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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

**1969**



**ERIC H. MOORE**

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

*Medical Officer of Health and  
Principal School Medical Officer*

HEALTH AND WELFARE DEPARTMENT, SANKEY STREET,  
WARRINGTON



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## Table of Contents

SCHOOL MEDICAL SERVICE SUB-COMMITTEE ... ..	4
STAFF ... ..	5
SCHOOL CLINICS ... ..	6
INTRODUCTORY LETTER.... ..	7
<b>THE SERVICE :</b>	
Medical Inspection ... ..	8
Ear, Nose and Throat Clinic ... ..	9
Audiometry ... ..	9
Enuresis Clinic ... ..	10
Treatment ... ..	10
SPEECH THERAPY CLINIC ... ..	11
WORK OF THE SCHOOL NURSES ... ..	12
<b>CHILD GUIDANCE CLINIC :</b>	
The Work of the Educational Psychologist ... ..	13
<b>HANDICAPPED PUPILS :</b>	
Numbers of handicapped pupils ... ..	14
Provision of special education ... ..	14
Educationally sub-normal pupils ... ..	15
Children receiving home tuition ... ..	15
<b>INFECTIOUS DISEASES AND IMMUNISATION :</b>	
Infectious diseases ... ..	16
Immunisation ... ..	16
<b>ANCILLARY SERVICES :</b>	
Nursery classes ... ..	17
Provision of milk and meals ... ..	17
Physical education ... ..	18
<b>THE SCHOOL DENTAL SERVICE :</b>	
Dental Inspection and Treatment ... ..	20
<b>APPENDIX (STATISTICAL TABLES) :</b>	
Part I—Table A—Classification of General Condition ... ..	21
B—Pupils found to require treatment ... ..	22
C—Other Inspections ... ..	22
D—Infestation with Vermin ... ..	22
Part II—	
Table A—Return of Defects found : At Periodic Inspections	23
B—Return of Defects found : At Special Inspections	24
Part III—Treatment Tables :	
Table A—Eye Diseases, Defective Vision and Squint ... ..	25
B—Diseases and Defects of the Ear, Nose and Throat	25
C—Orthopædic and Postural Defects ... ..	25
D—Diseases of the Skin ... ..	26
E—Child Guidance Treatment ... ..	26
F—Speech Therapy ... ..	26
G—Other Treatment Given ... ..	26
Part IV—	
Table H—Height of pupils inspected ... ..	27
J—Weight of pupils inspected ... ..	28
Notifications to Local Health Authority ... ..	28

# SCHOOL MEDICAL AND WELFARE COMMITTEE

(As at 31st December, 1969)

Councillor E. J. NAYLOR, M.P.S., M.R.S.H. (Chairman)

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

Alderman W. HIGHAM, J.P.

Alderman J. PHOENIX, J.P.

Councillor F. J. BIBBY

Councillor R. G. CROCKER (Mayor)

Councillor J. M. McINTYRE

Councillor Mrs. B. M. SHAKESHAFT

Councillor H. WHITEHEAD

Rev. M. J. DILLON

Mrs. T. BOYLE

Mr. J. S. C. MANN

*Ex-Officio:*

Alderman G. E. COOPER, J.P.  
(Chairman of the Education Committee)

Rev. B. H. SACKETT, M.A., B.D.  
(Deputy-Chairman of the Education Committee)

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

## STAFF

(As at 31st December, 1969)

*Principal School Medical Officer:*

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

*Deputy Principal School Medical Officer:*

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

*School Medical Officers:*

MARY GRAHAM, M.B., Ch.B., D.P.H.

WILLIAM P. POVEY, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.Obst.,  
R.C.O.G., D.P.H., A.I.H.E.

MARGARET L. TAYLOR, M.B., Ch.B. (Part-time, commenced June,  
1969).

*Principal School Dental Officer:*

A. P. FINLAY, L.D.S., R.F.P.S.(Glas.).

*School Dental Officers:*

Mrs. P. E. LAWTON, L.D.S., V.U. (Manc.).

C. H. TAYLOR, B.D.S. (L'pool), (Part-time).

L. K. GRAY, L.D.S. (L'pool), (Part-time).

*Orthodontist:*

MISS JUNE PATRICIA MURRAY, B.D.S. (L'pool), D.D.O., R.F.P.S.  
(Glas.), (Part-time).

*Dental Auxiliary:*

MISS SALLY VERITY.

*Educational Psychologist:*

Mrs. E. J. LONG, B.A.

*Superintendent Nursing Officer:*

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

---

*Ear, Nose and Throat Clinic:*

P. O'BRIEN, M.D.

*Visiting Consultants:*

*Ophthalmic*

ALBERT V. CLEMMY, B.M., B.Ch., D.O.M.S.



## SCHOOL CLINICS

### A. PROVIDED BY LOCAL EDUCATION AUTHORITY

#### INSPECTION CLINIC

Mon., Wed., Fri.,  
9.0 a.m. to 9.45 a.m.

