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Borough of Nuneaton

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# Annual Report

of the

School Medical Officer

for 1953

J. H. BRISCOE-SMITH, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

*School Medical Officer*





*per order  
16/12/52*



Borough of Nuneaton

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# Annual Report

of the

School Medical Officer

for 1953

# NUNEATON COMMITTEE FOR EDUCATION

(As on December 31st, 1953)

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Alderman C. J. S. Dickens (Chairman)

His Worship the Mayor (Alderman C. H. Cartwright, J.P.)

Alderman W. R. Chamberlain, M.B.E., J.P., Alderman P. Woodward,

Alderman R. Hadden

Councillor H. A. Corbett

Councillor C. P. Mann

„ H. Deans

„ A. E. W. Southorn

„ H. J. Deeming

„ E. Waite

„ L. Ford

„ F. B. J. Warr

„ W. F. Harris

„ L. Whetstone

Councillor R. Wilkinson

---

## CO-OPTED MEMBERS:

The Rev. Father B. F. Cox

The Rev. Canon F. S. Herbert

Mr. J. Riley (N.S.P.C.C.)

Mr. W. L. Smith, B.Sc.

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## REPRESENTATIVES OF THE LOCAL EDUCATION AUTHORITY,

### NOMINATED MEMBERS:

County Alderman Miss A. H. Moreton

County Councillor H. Cox

County Councillor B. W. Yardley

County Councillor B. J. Garner

---

The Director of Education: Mr. R. F. Hargreaves, B.Sc.



# STAFF OF THE SCHOOL MEDICAL DEPARTMENT

School Medical Officer	<div> <div>G. R. KERSHAW, M.A., M.R.C.S., L.R.C.P., D.P.H. (resigned 30.9.53)</div> <div>J. H. BRISCOE-SMITH, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H. (commenced 16.11.53)</div> </div>
Assistant School Medical Officers	<div> <div>G. K. G. COOTE, M.B., B.S. M.R.C.S., L.R.C.P.</div> <div>L. S. STEPHENS, M.B., Ch.B., D.R.C.O.G., D.P.H.</div> <div>M. STEANE, M.B., Ch.B.</div> <div>W. E. RIGBY, M.B., Ch.B. (resigned 19.2.53)</div> <div>G. HIRD, M.B., Ch.B., D.P.H. (commenced 1.9.53)</div> </div>
Part-time Assistant School Medical Officers	<div> <div>E. A. LUMLEY, C.B.E., M.C., M.D., M.B., B.Ch., B.A.O., D.P.H. (resigned 1.9.53)</div> <div>P. VINCENT-DAVISS, M.B., Ch.B., M.R.C.S., L.R.C.P. (resigned 26.11.53)</div> <div>B. SLOAN, M.B., Ch.B.</div> </div>
Consultant and Surgeon— Orthopædic Clinic	<div> <div>J. H. PENROSE, M.B., B.Chir., F.R.C.S., M.R.C.S., L.R.C.P.</div> </div>
School Oculist	<div> <div>C. E. CLARK, M.B., Ch.B., D.O.M.S.</div> </div>
School Dental Officer	MRS. L. J. M. KNOX, L.D.S.
Part-time School Dental Officer	<div> <div>SGN.-CMDR. S. BROWN, R.N. (Resigned 26.2.53)</div> </div>
Dental Attendant	MISS L. JACKSON
Consultative Psychiatrist— Child Guidance Clinic	<div> <div>K. R. THOMAS, M.R.C.S., L.R.C.P., D.P.M.</div> </div>
Speech Therapist	<div> <div>MISS M. THOMAS, L.C.S.T. (resigned 30.7.53)</div> <div>MRS. D. NEVILLE, L.C.S.T. (commenced 5.10.53)</div> </div>

School Nurse

MRS. L. G. BOFF

Health Visitors  
School Nurses

{  
MISS K. N. DAVIES  
MISS K. T. FLYNN  
MISS I. SNAPE  
    (transferred 4.5.53)  
MISS M. A. HALLSWORTH  
MISS G. SCHOFIELD  
MISS E. FIFE  
MRS. B. KERSEY  
    (commenced 27.4.53)  
MISS J. BUSH  
    (commenced 4.5.53)  
MISS D. MASON  
    (commenced 29.6.53)  
MISS O. DILCOCK  
}

Clerical Staff

W. WOOD (Chief Clerk)

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit to you the Annual Report on the School Health Service for the year 1953.

