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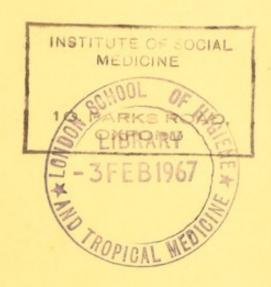
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County Borough of Halifar

EDUCATION COMMITTEE

Annual Report

on the

School Health Service

for the Year 1947

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COUNTY BOROUGH OF HALIFAX. MEDICINE

Education Committee, PARKE ROAD,

Chief Education Officer: C. E. GENT, M.A.

STAFF OF THE SCHOOL HEALTH SERVICE.

School Medical Officer:

George C. F. Roe, M.R.C.P., L.R.C.S., D.P.H., D.P.M.

Assistant School Medical Officers:

Francis Mautner, M.D. (Prague). Emily J. Kelly, M.B., B.Ch., B.A.O.

Part-time Ophthalmic Surgeon:

Robert W. Greatorex, M.B., Ch.B.

Part-time Orthopædic Surgeon:

Geoffrey Hyman, M.B., Br.B., F.R.C.S. (Eng.), L.R.C.P.

Part-time Auralist:

William Oliver Lodge, F.R.C.S. (Edin.)

Dental Surgeons:

Frank H. Richardson, L.D.S., R.C.S. Thomas A. A. Eaves, L.D.S., R.C.S.

Dental Attendants:

Audrey Bedford (Resigned July 9th). Eileen Burrows (Appointed August 5th).

Nursing Staff:

Ethel Dowd (Senior Nurse, Resigned January 31st), Dorothy B. Parkinson (Senior Nurse, Appointed August 18th), E. Winifred Birkhead (Resigned September 18th), Frances Sergeant (Resigned June 30th), Lilian Snaith, Mary Denham, Sylvia L. P. Good (Appointed August 18th), Martha L. Ingham (Temporary—November 3rd to December 13th), Constance Greaves (Appointed December 8th).

Orthopædic Staff:

Sophie Dudgeon (Supervisor & Organiser of Physical Training), Doreen M. Foers, M. Roberta Davies (Resigned August 31st), Rosa Enderby (Part-time), Nora Chatterton, Doreen Greenwood (Junior Assistant).

Speech Therapist:

Mrs. M. Moore-Blake, M.A., L.C.S.T. (Part-time).

Orthoptist:

Margaret L. Harris (Resigned October 31st).

Clerical Staff:

Chief Clerk: Louis Trigg.

Assistants: Joan Longbottom, Francis M. Blakemore, Jessie Grundy (Immunisation Service, part-time; School Medical Service, part-time).

Annual Report

on the School Health Service for the year 1947.

To the Chairman and Members of the Education Committee.

Ladies and Gentlemen,

I have the honour to present the Annual Report dealing with the School Health Service for the year 1947.

The Report, as in former years, has been prepared by Dr. F. Mautner and Dr. E. J. Kelly.

Co-operation between the Public Health Service, the Maternity and Child Welfare Service and the School Health Service was well maintained.

During the period under review the health of the school population was good. With regard to infectious diseases school closure was not resorted to. Better results are to be expected from the exclusion of suspects and "carriers" and the supervision of contacts by the school medical and nursing staff. In this connection the co-operation of the teachers is invaluable.

Once again attention must be directed to the fact that adequate sleep—as regards quality and quantity—is absolutely essential for school children. In my opinion the sleep of many children to-day is inadequate.

I wish to record my appreciation of the work of the medical, nursing and clerical staff. My thanks are also due to the teaching staff for their co-operation.

I have also to thank the Chairman and Members of the Education Committee for their encouragement and assistance in all matters pertaining to the welfare of the School Health Service.

I am, Ladies and Gentlemen,

Your obedient servant,

G. C. F. ROE,

Medical Officer of Health and School Medical Officer.

Public Health Department, Powell Street, HALIFAX.

SCHOOL CLINICS.

		W		ime.
Name.	Purpose.	Where held.	Days.	Hours.
Inspection	Examination of cases sent by Teachers, School Attendance Officers, etc.	Horton St.	Tuesdays to Fridays	2-0 to 4-30 p.m.
Minor Ailments	Treatment of Minor Diseases of Skin, etc.	Horton St. Bermerside Home	Daily Daily	9-0 a.m. to 12-0 noon 2-0 to 5-0 p.m. 10-0 a.m. to 12-0 noon
		Ovenden	Mondays to Fridays	9-0 a.m. to 12-0 noon
Dental	Dental Treatment	Horton St.	Daily	9-30 a.m. to 12-0 noon 2-0 to 5-0 p.m.
Ophthalmic	Treatment of Visual Defects, Measuring and Fitting of Spectacles	Horton St.	Tuesdays Wednesdays Other days as required	10-0 a.m. to 12-0 noon do.
Speech Defects	Speech Training	Akroyd Place School	Tuesdays & Thursdays	
Orthopædic		Horton St.	Wednesdays	2-30 to 4-30 p.m.
Tonsils and Adenoids	Treatment of Tonsils and Adenoids	General Hospital Halifax	Mondays to Wednesdays	
Remedial Exercises	Treatment of Deformities	Horton St.	Daily	9-0 a m to 12-0 noon 2-0 to 5-0 p.m.
		Bermerside Ovenden	Tuesdays Wednesdays Thursdays	10-15 a.m. to 12-0 noon 2-0 to 3-0 p.m. 2-0 to 5-0 p.m.
X-Ray Treatment of Ringworm		Royal Halifax Infirmary	As required	
Employment of School Children	Examination as to fitness to follow part-time employment	Horton St.	Saturdays	9-30 a.m. to 12-0 noon
Ultra Violet Ray Treatment	For treatment of Anæmia, Debility etc.	Horton St.	Mondays Tuesdays Thursdays Fridays	2-0 to 5-0 p.m.
Immunisation against Diphtheria		School premises and Horton St.	Alternate Mondays	2-30 to 3-30 p.m.
Psychiatric Clinic	Child Guidance Cases	General Hospital Halifax	By Appointment	
Orthoptic Clinic	Cases of Squint, etc.	Haugh Shaw Secondary School	Clinic closed	pro tem,

Education Committee.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

The year 1947 has been one of steady progress for the School Health Services.

More time has been given by the Doctors to the re-inspection of children found at Routine Medical Inspection to have defects. The attendance at Minor Ailment Clinics has greatly increased. On some mornings more than 100 cases have been treated. Afternoon sessions are now held for the treatment of Minor Ailments, and these also are largely attended.

The raising of the school leaving age, and the inclusion of the day students at the Technical College, have also had their effect on the work of the services.

Ultra Violet Ray treatment for school children is now given solely at the School Clinic and has gradually increased during the year.

Glasses have been supplied to every child for whom a prescription has been given by the Eye Specialist, with the exception of one case. The Optician attends the Clinic twice a week to measure the children for glasses, after they have been examined by the Eye Specialist, and every new pair of glasses is fitted before being handed to the children.

