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Contributors

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NORTH RIDING OF YORKSHIRE COUNTY COUNCIL EDUCATION COMMITTEE

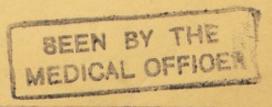
ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR

1954.



MEDICAL CHALTE DEPARTMENT





NORTH RIDING OF YORKSHIRE COUNTY COUNCIL EDUCATION COMMITTEE

ANNUAL REPORT

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INTRODUCTION.

'o 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 ne year 1954. The report of the divisional school medical officer on the ervice in the area of Scarborough Divisional Executive is appended. Except there otherwise stated, the figures given in this report do not relate to schools the Scarborough division.

A year ago I drew attention to the paramount importance, in the interest f the school child, and in fact of the whole community, of the closest coperation between those concerned with the various branches of the national ealth service and with the school health service. In the North Riding uring the year 1954 substantial progress in this sphere over a wide field of ctivity affecting the health of the school child was made.

The medical staff in the Riding during the first three quarters of 1954, part from the area administered by the Scarborough Divisional Executive, omprised nine school medical officers each with additional responsibilities of the local health authority, and as medical health officer to one or more ocal sanitary authorities. During the last quarter both Dr. J. W. A. Rodgers Thornaby and Stokesley) and Dr. W. Sharpe (Wensleydale) resigned to take up other appointments. Both vacancies have now been filled and the nedical officers concerned took up their duties during the current year. Two part-time medical officers resigned in March and Mrs. Jean F. W. Rooney, A.B. commenced full time duties at the beginning of that month, bringing the number of full time school medical officers employed by the Committee luring 1954, to three. In Scarborough Dr. W. G. Evans, the late Dr. Stokoe's uccessor as Divisional School Medical Officer, commenced duty during March.

Several changes in the dental staff occurred so that the position in this espect was not so favourable as had been anticipated. Mrs. E. M. Bielby esigned her full time post at the end of February: from then until the 30th september she was employed on a part time basis. Her husband also esigned from his part-time post in September 1954. At Scarborough Mr. C. Carr, a full time dental officer, left at the end of October to become Principal Dental Officer at Hull; Mr. F. D. Godsmark commenced full time duty in the Richmond area on November 1st.

Consultant advice and treatment is provided to school children by specialists in the employ of the regional hospital boards. The arrangement whereby Dr. F. Fleming, a registrar otologist, sees school children suffering from defects of the ear, nose, and throat, at clinic sessions held each month at Redcar, Guisborough, Thornaby, and South Bank, proved a valuable supplement to the work of the nurse who carries out the audiometric survey in the schools. The consultant ophthalmologists by their continued co-operation have given expert advice to children suffering from eye defects without delay, and psychiatrists both in the north and south of the Riding have been most helpful. Owing to the other demands made on them, however, the help which they were able to give to the work of the child guidance team was strictly limited. Fortunately this question was receiving active consideration at the end of the year under review from both hospital boards concerned. In the area of the Leeds board a psychiatrist was available for one session each week in York and Scarborough alternatively. In the north of the Riding, pending provision being made by the Newcastle board, the Committee employed on a sessional basis, Dr. Hinds, a consulting psychiatrist in private practice, who conducted clinics at Northallerton and Normanby in alternate weeks. Quite apart from psychiatric advice the child guidance team has also been faced with the difficulty of obtaining the services of a suitably qualified person to act as a psychiatric social worker. During the last quarter of the year Miss E. Clayton a qualified psychologist, undertook this social work on behalf of the Committee.

The provision of speech therapy for school children in the Riding received a set back as the result of the resignation of Miss Glover during August: she worked in the southern part of the Riding and was based on York. Unfortunately it has not yet been possible to replace her. Miss A. Shaw had been previously appointed to assist Miss Knight with the large volume of work on Tees-side.

As a result of the deep interest taken in the children by all concerned at Welburn Hall and Brompton Hall, the physically handicapped and educationally sub-normal pupils derived great benefit from their residence at these two special schools. A feature of the work at Welburn Hall has been the application of cardiac surgery to children with congenital lesions of the heart. My thanks are due to Mr. P. R. Allison and his staff at Leeds General Infirmary for the great improvement in the health of the children whom they have treated. It is hoped that this good work will not stop when Mr. Allison commences duty as Nuffield Professor of Surgery at Oxford.

The general health of children attending all North Riding schools was well maintained during 1954, and with minor reservations, the school medical officers were very well pleased with the health of the children inspected. An increased number of children was classified as good as regards general nutrition; consequently a smaller number of children were regarded as "fair."

Although the number of children seen at periodic medical inspections was rather higher than in 1953 the number of children found to require treatment was slightly smaller. A smaller number of children was seen at special inspections and re-inspections.

The widespread outbreak of influenza in the north of England caused a sharp fall in school attendance at the end of the year; many children were able to resume school after 14-16 days but in some cases convalescence was slow and long absences were caused.

Four cases of diphtheria occurred in Thornaby; once again emphasising he importance of maintaining a high percentage of children immunised against this disease.

School nurses continued their efforts during the year with regard to he control of a verminous condition of the hair. Although the general tandard of schools was good, "heavy infestation" was present in a small ninority of children; it is clear that attention to this problem cannot be relaxed.

The Principal School Dental Officer, although disappointed in the number of dental officers available for work in the Riding during 1954 is able to report an increase in conservative work, in the dental care of mothers and young children, and in the number of general anaesthetics administered. The Principal School Dental Officer and his staff are to be congratulated on his achievement. It is clear, however, that the work must eventually suffer unless additional dental officers can be obtained.

In conclusion I should like to report my appreciation of the loyal ssistance given to me by all the members of the staff of the school health ervice. I am particularly grateful to Dr. Cameron who drafted this report; wish also to pay a tribute to the administrative staff of the Education Department and to the head teachers of schools during the year under review or their co-operation and assistance.

J. A. FRASER, Principal School Medical Officer.

County Hall, Northallerton, 31st March, 1955.

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 1954)	 381,500
Children on registers of primary schools, January, 1955	 39,826
Primary schools or departments, January, 1955	 352
Children on registers of secondary schools, January, 1955	 13,940
Secondary schools, January, 1955 (These figures include Scarborough Division).	 45

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 of Health).

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, resigned 31-3-54).

- *Margaret C. Barnet, M.B., Ch.B., (part-time).
- *Jean F. W. Rooney, M.B., B.S., B.A.O., D.C.H., (commenced 1-3-54).

CHOOL MEDICAL OFFICERS (also medical officers of health for one r more sanitary district and executive officer for Part III Services under the lational 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.B., 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. (resigned 3-11-54).

B. SCHROEDER, M.B., Ch.B., D.P.H.

W. Sharpe, M.B., Ch.B., D.P.H., B.SC., (resigned 4-10-54).

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

W. G. Evans, M.A., M.B., B.CHIR., D.P.H. (commenced 10-2-54).

CHOOL MEDICAL OFFICERS (SCARBOROUGH DIVISION).

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.

D. CLOUGH, L.D.S.

F. D. GODSMARK, L.D.S. (commenced 1-11-54).

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., (transferred to Scarborough 1-11-54).

R. B. STEEL, L.D.S.

G. FLEMING, L.D.S, (part-time, nine sessions weekly)

D. S. K. BIELBY, L.D.S., (part-time, resigned 22-8-54).

Mrs. E. M. Bielby, B.Ch.D., L.D.S., (resigned 28-2-54., part-time 1-3-54 to 30-9-54).

MISS E. M. WATSON, Oral Hygienist.

SCARBOROUGH DIVISION.

J. C. CARR, L.D.S., (resigned 31-10-54).

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., D.L.O.
 - *G. L. THOMPSON, M.A., M.B., F.R.C.S.

Orthopaedic Surgeon

. *H. L. CROCKATT, M.B., Ch.B.

Psychiatrists

- .. *M. C. GORDON, M.B., Ch.B., D.P.M.
- . W. HINDS, M.B., B.S., D.P.M.

Anaesthetist

- J. S. RUDDELL, M.A., M.B., D.A., (resigned 8-9-54)
- * 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) PSYCHIATRIC SOCIAL WORKER.

MISS E. CLAYTON, B.A., DIP. PSYCH, (commenced 1-9-54)

(vi) SPEECH THERAPISTS

Miss I. M. S. Knight, f.c.s.t., (Head Speech Therapist).

MISS A. D. GLOVER, L.C.S.T., (resigned 31-8-54).

Miss A. Shaw, L.C.s.T., (commenced 8-9-54).

MISS D. CARLISLE, L.C.S.T. (Scarborough division).

(vii) LIP READING INSTRUCTOR.

Mrs. S. B. Staines (part-time, resigned 30-3-54).

(viii) 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 F. S. Leader.

Deputy Superintendent

School Nurse .. Miss L. Mann.

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.

(ix) ORTHOPAEDIC NURSES

(Whole-time with clinic and C. Chapman, s.r.n. after-care visiting duties) B. D. Rowell, s.r.n., s.c.n. Orthop. Certif.

(x) AUDIOMETRIC NURSE.

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

(xi) PHYSIOTHERAPIST

SCARBOROUGH Mrs. G. M. Green, M.S.C.P., M.E., L.E.T. (part-time, resigned 28-2-54).

(xii) DENTAL TECHNICIANS.

R. G. HANSOM (Technician in charge)

P. A. LAZENBY (Technician in charge)

J. D. WADE (Apprentice)

D. Cotton (Apprentice)

SCARBOROUGH DIVISION.

F. SHAW (part-time, trained technician)

(xiii) DENTAL ATTENDANTS.

Miss B. M. Cherry (commenced 25-1-54).

Mrs. M. M. Hodgson (resigned 30-4-54).

MRS. R. LAWSON.

MISS D. MORTON.

Mrs. O. Nelson.

Miss L. Norris (commenced 1-7-54).

Miss O. Richardson (commenced 4-1-54).

Miss M. Roberts.

Mrs. A. Ratcliffe.

Mrs. H. Tyrrell.

SCARBOROUGH DIVISION.

MISS M. J. DICKENSON (commenced 13-9-54).

Miss N. Mallen (resigned 31-5-54).

Miss B. J. Shaw (resigned 15-5-54,

part-time 17-5-54).

Mrs. N. D. V. Storey (temp. 31-5-54 to

11-9-54).

MRS. M. B. WARNER.

(xiv) 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 the 31st December, 1954, there were 352 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; the teaching there was previously provided by tuberculosis authorities and the governing bodies of certain long-stay hospitals.

The hospital schools in the Riding are as follows :-

	Number of Places	Age Range	Number of pupils (January, 1955)
Adela Shaw Orthopaedic Hospital, Kirbymoorside	125	3-16	85
Northallerton Orthopaedic Hospital	100	2-16	43
Thornton Lodge Sanatorium, Aysgarth	40	3-16	10
Poole Hospital Special School, Nunthorpe	58	3-16	31

ii) School Hygiene.

Four primary schools were erected during the year. In these modern puildings children receive their education under most satisfactory conditions. In addition many sanitary and other improvements were made at older school premises according to the plan set out in my report for 1951. The county health inspectors, when visiting the schools for milk sampling purposes, write comments in the school log books on any sanitary matters relevant to individual schools.

Water Supplies.

The health inspectors submitted 305 samples of school water supplies or bacteriological examination. Of these 176 were found to be satisfactory and 129 unsatisfactory. At some fifty-seven schools drinking water had to be boiled for varying periods during the year.

iii) Medical Inspection.

