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10. PARKS ROAD. OXFORD



City of York Education Committee

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

For the Year Ending 31st December, 1950

Councillor R. SCRUTON, Chairman.

H. OLDMAN, Chief Education Officer

School Clinic, Rougier Street, York 

INSTITUTE OF SOCIAL MEDICINE

10. PARKS ROAD, OXFORD

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To all who have contributed or otherwise helped in the compiling of it I under my sinceres thanks, especially to Dr. Catherine B. Crane,

Chief Education Officer, and his assettants to the teachers and last but not

wovided the material for this report.

Your obedient servant,

Senior Assistant School Medi

uly, 1951. chool Clinic,

3

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the report on the work of the School Health Service for the year ended 31st December, 1950.

It is with pleasure that I record the resumption of the School Dental Service under Mr. Graham Turner, L.D.S., who was appointed senior dental officer during the year.

Another development has been the holding of minor ailment clinics by the school nursing sisters in the medical rooms provided in the newly built schools. Figures of attendance since their opening have shown that this experiment has been justified both in saving the children's time and keeping the children off the roads going to the central clinic.

In order to economise in the use of fully qualified nursing staff, two nursing assistants were appointed to take the place of one school nursing sister who resigned. Both doctors and nursing sisters have been relieved of much clerical work by these two appointments.

The results of the first mass-radiography survey of the school leavers are given and will be seen to be satisfactory.

References will be found in this report to plans to foster a closer relationship between the general practitioners and the school health service, to difficulties experienced with the hospital service and to the rejection by the Education Committee of the recommendation of the Special and Social Services Sub-Committee to assist a school nursing sister to take her Health Visitor's Certificate.

From the statistics shown herein and from general impressions gained during the year, it is felt that the health of the York school child is being maintained.

To all who have contributed or otherwise helped in the compiling of this report I tender my sincerest thanks, especially to Dr. Catherine B. Crane, the Medical Officer of Health and School Medical Officer, to Mr. H. Oldman, the Chief Education Officer, and his assistants, to the teachers and last but not least to the staff of the School Clinic, whose splendid work during the year has provided the material for this report.

I am,

Your obedient servant,

F. B. SHEVLIN,

Senior Assistant School Medical Officer.

July, 1951. School Clinic, Rougier Street, York.

EDUCATION COMMITTEE

Chairman:

Mr. Councillor R. Scruton.

Vice-Chairman:

Alderman J. Hargrave, J.P.

Committee:

The Rt. Hon. The Lord Mayor (Alderman E. Harwood.)

Mr. Councillor G. T. Rogers.

Mr. Councillor G. S. Bellerby.

Mrs. Councillor I. G. Wightman, B.A.

Mr. Councillor W. Ward.

Mr. Councillor W. H. Darley.

Mr. Councillor J. P. Birch.

Mr. Councillor W. M. Brown.

Mr. Councillor R. A. Cattle.

Mrs. Councillor D. W. Ditcham.

Mr. Councillor C. H. K. Tye.

Mr. Councillor W. Usher.

Miss E. Netherwood, B.A.

The Rev. P. J. Lamb, B.A.

Miss H. C. Randall, B.Sc.

Mr. H. B. Marston, B.Sc., A.R.I.C.

Mr. R. W. Willsdon, J.P.

Councillor the Rev. R. V. Bainton,

M.A.

Rev. Fr. P. McAniff.

Chief Education Officer: H. Oldman, M.A.

Deputy Education Officer:
J. E. C. Thornton, M.B.E., M.A.

ANNUAL REPORT

of the

SCHOOL MEDICAL OFFICER

for the

YEAR ENDED 31st DECEMBER, 1950.

STAFF OF THE SCHOOL HEALTH SERVICE DURING 1950

School Medical Officer:

Miss C. B. Crane, M.B., B.S., D.P.H., Medical Officer of Health.

Senior Assistant School Medical Officer:

F. B. Shevlin, M.B., Ch.B.

Assistant School Medical Officers:

G. F. Boyle, M.B., Ch.B., D.P.H.

Mrs. H. J. Sikorska, M.D. (temporary-commenced 17.4.50).

Ophthalmic Consultant:

J. Magnus, M.D., F.R.C.S. (Ed.), D.O.M.S.

Orthopædic Consultant:

H. L. Crockatt, M.B., Ch.B. (Surgical Superintendent, The Adela Shaw Orthopædic Hospital, Kirbymoorside).

Senior Dental Officer:

G. Turner, L.D.S. (commenced 28.4.50).

Assistant Dental Officer:

Mrs. M. B. Barnitt, L.D.S. (commenced 13.3.50-part time).

School Nursing Sisters:

Mrs. S. Dalton, S.R.N., S.C.M.

Miss E. Stoddart, S.R.N., S.C.M.

Miss R. E. Rowntree, S.R.N.

Miss M. Chetwynd, S.R.N.

Miss M. Locker, S.R.F.N. (Retired 30.6.50.).

Miss B. G. Simpson, S.R.N., S.C.M. (commenced 1.4.50).

School Nursing Sister in charge of orthopædics:

Miss B. M. Hall, S.R.N., S.C.M. (Orthopædic certificate).

Dental Surgery Assistants:-

Miss R. E. Glew (Dental Nurses' Certificate). Miss C. M. Haycock (commenced 30.5.50).

Speech Therapist:

Mrs. C. J. Capes, A.T.S.D. (London) commenced Jan., 1950.

Organisers of Physical Training:

Miss O. M. Smith.

G. Rees.

Chief Clerk:

Miss J. Masterman.

General Clerks:

Miss M. Sowray.

Miss H. F. Milburn.

Miss D. Blaker.

Miss R. E. Arrowsmith (commenced 8.8.50).

Clerical Assistants to Medical Officers:-

Miss A. Johnson (commenced 21.8.50).

Miss L. Mason (commenced 30.8.50).

STAFF OF CHILD GUIDANCE CLINIC.

Psychiatrist:

Dr. Irene E. Turgel, M.D.

Psychologist:

Miss Edna M. Johns, M.A., A.R.C.M., C.T.

Social Worker:

Miss Ann Black, Diploma Social Science.

Secretary:

Miss Mary Tindall.

CHANGES IN STAFF

Dr. Halina-Jastryebska Sikorska, M.D. (Warsaw), was appointed a temporary full-time assistant school medical officer for one year and commenced duty on 17th April, 1950. Before this date part-time medical officers had been employed on a sessional basis. Miss B. G. Simpson, S.R.N., S.C.M., was appointed school nursing sister and commenced duty on 1st April. Miss M. Locker, S.R.F.N., retired on the 30th June after twenty-five years' service in the School Health Department and nearly forty years' service in the York Corporation's Health Services generally. We wish her many happy days.

It was decided on Miss Locker's retirement not to appoint another fully qualified nurse but to have two nursing assistants, who would do all the weighing and measuring of the children in schools and relieve both doctors and school nursing sisters of much of their clerical work. Miss A. Johnson and Miss L. Mason commenced on these duties in August, 1950. Mrs. C. J. Capes, A.T.S.D. (London), who had formerly been in the employ of the Education Committee, made a welcome return to York, and giving six sessions a week, enabled the Speech-therapy clinic to be re-opened in January, 1950.

Miss R. E. Arrowsmith was appointed as clerk in the office and commenced duty on 8th August to succeed Mr. B. J. Dean, who had tended his resignation originally on 31st December, 1949, but continued in his post until 31st January, 1950, when he entered His Majesty's Forces. The Dental Service was resumed in March by the appointment of Mrs. M. B. Barnitt, as a temporary part-time dental officer, giving eight sessions a week. Mr. G. Turner had been appointed Senior Dental Officer in January but was unable to take up his duties until 28th April. York has been fortunate to secure the services of these two dental surgeons at a time when financial considerations are inducing numbers of school dentists to leave the service. Further advertisements have failed to attract other applicants for a third vacant post. Miss C. M. Haycock was appointed as a second dental attendant and took up duty on 30th May.

GENERAL.

Regional Hospital Board.

The Leeds Regional Hospital Board notified the Authority that contracts had been concluded with Mr. H. L. Crockatt, the Orthopædic Consultant, and Mr. J. Magnus, the Ophthalmic Consultant, to hold specialist clinics for York school children. Children needing to see other consultants are referred to hospital out-patient departments through their own doctors or through school medical officers, with the exception of those sent to the Child Guidance Clinic, whose psychiatrist is a part-time officer in the employment of the Education Authority.

From 1st April the School Eye Service was transferred from the York Executive Council to the Regional Hospital Board. This change has made no difference to the working of the clinic as the Senior Assistant School Medical Officer who is on the official list of ophthalmic medical practitioners, continues to conduct the Eye Clinic, and a portion of his salary is refunded to the Corporation by the Regional Hospital Board. Prior to the transfer the York Executive Council had paid for the majority of repairs to schoolchildren's glasses. When the Regional Hospital Board took over, the Education Authority was asked to accept responsibility for the cost of replacement and repairs of schoolchildren's glasses in cases of negligence. A letter asking what machinery was to be set up to determine negligence in a schoolchild failed to elicit any reply during 1950. Meanwhile the standard frames issued free to schoolchildren were revised in October and parents were being made to pay for repairs to glasses which although issued free were no longer of the standard

type. A letter written again to the Regional Hospital Board drawing their attention to this hardship caused a revision of the Form O.S.C. 10 issued to schoolchildren when repairs are required and the new forms were received on 28th December, 1950. Repairs to these non-standard frames originally issued free are now carried out without cost to the parents but only as long as spare parts are available for the frames. In the revision of the new Form O.S.C. 10 the School Health Department was consulted with the result that some of the faults of the old form, such as the multiple signatures and the omission of the name of the school have been remedied. The Hospital Management Committee following our request also now informs us when schoolchildren, whose spectacles have been ordered through the School Clinic, receive them. Although there has been a general improvement in respect of the time taken to make up children's prescriptions for spectacles (usually three weeks) a child needing spectacles for mixed astigmatism may still have to wait for a year.

For the year ending 31st March, 1951, the Senior Assistant School Medical Officer was appointed to the Technical Advisory Panel on Ophthalmology of the Leeds Regional Hospital Board.

In two respects the Regional Hospital Board has disappointed us during 1950 but the problems appear to be national as well as regional. I refer to (1) the sending of hospital reports on schoolchildren investigated or treated at the different hospitals, and (2) the long lists of children waiting for inpatient treatment in the E.N.T. Departments. First with regard to hospital reports, in 1948 when the Local Authority paid for the hospital treatment of those schoolchildren in respect of whom a report had been received, 2,576 reports were received. In 1949 when the Local Authorities were relieved of this financial burden by the N.H.S. Act the number decreased to 1,378 whilst last year it had further dwindled to 873. There never has been any question of professional confidence involved in the matter; it is just that nobody in the hospital service has made himself responsible for seeing that the reports are sent. It is impossible for school medical officers to carry out in a proper manner their statutory duties as long as these reports are not forthcoming.

With regard to E.N.T. difficulties a child needing to consult a specialist has to wait six or more weeks before being seen at hospital (unless for some acute condition) and then wait for a period of nine to twelve months before being admitted to hospital for treatment. These long delays although there are several good reasons, such as the epidemic of poliomyelitis, to explain them, cause hardship in some cases so that conscientious parents sometimes to avoid this delay have recourse to devious means to scrape the money together to have operative treatment carried out in private nursing homes. An enquiry made to the hospital authority on 1st November, 1950, elicited the fact that 445 children, who had been examined by the E.N.T. Specialists, were awaiting in-patient treatment. The average number of children being operated on each week at that time was 12.

