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City of York Education Committee

ANNUAL REPORT

OF THE

PRINCIPAL

SCHOOL MEDICAL OFFICER

For the Year Ended 31st December, 1972

**SCHOOL CLINIC,
MONKGATE,
YORK.**





City of York Education Committee


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INDEX

						Page
Child Guidance Clinic and School Psychological Service	..					22-24
General Statistical Information	..	..	..	..	..	9-10
Handicapped Pupils	..	..	..	..	..	16-20
Infectious Disease	..	..	..	..	..	15-16
Medical Inspection	..	..	..	..	..	11-13
Miscellaneous	..	..	..	..	..	24-26
School Dental Services	20-22
School Health Clinics	13-14
Staff	5-7
Statistical Tables	27-40

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STAFF OF THE SCHOOL HEALTH SERVICE

Medical Officer of Health and Principal School Medical Officer

Samuel R. W. Moore, M.D., M.F.C.M., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer

Dora Hamshaw, B.Sc., M.R.C.S., L.R.C.P., D.C.H., M.F.C.M.

Senior Medical Officer for Schools

Margaret C. Barnet, M.B., Ch.B., M.F.C.M.

School Medical Officers

Eleanor J. Mennim, M.B., Ch.B. (to 1.9.72)

Anne J. V. Lawson, M.B., B.S., D.P.H.

Annette M. Whalley, M.B., Ch.B. (from 6.11.72)

Nora S. Morley, M.R.C.S., L.R.C.P. (Part-time)

Principal School Dental Officer

Graham Turner, L.D.S.

School Dental Officers

Eileen M. McRaith, L.D.S. (from 3.1.72)

Nessa A. Train, B.D.S. (to 3.3.72) (then sessional)

Anne P. Parker, B.Ch.D., L.D.S. (Part-time from 14.3.72)

Wendy P. Goodman, L.D.S. (Part-time from 9.5.72)

Judith E. Comerford (Part-time from 20.11.72)

Dental Auxiliaries

Miss B. E. Kirkbride

Miss L. A. Wilford (to 29.2.72)

Miss A. E. Forshaw (from 4.9.72)

Dental Surgery Assistants

Miss J. M. Lawson

Miss E. Hazell (to 14.1.72)

Miss W. Richardson (e)

Miss J. Stead

Miss M. Simpson

Miss J. Ramsey (from 28.2.72)

Anaesthetist to School Dental Officers

Judith Yuill, M.D., M.R.C.P. (Part-time)

Director of Nursing Services

Miss A. W. Mather (a) (b) (c) (d)

Nursing Officer

Miss J. F. Gretton (a) (b) (c) (d)

Health Visitor/School Nurses

Miss J. C. M. Baker (a) (b) (c) (d)	Mrs. M. J. Marshall (a) (b) (c) (to 16.6.72)
Miss J. P. Bateson (a) (b) (c) (from 18.11.72)	Mrs. M. F. Riley (a) (b) (c) (from 1.6.72)
Miss J. M. Dovaston (a) (b) (c) (to 26.5.72)	Mrs. H. Shann (a) (b) (c) (from 11.9.72)
Mrs. S. Grinstead (a) (b) (c)	Miss G. C. Sheath (a) (b) (c)
Mrs. I. C. Mansfield (a) (b) (c) (d)	Mrs. E. Williamson (a) (b) (c) (to 19.11.72)

Part-time Health Visitor/School Nurse

Mrs. H. Shann (a) (b) (c) (to 10.9.72)

Clinic and School Nurses

Miss H. Ashton (a) (from 12.9.72)	Mrs. A. B. Judson (a) (b part-one)
Mrs. C. M. DiBiasio (a)	Mrs. A. T. Nottingham (a)
Mrs. M. Harrison (a) (d) (to 8.9.72)	

Part-time Clinic and School Nurse

Mrs. H. M. Saunders (a) (b) (from 11.9.72)

Speech Therapists

Mrs. M. A. Francis, L.C.S.T. (to 4.2.72)	Mrs. H. P. Milner, L.C.S.T. (Part-time)
Miss C. M. Thompson, L.C.S.T. (from 2.10.72)	Mrs. E. M. Maunder, L.C.S.T. (Part-time)

Chiropodist

Mrs. F. Frankland, S.R.N., S.C.M., M.Ch.S. (Part-time)

Physiotherapists

Mrs. M. A. Hayes, State Registered Physiotherapist (Part-time)
Mrs. J. Roberts, State Registered Physiotherapist (Part-time)

Chief Clerk

R. Watkinson

Senior Clerk

Miss H. F. Milburn

Clerks

3 Full Time

2 Part-time

1 Shorthand typist

Audiometrician

Miss M. A. Robinson

Vision Screener Operator

Mrs. F. Hedinburgh

CHILD GUIDANCE CLINIC

Consultant in Child Psychiatry

C. Hugh Neville-Smith, B.M., B.Ch., D.C.H., D.P.M.

Educational Psychologist

A. Shuttleworth, M.Ed., Dip.Ch.Psych., A.B.Ps.S.

Psychiatric Social Worker

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

Mrs. N. M. Bradshaw, B.A., B.Soc. Studies, M.Phil. Social Work (to 30.4.72)

Miss M. A. Patterson, Dip. Soc. Studies (from 18.9.72)

Remedial Adviser

F. R. Purdy, Cert. Hand. Ch., Cert. R.K.

Miss A. Corner, Dip. Hand. Ch.

Clerks

1 Full-time 2 Part-time

(a) — State Registered Nurse

(b) — State Certified Midwife

(c) — Health Visitor Certificate

(d) — Queen's Nurse

(e) — Dental Nurse's Certificate

August, 1973.

My Lord Mayor, Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting my fifth Annual Report on the work of the School Health Service for the year 1972.

I am pleased to report that the health of the school children of York is excellent and of those who were examined 98.8% were regarded as satisfactory.

The selective method of school medical examination which began in 1970 is continuing its successful course. The increased involvement of school medical officers with physically and mentally handicapped children has resulted in their calling for more support from other staff, particularly speech therapists, physiotherapists and remedial gymnasts, with a consequent increase in co-operation and team work.

