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WESTMORLAND COUNTY COUNCIL

ANNUAL REPORT

OF THE

Principal School Medical Officer

THE YEAR 1955

Westmorland Gazette, Ltd., Printers, Kendal

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STAFF OF THE SCHOOL HEALTH SERVICE

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

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

Principal School Dental Officer—J. Irvine, L.D.S.

School Dental Officers—

A. S. Carter, M.R.C.S., L.R.C.P., L.D.S.

A. Parkin, B.D.S. (Resigned 30-4-55).

I. Fletcher, B.D.S. (Commenced 12-9-55).

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

Speech Therapist—Hazel J. Smith, L.C.S.T.

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. R. C. Cunningham, Medical Superintendent, Royal Albert Hospital, Lancaster.

COUNTY HALL, KENDAL,

September, 1955.

To the Chairman and Members of the Education Committee.

ANNUAL REPORT, 1955.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report of the working of the School Health Service for the year 1955.

The form of the report is largely the same as in previous reports during the past few years.

The Medical Staff remains constant with one Medical Officer and one Assistant Medical Officer and general practitioners giving part-time assistance

The Dental Staff has remained constant during the past year with one Principal Dental Officer and two assistants.

This has been a quiet year so far as Infectious Disease is concerned. The greatest number of cases was provided by a small outbreak of measles. Whooping cough was the next commonest infectious disease. Poliomyelitis provided five cases. Again the County has remained free from any outbreaks of diphtheria.

The B.C.G. Vaccination as reported on page 11 has been commenced and in the meantime it is confined to children between 13 and 14 years of age. A start was made in Kendal. Next year we hope to extend this service throughout the County.

A great deal of public attention has been devoted during the past few years to the subject of spastics. During the past year, however, there were no children of school age so handicapped as to merit special schooling on this account. One epileptic child was recommended for admission to a Special School. Owing to the efficiency of modern treatment epilepsy does not constitute a major problem with regard to the provision of Special Schools.

On page 5 an interesting table is shown concerning children found to be verminous. This has shown a steady decline since the year 1946 when 7.5 per cent. children were infested to 1955 when only 1.1 per cent. were infested.

I have the honour to be,
Ladies and Gentlemen,
Your obedient Servant,
JOHN A. GUY,
Principal School Medical Officer

MILK IN SCHOOLS SCHEME.

On 1st July, 1954, the Ministry of Education intimated that full responsibility for the supply of milk under this Scheme would rest with Local Education Authorities from 1st October, 1954, from which date the arrangements, under which payment for the milk was made by the Ministry of Food, came to an end.

Arrangements with suppliers existing at that date continued unchanged until on 1st April, 1955, the Local Education Authority entered into contracts with new suppliers. The responsibility of the Principal School Medical Officer for approving the source of supply remains unaffected and it is gratifying to be able to report that undesignated is no longer supplied to any maintained school in the county, although 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 milk supplied.	No. of schools.
Milk From Attested herds	18
Tuberculin Tested	63
Pasteurised	31
	112

No. of schools taking milk in bulk, 39.

By arrangement with the Council's Sampling Officer, milk supplied to schools is submitted to bacteriological and pathological examination periodically, and out of 78 samples taken 57 were unsatisfactory and in 2 cases the test was void. Of the 24 samples classified as unsatisfactory by the presence of B. Coli., 8 were found to be satisfactory on the Methylene Blue Test.

Infestation (Uncleanliness)

During the past year 26,883 examinations were carried out by the District Nurses, and the number of children found to be infested with lice or nits was 98 compared with 120 during the previous year.

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

Year.	No. of examinations for uncleanliness.	No. of children found unclean.	Per cent. of children found unclean.
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	25,817	210	2.6%
1953	26,673	177	1.8%
1954	27,362	120	1.5%
1955	26,883	98	1.1%

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.

It is pleasing to note that the steady fall in the percentage of children found to be infested, which was arrested in 1952, is continuing.

