

[Report 1957] / Medical Officer of Health, Eastbourne County Borough.

Contributors

Eastbourne (England). County Borough Council.

Publication/Creation

1957

Persistent URL

<https://wellcomecollection.org/works/dbp6sgdg>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

44144
COUNTY BOROUGH OF EASTBOURNE

ANNUAL REPORT

OF THE

Medical Officer of Health

AND

Principal School Medical Officer

FOR

1957

ON THE

**HEALTH, WELFARE, AND
SCHOOL HEALTH SERVICES**

KENNETH O. A. VICKERY, M.D., M.R.C.S., D.P.H.,
Medical Officer of Health



COUNTY BOROUGH OF EASTBOURNE

ANNUAL REPORT

OF THE

Medical Officer of Health

AND

Principal School Medical Officer


FOR

1957

ON THE

**HEALTH, WELFARE, AND
SCHOOL HEALTH SERVICES**

KENNETH O. A. VICKERY, M.D., M.R.C.S., D.P.H.,
Medical Officer of Health



Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

<https://archive.org/details/b29187746>

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1957, the sixty-sixth in the series.

Poliomyelitis Vaccination, page 31

Considerable effort was expended in the department in the further implementation of the programme of vaccination against poliomyelitis. The vast majority of these vaccinations were undertaken in local health authority premises and in schools. I am particularly grateful for the help and co-operation of the Local Medical Committee and general practitioners in this connection.

Other Immunisations, page 27

It is also pleasing to note that in spite of pre-occupation with this matter there was no letting up in the numbers of protective inoculations against diphtheria, whooping cough and smallpox.

Infectious Disease, page 50

Infectious disease presented no undue problems. There was a sharp visitation of Asian influenza resulting in many people being off work, but the total of deaths from influenza, bronchitis and pneumonia was no greater than during the previous three years.

Statistics, page 12

The infant mortality rate at 18.27 remained well below the national average, Eastbourne during 1956 having the lowest infantile mortality rate of any County Borough. I am happy also to report that for the second year in succession there were no deaths of mothers during childbirth. Whilst there was little change in the number of stillbirths there was an increase in the number of premature births beyond that which might be expected from the slight increase in the birth rate.

Health Education, page 36

Available statistics give little information regarding the number of abortions which occur, of the number of unwanted pregnancies, or of the number of difficult deliveries which will result in gynaecological complications later in life. We know, however, that the whole subject

of human reproduction progressing from the problems of adolescence on to courtship, marriage, family planning, child bearing, child nurture, and the climacteric is one which gives rise to considerable anxiety and distress of which much is due to ignorance and misapprehension. This represents but part of a tremendous task for the local health authority in health education towards the encouragement of healthy ways of living in the community. This is never ending and unspectacular work, the results of which so often can only be seen in retrospect. Nevertheless, it is necessary for the local health authority to avoid dissipating its limited resources by duplication of clinical and curative services which remain primarily the responsibility of the family doctor and hospital.

Maternal and Child Care, page 17

In this context considerable progress was made during 1957 in regard to health education of the expectant mother and was made possible by Ministry of Health Circular 9/56 which prepared the way for meetings between officers of the three parts of the National Health Service. The memorandum on ante-natal care emphasised the importance of health educational activities and agreement was reached that the local health authority should be primarily responsible. The Council's ante-natal clinics have subsequently been given a new lease of life, not to perform clinical work but wholly for health education and relaxation classes.

In the field of child welfare I am pleased to report for the second successive year a gratifying increase in attendances at the Council's child welfare centres where again the main emphasis is upon health educational activities.

Cancer, page 14

The number of deaths from cancer, 185, was the highest ever, representing a rate per thousand of 3.20. Of these, there were 38 deaths from lung cancer, an increase of 10 over the previous year; more than nine times as many deaths as from road accidents and a sharp reminder of the evidence of the Medical Research Council on the association between smoking and lung cancer.

Environmental Health, page 62

The local authority rightly maintains constant vigilance over environmental conditions and in the elimination of unfit dwellings. Its officers are, however, mindful that, whilst a shortage of separate units of accommodation remains, a modicum of inherent dampness and disrepair is probably far less damaging to the health of a family than the ill effects of sharing accommodation and lack of privacy which besets so many young families at the present time. Eastbourne is indeed fortunate in that its slum problem is relatively small, nevertheless a further eighteen houses within a clearance area under the Council's five-year programme were dealt with, together with ten individual unfit houses. By the end of the year 69 of the 113 houses in the Council's 1954 five-year plan had been dealt with.

Food and Food Hygiene, page 53

Inspection of food and food premises has remained one of the most important responsibilities of the department. The approach of the Public Health Inspector is in an educational capacity rather than that of an enforcement officer and it is pleasing to report that the response of the catering trade is on the whole very co-operative. There were, however, two instances of gross infringements of the Food Hygiene Regulations which led to convictions with substantial fines and costs in the case of two cafe proprietors.

The only reported outbreak of food poisoning was confined to a party of public health officials who indulged in oysters which were found to be of doubtful origin.

The Public Health Inspectors have drawn my attention on several occasions in the course of the year to what might be termed "the glucose racket", a current trend in advertising which seeks to impress the public of the values of various sweetmeats and beverages which have "added glucose" or "contain glucose for immediate energy" or which are "rich in glucose". The Public Analyst confirms that these products do in fact contain glucose so that in the absence of any standard there would appear to be no contravention of the appropriate section of the Food and Drugs Act, 1955, which relates to false or misleading statements.

The public, however, would do well to remember that commercial glucose is a cheap article, usually prepared by boiling starch with acid. It is no more advantageous as a nutrient than common sugar, of which the average person already consumes more than enough in one form or another. This kind of advertisement attracts particularly the conscientious housewife who has the health of her family at heart. She would be better advised to spend the money on fresh fruit in season.

Mental Health, page 41

The Medical Superintendent and the consultant staff of the local mental hospital continued to offer a helpful and prompt domiciliary visiting service. We are indeed fortunate in the progressive outlook of these officers who work fully within the spirit and intent of the Royal Commission Report.

The local mental hospital is more and more becoming to be regarded by the public as any other hospital where admission and discharge takes place with a minimum of formality and where there is a very real hope of treatment and cure. Likewise, the mental health officers, we trust, are regarded not as members of a press gang seeking to certify and incarcerate in asylums unfortunate individuals suffering from disordered or deficient mentality but rather to assist sufferers in every possible way to obtain help and treatment and remain at home if at all possible. So great is the demand on hospital beds that it is indeed farthest from the desire of local authority or hospital officer that any person should be kept in hospital a day longer than necessary.

One disadvantage, however, of the modern outlook, with its very laudable emphasis on treatment, turnover, and discharge, is an increasing difficulty in the placement of the chronic mental patient for whom little can be done, who needs custodial care and who in the community in consequence of the anxiety caused to relatives, neighbours, and attendants, may be the precipitating cause of further mental illness in a younger generation.

Care of the Aged and Chronic Sick, page 45

The problem of the care of the aged and chronic sick increased further during the year. A serious shortage of hospital beds placed a great strain upon the Council's residential and domiciliary services. A statement of the apportionment of responsibilities as between welfare and hospital authorities contained in Circular 14/57 is welcomed, and in particular the reference to the hospitals' responsibility in caring for the senile confused or disturbed patient. Unfortunately, the Circular has not so far had the effect of increasing the number of beds available in either the general or the mental hospitals so that a number of such patients have remained in our homes to the continued distress of residents and staff.

Acknowledgments

The best wishes and thanks of the Council and the Department were extended to Mr. A. H. Hookham, Chief Lay Administrative Officer and Borough Meteorologist, who retired after thirty-nine years' loyal service. A further loss was sustained by the resignation of Miss I. Morley, Superintendent of Home Nursing and Midwives, to pursue her nursing career in Australia.

The voluntary organisations have continued their valued help during the year. The services of the St. John Ambulance Brigade, the Society for the Social Welfare of the Blind, the Eastbourne Voluntary Association for the Care of Cripples, the British Red Cross Society, and the Women's Voluntary Services must be particularly acknowledged.

My renewed thanks are also due to you, Mr. Mayor, and members of the Council, for your continued interest and encouragement to the work of the department.

Finally, I should like to place on record my appreciation of the loyal help and support of the staff during the year and in particular to the heads of sections for their assistance in compiling this Report.

I am, Mr. Mayor, Ladies and Gentlemen,

Yours faithfully,

KENNETH VICKERY,

Medical Officer of Health.

PUBLIC HEALTH COMMITTEE

(as constituted at 31st December, 1957)

The Mayor:

ALDERMAN SYDNEY MORRIS CAFFYN, J.P.

Chairman:

COUNCILLOR W. E. HAFFENDEN

Deputy Chairman:

COUNCILLOR F. A. POPE

Councillors:

J. B. COVENTRY
E. O. FINCH
MRS. E. V. F. FORDHAM
MRS. J. GANDY
MRS. W. L. LEE
F. C. SOLLY

HEALTH SERVICES COMMITTEE

(as constituted at 31st December, 1957)

The Mayor:

ALDERMAN SYDNEY MORRIS CAFFYN, J.P.

Chairman:

COUNCILLOR J. B. COVENTRY

Deputy Chairman:

COUNCILLOR S. F. MARTIN

Councillors:

MRS. E. V. F. FORDHAM
S. W. HOLDEN
A. S. HULBERT
MRS. W. L. LEE
W. A. NEALE
S. R. TOMSETT

Co-opted Members:

MR. D. R. GENT—Eastbourne Executive Council
DR. J. EMSLIE—Eastbourne Local Medical Committee
MR. E. G. WATT—Eastbourne Hospital Management Committee

WELFARE SERVICES COMMITTEE

(as constituted at 31st December, 1957)

The Mayor:

ALDERMAN SYDNEY MORRIS CAFFYN, J.P.

Chairman:

ALDERMAN MISS E. M. THORNTON, J.P.

Deputy Chairman:
COUNCILLOR T. A. ALSTON

Alderman:
MISS G. L. PARKER

Councillors:
MRS. J. GANDY
A. S. HULBERT
W. P. LEBBON
MRS. W. L. LEE
G. A. RAINEY, J.P.

COMMITTEES

The regular business of the respective Committees remained as set out in my Annual Report for 1953.

PUBLIC HEALTH DEPARTMENT STAFF

Medical Officer of Health:
KENNETH O. A. VICKERY, M.D., B.S.(Lond.), M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health:
ERIC W. WRIGHT, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health:
MARJORIE I. GODSON, M.B., Ch.B.

Chief Dental Officer:
M. G. BERRY, L.D.S., R.C.S.

Assistant Dental Officer:
J. W. MARTIN, L.D.S.

Chief Public Health Inspector:
ARTHUR LINDFIELD, Cert. R.S.I.

Deputy Chief Public Health Inspector:
F. T. RIPPIN, Cert. S.I.B.

Public Health Inspectors:
G. N. RICHARDS, Cert. S.I.B.
L. G. HOWARD, Cert. S.I.B.
J. N. CONNELL, Cert. S.I.B.
A. MATTHEWS, Cert. S.I.B.

Superintendent of Home Nursing Service and Non-Medical Supervisor of Midwives:
MISS I. MORLEY, S.R.N., S.C.M., Q.N.

Domiciliary Nurses:
(a) *Whole-time:*
MISS R. N. ANDREWS, S.R.N., Q.N.
MRS. I. BOOTHROYD, S.R.N., S.R.F.N., Q.N.
MRS. E. A. G. CHAPMAN, S.R.N.
MISS M. A. GETHEN, S.R.N., Q.N.
MRS. W. G. HARRIOTT, S.R.N.

MR. G. J. W. HUNT, S.R.N., Q.N.
MRS. J. E. JERRATT, S.R.N., Q.N. (Senior)
MRS. G. M. MEEN, S.R.N.
MRS. F. A. PURCHASE, S.R.N.
MRS. J. E. RAINSLEY, S.R.N.
MRS. P. M. RANSOM, S.R.N., Q.N. (to 30.6.57)
MR. A. ROTCHELL, S.R.N., Q.N.
MRS. N. SPENCE, S.R.N., S.C.M., Q.N.
MISS A. M. WILLIS, S.R.N., S.C.M., Q.N.
MISS E. WOODS, S.R.N.

(b) Part-time

MISS D. EZZARD, S.R.N., S.C.M., Q.N.
(Part-time Home Nurse and Midwife)
MRS. J. S. MILLICHAMP, S.E.A.N.
MRS. B. PILCHER, S.E.A.N.
MRS. M. E. SCOTT, S.E.A.N.
MRS. A. M. URIDGE, S.E.A.N.

Domiciliary Midwives:

MISS M. A. BENNETT, S.C.M.
MISS F. M. SCAMMELL, S.R.N., S.C.M.
MISS D. EZZARD, S.R.N., S.C.M., Q.N.
(Part-time Midwife and Home Nurse)

Superintendent Health Visitor:

MRS. S. M. JAMES, S.R.N., H.V. Cert.

Health Visitors:

MISS J. C. M. BERK, S.R.N., H.V. Cert.
MISS E. L. CLARK, S.R.N., H.V. Cert.
MRS. D. I. DALE, S.R.N., S.C.M., H.V. Cert.
MRS. L. FOSTER, S.R.N., S.C.M., H.V. Cert.
MISS E. E. GRIFFIN, S.R.N., S.C.M., H.V. Cert.
MISS M. G. HEMMING, S.R.N., H.V. Cert.
MISS B. J. HUDSON, S.R.N., S.C.M., H.V. Cert.
MISS M. J. PARTRIDGE, S.R.N., S.C.M., H.V. Cert.

Home Teacher of the Blind:

MISS D. S. MACEY, Dipl. of H.T. for Blind (to 8.3.57)
MISS E. E. INESON (from 6.3.57)

Senior Duly Authorised Officer and Welfare Services Officer:

V. O. F. LITTLE

Duly Authorised Officer and Assistant Welfare Officer:

H. A. HURT

Duly Authorised Officer and Female Mental Health Worker:

MISS N. G. FULLER

Part-time Duly Authorised Officer:

MRS. L. FOSTER, S.R.N., S.C.M., H.V. Cert.

Clerical Staff:

A. H. HOOKHAM, F.R.Met.Soc.
(Chief Lay Administrative Officer, to September, 1957)
E. TARBUCK (Chief Lay Administrative Officer, from 7.9.57)
R. G. LARCHER (Senior Clerk, from 2.9.57)
W. L. PECK

C. A. HEMSLEY (to 3.8.57)
 I. J. USHER (from 16.9.57)
 MISS G. E. WOODS
 MISS D. M. BEETLESTONE
 MISS M. S. HARDY
 MRS. V. HARDY-KING
 MISS V. M. RANGER
 MISS D. J. PARK
 MISS J. HARRIOTT
 MISS J. E. J. CUCKNEY
 MR. E. G. ELKINGTON (from 9.9.57)

Dental Attendants:

MISS D. D. SIDLEY
 MISS A. SLADE (to 3.8.57)
 MISS D. M. CLARKE (from 6.8.57)

Chest Physician (Part-time):

A. H. FERGUSON GOW, M.R.C.S., L.R.C.P.
 (Chest Physician, S.E. Metropolitan Regional Hospital Board)

Public Analyst:

R. F. WRIGHT, B.Sc.(Lond.), A.R.C.S., F.R.I.C.

Occupation Centre, Salehurst Road:

MISS D. S. LONES (Supervisor)

Princes Park Day Nursery:

MISS M. J. KENNEDY (Matron)

Staff of Public Health Department

(31st December, 1957)

	<i>Full-time</i>	<i>Part-time</i>	<i>Total</i>
Medical Officer of Health, Deputy and Assistant	3	—	3
Dental Officers	2	—	2
Clerical Staff, including School Health and Home Nursing Services	16	—	16
Dental Attendants	2	—	2
Public Health Inspectors	6	—	6
Health Visitors	9	—	9
Home Nurses (including Superintendent)	15	5	20
District Nurse/Midwife	1	—	1
Domiciliary Midwives	2	—	2
Blind Visitor	1	—	1
Welfare Officer and Authorised Officers	3	—	3
Day Nursery	9	5	14
Occupation Centre	4	1	5
Old People's Homes	30	10	40
The Knowle (Home for Temporary Homeless)	2	—	2
Old Town and Seaside Baths	7	1	8
Domestic Helps	2	31	33
Rodent Operators	2	—	2
Others— <i>i.e.</i> Cleaners, Caretakers, Van Driver	3	6	9
	119	59	178

The duties of the Senior Public Health Officers remained as set out in my Annual Report for 1953.

SECTION A

GENERAL

Vital Statistics

Notification of Births

General Information—Natural and Social Conditions

VITAL STATISTICS

Estimated Mid-Year Population—57,800

Births

			<i>Male</i>	<i>Female</i>	<i>Total</i>
Live Births—Legitimate	..	..	321	250	571
Illegitimate	..	..	14	17	31
			—	—	—
			335	267	602
			—	—	—
Still Births—Legitimate	..	..	9	4	13
Illegitimate	..	..	—	—	—
			—	—	—
			9	4	13
			—	—	—

Deaths

All causes	397	511	908
------------	----	----	----	----	-----	-----	-----

			<i>Eastbourne</i>	<i>England & Wales</i>
Live Birth Rate per 1,000 population	..	..	10·41	16·1
Still Birth Rate per 1,000 live and still births	..	..	21·13	22·4
Birth Rate after applying "Area Comparability Factor"	..	..	11·86	—
Death Rate (Crude) per 1,000 population	..	..	15·72	11·5
Death Rate after applying "Area Comparability Factor"	..	..	10·5	—
Number of Deaths from Tuberculosis	..	..	10	4,584
Tuberculosis Death Rate per 1,000 population	..	..	0·17	0·107
Maternal Mortality—				
Number of Maternal Deaths	..	..	—	349
Rate per 1,000 live and still births	..	..	0·00	0·47
Deaths of Infants under one year of age	..	..	11	16,641
Death Rate of Infants under one year of age—				
All Infants per 1,000 live births	..	..	18·27	23·0
Legitimate Infants per 1,000 legitimate live births	..	..	17·51	—
Illegitimate Infants per 1,000 illegitimate live births	..	..	32·25	—

Causes of Death

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Tuberculosis, respiratory	7	1	8
Tuberculosis, other	1	1	2
Syphilitic disease	1	1	2
Whooping cough	—	1	1
Malignant neoplasm, stomach	12	6	18
Malignant neoplasm, lung, bronchus	31	7	38
Malignant neoplasm, breast	—	22	22
Malignant neoplasm, uterus	—	5	5
Other malignant and lymphatic neoplasms	36	66	102
Leukaemia, aleukaemia	1	4	5
Diabetes	2	1	3
Vascular lesions of the nervous system	54	90	144
Coronary disease, angina	72	68	140
Hypertension with heart disease	3	2	5
Other heart disease	52	120	172
Other circulatory disease	28	14	42
Influenza	9	9	18
Pneumonia	8	8	16
Bronchitis	13	6	19
Other diseases of the respiratory system	9	2	11
Ulcer of stomach and duodenum	5	6	11
Gastritis, enteritis and diarrhoea	2	2	4
Nephritis and nephrosis	4	3	7
Hyperplasia of prostate	7	—	7
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	3	1	4
Other defined and ill-defined diseases	28	43	71
Motor vehicle accidents	—	4	4
All other accidents	3	9	12
Suicide	6	9	15
	—	—	—
	397	511	908
	—	—	—

Age Mortality

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Under 1	7	4	11
1-5	—	1	1
5-15	1	—	1
15-25	1	—	1
25-45	9	11	20
45-65	77	72	149
65-75	126	126	252
75 and over	176	297	473
	—	—	—
	397	511	908
	—	—	—

Deaths from Cancer

	Year	Population	Age Groups						Total Deaths	Death Rate per 1,000 Population
			0-1	1-5	5-15	15-45	45-65	65 and over		
Ten Years	1939	59,470	—	—	1	12	69	30	112	1.88
	1940	53,760	—	1	—	4	37	53	95	1.76
	1941	27,750	—	—	—	1	24	48	73	2.64
	1942	30,960	—	—	—	4	30	48	82	2.68
	1943	27,380	—	—	—	3	29	52	84	3.06
	1944	27,980	—	—	—	2	26	67	95	3.43
	1945	39,300	—	1	—	6	43	79	129	3.28
	1946	49,790	—	—	—	4	54	69	126	2.53
	1947	53,540	—	—	—	7	31	87	125	2.33
	1948	56,610	—	1	1	5	35	92	134	2.36
	Total	—	—	3	2	48	378	625	1,055	—
Nine Years	1949	56,880	—	—	—	9	40	79	128	2.25
	1950	58,050	—	—	—	9	54	100	163	2.80
	1951	57,510	—	—	1	4	46	77	128	2.22
	1952	57,200	—	—	—	4	46	94	114	2.51
	1953	57,190	—	—	—	8	55	85	149	2.61
	1954	57,600	—	—	—	4	33	96	133	2.30
	1955	57,830	—	1	—	3	51	113	168	2.91
	1956	57,850	—	—	—	5	46	103	154	2.66
	1957	57,800	—	—	—	3	58	124	185	3.20
	Total	—	—	1	1	49	429	871	1,322	—

NOTIFICATION OF BIRTHS

Nine hundred and seventy-six live births and eighteen still births took place in the Borough and were notified to the local authority. Five hundred and eighty-three live births and twelve still births were to mothers resident in Eastbourne and three hundred and ninety-three live births and six still births were to mothers resident outside the Borough. In addition there were four inward transfers of live births relating to Eastbourne mothers confined elsewhere than in Eastbourne.

Analysis of Notifications

	<i>Residents</i>		<i>Non-Residents</i>		<i>Total</i>		<i>Total</i>
	<i>Live Births</i>	<i>Still Births</i>	<i>Live Births</i>	<i>Still Births</i>	<i>Live Births</i>	<i>Still Births</i>	<i>All Births</i>
DOMICILIARY							
Local Authority Midwives	96	—	—	—	96	—	96
Midwives in Private Practice	—	—	—	—	—	—	—
Total Domiciliary ..	96	—	—	—	96	—	96
INSTITUTIONAL							
Maternity Home ..	345	8	111	—	456	8	464
St. Mary's Hospital ..	138	4	278	6	416	10	426
Nursing Homes ..	4	—	4	—	8	—	8
Inward Transfers ..	4	—	—	—	4	—	4
Total Institutional ..	491	12	393	6	884	18	902
Total, All Births, 1957 ..	587	12	393	6	980	18	998
Notified Births: 1956 ..	562	13	367	7	929	20	949
1955 ..	543	12	361	7	904	19	923
1954 ..	604	10	349	9	953	19	972
1953 ..	632	8	313	4	945	12	957
1952 ..	623	17	288	9	911	26	937

GENERAL INFORMATION, NATURAL AND SOCIAL CONDITIONS

Situation

Latitude 50° 46' N. : Longitude 0° 17' E.

