

[Report 1959] / School Medical Officer of Health, Liverpool.

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Publication/Creation

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CITY OF LIVERPOOL



EDUCATION COMMITTEE

REPORT

ON THE WORK OF THE

SCHOOL HEALTH SERVICE

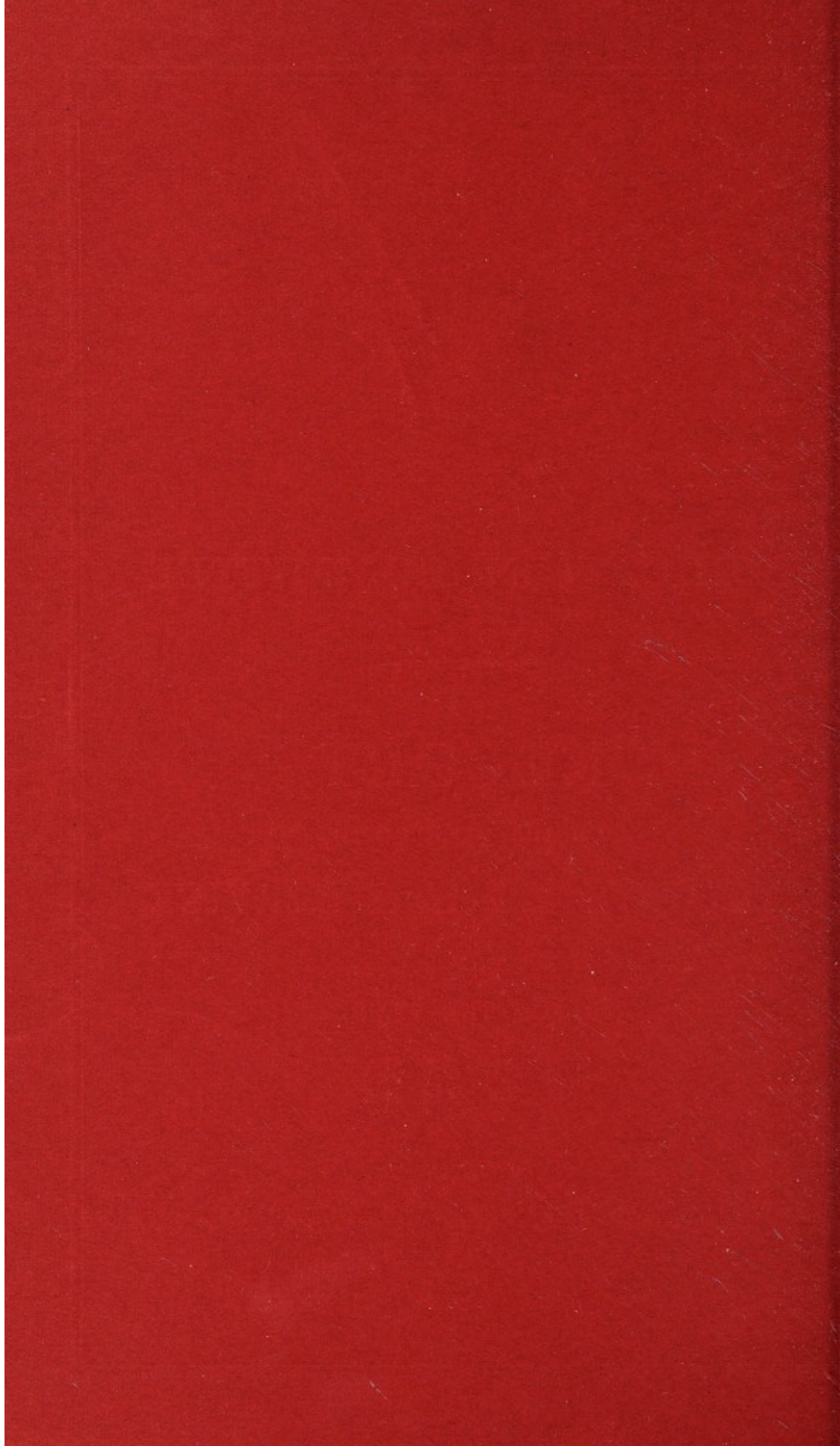
FOR THE YEAR

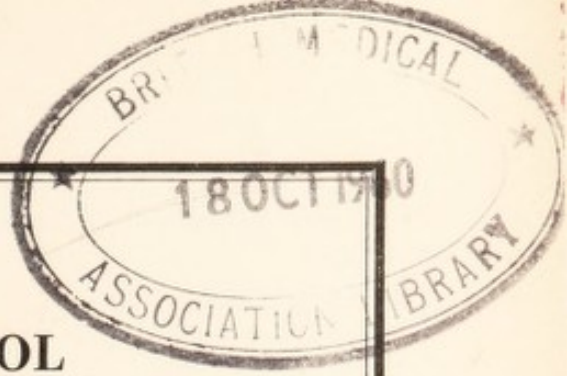
1959

BY

ANDREW B. SEMPLE, V.R.D., M.D., D.P.H.,

Principal School Medical Officer.





CITY OF LIVERPOOL



EDUCATION COMMITTEE

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ON THE WORK OF THE
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STAFF

Principal School Medical Officer

PROFESSOR ANDREW B. SEMPLE, V.R.D., M.D., D.P.H.
(also Medical Officer of Health)

Deputy Principal School Medical Officer

G. S. ROBERTSON, M.D., L.R.C.P., L.R.C.S., L.R.F.P. & S.

Senior School Medical Officer

A. M. BROWN, M.B., Ch.B., D.P.H.

Whole-time School Medical Officers

MURIEL C. ANDREWS, M.B., Ch.B., D.C.H., D.P.H.	EILEEN J. OWENS, M.B., B.Ch., B.A.O., D.C.H.
MARGARET C. BLACK, M.B., Ch.B., D.(Obst.), R.C.O.G.	JEAN D. PHILLIPS, M.B., Ch.B.
CYNTHIA J. BLADON, M.B., Ch.B., D.P.H.	JUNE PHILLIPS, M.B., Ch.B., D.P.H. (From 22.6.59).
R. BURNS, L.R.C.P., L.R.C.S., L.R.F.P.S.	LESLIE G. POOLE, M.B., Ch.B., D.P.H., D.T.M. & H. (From 20.4.59).
JEAN O. R. CARMICHAEL, M.B., Ch.B., D.P.H. (From 22.6.59).	FLORA S. QUIN, M.B., Ch.B.
CATHERINE S. ELLAMS, M.B., Ch.B., D.P.H.	IRENE W. SIMPSON, M.B., Ch.B., D.P.H.
M. GODWIN, M.B., Ch.B.	JAMES C. TAYLOR, M.B., Ch.B., D.P.H.
PAMELA P. GRIFFITH, L.R.C.P. & S., L.R.F.P. & S.	MARY I. THOMPSON, M.B., Ch.B., M.R.C.S., L.R.C.P., D.C.H. (Resigned 28.2.59).
WALTER S. HALL, M.R.C.S., L.R.C.P.	JOYCE K. TWEEDIE, M.B., Ch.B., D.P.H. (Resigned 31.1.59).
GRACE E. MCCONKEY, M.B., Ch.B., B.A.O., D.C.H.	MARGHERITA N. WALDEN, M.B., B.S.
L. P. MOORE, M.R.C.S., L.R.C.P., M.A., F.R.Econ.S., A.C.I.S., A.C.I.I.	

Part-time School Medical Officers

ELIZABETH P. DUNCAN, M.B., Ch.B., D.C.H.
MARY F. LACEY, M.D., Ch.B. (Resigned 31.12.59)

Principal School Dental Officer

L. C. WINSTANLEY, T.D., L.D.S.

Whole-time School Dental Officers

JOAN A. COWLEY, B.D.S.	Alice J. Lloyd, L.D.S., R.F.P.S.
BARBARA CUNNINGHAM, L.D.S.	J. F. MORGAN. (<i>From 1.8.59</i>).
N. KEARNEY, B.D.S., N.U.I. (<i>From 1.4.59</i>).	W. F. WREN, B.D.S.

Part-time School Dental Officers

FRANK BAL (*From 2.2.59*).
G. S. BALL, L.D.S.
J. P. BLACOE, L.D.S.
H. J. BURNS-JONES, L.D.S. (*From 15.6.59*).
J. H. CALLAGHAN, L.D.S., R.C.S.(Eng.).
J. L. CALLAGHAN, L.D.S., R.C.S.(Eng.). (*Terminated duties 22.7.59*).
VINCENT A. CONNOR, L.D.S., R.C.S. (*From 2.2.59*).
JOHN B. COONEY, L.D.S., R.C.S. (*Terminated duties 25.2.59*).
ZILLAH A. FAIRHURST, L.D.S., R.C.S.(Eng.).
WILLIAM T. GROSART, L.D.S.
PAMELA M. HOLLAND, L.D.S. (*From 7.7.59*).
JANE S. HOMFRAY, L.D.S.
J. JONES, L.D.S., R.C.S.(Eng.), M.P.S.
N. KEARNEY, B.D.S., N.U.I. (*Terminated duties 31.3.59*).
J. M. D. MACAULEY, L.D.S., R.C.S.
K. MATSON, L.D.S., R.C.S.
W. J. MEAKIN, L.D.S., R.C.S.(Eng.). (*Terminated duties 31.1.59*).
J. F. MORGAN. (*Terminated duties 30.7.59*).
J. S. O'BRIEN, L.D.S.
F. PATTON.
B. QUEST, L.D.S.
L. TURNER.
DOREEN F. WILSON, L.D.S.

Dental Hygienist

ELIZABETH W. EVANS. (*From 1.7.59*).

Psychologists

M. CHAZAN, M.A.
KATHLEEN HENRY, B.A. (*Part-time*).
A. P. NEILL, B.A.

Social Workers

BARBARA H. GRIFFITHS.
BRENDA A. LOVEGROVE, B.A.

Senior Speech Therapist

W. G. GOOD, L.C.S.T.

Speech Therapists

ANNE E. M. DONOHUE, L.C.S.T., Dipl.Intl., Ph. (*Resigned 23.12.59*).

MAIR JONES, L.C.S.T.

JEAN KNIGHT, L.C.S.T.

Superintendent Physiotherapist

JEAN H. MCHUTCHON, M.C.S.P. (*Resigned 28.2.59*).

STANLEY RUBIN, Dipl., C.S.P. (*From 1.8.59*).

Physiotherapist

J. KIRKBY, M.C.S.P.

BARBARA SHELDRAKE, Dipl., C.S.P. (*From 2.11.59*).

Senior Remedial Gymnasts

W. P. ADAMS. (*Resigned 30.4.59*).

ROSALINE MATHERON. (*Part-time from 6.5.59 to 28.7.59*).

JOHN F. SHIPMAN.

Part-time Specialist Officers

Oculists.

DAVID BLACK, M.B., B.Ch., B.A.O., D.O.M.S. (Also Visiting Oculist for Partially-sighted Children).

A. V. CLEMMY, M.A., B.M., B.Ch., M.R.C.S., L.R.C.P., M.M.S.A., D.O.M.S. (*From 6.5.59*).

NORMAN F. DONALDSON, M.B., B.Ch., B.A.O.

JOHN D. E. EDWARDS, M.B., Ch.B., D.O.M.S., R.C.P.S.I.

NORA M. ENGLISH, M.B., B.Ch., B.A.O., D.O. (*Resigned 31.12.59*).

RHONA A. REID, M.A., M.B., Ch.B., D.O.

H. BENEDICT SMITH, M.B., B.Ch., B.A.O., M.Ch.(Ophth.), D.O.M.S.

Orthopaedic Surgeons.

H. G. A. ALMOND, M.R.C.S., L.R.C.P., M.B., Ch.B., M.Ch.(Orth.), F.R.C.S.

F. C. DWYER, M.B., F.R.C.S., M.Ch.(Orth).

A. G. O'MALLEY, M.B., Ch.B., M.Ch.(Orth.), F.R.C.S.

G. L. SHATWELL, M.B., Ch.B., M.Ch.(Orth.), F.R.C.S.

Paediatric Consultant.

PROFESSOR JOHN D. HAY, M.A., M.D., F.R.C.P., M.R.C.S., D.C.H.

Paediatric Consultant at Greenbank Boarding Special School (Spastic Unit).

R. L. J. S. DERHAM, M.B., Ch.B., M.R.C.S., L.R.C.P., D.C.H., D.P.H.

Psychiatrists.

H. S. BRYAN, M.R.C.S., L.R.C.P.

IVAN LEVESON, M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.M.

PHILIP PINKERTON, M.B., Ch.B., D.P.M.

Aurists.

H. V. FORSTER, M.C., M.Sc., M.B., Ch.B., F.R.C.S.

JOHN E. G. MCGIBBON, O.B.E., M.B., B.S., D.L.O. (*From 6.5.59. (Died 25.10.59).*)

I. A. TUMARKIN, M.B., Ch.B., F.R.C.S., D.L.O. (*From 9.12.59.*)

Anaesthetists.

NATHAN GEFFEN, M.B., Ch.B., D.A.(London). (*Resigned 23.7.59.*)

GEORGE R. HOPPER, L.M.S.S.A.(London), F.F.A., R.C.S.

GEORGE McLoughlin, M.D., Ch.B., D.P.H., M.R.C.S., L.R.C.P., F.F.A., R.C.S., D.A. (*From 29.12.59.*)

T. PATRICK MURRAY, L.R.C.P. & S., D.A., F.F.A., R.C.S.E.

School Nurses, Etc.

Superintendent: MISS M. SNODDON, S.R.N., S.C.M., H.V.Cert.

Deputy Superintendent: MISS W. K. POOLE, S.R.N., S.C.M., H.V.Cert.

Also:—26 Permanent Nurses.

34 Temporary Nurses.

10 Nursing Assistants.

13 Clinic Helpers (including 10 part-time).

13 Dental Attendants.

Clerical

Chief Assistant (Administration): MR. A. MCCALLUM.

Also:—45 Clerks.

CITY OF LIVERPOOL

EDUCATION COMMITTEE

REPORT of the PRINCIPAL SCHOOL MEDICAL OFFICER for the Year ended 31st December, 1959.

INTRODUCTION

During the year under review there has been no outstanding new development. The work has progressed without interruption, the only difficulty being shortage of staff in certain branches of the work. The outstanding shortages have been of dental surgeons, physiotherapists and speech therapists. **Staff Shortage**

There is also a shortage of school nurses, but it has been possible to fill vacancies in a temporary capacity by the employment of state registered nurses. The difficulty in this section of the work is not only that such nurses have no special training for this work, but also the frequency with which changes of personnel take place amongst this group. Because these posts are of a temporary nature, not unnaturally, a nurse in such a post leaves the Service as soon as she finds work both suitable and of a permanent nature. Very often a state registered nurse as a result of experience within the Service, becomes relatively proficient but through the frequency of changes much of the work cannot be expected to be carried out efficiently.

It is very important to discover both "deaf" and "spastic" children as early in life as possible and to commence their treatment. The department in recent years has been making strenuous efforts in this regard and it is pleasing to report that with the help of the Maternity and Child Welfare Department and of general practitioners and hospital consultants, this early "ascertainment" is being accomplished with ever increasing efficiency. **Handicapped Pupils**

An outstanding need in the Service is more adequate premises for the Child Guidance Clinic, together with provision of a day school for maladjusted children. More children are being brought forward as being in the need of this type of treatment and these needs are now becoming matters of urgency.

The system of medical inspections in the Liverpool schools is such that there is little chance of a handicapped pupil being overlooked and the assessment of these children is kept well up-to-date. In this way the earliest possible special educational treatment can be undertaken. This completeness of "ascertainment" has also aided the Authority in planning and providing the necessary special schools.

**Lack of
Sleep**

The amount of unanimity in doctors' and nurses' reports can leave no doubt that in relation to lack of adequate sleep, the combination of watching television and parental lack of discipline of their children, plays an ever increasing roll.

Uncleanliness

Judged by statistics, there has been no improvement in the standard of cleanliness. The school nurses, however, point out that in the case of a large majority, classified as unclean, there are signs of an attempt by the parent to keep the head clean and the infestation is only of a relatively minor degree. Such a situation is not accepted as satisfactory. The lack of powers to compel all persons in a family to be cleansed is one of the difficulties in this field of work.

**Health
Education**

There is still much scope for an increase in health education. The members of the staff of the Service are always available to assist in programmes on this subject in the schools, of which advantage is being taken by many Head Teachers, but there is much room for extension in this field. The teaching of human biology, which well could commence in the primary schools, would do very much in promoting both the physical and mental health of the population. Many talks and lectures on health matters are given by members of the staff to interested organisations outside official hours.

This annual report, which I submit as Principal School Medical Officer responsible to the City Council for the School Health Service, is a record of the work of all concerned in the School Health Service in Liverpool. My thanks are due to the staff for their hard work and loyalty during the year. I am particularly grateful to my Deputy Principal School Medical Officer, Dr. G. Stuart Robertson, for his conscientious application to the day to day work and to the Chairman of the School Health Service Sub-Committee, Councillor William Smyth, for his constant help and advice during the year. I would also take this opportunity of expressing my thanks to the members of the School Health Service Sub-Committee and the Education Committee for the courtesy they have shown in considering the recommendations put before them during the year.

Andrew B. Semple

Principal School Medical Officer.

GENERAL CONDITION

1. To-day, in the field of nutrition, the over-weight child is a far more frequent problem than that of the malnourished.

In the classification of children's general condition, as "satisfactory" or "unsatisfactory," the percentage of unsatisfactory in 52,616 examinations was 1.25.

In regard to the general condition of the children, school medical officers comment as follows:—

Dr. P. P. Griffiths—"The general health and nutrition of the children is extremely good and the standard of cleanliness continues to improve."

Dr. L. P. Moore—"The general health of the children continues on a high level with fewer classified as physically unsatisfactory. Obesity is, however, somewhat of a problem, but most of the children concerned are willing to observe reasonable rules of diet and benefit consequently.

"The sale of biscuits in school and indiscriminate sweet-eating adds to such problems and is a potent factor in the increased dental caries found at all ages."

Dr. F. S. Quin—"In view of the state of the teeth of school children it would seem that the selling of biscuits in school might be discouraged. If something must be eaten at break it would be preferable to encourage the consumption of fruit, e.g., an apple, which would be better both for the teeth and digestion."

Typical reports of school nurses relating to this same subject are as follows:—

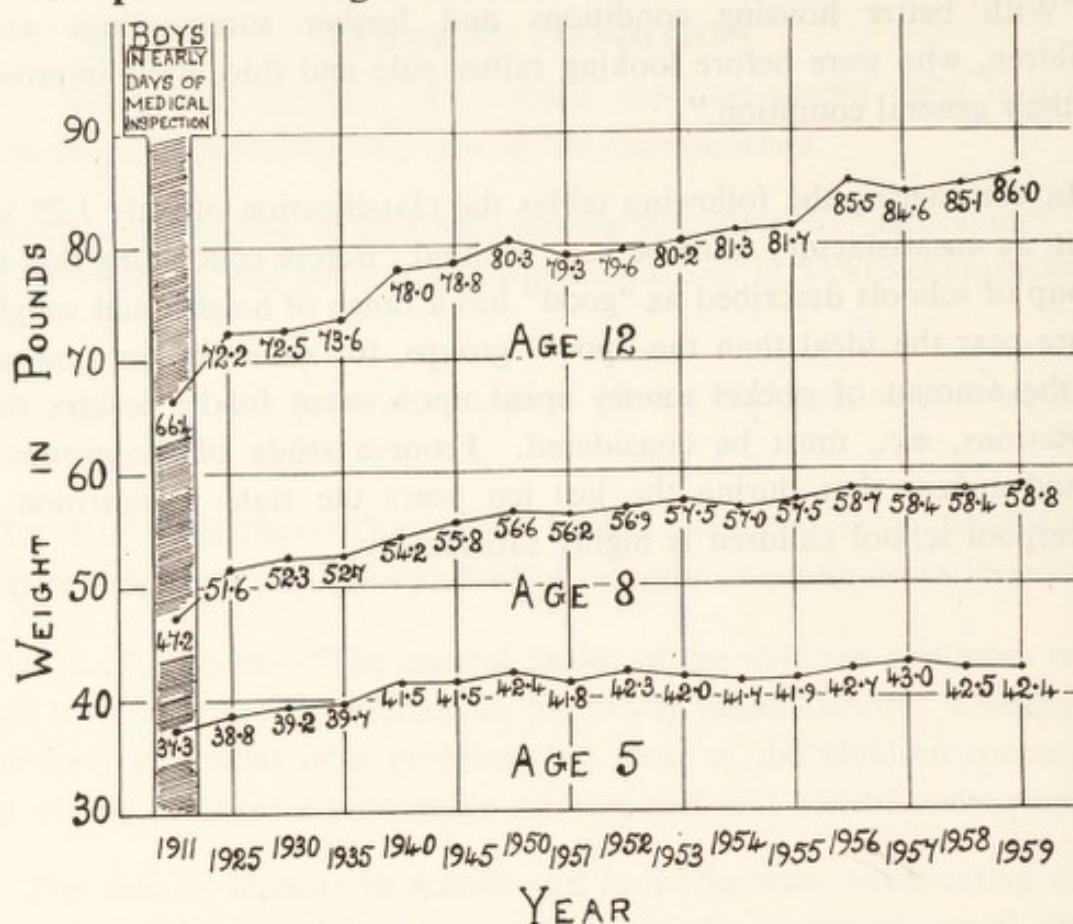
"Far too many sweets and biscuits are consumed by the kiddies; one does advise them, when one has the opportunity, to buy fruit instead of sweets. When apples are cheap and in good supply, sales of these in the schools would be better than biscuits."

