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WESTMORLAND COUNTY COUNCIL

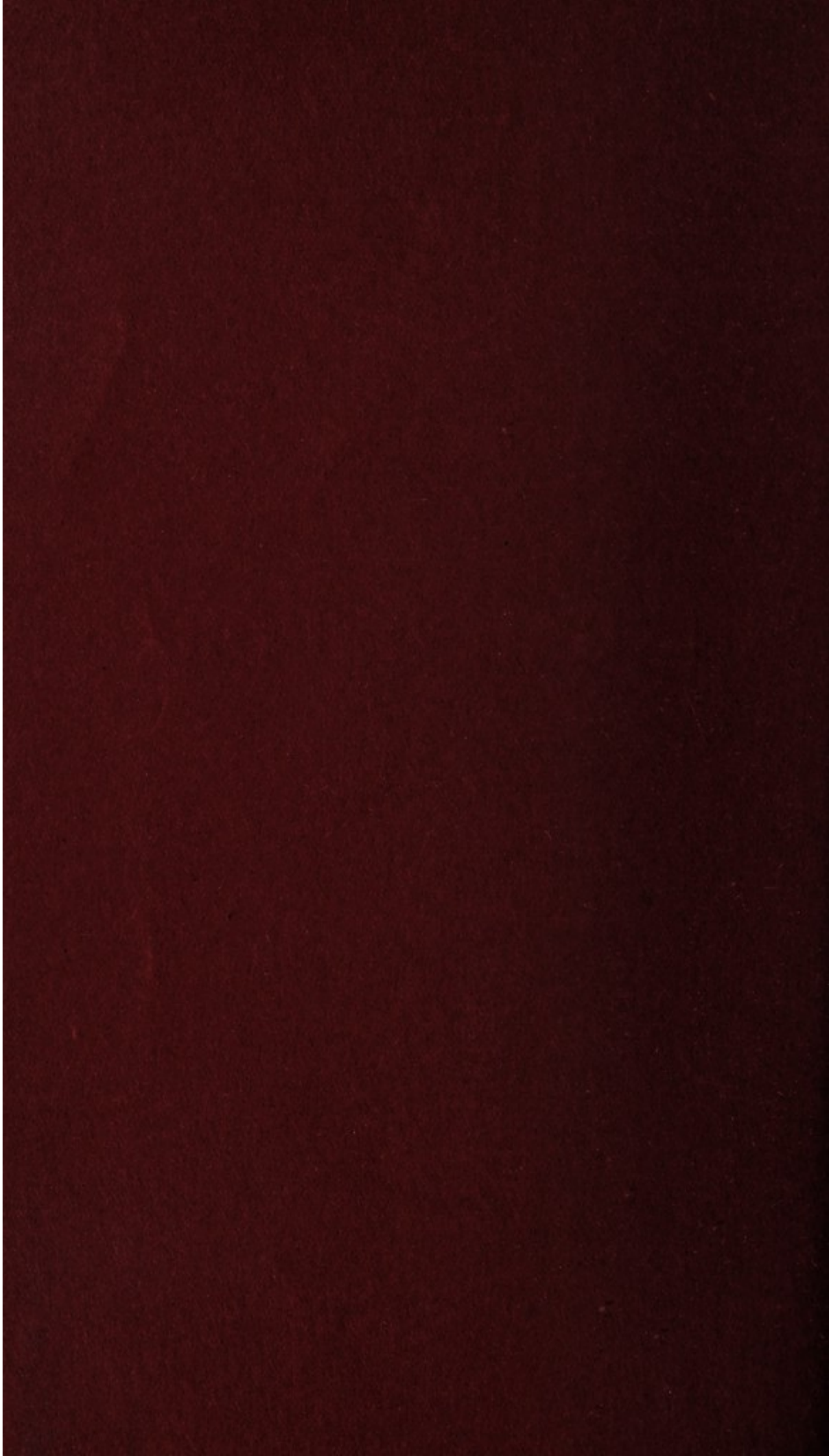
ANNUAL REPORT

OF THE

Principal School Medical
Officer

THE YEAR 1956

Westmorland Gazette, Ltd., Printers, Kendal





WESTMORLAND COUNTY COUNCIL

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CONTENTS

	Pages
Child Guidance	7
Diphtheria Immunisation	10
Handicapped Pupils	9
Introduction	4
Milk in Schools Scheme	5
Minor Ailments	7-8
Nose and Throat Conditions	6
Orthopædic Scheme	8
School Dental Service	13
Speech Therapy	7
Skin Diseases	8
Statistical Tables	14-23
Staff and Consultants	3
Tuberculous Conditions in School Children	11-12
Ultra-Violet Ray Clinics	11
Verminous Infestation	5-6
Visual Defects—Treatment	11

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. (Died 27-12-56.)

