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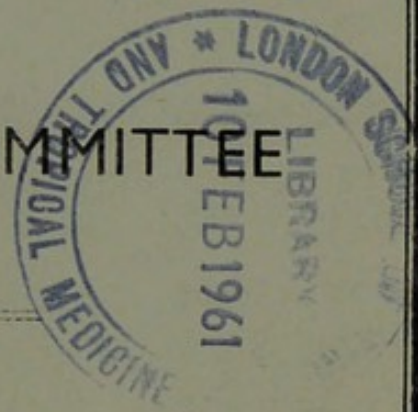
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CITY OF



CARLISLE

EDUCATION COMMITTEE



ANNUAL REPORT

UPON THE

School Health Service

FOR THE YEAR 1955

BY

JAMES L. RENNIE

M.D., F.R.F.P.S. (Glas.), D.P.H.

PRINCIPAL SCHOOL MEDICAL OFFICER

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CITY OF BOSTON

EDUCATION COMMITTEE

ANNUAL REPORT

SCHOOL HEALTH SERVICE

FOR THE YEAR 1914

BY THE COMMITTEE

OF THE CITY OF BOSTON

PRINTED BY THE CITY OF BOSTON

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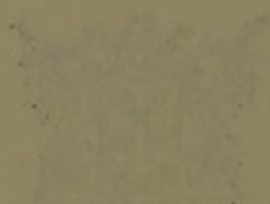
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PRINCIPAL SCHOOL MEDICAL OFFICER

*To the Chairman and Members
of the Education Committee.*

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit my Annual Report on the School Health Service for 1955.

This year has been largely one of consolidation of schemes already in force. Recruitment difficulties prevented the inauguration of the joint orthoptic service arranged last year, but we have been fortunate in having the services of Cumberland County Orthoptist for one, and latterly two, sessions per week. The schemes for B.C.G. Vaccination and the Mantoux testing of infant school children have both progressed and been of value.

As a result of the findings of the survey of children suffering from Cerebral Palsy conducted in 1954 approval of the Ministry of Education was given to the establishment of a special class for Spastics in the H.K. Campbell School and this class was opened in May of this year.

The Minor Ailment Clinic at Inglewood Infants' School has become firmly established and is much appreciated. It has been possible to carry out Diphtheria Immunisation sessions and Mantoux testing at this Clinic and save parents the inconvenience of bringing children into the central clinics with consequent loss of educational time.

Miss Barrett, the Dental Officer, left the service and her place was taken by Miss Rothwell.

The Hospital Consultants have continued to hold special sessions at the Council Clinics in connection with Ear, Nose and Throat, and Eye conditions, Orthopaedics and Child Guidance as in previous years.

I should like to thank Mr. R. S. Venters, Dr. A. Ross Wear, Dr. A. T. G. Evans, Mr. W. McKechnie, Miss F. E. Soutter, and Dr. J. Braithwaite for their valued help in this connection.

I should like to take this opportunity of expressing my thanks to the members of the Education Committee for their support and to all members of the staff of this Department for their unfailing loyalty and industry. I also wish to give thanks to the Director of Education, Head Teachers and their staffs for their valued contribution to the success of the School Health Service.

I am,

Mr. Chairman, Ladies and Gentlemen,
Your obedient Servant,

JAMES L. RENNIE.

Principal School Medical Officer.

STATISTICAL SUMMARY

The following is a summary of the work done by the section, apart from Specialist Clinics, throughout the year.

Average No. on Rolls	10440
No. of "Routine" Inspections	4230
No. of Children ("Routine" Inspections) referred for Treatment excluding Dental Diseases	723
No. of Children ("Routine" Inspections) referred for observation	969
No. of "Special" Inspections	3149
No. of Re-inspections	5956
Total No. of Inspections	13335
No. of Parents interviewed at "Routine" Medical Inspections (79%)	3343
No. of Visits to Schools by School Medical Officers	217
No. of Visits to Schools by Health Visitors	620
No. of Visits to Homes by Health Visitors	958
No. of Cases treated at the Clinics	2785
No. of Attendances at Clinics for Treatment	9847
No. of Children examined by School Dentists	5567
No. of Children treated by School Dentists	2992

MEDICAL INSPECTION

The practice of examining school children routinely 4 times during their school life was continued as in previous years. Parents were encouraged to be present at such examinations and their attendance afforded a good opportunity for health education and the answering of their personal questions. The provision of a medical room in schools recently built has greatly facili-

tated medical examinations as well as enabling the nursing staff to conduct cleanliness inspections in greater privacy. Such rooms not only allow the Health Department staff to carry out their duties with minimal interference to the school routine, but provide Head Teachers with facilities for the isolation and attention to any child who takes ill in school. It is regrettable, therefore, that such rooms are not regarded as essential in any modern school and not included as compulsory in the Standards for School Premises Regulations.