The new Child Assessment Centre opened in September is a new building in the grounds of York County Hospital, just across the road from the Monk-gate School Clinic where assessment facilities were previously provided. It is a multi-disciplinary assessment unit for children with a wide range of problems and disabilities and incorporates the former joint hospital/local authority assessment clinic. The centre is under the direction of the second Consultant Paediatrician who has had access to the School Clinic and schools in the City since his appointment in August, 1970. The Senior Medical Officer for Schools acts as co-ordinator for the multi-disciplinary team which includes other consultants, general practitioners, educational psychologists, physiotherapists, speech therapists, etc., from the hospital and local authority services.

A new clinic for speech therapy commenced at Acomb. Children and mothers have had less distance to travel and its success has prompted the planning of further peripheral clinics of the same kind.

For some years the accommodation at the Special Care Unit at the Lidgett Grove Special School for Mentally Retarded Children has been under review. Rebuilding and extension of the Unit was completed towards the end of 1971, providing increased class room space but also gave much improved and badly required toileting facilities. Early in 1972 the accommodation was merged with that of the Spastics Society with pooling of the caring arrangements to the benefit of all handicapped children attending the school, whether or not they attend the Unit.

The preventive work of the School Dental Service took another step forward by the introduction of the use of fissure sealants for the protection of teeth against dental caries. This measure is a useful one to add to others such as the use of fluoride rinses, and health education on dental hygiene and dietary habits.

My thanks are due to the Chief Education Officer for his co-operation and assistance throughout the year.

In conclusion may I acknowledge the help of all those who have assisted in compiling this report. The dedication of all, who working in the School Health Service, help to promote and maintain the health of York school children is greatly appreciated.

I am, my Lord Mayor, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

S. R. W. MOORE

Principal School Medical Officer.

GENERAL STATISTICAL INFORMATION

Population (estimated — June, 1972)		104,780
Estimated child population (June, 1972)		
Under 1 year	1,410	
1 to 4 years inclusive	5,990	
5 to 14 years inclusive	15,800	
Total under 15 years	23,200	
Primary Schools:—		No. on Rolls
Number of schools	39	10,609 *
Secondary Schools:—		
Number of schools	17	8,013
" " " (Modern)	13	4,917
" " " (Grammar)	4	3,096
Further Education Establishments	3	733 (full time)
Special Schools		
Educationally Sub-normal	2	224
Delicate and Physically handicapped	1	81
Special Units		
Partially hearing	3	25
TOTAL number of pupils on rolls (January, 1973)		18,952
excluding Further Education Establishments		

Summary of Work of School Health Service

Medical Officers				
Periodic examinations in schools	..	..	..	2,253
Special examinations in schools	..	..	..	} 2,931
Re-inspections in schools	..	..	..
Special examinations in clinics	..	..	..	} 2,615
Re-inspections in clinics	..	..	..
Miscellaneous (see page 24)	..	..	..	508

Footnote.

- * includes 68 in Nursery classes.

Dental Officers

Inspections at schools	..	..	..	..	..	15,729
Inspections at clinics	..	..	..	..	..	2,784
Re-inspection at school or clinic	..	..	..	..	..	3,096
Attendances for treatment	..	..	..	..	..	9,695

Health Visitor/School Nurses

Escorts to Residential Schools	..	..	..	..	..	22
Visits to schools	..	..	..	..	..	1,439
Examinations (including cleanliness inspections) in schools	..	..	..	..	..	42,400
Visits to homes	..	..	..	..	..	1,790
Treatment of minor ailments in Central Clinic..	..	..	..	..	..	745

Speech Therapist, Chiropodist, etc.

Number of children treated by Speech Therapists	..	..	..	..	..	399
Number of children under observation by Speech Therapists	..	..	..	..	..	111
Total number of attendances at Speech Therapy Clinic	..	..	..	..	..	2,804
Number of children treated by Chiropodist	..	..	..	..	..	270
Number of attendances made	..	..	..	..	..	1,215

School Clinics

Grand total of inspections and treatments as detailed above	22,954
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Home Tuition	1
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INTRODUCTION

The selective system of medical examination of school children has continued to work satisfactorily and a mutually helpful relationship is building up between teachers and doctors. When once a doctor is able to do a real service in a school she becomes a colleague to be consulted and the calls on her from that particular school rapidly increase. This is welcomed as enabling the doctor to do much more constructive work.

The opening of the jointly staffed child assessment centre will enable a more forward-looking approach to be made with regard to the social and educational problems of handicapped children.

It is a natural consequence of the selective system of medical care of school children that doctors have more time to spend with the handicapped and physically delicate pupils and are asking for more support from speech therapists, physiotherapists and remedial gymnasts to help these children.

MEDICAL INSPECTION, SCREENING AND ASSESSMENT

Figures relating to inspections of children at maintained schools are to be found in Parts I and II of the Department of Education and Science Statistical Tables at the end of this report. The general condition of 98.85% of those examined was regarded as satisfactory.

Vision Screening

The Keystone Vision Screener is in use for children of all ages. School entrants are tested during their first or second terms before the first medical examination, and thereafter at approximately 2 yearly intervals. Colour vision is tested on entry and at ten years of age.

The number of children screened was 13,742, as against 10,704 last year. Of these 2,645 were found to have defective eyesight, 567 of which were already receiving treatment.

Screening for Hearing Defects

All school entrants have a screening test by means of the pure tone audiometer towards the end of their first term or early in the second term before being seen by the school doctor. Those with unsatisfactory hearing are referred to the audiometry clinic for investigation. Six thousand one hundred and sixty six screening tests were carried out of whom 500 were referred to the School Clinic for further tests. Of these 52 were later referred to hospital and 9 to their family doctors.

Children with a severe degree of deafness are identified as early as possible during babyhood. Close liaison is maintained with the hospital consultant about these children. Four school children were issued with hearing aids by the hospital during the year.

Orthopaedic Defects

There continues to be a small number of boys and girls who require and benefit from individual attention at the Remedial Classes held at the School Clinic. The interest and co-operation of relatives and teachers is an important facet in remedial work in order to ensure continuity of exercises after discharge from the clinic.

Psychological Problems

Thirty seven children were referred to the Child Guidance Clinic for advice and treatment.

Child Assessment Unit

This opened in September, 1972 in a new building in the grounds of York County Hospital. It is a multi-disciplinary assessment unit for children with a very wide range of problems. The previous joint hospital/local authority clinic for the investigation of children with delayed language development has been absorbed into this larger concept.

