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NORTH RIDING OF YORKSHIRE
COUNTY COUNCIL

SCARBOROUGH
DIVISIONAL EXECUTIVE

REPORT
OF THE
DIVISIONAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1961





Report

of the Divisional School Medical Officer
for the year 1961

The Chairman and Members of Scarborough Divisional Executive

MADAM CHAIRMAN, LADIES AND GENTLEMEN,

My Report for 1961 shows that the work of the School Health Service has continued to cover the same ground with the same sort of results as in the past. It shows, too, that the two main deficiencies in the Service, the lack of adequate nursery school places and the lack of proper provision for the education of high grade subnormal children, to which I drew attention last year, continue to exert their baneful influence.

The statistics of the School Health Service show that over the post-war years the physical condition of children has improved markedly, the main source of defects now being congenital defects and weaknesses (e.g. visual and orthopaedic defects). On the other hand, in emotional stability, social adaptation and character generally, there seems to be little or no improvement. The figures in the Report relating to verminous conditions are in reality a measure of the social standards in which the children of this area are being brought up. The inspection of school children and the treatment of those found to be verminous has merely kept the situation within bounds, as the Committee well knows, and has had no effect on the hard core of socially inadequate families.

As usual, I am indebted to a number of colleagues who have made contributions to the Report. They are Dr. Cameron, Mr. Nock, Miss Milbanke and Inspector White, and I offer them my best thanks. The nurses and school medical officers have worked in their usual conscientious way. I must mention particularly the clerical staff, Miss Clarke and Miss Claybourn who, after the resignation of Mr. Bassett, worked hard and well to keep the service functioning efficiently.

I am, Madam Chairman, Ladies and Gentlemen,

Your obedient servant,

W. G. EVANS,

Divisional School Medical Officer.

School Clinic,
Old Hospital,
Friars Way,
Scarborough.

September, 1962.

1. GENERAL.

The total number of pupils on the school registers in September, 1961 amounted to 7,461, a decrease of 124 when compared with last year's figure, whilst the number of Primary and Secondary Schools was 36, the same number as in the previous year.

(a) Number of Primary School Departments in the Division (excluding Childhaven Nursery School)	27
(b) Number of Secondary Modern Schools in the Division	6
(c) Number of Grammar and Technical Schools	3
(d) Number of pupils on the registers of Primary Schools (excluding Childhaven Nursery School)	4,110
(e) Number of children in Childhaven Nursery School	45
(f) Number of children in the Special Class at No. 9 Seamer Road	36
(g) Number of pupils on the rolls of Secondary Modern Schools	2,125
(h) Number of pupils on the rolls of Grammar and Technical Schools	1,145

2. STAFF.

(i) Medical Officers

W. G. Evans, M.A., M.B., B.Chir., D.P.H., Divisional School Medical Officer.

Elizabeth R. Cameron, M.B., Ch.B., D.P.H., School Medical Officer.

Elizabeth D. Ellison, B.A., Ch.B., Temporary School Medical Officer (part-time).

Sydney E. Jackson, M.B., Ch.B., Temporary School Medical Officer (part-time). (resigned 24th August, 1961).

(ii) Dental Surgeons

D. Bewes Atkinson, L.D.S., R.C.S.Eng. (part-time).

Mrs. S. R. Seaman, B.D.S.(London), L.D.S., R.C.S.Eng.

H. C. Morgan, L.D.S., R.C.S. Eng. (part-time).

R. Mackenzie, M.B., B.S., M.R.C.S., L.R.C.P., R.C.S. (part-time Dental Anaesthetist).

(iii) Specialist Officers (part-time)

*Ophthalmic Surgeon J. Ellison, M.R.C.S., L.R.C.P.

*Orthopaedic Surgeon G. S. Tupman, F.R.C.S.

*Psychiatrist C. H. Neville-Smith, M.B., D.C.H., D.P.M.

**By arrangement with Leeds Regional Hospital Board.*

(iv) **School Nurses**

Miss P. M. Bradley, S.R.N., S.C.M., H.V. Cert.
Miss I. M. Enna, S.R.N., S.C.M., Q.N., H.V.Cert.
Miss M. Ford, S.R.N., S.C.M., Q.N.
Mrs. M. M. Lowen, S.R.N., S.C.M., Q.N., H.V.Cert.
Miss I. M. Lumley, S.R.N., S.C.M., Q.N., H.V. Cert.
Miss B. Merryweather, S.R.N., H.V.Cert.
Mrs. H. Rowbotham, S.R.N., S.C.M., H.V.Cert.
Mrs. E. Sleight, S.R.N., H.V.Cert. (resigned 30th June, 1961).
Miss P. Uttley, S.R.N., S.C.M., H.V.Cert.
Mrs. P. Young, S.R.N., S.C.M., H.V.Cert.
Miss M. E. Bowes, S.R.N., O.N.C. (Clinic Nurse) (resigned 10th January, 1961).