4,230 children were examined of whom 79 per cent. were accompanied by their parents. 2,538 of these children were found to be free of obvious defect, but in the remaining 1,692 children 2,284 defects were noted.

Table 1 gives the defects noted at the periodic inspection of the 4,230 children and those found in 3,149 children referred for special examination by teachers, school nurses, etc.

During the year 884 children in the 7 year old age group were examined at school for visual defects. As a result 29 were referred for treatment and 125 were noted for further observation.

TABLE 1
FINDINGS OF MEDICAL INSPECTION

Defect or Disease	Periodic Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
Skin	54	32	204	1
Eye	165	555	231	148
Ear	239	65	175	20
Nose and Throat	82	201	153	19
Cervical Glands	12	114	—	33
Speech	25	16	48	3
Heart and Circulation	2	22	—	1
Lungs	40	60	10	1
Nervous System	1	10	4	1
Orthopaedic Defects	195	135	144	5
Other Defects and Diseases (excluding Dental Diseases, and Uncleanliness)	55	204	1298	5
Total	870	1414	2267	237

COMMUNICABLE DISEASES

The infectious diseases will be fully dealt with in the Annual Report of the Medical Officer of Health.

For the sixth year in succession there was a complete absence of diphtheria from the City. There was one case of non-paralytic poliomyelitis. Mumps was the most prevalent infectious disease encountered in the school population. Table 2 shows the number of school children who suffered from the various infectious diseases.

TABLE 2

Scarlet Fever	17
Measles	37
Whooping Cough	92
Pulmonary Tuberculosis	4
Food Poisoning	2
Dysentery	5
Meningococcal Infection	1
Poliomyelitis (non-paralytic)	1
Mumps	873
Chickenpox	75

Five children were found in school suffering from contagious diseases as shown in Table 3, and were excluded by the School Medical Officers. In addition, your Medical Officers excluded from school 4 children who, though not suffering from communicable diseases, were considered medically unfit to attend school.

TABLE 3

Ringworm of the Scalp and Body	3
Impetigo	2

Verminous children continue to cause annoyance. In spite of an increased number of examinations, however, the numbers found to be unclean have slightly diminished—1.4 per cent. of children examined in 1955, compared with 1.9 per cent. of children examined in 1954. Though there is much room for improvement, the trend is in the right direction. Table 4 shows the incidence of uncleanliness throughout the year.

TABLE 4

Total number of examinations	25869
Number of children found	
verminous	178
Number of children found	
with Nits	172
Number of children found	
with other conditions	10
	360

Number of these allowed to continue at school under supervision	252
Number excluded from school	98
Number of parents requested to clean dirty or fleabitten body and/or clothing of children	10
Number of children excluded on—	
One occasion	70
Two occasions	17
Three or more occasions	11

SPECIAL PREVENTIVE MEASURES

Diphtheria Immunisation

The immunisation of all possible school children has been continued and it is known that at least 8,996 children of school age, that is, 89.9 per cent. of children in the 5 - 15 age group, had received one complete course of prophylactic treatment by the end of the year.

Prevention of Tuberculosis

The practice of offering Tuberculin (Mantoux Intradermal) Tests to school children in their second year at the infant school was continued.

The parents of 824 children agreed to the tests. 35 of these children gave a positive reaction and were referred to the Chest Clinic for investigation and contact tracing. As a result of these tests four unsuspected cases of tuberculosis (two adults and two children) were brought to light.

B.C.G. Vaccination was again offered to all children in the 13 - 14 year age group. Table 5 sets forth the numbers seeking and receiving this form of protection.

TABLE 5

B.C.G. Vaccination of 13 - 14 Age Group

(i) No. whose parents wished B.C.G. vaccination	657
(ii) No. of above who gave positive reaction to Mantoux Test (1/1,000 OT)	108
(iii) No. who gave positive reaction to second Mantoux Test (1/100)	128
(iv) No. not requiring B.C.G., i.e., (ii) plus (iii)	236
(v) No. who received B.C.G.	371
(vi) No. who had not completed treatment at end of year	50

As in previous years, all teachers and pupils about to leave school were offered examination by the Mass Miniature Radiography Unit during the summer term. Table 6 sets out the numbers who availed themselves of this opportunity in 1954 and 1955.

TABLE 6

	1954	1955
No. of pupils examined ...	1369	1968
No. of teachers examined ...	243	267

MEDICAL TREATMENT

The City Council provides the following clinics:—
The School Clinic at 2 George Street affords provision for:

1. Special inspections and examinations by School Medical Officers.
2. Minor Ailment Clinic.
3. A Scabies, etc., Cleansing Station.
4. Immunisation Clinic.
5. Ophthalmic Clinic.
6. Ear, Nose and Throat Clinic.
7. Speech Therapy Clinic.
8. Accommodation for Educational Psychologist.
9. Child Guidance Centre.

