

**[Report 1955] / School Medical Officer of Health, York City.**

**Contributors**

York (England). City Council.

**Publication/Creation**

1955

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City of York Education Committee

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# ANNUAL REPORT

OF THE

PRINCIPAL

SCHOOL MEDICAL OFFICER

For the Year Ended 31st December, 1955

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Alderman G. T. ROGERS,  
Chairman

H. OLDMAN,  
Chief Education Officer

School Clinic,  
Rougier Street,  
York







City of York Education Committee

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Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my report on the work of the School Health Service for the year ending 31st December, 1955.

The high standard of health among our York schoolchildren was maintained, and there was no major epidemic during the year.

#### Infectious Disease.

The incidence of whooping cough had been falling since 1951, the annual notifications being 467 in that year, 182 in 1952, 107 in 1953 and 38 in 1954. There was a slight increase in 1955, 74 cases being notified. The decreased incidence coincides with the increase in immunisation. Most children who are immunised against diphtheria in York have for some years received the combined antigen which includes immunisation against whooping cough. We hope, therefore, that the falling rate signifies the effectiveness of immunisation, and that the low incidence will continue.

#### Poliomyelitis.

There were two notified cases of poliomyelitis among children of school age. Both were paralytic, but one was an ineducable child not attending school.

The delayed introduction of vaccination against poliomyelitis into this country, owing to the tragedy in America, was unfortunate.

#### Tuberculosis.

Plans for offering B.C.G. vaccination to the school leaving age group, approved by the Minister of Health in 1954, were implemented during the year. Vaccination was offered in both maintained and non-maintained schools, but there was no organised propaganda to persuade parents to accept the offer. The acceptance rate of 59%, therefore, was reasonably satisfactory for the first offer of vaccination for this group in the City. There will doubtless be a greater demand in future years as the simplicity of the procedure is recognised.

The percentage of children reacting to the preliminary tuberculin test (29.6), indicates indirectly the amount of hidden tuberculosis in the community. It compares with less than 30% reactors in a London survey in 1954 of 14 year olds (Palmer) and only 15% reactors at the age of 13 in an L.C.C. study. There is still need, therefore, for a concentrated attack on tuberculosis, and search for unknown cases. The chief weapons for our use are tuberculin testing and chest X-ray, with protection of susceptible children by B.C.G. vaccination. It is unfortunate that we have no Mass Radiography Unit stationed in the City, but the hospital have been waiting delivery of a small X-ray unit for some time. This will take films about the size of a standard lantern slide, and when this is installed it is hoped that it will be available for the X-ray examination of selected groups in our search for missed cases of tuberculosis.



Assessment of the Value of the School Health Service.

In view of the revolutionary changes that have occurred in the administrative structure of the Health Services of this country during the past decade, it is incumbent on us to review the value of our own service, and our methods of assessing its value. Statistics of work done are accepted without comment unless a fall is recorded, but are they, in fact, of any great significance? For example, the attendance of children at Minor Ailment clinics has risen from 12,564 in 1950 to 16,608 in 1955. This is out of proportion to the increased school population, and the distribution between different schools varied from 10.8% to 54.5% of children on the register during a selected month. The school showing the highest percentage of children attending Minor Ailment Clinics is not necessarily receiving the best service from the School Medical Department. Our criterion today must be linked with the relationship of the School Health Service to the family, and to other branches of the Health Service. Do our staff see the home background of the child as well as the school background, and is the sense of responsibility of the parent for the child's health greater or less than it used to be? We must guard against the danger of shifting responsibility for the child's health, from the parent to the school.

The opening of the Gale Lane Clinic during the year, and the establishment of a joint Health Visiting/School Nursing Service in that area, was a major advance in the work of the School Health Service. We look forward to a steady development of the joint service.

The greater part of this report has been drafted by Dr. F. B. Shevlin, Senior Assistant School Medical Officer. To him, to the staff of the School Health Service, the Chairman and members of the Education Committee, the Chief Education Officer, and all who have contributed to the work for the children, I tender my sincere thanks for their unfailing help during the year.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

C. B. CRANE,

*Principal School Medical Officer.*



# THE EDUCATION COMMITTEE

---

## *Chairman:*

Mr. Alderman G. T. Rogers, J.P.

## *Vice-Chairman and Chairman of Special and Social Services Sub-Committee:*

Mr. Councillor A. L. Philipson.

## *Committee:*

The Rt. Hon. The Lord Mayor

(Mr. Alderman F. Brown, J.P.)

Mr. Alderman G. S. Bellerby.

Mr. Alderman R. Scruton, J.P.

Mr. Councillor A. E. Hopper.

Mr. Councillor L. Daley.

Mr. Councillor R. Scobey.

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Mr. Councillor L. Buckle.

Mr. Councillor F. W. Fawcett.

Mr. Councillor S. Palphramand.

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

Mr. Councillor E. T. Pugh.

Mrs. Councillor I. Faulkner.

Miss E. Netherwood, B.A.

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

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

Mr. J. E. Coleclough, M.A., LL.B.

Mrs. E. Wilson.

The Rev. R. V. Bainton, M.A.

The Rev. Fr. P. McAniff.

## *Chief Education Officer:*

H. Oldman, M.A.

## *Deputy Education Officer:*

E. E. Sharpe, M.A. — To 31.7.1955.

J. Threlfall, B.A. — From 1.11.1955.

# ANNUAL REPORT

of the

## PRINCIPAL SCHOOL MEDICAL OFFICER

for the

YEAR ENDED 31st DECEMBER, 1955.

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### STAFF OF THE SCHOOL HEALTH SERVICE DURING 1955

---

*Medical Officer of Health and Principal School Medical Officer:*

Miss C. B. Crane, M.B., B.S., D.P.H. (London).

*Senior Assistant School Medical Officer:*

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

*School Medical Officers:*

J. S. Robertson, M.B., Ch.B., M.R.C.S., L.R.C.P.

Miss I. D. M. Forster, M.B., Ch.B. (resigned 30.7.55).

Miss M. C. Barnet, M.B., Ch.B. (commenced 16.9.55).

Mrs. M. C. Robertson, M.B., Ch.B. (temporary—commenced 3.10.55).

*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).

*Principal School Dental Officer:*

G. Turner, L.D.S.

*School Dental Officers:*

C. H. Thomas, B.D.S. (resigned 8.6.55).

J. K. Thornham, L.D.S.

Mrs. S. M. Kennedy, B.D.S. (temporary—8.8.55—8.10.55).

*Superintendent Nursing Officer:*

Miss M. Preston, S.R.N., S.C.M., H.V. Certificate.

*School Nursing Sisters:*

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

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

Miss M. Chetwynd, S.R.N.

Miss D. A. Nairn, S.R.N., S.C.M., H.V. Certificate.

Mrs. L. Reynolds, S.R.N.



*School Nursing Sister in charge of Orthopædics:*

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

*School Nurse/Health Visitors:*

Miss G. I. Callon, S.R.N., S.C.M., H.V. Certificate.

Miss M. C. Kelly, S.R.N., S.C.M., H.V. Certificate.

*Dental Surgery Assistants:—*

Miss R. E. Glew (Dental Nurses' Certificate).

Miss A. Pearson (resigned 25.5.55).

Miss H. R. Sawkill (commenced 10.1.55).

Miss B. A. Tomlinson (commenced 17.10.55).

*Speech Therapist:*

Mrs. Z. Statman, L.C.S.T. (resigned 17.9.55).

Miss M. Dodson, L.C.S.T. (commenced 1.12.55).

*Organisers of Physical Education:*

Miss O. M. Smith.

Mr. G. Rees.

*Lip Reading Tutor:*

Mrs. Riley (to 31.7.55) (part-time).

*Chief Clerk:*

Miss D. J. Blaker.

*General Clerks:*

Miss M. Sowray.

Miss H. F. Milburn.

Miss C. M. Lonsdale.

Miss M. H. West.

*Clerical Assistants:*

Miss S. S. D. Starr.

Mrs. E. E. Hedinburgh.

---

STAFF OF CHILD GUIDANCE CLINIC.

*Psychiatrist:*

Dr. Irene Turgel, M.D.

*Psychologist:*

Miss E. M. Johns, M.A., Dip. Ed., A.R.C.M.

*Psychiatric Social Worker:*

Miss M. Monkley, M.A., Dip. Social Studies, Certificate of Psychiatric Social Work (Edinburgh).

*Secretary:*

Miss D. M. Snowball.

## GENERAL

### *Changes in Staff.*

These are noted in the introduction.

Dr. J. S. Robertson was released for the Academic Year commencing October, 1955, to study for the Diploma in Public Health of the University of London. His wife, Dr. Mary C. Robertson deputised for him during his absence.

### *Courses and Meetings Attended.*

Sisters S. Dalton and L. Reynolds attended the Summer School of the Central Council for Health Education at Bangor from 16th to 26th August.

Miss M. Monkley, the Psychiatric Social Worker, attended the Child Guidance Inter-Clinic Conference organised by the National Association for Mental Health on 26th March. Mrs. Z. Statman, the Speech Therapist, spent from the 25th to the 29th July at Bedford College, London, at a Conference of the College of Speech Therapists. A talk on "The School Health Service" was given to the Mothers' Club of the Infant Welfare Department on 10th August by Dr. F. B. Shevlin, who has continued to attend committee meetings of (1) Council of the School Health Group of the Society of Medical Officers of Health; (2) The Technical Advisory Panel on Ophthalmology to the Leeds Regional Hospital Board; (3) The Supplementary Ophthalmic Services Sub-Committee; (4) The Co-ordinating Committee dealing with problem families.

### *Camps for Handicapped Children.*

Three children were sent to a holiday camp at Whalley organised by the British Diabetic Association, and one child to a centre run by the British Epilepsy Association at Evenley Hall, Brackley.

### *Tuition outside School Premises.*

During the year home tuition was given to four children and tuition in general hospitals to two children. During December the Education Committee authorised the Chief Education Officer to arrange tuition in hospital for children who would otherwise be having full-time education, who are recommended for such tuition by the Principal School Medical Officer, and who are likely in the opinion of the Principal School Medical Officer to be in hospital for not less than four weeks after the date on which tuition can be commenced.

### *School Nursing Sisters and Health Visitors.*

The Cornlands Road Clinic, on the Gale Lane Estate, operated from early in the New Year, and was opened officially on 14th April. Two nurses undertaking combined Health Visiting/School Nursing duties have been centred on this clinic, as a first step towards the integration of the nursing services.



Annual leave for School Nursing Sisters has been approved by the Education Committee to conform with the four weeks' annual leave plus Bank Holidays Whitley Council Award for Health Visitors. The hours of work were also adjusted with those of the Health Visitors, so that the nurses now have every other Saturday morning off duty.

#### *Rags for Goldfish.*

On a recommendation of the York Education Committee, the Yorkshire Association of Education Committees made representations to the National Association of Local Authorities to amend the present regulations and prevent the practice of itinerant hawkers exchanging rags for goldfish.

#### *New Health Centre.*

The Education Committee supported a resolution of the Health Committee that the Rougier Street site be developed as a central Health Centre. They favour the retention and development of the central school health services premises on the site.

#### *New Open Air School for Delicate Children.*

It was recommended that a new open air school to accommodate 120 delicate children and 15 partially-sighted children be included in the 1957 building programme.

#### *Playing Fields.*

An experimental scheme has been approved to allow schoolchildren to use certain playing fields under supervision during the main school holidays except Christmas. Supervisors will be responsible for the proper use of the fields.