Immunisation against Diphtheria has been carried on throughout the year. A large percentage of the school population has now had the full course, and a good number of those treated in earlier life, are now coming for "boosting" doses.

Owing to shortage of nursing staff in the early part of the year, it was not possible to give the attention necessary to Cleanliness Inspections at schools. With the increase of staff in the latter part of the year, this matter is now being adequately attended to.

The Dental Service is showing steady progress, and much more preservative work is being done. Arrangements are in hand for Orthodontic Treatment, and the work will be started as soon as the necessary accommodation is ready.

The work of the Orthopædic Department has continued in its usual efficient manner, but has been handicapped by shortage of staff. Children requiring Surgical Appliances, etc., are now measured and fitted at the School Clinic by the Surgical Instrument manufacturer.

The arrangements for treating children for more serious defects at the Royal Halifax Infirmary and the General Hospital are working satisfactorily.

Full details of the services are given in the following pages of this report.

Medical Inspections.

As usual, medical inspections were carried out in all schools in the borough, Primary, Secondary and Nursery, and consisted of:—

(a) Routine Medical Examinations of the usual age groups.

However the old custom of examining every child in the Grammar schools has been discontinued and they now fall into line with all the other Secondary schools. The day students under 18 years of age at the Technical College also had routine medical inspection during the year under review.

For the numbers of children examined at routine medical inspections see Table I.

(b) Re-inspections.

Re-examination of all children, who on routine examination were found to be suffering from some defect, was carried out at more frequent intervals than in previous years, and it is hoped we shall be able to continue our more frequent visits to the schools, which give the teachers more opportunity of bringing forward cases, which in their opinion require medical attention.

Miscellaneous Examinations.

This group consists mainly of school children who wish to engage in part-time employment. Owing to the raising of the school-leaving age, the numbers of such children have increased considerably so as to help the family budget. The main trend of employment is in the delivery of newspapers for a short time before and after school hours.

The following are the figures regarding the certificates granted:

- 85 boys and 15 girls were granted full certificates for the delivery of newspapers.
- 3 boys were granted certificates for the restricted delivery of newspapers.
- 1 boy was refused a certificate on grounds of debility.
- 2 boys were granted certificates for errand going.
- 12 girls were granted certificates for dancing in pantomime.

Medical Inspections at the School Clinic.

The programme for medical inspections at the School Clinic has not altered since 1946.

Four afternoon sessions a week took place, two by each of the school doctors. The total number of clinic sessions held during the year under review was 158. The number of new cases seen by the doctors was 2109; re-examinations numbered 662. As usual there was a very satisfactory attendance by the parents of these children at the consulting clinics, the figure for this year being 1802.

Principal Defects noted at Medical Inspections in General.

Apart from the usual complaints such as ear, nose, throat, chest and general debility defects, the only case which seems to have become more prominent is the neurotic child. With the help of our psychiatrist, it seems to us that most of these cases are a reflection on unsatisfactory home life, and usually take the form of bedwetting, various tics, and in a few cases, mild paralysis of an hysterical nature.

Treatment.

Owing to the close liason between the School Health Service and the hospitals, specialist advice and treatment has been made possible where necessary for all children. Treatment for all minor allments has been carried out as usual, and there is a definite increase in the numbers attending the School Clinic.

Owing to the epidemic of infantile paralysis, all tonsil and adenoid operations were stopped for 5 months, July 8th—Dec. 2nd. During the year under review there were 145 operations done at the General Hospital for tonsils and adenoids and one operation for adenoids alone.

Scabies.

142 cases were treated by the nurses at the School Clinic. It is our aim to avoid treatment at home by the mother of an infected child, as treatment under such circumstances is not usually wholly satisfactory no matter how conscientious the mother might be.

Cleanliness Inspections.

The cleanliness inspections as provided for under Section 54 of the Education Act 1944, have been carried out in full, and the necessary forms depending on the various degrees of uncleanliness have been issued. It has not been found necessary during the year to compulsory cleanse or take proceedings against any persons.

Infectious Diseases.

For the numbers of schools visited, children examined, etc., see Table VIII.

The outbreak of infantile paralysis in Halifax was small, only 3 cases being reported.

The number of diphtheria cases notified during 1947 was 25, compared with 9 the previous year.

41 cases of scarlet fever were notified, compared with 38 cases the previous year.

The outbreak of chickenpox at the schools was more marked during the year under review, than in 1946.

Ringworm.

Number of specimens submitted was 50, 11 of which were positive.

Treatment of ringworm of the head was carried out at the Royal Halifax Infirmary, while that of the body was dealt with at the School Clinic.

Tuberculosis.

Number	Site	Positive	Negative
23	Pulmonary	1	22
5	Cervical Adenitis	3	2
-	Bone		_
1	Abdomen		1

Diphtheria Immunisation.

Injections of TAF were as usual carried out at fortnightly intervals at the School Clinic.

The total number of children who attended was 449, and made 841 attendances, but of these 185 received one boosting dose only, having already been immunised in early childhood.

Artificial Sunlight Treatment.

Two sessions weekly have been carried out on the School Clinic premises since the end of February, 1947. 64 children received treatment and a total of 945 exposures were given.

30 cases received 450 treatments at the Maternity and Child Welfare Clinic.

It is hoped that when the necessary alterations have been carried out on the premises adjoining the School Clinic, we shall be able to instal a much bigger lamp and hold 4 sessions a week.

Handicapped Pupils.

The following is a list of the children, who through some disability of mind or body, have had to have special educational treatment:—

Defect			Boys	Girls	Total
Blind			 		_
Partially sight	ed		 2	1	3
Partially deaf			 -	2	2
Epileptic			 	1	1
Maladjusted			 1	0	1
Physically han	dicap	ped	 1	1	2
Diabetic			 _		_

Educationally Subnormal.

To go to special school		15	14	29
To go to boarding schools		4	2	6
To remain at ordinary school special educational treats		20	9	29
To be re-examined		8	5	13
To be referred to the Local	Author	ity 3	3	6

The delicate children attend either the local residential or open air school, an account of which is given on pages 9 and 10 in this report.

In Halifax, we are lucky in having a special school for educationally subnormal children, the activities of which are described on page 19.

The maladjusted child still has the opportunity of psychiatric advice and treatment which is carried out at the Halifax General Hospital.

Once again we are taking this opportunity of expressing our thanks to the Head Teachers and their Staffs, the Staff of the School Clinic, and to the Education Committee, for their co-operation in enabling us to work as a team in the interests of the school child.

F. MAUTNER, M.D. (Prague). E. J. KELLY, M.B., B.Ch., B.A.O.

BERMERSIDE OPEN-AIR SCHOOL, No. 29,477.

As in previous years children admitted to the Open-air School were selected in their majority at school medical inspections or at school inspection clinics. Others were recommended for admission by private doctors and other departments dealing with the welfare of school children.

