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Contributors

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WORCESTERSHIRE COUNTY COUNCIL
KIDDERMINSTER DIVISIONAL AREA

ANNUAL REPORT

ON THE WORK OF THE
SCHOOL HEALTH SERVICE

FOR THE YEAR

1962

COLIN STARKIE, M.D., M.R.C.S., L.R.C.P., D.P.H., B.Sc.
(Divisional School Medical Officer).

R. W. MARKHAM, B.A., M.B., B.Ch., D.P.H.
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STAFF.

As at December, 1962.

Divisional Medical Officer.

COLIN STARKIE, M.D., Ch.B., M.R.C.S., L.R.C.P. B.Sc., D.P.H.,

Deputy Divisional Medical Officer.

R.W. MARKHAM, B.A., M.B., B.Ch., D.P.H.

Assistant School Medical Officers, (Part - Time.)

KATHLEEN MARGARET CASH, M.B., Ch.B., D.Obst., R.C.O.G.,

PATRICK B. WILLIAMS, T.D., M.B., B.S.,

Ophthalmic Surgeon. (Part - Time.)

R.D. CALCOTT. M.B., B.S., D.O., (London.)

Medical Director Child Guidance Clinic. (Part - Time.)

J.J. GRAHAM, M.B., Ch.B., D.P.H.

Dental Surgeons.

ANNE PATRICIA O'REILLY, L.D.S., R.C.S.,

EDWARD NOEL O'REILLY, L.D.S. (Part - Time.)

ROSEMARY J. SAMMON, L.D.S.,

SCHOOL NURSES, etc.,Kidderminster Borough.

| | |
|---------------------|--|
| Mrs. S.M. Askew. | School Nurse and Health Visitor. |
| Mrs. H.R. Carter. | Dental Surgery Assistant. |
| Miss. A.W. Gaffney. | School Nurse and Health Visitor, (Part - time.) |
| Mrs. A.E. Hall. | School Nurse and Health Visitor. |
| Mrs. M. Smith. | School Nurse and Health Visitor. |
| Miss. M. Steward. | School Nurse and Health Visitor. |
| Miss. M.J. Thomas. | School Nurse and Health Visitor. |

Stourport, Bewdley and Wribbenhall.

| | |
|------------------------|----------------------------------|
| Miss. L.M. Cartwright. | School Nurse and Health Visitor. |
| Miss. B. Dunster. | School Nurse and Health Visitor. |
| Mrs. J.E. Parkes. | School Nurse and Health Visitor. |
| Miss. J. Yarnold. | Dental Surgery Assistant. |

Kidderminster Rural.

| | |
|--------------------|---|
| Miss. M.A. Buck. | School Nurse, Health Visitor, District Nurse and Midwife. |
| Mrs. J.D. Deeming. | School Nurse, Health Visitor, District Nurse and Midwife. |
| Miss. F. Lewis. | Dental Surgery Assistant. |
| Miss. D.M. Strong. | School Nurse, Health Visitor, District Nurse and Midwife. |
| Mrs. A.M. Towers. | School Nurse, Health Visiting, District Nurse and Midwife. |

Tenbury Rural.

| | |
|--------------------|---|
| Mrs. F.A. Allen. | School Nurse, Health Visiting, District Nurse and Midwife. |
| Mrs. A.J. Tyman. | School Nurse, Health Visiting, District Nurse and Midwife. |
| Miss. U.M. Watson. | School Nurse, Health Visiting, District Nurse and Midwife. |

(7)

ORTHOPAEDIC SISTER.

Mrs. K.J. Johnson.

TUBERCULOSIS HEALTH VISITOR (Part - Time.)

Miss. A.W. Gaffney.

SPEECH THERAPISTS (Part - Time.)

Miss. D.M. Edwards.

Miss. R. Bourke.

Mrs. D.A. Stone.

CLERICAL STAFF.

Miss. M.M. French

Chief Clerk.

Miss. V.J. Hunt.

Assistant Clerk.

Miss. K.D. Oakley.

Assistant Clerk.

