports as follows:-

Throughout the year, clinics have been held at:-County Clinic, Ely. St. Audrey's Infants' School, Ely. Littleport Primary School. Stretham Junior School. The Manor School, Wilburton.

79 cases have been treated throughout the year and 25 discharged. In order to attempt to meet the number of children requiring treatment, weekly cEnics have been held in Ely and Littleport: and fortnightly clinics in Stretham. A fortnightly clinic was started at The Manor School, Wilburton, in December, 1961.

The majority of children have been treated in the schools and parents seen by appointment only. On the whole one tends to have better home co-operation if the patient is accompanied to the clinic by a parent, as is usual at the County Clinic, Ely. Clinic staff and teachers, however, have been most helpful in giving extra details of home conditions. e.g. One boy that I treat at a school was misbehaving and being most unco-operative. This was not usual. His teacher was able to inform me that he had been upset by his mother going into hospital. I was therefore able to make allowances in his treatment.

I should like to thank the doctors, health visitors, headteachers and teachers who have been so helpful during the year.

Category		Sch (incl Hos Sp	pecial nools uding pital ecial ools)	mair Prima Seco	In ntained ary and ondary nools	Inde	In pend ent hoois	No Sci	t si 100	то	TAL
		M.	F.	M.	F.	M.	F.	М.	F.	M.	F.
3lind		3						1		4	
artially Sighted		3	3	1						4	3
Deaf		3	1			1				4	1
Partially Deaf		6	4							6	4
Delicate		3	2	3	2					6	4
Educationally Sub-normal Resident pupils Day pupils		23 18	24 8	 80	45				}	121	77
pileptic		2	1							2	1
faladjusted		2	2							2	2
hysically Handicapp Resident pupils Day pupils	oed 	6 1	2 3	5	 8		 		}	12	13
		70	50	89	55	1		1		161	105

HANDICAPPED PUPILS.

During the year handicapped pupils were admitted to special residential schools outside the County as follows:-

CATEGORY				Boys	GIRLS
Partially sig	ghted		 	 	1
Partially de	af		 	 1	
Delicate			 	 	1
Epileptic			 	 1	
Educational	ly sub-no	rmal	 	 4	2
Maladjusted			 	 	1*

* This girl was admitted to a special hostel for the maladjusted and attends at the local grammar school.

Admissions to the authority's Wilburton Manor Special School for the educationally sub-normal totalled 15, and of these 8 (4 boys and 4 girls) became resident, and 7 (4 boys and 3 girls) commenced daily attendance. There are considerably more boys than girls referred for examination with a view to special educational treatment as educationally sub-normal pupils. There is no evidence to suggest that boys are more likely to be educationally sub-normal than girls and one explanation is that backward girls of primary school age present few behaviour problems in the ordinary schools.

It is the duty of the authority to ascertain which pupils will require special educational treatment and the majority of the work concerns the examination of the backward child likely to be found educationally sub-normal. Prior to the appointment of the educational psychologist, who commenced duties early in the year, the school medical officers carried out the entire procedure which involved home visits, intelligence testing, and the medical examination of each pupil. This meant an appreciable amount of time being spent by the medical officers on work not of an essentially medical character. The arrangements were, therefore, reviewed and it was decided that the health visitors would pay a special visit to the home of each child referred for examination in order to advise the parents of the reasons for the forthcoming examinations by the educational psychologist and medical officer, of which the parents had been informed in advance. These home visits have resulted in a better understanding on the part of the parents of the efforts being made to help their children. The association of the health visitor with the educational psychologist, responsible for the intelligence testing, and the medical officer, carrying out the medical examination and finalising the ascertainment, will, it is hoped, produce recommendations of optimum benefit to each pupil.

TUBERCULOSIS

471 examinations of school children were carried out at the chest clinics at Wisbech, Doddington and Peterborough by the chest physician during 1961. Of this number 134 were new cases, the remainder being re-examinations.

375 X-ray examinations of school children were carried out at the chest clinics and of these 259 were new cases, the remainder being re-examinations of old cases.

