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ANNUAL REPORT

FOR 1943

OF THE

SCHOOL MEDICAL OFFICER

TO

The Education Committee

OF THE

SALOP COUNTY COUNCIL

WILLIAM TAYLOR, M.D., D.P.H.

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To the Chairman and Members of the Education Committee.

SIR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for 1943, which, in accordance with the recommendation of the Ministry of Education, has been kept down to a minimum.

The reduction in the Medical Staff to a total of four Medical Officers in the Spring of 1943 is reflected in the smaller number of routine medical inspections which has been carried out during the year; and indeed, it has been found impossible to examine all the children in the three age groups during this period of twelve months. It was, however, felt that it would be to the advantage of the children as a whole if all the routine age groups continued to be inspected as in the past, and this procedure has so far been followed.

The improvement in the nutrition of the children noted in the Report for 1942 was maintained during 1943, and there is little evidence that the rationing of food has on the whole had an adverse effect on the health of the child population of school age. The number of children taking milk in schools increased during the year to the new high percentage of 73.3 per cent., as compared with 71.8 per cent. in 1942; but however encouraging this may be, a still higher percentage ought to be attainable.

Canteens in schools, which have risen from forty-five in 1942 to sixty-three at the end of 1943, cover 9,510 children, or 41.5 per cent. of the total school population; but although that number of children could have been supplied with meals, owing either to apathy or to lack of appreciation on the part of the parents of the benefits to be derived from the consumption of a well-balanced mid-day meal, only 5,077 of the children took advantage of it. A survey in 1943 of the physical condition of the children in two neighbouring rural schools, one with a Canteen and one without, revealed that, during the twelve months following the institution of the Canteen there was a greater increase in both the height and weight of the children making use of the Canteen than amongst the children attending the other school which had not this facility. By reason of the smallness of the numbers in attendance at these two schools, too much significance ought not to be attached to the results of this survey; but greater increases in height and weight did nevertheless occur amongst the children attending the school where a regular mid-day meal was available.

With regard to the cleanliness of the children in attendance at elementary schools, the percentage found verminous, namely, 8.4, was the lowest since the beginning of the war. There was also a further marked decrease in the number of cases of Scabies amongst school children; and the measures taken to cleanse and treat not only those of school age, but also their brothers, sisters, and, where necessary, their parents, was no doubt an important contributory factor in securing this very desirable result.

The endeavour to protect the children in the County against Diphtheria was intensified in 1943, although this of necessity reduced to some extent the time which the Medical Officers could devote to other work; but in view of the importance of the Diphtheria Immunisation Scheme, it was considered justifiable to give it a measure of priority. Information obtained from the Head Teachers of the various schools in the County in the late Autumn of 1943 indicated that,

on the opening of the schools after the summer holidays, 90 per cent. of the elementary school children and 86 per cent. of the secondary school children had at some time or other received protective injections against Diphtheria. These figures are most encouraging, and it is hoped to maintain, and even to increase, this high level of immunity amongst the school children in this County.

The School Dental Officers, in spite of the reduction in their number from four to three, and the consequently larger areas and numbers of children whom they individually had to cover, were able to carry out inspection and treatment at the whole of the schools during the year.

Of the children referred for dental treatment, the percentage of "consents" given by the parents continued to be far lower than can be considered satisfactory. It is, however, of interest to note that, amongst the lower age groups, the figures indicating the percentage of children free from caries and the average number of decayed teeth per child, showed a considerable improvement on those for 1939. This is most clearly brought out in the age-five group; but in the older groups there is no evidence of improvement in this respect.

My thanks are due to Dr. William Stewart, late Deputy School Medical Officer, to whom I am largely indebted for the preparation of this Report.

I am, Sir, Ladies and Gentlemen,

Your obedient Servant,

WILLIAM TAYLOR,

School Medical Officer.

COUNTY HEALTH OFFICES,

COLLEGE HILL,

SHREWSBURY,

March, 1945.

Annual Report for the Year 1943.

GENERAL.

During 1943, notwithstanding the reduction in the medical and dental staffs the work was well maintained. This was made possible, to some extent, by the fact that many of the children who had come into the County under the Government Evacuation Scheme returned to their home towns, and also by the reduction in the attendance of Medical Officers at the weekly Welfare Centres to once a fortnight.

