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Contributors

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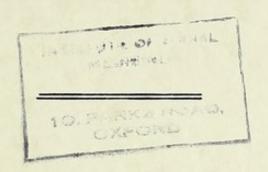
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JNTY BOROUGH OF EASTBOURNE



Annual Report

OF THE

Medical Officer of Health

FOR THE YEAR 1951

JOHN FENTON, M.B., B.Ch., B.A.O., D.P.H., Medical Officer of Health. Digitized by the Internet Archive in 2017 with funding from Wellcome Library

COUNTY BOROUGH OF EASTBOURNE

Annual Report

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Medical Officer of Health

JOHN FENTON, M.B., B.Ch., B.A.O., D.P.H., Medical Officer of Health.



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PUBLIC HEALTH DEPARTMENT STAFF

WHOLE-TIME OFFICERS

Medical Officer of Health: JOHN FENTON, M.B., B.Ch., B.A.O., D.P.H.

Deputy Medical Officer of Health: Miss E. Mary Cumming, M.R.C.S., L.R.C.P., D.P.H.

> Assistant Medical Officer of Health: Miss Jessie Griffin, M.B., Ch.B., D.P.H.

> > Senier Dental Officer: M. G. Berry, L.D.S., R.C.S.

Assistant Dental Officer: Miss Jean D. OSWALD, L.D.S., R.F.P.S.G.

> Senior Sanitary Inspector: ARTHUR LINDFIELD, Cert. R.S.I.

> > Sanitary Inspectors:

F. T. RIPPIN, Cert. S.I.B.

G. N. RICHARDS, Cert. S.I.B.

L. R. GODFREY, Cert. S.I.B. L. G. HOWARD, Cert. S.I.B.

E. G. WREN, Cert. S.I.B.

Superintendent Nursing Officer and Non-Medical Supervisor of Midwives: Miss A. Day, S.R.N., S.R.C.N., S.C.M., H.V. Cert., Q.N.

Assistant Superintendent Nursing Officer and Additional Non-Medical Supervisor of Midwives:

Miss M. E. Youngs, S.R.N., S.C.M., H.V. Cert., Q.N. (To 29.7.51)

Senior Health Visitor:

Miss K. M. Avis, S.R.N., S.C.M., H.V. Cert., Public Health Nursing Administration Certificate (from 16.7.51)

Miss A. L. MITCHELL, S.R.N., S.C.M., T.A. Cert. (Hons.), H.V. Cert (To 30.6.51)

Health Visitors:

Mrs. D. M. Bates, S.R.N., S.C.M., H.V. Cert.

Miss J. C. M. Berk, S.R.N., S.C.M. Part I., H.V. Cert. Mrs. L. Foster, S.R.N., S.C.M., H.V. Cert.

Miss P. Ivory, S.R.N., S.C.M. Part I., H.V. Cert. Mrs. S. M. James, S.R.N., S.C.M. Part I., H.V. Cert.

Miss M. J. Partridge, S.R.N., S.C.M., H.V. Cert.
Mrs. P. D. M. St. John Jones, S.R.N., S.C.M., H.V. Cert.
Miss E. E. Griffin, S.R.N., S.C.M., H.V. Cert. (from 1.9.51)
Miss P. A. Thackeray, S.R.N., S.C.M., H.V. Cert. (To 30.9.51)
Miss I. P. Lucas, S.R.N., S.C.M., H.V. Cert. (To 7.7.51)

Domiciliary Midwives:

Miss M. A. Bennett, S.C.M.

Miss F. M. Scammell, S.R.N., S.C.M.

Miss A. L. Moon, S.R.N., S.C.M.

Domiciliary Nurses:

(a) Whole Time

Miss J. Morley, S.R.N., S.C.M., Q.N. (Senior) from 1.11.51

Mrs. J. E. Jerratt, S.R.N., Q.N.

Miss D. Ezzard, S.R.N., S.C.M., Q.N.

Mrs. W. G. FINCH, S.R.N

Miss P. M. PHILLIPS, S.R.N., Q.N.

Mrs. J. E. Rainsley, S.R.N. Mr. A. Rotchell, S.R.N., Q.N.

Miss E. Woods, S.R.N., Miss E. E. Griffin, S.R.N., S.C.M. (From 12.4.51 to 31.8.51)
Miss B. D. L. Higton, S.R.N., S.C.M., Q.N. (From 30.7.51)
Miss J. Boothroyd, S.R.N., S.R.F.N., Q.N. (From 15.10.51)
Miss D. V. Alloway, S.R.N., S.C.M., Q.N. (From 29.10.51)
Miss D. J. Spooner, S.R.C.N., S.R.N., S.C.M., Q.N. (From 1.11.51)
Mrs. F. A. Purchase, S.R.N., S.C.M. (From 4.12.51)
Miss R. E. Dabner, S.R.N., S.C.M., Q.N. (To 23.6.51)
Mrs. M. Holdway, S.R.N., S.C.M., Q.N. (To 3.5.51)
Miss E. Hughes, S.R.N., S.C.M., Q.N. (To 23.6.51)

Miss E. Hughes, S.R.N., S.C.M., Q.N. (To 23.6.51)

Mrs. H. L. STAPLETON, S.R.N. (To 16.6.51)

(b) Temporary

Mrs. C. E. M. Driver, S.R.N., S.C.M. (To 28.10.51)

Miss E. M. MILLER, S.R.C.N., S.C.M. (To 15.12.51)

(c) Part-time

Mrs. K. M. Castle, S.R.N., R.M.P.A. (From 11.6.51)

Mrs. J. MILLICHAMP, S.E.A.N. (From 18.6.51)

Mrs. M. E. Morgan, S.R.N. (To 15.12.51)

Home Teacher of the Blind and Occupational Therapist: Miss L. E. Jackson, H.T. Cert.

Senior Authorised Officer and Welfare Officer:

V. O. F. LITTLE

Authorised Officer and Assistant Welfare Officer:

H. A. HURT

Authorised Officer and Female Mental Health Worker:

Miss N. G. Fuller

Part-time Authorised Officer:

Mrs. K. M. Castle (From August, 1951)

Clerical Staff:

H. T. Hounsom (Lay Administrative Officer)

A. H. HOOKHAM, F.R.Met. Soc.

W. L. Peck

C. A. Hemsley

Miss G. E. Woods

Miss M. S. HARDY

Miss D. M. Beetlestone

Miss D. Oram

Miss J. Y. WORMAN Miss B. WAIGHT

R. G. Morley (From 28.3.51)

Miss D. A. Abrahall (From 3.9.51)

B. K. Leighton (To 20.3.51)

Dental Attendants:

Miss D. S. Jackson

Miss M. K. WILSON

Public Health Department,
Avenue House,
Eastbourne.
September 1952

To His Worship the Mayor and to the Aldermen and Councillors of the County Borough of Eastbourne.

MR. MAYOR, LADIES AND GENTLEMEN:

I have much pleasure in presenting the Sixtieth Annual Report, the twelfth which I have been privileged to submit, on the state of the Public Health in Eastbourne during the year 1951.

From the Registrar General's statistics, it will be noted that our estimated mid-year population was fifty-seven thousand, five hundred and ten, a decrease of five hundred and forty souls as compared with the estimate for the previous year. The number of births to residents, namely, six hundred and fourteen was, with the exception of the war years, the lowest since 1935: the rate per thousand population for live births was 10.67 as compared with a rate of 15.5 for England and The corrected live Birth Rate, however, after applying the "Area Comparability Factor" which makes allowance for the age constitution of a population, was 11.52. Deaths from all causes were nine hundred and seven, eight hundred and ninety-two in 1950, giving a "Crude" Death Rate of 15.77 per thousand population. The Death Rate for England and Wales was 12.5, but when the appropriate "Area Comparability Factor" is applied to our crude figures we get a corrected rate of 11.50. Over sixty-three per cent of the deaths were certified as being due to cardiovascular lesions of one kind or another, and this is what one would expect in view of the fact that seven hundred and twenty-five of the deaths were of persons aged sixty-five and over. Malignant disease claimed one hundred and twenty-eight lives, but statistics covering a number of years do not show any appreciable increase in deaths from this cause in Eastbourne. Six children died before reaching their first birthday, resulting in an Infantile Mortality Rate of 9.77, and two of the six were illegitimate infants. The number of deaths of children under one year and the resultant rate are the lowest ever recorded in Eastbourne. Eleven men and twelve women died from tuberculosis of the respiratory tract and one man died from tuberculosis of the genitourinary tract. It is a very great pleasure to record that there were no deaths from causes associated with pregnancy or childbirth. residents took their own lives and motor vehicle accidents accounted for three local lives.

The greatest advance in practical preventive medicine in the year under review, so far as Eastbourne is concerned, was, I feel, the visit of the Mass Radiography Unit from May 2nd to June 29th. For a first visit, the response, eight thousand, two hundred and two persons passed through the Unit, was quite encouraging. This further weapon in the great and continuing battle against the scourge of tuberculosis can, if taken full advantage of, be of inestimable value. The examinations are carried out entirely under conditions of secrecy and the results are only divulged to a third party with the consent of the person concerned. At the time of writing, the Unit is again in Eastbourne, and it is greatly to be hoped that very large numbers of the adult population in all age groups will present themselves for examination.

The year 1951 was the third complete year of the operation of the National Health Service Act, 1946. Each of the three partners in the peripheral administrative field, the Hospital Management Committee, the Local Executive Council and the Local Health Authority can now see more clearly the parts which they have to play in the functioning of this very complicated piece of social legislation. It is daily more evident to all, and I am glad to say, generally accepted, that the health of the people of this country will benefit to the full, only if there is the closest possible co-operation between all three branches of the service. Tidy and elaborate administrative machinery is of little importance, compared with pooling of the resources of all three sections for the benefit of the people. There is some evidence that the preventive outlook is at last beginning to emerge, and regain its rightful place. Is all as well with the health of the nation as figures showing absence of outbreaks of major infectious disease, falling death rates of infants and mothers and other statistical evidence would suggest? Why are the waiting rooms of doctors crowded and why is absence from work on account of illness so high? Is it a fact that up to fifty per cent of people who seek medical advice are shown on investigation to have no obvious physical departure from normal? There surely is a wide field for investigation into the causes of so much sub-normal health in the absence of demonstrable organic disease.

We are told there is no prospect of early fresh legislation to overcome the now apparent weaknesses in the Act, so hope would appear to lie in the informal machinery which has been set up by way of Local Joint Health Consultative Committees. With good will on the part of all concerned, and all the indications are that it will be forthcoming in this area, I am confident much will be done to provide the community with a more comprehensive and better health service.

The number of births attended by the Council's domiciliary midwives was again fewer, showing a decline from twenty per cent in 1950 to seventeen per cent in the year under review: of a total of six hundred and nine births to residents, four hundred and ninety four took place in institutions and only one hundred and fifteen in private houses.

The increased number of cases shown as dealt with by the Ambu-

lance Service is not, due to a different method of making returns, a real one. The important fact is that the total mileage does show a reasonable decline: this is largely due to the fact that most long distance cases are now sent by train for the greater part of the way.

Following the receipt of Circular No. 32/51, Schemes under the National Assistance Act for various classes of handicapped persons were made and approved by the Minister of Health: they came into operation on 28th December. Under these Schemes the Council agreed to the Sussex Diocesan Association for the Deaf and Dumb, the Eastbourne Voluntary Association for the Care of Cripples, and the Eastbourne Hard of Hearing Association being appointed their agents for the handicapped classes falling to be dealt with by each organisation. The work of these voluntary bodies is greatly appreciated, as also is the continued good work of the Eastbourne Voluntary Association for the Blind, in the field of welfare for the blind and partially sighted. I am glad also to acknowledge the excellent work being done by the Women's Voluntary Service generally in the welfare field, but more especially in regard to their Meals-on-Wheels Service. The meals provided to aged and other handicapped persons at a reasonable price to most, a reduced price to others and, in a number of cases, free, are greatly appreciated by the recipients and the service must, in my view, be regarded as an essential one.

Trevin Towers, Gaudick Road, which provides accommodation or forty-six aged ambulant persons, received the first residents on May 21st. At the end of the year nineteen aged women were accommodated at St. Luke's Home. Much time and effort continues to be expended in the continued search for more suitable accommodation for temporarily homeless persons with, so far, little success.

After very protracted negotiations between the National Assistance Board, the Regional Hospital Board, and the Local Hospital Management Committee, agreement was reached on the continued use of part of St. Mary's Hospital premises as a reception centre for men without a settled way of existence. The improvements which I have long pressed for are now being carried out and special part-time staff will soon be appointed.

Close contact is maintained between the department and the staff of the local offices of the National Assistance Board and information is exchanged regarding the circumstances of blind persons, tuber-culous persons and other handicapped classes. I do not think it is fully appreciated the part the Board and its officers take in the health and welfare of the people. It is their task to see that the needy have the wherewithal to keep body and soul together, and what service could be more vital to health and well-being? At the end of 1951, weekly allowances were being paid up and down the country to close on one and a half million persons, involving over two million souls. The total expenditure of the Board was nearly ninety-seven million pounds. The Eastbourne Office, which deals with the surrounding County area as well as the Borough, had a case load of five thousand

one hundred and thirty-five persons at the end of March 1952, compared with four thousand eight hundred and twenty-seven in the previous year. A cordial relationship also exists with the local officers of the Ministry of Labour and National Service in regard to the training and placement in employment of variouse classs of handicapped persons. At the end of April in the current year there were one thousand one hundred and forty-eight men and one hundred and eighteen women on the local Register of Disabled Persons; of that number sixty-four men and twelve women were unemployed. In view of the overall age of the population, it would appear that serious consideration must be given to the continuance in employment of many persons beyond the normal retiring age limits, and to the employment of the maximum number of disabled persons.

I am, once again, very happy to have this opportunity of thanking the staff in all sections of the department for their loyalty, hard work and humane approach to the many problems of human welfare with which we were confronted during the year. The continued cooperation of my colleagues in general practice and in consultant work is greatly appreciated and, I trust, fully reciprocated. I would also like to thank the officers of the Hospital Management Committee, the Ministry of Labour and National Service and the National Assistance Board for their collaboration. The many voluntary organisations in the town were, as always, at all times ready to generously assist in the efforts of the staff for the benefit of our needy and less fortunate brethren and I cannot speak too highly of their work.

Finally, Mr. Mayor, my sincere thanks are due to you, and to the Chairman and Members of the Public Health, Health Services and Welfare Services Committees, for the support and encouragement which I continue to receive from you all.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

JOHN FENTON,

Medical Officer of Health.

POPULATION

The fifteenth Census of the Population of England and Wales was taken on the 8th April 1951, and the Preliminary Report of the Registrar General gives the following comparisons of the population of Eastbourne enumerated at that Census as compared with the Census of 1931:

		Males	Females	Total
1931 Census	 	23,942	34,600	58,542
1951 Census		24,247	33,554	57,801

These figures show a decrease in population of 1.3 per cent.

The figures for England and Wales show an increase of 3,792,547

persons, being 9.5 per cent.

An innovation by the Registrar General in connection with the Census of 1951 was the publication of "One per cent Sample Tables." These tables followed the isolation and analysis of a small sample of the total records collected, and the figures below relate to Eastbourne:

			Males	Females	Total
TOTAL POPULATION			26,200	31,600	57,800
MARITAL CONDITION:					
Single			11,300	13,100	
Married			13,900	14,100	57,800
Widowed and Divor	ced		1,000	4,400	
Age Groups:					
0-4			3,300	1,700	5,000
5-14			3,700	3,100	6,800
15-24			2,100	2,400	4,500
25-34			3,300	4,300	7,600
35-44			4,300	5,100	9,400
45-54			3,600	3,400	7,000
55-64			2,200	4,500	6,700
65 and over			3,700	7,100	10,800
			26,200	31,600	57,800
			20,200	31,000	37,000
The following figures r	elate to	Private H			
The following figures r densities of occupation a	elate to	Private H	Iouseholds,	Rooms O	
The following figures r densities of occupation as Total households	elate to	ehold arr	Iouseholds,	Rooms O	
densities of occupation as Total households	nd hous	Private H ehold arr	Iouseholds,	Rooms O	ccupied,
densities of occupation as	nd hous ellings	ehold arr 	Iouseholds, angements	Rooms O	ccupied,
densities of occupation as Total households Households in shared dw Households of successive per room):	nd hous ellings	ehold arr 	Iouseholds, angements	Rooms O	18,000 4,600
densities of occupation at Total households Households in shared dw Households of successive per room): 3 and over 2	nd hous ellings	ehold arr 	Iouseholds, angements	Rooms O	18,000 4,600
densities of occupation at Total households Households in shared dw Households of successive per room): 3 and over 2 2 and over 1½	nd hous ellings	ehold arr 	Iouseholds, angements	Rooms O	18,000 4,600 1,000 600
densities of occupation at Total households Households in shared dw Households of successive per room): 3 and over 2 2 and over $1\frac{1}{2}$ $1\frac{1}{2}$ and over 1	nd hous ellings	ehold arr 	Iouseholds, angements	Rooms O	18,000 4,600 1,000 600 100
densities of occupation at Total households Households in shared dw Households of successive per room): 3 and over 2 2 and over 1½ 1½ and over 1 1 or less	nd hous	ehold arr es of occu	Iouseholds, angements	Rooms O	18,000 4,600 1,000 600
densities of occupation at Total households Households in shared dw Households of successive per room): 3 and over 2 2 and over 1½ 1½ and over 1 1 or less Households without exclusion.	nd hous cellings densition	ehold arr es of occu	Jouseholds, angements	Rooms O	18,000 4,600 1,000 600 100 16,300
densities of occupation at Total households Households in shared dw Households of successive per room): 3 and over 2 2 and over 1 1 or less Households without excluded water Closet	nd hous	ehold arr es of occu	Iouseholds, angements	Rooms O	18,000 4,600 1,000 600 100 16,300 2,600
densities of occupation at Total households Households in shared dw Households of successive per room): 3 and over 2 2 and over 1½ 1½ and over 1 1 or less Households without exclusion.	nd hous cellings densition	ehold arr es of occu	Jouseholds, angements	Rooms O	18,000 4,600 1,000 600 100 16,300

Rooms occupied by households				82,300
Population in households				54,700
Persons per room: 1951 Persons per room: 1931				0.66
Percentage of percent living	.1 0			0.69
Percentage of persons living more Ditto	than 2	per room:		2.01
Ditto	ditto		1931	2.71

VITAL STATISTICS

The following are the statistics furnished by the Registrar-General: Fetimated Mid V.