School Dental Officers—

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

I. Fletcher, B.D.S.

Orthopædic Nurse.—Mrs. D. Williams, S.R.N. (Resigned 31-12-56.)

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, 1956.

To the Chairman and Members of the Education Committee.

ANNUAL REPORT, 1956.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report on the working of the School Health Service for the year 1956.

The form of the report remains largely the same as in the previous year's report. 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 suffered a grievous loss in the death of Mr. Irvine, who was for so many years the Chief Dental Officer. We will greatly miss him.

The health and nutrition of the Westmorland school children has been good during the past year. My own impression, for what it is worth, extending over quarter of a century of school work, is that never in the past has such a high standard of nutrition been attained, and I can see no reason why it should not be maintained and even improved on in the future.

This has been a quiet year again so far as infectious disease is concerned. There has been the usual outbreak of measles and whooping-cough, with approximately 700 cases of measles. In common with the rest of the country the poliomyelitis cases were low; two cases only were notified. I am glad to report that again the county has remained free from any outbreaks of diphtheria.

The B.C.G. Vaccination reported on page 11, as forecast in my report last year, has been extended throughout the county, and all children whose parents have consented to this have been vaccinated.

A great deal of public attention has been devoted to the subject of Cerebral Palsied Children (Spastics). During the past year, however, there were no children of school age in this category who merited special schooling on this account.

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% children were infested, to 1956, when only one 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

The Local Education Authority now enters into annual contracts with dairymen for the supply of milk to schools. 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 un-designated milk 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.

County Schools

Designation of Milk Supplied.	No. of Schools.
Milk from Attested Herds	8
Tuberculin Tested	75
Pasteurised	30
	—
	113
	—

No. of Schools taking milk in bulk, 38.

Independent Schools

Tuberculin Tested	16
--------------------------	----

No. of Schools taking milk in bulk, 10.

By arrangement with the Council's Sampling Officer, milk supplied to schools is submitted to bacteriological and pathological examination periodically, and out of 43 samples taken 18 were unsatisfactory. The samples classified as unsatisfactory failed to pass the Methylene Blue Test. All samples were satisfactory on the Cavy Inoculation Test.

Infestation (Uncleanliness)

During the past year 24,789 examinations were carried out by the District Nurses, and the number of children found to be infested with lice or nits was 81 compared with 98 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.
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%
1956 ...	24,789	81	1.0%

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 only 10 pupils were referred to hospital on account of nose and throat defects as a result of school medical inspection, evidence is available to show that no less than 179 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	1
Defective hearing	4
Frequent cold, sinusitis and catarrh	4
Nasal obstruction	1
Enlarged tonsils and adenoids with other symptoms	12
Nasal or ear discharge	1

In addition 1 case was referred to the Department of Education of the Deaf at Manchester for assessment of defective hearing, and 2 other cases to a Special Clinic set up for this purpose at Preston.

Speech Therapy

Number of children who have attended for Speech Therapy	105
Number of attendances made	2,239
Number of sessions held	464

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, Orton and Appleby, although unfortunately petrol rationing has somewhat limited the frequency with which the more distant Clinics can be attended.

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 Friends' Meeting House, Kendal, it has not been found possible to adhere strictly to this arrangement.

Number of clinics held during 1956	27
Number of attendances	46
Number of cases	26

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, but the calls made on this Clinic are steadily diminishing.

Skin Diseases

As will be seen from Table IV on 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	Daily except Mondays
Friends' Meeting House, Kendal	... Child Guidance	... Weekly
U.D.C. Offices, Ambleside	... Dental	... As required
Old First Aid Post, Appleby	... Dental ... Speech Therapy	... As required ... Mondays
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.

Orthopædic 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. Amended arrangements consequent upon the resignation of Mrs. Williams (on 31st December, 1956) will operate in future.

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	...	...	...	17
Number of attendances	...	...	...	217
Number of new cases seen	...	...	...	16
Home visits by Orthopaedic Nurse	...	...	...	341
Number of children admitted to Ethel Hedley Hospital				2

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

Westmorland County Hospital	...	...	26
Cumberland Infirmary, Carlisle	...	...	8
Lancaster Royal Infirmary	...	...	5

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 54, of whom 8 were recommended for admission to Special Schools for Educationally Subnormal Pupils.

In addition 4 children were found to be ineducable and recommended for action under Section 57 (3), Education Act, 1944. Forty-two children were found on examination not to require education in a special school. A copy of the report on each case is submitted to the Educational Adviser so that any special attention possible in the ordinary school may be given to those children needing it.