As to the type of children admitted, they were the same as in previous years, that is, delicate children due to anæmia, general or nervous debility, pre-tubercular stages or contacts of tuberculosis. Further, some rheumatics with or without mild affection of the heart, chronic bronchitis with or without asthma, and a very few myopics.

I should like to point out that cases of malnutrition are getting very rare and that most cases, of asthma particularly, are rapidly improving by attending the Open-air school.

Cases of open tuberculosis are not dealt with in the Open-air School.

All the Open-air School children are regularly medically examined.

No. o	f chi	ldren on	register,	Jan	uary 7th,	1947		116
No. o	f chi	ldren ad	mitted du	iring	the year			47
No. o	f chi	ldren re	-admitted	dur	ing the ye	ear		14
No. of	f chil	dren dis	scharged	durii	ng the yea	ar		47
Avera	ge p	eriod of	stay			1 yr.	51	mths.
Avera	ge ir	icrease	in weight				2	8 kg.
Highe	est ga	ain in w	eight				5	3 kg.
Avera	ge ir	crease i	in height				2.	5 cm.
Highe	est ga	ain in he	eight					6 cm.
Medic	al Ir	spection	ns					39
No. o	f Ex	aminatio	ons					409
Avera	ge a	ttendano	e:					
1938		83'1	1942		80.9	1946		85.7
1939		94.3	1943		80.7	1947	***	82.6
1940		85'1	1944		80.9			
1941		83.3	1945		76'9			

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BERMERSIDE HOME, No. 59,545.

In former years the Home was a real residential school, that is, the inmates received their schooling in the home-premises. A few years ago this was changed and the children were sent along to the Open-air School which is situated in the same grounds. The teaching in the home itself was discontinued.

Though there is accommodation in the home for 30 children it has not been possible to fill the home to capacity on account of shortage of staff.

Selection of children for the home is made in the same way as for the Open-air School and the type of cases admitted is also the same as for the Open-air School only in a worse degree.

Also as far as the home is concerned it has been particularly noticed how some cases of chronic bronchitis with asthma have quickly improved while in residence.

Cases of open tuberculosis are not admitted to the home. The children are regularly medically examined.

No. on register at beginning of	year			5
Admitted during the year				19
Discharged during the year				14
Average period of stay		6 mths	. 12 0	lays
Average increase in weight			2'848	kg.
Highest gain in weight			5'625	kg.
Average increase in height			2'56	cm.
Highest gain in height		***	6'35	cm.
Medical Inspections				30
No. of Examinations				132

F. MAUTNER, M.D. (Prague).

DENTAL INSPECTION AND TREATMENT.

Inspection.

The number of children inspected in the schools by the Dental Officers was 10,122, and in addition 1,225 were inspected at the Clinic as a result of their attendance as special cases for the relief of toothache, or brought on the initiative of their parents for advice or treatment.

It was found possible to visit a number of schools a second time during the year, and 3,738 children were re-inspected.

These inspections occupied 130 sessions, and the average number of children inspected each session was 106.

Treatment.

At the inspections 5,529 children were found to require treatment, and of this number 5,156 wished to be treated at the Clinic, and made altogether 8,155 visits for this purpose.

In the case of infants and young children the decision to accept or refuse dental treatment rests largely with the parents. With the older children the decision rests ultimately with the child itself, as any treatment for the preservation of the permanent teeth can be carried out successfully only with the acquiescence and co-operation of the patient.

When in 1931 the dental service was extended to include all children attending school, the older children, not being used to regular inspection and treatment, were inclined to delay acceptance until driven to it by pain. There was also considerable prejudice on the part of both parents and children to any form of treatment other than extractions. When children could be persuaded to have fillings these had to be of the simplest form, and often hurriedly done or the child would not attend. Since that time there has been a steady improvement in this attitude, and much of the prejudice and lack of co-operation has been overcome, and now by the time children reach secondary school age the majority are used to regular treatment whenever necessary.

A number of years ago a policy was adopted, in selected cases where it was felt that it would be appreciated, of using a local anæsthetic when filling teeth. The results of this policy were so successful that it has been extended in the ensuing years until it is now regarded as the routine method to be used in the great majority of cases.

Older children are now prepared to allow of much more time being spent over the treatment, and this results in a much higher standard of work, and much more durable restorations of the permanent teeth.

Unfortunately, once these patients leave school the question of having their teeth examined and treated becomes a matter of personal initiative, and there is little room for doubt that during the years immediately after leaving school there sets in a period of neglect that results in the early loss of the teeth of many of the adult population. In this connection it is interesting to note that when the scheme was extended to include the younger students of the Senior Technical College there were a number of cases where regular treatment had been obtained whilst at school, and then no further treatment during the next two years, and then a prompt acceptance when the opportunity was offered of resuming their attendance at the Clinic.

Our thanks are once again extended to the Head Teachers and Staffs in the schools for their continued co-operation and interest.

F. H. RICHARDSON, L.D.S., R.C.S. (Eng.)
Senior Dental Officer.

APPENDIX C

OPHTHALMIC CLINIC.

The number of children attending the eye clinic shew a marked increase on the previous years. This is largely due to a better "follow-up" consequent on the re-organisation of the system of noting the preliminary attendances at the Clinic. Only one child who was prescribed glasses failed to obtain them, having left school in the interval and failed to collect them though written to repeatedly.

We have, unfortunately, lost our Orthoptist during the year and are finding some difficulty in replacing her. This holds up some part of the squint training.

There were two emmetropic children, with squint, one boy and one girl.

One girl was supplied with an artificial eye.

Three children were recommended for special sight saving school or schools for children with defective vision.

The squints who needed operation were admitted to the Royal Halifax Infirmary and dealt with.

R. W. GREATOREX, M.B., Ch.B.

APPENDIX C

ORTHOPTIC CLINIC.

(continued)

The following statistical data gives the details of the work done in the Orthoptic Department throughout 1947:—

No. of children attended during year	 62
Total attendances for year	887
of which:	
Attendances for Binocular Training	 619
Attendances for Occlusion	 248
New cases examined and registered	 20
	887
Cases discharged throughout year of which:	 29
Cases cured	 7
No response to treatment	 5
Cases who failed to attend	 14
Refused treatment	 1
Miscellaneous reasons	 2
	29
Waiting List	 Nil

The attendance has been most satisfactory. The Clinic is closing as from 1st November, pro tem, until another Orthoptist is appointed.

M. L. HARRIS.

APPENDIX D

ORTHOPÆDIC CLINIC.

There has been a slight diminution in the total attendances for treatment but the number of new cases admitted for treatment has increased. The decreased number of treatments is due to the shortage of staff since Miss Davies left. It will be noted that there are more schools with remedial classes and it is hoped that before long they will be resumed in all schools. This will only be possible with an increased staff.

