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EAST SUFFOLK COUNTY COUNCIL

HEALTH DEPARTMENT COUNTY HALL IPSWICH

ANNUAL REPORT OF THE County Medical Officer AND Principal School Medical Officer FOR THE YEAR 1972






East Suffolk County Council

Erratum

Please note that Table IV, (pages 14–17) as shown in the Annual Report of the County Medical Officer for the year 1972, is incorrect and should be replaced by the following table.



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TABLE IV

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE

CAUSES OF DEATH	SEX	AGGREGATE OF URBAN DISTRICTS										AGGREGATE OF RURAL DISTRICTS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
		All ages	0-14	15-44	45-64	65-74	75+	All ages	0-14	15-44	45-64	65-74	75+	All ages	0-14	15-44	45-64	65-74	75+																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
ALL CAUSES	M	722	17	5	12	20	165	243	304	481	22	2	2	11	26	187	271	360																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	

Continued overleaf

TABLE IV Continued

CAUSES OF DEATH	SEX	AGGREGATE OF URBAN DISTRICTS										AGGREGATE OF RURAL DISTRICTS									
		All INDIA	0-14	15-24	25-44	45-64	65-74	75-All	All INDIA	0-14	15-24	25-44	45-64	65-74	75-All						
B.46(2) Other diseases of blood etc.	M	-	-	-	-	-	-	-	1	-	-	-	-	-	1						
B.46(3) Mental disorders	M	1	-	-	-	-	-	1	3	1	-	-	-	-	2						
B.24 Meningitis	F	1	-	-	-	-	-	1	2	-	-	-	-	-	2						
B.46(4) Multiple Sclerosis	M	2	-	-	-	-	-	2	-	-	-	-	-	-	-						
B.46(5) Other diseases of nervous system etc.	M	3	-	-	-	-	-	1	2	1	-	-	-	-	1						
B.25 Active rheumatic fever	F	2	-	-	-	-	-	1	3	-	-	-	-	-	3						
B.26 Chronic rheumatic heart disease	M	7	-	-	-	-	-	1	9	2	-	-	-	-	2						
B.27 Hypertensive disease	F	7	-	-	-	-	-	3	8	-	-	-	-	-	3						
B.28 Ischaemic heart disease	F	10	-	-	-	-	-	3	5	9	-	-	-	-	1						
B.29 Other forms of heart disease	F	14	-	-	-	-	-	2	1	5	9	-	-	-	1						
B.30 Cerebro vascular disease	M	223	-	-	-	-	-	4	57	76	762	-	-	-	1						
B.46(6) Other diseases of circulatory system	F	169	-	-	-	-	-	2	10	30	327	184	-	-	2						
B.31 Influenza	M	73	-	-	-	-	-	11	5	12	12	-	-	-	1						
B.32 Pneumonia	M	8	-	-	-	-	-	2	10	61	37	-	-	-	2						
B.33(1) Bronchitis and emphysema	F	79	-	-	-	-	-	3	19	50	81	-	-	-	2						
B.33(2) Asthma	M	25	-	-	-	-	-	2	3	11	68	86	1	-	1						
B.46(7) Other diseases of respiratory system	M	3	-	-	-	-	-	1	1	2	5	17	58	66	3						
B.34 Peptic ulcer	M	5	-	-	-	-	-	1	5	10	10	28	-	-	3						
B.35 Appendicitis	F	6	-	-	-	-	-	1	1	2	3	12	-	-	2						
B.36 Intestinal obstruction and hernia	M	1	-	-	-	-	-	2	4	4	4	-	-	-	1						
B.37 Cirrhosis of liver	M	5	-	-	-	-	-	1	1	3	-	-	-	-	1						
B.46(8) Other diseases of digestive system	M	2	-	-	-	-	-	1	1	6	1	-	-	-	2						
B.38 Nephritis and nephrosis	F	4	-	-	-	-	-	2	4	2	6	13	-	-	3						
B.39 Hyperplasia of prostate	M	7	-	-	-	-	-	1	4	2	4	-	-	-	1						
B.46(9) Other diseases of genito-urinary system	M	3	-	-	-	-	-	3	2	-	-	-	-	-	1						
B.40 Abortion	F	4	-	-	-	-	-	1	3	5	-	-	-	-	4						
B.41 Other complications of pregnancy etc.	F	1	-	-	-	-	-	-	-	-	-	-	-	-	1						
B.46(10) Diseases of the skin and subcutaneous tissue	M	1	-	-	-	-	-	1	1	2	-	-	-	-	2						
B.46(11) Diseases of musculo-skeletal system	F	1	-	-	-	-	-	1	1	1	-	-	-	-	1						
B.42 Congenital anomalies	F	9	-	-	-	-	-	2	7	10	-	-	-	-	7						
B.43 Birth injury - difficult labour etc.	M	5	-	-	-	-	-	1	1	6	-	-	-	-	1						
B.44 Other causes of perinatal mortality	M	3	-	-	-	-	-	1	7	3	-	-	-	-	1						
B.45 Symptoms and ill-defined conditions	F	4	-	-	-	-	-	1	12	12	-	-	-	-	1						
B.46 Motor vehicle accidents	M	4	-	-	-	-	-	3	3	3	-	-	-	-	1						
B.47 All other accidents	F	7	-	-	-	-	-	1	5	1	-	-	-	-	1						
B.48 Suicide and self inflicted injuries	M	14	-	-	-	-	-	8	1	18	-	-	-	-	1						
B.49 All other external causes	F	9	-	-	-	-	-	1	10	4	-	-	-	-	1						
B.50 All other external causes	M	11	-	-	-	-	-	2	5	16	2	-	-	-	2						
B.51 All other external causes	F	5	-	-	-	-	-	4	2	6	1	-	-	-	2						
B.52 All other external causes	M	1	-	-	-	-	-	1	1	1	-	-	-	-	1						



EAST SUFFOLK COUNTY COUNCIL

HEALTH DEPARTMENT COUNTY HALL IPSWICH

ANNUAL REPORT

OF THE

County Medical Officer

AND

Principal School Medical Officer

FOR THE YEAR

1972

CONTENTS

	<u>Page</u>
INTRODUCTION	4
STAFF	8
GENERAL STUDIES	10
NATIONAL HEALTH SERVICE ACTS --	
Section 21 Health Centres	18
" 22 Care of Mothers and Young Children	18
" 23 Midwifery	20
" 24 Health Visiting	21
" 25 Home Nursing	21
" 26 Vaccination and Immunisation ...	22
" 27 Ambulance Service	23
" 28 Prevention, Care and After-Care	23
ENVIRONMENTAL HEALTH SERVICES --	
Housing	25
Inspection of Meat	25
Milk and Dairies	25
Water Supplies and Sewerage	31
GENERAL	32
SCHOOL HEALTH SERVICE --	
Maintained Schools	33
School Clinics	33
Medical Inspection	34
Handicapped Pupils	35
Service for hearing impaired	36
Schools Psychological Service	36
Child Guidance	38
Cleanliness	38
Physiotherapy	39
School Dental Service	40
Speech Therapy	41
School Meals Service	42
School Transport	43
Sweep Testing (Vision and Hearing) ...	43
Employment of children	43
Miscellaneous Examinations	43
Swimming Pools	44
School Milk Supply	44
Lowestoft Excepted District	45

TABLES

<u>Number</u>		<u>Page</u>
I	VITAL STATISTICS (extracts) ...	10
II	POPULATION, BIRTHS, DEATHS ...	11
III	CAUSES OF DEATH IN EACH DISTRICT	12
IV	CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE	14
V	CHILD HEALTH CLINICS ...	18
VI	DENTAL TREATMENT (Mothers and Infants)	19
VII	HEALTH VISITING	21
VIII	HOME NURSING	21
IX	VACCINATION AND IMMUNISATION ...	22
X	AMBULANCE AND HOSPITAL CAR SERVICE	23
XI	TUBERCULOSIS REGISTER -- summary	23
XII	HOUSING -- Boroughs and Urban Districts	26
XIII	HOUSING -- Rural Districts	27
XIV	INSPECTION OF MEAT	28
XV	MILK LICENCES	30
XVI	MILK SAMPLING	30
XVII	INFECTIOUS DISEASES -- notifications ...	32
XVIII	RETURN OF HANDICAPPED CHILDREN	46
XIX	PART I -- Medical Inspections of Pupils	48
	PART III -- Treatment of Pupils ...	50
XX	DENTAL INSPECTION AND TREATMENT	52

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Ipswich 212345



East Suffolk County Council,
Health Department,
Milner House,
County Hall,
Ipswich,
IP4 1QH.

August 1973.

To the Chairman and Members
of the County Council

My Lords, Ladies and Gentlemen,

I have the honour of presenting the Annual Report on the health of the County of East Suffolk for the year 1972. In accordance with the practice established in 1969 this is a combined report on the health services and the school health services.

Vital Statistics

The Registrar General's figures for the year do not appear to call for any comment as they show only slight fluctuation in the Birth, Still-birth and Death Rates and these variations are to be expected from year to year. Unfortunately, this year I again have to report one death of a mother associated with childbirth.

Health Centres

The first purpose-built health centre in the County opened in September and provides facilities for Local Health Authority clinics and services as well as accommodation for Hospital Board out-patient clinics and General Practitioners. There is also provision for office accommodation for nursing staff and members of the Social Services Area Team. The opening of the centre has stimulated interest from other quarters in the County and further proposals are currently being investigated.

Nursing Services

I am glad to be able to report that by the end of the year the attachment schemes for nursing and health visiting staff to general practitioners was practically complete except where areas overlap administrative boundaries. The number of domiciliary confinements continues to drop and of the 3781 live births in 1972 662 only were delivered at home but there is, of course, a corresponding rise in the number of mothers discharged from hospital before the tenth day and who were attended by the domiciliary midwife. The attachment schemes and the early discharge from hospital of both midwifery and general nursing cases is putting more work on the domiciliary staff and towards the end of the year staffing position was being reviewed.

The policy of appointing nursing auxiliaries working under the guidance of qualified staff which was initiated in the Autumn of 1970 has proved very successful, both for the need to ensure that qualified staff are free to use their skills and also to help people who, although they may find it difficult on account of age or infirmity to attend to their personal needs yet wish to and should live in the community.

Following the publication by the Department of Health and Social Security of the Report of Working Party on Management Structure in the Local Authority Nursing Services (the Mayston Report) it was decided to adopt a Management structure for East Suffolk. Very briefly it was accepted that three levels of management -- top, middle and lower middle -- can be identified, the top level responsible for policy making, middle management for programming and lower middle management with executive responsibility.