The total number of children on the school registers has declined slightly during the year from 9,471 in 1952 to 9,359 on the 31st December, 1953. This decrease is reflected in the somewhat smaller number of periodic medical examinations of children entering school for the first time.

#### Physical Condition of Pupils

The health of the school children was generally good during the year, and the physical condition of those examined remains satisfactory. In Table VII, on page 14, the children examined during the year are classified according to their general condition into three categories:

A.—Good; B.—Fair; C.—Poor;

The division between Good, Fair and Poor is necessarily arbitrary, and the position is further complicated by the interpretation placed upon these words by the Ministry of Education.

Prior to 1948, children were classified on examination as:

A.—Excellent

B.—Normal

C.—Slightly Subnormal

D.—Bad

In 1948 a new form of School Medical Record was introduced and on this appeared the classification now used. In an explanatory letter from the Special Service Branch of the Ministry in March, 1948, medical officers were asked to place children in the new categories A, B and C, as follows:

A.—Those better than normal or "good"  
(our former "Excellent"—A)

B.—The normal or "Fair"  
(our former "Normal"—B)

C.—Those below normal or "Poor"  
(our former "slightly subnormal"—C  
and former "Bad"—D).

It will be seen that such a convention is bound to lead to confusion when part-time medical officers are employed, since it is natural to interpret the word "Fair" as meaning something less than normal good health. Even among school medical officers regularly engaged in the examination of children there are variations in practice, since many of them feel that they cannot conscientiously place a child who is normal and whose physical condition is satisfactory in all respects in any category but A (Good).

The effect of this throughout the country is that there are two types of classification. Either the medical officer obeys the



convention of the Ministry and places almost every child in Category B (Fair) and reserves Category A (Good) for the occasional really exceptional child, or he places every child in normal good health in Category A (Good) and uses Category B (Fair) and C (Poor) to indicate that the child enjoys in greater or less degree something falling short of good health.

In Nuneaton during 1953 the majority of the children examined were classified by medical officers who observed the convention of the Ministry. In interpreting the figures in Table VII it should, therefore, be borne in mind that most of the children placed in Category B (Fair) were, in fact, in a state of normal good health, while those placed in Category A (Good) were, in the main, in excellent condition.

### **Infectious Diseases**

There were no severe outbreaks of infectious disease in the schools during the year, although there was some poliomyelitis and six school children were affected. In view of the incidence of this disease in neighbouring areas, and in other parts of the country, we were fortunate in having so few cases. Of the six children who contracted the disease, only three developed paralysis and I am happy to report that by the end of the year, recovery was almost complete in one of these, while the other two children had only minor degrees of disability.

### **Dental Inspection**

It will be seen from Table XIII, on page 17, that it was possible during the later part of the year to undertake a small amount of routine dental inspection of children in school. This very important work has had to be neglected for some years as a result of the shortage of dental officers, but it is hoped that recent increases in the dental staff in the county will make it possible once again to carry out regular inspections.

### **Diphtheria Immunisation**

In Table XX, on page 21, the number of children of school age who have been immunised against diphtheria up to the end of the year, is shown. This number has increased since the end of 1952 by 656 children, although the total school population has fallen slightly. While this means that 77 per cent. of all school children have some protection against diphtheria, an increase of 10 per cent. since 1952, there are still over 2,000 children in schools in Nuneaton who may be susceptible to this disease.