The result of daily physical training carried out in schools under proper conditions is apparent in the improved posture and general physical well-being of the pupils. It is also under these conditions that early cases of deformity are recognised and can be adequately treated.

The outbreak of Infantile Paralysis fortunately did not affect the Halifax area quite so severely as in some other parts of the country but there were several severe cases both in adults and children. The lack of swimming facilities for adults suffering from Infantile Paralysis was overcome by the co-operation of the local authorities with the school committee who allowed the use of their baths for adults. I would again like to emphasise the necessity of improved swimming facilities for the youth of Halifax.

> GEOFFREY HYMAN, M.B., Ch.B., F.RC.S. (Eng.) L.R.C.P.

REPORT BY THE ORGANISERS OF PHYSICAL EDUCATION

Physical Education.

In 1946 the Organisers of Physical Education reported that a good beginning had been made to the introduction into Schools of the less formal and more individual type of modern physical training, at that time a subject of much experimentation. 1947 has seen steady progress being made in developing this work and introducing it more generally, although this progress has been slower than was at one time expected, for various reasons outside the control of those chiefly concerned (the acute shortage of teachers, the frequent changes in teaching staffs and the great difficulties experienced in obtaining supplies of physical training equipment, have been the chief problems) and, therefore, it is felt that considering these difficulties, there has been some cause for satisfaction in the progress which has been made in the past year. The work being done in 1946 was very definitely experimental, but the experiments of 1946-47 have proved that this work is on the right lines and it will be the basis of any future national syllabus of physical training in schools.

The schools which worked as pioneers on this type of work in 1946 have built well on the foundations laid and the high standard of performance achieved is a credit to all concerned. Other schools have progressed rapidly as more time has been spent on this work, and regular demonstrations have been given to frequent visitors. The shortage of men teachers was suddenly ended by an influx from the Emergency Training Colleges and some of these men are now doing good work in physical training. A good start on more up-todate secondary work for boys was made at Crossley & Porter School. Early in the year about 30 men teachers attended a lecture demonstration there. Now that the work in Junior Schools has been more or less stabilised, it is hoped that quicker developments in senior school work will be seen in the near future. Experiments in senior girls' work are being carried out at a number of the secondary schools where the teaching methods and freer type of training used in the primary schools are being introduced. The main difficulty on the girls' side is the serious shortage of specialist and semi-specialist teachers, for on the resignation of any teacher responsible for physical education for the girls, this teacher has frequently to be replaced by an inexperienced teacher with inadequate training. A visiting pianist is provided for the dancing lessons at a number of the secondary schools, while at others dancing is taught while the teacher responsible plays the piano as well. Teachers concerned find this latter most unsatisfactory and express disappointment at the slow progress being made. It is hoped to extend the system of visiting pianists to these schools and also those schools where no dancing is taught because there is no one to play the piano.

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The length of time taken to obtain equipment and apparatus for the physical training lesson has been one of the main reasons for slowing down progress during 1947. To quote but one example, 12 sets of horizontal ropes, similar to the ones installed at Mixenden in 1946, were purchased at the beginning of 1947 but at the end of the year only two of these sets had been erected. This is a very disappointing state of affairs and one which the Organisers would like to see improved. Delivery of other apparatus has been slow, while the rising cost of equipment of all kinds has been most disturbing. One more pleasing aspect of the supply situation has been the provision of shoes, shorts and knickers for P.T. The allocation of coupons, though not generous, has been sufficient to meet most of the demands, especially for shorts and knickers, and it is hoped to provide gym shoes early in 1948 to complete all outstanding requisitions. During 1947, 3922 pairs of gym shoes, 1756 pairs of shorts and 1536 pairs of knickers have been issued.

The schools of Halifax have again been visited frequently by Majesty's Inspectors, Physical Training Organisers and Specialists and others connected with education to see physical training. Perhaps the most interesting visit was the one arranged by the Ministry of Education in July. The work seen by these many visitors has not only proved interesting to everyone but has seemed revolutionary to some, and has caused some animated and interesting discussions. An interesting remark was made by His Majesty's Chief Inspector for Physical Training, who said that he was quite sure that the work in Halifax was showing clearly the modern trend in physical education as visualised by His Majesty's Inspectorate. Another interesting visit was arranged by Mr. Major, His Majesty's Inspector, who brought the men teachers of physical education from the Teachers' Training Colleges of this area to see physical training at Akroyd Place, Bradshaw and Pellon Lane Schools. Other visitors have included Inspectors of general subjects who have expressed appreciation of the standard and type of work done and many other visitors from all parts of the British Isles.

School Clinic.

The Orthopædic Department of the School Clinic is under the direct supervision of Miss Dudgeon who attends two half days per week. She has a staff of three full-time Remedial Gymnasts. One member of the staff who left in September, gained promotion by being appointed to take charge of a similar clinic at Keighley, where her post is recognised as one of special responsibility. Unfortunately owing to the great shortage of qualified Physio-Therapists it has not been possible to replace her, and the work of the department is, at the moment, severely curtailed. The most important feature of the clinic is the policy of holding in the schools, Remedial Classes taken by the class teacher under the supervision of the Remedial Gymnasts. This makes it possible to deal with very large numbers of children suffering from minor defects, and much preventive work is being

done. These school classes effect a great saving of time which would otherwise be spent in travelling to the Clinic, and where a school class is available, treatment at the clinic of more severe cases can be shortened by many weeks. Miss Dudgeon has lectured in many districts on the work of the School Clinic. During the Christmas vacation she lectured at the Conference on Remedial Work held jointly by the Ling Physical Education Association and the Medical Association. Many visitors have been to see the work of the clinic and a number of authorities are now introducing Remedial Treatment for children as a direct result of the visit to the Halifax Clinic by their various officials.

Swimming.

An attempt was made during 1947 to develop, on more modern lines, the teaching methods employed in the swimming lesson. There are teachers in Halifax who have been working on these lines for some years now with very good results, but in order to encourage a more general application of these methods, the Organisers arranged lecture demonstrations at Warley Road and Ovenden Schools at the beginning of the swimming season. These demonstrations were attended by a large number of enthusiastic teachers. At Warley Road, two Junior Classes showed effective methods of taking a class of beginners, confidence exercises, games in the water, preliminary swimming exercises were shown and the importance of developing the ability to glide on the surface of the water at this early stage was stressed. At Ovenden, a class of 12 year olds was given a typical lesson, while older children demonstrated correct swimming strokes and the various tests to be performed for the award of the Committee's Swimming Certificates. The Organisers look forward to the early re-opening of the Park and Woodside Swimming Baths, so that swimming instruction on a pre-war scale can be resumed in Halifax.

Athletics.