The Health Department Clinic at Eildon Lodge, 50 Victoria Place provides, on behalf of the Education Authority, facilities for—

1. Priority Dental Services.
2. Orthopaedic Clinic.
3. Medical Officers' special examination clinics.

In my last report I referred to the Minor Ailment Clinic which was conducted in the Medical Inspection Room at Inglewood Infants' School, Harraby. This Clinic has proved very successful and is popular with children, parents and school staff.

Minor Ailments

The Minor Ailments Clinics were conducted by the School Nurses as in previous years.

The number of cases treated (excluding scabies) at the School Clinics during the year was 2,770* and 9,847 attendances were made. The results of treatment obtained are shown in Table 7.

TABLE 7

Cured	...	...	...	...	...	...	2555
Improved	...	...	...	...	...	...	17
Ceased attending or failed to complete their course of treatment	...	...	...	...	...	...	93
Referred to Hospital	...	...	...	...	...	...	27
Attending Medical Practitioners	...	...	...	...	...	...	53
Still attending for treatment on 31st December, 1955	...	...	...	...	...	...	25

In addition, 15 cases of scabies attended for advice and treatment; practically all were treated at the Cleansing Centre.

*This figure includes children shown in Table IV., Groups I, II, III and VII of the Ministry's Returns on pages 35 and 36.

DENTAL INSPECTION AND TREATMENT

By T. W. GREGORY, L.R.C.P.S., L.D.S.

Principal School Dental Officer

In 1954 we had the services of two whole-time dental officers. This year for two months we were single-handed. This was partly due to losing the services of Miss Barrett on the occasion of her marriage, and an interval elapsing before Miss Rothwell took her place, and partly due to illness.

Periodic inspection of the children is carried out in the schools, but it is worth noting that of a total roll of 10,440 children in the schools, only 3,941 were inspected in this way during the year, and 2,992 children were actually treated. As we only inspect as many as can be offered treatment reasonably soon afterwards, these figures give a rough indication of the staff necessary to cope with the whole school population annually. Allowance has to be made for the number of "specials" inspected and treated, but the position remains as indicated even taking into account the increasing number of children receiving conservative treatment through the general dental services. We are in a particularly favourable position to observe this present trend, which, in my view, is due largely to the availability of these services free of cost till the age of 21, and a diminished demand from the adult population.

29 half-days were devoted to inspection and 825 to treatment. A total of 3,056 fillings were inserted, and extractions numbered 3,869. More deciduous teeth were extracted than in the previous year. This figure is apt to vary according to the number of young children inspected in a particular year, and according to the policy of individual dental officers. We had as usual the services of your medical officers as anaesthetists, as well as a specialist, Dr. McMillan, who comes once a week and for whom generally the more difficult cases are reserved.

101 of the 825 half-days devoted to treatment were sessions held for orthodontic work, and a certain amount of prosthetic cases are dealt with at the same time. The latter consist largely of partial dentures, but also include repairs and the occasional dentures for expectant or nursing mothers.

The orthodontic cases undertaken are mostly what is generally termed the simple type of case, but quite a number of moderate difficulty are treated, some with good results, most with improvement, and a few which are frankly disappointing. We have occasionally in the past referred difficult cases to Professor Hallett, in Newcastle, for advice or treatment, and received much valued help. Obviously, however, particularly where numerous visits are required, distance and other factors are an obstacle.

At a recent meeting of Local Authority Officers with Officers of the Regional Hospital Board it was agreed that every endeavour should be made to establish an Orthodontic Consultant Service in the Special Area. It is to be hoped that the Hospital Board will be able to provide this much-needed service in this area at a very early date. The visiting of Carlisle by an Orthodontic Specialist would enable the more difficult cases to receive regular supervision without the necessity of children having to travel to Newcastle.

The work done by your Dental Officers for expectant and nursing mothers and pre-school children does not come within the scope of this report, nor are special sessions reserved for these classes, but it is relevant to point out that the equivalent of approximately 28 sessions was devoted to their care.

91 children were referred for x-ray and 522 other operations were performed. The figures relating to dental defects can be found tabulated on page 37.

In conclusion, thanks are due to all those who, directly or indirectly, have facilitated the work of this important service of your Committee.

EAR, NOSE AND THROAT DEFECTS

The Specialist Clinic for ear, nose and throat defects was, as in previous years, conducted by Mr. R. S. Venters, F.R.C.S., at the George Street premises, on 22 occasions. This clinic has continued to deal with children of all ages, irrespective of the schools attended. A total of 528 (467 school and 61 pre-school) children were examined. The young patients seen at this clinic could have any necessary operative treatment carried out at the City General Hospital by Mr. Venters, and during the year 268 (222 school and 46 pre-school) children received such treatment. 8 school children were admitted to hospital for non-operative treatment.