Nose and Throat Conditions

The enlargement of tonsils and adenoids were second in the list of defects found at school medical inspection to require treatment, and it is interesting to note that although 30 pupils were referred for treatment for this class of defect as a result of periodic medical inspection, evidence is available to show that no less than 164 children received operative treatment for this condition during the year. This no doubt reflects, to some extent, the reduction which has taken place recently in the long waiting list for tonsil and adenoid operations, the fact that patients are now usually referred to hospital only after repeated observation at school medical inspection, and also that many children are referred by their family doctors.

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 otorrhoea, increasing deafness, infected sinuses. The following list illustrates the type of case referred :—

Condition.	No. of children referred.
Otorrhoea	3
Defective hearing	16
Frequent colds and sinusitis and catarrh	4
Enlarged tonsils and adenoids with other symptoms	18
Nasal or ear discharge	2

Speech Therapy

Number of children who have attended for Speech Therapy	98
Number of attendances made	2,033
Number of sessions held	320

The greater part of the time of the Speech Therapist is still devoted to work in Kendal, but clinics have also been started in Calgarth, Milnthorpe, Levens and Heversham, and it is hoped to extend the service to the north of the County during 1956.

Child Guidance Clinic

By agreement with the Manchester Regional Hospital Board the services of the Medical Superintendent of the Royal Albert Hospital, Lancaster, have been made available as Consultant Psychiatrist, and Dr. R. C. Cunningham has continued to undertake this work. Whilst the aim is to hold the clinic weekly at the Stramongate School Clinic, it has not been found possible to adhere strictly to this arrangement.

Number of clinics held during 1955	29
Number of attendances	63
Number of 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 of page 17, 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.

School Clinics.

The Ministry has requested that this Report should give the location and details of the sessions held at the School Clinics recorded in Part III of Table VII on page 23, and the relevant information is given below:—

Location.	Types of Clinics.	Frequency of Sessions.
Stramongate Clinic, Kendal ...	Minor ailments ...	Daily
	Dental treatment ...	Daily
	Ophthalmic examination ...	Fortnightly
	Speech Therapy ...	Alternate days
	Child Guidance ...	Weekly
U.D.C. Offices, Ambleside ...	Dental ...	As required
Old First Aid Post, Appleby ...	Dental ...	As required
School Clinic,* Penrith ...	Dental ...	As required

* This clinic belongs to the Cumberland County Council, from whom the Westmorland L.E.A. rent it as required.

Orthopaedic Scheme

All cases within reasonable reach of Kendal are referred to the Orthopaedic Out-Patient Department at the Westmorland County Hospital, and Mr. Kitchin, the Orthopaedic Specialist, has undertaken to arrange for remedial exercises, etc., and follow-up treatment of these cases, thus relieving Nurse Williams, the Orthopaedic 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 orthopaedic clinics at Windermere, Kirkby Stephen and Penrith.

Dr. Bucknell's Clinics:—

Number of clinics held	18
Number of attendances	271
Number of new cases seen	51
Home Visits by Orthopaedic Nurse	286
Number of children admitted to Ethel Hedley Hospital...	16

Number of children known to be attending other Out-Patient Departments :—

Westmorland County Hospital	170
Cumberland Infirmary, Carlisle	46
Lancaster Royal Infirmary	1

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 55 and the Table below shows their classification under the headings given in the Handicapped Pupils Regulations, 1953 :—

Category.	No. of pupils ascertained and recommended for admission to Special School.
Deaf	1
Delicate	2
Partially Sighted	1
Educationally Sub-normal	13
Epileptic	1

In addition 1 child was found to be ineducable and recommended for action under Section 57 (3) Education Act, 1944. 36 children were found on examination not to require education in a special school.

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 still not satisfactory, but the opening of Ingwell Special School by the Cumberland Local Education Authority, and of Eden Grove Special School as a private venture, has enabled places to be found for most of the boys whose parents are willing for them to attend.

Comparable facilities for girls are an urgent necessity.

