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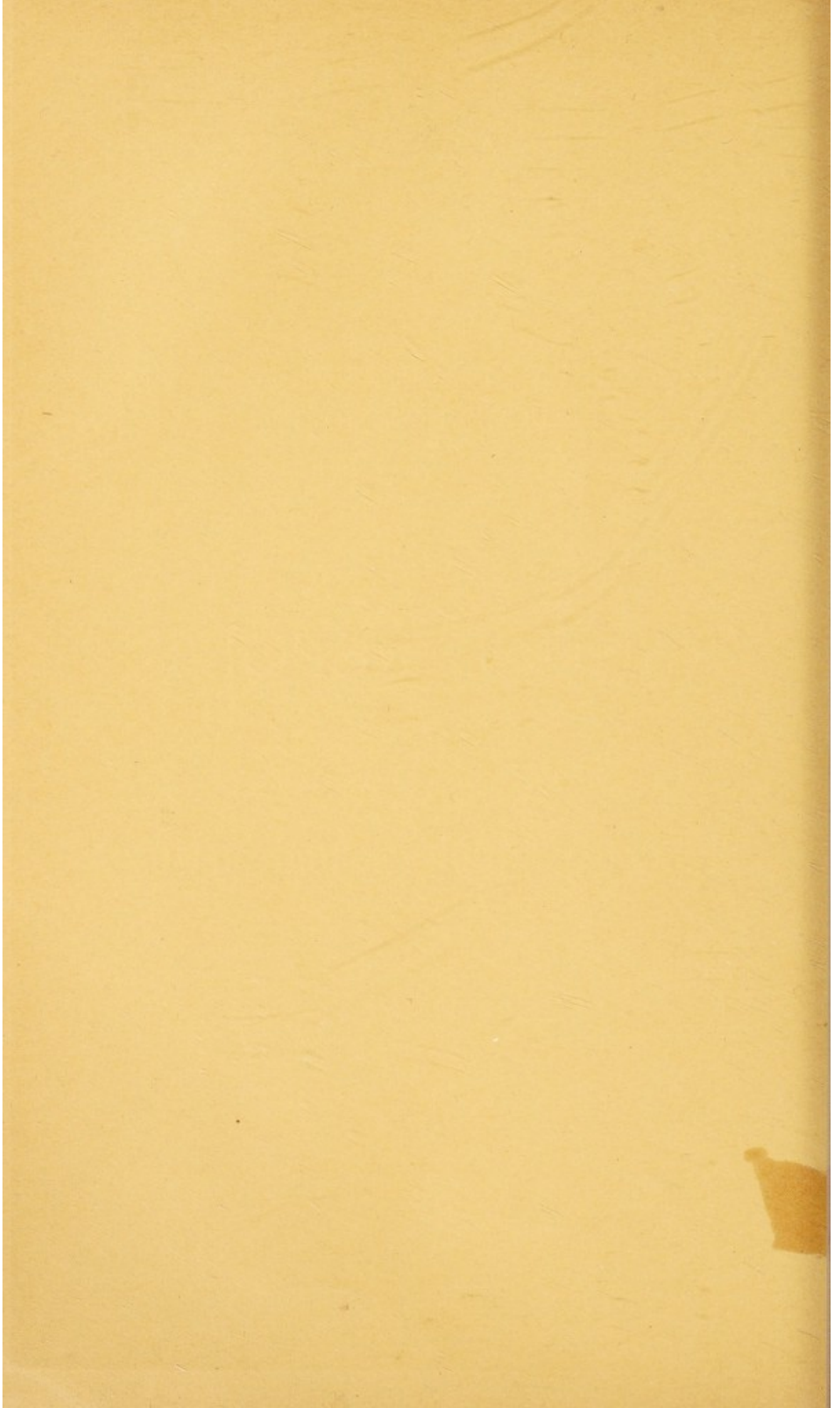
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NORTH RIDING OF YORKSHIRE COUNTY COUNCIL
EDUCATION COMMITTEE



ANNUAL REPORT
OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR
1953





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INTRODUCTION.

To the Members of the North Riding Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit herewith a formal report on the school health service for the year 1953. In accordance with the wishes of the Ministry of Education the report is presented earlier than in previous years. 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.

The year under review saw the fifth anniversary of the National Health Service and it is now possible to observe the effects of that service on the further development of the School Health Service. In the North Riding there has been each year, an improvement in the dovetailing between the two services, which must be fully complementary if school children (and the rest of the community) are to obtain the maximum benefit from both of them. With a growing realisation of the assistance which the school health service can give, co-operation has been forthcoming from the officers of the hospital service and from the general practitioners. There has been less hesitation about making information available to the school medical staff. The position is illustrated by the following extract from a letter recently received :

“ I had intended informing you when she left hospital but regret that the matter was overlooked. This child was remarkably fit when discharged, but I have since heard that her condition has again deteriorated owing to home circumstances.”

During these five years the Committee have provided two special residential schools for handicapped pupils and have enhanced the value of the school health service by the appointment of an increased number of dental officers, as well as an oral hygienist, an educational psychologist, speech therapists, orthopaedic nurses, an audiometric nurse and lip reading instructor. In conjunction with the specialist services provided by the Regional Hospital Boards in school clinics, a comprehensive service is gradually being built up.

The medical staff in the Riding during 1953, apart from the area administered by the Scarborough Divisional Executive, comprised nine school medical officers each with responsibilities to the local health authority, and to local sanitary authorities, two full-time school medical officers, and one part-time school medical officer. At the beginning of February, Dr. Margaret C. Barnet, the medical officer in charge of the mobile maternity and child welfare clinic, commenced to devote a portion of her time to school medical work. In April Dr. Mabel P. McMullan was engaged on a sessional basis for duty mainly in the Wensleydale area.

The Committee lost a valued official by the sudden death, which occurred during July, of Dr. J. Stokoe. In addition to being Divisional School Medical Officer, Dr. Stokoe was Medical Officer of Health of the Borough of Scarborough and of the Scalby Urban and the Scarborough Rural Districts, and served the local health authority as executive officer in these districts. In each of these various capacities Dr. Stokoe had, since his appointment in 1946, given a high standard of service. During the remainder of the year Dr. Elizabeth R. Cameron acted in his place and, assisted by two part-time medical officers, carried out the school medical work in the area of the Divisional Executive.

The favourable trend with regard to the recruitment of dental staff, to which I drew attention last year, continued. Although a temporary dental officer appointed in January resigned in March, the dental staff was increased by the appointment of Mr. D. S. K. Bielby, L.D.S., on a part-time basis in September, followed by the full-time appointment of Mrs. E. M. Bielby, L.D.S., and Mr. D. Clough, L.D.S. ; they commenced duty in November.

Consultant advice and treatment continued to be provided to school children by specialists in the employ of the regional hospital boards. Mr. J. B. T. Keswick who acted as consulting aurist to the Committee prior to 1948 retired during the year. In order that specialist advice should be readily available to children with ear, nose and throat conditions, especially those found to have partial hearing on audiometric survey, arrangements were made for Dr. F. Fleming to conduct monthly sessions at the clinics in Guisborough, Redcar, Thornaby and South Bank. Other cases were referred to hospital outpatient departments via the family doctor. Thanks to the co-operation of the consultant ophthalmologists no difficulty was experienced in arranging early appointments at eye clinics for children who required investigation because of eye defects. Unfortunately the position in relation to consultant psychiatric advice was not so favourable. Although in that part of the Riding which is within the area of the Leeds Regional Hospital Board the number of sessions was maintained at one each week, no provision save that of outpatient sessions at St. Luke's Hospital was made by the Newcastle Board in the northern part of the County. The work of the educational psychologist was, as a result, considerably restricted in so far as the emotional disorders of maladjusted children are concerned. This position was rendered even more difficult by the absence of a psychiatric social worker.

The services of the speech therapists were very much in demand throughout the year. In particular the therapist working on Tees-side, Miss Knight had difficulty in overtaking the work so that there is now a waiting list for hearing classes. Miss V. Lang who was doing this work in Scarborough resigned in May. As from September Miss D. Carlisle replaced Miss Lang in Scarborough, while Miss A. D. Glover took up duty in the southern part of the county : she also attends each Monday in Northallerton. Mr. R. D. O'Brien who had been giving lip reading instruction in Scarborough on one afternoon each week, went abroad in May. After considerable difficulty and a delay of four months Mrs. S. B. Staines of Hull was persuaded to give lip reading instruction on one day each week at the Scarborough School clinic.

One cannot leave the subject of staff without making reference to the retirement at the beginning of the year of the Superintendent School Nurse, Miss G. Berridge. Miss Berridge took a keen interest in the nursing problems of the school health service. Her deputy, Miss F. S. Leader was promoted in her place, and in August Miss L. Mann was appointed Deputy Superintendent School Nurse.

Valuable work was done at Welburn Hall and Brompton Hall, the two residential special schools in the North Riding for physically handicapped and educationally subnormal pupils respectively. The children admitted to these two schools received great benefit both from the educational and physical point of view from the training provided under ideal conditions. In addition the Authority maintained a number of children suffering from various defects at suitable residential schools belonging to other authorities or voluntary bodies. As stated in my report last year, the placement of maladjusted pupils in special schools is often difficult. Admission to a special school is not, however, always necessary. Attention to parental attitudes and home environment can do a great deal but to obtain permanent results a complete child guidance team is necessary, the function of the psychiatric social worker being particularly important. Similar difficulties are encountered in obtaining vacancies in special schools for educationally subnormal pupils who have a relatively low intelligence quotient. Some of the children in this group ultimately prove to be ineducable. A decision can, however, more easily be made after the child has had a trial period at a special school. On Tees-side the position will be eased by the two special schools for educationally subnormal pupils which are envisaged for that area.

The school medical officers are unanimous in making favourable comments on the health of the school children during 1953. Once again a relatively small number of children were found to be of poor general condition. The proportion of children in each of the three categories "good," "fair" and "poor," are virtually the same as last year, suggesting that a good degree of uniformity is being attained in the assessment of the physical condition of the children.

The number of children examined during the year was rather smaller than in 1952, and fewer defects requiring active treatment were found. This in turn resulted in a reduction in the number of re-inspections carried out. The school medical officers devoted an increased amount of their time to the examination of educationally subnormal and other handicapped pupils.

Although there was no widespread outbreak, the year was marred by the occurrence of two deaths from diphtheria. Neither of the two children who died had been immunised. This was a grave warning to parents that they must not have a false sense of security because diphtheria now occurs so infrequently. Immunisation against the disease remains of first class importance and it is the duty of every parent to take advantage of the facilities which are readily available, both through the school health service and from the family doctor and so ensure that their children are protected. A small

number of school children were again reported as suffering from poliomyelitis (infantile paralysis) and one child died. The total incidence of measles, whooping cough and scarlet fever was rather higher than last year.

Although the school nurses carried out an increased number of examinations in the schools it is gratifying to be able to report that a smaller number of "heavy infestations" had to be dealt with. This result is in no small measure due to the conscientious work of the nursing staff. In this task they had the full co-operation of the school medical officers and teachers. As the source of the school child's infestation is often in the child's home, those medical officers who are also medical officers of health of sanitary districts are to an increasing extent enlisting the assistance of their sanitary inspectors in dealing with this problem. As I stated last year, the medical officer of health is handicapped by the absence of effective legal powers to examine persons, though he has a clear right of entry to examine houses and their contents. Even so, action along the lines indicated cannot fail to have a beneficial effect. Children infected with ringworm were less frequently encountered. Constant vigilance was, however, required because of the occurrence of sporadic cases. There were several minor outbreaks of impetigo. The advice and co-operation of the consultant dermatologists in the Tees-side area, Dr. A. N. P. Milner and Dr. Gillies Annan, was again forthcoming and was much appreciated by the school medical staff.

The Chief Dental Officer describes in his report on page 24, the manner in which it has been possible as a result of the increase in dental staff, to concentrate more on conservative dentistry, so that both the proportion and gross number of fillings has once again this year, shown a material increase. Orthodontic work also continues to occupy more of the dental officers' time and the resultant increase in the number of appliances required has, in turn, caused greater demands on the staff of the dental workshops. The services of the oral hygienist were also fully utilised throughout the year. It is encouraging that the school dental service is recovering from the difficulties of recent years, and has thus been able to extend the scope of its important work.

The year 1953 was remarkable for the number of new schools of modern design and equipment which were opened. Re-organisation on a major scale was possible as the spacious new schools, both secondary and primary were brought into use. Further progress was also made in the very difficult task of improving the general hygiene of the older school premises.

In conclusion I should like to record my appreciation of the loyal assistance given to me by all the members of the staff of the school health service and to Dr. Cameron who drafted this report; my thanks for co-operation 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,
Principal School Medical Officer

County Hall,
Northallerton,
30th March, 1954.

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 1953)	..	378,200
No. of children on registers, primary schools, January, 1954	..	39,366
No. of primary school or departments, January, 1954	..	355
No. of children on registers, secondary schools, January, 1954		13,440
No. of secondary schools, January, 1954	.. .. .	45

(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—

PRINCIPAL SCHOOL MEDICAL OFFICER, (also County Medical Officer).

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

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

A. D. C. S. CAMERON, M.B., CH.B., D.P.H.

SCHOOL MEDICAL OFFICERS.

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

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

PEGGY BEYNON, M.R.C.S., L.R.C.P., D.P.H. (part-time).

*MABEL P. McMULLAN, M.B., B.S. (part-time, commenced 21-4-53).

*MARGARET C. BARNETT, M.B., CH.B. (part-time, commenced 2-2-53).

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, M.B., CH.B., D.P.H.
 J. A. DUNLOP, M.B., CH.B., D.P.H.
 F. W. GAVIN, M.D., D.P.H.
 H. GRAY, M.D., CH.B., D.P.H.
 H. PATTINSON, M.B., CH.B., D.P.H.
 J. W. A. RODGERS, M.B., CH.B., D.P.H.
 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 Service Act, 1946).

J. STOKOE, M.D., B.S., B.HY., D.P.H. (Died 11-7-53).

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).

