[Report 1952] / School Medical Officer of Health, Westmorland County Council.

Contributors

Westmorland (England). County Council.

Publication/Creation

1952

Persistent URL

https://wellcomecollection.org/works/mqkvgkfa

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection 183 Euston Road London NW1 2BE UK T +44 (0)20 7611 8722 E library@wellcomecollection.org https://wellcomecollection.org 13117



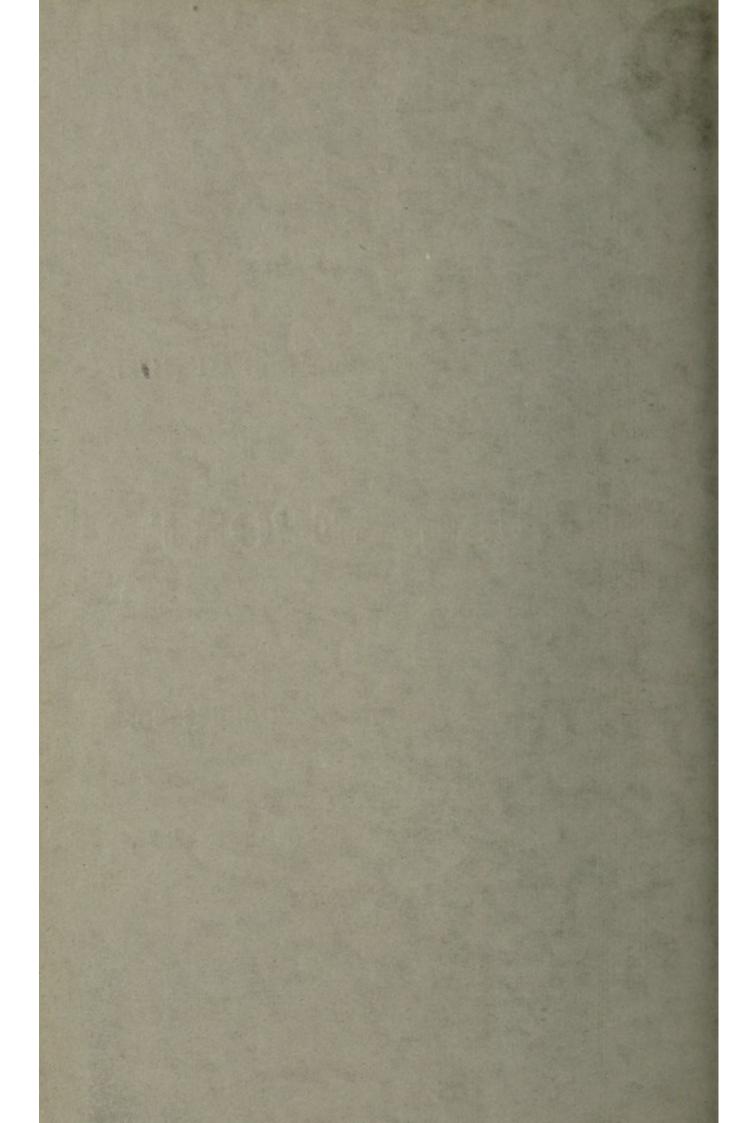
WESTMORLAND COUNTY COUNCIL

ANNUAL REPORT

OF THE

School Medical Officer

THE YEAR 1952





WESTMORLAND COUNTY COUNCIL

ANNUAL REPORT

OF THE

School Medical Officer

THE YEAR 1952

TROSTER TAUMA

CONTENTS

13:						PAGES
Child Guidance .		· Andrew	ibon.	india.	1200	7
Diphtheria Immunisation			de la seconda			9—10
Handicapped Pupils				100 kg	9.191.	9
Introduction .				- coils		5
Milk in Schools Scheme						6
Minor Ailments .						8
Nose and Throat Conditions						7
Orthopædic Scheme						8
Senior Dental Officer's Repo	ort	danis,	O INA	in a street		11—12
Skin Diseases .						8
Statistical Tables .	enbary.		of Silver	· All All		13—21
Staff and Consultants						4
Verminous Infestation						6—7
Visual Defects—Treatment						10

STAFF OF THE SCHOOL HEALTH SERVICE

School Medical Officer—John A. Guy, M.D., D.P.H.