Eastbourne is situated on and at the foot of the eastern slope of the South Downs, facing the English Channel, with an open exposure south and south-east.

Elevation

The highest point is about 640 feet above sea level on the Downs, sloping from the west to a minimum of 6·58 feet above highest mean sea level in the east of the Borough.

Area

The acreage of the Borough is 11,356 acres including foreshore (332 acres) and inland water (19 acres).

Density of Population

Approximately 5 persons per acre. The parts built over vary with locality from 10 to 50 with an average of about 20 persons per acre.

NUMBER OF SEPARATE ASSESSMENTS—21,668

RATEABLE VALUE year ended 31st March, 1958—£1,325,908

GENERAL RATE—13s. 10d.

PRODUCT OF A 1d. RATE—£5,306

METEOROLOGY—60 years' averages—

Temperature: Max., 55·9° F.; Min., 45·5° F.; Mean, 50·7° F.
Sea, 51·9° F.

Sunshine: Total, 1,811·1 hours; Daily, 4·96 hours.

Rainfall: Total, 31·25 inches; Days, 165.

A description of climate, natural features and geology of Eastbourne is to be found in the 1955 Report of this series.

Visitors to Eastbourne

All the many services of the department, including the Home Nursing Service, were made as freely available to visitors as staffing would permit without detriment to local residents.

Numerous enquiries from all over the British Isles regarding climate, nursing homes and the suitability of Eastbourne for retirement in relation to specific disabilities were answered.

SECTION B

NATIONAL HEALTH SERVICE ACT

(LOCAL HEALTH SERVICES)

Health Services: Financial Statistics

Section 22—Care of Mothers and Young Children

- „ 23—Midwifery
- „ 24—Health Visiting
- „ 25—Home Nursing
- „ 26—Vaccination and Immunisation
- „ 27—Ambulance Service
- „ 28—Prevention of Illness, Care and After Care
- „ 29—Domestic Help
- „ 51—Mental Health

HEALTH SERVICES STATISTICS

The total gross expenditure on the Health Services during the financial year ended 31st March, 1957, was £70,471, towards which an exchequer grant of £29,271 was received. After deducting other income the net rate borne expenditure was £31,216, representing £539 per 1,000 population compared with an average expenditure of £540 12s. per 1,000 population for all County Boroughs.

The figures of expenditure have been obtained from the Borough Treasurer's Abstract of Account and unit costs from the Return of Local Health Services Statistics published by the Institute of Municipal Treasurers and Accountants (Incorporated).

MATERNAL AND CHILD CARE

Ante-natal Care

I am required by Ministry of Health Circular 1/58 to report on developments following meetings held to discuss the Memorandum on Ante-natal Care related to toxæmia.

So far as this local health authority is concerned the most satisfactory development has been increased co-operation by general practitioners and the hospital services with ante-natal health education facilities provided at the local authority clinics. Health education has emerged as the prime responsibility of the local health authority in this field. At the same time it has been made clear that the local health authority stakes no claim in the provision of clinical services for the expectant mother beyond the usual examinations undertaken by domiciliary midwives. These latter examinations are now carried out in the patient's house. Attendance of expectant mothers at the local authority's health centres is wholly for educative purposes including classes in relaxation and exercises.

These sessions have become flourishing in numbers and interest. Every effort is made to make mothers feel welcome. Interest is sustained by a liberal use of visual and sensory aids including

sound films, filmstrips, tape recorder, flannelgraphs and models. Demonstrations are given by midwives and health visitors who work harmoniously together integrating their respective fields of activity.

The Memorandum on Ante-Natal Care related to Toxaemia refers to the importance of advice on general nutrition and, in this connection, the health education team are mindful of the evidence of the relationship of weight and toxaemia (Nixon, W. C. W., *Postgrad. Med. J.*, 31, 266) and also the correlation of fibre content of diet with the incidence of eclampsia and toxaemia (Hipsley, E. H., 1953, *Brit. Med. J.*, ii, 420). Expectant mothers are, therefore, given practical advice on sound wholesome feeding advocating a basis of good quality protein supported by some fresh uncooked vegetable and fruit each day coupled with a conscious cutting down of refined starches and sugars to be replaced by a moderation of wholegrain cereals. Plans are in hand for these aspects to be further developed by simple food preparation and cookery demonstrations.

There is little to report of other developments arising from the meetings since ante-natal care in its clinical aspects was considered by the consultants and practitioner representatives to be generally satisfactory. The meeting recommended and produced a common form of ante-natal record but there is little evidence of its common use in this authority.

Clinic facilities continued to be available during the first half of the year for examinations by the midwives and in those few cases not booked with a family doctor by the Authority's medical officer. Facilities for taking specimens of blood were also continued.

Post-Natal Care

Attendances at the clinic were very few. Confined mothers were urged to avail themselves of the services of the family doctor or hospital.

Statistics

Number of Clinic Sessions (Ante-Natal)	..	122
Total attendances (Clinical)	.. ..	599
Number of mothers attending (Clinical)	..	135
Number of new cases	.. ..	81
Number of cases examined by Medical Officer	..	3
Number of specimens of blood taken for Rh factor		95
Number accepting invitation to attend local authority's dental centre	.. ..	20
Number referred for X-ray	.. ..	—
Number referred to own doctor	.. ..	31
Attendances at post-natal clinic	.. ..	4

Maternal, Infantile and Child Mortality

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

The deaths occurred of eleven infants (seven males and four females) under one year of age. One child died between the ages of one and five years. Details are as follows:—

Deaths of Infants Under One Year of Age

<i>Age</i>	<i>Sex</i>	<i>Where Died</i>	<i>Cause of Death</i>
7 hours	M	9, Upperton Road	I. (a) Atelectasis of lungs. (b) Prematurity.
13 hours	M	„ „	I. (a) Partial atelectasis. (b) Congenital nasal obstruction.
23 hours	M	„ „	I. (a) Partial atelectasis of lung with prematurity.
1 day	F	St. Mary's Hosp.	I. (a) Suprarenal insufficiency. (b) Bilateral suprarenal haemorrhage.
1 day	M	„ „	I. (a) Prematurity (26 weeks).
1 day	M	„ „	I. (a) Peripheral circulatory failure. (b) Prematurity.
1 day	F	„ „	I. (a) Peripheral circulatory failure. (b) Prematurity.
2 days	M	„ „	I. (a) Prematurity. (b) Patent intra auricular septum.
2 weeks	M	„ „	I. (a) Congenital heart disease.
1 month	F	„ „	I. (a) Cardiac failure. (b) Endocardial fibroelastosis.
8 months	F	„ „	I. (a) Bronco pneumonia. (b) Whooping cough.

Deaths of Children aged One to Five Years

2 years	F	St. Mary's Hosp.	I. (a) Respiratory failure. (b) Cerebral softening. (c) Thrombosis of cerebral veins.
---------	---	------------------	---

Maternal and Infantile Mortality, 1894-1957

<i>Years</i>	<i>Infant Deaths</i>	<i>Infantile Mortality Rate</i>	<i>Maternal Deaths</i>	<i>Maternal Mortality Rate</i>
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	42.4	2.1	3.72
1944-1953 Average	17.4	23.42	1	1.25
1954	8	13.07	—	—
1955	10	18.08	1	1.76
1956	8	14.21	—	—
1957	11	18.27	—	—

Prematurity (*i.e.* babies weighing 5½ lb. or less at birth irrespective of period of gestation)

Equipment is provided by the department for the care of premature infants born at home and very satisfactory provision is available in the hospitals.

(a) NUMBER OF PREMATURE LIVE BIRTHS NOTIFIED

<i>Place of Birth</i>	<i>Resident</i>	<i>Non-Resident</i>	<i>Total</i>
Own Home	3	—	3
Maternity Home ..	19	3	22
St. Mary's Hospital ..	14	24	38
Manor Hall Nursing Home	1	—	1
	—	—	—
	37	27	64
	—	—	—

(b) DEATHS OF PREMATURE INFANTS WITHIN 28 DAYS

<i>Died in first 24 hours</i>	<i>Resident</i>	<i>Non-Resident</i>	<i>Total</i>
St. Mary's	1	2	3
Maternity Home ..	4	—	4
(ii) <i>Died within 1-28 days</i>			
St. Mary's Hospital ..	1	2	3
Maternity Home ..	—	—	—
	—	—	—
	6	4	10
	—	—	—

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.

Four Eastbourne girls were accommodated in Homes and Hostels outside Eastbourne for a total period of 238 days.

Child Welfare Clinics

These were held at the following times:—

Avenue House—Monday afternoons.

Acacia Villa, Seaside—Tuesday afternoons.

120-122, Green Street—Wednesday afternoons.

Langney Village Community Centre—Thursday afternoons.

Hampden Park Hall—Friday afternoons.

Attendances at these Child Welfare Clinics were:—

	<i>Born in</i> 1957	<i>Born in</i> 1956	<i>Born in</i> 1952/55	<i>Total</i>
Number of children who attended during the year ..	442	390	554	1,386

	<i>Aged Under 1</i>	<i>Aged 1-2</i>	<i>Aged 2-5</i>	<i>Total</i>
Number of attendances made by children	7,790	1,474	1,327	10,591

Welfare Foods and Other Nutrients

Arrangements for distribution have continued to run smoothly, the main centre for distribution being the local authority's central welfare clinic at Avenue House, which was available to the public daily during the full period the department was open. The four outlying child welfare centres were used as subsidiary distribution centres during the normal clinic sessions there.

Under the authority's arrangements for the care of mothers and young children a considerable variety of dried milk foods, cereals and vitamin products are now available for re-sale. These are issued on the recommendation of the Medical Officer or Health Visitor in attendance at the Child Welfare sessions.

Dental Care

The service is provided for the dental care of expectant and nursing mothers and pre-school children.

REPORT OF THE CHIEF DENTAL OFFICER

Fifty sessions were devoted to the inspection and treatment of expectant and nursing mothers and to children under the age of five. Sixty-six expectant and nursing mothers were seen at the Avenue House clinic and made 169 attendances. Of these, fifty-eight were found to require treatment and forty-five were actually treated. Thirty-two fillings were inserted and thirty-six teeth were extracted. In addition, two full dentures and six partial dentures were constructed, the laboratory work being carried out by local dental technicians. Sixteen patients were referred for radiological examinations, these being carried out at the clinic with the department's own X-ray apparatus.

Two hundred and forty-nine children under school age were inspected and 140 were found to require treatment. One hundred and fifteen were actually treated and made 311 attendances. Seventy-two fillings were inserted into temporary teeth and 117 temporary teeth were extracted. Conservative treatment with silver nitrate was also carried out on seventy-three temporary teeth and six pre-school children were referred for X-rays.

The axiom that "prevention is better than cure" in any pathological condition is perhaps so obvious that any further emphasis may seem superfluous, but I do feel that, in view particularly of the technical difficulties encountered in carrying out conservative work on very young children, every possible assistance and encouragement should be given to the mothers to help them maintain a high degree of oral

hygiene for these toddlers. The experimental fluoridation scheme now being conducted by the Ministry of Health will, if proved successful, be of particular value to the pre-school class, since its objective is purely preventive in the aim of building up a more caries-resistant tooth structure. Pending these reports, however, we must continue to rely on the factors which we do know will reduce dental caries, namely well-cleaned teeth and perhaps more important still, well-used teeth, with the necessary emphasis on a suitable diet. Every effort is made to encourage routine inspections from the age of two and I feel that it is at the time of these inspections that the dental officer has a most opportune moment for giving advice and information to the parent on the subject of dental health and care.

The young child who regularly attends for routine inspection and treatment when necessary, becomes usually the most co-operative of patients, whereas the child who attends for the first time when suffering from the pain and distress of toothache makes a far more inauspicious start. Many parents whose children, when of school age, regularly attend for treatment, seem to feel that any dental treatment before that age must of necessity be extremely limited and possibly confined to the relief of pain. It must, therefore, be one of our principal aims in any dental health education programme to inculcate a higher value on the preservation of the temporary dentition in the very young children.

M. G. BERRY, L.D.S., R.C.S.

Dental Treatment Return

(a) NUMBERS PROVIDED WITH DENTAL CARE

	<i>Examined</i>	<i>Needing Treatment</i>	<i>Treated</i>	<i>Made Dentally Fit</i>
Expectant and Nursing Mothers	66	58	45	34
Children under five ..	249	142	115	109

(b) FORMS OF DENTAL TREATMENT PROVIDED

	<i>Scaling and Gum Treatment</i>	<i>Fillings</i>	<i>Silver Nitrate Treatment</i>	<i>Crowns or Inlays</i>	<i>Extractions</i>	<i>General Anaesthetics</i>	<i>Dentures Provided</i>		<i>Radio-graphs</i>
							<i>Full Upper or Lower</i>	<i>Partial Upper or Lower</i>	
Expectant and Nursing Mothers	20	32	—	—	36	13	2	6	16
Children under five	1	72	73	—	117	74	—	—	6

PRINCES PARK DAY NURSERY

(60 Places)

The authorised establishment, excluding domestic staff, was:—

Matron Deputy Matron
Warden

Three trained Nursery Nurses Four Nursery Assistants

The total attendances were 11,634, an average attendance of 37·9 for the 307 days on which the nursery was open, compared with 12,410 attendances and a daily average of 40·42 during 1956.

The unit cost per approved place was £103 6s., and per child in attendance £153 7s., for the year ended 31st March, 1957.

Average daily attendance of children over the past four years:—

	<i>1957</i>	<i>1956</i>	<i>1955</i>	<i>1954</i>
January	33·96	34·39	29·12	19·49
February	32·96	32·12	36·04	15·04
March	36·62	34·23	39·14	21·74
April	40·50	39·09	41·33	29·95
May	42·00	44·70	46·60	38·12
June	45·42	47·43	49·81	45·04
July	35·48	48·20	39·96	47·74
August	45·00	45·35	45·26	47·72
September	40·16	36·92	45·35	40·62
October	32·22	41·30	45·46	33·81
November	35·00	41·62	42·46	33·88
December	36·00	39·13	45·05	31·84

Attendances each month during 1957:—

	<i>Children aged</i>			<i>Total Attendances</i>	<i>No. of days open</i>	<i>Receipts</i>
	0-1½	1½-3	3-5			
January ..	4·37	10·07	19·52	917	27	£170 11 10
February ..	3·75	10·08	19·13	791	24	£177 1 2
March ..	4·77	11·62	20·23	952	26	£238 10 4
April ..	6·16	14·46	19·88	972	24	£182 17 0
May ..	5·63	15·33	21·04	1,134	27	£216 7 2
June ..	6·17	17·88	21·38	1,090	24	£274 10 9
July ..	5·74	11·63	18·11	958	27	£176 9 8
August ..	5·58	19·84	19·58	1,170	26	£271 12 8
September ..	6·24	15·92	18·00	1,004	25	£202 15 10
October ..	4·96	11·00	16·25	870	27	£148 16 0
November ..	5·70	12·90	17·08	912	26	£192 10 10
December ..	5·58	12·79	17·62	864	24	£141 13 8
TOTAL ..				11,634	307	£2,393 16 11

MIDWIFERY

The Superintendent of the Home Nursing Service is also the Non-Medical Supervisor of Midwives. The establishment of

domiciliary midwives remained at three, one being employed half-time on home nursing duties.

The following figures show the total number of live births to Eastbourne mothers and the number and proportion of domiciliary confinements in the last five years.

	<i>Total Births</i>	<i>Domiciliary Confinements</i>	<i>Percentage of Domiciliary Confinements</i>
1953	632	102	16.1
1954	604	109	18.0
1955	543	107	19.7
1956	562	92	16.4
1957	599	96	16.0

It is to be noted that the number of institutional confinements was once again in excess of 80 per cent. of the total births.

The cost per case attended was £25 16s. as compared with the average cost of £12 19s. for all County Boroughs.

Details of the work of the Domiciliary Midwives during the year are as follows:—

BOOKINGS

Number of cases on books on 1st January, 1957	46
New bookings	90
Number of cases on books on 31st December, 1957	32

CONFINEMENTS

(a) Doctor booked—				
Doctor present .. .. .	..	..	..	35
Doctor not present .. .. .	..	..	..	20
(b) Doctor not booked—				
Doctor present .. .. .	..	..	..	—
Doctor not present .. .. .	..	..	..	41
(c) Miscarriages .. .. .	..	..	..	4

ANALGESIA

(a) Gas and Air—				
Doctor present .. .. .	..	..	..	3
Doctor not present .. .. .	..	..	..	3
(b) Trilene—				
Doctor present .. .. .	..	..	..	31
Doctor not present .. .. .	..	..	..	55
(c) Pethidine—				
Doctor present .. .. .	..	..	..	15
Doctor not present .. .. .	..	..	..	15

Medical aid was sought in thirteen cases.

VISITS BY MIDWIVES

Ante-natal visits	793
Visits during labour	196
Visits during puerperium	1,842
Post-natal visits (domiciliary cases)	101
Visits to 107 cases discharged from hospital before the fourteenth day	444
Total	<u>3,376</u>

Training of Pupil Midwives

Three pupil midwives from the East Sussex County Council were accepted for three months district training.

HEALTH VISITING

Establishment

One Superintendent Health Visitor
Nine Health Visitor/School Nurses

Allocation

National Health Service Act ..	7½
School Health Service	2½

There were no staff changes during the year, one vacancy remaining unfilled as an experiment following the increased mobility of the staff by the provision of an extra car allowance in 1956.

The tendency towards more selective visiting, strongly evident in 1956, continued during 1957. Visits to expectant mothers and to aged and handicapped persons show substantial increases, as do visits to hospitals, the latter a liaison of ever increasing-importance.

Health Education

This subject, which is also referred to on page 36, is becoming an increasingly important function of the health visitors. The number of health education sessions attended by health visitors increased from 90 in 1955 to 215 in 1956 and 256 in 1957.

The Health Visitors' work is summarised in the following figures:

Home Visits

CARE OF MOTHERS AND YOUNG CHILDREN—

Children under 1 year	3,239
Children aged 1 and under 2 years	1,989
Children aged 2 but under 5 years	3,992
Expectant mothers	402
In connection with Day Nursery	7
INFECTIOUS ILLNESS	68
TUBERCULOSIS	845
CARE AND AFTER-CARE (including Aged and Handicapped Persons)	3,013

Other Visits

To other Agencies (voluntary organisations, etc.)	157
To Day Nurseries	49
To Hospitals	455
Miscellaneous	396

Clinic Attendances

Child Welfare Centres	475
Immunisation and Vaccination Clinics ..	172
Health Education Sessions	256
Chest Clinic	102

HOME NURSING

Establishment

- 1 Superintendent (also non-medical Supervisor of Midwives).
- 1 Senior Home Nurse.
- 16 Home Nurses (including male nurses and S.E. Asst. Nurses).

In accordance with Ministry of Health Circular 1/58, I am requested to comment on "the effectiveness of the Home Nursing Service in relieving pressure on hospitals by providing home care for patients who might otherwise have to be admitted to hospital."

In this connection the situation in Eastbourne is exceptional, in that there exists a grave and admitted shortage of hospital beds for the chronic sick. In consequence, the home nurses are called upon to attend to a considerable number of aged and chronic sick who, by the nature of their infirmity, or the absence of relatives or friends to care for them, should undoubtedly be in hospital.

It will be seen from the tables below that more than half the total visits are made to chronic patients. We cannot say that if it were not for the home nursing service many of these cases would have to be in hospital. What we can say is that if it were not for the home nursing service the position of many more of these folk already desperate would be hopeless.

In other fields the home nursing service has undoubtedly enabled medical and surgical cases to be nursed at home under the family doctor and has enabled discharges from hospital to be accelerated.

Some difficulty was experienced during the latter half of the year in filling vacancies for district trained state registered nurses, one vacancy remaining unfilled at the end of the year. It is possible that if the present trend continues state registered nurses may have to be engaged and sent on district training courses to retain the proportion of fully trained nurses in the establishment necessary to maintain the traditional high standards of the service.

The number of cases attended was almost the same as in 1956, although the total visits fell by over 4,000, partly as a result of staff deficiencies.

Many homes received assistance from the free laundry service for incontinent persons on the hospital waiting list.

Particulars of patients nursed are as follows:

	<i>New Cases</i>	<i>Total Cases</i>	<i>Visits</i>
Medical	790	884	15,116
Surgical	193	228	6,529
Infectious Diseases	1	1	11
Tuberculosis	15	21	784
Maternal complications	1	1	30
Others—Chronic	350	573	24,594
	<hr/> 1,350	<hr/> 1,708	<hr/> 47,064

Patients were removed from the records on cessation of nursing attendance as follows:

Convalescent	556
To Hospital	266
Deaths	101
Other Causes	420
	<hr/> 1,343

The demand on the Home Nursing Service as compared with previous years is shown in the table below:

	<i>Cases</i>	<i>Visits</i>
1949	1,323	34,914
1950	1,667	47,898
1951	1,552	47,047
1952	1,967	47,470
1953	1,719	49,404
1954	1,671	49,533
1955	1,820	53,653
1956	1,707	51,953
1957	1,708	47,064

VACCINATION AND IMMUNISATION

General

The Authority's arrangements provided for the vaccination and re-vaccination against smallpox of infants, school children, and adults, immunisation against diphtheria and whooping cough, and vaccination against poliomyelitis for children born between 1943 and 1956, expectant mothers and certain adults.

Primary vaccination against smallpox of infants and pre-school-age children is carried out by appointment at the Authority's four district child welfare centres and at the central clinic. Re-vaccinations are mainly performed at the central clinic as is poliomyelitis inoculation. Immunisation against diphtheria and whooping cough, in addition to being available at the central clinic and welfare centres is also carried out at special sessions in schools.

A—Vaccination against Smallpox

During the year 507 persons were vaccinated for the first time and 501 were re-vaccinated.

Of the 507 primary vaccinations 378 were of infants under one year of age, which is equivalent to 64.8 per cent. of the registered live births in the area during 1957. This again compares satisfactorily with the figure of 59.7 for the previous year.

