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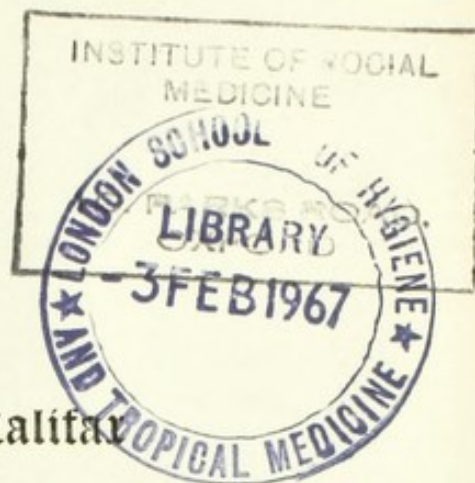
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County Borough of Halifax

EDUCATION COMMITTEE


ANNUAL REPORT

ON THE

SCHOOL HEALTH SERVICE

FOR THE YEAR 1950

C. RICHARDSON, HALIFAX



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COUNTY BOROUGH OF HALIFAX.

10, PARKS ROAD,
OXFORD

EDUCATION COMMITTEE

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., Ch.B., F.R.C.S. (Eng.), L.R.C.P.

Part-time Auralist:

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

Dental Surgeon:

Frank H. Richardson, L.D.S., R.C.S.

Dental Attendant:

Anne Murgatroyd.

Nursing Staff:Dorothy B. Parkinson (Senior Nurse), Mary Denham, Sylvia
L. P. Good, Constance Greaves (Resigned December 31st),
Gladys Nelson, Anne Storey.**Orthopædic Staff:**Sophie Dudgeon (Supervisor and Organiser of Physical Training)
(Resigned December 31st), Doreen M. Foers (Resigned November
30th), Doreen Greenwood (Junior Assistant), Gregory H. Stewart
(Appointed November 14th), Patricia M. Staton.**Speech Therapist:**Mrs. M. Moore-Blake, M.A., L.C.S.T. (Part-time) (Resigned
November 30th).**Orthoptist:**

Position vacant.

* National Health Service Officers.

ANNUAL REPORT

ON THE

School Health Service for the Year 1950

To the Chairman and Members of the Education Committee.

Ladies and Gentlemen,

I have the honour to present the Annual Report on the Medical Inspection and Treatment of School-Children in Halifax for the year ending 31st December, 1950.

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

The primary object of the School Health Service is the early detection of actual or incipient defects—physical and mental—and the prompt treatment thereof. To ensure this, the active co-operation of the parents is essential. Public Health education has taught many parents to appreciate the meaning of small abnormalities which may cause little or no immediate distress but may lead to impairment of health as the years pass, or even, in some cases, to permanent health damage. It is impossible to divorce the School Health Service from the rest of the Public Health Service without sapping the whole fabric of Preventive Medicine. Halifax appreciated this point many years ago, and the closest liaison has existed between the Public Health Service and the School Health Service.

The School Health Service has already accomplished much in improving the physical health and physique of school-children. Much attention is given to games, athletics and physical education. With regard to the mental health of children it is well known that certain children are unable to benefit by the instruction given in primary and secondary schools but, by suitable training in special schools, they may be taught useful manual occupations. Neither idiots nor imbeciles are suitable for any type of school. The feeble-minded rarely advance further in mental development than a child of about ten years of age. Backwardness should not be confused with dullness. Dullness is usually innate, but backwardness is often attributable to some physical defect such as defective vision or hearing. The most generally reliable criteria on which to base a decision as to defectiveness are the results of intelligence tests by which the mental age of a child may be

determined. These tests are devised to ascertain the child's intelligence and ability to learn, rather than to assess the extent of his learning. Also there are children suffering from behaviour difficulties, rather than obvious mental dullness. The Child Guidance Clinic has proved valuable in dealing with such children.

The year under review has been a healthy one. The incidence of serious infectious diseases was low. The findings of medical inspections are set out in the tables at the end of the report. As in former years, the principal defects found included defective vision, defective teeth and enlarged tonsils and adenoids. Compared with a few decades ago there has been a great improvement in cleanliness. The School Dental Service no longer attracts dental surgeons, and the position with regard to the supply of School Medical Officers has deteriorated. Few young doctors now do the D.P.H. Course, and, in the years to come, there will be few—if any—recruits to fill the places of those who, because of age or illness, pass out of the present service.

Once again I wish to thank the Teaching Staff for their assistance and co-operation.

Also, I tender my thanks to the Clerical Staff for compiling the many statistics now required.

Acknowledgement must also be made to the School Clinic Staff for the valuable work they have carried out at the School Clinic.

I thank the Chief Education Officer for his co-operation at all times.

In conclusion, I tender my thanks to the Chairman and Members of the Education Committee for the sympathetic consideration they have given to any proposals submitted to them, and for the interest they have taken in the work 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.

CLINICS.

Name	Purpose	Where held	Days	Time 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.	Daily	9-0 a.m. to 12-0 noon
		Bermerside Home	Daily	2-0 to 5-0 p.m.
		Ovenden	10-0 a.m. to 12-0 noon	
Dental	Dental Treatment	Horton St.	Mons. Weds. and Fridays	9-30 a.m. to 12-0 noon
			Daily	2-0 to 5-0 p.m.
Ophthalmic	Treatment of Visual Defects	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 Wednesdays Thursdays	
Orthopædic		Horton St.	Wednesdays	2-30 to 4-30 p.m.
Tonsils and Adenoids	Treatment of Tonsils and Adenoids	As arranged by National Health Service		
Remedial Exercises	Treatment of Deformities	Horton St.	Daily	9-0 a.m. to 12-0 noon
		Bermerside	Tuesdays	2-0 to 5-0 p.m. 10-15 a.m. to 12-0 noon
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.	