Following the resolution passed by the British Medical Association concerning the referral of schoolchildren to hospital consultants only through their own private practitioners or with their consent, a system was adopted in York by which a notice is sent to the private practitioner of each child found with a defect needing hospital investigation or treatment, giving the doctors an opportunity of expressing a wish to make the arrangement himself after examining the child. If no reply is received within a reasonable time (usually three days) an appointment is made by the School Health Department. In this way, the child is sure of receiving proper attention and the private doctor is given the opportunity of dealing with his own patient if he so desires.

Some disappointment has been felt at the Committee's decision not to give a greater proportion of financial aid to school nursing sisters to train as Health Visitors than they do to other types of applicants training for professional qualifications. This certificate is the desirable qualification as laid down in School Health Regulations for a school nursing sister.

During the year arrangements have been made with the North Riding Authority so that schoolchildren living in York but outside the city boundary and attending schools outside the jurisdiction of the York Education Committee may attend the School Clinic in York for treatment. Furthermore the North Riding Authority now holds a monthly orthopædic clinic, for its own children in the York School Clinic. These amicable arrangements are a great boon to the parents of children living and attending schools just outside the city boundary. Schoolchildren living outside the city boundary but attending schools under the jurisdiction of the York Education Committee have always been allowed to receive treatment from the York School Health Department. A proposal of the School Medical Officer that all York teachers be asked to submit to an X-ray examination of the chest on appointment and that routine radiography of all members of school staffs be carried out at regular intervals was not considered desirable by the Education Committee as the Ministry of Education did not require such an examination in their present arrangements for the recognition and approval of teachers. It was decided not to take any further action in the matter for the time being.

A new development in connection with a handicapped child occurred during the year when the Education Committee gave financial assistance to the mother of a deaf-mute to enable her to travel to Manchester to attend a Parents Class held in the University Department for the Deaf. This class is held with a view to the mother giving home tuition to her child until admission is gained to a Residential School for the Deaf.

In view of the large percentage of children found at school medical inspections with minor deformities of the toes and feet caused by ill fitting footwear, it was decided to present a copy of the leaflet "Children's Shoes" issued by the British Boot, Shoe and Allied Trades Research Association to each parent at the first medical inspection carried out on the entrants to the

primary schools. The good advice given in the leaflet concerning the proper fitting of children's shoes will, it is hoped, prevent in the future so many children having crooked and bent toes as well as more serious foot troubles.

Following changes in the regulations of the National Health Service concerning travelling expenses of children going to hospital for treatment or investigation, the Education Committee has agreed to act upon the powers conferred upon them under Section 48 (4) of the Education Act to resume the practice of meeting these expenses where these are not met by the hospital service.

During April the two school nursing sisters Rowntree and Chetwynd attended a four day course at St. Thomas' Hospital, London, on "Tuberculosis in children and the use of B.C.G."

Two other school nursing sisters, Stoddart and Newton, attended a two day course on Health Education given at Leeds in March.

Drs. Boyle and Shevlin attended a demonstration on 31st July, at Leeds, on the latest type of Audiometer produced by the Western Electric Company.

On 8th November, Dr. Shevlin gave a talk to the Parent-Teacher Association of the St. Paul's Nursery School and on 16th November a lecture to a student-teacher class of St. John's Training College on the work of the School Health Department.

HYGIENE IN SCHOOLS

Sanitary Accommodation.

Following the report on sanitary accommodation in all schools prepared for the Education Committee in 1949, the following action has been taken in the year under review to deal with the more serious cases of unsatisfactory sanitary accommodation.

St. Barnabas' C.E. (Controlled) Primary School:

Abolition of all existing accommodation and construction of one new block of 3 W.C.s and 5 urinal stalls and one block of 5 W.C.s and 3 urinal stalls.

St. Thomas' C.E. (Controlled) Primary School:

Abolition of all existing accommodation and construction of one block of 13 W.C.s and 5 urinal stalls.

St. John's C.E. (Aided) Secondary School:

Removal of existing obsolete accommodation and provision by the Managers of the School of one block of 7 W.C.s and 9 urinal stalls previously used by St. John's College.

The Technical College:

Minor works of ventilation.

Washing Facilities in Schools.

In September, 1950, the Education Committee called for a report on washing facilities in all schools except the new ones built since 1945, including voluntary schools. This report which will cover the provision of hand basins and the supply of hot and cold water and other ablution facilities, is now being prepared.

New Buildings and General Maintenance.

The new Carr County Junior School was taken fully into use in September, 1950 and the new Burnholme County Secondary Modern School at the beginning of the Summer Term, 1950. Both these new schools which have been built in full accordance with the Buildings Regulations of the Ministry of Education, include the required amount of cloakroom, sanitary and medical accommodation. Consequent upon the removal of the Tang Hall Secondary School to the new buildings at Burnholme, the Tang Hall Avenue and Glen Primary Schools have been reorganised to form separate Junior and Infants' Schools and now share the accommodation in the Tang Hall School Building.

As a result of the additional school places provided during the year, there is no longer any class containing fifty children in York.

Normal repair and maintenance work of school premises including painting decorating and reflooring, have proceeded as far as availability of labour and materials have allowed.

HEALTH EDUCATION.

After the appointment of a part-time Health Officer by the Health Committee it was decided by way of experiment to show the film "Unwanted Guests" to some of the senior girls' departments in the city where the incidence of head infestation was usually highest. The film which deals with the subject of vermin in the hair, was shown about a week before the usual head inspection carried out by the school nursing sisters, and was followed in each lepartment by a talk from one of the nursing sisters. At the subsequent head inspection only 8 girls were found with verminous heads in one department instead of the usual 40 to 50, and in another 13 instead of the usual 25.

It was hoped to develop this side of the School Health Department's activities and a preview of Health Education Films was given to a representative gathering of members of the Health and Education Committees on 1st March. Unfortunately Mr. Cooke, the Health Education Officer, was transferred to the Civil Defence Department and no successor has been appointed to take his place.

SCHOOL MEALS SERVICE.

Owing to the energetic action taken by the York Education Committee, the whole programme of building school kitchens and dining rooms was almost completed when the Ministry suspended the school meals programme. Some of the older kitchens and dining rooms have been repainted during the year.

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CO-ORDINATION.

The Corporation Health Services are co-ordinated under Dr. Catherine Crane, who is Medical Officer of Health, School Medical Officer and Medical Officer to the Children and Welfare Committees.

NUMBER OF CHILDREN ON SCHOOL REGISTERS IN DECEMBER, 1950.

Primary, Secondary Modern and Special Schools: Children over five years of age Children under five years of age	1950 12,976 677	1949. 12,926 600
Grammar Schools:	13,653 1,913	13,526 1,924
Technical College (Full-time) School of Art (Full-time)	15,566 172 41	15,450 142 32
on air School and the Special School for educational	15,779	15,624
Percentage of Attendance:		NI I
Children over five years of age	92.1	90.4
Children under five years of age	81.5	81.1

REVIEW OF PERCENTAGE ATTENDANCE.

The gradual improvement (with the exception of the war year 1940) in the percentage attendance of children at school shown below at ten-yearly intervals is an index of the improving health of the schoolchild. Whilst it is felt that this percentage can be increased still more by the provision of new houses, new schools and more attention to health education, the figure of 92% for an all-the-year average must be considered very satisfactory.

1890	80%
1900	85%
1910	88%
1920	88%
1930	90%
1940	86%
1950	92%

MEDICAL INSPECTION.

The medical inspection of children at school has been carried out on the same age groups as in previous years, viz:—

- (a) entrants to the infant departments (usually about 5 years).
- (b) entrants to the junior departments (usually about 8 years).
- (c) leavers from the junior departments (usually about 11 years).
- (d) leavers from the secondary departments (usually about 14 years).

Thus each schoolchild comes under review every three years. In addition children have been examined at the request of parents or teachers irrespective of their age where there existed any anxiety concerning their health.

Children found at previous inspections with defects needing to be kept under supervision or to be given treatment have been re-examined to see if the defect has been remedied.

During the year 6,639 children have been medically inspected in their respective age groups compared with 5,355 in the previous year. The number of special inspections was 3,524 and the number of re-inspections 4,332.

The number of children examined at each session has remained at twenty, giving the medical officer six minutes to examine each child and record his findings.

Besides the primary and secondary modern schools, children have been medically inspected in Grammar Schools, the Technical College, the School of Art, the Open-air School and the Special School for educationally-subnormal children.

GENERAL CONDITION.

The general assessment of the physical condition of the children inspected during the year compares favourably with that of the previous year.

The percentages are: -

Category	1950.	1949
A (Excellent)	45.1%	38.6%
B (Satisfactory)	50.9%	57.4%
C (Poor)	4.0%	4.0%

Whilst it is good to note that 96% of the children were considered satisfactory in their physical development, there remains the one child or sometimes more in every class for whom perhaps something more could be done in the way of improving their environment, their feeding or their way of life.

AVERAGE HEIGHTS AND WEIGHTS.

The average heights and weights of the children inspected during 1950 are here given in tabular form. There are some variations compared to last year, gains in some groups, losses in others but on the whole the averages are maintained.

AVERAGE HEIGHTS AND WEIGHTS OF CHILDREN ATTENDING PRIMARY AND SECONDARY MODERN SCHOOLS, 1950.

on division	BOYS	3	APPONTE	GIRLS	ANITES EN	
Number Examined	Average Height	Average Weight	Age	Number Examined	Average Height	Average Weight
3	Ft. Ins. 3 2.83	St. lbs. 2 11.75	3	4	Ft. Ins. 3 2.25	St. lbs. 2 7.00
202	3 5.60	2 12.36	4	168	3 4.91	2 10.72
532	3 7.09	3 1.00	5	531	3 6.85	3 0.08
130	3 9.29	3 5.67	6	121	3 8.60	3 3.45
32	3 11.91	3 11.59	7	35	4 0.04	3 10.04
572	4 1.80	4 2.26	8	538	4 1.57	4 0.37
85	4 3.23	4 6.93	9	69	4 2.76	4 4.70
272	4 6.05	5 1.82	10	271	4 5.83	4 13.98
396	4 5.99	5 3.62	11	336	4 7.21	5 5.67
22	4 7.57	5 10.63	12	19	4 8.86	6 5.83
5 mm 15 bm	4 10.90	6 4.87	13	27	5 0.37	6 13.94
464	5 2.20	7 7.66	14	406	5 1.97	7 11.25
67	5 3.35	8 0.20	15	65	5 2.53	8 3.35

AVERAGE HEIGHTS AND WEIGHTS OF CHILDREN ATTENDING GRAMMAR SCHOOLS, 1950.

during the	100	BOYS	5	di medi	at 7 cha	discovered	GIF	RLS	idh	10 dinos
Number Examined		verage leight		verage Veight	Age	Number Examined		verage Ieight	A V	verage Veight
1	Ft.	ins. 11.00	St. 5	lbs. 10.00	10	CHIEST SOIL	Ft.	ins.	St.	lbs.
44	4	9.38	5	11.34	11	31	4	10.02	6	1.69
6	4	10.08	5	13.83	12	50	4	11.45	6	7.83
150	5	1.18	7	3.79	13	167	5	1.25	7	7.52
12	5	3.56	7	10.38	14	43	5	3.02	8	2.10
176	5	6.12	8	11.57	15	238	5	3.24	8	9.41
10	5	8.85	9	10.95	16	51	5	3.41	8	8.96
43	5	9.09	10	5.90	17	48	5	4.10	8	11.31
2	5	9.75	10	5.13	18	2	5	4.25	8	8.25
-		_		-	19	1	5	3.25	8	12.50

FINDINGS OF MEDICAL INSPECTIONS IN PRIMARY AND SECONDARY SCHOOLS.