It was agreed that the middle managers should be appointed on a geographical basis rather than on a functional basis, as being more appropriate to a rural county and that the views of Ipswich County Borough Council and West Suffolk County Council be sought as to whether a joint appointment of a Director of Nursing Services could be made.

Ipswich County Borough Council agreed to such an appointment, and by the end of the year the four Area Nursing Officers were in post, with Joint Director of Nursing Services Miss S.M. Wright, S.R.N., S.C.M., H.V., Q.N., R.C.N. Administrative Certificate (Public Health) taking up duty on January 1st 1973.

Ambulance and Hospital Car Service

The number of miles, journeys and patients carried by the ambulance and hospital car service continue to rise and this is most noticeable with the Hospital Car Service figures and is undoubtedly due to the increasing number of patients carried to Day Care Hospitals run by the Hospital Authority. The arrangements for this type of transport are putting a great strain on the facilities available under the Hospital Car Service.

Vaccination and Immunisation

The Vaccination and Immunisation programme continues to operate through the health visiting staff persuading parents to get their children immunised against various diseases and the figures for protective inoculations against whooping cough, tetanus, poliomyelitis and diphtheria show an increase on the previous year. About 80% of all children are protected.

Congenital Defects apparent at Birth

The notification of congenital defects with the birth card continues to operate smoothly. The required statistics are sent to the Registrar General each month and in addition a register is maintained so that any potential handicap may be followed up and any necessary treatment put in hand.

Family Planning Service

The Family Planning Association acts as the agent for the County Council in providing a family planning service.

The County Council accepts responsibility for the approved fee for all East Suffolk women attending the Family Planning Association clinics and in addition pays the cost of appliances for those seen on medical grounds.

Flouridation of Water Supplies

The water supply to the various towns and parishes in the County is derived from sources which also supply our neighbours and therefore any unilateral action in attempting to help the health of the Community of East Suffolk is doomed to failure.

I reported last year that the West Suffolk Water Board had been asked by the West Suffolk County Council to carry out flouridation of their supplies, and that this would benefit some twelve parishes in East Suffolk. However, at the time of writing it is understood that no flouridated water has flowed through the piped supply to these East Suffolk parishes.

Contact Tracing

There is close co-operation between the Health Department and the hospital authorities to ensure that wherever possible contacts of patients suffering from venereal disease are encouraged to seek medical advice. These arrangements have existed for a number of years and have proved to be effective.

School Health Service

Once again I am pleased to report on the excellent general health of the school child in the County.

The National Nutritional Survey I mentioned last year was carried out in September 1972, at Bungay County Primary School. Over 90% of pupils at the school were finally included in the survey. I consider this to be a magnificent response to the voluntary survey which entailed the parents having to complete quite complicated questionnaires.

The weighing and measuring at the school went off very well, thanks to the co-operation of all concerned, and I am particularly grateful to the Headmaster and his staff for their forbearance. Plans are already afoot to carry out a similar survey in 1973.

The use of the old dental trailer as a mobile medical inspection room has proved beneficial in some respects, although certain general practitioners have reservations about its value. I think, however, their remarks are more concerned with the present vehicle than with the concept. I acknowledge that it is only a makeshift affair but I feel that it is much better than some of the accommodation available at schools.

Whilst we are now in the midst of reorganisation as noted elsewhere, and it has been decided that the School Health Service will move to the new Area Health Authority, the more detailed planning for this Service has not yet started. We still await further guidance from the Departments concerned and time alas is running out.

General

In my report for 1971 I commented on the difficulties caused by lack of knowledge of the implications of the Central Government intentions as regards the reorganisation of the National Health Service. These uncertainties were to some degree resolved by the White Paper published at the beginning of August and by the Bill to reorganise the service which was presented to Parliament in November 1972. However, the brevity of both documents drew attention to all the details which would have to be worked out in a very short space of time if everything was to be shipshape by 1st April 1974. Joint Liaison Committees consisting of officers from all three branches of the present National Health Service were set up in the Summer of 1972 and numerous meetings of these committees and their sub-committees and working parties have taken place. Their function has been to collate facts and information about existing services and to try and identify problems with possible alternate solutions in order that the Health Authorities, when these bodies are set up, may have the necessary information before them.

This task has not been helped by the lack of Central Government advice and a delay in reaching decisions such as whether the School Health Service would or would not be transferred from local government to the new health authority. Any reorganisation of a service which has been in being since 1948 is bound to cause anxieties and stress among staff directly or indirectly involved, which could at least in the short term have an adverse effect. One can only hope the new organisation when finally worked out will be an improvement on the present tripartite arrangements, and that there can be created the very necessary links between the health authority and the coterminous local authority especially in respect of the social, educational and environmental services.

I would like to express my thanks to the Chairman and members of the Health and Education Committees for their interest and support of the Department. I am also most grateful for the help and co-operation of the Chief Education Officer and his staff, of the Director of Social Services and of all my medical colleagues both in the hospital world and in general practice. Above all however I would wish to thank all the members of the Health Department professional, technical, administrative or clerical, for their loyal support and enthusiasm.

I have the honour to be,

Your obedient servant,

S. T. G. GRAY,

County Medical Officer and
Principal School Medical Officer.

STAFF

County Medical Officer and

Principal School Medical Officer: S.T.G. Gray, M.B., Ch.B.,
F.F.C.M., D.P.H.

Senior Medical Officer: Joyce O.M. Board, M.B., B.S., M.F.C.M.,
D.C.H.

Assistant County Medical Officers:

- Elizabeth M. Chester, M.B., Ch.B. (part-time)
*A.C. Gee, M.R.C.S., L.R.C.P., D.P.H.
*Hilary S.M. Hadaway, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
(part-time)
*Lilian Jean Halliday, M.B. Ch.B. (part-time) (from 11.9.72.).
Kathleen M. Harding, M.D., D.P.H.
*Barbara J. Mawer, M.B., B.S., M.R.C.S., L.R.C.P. (part-time).
Edith A. Parkinson, M.B., Ch.B., D.P.H. (part-time) (to 30.9.72.).
*H.J. Royall, M.B., Ch.B., D.P.H., D.I.H.
*Janet F. Tait, M.B., B.S., (part-time)
*Monica L. Tisdall, M.B., B.S., L.R.C.P., M.R.C.S.
*Ruth Wright, M.B., B.S. (part-time)

*Also School Medical Officers

Principal School Dental Officer: C.D. Macpherson, L.D.S., R.C.S.

School Dental Officers: L.F. Auckland, L.D.S., B.D.S.
E.B.C. Cliff, O.B.E., F.D.S., R.C.S.
F.J. Goldsworthy, L.D.S., R.C.S.
W.H.R. Still, L.D.S., R.C.S.
(from 10.1.72.)
Mrs. A.W. Warburton, L.D.S., R.F.P.S.
R.B. Warburton, L.D.S., R.C.S. (Edin.)

County Nursing Officer:

Miss R.E. Topham, S.R.N., S.C.M., H.V. Cert. Q.I.D.N.
(to 31.12.72.)

Area Nursing Officers:

Miss M. Crowley, S.R.N., S.C.M., H.V. Cert. Q.I.D.N.
Miss M. Jarrett, S.R.N., S.C.M., H.V. Cert. Q.I.D.N.
Miss M.F. Parsons, S.R.N., S.C.M., H.V. Cert. Q.I.D.N.
Miss D.B. Wagland, S.R.N., S.C.M., H.V. Cert. Q.I.D.N.

Health Visitors:

The staff of Health Visitors was 35 whole-time (5 of whom were holding combined appointments as district nurse/midwife-health visitors) and 6 part-time. The aggregate of time given to School Health Work was equivalent to the services of 6.6 full-time Health Visitors.

District Nurse/Midwives:

Fifty district nurse/midwives (including 5 who were also district nurse/midwives-health visitors and 5 part-time), 8 district midwives (including 1 part-time) and 33 district nurses (including 5 part-time) were in post.

Senior Speech Therapist:

Miss J. M. Lawrence, L.C.S.T.

Speech Therapists:

Miss J. Bassett, L.C.S.T. (part-time)
Miss K. Blacklock, L.C.S.T. (from 1.5.72.)
Mrs. H. J. Blackshaw, L.C.S.T. (part-time) (from 7.3.72.)
Miss S. B. Howes, B.Sc. (Speech)
Mrs. H. M. Ingham, L.C.S.T. (part-time) (to 31.7.72.)
Mrs. J. Johnson, L.C.S.T. (from 1.9.72.)
Mrs. E. A. Smyth, L.C.S.T. (part-time) (to 31.8.72.)
Mrs. J. Taylor, L.C.S.T. (part-time)
Mrs. E. M. White, L.C.S.T. (from 1.9.72.)

Senior Physiotherapist:

Mrs. D. J. Fayers, M.C.S.P., S.R.P.

School Health Assistants

At the end of the year 1 full-time and 9 part-time assistants were employed and the aggregate of time given to this work was equivalent to 5.7 full-time assistants.

Dental Surgery Assistants:

7 full-time and 1 part-time assistants employed.

County Health Inspector:

R. E. Law, F.A.P.H.I., M.I.P.H.E.

District Medical Officers of Health:

Boroughs and Urban Districts:

Aldeburgh	...	...	Dr. K. M. Harding
Beccles	...	...	Dr. A. C. Gee
Bungay	...	...	Dr. A. C. Gee
Eye	...	...	Dr. K. M. Harding
Felixstowe	...	...	Dr. C. H. Imrie
Halesworth	...	...	Dr. A. C. Gee
Leiston	...	...	Dr. A. C. Gee
Lowestoft	...	...	Dr. A. C. Gee
Saxmundham	...	...	Dr. D. W. Ryder Richardson
Southwold	...	...	Dr. A. C. Gee
Stowmarket	...	...	Dr. K. M. Harding
Woodbridge	...	...	Dr. K. M. Harding

Rural Districts:

Blyth	...	...	Dr. A. C. Gee
Deben	...	...	Dr. K. M. Harding
Gipping	...	...	Dr. K. M. Harding
Hartismere	...	...	Dr. K. M. Harding
Lothingland	...	...	Dr. A. C. Gee
Samford	...	...	Dr. K. M. Harding
Wainford	...	...	Dr. A. C. Gee

GENERAL STATISTICS

Area: 547,397 acres (Census, 1961).

Population 1972: 266,650 (As estimated by the Registrar-General).