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

The routine work of the School Health Services, that is, Routine Medical Inspections, Re-inspections, Inspection Clinics, Minor Ailment Clinics, and cleanliness inspections at schools, have been carried on, and have proved as useful and helpful as in previous years.

Ultra Violet Ray treatment has had to be carried on throughout the year under the same unsatisfactory conditions as during the preceding year. Arrangements, however, have been made for this work to be transferred to another part of the premises where the accommodation will be much more suitable. It is hoped that the change will take place in the early part of next year.

The examination of eyes, and testing for spectacles, while still carried out at the School Clinic, has been done all this year as part of the Health Services Hospital Eye Service in connection with the Royal Halifax Infirmary. Prescriptions and authorisations to obtain spectacles are now handed to the patient immediately after testing, and not sent through the Executive Council as previously. As parents are allowed to go when and where they like to obtain their children's glasses, great diligence and a lot of time has to be spent by doctors and nurses in following up cases of indifference and neglect. It has been found on more than one occasion that prescriptions have been kept at home for six months before being handed to an optician. Repairs to glasses have been arranged under the same services. Forms for the repair or replacement of lost glasses are issued at the Clinic, but on many occasions the part played by the parents leaves much to be desired, and is a cause of much extra work and enquiries by the staff.

The Orthoptic Clinic has been closed during the year. An Orthoptist has now been appointed and good results are expected from this department in the coming year.

Immunisation against Diphtheria has been given throughout the year to all seeking or persuaded to have such treatment. The number of "boosting" doses has again far outweighed the number of initial doses.

The Senior Dental Surgeon has had to carry on single-handed the work of inspections at schools, and treatments at the Clinic during the whole of the year. Unfortunately it has not been possible to secure the services of an assistant dentist. When the dentist is conducting examinations at schools or is away for annual leave, the Dental Clinic has to be closed and children with tooth-ache or other urgent conditions, applying for treatment, have to be sent away to seek treatment elsewhere or wait until the dentist is in session. The repercussion of the present conditions has been dealt with in the Senior Dental Surgeon's report in this issue. During the year it has been arranged to transfer the Dental Services to Holly House, Wards End, recently purchased by the Corporation, and just across the road from our present Clinic. Here two up-to-date dental surgeries are being made, together with preparation rinsing rooms and office where the conditions will be much better both for patient and dentist than have been possible in the present Clinic. A dental workshop will also be provided for orthodontic treatment when there is sufficient staff for the inclusion of this branch of the service.

The Orthopædic Department has been understaffed during most of the year, but the work has been carried on as successfully as possible in the circumstances. This branch of the service suffered a great loss at the end of the year by the retirement of Miss Dudgeon, who had been in charge of the department for 25 years. Miss Dudgeon's initiative and enthusiasm for the work and welfare of the children has been a source of great encouragement and education to all who came under her supervision and training. Her fame for this type of work and for Physical Training in schools was known throughout the country and many were the deputations of officers and officials from other authorities who came here to study her methods and their results.

The measuring, fitting and supplying of surgical appliances for children, recommended by the Orthopædic Surgeon, and supplied by the Ministry of Pensions for the National Health Services, continue to be carried out at the Clinic.

Cases for Orthopædic operation are referred to the Royal Halifax Infirmary or the General Hospital for treatment, as are the more serious cases attending the Minor Ailment or Inspection Clinics. Cases of suspected ring-worm are referred to the Skin Specialist at the Royal Halifax Infirmary.

During the year there has been a change in the treatment of tonsil and adenoid cases. Up to June the old arrangement obtained, where a number of beds were reserved each week at the General Hospital for our tonsil and adenoid cases. Appointments were made from the Clinic and the children were inspected here after having had

the operation. Since June these cases are notified to the Royal Halifax Infirmary and put on their waiting list; after treatment the record cards are returned to the Clinic. At the end of the year 35 cases were waiting for operation. During this latter arrangement as many as 70 to 80 cases have been waiting. As with the case of spectacles, these long waiting periods make the follow up of cases at re-inspection at schools very difficult.

Owing to suspected small pox cases in the district the Clinic was taken over as a vaccination centre for two weeks in the early part of May.

To cope with the number seeking vaccination—adults and children—the Clinic was open in the evenings, Saturday afternoon and Sunday, when the staff was kept very busy. Some 3,500 cases were treated. The results of this work will be reflected at future Routine Medical Inspections in the percentage of children found to have been vaccinated.

The details of the services are given in the following pages.

Medical Inspections.

Medical Inspection of school children was carried out as in the previous year, both in the schools and at consultation clinics in Horton Street. The same age groups as in 1949 were examined at routine medical inspections on the school premises.

The number of parents who attended at the routine medical examinations at the schools was 2,561. This response on the part of parents is very gratifying indeed.

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

Re-inspections.

At fairly regular intervals we were able to re-visit the schools, following on the routine examinations. As in previous years, our visits gave the headteachers an opportunity of discussing problems in relation to the mental and physical health of the children under their care. One of our chief difficulties encountered at re-inspection is the indifference shown by some children and parents regarding the wearing of spectacles. However, much is being done to ensure careful supervision of such children.

Medical Inspections within the School Clinic.