"Some of the mothers living on the new housing estates have remarked how their children's chest conditions have improved since they have been living in their new homes, and where in their previous homes they were greatly overcrowded.

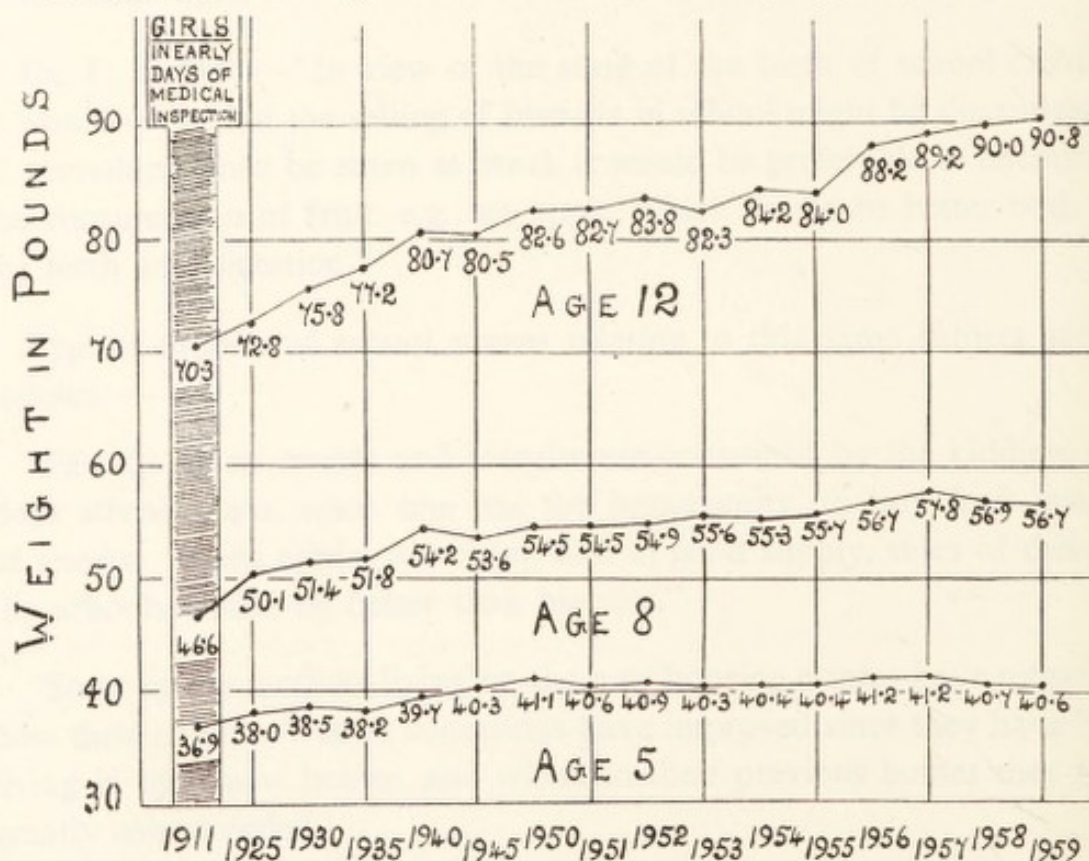
"With better housing conditions and fresher surroundings some children, who were before looking rather pale and thin, have improved in their general condition."

In considering the following tables the classification of only 1.25 per cent. as unsatisfactory must be kept in mind. Before concluding that the group of schools described as "good" has a range of heights and weights more near the ideal than the "poor" groups, for example, the question of the amount of pocket money spent upon sweet foods, besides race variations, etc., must be considered. From a study of the groups it would appear that during the last ten years the state of nutrition of Liverpool school children is highly satisfactory.

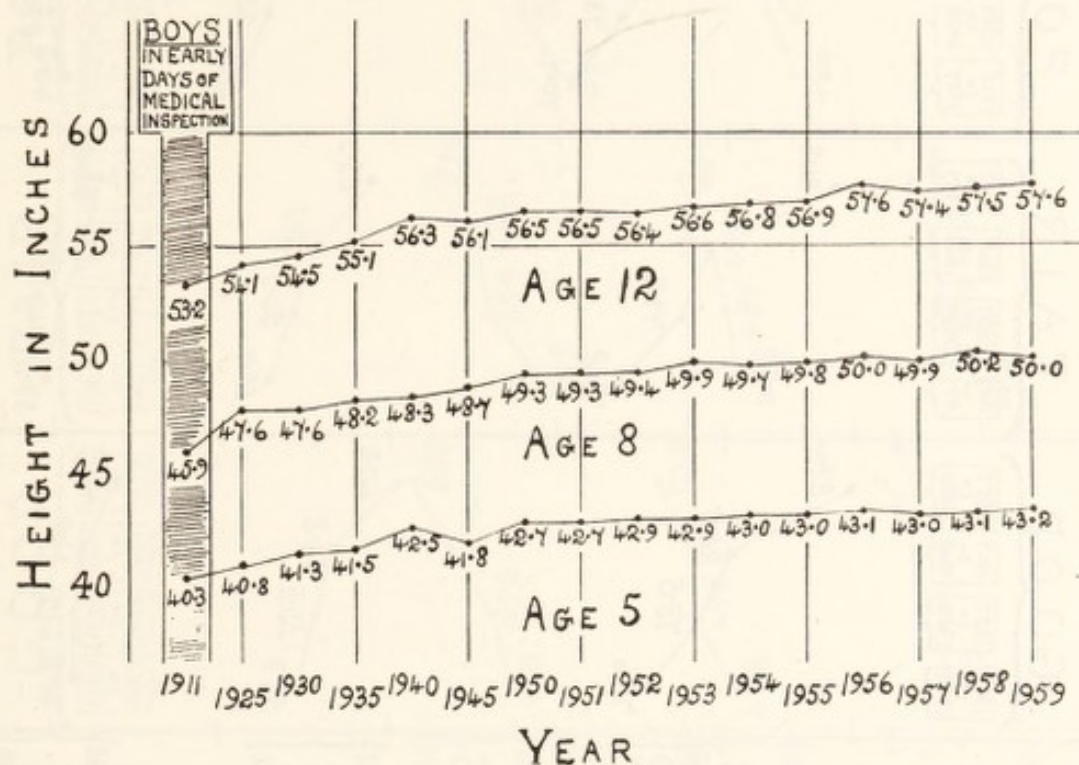
Comparative Average WEIGHTS of BOYS, Ages 5, 8 and 12.



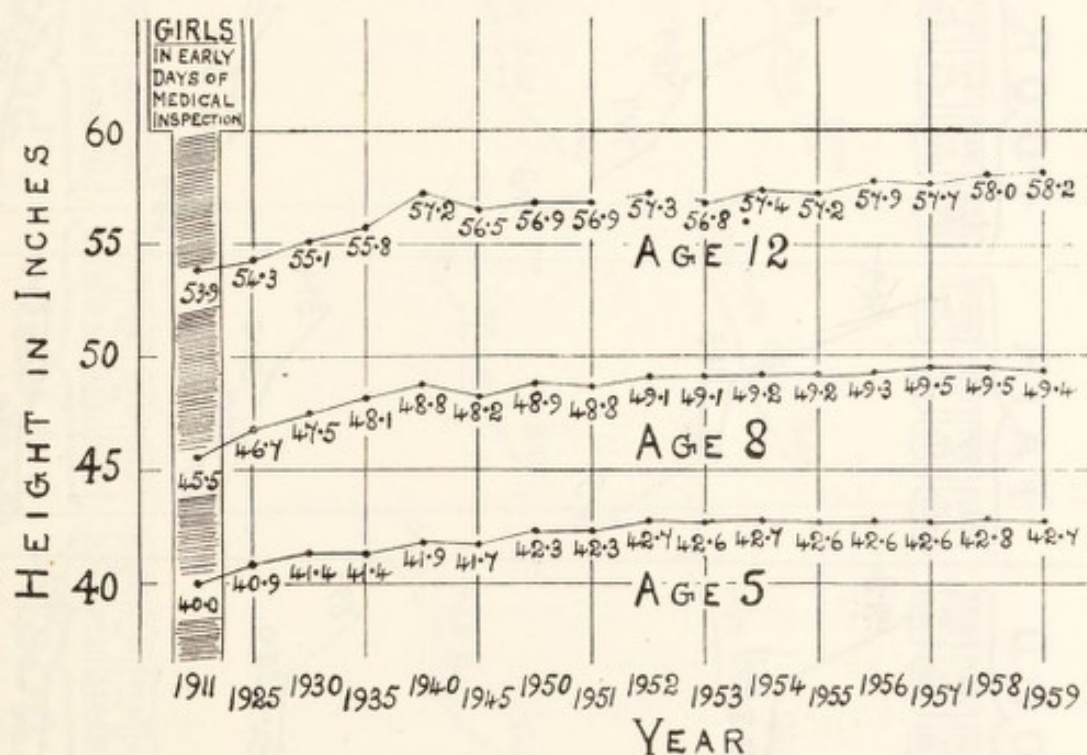
Comparative Average WEIGHTS of GIRLS, Ages 5, 8 and 12.



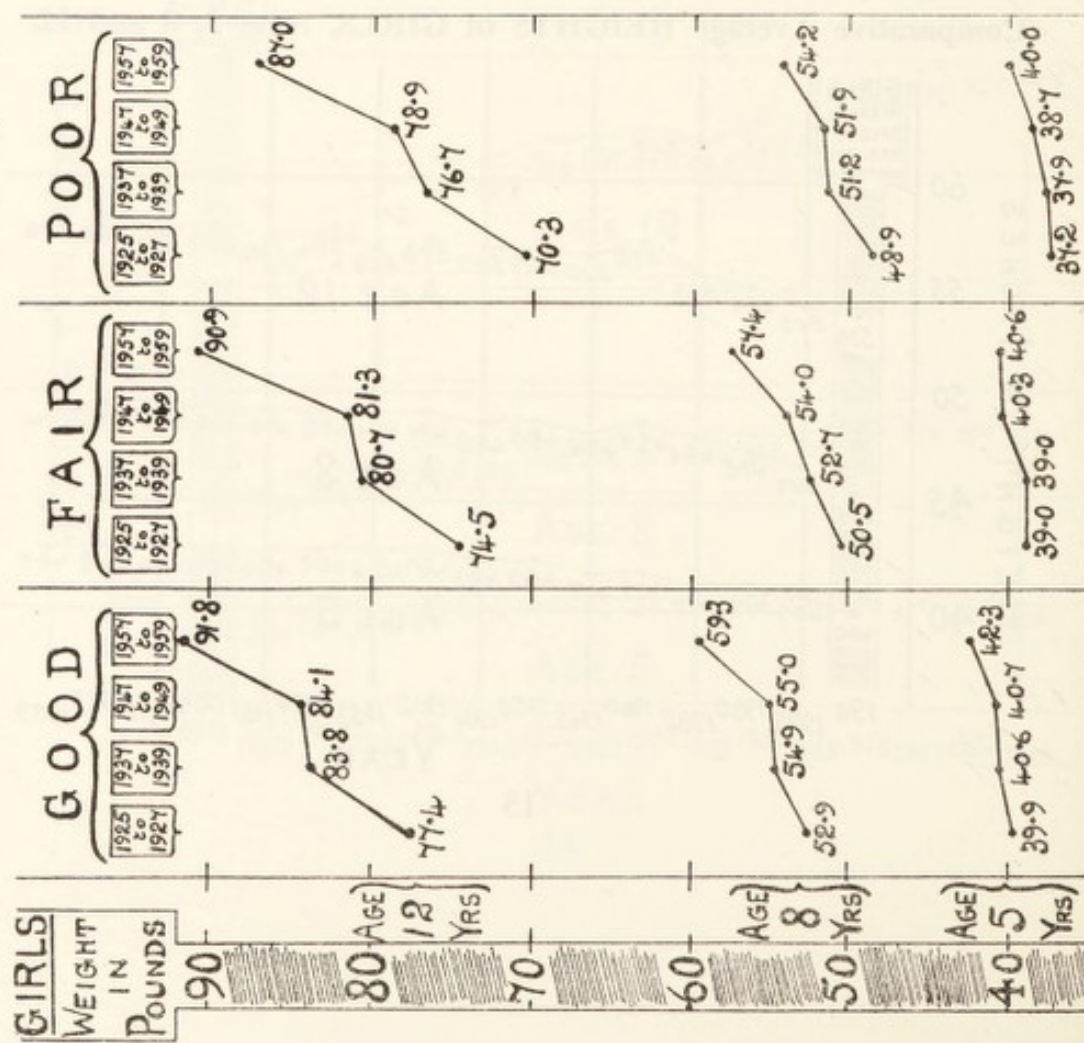
Comparative Average HEIGHTS of BOYS, Ages 5, 8 and 12.



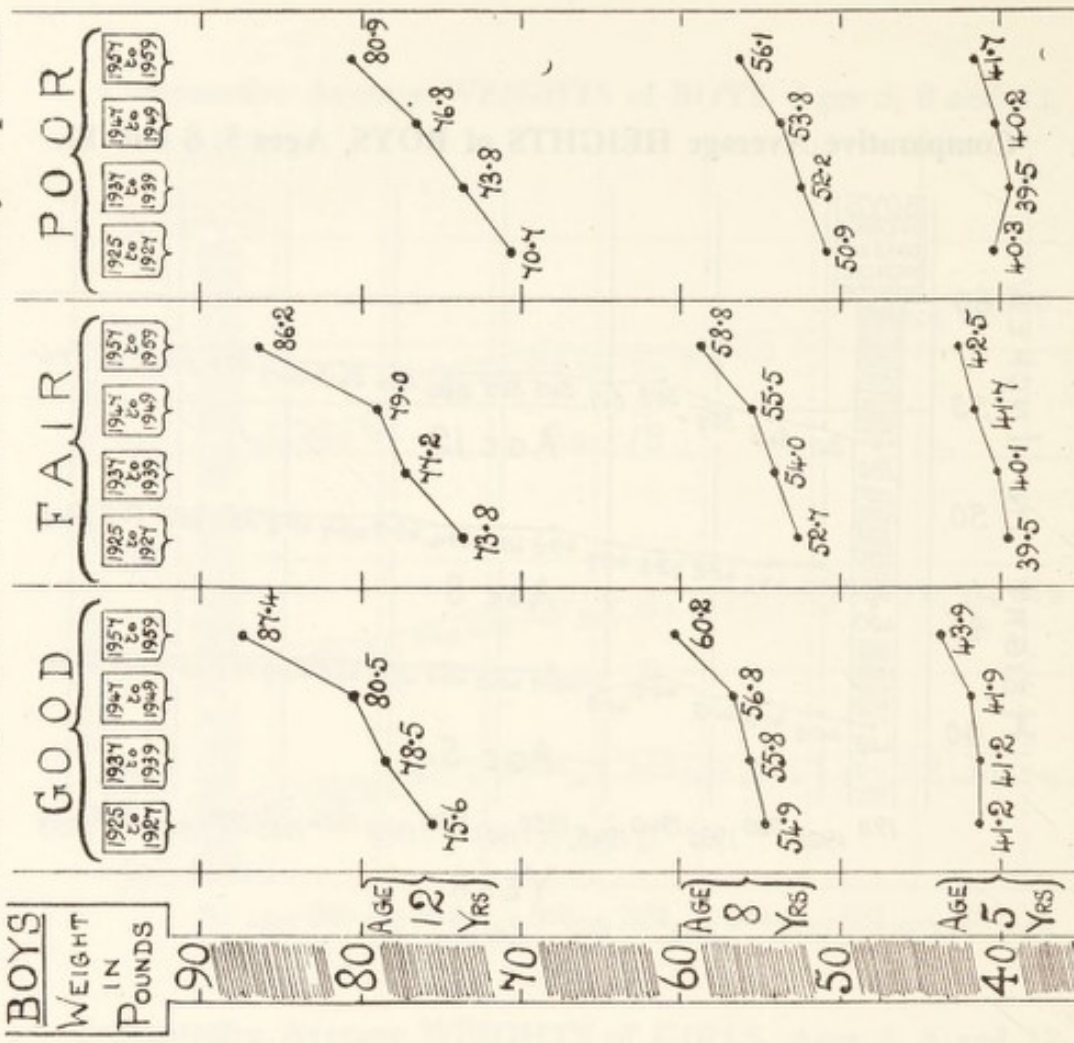
Comparative Average HEIGHTS of GIRLS, Ages 5, 8 and 12.



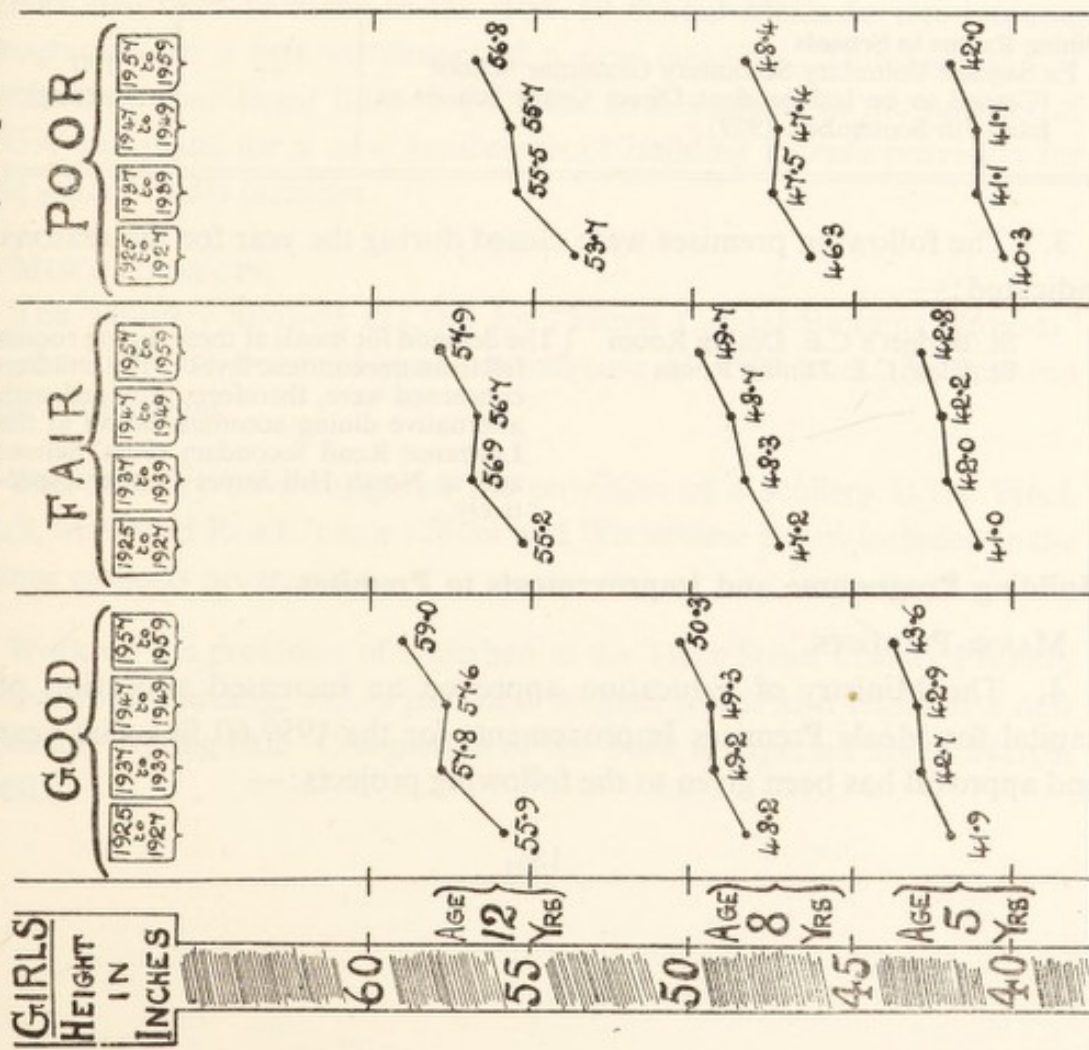
Comparative Average WEIGHTS of GIRLS in four 3-year periods.