#### *North Regional Association for the Deaf.*

The Education Committee continue to support the activities of this association and for the year made a contribution of £30 3s. 9d., representing a rate of 5s. 9d. per 1,000 of the population.

#### *Handicapped Child.*

A request was received from the Health Committee for the case of a deaf, spastic child, who was declared ineducable in 1952, to be reviewed under the provisions of Section 8 of the Education (Miscellaneous Provisions) Act, 1948, and to be re-examined under Section 57 of the Education Act, 1944. A recommendation arising out of the examination was made early in 1956 that the child be given a trial in a school for the deaf.

### HEALTH EDUCATION

The school medical inspection still constitutes, in our opinion, the chief opportunity for the promotion of the individual health of the child. It is then that the doctor and the school nursing staff are able to discuss with mothers personal problems relative to their children.



Parents of entrants are given a copy of "Children's Shoes" at the first school medical inspection. It is hoped that future years will see an improvement in the incidence of minor foot defects caused by ill-fitting and unsuitable footwear.

### HYGIENE IN SCHOOLS

The maintenance and repair of school premises, including redecoration, has proceeded in accordance with the Authority's programme. 520 new primary school places have also been opened during the year.

A sum of £5,000 was again allocated for the replacement of obsolete school furniture.

### SCHOOL POPULATION AND ATTENDANCE

The school population continues to grow. Since the end of the war the increase has been over 26%. The number of children on the registers of Primary, Secondary and Special Schools in December, 1955, was 17,508. Of this number only 439 were under five. The attendance of the over fives throughout the year was 93% and of the under fives 84%.

### MEDICAL INSPECTION

The number of children examined by the School Medical Officer during a two-hour session at school remains at twenty. Experience shows that this is the maximum number that can be satisfactorily inspected in the time.

Medical Inspection has been carried out on the same age groups as in previous years, viz. :—

- (a) Entrants to the Infant Departments (usually about five 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).

The number of defects discovered among the eight year old group justifies this inspection. Most children of this age have had the common infectious diseases, and it is important to look for untreated sequelae. Special inspections have also been made at the request of parent, teacher or school nursing staff of any children thought not to be in good health. Children with defects found at previous inspections have been re-inspected to see if the defects have been remedied.

During the year 7,640 children were inspected compared with 7,015 in the previous year. The number of special inspections was 6,333 and the number of re-inspections 3,118.

### GENERAL CONDITION

The percentage of children assessed by the examining doctors as having poor physical condition in 1955 was 2.1%. This figure is slightly above that of the preceding year (1.6%) but this may possibly be due to the varying standards of medical officers entering the service.



## AVERAGE HEIGHTS AND WEIGHTS

There are still in use some 15 old weighing machines amongst the 32 being used. These old machines, which are being replaced progressively, may only be accurate within two or three pounds compared with two ounces for the new ones. The average weights of the children nevertheless show a comparatively close approximation to those of last year, with the exception of the fourteen year old boys whose average weight has declined by just over a pound. All the other average weights show only minor changes—very slight losses in the cases of the four and five year olds of both sexes and gains in all other groups.

In the case of the average heights only minor changes are evident, except in the case of the fourteen year old boys, where the average has declined 0.29 inches amongst the 480 inspected, and amongst the eleven year old girls, where the average has risen by three-quarters of an inch amongst the 433 inspected.

Because of loss of weight as shown by the annual weighing, 37 children were investigated. Nothing abnormal was found.

AVERAGE HEIGHTS AND WEIGHTS OF CHILDREN EXAMINED  
IN 1955  
(ALL WEIGHING MACHINES)

BOYS					GIRLS				
Age	Number Examined	Average Height		Average Weight		Number Examined	Average Height		Average Weight
3	4	Ft. 3	Ins. 2.63	St. 2	Lbs. 8.69	—	Ft. —	Ins.	St. lbs —
4	198	3	5.78	2	12.72	181	3	5.29	2 11.04
5	659	3	7.11	3	1.07	538	3	6.63	2 13.04
6	92	3	9.02	3	4.77	75	3	9.04	3 4.86
7	55	3	10.97	3	7.88	47	3	11.18	3 9.2
8	958	4	2.21	4	3.1	957	4	1.87	4 1.65
9	70	4	4.14	4	7.59	60	4	3.35	4 5.45
10	391	4	6.59	5	2.79	348	4	6.28	5 2.72
11	416	4	7.78	5	7.10	433	4	8.3	5 8.42
12	38	4	9.61	5	12.36	71	5	0	6 8.48
13	177	5	0.87	6	13.77	200	5	1.31	7 5.81
14	480	5	2.26	7	7.98	452	5	1.8	7 12.44
15	255	5	5.74	8	11.83	252	5	3.25	8 9.07
16	46	5	8.02	9	13.41	68	5	3.32	8 11.4
17	45	5	9.09	10	6.7	70	5	4.41	9 4.21
18	—	—		—		1	5	3.5	8 13.75

FINDINGS OF PERIODIC MEDICAL INSPECTIONS IN ALL  
SCHOOLS

During the year 7,640 children compared with 7,015 in the previous year have had periodic medical inspections. This number is made up of 1,566 entrants to and 1,465 leavers from primary schools, 1,297 leavers from secondary schools, 1,966 children aged 8 to 9 years, and 1,346 others, including children at the technical college, the open-air school and the grammar schools.



16.7% of children were found with defects requiring treatment excluding dental defects and infestation. Amongst the 8 year olds the percentage found with defects was as one would expect, slightly higher than the general percentage as by this age most of the children have been exposed in school to the hazards of infectious and other diseases.

### VISION

The distant vision of all schoolchildren, including entrants, is tested regularly and at least before each school medical inspection (i.e., every three years). Snellen Type Cards are used for the older children and Dr. Beale Collins' Picture Cards for the entrants. The picture type card for the entrants is preferred to the "E" test because the infants respond more readily to it, the School Nursing Staff can test them more quickly, and although it is not as accurate as the "E" test, it discovers all infants who are in need of a full ophthalmic investigation. During the year, out of the 1,566 entrants tested, only 20 failed to co-operate and will be tested next year. The near vision is tested during a child's last year at the primary school. During the year 4.6% of those examined were found to need ophthalmic treatment, whilst another 10.6% had already received such treatment, making 15% altogether, or 17.1% if squints are included. Amongst the entrants there were 36 found to need treatment and 80 observation having already been treated, giving a percentage of 7.4% of entrants in need of ophthalmic care or 10.3% if squints are included.

### SQUINTS

Of 146 children with squints all had already been detected and sent for investigation. There were also a few in whom it was doubtful if a squint really existed: 46 of this number were entrants, and had already been detected by the Infant Welfare Department or General Practitioners. Some had been operated on: some were attending the Orthoptic Clinic: most had had glasses prescribed. The percentage of children found with squints was 1.91% (entrants 2.9%) compared with a percentage of 1.85% (entrants 3.7%) last year.

### EXTERNAL EYE DISEASES

76 children were found with external eye diseases, 32 of whom needed treatment; 20 were suffering from mild blepharitis and 17 from conjunctivitis.

### EAR DISEASE AND DEAFNESS

Of 541 children found with ear trouble, 27 with middle ear disease and 46 with deafness were requiring treatment. Of 357 requiring observation, 107 were for old middle ear disease and 156 for deafness. 165 children had wax in their ears.

### TONSILS AND ADENOIDS

409 children were seen at school medical inspections with enlarged tonsils or adenoids or both. 39 of these were thought to need operative treatment, i.e., 0.5% of those inspected.



Reports have been received from hospital in respect of 274 children who have had their tonsils and adenoids removed in the same period. This number is considerably less than 1954, when the figure was 416. At the end of the year there were 26 awaiting operation, so that there is now little delay before admission to hospital.

#### ENLARGED CERVICAL GLANDS

278 children were found to have enlarged neck glands, 2 needing specialist treatment.

#### SKIN DISEASES

698 children were found with skin diseases. The commonest conditions being epidermophytosis 108, warts 64, acne vulgaris 92, urticaria 52, eczema 48, ichthyosis 19, and verrucae 21. 2 cases of ringworm of body were discovered at school, and 17 cases of impetigo.

No cases of scabies was discovered at school medical inspections, but 22 (an increase of 10 over last year) were treated at the cleansing centre. 9 of these were cases of scabies; the other 13 were contacts. 8 families were involved.

#### ENURESIS

128 children—83 boys and 45 girls—were stated by their parents to be bed-wetters. This number represents 1.7% of all those inspected. Amongst the entrants the percentage was 3.1%.

A pilot survey conducted by Dr. Brandsby two years ago in York revealed a much bigger percentage than this, viz.: 9% of the total school population. The problem of enuresis still requires much research regarding causes and treatment.

#### SPEECH

14 of the 26 children found with speech defects requiring treatment were stammerers; the other 12 had defective articulation of varying types. 83 other children needed observation.

#### RHEUMATISM

No child was found at school medical inspections with rheumatism. Of 9 medical certificates received during the year for children absent with rheumatism, 1 had rheumatic fever. Five reports were received from hospital relating to children suffering from rheumatism, 1 of them from rheumatic fever.

#### HEART DISEASE

Although there were 246 children noted as needing observation because of some heart murmur or other condition, no new cases of organic disease were encountered necessitating a hospital investigation.



## DISEASES OF THE LUNGS

20 of the 414 children found with diseases of the lungs were requiring treatment—10 had bronchitis and 2 asthma. 54 children suffering from asthma were seen at school medical inspections; 2 had bronchiectasis. The majority had bronchial colds or slight catarrh.

## DEVELOPMENTAL DEFECTS

Of 553 children found with developmental defects, 121 had undescended testicles, 99 were obese, 47 had phimosis, 53 had defective colour vision, 25 naevi, and 98 herniae. 32 hernia cases and 28 other cases needed treatment. During the year reports on 41 schoolchildren with herniae and 36 with undescended testicles were received from hospital.

## ORTHOPÆDIC DEFECTS

1,116 children were found with orthopædic defects, only 324 of whom needed treatment. The commonest deformities were postural defects (327), flat foot (275), knock-knee, mostly of a mild degree (73), valgus deformity of the ankle (80), hallux valgus (56), and deformed toes (71).

## NERVOUS DISEASE

26 children with epilepsy were seen at the routine school medical inspections; only 8 needed further treatment. Other nervous complaints from which children were stated to suffer were convulsions, twichings, excitability, poor nervous control, giddiness, muscle weakness, neuralgia, etc. 19 children were said to be thus afflicted.

## PSYCHOLOGICAL DEFECTS

108 educationally subnormal children were inspected at school. 695 children exhibited signs of possible psychological instability such as were shown by biting their finger-nails (316), wetting their beds (128), sucking their thumbs (30), exhibiting fear of the dark or other sign of nervousness (72). This number (695) constitutes 9.1% of those examined, an increase over last year's percentage of 7.4%.

## TUBERCULOSIS

There were 7 notifications in respect of tuberculosis amongst school-children during the year; in 2 cases the hilar glands were involved; in 2 the cervical glands; in 2 the lungs. In the seventh case hip disease was suspected but the diagnosis was not confirmed.

## PREVENTION OF TUBERCULOSIS

X-ray examination of the chest is now included as part of the medical examination of all newly-appointed persons, whether teachers, canteen workers in the School Meals Service, or others whose work brings them into contact with schoolchildren. 94 people were X-rayed under this scheme (this includes 28 entrants to Training Colleges). In no case was any active pulmonary disease found. At the Chest Clinic 21 schoolchildren contacts of active cases of tuberculosis received B.C.G. Vaccination from the Tuberculosis Officer.



