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# WEST SUFFOLK COUNTY COUNCIL

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## ANNUAL REPORT

of the

### Principal School Medical Officer

for the

### YEAR 1970

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D. A. McCracken, C.St.J., M.D., D.P.H.

*Principal School Medical Officer*





WEST SUFFOLK COUNTY COUNCIL

EDUCATION COMMITTEE

Telephone No:  
Bury St. Edmunds 63141



Manor House,  
Bury St. Edmunds.

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my report on the work of the school health service for the year 1970. This will be the eighteenth report I have been responsible for during my tenure of office.

It has become apparent over the past year, that benefits are already being derived from the use of the computer to arrange for immunization procedures for the child community throughout the county. The whole impact of this procedure has not been attained and it will be a few years yet before one can say that we are immunizing the maximum number of children throughout the school population. The introduction of Rubella - German Measles vaccine should, in the long run, help to obviate a number of the congenital abnormalities which appear periodically amongst the child population.

The services of health education have been much in demand from the schools throughout the county and this aspect of the education work requires expansion in order to cope with the ever increasing demands. It is again very disappointing that I am not as yet in a position to report that positive steps have been taken by the water undertakers to adjust the fluorine content of the public water supplies.

I again gratefully acknowledge the co-operation of all my colleagues in the education and medical fields, work of the several voluntary associations and the support which has always been manifest from the Chairman and Members of the Welfare and General Purposes Sub-Committee.

I am

Your obedient Servant,

DAVID ANDREW McCRACKEN

*Principal School Medical Officer.*

20th August, 1971.

## STAFF OF THE SCHOOL HEALTH SERVICE

Principal School Medical Officer	D. A. McCracken, M.D., Ch.B., D.P.H.
Deputy Principal School Medical Officer	A. M. Lush, M.R.C.S., L.R.C.P., D.P.H., (R.C.P.I.), D.(Obst.), R.C.O.G., D.P.H.
Senior Medical Officer	D. M. Walker, M.B., Ch.B.
School Medical Officers	P. Coggin Brown, M.R.C.S., L.R.C.P., D.P.H. E. Kinnear, M.B., Ch.B., D.P.H. L. B. Gonzalez, M.B., Ch.B., D.P.H. U. E. Williams, M.D., from 1.9.70. (part-time)
Principal School Dental Officer	S. H. Pollard, L.D.S.
Dental Officers	Col. E. Ferguson, M.B.E., L.D.S. W. L. Norman, L.R.A.M., L.D.S., R.C.S., (part-time) G. T. Green, B.D.S., L.D.S., K.C.S., (to 8.4.70) Mrs. M. Roy, L.D.S., (part-time) to 31.1.70.
Principal Nursing Officer	Miss V. M. Hird, S.R.N., S.C.M., Q.N., H.V.Cert.
Superintendent School Nurse/Health Visitor	Miss M. M. Ward, S.R.N., S.C.M., H.V.Cert.
School Nurses, etc. (as on 31.12.70)	One School Nurse, (part-time) 24 School Nurse/Health Visitors, (one part-time) and three dental surgery assistants (one part-time)
Speech Therapists	Miss B. M. Elton, L.C.S.T. Mrs. L. Cadman, L.C.S.T., to 28.2.70
Health Education Officer	Miss V. Blanchard
Administrative Officer	E. White

*Population and Types of Schools.*

The County of West Suffolk has an area of 390,916 acres. The estimated population at mid-1970 was 166,830. There are no county boroughs within the county. In September 1970 there were 121 maintained schools in the county. Of the 18 secondary schools, four were grammar schools, one bilateral and 13 were secondary modern, containing in all 9,365 pupils.

The 103 primary schools contained 15,835 pupils. The total maintained school population was therefore 25,200.

