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CITY OF LEEDS EDUCATION COMMITTEE

ANNUAL REPORT
ON THE SCHOOL
MEDICAL SERVICE

FOR THE YEAR ENDED 31st DECEMBER, 1943

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LEEDS EDUCATION COMMITTEE

Medical Inspection of School Children

MEDICAL SUB-COMMITTEE

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" C. V. WOODS.

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Co-opted Member:

Mrs. F. MATTISON.

MEDICAL STAFF

School Medical Officer—G. E. ST. CLAIR STOCKWELL, B.A., M.B., B.C.
(Retired 31st December, 1943).

Full-time Assistant School Medical Officers—

MAURICE E. WILLCOCK, M.B., Ch.B., D.P.H.

HERBERT HARGREAVES, M.B., B.S.

RONALD WOOD, M.B., Ch.B.

IRENE M. HOLORAN, M.B., Ch.B., D.C.H.

GWENDOLEN F. PRINCE, M.B., Ch.B., D.C.H.

*BERNARD SCHROEDER, M.B., Ch.B.

*HERMAN G. HUTTON, B.A., M.R.C.S., L.R.C.P., D.P.H.

Temporary Assistant School Medical Officers—

GRACE HOLEY, M.B., Ch.B.

ANNE M. NUTT, M.B., Ch.B. (*Part-time*).KATHLEEN V. MILLER, M.B., Ch.B. (*Left 13th April, 1943*).AGNES M. WYON, M.B., Ch.B., D.R.C.O.G. (*Appointed 1st September, 1943, Part-time*).

Consulting Surgeon (Nose, Throat and Ear)—ALEXANDER SHARP,
C.B., C.M.G., F.R.C.S.

Consulting Surgeon (Orthopædic)—REGINALD BROOMHEAD, M.B.
Ch.B., F.R.C.S.

Consulting Surgeon (Ophthalmic)—GEORGE BLACK, M.B., B.S., F.R.C.S.

MEDICAL STAFF—(continued).

Senior School Dental Officer—R. DRUMMOND KINNEAR, L.D.S., R.C.S.

Full-time Assistant School Dental Officers—

ARTHUR B. MORTIMER, L.D.S.

DAVID E. TAYLOR, L.D.S.

*NORMAN K. DAVISON, L.D.S., R.C.S.

*E. EMERSON GIBSON, L.D.S.

*ARTHUR H. GREEN, L.D.S.

HENRY L. GRAY, L.D.S.

*GEORGE M. S. MCGIBBON, L.D.S., R.C.S.

*LAWRENCE MORAN, L.D.S.

*J. WALTER SHAW, L.D.S., R.C.S., H.D.D.

*DOUGLAS M. MCGIBBON, L.D.S.

*JOHN MILLER, L.D.S.

JAMES A. WHITELAW, L.D.S.

Temporary Appointments—

MARY V. DYMOND, L.D.S. (*Left 8th May, 1943*).

SYBIL L. H. THOMSON, L.D.S., R.F.P.S. (*Left 30th April, 1943*).

School Nurses—

ISABEL FERGUSON
(*Senior Nurse*).

JANE TOTTIE.

HILDA MOODY.

EMMA M. HEARNshaw.

EDITH D. WYNN.

LILIAN MOODY.

MINNIE ABBOTT.

ALICE SHACKLETON.

*MATILDA HOLMES

GRACE E. PRIOR.

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B. MABEL MORLEY.

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ELIZABETH WHURR.

GERTRUDE SMITH.

HELENA SIMPSON.

MARY CHERRETT.

ELSIE K. BRIGGS.

ANNIE A. POSKITT.

MONA K. MACPHERSON.

SARAH E. WEBSTER.

GERTRUDE M. PENFOLD.

G. MARY TAYLOR.

WINIFRED HOLDSWORTH.

MARY D. DAVIDSON (*Appointed*
22nd March, 1943).

Masseuses—

WINIFRED WEAR.

MARION E. SWINGLEHURST.

MARJORIE HENDERSON.

JEAN D. BROWELL

Speech Therapist—

BLANCHE JACKSON.

*Joined H.M. Forces.

CITY OF LEEDS

EDUCATION DEPARTMENT

**Report of the Acting School Medical Officer for the year
ended the 31st December, 1943.**

To the Chairman and Members of the Education Committee.