Medical inspection was in the main directed to the recommended age groups, that is to entrants, leavers primary, and leavers secondary; the 7-8 and 12-13 age groups were inspected as time permitted. The pupils at the Committee's two residential special schools for handicapped pupils, Welburn Hall, and Brompton Hall, were in view of their disabilities inspected each year.

FINDINGS OF MEDICAL INSPECTION.

Diseases and Defects.

Of the 19,156 children seen at periodic medical inspections, 2,284 were found to be suffering from a defect or disease (other than dental diseases and infestation with vermin). This represents 11.92% of all pupils inspected and is lower than the corresponding figure for the previous year—13.05%. The decrease was noted among entrants, and the 10-11 year age group.

The following table shows the number of pupils inspected and the

number found to require treatment.

Lavorenská a a tom a com a com		Number of Pupils			
Group		Inspected	Found to require treatment (excluding dental diseases and infestation with vermin)		
Entrants Second age group Third age group		5,127 5,223 2,601		(12·76%) (10·46%) (12·19%)	
Total (prescribed groups) Other periodic inspections		12,951 6,205	1,517 767		
Grand Total		19,156	2,284	(11.92%)	

General Condition.

Year	Number of Pupils Inspected	A Good %	B Fair %	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
1954	19,156	55.52	43.70	.78

Since 1948, the school medical officers have assessed the general condition of each child examined and have classified them as "good," "fair" or "poor." This classification, involving as it does many different factors, can only be a broad one. Nevertheless the continued improvement in the general condition of the school children in the North Riding is shown by the statistics in the table. A higher percentage of children were placed in group A and fewer in groups B and C than in any previous year since this threefold classification was adopted. A comparison of entrants, primary school leavers, and secondary school leavers shows that the general condition of entrants was less commonly "good" and more frequently "fair." The general condition of a small number of children was considered to be poor: most of these were entrants or primary school leavers. The figures taken as a whole, along with the reports of the school medical officers of the good health of the children throughout the year, can be regarded as satisfactory. Some of the medical officers, however, found the general nutrition at particular schools in their area to be rather lower than average and to be associated with other signs of indifferent parental care. One medical officer considers that the mental well-being of the children has not kept pace with the improvement in their physical condition, owing to lack of sleep and, in certain cases, to a sense of insecurity.

By providing attractive well balanced mid-day meals for school children the staff of the school meals service have undoubtedly contributed a great deal to the improvement which has been observed in the general condition of the scholars. The high standard of their work during the year is reflected in the fact that not one child suffered from food poisoning as a result of eating a school meal.

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 either pasteurised or tuberculin tested supplies. In the case of small rural schools, however, this was sometimes difficult. Dairymen find it uneconomical to pasteurise,

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 fifteen during the year. Fortunately nineteen more schools received supplies of pasteurised milk. In January, 1953 the percentage of schools being supplied with milk other than pasteurised or tuberculin tested was 8·16; by the end of 1954 the figure had fallen to 7·11. The improvement in the position during the last four years is set out in the table.

Eighty-eight per cent of the schools in the Riding received milk in bottles; at ten per cent the milk was delivered in bulk. Two per cent of the schools used full cream dried milk. A high proportion of the bottled milk (at least 81.8 per cent) was delivered at the schools in bottles covered with overlapping metal caps.

	1951	1952	1953	1954
Pasteurised milk	 247	264	292	311
Tuberculin Tested milk	 83	64	57	42
Accredited milk	 1	1	1	-
Non-designated milk	 33	38	25	19
Dried milk	 . 7	8	5	8
No supply	 3	1	-	-

Samples of tuberculin tested supplies were submitted for biological 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.

6 1		: Blue st	Phosphatase test		Tubercle bacilli		Brucella abortus	
Grade	Passed	Failed	Passed	Failed	Neg.	Pos.	Neg.	Pos
Pasteurised	758	17	835	11	11	-	11	-
Tuberculin Tested	3	2			80		64	2
Accredited	-	_	m	bn 11	2	1	3	_
Non-designated		_		_	68	-	56	1

Tubercle bacilli were found to be present in one sample of "accredited" milk. The milk was thereafter boiled before use and subsequently it was possible to arrange a supply of pasteurised milk for the school in question. Two samples of tuberculin tested milk and one sample of non-designated milk was found to contain brucella abortus. In the former instance pasteurised milk replaced the tuberculin tested sample at the six schools concerned.

The infected non-designated milk was boiled at the school prior to consumption. The two samples of tuberculin tested milk which failed to pass the methylene blue test were discoloured owing to the presence of blood. On veterinary advice the producer removed an infected animal from his herd.

On a day in October, 1954, 27,882 pupils were taking school meals compared with a corresponding figure of 25,910 in 1953 and 28,817 in 1952. The extent of the Committee's catering activities in 1954 can be seen from the following table.

No. of children taking meals and milk at school in October, 1954.

	Meals		Milk
	Free For payment		
SECONDARY			
Scarborough division	 298	1,307	1,585
Remainder of Riding	 855	6,568	7,550
PRIMARY			
Scarborough division	 446	1,717	4,122
Remainder of Riding	 1,616	15,075	27,602
Total	 3,215	24,667	40,859

Cleanliness.

The school nurses paid a total of 2,100 visits to schools in the Riding for the purpose of carrying out cleanliness inspections. They made 156,321 examinations; most school children were examined three times during the year. Whereas the great majority of the children were found to be completely free from infestation, some were repeatedly found to be infested. The number of children whose hair was heavily infested was similar to last year. They represent the hard core of the problem and constitute a constant reservoir from which other children may become infested. That special care is necessary at the beginning of each term indicates that this is not a problem of the school alone; attention must also be directed to those members of the family from whom the child is reinfested at home.

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

Scabies and impetigo are much less common than they were, though children still require prompt treatment for them from time to time.

The incidence of ringworm, particularly of the scalp was greatly reduced during the year. Full use was made of Wood's light in the diagnosis and follow-up of those children who suffered from the condition, and in the surveillance of the contacts. The school medical officers received the full co-operation of consultant dermatologists in the treatment of the more severely affected children and in the diagnosis of doubtful cases.

Clothing and Footwear.

My comments about cleanliness apply to a large extent also to clothing and footwear. Most of the children are well clad and well shod. There are still a few who are ragged and unkempt; one medical officer however reports his impression that this evidence of lack of parental care was seen more frequently in his district. Advice was given from time to time about unsuitable footwear, particularly as to shoes and socks being large enough for rapidly developing feet.

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 where necessary to assist parents to obtain proper attention for their children. In this connection 5,689 domiciliary visits were made and the details are given below.

Number of Nurses' Home Visits arising from School Medica! Inspections.

-			WALLSON, TAKEN AND SOME
Condi	tion	No. of defects found for which treatment was considered necessary	No. of visits by School Nurses
Cleanliness of head		 3	5
Cleanliness of Body		 1	1
		 19	21
		 654	712
External Eye Disease		 19	21
		 100	150
Oral conditions .		 4	6
Heart and Circulation		 58	60
		 92	111
Nervous System .		 25	26
Skin .		 24	29
		 9	11
Flat Feet .		 78	81
		 2	2
		 168	219
Tuberculosis .		 58	66
		 96	135
Vision and Squint .		 2,378	3,877
		 61	63
		 2	2
Miscellaneous .		 88	91
601,2	Total	3,939	5,689

Note—Some of these cases are carried over from 1953 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 1954.

TREATMENT OF DEFECTS.

Minor Ailments.

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

Attendances at Minor Ailment Clinics.

Condition for which children attended the School Clinic				Number of first visits	Number of re-visits
Scabies				13	11
Impetigo				178	401
Ringworm—Head				146	434
" —Body				29	53
Verminous conditions				365	532
Heart and Circulation				2	_
Minor Injuries				1,915	1,088
External Eye Disease				183	207
Ear Discharge and Deafr	ness			219	616
Nose and Throat				181	143
Vision				531	214
Lungs				8	2
Nervous System				7	poli in attento
Tuberculosis				11	13
Skin (Non-Contagious)				721	1,352
Sores				937	972
Other conditions				1,067	404
Chilblains				46	27
Speech				17	4
Diphtheria Immunisation	1			161	45
		Total		6,737	6,518

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
1954	6,737	6,518	13,255

There was a slight increase during the year in the number of first visits paid by school children to minor ailment clinics in the Riding as well as in the total number of attendances made. In certain parts of the Riding the clinics were particularly busy. Some of these clinics are conducted on school premises; this practice, which depends for its success so much on the complete co-operation of the teaching staff, is regarded by Dr. Gray, one of the school medical officers, as providing a valuable link with the the school and its activities. He also carries out routine medical inspections when he attends sessions of clinics held in school.

Diphtheria immunisation was an important feature of the school clinic work in the Eston Urban District. Ultra violet light therapy was available at Guisborough, Richmond, Scarborough, Thornaby and Whitby. Special examinations and consultations with parents continued to occupy a great deal of the time spent by the school medical officers at the minor ailment sessions.

Consultant sessions were again held in the Authority's clinics throughout the year, the specialists being paid for the most part by the regional hospital boards. Although the pressure on the services of the consultant ophthal-mologists 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 any defect of vision fully investigated by a medically qualified ophthalmic expert. The prompt supply of spectacles (when ordered) has continued to improve and little delay was experienced.

A reluctance to wear glasses on the part of older pupils, particularly senior girls, at co-educational schools was noted by one of the school medical officers. When the parents are willing to purchase more attractive frames this difficulty disappears! The orthopaedic specialists working in the Authority's clinics also have 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 in 1948. All the otological consultants were most co-operative; operative treatment for tonsils and adenoids was quickly arranged for those children who after a careful assessment, were considered to require it. During the year the arrangements continued whereby Dr. F. Fleming held 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, were useful in reducing the 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 is 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 majority of the children systematically tested by Miss Pressick were 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 misunderstanding instructions, excitement or difficulty in writing down the numbers. The numbers of tests carried out during the year were as follows:—

Number of children tested once	 5,857
Number of children given second test	 529
Total number of tests	 6,386
Number of children who failed both tests	 371 (6.33%)

The percentage of children failing both tests varied widely in different parts of the Riding, being as low as 2.85% in one area, and as high as 10.4% in another. In a substantial proportion of the 371 children who failed the second test, the hearing loss was found on investigation, to be of a temporary nature, for example, wax in the ears. Such children were given prompt treatment and retested by Miss Pressick when next she visited the school, in order to confirm that their hearing continued to be satisfactory. The remainder of the children were referred, in collaboration with the family doctor, for specialist advice. In the Tees-side area the children were seen by Dr. Fleming at one of the clinics already mentioned: those requiring admission to hospital or more detailed examination as out-patients were referred by him to the Ear, Nose and Throat Unit at the North Riding Infirmary.

Dr. Fleming started these special clinics during May and from then until the end of the year 257 children were seen as follows:—

Recommended for hearing aids		6
Recommended School for the Deaf		1
Referred for treatment at minor ailment clinic	s	55
Referred to hospital for further investigation		116
Not requiring any treatment		70
Referred to family doctors		8
Recommended for transfer from school for the deaf to ordinary school	,	1

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 children 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 pure tone audiometer which was purchased during the year has been most valuable in the special investigation of selected children.

Enlarged Tonsils and Adenoids.

During the year under review, 119 pupils received operative treatment for adenoids and chronic tonsilitis, while 215 pupils received other forms of hospital treatment for nose and throat conditions.

Ear Diseases.

Many cases of ear disease or defect were treated at the school clinics; 219 first attendances and 616 re-visits for such treatment were made in 1954.

Visual Defects and External Diseases of the Eye.