VACCINATION DURING 1957

	<i>Primary Vaccination</i>		<i>Re-Vaccination</i>	
	<i>By Staff of Health Department</i>	<i>By General Practitioner</i>	<i>By Staff of Health Department</i>	<i>By General Practitioner</i>
Under 1 year ..	161	217	—	—
1 to 2 years ..	24	16	—	4
2 to 5 years ..	3	19	2	12
5 to 15 years ..	2	17	76	63
15 years and over ..	2	46	18	326
	192	315	96	405
	507		501	
	1,008			

From this table it will be seen that 378 infants under one year were vaccinated, 161 by the Medical Staff of the Department and 217 by General Medical Practitioners.

INFANT VACCINATION 1951-1957

<i>Year</i>	<i>Live Births</i>	<i>Number of Primary Vaccinations under 1 year of age</i>	<i>Percentage of Births during same period</i>
1957	583	378	64.8
1956	563	336	59.7
1955	553	318	57.5
1954	612	347	56.7
1953	617	313	50.7
1952	635	275	43.3
1951	604	411	*68.0

* *Epidemic in neighbouring authority.*

B—Diphtheria Immunisation

The total number of completed primary immunisation courses showed a reduction as compared with the previous two years. Nevertheless, it is calculated that 62.7 per cent. of infants born in 1956 were immunised before the first birthday, a record high figure for the area.

In 1957, 456 children were immunised, 219 by the Medical Staff of the Department and 237 by General Medical Practitioners.

The age groups and numbers were:

<i>Age Group</i>	<i>By Medical Staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Total</i>
0-1	144	194	338
1-2	28	21	49
2-3	13	4	17
3-4	9	—	9
4-5	6	3	9
5-10	18	8	26
10-15	1	7	8
	<u>219</u>	<u>237</u>	<u>456</u>

Reinforcing Doses

The age groups and numbers were:

<i>Age Group at time of Immunisation</i>	<i>By Medical Staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Total</i>
1-5	80	33	113
5-15	462	93	555
	<u>542</u>	<u>126</u>	<u>668</u>

The Department's immunisation records show that at the end of the year 1,825 children 0-5 years and 6,589 children aged 5-15 years had been immunised. The age groups and numbers were:

<i>Age Group at 31.12.57</i>	<i>Number</i>	<i>Total</i>
0-1	109	
1-2	398	
2-3	414	
3-4	437	
4-5	467	
	—	1,825
5-6	522	
6-7	535	
7-8	562	
8-9	597	
9-10	653	
	—	2,867
10-11	900	
11-12	833	
12-13	599	
13-14	706	
14-15	684	
	—	3,722
		<u>8,414</u>

These numbers represent 65 per cent. and 84 per cent. of the children in the age groups 0-5 years and 5-15 years of the Registrar General's estimated population of 2,800 and 7,800 in these respective age groups.

Individual immunity tends to wane with the passage of time. Taking into account inoculations performed within the last five years only, an index of the immunity to diphtheria in the population is shown in the following table.

<i>Age at 31/12/57, i.e. born in the year:</i>	<i>Under 1 1957</i>	<i>1-5 1956-53</i>	<i>5-10 1952-48</i>	<i>10-15 1947-43</i>	<i>Under 15 Total</i>
Last complete course of injections given during 1953-57	109	1,716	2,035	1,678	5,538
Estimated mid-year child population ..	600	2,200	7,800		10,600
Immunity Index ..	18.16%	70%	47.6%		52.24%

There have been no notified cases of diphtheria in Eastbourne during the past eight years and no deaths since 1946.

Figures for deaths and notifications in England and Wales since 1945 are shown below.

DIPHTHERIA

<i>Year</i>	<i>Notifications</i>	<i>Deaths</i>
1945	18,596	722
1946	11,986	472
1947	5,609	244
1948	3,575	156
1949	1,890	84
1950	962	49
1951	664	33
1952	376	32
1953	286	23
1954	173	9
1955	161	13
1956	63	8
1957	40	6

C—Whooping Cough Immunisation

On the advice contained in Ministry of Health Circular 8/57, the use of combined antigen for Diphtheria/Pertussis immunisations was discontinued. However, in spite of the consequent need for parents to attend clinics and surgeries for additional inoculations, the number of children immunised against this disease showed an increase over the 1956 figures.

IMMUNISATION DURING 1957

<i>Age Groups</i>	<i>By Medical Staff of the Department</i>		<i>By General Practitioners</i>		<i>Totals</i>	
	<i>Primary</i>	<i>Re-inforcing</i>	<i>Primary</i>	<i>Re-inforcing</i>	<i>Primary</i>	<i>Re-inforcing</i>
0-1	188	—	180	—	368	—
1-2	19	—	18	1	37	1
2-3	8	—	4	5	12	5
3-4	5	—	—	—	5	—
4-5	12	20	3	16	15	36
Aged 5 and over ..	24	50	8	26	32	76
Totals ..	256	70	213	48	469	118

Cases of whooping cough notified during the last five years are as follows:

<i>Year</i>	<i>Cases Notified</i>
1952	158
1953	133
1954	130
1955	37
1956	27
1957	117

D—Vaccination against Poliomyelitis

Supplies of British Vaccine were received throughout the year at regular intervals and enable 1,115 persons to be given two injections each.

The age group was extended to include those born in 1955-56 and later in the year to all children born in 1943 to 1956 and those born in 1957 if over 6 months, expectant mothers, ambulance and hospital staff and their families, and general practitioners and their families.

On 31st December notification was received that our first issue of Canadian Salk Polio Vaccine would arrive during the first week in January.

The age groups vaccinated with two injections are as follows:

<i>Year of Birth</i>	<i>Number</i>
1947	244
1948	222
1949	213
1950	164
1951	79
1952	65
1953	54
1954	44
1955	26
1956	1
1957	—
General Practitioners' Families	3
	<hr/>
	1,115
	<hr/>

AMBULANCE SERVICE

The Eastbourne Division of the St. John Ambulance Brigade continued to undertake the Ambulance Service for the Authority with distinction.

The full-time paid staff of the Brigade at the end of the year was:

Superintendent
Transport Officer
10 Driver/Attendants

Volunteers continued to assist in the conduct of the service at night and provided valuable help in escort duties.

There was an increase from the previous year in the volume of work undertaken. It is noteworthy that the use of dual-purpose vehicles contributes to the economic running of the service by the reduction in journeys required in relation to patients carried.

The Superintendent, Mr. A. J. Burnage, maintained the closest liaison with the Department and is to be congratulated on the standard of efficiency maintained.

The following is a summary of the work undertaken on behalf of the Local Health Authority during the past year.

	<i>Ambulance</i>			<i>Sitting Case Cars</i>		
	<i>Journeys</i>	<i>Patients</i>	<i>Mileages</i>	<i>Journeys</i>	<i>Patients</i>	<i>Mileages</i>
January ..	231	371	1,681	392	1,022	3,812
February ..	229	366	1,962	351	992	3,156
March ..	302	385	2,565	437	868	3,228
April	278	417	2,219	380	812	3,398
May	298	501	2,457	397	1,025	4,207
June	292	431	3,043	318	755	3,797
July	318	443	2,553	384	882	3,623
August ..	306	407	2,354	375	860	3,899
September ..	259	357	2,532	349	820	3,846
October ..	277	419	2,516	368	941	3,423
November ..	230	366	2,347	414	1,075	4,597
December ..	284	489	2,926	318	819	3,280
TOTALS ..	3,304	4,952	29,155	4,483	10,871	44,266

Journeys and Mileages since 5th July, 1948

	<i>Ambulances</i>		<i>Sitting Case Cars</i>	
	<i>Journeys</i>	<i>Mileage</i>	<i>Journeys</i>	<i>Mileage</i>
1948 (5th July to 31st Dec.)	1,427	23,127	757	30,415
1949	2,808	48,358	3,452	56,882
1950	2,962	34,013	3,660	55,023
1951	2,668	27,466	4,608	54,838
1952	2,601	29,505	3,724	48,353
1953	2,719	29,220	3,721	46,801
1954†*	2,984	28,480	4,108	45,760
1955*	3,205	27,739	4,551	48,987
1956*	2,992	24,092	4,298	47,278
1957*	3,304	29,155	4,483	44,266

† *Excluding Princes Park Day Nursery*

* *Excluding Occupation Centre*

At a seaside health resort in which a convalescent home (191 beds) is situated, the service is called upon to convey a large number of patients to and from the local railway station. In the year under review the following are particulars of patients and mileages of cases sent by rail:

<i>Conveyance used to Station</i>	<i>Patients</i>	<i>Train Mileage</i>
Ambulance	129	14,372
Sitting case car	356	27,805

ORIGIN OF CALLS

<i>Origin of Calls</i>	<i>Ambulances</i>					<i>Sitting Case Cars</i>				
	1953	1954	1955	1956	1957	1953	1954	1955	1956	1957
	Emergency calls to street accidents	492	472	594	590	603	41	41	51	45	59
Local Hospitals	1,913	2,210	1,898	1,888	2,092	1,157	1,280	1,224	1,033	1,167
Local Convalescent Homes ..	35	27	28	43	30	209	216	216	200	219
General Medical Practitioners	589	643	663	683	731	327	348	353	427	623
Maternity Homes	29	18	18	20	20	25	12	9	12	7
Nursing Homes	31	57	39	36	42	6	4	5	5	13
Ministry of Pensions	21	24	15	7	12	114	98	119	106	130
Other Ambulance Authorities	79	61	72	48	92	278	342	332	433	458
Authorised Mental Health Officers	58	47	53	61	35	109	92	118	104	102
Others	180	362	275	218	297	256	141	79	131	134
Out-Patients:										
Chest Clinic	234	180	128	108	78	663	723	644	397	455
Foot Clinic	—	—	—	—	—	236	274	237	247	195
Local Hospitals	—	88	193	339	799	6,357	7,204	7,535	7,317	6,242
Royal Sussex County Brighton	29	20	27	11	121	551	591	987	666	1,067
Infectious Diseases	98	34	30	—	—	—	—	—	—	—
	3,725	4,243	4,033	4,052	4,952	10,329	11,366	11,909	11,123	10,871
Journeys	2,719	2,984	3,205	2,992	3,304	3,721	4,108	4,551	4,298	4,483
Mileage	29,220	28,480	27,739	24,092	29,155	46,801	45,760	48,987	47,278	44,266

Fares of the above patients were paid by the Local Authority in respect of the following only:

<i>Conveyance used to Station</i>	<i>Patients</i>	<i>Train Mileage</i>
Ambulance	36	3,316
Sitting case car	18	1,486

In addition the St. John Ambulance Brigade undertook the conveyance of pupils to and from the Occupation Centre.

The vehicles in use by the St. John Ambulance Brigade at the end of the year were:

Ambulances

<i>Make</i>	<i>Registration No.</i>	<i>Date of first Registration</i>	<i>Year brought into Ambulance Service</i>
Austin	BJK. 141	30. 9.1953	1953
Bedford	HC. 8844	9.10.1948	1948
Vauxhall	BPM. 840	21.12.1939	1952
Vauxhall	JK. 7051	24. 8.1937	1937
Austin	EHC. 585	22. 7.1957	1957

Dual-purpose Vehicles

Bedford	BHC. 240	8.10.1952	1952
Morris	CJK. 700	11. 7.1955	1955
Morris	DJK. 327	1. 9.1956	1956

Sitting Case Cars

Wolseley	GRU. 880	5. 7.1947	1955
Austin	LPD. 826	25. 4.1947	1954

PREVENTION OF ILLNESS, CARE AND AFTER CARE, AND TUBERCULOSIS

A—Illness Generally

The Health Visiting, Home Nursing, Domestic Help and, indeed, all the services provided by the Department are available for all cases referred to them including those discharged from hospitals. In cases where other official bodies or voluntary organisations are able to help, the persons concerned are advised accordingly.

B—Recuperative Holidays

The Authority's arrangements include the provision of convalescence and rehabilitation for persons recovering from illness and to other invalids in cases not otherwise provided for. In accordance with the recommendations of her medical practitioner and following investigation by this Department a period of convalescence was approved by the Health Services Committee for one woman.

C—Loan of Equipment

The operation of this service is closely associated with the Home Nursing Service, the majority of articles being loaned to patients attended by home nurses.

A wide variety of sick room and other equipment is available on the recommendation of medical practitioners at charges in accordance with the patient's means.

A total of 707 articles was loaned to 385 patients. The demands on this service are shown by the following figures.

<i>Year</i>	<i>Number of Loans</i>	<i>Number of Patients</i>	<i>No. of cases in which no charge was made</i>
1957	707	385	91
1956	604	382	124
1955	750	395	95
1954	677	370	103
1953	768	435	110

D—Voluntary Organisations

I wish to record grateful acknowledgment for the facilities and services offered by voluntary organisations including the Order of St. John, the British Red Cross Society, the Guardianship Society, the Women's Voluntary Services, the Eastbourne Voluntary Association for the Care of Cripples, the National Society for the Prevention of Cruelty to Children and other local and national organisations of which full advantage was taken in appropriate cases.

E—Health Education

This facet of the Department's activities assumes more importance and demands greater attention from year to year.

Research by public and private bodies constantly throws new light on aspects of daily life which have great influence on the physical and mental health of everyone and it is our endeavour to impart this knowledge to all sections of the community.

The Department's teaching includes the fields of nutrition, safety in the home and at work, commonsense clothing, ante-natal health education and post-natal care, the understanding and care of children, the use of modern equipment in the home as an aid to hygiene and easing the housewife's task and the prevention of the spread of infection.

The fullest use commensurate with financial expediency is made of the methods and material available to-day including films, filmstrips,

posters, pamphlets, visual aids and the press, to which I am indebted for its ready co-operation at all times.

Much of this specialised teaching is carried out in the Authority's clinic and welfare centres, but this is supplemented by the repetitive work of the home visiting staffs of the Department and of general medical practitioners who carry information and advice to all sections of the general public.

Smoking and Lung Cancer

In accordance with Ministry of Health Circular 1/58, I have to report that Ministry of Health Circular 7/57 and the statement of the Medical Research Council received most careful consideration by the Council.

It was agreed that long-term educative efforts should be undertaken in the community, but that for the time being the adult community had been adequately informed of the matter by national publicity. It was felt that the most useful immediate step was the planning of a sustained educative programme for young people and, to this end, the matter received further consideration by the Education Committee and its appropriate Sub-Committee dealing with youth and community services. Meetings were held between the Principal School Medical Officer, Chief Education Officer, and the heads of the Secondary Schools, where agreement was reached for full co-operation on the matter and from which it transpired that even prior to the medical evidence heads of schools had been by no means inactive in the discouragement of the smoking habit.

F—Sitter-up Service

The services of five "sitters-up" were used on 144 occasions in 27 cases of sickness at home, at a cost of £62 to the Local Health Authority. This service eases the burden on relatives and neighbours caring for sick persons, many of whom are waiting admission to hospital.

G—Last Offices

The Department was not called upon to arrange for the services of persons in connection with last offices.

H—Tuberculosis

Forty-eight cases of respiratory and six on non-respiratory tuberculosis were reported. Of these, twenty-eight respiratory cases had not previously been notified in any other district.

The arrangement for care and after-care of tuberculosis patients remained as described in my 1955 Report.

NOTIFICATION REGISTER

	<i>Respiratory</i>		<i>Non-respiratory</i>		<i>Total</i>	
	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>
ON REGISTER						
1st January, 1957 ..	194	144	15	19	209	163
<i>Add:</i>						
Notifications ..	14	14	—	4	14	18
Transfers	7	14	—	2	7	16
Posthumous Notifica- tions	1	—	1	—	2	—
Found on Death Returns	—	—	—	2	—	2
	216	172	16	27	232	199
<i>Less:</i>						
Deaths	9	1	1	2	10	3
Left town	6	7	—	2	6	9
Arrested	4	4	1	1	5	5
	19	12	2	5	21	17
ON REGISTER						
31st December, 1957	197	160	14	22	211	182

Age grouping of new cases notified and transfers to the area:

<i>Age Groups</i>	<i>Respiratory</i>		<i>Non-respiratory</i>		<i>Total</i>	
	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>
0-5	—	—	—	—	—	—
5-10	—	—	—	—	—	—
10-15	—	—	—	—	—	—
15-25	4	6	—	1	4	7
25-45	6	10	—	3	6	13
45-65	4	6	—	1	4	7
Over 65	7	5	—	1	7	6
	21	27	—	6	21	33

DEATHS

The Registrar General's return of causes of death indicates that eight persons died from tuberculosis of the lungs and two persons died from non-respiratory tuberculosis in the following age groups:

	<i>Respiratory</i>		<i>Non-Respiratory</i>	
	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>
45-65	2	—	—	—
Over 65	5	1	1	1

The death rates per 1,000 population were:

Respiratory	0.14
Non-Respiratory	0.03
All forms	0.17

SUMMARY OF THE WORK OF THE TUBERCULOSIS VISITOR

Visits paid to tuberculosis households ..	845
Chest Clinic attendances	102
Visits to hospitals	34

Extra nourishment granted to persons suffering from tuberculosis:

Liquid Milk:

Quantity supplied	18,522 pints
Number of cases assisted	76

B.C.G. Vaccination

This work is undertaken by the Chest Physician in the case of persons who are known contacts to tuberculosis and by the school medical and nursing staff of the Department for school-children in their fourteenth year.

Number of persons vaccinated are as follows:

A—CONTACT SCHEME (carried out by the Chest Physician)

AGE GROUPS:

Under 1 year	5
1 to 2 years	4
2 to 5 years	2
5 to 10 years	5
10 to 15 years	3
Over 15 years	3

B—SCHOOL CHILDREN SCHEME (carried out by the medical and nursing staff of the Department)

(i) Number skin tested	438
(ii) Number found negative	358
(iii) Number vaccinated	358

CHEST PHYSICIAN'S REPORT, 1957

There were 29 new cases of pulmonary tuberculosis diagnosed during 1957 in Eastbourne, and 21 known cases came to live in the town during the year. There were 8 deaths, 13 cases left the town, and 8 were removed from the register having recovered from the disease. It follows that during 1957 there were 19 additions to the total number of cases on the register, which at the end of the year was 357.

Two hundred and eighty-nine individual contacts attended for routine examination and of these 68 attended for the first time. Altogether there were 435 attendances by contacts. That this sometimes rather tedious and time-consuming work is really worth while is shown by the fact that 3 of the new cases found during the year were found on routine examination as contacts.

Of the 68 new contacts seen, 20 were tuberculin negative children and 2 were tuberculin negative adults. These 22 accepted vaccination with B.C.G.

The problem of tuberculosis lies almost entirely today among the older age groups, and it can only be expected that Eastbourne with its exceptional proportion of these groups, will continue to have a fairly high incidence for another decade or two. A number of these elderly

persons are unaware that they suffer from tuberculosis and are, therefore, a potential source of infection, especially to younger persons. It is, therefore, necessary as much as before to try to find these cases.

It is taken for granted nowadays that the Chest Clinic administered by the Hospital Management Committee and the Local Health Authority work as a single unit in dealing with the problems of tuberculosis, and I am glad to gratefully acknowledge the help and co-operation of Dr. Vickery, Mrs. James, and all the staff of the Health and Welfare Services Department.

A. H. FERGUSON GOW,
Chest Physician.

MASS RADIOGRAPHY

The East Sussex Radiography Unit carried out its fifth survey in Eastbourne from the 14th May to the 24th June, 1957.

The chief centre was at the old Bedewell and St. Philip's School in Whitley Road, but on this occasion the Unit was also taken to suitable sites on the periphery of the town for short surveys with the purpose of encouraging people to attend who would not otherwise do so.

Dr. B. S. Rigden, Director of the Unit, considered that this extra effort was well worth while as four cases of actual tuberculosis and one case of malignant disease were found in these periphery surveys.

A special survey of the staff of a large local organisation was also carried out.

Summary of the Results of the Survey

	<i>Whitley Road</i>	<i>Seaside</i>	<i>Hampden Park</i>	<i>Old Langney</i>	<i>Town</i>	<i>Special</i>	<i>Total</i>
Number of persons examined	4202	673	891	275	670	703	7414
Cases of active respiratory tuberculosis found ..	4	3	1	—	—	—	8
Cases of malignant disease	2	—	—	—	1	—	3
Other diseases	67	18	11	5	16	9	126

DOMESTIC HELP

There is a continuous demand for this form of assistance. The amount of help which can be supplied in individual cases is necessarily restricted by reason of the continued difficulty in recruiting suitable helpers for this important work. The service operates in very difficult circumstances and in times of sickness and holidays is strained to the utmost.

The gross cost per case attended was £20 3s. compared with the average for all County Boroughs of £26 13s.

During the year 334 cases were granted the services of domestic helps. Charges according to the Authority's scale were reimbursed by the National Assistance Board in 186 cases.

					<i>New Cases</i>	<i>Old Cases</i>
<i>According to Scale</i>						
Full cost	..	..	..	..	53	23
Part cost	..	..	..	..	—	—
Free	..	..	..	..	3	1
<i>Special Cases</i>						
Part cost	..	..	..	..	9	21
Free	..	..	..	..	15	26
<i>National Assistance Board Cases</i>	..	..	..	..	54	132
					—	—
					134	203
					—	—
				Total ..	337	

In this analysis three cases are included twice owing to changes in circumstances.

MENTAL HEALTH SERVICE

Administration

The Health Services Committee continued to be responsible to the Council for functions under this Act. The staff remained unchanged from my previous report.

Mental Illness—Admissions

Whilst there is once again a slight increase (seven) in the total number of admissions, there was, however, a considerable decrease (thirty-one) in the numbers dealt with under Certificate or Order. This is a very satisfactory state of affairs and reflects the views expressed by the Royal Commission.

Care and After Care

During the year Mental Health Officers made 275 visits and 450 interviews were given at Avenue House. It is of interest to note that these officers dealt with 114 calls after normal office hours as the section provides a 24-hour service.

In addition there were 193 visits made in connection with Mental Deficiency.

Hospital Admissions

Figures for the past five years are as follows:

<i>Year</i>	<i>Patients admitted to Mental Hospitals</i>		
	<i>Voluntary</i>	<i>Certified</i>	<i>Others</i>
1953	178	57	—
1954	188	46	2
1955	168	46	3
1956	179	31	24
1957	217	9	15

The number remaining at 31st December, 1957, was 270—28 more than at the end of the previous year. Of these 270, 152 were voluntary patients.

St. Mary's Hospital

During 1957, 8 men and 28 women were admitted under Section 20.

One man was admitted not under Order. Of the 8 men, 1 was certified, 3 were admitted as voluntary patients and 4 dealt with by relatives, etc.