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 schemes may be judged from the fact that there were no cases of diphtheria notified among residents of the County for the eighth consecutive year, compared with 62 notifications and six deaths in 1942, for example. Details of children immunised during the year are given below :—

Primary Immunisation :—	
Children under 1 year of age	306
„ aged 1—4 years	316
„ „ 5—14 years	90
Total ...	712
Reinforcing doses :—	
Children aged 1—4 years	52
„ „ 5—14 years	597
Total ...	649
Grand Total ...	1361

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.	No. of children	No. of attendances.
Kendal	27	193
Windermere ...	34	321

Treatment of Defective Vision

All school-children found to be suffering from refractive errors are referred for examination under the Supplementary Ophthalmic Service administered by the Executive Council under the National Health Service Act, and spectacles, where necessary, are 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	92
Number referred to Consultant Eye Specialists ...	269

THE EDUCATION AREA

County of Westmorland :—

Area	504,917 acres.
Population (estimated mid-1955)	66,800
Estimated Product of 1d. Rate, 1955-56 ...	£1,940
Number of Schools—Primary	99
Secondary	12
Number of Pupils (31-1-55)—Primary ...	7,063
Secondary ...	2,603

TUBERCULOUS CONDITIONS IN SCHOOL-CHILDREN.

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

Westmorland Sanatorium, Meathop	1
Wrightington Hospital	1
Beaumont Hospital, Lancaster	3

Now that non-pulmonary tuberculous conditions are dealt with by general surgeons and physicians and do not always come to the knowledge 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.

B.C.G. VACCINATION OF SCHOOL-CHILDREN.

During the Spring of 1955 it was found possible to commence the B.C.G. Vaccination of Schoolchildren between their thirteenth and fourteenth birthdays in accordance with the suggestions of Ministry of Health Circular 22/53. It was felt desirable in the first instance to make a commencement in Kendal, and of the 100 children presenting themselves for treatment with the written consent of the parents, 34 were found to have been subject to an earlier infection; 62 were vaccinated, 61 successfully; four children failed to complete the procedure owing to absence from school at one or other of the stages.

Owing to the fact that the tests must be read at 72-hour intervals and that for practical purposes the actual vaccination can be carried out only on Thursdays, owing to the restricted life of the vaccine, the arrangement of a programme of this work so that it does not interfere seriously with other arrangements such as regular clinics, Committee meetings, etc., nor clash with school holidays, functions and examinations, is a matter of the utmost difficulty, and has become increasingly so with the advent of the poliomyelitis vaccination campaign, of which details will appear in the Report for 1956.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER FOR THE YEAR 1955.

Ladies and Gentlemen,

I have the honour to submit the Annual Report on dental inspection and treatment of Primary and Secondary School children in the County of Westmorland. The total figures will be found in Table V on page 20.

Mr. A. Parkin, B.D.S., resigned in April and the post was vacant until September, when Mr. Ian E. Fletcher, B.D.S., commenced duty with the Mobile Dental Surgery, so once again we have been operating during the year with a reduced staff. The position was further aggravated by my illness which necessitated my absence from duty during the month of October and a reduction in my Surgery time until the end of the year.

6,713 children were seen at periodic inspections and 110 specials visited the clinics, 4,225 were found to require treatment and 4,056 were offered treatment. The number actually treated during the year was 2,507, and 4,361 attendances were made by children to the clinics. A total of 2,881 filllings were inserted in permanent and temporary teeth and general anaesthetics were administered for extractions on 560 occasions. The appointment of Dr. M. A. Hughes as anaesthetist has greatly simplified the arrangement of gas sessions, and her services are highly appreciated. Other operations included 185 scalings, 466 dressings, 870 applications of silver nitrate on temporary teeth, and 20 dentures were provided.

During the year 386 visits were made in connection with orthodontic treatment. Forty-eight new appliances were inserted and 24 cases were completed. All of these were removable appliances, such as inclined planes, oral screens, appliances with finger springs, etc. Much successful treatment has been accomplished. Every endeavour is made to see that parents understand their responsibility and that their co-operation is most necessary in orthodontic treatment. In spite of this, however, there are always cases where parental interest is totally lacking and no attempt is made to ensure that the appliances are worn.

A survey of the incidence of dental caries on the lines of that undertaken by the Ministry of Education in 1953 was carried out by me during the year. The D.M.F. system of caries estimation was employed, i.e., the number of D = decayed, M = missing and F = filled teeth found in the mouth of each child examined.