We have not deviated from the regular four sessions held each week by the two doctors. The total number of Clinic sessions held by the doctors during the year 1950 was 163.

The number of new cases seen was 2,266.

Re-examinations numbered 577.

The number of parents who attended was 1,731.

Senior school-children desirous to augment either the family budget or their own pocket-money presented themselves for medical examination as to fitness for part-time employment in the form of newspaper delivery.

Full certificates were granted to 94 children, 84 boys, 10 girls.

There were no restricted certificates issued.

Principal Defects noted at Medical Inspections.

Last year we remarked on the high incidence of ring-worm cases (body and scalp), but for 1950 we are pleased to report a marked drop in the incidence of this disease.

On the recommendation of our Skin Specialist, steps are being taken to secure a Woods Light Apparatus for our own use, as a diagnostic aid.

We still continue to send some of our cases of ring-worm to the Specialist at the Royal Halifax Infirmary and General Hospital.

Infectious Diseases.

Last year a sharp rise in the incidence of scarlet fever was noted. For the year 1950 a still further rise in the incidence of this infectious disease will be observed in the following tables.

Year	Cases	Year	Cases
1947	41	1949	153
1948	88	1950	205

Only one case of diphtheria and one of poliomyelitis have been notified to us.

In May of 1950, the Public Health Authorities, as a result of finding a suspected case of smallpox in the district, started a vaccination campaign which lasted over a week, during which time about 3,500 people, both adults and children, were vaccinated at the School Clinic by the Assistant School Medical Officers.

Tuberculosis.

Number	Site	Positive	Negative
25	Pulmonary	1	24
3	Cervical	2	1
—	Bone	—	—
1	Abdomen	1	—

Three cases reported as negative were to be kept under observation and examined periodically.

Diphtheria Immunisation.

Fortnightly sessions were held as usual at the School Clinic for immunisation against diphtheria. 267 injections were given to children who were being immunised for the first time, and 367 injections were given as boosting doses. Combined diphtheria and whooping cough injections were given to six children.

Artificial Sunlight Treatment.

Our nurses have worked very hard this year to extend this form of treatment to as many children as possible. When more space is at our disposal, a condition we hope to achieve in the near future, it is hoped that many more children will be able to benefit from this treatment.

The number of children who received treatment was 286.

The number of exposures given was 5,440.

Tonsils and Adenoids.

The old scheme whereby children were referred by us direct to the Halifax General Hospital for removal of tonsils and adenoids, ended in June 1950. The number of children operated on up to this date was 94, 80 of whom were subsequently examined post-operatively at the School Clinic.

Under the new scheme now in operation, cases are referred to the Royal Halifax Infirmary. 103 children have had their tonsils and adenoids removed, and one child his adenoids alone, since the new administrative changes took place.

101 children have been referred by their own doctors during the year for removal of tonsils and adenoids. This makes a total of 298 cases of tonsil and adenoid operations amongst children in Halifax for 1950.

Psychiatric Treatment.

Seven new cases were referred by the doctors to the Psychiatrist at the Halifax General Hospital and reports were subsequently received.

Handicapped Pupils.

The number of handicapped children who were found to require special educational treatment are as follows :

Defect	Boys	Girls	Total
Blind	—	1	1
Partially sighted	—	—	—
Deaf	1	—	1
Epileptic	—	—	—
Maladjusted	—	1	1
Physically handicapped	—	—	—
Diabetic	—	—	—

Educationally Subnormal Pupils.

	Boys	Girls	Total
To go to special day school	11	9	20
To go to boarding schools	—	1	1
To remain at an ordinary school with special educational treat- ment	12	3	15
To be re-examined	3	2	5
To be referred to the Local Authority	3	—	3
To be referred to the Psychiatrist	—	—	—
Total	30	17	47

An account of the year's activity for 1950 at Quarry House Special School is given elsewhere in this report.

The activities of Bermerside Open-Air School and Home as described by the Medical Officer in charge, are also given under separate heading in this report.

Finally, we once more take the opportunity of expressing our sincere thanks to all who have helped to maintain a high standard of School Health Service which is always our aim.

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

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

APPENDIX A

BERMERSIDE HOME, No. 1836.

No case of children's infectious diseases occurred in the Home during 1950. Mostly we had to deal with colds. There were two cases of pneumonia, one of which was treated in the sick bay; the other had to be transferred to hospital for treatment. Two cases of severe Tonsillitis were transferred to the Isolation Hospital.

There is now an innovation in-so-far as holidays are concerned. The Home is closed during the local "Wakes" holiday and also during the Easter and Christmas industrial holidays, so that the children can join their parents during the holiday periods.

No. on register at the beginning of year	.....	20
Admitted during the year	.....	30
Discharged during the year	.....	36
Average period of stay	.....	6 $\frac{1}{4}$ months
Average increase in weight	.....	3.8 kg. (8.37 lbs.)
Highest gain in weight	.....	6.9 kg. (15.2 lbs.)
Average increase in height	.....	3.5 cm. (1 $\frac{3}{8}$ ins.)
Highest gain in height	.....	7.6 cm. (2 $\frac{1}{8}$ ins.)
No. of Medical Inspections	.....	34
No. of examinations	.....	370

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

BERMERSIDE OPEN-AIR SCHOOL, No. 29477.

There is no change to report for this school in medical procedure.

There was no new case of malnutrition admitted. As previously, the main group of children admitted were delicate children (general debility). The other cases were: one congenital heart, a few bronchitis and asthma cases and some rheumatics and non-infected T.B. contacts.

