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Contributors

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NORTH RIDING OF YORKSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE

ANNUAL REPORT

OF THE

School Medical Officer

FOR THE YEAR

1951

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NORTH RIDING OF YORKSHIRE COUNTY COUNCIL EDUCATION COMMITTEE

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INTRODUCTION.

To the Members of the North Riding Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit my report on the school health service for the year 1951. It has been prepared on the same lines as in previous years and the report of the divisional medical officer on the service in the area of the Scarborough Divisional Executive is appended. Except where otherwise stated the figures given in this report do not relate to schools in the Scarborough Division.

Early in January, 1951, I was deprived of the valued services of my deputy, Dr. G. Walker, who resigned at that time to take up an appointment as Consultant Chest Physician with the Newcastle-upon-Tyne Regional Hospital Board. Dr. Walker became Deputy School Medical Officer on 1st December, 1939. He was the first holder of the post, and made a notable contribution to the work of the School Health Service during his period of office. In April Dr. A. D. C. S. Cameron was appointed as his successor. Dr. Ross-Keyt, to whose prolonged illness I made reference in my last report, was unable to return to duty and resigned at the end of January. There was no other alteration in the whole-time medical staff. Miss D. M. Bateman resigned her appointment as Dental Surgeon at the beginning of the year but continued her service on a part-time basis. Dr. J. S. Ruddell, Consultant Anaesthetist, commenced part-time duty as a dental anaesthetist in November, releasing the services of the dental surgeons on the staff for actual dentistry on some three half-days each week.

The arrangements made at the inception of the National Health Service of Act, whereby specialist advice and treatment was made available to school of children through specialists in the employ of the Regional Hospital Boards, were continued. Particularly heavy demands were made on the work of the Ophthalmologists so that towards the end of the year, a small waiting list of children to be seen at eye clinics began to form.

Two specially trained nurses continued during the year to devote all stheir time to the after-care and supervision of children undergoing treatment recommended by the orthopaedic surgeons.

In November it became possible to appoint a second speech therapist, (Miss C. V. Lang), who works mainly in the area of the Scarborough Divisional Executive. She also devotes some of her time to the treatment of children in the Ryedale area.

The ability to lip read is of great advantage to children who are hard of hearing. Unfortunately very few suitably trained teachers are available for this work. Mr. R. D. O'Brien has, since July of last year, conducted lip reading classes each Saturday afternoon at the School Clinic in Scarborough; children attended within a radius of 20 miles.

The first of the residential special schools which the Education Committee proposed under the Development Plan to provide for handicapped pupils was opened at Welburn Hall in January, 1951. This school which is staffed and equipped for the reception of physically handicapped pupils has already made a valuable contribution to the well being of those children who do not require active hospital treatment, but who are, because of their disability, unable to attend an ordinary school. Physiotherapy and other remedial measures are available as well as special educational treatment.

The assistant school medical officers, without exception, have commented favourably on the health of the children who were inspected during the year; those with the longest experience were particularly impressed by the virtual disappearance from the schools of children showing definite signs of malnutrition or gross crippling defects.

The medical inspections carried out during the year disclosed a rather maller percentage of children having defects of one kind or another which equired treatment. The number of children classified as being in poor general condition was also less by a small margin.

With regard to infectious disease, the incidence of poliomyelitis was rery much reduced as compared with the previous year. Once again there was a complete absence of diphtheria but localised outbreaks of measles and whooping cough occurred.

It is disappointing to have to report that the decrease in the incidence of the reminous conditions to which I referred in my report last year, was not naintained during 1951. There was instead, a fairly marked increase. Even to the number of children found to be infested remained substantially below hat of the pre-war years. A set back of this sort is, however, a reminder hat the efforts of the school nursing staff in this direction cannot, in any way, a relaxed. An appreciable number of cases of ringworm also were enountered. In the Tees-side area the co-operation of the Consultant Dermatologist, Dr. A. N. P. Milner, was sought. He very kindly agreed to meet me and the assistant school medical officers to discuss the methods of diagnosis, the treatment and the follow-up of infected children. I am rateful to Dr. Milner for his interest and advice with regard to this particular roblem, and for treating the affected children so promptly.

As regards the dental services, Miss Bateman who had held the appointment of school dental surgeon since 1st June, 1948, resigned her appointment mid-January, 1951, but continued to act as dental officer on a sessional

basis in part of the area which she formerly served. In addition to the parttime services of Mr. Atkinson at Scarborough, two other part-time officers were employed on dental work, one a dental surgeon in the York area, and the other a medical anaesthetist in private practice.

These changes in staff resulted in a slight diminution of sessions worked: (from 2717 to 2519), but the number of patients treated showed little variation from the preceding year. Mr. Craven, the chief dental officer, has continued to give much thought to the problems of the dental service and has contributed to a growing orthodontic service his specialised knowledge of the treatment of developmental abnormalties in the mouths of children.

* With regard to the general hygienic condition of the schools in the Riding, the more modern are, of course, extremely satisfactory in this respects. Improvements are required at many of the rural schools and these are being gradually undertaken.

In conclusion I should like to record my appreciation of the loyal assistance given to me by all the members of the staff in the school health service and to Dr. Cameron who drafted this report; my thanks for cooperation and valued support are also due to the staff of the Education Department and the head teachers of schools during the year under review.

J. A. FRASER, School Medical Officers

County Hall, Northallerton. August, 1952.

I. GENERAL STATISTICS.

The Education Committee are responsible for primary and secondary education throughout the administrative county but certain functions relating to primary and secondary education are exercised by the Scarborough Divisional Executive in the area of that division, namely the municipal borough of Scarborough, the urban district of Scalby, and the rural district of Scarborough.

Subject to the general direction of the Committee, the school health service in the Scarborough division is administered by the divisional executive and in this report statistics do not relate to the division unless specially mentioned as including the latter. For a complete picture of the services of the authority this report should be read in conjunction with the divisional school medical officer's report appended hereto.

Population of the administrative county (mid-year 1951)		379,000
No. of children on registers, primary schools, January, 1952		38,206
No. of primary schools January, 1952		323
No. of children on registers, secondary schools, January, 1952	4.	11,397
No. of secondary schools, January, 1952		40
(These figures include Scarborough division).		

II. STAFF.

(i) MEDICAL STAFF.

The medical staff engaged on administrative or clinical duties in the school health service during the year are named below—

SCHOOL MEDICAL OFFICER, (also County Medical Officer).

J. A. Fraser, M.B., CH.B., D.P.H.

DEPUTY SCHOOL MEDICAL OFFICER, (also Deputy County Medical Officer).

G. WALKER, M.B., CH.B., M.R.C.P. (E), D.P.H. (resigned 11-1-51).

A. D. C. S. CAMERON, M.B., CH.B., D.P.H. (appointed 23-4-51).

ASSISTANT SCHOOL MEDICAL OFFICERS.

MARGARET D. CAIRNS, M.B., CH.B., D.P.H.

NOEL HAY, M.B., B.CH., B.A.O.

Doris M. Todd, M.B., B.S., M.R.C.S., L.R.C.P.

ASSISTANT SCHOOL MEDICAL OFFICERS, (also medical officers of health for one or more sanitary district and executive officer for Part III Services under the National Health Service Act, 1946).

W. H. BUTCHER, M.B., D.P.H.

W. R. M. COUPER, MB., CH.B., D.P.H.

MEDICAL OFFICERS-continued.

- J. A. Dunlop, M.B., Ch.B., D.P.H.
- H. PATTINSON, M.B., CH.B., D.P.H.
- A. PRIESTMAN, M.B., CH.B., D.P.H.
- J. W. A. RODGERS, M.B., CH.B., D.P.H.
- F. D. Ross-Keyt, M.B., Ch.B., D.P.H. (retired 31-1-51).
- B. Schroeder, M.B., Ch.B., D.P.H.
- W. SHARPE, M.B., CH.B., D.P.H., B.SC.

SCARBOROUGH DIVISION.

DIVISIONAL SCHOOL MEDICAL OFFICER, (also medical officer of health for the Borough of Scarborough, Scalby U.D., Scarborough R.D. and executive officer for Part III Services under the National Health Services Act, 1946).

J. STOKOE, M.D., B.S., B.HY., D.P.H.

ASSISTANT SCHOOL MEDICAL OFFICERS.

ELIZABETH R. CAMERON, M.B., CH.B., D.P.H.

ELIZABETH D. ELLISON, B.A., CH.B., (temporary part-time).

SYDNEY E. JACKSON, M.B., CH.B. (temporary part-time).

(ii) DENTAL STAFF

- S. CRAVEN, L.D.S., Chief Dental Officer.
- A. D. CLARKE, L.D.S.
- C. E. PLACE, L.D.S.
- C. G. LINGFORD, L.D.S., M.R.C.S., L.R.C.P., Dental Anaesthetist.
- R. B. Steel, l.d.s.
- MISS D. M. BATEMAN, B.CH.D., L.D.S. (resigned 16-1-51, part time from 18-1-51).
- P. H. DRYLAND, L.D.S., Part-time.
- J. S. RUDDELL, M.A., M.B., D.A., Dental Anaesthetist, (part-time from 6-11-51).

SCARBOROUGH DIVISION.

- J. C. CARR, L.D.S., R.C.S.
- D. Bewes Atkinson, L.D.S., part-time.

(iii) SPECIALIST OFFICERS. (Part-time).

- * Ophthalmic Surgeons . . J. A. Magnus, f.r.c.s., m.d., l.r.c.p.
 - B. Sheehan, M.B., Ch.B., D.O.M.S., B.SC.

SPECIALIST OFFICERS-continued.

A. E. P. PARKER, F.R.C.S., M.B., B.S., M.R.C.S., L.R.C.P.

F. S. Hubbersty, f.r.c.s., m.b., b.ch., m.r.c.s., l.r.c.p.

J. S. GOURLAY, M.B., CH.B., L.R.C.P., L.R.C.S., L.R.F.P.S.

J. ELLISON, M.R.C.S., L.R.C.P.

* Aural Surgeons

... J. B. T. KESWICK, M.B., CH.B.

G. L. THOMPSON, M.A., M.B., F.R.C.S.

* Orthopaedic Surgeon

H. L. CROCKATT, M.B., CH.B.

* Psychiatrist

M. C. GORDON, M.B., CH.B., D.P.M.

(iv) SPEECH THERAPISTS.

MISS I. M. S. KNIGHT, F.C.S.T. (Vacancy).

SCARBOROUGH DIVISION.

Miss V. Lang, L.C.S.T., (appointed 5-11-1951).

* Services of these Consultants are supplied by Regional Hospital Boards.

(v) LIP READING INSTRUCTOR.

SCARBOROUGH DIVISION .. R. D. O'BRIEN, (part-time).

(vi) SCHOOL NURSES.

The superintendent school nurse is also the superintendent health visitor and non-medical supervisor of midwives. Twenty-three nurses are employed full-time engaged in the preventive health services and of these 22 were engaged on health visiting as well as school nursing.

Superintendent School

Nurse .. Miss G. Berridge, S.R.N., S.C.M., A.R.S.I.

Assistant Superintendent Miss D. Miller, s.r.n., s.c.m., h.v. Certif. School Nurse (resigned 31-5-51).

MISS F. S. LEADER, S.R.N., S.C.M., H.V. Certif.

School Nurses

1 Full-time school nurse. Twenty-two H.v./s.ns. (half-time). The service equivalent to that of a further 13 full-time nurses is given by district nurses or combined-duty nurses.

(vii) ORTHOPAEDIC NURSES.

(with clinic and after care visiting duties).