* With the exception of those whose names are marked with an asterisk all the medical practitioners above named have been approved by the Ministry of Education as certifying officers under the appropriate Regulations.

(ii) **DENTAL STAFF.**

S. CRAVEN, L.D.S., Principal School Dental Officer.
 A. D. CLARK, L.D.S.
 C. E. PLACE, L.D.S.
 L. H. HEAD, L.D.S.
 C. G. LINGFORD, L.D.S., M.R.C.S., L.R.C.P., Dental Anaesthetist.
 MISS P. E. THOMAS, L.D.S.
 R. B. STEEL, L.D.S.
 G. FLEMING, L.D.S. (part-time).
 D. CLOUGH, L.D.S. (commenced 18-11-53).
 D. S. K. BIELBY, L.D.S. (part-time, commenced 14-9-53).
 MRS. E. M. BIELBY, B.CH.D., L.D.S. (commenced 1-11-53).
 J. E. PAYNE, L.D.S. (commenced 12-1-53, resigned 14-3-53).
 MISS E. M. WATSON, Oral Hygienist.

SCARBOROUGH DIVISION.

J. C. CARR, L.D.S.
 D. BEWES ATKINSON, L.D.S. (part-time).
 D. R. STORR, L.D.S.

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

- *Ophthalmic Surgeons .. J. A. MAGNUS, M.D., F.R.C.S., D.O.M.S.
 B. SHEEHAN, M.B., CH.B., D.O.M.S., B.SC.
 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 .. F. FLEMING, M.B., B.S., L.R.C.P., L.R.C.S.,
 L.R.F.P.S., D.L.O.
 G. 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.
- Anaesthetist .. J. S. RUDELL, M.A., M.B., D.A.

* Services of these Consultants are made available by Regional Hospital Boards without charge to the Authority.

(iv) EDUCATIONAL PSYCHOLOGIST.

L. P. STAR, M.A., PH.D.

(v) SPEECH THERAPISTS.

MISS I. M. S. KNIGHT, F.C.S.T.
 MISS A. D. GLOVER, L.C.S.T. (commenced
 7-9-53).

SCARBOROUGH DIVISION.

MISS V. LANG, L.C.S.T. (resigned 1-5-53).
 MISS D. CARLISLE, L.C.S.T. (commenced
 3-9-53).

(vi) LIP READING INSTRUCTOR.**SCARBOROUGH DIVISION.**

R. B. O'BRIEN (part-time, resigned
 23-5-53).
 MRS. S. B. STAINES (part-time,
 commenced 15-9-53).

(vii) SCHOOL NURSES.

The superintendent school nurse is also the superintendent health visitor and non-medical supervisor of midwives. Thirty-five nurses are employed full-time on school nursing and health visiting. In addition one nurse devotes her whole time to audiometric work.

Superintendent School
Nurse

.. MISS G. BERRIDGE, S.R.N., S.C.M., A.R.S.I.
(retired 21-1-53).

MISS F. S. LEADER, S.R.N., S.C.M., H.V. Certif.
(commenced 22-1-53)

Deputy Superintendent
School Nurse

.. MISS F. S. LEADER, S.R.N., S.C.M., H.V. Certif.
(resigned 21-1-53).

MISS L. MANN, S.R.N., S.C.M., H.V. Certif.
(commenced 1-8-53).

School Nurses

.. Thirty-five H.V./S.N's (half-time).

One school nurse (full-time)

A school nursing service equivalent to that of a further $6\frac{1}{2}$ full-time nurses is given by district nurses or combined-duty nurses in the rural areas.

(viii) ORTHOPAEDIC NURSES (Whole-time).

(with clinic and after-
care visiting duties)

C. CHAPMAN, S.R.N.

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

(ix) AUDIOMETRIC NURSE.

E. PRESSICK, S.R.N., S.C.M.

(x) PHYSIOTHERAPIST

SCARBOROUGH
DIVISION

MRS. G. M. GREEN, M.S.C.P., M.E., L.E.T.
(part-time).

(xi) DENTAL TECHNICIANS.

R. G. HANSOM (Technician in charge).

P. A. LAZENBY.

D. L. BAUGH (Apprentice, completed training
7-11-53).

J. D. WADE (Apprentice).

D. COTTON (Apprentice, commenced training
23-11-53).

SCARBOROUGH DIVISION.

(20-8-51) F. SHAW (part-time, commenced 2-3-53).

(xii) DENTAL ATTENDANTS.

MRS. V. E. CRANE.

MRS. J. HAIGH (commenced 18-11-53,
resigned 24-12-53).

MRS. M. M. HODGSON.

MRS. R. LAWSON.

MISS D. MORTON.

MRS. O. NELSON.

MISS M. ROBERTS (commenced 16-11-53).

MISS A. SEATON.

MRS. H. TYRRELL.

SCARBOROUGH DIVISION.

MISS N. MALLEN.

MISS B. J. SHAW.

MRS. N. D. V. STOREY (resigned 31-10-53).

MRS. M. B. WARNER (commenced 21-12-53).

(xiii) CLERICAL STAFF.

Chief Clerk .. H. A. ROEBUCK, D.P.A.

Senior Clerk .. B. M. MATHISON.

**III. MEDICAL INSPECTION OF PUPILS AT PRIMARY
AND SECONDARY SCHOOLS.****(i) General.**

On 31st December, 1953, there were 355 primary schools or departments in the county including Scarborough. There were 45 secondary schools.

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

The hospital schools in the Riding are as follows :—

	Number of Places	Age Range	Number of pupils (January, 1954)
Adela Shaw Orthopaedic Hospital, Kirbymoorside	125	3-16	86
Northallerton Orthopaedic Hospital	100	2-16	48
Thornton Lodge Sanatorium, .. Aysgarth	40	3-16	14
Poole Hospital Special School ..	58	3-16	33

(ii) School Hygiene.

The outstanding feature of the year, under this head, was, of course, that a substantial part of the Committee's building programme came to fruition. Four secondary and seven primary schools were established in newly erected premises, and two further secondary schools were established in premises vacated by children going to the new schools. The pupils fortunate enough to attend these schools receive their education in spacious modern buildings in which the ventilation, lighting, heating and sanitary arrangements are of the latest design. In addition during 1953, many sanitary improvements were carried out in the older schools; progress being made along the lines set out in my report for 1951. The county health inspectors, when visiting the schools for milk sampling purposes, make an entry in the school log book with regard to any day-to-day matter requiring attention. They inspected premises used for the preparation and service of school meals.

Water Supplies.

The health inspectors submitted 643 samples of school water supplies for bacteriological examination. Of these 472 were found to be satisfactory and 171 unsatisfactory. At some fifty schools drinking water was boiled for varying periods during the year.

(iii) Medical Inspection.

The School Health Service and Handicapped Pupils Regulations, 1953, alter somewhat the requirements regarding medical inspections contained in the 1945 Regulations. It is now left to the authority's discretion when to arrange the minimum of three inspections or whether to arrange additional general inspections. Since the new Regulations recommend that two of the general medical inspections should be carried out during the first and last years of compulsory school attendance, the intermediate inspection being carried out during either the last year in the primary school or the first year in the secondary school, no alteration in the Committee's previous decision has been required. During 1952 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 recommended age groups (entrants, leavers, primary and leavers secondary) and the 7-8 and 12-13 age groups were inspected if time permitted. At the Welburn Hall and Brompton Hall Residential Special Schools, medical inspections of all pupils are carried out each year. This practice is in line with the requirement of the new Regulations that the Authority shall arrange for other inspections of any pupils on such occasions as may be necessary or desirable and that the attention paid to the general health and welfare of any pupil who is suffering from a disability of mind or body shall include particular attention to his disability.

FINDINGS OF MEDICAL INSPECTION.

Diseases and Defects.

Of the 18,354 children seen at periodic medical inspections, 2,396 were found to be suffering from a defect or disease (other than dental diseases and infestation with vermin). This represents 13·05% of all pupils inspected, and is lower than the corresponding figure for the previous year—17·10%. The decrease occurred mainly with regard to the entrants.

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

Group	Number of Pupils	
	Inspected	Found to require treatment (excluding dental diseases and infestation with vermin)
Entrants	5,751	823 (14·31%)
Second age group	4,129	518 (12·55%)
Third age group	3,043	351 (11·50%)
Total (prescribed groups)	12,923	1,692 (13·09%)
Other periodic inspections	5,431	704 (12·96%)
Grand Total	18,354	2,396 (13·05%)

General Condition.

Year	Number of Pupils Inspected	A Good %	B Fair %	C Poor %
1948	17,619	21·84	73·81	4·35
1949	19,587	37·92	60·04	2·06
1950	19,123	48·45	49·87	1·68
1951	19,436	51·33	47·55	1·12
1952	19,628	53·80	45·06	1·14
1953	18,354	53·61	45·10	1·29

Since 1948, the school medical officers have made an assessment of the general condition of each child examined and have classified them as "good," "fair" or "poor." An assessment of this sort, involving as it does many different factors and carried out by several medical officers, only allows of a very broad classification. Small variations in the percentage of children falling into any particular group can, therefore, be disregarded. Nevertheless, the continued improvement in the general condition of school children in the North Riding is well brought out in the figures in the table. There is

little change in the figures for 1953 as compared with those for the previous year, except that a slight increase in the percentage of children classified as of "poor" general condition will be noted. Whereas in former years the entrant group of school children contributed the highest percentage classified as of "poor" general condition, this was not the case last year. The larger percentage falling into "group C" during 1953 was due instead to an increase in the percentage of children in this category in the higher age groups. This finding, as well as the fact that there was a substantial decrease in the percentage of entrants found to be suffering from a defect or disease, suggests a real improvement in the health of the child coming into the schools. One of the school medical officers has the impression that there is a temporary falling off in the physique of the children, particularly the boys of junior school age. He suggests that, in general, children of this age are left to fend for themselves, and to undertake errands and other tasks, more than their younger brothers and sisters and finally, that the scholarship examination may be a factor! In general, however the figures quoted in the table, take along with the reports of the school medical officers of the good health of the children throughout the year, can be viewed with satisfaction. Reference has been made in previous years to the part which the school meals service has undoubtedly played in bringing about the improvement in the general health and well being of the children.

The staff of the school meals service are to be congratulated once more this year on the quality and attractiveness of the meals provided, and the complete absence of any reported incident of food poisoning in relation to the school population of the Riding, attributable to school feeding. In the older schools these results have sometimes been obtained under difficult conditions.

Milk in Schools.

The county health inspectors, as in previous years, have played an active part in the supervision of school milk supplies. Every effort was made to stop the use of ungraded milk by obtaining alternative pasteurised or tuberculin tested supplies. In the case of small rural schools, however, this was sometimes difficult. Dairymen find it uneconomical to bottle and deliver the small quantities of milk required. These remarks apply especially to tuberculin tested supplies and as a result, the number of schools supplied was reduced by seven during the year. Fortunately there was an increase in the number of schools receiving pasteurised milk. In January, 1952, the percentage of schools being supplied with milk other than pasteurised or tuberculin tested was 10.4; by the end of the year, the figure had fallen to 8.16.

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.

Grade	No. taken	Methylene Blue Test		Phosphatase Test		Biological examination		Remarks
		Passed	Failed	Passed	Failed	Tb. Neg.	Tb. Pos.	
Pasteurised	882	815	43	875	5	5	—	23 samples not M.B. tested. 1 sample not tested.
Tuberculin Tested	131	3	—	—	—	127	—	4 not examined.
Accredited	4	—	—	—	—	3	1	—
Non-designated	99	1	3	—	—	94	—	3 not examined.

NOTE :—Where samples are listed above as not having been tested, this was due to atmospheric shade temperature in excess of 65° Fahr., souring of milk and/or death of guinea pig from intercurrent infection prior to completion of biological examination.

The presence of tubercle bacilli in a sample of 'accredited' school milk was reported to the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries. Although his inspection of the herd did not disclose any infected animal, he found that a cow which had been in the herd when the sample was taken had since been slaughtered. The induration of the udder from which this cow had suffered was highly suggestive of a tuberculous infection.

Quite apart from tuberculosis, the supervision of school milk supplies is of importance in relation to other infections which may arise from the consumption of contaminated milk. For example haemolytic streptococci were found in a 'non-designated' milk sample. The inspection of the herd by the Divisional Veterinary Officer disclosed a cow suffering from mastitis. This animal was slaughtered and the examination of subsequent samples of milk gave satisfactory results. Once more during 1953 several school milk supplies were found to contain "brucella abortus." This organism gives rise to undulant fever in susceptible individuals. The disease, though seldom lethal, can cause prolonged ill-health. The organism is destroyed by milk pasteurisation. Pending elimination of this infection from the herds concerned, the milk supplies in question were heat-treated.

On a day in October, 1953, 25,910 pupils were taking school meals compared with a corresponding figure of 28,817 in 1952 and 27,568 in 1951. The extent of the Committee's catering activities in 1953 can be seen from the following table.

No. of children taking meals and milk at school in October, 1953.

	Meals		Milk
	Free	For payment	
SECONDARY			
Scarborough division ..	252	1,134	1,460
Remainder of Riding ..	567	4,051	6,403
PRIMARY			
Scarborough division ..	470	1,798	4,052
Remainder of Riding ..	2,163	15,475	27,527
Total ..	3,452	22,458	39,442

Cleanliness.

The school nurses paid a total of 2,332 visits to schools in the Riding for the purpose of carrying out cleanliness inspections. They made 169,959 examinations ; most school children being examined three times during the year. Although a rather increased number of inspections were carried out, there was a slight reduction in the number of children found to be infested. As in former years, the great majority of the children were found at each examination to be completely free from infestation. A number of children however, were repeatedly found to be infested. The presence of these persistent offenders constitutes a danger to the other children with whom they come in contact, the effect of which is only minimised by the constant vigilance of the school nursing staff. The efforts of the school nurses in relation to children whose heads quickly become re-infested after cleansing are rendered more difficult by the fact that so frequently the source of reinfestation lies outside the school. Parents, older sisters who have left school, and pre-school children with verminous heads are not subject to supervision or treatment. There are those medical officers of health who consider that legislation similar to the Scabies Order, 1941, now repealed, should be introduced to authorise the medical officer of health to insist on verminous persons, irrespective of age, submitting themselves for cleansing or treatment. Meantime, at least one school medical officer in the Riding, in his capacity of medical officer of health of a sanitary district, has made a practical approach to the problem by arranging for his sanitary inspectors to visit the homes of all children who are persistently found to be verminous. The inspectors advise the parents on methods of cleansing and invite them to attend the health clinic for examination and, if necessary, cleansing.