(Secondary Schools include Modern, Grammar, and Technical.)

During the year periodic medical inspections have been made of 1,781 entrants, 1,324 leavers from the primary schools and 1,151 leavers from the secondary schools. Other periodic medical inspections including those of the 8 year old group, numbered 2,383. Altogether 6,639 children were medically inspected.

As a result of these school medical inspections 22.9% of the children inspected were found with defects (excluding dental disease and infestation with vermin) that needed treatment. Of these 5.2% required treatment for defective vision excluding squint. The biggest percentage (26%) of children found with defects needing treatment was found amongst the other periodic inspections most of which were carried out on the 8 year olds.

VISION.

All children including the entrants now have their distant vision tested at school medical inspections. The near vision is tested from the age of ten years onwards. During the year 5.2% of those examined were found to need ophthalmic treatment, whilst 5.8% had been seen already and only needed keeping under supervision. When another 1.5% with squints is added to this total the percentage of schoolchildren needing ophthalmic care works out at 12.5% (12.8% last year).

SQUINT.

101 children were discovered at school medical inspections during the year with squints, 44 of whom were entrants. Two-thirds of those inspected already had or were receiving treatment for the condition; the remaining third included children coming into the area from other authorities. Only 13 entrants were found needing treatment.

EXTERNAL EYE DISEASES.

Of 56 children found with external disease of the eye, only 22 needed treatment. 15 of these were for blepharitis of a mild type. Only one child was seen with a corneal nebula but no treatment was required.

DEFECTIVE COLOUR VISION.

51 children were found with defective colour vision as a result of testing them with the Ishihara tests. 37 were red-green blind: 7 were red blind and 7 green blind.

EAR DISEASE AND DEAFNESS.

Of 245 children found with ear trouble, 32 needed treatment for middle ear disease and 22 for deafness. 118 were already in receipt of treatment or

only needed supervision following treatment, the majority of whom had had aural discharges. Of the remainder requiring treatment 57 had wax in their ears causing slight deafness.

AUDIOMETRIC TESTING

Dr. Sikorska investigated the hearing of some 300 children by means of a gramophone audiometer. Of these 35 had to be retested not having reached a satisfactory standard of hearing in one or both ears. 12 children were ultimately referred for treatment to the Ear Clinic.

TONSILS AND ADENOIDS.

677 children seen at school medical inspections had enlarged tonsils or adenoids or both but only 87 (i.e., 1.3%) of those examined were considered to need treatment. During 1950 the number of children reported as having been operated on in hospital for diseased tonsils and adenoids was 155 (255 in 1947: 271 in 1948) whilst some 400 to 500 were awaiting admission at the end of the year.

ENLARGED CERVICAL GLANDS.

597 children had enlarged glands in the neck but only in five cases was the enlargement sufficient to warrent any specific treatment for the condition.

ENURESIS.

There were 95 children seen in schools during the year whose parents stated that they were bed-wetters. 7 of these attended Grammar Schools and 5 Secondary Modern Schools. Twice as many boys as girls suffered from this complaint. 1.8% of the entrants to the primary schools were enuretics.

SPEECH.

6 of the 17 children found with speech defects who were not receiving treatment were stammerers: the other 11 had defective articulation of varying types. 47 other children were already receiving treatment or only needed observation.

RHEUMATISM.

No children were found at school medical inspections suffering from rheumatism in any of its various forms and only 12 medical certificates were received during the whole of the year from general practitioners with diagnoses of rheumatism.

From hospital, reports were received in respect of three children, only one of whom was an in-patient. When we compare these figures with those of 1936 the earliest year when figures for rheumatism are given in the Annual Reports during which year 28 cases of chorea and 68 cases of rheumatism

amongst schoolchildren were notified, it would appear that acute rheumatism is another disease that is gradually disappearing with the improvement in the general health and environment of the school child.

HEART DISEASE.

Of 12 children referred for heart trouble from school inspections, only five were thought by the consultant cardiologist to have organic disease—three with mitral valve disease and two with congenital heart trouble.

37 other children with organic disease of the heart were seen but these were already under supervision.

DISEASES OF THE LUNGS.

104 of the 382 children found with disease of the lungs were in need of treatment, 71 for bronchitis and 16 of the remaining 33 for asthma.

Altogether 53 asthmatics were seen at school medical inspections during the year. Of seven children seen with bronchiectasis only two needed treatment.

TUBERCULOSIS.

Only four children were referred for investigation direct from school inspections because of suspected tubercular infection but during the year fourteen schoolchildren have been officially notified as suffering from tuberculosis—ten of the lungs, two of the glands, one of the hip joint, one of the tissues of the brain. Although these numbers are small compared to the school population, the incidence of this disease has increased during the last few years no doubt due in part to the better facilities for its early diagnosis. With the introduction of the B.C.G. vaccination it is hoped that the scourge of tuberculosis may be banished as effectively as was diphtheria after the introduction of immunisation.

DEFORMITIES.

338 children were discovered with some degree of flat foot of whom 204 were thought to need treatment. Other deformities included Kyphosis (6) scoliosis (9) and lordosis (1).

SCABIES.

Seven children were found at school medical inspections suffering from scabies.

During the whole year only 13 children were treated for scabies at the cleansing centre conducted by the Health Committee.

SKIN DISEASES.

412 children had skin disease when inspected in school. No case of ringworm of the scalp was found and only five cases of ringworm of the body that needed treatment. There were 14 cases of impetigo. The biggest percentage of these skin diseases was due to epidermophytosis between the toes (i.e., athlete's foot) which is very common amongst adolescent boys and girls.

Warts and acne accounted for most of the remainder. In all there were thirty different skin diseases noted.

VACCINATION.

Thirty-nine per cent of the children seen at school medical inspections had been vaccinated. Amongst the different age groups the percentages were:—

Entrants to Primary Schools	 	46.2%
Eight year olds	 	37.2%
Leavers from Primary Schools	 	38.3%
Leavers from Secondary Schools	 	34.8%
Pupils at Grammar Schools	 	39.6%

IMMUNISATION.

Seventy-nine per cent of all children medically inspected during the year were reported to be immunised against diphtheria. Amongst the different groups the percentages were:—

Entrants to Primary Schools	***		74.8%
Eight year olds			79.3%
Leavers from Primary Schools	1551		79.1%
Leavers from Secondary Schools	*****		76.6%
Pupils at Grammar Schools		5	86.8%

PARENTS OR GUARDIANS PRESENT.

The percentage of parents or guardians who attended the school medical inspection of their children during the year was 57.8%. For the different groups the percentages were:—

Entrants to Primary Schools			87.7%
Eight year olds			81.7%
Leavers from Primary Schools			73.4%
Leavers from Secondary Schools			25.9%
Pupils at Grammar Schools	odat	bound	20.2%

NURSERY SCHOOLS.

The accommodation in the two nursery schools under the jurisdiction of the Education Committee remains at 70. The demand for places is still heavy. However, the number of children under five years of age attending classes in ordinary primary schools in December, 1950, was 677 compared with 600 in the previous year. Children in the nursery schools besides getting the usual bottle of milk in school, receive cod liver oil and orange juice.

UNCLEANLINESS AND VERMINOUS CONDITIONS.

Although the number of schoolchildren with vermin in their hair found at head inspections by the school nursing sisters was almost the same as in the previous year, the number of girls showed a decrease whilst the number of boys an increase.

In view of the increase in the number of schoolchildren now attending school the percentage of children with dirty heads declined to 4.7% compared to 5.5% in the previous year.

As the presence of one nit causes a child's hair to be counted as verminous, the figure of 4.7% really gives a worse picture than the situation deserves for this percentage is the result of over six visits being paid to each department during the year for the special purpose of examining heads.

Where the co-operation of the parent is to be relied upon, D.D.T. Hair Emulsion is issued free to help to keep a child's hair free from infestation.

The following figures throw some light on this problem of uncleanliness amongst schoolchildren:—

eight times

Amongst the girls:

2	73	were	found	to	be	verminous	once
1	74	,,	,,	,,	,,	,,	twice
	97	,,	,,	,,	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	three times
	31	,,	,,	,,	,,	,,	four times
	16	,,	,,	,,	,,	,,	five times
	6	,,	,,	,,	,,	AIG, AU	six times
	1	55	,,	,,	,,	***************************************	seven times

599 (663)

Amongst the boys:

75	were	found	to	be	verminous	once
----	------	-------	----	----	-----------	------

52	,,	,,,	,,	,,	,,	twice
12	,,	,,	,,	1,00	H ,,	three times
4	,,	,,	1,	"	,,	four times
4	,,	,,	,,	,,	,, 05	five times
9						civ times

1 ,, seven times

150 (94)

THE OPEN AIR SCHOOL.

Report by Dr. G. Boyle.

The Open Air School is a special type of day school where delicate children are educated in a healthy environment by means of a special regime.

As many of the children are debilitated special stress is placed upon the school meals, which are cooked and served on the premises, and take the form of dinner and tea, with extra milk and vitamin supplements daily.

The class rooms are airy and well ventilated and classes are conducted out of doors in favourable weather.

Rest is important in order to avoid over-fatigue, and children have a period of compulsory rest of forty-five minutes after dinner. Special buses convey the pupils to and from the school. The children are medically examined every term, the school nurse visits twice weekly, and the school medical officer once weekly.

Children are transferred to ordinary school as soon as their condition improves.

The absence of the competitive element and the small numbers in each class produce a favourable educational environment for children who may be backward owing to previous irregular school attendance.

notice it master already on the staffs A am indeb	Boys.	Girls.	Total.
Number of children in attendance on first day	,		
of term, 1950	. 49	44	93
Total admissions during year	. 13	14	27
Total number discharged during the year	. 16	9	25
Types of cases.	Boys.	Girls.	Total.
General Debility	. 30	32	62
Chronic Respiratory Infection	. 15	8	23
Surgical Tuberculosis	. 7	7	14
Heart Disease	. 2	2	4
Cerebral Palsies	. 2	6	8
Asthma	. 5	as afferd	6
Nervous Diseases	. 1	1	2
Deformities	loymant	due by	unn 1
		DIV WOLKE	Mast .
Totals	. 62	58	12"

The term "general debility" included the following:-

- (i) Children suffering from malnutrition.
- (ii) Convalescents from debilitating diseases.
- (iii) Delicate and immature children.

Eight children were supplied with free clothing from the H. R. Morrell fund during the year, apart from cases dealt with under Section 5 of the Act of 1948.

CLASS FOR THE PARTIALLY-SIGHTED.

This class is accommodated in the Open-air School. The 8 boys and 2 girls, which comprise the class, have the benefit of special illumination, special furniture as well as the special mounted, adjustable lenses, referred to in last year's report, which enable the senior children to use ordinary text books without detriment to their vision. They receive an ophthalmic examination once a year or oftener if necessary.

FULFORD ROAD SPECIAL SCHOOL (E.S.N.).

The number of children at this school at the end of the year was 96—62 boys and 34 girls.

Ten boys and nine girls were admitted during the year and nine boys and five girls discharged.

The number of notifications to the Local Authority during 1950 totalled 17, of which 10 were under Sub-section 3, para. 57 of the Education Act, 1944, and 7 under Sub-section 5.