The survey in Westmorland was undertaken during the Spring and early Summer of this year, i.e., exactly two years after the Ministry Survey. The ending of sweet rationing, the return to white bread and the use of unlimited sugar could therefore have played a very considerable part in the increased incidence of dental caries which has been noted as a result of this survey.

Area.	Number of Children Examined.	Number of D.M.F. Teeth.	Number of Children Showing no D.M.F. Teeth.	Percentage of Children Showing no D.M.F. Teeth.	Average Number of D.M.F. Teeth per Child.
Five-year Age Group.					
Kendal ...	65	434	4	6.15	6.67
Lakes and South Westmorland ...	97	497	12	12.38	5.12
North Westmorland	95	554	9	9.35	5.83
All Areas ...	257	1,485	25	9.72	5.8
Twelve-year Age Group.					
Kendal ...	95	574	6	6.31	6.0
Lakes and South Westmorland ...	107	523	5	4.67	4.91
North Westmorland	70	262	12	17.1	3.78
All Areas ...	272	1,359	23	8.45	5.0

It will be seen from these figures that Kendal children, in both age groups, were distinctly worse than in others parts of the county. It was noted, however, that in the 12-year age group the boys were much better than the girls. The percentage of boys showing no

D.M.F. teeth was 16.6 and the average number of D.M.F. teeth per boy was 4.26 as against 1.54 and 6.89 per girl. These figures were obtained at Kendal Grammar School and Kendal High School respectively.

In North Westmorland the percentage of children in the 12-year age group showing no D.M.F. teeth was much higher than in any other part of the county, while the average number of D.M.F. teeth per child was much lower.

On the other hand, in the five-year age group in North Westmorland the children examined were just about the average for all areas.

The Schools from which the above figures were obtained were representative of urban and rural areas and of Primary, Secondary Modern and Grammar School types.

A comparison of the above figures with those of the Ministry's survey in 1953 show them to be markedly worse. In the five-year age group the percentage of Westmorland children showing no D.M.F. teeth was 9.72 and the average number of D.M.F. teeth per child 5.8 as against 14.8 and 5.1 in the Ministry's corresponding figures. Again, in the 12-year group the Westmorland figures were 8.45 and 5.0 as against Ministry figures of 12.0 and 3.8.

Largely as a result of the survey, a propaganda campaign was instituted in the Autumn and before the end of the year dental films had been shown in several schools, Ministry and Dental Board leaflets distributed, posters issued and talks on dental hygiene given. This was continued during the early months of 1956 and it is hoped that much greater interest in dental health will have been stimulated.

My thanks are again due to all members of the dental staff and to all head teachers for their co-operation in the work of the dental services.

I have the honour to be,

Your obedient servant,

J. IRVINE,

Principal School Dental Officer.

STATISTICAL TABLES.

TABLE I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A.—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected:—	
New Entrants	1,082
Intermediates	852
Leavers	583
Total ...	2,517
Number of other Periodic Inspections	299
Grand Total ...	2,816

B.—OTHER INSPECTIONS.

Number of Special Inspections	145
Number of Re-Inspections	4,091
Total ...	4,236

C.—PUPILS FOUND AT PERIODIC INSPECTIONS TO REQUIRE TREATMENT

Group (1)	For defective vision (excluding squint). (2)	For any of the other conditions recorded in Table IIA. (3)	Total individual pupils. (4)
New Entrants	6 ...	32 ...	38
Intermediates ...	41 ...	19 ...	59
Leavers	19 ...	2 ...	21
Total	66 ...	53 ...	108
Other Periodic Inspections	18 ...	8 ...	26
Grand Total ...	84 ..	61 ...	144

TABLE II

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1955.