The incidence of squint in North Riding school children during recent years is shown below.

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
1954	101	116	217

The gradual decline in the number of children with this disability since 1950 was arrested during 1954. 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.

Many crippling defects were treated at various hospitals during the year under review. Little information is sent to school medical officers about these children except in the case of the Adela Shaw Orthopaedic Hospital, Kirbymoorside. The following table shows the conditions and numbers of children treated as in-patients during the year at this specialist hospital.

Condition	n		No. of Children treated
Deformity of feet			51
Deformity of leg			10
Deformity of spine			2
Dislocation of hip			3
Hemiplegia			6
Infantile paralysis			14
Kohlers disease			1
Old fractures and injur	ries		1
Torticollis			4
Spastic paraplegia			9
Scoliosis			3
Perthe's disease			3
Arthritis			1
Swelling of forearm			1
Deformity of chest			1
Haemophilia			1
Webbing of neck			1
Congenital abscess pec	toral mu	scle	1
Coxa vara			1
Spina Bifida			1
Tuberculosis of ankle			1

At the following orthopaedic clinics 478 sessions were held as compared with 451 in 1953, 752 children made 2,566 attendances as compared with 711 children and 2,411 attendances in the previous year. An orthopaedic surgeon attended at 146 out of the 478 sessions mentioned.

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

Medical Examination 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 have to work.

The new procedure was brought into operation as from the 1st April, 1952. Although an x-ray examination of the chest is not obligatory in the cases of all entrants to courses of training, such an examination was arranged in many instances. The other entrants were able to provide proof of recent satisfactory examination by mass miniature radiography. During 1954 54 male and 149 female candidates were examined by the school medical officers.

THE SCHOOL DENTAL SERVICE.

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

Last year I was able to report an increase in dental staff. Unfortunately the position was not maintained during 1954, only one full-time appointment being made to offset the loss of the services of three dental officers. One dental officer, Miss Thomas, was transferred from Richmond to work in the area administered by the Scarborough Divisional Executive. Despite these staff changes there was an encouraging increase in the volume of work undertaken; the full effect of the smaller number of dental officers will not be apparent until 1955.

The amount of conservative treatment is dependent on adequate staffing so that I am particularly pleased that the number of fillings is 2,000 higher than in the previous year. The resignation of Dr. Ruddell as part-time anaesthetist entailed reorganisation of this aspect of the work. As a result of the co-operation of the other officers the number of administrations of general anaesthetics was not only maintained but increased from 9,500 to 10,777.

The dental laboratories at Northallerton, South Bank, and Scarborough once more undertook a satisfactory volume of mechanical work in the form of dentures and orthodontic appliances for school children and welfare cases. All three worked to full capacity and it may be that any slight increase in dental staff, will involve consideration being given to the appointment of a whole-time dental technician for the Scarborough division. The development of these key centres along similar lines makes it possible for individual dental surgeons to keep in close touch with the construction of appliances in their own group. The volume of orthodontic work undertaken in the North Riding compares favourably with most counties in the country and some very creditable results have been obtained. The publicity given by the nursing staff increased the demand for dental treatment for welfare cases.

Mothers are becoming more tooth conscious, and are much more prone to seek advice both with regard to themselves and their younger children. Should this demand continue to increase it will be very difficult to maintain a correct balance between the provision of treatment for school children and for welfare cases.

The completion of the new clinics at Lingdale and Easingwold has considerably improved working conditions in these areas and reduced the calls on the two mobile dental clinics. The completion of the other clinics at Ryedale, Pickering, Guisborough, and Richmond will further improve the service, but the two mobile clinics will still be required for the more isolated parts of the Riding. Although not ideal, the mobile clinics serve a very useful purpose in those areas where a lack of suitable accommodation makes working conditions difficult, and make the services of the dental surgeon available to mothers and children who otherwise would have difficulty in consulting him.

Miss Watson, oral hygienist, worked mainly in the Scarborough area. It has not as yet been possible to appoint a second hygienist. The homes of many of the candidates selected for training are in the south and they tend to seek employment there after qualification.

INFECTIOUS DISEASE.

Four children in Thornaby developed diphtheria during the year. The organism responsible was of a type usually associated with a severe form of the disease. One school child who clinically was not suffering from diphtheria was found to be harbouring the same type of the organism in her nose and throat and she was the possible source of the other cases. Two of the children had not been immunised. There were no deaths. The fact that these cases occurred and the the infecting organism was of this dangerous type once more underlines the importance of immunisation against this disease.

Eight North Riding school children were reported as having contracted poliomyelitis during 1954. Three cases were non-paralytic and five paralytic There was one death. The development of a safe and effective vaccine against this condition is eagerly awaited.

Notifications were received of the occurrence of scarlet fever affecting 187 children, measles affecting 468 children, and whooping cough 227 children. Influenza was widespread at the end of the year. In one part of the Riding an epidemic of chicken pox occurred and the school medical officer responsible for the schools in question herself developed herpes zoster, a condition which is considered to be due to an allied if not identical virus.

TUBERCULOSIS.

During the last quarter of the year a notification was received with respect to a fifteen year old school girl who had been found to be suffering from pulmonary tuberculosis. On the advice of Dr. G. Walker, Consultant Chest Physician, and with the co-operation of the Headmaster concerned, all of the children (approximately 530) attending the same school were offered a tuberculin test and if necessary a radiological examination of the chest. The results of the tuberculin survey of the 477 children who were examined are set out in the table. All of the positive reactors as well as a number of school staff attended a mass radiography unit with negative results. Of eight children who travelled on the same school bus as the notified case but attended another school, three were tuberculin positive and four negative, and radiological examination was satisfactory. The technique employed in testing the children was the multiple puncture method using pure old tuberculin. The results were interpreted one week after testing.

I am indebted to Dr. Walker, not only for his advice but also for his active participation in the work entailed in the survey. I am also grateful to the headmasters of the two schools concerned for their help.

	Number tested			Re-actors			Non re-actors			Percentage positive		
Age Group	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Both
11-12	66	52	118	28	15	43	38	37	75	42.4	28.8	36.4
12-13	71	63	134	26	28	54	45	35	80	36.6	44.4	40.3
13-14	64	69	133	26	31	57	38	38	76	40.9	44.9	42.9
14-15	48	46	94	28	26	54	20	20	40	58.3	56.4	57.4
Total	249	230	479	108	100	208	141	130	271	43.4	40.9	43.4

PHYSICAL EDUCATION.

The syllabus of physical education as set out in the Ministry of Education pamphlets on Physical Education in the Primary School was introduced to an additional 250 teachers at courses held for this purpose in Eston and Scarborough. These courses were commenced in 1953 and over 800 teachers have now attended them, and the work in primary schools has been correspondingly improved. The new syllabus, however, can only be fully implemented in the new primary schools which have excellent floors and in which suitable apparatus is available. Apart from this programme, courses at Wrea Head College at which the subjects considered by teachers and leaders included Tennis, Hockey, Folk Dancing, Movement, and Cricket, were well supported.

The Football Association again provided free coaching for those secondary and all-age schools which wished to participate in the scheme. The grammar schools' peripatetic, cricket coach was Mr. Harry Halliday of Yorkshire and the M.C.C. His work was most successful and very much appreciated. A selected grammar school eleven met a similar team from Hull and the East Riding at Hull. One boy was selected to play for the Yorkshire "under 18" side which toured the southern counties.

Individual successes during the year included winning the Yorkshire Schoolboy Badminton Championship and the Yorkshire Junior Boy's Doubles Tennis Championship. The North Riding also provided a member of the Northern Schools Rugby "under 15" side, as well as a reserve for the Yorkshire Grammar School fifteen. Eleven boys and girls were members of the Yorkshire team in the All-England Athletics meeting at Ashington. The year's record of success in athletics owes much to the Schools' Athletic Union, who also organised County Rallies in tennis, hockey, swimming, and athletics. In addition to the normal programme of inter-school matches, athletic and football teams had representative fixtures. Swimming instruction was continued along the lines of previous years.

During the worst summer for fifty years some schools experienced a week of almost continuous rain at their annual camp. In spite of bad conditions, however, only one school found it necessary to break camp before the intended date. Children from seven schools made use of the Committee's camping sites. The facilities at Bainbridge were also made available for a week to children from Throxenby Hall.

WELBURN HALL RESIDENTIAL SPECIAL SCHOOL FOR PHYSICALLY HANDICAPPED CHILDREN.

In previous reports I have drawn attention to the facilities which have been available at Welburn Hall Special School, 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 1954, 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, makes it essential that physiotherapy is available. Unfortunately it is difficult to obtain the services of qualified staff.

There are 80 places at Welburn Hall. On the 31st December, 1954, there were 76 children on the roll. Of these 42 were drawn from the North Riding the remainder being sent by other local health authorities.

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

		Or	thopa	edic	Cond	itions	3			Med	lical (Cond	itions	
Age Range		io- litis lytic	b	re- ral lsy		scu- ir eases	Co	ther on- ons	He	art	Ch	est	Co	her on- ons
pogg s	В	G	В	G	В	G	В	G	В	G	В	G	В	G
2-5	-	_	-	-	-	-	-	-	-	-	-	-		-
5-10	8	3	5	8	1	-	4	1	4	2	-	1	-	-
10-16	5	6	9	3	3	4	7	2	7	2	2	1	-	-
Total	13	9	14	11	4	4	11	3	11	4	2	2	-	-

During the term prior to children leaving Welburn Hall careful consideration is given to their future welfare by the Headmaster, Medical Officer, County Youth Employment Officer, and by an Educational Psychologist who has been good enough to co-operate in this matter. A decision as to the most suitable form of further training or employment for any particular child is taken by the team in the light of the child's wishes, physical capabilities and the result of interview and suitable vocational and attainment tests. With one exception the 15 children who since 1951 have left Welburn Hall on attaining 16 years of age have been placed either in full employment or have proceeded to a training course to fit them for appropriate employment.

The Committee will be pleased to learn of the active measures which are being taken by the visiting medical officer to treat those children admitted to Welburn Hall because of congenital heart disease. Since 1953 Dr. Cooke has referred six children to Mr. P. R. Allison, F.R.C.S., of the Thoracic Department at Leeds General Infirmary for cardiac surgery. All the children who have undergone operation have experienced a great improvement in their physical condition. The Headmaster also reports a marked change in the mental outlook of these children and their approach to normal school activities and work. The parent of one of the children wrote to the Headmaster "the difference in her, on her last leave, was unbelievable. For the first time in her life, we were able to take her for long walks, and take her further afield by bus." Dr. Cooke is to be congratulated on referring suitable cases for this treatment. One cannot speak too highly of the valuable work done by the surgeons who undertake this very specialised form of surgery.

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

The pupils selected for admission to Brompton Hall, the Committee's residential special school for educationally sub-normal pupils, were broadly those aged ten to fourteen years whose intelligence quotients were in the range 60 to 75. The school can take ninety-four children of both sexes and every place was occupied throughout the year, by fifty-eight boys and thirty-six girls. 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. Fourteen children were admitted to Brompton Hall during the year to replace the fourteen leavers. Ten of the latter had attained the age of sixteen years and of these eight have since taken up employment. Two children had to be reported to the local health authority under section 57 (4) of the Education Act, 1944.

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. 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.