In the days when diphtheria was common, children were constantly being subjected to infection. Although many of them developed the disease, a proportion became immune as a result of repeated small doses of the infecting organism early in life.

Diphtheria as a disease is becoming a rarity, and although virulent diphtheria organisms are still to be found in the throats of many apparently healthy members of the population who are themselves resistant to the infection, it has been suggested that the distribution of these organisms is now less wide-spread than previously. This is very satisfactory but, paradoxically, it may



actually increase the danger to the unimmunised child, since his chances of acquiring a natural immunity by contact with the infecting organisms are correspondingly reduced.

Immunisation is available to every child in infancy and again when he or she first enters school. It is a simple and safe procedure which is almost painless. Its value cannot be over-estimated, not only because it protects the individual child against a very serious disease, but because the maintenance of a high proportion of immunised persons in the community is our main defence against the possible recurrence of the diphtheria epidemics of the past.

#### **Visit of the Mass Radiography Unit**

In March the Mass Radiography Unit visited the Higham Lane Schools. This was arranged because an infectious case of tuberculosis had been discovered within the school. All children and members of the staff were invited to attend, and this invitation was accepted in almost every case. As a result of the survey only one child with active tuberculosis was discovered, although three others were found to be suffering from conditions, other than tuberculosis, for which treatment was necessary. It is pleasing to report, therefore, that there was no evidence of a spread of infection from the original case.

I cannot conclude without expressing my thanks to my predecessor, Dr. G. R. Kershaw, who was so helpful at the time when I took up my duties in November, 1953. In preparing this Report I have had to rely largely upon material collected by him and he has always been willing to offer advice and help when this has been needed. I wish to thank Dr. K. R. Thomas who has once again kindly provided some notes on the work of the Child Guidance Clinic during the year, and my thanks are due to the Consultants, Almoners and Administrative Staff of the Hospitals and to the local General Practitioners for their willing and helpful co-operation with the School Health Service during the year. My thanks are also due to the staff of the School Health Service and to the Borough Education Officer. I am grateful to you, Mr. Chairman, and members of the Committee for your kindness to me since my appointment.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

J. H. BRISCOE-SMITH,

School Medical Officer.

31st October, 1954.

Table I

## SCHOOLS WITHIN THE BOROUGH

## PRIMARY SCHOOLS

## County Schools

	<i>No. on the roll</i>				31-12-53
Attleborough (Senior, Junior)	...	...	...	...	470
Attleborough (Infants)	...	...	...	...	223
Chilvers Coton (Junior)	...	...	...	...	370
Chilvers Coton (Infants)	...	...	...	...	227
Galley Common (Senior, Junior, Infants)	...	...	...	...	186
Heath End (Junior, Infants)	...	...	...	...	158
Higham Lane (Junior)	...	...	...	...	361
Higham Lane (Infants)	...	...	...	...	203
Queen's Road (Junior)	...	...	...	...	589
Queen's Road (Infants)	...	...	...	...	330
Shepperton (Junior)	...	...	...	...	350
Stockingford Boys (Senior, Junior)	...	...	...	...	473
Stockingford Girls (Senior, Junior)	...	...	...	...	438
Stockingford (Infants)	...	...	...	...	300
Middlemarch (Junior)	...	...	...	...	130

## Voluntary Schools

Abbey Street C.E. (Junior)	...	...	...	...	340
Abbey Street C.E. (Infants)	...	...	...	...	215
Attleborough C.E. (Infants)	...	...	...	...	150
Chilvers Coton C.E. (Infants)	...	...	...	...	216
Stockingford C.E. (Senior, Junior, Infants)	...	...	...	...	240
Vicarage Street C.E. (Junior)	...	...	...	...	212
Vicarage Street C.E. (Infants)	...	...	...	...	129
St. Joseph's R.C. (Senior, Junior, Infants)	...	...	...	...	400