Miss. V.J. Salmon.

Assistant Clerk.

Mrs. E.M. Walton.

Assistant Clerk.

(8)

From the Kidderminster Divisional Medical Officer.

The work of the School Health Service is to prevent or alleviate immediate distress, sickness or physical disability, and also to work for the future of our children which is being laid down now.

The outstanding problems to be dealt with are :-

Social stability, both in the home and in the Community.

Lack of sufficient good houses and schools.

Smoke grimed atmosphere which we must eventually clean up.

Control of the cigarette smoking habit which, if unchanged will bring about the premature death of thousands of individuals now passing through our schools.

Dental disease which is causing so much illhealth and pain, and which would be largely prevented by making good any fluoride deficiency in the water supply.

These problems which are discussed in some detail in the body of the report, will take many years to solve, but if we can continue to rely upon the more enlightened and progressive members of the community, the time when everyone may benefit from the application of Medical research will be shortened.

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Throughout the year the Divisional Area has received very willing help from the County Medical Officer, and friendly co-operation from the Teaching Staffs in the Division's Schools.

We wish to thank all those who have assisted us in any way to further the good health of the school children.

My personal thanks are given to the Divisional Medical Office Staff, and to all the Health Visitors for their cheerful and willing help during a very busy year.

COLIN STARKIE.

Divisional Medical Officer.

THE DIVISION'S SCHOOL POPULATION.

There are about $11\frac{1}{2}$ thousand school children in the Division, which is the same number as last year.

As in previous years, three groups of these children have been examined routinely, i.e. at ages 5 years, 11 years and 14 years.

MEDICAL INSPECTIONS.

There were 3,722 children who had a Routine Periodic Inspection, and 727 were found to require treatment, i.e. 19% of those inspected.

760 children had a Special Inspection, i.e. other than a Routine Periodic Inspection, and 357 or 47% of these children required treatment.

Altogether, over 1,000 children were found on inspection to require treatment.

Many of the conditions found were treated at an earlier date than if no medical inspections had been held, and were completely cleared up with a minimum of delay.

AUDIOMETRY.

During the latter half of 1962, routine testing of children's hearing has been in progress for the first time in the Division. A portable transistor audiometer has been used for Sweep Testing and a mains powered audiometer has been used in the follow up clinic. Because of insufficient time the tests have been limited to children under 12 years old.

So far, 821 pupils have been examined of whom 55 failed the sweep test. 28 children were referred for a retest at a later date and 30 were referred to the Aural Clinic.

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At the Aural Clinic 74 children were examined of whom 28 showed no hearing loss; 24 were referred for treatment, and 7 will be seen by the Aural Consultant when arrangements can be made for him to hold a Clinic session at the Welfare Centre.

Sweep Tests.

| Total No. Tested. | Failed. | | Total. | Already having treatment. | Doubtful Result. For Retest later. | Difficult to test. For Retest later. | Referred to Aural Clinic. |
|-------------------------|-------------|---------------|--------|---------------------------------|--|--|------------------------------------|
| | One Ear. | Both Ears. | | | | | |
| 821 | 19 | 36 | 55 | 1 | 15 | 13 | 30 |

Aural Clinic.

| Audiometric Examinations. | | | Referred for | Recall | No. |
|---------------------------|---------|---------------|--------------|---------------|--------------------|
| Examined. | Passed. | Failed. | Treatment. | to Clinic. | Further Action. |
| 74 | 28 | 43 + 3 Rx. | 24 | 18 | 25 |

COLOUR BLINDNESS.

Throughout the year, children at the 11 year and 14 year old routine examinations have been tested with the Ishihara Colour Charts for colour recognition.

Of those examined, 59 boys and 2 girls showed some degree of colour recognition deficiency.

This preponderance of colour blindness in boys as compared with girls is in keeping with other investigations into colour blindness in other areas.

Because such a colour recognition deficiency may make the performance of some jobs impossible or dangerous, a letter explaining this is sent to the parents of each child who is colour blind.

So far there does not appear to be any available standards of colour recognition below which certain jobs cannot be undertaken.