BIRTHS:

Estimated Mid-Ye	ear Home Pop	oulation—5	7,510.	
BIRTHS:		Total	Male	Fer
Live Births—Legitimate		578	200	

Births:	Total	Male Femo	.1.
Live Births—Legitimate	578		
Illegitimate	36	2.2	70
Still Births—Legitimate	16	9	20
Illegitimate	1	,	7
DEATHS:			1
All causes	907	106 5	01
· · · · · · · · · · · · · · · · · · ·	207	406 50	
	Eastbourne	England	
Birth rate per 1,000 population:	Lustoourne	and Wales	
Live Births	10.67	15.5	
Still Births	0.29	15.5	
Birth rate after applying "Area Com-	0.29	0.36	
parability Factor" of 1.08	11.52		
Death rate (Crude) per 1,000 population	15.77	12.5	
Death rate after applying "Area Com-	13 77	12.5	
parability Factor" of 0.73	11.5		
Tuberculosis death rate per 1,000 popula-	11 3		
tion	0.41	0.21	
Maternal Mortality—Death rates per 1,000	0.41	0.31	
Live and Still Births:			
Sepsis of pregnancy, childbirth and the			
Duernerum		0.10	
Abortion with toxaemia		0.10	
Other toxaemias of pregnancy and the		0.00	
puerperium		0.24	
Haemorrhage of pregnancy and child-		0.24	
birth Abortion without most		0.13	
Abortion without mention of sepsis or		0.13	
toxaemia		0.05	
Abortion with sepsis		0.09	
Other complications of pregnancy, child-		0.09	
birth and the puerperium		0.18	
Death rate of infants under 1 year of age:		0.10	
All infants per 1,000 live births	9.77	29.6	
Legitimate infants per 1,000 legitimate	, ,,	29.0	
live births	6.92		
Illegitimate infants per 1,000 illegitimate	0 72		
live births	55 - 55		
	00 00	the second second	

CAUSES OF DEATH

Chedeb of Di			
	Males	Females	Total
Tuberculosis, respiratory	11	12	23
Tuberculosis, other	1	_	1
Syphilitic disease	2	_	2
Other infective and parasitic diseases	1	1	2 2
Malignant neoplasm, stomach	11	2	13
Malignant neoplasm, lung, bronchus	15	5	20
Malignant neoplasm, breast	_	17	17
Malignant neoplasm, uterus		10	10
Other malignant and lymphatic neoplasms	34	34	68
Leukaemia, aleukaemia	_	2	2
Diabetes	3	3	6
Vascular lesions of nervous system	75	118	193
Coronary disease, angina	55	45	100
Hypertension with heart disease	11	11	22
Other heart disease	82	147	229
Other circulatory disease	15	14	29
Influenza	2	4	7
Pneumonia	1.4	9	23
Bronchitis	4.4	11	22
Other diseases of respiratory system		1	5
Ulcer of stomach and duodenum	0	1	9
Gastritis, enteritis and diarrhoea		1	3
Nephritis and nephrosis	2	6	
Hyperplasia of prostate	7		9 7
Congenital malformations		2	2
Other defined and ill-defined diseases	26	33	59
Motor vehicle accidents	2	_	3
All other accidents	-	8	14
Suicide	2	4	6
Homicide and operations of war			1
Tronsered and operations of war			
	406	501	907

There were no deaths from diphtheria, whooping cough, meningo-coccal infections, acute poliomyelitis or measles.

AGE MORTALITY

	AGL	IVIO	1/1	TITI .	1 1		
					Males	Females	Total
Under 1					3	3	6
1-5					2	1	3
5-15					2	1	3
15-25	 				1	3	4
25-45	 				10	12	22
45-65	 				75	69	144
65-75					126	114	240
75 and over	 				187	298	485
					406	501	907

MATERNAL AND INFANTILE MORTALITY 1894-1951

Years	Total Infant Deaths	Infantile Mortality Rate	Total Maternal Deaths	Maternal Mortality Rate
1894-1903 Average	 108 - 5	118 · 2	3.6	4.56
1904-1913 Average	 79.3	96.6	2.6	2.91
1914-1923 Average	 52.3	68.8	1.5	1.93
1924-1933 Average	 30.0	45.7	1.5	2.20
1934-1943 Average	 23.6	42.40	2.1	3.72
1944	 11	22.49	1	2.04
1945	 24.	35.98	_	_
1946	 28	29.04	2	2.00
1947	 31	31 · 5	3	2.96
1948	 21	26 · 22	_	
1949	 16	21.62	2	2.63
1950	 18	25 · 67	1	1.39
1951	 6	9.77	_	

There were six deaths, three male and three female, of infants under one year.

Age	Sex	Where died		Cause of death
Newly born	M	Found dead	1a.	Compound comminuted fracture of the skull with laceration of the brain and much attendant haemorrhage, top of skull having come into contact with a hard unyielding object. Conviction of Infanticide. P.M.
12 hours	F	St. Mary's Hospital	1a.	Prematurity.
20 hours	F	St. Mary's Hospital	1 <i>a</i> .	Asphyxia. Acute Bronchitis. Prematurity. P.M.
3 days	M	Maternity Home		Atelectasis of lungs. Prematurity.
8 days	M	St. Mary's Hospital	1a.	Prematurity.
1 month	F	St. Mary's Hospital	1 <i>a</i> .	Congenital Heart Disease.

DEATHS OF CHILDREN 1 TO 5 YEARS

Ages and causes of death:

13 months	M	1a. Gastro-Enteritis.2 Status Lymphaticus.	P.M.
21 months	M	1a. Cirrhosis of Liver.b. Infective Hepatitis.	P.M.
2 years	F	1a. Overwhelming infection.b. Aplastic anaemia.	P.M.

MATERNAL DEATHS

No Eastbourne mother died from any cause associated with pregnancy or childbirth.

BIRTHS AND DEATHS 1925-1951

Year	No. of Births	Birth rate per 1,000 population	Birth rate after applying "Area Comparability Factor"	No. of Deaths	Death rate per 1,000 population	Death rate after applying "Area Comparability Factor"
1925	661	12.2 -		666	12.09	
1926	727	12.9		603	10.75	
1927	655	11.55	_	651	11 - 47	_
1928	726	12.41		676	11.55	_
1929	643	10.97	_	794	13 - 55	_
1930	667	11.3	-	660	11.3	_
1931	651	11.7	6	715	12.8	_
1932	701	12.19	_	738	12.83	_
1933	640	11.3	_	741	13 · 2	-
1934	643	11.5	-	738	13 - 12	10.8
1935	594	10.59	_	717	12.78	10.22
1936	652	11.69	_	733	13 - 15	10.52
1937	616	10.77	_	785	14.11	11 · 28
1938	628	11.06	-	775	13.65	10.92
1939	587	11 · 18	-	759	12.76	10.00
1940	545	10.13	-	880	16.36	12.27
1941	384	13.92	-	487	17.66	-
1942	463	14.95	_	598	19.31	-
1943	416	15.19	-	618	22.57	-
1944	489	17 · 47	-	530	18.94	-
1945	667	16.99	-	680	17.30	-
1946	964	19.36	-	738	14.82	- Total
1947	983	18.3	-	816	15.2	-
1948	801	14.15	-	718	12.68	
1949	740	13.00		870	15.29	11.31
1950	701	12.07	13 · 47	892	15.36	11.36
1951	614	10.67	11 · 52	907	15.77	11.50

DEATHS FROM CANCER

The following table shows the number of deaths and death rates from Cancer, since 1904:

	Year	Papula		Age Groups Total					Death Rate	
	1 ear	Popula- tion	0- 1	1- 5	5- 15	15- 25	25- 65	65 & over		per 1,000
Ten Years	1904 1905 1906 1907 1908 1909 1910 1911 1912 1913	45,750 46,500 49,000 50,500 51,500 52,000 52,500 52,544 53,500 54,000	- - 1 - - - - -		- - - 1 - - 1	- 1 1 - 1 - - -	** 29 25 32 20 28 38 27 35 35	** 21 25 20 27 20 24 32 28 31	54 51 50 53 48 50 62 59 64 67	1·18 1·09 1·02 1·06 0·93 0·96 1·18 1·12 1·19 1·24
	Total	_	1	1	2	3	**,*	***	558	_
Ten Years	1914 1915 1916 1917 1918 1919 1920 1921 1922 1923	54,500 47,125 49,976 44,842 49,682 50,442 50,354 53,600 53,700 53,900		_ _ _ _ _ 1			35 34 ** 33 26 36 26 50 44 37	34 17 ** 27 21 26 50 50 41 33	69 51 65 60 47 62 76 101 88 70	1·26 1·08 1·30 1·33 0·94 1·22 1·50 1·88 1·63 1·29
	Total	-	_	1	_	3	**	**	689	_
Ten Years	1924 1925 1926 1927 1928 1929 1930 1931 1932 1933	54,830 55,060 56,000 57,000 58,500 58,570 59,000 55,710 57,500 56,550		- 1 - - - - - - -		1 1 - 1 - - - 2	37 38 44 50 45 48 41 49 45 49	44 54 61 59 53 59 63 69 78 65	82 94 105 110 98 108 104 118 125 114	1·49 1·70 1·80 1·90 1·67 1·84 1·50 2·11 2·17 2·0
	Total	-	-	1	1	5	446	605	1058	-
Five Years	1934 1935 1936 1937 1938	56,250 56,100 55,730 55,610 56,770			1 - - -		46 36 49 55 48	66 75 58 63 84	113 111 107 118 132	2·0 2·0 1·9 2·1 2·1
	Total	<u> </u>	_	-	1	_	234	346	581	

	V	D. b. l.	Age Groups					Tabl	Death Posts	
	Year	Popula- tion	0- 1	1- 5	5- 15	15- 45	45- 65	65 & over	Total Deaths	Rate per 1,000
Ten Years	1939 1940 1941 1942 1943 1944 1945 1946 1947	59,470 53,760 27,570 30,960 27,380 27,980 39,300 49,790 53,540	11111111	- 1 - - - 1 -	1	12 4 1 4 3 2 6 4 7	69 37 24 30 29 26 43 54 31	30 53 48 48 52 67 79 68 87	112 95 73 82 84 95 129 126 125	1.88 1.76 2.64 2.68 3.06 3.43 3.28 2.53 2.33
Three Years	1948 Total 1949 1950 1951	56,880 58,050 57,510		3 -	1 2 - 1	5 48 9 9 4	35 378 40 54 46	92 624 79 100 77	134 1055 128 163 128	2·36
	Total	_	_	_	1 -	22	140	256	419	_

METEOROLOGY

The weather for each month of the year can briefly be summarised as follows:

January: Unsettled. Much rain but with sunshine above the average.

February: Abnormally wet and cold and with sunshine slightly below average.

March: Dull, wet and cold.

April: Cool but sunny.

May: Cool and mainly dull.

June: Sunny and warm.

July: Mainly fine and warm.

August: Unsettled and cool with an excess of rain.

September: Rather dull and wet.

October: A dry month. Mainly warm and sunny.

November: Exceptionally wet and mild.

December: Mainly rather mild. Dry, with sunshine in excess of the average. Stormy at end of month.

Sunshine.—Of the 295 official Meteorological Stations sending returns to the Air Ministry, only one Station registered more than 1900 hours, whilst fifteen Stations registered between 1800 and 1900 hours. Eastbourne was seventh on the Official List, and our position in relation to other South Coast towns was:

Positio	m Town			Hours
7	Eastbourne			 1836 - 4
1	Shanklin			1917 - 4
2	Falmouth			 1886.0
4	Sandown			 1854.0
6	Worthing			 1838 • 4
8	Weymouth			 1830 · 6
9	Ventnor			 1826 · 5
10	Littlehampton			 1819 · 2
11	Bognor Regis			 1817 · 3
12	Portsmouth			 1816.2
13	Seaford			 1811.0
14	Teignmouth			 1808 · 3
15	Penzance			 1805 · 5
17	Torquay			 1794.9
20	Paignton			 1779.5
21	Hastings			 1775 · 9
24	Brighton	1,500.00/		 1773 · 6
26	Ryde			 1764.9
28	Bexhill-on-Sea		"	 1750 · 7
34	Folkestone			 1734 · 2
41	Bournemouth			 1730 · 6
45	Dover			 1708 · 2
47	Newquay			 1701 · 7

Eastbourne has held the following positions in the official returns of sunshine in recent years:

Year	Position	Hours
1950	3	1841 · 6
1949	6	2153 - 3
1948	7	1916.0
1947	1	1933 · 1

WINDS.—Wind direction, taken at 9 a.m. and 9 p.m., was:

Direction		P	ercentage
N			12.74
N.E.		The Walter	5.62
E			6.71
S.E.	 		7.26
S			10.82
S.W.			11.10
W.			30.27
N.W.			13 - 15
Calm			2.33

RAINFALL.—The 42.47 inches rainfall was 11.25 inches above the fifty year average and the highest recorded in any year since records were commenced in 1888.

SUMMARY OF OBSERVATIONS

AIR PRESSURE (Mean Sea Lev	vel):			
Daily Average:				
9 a.m.		29.910	inches	(1012 · 8 millibars
9 p.m				(1012.9 millibars
AIR TEMPERATURE:				
Daily Averages:				
				56.2 degrees
Minimum				56·2 degrees
Combined				51·1 degrees
D				10·2 degrees
				52·2 degrees
				50·1 degrees
Warmest day-Septemb				77 degrees
Warmest night—July 31				64 degrees
Coldest days—January 3		March 9		39 degrees
Coldest night—January				23 degrees
SEA TEMPERATURES:				
Daily average				52·2 degrees
Highest—July 31st				65 · 4 degrees
Lowest—January 1st				37.0 degrees
F T D-11-				
EARTH TEMPERATURES—Daily	Avera	ges:		
At 1 foot				52.4 degrees
At 4 feet				53·3 degrees
SUNSHINE:				1006 11
Total				1836 · 4 hours
Daily Average				5.03 hours
Humidity:				
				87 per cent
Daily Average: 9 a.m. 9 p.m.				89 per cent
9 p.m.				or per cent
PREVAILING WINDS: West				30·27 per cent
Snow and sleet recorded	on			4 days
Hail recorded on				7 days
Thunderstorms recorded				15 days
Fog (9 a.m.) recorded on				5 days
Gales recorded on				10 days
Ground Frost recorded				34 nights

Monthly averages of temperature, sunshine and rainfall:

		Air	Temper	ature			Suns	hine	Rain	ıfall
	M	leans of				Mean Sea				
Month	Maxi- mum	Mini- mum	Max. and Min. Com- bined	High- est	Low- est	Tem- pera- ture	Total Hours	Daily Hours	Inches	'Rain' Days
January February March April May June July August September October November December	45·9 45·4 47·0 52·3 58·1 63·1 68·7 66·5 65·2 58·4 54·3 49·8	38·4 36·9 37·0 39·8 46·5 51·6 56·4 55·8 55·3 46·8 45·4 42·0	42·2 41·1 42·0 46·1 52·3 57·3 62·5 61·1 60·3 52·6 49·9 45·9	51 50 52 67 65 70 75 63 77 66 61 53	23 29 28 32 40 46 49 51 48 34 34 27	42·3 41·7 42·9 46·3 51·6 58·1 62·9 63·3 61·2 55·7 52·6 47·5	70·3 76·0 117·1 217·1 206·7 296·7 260·5 191·8 136·7 143·5 63·3 56·7	2·27 2·71 3·78 7·24 6·67 9·89 8·40 6·19 4·56 4·63 2·11 1·83	4·32 5·56 3·89 2·04 2·15 1·52 1·69 6·15 4·06 2·89 5·50 2·70	18 20 17 17 13 6 9 17 13 8 25 18
YEAR	56-2	46.0	51 · 1	77	23	52 · 2	1836 · 4	5.03	42 - 47	181

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply.—The water supply of the Borough is provided by the Eastbourne Waterworks Company. The bulk of the supply is obtained from a well in the Downs in the Parish of Friston and at a distance of some three and a half miles from the centre of Eastbourne. Over two miles of heading, lying at a depth varying from one hundred and twenty to four hundred feet, feed a well one hundred and twenty feet deep. The water is pumped to a reservoir on Friston Hill and thence gravitates by a twenty-one-inch main to holding and distributing covered reservoirs at Meads and Mill Gap. The capacity is approximately four million gallons per day.

The Catchment Area covers some four square miles, is all downland, and two thousand acres have been leased to the Forestry Commission. All possible precautions have been taken to mitigate the risk of pollution.

The secondary source of supply comes from Holywell, where the water is obtained from a well with headings in the chalk, one running parallel to the cliff and one extending to the Paradise Reservoir. The depth of this heading varies from twenty-five to three hundred feet, and the capacity is approximately 300,000 gallons per day. Some ninety-four and a half million gallons were obtained from this source.

The water from both sources was ample in quantity and, bacteriologically as well as chemically, the quality maintained its usual high standard. The weekly consumption varied between twenty and twenty-eight million gallons, with an average consumption throughout the year of twenty-two and three-quarter millions. Chemical and bacteriological examinations of both the raw and piped supplies were carried out by the Company, and samples of the piped supply were also regularly sent by the Public Health Department for chemical analysis as well as bacteriological content. The Company has undertaken to supply water to various parishes in the area of the Hailsham Rural District Council, and have now secured another source of supply at Wigden's Bottom, which is situated between Belle Tout and the main Eastbourne-East Dean road Headings in the chalk ranging in depth from two hundred to three hundred feet and some six hundred yards in total length, will provide a supply estimated at approximately one and a quarter million gallons a day. Tenders have now been received for the building of this new Cornish Pumping Station and for the necessary equipment; when approval is received from the Ministry of Local Government and Planning, the work will commence and a twelve-inch main will connect the supply with the old Paradise Reservoir, which has been reconditioned.

The following are typical reports on samples taken from:

- (a) Friston (main source of supply)
- (b) Holywell (subsidiary source)
- (c) Town Main (supplies as received by the public)

(a) The Counties Public Health Laboratories 66 Victoria Street, London, S.W.1.

Bacteriological Examination of a Sample of Water Received on 29/10/51 from Eastbourne Waterworks Company, Labelled Friston Pumping Station

I day at 37° C. 2 days at 37°C. 3 days at 20°C.

Number of Colonies developing on Agar	0 per ml.	0 per ml.	2 per ml.
	Present in	Absent from	Probable Number
Presumptive Coliaero- genes Reaction	-ml.	100 ml.	0 per 100 ml.
Bact. coli (Type 1)	-ml.	100 ml.	0 per 100 ml.
Cl. welchii Reaction	—ml.	100 ml.	

This sample is clear and bright in appearance and is of a high standard of bacterial purity. These results are indicative of a water which is wholesome in character and suitable for public supply purposes.

(Signed) ROY C. HOATHER.

5th November 1951.

The Counties Public Health Laboratories, 66 Victoria Street, London, S.W.1.

BACTERIOLOGICAL EXAMINATION OF A SAMPLE OF WATER RECEIVED ON 2/1/52 FROM EASTBOURNE WATERWORKS COMPANY, LABELLED HOLYWELL PUMPING STATION

I day at 37°C. 2days at 37°C. 3 days at 20°C.

Number of Colonies developing on Agar	0 per ml.	0 per ml.	0 per ml.
	Present in	Absent from	Probable
Presumptive Coli-			Number
aerogenes Reaction	-ml.	100 ml.	0 per 100 ml.
Bact. coli (Type 1)	-ml.	100 ml.	0 per 100 ml.
Cl. welchii Reaction	-ml.	100 ml.	

This sample is clear and bright in appearance and conforms to the highest standard of bacterial purity. These results are indicative of a water which is wholesome in character and suitable for public supply purposes.

(Signed) ROY C. HOATHER.

7th January 1952.

(c)

(b)

The Clinical Research Association Ltd., Watergate House, York Buildings, W.C.2. and

South Road, Haywards Heath, Sussex.

To Medical Officer of Health,

Avenue House, The Avenue,

Eastbourne, Sussex. (Eastbourne Borough). 25/6/51.

Laboratory Report No. 12827.

CHEMICAL AND BACTERIOLOGICAL WATER REPORT

The sample of water marked Town Main has been examined with the following results:

				Parts per	Grains per
1.	CHEMICAL			100,000	Gallon
	Total solids (dried at 120°C	C.)		28.0	19.6
	Combined chlorine (as Cl)			3.4	2.4
	equivalent to Sodium Chlo		NaCl)	5.6	3.9
	Nitric Nitrogen (Nitrates)			0.44	0.31
	Nitrous nitrogen (Nitrites)			nil	nil
	Ammoniacal nitrogen			0.0004	0.0003
	Albuminoid nitrogen			0.0004	0.0003
	Oxygen absorbed in 4 hour	rs at 2	7°C.	0.004	0.003
	Lead or Copper			nil	nil
	Temporary hardness				
	(equivalent to CaCO3)			17.0	11.9
	Permanent hardness				
	(equivalent to CaCO3)	1.0		4.0	2.8
	Total hardness				
	(equivalent to CaCO3)			21.0	14.7

2. Bacteriological

The above results show this water to be of good quality. The bacteriological examination shows that the water is quite safe for drinking and domestic purposes.

> (Signed) R. S. RALPH, M.R.C.S., D.P.H., Laboratory Director.

PUBLIC BATHS.

(a) SLIPPER BATHS.

Old Town. Twelve baths are provided for males and five for females. The numbers using these baths during the last four years were:

1948	 	16,880
1949	 	17,041
1950	 	15,768
1951	 	12,499

Seaside. Thirty baths are provided, 15 for males and 15 for females. The numbers using these baths over the last four years were:

1948	 	35,416
1949	 	37,095
1950	 	34,415
1951	 	25,635

Devonshire. Eighteen baths are provided, 9 for males and 9 for females. The numbers using these baths during the last four years were:

1948	 	8,509
1949	 	7,785
1950	 	7,491
1951	 	8,176

(b) SWIMMING BATHS.