The chief items of interest during 1947 were the Schools' Athletic Association Sports, the Inter-Grammar School Sports and the visit to Halifax of Mr. Dyson and Mr. Chapman, the official coaches of the Amateur Athletic Association. A much greater interest has been created by the newly formed Grammar School Sports Association and the enthusiasm shown during 1947 was very pleasing. Attempts to provide better facilities for the practice of athletics were made but it is regretted that the development of the Athletics Training areas at the Grammar Schools has been very slow, it is hoped that these training areas will be completed as soon as possible. More time was devoted to practice and coaching, and the results of these efforts were shown by the improved standard of performance. It is being realised that systematic and efficient tuition from the beginning of secondary school life is the basis of success in athletics, and sound progress is anticipated in the future. The lecture demonstrations given by Mr. Dyson and Mr. Chapman proved exceptionally interesting and instructive. Various athletic events were dealt with by these experts who demonstrated methods of coaching in addition to showing the important features of correct performance. Their visit proved most inspiring.

Youth Work.

The Youth Organisations Athletic Committee had cause to be very pleased with the results of the year's activities. The second Annual Sports Day was again held in good weather and more than 200 competitors participated. It was necessary this year to hold preliminary heats for most events on several evenings of the week preceding the Sports Day, and these and the finals produced much enthusiasm and keen competition. The Yorkshire Inter-Area Championships were held this year in Halifax and were organised by the Halifax Youth Sports Committee. This meeting has become a most popular annual competition and the growth of its popularity is shown by the fact that whereas in 1946 there were 4 full teams entered plus several individual competitors, in 1947, 12 districts entered full teams and over 400 competitors were involved. The task of organising this tournament can be imagined, as also can the standard of performance when competition is so keen. Congratulations are extended to the Youth Sports Committee for the successful organisation of the meeting and to the Halifax team for winning the Bradford Trophy for the second successive year in the face of such keen competition. In the autumn Mr. Dyson and Mr. Chapman of the A.A.A. gave lecture demonstrations at Ovenden School to Club Leaders and members of Youth Organisations. In spite of the bad weather the attendance was good and the lectures were much appreciated by all. It is hoped, in the near future, to provide facilities for training and coaching at Spring Hall, so that the many recommendations and suggestions made by the A.A.A. coaches may be put into practice. The Boxing Committee has begun the preliminary work of organising the next Youth Organisations' Boxing Tournament, which will be held early in 1948, and it is hoped to arrange Inter-Town Contests between teams representative of the Youth Organisations of Halifax and other towns in the West Riding. Several successful Netball Rallies were held during 1947 and interest in these rallies is growing. At the last one 18 teams took part.

The Youth and Physical Training Organisers have continued their efforts to provide more Playing Fields for Youth Organisations and there are 14 Soccer Pitches and 6 Rugger Pitches available now for allocation. In conjunction with the Parks Department several cricket pitches are being prepared for use during the 1948 season.

Out of School Activities.

Recreational Swimming and Physical Training Classes were continued during 1947 under the supervision of the Organisers of Physical Training and the out of school swimming classes at Battinson Road, Warley Road and Moorside for use by school children continued to be popular. In the summer evenings Play Centres at Ling Bob and Ovenden were resumed, while in addition, the Play Centre at Northowram was started. Sunnyside Centre was closed as the numbers who attended did not justify keeping it open. The Ling Bob Play Centre continued very successfully under Mr. Booth's firm but kindly handling. This Centre has by far the best facilities, of which the children make excellent use. There is a happy spirit of enthusiasm and co-operation among those who help. Unfortunately the Ovenden Play Centre has been disturbed by the relaying of the field and the smaller one which is being used has curtailed activities. The Northowram Centre, though small, is proving successful.

S. DUDGEON.
A. BILBROUGH.

QUARRY HOUSE SPECIAL (E.S.N.) SCHOOL No. 29108.

I beg to submit my report on Quarry House Special School for the year 1947.

I am very pleased to record that the work here has progressed very satisfactorily during the year under review. I visited the school on several occasions and have now a personal acquaintance of almost every child attending.

In spite of difficulty experienced in getting some parents to agree to their children attending, it is most gratifying to both the headmistress and myself when after a short attendance at the school, letters and verbal messages from grateful parents show how much happier the majority of these children are now, than when they attended their ordinary school. The reason for this is of course mainly twofold. Firstly the child is now working with a group of children at his or her own intellectual level and has here a chance to start his learning at whatever stage in the course of ordinary educational treatment he began to lose ground. The second reason is more of a personal nature and lies in the close relationship which exists between pupil and teacher in this school. This fact is substantiated by the reluctance on the part of some children to leave, when they are deemed fit to return to an ordinary school.

The following are the figures for the year under review: -

	Boys	Girls	Total
Admitted 1947	15	20	35
Discharged 1947	3	4	7
Referred to Local Authority	, —	1	1
Returned to Ordinary School	ol —	3	3

The curriculum as usual included needlework, singing, cookery, physical training, woodwork and gardening as well as the other usual school subjects.

In conclusion I take this opportunity of once more expressing my gratitude to the headmistress and her staff in their untiring and admirable efforts in dealing with the children, and also my sincere thanks for the very marked and kind co-operation which I have received during the year, a fact which I feel has no doubt made the working of this school a happier proposition for us all.

EMILY J. KELLY, M.B., B.Ch., B.A.O.

SPEECH CLINIC.

Report for Calendar Year 1947.

In the Spring Term 1947, 42 children were under treatment at the Committee's Speech Clinic, and 44 in the Summer Term. At the close of the Summer Term 8 cases were discharged, 8 were temporarily suspended to make room for new and more urgent cases, and 2 boys had left the town. Three of the suspended cases have been recalled since Christmas. In the Autumn Term 49 cases received treatment.

The kinds of cases treated during the year were :-

Stammering	 	58	Other Organ	ic De	efects	2
Lalling	 	7	Lisp			2
Cleft Palate	 	3	Mutism			1

The age of the children ranged from 5 to 15 years.

I have found the schools and the parents co-operative in helping the children to carry on the treatment given at the Speech Clinic. By performing the daily exercises at home and at school a single treatment weekly at the Speech Clinic has proved sufficient for each child.

The children are treated in groups, usually of six, arranged as nearly as possible on a basis of age. The older boys and girls are treated in separate groups.

A group treatment for stammerers lasts about 50 minutes. The very young children respond better to more individual treatment of shorter duration.

Some new equipment has been received during the year in the form of sets of reading books suitable for the different ages.

The premises at Akroyd Place where the Speech Clinic is held are admirable for the purpose, and we have always been made welcome by the staff of the school. An interesting experiment was made at the beginning of the Autumn Term which I hope may be repeated and developed as occasion allows. While selecting the children to form the groups for treatment, I visited some of the schools that had reported large numbers of cases. I found that many cases reported were only simple defects that did not need treatment from a speech specialist but could best be dealt with by the class teachers. At the request of a headmaster I gave a lecture-demonstration of the teaching of practical phonetics to his entire staff; and I later repeated this to two other schools. I also gave a lecture-demonstration at the Speech Clinic one evening to a selected group of teachers who were interested in the teaching and practice of relaxation for stammerers.