Assessment is ideally a preventive measure. As soon as a child is suspected of having a defect whether physical, emotional or intellectual, full investigations must be carried out, and treatment and training started as early as possible to prevent the defect becoming a handicap. If a child has one serious handicap, then it is quite possible that it has others. It is, therefore, essential that assessment should be as extensive as possible. The investigations are carried out by specialists in many fields in the hospital and local authority services. Many if not most of the children investigated at the Unit will be well under school age, but the aim is to cater for the child's future social and educational life. Case conferences are held and the Senior Medical Officer for Schools acts as co-ordinator, and arranges for the implementation of the educational recommendations such as special schooling.

The system will benefit both the child, by the earlier recognition of his difficulties, and the Education Authority by giving early warning of the existence of children with special educational problems.

The partnership between local authority professional staff and their hospital colleagues is proving stimulating and useful.

CO-OPERATION AND CONSULTATION

Consultation and the sharing of relevant information between medical and teaching disciplines and parents is the basic principle on which the selective medical examination system is based. Every effort is made to streamline the necessary tests and examinations required by individual children in order to reduce the amount of time they are out of school.

The helpfulness of headteachers and their staffs is a major factor in shaping the new arrangements into a constructive and meaningful service.

HOME VISITS

Health Visitor/School Nurses paid 1,790 home visits in connection with medical inspections, follow-up of defects, cleanliness, etc. The medical officers also visited homes on a number of occasions to discuss various problems of health and education.

HEALTH VISITORS IN SCHOOLS

The role of the Health Visitor as adviser and health educator in the schools is continuing to expand. The number of requests received from teachers for assistance in giving talks and providing materials and information is increasing.

SCHOOL HEALTH CLINICS

Locations and Times

School Clinic, Monkgate

General Clinic	Mon. — Fri.	9 — 10 a.m.
Ophthalmic Clinics	Wed. Thurs. Fri. Mon.	1.30 p.m. 9 a.m.
Audiometric Clinic	Fri.	9 — 11 a.m.
Speech Therapy Clinic	Mon. — Fri.	9.30 a.m. and 1.30 p.m.
Dental Clinic	Mon. — Fri.	8.45 a.m. and 1.30 p.m.
Chiropody Clinic	Tues.	1.15 p.m.
Remedial Exercises Clinic	Wed. and Thurs.	9.30 a.m.

Health Services Centre, Cornlands Road

Dental Clinic	Mon. — Fri.	8.45 a.m. and 1.30 p.m.
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Health Services Centre, Fifth Avenue

Dental Clinic	Mon. — Fri.	8.45 a.m. and 1.30 p.m.
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47 Clarence Street

Child Guidance Clinic

Mon. — Fri.

8.45 a.m. and 1.30 p.m.

Ophthalmic Clinic

Dr. F. B. Shevlin continued as ophthalmologist on behalf of the Leeds Regional Hospital Board, the clinical and nursing assistance being provided by the School Health Service.

Of the 3,165 school children known to wear glasses 1,446 were prescribed by the School Clinic, 645 by York County Hospital and 1,074 by opticians.

Speech Therapy Clinic

During the year there were staff changes; one full-time therapist left in February and it was not possible to replace her until October. This put the part-time speech therapists under considerable pressure and priorities had to be carefully assessed.

In October a clinic was established at Cornlands Road Health Centre for one session each week, thus enabling children from the Acomb area to be seen without involving parents and children in a long and time-wasting journey. This venture has proved so successful that it is hoped to plan further district clinics during 1973. Not only has it proved more helpful for the patients, but it has also provided better contact with the Health Visitors and schools in the area.

The publication of the Quirk Report on Speech Therapy Services in October highlighted the difficulties of speech therapists in all areas in the provision of a good comprehensive service for all members of the community. Although we in York are perhaps better placed than some, we are nonetheless frequently frustrated by the knowledge that there is never enough time to deal adequately with the large variety of problems which confront us. The unification of the service suggested by the report may well go some way towards helping to solve these problems, but it will not be until many more speech therapists are trained that we shall begin to see an efficient comprehensive service.

Children on Waiting List at beginning of year	11
Children under clinical supervision at beginning of year	113
Children Admitted/treatment during year	76
No. of referrals	98
No. of children treated	156

No. of children discharged	52
No. of school visits	86
Total Number of Attendances	2,804
Number of children under clinical supervision at end of year	111
Number of children assessed and waiting for treatment at end of year	10
Number of children on Waiting List (unseen) at end of year	10

Chiropody Clinic

There were 1,215 attendances at the weekly clinic, 270 children being treated. Two hundred and thirty four of these had plantar warts.

Enuresis

There is now no special clinic for enuresis, but electric alarm apparatus is available to those who may benefit from its use. Patients attend a general clinic by appointment. Twenty five new patients borrowed the apparatus during the year and 9 old patients continued treatment. Twelve cures have been recorded.

Children suffering from enuresis are also treated by the hospital paediatrician, the psychiatrist and the family doctor.

INFESTATION

The use of Malathion has proved successful in controlling the marked increase in the number of verminous heads experienced last year. The children found to be infested are now, as before the outbreak, those known to the school nurses as being subject to repeated recurrence of this trouble, the only remedy being continual unobtrusive vigilance.

INFECTIOUS DISEASE

The following infectious diseases amongst York school children were notified by general practitioners to the Medical Officer of Health in 1972 :—

Measles	98
Infective Hepatitis	27
Scabies	23
Scarlet Fever	19
Food Poisoning	10
Dysentery	1
Whooping Cough	1
Total	<hr/> 179 <hr/>

Vaccination against Tuberculosis (B.C.G.)

Vaccination is offered to children during the third academic year of their secondary school education. The programme covers both maintained and independent schools within the City. All vaccinations are carried out by means of the Shuco Dermo-Jet Vaccinator which enables the programme to be carried out with the minimum disruption to schools as possible.

Detailed statistics are as follows:—

Number of invitations sent	..	..	..	..	..	2,001
Number of acceptances	..	..	..	..	..	1,769
Number of Heaf tested	..	..	..	..	..	1,519
Number who gave negative reactions and were vaccinated	..	..	..	..	..	1,366
Number of children attending maintained primary and secondary schools who received B.C.G. vaccination during the year	..	..	..	..	..	1,207

Those children who showed a Positive reaction to the Heaf Test were X-rayed by Mass Radiography. No case of active Tuberculosis was found.

