

**[Report 1968] / School Medical Officer of Health, North Riding of Yorkshire County Council, Scarborough Divisional Executive.**

### **Contributors**

North Riding of Yorkshire (England). County Council (Scarborough Divisional Executive)

### **Publication/Creation**

1968

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NORTH RIDING OF YORKSHIRE  
COUNTY COUNCIL

SCARBOROUGH  
DIVISIONAL EXECUTIVE

**REPORT**  
OF THE  
DIVISIONAL  
SCHOOL MEDICAL OFFICER  
FOR THE YEAR 1968





# Report

of the Divisional School Medical Officer  
for the year 1968

THE CHAIRMAN AND MEMBERS OF SCARBOROUGH DIVISIONAL EXECUTIVE

Mr. Chairman, Ladies and Gentlemen,

I beg to present my Report for the year 1968.

The school population continues to increase, and now exceeds 8,000 for the first time.

This only partly accounts for the increases in referrals to the Speech Therapy and Child Guidance Clinics—the work of these has generally shown an upward trend over the last few years.

The Table in Paragraph 4 shows the percentage of children found to require treatment as 22.71, an increase of over 5%. This is due to a change in the classification of children wearing glasses from those requiring observation to those requiring treatment. It does not signify any deterioration in the health of the children.

A number of people have contributed to my report, these include Dr. Cameron, The Divisional Education Officer, Mr. Woodward, Mr. Fitton the N.S.P.C.C. Inspector and Mrs. Hankey, Speech Therapist.

I must thank other members of the staff, too, nursing, medical, and clerical, for their ever willing co-operation.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

W. G. EVANS,

Divisional School Medical Officer.

School Clinic,  
Area Health Office,  
Northway, Scarborough.  
*September, 1969.*

## 1. GENERAL

The total number of pupils on the School registers in September 1968 amounted to 8,396, an increase of 398 when compared with the previous year's figure, whilst the number of Primary and Secondary Schools was 34 (the new school being Wheatcroft County Primary School).

(a) Number of Primary School Departments in the Division (excluding Childhaven Nursery School)	26
(b) Number of Secondary Schools in the Division other than Grammar Schools	6
(c) Number of Grammar Schools	2
(d) Number of Pupils on the registers of Primary Schools (excluding Childhaven Nursery School)	5062
(e) Number of children in the Childhaven Nursery School	44
(f) Number of pupils on the rolls of Secondary Schools other than Grammar Schools	2141
(g) Number of pupils on the rolls of Grammar Schools	1149

### Comparative Figures

	1964	1965	1966	1967	1968	Increase	Decrease
Childhaven	45	43	45	40	44	4	—
† 9 Seamer Road	34	33	—	—	—	—	—
Primary	4492	4492	4607	4776	5062	286	—
Secondary*	1941	2070	2036	2170	2141	—	29
Grammar	1090	1072	1079	1012	1149	137	—
	7602	7710	7767	7998	8396	427	29

\* Other than Grammar

† Closed and replaced by the Woodlands Special School, which is under the direct administration of the County Education Committee.

## 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).

C. A. Price, M.B., Ch.B. Temporary School Medical Officer (part-time).

### (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. (part-time).

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., F.F., A.R.C.S., D.A.R.C.S. (part-time Dental Anaesthetist).

I. F. Ash, B.Ch.D., L.D.S.

(iii) **Specialist Officers (part-time)**

- \*Orthopaedic Surgeon G. S. Tupman, F.R.C.S.
- \*Paediatrician A. Bogdan, V.R.D., M.D. (London), M.R.C.P. (Ed.), D.C.H.
- \*Ophthalmic Surgeon A. W. Craig, M.B., Ch.B. (Edin.), D.O. (Eng.).  
\* *By arrangements with Leeds Regional Hospital Board.*
- Psychiatrist Dr. Barbara Richardson, M.B., Ch.B.
- Educational Psychologist D. D. Woodward, B.A. (Hons.) Psychology.
- Psychiatric Social Worker Miss A. E. Hey, A.A., P.S.W., resigned as from 31st March, 1968.
- Remedial Teacher Mrs. M. K. Howes.

(iv) **School Nurses**

- Miss K. M. Boyes, S.R.N., S.C.M., H.V. Cert., with District Training.
- Miss P. M. Bradley, S.R.N., S.C.M., H.V. Cert.
- Miss M. Ford, S.R.N., S.C.M., with District Training.
- Miss E. L. Gourdel, S.R.N., S.C.M., H.A. Cert., H.V. Cert.
- Miss D. Kirk, S.R.N., R.S.C.N., S.C.M., H.V. Cert.
- Mrs. M. M. Lowen, S.R.N., S.C.M., H.V. Cert., with District Training.
- Miss B. Merryweather, S.R.N., H.V. Cert.
- Mrs. H. Rowbotham, S.R.N., S.C.M., H.V. Cert.
- 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 R. W. Ventress, S.R.N., S.C.M., H.V. Cert., with District Training.