Mr. T. L. Cole, B.A., the headmaster of the school resigned his post in August, 1950, on his appointment as headmaster of a residential special school (E.S.N.) under the Lancashire Education Committee, to be succeeded by Mr. L. Wareham, the handicraft master already on the staff. I am indebted to the new headmaster for the following information concerning the after careers of the children who left school during the year.

CAREERS OF SCHOOL LEAVERS, 1950.

Boys.			Girls.
Salvage workers		2	Laundry worker 1
Laundry worker		1	Bakehouse assistant 2
Errand boy		1	Factory worker 1
Lift boy		1	Left York 1
Farm worker		1	
Gardening assistant	***	1	
At Home		1	
Unfit for employment	***	1	
Factory worker	***	1	

HANDICAPPED CHILDREN.

The number of York school children, who were known to be receiving special educational or medical treatment in December, 1950, as handicapped children are listed as follows:—

Blind. 2 boys and 4 girls were in residential schools for the blind. There is nobody awaiting admission.

Partially sighted. 8 boys and 2 girls attend the day class for partially sighted children. This class can accommodate more children if required.

Deaf. There were 17 children (6 boys and 11 girls) in residential schools for the deaf at the end of the year.

Partially deaf. As far as is known only two schoolchildren are using hearing aids and attending ordinary schools. There are no children attending classes or schools for the partially deaf and none awaiting admission.

Delicate. There were 44 boys and 51 girls making 95 children altogether attending the Day Special School (Del.) in York. There were a few vacancies in this school in December.

Diabetic. Four children with diabetes attend ordinary schools.

Educationally subnormal. 62 boys and 34 girls were in attendance at the York Day Special School (E.S.N.) at the end of the year. In addition five children (3 boys and 2 girls) were in residential schools (E.S.N.) and four children (3 boys and 1 girl) were awaiting admission. 14 of the children in the Day Special School (E.S.N.) belonged to other authorities, ten to the North Riding and 4 to the West Riding Education Committees.

Epileptic. One girl with pyknolepsy is unable to attend school because of the frequency of her fits. She receives home tuition. Other epileptic children (23 in number) receive medical treatment from their own doctors and attend ordinary schools.

Maladjusted. There were 2 boys in residential schools for maladjusted children and one boy awaiting admission.

Physically handicapped children. In the following tables compiled at the request of the Ministry of Education, it will be seen that there were 151 handicapped children in York in 1950 equivalent to about 1% of the school population.

PHYSICALLY HANDICAPPED CHILDREN

Population 5—16 years 15,000+ TABLE I

Area - YORK C.B.

1		Top I	asy class	Total 20 20 118 118 129 120 120 120 120 120 120 120 120 120 120	101
1		Totale	TOTAL STATE OF THE	Girls 9 12 13 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0/
-	ido	en i	BICKETTON	Boys 12 1 1 1 1 1 2 2 8 8 8 8 8 8 8 8 8 8 8	10
1		OD	having Home aching	Girls - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	7
-		ome	Not having Home Teaching	8 1 1 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-
	S.	At Home	ring me hing	Sig	
4	-16 years		Having Home Teaching	Boys	-
-	ages 5	dential	ling ital	Girls	
	No. of Children ages 5—16 years. At Residential Special Schools Havin Home Schools Teachin		Hosp Scho	Boys	
				Girls 1 2 2 2 2 2 2 2 2 2	
	imo	At Day Special Schools		2 - -	
	Lry ols	Girls			
	Far	At Ordinary Schools		B 20 8 - 4	
1	Kaq	in E.	worke	hetosis)	
	DEFECTS			tal Heart thic Heart hilia Palsy(including athetosis) elitis r Dystrophy r Atrophy ida celitis phalus so Ossium oplasia Typhosis Disease nts and Hands and Hands and Hands formities— and Hands form Hips and Hands form Hips form	
			mber o	al Heart nilia nilia Palsy(includ litis Dystrophy Atrophy Atrophy da clitis phalus pyhosis yphosis al Dislocatic al Dislocatic al Dislocatic al Deformiti mod Hands nd Feet ions—Legs Arms coid Arthriti ing Still's D thritis s Ataxia Coeliac Dise Hodgkins D Sub-acute L Diabetes TOT	
			4 2	Congenital Heart Rheumatic Heart Haemophilia Cerebral Palsy(including athetosis) Poliomyelitis Muscular Atrophy Muscular Atrophy Spinabifida Osteomyelitis Hydrocephalus Fragilitas Ossium Achondroplasia Arthrogryphosis Perthe's Disease T.B. Joints Talipes Congenital Dislocation Hips Congenital Deformities— Arms and Hands Legs and Feet Amputations—Legs Arms Rheumatoid Arthritis (including Still's Disease) Septic Arthritis Fractured Skull Brain Tumour Friedrich's Ataxia Others—Coeliac Disease Sub-acute Liver Necrosis Diabetes. TOTAL	
				Con	1

TABLE 11

Number of Physically Handicapped children at home or at ordinary schools who are waiting admission to:-

			Residential	Residential P.H. Schools		de la constante de la constant		
ау Р.Н.	Day P.H. Schools.*	For seriously children: e.g. Hins	usly crippled Hinswick Hall		For less seriously crippled children: e.g., Victoria Home, Bournemouth	Speech.	Totals	only to
Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Total
7	bjeboc 87. 1	23		1		4	-	0

* Physically Handicapped children who are sent to Day Open-Air schools because there are no accessible Day P.H. schools should be included under this heading.

TABLE III

Total	2
Girls	5
Boys	
How many and the bown in the bown work	Number of seriously P.H. children for whom home teaching is the best provision (excluding those who are waiting admission to Special schools)

TABLE IV

Total	3
Girls	186
Boys	2
	:
	of Physically Handicapped children in bed at home
	Number

TABLE V

1	-	Total	111	2	11	
	ACC.	1	10	- 1-3	10	9
	Totals	Girls	111	1181	111	
	CHA	Boys	111	67	111	
	* For whom Home Teaching is best provision	Girls	1-1-1	1 1	111	
	* For whom Home Teaching is best provision	Boys	111	11 1	11	I I I I I I I I I I I I I I I I I I I
	dential ools	Girls	i biograph	dondo	-1-1	
	Waiting admission to Residential Schools	Boys	Sold at 1	67	11	
	y in ential chools	Girls	NEW TITLE	11 8	11	
	Already in Residential P.H. Schools	Boys	Part I	I Land	-1,1	
	3 3			1 29	ji.i	er
			22 ::	- 200	::	oth
			dder vel	Self propelled Push Chairs		hted af one
			-Bladd Bowel Both	proj h Ch ttche	ji	y sig
			ow many have incontinence of:—Bladder Bowel Both	chair cases:—Self propelled Push Chairs ow many with crutches or two sticks	S.N.	P.H. & Blind P.H. & Partially sighted P.H. & Deaf P.H. & Partially Deaf P.H. & more than one other defect
6			r hav	r are ses:- r wit	Ep Ep	H. & Blind H. & Blind H. & Parti H. & Parti H. & Parti H. & more
			nany	ir cas nany wo st	H. C.	P.H. 8 P.H. 8 P.H. 8 P.H. 8
			How many have incontinence of	How many are chair cases:- How many wit or two sticks	How many are:— P.H. & E.S.N P.H. & Epileptic	
S			H	н н	Щ	

* Excluding those who are waiting admission to Special Schools.

It is hoped that the new residential school to be opened by the North Riding Authority will be able to admit some of these children, who are too crippled to be taught in an ordinary school. Up to now some of the less seriously crippled have been accommodated in the Day Open-air school.

In addition the Adela Shaw Children's Orthopædic Hospital at Kirby-moorside has continued to provide both educationally and surgically for York children admitted from the Fever Hospital, the general hospitals as well as from Mr. Crockatt's monthly clinic held at Rougier Street. During 1950, 23 York children were admitted to this hospital and 19 discharged. There were 13 children in-patients in December, 1950.

Defective Speech. During the year 84 children have attended the speech training class concerning which details will be found elsewhere in the report.

INFECTIOUS DISEASES.

The following table shows the monthly incidence of infectious diseases during 1950, comparing the figures for the year with those of the three previous years:

Month	Diph- theria	Scarlet Fever	German Measles	Measles	Chicken- pox	Whoop- ing Cough	Mumps
January	15 . TEA.	14	1		15	2	n who l
February	N SALETT	26			15	1	4
March	8000 19	29	14-1175- ALM		12	6	5
April	timma d	8	a Par	4	7	16	
May	79	14	77 -17	1	9	8	3 3
June	1 111111	9	2	32	9	23	6
July	demorde	35	nivers la	44	3	11	6
August	10	Ser-lipe	701-11 5	9	The same of the same of	6	1
September	10 TOT 10	11	1	12	3	7	1
October	-	18	2	150	16	17	1
November	-	29	an-mi o	339	22	45	3
December	-	22	-	894		96	-
Total, 1950	opening of	215	6	1485	111	238	33
,, 1949	3	177	4	1154	106	386	2
,, 1948	4	249	18	434	239	108	542
,, 1947	4	127	43	838	79	206	15

It will be observed that there were no cases of diphtheria occurring among schoolchildren during the course of the whole year and there were no deaths. Amongst the children medically inspected 79% were reported to be immunised.

In the last quarter of the year a particularly extensive epidemic of measles occurred but fortunately not of a severe type.

A rising incidence in the number of cases of whooping cough was also experienced in the last three months of the year.

MASS RADIOGRAPHY SURVEY.

In the last quarter of the year, the parents of all school children of the age of 14 years and over attending any of the schools were invited to allow their children to be investigated by the Mass Radiography Unit of the Leeds Regional Board.

As a result 1,865 children were examined, 43 of whom were recalled for a further examination.

The results of the survey showed the presence of four cases of tuberculosis, three of whom were inactive. Of six other children found with other abnormalities in the chest, three were referred to their own doctors, the other three not needing any treatment or further investigation.

It is hoped that this type of investigation will become an annual affair for even with such a low tuberculosis incidence rate as 0.21% as found in this first survey, it is worth doing especially since the notification rate for tuberculosis amongst schoolchildren has risen during recent years.

PHYSICAL TRAINING IN SCHOOLS.

Special report by Miss O. M. Smith and Mr. G. Rees, Organisers of Physical Education.

Report on Physical Education for the year 1950-51 by Mr. G. Rees.
Infant Schools.

In the Infant Schools, Physical Education made a great deal of progress particularly during the Summer months when greater opportunity was given to continuous outdoor work because of the better weather. The value of adequate footwear in this subject cannot be over estimated and it is hoped that the present economies which restrict the provision of rubber shoes will not remain in force much longer. As in the Junior Schools, teachers in Infants' departments are doing a great deal to encourage children to provide their own suitable footwear.

Primary Schools.

In most Primary Schools considerable progress has been made in Physical Education. Much of the work, where there are reasonably good facilities, reaches a high standard, the standard of teaching improves, and the children appear to gain more benefit and enjoyment under the newer methods of approach, that is, under less formal methods. Most of the lessons have been speeded up, and teachers have introduced more individual and group activities. The greater use of apparatus, both large and small has done a great deal in providing the right kind of atmosphere, interest and enjoyment for the children, and has tended also, to make the work much more pleasurable for the teacher. More portable and climbing apparatus is still required.

Secondary Modern Schools.

Work again has reached a high standard in some of the Secondary Schools, where, in some cases, the performance by the children of the more difficult gymnastic activities has been most gratifying. The training in movement, posture and agility has improved a great deal whilst the response and physical reaction has been accelerated.

