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### **Contributors**

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NORTH RIDING OF YORKSHIRE  
COUNTY COUNCIL

SCARBOROUGH  
DIVISIONAL EXECUTIVE

REPORT  
OF THE  
DIVISIONAL  
SCHOOL MEDICAL OFFICER  
FOR THE YEAR 1962





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# Report

of the Divisional School Medical Officer  
for the year 1962

## **The Chairman and Members of Scarborough Divisional Executive**

MADAM CHAIRMAN, LADIES AND GENTLEMEN,

The work of the School Health Service in 1962 in the Executive Area covered the same field as hitherto, except for two significant changes.

First, the routine medical inspection of children in secondary schools between their first year and the year in which they left, was omitted.

By the time a child has reached the age of 12 years he will normally have been examined by the School Medical Officer at least three and often four times. It is not, therefore, surprising to find from a study of the records of Medical Inspections that the number of defects found for the first time in the later inspections is very small.

It should be emphasised that any child whose behaviour or condition gives rise to anxiety in the minds of his parents, teachers, or school nurse, can be seen at any time.

The time thus saved for the school doctors and to a lesser extent for school nurses is put to better use by concentrating more attention on children known to be in need of supervision.

The second change is the establishment of paediatric clinics held in the School Clinic by the recently appointed full-time paediatrician, Dr. A. Bogdan. This naturally has brought the School Health Service and the Hospital very much closer in their child health work, to their mutual advantage. Certainly the School Medical Officers and the School Nurses appreciate the advantages of working closely with Dr. Bogdan and his staff.

A similar arrangement already exists with the Orthopaedic Department of the Hospital, but the wider field of paediatrics naturally leads to more numerous opportunities for effective co-operation.

This co-operative effort is by no means fully developed yet, and I look forward to greater benefits which I believe will follow in the future.

I should like to thank Dr. Cameron for the sections she has contributed, and am also indebted to Mr. Nock, Miss Milbanke and Inspector White for their reports.

I am glad to have this opportunity of acknowledging the interest and encouragement of the Committee, and the help of colleagues and staff in the School Health Service.

I am, Madam Chairman, Ladies and Gentlemen,

Your obedient servant,

School Clinic,  
Old Hospital,  
Friars Way,  
Scarborough.

W. G. EVANS,  
Divisional School Medical Officer.

*September, 1963.*



## 1. GENERAL.

The total number of pupils on the school registers in September, 1962 amounted to 7,343, a decrease of 118 when compared with last year's figure, whilst the number of Primary and Secondary Schools was 36, the same number as in the previous year.

(a) Number of Primary School Departments in the Division (excluding Childhaven Nursery School) ....	27
(b) Number of Secondary Schools in the Division other than Junior Technical and Grammar Schools ....	6
(c) Number of Grammar Schools ....	2
(d) Number of Junior Technical Schools ....	1
(e) Number of pupils on the registers of Primary Schools (excluding Childhaven Nursery School) ....	4,116
(f) Number of children in Childhaven Nursery School ....	43
(g) Number of children in the Special Class at No. 9 Seamer Road ....	36
(h) Number of pupils on the rolls of Secondary Schools other than Junior Technical and Grammar Schools ....	2,020
(i) Number of pupils on the rolls of the Junior Technical School and the Grammar Schools ....	1,128

### Comparison Figures

	1959	1960	1961	1962	Increase	Decrease
Primary ....	4257	4189	4110	4116	6	—
Childhaven ....	45	45	45	43	—	2
9 Seamer Road ....	36	37	36	36	—	—
Grammar and Junior Technical Schools ....	1103	1158	1145	1128	—	17
Other Secondary Schools	2154	2156	2125	2020	—	105
	7595	7585	7461	7343	6	124

## 2. STAFF.

### (i) Medical Officers

W. G. Evans, M.A., M.B., B.Chir., D.P.H., Divisional School Medical Officer.

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

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

(ii) **Dental Surgeons**

D. Bewes Atkinson, L.D.S., R.C.S.Eng. (part-time).  
Mrs. S. R. Seaman, B.D.S.(London), L.D.S., R.C.S.Eng.  
H. C. Morgan, L.D.S., R.C.S. Eng. (part-time).  
R. Mackenzie, M.B., B.S., M.R.C.S., L.R.C.P., R.C.S.  
(part-time Dental Anaesthetist).