The suggestion of the Ministry to cut down the ordinary medical inspections, and to arrange instead frequent surveys of the school population, has not so far been followed in this County, and during 1943 the ordinary routine examinations of elementary school children, namely, the entrants, the 8-year-olds, and the 12-year-olds, continued to be carried out; while in the secondary schools the inspection of the pupils also took place in the ordinary way. This has naturally caused something of a time lag in that the schools are not visited so frequently, but it does ensure that the interval between the examinations of individual children is not unduly long, and permits of more thorough and effective following up of cases requiring observation or treatment.

STAFF CHANGES.

One of the Temporary Assistant Medical Officers, Dr. McKendrick, resigned in January, 1943, and Dr. Yuill, who commenced duties in February, 1943, was directed into private practice in June, 1943, thus, there were for the greater part of the year only four Assistant Medical Officers and three Dental Officers; and several changes likewise took place among the Whole-time Health Visitors, part of whose duties includes school nursing. It should be noted, of course, that the four Assistant Medical Officers were not engaged whole-time on School Medical Work, but had a range of other duties to cover, including those connected with the Maternity and Child Welfare Scheme.

MEDICAL INSPECTION AND TREATMENT.

Evacuation.—Some 12,000 children were sent to this County in 1939 under the Government Evacuation Scheme for unaccompanied school children, and although many of them returned home within the following few months, a second evacuation to this County took place in the summer of 1940. No mass return immediately followed, but considerable numbers have gradually departed, and at the end of 1943 only 1,712 remained in Shropshire.

Troubles and difficulties were inevitable with such a complete change of circumstances and environment for so many of the children, but these were in large measure overcome, and it is but just and fair to pay tribute to the patience, tolerance, and kindness of the foster-parents in bringing about this desirable result. Though some of the local authorities had to establish hostels in several of the larger houses in the County for the more difficult amongst the children, the need for this type of billet also gradually became less until only three hostels remained open at the end of the year.

Much has been said about certain undesirable features of the Evacuation Scheme, but in all probability it has had certain beneficial effects, not only from the point of view of the increased health and greater knowledge which these town children derived from their sojourn in country areas, but also from the stirring of the social conscience of a considerable proportion of the population which resulted from a better knowledge of the conditions under which too many persons live, both in urban and rural areas.

Nutrition.—This must always remain an important criterion of health, and for the purpose of the school medical service, efforts have been made for many years to find a suitable standard of assessment. The Ministry of Education recommend the division of the children into four groups, depending on whether their nutrition is considered to be "excellent," "normal," "slightly subnormal," or "bad," and although the personal opinions of the Medical Officers as to what is understood by these designations must of necessity vary, it is justifiable to assume that their findings are governed by a common denominator. It is interesting, therefore, to note the variations in the four nutritional groups during the six years from 1938 to 1943; and it will be seen from the figures given below that, although the percentages of those considered "excellent" have decreased somewhat during the War, so also have those in the "slightly subnormal" group; and that the percentage of children in the combined group of "excellent" and "normal" reached a higher level than ever before, thus tending to give the impression that in spite of war-time conditions the general health of the children has on the whole been well maintained. One Medical Officer, however, who has been in the same area of the County for many years, considered that there has been some falling off in nutrition in one or two of her districts, and that many children were paler and thinner, and had softer tissues than in pre-war days. She, and also some of the other Medical Officers found that more children appeared to lack vitality, and were apathetic and became sleepy, and more difficult to teach towards the end of the day: but causes other than nutrition might account for that.

Grades of Nutrition.	1938	1939	1940	1941	1942	1943
Excellent	12.06	9.26	8.93	6.66	5.22	8.36
Normal	75.16	75.91	79.85	83.10	84.65	81.56
Slightly Subnormal	12.61	14.62	11.14	10.17	9.96	9.95
Bad	.17	.22	.09	.07	.17	.13

Cleanliness.—The Health Visitors and School Nurses continued to carry out the ordinary verminous inspections of the children, following up closely those found to harbour lice or nits. In 1943 when a total of 91,502 examinations were made, these resulted in the finding of 2,338 verminous children, a number which in view of war conditions compares quite favourably with the 2,078 found in 1938, when 89,710 examinations were made. The percentage found verminous during 1943, that is, with either lice, or nits, namely, 8.4, is the lowest since the beginning of the war.