Vaccination against Rubella

During the year 883 thirteen-year old girls have been given vaccination against Rubella.

HANDICAPPED PUPILS

The Handicapped Pupils and Special School Regulations 1959, and the amending regulations in 1962 defines the various categories of children who require special educational treatment.

There were 400 pupils in York as on the 25th January, 1973. The following table shows these in each category:—

Category of Handicap	Number at Special School or Unit	Number Awaiting Placement	Number not at School	Total
Blind	4	1		5
Partially-sighted	12	1		13
Deaf	4			4
Partially-hearing	18	1		19
Physically Handicapped	58	2	2*	62
Delicate	11			11
Maladjusted	9	2		11
Educationally Subnormal	245	26		271
Epileptic	4			4
TOTAL	365	33	2	400

* 1 Home Tuition

1 In Hospital

Northfield Special School for Delicate and Physically Handicapped Children

There are 82 children (15 from the Ridings) in the school. The increased proportion of severely handicapped children has emphasized the need for more ancillary help. The partially-sighted children, several of whom have additional handicaps, are no longer in a separate class, but have been successfully integrated into appropriate classes.

The increased proportion of severely handicapped pupils is reflected in the changed work of the school's physiotherapy unit.

Ten years ago there were 40 children suffering from chest and postural conditions and only 6 suffering from cerebral palsy and similar conditions. In 1972 there are only 6 cases of chest conditions on treatment and 20 others in the category of handicapped and requiring individual treatment.

During the year more of the heavily handicapped children have been supplied with splints to help their walking activities. Progress in these cases is slow and confidence at each stage very important. In the pre-school child parents are taught to apply splints and assist with this exercise. Once the child is at school all day this is only possible at weekends. This means that much physiotherapy time is being used in this way. It is hoped that we may soon have an attendant to help relieve the pressure on physiotherapy time.

Communication with the paediatric and orthopaedic consultants in the York area is very helpful, but not so easy with children attending clinics

out of the city. Attendance at the Spina Bifida Clinic at the County Hospital means that new children and their parents have a link with Northfield even before the children begin their school life.

Visits with the children to the Child Assessment Unit at the York County Hospital will increase the help possible for the children in the future.

Amongst the pupils leaving school, 4 transferred to normal school and 2 who were severely handicapped went to the College of Further Education. The regular visits by the careers officer has been valuable in planning assessment and suitable employment.

The widening curriculum of activities in and out of school has provided stimulus and interest. In addition to visits, older pupils have gone camping and youth-hostelling. Eight boys have won the Duke of Edinburgh bronze medals.

The school is fortunate in the help it receives from many sources. Older pupils attend a youth club run by staff and students of St. John's College. Other students assist seriously handicapped children during swimming, with individual teaching. They also help in many ways the small group of hyper-active and highly distractible children who can disrupt the work in a class. The York Branch of Riding for the Disabled Association continues to provide enthusiastic help.

In these and many other ways the handicapped children are helped to overcome problems, to accept their disability, but to learn to live as full and normal a life as possible.

Children with Hearing Loss

Children found to have insufficient hearing to cope in a normal class situation are educated where possible in special units attached to normal school. Each class is small in size with a maximum of 10 pupils and is taught by a teacher of the deaf. In all age-groups there is integration with the rest of the school for non-academic activities and each child integrates for lessons according to his academic progress and ability to communicate.

During the year 27 children attended the three units:—

Knavesmire (Nursery and Infants)	11
Haxby Road (Junior)	10
Danesmead (Secondary)	6

Two 11 year old children transferred during the year to Mary Hare Residential Grammar School for Deaf and Partially Hearing Children and two others attended residential school.

Educational Subnormality

In 1972, 76 children were examined by medical officers who recommended that 17 should be admitted to the day special school for the educationally sub-normal, 3 to residential schools and 12 were recommended for admission to Lidgett Grove Special School for mentally retarded children, five of whom required Special Care. In addition one pupil leaving the day special school was re-assessed concerning his future care.

Fulford Cross Day Special School for Educationally Subnormal Children

With the addition of an extra class room and another to open next year many problems are being solved. Also with the appointment of a remedial teacher to the staff the standard of literacy is improving with consequent improvement in psychological well being for many.

Unfortunately a speech therapist attends for only one half day weekly, which means that some children are not receiving all the help they need.

While physical activities are pursued with vigour there is a good case for a remedial class to be established in the school for children with poor posture and clumsy motor co-ordination. Unfortunately these children do not readily attend the school clinic.

Lidgett Grove Special School for mentally retarded children

Regular medical inspections are achieving results, particularly in the discovery of unsuspected hearing defects in older children.

There is increasing pressure on the Special Care Unit where a waiting list for admission is building up; this has been eased a little by the merging of the Day Care section of the Unit hitherto earmarked for the Spastics Society into the Special Care Unit: with increased staff a few more places have been made available and the Spastic children are now able to benefit from the better facilities.

The short working day due to transport delays for the severely handicapped is still a problem, and this, together with the restricted facilities for medical examination makes the doctor's contribution more difficult to achieve than one could wish, but this is offset by the devotion and co-operation of the staff and parents.

CO-ORDINATION OF SERVICES FOR THE HANDICAPPED

A committee meets several times a year to discuss and co-ordinate the Services for handicapped children and young people. The members include doctors from child health clinics and the school health service, consultant

paediatricians, welfare officers for the handicapped, an education welfare officer and the careers officer, together with others who may have an interest in a particular child or subject under discussion. The prospects and problems of individual children are considered and also subjects of general interest relating to the welfare of handicapped children.

CO-OPERATION WITH OTHER SECTIONS OF THE HEALTH SERVICES AND WITH OTHER LOCAL AUTHORITY DEPARTMENTS

There is close liaison with family doctors and with consultants in the hospital service. The family doctors are frequently consulted about individual children and their families and are always consulted before a child is referred to hospital. When a hospital doctor writes about his findings a copy is sent to both the family doctor and to the school medical officer. Opportunities are also made at professional meetings for informal discussion. In addition, special case conferences are called between members of many departments, together with the teacher and family doctor where the special problems of a child or family require the co-operation of many disciplines.