Population, Census 1971: 258,148

Number of dwellings (occupied and vacant), Census 1961: 77,151

Number of private households, Census 1971: 87,820

Rateable Value: £9,529,089 (year beginning 1st April, 1972).

Estimated product of a new penny rate £92,426 (year beginning 1st April 1972).

TABLE I

Extracts from Vital Statistics for the Year

	EAST SUFFOLK			England and Wales rate
	Number	Crude rate	Adjusted rate	
Live births - legitimate ...	3,521	-	-	-
- illegitimate ...	260	-	-	-
- total ...	3,781	-	-	-
Live birth rate per 1,000 population		14.2	15.8	14.8
Illegitimate Live Births (per cent of total live births) ...		7.0	-	9.0
Still-births - legitimate ...	41	-	-	-
- illegitimate ...	-	-	-	-
- total ...	41	-	-	-
Still-birth rate per 1,000 live and still-births ...	-	11.0	-	12.0
Total live and still-births ...	3,822	-	-	-
Infant deaths (under one year) ...	63	-	-	-
Infant mortality rate per 1,000 live births ...	-	17.0	-	17.0
Infant mortality rate per 1,000 live births (Legitimate infant deaths per 1,000 legitimate live births)	-	16.0	-	17.0
Infant mortality rate per 1,000 live births (illegitimate infant deaths per 1,000 illegitimate live births)	-	27.0	-	21.0
Neo-natal (first four weeks) deaths	63	-	-	-
Neo-natal (first four weeks) mortality rate per 1,000 live births	-	11.0	-	12.0
Early Neo-natal deaths (deaths under 1 week) ...	31	-	-	-
Early Neo-natal mortality rate (deaths under 1 week per 1,000 total live births) ...	-	8.0	-	10.0
Perinatal mortality rate (still-births and deaths under 1 week combined per 1,000 total live and still-births)	-	19.0	-	22.0
Maternal deaths ...	1	-	-	-
Deaths from all causes ...	3,313	-	-	-
Death rate per 1,000 population	-	12.4	9.9	12.1

TABLE II
POPULATION, BIRTHS, DEATHS

	POPULATION		LIVEBIRTHS			STILLBIRTHS			INFANT DEATHS			ALL DEATHS		
	Census 1971	Esti- mated mid-1972	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Aldeburgh M. B.	2,791	2,670	19	13	32	1	-	1	-	-	-	22	30	52
Beccles M. B.	8,015	8,140	46	50	96	-	-	-	1	2	3	52	48	100
Bungay U. D.	3,960	4,060	30	27	57	1	-	1	-	-	-	31	44	75
Eye M. B.	1,660	1,660	12	11	23	-	-	-	-	-	-	21	48	69
Felixstowe U. D.	18,925	19,390	145	119	264	-	4	4	2	1	3	153	148	301
Halesworth U. D.	3,236	3,410	40	27	67	-	-	-	1	-	1	17	23	40
Leiston U. D.	4,877	4,970	43	42	85	1	-	1	3	1	4	36	18	54
Lowestoft M. B.	52,267	52,720	417	343	765	8	3	11	6	4	10	332	320	652
Saxmundham U. D.	1,709	1,730	18	22	40	-	2	2	-	-	-	9	12	21
Southwold M. B.	1,998	2,010	9	5	14	-	-	-	-	-	-	15	20	35
Stowmarket U. D.	8,676	8,870	62	55	117	-	1	1	1	-	-	47	42	89
Woodbridge U. D.	7,283	7,620	56	68	124	1	-	1	3	1	4	37	53	90
Total (M. B., U. D.)	115,397	117,250	897	787	1,684	12	10	22	17	9	26	772	806	1,578
Blyth R. D.	17,576	17,850	122	120	242	1	1	2	5	2	7	122	131	253
Deben R. D.	35,973	38,270	264	211	475	1	1	2	4	3	7	207	233	440
Gipping R. D.	23,850	24,740	223	208	431	4	1	5	5	3	8	144	124	268
Hartismere R. D.	15,843	15,850	108	106	214	-	-	-	1	2	3	108	99	207
Lothlingland R. D.	22,500	23,280	181	194	375	1	3	4	3	1	4	147	118	265
Samford R. D.	20,194	22,570	144	118	262	2	2	4	3	2	5	105	111	216
Wainford R. D.	6,815	6,840	50	48	98	1	1	2	1	2	3	48	38	86
Total (R. D.)	142,751	149,400	1,092	1,005	2,097	10	9	19	22	15	37	881	854	1,735
Total (County)	258,148	266,650	1,989	1,792	3,781	22	19	41	39	24	63	1,653	1,660	3,313

TABLE III

CAUSES OF DEATH IN EACH DISTRICT

CAUSE OF DEATH	URBAN DISTRICTS										RURAL DISTRICTS										Grand Total	
	Aldeburgh	Beeches	Bungay	Eye	Felixstowe	Halesworth	Leiston	Lowestoft	Saxmundham	Southwold	Stowmarket	Woodbridge	Total	Blyth	Deben	Gipping	Hartismere	Lothlingland	Samford	Wainford		Total
ALL CAUSES	52	99	75	69	30	40	54	652	21	35	89	90	1577	253	440	268	207	265	216	87	1736	3313
B.1 Cholera	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.2 Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.3 Bacillary dysentery and amoebiasis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.4 Enteritis and other diarrhoeal diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	2	2
B.5 Tuberculosis of respiratory system	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.6(1) Late effects of respiratory T.B.	-	1	-	-	-	-	-	1	-	-	-	-	2	-	-	-	-	-	-	-	-	2
B.6(2) Other tuberculosis	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	-	-	-	1
B.7 Plague	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.8 Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.9 Whooping Cough	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.10 Streptococcal sore throat and scarlet fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.11 Meningococcal infection	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.12 Acute Poliomyelitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.13 Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.14 Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1
B.15 Typhus and other rickettsioses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.16 Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
B.17 Syphilis and its sequelae	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
B.18 Other infective and parasitic diseases	-	-	-	-	1	-	-	-	-	-	-	-	1	1	2	-	-	1	-	-	2	2
B.10(1) Malignant neoplasm - buccal cavity	-	-	-	-	-	-	-	3	-	-	-	-	3	2	2	-	1	1	-	-	2	3
B.10(2) Malignant neoplasm - oesophagus	-	-	-	-	4	-	-	-	-	-	-	-	4	2	2	-	3	2	-	-	6	9
B.10(3) Malignant neoplasm - stomach	1	1	2	-	6	1	1	18	-	-	2	3	35	4	6	4	3	6	4	1	28	63
B.10(4) Malignant neoplasm - intestine	3	1	1	-	12	4	2	17	1	2	2	2	47	5	9	7	8	10	4	3	46	93
B.10(5) Malignant neoplasm - larynx	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	1	-	-	1	2
B.10(6) Malignant neoplasm - lung, bronchus	-	4	-	1	13	1	5	25	-	3	4	3	59	9	21	13	12	13	9	4	81	140
B.10(7) Malignant neoplasm - breast	2	-	-	1	6	1	-	15	2	-	2	3	32	7	9	3	4	10	5	3	41	73
B.10(8) Malignant neoplasm - uterus	-	2	-	1	-	-	-	6	-	-	-	-	9	1	3	-	2	3	1	-	10	19
B.10(9) Malignant neoplasm - prostate	-	-	-	-	3	-	-	6	-	-	-	1	10	3	5	-	2	3	-	-	13	23

	3	6	6	4	15	4	40	1	3	3	8	93	17	24	21	12	9	11	2	96	189
B.19(11) Other malignant neoplasms																					
B.20 Benign and unspecified neoplasms																					4
B.21 Diabetes mellitus	1	1	1	1	1		8			1		15	2	4	3	4	1	4	1	19	34
B.22 Avitaminoses and other nutritional deficiency																					1
B.46(1) Other endocrine etc. diseases				1	1				1		2	6	2	1							11
B.23 Anaemias												2			1	2	1	1		5	9
B.46(2) Other diseases of blood etc.																					2
B.46(3) Mental disorders												2	1	3						5	7
B.24 Meningitis																					
B.46(4) Multiple Sclerosis	1										1	3									6
B.46(5) Other diseases of nervous system etc.					2					1	1	5	3	6	3	1		1	1	3	22
B.25 Active rheumatic fever																					
B.26 Chronic rheumatic heart disease					2						2	17	1	8	1	1	1	3	2	17	34
B.27 Hypertensive disease			2		3					3	1	17	4	5	7	5	1	3	1	26	43
B.28 Ischaemic heart disease	12	26	9	8	86	12	8	159	6	9	24	392	54	116	71	56	71	59	19	446	838
B.29 Other forms of heart disease	3	10	5	3	16	3	2	29	1	2	4	79	7	13	6	9	20	5	7	67	146
B.30 Cerebro vascular disease	12	18	14	14	37	8	10	95	4	6	11	242	52	94	37	25	47	43	15	313	555
B.46(6) Other diseases of circulatory system	4	2	27	10	13	1	4	45		1	2	116	9	22	12	5	7	3	8	66	182
B.31 Influenza			1		2	1	1	7				14	1	3				2		8	22
B.32 Pneumonia	2	12		19	39	1	5	63	2	4	10	162	25	31	38	26	19	22	5	167	329
B.33(1) Bronchitis and emphysema	1	3	2		3	2		17				28	5	7	5	5	7	3	1	33	61
B.33(2) Asthma												3	2	2	1	1				6	9
B.46(7) Other diseases of respiratory system					2							4	3	2	1	1	1	1	1	10	14
B.34 Peptic ulcer		3	1		2			3	1	1		11		3	1	3	3	2	2	14	25
B.35 Appendicitis																				2	3
B.36 Intestinal obstruction and hernia																					
B.37 Cirrhosis of liver	2		1	1	2		1	2		1		9	2	3	1					8	17
B.46(8) Other diseases of digestive system												3	2		1					4	7
B.38 Nephritis and nephrosis	1		1		1	1		11			1	16	5	4	2	3		2		19	35
B.39 Hyperplasia of prostate			1				2	2				6		2						3	9
B.46(9) Other diseases of genito-urinary system					4							7		1	1	1				4	11
B.40 Abortion,	1			1				5				7	1	1	3	1	1			7	14
B.41 Other complications of pregnancy etc.																					
B.46(10) Diseases of the skin and subcutaneous tissue								1				1									1
B.46(11) Diseases of musculo-skeletal system				1			1					2	1	1						3	5
B.42 Congenital anomalies	1	1	1			1	1	5		3		13		3	3	2	1	2		11	24
B.43 Birth injury - difficult labour etc.		2			4	1		8			2	17	3	3	3		4	1		14	31
B.44 Other causes of perinatal mortality												3	2	2	3	2	1	3	2	15	18
B.45 Symptoms and ill-defined conditions												7	1							2	9
BE.47 Motor Vehicle accidents				1	5		1	5			1	15	2							2	17
BE.48 All other accidents				1	2		2	10				15	2	4	4	2	2	5	3	22	37
BE.49 Suicide and self inflicted injuries	1				3		1	9			1	16	3	7	5	1	4	5	1	26	42
BE.50 All other external causes					9			1		2	3	16	3	3	1			1	1	9	25
				1				1				2	1	1						2	4