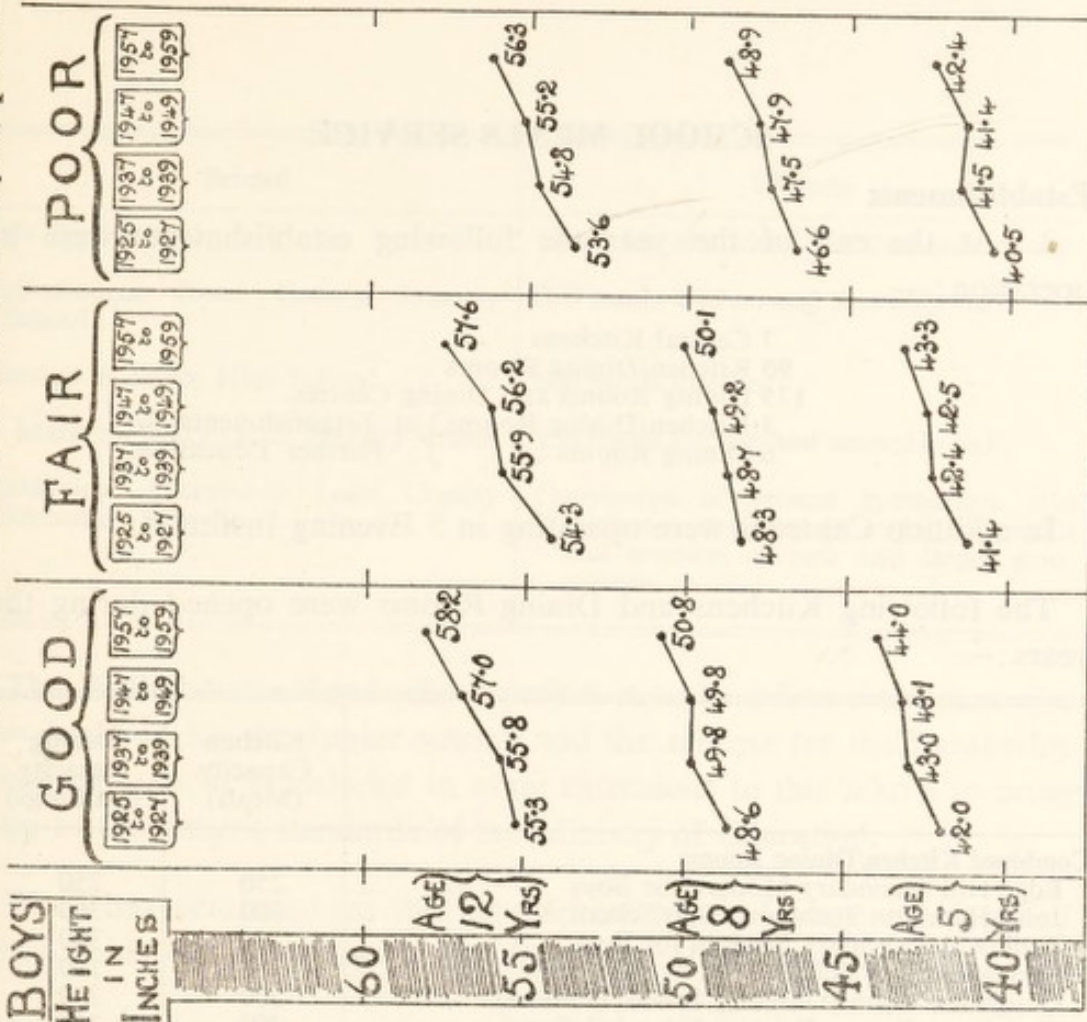
Comparative Average WEIGHTS of BOYS in four 3-year periods.



Comparative Average HEIGHTS of GIRLS in four 3-year periods.



Comparative Average HEIGHTS of BOYS in four 3-year periods.



SCHOOL MEALS SERVICE

Establishments

2. At the end of the year the following establishments were in operation:—

7 Central Kitchens	
90 Kitchen/Dining Rooms	
175 Dining Rooms and Dining Centres.	
3 Kitchen/Dining Rooms	} at Establishments for Further Education.
6 Dining Rooms	

In addition Canteens were operating in 5 Evening Institutes.

The following Kitchens and Dining Rooms were opened during the years:—

	Kitchen Capacity (Meals)	Dining Capacity (2 sittings)
Combined Kitchen/Dining Rooms		
Edge Hill Secondary Modern for Boys	250	250
John Hamilton Technical High School	300	300
Bankfield Secondary Modern for Boys	300	300
Springfield Day School	160	160
Craighurst County Primary School (Juniors)	250	250
Craighurst County Primary School (Infants)	200	200
St. Swithin's R.C. Secondary Modern School	250	250
Dining Rooms in Schools		
La Sagesse Voluntary Secondary Grammar School ... (Ceased to be Independent Direct Grant School as from 7th September, 1959)	—	170 (1 sitting)

3. The following premises were closed during the year for the reasons indicated:—

St. Bridget's C.E. Dining Room	} The demand for meals at these dining rooms fell to an uneconomic level. The children concerned were, therefore, provided with alternative dining accommodation at the Lawrence Road Secondary Girls' School and at North Hill Street Centre respectively.
St. Silas' C.E. Dining Room ...	

Building Programme and Improvements to Premises

MAJOR PROJECTS.

4. The Ministry of Education approved an increased allocation of capital for Meals Premises Improvements for the 1959-60 financial year and approval has been given to the following projects:—

School	Projects
Holt High School	Extension of kitchen to 350 meals capacity.
Wellesbourne Road County Primary School.	350 meals kitchen and assembly hall.
Convent of Mercy High School	500 meals kitchen.
St. Margaret Mary's R.C. Primary School	250 meals kitchen and assembly hall.
Fazakerley, Sherwoods Lane County Secondary School.	Conversion of present gymnasium into kitchen and dining room for 250 meals and erection of new and larger gymnasium.

The Wellesbourne Road school project is to be a first instalment of a new building for the Junior school, and the scheme for the Fazakerley Secondary school is included in other extensions to this school to bring it up to the present standards of the Ministry of Education.

Work has continued on the new School Meals Garage in Vauxhall Road which will probably be completed by Easter, 1960.

A new kitchen and assembly/dining hall for the Broad Square Junior school had been included in the 1958/59 School Meals Service building programme as a first instalment of a new building. This scheme was necessarily abandoned following the fire at this school in the summer of 1959, and plans for a new Junior school building include provision for full school meals facilities.

MINOR PROJECTS.

The Ministry allowed £12,000 for "Minor Capital Building Projects" in the 1959/60 financial year, an increase of £500 over the previous year's allocation.

The Ministry have suggested the provision of a scullery at the Finch Hall, Maidford Road Junior school and this scheme is now included in the minor projects programme.

Work on the provision of a kitchen at the Tiber Street County Primary school is proceeding, and is part of a scheme which also includes a new assembly/dining hall. Completion of the work is expected about March, 1960.

A new scullery has now been provided at the Dovecot, Winstone Road, County Primary school by the adaptation of a disused passage.

Plans have been drawn up for the provision of a 150-meals kitchen at the Northumberland school by adapting and extending the existing scullery. Work on the scheme will continue during 1960.

During the year improvements recommended by the Medical Officer of Health were carried out in various kitchens and dining rooms, and improvements to ventilation were also put in hand in certain kitchens.

Number of Meals

5. The total number of dinners supplied from the kitchens during the 52 weeks ended 5th December, 1959, was 9,274,221 (children 8,394,493; adults 879,728) an increase of 333,393 over the previous year.

The number of dinners supplied to pupils in maintained Primary, Secondary, Day Special and Nursery schools on a day selected between the 22nd September and 3rd October, 1959, was as follows:—

Number of children present in the schools on day selected	...	...	...	121,705
Number of pupils provided with dinners	...	...	...	42,671
Percentage of pupils who were supplied with dinners	...	...	...	35.06%

The daily average number of dinners supplied to the following establishments during a 4-week period ending 5th December, 1959, was as follows:—

Direct Grant Schools	...	...	...	...	...	634
Nurseries administered by the Medical Officer of Health	...	...	...	...	...	528
Occupational Centres administered by the Medical Officer of Health	...	...	...	...	...	250
Adults—Canteen and Teaching Staffs	...	...	...	...	...	3,983
						5,395

Charge for School Dinners

6. The charge of 1s. per meal fixed by the Ministry of Education on the 1st April, 1957, remains unchanged. Children attending Day Special schools continue to pay 6d. per meal.

Provision of Free Meals

7. At the end of the summer term, 1959, the number of children authorised to obtain dinners free of charge was 11,127 compared with 11,425 at the corresponding time last year.

School Milk

8. Milk is provided free of charge to all pupils in schools. The normal quantity supplied is one-third of a pint but delicate pupils attending Special schools receive two-thirds of a pint daily.

The number of pupils taking milk in Primary, Secondary, Day Special and Nursery schools on a single day between 21st September and 2nd October, 1959, was as follows:—

Number of pupils taking milk ($\frac{1}{3}$ pint)	115,574
Percentage of pupils present supplied with milk	94.4%

Transported Meals

9. Attention has continued to be given during the year to the problem of ensuring that transported meals are kept hot during the journey to the schools and dining centres, and a scheme for the regular inspection and servicing of all insulated food containers is now in operation.

DEFECTIVE VISION

10. At the periodic medical examinations the total number of children found with defective vision, apart from cases of squint, was 7,004. Of this number, 4,942 required treatment which represented 9.39 per cent. of the total number of children inspected.

11. There was a total of 3,538 cases of squint recorded during the periodic inspections.

12. Owing to the shortage of Specialist help the number of children treated fell from 13,046 in 1958 to 10,574 in the year under review. This was offset to some extent by the fact that more and more children are having glasses supplied other than through the Service. This latter may be due to the question of the dissatisfaction, particularly on the part of older girls, with the type of frames available.

13. During the year an investigation in regard to the dislike for the style of frames available was carried out. Thirteen schools were visited and below is a summary of the findings revealed. No warning was given of the visit:—

1	2	3	4
No. of Children	Percentage for whom glasses were prescribed	Percentage of Column 2. Not wearing glasses	Percentage of Column 3. Object to appearance of National Health frames
4,500	14	30	34

The number of children seen is large enough for the conclusion to be drawn that one third of the number of senior girls, who do not wear their glasses regularly, give as a reason their dislike of the appearance of the frames dispensed free of charge under the National Health Service.

In doing this survey, trends in particular schools of not wearing glasses could be noted. The percentage in the thirteen schools of children not wearing glasses varied from six to sixty-five per cent.

The school nurses called attention to the frequency with which they find many children without their glasses and in this regard attribute this to the carelessness of the parents.

EAR, NOSE AND THROAT CONDITIONS

Assessment Clinics

14. The arrangements for the ascertainment of defective hearing amongst the eight-year-old children were carried out as previously described.

15. Of the 10,662 children tested by audiometer in school, 456 were considered to have a defect in hearing. When these cases were investigated at the assessment clinics 24 were diagnosed as normal. The most frequent causes of the deafness were: wax, eustachian catarrh, and suppurative otitis media. There were 7 cases of nerve deafness. The more severe cases of deafness were already known.

Hearing Clinics

16. During the year under review arrangements were made for three of the medical officers who are particularly interested in aural work to hold "hearing" clinics. At these sessions children with known hearing defects are kept under close review from the educational angle, rather than from the medical treatment angle. Those children who are failing to make satisfactory progress because of their hearing defect are found and suitable provision made for them. 768 visits were made by children to these clinics during 1959. They are held at six centres throughout the City.

Ear, Nose and Throat Clinics

17. 1,009 children were referred to Mr. Forster, at the E.N.T. clinics for his opinion regarding possible disease of tonsils or adenoids. He advised operation in 308 cases.

HEART CLINIC

18. The Clinic continues as described in previous Reports. Professor John D. Hay reports as follows:—

“The Clinic continues to serve the dual purpose of ensuring that children without organic heart disease but with systolic murmurs lead a full life without restriction of exercise, and the sorting out of cases of congenital or rheumatic heart disease which require further observation, investigation and treatment. During the past year it has been noticed that more children with congenital heart disease have been diagnosed and, if necessary, referred to hospital before their initial examination on school entry.

“As anticipated in the previous report, a heart-lung machine has been purchased by the Board of Governors for the Royal Liverpool Children's Hospital in order that with it closure of ventricular septal defects, hitherto impossible, may be carried out. Experimental work with the machine is in its final stages and it is hoped that it will soon be utilised in the surgical treatment of children.

“With the help of Dr. Joan Owens, I am in the process of analysing all recorded cases of organic heart disease, both congenital and acquired, at present in the Liverpool schools. We are also embarking upon a special study of the incidence of organic heart disease and functional heart murmurs in this year's intake of school children, with the intention of following this group throughout their school careers.”

TABLE 1

	1951	1952	1953	1954	1955	1956	1957	1958	1959	Total
No. of New Cases ...	54	151	101	113	115	83	101	95	71	884
No. Re-examined ...	4	66	124	57	46	41	34	23	32	427
No. Referred to Hospital	29	102	85	92	72	46	64	59	36	585
No. Surgically Treated ...	—	7	5	6	11	4	4	4	4	45

DENTAL

Report by Mr. L. C. Winstanley, the Principal School Dental Officer.

19. "In recent years it has been unfortunately necessary to report the very inadequate staff in the School Dental Service. This is a national problem and there seems little possibility of any considerable improvement in the number of dental officers available in Liverpool. This year, fortunately, two of the part-time dental officers, Mr. Morgan and Mr. Kearney, were appointed full-time; the effective strength has not, however, improved as there were a number of resignations by part-time officers. At present there are seven full-time dentists on the staff and part-time help equivalent to four full-time officers, which brings the total to eleven officers out of an establishment of twenty-four. During the year, Mrs. Evans, a Dental Hygienist, was appointed to the staff and she gives valuable help in the sphere of dental health.

With such a depleted staff it is creditable that half the school population has been inspected in the year and a slight increase shown in the number of teeth conserved. The number of teeth which had to be extracted was less than in the previous year. Any drop in this figure is a welcome sign. Careful and thorough inspection at the schools is becoming very important and dental officers are instructed to look on the school visits as a vital part of their duties—not just a means of classifying cases for clinic treatment. It is noticeable that an increasing number of children are having dental treatment by their own family dentist. In previous years many cases, marked as receiving private treatment, only attended their dentists for extractions. Now it is a pleasure to see more children who are obviously receiving comprehensive treatment from their own dentist. These well-cared for mouths are increasing in number. Inspection at the school gives the parent a timely reminder that a visit to their dentist is necessary. It matters little whether the child receives the treatment at the clinic or their own dentist so long as the mouth is kept sound and healthy.

"There is, of course, the other side of the picture, the parents who neglect for various reasons to take notice of the advice given at inspections. After each inspection a list is made of all children whose parents fail to return the acceptance of treatment forms. The school nurses visit

these homes to find the reason for this neglect. In many cases it is purely apathy on the parents' part and the visit stimulates interest in the dental health of the child.

"Although operative dental treatment will be necessary for many years to come, the ideal of true preventive dentistry must not be neglected. With this end in view a certain amount of time at school inspections is wisely spent in giving simple instruction to the children on dental hygiene. The dental hygienist has, in selected cases, followed the dental officer in giving talks and demonstrations to the children. During the year a dental talk was given to the school nurses and they can and do give valuable help by their daily visits in their districts. A small dental exhibition was organised and talks have been given to certain women's organisations, particularly those meetings held for young mothers. The object of all this work is to stimulate interest in dental hygiene and give practical advice in keeping teeth clean and so reduce the incidence of dental decay. The fewer dentists there are available to give treatment the more important this type of work becomes.

"One branch of dentistry which does assist in keeping mouths cleaner and so more caries-free is the correction of malocclusion. The number of orthodontic cases under treatment is increasing each year; the children are generally very co-operative and the parents most interested.

"The help and ready co-operation given by head teachers and their staffs is greatly appreciated; they can be assured every effort is made to disrupt the normal working of the school as little as possible. Thanks must also be recorded to both the Alder Hey Children's Hospital and the Liverpool Dental Hospital for their very ready help in treating cases considered unsuited for treatment at a clinic."

The following table gives details of teeth conserved and extracted since 1950:—

TABLE 2

	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
of children examinated ...	56,490	46,166	62,301	123,425	107,125	80,292	65,833	72,116	85,442	67,981
of permanent teeth filled ...	6,076	3,899	5,043	15,091	15,460	10,069	11,175	10,841	13,514	14,021
of permanent teeth extracted ...	7,258	6,927	7,997	11,847	9,367	7,190	7,703	7,993	9,165	7,356

ORTHOPAEDIC SCHEME

20. There were 821 new cases seen at the orthopaedic clinics in 1959, and 1,769 cases continued their attendances from the previous year. The children made 4,564 attendances at the clinics, including 2,590 for examination by the surgeons and 1,974 for treatment by the physiotherapists. In addition 5,280 treatments were given by the physiotherapists to children at special schools.

From the orthopaedic clinics 118 cases were referred to hospitals for investigation and treatment.

Summary of Hospital Treatment, 1959

Correction of deformities of feet or toes ...	...	37
Treatment of torticollis by operation ...	...	3
Osteotomy, arthrodesis or tarsectomy ...	...	17
Other operations ...	...	6
Other treatment ...	...	2
		65

21. The following summary shows the nature of the work carried out at the clinics:—

Infantile paralysis ...	...	51
Birth palsy ...	...	1
Spastic paralysis ...	...	91
Talipes ...	...	24
Spinal curvature ...	...	35
Torticollis ...	...	32
Flat feet and knock knees ...	...	1,143
Bow legs ...	...	22
Other deformities ...	...	340
Other defects ...	...	750
No defect found ...	...	101
		2,590

22. Mr. F. C. Dwyer, one of the Orthopaedic Surgeons to the Clinics, comments:—

“The attendance at Orthopaedic Clinics has maintained its normal level during the past year and, as has been the case in the past, there is no doubt that patients and parents appreciate this service tremendously. There is a personal element about these clinics which cannot be emulated in the hospital service and, of course, far less time is spent by the patients attending this type of clinic than is the case at hospital. Quite frequently

parents express bewilderment at why their child should have been sent up for a special examination but in this atmosphere it is quite easy to explain to them that even though nothing abnormal is found by the Orthopaedic Surgeon the basic object of the service is to prevent deformities and disabilities arising. They immediately appreciate this and in most cases go away feeling reassured that there is nothing wrong or if something has been found, that it has been discovered at the earliest possible moment. This, of course, is the great value of regular school medical inspection and of having specialised clinics such as the orthopaedic ones to which patients can be referred. From the Orthopaedic Surgeons' point of view, this is one of our few opportunities for preventative medicine and it is obviously far better to see a considerable number of perfectly normal patients than to miss conditions such as pes cavus or hallux valgus at their earliest stages when there is still a reasonable prospect of dealing with them conservatively.

"In my Report last year I expressed the hope that there would be an opportunity for a special investigation in certain foot conditions. It has been difficult to initiate this investigation but it is now under way in the shape of a special follow up both at Alder Hey Hospital and in the school clinics. It is hoped that some really valuable information will come out of this investigation and later perhaps a full report can be published.