CHILDREN'S TEETH.

Once more, attention is drawn to the work of the School Dental Service which is constantly waging a losing battle to save children's teeth.

10,120 children were inspected in the Division and 7,383 were found in need of dental attention.

The results of making up the Fluoride Deficiency in the water supplies of Watford, Kilmarnock and Anglesey were published during the year, and fully confirmed the advantages of such a measure shown in America for millions of people during the last 25 years.

The addition of fluoride in these areas has caused up to 64% reduction in dental decay in children and a corresponding improvement in dental hygiene carried on into adult life.

After the most extensive researches by medical teams all over the world on no occasion has the addition of fluoride (which is a natural constituent of many water supplies) been shown to cause any harm whatsoever. These statements are based on the findings reported by the Ministry of Health's Research Unit, and by the World Health Organisation.

We can only wonder at the tardiness which is now causing us to hold back from taking a so obvious, safe and cheap measure of protecting our people's teeth.

PREVENTIVE MEASURES.

Preventive inoculation against six very serious infectious diseases is now so well established that we tend to overlook the benefit it gives to our children.

These often fatal or seriously crippling diseases are diphtheria, poliomyelitis, smallpox, tuberculosis, tetanus, and whooping cough.

Before preventive inoculation was introduced, diphtheria killed nearly 3,000 people annually. In 1962, only one died from this disease.

Before poliomyelitis inoculations were introduced, as many as 6,300 cases annually occurred. In 1962, only 270 were notified.

Before vaccination was used, smallpox attacked the greater part of the population and many thousands died annually. Now if we have a dozen cases with half as many deaths there is a national crisis and the disease is stamped out in weeks.

Thirty years ago tuberculosis killed about 14,000 young people annually. Now in the age group, 15 - 30 year olds, less than 100 die from this disease each year.

Tetanus or Lock Jaw is always a danger following accident or injury but is being prevented by routine inoculation of children.

Whooping cough was a serious killing and debilitating illness of children before immunisation against it was carried out, but now it has lost much of its danger in immunised children.

Although these preventive measures are now recognised as saving thousands of lives and much severe crippling, yet there was great opposition and much delay before they were accepted.

The 'anti-societies' brought out all kinds of strange arguments as to why these measures should not be used, and showered members of local authorities with pamphlets containing dire threats of injury if the doctors were allowed to treat the public with these preventive measures. Luckily for everyone, the truth prevailed with the immense benefit of preventive measures that we now enjoy, not however, before many thousands of individuals, - not protected - had died due to the delay caused by the 'anti-groups'.

The same 'anti-group' mentality is still operating all over the world and has succeeded in slowing down the adoption of making good the fluoride deficiency in water supplies, thus depriving whole communities of the one simple, cheap, natural measure which would so greatly improve dental health.

TUBERCULOSIS.

There are only 14 children in the schools notified as having tuberculosis.

This is a great improvement on the condition of say 25 years ago, when in the Kidderminster Borough alone with a school population of only 3,600 there were 27 cases in the schools. At about that time there were 19 new notifications each year.

Several measures have brought about this great and continuing improvement, but the chief credit goes to improved medical treatment, heat treatment of milk, B.C.G. Vaccination, improved social conditions and the strenuous work of the Tuberculosis preventive services, including the work of the Miniature Mass Radiography Units.

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B.C.G. Vaccinations in the Division.

The Tuberculin Testing and B.C.G. Vaccinations have continued and included a private Convent School.

1,077 school children were offered this service and 87.2% accepted.

| No. Offered B.C.G. | % Accepted. | Of those Accepting % T.T. Positive. | No. Vaccinated. |
|--------------------|-------------|--|--------------------|
| 1,077 | 87.2 | 4.6 | 865 |

IMMUNISATION AGAINST DIPHTHERIA.

The number of school children immunised for the first time or given re-inforcing doses is shown in the following table :

| Immunised for the first time. Age 5 - 15 years. | Booster Doses. |
|--|-------------------|
| 185 | 1,420 |

SMOKING.