LADIES AND GENTLEMEN,

I have the honour to present the Annual Report upon the work of the School Medical Service of the City of Leeds for the year ended the 31st December, 1943.

Dr. G. E. St. Clair Stockwell retired from his post as School *Staff* Medical Officer in December, 1943. He was the second School Medical Officer of the City, having succeeded Dr. A. E. L. Wear in January, 1932. During the twelve years which have elapsed since his appointment, there has been a very considerable development of the work of the Department and the changes which have been effected by him have greatly increased the efficiency and value of the Service to the city.

Dr. Stockwell's aim in his administration has always been closer co-operation with the non-medical side of the work of the Education Authority. This is of paramount importance, because it is only by this co-operation that the best results can be obtained from the work of the Medical Department.

The most notable feature of Dr. Stockwell's own clinical work has been the care and thought which he has devoted to individual children—especially if they were permanently handicapped either physically or mentally. His object has been to make such children—as far as he had the power—self-supporting and self-respecting members of the community.

War conditions have prevented the accomplishment of some of the plans in which Dr. Stockwell was most keenly interested. The unavoidable delay in the establishment of a centre for the treatment and rehabilitation of early cases of rheumatic disease at Farnley was a very great disappointment to him.

We owe a great debt to Dr. Stockwell for all that he has done for the Service and especially for the example of whole-hearted enthusiasm which he has given to us. He has helped to lay foundations on which the medical work among school children and adolescents—which is likely to be greatly extended in the future—may be built up with confidence and security.

Other changes in the staff have not been great. Dr. K. V. Miller resigned her temporary appointment on the 13th April, 1943, having been called up for service with His Majesty's Forces. Her place has been taken by Dr. A. M. Wyon who is giving part-time service.

A vacancy on the Nursing Staff was filled by the appointment of Nurse M. D. Davidson on the 22nd March, 1943.

The temporary appointments as Dental Officers of Mrs. S. L. H. Thomson and Miss M. V. Dymond were relinquished by them on the 30th April and the 8th May, respectively. The Senior School Dental Officer, Mr. R. D. Kinnear, was absent for a considerable period owing to ill health and at the end of the year there were only four School Dental Officers on duty as compared to the staff of twelve before the outbreak of war.

Return of Number of Children on Roll at 31st December, 1943.

Type of School.	Number of Schools.	Number of Departments.	Number on Roll.
<i>Elementary—</i>			
Council	73	157	43,833
Voluntary	47	78	13,982
<i>Higher—</i>			
Maintained	11	11	6,101
Non-maintained	5	5	2,271
<i>Home Office</i>	2	2	204
<i>Special—</i>			
Mentally Defective .. (including One Oak and Warlbeck)	6	6	427
Physically Defective .. (including Park Hill)	2	2	142
Partially Sighted ..	1	1	47
Deaf	1	1	110
<i>Other—</i>			
Sanatorium	1	1	29
Nursery (including Sicklinghall Grange)	2	2	132
Bewerley Park Camp ..	1	1	153
Total	152	267	67,431

The year has been free from serious epidemics of infectious disease—a matter of great importance now that there are so many very young children, who are particularly susceptible, in the schools. Infectious Diseases.

At the request of the Medical Officer of Health of the City a drive to secure the immunisation of children against diphtheria was carried out in December, 1942, and the early months of 1943. By April, 1943, over 14,000 children had been immunised or re-immunised by the School Medical Officers.

The danger to life of diphtheria is greatest during the early years of childhood. The ideal scheme would be that all children should be immunised in infancy and again at five years of age. If this were done, it would ensure that children were tided over the most dangerous period. Later they tend to develop a natural resistance to such infections and this resistance would be reinforced by the earlier immunisation in the case of diphtheria.

Efforts to secure a high rate of protection against diphtheria in our Infant Schools and Nursery Classes are thus of great importance and the School Medical Service is glad to have been of assistance to the Health Department whose responsibility it would have been in normal times to carry on this campaign against diphtheria.

Towards the end of the year an epidemic of influenza, which fortunately was neither severe nor prolonged, occurred. School children appeared to escape lightly and the number of cases did not reach really epidemic proportions.