In October B.C.G. Vaccination was offered to the 13 year age group. The vaccination was carried out by the School Medical Staff, the Health Committee reimbursing the Education Committee for their work. Explanatory leaflets with a consent form attached were distributed through the schools. Children from families or households with known cases of tuberculosis were referred to the Chest Clinic. Apart from the leaflets no other form of propaganda was used and yet an acceptance rate of 58.9% was secured. It was found that the susceptibility rate among 886 of the 893 children whose parents gave their consent was 68.4%, whilst the percentage of children who had already been exposed to infection as shown by the Mantoux Test was 31.6%. The Mantoux Tests were carried out using the 1 in 1,000 P.P.D. solution, with the subsequent B.C.G. Vaccination of the negative reactors. The Mantoux testing of the 824 children out of the 893 who originally gave their consent with the subsequent B.C.G. Vaccination of the 573 negative reactors was completed within the fortnight, with the exception of the absentees. Eight weeks later the arms were inspected and apart from a few which had had their scabs knocked off, were found to be satisfactory. A few children had very small axillary glands palpable but in no case did they cause any discomfort.

In a few cases where the site of the injection was red after the scab had been knocked off, a dressing with Ung Bismuth Subgallate for a few days reduced the inflammation.

51 children of the 893 whose parents had given their consent were referred to the Tuberculosis Officer because their families or households had had tuberculosis in some form at some time or other. 28 of these 51 children were known to the Tuberculosis Officer and 20 of them were known to be Mantoux positive. Of the other 23 children, 7 were Mantoux positive. Of the remaining 24 children from this group of 51, 5 refused and the remaining 19 accepted B.C.G. Vaccination at the Chest Clinic.

The results are summarised as follows :—

No. of parents or guardians of 13 year olds circularised (boys 782; girls 734) ... ..	1,516
No. of parents or guardians who gave their consent (boys 436; girls 457) ... ..	893
Consent Rate ... ..	58.9%
No. of children Mantoux tested (boys 407; girls 417) ...	824
No. of children not Mantoux tested ... ..	69
Reasons : (1) Because of tuberculosis in family or household ... (see below)	51
(2) Absent from school ... ..	9
(3) Found not to be in 13 year old age group ... ..	8
(4) Parental consent withdrawn ...	1



No. of children who gave POSITIVE reaction to Mantoux test ... ..	244
Percentage of children who gave Positive reaction ...	29.6%
No. of children who gave NEGATIVE reaction to Mantoux test ... ..	573
Percentage of children who gave Negative reaction ...	70.4%
No. of children (negative reactors) who were vaccinated (boys 277; girls 294; absent 2) ... ..	571
No. of children who showed satisfactory reaction on arm 8 weeks later ... ..	571
No. of children referred to Chest Physician because of tuberculosis in the family ... ..	51
No. of these households known to the Chest Physician ...	28
No. of children from these households giving positive Mantoux reactions ... ..	22
No. of children from these households giving negative Mantoux reactions ... ..	4
No. of children whose parents refused to attend Chest Clinic ... ..	2
No. of these households unknown to the Chest Physician	23
No. of children from these households giving positive Mantoux reactions ... ..	7
No. of children from these households giving negative Mantoux reactions ... ..	12
No. of children whose parents refused to attend Chest Clinic ... ..	4
Susceptibility Rate (including children referred to Chest Clinic) ... ..	68.4%

### VACCINATION AND IMMUNISATION

Below in summary form are given the percentages of children vaccinated against smallpox and tuberculosis and immunised against diphtheria, whooping cough and tetanus at the different age levels.

Groups	Vaccination		Immunisation		
	Smallpox	Tuberculosis	Diphtheria	Whooping Cough	Tetanus
Entrants to					
Primary Schools	34%	2.2%	66.9%	33.3%	5%
Eight year olds ...	40.7%	2.3%	72.2%	18.0%	3.2%
Leavers from					
Primary Schools	38.4%	1.5%	73.7%	8.9%	4.2%
Leavers from					
Secondary					
Schools ...	30.7%	1.4%	71.4%	7.1%	3.9%
Others	37.9%	2.4%	72.1%	10.8%	4.7%



*Smallpox.* The percentage of entrants who were vaccinated showed a further decline due no doubt to the abolition of compulsory vaccination in 1948. The percentages in this group since 1948 are as follows:—

1948	1949	1950	1951	1952	1953	1954	1955
43.5%	46.8%	46.2%	48.9%	50.8%	42%	36%	34%

The children born in 1948 would become school entrants in 1953. From the figures given above it is seen that the decline commenced in that year.

*Tuberculosis.* The children who had received B.C.G. Vaccination shown in the above figures, would be mostly family contacts of cases of tuberculosis and were medically examined at the routine school inspections during the year.

*Diphtheria.* The percentage (71.3%) of all the children inspected who had been immunised against diphtheria remained about the same as last year; amongst the entrants the percentage has increased from 65.5% to 66.9% and it is hoped that it may rise to over 70% in the coming year so that any fear of a return of diphtheria may be dispelled.

*Whooping Cough.* It is pleasing to note that one-third of the children entering school have been immunised against whooping cough. The low incidence of whooping cough (74 cases during the year) must be due in some measure to these preventive measures even though the protection given by the immunisation is not so effective as in the case of diphtheria.

*Tetanus.* The majority of children immunised against tetanus have no doubt been done because a triple antigen has been used which gives protection against diphtheria, whooping cough and tetanus, and the one injection suffices.

#### PARENTS OR GUARDIANS PRESENT AT SCHOOL MEDICAL INSPECTIONS

62.5% of parents or guardians attended the school medical inspection of their children during the year.

The percentages in age groups were:—

Entrants to Primary Schools	...	...	88.6%
Eight year olds	...	...	81.4%
Leavers from Primary Schools	...	...	75.1%
Leavers from Secondary Schools	...	...	10.8%
Additional Periodics	...	...	40.6%

#### DEFECTIVE COLOUR VISION

49 children were referred to the County Hospital to have lantern tests. The results were as follows:—

Number of children found to be unsafe for certain employments	31
Number of children found to be safe for any employment	7
Number of children who failed to attend	11



## ST. PAUL'S NURSERY SCHOOL

There are 40 places for children age 2-5 for which there is a good demand. Dinner is provided at school and vitamin supplements. The children have a mid-day rest on their beds. A school medical officer and a school nursing sister visit frequently and a school medical inspection takes place every term. This is the only Nursery School in the City but there is a nursery class in one of the Infant Schools.

## AUDIOMETRIC TESTING

Audiometric Testing has been carried out in three schools by Dr. J. S. Robertson using a gramophone audiometer. 326 children were investigated. 250 showed that their hearing was normal in both ears after being tested once. 75 were subjected to a retest because of failure with one or both ears to reach a satisfactory standard. 59 of these passed at the second trial, leaving 16 who needed an aural examination. 1 child was absent for the second test.

On investigation the 16 children were found to be deaf because of :—

Otitis Media	...	...	...	...	8
Wax	...	...	...	...	2
Catarrh	...	...	...	...	2
Effects of Mumps	...	...	...	...	1
No cause discovered	...	...	...	...	3

In this little survey 5% of the children tested were found to be deaf in one or both ears.

## UNCLEANLINESS AND VERMINOUS CONDITIONS

During the year 409 children (80 boys; 329 girls) were found to be infested with vermin, i.e., at least one nit was found in their hair during the head inspections carried out by the school nursing staff each term. This number gives a percentage of 2.3% of the school population compared with 2.2% in the previous year. It may be that we are reaching the hard core of families who are unable for one reason or another to keep their children clean, and these children infect their playmates at school. The following figures appear to favour this explanation :—

			<i>Girls.</i>	<i>Boys.</i>
Found to be verminous once	...	...	155	60
" " "	two or three times		136	18
" " "	four or five times		33	2
" " "	six or seven times		4	—
" " "	eight or nine times		1	—

When children are found with infested hair by the school nursing staff, the mothers are asked to clean them up. If this task has not been carried out satisfactorily when the child is seen in school after a short interval, the child is referred to the cleansing centre operated by the Health Committee.



The nurse in charge of this centre arranges to inspect the whole family and tries to get all infested members cleaned up at the same time. During the year 72 families attended the centre, but only in 11 cases did the mother attend with the children. A free issue of D.D.T. hair emulsion is made to any parent who will attend the central clinic to collect it. This emulsion would prevent any infestation if used regularly each week.

### THE OPEN AIR SCHOOL

I am indebted to Dr. M. C. Barnet, School Medical Officer, who is responsible for the medical care of the children at the school, for the following report :—

The Open Air School continues to fulfil its most useful role of providing special school facilities for those children whose health prevents them from obtaining the full benefit from a normal school curriculum.

Children are transferred from ordinary schools on the advice of the School Medical Officers or Family Doctors.

Special buses provide transport. The hours are shorter, and there is a daily rest of 45 minutes after dinner. A drink and light refreshment is given before going home. In addition each child has two-thirds of a pint of milk daily and vitamin supplements. The School Nursing Sister holds a minor ailments clinic twice a week. The Medical Officer visits the school twice weekly and in winter gives ultra-violet light treatment to those who are considered to be in need of it. The children are weighed and measured monthly. Every child is fully examined medically each term when the parents are invited to be present, in order to assess the child's health and progress.

Physical training commensurate with the children's abilities is included in the curriculum. Asthmatic children and those with certain other chest conditions have daily breathing exercises, which have proved to be of considerable value in these cases. The classrooms are well ventilated and as many of the school activities as possible are conducted in the open air.

The curriculum has to be planned to provide for the children's educational needs whilst endeavouring to improve their health. Classes are small and this enables teachers to give more time and help to each child's problems. It is noticeable that many of these children who have had considerable absences from school appear timid, uncertain of themselves, as well as being behind-hand with their school work. It is interesting to observe many of them responding rapidly, gaining confidence, and showing improvement in their work, as their general health improves. Tribute must be paid to the staff for their patient guidance of the children, and also for the happy atmosphere prevailing in the school.



*Attendances in 1955.*

Number of children on register, 1st January ...	...	...	89
Number of children on register, 31st December ..	..	...	91

*Admissions during 1955.*

During the year 41 children were admitted for the following reasons :—

Debility 21, bronchiectasis 7, asthma 4, bronchitis 2, post tuberculous debility 1, old T.B. spine 1, post rheumatic fever 1, recurrent respiratory infection 2, maladjustment 1, congenital deformities 1.

It will be seen that general debility and respiratory conditions accounted for all but 5 of the admissions. Amongst these 36 cases at least 9 had a poor background—overcrowding, poor housing or bad management.

*Discharges during 1955.*

During the year 39 children left the Open Air School for the following reasons :—

Returned to ordinary school 28, reached school leaving age 4, left York 4, transferred to residential school 1, transferred to special school for E.S.N. pupils 1, killed in road accident 1.

Amongst the 28 who returned to ordinary schools were a very small number who were removed by the parents against the advice of the school and of the Medical Officer.

### CLASS FOR THE PARTIALLY-SIGHTED

There were 15 children in this class (including 1 from the West Riding), which is accommodated in the Open Air School, during the year.

Only three of them were cases of high myopia. The others had the following diseases :—

Nystagmus ...	...	...	...	...	...	4
Heredo-macular degeneration	...	...	...	...	...	1
Bilateral optic atrophy	...	...	...	...	...	1
Congenital dislocation of lens	...	...	...	...	...	2
Retrobullar optic neuritis following scarlet fever	...	...	...	...	...	2
Congenital cataract in each eye	...	...	...	...	...	1
Retro-lental fibroplasia	...	...	...	...	...	1

This class is full and there is 1 child suffering from the effects of toxoplasmosis (a very rare disease) awaiting admission.