(v) **Orthopaedic Nurse**

Miss B. D. Rowell, S.R.N., S.C.M., Orth. Cert. (part-time).

(vi) **Speech Therapist**

Miss A. Mawson, L.C.S.T. (resigned 30th September, 1961).

(vii) **Dental Attendants**

Mrs. M. Warner. (resigned 30th June 1961).
Mrs. N. E. Brett (part-time)
Mrs. M. Brewell (appointed 26th June, 1961).

(viii) **Clerks**

J. R. Bassett, B.Com. (Senior Clerk). (resigned 18th November, 1961).
Miss J. M. Clarke.
Miss M. Claybourn.

3. **MEDICAL INSPECTION OF PUPILS.**

The arrangements for periodic medical inspections at schools were the same as in previous years at primary schools, whereby new entrants to, and children in the 7—8 and 10—11 year age group were inspected. In regard to secondary schools, until the Autumn Term all pupils, except those in the first year, were inspected, but, following the resignation of one of the part-time school medical officers and the decision not to employ further assistance it was necessary to reduce the number of examinations. This was achieved by inspecting pupils in the first form who had not been examined for more than a year and all pupils in their final year at school. Such inspections were carried out in 25 primary and 8 secondary schools and also at the Technical College. Furthermore, all children at Childhaven Nursery School were inspected each term and those at Friarage Nursery Class twice during the year. Altogether a total of 4,353 inspections were made in 1961, being a decrease of 345 compared with the number made in the previous year.

Special inspections by the school medical officers amounted to 340 and re-inspections 704 as against 473 and 929 respectively in 1960.

4. FINDINGS AT PERIODIC MEDICAL INSPECTION

(a) The number of children found to require medical treatment was 601, representing 13.80% of those inspected. The following table shows the corresponding figures for previous years:—

Year	Number of Children	
	Inspected	Found to require treatment (excluding dental diseases and infestation with vermin)
1951	4071	486 (11.94%)
1952	4431	599 (13.52%)
1953	4069	511 (12.56%)
1954	4567	822 (18.00%)
1955	4667	731 (15.66%)
1956	4446	645 (14.51%)
1957	4613	525 (11.38%)
1958	4847	702 (14.48%)
1959	4280	664 (15.51%)
1960	4698	677 (14.41%)
1961	4353	601 (13.80%)

Details of the number of children requiring treatment, classified according to year of birth, are given in Table B of Part I of the Appendix to this report, and the actual defects or diseases in Table A of Part II.

(b) Physical Condition

Since 1956 the "physical" condition of pupils has been classified as either "satisfactory" or "unsatisfactory," whereas in previous years their "general" condition was graded as "Good," "Fair" or "Poor". From Table A of Part I of the Appendix, which gives the classification of "physical" condition according to year of birth, it will be seen that 79 (or 1.81%) of the 4,353 pupils subjected to routine medical inspection were considered to be "unsatisfactory." Findings in previous years were as follows:—

Year	Number of Pupils Inspected	General Condition		
		Good %	Fair %	Poor %
1951	4071	51.24	48.07	0.69
1952	4431	58.47	41.03	0.50
1953	4069	59.45	39.96	0.59
1954	4567	61.66	37.92	0.42
1955	4667	57.77	41.91	0.32
Physical Condition				
			Satisfactory	Unsatisfactory
1956	4446	—	97.71	2.29
1957	4613	—	97.85	2.15
1958	4847	—	97.79	2.21
1959	4280	—	97.66	2.34
1960	4698	—	97.47	2.53
1961	4353	—	98.19	1.81

(c) **Cleanliness**

As far as possible, the school nurses endeavour to inspect all pupils every term, and they follow up those who are infested. During the year they made 18,434 inspections and 263 pupils were found to be infested with nits and/or pediculi. This latter figure includes cases of children with only the odd nit, but some 17 were heavily infested. In the previous year 359 pupils were found to be infested.

The incidence of verminous conditions in schools is given in the following table which shows that this problem is not general to all schools. In fact more than one third of them were free from infestation, but in two of them were concentrated about one third of the total cases.