MORTALITY OF SCHOOL CHILDREN

In 1972 two York school children died, one as a result of asphyxia, the other through misadventure.

SCHOOL DENTAL SERVICES

The Principal School Dental Officer reports as follows:—

The year was difficult due to staff shortages. For the entire year there were only two full-time dental officers and both suburban clinics were staffed by part-time dental officers for part of the year. The staffing situation was made more difficult by the loss of a dental auxiliary on the 29th February who was not replaced until the beginning of the autumn term. It was realised that preventive efforts must be increased in order to avoid a backlog of work building up before the staff could be replaced. Application of fluoride gels and mouth rinsing with fluoride solutions are proven methods of reducing dental decay. Consequently most children with high decay rates who were treated at the clinic were given an application of topical fluoride and a mouth rinse of fluoride solution was given at each visit. In some cases where patients had a very high decay rate parents were issued with fluoride solution to enable fortnightly mouth rinses to be carried out at home. It was believed that these measures would inhibit much decay. A further preventive measure, the sealing of tooth fissures, was also instituted. In a newly erupted molar tooth it is now

possible to seal the fissures on the crown of the tooth with an acrylic resin. The resin in liquid form is painted onto the tooth fissures and then hardened by exposure to ultra violet light which is applied using a special mouth lamp. The first molar teeth in the permanent dentition are particularly susceptible to decay and the fissures are almost invariably the site of first attack. Hence, whilst sealing does not protect between the teeth it does protect the most vulnerable part. Combined with topical fluoride treatment a high degree of resistance can be achieved. The technique is easy and since no drilling is involved is particularly suitable for young children. None of these measures is, however, as satisfactory or as cheap as the fluoridation of water supplies.

Specialised services have functioned well. The area orthodontic consultant holds a joint clinic with your dental officers in the school clinic. This enables early skilled assessment to be made of the most difficult cases. The clinic for the severely handicapped, whose mental or physical condition precludes ordinary dental treatment, continues to prosper and is continuing to satisfy an increasing demand. We are grateful to Mrs. Nessa Train who, although she has entered general practice still continues to care for the children at Lidget Grove School.

Work started on the additional surgery at the Acomb Clinic in Cornlands Road. When completed this clinic will have a full time dental officer and a half time dental auxiliary. It is proposed to carry out an extensive preventive programme in the area. The old fashioned equipment at Tang Hall Clinic will need replacing in the near future to allow full seated-dentistry.

A number of interesting events have taken place during the year. The Principal School Dental Officer was installed as president of the Public Dental Officers Group of the British Dental Association at their A.G.M. at York in April.

He also carried out the following engagements:—

(1) As a member of the School Health Service Sub-Committee of the Working Party on Collaboration at the Department of Health and Social Security.

(2) In September lectured in Oxford at a refresher course for public dental officers.

(3) Lectured at the Scientific Meeting of the Society of Dental Auxiliaries in London.

(4) Attended a three week course at York University on Management in Integrated Health Care.

(5) Continued to act as an honorary clinician at the Dental Hospital at Leeds.

Miss McRaith and Miss Kirkbride attended a Symposium on supervised dentistry at Manchester University in April.

Miss Kirkbride attended a day Seminar for Dental Auxiliaries in Huddersfield in May and also the Scientific Meeting in London.

The Principal School Dental Officer has acted as adviser to the Dental Service in Barbados and is continuing to help in this role.

A one week health education project was carried out by the dental auxiliaries at Woodthorpe Junior School in November.

In September the appointment of a second auxiliary and in November of a second full-time dental officer restored the service to its normal complement.

In retrospect 1972 was a happy year in which in spite of difficulties much work was completed and the service branched out well in the preventive field. All members of staff find the work stimulating, satisfying and fulfilling.

THE CHILD GUIDANCE CLINIC AND SCHOOL PSYCHOLOGICAL SERVICE

The number of children referred to the Child Guidance Clinic and Schools' Psychological Service continues to run at around 300. It has been decided that as it is very difficult to categorize these children as either emotional/behavioural problems or educational problems, since the two are often causally connected, and the statistical tables will not in future artificially separate the two.

In 1972 the cases of 95 boys and 64 girls were closed.

During the year the 7+ Reading Survey continued and expanded with the help of mature students from Hull College of Education. The children tested are in their first year in Junior School and the survey takes place during October and November so that the children are well settled in their new schools. This year 14 schools joined the survey and a total of 1,119 children or 72% of the 7+ age group were tested. The distribution of reading ages found in the group are set out in table 2. Again it was found that the average reading age of York children (7.8 years) is about the same as the average for the country. There is no serious reading problem as in many of Yorkshire's industrial areas.

The remedial teachers regularly saw throughout the year 70 boys and 17 girls who were retarded in reading and mathematics.

A study of the learning deficits of 'Travelling Children' was published this year in 'Pivot' the magazine of the York Teachers' Centre and much interest has been expressed in the findings.

One innovation has been the useful co-operation with the new Children's Assessment Unit at the County Hospital in which the paediatricians, the school medical officers, speech therapists and physiotherapists and educational psychologists have worked as a team to study handicapped children.

York and Leeds Universities and Hull College of Education have regularly placed advanced and post-graduate students—teachers, psychiatric social workers and psychiatrists at the Clinic for training.

The Reading Centre continues to flourish and there is a good selection of remedial material which attracts a large number of teachers and students.

The staff of the Child Guidance Clinic have again been actively engaged in talks and lectures to students, teachers, parent groups and others.

