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COUNTY BOROUGH OF WARRINGTON



# ANNUAL REPORT

*to the*

EDUCATION COMMITTEE

*on the work of the*

SCHOOL HEALTH SERVICE

*for the year*

**1957**

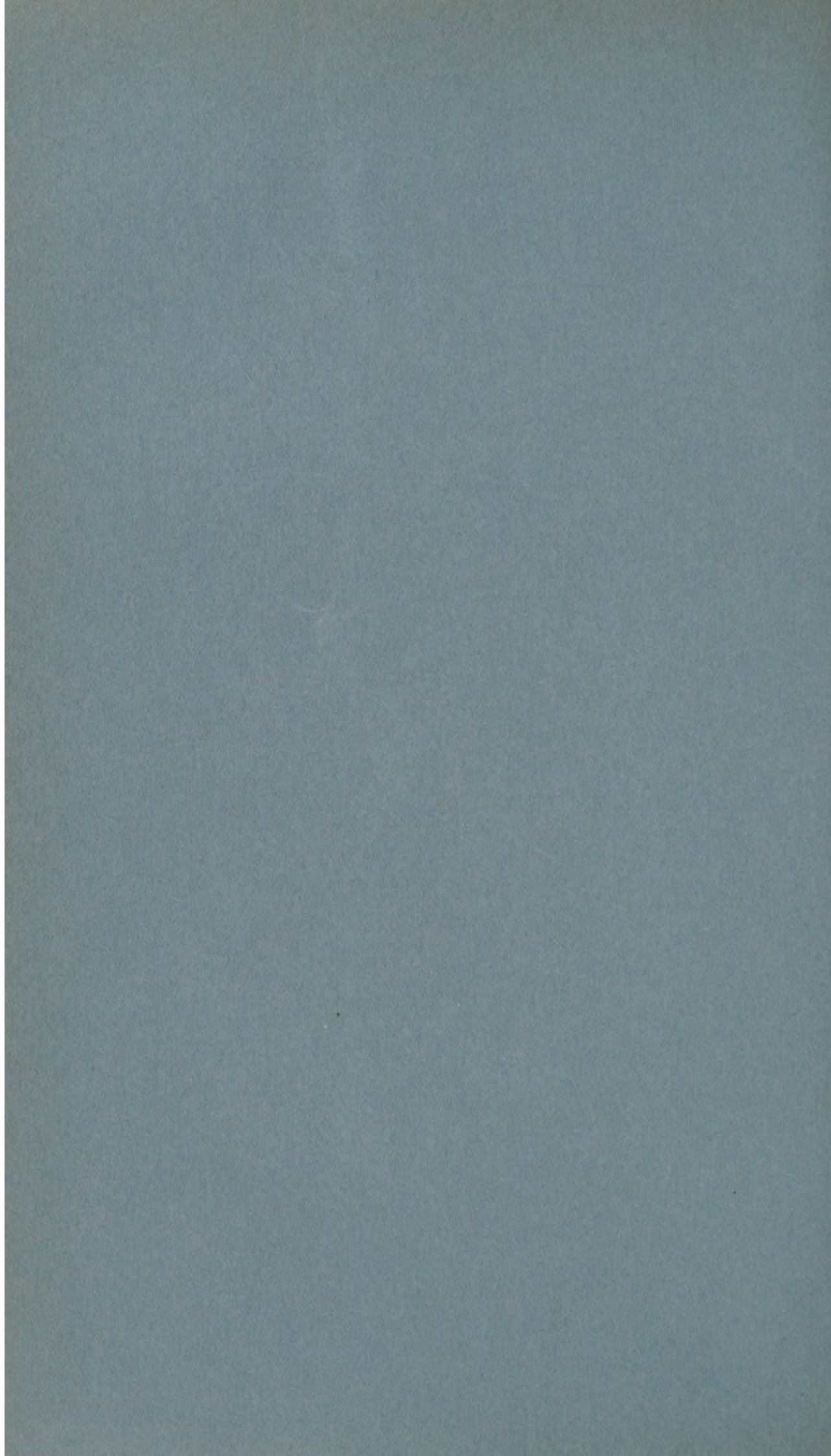
ERIC H. MOORE

B.Sc., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

*Medical Officer of Health and  
Principal School Medical Officer*

HEALTH DEPARTMENT, SANKEY STREET, WARRINGTON





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# SCHOOL MEDICAL SERVICE SUB-COMMITTEE

(As at 31st December, 1957)

## *Chairman:*

Alderman E. MARSHALL, M.B.E., J.P.

Alderman J. CANON BARDSLEY, M.A., J.P.

Alderman H. HARDING

Alderman H. MASSEY

Councillor W. H. CARTWRIGHT

Councillor H. GRAY, J.P.

Councillor Mrs. M. HARDMAN

Councillor Mrs. A. L. HINDLE

Councillor P. MARTIN, J.P.

Mr. W. E. JOLLEY

Rev. J. A. CUNNINGHAM, O.S.B.

Rev. J. RUSSELL

## *Ex-Officio:*

Councillor H. G. BRANDWOOD, J.P. (Mayor)

Alderman D. PLINSTON, J.P. (Chairman of the Education Committee)

Rev. E. DOWNHAM, B.A. (Deputy-Chairman of the Education Committee)

*Chief Education Officer:* H. M. PHILLIPSON, M.A.