C. CHAPMAN, S.R.N.

B. D. ROWELL S.R.N., S.C.M., Orthop. Certif.

(viii) PHYSIOTHERAPIST.

SCARBOROUGH DIVISION.

Mrs. G. M. Green, M.S.C.P., M.E., L.E.T. (part-time).

(ix) DENTAL MECHANICS.

R. G. HANSOM.

P. A. LAZENBY.

D. L. BAUGH, (Apprentice). J. D. WADE, (Apprentice).

(x) DENTAL ATTENDANTS.

Mrs. M. M. Hodgson.

MISS D. MORTON.

Mrs. O. Nelson.

Mrs. V. E. Crane.

MISS N. MALLEN

MISS M. ROBERTS.

SCARBOROUGH DIVISION.

Mrs. N. D. V. Storey.

(xi) CHIEF CLERK.

H. A. ROEBUCK, D.P.A.

III. MEDICAL INSPECTION OF PUPILS AT PRIMARY AND SECONDARY SCHOOLS.

(i) General.

On 31st December, 1951, there were 323 primary schools in the county including Scarberough; the number of departments was 354. There were 340 secondary schools.

Since 5th July, 1948, the Committee have been responsible for providing a education for pupils in hospital schools; these were previously provided by tuberculosis authorities and the governing bodies of certain long-stays voluntary hospitals.

The hospital schools in the Riding are as follows ;-

	Number of Places	Age Range	Number of pupils (January, 1952)
Adela Shaw Orthopaedic Hospital,	125	3-16	84
Kirbymoorside Northallerton Orthopaedic Hospital	100	2-16	61
Thornton Lodge Sanatorium,	40	3-16	21
Aysgarth Poole Sanatorium	58	3-16	32

(ii) School Hygiene.

In 1948 the Education Architect carried out a survey of all the schools in the Riding and drew up a programme of elementary improvements which could be put in hand in order to rehabilitate those schools which most required it, pending the more comprehensive alterations envisaged as part of the Development Plan required by the Education Act, of 1944. The type of improvement proposed as a first step comprised the provision of—

- (1) a piped water supply.
- (2) improved heating arrangements.
- (3) conversion of privies to water closets where water supplies and sewerage are available.
- (4) conversion of privies to pail closets where water supplies are not available, and
- (5) provision of playgrounds, or repairs to playgrounds where necessary.

In this way it was hoped to deal with the rehabilitation of school premises, particularly controlled and aided schools where very little could be done during the war years. This programme was put in hand in 1949 and should be completed by 1955. Meantime a close liaison is maintained between the medical and sanitary staff of the Medical Department and of the staff of the Education Architect, so that the latter are immediately notified of the completion of any new public water or sewerage scheme. In this way it is possible for the provision of these facilities at the schools in the areas in question to be fitted into the programme so that the necessary work is carried out at the earliest possible moment having regard to the financial position in the County.

During 1951 certain of the assistant school medical officers expressed concern with regard to the overcrowding which occurred at some all-age schools in their areas. As I remarked in my report last year these conditions call for a particularly high standard of caretaking. Pending the completion of the programme to which I have referred, a great deal can be done by the co-operation of all concerned to render even quite adverse conditions more satisfactory.

(iii) Medical Inspection.

As in 1950 it was not possible in every area to inspect all pupils in the five age groups which the Committee decided should be inspected. Accordingly attention was concentrated on the prescribed age groups (entrants, leavers primary, and leavers secondary), and the 7-8 and 12-13 age groups were inspected if time permitted.

FINDINGS OF MEDICAL INSPECTION.

Diseases and Defects.

Of the 19,436 children seen at periodic medical inspections, 3,622 were found to be suffering from a defect or disease (other than dental diseases and infestation with vermin). This represents 18.64% of all pupils inspected, and is lower than the corresponding figure for the previous year 20.23%. The decrease occurred mainly with respect to the third age group.

The following table shows the number of pupils inspected and the number found to require treatment.

		Number of Pupils			
Group	Inspected	Found to require treatmen (excluding dental diseases and infestation with vermin			
Entrants	 4,654	995 (21.38%)			
Second age group	 4,071	711 (17-46%)			
Third age group	 2,947	456 (15.47%)			
Total (prescribed groups)	 11,672	2,162 (18.52%)			
Other periodic inspections	 7,764	1,460 (18.80%)			
Grand Total	 19,436	3,622 (18-64%)			

Table II on page 29 shows details of the conditions found at medical inspections.

General Condition.

The assistant school medical officers have again been satisfied with the general condition and nutritional state of the children whom they inspected during 1951. The number of pupils classified as being in poor general condition amounted to 1.04% of the County as a whole and 0.69% in the Scarborough Division. The county figure is lower than the corresponding figure for 1950, while the Scarborough figure closely approximates to the figure for last year, which was 0.65%. The percentage of children classified as in poor condition continued, as in former years, to be highest in the entrant group. The figure fell significantly in the second age group and was slightly lower in the third age group.

This continuing trend of improved nutrition among school children can be attributed in no small measure to the school meals service. One assistants school medical officer remarks with regard to certain Class C children "th" combination of school meals and milk brought about a distinct improvement after some little time."

Milk in Schools.

The Chief County Health Inspector and his staff continued, under the arrangements which I reported last year, to play an active part in the supervision of school milk supplies. Every effort was made to stop the use of raw ungraded milk by obtaining alternative pasteurised or tuberculin tested supplies. Whereas the percentage of schools in the Riding being supplied with milk other than pasteurised or tuberculin tested was 18% in January, 1951, it had fallen to 11.7% at the end of the year.

Samples of tuberculin tested supplies were submitted for examination at six monthly intervals. Other supplies were sampled quarterly, excepting those found to be unsatisfactory; these latter were frequently tested until the cause for complaint had been removed.

In October, 1951, there were 27,568 pupils taking school meals compared with 26,890 in 1950 and 28,205 in 1949. The extent of the committee's catering activities in 1951 can be seen from the following table.

No. of children taking meals and milk at school in October, 1951.

		N	Meals	Milk
		Free	For payment	IVIIIK
SECONDARY				
Scarborough division		272	1,395	1,500
Remainder of Riding		675	4,604	5,400
PRIMARY			/	
Scarborough division		471	1,803	3,492
Remainder of Riding		2,214	16,134	26,165
Total	4.	3,632	23,936	36,557

Food Poisoning.

During April an outbreak of food poisoning occurred at two small village schools. The illness took the form of vomiting, abdominal pain, followed by diarrhoea, and in some cases prostration. All the children made a speedy and complete recovery. At one school thirty-three children out of thirty-eight were affected, while at the other, sixteen children out of forty-six became ill. Adults, resident in the area, and children not in attendance at school, were also sick so that it was possible to exclude the school meal as the cause. The milk supply, however, was common to the schools and to private houses in the neighbourhood, so that it was immediately suspected. The bacteriological investigation of samples of milk carried out by the District Medical Officer of Health in conjunction with the Director of Public Health Laboratory Service at Hull confirmed the milk supply as the cause of the trouble, the actual infection (mastitis) being traced to one cow in the herd in question. This incident underlines the need for constant vigilance.

Cleanliness.

In all 2,214 visits were paid to schools by nurses carrying out cleanliness surveys and 156,536 examinations were made; in addition 2,205 home visits were made ensuing out of these surveys. The vast majority of children seen at school medical inspections were once more found to be clean and completely free from any form of infestation. As I have already pointed out the modern treatment of pediculosis is comparatively simple, and is extremely efficient. It is, therefore, disappointing to have to report that there was an increase in the total number of individual pupils found to be infested. Cases of this sort were not, of course, uniformly distributed throughout the Riding. One assistant school medical officer states that he found the infestation rate remarkably high at the beginning of the year, but reports that due to a special effort on the part of the nurses, the position was considerably improved by the end of the year. There is no doubt that some mothers take the erroneous view that so long as no actual vermin are found in their child's hair, a few nits do not matter. They fail to realise that these nits will soon hatch out unless treated and spread to the other children in the class. important aspect of the problem is that older girls in particular are frequently found to be infested at the beginning of school terms. The work of the nurses in this direction is greatly assisted when these older children are encouraged to take an interest in their personal appearance and personal cleanliness, before they leave school.

There was again a reduction in the incidence of scabies. A very slight increase occurred in the incidence of impetigo.

The total incidence of ringworm again fell during 1951, although in certain parts of the county an appreciable number of cases were encountered. The assistant school medical officers work in close co-operation with the consultant dermatologists with regard to continuation of treatment and follow-up of cases. Immediately after the diagnosis of the first cases in a school, surveys of the other children were undertaken using Wood's Light and in this way spread of the condition was controlled.

Clothing and Footwear.

The clothing and footwear worn by the children were once again of a satisfactory standard and adequate in quality. Children were, however, seen from time to time, the repair of whose clothing had not received sufficient attention. The wearing of gum boots throughout the school day was discouraged.

Following up.

The school nursing service continued to play an important part in the scheme for medical inspection and treatment of the school population.

The school nurses attended inspections in schools and followed up cases in which treatment was advised in order to encourage and, if necessary, assist parents to obtain proper attention for their children. In this connection 8,245 domiciliary visits were made and details of the defects and visits are shown below.

Con	dition		No. of defects found for which treatment was considered necessary	No. of home visits by School Nurses
Cleanliness of head			 12	18
Nutrition			 34	67
Nose and Throat			 1,103	1,323
External Eye Diseas	e		 46	51
Ear Disease			 90	145
Teeth			 13	14
Heart and Circulation	n		 62	60
Lungs			 76	103
Nervous System			 32	53
Skin			 22	27
Ringworm			 3	4
Flat Feet			 104	173
Deformities			 134	170
Tuberculosis			 33	63
Speech			 63	110
Mental Condition			 3	5
Vision and Squint			 3,084	5,580
Hearing			 51	50
Miscellaneous			 170	229
	7	Γotal	 5,135	8,245

Note—Some of these cases are carried over from 1950 so that the totals do not coincide with those in the table at the end of the report; the latter apply only to the year 1951.

Treatment of Defects.

Last year I reported a fall in the attendances at minor ailment clinics in 1950 to 17,497 as compared with 21,925 in 1949. During 1951 still fewer attendances were made, the figure being 14,854. This downward trend must apparently, at least in part, be attributed to the introduction of the National Health Service Act. Another important cause is the ever improving health of the children, and particularly the decrease in infectious skin conditions.

It is, however, noteworthy that in one urban area the total attendances at the minor ailment clinic rose steeply during the year, whilst in another urban area, it was considered that attendances would have been much greater, had the clinic premises been more centrally situated with regard to the schools served. In still another area, a similar drawback was overcome by holding sessions in the medical inspection room at one of the schools.

Specialist sessions were again held in the authority's clinics throughout the year, the specialists being remunerated by the regional hospital boards. The pressure on the services of the consultant ophthalmologists was particularly heavy. It is, of course, of the first importance that any child suffering from a defect of vision should have the benefit of the advice of a medically qualified person who has specialist knowledge of this work. The supply of spectacles was improved during the year and little delay was experienced.

A large number of children were referred to the orthopaedic specialists working at the authority's clinics. This is particularly to be encouraged because in this way follow-up of the children by the orthopaedic nurses can be easily arranged (see page 16). With regard to operations for the removals of tonsils and adenoids, the conservative trend in medical opinion reported last year continued. Every step is taken, however, to ensure that those children who may be expected to benefit from the operation are referred for a consultant's opinion. Thanks to the co-operation of the specialists concerned, children in this category as a rule received speedy treatment. otologists were also most helpful with regard to the treatment of ear conditions and the ascertainment of children with defects of hearing. important that children with defects of hearing should be 'ascertained' at an early age. In the past many such children, because it was not appreciated that the difficulty which they had with their school work was due to impaired hearing, were regarded as being backward. To deal with this problem your Committee, at the end of the year, decided to move the County Council to authorise the purchase of a gramophone audiometer and the engagement of a special nurse to carry out an audiometric survey of children in the schools.