Examination of cases referred by Teachers,  
Education Welfare Officers School  
Nurses, etc.

#### MINOR AILMENTS CLINIC

Garven Place Clinic

Monday to Friday  
9.0 a.m. to 9.45 a.m.

Treatment of contagious diseases of the  
skin, eyes, etc.

Mon., Tues., Thurs., Fri.  
4.0 p.m. to 5.15 p.m.

Vaccination and immunisation.

Orford Health Centre

Monday and Wednesday 9.0 a.m. to 9.30 a.m.

#### DENTAL CLINIC

Monday to Friday  
(by appointment)  
Daily 9.15 a.m. to  
10 a.m.

Dental treatment (including orthodontic  
treatment)

Emergency treatment.

#### EAR, NOSE AND THROAT CLINIC

Examinations: Monday a.m., Wednesday a.m., Thursday p.m.

Out-Patient treatment: Daily (by appointment).

Operations are performed at the Warrington General Hospital on  
Tuesday, Wednesday and Thursday mornings.

#### CHILD GUIDANCE CENTRE

Child Psychiatrist (by appointment).

Educational Psychologist (Daily by appointment).

#### CHIROPODY SERVICE

Cases seen by appointment.

### B. PROVIDED BY REGIONAL HOSPITAL BOARD

#### PAEDIATRIC CLINIC (Warrington General Hospital)

New cases: Wednesday p.m. (by appointment).

Re-visits: Monday a.m., Tuesday a.m. (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, 1.30 p.m.

Friday, 9.30 a.m.

(by appointment)

Examination and treatment of errors of  
refraction and squint.

*To the Chairman and Members of the Education Committee.*

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting my Annual Report on the work of the School Health Service.

No change has taken place in the system of operation of the service which consists of two medical inspections supported by regular visits by Medical Officers and Nurses to their allocated schools. The main emphasis is placed on the finding of children with handicaps and making recommendations where special education is required.

The main problems during the year have related to staffing. There was a shortage of School Nurses for much of the year owing to the difficulty in recruiting Health Visitors, but towards the end of the year the position had improved considerably. One Assistant Medical Officer resigned and was replaced by a part-time Medical Officer who has considerable experience in the work. The Dental Service experienced difficulty owing to two part-time Dental Officers leaving the service. It was also impossible to replace the Speech Therapist, who resigned in 1968. Child Guidance difficulties also occurred due to the illness and subsequent resignation of the Psychiatrist allocated for two sessions a week by the Regional Hospital Board. At about the same time the Educational Psychologist retired. After some delay it was possible to fill the post of Educational Psychologist but, on the 31st December, the Regional Hospital Board informed the authority that they would not be able to provide the services of a Child Psychiatrist.

As will be appreciated from the above remarks, the service operates under considerable staffing difficulties but the available staff have done an excellent job, and I am grateful to them for the way they have co-operated in order to try to bridge the gaps as far as possible.

Co-operation between the School Health Service and other agencies has been outstandingly good. It is with great regret that I have to record the impending retirement of Mr. Phillipson, Chief Education Officer, whose co-operation and assistance over a period of 20 years has been greatly appreciated. The close harmony and integration between the Education Service and the School Health Service has been outstanding throughout the years.

The continued interest and support which the services received from the Chairman and Members of the Committee has been a source of encouragement to all members of the staff, and the ready understanding which they have shown of the problems and difficulties which present themselves encourages the staff to give of their best.

I have the honour to be,

Your obedient Servant,

ERIC H. MOORE,  
Principal School Medical Officer,

## THE SERVICE

The service continued to operate on the same lines as in the previous year and selective medical inspection has continued to prove satisfactory. The service aims primarily at the ascertainment of handicaps and recommending appropriate educational treatment most suited to the child. The attachment of a school medical officer to specified schools with periodic informal visiting has continued.

The co-operation between all branches of the National Health Service has remained excellent and I am very grateful for the ready co-operation received from general practitioners and hospital staff.

### MEDICAL INSPECTION

The system of inspecting routinely only entrants and leavers was continued, the gap between being covered by the visits of school medical officers to the schools to which they are attached.

The statistics of medical inspection are contained in Table 'A' and 'B' of Parts I and II of the Appendix.

Special medical examinations were carried out at the request of teachers, school nurses, parents and other bodies when children were suspected of needing medical or other educational treatment. Special examinations were also carried out on 192 children to ascertain their fitness for employment and 1 was found to be unfit.

## EAR, NOSE AND THROAT CLINIC

This Clinic continued under the charge of Dr. O'Brien, a visiting General Practitioner, with special experience in Ear, Nose and Throat conditions. To this clinic are referred cases which have shown two failures on audiometric testing.

### AUDIOMETRY

Routine audiometric examinations are carried out on all school entrants, and on all children suspected of defective hearing. Preliminary testing is carried out in schools, but failures are re-tested at the clinic, double failures being referred to the Ear, Nose and Throat Consultant at his Special Clinic, and in special cases, to the Department for the Deaf of the University of Manchester.