## STAFF

(As at 31st December, 1957)

*Principal School Medical Officer:*

ERIC H. MOORE, B.Sc., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

*Deputy Principal School Medical Officer:*

ALEXANDER GATHERER, M.B., Ch.B.

*School Medical Officers:*

ANGELA MANNING, M.R.C.S.(Eng.), L.R.C.P.(Lond.)

MARY GRAHAM, M.B., Ch.B.

OLGA MILLINGTON, M.B., Ch.B. (Part-time).

*Principal School Dental Officer:*

A. P. FINLAY, L.D.S., R.F.P.S.

*School Dental Officer:*

Mrs. PHYLLIS E. LAWTON, L.D.S. (Manchester)

*Educational Psychologist:*

Mrs. C. M. RIVETT, B.A.(Lond.), M.A.(Manc.), Post-graduate Certificate  
in Education (Lond.).

*Superintendent of Health Visitors and School Nurses:*

Miss A. N. AGAR, S.R.N., S.C.M., H.V.(Cert).

*Speech Therapist:*

Post vacant.

*Visiting Consultants:*

*Ophthalmic:* SYDNEY B. SMITH, M.R.C.S., L.R.C.P., D.O.M.S. (R.C.P. & S.).

*Ear, Nose and Throat:* Mr. WALTER E. HUNTER, M.A., M.R.C.S., L.R.C.P.



## SCHOOL CLINICS

### A. PROVIDED BY LOCAL EDUCATION AUTHORITY

#### INSPECTION CLINIC (Cairo Street)

Monday to Saturday 9-0 a.m. to 9-45 a.m.	Examination of cases referred by Teachers, Education Welfare Officers, School Nurses, etc.
---	--

#### MINOR AILMENTS CLINIC (Cairo Street)

Monday to Saturday 9-0 a.m. to 9-45 a.m.	Treatment of contagious diseases of the skin, eyes, etc.
Saturday 10-0 a.m. to 12 noon	Vaccination and immunisation.

#### DENTAL CLINIC (Health Department, Sankey Street)

Monday to Saturday (by appointment)	Dental treatment (including orthodontic treatment)
Daily 9-20 a.m. to 10 a.m.	Emergency treatment.

#### EAR, NOSE AND THROAT CLINIC (Cairo Street)

Examinations:  
Wednesday, 4 p.m.

Out-Patient treatment:  
Daily (by appointment)

Operations are performed at the Warrington General Hospital on  
Thursday mornings.

#### EDUCATIONAL PSYCHOLOGIST (Arpley Street)

Daily (by appointment)

#### CHIROPODY SERVICE

Cases seen by appointment.

### B. PROVIDED BY REGIONAL HOSPITAL BOARD

#### PAEDIATRIC CLINIC (Warrington General Hospital)

Wednesday Afternoons  
(by appointment)

#### ORTHOPAEDIC CLINIC (Warrington General Hospital)

Examinations—Every fourth Tuesday, 10-0 a.m.

Treatment:

Friday 9-30 a.m. to 11 a.m.	Treatment of postural and crippling defects, etc.
--------------------------------	--

#### OPHTHALMIC CLINIC (Warrington General Hospital)

Monday, 2-0 p.m.	Examination and treatment of errors o refraction and squint.
Friday, 9-0 a.m. (by appointment)	

#### ORTHOPTIC CLINIC (Warrington General Hospital)

Monday, 9-30 a.m. to 4-30 p.m.	Treatment of cases of squint.
Tuesday, 9-30 a.m. to 12 noon	
Wednesday, 9-30 a.m. to 12 noon	
Friday, 9-30 a.m. to 4-30 p.m.	

*To the Chairman and Members of the Education Committee*

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report on the health of the schoolchildren of Warrington for the year 1957.

The state of health during the year was good and there were no exceptional outbreaks of the normal infectious diseases, but in the last quarter of the year there was a considerable incidence of Virus 'A' Influenza which caused unusual absence from school. The disease was of a mild character.

The clinical services continued to operate on the same lines as in previous years. It was encouraging to learn that the Ministry of Health were willing to consider approval to the project of building a new clinic, and, at the time of writing this report, the plans are at an advanced stage and tenders have been accepted.

Liaison with hospitals and general practitioners remained excellent, and I am greatly indebted to the medical staff of the hospitals and to the general practitioners for their co-operation and assistance.

The Dental Service worked smoothly and efficiently, and to the maximum capacity of the staff and accommodation.

The greatest need of the service at the moment is to fill the vacancy for a Speech Therapist. This was not possible during the last year, and further efforts will be made in the coming year. This form of treatment is greatly needed by many children, and there is more than enough work to keep a whole-time Speech Therapist occupied.

I would like to thank the Chairman and members of the School Medical Service Sub-Committee for their support and interest, and the Chief Education Officer and his staff for their unfailing co-operation at all times.

I have the honour to be,

Your obedient Servant,

ERIC H. MOORE,

Principal School Medical Officer.