No. of children on register on January 10th, 1950.....	117
No. of children admitted during the year	72
No. of children re-admitted during the year	10
No. of children discharged during the year.....	83
Average period of stay	1 year 6 months
Average increase of weight	2.6 kg. (5.73 lbs.)
Highest gain in weight	8 kg. (17.64 lbs.)
Average increase in height	4 cm. (1 $\frac{9}{16}$ ins.)
Highest gain in height	9 cm. (3 $\frac{1}{2}$ ins.)
Medical Inspections	32
No. of examinations	868
Average attendance 1950	101

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

DENTAL INSPECTION AND TREATMENT.

Inspection.

During the year 5,792 children were seen at the routine inspections at school. This is just over half the number examined in a normal year, and the interval between routine dental inspections is now approaching two years, yet under the National Health Service three inspections a year for children is not considered excessive for the maintenance of good dental health.

In addition 2,098 children were inspected at the clinic as special cases requiring urgent treatment for relief of pain, compared with 1,597 in 1948, an increase of $33\frac{1}{3}\%$.

Treatment.

The only way in which the treatment required by each child can be reduced to a minimum is by regular inspection at short intervals and prompt treatment of defects before these become such that the treatment becomes irksome to the child and time-consuming for the Dental Officer.

Unfortunately the unavoidable increase in the period elapsing between inspections is such that a great deal of time is spent in attending to children who require emergency treatment and who cannot wait until their turn comes for routine treatment. The result is a vicious circle, the more time required for emergency cases the less time left for routine cases, and the less time left for routine cases the greater the number of emergency cases.

In 1948 each Dental Officer had to treat about 798 of these special cases and the rest of his time could be devoted to routine treatment. In 1950 one Dental Officer had to cope with 2,098 special cases, and as the number attending at any one session is unpredictable the problem of planning advance appointments for routine cases has become very difficult.

This alteration in the emphasis of the work from routine to emergency has resulted in a proportionate fall in the number of fillings—977 in permanent teeth, and 73 in temporary teeth—and a proportionate increase in extractions—639 permanent teeth, and 4,202 temporary teeth.

Altogether 3,893 children made 4,947 attendances for treatment. Of these 122 were referred by the Maternity and Child Welfare Service, being children under school age.

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

Senior Dental Officer.

APPENDIX C

OPHTHALMIC CLINIC.

The classified list gives details of the children seen at the Ophthalmic Clinic during the year. The decrease in the actual number seen is due to some of the children taking advantage of the supplementary Ophthalmic service and being seen privately.

We have now again started the Orthoptic Clinic under Miss Illingworth and very good work is being done there. Next year's report should show something of this.

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

APPENDIX D

ORTHOPÆDIC CLINIC.

Chiefly owing to the shortage of staff during the greater part of the year, the number of cases attending for treatment has decreased, although the total number of new cases admitted for treatment has not altered from the previous year.

We very much regret losing the services of Miss Dudgeon. It is fortunate that she has inspired her successors to carry on the extremely valuable work. They are using to a large degree her own technique and methods.

It is proposed that the Orthopædic Surgeon's Clinics should include special sessions for cases of infantile paralysis, and later possibly a similar clinic for cases of spastic paralysis.

GEOFFREY HYMAN,

M.B., Ch.B., F.R.C.S. (Eng.),
L.R.C.P.

REPORT BY THE ORGANISER OF PHYSICAL EDUCATION.

Miss S. Dudgeon, Organiser of Physical Education, retired at the end of December. It is desired to place on record an expression of appreciation of her splendid work in the service of the Authority. Her retirement is a loss that will be felt over a wide area as her influence reached far beyond the limits of the County Borough.

Her place has been taken by Miss B. Axson, who was able to commence immediately after Miss Dudgeon's retirement. Miss Axson was previously Senior Representative of the Central Council of Physical Recreation for this area, and in that capacity has had experience over a wide range of activities which should prove most useful in her new work.

As in previous years a large number of visitors have seen the work in Physical Education in the Committee's Schools, particularly in Primary Schools. Their observations indicate that the standard of work compares very favourably with that in other areas, and that the Halifax approach is being widely adopted.

Most schools in the area now have facilities for indoor work, but such schools as Holy Trinity Junior (Boys' and Girls' departments), St. Joseph's (all departments), and Christ Church, have no indoor accommodation and work at a great disadvantage.

The provision of apparatus and small equipment in Primary Schools is going ahead satisfactorily, although sharply rising costs, often unpredictable, make it a matter of increasing difficulty. It is appreciated that this matter is one of general concern, and all that is possible in the way of improvisation, re-conditioning, and care of equipment, is being encouraged.

In the Secondary Schools, the need for portable apparatus has been partly met but a number of schools still require such items of gymnastic equipment as vaulting bucks and agility mattresses. As each of these articles cost between £20 and £24, provision from normal equipment allowances is necessarily slow.

The question of providing fixed apparatus (beams, climbing ropes, etc.) is constantly under review. This is particularly needed in schools which will continue to serve as secondary schools for any appreciable time. This has been done at Sunnyside Secondary Modern School, and the hall has been very well modified to meet the needs of senior work.

In the Secondary Schools there is an increasing need for more specialised knowledge of the various aspects of the subject. This can partly be met by local courses, but attendance at outside vacation courses is also valuable.

During the course of the year, demonstrations have been held in Primary Work, Dancing and Swimming. All were well attended.

A Teachers' Swimming Class continued throughout the year and has had quite a noticeable effect on the standard of swimming teaching.