Defect Code No.	Defect or Disease.	PERIODIC INSPECTIONS No. of defects Requiring treatment.	PERIODIC INSPECTIONS No. of defects Requiring to be kept under observation, but not requiring treatment.	SPECIAL INSPECTIONS No. of defects Requiring treatment.	SPECIAL INSPECTIONS No. of defects Requiring to be kept under observation, but not requiring treatment.
4	Skin	3	75	—	7
5	Eyes—				
	a. Vision ...	84	117	25	16
	b. Squint ...	4	24	1	—
	c. Other ...	—	13	—	3
6	Ears—				
	a. Hearing ..	3	30	4	8
	b. Otitis Media	—	38	—	2
	c. Other ..	—	2	—	—
7	Nose or Throat ..	23	236	7	13
8	Speech ..	9	13	8	2
9	Cervical Glands ...	2	67	—	5
10	Heart and Circulation ..	—	37	—	4
11	Lungs ..	—	82	—	6
12	Developmental—				
	a. Hernia ...	—	10	—	—
	b. Other ...	—	66	2	1
13	Orthopaedic—				
	a. Posture ...	4	28	—	3
	b. Flat foot ...	6	115	1	2
	c. Other ...	5	228	4	9
14	Nervous system—				
	a. Epilepsy ...	—	1	—	2
	b. Other ...	—	6	—	1
15	Psychological—				
	a. Development	—	12	—	2
	b. Stability ...	—	23	—	2
16	Other ...	5	53	7	9

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

Age Groups (1)	Number of Pupils Inspected (2)	A (good) No. (3)	A (good) % of col. 2 (3)	B (fair) No. (4)	B (fair) % of col. 2 (4)	C (poor) No. (5)	C (poor) % of col. 2 (5)
New Entrants	1082	804	74.3	268	24.7	10	1.0
Intermediates	852	563	66.1	287	33.7	2	0.2
Leavers	583	437	75.0	144	24.7	2	0.3
Other periodic inspections	299	232	77.6	67	22.4	—	—
Total ..	2816	2036	72.3	766	27.2	14	0.5

TABLE III
INFESTATION WITH VERMIN.

(i)	Total number of examinations in the schools by the school nurses or other authorised persons ...	26,883
(ii)	Total number of individual pupils found to be infested	98
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 [2], Education Act, 1944)	14
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 [3], Education Act, 1944)	3

TABLE IV

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 ...	—	—
(b) Body ...	—	—
Scabies	—	—
Impetigo	10	—
Other skin diseases ...	14	1
Total	24	1

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

	Number of cases dealt with. (a) By the Authority.	(b) Otherwise.
External and other, excluding errors of refraction and squint ...	16	1
Errors of refraction, including squint	250	46
Total ...	266	47
Number of pupils for whom spectacles were		
(a) Prescribed	168	19
(b) Obtained	167	18

GROUP 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases treated. (a) By the Authority.	(b) Otherwise.
Received operative treatment		
(a) for diseases of the ear ...	—	6
(b) for adenoids and chronic tonsillitis	—	164
(c) for other nose and throat conditions	—	14
Received other forms of treatment ...	23	52
Total ...	23	236

GROUP 4.—ORTHOPÆDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals or hospital schools	101
(b) Number treated otherwise, e.g., in clinics or out-patient departments	499

GROUP 5.—CHILD GUIDANCE TREATMENT.

Number of pupils treated at Child Guidance Clinics:—

(*a*) In the Authority Clinics	33
(*b*) Elsewhere	—

GROUP 6.—SPEECH THERAPY.

Number of pupils treated by Speech Therapy:—

(*a*) By the Authority	98
(*b*) Otherwise	—

GROUP 7.—OTHER TREATMENT GIVEN.

	Number of cases treated.	
	(*a*) By the Authority.	(*b*) Otherwise.
Miscellaneous Minor Ailments ...	192	—
Other Conditions	—	83

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 Children who were inspected by the Authority's Dental Officers:—			
	(*a*) Periodic			6,713
	(*b*) Specials			110
	(*c*) Total (Periodic and Specials)			6,823
(2)	Number found to require treatment			4,245
(3)	Number referred for treatment			4,056
(4)	Number actually treated			2,507
(5)	Attendances made by pupils for treatment ...			4,361
(6)	Half-days devoted to	Inspection ... 61	Total ...	879
		Treatment ... 818		
(7)	Fillings	Permanent Teeth ... 2,052	Total ...	2,881
		Temporary Teeth ... 829		
(8)	Number of teeth filled	Permanent Teeth... 1,599	Total ...	2,353
		Temporary Teeth ... 754		
(9)	Extractions	Permanent Teeth ... 567	Total ...	2,307
		Temporary Teeth ... 1,740		
(10	Administration of general anaesthetics for extractions			560
(11)	Other operations	Permanent Teeth... 1,108	Total ...	1,978
		Temporary Teeth... 870		

TABLE VI.—RETURN OF HANDICAPPED PUPILS.