## THE SERVICE

The School Health Service is operated by the staff of School Medical Officers and School Nurses with clerical assistance. The Service is built around the routine medical and nursing inspections, amplified by facilities for easy reference of all problems by teachers at other times. Greater emphasis has been laid on prevention of illness and the ascertainment of handicaps in recent years since the treatment work is carried out almost entirely by the family doctor and the hospital service. The co-operation between all three branches of the National Health Service has been excellent, and general practitioners and hospital staff have at all times been most helpful.



## MEDICAL INSPECTION

Routine medical examinations were carried out under the system introduced last year whereby a child is seen in the first year of entry into each of the school departments, and finally as a leaver—4 routine inspections during school life. This system has been found of great advantage as it presents an opportunity for discussing a child and his medical problems when he enters the care of each new head teacher. This system at present appears to me to be preferable to the system of reduced inspections supported by more frequent visits of the medical officer to schools to see problems presented by the head teacher, since frequent inspection allows of both medical and teacher review. The statistics are contained in Tables I and III of the Appendix.

Special medical examinations are carried out at the request of teachers, school nurses, parents or other bodies when children are suspected of needing treatment—medical or educational. Special examinations were also carried out on 218 children to determine their fitness for employment. Only 1 was found to be unfit.

Routine audiometric examinations are carried out on all school entrants and on any other children suspected of defective hearing. The primary testing is carried out in school, but failures are retested at the clinic. Double failures are referred to the E.N.T. Consultant at his special school clinic, and in certain special cases to the Department for the Deaf, University of Manchester.

A nurse is employed part-time on this work. The table below gives details of tests carried out, and the disposal of the cases where a double failure was recorded.

*Audiometric Tests*

						"Pure-Tone" Audiometer
Primary Tests						
Number of schools visited	...	...	...	...	...	47
Number of group tests	...	...	...	...	...	94
Number of children tested	...	...	...	...	...	2469
Number of primary failures	...	...	...	...	...	498
Secondary Tests						
Number of group tests	...	...	...	...	...	68
Number of children tested	...	...	...	...	...	605
Number of double failures	...	...	...	...	...	127
Disposal of Cases						
Nothing abnormal found after treatment	...	...	...	...	...	21
Receiving treatment	...	...	...	...	...	16
Referred for tonsils and adenoids operation	...	...	...	...	...	66
Treatment not beneficial	...	...	...	...	...	6
Still receiving treatment (from previous years) or investigation...	...	...	...	...	...	5



## THE WORK OF THE EDUCATIONAL PSYCHOLOGIST

A summary of the work undertaken during 1957 is set out below:—

New cases undertaken	...	...	...	106
Referred by School Medical Officers	...	...	...	17
Referred by Head Teachers	...	...	...	74
Referred from other sources	...	...	...	15
Additional tests	...	...	...	33
Retests	...	...	...	21
Total number of tests administered	...	...	...	160
Return visits of old cases	...	...	...	84
No. of visits paid to schools...	...	...	...	216
No. of cases discussed with Head Teachers	...	...	...	491

There has been an increase in the number of return visits, retests, contacts with schools and of cases discussed, but a decrease in the number of new cases seen, partly due to the fact that some cases have been time consuming, and partly because some parents failed to attend at the first invitation.

### *Age range of children interviewed (Total 127)*

Ages	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12	12-13	13-14
Year of birth	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943
Numbers seen	9	17	13	33	19	10	8	9	6	3

The peak of intake is now centred around children aged seven to eight, and as usual, more boys than girls have been referred.

Children are assessed on different tests, but the Terman-Merrill Scale is routinely administered and the figures below relate to that.

### *I.Q. range of children tested on Terman-Merrill Scale—(Total 113)*

I.Q. Range	Below 55	56-70	71-85	86-95	96-105	106-115	116-125	135	Total
Boys	4	15	33	19	8	2	1	1	83
Girls	2	2	19	4	2	1	0	0	30



The Educational Psychologist reports that every case referred to her has been examined, if only to gauge the situation and to give the parents some insight into the condition of the child. In the absence of a speech therapist Head Teachers have sought help for several children with delayed or hesitant speech. Some have suffered arrested development because of health or emotional setbacks around the date of onset of vocalisation or of speech. Spontaneous correction seldom occurs after age 4, especially when similar disorders are reported in other members of the same family. To enter a nursery class may help an unstimulated child but may increase the difficulties of a psychologically disturbed one. Since such children find themselves at a disadvantage on entering the Infants department, early referral is the best counter measure against later personality-effects and probable slowness in learning to read. Delayed neurological development is often a possibility but we can advise parents who are worrying the child into a greater degree of insecurity, or who are wholly attributing his failure to teasing companions or to lack of sympathy on the part of a teacher. Disappointed parents, excessive restraint, and perfectionist standards create tensions within the home inimical to the child's self-expression.

## TREATMENT

A minor ailments clinic is held each morning to which teachers may refer children. Cases may also be sent by parents and general practitioners. The work of this clinic has fallen markedly in recent years and now there is no justification for the attendance of a medical officer every morning, the type of defect referred being usually in need of nursing attention. 317 children attended the clinic in 1957.

The arrangements for the treatment of visual defects continued through the hospital service as in previous years, but it may be desirable in the future to refer suspected errors of refraction to the supplementary ophthalmic services when parents so wish. The statistics will be found in Table IV—Group I. 1994 schoolchildren and 398 pre-schoolchildren were the recorded attendances at the Orthoptic Clinic at Warrington General Hospital in respect of Borough children.