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

The number of children at this school at the end of the year was 99 (50 boys and 49 girls), including 1 West Riding, 1 East Riding, and 9 North Riding children. 17 boys (including 1 from the North Riding) and 12 girls were admitted during the year, and 16 boys (including 1 West Riding and 2 North Riding children), and 9 girls (including 2 from the North Riding) were discharged.



Children leaving this school are recommended for either statutory or voluntary supervision. This supervision is carried out in both cases by the Health Committee.

## HANDICAPPED CHILDREN

December, 1955

*Blind.* 1 girl and 1 boy were in residential schools because of blindness.

*Partially-sighted.* 8 boys (including 1 West Riding) and 7 girls were in the Day Class for the partially-sighted.

*Deaf.* There were 6 boys and 5 girls in residential schools and none awaiting admission.

*Partially deaf.* There were no children in residential schools and none waiting for admission, but 5 boys and 6 girls attend York day schools and use hearing aids.

*Delicate.* There were 48 boys and 46 girls, including 3 children from the North Riding, and 1 child from the East Riding, at the Day Open Air School.

*Diabetics.* 2 girls and 2 boys known to have diabetes attend ordinary schools. There were no children with this complaint at residential schools.

*Educationally Subnormal.* 50 boys and 49 girls, including 9 from the North Riding, 1 from the West Riding, and 1 from the East Riding, were in attendance at the Day Special School (E.S.N.). In addition 4 boys and 3 girls were in residential schools. There was 1 boy awaiting admission to a residential school, and 15 (including 2 from the North Riding) were waiting for admission to the Day Special School (E.S.N.).

*Epileptics.* 21 girls and 22 boys with epilepsy attended day schools in York. 3 were at the Open Air School; 6 at the Special School (E.S.N.); the remainder at ordinary schools.

*Maladjusted.* There was 1 boy in a residential school for maladjusted children. There were 2 children waiting for admission.

*Physically handicapped.* There were 3 boys and 1 girl in residential schools, and none awaiting admission.

*Defective speech.* 119 children attended the York Speech Therapy Clinic during the year. There are no children at residential schools and none awaiting admission.

## DEAF AND PARTIALLY DEAF

There were eleven children (6 boys and 5 girls) in residential schools for the deaf during the year compared with nine in the previous year. The opening of a nursery department in one of the residential schools enables deaf children to be sent away earlier than previously. There were eleven partially deaf children (5 boys and 6 girls) wearing hearing aids and attending ordinary schools; 6 of these children were given tuition in lip reading during the year.



## INFECTIOUS DISEASES

The following table shows the monthly incidence of infectious diseases during 1955, with comparative totals for the previous five years.

Month	Diph- theria	Scarlet Fever	German Measles	Measles	Chicken- pox	Whoop- ing Cough	Mumps	Polio- myel- itis
January	—	5	1	78	5	4	9	—
February	—	5	—	254	—	3	4	—
March	—	5	—	426	4	15	8	—
April	—	7	—	205	1	3	6	—
May	—	9	—	34	—	3	2	—
June	—	7	3	46	5	10	—	—
July	—	7	1	4	2	9	—	—
August	—	—	—	1	—	14	—	1
September	—	5	2	2	2	10	—	—
October	—	5	2	—	1	2	2	—
November	—	12	2	—	7	—	3	—
December	—	19	—	4	4	1	1	—
Total, 1955	—	86	11	1,054	31	74	35	1
„ 1954	—	113	5	109	275	38	154	—
„ 1953	—	202	213	181	94	107	15	4
„ 1952	—	199	84	1,111	197	182	237	9
„ 1951	—	179	1	801	132	467	41	5
„ 1950	—	215	6	1,485	111	238	33	17

Last year was the sixth year during which there were no cases of diphtheria in the City. Although whooping cough showed an increase, the incidence is still low compared with previous years before immunisation was available. There was the expected epidemic of measles during the early months. Scarlet fever, for the most part of a very benign type, provided its one or two victims each week throughout the year. Mumps and chicken-pox only affected 35 and 31 schoolchildren respectively. There was only 1 case (a boy) with confirmed poliomyelitis amongst schoolchildren. He was left with a residual paralysis.

## PHYSICAL EDUCATION IN SCHOOLS

I am indebted to Miss O. M. Smith and Mr. G. Rees, Organisers of Physical Education, for the following reports :—

### *Report on Remedial Classes for Infants and Girls.*

During this year there were more children in need of remedial training for weak posture than for flat feet. The number of posture classes was

increased therefore to three and there were three for flat feet, instead of two and four respectively. The numbers attending were about the same as last year. 58 children received flat foot treatment; of these 37 were discharged: 55 were treated for weak posture, of whom 43 were discharged. 2 parents refused treatment for their girls; 1 girl was dismissed for non-attendance; 10 left York before treatment could be completed.

Attendance percentages were not as good as last year's, which was a record. The main reason for lower attendance was illness. Once again thanks are expressed to Head Teachers and parents for their co-operation and in particular to those mothers who bring with their children, those of other parents who are working. It is most helpful to be able to give remedial exercises as soon as possible after the defect is detected as this usually means the cure can be accomplished more quickly.

The year's figures are summarised below.

Term			Total Attending	Flat Foot Classes	Dis- charged	Posture Classes	Dis- charged	Attend- ance %
Spring	...	...	52	25	8	27	15	76½
Summer	...	...	55	24	8	31	19	74
Autumn	...	...	49	35	21	14	9	79

#### *Remedial Classes for Boys.*

Remedial classes for boys have been held throughout 1955 in the gymnasium at the St. George's R.C. Secondary Modern School.

In the flat foot class a total of 50 boys attended for special remedial exercises. Of these, 22 yielded successfully to treatment and were subsequently discharged by the Senior Assistant School Medical Officer, whilst 3 left the district, 2 refused treatment and 2 left school on attaining the age of 15 years. The remaining boys will attend for further treatment in the new year. Many parents of the boys have shown interest in attending these classes as spectators and have readily co-operated in supervising the furtherance of the children's efforts in prescribed remedial exercises at home.

In the class for boys with defective posture out of a total of 40, 15 were discharged by the Senior Assistant School Medical Officer. Of the remainder, 1 left the district and 4 left school, whilst 3 refused to continue treatment.



Those whose treatment is incomplete will attend again with new members in the new year.

In general both the attendances and the results have been satisfactory throughout the year.

### SCHOOL CAMPS

The following camps were held during the year.

(1) York Children's Holiday Camp (Organiser : Mr. F. Birkett). 48 poor children of both sexes selected from the schools by the head teachers spent a week at the Holiday Fellowship Camp at Staithes under the care of Mr. C. S. Baxter and seven volunteers from the teaching staffs of the City. Good weather, well organised games and outings supplemented by the good food provided by the Warden and his wife made this week a memorable one for the children. The Education Authority made a grant of one pound in respect of each child who attended the camp.

(2) Haxby Road School Camp (Organiser : Mr. J. Huscroft). 39 boys attended the first week of this camp and 36 girls the second week at Robin Hood's Bay. The camp was run by 9 volunteer teachers assisted by some Fishergate Old Boys, who cooked excellently. The children's ages ranged from ten to fourteen years. As the weather was so good much time was spent on the beach. The whole holiday was very successful.

(3) York Family Service Unit Camp. This camp at Osmotherley was organised by the York Family Service Unit for the children of the problem families under their care. 39 children between the ages of 7 and 14 years were accommodated during the 3 weeks of the camp, each child having a stay of a week. All these children were inspected by the School Medical Officers prior to going away.

### PROVISION OF MEALS

The percentage of York schoolchildren having their midday meal at school during December, 1955, was 34.7% compared with 32.8% the previous year. The percentage of meals provided free to necessitous children during the course of the year was 13.6%. 4.4% of the meals served at Grammar Schools are provided free. During school holidays only 22.6% of the children entitled to free meals attend for them.

The following tables show the demand for meals in the different type of school throughout the year, and the number of free meals provided :—



## SCHOOL MEALS

Average number supplied daily to children  
All Schools

1955				Paid	Free	Total
January	...	...	...	4,620	642	5,262
February	...	...	...	4,591	676	5,267
March	...	...	...	4,579	685	5,264
April	...	...	...	4,645	695	5,340
May	...	...	...	4,415	646	5,061
June	...	...	...	4,551	683	5,234
July	...	...	...	4,279	676	4,955
September	...	...	...	5,018	630	5,648
October	...	...	...	5,070	643	5,713
November	...	...	...	5,050	648	5,698
December	...	...	...	4,986	641	5,627

Number of meals supplied on payment in 1955 ... 915,446

Number of meals supplied free in 1955 ... 136,322

### MEALS SUPPLIED DURING SCHOOL HOLIDAYS

Holiday Periods, 1955				Percentage of Usual Demand.		Numbers of dinners served.	
				Paid.	Free.	Paid.	Free.
Easter	...	...		·4	25·8	171	1,788
Whitsuntide	...			·7	23·4	131	639
Summer	...	...		·3	21·3	384	4,214
October	...	...		1·0	20·8	268	670
Christmas	...	...		·4	21·7	199	1,251

Percentage of children in attendance taking Schools Meals during  
December, 1955 :—

At all schools ... 34.7%

### PROVISION OF MILK

Percentage of children, in attendance, at all schools taking a bottle  
of milk in school daily at the end of 1955 ... 88.85%

Percentage of children, in attendance, at all schools (excluding  
Grammar schools) ... 92.35%



## MILK CONSUMPTION

Average number of bottles of milk supplied free daily

1955	Primary Schools	Secondary Modern Schools	Grammar Schools	Further Education	Totals
January	9,960	2,520	948	95	13,523
February	9,960	2,541	945	100	13,546
March	9,891	2,489	896	99	13,375
April ...	10,259	2,431	924	98	13,712
May ...	10,048	2,355	1,020	96	13,519
June ...	10,266	2,328	973	100	13,667
July ...	10,234	2,272	948	96	13,550
August	45	—	—	—	45
September	10,099	3,235	1,280	128	14,742
October	10,133	3,206	1,246	136	14,721
November	10,022	3,105	1,178	135	14,440
December	10,040	3,059	1,177	136	14,412

## PROVISION OF CLOTHING AND FOOTWEAR

Clothing and footwear are provided for schoolchildren under Section 5 of the Education (Miscellaneous Provisions) Act, 1948.

	1955	1954
No. of children reported by Head Teachers and others as suffering educationally by lack of suitable clothing	341	267
No. of families involved ... ..	190	149

Of these 190 families, 2 were found to have an income above scale and 2 children concerned were supplied with clothing and footwear on promise to refund the cost to the Authority

<i>Items.</i>	<i>Boys.</i>	<i>Girls.</i>
Footwear ... ..	194 pairs	169 pairs
Overcoats ... ..	37	33
Jackets ... ..	59	—
Trousers ... ..	85 pairs	—
Underclothing ... ..	8 articles	6 articles
Dresses, tunics, blouses, etc. ... ..	—	115
Hosiery ... ..	—	2 pairs
	383	325

The gross cost of this provision totalled approximately £1,025 (£746 in 1954); an average expenditure of £3 per child (£2 15s. 11d. in 1954).