Apart from verminous conditions of the scalp, the school nurse also pays attention to the cleanliness of the child's person. In general I am able to report that a high standard was maintained.

Scabies and Impetigo.

The incidence of scabies and impetigo continued at a low level as compared with the position some years ago, although during the autumn and early winter a number of children in the Cleveland area required treatment for the latter condition.

Ringworm.

The incidence of ringworm continued to decline but in certain of the populous parts of the Riding, a substantial number of cases were encountered. As in previous years, full use was made of Wood's light in the diagnosis and follow-up of children suffering from this condition, and in the surveillance of the contacts. The infecting organism is, in most cases, *microsporon audouini* and a majority of the affected children were excluded from school for varying periods. The school medical officers once more received the full co-operation of the consultant dermatologists with regard to the treatment of the more severely affected children.

Clothing and Footwear.

The school medical officers all report the children whom they inspected as being well clad and well shod. A number of younger children were found to be wearing shoes or socks which were too small for them. This is a frequent cause of foot trouble which, at first of a comparatively minor nature can, if not corrected, cause substantial disability in later life. The wearing of wellington boots in winter, and plimsolls in summer, throughout the school day, also has a prejudicial effect on the developing foot. This practice has been discouraged as far as practicable.

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 6,007 domiciliary visits were made and details of the defects and visits are shown in the table below.

Number of Nurses' Home Visits arising from School Medical Inspections.

Condition	No. of defects found for which treatment was considered necessary	No. of visits by School Nurses
Cleanliness of head	9	14
Nutrition	27	30
Nose and Throat	733	917
External Eye Disease	15	20
Ear Disease	80	131
Heart and Circulation	54	58
Lungs	77	86
Nervous System	26	30
Skin	16	19
Ringworm	8	12
Flat Feet	80	112
Deformities	151	242
Tuberculosis	54	69
Speech	73	126
Vision and Squint	2,410	3,977
Hearing	53	58
Miscellaneous	78	106
Total ..	3,944	6,007

NOTE—Some of these cases are carried over from 1952 so that the totals do not coincide with those in the table at the end of the report ; the latter apply only to defects found during the year 1953.

TREATMENT OF DEFECTS.

Minor Ailments.

School clinic sessions were held four times weekly at Whitby and New Earswick, twice weekly at Carlin How, Redcar, Thornaby, Grangetown, South Bank, Guisborough and Clifton Without, and once weekly at Lingdale, Saltburn and New Skelton.

Attendances at Minor Ailment Clinics.

Condition for which children attended the School Clinic	Number of first visits	Number of re-visits
Scabies	15	13
Impetigo	158	261
Ringworm—Head	307	508
„ —Body	25	63
Verminous conditions	435	890
Minor Injuries	1,409	1,021
External Eye Disease	216	208
Ear Discharge and Deafness	315	813
Nose and Throat	269	185
Vision	522	220
Lungs	3	1
Nervous System	2	—
Tuberculosis	83	55
Skin (Non-Contagious)	618	872
Sores	742	1,200
Other conditions	853	503
Chilblains	19	22
Diphtheria Immunisation	67	17
Total	6,058	6,852

Year	Number of First Visits	Number of Re-visits	Total number of Attendances
1948	9,379	11,084	20,463
1949	9,056	12,869	21,925
1950	7,769	9,728	17,497
1951	6,692	8,162	14,854
1952	6,043	8,119	14,162
1953	6,058	6,852	12,910

The tables above show that although the number of first visits paid to the minor ailment clinics was practically the same as in 1952, the downward trend in the number of attendances, to which attention was drawn last year, continued. In certain of the more populous parts of the Riding, the clinics are, however, particularly active. The clinics held in school premises functioned well during the year and provided an opportunity for the school nurse to give regular treatment to children suffering from such conditions as otorrhoea. In one area the school medical officer arranges to carry out a number of routine medical inspections during each of his attendances at

clinic sessions held in schools. In Eston diphtheria immunisation is extensively carried out at the clinic. In Richmond, Guisborough, Thornaby and Whitby, ultra violet light therapy is available, and made considerable use of with good results. To an ever increasing extent, special examinations and consultations with parents form the clinic work of the school medical officer.

Consultant sessions were again held in the authority's clinics throughout the year, the specialists being remunerated by the regional hospital boards. Although the pressure on the services of the consultant ophthalmologists has been particularly heavy, children have been seen within a short time of being referred. This is particularly satisfactory as it is of first importance that school children should have the benefit of having any defect of vision fully investigated by a medically qualified expert in this field. The prompt supply of spectacles when ordered has continued to improve and little delay was experienced.

The orthopaedic specialists working in the Authority's clinics also had many children referred to them, thus making prompt follow up of the children by the orthopaedic nurses possible. In this way a really comprehensive service is provided.

With regard to diseases of the ear, nose and throat, the position is now more satisfactory than it was immediately following the introduction of the National Health Service Act. All the consultants were most co-operative so that operative treatment for tonsils and adenoids was quickly arranged for those children who, after careful assessment, were considered to require it.

During the year arrangements were made for Dr. F. Fleming to hold an otologist's clinic once a month at Redcar, Thornaby, Normanby and Guisborough. Dr. Fleming was thus available to see children referred by the audiometric nurse, as well as by the school medical officers, and to advise as to their treatment. These ear clinics, as well as being more accessible to mothers of families, acted as a screen, reducing the already heavy demands made on the hospital out-patient clinics.

Audiometric Survey.

The audiometric nurse, Miss E. Pressick, continued the audiometric survey of school children which was commenced in the last quarter of 1952. Using the gramophone audiometer, Miss Pressick was able to test groups of up to forty children at one time. Each child is instructed to write down certain numbers which are repeated at gradually diminishing intensities of sound. To this extent the co-operation of the child is required and the child must be able to understand and write down the spoken word. It is, therefore, not practicable to test children under seven years of age with this apparatus. The children tested by Miss Pressick were those over eight years of age. Children who failed the first test were given a second test to ensure that their failure was

due to impaired hearing and not to, for example, excitement, or difficulty in following the instructions or writing down the numbers. The number of tests carried out during the year were as follows :—

Number of children tested once ..	8,676
Number of children given second test ..	1,097
Total number of tests	9,773
Number of children who failed both tests	577 or 6.65%

It will be observed that 6.65% of the children tested failed both tests. This percentage varied widely in different parts of the Riding, being as low as 1.58% in one area and as high as 10.42% in another. In a substantial proportion of the 577 children who failed the second test, the hearing loss was found on investigation, to be of a temporary nature and due to nothing more serious than, for example, wax in the ears. Such children were given treatment and retested by Miss Pressick when next she visited the school, in order to confirm that their hearing was now satisfactory. The remainder of the children were referred, in conjunction with the family doctor, for specialist advice. In the Tees-side area the children were seen by Dr. Fleming in the first instance at one of the clinics already mentioned.

Children requiring operative treatment were referred to the North Riding Infirmary through the family doctor. Dr. Fleming commenced to conduct these special clinics during May and from then until the end of the year, children were seen as follows:—

	Number of children.
Found to have failed the group test due to causes other than impaired hearing	35
Referred for treatment at minor ailment clinics ..	99
Referred to hospital	27
Requiring observation	21
Total number examined	182

Miss Pressick assisted Dr. Fleming at the clinic sessions and herself held treatment sessions. She paid thirty six home visits.

As was pointed out last year, the pure tone audiometer, in contrast to the gramophone audiometer, allows an accurate assessment of the degree of hearing loss at different sound frequencies to be made. It is possible also to test younger and backward children with this instrument. Only one child is tested at a time and the child indicates that it has heard the test by some simple movement, such as nodding the head or striking the table with a small hammer. The Committee has authorised the inclusion in the estimates of a sum for the purchase of a pure tone audiometer for the special investigation of selected children.

Professor and Mrs. A. W. G. Ewing, of Manchester University, who are the pioneers of work in this field, attach great importance to the diagnosis of impaired hearing in the pre-school child, so that the parents may be advised as to the correct handling of the child. By this means, the child is taught to lip read at an early age and to think in the same way as a hearing child. At least some speech is possible in nearly every case and only a minority require to be placed in schools for the deaf. Mrs. Ewing in particular, believes that the school nurses, in their capacity as health visitors, are especially fitted for this work.

Enlarged Tonsils and Adenoids.

During the year under review, 168 pupils received operative treatment for adenoids and chronic tonsillitis, while 315 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 315 first attendances and 813 re-visits for such conditions made in 1953.

Visual Defects and External Diseases of the Eye.

Over the country as a whole, there has been an increase in the number of children found at periodic and special medical inspections to be suffering from squint, from 31,189 in 1949 to 37,499 in 1951. In the North Riding, as will be seen from the table, there was a fairly marked increase in the number of children recorded as suffering from squint in 1950. In the last three years, however, the numbers have tended to fall.

Year	Requiring Treatment for Squint	Requiring Observation only	Total
1948	129	73	202
1949	160	90	250
1950	188	205	393
1951	219	157	376
1952	170	164	334
1953	126	87	213

Children suffering from this condition are referred to the eye specialists who conduct sessions in the school clinics ; the consultants refer to hospital those children who require orthoptic or operative treatment.

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 Children treated
Deformity of feet	38
Deformity of leg	15
Abnormality of spine	1
Dislocation of hip	2
Hemiplegia	11
Infantile paralysis	15
Rickets	2
Old fractures and injuries	1
Torticollis	2
Spastic paraplegia	7
Spastic diplegia	2
Spastic quadriplegia	1
Scoliosis	1
Perthe's disease	2
Arthritis	2
Dyschondroplasia	1
Erbs Palsy	1
Deformity of hip	2
Haemophilia	1
Malnutrition	1
Abnormality of sacrum	1
Webbing of neck	1
Spina Bifida and scoliosis	1
Tuberculosis of knee	2
Tuberculosis of hip	1
Tuberculosis of spine	1

At the following orthopaedic clinics 451 sessions were held as compared with 467 in 1952, 711 children made 2,411 attendances as compared with 713 children and 2,792 attendances in the previous year. An orthopaedic surgeon attended at 135 out of the 451 sessions mentioned.

Carlin How	Saltburn
Kirbymoorside	Scarborough
Malton	South Bank
Northallerton	Thornaby
Redcar	Whitby
Richmond	York (rented from the York Education Committee).

Medical Examinations of Entrants to Courses of Training for Teaching.

Ministry of Education Circular No. 249 dated 28th March, 1952, provides that entrants to courses of training for teaching shall be examined by the school medical officer of the area in which they live. This arrangement has the advantage that where applicants are school pupils, the school medical officer has access to the school records. In addition the school medical officer is closely in touch with schools and the conditions under which students in training and teachers have to work.

The new procedure was brought into operation as from 1st April, 1952. Although an x-ray examination of the chest is not obligatory in the case of all entrants to courses of training, such an examination has been arranged in many instances. Other entrants were able to provide proof of recent satisfactory examination by mass miniature radiography. During 1953, 43 male and 120 female candidates were examined by the school medical officers. One hundred and thirty-five candidates were examined radiologically with negative results.

THE SCHOOL DENTAL SERVICE.

Report by Mr. S. Craven, L.D.S., Principal School Dental Officer.

The recruitment of dental staff towards the end of 1953 helped the overall output of work, particularly with regard to the amount of conservative treatment completed. The full effect of this additional staff, however, will become more apparent when returns become available for a whole year.

While the number of extractions carried out increased from 22,284 for the year 1952, to 23,058 for 1953, the number of fillings showed a larger proportional increase from 5,982 to 9,088 for 1953. This comparative rise in the conservative work was anticipated and will continue with the additional staff. I feel confident that it will soon be possible to reach the full establishment of dental staff required.

The completion of the fully equipped fixed clinics at Lingdale, Easingwold, Ryedale and Pickering will facilitate the dental services in the respective areas. I feel that this will be particularly appreciated by Mr. Place in the Malton area, who has for years worked under the most difficult conditions, and has repeatedly pressed for an improvement in the facilities available in this rural area. The policy of the county administration with regard to the dental services in the past, has been to concentrate upon the more densely populated industrial districts of the Riding where the maximum amount of treatment could be administered; but I am pleased to report that in conjunction with the use of the mobile dental caravans, we are now in a position to offer equal clinic facilities in the rural districts.

The number of administrations of general anaesthetics during the year increased from 8,019 to 9,500 cases. Since over 90% of extractions are done by general anaesthetic, the larger increase in the number of general anaesthetic cases compared with the increase in the number of extractions, indicates an improvement in the condition of the mouths.

The output of mechanical work from the dental laboratories at Northallerton, South Bank and Scarborough continues to expand, particularly in

relation to the provision of treatment and dentures for nursing and expectant mothers. Most of the work, however, is done on behalf of school children and more dentures and particularly orthodontic appliances for the correction of irregularities of the mouth have been made. Some very satisfactory results have been achieved. Parents now take a more lively interest in this work and appreciate the value of this form of treatment.

The part-time dental technician employed in the Scarborough laboratory has already made a request for an increase in the number of sessions and the time will soon come when consideration may require to be given to the appointment of a full-time technician for this laboratory.

The two mobile clinics have been kept in constant use throughout the year. In spite of the increase in the number of fixed dental clinics that have been established in recent years, it is still difficult to cope with the requests for their use in the isolated parts of the Riding.

Requests for the particular form of treatment offered by Miss Watson, the oral hygienist, continues to increase, but it is impossible for her to overtake, single-handed, this type of treatment throughout the Riding. Her work was chiefly confined to the Cleveland district, but she has recently been allowed to help in the area of the Scarborough Divisional Executive where her work has been equally appreciated. I shall be glad when it becomes possible for the Committee to appoint the second oral hygienist, already approved, to help Miss Watson, and so relieve the pressure of work upon the dental surgeons.