Table 1

New Registrations in 1972

Sources of Referral	Boys	Girls	Total
School Medical Officer	25	12	37
General Practitioners and Hospitals	35	18	53
Education Department	2	—	2
Head Teachers	27	11	38
Juvenile Courts, Probation Officer	7	—	7
Social Services Department	7	5	12
Parents	35	10	45
Speech Therapists	1	—	1
	139	56	195

Table 2

7+ Reading Survey

**Distribution of Reading Ages found in
a group of 1,119 children tested**

Years (Reading Level)	No. of Children
Less than 6 years	12
6—6.9	209
7—7.9	537
8—8.9	221
9—9.9	82
10+	58
Total	1,119

Table 3**Summary**

Number of Interviews and Case Enquiries by :—	Total
Psychiatrists	766
Psychologist	297
Psychiatric Social Workers	972
	2,035

MISCELLANEOUS**Medical Examinations**

In addition to the work referred to elsewhere the medical officers carried out the following examinations :—

Part-time employment of children	196
Youth Employment medical reports	7
Entrants to Colleges of Education	140
Appointment of Education Service Staff	72
Children going to residential schools	17
Assessment of educational ability	76
	<hr/> 508 <hr/>

Youth Employment Medical Reports

Reports were forwarded to the Careers Officer to assist him in the placement of certain pupils who had a defect which might make them unsuitable for certain types of employment. Seven reports (Form Y9) were issued with regard to the following disabilities :—

Defective Vision (Colour)	5
Cardiac Condition	1
Poor hand control and co-ordination	1
Total	<hr/> 7 <hr/>

Referrals to Hospital

Medical officers only refer a school child to a hospital consultant by prior agreement of the family doctor. Hospital appointments were arranged for 107 children. In addition, family doctors were notified of 66 children who were referred to the Eye Department of York County Hospital.

Hospital Reports

Reports were received for 367 children during 1972. The information is helpful and is only one aspect of the co-operation which the School Health Service receives from the consultant staff, as well as from the family doctors. In return the Service endeavours to maintain close links with those of other members of the National Health Service, through informal, as well as official channels.

Convalescent Holidays

During the year 11 children were sent on convalescent holidays under the provisions of Section 12 of the Health Services and Public Health Act. Their ages ranged from 5 to 13 years. Most were suffering from debility.

Provision of Meals

The number of meals provided in the year was 1,539,071. A census taken in October showed that 46.97% of children were having meals. Of the meals served 11.7% were supplied free of charge. Provision was made, as in former years, for children in receipt of free meals to have them during the holidays. Only 5.5% of those eligible attended at Christmas, 7.3% at Easter, and 9.9% during the Summer holidays.

Provision of Milk

The percentage of children in primary schools taking milk in October, 1972 was 40.03%. (In accordance with the Education (Milk) Act 1971, milk is supplied to children under the age of seven, those attending special schools and to others on medical grounds only.)

Five medical certificates were given to enable children over seven to have free milk. Three of these were renewals of those given last year.

Provision of Clothing and Footwear

A number of children were found to be in need of suitable clothing and footwear.

Number reported	.. .. .	Boys	775
		Girls	545
Number of families involved	.. ..		654

The following items were provided:—

Boys:	Footwear	843
	Overcoats/Duffles	184
	Jackets/Jumpers	233
	Trousers	314
Girls:	Footwear	624
	Overcoats/Duffles	175
	Dresses, tunics, skirts, blouses, etc.	482
		<hr/> 2,855 <hr/>

National Society for the Prevention of Cruelty to Children

The Senior Inspector reported the following details of work done by himself and his staff in York City during 1972:—

1. Number of new cases dealt with in the City involving — Lack of care, Physical injury, Behavioural problems, Children left alone, Material, Financial and Housing problems 63
2. Number of persons seeking advice from the Society concerning their children 28
3. Number of Parents who were warned, advised or assisted with regard to their children 87
4. Number of children involved under items 2 & 3 and those previously notified 325
5. Number of supervisory visits made in connection with items 2 & 3 and previously notified cases 548
6. Number of other visits made during the year 626

The Society also reported that there were no prosecutions or Juvenile Court cases in 1972.

York Schools Athletic Association

Teachers have continued their voluntary work enabling school children of York and District to take part in various games and sports, a valuable contribution to maintenance of the health of York school children.

SCHOOL HEALTH SERVICE: STAFF AND SCHOOL CLINICS

(Return for the year ended 31st December, 1972)

1. STAFF OF THE SCHOOL HEALTH SERVICE

Principal School Medical Officer: Dr. S. R. W. MOORE

	Number of officers employed		Number in terms of full-time officers employed	Vacancies full-time equivalent
	f.t.	p.t.		
a. MEDICAL OFFICERS (INCLUDING PRINCIPAL SCHOOL MEDICAL OFFICER) :—				
i. solely School Health Service	—	—	—	—
ii. a. part-time School Health Service/rest of time with Local Health Service	6	1	2.9	—
b. part-time School Health Service/rest of time as General Practitioner	—	—	—	—
c. part-time School Health Service/rest of time on other medical work	—	—	—	—
iii. Ophthalmic Specialists	—	1	0.4	—
iv. Other Consultants and Specialists	—	—	—	—
b. NURSES AND HEALTH VISITORS				
i. Nurses holding Health Visitors Certificates				
a. employed solely in clinics	—	—	—	—
b. employed in clinics and elsewhere	8	—	2.4	—
ii. Nurses NOT holding Health Visitors Certificates				
a. employed solely in clinics	—	—	—	—
b. employed in clinics and elsewhere	4	1	4.5	—
iii. Nurses' assistants				
a. employed solely in clinics	—	—	—	—
b. employed in clinics and elsewhere	—	—	—	—
c. OTHER STAFF				
i. Senior Speech Therapist	—	—	—	—
ii. Speech Therapists	1	2	1.6	0.4
iii. Assistant Speech Therapists	—	—	—	—
iv. Audiometricians	1	—	1.0	—
v. Chiropodists	—	1	0.1	—
vi. Orthoptists	—	—	—	—
vii. Physiotherapists	—	2	1.2	—
viii. Others (excluding clerical staff) ; Remedial Gymnasts	—	2	0.2	—

Number of school clinics as at 31st December, 1972: 1

TYPE OF EXAMINATION AND/OR TREATMENT
provided at the School Clinics

Examination and/or treatment	Number of premises available as at 31st December, 1972
A. Minor ailment	1
B. Asthma	—
C. Audiology	—
D. Audiometry	1
E. Chiropody	1
F. Ear, Nose and Throat	—
G. Enuretic	1
H. Ophthalmic	1
I. Orthoptic	—
J. Orthopaedic	—
K. Paediatric	—
L. Physiotherapy and remedial exercises	—
M. Speech Therapy	1
N. School Medical Officer's special examination	1
O. Others	
Vaccination	1
Remedial Exercises	1