The Old Town Bath is under the control of the Public Health Committee, and the Devonshire Baths are the responsibility of the Entertainments Committee. Sampling of the water and general supervision with regard to safety from the Public Health point of view is carried out in all three baths by the Public Health Department. Routine sampling is carried out every

two weeks and additional samples are taken as and when considered advisable. The Old Town Bath is worked on the break-point chlorination principle, whilst the marginal method of application is in use at the Devonshire Baths.

Old Town Bath. The installation of a modern chlorination and filtration plant was completed on 29th June, and the bath functioned from 24th May to 10th October. The numbers using this bath were:

Adults 264
Children 2,362
Organised school parties .. 8,907

11,533 (11,521 in 1950)

Devonshire Baths. The smaller of the two swimming baths was open all the year round and during the summer months was used for the most part by children in attendance at the Local Authority Schools. The larger bath was open from May to September. Sea water is used in both baths and there is a continuous turnover, filtration, chlorination and heating system. The baths were used to the following extent:

Adults ... 14,198
Children ... 40,568
Organised school parties ... 27,353
Youth organisations ... 1,369
83,488 (73,978 in 1950)

SEWERAGE AND DRAINAGE.—The method of sewage disposal in Eastbourne is by discharge into the sea after screening. In the case of some 171 properties in the eastern part of the Borough and 40 smallholdings and 2 farm cottages on the downs, disposal is to septic tanks or cesspools, otherwise drainage to the sewerage system is in general operation.

Public Cleansing.—Public cleansing and scavenging is the responsibility of the Borough Engineer. Storage of house refuse in portable dustbins generally obtains.

Sanitary Inspection.—Visits and inspections of various premises and places were made by the Sanitary Inspectors as follows:

General		Food and Food Premises	
Complaints investigated	903	Dairies and Milk Purveyors	158
Schools	70	Ice Cream Manufacturers	260
Camping Sites and Moveable		Ice Cream Retailers	385
Dwellings	148	Bakehouses	89
Places of Public Entertainment	49	Butchers' Shops and Wholesale	
Public Baths	215	Depots	318
Drainage and Plumbing Works	1185	Fish Shops	121
Visits in connection with :-		Fried Fish Shops	42
(i) Land Charges Enquiries	408	Fruiterers	120
(ii) Timber Certificates	53	Other food shops and stores	594
Stables and Piggeries	104	Hotel and Restaurant Kitchens	584
Smoke Observations	31	Slaughterhouses	455
Knackers' Yards	30	Proposed Catering Establish-	
Factories	260	ments	4
Workplaces	54	Food Samples taken	612
Outworkers Premises	130	Merchandise Marks Act and	
Shops (Sect. 38, Shops Act,		Orders	57
1950)	132	Infectious Disease Investigation	
Rag Flock Act, 1951	36	Visits and Enquiries	458
Re-visits	913	Houses Disinfected	131
Housing			
Dwelling Houses, (Housing		Rodent Control	
Acts)	366		
Dwelling Houses (Public	500	Visits and Inspections	421
Health Act)	372		
		Miscellaneous Visits	1988
Verminous Houses	79	Miscellaneous Visits	1988

STATUTORY NUISANCES, ETC.— By means of informal approach to the persons concerned it was, in the majority of cases, possible to have remedied insanitary conditions, nuisances, defective drains, defective dustbins, etc.

The Public Health Committee has delegated powers to act as the local authority for the sections of the Public Health Act dealing with insanitary conditions, movable dwellings and camping sites.

The following statutory notices were served under the Public Health Act, 1936:

To repair defective drains, etc. (Section 39)	 4
To provide dustbins (Section 75)	 12
To abate nuisances (Section 93)	 8

In default three dustbins were provided by the Council and the cost recovered from the company responsible. One notice relating to a nuisance arising from excessive dampness was the subject of an application to the Magistrates Court for a "Nuisance Order." The Court adjourned the application sine die on the owner giving an undertaking to carry out the works required; these works have since been completed. A notice referring to a nuisance arising from the dilapidated condition of a bomb-damaged building and accumulations of

refuse therein was withdrawn as a result of action being taken by the Council as the Highways Authority. In the remaining nineteen cases the notices were complied with.

CAMPING SITES AND MOVEABLE DWELLINGS.—The eight applications for licences to station single caravans were all granted. Of the six licences issued to persons wishing to use land as camping sites, one was for the use of land at the foot of the Downs as a tented camp for organised bodies and five were from persons wishing to receive caravans on to their land.

The licences, in all cases, were granted so far as the provisions of Section 269 of the Public Health Act, 1936, are concerned, subject to certain definite conditions as to density, water supply, disposal of waste matter, etc. The sites were visited from time to time during the period of the licences, and in no case was there any cause for complaint.

Schools.—The sanitary arrangements, and the conditions under which food was prepared and served in the local authority schools were kept under observation.

Shops Acts.—This department is only concerned with Section 38 of the Shops Act, 1950, which lays down requirements as to ventilation, temperature, sanitary conveniences, washing facilities, etc. The sanitary inspectors made 132 visits to ensure that the provisions of the section were being complied with.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951.—Earlier Rag Flock Acts dealt only with rag flock. On the coming into force of the new Act on November 1st the provisions as to cleanliness of materials and bedding were extended to other types of filling materials, including cotton, jute, hair, feathers, kapok, etc. A standard of cleanliness for all these materials is now prescribed in the Rag Flock and Other Filling Materials Regulations, 1951, made under the new Act. Persons using the materials referred to for the purpose of upholstering, etc., are now required to have their premises registered by the local authority. There is provision in the Act for the submission of samples of filling material to a prescribed analyst for examination as to cleanliness. The five applications for the registration of premises were all granted. The provisions of the Act do not apply to premises where remaking or reconditioning of any article only is carried out, provided no new filling material is added. It is hoped that these measures will contribute considerably to an improvement in the hygienic standards of upholstery and bedding.

FACTORIES ACTS, 1937 AND 1948.—The Local Authority is responsible for Sections one to four and six to seven of the Factories Act, 1937, but only in those instances where no mechanical power is used. At factories where mechanical power is used, Section 7 is the only one enforceable by the local authority.

Many premises, such as butchers' shops, dairies, ice cream premises and bakehouses which come within the wide definition of "factory" are visited primarily in connection with the preparation and sale of food.

The premises referred to under (iii) of the first of the following tables are mainly those where building or engineering works are in progress, and so long as men are employed on the site they come under the heading of "factories."

In all cases where defects were found the matters complained of were put right on informal approach.

FACTORIES ACTS, 1937 and 1948

1. Inspections for purposes of Provisions as to Health.

D	Number	Number of		
Premises	on Register	Inspec- tions		Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authori- ties	141	147	7	_
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	225	127	5	_
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding Out-workers' premises)	66	32	_	_
TOTAL	432	306	12	- 11

2. Cases in which Defects were Found.

(If defects are discovered at the premises on two, three or more separate occasions they are counted as two, three or more "cases").

	Numi	Number of			
D. C. L.	P	Remedied	Referred		cases in which
Particulars	Found	Remeatea	To H.M.	By H.M. Inspector	prosecutions were instituted
Want of cleanliness (S.1)	9	9	_	2	_
Overcrowding (S.2) Unreasonable temp-	-	-	-	-	
erature (S.3) Inadequate ventilation	_	-	-	-	-
(S.4) Ineffective drainage of	1	2	-	-	-
floors (S.6) Sanitary Conveniences (S.7)	_	-	-,	-	-
(a) Insufficient (b) Unsuitable or	_	1	-	-	-
defective (c) Not separate	6	5	-	1	- T
for sexes Other offences against the Act (not includ- ing offences relating) -	-	_	-	_
to Outwork)		_	=	_	_
TOTAL	16	17	_	3	_

PART VIII OF THE ACT—OUTWORK (SECTIONS 110 AND 111)

	Section 110				
Nature of Work	No. of Out- Workers in August list required by Section 110 (1) (c)	No. of cases of default in sending lists to the Council			
Wearing \ Making, etc.	74	_			
Apparel S Cleaning and washing	2				
Household linen	3				
Lace, lace curtains and nets	1	_	-		
Curtains and furniture hangings	17	_	_		
Furniture and upholstery	5	_	_		
Umbrellas, etc	1	_	_		
Carding, etc. of buttons, etc	1	_	-1		
Basket making	1	_	-		
TOTAL	103				

Section 111.—There were no instances found of work being done by outworkers in unwholesome premises.

HOUSING

In the early part of the year a report was submitted to the Public Health Committee on a number of old properties which by reason of age and disrepair had reached the stage when it was felt that they were no longer fit for human habitation. Later on official representations were made in respect to two Clearance Areas, one comprising four cottage properties and the other nine bungalows. As the owners lodged no objection to the Orders, local Enquiries were not held. The Clearance Orders made were confirmed by the Minister of Housing and Local Government. The demolition of the thirteen properties will necessitate the rehousing of fourteen family units.

Under Section 11 of the Housing Act, 1936, three properties were dealt with. In the case of two houses an undertaking that they would not be used for habitation until rendered fit to the satisfaction of the Council was accepted. The owner of the remaining property submitted a list of works which were in due course carried out and the house was made fit.

Though building materials were more readily obtainable, the repair and maintenance of houses not being in all respects reasonably fit for habitation again presented many problems. The high cost of repairs to property, particularly having regard to the low rents received, continues to place an unreasonable burden on owners of this type of property. It is, however, satisfactory to note from the following table that the Inspectors were, without formal action, successful in getting some 501 properties made in all respects fit.

Dwelling houses inspected during the year (under the Public	
Health and Housing Acts)	844
Dwelling houses found to be unfit for human habitation	17
Houses found not to be in all respects reasonably fit for habita-	
tion	563
Defective dwelling houses rendered fit in consequence of in-	
formal action	501
Notices served under Section 9, Housing Act, 1936	10
Houses rendered fit after service of formal notice:	
1. By Owners	8
2. By Local Authority	1
Formal notices under Public Health Act	8
Houses in which defects were remedied after service of formal	
notice:	
1. By Owners	5
2. By Local Authority	-
Houses in respect of which Demolition Orders were made	-
Houses demolished	
Dwelling houses not demolished as a result of undertaking by	
owners under Section 11	

Undertakings, made in accordance with Section 11, cancelled,	
the house having been rendered fit	1
Dwelling houses occupied under Licence (Defence Regulation	
68A)	2
Closing Orders made in respect of underground rooms	1

Housing Act, 1949.—In accordance with the provisions of this Act, four applications were received for Improvement Grants. The improvements in each case took the form of the provision of a domestic hot water system and a bath, either in a room adapted for use as a bathroom, or in a room built for that purpose. The costs of the proposed works were £300, £214, £160 and £114 respectively. All four applications were approved by the Minister and grants up to fifty per cent will be made as the works proceed. The receipt by the owner of a grant under this Act necessitates the owner giving an undertaking that certain conditions will be observed for a period of 20 years, and that these conditions shall be entered in the Register of Local Land Charges.

APPLICANTS FOR HOUSING ACCOMMODATION.

Total number of outstanding applications:	at 31/12/51	1,373
	at 30/4/52	1,206

Analysis of Applications:

Persons living alone			37
Married couples-no children			454
1 child			431
2 children			190
3 children			55
4 children			23
5 children	64.		9
6 children			4
7 children			1
8 children			1
9 children			_
10 children			1
	To	TAL	1,206

(Of this total, 275 are "deferred" applications)

Three hundred and thirty-five families are housed in requisitioned properties.

Number of family units re-housed during 1951 205

RODENT CONTROL

All the rodent control work was carried out in accordance with the requirements of the Prevention of Damage by Pests Act, 1949, and is broadly divided into two types of treatment, namely, surface and sewer.

Three whole-time Rodent Operators were employed, and they carried out their duties under the supervision of the Senior Sanitary Inspector, who is the appointed Rodent Officer.

The method of treatment for surface infestation normally takes the form of pre-baiting followed by poison baiting, but in exceptional cases, trapping and gassing was resorted to. Recently a method of treatment using a poison known as "Warfarin" has been recommended, but it has not been in use for a sufficiently long period to enable a comprehensive assessment of its value to be made. The work carried out in connection with surface treatment involved some 5,870 visits by the three operators. There was, at all times, full co-operation between the occupiers of premises concerned and the staff of the department, and as a result formal action was at no time necessary.

The results of surface treatment are shown in the following table:

	TYPE OF PROPERTY				
	Local Authority	Dwelling Houses	Agri- cultural	All other (including Business & Industrial)	Total
Total number of properties in Local Authority's Dis- trict	110	16,738	66	2,942	19,856
Number of properties in- spected by the Local Autho- rity during 1951 as a result of: (a) notification	23	380	8	71	482
(b) otherwise	12	951	14	229	1,206
3. Number of properties under (2) found to be infested by rats	Major	4	3	2	9
	Minor 13	203	. 11	122	349
4. Number of properties (under 2) found to be seriously infested by mice	3	10	1	33	47
5. Number of infested pro- perties (under 3 and 4) treated by the Local Autho- rity	16	215	12	155	398
6. Number of notices served under Section 4: 1. Treatment	_	_	_		_
2. Structural Works (e.g. Proofing)	_	_	_	-	
TOTAL	-	_	200	-	_
7. Number of cases in which default action was taken by Local Authority follow- ing issue of notice under Section 4	-	-	-	-	-
8. Legal Proceedings	_	-	-	-	-
9. Number of "block" control so	hemes carrie	d out — 23			

Sewers were dealt with by maintenance treatments in the months of May and November, when the manholes were pre-baited and poison baited. It was again found that roughly two-thirds of the sewers in the Borough were clear of rats, but that the hard core of infestation still persisted in the remaining sections of the sewers. The treatment carried out in the infested sections was intensified, and it is hoped that further treatments will minimise the infestation. The results of the treatments carried out in November 1950 and May and November 1951 are as follows:

(a)	Manholes baited	Nov. 1950 427	May 1951 526	Nov. 1951 511
(b)	Showing medium to heavy infestation	144 (34·4%)	78 (14.8%)	93 (18·2%)
(c)	Showing light infestation	123 (28 · 8%)	194 (36.8%)	132 (25 · 8%)
(d)	Total showing in- infestation $((b)\&(c))$	267 (62.5%)	272 (51-7%)	225 (44.0%)

Close co-operation was maintained with the officers of the Infestation Control Division of the Ministry of Agriculture and Fisheries. The Council has agreed to comply with the conditions and method of treatment prescribed by the Ministry, and a grant of fifty per cent based on the net overall cost of rodent control is claimed. No charge is made for the disinfestation of private dwelling houses, but in the case of business premises a charge, based on the actual cost, is payable.

INSPECTION AND SUPERVISION OF FOOD

Much of the time of the Sanitary Inspectors was devoted to the inspection of food premises and catering establishments, with a view to seeing that they complied with the requirements of the Food and Drugs Act, the Ice Cream (Heat Treatment, etc.) Regulations, and the Milk and Dairies Regulations.

In general, it was found that persons dealing with the production and distribution of food had an increasing regard for the necessity for a good standard of hygiene, and in no premises were conditions found which necessitated formal action under any legal enactment. In the case of the few who were reluctant to maintain reasonable standards it was necessary to maintain closer supervision. On the whole, however, it can be stated that the officers of the Department received a very reasonable degree of co-operation from all persons in the food trades.

At the beginning of the year the Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950, came into operation. The object of this Act is to consolidate the law relating to milk, and it also gives additional powers to the Ministers of Food and Health to make Regulations concerning the various aspects of control of milk. Part of the Food and Drugs Act, 1938, part of the Milk and Dairies Act, 1944, the whole of the Milk (Special Designations) Act, 1949 and certain provisions of the Agricultural Acts of 1937 and 1949 have been repealed.

For the first time, as a result of the Food Standards (Ice Cream) Order, 1951, a food value standard was prescribed for ice cream.

MILK AND DAIRIES REGULATIONS, 1949

These Regulations require that dairies and persons supplying milk shall be registered with the Local Authority. Shops where milk is sold only in the unopened containers in which it is received are not included in the definition of "Dairy": the occupiers are therefore registered as "Distributors." The following premises and distributors were registered:

Dairies		 	 10
Distributors	,	 	 24

Since the coming into operation of the various Milk Regulations of 1949, the responsibility of Local Authorities has been more particularly in relation to the safety of milk in distribution, as opposed to the production side, which is in the hands of the National Agricultural Advisory Service. In this connection, close co-operation is maintained with the Central Government Officers working in the field of production. Regular and frequent samples were taken to ensure that the fat and non-fatty solids content were satisfactory and to check that the milk had been effectively pasteurised and handled under satisfactory conditions. In addition, and perhaps the most important factor of all, a number of samples were taken to ensure that the supply was not infected with the germs of Tuberculosis.

SAMPLING

SALE OF MILK REGULATIONS

Of the forty-eight samples submitted to the Public Analyst, two were milk which was sold as "Channel Island Milk."

The fat, and milk solids other than fat, content of each of the samples were as shown:

	Fat %	Solids other than milk fat %
Sale of Milk Regulations Requirements	3.00	8 · 50
Samples taken in first quarter	3.42 3.51 3.50 3.56 3.61 3.60 3.50 3.61 3.53 3.50	8·51 8·50 8·43 8·51 8·47 8·55 8·58 8·54 8·62 8·65
	3·59 3·49 3·49	8·50 8·61 8·61
Average of samples in first quarter	3 · 53	8 · 54
Samples taken in second quarter	3·45 3·33 3·40 3·42 3·50 3·60 3·61 3·66 3·32 3·50	8·57 8·43 8·52 8·66 8·60 8·52 8·52 8·55 8·63
Average of samples in second quarter	3 · 47	8 · 55
Samples taken in third quarter	3·52 3·49 3·20 3·35 3·24 3·31 3·29 3·42 3·51 3·65 3·49 3·75 3·71 3·56 3·70	8·64 8·60 8·76 8·64 8·62 8·63 8·67 8·58 8·60 8·70 8·51 8·65 8·72 8·76 8·71
Average of samples in third quarter	3.48	8.70

	Fat %	Solids other than milk fat %
Samples taken in fourth quarter	3.68 3.65 3.71 3.82 3.80 3.85 3.65 4.10	8·74 8·76 8·73 8·79 8·84 8·72 8·61 8·65
Average of samples in fourth quarter	3 · 78	8.73
Average for the whole year	3.55	8.61
Two samples of Channel Island Milk	5·15 5·66	9·15 8·88

In the early part of the year, three samples failed to reach the required standard of solids, other than milk fat, two having a deficiency of 0.8 per cent and one a deficiency of 0.3 per cent. The samples in question were taken from a bulk supply received from a number of herds with varying breeds of cattle. It would appear that the trouble was due to shortage of first class cattle food as, with the advent of Spring and consequent better and more natural feeding facilities, the trouble disappeared.

MILK (SPECIAL DESIGNATION) REGULATIONS

With the exception of comparatively small quantities of farm bottled milk sold under the designation "Tuberculin Tested," practically the whole of the milk sold in Eastbourne was pasteurised. The method of pasteurisation in use is the high temperature short time one, which, under the Regulations, requires that the milk be brought to a temperature of at least 161° F., to be maintained at that temperature for fifteen seconds, and then be immediately cooled to a temperature of 50° F. or less. Constant supervision of the one dairy premises where pasteurisation was carried out was maintained and samples of the treated milk were taken at frequent intervals. These samples were sent to the Public Health Laboratory at Brighton, where they were subjected to the methylene blue test for cleanliness and keeping quality, and to the phosphatase test which is the guide to the adequacy of heat treatment. The results were as follows:

Class of Milk Samples	Associate Trans	Num	ber of San	nples	
Class of Mur	Tested	Appropriate Tests	Passed	Failed	Void
Pasteurised	113	Phosphatase Methylene Blue	113 106	=	*7
Tuberculin Tested	27	Phosphatase Methylene Blue	27 27	=	=
(Pasteurised) Sterilised	2	Turbidity Test	2	_	_

*Note.—On days when the atmospheric shade temperature exceeds 65° F., the methylene blue test is regarded as void.