A special weekly clinic is held to which Ear, Nose and Throat cases are referred for Consultant advice. During the year 223 children made 492 attendances at this special clinic. Many children are also referred by general practitioners to the hospital service for E.N.T. treatment.

Orthopaedic problems are referred to the hospital service, but these are now considerably reduced and consist mainly of foot abnormalities and muscular paralyses.

General medical problems are referred to the Paediatric Out-Patient Clinic, and considerable assistance is received in the reports of the Consultant Paediatrician.

It has not been possible to carry out any speech therapy during the year as it was impossible to appoint a therapist. It is hoped that it may be possible to fill the vacant post in the coming year since there is a considerable need for this treatment.

It has again been impossible to provide a child guidance service due to lack of a psychiatrist. The new clinic premises provide accommodation for a child guidance clinic and it is hoped that the Regional Hospital Board may be able to make available for a few sessions per week, the services of a Consultant.



## THE WORK OF THE SCHOOL NURSES

A cleanliness inspection of all children is carried out in every school each term. The school nurse endeavours to complete this inspection as early in the term as possible. Each child is examined for pediculosis, cleanliness of body and clothing, and condition of footwear. Any unsatisfactory condition is dealt with and followed up on subsequent visits to the school. Where necessary, domiciliary visits are made to effect a remedy.

A nurse accompanies the medical officer on all routine medical inspections. Her duties include the weighing and measuring of children, vision testing, and the preparation of the children for examination. In addition, she prepares the children for immunisation where necessary, and obtains any information required from the teachers regarding the health of the children to be examined and of any other children whom the teacher may wish to bring to the notice of the medical officer.

At the clinic, the nurse is engaged in the treatment of the children for minor ailments and disinfestation.

In the cases of uncleanness the course of action laid down in Section 54 of the Education Act is followed. Cleansing Notices were issued in 18 cases. In no case was it necessary to issue a Cleansing Order for the compulsory cleansing of children at the cleansing station. No prosecutions were ordered in the year under review.

Some brief details of the work carried out by the school nurses are given below:

	1957	1956
Visits to Homes of children (in many cases assisting with treatment) ... ..	214	286
Attendance at medical inspections in schools ...	209	287
Visits to schools for cleanliness inspections and re-inspections ... ..	708	832
Number of cases of uncleanness treated at the school clinic ... ..	55	49
Number of attendances of uncleanness cases at the school clinic ... ..	228	156



## HANDICAPPED PUPILS

### NUMBERS OF HANDICAPPED PUPILS

The following table gives the numbers of pupils on the Handicapped Pupils' Register on the 31st December, 1957, together with the numbers ascertained during the year.

Classification	No. ascertained during year	Total ascertained at 31.12.57
Partially-sighted ... ..	1	6
Deaf ... ..	1	2
Partially-deaf ... ..	1	7
Delicate ... ..	1	4
Physically-handicapped ...	—	6
Educationally sub-normal...	28	150
Totals ... ..	32	175

### PROVISION OF SPECIAL EDUCATION

The table below gives details of the numbers of pupils for whom special educational facilities have been provided.

Classification	Attending special school as		Receiving education under arrangements made under Section 56 of Education Act, 1944		Total
	Day Pupils	Boarders	In Hospital	At Home	
Partially-sighted...	—	1	—	—	1
Deaf ... ..	—	2	—	—	2
Partially-deaf ... ..	—	6	—	—	6
Delicate ... ..	—	—	—	3	3
Physically- handicapped ... ..	—	—	—	4	4
Educationally sub-normal ... ..	112	10	—	2	124
Totals ... ..	112	19	—	9	140

The following handicapped pupils requiring special educational provision are still unplaced:

Partially-deaf	...	...	...	...	...	1
Delicate	...	...	...	...	...	1
Physically-handicapped	...	...	...	...	...	2
Educationally sub-normal	...	...	...	...	...	26

The Special Day School for Educationally Subnormal children has made good progress during the year with considerable benefit to the pupils attending due to the interest and personal qualities of the Headmistress and her staff who are already building up tradition, so important in a school.

### *EDUCATIONALLY SUB-NORMAL PUPILS*

There are 150 pupils ascertained as educationally sub-normal of whom 10 are in special residential schools. The needs of the majority of the others are met in the day special school.

In addition a number of children have been ascertained in this category who, although not requiring accommodation in special schools, do require special treatment in the ordinary schools. These, of course, are in the higher grades of sub-normality.

During the year 52 children were tested, with the following results:

Suitable for special (day) schools	...	...	...	26
Suitable for special (residential) schools	...	...	...	2
Suitable for education within ordinary school system with modified treatment	...	...	...	5
Reported to the Local Health Authority:—				
Under Section 57(3) Education Act, 1944	...	...	...	7
Under Section 57(5) Education Act, 1944	...	...	...	7
No action taken—to be retested later	...	...	...	5
Total	...	...	...	52

There are at present 150 children in this category, 26 of whom are awaiting special educational treatment, and this number will grow still further.

### *CHILDREN RECEIVING HOME TUITION*

On the 31st December, 1957, there were 9 handicapped pupils on the home teacher's register. Of these 4 were physically handicapped, 3 were delicate and 2 educationally sub-normal.