The work of the Child Guidance Service during 1954 was again seriously restricted by lack of staff. For the first eight months of the year, with the exception of one half-day each week from Dr. Gordon, I was working entirely single-handed, as the clerk was on prolonged sick-leave, further psychiatric sessions had not been provided by the regional hospital boards, and it had been found impossible to obtain a psychiatric social worker. The position during the last four months of the year had greatly improved, for it became possible to obtain the services of another psychiatrist, Dr. Hinds, for one session a week; Miss E. Clayton joined the staff temporarily as a psychiatric social worker, and there was once again a full time clerk to attend to the clerical side of the work. Dr. Hinds has held fortnightly clinics at Northallerton and at Normanby (Eston U.D.).

The small number of psychiatric sessions available has been quite insufficient for the ever growing number of cases referred, but as many children as possible have been seen. I have kept up my work in the schools, and during the year completed visiting every school in the county, thus ensuring that every head teacher throughout the North Riding is aware of the services provided by the child guidance clinics and has had personal contact with a member of the staff. Great interest is nearly always shown in child guidance activities, and I hope that the present very close co-oporation and good will between schools and clinics will always be a feature of the work of child guidance in this Riding. It has certainly been one of my main objects to make it so.

Analysis of cases dealt with individually during calendar year, 1954.

Total number of all cases of	dealt with	1			
			(210 bo	ys and I	109 girls)
Total number of new case	s referred	during	the year		233
Total namber of new case	o reterre	a daring			82 girls)
			(101 b	oys and	02 giris)
Total number of all cases	open on	31st Dec	ember, 1	954	141
			(99 b	oys and	42 girls)
			,		,
Cases referred because of backw	ardness a	and educ	ational		
difficulties. (Seen by psychological					
					196
Total number of cases dea	iit Witii				46 girls)
			(00 b	oys and	10 51113)
District from which these cases					
Thornaby and Stokesley					5
Eston					8
Redcar and Saltburn					7 4
Guisborough, Loftus, Ske					
Whitby and Eskdale					3
Ryedale, Pickering and M					16
Flaxton, Easingwold and					18
Wensleydale, Bedale and I					23
Richmondshire, Swaledale	The second secon		dale		20
Scarborough Division					22
Cases referred by					
Parents and guardians					4
Head teachers					48
Education officers					4
School medical officers					43
Family doctors	•				5
Specialist doctors					12
Children's Officer					5
Magistrates and probation	officers				1
Others					4

Actio	n taken				
	No action (e.g. removed, refused to	attend)		7
	Advice given by psychologist, and			(4)	58
	Ascertainment as educationally sub				0.0
	ineducable recommended				26
	Under observation or treatment by				22
	Awaiting examination				13
Cases	referred because of behaviour diffic	ulties.	(Full team)		
	Total number of cases dealt with				193
			(130 bo	ys and	d 63 girl
					0
Distri	cts from which these cases were dra	wn.			
	Thornaby and Stokesley				13
	Eston				8
	Redcar and Saltburn				9
	Guisborough, Loftus, Skelton and				17
	Whitby and Eskdale				. 8
	Ryedale, Pickering and Malton				21
	Flaxton, Easingwold and Thirsk				26
	Wensleydale, Bedale and Northalle		1.1.		11
	Richmondshire, Swaledale and Upp	per 1 ee			31
	Scarborough Division				49
Cases	referred by				
	Parents and guardians				8
	Head teachers				55
	Education officers				
	School medical officers				
	Family doctors				
	Specialist doctors				
	Children's Officer				
	Magistrates and probation officers				11
	Others				3
Cases	referred because of				
	Excessively aggressive behaviour				24
	Excessively withdrawn behaviour				27
	Very difficult behaviour of various				41
	NT .:				51
	Anti-social behaviour (not amounting				9
	Delinquency (i.e. court cases)	100	A 4 1		9
	Bedwetting and soiling				29
	Truancy (in various forms)				3
	Miscellaneous (unclassifiable under	any of	the above)		4

ction	taken	
	No action (e.g. family removed, refused to attend, etc.)	17
	Advice or treatment given by psychologist	13
	Advice given by psychiatrist at the Scarborough Child	
	Guidance clinic	4
	Treatment given by psychiatrist at the Scarborough Child	
	Guidance Clinic	31
	Advice given by psychiatrist at the Clifton (York) Child	
	Guidance Clinic	15
	Treatment given by psychiatrist at the Clifton (York)	
	Child Guidance Clinic	12
	Advice given by psychiatrist at the Normanby (Eston)	
	Child Guidance Clinic	1
	Treatment given by psychiatrist at the Normanby (Eston)	
	Child Guidance Clinic	6
	Advice given by psychiatrist at the Northallerton Child	
	Guidance Clinic	2
	Treatment given by psychiatrist at the Northallerton	
	Child Guidance Clinic	6
	Treatment given at the St. Luke's Hospital, Middlesbrough	
	"Under 20" Clinic	13
	Treatment given at the Darlington Child Guidance Clinic	24
	Treatment given at the York City Child Guidance Clinic	1
	In or awaiting placement in schools or hostels for	
	maladjusted children	12
	Awaiting examination on 31-12-54	36

SECTION 57, EDUCATION ACT, 1944.

This section requires every 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 benefitting 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 disability of mind, will require supervision after leaving school.

During 1954, a total of 42 children were reported under this Section—27 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 1953 were 39 under sub-section 3, 1 under sub-section 4, and 14 under sub-section 5—a total of 54.

SPEECH THERAPY.

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 Carlisle 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. Miss A. D. Glover worked in the York-Northallerton area, conducting sessions in Clifton, New Earswick, Thirsk, Northallerton, Malton and Pickering, until her resignation at the end of August. During the last quarter of the year Miss Knight was assisted by Miss A. Shaw.

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 until Miss Shaw took up duty. There is still a waiting list of children who require speech therapy. The number of children treated, during the year classified according to their particular speech defect along with the results obtained, can be seen from the table.

					Boys	Girls	Total
Stammer					92	27	119
Dyslalia					94	31	125
Sigmatism					13	5	18
Cleft Palate					5	7	12
Cerebral Palsy					3	4	7
Alalia					8	5	13
Rhinophonia					4	1	5
Hearing Loss (slight)				2	1	3
Mongolism and		ion			9	1	10
Psychogenic					4	-	4
Ankylosis					-	1	1
					234	83	317
Discharged—a	djustmen	t reached			35	18	53
Withdrawn—le unsatisfactor	ft distric	t—left so	:hool—	}	55	20	75
Remaining und					144	45	189
						83	317

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 636 children were medically examined under the provisions of the bye-laws relating to the employment of children over 13 years of age. All except two 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 sul	bnormal			 22	11	33
Educationally su	bnormal a	and epile	eptic	 1	1	2
Blind				 1	2	3
Partially sighted				 -	1	. 1
Partially sighted	and parti	ally deat	f	 -	1	1
Deaf				 	1	1
Partially deaf				 2	3	5
Epileptic				 -	2	2
Maladjusted				 2	2	4
Delicate	"			 4	8	12
Physically handid	capped			 11	2	13
			Total	 43	34	77

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 with 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, these tabular statements summarise the position in the whole Administrative County.

Blind.

		1	954	19	53
Name of School		Boys	Girls	Boys	Girls
Yorkshire School for the Blind, York		 3	1	3	1
Royal Victoria Blind School, Newcastle-on-	Tyne	 -	-	1	-
St. Vincent's School, West Derby		 -	1	015	1
Blind Sunshine Home, Birkdale		 -	1	-	1
Worcester College for the Blind		 1	-	1	-
Royal Normal College, Shrewsbury		 1	1		1
Т	'otal	 5	4	5	4

Partially Sighted.

		19	54	1953	
Name of School]	Boys	Girls	Boys	Girls
Yorkshire School for the Blind, York		1	Tip de	1	-
Barclay School for Partially Sighted Girls, Sunninghill	1	-	1	-	2
m 11 G 1 1 C 1 DI'- 1		_		1	-
		1	-	1	-
Royal Normal College for the Blind, Rowton Castle		-	-	-	1
0 1101 10		6	3	5	3
Total		8	4	8	6

Deaf.

		1954		1953		
Name of School			Boys	Girls	Boys	Girls
Northern Counties School, Newcastle			_	2	-	2
Yorkshire School for the Deaf, Doncaster			3	10	4	9
St. John's Institution, Boston Spa			-	1	-	1
Middlesbrough Day School for the Deaf			10	10	11	9
Lawns House School, Leeds			-	1	2	1
Mary Hare Grammar School, Newbury			2	-	2	-
	Total		15	24	19	22

Deaf and Educationally Subnormal.

		1954		1953		
Name of School			Boys	Girls	Boys	Girls
Bridge House School, Harewood, Leeds			2	-	2	-
	Total		2	-	2	_

33

Partially Deaf.

		1954		1953	
Name of School		Boys	Girls	Boys	Girls
Yorkshire School for the Deaf, Doncaster		4	-	3	_
St. John's Institution, Boston Spa		1	-	1	-
Middlesbrough Day School for the Deaf		2	3	2	3
Royal Residential School for the Deaf, Manchester		-	2	-	2
Liverpool School for the Partially Deaf, Southport		1	-	1	_
Lawns House School, Leeds		1	-	-	-
Total		9	5	7	5

Delicate.

Name of School		1954		1953		
		Boys	Girls	Boys	Girls	
Warnham Court, Horsham			1	-	1	_
Hawkenbury School, Tunbridge Wells			-	-	1	-
Fulford Road Day School, York			3	3	1	3
The Children's Convalescent Home, Wes	t Kirby		7	7	3	3
Salters Lane Open Air School, Darlington	n		-	3	-	1
Hamilton House School, Seaford			1	-	1	-
Hutton Diabetic Unit			-	1	-	-
Bradstock Lockett Hospital, Southport			-	-	2	-
Ragworth Open Air School, Stockton			1		1	-
Welburn Hall				-	2	-
	Total		13	14	12	7

Educationally Sub-normal.

Name of School		19	54	1953	
		Boys	Girls	Boys	Girls
Brompton Hall		63	38	58	37
Baliol School, Sedbergh		1	-	-	-
Dovecot School, Knotty Ash, Liverpool		-	1	-	1
Beacon Residential School, Lichfield		1	-	1	-
Besford Court, Worcester		-	-	2	-
Fulford Road Special Day School, York		7	7	5	10
St. Francis School, Birmingham		-	1	-	2
Allerton Priory R.C. School, Woolton		-	1	-	2
Acklam Road Special Day School, Middlesbrough		1	-	-	-
The Vineyard, Warwick		-	-	1	-
Garvald, West Linton, Peeblesshire		1	-	1	-
High Close School, Wokingham		-	2	-	-
Etton Pasture School		2	-	-	-
Total		76	50	68	52

Epileptic.

		1954		1953	
Name of School		Boys	Girls	Boys	Girls
Home for Epileptics, Maghull		 1	3	1	3
Lingfield Epileptic Colony		 4	1	1	-
St. Elizabeth's Home, Much Hadhan	n	 -	-	1	-
	Total	 5	4	3	3

Maladjusted.

	1954			54	1953	
Name of School			Boys	Girls	Boys	Girls
Chaigley School, Thelwall			1	-	1	-
St. Peter's Boarding School, Horbury			-	-	-	1
Shenstone Lodge, Birmingham			1	-	-	-
Oakbank, Ingrow, Keighley			1	-	1	-
Ledston Hall, Allerton Bywater			1	-	1	
Aymestry Court, Woolton, Liverpool			1	-	1	-
Bodenham Manor, Hereford			1	-	-	-
	Total		6	-	4	1

Physically Handicapped.

