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WESTMORLAND COUNTY COUNCIL

ANNUAL REPORT

of the

**Principal School Medical
Officer**

THE YEAR 1957

Westmorland Gazette Ltd., Printers, Kendal

WESTMORLAND COUNTY COUNCIL

ANNUAL REPORT OF
PRINCIPAL SCHOOL MEDICAL OFFICER
1957

CORRIGENDA

Page 4 line 18 amend 11,911 to read 9,911.

Page 4 line 18 amend 2,175 to read 175.

Page 10 last line amend 5,518 to read 3,518.



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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.—M. D. McGarry, L.D.S.

(Commenced 1-7-57.)

School Dental Officers—

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

I. Fletcher, B.D.S.

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.

SCHOOL HEALTH SERVICE County Hall, Kendal.

November, 1958.

To the Chairman and Members of the Education Committee.

ANNUAL REPORT FOR THE YEAR 1957.

Mr. Chairman, My Lord, Ladies and Gentlemen,

I have the honour to present the Annual Report on the working of the School Health Service for the year 1957.

The form of the report is much the same as in previous years and most of the information is contained in the form of tables in the manner asked for by the Ministry. The Medical Staff remains constant, with one Medical Officer and one Assistant Medical Officer and General Practitioners giving part-time services.

Mr. Desmond McGarry was appointed Chief Dental Officer in place of Mr. Irvine. The Dental Staff, in common with many other Local Authorities, remains below establishment level in spite of repeated attempts to recruit another Dental Officer.

9911 The number of pupils on the school registers rose in the year 1957 to ~~41,911~~, thereby showing an increase of ~~2~~,175 pupils.

The health and nutrition of the Westmorland schoolchildren has remained good during the past year and there has been no significant change in the pattern of defects discovered during the course of periodic examinations. Infectious Diseases have remained fairly quiet throughout the year, except for an outbreak of influenza which resulted in a high level of school absenteeism for a short time. The B.C.G. Vaccination has continued, as well as the Poliomyelitis Campaign. These two services are at present occupying a large proportion of the time of the School Medical Staff.

The testing of schoolchildren's hearing has always been unsatisfactory and I think it is a moot point whether it can be done adequately during the hurly-burly of the routine School Medical Examination. The method employed by Salford Corporation has, I think, much to commend it. In essence this consists of an operator trained in the use of an audiometer who visits the schools in rotation. Any child whose hearing is below normal is referred to the School Medical Officer in the first instance and later to the family doctor or Ear, Nose and Throat Specialist where necessary at a later stage. I would commend this to the Westmorland Education Committee.

I have the honour to be,

My Lord, 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 undesignated 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 ...	7
Tuberculin Tested ...	75
Pasteurised ...	28
	110

Number of Schools taking milk in bulk, 30.

Independent Schools.

Tuberculin Tested ... 17

Number of Schools taking milk in bulk, 13.

By arrangement with the Council's Sampling Officer, milk supplied to schools is submitted to bacteriological and pathological examination periodically, and out of 50 samples taken 12 were unsatisfactory. No sample was unsatisfactory on the Cavy Inoculation Test.

Infestation (Uncleanliness)

During the past year 24,299 examinations were carried out by the District Nurses, and the number of children found to be infested with lice or nits was 80 compared with 81 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.
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%
1957 ...	24,299	80	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.

Ear, 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 29 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 151 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.

The Ministry of Education is interested in the wide variations in the proportion of children in different parts of the country who have undergone tonsillectomy and is now asking Medical Officers to record for each child seen at Periodic Inspection whether he or she has undergone the operation at any previous time. The figures observed in this County in 1957 are as follows:—

	No. examined.	No. who had had tonsillectomy.	Percentage.
Entrants ...	894	26	2.9
Intermediate ...	1,140	176	15.4
Leavers ...	647	77	11.9
Others ...	205	28	13.6

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 ...	23
Frequent cold, sinusitis and catarrh	3
Enlarged tonsils and adenoids with other symptoms ...	2

In addition one case was referred to the Department of Education of the Deaf at Manchester for assessment of defective hearing.