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

\*Ophthalmic Surgeon J. Ellison, M.R.C.S., L.R.C.P.  
\*Orthopaedic Surgeon G. S. Tupman, F.R.C.S.  
\*Psychiatrist C. H. Neville-Smith, M.B., D.C.H.,  
D.P.M.  
\*Paediatrician A. Bogdan, V.R.D., M.D. (London), M.R.C.P.  
(Ed.), D.C.H.  
*\*By arrangements with Leeds Regional Hospital Board.*

(iv) **School Nurses**

Miss P. M. Bradley, S.R.N., S.C.M., H.V. Cert.  
Miss M. Ford, S.R.N., S.C.M., Q.N.  
Miss D. Kirk, S.R.N., R.S.C.N., S.C.M., H.V. Cert. (appointed  
1st September, 1962).  
Mrs. M. M. Lowen, S.R.N., S.C.M., Q.N., H.V.Cert.  
Miss I. M. Lumley, S.R.N., S.C.M., Q.N., H.V. Cert.  
Miss B. Merryweather, S.R.N., H.V.Cert.  
Miss P. Parish, S.R.N., S.C.M., H.V.Cert. (appointed 18th  
June, 1962).  
Mrs. H. Rowbotham, S.R.N., S.C.M., H.V.Cert.  
Miss P. Uttley, S.R.N., S.C.M., H.V.Cert.  
Mrs. P. Young, S.R.N., S.C.M., H.V.Cert.

(v) **Orthopaedic Nurse**

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

(vi) **Speech Therapist**

Miss R. Haddleton, L.C.S.T. (appointed 1st January, 1962,  
resigned 31st January, 1963.) (part-time).  
Mrs. A. Hankey, L.C.S.T. (appointed 6th November, 1962)  
(part-time).

(vii) **Dental Attendants**

Mrs. N. E. Brett (part-time).  
Miss C. Tomlinson (appointed 16th July, 1962).  
Mrs. M. Brewell (resigned 27th April, 1962).

(viii) **Clerks**

Mr. E. Johnson (appointed 15th January, 1962. Resigned 11th  
May, 1962).  
Miss E. Windass, D.P.A. (Senior Clerk, appointed 20th August,  
1962).  
Miss J. M. Clarke.  
Mrs. M. Cartwright.



### 3. MEDICAL INSPECTION OF PUPILS.

The arrangements for periodic medical inspections were the same as in previous years at primary schools, whereby new entrants and children in the 7—8 and 10—11 year age group were inspected. The revised system of inspection in secondary schools introduced during the Autumn term of last year was continued, when pupils in the first form who had not been examined for more than a year and pupils in their final year were examined. Such inspections were carried out in 25 primary schools and 6 secondary schools and also at the Technical College (girls). Furthermore, all children at Childhaven Nursery School and Friarage Nursery Class were examined twice during the year. Altogether a total of 3,165 inspections were made in 1962, being a decrease of 1,118 compared with the number made in the previous year. The considerable reduction in the number of examinations carried out during the year is explained by the reduced number of pupils to be examined in secondary schools, and also by the fact that it was not possible to visit all secondary schools (boys), owing to staff changes.

Special inspections by the school medical officers amounted to 436 and re-inspections 761 as against 340 and 704 respectively in 1961.

### 4. FINDINGS AT PERIODIC MEDICAL INSPECTION

(a) The number of children found to require medical treatment was 446, representing 14.09% of those inspected. The following table shows the corresponding figures for previous years:—

Year	Number of Children	
	Inspected	Found to require treatment (excluding dental diseases and infestation with vermin)
1952	4431	599 (13.52%)
1953	4069	511 (12.56%)
1954	4567	822 (18.00%)
1955	4667	731 (15.66%)
1956	4446	645 (14.51%)
1957	4613	525 (11.38%)
1958	4847	702 (14.48%)
1959	4280	664 (15.51%)
1960	4698	677 (14.41%)
1961	4353	601 (13.80%)
1962	3165	446 (14.09%)

Details of the number of children requiring treatment, classified according to year of birth, are given in Table B of Part I of the Appendix to this report, and the actual defects or diseases in Table A of Part II.