*Medical Inspection.*

The policy of selective examination has been continued in all schools. This policy is only possible due to co-operation of medical and non-medical colleagues, and the integration of the services for the pre-school child. Copies of hospital reports are obtained routinely from the local consultants in paediatrics, ophthalmology and Ear, Nose and Throat surgery, and with the health visitors reports form a basis for the selective reports. The more frequent visits to schools has resulted in closer contacts with the teachers, who can refer any children they are worried about. With the growth of the School Psychological Service, there has been an increased knowledge of the abilities of school children relative to their attainments, and referrals where there is a suspected handicap.

At primary schools routine vision testing by the school nurse has continued for the age groups 7-8 years and 10-11 years, but many further selective tests are performed.



Audiology testing is mainly carried out selectively by school medical officers.

At secondary schools the third year pupils are routinely surveyed by medical officers, and recommendations made where necessary to the Youth Employment Service.

#### *Speech Therapy.*

1970 did not prove favourable to the speech therapy service, for by the end of February it was again reduced to one full-time therapist.

Mrs. Cadman who had been serving the southern part of the County left the area at this time.

During the year and six months she had worked here, she had made a very real contribution, and was missed when she left by both schools, parents and children alike.

Miss Elton managed to maintain some contact with about twenty of the more severe cases from the southern area, but this could be done mainly only in school holiday times, as the volume of work in Bury, and the northern area was not diminished, but rather on the contrary, despite the care and consideration of medical officers to refer cases only when the need for therapy seemed pressing.

During 1970 a total of 229 school children received some kind of treatment; some frequent and regular, others attending for check ups, and or advice.

Of this whole number of school children, it was possible to discharge only thirty-two.

#### *Heaf Testing and B.C.G. Vaccination.*

The following figures exclude those Heaf positive due to earlier B.C.G. vaccination.

YEAR BORN	NUMBER TESTED	POSITIVE 1 & 2	POSITIVE 3 & 4	% OF POSITIVE REACTORS WHERE STATISTICALLY SIGNIFICANT
1953	2	0	0	—
1954	13	0	0	—
1955	422	10	3	3.0
1956	916	28	9	4.0
TOTAL	1,353	38	12	3.1

#### *Verminous Children.*

Following the repeated inspections of the previous year, and the thorough follow-up at the homes of those affected there has been a decrease in the number of children found verminous to forty-seven. Total inspections numbered 6,762.

## SCHOOL PSYCHOLOGICAL SERVICE

During 1970, the School Psychological Service continued to expand its service on familiar lines in Education Guidance Centres, Special Classes in Schools and the Remedial Centre. A steadily growing demand for services meant that in some cases, waiting lists developed. Parents and teachers do not call on the services of the Psychologist lightly. It is therefore necessary that when help is sought, it should be available quickly.

Towards the end of the year, negotiations were successfully completed for setting up an additional Education Guidance Centre at Brandon from January, 1971, which should provide a useful local service, and remove the need for a difficult and inconvenient journey into Bury St. Edmunds for parents and children alike.

The annual camp holiday for deprived children was again held at Caister, near Yarmouth, and was a great success.

During the course of the year, attention became increasingly focussed on the needs of the seriously mentally handicapped children attending the Junior Training Centres. This interest was in anticipation of the transfer of responsibility for these Centres to the Education Committee from April, 1971. Such profoundly handicapped children place considerable strain on the skill and patience of their teachers who themselves need every assistance in planning individual programmes to help their children make a start in learning, however slowly. Such very backward children may not, even at best, achieve more than 50 per cent of the standard of their normal contemporaries. The whole learning process is in slow-motion but happily, in many cases, what skills are implanted are retained tenaciously.

Case conferences with other Departments on children at risk and on families with special needs continued. They reduce the likelihood of duplication of services and of conflicting advice and are a help to all concerned.

## HANDICAPPED PUPILS

The following table shows the number of handicapped pupils at, or awaiting vacancies at, special schools or hostels.

\* This figure does not include the 12 children who were attending the partially hearing unit in Bury St. Edmunds.