A nurse who has received special training 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*

Primary Tests					
Number of schools visited	...	...	...	...	43
Number of group tests	...	...	...	...	143
Number of children tested	...	...	...	...	2539
Number of Primary failures	...	...	...	...	237
Secondary Tests					
Number of group tests	...	...	...	...	83
Number of children tested	...	...	...	...	407
Number of double failures	...	...	...	...	217
Disposal of Cases					
Nothing abnormal found after treatment	...	...	...	...	7
Receiving treatment	...	...	...	...	20
Referred for operative treatment	...	...	...	...	106
Treatment not beneficial	...	...	...	...	4
Still receiving treatment (from previous years) or investigation	...	...	...	...	32
Treatment refused	...	...	...	...	—
Discharged for non-attendance	...	...	...	...	7

## ENURESIS CLINIC

Referrals to the clinic are made by School Medical Officers, School Nurses and General Practitioners. Each patient is examined by the Medical Officer responsible for the Clinic and suitable cases are issued with a bell-alarm and two sets of foils, together with instructions for their use.

Each case is kept under observation during the period of treatment. The success of the treatment depends on the co-operation of the patient and of the parents.

35 new cases were treated during 1969, and of these, treatment in 16 was regarded as successful.

## 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 types of defects referred are usually in need of nursing attention. 803 children attended the clinic in 1969.

The arrangements for the treatment of visual defects continued through the hospital service as in previous years, except when parents wish otherwise. The statistics will be found in Table 'A', Part III of the Appendix.

A special clinic is held to which Ear, Nose and Throat cases are referred for Consultant advice. During the year 296 attendances were made which included 122 new cases. 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.

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

## SPEECH THERAPY CLINIC

During the year this clinic did not function, the Speech Therapist having resigned in the early part of 1968 in order to move to the London area, and it has not been possible to fill the vacancy. Further efforts will be made in the coming year since this is a service which proved of very considerable value both to the patients and to the teachers.

## THE WORK OF THE SCHOOL NURSES

School nurses are allocated certain schools for which they are responsible to a School Medical Officer, each School Medical Officer thus being able to give special attention to a group of schools and also being able to consider the cases referred by the School Nurses of the particular group of schools. By this arrangement a closer degree of co-operation between Head Teacher, School Medical Officer and School Nurse is possible which is greatly to the benefit of pupils.

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. The school nurses carry out routine vision testing on all schoolchildren in alternate years. The testing is done by classes in schools. School nurses also give lectures on selected subjects of Health Education at the request of Head Teachers.

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 49 cases. 1 Cleansing Order was issued for the Compulsory Cleansing of a child at the cleansing station. No prosecutions were necessary in the year under review.

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

	1968	1969
Visits to homes of children (in many cases assisting with treatment) ... ..	174	157
Attendance at medical inspections in schools ...	310	262
Visits to schools for cleanliness inspections and re-inspections ... ..	380	312
Number of cases of uncleanness treated at the school clinic ... ..	38	86
Number of attendances of uncleanness cases at the school clinic ... ..	92	210

## CHILD GUIDANCE CLINIC

The work of the Child Guidance Clinic has been severely curtailed for a major part of the year due to the resignation of Dr. I. Berman, the Consultant Psychiatrist in February and the retirement in May, after 17 years' service of Mrs. C. Rivett, the Educational Psychologist. The appointment of an Educational Psychologist in November went some way to remedy the situation, but the Liverpool Regional Hospital Board have not yet been able to appoint a Consultant Psychiatrist to the Clinic. At present urgent cases for psychiatric treatment have to be referred to Alder Hey Children's Hospital or to Dr. O'Flanagan, Consultant Psychiatrist, at Winwick Hospital, whose co-operation is greatly appreciated.

The Educational Psychologist has been making strenuous efforts since November to make contact with the staff of schools in Warrington as well as with the various medical and social agencies concerned with children's welfare. With the shortage of Child Guidance staff the co-operation of the above is particularly valued and is essential for the service to function. At the same time there has been a considerable waiting list of patients accumulated during the interregnum. These divide broadly into two types: (a) Those children usually referred by Head Teachers who have educational difficulties. They are helped by testing and advice to teachers and parents; (b) Children with behaviour disturbances caused by environmental stresses. These children and their parents usually need consistent understanding and help, often intensively. This tends to be a time-consuming task but is of particular importance at the present time because of the lack of psychiatric coverage.

The figures below show an outline of the work undertaken within the Child Guidance Clinic for the year under review.