## SECONDARY SCHOOLS

Arbury (Modern)	...	...	...	...	493
Higham Lane (Modern)	...	...	...	...	332
Manor Park (Technical)	...	...	...	...	402
Swinnerton (Modern)	...	...	...	...	404
High School for Girls (Grammar)	...	...	...	...	468

## Voluntary Schools

King Edward VI (Grammar)	...	...	...	...	350
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## NURSERY SCHOOLS

Avenue Road	...	...	...	...	40
Stockingford	...	...	...	...	40

## Total number of children on School Register:

Primary Schools	...	...	...	...	6,830
Secondary Schools	...	...	...	...	2,449
Nursery Schools	...	...	...	...	80
					<hr/> 9,359



Table II

## CLINICS

Service.	Situation of Premises.	Days Open.
Minor Ailment Clinic	Riversley Park, Coton Road	Monday and Thursday, 9—12 noon. Medical Officer in attendance.
	Cross Street, Stockingford	Tuesday and Friday, 9—12 noon. Medical Officer in attendance.
Treatment Clinics	Riversley Park, Coton Road	Every week-day morn- ing, 9—10 a.m.
	Cross Street, Stockingford	Every week-day morn- ing, 9—10 a.m.

The following Clinics are by appointment only:

Eye Clinic	Riversley Park, Coton Road	(1) Monday Twice monthly, at 9 a.m. (2) Every Tuesday at 9 a.m. (3) Alternate Fridays at 9 a.m.
Orthopædic Clinic	Riversley Park, Coton Road	Intermediate treat- ment: Monday 9—12 noon. Tuesday and Friday 2—5 p.m. Con- sultant in attendance on the last Friday of each month.
Ultra-Violet Light Clinic	Riversley Park, Coton Road	Monday and Thursday at 2 p.m.
	Cross Street, Stockingford	Monday and Thursday at 10-45 a.m.
Dental Clinic	Riversley Park, Coton Road	Every week-day, 9.30 a.m.—12.30 p.m., 2— 5 p.m.
Speech Therapy Clinic	Riversley Park, Coton Road	Every Wednesday, 9 a.m. —1 p.m., 2—5 p.m.
Child Guidance Clinic	Riversley Park, Coton Road	Every Wednesday 10— 12 noon.

**SCHOOL MEDICAL SERVICE**  
ANNUAL RETURN FOR THE YEAR ENDING  
DECEMBER 31st, 1953

**Table III**  
**MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED**  
**PRIMARY AND SECONDARY SCHOOLS**

1—PUPILS ATTENDING MAINTAINED PRIMARY AND  
SECONDARY MODERN SCHOOLS

A—Number of inspections in the prescribed Groups:

Entrants	...	...	...	...	...	1,213
Second Age Group	...	...	...	...	...	810
Third Age Group	...	...	...	...	...	506
						Total ... 2,529
8 years old (vision)	...	...	...	...	...	534
						Grand Total ... 3,063

B—Other inspections:

Number of Special Inspections	...	...	...	...	195
Number of Re-Inspections	...	...	...	...	1,199
					Total ... 1,394

2—PUPILS ATTENDING MAINTAINED SECONDARY  
GRAMMAR SCHOOLS

A—Number of inspections in the prescribed Groups:

Third Age Group	...	...	...	...	...	112
-----------------	-----	-----	-----	-----	-----	-----

B—Other Inspections:

Number of other Periodic Inspections						
(aged 11 years)	...	...	...	...	...	5
Number of Special Inspections	...	...	...	...	...	5
Number of Re-Inspections	...	...	...	...	...	40
					Total ...	50

Table IV

**PUPILS FOUND TO REQUIRE TREATMENT**

Number of individual pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin).