Courses in Association and Rugby Football coaching were held at the R.E.S. Gymnasium in co-operation with the Central Council of Physical Recreation. These were designed to meet the needs of teachers as well as club coaches. A number of teachers were successful in gaining coaching certificates from these courses.

Swimming.

The opening of Park Road Baths is eagerly awaited. This should enable all Senior Schools to be accommodated in larger baths and allow of some extension of the Junior Schools' swimming programme.

Swimming statistics for the year show general improvement. The number of non-swimmers leaving school has appreciably decreased whilst the number of swimming awards, particularly Honours Certificates, is greater than in previous years.

The number of R.L.S.S. awards too, has increased, and Ovenden Secondary School has been presented with a trophy by the Society for having gained the largest number of awards of any school in this area.

It is felt that the fact that the leavers from 22 out of 29 Primary Schools could all swim, justifies the extension of Primary School swimming.

The day is looked forward to when the Municipal Swimming facilities can satisfy the demand and keenness for this most satisfying form of exercise.

Playing Fields.

Playing Field accommodation constitutes a growing problem. There are still Senior Schools with inadequate allocations. Ling Bob is used to capacity and cannot nearly satisfy school needs.

The use of Roils Head for some of the Senior games is being considered. Roils Head, though admittedly bleak in poor weather, has admirable changing and shower accommodation, and a good number of playing pitches.

During the year, two cricket squares have been re-laid at Broomfield and Ovenden. Four concrete and matting practice wickets were provided and it is hoped to provide another four or five in the coming season. These did not become available for use until near the end of the season so it is not yet possible to report on their suitability.

During the coming year fields for juniors at Queen's Road, Copley and Bradshaw should become available for use.

Playing field surfaces, noted in last year's report as being impoverished, have received treatment and are beginning to show some improvement. Fields generally, however, are subject to heavy use and it is impossible to rest areas for rehabilitation.

Youth.

The Youth Athletics team again acquitted itself well at the Inter-Area Sports. The Sports were held on the second Saturday of Wakes Week, and it was only with difficulty that a team was raised for the occasion. Though relatively weak, the team was placed third in a field of eleven teams.

Cousin Lane and Roils Head are used to capacity for field games. The improved facilities at Roils Head have proved of immense value to Youth teams, and it is hoped that changing facilities at Cousin Lane will become available in the near future.

Out-of-School Activities.

There have been additions to the Men's Recreative Classes during the year. In addition to those of last year there is now a Basketball class on Fridays, and a Recreative P.T. class on Tuesdays, both at the R.E.S. Gymnasium.

The Fencing Courses, under Miss P. North, have continued throughout the year. These courses have been for beginners and the time is approaching for more advanced instruction to be given. This has so far been met by arranging with the Central Council of Physical Recreation for Leaders' Courses under Professor Roger Crosnier. As he is probably the world's premier coach, we have been fortunate to have him.

The School-boys' Boxing class ran successfully at the R.E.S. Gymnasium under Messrs. Pollard and Woodhead.

Out-of-School Swimming was again popular, and supervisors coped valiantly with large numbers.

Play Centres were held at Ovenden, Ling Bob, Northowram and Sunnyside. Sunnyside was closed early in the season due to inadequate staff, but the other three ran well, largely because of the efforts of Messrs. Booth, Brooksby, and Birchenough, who continue to accept leaders' responsibility and give generously of their time.

School Clinic.

The Orthopædic Department of the School Clinic now comes under the supervision of Miss Axson, with Mr. Stuart as Senior Assistant. Mr. Stewart, for the past year, has been working at Birmingham. His experience there should prove of value in his present work.

Staff changes and shortages have again been a source of concern. Apart from Miss Dudgeon's retirement, Miss Foers has left and the Committee is still one short of the normal complement. The third member of staff should be able to take up duties in June, when for the first time for a very long period, the Clinic should be fully staffed.

Conclusion.

The Organisers wish to express their thanks to Head Teachers and their staffs, to members of the Education Office staff, and to all others whose co-operation has so much assisted them in their work.

A. MORRISON, M.B.E.

QUARRY HOUSE SPECIAL (E.S.N.) SCHOOL.

No. 29108.

I beg to submit my report on Quarry House School for the year 1950.

I am pleased to state that work has progressed very favourably during the year under review; 20 children were admitted, 12 boys and 8 girls; 29 children were discharged. Of these 4 were returned to an ordinary school, 3 left the district, 2 were reported to the Local Authority for the purposes of the Mental Deficiency Acts under Sub-section 3 of Section 57, Education Act, 1944, while the remainder having attained school-leaving age, left for work. The majority of these children were referred for Statutory Supervision after school.

As usual we have had to be very selective in choosing our entrants, owing to the limited accommodation at the school. We quite realise that some children who are allowed to remain on at an ordinary school would in actual fact benefit from education at Quarry House, but in view of their comparatively high I.Q., they are forced to give way to their less fortunate colleagues, for whom education at an ordinary school would prove fairly hopeless.

During the summer vacation, 14 boys accompanied by three of the staff, went on a week's holiday to the Yorkshire Dales. They stayed at a Youth Hostel and spent most of the time taking long rambles. A small grant was given by the Education Committee to help finance children who could not afford to pay their own expenses in full. A very happy time was had by all, and it is hoped that the holiday will be repeated this coming summer.

While the elementary schools were demonstrating their athletic capabilities on Sports Day, the senior classes at Quarry House took advantage of the school holiday by going on an educational visit to Ripon and Fountains Abbey.