## ARRANGEMENTS FOR TREATMENT

The School Health Service under the Education Act provides medical treatment for all schoolchildren in maintained or voluntary aided schools, except in those cases where domiciliary or hospital treatment is required. The Authority works in close co-operation with the family doctor and with the hospital.

The School Clinic is open from 9—5-30 p.m., Monday to Friday; 9—12 noon, Saturday; except Bank Holidays.

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

Defective vision and squint; ear, nose and throat diseases; orthopaedic defects; skin diseases, including ringworm of the scalp; emotional, educational and character abnormalities (Child Guidance Clinic); dental troubles, including orthodontic defects; verminous conditions; foot defects needing chiropody; and speech defects.

## HOSPITAL TREATMENT

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 1955.

	Total No. of cases	No. of out- patients	No. of in- patients
<b>SKIN DISEASES.</b>			
Ringworm of scalp ... ..	3	3	—
Warts ... ..	11	11	—
Other diseases ... ..	18	17	1
Scabies ... ..	4	4	—
TOTAL ...	36	35	1
<b>EAR, NOSE AND THROAT DISEASES.</b>			
Tonsils and Adenoids ... ..	385	256	274
Ear conditions ... ..	55	51	6
Nasal conditions ... ..	22	22	1
Other conditions ... ..	40	36	5
TOTAL ...	502	365	286
<b>MEDICAL CONDITIONS.</b>			
Asthma ... ..	7	5	3
Cardiac Disease ... ..	25	25	—
Chest complaints ... ..	81	71	14
Epilepsy ... ..	4	4	—
Rheumatism ... ..	4	2	3
Rheumatic Fever ... ..	1	—	1
T. B. cases ... ..	5	2	3
Other conditions ... ..	141	88	61
TOTAL ...	268	197	85



		Total No. of cases.	No. of out- patients.	No. of in- patients.
SURGICAL CONDITIONS.				
Injuries (casualties, etc.) ...	...	32	12	20
Orthopædic conditions ...	...	84	65	22
Glands ...	...	7	7	—
Cysts ...	...	2	1	1
Herniæ ...	...	41	30	16
Undescended testicles ...	...	36	24	14
Septic conditions ...	...	6	2	4
Other conditions ...	...	52	22	35
TOTAL ...		260	163	112
EYE CONDITIONS.				
Eye Diseases ...	...	19	15	5
Refractions... ...	...	237	237	—
Squints ...	...	88	49	61
TOTAL ...		344	301	66
TOTALS, 1955 ...		1,410	1,061	550
TOTALS, 1954 ...		1,357	1,097	628
TOTALS, 1952 ...		1,983	1,659	500
TOTALS, 1948 ...		2,576	1,960	616



## MINOR AILMENT CLINICS

It has been found from experience that teachers are reluctant to send children, especially young children, out of school to minor ailment clinics unless the ailment is of an urgent character. Since the policy of treating minor ailments in those schools which have special suites of medical rooms was adopted, more children are being treated and they are being seen when the ailment is really minor, i.e., before it becomes serious to the child himself, or possibly to other children. The School Nursing Staff are competent to treat most minor ailments, but when they encounter some condition about which they would like a doctor's opinion, the child is asked to attend the central clinic, preferably with a parent. This policy of treating children in schools finds favour both with mothers who can ill afford the time to wait in doctors' surgeries, and with teachers who are relieved of the anxiety of sending children along busy streets to a central clinic. Furthermore it prevents waste of educational time of the child. It has also been found that these medical rooms if only used on rare occasions, such as for school medical inspections, tend to be brought into regular use for educational purposes, and after a time are no longer regarded as primarily for the use of the School Health Service.

A total of 2,280 complaints or diseases were attended to at the Central Clinic during the year. They were composed of the following : —

Ringworm of the Body 9, Scabies 6, Impetigo 121, Warts 183, Other Skin Diseases 231, Minor Eye Defects 123, Minor Ear Defects 275, Miscellaneous 1,332. The miscellaneous group comprised sprains, cuts, abrasions, septic conditions, sore throats, chills, etc.

The number of children attending the Central Clinic decreases each year as more minor ailment clinics are opened in the newly built schools. The School Nursing Staff attend each of these minor ailment clinics in the schools twice a week. The following figures demonstrate this fact :—

Year	No. of Attendances at the Central Clinic	No. of Attendances at Minor Ailment Clinics in the Schools	Total Attendances
1948	12,897	1,079	13,976
1949	8,897	3,414	12,311
1950	8,288	4,276	12,564
1951	7,997	4,520	12,517
1952	9,408	6,994	16,402
1953	8,378	6,237	14,615
1954	7,432	8,404	15,836
1955	6,343	10,265	16,608

## DETAILS OF THE VARIOUS MINOR AILMENT CLINICS

The following table shows the number of children attending minor ailment clinics throughout the City. The Central Clinic has a doctor in attendance.

	Number of Sessions held	Average Attendance per Session	Number of Children Attending Clinic	Number of Attendances
Central Clinic ...	303	20.9	1,863	6,343
Acomb Secondary Modern School	76	11.3	96	858
Beckfield Secondary Modern School	65	8.9	108	584
Burnholme Secondary Modern School	54	7.2	120	390
Burton Stone Secon- dary Modern School	57	12.5	148	711
Carr Infants' School	73	13.8	133	1,007
Carr Junior School ...	69	10.2	111	705
Danesmead Secon- dary Modern School	50	14.2	116	712
Derwent Junior School	53	18.3	206	970
Fulford Special School	69	10.2	70	701
Hob Moor Infants' School	73	10.7	147	786
Open Air School ...	68	14.0	86	952
St. George's School ...	65	22.1	214	1,440
Westfield Infants' School	58	4.7	85	272
Westfield Junior School ...	44	4.0	52	177
Total Attendances				16,608

### OPHTHALMIC CLINIC

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

During the year 1,386 children attended, making 2,843 attendances. A post-mydriatic test is made on each child refracted. 1,056 children were refracted. 807 children had spectacles ordered for them. 582 only needing a change of lenses. No spectacles were necessary for 150 children. 20 children



did not need to continue wearing spectacles. 51 children with squints were referred to the Orthoptic Clinic and 6 were referred to the Ophthalmologist at the hospital. When a child has an obvious squint it is now referred to the hospital for refraction as well as for orthoptic treatment.

During 1955, 750 children obtained spectacles ordered through the School Clinic. 11 children examined required a reserve pair of glasses because of the serious nature of their visual defect. These were obtained after reference to hospital. 11 children were referred to the Consultant Ophthalmic Surgeon for a second opinion.

After refraction at the School Clinic the parents are given the option of obtaining the child's glasses from any optician in York. Children who break their glasses (463 in 1955) are sent to the School Clinic for a repair form. They are tested with their old lenses, and unless their vision is satisfactory, are referred for refraction again. The sister in charge of the Eye Clinic is available most afternoons after school to deal with such breakages.

In 1955, reports were received in respect of 325 schoolchildren refracted at the hospital. Good relations exist between the personnel of the School Eye Clinic, the local ophthalmic consultants, the local opticians and the administrative staffs of the local hospital and local executive committees. Information concerning the children is readily exchanged so that smooth working exists amongst all concerned in looking after the visual needs of the schoolchildren.

### EAR DISEASES

During the year 275 children have attended the minor ailment clinic, 104 of them having been referred from school medical inspections. 62 of these had discharges from one or both ears; 38 were deaf, 36 had earache, 99 needed syringing for wax, 14 had furunculosis, 10 had catarrhal deafness, and the remainder various complaints. Of the 62 with aural discharges, 31 were successfully treated at the clinic, 8 were transferred to their private doctors, 2 left school, 4 ceased to attend, and the remaining 17 were still receiving treatment at the end of the year. Of the 38 children seeking treatment for deafness, 13 were successfully treated at the clinic, 14 referred to hospital, 2 recommended for lip-reading lessons, and 9 were found to have normal hearing.

In all 1,021 attendances were made by children for ear defects.

### CONVALESCENT HOLIDAYS

During 1955, 11 children have been sent to convalescent homes by the Health Committee, under Section 28 of the National Health Service Act.

## ORTHOPTIC CLINIC

Miss P. Tompkin, the Orthoptist, kindly furnished the following details in regard to the work of the Orthoptic Clinic during the year.

Number of new cases	...	...	...	...	...	42
Total number of attendances	...	...	...	...	...	380
Number of patients seen	...	...	...	...	...	119
Number of patients discharged cured :—						
With operation	...	...	...	...	...	5
Without operation	...	...	...	...	...	12
Number of patients discharged cosmetically cured : —						
With operation	...	...	...	...	...	15
Without operation	...	...	...	...	...	4
Number of patients refused—unsuitable	...	...	...	...	...	4
Current :						
On treatment	...	...	...	...	...	4
On occlusion	...	...	...	...	...	23
On observation	...	...	...	...	...	9
On waiting list for operation	...	...	...	...	...	2

## CHILDREN WITH MULTIPLE DEFECTS

Excluding children who are both deaf and dumb, there are in York 12 schoolchildren with more than one serious defect or deformity.

The combination of defects are as follows :—

1. E.S.N. with epilepsy (3 cases).
2. E.S.N. with hemiplegia (2 cases).
3. E.S.N. with blindness.
4. E.S.N. with epilepsy and right-sided hemiparesis.
5. Hemiplegia with partial-sightedness.
6. Congenital heart disease and paraplegia.
7. Epilepsy and left hemiplegia.
8. Hydrocephalus, spina bifida and spastic paralysis of both legs.
9. Epilepsy with right-sided hemiparesis.

6 of these are accommodated in the Day Special School (E.S.N.), 1 in a residential school, 1 in the Day Special School (Del.), 1 in the class for the partially-sighted, 1 is at home, and 2 attend ordinary school.

## RESULTS OF MENTAL TESTING OF 93 CHILDREN

	<i>No.</i>
Recommended for notification to Local Authority under Section 57 (5)	21
Recommended for notification to Local Authority under Section 57 (3)	8
Recommended to remain at Occupation Centre	1
Recommended for Day Special School (E.S.N.)	28
Recommended for admission to Residential Open Air School	1
Recommended for admission to Residential School for Maladjusted children	2



Recommended for admission to Residential Special School (E.S.N.) ...	4
Recommended to remain at Special School (E.S.N.) ... ..	2
Recommended for re-examination at 5 years of age ... ..	2
Recommended to remain at ordinary school ... ..	24

### 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 163 new cases seen and 281 attendances made.

17 children were admitted during the year to the Adela Shaw Hospital for treatment. Reports have been received from two local hospitals in respect of 84 children seen for orthopædic defects, 22 of whom were admitted for in-patient treatment.

### CHIROPODY

Miss F. Long, S.R.N., S.C.M., M.Ch.S., held a weekly clinic for the treatment of chiropodial defects in schoolchildren. 285 children made 1,135 attendances.

The details of the clinic are as follows:—

<i>Complaint.</i>	1955	1954
Verrucae ... ..	214	227
Corns ... ..	32	39
Other defects ... ..	44	80
Total ... ..	290	346

45 clinics were held altogether.

### EPILEPSY

There are 43 schoolchildren known to be or suspected to be suffering from epilepsy (22 boys and 21 girls). All the children attend York schools and received treatment from their own doctors, and very few fits take place in school.

### CEREBRAL PALSY (SPASTICS)

There are 44 cases of cerebral palsy affecting children between the ages of 2 and 16 years known to the department—22 are boys and 22 are girls.