				1954		1953	
Na	me of So	chool		Boys	Girls	Boys	Girls
Welburn Hall				 27	19	27	22
Moor House, Oxted				 -	1	-	1
			Total	 27	20	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 :-5,127 Entrants 5,223 10-11 year Age Group 2,601 Leavers . . 12,951 Total 6,205 Additional Periodic Inspections 19,156 Grand Total B-Other Inspections 1,661 Number of Special Inspections 4,584 Number of Re-inspections ... Total .. 6,245

C-Pupils found to require treatment

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

(EXCLUDING DENTAL DISEASE AND INFESTATION WITH VERMIN)

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
Entrants	57	602	654
10-11 year Age Group	290	277	546
Leavers	174	151	317
Total (prescribed groups)	521	1,030	1,517
Additional periodic inspections	351	442	767
Grand Total	872	1,472	2,284

TABLE II.

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

	Periodic I	NSPECTIONS	SPECIAL I	INSPECTIONS		
	No. of	defects	No. of	defects		
Defect or Disease	Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment		
Skin Eyes—	 129	78	24	12		
(a) Vision	872	668	312	658		
(b) Squint	90	90	11	26		
(c) Other	61	18	8	2		
Ears—				and a supplier		
(a) Hearing	 55	59	32	94		
(b) Otitis Media	 19	14	3	4		
(c) Other	 41	19	9	23		
Nose or Throat	 499	566	143	256		
Speech	 90	76	36	63		
Cervical Glands	 9	54	8	28		
Heart and Circulation	 15	84	1	59		
Lungs	 67	224	11	33		
Developmental—						
(a) Hernia	 7	6	3	7		
(b) Other	 11	12	4	5		
Orthopaedic—						
(a) Posture	 31	41	3	4		
(b) Flat Foot	 85	37	3	19		
(c) Other	 155	179	31	80		
Nervous System—						
(a) Epilepsy	 6	13	1	8		
(b) Other	 9	37	5	21		
Psychological—						
(a) Development	 4	66	7	74		
(b) Stability	 	4	_	5		
Other	 148	105	36	153		

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

And Commen	D	A (Good)		B (Fair)		(Poor)	
Age Groups	Pupils Inspected	No.	%	No.	%	No.	%
Entrants	5,127	2,646	51.61	2,437	47.53	44	-86
10-11 year Age Group	5,223	3,033	58.07	2,150	41.16	40	.77
Leavers	2,601	1,525	58.63	1,063	40.87	13	.50
Additional Periodic Inspec-							
tions	6,205	3,432	55.31	2,721	43.85	52	.84
Total	19,156	10,636	55.52	8,371	43.70	149	.78

TABLE III.

INFESTATION WITH VERMIN

(i) Total number of examinations in the schools	by the scho	ool nurses	
or other authorised persons			156,321
(ii) \(\int \text{Heavily infested} \\ \\			341
(ii) {Heavily infested	be infested.		2,753
(iii) Number of individual pupils in respect of w		ng notices	
were issued (Section 54 (2), Education Act,	1944) .		156
(iv) Number of individual pupils in respect of w		ing orders	
were issued (Section 54 (3), Education Act,	1944) .		6

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 under treatment year	
				by the Authority	otherwise
Ringworm— (i) Scal				146	3
(ii) Bod				29	_
Scabies	 			13	-
Impetigo	 			178	1
Other skin diseases	 			721	8
	Т	otal		1,087	12

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	183	2290		
squint Errors of refraction (including squint)	- *	1,821		
Total	183	1,821		
Number of pupils for whom spectacles were (a) Prescribed (b) Obtained	- *	1,237		

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

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

AND STREET, STATE OF A SECOND MICH.	Number of case	s treated
	by the Authority	otherwise
Received operative treatment	The state of	
(a) for diseases of the ear	-	32
(b) for adenoids and chronic tonsilitis	and the -	119
(c) for other nose and throat conditions	_	_
Received other forms of treatment	928	34
Total	928	185
GROUP 4. ORTHOPAEDIC AND POS	TURAL DEFECT	S.
	Number of case	s treated
(a) Number treated as in-patients in hospitals	116	
	by the Authority	otherwise
(b) Number treated otherwise e.g. in clinics or outpatient departments		752
GROUP 5. CHILD GUIDANCE 7	TREATMENT.	
	Number of case	s treated
	In the Authority's Child Guidance Clinics	elsewhere
Number of pupils treated at Child Guidance Clinics	42	38
GROUP 6. SPEECH THE	RAPY.	
	Number of case	s treated
	by the Authority	otherwise
Number of pupils treated by Speech Therapists	400	
GROUP 7. OTHER TREATME	NT GIVEN.	9
	Number of case	es treated
	by the Authority	otherwise

Miscellaneous Minor Ailments

3,745

36

TABLE V.

DENTAL INSPECTION AND TREATMENT.

(1) Number of pupils inspected by the A	uthority'	s Dental	Officers	:	
(a) Periodic age groups					38,806
(b) Specials					644
(c) Total (Periodic and Specials)					39,450
(2) Number found to require treatment					23,923
(3) Number referred for treatment					23,655
(4) Number actually treated					17,738
(5) Attendances made by pupils for treatm(6) Half days devoted to :	nent				26,922
Inspection					358
Treatment					3,829
	Total				4,187
(7) Fillings:					W (8)
Permanent Teeth					10,233
Temporary Teeth					1,177
	Total				11,410
(8) Number of teeth filled:					
Permanent Teeth					9,256
Temporary Teeth					1,142
	Total				10,398
(9) Extractions :					
Permanent Teeth .					5,648
Temporary Teeth					19,989
Tompount, Tools					
	Total				25,637
(10) Administrations of general anaesthetic	cs for ext	ractions			10,779
(11) Other Operations:					
Permanent Teeth				-	2,694
Temporary Teeth					1,230
	Total				3,924
Attendances for fitting of dentures and/or	orthodo	ntic appl	iances		3,709

AVERAGE WEIGHTS.

Boys		GIRLS.
	I N.	

Age Groups	No. Weighed	Lbs	Kilograms	No. Weighed	Lbs.	Kilograms
3-4 years	13	38.27	17.36	14	37.30	16.92
4-5 years	41	41.15	18.67	43	39.60	17.96
5-6 years	885	43.87	19.90	895	42.44	19.25
6-7 years	223	47.69	21.63	188	46.40	21.05
7-8 years	601	55.16	25.02	556	53.01	24.05
8-9 years	415	59.05	26.78	399	58.05	26.33
9-10 years	221	64.29	29.16	210	62.59	28.39
10-11 years	638	72.01	32.66	551	69.68	31.61
11-12 years	423	79.79	36.19	389	77.32	35.07
12-13 years	421	84.73	38.43	477	88.40	40.10
13-14 years	100	94.68	42.95	226	101.83	46.19
14-15 years	600	110.54	50.14	565	111.74	50.68
15-16 years	183	120.98	54.88	186	117.60	53.34
16-17 years	59	130.07	59.00	59	125.28	56.83
17-18 years	18	149.28	67.71	38	134.05	60.80
18-19 years	11	148.02	67.14	7	133.82	60.70

AVERAGE HEIGHTS.

		Boys.		GIRLS.			
Age Groups	No. Measured	Inches	Centi- metres	No. Measured	Inches	Centi- metres	
3-4 years	13	39.96	101.50	14	37.32	94.79	
4-5 years	41	41.21	104.67	43	41.22	104.70	
5-6 years	885	43.49	110.46	895	42.45	107.82	
6-7 years	223	45.37	115.24	188	45.37	115.24	
7-8 years	601	48.48	123.14	556	47.94	121.77	
8-9 years	415	50.00	127.00	399	50.09	127-23	
9-10 years	221	51.80	131.57	210	51.66	131.22	
10-11 years	638	54.06	137.31	551	53.70	136-40	
11-12 years	423	56.34	143.10	389	54.22	137.72	
12-13 years	421	58.12	147.63	477	57.28	145.49	
13-14 years	100	60.73	154.25	226	60.30	153-16	
14-15 years	600	63.48	161.24	565	62.16	157.89	
15-16 years	183	67.18	170-64	186	63.52	161.34	
16-17 years	59	67.72	172.01	59	63.09	160-22	
17-18 years	18	69.39	176.25	38	66.35	168-53	
18-19 years	11	70.02	177.85	7	64.68	164.29	

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 9-30 a.m.
Guisborough	School Clinic, Northgate	٠.	Friday 9 a.m.
Guisborough	Park Lane School		Friday 2 p.m.
Lingdale	School Clinic, High Street		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.
Easingwold	Easingwold Grammar/County Modern School		Wednesday 10 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	Evering 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 Hospita	al	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, Wednesday 9 a.m. (all day) .. Alhambra House Stokesley .. Wednesday 1-30 p.m. .. Albert House, Normanby Road South Bank .. Friday 9 a.m. (all day). Normanby .. Windsor Road .. Tuesday 9 a.m. (all day) Redcar .. 5, Turner Street, Coatham .. Tuesday 9 a.m. (all day) Saturday 9 a.m. .. Northgate School Clinic Guisborough .. Wednesday 9 a.m. .. School Clinic, Grape Lane .. Thursday 9-30 a.m. (all Whitby day). Scarborough .. Old Hospital, Friars Way .. Monday, Tuesday, Wednesday, Thursday (all day) .. Adela Shaw Orthopaedic Hospital Friday (all day) Kirbymoorside Welburn Hall Special School Brompton Hall Special School

Ophthalmie Clinics.

Thornaby South Bank	School Clinic, George Street Thursday 1-30 p.m. 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. fort- nightly.
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, Saturday 9 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	,, ,,
Hipswell	Hipswell County Modern School	"
Ryedale	Ryedale C.M. School, Nawton,	" "
	Helmsley	
Pickering	West View, Potter Hill	" "
Lingdale	School Clinic, High Street	,, ,,
Easingwold	Easingwold Grammar/County	"
	Modern School	
For Non-	d mbassa Citata	
Ear, Nose and	d 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	
recent	o, rumer bireet, Coathair	Every 4th Thursday 10 a.m.
0:1	N. d C. I. I. C	
Guisborough	Northgate School Clinic	Every 4th Thursday
		10 a.m.
Scarborough	Old Hospital, Friars Way	4th Wednesday in each
		month 10 a.m.
Artificial Sunl	light Clinies.	
Thornaby	Health Centre, Francis Street	Tuesday Thursday
Thomas	Troutes Centre, Trancis Street	Tuesday, Thursday 9-30 a.m.
Guisborough	Northgate School Clinic	Friday 2 p.m.
Whitby	District Health Office, Grape Lar	
Richmond	"Beaumont," Gilling Road	Tuesday,Friday weekly
	, Similar Tour	11 a.m. and 4 p.m.
Scarborough	Medical Baths	Monday, Thursday,
		Boys 9 a.m.
		Girls 9-30 a.m.
South Bank	Albert House, Normanby Road	Tuesday 10-30 a.m.
	, and a second	Lucsday 10-00 a.m.

CLINIC LOCATION SESSIONS

Remedial Exercise Clinic.

Scarborough .. Old Hospital, Friars Way .. Tuesday, Friday 9 a.m.

Ringworm Clinic.

South Bank .. Albert House, Normanby Road .. Thursday, 1-30 p.m.

Child Guidance Clinic.

Normanby .. Windsor Road .. Saturday, fortnightly

9-30 a.m.

Clifton .. Greystones, Clifton Hospital .. Wednesday, fortnightly,

2 p.m.

Northallerton . . Allertonshire County Modern Saturday, fortnightly

School 9-30 a.m.

Scarborough .. Old Hospital, Friars Way .. Wednesday, fortnightly 10-30 a.m.