Table II of the statistical summary at the end of this report sets out of details of the defects found at routine inspection and Table IV deals with the defects treated.

Minor Ailments.

School clinic sessions were held four times weekly at Whitby, twice is weekly at Carlin How, Redcar, Thornaby, Grangetown, South Bank, and once weekly at Guisborough, Lingdale, Saltburn and New Skelton.

The school clinics were largely used for the treatment of minor ailments and defects which would otherwise have been neglected and allowed to go untreated.

Details of the work done are given in the table below from which it will be seen that minor injuries and skin conditions predominated.

Condition for which the School			d	Number of first visits	Number of re-visits
Scabies				19	30
Impetigo				217	350
Ringworm Head				215	489
,, Body				84	118
Verminous conditions				660	1,378
Minor Injuries				1,452	1,195
External Eye Disease				259	233
Ear Discharge and Deafn	iess			325	853
Nose and Throat		,		137	43
Vision				508	181
Heart and Circulation				3	_
Lungs				12	4
Nervous System				6	1
Tuberculosis				59	44
Skin (Non-Contagious)				724	874
Sores				762	1,781
Other conditions				973	498
Chilblains				26	52
Diphtheria Immunisation	1			251	38
	7	Γotal		6,692	8,162

Visual Defects and External Diseases of the Eye.

At routine inspection 818 pupils were found to require examination by the ophthalmic surgeons: in addition 200 pupils were referred because of squint. In all 206 clinic sessions were held in various parts of the Riding for the examination of children referred by the assistant school medical officers. At these sessions 1,621 children were examined: spectacles were prescribed in 1,251 cases but information is not available as to the number supplied during the year.

Enlarged Tonsils and Adenoids.

During the year under review 223 pupils received operative treatment for adenoids and chronic tonsilitis, while 284 pupils received other forms of treatment for nose and throat conditions, either through the authority's scheme or otherwise.

Ear Diseases.

Many cases of ear disease or defect were treated at the school clinics and there were 325 first attendances and 853 re-visits for such conditions made in 1951.

Sixteen sessions of a special clinic were held at which a consultant otologist examined or treated 190 pupils. The after-treatment was supervised by the school nurses.

Crippling Defects.

Crippling defects were treated at the Adela Shaw Orthopaedic Hospital, Kirbymoorside.

The following table shows the conditions and numbers of children treated as in-patients during the year.

Condition		No. of Chil treated	dren
Deformity of feet		 39	
Deformity of leg		 3	
Abnormality of spine		 2	
Dislocation of hip		 2	
Infantile hemiplegia		 5	
Infantile paralysis		 13	
Rickets		 2	
Traumatic paraplegia		 1	
Congenital amputations		 1	
Old fractures and injuries	S	 5	
Torticollis		 7	
Spastic paraplegia		 2	
Spastic diplegia		 3	
Scoliosis		 1	
Perthe's disease		 2	
Arthritis		 2	
Spina bifida		 1	
Ganglion of wrist		 1	
Osteomyelitis		 2	
Congenital amyotonia		 1	
Onychogryphosis		 1	
Myodystrophy		 2	
Synovitis of knee		 1	
Deformity of hip		 2	
Pseudocoxalgia		 1	
Scoliosis and Perthes' dis		 1	
Spinal deformity and defo	rmity		
of foot		 1	

At the following special orthopaedic clinics 482 sessions were held as compared with 344 in 1950; 613 children made 2,278 attendances as compared with 545 children and 1,500 attendances in the previous year. An A orthopaedic surgeon attended at 137 out of the 482 sessions mentioned.

Carlin How Kirbymoorside Malton Northallerton Redcar

Richmond Scarborough South Bank Thornaby Whitby

York (rented from the York Education Committee).

The increased number of sessions held is due to the fact that two orthopaedic nurses were employed during the whole year under review.

Tuberculosis.

Children suspected to be suffering from tuberculosis in any form were referred for examination and treatment to the appropriate chest physician.

THE SCHOOL DENTAL SERVICE.

Report by Mr. Craven, L.D.S., Chief Dental Officer.

Although there was a slight overall reduction in the number of dental staff for the year 1951, the output of work was maintained at approximately the same level as for the previous year. There are already signs that the approval of the salary award to dental officers, and the restrictions imposed upon private practitioners will gradually result in an increase in the staff of the school dental services. The provision of fully equipped dental clinics in the key centres will also help considerably in the recruitment of additional dental staff, and enable the authority to provide all the forms of treatment comprised in the dental scheme.

The completion of the dental clinics at Saltburn and Easingwold should prove to be a very useful acquisition to the school dental service for those areas. There is still urgent need for the establishment of fully equipped dental clinics at Richmond and Pickering which are key centres.

The mobile dental clinics have been kept in constant use, particularly in the more isolated rural parts of the Riding, and they will still be extremely useful for such districts even when all the proposed fixed dental clinics in the County are established.

The Northallerton and South Bank dental laboratories show an increase in the output of mechanical work, as shown in the annual returns for the year 1951, where 3,677 attendances were recorded for the provision of dentures and orthodontic appliances, etc. The actual work represented by this figure is in detail as follows:—515 regulation appliances, 221 dentures for school children, 15 fixed appliances, 106 oral screens, 236 record models 21 dentures for maternity and child welfare cases, 180 sets of x-ray negatives, 48 dentures repaired, 21 crowns and 20 gold inlays. It will be noted from these returns that the dental laboratories are fully equipped, and capable of producing any type of appliance required in modern dentistry, and the work is most varied.

There is, as anticipated, a steady increase in the demand for dental treatment and the provision of dentures from maternity and child welfare cases.

If this demand continues to increase and additional dental staff is appointed, it will be necessary to fill the vacant post of a dental technician at the Scarborough dental laboratory in the near future, possibly by way of a temporary appointment on a sessional basis to commence with. This laboratory, already equipped, in addition to relieving the pressure upon the other laboratories in the Riding, would provide a more intimate laboratory service for the Authority's dental surgeons in that area.

INFECTIOUS DISEASES.

During the year eight school children in the North Riding were notified as suffering from poliomyelitis. In four of the cases paralysis developed and one of these children died. Notifications were received with regard to the occurrence of 1,873 cases of measles and 565 cases of whooping cough in the school population.

Medical officers of health closed four schools on account of infectious disease. In two instances this action was taken because of outbreaks of measles. The other two schools were closed because of the occurrence of whooping cough and influenza respectively, among the scholars.

During the year 43 children were excluded from school for short periods on account of ringworm (9), verminous head or body (24) and other contagious skin conditions (10).

PHYSICAL TRAINING.

As in former years a full programme of physical education was provided for school children in the North Riding during 1951.

In addition to the physical education classes which were regularly, conducted, various other activities were engaged in. Mr. Wilfred Barber, the Committee's cricket coach visited the grammar schools regularly during the summer term. In Scarborough the Scarborough Club again gave the services of Mr. Croskill, their professional, and in this way selected secondary modern school boys received excellent coaching. At New Earswick a weekend cricket coaching course was given by Mr. Maurice Leyland, chief coach to the Yorkshire County Cricket Club, to twenty-four teachers.

Many schools took advantage of the Football Association's coaching scheme whereby the services of a qualified coach were available to them, on three occasions during the term, without charge.

One of the most important features of the year's work was the revival of the Easter Refresher Course for teachers. The Course, which was residential, and was conducted at the North Riding Training College at Scarborough, embraced both infant and junior work, as well as gymnastics of secondary school girls and boys, dance, athletics and cricket. Fifty-one teachers attended the course which extended over one week.

A country dance week was held at Wrea Head College during August. The majority of those who attended were members of the Authority's teaching staff.

In preparation for an extension of swimming in the Whitby and Eston areas, twenty-seven teachers enrolled for a lecture demonstration course which was held on four consecutive Saturday mornings at the Redcar baths. The modernisation of the filtration plant at the Whitby Pool, coupled with the fact that the Redcar Pool became available for use during the autumn term, allowed additional pupils to receive swimming instruction. Children from five Whitby schools attended the baths during the summer term. During the autumn term an age group from the Eston schools went to the Redcar baths. Although most of the teachers who were associated with these new swimming projects were teaching the subject for the first time, the results achieved were very commendable.

Under the sponsorship of the Schools Boxing Association pupils took part in inter-school, inter-area, and inter-county tournaments. Inter-school fixtures were arranged with regard to all the major games. There is a growing interest in athletics and a real need is apparent for more area, competitions at secondary school level.

The school camp sites at Scalby and Bainbridge were again available for use during the summer holidays. Ten schools used the sites and four hundred and eight children were in this way enabled to experience a week of out-door life. Still other schools conducted private camps and expeditions through the facilities offered by the Youth Hostel Association.

WELBURN HALL RESIDENTIAL SPECIAL SCHOOL FOR PHYSICALLY HANDICAPPED CHILDREN.

The Handicapped Pupils and School Health Service Regulations, 1945, contain the following definition:—

"Physically handicapped pupils, that is to say pupils not being pupils suffering solely from a defect of sight or hearing, who, by reason of disease or crippling defect, cannot be satisfactorily educated in an ordinary school or cannot be educated in such a school without detriment to their health or educational development."

The opening of the Welburn Hall Special School in January made long needed provision for the education of this category of handicapped child. This school has places for eighty pupils. It will be seen from the table that the children who were admitted, fell into the following broad groups from the point of view of their physical defect.

1. Orthopaedic Defects.

These children, because of a crippling defect of one kind or another are unable to attend an ordinary school. They do not require treatment in hospital, but most have already been in hospital for varying periods of time. Some will require to return to hospital periodically for further planned operative procedures, and all require continued physiotherapy and nursing care. A more detailed analysis of the children according to the nature of their orthopaedic defects brings out the following sub-groups:—

(a) Poliomyelitis.

These children prior to the onset of infantile paralysis were healthy normal children. As a result of this disease they have sustained crippling handicaps of varying degrees of severity. After the acute stage of their sillness, they have received orthopaedic treatment in hospital and have recovered during this period, differing amounts of their lost muscular power. Further recovery will be minimal. They no longer require to occupy a hospital bed, but they do require physiotherapy to maintain their muscular tone and in order that they may learn to use other muscles for tasks previously performed by muscles which have been weakened. The maintenance of the health of these children at the highest possible level, as well as their education and training is a very justifiable call on the community.

(b) Cerebral Palsy.

These children present a particularly difficult problem. Their defect was sustained at birth or in early infancy and because of its extent their intelligence is frequently impaired. Even when this is not the case, their education is often difficult because of associated speech defect and muscular inco-ordination. They require active physiotherapy, special exercises, a speech therapy, and may from time to time require surgical treatment.

(c) Miscellaneous crippling defects.

This group includes children suffering from such diseases as muscular advistrophy, spina bifida, tuberculosis of the hip and various other conditions. They also require physiotherapy and some require skilled nursing attention of because they wear plaster jackets or other appliances.

2. Medical Conditions.

(a) Diseases of the heart.

These children suffer from heart disease, either congenital or acquired to such a degree that they are unable to attend an ordinary school. Their activity requires to be carefully controlled and short periods of rest in bed may be necessary.

(b) Diseases of Chest.

The children in this group suffer from chronic chest infections, other than tuberculosis, and this may be associated with asthma. They require postural drainage, breathing exercises and careful supervision of their general health.