Routine inspection of all children in the elementary schools—on admission to school and at eight years and twelve years of age—is up to date. Routine Inspection. The Board of Education has given permission to omit the eight year old examination if, owing to the shortage of staff or the additional time required in nursery classes, it should prove impossible to carry out the three routine examinations. Dr. Stockwell was very unwilling to consider the omission of this intermediate examination as it has been found that many defects—which were not present on the child's entrance to school—were then discovered. If not attended to, these defects might be found later to have caused permanent damage or to have become less susceptible to treatment. It is satisfactory to report that so far it has been found possible to continue normal arrangements in this respect and that the work is up to date.

As requested by the Board special attention has been paid to the examination of entrants. They are seen as soon as possible after they begin to attend school. During 1943 over 9,000 full examinations of children entering nursery or infant school classes were carried out by the doctors on the medical staff of the department.

Nursery Classes.

There are now 156 Nursery Classes in 92 of the elementary schools in Leeds. In December 1943 there were 3,449 children between four and five, 1,898 between three and four and 233 under three years of age in school.

These very young children require special medical attention and supervision. The arrangements at present in force are that nurses should visit all nursery classes frequently, if possible every fortnight. Doctors pay regular visits at intervals of three months for the routine examination of children newly admitted and the reinspection of those in whom defects requiring observation or treatment had previously been noted. In addition to these regular visits, Dr. Holoran and Dr. Prince who has been specially concerned with nursery classes since they were first begun in the city, visit all nursery classes informally from time to time. At these visits they deal with the hygienic side of the children's training and advise and help the teachers in all matters which might affect the health of the children. In this they are working closely in co-operation with the School Inspectors. In matters of training and equipment of nursery classes, medical and educational duties and responsibilities are apt to be inextricably mixed.

When large numbers of very young children are brought together daily, there is bound to be a greatly increased risk of epidemic sickness as the resistance of little children to infection is low. The Board has authorised the issue to children under five years of age of orange juice and cod liver oil. This should ensure that certain vitamins which may be absent from a war time diet are supplied and should help to raise the power of resistance to infection. Towards the end of 1943 a beginning was made with the issue of orange juice and cod liver oil to certain schools where methods and times of administration were tried out. During the early part of 1944 the scheme should be in full working order and all children in nursery classes be receiving their daily ration of these vitamin containing foods.

Provision of Meals.

The provision of meals on a large scale and not only for necessitous children appears now to be accepted as a settled policy for the future. There can be no doubt that the arrangements for school meals are greatly appreciated both by parents and by the children themselves. But what is perhaps more important is that the provision of a scientifically balanced diet should have a very beneficial effect on the health and development of the children. In the past, cases of malnutrition have, on investigation, been found to be the result of unsuitable diet. This has rarely been due to sheer poverty: much more commonly the cause has been the purchase of unsuitable food stuffs or wrong methods of preparation

of the meals. School meals, arranged on right principles and well cooked and served, should not only benefit the children but have a valuable educative influence which we hope will remain with them after they have left school.

The following report shows the progress made during 1943 :—

“ In January, 1943, 6,887 children daily were served with dinners at 60 canteens in the city. There was little increase in numbers until the second half of the year when a large number of canteens were opened soon after the Midsummer holidays. By December 100 canteens were serving 10,000 children daily.

In addition to these dinners, breakfasts and teas were served to children whose mothers were working. During the year there was a marked falling off in the demand for breakfasts but an increase for teas.

The respective daily figures were :—

Month and Year	Breakfasts	Teas
January, 1943	585	1,401
December, 1943	341	1,508

For the first six months of the year the aim was rather to consolidate than to increase the number of canteens. The obsolete St. Peter's Square Kitchen was closed down for reconstruction and the Barrack Road Kitchen was opened to take its place. During this period better cooking facilities and equipment produced a marked improvement in the quality and service of the meals ; the use of more insulated containers and hot plates resulted in hotter and more appetising meals. Overcrowding at some of the canteens was overcome by withdrawing the children attending from the bigger schools and providing them with their own canteens, also by opening separate nursery canteens for small children.

During the second six months the reconstructed St. Peter's Square Kitchen was reopened to provide 2,000 dinners a day and a new Kitchen to supply 1,000 dinners a day was opened for the children attending the schools in the Middleton area ; the opening of this Kitchen in the grounds of the Middleton Council School has shortened the distance for delivery and, in consequence, a much better and more palatable meal is obtained. In addition to this a much bigger proportion of the children on the Estate can now have dinners.