BCG vaccination

BCG vaccination against tuberculosis is offered to all thirteenyear-old children who need it. After obtaining parental consent a preliminary skin test, using the Heaf gun multiple puncture technique, is carried out by injecting a small quantity of tuberculin into the skin of the forearm. A red raised area develops within a week in some children who are then advised to undergo a routine chest X-ray. Where no such reaction occurs the child receives BCG vaccination, usually into the skin of the left arm. After two weeks a papule forms which progresses during the subsequent four to six weeks and finally heals leaving a tiny scar. 701 children were vaccinated in this way.

School	Tuberc Tested		_	Ab- sent	%+	BCG
Chatteris, The Cromwell	85	2	81	2	2.4	81
Ely, High	108	4	92	12	3.7	92
Ely, The King's	73	9	63	1	12.3	63
Ely, The Needham's	45	4	41	0	8.9	41
Ely, The Palace	9	0	9	0	0.00	9
Littleport, The Martin	91	0	87	4	00.0	87
March, Grammar	76	7	68	1	9.2	68
March, High	53	5	48	0	9.4	48
March, The Herewards Girls'	58	5	51	2	8.6	51
Thorney, The Duke of Bedford	42	2	39	1	4.8	39
Whittlesey, The Sir Harry Smi		7	67	4	9.0	
Wisbech, Grammar	40	2	37	1	5.0	37
Wisbech, High	3	1	2	0	33.3	2
Wisbech, The Queen's Boys'	5	0	4	1	00.0	4
Wisbech, The Queen's Girls'	4	0	4	0	00.0	4
Wisbech, St. Audrey's Conver	nt 9	0	8	1	00.0	8
Total	779	48	701	30	6.2	701

BCG VACCINATIONS, 1961

INFECTIOUS DISEASES

The following table gives the incidence of notifiable and other infectious diseases:-

	Diph- theria	Scarlet Fever	Whoop- ing cough	Chic- ken pox	Meas- les	German measles	Mumps	Total
Cases		49	55	256	560	69	640	1629
Contacts				2	1		1	4

IMMUNISATION

Diphtheria

During 1961, 323 school children were immunised against diphtheria and 757 received a re-inforcing, or 'booster', injection, *Poliomyelitis*

During 1961, 1,973 immunisations were given, each child receiving two injections.

Whooping Cough

During 1961, 157 pupils were immunised against whooping cough.

MILK IN SCHOOLS SCHEME

On a given day in September 1961, 11,528 pupils in attendance took milk.

All schools, including non-maintained schools, now receive milk in $\frac{1}{3}$ pint bottles.

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

October 1955 1956 1957 1958 1959 1960 1961 No. on school

rolls 13,336 14,594 14,573 14,292 14,250 14,146 14,712 No. of $\frac{1}{3}$ pints

supplied 10,157 10,956 11,067 11,142 11,203 10,875 11,528 Percentage

receiving milk 76% 75% 76% 78% 79% 77% 78%

PROVISION OF COOKED MEALS AND HOT DRINKS IN SCHOOLS

During 1961, school meals were provided in all schools.

On a day in September, 1961, the number of mid-day meals served was 7,196.

HYGIENE IN SCHOOLS

A routine hygiene inspection was carried out during the periodic medical inspection at each school and any sanitary defects were reported. Appropriate action was initiated and the repairs carried out. PHYSICAL TRAINING

Physical training continued to be carried on by instructors and specially trained members of the teaching staff.

SPECIAL EXAMINATIONS

The following examinations were carried out during 1961: Prospective teachers ______ 41 Entrants to teaching profession _____ 22

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 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 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 AND SECONDARY SCHOOLS (including Nursery and Special Schools)

Number of pupils on registers in January, 1962 _____ 14,522

Age Groups	No. of Pupils Inspected	Ph	iysical Condi Insp	tion of Pup ected	oils		
Inspected (By year of birth)	ampressed	Satisfactory		Satisfactory		Unsat	isfactory
bir (ii)		No.	%	No.	%		
1957 and later	2	2	100.00				
1956	368	358	97.28	10	2.72		
1955	491	482	98.17	9	1.83		
1954	416	407	97.84	9	2.16		
1953	229	225	98.25	4	1.75		
1952	121	116	95.87	5	4.13		
1951	432	428	99.07	4	0.93		
1950	511	510	99.80	1	0.20		
1949	251	251	100.00				
1948	154	153	99.35	1	0.65		
1947	418	417	99.76	1	0.24		
1946 and earlier	313	312	99.68	1	0.32		
TOTAL	3706	3661	98.79	45	1.21		