### (b) Physical Condition

Since 1956 the "physical" condition of pupils has been classified as either "satisfactory" or "unsatisfactory," whereas in previous years their "general" condition was graded as "Good," "Fair" or "Poor". From Table A of Part I of the Appendix, which gives the classification of "physical condition" according to year of birth, it will be seen that 41 (1.29%) of the 3,165 pupils subjected to routine medical inspection were considered to be "unsatisfactory". Findings in previous years were as follows:—

Year	Number of Pupils Inspected	General Condition		
		Good %	Fair %	Poor %
1952	4431	58.47	41.03	0.50
1953	4069	59.45	39.96	0.59
1954	4567	61.66	37.92	0.42
1955	4667	57.77	41.91	0.32
			Physical Condition	
			Satisfactory	Unsatisfactory
1956	4446	—	97.71	2.29
1957	4613	—	97.85	2.15
1958	4847	—	97.79	2.21
1959	4280	—	97.66	2.34
1960	4698	—	97.47	2.53
1961	4353	—	98.19	1.81
1962	3165	—	98.71	1.29

### (c) Cleanliness

As far as possible, the school nurses endeavour to inspect all pupils every term, and they follow up those who are infested. During the year they made 16,785 inspections and 237 pupils were found to be infested with nits and/or pediculi. This latter figure includes cases of children with only the odd nit, but some 11 were heavily infested. In the previous year 263 pupils were found to be infested.

The incidence of verminous conditions in schools is given in the following table, which shows that this problem is not general to all schools. In fact more than one-third of them were free from infestation, but in two of them were concentrated about one quarter of the total cases.

Percentage of Children Infested	No. of School Departments
Nil	15
Under 1	6
1-1.99	3
2-2.99	3
3-3.99	3
4-4.99	2
5-9.99	4
10-20	1
Over 20	2



(d) **Clothing and Footwear**

The following report was prepared by Dr. Cameron:—

A larger proportion of children are found to be wearing unsuitable shoes. The use of pull-on styles is seen, even in the infant schools, and many wear shoes that are too short. The increasing use of synthetic materials for shoes and socks produces many problems in foot hygiene, and fosters blisters and corns.

The Scarborough Amicable Society, which was founded in 1729 and is entirely dependent on voluntary subscriptions and donations, expended £350 in 1962 on the provision of boots and clothing. As in the previous year the Society concentrated its expenditure on the provision of clothing and footwear for Foundationers, of whom there were 18, and £25 was spent on casual assistance.

(e) **Following-up**

The school nurses attend inspections in schools and follow-up cases in which assistance or advice is needed, and 303 home visits were made in this connection.

**5. TREATMENT OF DEFECTS.**

(a) **Minor Ailments**

Minor Ailments Clinics were again held daily at the School Clinic and weekly at Hinderwell and Northstead Schools. The conditions for which children attended are given in the following table:—

Conditions for which children attended M.A. Clinics	No. of first visits	Total Attendances
Scabies .....	7	24
Impetigo .....	4	13
Ringworm—Head .....	—	—
„ —Body .....	—	—
Uncleanliness (including Verminous Conditions) .....	25	42
Minor Injuries .....	141	245
External Eye Disease .....	26	45
Ear Discharge and Deafness .....	24	100
Nose and Throat .....	4	4
Vision .....	—	—
Heart and Circulation .....	—	—
Skin (Non-contagious) .....	185	499
Other conditions .....	59	128
<b>TOTAL</b>	<b>475</b>	<b>1100</b>



There was again a slight reduction in the number of children treated, as shown in the table below :—

Year	No. of First Visits	Total Number of Attendances
1952	1344	3542
1953	1256	3082
1954	1160	2998
1955	1003	3016
1956	1020	2647
1957	896	1808
1958	745	1460
1959	710	1688
1960	538	1097
1961	490	983
1962	475	1100

### (b) Defective Vision

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

Number of sessions held by Ophthalmologist	....	45
Number of children examined	....	317
Total number of attendances at Eye Clinic	....	333
Number of children for whom spectacles were prescribed	125	
Number of children recommended other forms of treatment	2	

### (c) Diseases of Ear, Nose and Throat

Pupils found at medical inspection to require treatment for impaired hearing, enlarged or diseased tonsils or adenoids, are normally referred to their family doctors, or with the consent of their family doctors, direct to the Ear, Nose and Throat Consultant at Scarborough Hospital.

During the year 234 school children received operative treatment at Scarborough Hospital for diseases of the ear, adenoids and chronic tonsillitis and other nose and throat conditions, and one received another form of non-operative treatment.

Four school children were provided with Medresco Hearing Aids through the Hospital service in 1962, whilst 8 other children still at school were issued with aids in previous years.