Of the 28 women, 2 were certified, 11 admitted as voluntary patients and 15 dealt with in other manners (by relatives, etc.).

Hellingly Hospital

(a) *Certified Cases*—Nine persons (2 male and 7 female) were certified. Of that total 3 were admitted from their own homes and 6 from St. Mary's Hospital.

(b) *Urgency Orders*—Two men were admitted under this Section. Both subsequently became voluntary patients. Eleven women were admitted—all became voluntary patients.

(c) *Temporary Patients*—One male and one female were admitted: the man was later discharged and the female became a voluntary patient.

(d) *Voluntary Patients*—The admission of 64 patients was arranged by the officers (16 men and 48 women). Of these 50 were admitted from St. Mary's Hospital and 14 from their own homes.

The position at the end of the year was as follows:

	<i>St. Francis Hospital</i>		<i>Hellingly Hospital</i>		<i>Others</i>		<i>Total</i>
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
December 31st, 1956 ..	26	50	53	112	2	10	253
Admitted during year ..	9	7	64	159	1	1	241
Discharged during year	6	5	57	128	2	1	199
Died	3	1	2	19	—	—	25
December 31st, 1957 ..	26	51	58	124	1	10	270

MENTAL DEFICIENCY ACTS, 1913-38

Males—Seven males were added to the Register, 5 on notification of the Local Education Authority under Section 57 (3) and 57 (5) and 2 were transferred from other Authorities.

Three males were removed from the Register, 2 having died and 1 being discharged from Order. All three were in Institutions.

Females—Four females were added to the Register, 2 on notification of the Local Education Authority under Section 57 (3), 1 was notified by the National Assistance Board and 1 by St. Mary's Hospital.

Seven females were removed from the Register, 1 supervision case married and 1 removed to another area; 1 guardianship case was discharged, 3 institution cases were discharged and 1 died.

Three males and 2 females were awaiting institutional care. One hundred and ninety-three visits were made to supervision cases.

The position at the end of 1957 was:

	<i>Males</i>	<i>Females</i>	<i>Total</i>
In Institutions ..	41	30	71
On Licence from Institutions	—	3	3
Under Guardianship ..	4	5	9
Under Supervision ..	38	40	78
	—	—	—
	83	78	161
	—	—	—

The Institution cases were placed as follows:

	<i>Male</i>	<i>Female</i>
Laughton Lodge	2	1
Brentry Colony	6	—
Stoke Park	6	5
Barvin Park	1	—
Princess Christian Farm Colony ..	2	—
Rampton	1	—
St. Teresa's	—	8
Hortham	—	1
Etloe House	—	2
Darenth Park	8	3
St. Lawrence's	1	—
Pouchlands	2	—
Hill House	—	4
St. Helen's	3	2
Leybourne Grange	6	6
Starcross	2	—
Manor Hospital, Epsom ..	1	1
	—	—
	41	33
	—	—

OCCUPATION CENTRE

The Centre continued on a full-time basis staffed by a Supervisor and three assistants. The number of sub-normal children on the Register varied from 17 to 21, with an age range of from 3 years to 44 years. These made a total of 3,282 attendances on the 196 days during which the Centre was open.

AVERAGE DAILY ATTENDANCE DURING PERIOD
1ST JANUARY, 1957, TO 31ST DECEMBER, 1957

	EASTBOURNE				EAST SUSSEX				Total all Pupils
	Average Daily Attendance				Average Daily Attendance				Average daily attendance
	Under 5 yrs.	5-15 yrs.	Over 15 yrs.	Total	Under 5 yrs.	5-15 yrs.	Over 15 yrs.	Total	
January ..	2.11	5.44	6.67	14.22	—	2.61	1.00	3.61	17.83
February	1.56	6.33	6.50	14.39	—	2.89	1.00	3.89	18.28
March ..	1.76	5.86	6.57	14.19	—	2.90	0.95	3.85	18.05
April ..	2.27	5.09	6.27	13.63	—	2.91	1.00	3.91	17.55
May ..	2.26	4.48	5.61	12.35	—	2.65	1.00	3.65	16.00
June ..	2.29	4.65	5.82	12.76	—	2.76	1.00	3.76	16.53
July ..	2.50	4.95	5.95	13.40	—	1.85	.75	2.60	16.00
August ..	—	—	—	—	—	—	—	—	—
September	2.40	4.00	4.93	11.33	—	2.66	1.00	3.64	15.00
October ..	1.84	5.94	5.80	13.67	—	3.00	1.15	4.15	17.80
November	1.52	4.21	5.57	11.30	—	2.68	.94	3.62	14.92
December	1.13	4.40	5.86	11.39	—	2.86	1.00	3.86	15.26
Daily average for period	1.96	5.03	5.97	12.96	—	2.70	.98	3.68	16.64

SECTION C

WELFARE SERVICES

National Assistance Act

Provision of Accommodation
Blind and Partially Sighted Persons
Other Handicapped Persons
Registration of Homes
Care of Property
Burials

General

Care of the aged continued to be the highest problem under this section. The position is even more acute for the Hospital Authorities, whose duties frequently overlap those of the local authorities. With a view to mutual assistance, several joint meetings have taken place regarding the acquisition of All Saints' Convalescent Home, but up to the time of the printing of this report no decision has been reached by the Ministry of Health.

In addition to twenty beds in All Saints' if acquired, the Council's immediate contribution to the difficulty is the addition of an Annexe to Staveley Court to provide an additional ten beds, these should be available for occupation early in 1959. On long-term planning, land has been acquired in Seaside for the erection of a purpose-built Home.

Residential Accommodation

All the Council's accommodation remained full through the year with a waiting list and we continue to remain grateful to the authorities responsible for St. Luke's Home that they have on many occasions been able to accept the urgent cases when all other accommodation, including the Hospital, has been full.

I would like to pay tribute to the staff of the Homes, and in particular to the Superintendents who have coped through the year with an increasing degree of infirmity, both mental and physical.

In addition to 101 persons in the Council's Homes at the end of the year there were 15 persons in Voluntary Homes.

During the year there were 136 admissions, 109 discharges and 18 deaths.

Statistics for the year are as follows:

National Assistance Act, 1948

Residential Accommodation—Section 21 (i) (a)

Figures for the year were as follows:

1. CAVENDISH LODGE—A home for 26 men			<i>Men</i>
Admitted during the year	..	..	22
Discharged during the year	..	..	15
Died	..	..	5
On 31st December, 1957	..	..	25

	<i>Men</i>	<i>Women</i>
2. TREVIN TOWERS—A home for 45 men and women		
Admitted during the year ..	1	13
Discharged during the year ..	2	10
Died	—	2
On 31st December, 1957 ..	5	40
3. STAVELEY COURT—A home for 45 men and women		
Admitted during the year ..	9	61
Discharged during the year ..	8	25
Died	1	4
On 31st December, 1957 ..	8	36
4. ST. LUKE'S HOME		
Admitted during the year ..	—	13
Discharged during the year ..	—	33
		(including 23 to Staveley Court and 1 to Trevin Towers)
Died	—	4
On 31st December, 1957 ..	—	7
5. VOLUNTARY HOMES		
Bernhard Baron Cottage Homes, Polegate ..		1 woman
Salvation Army Home, Wokingham ..		1 woman
“Osidge” Chaseside (Sir Thomas Lipton Memorial Hostel)		1 woman
W.V.S. Home, Hove		1 woman
Bethesda Home, Brighton		1 woman
Searchlight Cripples Workshop		1 man
B.L.E.S.M.A. Home, Portsmouth		1 man
Nazareth House, Bexhill		1 man
The other eight cases were resident at 31.12.57.		
<i>Other cases resident during the year :</i>		
Westcliffe House, Westgate-on-Sea (R.N.I.B.) ..		1 woman
Brighton and Hove Jewish Home for the Aged ..		1 woman
Maurice House (British Legion)		1 man
6. ACCOMMODATION BY OTHER AUTHORITIES		
L.C.C. Home, 9, Fitzjohn's Avenue, London ..		1 woman
7. (a) Blind — <i>The Wolds, College Road</i>		
Admitted during the year		13
Discharged during the year		15
		(including one to St. Luke's)
Died		1
On 31st December, 1957		16

(b) Epileptics

One man remained in Chalfont Colony at 31.12.57.

Accommodation for Temporarily Homeless—Section 21 (1) (b)

THE KNOWLE, FRIDAY STREET

During the year five families were admitted, comprising two men, five women and eleven children. All of these had been evicted for varying reasons and were the responsibility of the Committee under Section 21 (1) (b) of the Act.

Five families were discharged during the year, comprising three men, five women and fifteen children.

Remaining at the end of the year were three families, comprising two men, three women and four children.

ST. LUKE'S HOME

Two women were accommodated each for two nights.

HOUSE OF THE GOOD SHEPHERD

Two women were accommodated, one for six nights and one for one night.

Reception Centre—Section 17

Total admissions during the year were 2,716—average 7.44 per night. The Centre was full on 62 nights and 127 persons were turned away in the year.

Handicapped Persons—Section 29

(a) BLIND PERSONS

(i) *Incidence of Blindness*—During the year 28 B.D.8 Forms for new cases were received: the causes of disability and treatment in respect of the cases certified as blind being as stated in the table below:

	<i>Cause of Disability</i>			
	<i>Cataract</i>	<i>Glaucoma</i>	<i>Retrolental Fibroplasia</i>	<i>Others</i>
(1) Number of cases registered during the year in respect of which Section F of Forms B.D.8 recommends				
(a) No treatment	2	2	—	5
(b) Treatment (medical, surgical, optical)	14	2	—	3
(2) Number of cases at (1) (b) above which on follow-up action have received treatment	8	2	—	6

The recommendations for treatment were mainly medical and hospital supervision.

(ii) *Registration*

Total at 31st December, 1956	..	..	..	220
Total at 31st December, 1957	..	..	..	211
Registered during the year	..	..	..	38
Died during the year	..	..	..	36
Transfers from other areas	..	..	..	14
Transferred to other areas	..	..	..	10
Recertified and transferred to Partially Sighted Register				1

<i>Age Group</i>		<i>Males</i>	<i>Females</i>	<i>Total</i>
Under 5 years	..	—	—	—
Between 5 and 15 years	..	1	—	1
Between 15 and 30 years	..	3	2	5
Between 30 and 50 years	..	13	5	18
Between 50 and 70 years	..	29	25	54
70 years and over	..	39	109	148
		—	—	—
Totals	..	85	141	226
		—	—	—

At the end of the year of the persons on the Register aged 60 and over, 44 had cataract, 24 glaucoma and 7 cataract and glaucoma.

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

(iv) *Workshops*—One registered blind man, after completing training, remained at the Workshops of the Royal School for the Blind at Leatherhead.

(v) *Handicrafts Class*—As a pastime occupation a class was started in October at the Green Street Health Centre, meeting on one afternoon per week under the Home Teacher. This has been attended by an average of 12 persons.

(b) **PARTIALLY SIGHTED PERSONS**—The Council's scheme provides that the services for the blind shall also be generally available for the partially sighted. At the end of the year there were 87 partially sighted persons on the Register—21 male and 66 female.

(c) **VOLUNTARY SERVICES**—The Society for the Social Welfare of the Blind, who receive an annual grant of £25, provide a club on three afternoons per week, a monthly social, annual outing and a bowling club which has been very successful, and presents for all on the Register at Christmas.

(d) **DEAF AND DUMB**—The situation here remains, both in number and grant, as at the last report. Facilities provided by the Chichester Diocesan Association for the Deaf and Dumb are also unaltered.

(e) **HARD OF HEARING**—The Eastbourne and District Hard of Hearing Association continued to be very active in the provision of social amenities for its members. The number registered at the end of the year as requiring help or visits on the welfare side was 39.

(f) CRIPPLES—(i) The Eastbourne Voluntary Association for the Care of Cripples continued to act as Agent on the same terms as in the last report. In addition to the facilities mentioned in that report a club, mainly of a social character, is now meeting one evening per week. The average number on the Register throughout the year was 89.25 and the actual number at 31st December, 1957, was 92.

(ii) *Assistance with Alterations*—In five cases during the year persons on the Handicapped Register were assisted with alterations to their homes at a total cost of £65.

Old People's Organisations

MEALS ON WHEELS—Once again tribute must be paid to this work of the W.V.S. During the year 9,167 meals were supplied, an average of 35.25 per day. The cost to the Council was £174 19s. 8d.

EASTBOURNE OLD PEOPLE'S WELFARE COMMITTEE—During the year, in addition to its several meetings, this body was responsible for the formation of The Eastbourne Homefinders Association, whose object is to provide bed-sitting-room accommodation for elderly residents. At the time of writing this report and thanks to generous gifts, a property has been acquired in Upperton Road which should provide homes for some eleven old people.

OLD PEOPLE'S CLUBS—No change is recorded here—all do good work for their members, which in many cases includes visits during sickness. The only permanent club remains the Senior Citizens Club. It is to be hoped that new premises will be found for the W.V.S. Darby and Joan Club when, in due course, reconstruction on the site will cause its closure.

BRITISH RED CROSS SOCIETY—CHIROPODY SERVICE—It is regretted that despite representation from all sides there is still no official means of providing a chiropody service from public funds and we must remain grateful to the Red Cross for their efforts to bridge the gap.

VISITING SCHEME—The employment of a Health Visitor mentioned in my last report, has continued and has proved very satisfactory.

Registration of Homes—Section 47

Sixteen Homes provide 230 beds. In addition to an inspection prior to registration, Homes are visited periodically to ensure that reasonable standards are provided.

Care of Property

At the end of the year the property of twenty-four persons was being cared for.

Burials

During the year two burials were arranged at a total cost of £40 3s. 6d., of which sum £13 14s. 1d. was recovered (32.80 per cent.).

SECTION D

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Notification of Infectious Disease

Food Poisoning

Public Health Laboratory Service

Venereal Diseases

INFECTIOUS DISEASE

Cases of infectious disease reported to the Department and notified to the Registrar General totalled 663. Once again an epidemic of measles which began in the late spring and continued until autumn accounted for 445 of the notifications, whilst cases of whooping cough, remarkably low in 1955 and 1956 resulted in a further 117 notifications. Other increases over the previous year's figures were acute pneumonia 27 (8) and respiratory tuberculosis 28 (14). There was only one reported case of scarlet fever and no cases of poliomyelitis occurred among residents of the town.

Food poisoning cases also fell, one outbreak accounting for seven of the eight persons affected. The causative organism was not identified, although circumstantial evidence pointed to oysters as the vehicle of infection.

Notifications of Infectious Diseases (Corrected)

<i>Notifiable disease</i>	<i>All ages</i>	0-5	5-15	15-45	45-65	65 and over	<i>Unknown</i>
Scarlet Fever	1	—	1	—	—	—	—
Whooping Cough ..	117	40	72	3	—	—	2
Acute poliomyelitis (non-paralytic)	2	—	2	—	—	—	—
Measles	445	218	131	94	—	—	2
Dysentery	4	—	—	4	—	—	—
Acute pneumonia ..	27	1	2	5	3	15	1
Erysipelas	1	—	—	—	1	—	—
Food poisoning	8	1	—	1	1	—	5
Puerperal pyrexia ..	25	—	—	—	—	—	25
Tuberculosis (respiratory)	28	—	—	12	5	11	—
Tuberculosis (other) ..	4	—	—	3	—	1	—
Enteric typhoid fever ..	1	—	—	—	1	—	—

Health Laboratory Service

Numerous pathology investigations were carried out on behalf of the Department at the Public Health Laboratory, Brighton, under the direction of Dr. J. E. Jameson, and by Dr. D. C. Taylor and Dr. F. R. Philps, pathologists to the Eastbourne Hospital Management Committee, to whom grateful acknowledgment is given for their ready assistance and co-operation at all times.

Venereal Diseases

Information was supplied to the Department by the Eastbourne Hospital Management Committee, which is responsible for the treatment of venereal diseases. Two weekly sessions were held at the treatment centre at the Princess Alice Memorial Hospital, Mondays for women and children and Wednesdays for men.

Cases attending the Centre are shown in the table below. The figures in brackets relate to 1956.

Condition	Males		Females		Total		Total all Cases
	Old Cases	New Cases	Old Cases	New Cases	Old Cases	New Cases	
Syphilis	2 (4)	2 (1)	3 (3)	1 (—)	5 (7)	3 (1)	8 (8)
Gonorrhoea	— (—)	1 (—)	— (—)	— (—)	— (—)	1 (—)	1 (—)
Other Conditions ..	9 (—)	25 (16)	3 (—)	10 (13)	12 (—)	35 (29)	47 (29)

Summary, 1942-1957

	(1) Total Cases	(2) Non-V.D. Cases included (1)	(3) Attendances		
			(a) For M.O.'s attention	(b) Intermediate times	(c) Total
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
1952	86	62	223	16	239
1953	84	66	141	5	146
1954	78	63	88	—	88
1955	90	72	79	—	79
1956	36	28	57	—	57
1957	56	27	73	—	73

SECTION E

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

Public Baths

Report of the Chief Public Health Inspector

WATER SUPPLY

The water supply for the Borough was derived from the sources described in the 1952 Report. The water from these sources met all demands, and bacteriologically as well as chemically maintained its usual high standard of quality.

The closest co-operation to safeguard the purity of the water supply was maintained between the Eastbourne Waterworks Company and the Public Health Department. The results of twelve chemical and 158 bacteriological examinations of both raw and piped supplies carried out on behalf of the Company and of the Department were satisfactory.

PUBLIC BATHS

Provision remained as described in my 1955 report.

The Old Town Swimming Bath was open from 23rd April to 26th October.

The numbers using the bath during this period were:

Organised Parties

Sessions for :

Local Authority Schools	..	..	13,009
Private Schools	..	..	1,067
Youth Organisations	..	..	1,139
Mixed Bathing	..	..	8,550
Women and Girls	..	..	1,544
Men and Boys	..	..	1,843
			<hr/>
			27,152
			<hr/>

The users in the previous five years were:

1952	..	..	..	..	18,290
1953	..	..	..	..	21,842
1954	..	..	..	..	22,420
1955	..	..	..	..	25,521
1956	..	..	..	..	32,045

Routine tests of the chlorine content of the water were regularly carried out by the Attendant-in-Charge and samples of the bath water taken for bacteriological examination at frequent intervals.

Individual Baths

The number of users was as follows:

	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Total</i>
Old Town ..	4,933	3,675	908	9,516
Seaside ..	13,416	8,420	1,992	23,828
	<hr/>	<hr/>	<hr/>	<hr/>
	18,349	12,095	2,900	33,344
	<hr/>	<hr/>	<hr/>	<hr/>

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

General Summary

Visits and inspections by the Public Health Inspectors in 1957:

For general public health purposes ..	4,104
Inspections under the Housing Acts, 1936 and 1957	715
In connection with food and to food premises	3,364
Infectious Diseases Control visits and investigations	39
Prevention of Damage by Pests Act, 1949 ..	493
Visits for miscellaneous purposes ..	1,499
	<hr/>
Total ..	10,214
	<hr/>
Food animals inspected at slaughterhouse ..	20,228

Inspection of Food and Food Premises

The Food Hygiene Regulations, 1955, came into force on the 1st January, 1956, and as stated in my last report action was first directed to the many premises in which food is prepared for immediate consumption. Follow-up visits and re-inspections were made generally. Activities were extended to wholesale and retail premises dealing with the many types of food sold in the town, and it is pleasing to report that by and large the Inspectors continued to find general co-operation.

In a health resort it can generally be said that the provision of food, with or without accommodation, is the major industry, and this being so, it follows that during the height of the season there is a considerable shortage of labour and many of those recruited in emergency have only a vague, if any, knowledge of food hygiene. In this connection it is extremely difficult to convince those who supply food for immediate consumption on the premises that it is a vital necessity to regulate their sales and service to the type and capacity of the staff.

Whilst it may be reasonable for those who sell other commodities to endeavour to overcome staff shortage and yet supply the demand by leaving certain processes to await more slack times, in the catering trade this just cannot be done. Some, but not all, do realise that they *must* regulate supply and staff and to ensure at all times that the back-room boys in particular maintain a high standard of personal cleanliness if the customer's stomach is not to grieve over what the eye did not see.

There is no doubt that endeavouring to supply a greater number of customers than was reasonably possible with an inadequate staff led to the neglect of cleanliness generally which resulted in the prosecution of two cafe proprietors, their conviction and fines of £215 and £80 respectively.

It is to this back-room activity that most of the attention is directed to the education of the food-handling staff in the principles of food hygiene impressing on all the importance of those requirements of the regulations which deal with the handling and preparation of food and stressing, above all, that food hygiene is a very personal matter.

As in previous years, officers of the Department have given talks on a number of occasions to various sections of the community, food handlers and interested bodies, with films, film strips and other visual aids.

Every opportunity is taken to impress on all of the very many engaged in all aspects of the food trade the essential points of food hygiene, that is, the necessity for personal cleanliness, the rapid cooling of cooked foods not intended for immediate consumption and cool storage of foodstuffs at all times.

The number of visits and inspections made to food premises, classified as to type, were:

Dairies and Milk Distributors	..	..	226
Ice Cream Manufacturers	..	..	106
Ice Cream Retailers	..	..	195
Bakehouses	..	..	44
Butchers' Shops and Wholesale Depots	..	..	186
Meat Products Preparation Premises	..	..	59
Fish Shops	..	..	61
Other Food Shops and Stores	..	..	34
Hotel and Restaurant Kitchens	..	..	344
Slaughterhouses	..	..	576
Food Samples taken	..	..	570
Visits in connection with Unfit Food	..	..	218

The number of food premises in the Borough fell into the following classifications:

Bakers and Bakers' Shops	..	..	40
Breweries	..	..	1
Butchers	..	..	42
Confectioners (other than flour confections)			89
Dairies	..	..	8
Delicatessen and Sandwich Shops		..	11
Fish and Fried Fish	..	..	31
Fruiterers and Greengrocers	..	..	72
Grocers, Provision and General Stores	..		145
Ice Cream Manufacturers	..	..	11
Premises where Ice Cream is sold		..	151
Ice Cream Store	..	..	1
Meat Products Factories	..	..	4
Public Houses and Hotels with open bars	..		56
Restaurants, Cafes and Snack Bars	..		125
Wholesale Manufacturers or Suppliers	..		7

The number of premises registered under Section 16 of the Food and Drugs Act, 1955, for the preparation or manufacture of sausages, or potted, pressed, pickled or preserved food intended for sale, was:

Butchers' Shops	..	..	34
Grocers and Provision Stores	..	..	15
Fried Fish Shops	..	..	7
Potato Crisps Manufacturer	..	..	1

Slaughtering and Inspection of Food Animals

The number of food animals slaughtered, in the one large wholesale slaughterhouse, was the highest of the post-war years, the total being 20,228.