20 of them attend ordinary schools; 1 attends the Day Special School for delicate children; 1 boy attends the Class for the Partially-sighted; 4 attend the Day Special School for educationally subnormal children; 3 are at home; 2 are at a residential school for physically-handicapped children; 1 is at a residential special school for blind children with other handicaps; 12 have been notified to the Local Authority as ineducable.

## MISCELLANEOUS EXAMINATIONS

Number of staff examined ... ..	131
Number of entrants to Training College ... ..	58
Children examined re part-time employment ... ..	305
Children examined before going to camp ... ..	174
Children examined before being boarded-out ... ..	6
Children examined before going on holiday ... ..	62
Children examined before swimming sports ... ..	3
Children examined before boxing tournaments ... ..	77
Children examined prior to admission to Residential Schools, etc. ...	39

*Employment of Young Persons.* Medical history of 65 children recorded for the use of Youth Employment Officer.

## BACTERIOLOGICAL INVESTIGATIONS

13 swabs were taken from schoolchildren during the year; of these 3 showed the presence of haemolytic streptococci and 1 had a growth of proteus morganii and 1 streptococcus haemolyticus.

## SCHOOL-LEAVING MEDICAL REPORTS

At the last periodic school medical inspection, usually in a child's last year at school, advice is given in regard to any occupation that is likely to prove unsuitable because of some defect which cannot be remedied. For instance, an epileptic child is warned to avoid any occupation that brings him into close contact with moving machinery; a child with bad vision even when glasses are worn is recommended not to take up a post where normally acute vision is required. In the course of the year 65 children have received such advice and the Youth Employment Service warned of the type of occupations that they should not be encouraged to follow. The biggest number of such children suffer from defective colour vision.

## PART-TIME EMPLOYMENT

305 children were examined before being given permission to take up part-time jobs such as newspaper delivery, errand boy, shop assistant, etc. One boy with bronchitis was rejected on medical grounds.

## REMAND HOME

The Ashbank Remand Home, under the control of the Children Committee has medical services provided by the School Health Department the Children Committee reimbursing the Education Committee.

Each boy is medically inspected within twenty-four hours of admission and discharge. The Educational Psychologist tests each boy before the magistrates decide on his disposal, and in some cases the child psychiatrist submits a report for the guidance of the Court. Of 134 boys admitted during the year 42 belonged to York. The average length of stay was 23 days; the longest stay 55 days.



I.Q. range of 52 boys tested at the York Child Guidance Clinic who have been to Ashbank during 1955 :—

<i>I.Q. Ranges.</i>						<i>No.</i>
51- 60	...	...	...	...	...	1
61- 70	...	...	...	...	...	3
71- 80	...	...	...	...	...	3
81- 90	...	...	...	...	...	10
91-100	...	...	...	...	...	10
101-110	...	...	...	...	...	15
111-120	...	...	...	...	...	5
121-130	...	...	...	...	...	3
131-140	...	...	...	...	...	2

The offences or reasons for being committed to the Remand Home were :—

Larceny 54, breaking and entering and larceny 29, care of children departments 12, shopbreaking and larceny 7, indecent assault 8, absconding 6, breach of probation 5, wilful damage 4, non-attendance at school 4, arson 1, grievous bodily harm 1, housebreaking 1, committing damage to a car 1, breaking open gas meters 1.

#### THE CHILD GUIDANCE CLINIC

The clinic continues to have a full team of workers, viz., psychiatrist, educational psychologist and psychiatric social worker.

The following figures describe statistically the work of the clinic :—

# YORK CHILD GUIDANCE CLINIC

FIGURES FOR THE YEAR ENDED 31st DECEMBER, 1955

	YORK			ELSEWHERE			TOTAL 1955	TOTAL 1954	TOTAL 1953
	Boys	Girls	Total	Boys	Girls	Total			
A. CASES INTERVIEWED:									
Brought forward from 1954	108	41	149	2	—	2	153	165	126
Registered during 1955 ...	393	186	579	24	—	24	603	436	421
Closed during 1955 ...	371	168	539	24	—	24	563	447	382
Carried forward on 31.12.55	131	58	189	2	—	2	191	153	165
Waiting List 31.12.55									
Not yet investigated ...	23	10	33	—	—	—	33	17	32
Under investigation ...	75	37	112	—	—	—	112	60	68
B. NEW REGISTRATIONS:									
School Medical Dept. ...	44	20	64	—	—	—	64	46	39
Hospitals, Medical Prac- titioners ...	8	5	13	—	—	—	13	15	16
Education Dept. ...	3	1	4	—	—	—	4	9	4
Head Teachers ...	292	144	436	—	—	—	436	303	289
Prob. Officers, etc. ...	16	3	19	23	—	23	42	25	29
Children Department	6	—	6	—	—	—	6	5	9
Parents ...	10	5	15	1	—	1	16	17	14
Others (including Speech Therapist) ...	14	8	22	—	—	—	22	16	21
TOTAL ...	393	186	579	24	—	24	603	436	421
C. CLOSURES:									
Educational Test ...	247	115	362	—	—	—	362	271	223
Intelligence Test ...	37	14	51	18	—	18	69		
Social Service only ...	31	15	46	—	—	—	46	27	4
Consultation ...	16	3	19	5	—	5	24	73	101
Treatment by Psychiatrist ...	35	18	53	1	—	1	54	61	54
Treatment by Psychologist ...	5	3	8	—	—	—	8	16	
TOTAL ...	371	168	539	24	—	24	563	448	382
D. INTERVIEWS IN SCHOOLS, CLINIC AND REMAND HOME ...							2518	2599	2834
E. VISITS OF ENQUIRY PAID TO HOME AND SCHOOLS :							486	389	687
F. PUBLIC ENGAGEMENTS (Meetings, Lectures, etc.)							58	48 (since 1.7.54)	



# ANALYSIS OF 134 CHILDREN (98 boys and 36 girls) TREATED BY PSYCHIATRIST IN 1955

## A. CLASSIFICATION ACCORDING TO MAIN SYMPTOM.

	<i>C/fwd. from</i>		<i>Admitted</i>		<i>Total.</i>
	1954.		in 1955.		
	<i>Boys.</i>	<i>Girls.</i>	<i>Boys.</i>	<i>Girls.</i>	
1. Delinquency (lying, stealing, house-breaking, persistent truancy — including 23 Court cases ... ..	9	1	18	2	30
2. Behaviour disorders (out of control, aggressive, negativistic) ... ..	13	9	11	2	35
3. Psychosomatic disorders (functional pains, enuresis, soiling, alopecia ... ..	8	2	10	3	23
4. Neurotic and nervous manifestations (anxiety states, hysterical conditions, etc.) ... ..	7	7	3	4	21
5. Tension habits (stammer, nailbiting) ...	3	—	4	—	7
6. Inadequate personalities, personality disorders ... ..	1	2	2	2	7
7. Educational backwardness and/or general immaturity ... ..	4	—	5	1	10
8. Vocational guidance ... ..	—	—	—	1	1
	45	21	53	15	134

It is understood that most children present more than one symptom, e.g., bedwetting, which occurred 25 times, was an isolated symptom in only 7 cases; associated with delinquency it occurred 5 times, with behaviour problems 8 times, with nervous manifestations 3 times, with stammer once, and with backwardness once.

## B. CLASSIFICATION ACCORDING TO ÆTIOLOGY.

	<i>C/fwd. from</i>		<i>Admitted</i>		<i>Total.</i>
	1954.		in 1955.		
	<i>Boys.</i>	<i>Girls.</i>	<i>Boys.</i>	<i>Girls.</i>	
<i>I. Primarily in the Child:</i>					
1. Organic defects or disorders of the Central Nervous System (including spastic conditions) ... ..	1	—	—	—	1
2. General Immaturity and/or Intellectual Retardation (including feeble-mindedness) ... ..	2	—	8	1	11
3. Emotional Instability or Temperamental Abnormalities (including schizoid and psychopathic personalities) ... ..	10	5	12	1	28

4. Emotional reactive processes :						
(a) Mental conflicts ... ..	16	6	15	6	43	
(b) Anti-social character formation	3	1	6	—	10	
(c) Traumatic experiences, including early separation ... ..	4	2	3	3	12	
II. <i>Primarily in the Environment:</i>						
1. Faulty family relationships... ..	5	5	2	2	14	
2. Inadequate environment ... ..	4	2	6	2	14	
3. School ... ..	—	—	1	—	1	
	45	21	53	15	134	

C. TREATED IN 1955—134 children.

	<i>Children.</i>			
Brought forward from 1954 ... ..	...	...	...	66
Admitted in 1955 ... ..	...	...	...	68
Discharged in 1955 ... ..	...	...	...	70
Carried forward ... ..	...	...	...	64

D. STATUS ON CLOSURE.

Seen for Diagnosis (1—3 interviews) ... ..	...	...	...	16
Improved ... ..	...	...	...	30
Very much improved ... ..	...	...	...	4
Slight improvement only ... ..	...	...	...	7

*Discontinued:*

(a) Lack of co-operation of parent or child	5
(b) Placed in Approved School, Hostel or Special School ... ..	7
(c) Moved to other district ... ..	1

E. DISTRIBUTION OF INTELLIGENCE.

I.Q. 65 or under ... ..	4	} 18.0%
66- 75 ... ..	4	
76- 85 ... ..	16	
86- 95 ... ..	27	} 55.0%
96-105 ... ..	25	
106-115 ... ..	22	
116-125 ... ..	20	} 27.0%
126-135 ... ..	6	
136 or over ... ..	10	

# SPEECH THERAPY CLINIC

(To 16th September, 1955)

Mrs. B. Z. Statman, L.C.S.T., resigned her post as Speech-Therapist in the middle of September and was succeeded by Miss Dodson, L.C.S.T.



Unfortunately Miss Dodson was unable to commence duty until the beginning of December so that the Clinic was closed for a short period. The following figures summarise the work of the Clinic :—

Average appointments kept weekly at clinic ...	68
Average appointments kept weekly at school ...	17
No. of children on waiting list 16.9.55 ...	57
No. of children under treatment 16.9.55 ...	67
No. of children discharged cured during year	34
No. of children discharged for other reasons	28

Figures for the year under headings of defects :—

		<i>Treated.</i>	<i>Still attending.</i>	<i>Dis- charged cured.</i>	<i>Dis- charged other reasons.</i>	<i>Ref. C.G.C.</i>
Cleft Palates	...	3	3	—	—	—
Undeveloped Speech	...	6	4	—	2	—
Dysphonics	... ..	—	—	—	—	—
Dyslalsics	... ..	72	40	24	18	—
Stammerers	... ..	38	20	10	5	3

Besides the 3 shown on the chart in the discharged figures referred to the Child Guidance Clinic as unsuitable for and not responding to Speech Therapy, one cured dyslalic and one cured stammerer have been referred for investigation of behaviour problems, at the special request of the parents.

### FAMILY SERVICE UNIT

I am indebted to Miss I. Hort for the following report on the year's work of the Unit :—

The Family Service Unit provides an intensive case-work service to those families who are nearing social breakdown or who cannot, by their own efforts, reach acceptable standards of home and child care.

In many instances the mother is of low intelligence or suffering from mental depression or instability, and is often in a poor condition of health. In some the father's attitude is irresponsible, and he may have a poor work record. Amongst other problems with which the Unit workers are faced are marital difficulties, co-habitation and illegitimacy, with all their ill effects on the children. In many families the large number of children, often close together in age, impose a burden which has become almost insupportable. Of 35 families, 17 had 5 or more children. One family, who have never had a home of their own, are living in the Grange hutments, and a few are in old property, including a family of 7 in one room. The majority are housed on the Council estates.