I believe this kind of contact with the schools is one of the best ways of extending the work of Speech Therapy.

STATISTICAL TABLES.

TABLE I.

MEDICAL INSPECTIONS OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS
YEAR ENDED 31st DECEMBER, 1947.

A. Periodic Medical Inspections.

(1	Number of	Inspections in the	Prescribed Groups:
----	-----------	--------------------	--------------------

1.				roca Croup	
				1947	1946
	Entrants			1,251	1,616
	Second Age Group			1,390	1,818
	Third Age Group			991	2,672
	Time tage of our				2,072
	Total			3,632	6,106
(2)	Number of other Periodic	Inspe	ctions	_	_
	Grand	Total		3,632	6,106
B.—Oth	er Inspections.				
	Number of Special I	nspect	ions	2,436	1,963
	Number of Re-Inspe	-		7,697	10,100
	Total			10,133	12,063

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).

Group.	For defective vision (excluding squint).	For any of the other condi- tions recorded in Table IIA.	Total individual pupils,
Entrants	53	427	480
Second Age Group	137	344	481
Third Age Group	94	258	352
Total (prescribed groups)	284	1,029	1,313
Other Periodic Inspections			
Grand Total	284	1,029	1,313

TABLE II.

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1947.

		Periodic I	nspections	Special I	nspections
		No. of	Defects	No. of	Defects
Defect Code No.	DEFECT OR DISEASE	Requiring Treatment	Requiring to be kept under ob- servation, but not requiring treatment	Requiring Treatment	Requiring to be kept under ob- servation but not requiring treatment
4	Skin	74	4	328	7
5	Eyes-(a) Vision	284	11	52	6
	(b) Squint	56	5	12	_
	(c) Other	52		62	1
6	Ears—(a) Hearing	14	2 3	25	3
	(b) Otitis Media	8	1	48	
	(c) Other	14	1	64	2
7	Nose or Throat	141	304	375	2 7 2 1 3 5
8	Speech	13	10	16	2
9	Cervical Glands	31	25	81	1
10	Heart and Circulation	24	26	72	3
11	Lungs	51	15	163	5
12	Developmental—				
	(a) Hernia	1	2	4	1
	(b) Other	20	6	11	1
13	Orthopædic—				
	(a) Posture	115	2 7	18	-
	(b) Flat Foot	236	7	47	1
	(c) Other	129	8	66	_
14	Nervous System-				
	(a) Epilepsy	-	3	2	-
	(b) Other	7	2	69	8
15	Psychological—				
	(a) Developm't	1		3	-
	(b) Stability	2	-	29	-
16	Other	169	52	822	13

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

	No. of A. (Good)		В. (C. (Poor)			
Age Groups	Pupils Insp'cted	No.	95	No.	90	No.	J.
Entrants	1,251	268	21'43	975	77'93	8	.64
Second Age Group	1,390	247	17.77	1,139	81'94	4	.50
Third Age Group	991	253	25'53	735	74'17	3	.30
Other Periodic Ins.							=
Total	3,632	768	21.12	2,849	78'44	15	41

TABLE III.

TREATMENT TABLES.

Group I. Minor Ailments (excluding uncleanliness, for which see Table Y.)

	(excluding uncleanlines	55, 10		000	A COIC A	• /
(a)	Number of Defects treated,	or un	der trea	tmen	t during	the year.
	Skin:				1947	1946
	Ringworm—Scalp:					8505050
	(i) X-Ray treatment				10	7
	(ii) Other treatment					_
	Ringworm-Body				21	8
	Scabies				142	292
	Impetigo				203	295
	Other skin diseases					368
	Eye Disease (external and					
	ding errors of refr					071
	cases admitted to					871
	Ear Defects					248
	Miscellaneous (e.g., minor					6.010
	sores, chilblains, e	etc.)			5,991	6,018
	Total				8,198	8,107
7. V					53.	0,107
(b)	Total number of attendance					
	minor ailments clinic				20,168	17,756
	Group II.—Defective	ve Vi	sion a	nd S	quint	
(exc	cluding Eye Disease treate				nents G	
	cluding Eye Disease treate	ed as	Minor	Ailn	nents G	1946
Err	ors of Refraction (including	ed as Squir	Minor	Ailn	nents G	
Err	ors of Refraction (including er Defect or Disease of the	ed as Squir Eyes	Minor	Ailn 	1947 680	1946 556
Err	ors of Refraction (including	ed as Squir Eyes	Minor	Ailn	nents G	1946
Err	ors of Refraction (including er Defect or Disease of the those recorded in Group	Squir Eyes I)	Minor	Ailn	1947 680 86	1946 556 64
Erro	ors of Refraction (including er Defect or Disease of the those recorded in Group Total	Squir Eyes I)	Minor	Ailn	1947 680	1946 556
Erro	ors of Refraction (including er Defect or Disease of the those recorded in Group Total	Squir Eyes I)	Minor (exclusion) (exclusion) es were	Ailn	1947 680 86 766	1946 556 64 620
Erro	ors of Refraction (including er Defect or Disease of the those recorded in Group Total nber of Pupils for whom Special Prescribed	Squir Eyes I)	Minor (exclusion) es were	Ailn	1947 680 86 766	1946 556 64 620
Erro	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained	Squir Eyes I) ectacl	Minor (exclusion) es were	Ailn	1947 680 86 766	1946 556 64 620
Erro	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to 1	Squir Eyes I) ectacl	Minor (exclusion) es were and spec	Ailn	1947 680 86 766	1946 556 64 620
Erro	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained	Squir Eyes I) ectacl	Minor (exclusion) es were and spec	Ailn	1947 680 86 766	1946 556 64 620
Erro	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to 1	Squir Eyes I) ectacl	Minor (exclusion) es were and spec	Ailn	1947 680 86 766	1946 556 64 620
Erro Oth Nur	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to I without fur	Squir Eyes I) ectacl enses	Minor (exclusion) es were and spec- fraction	Ailn	1947 680 86 766 678 * 818 s replaced	1946 556 64 620 553 700
Erro Oth Nur	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to I without fur	Squir Eyes I) ectacl	Minor (exclusion) es were and spec- fraction	Ailn	1947 680 86 766 678 818 replaced	1946 556 64 620 553 700
Erro Oth Nur	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to I without fur Group III.—Treatment of reived Operative Treatment:	Squir Eyes I) ectacl	Minor (exclusion) es were and specificaction ets of	Ailn	1947 680 86 766 678 818 replaced	1946 556 64 620 553 700
Erro Oth Nur	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to I without fur Group III.—Treatment of eived Operative Treatment: (a) for adenoids and chronic	Squir Eyes I) ectacl enses	Minor (exclusion es were and specificaction ets of	Ailn ding ctacles	1947 680 86 766 678 818 replaced	1946 556 64 620 553 700
Erro Oth Nur	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to I without fur Group III.—Treatment of eived Operative Treatment: (a) for adenoids and chronic (b) for other nose and throa	Squir Eyes I) ectacl enses ther re	Minor (exclusion) es were and specifiaction ets of	Ailn	1947 680 86 766 678 818 replaced	1946 556 64 620 553 700
Erro Oth Nur	ors of Refraction (including er Defect or Disease of the those recorded in Group Total mber of Pupils for whom Spe (a) Prescribed (b) Obtained * Includes alterations to I without fur Group III.—Treatment of eived Operative Treatment: (a) for adenoids and chronic	Squir Eyes I) ectacl enses ther re	Minor (exclusion) es were and specifiaction ets of	Ailn ding e: etacles	1947 680 86 766 678 818 replaced and Thi 1947 146	1946 556 64 620 553 700 roat.