(v) **Orthopaedic Nurse**

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

(vi) **Speech Therapists**

- Mrs. A. Hankey, L.C.S.T. (part-time).
- Miss C. A. Lee, L.C.S.T. (part-time).

(vii) **Dental Attendants**

- Mrs. S. Mollon (resigned 9.5.68).
- Miss D. Hyde.
- Mrs. J. E. Cole.
- Mrs. J. E. Graham (resigned October, 1968).
- Mrs. Sellers (from October, 1968).

(viii) **Clerks**

- Miss E. Windass, D.P.A. (Senior Clerk).
- Miss J. M. Clarke.
- Miss P. J. Lunn (from 22.1.68).

### 3. MEDICAL INSPECTION OF PUPILS

The arrangements for periodic medical inspections were the same as in previous years at primary schools, whereby new entrants and children in the 7—8 and 10—11 age group were inspected. In the secondary schools, pupils in their final year were examined. Such inspections were carried out in 24 primary and 7 secondary schools. Furthermore, all children at Childhaven Nursery School were examined once and at Friarage Nursery Class twice during the year.

Altogether, a total of 3068 inspections were made in 1968, being a decrease of 298 compared with the number in the previous year.

Special inspections by the school medical officers amounted to 261, and re-inspections 797, as against 587 and 856 respectively in 1967.

### 4. FINDINGS AT PERIODIC MEDICAL INSPECTION

(a) The number of children found to require medical treatment was 697, representing 22.71% of those inspected. The following table shows the corresponding figures for previous years:—

Year	Number of Children	
	Inspected	Found to require treatment (excluding dental disease and infestation with vermin)
1959	4280	664 (15.51%)
1960	4698	677 (14.41%)
1961	4353	601 (13.80%)
1962	3165	446 (14.09%)
1963	3535	495 (14.00%)
1964	3421	446 (13.04%)
1965	3624	502 (13.85%)
1966	3487	457 (13.10%)
1967	3366	581 (17.26%)
1968	3068	697 (22.71%)

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

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 19 (0.62%) of the 3068 pupils subjected to routine medical inspection were considered to be 'unsatisfactory'. Findings in previous years were as follows:—

Year	Number of Pupils Inspected	Physical Condition	
		Satisfactory	Unsatisfactory
1959	4280	97.66	2.34
1960	4698	97.47	2.53
1961	4353	98.19	1.81
1962	3165	98.71	1.29
1963	3535	99.30	.70
1964	3421	99.21	.79
1965	3624	99.20	.80
1966	3487	99.23	.77
1967	3366	99.38	.62
1968	3068	99.38	.62

### (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 18,978 inspections and 467 pupils were found to be infested with nits and/or pediculi. The latter figure includes cases of children with only the odd nit, but some 48 were heavily infested. In the previous year 326 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.

Over half the schools were free from infestation. One school had 2/5ths of the total cases. One had more than a quarter of the total cases and five other schools had less than 10 cases each. Seven other schools had under 20 cases each.

Percentage of Children Infested	Number of School Departments
Nil	19
Under 1	—
1-1.99	2
2-2.99	1
3-3.99	—
4-4.99	4
5-9.99	4
10-20	2
Over 20	2



#### (d) Clothing and Footwear

The Scarborough Amicable Society, which was founded in 1729 and is entirely dependent on voluntary subscriptions and donations, expended £438 in 1968 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 20 and £9 was spent on casual assistance.

#### (e) Following up

The school nurses attend inspections in schools, and follow-up cases in which assistance or advice is needed, and 341 home visits were made in this connection.

### 5. TREATMENT OF DEFECTS

#### (a) Minor Ailments

Minor Ailments Clinics were again held, twice a week at the School Clinic and weekly at Hinderwell, Northstead and Raincliffe Schools. The conditions for which children attended are given in the following Table:—

Conditions for which children attended M.A. Clinics	Number of First Visits	Re-attendances	Total Attendances
Lungs	—	—	—
Scabies	—	—	—
Impetigo	—	—	—
Ringworm—Head	—	—	—
Body	—	—	—
Uncleanliness (including Verminous Conditions)	1	—	1
Minor Injuries	49	3	52
External Eye Disease	9	3	12
Ear Discharge and Deafness	4	1	5
Nose and Throat	5	—	5
Vision	—	—	—
Heart and Circulation	—	—	—
Skin (non-contagious)	129	116	245
Other conditions	30	2	32
<b>TOTAL</b>	<b>227</b>	<b>125</b>	<b>352</b>