'Cigarette sales back to pre-scare levels' and 'Cigarette Manufacturers estimate that smoking has at last beaten the Cancer warnings', So read the newspaper headlines for early January, 1963, i.e. just 8 months after the report by the Royal College of Physicians which so clearly showed how dangerous cigarette smoking is.

During the year cigarette smoking has caused the deaths of many people - 23,700 died of lung cancer and many thousands died of bronchitis, made much worse by smoking.

When we consider these facts and the above headlines we may well wonder what has beaten who, and wherein the victory lies?

With the present trend the forecast is that approximately 27,000 men and 5,000 women will die of lung cancer in 1970, and the total lung cancer deaths for the years 1962 to 1970 inclusive, will be about 250,000.

$\frac{3}{4}$ of the men smoke cigarettes.

1 in 8 of men smoking heavily die of lung cancer.

We have nearly 6,000 boys in our schools in the Kidderminster Area.

Simple arithmetic shows that if these boys continue the smoking habit as their fathers now do then about 500 of them will die prematurely of lung cancer !

Is there nothing we can do to stop this shocking and totally unnecessary loss of life ?

Must the hoardings, magazines and television screens go on plugging advertisements for the joys of cigarette smoking without let or hinderance, while so many cigarette victims are coughing themselves into eternity ?

When will those responsible for the Country's health realise the seriousness of cigarette smoking and take the most important and logical action of banning widespread cigarette advertising.

On only five occasions during the year has there been an opportunity to enter into discussion with groups of young people interested in the subject.

The Ministry of Health has issued a series of notices calling attention to the dangers of cigarette smoking, and these notices have been circulated to all schools in the Division, and to Offices, Departments, and Welfare Officers.

HEALTH EDUCATION.

This important side of the School Health Service has occupied much of the School Nurses time in routine teaching of health subjects and also in discussions with various groups.

In addition to routine health talks, the following special talks have been given by the Medical Officers.

Discussion with Women's Electrical Association on the National Health Service.

Panel of young people at the Knoll Private School - Health Questions.

Talks on 'Personal Relationships' To Harry Cheshire Modern Secondary Girls, and Sladen Modern Secondary Mixed Schools.

'Personal Relationships' discussion at Shenstone Training College.

Film 'Brother for Susan' shown to Parents at High School, and later shown to School Entrants.

Resuscitation Film 'That they may live' shown to First Aid Group.

Brains Trust Panel at Sladen Parents-Teachers Association Meeting.

Halesowen Modern Secondary School Parents-Teachers Association, discussion on 'Danger of Smoking'.

Talk to King Charles Senior Grammar School Boys - 'Health and Smoking'.

Discussion with Young Liberals Group - Health Subjects.

Talk to Parents of Mentally Handicapped Children.

Lectures to Pupil Midwives on General and School Health Services.
Discussion with Young Farmers Club at Tenbury - 'Health Subjects'.

Discussion with Students of College of Further Education on 'Dangers of Smoking'.

Talk to Kasedrian Society, Kidderminster on 'Health and Hygiene'.

The Divisional Nurses and Medical Officers attended the interesting and useful Refresher Course of Lectures, organised by the County Medical Officer's Department in April.

Several of the Health Visitors take special groups, e.g. at Ante-Natal Clinics and show filmstrips and organise discussions on health subjects.

SEX EDUCATION.

With an increasing number of illegitimate babies born each year (over 35,000 in 1962) and with many more cases of Venereal Diseases discovered in young people, and with such a large number of marriages being dissolved, the necessity for 'Personal Relationship' discussions is ever more urgent.

In the Harry Cheshire Girls Secondary Modern School and in the Sladen Mixed Secondary Modern School, such discussions between the senior forms and a Minister, a School Nurse and the Divisional Medical Officer have taken place.

At these discussions the film strip 'Human Reproduction' and the film 'A Brother for Susan' are shown.

Searching questions, vital to the understanding of our physical make up, and to the structure of society are always asked, and answered as plainly as possible.