INFECTIOUS DISEASE.

Only two children are known to have suffered from diphtheria during 1953. Neither of the children had been immunised and unfortunately both of them died. The reduction in the incidence of diphtheria since the introduction of immunisation against the disease on a wide scale has been dramatic. The bacillus which causes the disease is, however, still present in the community and ready to attack children who have not developed a resistance to it as a result of immunisation. The rare occurrence of cases of diphtheria makes such children particularly susceptible. A failure to have children immunised will result in a re-appearance of this dangerous disease. The school medical officers, both in their capacity as officers of the Education Committee and as medical officers of health, have been most active in offering diphtheria immunisation to school and pre-school children. For success they must, however, have the co-operation of the parents. This has, to a large extent, been obtained in the more populous parts of the Riding. In some of the rural areas, the percentage of immunised children has, however, reached a dangerously low level.

Eleven North Riding (including Scarborough) school children were reported as having contracted poliomyelitis during 1953. Two cases were non-paralytic and nine paralytic. There was one death.

Notifications were received of the occurrence of scarlet fever affecting 401 children, measles affecting 2,074 children, and whooping cough affecting 434 children. Two schools were closed during the year by the medical officer of health because of an outbreak of scarlet fever and measles respectively.

PHYSICAL EDUCATION.

Facilities for physical education were greatly expanded by the opening of the various new schools during the year. The fully equipped gymnasia and excellent playing fields made it possible to present a full course of physical education to an increased number of school children. The influence of the specialist teaching staff who have been appointed to the new secondary schools is already being felt. The halls in the new primary schools have been provided with vaulting and climbing equipment, thus ensuring that the basic work is thorough and interesting. As the result of re-organisation, rooms are now available for physical education at many of the older primary schools.

Coincident with these improvements, the syllabus of physical education has been replaced by the Ministry of Education. At eight centres in the Riding, the new work was introduced to 565 primary school teachers in lecture—demonstration courses which were conducted by the Committee's organisers of physical education. In addition, some eighty teachers attended an Easter course on various branches of primary and secondary physical education, while at Wrea Head College, the programme included courses in movement, hockey, tennis coaching, cricket coaching and Morris dancing.

Selected grammar school boys attended a residential course on cricket at Scarborough conducted by the Yorkshire County Cricket Club coaches, Mr. Maurice Leyland and Mr. Arthur Mitchell. Two grammar school boys played for the Yorkshire "Under 18" side.

Special instruction was given during the year by coaches of the Football Association at many secondary and all-age schools.

The North Riding Schools Athletic Association was formed to co-ordinate the out-of-school physical activities of secondary schools. In this way, eight schools were represented at a tennis rally which was held at Northallerton for senior and junior girls. A North Riding athletic team took part in the Yorkshire schools meeting at Sheffield. At this meeting Yorkshire representatives in the All-England finals at Uxbridge were selected. In the junior girls 100 yards event a North Riding competitor took second place. A grammar school eleven played a similar team from County Durham at association football. Two North Riding boys were awarded free places at the Football Association course at Oxford. The boxing section continued to hold the usual inter-area matches and a team was again entered in the Yorkshire competition.

In the Eston area, due to the early closure of the Redcar Baths, an autumn swimming session was not practicable. Near York, however, the Yearsley open-air pool was steam heated and it was possible for an age group from the Clifton Canon A. R. Lee County Modern School and from the Joseph Rowntree School, to have a twelve week course of instruction. In addition to ordinary school tests, many swimmers obtained the awards of the Royal Life Saving Society.

During the summer holidays of 1953, one hundred and ninety four children, aged eleven plus, from eight schools, spent one week under canvas at the Committee's camp sites at Bainbridge and Scalby.

WELBURN HALL RESIDENTIAL SPECIAL SCHOOL FOR PHYSICALLY HANDICAPPED CHILDREN.

The School Health Service and Handicapped Pupils Regulations, 1953, amends somewhat, the definition of physically handicapped pupils which was contained in the Handicapped Pupils and School Health Service Regulations, 1945. The new definition reads as follows :—

“Physically Handicapped Pupils, that is to say, pupils not suffering solely from a defect of sight or hearing who by reason of disease or crippling defect cannot, without detriment to their health or educational development, be satisfactorily educated under the normal regime of ordinary schools.” The result of the alteration is to bring within the scope of the definition, physically handicapped pupils who are able, with some degree of special help, to attend ordinary schools.

In previous reports I have drawn attention to the facilities available at Welburn Hall Special School, which have been available since January, 1951, for those physically handicapped children who required education in a residential special school. The table appended to these notes shows the number of children who resided at Welburn Hall during 1953, classified in broad groups according to their disabilities. The staffing arrangements at the school have continued as in previous reports. The increased attention required by children suffering from orthopaedic conditions as well as certain medical ailments, calls for the appointment of a second physiotherapist but to date it has not been possible to obtain a suitable person to fill the vacancy.

There are 80 places at Welburn Hall. On 31st December, 1953, there were 76 children on the roll. Of these 43 were drawn from the North Riding, the remainder being sent by other local education authorities. The Committee have agreed to accept pupils from other Local Education Authorities served by the Adela Shaw Orthopaedic Hospital, Kirbymoorside.

Diagnosis of Cases at Welburn Hall Residential School during the year.

Age Range	Orthopaedic Conditions								Medical Conditions					
	Polio-myelitis paralytic		Cere-bral Palsy		Muscu-lar Diseases		Other Con-ditions		Heart		Chest		Other Con-ditions	
	B	G	B	G	B	G	B	G	B	G	B	G	B	G
2-5	2	-	-	-	-	-	-	-	-	-	-	-	-	-
5-10	5	4	6	8	2	-	4	1	-	1	-	1	-	-
10-16	3	5	6	4	3	4	8	4	7	2	4	5	-	1
Total	10	9	12	12	5	4	12	5	7	3	4	6	-	1
	19		24		9		17		10		10		1	

It will be noted that 24 of the children at this school suffered from cerebral palsy. These spastic children make especially heavy demands on the staff. Their intelligence is assessed by Dr. Star and some of them receive speech therapy from Miss Carlisle. Physiotherapy is also important for them.

BROMPTON HALL RESIDENTIAL SPECIAL SCHOOL FOR EDUCATIONALLY SUB-NORMAL CHILDREN.

The School Health Service and Handicapped Pupils Regulations, 1953, contain the following definition :—

“ Educationally Sub-Normal Pupils, that is to say pupils, who by reason of limited ability or other conditions resulting in educational retardation, require some specialised form of education wholly or partly in substitution for the education normally given in ordinary schools.”

The pupils selected for admission to Brompton Hall, the Committee's residential special school for educationally subnormal pupils, were broadly those aged ten to fourteen years those whose intelligence quotients were in the range 60 to 75. The school can take ninety four children of both sexes and on the 31st December, 1953, there were ninety three children, comprising fifty eight boys and thirty five girls, on the roll. The teaching staff have special experience of teaching this type of child and the children are taught in small specially planned classes. They are much happier at a school such as Brompton Hall where they compete with others of their own intellectual level and are not disheartened by constantly being excelled by brighter children. Many of the children admitted have made steady educational progress. One child in particular, a girl aged 13 years, improved sufficiently for her to be returned to an ordinary school. On the other hand it became clear that three of the children were too backward to take advantage of the education provided. These children were, therefore, reported to the Local Health Authority as being ineducable. The behaviour of a fourth child was such that it was found necessary to obtain a place for him at the Baliol School, Sedbergh. Two children left Brompton Hall School on attaining sixteen years of age. One of these obtained unskilled employment at an iron works, while the other commenced work on a pig and poultry farm. Sixteen of the children on the roll at the end of the year were in the care of the Children's Committee.

All the children at the school are on the list of a local medical practitioner. Routine medical inspections are arranged by the school medical officer and in addition the children are examined medically before going home on holiday, as well as on their return. Dr. L. P. Star, the educational psychologist, examines the children from time to time as well, and co-operates with the school medical staff in the selection of children suitable for admission.

THE CHILD GUIDANCE SERVICE.

Report by Dr. L. P. Star, Educational Psychologist.

An account of the work which a Child Guidance Service sets out to do, and a statement of the position of the North Riding Child Guidance Service at the end of 1952, was given in the Principal School Medical Officer's Report for that year. The position changed little during 1953. It was hoped that during the year a psychiatric social worker would be appointed and that additional psychiatric sessions would be provided, with consequent expansion of the Service. Unfortunately this was not to be, and during the whole of 1953 the Service continued to function as best it could with only a skeleton staff. A good deal of work was, however, accomplished, as indicated by the figures given below.

In my capacity as educational psychologist, I examined many children who were failing to make satisfactory progress in school. I also visited many schools, and in some cases examined special groups of children.

In the psychiatric field, children from Scarborough and some from the surrounding districts in the east of the county, were seen by Dr. Gordon at the Scarborough Child Guidance Clinic. There is a long waiting list for this clinic, and it is often six months before a child can be seen. The Child Guidance Clinic now functioning at Clifton, York, also attended by Dr. Gordon, was provided for part of the year in the southern part of the county. In the west of the county no psychiatrist was available, but after preliminary investigations had been made, some children from the area were seen by arrangement at the Darlington Child Guidance Clinic. Similarly in the northern part of the county, where again no psychiatrist was available, it was possible to pass some cases on to the "Under 20" Clinic at St. Luke's Hospital, Middlesbrough. While one is very grateful for the help given by these clinics, they do not provide real substitutes for clinics within the county, for often travelling distances are too great, and close contact with individual cases cannot be maintained.

At the time of writing, it has been agreed to advertise for a psychiatric social worker and to obtain, if possible, the services of a psychiatrist on a sessional basis to work in the north of the county pending the provision of a psychiatrist there by the Newcastle Regional Hospital Board. If suitable personnel are forthcoming, the North Riding Child Guidance Service should at last be able to get into its stride.

Analysis of cases referred individually from 1st September, 1952 to 31st December, 1953.

Total number of cases referred	..	..	366
			(283 during 1953)
Number of boys	..	..	249
Number of girls	..	..	117
Number of cases closed	..	..	280
Number of cases open on 31st December, 1953	..	..	86

Cases referred because of backwardness and educational difficulties. (Psychologist only).

Total number of cases referred	..	..	205
Number of boys	..	..	136
Number of girls	..	..	69

Districts from which these cases were drawn.

(1) Thornaby and Stokesley	..	..	19
(2) Eston	..	..	17
(3) Redcar and Saltburn	..	..	9
(4) Guisborough, Loftus, Skelton and Brotton	..	..	12
(5) Whitby and Eskdale	..	..	10
(6) Ryedale, Pickering and Malton	..	..	40
(7) Flaxton, Easingwold and Thirsk	..	..	21
(8) Wensleydale, Bedale and Northallerton	..	..	23
(9) Richmondshire, Swaledale and Upper Teesdale	..	..	19
(10) Scarborough Division	..	..	35

Cases referred by

(1) Parent	..	..	1
(2) Head teachers	..	..	60
(3) Other Officers of the Education Committee	..	..	11
(4) School medical officers	..	..	84
(5) Family doctors	..	..	7
(6) Specialist doctors	..	..	30
(7) Children's Officer	..	..	6
(8) Magistrates and probation officers	..	..	3
(9) Others	..	..	3

Action taken

(1) No action (<i>e.g.</i> family removed, etc.)	..	..	2
(2) Special advice or treatment given	..	..	34
(3) General advice given	..	..	61
(4) Ascertainment as educationally subnormal or as ineducable recommended	..	..	84
(5) Under treatment or awaiting examination	..	..	27
Number of cases closed	..	..	178
Number of cases open on 31st December, 1953	..	..	27

Cases referred because of behaviour difficulties. (Full team).

Total number of cases referred	..	..	161
Number of boys	..	..	111
Number of girls	..	..	50

Districts from which these cases were drawn

(1) Thornaby and Stokesley	..	..	4
(2) Eston	..	..	2
(3) Redcar and Saltburn	..	..	14
(4) Guisborough, Loftus, Skelton and Brotton	..	..	14
(5) Whitby and Eskdale	..	..	8

(6) Ryedale, Pickering and Malton	12
(7) Flaxton, Easingwold and Thirsk	25
(8) Wensleydale, Bedale and Northallerton	4
(9) Richmondshire, Swaledale and Upper Teesdale	30
(10) Scarborough Division	48
Cases referred by	
(1) Parents and guardians	8
(2) Head teachers	18
(3) Education officers	11
(4) School medical officers	57
(5) Family doctors	26
(6) Specialist doctors	10
(7) Children's Officer	15
(8) Magistrates and probation officers	7
(9) Others	9
Cases referred because of	
(1) Excessively aggressive behaviour	15
(2) Excessively withdrawn behaviour	19
(3) Very difficult behaviour of various kinds	34
(4) Neurotic symptoms	32
(5) Anti-social behaviour (not amounting to delinquency)	9
(6) Delinquency (<i>i.e.</i> court cases)	9
(7) Enuresis and encopresis (bedwetting and soiling)	21
(8) Truancy (in various forms)	12
(9) Miscellaneous (<i>i.e.</i> unclassifiable under any of the above)	10
Action taken (Closed cases)	
(1) No action (<i>e.g.</i> family removed, refused to attend, etc.)	10
(2) Advice given by psychologist	19
(3) Advice given by psychiatrist	9
(4) Treated by psychiatrist at Scarborough Child Guidance Clinic	17
(5) Treated by psychiatrist at Clifton (York) Child Guidance Clinic	18
(6) Treated by psychologist at Saltburn Clinic	17
(7) Treated at St. Luke's Hospital (Middlesbrough) "Under 20" Clinic	3
(8) Treated at Darlington Child Guidance Clinic	9
(9) Treated at York City Child Guidance Clinic	0
Action taken (Open cases)	
(1) Under treatment at Scarborough Child Guidance Clinic	9
(2) Under treatment at Clifton (York) Child Guidance Clinic	4
(3) Under treatment at St. Luke's Hospital "Under 20" Clinic	8
(4) Under treatment at Darlington Child Guidance Clinic	12

(5) Under treatment at York City Child Guidance Clinic	1
(6) Under observation by psychologist ..	4
(7) Awaiting examination	13
(8) In schools or hostels for maladjusted children ..	4
(9) Awaiting placement in schools or hostels for maladjusted children	4
Number of cases closed	59
Number of cases open on 31st December, 1953 ..	102

SECTION 57, EDUCATION ACT, 1944.