	Blind	Partially Sighted	Deaf	Partially Hearing	Physically Handicapped	Delicate	Maladjusted	Educationally Subnormal	Epileptic	Autistic	Speech Defects	TOTAL
At special schools or hostels	3	1	8	2*	6	8	32	25	4	—	—	89
At independent schools	—	—	1	—	—	—	3	—	—	—	—	4
Awaiting admission to special schools or hostels	—	1	—	—	—	—	8	5	1	2	1	18
TOTAL	3	2	9	2	6	8	43	30	5	2	1	111

### *Deaf and Partially Hearing Children.*

The unit for partially hearing children has functioned successfully during the year. In addition there were eighteen children with hearing aids at ordinary schools, who were seen regularly by medical officers and peripatetic teachers.

Increasingly the children have been fitted with the post aural hearing aids.

### *Physically Handicapped Children.*

Forty-eight children at ordinary schools were classified with some defect. Six of the children had a severe handicap. A further child with spina bifida cystica attended a playgroup whilst alterations were made at the local school for his reception.



#### *Delicate Children.*

Fourteen children were classified with severe handicaps at ordinary schools, and also seven asthmatics, 24 diabetics, 41 with heart defects and 21 others were noted with mild defects.

#### *Epileptic Children.*

Forty-six children were noted at ordinary schools.

#### *Maladjusted Children.*

The child psychiatrist and his team saw 113 children at hospitals at Bury St. Edmunds and Sudbury. Additional children attended hospitals outside the County.

Many of these referrals were made by the School Health Service with the agreement of the family doctor, and with reports from the School Psychological Service.

The difficulty in obtaining boarding places for older children is reflected in the waiting list.

#### *Autistic Children.*

This classification has been placed separately. Places at boarding school were sought for two severely handicapped autistic children without success.

#### *Educationally Sub-normal Children.*

As in previous years those children not at boarding school were taught in special classes at ordinary schools.

#### *Education in Hospitals.*

Two hundred and forty children resident in West Suffolk received education in hospital for varying periods. Included in this figure are the 22 children who were taught in hospitals outside the County.

#### *Education at Home.*

Eight children were taught at home during the year, one of whom was later placed at a special open air school for physically handicapped children.

### REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

The service has again suffered from reduction in staff. Early in the year a part-time officer resigned on leaving the district and in March a full-time officer resigned.

With the staff who remain the dental service has been maintained in Bury St. Edmunds and most of the southern part of the county, but the schools in the north have not been inspected. Treatment has been given to some children from this area who are able to attend the Bury St. Edmunds clinic.

Up to the time of writing it has not been possible to recruit any additional staff. It is likely that potential school dental officers are hesitating to join a service whose future is in some doubt. Meanwhile the dental health of a number of children is bound to suffer.



## HEALTH EDUCATION IN SCHOOLS

This continued on now well developed lines in schools throughout the county. Films on various health aspects were shown. Three new courses have been incorporated into the curriculum at two secondary schools, viz:

1. Personal Grooming and Hygiene.
2. Junior Mothercraft.
3. Environmental Health.

In addition to films visual aids are supplied by the Health Education Officer, and lessons are supplemented by specialist speakers.

### *Dental Health.*

Demonstrations on "How to brush your teeth", and talks on oral hygiene have been given to infants and juniors and the film "Why Bother?" was shown in a number of junior schools.

All Primary headteachers were circulated samples of posters and literature available to promote dental health, as a result of which 140 posters and 1,828 leaflets/booklets were issued.

### *Smoking and Ill Health.*

Education on this subject commenced in junior schools where emphasis is concentrated on developing lung capacity, breathing exercises and strengthening diaphragmatic muscles. In senior schools, education continues with more emphasis on the disabling effects of bronchitis and heart diseases, and the films used are "The Smoking Machine", "Smoking and You" and "This is your Lung".

### *Visits.*

A number of students from schools have visited the Health Education Section. Children have requested help with projects.

## SWIMMING BATHS

A guide to the treatment of swimming pool water was sent to all schools with swimming baths. Regular inspections of conditions were made and a satisfactory standard achieved.