Apart from normal relationships the youngsters demand to know about prostitution, homosexuals, venereal disease, and abnormalities of pregnancy and infants.

During these discussions, emphasis is laid on the sanctity of the body, the responsibility of marriage, social responsibilities of sex, and the overwhelming advantages and happiness of family life within the accepted conventions of society.

With these discussions now being held at Sladen Mixed School, the boys are having an opportunity of knowing something about 'Personal Relationships' for the first time on an organised basis in this Area.

For these discussions the boys and girls are taken in separate groups in order to remove any natural embarrassment and to help in free and easy discussion.

From the questions asked by these young people it is evident there are many vital things they want to know. One can only wish that not only these few at these two schools, but that all the young people in the area could have the opportunity of straight plain discussion on the subject of Personal Relationships.

BED WETTING.

This condition which has many causes both physical and psychological is a source of much distress to parents and children.

It would appear that many children sleep so very deeply that they are not aroused by a full bladder, and so wet the bed quite unconsciously.

In order to help these children, an alarm bell apparatus, which rings as soon as the child begins to urinate, was developed. Several of these bells have been in use in the Kidderminster Division since 1959, supervised, either by the School Health Department or the Child Guidance Clinic.

The position up to the end of 1962 is as follows :

Total Children referred to School Health Service Clinic is 109.
78 boys and 31 girls.

During the period 1959 - 1963 many parents have removed from the Area, or otherwise have not responded to a request to attend the Enuretic Clinic.

However, 65 children were treated - 48 boys and 16 girls.

In one case the apparatus was loaned to a family doctor and the sex of the patient is not known to the School Medical Officer.

Bell Apparatus was loaned to 46 boys,
and 15 girls.
and to one child of unknown sex.

Two boys and one girl gained control without the use of the bell apparatus, after an interview with the School Medical Officer.

Results.

The apparatus was loaned to 62 children, - 3 had it for a second time.

42 children were reported to have stopped bed wetting entirely.

6 children were said to have improved considerably.

10 children continued to wet the bed.

4 children - results unknown.

Analysis of the 10 failures - 7 boys and 3 girls.

- | | |
|-------------------|--|
| 1. Boy 9 years. | Epileptic and on sedatives. |
| 2. Boy 12 years. | Never wakes when bell rings. |
| 3. Boy 9 years. | Apparatus interfered with and put out of order several times. |
| 4. Boy 8 years. | Sleeps through bell; parents will not get him up. |
| 5. Boy 9 years. | Little co-operation from parents who say apparatus is 'No Good'. |
| 6. Boy 9 years. | No reason elicited for lack of success. |
| 7. Boy 6 years | Bell loaned on 2 separate occasions - boy sleeps through bell. |
| 8. Girl 11 years. | No reason elicited for lack of success. |
| 9. Girl 9 years. | Apparatus has no effect. |
| 10. Girl 9 years. | Enuresis commences when apparatus is not used. |

The Psychiatric Social Worker reports on 20 children who have used the bell apparatus supplied by the Child Guidance Clinic.

There were 14 successes and 6 failures.

The reasons for the failures are as follows -

- 1 and 2 because of incompetent management of the machine.
3. because the boy developed a machine phobia.
4. because the girl was at a boarding school and school holidays did not prove long enough for her to become dry with the help of the machine.
5. because the machine failed to awaken the child.
6. because the child just continued to wet the bed.

FEET AND FOOTWEAR.

Due to changes in the Medical Staff the full examination of all children's feet and footwear has not taken place throughout the whole Division, all the year round, so definite figures cannot be given to show the condition of the children's footwear.

However, it is still very evident that many teenage girls are wearing shoes inadequate in size and design, and as a consequence are developing bunions, corns and hammer toes.

It has been noted that many of the pointed toe shoes have been sufficiently long and soft so as to cause no undue toe overcrowding.

Parents often realise the necessity of correct shoe size and design, but the youngsters and the shoe fashion designers frequently make it almost impossible to buy natural fitting shoes.

VERRUCAE PEDIS (Contagious warts on the feet.)