During the year 11 children were referred for x-ray examination and 9 for pure tone audiometer tests. Three children (1 school and 2 pre-school) were recommended for hearing aids and were supplied with them. In addition, one child whose parents had refused a hearing aid in 1954 was fitted with one, prior parental consent having been obtained.

Professor and Mrs. Ewing and their staff at Manchester University have, as in previous years, been available to examine and advise on the education of deaf and partially deaf children referred by the Council's medical staff. One such child was referred and he was recommended for admission to a special school for the deaf, but he has now removed from this area. Two children who had previously been seen by Professor and Mrs. Ewing were admitted to residential schools, one to a school for partially deaf, the other to a school for the deaf.

At the time of writing arrangements are in hand for the examination of children attending infant schools by pure tone sweep test audiometer.

DEFECTS OF THE EYES

Dr. Ross Wear continued to act as Consultant Ophthalmologist at the School Clinic until October, 1955, when Dr. A. T. G. Evans took over this work. Sessions were held on 48 occasions. In all, 529 (491 school and 38 pre-school) children were examined at the clinic. Of the school children 127 were being examined for the first time and 364 were being re-examined, generally with a view to ascertaining whether they required a change of spectacles. In 62 of the latter cases the existing spectacles were found to be satisfactory, but among the others spectacles were prescribed in 390 cases.

Of the school children examined above, 137 suffered from squint in greater or lesser degree.

11 school children were found to have lesions other than visual defects and the conditions encountered are shown in Table 8.

TABLE 8

Blepharitis	...	...	...	...	...	5
Conjunctivitis	.	...	...	...	...	1
Choroiditis	...	...	...	...	...	2
Watering Eye	...	...	...	...	...	1
Ptosis	...	...	...	...	...	1
Congenital Defect	...	...	...	...	...	1

ORTHOPTIC TREATMENT

Owing to inability to recruit the necessary staff, the joint orthoptic service envisaged in my last report has not materialised, but the County Medical Officer continued to make available to us the services of the County orthoptist. In the first part of the year one session per week was available and this continued until June, 1955, when the then orthoptist, Miss Brown, left the service. Miss Hodson, the present orthoptist, took up her duties in September, 1955. I am indebted to her for the following report :

In October, 1955, it was found necessary, and possible, to increase the number of sessions given to City children from one to two per week, as the waiting list of children requiring orthoptic treatment had grown so long. This has helped a great deal and the waiting list is now only four months instead of one year and rapidly getting shorter.

There was no orthoptist in Carlisle from June to September, 1955, and this, of course, set some patients back a bit, especially those attending for occlusion to cure "lazy eyes," but once treatment was started again they soon made up the ground they had lost.

Attendance, on the whole, is very good and there have been few cases who have failed to attend for treatment.

Number of cases seen during 1955:—

January	...	...	...	33
February	.	...	...	33
March	...	...	...	33
April	...	...	...	32
May	...	...	...	30
June	...	...	...	31
September	.	...	...	18
October	...	...	...	35
November	.	...	...	67
December	.	...	...	25

Yearly Total **337**

Number of new cases seen during 1955 ... 72

Number of new cases taken on treatment ... 33

Number of patients discharged during 1955

Cured	...	...	...	...	2
Cosmetically satisfactory	...	...	...	...	6
Improved	...	...	...	...	2
Not responding to treatment	...	...	...	...	1
Failed to attend	...	...	...	...	3

Total Discharged **14**

Number of patients attending in December, 1955, for:—

Treatment	...	...	...	...	...	7
Occlusion	...	...	...	...	...	6
Observation	...	...	...	...	...	23
Total	...	...	...	...	...	36

ORTHOPAEDIC SERVICE

Mr. W. McKechnie, F.R.C.S. (Ed.) continued to act as Orthopaedic Surgeon and from July to the end of the year we also had the services of Miss F. E. Soutter, F.R.C.S. (Ed.), who had returned to Carlisle as Locum Orthopaedic Surgeon. 28 clinic sessions were held at which 907 (620 school and 287 pre-school) children were examined.

The Remedial Gymnast held Clinics for exercises at which 174 school children made 1,528 attendances. In addition, 121 attendances were made by pre-school children.

Table 9 indicates the type of case treated by her.

TABLE 9

	No. of Attendances
Postural	263
Flat Foot and Knock Knee	975
Individual	290

During the year the Remedial Gymnast visited the homes of school children on 151 occasions and 75 home visits were made to pre-school children.

Plaster shells were provided in 62 (5 school and 57 pre-school) instances. At the After-Care Clinics 855 attendances were made, 503 by school children and 352 by pre-school children.

SCHOOL MENTAL HEALTH SERVICE

Report by Educational Psychologist.

Miss MARY Y. CAMERON, M.A., Ed.B.

During the year 262 children were dealt with. Table 10 shows by whom they were referred.