Assistant School Medical Officer— F. M. Taylor, M.R.C.S., L.R.C.P.

Senior Dental Officer—J. Irvine, L.D.S.

Assistant School Dental Officers-

A. S. Carter, M.R.C.S., L.R.C.P., L.D.S. E. H. Seabury, L.D.S., (Commenced 1-9-52)

Orthopaedic Nurse-Mrs. D. Williams, S.R.N.

SPECIAL CLINICS AND CONSULTANTS

Diseases of the Eye—
W. B. Brownlie, F.R.C.S., Underwood, Heversham.

Diseases of the Chest—Dr. J. Munro Campbell, Consultant Chest Physician, Meathop Sanatorium. Dr. W. Hugh Morton, Consultant Chest Physician, Chest Centre, Carlisle.

Consulting Psychiatrist—Dr. D. H. H. Thomas, Medical Superintendent, Royal Albert Hospital, Lancaster.

COUNTY HALL, KENDAL,
October, 1953.

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

ANNUAL SCHOOL REPORT

I have the honour to present the Annual Report on the working of the School Health Service for the year 1952.

During the past year there were no departures of any moment from the routine of previous years. The general nutrition and well-being of the school-children has been maintained.

The Medical staff remains constant with one Medical Officer, one Assistant Medical Officer and general practitioners giving part-time assistance. The Dental staff was augmented by one Assistant Dental Officer.

The prevalence of infectious disease has shown no departure from normal. The county has remained free from outbreaks of diphtheria. A few cases of poliomyelitis have occurred, but have not necessitated any unusual measures being taken.

The position with regard to the ascertainment of handicapped pupils, and particularly with mentally subnormal pupils remains unsatisfactory. With the staff constituted as it is at present it is not possible to do more than confine the ascertainment to the worst or most pressing cases.

In conclusion, the body of the Report has been prepared on the usual lines and the various statistics required by the Ministry of Education are given.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

JOHN A. GUY,

School Medical Officer.

Milk in Schools Scheme

Although it was found possible to arrange for all schools to be supplied with milk under this scheme the position cannot be regarded as entirely satisfactory until all supplies are delivered in one-third pint bottles, and all milk is derived from Tuberculin Tested herds, or has been pasteurised.

Designation of m	Designation of milk supplied.							
Milk from Atte	sted			18				
Tuberculin Tes	ted				59			
Pasteurised		00		1	33			
Undesignated				٠	I			
na con participation					-			
					III			

No. of schools taking milk in bulk, 40.

By arrangement with the Council's Sampling Officer milk supplied to schools is submitted to bacteriological and pathological examination periodically, and it is regrettable to have to record that out of 65 samples taken 37 were unsatisfactory, due, in 34 of the cases, to the presence of bacillus coli.

Infestation (Uncleanliness)

During the past year 25,817 examinations were carried out by the District Nurses, and the number of children found to be infested with lice or nits was 210, compared with 168 during the previous year.

The following Table shows the incidence of infestation during the past 10 years:—

	No. o	f examinations	No	. of children	Per cent. of children				
Year	for	uncleanliness.	for	and unclean.		found unclean.			
1943		32,561		883		15.2%			
1944		32,224		600		10.2%			
1945		29,210		708		8.4%			
1946		24,680		629		7.5%			
1947		23,390		536		6.3%			
1948		13,436		595		6.7%			
1949		24,797		468		5.2%			
1950		15,679		228		3.5%			
1951		22,254		168		2.2%			
1952	0	25,817		210		2.6%			

The numbers of individual pupils found unclean are expressed in the right-hand column of the foregoing Table as a percentage of the number of pupils on the registers at the end of the respective years.

The high incidence during the war years is now happily a matter of history, but it is regrettable to note that the steady fall in the percentage of children found to be infested has been arrested and a slight deterioration is now recorded.

Nose and Throat Conditions

Nose and throat conditions, usually the enlargement of tonsils and adenoids, were third in the list of defects found at school medical inspection to require treatment, and it is interesting to note that although 71 pupils were referred for treatment for this class of defect, evidence is available to show that no less than 271 children received operations or other treatment for this condition during the year. This no doubt reflects, to a great extent, the reduction which has taken place recently in the long waiting list for tonsil and adenoid operations.