Section 57 of the Education Act, 1944, requires the Local Education Authority to ascertain those children in their area who, having attained the age of two years, are suffering from disability of mind of such a nature and to such an extent as to render them incapable of benefiting from education at school.

Under sub-section 3 of this Section, the Local Education Authority are required, for the purposes of the Mental Deficiency Act, 1913, to report to the Health Committee, any child who, by reason of disability of mind, is found to be ineducable in a special school.

Under sub-section 4, it is also specified that a child shall be deemed to be ineducable not only if his disability renders him incapable of receiving education, but also if the disability is such as to render it inexpedient, either in his own interests or in the interests of his fellows, that he should be educated in association with other children.

Sub-section 5 likewise requires the Local Education Authority to report to the Health Committee any child in attendance at a maintained school, or at any special school, who, by reason of a disability of mind, will require supervision after leaving school.

During 1953, a total of 54 children were reported under this Section—39 under sub-section 3, and 1 under sub-section 4 as being ineducable and 14 under sub-section 5, as being in need of supervision after leaving school.

The comparable figures for 1952 were 31 under sub-section 3, 1 under sub-section 4, and 17 under sub-section 5—a total of 49.

SPEECH THERAPY.

Pupils suffering from Speech Defect, that is to say, pupils who on account of defect or lack of speech, not due to deafness, require special educational treatment.

North Riding school children who suffer from speech defects, receive special educational treatment from the three speech therapists in the employ of the authority. During the year Miss I. M. S. Knight undertook the work on Tees-side, while Miss Lang and later Miss Carlisle, her successor, worked in Scarborough, as well as devoting one day a week to the treatment of children at the Pickering Children's Home, Welburn Hall, and the Adela Shaw Orthopaedic Hospital. From September Miss A. D. Glover worked in the York-Northallerton area, conducting sessions in Clifton, New Earswick, Thirsk, Northallerton, Malton and Pickering.

As in former years, Miss Knight gave speech therapy lessons to children in groups rather than individually in order that as many children as possible who have defective speech might have the benefit of speech training. Working as she does in a very populous part of the Riding, Miss Knight encountered an ever increasing demand on her services so that difficulty was experienced in overtaking the work and she was reluctantly compelled to reduce her case load. Both Miss Knight and Miss Glover have a waiting list of children who require speech therapy. The number of children treated by Miss Knight during the year, and by Miss Glover during the last quarter of the year, classified according to their particular speech defect, along with the results obtained, can be seen from the table.

	Boys	Girls	Total
Stammer	115	50	165
Dyslalia	118	45	163
Sigmatism	28	22	50
Cleft Palate	6	10	16
Spasticity and Crossed Laterality	10	10	20
Mutism, etc	2	3	5
Rhinophonia	6	5	11
High Frequency deafness	7	2	9
Mongolism and retardation	4	1	5
Ankylosis	-	1	1
Sigmatism and Dyslalia	2	-	2
Paralysis plus stammer	2	-	2
	<hr/>	<hr/>	<hr/>
	300	149	449
	<hr/>	<hr/>	<hr/>
Discharged—adjustment reached	36	34	70
Withdrawn—left district	}	22	48
Left school—unsatisfactory attendance			
Remaining under treatment	238	93	331
	<hr/>	<hr/>	<hr/>
	300	149	449
	<hr/>	<hr/>	<hr/>

In addition the speech therapy carried out within the area of the Scarborough Divisional Executive is reported on by Dr. Evans, the Divisional School Medical Officer, in his report.

EMPLOYMENT OF SCHOOL CHILDREN.

During the year 461 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 Scarborough, Hinderwell Infants' School for 30 children, and at Friarage Infants' School for 30 children aged three to five.

HANDICAPPED PUPILS.

Formal ascertainment of handicapped pupils was carried out during the year in accordance with Section 34 of the Act, but placement in special schools 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	Total
Educationally subnormal	53	41	94
Educationally subnormal and physically handicapped	1	1	2
Educationally subnormal and epileptic	1	—	1
Blind	2	2	4
Partially sighted	1	1	2
Deaf	2	2	4
Partially deaf	—	2	2
Epileptic	1	—	1
Maladjusted	2	—	2
Delicate	5	2	7
Physically handicapped	2	1	3
Total	70	52	122

No special educational treatment was provided in the ordinary primary and secondary schools, save in the case of four partially sighted children who had been provided special apparatus.

The following tables give particulars of pupils maintained in special 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.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Yorkshire School for the Blind, York	4	1	3	1
Royal Victoria Blind School, Newcastle-on-Tyne ..	1	1	1	-
St. Vincent's School, West Derby	-	1	-	1
Blind Sunshine Home, Birkdale	-	-	-	1
Worcester College for the Blind	1	-	1	-
Royal Normal College, Shrewsbury	-	-	-	1
Total ..	6	3	5	4

Partially Sighted.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Yorkshire School for the Blind, York	1	-	1	-
Barclay School for partially sighted girls, Sunninghill ..	-	2	-	2
Sheffield School for the Blind	1	-	1	-
St. Vincent's School, West Derby	1	-	1	-
Royal Normal College for the Blind, Rowton Castle ..	-	1	-	1
Exhall Grange Special School, Coventry	7	3	5	3
Total ..	10	6	8	6

Deaf.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Northern Counties School, Newcastle	-	2	-	2
Yorkshire School for the Deaf, Doncaster	5	9	4	9
St. John's Institution, Boston Spa	-	1	-	1
Middlesbrough Day School for the Deaf	9	8	11	9
Lawns House School, Leeds	2	1	2	1
Maud Maxwell Day Deaf School, Sheffield	1	-	-	-
Mary Hare Grammar School, Newbury	-	-	2	-
Total ..	17	21	19	22

Deaf and Educationally Subnormal.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Bridge House School, Harewood, Leeds	2	-	2	-
Total ..	2	-	2	-

Partially Deaf.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Yorkshire School for the Deaf, Doncaster	3	-	3	-
St. John's Institution, Boston Spa	1	-	1	-
Middlesbrough Day School for the Deaf	2	2	2	3
Royal Residential School for the Deaf, Manchester	-	2	-	2
Liverpool School for the Partially Deaf, Southport	1	-	1	-
Total	7	4	7	5

Delicate.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Warnham Court, Horsham	-	-	1	-
Hawkenbury School, Tunbridge Wells	-	-	1	-
Fulford Road Day School, York	3	4	1	3
The Children's Convalescent Home, West Kirby	4	2	3	3
Salters Lane Open Air School, Darlington	-	1	-	1
Hamilton House School, Seaford	-	-	1	-
Burrow Hill Residential School, Frimley	1	-	-	-
Bradstock Lockett Hospital, Southport	1	-	2	-
Ragworth Open Air School, Stockton	-	-	1	-
Welburn Hall	4	1	2	-
Total	13	8	12	7

Educationally Sub-normal.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Brompton Hall	40	28	58	37
Meadows House, Southborough	1	-	-	-
Dovecot School, Knotty Ash, Liverpool	-	2	-	1
Beacon Residential School, Lichfield	2	-	1	-
Besford Court, Worcester	2	-	2	-
Fulford Road Special Day School, York	6	9	5	10
St. Francis School, Birmingham	1	3	-	2
Allerton Priory R.C. School, Woolton	-	3	-	2
Acklam Road Special Day School, Middlesbrough	1	-	-	-
Barnard Special Day School, Darlington	1	-	-	-
The Vineyard, Warwick	3	-	1	-
Garvald, West Linton, Peeblesshire	1	-	1	-
Hooper House, Wentworth	-	1	-	-
Total	58	46	68	52

Epileptic.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Home for Epileptics, Maghull	-	3	1	3
Lingfield Epileptic Colony	2	-	1	-
St. Elizabeth's Home, Much Hadham	-	-	1	-
Total ..	2	3	3	3

Maladjusted.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Chaigley School, Thelwall	2	-	1	-
St. Peter's Boarding School, Horbury	-	1	-	1
Gordon Boys' Home, Woking	1	-	-	-
Oakbank, Ingrow, Keighley	1	-	1	-
Ledston Hall, Allerton Bywater	1	-	1	-
Aymestry Court, Woolton	-	-	1	-
Total ..	5	1	4	1

Physically Handicapped.

Name of School	1952		1953	
	Boys	Girls	Boys	Girls
Welburn Hall	30	26	27	22
Heritage Craft Schools, Chailey	1	-	-	-
Children's Convalescent Home, West Kirby	-	-	-	-
Bradstock Lockett Home, Southport	-	1	-	-
Horton Lodge Residential School, Rudyard	1	-	-	-
Moor House, Oxted	-	-	-	1
Total ..	32	27	27	23

MEDICAL INSPECTION RETURNS

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY & SECONDARY SCHOOLS

A—Periodic Medical Inspections

Number of Inspections in the prescribed Groups :—

Entrants	..	..	..	..	..	5,751
Second Age Group	..	..	..	..	..	4,129
Third Age Group	..	..	..	..	..	3,043
Total						12,923

Number of Other Periodic Inspections 5,431

Grand Total 18,354

B—Other Inspections

Number of Special Inspections	..	..	..	..	..	3,182
Number of Re-inspections	..	..	..	..	..	5,818
Total						9,000

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 II _A	Total individual pupils
Entrants	47	781	823
Second Age Group	226	305	518
Third Age Group	174	189	351
Total (prescribed groups)			
Other periodic inspections	284	433	704
Grand Total			
	731	1,708	2,396

TABLE II.

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

Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
	No. of defects		No. of defects	
	Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Skin	148	62	23	9
Eyes—				
(a) Vision ..	731	708	305	640
(b) Squint ..	118	83	8	4
(c) Other ..	50	12	4	1
Ears—				
(a) Hearing ..	54	51	25	45
(b) Otitis Media ..	19	10	6	6
(c) Other ..	73	26	15	18
Nose or Throat ..	544	935	146	253
Speech	74	57	38	47
Cervical Glands ..	13	89	3	24
Heart and Circulation ..	27	113	6	47
Lungs	69	187	14	45
Developmental—				
(a) Hernia ..	8	9	—	2
(b) Other ..	11	9	2	5
Orthopaedic—				
(a) Posture ..	30	38	1	9
(b) Flat Foot ..	89	44	11	10
(c) Other ..	213	153	24	55
Nervous System—				
(a) Epilepsy ..	17	11	2	11
(b) Other ..	19	49	6	20
Psychological—				
(a) Development ..	7	75	8	64
(b) Stability ..	—	—	1	—
Other	194	93	31	115

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

Age Groups	Pupils Inspected	A (Good)		B (Fair)		C (Poor)	
		No.	%	No.	%	No.	%
Entrants	5,751	3,132	54.46	2,558	44.48	61	1.06
2nd Age Group	4,129	2,081	50.40	1,996	48.34	52	1.26
3rd Age Group	3,043	1,674	55.01	1,323	43.48	46	1.51
Other Periodic Inspections ..	5,431	2,952	54.35	2,401	44.21	78	1.44
Total	18,354	9,839	53.61	8,278	45.10	237	1.29

TABLE III.
INFESTATION WITH VERMIN

(i) Total number of examinations in the schools by the school nurses or other authorised persons	169,959
(ii) { Heavily infested	338
{ Total number of individual pupils found to be infested	2,793
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	189
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	9

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	307	2
(ii) Body	25	2
Scabies	15	—
Impetigo	158	—
Other skin diseases	618	18
Total	1,123	22

GROUP 2. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	by the Authority	otherwise
External and other, excluding errors of refraction and squint	216	—
Errors of refraction (including squint)	— *	1,509
Total	216	1,509
Number of pupils for whom spectacles were		
(a) Prescribed	— *	1,049
(b) Obtained	— *	—

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

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

	Number of cases treated	
	by the Authority	otherwise
Received operative treatment		
(a) for diseases of the ear	—	33
(b) for adenoids and chronic tonsillitis	—	168
(c) for other nose and throat conditions	—	—
Received other forms of treatment	899	46
Total	899	247

GROUP 4. ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases treated	
	by the Authority	otherwise
(a) Number treated as in-patients in hospitals	115	
(b) Number treated otherwise <i>e.g.</i> in clinics or out-patient departments	—	711

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	—	66

GROUP 6. SPEECH THERAPY.

	Number of cases treated	
	by the Authority	otherwise
Number of pupils treated by Speech Therapists	449	—

GROUP 7. OTHER TREATMENT GIVEN.

	Number of cases treated	
	by the Authority	otherwise
Miscellaneous Minor Ailments	3,124	87

TABLE V.

DENTAL INSPECTION AND TREATMENT.

(1) Number of pupils inspected by the Authority's Dental Officers :—						
(a) Periodic age groups	..	..	..	..	..	32,611
(b) Specials	..	..	..	..	..	477
(c) TOTAL (Periodic and Specials)	..	..	..	..	..	<u>33,088</u>
(2) Number found to require treatment	..	..	..	..	..	21,401
(3) Number referred for treatment	..	..	..	..	..	21,306
(4) Number actually treated	..	..	..	..	..	16,313
(5) Attendances made by pupils for treatment	..	..	..	..	..	22,587
(6) Half days devoted to :						
Inspection	..	..	..	..	..	285
Treatment	..	..	..	..	..	2,975
						<u>3,260</u>
(7) Fillings :						
Permanent Teeth	..	..	..	..	..	7,911
Temporary Teeth	..	..	..	..	..	1,177
						<u>9,088</u>
(8) Number of teeth filled :						
Permanent Teeth	..	..	..	..	..	7,332
Temporary Teeth	..	..	..	..	..	1,043
						<u>8,375</u>
(9) Extractions :						
Permanent Teeth	..	..	..	..	..	4,351
Temporary Teeth	..	..	..	..	..	18,707
						<u>23,058</u>
(10) Administration of general anaesthetics for extractions						
					..	9,500
(11) Other Operations :						
Permanent Teeth	..	..	..	..	..	2,125
Temporary Teeth	..	..	..	..	..	948
						<u>3,073</u>
Attendances for fitting of dentures and/or orthodontic appliances						
					..	3,930

AVERAGE WEIGHTS.