Sterilised milk is milk which has been filtered or clarified, homogenised and heated to and maintained at a temperature of not less than 212° F. for such a period as to ensure that it will comply with the Turbidity Test. Milk shall be treated in bottles in such a manner that, on completion of the treatment, the bottles shall be sealed with an air-tight seal.

There does not appear to be a large sale of this type of milk in Eastbourne and, in fact, it was only during the last few months of the year that one dairyman commenced to sell it.

Examination of Milk for the Presence of M. Tuberculosis

Samples for the presence of the germ of Tuberculosis were taken from the milk of various producers as it arrived at a local dairy. Forty-two such samples were sent to the Public Health Laboratory at Brighton. Forty of the samples were negative for Tuberculosis, one sample was positive and in another the result was inconclusive as the guinea pig injected with the centrifugalized deposit of the sample died within four days. Details of the milk which gave a positive result were sent to the Divisional Veterinary Officers of the Ministry of Agriculture and Fisheries. On investigation of the herd in question it was found that three cows had gone dry and no evidence of Tuberculosis was found in the remainder. After calving, the milk of the three cows referred to was again examined, and in one case a positive result was found; the infected animal was slaughtered under the Tuberculosis Order.

MANUFACTURE AND SALE OF ICE CREAM

There were four new registrations in connection with retail sale, and at the end of the year the following premises were registered under Section 14, Food and Drugs Act, 1938:

(a)	Wholesale Manuf	acture		 1
(b)	Manufacture and	Retail	Sale	 16
(c)	Retail Sale			 110
(d)	Storage only			 1

Two hundred and fifty-three samples were submitted to the Public Health Laboratory for examination by the Methylene Blue Test. The results, which are shown on the following table, on the whole indicate that a reasonably high standard of cleanliness had been maintained in manufacture, handling and distribution. The persons concerned were always notified of the result—the satisfactory ones were encouraged to keep up a high standard and in the case of unsatisfactory samples, a discussion of the findings with the person or persons concerned was helpful in tracing the cause of the trouble.

The samples submitted were graded as follows:

Grade 1	 	 137
Grade 2	 	 61
Grade 3	 	 27
Grade 4	 	 28

There is no legal bacteriological standard for ice cream, but provisional grades suggested by the Minister of Health as a guide are:

0	Frade		Time taken to reduce Methylene Blue
	1		 4½ hours or more
	2	 	 2½ to 4 hours
	3	 	 ½ to 2 hours
	4	 	 Less than ½ hour

Samples falling into Grades 1 or 2 are considered to be satisfactory When a series of samples from the same source falls within grades 3 or 4, this may be regarded as an indication of faulty treatment or handling. It will therefore be seen that 92.09 per cent of the samples taken were deemed to be satisfactory.

On March 1st, the FOOD STANDARDS (ICE CREAM) ORDER, 1951, came into operation. This Order required that ice cream shall contain not less than 5 per cent fat, 10 per cent sugar and $7\frac{1}{2}$ per cent milk solids other than fat. Certain departures from these standards were allowed where the ice cream contained fruit, etc.

In connection with this Order, twenty-four samples were submitted to the Public Analyst. Twenty-one were found to be above the prescribed standard and three fell below the standard of fat content. The fat content ranged from 3 per cent to 15.5 per cent, the non-fat solid content from 15.6 per cent to 29.3 per cent and the total solids from 22.5 per cent to 40.6 per cent.

1 Sample had a fat content of	15.5%
13 Samples had a fat content of from	10% to 15%
7 Samples had a fat content of from	5% to 9.9%
3 Samples had a fat content of less than	5%

The three unsatisfactory samples were deficient in fat to the extent of 40 per cent, 36 per cent and 34 per cent. In all three cases a warning letter was sent to the Vendors.

SLAUGHTERING AND MEAT INSPECTION

The slaughtering of animals for human consumption was again carried out at the Ministry of Food Slaughterhouse at Langney. In all, some 14,398 animals were dealt with. The premises used were originally farm buildings which, despite certain adaptations, leave much to be desired and certainly are not good enough for a kill of this magnitude. The long delayed further adaptations and improvements are at last in hand. Meat inspection is a most important Public Health service, and I would like to pay tribute to the work of the Inspectors. The examination they carry out is a most detailed one of all carcases and all organs; it at all times of the year involves attendance during evenings as well as during the day and, at the periods of peak slaughtering, involves very long hours.

With regard to Tuberculosis in animals, it will be noted that the number of whole cow carcases condemned was 17, and that the total percentage of cows found to be affected was 23.4. It will be seen from the table on page 38 that there has been a most welcome overall decline in the percentage of bovines found on slaughter to be affected with tuberculosis.

CARCASES INSPECTED AND CONDEMNED

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	3,667	1,111	1,826	5,920	1,874
Number inspected	3,667	1,111	1,826	5,920	1,874
Diseases other than Tuberculosis: Whole carcases condemned	2	7	4	7	10
Carcases of which some part or organ was condemned	1,375	598	4	343	101
ber inspected affected with disease other than tuberculosis	37.6	54 · 5	-44	5.90	5.90
Tuberculosis: Whole carcases condemned Carcases of which some	7	17	2		4
part or organ was con- demned	276	243	11		25
ber inspected affected with tuberculosis	7.70	23 - 4	.71		1.50

NUMBER OF CATTLE AND CALVES AT THE SLAUGHTERHOUSE FOUND TO BE AFFECTED WITH TUBERCULOSIS

Cattle excluding Cores Coves Per- Coves Per- Coves C		Per- centage of total kill	0.69	1.20	2.00	0.11	0.31	0.50	1.03	0.46	0.47	0.23	0.40	0.37	0.71
Cartle excluding Coves Coves Per- Whole Per- of all Per- of all Centage Con- of total Bourines Con- of total Bourines Con- of total Bourines Con- of total Bourines 10 167 15.42 95 677 52.60 38.3 36.3	Calves	Part Carcase Con- demned	41 70	18	13	2	3	7	23	10	6	3	7	7	11
Cattle excluding Coves Whole Carcase Carcase Carcase Con- Con- Con- Con- Con- Con- Con- Con-		Whole Carcase Con- demned	7.3	4	2	1	2	1	1	1	1	1	1	1	2
Cattle excluding Coves Per- Whole Per- Carcase Whole Part Con- Con- demned Per- Con- Con- demned Whole Part Con- Con- Con- demned Per- Con- Con- Con- Con- demned Whole Part Con- Con- Con- Con- Con- Con- demned Per- Con- Con- Con- Con- Con- Con- Con- Con	Per-	of all adult Bovines	36.3	20.1	25.4	22.7	26.5	25.8	21.0	25.8	17.2	17.2	16.6	13.9	11.4
Cattle excluding Coves Whole Carcase Carcase Con- Con- Con- Con- Con- Con- Con- Con- Con- Con- Con- Con- Of total Con- Con- Con- Con-		Per- centage of total kill													
Cattle excluding Coves Whole Carcase Corcase Con- Con- Con- Con- Con- Con- Con- Of total demned demned kill 10 167 15.42 20 258 13.01 7 160 14.25 3 195 11.72 7 198 13.63 10 189 13.53 10 189 13.63 8 239 13.63 10 324 13.33 10 307 12.63 13 334 9.28 13 334 9.28	Cows	Part Carcase Con- demned	677	301	277	346	321	387	343	337	245	211	316	307	243
Cattle excluding C Whole Part Carcase Con- Con- demned demned 10 167 20 258 17 239 7 198 10 324 8 239 10 324 8 233 10 334 7 5 298 113 334		Whole Carcase Con- demned	95	53	48	41	37	22 .	23	22	15	16	28	21	17
Cattle e Whole Con- demned 10 20 17 7 7 10 8 8 10 10 5 113	Cores	Per- centage of total kill	15.42	12.64	14.25	11.72	15.50	13.63	13.24	13.39	10.95	12.63	10.41	9.28	7.70
	excluding	Part Carcase Con- demned	167	239	160	195	198	189	239	324	233	307	298	334	276
Year 1938 1940 1941 1944 1945 1946 1946 1949 1949	Cattle	Whole Carcase Con- demned	10	17	7	3	7	10	8	10	8	10	2	13	7
		Year	1938	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951

INSPECTION OF OTHER FOODS

The following list of food stuffs found to be unfit for human consumption gives some indication of the extent and varied nature of the work done in this connection:

Bacon (lbs.)	 23	Meat, 4 lb. cans		133
Baking Soda (pkts.)	 14	Meat, 6 lb. cans		58
Biscuits (lbs.)	 22	Meat and Offal (lbs.)		606
Breakfast Cereals (pkts.)	 258	Meat Pies		130
Butter (lbs.)	 11/2	Meat Products (lbs.)		698
Cake (lbs.)	 72	Margarine (lbs.)		141
Cake Mixtures (pkts.)	 296	Milk (cans)		684
Cheese (lbs.)	 171	Mincemeat (cans)		4
Cheese, imported (pkts.)	 204	Mustard (cans)		9
Chestnut Flour (pkts.)	 3	Oats (lbs.)		3
Chicken (tins)	 7	Olive Oil (botts.)		9
Chocolate (lbs.)	 31	Paste (Meat and Fish) (jars)		886
Chocolate Spread (pkts.)	 24	Peaches (trays)		25
Coffee Essence (botts.)	 2	Peel (lbs.)		30
Cordials (botts.)	 6	Pickles (jars)		16
Custard Powder (pkts.)	 164	Potatoes (lbs.)		168
Crabs (Stones)	 5	Poultry (lbs.)		56
Eggs	 342	Puddings (tins)		3
Essences (botts.)	 160	Pudding Mixtures (pkts.)		145
Figs (lbs.)	 48	Rennet (botts.)		60
Fish Cakes	 72	Rice (lbs.)		5
Fish (cans)	 138	Sago (pkts.)		17
Fish, dried (stones)	 57	Salad Cream (botts.)		261
Fish, wet (stones)	 117	Salt (pkts.)		78
Flour (lbs.)	 394	Sauces (botts.)		29
Fruit (cans)	 692	Sausages (lbs.)		3
Fruit, dried (lbs.)	 36	0 ()		97
Fruit (jars)	 96			238
Fruit Juice (cans)	 14	Soup (cans)		
Fruit Puddings (cans)	 6	Spaghetti (cans)	::	22
Ham (417 cans) totalling lbs.		Sponge Cakes		3
Herb Beer (botts.)	 70	Sugar (lbs.)		160
Honey (jars)	 1	Sweets (lbs.)		29
Jam and Marmalade (lbs.)	342	Sweet Fat (lbs.)		643
Junket (botts.)	4	Syrup (tins)		2
Lemon Cheese (jars)	2	Table Jellies		17
Macaroni (lbs.)	68	Tea (lbs.)		31/2
Meat, 1 lb. and less (cans)	410	Vegetables (cans)		595
Meat, 2 lb. cans	 174	Vincent (bette)		1
, 2 101 01113	 	vinegar (botts.)		1

It is interesting to note that of the large quantity of canned ham and other meats found to be unfit practically all was imported.

SAMPLING OF FOOD AND DRUGS

Samples of food and drugs were submitted to the Public Analyst as follows:

		mber mined	Number Adulterated, etc.		
	Formal	Informal	Formal	Informal	
Aspirin		1	_	_	
Bread	_	1	_	_	
Butter and Margarine	6	3	_	_	
Cakes	2	2	_	-	
Cake and Rissole Mixture	1	1	-	-	
Cheese and Cheese Spread	_	2	_	-	
Cider	-	1		-	
Cocoa	1	-	-	-	
Cornflour	1	-	-	_	
Cream Powder	1	_	-	-	
Flavouring	_	2	-	-	
Flour	1	1	-	-	
Gelatine	_	1	-	-	
Glace Cherries, Stuffed Dates and					
Mixed Peel	1	2	-	-	
Ground Almonds and Almond	-			1 3 10	
Paste	2	1	_	-	
Ground Arrowroot	1		_	-	
Ground Nutmeg	-	1		-	
Ground Rice and Tapioca	2	1	_		
Ice Cream	24	2	3	-	
Jam and Mincemeat	2	1	-	-	
Jelly	1	-	100	-	
Lemonade Powder	1	_	_	-	
Milk	48	1	3	-	
Milk Whipping Compound		1		-	
Mint Jelly		1			
01. 0.1		1		1	
		1		1	
Parsley and Thyme	4/11/03	1			
Paste	1	1			
Pea Flour	1	1			
Pepper Potato Crisps		1			
Pudding Mixture	2	1			
Orange Crush	2	1			
Salad Cream	THE REAL PROPERTY.	1			
Salmon Spread		1			
Sausages, Sausage Meat, etc	15	7		4	
C	13	4			
Sauces	1	-		1	
Sodium Bicarbonate	1		-		
Soup	î	2			
Spirits	14		-	_	
Sweets		7			
Tea	2		_	_	
Veal and Ham Roll	ī	V 200	_		
Vinegar	1	1	_	_	
	-				
Totals	134	56	6	5	

Of the 190 samples submitted to the Public Analyst, adverse reports were received on eleven. The three samples of milk and the three of ice cream have already been referred to. The unsatisfactory sample of olive oil was found to be slightly rancid and the retailer in question surrendered for destruction the remainder of his stock of this substance. The Vendors of the four samples of sausages and sausagement found to be deficient in meat content were sent strong warning letters; repeat samples in all four cases were reported to be genuine.

FOOD POISONING

Only one case of suspected food poisoning was notified. Salmonella Typhi Murium was isolated from the stools.

INFECTIOUS DISEASES

The total number of cases notified was forty-one in excess of the notifications for the previous year. Measles accounted for sixty per cent of the notifications and Sonne Dysentery twenty-three per cent.

SUMMARY OF NOTIFICATIONS

	Males	Females	Total	Admitted to Isolation Hospital	Total Deaths
Scarlet Fever	17	12	29	25	4 4
Whooping Cough	28	29	57	3	_
Measles	258	218	476	14	
Erysipelas	3	1	4	_	_
Pneumonia	7	7	14	_	5
Food Poisoning	1		1	_	_
Acute Poliomyelitis:					
Paralytic	_	1	1	_	_
Non-Paralytic		2	2	2	1
Meningococcal Infection	1	1	2	_	
Puerperal Pyrexia	_	28	28	- 37	_
Dysentery	78	105	183	10	-
Totals	393	404	797	54	5

MONTHLY SUMMARY OF NOTIFICATIONS

1951	Scarlet Fever Diphtheria	Measles	Whooping Cough Erysipelas	Pneumonia Food Poisoning	A.P.M.—P.	100 4	Puerperal Pyrexia	Dysentery	Totals
January February March April May June July August September October November December	1 — 3 — 1 — 2 — 4 — — 2 — — 9 — — 1 — — — 1 — — — 1 — — — 1 — — — 1 — — — 1 — — — 1 — — — — 1 —	57 1 72 1 68 15 11 —	2 — 6 — 4 — 1 1 1 1 4 — 2 1 1 2 1 4 — 5 — 6 —	5 - 3 - 1	1	1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 1 3 3 3 3 3 3 3	93 17 32 17 17 17 2 — 2	229 134 67 88 106 82 21 21 9 11 17 12
TOTALS	29 —	476 5	7 4	14 1	1 2	2 2	28	183	797

SCARLET FEVER.—The sexes and age groups of the twenty-nine cases notified were:

Age Group		Male	Female
1-2	 	1	1
3-4	 	2	2
5-9	 	12	. 6
10-14	 	1	1
15-24	 	1	1
25 and over	 	_	1
		-	_
		17	12
		_	=

Acute Poliomyelitis.—A mother, aged twenty-four, was a case of paralytic Poliomyelitis, and her baby, aged seven months, was a non-paralytic case. The third case, a child aged thirteen years, was also non-paralytic.

WHOOPING COUGH.—Notifications of this disease were the lowest for the past six years. The sexes and age groups were:

Age Group			Male	Female
Under 1 y	ear		2	2
1-2			11	6
3-4			4	9
5-9			9	9
15-24			_	1
25 and ove	er		2	2
			_	_
			28	29
		4.17	_	- '

Measles.—The epidemic of this disease, which reached its peak in December 1950, continued over the first six months of the year under review. Four hundred and seventy-six cases were notified:

Age Group		Male	Female
Under 1 y	ear	 3	4
1-2		 39	38
3-4		 77	70
5-9		 95	73
10-14		 41	16
15-24		 1	6
25 and ove	er	 2	11
		250	210
		258	218
		_	-

Puerperal Pyrexia.—The Puerperal Pyrexia Regulations, 1951, came into operation on August 1st. The definition of this condition now is "any febrile condition occurring in a woman in whom a temperature of 100·4° F. or more occurred within fourteen days after child birth or miscarriage."

The causes of the pyrexia in the twenty-eight notified cases were

given as:

Ante partum hæmorrh	age		 1
Cracked nipples .			 3
Cold and sore throat .			 1
Influenza			 2
Engorged breasts .			 3
Flushed breasts .			 3
Magtitie			3
Offensive vaginal lochi			2
Dhlabisia			1
Ruptured perineum .			1
Retained products .			2
Swollen glands, right a	villa		 1
Urinary infection .	Allia		 1
Virus pneumonia .	•	•	 1
	·	ntin ft	 1
Cause unknown—had	two epne	eptic nts	 1
No apparent cause .			 2
			-
			28
			-

Sonne Dysentery.—The outbreak which commenced in December 1950 continued during the first five months of the year. Notifications were received:

Age Group		Males	Females
(1-5		 37	38
5-15		 27	29
15-45		 9	29
45-65		 3	5
Age not st	tated	 2	4
		_	_
		78	105
		_	_

Home visits in connection with infectious disease in children were made by the Health Visitors as follows:

MEASLES:		First Visits	Re-Visits
School Children		255	8
Pre-School Children		188	6
WHOOPING COUGH:			
School Children		16	3
Pre-School Children		27	13
OTHER INFECTIOUS ILLNES	SES:		
School Children		23	7
Pre-School Children		11	2

Scabies.—Twenty cases from twelve families received treatment at the Scabies Treatment Centre at the Avenue House Annexe.