Children with special defects or abnormalities are referred to the hospitals at Kendal, Lancaster and Carlisle to be seen by the consulting surgeons. This procedure has been helpful in dealing with such cases as chronic otorrhœa, increasing deafness, infected sinuses. The following list illustrates the type of case referred:—

Condition.	No. of children referred.
Otorrhœa	I Market Mar
Defective hearing	13
Epistaxis	it is the said I among sends
Frequent colds and sinusitis	8
Enlarged tonsils and adenoids wi	ith
other symptoms	17
Scarring of ear drums	by bounds 2 , lastquals
Nasal discharge	8 8 12 444 121

Speech Therapy

Owing to the impossibility of securing the services of a Speech Therapist, no treatment was carried out during the year.

Child Guidance Clinic

By agreement with the Manchester Regional Hospital Board the services of Dr. D. H. H. Thomas, Medical Superintendent of the Royal Albert Hospital, Lancaster, have been made available as Consultant Psychiatrist, and from the beginning of October, 1951, the clinic has been held weekly at the Stramongate School Clinic instead of fortnightly as hitherto.

Number	of	clinics held	duri	ng 1952	 	 	31
,,		attendance	S		 	 	125
or original		cases			 	 	33

Minor Ailments

In Kendal the Stramongate School Clinic has been held daily throughout the term for the treatment of children suffering from minor ailments. The commoner ailments have been multiple septic sores, minor injuries, impetigo contagiosa, other skin diseases, and minor eye defects. In addition to the treatment of minor defects, mothers have frequently sought the advice of the Clinic Doctor on points of health and general hygiene.

Skin Diseases

As will be seen from Table IV on page 15, the incidence of skin diseases is no longer a serious problem amongst the school-children in the County; the high incidence of scabies prevalent in war-time is now a thing of the past, and the diagnostic facilities of the Mycological Department of the London School of Hygiene and Tropical Medicine, together with the installation of a Woods' Light at the School Clinic, has enabled the spread of ringworm infection to be controlled.

Orthopædic Scheme

All cases within reasonable reach of Kendal are referred to the Orthopædic Out-Patient Department at the Westmorland County Hospital, and Mr. Kitchin, the Orthopædic Specialist, has undertaken to arrange for remedial exercises, etc., and follow-up treatment of these cases, thus relieving Nurse Williams, the Orthopædic after-care sister, and enabling her to give more time to her tuberculosis health visiting duties.

Dr. Bucknell, the Medical Superintendent of the Ethel Hedley Hospital, continued to hold the orthopædic clinics at Windermere, Kirkby Stephen and Penrith.

Dr. Bucknell's Clinics	:-				
Number of clinics h	eld .		 	 	16
,, attendar	ices .		 	 	260
,, new case	es seen .		 	 	90
Home Visits by Ort	hopædic	Nurse	pin	 0.00	163

No figures relating to the attendance of school-children at the Westmorland County Hospital Orthopædic Clinics, or the admission of orthopædic cases to that Hospital, are available, although reports are readily obtainable from the Orthopædic Specialist on any new case referred to him through the School Health Service.

Number of children admitted to Ethel Hedley Hospital ...

Handicapped Pupils

Under the Education Act, 1944, it is the duty of the Local Education Authority to ascertain what children require special educational treatment. These children are usually reported by the school teachers or the Educational Adviser to the School Medical Officer, who examines them and reports to the Local Education Authority. The number of new cases examined during the year was 31 and the Table below shows their classification under the headings given in the Handicapped Pupils Regulations, 1945:—

· Category.	No	ascertained.	
Partially deaf			I .
Educationally subnormal			18
Physically handicapped and educati	onally	sub-	
normal			I
Deaf and educationally subnormal			I
Delicate			3
Physically handicapped			4
Ineducable (Section 57)			6
Maladjusted			I
Found on examination not to be "ha	ndicapp	ed''	6

The object of these examinations is to place the handicapped child in a school or class where he will receive special education calculated to make the best use of his limited capabilities, or to remove from school these children whose mental condition is such that they cannot benefit from any form of education, but whilst the numbers shown above represent the limit of these cases which can be dealt with by the present staff, they in no way represent the extent of the problem. The position with regard to the placing of pupils in special boarding-schools is far from satisfactory, and many more such schools will require to be built before the problem is solved.