GROUP	For defective vision (excluding squint)	For any other conditions recorded in Table V	Total Individual Pupils
1	2	3	4
<b>1. Pupils attending Maintained Primary and Secondary Modern Schools:</b>			
Entrants	7	47	48
Second Age Group	33	42	63
Third Age Group	21	15	33
Total (prescribed groups)	61	104	144
8 years old (vision)	37	—	37
Grand Total	98	104	181
<b>2. Pupils attending Maintained Secondary Grammar Schools:</b>			
Third Age Group	3	1	4



**Table V**  
**RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN**  
**THE YEAR ENDED DECEMBER 31st, 1953**

**1. Pupils attending Maintained Primary and Secondary  
Modern Schools**

Defect Code No.	DEFECT OR DISEASE	Periodic Inspections Prescribed Groups and 8 years old		Special Inspections	
		No. of Defects		No. of Defects	
		Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
4	Skin .. .. .	10	16	—	1
5	Eyes:				
	(a) Vision .. .. .	98	152	3	8
	(b) Squint .. .. .	9	30	—	—
	(c) Other .. .. .	8	4	—	—
6	Ears:				
	(a) Hearing .. .. .	1	8	—	1
	(b) Otitis Media .. .. .	2	24	—	2
	(c) Other .. .. .	5	4	—	—
7	Nose or Throat .. .. .	17	110	3	5
8	Speech .. .. .	3	6	3	7
9	Cervical Glands .. .. .	2	42	—	8
10	Heart and Circulation .. .. .	5	13	—	1
11	Lungs .. .. .	4	59	1	7
12	Developmental:				
	(a) Hernia .. .. .	1	6	—	1
	(b) Other .. .. .	2	28	—	—
13	Orthopædic:				
	(a) Posture .. .. .	1	26	1	2
	(b) Flat Foot .. .. .	5	29	—	—
	(c) Other .. .. .	15	44	—	2
14	Nervous System:				
	(a) Epilepsy .. .. .	—	5	—	—
	(b) Other .. .. .	—	9	—	2
15	Psychological:				
	(a) Development .. .. .	1	4	—	6
	(b) Stability .. .. .	1	5	—	1
16	Other (excluding Dental defects) ..	12	31	2	6
	Totals .. .. .	202	655	13	60

**Table VI**  
**RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN**  
**THE YEAR ENDED DECEMBER 31st, 1953**  
**2. Pupils attending Maintained Secondary Grammar Schools**

Defect Code No.	DEFECT OR DISEASE	Periodic Inspection. leavers		Other Periodic Inspections		Special Inspections	
		Requiring treatment	Requiring to be kept under observation	Requiring treatment	Requiring to be kept under observation	Requiring treatment	Requiring to be kept under observation
4	Skin .. .. .	—	—	—	—	—	—
5	Eyes:						
	(a) Vision ..	3	5	—	2	—	—
	(b) Squint .. ..	—	—	—	—	—	—
	(c) Other .. ..	—	—	—	—	—	—
6	Ears:						
	(a) Hearing ..	—	—	—	—	—	—
	(b) Otitis Media ..	—	—	—	—	—	—
	(c) Other .. ..	—	—	—	—	—	—
7	Nose and Throat .. ..	—	—	—	—	—	—
8	Speech .. .. .	—	—	—	—	—	—
9	Cervical Glands .. ..	—	—	—	—	—	—
10	Heart and Circulation ..	—	1	—	—	—	—
11	Lungs .. .. .	—	1	—	—	—	—
12	Developmental:						
	(a) Hernia .. ..	—	—	—	—	—	—
	(b) Other .. ..	—	—	—	—	—	—
13	Orthopædic:						
	(a) Posture .. ..	—	—	—	—	—	—
	(b) Flat Foot .. ..	—	1	—	—	—	—
	(c) Other .. ..	—	—	—	—	—	—
14	Nervous System:						
	(a) Epilepsy .. ..	—	—	—	—	—	—
	(b) Other .. ..	1	—	—	—	—	—
15	Psychological:						
	(a) Development .. ..	—	—	—	—	—	—
	(b) Stability .. ..	—	—	—	—	—	—
16	Other (excluding Dental Defects) ..	—	2	—	—	—	—
	Totals .. .. .	4	10	—	2	—	—