In January, 1943, a drop in the number of free cases fed daily, from 1,000 to 900, was probably due to the prevalence of minor sickness in schools, by February the number had again risen to 1,000 and by March to 1,100; apart from holiday periods this figure was maintained throughout the rest of the year. It is to be deplored however that at holiday times, although these cases are necessitous, only approximately 50 per cent. of the children take advantage of the dinners. The following are typical examples:—

	Easter	Whitsuntide	Midsummer	Christmas
Normal daily numbers prior to holiday ..	1,159	1,115	1,150	1,111
Holiday numbers	640	611	566	625

It is hard to understand why the parents of these children cannot obtain a better standard of attendance and it seems that unless they (the parents) make more effort there is little chance of any improvement.

In June, 1943, 5,859 paying children were receiving dinners in school canteens daily; no substantial increase however was reached until after mid-summer. In September the figure rose to 7,656 and by the end of the year was 8,937. There is still a big demand for paid dinners to be satisfied, but the Committee's scheme, designed to meet this demand and now in an advanced stage, will go far towards achieving saturation point. The scheme is on a large scale and as it develops there will be increasingly difficult problems of dining room accommodation to be met.

The success of the arrangements for school meals requires the help of the teaching staffs in the different schools. This co-operation and assistance has been given most generously and is gratefully acknowledged.

Foodstuffs generally have been in good supply and this, together with improvements previously mentioned, has enabled considerable progress to be made in the dietary.

In conclusion it should be emphasised that in the near future, in consequence of the higher cost of this improved dietary, the possibility of raising the price of the dinners above 4d. will have to be considered."

The fears which were felt in the early days of rationing that the restrictions on diet and essential food stuffs, necessitated by the war, would have an injurious effect on the growth and nutrition

of school children have, fortunately, proved groundless. Special attention has been given by the Government Authorities to the feeding of children and, so far as can be judged by our experience in schools, their efforts have been strikingly successful. So far from our looking for or expecting a deterioration in the general condition of school children, we are now looking forward with some measure of confidence to an improvement in their condition as a result of the greatly extended provision of school meals. It must be some time before such an improvement can be proved statistically but reports have been received from many schools of the improvement in the appearance and energy of children—apparently the result of school milk and dinners.

The classification of children inspected during the year as regards nutrition shows little change from 1942—93 per cent. were classed as normal or better than normal and only 7 per cent. as subnormal. As has often been pointed out before these figures refer to nutrition only and not to physique.

The records of the average height and weight of children in the groups examined do not show any significant change from the figures given in the previous year.

There was again a considerable increase in the number of bottles of milk consumed. During 1943 more than $9\frac{1}{2}$ million bottles were issued. Of these less than half a million were free. During December more than 49,000 children were receiving milk: this represents 77 per cent. of the children on the school registers.

The issue of milk during the school holidays was discontinued. This is to be regretted but is unavoidable if the children will not attend to receive the milk. In 1942 during the month of August only 2,800 bottles were issued daily as against an issue of 42,000 when the schools were open. It was found impossible to make economic arrangements for delivery for the small number of children, scattered as they were all over the city.

Milk in Schools Scheme 1st January to 31st December, 1943.

Total number of bottles issued	..	..	..	..	..	9,516,260
Total number of bottles issued free	..	..	..	..	..	456,930
Total number of days	..	..	..	..	..	214
Total number of children taking milk January, 1943	..	..	..	..	..	46,786
Total number of children taking milk December, 1943	..	..	..	..	..	49,276
Average number of bottles per day	..	..	..	..	..	44,468
Average number of bottles per day for December, 1943	..	..	..	..	..	45,132
Number on Roll for December, 1943	..	..	..	..	..	64,310
Percentage taking milk December, 1943	..	..	..	..	..	77%

Minor Treatment.

The Centres instituted in 1942 by the Health Committee under the Scabies Order of 1941 have been of great assistance during the year. Children found in school or at the clinic to be suffering from scabies are referred to these Centres for treatment. All members of the family, whether they show signs of infection or not, are treated at the same time. Only one attendance is usually required for the scabies treatment though associated septic conditions may require further treatment either at the Centre or at the School Clinic. The result has been a very marked shortening of the period of exclusion for individual cases, and relapses or reinfestations, which were disappointingly common before these Centres were instituted, are now comparatively rare. The number of children excluded for scabies during the year was 1,038 as compared with 2,027 in 1942. It is disappointing that the drop in the number of cases is not even greater but the shorter periods of exclusion indicate a great advance in the methods of dealing with this skin condition.