Scabies.—It was mentioned in the 1941 report that the incidence of this disease had increased very markedly in the County during that year, and that as a result sick bays had to be established in several of the Public Assistance Institutions, to which were sent the children who could not be expected to be properly cleansed by their foster-parents. These sick bays admitted children who were suffering from Scabies, Scabies with Impetigo, and even Impetigo alone if the infection was a severe one, and they were of considerable assistance in reducing the spread of these diseases.

The sick bays, with a total bed accommodation of approximately 100, were, throughout the winter of 1941 to 1942, practically full, chiefly with cases of scabies and its complications, but by their use and the energetic work of the nurses in the Clinics the problem of dealing with this disease was, by the end of 1943, largely overcome.

Diphtheria Immunisation.—Early in 1942 the County Council, as the Child Welfare Authority for the County area outside the Borough of Shrewsbury, undertook responsibility for the immunisation of children under 5 years of age and also of school entrants; and arrangements were made for the Assistant Medical Officers to give the necessary injections at the Clinics and Welfare Centres and, with the willing assistance of the Head Teachers also, at the various schools in the County. Although success attended this Scheme from its commencement, owing to the difficulty met with in dealing only with those members of families of not more than five years of age, it was thought advisable by the County Council to undertake responsibility for the immunisation of all school children, and towards the end of 1942 this was agreed to by the District Councils. Up to 31st December, 1943, the Assistant Medical Officers had given the necessary injections to some 10,526 children, including 4,415 of school age. This work was carried out by the Medical Officers at the Welfare Centres when possible, and, where there were no Welfare Centres, at regular intervals in the village schools.

Milk in Schools.—In 1934, the Ministry of Education agreed to the provision of milk in schools for the school population, this milk to be either sold at a ½d. per third of a pint, or to be given free in necessitous cases. Difficulties however, have been met with in obtaining a supply for every school in the County, due either to the inability to find a retailer desirous of supplying milk in small bottles in limited amounts, or to the fact that Tuberculin Tested, Pasteurised, or Accredited milk (the only approved grades) were not available. These difficulties have increased since the beginning of the War, and it has been found necessary, in spite of the extra burden on the Teachers resulting from this method, to allow the milk to be supplied in pint bottles or in bulk, and also to agree to the issue of dried milk in certain cases; but even so it has not always been found possible to arrange for a milk supply to all schools. Out of 22,367 children present in the elementary schools on 23rd February, 1944, only 16,404 or 73.3 per cent. of the children were taking milk at school, a percentage which, good though it may be in relation to previous years, is still far from being as high as was expected in view of the emphasis laid on the importance of this food.

Meals in Schools.—It has always been one of the more unfortunate sides of rural school life that the distances some children have to travel for educational purposes preclude the possibility of many of them obtaining an adequate meal in the middle of the day, thus entailing a period of many hours between an early breakfast and a late tea during which bread and margarine too often constitutes the usual means of sustenance.

Although there have been for several years canteens at one or two of the larger Schools in the County, the facilities available through them only touched the fringe of the problem, and it is extremely gratifying to find that arrangements are being made for canteens even in small rural schools where their presence is required as much as elsewhere. It cannot be doubted that the provision of a well balanced mid-day meal for all school children will be an important factor in maintaining amongst them a high standard of health.

At the end of 1938 some 300 children were having meals in schools from 5 canteens; early in 1944 the number of canteens had risen to 63, and the number of children on the registers of the 67 schools served was 9,510, or 41.5 per cent. of the total school population.

STATISTICAL TABLES.

No distinction is made between children ordinarily attending schools in the area and children who have transferred to the area as a result of evacuation.

SECTION I.—ELEMENTARY SCHOOLS.

TABLE I .- A-ROUTINE MEDICAL INSPECTIONS.

Number	of Inspections	s in th	e presc	ribed	groups :—	
					1943	1942
	Entrants Intermediate Leavers	s			2,523 2,390 2,171	3,240 2,986 2,226
			Total		7,084	8,452
Number	of other Rout	ine Ins	spection	s	-	_
TABLE 1.—B—OTHE	R INSPECTION	S.				
					1943	1942
	Number of S Number of R			5,039 5,218	5,581 11,190	
			Tot	al	10,257	16,771

TABLE II.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Age Groups.	Number of Children	A. (Excellent).		B. (Normal).		C. (Slightly Subnormal).		D. (Bad.)	
	Inspected.	No.	%	No.	%	No.	%	No.	%
Entrants	. 2523	239	9.47	2009	79.63	272	10.78	3	.12
Second Age-group	. 2390	163	6.82	1954	81.76	272	11.38	1	.04
Third Age-group	. 2171	190	8.75	1815	83.60	161	7.42	5	. 23
Other Routine Inspections .									
Total for 1943	0450	592 441	8.36 5.22	5778 7155	81.56 84.65	705 842	9.95 9.96	9 14	.13

TABLE III.