Speech Therapy

Number of children who have attended for Speech Therapy	...	...	...	...	109
Number of attendances made	...	...	...	...	2,064
Number of sessions held	...	...	...	...	450

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.

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, and he holds the clinic at the Friends' Meeting House, Kendal, as required.

Number of Clinics held during 1957	...	...	...	18
Number of Attendances	...	...	...	32
Number of Cases	...	...	...	20

Minor Ailments

In view of the fact that the minor ailments formerly dealt with at School Clinics are now seen but rarely in the schools, and such cases as do occur now usually attend their family doctor, patients at the Stramongate School Clinic became so few that the Clinic was closed during the year.

Skin Diseases

As will be seen from Table IV on page 19, 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 24, and the relevant information is given below:—

Location.	Types of Clinics.	Frequency of Sessions.
Stramongate Clinic, Kendal	... Dental treatment ... Ophthalmic examin- ation	Daily Fortnightly
Friends' Meeting House, Kendal	Speech Therapy ... Child Guidance ...	Daily except Mon- days 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.

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.

A small number of cases continued to be seen at the Out-Patient Clinics held by Dr. Bucknell at the Ethel Hedley Hospital and, by courtesy of the Cumberland Authority, at Penrith, but the number of such cases is not known.

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

Westmorland County Hospital	...	271
Cumberland Infirmary, Carlisle	...	39
Lancaster Royal Infirmary	...	3

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 cases examined during the year was 39, of whom 11 were recommended for admission to Special Schools for Educationally Subnormal Pupils, three for Physically Handicapped Pupils, one for Deaf Pupils and one for Blind Pupils.

In addition seven children were found to be ineducable and recommended for action under Section 57 (3), Education Act, 1944. Sixteen 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 Education 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.

I am indebted to the Director of Education for the figures in Table VI on pages 21 and 22.

Diphtheria Immunisation

Immunisation against diphtheria has, since 1948, been the responsibility of the County Council. 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 tenth 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 ...	...	...	189
„ aged 1—4 years ...	...	...	341
„ „ 5-14 years ...	...	...	70
Total ...			600

Reinforcing doses :—

Children aged 1—4 years	...	...	...	6
„ „ 5—14 years	...	...	...	413
				—
Total	...	...	...	419
				—
Grand Total	...	...	...	1,019
				—

Ultra-Violet Ray Clinics

The only Ultra-Violet Ray Clinic operating in the County during the year was at Kendal, where 49 children made 268 attendances.

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 sessions as required at the Stramongate School Clinic, but parents are given the opportunity to make their own arrangements with opticians if they prefer it.

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 for Ophthalmic Examination ... 441

THE EDUCATION AREA**County of Westmorland :—**

Area	...	...	...	504,917 acres.
Population (estimated mid-1957)	...	...	...	66,600
Estimated Product of 1d. Rate, 1958-59	...	...	...	£2,988
Number of Schools—Primary	...	...	...	95
Secondary	...	...	...	13
Nursery	...	...	...	1
Special	...	...	...	1
Number of Pupils (31-1-57)—Primary	...	...	...	6,393
Secondary	...	...	...	5,518

3575

TUBERCULOUS CONDITIONS IN SCHOOLCHILDREN

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

Wrightington Hospital	...	...	...	1
Beaumont Hospital, Lancaster	...	...	...	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.

Although B.C.G. Vaccination is a function of the County Council as Local Health Authority, it is reported here as the patients are schoolchildren and the work is carried out in the Schools.

Since the Spring of 1955 B.C.G. Vaccination has been available to schoolchildren between their thirteenth and fourteenth birthdays in accordance with the suggestions of Ministry of Health Circular 22/53.

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 Thursday, 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 difficulty and has become increasingly so with the advent of the poliomyelitis vaccination campaign. A simplification of the procedure approved by the Ministry whilst this report was under preparation should do something to simplify the arrangements for the future.