TABLE 10

Referred by	Boys	Girls	Total
Head Teachers	102	81	183
School Medical Officers	12	5	17
Children's Officer	3	5	8
General Medical Practitioners	11	9	20
Psychiatric Social Worker	2	1	3
Mental Health Worker	5	1	6
Parents	2	4	6
Speech Therapist	5	—	5
Probation Officers	—	—	—
Director of Education	—	1	1
Psychiatrist	3	1	4
School Nurse or Health Visitor	1	2	3
School Welfare Officer	1	3	4
Educational Psychologist	1	—	1
Educational Psychologist (Cumberland)	1	—	1
	149	113	262

In 141 cases treatment was not offered but the children were tested and reports were sent to the Head Teachers and, where appropriate, to the Children's Officer and the Probation Officer. Twenty-seven of these were referred to the Principal School Medical Officer as being unlikely to benefit from education in an ordinary school.

The parents of fifteen children were called to the Centre on one or more occasions and were offered advice; in some cases visits to the homes and schools were also paid, but the children were not directly treated. Fifty-four children attended the centre once a week or oftener and 43 received treatment at less frequent intervals. The parents of nine children refused to avail themselves of the treatment that was offered.

Tables 11 and 12 show the distributions of age and intelligence. Eight children were not tested as testing at this point was deemed inadvisable.

TABLE 11

Age	Boys	Girls	Total
3 +	1	—	1
4 +	2	2	4
5 +	6	9	15
6 +	19	8	27
7 +	35	20	55
8 +	18	14	32
9 +	23	13	36
10 +	16	6	22
11 +	7	12	19
12 +	9	12	21
13 +	6	6	12
14 +	5	9	14
15 +	2	2	4
16 +	—	—	—
	149	113	262

Average Age — 8.8 years

TABLE 12

I.Q.	Boys	Girls	Total
20-29	1	—	1
30-39	1	—	1
40-49	—	1	1
50-59	3	3	6
60-69	6	13	19
70-79	18	25	43
80-89	36	25	61
90-99	44	23	67
100-109	18	7	25
110-119	10	2	12
120-129	5	5	10
130-139	4	1	5
140-149	2	—	2
150-159	—	1	1
	148	106	254

Average I.Q. — 88.7

Eight children with speech defects were referred either to or by the Speech Therapist and attended her sessions concurrently.

Three were on probation.

Forty-six children received remedial teaching in school subjects. All of these children were of average or more than average intelligence. Some were highly intelligent but had failed to learn in school; many, in addition to being backward, suffered from a greater or less degree of emotional disturbance which it was thought could best be treated through the medium of school work. Table 13 shows the numbers who received help in each subject.

TABLE 13

Backwardness

General	Arithmetic	Reading	Spelling	English
5	4	37	1	1

Three group tests of intelligence were carried out at the request of Head Teachers.

The reading ability of all fifteen-year-old school leavers from the non-selective schools was tested towards the end of each of the three terms. This investigation will be made the subject of a separate report.

In 5 cases strong physical factors, and in 19 cases strong home factors, were in whole or part responsible for the child's emotional difficulties. Of these 19, 6 were the children of parents who were either insane or had suffered serious mental breakdown. One had been in association with an insane person in an otherwise excellent foster-home. One girl was motherless and there was no woman in the home to give her the guidance and supervision she needed. In conditions such as these, it is difficult for children to maintain emotional stability.

There was lack of co-operation in three cases where children were withdrawn before treatment could be satisfactorily completed.

On alternate Friday afternoons the Psychiatrist attended for the purpose of consultation and treatment. The pressure on his time was very heavy, with the result that on several occasions he had to interview more parents than is desirable in a single session and some children who would have benefited by his advice were unable to see him at all. Table 14 shows the number of children who attended his clinic and the number of attendances they made. Table 15 shows the various forms of maladjustment from which they suffered.

TABLE 14

		Boys	Girls	Total
No. of children ...	...	26 ...	12 ...	38
No. of attendances	...	52 ...	25 ...	77

TABLE 15

	Boys	Girls	Total
Anxiety Obsessional States	2	2	4
Nightmares, night terrors, Sleepwalking	1	1	2
Eneuresis and Soiling	8	5	13
Emotional Re-tardation and Regression	1	—	1
Psychopathic Personality	1	—	1
Unmanageable Behaviour	5	5	10
Aggression and Temper Tantrums	4	—	4
Sadistic Tendencies	1	—	1
Truancy and Wandering	4	—	4
Irregular Attendance	—	1	1
Pilfering	5	1	6
Untruthfulness	7	1	8
Malicious Mischief	—	—	—
Sexual Offences	—	1	1

The follow-up of discharged cases was continued by the Mental Health Worker. After being discharged, children are visited three times — at the end of six months, a year and two years—and if satisfactory reports are received on each visit, and if these are confirmed by school reports, it is assumed that treatment has been successful. Table 16 gives a summary of the results of this work.