### *THE CONSULTANT CHILD PSYCHIATRIST*

No. of clinic sessions held	....	....	....	....	12
No. of new cases	....	....	....	....	8
Total number of interviews (new and old cases)	....	....	....	....	26
No. of pupils treated	....	....	....	....	18
No. of closed cases	....	....	....	....	8
Cases on waiting list	....	....	....	....	18

#### *New Cases:*

##### *From whom referred:*

School Medical Officers	....	....	....	....	0
Educational Psychologist	....	....	....	....	5
Consultant Paediatrician	....	....	....	....	0
General Practitioners	....	....	....	....	2
Miscellaneous	....	....	....	....	1

### *THE EDUCATIONAL PSYCHOLOGIST*

New cases undertaken	....	....	....	....	95
Referred by School Medical Officers	....	....	....	....	22
Referred by Head Teachers	....	....	....	....	59
Other sources including parents	....	....	....	....	14
Retests	....	....	....	....	20
Return visits of old cases	....	....	....	....	94
No. of visits paid to schools	....	....	....	....	79



## HANDICAPPED PUPILS

### NUMBERS OF HANDICAPPED PUPILS

The following table gives the numbers of pupils on the Handicapped Pupils' Register on the 31st December, 1969, together with the numbers ascertained during the year.

Classification	No ascertained during year	Total on register at 31.12.69
Partially-sighted ....	1	4
Deaf ....	1	7
Partially-hearing ....	1	6
Physically-handicapped ....	2	13
Delicate ....	—	6
Maladjusted ....	1	5
Educationally-sub-normal	36	193
Epileptic ....	—	—
<b>TOTALS</b> ....	<b>42</b>	<b>234</b>

### 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 ....	—	3	—	—	3
Deaf ....	—	6	—	—	6
Partially-hearing ....	—	4	—	—	4
Physically- handicapped ....	—	7	—	5	12
Delicate ....	—	4	—	2	6
Maladjusted ....	—	—	—	1	1
Educationally sub-normal ....	176	7	—	—	183
Epileptic ....	—	—	—	—	—
<b>TOTALS</b> ....	<b>176</b>	<b>31</b>	<b>—</b>	<b>8</b>	<b>215</b>

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

Partially sighted	....	....	....	....	....	1
Deaf	....	....	....	....	....	1
Partially hearing	....	....	....	....	....	2
Physically handicapped	....	....	....	....	....	1
Maladjusted	....	....	....	....	....	4
E.S.N.	....	....	....	....	....	10

### EDUCATIONALLY SUB-NORMAL PUPILS

There are 193 pupils ascertained as educationally sub-normal of whom 7 are in special residential schools, and 176 in the special day school. The remainder are awaiting special educational treatment.

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 36 children were tested, with the following results :—

Suitable for special (day) schools	...	...	20
Suitable for special (residential) schools	...	...	1
Special education in ordinary school	...	...	7
No action taken—to be retested later	...	...	8
			—
Total	...	...	36
			—

### CHILDREN RECEIVING HOME TUITION

On the 31st December, 1969, there were 8 handicapped pupils on the home teacher's register. Of these, 5 were physically handicapped, 2 delicate and 1 maladjusted.

## INFECTIOUS DISEASES AND IMMUNISATION

### INFECTIOUS DISEASES

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

	1968	1969
Tuberculosis (respiratory) ... ..	—	—
Tuberculosis (non-respiratory) ... ..	—	—
Scarlet Fever ... ..	18	9
Whooping Cough ... ..	2	—
Measles ... ..	152	4
Pneumonia ... ..	2	—
Meningococcal Infection ... ..	1	—
Dysentery ... ..	—	7
Jaundice (from 3rd July, 1968) ....	9	46
<b>Totals</b> ... ..	184	66

### IMMUNISATION

Special efforts are made to secure complete immunisation of schoolchildren at the time of the entrant examinations and the necessary ' booster ' injections are given in school as required.

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

Primary Courses ... ..	282
Secondary (Reinforcement) ... ..	1466
<b>Total</b> ... ..	1748

*Poliomyelitis*: The number of schoolchildren immunised during the year was as follows :—

#### Oral Vaccine:

Completed Course (1st, 2nd, 3rd) ....	306
Booster ... ..	1562

A total of 2,480 doses of oral vaccine were thus given to schoolchildren during the year.

*Measles*: Immunisation against measles was continued during the year. The number of schoolchildren who received this immunisation was: 67.

*B.C.G.* : Vaccination is available to all children in the 13 year old group.

No. of Mantoux Tests performed ...	993
No. of Mantoux Tests negative . ...	938
No. of B.C.G. vaccinations performed in school ... ..	938
Acceptance Rate... ..	84.70%

## ANCILLARY SERVICES

### NURSERY CLASSES

Children attending the nursery classes at the infants' schools are examined every year. Details of the examinations will be found under the heading "Periodic Medical Inspections" in Part I, Table 'A', in the Appendix. 330 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.

### PROVISION OF MILK AND MEALS

Milk: One-third of a pint of milk each day has continued to be available for all children in primary schools and the day special school.

Meals: The Education Committee had twenty School Kitchens open at the commencement of the year, and another was brought into operation after the February half-term holiday. Mid-day meals were served in all the schools and the supply of meals to the Junior Training Centre continued throughout the year.