(c) Other medical conditions.

Included under this head are children suffering from the effects of coeliac disease, from severe diabetes, and from chorea.

From this brief review, it will be apparent that the school calls for a highly skilled staff and a wide range of equipment and facilities.

The orthopaedic cases are under the care of a visiting orthopaedic surgeon, Dr. H. L. Crockatt and his assistant. All the children are on the list of a local general practitioner, who prescribes any necessary medical treatment. Routine medical inspections are carried out by an assistant school medical officer. The school has a well equipped physiotherapy department, the physiotherapist working under the supervision of the orthopaedic surgeon. The Sister-in-Charge, assisted by a trained relief sister and a staff of nursing orderlies, carry out the nursing care of the children. Some twenty-five per cent of the children soil their beds and their clothing intermittently; several are doubly incontinent and further emphasis on the need for skilled nursing is not necessary.

At the end of the year 51 places at Welburn Hall were occupied by children resident in the North Riding. Fifteen places were occupied by children from other local education authorities within the area served by the Adela Shaw Orthopaedic Hospital.

The selection of these cases requires careful consideration both from the point of view of the nature and extent of the candidate's physical disability, as well as the child's intelligence and educational attainment. In the case of physically handicapped pupils, the latter is, of course, very often below average. Children with cerebral palsy, progressive conditions or double incontinence are not normally accepted from the areas of other authorities.

Diagnosis of Cases admitted to Welburn Hall Residential School during the Year.

		Orthopaedic Conditions.								Medi	cal Conditions.				
Age Range	Ante Pol mye		bı	re- ral lsy	Mu: la Dise	ir	Otl Co diti		He	art	Ch	est	Oth Co ditie	n-	
	В	G	В	G	В	G	В	G	В	G	В	G	В	G	
2-5	-	-	-	3	-	-	-	-	-	-	-	-	-	1	
5-10	4	4	5	2	2	2	4	4	-	2	1	1	1	-	
10-16	2	3	- 5	2	2	_	4	2	5	4	1	2	3	2	

CHILD GUIDANCE.

A complete child guidance team comprising a psychiatrist, educational psychologist, and psychiatric social worker was not available in the North Riding during the year. The Committee, however, decided to proceed with the appointment of an educational psychologist, and, in fact, such an appointment has now been made. The medical department arranged for forty-five children to be interviewed by psychiatrists at various centres during the year.

SECTION 57, EDUCATION ACT, 1944.

During 1951, 29 cases were reported to the local authority for the purposes of the Mental Deficiency Acts under Section 57 (3), and 7 children were reported under Section 57 (5). One report previously made to the local authority under Section 57 (3) was cancelled during the year.

SPEECH THERAPY.

During the first ten months of the year, Miss I. M. S. Knight worked single handed in the Tees-side area, as well as at Whitby and Scarborough, and her services were, therefore, very much in demand. As a result of good organisation of her work and the classification of children according to the nature of their speech defect, Miss Knight was able to treat a very large number of children throughout the year. Children were treated in classes rather than individually; the number and the different forms of speech defect are shown in the table along with the results obtained.

			20				
					Boys	Girls	Total
	Stammer				70	25	95
	Dyslalia				48	12	60
	Sigmatism				12	13	25
	Cleft palate				1	8	9
	Rhinophonia post ader	noidal			2	2	4
	Mutism				-	9	9
	Position at December,	1951			133	69	202
Of the	above children						
					Boys	Girls	Total
	Discharged as cured				13	10	23
	Withdrawn (i.e. left dis	trict,	unsatisfa	actory			
	attendance)				27	9	36
	Remaining under treat	ment			93	50	143
					133	69	202

As a result of the appointment of a second therapist, Miss Knight has been relieved of any duties in the Scarborough area. In addition to working in Scarborough, Miss Lang will be able to treat a number of children in the Ryedale area as well as visiting the Welburn Hall Special School.

EMPLOYMENT OF SCHOOL CHILDREN.

During the year 523 children were medically examined under the provisions of the bye-laws relating to the employment of children over 13 years of age. All except six were found fit for employment without detriment to their health.

NURSERY SCHOOLS AND CLASSES.

In addition to the nursery school at "Childhaven," Scarborough and nursery classes in the Scarborough Division on which the Divisional School Medical Officer has reported, three nursery classes were provided at schools in South Bank with places for 95 children in all.

Nursery classes were also held at Hinderwell Infants' School for 30 children, and Friarage Infants' School for 30 children aged three to five

HANDICAPPED PUPILS.

Formal ascertainment of handicapped pupils was carried out during he year in accordance with Section 34 of the Act, but placement in special chools was difficult owing to the demand for special educational treatment of this type exceeding the vacancies available. The number of handicapped pupils formally ascertained during the year was as follows.

				Boys	Girls	Tota
Educationally su	bnormal			 41	31	72
Educationally su	bnormal	and deaf		 1	-	1
Educationally su	bnormal	and delica	ate	 1	_	1
Blind				 _	-	_
Partially sighted				 1	1	2
Deaf				 - 1	4	5
Partially deaf				 _	2	2
Epileptic				 1	1	2
Maladjusted				 _	2	2
Delicate				 4	4	. 8
Physically handie	capped			 26	19	45
		T	otal	 76	64	140

No special educational treatment was provided in the ordinary primarys and secondary schools, save in the case of five partially sighted children whow had been provided special apparatus.

The following tables give particulars of pupils maintained in specials schools during the year under review and in the preceding year. As the scheme of divisional administration provides that all children found to be suffering from a disability of mind or body in the Scarborough division shall be reported by the Divisional Executive to the County Council, the tables summarise the position in the Administrative County.

Blind.					
		1	950	1	951
Name of School		Boys	Girls	Boys	Girls
Yorkshire School for the Blind, York		2	1	3	
Royal Victoria Blind School, Newcastle-on-Tyne		3	2	3	2
Schools for the Blind, Liverpool		1	1 -	,,	-
Blind Sunshine Home, Kingswinford		1	1		1
Blind Sunshine Home, Northwood		1	1		1
	* *			-	
Total		8	4	6	3
Partially Sighted.					
		. 19	950	19	951
Name of School		Boys	Girls	Boys	Girls
Yorkshire School for the Blind, York		1	1	2	_
Royal Victoria Blind School Newcastle on Type		1	_		
Sheffield School for the Blind		. 2	_	2	
St Vincent's School West Derby		1	_	1	
Royal Normal College for the Blind Powton Costle		_	-	_	1
Exhall Grange Special School Coventry		_		3	1
				0	1
Total		5	1	8	2
Deaf.		-			
	1	19	50	19	51
Name of School		Boys	Girls	Boys	Girls
Northern Counties School, Newcastle		-	1	_	2
Yorkshire School for the Deaf, Doncaster		5	9	6	7
5t. John's Institution, Boston Spa		-	e 1	_	1
Middlesbrough Day School for the Deaf		8	8	9	9
awns House School Leeds		1	1	1	1
Total .		14	20	16	20
				10	20
Deaf and Educationally Subn	or	mal.			
		19		19	51
Name of School		Boys	Girls	Boys	Girls
ridge House School, Harewood, Leeds		1	-	1	-
Total .		1	-	1	`-
	1				

Partially Deaf.

Partially Deaf.					
		19	50	19	51
Name of School		Boys	Girls	Boys	Girls
Yorkshire School for the Deaf, Doncaster		3	1	2	1
St. John's Institution, Boston Spa		1	-	1	-
Middlesbrough Day School for the Deaf		2	1	2	1
Royal Residential School for the Deaf, Manchester	2000	-	-	-	2
Total		6	2	5	4
Delicate.					
		19	50	19	51
Name of School		Boys	Girls	Boys	Girls
Ingleborough Hall School, Clapham		_	_	-	1
Charlton House, Shaftesbury		1	-	-	-
Fulford Road Day School, York		3	7	3	9
The Children's Convalescent Home, West Kirby		4	2	5	1
Salters Lane Open Air School, Darlington		-	1	-	1
Burrow Hill Residential School, Frimley		1	-	-	-
Bradstock Lockett Hospital, Southport		-	1	1	1
Meath Hospital School, Ottershaw		-	1	-	-
Welburn Hall		-	-	2	3
Total		9	12	11	16
Educationally Subnorn	nal.				
		19	50	19	51
Name of School		Boys	Girls	Boys	Girls
Meadows House, Southborough	٠	_	_	1	
Dovecot School, Knotty Ash, Liverpool		-	3	-	2
Beacon Residential School, Lichfield		3	-	2	-
Besford Court, Worcester		-	-	1	
Fulford Road Special Day School, York		6	2	7	5
St. Francis School, Birmingham		1	3	1	3
Allerton Priory R.C. School, Woolton		- 1	4	-	3
Acklam Road Special Day School, Middlesbrough		1	-	1	-
Bigod's Hall R.C. School, Dunmow		1	-	-	-
Barnard Special Day School, Darlington		1	-	1	-
The Vineyard, Warwick		1	-	3	
Garvald, West Linton, Peeblesshire		-	-	1	-
Total		14	12	18	13
					1

-		-					
E	-	п	~	-	42	-	
ur.	nı		-	n		470	
-	Pa .		*		-	~	٠

Epileptic.								
1	19	50	1951					
Name of School	Boys	Girls	Boys	Girls				
Home for Epileptics, Maghull	2 -	1 -	2 1	2 -				
Total .	2	1	3	2				
Diabetic.								
Name of School	100000000000000000000000000000000000000	50 Girls	Boys	51 Girls				
St. George's, Kersal, Manchester	1	-	1					
Total	1	-	1	-				
Maladjusted.								
Name of School		50 Girls	Boys	51 Girls				
Chaigeley School, Thelwall St. Peter's Boarding School, Horbury Gordon Boys' Home, Woking Oakbank, Ingrow, Keighley	1	- 1 - -	1 - 1 1	1				
Total	2	1	3	1.				
Physically Handicapped.								
Name of School	1.000	50 Girls	Boys					
	Boys	Girls						
Welburn Hall	-	_	29	26				
Heritage Craft Schools, Chailey	1		1	-				
Children's Convoluciont Home West Vieles	1	1	1	1				
Produtnek Lockett Home Southment	1700	1	1	1				
Hollins, Lund Lane, Killinghall, Harrogate	7		_	_				
Children's Convalescent Home, Cold Ash, Newbury	1	-	-	-				
Total	4	2	31	28				

MEDICAL INSPECTION RETURNS

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY & SECONDARY SCHOOLS

A-Periodic Medical Inspections

Number of Inspections	in the p	rescrib	ed Groups	:	
Entrants					 4,654
Second Age G	roup				 4,071
Third Age Gr	oup				 2,947
То	otal				 11,672
Number of Other	Periodic	Inspect	tions		 7,764
Gr	and Tot	al			 19,436
B-Other Inspections					
Number of Special	Inspect	ions			 4,082
Number of Re-ins					 9,503
To	tal				 13,585

C-Pupils found to require treatment

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION TO REQUIRE TREATMENT

(EXCLUDING DENTAL DISEASE AND INFESTATION WITH VERMIN)

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
Entrants	 33	966	995
Second Age Group	 194	542	711
Third Age Group	 164	305	456
Total (prescribed groups)	 391	1,813	2,162
Other periodic inspections	 427	1,074	1,460
Grand Total	 818	2,887	3,622

TABLE II.

A-Return of Defects found by Medical Inspection during the year.