TABLE 16

	Satis- factory		Re- referred		Not at Home		Left City
After 3rd visit ...	18	...	2	...	1	...	4
After 2nd visit ...	16	...	2	...	—	...	2
After 1st visit ...	5	...	3	...	1	...	1
Total ...	39	...	7	...	2	...	7

Of the 7 children re-referred, two were chronic enuretics who must be regarded as unsatisfactory. One had been a member of a small group of backward boys who attended the Centre for remedial reading during 1953. His parents were most anxious that he should resume attendance, but this could not be arranged for, as explained in the report for 1953, such cases are best dealt with by means of a special or progress class in school. One boy who had originally been referred for pilfering is now behaving quite well, but his mother is concerned about his backwardness in reading. He will be called to the Centre during the Spring term. The parents of the other three children who were re-referred by the Mental Health Worker were interviewed and given advice which in two cases seems to have proved effective. In the third case, the parent would not or could not follow the suggestions made and that child has therefore been discharged again.

Three children attended for group play therapy during the Summer term but the mothers of two of them had young babies and found regular attendance too great a strain and the third child was withdrawn. No other group has been formed.

Table 17 shows the types of work done and the extent of each.

TABLE 17

No. of psychological investigations:				
By individual tests	...	...	198	
By parent interviews	...	...	68	
			—	266
No. of visits to the Centre for educational and other therapy	...	...	...	709
No. of visits to the Centre for group play therapy	...	...	...	14
No. of visits of parents to the Centre	...			113
No. of home visits	...	...	...	34
No. of school visits	...	...	...	289

Thanks are due to the Head Teachers, the School Medical Officers, the School Welfare Officers, the Probation Officers, the School Nurses, the Health Visitors, and especially to the Mental Health Worker, for their continued support and co-operation, without which the work of the Centre would have been very much less effective.

SPEECH THERAPY

I am indebted to Miss P. R. Dawson, L.C.S.T., for the following report.

The work of the speech therapy department continued to flourish during 1955. In all, a total of 132 children was interviewed or treated, an increase of 17 on the previous year. Attendance was maintained satisfactorily, and there were fewer cases of non-co-operation than in previous years. In a few cases children on leaving school indicated a desire to continue with their therapy and attended for this purpose outside working hours. For the most part, weekly attendances at the clinic are arranged, but there are exceptions where fortnightly or twice-weekly visits are desirable.

During the year it was decided to try an experiment with a few cases of longer standing. The parents were interviewed with the child, and closely instructed as to what help they should give. Weekly attendances at the clinic were discontinued, but the child continued to work with the parents at home, and visited the clinic only once every three months to review progress. In all cases this has proved satisfactory, and an encouraging improvement was noted.

Speech therapy was judged unnecessary in other cases (usually children of 5 — 6 years) referred to the speech therapist, but general advice was offered to the parents.

Table 18 sets forth work done, while Table 19 indicates the conditions for which treatment was given.

TABLE 18

	Boys.	Girls.	Total.
No. of cases on Roll, 1st Jan., 1955	64	16	80
No. of cases remedied	25	9	34
No. of cases improved	2	—	2
No. of cases left district or left school	5	1	6
No. of cases ceased attending ...	3	—	3
No. of cases re-admitted	—	1	1
No. of new cases admitted	36	15	51
No. of cases on Roll, 31st Dec., 1955	65	22	87

TABLE 19

	Boys.	Girls.	Total.
No. of Stammerers	46	9	55
No. of Dyslalics	43	22	65
No. of Cleft Palate	6	—	6
No. of Partially Deaf	2	—	2
No. of Spastic Dysarthria	3	—	3
No. of Vocal Dysfunction	—	1	1

HANDICAPPED CHILDREN

There is only one special day school for physically handicapped children in the City, namely, the H. K. Campbell School, and children with specialised defects have to go to residential schools if vacancies can be found. Table 20 indicates the provision which was made for various classes of handicapped children.

TABLE 20

In Certified Schools for Blind	1
In Certified Schools for Partially Sighted	1
In Certified Schools for Deaf and Dumb ...	11
In Certified Schools for Partially Deaf ...	2
In Residential Special Schools for Educationally Sub-Normal Children	2
In H. K. Campbell School on 31-12-55—	
Physically Handicapped	49
In Class for Spastic children	3
In Class for Educationally Sub-Normal Children	12

Number of children who received Education from Peripatetic Teacher throughout the year:—

In City General Hospital	22
In their Own Homes	5
Receiving Education at end of year ...	6

26 children were unable to attend school because of mental deficiency of such a grade as to be unable to profit by education in any establishment under the Education Authority. 10 of these children are in institutions and the remainder are under the supervision of the Local Health Authority.

During the year 12 children attended the class for educationally sub-normal children in Denton Holme Junior School.