The number of children treated is shown in the Table below:—

Year	Number of First Visits	Total Number of Attendances
1959	710	1688
1960	538	1097
1961	490	983
1962	475	1100
1963	550	1217
1964	343	644
1965	263	547
1966	121	234
1967	260	455
1968	222	352

### (b) **Defective Vision**

Mr. Craig, the ophthalmologist, held weekly sessions at the School Clinic. All children at medical inspection who were considered to need treatment for defective vision or squint were given the opportunity of attending his clinics. A summary of the work done at this clinic is given below, from which it will be seen that spectacles were prescribed for more than half the children examined:—

Number of sessions held by the Ophthalmologist	42
Number of children examined	418
Total number of attendances	418
Number of children for whom spectacles were prescribed	210
Number of children recommended other forms of treatment	46

### (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 281 school children received operative treatment at Scarborough Hospital for diseases of the ear, adenoids and chronic tonsillitis, and other nose and throat conditions.

One child was provided with a Medresco Hearing Aid through the Hospital Service in 1968 and 6 children still at school were issued with aids in previous years.

### **Audiometric Survey**

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

Altogether Mrs. Walker tested 1044 children, including a number referred specially by the school medical officers, and of these 39 failed the test. These failures were followed up by the school medical officers, and the parents given appropriate advice.

### (d) **Orthopaedic**

36 sessions were held by the Orthopaedic Surgeon, at which 220 school children made 250 attendances. The Orthopaedic Nurse treated 206 pupils at the remedial exercise clinic: altogether she held 147 sessions, and the total attendances made by these children was 426.

### (e) **Paediatric Clinics**

19 Paediatric Clinics were held, 167 patients being seen, none of these being new cases.

(f) **Tuberculosis**

Three cases of Tuberculosis were notified during the year in the age group 5—14.

21 Skin Tests were carried out, 20 of which gave negative results, the positive one being subsequently X-rayed.

(g) **Artificial Sunlight Treatment**

Eight children completed a course of sunlight treatment at the Medical Baths.

(h) **Dental Services**

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 the Divisional Education Officer:—

The work in Physical Education in the Division has proceeded satisfactorily during the past year.

Short courses of one and a half hours' duration over a period of six weeks, conducted by the Organiser of Physical Education, were attended by approximately one hundred teachers of primary aged children. More teachers are becoming aware of education for movement as opposed to mere training. The teacher now creates learning situations which stimulate children to think. Each stage is a process of learning and caters for the needs of all children.

Children from many schools have been used to show these methods to both teachers and to first year students from the North Riding College of Education.

The staffing in Secondary Schools mentioned in the 1967 report has been maintained and this continuity by the women teachers has further improved the standard of performance amongst the older girl pupils.

Physical education in the secondary schools has expanded and where possible choice of activities is offered to the older pupils, either during or out of school hours. One school has acquired a disused railway station with the usual buildings and by hard work and valuable help from parents, staff and pupils have made a very useful outdoor pursuits centre.

A number of school children are taking advantage of the artificial ski-slopes in Scarborough where good teaching is available.

A badminton course arranged by the authority and based at the Boys' High School was well attended and some teachers have since been awarded the coaching certificate.

A cross-country league has been formed and both girls and boys take part.

Boys and girls of senior age have participated in Netball, Hockey, Tennis, Cricket, Football and athletic rallies conducted by the North Riding Athletic Union for all schools in the North Riding. Successful five-a-side cricket competitions were held whilst Rennard of the Technical College captained the North Riding Schools Cricket XI and played on the tour for the Yorkshire Federation Youth XI. Two Scarborough pupils played first couple for a representative North Riding tennis team against Teesside.

A half day course in the advanced techniques of swimming was taken by the A.S.A. national coach for the North East, Mr. Stace. The very wet weather with cold winds and low temperatures was not inducive to the teaching of swimming. The more able worked hard to overcome the rigours of an open air pool at its worst, with the result that the survival awards and the life-saving awards compared very favourably with the previous year. Two candidates gained high marks in the practical examination for the Diploma award, the highest award possible. Again Scarborough swimmers gained places in the Yorkshire minor A championships and in the North Riding Athletic Union swimming gala were awarded both the intermediate and senior trophies. Apart from a weekly session at the North Riding College bath for a very few children, these results have been achieved from approximately nine weeks of swimming in an open air pool. The Woodlands E.S.N. school is the second school in Scarborough to acquire a teaching pool.