The event of the year was of course, as in the previous year, the annual school concert held in December. Each class in the school gave a short play, and the success of the children's efforts must be very gratifying indeed to their headmaster, teachers and parents.

We must congratulate Mrs. Tuke, one of our teachers, on having a short story accepted for reading by the B.B.C.

During the year Mr. Kellett, one of the staff, went on a course dealing with the teaching of educationally subnormal children; also during the year Mr. A. Greenwood joined the staff.

The total teaching personnel now at Quarry House School consists of the headmaster and five full-time teachers.

Once more I take this opportunity of expressing my gratitude to the headmaster and his staff at Quarry House School for their conscientious work and untiring interest in the children; also my gratitude extends to the Education Committee for their ever-ready co-operation in maintaining the smooth running of this Special School.

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

APPENDIX G

SPEECH CLINIC.

Report for Calendar Year 1950.

At the beginning of January 1950 the work at the Speech Clinic was reduced to two sessions a week, whereas in the previous three years the work had covered four sessions a week. This meant that only the most urgent cases could be admitted for treatment.

The number of boys and girls receiving regular weekly treatment was as follows:—

Spring Term 1950.

29 cases including

Stammerers	.....	.....	21
Cleft Palate	.....	.....	2
Deafness	.....	.....	2
Dystalia	.....	.....	4

Summer Term 1950.

27 cases.

Two were discharged at Easter; one boy left to go to Bermerside. One new stammerer was admitted.

Autumn Term 1950.

23 cases, including 12 former patients, and 11 new patients. Of these there were:—

Stammerers	.....	.....	21
Cleft Palate	.....	.....	1
Deafness	.....	.....	1

This work continued until the end of November 1950, when the Speech Therapist resigned, and the Speech Clinic was then closed until a new appointment was made.

M. MOORE-BLAKE, M.A., L.C.S.T.,

Speech Therapist.

TABLE I.

**MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS
(Including Special Schools).
YEAR ENDED 31st DECEMBER, 1950.**

A.—Periodic Medical Inspections.

(1) Number of Inspections in the Prescribed Groups :

	1950	1949
Entrants	2,009	1,611
Second Age Group	1,263	1,016
Third Age Group	1,080	1,084
Total	4,352	3,711

(2) Number of other Periodic Inspections

—	—
Grand Total	4,352 3,711

B.—Other Inspections.

Number of Special Inspections	2,514	2,319
Number of Re-Inspections	9,555	10,490
Total	12,069	12,809

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 conditions recorded in Table IIA	Total individual pupil
Entrants	35	443	426
Second Age Group	120	132	226
Third Age Group	82	68	123
Total (prescribed groups)	237	643	775
Other Periodic Inspections	—	—	—
Grand Total	237	643	775

TABLE II.

**A. RETURN OF DEFECTS FOUND BY
MEDICAL INSPECTION IN THE YEAR ENDED
31st December, 1950.**

Defect Code No.	DEFECT OR DISEASE	Periodic Inspections		Special Inspections	
		No. of Defects		No. of Defects	
		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	38	4	321	—
5	Eyes—(a) Vision	237	55	122	2
	(b) Squint	31	11	14	—
	(c) Other	14	1	81	—
6	Ears—(a) Hearing	8	1	30	—
	(b) Otitis				
	Media	6	4	51	—
	(c) Other	8	—	142	1
7	Nose and Throat	132	358	320	30
8	Speech	6	5	8	—
9	Cervical Glands	14	31	55	—
10	Heat and Circulation	6	11	11	—
11	Lungs	56	30	227	—
12	Developmental—				
	(a) Hernia	—	—	1	—
	(b) Other	8	3	395	3
13	Orthopædic—				
	(a) Posture	17	2	12	—
	(b) Flat Foot	182	10	31	—
	(c) Other	103	10	204	1
14	Nervous System—				
	(a) Epilepsy	—	1	4	1
	(b) Other	11	9	112	—
15	Psychological—				
	(a) Developm't	3	3	13	—
	(b) Stability	1	4	3	—
16	Other	60	6	410	2

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

Age Groups	No. of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	%	No.	%	No.	%
Entrants	2,009	1,224	60.9	777	38.7	8	.4
Second Age Group	1,263	659	52.2	602	47.7	2	.1
Third Age Group	1,080	656	60.7	423	39.2	1	.1
Other Periodic Ins.	—	—	—	—	—	—	—
Total	4,352	2,539	58.3	1,802	41.5	11	.2

TABLE III.

INFESTATION WITH VERMIN.

(1)	Average number of visits per School made during the year by the school nurses	1950 7	1949 9
(2)	Total number of examinations in the schools by school nurses or other authorised persons	34,619	40,488
(3)	Number of individual pupils found to be infested	1,077	1,109
(4)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Educational Act, 1944)	134	71
(5)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—	—

TABLE IV.

**TREATMENT OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS (INCLUDING
SPECIAL SCHOOLS).**

Group I.—Diseases of the Skin.

(excluding uncleanliness, for which see Table III)

				1950	1949	
Number of cases treated or under treatment during the year :						
				By the Authority	Otherwise	
Ringworm—(i)	Scalp	.....	.....	2	5	25
	(ii) Body	.....	.....	10	1	37
Scabies	.....	.....	.....	9	—	35
Impetigo	.....	.....	.....	201	2	224
Other skin diseases	.....	.....	.....	282	77	208
Total				504	85	529

Group II.—Eye Diseases, Defective Vision and Squint.