CEREBRAL PALSY

The review of children suffering from this condition having been completed in 1954, it was necessary to hold only 2 sessions for special ascertainment. Dr. Ellis, Medical Director of the Percy Hedley School for Spastics, visited the City on one occasion, when he held two sessions and examined six children.

During the year a small class for children suffering from cerebral palsy was established in H. K. Campbell School and they attended on three mornings of the week.

H. K. CAMPBELL SPECIAL DAY SCHOOL FOR PHYSICALLY HANDICAPPED PUPILS

At the beginning of the year 65 children were in attendance and 17 were admitted during the year, giving a total of 82 children dealt with. 33 children were discharged, leaving 49 still in attendance at the close of the year. The average length of stay of the pupils was 2 years 8 months. Table 21 gives an indication of the defects from which the children suffered.

TABLE 21

Tubercular—

Pulmonary (non-infectious)	3
Non-Pulmonary	2
Bronchitis and Asthma	26
Debility	23
Malnutrition	3
Heart Disease	5
Orthopaedic defects including Spastics ...	11
Myopia and Partial Blindness	1
Naevus—Left leg	1
Nephritis	1
Pyelonephrosis	1
Muscular Dystrophy	1
Chorea	1
Haemophilia	1
Partially Deaf	1
Ataxia	1

In May, 1955, a special class was instituted for the education of spastic children who had been ascertained by the special panel as suitable for such treatment in this school.

PROVISION OF MILK AND MEALS IN SCHOOLS

Milk

The average number of children on one day in September, 1955, availing themselves of the scheme has been 8,242, as compared with 8,107 last year.

The percentage of children having milk on this set day during the year was 82.4, as against 80.3 in the previous year.

Meals

The following table shows the number of children taking meals (free and paid) on a set day in September, 1955. Comparative figures for 1954 are also shown.

		Free Meals		Paid Meals		Total		% taking Dinner
1954	...	750	...	2777	...	3527	...	34.3
1955	...	769	...	2792	...	3561	...	35.6

CO-OPERATION OF VOLUNTARY BODIES NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

Close co-operation is maintained between the officer of this Association and the staff of the School Health Department, and any information available is freely exchanged. I had, however, no occasion to make an official representation to this Society during the year.

CHILDREN'S SUNSHINE HOME, ALLONBY

This Home, which was open eight months in the year, provided 39 children with a fortnight's holiday, and acknowledgments are tendered to the members of the Carlisle Rotary Club for the conveyance of the children to and from Allonby.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS

77 boys and 14 girls were referred for certification of fitness for employment under the Bye-laws in respect of employment of children and street trading, and all were found to be fit for employment.

EXAMINATION OF TEACHERS

27 candidates for appointment as Teachers by the Local Education Authority were examined, all of whom were found to be medically fit.

During the year the staff of this Department examined and reported on 30 entrants to teachers' training colleges.

HOME VISITING

958 home visits were made by the Health Visitors in their capacity as School Nurses.

DEATHS OCCURRING IN SCHOOL CHILDREN

Five school children died during the year. One death was the result of a road accident. None was due to infectious or contagious disease.

MINISTRY OF EDUCATION MEDICAL INSPECTION RETURNS

TABLE I.
MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY & SECONDARY SCHOOLS
(INCLUDING SPECIAL SCHOOLS)

A.—PERIODIC MEDICAL INSPECTIONS

Age groups inspected and number of children examined in each:—

Entrants	...	...	...	...	...	964
Second Age Group	.	...	...	...	...	965
Third Age Group	...	...	...	...	...	849
						—
Total						2778
Additional Periodic Inspections	...	...	...	...	...	1452
						—
Grand Total						4230
						—

B.—OTHER INSPECTIONS

Number of Special Inspections	...	...	...	...	3149
Number of Re-inspections	...	...	...	...	5956
					—
Total					9105
					—

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with Vermin).

Age groups inspected	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
(1)	(2)	(3)	(4)
Entrants	10	220	184
Second Age Group	27	144	145
Third Age Group	25	81	99
Total	62	445	428
Additional Periodic Insps.	36	327	295
Grand Total	98	772	723

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

Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
	No. of Defects		No. of Defects	
	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
(1)	(2)	(3)	(4)	(5)
Skin	54	32	204	1
Eyes— <i>a.</i> Vision	98	525	109	147
<i>b.</i> Squint	38	20	3	—
<i>c.</i> Other	29	10	119	1
Ears— <i>a.</i> Hearing	6	16	6	6
<i>b.</i> Otitis Media	13	20	64	8
<i>c.</i> Other	220	29	105	6
Nose or Throat	82	201	153	19
Speech	25	16	48	3
Cervical Glands	12	114	—	33
Heart & Circulation	2	22	—	1
Lungs	40	60	10	1
Developmental—				
<i>a.</i> Hernia	1	2	—	—
<i>b.</i> Other	5	14	1	—
Orthopædic—				
<i>a.</i> Posture	9	22	1	—
<i>b.</i> Flat Foot	49	31	30	1
<i>c.</i> Other	137	82	113	4
Nervous System—				
<i>a.</i> Epilepsy	—	2	3	1
<i>b.</i> Other	1	8	1	—
Psychological—				
<i>a.</i> Development	1	29	42	1
<i>b.</i> Stability	3	8	2	—
Other	45	151	1253	4