Table VII

**CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS  
INSPECTED DURING THE YEAR IN AGE GROUPS**

AGE GROUPS	Number of Pupils inspected	A (good)		B (fair)		C (poor)	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
1	2	3	4	5	6	7	8
<b>1. Pupils attending Maintained Primary and Secondary Modern Schools</b>							
Entrants	1213	378	31.2	826	68.1	9	.7
Second Age Group	810	341	29.8	564	69.6	5	.6
Third Age Group	506	92	18.2	413	81.6	1	.2
Total	2529	711	28.1	1803	71.3	15	.6
<b>2. Pupils attending Maintained Secondary Grammar Schools</b>							
Third Age Group	112	45	40.2	67	59.8	—	—



**Table VIII**

Treatment known to have been provided for children from maintained Primary and Secondary Schools by the Regional Hospital Board.

									Number of individual children treated
1. Skin									
(a)	Ringworm—Scalp	...	...	...	...	...	...	...	—
	Body	...	...	...	...	...	...	...	—
(b)	Scabies	...	...	...	...	...	...	...	—
(c)	Impetigo	...	...	...	...	...	...	...	2
(d)	Other Skin Diseases	...	...	...	...	...	...	...	11
2. Eye (treatment other than that given in our own clinics)									
(a)	External and other (excluding errors of refraction and squint)	...	...	...	...	...	...	...	8
(b)	Errors of refraction (including treatment of squint other than orthoptic treatment for which see Table X)	...	...	...	...	...	...	...	7
(c)	Number of pupils for whom spectacles were prescribed	...	...	...	...	...	...	...	4
(d)	Number of pupils for whom spectacles were obtained	...	...	...	...	...	...	...	—
3. Ear, Nose and Throat									
(i)	Received operative treatment								
(a)	for diseases of ear	...	...	...	...	...	...	...	10
(b)	for adenoids and chronic tonsillitis	...	...	...	...	...	...	...	264
(c)	for other nose and throat conditions	...	...	...	...	...	...	...	16
(ii)	Received other forms of treatment	...	...	...	...	...	...	...	79
4. Other treatment given (excluding orthopaedic and child guidance)									
(a)	respiratory conditions and infectious disease	...	...	...	...	...	...	...	96
(b)	abdominal conditions	...	...	...	...	...	...	...	26
(c)	accidents	...	...	...	...	...	...	...	15
(d)	heart conditions, chorea and rheumatism	...	...	...	...	...	...	...	24
(e)	other conditions	...	...	...	...	...	...	...	104

**Table IX**

**INFESTATION WITH VERMIN**

1. Total numbers of examinations in the schools by the school nurses or other authorised persons	...	...	...	21,069
2. Total number of <i>individual pupils</i> found to be infested	...	...	...	441
3. Number of individual pupils in respect of whom cleansing notices were issued	...	...	...	—
4. Number of individual pupils in respect of whom cleansing orders were issued	...	...	...	—

**Table X**

**TREATMENT OF EYE DISEASES, DEFECTIVE VISION AND  
SQUINT AT COUNTY EYE CLINICS**

Ophthalmic Part-Time Staff

DR. C. E. CLARK

No. of Sessions—125

<i>Clinic</i>	<i>Total</i>
Number of children who attended in 1953:	
New Cases ... ..	309
Re-examinations ... ..	461
Number of children prescribed spectacles in 1953:	
New Cases ... ..	177
Re-examinations ... ..	244
Number of pupils for whom spectacles were obtained ... ..	234
Number of children referred for orthoptic treatment:	
(a) by County Orthoptists ... ..	—
(b) by R.H.B. Orthoptists ... ..	46
Number of children known to have received orthoptic treatment during the year:	
(a) by County Orthoptists ... ..	—
(b) by R.H.B. Orthoptists ... ..	33
Number of children treated for eye diseases at clinic (excluding errors of refraction and squint) ... ..	4
Total cases on register at 31st December, 1953 ... ..	1,152