Meat inspection is one of the more important of the Public Health Inspector's duties as a keen inspection is essential to prevent the transmission of animal diseases to man, therefore, notwithstanding the fact that a hundred per cent. inspection involved a considerable amount of evening and week-end work, this full inspection of all food animals immediately after slaughter was maintained.

In addition to normal meat inspection, 2,298 pigs were weighed and certified dead-weight on behalf of the Ministry of Agriculture, Fisheries and Food Fatstock Guarantee Scheme.

It will be noted from the accompanying table that there were seven suspected cases of *cysticercus bovis* (tape worm cysts) discovered in

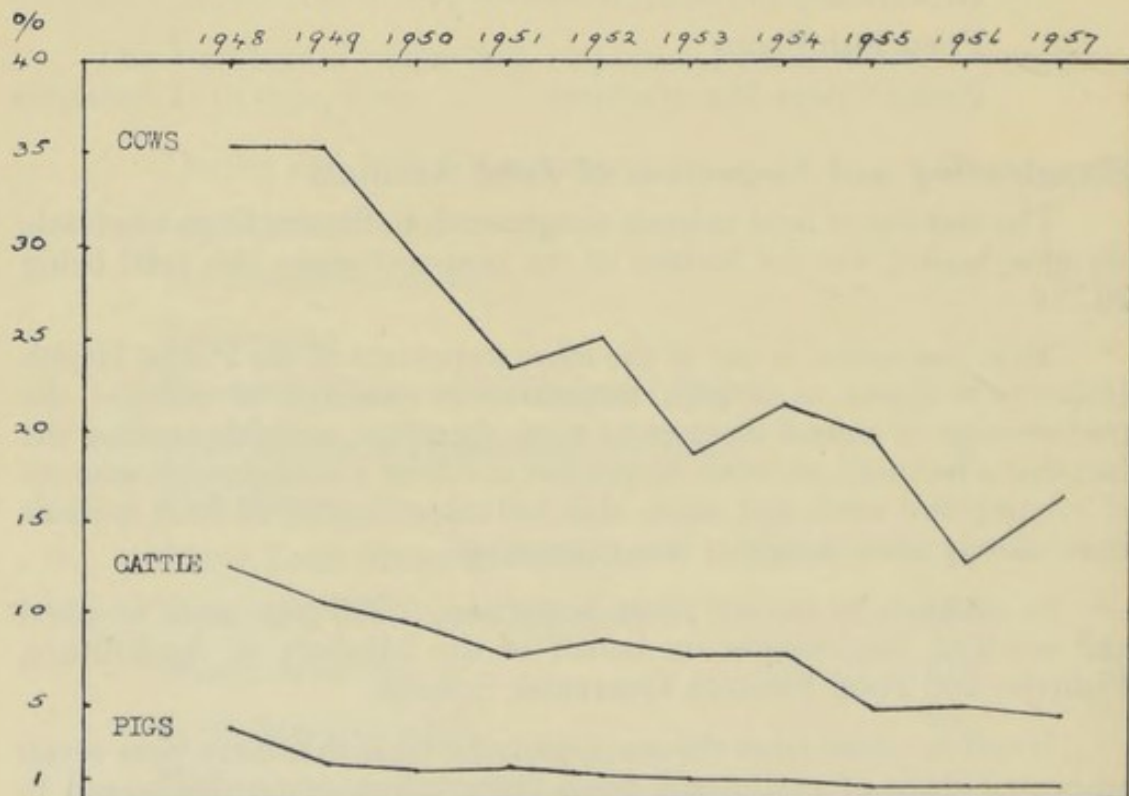
animal carcasses as against six the previous year. Cold storage precautions were advised in all cases and these precautions were taken.

Again it is noted that the incidence of tuberculosis in adult cattle, cows and pigs is on the decline. Although there was a slight increase this year in the incidence amongst cows the figures are comparatively satisfactory and the general trend is still downward.

Percentage of Animals Affected with Tuberculosis

	<i>Cattle</i>	<i>Cows</i>	<i>Calves</i>	<i>Pigs</i>
1948	12.63	35.19	0.23	3.83
1949	10.41	35.21	0.40	1.96
1950	9.28	29.31	0.37	1.07
1951	7.70	23.4	0.71	1.50
1952	8.3	25.0	0.16	1.0
1953	7.4	18.9	0.17	0.82
1954	7.5	21.4	—	0.7
1955	5.59	19.8	0.14	0.29
1956	5.6	12.9	0.1	0.2
1957	4.0	16.2	—	0.2

Trend over Ten Years



Carcases and Offal Inspected and Condemned in Whole or in Part

	<i>Cattle excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Number killed	2626	154	8121	3101	6226	—
Number inspected	2626	154	8121	3101	6226	—
<i>All diseases except Tuberculosis and Cysticerci:</i>						
Whole carcases condemned	1	3	5	18	8	—
Carcases of which some part or organ was condemned	954	93	9	482	376	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	36.4	62.3	.17	16.1	6.2	—
<i>Tuberculosis only:</i>						
Whole carcases condemned	—	1	—	—	1	—
Carcases of which some part or organ was condemned	105	24	—	—	14	—
Percentage of the number inspected affected with tuberculosis	4.0	16.2	—	—	.2	—
<i>Cysticercosis:</i>						
Carcases of which some part or organ was condemned	7	—	—	—	—	—
Carcases submitted to treatment by refrigeration	7	—	—	—	—	—
Generalised and totally condemned	Nil	—	—	—	—	—

Milk and Dairies Regulations

Eastbourne is a specified area within the meaning of the Milk (Special Designations) (Specified Areas) Order, 1955, and therefore all of the milk sold in the town has to be sold under a special designation. Well over 90 per cent. of the milk sold is pasteurised, the balance being made up of Tuberculin Tested Farm Bottled Milk, and a small sale of Sterilised Milk.

There is only one pasteurising establishment in the town, but two firms import milk from Brighton and Bexhill respectively for local sale.

(a) REGISTRATION OF DAIRIES AND DISTRIBUTORS

(i) The following were registered under these Regulations:

Dairies (Premises)	..	..	..	8
Distributors (Persons)	..	..	..	89

Of these, one dairy and two distributors were registered only for the sale of cream.

(ii) *Milk (Special Designation) Regulations*

Licences granted were:

To Pasteurise Milk	..	..	..	1
Dealers' Licences to use the designation "Pasteurised"	..	..	..	72
Dealers' Licences to use the designation "Sterilised"	..	..	..	24
Dealers' Licences to use the designation "Tuberculin Tested"	..	..	..	31

(b) SAMPLING OF MILK

Milk is sampled and examined broadly for three purposes: to ensure that the composition of the milk is up to the standard required; for testing as to cleanliness; keeping quality and effective pasteurisation; and for the presence of tuberculosis.

Samples taken for this purpose with the results of analysis or examination were as shown.

(i) *Chemical Analysis*

Twenty-one samples were submitted for analysis, of which six were sold as Channel Island milk.

The table shows the average composition of the samples and the average of the samples of Channel Island milk.

<i>Samples taken</i>	<i>Milk Fat</i> %	<i>Milk Solids other than Milk Fat</i> %
Average for the Year	3.68	8.69
Richest Sample (August)	4.04	8.84
Lowest Sample (May) (excluding Channel Island Milk)	3.42	8.58
Average of Channel Island Milks ..	5.06	8.91
Requirements of the Sale of Milk Regulations	3.00	8.50
Requirements of the (Channel Island) Milk Regulations	4.00	

(ii) *Bacteriological Examinations*

Class of Milk	No. of Samples Tested	Appropriate Tests	Number of Samples	
			Passed	Failed
Pasteurised	113	Phosphatase	113	—
		Methylene Blue	113	—
Tuberculin Tested (Pasteurised) ..	33	Phosphatase	33	—
		Methylene Blue	33	—
Tuberculin Tested (Farm Bottled Milk)	50	Methylene Blue	42	8
Sterilised	19	Turbidity Test	19	—

Reports on the eight Tuberculin Tested (Farm Bottled) Milk samples which failed the prescribed test were referred to the County Milk Production Officer for attention at the farms.

(iii) *Examination of Milk for the Presence of Tuberculosis*

In order to regulate the flow of samples, by arrangement with the Public Health Laboratory, samples of ordinary milk and of farm-bottled milk are taken on a rota system during 48 weeks of the year.

Of the 69 samples taken 65 proved to be negative, and in one case M. Tuberculosis was found by guinea pig inoculation. In three cases the guinea pigs inoculated with the milk died shortly after the injection, the results therefore being void.

The positive sample was reported to the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, who carried out appropriate examination and testing at the farm of origin.

Manufacture and Sale of Ice Cream

(a) REGISTERED PREMISES

The number of premises registered for the manufacture, storage or sale of ice cream in accordance with Section 16 of the Food and Drugs Act, 1955, was:

(a) Wholesale Manufacturer	1
(b) Manufacture and Retail Sale	10
(c) For the Sale of Ice Cream	151
(d) For storage of Ice Cream for the purpose of sale	1

Visits and inspections of these premises totalled 301; 106 being to manufacturers' premises and 195 to retailers.

(b) BACTERIOLOGICAL EXAMINATION

One hundred and thirty-seven samples were taken. The bacteriologist classified them in the grades indicated below:

Grade 1	..	..	..	62	} 103
Grade 2	..	..	..	41	
Grade 3	..	..	..	29	} 34
Grade 4	..	..	..	5	

75.2 per cent. of the samples taken fell into grades 1 and 2.

The provisional grade classification indicates that samples falling in grades 1 and 2 may be considered satisfactory. Samples falling in grades 3 and 4 need to be followed up as there is some falling short in the standard of hygiene in production. A number of the samples falling into grade 3 were found to be due in some measure to extensive building works being carried out at one factory where a large proportion of the samples taken were manufactured. Detailed inspection of the premises over a period resulted in the upgrading of the product.

The manufacture of ice cream is rapidly falling into the hands of the large producers with the result that more hard, factory-wrapped ice cream is now sold than formerly and the number of retailers is increasing year by year, this product having now reached off-licence departments of licensed houses.

Inspection of Other Foods

The following is a list of foodstuffs voluntarily surrendered by the vendors on being found to be unfit for human consumption:

Bacon (lbs.)	19½	Lard (lbs.)	56
Butter (lbs.)	66¾	Meat and Offal (lbs.)	1005¼
Cake (lbs.)	68	Meat Products (lbs.)	378¼
Cheese (lbs.)	136	Meat (4 lb. and less cans)	132
Cheese (boxes)	7	Meat (over 4 lb. cans)	84
Coconut (lbs.)	17½	Milk (cans)	79
Cornflour (pkts.)	3	Paste, meat and fish (cans and jars)	3
Cream (jars)	6	Poultry (cans)	2
Cream Sandwich Sponges	7182	Poultry (lbs.)	200
Egg, frozen (lbs.)	44	Rice (cans)	6
Egg, liquid (lbs.)	126	Sago (lbs.)	9
Egg Vermicelli (cans)	5	Sausages (lbs.)	199
Fish (cans)	52	Sausages (cans)	32
Fish (stones)	98	Soup (cans)	32
Fruit (cans)	620	Soup Nuts (pkts.)	17
Fruit, dried (lbs.)	332	Swiss Fondue (ozs.)	56
Ham (lbs.)	1064½	Swiss and Jam Rolls	6
Jam and Marmalade (lbs.)	43	Vegetables (cans)	331
Kippers (pairs)	61	Watercress (chips)	5

Two hundred and eighteen inspections were made in connection with the above unsound food.

The majority of this foodstuff was dealt with in small quantities and was disposed of by burning at the refuse destructor.

Unfit meat from butchers' shops and wholesale stores is disposed of under suitable safeguards for sterilisation and processing into animal foodstuffs, etc.

Sampling of Food and Drugs

Seventy-five formal and 52 informal samples were submitted to the Public Analyst, of which two and one respectively were found to be unsatisfactory.

Action taken in connection with Samples which the Public Analyst reported to be Unsatisfactory

SAMPLE NO. 789—SAUSAGES (Formal)

No statement as to type of sausages.

Sulphur dioxide present and not stated.

(The sausages in question were sold as pork sausages containing preservative. Owing to a clerical error this was not indicated to the Public Analyst. No action necessary.)

SAMPLE NO. 1113—CREAM COOKIES (Formal)

Cream filling contained no butter fat.

No general notice as to imitation cream exhibited.

Vendor prosecuted for an offence under Section 47 of the Food and Drugs Act, 1955. Fined £5.

SAMPLE NO. 1121—ICE CREAM (Informal)

Advertised as genuine cream ice. Contained no butter fat.

Follow-up sample to be taken.

SAMPLE NO. 927—GINGER WINE

Labelled Home Made Ginger Wine (Recipe 100 years old).

Public Analyst reported that the sample was non-alcoholic. This was not stated on the label, which read "Home Made Ginger Wine from one-hundred-year-old recipe". Contravention under Section 6 of the Food and Drugs Act, 1955, and of Article 4 of the Labelling of Food Order, 1953.

Warning letter sent to vendor.

Action taken in respect of Other Unsatisfactory Food

WRAPPED LOAF AFFECTED WITH MOULD

Warning letter sent.

FISH CAKES AFFECTED WITH MOULD

Warning letter sent.

HOUSING

The inspections made by the Public Health Inspectors for housing purposes were:

Dwelling Houses (Housing Act)	..	..	277
Dwelling Houses (Public Health Act)	..	..	113
Revisits	..	..	325

Clearance Areas and Unfit Houses

The Council's five-year programme for dealing with unfit houses was carried a stage further when the Inquiry was held into eighteen houses in Leslie Street. The Compulsory Purchase Order for this area was confirmed, without modification, by the Minister of Housing and Local Government in May, and all of the houses were vacated before the end of the year and six of them demolished.

Since the end of the war 82 houses have been dealt with in eight clearance areas.

Ten individual unfit houses were reported on and these were dealt with as follows:

One owner gave an undertaking to carry out specified works to render the house fit.

Closing Orders were made in respect of four houses the demolition of which was impracticable as they gave support to other houses or buildings. Two of these Orders became operative before the end of the year, when the tenants were rehoused.

Demolition Orders were made in respect of five houses and three were demolished during the period.

Of the 113 houses included in the five-year programme 69 have been dealt with.

In the case of repairs to houses, work under Section 9 of the Housing Act, 1936, still remains difficult, owing to prevailing low rents and the high cost of repairs. A certain amount of activity was possible and 76 houses were rendered fit following informal action. In one case, following formal action, remedial work was carried out by the Council and the cost recovered from the owner.

The Housing Act, 1957, which is a consolidating Act, came into operation on the 1st September, but the Act does no more than bring all the outstanding provisions of the former Acts, together with any amendments, into the one Act.

Action was taken to provide additional facilities in two houses let as lodgings and the appropriate notices served on the owners. The proposed works had not been put in hand during the period covered by this report.

It was necessary to take action in connection with the letting of rooms in a basement which had been formally closed under Section 12 of the Act of 1936. The owner was prosecuted and fined £10 with 3 guineas costs.

Housing Report

The table which follows gives the totals of the quarterly reports submitted to the Ministry of Housing and Local Government as to action taken in 1957.

HOUSES IN CLEARANCE AREAS AND UNFIT HOUSES ELSEWHERE

A—HOUSES DEMOLISHED

	<i>HOUSES DEMOLISHED</i>	<i>DISPLACED during period</i>	
		<i>Persons</i>	<i>Families</i>
<i>IN CLEARANCE AREAS</i> (Housing Act, 1957)			
(1) Houses unfit for human habitation	16	77	32
(2) Houses included by reason of bad arrangement, etc. ..	—	—	—
(3) Houses on land acquired under Section 43 (2) Housing Act, 1957 ..	—	—	—
<i>NOT IN CLEARANCE AREA</i>			
(4) As a result of formal or informal procedure under Section 17 (1) Housing Act, 1957	3	6	3
B—UNFIT HOUSES CLOSED			
	<i>Number</i>		
(5) Under Sections 16 (4), 17 (1) and 35 (1), Housing Act, 1957	2	6	2
(6) Under Sections 17 (3) and 26, Housing Act, 1957 ..	—	—	—
(7) Parts of buildings closed under Section 18, Housing Act, 1957	—	—	—

C—UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED

	<i>By Owner</i>	<i>By Local Authority</i>
(8) After informal action by local authority ..	76	—
(9) After formal notice under (a) Public Health Acts ..	10	—
(b) Sections 9 and 16, Housing Act, 1957 ..	2	1
(10) Under Section 24, Housing Act, 1957 ..	—	—

D—UNFIT HOUSES IN TEMPORARY USE (Housing Act, 1957)

	<i>Number of Houses</i>	<i>Number of separate dwellings contained in Column (1)</i>
	(1)	(2)
Position at end of period		
(11) Retained for temporary accommodation		
(a) Under Section 48	—	—
(b) Under Section 17 (2)	1	1
(c) Under Section 46	—	—
(12) Licensed for temporary occupation under Section 34 or 53	—	—

E—PURCHASE OF HOUSES BY AGREEMENT

	<i>Number of Houses</i>	<i>Number of occupants of houses in Column (1)</i>
	(1)	(2)
(13) Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased in the period	—	—

Housing Act, 1949—Improvement Grants

Forty-two applications for improvement grants were considered, two of which were later withdrawn. Thirty-eight applications were approved and two not approved.

In twenty-four cases the applications were on behalf of owner occupiers and in the remaining fourteen cases the works were carried out by owners for the benefit of their tenants.

Rent Act, 1957—Certificate of Disrepair

Action in connection with the disrepair of houses in relation to their rent under the provisions of the Housing Repairs and Rents Act, 1954, had practically come to a standstill, but received fresh impetus by the advent of the Rent Act, 1957.

The procedure in dealing with certificates of disrepair under this latter Act is somewhat involved and requires that the initial steps be taken between landlord and tenant, with the local authority acting in a quasi-judicial capacity where the landlord and tenant are in dispute, and a considerable period of time must elapse before the local authority is approached on the matter with the result that not many applications had been made by the end of the year.

There is no doubt that very many tenants, even in houses in need of repair will pay the increased rent without resource to the action permitted by the Rent Act, mainly, I think, because of the concentration

on the matter of notices to quit and evictions both in the press and on the radio. Very little public advice through these mediums was directed to certificates of disrepair.

Applications, etc., dealt with were:

Applications for certificates	12
Decisions not to issue certificates	1
Decisions to issue certificates	11
Undertakings given by landlords under paragraph 5 of the First Schedule	5
Certificates issued	3
Applications by landlords for cancellation of certificates	1

Applications for Housing Accommodation, etc.

The Housing Superintendent has kindly furnished the following information in connection with rehousing by the Council, both from the normal waiting list and from unfit houses:

Total number of outstanding housing applications at 31st December, 1957	1,420
Number of families housed in requisitioned properties	73
Number of family units rehoused during 1957	337
Number of houses and flats built by the Council in 1957	188

GENERAL INSPECTIONS FOR PUBLIC HEALTH PURPOSES

Visits and inspections made by the Public Health Inspectors for the above purposes were:

Complaints investigated	651
Schools	39
Camping Sites and Moveable Dwellings ..	152
Places of Public Entertainment	16
Public Baths	146
Drainage and Plumbing Works	941
Land Charges Enquiries	490
Stables and Piggeries	58
Smoke Observations	173
Factories	173
Workplaces	14
Outworkers' Premises	3
Shops (Section 38, Shops Act, 1950) ..	79
Departmental Properties	278
Revisits	891
Infectious Disease Investigations	39
Miscellaneous Visits	1,499

Statutory Notices under the Public Health Act, 1936

In most cases works necessary to abate nuisances or to deal with other matters under the Public Health Act, 1936 are carried out after

informal intimation by the Inspectors. There are, however, some cases in which it is necessary to serve formal notice and the following were served:

Section 75—To provide dustbins ..	11
Section 93—To abate nuisances	8
Sections 93 and 103—To abate smoke nuisances and to prevent the emission of grit	2

So far as the smoke nuisance is concerned, both notices were served in respect of the same premises. A statutory notice to abate a smoke nuisance was served early in the year and this nuisance was to some extent abated by the installation of a taller chimney and more effective control of the furnace. However, later in the year the same furnace proved to be a nuisance by reason of the emission of grit and an application was subsequently made to the justices for a Nuisance Order. At the hearing before the Court the justices heard observations from technical experts and the fuel suppliers, with the result that they adjourned the hearing for six months, which carried the matter into 1958, when the justices at their resumed hearing made a Nuisance Order requiring the abatement of the nuisance within a period of four months.

Moveable Dwellings and Camping Sites

An area of 1.36 acres of land near the north-east boundary of the Borough is licensed as a permanent site for stationing thirty caravans. A sewage disposal plant is installed on the site.

Applications were received as follows:

For licences to use land as a site for moveable dwellings (during the season only) ..	2
For licences to station individual caravans ..	6

Towards the end of the year works of preparation were put in hand for the creation of a new camping site to take 160 caravans. It is proposed at this site to instal sewage disposal plant, ablution blocks, laundry, etc. as a permanent feature.

Schools

The sanitary and washing facilities at schools under the control of the local authority were kept under observation. More and more schools are being provided with kitchens on the premises, so that within a few months the use of the container service bringing meals from a central kitchen will fall into disuse, and with this change of method more attention is paid to the food hygiene aspect at the kitchens in the schools.

Shops Act

Only Section 38 of the Shops Act, 1950, is administered by this Department. This section deals with the health, comfort, etc., of shop workers.

One application was made for exemption from the requirements to provide sanitary accommodation. This application was refused. Subsequent alterations in staffing ensured that no employed persons were engaged on the premises.

Rag Flock and Other Filling Materials Act

There were nine premises registered by the local authority under the provisions of this Act and frequent inspections were made to these premises to ensure that the provisions as to cleanliness of materials and bedding were complied with.

Pet Animals Act, 1951

Five applications for licences to keep pet shops were received during the year, all of which were granted. In September the Council at the request of the R.S.P.C.A., resolved to make an additional condition attached to licences to keep pet shops—"That leaflets containing instructions on how to keep and house pets should be given to the purchasers on each sale of certain animals, reptiles and fish". The local branch of the R.S.P.C.A., for the furtherance of their cause, decided to supply these leaflets to the Council for distribution without payment.