During the year, 88 children suffered from Verrucae, of whom 83 were treated by the School Health Service, and 5 by their family doctors.

77 occurred in 6 senior schools, and
11 in the junior schools.
68 girls and 20 boys were effected.

This disease is caused by a virus picked up from an infected surface, and therefore, is spread by barefoot work, and by the exchange of footwear.

In spite of recommendations to the contrary, both the above practices continue in some schools, with the consequence outlined above.

INFESTATION WITH VERMIN.

In 11, 453 pupils there were 250 individual children found with some degree of infestation.

This is the lowest figure ever recorded in the area and may represent the hard core of neglectful or careless parents who are too apathetic or ignorant to look after their children properly.

That this figure is so low indicates how vigorously the School Health Nurses have worked.

To eradicate head lice completely it has been decided that statutory action will be taken in those cases of recurring infestation, where repeated warnings have been ignored.

REMOVAL OF TONSILS.

The number of children having tonsillectomy has increased to 253 in the year, i.e. up to 7.6% of those examined. This is probably due to alteration of staffing at the E.N.T. Department, where previously, because of staffing shortages, a long waiting list for operation has been growing.

PSYCHIATRIC CLINIC.

98 new cases attended during the year.

MALVERN OPEN AIR SCHOOL.

We were allocated 54 places for Divisional Children, each to stay a term at the Open Air School.

There for 12 weeks they enjoyed the clean fresh air and the kindly disposition of the School's Staff, and always showed an improvement in health which was lasting.

We do appreciate the work of the School Staff for all the help they give these children and we welcome all the places given to Divisional Children.

ROTARY BOYS' HOME, WESTON - SUPER - MARE.

The generosity of the Kidderminster Rotary Club was extended to 20 boys during the year, when they were given a fortnight's holiday at the Rotary Boys' Home, Weston - super-Mare.

These boys are from families who could not give them a holiday.

CHILDREN AND YOUNG PERSONS ACT. EMPLOYMENT OF CHILDREN.

189 children were examined prior to their employment. Unless they were adequately clothed, wore good shoes, and were generally clean, and had clean teeth, the certificate for employment was withheld, usually a temporary measure only.

STUDENT TEACHERS ETC.,

62 teachers and student teachers were medically examined and X-rayed before taking up new appointments or entering training colleges.

HANDICAPPED PUPILS - POSITION - 31st. JANUARY, 1963.

| Category. | On Register. | Incidence per 1,000 school population. | No. at Special Schools. | No. at Ordinary Schools. | Not at school, (Under age or Excluded or Receiving Home Tuition. | No. awaiting Admission to Special School. |
|---------------------------|--------------|--|-------------------------|--------------------------|--|---|
| Blind. | 1 | .08 | 1 | - | - | - |
| Partially Sighted. | 3 | .26 | 1 | 2 | - | - |
| Deaf & Partially Deaf. | 25 | 2.1 | 12 | 13 | - | - |
| Delicate. | 3 | .26 | - | 3 | - | - |
| Diabetic. | 3 | .26 | 2 | 1 | - | - |
| Physically Handicapped. | 40 | 3.4 | 7 | 30 | 3 | 1 |
| Educationally Sub Normal. | 80 | 7.0 | 26 | 53 | 1 | 54 |
| Epileptic. | 11 | .95 | 3 | 5 | 3 | - |
| TOTAL. | 166 | 14.4 | 52 | 107 | 7 | 55. |

SCHOOL CLINICS.

The School Clinics now established at Stourport and Kidderminster continue to function regularly. The Central Clinic in Kidderminster is used weekly as follows :

| Monday. | Tuesday. | Wednesday | Thursday. | Friday. | Saturday. |
|---|--|---|------------------------------|--|--------------------------------|
| A.M. School Clinic. 9 - 9.30. Special Consult- a tions. | School Clinic. 9 - 9.30. Special Consult- ations. Psychiatric Clinic. Speech Therapy. | School Clinic. 9 - 9.30. Special Consult- ations. Chiropody Service. Speech Therapy. | School Clinic. 9 - 12. | School Clinic. 9 - 9.30. Speech Therapy. Audiometric Clinic. | Special Consult- ations. |
| P.M. Ante- Natal Clinic. | Special Consult- ations. Psychiatric Clinic. Speech Therapy. | Sewing Class. Family Planning Clinic. Chiropody Service | Infant Welfare Clinic. | Speech Therapy. Ophthalmic Clinic. Chiropody Service. | |

Dental Sessions are held mornings and afternoons daily.