Apart from scabies the minor treatment carried out at the school clinics calls for no special comment.

Uncleanliness

A considerable proportion of the time of the nurses is devoted to cleanliness examinations in school and it is a disappointment to find that year after year there is little change in the number of children found to be verminous. One reason for this is that so often several members of a family—including adults and adolescents—are infested. The School Medical Officer of one of the London areas recently reported that in every case in connection with the medical examinations of children prior to evacuation, when a child was found verminous and the mother submitted herself for examination, the mother was also found to be verminous. In Leeds in the case of certain families, children are excluded several times a year—practically as often as the nurse carries out her inspections. In such cases it is useless to expect permanent improvement unless all members of the family requiring treatment receive it at the same time. At present in certain cases when the head has been cleansed and the child readmitted to school, the nurse knows that it is only a matter of weeks, or possibly of days, before the child's condition is likely to be as bad as ever.

Ear, Nose and Throat Defects.

Mr. Sharp, Consulting Surgeon, has attended the Central Clinic weekly to see cases referred to him by the Medical Officers and has also paid regular visits to the School for Deaf at Farnley.

Orthopaedic.

The work of the Orthopaedic Department under Mr. Broomhead's direction continues. At the Potternewton School for Physically Defective Children there are 123 children including 25 heart cases. These have regular periods of complete rest as well as

other treatment which they require. At Parkhill, Wetherby, there are still 19 physically defective children evacuated.

The number of cases of defective vision examined and pre-^{External Eye Diseases and Vision.}scribed for shows an increase. The delay in obtaining the spectacles prescribed still continues but the position is better than it was a year ago. In connection with the treatment of squint, a trial has been made of admitting a limited number of children recommended by Mr. Black, the Consulting Surgeon, to the School for Partially Sighted Children at Farnley for a period of two months. During this time the proper occlusion of the better eye can be supervised and ensured and, if the treatment is successful, further orthoptic treatment can be arranged at the General Infirmary.

The Special Schools for mentally defective children are fully^{M.D. Special Schools.}occupied. The school at Hunslet Lane now consists of seven classes and it is undesirable for this type of school that it should be much further extended. The two schools at Ilkley—One Oak and Warlbeck—are doing excellent work and provide plenty of evidence of the advantages of residential schools for the education of mentally defective children.

During the year we lost the services of two temporary dental^{Dental Treatment.}officers and during the last two months one of our permanent staff was absent owing to ill health. So at the end of the year, the dental staff consisted of four dental officers. Under these conditions it is inevitable that the work both of inspection and treatment should fall behindhand and that to some extent the character of the work done should alter. More time has had to be given to urgent extractions—to prevent pain and to clean up oral sepsis—and proportionately less time spent on conservative fillings.

At the same time the dental scheme which was approved by the Committee in 1934 and which, up to the outbreak of war, was giving worthwhile results, has by no means been abandoned. The machinery has been kept in working order and though it is running much behind time, we are in a position to restore the normal working of the scheme as soon as we can obtain the full staff required by the number of children who have accepted treatment.

In conclusion, Mr. Chairman, Ladies and Gentlemen, may I on^{Conclusion.}behalf of my colleagues express thanks to you for your consideration, to the Director and Office Staff for their support, to the teachers for their co-operation in working for the children, to Dr. Jervis and his colleagues and to the Medical Profession of the City for their help.

I have the honour to sign myself,

Your obedient Servant,

MAURICE E. WILLCOCK,

Acting School Medical Officer.

APPENDIX

MEDICAL INSPECTION AND TREATMENT RETURNS YEAR ENDED 31st DECEMBER, 1943.

TABLE I.
**Medical Inspections of Children attending Public
Elementary Schools**

A.—Routine Medical Inspections.

NUMBER OF INSPECTIONS.									
Entrants	..	..	..	..	..	..	..	..	9,265
Second Age Group	..	..	..	..	..	..	..	..	6,025
Third Age Group	..	..	..	..	..	..	..	..	5,750
TOTAL									21,040
NUMBER OF OTHER ROUTINE INSPECTIONS									1,301
GRAND TOTAL									22,341

B.—Other Inspections.