STAFF OF THE CHILD GUIDANCE CLINICS AND
SCHOOL PSYCHOLOGICAL SERVICE as at 31st December, 1972

Staff	Number employed		Number in terms of full time officers
	full time	part time	
i. Psychiatrists			
a. employed by the local education authority	—	—	—
b. employed under arrangements made with Hospital Authority	—	3	0.5
ii. Educational Psychologists	1	—	1.0
a. working in Child Guidance Clinics			1.0
b. working in School Psychological Service			—
iii. Psycho-therapists	—	—	—
iv. Social Workers — Qualified	2	—	2.0
Unqualified	—	—	—
v. Remedial Teachers	2	—	2.0
vi. Others (excluding clerical staff)	—	—	—

DETAILS OF CHILD GUIDANCE CLINICS WITHIN THE
AUTHORITY'S AREA as at 31st December, 1972

Provided by	No. of Clinics	No. of Clinics		Total No. of sessions worked in those Clinics in part-time use during 1972
		In full-time use	In part-time use	
the L.E.A.	1	1	—	—
Other bodies	—	—	—	—

RETURN OF HANDICAPPED CHILDREN

PART I

New assessments and placements

During the calendar year ended 31st December, 1972:—		Blind (1)	P.S. (2)	Deaf (3)	Pt.Hg. (4)	P.H. (5)	Del. (6)	Mal. (7)	E.S.N. (8)	Epil. (9)	Sp.Def. (10)	Total (11)
A	Number of Handicapped children newly assessed as needing special educational treatment at special schools or in boarding homes.	boys	3	1		1	4		2	24		35
		girls			2	3		1	14			20
B	Number of children newly placed in special schools or boarding homes.	(i) of those included at A above boys	1		1	3			7			12
		girls			1	1		1	5			8
		(ii) of those assessed prior to Jan. 1972 boys				1	1		4			6
		girls				1			7			8
		(iii) Total newly placed boys	1		1	4	1		11			18
		B (i) and (ii) girls			1	2		1	12			16

HANDICAPPED PUPILS AWAITING PLACEMENT (1-5)
AND RECEIVING SPECIAL EDUCATIONAL TREATMENT (6-12)

30

Children from the authority's area as at 25 January 1973																						
	Blind (1)		P.S. (2)		Deaf (3)		Pt. Hg. (4)		P.H. (5)		Del. (6)		Mal. (7)		E.S.N. (8)		Epil. (9)		Sp. Def. (10)		Total (11)	
	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.
6. Maintained Special Schools including attached units and hospital Special Schools.			8	3					32	23	8	3	1		135	89	3				187	118
									1	2			2	1	3	3	1				7	6
7. Non-maintained Special Schools including attached units and hospital Special Schools.																						
	2	2	1		1	3							3		6	4					13	9
8. Independent schools under arrangements made by the Authority.																						
													1	1	5						6	1
9. Special classes in ordinary schools.							9	9													9	9
10. Total on registers - 6 to 9 above.			8	3			9	9	32	23	8	3	1		135	89	3				196	127
	2	2	1		1	3			1	2			6	2	14	7	1				26	16
11. Boarded in homes and not already included above.																						
12. Educated under arrangements made by the Authority in accordance with Section 56 of the Education Act 1944.									1												1	
										1											1	
13. Total number of handicapped children awaiting places in special schools: receiving education in special schools; independent schools; special classes and units: under Section 56 of the Education Act 1944; and boarded in homes. Totals of 5, 10, 11 and 12.	3	2	10	3	1	3	9	10	35	27	8	3	9	2	166	105	4				245	155

PART III

NUMBER OF TEACHERS OF THE DEAF AND PARTIALLY HEARING
EMPLOYED BY THE AUTHORITY (OTHER THAN IN SPECIAL SCHOOLS)
on 25th January, 1973

Teachers employed	who have one of the special deaf qualifications		who do not have such a qualification		TOTAL	
	M 1	F 2	M	F	M 1	F 2
1. in special classes/units						
2. in audiology clinics						
3. as peripatetic teachers						
TOTALS	1	2			1	2

SCHOOL DENTAL SERVICE

Return for the year ended 31st December, 1972

Principal School Dental Officer: Graham Turner

1. STAFF

(as at 31st December, 1972)

Number of officers in local authority service		Full time equivalent inclusive of extra paid sessions worked			
Full time	Part time	Administrative duties	Clinical Duties		Total full time equivalent
			School Service	M & C.H. Service	

(a) Dental Officers (including Orthodontists)

Principal School Dental Officer

1	—	0.2	0.7	0.1	1
1	—	—	1.9	0.1	1

Salaried Dental Officers

Sessional Dental Officers

—	2	—	0.5	0.3	0.8
---	---	---	-----	-----	-----

Total (a)

2	2	0.2	3.1	0.5	2.8
---	---	-----	-----	-----	-----

(b) Dental Auxiliaries and Hygienists

Dental Auxiliaries

2	—	—	1.8	0.2	2
—	—	—	—	—	—

Dental Hygienists

(c) Other Staff

Dental Technicians

Dental Surgery Assistants

Clerical Assistants

Dental Health Education Personnel

Number of Officers	Full time equivalent
—	—
5	5
—	—
—	—

2. SCHOOL DENTAL CLINICS

Provided directly by the Authority

Fixed Clinics				Mobile Clinics		
No. with ONE surgery only	No. with TWO or more surgeries	Total number of surgeries		Total number of clinics		Total number of sessions worked in 1972
		Available	In use	Available	In use	
2	1	5	5	—	—	—

3.