Outdoor lessons have begun to develop a much wider range of activities than heretofore. Where, in the past lessons were more or less a reproduction of the indoor gymnastic type, games training skills, athletics and crosscountry runs have given a broader interpretation. This applies rather more to the boys' work than to the girls'.

Further Education Departments.

Physical Education in the Girls' Day Continuation, the Boys' Day Continuation Schools, the Day School of Commerce and the Ashfield Branch of the Technical College has made satisfactory progress.

Remedials for Boys.

The remedial classes for boys held at St. George's Secondary School Gymnasium have been functioning successfully during the year. In the "Flat Foot" class, out of a total of 85 boys, 41 yielded successfully to treatment, and in the posture class, 15 boys were discharged out of a total of 33.

Report on work of Remedials Clinic held weekly at the School Clinic, 1950, by Miss O. M. Smith.

This year has seen a slight increase in the number of children who have received treatment and with it an increase in the number discharged. More emphasis has fallen on flat foot treatment and in the Autumn Term one of the sessions devoted to posture classes was given over to flat foot treatment as there were fewer in need of postural re-adjustment.

It is encouraging to report that some work on flat foot treatment is being undertaken in school. Where this is being done, the staff undertake some extra training with me, prior to taking infants in their classes. I have supervised the work done and am pleased with the progress which has been made so far. This has the advantage of saving the parent from bringing the child to the clinic and, incidentally, saves quite an appreciable amount of the child's school time.

136 children have attended for treatment and 87 have been discharged. 103 for flat foot treatment, of which 61 were discharged, 6 left before treatment could be completed, 3 were transferred, 2 were discharged for none attendance, 1 developed skin trouble and her treatment was postponed. This makes a total of 73, with 30 to go on for treatment in 1951. Of 33 for weak posture treatment 26 were discharged, 1 had to discontinue treatment (mother went to work and no one else to bring child), 2 whose mothers refused treatment, 4 go on for treatment in 1951.

SCHOOL CAMPS, 1950.

Two camps for school children were organised during the year. One conducted by the Haxby Road and Fishergate schools was attended by 140

children and lasted 4 weeks: the other was held for poor children chosen by the head teachers of all the schools in the city. 40 children went to this camp.

Great credit is due to the teachers and other volunteers who give of their time and energy to enable these children to get away for a holiday.

The Education Committee assists these camps with a grant in respect of each child taken.

CO-OPERATION.

Another year's smooth working of the School Health Service owes much to the co-operation and whole hearted support of parents, teachers, administrative and professional staffs, helped by the good work of outside agencies like the N.S.P.C.C., and the Rotary Club. We express our thanks to all their service, and hope for their continued interest.

PROVISION OF MEALS

The percentage of York schoolchildren having their midday meal at school during December, 1950, was 37.5%. The number of meals supplied free in 1950 was 17% of the total number.

The following tables show at a glance the demand for meals in the different types of schools throughout the year and the number of free meals provided.

SCHOOL MEALS.

Average number supplied daily.

1950		All Schools (except Grammar)		Grammar Schools.		Total.
	io frago	Paid.	Free.	Paid.	Free.	dinic a
January		3953	789	726	34	5502
February		3770	768	662	32	5232
March		3563	863	641	34	5101
April		3559	886	664	33	5142
May	CHECK!	3601	922	623	33	5179
June	10.	3560	953	612	34	5159
July		3347	900	548	33	4828
August		37	220	nind are	-	257
September		3711	816	697	33	5257
October		3764	835	693	37	5329
November		3667	824	676	38	5205
December		3591	829	638	36	5094

Number of	Meals supplied on payment	in 1950	 829,859
Number of	Meals supplied free in 1950	0	 171,298

Holiday Periods,	Percent Usual I	age of Demand.	Numbers of dinners served.		
hupital in egypte of	Paid.	Free.	Paid.	Free.	
Easter	2	29	749	2161	
Whitsuntide	2	27	386	1062	
Midsummer	1	24	1065	6383	
October	2	20	361	887	
Christmas	1	18	362	1393	

Percentages of children in attendance taking School Meals during December, 1950:—

- (A) at all schools 37.5%
- (B) at all schools (excluding Grammar) 37.4%

PROVISION OF MILK.

Percentage of children, in attendance, at all schools taking a bottle
of milk in school daily at the end of 1950 ... 90.0%

Percentage of children in attendance, at all schools (excluding
Grammar Schools) ... 92.1%

MILK CONSUMPTION.

Average number of bottles of milk supplied free daily.

1950	Primary Schools	Secondary Modern Schools	Grammar Schools	Further Education	Totals
January	8503	2395	1337	104	12339
February	8353	2328	1304	91	12076
March	8409	2352	1298	88	12147
April	8749	2368	1298	106	12521
May	8755	2244	1360	90	12449
June	8694	2230	1297	83	12304
July	8732	2260	1295	65	12352
August	36	nonego - pur	middennin	Truesoma	36
September	8637	2744	1418	90	12889
October	8654	2711	1348	88	12801
November	8466	2652	1330	87	12535
December	8202	2588	1353	87	12230

PROVISION OF CLOTHES.

Clothes and footwear are provided for school children under Section 5 of the Education (Miscellaneous Provisions) Act, 1948.

For the year ending 31st December, 1950, the figures relating to the granting of free clothes and footwear were as follows:—

No. of children repo	orted	by Head	Teach	ers and	others	s as suff	fering	
educationally b	y lac	k of suita	able cle	othing				459
No. of families inv	olved							229
No. of families four	nd to	be eligible	e for fi	ree clo	thing a	and foo	twear	
under the Cor	nmitt	ee's scale						215
No. of children supp	olied '	with free	clothin	g and	footwe	ar	***	443
Boys.								
Boots						272	pairs	
Overcoats		817				17		
Jackets						86		
Trousers		lance. tal	nerezion.	ni. m	oblide	97	pairs	
Socks		SI 0				83	pairs	
Underclothing						118	articles	
Girls.		4						
Shoes						202	pairs	
Overcoats						24		
Dresses, Tunics	, Blo	uses, etc.	01	2000		63		
Socks				***		58	pairs	
Underclothing			10.00			130	articles	
Number of families	with	incomes	above	scale	V		***	14

Of these, 12 families (26 children) were supplied with clothing and footwear on promise to refund cost to the Authority.

ARRANGEMENTS FOR TREATMENT.

The School Health Service provides medical treatment for all school children in maintained or voluntary-aided schools, except in those cases where domiciliary treatment is required.

The School Clinic is open and staffed all the year except on Sundays and Bank Holidays.

In addition to the treatment of minor ailments, the following defects are dealt with at special clinics:—

- 1. Defective vision and squint.
 - 2. Ear, nose and throat diseases.
 - 3. Orthopædic defects.
 - 4. Skin diseases, including ringworm of the scalp.
 - Emotional, educational and character abnormalities (Child Guidance Clinic).
 - 6. Dental troubles including orthodontic defects.
 - 7. Verminous conditions.
 - 8. Foot defects needing chiropody.
 - 9. Speech defects.

HOSPITAL TREATMENT.

There has been no change in the arrangements for the hospital treatment of schoolchildren during 1950.

The following table gives particulars relating to those children seen at hospital, in respect of whom reports have been received by the School Health Department during 1950:—

Complaint	Total No. of cases	No. of out- patients	No. of in- patients	
Skin Diseases. Ringworm of scalp	12 18	12 18	In the fi	
TOTALS	30	30	Disease or	
EAR, NOSE AND THROAT DISEASES. Tonsils and Adenoids Ear conditions Nasal conditions Other conditions Totals	295 24 16 16 16	140 21 16 16 193	155 3 — — — —	
Medical Conditions. Asthma	9 32 32 7 3 2 99	9 30 31 7 2 2 2 89	2 1 - 1 - 10	
SURGICAL CONDITIONS. Injuries (casualties, etc.) Orthopaedic conditions Glands Cysts Herniae Undescended testicles	21 68 3 2 9 5	21 55 1 1 3 2	14 	
Septic conditions Other conditions	1 36	1 8	28	
TOTALS	145	92	53	

Complaint.	Total No. of cases.	No. of out-patients.	No. of inpatients.
EYE CONDITIONS. Eye Diseases Refractions Squints	25 49 63	21 49 54	4 9
Totals	137	124	13
GRAND TOTALS, 1950 GRAND TOTALS, 1949 GRAND TOTALS, 1948	847 1,378 2,576	609 1,096 1,960	238 282 616

MINOR AILMENT CLINIC.

In the following table is shown the incidence of the different complaints seen or treated at the Minor Ailment Clinic, in Rougier Street during the year. There is little variance in the figures compared to those of last year.

Disease or Defect	1950	1949	1948	1947	1946	1945
Ringworm of the scalp	2	BBS 7	2	10	30	32
Ringworm of body	14	23	28	23	37	46
Scabies	8	1	29	73	89	83
Impetigo	93	79	163	182	164	205
Other Skin Diseases	518	469	520	462	548	536
Minor Eye Defects	223	245	274	249	289	113
Minor Ear Defects	286	298	233	260	263	215
Miscellaneous	2102	2169	3332	2510	1909	1904
Totals	3245	3291	4581	3769	3329	3134

The big miscellaneous group is made up of such conditions as abrasions, septic conditions, injuries, sore throats, contacts of infectious diseases, chills, etc.

In addition to the minor ailment clinic held at the central premises in Rougier Street and at which a doctor is in attendance each day, clinics are held in all the new schools with medical units as well as in the Special Schools by the school nursing sisters who refer any doubtful case to the Central Clinic for medical advice. The attendances at these clinics (4,276 during the year) proves that there are many minor ailments that can be entrusted to the care of the nursing sisters and that can be treated on the school premises so avoiding journeys by children along busy streets to a central clinic.

DETAILS OF VARIOUS MINOR AILMENT CLINICS.

The following table shows in summary form the number of children attending the various minor ailment clinics throughout the city. Only the one at the Central premises has a doctor in attendance.

DETAILS OF VARIOUS CLINICS, 1950

log log	2000	100				B B B	le l	a. G	
the chil	Central Clinic Minor Ailments	Open-Air School	Fulford Road Special	Derwent	Burnholme commenced 25.4.50	St. George's commenced 1.5.50.	Carr Infs. commenced 8.5.50	Carr Jnr. commenced 10.5.50.	Beckfield commenced 9.5.50
Number of sessions held	300	71	69	89	48	50	53	51	35
Average attendance per session	27.6	10.3	11.8	12.1	5.7	14.1	5.7	4.0	7.8
Number of children attending Clinic	2560	97	100	230	108	215	06	46	1140
Number of attendances	8288	729	811	823	274	704	302	206	427
THE PERSON NAMED IN				The lotter	1000	1000			-

OPHTHALMIC CLINIC.

The Senior Assistant School Medical Officer who is a recognised ophthalmic medical practitioner conducts this clinic by arrangement with the Regional Hospital Authority.

During the year 1,100 children have attended making 2,465 attendances. A post-mydriatric test is made on each child refracted.

602 children had spectacles ordered for them, 271 only needing a change of lenses.

In the case of 122 children no spectacles were thought to be necessary: the remainder did not need their spectacles changing. 11 children did not need to continue wearing spectacles, 104 children with squints were referred to the Orthoptic clinic after refraction.

During 1950, 630 children obtained spectacles ordered through the School Clinic: 41 children seen at school medical inspections and thought to need an ophthalmic investigation, preferred to go to opticians. 14 children examined and thought to require a reserve pair of glasses because of the serious nature of their visual defect, obtained them after reference to hospital.