	Number of			
	Cases	Attendances		
Adults	 12	22		
School Children	 6	13		
Pre-School Children	 2	2		
Totals	 20	37		

NOTIFICATION OF INFECTIOUS DISEASES 1900-1951

	Scarlet Fever	Diphtheria	Whooping Cough	Measles	Dysentery	A.P.M.	Enteric Fevers	Puerperal Pyrexia including Puerperal Fever	Acute and Influenzal Pneumonia	Erysipelas	Ophthalmia Neonatorum	Malaria	Encephalitis Lethargica	C.S.M.	Smallpox
1951 1950 1949 1948 1947 1946 1945 1944 1943 1942 1941 1940 1939 1938 1937 1935 1934 1933 1932 1931 1930 1929 1928 1927 1926 1925 1924 1923 1922 1921 1920 1919 1918 1917 1916 1919 1919 1919 1918 1917 1916 1919 1919 1919 1919 1919 1919	29 69 32 23 23 23 23 23 23 30 58 50 43 39 5 46 95 185 123 23 30 63 78 86 26 48 86 109 143 90 88 82 44 113 179 213 45 113 46 113 114 115 116 117 117 117 117 117 117 117 117 117		57 78 177 87 116 84 30 61 7 34 12 159 162	476 535 388 461 332 155 651 145 105 105	183 32 4 6 2 13 3 3 	3 1 3 2 7 2 2 1 1 1 1 1 1 1 1 2 2 1 1 3 1 1 1 1 1		28 4 11 11 11 12 13 14 10 16 14 11 11 12 13 14 11 11 12 13 14 15 16 17 18 19 19 19 19 19 19 19 19 19 19	14 11 32 37 19 58 34 39 27 41 12 36 38 37 40 47 11 55 67 47 27 55 67 47 47 47 47 47 47 47 47 47 47 47 47 47	4 9 15 4 7 2 5 12 4 14 7 13 15 16 19 18 25 20 13 12 19 12 13 16 16 19 18 25 16 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	-1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -			2 2 1 4 2	35 3 3

PUBLIC HEALTH BACTERIOLOGY

The following specimens were sent, some on behalf of general practitioners, to the Brighton Laboratory of the Public Health Laboratory Service:

Nose and Throat Swabs for	or K.L.	B. and H.S.	 88
Nose and Throat Swabs for	or H.S.		 40
Per-nasal Swabs for Whoo	ping C	ough	 5
Eye Swabs			 1
FAECES AND URINE:			
For Dysentery (Sonne)			 915
For Dysentery (Sonne) For other Organisms			 256

The following specimens for general practitioners and for the Public Health Department were examined at the Princess Alice Hospital Laboratory, which is an associated laboratory of the Public Health Laboratory Service:

MEDICAL PRACTITIONERS:

MEDICAL I RACITIONERS.			
Throat Swabs:			
For:	H.S		 23
	K.L.B		 20
	Vincents Angina		 18
Nasal Swabs:			
For:	H.S		1
	K.L.B		î
Faeces:	K.D.D.		•
For:	Dysentery		148
Blood:	Dysentery		 140
	D. 1 D 11 77		10
For:	Paul-Bunnell Test		 12
	Malaria		 1
	Agglutination reac	tions	 2
Urine:			
For:	Tuberculosis		 12
Cough Plate:			
For:	Whooping Cough		 2
Vaginal Swab:	1 0 0		
For:	Gonococci		1
PUBLIC HEALTH DEPARTMEN	TT:		
Throat Swabs:			
For:	H.S		 18
	K.L.B		 14
	Vincents Angina		5
Nasal Swabs:	· meento manama		
For:	H.S		18
roi.	K.L.B.		 14
F	K.L.D	• •	 14
Faeces:	-		
For:	Dysentery		 9
Blood:			
For:	Paul-Bunnell Test		 1

TUBERCULOSIS

Fifty-three cases of respiratory and eleven of non-respiratory tuberculosis were notified. Of these, thirty-six respiratory and ten non-respiratory were new cases not previously notified in any other district.

NOTIFICATION REGISTER

				espiratory	Total		
	Males	Females	Males	Females	Males	Females	
On Register, 1st January 1951	185	110	43	41	228	151	
Add:							
Notifications Transfers from other	16	18	5	4	21	22	
areas Posthumous Notifica-	9	8	-	1	9	9	
tions	_	2	1	_	1	2	
Returned to Eastbourne	4	2	_	_	4	2	
	_		_	-	_		
	214	140	49	46	263	186	
	_	-	_	_			
Less:							
Deaths:							
From Tuberculosis	11	12	1	_	12	12	
From other causes	1	-	1	-	2 23	_	
Left the town	21	22	2	3	23	25	
Arrested	6	6	1	3	7	9	
Diagnosis not Con-							
firmed	2	1	-		2	1	
Lost sight of	10	4	12	10	22	14	
	51	45	17	16			
	51	45	17	10	68	61	
Ou Provenn			1811	144	1		
ON REGISTER, 31ST DECEMBER 1951	163	95	32	30	195	125	

Age grouping of new cases notified (46) and transfers to the area (18):

()	Respiratory 1		Non-R	espiratory	Total		
	Males	Females	Males	Females	Males	Females	
Age Groups:							
Under 1 year	 _		-	-	_	_	
1 - 5 years	 -	_	-	_	-	_	
5 - 10 years	 1	_	-	_	1	_	
10 - 15 years	 -	_	1	-	1	_	
15 - 20 years	 _	4	_	1	-	5	
20 - 25 years	 3	7	1	1	4	8	
25 - 35 years	 5	3	-	2	5	5	
35 - 45 years	 4	6	3	_	7	6	
45 - 55 years	 4	3	-	-	4	3	
55 - 65 years	 4	3	_	1	4	4	
Over 65 years	 4	2	1	-	5	2	
	-	-	-	-	_	_	
	25	28	6	5	31	33	
	-	-	-	-		_	

Notifications, including Transfers, for the Years 1920-1951 (The last two columns give the total "new" cases annually).

			Nev	v Cases
	Respiratory M. F.	Non-Respiratory M. F.	Respiratory	Non-Respiratory
1951	25 28	6 5	36	10
1950	41 26	6 3	45	7
1949	48 44	9 9	39	16
1948	57 48	9 9 5	59	9
1947	42 31	7 4	36	10
1946	54 51	12 8	65	15
1945	38 35	12 11	43	15
1944	21 23	10 18	28	22
1943	16 19	6 7	26	12
1942	18 14	9 6	29	14
1941	29 14	9 6 7	33	11
1940	30 13		30	10
1939	22 22	11 4 6 5 12 7	29	3
1938	33 25	12 7	28	14
1937	34 26	6 10	39	15
1936	41 18	12 - 7	40	16
1935	33 29	14 8	43	20
1934	44 38	7 14	56	17
1933	42 25	9 9	44	14
1022	64	27	37	21
1021	60	20	41	15
	81	21	49	16
1930 1929	61	27	46	21
1020	71	16	49	15
4007	68	25	40	23
1927	00	23	10	23
1926	92	28		98
1925	69	21		72
1924	104	14		79
1923	149	57		27
1922	116	25		90
1921	93	41		
1920	85	19		

DEATHS.—Twenty-three persons died from tuberculosis of the lungs and one from tuberculosis of the kidney, in the following age groups:

		Respiratory		Non-Respiratory		
		M.	F.	M.	F.	
15 - 25			2		_	
25 - 45	 	2	4	_		
45 - 65		4	4	1		
65 - 75	 	5	2		_	

The death rates per 1,000 of population were:

Respiratory	 	 	0.40
Non-respiratory	 	 	0.01
All forms	 		0.41

Number of Deaths and Death Rates from Tuberculosis for the Years 1900–1951

		NUMBER		RAT	E PER 1,000)
	Destinatory	Non-	Total	Destinator I	Non-	Total
1951	23	Respiratory 1	24	Respiratory I	0.01	Total 0·41
1950	12	2	14	0.21	0.03	0.24
1949	20	2	22	0.35	0.03	0.38
1948	14	5	19	0.25	0.09	0.34
1947	13	1	14	0.24	0.02	0.26
1946	21	3	24	0.42	0.06	0.48
1945	10	8	18	0.25	0.20	0.45
1944	. 24	4	28	0.85	0.14	1.00
1943	18	5	23	0.65	0.18	0.83
1942	19	4	23	0.61	0.13	0.74
1941	11	5	16	0.39	0.18	0.58
1940	28	2	30	0.52	0.03	0.56
1939	20	6	26	0.33	0.10	0.44
1938	34	8	42	0.62	0.12	0.74
1937	24	7	31	0.43	0.12	0.55
1936	33	6	39	0.59	0.11	0.70
1935	22	6	28	0.39	0-11	0.50
1934	43	3	46	0.75	0.05	0.80
1933	35	6	41	0.61	0.11	0.72
1932	34	7	41	0.59	0.12	0.71
1931	26	11	37	0.47	0.19	0.66
1930	30	5 7	35 38	0.50	0.08	0.58
1929 1928	12	12	55	0.30	0·10 0·20	0.60
1927	27	8	45	0.63	0.16	0.80
1926	12	6	49	0.70	0.12	0.82
1925	4.4	4	48	0.80	0.07	0.87
1924	27	7	44	0.67	0.12	0.79
1923	38	9	47	0.70	0.16	0.87
1922	33	6	39	0.58	0.10	0.68
1921	53	12	65	0.85	0.19	1.04
1920	31	7	38	0.56	0.14	0.69
1919	44	-7	51	0.80	0.10	0.90
1918	52	13	65	1.04	0.26	1.30
1917	52	12	64	1.10	0.26	1.36
1916	52	19	71	1.04	0.38	1.42
1915	50	7	57	0.91	0.12	1.03
1914	41	15	56	0.75	0.27	1.02
1913	39	15	54	0.72	0.50	0.75
1912	60	8	68	1.10	0.14	1.24
1911	58	12	70	1.09	0.22	1.31
1910	46	12	58	0.87	0.22	1.09
1909	58	13	71	1.11	0.25	1.36
1908	42	11	53	0.81	0.21	1.02
1907	53	11	64	1.04	0.20	1.24
1906	53	13	66	1.08	0·27 0·28	1.35
1905	42	13	55	0·90 0·69		1.18
1904	32	22	54 48	0.69	0.48	1.17
1903	33	15 12	69	1.29	0·33 0·27	1.06
1902 1901	4.4	15	59	1.01	0.34	1.56
1900		11	63	1.06	0.22	1.33
1900	52	11	03	1 00	0 22	1 20

CHEST CLINIC

The Clinic was held for Eastbourne cases on Tuesdays and Wednesdays at 9.45 a.m.

The following figures relate to Eastbourne cases only.

		-		
CIT	NIC	RE	GIS	TER:

CLINIC REGISTER:									
		Respiratory			Non-Respiratory				
	Ad	ults		dren		ults		dren	Total
	M.	F.	M.	F.	M.	F.	M.	F.	
ON REGISTER,									
1st January 1951	170	106	5	9	22	26	18	8	364
Add:									
Transfers from other									
areas	10	4	-	-	-	-	-	-	14
Returned to						No.			
Eastbourne	3	1	-	-	-	1	_	-	5
New Cases:	_								
T.B.—	5	12	1	-	1	1	_	-	20
T.B.+	9	3	_	-	_	-	_	-	12
	197	126	6	9	23	28	18	8	415
							-		
Less:									
Fatal	10	9	_	_	1	_	_	_	19
Left the Town	17	13	1	2	-	1	_	1	35
Arrested	3	4	1	2 2	_		1	1	12
For other reasons	-	-	1	1	-	-	-	-	2
	30	26	3	5	_	1	1	2	68
				in ije					
ON REGISTER,									
31st December 1951									
	167	100	3	4	23	27	17	6	347
	Constitution of	1000000	1000		10/2/2011		and the sales		THE RESIDENCE OF THE PARTY OF

CLINIC ATTENDANCES (excluding patients for A.P. or P.P. refills):

		Patients	Attendances
Definite Cases	 	236	640
Observation Cases		270	468
Contacts	 	311	531

PNEUMOTHORAX AND PNEUMOPERITONEUM REFILLS:

		Males	Females	Refills given
Residents	 	 39	22	} 1689
Visitors	 	 36	35	5 1007

ADMISSIONS TO SANATORIA OR HOSPITALS (including Gildredge and Downside):

Males Females 22 24

CHEST PHYSICIAN'S REPORT

Dr. Ferguson Gow writes:

"The year has been spent, in addition to the routine work of the Chest Clinic, in consolidating and further integrating the co-operation between the Clinic and the Public Health Department so far as the tuberculosis side of the work is concerned. In spite of the official division of tuberculosis work into two parts (the Regional Board being responsible for diagnosis and treatment and the Local Authority being responsible for prevention and for the care and after-care of tuberculous persons) in practice in Eastbourne the problem of tuberculosis is tackled as a whole by all concerned working as a team rather than as individuals. This would not be possible unless all the information available about each patient was freely available to all concerned.

With regard to the prevention of tuberculosis, much is done in Eastbourne, but we are not satisfied that all which could be is, in fact, done; our aim, of course, being the complete prevention of the disease. A very important method of prevention is, to my mind, the maintenance in good health of successfully treated cases, and here is a good example of the difficulty in placing responsibility. Are steps taken to prevent a relapse to be considered as continuation of treatment, or are they strictly preventative measures?

It is generally recognised that the incidence of tuberculosis is highest among contacts, but in the area covered by this Clinic the incidence among contacts is, in fact, lower than that among the general population. I think it is reasonable to attribute this extremely encouraging state of affairs largely, if not entirely, to the treatment, care and after-care given to the patients. It is difficult to attribute it to anything else. The inoculation of contacts with B.C.G. has, of course, continued during the year and this is one of the most important methods of prevention used; however, it should not lead one to forego the use of other, perhaps less scientifically justified but, nevertheless, I am sure, useful methods. In dealing with contacts the help of the Social Worker has been most valuable as has been her work in dealing with other aspects of the tuberculosis work. The nature of her work is such that it is not always easy or straightforward.

During the year Eastbourne has again been a good deal more fortunate than many other areas so far as waiting lists are concerned. The waiting list for in-patient treatment has been no problem apart from that for major surgical treatment. It is appalling and disheartening to know that a patient requiring major surgical treatment has usually to wait twelve months or more for a bed.

In view of the improved waiting list fewer patients have been treated at home, a practice which is only very occasionally completely satisfactory and which should be considered at best a makeshift only. Nevertheless, the help given by the Home Nursing Service in treating patients in their homes has been invaluable. There are, in Eastbourne, still an appreciable number of patients living in what are, for tuberculous patients, unsatisfactory conditions. A not unreasonable objective should be a separate room in the home for the sole use of each person with tuberculosis.

It is really unnecessary to end without recording one's appreciation of the help given to the Chest Clinic staff by the staff of the Public Health Department, and I can only hope that this is reciprocated!

So far as the actual work is concerned, the figures tell their own story, and call for no comment except that the now generally recognised tendency throughout the country of the falling mortality and morbidity rates is continued."

VENEREAL DISEASES

The Treatment Centre for Venereal Diseases, for which the Hospital Management Committee is responsible, was at the Princess Alice Memorial Hospital. Two weekly sessions were held—Mondays for women and children and Wednesdays for men.

The following cases, which include two of Syphilis and six of other conditions from outside the Borough, attended the Centre—the figures in brackets relate to 1950:

	Males		Females		To	Cudad	
	Old	New	Old	New	Old	New	Grand
	Cases	Cases	Cases	Cases	Cases	Cases	Total
Syphilis	14 (28)	2 (3)	9 (14)	1 (3)	23 (42)	3 (6)	26 (48)
	8 (20)	2 (8)	— (2)	- (1)	8 (22)	2 (9)	10 (31)
	— (—)	— (—)	— (—)	- (-)	— (—)	— (—)	— (—)
	9 (10)	26 (37)	3 (3)	24 (31)	12 (13)	50 (68)	62 (81)
	31 (58)	30 (48)	12 (19)	25 (35)	43 (77)	55 (83)	98 (160)

The total attendances were 306 (416), Males 200 (244), Females 106 (172).

Summary 1941–1951

	(1)	(2) Non-V.D.		(3) Attendances	
Year	Total Cases	Cases included in (1)	(a) For M.O.s Attention	(b) Intermediate Times	(c) Total
1941	134	37	398	131	529
1942	118	42	399	168	567
1943	216	90	694	231	925
1944	271	123	766	181	947
1945	286	151	646	118	764
1946	277	148	756	318	1,074
1947	204	112	628	147	775
1948	160	96	461	12	473
1949	155	80	454	58	512
1950	160	68	348	68	416
1951	98	62	286	20	306

PUBLIC HEALTH ACT, 1936—Section 187

NURSING HOMES

One Nursing Home was registered and one Home was removed from the Register on ceasing to function. At the end of the year, the twelve Nursing Homes on the Register provided 135 beds for chronic, medical and surgical cases. Twenty-four visits of inspection were made by the medical staff of the Department.

NURSES ACTS, 1943 and 1945

NURSES' AGENCIES

Licences in respect of the two existing Agencies were renewed. The medical staff of the Department made four visits of inspection in connection with the records which these Agencies are required to keep.

NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948

Four premises where children who had not attained the upper limit of compulsory school age were received to be looked after for the day or for a substantial part thereof, or for any longer period not exceeding six days, were registered under this Act. One of these registrations was discontinued in November. No persons were registered as Child Minders.

CHILDREN ACT, 1948

RESIDENTIAL HOMES AND NURSERY

The Medical Officer of Health was on the list of general practitioners of the Local Executive Council and, in that capacity, he was responsible for the medical care of all children in the Council's Residential Homes and Nursery. In addition to medical examination by the staff of the Department prior to admission, all children in the Homes were medically inspected once a quarter and children in the Nursery were inspected monthly.

Dental inspection of the children was carried out in the Homes by the Senior Dental Officer and any necessary treatment was provided without delay through the School Dental Service or, in the case of pre-school children, through the Council's arrangements for dental treatment under the National Health Service Act.

STAFF MEDICAL EXAMINATIONS

A considerable proportion of the time of the medical staff of the Department was devoted to medical examinations of new entrants to the Corporation staff and entrants to the Council's Superannuation Scheme. In addition, special medical examinations were carried out and reports made in regard to members of the staff of various Departments in cases of absence from work through illness or accident. New Appointments:

7					
Department:				2	
Town Clerk				3	
Public Libraries				1	
Eastbourne Training College				1	
Borough Engineer				15	
Education				8	
Police				2	
Transport				21	
Public Health				20	
Chelsea Training College				7	
Borough Treasurer				6	
Cemeteries				1	
Towner Art Gallery				. 2	
School of Art				.1	
Children's Department				3	
SUPERANNUATION SCHEME:				_	91
Eastbourne Training College			1	2	-
Fire Brigade				ī	
Borough Engineer				43	
Entertainments and Catering				6	
Borough Treasurer		A STATE OF		1	
	The Hart			11	
Transport				1	
Public Libraries	• •			1	
				2	
Public Health				1	
Town Clerk				1	
Education		**		1	70
SICK PAY SCHEME:					70
Transport				18	
Borough Engineer				56	
Entertainments and Catering				3	
Eastbourne Training College				2	
Education				1	
INCAPACITY THROUGH ACCIDENT:				-	80
Eastbourne Training College				3	
Education				3	
Borough Treasurer				4	
FITNESS FOR TRAINING:				_	10
Civil Defence				2	
FITNESS FOR DRIVING:				-	2
Transport				1	
OTHER LOCAL AUTHORITIES:				_	1
					3
					. 3
	TOTAL				257
	TOTAL				===

NATIONAL HEALTH SERVICE ACT, 1946

The work of the Department in connection with the various Sections of the National Health Service Act for which the Local Health Authority is responsible, is set out in detail in the pages that follow.

A few general comments on the more important problems and difficulties arising throughout the year will be found in my introductory remarks at the beginning of this Report.

SECTION 21—HEALTH CENTRES

No enquiries were received from medical practitioners, individually or collectively, regarding the provision of one or more Health Centres, and no action was taken regarding any building on the site in The Avenue reserved for the purpose. One awaits with interest reports on the few Health Centres now in course of erection up and down the country.

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

BIRTHS.—Of the 854 live births which took place in the Borough, 609 were births to mothers resident in Eastbourne and 245 to women resident outside the Borough.

Notifications were as follows:

		Residen	Total	
(a) Domiciliary Births:				
Local Health Authorit	v's			
Midwives		106	1	107
Private Midwives		6		6
Medical Practitioners		3	_	3
			_	-
		115	1	116
(b) Institutional Births:				
Maternity Home		461	140	601
Nursing Home		2	_	2
St. Mary's Hospital		30	104	134
Leaf Hospital		1	-	1
		609	245	854
		_	-	-

Eight hundred and eighty live births took place in 1950, or which 171 were to non-resident women.

(c) STILL BIRTHS:

Twenty-three still births took place, all in Institutions; sixteen were to residents and seven to non-residents. The number of still births in 1950 was sixteen—five to non-residents.

1. CLINICS.—(a) ANTE NATAL.—Ante Natal Clinics for domiciliary cases were held as follows:

		Sessions	Attende	ances	
Avenue House		52	445		
Acacia Villa		49	213		
Hampden Park Hall		51	221		
					879
Number of mothers attending					144
Number of new cases .					120
Number of cases examined by	Assis	stant Medi	cal Office	r	52
Number of specimens of blood					117
Number accepting invitation	to a	ttend Loc	al Author	rity's	
					34
Number referred for X-ray:					
0				5	
				1	
Position				4	
				-	10

DOMICILIARY VISITS: Visits in connection with Ante-Natal care to the number of 1,930 were made to twenty-six mothers in their own homes.

(b) Post Natal.—This Clinic was held in conjunction with the Ante-Natal Clinic at Avenue House on Thursday afternoons. Thirteen women made sixteen attendances. One hundred and fifty-five domiciliary visits were made by the Midwives in connection with post-natal treatment.