				1950	1949	
Number of cases dealt with :						
				By the Authority	Otherwise	
External and other, excluding errors of refraction and squint				1,008	—	1,204
Errors of refraction (including squint).....				734*	—	696
Total				1,742	—	1,900
Number of pupils for whom spectacles were						
(a) Prescribed				680*	—	690
(b) Obtained				264*	350	683
Total				944	350	1,373

* Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

Group III.—Diseases and Defects of Ear, Nose and Throat.

Number of cases treated :	1950		1949
	By the Authority	Otherwise	
Received operative treatment			
(a) for diseases of the ear	—	49	295
(b) for adenoids and chronic tonsillitis	94	101	200
(c) for other nose and throat conditions	—	5	—
Received other forms of treatment	849	—	436
Total	943	155	931

Group IV.—Orthopædic and Postural Defects.

	1950		1949
	By the Authority	Otherwise	
(a) Number treated as in-patients in hospitals	2	—	22
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patients departments	803	7	935

Group V.—Child Guidance Treatment.

Number of cases treated :	1950		1949
	In the Authority's Child Guidance Clinics	Elsewhere	
Number of pupils treated at Child Guidance Clinics	7	—	32

Group VI.—Speech Therapy.

Number of cases treated :	1950		1949
	By the Authority	Otherwise	
Number of pupils treated by Speech Therapists	38	—	99

Group VII.—Other Treatment Given.

Number of cases treated :	1950		1949
	By the Authority	Otherwise	
(a) Miscellaneous minor ailments	6,014	144	7,260
(b) Other—Ultra Violet Ray	286	—	247
Total	6,300	144	7,507

TABLE V.

**DENTAL INSPECTION AND TREATMENT
CARRIED OUT BY THE AUTHORITY.**

	1950	1949
(1) Number of Pupils Inspected by the Authority's Dental Officers :		
(a) Periodic Age Groups	5,792	10,282
(b) Specials	2,098	1,936
(c) Total (Periodic and Specials)	7,890	12,218
(1a) Number of Re-inspections	25	—
(2) Number found to require treatment	4,335	5,861
(3) Number referred for treatment	4,335	5,861
(4) Number actually treated	3,893	5,264
(5) Attendances made by Pupils for treatment	4,947	7,530
(6) Half-days devoted to : Inspection	48	100
Treatment	396	641
Total	444	741
(7) Fillings : Permanent Teeth	977	1,957
Temporary Teeth	73	96
Total	1,050	2,053
(8) No. of Teeth Filled : Permanent Teeth	927	—
Temporary Teeth	73	—
Total	1,000	—
(9) Extractions : Permanent Teeth	639	709
Temporary Teeth	4,202	5,538
Total	4,841	6,247
(10) Administration of General Anæsthetics for Extraction	—	13
(11) Other Operations : Permanent Teeth	779	1,456
Temporary Teeth	83	104
Total	862	1,560

TABLE VI.
PROPORTION OF VACCINATED PUPILS AMONGST
THOSE EXAMINED IN ROUTINE DURING THE PERIOD
1940 to 1950.

Year	Routine Examinations		Number showing Vaccination Scars	Percentage Un-vaccinated
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
	(b) Girls	2,903	462	84.1
*1947	(a) Boys	1,810	289	84.0
	(b) Girls	1,822	294	83.9
*1948	(a) Boys	2,985	431	85.6
	(b) Girls	2,680	407	84.8
*1949	(a) Boys	1,980	280	85.8
	(b) Girls	1,731	301	82.5
*1950	(a) Boys	2,185	801	63.3
	(b) Girls	2,167	888	59.0

* Includes Secondary Grammar Schools.

TABLE VII.

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

Age	BOYS				Age	GIRLS			
	Height in Cms.		Weight in Kilos			Height in Cms.		Weight in Kilos	
	1949	1950	1949	1950		1949	1950	1949	1950
2	96.3	—	17.0	—	2	—	—	—	—
3	98.3	97.6	16.8	15.9	3	94.7	98.1	15.6	15.1
4	103.1	102.9	17.5	18.3	4	103.7	100.9	17.8	17.7
5	108.9	110.2	19.8	19.7	5	108.6	110.3	18.6	19.1
6	114.6	116.8	21.5	22.6	6	115.8	114.7	19.5	20.7
7	123.3	121.5	23.8	25.0	7	122.4	119.0	24.3	23.2
8	126.5	122.8	26.8	27.1	8	127.7	124.5	27.6	25.6
9	127.7	132.9	27.8	32.3	9	130.9	130.9	28.1	31.2
10	132.7	136.7	33.0	33.7	10	136.0	136.5	32.1	33.9
11	138.3	140.2	33.1	36.8	11	139.1	139.4	34.3	36.3
12	142.6	142.6	37.9	34.9	12	139.9	145.1	34.0	39.8
13	146.4	148.0	39.2	39.4	13	147.9	148.0	39.8	43.9
14	155.6	156.6	44.7	46.5	14	154.4	155.1	47.6	48.9
15	163.6	164.7	49.4	53.5	15	159.1	160.6	51.4	50.6
16	172.2	174.1	53.8	66.6	16	161.4	161.6	56.2	51.4
17	175.5	174.7	64.6	61.6	17	164.9	166.6	55.2	53.9
18	180.4	177.3	67.7	66.9	18	161.0	163.8	54.5	54.0

TABLE VIII.
INVESTIGATION OF INFECTIOUS AND CONTAGIOUS
DISEASES.

School	Disease	Visits Paid	Classes Inspected	Examinations of Pupils
Battinson Road	R	2	3	94
Moorside	R	1	3	79
Ovenden	R	1	2	54
Pellon Lane	R	1	2	40
St. Joseph's	R	1	1	33
Totals	—	6	11	300
	1949	4	5	164

S.F.—Scarlet Fever.