The following table gives details of the work done under the scheme during 1957:—

Found positive at first: Pre-Vaccination Test.	Found Positive at second Pre-Vaccination Test.	Vaccinated.
57	31	231

POLIOMYELITIS VACCINATION

This work is carried out under the direction of the Local Health Authority, but is reported here as the great majority of the persons covered by the scheme are of school age.

The Poliomyelitis Vaccination Scheme announced by the Ministry of Health in January, 1956, had by the end of 1957 been extended to all children under the age of 15 years and to expectant mothers.

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 repeating my thanks to the teachers for their ready co-operation in connection with the frequent visits to the schools to carry out the vaccination; without their ready forbearance the work would be impossible.

The limiting factor during the whole of the year was the vaccine supply position, supplies consistently falling far below the amount needed. During the year the treatment of 2,450 children was completed and a further 1,016 children had received their first dose—a total of 5,640 injections—but on 31st December, 1957, there was still a waiting list of 4,633 for whom vaccine was not available.

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

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER.

I have the honour to present the Annual Report on the School Dental Service in the County of Westmorland for 1957. The statistical table is to be found on page 20.

Of a total of 9,821 schoolchildren in the County, 5,108 had a routine dental inspection during the year, i.e., 52 per cent. of the school population. The whole-time equivalent of dental officers employed was two and a half for the year. When this figure, as at present envisaged, is increased to four, annual routine inspection of every school child in the County should be possible. Only when this has been achieved can our school dental service be considered to be established on a satisfactory basis.

The discrepancy between the number of children requiring treatment and those to whom treatment is offered is accounted for mainly by children whose dental care is undertaken by local dental practitioners. This section, in the case of the older children, represents a substantial percentage of those inspected. I feel that this

shows an awareness on behalf of these children and their parents of the necessity for regular dental treatment; some of the credit for this must be given to officers of the school dental service for their efforts in the field of dental health education in previous years. There remains a small body of children whose parents neither wish to avail themselves of the school dental service nor the services of local dental practitioners, apart from occasional emergencies. Every effort is being made to impress on these parents the necessity for, and the advantages of, regular dental treatment.

Oral hygiene instruction continues to be carried out efficiently by the Dental Officers.

The orthodontic side of the school dental scheme provides a satisfactory service. In addition to the figures given in Paragraph 11 of the statistical table many irregularities were rectified by purely surgical methods. The appointment of Mr. N. Wild as Consultant Orthodontist to the local Hospital Management Committee has meant that consultant advice is now easily available for the more complicated cases.

Under the heading of "Other Operations" in the statistical table are grouped together dressings, temporary filings, silver nitrate treatments, scalings, polishings, etc.

Apart from my own appointment there was little change in the staffing of the department during the year. Miss M. A. Barlow resigned from her position as Dental Attendant on 31st August and was replaced by Mrs. M. I. McLaren, who took up duty on 1st September.

I look forward to the provision of a new Mobile Dental Clinic and the addition of X-ray and general anæsthetic facilities in the County in 1958. This expansion should help to ensure the steady progress of our dental service. Good equipment and good clinic accommodation increase the output and improve the standard of work of dental officers and impress both patients and parents. In addition, without good clinical facilities the prospects of recruiting dental officers appear hopeless.

In conclusion I wish to express my thanks to Dr. Guy for the encouragement and assistance he has given since my arrival, and to the members of the dental staff for their industry and co-operation. To the head teachers, without whose active co-operation it is impossible to run an efficient school dental service, I wish to express the gratitude of the entire dental staff.