TABLE IV
CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE

CAUSES OF DEATH	SEX	AGGREGATE OF URBAN DISTRICTS									AGGREGATE OF RURAL DISTRICTS								
		All ages	0—	1—	5—	15—	25—	45—	65—	75—	All ages	0—	1—	5—	15—	25—	45—	65—	75—
ALL CAUSES	M	772	17	5	5	12	20	165	243	304	881	22	2	2	11	26	187	271	360
B.1	F	805	9	2	1	3	12	99	139	540	855	15	3	3	2	18	112	194	508
B.2	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.2	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.3	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.3	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.4	M	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—
B.4	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.5	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.5	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.6(1)	M	2	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—
B.6(2)	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.7	M	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
B.7	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.8	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.8	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.9	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.9	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.10	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.10	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.10	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.10	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.11	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.11	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.12	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.12	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.13	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.13	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.14	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.14	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE IV Continued

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE

CAUSES OF DEATH	SEX	AGGREGATE OF URBAN DISTRICTS										AGGREGATE OF RURAL DISTRICTS									
		All ages	0-1	5-14	15-24	25-44	45-64	65-74	All ages	0-1	5-14	15-24	25-44	45-64	65-74						
B.46(2) Other diseases of blood etc.	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
B.46(3) Mental disorders ...	M	1	-	-	-	-	-	-	-	-	-	-	-	-	-						
	F	1	-	-	-	-	-	-	-	-	-	-	-	-	-						
B.24 Meningitis ...	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
B.46(4) Multiple Sclerosis ...	M	2	-	-	-	2	-	-	-	-	-	-	-	-	-						
	F	1	-	-	-	1	-	-	-	-	-	-	-	-	-						
B.46(5) Other diseases of nervous system etc.	M	3	-	-	-	-	-	3	-	-	-	-	-	-	-						
	F	2	-	-	-	-	1	1	-	-	-	-	-	-	-						
B.25 Active rheumatic fever ...	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
B.26 Chronic rheumatic heart disease	M	7	-	-	-	3	2	3	-	-	-	-	-	-	-						
	F	10	-	-	-	2	3	5	-	-	-	-	-	-	-						
B.27 Hypertensive disease ...	M	14	-	-	2	1	8	5	-	-	-	-	-	-	-						
	F	3	-	-	-	4	5	6	-	-	-	-	-	-	-						
B.28 Ischaemic heart disease ...	M	223	-	-	4	57	96	87	262	-	-	-	-	-	-						
	F	169	-	-	2	10	46	124	184	-	-	-	-	-	-						
B.29 Other forms of heart disease	M	33	-	-	-	4	2	21	25	-	-	-	-	-	-						
	F	46	-	-	2	1	3	38	42	-	-	-	-	-	-						
B.30 Cerebro vascular disease	M	88	-	-	-	14	33	74	123	-	-	-	-	-	-						
	F	154	-	-	2	12	28	136	190	-	-	-	-	-	-						
B.46(6) Other diseases of circulatory system	M	43	-	-	-	11	12	15	29	-	-	-	-	-	-						
	F	73	-	-	-	2	6	27	37	-	-	-	-	-	-						
B.31 Influenza ...	M	8	-	-	-	4	1	1	2	-	-	-	-	-	-						
	F	6	-	-	-	3	2	2	6	-	-	-	-	-	-						
B.32 Pneumonia ...	M	79	-	-	-	5	17	56	81	-	-	-	-	-	-						
	F	83	1	-	2	3	16	66	86	1	-	1	2	3	2						
B.33(1) Bronchitis and emphysema	M	25	-	-	-	5	12	13	28	-	-	-	-	-	-						
	F	3	-	-	-	-	2	3	5	-	-	-	-	-	-						
B.33(2) Asthma ...	M	2	-	-	-	1	-	-	-	-	-	-	-	-	-						
	F	1	-	-	-	1	-	-	-	-	-	-	-	-	-						

[illegible]

NATIONAL HEALTH SERVICE ACT, 1946

SECTION 21 -- HEALTH CENTRES

Last year I reported that the Authority's first purpose built Health Centre was under construction at Stowmarket and the building came into operation in September 1972. It provides surgery accommodation for six general practitioners, Regional Hospital Board clinics and Local Authority nursing staff office and clinic services. In addition office accommodation is provided for the Area Social Services Officers. The opening of the Centre appears to have stimulated interest in other parts of the County.

SECTION 22 -- CARE OF MOTHERS AND YOUNG CHILDREN

TABLE V
CHILD HEALTH CLINICS

Twice Weekly	Weekly	Twice Monthly
Lowestoft (i) Lowestoft (ii)	Beccles Bradwell Bungay Felixstowe (i) do (ii) Kesgrave Leiston Lowestoft (iii) do (iv) Stowmarket Woodbridge	Aldeburgh Bramford Brantham Claydon Felixstowe (iii) Framlingham Halesworth Kessingland Saxmundham Shotley (i) Southwold Wickham Market Yoxford

Monthly	
Blundeston	Kirton
Carlton Colville	Needham Market
Chelmondiston	Newbourne
Debenham	Otley
Earl Soham	Peasenhall
East Bergholt	Shotley (i)
Eye	Somersham
Gislingham	Stowupland
Grundisburgh	Trimley
Holbrook	Wattisham
Hollesley	

Summary of Attendances for 1972

Centres provided	Sessions per month	No. of Children attending during year	Total number of attendances made
47	110	5,534	28,896

Ante-Natal Clinics:

General practitioners in many districts hold ante-natal sessions for their own patients either in clinic premises or in their own surgeries and in some of these districts the Council's midwife also attends.

Mothercraft and Relaxation Classes:

Regular mothercraft and relaxation classes were held in the main urban centres and they proved popular with a number of the mothers. Altogether 551 expectant mothers, of whom 492 were booked for hospital confinement, attended the sessions and made a total of 3,160 attendances.

Care of Premature Infants:

177 premature live births were notified in the year. 168 were born in hospital. Of these, 149 survived beyond 28 days. 9 were born at home

Dental Care:

TABLE VI

Dental Treatment (Mothers and Infants)

Number provided with dental care	Examined	Number commenced treatment during year	Made dentally fit
Expectant/Nursing Mothers	6	6	6
Children under 5	256	147	127

Dental Treatment given	Extractions	General Anaesthetics	Fillings	Scalings or gum treatment	Teeth otherwise conserved	X-rays	Dentures provided	
							Complete	Partial
Expectant/ Nursing Mothers	-	-	16	4	-	-	-	2
Children Under 5	76	31	280	13	54	1	-	-

Welfare Foods:

There were at the end of the year 51 places throughout the County where welfare foods could be obtained.

In nearly all of these voluntary helpers were responsible for the distribution of the foods, and acknowledgement is made of the valuable assistance given to the County Council in this respect and for the willing co-operation of the people concerned.

The quantity of the various items issued was as follows (with 1971) figures given in brackets for comparison):-

National Dried Milk (packets)	...	4,813	(3,521)
Orange Juice (bottles)	...	5,417	(45,753)
Cod Liver Oil (bottles)	...	67	(686)
Vitamin A & D (packets)	...	956	(2,008)
Vitamin Drops	...	8,865	(5,771)
Vitamin C Tablets	...	260	(-)
Vitamin A, D, C. Tablets	...	835	(-)

SECTION 23 -- MIDWIFERY:

During the year the Council's midwives attended 662 mothers at their confinement.

Medical aid under the Midwives' Act was summoned in 69 cases.

Gas/air and Trilene analgesia was administered at 524 domiciliary confinements and Pethilorfan was given to 475 patients by midwives.

SECTION 24 -- HEALTH VISITING:

TABLE VII

Summary of visits made

(excluding School Health Service visits)

	1st Visit in year	Total Visits
Children born in 1972	3,933	17,613
Other children under 5	13,108	35,255
Tuberculosis households	227	715
Other visits	2,508	6,346

SECTION 25 -- HOME NURSING:

TABLE VIII

Summary of visits made

Place where treatment first took place	Total No. of Cases
Patients home	6,039
Health Centres and G.P. premises	1,000
Hospitals and Residential Homes	60
Elsewhere	443
Total	7,542
Of these -- No. under 5	179
No. aged 65 or over	5,026

SECTION 26 -- VACCINATION AND IMMUNISATION:

TABLE IX

Year of birth	1972	1971	1970	1969	1965-68	Others under age 16	Total
<u>Pertussis Vaccination:</u>							
Completed full primary course	177	2,266	578	50	73	15	3,159
Received reinforcing injection	2	21	80	19	453	6	581
<u>Tetanus Vaccination:</u>							
Completed full primary course	178	2,282	584	51	177	330	3,602
Received reinforcing injection	2	26	85	25	2,740	1,726	4,604
<u>Poliomyelitis Vaccination:</u>							
Completed full primary course	137	2,320	648	54	140	158	3,457
Received reinforcing dose	3	29	83	10	2,724	1,282	4,131
<u>Diphtheria Immunisation:</u>							
Completed full primary course	177	2,281	582	50	161	37	3,288
Received reinforcing injection	2	25	84	23	2,681	402	3,217
<u>Measles Vaccination:</u>							
Primary	8	536	438	119	225	28	1,354

SECTION 27 -- AMBULANCE SERVICE:

TABLE X

	Total Miles	No. of Journeys	No. of Patients Carried
Whole-time ambulances	415,399	11,444	28,597
Hospital Car Service:			
Voluntary ...	996,513	22,375	70,715
Sitting case vehicles:			
Whole-time	28,297	843	2,056

SECTION 28 -- PREVENTION OF ILLNESS, CARE AND AFTER CARE:

TABLE XI

Tuberculosis Register, 1972

	Pulmonary	Non- pulmonary
Patients on Register at 1.1.72.	419	83
New (Primary) Notifications during 1972	17	1
Inward transfers and restored to register in 1972	6	1
	<hr/> 442	<hr/> 85

Taken off register in 1972

	Pulmonary	Non- pulmonary
Non-tuberculous	-	-
Died	4	1
Recovered	35	8
Removed or lost sight of	1	-
	<hr/> 40	<hr/> 9
	40	9
Patients remaining on register at 31.12.72.	<hr/> 402	<hr/> 76

This table is a summary of the registers held by the District Medical Officers of Health.