NUMBER OF SPECIAL INSPECTIONS AND RE-INSPECTIONS	..	..	45,809
--	----	----	--------

TABLE II.
**Classification of the Nutrition of Children Inspected
during the Year in the Routine Age Groups.**

No. of Children Inspected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
	No.	%	No.	%	No.	%	No.	%
22,341	3,122	14.0	17,651	79.0	1,558	6.9	10	.05

TABLE III.
**Group I.—Treatment of Minor Ailments (excluding
Uncleanliness, for which see Table V.).**

Total Number of Defects treated or under treatment during the year under the Authority's Scheme	..	..	18,111
--	----	----	--------

Group II.—Treatment of Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	Under the Authority's Scheme.
Errors of Refraction (including squint)	4,199
Other defect or disease of the eyes (excluding those recorded in Group I)	—
TOTAL	4,199
No. of children for whom spectacles were	
(a) Prescribed	2,607
(b) Obtained	† 2,172

† Balance awaiting delivery by Optician.

Group III.—Treatment of Defects of Nose and Throat.

Received Operative Treatment	180
Received other forms of Treatment	1,338
Total number treated	1,518

TABLE IV.—Dental Inspection and Treatment

(1) Number of children inspected by the Dentist:								
(a) Routine age-groups	..	..	..	..	..	..	..	17,467
(b) Specials	..	..	..	..	..	..	..	3,627
(c) TOTAL (Routine and Specials)	..	..	..	..	..	..	..	21,094
(2) Number found to require treatment				..	..	..		14,940*
(3) Number actually treated	..	..	..	..	..	..		12,792†
(4) Attendances made by children for treatment				..	..	..		18,250
(5) Half-days devoted to:—								
Inspection	..	..	108					
Treatment	..	..	1,905½					
TOTAL	..	..	† 2,013½					
(6) Fillings:—								
Permanent Teeth	..	9,888						
Temporary Teeth	..	—						
TOTAL	..	9,888						
(7) Extractions:—								
Permanent Teeth	..						3,794	
Temporary Teeth	..						18,909	
TOTAL	..						22,703	
(8) Administrations of general anæsthetics for extractions	..						11,056	
(9) Other Operations:—								
Permanent Teeth	..						308	
Temporary Teeth	..						—	
TOTAL	..						308	

* Includes 3,627 Casuals.

† Includes 3,213 Casuals.

‡ In addition 17 sessions spent in other work.

The figures in Table IV do not include those of one Dental Officer absent owing to illness whose returns are incomplete.

TABLE V.—Verminous Conditions.

(1) Average Number of Visits per School made during the year by the School Nurses	38
(2) Total Number of Examinations of Children in the Schools by School Nurses	194,488
(3) Number of <i>Individual</i> Children found unclean	8,934
(4) Number of <i>Individual</i> Children cleansed under Section 87 (2) and (3) of the Education Act, 1921	554
(5) Number of Cases in which legal proceedings were taken:—	
(a) Under the Education Act, 1921	25
(b) Under School Attendance Byelaws	303

TABLE VI.**A—Blind and Deaf Children.**

Number of totally or almost totally blind and deaf children who are **not** at the present time receiving education suitable for their special needs.

	At a Public Elementary School.	At an institution other than a Special School.	At no School or Institution.
Blind Children	—	—	—
Deaf Children	—	—	—

B—Mentally Defective Children

Total number of children notified during the year ended 31st December, 1943, by the Local Education Authority to the Local Mental Deficiency Authority, under the Mental Deficiency (Notification of Children) Regulations, 1928

120

TABLE VII.

No. of children given a full routine inspection in:—

(a) Schools for Higher Education	1,953
(b) Special Schools	288

TABLE VIII.**Number of Exclusions, 1943.**

DEFECT.	REFERRED FOR EXCLUSION BY		TOTAL.
	School Medical Officers.	School Nurses.	
Uncleanliness of Head	6	4,341	4,347
Uncleanliness of Body	—	75	75
Ringworm	8	7	15
External Eye Diseases	9	42	51
Scabies	302	736	1,038
Impetigo	54	402	456
Other Skin Diseases	6	112	118
Other Diseases	7	72	79
Vision	38	—	38
TOTAL 1943	430	5,787	6,217
TOTAL 1942	934	5,518	6,452

TABLE IX.
Average Height.