### Audiometric Survey

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



Altogether, Mrs. Walker tested 859 children, including a number referred specially by the school medical officers, and of these 55 failed the test. These failures were followed-up by the school medical officers and the parents given appropriate advice.

**(d) Orthopaedic**

22 sessions were held by the Orthopaedic Surgeon, at which 276 school children made 394 attendances. The orthopaedic nurse treated 152 pupils at the remedial exercise clinic; altogether she held 80 sessions and the total number of attendances made by these children was 414.

16 pupils from this Division were treated as in-patients at the Adela Shaw Orthopaedic Hospital, Kirbymoorside, during 1962 for the conditions shown in the following table:—

<i>Condition</i>	<i>No. of children treated</i>		
Deformity of feet	....	....	7
Congenital dislocation of hip	....	....	2
Knock knee	....	....	1
Monoplegia	....	....	1
Exostosis of Os Calcis	....	....	2
Fragilitas Ossium	....	....	1
Asthma	....	....	1
Defect Unknown	....	....	1

**(e) Paediatric Clinics**

16 Paediatric Clinics were held as from March, 1962, 98 patients being seen, 43 of these being new cases and 55 old ones.

**(f) Tuberculosis**

There were no cases of tuberculosis notified during the year in the age group 5—14.

Skin tests were carried out on 27 persons, the two who gave positive reactions being subsequently X-rayed. The other 25 tests proved negative.

**(g) Artificial Sunlight Treatment**

Attendances by school children at the Medical Baths for artificial sunlight treatment totalled 114, and 18 children completed one or more courses of treatment.

**(h) Dental Services**

Particulars of the work undertaken by the school dental officers are given in Part IV of the Appendix.

Mrs. Seaman, Dental Surgeon, resigned from the permanent staff on 19th April, 1962 and re-commenced duties in a part-time capacity on 16th July, 1962.



## 6. PHYSICAL EDUCATION IN THE SCARBOROUGH DIVISION, 1962

Physical Education continues to make satisfactory progress at all levels; good standards of work are achieved and interest maintained in a wide variety of activities.

The Primary School work is mainly in the hands of the class teachers and many do very good work. Demonstrations of Infant and Junior work have been arranged at several schools for the first year students of the North Riding Training College, and the Junior School Football League continues to flourish.

The Secondary School work is in the hands of specialist teachers and the posts are mainly, and to a greater extent than in the rest of the Administrative County, filled by fully qualified teachers of Physical Education. The Scarborough Secondary Schools have been well represented in all the activities of the North Riding Schools Athletic Union, and individuals have gained North Riding colours in Hockey, Athletics, Cricket and Association Football. Rugby football, introduced as a second game at the Westwood County Modern School, has made good progress. As an experiment, hockey has been introduced as an alternative game for sixth form pupils at the High School for Boys.

A visit was made to the Technical College and to the High School for Boys by the Advanced study group from the Carnegie College of Physical Education, and pleasing observations were made on the facilities and on the demonstrations given.

Swimming instruction proceeded on the usual lines but was handicapped by the unusual shortness of the period during which the North Bay Bathing Pool was available. In spite of this, two distinction awards of the Royal Life Saving Society, which require a very high efficiency in life saving and water technique, were gained by two senior pupils.

## 7. INFECTIOUS DISEASES.

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

Measles	....	....	....	....	44
Scarlet Fever	....	....	....	....	12
Dysentery	....	....	....	....	16
Food Poisoning	....	....	....	....	17
Pneumonia	....	....	....	....	2

The cases of dysentery and food poisoning notified occurred in a County Council residential school (Sonne Dysentery) and a private residential school (Food Poisoning due to Salmonella infection).



## 8. MILK AND MEALS

The following details supplied by the Divisional Education Officer show the position as on a day in the Autumn Term, between the 18th and 21st September, 1962:—

Percentage of children provided with meals in Rural Schools	74.77
Percentage of children provided with meals in Scarborough Schools	61.98
Percentage of children provided with milk in Primary Schools in the Division	92.17
Percentage of children provided with milk in Secondary Schools in the Division	59.29

### Comparison Figures

	1961	1962
Meals, Rural Schools	72.33	74.77
Meals, Borough Schools	58.73	61.98
Milk, Primary Schools	91.42	92.17
Milk, Secondary Schools	63.37	59.29

The following report was made by Dr. Cameron:—

Lack of sleep is probably a more important factor in the unsatisfactory development of some children than sheer lack of food.