The Duke of Edinburgh award scheme continues, and the successful students were again awarded their certificates at a reception kindly given by the Mayor at the Town Hall.

This report would not be possible without the enthusiasm of many teachers in all types of schools who devote much time, extra to the normal school hours. Their devotion, whether it be in the gymnasium, on the playing fields, swimming bath, in outdoor pursuits or with the Duke of Edinburgh award, has a great effect on the pupils in their mental, physical, moral growth and social development.

## 7. INFECTIOUS DISEASES

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

Measles	....	....	....	209
Whooping Cough	....	....	....	6
Scarlet Fever	....	....	....	18
Sonne Dysentery	....	....	....	6
Infective Jaundice	....	....	....	2

## 8. MILK AND MEALS

The following details supplied by the Divisional Education Officer show the position on a day in September 1968:—

Percentage of children provided with meals in the Schools in the Division outside Scarborough ....	71.82
Percentage of children provided with meals in the Scarborough Schools ....	76.93
Percentage of children provided with milk in Primary Schools in the Division ....	94.23

The provision of milk for pupils in Secondary Schools in the Division ceased as from the beginning of the Autumn Term 1968.

### Comparative Figures

	1965	1966	1967	1968
MEALS—Rural Schools	75.44	76.55	76.43	71.82
MEALS—Borough Schools	70.82	75.63	77.11	76.93
MILK—Primary	95.76	95.17	96.24	94.23

## 9. CO-OPERATION WITH OTHER BODIES

I am indebted to Mr. E. Fitton, 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:—

During the twelve months ending December 1968 it has been necessary to investigate a total of 39 cases, of which 27 cases involved children of school age, 40 schoolchildren being involved in these.

153 visits of supervision were carried out, and a further 165 miscellaneous visits made, appertaining to the respective cases.

The cases were brought to the notice of the Society as follows: Reported by the general public: 20; Police: 3; School Officials: 1; other officials: 3.

20 of the cases were the result of neglect, one concerned abandonment, ill-treatment was involved in 2, and in four cases aid and advice were sought.

Christmas is always the busiest time, and 24 good parcels of toys were delivered to needy children.

The fifteen cases dealt with during my three months here have revealed a similar trend to that encountered in the Salford Branch, i.e. persons abusing the provisions of a Welfare State, rather than providing for themselves. This appears to result from the fact that under present conditions a man with a large family can get more money by doing nothing than he can by holding down a good job. In some cases a father, becoming bored from doing nothing, especially if he has been a conscientious

worker before, gets into bad company and may overnight become a confirmed gambler, drinker, and so things snowball until the day of reckoning comes and he finds his home, family and marriage irretrievably broken up. The only hope is to get in quickly enough to stop the rot and get things back to normal before the wife and children lose everything. Such feckless behaviour may, too, have detrimental effect on close neighbours, who also adopt an apparently happy but dangerous existence, thus spreading undesirable habits. In Scarborough, where a great proportion of the work is seasonal, this problem occurs regularly during the winter months, when full employment is impossible.

Another problem is that in many cases children too young to have proper safety sense are left alone. If only parents could realise that it only takes a second for accidents to happen! Can they picture how they would feel if they were to come home and find a home gutted by fire, where before there had been several children, perhaps as young as 10, 11 or 12. They are considered by parents to be 'big enough and sensible enough' to look after themselves. They forget that the same children are 'big enough and sensible enough' to take more risks—by trying to cook, to mend fuses, to get into the back of television sets. They are old enough to remove fireguards, dress up in flimsy clothing and parade before open fires. Children so young should never be left alone, especially in winter when fires are lit.

In conclusion I would like to say that I had not expected the same co-operation I enjoyed in Salford. How wrong I was! I am grateful for such close co-operation and help, and thank all those who have given me such support during my short time in the area.

## **10. NURSERY SCHOOLS**

Dr. Cameron prepared the following report:—

It is sad to reflect that England, the Mother Country of the Nursery School, is still committed to an official policy of limiting this type of provision for her children, but the Plowden Report gives us hope that this may be reviewed in the near future.

The importance of these early years in physical, social, psychological and intellectual development is now generally recognised, and the Plowden Report stresses especially the need to bridge the linguistic gap between the pre-school and the school child. The rapid increase in private Nursery Schools and Play Groups is proof that parents appreciate the opportunity of such training for their children. The poorer and problem areas are unable to form their own Play Group or Nursery School, and so the very type of child who most needs this experience is denied it. These children are notably behind in vocabulary and verbal facility, and so enter school handicapped from the start in gaining skills such as reading. We continue to have requests for admission to the Nursery School far outnumbering the places available.