		PERIODIC IN	NSPECTIONS	SPECIAL I	NSPECTIONS
	No. of	defects	No. of defects		
Defect or Disease		Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Skin Eyes—		228	69	30	19
(a) Vision	- :	818	873	544	1,642
(b) Squint		200	137	19	20
(c) Other		156	11	25	1
Ears—					
(a) Hearing		48	32	17	22
(b) Otitis Media		19	13	17	8
(c) Other		44	9	29	17
Nose or Throat		855	735	283	336
Speech		66	45	47	40
Cervical Glands		13	53	5	25
Heart & circulation		42	115	6	73
Lungs		403	144	43	49
Developmental—					
(a) Hernia		9	3	4	5
(b) Other		7	5	2	3
Orthopaedic—		0.7	20		
(a) Posture		67	28	8	13
(b) Flat foot (c) Other		181 277	50 109	22	31
(c) Other Nervous System—		. 211	100	41.,	84
		7	2	7	11
(a) Epilepsy (b) Other		56	46	25	11 36
Psychological—		00	. 40	20	30
(a) Development		20	135	16	157
(b) Stability		1	1	1	7
Other		350	139	67	146
		0.00	200		110

B-Classification of the General Condition of Pupils inspected during the year in the age groups.

Age Groups	Dunila	A (Good)		B (Fair)		C (Poor)	
Age Groups	Pupils Inspected	No.	%	No.	%	No.	%
Entrants	4,654	2,501	53.74	2,085	44.80	68	1.46
2nd Age Group	4,071	2,028	49.81	2,010	49.38	33	.81
3rd Age Group	2,947	1,787	60.64	1,143	38.78	17	.58
Other Periodic Inspections	7,764	3,660	47.14	4,005	51.59	99	1.27
Total	19,436	9,976	51.33	9,243	47.55	217	1.12

TABLE III.

INFESTATION WITH VERMIN

(i)	Total number of examinations in the schools by the school nurses	
	or other authorised persons	156,530
(ii)	Total number of individual pupils found to be infested	476
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	179
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	20

TABLE IV.

Treatment of Pupils attending Maintained Primary and Secondary Schools.

GROUP 1. DISEASES OF THE SKIN (excluding uncleanliness for which see Table III).

			Number of cases treated or under treatment during the year			
			by the Authority	otherwise		
Ringworm— (i) Scalp		 	215	13		
(ii) Body		 	84	_		
Scabies	 	 	19	1		
Impetigo	 	 	217	1		
Other skin diseases	 	 	724	24		
	Total	 	1,259	39		

GROUP 2. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

			6	Number of cases	dealt with	
	-			by the Authority	otherwise	
External and other, ex squint	cluding errors of	refraction	and	259	6	
Errors of refraction (in	cluding squint)			-	1,621	
				100		
		Total		259	1,627	
Number of pupils for	whom spectacle	s were		1		
(a) Prescribed				- *	1,251	
(b) Obtained				- *	_	
	Total				1,251	

^{*} Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

GROUP 3. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

GROOF S. DISEASES AND DEFECTS OF E.	Number of case	
	- Trainber of case	- Treated
	by the Authority	otherwise
Received operative treatment (a) for diseases of the ear	469	49 223 — 147
Total	462	419
GROUP 4. ORTHOPAEDIC AND POS	TURAL DEFECT	rs.
(a) Number treated as in-patients in hospitals	Number of case 104	es treated
	by the Authority	otherwise
(b) Number treated otherwise e.g. in clinics or outpatient departments	_	613
GROUP 5. CHILD GUIDANCE	TREATMENT.	
	Number of case	s treated
	In the Authority's Child Guidance Clinics	elsewhere
Number of pupils treated at Child Guidance Clinics	-	45
GROUP 6. SPEECH THE	RAPY.	
	Number of case	s treated
	by the Authority	otherwise
Number of pupils treated by Speech Therapists	240	-
GROUP 7. OTHER TREATME	NT GIVEN.	
	Number of cases	s treated
	by the Authority	otherwise
Miscellaneous Minor Ailments	3,234	222

TABLE V. DENTAL INSPECTION AND TREATMENT.

		* * * * * * * * * * * * * * * * * * * *				
(1)	Number of pupils inspected by	the Author	rity's Denta	al Officer	s:—	
	(a) Periodic age groups .		4			18,129
	(h) Specials	,				1,327
	(c) Total (Periodic and Sp	ecials)				19,456
(2)	Number found to require treatn	nent				13,374
(3)	Number referred for treatment			1		13,299
(4)	Number actually treated .					11,059
[5)	Attendances made by pupils for	treatment				13,691
(6)	Half days devoted to:					
	Inspection					232
	Treatment					1,733
1						
		Total				1,965
7)	Fillings:					
	Permanent Teeth					3,209
	Temporary Teeth					529
		Total				3,738
8)	Number of teeth filled:					
	Permanent Teeth					2,834
	Temporary Teeth					456
		Total				3,290
-	-					-
(6	Extractions:					
	Permanent Teeth					3,024
	Temporary Teeth					14,733
		Total				17,757
10)	Addition of the	1				
11)	Administration of general anaes	sthetics for	extractions			6,690
11)	Other Operations:					
	Permanent Teeth					2,161
12	Temporary Teeth					360
1		m . 1				0.000
		Total				2,521
		11				
A	ttendances for fitting of dentures	and/or ort	hodontic ap	pliances		3,677

AVERAGE WEIGHTS.

		Boys.		GIRLS.		
Age Groups	No. Weighed	Lbs.	Kilograms	No. Weighed	Lbs.	Kilograms
3-4 years	4	38-63	17.52	. 4	32.07	14.55
4-5 years	32	40.36	18.31	35	39.30	17.83
5-6 years	1,264	43.79	19.86	1,222	40.05	18-17
6-7 years	307	48.86	22.16	266	50.45	22.88
7-8 years	636	54.18	24.58	526	52.52	23.82
8-9 years	864	* 58.44	26.51	727	56.40	25.58
9-10 years	318	60.07	27.25	263	62-21	28.22
10-11 years	688	70.75	32.09	495	70.93	32.17
11-12 years	879	77-49	35.15	884	78.92	35.80
12-13 years	789	83.94	38-07	806	89-21	40.47
13-14 years	448	94.34	42.79	485	98-53	44.69
14-15 years	753	107-38	48.71	736	110-60	50-17
15-16 years	251	118-95	53.96	285	114.52	51.95
16-17 years	98	135.02	61.24	99	121-45	55.09
17-18 years	37	145.86	66-16	36	128-51	58.29
18-19 years	24	145-44	65.97	11	128-32	58-21

AVERAGE HEIGHTS.

Boys.				GIRLS.		
Age Groups	No. Measured	Inches	Centi- metres	No. Measured	Inches	Centi- metres
3-4 years	4	38-63	98-12	4	36-50	92.71
4-5 years	32	41.50	105.41	35	41.27	104.83
5-6 years	1,264	43.28	109-93	1,222	42.97	109-14
6-7 years	307	45-60	115-82	266	45.17	114.73
7-8 years	636	48.24	122.53	526	47.95	121.79
8-9 years .:	864	50.03	127-08	727	49.61	126.01
9-10 years	318	51.78	131-52	263	51.56	130.96
10-11 years	688	53-93	136-98	495	53.74	136-50
11-12 years	879	55.04	139-80	884	56.08	142.44
12-13 years	789	57.38	145.75	806	58.40	148-34
13-14 years	448	59.28	150-57	485	60.13	152.73
14-15 years	753	62.22	158-04	736	61.97	157-40
15-16 years	251	64.67	164-26	285	62-29	158-22
16-17 years	98	67.80	172-21	99	63-67	161-72
17-18 years	37	69-19	175.74	36	64.80	164.50
18-19 years	24	69-67	176-96	11	64.84	164-69



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NORTH RIDING OF YORKSHIRE COUNTY COUNCIL

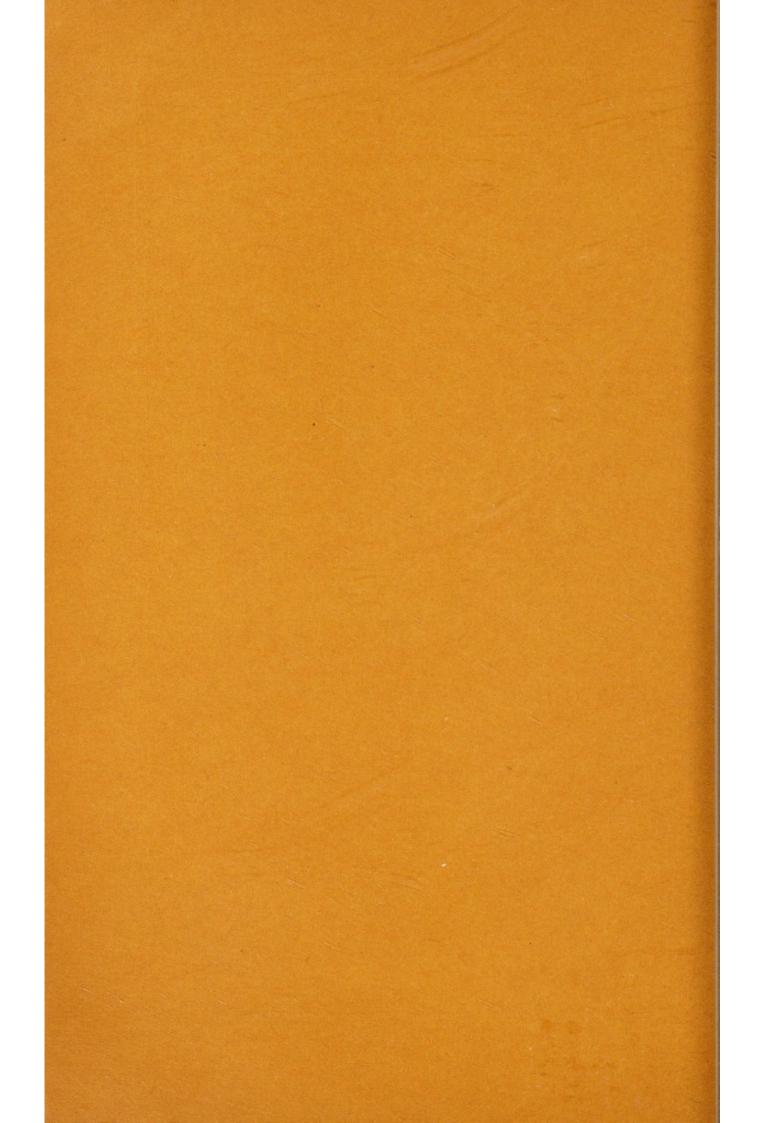
SCARBOROUGH
DIVISIONAL EXECUTIVE

REPORT

OF THE

DIVISIONAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1951





NORTH RIDING OF YORKSHIRE COUNTY COUNCIL

SCARBOROUGH DIVISIONAL EXECUTIVE

REPORT

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DIVISIONAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1951



The Chairman and Members of Scarborough Divisional Executive.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit the Annual Report of the Divisional School Medical Officer for the year 1951.

Some curtailment of our activities was brought about by the unavoidable delay in replacing a School Nurse who resigned her appointment in August. In consequence it was not possible for School Medical Officers to devote as much time examining children at schools as is usually the case, therefore, the number of school children seen at Routine Medical Inspection fell from 4,470 in 1950 to 4,071; similarly 647 fewer re-inspections were made in 1951. On the other hand, the number of Special Medical Examinations carried out rose from 840 in 1950 to 968.

That the general standard of physical fitness of school children remains at a high level is shown by the fact that 11.94% were found at R.M.I. to require treatment, mostly for less serious defects, compared with 15.13% in 1949 and 13.51% in 1950; further, in only 0.69% was the general condition described as below average.