GROUP I.—TREATMENT OF MINOR AILMENTS.

Total Number of Defects Treated or under Treatment during the Year under the Authority's Scheme :—

<u>1943</u> <u>1942</u> <u>5509</u>

GROUP II .- TREATMENT OF DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects included in Group I.)

	No. of Defects	No. of children for whom spectacles were			
Defect or Disease. (1)	dealt with under the Authority's Scheme.	Prescribed under the Authority's Scheme. (3)	Obtained under the Authority's Scheme. (4)		
Errors of Refraction (including squint) Other Defect or Disease of the Eye	958 7				
Total	965	787	755		

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

Number of Defects—										
Received Operative Treatment under the Authority's Scheme in Clinic or Hospital. (1)	Received other forms of Treatment. (2)	Total number treated. (3)								
245	4	249								

TABLE IV.—DENTAL INSPECTION AND TREATMENT.

	ROUTINE AGE GROUPS INSPECTED.												
Age	 Under 5	5	6	7	8	9	10	11	12	13	14	15	Total.
Totals	 375	2128	2719	2955	2978	2889	2874	2454	2246	2122	300	12	24463‡

[‡] Includes 411 evacuees of unspecified ages.

	Specials 158 Number found to require treats Number actually treated Attendances made by children			OTAL (F	Coutine	and S	pecials)		24,621 13,295 9,147* 9,778
	Half-days devoted to :—	Inspection Treatment			237 964	}	То	tal	1,201
	Fillings :—	Permanent Temporary		::	4,407 386	}	То	tal	4,793
	Extractions :—	Permanent Temporary			1,303 10,430	}	То	tal	11,733
	Administrations of general anac	esthetics for ex	tractions			,			none
	Other operations :— {	Permanent Temporary		:: 1	1,167 509	}	То	tal	1,676
	* Inclu	des 845 childre	en referre	d for to	reatmen	t in 1	942.		
TA	BLE V.—UNCLEANLINESS AN	D VERMINO	JS COND	ITION	S.				
(1)	Average number of visits per sch authorised persons				he Scho	ol Nu	rses or o	ther	7.94
(2)	Total number of examinations of	f children in t	he schools	by th	e Schoo	l Nur	ses		91,502
(3)	Number of individual children f	ound unclean	٠.						2,338
(4)	Number of children cleansed un Authority		ents made	e by the	he Loca	ıl Edu	cation		none
(5)	Number of cases in which legal		ere taken						110110
(0)	(a) Under the Education								none
	(b) Under School Attend								14

TABLE VI.-BLIND AND DEAF CHILDREN.

			At a Public Elementary School.	At an Institution other than a Special School.	At no School or Institution.
Blind Children Deaf Children	 	 	0 0	0	0 0

SECTION 2.—SECONDARY SCHOOLS.

CLASSIFICATION OF THE NUTRITION OF SECONDARY SCHOOL CHILDREN.

ROUTINE INSPECTIONS.

Number of Children.	Excellent.	Normal.	Slightly Sub-normal.	Bad.
2,460	318 12.04%	2,212 83.79%	109 4.13%	1.04%

DENTAL INSPECTION AND TREATMENT.

Routine Age Groups Inspected.

Age	Under 7	8	9	10	11	12	13	14	15	16	17	18 & Over	Total.
Totals	72	45	89	217	495	707	795	827	558	283	114	23	4225

	Total Ro	itine and	Specia	ls		 4,229
Number found to require treats Number actually treated						 1,997*
Attendances made by children		- ::				 427‡ 599
Half-days devoted to :—	Inspection Treatment	38 77	}		Total	115
Fillings :—	Permanent teeth Temporary teeth	509 0	}		Total	509
Extractions :	Permanent teeth Temporary teeth	134 56	}		Total	190
Administration of general anaes	sthetics for extraction	s				 none
Other operations :—	Permanent teeth Temporary teeth	114 0	}		Total	114

^{* 657} free place holders, 1,340 fee payers.

^{*} This figure includes 35 children referred for treatment in 1942.