Age last Birthday.	Elementary Schools.			
	Number Measured.		Inches.	
	Boys.	Girls.	Boys.	Girls.
4	1,343 (1,262)	1,261 (1,124)	39·3 (39·2)	39·5 (39·4)
5	1,942 (2,264)	1,922 (2,145)	42·2 (42·3)	41·6 (42·0)
8	3,095 (2,487)	2,930 (2,467)	48·7 (48·6)	48·3 (48·6)
12	2,640 (2,280)	2,620 (2,251)	55·8 (55·9)	56·7 (56·3)

The figures in brackets are those for 1942.

TABLE X.
Average Weight.

Age last Birthday.	Elementary Schools.			
	Number Weighed.		Lbs.	
	Boys.	Girls.	Boys.	Girls.
4	1,343 (1,262)	1,261 (1,124)	37·4 (37·6)	37·1 (36·5)
5	1,942 (2,264)	1,922 (2,145)	41·6 (42·2)	40·0 (40·5)
8	3,095 (2,487)	2,930 (2,467)	55·5 (55·3)	54·4 (53·8)
12	2,640 (2,280)	2,620 (2,251)	78·0 (78·1)	80·6 (79·6)

The figures in brackets are those for 1942.

TABLE XI.
Number of Children on Roll in Special Schools
on 31st December, 1943.

SCHOOL.	NUMBER ON ROLL.		
	Leeds Cases.	Outside Cases.	Total.
FEEBLE MINDED—			
Armley	86	—	86
East Leeds	58	—	58
Hunslet Lane	155	—	155
Lovell Road	64	—	64
One Oak	40	—	40
Warlbeck	24	—	24
DEAF AND PARTIALLY DEAF	66	44	110
PARTIALLY SIGHTED	41	6	47
PHYSICALLY DEFECTIVE—			
Potternewton	123	—	123
Park Hill	19	—	19

In addition, the Leeds Education Authority is responsible for the maintenance of Leeds children in Residential Schools as follows :—

CRIPPLES—

Marguerite Hepton Memorial Home, Thorparch .. 4

BLIND—

Yorkshire School for the Blind, York 10

Henshaw's Institution for the Blind, Fulwood,
Preston 1

DEAF—

St. John's Institution for the Deaf and Dumb,
Boston Spa 6

MENTALLY DEFECTIVE—

Besford Court R.C. 3

EPILEPTIC—

Lingfield Epileptic Colony 3

TABLE XII.
Summary of the Work of the School Dental Service, 1943. (See Footnote).

	No. inspected	No. referred	% to inspected	No. treated	% to referred	Fillings	Fillings per child treated	Permanent Teeth Extractions Unserviceable teeth	Permanent Teeth Regulation Extractions	Temp. Teeth Extractions	Anaesthetics		*Sessions		Attendances for Treatment	Other Operations
											General	Regional	In-spection	Treatment		
1. Elementary ..	17,467	11,313	64.8	9,579	84.7	9,888	1.0	2,285	973	14,263	7,843	174	108	1,905½	14,623	308
2. Secondary ..	578	345	59.7	145	42.0	330	2.3	60	38	27	83	4	4	4½	330	—
3. Special ..	139	104	74.8	§106	101.9	235	2.2	64	22	132	100	2	1	30½	268	8
4. Occupation Centres ..	116	66	56.9	32	48.5	27	.8	32	17	50	40	—	2	5	55	—
Total 1, 2, 3 and 4	18,300	11,828	64.6	9,862	83.4	10,480	1.1	2,441	1,050	14,472	8,066	180	115	1,982½	15,276	316
Casuals ..	3,619	3,619	100.0	3,207	88.6	—	—	532	—	4,655	3,207	—	—	†	3,619	—
Special Casuals (All Schools) ..	23	23	100.0	21	91.3	—	—	13	—	8	21	—	—	—	23	—
GRAND TOTAL ..	21,942	15,470	70.5	13,069	84.6	10,480	—	2,986	1,050	19,135	11,294	180	115	1,982½	18,918	316

*Does not include 17 sessions spent on other work. Average No. of fillings per session 10.3. Average attendance per fillings session 6.4.

†Special Casuals are children who have refused treatment but are subsequently treated by extraction for the relief of pain and by appointment only.

‡Treatment of "Casuals" takes place at the end of the routine session on two occasions per week in each Clinic.

§Includes outstanding cases from 1942.