2. CHILD WELFARE CENTRES were held as follows:

Avenue House	Monday afternoons and Thursday mornings
Acacia Villa, Seaside	Tuesday afternoons
	Friday afternoons
Victoria Drive	Wednesday afternoons
St. John's Church Hall, Meads	First Thursday afternoon in each month

The number of children under five years of age who first attended at the Centres during the year, and who on the date of their first attendances were:

Under 1 year of age	 	 458
Over 1 year of age	 	 349

Total number of children under five years of age who attended the Centres during the year, and who at the end of the year were:

Under 1 year of age	 	 427
Over 1 year of age	 	 915

Total attendances of children at the Centres during the year:

Under 1 year of age				5993
Over 1 year of age				2684
Total number of children	who	attended	at the	
Centres during the year				1347

3. Home Visiting.—The total number of visits paid during the year by the Health Visitors was:

	First Visits	Total Visi
To expectant mothers	64	81
To children under 1 year of age	649	5277
To children between the ages of 1 and 5		
years	185	7555

4. Dental Care.—Five per cent of the time of the Senior Dental Officer and ninety-five per cent of that of the Assistant Dental Officer was available for inspection and treatment of nursing and expectant mothers and pre-school children.

The Senior Dental Officer reports:

"Ninety sessions were devoted to the inspection and treatment of expectant and nursing mothers and pre-school children. Forty-one expectant and twenty-nine nursing mothers were seen during the year at the Avenue House Clinic and made three hundred and twenty attendances. One hundred and six fillings were inserted, and one hundred and seventeen teeth were extracted. Thirty-one artificial dentures were supplied.

Three hundred and fifty-five children under the age of five were inspected. Of these, two hundred and ninety were found to require treatment, and two hundred and seventy-two were treated. Extractions numbered three hundred and twenty-five, and a general anæsthetic was administered in one hundred and seventy-six cases. Seventy-nine fillings were inserted, and, in addition, work of a conservative nature, mainly treatment with silver nitrate solution, was carried out on two hundred and seventy-nine temporary teeth. Four hundred and fifty-seven attendances were made by these children for this form of treatment.

Due probably to facilities under the general Dental Service, there was during the year a decrease in the demand on the Local Authority's dental service by expectant and nursing mothers, but in the pre-school section, in spite of the fact that, owing to shortage of staff, it was impossible to carry out routine inspections at the Welfare Centres, an increasing number of children received treatment. Compared with the previous year, the treatment carried out unfortunately showed an increase in the number of extractions and a decrease in the amount of conservative work, but it is hoped that the position will be improved

in 1952 when routine inspections will be resumed. Conservative work on the temporary dentition is only possible if dental caries is treated in its early stages, and it is only by regular inspection that this can be accomplished.

The problem of the prevention of dental caries is constantly in the minds of the dental profession, and special stress was laid on this aspect at the 1951 Annual Meeting of the British Dental Association. The President himself and several prominent research workers urged the necessity for tireless propaganda in the field of nutrition and oral hygiene. The efficiency of the various prophylactic drug treatments is still held in doubt by many, and the profession is awaiting the results of a survey now being carried out by the Ministry of Health as to the success of the topical application of the fluorine solutions.

Meanwhile, I feel that we of the dental profession who are in close contact with the young child should, on every possible occasion, stress those factors which we do know help towards the elimination of dental disease. The very progress of civilisation itself is, of course, from the purely dental point of view, an increasing menace, as we find that, in modern food production, a considerable lessening is made in the demand on the power and function of the dentition.

We should impress on parents the importance of children using their teeth for really vigorous chewing of tough fibrous food and that, wherever possible, soft pappy foods should be avoided. The tooth brush is often criticised as an inefficient instrument but, like all instruments, it must be used correctly if it is to do its job properly. In this respect, I feel that parental instruction and supervision from an early age is essential if we are to obtain full benefit from what could be one of the most potent weapons in the fight on dental caries. The fact that a tooth brush has been used is not necessarily indicative that it has been used to any real purpose.

As in past years, the laboratory side of the prosthetic work has been undertaken satisfactorily by local dental technicians, and the Radiological Department at St. Mary's Hospital dealt with cases referred for X-ray examination."

(a) Inspection and Treatment:

	Inspected	Needing Treatment	Treated	Made Dentally Fit
Expectant and				
Nursing Mothers	 70	70	56	41
Children under five	 355	290	272	257

(b) Forms of dental treatment provided:

lings Dentures Provided	Treat- Dress- Radio- ment ings graphs Com	4 2 25 5 8 23	- 187 92 1
Dent	Complete	∞	1
		S	-
	Dress-	25	92
		2	187
Scalings	Scaling and gum treatment	34	1
	Fillings	106	79
Anaesthetics	Local General	45	176
Anaes	Local	12	2
	Extrac- tions	1117	325
	,	Expectant and Nursing Mothers	Children under five

- 5. Care of Premature Infants.—(i.e. babies weighing $5\frac{1}{2}$ lbs. or less at birth irrespective of period of gestation):
 - (a) Number of premature infants notified: 49

		Non-	
	Residents	Residents	Total
At Home	 5	_	5
Maternity Home	 24	8	32
St. Mary's Hospital	 5	7	12
	_		_
	34	15	49
	_	_	-

(b) Deaths of premature infants within 28 days:

(i) Died in first 24 hours:	Resid		Non- esidents	Total
Home			_	_
Maternity Home .		1	_	1
St. Mary's Hospital .		1	4	2
	-			-
,		2	1	3
(ii) Died within one to 28 da	vs:			
At home				_
Maternity Home .		2	_	2
Ct Mamila Hamital		_	_	-
	-	-	_	_
		4	1	5
	-	- 20 15 7 15 15	_	_

It will be seen that most of the premature infants notified during the year were born in either the Maternity Home or St. Mary's Hospital. In these two institutions the necessary equipment for dealing with these babies is available. Weakly infants born at home were admitted to hospital and so there was little demand for the special equipment provided by the Local Health Authority.

6. Unmarried Mothers.—Under the Authority's scheme for the welfare of unmarried mothers and their children, full use was made of the services of the welfare workers and the Homes provided by the Chichester Diocesan Moral Welfare Association. All cases were fully investigated by the staff of the Department in association with the voluntary welfare workers, and close contact was maintained with the girls concerned. On discharge from Maternity Units and Post-Natal Hostels all possible help was given to them, including priority of admission of the children to Day Nurseries.

HOUSE OF THE GOOD SHEPHERD.—This Home provides accommodation for single girls, including expectant mothers, in need of care and supervision. Seventy-three women and girls were admitted to the Home, and of these thirty-nine were expectant mothers—ten were

Eastbourne cases. The Local Authority was responsible for one case only, a girl whose stay was fifty-eight days. The maintenance rate was £3 3s. per week.

Three other Eastbourne girls were accommodated in the following Homes at costs varying from £2 to £2 15s. per week:

Rochester Diocesan Moral Welfare Association Home, Bromley St. Joseph's Mother and Baby Home, Grayshott St. Pelagia Home, Highgate.

Twenty-five unmarried mothers were dealt with by the Department as follows:—

Confined at :-

Maternity Home		19
Rochester Diocesan Moral Welfare Association	Home,	
Bromley		1
St. Joseph's Mother and Baby Home, Grayshott		1
St. Pelagia's Home, Highgate		1
St. Agatha's Home, Stratford		1
Not confined at the end of the year		2

BELL HOSTEL.—Of the total admissions of thirty unmarried mothers and their children to this Chichester Diocesan Moral Welfare Association Post-Natal Home, five were Eastbourne cases. The duration of stay of these girls was 54, 63, 92, 96 and 154 days respectively, and the maintenance rate was £4 10s. per week.

7. FOOD.—(a) Under the Ministry of Food Welfare Food Service milk was again available for expectant and nursing mothers and young children at the reduced price of 1½d. per pint, and for babies under one year National Dried Milk was provided at 10½d. per tin. Cod Liver Oil was provided free for expectant and nursing mothers and children up to five years. For mothers who could not take cod liver oil, chocolate coated vitamin A and D tablets were available free: in addition, orange juice was provided at 5d. per bottle for expectant and nursing mothers and children up to five years.

Milk Foods and Vitamin products under the Ministry scheme were issued as follows:

National Dried Milk-	-full and	half cr	eam	24,722 1-lb. tins (26,322 in 1950)
Orange Juice				54,534 bottles (54,118 in 1950)
Cod Liver Oil				11,936 bottles (11,591 in 1950)
Vitamin A. and D. contains six weeks's			packet	2,933 packets (3,262 in 1950)

(b) Under the Local Health Authority's arrangements, the following issues of special food were made:

Full Cream (Cow ar	id Gate)	 	1,709 packets (1,369 in 1950)
Half cream			 	82 packets
Trufood			 	(78 in 1950) 655 tins
Allergilac				(850 in 1950) 138 tins
Virol				(15 in 1950) 664 cartons
VIIOI				(674 in 1950)

With the exception of one case, these special foods were issued at full cost. The following medicaments were issued free:

Cod Liver (Dil and N	Talt	 	443 cartons
				(445 in 1950)
Magnesia			 	11 bottles
				(31 in 1950)
Adexolin			 	1,671 vials
				(960 in 1950)

A Ministry of Food Return for the London and South Eastern Region for the thirteen weeks ended 24th November 1951, indicates that the uptake of Vitamin Products in Eastbourne was as follows:

Orange	Juice	Cod Lis	ver Oil	A and I) Tablets
Bottles	%	Bottles	%	Packets	%
993	47.1	229	36.6	55	50.9

For the period in question, Eastbourne's position in relation to other areas in regard to the uptake of Vitamin products was as follows:

Orange Juice		 	9th
Cod Liver Oil		 	11th
Vitamin A & D Table	ets		4th

8. Day Nurseries.—The Day Nurseries at Salehurst Road and Princes Park, accommodating 40 and 60 children respectively, continued to function during the year.

The average daily attendance of children was as follows:

average daily	attendan	cc or citi	idicii was as ioi	IOWS.
			Salehurst Road	Princes Park
			Nursery	Nursery
January			28 · 25	10.14
February			26.04	31 · 15
March			26.32	41.22
April			36.20	48.12
May			35 · 26	51.19
June			34.65	53.55
July			32.60	52.41
August			32.94	50.78
September			33.68	45 · 40
October			31.73	49.43
November			29.96	46.56
December			30.08	42.99

The number on the waiting list for admission to these Nurseries at

the end of the year was 18.

Opinion generally appears to be sharply divided on the question of Day Nurseries. Some people take the view that they are, to-day, an essential social service inasmuch as they enable many mothers to go out to work, whole-time or part-time, and so provide the additional income which, in view of the high cost of living, is so necessary in the case of many families. Opponents of the Service put forward the view that the home is the proper place for the mother where she is able to give to her young children the care, attention and affection which they require. The fact is, there is always a waiting list for places in our own two Day Nurseries, and they are certainly a help in providing labour for industry, as well as enabling mothers to take on work and feel their children are well cared for. Widows, unmarried mothers and other types of deserving cases are always given priority of admission.

SECTION 23-MIDWIVES' SERVICE

The following are details of the work of the three Domiciliary Midwives:

Midwives:				
BOOKINGS:				
Number of cases on books on	January 1st			50
Bookings				120
0 11 .				8
Number of cases on books on	December 31st			39
CONFINEMENTS:				
Midwifery cases			52	
Maternity cases			59	
materinty cases			_	111
Number of visits paid during	Labour			218
Number of visits paid during				2224
Analgesia:				
(a) Gas and Air:				
Midwifery cases .			45	
Maternity cases .			52	
Materinty cases .				97
(b) Pethidine:				
Midwifery cases .			_	
Maternity cases .		1	24	
materinty cuses .			_	24
Medical aid was sought in ten c	ases:			
Ante Natal:				
Toxaemia			1	
Abdominal tenderness .			1	
Puerperium:			_	2
Ruptured Perineum .				7
Infant:				
Phimosis				1
				_
				10
	62			1

Cases sent for minor maladies to own medical practitioner who had already been booked Referred to Obstetrician:	32
Hydramnios	2
Disproportion	1
	_ 3
Cases transferred to:	
(a) St. Mary's Hospital:	
Ante-Natal:	
Toxaemia	2
Ante-partum haemorrhage	1
Leucorrhoea	1
Malpresentation	1
Rh. Factor (antibodies present)	1
	- 6
Labour:	
Incomplete abortion	1
Prolonged labour	î
Failed Forceps	î
Taned Forceps	_ 3
Puerperium:	
Abortion	1
Adherent Placenta and post-partum haemor-	
rhage	1
	_ 2
(b) MATERNITY HOME:	
Ante-Natal:	
Ante-partum haemorrhage	3
Rh. Factor (antibodies present)	1
	— 4
(c) Leaf Hospital:	
Puerperium:	
Pyrexia, retained products	1
- James, commerce Production	

Six hundred and ten visits were made by the domiciliary midwives to the two hundred and seventy-two mothers who were discharged from the Maternity Home before the fourteenth day.

MIDWIVES ACTS

Of the twenty-nine midwives who gave notice of their intention to practise, twenty-four were employed in hospitals, three in the Local Health Authority's Midwives Service, and one in private practice. Four midwives gave notice of intention to practise as maternity nurses and they were employed in private practice.

Supervision.—The Superintendent Nursing Officer is the Non-Medical Supervisor of Midwives, and she made routine inspections as follows:

Local Health Authority	y Domi	ciliary M	idwives	 6
Private Midwives				 4
Midwives in Hospitals	and M	aternity I	Home	 18

In addition, in connection with various difficulties, thirty special visits were made.

Training of Pupil Midwives.—Four pupil midwives from the East Sussex County Council were accepted for three months' district training.

SECTION 24—HEALTH VISITING

The number of visits to homes made by the Health Visitors was:

CARE OF MOTHERS	AND	Young	CHILDREN:
-----------------	-----	-------	-----------

Cilia or incommendation		1000000		
Children under one year		7	 	5277
Children aged one to fiv	e years .		 	7555
Expectant mothers			 	81
Nursing Mothers			 	1611
In connection with Day	Nurseries		 	283
Infectious Illness:				
Pre-School Children			 	247
Children of School Age			 	312
Others			 	53
Tuberculosis			 	1026
CARE AND AFTER-CARE (include	ling Aged	Persons)		1309
Housing Conditions			 	85
MISCELLANEOUS			 	727
			1	8,566

Health Visitors were in attendance at all Infant Welfare Centres and at the Chest Clinics, the number of attendances being 1,433 at Infant Welfare Centres and 215 at Chest Clinics.

TRAINING OF STUDENT HEALTH VISITORS

Nine student health visitors, undergoing training at the Queen's Institute of District Nursing Training Centre at Brighton, each received three weeks of their practical training in the Department.

SECTION 25-HOME NURSING

The Home Nursing Staff at the end of the year was:

Superintendent Nursing Of	 	1	
Senior Home Nurse		 	1
Full time Home Nurses		 	10
Part-time Home Nurses		 	2

The Superintendent Nursing Officer, Senior Home Nurse and eight of the Home Nurses were Queen's trained Nurses.

The Local Health Authority is affiliated to the Queen's Institute of District Nursing, and pays to that body an annual fee of £3 15s. in respect of each Queen's Nurse employed.

The following are particulars of cases dealt with:

		Cases	Visits
Medical .		733	12,882
Surgical .		469	8,931
Chronic		305	22,328
Miscarriages .		5	24
Tuberculosis .		36	2,149
Infectious Disea	ses	4	21
Other Visits			712

SECTION 26-VACCINATION AND IMMUNISATION

A.—VACCINATION AGAINST SMALLPOX

Statistics over a number of years show that the people of Eastbourne have never been very enthusiastic about vaccination against smallpox. When vaccination was compulsory, the percentage of children vaccinated under the age of one year ranged from 15.5 to 20.6. It was customary for statutory declarations for exemption to be received in relation to anything from sixty to eighty per cent of the infant population. It is gratifying to know that, since the repeal of the Vaccination Acts, and the coming into operation of the National Health Service Act in 1948, persuasion has produced far better results than did compulsion under the old system.

Vaccinations during 1951:

Age Group		Primary V By staff of Health Department	accinations By General Practitioner	Re-Vac By staff of Health Department	cinations By General Practitioner
Under 1 year 1 to 2 2 to 5 5 to 15 15 and over		218 97 374 2005 2375	193 62 194 638 1377	193 766 3368	83 831 3416
		5069	2464	4327	4330
		75	33	8657	
			161	190	

It will be seen from the following tables that, in the year 1950, over forty-one per cent of infants were vaccinated in the first year of their lives. In the year under review, sixty-eight per cent of infants under one year received the necessary protection against smallpox, though, in this connection, there is no doubt that parents were very greatly influenced by the outbreak of smallpox in a neighbouring Borough.

Year	Births	Certificates of Successful Vaccinations	Percentage Vaccinated	Certificates of Exemption
1924	684	141	20.6	456
1925	691	130	20.3	469
1926	763	137	17.9	527
1927	683	128	18.7	464
1928	764	129	16.9	550
1929	689	139	20.3	455
1930	711	123	17.3	492
1931	707	119	16.8	501
1932	757	141	18.6	524
1933	706	137	19.4	481
1934	702	133	18.9	493
1935	663	103	15.5	506
1936	722	144	19.9	508
1937	702	127	18.1	483

Year	Births	Vaccinations under 1 year	Percentage Vaccinated
1951	604	411	68.0
1950	701	291	41.5
1949	740	130	17.6

B.—DIPHTHERIA IMMUNISATION

Approximately sixty-six per cent of the children born in 1950 were immunised against Diphtheria in the year under review.

Since the campaign commenced in 1939, the total number of children known to have been immunised in the age groups 0-1 and 1-2 years is:

Year	Births	No. immunised in age groups 0-1 year and 1-2 years	Percentage of previous years' births immunised
1951	604	463	66.0
1950	701	467	63 · 1
1949	740	446	55.7
1948	801	606	61.7
1947	983	594	61.6
1946	964	453	67.9
1945	667	364	74 · 4
1944	489	241	57.8
1943	416	217	46.9
1942	463	209	54.4
1941	384	54	, 9.9
1940 1939	545 587	14	

In 1951, five hundred and thirty-two children received the full initial protection as follows:

1. By Medical Staff of the Department:

Age Group		Number	Total
0-1		 158	
		_	158
1-2	 1/	 125	
2-3		 9	
3-4	 	 4 5	
4-5	 Me	 5	
			143
5-6	 	 11	
6-7	 	 4	
7–8	 	 4	
8-9	 	 1	
9-10	 	 _	
		_	20
10-11	 	 5	
11-12	 	 1	
12-13	 	 1	
13-14	 	 3	
14-15		 _	
		_	10
			331

2. By General Practitioners:

Age Group		Number
0-1	 	 147
1-5	 	 - 33
5-15	 	 21
		201

Reinforcing doses were given to children:

Age Group		By staff of Local Health Authority	By General Practitioners
1-5	 	73	10
5-15	 	558	96
15 and over	 	28	3
		-	-
		659	109
		_	

The Department's immunisation records show that, at the end of the year, 1,536 children aged 0-5 and 5,364 aged 5-15 years had been given the full initial two dose protection in the following age groups:

Age Group	0		Number	Total
0-1		 	31	
1-2		 	249	
2-3		 	314	
3-4		 	366	
4-5		 	576	
			-	1536
5-6		 	689	
6-7			556	
7-8		 	661	
8-9		 	539	
. 9-10		 	531	
				2976
10-11		 	445	
11-12		 	462	
12-13		 	503	
13-14		 	491	
14-15		 	487	
			-	2388
				-
				6900

These numbers represent 48.90 per cent of the children in the age groups 1-5 and 79.22 per cent in the age groups 5-15 years.

The school medical records of children in attendance at schools under the control of the Local Education Authority indicate that, of the 6,032 children on the school registers at the end of the year, 4,871, a percentage of 80·7, had received the necessary protection against Diphtheria.