Percentage of Children Infested	No. of School Departments
Nil	15
Under 1	3
1-1.99	4
2-2.99	2
3-3.99	2
4-4.99	4
5-9.99	5
10-20	1
Over 20	2

(d) **Clothing and Footwear**

The following report was prepared by Dr. Cameron:—

“A larger proportion of children are found to be wearing unsuitable shoes. The use of pull-on styles is seen, even in the infant schools, and many wear shoes that are too short. The increasing use of synthetic materials for shoes and socks produces many problems in foot hygiene, and fosters blisters and corns.

At a time when many people tend to think there is no place or need for voluntary work in an all-providing Welfare State, we would again like to commend the work of the Scarborough Amicable Society. This body, which was founded in 1729 and is entirely dependent on voluntary subscriptions and donations, expended £297 in 1961 on the provision of boots and clothing. As in the previous year the Society concentrated its expenditure on the provision of clothing and footwear for Foundationers, of whom there were 16. No casual assistance was given during the year for children other than Foundationers, no requests for such assistance having been made to the Society”.

(e) **Following-up**

The school nurses attend inspections in schools and follow-up cases in which assistance or advice is needed, and 242 home visits were made in this connection.

5. TREATMENT OF DEFECTS.

(a) Minor Ailments

Minor Ailments Clinics were again held daily at the School Clinic and weekly at Hinderwell and Northstead Schools. The conditions for which children attended are given in the following table:—

Conditions for which children attended M.A. Clinics	No. of first visits	Total Attendances
Scabies	1	3
Impetigo	2	3
Ringworm—Head	—	—
„ —Body	—	—
Uncleanliness (including Verminous Conditions)	12	19
Minor Injuries	138	245
External Eye Disease	21	30
Ear Discharge and Deafness	31	87
Nose and Throat	5	7
Vision	—	—
Heart and Circulation	2	5
Skin (Non-contagious)	149	367
Other conditions	129	217
TOTAL	490	983

There was again a reduction in the number of children treated, as shown in the table below:—

Year	No. of First Visits	Total Number of Attendances
1951	1339	3605
1952	1344	3542
1953	1256	3082
1954	1160	2998
1955	1003	3016
1956	1020	2647
1957	896	1808
1958	745	1460
1959	710	1688
1960	538	1097
1961	490	983

(b) Defective Vision

Mr. J. Ellison, the ophthalmologist, continued to hold weekly sessions at the School Clinic, and all children at medical inspection who were considered to need treatment for defective vision or squint were given the opportunity of attending his clinic. A summary of the work done at this clinic is given on page 7, from which it will be seen that

spectacles were prescribed for rather less than half of the children examined:—

Number of sessions held by Ophthalmologist	....	47
Number of children examined	....	379
Total number of attendances at Eye Clinic	....	394
Number of children for whom spectacles were prescribed		164
Number of children recommended other forms of treatment		3

(c) Diseases of Ear, Nose and Throat

Pupils found at medical inspection to require treatment for impaired hearing, enlarged or diseased tonsils or adenoids, are normally referred to their family doctors, or, with the consent of their family doctors, direct to the Ear, Nose and Throat Consultant at Scarborough Hospital. During the year 285 school children received operative treatment at Scarborough Hospital for diseases of the ear, adenoids and chronic tonsillitis and other nose and throat conditions, and 9 received other forms of non-operative treatment.

Five school children were provided with Medresco Hearing Aids through the hospital service in 1961, whilst 19 other children still at school were issued with aids in previous years.

Audiometric Survey

Miss Ferris, the County Council's Audiometric Nurse, visited all schools in the Division for the purpose of testing children in the 6—7 year age group with the pure-tone audiometer.

Altogether, Miss Ferris tested 955 children, including a number referred specially by the school medical officers, and of these 33 failed the test. These failures were followed-up by the school medical officers and the parents given appropriate advice.

(d) Orthopaedic

Twenty-one sessions were held by the orthopaedic surgeon at which 233 school children made 370 attendances. The orthopaedic nurse treated 100 pupils at the remedial exercises clinic; altogether she held 94 sessions and the total number of attendances made by these children was 381.

Thirty-one pupils from this Division were treated as in-patients at the Adela Shaw Orthopaedic Hospital, Kirbymoorside, during 1961, for the conditions shown in the following table:—

<i>Condition</i>	<i>No. of children treated</i>
Deformity of foot	21
Deformity of hand	2
Poliomyelitis	1
Hemiplegia	1
Scoliosis	1
Asthma	1
Perthes Disease	1
Tuberculous bones and joints	1
Congenital dislocation of hip	1
Other conditions	1

(e) **Tuberculosis**

One case of non-pulmonary tuberculosis in the age group 5—14 years was reported during the year.