Increasingly, admission to Nursery School is being sought by parents of handicapped children, especially those with minor degrees of disability associated with brain injury, retarded development, partial hearing or speech defect.

Provision of this kind of help in the child's early stages of development may help the child to remain ultimately in the ordinary school, instead of requiring special school provision.

The waiting list for admission to nursery school continues to outstrip the available places, which remain as in previous years (i.e. 45 places at Childhaven Nursery, and 30 in the Nursery Class at Friarage School).

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 29 children were ascertained as Handicapped Pupils, viz:—

Ineducable	....	....	....	5
Educationally Subnormal			....	14
Physically Handicapped			....	4
Maladjusted	....	....	....	5
Deaf	....	....	....	1

The Woodlands School provides places for 50 girls as boarders, and 50 day pupils of either sex, the minimum age of admission being 8.

The following children have been ascertained:—

Educationally Sub-normal	....	....	....	59
Ineducable	....	....	....	27
Delicate	....	....	....	1
Blind	....	....	....	1
Epileptic	....	....	....	1
Speech Defect	....	....	....	1
Partially Sighted	....	....	....	2
Partially Hearing	....	....	....	2
Deaf	....	....	....	6
Maladjusted	....	....	....	8
Physically Handicapped	....	....	....	16

Five of these children are still awaiting admission to suitable establishments, the remaining 119 having been suitably placed.

One child on the waiting list has not yet reached the minimum age of admission.

Four physically handicapped children are receiving home tuition.

## 12. SECTION 57, EDUCATION ACT 1944

Five children were reported under Section 57 of the Education Act, 1944, as unsuitable for education at school, and 5 were reported as requiring care and guidance after leaving school.

## 13. SPEECH THERAPY

The following report was made by the Speech Therapist on work carried out during the year ended 31st December, 1968:—

Conditions have greatly improved at Northway during the year, when we moved to a considerably larger, lighter room, which gives us much more scope in our clinical activities with the children, and is much less noisy. We were also able to replenish our store of rather decrepit equipment.

During the year, we have managed to keep the waiting list at Northway down to a reasonable number. However, we do have overloaded sessions at Gladstone Road, Hinderwell, Braeburn and Overdale schools, which have been rather a strain, and meant us spending too little time on too many patients.

Regular treatment continues at Brompton and the Woodlands Schools, as does the attendance at the Paediatric clinics.

The following is a statistical summary of the work carried out:—

Total number of treatments	....	....	....	2601
Interviews with parents	....	....	....	43
Cases remaining under treatment at 31.12.68	....	....	....	107
Cases admitted	....	....	....	74
Cases discharged	....	....	....	61
Cases under treatment at 1.1.69	....	....	....	107

### Analysis of Defects of those Children remaining under treatment

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Dyslalia	54	30	84
Stammer	6	0	6
Stammer and Dyslalia	2	1	3
Cleft Palate	2	2	4
Dysphonia	1	0	1
Dysarthria	1	1	2
Dysonia	4	0	4
Retarded language development together with associated dysarthria and/or dysphasia	10	6	16
	<hr/>	<hr/>	<hr/>
	80	40	120

## 14. CHILD GUIDANCE

The following report on the work of the Child Guidance Clinic in Scarborough was prepared by Mr. D. D. Woodward, the Authority's Educational Psychologist:—



Referrals to the Child Guidance Service continue to rise. This increase has been faced with reduced staff as Miss A. E. Hey, Psychiatric Social Worker, left in the early part of the year to take up a post as Psychiatric Social Worker in Guisborough.

#### **New Referrals — Scarborough Division**

1963	1964	1965	1966	1967	1968
20	60	97	84	124	139

If children seen in Whitby and Malton are included the total is 190 new cases as against 184 cases seen the previous year.

In Table A & B it will be seen that 50% of cases comprise children referred because of educational difficulties, and Head Teachers refer the greatest number of children.

To provide an efficient service, diagnosis and treatment need to be quick and accurate and to be backed by well developed supportive services.

Head Teachers have direct access to the School Psychological Service. Children are seen as soon as possible and the average waiting time between referral and first interview is just over three weeks.

This delay is due to the shortage of specialist staff; a problem which is national rather than local.

Following diagnosis those concerned may receive advice and are then seen from time to time on a supportive basis. Others may be taken on for treatment involving regular weekly visits. Again the staffing situation leads to difficulties; many patients who ideally should be seen weekly can only be seen fortnightly; others who might benefit from treatment can only be seen from time to time.