There was again an increased demand for meals. The charge continued to be 6d. per day for children attending special schools, and 1/6d. per day for children at other schools. Free meals were supplied to the children of parents whose income was within the national scale, but with effect from 1st April the provision of free meals for the fourth and any subsequent children of a family, regardless of income, was rescinded by the Government.

The following table shows the average number of meals supplied per day during the year 1969:

Average No. of pupils on Roll	Received free meals	Received meals for payment	Total	Percentage of pupils re-receiving meals
12,934	1,205	6,643	7,848	60.67%

During the week-ending 19th September, 1969—41,233 children's meals were supplied. This figure was the highest recorded figure of children's meals served in any week, since the commencement of the School Meals' Service in Warrington, being 369 more than the highest figure in 1968.

## PHYSICAL EDUCATION

Steady progress in Physical Education has been maintained throughout the year with the Authority's scheme for supply and maintenance of equipment and general provision of facilities showing good results.

The Warrington Teachers' Sports Association has conducted its usual full programme of inter-school and inter-town competitions in the major games and there have been successes by individual pupils at County and National levels.

The Authority's swimming scheme for school children has again shown good results both in the numbers of pupils learning to swim as well as competitive swimming successes. Royal Life Saving Society examinations which are conducted at many standards throughout the year have again reflected the high standard of instruction given at the Public Baths.

The Borough Gymnasium has been a popular centre for physical activities of all kinds and the evening classes have been well attended. The premises have been used for day time recreational activities by pupils from the School of Art and by local and other organisations for coaching and special competitive events.

## PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT

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

I began my report last year by commenting on the fact that, for the first time in 13 years, we had no staff changes or periods of sickness amongst the professional staff, and that consequently, we had a good year. I expressed the hope that the next year would be equally good, but unfortunately it was not to be.

At the very beginning of the year we lost Miss Ramage, our Dental Auxiliary. Miss Ramage moved over to Cheshire County Council, for domestic reasons, and then in the Spring of the year she was replaced by our present Dental Auxiliary, Miss Verity. Then in the Autumn of the year we lost two of our part-time Dental Officers, Miss Michael and Mr. Hull, both of whom left in order to devote more time to private practice. Endeavours to recruit new staff by advertising in the British Dental Journal proved fruitless, and so it would appear that, staff-wise, we are back to square one.

Happily, we still have with us Mrs. Lawton, full-time, and Mr. Taylor and Mr. Gray part-time. One must face facts, however, and I hope I may be forgiven when I say that all of us, including myself, have already lost the first bloom of youth, and that consequently there must be a large question mark against the length of time that any one or all of my colleagues may feel like continuing in harness. I myself am at this moment writing my last annual report prior to retiring shortly, so probably this accounts for what to some may appear to be a pessimistic outlook of the future. This I may say is not my intention.

It is the fashion at the present time to put everything into decades, and to contemplate the 'rich promise of the Seventies'. If we look back in time, to the fifties, the School Dental Service in Warrington was then really in the doldrums, occupying premises which were scathingly referred to as 'The Little Clinic'. By the end of the fifties we had moved into our new Clinic, furnished with modern equipment, and for a time we enjoyed the luxury of a full establishment of staff. We had our ups and downs, but I venture to suggest that in the sixties, the School Dental Service in Warrington would conform favourably with most. And what of the seventies? The seventies will see the birth of the Warrington New Town; it will also see the implementation of the Maud Report on Local Government; all of which could make the School Dental Service in Warrington really something. Let's hope my successor knows the magic formula for attracting staff.

One figure which dropped from the previous year, and for which I can offer no explanation is the overall acceptance rate for treatment, which this year is 66%, compared with 72% last year. I feel it should be explained that this figure refers only to inspections in school, and does not include emergency cases at the Clinic.

A popular innovation this year was the distribution of Dental Hygiene Kits to all new school entrants aged five years. Each Kit consists of a canister containing a plastic beaker, tooth-brush and tooth-paste, together with a letter to the parents giving some good advice on dental health. A young child likes to have something to take home and show it to Mum, and it is hoped that this will help to instil the habit of good oral hygiene. Miss Verity conducted the distribution in school, allied with talks and demonstrations.

In the past few years I have stressed the importance of the happy professional relationship which exists between myself on the one hand, and Mr. Finch at the General Hospital, and Mr. Over at the Infirmary on the other. This has continued during the past year, and for this I am indeed grateful to them both.

In conclusion, may I thank all the members of my own staff for bearing with me, some of them for fourteen years! My thanks also to all the Medicals, Nurses, and Clericals; I shall miss you all.