During the Autumn Term skin tests were carried out on 197 senior boys who were known to have been in contact with a case of pulmonary tuberculosis. Of these, 28 showed a positive reaction and were given chest X-ray examinations, satisfactory results being obtained in all cases.

(f) **Artificial Sunlight Treatment**

Attendances by school children at the Medical Baths for artificial sunlight treatment totalled 290, and 25 children completed one or more courses of treatment.

(g) **Dental Services**

There was no change in the dental staff during 1961, and in consequence it was again possible for adequate periodic inspections of school children in this area to be carried out. Particulars of the work undertaken by the school dental officers are given in Part IV of the Appendix.

6. **PHYSICAL EDUCATION.**

The following report on Physical Education in the Scarborough Division was prepared by Mr. Nock, the Divisional Education Officer:—

“The work in Physical Education in the Division has received the continued interest of both specialist and non-specialist teachers.

At the Residential Easter Course for teachers, held at the North Riding Training College, many Scarborough children were used for demonstration purposes, and, as a result, many new experiments in teaching physical education in the primary schools have been carried out with enthusiasm and good results. In three primary schools during the Spring Term modern physical education was demonstrated to students from the training College.

Rugby now plays an important part in the physical education of two of the boys' schools, one of which toured Wales, meeting teams from that area with great success. The semi-final was also reached in the Ilkley seven-a-side tournament.

Further interests in physical education have been introduced to many pupils now taking part in the Duke of Edinburgh Award Scheme. Amongst these activities are Judo, fencing, light-weight camping and hiking. All the schools catering for senior children are now taking part in the Scheme, and the Mayor and Mayoress of Scarborough kindly presented the awards and entertained the successful pupils and their parents at the Town Hall in October.

Swimming again played a large part in the schools' summer activities. The very inadequate facilities available were used to the full, but stress had to be laid on teaching non-swimmers to swim rather than

on training the swimmers to improve. This is unfortunate for the swimmers, but, whilst facilities are so limited, advanced training can only be given effectively at the North Riding Training College bath and there only for a very small number of selected pupils. In this connection, thanks are due to the Parent-Teacher Association of the Braeburn County Primary School, which, by its provision of an open-air swimming bath for that school, has made a notable addition to the schools' swimming facilities.

Life-saving classes continued with success, mainly after school time, and thanks are due to Mrs. Flax, Mr. Claydon, the R.L.S.S. examiners, especially Mr. Bedford, and to all the teachers who have given so liberally of their time. The Rachel Brown Life Saving Shield presented to the school in the North East of England with the best record of Life Saving Awards, was again won by a Scarborough school.

Pupils have taken part in the North Riding Schools athletic, swimming, tennis, hockey, netball, cricket and football tournaments".

7. INFECTIOUS DISEASES.

Notifications of infectious diseases among children between the ages of 5—14 years (inclusive) in the Divisional Area were as follows:—

Measles	....	....	....	....	479
Whooping Cough	....	....	....	....	16
Scarlet Fever	....	....	....	....	4
Pneumonia	....	....	....	....	1
Dysentery	....	....	....	....	2
Tuberculosis (Non-Pulmonary)	....	....	....	....	1

8. SCHOOL MILK AND MEALS.

The following table, supplied by the Divisional Education Officer, shows the position as on a day in the Autumn Term between 21st and 25th September, 1961:—

Percentage of children provided with meals in Rural Schools	....	....	....	....	72.33
Percentage of children provided with meals in Scarborough Schools	....	....	....	....	58.73
Percentage of children provided with milk in Primary Schools	....	....	....	....	91.42
Percentage of children provided with milk in Secondary Schools	....	....	....	....	63.37