These are difficulties within the Service; when the help of other services outside Child Guidance are required the position is more difficult, so that in a few cases there is considerable delay before effective action can be taken. This is due to administrative complexity, again a national rather than a local problem, and to the shortage of day and residential places providing special educational facilities for children either emotionally disturbed or retarded in their school work.

Normally a place can be found within the Authority for children who are educationally subnormal, but this provision is for children of 8 years and over, so that the under eights must take their chance in classes of 40 or over in normal school. Here, as with young disturbed and handicapped children, the extension of nursery facilities, training centres and of special classes in primary school would be a help. As yet there are few remedial classes in primary schools, and although the position is better in secondary schools, there is no official follow-up of remedial measures and there is little in the way of training courses locally for teachers interested in remedial work.

Although a great number of children are referred because of educational difficulties or for assessment, the remaining 50% are referred

because of behaviour, nervous, habit and psychotic disorders. These children are mainly seen in the Child Guidance Clinic by the Psychiatrist, usually assisted by Psychologist and Psychiatric Social Workers.

A follow-up study was carried out on children taken on for such treatment in 1966. Here, independently, members of the Clinic staff, parents and teachers were asked to judge the children's response to treatment. Judgements were only accepted as valid where there was a measure of agreement among the judges and where the judgement of Clinic staff was supported by opinion outside the Clinic.

The results indicate that at least two out of every three children taken on for treatment improve. This figure is in line with similar investigations carried out in other Clinics. Detailed figures are available in the Clinic for those interested.

The Service continues to have a close association with School Medical Officers who initiate 17% of referrals and act as intermediaries in others. There is also a close association between the Service and Hospital Specialists who use the Area Health Centre, and who last year referred 9% of all referrals. General Practitioners initiate another 10%, the remaining 7% being made up of referrals from Probation, Court, Speech Therapist, Education Department and Parents.

In the Child Guidance Clinic Dr. B. Richardson, Psychiatrist, saw 86 new cases. The total number of children seen by her, including children seen at Throxenby Hall and Woodlands Special School, was 146.

Mr. Woodward, Educational Psychologist, saw 120 new cases, and Mrs. Howes, Remedial Teacher, saw 14 children regularly for remedial help in reading and arithmetic.

These figures do not include children seen in the Whitby and Malton Clinics or schools outside Scarborough.

TABLE A

Reason for Referral	1968	1967	1966
<b>CHILDREN REFERRED BECAUSE OF:</b>			
Educational Difficulties	50%	48%	47%
Behaviour Disorders	26%	34%	32%
Nervous Disorders (Anxiety)	14%	10%	12%
Habit Disorders	7%	4%	7%
Psychotic Behaviour	1%	1%	2%
Organic Disorder	—	1%	—
Unclassified	2%	2%	—

TABLE B

Sources of Referral	1968	1967	1966
Head Teachers	48%	44%	36%
School Medical Officers	17%	15%	20%
Child Care Officers	9%	14%	19%
General Practitioners	10%	8%	11%
Hospital Specialists	9%	8%	5%
Remainder	7%	11%	9%

TABLE C

Type of School at Referral	1968	1967	1966
Pre-School	5%	7%	5%
Primary Infant	50%	36%	45%
Primary Junior			
Secondary (including Grammar)	26%	22%	42%
Special Schools	19%	32%	6%
Left School	—	3%	2%

## 15. ENURESIS

Following preliminary investigation, 8 children were considered suitable for treatment by Enuresis Alarms, in addition to the 14 on the waiting list.

Twelve cases received the apparatus during the year, two were removed from the waiting list as 'cured' and at the end of the year, 7 children were still on the waiting list. One family emigrated.

## 16. CHILD DELINQUENTS

119 medical reports were submitted to the Magistrates concerning children who appeared before the Juvenile Court.

## 17. EMPLOYMENT OF SCHOOL CHILDREN

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

## 18. MEDICAL EXAMINATION OF ENTRANTS TO COURSES OF TRAINING FOR TEACHERS

Under the provisions of Ministry of Education Circular 249, 79 entrants to courses of training for teachers were medically examined.

### 19. STAFF MEDICAL EXAMINATIONS

For the purpose of determining their fitness for employment or fitness for inclusion in the County Council's Superannuation Scheme, 94 persons, who had been appointed to posts under the Education Authority, were medically examined during the year by the school medical officers.