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 those 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 now much improved, and the opening of Ingwell and Higham Special Schools 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 pupils whose parents are willing for them to attend.

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 ninth 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	...	...	...	321
" aged 1—4 years	...	...	...	347
" " 5-14 years	...	...	...	135
			Total	803

Reinforcing doses:—

Children aged 1—4 years	...	...	...	36
" " 5—14 years	...	...	...	409
			Total	445
			Grand Total	1248

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	15	135
Windermere	25	157

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	...	80
Number referred to Consultant Eye Specialists	...	283

THE EDUCATION AREA

County of Westmorland :—

Area	504,917 acres.
Population (estimated mid-1956)	66,600
Estimated Product of 1d. Rate, 1955-56	£3,090
Number of Schools—Primary	98
Secondary	13
Nursery	1
Special	1
Number of Pupils (31-1-56)—Primary	6,620
Secondary	3,116

TUBERCULOUS CONDITIONS IN SCHOOLCHILDREN

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

Westmorland Sanatorium, Meathop	... ..	—
Wrightington Hospital	... ..	1
Beaumont Hospital, Lancaster	... ..	1
High Carley, Ulverston	... ..	1
City General Hospital, Carlisle	... ..	1

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, although there is good reason for the belief that the non-respiratory forms of the disease are becoming increasingly rare, due to a considerable extent to the improved milk supplies.

B.C.G. VACCINATION OF SCHOOLCHILDREN

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 after experience of this pilot scheme arrangements were begun to extend the arrangements to the whole county.

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. In fact, owing to the effect of the latter scheme on the work of the department, it was not possible to complete the B.C.G. Vaccination of all children in respect of whom the parents gave consent in the Spring of 1956, until over one year later.

The following table gives details of the work done under the scheme, including the results of the post-vaccination tests, although in many cases this stage was completed after the end of 1956.

Found positive at first Pre-vaccination Test.	Found positive at second Pre-vaccination Test	Vaccinated.	Converted to positive at Post-vaccination Test. (Successfully vaccinated).
48	63	326	301*

* In no case was any child who had been vaccinated found not to have been converted, but 25 children failed to attend for subsequent testing.

POLIOMYELITIS VACCINATION

The Poliomyelitis Vaccination Scheme announced by the Ministry of Health in January, 1956, is administered by the County Council as Local Health Authority and it justifies mention in this Report by reason of the fact that the children covered by the arrangements, i.e., those born in the years 1947 to 1954 inclusive, were mostly of school age, and furthermore, in the country areas particularly, it is only by using the schools as clinics that it is possible to deal with the numbers involved, with the staff available for this work.

I would like to take this opportunity of recording my thanks to the teachers for their ready co-operation not only in connection with my visits to the schools to carry out the vaccination, but also for their valuable assistance in verifying the addresses of the children concerned, so as to enable the parent of each child to be invited to consent to treatment.

It is estimated that approximately 7,500 consent forms were posted to the parents of children in the prescribed age group, and consent was received in respect of 3,325 children, before the registration procedure formally closed at the end of March, 1956. Limited supplies of vaccine became available during May and June which permitted of the giving of two doses each to 226 children and one dose each to a further 276; the scheme was then suspended until a further supply, sufficient for approximately 300 doses, was received at the end of November, all of which was used before the end of the year.

It is much too soon to express any view, based on our own experience, on the degree of protection afforded by this vaccine; it is pleasing to report that there have been no reactions worthy of comment.

SCHOOL DENTAL SERVICE

The only change in the Dental Staff was the death of Mr. Irvine on 27th December, 1956, to which reference has already been made on page 3 of this Report. Due to Mr. Irvine's prolonged illness, he was absent from duty for the last five months of the year, and his successor will not take up duty until the middle of 1957; this must of necessity mean that arrears of work will accumulate in those parts of the county in which the Principal Dental Officer has hitherto worked.

Details of the work done are recorded in Table V on page 19 of this Report.

STATISTICAL TABLES

TABLE I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS.

A.—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected:—

New Entrants	...	...	...	...	879
Intermediates	...	...	...	...	1,107
Leavers	...	...	...	...	594
				Total	2,589
Number of other Periodic Inspections	...	...	...	...	271
				Grand Total	2,851

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	138
Number of Re-Inspections	...	...	...	...	3,753
				Total	3,891

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	7	18	24
Intermediates	62	25	87
Leavers	19	7	26
Total	88	50	137
Other Periodic Inspections	9	8	17
Grand Total	97	58	154

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

Age Groups (1)	Number of Pupils Inspected (2)	Satisfactory		Unsatisfactory	
		No. (3)	% of col. 2	No. (4)	% of col. 2
New Entrants	879	836	95.1	43	4.9
Intermediates	1107	1063	96.0	44	4.0
Leavers	594	581	97.8	13	2.2
Other periodic inspections	271	252	93.0	19	7.0
Total ..	2851	2732	95.8	119	4.2

TABLE II
INFESTATION WITH VERMIN.