The state of cleanliness was less satisfactory in that rather more children were found to be infested than in the previous two years, but fewer cases of scabies or impetigo were noted this year, and no cases of ringworm was reported.

The attention of parents, in particular, is drawn to Dr. Cameron's comments under the heading of "Nursery Classes" appearing in the body of the report, in which it is pointed out that fewer children joining Nursery Classes had been immunised against diphtheria than in the past. Parents are warned not to allow themselves to be lulled into a sense of false security merely because diphtheria has not occurred in the Scarborough district for several years. Diphtheria still occurs in many parts of the country and still causes deaths. The best age for children to be immunised is at eight or nine months with a reinforcement dose just before going to school. Immunisation is available free of charge either by the family doctor or through the School Health Services.

By the appointment of Miss E. V. Lang as whole-time Speech of Therapist, the treatment of speech defects in school children was resumed on a much more extensive scale than has been possible during the last 3 years. By arrangement with the County School Medical Officer, Miss Lang devotes one day per week to treating school children in another part of the Local Education Authority's area.

A new departure, in the shape of lip-reading classes, was introduced during 1951. Mr. O'Brien, the part-time teacher, holds classes on Saturday afternoons, but it is disappointing to note that some pupils do not persevere with their attendances. Parents are uged to ensure that their children take full advantage of this service which is intended to help children with impaired hearing to compensate for a defect which may be a serious handicap after leaving school.

Welburn Hall, near Kirbymoorside, was established by the Local Education Authority as a Special School for Physically Handicapped Pupils. Already several school children from our area have been admitted there.

By the end of the year all schools except one were being supplied with Pasteurised milk, the exception, one of the more remote rural schools, is obtaining Tuberculin Tested milk.

At three rural schools, the drinking water is being boiled beforehand as a precautionary measure. Although Scarborough Rural District Council have submitted schemes to replace unsatisfactory water supplies, it is likely to be some years before their plans materialise.

At Seamer School, the pail closets have been converted into W.C's. and connected to the new public sewer. Improvements to the drainage system at Brompton School have been effected too.

In conclusion, Mr. Chairman, I have to report that the state of health of school children in your area continues to be satisfactory.

I wish to take this opportunity of thanking the Chairman of the Primary Education Committee and the members for their support and encouragement; to express my appreciation to Mr. Nock and his staff for their continued co-operation and to Mr. Bassett and the staff of the School Health Services for their diligence and dependability during the year.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

J. STOKOE,

Divisional School Medical Officer.

School Clinic, Old Hospital, Friars Way, Scarborough. May, 1952.

1. GENERAL.

The total number of scholars on the school registers amounted to 7,038, an increase of 80 over last year's figure.

(a)	Number of Primary Schools (excluding Child	
	Haven Nursery School)	 22
(b)	Number of Primary School Departments in the Division (excluding Child Haven	
	Nursery School)	 27
(c)	Number of pupils on the registers of Primary Schools (excluding Child Haven	
	Nursery School) in September, 1951	 4211
(d)	Number of children in Child Haven Nursery	
(4)	School in September, 1951	 44
(e)	Number of children in the Special Class at	
	No. 9 Seamer Road in September, 1951	 20
(f)	Number of County Modern Schools in the	
	Division	 6
(g)	Number of pupils on the rolls of County	
(8)	Modern Schools in September, 1951	 1807
(h)	Number of Grammar and Technical Schools	 3
(i)	Number of pupils on the rolls of Grammar	
	and Technical Schools in September,	
	1951	 956

2. STAFF.

(i) Medical Officers.

J. Stokoe, M.D., B.S., B.Hy., D.P.H., Divisional School Medi-

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

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

Sydney E. Jackson, M.B., Ch.B., Temporary Assistant Schools Medical Officer (part time).

(ii) Dental Surgeons.

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

(iii) Specialist Officers (part-time).

*Ophthalmic Surgeon ... J. Ellison, Esq., M.R.C.S., L.R.C.P.
*Orthopaedic Surgeon ... H. L. Crockatt, Esq., M.B., Ch.B.

*Psychiatrist ... Margaret C. Gordon, M.B., Ch.B. D.P.M.

*E. N. T. Surgeon ... G. L. Thompson, Esq., M.A., M.B. (Cantab), F.R.C.S.

*By arrangement with Leeds Regional Hospital Board.

(iv) School Nurses.

(a) WHOLE-TIME,

Miss L. Dawson, S.R.N., S.C.M., H.V.Cert.

Miss H. Macdonald, S.R.N., S.C.M., H.V.Cert.

Mrs. M. P. Hodgson, S.R.N., S.C.M., H.V. Cert. (resigned 7th August, 1951).

These nurses carried out school nursing within the Borough of Scarborough.

(b) PART-TIME.

School nursing in the Scalby Urban District and Scarborough Rural District areas was conducted by five District Nurses as follows:—

Mrs. M. M. Lowen, S.R.N., S.C.M., H.V.Cert., Q.N.—

Scalby District.

Miss J. G. Smith, S.R.N., S.C.M., H.V.Cert., Q.N.— Cayton District.

Miss M. Ford, S.R.N., S.C.M., Q.N.—Snainton District. Miss E. D. Fisher-Brown, S.R.N., S.C.M.—Ayton District. Miss A. Brown, S.R.N., S.C.M., Q.N.—Cloughton District.

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

(vi) Physiotherapist. Mrs. G. M. Green, M.S.C.P., M.E., L.E.T. (part-time).

(vii) Speech Therapists.
 Miss I. Knight, F.C.S.T. (part-time) (until 9th November, 1951).
 Miss E. V. Lang, L.C.S.T. (appointed 13th November, 1951).

(viii) Lip Reading Tutor. R. D. O'Brien (part-time).

(ix) Dental Attendants.

Mrs. N. D. V. Storey.

Miss P. M. Vokes (resigned 24th February, 1951).

Miss N. Mallen (from 21st February, 1951).

(x) Clerks.
J. R. Bassett, B.Com.

Miss A. E. Macallister (resigned 22nd December, 1951).

3. MEDICAL SUPERVISION.

Routine medical inspection of all prescribed age groups was carried out at the schools visited and, in addition, the 7-8 and 12-13 age groups were inspected. Altogether 4,071 pupils were medically examined in schools, but, because of staffing difficulties, this figure is rather lower than that for 1950, when 4,470 pupils were inspected. Special medical examinations amounted to 968, compared with 840 in 1950, whilst 1,219 re-inspections were made, or 647 less than last year. Visits to pupils' homes by the nurses numbered 263.

4. FINDINGS AT ROUTINE MEDICAL INSPECTION.

(a) Compared with 1949 (15.13%) and 1950 (13.51%) a smaller proportion (11.94%) of children examined in schools in 1951 required some form of treatment.

denoted our naily going	Number of Children.			
Group.	Inspected.	Found to require treatment (excluding dental diseases and infestation with vermin)		
PRIMARY SCHOOL CHILDREN	Dia min			
Entrants 7-8 Age Group Second Age Group	614 774 786	75 (12.21%) 98 (12.66%) 97 (12.34%)		
TOTAL	2,174	270 (12.42%)		
SECONDARY SCHOOL CHILDREN		1.C 25-200		
12-13 Age Group Third Age Group	1,003 894	117 (11.66%) 99 (11.07%)		
TOTAL	1,897	216 (11.39%)		
GRAND TOTAL	4,071	486 (11.94%)		

The defects found at Routine Medical Inspection are analysed in Table IIA of the Appendix to this report.

(b) General Condition.

Twenty-eight children (or 0.69%) were considered to be in poor general condition, an almost identical number to that for last year.

(c) Cleanliness.

During the year, School Nurses made 19,352 individual cleanliness inspections in schools, as the result of which 33 children were discovered with evidence of frank infestation. The corresponding figures for 1950, 1949, 1948 and 1947 were 21, 29, 54 and 97 respectively. In connection with uncleanliness School Nurses paid 121 visits to patients' homes. No notice was served under Section 54 (2) or (3) of the Education Act, 1944, during 1951.

Average number of visits per school made	Primary	Secondary
Number of school visits by nurses Number of examinations of pupils in the	7 180	9 87
Number of individual children infested Number of visits to homes by the School	12,983 21	6,369 12
Nurses	85	36

(d) Clothing and Footwear.

Generally speaking, clothing and footwear appeared to be satisfactory. The Scarborough Amicable Society afforded assistance during the year to the sum of £236.12s.7d. in the form of grants to needy cases.

5. TREATMENT OF DEFECTS.

(a) Minor Ailments.

Minor Ailments Sessions continued at the central School Clinic, Hinderwell and Northstead Schools.

A further reduction in the number of children reporting for treatment of scabies, impetigo, ringworm and uncleanliness, occurred in 1951.

Conditions for which	School	nary Children	Secondary School Children	
Children attended M.A. Clinic.	No. of	Total	No. of	Total
	first	Attend-	first	Attend-
	visits	ances	visits	ances
Scabies Ringworm Uncleanliness (including	17	34 72 —	3 7 —	39 —
Verminous Conditions) Minor Injuries External Eye Disease Ear Discharge and Deafness	29	73	11	21
	299	501	69	159
	64	160	17	175
Nose and Throat Vision Heart and Circulation	36	278	23	101
	22	40	1	1
	17	23	4	4
	10	13	7	11
Nervous System Tuberculosis		=	=	=
Skin (Non-contagious)	311	985	93	323
Other Conditions	209	411	85	177
TOTAL	1019	2590	320	1015

(b) Defective Vision.

Of the children examined by the Ophthalmic Surgeon, the number who were found to require treatment did not differ materially from that reported last year.

Number of sessions (by Ophthalmic Surge	eon)	46	
neste bull of cooler model over theory		Primary	Secondary
Number of new cases examined		124	107
Number of re-examinations		113	121
Spectacles prescribed		106	131
Recommended other forms of treatment		20	8

(c) Ear, Nose and Throat.

School children treated at the Ear, Nose and Throat Department of Scarborough Hospital, are reported to number 463 who received operative treatment, and 134 who received other forms of treatment.

Mr. Guy L. Thompson held monthly sessions at the School Clinic, primarily for the supervision of the treatment of children suffering from chronic ear diseases. At the 12 sessions held in 1951, twenty-one children made a total of 55 attendances.

(d) Orthopaedic.

Nineteen school children received in-patient treatment at Adela Shaw Orthopaedic Hospital, Kirbymoorside, during the year.

At the 19 Specialists' sessions, 185 children were examined (344 attendances). Of these, 126 made 832 attendances at the Remedial Exercises Clinic under the physiotherapist who held 101 sessions.

(e) Tuberculosis.

During the year, 5 cases of tuberculosis (2 pulmonary and 3 non-pulmonary) in school children were notified. Two of the children were admitted to hospital.

(f) Ringworm of the Scalp.

No case came to the notice of the School Health Service during 1951.

(g) Artificial Sunlight Treatment.

Arrangements with Scarborough Corporation continued whereby school children in need of artificial sunlight treatment were referred to the Scarborough Medical Baths. During the year 164 pupils completed a course of treatment making 1,696 attendances.

(h) Dental Services.

Details of the work carried out by the school dentists (one wholetime, and one part-time) appear in Table V of the Appendix.

6. PHYSICAL EDUCATION.

Mr. Nock, the Divisional Education Officer, kindly obtained the following summary of Physical Education activities in the Scarborough Division:—

"Physical Education in the Division has continued to develop on satisfactory lines, although, on account of long periods of inclement weather, much work which should have taken place in the open air has of necessity been conducted indoors.

The Games Coaching Schemes in Cricket and Football again proved to be a useful adjunct to the normal school coaching.