13 children in whose case it was considered advisable to obtain a second opinion on the treatment of their ophthalmic condition, were referred to Mr. Magnus, the Consultant Ophthalmic Surgeon.

There has been an ever increasing degree of co-operation between the Regional Hospital Board and the School Ophthalmic Clinic concerning the provision of more suitable forms, the furnishing of necessary information, and the interpretation of official directions in so far as they concern school children.

The names of children are now forwarded to us as soon as they obtain their spectacles from the opticians.

The new Form O.S.C. 10 was drawn up after consultation with us and several undesirable features of the old one amended or removed.

Children now on the whole obtain their spectacles within a reasonable time (usually a matter of a few weeks) and the types provided free under the National Health Scheme are satisfactory.

In York all school children attending the Authority's schools come to the School Clinic for a repair form when they break their spectacles, teachers do not issue them. The opportunity is taken of testing the child's vision with the lenses last ordered for him, and if it is not satisfactory, the child is refracted as soon as possible.

There are many advantages in keeping the treatment of school children's visual defects associated with school clinics, it would be a further advantage if opticians attended the same clinics to measure and dispense the spectacles ordered. Following the suggestion contained in the last publication of "The Health of the School Child" concerning the further investigation of children found to be colour-blind by the Ishihara Tests by means of a lamp, application was made to have the Eye Room made suitable for dark adaptation and to

acquire a Colour Perception Unit. In view of the small number of children involved and as it was thought that such apparatus would be more suitably housed in the Eye Department of the local hospital, the matter was referred to the Hospital Management Committee. No provision has been made so far.

ORTHOPTIC CLINIC.

Mrs. M. Breare, the Orthoptist, has kindly furnished me with the following particulars relating to York schoolchildren referred to the Orthoptic Clinic. This clinic is conducted in association with the Ophthalmic Out-patient Department at the York County Hospital.

SCHOOL CLINIC.

ORTHOPTIC DEPARTMENT REPORT, 1950

Number of new cases referred in 1950	7.5.		974.20		56
Total number of attendances				1	608
Number of patients seen	VII. 194				130
Number of patients discharged cured					20
With operation 4					
Without operation 16					
Number of patients discharged cosmetically	cured				17
With operation 10					
Without operation 7					
Number of patients refused			1		17
Test only-no treatment required			8		
Unsuitable	2,21919		9		
Number of patients ceased to attend					17
Number of cases carried over to 1951			HERE DE		59
December 31st:—					
			5		
On treatment	****	•••	5		
On occlusion			6		
Under observation		***	40		
On waiting list for treatment	***		7		
On waiting list for operation			1		

EAR DISEASES.

During the year 299 children have attended the Minor Ailment Clinic with ear complaints. 93 of these had discharges from one or both ears; 44 were deaf, 64 had earache, 54 needed syringing for wax, 12 had furnunculosis and the remainder various complaints. Of the 93 with aural discharges 30 were successfully treated at the clinic, 16 were referred to hospital, 8 were transferred to their private doctors, 14 ceased to attend and the remaining 25 were still receiving treatment at the end of the year.

Of the 44 children seeking treatment for deafness 22 were successfully treated at the clinic, 12 were referred to hospital, 2 to their private doctors, 4 ceased to attend whilst 4 were still under treatment.

In all 1,738 attendances were made by children for ear defects.

SKIN CONDITIONS.

Quite a big percentage of the complaints treated at a minor ailment clinic nowadays are concerned with skin conditions. Boils, septic spots, and fungoid diseases like warts and epidermophytosis are the commonest skin diseases seen whilst such complaints as eczema, impetigo, scabies and ringworm, which abounded a generation ago are now becoming comparative rarities.

Because of the increased number of children treated by the Chiropodist for plantar warts (verrucae), and the practice of the indiscriminate use of plimsols provided by the Education Committee at schools, the incidence in the different schools was investigated to see if the disinfection of the plimsols would be justified. It was found that the 144 children treated in 1949 (three of them for two separate attacks) attended 41 different departments. In five cases another school child in the family also received treatment for the same complaint. As there was no definite evidence to implicate the schools as the source of contagion and as the difficulties not to mention the cost of disinfecting all the plimsols in the schools were considerable, it was decided to leave the matter where it was and keep the position under review. Since then the provision of further supplies of plimsols by the Authority has ceased so that this possible means of spread will be eliminated. It was suggested that the wearing of socks with the plimsols might help to control any spread attributable to this means.

By far the commonest skin disease seen at school medical inspections is epidermophytosis (athelete's foot), another fungoid condition particularly effecting the skin between the toes of older children. Although readily amenable to treatment, it has a big recurrence rate.

CHILDREN WITH MULTIPLE DEFECTS.

Excluding children who are both deaf and dumb, there are in York 13 schoolchildren with more than one serious defect or deformity.

The combinations of defects are as follows:—

- (1) E.S.N. with Rt monoplegia.
- E.S.N. with oxycephaly causing deafness.
- (3) E.S.N. with cerebral diplegia.
- (4) E.S.N. with partial-sightedness.
- (5) E.S.N. with paraplegia.
- (6) E.S.N. with congenital spastic paralysis.
- (7) E.S.N. with blindness.
- (8) Hemiplegia with partial-sightedness.
- (9) Epilepsy with partial-sightedness.
- (10) Congenital Heart Disease and paraplegia.
- (11) Epilepsy and left hemiplegia (two cases).
 - (12) Hydrocephalus, Spina Bifida and spastic paralysis of both legs.

Three of these children are accommodated in the class for the partially-sighted, three in the Day Special School (E.S.N.), one in a residential school (E.S.N.), one in an orthopædic hospital school, two in the Day Special School (Del), two are at home and one attends an ordinary school.

CHILD GUIDANCE CLINIC.

Report.

Staff:

Miss Black was appointed to full time service in January, 1950.

Outside Activities:

The Psychologist attended the Annual General Meeting of the British Psychological Society, held in Reading University from 30th March to 4th April, 1950.

With the psychiatrist she has been attending a course on "Projection Technique" at the Department of Psychiatry, Leeds University School of Medicine. A weekend course in June was conducted by Miss Theodora Alcock of the Tavistock Clinic. A similar course was held in November with Dr. Cook as the Speaker. Fortnightly tutorials have been arranged in between by Mr. Martin and Mrs. Preston, of Leeds University.

Visits have been paid to meetings arranged by the Northern Group of Child Guidance Clinic Workers and by the Northern Section of the British Psychological Society, to gatherings of Psychiatrists and Psychologists in the Leeds Region and to an open meeting of York Medical Society.

We have also visited, by invitation, the Glen Nursery, the Occupation Centre, the new Health Centre and St. John's Probation Hostel, in Leeds.

Talks have been given to the Parent-Teacher Association at Fulford Special School, to a group of mothers at Marygate Centre for Adult Education, to Nether Poppleton Women's Institute, to New Earswick Wesley Guild, and to groups of parents sponsored by the Churches of St. Thomas', Lowther Street, Holy Trinity, Micklegate, and by a Leeds Church.

Visitors:

We were pleased to welcome Councillor Bellerby, Mr. Norman, from Aycliffe School, Miss Didsbury, of the Retreat, Dr. Pfeiffer, introduced by the British Council, and several students in training as Teachers or Social Workers.

Figures:

A comparison of the figures for the two years 1949 and 1950 reveals several changes. While the waiting list remains at much the same level there have been fewer registrations, fewer closures and more cases carried forward at both ends of the year.

There is a difference of 130 between the closures of 1949 and 1950. This number will be seen to correspond almost exactly with the difference between

the number of closures of children who had psychological examination only, and is attributable to the fact that more tests of intelligence and fewer tests of attainment were given during the year.

The new registrations appear to have been referred from different sources. The apparent drop in the number of cases referred by the School Medical Officer is misleading. In 1949 all Remand Home cases were included in referrals by the School Medical Officer. It was felt, however, that such cases should be separately noted, and in 1950 they are put under the heading "Probation Officers, etc.".

The large number of referrals attributed to the Chief Education Officer in 1949 included a group of more than 90 children, the whole 11 plus age group in Shipton Street Primary School, who were examined in order to provide evidence required by the Nationel Foundation for Educational Research. This piece of work in 1949 was not repeated in the following year.

The number of referrals by Head Teachers has also apparently fallen. This state of affairs is somewhat illusory, too. In 1949 a very large group of backward readers were examined in reading only at the age of 7. In 1950 no such examination was given, but 76 backward children were given intelligence tests as well as tests of attainment, so that advice about their education might be given to the teachers. The numbers are small because intelligence testing is a very much longer process than testing attainment alone.

More appointments have been kept and more than double the number of visits paid in 1950. More children are being treated for educational backwardness. The number of children from outside the City seen in the Remand Home is considerably more than in 1949. The number of cases receiving treatment from the Psychiatrist is almost the same in both years.

Analysis of Cases:

The Psychiatrist has prepared her analysis of cases seen during the year. This is appended. She hopes to review the cases seen over the past three years and figures will be available later.

DETAILED ANALYSIS OF SYMPTOMS.

C. 1. Enuresis (and soiling) oc	curred i	in 34 c	ases:			
Bedwetting alone						in 1 case.
With delinquency or b	ehaviou	r prob	olems	besses	lg.an	" 7 cases.
With emotional immatur	ity and	backw	ardness	I .all	Local	,, 3 ,,
With behaviour problem						,, 16 ,,
With nervous symptoms						,, 4 ,,
2. Delinquent behaviour of children showed anti-soci	ccurred	in 35	childr	en. (
or two additional sympto		owur a	ione, a	u ine c	nners	snowea one
D. Treated in 1950.						
Brought forward from	1949					56
Admitted in 1950						58
Discharged in 1950						55
Carried forward to 1951						55

E.	STATE ON DISCHARGE.						
	Seen one or twice only		evio	400.00		 	12
	Improved					 	26
	Sent to Approved or Re	esident	ial Scho	ools		 	4
	Moved to other areas					 ***	5
	Discontinued					 	8
						000162	
				Te	TAL	 	55
						G 5	mblid!
F.	STILL UNDER TREATMENT ON	31st	DECEM	BER, 1	950.		
	Improved					 	38
	Little or no improveme	nt				 	16
	Registered only recently	218	-46			 	1
				7	otal	 	55
							NAME OF TAXABLE PARTY.

G. DISTRIBUTION OF INTELLIGENCE.

	Carr. f	forward	19	50	
	Boys	Girls	Boys	Girls	Total
I.Q. 75 or under	 2	3	2	2	9
I.Q. 76 to 85	 8	2	2	4	16
I.Q. 86 to 95	 7	3	10	6	26
I.Q. 96 to 105	 16	1	12	4	33
I.Q. 106 to 115	 1	2	7	2	12
I.Q. 116 to 125	 4	1	3	1	9
I.Q. 126 or over	 3	3	2	Home	8
Not examined	 _	TOOL OF	1	-	1

CHILD GUIDANCE CLINIC.