**DENTAL INSPECTION AND TREATMENT CARRIED OUT  
BY THE AUTHORITY DURING THE YEAR ENDED  
31st DECEMBER, 1969**

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First Visit .....	2250	1443	255	3948
Subsequent Visits .....	1985	2532	479	4996
<b>Total Visits .....</b>	<b>4235</b>	<b>3975</b>	<b>734</b>	<b>8944</b>
<b>Additional courses of treatment commenced.....</b>	<b>106</b>	<b>111</b>	<b>35</b>	<b>252</b>
Fillings in permanent teeth .....	1263	2374	427	4064
Fillings in deciduous teeth .....	1016	27	—	1043
Permanent teeth filled .....	1107	2089	388	3584
Deciduous teeth filled .....	981	27	—	1008
Permanent teeth extracted .....	199	670	127	996
Deciduous teeth extracted .....	2908	536	—	3444
General anaesthetics .....	1487	607	53	2147
Emergencies .....	807	260	36	1103

Number of Pupils X-rayed.....	145
Prophylaxis .....	708
Teeth otherwise conserved .....	282
Number of teeth root filled .....	18
Inlays .....	—
Crowns .....	7
Courses of treatment completed .....	2991

**ORTHODONTICS**

Cases remaining from previous year .....	138
New cases commenced during year .....	42
Cases completed during year .....	61
Cases discontinued during year .....	5
No. of removable appliances fitted .....	64
No. of fixed appliances fitted .....	21
Pupils referred to Hospital Consultant .....	2

**PROSTHETICS**

	5 to 9	10 to 14	15 & over	Total
Pupils supplied with F.U. or F.L., (first time) .....	—	—	—	—
Pupils supplied with other dentures (first time) .....	2	30	12	44
Number of dentures supplied .....	2	30	12	44

**ANAESTHETICS**—General Anaesthetics administered by Dental Officers .... 2147

**INSPECTIONS**

(a) First inspection at school. Number of pupils .....	6514
(b) First inspection at clinic. Number of pupils .....	1694
Number of (a) — (b) found to require treatment .....	5726
Number of (a) — (b) offered treatment .....	4527
(c) Pupils re-inspected at school or clinic .....	445
Number of (c) found to require treatment .....	257

**SESSIONS**

Sessions devoted to treatment .....	1438
Sessions devoted to inspection .....	60
Sessions devoted to Dental Health Education .....	30

## APPENDIX

### Medical Inspection Returns

Year ended 31st December, 1969

PART I—Medical Inspection of Pupils Attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools).

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By year of birth)	No. of Pupils who have received a full medical examination	Physical Condition of Pupils Inspected		No. of Pupils found not to warrant a *medical examination
		Satisfac- tory No.	Unsatisfac- tory No.	
1	2	3	4	5
1965 and later	128	128	—	—
1964	699	699	—	—
1963	753	753	—	—
1962	28	28	—	—
1961	13	13	—	—
1960	11	11	—	—
1959	7	7	—	828
1958	16	16	—	—
1957	10	10	—	—
1956	14	14	—	—
1955	343	342	1	—
1954 and earlier	490	490	—	—
<b>TOTALS ....</b>	<b>2512</b>	<b>2511</b>	<b>1</b>	<b>828</b>

Col. (3) total as a percentage of Col. (2) total ..... 99.96%

Col. (4) total as a percentage of Col (2) total ..... — 0.04%

\*In column (5) is the number of pupils who have been “ interviewed ” or “ discussed ” at case conferences and found not to warrant a medical examination, selective medical examinations being carried out.



TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS

(excluding Dental Diseases and Infestation with Vermin)

NOTES: Pupils found at Periodic Inspections to require treatment for a defect are not excluded from Table B by reason of the fact that they were already under treatment for that defect.

Table B relates to individual pupils and not to defects. Consequently, the total in column (4) will not necessarily be the same as the sum of columns (2) and (3).

Age Groups Inspected (By year of birth) 1	For defective vision (excluding squint) 2	For any of the other conditions recorded in Part II 3	Total individual pupils 4
1965 and later	—	1	1
1964	—	21	21
1963	—	18	18
1962	—	—	—
1961	—	—	—
1960	—	1	1
1959	—	—	—
1958	—	—	—
1957	—	1	1
1956	—	—	—
1955	11	5	16
1954 and earlier	23	24	41
TOTALS ...	34	71	99

TABLE C.—OTHER INSPECTIONS

NOTES: A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	...	...	...	277
Number of Re-inspections	...	...	...	512
Total	...	...	...	789

TABLE D.—INFESTATION WITH VERMIN

NOTES: All cases of infestation, however slight, are included.

The numbers recorded at (b), (c) and (d) relate to individual pupils, and not to instances of infestation.

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	...	...	...	...	19,600
---	-----	-----	-----	-----	-----	--------

(b) Total number of individual pupils found to be infested ... ..	1,102
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ... ..	49
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944) ... ..	1

PART II—Defects found by Medical Inspection during the year.

TABLE A.—PERIODIC INSPECTIONS

NOTE: All defects, including defects of pupils at Nursery and Special Schools, noted at periodic medical inspections are included in this Table, whether or not they were under treatment or observation at the time of the inspection. This Table includes separately the number of pupils found to require treatment (T) and the number of pupils found to require observation (O).