Chiropody Services:

The Council's arrangements for chiropody treatment for old people continues to be given through an agency agreement with the East Suffolk Old People's Welfare Association. Treatments are given by appointment at sessions arranged in conjunction with old people's clubs or at clinics or in the chiropodists's own surgery but where this is not possible arrangements can be made for the chiropodist to pay a visit to the patient's home. Altogether through this service 31,736 treatments were given to 6,591 old people.

Chiropody treatment for the other priority classes, the expectant mother or the younger physically handicapped person, are dealt with directly by the Department but the demand is small and 42 patients were treated.

In addition 2,135 treatments were given to 521 persons in local authority Old Peoples Homes.

ENVIRONMENTAL HEALTH SERVICES

Housing

The duty of the County Council, under the Housing Act 1957 is to have constant regard to housing conditions in rural districts, to consider the extent to which unsatisfactory conditions exist and the sufficiency of the steps taken by the District Councils to remedy such conditions. To enable the County Council to carry out this duty and assist me in connection with sanitary circumstances, the District Councils have provided information, much of what is used in this report. I would like to acknowledge the ready co-operation of the Councils and their officers in this respect.

Summaries of the housing activities of the District Councils in the County are given in Tables XII and XIII.

Inspection of Meat for Human Consumption

Details are given in Table XIV of slaughtering and meat inspection carried out in 1972. The service is mainly carried out by the Public Health Inspectors of the County District Councils. There are 18 licenced slaughterhouses in the County.

Food and Drugs -- Sampling for Chemical Analysis

The County Council are the Food and Drugs Authority for the whole of the Administrative County, with the exception of the Borough of Lowestoft. Responsibility for sampling food and drugs, other than milk, lies with the Council's Chief Inspector of Weights and Measures.

Details in this part of the report are in respect of milk.

Milk and Dairies

The principles of Milk Legislation are to ensure that milk used for human consumption is:

1. Safe, and contains no pathogenic organisms or harmful substances
2. Clean, and has a satisfactory keeping quality
3. Of satisfactory food value and not adulterated

Appropriate legislation is contained in The Food and Drugs Act 1955, The Milk (Special Designation) Regulations 1963/65, The Milk and Dairies (General) Regulations 1957 and The Sale of Milk Regulations 1939.

During 1972, 214 samples were taken for chemical analysis, 135 for full biological examination, 267 for examination by the Milk Ring Test for brucellosis and for the presence of antibiotics and 746 statutory samples of designated milk for keeping quality and/or efficiency of heat treatment.

TABLE XII
SUMMARY OF HOUSING ACTIVITIES IN BOROUGHES AND URBAN DISTRICTS

	Aldeburgh M. B.	Beccles M. B.	Bungay U. D.	Eye M. B.	Felixstowe U. D.	Halesworth U. D.	Leiston U. D.	Lowestoft M. B.	Saxmundham U. D.	Southwold M. B.	Stowmarket U. D.	Woodbridge U. D.
1. No. of houses inspected ...	*	431	42	12	139	41	*	850	*	180	-	114
2. No. found to be unsatisfactory ...	*	127	34	1	48	12	*	113	*	15	41	58
3. No. rendered fit by:-												
(a) Informal action ...	*	37	30	-	38	12	*	41	*	12	6	24
(b) Action under Public Health Act ...	*	6	-	-	6	-	*	8	*	-	-	5
(c) Action under Housing Act ...	*	-	-	-	-	2	*	11	*	-	-	-
4. No. of Demolition Orders secured	*	-	-	-	2	-	*	2	*	-	1	-
5. No. of dwellings included in clearance Orders secured ...	*	-	-	-	-	-	*	19	*	-	10	-
6. No. of dwellings demolished under Demolition Orders ...	*	4	-	-	3	-	*	3	*	-	1	-
7. No. of dwellings demolished under Clearance Orders ...	*	-	-	-	-	-	*	-	*	-	8	-
8. No. of dwellings demolished by informal action ...	*	-	5	-	-	-	*	-	*	-	2	-
9. No. of dwellings in respect of which closing orders were made ...	*	2	-	-	-	-	*	9	*	2	3	1
10. No. of dwellings improved by Improvement Grants:-												
(a) Discretionary ...	*	69	16	2	3	7	*	274	*	16	6	7
(b) Standard ...	*	6	6	7	20	7	*	27	*	4	11	11
11. No. of new houses erected:-												
(a) by Local Council ...	*	-	29	-	41	22	*	120	*	-	24	-
(b) by Private Enterprise ...	*	90	27	11	39	23	*	174	*	2	42	70
12. No. of Improvement Areas declared	*	-	-	-	-	-	*	-	*	-	-	-
13. No. of improvable dwellings in Improvement Areas declared ...	*	-	-	-	-	-	*	-	*	-	-	-

* Figures not available

TABLE XIII
SUMMARY OF HOUSING ACTIVITIES IN RURAL DISTRICTS

	Blyth	Deben	Gipping	Hartismere	Lothingland	Samford	Wainford
1. No. of houses inspected	*	2,367	*	36	211	151	210
2. No. found unsatisfactory	*	280	*	14		143	109
3. No. rendered fit by:-							
(a) Informal Action	*	-	*	5	26	6	65
(b) Action under Public Health Act	*	6	*	-	1	-	1
(c) Action under Housing Act	*	-	*	-	-	-	-
4. No. of Demolition Orders secured	*	4	*	7	13	15	1
5. No. of dwellings included in Clearance Orders secured	*	-	*	-	-	-	-
6. No. of dwellings demolished under Demolition Orders	*	13	*	1	7	1	2
7. No. of dwellings demolished under Clearance Orders	*	-	*	-	-	-	-
8. No. of dwellings demolished by Informal Action	*	-	*	-	-	-	-
9. No. of dwellings in respect of which Closing Orders were made	*	11	*	1	-	11	5
10. No. of dwellings improved by Improvement Grants:-							
(a) Discretionary	*	74	*	46	70	47	13
(b) Standard	*	51	*	48	16	38	15
11. No. of new houses erected:-							
(a) By Local Council	*	34	*	39	57	10	-
(b) By Private Enterprise	*	158	*	81	236	236	90
12. Total number of permanent houses or flats owned by the Council, 31.12.	*	1,730	*	-	1,033	829	470
13. No. of improvement areas declared	*	-	*	-	-	-	-
14. No. of improvable dwellings in improvement areas declared	*	-	*	-	-	-	-

*Figures not available

TABLE XIV
SLAUGHTERHOUSES AND MEAT INSPECTION

DISTRICT	No. of Licensed Slaughterhouses	CATTLE (including calves)						SHEEP						PIGS			
		No. inspected	Whole carcasses condemned		Carcasses, of which some part or organ was condemned		No. inspected	Whole carcasses condemned		Carcasses, of which some part or organ was condemned		No. inspected	Whole carcasses condemned		Carcasses, of which some part or organ was condemned		No. inspected
			Tuber- culosis	Other Causes	Tuber- culosis	Other Causes		Tuber- culosis	Other Causes	Tuber- culosis	Other Causes		Tuber- culosis	Other Causes	Tuber- culosis	Other Causes	
Aldeburgh M. B.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Beccles M. B.	...	11,478	-	40	1	2,451	190	-	-	-	-	47,701	-	157	12	1,974	-
Bungay U. D.	...	91	-	-	-	-	23	-	-	-	-	599	-	-	-	7	-
Eye M. B.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Felixstowe U. D.	...	6	-	-	-	-	-	-	-	-	-	22	-	-	-	-	-
Halesworth U. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leiston U. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Lowestoft M. B.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Saxmundham U. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Southwold M. B.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Stowmarket U. D.	...	62	-	-	-	10	120	-	-	-	-	-	-	-	-	-	-
Woodbridge U. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Blyth R. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Deben R. D.	...	196	-	-	-	23	38	-	-	-	-	368	-	-	-	1	-
Gipping R. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Hartismere R. D.	...	116	-	-	-	9	-	-	-	-	-	-	-	-	-	-	-
Lothlingland R. D.	...	1,328	-	4	-	217	303	-	-	-	-	4,006	-	3	97	323	-
Samford R. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Wainford R. D.	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

*Figures not available

Biological Examination and Testing for Antibiotics

Milk sold for human consumption or manufacture into milk products without heat treatment is regularly checked by biological examination. Samples are tested for the presence of tuberculosis and brucella organisms and, more frequently, screened for brucella by the Milk Ring Test and examined for the presence of antibiotics.

During 1972, 402 samples were taken of which only 135 were submitted for full biological tests. Six were found positive for Milk Ring Tests and no samples were found to contain antibiotics.

The samples which proved positive for Milk Ring Tests were from herds where the milk was already subjected to heat treatment before consumption. The Producers concerned were notified.

Sampling for Chemical Analysis

Total Number of Samples taken	214
Number unsatisfactory by reason of:	
1. Fat content deficiency	0
2. Solids-not-fat deficiency	2
3. Containing added water	0

Samples reported as unsatisfactory are those where the fat or non-fatty-solids were below the "presumptive" standards of the "Sale of Milk Regulations" or the fat content standard of the "Milk and Dairies (Channel Islands and South Devon Milk) Regulations. Whether or not the deficiencies are due to natural causes is established either by samples taken at supervised milkings or by the Hortvet (Freezing Point) Test.

Samples which were unsatisfactory by reason of low solids-not-fat content were deficient to the extent of 2.35% and 2.86%. In both cases it was established by the Hortvet (Freezing Point) Test that the deficiencies were not due to the presence of added water. The Producer was notified in each instance.

Specially Designated Milk

Under the Milk (Special Designations) Regulations, licences to use the Special Designations "Untreated", "Pasteurised", "Sterilized" and "Ultra Heat Treated" in relation to milk sold by Dealers (other than Producers) in the County are issued by the County Council as Food and Drugs Authority.

Licensing

During the year one of the dairies formerly licenced to pasteurised milk ceased to do so. Of the four plants now licenced, three are H. T. S. T. and one is a "Holder" type pasteuriser.