The following report was made by Dr. Cameron:—

"The pattern of family meals is changing. For many children a light breakfast is far more popular than the traditional British breakfast. This is followed by school dinner and a late tea, which sometimes

but not invariably includes a cooked item. Supper to most children means tea and biscuits before bedtime. Where tea is father's main meal, this becomes the family's dinner, with benefit to the older children, but it may also mean that mother and the pre-school children have had a snack type of luncheon pending their 'late' dinner. A further disadvantage is that bedtime for younger members of the family tends to become later, influenced also, of course, by the ubiquitous T.V. Lack of sleep is probably a more important factor in the unsatisfactory conduct of some children than sheer lack of food. The growth of the Tuck Shop can hardly be welcomed as it interferes with the children's appetite for school dinners. School meals and milk are planned to provide a balanced diet, with special emphasis on protein, but can achieve this only if they are eaten by the children. A liberal helping of sweets or biscuits at playtime will spoil the appetite of the 'poor' eaters and is an unnecessary supplement to the 'good' eaters. Obesity in school children is becoming an increasing problem, and is now a more common type of malnutrition than undue thinness. The increasing use of the Tuck Shop can only impair the teaching of good food habits, so necessary throughout life if good nutrition is to be maintained: such training in the correct selection of food is surely an important part of the School Meals Service".

9. CO-OPERATION WITH OTHER BODIES.

I am indebted to Mr. G. White, the local inspector of the N.S.P.C.C., for the following report on the work of his Branch during the year in connection with school children:—

"In the Divisional area there has been an appreciable decrease in cases where school children have been involved and this is to some extent balanced by an increase in the pre-school age group. Cases were classified as follows:—

Neglect	....	....	10
Advice Sought	....	....	10
Ill-treatment	....	....	5
Beyond Control	....	....	2
Moral danger	....	....	1
Abandonment	....	....	1
			—
		Total	29
			—
Number of children concerned			42

One case brought to the notice of the Courts concerned a mother abandoning her family and she was given a period of probation which kept the family together.

In connection with the above, I made a total of 143 supervision visits and 121 miscellaneous visits of enquiry. Five enquiries were made for other branches where either family or dependent were resident in this district.

It is a pleasing feature to note that more parents have approached the Society with their problems before they have actually developed into anything more serious; features that indicated that something more serious would have arisen, had advice not been obtained in time.

The leaving of children, alone or without adequate care, working in the summer and Bingo in winter, still creates problems, and quite a number of late evening visits have had to be made in consequence of this.

During Christmas a number of families were helped with toys, clothing and food parcels, where these were most needed and, to a great degree, appreciated".

10. NURSERY SCHOOLS

Dr. Cameron prepared the following report:—

"The waiting list for admission to the nursery school continues to grow and many applicants never achieve a place. The importance of the early years in setting the pattern of future mental, physical and personality development is being increasingly recognised, and few would deny that the good nursery school can be a valuable complement to the normal home and of incalculable help to the child from the problem home. Modern patterns of living are far from ideal for the pre-school child. Small houses or flats have little room for vigorous play, noise is objected to, gardens are small or absent, streets are dangerous. Many families have their main meal at night when father comes home—too late for the toddler who, with his mother, may have had a very light lunch. Daytime rests are inconvenient, outings only too often are shopping expeditions. Many children today living 'normal' lives of this type would benefit greatly from the ordered freedom and companionship of a nursery school, yet owing to the rigorous selection imposed, never gain admission. I feel sure that an increase in nursery school places could prove an important preventive measure in reducing the number of children who subsequently grow into problem children or troublesome adolescents.

In addition to Childhaven Nursery School, a nursery class exists at Friarage School where children are admitted from 3 years of age.

All children at Childhaven Nursery School and Friarage Nursery Class are medically examined at frequent intervals. Close co-operation between the parents and children is maintained and this, with constant vigilance on the part of the staff, helps to control the spread of infection".

11. HANDICAPPED PUPILS

Under the scheme of Divisional Administration it is the duty of the Divisional Executive to report to the County Council all cases of children who require special educational treatment, but the placement

in special schools of these children is the responsibility of the Local Education Authority. During the year thirteen children were ascertained as Handicapped Pupils, viz:—

Partially Deaf	....	....	....	1
Delicate	....	....	....	1
Educationally Subnormal	....	....	....	8
Epileptic	....	....	....	1
Maladjusted	....	....	....	1
Physically Handicapped	....	....	....	1

Seventeen handicapped pupils from the Division were maintained by the Local Education Authority at special residential schools, as follows:—

Name of School	Boys	Girls
BLIND AND PARTIALLY SIGHTED		
Royal Normal College for the Blind, Rowton Castle, Nr. Shrewsbury	—	1
Exhall Grange Special School, Coventry	1	—
Ysgol Penybont, Glamorgan School for the Blind and Partially Sighted, Bridgend	1	—
DEAF AND PARTIALLY DEAF		
Yorkshire Residential School for the Deaf, Doncaster	—	1
Mary Hare Grammar School, Newbury	—	1
EDUCATIONALLY SUBNORMAL		
Brompton Hall School	3	1
Etton Pasture School, Nr. Beverley	—	1
PHYSICALLY HANDICAPPED		
Welburn Hall School	3	2
Holly Bank Special School, Huddersfield	—	1
SPEECH DEFECT		
Moor House School, Oxted, Surrey	1	—

The Special Class at No. 9 Seamer Road provides for the needs of most of the educationally subnormal children in the Division. It can accommodate 36 children, and all places were taken throughout the year.