The Clinic is also used occasionally on weekday evenings and Sunday afternoons by :

The Blood Transfusion Unit.

The Lip Reading Classes.

The Red Cross Society.

and every Monday afternoon by the Dudley Mass Radiography Unit.

Mitton Street Clinic, Stourport is used by the Chiropody Service on two sessions a week.

SCHOOLS IN THE KIDDERMINSTER DIVISIONAL AREA.Number on Registers for the Quarter - December, 1962.BOROUGH OF KIDDERMINSTER.Grammar Schools.Number on Registers.

| | |
|---------------------|-----|
| Kidderminster High. | 541 |
| King Charles I. | 428 |

| | |
|--------|-----|
| Total. | 969 |
|--------|-----|

County Secondary Schools.

| | |
|---------------------------|-----|
| The Harry Cheshire Boys' | 737 |
| The Harry Cheshire Girls' | 570 |
| The Sladen Secondary. | 472 |

| | |
|--------|-------|
| Total. | 1,779 |
|--------|-------|

Primary Schools.

| | |
|--------------------------|-----|
| Lea Street Mixed. | 277 |
| Proud Cross. | 326 |
| Foley Park. | 346 |
| St. Mary's Junior. | 154 |
| St. Mary's Infants. | 140 |
| St. George's Mixed. | 162 |
| St. George's Infants. | 94 |
| St. John's Mixed. | 169 |
| St. John's Infants. | 140 |
| Broadwaters. | 76 |
| New Meeting. | 182 |
| Birchen Coppice Infants' | 197 |
| Birchen Coppice Junior. | 373 |
| Franch C.E. | 50 |
| Franch C.P. | 283 |
| St. Ambrose's Mixed. | 335 |
| St. Ambrose's Infant's | 201 |
| Comberton Infants' | 95 |
| Comberton Junior. | 271 |

| | |
|-------|-------|
| Total | 3,871 |
|-------|-------|

KIDDERMINSTER RURAL DISTRICT.County Secondary School.Number on Registers.

Sion Hill.

576

Primary Schools.

Chaddesley Corbett Mixed.

55

Trimpley.

35

Stone.

67

Upper Arley.

54

Wolverley.

147

Cookley.

229

Blakedown.

101

Far Forest

122

Rock.

25Total. 1,411BOROUGH OF BEWDLEY.

Bewdley County Secondary.

342

Bewdley Junior.

157

Wribbenhall C.P.

120

Wribbenhall C.E. Infants'

89Total 708STOURPORT URBAN DISTRICT.

Areley Kings

140

Stourport County Secondary

1 005

Stourport Junior Mixed.

573

Stourport Infants'

236

Upper Mitton.

60

Wilden All Saints.

92Total 2,106

TENBURY RURAL DISTRICT.Number on Registers.

| | |
|---------------------|------------|
| Bayton. | 58 |
| Bockleton. | 5 |
| Eastham and Hanley. | 48 |
| Knighton on Teme. | 34 |
| Lindridge. | 47 |
| Pensax. | 33 |
| Stoke Bliss & Kyre. | 19 |
| Tenbury Infants' | 83 |
| Tenbury Junior | 119 |
| Tenbury Secondary. | <u>196</u> |

Total 642

SUMMARY.

| | |
|-------------------------------|--------------|
| Kidderminster Borough. | 6,619 |
| Kidderminster Rural District. | <u>1,411</u> |
| Bewdley Borough. | 708 |
| Stourport Urban District. | 2,106 |
| Tenbury Rural District. | <u>642</u> |

GRAND TOTAL, 11,486