INSPECTIONS

- (a) First inspection—school
 (b) First inspection—clinic
 (c) Re-inspection—school or clinic

Totals

Number of pupils		
Inspected	Requiring treatment	Offered treatment
15,729	} 8,385	} 8,379
2,784		
3,096	1,585	1,585
21,609	9,970	9,964

4. VISITS (for treatment only)

First visit in the calendar year

Subsequent visits

Total visits

Ages 5—9	Ages 10—14	Ages 15 and over	Total
1,589	1,356	343	3,288
2,590	2,950	867	6,407
4,179	4,306	1,210	9,695

5. COURSES OF TREATMENT

Additional courses commenced

Total courses commenced

Courses completed

178	145	25	348
1,767	1,501	368	3,636
—	—	—	3,367

6. TREATMENT

Fillings in permanent teeth

Fillings in deciduous teeth

1,998	3,544	1,121	6,663
1,530	91	—	1,621

Permanent teeth filled

Deciduous teeth filled

1,545	3,124	1,034	5,703
1,426	77	—	1,503

Permanent teeth extracted

Deciduous teeth extracted

75	341	67	483
1,476	618	—	2,194

Number of general anaesthetics

415	153	12	580
-----	-----	----	-----

Number of emergencies

158	73	16	247
-----	----	----	-----

Number of Pupils X-rayed
 Prophylaxis
 Teeth otherwise conserved
 Number of teeth root filled
 Inlays
 Crowns
 Na F
 Bridges

193
 422
 709
 23
 5
 72
 47
 1

7. ORTHODONTICS

New cases commenced during the year	57
Cases completed during the year	41
Cases discontinued during the year	1
No. of removable appliances fitted	79
No. of fixed appliances fitted	4
No. of pupils referred to Hospital Consultants	1

8. DENTURES

Number of pupils fitted with dentures for the first time:—

(a) with full denture

(b) with other dentures

Total

Ages 5 — 9	Ages 10 — 14	Ages 15 and over	Total
—	—	—	—
—	3	3	6
—	3	3	6

Number of dentures supplied
(first or subsequent time)

—	2	2	4
---	---	---	---

9. ANAESTHETICS

Number of general anaesthetics administered by Dental Officers

16

10. SESSIONS:

	Adminis- trative sessions	Number of clinical sessions worked in the year					Total sessions
		School Service			M. & C.H. Service		
		Inspection at School	Treatment	Dental Health Education	Treatment	Dental Health Education	
Dental Officers (incl. P.S.D.O.)	47	88	986	—	165	—	1,286
Dental Auxiliaries	—	—	627	48	8	—	683
Dental Hygienists	—	—	—	—	—	—	—
Total	47	88	1,613	48	173	—	1,969

11. DENTAL HEALTH EDUCATION

The Dental Auxiliaries visit schools educating children in oral hygiene, showing films, etc.

A leaflet is given to each child at School Dental Inspections.

Posters are circulated to schools at regular intervals.

Lectures are given by the Principal School Dental Officer to students at the clinic and at schools.

Observation sessions for sixth formers are held in the clinic surgeries.

DENTAL AUXILIARIES
Details of work carried out by Dental Auxiliaries

4. VISITS (for treatment only)

First visit in the calendar year

Subsequent visit

Total visits

Ages 5 — 9	Ages 10 — 14	Ages 15 and over	Total
392	366	134	892
868	1,014	399	2,281
1,260	1,380	533	3,173

5. COURSES OF TREATMENT

Additional courses commenced

Total courses commenced

Courses completed

24	23	5	52
416	389	139	944
—	—	—	982

6. TREATMENT

Fillings in permanent teeth

Fillings in deciduous teeth

952	1,864	693	3,509
531	7	—	538

Permanent teeth filled

Deciduous teeth filled

733	1,662	641	3,036
476	6	—	482

Deciduous teeth extracted

50	47	—	97
----	----	---	----

Prophylaxis

—	—	—	230
---	---	---	-----

MEDICAL INSPECTION AND TREATMENT

Return for the Year ended 31st December, 1972

Number of pupils on registers of maintained primary, secondary, special and nursery schools in January, 1973: 18,967

PART I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A
PERIODIC MEDICAL INSPECTIONS

Age Groups inspected (By year of Birth)	No. of pupils who have re- ceived a full medical examin- ation	Physical Condi- tion of pupils Inspected		No. of pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satis- factory	Unsatis- factory		for defective vision (exclud- ing squint)	for any other condition recorded at Part II	Total Indi- vidual pupils I
		No.	No.				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1968 and later	127	125	2	—	20	16	33
1967	1,032	1,030	2	—	168	231	319
1966	573	570	3	—	71	189	195
1965	50	47	3	—	5	12	14
1964	47	42	5	—	8	20	21
1963	44	44	—	—	3	20	15
1962	44	41	3	—	7	8	14
1961	87	85	2	716	12	22	29
1960	74	73	1	372	10	14	22
1959	54	52	2	—	7	11	13
1958	42	41	1	—	7	7	13
1957 and earlier	79	77	2	571	11	7	17
Total	2,253	2,227	26	1,659	329	557	705

TABLE B
OTHER INSPECTIONS

Number of Special Inspections	..	..	..	..	5,078
Number of Re-inspections	..	..	..	..	911
				Total	5,989

TABLE C
INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	42,400
(b) Total number of individual pupils found to be infested ..	482
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ..	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ..	—

PART II
TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY
AND SECONDARY SCHOOLS (INCLUDING NURSERY AND
SPECIAL SCHOOLS)

TABLE A
EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	45
Errors of refraction (including squint)	2,839
Total	2,884
Number of pupils for whom spectacles were prescribed	1,225

TABLE B
DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment:—	
(a) for diseases of the ear	15
(b) for adenoids and chronic tonsillitis	13
(c) for other nose and throat conditions	1
Received other forms of treatment	128
Total	157
Total number of pupils still on the register of schools at 31st December, 1972, known to have been provided with hearing aids:—	
(a) during the calendar year 1972	4
(b) in previous years	28

TABLE C
ORTHOPAEDIC AND POSTURAL DEFECTS

	Number known to have been treated
(a) Pupils treated at clinics or out-patients departments	50
(b) Pupils treated at school for postural defects ..	—
Total	50

TABLE D
DISEASES OF THE SKIN
(Excluding uncleanness, for which see Table C of Part I)

	Number of pupils known to have been treated
Ringworm—(a) Scalp	—
(b) Body	—
Scabies	2
Impetigo	2
Other skin diseases	356
Total	360

TABLE E
CHILD GUIDANCE TREATMENT

	Number known to have been treated
Pupils treated at Child Guidance clinics	288

TABLE F
SPEECH THERAPY

	Number known to have been treated
Pupils treated by speech therapists	399

TABLE G
OTHER TREATMENT GIVEN

	Number known to have been treated
(a) Pupils with minor ailments	166
(b) Pupils who received convalescent treatment under School Health Service arrangements..	11
(c) Pupils who received B.C.G. vaccination ..	1,207
(d) Others: Chiropody	270
Total ..	1,654

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