J. Walker,
Printer and Stationer,
Northallerton.





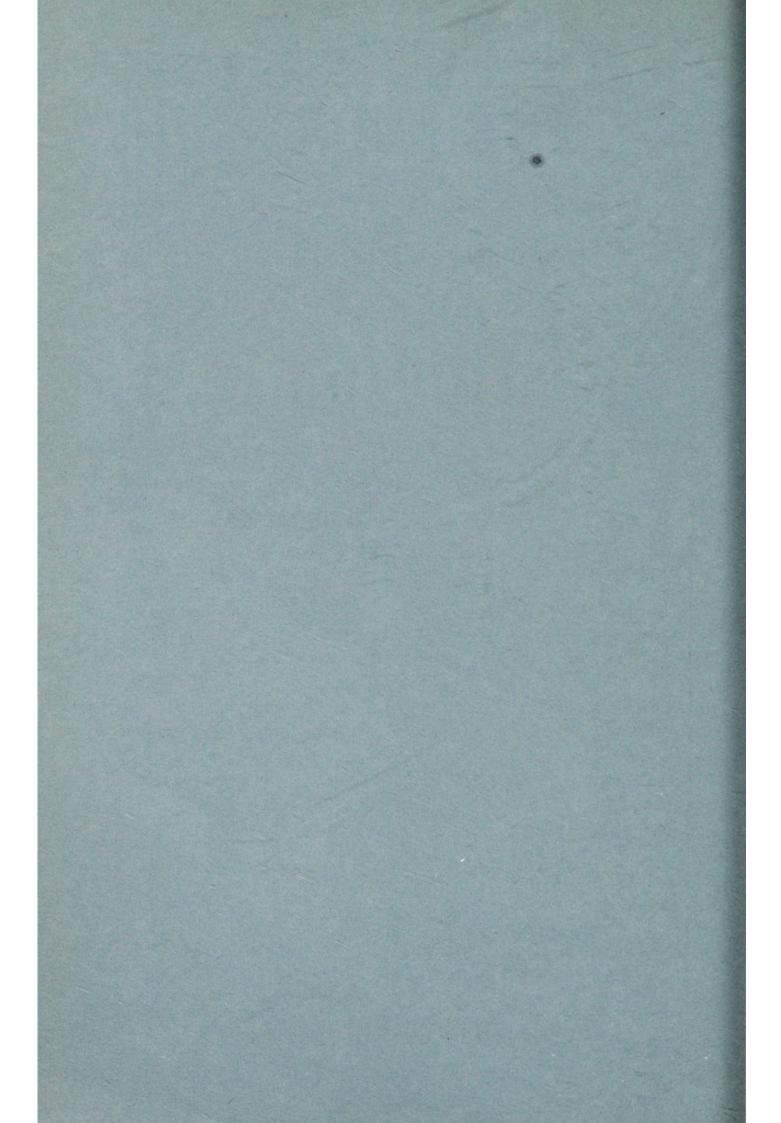
NORTH RIDING OF YORKSHIRE COUNTY COUNCIL

SCARBOROUGH DIVISIONAL EXECUTIVE

REPORT

OF THE
DIVISIONAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1954





Report

of the Divisional School Medical Officer for the year 1954

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 1954.

I have made some comments on points of interest in the body of the report. In general there were only minor changes in the service, and the volume of work was slightly increased.

Influenza hit the schools at an awkward time at the end of the year. Fortunately the medical effects were of less consequence than the administrative. The co-operation of the teachers, scholars, doctors and parents in the investigation into the causative virus was much appreciated by those responsible for the work.

The usual minor infections were again prevalent. It is to be hoped that the work of vaccinating young children against whooping cough, which is being carried out at the Child Welfare Clinics and by family doctors, will be of substantial benefit to the health of school children in general during the coming years.

I am glad to have this opportunity to acknowledge the great help I have received from teachers and other officials of the Committee, and from my colleagues, doctors and nurses, working in the School Health Service. The clerical staff have, as usual, been a tower of strength.

In conclusion I must thank the Committee for its kindness and its interest and encouragement.

I am, Mr. Chairman, Ladies and Gentlemen, Your obedient servant,

W. G. EVANS,

Divisional School Medical Officer.

School Clinic, Old Hospital, Friars Way, Scarborough. 2nd May, 1955.

1.	GE	NERAL.		
	Th	e total number of scholars on the school registe	ers amo	unted
to		, a decrease of 24 compared with last year's figure		
	(a)	Number of Primary School Departments in		
		the Division (excluding Child Haven		
		Nursery School)		28
	(b)	Number of County Modern Schools in the		
		Division		6
	(c)	Number of Grammar and Technical Schools		3
	(d)	Number of pupils on the registers of		
		Primary Schools (excluding Child		
		Haven Nursery School) in September,		1900
		1954		4800
	(e)	Number of children in Child Haven Nursery		15
	(2)	School in September, 1954		45
	(f)	Number of children in the Special Class at		29
	(~)	No. 9 Seamer Road in September, 1954 Number of pupils on the rolls of County		23
	(g)	Modern Schools in September, 1954		1660
	(h)			1000
	(11)	and Technical Schools in September,		
		1954		857
			Total	7391
2.	STA	AFF.		
	(i)	Medical Officers.		
		W. G. Evans, M.A., M.B., B.Chir., D.P.H., Divis	sional S	School
		Medical Officer. (appointed 10th February,	1954).	
		Elizabeth R. Cameron, M.B., Ch.B., D.P.H., Sci	hool M	edical
		Officer.		
		Elizabeth D. Ellison, B.A., Ch.B., Temporary Sc	hool M	edical
		Officer (part-time).	1 34	. 1 1
		Sydney E. Jackson, M.B., Ch.B., Temporary Sch	nool M	edical
		Officer (part-time).		
	(ii)	Dental Surgeons.		
		D. Bewes Atkinson, L.D.S., R.C.S.Eng. (part-tim	e).	
		J. C. Carr, L.D.S., R.C.S.Eng. (resigned 31st Oc	tober,	1954).
		D. R. Storr, L.D.S.	, (
		Miss P. E. Thomas, L.D.S. (transferred from Ri	chmono	d area
		to Scarborough 1st November, 1954).		
	(iii)	Specialist Officers (part-time).		
	(111)	*Ophthalmic Surgeon J. Ellison, Esq., M.R.	C.S., L.	R.C.P.
		*Orthopaedic Surgeon H. L. Crockatt, Esq.,		
		*Psychiatrist Margaret C. Gordon,		
		D.P.M.		
		*E. N. T. Surgeon G. L. Thompson, Esq		, M.B.
		(Cantab), F.R.C.S		
		*By arrangement with Leeds Regional Hospital	Board.	
		2		

(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 five District Nurses.

(v) Orthopaedic Nurse.

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) (resigned 28th February, 1954).

(vii) Speech Therapist.

Miss D. Carlisle, L.C.S.T.

(viii) Lip Reading Tutor.

Mrs. S. B. Staines, B.A. (part-time) (resigned 30th March, 1954).

(ix) Dental Attendants.

Miss N. Mallen (resigned 31st May, 1954).

Miss B. J. Shaw (resigned whole-time appointment 15th May, 1954, but employed part-time as from 17th May, 1954).

Mrs. M. Warner

Miss M. J. Dickinson (appointed 13th September, 1954).

(x) Dental Mechanic.

F. Shaw (part-time).

(xi) Clerks.

J. R. Bassett, B.Com. (Senior Clerk).

Miss J. M. Clarke.

Miss A. Barwick (appointed 17th May, 1954).

3. MEDICAL INSPECTION.

In accordance with the School Health Service and Handicapped Pupils Regulations, 1953, a minimum of three general medical inspections is required to be carried out on children during their school life. Where this minimum is undertaken, the Ministry suggests that 2 of the inspections take place during the first and last years of compulsory school attendance, and the third, at the discretion of the Authority, either during the last year in the primary school or first year in the secondary school. In our area, routine inspections are undertaken during a child's first year at school, at the age of 7-8 and 10-11, whilst secondary school children are inspected annually after their first year at the secondary school.

Figures for 1954 show an increase of 498 routine inspections on last year, 4,567 compared with 4,069 in 1953. Special inspections also showed a slight increase, from 818 to 842, and re-inspections numbered 1,126 against 1,075 last year.

4. FINDINGS AT ROUTINE MEDICAL INSPECTION.

(a) The proportion of children found at routine medical inspection to require treatment was 18.00% as compared with 12.56% in 1953.

	Number of Children.			
Age Groups	Inspected.	Found to require treatment (excluding dental diseases and infestation with vermin)		
5-6 years	962	173 (17.98%)		
7-8 years	1065	204 (19.15%)		
10-11 years	667	94 (14.09%)		
12-13 years	711	128 (18.00%)		
14 years and over	1162	223 (19.19%)		
Total	4567	822 (18.00%)		

There are increases in the percentages of children found to require treatment in every age group, and the greatest increases are in the older age groups. The situation has been examined with a view to finding an explanation for this rather extraordinary finding, so far with no success.

It will be seen from Table IIA of the Appendix that though the increases are most marked in Skin, Vision, Orthopaedic and "Other" defects, the increases are more or less general. There are corresponding increases in those requiring observation.

(b) General Condition.

Nineteen pupils (0.42%) were classified as being in Class C. (i.e. below average) in the survey of general condition.

This classification depends a great deal on the personal views of the individual examiner, so too much importance should not be attached to the detailed results.

The trends appear to be satisfactory.

(c) Cleanliness.

The 24,224 individual cleanliness inspections by school nurses in schools represent approximately one inspection per child per school term. In 1954 two hundred and eight children were found to be infested, representing rather less than 3% of our school population, compared with 241 in 1953.

Number of school visits by nurses Number of examinations of pupils in the	Primary 313	Secondary 93
schools by nurses	19,410	4.814
Number of individual children infested	158	50
Number of visits to homes by the School		
Nurses	122	12

The figures quoted indicate a slow improvement in the incidence of head infestation.

The experience of most Medical Officers of Health suggests that eradication of this pest will not be attained until we have more power to deal with adults in the families forming the hard core from which infestation spreads.

(d) Clothing and Footwear.

The standard and type of footwear remains unsatisfactory in many cases. Failure to keep shoes in a good state of repair has been observed and contributed to an increase in foot complaints, especially during the winter. The Scarborough Amicable Society afforded assistance during the year to the sum of £310 15s. 5d. in the form of grants to needy cases.

5. TREATMENT OF DEFECTS.

(a) Minor Ailments.

There was again a slight reduction in the number of children attending the Minor Ailments Clinics during 1954 compared with last year. The conditions for which they attended are given in the following table:—

Conditions for what attended M.A		No. of first visits.	Total Attendances	
Scabies			3	9
Impetigo			28	131
Ringworm			1	6
Uncleanliness (include Conditions)	ling Verm	inous	29	47
Minor Injuries			343	640
External Eye Disease			70	153
Ear Discharge and D	eafness		64	243
Nose and Throat			19	34
Vision			3	4
Lungs			2	3
Heart and Circulation	ı		29	51
Skin (Non-contagious	s)		314	918
Other conditions			255	759
	7	OTAL	1160	2998

(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 Sur	geon)	46
Number of children examined		424
Spectacles prescribed		192
Recommended other forms of treatment.		21

(c) Ear, Nose and Throat.

Three hundred and twenty-three school children received operative treatment at Scarborough Hospital during the year, and 37 received other forms of treatment.

Mr. Guy L. Thompson continued with his monthly sessions at the

School Clinic, 13 children making 27 attendances.

Audiometric Survey.