A-PERIODIC MEDICAL INSPECTIONS

B—OTHER INSPECTIONS

Number	of	Special	Inspections			38
Number	of	Re-insp	pections	******		528
					Total	566

C .- PUPILS FOUND TO REQUIRE TREATMENT

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

Age groups Inspected (by year of birth)	For defective vision (excluding squint)	For any of the other conditions	Total individual pupils
1957 and later	_		
1956	4	56	54
1955	9	76	78
1954	10	43	50
1953	13	19	28
1952	4	8	12
1951	12	30	40
1950	19	40	55
1949	5	21	26
1948	12	15	26
1947	16	51	60
1946 and earlier	13	20	33
TOTAL	117	379	462

INFESTATION WITH VERMIN.

(i)	Total number of individual examinations of pupils in schools by the school nurses or other authorised	
	persons	26,321
(ii)	Total number of <i>individual</i> pupils found to be infested	381
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Educa-	
	tion Act, 1944)	

TABLE II

Defect		PERIODIC INSPECTIONS				
or Disease	ENTRANT	5 LEAVERS	OTHERS	TOTAL		
Skin	T 11	5	31	47		
	O 15	16	58	89		
Eyes—a. Vision	T 13	29	75	117		
	O 69	133	235	437		
b. Squint	T 4	2	6	12		
b. Squint	0 15	5	27	47		
c. Other	T 5	1		9		
c. Other	0 2	6	3 4			
Tong o Hooning			-	12		
Ears—a. Hearing	T _	2	4	6		
1 01111 15 11	O 43	5	28	76		
b. Otitis Media	T 1	1	5	7		
	O 7	2	11	20		
c. Other	T 7	28	31	66		
	O 19	3	22	44		
Nose and Throat	T 41	1	21	63		
	O 113	16	120	249		
Speech	T 8	_	13	21		
	0 6		7	13		
Lympathic Glands	T 2	1		3		
sympathic Glands	0 87	6	38	131		
Teent		2		10		
Heart	T 5		3			
	0 6	16	19	41		
Lungs	T 5	1	12	18		
	O 26	4	49	79		
Developmental—a. Hernia	T 1	-	-	1		
	0 4	1		5		
b. Other	T 13	11	25	49		
	O 40	30	100	170		
Orthopaedic—a. Posture	T _	-	1	1		
orthopacaie al a obtaile	O 10	4	29	43		
b. Feet	T 10	10	10	30		
D. reet	0 11	6	39	56		
a Othan		3	7	20		
c. Other		14		68		
	O 10	14	44	00		
Nervous System—	-			4		
a. Epilepsy	Т 3	-	1	4		
	0 -	-	1	1		
b. Other	т —	-				
	0 2	1	5	8		
Psychological—				1		
a. Development	т —	1	1	2		
	0 6	1	11	18		
b. Stability	T 3	1	2	6		
b. Stability	O 15	1	8	24		
Abdomen	T 1	-	_			
Abdomen	0 0		3	5		
Data	O 2 T 2	1	5	1 5 3		
Other	T 2 0 5	1	12	21		

A. DEFECTS FOUND BY MEDICAL INSPECTION A. PERIODIC INSPECTIONS

T=Defect requiring treatment O=Defect requiring observation

TABLE II (Continued)

B. SPECIAL INSPECTIONS

Defect	Special Ins	spections
or Disease	Requiring Treatment	Requiring Observation
Skin Eyes—	2	1
a. Vision		6
b. Squint		3
c. Other		
Ears-		
a. Hearing		
b. Otitis Media		3
c. Other		
Nose and Throat		6
Speech	1	
Lymphatic Glands		2
Heart		1
Lungs		1
Developmental-	-	
a. Hernia		
b. Other		1
Orthopædic-		
a. Posture	1	
b. Feet	1	
c. Other	1	
Nervous system—		
a. Epilepsy		
b. Other		
Psychological	1	
a. Development		1
b. Stability		
Abdomen		
Other		

TABLE III.