The following Table shows the licences in force in the County on 31st December 1972.

TABLE XV
MILK LICENCES

Type of Licence	Number in Force 31.12.72.
Dealer's (Pasteuriser's)	4
Dealer's (Untreated)	8
Dealer's (Pre-packed)	188

Sampling

During 1972 a total of 746 samples were taken for the purposes of statutory testing under the Regulations. It will be seen from the table below, that of these, 30 proved unsatisfactory. Failure of a sample to satisfy the prescribed statutory test is investigated thoroughly.

TABLE XVI
MILK SAMPLES

Designation	Test	Nature of Samples	
		Passed	Failed
Pasteurised	Phosphatase	678	8
	Methylene Blue	664	22
Untreated	Methylene Blue	10	0
Sterilized	Turbidity	30	0
U. H. T.	Colony Count	20	0

Phosphatase Test Failures

The 8 samples which failed to satisfy the Phosphatase Test for efficiency of pasteurisation were heat treated and bottled at four different dairies. Three were dairies licenced by this authority and one was situated in the area of a neighbouring authority.

Methylene Blue Test Failures

The 22 samples which failed to satisfy the Methylene Blue Test for keeping quality were taken from retailers in the county during July and August. As a result of investigations into the cause of the failures advice was given on stock rotation and storage conditions.

Water Supplies

The supply situation, in the southern part of the County, remains acute and is likely to continue so until the Tattingstone Reservoir is brought into service. Preliminary work on this project has been commenced and it is expected that tenders will be invited later in 1973.

Sewerage and Sewage Disposal

Local Authorities continue to attach importance to this part of their duties; although their programmes are affected by a degree of financial control, a number of new schemes have been commenced. The forthcoming reorganisation of local government is making its impact inasmuch as many of the Districts are anxious to commence schemes of sewerage and sewage disposal before they become amalgamated into new Authorities.

During the year, schemes were completed at Levington, Purdis Farm, Stowupland, Creeting St. Mary, Brome and Oakley, Camps Heath (Oulton) and Mettingham.

Work is currently in hand at Blythburgh; Wenhaston and Bramfield; Friston, Snape, Benhall and Sternfield; Easton; Tuddenham, Witnesham and Swilland; Charsfield; Bredfield; Campsea Ashe; Battisford and Combs; Mendham and Withersdale Street; Bedfield and Worlingworth; Wetheringsett; Corton; Burgh Castle; Sproughton; Stutton; East Bergholt; and Redisham.

Schemes are in various stages of preparation in respect of a further 39 parishes.

GENERAL

TABLE XVII

Notification of Infectious Diseases

Infectious Disease	Number of cases notified
Anthrax	-
Scarlet Fever	65
Whooping Cough	11
Poliomyelitis -- paralytic	-
Poliomyelitis -- non-paralytic	-
Measles	605
Diphtheria	-
Yellow Fever	-
Dysentery	1
Smallpox	-
Encephalitis -- infective and post infective	-
Enteric or typhoid fever	1
Paratyphoid fever	-
Tuberculosis (Respiratory)	12
Meningococcal infection	-
Food poisoning	16
Puerperal pyrexia	-
Ophthalmia neonatorum	-
Infective hepatitis	-
Tetanus	-
Leptospirosis	-

Registration of Nursing Homes

One new Nursing Home was registered during the year and one closed down leaving a total of 5 on the register at 31st December.

Name	Number of beds available Medical/Surgical
Orme House, Lowestoft	15
The Old Rectory, Barham	15
Raydon House, Raydon	14
Mill Lane Nursing Home, Felixstowe	15
The Lodge, Rushmere St. Andrew	20
	<hr/> 79 <hr/>

SCHOOL HEALTH

MAINTAINED SCHOOLS

		Number	<u>Pupils on Roll</u>
Nursery Classes ... ..	...	9	356
Primary Schools ... ..	...	157	22,420
Secondary Modern ... ..	...	18	6,168
Secondary Grammar ... ..	...	3	919
Comprehensive ... ..	...	14	8,766
Special (E. S. N.) ... ..	...	3	264
		<hr/>	<hr/>
		204	38,903
		<hr/>	<hr/>

SCHOOL CLINICS

(a) County Area:	<u>Address</u>	<u>Services Provided by</u>	
		<u>Local Authority</u>	<u>Regional Hospital Board</u>
Beccles	Crowfoot School	Dental Speech Therapy	
Felixstowe	Causton School	Dental	
Felixstowe	Trinity Methodist Church Hall	Speech Therapy	
Ipswich	Central Clinic, Rope Walk	Dental (Orthodontic) by appointment only Audiology	
Leiston	The County Health Clinic "Daneway" Hayling Road	Dental	
Saxmundham	The County Health Clinic		Chest Clinic Child Psychiatry Ophthalmic
Stowmarket	Health Centre Violet Hill Road	Dental Speech Therapy	Chest Clinic Ophthalmic
Woodbridge	County Buildings, Cumberland Street	Speech Therapy	

(b) Lowestoft Excepted District:

<u>Address</u>	<u>Services Provided by</u>	
	<u>Local Authority</u>	<u>Regional Hospital Board</u>
Clapham Road	Dental Minor ailments Speech Therapy	
Kirkley Clinic, Southwell Road	Dental Speech Therapy	
"Penrhyn" Regent Road		Chest Clinic Child Psychiatry Ophthalmic

Medical Inspection

There was a decrease of approximately 1,100 pupils medically inspected within the periodic groups during the year. This is accounted for almost entirely by fewer school leavers in the school year 1972/73 due to the school leaving age being raised, and the majority of leavers are examined during the Autumn Term.

There has been, however, a marked increase in the number of special and re-inspections.

This year the Department of Education and Science have not called for a return of the analysis of defects found at routine medical inspections and it will be for the Department of Health and Social Services to decide on what type of statistical information they will require for the School Health Service after 1st April, 1974, when it moves over to the new Area Health Authority.

HANDICAPPED PUPILS

CATEGORY	Attending Special Schools, Units, Hostels Hospitals, etc.		Recommended for Special School but provisionally placed		Attending Ordinary School	Total
	Day	Boarding	Ordinary School	At Home		
BLIND	-	3	-	-	-	3
PARTIALLY SIGHTED	-	8	2	-	2	12
DEAF	10	11	1	-	-	22
PARTIALLY HEARING	16	5	1	-	1	23
PHYSICALLY HANDICAPPED	21	10	2	-	5	38
DELICATE	1	9	1	2	3	16
MALADJUSTED	-	41	4	1	11	57
E.S.N.	143	119	2	-	33	297
EPILEPTIC	-	4	-	-	5	9
SPEECH DEFECT	-	-	-	-	-	-
TOTAL	191	210	13	3	60	477

SERVICE FOR HEARING IMPAIRED

For the purposes of this service the County is divided into three areas each covered by a Teacher of the Deaf. The teachers work independently but in close liaison with one another. The scope of the work covers the educational needs of hearing impaired children from the pre-school child to the school leaver. A lipreading class in Further Education at Lowestoft being an example where liaison extends beyond school age.

As in previous years the work can be divided as follows:

- (a) advice and guidance to parents of pre-school age children;
- (b) supervision of school-age children. This includes advice to teachers, individual teaching; and counselling on management including the use of hearing aids. Contact with parents is maintained; and close co-operation with school staffs is followed. To mitigate the problem of heavy commitments, the Northern area teacher has involved colleagues in ordinary schools to a larger extent than previously by working through them to the children. There seems to be evidence to show that this approach has been more successful than expected.

The steady increase in opportunities for a multi-disciplinary approach and the comprehensive nature of provision for the treatment of hearing impaired children is felt to be a most welcome development. Involvement in the hospital organised Deaf Children's Clinic with the Medical Officer at Lowestoft, and clinics for the Mentally Handicapped at Lothingland are examples.

- (c) Involvement in the placement of hearing impaired children in nursery classes, and those requiring special educational facilities in school or Partially Hearing Units. The teachers give specialist advice when these units are being established in areas; and liaise thereafter.

- (d) initial assessment for educational implications of cases referred to the service; and reviews of cases previously referred.

SCHOOL PSYCHOLOGICAL SERVICE

Miss J. Honey, Senior Educational Psychologist, reports as follows:-

"Staffing

Since our last report we have been joined by Mr. P.J. Downer who took up his appointment at the end of the school year in June 1972 thus bringing the number of educational psychologists to three serving a school population of approximately 39,000. Mr. Downer serves mainly Lowestoft and the Northern part of the county, while Mr. Thacker continues to work mainly in the Stowmarket and mid-county areas.

The greater part of our day to day work continues to be with individual children and at the end of the school year (August 1972) the estimated number of children known to the School Psychological Service and who were under regular review was, as in the previous year, over 900. This number includes only a proportion of all those known to the seven Advisory Teachers and to the three Advisory Teachers of the Deaf.

In spite of staffing difficulties during 1971/72, it was gratifying to note that there was a substantial increase over the previous year's figures of over 100 new cases who had been given full educational and psychological assessments. On the other hand there was an even longer list (254) of new referrals than we had had at the same time the previous year.

Figures for period August 31st 1971 to September 1st 1972

New or review cases who have been given full educational and psychological assessments and parental interviews in school, office and home 523

Follow-up assessments and interviews 133

In addition we have continued to participate in Dr. O'Callaghan's weekly Child Guidance Clinic at Lowestoft where the approximate number of children treated during 1971/72 was 228

Waiting list of known new cases referred to School Psychological Service or urgent follow-up review cases 254

Comments

The growing numbers of children referred directly to us by general practitioners and parents appears to have continued as have those referred from the pre-school and secondary sectors. However, the great majority of referrals still appear to come from head teachers of infant and primary schools. Our preparatory work on screening "at risk" children has continued and this year Mr. Saville, General Schools' Adviser, has collaborated with the School Psychological Service in producing a preliminary pre-school profile to be completed on all children before their admittance to reception classes. Meetings with representatives from the School Psychological, Medical and Social Services have been chaired by Miss Fitzjohn, Assistant Education Officer for Primary Education. The scheme will be tried out in Halesworth which will serve as a pilot area for the authority.