TABLE A — PERIODIC MEDICAL INSPECTIONS

Year	No. of persons examined	No. of persons with defective vision (excluding 20/20)	No. of persons with other conditions recorded in Part II	Total persons examined	Age Groups (by year of birth)	
					15-24	25-34
1953 and earlier	150	102	102	150		
1954	102	41	41	102		
1955	28	27	27	28		
1956	360	322	322	360		
1957	259	202	202	259		
1958	177	156	156	177		
1959	441	439	439	441		
1960	275	274	274	275		
1961	388	388	388	388		
1962	444	444	444	444		
1963 and later	308	254	254	308		
<b>Total</b>	<b>3068</b>	<b>3019</b>	<b>3019</b>	<b>3068</b>		

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

Year	No. of pupils requiring treatment	No. of pupils with defective vision (excluding 20/20)	No. of pupils with other conditions recorded in Part II	Total pupils requiring treatment	Age Groups (by year of birth)	
					15-24	25-34
1953 and earlier	152	132	132	152		
1954	13	13	13	13		
1955	8	8	8	8		
1956	7	7	7	7		
1957	42	42	42	42		
1958	28	28	28	28		
1959	7	7	7	7		
1960	16	16	16	16		
1961	14	14	14	14		
1962	3	3	3	3		
1963	2	2	2	2		
1964 and later	1	1	1	1		
<b>Total</b>	<b>266</b>	<b>266</b>	<b>266</b>	<b>267</b>		

## APPENDIX

### MEDICAL INSPECTION AND TREATMENT

**Year Ended 31st December, 1968**

#### 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
		(3)	(4)	(5)	(6)
1964 and later	76	76		—	
1963	444	444		—	
1962	388	388		—	
1961	275	274		1	
1960	441	439		2	
1959	127	126		1	
1958	299	292		7	
1957	360	355		5	
1956	58	57		1	
1955	41	41		—	
1954	103	103		—	
1953 and earlier	456	454		2	
TOTAL ....	3068	3049		19	

**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)
1964 and later	—	16	16
1963	2	86	87
1962	2	65	67
1961	14	31	44
1960	16	68	83
1959	7	25	30
1958	28	45	71
1957	45	59	100
1956	7	10	16
1955	8	2	10
1954	15	4	19
1953 and earlier	122	44	154
TOTAL ....	266	455	697

TABLE C — OTHER INSPECTIONS

Number of Special Inspections	....	....	261
Number of Re-Inspections	....	....	797
			1058

TABLE D — INFESTATION WITH VERMIN

(a)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons	....	....	18978
(b)	Total number of individual pupils found to be infested	....		467
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act 1944)			NIL
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act 1944)			NIL

Organ	1951		1952		1953		Total
	(a)	(b)	(a)	(b)	(a)	(b)	
Heart	1	2	1	1	1	3	6
Lungs	1	1	1	1	1	3	6
Developmental	1	1	1	1	1	3	6
Psychic Glands	1	1	1	1	1	3	6
Other	1	1	1	1	1	3	6
Neurotic System	1	1	1	1	1	3	6
Psychological	1	1	1	1	1	3	6
Abdomen	1	1	1	1	1	3	6
Other	1	1	1	1	1	3	6

## PART II — DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

TABLE A — PERIODIC INSPECTION

DEFECT OR DISEASE	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	T	O	T	O	T	O	T	O
Skin	20	4	15	2	65	8	100	14
Eyes								
(a) Vision	4	38	137	10	125	40	266	88
(b) Squint	36	9	2	1	36	6	74	16
(c) Other	3	3	—	—	4	4	7	7
Ears								
(a) Hearing	1	19	—	—	2	34	3	53
(b) Otitis Media	3	8	1	1	2	7	6	16
(c) Other	3	4	—	—	—	2	3	6
Nose and Throat	27	34	5	4	29	27	61	65
Speech	42	23	—	—	17	8	59	31
Lymphatic Glands	—	10	—	—	—	3	—	13
Heart	4	18	2	3	3	23	9	44
Lungs	7	10	4	4	9	10	20	24
Developmental								
(a) Hernia	3	—	—	—	2	—	5	—
(b) Other	3	4	—	1	4	3	7	8
Orthopaedic								
(a) Posture	1	—	1	10	2	7	4	17
(b) Feet	11	9	7	3	23	21	41	33
(c) Other	9	17	3	3	14	11	26	31
Nervous System								
(a) Epilepsy	—	—	—	1	2	1	2	2
(b) Other	—	3	1	1	2	2	3	6
Psychological								
(a) Development	—	20	1	6	4	39	5	65
(b) Stability	8	64	1	11	19	77	28	152
Abdomen	1	9	1	2	5	13	7	24
Other	2	2	8	7	8	12	18	21