Many schools now have Tuck Shops, and the increasing consumption of sweets and sticky biscuits is deplored alike by doctors and dentists. If we must have Tuck Shops, could they not sell hard, crisp or fibrous items which would help to promote healthy dental development rather than foster decay and obesity. The increasing use of the Tuck Shop can only impair the teaching of good food habits, so necessary throughout life if good nutrition is to be maintained and the foundations laid for a healthy old age. Such training in the correct selection of food is surely an important part of the School Meals Service.

School meals and milk are planned to provide a balanced diet, with special emphasis on protein, but can achieve this only if they are eaten by the children. A liberal helping of sweets or biscuits at playtime will spoil the appetite of the "poor" eaters and is an unnecessary supplement to the "good" eaters. Obesity in school children is becoming an increasing problem and is now a more common type of malnutrition than undue thinness.

## 9. CO-OPERATION WITH OTHER BODIES

I am indebted to Mr. G. White, the local Inspector of the N.S.P.C.C. for the following report on the work of his Branch during the year, in connection with school children:—



During the last twelve months, 32 cases have been investigated and were classified as follows:—

Neglect	....	....	15
Advice Sought	....	....	9
Ill-treatment	....	....	4
Beyond Control	....	....	2
Moral danger	....	....	2
			—
		Total	32
			==

Only one case was brought to the notice of the Courts, consequent on Neglect. The mother was placed on probation for a period of two years.

169 supervision visits were made and 127 miscellaneous visits of inquiry. Seven inquiries were made for other branches in the country (two from Scotland) where either family or dependent were resident locally.

Many parents still approach the Society with their problems in the early stages and so eliminate the possibility of complications later.

The question of leaving children without proper care creates problems of control in particular, and in two cases small fires have resulted from this.

Bingo is still a nuisance in this respect, and has been the cause of a number of late evening visits to homes where children have been a pest to neighbours, causing damage etc.

During the Christmas period, a number of families were assisted by distribution of toys and food parcels where they were most needed.

From my angle, the co-operation I get from the staff in the Health Department has been extremely good, and the help given to me most valuable.

## 10. NURSERY SCHOOLS

Dr. Cameron prepared the following report:—

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

All children at Childhaven Nursery School and Friarage Nursery Class are medically examined at frequent intervals. Close co-operation between the parents and children is maintained and this, with constant vigilance on the part of the staff, helps to control the spread of infection.

## 11. HANDICAPPED PUPILS

Under the scheme of Divisional Administration it is the duty of the Divisional Executive to report to the County Council all cases of children who require special educational treatment, but the placement



in special schools of these children is the responsibility of the Local Education Authority. During the year sixteen children were ascertained as Handicapped Pupils, viz:—

Deaf	2
Partially Deaf	1
Educationally Subnormal	11
Physically Handicapped	2

Eighteen handicapped pupils from the Division were maintained by the Local Education Authority at special residential schools, as follows:—

Name of School	Boys	Girls
<b>BLIND AND PARTIALLY SIGHTED</b>		
Royal Normal College for the Blind, Rowton Castle, Nr. Shrewsbury	—	1
Exhall Grange Special School, Coventry	1	—
Ysgol Penybont, Glamorgan School for the Blind and Partially Sighted, Bridgend	1	—
Sunshine Home, Southport	—	1
<b>DEAF AND PARTIALLY DEAF</b>		
Yorkshire Residential School for the Deaf, Doncaster	1	1
Mary Hare Grammar School, Newbury	—	1
Needwood School, Burton-on-Trent	—	1
<b>EDUCATIONALLY SUBNORMAL</b>		
Brompton Hall School	1	1
Etton Pasture School, Nr. Beverley	—	1
Besford Court, Worcester	1	—
<b>PHYSICALLY HANDICAPPED AND DELICATE</b>		
Welburn Hall School	3	1
Holly Bank Special School, Huddersfield	—	1
Ingleborough Hall, Clapham	1	—

The Special Class at No. 9 Seamer Road provides for the needs of most of the educationally subnormal children in the Division. It can accommodate 36 children, and all places were taken throughout the year.

Total number of children who attend the Seamer Road Special Class	36
Leavers:—	
On reaching the age of 16 years	4
New Admissions	4

Dr. Cameron reports as follows:—

During the year a number of children were assessed following consistent failure at school. There is still confusion in the selection of these children between innate retardation and failure in attainments. The latter is an educational and not a medical problem, and may be the result of prolonged illness, irregular attendance, frequent change of



school or personality difficulties, especially in the primary department.