Diphtheria Immunisation

Immunisation against diphtheria, previously the responsibility of the County Council and District Councils concurrently, is now the responsibility of the County Council alone. The treatment is given either by the County Council medical staff or the general practitioners at the choice of the parents at or before the first birthday, whilst all parents are urged to consent to their children receiving a reinforcing dose at five years old.

The success of these scheme may be judged from the fact that there were no cases of diphtheria notified among residents of the County for the fifth consecutive year, compared with 62 notifications and six

deaths in 1942, for example. Details of children immunised during the year are given below:—

Primary Immun	isat	tion:-	-						
Children unde	rı	year	of	age					285
,, aged	I	year							369
,, ,,	2	years	;					10	37
,, ,,	3	,,							14
,, ,,	4	,,				9977			7
" "	5-	9 yea	ars						56
,, ,,	10-	14 ,							8
									-
and the same of th						maille 3	Γotal		776
									-
Reinforcing dose	es:-	-							
Children aged	4	years	3						. 56
,,	5-	9 year	ars						566
,, ,,	10-	-14 ,	,						8
									-
						1	Total		630
									-
					G	rand	Total		1,406

Ultra-Violet Ray Clinics

There are two Ultra-Violet Ray Clinics within the County — one at Kendal and one at Windermere. The following number of school-children were treated:—

Clinic.	1 1 2 3	No.	of children.	No. of attendances.
Kendal			33	222
Windermere			47	351

Treatment of Defective Vision

All school-children found to be suffering from refractive errors were referred to local opticians and, since the inception on 5th July, 1948, of the National Health Service Act, spectacles were supplied under the provisions of that Act. By arrangement with the Local Executive Council, Mr. Brownlie, the Ophthalmologist, continues to hold a session as required at the Stramongate School Clinic.

Children whose eye condition necessitates treatment other than the provision of spectacles are referred to the Ophthalmic Consultants at the Westmorland County Hospital or at the Cumberland Infirmary.

Number	referred	to	Opticians	14		 	255
,,	,,,		Consultant Ey	re Spec	ialists	 	305

THE EDUCATION AREA

County of Westmorland: -

Area				504,917 acres.
Population	(estimated mid-1952)			66,600
Product of	id. Rate for Education	1951-52		£1,880
Number of	Schools—Primary	pf,000		100
	Secondary			11
Number of	Pupils (31.1.52)-Primar	ry	0	6,904
	Second	dary	di	2,615

TREATMENT OF TUBERCULOUS CONDITIONS IN SCHOOL-CHILDREN

Number of children who received in-patient treatment at the following Hospitals:—

Westmorland Sanatorium, Meathop	 	 	I
Stannington Hospital, Morpeth	 	 	I
High Carley Sanatorium	 	 	I
Beaumont Hospital, Lancaster	 	 	2

Now that non-pulmonary tuberculous conditions are dealt with by general surgeons and physicians and do not always come to the know-ledge of the Tuberculosis Officer (Chest-Physician), our knowledge of this type of case is by no means as complete as it was pre-1948. From the aspect of preventive medicine this state of affairs must be regarded as a serious defect in the National Health Service.

REPORT OF THE SENIOR DENTAL OFFICER FOR THE YEAR 1952

Ladies and Gentlemen,

I have the honour to submit the Annual Report on dental inspection and treatment of Primary and Secondary school-childen in the County of Westmorland. The total figures will be found on page 17.

After a period of three years with a reduced staff, it was found possible to appoint one additional dental officer. Mr. Edgar Seabury, L.D.S., commenced duty on 1st September and was put in charge of the Mobile Dental Surgery, to conduct the inspection and treatment of County schools which are not served by clinics. Miss Margaret Dixon was appointed as dental attendant to assist him.

Many of the outlying and isolated schools in our County are wellnigh completely dependent upon the visit of the mobile surgery for treatment, and these schools have suffered most during the period of reduced staff. Consequently there was a very considerable amount of treatment required, as the benefits of the regular treatment provided before 1948 had been largely lost. It will be some time before this leeway can be overcome, as a much longer time is required for treatment at each individual school.