Special Education

Apart from our day to day work with Ashley Downs Special School (E.S.N.) and the 21 day special classes at primary and middle schools, we look forward to working with children in a new unit for partially hearing children opening Claydon County Primary School at Easter 1972. Plans for the new special school at Stowmarket for children suffering from a variety of handicaps (mostly maladjustment) are well under and it is expected to open during 1974/75. Furthermore two extra classrooms will be provided early in the summer term 1973 on the site of Northfield Infant School, Lowestoft, to be used as an

annexe of Warren Special E.S.N.(S) School, pending its replacement by a new purpose built school at Clarke's Lane, Lowestoft, in 1975. It is also hoped to provide a teacher for the E.S.N.(S) children at Lothingland Hospital. The county's team of seven Advisory Teachers have continued to assess and help individual children with learning difficulties and have been active in running courses on the teaching of reading.

As in previous years a substantial proportion of our time has been devoted to in-service training. Typical examples of talks given by members of the School Psychological Services have been "Language Assessment", "Behaviour Modification", "Dyslexia, Fact or Fiction?".

Visits have been made to independent and out-county special schools and we have continued to represent the Service at local and out-county discussions, case conferences, meetings and national conferences of relevant professional bodies."

CHILD GUIDANCE

The Consultant Psychiatrists, Dr. J.G. Howells and Dr. J.M. O'Callaghan, have again been good enough to submit the statistical summary shown below and I am grateful to them for all the valuable work they have put in during the year in respect of children attending the Committee's schools.

	1971	1972
Children) aged 0 - 5 years	22	15
newly referred) 5 - 15 years	158	128
Clinic interviews for the year	1,046	988
School visits	83	84
Home visits	288	274
Number of children attending on 1st January, 1972	199	260
Number of children attending on 31st December, 1972	266	193
Total number of children treated during year	343	306

CLEANLINESS

	Number of Visits		Number of Examinations	Number of children found Verminous	
	School	Home		New cases	Repeat cases
1968	25	33	3,226	33	9
1969	41	49	5,024	75	17
1970	47	51	3,241	49	11
1971	46	74	7,441	88	10
1972	5	76	6,032	108	10

PHYSIOTHERAPY

Mrs. D. J. Fayers, Senior Physiotherapist, reports -

During this year the case load has remained relatively constant. There have been 20 new referrals. However, distribution of cases is so wide sparse over the whole county extending from East Bergholt up to Hopton-on-Sea in the North. This means that a great deal of time is spent in travelling and at present there is still not enough continuity of treatment to maintain progress which at best is very gradual.

There are approximately 80 severely handicapped children receiving physiotherapy and advice. Two thirds of these receive treatment on a regular basis and the remainder are kept under observation and are reviewed on a six monthly basis, aids being issued where appropriate.

Work is divided into three main fields:-

1. Pre-school children with physical handicaps.
2. Physically handicapped children attending special classes in ordinary schools and those attending special day and residential schools.
3. Advice to parents, teachers, play groups, assessment with a view to aids in the home and surgical appliances, etc.

The physical handicaps can be sub-divided into the following:-

- | | |
|---|--|
| (a) Cerebral Palsy | (i) Spastic - monoplegia, diplegia, quadriplegia. |
| | (ii) Athetoid - often of normal or above average I. Q. |
| | (iii) Ataxic. |
| (b) Spina bifida often associated with hydrocephalus. | |
| (c) Post Meningitis. | |
| (d) Congenital malformations. | |
| (e) Muscular Dystrophy. | |
| (f) Minimal brain damage - children having perceptual and co-ordination defects. | |
| (g) Postural Defects and acute medical and orthopaedic conditions in the normal child - scoliosis, flat feet, chest conditions. | |

The Pre-school group falling into categories a, b, c, d, is the largest group and presents the greatest problems. The parents are often young and inexperienced, bringing up their first child, and they are in need of a great deal of advice and help in managing their handicaps.

They are often isolated in the outlying areas and they need to be trained as full time therapist to their child and the mother is encouraged to set aside a specific time each day to stimulate her child. This is often difficult when there are younger or older children also needing attention.

The progress of the cerebral palsied child is often very slow and gradual and the parents need a great deal of encouragement and reassurance at the same time adopting a realistic attitude for the future which brings even greater problems and frustrations with it.

Progress of some of the Spina Bifida children which is often very rewarding has been seriously hampered by considerable delays in the manufacture of new calipers. One particular child has been without calipers for six months. When it is time for a first fitting the child has already outgrown them and almost a year's progress lost. This delay is due to shortage of staff in the craft of surgical appliances. I do not quite know the answer to this problem but it certainly cannot continue.

Cases seen — 1972

Referrals	20
Under observation	38
Treatments	648

SCHOOL DENTAL SERVICE

The Principal School Dental Officer, Mr. C. D. Macpherson, L.D.S., R.C.S., reports as follows:-

A Dental Clinic with two surgeries was incorporated in the Stowmarket Health Centre which was opened in September. A new unit, aspirator and dental chair were fitted in the main surgery, and the equipment was transferred from the former Stowmarket Clinic to equip the second surgery meantime. In future it is hoped that a part-time auxiliary may be employed in this clinic to assist the Dental Officer so that greater provision may be made for treatment of children under school age.

Plans have been prepared by the County Architect for a new dental clinic to be built on the border of the sports field between the Causton School and the Middle School in Maidstone Road, Felixstowe. A mobile surgery has been ordered for this area too, and it is anticipated that these improved facilities will aid the recruitment of a Dental Officer here and so fill a long-standing vacancy.

A new X-ray machine, an apparatus for daylight development of X-ray films, and an aspirator have been installed in the Southwell Road Clinic, Lowestoft. A mobile surgery has been placed in the grounds of Ashley Downs School, Lowestoft, for the use of the Dental Officer who provides treatment for the children there. In this way treatment time and disruption of school routine have been reduced bringing advantage to officer, pupils treated, and to the staff of the school.

Owing to the raising of the school leaving age, the figures in the column headed "Ages 15 and Over" in TABLE XX may be expected to increase in the future. Also, if provision will be required for routine inspection and treatment of children in the nursery schools then there will be a large increase in the visits and items of treatment in the Under 5 Ages too. Therefore, in any future review of the dental establishment these two factors causing extension of dental cover must be taken into account.

Dental Health Education has been continued by means of talks and demonstrations in the schools and clinics. Models and materials have been made available for the teaching of oral hygiene. Poster displays have been initiated and leaflets have been distributed to pupils in the schools.

In conclusion, I wish to thank the Hospital Consultant Dental Surgeons and the Hospital Consultant Orthodontist for their continuing help to our officers by treatment and advice for the patients who are referred to them.

SPEECH THERAPY

Miss J.M. Lawrence, L.C.S.T., Senior Speech Therapist, reports:-

"By the end of this year we once again had our full complement of staff. Mrs. H. Blackshaw was appointed in April to work part-time in Felixstowe and Trimley St. Mary. In May Miss K. Blacklock was appointed full-time to the Stowmarket area, and on 1st September a further 2 full-time therapists (Mrs. E. White and Mrs. J. Johnson) completed our total allocation for the County, which consists of 1 senior therapist, 4 full-time, and 3 part-time therapists equalling 1.5 full-time therapists. With the appointment of full-time staff we very regretfully had to lose the valuable part-time help of Mrs. Smyth, who has worked for East Suffolk for so many years.

Although our establishment of staff is complete, I consider it insufficient for the provision of a full service for this County. Each therapist is seriously handicapped by a case load already excessive and likely to increase, and is therefore not able to include in her therapy sufficient work with language deprived children in schools or work with many pre-school children experiencing delay and difficulties in the acquisition of speech. Only a few seriously handicapped children who happen to be accessible can receive therapy once a week, the remainder receive therapy once a fortnight and at the end of the year there were 96 school children and 27 pre-school children awaiting therapy. Also, 7 school children and 9 pre-school children awaiting assessment. Therapists serving Ashley Downs School and Belstead School for the educationally subnormal have only four days a week to meet the needs of all other schools in their area, numbering from 19 to 34. Each therapist has a number of schools which the lack of time prevents her from visiting regularly. Therapists are also precluded to a major extent from participating in consultations with staff and parents, a most valuable and necessary aspect of our function in a therapeutic team.

The Quirk Report on the Speech Therapy Services was published at the end of 1972. It is comprehensive, covering not only the development in research, the training of therapists and the working of the service, but highlighting some of the difficulties of application and making useful recommendations for the future, and as we plan for the re-organised Health Services in 1974 it is with new hope that we look forward to the implementation of some of these recommendations, so that we may better fulfil our true potential in the Speech Therapy Service."

As a footnote to Miss Lawrence's report, I would like to add my own tribute to the work of Mrs. Smyth who has given such good service to the County, both as senior and then as a part-time Speech Therapist. It is a happy thought that she is now helping out in Ipswich Borough and we shall probably be joining forces with her again in April 1974, when the Health Services amalgamate.

Although I share Miss Lawrence's plea for more therapists -- one can never get enough of a good thing -- I think in all fairness we must admit that with the national shortage of speech therapists we are very fortunate indeed to have quite a good pupil-therapist ratio in East Suffolk as compared with many other Authorities.

Analysis of Speech Defects treated during 1972

	<u>School Age</u>	<u>E.S.N.</u>	<u>Pre-School Age</u>
Incomplete Sound Systems	301	1	18
Incomplete Sound Systems with delayed acquisition of language	22	10	3
Sigmatisms and Sibilant difficulties	59	3	-
Retarded Speech and language acquisition	68	12	19
Stammer	40	3	2
Dysphasia (various)	8	6	-
Miscellaneous Defects	66	29	9
Assessed and showing no difficulties	4	-	1
Assessed but not considered amendable to therapy	-	52	-

SCHOOL MEALS SERVICE

The number of children taking a meal on a day in September 1972 was 21,189 (75%) compared with 19,295 (70.9%) on a similar day in 1971.

A Kitchen was opened in the following new school:-

Felixstowe Kingsfleet

The kitchen at Kyson School Woodbridge, was extended to cater for the provision of extra meals for the enlarged school. In February 1972 meals were supplied from Kesgrave Heath School to the new Adult Training Centre at Rushmere.

The policy of fitting Bain Marie units into the counters of existing secondary schools was continued.

The provision of Meals on Wheels to the elderly by the School Meals Service has now been extended to 3 days per week instead of 2, in many areas.

SCHOOL TRANSPORT

There are 31 Primary School children and 35 Secondary School children in the County who receive transport to and from school on medical grounds. In addition to these, 76 children are transported daily to and from Special Schools, and 75 who are transported daily to and from Special Classes.

It is worth noting that from September, 1973, all secondary school children who live more than 3 miles from school will be provided with motor transport. At present certain children who live between 3 and 5 miles from school are provided with a cycle or allowance.