The County Council's audiometric nurse visited primary schools for the purpose of testing the hearing of the 8 year old children. Altogether, 943 children were tested, 84 of whom failed the test. These failures were re-examined by your medical officers, and, where necessary, referred for further investigation by the Ear, Nose and Throat Surgeon at Scarborough Hospital.

(d) Orthopaedic.

Twenty-eight 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 Child	ren treated.
Cerebral Palsy	 			2
Infantile Paralysis	 			4
Perthe's Disease	 			3
T. B. Bones	 			1
Foot deformities	 			13
Miscellaneous	 			5

The orthopaedic surgeons held 21 sessions at the School Clinic, at which 151 children made 302 attendances; under the direction of the Orthopaedic Nurse 116 children made 412 attendances at the 92 sessions of the remedial exercises clinic.

(e) Tuberculosis.

Two new cases of non-pulmonary tuberculosis in children of school age were notified during the year. In addition, the in-transfer to Scarborough from another town of a child suffering from pulmonary tuberculosis was notified.

(f) Ringworm of the Scalp.

No case of ringworm of the scalp came to the notice of the School Health Service during 1954.

(g) Artificial Sunlight Treatment.

During the year 1,522 attendances were made by school children at the Scarborough Medical Baths for artificial sunlight treatment, and 128 courses of treatment were completed by 78 children.

(h) Dental Services.

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

6. PHYSICAL EDUCATION.

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

"The work in Physical Education is proceeding along satisfactory lines and the interest in various aspects of the work is being generally

maintained.

The attendance of 120 teachers in the Division at a training course in Primary Physical Education held in Scarborough Schools is evidence of their continued interest. During the course, which was undertaken by the County Physical Education Staff, children from five schools in the Division were used for demonstration purposes. Similarly courses in Cricket, Hockey, Tennis, Movement and Dance have been held at Wrea Head College.

The Cricket and Football Coaches provided by the Associations concerned have again carried out their training schedule as in previous years. In addition the facilities provided by the Scarborough Cricket

Club were used to full advantage.

Swimming and Life Saving proceeded much on the lines of last year in spite of indifferent weather conditions. The results reflect

credit upon the sound quality of the instruction.

The Scarborough Schools Athletic Association held an Inter-Schools Athletic Meeting at Northstead Playing Field for the selection of representatives at the North Riding County Athletic Championship Meeting. Similarly the Schools Swimming Association again organised a successful Swimming Gala at the North Bay Pool and entered a representative team which was successful in winning the trophy at the North Riding County Swimming Gala held at Thornaby".

7. INFECTIOUS DISEASES.

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

Scarlet Fever	 	 	43
Whooping Cough	 	 	36
Measles	 	 	18
Pneumonia	 	 	5
Food Poisoning	 	 	8
Tuberculosis	 	 	2

In accordance with the request of the Ministry of Health, the occurrence of an influenza-like illness in 3 schools in Scarborough was

notified to the Ministry.

As a result of this report, Dr. Andrews of the Virus Laboratory at Colindale visited the schools and interviewed a number of the convalescents. Subsequently, with the co-operation of parents and family doctors, a number of blood samples from these children was collected and sent for examination. The results confirmed the clinical impression that the epidemic was due to Virus B.

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 1954:—

Percentage of children provided with meals in Rural	
Schools	65.28
Percentage of children provided with meals in	
Scarborough Schools	46.14
Percentage of children provided with milk in Primary	
Schools in the Division	73.79
Percentage of children provided with milk in Second-	
ary Schools in the Division	52.70
0	

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

9. CO-OPERATION WITH OTHER BODIES.

From Mr. White, 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:—

"Seventy-two cases have been inquired into during the year 1954

and are classified as follows:-

Neglect		41
Advice Sought		20
Assault or Ill-treatment		10
Abandonment		1
		_
Total		72
		-
The above were dealt with as follow	vs:—	
Parents or others warned	1	49
Advised and helped		23
		_
Total		72

One case came before the Juvenile Court and the children (3) were committed to the care of the Local Authority consequent on inadequate

provision made by the parents.

There were 9 inquiries sent outside the Branch concerning parents who were away and resident in other branch areas, whilst 274 visits of supervision and 252 miscellaneous inquiries were made by the Inspector in connection with the above cases".

10. NURSERY SCHOOL.

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

"The Nursery School at Child Haven was attended by an average of 45 children between the ages of 2 and 5. Placement is determined by social factors in the family rather than the needs of the individual child, and there is no doubt that more children would benefit from this type of education who are not eligible under the present methods of

selection. This is regrettable in view of the Ministry's expressed views on the importance of preventive measures in the field of mental health.

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. The Nursery had its share of chicken pox and mumps which have been prevalent during the autumn".

11. HANDICAPPED PUPILS.

The classification of children according to their aptitudes and abilities must form one of the corner stones of any system of education.

From the point of view of numbers alone, the educationally subnormal must be regarded as the most important group among handicapped pupils. On other grounds, too, the ascertainment of these children must be regarded as of vital importance both to the individual children as well as to the system as a whole.

This is not the place for an exhaustive treatise on the truth of these statements, but I would emphasise three points which I think are not

generally appreciated.

First, I would emphasise that mental backwardness is very often a cause for emotional disturbance in those children who remain for long under the strain of trying to keep up with their normal fellows in an ordinary school. The records of child guidance clinics show a high proportion of such children among those referred. It is a fair assumption that much of this trouble could be avoided by early ascertainment.

One reason for the apparent reluctance of teachers and others to refer cases is, I believe, that they distrust "intelligence tests". This distrust has been aggravated by the alleged defects of these tests as a means of selecting grammar school entrants. It is not realised that the tests used for the diagnosis of backwardness are highly standardised and applied individually by experienced testers. The tests are only one part of an examination which includes consideration of the child's social adaptation, his home, his school report and his physical and emotional make-up.

Finally, I would refer to the value of such an examination, even if the result is negative. The knowledge of a child's intellectual potential is essential if a child's emotional and educational difficulties are to be dealt with rationally. It is significant that in child guidance

work a psychometric test is done as a routine.

The Seamer Road Special Class is carrying out a very important function and doing it very well under rather difficult conditions, as the Committee appreciate. We are, indeed, fortunate in this area in that such a high proportion of our educationally sub-normal children are receiving the type of education they need.

During the year six children were ascertained as Handicapped

Pupils, viz :-

Educationally Sub-normal ... 4
Physically Handicapped ... 1
Delicate ... 1

Of the educationally sub-normal pupils 2 were in attendance at Seamer Road Special Class prior to ascertainment, and continued to attend the Class. Another was admitted to the Special Class, whilst the fourth child continued to attend an ordinary school pending a vacancy at a special boarding school being found for him.

The delicate child was admitted to the Children's Convalescent Home, West Kirby, but the parents of the physically handicapped child refused a vacancy at Welburn Hall and sent the child to a private

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 St. Vincent's School, West Derby, Liverpool Yorkshire School for the Blind, York	: 1	1 1 -
DEAF AND PARTIALLY DEAF		PARTY SETTI
Yorkshire School for the Deaf, Doncaster Liverpool School for Partially Deaf, Southport Bridge House School, Harewood	2 1 1	2
EDUCATIONALLY SUB-NORMAL		
Brompton Hall School Baliol School, Sedbergh	8	4
EPILEPTIC		No. of Contract
Homes for Epileptics, Maghull Lingfield Epileptic Colony		1 1
MALADJUSTED	S. Mar Tal	
Oakbank, Ingrow, Keighley Ledston Hall, Allerton Bywater Bodenham Manor, Hereford	1 1 1	
DELICATE	8	
Children's Convalescent Home, West Kirby		1
PHYSICALLY HANDICAPPED		references
Welburn Hall School	6	2

At the beginning of the year 25 children were in attendance at the Special Class at No. 9 Seamer Road, and during the year 6 further children were admitted. Five pupils were discharged as follows:—

³ to ordinary schools.

² withdrawn on reaching school-leaving age,

12. SECTION 57, EDUCATION ACT, 1944.

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

13. SPEECH THERAPY.

Miss D. Carlisle, our Speech Therapist, whose time, apart from one day per week when she visits Brompton Hall and Welburn Hall Schools and Adela Shaw Orthopaedic Hospital, is devoted to the treatment of children from this Division, has kindly supplied the

following report upon her work for the year:-

"The number of children discharged has kept pace with the number referred to the department. Thus all children referred are seen with no or very little delay, and are, in most cases, able to begin lessons immediately. Some cases, though needing help, are, however, postponed as other factors such as age must be considered, besides the existence or non-existence of a vacancy.

As is usual, the number of boys with speech defects is just about

three times the number of girls.

An interesting comparison is in the number of stammerers. The proportion of boys and girls together who stammer, to the total, is a little under a third. Among the boys alone, the proportion is a little less than a half, while among the girls alone, it is only a fifth. There have been in fact, six times as many boys who stammer as there have been girls.

Similarly, with simple dyslalia (one sound only defective—almost always either "S" or "Th") there are twice as many boys as girls, but with multiple dyslalia (more than one sound defective—varies from children with two or three defective sounds, to unintelligibility) there

are five times as many boys as girls.

This difference between the sexes seems due to a definitely greater facility for speech and language among girls. This is underlined by the fact that among the children with organic defects (e.g. deafness, cleft palate, etc.) the number of boys and girls are approximately

equal.

The category of cases noted as "withdrawn" covers those children who have left school, or the district, with speech defects still persisting. In one case, on leaving school, a girl was able to continue attending for a time, but this is not usually possible. There are also occasional cases of parents withdrawing a child because of difficulty in attendance, forthcoming examinations or dissatisfaction with treatment. Happily the latter is rare, there was in fact only one such case during the past year. But a few cases of withdrawal for these and other reasons are bound to be encountered when large numbers of children are dealt with.

The duration of treatment varies a great deal according to the child, the type of defect, and other factors. Among those with simple dyslalia three months attendance is generally sufficient, and sometimes less. Children with multiple dyslalia generally stay from six to twelve months, sometimes longer. Children who stammer generally need at

least a year, and those with organic defects also need a long attendance. Where progress is slow, and attendance consequently long, I often find

it a good thing to discharge the child temporarily.

An important factor in progress is keenness and co-operation on the part of the parents as well as from the children (where, of course, it is all-important). Happily this is present in all but a few cases. Where interest and co-operation are notably lacking it is quite obvious

that progress is slower than it should be.

Most of the children attend individually, as I find myself that this produces the best results in most cases. But I do also take certain children in groups—nearly all stammerers, both because of pressure of numbers on time available, and because with groups there are some advantages (opportunities and possibilities which do not occur with individuals). However, I endeavour to give individual attention also to all those children who come with a group, sometimes weekly, sometimes monthly, but at least once a term.

Most of the children attend once weekly for half an hour. A few selected cases with severe defects, or whose progress is abnormally slow, attend twice a week. And there are the odd one or two who attend still more frequently, or on the other hand only once a month.

During the past year I have been able to make some additions to the equipment, in particular a set of farm animals and another table have been most useful".

Statistics.

Overall Figures.

Children under treatment 1st January, 1954	61
Number admitted during the year	38
Total number treated	99
Number discharged during the year	48
Remaining under treatment 31st December, 1954	51

Analysis of Figures.