Fertilisers and Feeding Stuffs Act, 1926

Five samples of fertilisers and two of feedingstuffs were submitted for analysis in accordance with the requirements of the Fertilisers and Feeding Stuffs Regulations, 1932 and 1951, all of which were reported on by the Public Analyst as satisfactory.

Factories Acts, 1937 and 1948

The following tables indicate the inspections made and action taken under the provisions of these Acts.

1—INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH

<i>Premises</i>	<i>Number on Register</i>	<i>Number of</i>		
		<i>Inspections</i>	<i>Written Notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	104	48	2	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	240	120	7	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	83	39	2	—
TOTAL ..	427	207	11	—

2—CASES IN WHICH DEFECTS WERE FOUND

<i>Particulars</i>	<i>Number of cases in which defects were found</i>				<i>Number of cases in which prosecutions were instituted</i>
	<i>Found</i>	<i>Remedied</i>	<i>Referred</i>		
			<i>To H.M. Inspector</i>	<i>By H.M. Inspector</i>	
Want of cleanliness (S.1)	8	8	—	—	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	1	1	—	—	—
Sanitary Conveniences (S.7):					
(a) Insufficient	2	3	—	—	—
(b) Unsuitable or defective	6	5	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	1	1	—	—	—
TOTAL ..	18	18	—	—	—

Part VII of the Act—Outwork

SECTIONS 110 AND 111

	<i>Section 110</i>		
	<i>No. of Out-Workers in August list required by Section 110 (1) (c)</i>	<i>No. of cases of default in sending lists to the Council</i>	<i>No. of prosecutions for failure to supply lists</i>
Making, altering, etc., of wearing apparel	27	—	—
Household linen	2	—	—
Curtains and furniture hangings	10	—	—
Furniture and upholstery ..	8	—	—
Umbrellas, etc.	1	—	—
TOTAL ..	48	—	—

SECTION 111

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

RODENT CONTROL

(a) Surface Control

The continuous survey and inspection required by the Prevention of Damage by Pests Act, 1949, continued and action was taken wherever rats or mice were found.

The Council provides a free service in connection with private dwellinghouses, but a charge is made in the case of business and other premises for the destruction of rats and mice. Two rodent operators are employed and are engaged in the survey, inspection and destruction of these rodents.

The following table shows the activities of the operators on surface control.

	TYPE OF PROPERTY			
	<i>Local Authority</i>	<i>Dwelling Houses</i>	<i>Business</i>	<i>Total</i>
Number:				
Inspected on Complaint ..	9	214	15	238
Inspected on Survey or Investigation	116	598	305	1019
Found to be infested by:				
Rats (a) Major	1	1	1	3
(b) Minor	2	166	8	176
Mice (a) Major	5	16	27	48
(b) Minor	10	195	19	224
Treated by Operators	18	378	55	451
Visits for all purposes	302	4573	860	5735

Number of block control schemes carried out—24.

It will be seen that mice cause rather more visits than rats and in this connection it is of interest to note that the mouse-trap cheese tag is now out-moded. Mr. and Mrs. Mouse and their children are finicky feeders and much prefer the finest grade of oatmeal with castor sugar and white oil as a bait base. The addition of 5 per cent. Warfarin to the bait does not worry them for long.

(b) Sewer Baiting

Sewer baiting was carried out in May and November, the sewers being baited via the street manholes.

As stated in previous reports, we had by the normal method of treatment, done no more than keep the numbers down in competition with normal breeding, but following consultations with officers of the Ministry of Agriculture, Fisheries and Food, Infestation Division, and agreement with the Ministry that such treatment should rank for grant, a change was made in November to baiting with Warfarin in oatmeal, to which bait a mould inhibitor was added.

In order to make this type of baiting effective a longer period was allowed between the deposits of bait so as to allow the rodents adequate time to feed, and as under this method a lethal bait is placed on each of the three days, the results were most gratifying. By the end of the

treatment positive results were seen, the number of manholes shown to be clear of rats rose from 89 in May to 187 in November, as indicated by the following table:

	<i>November,</i> <i>1956</i>	<i>May,</i> <i>1957</i>	<i>November,</i> <i>1957</i>
Manholes baited	365	379	387
Heavy infestation (complete clearance of baits) ..	237	261	160
Moderate to light infestation (partial take of bait) ..	29	29	40
No evidence of rats (baits not touched)	99	89	187

SECTION F

MISCELLANEOUS

Nursing Homes
Nurses Agencies
Nurseries and Child Minders
Children's Act, 1948
National Society for the Prevention of Cruelty to Children
Staff Medical Examinations
Midwives Act, 1951
Epilepsy and Cerebral Palsy
Meteorology

Public Health Act, 1936—Section 187

NURSING HOMES

No changes in registration particulars were reported and at the end of the year twelve Nursing Homes provided an approximate total of 140 beds for chronic, medical and surgical patients, and four beds for maternity cases.

Visits of inspection were carried out by the medical staff of the Department.

Nurses Acts, 1943 and 1945

NURSES' AGENCIES

Licences in respect of two existing Agencies were renewed. The records of Agencies were found to be satisfactory on inspection by the medical staff of the Department.

NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948

Two premises other than private dwellings where children are received to be looked after for the day, or a substantial part of the day, or for any longer period not exceeding six days, remained registered under this Act.

Five persons remained registered as Child Minders at the end of the year. Orders made by the Council under Section 2 of the Act, restrict the number of children to be looked after to a combined total of twenty-three for all five homes.

Children Act, 1948

RESIDENTIAL HOMES

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

Dental inspection of the children was carried out in the Homes by the Chief 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.

REPORT BY THE LOCAL INSPECTOR OF THE NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

I am indebted to Inspector B. H. Rich for the following details of the work the Society undertook during the year.

1—Cases referred by the staff of the Public Health Department.

<i>Classification</i>	<i>Cases</i>	<i>Children</i>				<i>Total</i>
		0-2	2-5	5-15	15-17	
Neglect	9	8	9	13	1	31
Assault	1	—	1	2	—	3
Unregistered Foster Child ..	2	2	2	—	—	4
Advice Sought ..	2	1	3	1	—	5
	—	—	—	—	—	—
	14	11	15	16	1	43
	—	—	—	—	—	—

2—Other cases reported by the general public and other official bodies were classified as:

Neglect	35
Assault or Ill-treatment	5
Beyond Control	2
Moral Danger	4
Advice Sought	2
Unregistered Foster Child	33
	—
	81
	—

These cases involved 205 children, of whom 116 were boys and 89 girls.

The number of visits made in connection with cases reported by Public Health Officers was 81.

STAFF MEDICAL EXAMINATIONS

The medical staff again devoted a considerable amount of time to medical examinations in connection with new entrants, superannuation, and of staff of various departments concerning absence from duty on account of accident or illness.

In 1957 the examinations were:

New appointments, superannuations, etc.	..	214
Sick pay	.. .. .	72
		286

In addition to the above, seventeen examinations were carried out on candidates for admission to Training Colleges, etc.

There were also eleven sessions at Chelsea Training College and three at Eastbourne Training College for medical inspection.

MIDWIVES ACT, 1951

The Local Health Authority is the Local Supervising Authority for the purposes of the Midwives Act, 1951.

During the year thirty-one midwives notified their intention to practise, of whom three were in the Local Health Authority's Domiciliary Midwifery Service, and twenty-six were employed in the Hospital Service. Two independent midwives notified their intention to act as midwives and two as maternity nurses.

EPILEPSY AND CEREBRAL PALSY

At the end of the year there were thirty-two ascertained epileptics on the Department's records and eleven persons with cerebral palsy. Four persons suffered from both afflictions.

During the year five persons, including four children, were ascertained as epileptics. Two cases of cerebral palsy were reported. Of cases removed from the records, four children left school, two became classified as in Institutional care, two Institutional cases died of epilepsy and one of cerebral palsy.

NUMBER OF PERSONS ASCERTAINED

	<i>Local Education Authority</i>	<i>Mental Health Service</i>	<i>Voluntary Association for the Care of Cripples</i>	<i>In Institutional Care</i>
On records at 31.12.56:				
Epileptic	16	10	—	3
Cerebral Palsy ..	3	7	4	—
Removed during 1957:				
Epileptic	4	2	—	2
Cerebral Palsy ..	—	1	—	—
Ascertained during 1957:				
Epileptic	3	2	—	2
Cerebral Palsy ..	1	1	—	—
On records at 31.12.57:				
Epileptic	15	10	4	3
Cerebral Palsy ..	4	7	—	—

METEOROLOGY

Borough Meteorologist : W. L. PECK

Sunshine

The total of 1822·4 hours placed Eastbourne eleventh in the official list. Sunshine was below average in March, April, July, August, September and November.

Temperature

Day temperatures were generally above average. May, August, September and November were the only months below average. Night temperatures were also above average with the exception of May, September and December.

Sea Temperature

Apart from September, November and December, all other months were above average.

Rainfall

With the exception of February, July and September, all other months were below average. Slightly more than half the total year's rainfall fell in these three months. 2·433 inches of rain were recorded on 2nd July, which was the heaviest fall since records began in 1888.

Summary of Observations

AIR PRESSURE: (Mean Sea Level)

Daily Average

9 a.m.	..	..	..	..	..	30·054 inches
9 p.m.	..	..	..	..	..	30·048 „

AIR TEMPERATURE:

Daily Average

Maximum	..	..	..	..	..	57·1 degrees
Minimum	..	..	..	..	..	47·0 „
Combined	..	..	..	..	..	52·0 „
Range	..	..	..	..	..	10·1 „
At 9 a.m.	..	..	..	..	..	52·6 „
At 9 p.m.	..	..	..	..	..	51·6 „
Warmest Day—30th June	..	..	..	..	..	86 „
Warmest Night—30th June	..	..	..	..	..	65 „
Coldest Day—15th January	..	..	..	..	..	36 „
Coldest Night—17th December	..	..	..	..	..	23 „

EARTH TEMPERATURES:

Daily Averages

At 1 foot	53.3 degrees
At 4 foot	54.2 „

SUNSHINE:

Total	1822.4 hours
Daily Average	4.99 „

RAINFALL:

Total	27.81 inches
“Rain” days	157

HUMIDITY:

Daily Averages

9 a.m.	81 per cent.
9 p.m.	83 „

WINDS:

Percentage of 9 a.m. and 9 p.m. observations.

<i>Direction</i>	<i>Percentage</i>
N.	16.30
N.E.	5.62
E.	9.04
S.E.	6.30
S.	7.94
S.W.	10.28
W.	27.94
N.W.	14.25
Calm	2.33

Prevailing Winds—West.

Snow and sleet recorded on	Nil days
Thunderstorms recorded on	8 „
Fog (9 a.m.) recorded on	4 „
Gales recorded on	4 „
Air frost recorded on	9 „
Ground frost recorded during	27 nights

Sunshine

The positions of the Resorts in Southern districts in the Air Ministry list were:

<i>Position in List</i>	<i>Town</i>	<i>Total Hours</i>
1	Shanklin	1,929.7
2	Sandown	1,881.3
3	Littlehampton	1,867.5
4	Weymouth	1,860.5
6	Ventnor Park	1,848.4
7	Torquay	1,846.2

<i>Position in List</i>	<i>Town</i>	<i>Total Hours</i>
8	Bognor	1,844.0
9	Worthing	1,836.4
10	Bournemouth	1,827.5
11	EASTBOURNE	1,822.4
12	Seaford	1,811.5
13	Poole	1,808.9
14	Brighton	1,807.7
15	Margate	1,807.4
19	Hastings	1,786.5
20	Swanage	1,776.3
21	Portsmouth.. ..	1,767.5
22	Plymouth	1,760.6
23	Scilly Isles	1,760.4
24	Folkestone	1,760.3
26	Ramsgate	1,756.2
29	Exmouth	1,749.4
30	Dover	1,749.3
32	Newquay	1,742.1
35	Bexhill	1,728.2
37	Ilfracombe	1,725.9
38	Falmouth	1,724.8
40	Penzance	1,712.8
41	Teignmouth	1,709.6
51	Ryde	1,674.4
103	Paignton	1,564.0

AVERAGES: 60 years. 1888 to 1941 and 1947 to 1952

<i>Month</i>	<i>Air Temperature</i>			<i>Mean Sea Tem- pera- ture</i>	<i>Sunshine</i>		<i>Rainfall</i>	
	<i>Means of</i>				<i>Total Hours</i>	<i>Daily Hours</i>	<i>Inches</i>	<i>'Rain' Days</i>
	<i>Maxi- mum</i>	<i>Mini- mum</i>	<i>Max- and Min. Com- bined</i>					
January	45.2	37.2	41.2	42.4	62.0	2.00	2.96	17
February	45.4	36.5	41.0	41.2	83.7	2.99	2.29	14
March	48.2	38.1	43.1	42.8	137.0	4.42	2.26	14
April	52.9	41.4	47.1	46.8	179.1	5.87	1.97	13
May	59.0	46.9	53.0	52.8	234.9	7.58	1.64	11
June	64.1	52.2	58.1	58.6	238.0	7.93	1.77	10
July	67.2	55.9	61.6	62.5	236.3	7.62	2.20	11
August	67.6	56.3	61.9	63.7	218.7	7.05	2.56	13
September	64.7	52.9	58.8	61.2	173.6	5.79	2.40	12
October	58.0	47.2	52.6	55.7	121.4	3.92	3.91	16
November	51.3	41.9	46.6	49.8	72.2	2.41	3.84	16
December	46.9	38.6	42.8	45.2	54.2	1.75	3.45	18
YEAR	55.9	45.5	50.7	51.9	1811.1	4.96	31.25	165

MONTHLY AVERAGES

Month	Air Temperature					Mean Sea Temperature	Sunshine		Rainfall	
	Means of			High-est	Low-est		Total Hours	Daily Hours	Inches	'Rain' Days
	Maxi-mum	Mini-mum	Max. and Min. Combined							
January ..	46.8	39.8	43.3	54	31	44.2	77.4	2.50	1.76	18
February ..	48.3	40.8	44.5	53	31	45.0	94.5	3.38	4.48	21
March ..	53.0	44.0	48.5	58	32	46.7	121.8	3.93	1.83	13
April ..	54.9	43.0	48.9	64	34	49.6	175.8	5.86	0.20	4
May ..	58.1	46.4	52.3	63	39	52.9	252.1	8.13	0.96	11
June ..	68.5	53.3	60.9	86	46	59.9	321.3	10.71	0.50	7
July ..	69.0	58.5	63.7	80	53	63.7	207.1	6.68	5.28	16
August ..	66.7	56.3	61.5	73	50	63.8	195.9	6.32	1.54	12
September ..	63.0	52.2	57.6	67	41	59.9	128.3	4.28	4.54	17
October ..	59.8	49.0	54.4	65	39	56.3	125.6	4.05	1.90	11
November ..	49.7	42.1	45.9	57	31	49.6	58.3	1.94	2.85	10
December ..	46.9	38.5	42.7	54	23	44.9	64.3	2.07	1.88	17
YEAR ..	57.1	47.0	52.0	86	23	53.0	1822.4	4.99	27.81	157

1957 Monthly Variations from Averages.

TEMPERATURE

	Maximum °F.	Minimum °F.	Sea °F.	Sunshine Hours	Rainfall Inches
January ..	+1.6	+2.6	+1.8	+15.4	-1.20
February ..	+2.9	+4.3	+3.8	+10.8	+2.19
March ..	+4.8	+5.9	+3.9	-15.2	-0.43
April ..	+2.0	+1.6	+2.8	- 3.3	-1.68
May ..	-0.9	-0.5	+0.1	+17.2	-0.68
June ..	+4.4	+1.1	+1.3	+83.3	-1.27
July ..	+1.8	+2.6	+1.2	-29.2	+3.08
August ..	-0.9	—	+0.1	-22.18	-1.02
September ..	-1.7	-0.7	-1.3	-45.3	+2.14
October ..	+1.8	+1.8	+0.6	+ 4.2	-2.01
November ..	-1.6	+0.2	-0.2	-13.9	-0.99
December ..	—	-0.1	-0.3	+10.1	-1.57
YEAR ..	+1.2	+1.5	+1.1	+11.3	-3.44

CONTENTS

1. Statistics.
2. School Hygiene.
3. Personal Hygiene.
4. Medical Inspection.
5. Follow-Up.
6. Arrangements for Treatment.
7. Child Guidance Service.
8. Handicapped Children.
9. Special Tuition (Home and Hospital).
10. Dental Clinic.
11. Difficult and Problem Families.
12. Employment of Children.
13. Provision of Clothing.
14. School Meals and Milk.
15. Notification of Infectious Disease.
16. Tuberculosis.
17. Diphtheria Immunisation.
18. Deaths of Schoolchildren.
19. Training Colleges.

SCHOOL HEALTH SERVICE

SCHOOL HEALTH DEPARTMENT
AVENUE HOUSE
EASTBOURNE

To the Chairman and Members of the Education Committee

LADIES AND GENTLEMEN,

JUBILEE REPORT

It is now a little over half a century since the appalling findings of physical impoverishment in recruits for the South African War were submitted to the Inter-Departmental Committee on Physical Deterioration. Legislation in 1907 based on the recommendations of this far-sighted Committee laid the foundations of the School Medical Service.

Eastbourne had actually anticipated this legislation and commenced a limited school medical service in 1903—it was, therefore, among the first Authorities to implement a full programme of routine school medical inspections in 1907–1908 which has continued ever since. It now falls to me to have the honour to present the fiftieth Annual Report on the School Health Service.

The undoubted improvements in the physical health of the school-child during the past fifty years and the implementation during the past decade of a comprehensive National Health Service have not, however, lessened the need for an active School Health Service with the responsibility of ensuring that each child, so far as mental and physical health is concerned, derives the maximum possible benefit from the education provided.

It is indeed a little surprising in looking through the early reports to find that not only were the same number of children examined each year as are now, but that the same proportion were considered to have defects requiring treatment in spite of the general standard of health being much lower. The proportion so described is no doubt somewhat governed by the treatment available: for example, only a quarter in the first years were for eye defects, for which treatment was only available in severe cases, while now it is in two-thirds of these children that the defect is one of vision. There was no school dental clinic, a deficiency which now seems glaring and which presumably led the medical officer to pass many children as having no defects amenable to treatment, although their teeth were decayed.

The number of school nurses has grown to nine—there were none to begin with, and later only one—and so great is the amount of work that they do that it is difficult to see how the Service could work at all without them. The fact that our school nurses are also health visitors is of inestimable value in securing continuity of advice and help to the whole family.

Perhaps the most pleasing change recorded in the reports over the last fifty years is the attitude of public opinion as shown by the fact that at first less than one-third of parents attended school medical inspections with their children while now over two-thirds do so, although this may in some measure be due to the mother's increased ability to attend.

Although physical defects are coming under control, very few can be said to have vanished altogether. About five hundred children were found with nits in their hair every year in the early years, and this has now shrunk to less than fifty, but with modern facilities for treatment it is a reproach that any remain. Some come from homes where the parents, who refuse treatment, are probably infected, and these provide a continuing source of trouble. The human factor is always with us.

The early reports contain pages of tables concerning the heights and weights of children and such physical statistics evidently occupied the minds of early workers to a considerable extent. This emphasis provided a most useful baseline and was no doubt of great value to the professional workers, but it has unfortunately led to an incomplete and unrealistic view of the nature of health amongst the general public. To those new to the field of periodic medical inspection the width of the range of normal growth comes as something of a surprise. It is common to find parents who accept without question their own small stature, but who worry because their children are under average weight. Many mothers complain at a school medical that their child is too thin when this is by no means true: there remains much to be done in the enlightenment of parents of the value of seeking after attributes of quality—firm limbs, good posture, bright eyes, sound teeth—in lieu of the present overvaluation of sheer bulk.

The years have also brought the mental and emotional growth of children to a place of attention alongside and complementary to that of their physical growth. Naughtiness and babyishness have always been recognised, but the help that the child needs to deal with his own confused inner feeling and impulses often out of his own control, and the help that he needs to cope with adults, are now seen as being every bit as important as the help that the adults need to deal with the child. We believe that one of the common causes of difficult behaviour is backwardness in school due to lack of ability, and recent surveys elsewhere have amply supported this view. The school at the Swallow's Nest has enabled all those children who were being handicapped in the ordinary school for this reason to be given specialist help and release from the emotional difficulties associated with continual failure. The larger numbers there as a result of transferring children to take advantage of the new facilities has tended to alter the whole nature of the school in the public mind, and a number of parents previously opposed have now given their consent willingly to their children's admission. Indeed, on several occasions recently, parents themselves have asked if their children might be admitted to the Swallow's Nest.

The freedom of spirit which springs from healthy bodies and minds can still be given to the rising generation, and we can confidently hope that the standards applied in assessing children's health can continue to be raised as far ahead as one can see. It is an interesting sidelight, which surely would have astonished the medical officer fifty years ago, that the reason given by some children for increased employment out of school hours is that they wish to earn money to spend on holidays abroad.

I thank you, Mr. Chairman, and the Committee members for your continued support. I also extend my thanks to the Chief Education Officer and to his staff for their valued and complete co-operation. My thanks are also due to my Deputy, Dr. Wright, for undertaking much of the day-to-day responsibility for the School Health Service and for his valued assistance in completing this section of the report in close co-operation with Miss B. Douch, the Senior Clerk to the School Health Service, who has proved herself invaluable in this capacity.

I am,

Your obedient Servant,

K. VICKERY,

Principal School Medical Officer.

EDUCATION COMMITTEE

(as constituted at 31st December, 1957)

The Mayor:

ALDERMAN S. M. CAFFYN, J.P.

Chairman:

COUNCILLOR W. P. LEBBON

Deputy Chairman:

COUNCILLOR W. E. HAFFENDEN

Co-opted Members:

REV. DR. J. J. CURTIN
MR. F. JONES
REV. W. W. S. MARCH
MRS. I. A. SNELL
REV. J. P. VEALL
MR. A. WILKINSON

Councillors:

T. A. ALSTON
J. B. COVENTRY
E. O. FINCH
MRS. E. V. F. FORDHAM
G. S. FOYLE
A. G. E. JUDGE
H. J. MEPHAM
W. A. NEALE
F. A. POPE
L. A. VICKERS
H. W. WENHAM
B. C. WILLIAMS

SCHOOL HEALTH SERVICES

(a) Full-time Officers

Principal School Medical Officer:

K. O. A. VICKERY, M.D., B.S.(Lond.), M.R.C.S., L.R.C.P., D.P.H.

Deputy Principal School Medical Officer:

ERIC W. WRIGHT, M.B., Ch.B., D.P.H.