Group IV. Orthopædic and Postural Defects.

(a) Number treated as In-patients in Hospitals or	1947	1946
Hospital Schools	15	10
(b) Number treated otherwise, e.g., in Clinics or		
Out-patient Departments	1,075	1,017

Group V .- Child Guidance Treatment and Speech Therapy.

Number of Pupils treated:	1947	1946
(a) under Child Guidance arrangements	33	38
(b) under Speech Therapy arrangements	73	33

TABLE IV.

DENTAL INSPECTION AND TREATMENT.

(1)	Number of Pupils Inspected by the Authority's Dental Officers:		1947	1946
	(a) Periodic Age Groups		10,122	10,060
	(b) Specials		1,225	1,047
	(c) Total (Periodic and Specials)		11,347	11,107
(1a)	Number of Re-inspections		3,738	3,966
(2)	Number found to require treatment		5,529	6,138
(3)	Number actually treated		5,156	5,443
(4)	Attendances made by Pupils for treatme	111	8,155	7,714
(5)	Half-days devoted to: Inspection		130	136
	Treatment		780	743
	Total		910	879
(6)	Fillings: Permanent Teeth		2,818	2,891
100	Temporary Teeth		143	141
	Total		2,961	3,032
(7)	Extractions: Permanent Teeth		879	725
(1)	Temporary Teeth		5,298	4,938
	Total		6,177	5,663
(8)	Administrations of General Anæthetic	s for		
1000	Extractions		6	15
(9)	Other Operations: Permanent Teeth	1.1.1	1,636	1,288
100	Temporary Teeth		46	63
	Total		1,682	1,351

TABLE V. INFESTATION WITH VERMIN.

(1)	Average number of visits per School made 1947	1946
	during the year by the school nurses 4	5
(2)	Total number of examinations of pupils in the schools by school nurses or other author-	
	ised persons 19,319	22,625
(3)	Number of individual pupils found to be	
	infested 1,240	1,196
(4)	Number of individual pupils in respect of whom cleansing notices were issued (Section	
	54 (2), Education Act, 1944) 112	
(5)	Number of individual pupils in respect of whom cleansing orders were issued (Section	
	54 (3), Education Act, 1944) —	

TABLE VI.

PROPORTION OF VACCINATED PUPILS AMONGST THOSE EXAMINED IN ROUTINE DURING THE PERIOD 1937 to 1947

	Number showing							
Year.	Routi Examina		Vaccination Scars.	Percentage Un-vaccinated				
1937	(a) Boys	1,862	301	83.8				
	(b) Girls	1,779	262	85'3				
1938	(a) Boys	1,906	158	91'7				
	(b) Girls	2,010	307	84.7				
1939	(a) Boys	1,416	186	86'8				
	(b) Girls	1,470	175	88'1				
1940	(a) Boys	1,488	244	83.6				
	(b) Girls	1,531	230	84.9				
1941	(a) Boys	1,673	301	82.0				
	(b) Girls	1,663	296	82.2				
1942	(a) Boys	1,534	216	85'9				
	(b) Girls	1,665	314	81.1				
1943	(a) Boys	1,704	178	89'6				
	(b) Girls	1,771	221	87.5				
1944	(a) Boys	1,723	247	85.7				
	(b) Girls	1,737	211	87'9				
*1945	(a) Boys	2,666	407	84.7				
	(b) Girls	2,344	391	83.3				
*1946	(a) Boys	3,203	474	85'2				
0.000	(b) Girls	2,903	462	84.1				
*1947	(a) Boys	1,810	289	84.0				
	(b) Girls	1,822	294	83'9				

^{*} Includes Secondary Grammar Schools.

TABLE YII.

AVERAGE HEIGHTS AND WEIGHTS OF PUPILS SEEN
AT ROUTINE INSPECTIONS IN MAINTAINED
PRIMARY AND SECONDARY SCHOOLS.

		BOYS	5				GIRL:	S	
Age	Height in Cms.			Weight n Kilos. A		Height in Cms.		Weight in Kilos.	
	1947	1946	1947	1946		1947	1946	1947	1946
2	88:2	91-1	13:4	13:7	2	97:0	88:5	16-2	13:1
3	96.6	94.1	15.7	16:3	3	95:7	95:4	15:3	151
4	101.2	103.1	17.5	18.4	+	103.8	101:3	17:3	17:-
5	109.5	109.1	17.9	19:4	5	108.5	108:6	18.8	19:2
6	113:7	114.2	21.2	21:6	6	112-2	113 1	20:9	20:7
7	121:9	119:9	24.2	23.7	7	120:7	117 ()	23.5	21.8
8	125.3	126:3	25.9	23.5	8	125.7	125.2	25-4	25 (
9.	129:0	129.3	28.2	28.5	- 9	134.5	132:3	29.3	29 -
10	137:0	136:9	30.4	31.8	10	135.8	138:5	32:9	32:3
11	137:7	143.6	33.2	34-3	11	139:4	143.4	34.6	35.7
12	144.8	143.7	37:2	36.9	12	142.1	145.5	36.8	391
13	149.7	149.9	39.1	40.6	13	152.8	151.8	46.8	++
14	155:3	158.1	46:7	46:7	14	150.5	158.7	49.6	47.5
15	146.0	162.9	50.7	51.7	15	158:3	160:1	59.4	52.
16	172:9	172:1	59.8	61:4	16	160.9	163.3	54-3	541
17	177.0	174.6	63.5	59.8	17	164.9	162.9	55.9	5.31.2
18	174:2	_	63:4	_	18	164.6	161:3	57.2	5413

TABLE VIII. INVESTIGATION OF INFECTIOUS AND CONTAGIOUS DISEASES.

School		Disease	Visits Paid	Classes Inspected	Ex'min't'ns of Pupils
Akroyd Place		R.	1	1	23
,, ,,		D.	1	2	48
Bermerside		R.	2	4	81
Boothtown		D.	2 2	2	84
Haugh Shaw		S.F.	1	1	30
Lee Mount		D.	1	1	16
Moorside		C.P.	2	7	290
Northowram		R.	1		68
Pellon Lane		R.	2	2 3	90
Quarry House		D.	2	5	94
., ,,		R.	1	2	25
Salterhebble	44.5	C.P.	1	1	35
Siddal		D.	1	1	39
Sunnyside		D.	3	5	129
Wainstalls		R.	2	4	61
Trinity		R.	1	1	39
St. Joseph's		D.	3	3	83
,,		C.P.	1	1	32
,,		R.	1	1	41
St. Mary's		D.	1	1	31
То	tals		30	48	1339
		1946	19	31	935

S.F.—Scarlet Fever. R.—Ringworm.