Alum precipitated Toxoid was again the immunising re-agent in general use, but for older children Toxoid Antitoxin Floccules were used. Supplies of both these products were obtained from the Public Health Laboratory Service.

The technique followed since the inception of the campaign was again used:

- 1. CHILDREN FROM THE AGE OF 10 MONTHS UP TO 12 OR 14 YEARS:
 - (a) Primary Immunisation:
 - A.P.T. 1st dose 0.2 c.c. 2nd dose 0.5 c.c. (at an interval of not less than one month).
 - (b) Reinforcing Doses:
 - A.P.T. One dose of 0.5 c.c. at 5 years of age where the original protection was given before the age of 3 years. One dose of 0.5 c.c. at 10 years, or 5 years from the last protective dose.
- 2. CHILDREN OVER 14 YEARS OF AGE:
 - (a) Primary Immunisation:
 - T.A.F. Three doses of 1 c.c. each at monthly intervals; or
 - A.P.T. 1st dose of 0.2 c.c. 2nd dose of 0.5 c.c. (at an interval of not less than one month).
 - (b) Reinforcing Doses:
 - T.A.F. One dose of 1 c.c.

CHILDREN IMMUNISED BY THE STAFF OF THE DEPARTMENT SINCE THE COMMENCEMENT OF THE CAMPAIGN IN 1939

Diphtheria	tions	24 1	- 4	0 3 -	1 1 0	0	0 1 -	0 1 1	1 - 1	6 1	2 2 —	2	-
Population	5-15	1		3200	3400	0 4020	0 4970	0 5720	9 5957	9889 9	5 7042	8 7122	7 6771
Pop	1 0-5	1	1	1700	1400	2050	2910	3390	3949	3966	3955	3938	3847
	Total	441	903	1095	413	297	521	626	673	669	378	363	331
	5-15	360	651	612	88	24	64	80	4	54	25	40	30
SAD	4-5	24	7.2	100	36	00	17	20	00	11	7	2	5
AGE GROUPS	3-4	19	28	83	33	12	21	24	14	25	5	3	4
AG	2-3	24	89	91	39	12	55	46	13	31	19	16	0
	1-2	14	54	209	217	241	364	453	858	578	322	299	125
	0-1	1	1	1	1	1	1	1	36	1	1	1	158
		December 1939 to December 1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951

IMMUNISATIONS BY GENERAL PRACTITIONERS FROM 1948

AGE GROUPS							
Year	0-1	2-1	2-3	3-4	4-5	5-15	Total
1948	_	28	_		_	1	29
1949	47	77	3	1	2	26	156
1950	81	75	-	_	-	16	172
1951	147	31	2	_	_	21	201

Notifications of and Deaths from Diphtheria for the Years 1919 to 1939 and the Twelve Years since the Immunisation Campaign was Commenced in Eastbourne in 1939

Prior to Campaign		Total Diphtheria Notifications		Death
1919		61		2
1920		78		2 3
1921	11.	118		4
1922		25		1
1923		33		i
1924		14	STATE AND	_
1925		22		1
1926		5		
1927		16		
				4
1928		120		4
1929		145		10
1930		47		4
1931		40		2
1932		38		-
1933		23		2
1934		26		2 2
1935	175	20		
1936		13		200
1937		14		1
				-
1938		17		
1939		56		-

Since Campaign	Total Diphtheria Notifications	Deaths
December 1939-40	 30	 1
1941	 7	- 1
1942	 3	 -
1943	 2	 -
1944	 3	 - 1
1945	 1	 -
1946	 1	 1
1947	 -	 -
1948	 1	 -
1949	 2	 =
1950	 _	 -
1951	 -	 -

ENGLAND AND WALES

Notifications of and deaths from Diphtheria during the past twelve years:

Year	Diphtheria Deaths	Cases
1940	 2;480	 46,281
1941	2,641	 50,797
1942	 1,827	 41,404
1943	 1,371	 34,662
1944	 934	 23,199
1945	 722	 18,596
1946	 472	 11,986
1947	 244	 5,609
1948	 156	 3,575
1949	 84	 1,890
1950	 49	 962
1951	 34	 699
1949 1950	 84 49	 1,89

SECTION 27—AMBULANCE SERVICE

The Eastbourne Division of the St. John Ambulance Brigade continued to run the Ambulance Service under a joint Agreement between the Order of St. John, this Authority and the East Sussex County Council. The Brigade has undertaken to provide and maintain an adequate and efficient ambulance service for the County Borough of Eastbourne and the seven adjoining parishes of the administrative County of East Sussex. The Contract stipulates that not less than six ambulances and three sitting-case cars are available and that one Superintendent, six full-time driver-attendants and one full-time transport sergeant mechanic will be employed. The Local Health Authority and, subsequently, the Ministry of Health agreed to the Brigade's request for an addition to the fleet of one sitting-case car and for the employment of an additional driver-attendant. financial arrangement between the two Authorities and the Order is now on a reimbursement basis, and the cost of the service is borne by this Authority and the East Sussex County Council in the proportions of eighty and one half per cent and nineteen and one half per cent respectively.

The increasing demands on the service, and the feeling that some of the requests were unreasonable or unnecessary, prompted me to suggest the establishment of a Medical Ambulance Advisory Committee. This suggestion was agreed to by the Local Health Authority, the Hospital Management Committee and the Local Medical Committee. The Committee consists of three representatives of the Group Medical Committee, three representatives of the Local Medical Committee and the Medical Officer of Health. At the first meeting held on October 28th, the County Medical Officer was invited to be present. The following is a short summary of the points on which agreement was reached:

A.—GENERAL PRACTITIONERS:

- Cases within Borough: A large number of patients attending hospitals and clinics can and should be encouraged to make own arrangements for travel.
- 2. Long distance journeys: Ambulances and sitting-case cars to be used only if there is a definite medical reason for so doing.
- 3. Journey by railway: As eminently satisfactory arrangements can be made for the safe and comfortable transport of most types of case by train, much greater use should be made of this method for long distance cases.

B.-LOCAL HOSPITALS:

- 1. One Medical Officer to be responsible for assessing need of ambulance transport.
- 2. "Grouping" and "Timing" of discharges and out-patient attendances should be encouraged to utmost extent possible.
- 3. Sunday journeys to be reduced to the absolute minimum possible.
- 4. Casualty Department: Special care to be taken to ensure that transport from outlying districts is:
 - (a) retained if patient is likely to be returned in a short space of time, otherwise
 - (b) released promptly.

I am most grateful to my colleagues on this Committee for their co-operation and advice, and am entirely satisfied that the time spent has been worth while. There has been a marked reduction in the demands for long distance transport: in this connection, many patients have been moved quickly, safely and comfortably by train. The general practitioners as a whole and the medical staffs of the hospitals have done everything in their power to fall in with the recommendations made.

As from April 1st, the statistics for the service have been compiled according to the definition set out in the Explanatory Notes accompanying Ministry of Health Circular 25/51 and, as a consequence, the returns of patients and journeys are not readily comparable with those for previous years. "Patient" now means one person carried once in one direction—a person taken to hospital and taken home later in the same day counts as two patients and two journeys. This new method of classification accounts for the apparently greater numbers of patients and the very large increase in journeys. It will be noted, however, that the total car and ambulance mileage shows a decrease.

	Patients	Journeys	Mileage
Ambulances (5) Infectious Diseases	2990	2560	26886
Ambulance (1)	110	108	580
	3100	2668	27466
Sitting-case Cars (3)	9475	4608	54838

TRAVEL BY RAILWAY.—Patients to the number of two hundred and seventy-seven were conveyed by train. In fifty of these cases ambulance transport was used to take the persons concerned to and from railway stations, and in two hundred and twenty-seven cases cars were so used.

MONTHLY STATISTICS

Month	Numb			ber of ients	emergency include	of accident other y journeys ded in column	Total	Mileage
	Amb.	Cars	Amb.	Cars	Amb.	Cars	Amb.	Cars
Jan	260	313	283	469	24	2	2,419	3,594
Feb	258	294	272	397	13	1	2,860	3,812
Mar	265	369	265	515	30	2	1,977	5,755
April	217	521	235	877	24	2	2,697	2,642
May	274	528	285	915	27	2	2,681	5,596
June	243	441	266	845	37	5	2,540	5,255
July	239	553	246	895	37	11	1,844	4,439
Aug	240	332	296	906	56	5	2,892	4,605
Sept	152	273	237	731	39 37	3	1,936	3,852
Oct	169	363	247	1118		6	1,988	5,220
Nov	178	327	249	1016	23	3	1,750	4,975
Dec	173	294	219	791	30	3	1,882	5,093
TOTALS	2668	4608	3100	9475	377	45	27,466	54,838

ORIGIN OF CALLS

		Ambulances	Sitting Case Cars
Emergency Calls and Street Acciden	its	377	45
Local Hospitals		1607	1141
Local Convalescent Home		29	183
General Medical Practitioners		587	283
Maternity Home		26	28
Nursing Homes		53	3
Ministry of Pensions		4	55
Other Ambulance Authorities		54	261
Mental Health Officers		25	79
Others		156	127
OUT-PATIENTS:			
Chest Clinic		144	364
Foot Clinic			424
Local Hospitals		24	4943
Royal Sussex County Hospital	and -		
Charterhouse Clinic, Brighton		7	550
TOTALS		3093	8486

RECORD OF JOURNEYS AND MILEAGES SINCE 5TH JULY 1948

	Ambulances		Sitting Case Cars		
	Journeys	Mileage	Journeys	Mileage	
5th July to 31st Dec. 1948	1,427	23,127	757	30,415	
Jan. to Dec. 1949	2,808	48,358	3,452	56,882	
Jan. to Dec. 1950	2,962	34,013	3,660	55,023	
Jan. to Dec. 1951	2,668	27,466	4,608	54,838	

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

A.—TUBERCULOSIS

Three members of the Health Visiting staff (one whole-time and two part-time) carried out welfare work in connection with tuberculosis.

First visits			 	54
Re-visits (including	457	ineffective)	 	1429

Close contact again existed between the officers of this Department and those of the Chest Clinic, and a Health Visitor (Tuberculosis Social Worker) was in attendance at two hundred and five clinic sessions.

Extra Nourishment was granted to persons suffering from tuberculosis:

(a)	Liquid Milk: At 2 pints per day At 1 pint per day			Total pints 19,806 20,186
	,			39,992
(b)	Cases assisted:			
	Children (Male 1, F	emale 1)	 	2
	Males		 	72
	Females		 	50
				124

In 1950, 47,713 pints were granted to 140 persons, and in 1949, 40,762 pints were granted to 135 persons.

B.—B.C.G. VACCINATION

Twenty-one persons were given this protective inoculation against tuberculosis by the Chest Physician:

Contacts:

Under 1 year	 	 	8	
1 year	 	 	2	
2 to 5 years		 	3	
5 to 10 years	 	 	2	
10 to 15 years	 	 	1	
15 to 20 years	 	 	2	
				18
Student Nurses:		1		
20 to 25 years	 	 		2
Others:				
20 to 25 years	 	 		1
25 15 20 70000				21
				_

C.-MASS RADIOGRAPHY

A propaganda meeting was held at the Town Hall at which His Worship the Mayor kindly took the chair. Representatives of Local and Central Government, business firms, schools, labour organisations, hotels, as well as representatives of the local press, were invited. The Director of the Unit, the Chest Physician and the Medical Officer, of Health, addressed the meeting, pointing out the aims and objects of Mass Radiography, and encouraging all sections of the community, in their own interests as well as in the interests of the community as a whole, to take advantage of the free and confidential facilities available. The number of persons who passed through the Unit, including a small percentage from the adjoining area of the East Sussex County Council was, on the whole, encouraging.

The analysis of the Survey can be summarised:

	Males	Females	Total
Total number of persons X-rayed	3696	4506	8202
Normal on miniature film	3486	4311	7797
Recalled for large film	210	195	405
Classified as abnormal on large film	151	142	293

Of the four hundred and five persons recalled for large scale examination, two hundred and ninety-three were found to have some chest abnormality. In this group, one hundred and ninety-nine Eastbourne persons were considered to require clinical investigation and were seen by the Medical Director of the Unit. Of that number one hundred and thirty-two, seventy-two men and sixty women, were referred to their own doctors. It was ultimately confirmed that seven persons were suffering from Pulmonary Tuberculosis, and were in need of treatment for that disease. Sixty-seven persons (twenty-five males and forty-two females) were referred to their own doctors with a view to being investigated for cardio-vascular disease and such conditions as bronchiectasis and malignant disease.

The clinical conditions of the seven active cases discovered were as follows:

Female, aged 35 years: Infiltration upper zone, left lung. Sanatorium treatment provided.

Male, aged 28 years: Small cavity left upper zone, left lung. Sanatorium treatment provided.

Female, aged 18 years: Infiltration upper zone, left lung. Sanatorium treatment provided.

Male, aged 33 years: Left the town.

Female, aged 17 years: Infiltration upper zone, right lung. Sanatorium treatment provided.

Male, aged 73 years: Infiltration upper zone, right lung. Positive sputum. Under supervision at Chest Clinic.

Male, aged 50 years: Infiltration upper and middle zones right lung, and middle zone, left lung. Positive sputum. Sanatorium treatment provided.

D.—HOME NURSING AND DOMESTIC HELP

The Home Nurses paid 2,149 visits to thirty-six tuberculous patients:

- 11 cases for general nursing.
 - 2 cases for dressings.
- 23 cases for Streptomycin injections.

Domestic Help was provided in thirty-six tuberculous households.

E.—OCCUPATIONAL THERAPY FOR TUBERCULOUS PERSONS

Fifty-one clinic sessions were held and eleven persons made one hundred and twenty-two attendances. The Occupational Therapist paid one hundred and ninety-one visits to the homes of twenty persons who were unfit to attend the clinic.

F.—PROVISION OF CONVALESCENCE

Arrangements for convalescence were made for three women:

Nervous breakdown—Church Army Holiday Home, Tankerton, for 15 days.

Rheumatoid Arthritis—Church Army Holiday Home, Tankerton, for 15 days.

After operation for removal of both breasts—Church Army Holiday Home, Guildford, for 14 days.

One child was sent for convalescence for a period of thirteen weeks following Nephritis, and a mental defective, because of serious illness of the mother, was sent to a Convalescent Home at Burwash Common for four weeks.

G.-LOAN OF EQUIPMENT

Various items of sick room equipment from the stock held in the Home Nursing Section of the Department to the number of 709 were loaned to 328 patients.

Air rings and cushi	ions			147
Bed Pans				112
Back rests		 		66
Bed tables				2
Bed cradles		 		8
Commodes		 	7	16
Draw sheets		 		99
Feeding cup		 		7
Hot water bottle		 		3
Outdoor chair		 		9
Pillow cases				7
Mackintosh sheetin	ıg			128
Sorbo bed		 		15
Sheets		 ,		26
Sputum cup				1
Urinal		 		50
Pillows		1		1
Sorbo sheet		 		2
Towels				6
Indoor invalid chai	r			1
Hot water bottles				3
				709

In seventy-one cases no charge was made for the loan. In 1950, five hundred and fifty articles were loaned to three hundred and thirty-seven persons, no charge being made in sixty-eight cases, and in 1949 forty-two articles were loaned to twenty-seven cases, no charge being made in three cases.

H.—VOLUNTARY ORGANISATIONS

In appropriate cases, full advantage was taken of the many and varied services provided by such bodies as the Order of St. John, the British Red Cross Society, the Guardianship Society, the National Society for the Prevention of Cruelty to Children, the Women's Voluntary Services, the Society for the Social Welfare of the Blind in Eastbourne, and the Eastbourne Voluntary Association for the Care of Cripples.

I.—HEALTH EDUCATION

In striving for longevity and for a safer and healthier mode of life, and in the efforts made to educate mankind to that end, it is often forgotten that ignorance of the art of living, resulting in a wrong approach to everyday problems, may well make all the difference between a full, healthy and productive life and the lamentable condition of chronic sub-normal ill-health from which so many of the people of our day suffer.

The stresses and strains which the present generation continue to encounter are indeed many, varied and virulent, but, nevertheless, a balanced outlook and a calm and peaceful approach go a long way towards combating these dire influences.

I feel sure that the teachers in our schools are fully alive to the importance of conveying to the children in their care a sound mental and emotional outlook on life, and the majority of our boys and girls do leave school fairly well equipped in this respect, taking into account their immature years.

What of the adolescents, the courting and engaged couples, the young married persons and the young fathers and mothers? I feel it is no exaggeration to say that only a minority are anything like reasonably well equipped for the responsibilities of courtship, homemaking, marriage and parenthood. Here, I am convinced, is a wide and fertile field for education of a truly essential nature, and I commend it to the consideration of all responsible for the nation's educational programme.

The teaching of Health Education in the Department, broadly speaking, falls into the everyday work of the Health Visitors and School Nurses. Every officer, however, in every section, is expected to use his or her influence in spreading the gospel of healthy living. The aids to Health Education provided by various organisations continue to be used.

SECTION 29-DOMESTIC HELP

The demand for this Service showed no signs of decreasing; the vast majority of calls were entirely reasonable and justified, but there were a number of occasions on which it was not possible to provide the hours really required and there were, indeed, some occasions on which it was not possible to provide any help.

Provision was made in the estimates for twenty Home Helps. The nours of duty of those employed at the end of the year were:

Whole-time:				
47 hours		 		2
Part-time:				
40-44 hours		 V	9	
24-40 hours		 	10	
Less than 24 hours		 	3	
			-	22
				_
				24
				-

Three hundred and fifty-one cases were provided with help:

(a)	Maternity (incl	uding ex	epectant n	nothers)		12
1	Tuberculosis Others		::			36 303
(-)	ouncio ::					351
					The Control	-

The Scale of Assessment is as follows, but the Medical Officer of Health has authority to vary the Scale, subject to subsequent confirmation by the Committee, where its strict application would cause nardship:

	Household		Proportion of Charge Payable
Not exceeding 3	4 or 5	Exceeding 5	Charge I ayable
13/- or less	12/- or less	11/- or less	Free
13/1 to 15/-	12/1 to 14/-	11/1 to 13/-	One-quarter
15/1 to 17/-	14/1 to 16/-	13/1 to 15/-	Half
17/1 to 19/-	16/1 to 18/6	15/1 to 17/6	Three-quarters
More than 19/-	More than 18/6	More than 17/6	Full cost

In view of the large number of cases in receipt of Old Age Pensions and/or National Assistance being brought before the Committee for special consideration, it was decided in February of this year that no charge should be made to persons in receipt of National Assistance or those whose sole or normal income consisted of an Old Age Pension or a pension under the National Insurance Act, 1946.

Assessments were made:

(a) According to Scale:

	Full cost		 	 91
	Part cost		 	 6
	Free		 	 89
(b)	Special Co	ases:		
	Part Cost		 	 50
	Free		 	 115

SECTION 51-MENTAL HEALTH SERVICE

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The Mental Health Service is under the general supervision and control of the Medical Officer of Health. Reports on the service were submitted to the monthly meetings of the Health Services Committee which is the Committee of the Council appointed to deal with al matters relating to the National Health Service Act.

The lay staff consists of two male part-time Authorised Officers and one female Authorised Officer who devotes the whole of he time to mental health work under this Section. There is an additional part-time female Authorised Officer who is also employed on two days a week in the Occupation Centre.

The Occupation Centre for mental defectives was opened one ful day and one half day each week throughout the school year. The female Mental Health Worker was in charge of this Centre and she was assisted by a part-time Handicraft Teacher and the female office referred to above. By arrangement with the Education Authority: hot mid-day meal was provided on the days on which the Centre wa open morning and afternoon.

The services provided by the Guardianship Society at Brighton were again used in connection with the placing and supervision of mental defectives under guardianship. I am very happy to record my appreciation of the help this organisation continues to provid with such efficiency.

The co-operation received by the officers of the Local Authority engaged in mental health work from the officers of the various Menta Deficiency Institutions and Hospitals dealt with was again mos satisfactory.

LUNACY AND MENTAL TREATMENT ACTS, 1890-1930

The tendency in recent years for more and more persons suffering from nervous or mental disorders to undergo treatment as voluntary patients was again evident. In the year under review 148 patients were admitted to Mental Hospitals as voluntary patients compared with 123 in 1950 and 95 in 1949.