FIGURES FOR THE YEAR ENDING 31st DECEMBER, 1950

to speceb-dierapist.	26113	YORK	W-Enjoy	ELS	SEWHI	ERE	TOTAL	TOTAL
A. Cases Interviewed:	Boys	Gir	Total	Boys	Girls	Total	1950	1949
Brought forward from 1949	56	23	79	4	1	5	84	59
Registered during 1950	137	81	218	54	-	54	272	404
Closed during 1950	125	66	191	58	1	59	250	380
Carried forward on 31.12.50	68	38	106	-		-	106	83
On Waiting list 31.12.50	93	49	142	10	6	16	158	156

		YORK		ELS	SEWHE	ERE	Tomas	TOTAL
St. The same and	Boys	Girls	Total	Boys	Girls	Total	TOTAL 1950	1949
B. New Registrations: School Medical Officers	20	15	35	A TOTAL	Sales of A		35	70
Practitioners Chief Education Officer Head Teachers	- 2 71	_ 51		<u>-</u>	_	1	- 3 122	11 106 190
Prob. Officers, etc Children's Department	10 4	2 4	12 4 14	53	=	53	65 4 14	- - 7
Parents Others (including Psychologist)	10 20	9	29	1000	100 mg	OVER 10	29	20
TOTAL	137	81	218	54	wlan ib	54	272	404
C. CLOSURES: Psychological only Consultation	81 5	46 4	127	51	Age is	51	178 12	313 10
Treatment: (a) Improved (b) Discontinued:	36	15	51 4	4 —	<u>_</u>	4 1	55 5	48 9
TOTAL	125	66	191	58	1	59	250	380
							1	
D. APPOINTMENTS KEPT: (a) Clinic (b) Schools (c) Remand Home	prepa	1699 149 9			26 - 51		1725 149 60	
Total	- Allah	1857			77	THE MANY OF	1934	1946
E. Visits of enquiry paid to home or school:	Storie Storie	406	Acti	Trans	H0-		406	176

SPEECH TRAINING CLASS.

Mrs. C. J. Capes, A.T.S.D., took over the work of this class in January, 1950, after a period of four months when there was no speech-therapist.

All old cases that were under treatment by Miss Mason, the previous speech-therapist, were seen and new cases interviewed. A summary of her work for the year is shown below:

Stammerers	is show	n belo	No. treated. 35	No. still under treatment.	No. discharged.	No. ceased treatment for various causes. 10	
Dyslallics			37	8	23	6	
Cleft Palate			12	5	5	2	
			_	_		_	
Cases Total			84	24	42	18	
				_		_	

Mrs. Capes was only able to give six sessions a week to the work, and an average of 40 children were treated each week.

EXAMINATIONS OF EDUCATIONALLY SUBNORMAL CHILDREN.

The intelligence of 97 children has been tested during the year. 25 of these were recommended for admission to the Day Special School for educationally subnormal children.

14 children were tested before leaving the special school (E.S.N.) and 10 of them notified to the Local Authority as needing supervision after leaving school. 2 boys (one in the Remand Home) and 1 girl were recommended for a residential Special School (E.S.N.). 7 children who had never attended any school were notified to the Local Authority under Subsect. 3, para. 57 of the Education Act.

One boy in a residential Special School was notified to the Local Authority under Subsection 5, para. 57 of the Act. The others tested were not thought to require special educational treatment in a school for educationally subnormal children and were for the most part returned to their ordinary schools.

Great assistance has been given by Miss Johns, the Educational Psychologist, in testing children both in schools, in the Child Guidance Clinic and in the Remand Home. Details of her work will be found under the The Child Guidance Clinic. As there is no apparatus available for school medical officers to do performance tests, all children, in whose case a Form 2 H.P. has to be completed for statutory purposes are referred to Miss Johns for completion of Part 11 of the Form.

CONVALESCENT HOLIDAYS.

Since April, 1950, 8 children have been sent to four different convalescent homes by the Health Committee, under Section 28 of the National Health Service Act.

FAMILY SERVICE UNIT.

In July, 1950, a Family Service Unit was set up in York to deal with problem families. The Unit receives grants from the Health, Welfare and Children's Committees of the Council and there is strong Local Authority representation on its General Committee. Two field workers, have since that time visited 14 families containing 40 children referred to them by the school nursing sisters and others. The workers have assisted these families by encouraging regular school attendance, by helping to keep the children's heads and bodies clean, by maintaining their clothes in good repair, by obtaining medical and other aid for them, by accompanying them to hospitals and clinics, and by arranging convalescent holidays, pleasure trips, play sessions and a Christmas party.

The effects of the work of the Unit are already evident in the children of these problem families.

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REMAND HOME.

Mr. E. J. P. Cother, the Warden of the Ashbank Remand Home, has kindly furnished me with the following information relating to the boys admitted there during 1950.

No. of boys admitted of (this No. includes 1					out to all	and" a	143
No. of York Boys	and the same of th						39
No. of other Boys							104
Average length of stay	14	 W4.1.		mini a			31.4
Longest stay	dineral nd	Hillian	mail b		- Day		days 218 days
Shortest stay	Dry, vi	 1	wit o				

Each boy is medically inspected within twenty-four hours of admission and discharge from the Home. Most of the boys are tested by the Educational Psychologist and some are seen by the Psychiatrist attached to the Child Guidance Clinic. The School Health Department is responsible for the medical treatment as well as the examination of all the boys admitted.

ORTHOPÆDIC CLINICS.

Mr. Crockatt, of the Adela Shaw Orthopædic Hospital, Kirbymoorside, held 11 clinics at monthly intervals at Rougier Street during the year.

There were 186 new cases seen and 306 attendances made.

23 children were admitted during the year to the Adela Shaw Hospital for treatment: 21 children were supplied with orthopædic appliances.

Reports have been received from the two local hospitals in respect of 68 children seen for orthopædic defects, 13 of whom were admitted for inpatient treatment.

CHIROPODY.

Miss F. Long, S.R.N., S.C.M., M.Ch.S., has held a weekly clinic throughout the year for the treatment of chiropodial defects amongst schoolchildren.

The number of children treated shows an increase compared to previous years.

Complaint	1950	1949	1948
Verrucae	165	150	83
Corns	60	34	33
Other defects	67	46	33
Total	292	230	149
No. of children attending	287	221	144

EPILEPSY.

There are twenty-three schoolchildren known to be or suspected to be suffering from epilepsy, in attendance at York schools under the Education Authority. They consist of nine boys and fourteen girls. Four of them (2 boys and 2 girls) have minor forms of the complaint. With the exception of one girl with pyknolepsy, all the children attend school. None of them attend special schools for epileptic children and there are none waiting admission to such schools.

These children receive treatment from their own private doctors and very few fits take place in school.

CEREBRAL PALSY

There are 28 cases of cerebral palsy affecting children between the ages of 2 and 16 years known to the department—10 are boys, and 18 are girls.

14 of them attend ordinary schools: 6 attend the Day Special School for Delicate children: 1 attends the Day Special School for Educationally-subnormal children: 4 are at home (2 of these are below 5 years of age and 2 above): 3 have been notified to the Local Authority as ineducable.

One of the children at home is awaiting admission to a residential school for physically-handicapped children.

POLIOMYELITIS EPIDEMIC.

The epidemic in 1950 was somewhat more severe than in the previous year. It commenced in June and reached its heaviest incidence in August and September. Of 50 notified cases, 17 were schoolchildren.

In only two cases did more than one child attend the same school and then the children were in different classes. Altogether 14 departments were affected.

3 children with residual paralysis were admitted to the Adela Shaw Orthopædic Hospital at Kirbymoorside. The school nursing sisters visited all class contacts of each case notified that were absent from school, and the general practitioners were warned of the possibility of their patients having poliomyelitis.

PLASTIC SURGERY.

Four schoolchildren have been seen by the plastic unit at Leeds for the following conditions:—

- (1) Pigmented Nævus on right cheek.
- (2) Scars of old scald.
- (3) Linear warty nævus on left fifth finger.
- (4) Webbed fingers and cleft palate.

MISCELLANEOUS EXAMINATIONS.

Number of teachers, etc., examined	 	 184
Number examined for Child Guidance Clinic	 	 10
Number examined re part time employment	 	 329
Number of Scholarship holders examined	 	 40
Children examined before going to camp	 	 61

Employment of Young Persons. Medical history of 94 children recorded for use of Juvenile Employment Officer.

BACTERIOLOGICAL INVESTIGATIONS, 1950.

Eighty-nine swabs were taken from 70 children during the year; of these 21 showed the presence of hæmolytic streptococci. One specimen of blood was submitted for pathological investigation but was negative for the disease suspected.

BOXING TOURNAMENTS.

School Medical Officers have attended all boxing tournaments promoted by the York Schools' Amateur Boxing Association during the year and examined each boy before going into the ring.

In addition to York boys, others taking part in the Yorkshire Schools A.B.A. championship finals, which were staged in York, were also examined.

Any first aid attention required during the bouts was also given.

DEATHS AMONGST SCHOOL CHILDREN.

There were 7 deaths amongst school children during 1950. The causes were as follows:—

Hodgkin's Disease.

Peritonitis following Appendicitis.

Hirchsprung's Disease.

Pyonephrosis.

Congenital Bladder Obstruction.

Pulmonary Tuberculosis.

Motor Vehicle Accident.

FOLLOWING UP.

During the course of the year the school nursing sisters have paid 2,104 visits to the homes of children found with defects in efforts to have the defects remedied. In addition they have paid 1,189 visits to schools.

Children found at school medical inspections with remediable defects are re-inspected at the next visit of the doctor to see that treatment has been obtained.

SUMMARY OF WORK DONE, 1950.

SCHMART OF WOL	CK DOIN	4, 100	0.		
Periodic Medical Inspections:					
Primary and Secondary Modern Sch	ool Child	en	Seleco	4,256	Order of
				Dolute	4,256
Other Periodic Inspections:					
Primary and Secondary Modern Sci	nool Child	ren	- M.	1,308	
Grammar School Children			hi	1,075	
				-	2,383
Other Inspections:					
Special Inspections				3,524	
Re-inspections				4,332	
				1	7,856
					manufair.
	Total				14,495
- College					
Periodic Dental Inspections	***	***	• • •	1,763	
Special Dental Inspections	31/10-0			1,040	
Number of children treated by Sch	ool Denta	Surg	geons	1,294	
Number of attendances at Clinics:					
				6,550	
Minor Ailments (at Rougier St.) Open-Air School Clinic	e ball b			729	
Fulford Road Special School Clinic				811	
Derwent Clinic	-de hine		udor	823	
Burnholme School Clinic	N over D		no jejín	274	
St. George's School Clinic	a single or	- Silina	10.0	704	
Carr Infants' School Clinic	maladina			302	
Carr Junior School Clinic	neid to los	1	11.10	206	
Beckfield School Clinic	we gone			427	
Eye Clinic	90,09 9			2,465	
Ear Clinic	in all the same			1,738	
Ringworm Clinic	mary Hall			_	
Ringworm Contacts	almoresono			-	
	•••	***		306	
Orthodontic Clinic	1 199300		***	268	
Dental Clinic				3,508	
Foot Clinic		***			
Examination of backward children	no section	•••		91	00 077
					20,277
	Total				20,277
	Total	•••			20,277
Number of Least Number of Number of Least Number of Numb	. f 1	1:	200		27 027
Number of Inspections by School Nurse		aniine			37,237
Number of home visits made by School					
Number of visits to schools by School Nu	rses				1,189

COST OF SCHOOL HEALTH SERVICES.

YEAR 1950-51.

	£
Gross cost of School Health Service (i.e., after deducting salaries refunded and other income)	15,336
£ School Medical Service 12,892 Child Guidance Clinic 2,444	
15,336	
Government Grant	9,202
Net cost of School Health Service to Rates	6,134
Amount produced by 1d. Rate	2,916
Net cost to Rate in terms of 1d. Rate	2.103d.

CONCLUSION.