Total number of children who attend the Seamer Road Special Class 43

Leavers:—

On reaching the age of 16 years	4
Transferred to a Reform School	1
Transferred to a C.M. School	1
Transferred to an Institution	1
	—
	7

New Admissions	7
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Dr. Cameron reports as follows:—

“During the year a number of children were assessed following consistent failure at school. While some of these children need a special school for educationally subnormal pupils, a larger proportion are merely dull, their retardation being aggravated by prolonged illness, irregular attendance, frequent changes of school, or personality difficulties, especially in the primary department. These children need remedial teaching in the ordinary school: vigorous individual help in a small group before their sense of frustration has resigned them to sitting quietly at the back of the class, giving no trouble but gaining nothing. However zealous, a teacher with the usual large class cannot give them enough help. These are the children who in due course leave school illiterate: the educable illiterates the Press is constantly deploring for whom the 1944 Act has not yet provided the education they need”.

12. SECTION 57, EDUCATION ACT, 1944.

Two children were reported under Section 57 of the Education Act, 1944, as unsuitable for education at school, and 9 were reported as requiring care and guidance after leaving school.

13. SPEECH THERAPY

The following is a statistical summary of the work carried out by Miss Mawson until she left on the 30th September, 1961. With the exception of one day a week at Whitby, Miss Mawson was able to devote the whole of her time to the treatment of children in this Division. Unfortunately we have not yet been able to obtain a full-time replacement, but from October until the end of the year Speech Therapy was given by Miss Taylor, who came over from York on one day a week, and details of her work are included in the figures given below:—

Total number of treatments	....	1266
Interviews with parents	....	80
Cases under treatment at the beginning of the year	....	75
Total number of cases admitted	....	36
Cases discharged and withdrawn	....	61
Cases remaining under treatment	....	50

The reasons for cessation of treatment

	Boys	Girls	Total
Discharged from treatment			
Discharged improved	45	12	57
Discharged conditionally			
Left district	1	1	2
Poor attendance	2	—	2
TOTAL	48	13	61
Remaining under treatment	35	15	50
TOTAL TREATED	83	28	111

Defects from which children suffered

	Boys	Girls	Total
Stammer	18	2	20
Dyslalia	50	22	72
Stammer and Dyslalia	2	—	2
Cleft Palate	2	1	3
Cerebral Palsy	1	1	2
Hard of hearing	—	1	1
Dysphonia	2	—	2
Rhinophonia	—	—	—
Retarded Speech Development	4	1	5
Other conditions	4	—	4
Total	83	28	111

14. CHILD GUIDANCE

The following report on the work of the Child Guidance Clinic in Scarborough was prepared by Miss E. M. Milbanke, the Authority's Educational Psychologist:—

"Throughout the year Dr. C. H. Neville-Smith, Consultant in Child Psychiatry to the Leeds Regional Hospital Board, held clinics at the School Clinic, Friars Way, on Wednesdays—a total of 86 psychiatric sessions. The post of psychiatric social worker remained vacant, so the clinic team consisted of the psychiatrist and the educational psychologist.

A few children from other areas were seen, but the figures given here apply only to the Scarborough Division. The year began with a waiting list of 8, and 23 new cases were referred in 1961. Usually a doctor referred the child: school medical officers 8, specialists 4, and family doctors 2. In addition, 4 children were referred by probation officers, and 1 each by a Clerk to the Justices, Children's Officer, Headmaster, Speech Therapist and parent.

The complaint was most often difficult behaviour or anxiety, and in a few cases speech disorder, enuresis, failure at school, or a combination of these. Of the children newly registered, only 6 boys and 2 girls were below 11 years of age whereas 9 boys and 6 girls were older. The total attending the clinic, however, including those already under treatment, consisted of 15 pupils of primary school age and 20 of secondary school age.

Dr. Neville-Smith saw 21 new cases (15 boys and 6 girls). One boy was seen in order to make a report to the Juvenile Court and the parents of 2 Scarborough boys were seen when the boys had been examined elsewhere.