Close co-operation is maintained with other services, such as the Child Guidance Clinic, the health visitors, the schools and school medical services, probation officers, clinics, family doctors, etc. The Unit is represented on the Co-ordinating Committee for the care of children neglected in their own homes.



During August a very successful camp was held for 3 weeks at Osmotherley, accommodating 39 children between the ages of 7 and 14 for a week each.

At the beginning of 1955, 20 cases were open, 5 of which had been under the Unit's supervision since 1950. A further 16 were accepted during the year, and one which had been closed for 7 months was re-opened. 14 cases were closed, of which 9 could be regarded as having shown satisfactory improvement. The work involved 2,060 contacts with the families, mainly through home visits, and 771 official contacts.

#### N.S.P.C.C.

Inspector Blackham, who worked so well in York for the cause to which his Society is dedicated, was transferred to another post on the 5th September, and was succeeded by Inspector Pellowe. I am indebted to the latter for the following figures which summarise the work of the Society for the year:—

Number of children concerned: 93 boys; 87 girls.

Number of people involved: 49 males; 65 females.

Number of cases of:—

Neglect	...	...	...	...	...	44
Ill treatment	...	...	...	...	...	3
Assault	...	...	...	...	...	5
Advice sought	...	...	...	...	...	38
Other wrongs	...	...	...	...	...	5

How dealt with:—

Warned by Officer	...	...	...	...	...	45
Advised	...	...	...	...	...	49
Prosecuted and convicted	...	...	...	...	...	Nil
Dealt with in Juvenile Courts	...	...	...	...	...	1

(1 boy and 1 girl)

Committed to care of  
Local Authority.

Cases closed as satisfactory	...	...	...	...	...	78
Cases remaining under supervision	...	...	...	...	...	17
Number of supervisory visits	...	...	...	...	...	434

Results of cases remaining under supervision from 1954—12 still under supervision. Dealt with in Juvenile Court (1 girl to Local Authority).

#### DEATHS AMONGST SCHOOLCHILDREN

There were 8 deaths amongst schoolchildren during 1955. The causes were as follows:—

Carbon monoxide poisoning	...	...	...	...	...	1
Fractured skull	...	...	...	...	...	1
Congestive cardiac failure	...	...	...	...	...	1
Recurrent pneumococcal meningitis	...	...	...	...	...	1



1. (a)	Rheumatic (Pan) carditis						
(b)	Acute rheumatic fever	...	...	...	...	...	1
1. (a)	Hepatic failure	...	...	...	...	...	1
(b)	Chronic hepatitis (with cirrhosis)						
(c)	Acute hepatitis (Infective)						
1. (a)	Heart failure						
(b)	Valvular disease of the Heart (aortic stenosis)	...					1

Intra cranial tension due to hydrocephalus due to stenosis of aqueduct of Sylvius	...	...	...	...	...	...	1
--	-----	-----	-----	-----	-----	-----	---

The deaths for the previous 5 years were:—

1954—3, 1953—5, 1952—6, 1951—4, 1950—7.

### YORK SCHOOLS' ATHLETIC ASSOCIATION

Mr. H. G. Rayson, the General Secretary of the York Schools' Athletic Association, has sent me a copy of the Annual Report for 1955, the forty-second year of its activities. The Association has now expanded to 11 sections, each being responsible for the complete organisation of its own particular branch of sport in the schools. They embrace association and rugby football, swimming, cricket, rounders, netball, hockey, boxing and athletics. Games, competitions, galas and athletic meetings are arranged for different ages and different sized schools, and the organising teachers give a lot of time and energy to promoting by these means the good health of the schoolchildren.

### SUMMARY OF WORK DONE, 1955

Periodic Medical Inspections	...	...	...	...	...	4,328	
Additional Periodic Inspections	...	...	...	...	...	3,312	
							7,640
Special Inspections	...	...	...	...	...	6,333	
Re-Inspections	...	...	...	...	...	3,118	
							9,451
					Total	...	17,091

Periodic Dental Inspections	...	...	...	...	...	6,218
Special Dental Inspections	...	...	...	...	...	1,618
Number of children treated by School Dental Surgeons	...					2,560
Number of attendances at Clinics:						
Minor Ailments (at Rougier Street)	...	...	...	...	...	5,322
Chiropody Clinic	...	...	...	...	...	1,135
Dental Clinic	...	...	...	...	...	8,695
Ear Clinic	...	...	...	...	...	1,021
Examination of backward children	...	...	...	...	...	93
Ophthalmic Clinic	...	...	...	...	...	2,843
Orthodontic Clinic	...	...	...	...	...	347



Orthopædic Clinic ... ..	281
Acomb Secondary Modern School Clinic ... ..	858
Beckfield Secondary Modern School Clinic ... ..	584
Burnholme Secondary Modern School Clinic ... ..	390
Burton Stone Secondary Modern School Clinic ... ..	711
Carr Infants' School Clinic ... ..	1,007
Carr Junior School Clinic ... ..	705
Danesmead Secondary Modern School Clinic ... ..	712
Derwent Junior School Clinic ... ..	970
Fulford Road Special School Clinic ... ..	701
Hob Moor Infants' School Clinic ... ..	786
Open Air School Clinic ... ..	952
St. George's School Clinic ... ..	1,440
Westfield Infants' School Clinic ... ..	272
Westfield Junior School Clinic ... ..	177
Total ... ..	30,002

Number of Inspections by School Nursing Staff for uncleanness	43,181
Number of home visits made by Nursing Staff ... ..	738
Number of visits to schools by Nursing Staff ... ..	1,965
Number of "follow-up" cases ... ..	2,131

#### COST OF SCHOOL HEALTH SERVICE

I am indebted to Mr. B. Littlefair, the City Treasurer, for providing me with the following information concerning the cost of the School Health Service for the year :—

	£
Gross Cost of School Health Service ...	23,271
Government Grant ... ..	13,963
Net cost to Rates ... ..	9,308
Amount produced by 1d. Rate ... ..	3,225
Net cost to Rates in terms of 1d. Rate ...	2.89d.

#### REPORT ON THE SCHOOL DENTAL SERVICE

I am indebted to Mr. Graham Turner, Principal School Dental Officer, for the following report :—

The first half of 1955 saw the full authorised establishment of dental officers for the first time for many years.

On the 9th February, the first patients were treated at Cornlands Road Clinic where a fully furnished suite consisting of waiting room and toilet, surgery, store-room and recovery room has been built. The surgery has proved convenient and in many ways, such as in ease of working, much superior to the surgeries at Rougier Street. The air conditioning is efficient and has solved the frequent fault of surgeries, that of condensation. Mr. Thomas was in charge of this clinic, except for the early weeks when it was



felt that the Principal School Dental Officer should operate there to test equipment and general facilities. It was unfortunate that Mr. Thomas' resignation has led to Cornlands Road Clinic, which serves a school population in the Acomb area of 4,484, being staffed for only five afternoons each week:

The difficulty of obtaining dental officers is the major problem of a School Dental Service. The problem is likely to become worse, since the dental schools have an insufficient output to compensate for the wastage of an ageing professional body. Unfortunately, only a minority of graduates choose to work in the school service. Until a solution to this problem is found we can only provide a very bare reparative service which can do little in the way of preventive dentistry. In my last report I drew attention to the fact that there seemed to be an upward trend in the caries rate. This has been confirmed during 1955 and adds to the difficulties of working with a dental staff of only one-third of what is needed. Your Principal School Dental Officer has attempted, with some slight success, to interest many of the sixth form pupils in dentistry as a career. In this, I have been helped by the Head Teachers in the Grammar Schools. Dentistry offers much as a career and every effort should be made to interest suitable pupils.

*Inspections.* During the year 6,218 pupils were inspected in schools and 1,618 special inspections made at the clinics. Of these, 5,611 were found to require treatment or approximately 72% compared with 64% in 1954—a rise of 12½%.

*Treatment.* 2,560 children were treated and 5,281 fillings were inserted in permanent teeth. The previous year 3,741 fillings were inserted and 2,429 children were treated. Whilst not all the 2,560 children were filling patients it seems clear that more restorative treatment was needed to make approximately the same number of children dentally fit and confirms the observation of the rise in the caries rate to which I drew attention in the last report. 3.8 permanent teeth were saved for every permanent tooth lost—once again a slight upward trend.

Twelve gold inlays, one bridge, four crowns and 27 dentures were fitted.

*Orthodontics.* 347 attendances were made. 54 new cases were seen. 39 orthodontic plates were fitted and 13 children had fixed appliances made in the clinic.

*Conclusion.* We are still unable to provide a full and comprehensive service and there is little likelihood of doing so in the foreseeable future. Every effort should be made to attract suitable applicants to the service.



# SCHOOL HEALTH SERVICE STAFF AND SCHOOL CLINICS

RETURN MADE TO MINISTRY OF EDUCATION  
POSITION ON 31ST DECEMBER, 1955

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

Principal School Medical Officer: DR. CATHERINE B. CRANE.

Principal School Dental Officer: GRAHAM TURNER.

	Number of Officers	Numbers in terms of full-time Officers employed in the School Health Service
(a) Medical Officers (including the Principal School Medical Officer):—		
(i) whole-time School Health Service	3	3
(ii) whole-time School Health and Local Health Services ... ..	1	0.10
(iii) General Practitioners working part-time in the School Health Service ... ..	—	—
(b) Physiotherapists, Speech Therapists, etc.		
Speech Therapist ... ..	1	1
(c) (i) School Nurses ... ..	9	7.2
(ii) Number of the above who hold a Health Visitor's Certificate ...	4	—
(d) Nursing Assistants ... ..	2	2

	Officers employed on a Salary basis		Officers employed on a Sessional basis	
	Number of Officers	Numbers in terms of full-time Officers employed in the School Dental Service	Number of Officers	Numbers in terms of full-time Officers employed in the School Dental Service
(e) Dental Staff:—				
(i) Principal School Dental Officer ...	1	1	—	—
(ii) Dental Officers ...	1	1	—	—
(iii) Orthodontists ...	—	—	—	—
TOTAL ...	2	2	—	—
			Number of Officers	Numbers in terms of full-time Officers employed in the School Dental Service
(iv) Dental Attendants ... ..			3	3
(v) Other Staff ... ..			—	—



## II. NUMBER OF SCHOOL CLINICS ... .. 2

A certain amount of minor ailment treatment is carried out in the Medical Inspection Rooms at 14 schools.

## III. TYPE OF EXAMINATION AND/OR TREATMENT PROVIDED

Examination and/or treatment  (1)	Number of School Clinics (i.e. premises) where such treatment is provided	
	directly by the Authority  (2)	under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals  (3)
(a) Minor ailment and other non-specialist examination or treatment ... ..	15	—
(b) Dental ... ..	2	—
(c) Ophthalmic ... ..	—	1
(d) Ear, Nose and Throat ... ..	—	—
(e) Orthopædic ... ..	—	1
(f) Pædiatric ... ..	—	—
(g) Speech Therapy ... ..	1	—
(h) Others (Specify) :—		
Chiropody... ..	1	—
Remedial exercises carried out by the Organisers of Physical Education ... ..	2	—

## IV. CHILD GUIDANCE CENTRES.

Number of Child Guidance Centres provided by the Authority: 1

	Number	Aggregate in terms of the equivalent number of whole-time officers
Psychiatrists ... ..	1	0.55
Educational Psychologists ... ..	1	1
Psychiatric Social Workers ... ..	1	1
Pædiatricians, Play Therapists, Social workers, etc. (excluding Clerks) ... ..	—	—

The Psychiatrist is employed by the Authority.