- (i) Total number of examinations in the schools by the school nurses or other authorised persons ... 24,789
- (ii) Total number of individual pupils found to be infested 81
- (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 [2], Education Act, 1944) ... 8
- (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 [3], Education Act, 1944) ... 1

TABLE III
A & B.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1956.

Defect Code No	Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
4	Skin ...	3	60	3	4
5	Eyes—				
	a. Vision ...	97	168	54	9
	b. Squint ...	7	22	2	—
	c. Other ...	—	20	—	—
6	Ears—				
	a. Hearing ...	2	40	1	3
	b. Otitis Media ...	1	26	—	1
	c. Other ...	—	—	—	—
7	Nose and Throat ...	7	274	3	13
8	Speech ...	9	25	5	1
9	Lymphatic Glands ...	3	78	—	1
10	Heart ...	—	31	—	1
11	Lungs ...	3	96	—	8
12	Developmental—				
	a. Hernia ...	1	9	—	1
	b. Other ...	2	53	—	1
13	Orthopaedic—				
	a. Posture ...	4	27	2	3
	b. Feet ...	2	121	1	4
	c. Other ...	15	179	6	4
14	Nervous system—				
	a. Epilepsy ...	—	5	—	—
	b. Other ...	—	2	—	—
15	Psychological—				
	a. Development ...	—	16	—	1
	b. Stability ...	—	30	—	1
16	Abdomen ...	—	—	—	—
17	Other ...	4	74	2	8

TABLE IV

GROUP 1.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

		Number of cases known to have been dealt with:	
		(a) By the Authority.	(b) Otherwise.
External and other, excluding errors of refraction and squint	...	15	—
Errors of refraction, including squint	...	250	38
		—	—
Total	...	265	38
		—	—
Number of pupils for whom spectacles were prescribed	...	177	20

GROUP 2.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

		Number of cases known to have been treated:	
		(a) By the Authority.	(b) Otherwise.
Received operative treatment:—			
(a) for diseases of the ear	...	—	5
(b) for adenoids and chronic tonsillitis	...	—	164
(c) for other nose and throat conditions	...	—	15
Received other forms of treatment	...	5	14
		—	—
Total	...	5	198
		—	—
Total number of pupils known to have been provided with hearing aids:—			
(a) In 1956	...	—	3
(b) In previous years	...	—	13

GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS.

		Number of pupils known to have been treated at clinics or out-patient departments:—	
		By the Authority	137
		Otherwise	139

GROUP 4.—DISEASES OF THE SKIN (excluding Uncleanliness, for which see Table II).

		Number of cases treated or under treatment during the year by the Authority.	
Ringworm—(a) Scalp	...	—	
(b) Body	...	2	
Scabies	...	1	
Impetigo	...	11	
Other skin diseases	...	4	
		—	
	Total	18	

GROUP 5.—CHILD GUIDANCE TREATMENT.

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	26
---	-----	-----	----

GROUP 6.—SPEECH THERAPY.

Number of pupils treated by Speech Therapists under arrangements made by the Authority	105
--	-----	-----	-----

GROUP 7.—OTHER TREATMENT GIVEN.

(a) Number of cases of miscellaneous minor ailments treated by the Authority	...	...	153
(b) Pupils who received convalescent treatment under School Health Service arrangements	...	...	Nil
(c) Pupils who received B.C.G. vaccination	...	...	326
(d) Other			
1. Chest conditions	...	...	13
2. Heart conditions	...	...	3
3. Fractures and injuries	...	...	11
4. Miscellaneous Medical and Surgical conditions	...	...	39
			—
			545