# INFECTIOUS DISEASES AND IMMUNISATION

## INFECTIOUS DISEASES

The notifiable diseases occurring among schoolchildren and notified to the Medical Officer of Health were as follows:—

	1957	1956
Tuberculosis (respiratory) ... ..	2	7
Tuberculosis (non-respiratory) ... ..	3	1
Scarlet Fever ... ..	30	94
Whooping Cough ... ..	15	50
Measles ... ..	530	24
Pneumonia ... ..	11	4
Poliomyelitis ... ..	—	4
Meningococcal infection ... ..	3	1
Dysentery ... ..	5	2
Food-Poisoning ... ..	1	—
Totals ... ..	<u>600</u>	<u>187</u>

In the month of October there was considerable absence from the school due to Virus "A" Influenza (Asian). The outbreak was sudden, but of relatively short duration, and the period of absence was rarely longer than one week.

## IMMUNISATION

*Diphtheria.* The number of children immunised during the year at school and at the clinic was as follows:

Primary Courses ... ..	245
Secondary (Reinforcement) ... ..	882
Total ... ..	<u>1127</u>

*Poliomyelitis.* A limited amount of British vaccine was used to protect some schoolchildren and at the close of the year arrangements were in hand for mass protection using Salk vaccine of Canadian and American origin.

*B.C.G.* Vaccination of "school-leavers" was commenced in December. B.C.G. Vaccination was offered to the 13 year old group, and it is intended to make it available to all children in this group.

No. of Mantoux Tests performed ...	55
No. of Mantoux Tests negative ...	50
No. of B.C.G. vaccinations performed in school ... ..	46



## SPECIAL INVESTIGATION

Due to the discovery of an open case of pulmonary tuberculosis in the teaching staff, a class of an infants school was mantoux tested and the mantoux positive children were further investigated through their family doctors. The importance of members of the teaching staff availing themselves of the services of Mass Miniature Radiography for annual chest X-ray cannot be over emphasised, both in their own interests and those of the children in their care. Their annual X-ray is even more important than in the case of Health and Children's Departments staffs, for whom it is compulsory.

## ANCILLARY SERVICES

### NURSERY CLASSES

Children attending the nursery classes attached to the infants' schools are examined every year. Details of the examinations will be found under the heading "other periodic inspections" in Table IA in the Appendix from which it will be seen that 263 children were examined during the year.

These children are also examined by the dental officers as part of the routine dental inspections of the infants' schools.

All the facilities of the school health service are available to nursery children. Particulars of treatment are included in the various treatment tables in this report.

The school nurses also visit the nursery classes when carrying out their cleanliness inspections. Statistics are included in the appropriate tables.

The usual facilities for immunisation are available, and the nursery class is useful in enabling the medical officers to immunise those children who for one reason or another were not immunised in infancy. The response is very satisfactory and for this purpose the class is a valuable adjunct in the general campaign for immunisation.

### PROVISION OF MILK AND MEALS

#### MILK

Administrative arrangements continue on the same lines as before.

#### MEALS

At the commencement of the year, the Education Committee had nine school kitchens supplying meals to schools and another kitchen was opened in the middle of June. Midday meals are served in all the schools. The charge continued at the rate of 6d. per day for children attending Special Schools but, in accordance with instructions issued by the Ministry of Education, was increased from 10d. to 1/- per day for other children, from 1st April, 1957. Free meals, and meals for less than the full charge, are supplied to children of parents whose income is within the Committee's scale.

The following table shows the average number of meals supplied per day during the year 1957.

Average No. of Pupils on Roll	Received free meals	Received meals for payment	Total	Percentage of pupils receiving meals
13,804	507	4,258	4,765	34.53



## PHYSICAL EDUCATION

The interest in Physical Education has been well maintained throughout the year. All schools have sound programmes of work and pupils enjoy the use of apparatus of all kinds. A short course for teachers in Infants' and Nursery Schools on "Modern Development in Physical Education" was extremely well attended.

The Warrington Teachers' Sports Association again provided an extensive programme of inter-town and inter-school competitions in the major games and athletics. Particular difficulty was experienced by the Athletics Section owing to the closing of R.A.F. Padgate which had been the venue of the Athletics Festivals for some years. The proposal to lay an Athletics Track in Victoria Park was consequently welcomed both by this Section and schools in general, as with the dressing accommodation already provided, Athletics facilities in the town could be of the highest standard.

The Authority's Schools' Swimming Scheme was again both popular and successful and in addition to special awards by the Liverpool Shipwreck and Humane Society, Warrington Schools, by the excellence of examination results, were awarded the Primary and Secondary Modern Schools' National Shield by the Royal Life Saving Society.

Evening classes in physical activities of all kinds were well attended at the Borough Gymnasium and day time use of the premises by schools in the immediate vicinity has proved to be most popular. Local and national organisations have also used the premises for a wide variety of competitive activities.



# PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT

by A. P. FINLAY, L.D.S., R.F.P.S.

In my annual report for the year 1956, I commenced by saying that it was customary to report progress, or otherwise, by a comparison of figures with those of the previous year. The making of such a comparison this year shows a striking similarity to the previous year, there being only very slight upward or downward fluctuations in the overall picture of things. The greatest change is in the extraction rate, which shows a marked increase in the number of permanent teeth extracted, and an equally marked decrease in the number of temporary teeth extracted. A high number of permanent extractions is not of course normally something to be proud of, but the reason for this will be dealt with later.