**Table XI**

**SPEECH THERAPY**

Number of sessions ... ..	110
Total number of attendances ... ..	679
Number of children attending at 1st January, 1953 ... ..	29
Number of first attendances during 1953 ... ..	20
Number of children recalled during 1953, after having been stood down in a previous year ... ..	9
Total number of children treated during 1953 ... ..	58
Number discharged during 1953	
(a) Treatment completed ... ..	9
(b) Left district ... ..	2
(c) Ceased attendance ... ..	4
Number stood down under review ... ..	7
Number remaining on register at 31st December, 1953 ... ..	43

**Table XII**  
**CLINICAL ANALYSIS OF SPEECH DEFECTS TREATED**  
**DURING 1953**

<i>Defect</i>	Treatment Completed		
	<i>No. treated</i>	<i>Cured or much improved</i>	<i>Moderate improvement</i>
Dyslalia ... ..	28	5	—
Sigmatism ... ..	2	—	—
Spastic Speech ... ..	3	—	—
Stammer ... ..	17	2	—
Dysphonia ... ..	1	—	—
Hyperrhinophonia ... ..	3	—	—
Cleft Palate ... ..	3	1	—
Chronic mouth breather ... ..	3	—	—
Deaf ... ..	1	—	—
Other ... ..	—	—	1
Total ... ..	61	8	1

**Table XIII**  
**DENTAL INSPECTIONS AND TREATMENT**

1—No. of children inspected by Dental Surgeon:	
(a) Routine Age Groups ... ..	204
(b) Specials ... ..	1,380
(c) Total Routine and Special ... ..	1,584
2—No. of new cases treated ... ..	1,021
3—No. of cases completed ... ..	925
4—No. of attendances made by children for treatment ... ..	2,139
5—No. of sessions held for:	
(a) Inspection ... ..	4
(b) Treatment ... ..	310
6—Fillings:	
(a) Permanent teeth ... ..	1,765
(b) Temporary teeth ... ..	316
7—Extractions:	
(a) Permanent teeth ... ..	453
(b) Temporary teeth ... ..	1,768
8—Administration of general anæsthetic for extraction ... ..	483
Administration of local anæsthetic for extraction ... ..	303
9—Other operations:	
(a) Permanent teeth ... ..	512
(b) Temporary teeth ... ..	93



Table XIV

ULTRA-VIOLET LIGHT CLINIC—RIVERSLEY PARK

Number of cases treated ... ..	100
Period of treatment ... ..	3—8 weeks
Cases cured ... ..	33
Cases much improved ... ..	31
Cases improved ... ..	14
Cases with condition not changed ... ..	—
Course not completed ... ..	5
Under observation at end of year ... ..	17

ULTRA-VIOLET LIGHT CLINIC—STOCKINGFORD

Number of cases treated ... ..	41
Period of treatment ... ..	6 weeks
Cases cured ... ..	16
Cases much improved ... ..	6
Cases improved ... ..	7
Cases with condition not changed ... ..	4
Course not completed ... ..	3
Under observation at end of year ... ..	5

Table XV

CHILDREN REFERRED TO PÆDIATRICIANS

<i>Disease</i>	<i>No. of Cases</i>
Respiratory ... ..	85
Orthopædic ... ..	2
Genito-Urinary ... ..	20
Abdominal ... ..	11
Ears ... ..	3
Nose and Throat ... ..	11
Cardio-Vascular ... ..	6
Nervous System ... ..	24
Skin ... ..	7
Rheumatism ... ..	16
T.B. (a) Lungs ... ..	1
(b) Other ... ..	3
Other Conditions ... ..	36
Total ... ..	225