Age Groups	Boys.			GIRLS.		
	No. Weighed	Lbs.	Kilograms	No. Weighed	Lbs.	Kilograms
3-4 years ..	3	34.67	15.73	5	34.70	15.74
4-5 years ..	41	42.00	19.05	27	38.96	17.67
5-6 years ..	1,240	43.72	19.83	1,040	42.45	19.26
6-7 years ..	363	47.22	21.42	331	46.28	20.99
7-8 years ..	543	52.69	23.90	393	51.42	23.32
8-9 years ..	402	59.21	26.86	364	55.93	25.37
9-10 years	158	65.01	29.49	174	62.45	28.33
10-11 years	539	70.02	31.76	479	69.21	31.39
10-12 years	521	77.62	35.21	388	77.24	35.04
12-13 years	463	82.70	37.51	305	87.90	39.87
13-14 years	151	97.00	44.00	290	97.87	44.39
14-15 years	689	107.02	48.54	549	109.20	49.53
15-16 years	282	120.83	54.81	208	112.11	50.85
16-17 years	71	135.81	61.60	34	123.01	55.80
17-18 years	19	140.16	63.58	12	133.08	60.36
18-19 years	4	153.25	69.51	2	128.50	58.29

AVERAGE HEIGHTS.

Age Groups	Boys.			GIRLS.		
	No. Measured	Inches	Centi- metres	No. Measured	Inches	Centi- metres
3-4 years ..	3	38.68	98.25	5	37.10	94.23
4-5 years ..	41	41.05	104.27	27	40.29	102.34
5-6 years ..	1,240	43.42	110.29	1,040	43.23	109.80
6-7 years ..	363	45.59	115.80	331	45.49	115.54
7-8 years ..	543	47.29	120.12	393	47.83	121.49
8-9 years ..	402	50.56	128.42	364	49.61	126.01
9-10 years	158	52.42	133.15	174	51.49	130.78
10-11 years	539	54.10	137.42	479	53.63	136.22
11-12 years	521	55.78	141.68	388	55.79	141.71
12-13 years	463	56.69	144.00	305	58.44	148.44
13-14 years	151	60.25	153.03	290	59.91	152.17
14-15 years	689	62.51	158.78	549	62.03	157.56
15-16 years	282	65.10	165.35	208	62.51	158.78
16-17 years	71	67.37	171.12	34	63.72	161.85
17-18 years	19	67.67	171.88	12	64.29	163.30
18-19 years	4	67.25	170.82	2	65.63	166.70

CLINIC SERVICES.

Minor Ailments.

CLINIC.	LOCATION.	SESSIONS.
Thornaby	.. School Clinic, George Street	.. Tuesday, Friday 9 a.m.
South Bank	.. Albert House, Normanby Road	.. Monday, Friday 9 a.m.
Grangetown	.. Mission Hall, Lee Road	.. Tuesday, Friday 9 a.m.
Redcar	.. 5, Turner Street, Coatham	.. Monday, Friday 9-30 a.m.
Saltburn	.. The Clinic, Bath Street	.. Wednesday 9-30 a.m.
Carlin How	.. Evening Institute, Brotton Road	.. Monday 1-30 p.m., Friday 9 a.m.
Guisborough	.. School Clinic, Northgate	.. Friday 9 a.m.
Guisborough	.. Park Lane School ..	.. Friday 2 p.m.
Lingdale	.. Institute Hall ..	.. Wednesday 9 a.m.
New Skelton	.. Methodist Church ..	.. Wednesday 9 a.m.
Whitby	.. School Clinic, Grape Lane	.. Monday, Wednesday, Friday 9 a.m.
Whitby	.. East Whitby School ..	.. Wednesday 10 a.m.
Clifton	.. Clifton Without Jnr. School	.. Tuesday, Friday 10 a.m.
New Earswick	.. New Earswick Jnr. Mixed School	.. Tuesday, Friday 11 a.m.
New Earswick	.. Joseph Rowntree C.M. School	.. Tuesday, Friday 10 a.m.
Scarborough	.. Old Hospital, Friars Way	.. Monday-Saturday 9 a.m.
Scarborough	.. Northstead School ..	.. Wednesday 9-30 a.m.
Scarborough	.. Hinderwell School ..	.. Thursday 9-30 a.m.
Newby	.. Primary School ..	.. Friday 10-45 a.m.

Orthopaedic Clinics.

Thornaby	.. School Clinic, George Street	.. Tuesday, Friday 2 p.m.
South Bank	.. Albert House, Normanby Road	.. Tuesday 10-30 a.m.
Normanby	.. Windsor Road ..	.. 2nd Friday in each month 10-30 a.m.
Redcar	.. 5, Turner Street, Coatham	.. Thursday, 10-30 a.m. (except 4th Thursday in each month).
Saltburn	.. The Clinic, Bath Street	.. Thursday 2 p.m., also 4th Thursday in each month 10-30 a.m.
Carlin How	.. Evening Institute, Brotton Road	.. Monday 10-30 a.m.
Guisborough	.. Northgate School Clinic	.. Monday 2 p.m.
Whitby	.. School Clinic, Grape Lane	.. Wednesday 9-30 a.m.
Kirbymoorside	.. Adela Shaw Orthopaedic Hospital	3rd Wednesday in each month 2 p.m.
Malton	.. The Friends' Meeting House	.. 4th Wednesday in each month 1-30 p.m.
York	.. The School Clinic, Rougier St.	.. 3rd Thursday in each month 2 p.m.

Orthopaedic Clinics—continued.

CLINIC.	LOCATION.	SESSIONS.
Northallerton	.. Zetland Street Clinic ..	.. 2nd Wednesday in each month 10-30 a.m.
Richmond	.. Welfare Centre, Quaker Lane	.. 4th Saturday in each month 11 a.m.
Scarborough	.. The Old Hospital, Friars Way	.. Tuesday, Friday, 9 a.m., fortnightly Friday, 2 p.m.

Speech Therapy Clinics.

Thornaby	.. School Clinic, George Street	.. Monday 9 a.m. (all day)
Stokesley	.. Alhambra House ..	.. Wednesday 1-30 p.m.
South Bank	.. Albert House, Normanby Road	.. Friday 9 a.m. (all day).
Redcar	.. 5, Turner Street, Coatham	.. Tuesday 9 a.m. (all day).
Guisborough	.. Northgate School Clinic	.. Wednesday 9 a.m.
Whitby	.. School Clinic, Grape Lane	.. Thursday 9-30 a.m. (all day).
Malton	.. The Friends' Meeting House	.. Tuesday 9-30 a.m.
Pickering	.. Children's Home ..	.. Tuesday 2 p.m.
Clifton	.. Clifton Without Jnr. School	.. Thursday 9-30 a.m.
New Earswick	.. New Earswick Jnr. School	.. Wednesday 9-30 a.m. (all day).
Thirsk	.. Thirsk & Sowerby Institute	.. Friday 9-30 a.m. (all day).
Northallerton	.. Zetland Street Clinic ..	.. Monday 9-30 a.m. (all day)
Scarborough	.. Old Hospital, Friars Way	.. Monday, Tuesday, Wednesday, Thursday (all day).
Kirbymoorside	.. Adela Shaw Orthopaedic Hospital } .. Welburn Hall Special School } .. Brompton Hall Special School }	Friday (all day).

Ophthalmic Clinics.

Thornaby	.. School Clinic, George Street	.. Thursday 1-30 p.m.
South Bank	.. Albert House, Normanby Road	.. Tuesday 1-30 p.m.
Redcar	.. 5, Turner Street, Coatham	.. Friday 1-30 p.m.
Carlin How	.. Evening Institute, Brotton Road	.. Wednesday fortnightly 1-30 p.m.
Whitby	.. School Clinic, Grape Lane	.. Friday 11-15 a.m. as required (all day).
Northallerton	.. Zetland Street Clinic ..	.. Wednesday 9-30 a.m. as required (all day).
Richmond	.. Welfare Centre, Quaker Lane	.. Wednesday 9-30 a.m. as required (all day).
Thirsk	.. Lambert Memorial Hospital	.. Saturday 10 a.m. fortnightly.
Malton	.. Malton, Norton & District Hospital	As required.
Kirbymoorside	.. Adela Shaw Orthopaedic Hospital..	As required.
Flaxton	.. 25, High Petergate, York	.. As required.
	.. County Hospital, York	.. As required.
Scarborough	.. Old Hospital, Friars Way	.. Monday 10-30 a.m.

Dental Clinics.

CLINIC.	LOCATION.	SESSIONS.
Thornaby	.. School Clinic, George Street	.. As required
South Bank	.. Albert House, Normanby Road	.. " "
Redcar	.. 5, Turner Street, Coatham	.. " "
Saltburn	.. The Clinic, Bath Street	.. " "
Guisborough	.. Northgate School Clinic	.. " "
Whitby	.. School Clinic, Grape Lane	.. " "
Scarborough	.. Old Hospital, Friars Way	.. " "
New Earswick	.. Jos. Rowntree C.M. School	.. " "
Northallerton	.. Zetland Street Clinic	.. " "
Richmond	.. Welfare Centre, Quaker Lane	.. " "
Helmsley	.. The Old Vicarage	.. " "
Ryedale	.. Ryedale C.M. School, Nawton Helmsley.	.. " "
Pickering	.. West View, Potter Hill	.. " "

Ear, Nose and Throat Clinics.

Thornaby	.. School Clinic, George Street	.. Wednesday 9-30 a.m. and every 4th Thursday 10 a.m.
Normanby	.. Windsor Road	.. Every 4th Thursday 10 a.m.
Redcar	.. 5, Turner Street, Coatham	.. Every 4th Thursday 10 a.m.
Guisborough	.. Northgate School Clinic	.. Every 4th Thursday 10 a.m.
Scarborough	.. Old Hospital, Friars Way	.. 4th Wednesday in each month 10 a.m.

Artificial Sunlight Clinics.

Thornaby	.. Health Centre, Francis Street	.. Tuesday, Thursday 9-30 a.m.
Guisborough	.. Northgate School Clinic	.. Tuesday 2 p.m.
Whitby	.. District Health Office, Grape Lane	Friday 10 a.m.
Richmond	.. "Beaumont," Gilling Road	.. Tuesday, Friday weekly 11 a.m. and 4 p.m.
Scarborough	.. Medical Baths	.. Monday, Thursday, Boys 9 a.m. Girls 9-30 a.m.

Physiotherapy Clinic.

Scarborough	.. Old Hospital, Friars Way	.. Tuesday, Friday 9 a.m.
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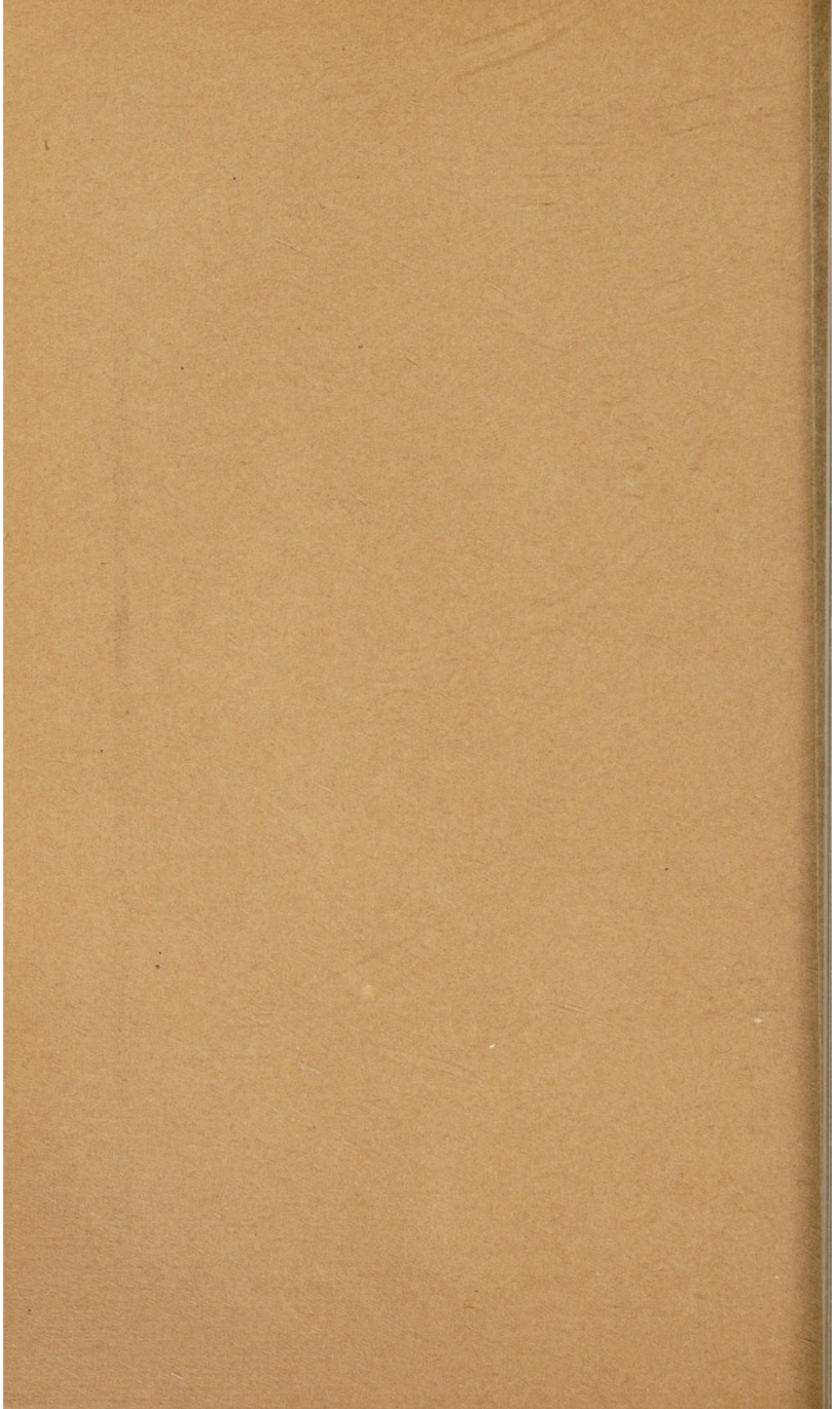
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NORTH RIDING OF YORKSHIRE
COUNTY COUNCIL
SCARBOROUGH
DIVISIONAL EXECUTIVE

REPORT

OF THE
DIVISIONAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1953

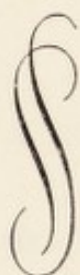




NORTH RIDING OF YORKSHIRE
COUNTY COUNCIL
SCARBOROUGH
DIVISIONAL EXECUTIVE

REPORT

OF THE
DIVISIONAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1953



The Chairman and Members of Scarborough Divisional Executive.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report of the Divisional School Medical Officer for the year 1953.