Defect Code No.	Defect or Disease	Periodic Inspections							
		Entrants		Leavers		Others		Total	
		(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
1	2	3	4	5	6	7	8	9	10
4	Skin ... ..	1	7	1	—	2	3	4	10
5	Eyes (a) Vision ...	—	1	34	2	—	7	34	10
	(b) Squint ...	5	12	—	—	2	5	7	17
	(c) Other ...	1	—	—	—	2	1	3	1
6	Ears (a) Hearing ...	5	20	3	—	1	5	9	25
	(b) OtitisMedia	3	29	2	—	1	2	6	31
	(c) Other ...	—	3	—	—	—	2	—	5
7	Nose and Throat ...	6	32	—	—	1	14	7	46
8	Speech ... ..	4	32	—	—	—	9	4	41
9	Lymphatic Glands .	—	9	—	—	—	2	—	11
10	Heart ... ..	1	32	4	1	—	14	5	47
11	Lungs ... ..	—	35	—	1	—	6	—	42
12	Developmental :								
	(a) Hernia ...	—	2	1	—	—	2	1	4
	(b) Other ...	—	64	—	—	1	16	1	80
13	Orthopædic :								
	(a) Posture ...	—	—	—	—	—	—	—	—
	(b) Feet ... ..	2	33	1	—	—	7	3	40
	(c) Other ...	1	32	1	—	—	24	2	56
14	Nervous System :								
	(a) Epilepsy ...	—	4	—	—	—	2	—	6
	(b) Other ...	—	3	—	—	—	1	—	4
15	Psychological :								
	(a) Development.	—	38	2	1	—	5	2	44
	(b) Stability ...	—	18	1	—	—	4	1	22
16	Abdomen ... ..	—	—	—	—	—	—	—	—
17	Other ... ..	2	5	13	3	—	3	15	11

TABLE B—SPECIAL INSPECTIONS

NOTE : All defects, including defects of pupils at Nursery and Special Schools, noted at special medical inspections are included in this Table, whether or not they were under treatment or observation at the time of the inspection.

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
4	Skin ... ..	579	8
5	Eyes (a) Vision ... ..	141	52
	(b) Squint ... ..	1	—
	(c) Other ... ..	1	—
6	Ears (a) Hearing ... ..	7	5
	(b) Otitis Media ... ..	5	—
	(c) Other ... ..	6	1
7	Nose and Throat ... ..	6	16
8	Speech ... ..	2	6
9	Lymphatic Glands ... ..	—	—
10	Heart ... ..	—	25
11	Lungs ... ..	2	46
12	Developmental :		
	(a) Hernia ... ..	—	2
13	(b) Other ... ..	11	129
	Orthopædic :		
	(a) Posture ... ..	—	1
	(b) Feet ... ..	2	17
14	(c) Other ... ..	11	32
	Nervous System :		
	(a) Epilepsy ... ..	—	2
15	(b) Other ... ..	2	2
	Psychological :		
	(a) Development ... ..	7	11
16	(b) Stability ... ..	23	26
	Abdomen ... ..	—	—
17	Other ... ..	69	9

PART III—Treatment of Pupils Attending Maintained and Assisted Primary and Secondary Schools (Including Nursery and Special Schools).

N.B. : This part of the return gives the total numbers of :—

- (i) cases treated or under treatment during the year by members of the Authority's own staff.
- (ii) cases treated or under treatment during the year in the Authority's school clinics under National Health Service arrangements with the Regional Hospital Board ; and
- (iii) cases known to the Authority to have been treated or under treatment elsewhere during the year.

TABLE A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ... ..	1
Errors of refraction (including squint) ...	623
<b>TOTAL</b> ... ..	<b>624</b>
Number of pupils for whom spectacles were prescribed ... ..	290

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment :	
(a) for diseases of the ear ... ..	7
(b) for adenoids and chronic tonsillitis ...	220
(c) for other nose and throat conditions ...	—
Received other forms of treatment ...	151
<b>TOTAL</b> ... ..	<b>378</b>
Total number of pupils in schools who are known to have been provided with hearing aids :	
(a) in 1969 ... ..	1
(b) in previous years ... ..	19

TABLE C.—ORTHOPÆDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient departments ... ..	325
(b) Pupils treated at school for postural defects ... ..	—
<b>TOTAL</b> ... ..	<b>325</b>

TABLE D.—DISEASES OF THE SKIN

(excluding uncleanliness, for which see Table D of Part I)

	Number of cases known to have been treated
Ringworm (a) Scalp ... ..	-
(b) Body ... ..	-
Scabies ... ..	35
Impetigo ... ..	4
Other skin diseases ... ..	751
<b>TOTAL</b> ... ..	<b>790</b>

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics ...	30

TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists ...	-

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments ... ..	26
(b) Pupils who received convalescent treatment under School Health Service arrangements ... ..	3
(c) Pupils who received B.C.G. vaccination	938
(d) Other than (a), (b) and (c) above. Please specify :	
GENERAL MEDICAL ... ..	10
GENERAL SURGICAL ... ..	83
<b>TOTAL (a)—(d)</b> ... ..	<b>1060</b>