The year 1957 was a very bad year for sickness, and I am afraid the dental staff got more than its fair share of it, the operating staff alone losing the services of one dental officer for almost three months on account of illness. This of course, seriously hindered the work of the department. On the credit side, however, during the latter part of the year, we were fortunate in obtaining the services of a part-time dental officer on a sessional basis, and this has helped greatly in making up some of the leeway.

The policy of concentrating on toothaches, or potential toothaches, which was started in 1956, was continued and completed during the year. The entire school population has therefore now had the opportunity of treatment. The great majority of pupils so inspected were seniors, this accounting for the relatively high permanent tooth extraction rate which I mentioned earlier. Had it not been for the poor acceptance rate from the majority of these senior schools, the number of permanent extractions would undoubtedly have been much higher. It is interesting to note here that the lowest acceptance rates from all schools in the County Borough were from our two Grammar Schools, the Girls High being 44% and Boteler Grammar 43%. There is, however, much more evidence of private treatment in these schools than in any other.

The average acceptance rate for all of the schools examined was slightly down on last year due, of course, to the poor response from senior schools. This year produced a percentage acceptance of 62, as against 64 in 1956. Again, as in 1956, Infant Departments were our best acceptors with 68%, followed not very far behind by the Juniors with 63%. Seniors were well behind with 55%. The highest acceptance from any school was the really splendid one of 90% from Sacred Heart R.C. Infants, and the lowest, 43% from Boteler Grammar School. With such a good response from infants and juniors, one can justifiably look forward to the future with some degree of optimism, more particularly since it is now almost certain that we shall have more and better surgery accommodation in new premises which should be completed some time in 1959.

A limited number of orthodontic cases has been dealt with throughout the year, and again most parents and patients have been most co-operative, and appreciative of the efforts made. It is hoped that we shall be able to extend this service very considerably when we get our new clinic.

My sincere thanks are again due to Mrs. Lawton and all other members of the dental staff for their efforts throughout the year. Sickness absences sometimes meant extra duties for the depleted staff, but these were always cheerfully and willingly undertaken. I am also greatly indebted both to Dr. Manning and Dr. Graham for their unfailing willingness to examine a patient or give an anaesthetic when necessary. To all of these I am indeed very grateful.



## DENTAL INSPECTION AND TREATMENT

### A. DENTAL INSPECTION

Number of pupils inspected by the Authority's Dental Officers:					
(a) Periodic Age Groups	...	...	...	...	6762
Total	...	...	...	...	6762
(b) Special Inspections	...	...	...	...	1344
Total (Periodic and Special)	...	...	...	...	8106

### B. DENTAL TREATMENT

Number found to require treatment	...	...	...	...	6147
Number offered treatment	...	...	...	...	4402
Number actually treated	...	...	...	...	3031
Attendances made by pupils for treatment	...	...	...	...	5039
Half-days devoted to (a) inspection	...	...	...	...	57
(b) treatment	...	...	...	...	722
Total (a) and (b)	...	...	...	...	779
Fillings—permanent teeth	...	...	...	...	1971
temporary teeth	...	...	...	...	6
Total	...	...	...	...	1977
Number of teeth filled—permanent teeth	...	...	...	...	1681
temporary teeth	...	...	...	...	6
Total	...	...	...	...	1687
Extractions—permanent teeth	...	...	...	...	1558
temporary teeth...	...	...	...	...	4139
Total	...	...	...	...	5697
Administration of general anaesthetics for extraction	...	...	...	...	2466
Other operations (a) permanent teeth	...	...	...	...	406
(b) temporary teeth	...	...	...	...	10
Total (a) and (b)	...	...	...	...	416

**APPENDIX**  
**MINISTRY OF EDUCATION**  
**Medical Inspection Returns**  
Year ended 31st December, 1957

Table I

Medical Inspection of Pupils Attending Maintained Primary  
and Secondary Schools (including Special Schools)

A. PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the Prescribed Groups										
Entrants	...	...	...	...	...	...	1027			
Second Age Group, Age 8	...	...	...	...	...	...	844			
Second Age Group, Age 11	...	...	...	...	...	...	1097			
Third Age Group, Age 15	...	...	...	...	...	...	847			
Total (Prescribed Groups)							3815			
Other Periodic Inspections:										
Nursery Classes	...	...	...	...	...	...	263			
Boteler Grammar School, Beamont and Oakwood Avenue Secondary Technical Schools	}					...	303			
Partially-sighted class						...	...	...	11	
Green Lane School						...	...	...	...	98
GRAND TOTAL						4490				

B. OTHER INSPECTIONS

Number of Special Inspections	...	...	...	591
Number of Re-Inspections	...	...	...	11
Total	...	...	...	602

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).

NOTES:

- (1) Pupils found at Periodic Medical Inspection to require treatment for a defect are not excluded from this return by reason of the fact that they are already under treatment for that defect.
- (2) No individual pupil is recorded more than once in any column of this Table and therefore the total in column (4) is not necessarily the same as the sum of columns (2) and (3).