**Table XVI**  
**MINOR AILMENT CLINICS**

DEFECT OR DISEASE	Nuneaton Clinic		Stockingford Clinic	
	236 sessions		222 sessions	
	No. of first attendances	No. of subsequent attendances	No. of first attendances	No. of subsequent attendances
<b>Skin:</b>				
Ringworm—Scalp ..	—	—	—	—
Body ..	2	6	—	—
Scabies .. ..	1	3	3	6
Impetigo .. ..	14	68	36	94
Other Skin Diseases	221	673	131	247
<b>Eye:</b>				
Blepharitis .. ..	10	10	6	10
Conjunctivitis .. ..	19	26	40	68
Other minor eye conditions .. ..	79	70	51	21
<b>Ear:</b>				
Miscellaneous minor ear conditions ..	76	206	46	67
<b>Nose and Throat:</b>				
Miscellaneous minor nose and throat conditions .. ..	22	8	88	56
All other minor ailments .. ..	821	1300	1065	1105
Totals .. ..	1283	2370	1466	1674
Grand Total—6,793				

**Table XVII**  
**HOME VISITS PAID BY THE SCHOOL NURSE AND HEALTH**  
**VISITORS/SCHOOL NURSES**

No. of visits on account of:

Personal Hygiene	...	...	...	...	...	417
Others—follow up	...	...	...	...	...	592

**Table XVIII**  
**HANDICAPPED PUPILS**  
**DETAILS OF PUPILS ON HANDICAPPED PUPILS REGISTER**  
**AT 31-12-53**

CATEGORY	Previously Ascertained	Ascertained in 1953	Total on Register
A. Blind	2	—	2
B. Partially Sighted	2	—	2
C. Deaf	7	1	8
D. Partially Deaf	3	—	3
E. Educationally Subnormal	64	29	93
F. Epileptic	3	—	3
G. Maladjusted	3	3	6
H. Physically Handicapped	24	10	34
I. Speech	—	—	—
J. Delicate	6	—	6
Mentally Deficient	36	11	47
<b>TOTAL</b>	150	54	204



**Table XIX**

**EMPLOYMENT OF CHILDREN BYE-LAWS**

Number of children examined under Employment of Children  
Bye-laws:

Number of children examined	...	...	...	222
Number granted certificates	...	...	...	222

**TABLE XX**

**DIPHTHERIA IMMUNISATION**

No. of children who have been immunised up to 31st  
December, 1953:

<i>Age</i>					<i>No.</i>
15 years	...	...	...	...	626
14 years	...	...	...	...	460
13 years	...	...	...	...	639
12 years	...	...	...	...	521
11 years	...	...	...	...	615
10 years	...	...	...	...	682
9 years	...	...	...	...	726
8 years	...	...	...	...	720
7 years	...	...	...	...	701
6 years	...	...	...	...	872
5 years	...	...	...	...	606
Total ...					7,168

**RIVERSLEY PARK CHILD GUIDANCE CLINIC**  
**ANNUAL REPORT, 1953**

New cases referred	...	...	...	...	...	...	37
Old cases	...	...	...	...	...	...	38
							<hr/> 75
Cases discharged or referred to other Agencies	...	...	...	...	...	...	28

**Analysis of presenting symptoms of new cases :**

Many cases have, of course, a multiplicity of symptoms. In these cases the main symptom has been used for the purpose of this analysis:

Habit Disorder	...	...	...	...	7
Behaviour Problem	...	...	...	...	22
Educational Problem	...	...	...	...	7
Physical Illness	...	...	...	...	1

There has been no alteration in the composition of the Child Guidance Team during the past year, and no significant changes in the work of the Clinic except that it has been possible to arrange an extra session on Friday afternoons which is devoted to more intensive individual psychotherapy for selected cases. This is already proving well worth while.

KENNETH R. THOMAS,  
Consultant Psychiatrist.





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