These children need remedial teaching in the ordinary school: vigorous individual help in a small group before their sense of frustration has resigned them to sitting quietly at the back of the class, giving no trouble but gaining nothing. However zealous, a teacher with the usual large class cannot give them enough help.

## 12. SECTION 57, EDUCATION ACT, 1944

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

## 13. SPEECH THERAPY

The following is a statistical summary of the work carried out by Miss Haddleton, Speech Therapist, during the year ended 31st December, 1962, two sessions per week being held.

Mrs. Hankey commenced duty on the 6th November, 1962, and figures relating to the cases seen by her during the remainder of 1962 have been included with Miss Haddleton's figures.

There was a time lag during which Miss Taylor treated certain children, while others were waiting, and this gives rise to certain disparity between 1961 and 1962 Tables:—

Total number of treatments	....	....	334
Interviews with parents at clinic	....	....	181
Interviews with parent or children at home			
or at school	....	....	25
Cases under treatment at the beginning of the year			7
Cases known to require treatment at the			
beginning of the year	....	....	50
Total number of cases admitted:—			
Admitted to treatment		45	
Admitted for observation	....	67	
Advised as to treatment	....	50	162
Cases discharged and withdrawn	....	....	49
Cases remaining under treatment	....	....	151

### The reasons for cessation of treatment

DISCHARGED FROM TREATMENT:—	Boys	Girls	Total
Improved	20*	11*	31
Left District or school leavers	5	3	8
Refused treatment	2	3	5
Poor attendance	4	1	5
TOTALS	31	18	49

\*This figure includes children who had

- (a) been treated by Miss Mawson
- (b) been treated by Miss Haddleton
- (c) improved spontaneously since referral.

REMAINING UNDER TREATMENT: 151 (Boys 87, Girls 64)



### Analysis of Defects concerning all children seen

	Boys	Girls	Total
Stammer	33	7	40
Dyslalia	64	56	120
Stammer and Dyslalia	8	3	11
Cleft Palate	7	1	8
Partial Deafness	4	2	6
Dysphonia (with slight dyslalia in four cases)	4	3	7
Tongue Tie	1	1	2
Delayed Speech (possible brain injury/Dysphasia)	3	3	6
Total	124	76	200

5 E.S.N. children were treated at Brompton Hall in a total of 92 treatments. 7 other children were seen for advice.

11 Physically Handicapped children were treated at Welburn Hall in a total of 240 treatments. 3 other children were seen for advice.

Brompton Hall			Welburn Hall		
Boys	Girls	Defect	Boys	Girls	Defect
1	1	Delayed Speech	3	1	Stammer
		Dyslalia		1	Sub-mucous
	1	Dysphasia			cleft Palate
	1	Partial Deafness	2	1	Brain Injury
1		Cleft Palate	2	1	Dyslalia

### 14. CHILD GUIDANCE

The following report on the work of the Child Guidance Clinic in Scarborough was prepared by Miss E. M. Milbanke, the Authority's Educational Psychologist:—

Much of the year it was realised that Dr. C. H. Neville-Smith, the Consultant in Child Psychiatry, would soon end his work in Scarborough because of his new commitments elsewhere, but fortunately at the end of 1962 he was still coming for a full day practically every week. He held altogether 81 sessions at the School Clinic, Friars Way.

The Educational Psychologist worked with Dr. Neville-Smith on most of his cases, and in October they were joined by Miss A. E. Hey, a very experienced social worker from another field, who wished to take up psychiatric social work.

The Psychiatrist saw 44 children of the Scarborough Division, and 33 of these were new to the clinic. The Educational Psychologist examined 35 pupils and saw 2 boys regularly for remedial treatment.



More than half of the 31 boys and 8 girls newly registered were referred by the School Medical Officers, and 14 by family doctors. Difficult behaviour of different types was the major presenting problem in 21 of these, anxiety in 7, educational problems in 5, and physical symptoms like enuresis in the remainder.

By the end of the year the waiting list was down to 4 boys, shorter than it had been for many years. Even so, several weeks usually elapsed before a child could be seen, and as a result of apparently urgent cases taking priority, occasionally it was a matter of months.