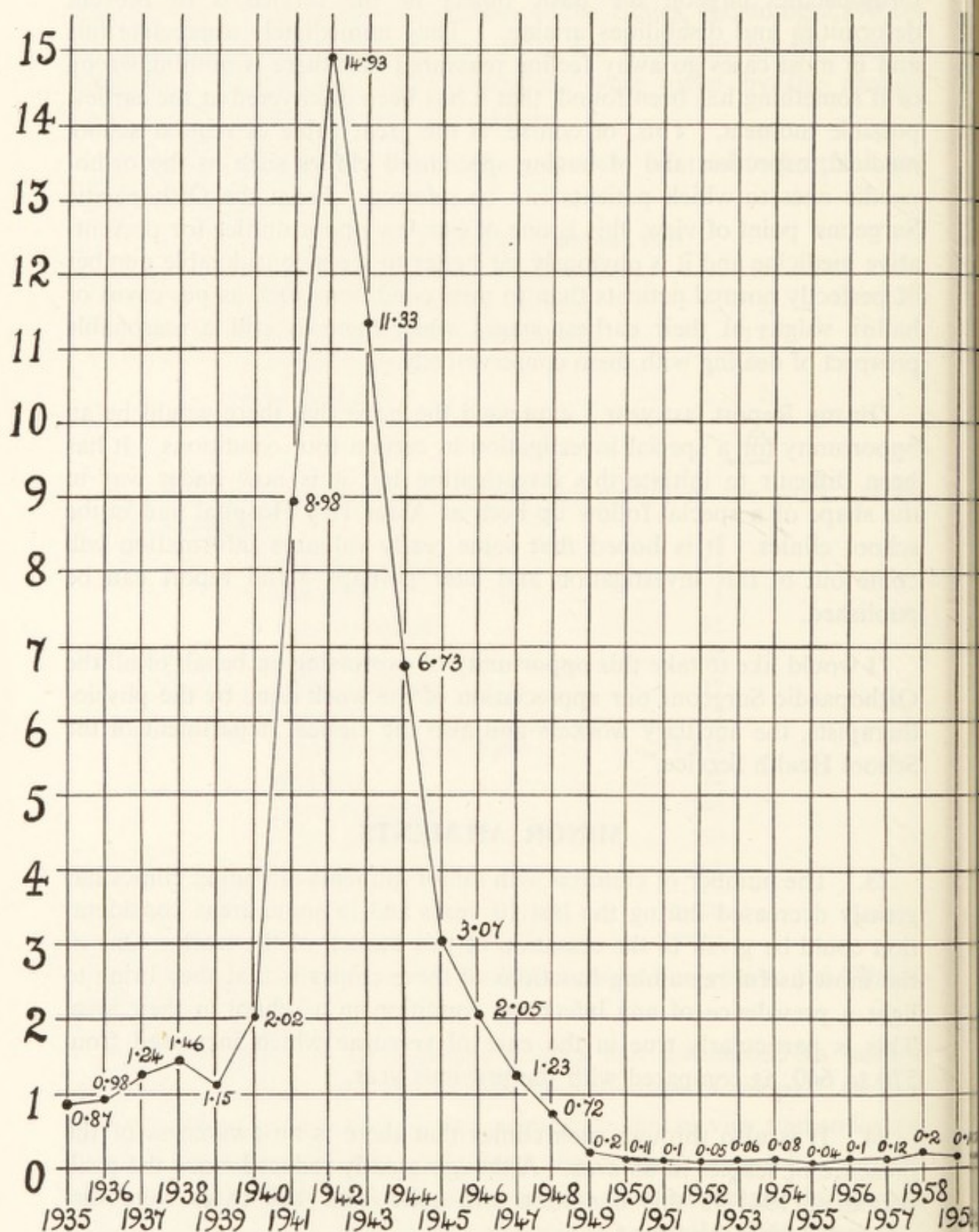
"I would like to take this opportunity of expressing on behalf of all the Orthopaedic Surgeons our appreciation of the work done by the physiotherapists, the ancillary workers and also the clerical department of the School Health Service."

MINOR AILMENTS

23. The number of children with minor ailments attending clinics has greatly decreased during the last 10 years and in some areas consideration could be given to the cessation of this branch of the work. One of the most useful remaining functions of these clinics is that they bring to light a prevalence of any infectious condition in a school in their area. This is particularly true in the case of verrucae which increased from 570 to 640, as compared with the previous year.

24. It is also through such clinics that there is an awareness of the presence of scabies in an area. Although greatly reduced since the peak period of 1941-43 this condition still exists and 166 cases were discovered during the year.

CASES OF SCABIES (IN THOUSANDS)



HOME VISITING BY SCHOOL NURSES

25. The visiting of the children's homes is one of the most important functions of school nurses, and fully one-half of their time is so occupied. Besides dealing with immediate problems they can do very good health teaching upon these visits. The plan whereby the nurse makes a regular weekly contact with her school to ascertain cases of long or repeated absence is working very successfully.

26. Miss Snoddon reports:—

"That the weekly visit is now well established, is largely due to the fact that willing co-operation has been shown by so many of the head teachers and on behalf of the staff I would like to express to them our thanks and appreciation for the consideration and assistance shown to the school nurses in their work."

27. Miss Poole reports:—

"There is now an awareness of the purpose of these visits and one is finding that even the more junior nurses are able to seek and discover the problem cases and, moreover, are able to do something constructive towards solving the problems.

"During my visits to schools I find the majority of teachers really welcome the nurse's visit and frequently have cases to discuss with her."

28. Some of the nurses' comments are as follows:—

"Last year I reviewed the changes in the last ten years in this area. The most notable change is the attitude of the general public to the health visitor. It seems to me there has been a revolution in the time I have been a health visitor. It is best summed up by the attitude to home visiting.

"As a health visitor in Norris Green ten years ago one had to use all one's ability to be invited into a home. I find the use of this ability has turned full circle and one now has to use one's talents to get out of a home before a whole district session has been enveloped. I am frequently being stopped by mothers and accused of being in 'our road yesterday, and you did not come to see me'."

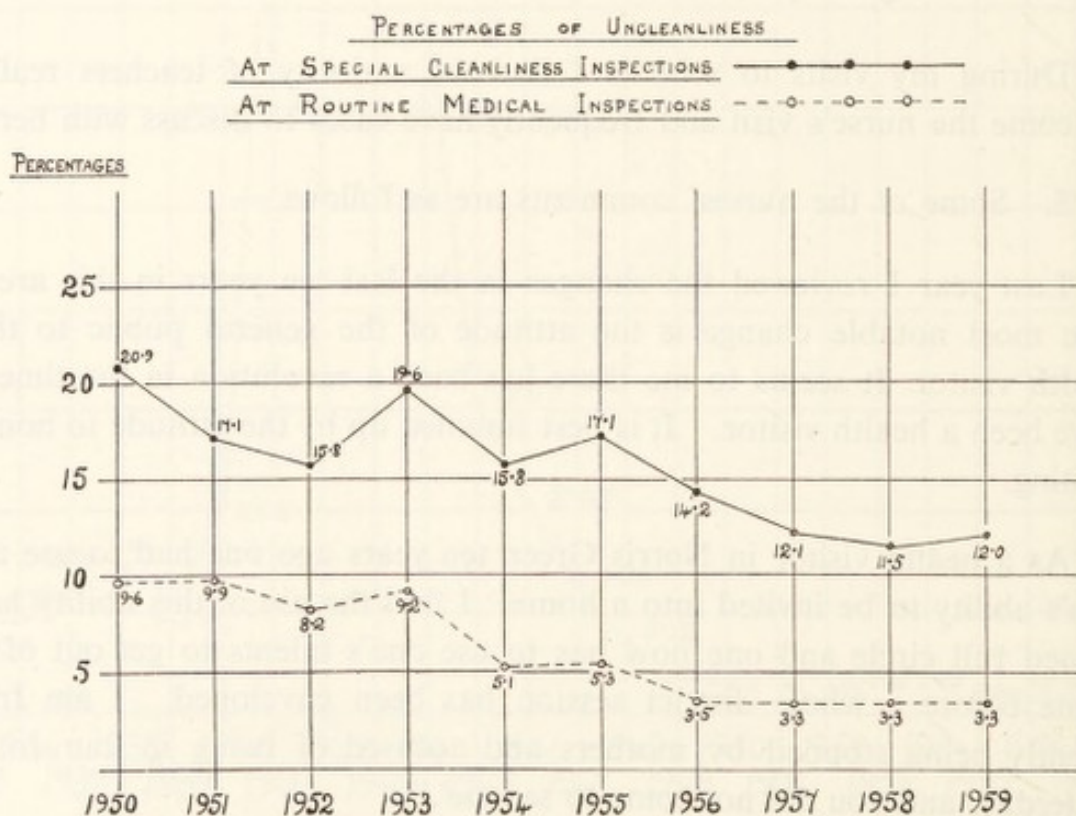
"With very few exceptions the parents are appreciative of the school nurse's visits and as one goes down the path or out of the door, say 'Thank you for coming' and often it seems that when visiting about one problem other questions or difficulties are brought up by the parent and one leaves with the satisfactory feeling of 'well, that was worth while doing'."

"Frequently, when children are admitted to schools for the educationally subnormal one finds mothers feeling very aggrieved and even bitter. It is a great joy, however, when visiting mothers shortly after the child's admission, to find them very happy because the child is happy and in a few short weeks has already gained some standard of achievement. Often the mother will say 'There's no trouble to get him (or her) to school now'."

UNCLEANLINESS AND NEGLECT

Personal Hygiene

29. The scheme whereby the cleanliness inspections are carried out by nursing assistants under the direction of a school health visitor continues satisfactorily.



30. The health visitors made 451,689 examinations of school children with regard to cleanliness and altogether 15,911 children were found to show some evidence of verminous infestation. In the case of 3,815 children, statutory notices were served upon their parents owing to their failure to cleanse their children after previous notification, of which 3,606 were cleansed by parents and 209 had to be compulsorily cleansed by the staff.

The total number of attendances made at the cleansing stations during the year on account of verminous conditions was 7,319.

31. At the routine examinations in the schools 3.33 per cent of the children were found to show evidence of infestation. The results of the health visitors' cleanliness survey shows that 12.01 per cent of the children were found, at least once during the year, to be infested.

32. As far as statistics are concerned the situation in regard to cleanliness is much the same as it was during the preceding year. However, the majority of school nurses are quite insistent that the degree of uncleanliness is much lessened. Miss Snoddon, the Superintendent School Nurse, in her report states:—

“The degree of infestation is frequently slight but it is at this stage that parents now resent advice as they consider any complaint unreasonable for ‘only one or two nits’.”

In connection with this work Miss Poole states:—

“The problem of the mother who is working either full or part-time still remains and the nurses are still experiencing difficulties in making a satisfactory visit to the mother to urge her constant attention to this question of cleanliness.”

Another aspect of this side of the work is reported by one of the school nurses as follows:—

“Whilst the figures for the number of children infested with vermin remain disappointingly high the degree of infestation is very much less and children suffering from Impetigo of the scalp, following verminous infestation, are now very rarely seen.

“The difficulty of contacting mothers who are working is increasing, many mothers work from 8.0 a.m. to 6.0 p.m. I have accompanied a nurse taking a child of five years of age home from school whose hair

was infested with live lice, a neighbour told us that his mother would not be in until 6.00 p.m. A written note was left for the mother, asking her to attend to the child's hair, this was ignored, and the child was sent to school in the same condition the following morning."

33. The more encouraging side of the picture is revealed in a school nurse's report concerning her area, in which she states:—

"During the past year the general condition and cleanliness of the school children continues to be quite satisfactory. The number of cases of verminous infestation is definitely declining and the attitude of the parents when advised about their children's condition, is most encouraging. I have not met a single mother who showed any resentment and they appear only too anxious to do their best to remedy the condition. Some admitted that they were unaware there was anything wrong and were only too glad that I had found out before the infestation got out of hand."

Clothing and Footwear

34. The standard of clothing can now be regarded as relatively very satisfactory. In the school nurses' opinion the most noteworthy improvement suggested is, that where school uniforms are the rule, extreme and undesirable styles should be discouraged. In regard to health this is reflected in the question of footwear. In particular, senior girls, although this does not appear to happen throughout the school population, are inclined to adopt extravagant styles; the tendency being to wear unsuitable shoes with abnormally high heels and pointed toes.

Late Hours

35. The question of late hours was mentioned in practically every school nurse's report. It would appear that this is becoming an increasing factor leading to loss of adequate sleep. "There are far too many children these days keeping late hours—this includes children of every age. They look tired and have difficulty in keeping up with their school work, always it is that they are sitting up watching television." Such a statement in one of these reports is typical. In one area, where many mothers go out to work and do an evening shift at a local factory, the children apparently do not go to bed until the mother comes off the shift which ends at 10.00 p.m. Even in these cases the nurses comment that the children are occupied in watching television and that apparently whether the mother is out at work or not they would still be doing much the same.

Health Education

36. In her report Miss Snoddon stresses that ever increasing attention is being paid to this aspect of the work. She and her staff of school nurses are encouraged by the fact that more head teachers, on their own initiative, seek the help of their school nurse in introducing some health teaching into the curriculum of the school.

During the year an increasing use was made of film and film strips. The opinion is expressed that a good film has advantages over film strips but that there are relatively few films available which come into this category. As a result the film strip has proved more suitable for this work and an ever-increasing use has been made of them.

Naturally the question of smoking has been a major topic in health education talks. However, in regard to this question, parental attitude and example appear to play a major role. Miss Snoddon comments:—

“On the whole more effective results appear to depend upon the parents co-operating with school nurses and head teachers to discourage the habit amongst the children by withholding pocket money if necessary.”

A typical opinion of the difficulty in regard to this question, as reported by a school nurse, is the following:—

“Smoking amongst the older children is obviously very common. One is appalled by the number of nicotine stained fingers. Also one sees from time to time older school children smoking in back alleys and on tenement steps. In discussing the dangers of smoking with such children, one is often met with the remark that ‘My mum and dad smoke so it is alright for me’.”

In another report the school nurse comments upon the ease with which children can obtain cigarettes:—

“Children of all ages can go into shops and buy packets of cigarettes and a box of matches, usually claiming that they are buying them for their mother or father. Some shops sell individual cigarettes which, of course, makes it easy for children to buy them.”

SCHOOL ATTENDANCE AND WELFARE

37. Mr. Houghton, the Superintendent of the School Attendance and Welfare Department, reports:—

Part-time Employment of School Children

38. During the year the total number of 2,938 children were engaged in part-time employment. The School Medical Officer examined 1,337 children as to their physical fitness to undertake employment. Throughout the year it was necessary to take legal proceedings in respect of illegal employment in 30 instances. Fines ranging from 10/- to £5 were imposed in 27 cases, the remaining 3 defendants received an "absolute discharge".

Street Trading

39. The Children and Young Persons Act, 1933, states that no child or young person under the age of 16 can engage in street trading. The Liverpool City Byelaws, however, prohibit any person under the age of 18 from being so employed. Quite a number of contraventions of the Acts and Byelaws have occurred and the total number of cases which were dealt with by the Magistrates Courts during the year was 15. Fines from 5/- to £5 were imposed in 14 cases, and in the one remaining instance an "absolute discharge" was given.

Children in Entertainment

40. Officers in the School Attendance and Welfare Section are responsible for the supervision of children who take part or are employed in Entertainment. Children cannot participate in Entertainment where the profits accrue to the promoter unless a licence is issued by the Local Authority. Throughout the year 214 such licences were issued and the number of children examined by school medical officers was 176. It will be appreciated that licences cannot be granted unless the Local Authority is satisfied that a child is physically fit to take part in performances. Many children do, of course, take part in "charitable" performances even under the age of 12 years, but in these circumstances no licence is necessary, nor is any medical examination called for.

School Attendance

41. Throughout the year numerous cases of irregular attendance at school involving prolonged absence were referred to the School Health Service in order that the scholars concerned could be examined by the

school medical officers to determine their fitness or otherwise to attend school. Some of these cases involve physical examination and others require psychiatric examination and treatment. The co-operation which the School Attendance and Welfare Section receive from the School Health Section in connection with these cases is very much appreciated. Some of the cases referred to resulted in the children being recommended for Special School education. The attendance of Dr. Brown at the weekly meetings of the School Attendance and Welfare Sub-Committee which deals principally with cases recommended for prosecution was greatly appreciated, and the reports which he submitted proved most helpful to the Chairman and the members of this Sub-Committee.

Neglect and Ill-treatment of Children

42. The School Attendance and Welfare Section is the Statutory Body responsible for carrying out the functions of Part I of the Children and Young Persons Act, 1933, which relate to the ill-treatment and wilful neglect of children under the age of 16 years. A small staff of Special Officers carry out this responsibility and are engaged in the duties of following up cases reported by various Statutory and Voluntary Bodies such as the City Police, School Health Service and Teachers, members of the public and School Welfare Officers. Quite a number of the cases referred for investigation under this heading are found to be problem families and much time and effort is expended with a view to improving the material and domestic conditions under which the families live. It should be stated that the removal of children from their parents is never resorted to unless circumstances warrant this course. During the year Court proceedings were instituted in two cases only which involved five children. In one of these cases the parent was sentenced to three months' imprisonment and in the second case the parent was placed on probation for a period of twelve months. Throughout the year a substantial number of summonses were served by Officers of the School Attendance and Welfare Section in respect of verminous children and which, of course, necessitated the attendance at Court of the Officers concerned. It should be added that the School Nurses Department and School Medical Officers brought to the notice of the School Attendance and Welfare Section quite a number of cases of children who were unable to take full advantage of the education provided owing to either unsuitable or inadequate clothing and footwear being provided. These cases were

dealt with either by the provision of clothing from our own resources or by reference to the National Assistance Board, or in some instances, even voluntary agencies.

CHILD GUIDANCE

43. Apart from augmentation of the clerical staff, there was no change in the personnel of the staff of the Child Guidance Centre during 1959. There was an increase in the total case-load but a decrease in the number of new cases.

Attendance

44. A total of 787 cases attended the Centre during the year for diagnosis, advice and treatment. Of these, 319 (234 boys and 85 girls) were new cases.

The number of attendances for treatment was:

(a) Individual psychotherapy	...	1,095	} 5,887
(b) Group psychotherapy	...	299	
(c) Remedial teaching	...	4,493	

Social Work

45. The number of interviews carried out was:

(a) At the homes	...	1,076	} 1,220
(b) At the Centre	...	144	

The Social Worker's most valuable contribution to the treatment of maladjusted children is perhaps in helping parents to modify faulty attitudes. Neglect and malnutrition are now rarely found, and the modern home is usually well equipped to satisfy the material needs of the child. Some parents, however, find it difficult to adopt a balanced approach to problems of discipline and handling. If they are over-possessive or over-indulgent the child's individuality may be swamped and his freedom to develop into maturity may be hampered; or he may become completely egocentric and intolerant of frustration. Parental over-anxiety leading to nagging and other forms of pressure may produce a tense and timid child. Rejection of the child because he does not come up to expectations is another cause of emotional disturbance.

The Social Worker when visiting the home has a unique opportunity to develop a close and often informal relationship with the parents in endeavouring to help them to change their attitudes, which often arise from ignorance and uncertainty.

School Visits

46. 61 visits to schools were made during the year.

Grammar School Cases

47. 13 children attending grammar schools were examined.

Court Cases

48. 33 cases were examined at the request of the Magistrates of the Juvenile Court.

Classification of New Cases

49. The problems of the cases as referred have been classified as under. Many cases present multiple symptoms and could have been classified under several different headings, but in each case the most prominent symptom is listed below.

I. Nervous Disorders ... 26 (8%)

Fears ... 15
(anxiety, phobias, timidity, over-sensitivity)

Seclusiveness ... 5
(unsociability, solitariness)

Depression... 4
(brooding, melancholy periods)

Excitability ... 1
(over-activity)

Apathy ... 1
(lethargy, unresponsiveness, no interests)

II. Habit Disorders and Physical Symptoms ... 46 (14%)

Speech disorders ... 2
(stammering, speech defects, hysterical aphonia, inability to speak)

Sleep disorders ... 5
(night-terrors, sleep-walking, insomnia, talking in sleep)

Nervous movements ... 2
(twitching, tics, habit-spasms, head-banging, thumb-sucking, nail-biting)

Excretory disorders ... 30
(constipation, enuresis, faecal incontinence, refusal to use lavatory)

Nervous pains and paralyses ... 1
(hysterical paralyses, nervous dyspepsia, pains in limbs, headache, functional deafness and disturbance of sight)

Fits ... 2
(epilepsy, hysterical fits, periods of unconsciousness)

Physical disorders... 4
(allergic conditions, asthma, etc.)