TABLE I

SELECTIVE MEDICAL INSPECTIONS OF PUPILS ATTENDING  
MAINTAINED PRIMARY AND SECONDARY SCHOOLS

AGE GROUPS INSPECTED (BY YEARS OF BIRTH)	NUMBER OF PUPILS SELECTED	PUPILS FOUND TO REQUIRE TREATMENT, INCLUDING THOSE ALREADY UNDER SUCH TREATMENT		
		FOR DEFECTIVE VISION (excluding squint)	FOR ANY OTHER CONDITIONS	TOTAL INDIVIDUAL PUPILS
1965	62	3	24	26
1964	—	—	—	—
1963	—	—	—	—
1962	—	—	—	—
1961	—	—	—	—
1960	—	—	—	—
1959	—	—	—	—
1958	—	—	—	—
1957	—	—	—	—
1956	1,005	108	55	160
1955 and earlier	624	84	31	112
TOTAL	1,691	195	110	298

TABLE II  
OTHER INSPECTIONS

Number of Special Inspections	.. ..	661
Number of Re-inspections	.. ..	<u>1,408</u>
TOTAL		<u><u>2,069</u></u>



**TABLE III**  
**RETURN OF DEFECTS FOUND AT SPECIAL INSPECTIONS**  
*(including defects already under treatment or observation)*

DEFECT OR DISEASE	SPECIAL INSPECTIONS	
	Number of Defects	
	Requiring Treatment	Requiring observation only
Skin .. ..	9	1
Eyes — Vision .. ..	107	29
Squint .. ..	11	4
Other .. ..	5	1
Ears — Hearing .. ..	15	56
Otitis Media .. ..	—	—
Other .. ..	2	—
Nose and Throat .. ..	2	2
Speech .. ..	27	40
Lymphatic Glands .. ..	—	—
Heart .. ..	11	2
Lungs .. ..	22	—
Developmental — Hernia .. ..	—	—
Other .. ..	2	2
Orthopaedic — Posture .. ..	—	—
Feet .. ..	5	3
Other .. ..	13	4
Nervous System — Epilepsy .. ..	10	4
Other .. ..	6	2
Psychological — Development .. ..	10	12
Stability .. ..	14	18
Abdomen .. ..	4	4
Other .. ..	9	—

TABLE IV  
DENTAL INSPECTION AND TREATMENT

(1) Number of pupils inspected by the Authority's dental officers —									
(a)	At Periodic Inspections	..	..	..	..	..	..	..	11,924
(b)	At Specials	..	..	..	..	..	..	..	<u>269</u>
								TOTAL	<u>12,193</u>
(2)	Numbers offered treatment	..	..	..	..	..	..	..	3,603
(3)	Number actually treated	..	..	..	..	..	..	..	1,783
(4)	Attendances made by pupils for treatment	..	..	..	..	..	..	..	3,828
(5)	Half-days devoted to: Inspection	..	..	..	..	..	..	..	104
	Treatment	..	..	..	..	..	..	..	<u>832½</u>
								TOTAL	<u>936½</u>
(6)	Fillings — Permanent teeth	..	..	..	..	..	..	..	1,601
	Temporary teeth	..	..	..	..	..	..	..	<u>1,346</u>
								TOTAL	<u>2,947</u>
(7)	Extractions — Permanent teeth	..	..	..	..	..	..	..	173
	Temporary teeth	..	..	..	..	..	..	..	<u>695</u>
								TOTAL	<u>868</u>
(8)	Administration of General Anaesthetics	..	..	..	..	..	..	..	258
(9)	Orthodontics: (a) Cases commenced during year	..	..	..	..	..	..	..	10
	(b) Cases completed during year	..	..	..	..	..	..	..	6
	(c) Cases discontinued	..	..	..	..	..	..	..	—
	(d) Appliances fitted	..	..	..	..	..	..	..	16
(10)	Number of dentures fitted	..	..	..	..	..	..	..	2