TREATMENT OF PUPILS

(1)	EYE DISEASES, DEFECTIVE VISION AND SQUI	NT.		
	Received treatment other than for errors of		tion	
	and squint			66
	Errors of refraction (including squint)			2478
		Total		2544
	Number of pupils for whom spectacles were	prescri	bed	1716
(2)	DISEASES AND DEFECTS OF EAR, NOSE AND	THROAT	r.	
. /	Received operative treatment			
	(a) for diseases of the ear			2
	(b) for adenoids and chronic tonsiliti	s		187
	(c) for other nose and throat condit			27
	Received other forms of treatment			20
		Total		236
	Total number of pupils in schools who are	Imour		
	Total number of pupils in schools who are have been provided with hearing aids	e Knowi	1 10	
	(a) in 1961 \dots \dots \dots			2
	(b) in previous years			$\frac{2}{7}$
(0)		1000		
(3)	ORTHOPAEDIC AND POSTURAL DEFECTS.			
	Pupils treated at clinics or out-patients d Pupils treated at school for postural defect			46
		-		
		Total		46
	Deserve Course (Excession Union a		~	
(4)	DISEASES OF THE SKIN (EXCLUDING UNCLEA	ANLINES	s).	
	Received treatment for			
	Ringworm — (a) Scalp			1
	(b) Body			1
	Scabies Impetigo			11
	Impetigo Other skin diseases			102
	Other skin diseases			
		Total		115
(5)	CHILD GUIDANCE TREATMENT.			
(0)	Pupils treated at child guidance clinics			41
	22			

(6)	SPEECH THERAPY. Pupils treated by speech therapists			79
7)	OTHER TREATMENT GIVEN.			
	(a) Pupils with minor ailments			696
	(b) Pupils who received convalescent	treatm	nent	
	under school health service arrangen	nents		
	(c) Pupils who received BCG vaccination	1		774
	(d) Other than (a), (b) and (c) above.			
	Hospital In-patients:			
				51
	Surgical			42
		Total		1563

TABLE IV.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(1)	Number of pupils inspected h Dental Officers:	by the	Autho	rity's		
	(a) At Periodic Inspection(b) As Specials					$2936 \\ 499$
			Tot	tal (1)		3435
(2)	Number found to require treat	atment				2584
(3)	Number offered treatment					2501
(4)	Number actually treated					1885
(5)	Number of attendances mad ment, including those recor- below		head	ling 11	(h)	6070
(6)	Half-days devoted to:					
(0)	Periodic (School) Insp	ection				34
	Treatment					880
			Tot	tal (6)		914
(7)	Fillings:		Tot	tal (6)		914
(7)	Permanent Teeth					3425
(7)						
(7)	Permanent Teeth				 	3425
	Permanent Teeth				 	3425 196
	Permanent Teeth Temporary Teeth Number of teeth filled: Permanent Teeth			 tal (7)	 	3425 196 3621 3027
	Permanent Teeth Temporary Teeth Number of teeth filled:		 To	 tal (7)	 	$ \begin{array}{r} 3425 \\ 196 \\ \overline{3621} \end{array} $
	Permanent Teeth Temporary Teeth Number of teeth filled: Permanent Teeth		 To	 tal (7)		3425 196 3621 3027
(8)	Permanent Teeth Temporary Teeth Number of teeth filled: Permanent Teeth Temporary Teeth		 To	 tal (7) 		3425 196 3621 3027 184
	Permanent Teeth Temporary Teeth Number of teeth filled: Permanent Teeth		 To	 tal (7) 		3425 196 3621 3027 184
(8)	Permanent Teeth Temporary Teeth Number of teeth filled: Permanent Teeth Temporary Teeth Extractions:		 To	 tal (7) 		$ \begin{array}{r} 3425 \\ 196 \\ 3621 \\ 3027 \\ 184 \\ 3211 \\ \\ \hline \end{array} $

(10) Administration of general anæsthetics for extraction	1020
(11) Orthodontics:	
(a) Cases commenced during the year	22
(b) Cases carried forward from previous year	6
(c) Cases completed during the year	10
(d) Cases discontinued during the year	3
(e) Pupils treated with appliances	28
(f) Removable appliances fitted	34
(g) Fixed appliances fitted	
(h) Total attendances	. 214
(12) Number of pupils supplied with artificial dentures	25
(13) Other operations:	
Permanent Teeth	571
Temporary Teeth	141
Total (13)	712

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Health Education		*******				5
Hygiene						17
Immunisation						16
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Minor Ailment Clinics	******					$\tilde{5}$
Ophthalmic Treatment			##*****			$\overline{7}$
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