SWEEP TESTS

These tests have been carried out by the School Health Assistants.

(a) Vision Tests

27,850 pupils were tested of which 2,689 were found to have some defect. Many of these were already being treated, but the remainder were referred for further investigation either by a School Medical Officer or direct to a special eye clinic.

(b) Colour Vision

2,131 pupils tested and 76 noted for further tests by the Medical Officer.

(c) Hearing

11,067 pupils tested and 1,417 failed the sweep test and were referred for full audiometric test.

EMPLOYMENT OF CHILDREN

Certificates of fitness for employment in various specified occupations were issued for 1,119 pupils which involved the medical officer persuing the medical records or giving a medical examination to all the applicants, in accordance with the County Council's bye-laws.

MISCELLANEOUS EXAMINATIONS

Teacher candidates for admission to College of Education	202
Newly appointed teachers	11
County Council Staff	22
Other Staff	2

Swimming Pools

During 1972, 130 pools were in use; of these 31 were permanent, 95 were portable and there were 4 mobile pools owned by the County Council, loaned to 11 schools during the season.

Chlorinated cyanuric granules were used in all pools during the 1972 season. Its use was far more convenient than the sodium hypochlorinate solution used formerly for the small portable pools. Much smaller volumes are required to achieve the same free chlorine content and the effects are much longer lasting, in addition the pH of the water remains fairly stable and less work was involved in correcting this factor.

Very few problems were experienced during 1972 and the standard of water maintained was usually very good. Many of the teachers, caretakers and other people involved have now had considerable experience with the pools and have become very proficient.

School Milk Supply

156 schools in the County, including 11 non-maintained schools, received a free daily supply of $\frac{1}{3}$ rd pint of milk (pasteurised during 1972. Free school milk was provided for pupils up to the age of 7 years and on medical grounds for certain pupils up to the age of 12 years.

LOWESTOFT EXCEPTED DISTRICT

Dr. A.C. Gee, Lowestoft Borough School Medical Officer, in his Annual Report comments as follows:-

"The number of children in Borough Schools at the end of 1972 was 9,343, an increase of 276 on the previous year. Due to the shortage of medical staff some schools were not visited to carry out entrants' medical examinations during 1972. It is hoped that the leeway can be made up during the coming year. You will note the low number of leavers examinations during the year. The reason is two-fold:-

1. with the school leaving age compulsorily increased to 16 many pupils had been examined the previous year when they were 14/15 years old and, therefore, a further medical was not required in 1972.
2. under the new comprehensive education system in Lowestoft, the few leavers requiring examinations were from the Denes High School and Kirkley High School. No leavers medical examinations took place in 1972 at Kirkley High School: this was an amicable arrangement with the Headmaster due to reconstruction work at the school. The examinations were, in fact, carried out in January 1973.

Rubella (German Measles) vaccinations were completed on 211 school-girls in their thirteenth year in Lowestoft schools. The vaccinations were carried out where the parents had authorised the injection to be done by the Local Authority."

TABLE XVIII
RETURN OF HANDICAPPED CHILDREN

PART I

New assessments and placements

During the calendar year ended 31st December 1972		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
A Children newly assessed as needing special educational treatment at special schools or in boarding homes		-	2	2	2	7	4	13	31	1	-	63
B Children newly placed in special schools (other than hospital special schools) or boarding homes.												
(i) included at A		-	-	2	-	4	3	6	27	1	-	43
(ii) assessed prior to January, 1972		-	2	2	-	3	-	9	-	-	-	16
(iii) TOTAL newly placed		-	2	4	-	7	3	15	27	1	-	59

PART II

HANDICAPPED PUPILS AWAITING PLACES IN SPECIAL SCHOOLS; INDEPENDENT SCHOOLS; IN SPECIAL CLASSES AND UNITS;
UNDER SECTION 56 OF THE EDUCATION ACT, 1944; AND BOARDED IN HOMES

On 25th January 1973												
Children awaiting places in special schools other than hospital special schools		-	-	-	-	-	-	-	-	-	-	-
under 5 years of age	1 waiting before 1st January 1972	-	-	-	-	-	-	-	-	-	-	-
	(a) day places (b) boarding	-	-	-	-	-	-	-	-	-	-	-
Aged 5 years and over	2 newly assessed since 1st January 1972	-	-	-	-	-	-	-	-	-	-	-
	(a) day places (b) boarding	-	-	-	-	-	-	-	-	-	-	-
	3 waiting before 1st January 1972	-	-	-	-	1	-	-	1	-	-	2
	(a) day places (b) boarding	-	1	-	-	1	-	2	-	-	-	4
	4 newly assessed since 1st January 1972	-	-	-	-	-	-	-	1	-	-	1
	(a) day places (b) boarding	-	1	1	1	-	1	2	-	-	-	6

TABLE XIX
EAST SUFFOLK (including Lowestoft excepted District)
MEDICAL INSPECTION AND TREATMENT
(year ended 31st December, 1972).

PART I --- MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED 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 received a full medical examination	Physical Condition 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)		
		Satisfactory	Un- satisfactory		for defective vision (excluding squint)	for any other condition	Total individual pupils
		Number	Number				
1968 and later	43	43					
1967 ...	952	952			20	119	105
1966 ...	1,944	1,943	1		32	274	278
1965 ...	487	486	1		12	58	65
1964 ...	100	100			6	11	15
1963 ...	78	78			3	11	14
1962 ...	438	437	1	320	32	61	82
1961 ...	888	885	3	658	69	108	160
1960 ...	488	488		272	43	64	92
1959 ...	122	122		2	14	11	24
1958 ...	81	81			10	12	19
1957 and earlier	1,575	1,575			230	146	350
TOTAL	7,196	7,190	6	1,252	471	875	1,204
	Percentage	99.99	0.01				

TABLE B — OTHER MEDICAL INSPECTIONS

Number of Special Inspections	4,171
Number of re-inspections	2,958
Total	<u>7,129</u>

TABLE C — INFESTATION WITH VERMIN

(a) Total Number of individual examinations of pupils in schools	6,032
(b) Total number of individual pupils found to be infested	108
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944).	NIL
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944).	NIL

PART III — TREATMENT OF PUPILS ATTENDING
MAINTAINED AND ASSISTED PRIMARY
AND SECONDARY 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	1
Errors of refraction (including squint)	578
Total ...	579
Number of pupils for whom spectacles were prescribed	362

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

Received operative treatment —	
(a) for diseases of the ear ...	88
(b) for adenoids and chronic tonsillitis	218
(c) for other nose and throat conditions	15
Received other forms of treatment	61
Total ...	382
Total number of pupils in schools who are known to have been provided with hearing aids —	
(a) in 1969	18
(b) in previous years	67

TABLE C — ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Pupils treated at clinics or out- patients' departments ...	43
(b) Pupils treated at school for postural defects	-
Total ...	43

TABLE D — DISEASES OF THE SKIN (excluding uncleanness)

	Number of cases known to have been treated
Ringworm — (i) Scalp	-
(ii) Body	-
Scabies	2
Impetigo	-
Other skin diseases	5
Total	7

TABLE E — CHILD GUIDANCE TREATMENT

Pupils treated at Child Guidance Clinics	241
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TABLE F — SPEECH THERAPY

Pupils treated by speech therapists ...	1,030
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TABLE G — OTHER TREATMENT GIVEN

(a) Pupils with minor ailments ...	48
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	-
(c) Pupils who received B. C. G. vaccination	2,429
(d) Other than (a), (b) and (c) above	
Enuresis alarm sets ...	-
Hospitals — General Surgery	20
Hospitals — General Medicine	189
	2,686

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

TABLE XX

INSPECTIONS

	Number of Pupils		
	Inspected	Requiring treatment	Offered treatment
First inspection -- school	17,393	8,809	8,379
First inspection -- clinic	3,218		
Re-inspection -- school or clinic	921	497	497
Totals	21,532	9,306	8,876

VISITS (for treatment)

	Ages 5 - 9	Ages 10 - 14	Ages 15 & over	Total
First visit ...	2,732	2,404	525	5,661
Subsequent visits ...	2,733	3,160	895	6,788
Total visits ...	5,465	5,564	1,420	12,449

COURSES OF TREATMENT

Additional courses commenced	503	243	36	782
Total courses commenced	3,235	2,647	561	6,443
Courses completed	-	-	-	5,338

TREATMENT

Fillings in permanent teeth	1,504	5,101	1,626	8,231
Fillings in deciduous teeth	4,171	367	-	4,538
Permanent teeth filled	1,235	4,366	1,428	7,029
Deciduous teeth filled	3,726	335	-	4,061
Permanent teeth extracted	110	758	135	1,003
Deciduous teeth extracted	2,724	1,134	-	3,858
General anaesthetics	583	189	10	782
Emergencies	360	221	31	612

Pupils X-rayed	...	...	...	419
Prophylaxis	...	...	...	590
Teeth otherwise conserved				585
Teeth root filled	...	...		14
Inlays	...	...	...	1
Crowns	...	...	...	15

ORTHODONTICS

New cases commenced during the year	45
Cases completed during the year	27
Cases discontinued during the year	11
Removable appliances fitted	61
Fixed appliances fitted	1
Pupils referred to Hospital Consultants	19

DENTURES

Pupils fitted with dentures for the first time:-

- (a) with full denture
- (b) with other dentures

Ages 5 - 9	Ages 10 - 14	Ages 15 & over	Total
-	-	-	-
-	3	5	8
-	4	6	10

Dentures supplied (first or subsequent time)

SESSIONS

Sessions worked by Dental Officers

Treatment	2,514
Inspection at school	198
Dental Health Education	30

Notes

Label	Age	Sex	Color
	10-15	M	White
	16-20	F	White
	21-25	M	White
	26-30	F	White
	31-35	M	White
	36-40	F	White
	41-45	M	White
	46-50	F	White
	51-55	M	White
	56-60	F	White
	61-65	M	White
	66-70	F	White
	71-75	M	White
	76-80	F	White
	81-85	M	White
	86-90	F	White
	91-95	M	White
	96-100	F	White

Label	Age	Sex	Color
	10-15	M	White
	16-20	F	White
	21-25	M	White
	26-30	F	White
	31-35	M	White
	36-40	F	White
	41-45	M	White
	46-50	F	White
	51-55	M	White
	56-60	F	White
	61-65	M	White
	66-70	F	White
	71-75	M	White
	76-80	F	White
	81-85	M	White
	86-90	F	White
	91-95	M	White
	96-100	F	White

Notes

Notes