Children seen by the Psychiatrist

	Boys	Girls	Total
Consultation only	10	3	13
Supportive treatment	11	3	14
Regular treatment	2	5	7

At the end of the year 2 boys were awaiting regular (i.e. weekly) treatment, and 2 boys and 3 girls were awaiting initial examination".

15. CHILD DELINQUENTS.

One hundred and sixty-one medical reports were submitted to the Magistrates concerning children who appeared before the Juvenile Court.

16. EMPLOYMENT OF SCHOOL CHILDREN

Sixty-six children were medically examined under the conditions of the bye-laws relating to the employment of children, and all of them were considered fit for their proposed employment without detriment to their health.

17. MEDICAL EXAMINATION OF ENTRANTS TO COURSES OF TRAINING FOR TEACHERS

Under the provisions of Ministry of Education Circular 249, 71 entrants to courses of training for teachers were medically examined.

18. STAFF MEDICAL EXAMINATIONS

For the purpose of determining their fitness for employment or fitness for inclusion in the County Council's Superannuation Scheme, 88 persons, who had been appointed to posts under the Education Authority, were medically examined during the year by the school medical officers.

APPENDIX

MEDICAL INSPECTION AND TREATMENT
Year Ended 31st December, 1961.

**PART I — MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY 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.	% of Col. 2	No.	% of Col. 2
(1)	(2)	(3)	(4)	(5)	(6)
1957 and later	130	129	99.23	1	0.77
1956	343	340	99.13	3	0.87
1955	354	352	99.43	2	0.57
1954	354	352	99.43	2	0.57
1953	359	357	99.44	2	0.56
1952	56	56	100.00	—	0.00
1951	373	372	99.73	1	0.27
1950	290	287	98.97	3	1.03
1949	86	82	95.35	4	4.65
1948	335	326	97.31	9	2.69
1947	559	541	96.72	18	3.22
1946 and earlier	1114	1080	96.95	34	3.05
TOTAL	4353	4274	98.19	79	1.81

**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)
1957 and later	—	23	23
1956	—	40	40
1955	3	36	39
1954	10	38	48
1953	11	36	46
1952	3	1	4
1951	14	51	64
1950	9	36	45
1949	2	14	16
1948	17	30	46
1947	22	52	73
1946 and earlier	56	108	157
TOTAL	147	465	601

TABLE C — OTHER INSPECTIONS

Number of Special Inspections	340
Number of Re-inspections	704
Total	<u>1044</u>

TABLE D — INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	18,434
(b) Total number of individual pupils found to be infested	263
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—

**PART II — DEFECTS FOUND BY MEDICAL INSPECTION
DURING THE YEAR.**

TABLE A — PERIODIC INSPECTIONS

DEFECT OR DISEASE	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
SKIN	17	8	75	23	63	6	155	37
EYES								
(a) Vision	3	33	78	195	66	108	147	336
(b) Squint	12	17	1	7	14	11	27	35
(c) Other	3	1	3	2	11	3	17	6
EARS								
(a) Hearing	2	15	—	13	3	26	5	54
(b) Otitis Media	2	7	5	6	5	7	12	20
(c) Other	1	6	2	3	4	4	7	13
Nose and Throat	17	44	12	16	27	53	56	113
Speech	15	31	4	1	17	18	36	50
Lymphatic Glands	—	13	—	2	—	6	—	21
Heart	—	13	2	10	—	13	2	36
Lungs	1	5	—	23	—	10	1	38
Developmental								
(a) Hernia	3	5	—	1	1	—	4	6
(b) Other	—	7	2	2	8	14	10	23
Orthopaedic								
(a) Posture	1	2	3	20	3	14	7	36
(b) Feet	5	34	14	59	20	36	39	129
(c) Other	6	31	9	30	8	31	23	92
Nervous System								
(a) Epilepsy	—	1	1	1	1	4	2	6
(b) Other	—	—	—	4	1	1	1	5
Psychological								
(a) Development	—	11	—	34	1	59	1	104
(b) Stability	3	53	2	34	8	74	13	161
Abdomen	—	4	4	6	—	14	4	24
Other	22	4	26	14	22	17	70	35

(T) — Number of children found to require treatment.

(O) — Number of children found to require observation.