D.—Diphtheria.

M.-Measles.

S.P.-Small Pox.

C.P.-Chicken Pox.

C.J.S.—Conjunctivitis.

Sc.—Scabies.

Wh.C.-Whooping Cough.

Mps.—Mumps.

	TABLE IX.			
	WORK OF THE SCHOOL HEALTH	NURS	ING S	TAFF.
			1947	1946
1.	Half-days on which nurses assisted at Sc Medical Inspection		311	527
2.	Half-days on which nurses assisted at-			
	(a) Minor Ailments' Clinic		946	546
	(b) Inspection Clinic		226	291
	(c) Ultra-Violet Ray Clinic		74	-
3.	Half-days devoted to head surveys		193	221
	Total examinations of pupils		19,319	22,625
	Pupils found with verminous or	nitty		
	heads		1,240	1,196
4.	Half-days on which sulphur baths were g	iven	59	88
	Pupils dealt with	***	288	292
5.	Half-days devoted to "following up"		12	38
	Homes visited		70	194
	Individual pupils concerned		93	168
6.	Half-days devoted to investigating infec		21	22
	diseases		24 172	22
	Throat Swabs submitted for examination		172	80
	Classes examined in the course of inves- ting cases of infectious nature in			
	schools		30	18
	TABLE V			
	TABLE X.			
	PROVISION OF MEA			
Di	nners supplied:		947	
	Primary and Secondary Schools			
	Special Schools	33	,845	39,330
Te	as supplied:			
	Play Centre and Nursery Classes	5	,674	14,102
Po	Premises School	1,687	,518	1,691,772
Ca	nteens opened during the year:			
3.4	Nursery Classes Primary Schools		2 2	
	Secondary Schools	***	2	

One Canteen (St. Mary's Mixed) was transferred to Hall Street.

TABLE XI.

OPHTHALMIC TREATMENT.

Classification of Errors of Refraction-Primary and Secondary

	Hyper- metropia	Myopia	Hyper- metropia with Astigma- tism		Mixed Astigma- tism	Anio metro- pia	Total	1946
Boys	109	30	128	18	13	2	300	266
Girls	101	31	187	27	25	9	380	290
Total	210	61	315	45	38	11	680	556

	Boys	Girls	Total	Total
			1947	1946
Pupils who attended the Eye Clinic	336	430	766	620
Pupils for whom glasses were prescribed	299	379	678	553
Pupils who obtained glasses	298	312	610	467
new lenses	109	99	208	233
repairs	171	98	269	153
Pupils for whom glasses were not advised	37	51	88	63
Suffering from Corneal Opacities	1	_	1	
" Nystagmus	2	2	+	_
" Ptosis	_	-		_
" Lenticular Opacities	1	-	1	2
" Severe Myopia	1	1	2	_
,, Congenital Coloboma of Choroid and Iris		_	_	1
" Squint	11	21	32	8
" Fundal changes …		-	-	1

TABLE XII.

ORTHOPTIC TREATMENT.

(Clinic closed 31/10/47).

	1947	1946
Children attended during the year	 62	48
Attendances for Binocular Training	 619	197
Attendances for Occlusion	248	138
New Cases examined	20	35
Total Attendances	887	370
Received Operative treatment		
Waiting List		
No. of cases discharged :-		
Cured	7	_
Did not respond to treatment	5	
Failed to attend	1+	5
Left the district	_	
Other reasons	3	3
Total	29	8

^{*} August to December.

TABLE XIII.

ORTHOPÆDIC TREATMENT.

			School Health Service	M. and		otal 1946
Surgeon's attendances			28	1 1	39	39
New Cases examined			128	100	228	252
Re-Examinations			436	199	635	662
Pupils under treatment on 1947		lst,	795	534	1329	1281
New cases admitted for						
1947			280	87	367	345
Discharged, etc., during y			238	7.5	313	297
Cases remaining under on December 31st, 19		ent 	837	546	1383	1329
			School Age	Under School Age	To 1947	tal 1946
Attendance for examination	n		564	299	863	914
Attendances for remedial	exerci	ses	11949	4784	16733	18015
Cases treated:			No. of	Cases	Vitan	lances
			1947	1946	1947	1946
Maternity and Child V	Velfar	e	621	609	4784	4685
School Clinic			735	738	6908	7854
Modern School			83	70	2241	2240
Bermerside School			47	57	817	859
Quarry House School	l		36	35	166	398
Princess Mary High	School		90	57	1385	1772
Technical College			20	60	73	207
Heath School			44		235	-
Crossley & Porter Sci	hool		20		124	
			1696	1626	16733	18015
Waiting list, January	lst .		14			21
Waiting list, Decem	ber 31	st	6		***	14
Cases provisionally discharged report progress at a la			141	* > +	***	1+2

Allocation of Hours.

			and draw.		
				1947	1946
School Clinic and Ov	19761	2221			
Visits to Schools				112	146
M. and C. W. Clinic				1032	1090
Bermerside School				$118\frac{1}{2}$	120
Quarry House Schoo	1			35	47
Modern School				150	1463
Princess Mary High	School			104	116
Technical College				9	25
Swimming Class				52	88
Crossley & Porter Sc				11	
Heath School				$25\frac{1}{2}$	-
				3625½	39993
Follow-up: No. of h	omes visi	ited	* + *	166	160
				Но	urs.
Time o	ccupied			160	160
Н	alifax G	eneral	Hospital.		
Recommended for op	erative tr	eatment		16	10
Admitted to hospital				14	*10
Refused operative tre	atment				
Left the town		***		1	
Deferred treatment					
Received treatment p	rivately		***		
On waiting list				1	1

^{* 1} recommended in 1945.

TABLE XIV. SWIMMING STATISTICS.

	1943		1914		1945		1946			1947					
	Boys	Girls	Total	Boys	Girls	Tota									
No. of pupils who learnt to swim during season	474	381	855	413	318	731	292	309	601	327	301	628	502	493	995
No. of pupils able to swim	1126	1175	2301	1033	958	1991	881	809	1693	942	913	1855	982	1016	1998
No. of pupils who left school (14 x) with- out gaining Element- ary Certificates	.55	12	97	66	63	129	50	73	123	117	55	172	90	114	204
Elementary Certificates	273	312	585	256	227	483	180	211	391	187	179	366	313	301	614
Advanced do.	138	172	310	81	101	182	65	67	132	85	72	157	100	99	199
Honours do.	117	93	210	53	57	110	38	32	70	41	31	72	31	44	75