M. D. McGARRY,
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	...	...	...	894
Intermediates	...	...	...	1,140
Leavers	...	...	...	647
				—
Total	...	...	...	2,681
				—
Number of other Periodic Inspections	...	...	...	205
				—
Grand Total	...	...	...	2,886
				—

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	150
Number of Re-Inspections	...	...	...	3,876
				—
Total	...	...	...	4,026
				—

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 III. (3)	Total individual pupils. (4)
New Entrants	30	34	58
Intermediates	77	30	102
Leavers	34	16	49
	—	—	—
Total	141	80	209
	—	—	—
Other Periodic Inspections	27	5	29
	—	—	—
Grand Total	168	85	238

TABLE III
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31st DECEMBER 1944

**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 No. % of col. 2 (3)	Unsatisfactory No. % of col. 2 (4)
New Entrants	894	852 95.3	42 4.7
Intermediates	1140	1127 98.9	13 1.1
Leavers	647	640 98.8	7 1.2
Other periodic inspections	205	199 97.0	6 3.0
Total	2886	2818 97.6	68 2.4

**TABLE II
INFESTATION WITH VERMIN.**

(i) Total number of examinations in the schools by the school nurses or other authorised persons	...	24,299
(ii) Total number of individual pupils found to be infested		80
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 [2], Education Act, 1944)	... ... ...	15
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 [3], Education Act, 1944)	... ... ...	—

TABLE III
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31st DECEMBER, 1957.
A—PERIODIC INSPECTIONS.

Defect Code No.	Defect or Disease	ENTRANTS		LEAVERS		Total (including other age groups)	
		Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
4	Skin	1	28	2	14	10	74
5	Eyes—						
	a. Vision	30	45	34	17	168	171
	b. Squint	13	24	—	—	16	29
	c. Other	—	4	—	4	—	16
6	Ears—						
	a. Hearing	1	13	1	1	3	28
	b. Otitis Media	1	24	—	1	1	45
	c. Other	—	1	—	—	1	2
7	Nose and Throat	5	160	—	5	9	243
8	Speech	7	13	—	2	10	20
9	Lymphatic Glands	—	62	—	3	—	98
10	Heart	—	17	—	3	—	40
11	Lungs	—	48	2	2	3	80
12	Developmental—						
	a. Hernia	—	7	—	1	—	10
	b. Other	—	33	—	3	2	74
13	Orthopaedic—						
	a. Posture	—	11	2	6	4	42
	b. Feet	2	86	2	8	6	157
	c. Other	6	59	2	19	14	128
14	Nervous system						
	a. Epilepsy	—	8	1	—	2	10
	b. Other	—	8	—	1	1	16
15	Psychological—						
	a. Development	—	15	—	—	—	24
	b. Stability	—	17	—	—	1	29
16	Abdomen	—	6	—	1	—	16
17	Other	—	13	2	4	4	23

TABLE III.
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31st DECEMBER, 1957.
B—SPECIAL INSPECTIONS.

Defect Code No.	Defect or Disease.	Requiring Treatment.	Requiring Observation.
4	Skin	—	4
5	Eyes—		
	(a) Vision	59	36
	(b) Squint	—	1
	(c) Other	—	2
6	Ears—		
	(a) Hearing	—	4
	(b) Otitis Media	—	—
	(c) Other	—	1
7	Nose and Throat	1	6
8	Speech	8	—
9	Lymphatic Glands	—	1
10	Heart	—	2
11	Lungs	—	8
12	Developmental—		
	(a) Hernia	—	1
	(b) Other	—	2
13	Orthopædic—		
	(a) Posture	—	—
	(b) Feet	1	—
	(c) Other	4	1
11	Nervous System—		
	(a) Epilepsy	—	1
	(b) Other	—	—
15	Psychological—		
	(a) Development	—	4
	(b) Stability	—	2
16	Abdomen	—	2
17	Other	—	7

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	...	—	—
Errors of refraction, including squint	310		94
Total	310		94
Number of pupils for whom spectacles were prescribed	237		63

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	...	—	133
(c) for other nose and throat conditions	...	—	—
Received other forms of treatment	...	—	13
Total	...	—	151
Total number of pupils known to have been provided with hearing aids:—			
(a) in 1957	...	1	—
(b) in previous years	...	—	10

GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS.

Number of pupils known to have been treated at clinics or out-patient departments:—

By the Authority	...	...	...	—
Otherwise	...	...	...	313

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	1
(b) Body	1
Scabies	—
Impetigo	—
Other skin diseases	10
			—
Total		...	12
			—

GROUP 5.—CHILD GUIDANCE TREATMENT.