TABLE B — SPECIAL INSPECTIONS

DEFECT OR DISEASE	SPECIAL INSPECTIONS	
	Pupils requiring Treatment	Pupils requiring Observation
SKIN	26	1
EYES		
(a) Vision	19	1
(b) Squint	—	1
(c) Other	4	—
EARS		
(a) Hearing	2	13
(b) Otitis Media	1	2
(c) Other	7	1
NOSE AND THROAT	14	2
SPEECH	5	2
LYMPHATIC GLANDS	2	—
HEART	—	—
LUNGS	3	2
DEVELOPMENTAL		
(a) Hernia	—	1
(b) Other	—	1
ORTHOPAEDIC		
(a) Posture	—	1
(b) Feet	13	2
(c) Other	12	1
NERVOUS SYSTEM		
(a) Epilepsy	—	—
(b) Other	1	—
PSYCHOLOGICAL		
(a) Development	5	14
(b) Stability	8	5
ABDOMEN	—	—
OTHER	45	7

**PART III — TREATMENT OF PUPILS ATTENDING MAIN-
TAINED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY SCHOOLS).**

TABLE A — EYE DISEASES, DEFECTIVE VISION & SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	21
Errors of refraction (including squint)	379
TOTAL	400
Number of pupils for whom spectacles were prescribed	164

**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	13
(b) for adenoids and chronic tonsillitis	246
(c) for other nose and throat conditions	26
Received other forms of treatment	45
TOTAL	330
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1961	5
(b) in previous years	19

TABLE C — ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	233
(b) Pupils treated at school for postural defects	3
TOTAL	236

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	—
(b) Body	—
Scabies	1
Impetigo	2
Other skin diseases	149
TOTAL	152

TABLE E — CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	37

TABLE F — SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	111

TABLE G — OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	269
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination (by Chest Physician)	8
(d) Pupils who completed courses of U.V.R. treatment	25
TOTAL	302

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	....	7145	} Total (1)	....	7548		
	(b)	As Specials	....	403					
(2)	Number found to require treatment		....	....	....	....	4281		
(3)	Number offered treatment		....	....	....	....	3049		
(4)	Number actually treated		....	....	....	....	1640		
(5)	Number of attendances made by pupils for treatment, including those recorded at 11(h)					....	....	4677	
(6)	Half days devoted to:								
	(a)	Periodic (School) Inspection	....	72	} Total (6)	....	814		
	(b)	Treatment	....	742					
(7)	Fillings:								
	(a)	Permanent Teeth	....	2910	} Total (7)	....	3458		
	(b)	Temporary Teeth	....	548					
(8)	Number of Teeth filled:								
	(a)	Permanent Teeth	....	2650	} Total (8)	....	3149		
	(b)	Temporary Teeth	....	499					
(9)	Extractions:								
	(a)	Permanent Teeth	....	282	} Total (9)	....	760		
	(b)	Temporary Teeth	....	478					
(10)	Administration of general anaesthetics for extraction					....	....	380	
(11)	Orthodontics:								
	(a)	Cases commenced during the year	....	....	....	....	24		
	(b)	Cases brought forward from previous year	....	....	....	....	24		
	(c)	Cases completed during the year	....	....	....	....	18		
	(d)	Cases discontinued during the year	....	....	....	....	9		
	(e)	Pupils treated by means of appliances	....	....	....	....	48		
	(f)	Removable appliances fitted	....	....	....	....	33		
	(g)	Fixed appliances fitted	....	....	....	....	—		
	(h)	Total attendances	....	....	....	....	511		
(12)	Number of pupils supplied with artificial teeth					....	....	27	
(13)	Other operations:								
	(a)	Permanent Teeth	....	984	} Total (13)	....	1503		
	(b)	Temporary Teeth	....	519					



INSTITUTIONAL AND COMMUNITY DEVELOPMENT
PROGRAMS AND SERVICES

The following table lists the various programs and services provided by the institution, along with the personnel responsible for their implementation.

Programs and Services:

- 1. Academic Programs
- 2. Community Outreach
- 3. Student Support Services
- 4. Faculty Development
- 5. Research and Innovation

Personnel:

- 1. Academic Affairs
- 2. Community Relations
- 3. Student Services
- 4. Faculty Affairs
- 5. Research and Innovation

The institution is committed to providing high-quality education and community services, and to fostering a culture of innovation and excellence.

For more information, please contact the appropriate personnel listed in the table.

The institution is a member of the following organizations:

- 1. American Association of Colleges and Universities
- 2. National Association of Community Colleges
- 3. Association of Public and Land-grant Universities

The institution is also a member of the following organizations:

- 1. Association of American Universities
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