## PART IV.

TABLE H. HEIGHT

	Age	No. Examined 1969	1966 ft. ins.	1967 ft. ins.	1968 ft. ins.	1969 ft. ins.
<b>BOYS</b>						
Entrants .....	4	-	3 2 $\frac{3}{4}$	-	-	-
	5	259	3 6	3 5 $\frac{3}{4}$	3 6	3 6
	6	406	3 7 $\frac{1}{4}$	3 7 $\frac{1}{4}$	3 7	3 7
	7	19	3 9 $\frac{3}{4}$	3 9 $\frac{1}{2}$	3 9 $\frac{3}{4}$	3 10
Leavers .....	14	350	5 3	5 5	5 3	5 2 $\frac{1}{2}$
Other Periodic Inspections : (Nursery Classes)	3	2	3 3 $\frac{1}{2}$	2 9 $\frac{1}{2}$	3 0	3 0
	4	61	3 3 $\frac{1}{2}$	3 2 $\frac{1}{2}$	3 3	3 3
	5	112	3 4 $\frac{1}{4}$	3 4 $\frac{1}{2}$	3 4 $\frac{1}{2}$	3 5 $\frac{1}{2}$
<b>GIRLS</b>						
Entrants .....	4	-	3 5 $\frac{1}{4}$	-	-	-
	5	216	3 6	3 5 $\frac{1}{2}$	3 5 $\frac{3}{4}$	3 6 $\frac{1}{4}$
	6	352	3 6 $\frac{1}{2}$	3 7	3 7 $\frac{1}{4}$	3 7
	7	19	3 9	3 10 $\frac{1}{2}$	3 9 $\frac{1}{2}$	3 10 $\frac{1}{2}$
Leavers .....	14	330	5 1 $\frac{1}{2}$	5 2	5 1 $\frac{3}{4}$	5 1 $\frac{1}{2}$
Other Periodic Inspections : (Nursery Classes)	3	-	3 2	-	2 9 $\frac{1}{2}$	-
	4	54	3 3 $\frac{1}{2}$	3 1 $\frac{1}{2}$	3 2 $\frac{1}{2}$	3 2
	5	111	3 4 $\frac{1}{2}$	3 4	3 4 $\frac{1}{2}$	3 4 $\frac{1}{2}$

TABLE J.—WEIGHT

	Age	No. Examined 1969	1966 st. lb.	1967 st. lb.	1968 st. lb.	1969 st. lb.
<b>BOYS</b>						
Entrants	4	—	2 10 $\frac{1}{4}$	—	—	—
	5	259	2 13 $\frac{1}{4}$	2 13 $\frac{1}{4}$	2 12 $\frac{1}{2}$	2 12 $\frac{3}{4}$
	6	406	3 0 $\frac{3}{4}$	3 1 $\frac{1}{4}$	3 0 $\frac{3}{4}$	3 0 $\frac{1}{4}$
	7	19	3 5 $\frac{1}{2}$	3 6	3 5 $\frac{3}{4}$	3 8 $\frac{1}{4}$
Leavers	14	350	7 13	8 3	8 2	8 1 $\frac{3}{4}$
Other Periodic Inspections: (Nursery Classes)	3	2	2 9 $\frac{1}{4}$	2 2	2 5	2 2 $\frac{3}{4}$
	4	61	2 9 $\frac{1}{2}$	2 7 $\frac{1}{2}$	2 7 $\frac{3}{4}$	2 7 $\frac{1}{4}$
	5	112	2 9 $\frac{3}{4}$	2 10	2 10 $\frac{1}{4}$	2 11 $\frac{1}{2}$
<b>GIRLS</b>						
Entrants	4	—	2 11 $\frac{1}{2}$	—	—	—
	5	216	2 12 $\frac{1}{4}$	2 12	2 11 $\frac{1}{2}$	2 11 $\frac{3}{4}$
	6	352	3 0	3 0 $\frac{1}{2}$	3 0 $\frac{3}{4}$	2 13 $\frac{3}{4}$
	7	19	3 5 $\frac{1}{2}$	3 5 $\frac{1}{2}$	3 3 $\frac{3}{4}$	3 6 $\frac{1}{2}$
Leavers	14	330	7 11 $\frac{1}{2}$	8 0 $\frac{3}{4}$	8 2	7 10 $\frac{1}{2}$
Other Periodic Inspections: (Nursery Classes)	3	—	2 5	—	2 3 $\frac{1}{2}$	—
	4	54	2 8 $\frac{1}{4}$	2 5 $\frac{3}{4}$	2 7 $\frac{1}{4}$	2 6 $\frac{3}{4}$
	5	111	2 10	2 8 $\frac{1}{2}$	2 9 $\frac{3}{4}$	2 10

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL HEALTH AUTHORITY DURING THE YEAR 1969

	Boys	Girls
Notified under Section 57 of the Education Act, 1944, as amended by the Mental Health Act, 1959	6	4











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