III. Behaviour Disorders	...	...	...	...	...	...	...	113	(36%)
Unmanageable	...	...	...	...	...	...	...	26	
(disobedience, beyond control, persistent negativism, defiance, refusal to work or go to school)									
Temper	...	...	...	...	...	...	...	13	
(tantrums, anger, screaming fits)									
Aggressiveness	...	...	...	...	...	...	...	8	
(bullying, destructiveness, spitefulness, cruelty)									
Stealing	...	...	...	...	...	...	...	34	
Lying and romancing	...	...	...	...	...	...	...	6	
Truancy	...	...	...	...	...	...	...	20	
(wandering, staying out late)									
Sex difficulty	...	...	...	...	...	...	...	6	
(masturbation, sex play, homosexuality)									
IV. Psychotic Behaviour	...	...	...	...	...	...	...	1	(1%)
(hallucinations, delusions, extreme withdrawal, bizarre symptoms, including violence)									
V. Educational Difficulties	...	...	...	...	...	...	...	98	(30%)
(backwardness, school failure, special disabilities)									
VI. For Special Examination	...	...	...	...	...	...	...	32	(10%)
(psychological examination, educational advice)									
VII. Unclassified	...	...	...	...	...	...	...	3	(1%)
Age Range of New Cases									
Below 8	...	...	...	...	...	...	...	46	(14%)
8—11	...	...	...	...	...	...	...	151	(48%)
12 and over	...	...	...	...	...	...	...	122	(38%)

Whilst the peak age continues to be in the 8—11 age range, the percentage of secondary school children referred has continued to rise.

Intellectual Level

Above average	...	...	...	...	...	...	...	53	(16%)
Average	...	...	...	...	...	...	...	117	(37%)
Below average	...	...	...	...	...	...	...	149	(47%)

50. NATURE OF TREATMENT UNDERTAKEN IN CLOSED CASES

1. Diagnosis and Advice	...	...	...	...	...	...	...	96	(38%)
(a) General advice to source of reference	...	...	...	...	...	...	...	42	
(b) Recommended for Special School for Educationally Subnormal Pupils	...	...	...	...	...	...	...	32	
(Day School—29, Residential School—3)									
(c) Recommended for Special School for Mal-adjusted children or other Residential School	...	...	...	...	...	...	...	5	
(d) Recommended for transfer to other clinic, hospital, or to Mental Health Authority	...	...	...	...	...	...	...	17	

2.	Individual and Group Treatment	...	...	...	...	123	(48%)
	(a) Satisfactorily adjusted	...	...	...	...	81	
	(b) Improved	...	...	...	...	41	
	(c) Not improved	...	...	...	...	1	
3.	(a) Withdrawn by parents before completion of treatment, or closed for lack of co-operation	...	...	...	...	27	} 37 (14%)
	(b) Closed for other reasons	...	...	...	...	10	
	Total number of closed cases	...	...	...	...	256	

The majority of the cases in Section 30(b) were closed as a result of families moving out of the area owing to rehousing.

School Phobia

51. Ten cases of school phobia were referred to the Centre during 1959. This represents an increase compared with the number of referrals in previous years and there is some evidence of a general increase in the number of referrals to clinics nationally on this account, although the overall number of such cases remains very small.

School phobia, or persistent refusal to attend school without attempt to conceal this and in spite of parental efforts, has been distinguished (1) from truancy usually associated with delinquency and absence from home as well as school, (2) from school anxiety in children who do not refuse to attend school. During the time the Centre has been open (April, 1949-December, 1959) only 33 cases (20 girls and 13 boys) have been referred, i.e. a little more than 1% of the total case load during this period.

Analysis of the case histories show that the children tend to come from materially satisfactory homes, and few are handicapped by broken or incomplete homes. They are members of small families where the mother/child relationship is usually a very close one, with the mother being anxious, over-protective, inconsistent and weak, and the father taking a rather passive role. About two-thirds of the group showed marked emotional immaturity and dependency, timidity, nervousness, and psychogenic ailments specifically related to the thought of going to school. 21 of the children were in good health, but in 6 cases refusal to go to school immediately followed a period of illness or hospitalisation.

Traumatic events at home were rarely found, but in 12 homes there was serious physical or mental illness in the close family circle. Although these children are mostly of average or superior intelligence, examination of the factors relating to school life and scholastic attainment suggest that the importance of school factors—particularly a new school situation and educational retardation—should not be underestimated. 20 were in their first term in a new class, department or school. As many as 14 of the children were experiencing difficulty with their school work, 9 being unable to read. Methods of dealing with the problem have included personal liaison with the Head Teacher of the child's school and often the immediate placing of the child in remedial teaching or play groups at the Centre, sometimes with daily attendance, until the child resumes school life. This group approach helps the child to increase his self-confidence and to maintain contact with other children. A change of school was recommended in 19 cases—15 to day or residential special schools (10 Open Air, 4 Maladjusted, and 1 E.S.N.) and 4 grammar school pupils to secondary modern schools. Such a change did not preclude treatment measures such as individual psychotherapy at the Centre, and was only temporary in 7 of the cases transferred to special schools.

Of the 31 cases where there was full co-operation with the Centre, 29 were attending school within 5 months (19 cases within 2 months) and 1 boy is at present awaiting a vacancy in a special school. The intractable case was a boy with a grossly abnormal Electro encephalogram who became a "work-refusal" too.

The problem of school phobia has aroused a great deal of interest recently, but it is important that the extent of the problem should not be exaggerated. It is, in fact, surprising that so few children are unable to cope, at least superficially, with the demands of school life, often in spite of mental or physical handicap.

Remedial Teaching

52. Remedial teaching arrangements have continued to work smoothly. The co-operation of both children and parents has been excellent.

During the year 240 children continued or commenced remedial teaching, of whom 191 were still attending at the end of the year (at twice weekly, weekly or monthly intervals). Of the 49 cases which were closed, 41 had benefited from this form of treatment 1 did not respond, 2 were transferred to schools for educationally subnormal pupils, 2 were transferred to a residential school for maladjusted boys, 2 left the area, and 1 did not co-operate.

While there has been an even larger number of cases taken on for remedial teaching during the year, the waiting list has continued to be a long one.

Group Therapy

53. Group therapy has continued along the same lines as detailed in the 1958 report. 29 children attended weekly play or discussion groups, of whom 19 were discharged having benefited from this treatment, and 10 were attending at the end of the year.

Holidays for Maladjusted Children

54. The stresses of the family which has a maladjusted child as one of its members are often relieved if the child can have even a short holiday, particularly during the long summer break from school. There are, unfortunately, very limited holiday facilities for such children if their families are unable to make private arrangements for them. These facts stimulated the Social Workers at the Centre to take a small group of children to North Wales for a few days.

9 boys and girls, aged 7 to 14 years, with a variety of symptoms of emotional maladjustment, enjoyed mountain climbing, a day at the sea-side and the general activities of camp life, and greatly benefited from their short holiday.

The Social Workers would like to record their thanks to Professor and Mrs. Simey and the University Settlement for the use of their property in Cilcain, to Dr. Robertson for providing transport, and to all those who contributed to the success of the experiment. It is suggested that similar arrangements should be made in future years.

Liaison with Special Schools

55. There has continued to be excellent liaison between the Centre and special schools, particularly with Aymestrey Court. With the more rigorous selection of cases, the school is increasingly dealing with children who are emotionally rather than only socially maladjusted. Most of the children are of good intelligence, and treatment and rehabilitation is now possible with the boys at a much higher level.

Lectures, demonstrations or talks have been given to University and Training College students as well as to other interested visitors.

56. The Director of the Notre Dame Child Guidance Clinic, where many of the Authority's children are treated, has furnished a description of the use of group psychotherapy with children as follows:—

“During the last year 301 children have attended this clinic. The age range is from pre-school to over fifteen years with peaks in the ninth and tenth years, and the twelfth and thirteenth years, and a conspicuously lower number in the eleventh year. Intelligence range follows the normal distribution remarkably closely. The problems for which children have been referred do not show any marked trend, and the customary forms of treatment have been carried on.

“Looking at the clinic population of the year under review, it is remarkable how many have been found seriously backward in reading, over and above those who have presented this particular problem as a cause of referral to the clinic. A very full programme of remedial teaching has been undertaken by several members of the clinic staff, including psychologist, and play and speech therapists. It is very often found that some degree of reading retardation features in ‘difficult behaviour,’ ‘excessive timidity,’ ‘nervous,’ ‘dislike of school’ and other over-all descriptions. Failure in scholastic achievement is a contributory factor in very many of these symptoms of disturbance.

“It is often difficult to diagnose the quality and source of this failure, though the coaching interview familiarises one with the different clues. Three broad categories seem evident: (i) there is the child of good I.Q., whose failure is specific, e.g., a difficulty in the manipulation of symbols—letter order and sound blendings—and who is helped towards fluency by

carefully graded practice suited to the special need and relaxation of tension in group play; (ii) there is the child whose life history shows a gap in learning, through school absences, or sickness, and who, though often so deeply discouraged as to appear unteachable, is fairly quickly helped, with individual teaching, to make good this gap; (iii) there is the large proportion of children who, without being in any way autistic, simply fail to use their channels of communication with the outside world. Experience seems not to impinge on them, teaching does not 'break through,' words are not at their disposal for the expression of thought or feeling and the written symbol is in no way meaningful for them. Under these conditions, the mechanics of reading are an unattractive hazard and the motivation to read is just about negligible.

"During the last year special attention has been paid, in speech therapy groups and in play groups, to this aspect of the problem. The speech therapist regards the child's inadequacy in communicating as having much bearing on remedial work. Many children see little disadvantage in their verbal poverty and communicate mainly in grunts, growls and minimal exclusive jargon. Our first duty would seem to be the arousing of some sense of urgency, of need and of simple usefulness in the things we read and say. The tendency for a child to become a listener and watcher of radio and television makes any skill with the printed word a luxury!

"This poverty is sometimes amusingly, sometimes pathetically, illustrated in play groups and the adult becomes lost in the search for a vocabulary simple enough to convey meaning. Though discussion is so often unnecessary in a child's playing-out of anxiety situations, this playing-out seems an incomplete and unsatisfactory process if non-verbalisation indicates a poverty of resources rather than a limitation in age and of experience.

"A fifteen-year-old girl of average intelligence, referred for delinquent behaviour and now in her fourth term of attendance, is typical of many of our clinic children of comparable age, background and intelligence, in her gross inadequacy in conversation and her unawareness of experience. Her speech is confined to fact, and as her facts are unrelated and lack meaning, her narratives lack truth and lucidity. She has no wish to

misrepresent, but the finer points of any situation do not occur to her. Authority, for instance, is either hostile or benevolent. If hostile, it punishes her; and only pressure of conversation, stimulating her to reflect and to make associations, persuade her into an awareness of punishment and disapproval in its context. Benevolent authority has the 'magic wand' touch about it. Interested in children and wanting vaguely to work with them when she leaves school, she enjoyed session after session of naive play on the theme of 'caring for orphans.' According to her lights, orphans are still to be found on door steps and in church porches; she would like to gather up this flotsam and keep it safe in a nice house. 'They' would pay her for this, and nice people would knock at her door asking her to let them adopt one of her orphans. She would be very happy in this job! Play and talk helped to clarify the situation for her; ignorance of every aspect of civic life was revealed in the process.

"This was a child who had remained so unaware and immature that she was not able to contribute positively to the acquisition of knowledge or the building of moral values. There was no evidence that she was at all deeply disturbed but there was every evidence that her give and take with the outside world was minimal. 'Cultural activity' in school left her untouched and she could not describe with any meaning a visit to the Philharmonic Hall or a school concert; she could not learn the words of the Londonderry Air; she thought England was a town; she countered one's simplest queries with the bewildered rejoinder of 'What do you mean?' Pressed for the name and description of a dictionary used in school she knew merely that it was blue. One might describe her as rich in limitations, but she is typical rather than conspicuous in this.

"Many play groups during the past year have been encouraged in conversation rather than activity in the effort to strike some response which will set thought in motion."

TUBERCULOSIS

57. The following tabulated statistics relate to the number of notifications of cases of tuberculosis and deaths from that disease:—

TABLE 3
Tuberculosis Notifications, School Children (5—15 years)

	1928	1938	1948	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
MALES													
{ Respiratory ...	215	59	36	56	46	78	64	58	37	43	32	26	33
{ Non-Respiratory ...	122	55	33	21	26	19	16	16	11	5	9	6	2
FEMALES													
{ Respiratory ...	192	58	43	57	55	83	66	56	45	45	47	35	21
{ Non-Respiratory ...	122	63	16	20	21	16	11	12	12	8	3	5	4
TOTALS ...	651	235	128	154	148	196	157	142	105	101	91	72	60

DEATHS

	1928	1938	1948	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
MALES													
{ Respiratory ...	12	3	2	1	—	—	—	—	—	—	—	1	—
{ Non-Respiratory ...	19	5	9	2	1	14	—	—	1	—	—	—	2
FEMALES													
{ Respiratory ...	25	8	6	1	2	1	1	—	2	—	—	—	—
{ Non-Respiratory ...	22	6	7	6	4	3	2	1	1	—	—	1	—
TOTALS ...	78	22	24	10	7	18	3	1	4	—	—	2	2

B.C.G. VACCINATION

58. The arrangement by which the School Health Staff carries out the B.C.G. Vaccination of school children has continued, with head teachers again giving their full co-operation.

The parents of 14,074 eligible children were circulated and of these 11,313 (80 per cent.) gave their consent. This increase of 5 per cent. in the number of acceptances, compared with last year, is again largely due to the "following up" carried out by the School Health Visitors.

Upon tuberculin test 16 per cent. were found to be positive, a decrease of 4 per cent., compared with last year. 9,381 children (84 per cent.) found to be negative were vaccinated, an increase of 2,645 vaccinations compared with last year. Of 4,096 children tested after vaccination 4,032, or 99 per cent., converted, and 5 children were re-vaccinated.

In May the visits of the Mobile Mass Miniature Radiography Unit to Centres in the City were suspended on the instructions of the Ministry of Health. Children found to be tuberculin positive are now summoned for X-ray to the appropriate Chest Clinic in their district. 1,395 children who were positive were X-rayed during the year, and as a result 3 children were found to be suffering from active tuberculosis.

59. B.C.G. Vaccination facilities were offered to students attending Training Colleges. As a result 214 students took advantage of the scheme, and of these 105, who were negative, were vaccinated.

60. During the year 55 cases of reported tuberculosis in schools necessitated the investigation of school contacts by Dr. Burns. The 55 cases were:—

School children	...	...	...	...	...	45
Teachers	...	...	...	...	...	5
School Meals Attendants	...	...	...	...	...	3
Caretaker	...	...	...	...	...	1
School cleaner	...	...	...	...	...	1

Each "contact" who consents, is tested by a tuberculin skin test. All those with a positive reaction are X-rayed together with those who refuse the skin testing or are absent when the skin testing is done. The total number of contacts investigated was 1,140, of whom 98 had positive skin reactions. The total number X-rayed was 155, which comprised 59

positive reactors and 96 contacts who were either absent at skin testing or refused skin tests. The remaining 39 positive reactors were not X-rayed, either because they had already received the B.C.G. Vaccination at a Chest Hospital or because there was a history of tuberculosis in the family.

As a result of these surveys one child was discovered with active pulmonary tuberculosis.

In one investigation in which a teacher was reported as a possible source of infection, the whole school was visited by the Mobile Mass Miniature Radiography Unit. In another case where a School Meals Attendant was reported as a possible source of infection and where it was discovered it was probable she had been in contact with the whole school, all the children in the school were tested and those with positive reactions were X-rayed.

MISCELLANEOUS ITEMS

Immunisation and Vaccination

61. The arrangements made in previous years, for the inoculation against diphtheria of children attending schools, were continued. Visits were paid to 127 schools, a total of 3,254 children being inoculated and 3,499 previously inoculated children receiving reinforcing injections. In addition, a number of children of school age were inoculated at the various immunisation clinics held throughout the City. The inoculation of children is also being carried out by the family doctors. The percentage of children aged 5-15 years inoculated at the end of 1959 was 84 per cent.

62. The percentage of unvaccinated children amongst those examined at the periodic examinations in 1959 was 49·3 per cent.

When medical inspection of school children was inaugurated in 1909 the percentage of unvaccinated children was 6·1. From then onwards a progressive increase in the percentage of unvaccinated children took place until 1945 when for the following two years some improvement was noticed. Last year the percentage of unvaccinated children was the highest recorded.

The percentages of unvaccinated children for the years under consideration were:—

In 1909 the percentage was	6.1
„ 1915 „ „ „	7.1
„ 1920 „ „ „	not available
„ 1925 „ „ „	16.3
„ 1930 „ „ „	19.1
„ 1935 „ „ „	22.7
„ 1940 „ „ „	23.4
„ 1945 „ „ „	31.0
„ 1950 „ „ „	34.8
„ 1951 „ „ „	35.3
„ 1952 „ „ „	not available
„ 1953 „ „ „	37.0
„ 1954 „ „ „	41.2
„ 1955 „ „ „	41.9
„ 1956 „ „ „	43.9
„ 1957 „ „ „	46.1
„ 1958 „ „ „	45.9
„ 1959 „ „ „	49.3

Defects Amongst School Entrants

63. The School Medical Officers during their first examination of nursery and infant children, keep a record of those defects which are either not known to the parent, or if known, have not been treated.

During the year under review this investigation continued and covered a total of 15,341 entrants to infant and nursery schools, 1,532 such defects being discovered. Many of the defects were of a minor degree and others of such a nature, for instance, 222 of defective vision, that it was not surprising that they had not been previously noted. On the other hand numbers of relatively important disabilities were discovered such as squint, 234; otitis media, 16; lung affections, 29; hernia, 37 and flat foot, 167.

Children and Young Persons Act

64. In accordance with the provisions of the Children and Young Persons Act, 1933, medical reports for the information of the Magistrates in the Juvenile Courts at Liverpool and elsewhere, were submitted in 2,367 cases.

The Magistrates asked for special medical examinations to be carried out by the Education Authority in 68 cases for the following reasons:—

Ascertainment of Mental Ability	12
Ascertainment of Maladjustment	56
	68

School Premises

65. The City Engineer and Surveyor reports the following alterations and improvements which were carried out on school premises.

Sanitary improvements	9 schools
Playgrounds	6 „
Improvements and repairs to heating installations, etc.	35 „
Electrical installations	10 „
Miscellaneous improvements— e.g., classrooms, floors, etc.	19 „

66. The City Architect also reports that improvements have been made to existing ventilation, lighting and sanitation, etc., at the following schools:—

Rathbone County Primary,
St. Silas' C.E.,
Tiber Street County Primary.

Candidates for Admission to Teachers' Training Colleges

67. In March, 1952, the Ministry of Education placed the responsibility upon the School Health Services of Local Education Authorities for the examination of candidates for admission to teachers' training colleges.

During the year 273 candidates were examined by School Medical Officers and their X-ray examinations were carried out at the Mass Radiography Unit in Liverpool.

Three candidates were referred to a consultant for an additional opinion before the final decision was made as to their suitability and these three were found to be unfit for training.

Entrants to the Teaching Profession

68. The Ministry of Education require all entrants to the teaching profession to be medically examined, and have laid down medical standards to apply to these examinations. Entrants who undergo a course of teacher training at a University Department of Education or a Training College are examined by the University or College Medical Officer just prior to the completion of their course. An increasing number of teachers are entering the teaching profession direct from Industry and Commerce. The School Health Service accepted responsibility of such examinations as from December, 1958.

In the year under review, 102 entrants were medically examined by School Medical Officers and their X-ray examinations were carried out by the Mass Radiography Unit in Liverpool. Four entrants were referred to a Consultant for an additional opinion before the final decision was made as to their suitability.

The Principal School Medical Officers of other Local Education Authorities were asked to arrange the medical and chest X-ray examinations of a further 20 entrants residing in their areas who have been offered posts in Liverpool schools.

All entrants examined were found medically fit to become teachers.