As a result of the increased length of time between dental officers' visits to schools, many children have sought the services of private practitioners for emergency treatment, and some of these are now having regular treatment through the General Dental Service. An endeavour was made to ascertain how many have done so, and during this year the figure of 694 was reached. The accuracy of this figure is, however, problematic.

During the year under review 71.5% of the children who attend County Primary and Secondary schools were inspected — a total of 6,122 and 2,760 were actually treated. Nearly 5,000 attendances were made by children for treatment. Fillings totalled 3,512 and extractions 3,171. Other operations consisted of 164 scalings, 459 dressings, and 258 applications of Silver Nitrate, gum treatments, etc. 97 visits were made by children for orthodontic treatment, 10 new appliances were provided and two cases were completed. 25 partial dentures were also provided.

In recording my thanks to my colleagues, I should like to pay special tribute to the splendid work done by Dr. Carter, and to his loyalty and conscientiousness at the Kendal clinic. He has done much to promote oral hygiene in his patients by his chairside talks and advice to parents on diet, in addition to his routine operations.

The dental attendants too are due my very best thanks for their faithful services during the year. I am particularly grateful to my own attendant, Mrs. R. Allen, who not only assists me most admirably in the surgery, but undertakes all the clerical duties of the department and the ordering of all stocks of materials, etc.

I should like also to acknowledge my indebtedness to the head teachers who have co-operated so splendidly in the conduct of the school dental service.

> I have the honour to be, Your obedient servant,

> > J. IRVINE,

Senior Dental Officer.

STATISTICAL TABLES

TABLE I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A.—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups.—		
Entrants		1,013
Second Age Group		1,302
Third Age Group		556
Total		2,871
		18 -
Number of other Periodic Inspections		116
the state of the s		_
Grand Total		2,987
B.—OTHER INSPECTIONS.		
Number of Special Inspections	60	234
,, Re-Inspections		2,920

C.—PUPILS FOUND TO REQUIRE TREATMENT.

3,154

Total

Group (1)	visio	defective n (excludi quint). (2)	ing cond	iny of the c itions reco Table IIA (3)	rded	Total individual pupils (4)
Entrants		21	·	82		93
Second Age Group		89		92		164
Third Age Group		37		15		55
		_		_		
Total (prescribed groups	s)	147		189		312
Other Periodic Inspectio	ns	3		10		12
		_		-		_
Grand Total		150		199		324
		_				_

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1952.

TABLE II

	230000	Special In	spections		
	SKOTTAG	No. of	defects	No. of	lefects
Defe Coo		b	Requiring to e kept under observation, but not requiring treatment.	be	Requiring to kept under observation, but not requiring treatment.
	(1)	(2)	(3)	(4)	(5)
4 5	Skin Eyes—	7	20	3	2
	a. Vision	150	52	85	15
	b. Squint	9	10	6	-
-	c. Other	I	12	2	2
6	Ears—	6		College Bris	
	a. Hearing b. Otitis Media	6	20	4	4
	c. Other	6	2 7	2	1
7	Nose or Throat	51	184	4 20	23
8	Speech	I	25	I	
9	Cervical Glands	2	47	_	3 8
10	Heart and	1000	7,		13 11
	Circulation	I	45	_	3
II	Lungs	17	61	2	3 8
12	Developmental—				
	a. Hernia	I	5		-
	b. Other	6	13	4	I
13	Orthopædic—	Blagor aning	Name of the last	Section 1	1
	a. Posture	3	15	I	-
	b. Flat foot	33	52	9	5
	c. Other	15	143	17	5 6
14	Nervous system—				make Till
	a. Epilepsy	_	5	_	I
	b. Other	2	7	-	
15	Psychological—	- 15 11 4 150			Sale and
	a. Development	I	7	-	-
	b. Stability	-	13	1	I
16	Other	23	80	9	7
	the state of the s				The Control of the Co

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups	Number of Pupils Inspected (2)	A (G	00D) % of col. 2	No.	FAIR) % of col. 2	No.	% of col. 2
Entrants	1013	557	55.0	438	43.2	18	1.8
2nd Age Group	1302	768	59.0	516	39.6	18	1.4
3rd Age Group	556	322	57.9	232	41.7	2	0.4
Other periodic inspections	116	65	56.0	51	44.0	and a	0 -
Total	2987	1712	57.3	1237	41.4	38	1.3

TABLE III INFESTATION WITH VERMIN.