D.—Diphtheria.

M.—Measles.

S.P.—Small Pox.

C.P.—Chicken Pox.

R.—Ringworm.

C.J.S.—Conjunctivitis.

Sc.—Scabies.

Wh.C.—Whooping Cough.

Mps.—Mumps.

TABLE IX.

WORK OF THE SCHOOL HEALTH NURSING STAFF.

	1950	1949
1. Half-days on which nurses assisted at School Medical Inspection	364	315
2. Half-days on which nurses assisted at—		
(a) Minor Ailments' Clinic	1,293	1,290
(b) Inspection Clinic	275	310
(c) Ultra-Violet Ray Clinic	347	348
(d) Immunisation Clinic	43	35
3. Half-days devoted to head surveys	271	320
Total examinations of pupils	34,619	40,488
Pupils found with verminous or nitty heads	1,077	1,109
4. Half-days on which sulphur baths were given	3	25
Pupils dealt with	25	61
5. Half-days devoted to " following-up "	27	32
Homes visited	76	78
Individual pupils concerned	53	72
6. Half-days devoted to investigating infectious diseases	6	4
Throat Swabs submitted for examination	22	25
Classes examined in the course of investigating cases of infectious nature in the schools	11	5

TABLE X.

PROVISION OF MEALS.

	1950	1949
Dinners supplied :		
Primary and Secondary Schools	1,352,526	1,203,567
Special Schools	37,000	35,522
Portions of Milk consumed on School Premises	2,028,572	2,049,004
Canteens opened during the year	—	3
Kitchens opened during the year	—	—

TABLE XI.
OPHTHALMIC TREATMENT.
Classification of Errors of Refraction.

	Hyper- metropia	Myopia	Hyper- metropia with Astigma- tism	Myopia with Astigma- tism	Mixed Astigma- tism	Aniso- metre- pia	Total 1950	Total 1949
Boys	146	38	144	27	22	5	382	316
Girls	138	30	134	21	25	4	352	380
Total	284	68	278	48	47	9	734	696

	Boys	Girls	Total 1950	Total 1949
Pupils who attended the Eye Clinic	414	392	806	828
Pupils for whom glasses were prescribed	347	333	680	690
Pupils for whom glasses were not advised	54	59	113	138
Suffering from Corneal Opacities.....	—	—	—	—
„ Nystagmus	—	2	2	6
„ Ptosis	—	—	—	—
„ Lenticular Opacities	1	—	1	2
„ Severe Myopia	—	1	1	—
„ Congenital Coloboma of Choroid and Iris	—	—	—	—
„ Squint	5	3	8	2
„ Fundal changes	—	—	—	5

TABLE XII.
ORTHOPÆDIC TREATMENT.

	School Health Service	M. and C.W.C.	Total 1950	1949
Surgeon's attendances	32	11	43	43
New cases examined	92	77	169	180
Re-Examinations	478	216	694	711
Pupils under treatment on Jan. 1st, 1950	686	549	1,235	1,340
New cases admitted for treatment 1950	117	82	199	199
Discharged, etc., during year	84	128	212	304
Cases remaining under treatment on December 31st, 1950	719	503	1,222	1,235

	School Age	Under School Age	Total 1950	1949
Attendances for examination	570	293	863	891
Attendances for remedial exercises	4,086	2,155	6,241	11,270

Cases treated :—

	No. of Cases		Attendances	
	1950	1949	1950	1949
Maternity and Child Welfare	631	604	2,155	4,471
School Clinic	630	720	3,309	5,173
Clare Hall School	64	81	383	780
Bermerside School	27	36	228	366
Quarry House School	36	36	41	40
Princess Mary High School	46	62	125	440
Technical College	—	—	—	—
Heath School	—	—	—	—
Crossley and Porter School	—	—	—	—
	1,434	1,539	6,241	11,270

Waiting list, January 1st	1950 3	1949 45
Waiting list, December 31st	4	3
Cases provisionally discharged to report progress at a later date	144	163

Allocation of Hours.

	1950	1949
School Clinic and Ovenden Clinic	1,335½	1,862
Visits to Schools	64	55
M. and C.W. Clinic	602	1,103
Bermerside School	32	62
Quarry House School	5	12
Clare Hall School	150	157
Princess Mary High School	6½	37
Technical College	—	—
Swimming Class	41	36
Crossley and Porter School	—	—
Heath School	—	—
Follow up	71¾	125
	<u>2,307¾</u>	<u>3,449</u>
	1950	1949
No. recommended for operative treatment	21	17
No. recommended for appliances	16	18
No. recommended for X-Ray treatment	40	48

TABLE XIII.
SWIMMING STATISTICS.

	1946			1947			1948			1949			1950		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
No. of pupils who learnt to swim during season	327	301	628	502	493	995	527	585	1112	620	690	1310	735	649	1384
No. of pupils able to swim	942	913	1855	982	1016	1998	1246	1493	2739	1496	1832	3328	1777	1866	3643
No. of pupils who left school (14x) without gaining Elementary Certificates	117	55	172	90	114	204	55	31	86	58	75	133	71	61	132
Elementary Certificates	187	179	366	313	301	614	387	423	810	424	520	944	588	495	1083
Advanced do.	85	72	157	100	99	199	126	103	229	134	166	300	224	173	397
Honours do.	41	31	72	31	44	75	107	38	145	74	73	147	184	73	257