No. of children admitted during the year:—

		Boys	Girls	Total
Stammer	 	12	2	14
Simple Dyslalia	 	7	2	9
Multiple Dyslalia	 	12	1	13
Cleft Palate	 	1	_	1
Deafness	 	_	1	1
Dysphonia	 	_		_
	Total	32	6	38
and Miles and Miles and Miles		-	_	

No. of children disc	charged o	during th	he year:	_	
Stammer			12	1	13
Simple Dyslalia			14	7	21
Multiple Dyslalia			7	3	10
Cleft Palate				2 ·	2
Deafness				1	1
Dysphonia			_	1	1
Dysphoma					_
		Total	33	15 '	48
		1 Otal	55	15	
No. of children trea	ted durin	ng the v	ear :—		
Stammer			31	5	36
Simple Dyslalia			17	8	25
Multiple Dyslalia			23	4	27
Cleft Palate			2	3	5
Deafness			2	2	4
Dysphonia			1	1	4 2
Dysphoma			1	1	
		Total	76	23	99
		201111			
Summary of Discha	rges :-				
			Stammer		Total
Cured or much in	proved		- 6	30	36
Withdrawn			7	5	12
			_		_
		Total	13	35	48
				-	_

14. LIP READING.

Mrs. S. B. Staines resigned her part-time appointment as Lip Reading Instructor at the end of March, but the classes were resumed in May under Miss Carlisle, who has submitted the following short report:—

"There are two classes, a junior and senior, each of which attend for a 45 minute lesson weekly.

There has been good and regular attendance with the exception

of one or two members.

Some time has been spent on the mechanics of lip reading but, for the most part, practical work in recognising everyday phrases, commands, descriptions, etc., has been done and definite progress has been noted".

Statistics.

Number of children attending as at 1st Janu Number admitted during the year	20
Total number attended	23
Number withdrawn during the year Number in attendance as at 31st December,	15
	-

Summary of Discharges

	Total	
Attendance no longer necessary Attendance temporarily withdrawn	 	2
Left school	 	3

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:—

"An increased number of cases was referred to the Scarborough Child Guidance Clinic during 1954, but once again its scope was severely restricted by shortage of staff. Psychiatric provision is still confined to one session a fortnight from Dr. Gordon. During the last four months of the year Miss E. Clayton acted as temporary psychiatric social worker.

At the 21 sessions held during 1954 a total of 35 children made 99 attendances. Thirty of these children were from the Scarborough area.

During 1954 fourteen cases were closed and at the end of the year 21 children were still attending for psychotherapy. Many more were awaiting examination. Further details of interest are as follows:—

Girls saan 12

Roye seen 23

Boys seen 23.	GIFIS	seen 12	
Referred by:			
Parents or guardians			1
Head Teachers			3
School Medical Officers			20
Family doctors			7
Specialist doctors			2
Children's Officer			1
Magistrates and Probation O	fficers		î
Referred because of: Excessively aggressive behave Excessively withdrawn behave	viour		1 5
Very difficult behaviour of v		kinds	8
Neurotic symptoms			12
Delinquency (i.e. court cases			1
Enuresis and encopresis (bed	-wettii	ng and	
soiling)			7
Miscellaneous (i.e. unclassis	fiable	under	
any of the above)			1

16. CHILD DELINQUENTS.

One hundred and three medical reports were submitted to the Magistrates in respect of children who appeared before the Juvenile Courts.

17. EMPLOYMENT OF SCHOOL CHILDREN.

Under the provisions of the bye-laws relating to the employment of children, 150 children were medically examined; all except one were considered fit for their proposed employment without detriment to their health.

18. MEDICAL EXAMINATIONS OF ENTRANTS TO COURSES OF TRAINING FOR TEACHING.

Since 1st April, 1952, under the provisions of Ministry of Education Circular No. 249, entrants to courses of training for teachers are medically examined by the school medical officer of the area in which they live. During the year, 40 such examinations were carried out.

19. PROTECTIVE INNOCULATION.

Twenty-five per cent of the pupils examined at routine medical

inspection bore scars of successful vaccination against smallpox.

During the year 26 children in the 5-14 age group received primary courses of immunisation against diphtheria, and 255 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, 1954.

TABLE 1.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A. Periodic Medical Inspections.

Age Groups Inspected and Number of Children examined in each: —

5-6 years 962

7-8 years 1065
10-11 years 667
12-13 years 711
14 years and over 1162

TOTAL ... 4567

B. Other Inspections

Number of Special Inspections ... 842

Number of Re-inspections ... 1126

Total ... 1968

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)

AGE GROUPS INSPECTED	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
	 5	170	173
	 51	159	204
	 33	64	94
	 66	69	128
14 years and over	 93	136	223
TOTAL	 248	598	822

TABLE II.

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

	Periodic I	nspections.	Special In	spections.
	Number of	of Defects.	Number of Defects.	
DEFECT OR DISEASE	Requiring Treatment	Requiring to be kept under Observation but not requiring Treatment	Requiring Treatment	Requiring to be kept under Observation but not requiring Treatment
SKIN Eyes	134	58	71	10
(a) Vision (b) Squint (c) Other	248 48 22	211 43 23	80 6 40	31 8 3
EARS (a) Hearing (b) Otitis Media (c) Other	15 17 5	97 43 8	29 29 31	91 6 4
Nose or Throat SPEECH CERVICAL GLANDS	94 29 7 34	304 91 55 82	75 8 5 38	62 21 8 33
HEART AND CIRCULATION LUNGS DEVELOPMENTAL	9	41	12	15
(a) Hernia (b) Other	8 10	12 56	2	6 2
ORTHOPAEDIC (a) Posture (b) Flat Foot (c) Other	20 29 83	110 75 254	7 7 22	27 19 37
Nervous system (a) Epilepsy (b) Other	3	11 11	-	4 6
PSYCHOLOGICAL (a) Development (b) Stability OTHER	3 6 72	168 350 59	11 13 199	41 33 110

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

Age Groups	Number of	A. (Good)		B. (Fair)		C. (Poor)	
Inspected	Pupils Inspected	No.	%	No.	%	No.	%
5-6 years 7-8 years 10-11 years 12-13 years 14 years and over	962 1065 667 711 1162	540 540 360 463 913	56.13 50.70 53.97 65.12 78.57	419 518 305 242 248	43.56 48.64 45.73 34.04 21.34	3 7 2 6 1	0.31 0.66 0.30 0.84 0.09
TOTAL	4567	2816	61.66	1732	37.92	19	0.42

TABLE III. Infestation with Vermin.

(1) Total number of examinations in the schools by the school nurses or other authorised persons	24,224
(2) Total number of individual 1 6	
(2) Total number of individual pupils found to be infested	208
(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) (50),	
2 detection 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 trea or under treatment ding the year.	
Ringworm—(i) Scalp			By the Authority.	Otherwise
	 		 -	-
(ii) Body	 		 1	
Scabies	 		 3	
Impetigo	 		 28	
Other skin diseases	 		 314	
		TOTAL	 346	-

GROUP 2. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

		Number of with.	cases dealt
		By the Authority.	Otherwise
External and other, excluding errors of refraction a squint	and 	70	-
Errors of Refraction (including squint)		_*	424
TOTAL		70	424
No. of pupils for whom spectacles were prescribed		_*	192

^{*} 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	-	25
(b) for adenoids and chronic tonsillitis	-	281
(c) for other nose and throat conditions	-	17
Received other forms of treatment	. 83	37
TOTAL	. 83	360
GROUP 4. ORTHOPAEDIC AND POSTURAL DEF	FECTS.	
(a) Number treated as in-patients in hospitals	28	
	By the Authority.	Otherwise
(b) Number treated otherwise, e.g. in clinics of out-patient departments		151
GROUP 5. CHILD GUIDANCE TREATMENT.	Number of	cases treated
	In the Aut Child Gui Clinics	The state of the s
Number of pupils treated at Child Guidance Clinics		- 30
GROUP 6. Speech Therapy.		
	1	cases treated
	Number of	
	By the Authority	. Otherwise
Number of pupils treated by Speech Therapists .	By the Authority	Otherwise
Number of pupils treated by Speech Therapists . GROUP 7. OTHER TREATMENT GIVEN.	By the Authority 99	-
	By the Authority 99	-
	By the Authority 99	f cases treate
GROUP 7. OTHER TREATMENT GIVEN. (a) Miscellaneous minor ailments	By the Authority 99 Number of By the	f cases treate

TABLE V.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(1) Number of pupils inspected by the Author	ity's
Dental Officers:— (a) At Periodic Inspections	70
(b) As Specials	78-
(b) As Specials	
Total (1)	798
(2) Number found to require treatment	478
(3) Number offered treatment	478
(4) Number actually treated	197
(5) Attendances made by pupils for treatment	711
(6) Half days devoted to: Periodic Inspection	
Treatment	112
Total (6)	119
(7) Fillings: Permanent Teeth	319
Temporary Teeth	52
Total (7)	372
(8) Number of Teeth filled: Permanent Teeth	284
Temporary Teeth	49
Total (8)	333
(9) Extractions: Permanent Teeth	53
Temporary Teeth	134
Total (9)	187
10) Administration of general anaesthetics for extract	tion 91
(11) Other Operations: Permanent Teeth	265
Temporary Teeth	312
Total (11)	577
(12) Orthodontic and Denture Attendances	142

AVERAGE HEIGHTS.

BOYS

GIRLS

AGE GROUPS	No. measured	Inches	Centi- metres	No. measured	Inches	Centi- metres
2-3 years	4	35.50	90.17	10	36.40	92.46
3-4 ,,	24	37.17	94.41	35	38.63	98.12
1-5 ,,	24	40.08	101.80	31	40.29	102.34
5-6 ,,	206	43.22	109.78	210	43.23	109.80
5-7 ,,	77	45.66	115.98	81	44.91	114.07
-8 ,,	302	48.19	122.40	269	48.09	122.15
-9 ,,	111	49.95	126.87	121	49.40	125.48
-10 ,,	24	52.50	133.35	29	52.34	132.94
-11 ,,	270	54.34	138.02	235	53.94	137.01
-12 ,,	39	55.41	140.74	23	56.17	142.67
-13 ,,	119	58.93	149.68	98	59.31	150.65
1-14 ,,	260	60.24	153.01	230	60.13	152.73
-15 ,,	369	63.02	160.07	255	62.33	158.32
-16 ,,	136	65.73	166.95	130	63.05	160.15
-17 ,,	61	68.51	174.02	78	63.97	162.48
-18 .,	44	69.25	175.90	30	63.93	162.38
-19 ,,	30	69.60	176.78	22	63.36	160.93

AVERAGE WEIGHTS.

BOYS

GIRLS

BUYS				GIRLS			
AGE GROUPS	No. weighed	lbs.	Kilograms	No. weighed	lbs.	Kilograms	
2-3 years 3-4 " 4-5 " 5-6 " 6-7 " 7-8 " 8-9 " 9-10 " 0-11 " 1-12 " 2-13 " 3-14 " 4-15 " 5-16 " 6-17 " 17-18 " 18-19 "	4 24 24 206 77 302 111 24 270 39 119 260 369 136 61 43 30	29.50 33.75 38.37 43.61 47.76 54.16 57.82 68.66 72.48 74.18 88.22 95.67 108.79 119.47 135.54 140.67 140.86	13.38 15.31 17.40 19.78 21.66 24.57 26.23 31.14 32.88 33.65 40.02 43.40 49.35 54.19 61.48 63.81 63.89	10 35 31 210 81 269 121 29 235 23 98 230 255 130 78 30 21	30.60 35.49 38.16 42.60 46.07 53.78 57.96 65.41 69.19 77.04 90.21 99.73 112.33 117.28 122.85 123.10 122.90	13.88 16.10 17.31 19.32 20.90 24.39 26.29 29.67 31.38 34.95 40.92 45.24 50.95 53.20 55.72 55.84 55.75	