The Committee will appreciate that the report covers work carried out under the direction of the late Dr. Stokoe, until his tragic death, and subsequently of Dr. Elizabeth Cameron.

In the circumstances I will confine myself to the general comment that, in spite of the great loss which the death of Dr. Stokoe meant to the School Health Service, the standard and scope of the work was maintained.

I would like to take this opportunity of thanking the Committee for their kind welcome to me when I took up my new duties. I acknowledge gratefully, too, the kindness and co-operation of all the officers of the Committee with whom I have come into contact.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

W. G. EVANS,

Divisional School Medical Officer.

School Clinic,
Old Hospital,
Friars Way,
Scarborough.
31st May 1954.

1. GENERAL.

The total number of scholars on the school registers amounted to 7,415, an increase of 100 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)	28
(c)	Number of pupils on the registers of Primary Schools (excluding Child Haven Nursery School) in September, 1953 ...	4819
(d)	Number of children in Child Haven Nursery School in September, 1953 ...	45
(e)	Number of children in the Special Class at No. 9 Seamer Road in September, 1953 ...	22
(f)	Number of County Modern Schools in the Division	6
(g)	Number of pupils on the rolls of County Modern Schools in September, 1953 ...	1652
(h)	Number of Grammar and Technical Schools ...	3
(i)	Number of pupils on the rolls of Grammar and Technical Schools in September, 1953	877

2. STAFF.

(i) Medical Officers.

J. Stokoe, M.D., B.S., B.Hy., D.P.H., Divisional School Medical Officer. (Died 11th July 1953).

Elizabeth R. Cameron, M.B., Ch.B., D.P.H., School Medical Officer. (Acting Divisional School Medical Officer from 12th July 1953).

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

Sydney E. Jackson, M.B., Ch.B., Temporary School Medical Officer (part-time).

(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.

D. R. Storr, L.D.S.

(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.

Within the Borough of Scarborough, school nursing was carried out by the following six Health Visitors/School Nurses :

Miss L. Dawson, S.R.N., S.C.M., H.V.Cert.
Mrs. E. Hague, S.R.N., S.C.M., H.V.Cert.
Miss A. Kind, S.R.N., S.C.M., H.V.Cert.
Miss H. Macdonald, S.R.N., S.C.M., H.V.Cert.
Miss B. Merryweather, S.R.N., H.V.Cert.
Miss E. L. Nicholls, S.R.N., S.C.M., H.V.Cert.

School nursing in the Scalby Urban District and Scarborough Rural District areas and at Eastfield was conducted by six District Nurses.

(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 E. V. Lang, L.C.S.T. (resigned 1st May, 1953).
Miss D. Carlisle, L.C.S.T. (appointed 3rd September, 1953)

(viii) Lip Reading Tutors.

R. D. O'Brien (part-time) (resigned 23rd May, 1953).
Mrs. S. B. Staines, B.A. (part-time) (appointed 15th September, 1953).

(ix) Dental Attendants.

Mrs. N. D. V. Storey (resigned 10th October, 1953).
Miss N. Mallen.
Miss B. J. Shaw.
Mrs. M. Warner (appointed 21st December, 1953).

(x) Dental Mechanic.

F. Shaw (part-time) (appointed 2nd March, 1953).

(xi) Clerks.

J. R. Bassett, B.Com. (Senior Clerk).
Miss I. Hobbs (resigned 7th November, 1953).
Miss J. M. Clarke (appointed 23rd November, 1953).

3. MEDICAL SUPERVISION.

In addition to the age groups prescribed by the Handicapped Pupils and School Health Service Regulations, 1945 (entrants and leavers of Primary Schools, and leavers of Secondary Schools), the 7-8 year old children and all Secondary School pupils, other than those in their first year at such schools, were included in routine medical inspections. In all 4,069 were medically examined at their own schools; special medical examinations numbered 818, and re-inspections 1,075. All of these figures are slightly less than those for the previous year, which were 4,431, 830 and 1,159 respectively.

4. FINDINGS AT ROUTINE MEDICAL INSPECTION.

(a) The proportion of children found at routine medical inspection to require treatment was 12.56% as compared with 13.52% in 1952, 11.94% in 1951, and 13.51% in 1950.

Group.	Number of Children.	
	Inspected.	Found to require treatment (excluding dental diseases and infestation with vermin)
Entrants	885	137 (15.48%)
Second Age Group	692	79 (11.42%)
Third Age Group	1042	116 (11.13%)
TOTAL (Prescribed Groups)	2619	332 (12.68%)
Other periodic inspections	1450	179 (12.34%)
GRAND TOTAL	4069	511 (12.56%)

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

(b) General Condition.

Twenty-four pupils (0.59%) were found to be in a poor general state of health, a comparable figure to that of previous years:— 1952 = 22 (0.50%); 1951 = 28 (0.69%); 1950 = 29 (0.65%). These findings compare favourably with the latest available figures of the country as a whole (1951 = 2.9%; 1950 = 3.5%).

(c) Cleanliness.

The 26,538 individual cleanliness inspections by school nurses in schools represents approximately one inspection per child per school term. In 1953 two hundred and forty-one children were found to be infested, representing approximately 3% of our school population. The figures for the country's school population in 1950 and 1951 were 7% and 6% respectively.

	Primary	Secondary
Number of school visits by nurses ...	321	128
Number of examinations of pupils in the schools by nurses	19,742	6,796
Number of individual children infested ...	154	87
Number of visits to homes by the School Nurses	143	27

(d) Clothing and Footwear.

The standard and type of footwear is becoming unsatisfactory, especially in the Senior Schools. Foot complaints are increasing, and unsuitable footwear undoubtedly is a contributory cause. In the majority of cases the standard of clothing is good. The Scarborough Amicable Society afforded assistance during the year to the sum of £279.10s.11d. in the form of grants to needy cases.

5. TREATMENT OF DEFECTS.

(a) Minor Ailments.

There was a slight reduction in the number of children attending the Minor Ailments Clinics during 1953 compared with last year. The conditions for which they attended are given in the following table :—

Conditions for which children attended M.A. Clinic	No. of first visits.	Total Attendances.
Scabies	9	30
Impetigo	40	108
Ringworm	1	4
Uncleanliness (including Verminous Conditions)	49	106
Minor Injuries	379	655
External Eye Disease	66	151
Ear Discharge and Deafness	49	219
Nose and Throat	11	18
Vision	20	21
Heart and Circulation	14	28
Skin (Non-contagious)	335	987
Other conditions	283	755
TOTAL	1256	3082

(b) Defective Vision.

A resumé of the work done at the Ophthalmic Clinic during the year is presented in the table which follows :—

Number of sessions (by Ophthalmic Surgeon) ...	47
Number of children examined	430
Spectacles prescribed	191
Recommended other forms of treatment ...	31

(c) Ear, Nose and Throat.

Three hundred and eighty-six school children received operative treatment at Scarborough Hospital during the year, and 126 received other forms of treatment.

Mr. Guy L. Thompson continued with his monthly sessions at the School Clinic, 10 children making 31 attendances.

(d) **Orthopaedic.**

Twenty-two school children residing in the area of the Divisional Executive were treated as in-patients at the Adela Shaw Orthopaedic Hospital, Kirbymoorside, during the year, for the conditions shown in the following table :—

Condition.	No. of Children treated.				
Infantile Paralysis	5
Perthe's Disease	3
T.B. Bones	1
Scoliosis	2
Torticollis	2
Other Deformities	7
Miscellaneous	2

The orthopaedic surgeons held 22 sessions at the School Clinic, at which 175 children made 511 attendances; under the direction of the physiotherapist 160 children made 818 attendances at the 81 sessions of the remedial exercises clinic.

(e) **Tuberculosis.**

Two school children suffering from pulmonary tuberculosis were notified during 1953. Both were admitted to Fairfield Sanatorium, York.

(f) **Ringworm of the Scalp.**

No case of ringworm of the scalp came to the notice of the School Health Service during 1953.

(g) **Artificial Sunlight Treatment.**

With the co-operation of Scarborough Corporation 134 school children completed courses of artificial sunlight treatment at Scarborough Medical Baths, making 1,490 attendances.

(h) **Dental Services.**

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

6. PHYSICAL EDUCATION.

Mr. Nock, the Divisional Education Officer, kindly obtained the following report on Physical Education in the Scarborough Division during the year :—

“The steady progress in Physical Education has been maintained, while new features in approach and teaching technique, particularly in the Infant and Junior Schools, are becoming increasingly evident. The gradual introduction of gymnastic equipment into the Primary Schools has had a very stimulating influence on this subject. Similarly, the further development of movement training in the Infant Schools has been noteworthy, and it is hoped that this work will be continued in the Junior Schools for both boys and girls.

The organising staff conducted a well attended course of training in Physical Education for teachers covering a wide range of subject matter. Cricket Coaching courses were held at Wrea Head College under the M.C.C. Coaching Scheme and a number of teachers obtained the M.C.C. Honorary Coach's Certificate. They are to be congratulated upon their success, as the standard of the Examination Board is extremely high.

The schools again had the advantage of the services of the specialist Football Coach provided under the Football Association Training Scheme and these coaching periods have proved enjoyable, helpful and instructive to teachers and scholars alike. The Scarborough Cricket Club again provided excellent coaching facilities at the Scarborough Cricket Club ground, the instruction being given by the Club professional assisted by the teachers in charge of the boys. This helpful gesture of the Scarborough Cricket Club was much appreciated and the boys privileged to receive this specialist coaching have amply demonstrated by their performance the value of the Scheme.

This year the Girls' Secondary Schools had the opportunity of taking part in a Tennis Tournament for North Riding Schools organised by the newly formed North Riding Schools' Athletic Association. The tournament was of particular value in enabling girls to meet and play against girls from schools not on their normal fixture lists.

Swimming instruction at the North Bay Pool was undertaken as in previous years. The examinations for the Divisional Executive's preliminary awards were efficiently carried out by a panel of teacher examiners. The co-operation of the Royal Life Saving Society in the examination of candidates for their awards was also of great assistance. The Swimming season concluded with a well organised Swimming Gala at the North Bay Pool held by the Schools' Swimming Association.

School journeys and camps were undertaken by some schools and proved a great success. It is hoped that these wider activities will be extended”.

7. INFECTIOUS DISEASES.

There were the usual variations in the incidence of the commoner infectious diseases, but these were of no significance. Notifications of infectious diseases among children between the ages of 5-14 years (inclusive) in the Divisional Area were as follows :—

Measles	...	...	...	128
Whooping Cough	...	...	...	99
Scarlet Fever	...	...	...	65
Tuberculosis	...	...	...	2
Para Typhoid B	...	...	...	1
Sonne Dysentery	...	...	...	2

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, 1953 :—

Percentage of children provided with meals in Rural Schools	...	...	...	...	64.96
Percentage of children provided with meals in Scarborough Schools	...	...	...	...	46.28
Percentage of children provided with milk in Primary Schools in the Division	...	...	...	...	84.18
Percentage of children provided with milk in Secondary Schools in the Division	...	...	...	...	55.02

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

9. CO-OPERATION WITH OTHER BODIES.

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 70 cases enquired into in the Divisional Area.
No cases were due to drink.

Classification of Cases :—

Neglect	...	...	49
Advice sought	...	...	16
Ill-treatment	...	...	5
			—
Total	...		70
			—

The above were dealt with as follows :—

Warned by the Officer	...	41
Advised and helped	...	29
		—
Total	...	70
		—

Two offenders were prosecuted. One Juvenile Court case was instituted.

In order to watch the progress and guard against relapse, the Inspector paid 132 visits of supervision and in addition 224 miscellaneous visits were made to officials and others in respect of these cases".

10. NURSERY SCHOOLS.

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

"The Nursery School at Child Haven was attended by an average of 39 children between the ages of 2 and 5. During the year 2 dining rooms came into use, considerably improving the daily meals routine for both staff and children.

Close co-operation between the parents and children is maintained and this, with constant vigilance on the part of the staff, helps to control the spread of infection. There was no outbreak of infectious diseases other than a few cases of whooping cough in the 4-year old group, and there was one case of poliomyelitis in December, 1953".

11. HANDICAPPED PUPILS.

Under Section 34 of the Education Act, 1944, nine children were duly ascertained as Handicapped Pupils, all of them being educationally sub-normal. Two of these children were in attendance at the Seamer Road Special Class prior to ascertainment, and continued to attend the class. Of the remaining 7 children 6 were transferred to the Seamer Road Special Class, and the other child, because of the parents' refusal to allow her to attend the Special Class, remained in attendance at an ordinary school.