(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	13	—
Eyes		
(a) Vision	45	27
(b) Squint	1	1
(c) Other	—	—
Ears		
(a) Hearing	19	23
(b) Otitis Media	—	—
(c) Other	1	1
Nose and Throat	2	2
Speech	4	2
Lymphatic Glands	—	—
Heart	—	6
Lungs	—	1
Developmental		
(a) Hernia	—	—
(b) Other	5	2
Orthopaedic		
(a) Posture	—	—
(b) Feet	9	5
(c) Other	3	—
Nervous System		
(a) Epilepsy	—	—
(b) Other	6	6
Psychological		
(a) Development	2	—
(b) Stability	2	5
Abdomen	1	1
Other	19	15



PART III — TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (including Nursery 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	9
Errors of refraction (including squint)	463
TOTAL	472
Number of pupils for whom spectacles were prescribed	210

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	17
(b) for adenoids and chronic tonsillitis	244
(c) for other nose and throat conditions	20
Received other forms of treatment	NIL
TOTAL	281
Total number of pupils in schools who are known to have been provided with hearing aids:—	
(a) in 1968	1
(b) in previous years	6

TABLE C — ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients' departments	199
(b) Pupils treated at school for postural defects	5
TOTAL	204

TABLE D — DISEASES OF THE SKIN  
(excluding uncleanliness, for which see Table D of Part I)

						Number of cases known to have been treated
Ringworm:—						
(a) Scalp	....	....	....	....	....	—
(b) Body	....	....	....	....	....	—
Scabies	....	....	....	....	....	—
Impetigo	....	....	....	....	....	—
Other skin diseases	....	....	....	....	....	129
TOTAL					....	129

TABLE E — CHILD GUIDANCE TREATMENT

						Number of cases known to have been treated
Pupils treated at Child Guidance Clinics						146

TABLE F — SPEECH THERAPY

						Number of cases known to have been treated
Pupils treated by speech therapists						149

TABLE G — OTHER TREATMENT GIVEN

						Number of cases known to have been dealt with
(a) Pupils with minor ailments	....	....	....	....	....	89
(b) Pupils who received convalescent treatment under School Health Service arrangements	....	....	....	....	....	NIL
(c) Pupils who received B.C.G. vaccination (by Chest Physician)	....	....	....	....	....	18
(d) Pupils who completed courses of U.V.R. treatment	....	....	....	....	....	8
TOTAL					....	115

PART IV — DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING THE YEAR

**2. Attendances and Treatment**

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First Visit	1. 884	12. 734	23. 138	1756
Subsequent Visits	2. 1016	13. 1698	24. 371	3085
Total Visits	1900	2432	509	4841
Additional courses of treatment commenced	3. 112	14. 106	25. 28	246
Fillings in permanent teeth	4. 716	15. 1975	26. 430	3121
Fillings in deciduous teeth	5. 891	16. 81	—	972
Permanent teeth filled	6. 617	17. 1745	27. 398	2760
Deciduous teeth filled	7. 786	18. 79	—	865
Permanent teeth extracted	8. 10	19. 125	28. 41	176
Deciduous teeth extracted	9. 637	20. 277	—	914
General anaesthetics	10. 192	21. 100	29. 8	300
Emergencies—see note (e) attached	11. 104	22. 62	30. 17	183

Number of Pupils X-rayed	31. 52
Prophylaxis	32. 324
Teeth otherwise conserved	33. 299
Number of teeth root filled	34. 2
Inlays	35. 1
Crowns	36. 8
Courses of treatment completed	37. 1544

**3. Orthodontics**

Cases remaining from previous year	—
New cases commenced during year	38. 38
Cases completed during year	39. 22
Cases discontinued during year	40. 12
No. of removable appliances fitted	41. 72
No. of fixed appliances fitted	42. 4
Pupils referred to Hospital Consultant	43. —

**4. Prosthetics**

	5—9	10—14	15 & over	Total
Pupils supplied with F.U. or F.L. (first time)	44. —	47. —	50. 1	1
Pupils supplied with other dentures (first time)	45. —	48. 10	51. 3	13
Number of dentures supplied	46. —	49. 13	52. 5	18

**5. Anaesthetics**

General Anaesthetics administered by Dental Officers 53. 4

**6. Inspections**

(a) First inspection at school. Number of pupils	A. 9190
(b) First inspection at clinic. Number of pupils	B. 174
Number of (a) (b) found to require treatment	C. 3961
Number of (a) (b) offered treatment	D. 3422
(c) Pupils re-inspected at school or clinic	E. 1215
Number of (c) found to require treatment	F. 500

**7. Sessions**

Sessions devoted to treatment	X. 864
Sessions devoted to inspection	Y. 101
Sessions devoted to Dental Health Education	Z. 1