#### **Children seen by the Psychiatrist**

	Boys	Girls	Total
Consultation only	12	4	16
Supportive treatment	10	5	15
Regular treatment	7	3	10
For the Juvenile Court	3	—	3
	<hr/>	<hr/>	<hr/>
TOTALS	32	12	44
	<hr/>	<hr/>	<hr/>

#### **15. ENURESIS**

Following preliminary investigation 18 children were considered suitable for treatment by Enuresis Alarms.

Of these, 12 received the apparatus during the year, two had cured spontaneously during the interval since referral and one had left school.

In two cases the children failed to respond, and 10 remained cured.

By the end of the year three children were still on the waiting list.

#### **16. CHILD DELINQUENTS**

One hundred and fourteen medical reports were submitted to the Magistrates concerning children who appeared before the Juvenile Court.

#### **17. EMPLOYMENT OF SCHOOL CHILDREN**

One hundred and sixty-two children were medically examined under the conditions of the bye-laws relating to the employment of children, and one hundred and sixty-one of them were considered fit for their proposed employment without detriment to their health.

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

Under the provisions of Ministry of Education Circular 249, 71 entrants to courses of training for teachers were medically examined.

#### **19. STAFF MEDICAL EXAMINATIONS**

For the purpose of determining their fitness for employment or fitness for inclusion in the County Council's Superannuation Scheme, 136 persons, who had been appointed to posts under the Education Authority, were medically examined during the year by the school medical officers.



## APPENDIX

**MEDICAL INSPECTION AND TREATMENT**  
**Year Ended 31st December, 1962.**

**PART I — MEDICAL INSPECTION OF PUPILS ATTENDING  
MAINTAINED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING NURSERY SCHOOLS)**

TABLE A — PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		SATISFACTORY		UNSATISFACTORY	
		No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)
1958 and later	99	98	98.99	1	1.01
1957	364	363	99.73	1	0.27
1956	312	312	100.00	—	—
1955	304	300	98.69	4	1.31
1954	312	309	99.04	3	0.96
1953	65	65	100.00	—	—
1952	376	372	98.94	4	1.06
1951	295	292	98.98	3	1.02
1950	281	275	97.87	6	2.13
1949	157	152	96.81	5	3.19
1948	71	70	98.59	1	1.41
1947 and earlier	529	516	97.54	13	2.46
<b>TOTAL</b>	<b>3165</b>	<b>3124</b>	<b>98.71</b>	<b>41</b>	<b>1.29</b>

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

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1958 and later	—	16	16
1957	1	38	39
1956	1	32	33
1955	6	37	42
1954	6	34	39
1953	2	12	14
1952	14	49	59
1951	14	30	42
1950	10	34	43
1949	11	22	33
1948	2	6	8
1947 and earlier	20	60	78
<b>TOTAL</b>	<b>87</b>	<b>370</b>	<b>446</b>



# TABLE C — OTHER INSPECTIONS

Number of Special Inspections	436
Number of Re-inspections	761
Total	<u>1197</u>

# TABLE D — INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	16,685
(b) Total number of individual pupils found to be infested	224
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—



**PART II — DEFECTS FOUND BY MEDICAL INSPECTION  
DURING THE YEAR.**

TABLE A — PERIODIC INSPECTIONS

DEFECT OR DISEASE	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
SKIN	21	6	31	3	84	13	136	22
EYES								
(a) Vision	2	20	22	26	63	86	87	132
(b) Squint	11	1	12	24	12	2	13	27
(c) Other	2	3	—	2	6	2	8	7
EARS								
(a) Hearing	1	15	—	3	3	25	4	43
(b) Otitis Media	4	9	—	1	3	13	7	23
(c) Other	1	2	1	1	1	1	3	4
Nose and Throat	12	53	6	5	23	40	41	98
Speech	4	18	—	3	8	13	12	34
Lymphatic Glands	1	12	—	—	1	11	2	23
Heart	—	11	1	2	1	15	2	28
Lungs	—	6	1	5	4	10	5	21
Developmental								
(a) Hernia	1	1	—	1	—	1	1	3
(b) Other	2	9	1	1	7	10	10	20
Orthopaedic								
(a) Posture	—	2	—	9	6	10	6	21
(b) Feet	14	38	4	14	19	38	37	90
(c) Other	2	21	8	8	9	26	19	55
Nervous System								
(a) Epilepsy	1	5	1	1	5	3	7	9
(b) Other	—	1	—	4	—	4	—	9
Psychological								
(a) Development	—	5	—	22	—	72	—	99
(b) Stability	6	48	2	15	12	78	20	141
Abdomen	3	2	4	3	5	20	12	25
Other	6	1	12	3	16	9	34	13

(T) — Number of children found to require treatment.