The role of the School Health Service is primarily one of prevention. Improved housing, better schools, a higher standard of living have all helped to make the present generation of children healthier and happier. Modern treatments of diseases which used to claim most of our child victims, have changed the picture. Today most of the deaths occurring in children are due to violence and tuberculosis, and the latter cause claims about half the number. Infection by tuberculosis in over 60% of children cannot be traced to any infected relative at home, so that these children are the victims of the undiagnosed sputum positive ambulant person who the mass radiography units have shown exist in the proportion of at least one to each thousand of the general population. When we consider that this figure means that about one hundred people in York are going about, each one coughing up tuberculosis germs it is a matter for congratulation that so few (fourteen were notified in 1950) of our school children fall victims to this foul disease.

Up to date only the home contacts of cases of tuberculosis that have not already been infected, are being immunised against the disease. In order to try and stamp out this scourge, it will be necessary to immunise all school-leavers who are negative reactors as shown by skin tests revealing their sensitivity to the disease. This crusade calls for all the enthusiasm with which diphtheria has almost been wiped out in the last decade.

SCHOOL HEALTH SERVICE STAFF AND SCHOOL CLINIC

Local Education Authority YORK C.B. Return for 31st December, 1950.

 STAFF OF THE SCHOOL HEALTH SERVICE (excluding Child Guidance).

School Medical Officer: DR CATHERINE B. CRANE,

Senior Dental Officer: G. TURNER.

Schools to Booms	Number	Aggregate staff in the service of the L.E.A. in terms of the equivalent number of whole- time officers.
(a) Medical Officers: (i) whole-time School Health Service	3 1 2 1 6 2 2	3 1/1cth 18/11ths 6/11ths of whole time 6 2 2

II. NUMBER OF SCHOOL CLINICS

A certain amount of minor ailment treatment is carried out in the Medical Inspection Rooms at the following schools:—

Derwent; Fulford Road Special (Del.); Fulford Road Special (E.S.N.); St. George's Secondary Modern; Carr Infants'; Carr Junior; Beckfield; Burnholme Secondary Modern.

	Number of School Clinics (i.e. premises) where such treatment is provided					
Examination and/or treatment	directly by the Authority	under arrangements made with Regional Hospita Boards or Boards of Gover nors of Teaching Hospitals				
(1)	(2)	(3)				
(a) Minor ailment and						
other non-specialist	ing RD X807	Social Education Authors				
examination or treat-	0					
ment (b) Dental	1	- 1,20				
(c) Ophthalmic	i	1				
(d) Ear, Nose and Throat	_	2,910				
(e) Orthopaedic	CHOOL ISM IN SE	SHIT TO-TEMPESON				
(f) Paediatric		(annual Tradit)				
g) Speech Therapy	1					
(h) Others:	Officers On Caragogue	School Medical				
Chiropody	1	O female and a second				
Orthoptics Remedial exercises	The state of the s	and the second				
carried out by						
Organisers of	SAN DE CONTRACTOR DE CONTRACTO	THE RESERVE OF THE PARTY OF THE				
Physical Educa-		A STATE OF THE STA				
tion	2	-				

IV. CHILD GUIDANCE CENTRES.

(i) Number of Child Guidance Centres provided by the Authority:

Staff of Centres	Number	Aggregate in terms of the equivalent number of whole-time officers
Psychiatrists Educational Psycho-	1	6/11ths of full-time
logists Psychiatric Social	1	1
Workers	Post vacant	E NUMBER OF SCHOOL CI
Clerical Assistant	la si tombian man	A certain amount of minor att
Temporary Social Worker	1	Rooms at the following

The Psychiatrist is directly employed by the Authority.

MINISTRY OF EDUCATION.

HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES.

Local Education Authority YORK C.B.

Year 1950

	(2) F tia	Blind Par- ally nted			(6) F ca Ha	elicate Physi- lly ndi- ped	tion su nor (8)	duca- ally b- mal Mal- asted	(9) Epi- leptic	Total (1)—(9)
In the calendar year ending 31st Dec., 1950	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
A. Handicapped Pupils newly placed in Special Schools or Homes B. Handicapped Pupils newly	2	1	1	-	28	1	21	1	nocent pencents by ex- city	55
ascertained as requiring educa- tion at Special Schools or boarding in Homes		in the last of the	3		5		10	0 4	lo w bioque goised	18

AT SPECIAL					(6) F ca Ha	Deli- ite Physi- lly ndi- oped	nor (8) M	duca- nally ib- mal [al- isted	(9) Epi- leptic	TOTAL (1)—(9)
On or about 1st December:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
C. Number of Handi- capped Pupils from the area— (i) attending Special Schools as—	SUL	(S)	ylla ylla ihmi boqq	BATT.	Hite		- util yilai baany			
(a) Day Pupils (b) Boarding Pupils (ii) Boarded in	5	9	17	8 - 8	84*	10-	86	1		179 29
Homes (iii) attending independent schools under arrangements made by the Authority	1	- 12	-	- 82 -	1		1	1	apped apped or Spenial control or Home	3
TOTAL (C)	6	9	17	-	86	_	91	2	1-110	211
D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944— (a) in hospitals (b) elsewhere		<u>u</u>	- - 1		1 1	1				in and decided and
E. Number of Handicapped Pupils from the area requiring places in special schools (including	of G	hild	Guid	ande l			7		A Anti	pely?
any such unplaced children who are temp. receiving home tuition)	-	-	4	-	-	4	3	-	-	11

^{*—}including 3 pupils also Physically Handicapped and entered at E (6).

Number of children reported during the year-

(a) under Section	57(3) (excluding any returned under (b))	 10
(b) under Section	57(3) (relying on Section 57(4))	 Nil
(c) under Section	57 (5)	 7
the Education Act	1944	

MINISTRY OF EDUCATION.

MEDICAL INSPECTION RETURNS

Year ended 31st December, 1950.

Local Education Authority-YORK.

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (including Special Schools).

(This return refers to a complete calendar year)

A.—PERIODIC MEDICAL INSPECTIONS.

Number	of Inspections in the prescr	ribed	Group	s:-			
	Entrants						1781
	Second Age Group						1324
	Third Age Group						1151
		(4)					
		To	tal		•••		4256
Number	of other Periodic Inspection	ons					2383
		Gra	and T	otal			6639
							mal I
	B.—OTHER	INS	PECT	IONS.			
Number	of Special Inspections	78					3524
	of Re-Inspections						4332
		-					
		То	tal			DESC. TE	7856
							Links I

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).

- NOTES.—(1) Pupils found at Periodic Medical Inspection to require treatment for a defect should not be excluded from this return by reason of the fact that they are already under treatment for that defect.
 - (2) No individual pupil should be recorded more than once in any column of this Table, and therefore the total in column (4) will not necessarily be the same as the sum of columns (2) and (3).

Group.	For defective vision (excluding squint).	For any of the other conditions recorded in Table IIA.	Total Individual Pupils. (4)
PRINCIPLE OF THE PRINCI	(2)	1	
Entrants	. 34	363	387
Second Age Group	. 62	176	229
Third Age Group	50	237	286
Total (prescribed groups)	. 155	776	902
Other Periodic Inspections	101	465	618
Grand Total	. 346	1241	1520

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1950.

	lete calendar your) rabru sixula	Periodic 1	Inspections	Special Inspections (in Schools)		
		No. of	Defects	No. of	Defects	
Defect Code No.	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.	
- 10	(1)	(2)	(3)	(4)	(5)	
4 5	Skin Eyes—a. Vision b. Squint	438 346 57	117 389 44	13 6 7	21 31 8	
6	c. Other Ears—a. Hearing	34 22	22 54	1	3 7	
	b. Otitis Media	32	36	4	9	
_	c. Other	73	28	3	4	
7	Nose or Throat	141	742	11	53	
8	Speech Cervical Glands	17	47	6	7/	
10	Heart and Circulation	5 37	592 311		31 15	
11 12	Lungs Developmental—	104	276	14	54	
	a. Hernia	10	28	C. PUPI	1	
13	b. Other Orthopædic—	11	94	ther of Ind	16	
(min	a. Posture	49	145	7	8	
-109	b. Flat Foot c. Other	204	134	14	15	
14	c. Other Nervous System—	76	184	mem	23	
for	a. Epilepsy	5	9	2	1	
15	b. Other Psychological—	4	13	- init	3	
Auv	a. Development	d blumra lie	20	2	4	
16	b. Stability Other	16 51	397 152	6 3	37	

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups.	Number of Pupils	A. (Good)		B. (Fair)		C. (Poor)	
on rodo yhodda	Inspected.	No.	of Col. 2	No.	of Col. 2	No.	of Col. 2
Entrants	1781	848	47.6	860	48.3	73	4.1
Second Age Group	1324	568	42.9	711	53.7	45	3.4
Third Age Group	1151	489	42.5	602	52.3	60	5.2
Other Periodic Inspections	2383	1090	45.7	1203	50.5	90	3.8
Total	6639	2995	45.1	3376	50.9	268	4.0

TABLE III.

INFESTATION WITH VERMIN.

(i) Total number of examinations in the schools by the school nurses or	
other authorized persons	37,237
(ii) Total number of individual pupils found to be infested	749
(iii) Number of individual pupils in respect of whom cleansing notices were	
issued (Section 54 (2), Education Act, 1944)	-
(iv) Number of individual pupils in respect of whom cleansing orders	
were issued (Section 54 (3), Education Act, 1944)	-

TABLE IV.

TREATMENT TABLES

GROUP I.—DISEASES OF THE SKIN (excluding uncleanliness).

						Number of cases treated or under treatment during the year		
						by the Authority	otherwise	
Ringworm—(i)	Scalp					3	_	
(ii)	Body					16	2	
Scabies						10	1	
Impetigo						112	12	
Other skin dise	ases					808	64	
			To	otal		949	79	

GROUP II.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with		
HER TREATMENT GEVEN	by the Authority	otherwise	
External and other, excluding errors of refraction and squint Errors of refraction (including squint)	25 1002	25 63	
Total	1027	88	
Number of pupils for whom spectacles were:—		Enterly :	
(a) prescribed (b) obtained	596 629	Spine d	
Total	1225	_	

GROUP III—DISEASES AND DEFECTS OF EAR, NOSE & THROAT.

Property Misself Property San	Number of cases treat		
	by the Authority	otherwise	
Received operative treatment (a) for diseases of the ear (b) for adenoids and chronic tonsillitis (c) for other nose and throat conditions Received other forms of treatment		36 155 51 196	
Total	299	438	

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

tun the schools by the school nurses or	Number of cases treated		
neils found to be infested 74	by the Authority	otherwise	
(a) Number treated as in-patients in hospitals	38	issued (Sect	
(b) Number treated otherwise, e.g. in clinics or out-patient departments	380	55	

GROUP V.—CHILD GUIDANCE TREATMENT.

Number of Ceases treated or	Number of cases treate		
	In the Authority's Child Guidance Clinics	Elsewhere	
Number of pupils treated at Child Guidance Clinics	114	(ii) Japid	

GROUP VI.—SPEECH THERAPY.

er ese date	Number of cas	ses treated
Number of pupils treated by Speech	by the Authority	otherwise
Therapist	84	_

GROUP VII.—OTHER TREATMENT GIVEN.

	a. Posturi	1	0 810	900	Number of cases treated		
				No.	by the Authority	otherwise	
(a) Miscellaneous minor ailments(b) Other (specify)			3.00	3488	2 -		
1.	Chiropody				292	_	
2.	Plastic Surgery				Dough Tot shidn	5 5	
3.	Medical Conditions				_	992	
4.	Surgical Conditions				-	147	
		To	otal		3780	1144	