NURSERY SCHOOLS AND CLASSES

69. The following information has been supplied by Miss Rosbottom, Adviser for Infant and Nursery School Education:—

“During the last year it has been possible to increase the accommodation of the Nursery Classes by thirty places. The Leamington Road washroom alterations have been completed, thus allowing the three nursery classes to cater for ninety children as in 1956. During the last three years, sixty children only could be accommodated due to sub-standard accommodation.

The number of Nursery Schools still stands at	...	6
The number of Classes at		26
Total accommodation since September, 1959, is	...	1,180

“The demand for accommodation is still far beyond existing provision, with the increasing problem of selection. The selection is based on the need of the child.

"Applications for admission to the Training Centre still exceed the possible provision of places for students in the training centres. It is hoped that in the near future both Chatham Place Nursery School and Leamington Road Nursery Classes may return to their former status and accept students taking the National Nursery Certificate course. This year it was possible to absorb all successful students not proceeding to hospital training as Nursery Assistants Class 1.

"The shortage in the supply of qualified teachers is greatly impeding the growth of Nursery Class provision.

"During the year the quality of the play in the Nursery Schools and Classes has steadily improved. This is due to the interest of the Superintendents and the Heads and their staffs. This progress in the play activity has resulted in the fuller development of the children physically, mentally and socially. The purposeful, thoughtful, inquiring and energetic behaviour of the four- to five-year-old children is a notable feature of the life of all nursery schools and classes.

"The co-operation with the homes, together with the practical interest and help of the School Medical Staff (doctors and nurses) have been greatly appreciated by all who are working in nursery schools and classes. This aspect of the work forms an integral part in the life of the schools."

HANDICAPPED PUPILS

Blind Pupils

70. Liverpool blind children are accommodated in various schools as shown in the Table below, since no special school is maintained by the Authority:—

Wavertree School for the Blind	...	...	...	...	6
St. Vincent's R.C. School for the Blind, West Derby	...				8
Sunshine Homes	...	...	...	...	5
Henshaw's School for the Blind, Manchester	...				4
Condover Hall School for Blind Children with other handicaps	...	...	...	...	1
Royal Normal College, Rowton Castle, near Shrewsbury					1
Chorleywood College for Blind Girls	...	...	...		1
					27

Partially Sighted

71. There are now 69 children in the Holmrook School for Partially Sighted Children.

72. Miss A. T. Cameron, the Head Mistress, reports:—

“The change in the name of the School from Wellesbourne Road Special School to Holmrook School for the Partially-Sighted, has resulted in much smoother delivery of mail and school stock. School leavers, too, welcome testimonials bearing the new school stamp, which does not put off employers before giving the children a chance to try what they can achieve.

“There were 14 admissions in the year chiefly to the Infants' Class, 8 children left the school, 3 were over-age leavers, 5 were referred back to their ordinary schools.

“Attendance has been very good indeed—frequently over 90 per cent., with an average of 87·4 per cent., due to the excellent liaison between school and home through our school nurse. The School Welfare Officer, too, has been most co-operative in following up doubtful cases of absence. Medical notes were chiefly for influenza, coryza and chills.

“The standard of cleanliness has been very high throughout the year and at medical inspection, doctor was very pleased with the children's development. A few boys and girls were too fat. We need to be continually alert about posture.

“Parents have given 100 per cent. acceptance for B.C.G. vaccination and immunisation against diphtheria and whooping cough.

“The arrangement whereby children visiting Dr. Black at Norris Green Clinic, go there straight from school with nurse and meet their parents there, ensures a much higher percentage of attendance than formerly, when children were called to their local clinics near home, and in some cases could not be taken by parents. We also hear more about the visual progress and recommendations.

"Dr. Black reviewed the children in school twice during the year as usual, and found most cases quite satisfactory. Where changes were suggested, we are grateful to Dr. Brown and the School Health Service for their speedy implementation.

"During the year, the functions in which the school took part, were, the annual folk dance festival, the swimming gala, two Philharmonic orchestral concerts, the annual motorists' outing to Southport, a harvest festival (the gifts being sent to Olive Mount Children's Hospital), a week at Colomendy Camp for the senior boys, an open day for parents, a carol service and a Christmas party. We also had a football match against Fazakerley Open Air School.

"The Liverpool Savings Committee decided that we had made noteworthy effort with national savings through the school savings bank, so in the autumn term, Mr. Fordham presented to us, on their behalf, the silver cup, which is the trophy available to all Liverpool schools for a term at a time.

"The woodwork class at Fazakerley Open Air School is keenly attended by the senior boys and some very good work is done there. The girls, too, derive much benefit from the domestic science class at the Margaret Beavan School.

"In spite of our cramped and restless circumstances there has been good progress, for the staff have been guides, counsellors and friends to the children.

"On December 11th a very happy old scholars' party was held in the school during the evening."

Deaf and Partially Deaf

73. At the end of the year 1959 there were 108 deaf pupils and 72 partially deaf pupils attending Crown Street School for the Deaf, of whom 77 deaf and 44 partially deaf were Liverpool children. There were also 5 deaf children attending voluntary schools for the deaf.

74. There were also 143 children with some hearing defect in ordinary or other types of special schools. Of this number 64 were equipped with hearing aids, 49 in ordinary schools and 15 in other special schools.

Arrangements are in hand for these 64 children to attend lip reading classes conducted by a teacher of the deaf at 4 centres throughout the City. In addition to lip reading instruction they are given training in the use of their hearing aids and in the use of their residual hearing and close touch is maintained with the teachers at their own schools.

75. With early ascertainment of partial deafness and training at the partially deaf section of Crown Street School from an early age, there is an increasing number of children who would be better catered for in a normal speaking environment. However, it is felt that at first there would be great difficulty in maintaining their educational progress in the large classes which exist in ordinary schools. It is, therefore, felt that consideration should be given to the establishment of classes for partially deaf children at the Committee's two open air schools, here they would have the advantage of relatively small classes and for many of the schools' activities they would be included in classes with ordinary speaking children. However, for certain other activities, for example, English, they would be taken in their own small classes conducted by a teacher of the deaf. In this way it should be possible for one teacher of the deaf to deal with at least two groups of partially deaf children who for the rest of the time will be taught along with their hearing colleagues. A further advantage of the establishment of such classes would be that occasionally children who at present attend ordinary schools, but who are having some difficulty in keeping up educationally, because of their hearing defect, could be transferred to these new classes; instead of the much less desirable alternative of transferring them to the School for the Deaf, where they would undoubtedly suffer from lack of normal speaking atmosphere.

At present in the Crown Street School there are two groups of 7 children in the 10-year and 7-year age groups respectively, who could with advantage be moved to the type of class under discussion, and it seems likely that in the years to come this number will tend to increase.

76. Mr. Newport, the Head Master of the School for the Deaf, Crown Street, reports:—

“During 1959 the school has continued to progress in its wide range of activities for children suffering from deafness.

"The Hearing Assessment Clinic under the control of the Senior School Medical Officer and supervision of the Consultant Otologist continues to receive children from the age of nine months or less for testing and recommendation for educational treatment. The facility for early assessment is becoming more widely known.

"Should assessment be difficult then parents are asked to bring their children weekly so that they may be conditioned for response. The room used is acoustically treated and the experience of sound of many types and varying loudness can be presented. Some of the children attending for pre-school training are allowed to mix for play with the nursery children so that socialisation may be developed and wider fields of activity experienced.

"A transistorised speech training unit which may also be used on a loop for reception by individual aids has been introduced into the school. The apparatus is portable and can be used out of school when it is possible to put down a large loop of wire, e.g., round a football field.

"Two more rooms have been fitted with cork lino and modern desks and chairs have been supplied for one classroom.

"The North West Deaf Children's Association of Manchester presented the school with a very good quality tape recorder, which is used for speech analysis, and for making recordings of a child's speech for reference in the future.

"The Lord Mayor and Lady Mayoress invited all the children to a tea-party in the Town Hall. It was a wonderful occasion for all the boys and girls and the staff. The Police Band played for their entrance up the decorated staircase and during the lovely party tea. After tea there was an exciting conjuring display. Everyone was very impressed and it was an event that the children will never forget.

"During the summer term several classes of children spent a week at the Education Committee's Camp School at Colomendy. The weather was excellent and lessons were carried on under far more congenial conditions.

"In June all the school went to Southport. The Liverpool and District motorists were responsible for the transport and entertainment of the

children. The wonderful time was recorded on a colour film which has been shown to the parents.

"The resident children have maintained a good record of health, and those staying over the week-ends have been on several interesting outings.

"To add to the amenities of the Hostel a sitting room for the senior girls has been furnished with a carpet, easy chairs, writing bureau, desk and small tables. A television set has been installed, and colourful Melaware supplied for tea parties and for the once weekly social occasion to which the senior girls invite the senior boys to be their guests.

"Many students from the medical, nursing and teaching centres have visited the school in session.

"Further education classes for adult deaf and lip-reading classes for the Hard of Hearing have continued during Tuesday and Thursday evening. Classes for parents of children suffering from deafness have had notable success."

Assessment Clinics

77. During 1959, an average of three very young children have been seen each Wednesday afternoon at the deafness assessment clinic attached to the School for the Deaf. It is gratifying to know that children are being referred to this clinic from many sources, not only from Hospital Consultants but also from general practitioners and occasionally by direct application from the parent. Many babies are now being seen before their first birthday. A number of them prove to have normal hearing but in these cases it is valuable to be able to re-assure and advise the parents how to deal with their problem. It is so important to discover deafness at the earliest possible age that even if many children are seen, who, in fact, have normal hearing, the time is considered to be well spent.

Epileptic Pupils

78. The Committee has no residential school for epileptic pupils. The 14 epileptic pupils at the end of the year were placed as follows:—

Maghull Home for Epileptics...	...	...	...	...	2
Colthurst School for Epileptics	...	...	...	...	8
Sedgewick House School for Epileptics	...	...	...	...	3
Awaiting admission to Epileptic School	...	...	...	...	2
					15

Delicate Pupils

79. The number of delicate pupils on the rolls of each of the three day open-air schools at the end of the year was as follows:—

Fazakerley Open-Air School ...	...	...	...	...	257
Underlea Open-Air School ...	...	...	...	...	169
Margaret Beavan Open-Air School ...	...	...	...	...	37

80. Miss Tunnicliffe, Head Mistress, Fazakerley Open-Air School, reports:—

“The average roll for the year was 263 and the average attendance 74 per cent. Bad weather conditions and sickness were the major causes of absence but much irregularity in attendance appears to be unwarranted as shown by the poor attendance on Mondays and Fridays.

“An analysis of the diagnoses reveals the high incidence of chest complaints and parents are often advised by their doctors to keep children at home when the weather is damp or foggy.

“Despite improved housing conditions, extended medical services and a growing awareness of the necessities for healthy living, there continues to be a need in the Liverpool district for open-air schools. Most of the children still live in the congested areas of the City and even for those who live on the new housing estates there are few open spaces or facilities for out-of-door recreation. If the children lived within easy distance of the school more amenities could be offered. Nevertheless, a dancing class held after school has an average attendance of twenty senior girls and boys, and football on Saturday mornings has attracted twenty to thirty senior boys.

“In June a party of five boys, accompanied by one of the masters, stayed for a week-end at Capel Curig and experienced for the first time the pleasures of walking in fine country. This was followed by a week-end at Llangollen when thirty-five children and staff stayed at a hostel rented from the Liverpool Union of Girls and Mixed Clubs. Two parties attempted to climb Snowdon and would have succeeded but for the bad weather conditions.

“The enjoyment and benefit derived from these excursions proves that an extension of open-air recreation could be a valuable contribution to the after-care of physically handicapped children.

"The Youth Employment service for special schools continues to be an excellent liaison between the school and the world of employment and most of the boys and girls have found suitable work within a short time of leaving the school."

81. Mr. W. F. McMenamin, the Head Master of the Underlea Open-Air School, reports:—

"The average number of pupils on the school roll fell from 180 in 1958 to 170. Nevertheless, all available accommodation for children of infant and junior age was taken up, and the vacancies were for children of 10½+ only. Three children only left at age limit, 42 were de-ascertained to resume ordinary school life, 5 were transferred to other special schools, and 1, successful in the Entrance Examination, was enrolled at a Grammar School.

"The attendance for the year was 78·6 per cent. of the number on roll. The unusually dense and prolonged fog of January 13th-16th reduced attendance to 55 per cent., and an epidemic of influenza in February, rather more serious than the 'Asiatic' flu' of the previous year, lasting nearly four weeks, caused attendance for the period to drop to 53 per cent. Unfortunately, there is still a blatant disregard for school attendance with a minority of parents, and I cannot report an improvement on last year in this respect.

"As formerly, the greater number of our pupils have chest complaints. The increase in the proportion of asthma sufferers year by year is, perhaps, worthy of note. The figures in December were:—

Asthma ...	...	...	...	59
Bronchiectasis ...	...	...	...	25
Arrested Phthisis	...	...	...	6
Bronchitis	...	...	...	18
				108

"Twenty-seven of these children have postural drainage at school daily, and breathing and relaxation exercises are given for asthmatics and others to the number of 81, with good results.

"The general prosperity of the country has been reflected in the clothing, housing, and general demeanour of the children. Eight children are inadequately clothed, and in the case of 5 of these, the cause is not

poverty. Twelve children live in bad houses. During the year 6 families were re-housed, but 2 families returned from a suburban area, one because the air was 'too strong', and the other because of social difficulties with the new neighbours.

"In keeping with the times also, is the number of mothers in paid employment. In the cases of 22 of our pupils, should they be taken home through illness during the day, there would be no one at home to receive them, through the mother being employed. There are many other mothers working, but in the morning, evening, or part-time only.

"The opinion, derived from the habitual morning lassitude of so many of our children, that lack of sleep was the cause, was tested by a brief survey, with safeguards for accuracy, on a day in October, with children aged 10 and over. Of 80 children, 27 habitually went to bed later than the broadest estimate of a reasonable time. The regular hour of retiring for a child of 10 was 11 o'clock, a child of 11, 10.30, a child of 12, 11, and so on; in every age group there were examples of this lack of parental discipline. The television connection is obvious. Out of 141 children present on a certain day, 117 had television in the home and 100 of these viewers habitually followed commercial programmes. Consideration of the nature of some of the evening television programmes gives considerable explanation of the lethargy in certain directions, and precocity in others, with which teachers, among others, are contending.

"During the Easter term, an experiment was carried out to use the school amenities in the evenings for non-academic activities. The school remained open for three evenings each week until 6 p.m. for those children over eleven who wished to stay, for pottery, country dancing, art, photography, chess, table tennis, a greenhouse building project and games. The scheme was operated on a voluntary basis by the Headmaster and five members of the staff. The average attendance was 25 per evening, and it was enjoyed and appreciated by those who took part regularly. A full report appears elsewhere.

"Owing to repairs to the roof of the hall being carried out it was impossible to give the usual Christmas entertainment. An 'Open Day' was held instead, which was attended by about seventy parents.

"During the year, Nurse Friend made nearly 500 visits to the homes of pupils. This part of her work has proved most useful in strengthening co-operation between school and home. Her reports have greatly increased our understanding of the children's personalities, and our knowledge of material difficulties where these exist. Since October, her duties have been with Underlea School only, and have been fully utilised, to the general benefit."

82. Dr. M. C. Black, the School Medical Officer who supervises the children in Underlea Open-Air School, reports:—

"The total number of leavers for 1959 was sixty-four. Of these sixteen children left after attending for less than one year and twenty-four after attending between one and two years. The length of stay of the remaining twenty-four varied from two years to seven years.

"There are forty-six children at Underlea who have been there for three years or longer. Of these seventeen are girls and twenty-nine are boys. The majority is made up of asthmatics—sixteen boys and five girls—all severe cases. These asthmatics all come from fairly good homes and from scattered districts, good and poor. There seems to be no accountable reason for their lack of improvement, but they do improve on going to a residential open-air school. There are slightly more girls affected by bronchiectasis and bronchitis than boys and three have had lobectomies. It is very gratifying to see that only five children have been at Underlea for a considerable time on account of tuberculosis—three cases of lung and two of bone tuberculosis, and all were contacts of known cases, probably owing to a higher standard of living there are only two 'long term' cases due to general debility.

"Six children out of the forty-six had never been to an ordinary school at all."

Physically Handicapped (Day Schools)

83. At the end of the year 228 children were in Hospital Schools, 169 at Alder Hey Hospital, 52 at Olive Mount Hospital, and 7 at Aintree Hospital. The physically handicapped pupils in attendance at day special schools numbered 230 at the year's end, and these pupils were placed as follows:—

Margaret Beavan	...	...	...	...	...	...	110
Dingle Lane	...	...	...	...	...	...	120
							230

84. Mrs. K. M. Fairhurst, the Head Mistress of the Dingle Lane Special School, reports:—

"In 1959 there was no epidemic in the school but most of the short absences were due to some form of common cold. Forty-six doctors' certificates were received at school. Twelve of these indicated influenza, 8 bronchitis, 6 common cold, 7 tonsillitis, 4 chill, 1 measles, and 8 various ailments. Once again we must place on record the valuable work done by the school nurse who is always so anxious to do her best for the well-being of these handicapped children.

"The highest attendance was in July—88·79 per cent.

"The lowest attendance was in January—52·39 per cent due to severe fog.

"Many children visited clinics and hospitals for advice and treatment, etc. Children were absent from school for a total of 343 full sessions for these purposes.

"Thirty-four children left during the year. Of these 6 left to take up employment, 10 were transferred to other special schools, 16 were fit and went to ordinary schools, 1 left the city and 1 was transferred to a technical school.

"There have been many activities during the year. A party of boys and girls was taken to Colomendy for a day and a party of girls went to stay there for a long week-end. Other visits were made to Chester Zoo, Shell Mex, the Commonwealth Exhibition, Philharmonic Concerts, the Liverpool Show, and plays given by the English Theatre Players. An interesting event for the senior boys was a visit to the submarine *Taciturn*, and even the most seriously handicapped boys were taken over the ship by the crew, and we were very grateful for the help given by the men. A number of films have been shown, some dealing with health matters. The children again took part in the folk dance festival but as they are unable to compete in the athletics, we held our own sports day which was a highly successful event.

"Once again we were most grateful to the children of Northway Infants School, their parents and the teachers of the school for inviting some of our children to their harvest festival service, and for sending us such wonderful fruit for our sick children. The students of Ellergreen High School again very kindly invited our junior children to a lovely Christmas party. They also provided presents and gifts of books to the school. We are most grateful for the generosity of these two schools.

"The Southport outing was a tremendous success. One of our boys, Christopher Jones, presented a bouquet to the Lady Mayoress, on St. George's Plateau.

"We also had another appreciative gathering of about 100 visitors on our open day."

85. Dr. J. C. Taylor, School Medical Officer, reports on Dingle Lane Special School for Physically Handicapped Pupils:—

"There are at present one hundred and twenty children on roll. The most commonly found handicaps are listed below:—

Cerebral palsy	21
Poliomyelitis sequelae	21
Congenital heart disease	16
Rheumatic heart disease	6
Tuberculous joints	8
Perthes disease	4
Congenital dislocation of the hip	3
Muscular dystrophies	3

"Amongst the rarer conditions are many cases one might spend a lifetime in general practice and see only once or twice or perhaps never even see at all. I would include such conditions as anthrogyphosis, epiphyseal dysplasia, Turner's syndrome and Friedreich's ataxia.

"Not all the children on roll have had formal intelligence quotient assessments, but of those who have 18 (or 15 per cent.) have intelligence quotients of 75 per cent, or under and of these 18 there are 6 with intelligence quotients in the 50's. Five of the 6 with intelligence quotients in the 50's suffer from cerebral palsy, the remaining one being an old case of tuberculosis meningitis. In these cases the physical handicap is more important than the backwardness."

86. Mr. O. Roberts, Headmaster of the Margaret Beavan School, reports:—

" Average number on roll	...	...	...	...	...	150
„ attendance	...	...	...	...	...	119.5
„ percentage	...	...	...	...	...	79.7

	Boys	Girls	Total
Physically handicapped pupils	56	54	110
Delicate pupils	18	22	40
New admissions	18	18	36
Re-admissions	5	3	8
Left			
For work	—	2	2
Other schools	17	11	28
Home Teaching	1	—	1

"The health of the children for nine months of the year gave little cause for anxiety, but the severe wintry conditions plus dense fogs in January and February brought more than the usual number of attacks of bronchitis, tonsilitis, influenza and common colds. Attendances accordingly ranged for 48.7 per cent. in January to 87.3 per cent. in July. The highest attendances occurred in the mid-summer term when the percentage fell below 80 per cent. on only one occasion.