	(1) Blind (2) Partially sighted		(3) Deaf (4) Partially deaf		(5) Delicate (6) Physically Handicapped		(7) Educationally sub-normal (8) Maladjusted		(9) Epileptic	Total 1 — 9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
In the Calendar Year:—										
A. Handicapped Pupils **newly placed** in Special Schools or Homes ...	—	—	1	—	2	1	11	—	2	17
B. Handicapped Pupils **newly ascertained** as requiring education at Special Schools or Boarding in Homes	—	1	—	—	1	—	8	—	—	10

Number of children reported during the Calendar year under Section 57 (3), 1 and under Section 57 (5) of the Education Act, 1944, Nil.

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
On or about 31st December :—										
C. Number of Handicapped Pupils from the area—										
(i) attending Special Schools as Day Pupils	—	—	—	—	—	—	—	—	—	—
Boarding Pupils ...	2	—	2	3	2	3	12	—	3	27
(ii) Boarded in Homes ...	—	—	—	—	—	—	—	—	—	—
Attending Independent Schools (under arrangements made by the Authority ...	—	—	—	—	2	—	7	—	—	9
	—	—	—	—	—	—	—	—	—	—
Total (C) ...	2	—	2	3	3	3	19	—	3	36
	—	—	—	—	—	—	—	—	—	—

TABLE VI—(Continued)

	(1) Blind (2) Partially sighted	(3) Deaf (4) Partially deaf	(5) Delicate (6) Physically Handicapped	(7) Educationally sub-normal (8) Maladjusted	(9) Epileptic	Total 1—9
D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944:—						
(a) In hospitals ...	— —	— —	— —	— —	—	—
(b) Elsewhere ...	— —	— —	— —	— —	—	—
E. Number of Handicapped Pupils from the area—						
(i) requiring places in Special Schools or Homes but remaining unplaced ...	1 1	1 —	1 2	22	—	28
(ii) Number in E(i) above who have not reached the age of 5 years ...	1 1	1 —	— —	—	—	3
(iii) Number in E(i) above who have reached the age of 5 years but whose parents had not consented to their admission to Special School ...	— —	— —	— —	13	—	13

TABLE VII.

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

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

	Number	Aggregate staff in terms of the equivalent number of whole-time officers
Medical Officers	2 ...	0.9
General Practitioners working part-time	6 ...	0.25
Dental Officers	3 ...	2.9
Speech Therapists	1 ...	1.0
School Nurses	39 ...	2.75
No. of above holding H.V. Cert. ...	15 ...	—
Nursing Assistants	— ...	—
Dental Attendants	3 ...	2.9
Dental Anaesthetist (part-time) ...	1 ...	—

II.—NUMBER OF SCHOOL CLINICS (i.e., **premises** at which clinics are held for schoolchildren) 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 Mobile 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.

Examination and/or treatment.	Number of School Clinics (i.e., premises) where such treatment is provided— directly by the Authority.	under arrangements made with Regional Hospital Boards of Boards of Governors of Teaching Hospitals.
(1)	(2)	(3)
A. Minor ailment and other non-specialist examination or treatment ...	1	—
B. Dental	4	—
C. Ophthalmic* ...	1	—
D. Ear, Nose and Throat ...	—	—
E. Orthopædic ...	—	3
F. Pædiatric† ...	—	—
G. Speech Therapy ...	1	—
H. Others (specify) ...	—	—

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

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

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	One session weekly.
Educational Psychologists ...	1	
Psychiatric Social Workers ...	Nil.	Nil.
Others (specify)		
Mental Health Worker ...	1	One session weekly plus Home Visits.

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