St. Mary's Hospital (Designated under Section 20):

In addition to the persons admitted on the advice of their own doctors for observation, the Authorised Officers arranged for the admission of eight cases under Section 20 of the Lunacy Act. Of these eight cases, five were certified under Section 14, two entered Mental Hospitals as voluntary patients and one was placed under a Fourteen Day Order under Section 21 (a): this latter case was subsequently discharged.

St. Mary's Hospital also accepts cases from the area of the East Sussex County Council and the six County cases dealt with all entered Mental Hospitals as voluntary patients.

HELLINGLY HOSPITAL

The following cases were dealt with by the Authorised Officers:

(a) Certified Cases (Sections 14-16 Lunacy Act, 1890)

Twenty-seven persons (10 men and 17 women) were certified and removed to this Hospital under Summary Reception Orders; of that number eight were admitted direct from their own homes and the remaining nineteen persons were admitted from St. Mary's Hospital.

(b) Urgency Order (Section 11, Lunacy Act, 1890)

On the advice of a member of the medical staff at Hellingly Hospital, one man was admitted from St. Mary's Hospital under this Section and on the expiration of the Order he remained in Hellingly as a voluntary patient.

(c) Voluntary Patients (Section 1, Mental Treatment Act, 1930)

The Authorised Officers arranged for the admission of forty-six men and thirty women as voluntary patients. Forty of these persons were admitted from their own homes and thirty-six from St. Mary's Hospital. In addition some twenty-two men and fifty women were admitted to Hellingly as voluntary patients by arrangement between the family doctor and the staff of the hospital direct.

(d) Temporary Patients (Section 5, Mental Treatment Act, 1930)
No action was taken under this Section.

The position in regard to patients in Mental Hospitals at the beginning and the end of the year was:

	St. Francis' Hospital		Hellingly Hospital		Others		Total
	M.	F.	M.	F.	M.	F.	
December 31st 1950	 39	78	27	63	2	2	211
Admitted during 1951	 2	2	60	114	-	-	178
Discharged during 1951	 4	2	49	106	1	-	162
Re-classified	 	-	-	-	-	-	-
Died during 1951	 3	4	4	10	-	-	21
December 31st 1951	 34	74	34	61	1	2	206

Of the two hundred and six persons remaining in Mental Hospitals at the end of the year, sixty-six were voluntary patients.

The following table gives a comparison between numbers of cases dealt with by the staff of the department over the past three years:

Year	Population	Patients admitted to Mental Hospitals		Patients Remaining since Dec. 31st		Persons per 1,000 population admitted to Mental Hospitals	
		Voluntary	Others	Voluntary	Others	Voluntary	Other:
1949	56,880	95	29	33	144	1.673	-509
1950	58,050	123	42	51	143	2.118	-723
1951	57,510	148	30	66	140	2.573	-521

CARE AND AFTER-CARE

Whilst the staff are most anxious to help with and extend Care and After-Care facilities, requests from Mental Hospitals for patients to be followed up on discharge are relatively few in number.

In connection with mental ill health generally apart from menta deficiency, one hundred and nineteen visits were made to fifty-thre persons and some forty-four interviews were given at Avenue House Arrangements were made for a number of cases to be admitted to an After-Care Home. In connection with prevention one woman suffering from a threatened nervous breakdown was admitted to holiday home at the expense of the Authority.

Very great difficulty was experienced in getting employers to accep persons whom they knew had been in Mental Hospitals either a voluntary or certified patients. This attitude is greatly to be de plored and one hopes that a more enlightened outlook will, in ducourse, prevail.

PSYCHOLOGICAL OUT-PATIENT CLINIC

This clinic was held at the Princess Alice Hospital on Monday afternoons and was conducted by the medical staff of the Hellingly Mental Hospital. One hundred and eighty-four persons resident in Eastbourne made three hundred and seventy attendances.

CHILD GUIDANCE CLINIC

A Joint Child Guidance Service is provided by the Education Authorities of the East Sussex County Council and the Hastings and Eastbourne Corporations. The clinic functions in Eastbourne on Monday mornings and all day on Thursdays. The Psychiatrist and the other members of the staff of this clinic were always ready to co-operate in cases in which the Department required help and advice.

MENTAL DEFICIENCY ACTS, 1913-1938

Five males were added to the Register, three on notification by the Local Education Authority under Section 57 (3) of the Education Act, 1944, one on ascertainment and one on being transferred from another area. Two males were removed from the Register, one on certification under the Lunacy Acts, the other leaving the town and being untraced. Two females were added to the Register on notification by the Local Education Authority under Section 57 (5) of the Education Act, 1944. One female under Guardianship died.

Two males and four females were awaiting Institutional vacancies at the end of the year.

The services provided by the Guardianship Society at Brighton continued to be used in connection with the placing and supervision of mental defectives under Guardianship.

Cases under supervision were visited by the Mental Health Workers as a routine once in every quarter, more frequent visits being made to those cases requiring closer supervision. The number of supervision visits paid was 257.

The Occupation Centre, which was established in November 1950, continued to function throughout the year in the Maternity and Child Welfare Section of the Central Clinic. Sessions were held on Tuesday mornings and Thursday afternoons and from September, an additional session was held on Tuesday afternoons, and from this date a mid-day meal was provided on Tuesdays by the School Meals Service.

The services of the Home Teacher of the Blind were available for home training of suitable mental defectives in their homes.

The position with regard to mental defectives on 31st December was:

		Males	Females	Total
In Institutions		35	23	58
On Licence from Institut	ions	2	7	9
Under Guardianship		5	5	10
Under Supervision		29	44	73
		_	_	
		71	79	150
		_		Section 1

The fifty-eight Institution cases were placed as follows:

		Males	Females
Laughton Lodge, near Lewes		 4	1
Newton Llandidloes Institution	A	 1	_
Brentry Colony, Bristol		 8	-
Stoke Park Colony, Bristol		 8	5
Barvin Park Certified Institution, Herts	s	 1	-
Princess Christian Farm Colony, Hilde	nborough	 2	-
Pewsey Colony, Wilts		 1	-
Rampton State Institution		 2	1
St. Teresa's Certified Institution, near		 -	9
Hortham Colony, Almondsbury, Bristo		 -	1
Etloe House Certified Institution, Leyt	on	 -	3
Darenth Park, Dartford		 6	3
St. Lawrences, Caterham		 1	-
Pouchlands Hospital Certified Instituti	on, Chailey	 1	_
		_	-
		35	23
		-	-

NATIONAL ASSISTANCE ACT, 1948

The many and varied duties of the Local Authority under this Act again claimed every moment of the time of the Welfare Officers and much of the time of other members of the staff of the department.

The work in connection with the adaptation and equipment of Trevin Towers was completed and the Home was officially opened by His Worship the Mayor on August 10th. This Home provides accommodation for some 45 residents of both sexes, but the greater proportion throughout the year were women. Trevin Towers, I feel, provides a real home for persons in the eventide of their lives and one of which the Eastbourne Corporation can justly be proud; the accommodation is good and the equipment, without being extravagant, is altogether reasonable and comfortable.

The amenities at Cavendish Lodge do not reach the standard of Trevin Towers but the men living there appear to be very happy and to want for little.

The difficulty experienced in the previous year in finding suitable accommodation for aged and infirm men did not recur to any appreciable extent but there is still unquestionably a real need for a further Home to provide accommodation for some twenty aged persons; at the time of writing nineteen women are housed in St. Luke's Home, Cliff Road, and I know the Local Authority desire these persons to be accommodated in a Council Home. When 49 Pevensey Road becomes available, an event which I hope will not be long delayed, it will, in my view, provide very suitable accommodation for married couples as well as for men and women.

The Authority has retained its right to use accommodation to the extent of 20 beds at St. Mary's Hospital but at the end of the year, and indeed, up to date in the current year, no Local Authority cases were housed in St. Mary's. In view of the great demand for hospital beds, especially for the chronic sick, one is always loth, other than in a dire emergency, to exercise this right. In addition I cannot help taking the view that the housing of aged persons, other than the sick, in a hospital atmosphere is unsatisfactory.

Ministry of Health Circular 32/51 set out schemes for the provision of welfare services for Handicapped Classes other than the Blind and Partially Sighted, which two classes had already been provided for. Whilst these Schemes were not compulsory the Minister expressed the wish that Local Authorities would submit schemes and after due consideration the Council decided to make schemes on the lines set out in the circular. The schemes as submitted were approved by the Minister of Health on the 28th day of November on which date they became operative.

One scheme provides for persons who are Deaf or Dumb and the other provides for the following classes of handicapped persons:

Amputation.

Arthritis and Rheumatism.

Congenital malformation and deformities.

Diseases of the digestive and genito-urinary system, the heart or circulatory system, the respiratory system and the skin.

Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk.

Injuries or diseases of the upper and lower limbs and the spine.

Organic nervous diseases, epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc.

Neurosis, psychosis and other nervous and mental disorders.

Tuberculosis—respiratory and non-respiratory.

Diseases and injuries not specified above.

1. Provision of Residential Accommodation (Section 21 (i) (a))
A.—Aged, Infirm or Other Persons in Need of Care and Attention.
(i) Cavendish Lodge, Cavendish Place, provided and maintained by the Local Authority afforded accommodation for a maximum of 27 male residents. Admission and discharges were:
In Home on 31st December 1950
(ii) Trevin Towers. This Home, provided and maintained by the Local Authority, was opened on 21st May 1951 for the reception of cases. Admissions and discharges were:
Admitted
(iii) The Wolds, College Road, is a Voluntary Home for the Blind, provided and maintained by the Society for the Social Welfare of the Blind in Eastbourne. The Council accepted financial responsibility for Eastbourne cases as follows:
In Home on 31st December 1950
(iv) St. Luke's Home, owned and maintained by the Sisters of the Community of All Saints, accepted women for whom the Local Authority was responsible, as follows:
In Home on 31st December 1950
(v) St. Mary's Hospital. The arrangement with the Regional Hospital Board whereby the Council is entitled to the use of up to 20 beds continued. Admissions and discharges were:
In Annexe on 31st December 1950
Remaining in Hospital on 31st December 1951 —

(vi) Other Residential Homes. The following cases were accommodated in the undermentioned Homes at the end of the year:

Blind . . Two—One at Bolney Court, Bolney. One at Arretar House, Woking.

Epileptic Four-Two at Lingfield Epileptic Colony.

Two at Chalfont Colony, Buckinghamshire.

Aged .. One -At Bernhard Baron Cottage Homes, Polegate.

The classification of the cases remaining in the above Homes at the end of the year was:

	Cavendish Lodge	St. Luke's Home		evin vers	The Wolds
			M.	F.	
(a) Aged Persons	14	8	3	22	_
(b) Physically and Mentally					
Infirm	8	5	3	12	-
(c) Blind or partially sighted	ed 1	3	1	2	12
(d) Deaf and Dumb	-	_	_	1	
(e) Epileptic	1	_	-	1	-
(f) Crippled	2	3.	-	-	-
	_		_	_	_
	26	19	7	38	12
	_	-	_	-	_

B.—Accommodation for Temporarily Homeless Persons (Section 21 (i) (b))

The premises at 49 Pevensey Road were in use throughout the year for the accommodation of temporarily homeless families.

The following summary shows the number of persons dealt with:

	Men	Women	Children	Families
On 31st December 1950	3	12	25	12
Admitted during 1951	6	30	55	30
Remaining at 31st December 1951	5	11	25	11

Four families, consisting of two men, four women and eight children, were resident throughout the whole year.

Details of families accommodated on December 31st:

Women	Children	Men	Accommodated since
1	3	1	18- 3-50
1	1		20- 5-50
1	2	1	1- 7-50
1	3	1	25-12-50
1	3	1	9- 4-51
1	2		13- 1-51
1	2	1	16- 6-51
1	2	-	6- 7-51
1	3		29- 1-51
1	1	1	17- 8-51
1	3	-	10- 9-51

Two women were accommodated temporarily at the House of the Good Shepherd, and St. Luke's Home occasionally accepted persons in an emergency when no other accommodation was available.

C.—RECEPTION CENTRES (Section 17).

Under this Section the National Assistance Board has a duty to provide and maintain Reception Centres where persons without a settled way of living may be provided with temporary board and lodging. The Board may, however, require the Councils of Counties and County Boroughs to fulfil these functions, the Board being responsible for the expenditure incurred. In Eastbourne the Board has exercised this right and the department is responsible for the Reception Centre which is housed in part of the old Casual Block at St. Mary's Hospital.

The number of persons accommodated was:

			Males	Females	Children
January		 	145	1	-
February		 	149	3	-
March		 	209	4	4
April	The same of	 	228	10	1
May		 	212	12	
June		 	185	7	71 -
July		 	199	9	_
August		 	175	13	-
September		 	129	10	_
October		 	123	11	_
November		 	105	4	-4
December		 	150	3	_
	TOTALS	 	2009	87	1
				_	-

The hope that Centres of this type would not be necessary in the new Welfare State has unfortunately not materialised. Men, and indeed women, for various reasons, still "take to the road," and it would appear that they will continue to do so. It is the wish of the National Assistance Board that all possible efforts should be made to rehabilitate persons without a settled way of existence. I regret to report, however, that the efforts of the officers of the National Assistance Board and the staff of this department met with little success in this connection.

No Authority willingly accepts the provision of a Centre of this type in its area and the Hospital Management Committee, with no little justification, opposed the re-establishment of the Centre at St. Mary's, It would, however, appear that no other premises are available for the purpose in this part of the county. It was my duty to report that the facilities provided at the Centre did not come up to a reasonable standard and now, following protracted negotiations over a period of some two years, it has been decided to put in hand the work of alteration and the provision of equipment I recommended.

2. REGISTRATION OF DISABLED AND OLD PERSONS HOMES (Section 37).

One new Home for old persons was registered. The total number of Homes on the Register at the end of the year was seven for old persons, providing fifty-seven beds; two for disabled persons, providing forty-four beds and five for old persons and disabled persons, providing one hundred and nine beds. These Homes were inspected by the medical staff of the department and thirty-four visits of inspection were made.

Removal to Suitable Premises of Persons in Need of Care and Attention (Section 47).

This Section provides for application to be made to a Court of Summary Jurisdiction or to a single Justice for the compulsory removal of persons, in certain defined unsatisfactory circumstances, from premises in which they reside. No cases were dealt with.

4. CARE OF PROPERTY (Section 48).

Property of the following cases was taken care of:	
Patients in Mental Hospitals	5
Persons in accommodation provided under Part III of	
this Act	2

The property of some thirty-five persons remained in the Council's care at the end of the year, but as it is stored at the Public Health Department no expense was involved.

5. Burials (Section 50).

Arrangements were made for the burials of ten persons. Approximately thirty-nine per cent of the cost involved was recovered.

6. Welfare Services (Section 29).

(a) BLIND PERSONS.

(i) Registration. There were one hundred and forty-nine blind persons on the Register at the end of 1950. Forty-nine new cases were certified in the year under review and five were transferred to Eastbourne from other areas. Fifteen persons died, one was removed from the Register being no longer blind, and two were transferred to other areas. The total on the Register at the end of the year was one hundred and eighty-five (eighty males and one hundred and five females) on the following age groups:

Age Group		Males	Females	Total
Under 5 years		_	_	_
Between 5 and 15 years		2		2
Between 16 and 30 years		4	4	8
Between 31 and 50 years	7.	16	4	20
Between 51 and 70 years		22	24	46
Over 70 years		36	73	109
		-		_
		80	105	185
		_	_	-

The following Table shows the state of the Blind Persons Register over the last thirty years:

BLIND PERSONS' REGISTER 1922-1951

Year	Males	Females	Total	Year	Males	Females	Total
1922	26	36	62	1937	33	51	84
1923	30	37	67	1938	33	47	80
1924	30	37	67	1939	31	46	77
1925	27	38	65	1940	34	41	75
1926	28	36	64	1941	33	44	77
1927	27	39	66	1942	37	53	90
1928	33	42	75	1943	38	50	88
1929	36	45	81	1944	34	47	81
1930	37	51	88	1945	38	52	90
1931	38	50	88	1946	36	53	89
1932	35	47	82	1947	35	58	93
1933	38	47	85	1948	43	70	113
1934	32	44	76	1949	52	76	128
1935	30	49	79	1950	57	92	149
1936	33	47	80	1951	80	105	185

(ii) Home Workers.—One blind man was included in the Home Workers Scheme of the National Institute for the Blind as a basket maker.

(b) PARTIALLY SIGHTED PERSONS.

The Council's Scheme provided that the services available for the blind shall also be generally available for the partially sighted. At the end of the year there were 52 partially sighted persons on the Register.

(c) VOLUNTARY ORGANISATIONS (Section 30).

(i) Blind and Partially Sighted.—The Local Authority made a grant of £25 to the Society for the Social Welfare of the Blind in Eastbourne. The social amenities and other services provided by this organisation were available for the partially sighted as well as for the blind.

- (ii) Deaf and Dumb.—The Sussex Diocesan Association for the Deaf and Dumb continued to act as the Authority's agents for the welfare of the Deaf and Dumb. Seventeen cases were on the Register at the end of the year, and a capitation fee of £3 was paid in respect of each case. The facilities provided by the Association included visiting, placement in employment, Church Services and socials in Eastbourne and Hastings, and welfare work generally.
- (iii) Cripples.—The arrangement whereby the Eastbourne Voluntary Association for the Care of Cripples acts as agent for the Local Authority was continued. A capitation fee of 30s. per annum for each person on the Register, subject to an overall minimum payment of £100, was provided for. The Association, in addition to visiting, teaching of homecrafts and general welfare work provided a handicraft centre. This Centre was held at All Saints' Parish Hall on Tuesdays and 18 persons made 657 attendances; very satisfactory arrangements were made for the sale of completed articles. The number of crippled persons on the Register at the end of the year was 72.
- (iv) Hard of Hearing.—A grant of £25 was made to the Eastbourne and District Hard of Hearing Club, which organisation was established during the year. In addition to a very successful club an excellent start has been made in providing for welfare facilities.
- (d) OLD PEOPLE'S ORGANISATIONS (Section 31).
- (i) Women's Voluntary Services.—The following table gives details of the meals served and the prices charged over the twelve ration periods:

Meals	One Shilling	Reduced	Free
Supplied	and twopence	Rate	
426		_	_
371	277	45	49
438	336	58	44
357	256	57	44
451	298	85	68
439	285	76	78
403	248	74	81
372	211	76	85
393	225	76	92
425	247	83	95
447	271	102	74
385	231	87	67
		<u> </u>	
4907	2885	819	777
_		-	

Some 170 persons were supplied with these meals and the service was subsidised to the extent of £89 3s. 10d. by the Local Authority.

(ii) Eastbourne Old People's Welfare Committee.—This organisation with the enthusiastic leadership and support of His Worship the Mayor was again most active. Its function is to co-ordinate the activities of the various voluntary bodies in the town dealing with the welfare of, and the provision of amenities for, old people.

Pensioners Clubs functioned at:

Brodie Hall, Seaside—Afternoon 2.30 p.m. to 5.30 p.m. Pitman Institute, Church Street—Monday and Thursday 2.30 p.m. to 5.30 p.m.

- Over 60 Club, Foresters Hall, Languey Road—Tuesday and Thursday—2.30 p.m. to 5.30 p.m. Two Thursdays per month until ten p.m.
- (iii) British Red Cross Society—Chiropody Service.—The Chiropody Service provided by the Eastbourne Division of the British Red Cross Society at its headquarters in Grove Road was of inestimable value to old people. In the case of aged persons treatment of the feet may well make the difference between ambulancy and immobility. The Chiropody centre was open on one evening a week and two registered Chiropodists gave their services.

The Local Authority has no power to provide a general Chiropody Service although it can, and indeed now has, provided facilities for the residents in its own Homes. The Red Cross Clinic will continue to be available for the many aged persons living in their own homes who need this service. Persons to the number of 148 made 709 attendances at the Red Cross Chiropody Clinic.