"Mr. Dwyer, Orthopaedic Surgeon, held two orthopaedic clinics at the school during the year. Speech Therapy continued throughout the year. Physiotherapy is well catered for by the three visiting Physiotherapists.

"The physical condition of the pupils of the school militates against athletic success but the children all derive great benefit and enjoyment from their physical activities. The boys play football and cricket matches against ordinary schools in the district, not with any great distinction but with great zest and enthusiasm. Swimming for boys and girls continues to flourish. During the season, 23 certificates were gained, 20 beginners and 3 distance. One boy gained two awards at the Polio Fellowship Gala held at Garston Baths—Silver Cup—one length back stroke and Silver Statuette—neat dive.

"Ten children sat for Common Entrance Examination without success. Two boys sat for the Transfer Examination at 13 and one was successful in gaining a place at the Cardinal Allen Grammar School. Parties of fifty children attended orchestral concerts given at the Philharmonic Hall, and also plays given by the English Children's Players. The children also took part in the Folk Dance Festival held at Fazakerley Open-Air School. Three Open Days were held during the year giving the parents an opportunity to visit the school under ordinary working conditions. On each occasion over 100 visitors took advantage of the invitation to visit the school. It was encouraging to see a good many fathers among the visitors.

"The Motorists Outing to Southport was a great success—good weather and many willing helpers reduced anxiety and made the day memorable for the children.

"Educational visits by Seniors were made to the Meccano Works and Chester Zoo.

"Fifty infants were again invited to a Christmas Party organized by the Senior Girls of the Queen Mary High School."

Physically Handicapped (Residential Schools)

87. The Authority maintains two boarding schools for physically handicapped children, namely:—

The Children's Rest School of Recovery, Greenbank Lane	...	50 pupils
Abbot's Lea School, Beaconsfield Road, Woolton...	...	70 pupils

88. Miss C. M. Williams, the Head Mistress of Abbot's Lea School, reports:—

"The average number on roll for 1959 was 67. Although the 70 available places have been full most of the year, there has been some delay at the beginning of each term in filling vacancies.

"We began the year with 35 boys and 35 girls but to meet the demands of a much longer waiting list for boys than for girls, we re-organised during the year and by September accommodated 50 boys and 20 girls. This ratio seems likely to continue for a while.

"During the year 52 children have been admitted for the following reasons:—

Asthma	23
Bronchiectasis	6
Cystic disease of lungs...	1
Congenital heart disease	1
Cerebral palsy	2
Poliomyelitis	1
Perthes disease	1
Post rheumatic fever	2
Debility	9
Emotional and Psychological disorders	6

"In addition to these physical handicaps, practically all these children come from homes which are emotionally disturbed, overcrowded or unsuitable in some way.

"Of the 52 leavers whose places these took, 34 children were fit to return to ordinary school; one obtained a place at a secondary technical school; 2 were transferred to residential schools for E.S.N. children; 1 to a residential school for maladjusted boys and 14 whose domestic situation had improved, but who still needed special education, were transferred to day special schools.

"These figures show our constant change of population. Only two children have been at the school for more than three years and another three, for more than two years. The average length of stay is 18 months.

"The health of the children has been good throughout the year, apart from an epidemic of influenza in February. We rarely see a child with an attack of asthma, although half the children in the school are reported to have frequent and severe attacks at home. This is largely attributed to the confidence and security given to the children through a well-established routine, carried out by a loyal and conscientious staff.

"Four children remained at school for the whole of the Easter holiday, eight went to the Children's Rest School for the whole of the summer holiday and eight remained at school for the Christmas holiday (all except three of them were permitted to go home for the Christmas weekend). In all cases, home circumstances rather than physical condition necessitated these holiday arrangements.

"Activities during the year have been very varied. School concerts were given in March and December and an Open Day was held in July. A senior team took part in the folk dance festival. Juniors and seniors enjoyed performances given by the English Children's Theatre Group. Staff and children enjoyed the annual outing to Southport and our own outings to Chester Zoo and New Brighton.

"Swimming continues weekly and we have a number of enthusiastic swimmers. Cricket, rounders, baseball and football occupy much time during summer evenings and at week-ends throughout the year. Some 'friendly' matches have been enjoyed. Our school sports day in the summer term was a great success.

"The newly equipped woodwork room came into use in May. Our own boys and those who visit weekly from Aymestrey Court derive much pleasure and achieve good results under the guidance of our newly appointed woodwork master, Mr. Blore.

"The recruitment of suitable nurses for work in this residential special school is one of our major problems. With the co-operation of Dr. Robertson and Miss Snoddon we have a rota of nurses visiting the school daily and while we express appreciation of their work and co-operation, we look forward to the time when we will have our own nurse once more."

Pupils Suffering from Cerebral Palsy

89. In addition to the 10 Liverpool cases of cerebral palsy resident at Greenbank, there were 232 cases of cerebral palsy in Liverpool among children between the ages of 2 and 16, as follows:—

Attending ordinary schools	...	...	...	...	...	42
Attending grammar schools	...	...	...	...	...	2
In other special schools—						
Educationally sub-normal	...	...	...	...	...	27
Physically handicapped	...	...	...	...	...	56
Awaiting admission to Day Physically Handicapped Schools	...	...	...	...	...	1
School for the Deaf	...	...	...	...	...	2
Boarding Special School for the Deaf	...	...	...	...	...	1
Day Open-Air School	...	...	...	...	...	2
Residential Open-Air School	...	...	...	...	...	2

Holmrook Partially Sighted School	...	...	...	1
Greenbank Nursery	...	...	...	8
Ordinary Nurseries	...	...	...	1
Private schools	...	...	...	3
Boarding Special Schools for Spastics out of City	...	...	...	1
Not attending school—				
Home teaching	...	...	...	4
Under Age...	...	...	...	10
Awaiting admission to Greenbank Nursery	...	...	...	5
Notified to Local Health Authority under Section 57 (3) of the Education Act, 1944...	...	...	...	63
Unfit for any school at present	...	...	...	1
				232

Examinations of Children with Physical Defects

90. The accompanying return shows the results of the examinations, made by the approved medical officers, of children referred with various handicaps:—

Delicate and physically handicapped children examined	...	...	...	313
Children recommended for admission to day open-air schools	...	...	...	120
Children recommended for admission to residential open-air schools	...	...	...	44
Children recommended for admission to day schools for the physically handicapped	...	...	...	72
Children recommended for admission to residential schools for the physically handicapped	...	...	...	10
Children recommended for admission to residential schools for epileptics	...	...	...	3
Children recommended for home teaching	...	...	...	15

Educationally Sub-normal Pupils

91. The results of the examinations made by the Approved Officers, of children referred for ascertainment as being educationally subnormal pupils are as follows:—

Number of educationally sub-normal examinations carried out	...	...	...	1,187
Children recommended for admission to day special schools for educationally sub-normal pupils	...	...	...	543
Children recommended for admission to residential special schools for educationally sub-normal pupils	...	...	...	111
Children recommended to remain at ordinary schools and referral to Child Guidance Centre for remedial teaching	...	...	...	52
Children recommended for notification to the Local Health Authority:—				
(a) for supervision upon leaving school, under Section 57 (5) of the Education Act, 1944	...	...	...	101
(b) as ineducable, under Section 57 (3) of the Education Act, 1944	...	...	...	62
(c) as inexpedient, under Section 57 (4) of the Education Act, 1944	...	...	...	1

The Authority has five boarding schools for educationally sub-normal pupils with accommodation as follows:—

Crookhey Hall, near Lancaster, for Senior Boys	...	...	72
Riverside School, Hightown, for Boys	...	...	60
Thingwall, for Girls	...	...	40
Oakfield, Gateacre, for Girls	...	...	30
Beechwood, Aigburth, for Girls	...	...	60

The Authority also maintained two educationally sub-normal pupils at Pontville Roman Catholic Special School.

There are fifteen day special schools for educationally sub-normal pupils with accommodation for 1,680 pupils. The schools are Beechwood, Brookside, Clubmoor, Kepler Street, Kilrea Road, Frinsted, Nelson, Northumberland Street, Oakfield, Queensland Street, Richmond, Sandon, Springfield, Stoneycroft and Thingwall.

92. Mr. D. A. Troilett, Head Master of Crookhey Hall School, reports:—

“The 1950s’ ended on a very busy note at Crookhey Hall School, with major works in progress on the building of a new staff accommodation block, and the re-planting of the grounds, following the felling of very many dangerous trees. Concurrent with this, the decorators have completed a new and very modern colour scheme in all the class rooms and half the dormitories.

“Within the school, work has gone on happily during the whole year under review, and the new schemes which were put into operation late in 1958 are now showing results. Our proportion of de-ascertained pupils returning to ordinary schools shows marked improvement. During this year, the staffing position has remained static, and this has helped much in the classroom work.

“We have extended our out-of-school activities, to try to help the majority of boys who are admitted to this school with emotional difficulties. Each evening, there is a full range of interesting hobby groups and activities in which the boys participate happily. To broaden the experience of our resident pupils, we have enlarged also, the project of

school visits and excursions, and for the leavers and potential de-ascertainment pupils, a separate class group has been established, with a timetable concentrating on social studies and vocational training. The response from the pupils to the new and original work attempted by this group, is sure proof of the value of an experimental new project in this field of work.

"School leavers still continue to find employment locally, and the Saturday farm work is pursued with vigour each week-end, but we do look forward to the inception of a system of after-care. The estimated youth unemployment figure for 1962 seems to make this project more necessary than ever, and I feel an extension of the type of work undertaken at Queensland Street Evening Institute, in centres throughout the city, is of paramount importance for the welfare of our school leavers.

"Weekly swimming lessons at Lancaster Public Baths are a popular part of the timetable, and our senior boys did very well in the Scout Cub Gala last September, due, no doubt, to the practice these weekly lessons provide.

"The Boy Scouts and Cubs move forward solidly, and their badge record will compare favourably with any group in this district. The most popular is the Fireman's Badge, which necessitates a course of lectures and practical instruction at Lancaster Fire Station, and our boys travel alone, as private individuals, to this course. Every Scout passed the final examination. Above the consideration of the gaining of a Scout Badge, the ability of our pupils to mix with members of the brotherhood and fire-fighting personnel, on equal terms, has given us great satisfaction. We now have our own tentage, and the boys are well versed in the art of pitching and striking. The problem of social adjustment has been further enhanced by the establishment of a deep liaison with Lancaster Boys' Club, and an extension of the visits of unescorted pupils to Lancaster, each week, for pictures and other social visits. One cinema manager in Lancaster has taken the trouble to compliment our pupils on their behaviour and decorum.

"Five Church of England boys were confirmed by the Bishop of Lancaster, and our Roman Catholic boys still serve and answer Mass.

"The private bus service for visiting days, organised by the Committee, has proved a very great success, and many are the appreciative remarks of parents. This cheap and easy transport has given more of our pupils the joy of a parental visit once a month, where, before, the parents did not make the effort by the long route through Lancaster, and has indeed helped for much greater liaison between home and school.

"We have had regular concert visits from the Lancaster Rotary Club, and last Christmas we had a small but appreciative audience from the village at our Christmas plays. Another innovation, during the past year, has been a series of lecturettes by the Lancashire County Constabulary on both Road Safety and the work of the Police Force.

"Each week-end we welcome ex-pupils who often make very long journeys for a reunion with their old school.

"The regular weighing and measuring show the value of residential school life in the physical development of our pupils, and we are sincerely grateful to the School Health staff for the meticulous liaison in helping to solve many problems which need the diagnosis and treatment of the Child Guidance Clinics. A very noticeable feature, from the weights/measures figures, is the very rapid physical development of our adolescent pupils, between the ages of 14 and 16, which makes the old-fashioned stock sizes of clothing quite out-of-date.

"The problem of enuresis, which one so often meets in this work, has again been tackled with great vigour by Matron and her staff, and the record of cures during the year is most heartening.

"Once again, we are pleased to report a clean bill of health for 1959, with no record of serious illness or epidemics due, no doubt, to the wholesome routine, good food, adequate sleep and the bountiful clean fresh air of North Lancashire.

"I must place on record a most sincere word of thanks to all my staff, both teaching and domestic, for their untiring efforts on behalf of all our pupils. I, again, would like to record their efforts with the holiday parties of pupils from Riverside and this school during the Easter, Summer and Christmas vacations. It has been a joy to witness the organisation of a happy holiday programme for our more unfortunate pupils.

"Our thanks are also extended to the Chairman and Members of the Special Schools Sub-Committee, and to the administrative officers, for all their kindly help and assistance throughout the year. We look forward tremendously to their visits and the interest shown in our work here. I feel the coming year will consolidate the many innovations we have introduced to enhance the value of a period of residence for every pupil in this school."

93. Miss M. F. Shorten, Head Mistress of Beechwood School, reports:—

"The average number of children on roll during 1959 was 235. The attendance ranged from 63·9 per cent. during one very foggy week early in the year, to 91·5 per cent., making an average of 85 per cent. This is a little lower than the previous year and is accounted for (apart from genuine sickness) partly by a few children who were persistently absent for odd days, particularly Fridays, and partly by others who were absent for longer periods. The latter offenders belong to a group who are absent without adequate reason, and only return to school when their parents are threatened with legal action.

"Twenty-two girls left school at the age limit, and suitable jobs were found for them by the Youth Employment Officer after interviewing them at school.

"The weekly visits of the School Medical Officer continued to be most helpful; not only for the routine inspections and intelligence testing carried out but also for valuable discussions on general problems of health or behaviour.

"The resident girls paid a record number of visits to clinics for dental and defective vision treatment. The speech therapy clinic was attended regularly by a small number of boys.

"The parents responded very well in giving consent for B.C.G. and poliomyelitis vaccinations. During the mass radiography campaign in the City all the fifteen-year-old girls and also the whole staff were X-rayed with 100 per cent satisfactory results.

"The general health of the resident girls continued to be very good, though there was an increase in the incidence of tonsillitis during the winter months, and on two occasions, immediately after a holiday, a mild though persistent outbreak of scabies. The care and attention given to the girls by the children's attendants and supervisors deserves much praise. During any illness the attendants have always been most appreciative of the professional advice and guidance given them by the School Nurse on her daily visits and they much regret that in future they can only rely on this twice a week.

"Once again a party of about 40 junior boys and girls spent a fortnight at Colomendy. It was a most successful and enjoyable visit from which they derived noticeable benefit.

"The spacious school playing fields were handed over for use early in the summer and very quickly athletics practice and cricket were well under way. The children did exceptionally well at the annual special schools sports event and swimming gala, gaining no less than eight trophy certificates. They are very keen and are determined one day, to win the championship shield.

"The year's most interesting social event was our first Old Girls' reunion held on the first day of the Easter holiday. It was very well attended, mainly by old residents, including some from outside the city who travelled from as far away as Newcastle, Grimsby, Llandudno, Chester and Chesterfield. Everyone had a most enjoyable afternoon and evening and it was indeed a delight to hear the girls reminiscing about the happy times they had at school. They made a present to the school of a silver cup to be competed for at the school sports.

"The most remarkable thing about the majority of the girls was their really smart appearance and their quiet courteous manner. Of course, by no means all the school leavers have done well, but to see again, after two or three years, those who have attained a reasonable degree of success is most encouraging and gratifying. It reflects great credit on the efforts of the entire staff who devote so much time and energy in helping and caring for these handicapped children."

94. Mr. L. J. McDonald, Head Master of Sandon Day Special School, reports:—

“Since the opening of the school in January 1957, the problems encountered have been as much social as educational ones, and have called for the closest co-operation between staff, school medical officer and health visitor. The boys display a wide range of handicaps besides low intelligence.

“About 25 per cent. have glasses, and constant checking is needed to see that these are worn, that they are kept clean, and that they are repaired or renewed as quickly as possible after the frequent breakages and losses. Parents need much prodding to co-operate in this. There are always about 12 boys with hearing defects and again most of the initiative in securing attention when it is needed has to come from the school. Other physical defects which appear in some degree are epilepsy, spasticity, asthma, post tuberculosis, post-meningitis, bronchial troubles, hare lips and cleft palates, while speech defects are abundant.

“The biggest handicap for most of the boys is their environment. Some have parents who are over-concerned or over-protective and their children show anxiety, nervousness, lack of confidence, fussiness, over-eating. More are neglected, or come from large families, or poor ones, or their parents are of low intelligence and cannot care for their children or control them.

“The Headmaster has frequently to take action to ensure that boys are adequately clothed or shod, and daily attention has to be given to cuts, sores, boils, etc., neglected by parents. The school has to provide training in personal hygiene, punctuality, eating habits, manners, and to deal with delinquency and other problems arising in the homes.

“It is rewarding to see how well the boys respond to this care for them as individuals. The average attendance is as good as most normal schools and it is quite common for boys of 9+ to walk up to four or five miles to school after missing the bus.

“Very few boys have left the school still unable to read, and the average reading age of 11+ leavers is over seven. During 1959 the number returned to normal schools was six.”

95. Dr. Andrews, the School Medical Officer, also reports on Sandon School:—

“It is a matter of some concern to note how many children attending Sandon day special school have to cope with a second handicap, as well as their intellectual retardation. Of 94 children who had been in attendance in 1959, 36 suffered from a defect of vision, 11 had some degree of deafness, 2 had undergone operative treatment for infection of the mastoid and 2 for repair of hare lip and cleft palate. Eight pupils had suffered from complaints related to their retardation, such as epilepsy, T.B., meningitis and cerebral palsy.

“It is sad to report that there are still some pupils, who are unable to derive maximum benefit from their special schooling, because of lack of co-operation from the home, which is shown in such details as failure to wear glasses, keeping of late hours, late rising in a morning and poor attendance for no adequate reason and lack of cleanliness. Lack of parental control would seem to stem sometimes from disinterest, but more frequently, from intellectual dullness in the parents, who are quite incapable of appreciating the importance of a regular routine for their family.”

Maladjusted Pupils

96. There were 30 boys in the Aymestrey Court Residential School for Maladjusted Boys. There were also 7 Liverpool boys and 5 Liverpool girls in voluntary schools for maladjusted pupils. During the year there were 18 new admissions and 19 boys were discharged from schools for maladjusted pupils.

97. Dr. M. C. Andrews, the Medical Officer in charge at Aymestrey Court School, reports:—

“The Head Master and Matron are to be congratulated on a most happy atmosphere in the school and the response of the pupils to their environment is most encouraging in the majority of cases.

“Of the 30 boys in residence at the end of the year, 18 had been admitted during the year, 9 were in their second year and the 3 who were in their third year were shortly due for discharge.”

98. Mr. B. Heaney, Head Master of Aymestrey Court School, reports:—

“The past year at Aymestrey Court has been one of progress both in the treatment of the children and of the development of the building

within the obvious limits of which it is capable. Nothing spectacular has been done, although on analysis of the available statistics it can be seen that treatment is now undertaken on both short and long term bases.

"During the year there have been 18 admissions and 19 discharges. Of those discharged, the average stay was 1 year 7 months and only 5 stayed longer than the average period.

The improvements in school accommodation suggested last year would much facilitate the treatment of these children. Many children only need to attend a day special school since their emotional problem is associated with educational difficulties. A hostel would be useful in providing for certain pupils of selective schools.

"The very close liaison and co-operation between all members of the School Health Service and the school has resulted in very smooth running, particularly due to the Case Conferences, where all the officers concerned are able to discuss each individual child. This pooling of information results in much more efficient treatment and smooths out many of the difficulties which would otherwise be almost unsurmountable. The diagnostic work and remedial teaching of the Educational Psychologist has been of great value enabling the most appropriate treatment to be given, with the minimum of time spent in trial and error methods.

"It becomes increasingly evident that a general after-care supervision is desirable, as at the moment the children leaving the school are supervised normally up to the age of 16 years, but then come outside the provisions of the Education Service, and a child leaving at the age of 16 years cannot really be supervised at all under the present arrangements. Most of the children discharged are not resentful of the supervision by a trained officer who is well known to them, but often welcome it, and it is to be hoped that such supervision will become available for children discharged from Aymestrey Court at some time in the future.