Group (1)	For defective vision(excluding squint) (2)	For any of the other conditions recorded in Table III (3)	Total individual pupils (4)
Entrants	2	100	84
Second Age Group, Age 8	69	58	111
" " " Age 11	133	48	168
Third Age Group, Age 15	74	25	96
Total (Prescribed Groups)	278	231	459
Other Periodic Inspections	40	23	60
GRAND TOTALS	318	254	519



Table I (continued)

## D. CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THEIR AGE GROUPS

Age Groups (1)	No. of pupils in-spected (2)	Satisfactory		Unsatisfactory	
		No. (3)	Percent-age of Col. (2) (4)	No. (5)	Percent-age of Col. (2) (6)
Entrants ... ..	1027	1017	99·03	10	0·97
Second Age Group (age 8) ... ..	1941	1925	99·18	16	0·82
Third Age Group (School leavers) ... ..	847	838	98·94	9	1·06
Additional Periodic Inspections ... ..	675	669	99·12	6	0·88
Totals ... ..	4490	4449	99·09	41	0·91

Table II

## INFESTATION WITH VERMIN

All cases of infestation, however slight, are recorded.

The return relates to individual pupils and not to instances of infestation.

- (i) Total number of examinations in the schools by the school nurses or other authorised persons ... 32020
- (ii) Total number of individual pupils found to be infested ... .. 1633
- (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2) Education Act, 1944) ... .. 18
- (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944) ... .. —

Table III

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED  
31st DECEMBER, 1957

## A—PERIODIC INSPECTIONS

NOTE: All defects noted at medical inspection as requiring treatment are included in this return, whether or not this treatment was begun before the date of the inspection.

De- fect Code No.	Defect or Disease	Periodic Inspections				Total (including all other age groups inspected)	
		Entrants		Leavers			
		Re- quir- ing Treat- ment	Re- quir- ing Ob- serva- tion	Re- quir- ing Treat- ment	Re- quir- ing Ob- serva- tion	Re- quir- ing Treat- ment	Re- quir- ing Ob- serva- tion
4	Skin ... ..	1	8	—	5	6	27
5	Eyes (a) Vision ... ..	2	2	114	25	318	35
	(b) Squint ... ..	11	3	1	—	19	8
	(c) Other ... ..	—	4	1	4	3	17
6	Ears (a) Hearing ... ..	4	2	3	1	11	6
	(b) Otitis Media... ..	1	—	4	1	8	3
	(c) Other... ..	—	—	—	2	—	2
7	Nose and Throat ... ..	57	45	7	3	123	119
8	Speech ... ..	—	6	—	—	—	15
9	Lymphatic Glands ... ..	12	11	1	4	29	40
10	Heart ... ..	—	7	—	1	—	12
11	Lungs ... ..	3	21	—	—	3	37
12	Developmental:						
	(a) Hernia ... ..	—	—	—	—	—	9
	(b) Other ... ..	—	2	—	2	3	21
13	Orthopaedic:						
	(a) Posture ... ..	—	2	—	—	2	4
	(b) Feet ... ..	9	3	9	—	34	8
	(c) Other ... ..	—	12	3	2	8	28
14	Nervous System:						
	(a) Epilepsy ... ..	—	4	—	—	—	6
	(b) Other ... ..	—	2	—	—	—	3
15	Psychological:						
	(a) Development ... ..	—	2	—	2	—	4
	(b) Stability ... ..	—	1	—	3	—	6
16	Abdomen ... ..	—	—	—	—	—	—
17	Other ... ..	1	6	3	2	5	15



Table III (continued)

## B—SPECIAL INSPECTIONS

NOTE: All defects noted at medical inspection as requiring treatment are included in this return, whether or not this treatment was begun before the date of the inspection.

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
4	Skin ... ..	240	3
5	Eyes (a) Vision ... ..	95	9
	(b) Squint ... ..	7	3
	(c) Other ... ..	14	1
6	Ears (a) Hearing ... ..	5	—
	(b) Otitis Media ... ..	11	3
	(c) Other ... ..	14	—
7	Nose and Throat ... ..	53	60
8	Speech ... ..	3	12
9	Lymphatic Glands ... ..	—	5
10	Heart ... ..	1	8
11	Lungs ... ..	3	22
12	Developmental:		
	(a) Hernia ... ..	—	2
	(b) Other ... ..	10	19
13	Orthopaedic:		
	(a) Posture ... ..	—	3
	(b) Feet ... ..	7	9
	(c) Other ... ..	8	8
14	Nervous System:		
	(a) Epilepsy ... ..	—	1
	(b) Other ... ..	—	4
15	Psychological:		
	(a) Development ... ..	—	—
	(b) Stability ... ..	—	2
16	Abdomen ... ..	—	—
17	Other ... ..	2	10

Table IV

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND  
SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

## NOTES:

In Groups 1, 2 and 3 treatment includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, i.e., whether by periodic inspection, special inspection, or otherwise, during the year in question or previously, or

Provided otherwise than by the Authority (i.e., known by the Authority to have been provided, including treatment carried out in school clinics by the Regional Hospital Board).