Swimming instruction was again enjoyed by the children and certificates were awarded for the various standards of proficiency. In total, 429 awards were so gained. The examinations of the Royal Life Saving Society were taken and the following awards were made:—

Award of Merit	 4
Bronze Cross	 .7
Bar to Bronze Medallion	 3
Bronze Medallion	 26
Intermediate Certificate	 7

Boxing has continued as an activity in certain schools and some school representatives reached Schools County Championship standard.

Interest in camping has been maintained and Youth Hostel touring has been an interesting feature in the activities of some schools".

7. INFECTIOUS DISEASES.

No serious outbreak of infectious disease occurred among school children during the year under review. Notifications among children between the ages of 5-14 years (inclusive) in the Divisional Area were as follows:—

Measles		 	228
Whooping Cough		 	45
Scarlet Fever		 	63
Acute Anterior Poliomye	litis	 	1
Tuberculosis		 	5

Special Exclusions.

Five children were excluded from school on account of contagious skin conditions, and 10 on account of verminous and unclean conditions.

8. SCHOOL MILK AND MEALS.

I am indebted to the Divisional Education Officer for the details included in the following table, which shows the position as at December, 1951:—

Percentage of children provided with meals in Rural	
Schools	68.73
Percentage of children provided with meals in	
Scarborough Schools	51.6
Percentage of children provided with milk in Primary	00.0
Schools in the Division	82.3
Percentage of children provided with milk in Second-	50.50
ary Schools in the Division	52.79

On occasion, a second bottle of milk was recommended by the School Medical Officers.

9. CO-OPERATION WITH OTHER BODIES.

At routine medical inspections 44% of primary school children and 8% of secondary school children were accompanied by their parents.

From Mr. Pateman, the local inspector of the N.S.P.C.C., I have received the following report of the year's work of his department in connection with school children:—

"There were 77 cases enquired into in the Divisional Area affecting the welfare of 159 children (98 boys, 61 girls).

No cases were due to drink.

Classification of Cases :-			
Neglect			59
Advice sought			11
Ill-treatment			7
			=
	Total		77
			100
The above were dealt with		s:—	
Warned by th			51
Advised and	helped		26
	Total		77

No offenders were prosecuted. Three Juvenile Court cases were instituted.

In order to watch the progress and guard against relapse, the Inspector paid 121 visits of supervision and in addition 212 miscellaneous visits were made to officials and others in respect of these cases".

10. NURSERY CLASSES.

Dr. Cameron prepared the following report on the Nursery School and Classes:—

Childhaven remains our only Nursery School for children aged 2-5, while Friarage and Hinderwell Schools have Nursery Classes for children aged 3+ and 4+ respectively. It is possible that the Hinderwell Nursery Class will have to close soon as the space will be required for the greatly increased number of 5 year old entrants.

Arrangements for medical inspection at the Nursery School continue to comprise a full inspection each term with frequent follow-up examinations. A School Nurse visits the school as frequently as possible, close co-operation with the parents is maintained and every effort is made to minimise the risk of infectious disease. The majority of the children have been immunised against diphtheria prior to admission, and any who have not are offered facilities for this at the first medical inspection. It is noticeable that the number of children not immunised at entrance to the Nursery School is increasing. There was no outbreak of any serious infectious disease during 1951.

11. HANDICAPPED PUPILS.

Under Section 34 of the Education Act, 1944, twelve children were duly ascertained as Handicapped Pupils, viz:—

- 2 Deaf Pupils.
- 1 Epileptic Pupil.
- 1 Maladjusted Pupil.
- 2 Physically Handicapped Pupils.
- 6 Educationally Subnormal Pupils.

During 1951, the Education Authority maintained in Special Schools handicapped pupils from the Divisional Area as follows:—

. Name of School.	Boys	Girls
BLIND		
Royal Victoria School for the Blind, Newcastle Bernhard Baron Sunshine Home Nursery School for Blind Children, Kingswinford	321-113	1
PARTIALLY BLIND Sheffield School for the Blind, Sheffield	1	1
DEAF Yorkshire School for the Deaf, Doncaster	1	
PARTIALLY DEAF Yorkshire School for the Deaf, Doncaster	1	00.2
DEAF AND EDUCATIONALLY SUB-NORMAL Bridge House School, Harewood, Near Leeds	1	-
DELICATE Children's Convalescent Home, West Kirby Welburn Hall Special School, Kirbymoorside	3 2*	i
EDUCATIONALLY SUB-NORMAL Beacon Residential School, Lichfield Monyhull School, Birmingham	1	i
MALADJUSTED Gordon Boy's Home, Woking Oakbank, Ingrow, Keighley	1 1	2:
PHYSICALLY HANDICAPPED Children's Convalescent Home, West Kirby St. George's, Kirsal Welburn Hall Special School, Kirbymoorside	1 6	1‡

^{*} Transferred from Children's Convalescent Home, West Kirby.

[‡] Transferred to Welburn Hall Special School.

The Special Class for educationally subnormal children continued to supply a need in the area by providing accommodation for 28 pupils; of these, four were admitted during 1951. Nine pupils were discharged as follows:—

2 to work (or home), having reached school leaving age.

2 to ordinary schools.

1 to a special school

3 left town (Parents' domicile away from Scarborough).

1 to an approved school.

12. SECTION 57, EDUCATION ACT, 1944.

Three children were reported to the Local Education Authority as ineducable under Section 57 (3) of the Education Act, 1944, and one child under Section 57 (5) of the Act, as requiring supervision after leaving school.

13. SPEECH THERAPY.

Miss Knight held fortnightly sessions at the Scarborough School Clinic until the appointment of Miss Lang, the full-time therapist, in November. It was agreed that Miss Lang should visit Welburn Hall Special School on Monday of each week, otherwise she has devoted the whole of her time to the treatment of children in the Division. With the exception of children from Northstead and Hinderwell Schools who were treated by Miss Lang at school, all treatment was given at the School Clinic. The following is a summary of the number of children treated during the year, classified according to defects:—

			Boys	Girls	Total
Stammer			19	2	21
Dyslalia			28	13	41
Sigmatism			5	2	7
Hard of Hearing			1	2 5	3
Rhinophonia		***	2	5	7
Cleft Palate			2	-	2
Cerebral Palsy			2	2	4
			-		_
		Total	59	26	85
			_	_	_
Of the above children					
Discharged as cur	red		1	-	1
Withdrawn			4	3	7 -
Remaining under	treatmen	nt at			
end of year			54	23	77
			-	-	-
		Total	59	26	85
			_	_	-

I. LIP READING.

Beginning in July, a special lip reading class for school children as held on Saturday afternoons at the School Clinic. Up to the end of the year 16 children were admitted to the class, all of whom ad been recommended by the Ear, Nose and Throat Surgeon as likely benefit by learning to lip read.

5. CHILD GUIDANCE.

In the absence of a full Child Guidance team, Dr. Gordon connued to hold child psychiatric sessions for difficult and unstable nildren. It has been found, however, that the absence of other memers of a Child Guidance team seriously handicaps the psychiatrist's ork, as liaison between home and clinic becomes difficult when there no psychiatric social worker.

Where the child's upset is associated with a specific learning ifficulty the help of an educational psychologist is very necessary.

With younger children, the absence of play therapy facilities have metimes made contact difficult.

The following is a summary of the psychiatrist's work:

Number of sessions held at Scarborough ... 24

Number of children examined 25

Number of initial examinations of school children ... 16

Number of re-examinations 26

Number of children ascertained as Maladjusted

Pupils within the meaning of the Handicapped

Pupils and School Health Service Regulations. 1945 ... 1

In addition to the above, ten children from outside the Divisional rea were seen at Scarborough by Dr. Gordon at the request of the ounty School Medical Officer.

6. CHILD DELINQUENTS.

Ninety-two medical reports were submitted to the Magistrates lating to children who appeared before the Juvenile Court.

7. EMPLOYMENT OF SCHOOL CHILDREN.

One hundred and thirty eight children were examined by the chool medical officers as to fitness for employment under the provious of the Employment of Children Bye-Laws; with two exceptions II were considered fit for their proposed employment.

8. PROTECTIVE INNOCULATION.

A note was made of all children subjected to routine medical inspection who bore scars of successful vaccination against smallpox; ecording to this method of assessment 30% Primary and 24%

econdary had been protected.

During the year 40 school children completed a course of immunitation against diphtheria and a further 147 children received reinforcement doses under the Local Health Authority's schemes. It is estimated that approximately 80% of the school children in the Division are protected against diphtheria.

MEDICAL INSPECTION RETURNS. Year ended 31st December, 1951.

TABLE 1.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A. Periodic Medical Inspections.

Number of Inspections in the prescribed groups

Entrants			614
Second Age Group			786
Third Age Group			894
	TOTAL	la determina	2294
Number of other periodic inspections			1777
	GRAND TOTAL		4071

B. Other Inspections

No. of Special Inspections No. of Re-inspections		 968 1219
	TOTAL	 2187

C. Pupils found to require treatment

Number of Individual Pupils found at Periodic Medical Inspection require Treatment (excluding Dental Diseases and Infestation wivermin)

GROUP	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
Entrants	9	67	75
Second Age Group Third Age Group	39 64	61	97 99
Total (prescribed groups)	112	167	271
Other Periodic Inspections	90	134	215
GRAND TOTAL	202	301	486

Return of Defects found by Medical Inspection during the year.

TABLE II.

(Hair)	Periodic	Inspections.	Special Inspections.		
DISEASE OR DEFECT.	Number	of Defects.	Number	of Defects.	
DISEASE ON DEFECT.	Requiring Treatment	Requiring Observation but not Treatment	Requiring Treatment	Requiring Observation but not Treatment	
KIN	31	12	83	8	
(a) Vision (b) Squint	202	63 12	92	41 7	
(c) Other ARS (a) Hearing	9	11	31	7.	
(b) Otitis Media	1 4	8 3 3	1 14 27	10 1 3	
OSE AND THROAT	17 11	159 18	76 11	96 11	
ERVICAL GLANDS EART AND CIRCULATION	53 2	8 38	51	11 36	
UNGS EVELOPMENTAL (a) Hernia	-	8	29	19	
(b) Other		8	Jud noise	5	
(a) Posture (b) Flat Foot (c) Other	5 14 17	37 40 77	4 3 16	21 14 32	
ERVOUS SYSTEM (a) Epilepsy	-	1	-	3	
(b) Other	V1 3.1	3	-	2	
(a) Development (b) Stability	8 116	23 149	15 273	8 18 181	

B. Classification of the General Condition of Pupils inspected during the year in the Age Groups.

incharged take			A. ood)		B.		oor)
Age Groups	Pupils Inspected	No.	%	No.	%	No.	%
Entrants Second Age Group Third Age Group	614 786 894	376 331 520	61.24 42.11 58.17	238 445 372	38.76 56.62 41.61	10 2	0.0 1.2 0.2
Other Periodic Inspections	1777	859	48.34	902	50.76	16	0.9
TOTAL	4071	2086	51.24	1957	48.07	28	0.6

TABLE III.

Infestation with Vermin.

(1) Total number of examinations in the schools by the school nurses or other authorised persons	19,352
(2) Total number of individual pupils found to be infested	33
(3) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	Herman Herman Subst
(4) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	Postune Flat Foot

TABLE IV.

Treatment of Pupils attending maintained Primary and Secondary Schools.