(O) — Number of children found to require observation.



TABLE B — SPECIAL INSPECTIONS

DEFECT OR DISEASE	SPECIAL INSPECTIONS	
	Pupils requiring Treatment	Pupils requiring Observation
SKIN	23	2
EYES		
(a) Vision	17	9
(b) Squint	1	2
(c) Other	8	—
EARS		
(a) Hearing	13	17
(b) Otitis Media	3	—
(c) Other	8	1
NOSE AND THROAT	6	2
SPEECH	2	1
LYMPHATIC GLANDS	—	1
HEART	—	1
LUNGS	4	—
DEVELOPMENTAL		
(a) Hernia	—	—
(b) Other	—	1
ORTHOPAEDIC		
(a) Posture	—	—
(b) Feet	7	3
(c) Other	2	1
NERVOUS SYSTEM		
(a) Epilepsy	—	—
(b) Other	1	—
PSYCHOLOGICAL		
(a) Development	14	11
(b) Stability	4	1
ABDOMEN	3	1
OTHER	44	2



**PART III — TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING NURSERY SCHOOLS).**

**TABLE A — EYE DISEASES, DEFECTIVE VISION & SQUINT**

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	22
Errors of refraction (including squint)	317
TOTAL	339
Number of pupils for whom spectacles were prescribed	125

**TABLE B — DISEASES AND DEFECTS OF EAR, NOSE AND THROAT**

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	10
(b) for adenoids and chronic tonsillitis	215
(c) for other nose and throat conditions	9
Received other forms of treatment	29
TOTAL	263
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1962	4
(b) in previous years	8

**TABLE C — ORTHOPAEDIC AND POSTURAL DEFECTS**

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	276
(b) Pupils treated at school for postural defects	6
TOTAL	282



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

	Number of cases known to have been treated
Ringworm—(a) Scalp ....	—
(b) Body ....	—
Scabies ....	7
Impetigo ....	4
Other skin diseases ....	178
TOTAL ....	189

TABLE E — CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics ....	50

TABLE F — SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists ....	162

TABLE G — OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments ....	216
(b) Pupils who received convalescent treatment under School Health Service arrangements ....	—
(c) Pupils who received B.C.G. vaccination (by Chest Physician) ....	9
(d) Pupils who completed courses of U.V.R. treatment ....	15
TOTAL ....	240

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

## (a) Dental and Orthodontic Work

(1) Number of pupils inspected by the Authority's Dental Officers:—

(i) At periodic inspections	....	7257	} Total (1)	....	7618
(ii) As specials	....	361			

(2) Number found to require treatment ..... 5038

(3) Number offered treatment ..... 2900

(4) Number actually treated ..... 1450

## (b) Dental Work other than Orthodontics

(1) Number of attendances made by pupils for treatment, excluding those recorded at (c) (i) below ..... 3934

(2) Half days devoted to:

(i) Periodic (School) inspection	....	71	} Total (2)	....	575
(ii) Treatment	....	504			

(3) Fillings

(i) Permanent teeth	....	2422	} Total (3)	....	2870
(ii) Temporary teeth	....	448			

(4) Number of teeth filled:

(i) Permanent teeth	....	2264	} Total (4)	....	2666
(ii) Temporary teeth	....	402			

(5) Extractions:

(i) Permanent teeth	....	278	} Total (5)	....	756
(ii) Temporary teeth	....	478			

(6) Administration of general anaesthetics for extraction ..... 361

(7) Number of pupils supplied with artificial teeth ..... 18

(8) Other operations:

(i) Permanent teeth	....	717	} Total (8)	....	1276
(ii) Temporary teeth	....	559			

## (c) Orthodontics

(i) Number of attendances made by pupils for orthodontic treatment	385
(ii) Half-days devoted to orthodontic treatment	*38
(iii) Cases commenced during the year	12
(iv) Cases brought forward from the previous year	22
(v) Cases completed during the year	6
(vi) Cases discontinued during the year	4
(vii) Number of pupils treated by means of appliances	34
(viii) Number of removable appliances fitted	22
(ix) Number of fixed appliances fitted	—

\*This figure is only approximate as very rarely is a full session spent solely on orthodontics