## GROUP I—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with	
	by the Authority	Otherwise
External and other excluding errors of refraction and squint ... ..	19	—
Errors of refraction (including squint) ...	*—	999
Totals ... ..	19	999

\* Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

## GROUP II—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been treated	
	by the Authority	Otherwise
Received operative treatment:		
(a) for diseases of the ear ... ..	—	4
(b) for adenoids and chronic tonsillitis ...	—	335
(c) for other nose and throat conditions ...	—	15
Received other forms of treatment ... ..	73	10
Totals ... ..	73	364
Total number of pupils in schools who are known to have been provided with hearing Aids:		
(a) in 1957 ... ..	—	7
(b) in 1956 ... ..	—	8



### GROUP III—ORTHOPAEDIC AND POSTURAL DEFECTS

	by the Authority	Otherwise
Number of pupils known to have been treated at clinics or out-patient departments ...	—	376

### GROUP IV—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table II)

	Number of cases treated or under treatment during the year by the Authority
Ringworm: (i) Scalp ... ..	—
(ii) Body ... ..	2
Scabies ... ..	3
Impetigo ... ..	23
Other skin diseases ... ..	93
Total ... ..	121

### GROUP V—CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority ... ..	2
---	---

### GROUP VI—SPEECH THERAPY

Pupils treated by Speech Therapists under arrangements made by the Authority ... ..	—
--	---

### GROUP VII—OTHER TREATMENT GIVEN

(a) Number of cases of miscellaneous ailments treated by the Authority ... ..	51
(b) Pupils who received convalescent treatment under School Health arrangements ... ..	5
(c) Pupils who received B.C.G. vaccination ... ..	46
(d) Other than (a), (b) and (c) above:	
1. General medical ... ..	67
2. General Surgical ... ..	83
Total ... ..	252

Table V

## HEIGHT

	Age	No. Examined 1957	1954 ft. ins.	1955 ft. ins.	1956 ft. ins.	1957 ft. ins.
<b>BOYS</b>						
Entrants ...	4	5	3 2½	3 4½	3 2¾	3 2½
	5	150	3 5½	3 6	3 6½	3 6
	6	265	3 7	3 7¼	3 7½	3 7
	7	57	3 10	3 9½	3 11	3 10¼
Second age Group	8	433	—	4 0	4 0½	4 0
"    "    "	10	—	4 6	4 6½	—	—
"    "    "	11	578	—	—	—	4 7¾
Third age Group	14	431	5 1½	5 2½	5 1¾	5 2¼
Other Periodic Inspections: (Nursery Classes)	3	5	3 1	3 0½	3 1	3 2¾
	4	76	3 2½	3 3½	3 3¼	3 2½
	5	61	3 4½	3 4½	3 4¾	3 5
<b>GIRLS</b>						
Entrants ...	4	6	3 1½	3 1½	3 3	3 3
	5	151	3 5½	3 5	3 5¾	3 6
	6	262	3 7	3 7	3 7¼	3 6¾
	7	65	3 9½	3 9½	3 10	3 10
Second age Group	8	411	—	3 11½	3 11	3 11¾
"    "    "	10	—	4 5½	4 5½	—	—
"    "    "	11	519	—	—	—	4 9
Third Age Group	14	416	5 1	5 1	5 1	5 1
Other Periodic Inspections: (Nursery Classes)	3	5	3 0½	3 0	3 1½	3 1
	4	47	3 2½	3 2	3 2¾	3 2¾
	5	68	3 4½	3 4½	3 4¾	3 4½



# WEIGHT

	Age	No. Examined 1957	1954 st. lb.	1955 st. lb.	1956 st. lb.	1957 st. lb.
<b>BOYS</b>						
Entrants ...	4	5	2 7½	2 9½	2 8	2 7¾
	5	150	2 10	2 13	2 13	2 12¾
	6	265	3 0½	3 0½	3 1½	3 0¾
	7	57	3 7	3 6	3 6½	3 9¼
Second age Group	8	433	—	3 10½	3 12¾	3 11¼
" " "	10	—	5 1½	5 3	—	—
" " "	11	578	—	—	—	5 12½
Third age Group	14	431	7 3½	7 11	7 5¼	7 8¼
Other Periodic Inspections: (Nursery Classes)	3	5	2 4	2 6½	2 5½	2 5¾
	4	76	2 7½	2 8½	2 8¾	2 7
	5	61	2 10½	2 11	2 11¾	2 11¼
<b>GIRLS</b>						
Entrants ...	4	6	2 8	2 4	2 7	2 6¼
	5	151	2 11	2 10½	2 11½	2 10¼
	6	262	3 0	2 13½	3 0¼	2 13¾
	7	65	3 5½	3 5	3 5½	3 6
Second age Group	8	411	—	3 9	3 12	3 10
" " "	10	—	5 0½	5 3½	—	—
" " "	11	519	—	—	—	6 0¾
Third age Group	14	416	7 7	7 7½	7 8	7 9¾
Other Periodic Inspections: (Nursery Classes)	3	5	2 4	2 3	2 5	2 5¼
	4	47	2 7	2 6	2 7	2 6¾
	5	68	2 10	2 9½	2 10¼	2 10¼

## STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL HEALTH AUTHORITY DURING THE YEAR 1957

	Boys	Girls
Notified under Section 57(3) of the Education Act, 1944	5	2
Notified under Section 57(5) of the Education Act, 1944	6	1