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

Age Groups Inspected	Number of Pupils Inspected	A (Good)		B (Fair)		C (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	964	207	21.5	735	76.2	22	2.3
Second Age Group	965	272	28.2	665	68.9	28	2.9
Third Age Group	849	228	26.9	587	69.1	34	4.0
Additional Periodic Inspections	1452	345	23.8	1066	73.4	41	2.8
Total	4230	1052	24.9	3053	72.1	125	3.0

**B.—CLASSIFICATION OF THE GENERAL CONDI-
TION OF PUPILS INSPECTED DURING THE YEAR
IN THE AGE GROUPS**

TABLE III.

INFESTATION WITH VERMIN

- (i) Total number of examinations in the schools
by the school nurses or other authorized
persons 25869
- (ii) Total number of *individual* pupils found to be
infested 360
- (iii) Number of individual pupils in respect of
whom cleansing notices were issued (Sec-
tion 54 (2), Education Act, 1944) Nil
- (iv) Number of individual pupils in respect of
whom cleansing orders were issued (Sec-
tion 54 (3), Education Act, 1944) Nil

TABLE IV.

TREATMENT OF PUPILS ATTENDING MAIN-
TAINED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING SPECIAL SCHOOLS)

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

				Number of cases treated or under treatment dur- ing the year.	
				By the Authority.	Otherwise.
Ringworm—(i)	Scalp	...	...	4	—
	(ii) Body	...	...	10	—
Scabies	.	...	...	15	—
Impetigo	...	...	...	118	5
Other skin diseases	...	...	...	65	50
Total				212	55

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

				No. of cases dealt with	
				By the Authority.	Otherwise.
External & other, excluding errors of refraction and squint	.	...	...	126	17
Errors of refraction (including squint)	...	...	...	491	—
Total				617	17

(Regional Hospital Board Specialist is Consultant)

Number of pupils for whom
spectacles were

(a) Prescribed	.	...	...	390	207
(b) Obtained	...	...	...	376†	207

†50 pupils obtained spectacles which were prescribed in 1954

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

	Number of cases treated By the Authority. Otherwise.	
Received operative treatment		
(a) for diseases of the ear ...	—	8
(b) for adenoids and chronic tonsillitis	—	194
(c) for other nose and throat conditions	—	20
Received other forms of treatment	276	113
Total ...	276	335*

*230 of these cases were referred from the Authority's Ear, Nose and Throat Clinic and treated by the Regional Hospital Board Surgeon who attends as Consultant at these clinics.

GROUP 4.—ORTHOPAEDIC & POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals	20	
	By the Authority.	Otherwise.
(b) Number treated otherwise, e.g., in clinics or out- patient departments ...	788	—

GROUP 5.—CHILD GUIDANCE TREATMENT.

	Number of cases treated In the Author- ity's Child Guidance Clinics. Elsewhere.	
Number of pupils treated at Child Guidance Clinics	38	—

GROUP 6.—SPEECH THERAPY.

	Number of cases treated By the Authority. Otherwise.	
Number of pupils treated by Speech Therapist	132	—

GROUP 7.— OTHER TREATMENT GIVEN

	Number of cases treated By the Authority. Otherwise.	
(a) Miscellaneous minor ailments .	1174	62

TABLE V.
DENTAL INSPECTION AND TREATMENT CARRIED
OUT BY THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers:—					
(a) At periodic inspections	...	...	...	...	3941
(b) As Specials	...	...	...	...	1626
				Total (1)	5567
(2) Number found to require treatment	...	...	...		3964
(3) Number offered treatment	...	...	...		3678
(4) Number actually treated	...	...	...		2992
(5) Attendances made by pupils for treatment	...	...	...		6211
(6) Half days devoted to: Periodic Inspection	...	...	...		29
	Treatment	...	...		825
				Total (6)	854
(7) Fillings: Permanent Teeth	...	...	...		2844
	Temporary Teeth	...	...		212
				Total (7)	3056
(8) Number of teeth filled: Permanent teeth	...	...	...		2183
	Temporary teeth	...	...		195
				Total (8)	2378
(9) Extractions: Permanent teeth	...	...	...		1114
	Temporary teeth	...	...		2755
				Total (9)	3869
(10) Administration of general anaesthetics for extraction	...	...	...		2036
(11) Other operations: Permanent teeth	...	...	...		458
	Temporary teeth	...	...		64
				Total (11)	522