During the year handicapped pupils from the Divisional area were maintained by the Local Education Authority at special residential schools as follows :—

Name of School.	Boys	Girls
BLIND AND PARTIALLY SIGHTED		
Royal Normal College for the Blind, Shrewsbury	-	1
St. Vincent's School, West Derby, Liverpool ...	-	1
Sheffield School for the Blind, Sheffield ...	1	-
DEAF AND PARTIALLY DEAF		
Yorkshire School for the Deaf, Doncaster ...	2	1
Lawns House School, Leeds ...	1	-
Liverpool School for Partially Deaf, Southport	1	-
Bridge House School, Harewood ...	1	-
EDUCATIONALLY SUB-NORMAL		
Brompton Hall School ...	9	4
EPILEPTIC		
Home for Epileptics, Maghull ...	-	1
MALADJUSTED		
Oakbank, Ingrow, Keighley ...	1	-
Ledston Hall, Allerton Bywater ...	1	-
DELICATE		
Bradstock Locket Hospital School, Southport	1	-
PHYSICALLY HANDICAPPED		
Welburn Hall School ...	7	3

The Special Class for educationally sub-normal children continued to satisfy a need in the area by providing accommodation for 26 pupils; of these twelve were admitted during 1953. Three pupils were discharged as follows :—

1 to an ordinary school.

2 withdrawn on reaching school-leaving age.

12. SECTION 57, EDUCATION ACT, 1944.

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

13. SPEECH THERAPY.

Miss E. V. Lang resigned her appointment as Speech Therapist on the 10th May, and was replaced by Miss D. Carlisle who took up her appointment on the 3rd September. Apart from one day per week spent visiting Brompton Hall and Welburn Hall Special Schools, and the Adela Shaw Orthopaedic Hospital, the Speech Therapist's time was devoted to the treatment of children from this Division.

Miss Carlisle has kindly supplied the following information in respect of the work carried out during 1953 :—

Total number of children treated throughout the year :—

Carried over from 1952	...	67
New cases in 1953	... ..	39
		—
	Total	106
		—
No. of children discharged	...	45
		—
No. remaining under treatment at the end of the year	...	61

Analysis of Cases

No. of children treated throughout the year :—

		Boys	Girls	Total
Stammer	... ..	24	4	28
Dyslalia	... ..	36	16	52
Sigmatism	... ..	11	6	17
Cleft Palate	... ..	1	3	4
Deafness	... ..	1	1	2
Rhinophonia	... ..	1	2	3
		—	—	—
	Total	74	32	106
		—	—	—

No. of children discharged throughout the year :—

Stammer	... ..	5	1	6
Dyslalia	... ..	21	11	32
Sigmatism	... ..	4	2	6
Cleft Palate	... ..	—	—	—
Deafness	... ..	—	—	—
Rhinophonia	... ..	—	1	1
		—	—	—
	Total	30	15	45
		—	—	—

Summary of Discharges :—

Cured	... ..	25
Temporarily discharged	...	6
Left school or district	...	9
Withdrawn	... ..	5
		—
	Total	45
		—

14. LIP READING.

Mr. R. D. O'Brien continued to hold lip reading classes on Saturday afternoons until his resignation on the 23rd May. The Education Authority were able to engage the services of Mrs. S. B. Staines, who held weekly classes on Tuesdays commencing 15th September.

During the year a total of 28 children attended these classes. Twenty-six cases were brought forward from the previous year; two new children were added to the list during the year, whilst eight were withdrawn, so that the number remaining on the registers of the class on the 31st December was twenty.

15. CHILD GUIDANCE.

Dr. L. P. Star, the Authority's Educational Psychologist, kindly prepared the following report on the work of the Child Guidance Clinic in Scarborough:—

"The work of the Scarborough Child Guidance Clinic continued steadily during 1953, its progress being limited only by the shortage of staff. This is severe, for the psychiatrist, Dr. Gordon, is available for only one session a fortnight, and a certain number of sessions have to be cancelled because of holidays, etc., so that it was possible to hold only 18 sessions during the year. Dr. Gordon now has the help of a psychologist, but is greatly handicapped by the continued lack of a psychiatric social worker. Quite apart from the extra time needed for each case when the psychiatrist has to see both parent and child, it is not a satisfactory arrangement, especially when the child has a feeling of resentment, justified or not, against his parent. A psychiatric social worker is also most necessary to maintain liaison between clinic and home and with various social agencies.

Now that financial provision has been made for it by the North Riding County Council, it is hoped that a psychiatric social worker may soon be appointed, and it is also hoped that the Leeds Regional Hospital Board, who undertake the responsibility of providing the psychiatrist, may be able to increase the number of sessions available. At the time of writing, it is generally about six months before a child who has been referred to the clinic can be seen, though many cases are very urgent.

At the 18 sessions held during 1953, a total of 32 children made 72 attendances. Twenty-nine of these children were from the Scarborough area. The number of appointments not kept, at some Child Guidance Clinics large, at Scarborough is gratifyingly small.

During 1953 twenty-four cases were closed, and at the end of the year eight children were still attending for psychotherapy. Further details of interest are as follows:—

Boys referred 21.

Girls referred 11.

Referred by :

Parents or guardians	...	...	1
Head Teachers	...	...	2
Education Officers	...	...	1
School Medical Officers	...	...	11
Family doctors	...	...	9
Specialist doctors	...	...	2
Children's Officer	...	...	5
Magistrates and Probation Officers	...	...	1
Others	...	...	—

Referred because of :

Excessively aggressive behaviour	...	2
Excessively withdrawn behaviour	...	3
Very difficult behaviour of various kinds	...	5
Neurotic symptoms	...	10
Anti-social behaviour (not amounting to delinquency)	...	3
Delinquency (i.e. court cases)	...	2
Enuresis and encopresis (bedwetting and soiling)	...	4
Truancy (in various forms)	...	1
Miscellaneous (i.e. unclassifiable under any of the above)	...	2

Age when first seen :

Five	1	Eleven	5
Six	2	Twelve	3
Seven	1	Thirteen	3
Eight	5	Fourteen	3
Nine	3	Fifteen	—
Ten	5	Sixteen	1

16. CHILD DELINQUENTS.

Fifty medical reports were submitted to the Magistrates in respect of children who appeared before the Juvenile Court.

17. EMPLOYMENT OF SCHOOL CHILDREN.

Under the Employment of Children Bye-Laws 114 school children proposing to undertake juvenile employment were specially examined by your medical officers.

18. PROTECTIVE INNOCULATION.

Twenty-nine per cent. of the pupils examined at routine medical inspection bore scars of successful vaccination against smallpox.

During the year 83 children in the 5-14 age group received primary courses of immunisation against diphtheria, and 358 received reinforcement doses. It is estimated that between 75% and 80% of the school children in this area have been protected against diphtheria.

MEDICAL INSPECTION RETURNS.

Year ended 31st December, 1953.

TABLE 1.**MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS.**

A. Periodic Medical Inspections.

Number of Inspections in the prescribed groups

Entrants	885
Second Age Group	692
Third Age Group	1042
TOTAL	2619

Number of other Periodic Inspections ... 1450

GRAND TOTAL ... 4069

B. Other Inspections

Number of Special Inspections ... 818

Number of Re-inspections ... 1075

TOTAL ... 1893

C. Pupils found to require treatment

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

GROUP	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
Entrants	6	131	137
Second Age Group	45	41	79
Third Age Group	47	71	116
Total (prescribed groups)	98	243	332
Other Periodic Inspections	56	126	179
GRAND TOTAL	154	369	511

TABLE II.

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

DEFECT OR DISEASE	Periodic Inspections.		Special Inspections.	
	Number of Defects.		Number of Defects.	
	Requiring Treatment	Requiring to be kept under Observation but not requiring Treatment	Requiring Treatment	Requiring to be kept under Observation but not requiring Treatment
SKIN	71	49	78	14
EYES				
(a) Vision	154	134	71	21
(b) Squint	40	28	4	7
(c) Other	16	22	38	6
EARS				
(a) Hearing	6	41	8	23
(b) Otitis Media	8	21	18	5
(c) Other	10	6	22	11
NOSE OR THROAT	72	226	45	65
SPEECH	19	72	6	22
CERVICAL GLANDS	1	55	9	16
HEART AND CIRCULATION	25	75	44	42
LUNGS	8	44	7	7
DEVELOPMENTAL				
(a) Hernia	2	13	-	2
(b) Other	5	39	-	5
ORTHOPAEDIC				
(a) Posture	11	104	5	20
(b) Flat Foot	21	80	10	19
(c) Other	40	180	30	29
NERVOUS SYSTEM				
(a) Epilepsy	2	9	1	-
(b) Other	2	15	2	4
PSYCHOLOGICAL				
(a) Development	4	101	8	23
(b) Stability	3	164	19	21
OTHER	23	23	261	150

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

Age Groups	Number of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	%	No.	%	No.	%
Entrants	885	461	52.09	420	47.46	4	0.45
Second Age Group	692	361	52.17	326	47.11	5	0.72
Third Age Group	1042	775	74.38	267	25.62	-	0.00
Other Periodic Inspections	1450	822	56.69	613	42.28	15	1.03
TOTAL ...	4069	2419	59.45	1626	39.96	24	0.59

TABLE III.

Infestation with Vermin.

(1) Total number of examinations in the schools by the school nurses or other authorised persons ...	26,538
(2) Total number of individual pupils found to be infested	241
(3) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	-
(4) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	-

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	-	-
(ii) Body	1	-
Scabies	9	-
Impetigo	40	-
Other skin diseases	335	-
TOTAL ...	385	-

GROUP 2. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with.	
	By the Authority.	Otherwise
External and other, excluding errors of refraction and squint	66	-
Errors of Refraction (including squint)	-*	430
TOTAL ...	66	430
No. of pupils for whom spectacles were prescribed ...	-*	191

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

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

	Number of cases treated	
	By the Authority.	Otherwise
Received operative treatment :		
(a) for diseases of the ear	-	9
(b) for adenoids and chronic tonsilitis	-	373
(c) for other nose and throat conditions	-	4
Received other forms of treatment	60	126
TOTAL	60	512

GROUP 4. ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals	22
(b) Number treated otherwise, e.g. in clinics or out-patient departments	175

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	-	29

GROUP 6. SPEECH THERAPY.

	Number of cases treated	
	By the Authority.	Otherwise
Number of pupils treated by Speech Therapists	106	-

GROUP 7. OTHER TREATMENT GIVEN.

	Number of cases treated	
	By the Authority.	Otherwise
(a) Miscellaneous minor ailments	676	-
(b) U.V.R. Treatment	134	-
TOTAL	810	-

TABLE V.

**DENTAL INSPECTION AND TREATMENT CARRIED OUT BY
THE AUTHORITY.**

(1) Number of pupils inspected by the Authority's Dental Officers :—			
(a) Periodic age groups	5528
(b) Specials	269
		TOTAL	5797
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(2) Number found to require treatment	3546
(3) Number referred for treatment	3546
(4) Number actually treated	1723
(5) Attendances made by pupils for treatment	6609
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(6) Half days devoted to : Inspection	54
Treatment	1086
		TOTAL	1140
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(7) Fillings : Permanent Teeth	2147
Temporary Teeth	440
		TOTAL	2587
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(8) Number of teeth filled : Permanent Teeth	1906
Temporary Teeth	431
		TOTAL	2337
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(9) Extractions : Permanent Teeth	503
Temporary Teeth	1444
		TOTAL	1947
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(10) Administration of general anaesthetics for extraction	930
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(11) Other Operations : Permanent Teeth	3137
Temporary Teeth	2534
		TOTAL	5671
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(12) Orthodontic and Denture Attendances	1859

AVERAGE HEIGHTS.

BOYS				GIRLS		
AGE GROUPS	No. measured	Inches	Centi- metres	No. measured	Inches	Centi- metres
2-3 years	11	35.55	90.30	14	35.50	90.17
3-4 ..	35	37.34	94.84	36	37.81	96.04
4-5 ..	32	40.41	102.64	37	40.43	102.69
5-6 ..	255	43.84	111.35	217	43.65	110.87
6-7 ..	107	45.34	115.16	92	45.64	115.93
7-8 ..	191	47.94	121.77	208	47.54	120.75
8-9 ..	130	50.29	127.74	119	49.39	125.45
9-10 ..	34	51.65	131.19	43	52.09	132.31
10-11 ..	274	54.44	138.28	230	53.76	136.55
11-12 ..	75	55.49	140.94	67	55.82	141.78
12-13 ..	92	58.15	147.70	95	58.56	148.74
13-14 ..	350	60.39	153.39	146	61.34	155.80
14-15 ..	351	62.27	158.17	136	62.84	159.61
15-16 ..	176	66.04	167.74	134	63.80	162.05
16-17 ..	73	68.31	173.51	45	63.82	162.10
17-18 ..	40	68.57	174.17	37	64.03	162.64
18-19 ..	18	68.67	174.42	16	64.81	164.62

AVERAGE WEIGHTS.

BOYS				GIRLS		
AGE GROUPS	No. weighed	lbs.	Kilograms	No. weighed	lbs.	Kilograms
2-3 years	11	30.91	14.02	14	30.64	13.90
3-4 ..	35	35.02	15.88	36	33.72	15.30
4-5 ..	32	39.22	17.79	37	40.32	18.29
5-6 ..	252	44.65	20.25	218	43.61	19.78
6-7 ..	110	48.35	21.93	91	47.34	21.47
7-8 ..	186	53.20	24.13	204	52.17	23.66
8-9 ..	134	58.92	26.73	121	56.19	25.49
9-10 ..	33	64.45	29.23	42	62.00	28.12
10-11 ..	270	71.57	32.46	236	70.25	31.87
11-12 ..	75	76.52	34.71	66	76.45	34.68
12-13 ..	92	83.53	37.89	95	88.62	40.20
13-14 ..	350	93.97	42.62	146	103.89	47.12
14-15 ..	351	104.95	47.61	136	113.34	51.41
15-16 ..	176	122.51	55.57	134	117.31	53.21
16-17 ..	73	135.79	61.59	45	120.87	54.83
17-18 ..	40	139.72	63.38	37	125.19	56.79
18-19 ..	18	148.00	67.13	16	131.87	59.82