School Medical Officer:

MARJORIE I. GODSON, M.B., Ch.B.

Principal School Dental Officer:

MAURICE G. BERRY, L.D.S., R.C.S.

School Dental Officer:

J. W. MARTIN, L.D.S.

School Nurses:

MRS. S. M. JAMES (Senior), S.R.N., H.V.Cert.
MISS J. C. M. BERK, S.R.N., H.V.Cert.
MISS E. L. CLARK, S.R.N., H.V.Cert.
MRS. D. I. DALE, S.R.N., S.C.M., H.V.Cert. (from 1.2.56)
MRS. L. FOSTER, S.R.N., S.C.M., H.V.Cert.
MISS E. E. GRIFFIN, S.R.N., S.C.M., H.V.Cert.
MISS M. G. HEMMING, S.R.N., H.V.Cert.
MISS B. J. HUDSON, S.R.N., S.C.M., H.V.Cert. (from 6.2.56)
MISS M. J. PARTRIDGE, S.R.N., S.C.M., H.V.Cert.
(The School Nurses are also Health Visitors)

Clerks:

MISS B. DOUCH (Senior)
MISS P. HIDE (from 6.8.57)
MISS J. MARKWICK

Dental Attendants:
 MISS D. D. SIDLEY
 MISS D. M. CLARKE (from 6.8.57)

(b) **Part-time Officers**

Orthodontic Specialist:
 NORMAN GRAY, F.D.S., R.C.S., H.D.D., L.D.S., Dip. Orth. R.C.S.

Orthodontic Assistant:
 H. G. GRIFFITH, B.D.S., L.D.S., R.C.S.

Child Guidance Service:
 DORIS, KATHLEEN SMALL, L.R.C.P., L.R.C.S., D.P.M.
 DR. HUGH ELWELL, M.A., M.R.C.S., L.R.C.P., D.P.M.
 MISS M. LOGG, B.A., Dip. Psych., Educational Psychologist
 MRS. M. SCOTT, M.A., Psychiatric Social Worker
 MISS C. LYNCH, Clerk (left)
 MRS. J. BARRON (from November)

Speech Therapist:
 MRS. K. HANSFORD, L.C.S.T.

CLINICS

The various Clinics were held as follows:

Examination

Acacia Villa	Fourth Friday, 10 a.m.
Avenue House	Thursday, 2.15 p.m.
Hampden Park Secondary School or Highfield Primary School ..	Second Wednesday, 2.15 p.m.

(Additional Clinics were held at all four centres and at Green Street as and when required.)

Minor Ailments

Acacia Villa	Daily, 9 a.m.
Avenue House	Daily, 9 a.m.
Hampden Park Hall	Monday, Wednesday, Friday, 9 a.m.
Open Air School	Monday, Wednesday, Friday, 9 a.m.
Green Street	Daily, 9 a.m.
Langney Village Hall	Monday, Wednesday, Friday, 9 a.m.

Speech Therapy

Acacia Villa	Fridays
Avenue House	Tuesday and Wednesday during school terms, 9.15 a.m. and 2.15 p.m.
Hampden Park Infants' School ..	Weekly sessions.
The Downs School	Weekly sessions.
Swallows Nest School	Weekly sessions.
Occupation Centre	Weekly sessions.

Child Guidance

Avenue House	
Psychiatrist	Friday, 9 a.m. and 2 p.m.
Educational Psychologist ..	Tuesday, 2 p.m.
	Friday, 9 a.m. and 2 p.m.

Ophthalmic

Princess Alice Hospital	Special sessions fortnightly, Friday, 9.30 a.m.
---------------------------------	---

Dental

Avenue House	Daily, 9 a.m. and 2 p.m.
Anaesthetic Sessions	Tuesday and Thursday, 9.30 a.m.
Orthodontic Sessions	Friday, 9 a.m.

1. STATISTICS

The number of children on the School registers on re-opening in January was 6,667 and 6,597 by the end of the year. There were 933 children admitted during the year, and the net increase compared with the end of 1956 was four. The net increase for successive years since December 1949 when there were 5,663 children on the school registers has been 26, 263, 238, 166, 90, 60, 15, 4. It is to be expected that numbers will now fall.

The average attendance of children for the year was 6,120, a percentage of 92.01.

TOTAL NUMBER OF CHILDREN

At Primary Schools	..	..	..	..	3,839
At Secondary Schools including Grammar Schools	..				2,661
At Day Special Schools	..	..	..	..	97
TOTAL	..	..	..	..	<u>6,597</u>

2. SCHOOL HYGIENE

Standards of hygiene of school premises continued to be satisfactory except in one or two of the older schools which are due to be rebuilt shortly. In these the highest standard possible with inadequate facilities was maintained.

3. PERSONAL HYGIENE

The School Nurses continued routine inspections of school-children, primarily with regard to their head and general cleanliness, but also taking this valuable opportunity of assessing their general state of health. Out of 13,469 examinations, 49 children were found to be infested.

4. MEDICAL INSPECTION

Periodic medical inspections of pupils were carried out in the following age groups:

- (a) *Entrants.* Pupils admitted for the first time to a maintained school.
- (b) *10-Year Old Groups.* Pupils attending a maintained Primary School on attaining the age of ten years.
- (c) *14-Year Old Groups.* Pupils seen during the term in which they were due to leave school.
- (d) *Additional Periodic Inspections.* Pupils attending a maintained school who missed the usual periodic examination.

Total number examined in these age groups was 1,977. A percentage of 18.72 was found to have one or more defects requiring treatment other than dental disease or infestation with vermin.

GENERAL CONDITION OF CHILDREN INSPECTED

An estimate of the child's physical condition at the time of inspection was made and the children classified as follows:

Satisfactory	..	..	..	1,946 (98.43 per cent.)
Unsatisfactory	..	..	..	31 (1.57 per cent.)

The percentage of parents who were present during the periodic medical inspections was 70.51. In the younger age groups the value of the inspection is greatly enhanced by this contact between doctor, parent, school nurse and teacher.

SPECIAL INSPECTIONS

Six hundred and fourteen children were brought to the notice of the School Medical Officers by parents, teachers and school nurses. As years pass between periodic inspections by the doctor, those dealing with children are greatly to be encouraged in bringing any doubt they may have to his notice.

In addition, 1,597 children who were noted at a previous periodic or special examination, were seen by the Medical Officers.

5. FOLLOW-UP

The necessary "follow-up" work in the homes and in the schools is done by the School Nurses:

Number of visits by Nurses to schools	..	..	..	339
Number of visits by Nurses to schools for medical inspection				197
Number of visits to homes of children by Nurses			..	335

6. ARRANGEMENTS FOR TREATMENT

Children who had defects were referred to their family doctor, to hospital for specialist opinion, or to the School Clinic for treatment for minor ailments and other special defects.

MINOR AILMENT CLINICS

		1956	1957
Total number of children who attended	..	587	781
Total attendances made	.. ..	2,364	3,585
Total number of defects treated	.. ..	595	791
Conditions treated were:			
Impetigo	.. ..	25	55
Eye Diseases (external)	.. ..	43	79
Ear Diseases	.. ..	16	27
Other skin diseases (boils, septic conditions, etc.)		320	398
Miscellaneous (sprains, burns, cuts, etc.)	..	191	232
Total	.. ..	595	791

SKIN DISEASES

The further increase in skin diseases is again largely attributable to the search for and treatment of plantar warts which often need a number of visits to the clinic before treatment is complete, and substantially accounts for the marked increase of attendances at minor ailment clinics noted above.

CHIROPODY

Monthly chiropody sessions continued throughout the year. Miss M. E. Winstanley, M.Ch.S., saw 34 children who made 69 attendances for treatment of corns, callosities and minor foot defects.

VISUAL DEFECTS

Using Snellens Eye Card or "E" cards, the vision of children in all schools was tested in the age groups: 5, 7, 10, 12, 14 and 17 years.

	<i>New Cases</i>		<i>Old Cases</i>	
	<i>1956</i>	<i>1957</i>	<i>1956</i>	<i>1957</i>
Number of cases referred to				
Ophthalmic Clinic	162	173	299	273
Number of attendances made ..	209	215	339	300
Glasses prescribed	106	121	175	172

On 162 occasions the school doctor referred children to the Executive Council for repair or replacement of broken glasses under the National Health Service. In twelve cases the applications were refused, as it was felt that undue negligence had been shown and the cost of these (£13 13s. 7d.) was borne by the Corporation.

Children suffering from squint were supervised at the hospital Ophthalmic Clinic, where orthoptic treatment was given when necessary.

EAR, NOSE AND THROAT DEFECTS

The number of children suffering from otitis media was small. Of the 420 school leavers examined twelve had a history of previous otitis media and two had defective hearing.

In accordance with a memorandum from the Ministry of Education a summary was made at the time of the periodic medical inspection of all children who had had tonsillectomy at any time previously. It is given below.

	<i>10-year</i>				
	<i>Entrants</i>	<i>Old</i>	<i>Leavers</i>	<i>Others</i>	<i>Total</i>
Number examined ..	568	445	644	320	= 1,977
Previous tonsillectomy					
number	56	144	185	92	= 477
Percentage	9.86	32.36	28.72	28.75	24.13

The percentage of all children with a previous history of tonsillectomy (24.13 per cent.) shows an increase over the figure for 1956 which was 21.21 per cent.

ORTHOPAEDIC DEFECTS

Children suffering from significant departures from the normal were referred to the hospital orthopaedic department for advice and treatment.

A weekly clinic for remedial foot and breathing exercises was continued at Avenue House during the year.

Foot Exercises

Total number of children who attended	..	..	27
Total number of attendances made	..	..	292

Breathing Exercises

Total number of children who attended	..	..	29
Total number of attendances made	..	..	286
Referred to Chelsea College	..	..	4

This treatment clinic is additional to those already in operation in schools suitable for the purpose, and the exercises were given by the third-year students from the Chelsea College of Physical Education. These classes, wherever held, are of very definite benefit to the children.

OTHER DEFECTS

Asthma and other allergic manifestations remain common whilst colds and respiratory infections continue to account for much absenteeism from school. There appears to be an increase of susceptibility to staphylococcal infections which may well be related to the almost unrestricted consumption of sweetstuffs in which a number of children are permitted to indulge.

SPEECH DEFECTS

Mrs. K. Hansford, L.C.S.T., who had been employed on a part-time basis until 1st April, 1957, took up full-time duties from that date.

Report of the Speech Therapist

In April 1957, four new Clinics were started in the district, at Acacia Villa, Seaside, Swallow's Nest E.S.N. School, Hampden Park Infants' School and the Occupation Centre. The Clinic at the Downs School was continued through the year. Attendances at these Clinics has been good.

			<i>Sessions</i>	<i>Cases</i>
Avenue House and Acacia Villa	..	..	222	46
Hampden Park Infant School	..	..	38	18
The Downs School (including Old Town)	..	..	34	9
Swallow's Nest Day E.S.N. School	..	..	29	14
Occupation Centre	..	..	25	10
			—	—
			348	97
			—	—

Number of attendances made by children of school age ..	1,699
Number of sessions spent visiting school and homes in the district	38
Number of cases under school age treated during the year	15
Number of attendances made by children under school age	257
One case from the Teachers' Training College made nineteen attendances	
Two cases from Bowdery House School, Seaford, made eleven attendances	
One child from East Dean made five attendances	
Number of attendances made at Occupation Centre ..	222

<i>Type of defect treated (children of school age)</i>	<i>Cases Discharged</i>	
Stammer	15	3
Dyslalia	40	17
Sigmatism	17	7
Spastic Speech	3	—
Cleft palate speech	3	—
Deafness	1	—
Other defects	8	2
	—	—
	87	29
	—	—

<i>Type of defect treated (children under school age)</i>	<i>Cases Discharged</i>	
Stammer	2	2
Dyslalia	5	1
Deafness	1	—
Delayed speech	4	1
Tongue tie	1	—
Other defects	2	—
	—	—
	15	4
	—	—

One case from the Teachers' Training College was discharged.
One child from East Dean was discharged.

Number of new cases referred during the year	68
Number of cases under treatment at the end of the year ..	79

KATHLEEN HANSFORD,
Speech Therapist.

7. CHILD GUIDANCE SERVICE

REPORT OF THE CHILD PSYCHIATRIST

Statistics relating to Eastbourne children :

Number of Sessions	131
Cases seen:	
Old	40
New	47
	— 87

Total number of attendances	..	..	..	941
New cases referred during 1957	..	..	..	70
Cases treated:				
By Psychiatrist	..	..	..	72
By Psychologist	..	..	..	21
(excluding those seen by Psychiatrist)				— 93

Waiting List :

1st January, 1957	..	..	..	36
31st December, 1957	..	..	..	23

Analysis of New Cases :

A. *Source :*

School Health Service	..	..	..	32
Schools	..	..	..	7
Parents	..	..	..	6
Probation Officers	..	..	..	3
Medical Practitioners	..	..	..	11
Hospitals	..	..	..	6
Other Agencies	..	..	..	5
				— 70

B. *Problems :*

Personality and Nervous Disorders	..	..	..	17
Habit Disorders	..	..	..	10
Behaviour problem	..	..	..	23
Education and Vocational problems	..	..	..	18
Delinquency	..	..	..	2
				— 70

Analysis of cases seen during 1957 :

A. *By Psychiatrist :*

Diagnosis	..	..	..	..	47
Treatment	..	..	..	..	72

NOTE: Ten parents were seen by the Psychiatrist. Number of attendances : 15.

Analysis of Diagnostic Cases :

Diagnosis and Advice	..	..	..	10
Treatment and Case Closed	..	..	..	4
Under Treatment	..	..	..	13
Awaiting Treatment	..	..	..	6
Periodic Supervision	..	..	..	14
				— 47

NOTE: Treatment includes a number of children who were later taken on for treatment after diagnosis and were therefore included in the "Treatment" figure.

Analysis of Treatment Cases :

Satisfactorily adjusted	..	..	..	6
Much improved	..	..	..	3
Slightly improved	..	..	..	3
Still under treatment	..	..	..	23
Withdrawn	..	..	..	4
Periodic supervision	..	..	..	29
Admitted to Lady Chichester Hospital	..	..	..	1
" " Children's Home	..	..	..	2
" " Approved School	..	..	..	1

B. *By Psychologist :*

For ascertainment of I.Q.	..	..	..	82
<i>Analysis of ascertainment cases :</i>				
Advice regarding education	..	..	..	24
Maladjusted	..	..	..	53
Attainment Tests	..	..	..	5
			—	82
<i>Coaching cases :</i>				
Receiving coaching at end of year 1957	..	..	..	14
Discharged	..	..	..	7
			—	21
School visits	..	..	..	58

C. *By Psychiatric Social Worker :*

School Histories	..	..	..	49
Clinic interviews	..	..	..	382
School visits	..	..	..	3
Home and other visits	..	..	..	326

It is with pleasure that we report for the first time in many years a reduction in our waiting list. This is due to two main factors—fewer referrals and increase in staff. At the same time there has been a marked increase in the number of individual interviews.

Reduction in referral rate	..	..	..	22
Total attendances increased by	..	..	..	200
Waiting list now	..	..	..	23

Up to now the policy at this Clinic has been somewhat different from that followed at the other Clinics in the County. Here we have attempted the treatment within the Clinic of children with most adverse home circumstances, who in other Clinics are dealt with by recommendation of placement in residential schools. The experience over the years now clearly shows that this policy has been neither to the advantage of the child nor is it the most economic use of the services of the clinical team. After careful consideration, the clinical team has come to the conclusion that the results achieved at this Clinic do not justify continuation of the present policy, and, in the future, the same criteria will be applied here as in the other Clinics.

Staff Changes—Miss Cynthia Lynch, the Clinic Secretary, resigned in October to take up an overseas appointment. Although only with us for a short period, she made a valuable contribution to the Clinic, and her resignation was received with much regret. Mrs. Joan Barron was appointed in November to fill this vacancy.

DORIS K. SMALL,
Psychiatrist in Charge.

8. HANDICAPPED CHILDREN

The following table shows the number of children on the Register of Handicapped Pupils at the end of the year :

	<i>In Residential Special Schools</i>	<i>In Day Special Schools</i>	<i>In Ordinary Schools</i>	<i>In Hospital Schools</i>	<i>At Home</i>	<i>Total</i>
Partially Sighted ..	1	1	—	—	—	2
Blind ..	2	—	—	—	—	2
Partially Deaf ..	2	1	3	—	2	8
Deaf ..	6	—	—	—	—	6
Delicate ..	—	26	8	—	—	34
Physically Handicapped ..	1	16	4	3	2	26
Educationally Sub-Normal ..	2	52	—	—	1	55
Epileptic ..	—	—	—	—	—	—
Maladjusted ..	1	—	3	—	—	4
	15	96	18	3	5	137

EPILEPTICS

There are sixteen children who are known epileptics attending ordinary schools in the town (not on the Register of Handicapped Pupils).

EDUCATION ACT, 1944, SECTION 57

Children notified to the Local Health Authority:

Under Section 57 (3)	3
Under Section 57 (5)	4

Of the above, three children were notified as being incapable of receiving education at school. Four others reached the statutory school leaving age and were reported to the Local Health Authority as requiring supervision after leaving school.

SWALLOW'S NEST DAY SCHOOL FOR E.S.N. PUPILS

	<i>Boys</i>	<i>Girls</i>
Number on roll, January, 1957	30	6
Admissions	17	9
Leavers	5	—
Number on roll, December, 1957	42	15

The five boys who left were accounted for as follows:—

One left the district.

One was withdrawn by his parents.

Three had reached the statutory leaving age.

Mr. S. Moss, Headmaster, reports:

During the year we had twenty-six new scholars admitted, which makes the school as large as it has ever been. The ages of the scholars vary from six to sixteen years, and this wide range in a small school tends to add to the difficulty of teaching satisfactorily.

As in past years we have to record our grateful thanks to the staff and students of Chelsea College for their help with our remedial P.E. and our swimming. Well over half of the children who go to the Baths can swim sufficiently well to thoroughly enjoy the lessons, and for the first time we competed in the Swimming Gala. The fact that we did not win a single point does not matter, as the boys were so pleased to be trying their skill against other schools. Mr. Roberts has encouraged our children so well that when we went to Hastings to compete against the Hastings and East Sussex E.S.N. Schools in athletics, we managed to bring back one of the trophies. We have also had a silver cup given for House competition. This was presented to us by Mr. and Mrs. A. S. Vollans, of St. Mary's School, Horam, and another friend has given us a carved shield for weekly merit competition. These should encourage some children to try a little harder.

Since last year we have had an increase in our cookery equipment, and now some boys as well as the girls do cookery. The subject is proving exceptionally popular and at the Exhibition of Work in December we heard many expressions of praise both from the official visitors and the parents.

During the summer we went to camp at Wannock. Both boys and girls were there and despite high winds on the first two days, everybody enjoyed themselves so well that they did not want to go home. Again we are indebted to Chelsea College students for their help, two of them were there each day to see that the girls were well supervised.

We have been granted the use of the Friday Street Playing Field for our games lessons, so we hope to be able to make adequate use of it whenever the weather is favourable.

S. MOSS, L.C.P.,

Headmaster.

DOWN'S SCHOOL, BEECHY AVENUE, EASTBOURNE

Forty children were on the register of the Downs School at the beginning of the year and were classified as follows:—

Delicate	24
Physically Handicapped	13
Partially Sighted	2
Partially Deaf	1
	—
	40
Number of admissions	14

The children who left were placed as follows:

Left to private school	..	..	..	..	1
Transferred to ordinary schools	..	..	..	..	2
School leavers	..	..	..	..	1
Admitted to residential special schools	..	..	..	..	4
Admitted to Dr. Barnardo's Home	..	..	..	..	1
Left the district	..	..	..	..	1
					—
					10

The number of children on the register at the end of the year were:

Delicate	..	..	..	..	..	26
Physically Handicapped	..	..	..	..	..	16
Partially Sighted	..	..	..	..	..	1
Partially Deaf	..	..	..	..	..	1
						—
						44

Miss B. A. Payne, Head Teacher, reports:—

Nineteen fifty-seven witnessed several innovations in the Downs School.

For the first time a school camp was held under the direction of Mr. J. Roberts, the Organiser of Physical Education. Twenty-four children, some quite severely handicapped, spent four days at the town schools' camp site at Wannock Farm, Willingdon and efficient help made what seemed at first a tremendous undertaking a successful and rewarding experience for all concerned, which we hope to repeat this year.

Several senior pupils took part in the Schools' Swimming Gala, and a group of juniors too handicapped to compete gave a demonstration of learning to swim in spite of physical disability. This was a great event, of lasting value to those who took part.

Senior girls have had cookery classes at the College of Further Education for some time, but it has now become possible for a cookery class to be held in school each week. While we have been grateful for the facilities made available to us in the past, we are glad to have the classes in our own school as more girls can attend, and we can all share an interest in their work.

Remedial exercises by the students of Chelsea College of Physical Education continue to be most beneficial, and now, children selected by the School Medical Officer are given physiotherapy on three afternoons a week.

It has been possible to reduce the rest period for everyone, and to discontinue it entirely for some, and great use is made of the extra time at our disposal for individual coaching in the "three R's".

B. A. PAYNE,
Headmistress.

9. SPECIAL TUITION (HOME AND HOSPITAL)

Four children had home tuition in 1957. They suffered from nephritis, haemophilia, poliomyelitis and a psychiatric disorder.

Six children received education whilst in hospital special schools.

	<i>Males</i>	<i>Females</i>
Haldane House, Bexhill	1	—
Heatherwood Hospital, Ascot, Berkshire ..	3	1
Goldie Leigh Hospital, Abbey Wood, London	—	1

In addition seven children received tuition for short periods whilst they were in hospital.

10. DENTAL CLINIC

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

SESSIONS

The number of sessions devoted to inspection and treatment were:

The Principal School Dental Officer	414
School Dental Officer	396

Of these, 47 sessions were devoted to inspections and 763 to treatment. In addition, the Orthodontic Specialist carried out 51 sessions.