GROUP 1. DISEASES OF THE SKIN (excluding uncleanliness, for which see Table III).

					or under treating the year. By the Authority.	
Ringworm—(i)		 	***		-	-
(ii)	Body	 	***		-	-
Scabies		 			8	-
Impetigo		 			24	1
Other skin disea	ases	 		***	404	7
			TOTAL		436	8

GROUP 2. EYE DISEASES,	DEFECTIVE '	VISION	AND	SOUINT.
------------------------	-------------	--------	-----	---------

			Number of with.	cases dealt
			By the Authority.	Otherwise
External and other, excluding errors of a squint Errors of Refraction (including squint)	•••		81*	2
2. Total of Mendella (mendella squint)	Тот	 ΓAL	81	465
No of pupils for whom spectacles were	prescrib	ed	-*	237

GROUP 3. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

			Number of cases treate		
Received operative treatment:			By the Authority.	Otherwise	
(a) for diseases of the ear				5	
(b) for adenoids and chronic tonsillitis(c) for other nose and throat conditions				448	
Received other forms of treatment		4.13	82	10 134	
Trees, or treatment			-02	134	
	TOTAL		82	597	

^{*} Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

GROUP 4. ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals		19	
inii		By the Authority.	Otherwise
(b) Number treated otherwise, e.g. in clinics	or		
out-patient departments		-	188

GROUP 5. CHILD GUIDANCE TREATMENT.

Number of cases treated
In the Authority's
Child Guidance
Clinics.
Elsewhere.

Number of pupils treated at Child Guidance Clinics ... - 25

GROUP 6. SPEECH THERAPY.

Number of cases treated By the Authority. Otherwise

Number of pupils treated by Speech Therapists ... 73

GROUP 7. OTHER TREATMENT GIVEN.

			Number of ca	ises treated
			By the Authority.	Otherwise
(a) Miscellaneous minor	ailments		 679	33
(b) U.V.R. Treatment			 164	
		TOTAL	 843	33
				-

TABLE V.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(1) Number Der	of pupils inspected by	the	Author	ity's	
	Periodic age groups Specials				3512 306
			TOTAL	ill kniceom	3818
(2) Number	found to require treatme	nt			1919
	referred for treatment				1919
(4) Number	actually treated				998
(5) Attendan	ces made by pupils for	treatme	ent		3064
(6) Half day	s devoted to: Inspection Treatment			/	36 518
			TOTAL		554
(7) Fillings:	Permanent Teeth Temporary Teeth				1171 70
			TOTAL	ob lesses	1241
(8) Number	of teeth filled: Permaner Temporar			in complete	1025 69
			TOTAL		1094
(9) Extractio	ns: Permanent Teeth Temporary Teeth				372 1023
			TOTAL		1395
(10) Adminis	tration of general anæsthe	tics fo	r extract	tion	655
	perations : Permanent Tee		CATTACT	don	859
, , , , , , , , , , , , , , , , , , , ,	Temporary Te				194
- Concrete			TOTAL		1053
(12) Orthodo	ntic and Denture Attendar	nces			651

		Centimetres.	90.12	94.54	104.77	115.73	121.00	126 51	134 13	136.22	142 72	148 80	153.21	156 97	150.70	162.05	162.10	105.10	
	GIRLS	Inches	35.48	37.22	43.07	45.56	47.64	49.81	52.81	53.63	56.27	58.62	60.32	61.80	62.91	63.80	63.82	20:00	0.000
		No. Measured.	=:	37	156	41	200	81	26	214	81	231	258	285	06	15	=		
AVERAGE HEIGHTS		Centimetres.	93.48	103.48	110.08	115.69	122.35	128.16	130.65	136.91	142.39	147.39	152.23	160.32	167.89	170.23	174.77	178.71	172.72
AVE	BOYS	Inches	36.80	40.78	43.34	45.55	48.17	50.46	51.44	53.90	90.99	58.03	59.92	63.12	90.99	67.02	68.81	70.36	00.89
	H	No. Measured.	5.5	36	150	49	230	68	23	208	2	186	245	272	132	57	27	14	4
	A STATE OF THE STA	AGE GROUPS.	2- 3 years	4- 5 years	5- 6 years	6- 7 years	7- 8 years	8- 9 years	9-10 years	10-11 years	11-12 years	12-13 years	13-14 years	14-15 years	15-16 years	16-17 years	17-18 years	18-19 years	+61

Kilograms.	14.24	17.42	20.29	25.93	30.66	36.51	41.50	49.03	53.76	55.64	55.80	-	-
lbs.	31.66	39.61	45.10	57.64	68.15	81.14	92.24	108.97	119.47	123.66	124.00		
No Weighed.	111	44	39	80	26	78	231	285	06	15	11		
Kilograms.	15.09	17.92	22.18	26.94	31.16	36.13	38.82	48.57	54.14	60.93	61.28	64.60	62.32
lbs.	33.55	39.84	49.29	59.87	62.68	80.29	86.28	107.94	120.32	135.42	136.18	143.57	138.50
No Weighed.	33.5	36	47	977	222	65	162	261	131	57	27	14	4
AGE GROUPS.		years	years	years	years	years	years	vears	years	years	100	61	+61
	No Weighed, lbs. Kilograms. No Weighed. lbs.	GE GROUPS. No Weighed. Ibs. Kilograms. No Weighed. Ibs. years 33.55 15.09 11 31.66 years 33.27 14.97 37.57 34.57	GE GROUPS. No Weighed. lbs. Kilograms. No Weighed. lbs. years 33.55 15.09 11 31.66 years 33 33.27 14.97 34.57 years 36 39.84 17.92 44 39.61 years 14.6 19.76 15.0 42.28	AGE GROUPS. No Weighed, Ibs. Kilograms. No Weighed. Ibs. 2- 3 years 3- 4 years 3- 4 years 3- 5 years 3- 6 years 3- 6 years 3- 6 years 3- 7 years 3- 6 years 3- 7 years 3- 7 years 3- 7 years 3- 8 years 3- 9 yea	GE GROUPS. No Weighed. lbs. Kilograms. No Weighed. lbs. years 33 33.55 15.09 11 31.66 years 36 39.84 17.92 44 39.61 years 146 43.93 19.76 15.28 42.28 years 226 53.89 24.25 198 52.93 years 89 59.87 26.94 80 57.64	AGE GROUPS. No Weighed. Ibs. Kilograms. No Weighed. Ibs. 2- 3 years	AGE GROUPS. No Weighed. Ibs. Kilograms. No Weighed. Ibs. 2- 3 years	AGE GROUPS. No Weighed. Ibs. Kilograms. No Weighed. Ibs. 2- 3 years 33 33.55 15.09 11 31.66 3- 4 years 33 33.27 14.97 37 34.57 4- 5 years 36 39.84 19.76 44 39.61 5- 6 years 146 43.93 19.76 44 42.28 6- 7 years 226 59.84 19.76 44 42.28 7- 8 years 89 59.87 26.94 80 52.93 8- 9 years 89 59.87 26.94 80 57.64 9-10 years 22 62.68 31.16 21 68.15 10-11 years 65 80.29 36.13 78 81.14 11-12 years 160 97.12 43.70 25.8 101.58	AGE GROUPS. No Weighed. lbs. Kilograms. No Weighed. lbs. 2- 3 years 3 years 33.55 15.09 11 31.66 3- 4 years 33 33.57 14.97 37 34.57 4- 5 years 36 39.84 19.76 44 39.61 5- 6 years 36 39.84 19.76 44 39.61 6- 7 years 47 49.29 22.18 45.10 45.10 7- 8 years 8- 9 years 89 26.94 80 57.64 9-10 years 22 62.68 28.20 26.94 80 57.64 9-10 years 202 69.26 31.16 211 68.23 11-12 years 65 80.29 36.13 78 81.14 12-13 years 162 86.28 38.82 231 108.97 14-15 years 261 48.57 285 108.97	AGE GROUPS. No Weighed. lbs. Kilograms. No Weighed. lbs. 2- 3 years 3 years 33.55 15.09 11 31.66 3- 4 years 33 33.27 14.97 37 34.57 4- 5 years 36 39.84 17.92 44 39.61 5- 6 years 146 43.93 22.18 39 45.28 6- 7 years 47 49.29 22.18 39 45.10 7- 8 years 8- 9 years 89 26.94 80 57.64 8- 9 years 8- 9 years 89 26.94 80 57.64 9-10 years 22 69.26 28.20 26.94 80 57.64 11-12 years 65 86.26 36.13 78 81.14 92.24 113-14 years 162 86.28 38.82 231 92.24 14-15 years 261 107.94 48.57 285 108.97 15-16 years 258 107.24<	AGE GROUPS. No Weighed. lbs. Kilograms. No Weighed. lbs. 2- 3 years 33 33.55 15.09 11 31.66 3- 4 years 33 33.27 17.92 14.97 34.57 4- 5 years 36 33.84 19.76 14.97 34.57 5- 6 years 146 43.93 19.76 14.97 44.4 39.61 6- 7 years 146 43.93 19.76 15.22 45.10 42.28 7- 8 years 226 53.89 22.18 39 45.10 52.93 8- 9 years 89 59.87 26.94 80 52.93 52.93 9-10 years 202 66.26 31.16 24.25 80 52.93 10-11-12 years 65 80.29 36.13 78 81.14 12-13 years 162 86.28 38.82 231 101.58 14-15 years 261 107.94 48.57 258 108.97 16-17 years 57 135.42 60.93 119.94 119.47 119-17 years <	AGE GROUPS. No Weighed. lbs. Kilograms. No Weighed. lbs. 2- 3 years 3 years 33.55 15.09 11 31.66 3- 4 years 33 33.27 14.97 37 34.57 4- 5 years 36 39.84 17.92 44 39.61 5- 6 years 146 43.93 17.92 44 45.23 6- 7 years 146 43.93 12.18 42.28 45.10 7- 8 years 26 years 89 26.94 80 52.93 8- 9 years 89 59.87 26.94 80 52.93 9-10 years 89 59.87 26.94 80 55.04 11-12 years 65 80.29 36.13 78 81.14 12-13 years 162 86.28 36.28 101.58 14-15 years 131 120.32 54.14 90 119.47 16-17 years 27 136.18 60.93 119.47 119.47 </th <th>AGE GROUPS. No Weighed. Ibs. Kilograms. No Weighed. Ibs. 2- 3 years 5 33.55 15.09 11 31.66 3- 4 years 33 33.27 14.97 37 34.57 4- 5 years 36 39.84 17.92 44 39.61 5- 6 years 36 39.84 17.92 44 33.57 6- 7 years 36 39.84 17.92 44 42.28 6- 7 years 47 49.29 22.18 39.61 42.28 6- 7 years 226 53.89 24.25 198 52.93 8- 9 years 89 59.87 26.94 80 57.64 9-10 years 202 69.26 31.16 21 68.13 11-12 years 162 86.28 38.82 231 92.24 13-14 years 162 86.28 38.82 231 92.24 16-17 years 131 120.32 60.93 119.47 <</th>	AGE GROUPS. No Weighed. Ibs. Kilograms. No Weighed. Ibs. 2- 3 years 5 33.55 15.09 11 31.66 3- 4 years 33 33.27 14.97 37 34.57 4- 5 years 36 39.84 17.92 44 39.61 5- 6 years 36 39.84 17.92 44 33.57 6- 7 years 36 39.84 17.92 44 42.28 6- 7 years 47 49.29 22.18 39.61 42.28 6- 7 years 226 53.89 24.25 198 52.93 8- 9 years 89 59.87 26.94 80 57.64 9-10 years 202 69.26 31.16 21 68.13 11-12 years 162 86.28 38.82 231 92.24 13-14 years 162 86.28 38.82 231 92.24 16-17 years 131 120.32 60.93 119.47 <