(i)	Total number of examinations in the schools by the	
	school nurses or other authorised persons 25,	817
(ii)	Total number of individual pupils found to be infested	210
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 [2], Education Act,	
	1944)	42
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 [3], Education Act,	
	1944)	16

TABLE IV TREATMENT TABLES.

GROUP 1.—DISEASES OF THE SKIN (excluding Uncleanliness, for which see Table III).

Number of cases treated or under treatment during the year (a) By the Authority. (b) Otherwise.

Ringworm—(a) Scalp		I		-
(b) Body		3		-
Scabies		I		-
Impetigo		14	7.0	_
Other skin diseases	MI. 6 309	31	p spand so	4
		directi		_
Total		50		4

GROUP 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	SQUINT.			
	Num	ber of cases d	lealt with.	-
	(a) By the	e Authority.	(b) Otherw	ise.
External and other, excluding	errors			
of refraction and squint		30	4	
Errors of refraction (including	squint) 3	341	61	
	_		-	
Total	3	371	65	
	_		_	
Number of pupils for whom s	pectacles			
were	CE TO 44/10			
(a) Prescribed	2	222	36	
(b) Obtained	1	192	14	
		015	Shulfallfarer	
GROUP 3.—DISEASES			AR, NOSE	
AN	D THROA	Г.		
	Nu	imber of cases	s treated.	
	(a) By th	e Authority.	(b) Otherw	rise.
Received operative treatment	THE MOR			
(a) for diseases of the ea	ar	-a bo hada	II	
(b) for adenoids and	chronic			
tonsilitis	diam. but	- 10 10 2000	258	
(c) for other nose and	throat			Tage.
conditions	10	- ward bridge	13	
Received other forms of treat	ment	13	14	
		-introduce	to to the	
Total	1	13	296	
		-	10	
anarin . anarrann				
GROUP 4.—ORTHOPÆ				
(a) Number treated as in-p	patients in	hospitals or	hospital	
		30.		9
(b) Number treated otherwis				
departments				352
GROUP 5.—CHILI	GUIDANO	CE TREATM	ENT	
			Section 10	
Number of pupils treated at				22
(a) In the Authority (b) Elsewhere				33
(b) Elsewhere				1
GROUP 6	-SPEECH	THERAPY.	The theory	
Number of pupils treated by				
(a) By the Authority				Nil.
(b) Otherwise				Nil.
		The same of the sa		75-500-

GROUP 7.—OTHER TREATMENT GIVEN.

Number of cases treated.

	(a) By	the Authority.	(b) Otherwise.
Miscellaneous Minor Ailments		317	Nil.
Other Conditions		Nil.	20

Note:— It should be observed throughout Table IV, above, that the figures given for treatment other than that carried out under the Authorities arrangements can be regarded only as incomplete. Information received from hospitals varies considerably, whilst little or no information is available regarding treatment carried out in Private Nursing Homes or by general practitioners.

TABLE V

DENTAL INSPECTION AND TREATMENT.

(1) Number of Child	lren who were insp	ected by th	ne Autho	rity's	Dental
Officers:—					
(a) Periodic	c Age Groups				5,967
(b) Specials					155
(c) Total (Periodic and Spec	ials)			6,122
					-
(2) Number found t					4,148
	for treatment				3,810
	treated				2,760
(5) Attendances made	de by pupils for tr	eatment			4,968
(6) TTalf dama	Inspection	98	1		
(6) Half-days devoted to	Treatment		}	Total	914
devoted to	Treatment	816)		
(Permanent teeth	2,933	7		
(7) Fillings			}	Total	3,512
-	Temporary teeth	519)		
	Permanent teeth	2.416)		
(8) Number of teeth filled			} :	Γotal	2,907
teeth fined	Temporary teeth	491)		
(Permanent teeth	775)		
(9) Extractions	Permanent teeth Temporary teeth	113	} :	Total	3,171
	Temporary teeth	2,396)		
(10) Administration	of general anæsth	etics for ex	traction		395
(10) Hummstration	or general anasth	02105 101 02	ti de cion	•	393
(II) Other	Permanent teeth		1		
operations	Temporary teeth	2=0	}	Total	1,003
	remporary teeth	250)		

TABLE VI.—RETURN OF HANDICAPPED PUPILS.