GENERAL SERVICES

At the 47 sessions devoted to periodic inspections, 6,265 children were seen in the following age groups:

Number of individual children inspected during 1957 :

<i>Age</i>	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	<i>Total</i>
<i>Inspected</i>	96	409	491	455	592	633	797	720	558	576	520	257	96	35	24	6	6,265

At the request of parents, a further 192 children were inspected at the Clinic. Of the gross total of 6,457 children inspected 2,684, a percentage of 43, were found to require treatment. The number of sessions devoted to treatment was 763 and 2,060 children made 7,420 attendances.

The following is a summary of the treatment given:

Fillings :

Permanent teeth	2,463
Temporary teeth	239
	————— 2,702

Number of teeth filled :

Permanent teeth	1,864
Temporary teeth	193
	————— 2,057

Extractions :

Permanent teeth	..	..	..	..	464	
Temporary teeth	..	..	..	..	1,129	
					—	1,593

Administration of general anaesthetics 949

Other operations :

Permanent teeth	..	..	..	..	3,011	
Temporary teeth	..	..	..	..	641	
					—	3,652

Cases commenced during the year	..	..				40
Cases carried forward from previous year	..					79
Cases completed during the year	..	..				30
Cases discontinued during the year	..	..				12
Pupils treated with appliances	..	..	..	..		69
Removable appliances fitted	..	..	..	..		69
Fixed appliances fitted	..	..	..	..		40
Total attendances	..	..	..	..		1,196

Number of pupils supplied with artificial dentures 20

During the year routine dental inspections were carried out at all the schools maintained by the Authority. At these inspections 6,265 children were examined. These, together with the 192 special applications for treatment made a total of 6,457 children seen, of whom 2,684 were found to require treatment and 2,060 were actually treated. The numbers referred for treatment (43 per cent.) showed a decrease of 1 per cent. compared with the previous year.

Treatment was mainly provided in the two surgeries at the Avenue House Clinic, but in order to avoid loss of school time, conservative work was carried out on the school premises in the cases of the more outlying schools, namely, Hampden Park Secondary, Highfield Primary and Langney Primary. Cases from these schools requiring a general anaesthetic for extractions were referred to the Avenue House Clinic.

Routine inspections occupied 47 sessions and 814 sessions were devoted to treatment, including 51 special orthodontic sessions. Two thousand four hundred and sixty-three fillings were inserted into permanent teeth and 239 into temporary teeth. Extractions totalled 1,593, of which 464 were permanent teeth. The majority of these extractions were carried out under general anaesthesia, nitrous oxide and oxygen with the additional use on occasions of a trilene vapouriser. The apparatus used for these administrations, which totalled 949, is a McKesson Anaesthesor.

To replace the loss of permanent teeth, usually the upper front teeth damaged beyond repair in accidents, 27 artificial dentures were constructed. The Department is equipped with its own X-ray apparatus and radiological examinations were carried out on 230 children; these varying from a single exposure for the diagnosis of suspected sepsis to the full mouth examination for the presence and position of unerupted teeth, a measure so essential in the treatment of orthodontic cases.

Mr. Norman Gray, the visiting Orthodontic Specialist, held 51 clinics during the year, assisted by his partner, Mr. H. G. Griffith, and also by Mr. J. W. Martin, the School Dental Officer. Seventy-eight children were treated at these clinics and made 782 attendances. The demand for orthodontic treatment continues to be heavy and at the end of the year 52 children were on the waiting list. Thirty-five children suffering from mal-occlusion of a less severe nature were treated in the ordinary clinics and made 414 attendances.

In a survey of the year's work in the dental department, it can be said that the general dental condition of the school children is satisfactory. The number of cases where extensive work is necessary is diminishing, although constant watch has to be kept, particularly on the older age groups to diagnose and treat early interstitial caries. With a slight easing of the pressure on purely technical work, I feel that a little more time can be spared in the future to encourage a higher degree of oral hygiene. We have, unfortunately, no panacea available to deal with dental ailments, but must continue to reiterate the cardinal points of any caries control programme, namely, well-formed teeth, well-cleaned teeth, and well-used teeth. This latter point, the importance of well-used teeth, is emphasised by a recent report from the United States of America. A research party was commissioned to investigate the general living conditions of several near-primitive peoples in Mexico and South America who were reputed to have an exceedingly low caries rate. They found in these tribes very little dental caries, but a tremendous divergence in diet. Some had a high carbohydrate intake and a low protein intake, some vice versa. Some a high sugar intake and again some a very low sugar intake. The only factor that could be found to be common to all was that a considerable part of their diet needed vigorous chewing and the investigating team were impressed by the very highly-developed muscles of mastication. I feel that here we have a point that we can successfully hope to "put over" in any dental health education scheme. To change radically the dietic habits of a civilised community is a very difficult task, but to encourage successfully the including in at least a part of the diet, of some reasonably palatable substance that really requires forcible chewing should not be beyond the realms of possibility.

MAURICE G. BERRY, L.D.S., R.C.S.,

Principal School Dental Officer.

11. DIFFICULT AND PROBLEM FAMILIES

(a) Each case is so different and the problems so complex that a short paragraph can give no true picture of the hours of tiring work that these families can need. It was considered that twenty-seven families came in this category, eight of them being particularly time-consuming. Every effort is made to ensure that co-ordination between the social workers involved (Health Visitors, Welfare Officers, School Attendance Officer, Housing Officer, Children's Officer, N.S.P.C.C. Inspector, Probation Officer and a representative from the National Assistance Board) produces a consistent and constructive approach.

(b) THE NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

Mr. B. H. Rich, the local inspector, assisted the Department in fourteen cases involving forty children, of whom sixteen were of school age. Eighty-one visits were paid to these families. The cases were classified as:

Neglect	9
Assault	1
Unregistered foster child	2
Advice sought	2
	—
	14
	—

The Inspector also dealt with 81 other families. Of the 205 children in these families, 120 were of school age.

The classifications were:

Neglect	35
Ill-treatment and assault	5
Beyond control	2
Moral danger	4
Advice or aid sought	33
Unregistered foster child	2
	—
	81
	—

(c) JUVENILE CRIME. The Chief Constable, Mr. R. W. Walker, has kindly supplied the following statistics:

	<i>Males</i>	<i>Females</i>
Sent to Approved School	5	1
Probation	11	1
Convicted—conditional discharge	2	—
Convicted—absolute discharge	2	—
Fined	1	—
Otherwise disposed of	1	—
	—	—
	22	2
Cautions	48	3
	—	—
	70	5
	—	—

12. EMPLOYMENT OF CHILDREN

The Department, in close co-operation with the Youth Employment Service, completed during the year 466 medical reports in respect of children who left the secondary modern schools, indicating where necessary, types of employment likely to be unsuitable for medical reasons.

Under the Byelaws, children in employment must produce a medical certificate to the effect that their employment will not be prejudicial to their health or development and will not render them unfit to benefit fully from their education. Numbers of children examined for this purpose in the last five years are as follows:

1953	1954	1955	1956	1957
82	90	140	152	201

The increase is to some extent attributable to the amendment of the Byelaws which came into force on 1st September, 1956, which allowed schoolchildren to do morning paper deliveries.

It is rare indeed for a child to be turned down on medical grounds, and it may well be that this requirement is an outdated procedure. In my view the interests of the child would be adequately safeguarded if it were left for teachers to inform the school medical officer of any case where employment was suspected of being prejudicial to health.

13. PROVISION OF CLOTHING

EDUCATION (MISCELLANEOUS PROVISIONS) ACT, 1948, SECTION 5

Various articles of clothing were supplied by the Education Authority to eighteen children from fifteen families. Many articles of clothing were also obtained from voluntary sources, mainly the Women's Voluntary Service.

14. SCHOOL MEALS AND MILK

During 1957 the total number of mid-day meals served was 648,332, of which 25,137 were free. This was 29,023 less than the total for the previous year. On 1st April the cost to the children was raised to 1s. per meal. It is this increased charge which seems to be the main reason for the decrease in the number of meals served, for since that date the weekly totals have remained at a consistent level below those of 1956.

As always, a check has been kept on the nutritional content of the meals served.

In September the Cavendish County Secondary School opened in Whitley Road, where some 45 children are receiving their mid-day meal from the Central Kitchen.

The Milk in Schools Scheme has continued to function and one-third pint bottles of milk are provided for all primary and secondary school children who wish to have them. The following table shows the number of children in maintained schools taking meals and milk on a given day in October. On this day school attendance was down due to the epidemic of influenza.

	PRIMARY AND SECONDARY DEPARTMENT					
	MEALS				MILK	
<i>A day in October</i>	<i>No. of Children in Schools</i>	<i>Free</i>	<i>Paid</i>	<i>Percentage taking Meals</i>	<i>Total</i>	<i>Percentage</i>
1957	6,028	105	2,875	49.6	5,395	89.5
1956	6,306	114	3,086	50.7	5,557	88.1

15. NOTIFICATION OF INFECTIOUS DISEASE

The following notifications of infectious disease in children of school age were received in the Department:

Scarlet Fever	..	..	..	..	..	1
Acute Poliomyelitis (Paralytic)	..	..	..	..	..	1
Acute Poliomyelitis (Non-paralytic)	..	..	..	..	..	1
Whooping Cough	..	..	..	..	..	72
Measles	..	..	..	..	..	215

INFLUENZA

The epidemic which swept the country in the autumn, affecting all ages of the population, showed its effects in considerable absenteeism from the schools during October. For instance on the 2nd, 3rd and 4th of October, there were 128 (48 per cent.) absent from St. Joseph's, 138 (31 per cent.) from the High School, 249 (30 per cent.) from Ratton Secondary, 125 (29 per cent.) from the Grammar School and also 127 (21 per cent.) absent from Bedewell Secondary. In general the younger children were much less affected.

16. TUBERCULOSIS

No cases of tuberculosis were notified in children of school age during the year.

B.C.G. VACCINATION AGAINST TUBERCULOSIS

For some years children known to be contacts of cases of tuberculosis have been offered this vaccine (Bacille Calmette-Guérin) during the routine preventive measures taken by the Chest Clinic staff, and in this connection eight children of school age were vaccinated. More children were known contacts but many are found after a simple skin test to have acquired a degree of immunity already, and it is only to those whose skin test shows no such immunity that the vaccine is given.

B.C.G. was also offered to all thirteen-year-old children in the Borough. Details and application forms were sent to the parents of 635

children. A total of 438 received the preliminary skin test, thirty-one of these being from private schools. Forty (two from private schools) gave a positive skin reaction indicating past infection. They were not vaccinated. Apart from one child who is seen regularly at a Chest Clinic in London and three who missed the appointment, these "positive" children were sent to the X-ray Unit at Brighton, where one was found to need supervision by the Chest Clinic.

The remaining 398 children were vaccinated.

17. DIPHTHERIA IMMUNISATION

The number of children between the ages of five and fifteen years immunised by the medical staff of the department and those in these age groups in respect of whom records were sent in by general medical practitioners are as follows:

	<i>By Medical Staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Totals</i>
Primary Immunisation	19	15	34
Reinforcing Doses	462	93	555

According to our school medical records at the end of the year, 5,716 out of 6,597 children on the school registers had been immunised, giving a percentage of approximately 86.

18. DEATHS OF SCHOOLCHILDREN

One boy of fourteen years died during the year. Cause of death was:

- 1a Fulminating bronchial peri pneumonia
- b Influenza

19. TRAINING COLLEGES

Close liaison is maintained between the department and both training colleges in the town. Lectures were given by members of the staff to the students and three sessions at Eastbourne Training College and eleven sessions at Chelsea College of Physical Education were held during the year for medical examinations.

Valuable help was received from staff and students of Chelsea College in holding classes for handicapped children and those with minor postural and orthopaedic defects. These were held not only in the clinic but also in schools and in the swimming bath and gave children the benefit of individual specialist attention.

MINISTRY OF EDUCATION
MEDICAL INSPECTION RETURNS

YEAR ENDED 31ST DECEMBER, 1957
Local Education Authority : EASTBOURNE

TABLE I
**Medical Inspection of Pupils attending Maintained
Primary and Secondary Schools
(including Special Schools)**
(This return refers to a complete calendar year)

A—PERIODIC MEDICAL INSPECTIONS

Age groups inspected and number of pupils examined in each:

Entrants	568
10 Year Old	644
14 Year Old	445
Total	1,657
Additional Periodic Inspections*	320
Grand Total	1,977

B—OTHER INSPECTIONS

Number of Special Inspections	614
Number of Re-inspections	1,597
Total	2,211

C—PUPILS FOUND TO REQUIRE TREATMENT

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

<i>Age Groups Inspected</i> (1)	<i>For defective vision (exclud- ing squint)</i> (2)	<i>For any of the other conditions recorded in Table III</i> (3)	<i>Total individual pupils</i> (4)
Entrants	19	65	78
10 Year Old	65	80	129
14 Year Old	66	19	80
Total	150	164	287
Additional Periodic Inspections*	63	32	83
Grand Total	213	196	370

*E.g., Pupils at special schools or who missed the usual periodic examination

D—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED
IN THE AGE GROUPS RECORDED IN TABLE I.A

Age Groups Inspected (1)	Number of Pupils Inspected (2)	Satisfactory		Unsatisfactory	
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2 (6)
Entrants	568	561	98·77	7	1·23
10 Year Old	644	631	97·98	13	2·02
14 Year Old	445	437	98·20	8	1·80
Additional Periodic Inspections ..	320	317	99·06	3	·94
Total	1,977	1,946	98·43	31	1·57

NOTE ON TABLE I

The arrangements made by the Authority for the medical inspection of pupils attending schools maintained by the Authority are those prescribed in Regulation 10 (1) (a) of the School Health Service and Handicapped Pupils Regulations, 1953, which requires:

“a general medical inspection of every pupil on not less than three occasions at appropriate intervals during the period of his compulsory school age and other medical inspections of any pupil on such occasions as may be necessary or desirable:

Provided that there may be fewer than three general medical inspections for any pupil who attends schools maintained by the Authority for less than the period of his compulsory school age or, if the Minister approves, for all pupils.”

TABLE II

Infestation with Vermin

- (i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons 13,469
- (ii) Total number of *individual* pupils found to be infested 49
- (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) —
- (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) —

TABLE III

Return of Defects Found by Medical Inspection in the Year ended 31st December, 1957

A—PERIODIC INSPECTIONS

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS				TOTAL (including all other age groups inspected)	
		Entrants		Leavers		Requiring Treatment (7)	Requiring Observation (8)
		Requiring Treatment (3)	Requiring Observation (4)	Requiring Treatment (5)	Requiring Observation (6)		
(1)	(2)						
4	Skin	5	21	8	8	29	51
5	Eyes:						
	a. Vision	19	85	66	29	213	226
	b. Squint	10	3	—	8	23	33
	c. Other	—	5	1	1	2	16
6	Ears:						
	a. Hearing	2	17	—	3	3	31
	b. Otitis Media ..	—	9	—	5	5	19
	c. Other	—	8	—	—	2	11
7	Nose and Throat ..	3	67	3	11	12	124
8	Speech	6	14	—	4	8	27
9	Lymphatic Glands ..	2	30	—	3	3	52
10	Heart	1	4	—	4	3	17
11	Lungs	2	28	—	6	3	60
12	Developmental:						
	a. Hernia	3	6	—	2	4	11
	b. Other	—	16	—	—	4	34
13	Orthopaedic:						
	a. Posture	1	19	4	18	30	67
	b. Feet	7	24	—	5	16	52
	c. Other	23	42	4	15	57	107
14	Nervous System:						
	a. Epilepsy	—	—	—	3	—	4
	b. Other	—	5	—	2	—	10
15	Psychological:						
	a. Development ..	—	4	—	5	1	20
	b. Stability	—	26	—	6	5	90
16	Abdomen	—	5	—	—	—	11
17	Other	—	4	—	5	9	37

B—SPECIAL INSPECTIONS

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment (3)	Requiring Observation (4)
(1)	(2)		
4	Skin	20	1
5	Eyes:		
	a. Vision	63	10
	b. Squint	4	—
	c. Other	11	1
6	Ears:		
	a. Hearing	4	2
	b. Otitis Media	1	—
	c. Other	8	—
7	Nose and Throat	26	5
8	Speech	22	2
9	Lymphatic Glands	—	1
10	Heart	—	5
11	Lungs	10	2
12	Developmental:		
	a. Hernia	—	—
	b. Other	15	7
13	Orthopaedic:		
	a. Posture	9	—
	b. Feet	1	1
	c. Other	31	5
14	Nervous System:		
	a. Epilepsy	2	2
	b. Other	2	—
15	Psychological:		
	a. Development	—	—
	b. Stability	20	6
16	Abdomen	1	1
17	Other	48	4

TABLE IV

Treatment of Pupils attending Maintained Primary and Secondary Schools (including Special Schools)

Notes—In Groups 1, 2 and 3 treatment includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, (*i.e.*, whether by periodic inspection, special inspection, or otherwise during the year in question or previously) or provided otherwise than by the Authority (*i.e.*, known by the Authority to have been provided, including treatment carried out in school clinics by the Regional Hospital Board).

GROUP 1—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	<i>Number of cases known to have been dealt with</i>	
	<i>By the Authority</i>	<i>Otherwise</i>
External and other, excluding errors of refraction and squint.	77	44
Errors of refraction (including squint)	—	451
Total	77	495
Number of pupils for whom spectacles were prescribed	—	293*

* Under Supp. Ophthalmic Service

GROUP 2—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	<i>Number of cases known to have been treated</i>	
	<i>By the Authority</i>	<i>Otherwise</i>
Received operative treatment:		
(a) for diseases of the ear	—	1
(b) for adenoids and chronic tonsilitis	—	102
(c) for other nose and throat conditions	—	1
Received other forms of treatment	27	110
Total	27	214
Total number of pupils in schools who are known to have been provided with hearing aids:		
(a) in 1957	—	—
(b) in previous years	—	7

GROUP 3—ORTHOPAEDIC AND POSTURAL DEFECTS

	<i>By the Authority</i>	<i>Otherwise</i>
Number of pupils known to have been treated at clinics or out-patient departments	—	50

GROUP 4—DISEASES OF THE SKIN (excluding uncleanliness for which see Table II)

	<i>Number of cases treated or under treatment during the year by the Authority</i>
Ringworm—(i) Scalp	—
(ii) Body	4
Scabies	2
Impetigo	55
Other skin diseases	392
Total	453

GROUP 5—CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	By the Psychiatrist 85
	By the Psychologist 92

GROUP 6—SPEECH THERAPY

Number of pupils treated by Speech Therapists under arrangements made by the Authority	87
--	----

GROUP 7—OTHER TREATMENT GIVEN

(a) Number of cases of miscellaneous minor ailments treated by the Authority ..	232
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	358 <i>(School children's Scheme)</i> 9 <i>(Contact Scheme)</i>
(d) Other than (a), (b) and (c) above (specify)	—
Total (a)–(d)	599

(13) Other operations:					
Permanent Teeth	..	..	..	..	3,011
Temporary Teeth	..	..	..	..	<u>641</u>
Total (13)..	..	..	..	..	<u>3,652</u>

INDEX

	<i>Page</i>
Aged, Provision for	45
Agencies for Nurses	72
Ambulance Service	32
Animals Slaughtered for Food	55
Ante-Natal Care	17
Bacteriology	60
Baths, Swimming and Individual	52
B.C.G. Vaccination	39
Births	15
Blind Persons	47
Camping Sites	66
Cancer	14
Care of Mothers and Young Children	17
Cerebral Palsy	74
Chest Physician's Report	39
Child Minders	72
Children Act, 1948	72
Child Welfare Clinics	20
Chiropody Service	49
Convalescence	35
Cripples	49
Day Nurseries	23
Deaf and Dumb	48
Deaths, Causes of	13
Dental Care	22
Diphtheria Immunisation	28
Domestic Help Service	40
Epilepsy	74
Factories Acts, Inspections	67
Defects	68
Outwork	69
Food Inspection	53
Food Poisoning	50
Health Education	36
Health Visiting	25
Home Nursing	26
Homes, Mother and Baby	17
Old People's	72
Residential	72
Registration of	49
Voluntary	46
Housing, Action under Statutory Powers	62
Inspection of Dwelling Houses	62
Ice Cream	59
Immunisation, Diphtheria	28
Whooping Cough	31
Infant Mortality	19
Infectious Diseases, Notifications	50
Information, Summary of Local	15
Lunacy and Mental Treatment Acts	42
Maternal Mortality	18
Meat, Inspection	55
Medical Aid	25

	<i>Page</i>
Medical Examinations	73
Mental Deficiency Acts	42
Mental Health Service	41
Meteorology	75
Midwives Service	25
Midwives Act	74
Milk Supply	57
Mother and Baby Homes	20
National Assistance Act	45
Notifications, Births	15
Infectious Diseases	50
N.S.P.C.C.	73
Nurseries and Child Minders Regulations Act	72
Nursery, Day	23
Nurses' Agencies	72
Nursing Equipment, Loan of	36
Nursing Homes	72
Occupation Centre	43
Old People's Organisations	49
Post-Natal Care	18
Premature Infants, Care of	20
Prevention of Illness, Care and After Care	35
Rag Flock and Other Filling Materials Act, 1951	67
Reception Centre	47
Registration, Blind Persons	48
Dairies and Milk Distributors	58
Disabled and Old Persons Homes	45
Nurseries and Child Minders	72
Nursing Homes	72
Rodent Control	69
St. John Ambulance Brigade	32
Sanitary Circumstances of Area	52
Sanitary Administration	53
Sampling, Food and Drugs	61
Ice Cream	60
Milk	58
Shops Act	66
Smallpox Vaccination	28
Smoking, Lung Cancer	37
Still Births	12
Swimming Baths	52
Tuberculosis, B.C.G. Vaccination	31
Chest Physician's Report	39
Register	40
Statistics	37
Unmarried Mothers	20
Vaccination against Poliomyelitis	31
Vaccination against Smallpox	28
Venereal Diseases	51
Vital Statistics	12
Voluntary Organisations	36
Water	52
Welfare Foods	21
Whooping Cough Immunisation	31

SCHOOL HEALTH SERVICE
INDEX

	<i>Page</i>
Child Guidance	107
Chiropody	87
Clinics	84
Deaths	101
Defects and Treatment	86
Dental Care	95
Difficult and Problem Families	97
Diphtheria Immunisation	101
Employment of Children	98
Follow-Up	86
Foot Inspection	87
Handicapped Children	92
Infectious Disease	100
Medical and Special Inspections	86
Medical Inspection Returns	102
Personal Hygiene	85
Provision of Clothing	99
School Hygiene	85
School Meals and Milk	99
Special Tuition	95
Statistics	85
Tuberculosis	100