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

	(1) Blind (2) Par- tially sighted		(3) Deaf (4) Par- tially Deaf		(5) Delicate (6) Physi- cally Handi- capped		(7) Educa- tionally sub- normal (8) Mal- adjusted		(9) Epi- leptic	TOTAL (1) - (9)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
In the calendar year ended 31st Dec., 1955 ...										
A. Handicapped Pupils <i>newly</i> <i>placed</i> in Special Schools or Board- ing Homes ...	-	6	1	-	36	3	28	-	-	74
B. Handicapped Pupils <i>newly</i> <i>assessed</i> as needing Special educational treat- ment at Special Schools or in Boarding Homes	1	7	1	-	38	3	27	2	1	79
On or about January 31st 1956										
C. Number of Handi- capped Pupils who were on the regist- er of—										
(i) Special Schools as—										
(a) Day Pupils ...	-	14	-	-	84	7	88	-	-	193
(b) Boarding Pupils	2	-	12	-	3	4	7	2	-	30
(ii) were on the regist- er of independent schools under arrangements made by the Authority ...	-	-	-	-	-	-	-	-	-	-
(iii) were boarded in Homes and not already included under (i) or (ii)	-	-	-	-	-	-	-	-	-	-
TOTAL C ...	2	14	12	-	87	11	95	2	-	223



	(1) Blind (2) Par- tially sighted		(3) Deaf (4) Par- tially Deaf		(5) Deli- cate (6) Physi- cally Handi- capped		(7) Educa- tionally sub- normal (8) Mal- adjusted		(9) Epi- leptic	TOTAL (1) - (9)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944—										
(i) in hospitals	—	—	—	—	—	—	—	—	—	—
(ii) in other groups (e.g. units for spastics)	—	—	—	—	—	—	—	—	—	—
(iii) at home	—	—	—	—	—	2	—	—	—	2
E. were requiring places in special schools										
(i) TOTAL										
(a) day	—	1	—	—	—	—	10	—	—	11
(b) boarding	1	—	—	—	—	—	1	1	—	3
Please state how many pupils are included in the totals above:—										
(ii) who had not reached the age of 5:—										
(a) awaiting day places ...	—	—	—	—	—	—	—	—	—	—
(b) awaiting boarding places	1	—	—	—	—	—	—	—	—	1
(iii) who had reached the age of 5 but whose parents had not consented to admission to a special school:—										
(a) awaiting day places ...	—	—	—	—	—	—	—	—	—	—
(b) awaiting boarding places	—	—	—	—	—	—	—	—	—	—

Amount spent on arrangements under Section 56 of the Education Act, 1944, for the education of handicapped pupils otherwise than at school, in the financial year ended 31st March, 1955.—£238 0s. 0d. (including £41 0s. 0d. in respect of tuition in lip reading).

Number of children reported during the year:—

(a) under Section 57(3) (excluding any returned under (b))	...	6
(b) under Section 57(3) relying on Section 57(4)	...	—
(c) under Section 57(5)	...	16

of the Education Act, 1944.

# MEDICAL INSPECTION RETURNS

Year ended 31st December, 1955.

TABLE I.

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

## A.—PERIODIC MEDICAL INSPECTIONS.

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

First Age Group	...	...	...	...	...	1566
Second Age Group	...	...	...	...	...	1465
Third Age Group	...	...	...	...	...	1297
						—
			Total	...	...	4328
Additional Periodic Inspections	...	...	...	...	...	3312
						—
			Grand Total	...	...	7640
						—

## B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	...	6333
Number of Re-Inspections	...	...	...	...	...	3118
						—
			Total	...	...	9451
						—

## C.—PUPILS FOUND TO REQUIRE TREATMENT.

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

Age Groups Inspected.	For defective vision (excluding squint).	For any of the other conditions recorded in Table IIA.	Total Individual Pupils.
(1)	(2)	(3)	(4)
First Age Group ...	36	127	157
Second Age Group ...	83	189	261
Third Age Group ...	67	183	241
Total ...	186	499	659
Additional Periodic Inspections	167	487	620
			—
Grand Total ...	353	986	1279
			—



TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1955.

Defect Code No.	Defect or Disease.	Periodic Inspections		Special Inspections	
		No. of Defects		No. of Defects	
		Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
	(1)	(2)	(3)	(4)	(5)
4	Skin ... ..	316	382	370	54
5	Eyes—				
	a. Vision ... ..	353	808	695	408
	b. Squint ... ..	29	117	91	24
	c. Other ... ..	32	44	104	6
6	Ears—				
	a. Hearing... ..	46	156	33	55
	b. Otitis Media ...	27	107	52	19
	c. Other ... ..	111	94	95	52
7	Nose or Throat ...	73	722	85	228
8	Speech ... ..	26	83	30	50
9	Cervical Glands ...	2	276	4	57
10	Heart and Circulation ...	—	246	—	90
11	Lungs ... ..	20	394	13	88
12	Developmental—				
	a. Hernia ... ..	32	66	5	29
	b. Other ... ..	28	427	12	134
13	Orthopædic—				
	a. Posture ... ..	145	182	34	57
	b. Flat Foot ... ..	124	151	53	47
	c. Other ... ..	55	459	117	183
14	Nervous System—				
	a. Epilepsy ... ..	8	18	1	8
	b. Other ... ..	—	19	1	4
15	Psychological—				
	a. Development ...	—	108	—	10
	b. Stability ... ..	20	675	7	116
16	Other ... ..	10	280	703	91

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

Age Groups Inspected.	Number of Pupils Inspected.	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)	(7)	(8)
(1)	(2)						
First Age Group ...	1566	564	36.0	978	62.5	24	1.5
Second Age Group ...	1465	592	40.4	848	57.9	25	1.7
Third Age Group ...	1297	573	44.2	708	54.6	16	1.2
Additional Periodic Inspections ... ..	3312	1223	36.9	1997	60.3	92	2.8
Total ... ..	7640	2952	38.6	4531	59.3	157	2.1



TABLE III.

INFESTATION WITH VERMIN.

(i) Total number of examinations in the schools by the school nurses or other authorized persons	...	...	...	...	...	...	43,181
(ii) Total number of individual pupils found to be infested	...	...	...	...	...	...	409
(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 OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)  
GROUP 1—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table III).

	Number of cases treated or under treatment during the year	
	by the Authority	otherwise
Ringworm—(i) Scalp	—	5
(ii) Body	13	5
Scabies	6	24
Impetigo	168	47
Other skin diseases	1315	50
Total	1502	131

GROUP 2—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	by the Authority	otherwise
External and other, excluding errors of refraction and squint	266	43
Errors of refraction (including squint)	—	1925
Total	266	1968
Number of pupils for whom spectacles were:—		
(a) prescribed	—	1201
(b) obtained	—	930



### GROUP 3—DISEASES AND DEFECTS OF EAR, NOSE & THROAT

	Number of cases treated	
	by the Authority	otherwise
Received operative treatment		
(a) for diseases of the ear ... ..	—	6
(b) for adenoids and chronic tonsillitis ...	—	274
(c) for other nose and throat conditions ...	—	6
Received other forms of treatment ... ..	380	613
Total	380	899

### GROUP 4—ORTHOPÆDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals ... ..	41	
	by the Authority	otherwise
(b) Number treated otherwise, e.g. in clinics or out-patient departments ... ..	268	235

### GROUP 5—CHILD GUIDANCE TREATMENT.

	Number of cases treated	
	in the Authority's Child Guidance Clinics	elsewhere
Number of pupils treated at Child Guidance Clinics ... ..	150	—

### GROUP 6—SPEECH THERAPY.

	Number of cases treated	
	by the Authority	otherwise
Number of pupils treated by Speech Therapists ... ..	119	—

GROUP 7—OTHER TREATMENT GIVEN.

					Number of cases treated		
					by the Authority	otherwise	
(a)	Miscellaneous minor ailments				...	2846	100
(b)	Other than (a) above (specify)						
1.	Chiropody	...	...	...	...	285	—
2.	Medical Conditions	...	...	...	...	—	1344
3.	Surgical Conditions	...	...	...	...	—	204
4.	U.V.L. Treatment	...	...	...	...	84	—
5.	Orthodontic	...	...	...	...	54	—
Total						3269	1648

TABLE V.  
DENTAL INSPECTION AND TREATMENT CARRIED OUT  
BY THE AUTHORITY

1. Number of pupils inspected by the Authority's Dental Officers:—							
(a)	At Periodic Inspections	...	...	...	...	...	6,218
(b)	As Specials...	...	...	...	...	...	1,618
						Total (1)	<u>7,836</u>
2. Number found to require treatment ... .. 5,665							
3. Number offered treatment ... .. 5,579							
4. Number actually treated ... .. 2,614							
5. Attendances made by pupils for treatment ... .. 9,042							
6. Half-days devoted to:—							
	Periodic Inspection	...	...	...	...	...	28
	Treatment	...	...	...	...	...	1,143
						Total (6)	<u>1,171</u>
7. Fillings:—							
	Permanent Teeth	...	...	...	...	...	5,281
	Temporary Teeth	...	...	...	...	...	118
						Total (7)	<u>5,399</u>
8. Number of Teeth filled:—							
	Permanent Teeth	...	...	...	...	...	4,395
	Temporary Teeth	...	...	...	...	...	109
						Total (8)	<u>4,504</u>
9. Extractions:—							
	Permanent Teeth	...	...	...	...	...	1,147
	Temporary Teeth	...	...	...	...	...	2,443
						Total (9)	<u>3,590</u>
10. Administration of general anæsthetics for extraction ... .. 1,442							
11. Other operations:—							
	Permanent Teeth	...	...	...	...	...	1,752
	Temporary Teeth	...	...	...	...	...	81
						Total (11)	<u>1,833</u>



## APPENDIX A

### THE INTELLIGENCE OF ASTHMATIC CHILDREN

In York there are known to the School Health Department some 80 children who suffer from asthma. 47 of these are boys and 33 are girls.

To investigate a general impression that asthmatic children are more intelligent than the child population as a whole, an enquiry was made into the intelligence of these 80 children.

Intelligence for the purpose of this enquiry was divided into three categories :—

- A. Above Average. (Corresponding, where tested, to I.Q.'s from 110 upwards.)
- B. Average. (Corresponding to I.Q.'s from 90 to 110.)
- C. Below Average. (Corresponding to I.Q.'s below 90.)

10 of the boys and 8 of the girls attending Grammar Schools were automatically placed in A Category. 13 boys and 9 girls had had their I.Q.'s estimated by means of individual intelligence tests (Terman-Merrill). Of these, 3 boys and 3 girls were in A Category; 9 boys and 5 girls were in B Category; 1 boy and 1 girl were in C Category. In the case of the remaining children the class teachers were asked to give their opinions based on the children's attainments as to whether the children were above average, average or below average. 8 boys and 8 girls were placed in A Category on this basis; 6 boys and 4 girls were considered average, B Category; whilst 10 boys and 4 girls were put in C Category.

From this enquiry it would appear that there is some truth in the opinion that asthmatic children are more intelligent than the child population as a whole as the following figures show :—

	Category A Above Average Intelligence	Category B Average Intelligence	Category C Below Average Intelligence
Asthmatic Children ... ..	50%	30%	20%
Child Population generally ...	20% (approx.)	60% (approx.)	20% (approx.)

The enquiry can only be regarded as a crude survey, however, as no standard method of assessment of intelligence was used.