"In 1959 the standard of health was very high; there were no illnesses worse than a cold or sore throat. Much of this is due to the co-operation between the parents and the school in that the parents have provided suitable clothing outfits after consultation with Matron, and in most cases have been scrupulous in keeping the child clean whilst at home on holiday. There have been no dirty heads after home visits or holidays.

"The anti-polio campaign was most successful; 22 boys have had two out of three injections, with the third shortly to follow, and a further eight boys are starting injections in January, 1960.

"Although the progress in 1959 has been without any spectacular event a closer relationship between children and staff has been established, with an obvious improvement in the stability of the children.

"Informal recreation has played a large part in the school life. During the delightful summer past many days were spent at Formby beach, and others were spent at Southport, in the Lake District, Chester and several other places. The child care staff play a very large part in the remedial work of the school, and have responded well to the attempt to unite the school more closely. They have organised a first aid group, a photographic group, brought about the defeat of a local team by the school footballers, and have had a school group picture in the *Echo* on the occasion of a visit to a warship.

"Perhaps the most significant thing about the year past is that there has not been a single case of running away, and while it cannot be expected that this state of affairs can exist indefinitely, it is a good indication of the stability existing within the school."

Speech Therapy

99. Mr. W. G. Good, Senior Speech Therapist reports:—

"The following figures illustrate the total number of cases that were treated during the year 1959:—

Defect							Boys	Girls	Total
Stammering	...	...	...	...	...	...	105	26	131
Dyslalia	...	...	...	...	...	...	150	59	209
Cleft Palate	...	...	...	...	...	...	6	4	10
Cerebral Palsy	...	...	...	...	...	...	9	6	15
Aphasia	...	...	...	...	...	...	—	2	2
Dysarthria	...	...	...	...	...	...	4	1	5
Total							274	98	372

"141 new cases were admitted for treatment whilst 109 cases were discharged as having much improved.

"In addition to this 19 children were discharged for poor attendance; 11 attained school-leaving age; 3 were transferred to Child Guidance Centre and 3 left the city.

"Mrs. Donohue, Assistant Speech Therapist, resigned the service in December. Although the establishment of speech therapists is 5, only for a few months in 1958 did the service have a full complement of staff and it is to be hoped that in 1960 the position will improve.

"During the year several cases of aphasia were treated by the speech therapy staff. Aphasia is a condition rarely found in children.

"There are two aspects to consider when dealing with the development of speech and language, namely, symbolization and expression. By symbolization we refer to the faculty of forming, retaining and reproducing mental concepts in association with purely arbitrary combinations of speech sounds, and by expression we refer to phonation and articulation. Aphasia is essentially a disorder of symbolization and can be classified under two main headings—motor and sensory. Of the two cases of aphasia treated during the year one showed symptoms of motor aphasia and the other sensory aphasia.

"Joan was involved in a street accident at five and a half years of age and damage to the brain resulted in a right-sided hemiplegia. In addition to this Joan—who prior to the accident spoke normally—could no longer express herself in meaningful speech.

"She could comprehend speech and although she could articulate the consonants and vowels of speech in isolation she was unable to express herself using normal speech and language. Her speech was jargon. Writing, reading and arithmetic were similarly affected. Joan was a case of motor aphasia and showed defective power of forming words because of impaired mental imagery arising from brain damage.

"Barbara—aged almost six—was referred to the Clinic as having no speech at all except for a few guttural sounds. Audiometry shewed normal hearing and an intelligence test shewed a normal level of intellect. Further tests clearly shewed that Barbara could not understand speech. Whilst she lacked confidence and was a nervous and tense child there was no evidence to show that her lack of understanding of speech was related

to any emotional factor. Both parents were deaf-mutes but since her brother of 10 years of age had developed normal speech and language a lack of speech stimulation in infancy could hardly be considered to have had any serious effect upon the child's speech development.

"Developmental sensory aphasia was suspected as Barbara could not attach meaning to the spoken word. The part of the brain associated with the comprehension of language had not developed normally.

"Whilst this sensory loss continued it was impossible for the child to develop motor speech and this lack of comprehension of speech accounted for her primitive utterances.

"Both cases have responded very favourably to treatment. Joan can now carry on a useful conversation with people but speech is still telegraphic. Further improvement will come but her speech and language will never be normal, but it will be sufficient for her to lead a reasonably social, useful life, independent of others. The prognosis in the second case is far more favourable—generally such cases have a normal development of speech and language by the age of eight years."

Home Teaching

100. Mr. C. Holroyde, the Adviser for Special Schools, reports:—

"There are a number of children in the city who are unable to attend school because of ill-health. For them the Liverpool Education Committee has provided a home-teaching service. At the moment there are four full-time teachers and one part-time teacher in the home-teaching service. The extra teachers have been appointed so that, where advisable, more than one lesson can be given to selected children during the week. For some time it has been felt that where possible and advisable each child should receive at least three lessons per week. In order to do this there must be a great increase in the number of teachers available. Plans are now being made to provide an extensive panel of part-time teachers who are willing to undertake this work. It is hoped that the formation of such a panel will be completed shortly and that the new extended scheme can be put into operation in the near future. At all times there is the closest co-operation between the teachers and the parents. The teachers encourage the parents to take an active part in

the education of their children so that they are in a position to supervise the children's work between the visits of the teachers. The results achieved have been most encouraging, and examples of the children's work have been exhibited at the Liverpool Show.

"A full-time teaching service is also maintained at the Child Guidance Centre and the three teachers do a great deal towards rehabilitating children who have special emotional difficulties.

"As a result of the excellent teaching received some of the children have been able to take their places in the ordinary schools and in the special schools. Several of the children made educational visits during the year and their teachers transported several to schools so that they could take part in the Christmas and other activities. These children, who are so cut off from normal living, are encouraged to mix as much as possible with other children. Our thanks must be extended to the Red Cross for arranging an outing to Southport and also for arranging pantomime outings for children. We should also like to thank Mr. John Moores and Mr. Cregeen for their interest and gifts of parcels for the home-teaching cases. At Christmas this year a grand party was privately arranged at the house of Mrs. Ion, the senior home teacher. Thirty children and their parents attended and transport was given by friends. Our grateful thanks are extended to Mrs. Ion and the home-teaching staff for organizing such a delightful party for the children.

"The teachers must be congratulated on their devotion to their work. The work is individual and interesting, but at the same time, the teachers are very cut off from the main stream of education and from the normal contacts which are enjoyed by others in the profession. This year the home teachers have taken some very interesting cases, e.g. the children studying for General Certificate of Education and two blind children. The home teachers make a full report on each child during their fortnightly visit to the Education Offices."

Medical and Dental Arrangements

101. The routine medical examinations and the general medical care of the special schools outside Liverpool are carried out by local medical practitioners whilst both specialist and dental treatment are provided either under the local Authority's arrangements, or in a few instances, by special arrangements made in the areas.

All the medical and dental facilities of the School Health Service are available for the special school children.

Medical treatment under the Authority's schemes was carried out as follows:—

Defective Vision	...	...	...	...	...	...	358
Tonsils and Adenoids	...	...	...	...	...	...	41
Aural conditions	...	...	...	...	...	...	30

whilst children suffering from minor ailments were treated at the schools.

The following table shows the work carried out by the dental staff of the School Health Service at the Special Schools:—

TABLE 4

Number of inspection sessions	...	...	...	...	...	...	5
Number of treatment sessions	...	...	...	...	...	...	17
Total number of sessions	...	...	...	...	...	...	22
Number of children inspected	...	...	...	...	...	...	429
Number of children requiring treatment	...	...	...	...	...	...	275 (64.1%)

EMPLOYMENT OF HANDICAPPED YOUNG PEOPLE

102. Mr. W. Duncan, the Superintendent of the Youth Employment Bureau, has given the following report:—

“It will be readily appreciated that vocational guidance and placement of mentally and physically handicapped boys and girls presents special problems which often require much time and patience to solve. In Liverpool it has for many years been found desirable to have a Special Section of the Youth Employment Bureau to deal with boys and girls leaving the City's Special Schools and also young people from other schools who have a handicap.

“Before advice on employment is given to such boys and girls, information concerning them is gathered by the Vocational Guidance Officer by means of reports given by their teachers and also through the case conferences held in the schools, in which Head Teachers, School Medical Officer and Vocational Guidance Officer participate and to which parents are invited. By this means the boy or girl can be studied from the educational, medical and social aspect in order to assess their particular needs.

"The continuing recession in trade during the year has understandably had an effect on the ease with which handicapped young people have been absorbed into employment. More time and effort has had to be expended in securing openings for boys and girls leaving school while those who for some reason have lost their employment have tended to be without work for longer periods. In spite of these difficulties, however, a total of 502 young people (252 boys and 250 girls) were placed in employment during the year. Altogether 605 handicapped boys and girls sought help and advice during the year. For some, further education was arranged and a small number were able to benefit from courses of training or a period in an Industrial Rehabilitation Unit. Three girls, two totally deaf, and one who had suffered from tuberculosis, were admitted to training courses in calculating machine operating. A further three young people (one boy and two girls) who had had treatment for tuberculosis received training in commercial subjects; the two girls attended local Commercial Colleges and the boy is receiving training at Queen Elizabeth's College, Leatherhead. Two other boys and a girl were sent to a Ministry of Labour Industrial Rehabilitation Unit in order to assess their capacity for employment or training.

"A specially interesting example of what can be done for the handicapped is that of a sixteen-year-old boy who had suffered for some years from severe asthma. Whilst in hospital his health was good but as soon as he was discharged to his own home the asthma returned with such severity that the doctors feared that he would not live unless he could be moved to a different environment. In co-operation with the hospital and the Health Department, arrangements were made for the boy to be admitted to the Enham-Alamein Village Settlement at Andover. Letters from the boy to his parents and also from the Welfare Officer at the Settlement show that he has settled down very happily in the carpentry workshop and that his health is greatly improved.

"During the year a survey was made of the employment histories of 86 young people (50 boys and 36 girls) aged between 15 and 22 years who were handicapped by total or severe partial deafness. In spite of the rather unfavourable employment position in the City this enquiry showed that 72 of the 86 were in employment and of the remaining 14 only nine (seven boys and two girls) were available for work but unemployed. An

encouraging degree of stability in employment was shown in that of the group, 46 were in employment which they had held for at least twelve months and of these, 21 had held their post for over three years.

"Much time and care is exercised in finding suitable openings for deaf school leavers and there is very close co-operation between the School for the Deaf and the Bureau, as well as with the Deaf Missioner and his staff.

"The evening classes for deaf students recently started by the Education Committee seem to be greatly appreciated by those deaf boys, girls and others who are attending in increasing numbers."

Appendix A.

MINISTRY OF EDUCATION

MEDICAL INSPECTION AND TREATMENT RETURN FOR THE YEAR ENDED 31st DECEMBER, 1959

Number of pupils on registers of maintained primary and secondary schools (including nursery and special schools) in January, 1960 as in Form 7, 7M and 11 Schools ... 132,464

PART I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		SATISFACTORY		UNSATISFACTORY	
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2 (6)
(1)	(2)	(3)	(4)	(5)	(6)
1955 and later	978	947	96·8	31	3·2
1954	6,293	6,262	99·5	31	0·5
1953	6,782	6,734	99·3	48	0·7
1952	1,288	1,276	99·1	12	0·9
1951	310	310	100·0	—	—
1950	11,357	11,161	98·3	196	1·7
1949	573	565	98·6	8	1·4
1948	8,822	8,693	98·5	129	1·5
1947	4,568	4,498	98·4	70	1·6
1946	444	443	99·8	1	0·2
1945	6,624	6,528	98·6	96	1·4
1944 and earlier	4,577	4,543	99·2	34	0·8
TOTAL ...	52,616	51,960	98·75	656	1·25

TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS.
(Excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1955 and later	7	124	116
1954	130	1,252	1,226
1953	124	1,222	1,200
1952	30	362	318
1951	26	292	221
1950	1,001	2,419	2,915
1949	55	481	390
1948	1,060	1,999	2,607
1947	552	1,333	1,506
1946	51	511	413
1945	1,114	1,421	2,148
1944 and earlier	792	1,040	1,544
TOTAL ...	4,942	12,456	14,604

TABLE C.—OTHER INSPECTIONS.

Number of Special Inspections	...	38,498
Number of Re-inspections	...	65,422
TOTAL	...	103,920

TABLE D.—INFESTATION WITH VERMIN.

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	...	451,689
(b) Total number of individual pupils found to be infested	...	...	15,911
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	...	...	3,815
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	...	...	209

PART II

DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR.

TABLE A.—PERIODIC INSPECTIONS.

Defect Code No.	DEFECT OR DISEASE	PERIODIC INSPECTIONS							
		Entrants		Leavers		Others		TOTAL	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4	Skin ...	123	219	143	168	215	369	481	756
5	Eyes—								
	(a) Vision ...	291	299	1,906	526	2,745	1,237	4,942	2,062
	(b) Squint ...	859	297	481	165	1,370	366	2,710	828
	(c) Other ...	35	38	26	26	87	87	148	151
6	Ears—								
	(a) Hearing ...	129	124	162	90	306	267	597	481
	(b) Otitis Media ...	74	244	54	162	120	333	248	739
	(c) Other ...	23	102	21	59	50	282	94	443
7	Nose and Throat ...	449	1,272	206	517	624	1,612	1,279	3,401
8	Speech ...	190	376	50	103	285	363	525	842
9	Lymphatic Glands	14	407	4	99	13	292	31	798
10	Heart ...	44	407	35	336	96	723	175	1,466
11	Lungs ...	197	825	108	453	389	1,322	694	2,600
12	Developmental—								
	(a) Hernia ...	37	104	4	24	29	106	70	234
	(b) Other ...	15	83	20	123	66	373	101	579
13	Orthopaedic—								
	(a) Posture ...	13	45	32	100	55	184	100	329
	(b) Feet ...	294	380	217	317	492	564	1,003	1,261
	(c) Other ...	131	249	65	125	178	296	374	670
14	Nervous System—								
	(a) Epilepsy ...	29	21	19	32	49	76	97	129
	(b) Other ...	23	70	37	70	84	269	144	409
15	Psychological—								
	(a) Development ...	128	72	602	138	1,962	498	2,692	708
	(b) Stability ...	19	88	41	54	104	187	164	329
16	Abdomen ...	72	463	41	182	134	709	247	1,354
17	Other ...	62	289	93	308	327	724	482	1,321

TABLE B.—SPECIAL INSPECTIONS

Defect Code No. (1)	DEFECT OR DISEASE (2)	SPECIAL INSPECTIONS	
		Pupils requiring Treatment (3)	Pupils requiring Observation (4)
4	Skin	2,439	48
5	Eyes—		
	(a) Vision	727	227
	(b) Squint	374	83
	(c) Other	2,408	13
6	Ears—		
	(a) Hearing	91	71
	(b) Otitis Media	47	64
	(c) Other	1,352	31
7	Nose and Throat	188	294
8	Speech	170	161
9	Lymphatic Glands	6	73
10	Heart	14	144
11	Lungs	57	180
12	Developmental—		
	(a) Hernia	2	17
	(b) Other	12	36
13	Orthopaedic—		
	(a) Posture	12	19
	(b) Feet	88	79
	(c) Other	51	58
14	Nervous System—		
	(a) Epilepsy	18	18
	(b) Other	28	71
15	Psychological—		
	(a) Development	326	195
	(b) Stability	63	56
16	Abdomen	22	124
17	Other	20,447	203

PART III

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

TABLE A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ...	2,450
Errors of refraction (including squint)	10,290
TOTAL ...	12,740
Number of pupils for whom spectacles were prescribed ...	6,777

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases known to have been dealt with
Received Operative Treatment—	
(a) for diseases of the ear	97
(b) for adenoids and chronic tonsillitis	344
(c) for other nose and throat conditions	70
Received other forms of treatment	1,441
TOTAL ...	1,952
Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1959	16
(b) in previous years	239

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments ...	2,489
(b) Pupils treated at school for postural defects	—
TOTAL ...	2,489

TABLE D.—DISEASES OF THE SKIN.
(Excluding uncleanness, for which see Table D of Part I.)

									Number of cases known to have been treated
Ringworm—									
(a)	Scalp	...	...	...	...	...	...	...	3
(b)	Body	...	...	...	...	...	...	...	15
Scabies		...	...	...	...	...	...	...	166
Impetigo		...	...	...	...	...	...	...	478
Other skin diseases		...	...	...	...	...	...	...	1,715
TOTAL									2,377

TABLE E.—CHILD GUIDANCE TREATMENT.

				Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	...	...	...	932

TABLE F.—SPEECH THERAPY.

				Number of cases known to have been treated
Pupils treated by speech therapists	...	...	...	372

TABLE G.—OTHER TREATMENT GIVEN.

									Number of cases known to have been dealt with
(a)	Pupils with minor ailments								20,296
(b)	Pupils who received convalescent treatment under School Health Service arrangements								940
(c)	Pupils who received B.C.G. vaccination								9,381
(d)	Other than (a), (b) and (c) above.								
	Please specify:								
	Heart	...	...	...	...	...	...	...	103
TOTAL (a)—(d)									30,720

PART IV

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(1)	Number of pupils inspected by the Authority's Dental Officers:—							
	(a)	At Periodic Inspections	...	...	65,435	} TOTAL (1)	... 67,981	
	(b)	As Specials	...	...	2,546			
(2)	Number found to require treatment							48,699
(3)	Number offered treatment							37,795
(4)	Number actually treated							16,508
(5)	Number of attendances made by pupils for treatment, including those recorded at 11(h)							33,167
(6)	Half days devoted to:							
	(a)	Periodic (School) Inspection	...	...	486	} TOTAL (6)	... 4,448	
	(b)	Treatment	...	...	3,962			
(7)	Fillings:							
	(a)	Permanent Teeth	...	...	14,876	} TOTAL (7)	... 15,255	
	(b)	Temporary Teeth	...	...	379			
(8)	Number of Teeth filled:							
	(a)	Permanent Teeth	...	...	14,021	} TOTAL (8)	... 14,330	
	(b)	Temporary Teeth	...	...	309			
(9)	Extractions:							
	(a)	Permanent Teeth	...	...	7,356	} TOTAL (9)	... 20,867	
	(b)	Temporary Teeth	...	...	13,511			
(10)	Administration of general anaesthetics for extraction							10,548
(11)	Orthodontics:							
	(a)	Cases commenced during the year	...	...	...	...	772	
	(b)	Cases carried forward from previous year	...	...	...	...	214	
	(c)	Cases completed during the year	...	...	...	...	164	
	(d)	Cases discontinued during the year	...	...	...	...	13	
	(e)	Pupils treated with appliances	...	...	...	...	593	
	(f)	Removable appliances fitted	...	...	...	...	497	
	(g)	Fixed appliances fitted	...	...	...	...	96	
	(h)	Total attendances	...	...	...	...	3,524	
(12)	Number of pupils supplied with artificial teeth							271
(13)	Other operations:							
	(a)	Permanent teeth	...	...	2,074	} TOTAL (13)	... 2,074	
	(b)	Temporary teeth	...	...	—			

Appendix B.

LIVERPOOL EDUCATION COMMITTEE.

LIST OF SCHOOL CLINICS SHOWING THE TREATMENT CARRIED OUT INDICATED THUS—X

	Minor Ailments	Dental	Defective Vision	Ear, Nose and Throat	Orthopaedic	Paediatric	Speech	Child Guidance	Remedial Teaching
Balfour Institute	X								
Belle Vale	X	X							
Burlington Street.....		X							
Carnegie, Arrad Street		X							X
St. Anne's School, Christian Street							X		
Clifton Street, Garston	X	X	X	X	X		X		X
Croxteth	X	X							
Dingle House					X				
Dovecot	X	X	X	X			X		X
Everton Road	X	X	X	X	X				
Falkner Square (Child Guidance Centre)								X	X
Fazakerley	X	X							
Harper Street	X		X						
High Park Street	X								
Mill Road (Everton)		X							
Norris Green	X	X	X	X			X		
North Corporation	X		X	X					
Northumberland Street	X	X	X						
North Way		X							
Old Swan	X								
Speke	X	X							
Sugnall Street	X	X		X		X			
15/17, Upper Parliament Street ...		X							
Walton	X	X	X		X		X		X
264, Westminster Road		X							
Westminster Road Congregational Church Hall	X								
TOTAL	17	17	8	6	4	1	5	1	5