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	20
---------------------------------------------------------------------------------------------	-----	-----	----

GROUP 6.—SPEECH THERAPY.

Number of pupils treated by Speech Therapists under arrangements made by the Authority	109
----------------------------------------------------------------------------------------	-----	-----	-----

GROUP 7.—OTHER TREATMENT GIVEN.

(a) Number of cases of miscellaneous minor ailments treated by the Authority	...	...	14
(b) Pupils who received convalescent treatment under School Health Service arrangements	...	...	—
(c) Pupils who received B.C.G. vaccination	...	...	231
(d) Other			
1. Chest conditions	...	...	2
2. Heart conditions	...	...	1
3. Fractures and injuries	...	...	5
4. Miscellaneous Medical and Surgical conditions	...	...	18
			—
			271
			—

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	...	...	...	5,108
(b) Specials	...	...	...	108
(c) Total (Periodic and Specials)	...	...	...	5,216
(2) Number found to require treatment				
(3) Number offered treatment	...	...	...	1,808
(4) Number actually treated	...	...	...	1,801
(5) Attendances made by pupils for treatment (including orthodontic cases)				
(6) Half-days devoted to	Inspection	...	54	
	Treatment	...	835	
	Total	...		889
(7) Fillings	Permanent Teeth	...	3,141	
	Temporary Teeth	...	216	
	Total	...		3,357
(8) Number of teeth filled	Permanent Teeth	...	2,129	
	Temporary Teeth	...	177	
	Total	...		2,306
(9) Extractions	Permanent Teeth	...	673	
	Temporary Teeth	...	1,172	
	Total	...		1,845
(10) Administration of general anæsthetics for extractions				
				607
(11) Orthodontics—				
(a) Cases commenced during the year	...	...	...	17
(b) Cases carried forward from previous year	...	...	...	26
(c) Cases completed during the year	...	...	...	23
(d) Cases discontinued during the year	...	...	...	6
(e) Pupils treated with appliances	...	...	...	19
(f) Removable appliances fitted	...	...	...	20
(g) Fixed appliances fitted	...	...	...	—
(h) Total attendances	...	...	...	137
(12) Number of pupils supplied with artificial dentures				
				9
(13) Other operations	Permanent Teeth	...	618	
	Temporary Teeth	...	869	
	Total	...		1,487

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				
In the Calendar Year:—	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
A. Handicapped Pupils newly placed in Special Schools or Homes ...	—	—	—	—	—	1	4	—	—	5
B. Handicapped Pupils newly ascer- tained as requiring education at Special Schools or Boarding in homes ...	1	—	—	1	1	3*	7	—	—	13
*One child with Speech Defect.										
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, 1958:—										
C. Number of Handicapped Pupils from the area—	—	—	—	—	—	—	—	—	—	—
(i) attending Special Schools as Day Pupils ...	6	—	3	3	—	6	13	—	2	33
Boarding Pupils ...	—	—	—	—	—	—	—	—	—	—
(ii) were on the registers of Independent Schools (un- der arrangements made by the Authority) ...	—	—	—	—	1	—	8	—	—	9
Total (C) ...	6	—	3	3	1	6	21	—	2	42

TABLE VII.

I.—STAFF OF THE SCHOOL HEALTH SERVICE

(excluding Child Guidance)

Principal School Medical Officer: JOHN ALLAN GUY

Principal School Dental Officer: MICHAEL DESMOND McGARRY

	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	2.5
Speech Therapists	1	1.0
School Nurses	32	2.5
Number of above holding H.V. Cert....	18	—
Nursing Assistants	—	—
Dental Attendants	3	2.5
Dental Anæsthetist (part-time) ...	1	0.1

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 Unit

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 ...	—	—
B. Dental ...	4	—
C. Ophthalmic* ...	1	—
D. Ear, Nose and Throat ...	—	—
E. Orthopædic ...	—	—
F. Pædiatric† ...	—	—
G. Speech Therapy ...	3	—
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 ... 1

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.