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	... ..	5,230	
(b) Specials	... ..	125	
(c) Total (Periodic and Specials)	... ..	5,355	
(2) Number found to require treatment		3,405	
(3) Number offered treatment		1,756	
(4) Number actually treated		2,078	
(5) Attendances made by pupils for treatment (including orthodontic cases)		4,102	
(6) Half-days devoted to	{ Inspection ... 62 Treatment ... 854 }	Total ...	916
(7) Fillings	{ Permanent Teeth ... 2,847 Temporary Teeth ... 454 }	Total ...	3,301
(8) Number of teeth filled	{ Permanent Teeth ... 2,066 Temporary Teeth ... 403 }	Total ...	2,469
(9) Extractions	{ Permanent Teeth ... 770 Temporary Teeth ... 1,323 }	Total ...	2,093
(10) Administration of general anæsthetics for extractions		699	
(11) Orthodontics :—			
(a) Cases commenced during the year	...	20	
(b) Cases carried forward from previous year	...	21	
(c) Cases completed during the year	...	14	
(d) Cases discontinued during the year	...	1	
(e) Pupils treated with appliances	...	41	
(f) Removable appliances fitted	...	40	
(g) Fixed appliances fitted	...	1	
(h) Total attendances	...	218	
(12) Number of pupils supplied with artificial dentures		20	
(13) Other operations	{ Permanent Teeth ... 483 Temporary Teeth ... 1,021 }	Total ...	1,504

TABLE VI.—RETURN OF HANDICAPPED PUPILS.

	(1) Blind (2) Partially sighted	(3) Deaf (4) Partially deaf	(5) Delicate (6) Physically Handicapped	(7) Education- ally sub- normal (8) Mal- adjusted	(9) Epi- leptic	Total 1—9 (10)				
In the Calendar Year:—										
A. Handicapped Pupils newly placed in Special Schools or Homes	2	1	—	8	—	11				
B. Handicapped Pupils newly ascer- tained as requiring education at Special Schools or Boarding in homes	—	—	—	8	—	8				
Number of children reported during the Calendar year under Section 57 (3), 4 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 January, 1957:—										
C. Number of Handicapped Pupils from the area—										
(i) attending Special Schools as Day Pupils	—	—	—	—	—	—	—	—	—	—
Boarding Pupils	4	3	1	14	2	30				
(ii) were on the registers of Independent Schools (un- der arrangements made by the Authority)	—	—	1	8	—	9				
Total (C)	4	3	2	22	2	39				

TABLE VI—(Continued)

	(1) Blind (2) Partially sighted (2)	(3) Deaf (4) Partially deaf (3)	(5) Delicate (6) Physically Handicapped (5)	(7) Education- ally sub- normally (8) Mal- adjusted (7)	(9) Epi- leptic (9)	Total 1—9 (10)
Number of Handicapped Pupils being educated under arrange- ments made under Section 56 of the Education Act, 1944:—						
(i) In hospitals ...	—	—	—	—	—	—
(ii) In other groups ...	—	—	—	—	—	—
(iii) At home ...	—	—	1	—	—	1
Number of Handicapped Pupils requiring places in Special Schools:						
(i) Total—						
(a) Day ...	—	—	—	—	—	—
(b) Boarding ...	1	—	—	13	—	14
(ii) Number in E (i) above who have not reached the age of five years—						
(a) Awaiting day places ...	—	—	—	—	—	—
(b) Awaiting boarding places ...	1	—	—	—	—	1
(iii) Number in E(i) above who have reached the age of five years but whose parents had re- fused consent to their admission to Special School ...	—	—	—	12	—	12
F. Number on the register of Hospital Special Schools	—	—	4	—	—	—

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 ...	36	—
Number of above holding H.V. Cert. ...	15	—
Nursing Assistants ...	—	—
Dental Attendants ...	3	2.9
Dental Anæsthetist (part-time) ...	1	1.1

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 or 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 CENTRES.

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.

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.

Number of School Clinics (Examinations) where such treatment is provided— directly by the Authority, Hospital Boards or Boards of Governors of Teaching Hospitals.

YUG NALLA NHOI
ENIYRI NHOI
Examination and/or treatment

(1)	(2)	(3)
Non-specialist examination or treatment	1	1
Dental	4	4
Ophthalmic	1	1
Ear, Nose and Throat	—	—
Orthopaedic	—	—
Physiotherapy	—	—
Speech Therapy	—	—
Others (specify)	—	—

arrangements made with the Supplementary Ophthalmic Service are returned in Column (2). Figures in Column (3) are returned in Column (2).

IV—CHILD GUIDANCE CENTRES

Number of Child Guidance Centres provided by the Authority.

(a) SCHEMES (b) SERVICES (c) NUMBER OF THE EQUIVALENT NUMBER OF CENTRES (d) SPECIFY IN TERMS OF THE EQUIVALENT NUMBER OF CENTRES (e) NUMBER OF WHOLE-TIME OFFICERS (f) NUMBER OF PART-TIME OFFICERS (g) NUMBER OF VOLUNTEERS

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Child Guidance Centres	1	1	1	1	1	1	1
One session weekly plus Home Visits	1	1	1	1	1	1	1

Psychiatrist is made available by the Manchester Regional Hospital Board.