Total r—9	(ro)	4	15
(9) Epi- leptic	(6)	I	н
sub- tal	(8)	1	in the same
(7) Education- ally sub- normal (8) Mal- adjusted	(2)	-	Io
cate sically apped	(9)	NA HOU	9
(5) Deli (6) Phy Handic	(5)	1	H
af rtially af	(4)	1	н
(3) Deaf (4) Partially deaf	(3)	toolie	1
Blind Partially sighted	(2)	and la	and all
(r) Bl (2) Pa sig	Ξ	1	an incorporation
		In the Calendar Year:— A. Handicapped Pupils newly placed in Special Schools or Homes	B. Handicapped Pupils newly ascertained as requiring education at Special Schools or Boarding in Homes

Total r—9	(ro)	1 23 1	15	1	- 2	+
(9) Epi- leptic	(6)	111	11"	h 10 11 1	1 +	
Education- ally sub- normal Mal- adjusted	(8)	111	111	1	1 . 1	
(7) Educat ally sul normal (8) Mal- adjuste	3	1 " 1	H. 1 4	1 1	1 01	1
(5) Delicate (6) Physically Handicapped	(9)	1 4 1	11"	1 1	1	,
(5) De (6) Ph Handi	(5)	111	H H	1 1	1 1	
Deaf Partially deaf	(4)	0	118	1 1	Н	
(3) Deaf (4) Partii deaf	(3)	"	11 %	1 1	1 1	
Blind Partially sighted	(2)	0	1 0	1	1 1	
(r) Bi (2) Pa sig	Œ	1	11 +	1 1	1 1	
	On or about 31st December:— C. Number of Handicapped Pupils from the area—	(i) attending Special Schools as Day Pupils Boarding Pupils Attending Independent Schools (under arrangements made by	the Authority) Total (C)	D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944:— (a) In hospitals	E. Number of Handicapped Pupils from the area requiring places in Special Schools or Homes but remaining unplaced	

TABLE VII

1.—STAFF OF THE SCHOOL HEALTH SERVICE (excluding Child Guidance).

School Medical Officer ... JOHN ALLAN GUY.
Senior Dental Officer ... JOHN IRVINE.

	Number		Aggregate staff in terms of the equi- valent number of whole-time officers			
	2		0.9			
General Practitioners working part-						
	9		0.1			
	3		2.9			
pists,						
	-					
	41		2.6			
	-		-			
	3		2.9			
	part apists,	2 part 9 3 apists, — 41 —	2 part 9 apists, — 41 —			

II.—NUMBER OF SCHOOL CLINICS (i.e., premises at which clinics are held for school-children) provided by the Local Education Authority for the medical and/or dental examination and treatment of pupils attending maintained Primary and Secondary schools.

Number of School Clinics ... 3 + 1 Dental Van and 1 temporary

Dental Clinic.

III.—TYPE OF EXAMINATION AND/OR TREATMENT provided, at the School Clinics returned in Section II, either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the Clinic.

Е	xamination and/or treatment.		n trea	l Clinics (i.e., premises) tment is provided— under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals.
	(1)	(2)		(3)
A.	Minor ailment and other non-specialist examina-			
	tion or treatment	I		_
B.	Dental	5		-
C.	Ophthalmic*	I		_
D.	Ear, Nose and Throat	_		_
E.	Orthopædic	-		3
F.	Pædiatric†	-		-
G.	Speech Therapy	-		-
H.	Others (specify)	-		-

^{*} Arrangements made with the Supplementary Ophthalmic Service are returned in Column (2).

IV.—CHILD GUIDANCE CLINICS.

Number of Child Guidance Centres provided by the Authority.

Staff of Centres—		(a) Number.	(b) Aggregate in terms of the equivalent number of whole-time officers.		
Psychiatrists		1 -1	One session		
Educational Psychologists		1 5	weekly.		
Psychiatric Social Workers		Nil.	Nil.		
Others (specify)—					
Mental Health Worker		I	One session weekly plus Home Visits.		

The Psychiatrist is made available by the Manchester Regional Hospital Board.

[†] Clinics for children referred to a specialist in children's diseases.

